



MODULE IV – UNIT 1

EXTENDING PERSON-CENTERED CARE TO FAMILIES AND CHILDREN

INSTRUCTOR'S GUIDE

Estimated time for unit: 1 hour

1. Goals

- a) Define the concept of Person-Centered Care (PCC) and list its core principles
- b) Define the concept of Family Centered Care (FCC) and list its core principles
- c) Describe the principles of Child-Centered Care (CCC)
- d) Describe how CCC complements or extends traditional FCC
- e) Give an example of an FCC experience in pediatric hearing clinics, then expand the example to represent CCC

2. Concepts to master

- Different models of “centeredness” are used to describe the focus of health care. Family-centered, child-centered, and person-centered models of care share core principles, but have different foci.
- The 1989 United Nations “Convention on the Rights of the Child” affirms the right of every child to self-determination, dignity, respect, non-interference, and the right to make informed decisions. Pediatric audiology’s challenge is to support these rights in a family-respectful way.
- Ida Institute has developed a suite of tools to help audiologists support these rights.

3. Reading

Ford, K. et al. (2018). Child centred care: Challenging assumptions and repositioning children and young people. *Journal of Pediatric Nursing*, 43, e39-43.

4. Lectures

Overview: Extending Person-Centered Care to Families and Children

In this unit, we consider the history, principles, and concerns of Person-Centered, Family-Centered, and Child-Center Care, and then discuss a “reframing” article and relate it to pediatric audiology. Because the centeredness of care depends on child development, we consider a model of age-appropriate transitions from family-centered (ages 0-3) to person-centered (age 18+), and reflect on/discuss the questions, “What does it mean to be person-centered in pediatrics, and what is the role of the pediatric audiologist?”

The unit concludes with a preview of a suite of tools created by the Ida Institute designed to help hearing care professionals engage with and support children in family- and child-centered contexts.

5. Activity

Activity 1: Child-centered care/challenging assumptions

- Ask student(s) to read aloud the scenario in Ford et al. (2018) presented in “Tensions Inherent in Practice.”
- Identify some of the tensions depicted. Thoughts on our own emotional reactions to child’s situation? How might the child be feeling?
- Ask students to recall and jot down the details of one observed pediatric audiology appointment (age of child, family attendees, purpose of appointment, clinical procedures, etc.) and then compare reports.
- Which model of centeredness did they observe? If it was an FCC experience (i.e., paralleled the “shot” scenario), how might it have been expanded to CCC? How do these approaches differ?

Activity 2: Reflection/small group discussion

- Ask students to review notes on the three models of healthcare “centeredness” (person-centered, family-centered, child-centered). On a piece of paper, provide a response to these queries:
 - How does a pediatric audiologist practice child-centeredness?
 - What unresolved questions do you have?
- “Pair and Share” – discuss thoughts with a classmate.

6. Homework

Read and be prepared to discuss Schmulian, D., & Lind, C. (2020). Parental experiences of the diagnosis of permanent childhood hearing loss: a phenomenological study. *International Journal of Audiology*, 59(1), 54-60.