

By: Vicki Davis, R.N., B.S.  
Parent Orientation Committee  
Moffitt Pediatric Unit,  
UCSF, San Francisco



Dear Parent,

We realize that you play an essential part in your child's hospitalization. In order to make this experience as comfortable as possible, we have put together some basic information which will help you.

1.) Physical setting of the sixth floor.

The sixth floor consists of four separate units. Your child is being admitted to 6 north-south, which is primarily for children with medical problems. The three other units are: 6 east - the pediatric surgical unit; PSCU, Pediatric Special Care Unit - a five bed unit for children who need more specialized care; and 6 west - a five bed research unit. The floor also has a nurses' station, treatment room, playroom, schoolroom, outdoor courtyard, and waiting room with pay telephone, restrooms, and coffee machine.

2.) People who will be caring for your child.

During your child's hospitalization, you will come in contact with many people involved in the care of patients. Upon admission your child will be assigned to a specific team consisting of a medical specialist, a resident, an intern, members of the nursing staff, and a social worker. You may also come in contact with nursing students and medical students, as this is a teaching hospital.

Your doctors' names \_\_\_\_\_

Your nurses' names \_\_\_\_\_

Your social worker's name \_\_\_\_\_

& phone number \_\_\_\_\_

6 north-south phone number \_\_\_\_\_

During the night and on weekends there is an intern and resident always present. They may not be your assigned doctors, but they will be aware of the problems and needs of your child.

3.) Care Through Parents Program.

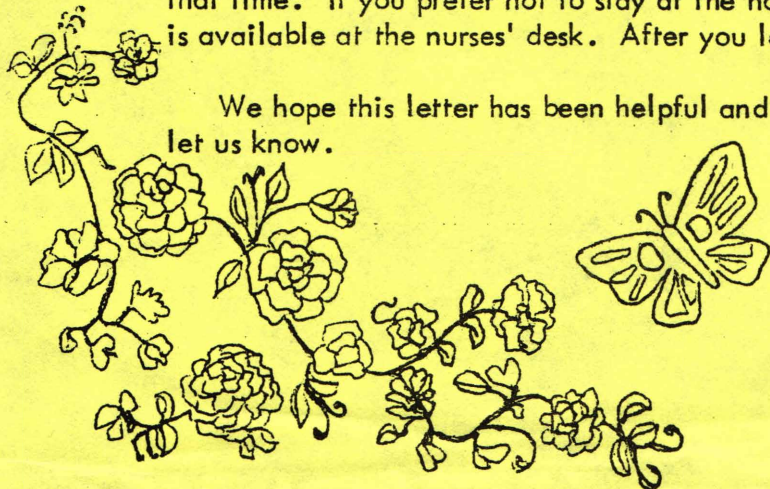
Moffitt Hospital has a Care Through Parents Program to bring together mothering, fathering, and nursing for your child's best interest. We encourage parents to participate in their child's care to the extent with which they feel comfortable. You may plan together with your nurse the activities in which you wish to participate, such as bathing, feeding, and soothing.

For all parents wishing to spend the night there is a mandatory meeting at 4 o'clock on weekdays in the schoolroom. Specific instructions for reserving parents' beds are given at that time. If you prefer not to stay at the hospital, a list of low-cost guest houses nearby is available at the nurses' desk. After you leave the hospital, feel free to call at any time.

We hope this letter has been helpful and if you have any questions or comments please let us know.

Sincerely,

The Nurses of 6 north-south



TO PARENTS FROM THE NURSES

Dear Parents,

We nurses realize that many frustrations arise when your child is hospitalized here. It is an extremely busy and confusing place, and parents often feel that they are not getting the attention from the staff that they certainly deserve; that their questions are not being answered; and that they have little control over what is happening to their child.

We don't have a perfect solution to these problems, but we do care about parents' feelings, and feel that much of the stresses of hospitalization can be alleviated by our meeting with you regularly a few times a week.

At these informal meetings we want you to feel free to discuss anything that is bothering you, offer suggestions, and ask any questions that you may have, or just chat and get to know us, for we nurses and parents do work together.

The meetings will be held Wednesday 4:30 pm to 5:30 pm in the school room. Coffee will be served.

We are looking forward to seeing you.

Sincerely,

The 6th Floor Nurses



Parent Orientation Questionnaire

Purpose of Questionnaire:

The nurses on the sixth floor are putting together a parent orientation program - a program to provide the parents with the information which they need and want concerning their child's hospitalization. We need the parent's help to determine what these needs and wants are. Please help us by answering the following questions:

*Let's talk about when*

1) [redacted] the nurse [redacted] admitted your child?

What are some things which she told you that were helpful?

What are some things you wish she had told you?

Would you have preferred to receive some of this information before coming to the hospital?

2) Has your child had any tests or been to surgery since admission?

Do you feel you received enough information about preparation for the procedure, and what to expect after the procedure?

