Family Health Assessment

(Name)

School

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A family health assessment reviews all factors that indicate if a family has positive health behaviors or potential risk behaviors. When assessing a family, it is often overlooked to diagnose with a wellness diagnoses. A wellness diagnoses demonstrates what area a family or individual wishes to be educated about to reach a greater level of health in and focuses on the progress a patient is making towards healthy behaviors. Modern hospitals have commonly not included the rest of the family during procedures, but there is a growing interest and evidence that having the family present is beneficial to the patient and this healthy family function should be supported by nurses (Lamont, 2006). With this growing interest, there is a need to develop health care professionals more proficiently in assessing families and considering the family dynamic when treating any patient. A family health assessment completed on Bridget Dixson and her family revealed many wellness diagnoses that will be explored in depth.

The first area of health is Bridget’s health perception. This area reviews lifestyle patterns that may affect the ability to function at optimal levels, even when the patient does not consider themselves to have any health issues, or are unaware of the necessity of healthy behaviors when there is no illness, or believe that any activity on their part is useless to promote health (Rentfro, 2014). When asked about the basic requirements to keep her family healthy, Bridget stated that a healthy diet, plenty of sleep and no caffeinated beverages was at the top of her priorities. She also feels that regular health examinations are extremely important and models this behavior for her family. A wellness diagnosis of Health-Seeking Behaviors would be appropriate in this case (Weber, 2005). She has a strong desire to promote health and wellness in her family and her healthy behaviors show strong progress towards realizing optimal health.

Nutrition is also a strong area for this family. The types of food eaten in their house consisted of lean meats and a lot of fruit and vegetables. The only time they eat out at a restraint is on Friday or Saturday night and then on Sunday, for a total of two times per week. Bridget feels it is very important for her family to have proper nutrition in order to function. With such a strong focus on nutrition a Readiness for Enhanced Nutritional Metabolic Pattern wellness diagnosis would fit well with this family (Weber, 2005). Nutrition is such an important area, that Bridget is very open to any education regarding how to eat even healthier and improve nutrition for herself and for her family.

Bridget expressed that she never had any difficulty in falling asleep or having difficulty staying asleep until the morning. While this may seem healthy, it may indicate that Bridget and her family have a lack of sleep. She also stated that they do not go to bed at the same time on a nightly basis, which is also a potential area of concern. She was very open to suggestions on how to get more sleep or more restful sleep, leading to a third wellness diagnosis of Readiness for Enhanced Sleep (Weber, 2005). Bridget realizes that this is an area that could use more focus in her family and wants to change this behavior in all of her family members.

The fourth category assessed was elimination. In the area of elimination, Bridget does not wake during the night to use the restroom, her urine is almost clear and she has a bowel movement once or twice a day. This is all healthy and normal, without much needed to improve on. A wellness diagnosis may not be appropriate in this area the behavior patterns are already healthy and there is not much for her family to focus on in order to improve it.

Activity was a strong area for Bridget and her family. They all exercise four to five times per week for sixty minutes at a time. Bridget exercises doing a cardio boot camp class and the rest of her family exercises regularly as well. She also makes it a point to stand and walk during the day instead of just staying sitting at her desk. She expressed a strong interest in learning about interval training and anything that she could do to boost her exercise and metabolism. Bridget demonstrated a Readiness for Enhanced Activity-Exercise Pattern (Weber, 2005). She would willingly accept any education on better ways to exercise.

In her cognitive assessment, Bridget stated that she had no problems with her memory when asked if she remembered what she had for breakfast this morning and for breakfast two days ago. She is in charge of her family’s finances and keeps her check book balanced. When asked about her hearing, she stated it was perfect, but she does get distracted. She wears glasses, but does not get headaches when reading and has no issue with her tasting or smelling other than in allergy season. Her comment about being distracted may point to an issue in the cognitive assessment above and Bridget may have Readiness for Enhanced Cognition based on her wanting to be able to focus more during conversations (Weber, 2005).

