

# Family Centered Care

REPUBLIC OF KENYA



MINISTRY OF HEALTH



University of Nairobi



KENYA  
PAEDIATRIC  
ASSOCIATION

**KEMRI** | Wellcome Trust



**Keprecon**  
Kenya Paediatric Research Consortium

# Objectives

- Define Family Centered Care (FCC)
- Describe the partners in FCC and their roles
- Discuss the components and goals of FCC
- Outline the outcomes and benefits of FCC
- Describe Pain Management

# Definition

- Family Centered Care (FCC) is an approach to care delivery that promotes **a mutually beneficial partnership** among parents, families and health-care providers to support health-care planning, delivery and evaluation
- FCC is working **with** babies and their families, **rather than just doing “to” and “for” them.**

# Partners in FCC

## Families

- Include Mother, Father, Mother in Law, Grandmother, Siblings, Relatives



## Staff

- Include nurses, clinicians, nutritionists, psychologists/counsellors, rehabilitation therapists, social workers and chaplains



## The Facility/Unit System (building blocks)

- Includes the other staff, stuff, space and supporting system



# Partners in FCC - Roles

## **Families should;**

1. Be aware of their rights during admission
2. Communicate their needs, preferences, choices & plans
3. Supported to cope with their baby's admission/death

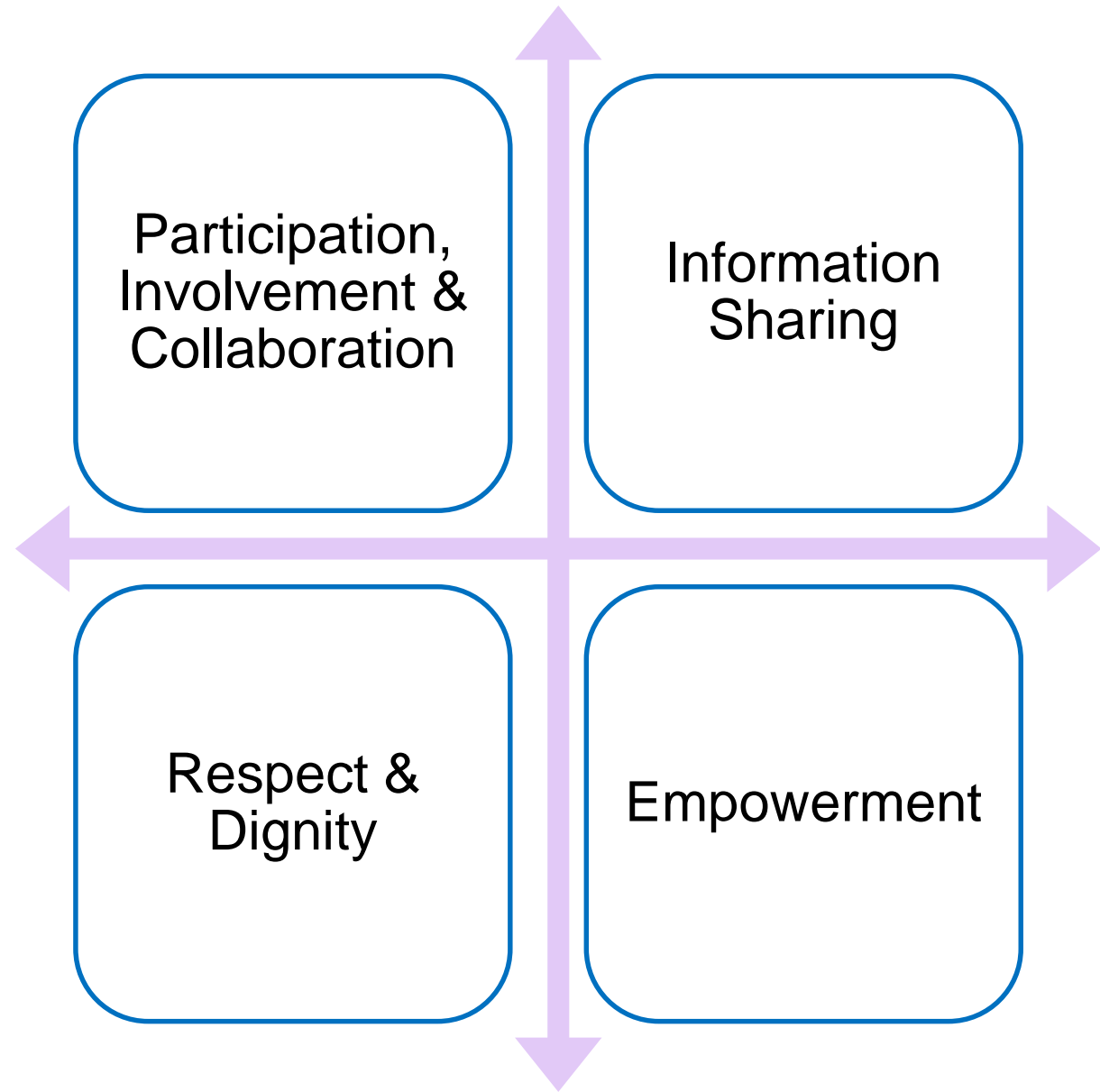
## **Staff Should;**

1. Know and proficiently implement the components of respectful FCC
2. Be effective communicators
3. Support families going through loss and grief
4. Create forums to offer parents education as well as peer to peer support.