3) Has your child been here before?

If so, do you feel the teaching you received on discharge was adequate?

4) Did you feel comfortable in our hospital setting?

Did you understand the daily routine and how you could participate in your child's care?

Thank you for your help.

## QUESTIONNAIRE

### Admission

Think back to when the nurse admitted your child:

1. What are some things which she told you that were helpful?
2. Would you have preferred to receive some of this information before coming to the hospital? What?
3. What things did you find out during hospitalization that would have helped you if you had known of them from the beginning?
  - a) from staff?
  - b) from other parents?

### Procedures

Has your child undergone major tests or been to surgery since admission? \_\_\_\_\_

1. Did you receive enough information and support concerning preparation for the procedure?

the procedure itself?

what to expect after the procedure?

2. Who provided this information?

3. If you had questions about the procedure, whom would you ask?

4. What information would have made or did make the process easier for you and the child?

### Hospitalization

1. What feelings/frustrations have you experienced during this hospitalization?  
e.g., ability or inability to ask questions, staff availability.
2. How were these feelings dealt with?
3. What might the nursing staff have done to assist you?
4. Do you feel comfortable in the hospital setting?
5. What role did you anticipate taking in the care of the child?
6. Did you understand the daily routine and how you could participate in the child's care?

### Discharge

Has your child been here before? \_\_\_\_\_

1. Did you receive information or teaching from nurses on discharge?
2. Do you feel you were adequately prepared for what to expect and what should be done for your child after discharge?
3. What more could have been done?

Thank you for your help.

Suggestions:  
(use back of page)

I. STATE PRIORITIES

1. Medical crisis - critical or unstable medical condition as designated by head nurse.
2. Breast feeding mothers - if leaving refrigerated breast milk is not possible.
3. Young children - ages 6 months to 6 years for the 1st and 2nd nights of the hospital stay.
4. Special considerations at the discretion of the nursing and social work staff.

II. RULES FOR STAYING

1. Mandatory attendance at daily meeting.
2. No using waiting room or sofas at the end of the hall as parent beds day or night. These are sitting areas only. No sleeping bags are to be brought to the floor for sleeping.
3. Only a minimum of storage is possible. Only bring belongings that will fit into your child's bedside table. We cannot be responsible for lost property.
4. Bedtime is between 7:30 p.m. and 8:30 p.m. Parents can help their child get ready for bed or can leave and allow the nurse to do so. Older children can watch television until 10:00 p.m.

PROCEDURES FOR SHOWING PARENTS

1. Show parents where beds are stored.
2. Beds are to be taken to the playroom and made up between 8:30 p.m. and 9:30 p.m. This will allow parents who retire early to sleep with a minimum of disturbance.
3. Stress to parents that beds and mats must be returned to storage room by 8:00 a.m. The playroom and schoolroom must be left neat to allow for daytime activities. ~~Any bed left out means the parent cannot use facilities again.~~ *Bed tone. Bill*
- To ask parents to help each other out.*
4. Show parents where linen is kept and where the laundry chute for soiled linen is. Request that they strip beds and mats when they will no longer be staying.
5. Take parents to shower on 6W. Stress importance of making arrangements with the nurse on 6W before using the facility and then cleaning it properly when finished.
6. Give parents adhesive stickers to label their beds with their names.
7. Show parents the restroom on the 6th floor. Tell them of the cafeteria on the 2nd floor. *Mention entertainment occasionally available in med sci auditorium*
8. Reiterate need for cleaning up after themselves.

*Smoking*

- III. Parents who are not priority and therefore unable to stay should be helped to make other arrangements. Parents may sit up in the waiting room area if they wish. Guest houses are generally available and may be shared with another parent to cut costs.

Stress that this program is for the hospitalized child and the parent who does stay is expected to participate in the child's care.

# UNIVERSITY OF CALIFORNIA, SAN FRANCISCO

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SANTA BARBARA • SANTA CRUZ

SCHOOL OF NURSING  
Department of Family Health Care Nursing  
N 411 Y

SAN FRANCISCO, CALIFORNIA 94143  
28 August 1975

Robert M. Reese, Director  
Development and Public Relations  
St. Eita's Hospital  
730 West Market Street  
Lima, Ohio 45801

Dear Robert:

Thank you for your letter of August 20. I am so glad you found the article on "Parenting During Hospitalization" useful. We are proud of our program which is now even better than when the article was written, because the staff nurses have developed new parent orientation materials. With their permission I am enclosing copies.

Vicki Davis, R.N., is chairman of the nurses' parent orientation committee. The group used several different questionnaires in order to assess parent needs. The first form was handled by parents interviewing other parents. This plan worked well, Miss Davis reports, but the nurses couldn't always find enough parents willing and able to serve as interviewers. The 3 page form - #2 - was given to parents to complete and turn in. This form was less successful because parents tended to give "yes" or "no" answers and to offer minimum information. The nurses and nursing students are currently using form 3 as they chat informally with parents, covering the issues mentioned on the form and completing the questionnaire themselves.

