

CRITERIA FOR CONSIDERATION AS A PEDIATRIC CASE STUDY IN A FAMILY-CENTERED CARE MONOGRAPH
American Academy of Pediatrics / National Center for Medical Home Implementation

The American Academy of Pediatrics, with support from the Maternal and Child Health Bureau, has commissioned a monograph on family-centered care. The Maternal and Child Health Bureau defines family-centered care as assuring “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 everyone brings to this relationship. Characterized by the family and health care team working collaboratively in care giving and decision making, family-centered care is the standard practice which results in high quality services.

The Academy and the author commissioned to develop the monograph are seeking examples of “best practices” in family-centered care from general pediatric practices. Practices will be invited to be interviewed by phone for a case study in April or May 2011. Individuals invited for interviews will include pediatricians, staff from pediatric practices and families of patients in the practice. Please respond to the following questions to be considered as a case study.

1. What is the name and location (city/state) of the general pediatric practice you would like to be considered for a case study?
2. Please provide information on the individual proposing this practice for consideration (name, relationship to practice, contact information).
3. Who from the practice would be the most appropriate to interview (including pediatricians, other clinical providers, and staff)?
4. Is the practice able to identify a family served by the practice who can attest that the practice is family-centered and would be available to share information, stories and/or examples of how the practice is family-centered?
5. Why is this general pediatric practice considered “family-centered”? Please provide specific examples.
6. The following are attributes of a family-centered practice are demonstrated by the practice. Please select one or more and describe in detail how the practice is family-centered:
 - a. Acknowledges the family as the constant in the child’s life
 - b. Builds on family strengths
 - c. Supports the child in learning about and participating in his/her care and decision-making
 - d. Honors cultural diversity and family traditions
 - e. Recognizes the importance of community-based services
 - f. Promotes an individual and developmental approach
 - g. Encourages family-to-family and peer support
 - h. Supports youth as they transition to adulthood
 - i. Develops policies, practices and systems that are family-friendly and family-centered in all settings
 - j. Celebrates successes and/or recognizes improved outcomes within the practice and with patients
7. What are specific tools or strategies (policies, practices and/or systems) used by the practice to create a family-centered environment (please be specific)?
8. How can these policies, practices and/or systems be replicated in other pediatric practices?
9. Please describe outcomes that have resulted from the family-centered care (e.g. changes in quality, outcome or cost metrics—the “high-quality service”):

For more information, please contact:

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