

Date Last Revised: 2/26/25 Date Last Reviewed:

Owner: Danielle Fischenich-PECC Area: ThedaCare Neenah Emergency Department

Applicability: Family Centered Care Guidelines

Family Centered Care

I. SCOPE:

To establish the Nursing standards for the involvement of family, caretakers, guardians during the care for the pediatric patient. To provide resources as necessary upon discharge of pediatric patient.

II. PURPOSE STATEMENT:

To offer family members, when appropriate, to be present at the bedside during the entire scope of patients care, to include invasive procedures, discharge planning and instructions, and resuscitation interventions. Patient and family centered care among patients, families, and health care providers applies to patient of all ages in any healthcare setting.

Communication is an essential tool for accurate diagnosis, development of a treatment plan, and ongoing psychological and physical continued evaluation and stabilization. Involving the patient, family, and caregiver in patient education, treatment plan, and discharge is important to improve patient outcomes. It provides a support system for the patient. Family involvement enhances overall understanding of disease process and treatment options. It improves patient follow through as family can remind patient about medication, appointments, and treatments. Caregivers should be involved in medication administration, dosing, and safety. Lastly, family and caretaker involvement will likely have a positive impact on mental health as involvement can reduce stress and anxiety.

Family presence during resuscitation efforts can facilitate the grieving process by brining a sense of reality that all treatment efforts were provided and the patient's clinical status. The knowledge that all medical interventions were exhausted and witnessing of resuscitative efforts can help families better cope with their loss. The social worker can be utilized as a liaison to enhance communication between team members and family.

Family centered care may also identify needs and concerns that may not be able to be managed within the hospital setting. It may be necessary to provide multi-cultural resources for access to support groups, follow up information for reduced cost medical and dental care, and resources for housing and food insecurities.

III. Resources: Utilization of resources to facilitate family centered care.

A. In hospital resources

- a. **Family Facilitator-** This role may be established by the Charge Nurse, Social Worker, Nursing Supervisor, or another nurse assigned to the role. The family facilitator will not be assigned to direct patient care roles. To facilitate family presence the facilitator will be in communication with lead provider and primary RN to determine if family presence is appropriate. The facilitator will then have a conversation with family to determine if family desires to be present during critical care or resuscitative effort. The facilitator will remain with the family during their time in the room to explain care and procedures. They will determine appropriateness for family to remain in the room. The facilitator is a critical role to providing updated information to family members as necessary. If the

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family member is unable to control their behaviors, emotions are too distracting to team members, or they are impeding in patient care the facilitator may escort the family member to a waiting area for more updates. The family facilitator will act as a bridge to promote shared decision making between the family, nursing staff, and provider.

- b. Trauma social worker- A social worker employed in the hospital who has been trained to support and coach patients and families who have been involved in a traumatic experience. They may serve as a bridge between care team providers, patients, and family members. Trauma social workers are located in the Emergency Department 8 am- 4 pm, and are automatically notified of any activated Level I or Level II traumas. Social workers are on call after 4 pm and may be utilized for non-traumatic patients as well, such as PNB, drownings, or child abuse situations.
- c. Charge Nurse- Leads the department and provides patient care. The charge nurse may act as a liaison between patients and family to provide an understanding of care being provided. They may act as a resource to connect the patient with a sending or receiving facility, or transport team. The charge nurse may delegate tasks to other staff, and coordinate resources and supplies to ensure a smooth transition for patients and family.
- d. Hospital Supervisor- Manages the day to day operations of the hospital. The hospital supervisor has a broad knowledge of community and hospital resources and may be able to expedite care. They may be a resource at the bedside to support and update family of care being provided.
- e. Child Life Specialist- Is a health care professional who specializes in providing developmentally appropriate support to patients and family members. They support children and their families to cope with the challenges of illness, injury, disability, trauma, or hospitalization. Child life may be involved in any aspect of care the RN may deem necessary or appropriate, not limited to death, active resuscitation, trauma, painful procedures, and MCI events. The Child Life Specialist may be able to support creating bereavement memories for families and assisting in the care of a child with special needs. Please call the Peds Charge Nurse to contact the Child Life Specialist.
- f. Children's Hospital Fox Valley Charge RN/Staff Nurses. Leads the inpatient department at Children's Hospital FV. They may act as a liaison between patients and families to provide understanding of care being provided. They may support primary RN with IV placement or blood specimen collection. They may act as a connection between admitting and receiving hospitals to facilitate smooth transition and handoff. The Charge Nurse may be able to support creating bereavement memories for families and assisting in the care of a child with special needs.
- g. Children's Hospital Fox Valley Hospitalist. Pediatric Hospitalist is a Pediatrician who specialized in comprehensive family center care for pediatric patient's and their families in the hospital. Hospitalist can be reached through the Sharewell paging system or a direct call.
- h. Mr. Yuck Stickers.

