

University of the Philippines Manila The Health Sciences Center COLLEGE OF NURSING HO Collaborating Center for Leadership in Nursing Development Commission on Higher Education Center of Excellence Sotejo Hall, Pedro Gil St., Ermita, Manila Tel.: (632)523-1472 / Telefax: (632)523-1485



Aguilar, Juliana Carmela L. N13 - Maternal Care Nursing

## NURSING CARE PLAN

Assessment	Nursing Problem	Rationale	Goals and Outcomes of Care	Interventions
<ul> <li>Subjective Cues: <ul> <li>Client M reports having 2 children: a female toddler and male infant</li> <li>Client M stated that her husband is working abroad</li> <li>Client M is currently breastfeeding the baby</li> <li>Client M asked for recommendations for an ideal milk formula and multivitamin options to give to infants like her son, Joshua</li> <li>Client M feels that Joshua is not growing enough for his age</li> <li>Client M stated that she would be starting an office job every weekday</li> <li>Client M plans to leave the baby with her</li> </ul> </li> </ul>	Readiness for Enhanced Parenting aeb expressed desire to enhance child health maintenance	Despite already having more than a year of experience in raising her eldest daughter who is currently a toddler, it is evident that Client M still needs proper health education to increase her knowledge and correct misconceptions in providing care for infants, specifically about what factors affect an infant's nutritional status and weight gain. Fortunately, she has expressed her concern and willingness to enhance her parenting by asking ideal suggestions for formula milk and multivitamins to ensure that Joshua's nutritional needs could still be met since she feels that her son is not growing enough compared to other children his age. Given that she is soon to start a weekday office job, she wants to establish proper health practices that can increase Joshua's nutritional status which may help Client M's 18-year-old sibling who may be inexperienced in taking care of children who the client plans to leave Joshua with while she is at work. As Joshua's anthropometric measures are within normal range and his development is normal, aiding Client M to	<ul> <li>NOC:</li> <li>A. Child Development: 4 months B. Knowledge: Infant Care</li> <li>Goal: After 1 day of nursing interventions, Client M will demonstrate increased effectiveness of proper care for an infant to help</li> <li>4-month old infant continue and maintain normal growth and development appropriate for his age</li> <li>Objectives: After 45 minutes of performing nursing interventions, Client M will:</li> <li>1. Describe in her own words the growth and developmental needs and requirements of a 4-month-old infant</li> </ul>	NIC:         A.       Infant Care         B.       Parent Education: Infant         C.       Teaching: Infant Nutrition 4-6         Months       D.         D.       Attachment Promotion         E.       Caregiver Support         The nurse will:         1a.       Provide anticipatory guidance on the expected developmental changes and milestones that would occur as the infant matures         1b.       Observe and provide the parent with support when learning infant caretaking skills and developmental interventions         1c.       Demonstrate ways in which parents can stimulate an infant's growth and development         1d.       Instruct parent on when and how to prepare and select iron-fortified formula milk and multivitamins for her infant         1e.       Provide an opportunity for parents to discuss topics of concern (e.g. questions