Out of the information gained, the two letters to parents emerged, as did the parent - nurse semi-weekly meetings. The unit also now boasts several bulletin boards with informal pictures of the nurses, identified by name, caring for patients, and of the medical residents and interns. A parent suggestion box for parents is consistently used. In addition to the nurse - parent meetings there are interdisciplinary ward management conferences, nurse - social worker meetings, and Pediatric Unit Advisory Committee meetings.

At present the nurses' committee, several students, a social worker and I are developing protocol sheets and play kits to prepare patients for specific procedures such as IVP, EKG, and X-Ray.

I enclose also an application to join the Association for the Care of Children in Hospitals. The Journal and the annual conference are most helpful in spreading ideas and methods for humanizing the pediatric environment. I hope that many of you in all the disciplines will join. Enclosed also is a brochure about the film we made back when the Care Through Parent program was evolving. You and your group might find it helpful.

Page 2  
Robert M. Reese

28 August 1975

I hope this material will be helpful to you. Your cause is an excellent one, and if your experience is similar to ours, I am confident that St. Rita's patients, parents and staff members will find the results rewarding.

Good luck and good wishes,

Carol Hardgrove  
Associate Clinical Professor

CH/gb  
Enclosures

*Get permission -*

TO PARENTS FROM THE NURSES

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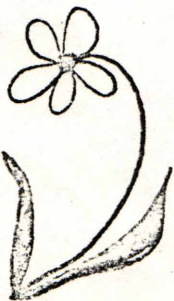
We are looking forward to seeing you.

Sincerely,

The 6 th Floor Nurses

*Don't forget 3 permission of nurses*

*Copyright: Parent Orientation Committee  
Moffitt Hospital  
University of California  
San Francisco, Calif*



191

UNIVERSITY OF CALIFORNIA SAN FRANCISCO  
NURSING SERVICE

CARE THROUGH PARENT PROGRAM - PARENT INFORMATION

The Care Through Parent Program is dedicated to helping children adjust to the hospitalization. Parents who wish to participate in this program are expected to assist in the care of their children. Because of the lack of space and facilities, we have had to develop a priority system based on the needs of children rather than the convenience of parents.

The priorities for staying overnight are:

1. Medical Crisis - this means children who are in a critical or unstable condition as designated by the charge nurse.
2. Breast feeding mothers - (Nursing mothers who prefer not to stay may leave refrigerated breast milk on the ward.)
3. Young children age six months to six years for the first and second nights of the hospital stay.

Those parents who do not meet the priority designations or who have stayed for the limits of their priority will be asked to make other arrangements for the remainder of the hospitalization. There are guest houses available close by the hospital and parents are encouraged to utilize them. One method for cutting down costs is to share a room with another parent. Lists of guest houses are available from the hospital's main information desk, your social worker or the nursing station. The 6th floor waiting room will not be used for parent beds. Parents may elect to sit up in the waiting room but because of space limitations, cannot use the chairs or sofa as beds. Because of fire regulations and possible pediatric emergencies, there can be no sleeping in multi-bed rooms or on the floor in corridors at any time day or night. Only one parent in a family may stay overnight at a time. Parents should decide which of them can best suit their child's needs. Fathers who will be the care giver can sleep in the school room. Parents can expect to be awakened during the night if their child needs care.

Sleeping bags cannot be brought to the hospital. Because of space limitations, we can only allow parents to utilize the playroom with the beds specifically provided.

Because of storage difficulties, parents are requested to bring only one small suitcase to the hospital for their clothing. Please bring only the barest minimum of belongings and these may be placed in your child's bedside table.

One week day 4:00 p.m. meeting in the school room is mandatory for bed assignment. If it is impossible for a parent to attend the meeting because of a conference with the doctor or because you are at a procedure with your child, speak to your nurse or social worker.

Bedtime is between 7:30 and 8:30. Parents can help their child get ready for bed or can leave and allow the nurse to do so. Older children can watch television until 10:00 p.m.

The staff on the sixth floor is trying to provide the best care possible for your child. The Care Through Parent Program is set up to improve that care. We ask your help and cooperation in meeting these needs.

