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Patient- and Family-Centered Care and the Role of the Emergency Physician Providing Care to a Child in the Emergency Department

American Academy of Pediatrics, Committee on Pediatric Emergency Medicine, American College of Emergency Physicians and Pediatric Emergency Medicine Committee

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POLICY STATEMENT

Patient- and Family-Centered Care and the Role of the Emergency Physician Providing Care to a Child in the Emergency Department

Organizational Principles to Guide and Define the Child Health Care System and/or Improve the Health of All Children

AMERICAN ACADEMY OF PEDIATRICS
Committee on Pediatric Emergency Medicine

AMERICAN COLLEGE OF EMERGENCY PHYSICIANS
Pediatric Emergency Medicine Committee

ABSTRACT

Patient- and family-centered care is an approach to health care that recognizes the role of the family in providing medical care; encourages collaboration between the patient, family, and health care professionals; and honors individual and family strengths, cultures, traditions, and expertise. Although there are many opportunities for providing patient- and family-centered care in the emergency department, there are also challenges to doing so. The American Academy of Pediatrics and the American College of Emergency Physicians support promoting patient dignity, comfort, and autonomy; recognizing the patient and family as key decision-makers in the patient's medical care; recognizing the patient's experience and perspective in a culturally sensitive manner; acknowledging the interdependence of child and parent as well as the pediatric patient's evolving independence; encouraging family-member presence; providing information to the family during interventions; encouraging collaboration with other health care professionals; acknowledging the importance of the patient's medical home; and encouraging institutional policies for patient- and family-centered care.

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Key Words
patient- and family-centered care, family-centered care, family-member presence, cultural sensitivity, pediatric patient's medical home

Abbreviations
PFCC—patient- and family-centered care
ED— emergency department
AAP—American Academy of Pediatrics

INTRODUCTION

Patient- and family-centered care (PFCC) is an approach to health care that recognizes the integral role of the family and encourages mutually beneficial collaboration among the patient, family, and health care professionals. PFCC ensures the health and well-being of children and their families through a respectful family-professional partnership. It honors the strengths, cultures, traditions, and expertise that all members of this partnership bring to the relationship. PFCC is the standard of practice that results in high-quality services.[1] PFCC embraces the concepts that (1) we are providing care for a person, not a condition, (2) the patient is best understood in the context of his or her family, culture, values, and goals, and (3) honoring that context will result in better health care, safety, and patient satisfaction.

Although there are many opportunities for providing PFCC in the emergency department (ED), there are significant challenges to doing so.[2] Overcrowding and

acuity in the ED may result in delay or disruption of care, challenging the ability of ED staff to provide respectful and sensitive care. The lack of a previous relationship between patient/family and health care professionals and the acute nature prompting an ED visit can make it difficult to create an effective partnership. The many cultural and societal variations among families can increase the difficulty in identifying who is a child's legal guardian. Situations unique to the ED, such as the arrival of a child by ambulance without family, the unaccompanied minor seeking care without the knowledge of family, visits related to abuse or violence, time-sensitive invasive procedures including resuscitation efforts, and the unanticipated death of a child, require the most thoughtful advanced planning.[3–5]

The option of family-member presence during invasive procedures including resuscitation efforts has been recommended in a statement by the Ambulatory Pediatric Association[2] that was endorsed by the American Academy of Pediatrics (AAP) in November 2004. PFCC includes respect for the privacy of the patient and acknowledgment of the pediatric patient's evolving independence, especially with regard to reproductive issues. Communication between health care professionals in the ED and the child's medical home primary care physician who is accessible and community-based and offers coordinated, comprehensive, continuous, culturally effective care[6] will enhance support of PFCC in the ED.

The AAP and American College of Emergency Physicians have a long tradition of supporting PFCC and have issued independent and joint policy statements in the past.[7,8] This policy statement addresses the particular challenges in, and opportunities for, providing PFCC in the ED setting and is in concert with and as an adjunct to earlier statements.

RECOMMENDATIONS

The AAP and American College of Emergency Physicians support the following:

1. Knowledge of the patient's experience and perspective is essential to practice culturally effective care that promotes patient dignity, comfort, and autonomy.
2. The patient and family are key decision-makers regarding the patient's medical care.
3. The interdependence of child and parent, patient and family wishes for privacy, and the evolving independence of the pediatric patient should be respected.
4. The option of family-member presence should be encouraged for all aspects of ED care.
5. Information should be provided to the family during interventions regardless of the family's decision to be present or not.
6. PFCC encourages collaboration with other health care professionals along the continuum of care and acknowledgment of the importance of the patient's medical home to the patient's continued well-being.
7. Institutional policies should be developed for provision of PFCC through environmental design, practice, and staffing in collaboration with patients and their families.

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