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<ul> <li>18-year-old sibling who does not have children when she is at work</li> <li>Objective Cues <ul> <li>Client M is a first-time mother</li> <li>Joshua is a 4-month old infant</li> <li>Joshua's weight gain is normal</li> <li>The weight, length, and head circumference</li> </ul> </li> </ul>		enhance her parenting could help in maintaining child development that is normal and further increases growth progress and health promotion.	<ol> <li>Discuss her plans of continuing and increasing the care of her child in the future, especially when she starts to go to work.</li> </ol>	<ul> <li>pertaining to infant care and nutrition)</li> <li>2a. Provide referral to children's health centers/services (e.g. health care professionals and community resources), as appropriate</li> <li>2b. Monitor factors that may interfere with optimal parental attachment (e.g. maternal employment)</li> <li>2c. Suggest leaving the infant to a more competent adult family member who has experience in taking care of children</li> <li>2d. Determine the caregiver's (18-year-old sibling) knowledge and acceptance of the role in taking care of an infant</li> </ul>
<ul> <li>measurements of Joshua are within normal range</li> <li>Joshua has a social smile, has good head control, and can roll over</li> <li>Joshua is seen active with a good suck</li> </ul>	Risk for Caregiver role strain r/t competing role commitments, insufficient time, and complexity of care activities	Risk for caregiver role strain is defined as the risk of experiencing difficulty in performing the family caregiver role (Carpenito-Moyet, 2011). Client M is at risk of experiencing strain and difficulties in her role as the main caregiver, especially to her 4-month old infant, Joshua due to the conflicts between caregiving responsibilities and other role commitments, such as her weekday office job which is about to start soon. In addition, she also has to take care of her 1-year old toddler along with the increasingly complex needs and high caregiving demands of an infant. Hence, she cannot handle all her roles as a mother at the same time leading to the client asking for her 18-year-old sibling for help in taking care of Joshua even if the sibling may not have proper experience in taking care of an infant since Client M's husband is also absent since he works abroad. These factors contribute to the difficulties and physical, psychological, and emotional stress the main caregiver (Client M) may feel/ already feel related to her roles if not managed properly,	<ul> <li>NOC:</li> <li>A. Caregiver Lifestyle Disruption</li> <li>B. Caregiver role endurance</li> <li>C. Caregiver Stressors</li> <li>D. Parenting Performance</li> <li>E. Caregiver Performance: Direct Care</li> <li>F. Family Coping</li> <li>Goal: After 1 day of nursing interventions, Client M and her family will establish a plan to lessen the stress and burden in caregiving through proper help and support in providing infant care, especially for when the mother goes to work</li> <li>Objectives: After 45 minutes of performing nursing interventions, Client M along with her family will:</li> <li>1. Express future worries and difficulties regarding possible lapses in performing caregiving responsibilities due to other life roles</li> </ul>	<ul> <li>NIC:</li> <li>A. Caregiver Support</li> <li>B. Respite Care</li> <li>C. Coping Enhancement</li> <li>D. Family Mobilization</li> <li>E. Support System Enhancement</li> <li>F. Anticipatory Guidance</li> </ul> The nurse will: 1a. Encourage caregiver to share positive aspects of and difficulties experienced in their caregiving role 1b. Assist the patient to identify possible upcoming, developmental, or situational crises, and the effects of caregiving role may have on personal and family life 1c. Discuss danger signals of caregiver role strain (e.g. depression, unhealthy eating patterns, loneliness)

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	which could affect her parenting performance and ability to provide infant care	<ol> <li>Identify sources of support and respite care to be used once Client M goes to work</li> </ol>	<ul> <li>1d. Commend client's competency in performing caregiving role</li> <li>2a. Discuss the four types of social support and their importance</li> <li>2b. Encourage family involvement in the plan of care, as appropriate</li> <li>2c. Assist the patient to identify available support systems, and possible sources of volunteer help and respite care</li> <li>2d. Determine relaxation techniques and leisure activities the client usually does when stressed</li> </ul>
		3. Plan activities and lifestyle changes that help client M in taking care of her child once needed in the future and improve the client's quality of life	<ul> <li>3a. Ask the client to describe a plan for future life in the next 3 months, 6 months, and 1 year (e.g. plan of care for infant once weekday job starts)</li> <li>3b. Relate to the client the importance of performing daily health promotion activities, especially when stressed</li> <li>3c. Determine areas and caregiving activities the client and substitute caregiver (18-year-old sibling) for which they desire and need assistance</li> <li>3d. Assist the client, together with the substitute caregiver in creating a care plan or timetable for the infant</li> </ul>
Interrupted breastfeeding r/t weaning of infant du employment of the mother		<ul> <li>NOC:</li> <li>A. Breastfeeding maintenance</li> <li>B. Knowledge: Breastfeeding</li> <li>C. Breastfeeding establishment: Maternal</li> <li>Goal: After 1 day of nursing interventions, Client M will report confidence in establishing satisfying and effective breastfeeding independently and continue exclusively breastfeeding her child, especially when her weekday office job starts</li> <li>Objectives: After 45 minutes of health teaching, Client M will:</li> <li>1. Explain in her own words the importance of breastfeeding her 4-month infant</li> </ul>	<ul> <li>NIC: A. Lactation Counseling</li> <li>The nurse will:</li> <li>1a. Provide information about psychological and physiological benefits of breastfeeding to mother and child</li> </ul>

