

Medical Disclaimer

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Children’s Hospital and Health System Patient Care Policy and Procedure

This policy applies to the following entity(s):

Milwaukee Hospital

SUBJECT: Family Presence Program in the Emergency Department/Trauma Center (EDTC) for Trauma STAT Activations

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Definitions

Caregiver: A parent, family member or court appointed legal guardian who can provide personal information on the patient. This may also include an individual who has cared for the patient for a significant amount of time who can provide personal information on the patient.

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Family Presence Program in the EDTC/ Process Owner: Trauma APN/ ED Social Worker



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Presence: The physical attendance in the trauma room where care is being provided to the patient.

Social Worker/Chaplain or designee: A trained professional assigned to the family of a patient to provide emotional and psychological support. When the Social Worker/Chaplain is unavailable, the designee may be the Patient Care Services Supervisor or other appointed personnel.

Resuscitation: A sequence of events, including invasive procedures, which are initiated to sustain life and or prevent further deterioration of the patient's condition.

POLICY

All patients and families entering the EDTC will be assessed for participation in the Family Presence Program by social worker/chaplain or designee. They will determine the appropriateness of family presence in accordance with the provisions and guidelines listed below. The Family Presence Program is a process by which families, as defined below, are offered to be in the EDTC trauma room, with the support of Children's staff, to be in the presence of the patient.

If a language barrier exists, please refer to the Language Services Policy and Procedure. A Social Worker/Chaplain or designee will be present with the family in the trauma room at all times.

No more than 2 family members may enter the trauma room at the same time. If additional family members are present in the EDTC, those family members will wait in the EDTC waiting room or other area as determined by security.

If siblings or other children are present, and no Children's staff are available to stay with them, one family member must stay in quiet room or waiting room with the children. Sibling Care may be utilized per Patient Care Policy and Procedure: Sibling Care.

If a family member or Children's staff is unavailable to stay with the children, the Family Presence Program may not be offered until appropriate staff is available.

If a death occurs in the trauma room, all bereavement services will be made available to the family please reference the Patient Care Policy: Care of the Dying Patient and Disposition of a Body.

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Family members who exhibit evidence of uncontrolled emotional outbursts, violent behavior, or other disruptive behavior will be restricted or removed from the trauma room during that time as assessed by the Social Worker, Chaplain, Security or designee.

When a resuscitation progresses to an open surgical procedure (i.e., open chest cavity), the family may be removed from the trauma room or excluded from the room if the procedure is underway, which is determined by the team.

The Family Presence Program will not be offered if the safety of the Trauma team staff and or patient is at risk as per assessment of Social Worker/Chaplain, Security or designee.

Law enforcement may restrict family members from entering the trauma room for purposes of safety or evidence collection.

PROCEDURE

1. Social Worker/Chaplain or Designee Informs Trauma Team

- a. The Social Worker/Chaplain or designee will ask team leader if family presence can be offered.
- b. Family presence may be removed at any time due to procedures, safety of the treating team, or at the discretion of the team leader or other trauma team members.

2. Patient and Family Assessment

- a. An assessment of the family's desires and needs will be initiated as soon as appropriate by the Social Worker/Chaplain or designee. Please reference Appendix A.
- b. The Social Worker/Chaplain or designee will meet with family to gather pertinent medical information and ask questions to determine the family's perceptions, desires, willingness and comfort with being present in the trauma room. This will include: previous experiences, customary coping strategies and established support systems.
- c. The family shall be supported without judgment whether they choose to be present in the trauma room or not. Whether a family chooses to be present or not, the decision shall be supported without judgment.

3. Information Sharing from Social Worker/Chaplain or Designee to Trauma Team

The Social Worker/Chaplain or designee informs the Nurse Liaison of family decision and gives health information to team such as allergies, immunization status, etc. _Social Worker/Chaplain or designee prepares family

- a. The family will be informed:
 - i. how many family members may enter the room at one time,
 - ii. where they will stand initially,

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- iii. when and if they will be able to move to the bedside,
 - iv. why they may be asked to step out of the room,
 - v. any other pertinent factors to the situations.
- b. Social Worker/Chaplain or designee talks to family about what they will see and hear in the trauma room
- 4. Family is Brought into the Trauma Room**
- a. Family is brought to the area designated in the trauma room which is behind the red line closest to the trauma doors.
 - b. Personal Protective Equipment (PPE) is not necessary for families; PPE will be worn by the Social Worker/Chaplain or designee if they will cross the red line located on the floor of the trauma room.
 - c. The Social Worker/Chaplain or designee remains with the family members at all times
 - d. The Attending Trauma Team Leader or Physician designee will update the family briefly before exiting the room. If the family is in the family quiet room, the Attending Trauma Team Leader or Physician designee will speak to the family there after the patient and team leave the trauma room.
- 5. Family accompanies patient out of room**
- a. If patient is to go to CAT scan (CT) the family may remain in the EDTC waiting room or may accompany the patient to the CT scanner and wait in a consultation room only if decided by Social Worker/Chaplain or designee.
 - b. If the patient is transferred to another room or to a hospital room, the Social Worker/Chaplain or designee will accompany the family to their next destination (OR waiting room, patient room, or unit waiting room).
 - c. The Social Worker/Chaplain or designee will remain with the family until care has been transferred from the Trauma Team to the operating room or hospital unit.
 - d. If the patient is going to the operating room the Social Worker/Chaplain or designee will instruct the family that they will not be able to enter the operating room. They will be able to enter the patient room after the child is transferred, settled, and assessed.
- 6. In Case of Impending Patient Death with Family in Trauma Room**
- a. Every effort will be made to move the family to the bedside before death is pronounced.
 - b. The family will be given time to grieve as necessary.

Documentation:

The Social Worker/Chaplain or designee will document family presence in the trauma room, the response of the family to the trauma and the relationship of family members present. When the family is not present in the trauma room, the reason will be documented.

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Approved by the Joint Clinical Practice Council June 15, 2020

Appendix A: Guidelines for Social Worker/Chaplain or Designee:

- Introduces self to the family and.
- Assesses the family's emotional and psychosocial support needs and initiates measures to meet those needs.
- Family should be assessed for appropriateness and potential physical reactions to being in the trauma room.
- Prepares the family for the trauma room
- Offers and provides comfort measures (i.e., water, coffee, Kleenex, etc)
- Accompanies and remains with the family in the trauma room
- Provides support through facilitating with Trauma Liaison:
 - a. Explanations of interventions

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- b. Advocating for medical updates and explanations from medical team.
- c. Allows opportunity for questions
- Continually assesses family throughout process
- Documents assessment

Available Resources:

Chaplain

Child Life Specialist (for families with siblings)/

ED Social Worker /

EDTC Patient Care Supervisor/

EDTC UB APN

Patient Care Manager On-Call/

Patient Care Services Supervisor

Trauma APN

Trauma Program Manager

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