UNIVERSITY OF CALIFORNIA SAN FRANCISCO  
NURSING SERVICE

Facilities on the Sixth Floor -- Moffitt

1. WASHER & DRYER -- in main Utility room. 25¢ to wash, 25¢ to dry. Detergent is available. Give money and ask for instructions from 6-East Unit Secretary.
2. SHOWER -- located on 6-West. Ask the nurse there what time you can use it. This facility is used by patients there, so the nurses set the shower times for parents according to the convenience of the unit.
3. WARMING OVEN -- located in main utility room. Good for keeping your child's meal warm if he/she is at a test or asleep when the meals are served.
4. COFFEE & TEA -- available at the 6 North/South nurses desk. The Parent Orientation Committee of the Sixth Floor supplies the coffee, cream, sugar and tea so there is a charge for the coffee and tea.
5. PAY PHONE -- in waiting room. Portable pay phone is available for the patients and can be plugged in almost all the rooms.
6. REST ROOMS -- located at left side of main elevators when coming off them.
7. PORCH -- for parents' use outside waiting room.
8. WAITING ROOM -- T.V., suggestion box, evaluation sheets for motels/hotels/guest houses you're staying in, daily newspaper, Redbook magazine, Parent magazine are available for your use. Please leave reading materials in waiting room for others to read.
9. SOCIAL WORKER's OFFICE -- Room                      Along corridor behind closed fire door in waiting room.
10. CLASS ROOM -- Reserved for parents' use 1 - 3 pm Mon., Tues., Thurs., & Fri.
11. PLAYROOM -- located at the end of the South wing. Parents are welcome to go in the playroom with their children during play hours. Room is also used as a sleeping area for parents who stay for the night.
12. MESSAGE BOARD -- Phone messages for 6 NS parents will be posted on the wall by the swinging gate in front of the main nurses' station.
13. BULLETIN BOARD -- in parents' waiting room. Lists of information available include: guesthouses, hotels, motels, restaurants, churches, shops, directions to and from hospital, UC map, 6th floor map and other tidbits you might be interested in knowing.

14. REST AREA at the end of the North wing looking out towards Golden Gate Park. However, smoking is not allowed in this area.
15. BULLETIN BOARD on the walls along the corridors ( 6 NS) has "pats & slaps" from parents and children to the doctors, nurses and other staff. Also has pictures of the doctors who are presently working on the 6th floor.

Prepared by :

The Parent Orientation Committee  
(Sixth Floor, Pediatrics)  
Moffitt Hospital, U.C.S.F.  
San Francisco

Dear Parent,

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1.) Physical setting of the sixth floor.

The sixth floor consists of four separate units. Your child is being admitted to 6 north-south, which is primarily for children with medical problems. The three other units are: 6 east - the pediatric surgical unit; PSCU, Pediatric Special Care Unit - a five bed unit for children who need more specialized care; and 6 west - a five bed research unit. The floor also has a nurses' station, treatment room, playroom, schoolroom, outdoor courtyard, and waiting room with pay telephone, restrooms, and coffee machine.

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Your doctors' names \_\_\_\_\_

Your nurses' names \_\_\_\_\_

Your social worker's name \_\_\_\_\_

& phone number \_\_\_\_\_

6 north-south phone number \_\_\_\_\_

During the night and on weekends there is an intern and resident always present. They may not be your assigned doctors, but they will be aware of the problems and needs of your child.

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We hope this letter has been helpful and if you have any questions or comments please let us know.

Sincerely,

The Nurses of 6 north-south

appendix

~~film script~~

sample survey

letters

Film

March 6, 1973

Dear Marilyn:

We are making a film about Moffitt hospital's parent participation program on the pediatric unit. Would you help by sharing your opinions and any illustrative anecdotes regarding the positive and negative aspects of a parent living-in program such as ours. We would like the film to be as honest and useful as possible as it is to be shown to other hospitals in the process of revising their policies of parent exclusion. Please complete the attached form and return it to me at your earliest convenience, by March 16, if possible.

Thank you,

Carol Hardgrove  
Nally

Advantages to me professionally and/or to the hospital

*I find it generally to be rewarding in helping a parent feel comfortable + supported while their child is hospitalized. It aids me in establishing a trusting + honest relationship with parents. It helps me to understand + learn about the individual parent-child relationships.*

Disadvantages to me professionally and/or to the hospital:

*None*

Suggestions to other hospitals:

*Review policies and begin a pilot project as we have done. Use us as consultants if + when needed. Have selected hospital personnel come + visit + explore our situation.*

Suggestions regarding the film-making:

*Show a parent meeting  
Interview parents in the evening who are staying  
as a group in the playroom*

Your name:

*Marilyn Sommer*  
150C

Campus address

Title:

*Clinical Social Worker*  
X1655 or X1809

Campus extension:

March 6, 1973

Dear

Bill

We are making a film about Moffitt hospital's parent participation program on the pediatric unit. Would you help by sharing your opinions and any illustrative anecdotes regarding the positive and negative aspects of a parent living-in program such as ours. We would like the film to be as honest and useful as possible as it is to be shown to other hospitals in the process of revising their policies of parent exclusion. Please complete the attached form and return it to me at your earliest convenience, by March 16, if possible.

Thank you,

Carol Hardgrove  
Milly

Advantages to me professionally and/or to the hospital

Ability to see need of continuum of parent/child relationship (interaction), esp. in time of crisis; benefit of "humanization" of patient care possible.