## **The Facility/Unit System should have;**

1. Enough staff, stuff, space to support respectful FCC
2. A culture that encourages respectful & dignified FCC

# Components of FCC



These components should be implemented as a bundle

# The effect of FCC

## Immediate Result

- Humane and dignified interactions
- Efficient Sharing of information
- Collaboration as equal partners
- Participation in care team based on each partners ability and choice
- Decisions made together
- Better care during bereavement

## Outcomes

- Adherence to treatments plans
- Improved pain management
- Less anxiety and stress
- Reduced length of stay
- Improved satisfaction
- Improved communication
- Enhanced learning environment

## Benefits

- Improved quality of care
- Reduced unnecessary diagnostic tests and referrals
- Decreased medical errors and infection rates
- Fewer readmissions
- Decreased lengths of stay
- More efficient and effective use of professional time and healthcare resources
- Decreased complaints

# Pain Management





# Why do Neonates feel more pain than adults?

- The number and types of peripheral pain receptors is similar to adults by 20 – 24 weeks gestation. Neonates have a greater density per area of skin
- Neonates have a slower conduction rate due to incomplete myelination but they have a shorter length of pain receptor pathway
- Adaptive mechanisms that can modulate painful stimuli do not develop until 32 – 36 weeks of post conceptional age

# Pain Assessment

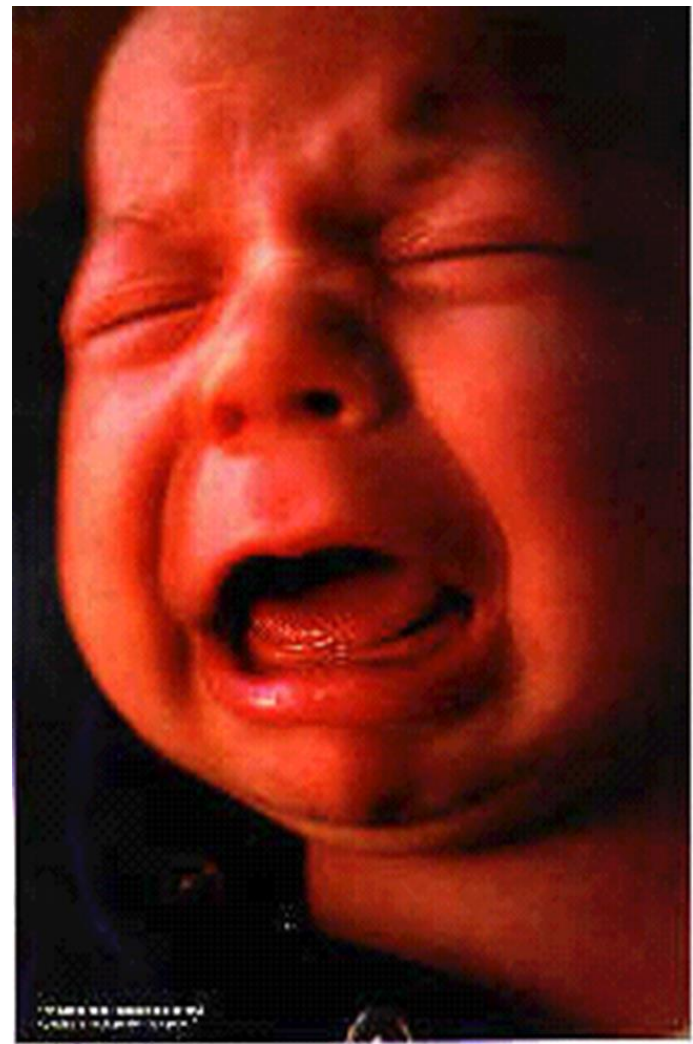
- Cry/Irritability – high pitched, high intensity, long duration, inconsolable
- Upper and lower limb movements – finger splaying, saluting, sitting on air, arms and legs flexion/extension, swiping motions of the unaffected lower limb as if to remove painful stimulus
- Activity – awake, active
- Facial expression (next slide)

# Pain Assessment



Facial expression of physical distress and pain in the infant

Reproduced with permission from Wong DL, Mack CS, Wong and Whaley's Clinical Manual of Pediatric Nursing, Ed. 5, 2000, Mosby, St. Louis



# Managing Acute Pain in Newborns

1. Breast feed at least 2 minutes before the procedure and continue throughout and after the procedure. The baby should also be skin-to-skin with the mother
2. Those not able to breast feed should have 2mls of expressed breast milk (EBM) given into the mouth using a 2ml syringe at least 2 minutes before the procedure
3. If no EBM available, 2mls of 10% dextrose or 0.4mls/kg of 50% dextrose should be given into the mouth at least 2 minutes before the procedure

# Questions

# Summary

1. The family, staff and system need to partner to implement FCC
2. The components of FCC should be implemented as a bundle
3. Always assess and manage pain by breastfeeding