What is Family-Centered Care?
Jim Burrows – Family Advisory Council Member

The Institute for Patient- and Family-Centered Care (www.ipfcc.org) defines family-centered care as “an approach to the planning, delivery, and evaluation of health care that is grounded in mutually beneficial partnerships among health care providers, patients, and families. It redefines the relationships in health care.” The Institute also lists the “core concepts” of family-centered care:

- **Respect and Dignity** – Health care practitioners listen to and honor patient and family perspectives and choices. Patient and family knowledge, values, beliefs and cultural backgrounds are incorporated into the planning and delivery of care.
- **Information Sharing** – Health care practitioners communicate and share complete and unbiased information with patients and families in ways that are affirming and useful. Patients and families receive timely, complete, and accurate information in order to effectively participate in care and decision-making.
- **Participation** – Patients and families are encouraged and supported in participating in care and decision-making at the level they choose.
- **Collaboration** – Patients and families are also included on an institution-wide basis. Health care leaders collaborate with patients and families in policy and program development, implementation and evaluation, in health care facility design, and in professional education, as well as in the delivery of care.¹

While these core concepts clearly state the goals of family-centered care, they still are open to interpretation by patients and families. For example, there are no standard family “values, beliefs and cultural backgrounds” to use when referring to respect and dignity. Every family is different, and the hospital staff strives to recognize that and take those differences into consideration during interactions. Information is to be shared with patients and families “in ways that are affirming and useful.” Information that may be useful to one family may not be to another. It is based on that family’s preference. A family’s participation in their child’s care should be at the level they choose. One family may want to be heavily involved while others may not. The beauty (and challenge) of providing family-centered care is that “one size does NOT fit all.”

continued on page 4

© 2011. The Nemours Foundation. Nemours is a registered trademark of the Nemours Foundation.

**Facebook**
Help spread the word about the hospital’s Facebook page: [www.facebook.com/aiduponthehospital](http://www.facebook.com/aiduponthehospital). “Like” this page, then share it with family and friends.
Staying Hydrated in the Summer Heat
Dr. Alexandra Taylor

Summer months are known for kids getting outside and having fun. But with outdoor activities comes caution about the risks for dehydration. We lose body fluids daily, but in the summer months this increases as our bodies cool by evaporating sweat and radiating heat through our skin. The fluid lost, along with the salt it contains, is usually replaced through our regular diet. Circumstances such as high temperatures, high humidity, and vigorous exercise cause children to lose large amounts of water and salts. When these are not replaced, children may become dehydrated and experience other heat related illnesses.

Recognizing Dehydration
If your child is sweating profusely on a hot day, watch for these signs of dehydration:
- Dry or sticky mouth
- Few or no tears when crying
- Eyes that look sunken into the head
- Lack of urine
- Dry, cool skin
- Lethargy or irritability
- Fatigue or dizziness

Preventing Dehydration, Staying Hydrated
The best way to prevent dehydration is to make sure children receive plenty of fluids while they are physically active, consuming more than they lose. It is also important that children hydrate often during hot weather. Children participating in sports or strenuous activities should drink fluids before the activity begins and hydrate at regular intervals (every 20 to 30 minutes) during the course of the activity as well as after it ends. Ideally, sports practices and competitions should be scheduled for early morning or late afternoon to avoid the heat of the day.

Improved Visitor Badge Program Implemented
As parents, there may be nothing of higher priority than the health and safety of our children. Nemours shares in these feelings and when it comes to providing a safe environment in our hospital, we are committed to doing whatever it takes.

Since 2008, a dedicated team of Nemours Associates, led by the Nemours Alfred I. duPont Hospital for Children Patient Relations Department, has overseen the inpatient visitor and family provider badge program. While the initial badge program helped alleviate some primary concerns about safety within the hospital, the Patient Relations group recognized that problems remained with the badging program and more could be done to ensure the safety of our patients, families, and visitors.

In April, Nemours introduced its new, state-of-the-art badging system, called EasyLobby. Badging stations are located in the hospital’s main lobby, outpatient lobby, Cardiac Care Unit, Surgical Services, and Emergency Services.

All visitors and family care providers entering duPont Hospital for Children are now required to obtain a visitor badge before going on to an inpatient care unit. In order to be issued a badge, your identification card or driver’s license will be scanned at the badging station. The information will then be stored in the badging system database.
Thirst is not a reliable sign of dehydration. By the time a child feels thirsty, dehydration may have already occurred. Also, thirst can be quenched before the necessary body fluids have been replaced, so make sure children hydrate before thirst develops and continue even after thirst is quenched.