Better service to patients -  
Potential economies of nursing staffing (assumption only) -  
Long term benefit to family (educationally)

Disadvantages to me professionally and/or to the hospital:

Potential conflict in staff acceptance of concept breeds 'individualism' as opposed to 'team' effort.  
Required facilities taxes present physical unit and support systems.

Suggestions to other hospitals:

Plan carefully - try to provide needed facilities before embarking -  
Careful staff orientation is a must - Communication of program "for + with" is good prerequisite.

Suggestions regarding the film-making:

Include all levels of staff (physicians included)  
High % of parent participation  
Present requirements hospital must plan for + provide to accomplish.

Your name:

Bill Gayaly

Title:

Campus address

Campus extension:

4609

*First form,  
now revised  
& printed as a form -*

PARENTS:

To use the beds for overnight stays on the pediatric unit:

1. Sign up on the bed request list, Parents Bulletin Board.
2. If a bed is available, it will be set up for you in a patient room or in the playroom by a unit assistant.
3. Request linens and a pillow from the unit assistant in the evening.
4. When you are ready to retire, make up your bed.
5. In the morning, fold the bed and roll it into the corridor.
6. If you plan to stay another night, keep your linens on the bed. Put your name on a sticker on the bed.
7. Sign up for another night.

You may be asked to let another parent have the bed if another child needs his parent and your child has become more used to the hospital. Beds are in short supply.

8. When you are ready to sleep away from the hospital put your used linens down the clothes chute in the utility room. Remove the sticker from the bed.
9. We are glad to have you stay. If you need anything ask the staff for assistance.

SLEEP WELL!

A LOS PADRES:

Si desean usar las camas para pasar la noche en la unidad de Pediatría:

- 1) Ponga su nombre en la lista que está en la tablilla de boletines para los padres (Parents Bulletin Board), solicitando una cama.
- 2) Si hay una cama disponible, un ayudante de la unidad la puede poner para Ud. en una de las habitaciones de pacientes o en el cuarto de recreo de los niños.
- 3) Solicite, en la noche, sábanas y fundas del ayudante de la unidad.
- 4) Arregle su cama cuando sea hora de retirarse a dormir.
- 5) Por la mañana, cierre la cama y pongala en el corredor.
- 6) Si piensa quedarse otra noche, deje las sábanas en la cama. Ponga su nombre en un papel engamado y pequelo a la cama.
- 7) Ponga su nombre en la lista si desea usar la cama otra noche.

Pueden pedirle a Ud. que deje usar su cama a otro padre si algún otro niño necesita a su padre y si su propio niño se ha acostumbrado un poco al hospital. No hay muchas camas disponibles.

- 8) Cuando Ud. haya decidido dormir fuera del hospital, ponga las sábanas y fundas que haya usado, en el tubo de ropa sucia en el cuarto de servicio. Quite de la cama el papel engomado que lleva su nombre.
- 9) Nos da mucho placer tenerlo aquí en el hospital. Sientase en libertad de solicitar la ayuda del personal si necesita algo.

BUENAS NOCHES.



CARE-THROUGH-PARENT GUIDELINES

HOW TO PLAN FOR PARENT ACCOMMODATIONS

FOR YOUR CONVENIENCE

HELPING WITH YOUR CHILD'S CARE

HEALTH CARE TEAM

The Care-Through-Parent room houses a new program at Moffitt Hospital. The purpose is the bringing together of mothering and nursing skills so that we can work together for the child's best interest.

Although Moffitt has no facilities designed for housing parents, room 613 on the Medical Wing has rollaways and cots available. When it can be worked out, parents with children under five years and older than six months are invited to stay overnight with a child while he is getting used to the hospital. This is not a demand.

Parents who can't or prefer not to spend the night can be assured that nursing care and companionship is continuous and that their child will be well looked after. Overnight stays are especially recommended for children whose developmental stage makes them unable to understand the meaning of their hospitalization and who need their parent's physical presence to reassure them while they get acquainted. Short stays are more important for parent overnights than long stays.

Cover Design: Carmen Fraser

You are an important member of the Health Care Team. Your behavior can help your child tolerate the many unpleasant things he must face in the hospital. Your child gets confidence and faith in us partly through your confidence. This makes it very important that you get your concerns and questions taken care of so that you can support your child. Please share your questions directly with the staff who can take some kind of action.

Naturally parents want to talk with each other. Probably no one understands better than another parent what you are going through, but please, for the sake of your child and the other patients, watch what you say and where you say it. Make your chats with other parents and children supportive rather than destructive.