	However, in the case of Client M, since she has an upcoming office job she must attend to every weekday, her time to be with her infant is reduced resulting in mother-child separation. As the client is not available to take care of Joshua the whole day, the opportunity to feed the child with breastmilk is hindered and the continuity of the breastfeeding process is broken. With this, the client plans to use and incorporate milk formula instead and add even multivitamins to his diet to fully support her infant's nutritional needs.	<ol> <li>Demonstrate effective breastfeeding (e.g. positioning and pumping of the breast)</li> </ol>	<ul> <li>1b. Allow the client to share concerns, thoughts, and difficulties felt (as appropriate) regarding her breastfeeding experience</li> <li>1c. Correct myths, misconceptions, misinformation, and inaccuracies about breastfeeding</li> <li>2a.Instruct on infant's feeding cues (e.g. rooting, sucking, and quiet alertness)</li> <li>2b. Assist in ensuring proper infant attachment to the breast (e.g. monitor proper infant alignment, areolar grasp and compression, and audible swallowing)</li> <li>2c. Instruct on various feeding positions (e.g., cross-cradle, football hold, and side-lying)</li> <li>2d. Demonstrate proper pumping of the breast for breast milk production.</li> </ul>
		<ol> <li>Consider continuing exclusive breastfeeding once her weekday office job begins</li> </ol>	<ul> <li>2e. Provide techniques to minimize discomforts brought by breastfeeding</li> <li>3a. Explain the effects of feeding infants with formula milk (e.g. overweight)</li> <li>3b. Instruct on the appropriate handling of expressed milk (e.g. collection, storage, thawing, preparation, fortification, and warming)</li> <li>3c. Discuss strategies aimed at optimizing milk supply (e.g., breast massage, frequent milk expression, complete emptying of breasts, medications)</li> </ul>
Risk for ineffective childbearing process r/t inadequate knowledge of childrearing process	Albeit already having a year of experience in raising a child with her 1-year-old toddler, Client M has expressed concerns that make her susceptible to not being prepared enough to provide and maintain proper care of a newborn to ensure their well-being. The client has shared her plans of switching to milk formula and giving her child multivitamins even if he is only a 4-month old infant. This presents a lack of knowledge in the client regarding how to ensure optimum nutritional health of a newborn (infant). The client's inadequate	<ul> <li>NOC:</li> <li>A. Knowledge: Infant Care</li> <li>B. Child development: 4 Months</li> <li>C. Parenting performance</li> <li>Goal: After 1 day of nursing interventions, Client M will appraise and acknowledge concerns related to infant growth and development</li> <li>Objectives: After 45 minutes of health teaching, Client M will:         <ol> <li>Identify the advantages and disadvantages of infant feeding choices</li> </ol> </li> </ul>	<ul> <li>NIC:</li> <li>A. Nutrition Management</li> <li>B. Parent education: Infant</li> <li>C. Teaching: Infant Nutrition 4-6 Months</li> <li>D. Cup Feeding Newborn</li> <li>E. Family Involvement Promotion</li> </ul> 1a. Correct misinformation and misconceptions regarding infant feeding options to help the client make informed

	knowledge of the proper care of the newborn needs to be addressed to ensure proper growth and development and avoid developmental delays that may lead to life-threatening conditions. Furthermore, the client plans to leave her child to her sister who has no experience in taking care of children, let alone an infant who has more complex health needs and caregiving demands. This may put the child at risk for dangerous situations such as falls and choking, and even poor nutritional status if the substitute caregiver does not take care of him properly while the mother is gone at work.	<ol> <li>Provide nutrition appropriate for a 4-month-old infant</li> </ol>	<ul> <li>decisions about infant nutrition and feeding</li> <li>1b. Instruct patient on specific dietary needs based on child's development and age</li> <li>1c. Instruct parent about feeding readiness, distress, and feeding termination signs</li> <li>1d. Instruct parent on cup feeding procedures and intake mechanism</li> <li>2a. Provide parents with written materials appropriate to identified knowledge needs</li> <li>2b. Discuss cues that baby is ready for solid foods (e.g. biting motions, loss of extrusion reflex)</li> <li>2c. Instruct parent/caregiver to introduce one new food at a time in small amounts</li> <li>2d. Advise client to give food first before breastmilk, as appropriate</li> <li>2e. Instruct parent/caregiver to introduce solid foods without added salt or sugar</li> <li>2f. Instruct parent/caregiver to introduce iron-fortified infant cereal once infant</li> </ul>
		3. Evaluate considerations when choosing her child's childcare provider once her weekday office job begins	reaches 5 months 2g. Instruct parent/caregiver to feed solid food using a spoon only 3a. Identify the client's 18-year-old sister's capability and commitment in her involvement in taking care of a 4-month-old infant while the mother works 3b. Determine the physical, emotional, and educational resources of the primary caregiver and substitute caregiver 3c. Encourage the family members and substitute caregiver to assist in the development of a plan of care, including expected outcomes and implementation of the plan of care 3d. Assist the family in anticipating and identifying the infant's needs and caregiving demands 3e. Provide information to the client on how to select a competent babysitter capable of properly taking care of an infant
Risk for injury r/t physical barrier aeb	It is important to promote infant safety to prevent injuries and accidents that may	NOC: A. Risk Control	NIC: A. Environmental Management: Safety

