



- Family centered care (FCC) is the model of care followed at CHW.
- Requires collaborative partnership open and ongoing communication.
- Respect that the family is the constant in the child's life and build on their strengths.
- Family is defined by the Family may not be a "traditional" family.

Social/Emotional

- Stress can increase defense mechanisms. Look for signs of overload, unhealthy coping.
- Altered family life
 - Hospitalization is challenging for a family. Access resources for families.
- Professional boundaries of care
 - Keep it in check. If you feel uncomfortable, follow your gut and discuss it with a peer or objective listener.
- Palliative care
 - Follow the child's lead and keep family updated.
 - Utilize support measures for family and your self.
 - Prepare the family for the physical process of death.

Communication

- Give it in small doses. Be clear and honest, but remember you might have a young child present that could misinterpret information.
- Keep them connected. If they can't be there, set up a check in system and inform them of changes by phone.
- Remove barriers; environmental is it a good time/place? Assess and access interpreter services. If an interpreter is not available in-house-use CyraCom phone translation. <u>http://intranet.chw.org/display/displayFile.asp?docid=9060&filename=/Groups/FamilySer</u> vices/PhoneJobAid06.pdf
- Care across the continuum
 - Families need you to help them communicate and sometimes advocate for optimum support of their child's health and well being.
- Document all education and helpful information for the interdisciplinary team.

Hospital Considerations

- Families of children with special needs
 - Developmental approach Inquire about:
 - Ambulation, self care, ADL (the parents are the expert-ask!)
 - o What family members are involved in their life
 - Include other important family members: siblings, grandparents, friends from school.

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