#### CARE-THROUGH-PARENT GUIDELINES

#### HOW TO PLAN FOR PARENT ACCOMMODATIONS

#### FOR YOUR CONVENIENCE

#### HELPING WITH YOUR CHILD'S CARE

- We believe that effective child care can be provided by communicating a genuine feeling of acceptance and trust in the child and his family.
- We believe in the individuality of each child and his family and in their right to retain their own independence and pattern of living during hospitalization.
- We believe active participation and direct involvement in the physical and emotional care of the child by his parents can reduce anxiety and apprehension, yet allow parents to continue to function as a family unit.
- We believe frequent contact with and exchange of information among allied team members influences patients' care and enhances the learning process of the nursing staff.

Ann Ravara, Head Nurse

For a cot: You can call the Chief Resident or the Head Nurse to let them know in advance that you plan to spend the night. If more parents plan to stay than the room can accomodate (more than two) cots can be set up in the playroom.

What to bring: A small overnight case with a change of clothes and personal need; slacks, or something comfortable and modest; (the room will be shared and there are no private baths or closets), comfortable shoes or slippers; reading and handwork; a thermos if you like coffee early in the morning.

If you and your child would like a pre-admission tour, call 666-1655 to arrange this a day or so in advance.

Priority in Room 613 is for children between six months and five years of age. A cot, towels, linens, blanket, and pillow is furnished at no charge either in that room, or if no room is available there, in the playroom. Parents are expected to make up the bed themselves at night and fold it up and store it out of the way before 8:00 a.m. Keep your linens stored in the cupboard of the room until you no longer require the cot, then place them in the laundry hamper. Care goes on 24 hours a day, so be prepared for interrupted sleep.

Rest rooms are in the corridor of 6 West. Tub and shower can be used by asking the Charge Nurse in the Metabolic Unit for a time when the room is available. Please leave all areas clean and orderly.

#### HOW TO PLAN FOR PARENT ACCOMMODATIONS

#### FOR YOUR CONVENIENCE

#### HELPING WITH YOUR CHILD'S CARE

Phone: Pay phones are available in the waiting room or the first floor lobby. A mobile pay phone can be wheeled into the room for your child's use. Ask the nurse for it. Ask also for the least busy time at the desk for you to receive incoming calls. You can, by arranging in advance, receive calls on the mobile pay phone. The number of the mobile phone is 731-9818.

Parking: Parking across the street in the garage at Millberry Union costs \$1.50 per day for the first day, \$1.00 every day thereafter unless you take the car out, in which case the charge is again \$1.50.

T.V.: Televisions can be rented by filling out the request form at the nursing station.

Transportation: Transportation information by public transit can be obtained by calling 558-4111. Buses stop outside the hospital. A direct line to the cab company is at the information desk in the hospital lobby.

Laundry: Self-service laundromats are nearby on Judah Street at Sixth. There are no facilities in the hospital.

Books and magazines are available on loan for your use in the Volunteer Office, x1196. Shops and restaurants are on Irving Street; public transportation stops outside the hospital on Judah Street and goes downtown; a gift shop on the first floor sells magazines, cosmetics, toys and jewelry. Across the street at Millberry Union are many exhibits, entertainments and a large bookstore. Millberry has a comfortable lounge with TV and a view of the City.

The library on the second floor of the Medical Sciences Building has a comfortable browsing room. Frequent lectures and films are offered in the auditorium of that building. Flyers announcing programs are available near the cafeterias.

Food Service:

Coffee Shop, 2nd floor, Moffitt. Fountain and take-out service 8:15-4:30 a.m.

Cafeterias, 2nd floor, Moffitt. 6:30 a.m.-7:00 p.m. (Avoid employees lunch hours 11:30-1:00)

Guest trays may be ordered and will be charged to your bill. The cost is \$2.50 (\$3.00 on holidays). This is especially recommended for the first day of your child's stay. Tell the nurse you would like one if you choose.

FOR YOUR CONVENIENCE

HELPING WITH YOUR CHILD'S CARE

HEALTH CARE TEAM

### Alternatives to Living-In

Even if you occasionally remain for the night with your child you will need to find someplace away from the hospital to live. A list of low cost nearby residence houses is available through the social workers.

You are probably the best judge of how long to stay before your child is familiar with the hospital. If you can't stay or visit as often as you wish, we will offer other companionship to your child to help him know that you care for him even when you can't be here. We have foster grandparents, volunteers, students, play staff and nurses to be friends to your child.

Parents are welcome on this unit because we want as natural and home-like a situation as we can have in the hospital. At home, parents are in and out of sight, and children develop resources on their own. We think it's good to have that same atmosphere in the hospital. Children are reminded of their own individuality when they play with other children and get acquainted with the staff. When you use the twenty-four hour Care-Through-Parent room, remind yourself that hovering and preventing your child from participating in the play life of the unit isn't home-like.

The nursing care is adjusted to the needs and wishes of the parent-child couple. Parents participate in their child's care to the degree they decide with the staff. Some parents continue the kind of care they give at home, bathing, feeding, rocking and soothing. The nurses will continue to be responsible for nursing care, but will teach you to manage that which you wish to give when it's appropriate.