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- i. Tylenol and Motrin medication dosing charts highlighting child's weight and appropriate dosing instructions.
- j. Fetal demise packet.
- a. Secondary out of hospital resources following discharge.
 - a. School Guidance Counselor
 - b. Counseling Services
 - i. Catalpa Health-Catalpa Health is a pediatric outpatient mental health and wellness organization. They specialize in seeing children birth through 18 years of age in psychiatry, psychology, and therapy. Referrals can be made by the trauma social worker. ED RNs communicate patient information to social workers through email or secure chat.
 1. Collective Counseling and Consultation, Multicultural Agency. <https://www.collectivewi.com/> 1-414-367-9155
 2. US 2 Behavioral health Care INC. <https://us2bhc.org/> 1-920-903-1060
 3. Rawhide. <https://www.rawhide.org/youth-counseling/> 1-920-982-6100
 4. REACH Counseling. <https://www.reachcounseling.com/> 1-920-722-8150
 5. NAMI. <https://www.namifoxvalley.org/> 1-920-954-1550
 - b. Bereavement Resources
 1. Grieving Parents
 1. Boys and Girls Clubs of the Fox Valley. For any parent who has experienced the death of a child, newborn to 18 years of age. Boys & Girls Club of the Fox Valley, 160 S Badger Avenue, Appleton. An orientation with the Center's Director is required. Contact Loris Damerow at 920-750-5839 ldamerow@bgclubfoxvalley.org
 2. Pregnancy loss, stillborn, ectopic pregnancy, or neonatal death please refer to blue OB packets
 2. Grieving Children
 1. Center for Grieving Children. The center conducts an evening family night program on the second and fourth Tuesday of every month. Activities are designed for the sharing of feelings, life experiences, and memories. The evening ends with a candlelight commemorative ceremony. A one-time orientation with the director is required. Contact Erin Hollister at 920-750-5839 or ehollister@bgclubfoxvalley.org.
 2. Camp Hope. A weekend Program providing an atmosphere of love and acceptance for children to express themselves follow the death of a love one. Camp takes place at Wisconsin Lions Camp in Rosholt, Wisconsin in spring and fall. No fee. Contact by calling 1-715-341-0076 or email camphope89@gmail.com.
 3. Children and Teen Grief Support Network for children and teens who have experienced a loss. Boys and Girls Club, 501 E. Parkway Avenue, Oshkosh. A one-time orientation with the coordinator is required.

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Applicability: Family Centered Care Guidelines

Contact Julie Morris at 920-233-1414 ext 30 or email

juliem@bgcosh.org.

3. Peer Support

1. Children ages 3-18, and their caregivers, who have experienced the death of an important person in their lives. Groups meet twice a month at the Boys and Girls Club, 160 S. Badger Avenue, Appleton. Program provides small support groups and a meal, all together. A one-time family orientation is required. Contact Erin Hollister at 920-750-5839 or ehollister@bgclubfoxvalley.org.

1. Teen Group- Teens ages 13-18 meet on the 2nd and 4th Tuesday of every month at the Boys and Girls Club, 160 S Badger St, Appleton. Erin Hollister at 920-750-5839 or ehollister@bgclubfoxvalley.org.