**Treating Dehydration**

It is important for parents to recognize the early signs of dehydration and to respond quickly if they develop. The goal in treating dehydration is to replace fluids, restoring the body’s levels to normal. A child who is mildly dehydrated from overexertion will probably be thirsty and should be allowed to drink as much as desired.

Plain water is the rehydration fluid of choice. After the first hour or two, a child might need drinks containing sugar and electrolytes (salts) or food. However, many “sports” and “power” drinks contain caffeine or other stimulants which can worsen the effects of dehydration. It is important to check the ingredients of these kinds of fluids prior to offering them to your child. Also, the child should rest in a cool, shaded environment until the fluids have been replaced.

If you are treating your child for dehydration and feel there is no improvement or that the dehydration is worsening, call your doctor immediately or take your child to the nearest emergency department.

Alexandra Taylor, MD is a pediatric emergency medicine physician in the Department of Pediatrics at Nemours/Alfred I. duPont Hospital for Children.

---

**What is the Family Advisory Council?**

Founded in April 2005, the Family Advisory Council (FAC) of Nemours/Alfred I. duPont Hospital for Children is a group of approximately 20 families and members of the Nemours staff who meet monthly. The FAC is led by Parent Co-Chair, Jim Burrows, and Staff Co-Chair, Ed Woomer. The Council’s family members have experience with the duPont Hospital for Children in both inpatient and outpatient settings and in almost every specialty Nemours offers, providing great insight into the care Nemours delivers. The mission of the FAC is to contribute to the development and enhancement of family-centered care at the Nemours/Alfred I. duPont Hospital for Children and Nemours Children’s Clinics.

For more information, please call (302) 651-4014.
What is Family-Centered Care? (CONTINUED)

Being a parent of a medically-complex child and having spent many months at the hospital with my daughter, I can easily think of many personal examples of what I would consider family-centered care. Realizing that improvements can always be made, Nemours is taking its commitment to family-centered care to a new level this year. Providing family-centered care is an official objective on the organization’s strategy map. This means that every month, the strategy team will review initiatives designed to improve the delivery of family-centered care and the results. Additionally, a family member volunteer co-owns the objective, attends the strategy meetings and gives input to initiatives. This is a great example of Nemours’ commitment to collaborating with families on its journey to excellence. Other examples of collaboration include the hospital’s partnership with the Family Advisory Council and the goal to include family members on key hospital committees.

Measuring how well the hospital is providing family-centered care is very subjective. There is only one group who can truly say how well it is doing – families who bring their child to Nemours for treatment. Created by a family member (another example of collaboration), the “Family-Centered Care Index” is comprised of certain questions taken from the satisfaction survey families receive shortly after discharge. These questions focus on the core concepts of family-centered care. For example, on a one to five scale, families rate their perception of the degree to which staff respected their knowledge of their own child. The results of these questions are reviewed monthly with senior management and action plans are developed to drive continuous improvements.

All families who bring their children to Nemours/Alfred I. duPont Hospital for Children should expect to receive care that is family-centered. In turn, Nemours has made a commitment to provide family-centered care. That commitment is part of the overall Nemours pledge of “Your child. Our promise.”


Personal, Expert Care at the Nemours Outpatient Pharmacy

The Outpatient Pharmacy at the Nemours/Alfred I. duPont Hospital for Children is open to fill prescriptions for patients, including scripts from referring physicians. Families and visitors can also pick up over-the-counter medications at competitive prices and ask for a list of area pharmacies that can handle their prescription needs.

Conveniently located on the first floor at Starfish Street across from the Green Module, the pharmacy is open Monday through Friday, 9:00 a.m. to 5:30 p.m. To fill prescriptions, just present the doctor’s written or electronic prescription and your child’s prescription plan card. You can also pick up OTC meds for aches or allergies or purchase seasonal items and sundries.

“As the parent of a child who receives Nemours care, my family has had a lot of interaction with the pharmacy. The service we receive goes beyond your typical large pharmacy chain. When the pharmacy changed manufacturers for one of my daughter Amanda’s medications, they called us ahead of time to let us know that the color of the medication changed, but the strength and dosage was unchanged. When I go there, they know Amanda. At Nemours, she is a person and not a prescription number.”

– Jim Burrows, Co-Chair, Family Advisory Council

The knowledgeable Nemours pharmacy staff understands Nemours kids, families, and friends and will listen to your needs and requests. We welcome your visit, or call (302) 651-4649 for more information. Prescriptions can be faxed to (302) 651-4974.