Help your child establish a relationship with the nurse, the play staff, and the other children. This lets you take occasional breaks and encourages your child's normal development. Making new friends and having new adventures is fun, even in the hospital. Check with the nursing staff about helping other children. It makes the hospital atmosphere more normal for your child to see you with other children, too.

### Safety

For safety's sake, always make sure crib sides are up if you are not standing right there. If you think your child might climb over the sides, be sure to tell the nurse. See that your child wears slippers or shoes at all times when he is out of bed. Keep your child away from doors so that he will not be hurt if they are opened suddenly. If you use matches, keep them on your person always.

### Puppet Preparation

A crew of volunteers and students have developed some puppet shows to prepare children for surgery. If you and your doctor are interested, ask your nurse to request a demonstration for your child.

An active, well-staffed play program is available for your child's diversion. In addition to the nurses there are volunteers and foster grandparents who are ready to make friends with your child. Please tell your child and your nurse when you are leaving and when you'll return.

#### HEALTH CARE TEAM

A doctor is on call to see your child at any time of the day or night. Doctors will see your child each morning as well as at other times. Each child will have assigned to him the following:

The Intern- who will be the most available doctor. He will take a complete history from you and do a complete physical examination, supervise most of the diagnostic studies and be responsible for ordering the child's medication. He is available to you in person or by telephone.

The Resident- directly supervises the intern and completely evaluates your child and decides what arrangement and treatment is necessary. The intern and resident are supervised by the Chief Resident and Attending Physician.

The Attending Physician- is a member of the Department of Pediatrics at the Medical Center. He is responsible for your child's care and will see your child when ward rounds are made and individual cases are discussed.

These doctors, together with the medical students make up the physician teams which care for your child. Please feel free to inquire about seeing any of your child's doctors since they may not be aware that you have questions.

One doctor is specifically assigned to the care of your child. He will consult with your private physician and other members of the health staff as necessary. One nurse is assigned to coordinate the care for your child during his stay.

Social Workers are available to help you with planning. Their office is on this floor, Pediatrics. A playroom, supervised by a Recreational Therapist and the Social Workers, is open between 10:30 and 12:00 and 2:30-4:30 six days a week. Parents are welcome to be with their children in the playroom.

On admission, the Nurse will interview you to get information useful in caring for your child and in working out the kind of help that you may wish to give. She will ask about sleeping habits, food preferences and anything else to make your child feel more at home. A nurse is always available to answer your child's call and fulfill his needs.

If you want to talk to the doctor, alert the secretary at the desk to let him know you want to see him.

Your Doctor's name \_\_\_\_\_

Your Head Nurse \_\_\_\_\_

Your Social Worker \_\_\_\_\_

Care-Through-Parent Faculty and Students \_\_\_\_\_  
Mary Tesler and Carol Hardgrove 666-1504



CARE-THROUGH-PARENT GUIDELINES

FOR YOUR CONVENIENCE

HOW TO PLAN FOR PARENT ACCOMMODATIONS

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HEALTH CARE TEAM

The Care-Through-Parent room houses a new program at Moffitt Hospital. The purpose is the bringing together of mothering and nursing skills so that we can work together for the child's best interest.

Although Moffitt has no facilities designed for housing parents, room 613 on the Medical Wing has rollaways and cots available. When it can be worked out, parents with children under five years and older than six months are invited to stay overnight with a child while he is getting used to the hospital. This is not a demand.

Parents who can't or prefer not to spend the night can be assured that nursing care and companionship is continuous and that their child will be well looked after. Overnight stays are especially recommended for children whose developmental stage makes them unable to understand the meaning of their hospitalization and who need their parent's physical presence to reassure them while they get acquainted. Short stays are more important for parent overnights than long stays.

Cover Design: Carmen Fraser

You are an important member of the Health Care Team. Your behavior can help your child tolerate the many unpleasant things he must face in the hospital. Your child gets confidence and faith in us partly through your confidence. This makes it very important that you get your concerns and questions taken care of so that you can support your child. Please share your questions directly with the staff who can take some kind of action.

Naturally parents want to talk with each other. Probably no one understands better than another parent what you are going through, but please, for the sake of your child and the other patients, watch what you say and where you say it. Make your chats with other parents and children supportive rather than destructive.

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- We believe that effective child care can be provided by communicating a genuine feeling of acceptance and trust in the child and his family.
- We believe in the individuality of each child and his family and in their right to retain their own independence and pattern of living during hospitalization.
- We believe active participation and direct involvement in the physical and emotional care of the child by his parents can reduce anxiety and apprehension, yet allow parents to continue to function as a family unit.
- We believe frequent contact with and exchange of information among allied team members influences patients' care and enhances the learning process of the nursing staff.