A desire to be able to say ‘no’ to requests was expressed when asked what she would change about herself if she could in the area of self-perception. She perceived herself as happy, positive and self-motivated, but could not say ‘no’ to people. Bridget has a Readiness for Enhanced Self-Perception in order to gain the confidence or ability to turn people down when they are asking a favor of her (Weber, 2005).

Bridget had a good social network and does not feel isolated or alone. She has a husband with a vasectomy and they engage in sexual activity three times per week on average. Bridget is satisfied with her sex life. She has also had no major changes in her life in the last year or two, is not coping with any losses, not on any medications besides for allergies and is not a member of any support groups. There were no opportunities or desire to enhance the role relationship, sexuality or coping areas of her life.

This family health assessment allowed a health care professional to observe in Bridget and her family a readiness to progress in six areas of their lives: Health Perception-Health Management Pattern, Nutritional-Metabolic Pattern, Activity-Exercise Pattern, Sleep-Rest Pattern, Sensory-Perceptual Pattern, and Cognitive Pattern. Without the family health assessment, a health professional would not have been able to get to this level of detail in their family’s life and not known what patient education Bridget and her family were open to and ready to embrace to improve their health. This tool is extremely useful and should be used in every health care setting.

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Interview questions

1. **Values, Health Perception**-The following questions pertain to those asked by the nurse to provide an overview of the individual's health status and health practices that are used to reach the current level of health or wellness.[[1]](https://en.wikipedia.org/wiki/Gordon%27s_functional_health_patterns#cite_note-1)
   1. What are your basic requirements to keep your family healthy?
   2. Why do you think preventive appointments are important?
   3. How do you educate your family on practicing healthy life styles?
2. **Nutrition-**This pattern describes nutrient intake relative to metabolic need.
   1. What type of foods do you eat in your house?
   2. How often do you eat out and cook at home?
   3. How do you educate your family on nutrition?
3. **Sleep/ Rest-**Assesses sleep and rest patterns.
   1. Do you have any difficulty falling asleep?
   2. Are you having any difficulty sleeping until the morning?
   3. Do you go to bed at the same time nightly?
4. **Elimination** - Describes the function of the bowel, bladder and skin. Through this pattern the nurse is able to determine regularity, quality, and quantity of stool and urine.
   1. Do you wake up at night to use the restroom?
   2. How often do you have a bowel movement?
   3. What color is your urine? Do you have any pain with elimination?
5. **Activity/Exercise**- This pattern centers on activity level, exercise program, and leisure activities.
   1. How often do you exercise? How long do you exercise?
   2. What type of activities do you participate in?
   3. How can you increase you activity during the day?
6. **Cognitive- Assesses** the ability of the individual to understand and follow directions, retain information, make decisions, and solve problems. Also assesses the five senses.
   1. Do you find it difficult to remember what you had for breakfast this morning? What about what you had for breakfast two days ago?
   2. Are you able to balance your check book?
   3. Who is in charge of your family’s finances?
7. **Sensory-Perception**-
   1. How is your hearing? Do you find yourself asking the same question twice?
   2. Do you wear glasses? Do you develop headaches when reading?
   3. Do you have problems tasting or smelling?
8. **Self-Perception-**
   1. How do you describe yourself?
   2. Why type of things would you change about yourself if could?
   3. How would you describe you mood? Are you typically happy or sad?
9. **Role Relationship**-
   1. Do you live alone?
   2. Do you belong to any social groups?
   3. Do you feel isolated or involved?
10. **Sexuality-** 
    1. Do you use contraceptives?
    2. How often do you engage in sexual activity?
    3. Is your sex life satisfying?
11. **Coping**-
    1. Any big changes in your life in last year or two?
    2. How are you coping with any losses you may have had?
    3. Are you on any medications? Are you on any homeopathic medications?
    4. Are you part of support group?