

Summary
Small Group Discussion
Family Centered and Family Directed Practices Workgroup
MCH Training Program
Joint Meeting
LEND, LEAH, PPC, SPH Grantees
March 4, 2007

Background

Workgroups were established by the MCH Training Program as a strategy to provide training program grantees and affiliated colleagues with an opportunity to:

- Directly impact policies and procedures that guide the MCH Training Program
- Enhance the achievement of the MCH Training Program Strategic goals and objectives
- Assist in the telling of the “MCH Story”.

The purpose of the Family-Centered and Family-Directed Practices (FCFDP) Workgroup is to achieve high quality health care delivery systems by advancing meaningful family-professional partnerships and reinforcing the strengths, cultures, traditions, and expertise inherent in these relationships. To this end, the Workgroup has focused on identifying curricula and materials related to family-centered and family-directed practices, assessing the usefulness of this information for MCH Training Programs; and developing indicators for measuring family-centered and family-directed practices.

Susan Horky presented an overview of the workgroup process and activities. Subsequently, participants attending the FCFDP Workgroup session were asked to review indicators drafted by the workgroup to answer the following questions:

- What do we want to measure regarding family centered practice?
 - Trainees' knowledge of what?
 - Trainees' ability to demonstrate what skills?
- How would a program document that trainees have this knowledge?
How would a program document that trainees have these skills?

Key Discussion Points

Ten meeting participants attended the FCFDP small group discussion. The group included representatives from PPC, LEND, LEAH and SPH grantees, many of whom were reviewing the indicators for the first time. Most of the discussion focused on identifying and prioritizing key measurable indicators that can be applied to medium and long-term trainees across all MCH Training Programs. The process started by agreeing on the definition of an indicator—a

statistical marker that is used to track patterns and trends over time-- that would be used in the discussion and the principle that the indicators selected would be relevant for LEND, SPH, PPC and LEAH training programs. The indicators in bold were the top 3 for the workgroup.

Priority indicators identified for medium and long term trainees included the following:

- **100% of MCHB Trainees will incorporate families in program planning**
- 100% of MCHB Trainees will be able to articulate family advocacy strategies
- **At least X% of all trainees will be actively engaged (demonstrate) principles of family advocacy**
- 100% of “consumer”-related activities will show evidence of incorporating family centered principles
- **100% of trainees will demonstrate ability to effectively communicate with families.**