Ann Ravara, Head Nurse

Books and magazines are available on loan for your use in the Volunteer Office, x1196. Shops and restaurants are on Irving Street; public transportation stops outside the hospital on Judah Street and goes downtown; a gift shop on the first floor sells magazines, cosmetics, toys and jewelry. Across the street at Millberry Union are many exhibits, entertainments and a large bookstore. Millberry has a comfortable lounge with TV and a view of the City.

The library on the second floor of the Medical Sciences Building has a comfortable browsing room. Frequent lectures and films are offered in the auditorium of that building. Flyers announcing programs are available near the cafeterias.

Food Service:

Coffee Shop, 2nd floor, Moffitt. Fountain and take-out service 8:15-4:30 a.m.

Cafeterias, 2nd floor, Moffitt. 6:30 a.m.-7:00 p.m. (Avoid employees lunch hours 11:30-1:00)

Guest trays may be ordered and will be charged to your bill. The cost is \$2.50 (\$3.00 on holidays). This is especially recommended for the first day of your child's stay. Tell the nurse you would like one if you choose.

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For a cot: You can call the Chief Resident or the Head Nurse to let them know in advance that you plan to spend the night. If more parents plan to stay than the room can accommodate (more than two) cots can be set up in the playroom.

What to bring: A small overnight case with a change of clothes and personal need; slacks, or something comfortable and modest; (the room will be shared and there are no private baths or closets), comfortable shoes or slippers; reading and handwork; a thermos if you like coffee early in the morning.

If you and your child would like a pre-admission tour, call 666-1655 to arrange this a day or so in advance.

Priority in Room 613 is for children between six months and five years of age. A cot, towels, linens, blanket, and pillow is furnished at no charge either in that room, or if no room is available there, in the playroom. Parents are expected to make up the bed themselves at night and fold it up and store it out of the way before 8:00 a.m. Keep your linens stored in the cupboard of the room until you no longer require the cot, then place them in the laundry hamper. Care goes on 24 hours a day, so be prepared for interrupted sleep.

Rest rooms are in the corridor of 6 West. Tub and shower can be used by asking the Charge Nurse in the Metabolic Unit for a time when the room is available. Please leave all areas clean and orderly.

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Phone: Pay phones are available in the waiting room or the first floor lobby. A mobile pay phone can be wheeled into the room for your child's use. Ask the nurse for it. Ask also for the least busy time at the desk for you to receive incoming calls. You can, by arranging in advance, receive calls on the mobile pay phone. The number of the mobile phone is 731-9818.

Parking: Parking across the street in the garage at Millberry Union costs \$1.50 per day for the first day, \$1.00 every day thereafter unless you take the car out, in which case the charge is again \$1.50.

T.V.: Televisions can be rented by filling out the request form at the nursing station.

Transportation: Transportation information by public transit can be obtained by calling 558-4111. Buses stop outside the hospital. A direct line to the cab company is at the information desk in the hospital lobby.

Laundry: Self-service laundromats are nearby on Judah Street at Sixth. There are no facilities in the hospital.

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Mary Tesler and Carol Hardgrove 666-1504

Faculty and  
Carol Hardgrove

UNIVERSITY OF CALIFORNIA - MOFFIT HOSPITAL

DEPARTMENT OF PEDIATRICS

Dear Parent:

Will you help us solve some of our traffic and bedtime problems on the Pediatric Unit? We need your cooperation so that we can take good care of your child and our other patients.

BEDTIME

Please help your child get settled for the night and be ready to leave between 7:00 and 8:00 p.m.. This allows the nurses to soothe those children whose parents can't be with them and avoid later disruptions. Special exceptions can be discussed with the head nurse.

VISITING

It is the quality as well as the quantity that helps:

While here, if possible use some of your time to help your child and the nurses get to know each other so that the nurses can evaluate his condition and he can learn to trust the nurses. The nurses can also show you ways in which you can help in your child's care if you wish.

You can help by visiting and assisting your child during mealtimes. Your friendly, relaxed presence usually does more to encourage his eating than coaxing.

Rest time between 1:00 and 2:00 p.m. is not a good time to visit.

When you leave, do feel free to ask someone to help if your child is having a hard time saying good-bye. Do let him know that you are leaving for the night so that he won't lie awake waiting for your return. Leaving a souvenir or a picture can make it easier for him. Don't be distressed if he cries. It's a normal way for him to deal with his emotions and is better for him than holding it in. Reassure him that it's all right to cry. Take breaks for yourself often enough to keep from getting worn out. Help your child make friends and use the playroom whenever possible. Our staff includes a social worker, social group workers, a teacher, foster grandparents and volunteers to help your child continue his development in addition to his medical care.

You have a special role in your child's care which we appreciate. We need to cooperate so that we can each do our jobs well.

Please let us know your ideas, questions, and suggestions.

TELEPHONE NUMBERS ON UNIT:

Department of Surgery Ward: 666-1351  
Department of Pediatrics Ward: 666-2502

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