

Revisions to the Family-Centred Maternity and Newborn Care National Guidelines

Definition of Family-Centred Care

"Family-centred maternity and newborn care is a complex, multidimensional, dynamic process of providing safe, skilled, and individualized care. It responds to the physical, emotional and psychosocial needs of the woman and her family. In family-centred maternity and newborn care, pregnancy and birth are considered normal, healthy life events. As well, such care recognizes the significance of family support, participation and choice. In effect, family-centred maternity and newborn care reflects an attitude rather than a protocol" (Rush, 1997).



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History

- National guidelines for maternal and newborn care have been published since 1968 and revised in 1974, 1987 and 2000.
- In 1987 the guidelines adapted the principle of family-centred care.

Objective

 The Family-Centred Maternity and Newborn Care (FCMNC) National Guidelines aim to positively impact health from preconception to postpartum, and throughout the lifecourse of children, women and families.

Purpose

 Healthcare providers, policy makers, program planners, administrators and families across Canada consult the guidelines for planning, implementing and evaluating maternal and newborn programs and services.



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Revision Process

- An Oversight Committee guides the revision process. Members represent various professional organizations with a vested interest in maternal and newborn health.
- A content and literature review was conducted by the Canadian Institute of Child Health (CICH) to support the revisions.
- Chapter writing group members are chosen from a cross-section of disciplines relevant to the chapter topic.
- Keeping with the overarching family-centred approach, representatives from the Canadian Family-Advisory Network are members of each writing group.
- By completion of the writing process, almost 100 experts from various disciplines will have contributed.



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Considerations

While revising the guidelines consideration will be given to many factors including:

- Various environments for care delivery home, community, and hospital
- Strengths and limitations of technological developments
- · Canada's culturally diverse population
- Recognition of our responsibility to Aboriginal people
- The multifaceted nature of health care incorporating psychological, social, cultural and spiritual components of care in addition to biological health
- Changing nature of families
- · Canada's vast geographic and climatic challenges



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Next Steps

- Revisions to chapters will continue until 2016.
- Staggered chapter release should begin by end of 2014.
- A needs assessment will be conducted to investigate methods of dissemination that will optimize accessibility and distribution.
- A review and update cycle is under consideration to facilitate timely future revisions.

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