DOI: https://doi.org/10.63582/KINCS.BO.EN.2021.2.23

Dr. György János Velkey



Paediatrician, paediatric anaesthesiology and intensive care specialist, health manager. Director General of the Bethesda Children’s Hospital of the Reformed Church in Hungary. Awardee of the Officer’s Cross of the Hungarian Order of Merit. He has five children.

Recommendation

The job description of a paediatrician does not include the obligation to have children. Nor is it a prerequisite for the director general of a children’s hospital to have personal experience of what it means to be a parent. There is certainly no requirement to have five children in addition to medical and managerial responsibilities.

György Velkey is a paediatrician, paediatric anaesthesiologist and intensive care specialist, director general of the Bethesda Children’s Hospital and vice-president of the Hungarian Hospital Association, father of five children and proud grandfather. All of these tasks and responsibilities are almost too long to list. Yet it is easy to see how closely linked they are, how logically their different mandates follow on from one another. No doubt, paediatricians choose their profession because they love children, and therefore want to have a family themselves. And when you have your own children, especially five of them, the weight of responsibility for the future is even greater, and this is followed by the responsibility of leadership and advocacy. This is also true in reverse: if you are bringing up five children with your spouse in a loving environment, you will certainly feel more empathy for someone who comes to you with a sick daughter or son. Such a person is more familiar with the worry, the protective love, the vulnerability, the anxiety, the longing for security, the impatience, the acceptance and rejection, the pain, and the loss. In this way, he or she has a deeper insight into the perspective of mothers, fathers, grandparents, brothers and sisters – in other words families when making decisions about the organisation

of work in a health care institution. At the same time, a paediatrician is familiar with the sacrifice, the on-call roster, the sleeplessness, the difficulty of coping with absence, the sense of the indescribable pain caused by the serious illness or loss of a child, all of which is part and parcel of the work of paediatricians and nurses.

György Velkey is a father, grandfather and leader. At the heart of his healing work is the family with all the attention, presence, respect and love devoted to them. This is how he organises healthcare at Bethesda and how he treats his staff. This is why not only have thousands of children left his institution cured, but their families also take with them the attention and love they receive here. Our respect and thanks!

Katalin Novák

Family-friendly health care

Talking about family friendliness today is a brave and outspoken thing to do because the term and its meaning are not really trendy. Questioning the family is part of the zeitgeist. However, the basic cell of the human community that has been unshaken over the course of history is far more obvious and irreplaceable than passing fashion might suggest. At the boundary of health and disease, the family is particularly important in the course of the disease and in the logistics of care. Health care is more efficient and effective if it focuses on this essential community and builds on its resources.

I suggest that anybody who questions the role and importance of the family spend a few days in a children's ward or hospice. Directly or indirectly, the question of family, its joy or lack of it, its strength or weakness, its influence to make somebody ill or heal them, are vibrantly present around patients at almost every moment. It is professional evidence that a loving and caring family prevents much harm and makes recovery speedier and more effective. As a paediatric anaesthesiologist, I have clearly seen the difference in the risk of complications when children are anxiously awaiting surgery alone or when they are prepared for anaesthesia together with a loving mother.

Family-friendly health care is a notion which, in the "anointed halls of the medical profession", is dismissed by many who suggest that it is a mere slogan in communications to make heavy-duty health care more "sellable". But it is more than that.

> *The family is a protective factor, because technology and money increasingly muscle in among people in the health system.*

On the one hand, modern, innovative health care can produce admirable professional and financial results, but on the other hand, it also alienates and creates resentment in the abandoned person – which undermines its effectiveness. Today, it has become an elementary societal expectation that health care should be freed from vulnerability, time constraints and humiliating communication situations. But besides a family-focused approach to care, supporting the families of health workers at risk of burnout in a sector suffering from staff shortages is also a recognised human resource policy challenge. Multi-shift and on-call working patterns, physical and mental stress can take their toll on spouses, children and parents – so the other leg of family-friendly health care is caring for the families of the staff.

It is no coincidence that in the last decade the medical and nursing professions, the hospital system and families as well as health policy have found their way to family-friendly health care almost simultaneously, reinforcing one another, but following their own logic of pathfinding.

In recent years, professional work in various fields of medicine, primarily in obstetrics, and in neonatal units as well as in infant and childcare institutions, has focused on families. The baby-friendly hospital accreditation system was kept alive through the issue of breastfeeding by the dedicated work of the National Commission for the Promotion of Breastfeeding in the less sympathetic years. Nineteen hospitals and clinics have managed to meet these criteria that are in fact principles of family-friendliness. Blossoming for a few decades, the science of social paediatrics has made paediatricians aware of the importance of the family surrounding the child. The psychosomatic sensibility of modern child health care has deepened this approach and methodology, leading

to a succession of family-friendly initiatives in children's hospitals and clinics around the country.

In 2017, the primary aim of the Hungarian Hospital Association was to improve the working and living conditions of nurses, while at the same time keeping in mind the interests of the patients, and seeking ways to function in a more humane fashion.

Drawing on its experiences acquired in other areas, the Three Princes, Three Princesses Movement has become a partner. This is how the Family-friendly Hospital Department Award was created, and has been won by 52 hospital departments over the past three years. Every year since 2019, a hospital earns the prestigious Family-friendly Hospital Award. In 2021 seven hospitals were among those rewarded through a competitive scheme that invited applicants where family-friendly innovations had been established in relation to the coronavirus pandemic.

Our hospital, the Bethesda Children's Hospital of the Reformed Church in Hungary, was the second health care institution in the country to become a family-friendly hospital. Even before that, our burns unit, intensive care, infant, neurology and rehabilitation wards had received the Family-friendly Department Award.

What are we doing for families? Just a few examples: we organise family camps and weekends for children with serious illnesses (e.g. epileptic children, wheelchair-bound children, and children who have suffered severe burns), together with siblings and parents; we provide family pastoral care along with accommodation and board for parents of children who need to stay in hospital for several weeks; we communicate on an ongoing basis in social media and through mainstream print and electronic media to promote health awareness; and we have published our own hospital storybook to acquaint children with staff and care facilities. No less important are the family days open to the children of our staff, the running and rowing races, the hospital school we set up for the children during the pandemic, and the popular day camps that we organise every year. But perhaps even more important is the joint search for flexible forms of employment that are sensitive to family situations.

The Government has conceptualised family-friendly health care in the context of obstetric practice. In its Decision 1059 of 2017 (7 February), the Government states its commitment to creating a family-friendly environment in the healthcare sector. The Decision put forth the idea of a mother- and baby-friendly systems organisation based on the new spirit of obstetric care in Church hospitals. While it contained radically new and family-friendly elements, it was still in keeping with the prevailing spirit of the age and international nomenclature. The furthering of this process has led to a new measure mobilising considerable resources, embodied in Government Decision 1098 of 2018 (19 March), which sets out a firm action plan and "family-friendly" government actions in various fields including health, as well as announcing the restructuring of obstetric and neonatal care. In light of this, the considerable financial and intellectual capital provides hope for a transformation of mindset.

A family-centred approach opens up new perspectives for the entire health sector. Synergic processes are underway in obstetrics and paediatrics, as well as in hospitals and public administration. There is also a huge potential in this area in terms of prevention and treatment of common and widespread diseases: health communication and public health can be more effective if a family-focused action plan is developed. A family-centred approach embraced by the health sector could perhaps also help family members to reach out to each other.