



Family Presence

Family means something different to each patient. Allowing a patient to define who their primary support person is, enables another partner in their care. We frequently interact with families and/or support persons throughout the course of a patient's care; **What is the value of including them as care giving partners?**

Research shows that the **presence** and **participation** of family members:

- provides cost savings
- enhances the patient/family experience of care
- improves management of chronic/acute illnesses
- enhances continuity of care
- prevents hospital readmissions



Research shows that isolating patients from the people who know them best places them at risk for:

- medical error
- emotional harm
- inconsistencies in care
- costly unnecessary care



- Family members are often viewed as passive visitors. How we communicate and interact **with** family members determines how involved or supportive they become.
- **Take the lead!** Don't wait for them to show initiative. Find ways to include them from the start!
- Ask them, "How would you like to support the care of your family member?"
- Communicate clearly with families about the expectations and parameters of family presence to avoid confusion.



Talk About Family Presence

Within AHS various practices already exist around family presence. Start the conversation and talk about family presence as a team!

Questions for consideration about family presence in your area:

Questions for frontline staff to discuss:

- In what ways do we currently involve families?
- What concerns do we have about embracing families as partners in care? What do I need in order to address this?
- In what areas could we work with families in providing quality care? How can we support them to take on these roles?
- How do we document and communicate a patient's preference around family presence on our unit?
- How do we connect with family members in discharge planning?
- In what ways do we communicate with families about the expectations and parameters of family presence?



Questions for Leaders to discuss:



- When has our family presence practice last been revisited?
- Does our current family presence practice reflect the seven AHS core values?
- How do we currently receive feedback about our family presence practice?
- How do we encourage or discourage families to become involved in the care of patients?
- What are the current attitudes, concerns and needs of the staff around family presence? How can I help to address these?
- What types of stories are common in our area around family presence?
- What are the current/future implications for staff around family presence?
- How can we include other frontline staff (food services, housekeeping etc) in our approach to family presence?