c. Health Care

1. Mosaic Family Health. <https://www.mosaicfamilyhealth.org/> 1-920-832-2783
2. Partnership Community Health Center-Medical and Dental. 1-920-731-7445
3. Hope Clinic. 1-920-931-1150
4. Planned Parenthood. 1-844-493-1052
5. VIDA. <https://vidamedicalclinic.org/> 1-920-731-4354

d. LGBTQ Resources

1. LGBTQ+ Healthcare directory. <https://lgbtqhealthcaredirectory.org/>
2. Diverse & Resilient. <https://www.diverseandresilient.org/> 1-920-416-8711

e. Housing Insecurities

1. Home Base. <https://www.bgclubfoxvalley.org/homebase/> 1-920-750-5837
2. House of Hope <https://www.houseofhopegb.org/youth-resources> 1-920-884-6740
3. LEAVEN. <https://leavenfoxcities.org/> 1-738-9635
4. Wisconsin Dept of Children and Families. <https://dcf.wisconsin.gov/ea> 1-855-757-4539
5. Pillars. <https://pillarsinc.org/> 1-920-734-9192
6. Father Carr's Place. <https://fathercarrs.org/> 1-920-231-2378
7. Christine Ann Domestic Abuse Services. <https://www.christineann.net/> 1-920-235-5998
8. COTS. <https://appletoncots.org/> 1-920-734-3609
9. 211. <https://211wisconsin.communityos.org/> 211

f. Crisis

1. 988. 24/7 hotline. 988
2. Outagamie County Crisis
3. Winnebago County Crisis
4. Calumet County Crisis
5. Harbor House. <https://harborhousewi.org/> 1-920-832-1666
6. 211. <https://211wisconsin.communityos.org/> 211
7. Veterans Crisis Line. 1-800-273-8255

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- g. Human Trafficking
 - 1. 5-stones. <https://5-stones.org/> 1-920-388-9596
 - 2. Human Trafficking Hotline. 1-888-373-7888
- h. Multicultural support
 - 1. Multicultural Coalition INC. <https://ourmci.org/> 1-920-574-3253 #4
 - 2. People of Progression. <https://peopleofprogression.com/> 1-920-815-9487
 - 3. CASA Hispana. <https://www.casahispanawi.org/> 1-920-257-5699
 - 4. HMONG American Partnership. <https://www.hapfv.org/> 1-920-205-4020
 - 5. Hope and Help Together. <https://www.hopeandhelptogether.com/> 1-920-249-4675
- i. Addiction and Recovery Services
 - 1. West Grove Clinic LLC. <https://www.westgroveclinic.com/> 1-920-574-3096
 - 2. 211. <https://211wisconsin.communityos.org/> 211
- j. Child Abuse Prevention
 - 1. B.A.B.E.S. Child Abuse Prevention. <https://babeshelp.org/> 1-920-733-6886
- k. Hygiene and Diaper supplies
 - 1. The Hope Center. <https://www.hope-center.org/> 1-920-739-0039
- l. Economic Support
 - 1. Wisconsin Department of Health Services. <https://www.dhs.wisconsin.gov/> 1-888-256-4563
- m. Food Pantry
 - 1. Multiple food pantries available. Please see website and print copies. https://www.co.winnebago.wi.us/sites/default/files/uploaded-files/mealsites_and_pantry_list.pdf

IV. DEFINITION:

A. Family is defined as a one or more parent and their children living together as a unit, legal guardian, or an authorized adult caregiver.

B. Bereavement resources is the offering of memory gifts, support groups and counseling, and other services to support a family member during the loss of a loved one.

V. REFERENCES

Emergency Nurse Association (ENA) guidelines for Presenting the Option of Family Presence, Park Ridge, IL, ENA, 1995.

Levetown, Marcia, 2008. Communicating with Children and Families: From Everyday Interactions to Skill in Conveying Distressing Information. Pediatrics. Volume 121, Number 5. DOI: 10.1542/peds.2008-0565

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Daskalakis, C. Dastgheyb, S. Fischlock, K. Kessel, J. Rosen, P. 2018. Evaluating comfort measures for commonly performed painful procedures in pediatric patients. National Library of Medicine. DOI: 10.2147/JPR.S156136

VI. Attachments

A. Bereavement Memory Items. These items will be stored in Target. Please contact Child Life Specialist or CHOW RN to see if they are available to help with this prior to offering it to family. TCN ED RNs will not be trained on making these items.

Memory Items



Handprints/Footprints



Hand/Foot Molds



Lock of Hair



Fingerprint Pendant

Max quantities:
Hand/Foot Molds: 2
Handprints/Footprints: 6
Fingerprint Pendants: 6
Locks of Hair: 6