multiple pieces of	harm the infant.	B. Safe Home Environment	B. Fall prevention
multiple pieces of jewelry worn by the infant	harm the infant. In the case of client M and her child, it can be observed that her child is wearing multiple pieces of jewelry, such as necklaces and bracelets that contain small beads which put the child at risk for injury. This is considered a health risk as infants lack awareness of these safety hazards since during this time, they have a tendency to put anything that they get their hand on inside their mouths (Aldaba, 2022). The bracelet seen on the infant has round, cylindrical beads which can choke the child and obstruct his airway if the bracelet breaks off and the child gets hold of the small beads and swallows them. On the other hand, the multiple accessories worn by the child on his neck, wrist, and legs could also put him at risk for strangling if not watched by an adult and skin allergy/irritation since children at this age have delicate and sensitive skin. In addition, it is at this age that infants tend to crawl and roll over the bed which makes them at risk for falls as well. The age of the client's eldest child should also be considered since the daughter is a one-year-old toddler who is also prone to safety risks and injuries if not properly taken care of and left unattended	<ul> <li>B. Safe Home Environment</li> <li>C. Parenting: Infant Safety</li> <li>D. Parenting Toddler Safety</li> <li>Goal: After 1 day of nursing interventions, Client M can provide a potentially hazard-free home environment for her children so they will be safe and secured from safety risk hazards</li> <li>Objectives: After 45 minutes of health teaching, Client M will: <ol> <li>Identify factors that increase the risk for injury</li> </ol> </li> <li>2. Eliminate controllable environmental hazards and hazardous situations</li> </ul>	<ul> <li>C. Surveillance: Safety</li> <li>D. Risk Identification</li> <li>E. Teaching: Infant Safety</li> <li>F. Teaching Toddler Safety</li> <li>The nurse will:</li> <li>1a. Assist family in identifying safety</li> <li>hazards in the home and modifying them, as appropriate</li> <li>1b. Instruct parents to expect frequent changes in infants' and children's abilities, be vigilant, and take precautions</li> <li>1c. Determine situations and instances that contribute to and lead to accidents related to children (infants and toddlers)</li> <li>1d. Discuss the necessity of constantly monitoring infants and toddlers.</li> <li>1e. Identify unsafe practices that may harm young children</li> <li>1f. Assist the family in evaluating environmental hazards at home</li> <li>2b. Instruct client to never leave an infant and toddler unattended or unsupervised inside the house (e.g. in the bath, on bed or crib, high chair, on the sofa)</li> <li>2c. Instruct parent/caregiver to remove small objects from infant and toddler's</li> </ul>
		<ol> <li>Relate intent to use and practice safety measures to prevent injury</li> </ol>	reach 3a. Teach client basic safety measures and assessments 3b. Teach the client to eliminate potentially hazardous and protruding objects around young children that may endanger them 3c. Teach poison prevention 3d. Install specifically designed locks to prevent children from opening closets they could reach where combustible, corrosive, or flammable materials or medications are

			stored 3e. Instruct parents to use socket covers to prevent accidental electrical shocks to children. 3f. Encourage the use of childproof caps 3g. Advise parents to avoid storing dangerous substances in containers ordinarily used for foods. 3h. Fix crib rails at a safe and appropriate level for the child's age (infant or toddler)
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## **Reference:**

Aldaba, J. (2022). Care of the Infant. Lecture Slides

Carpenito-Moyet, L. J. (2010). Nursing Diagnosis: Application to Clinical Practice (13th ed.). Wolters Kluwer/Lippincott Williams & Wilkins. Pillitteri, A. (6th ed.).(2010). Maternal & Child Health Nursing Care of the Childbearing & Childrearing Family. Lippincott Williams & Wilkins. Philadelphia.

## HEALTH TEACHING PLAN

Title: Proper Infant Care and Breastfeeding Target Participant: Client M Goal: After 1 hour of health education, the client verbalizes understanding of how to provide proper infant care in different aspects of health and well-being and demonstrates proper breastfeeding							
Objectives	Content Outline	Activities	Time Allotted	Materials	Evaluation		
Following a session on Proper Infant Care and Breastfeeding, Client M will be able to: 1. Recognize that Joshua's weight gain, physical assessment values/measures, and developmental milestones are appropriate for his age	<ul> <li>1a. Define the normal anthropometric measures for a 4-month-old infant (e.g. weight, length, head circumference)</li> <li>1b. Explain the developmental milestones expected for each month an infant reaches</li> </ul>	Lecture/ Discussion	10 minutes	Visual aids for lecture (Infographics, Powerpoint Presentation) Growth chart for infants Brochure on infant developmental milestones	The client verbalizes understanding of the normal weight gain, physical assessment values/measures, and expected developmental milestones of an infant per month in her own words		

2.	Express understanding of an infant's nutritional needs and requirements	2a. Discuss the importance and benefits of exclusive breastfeeding for 6 months for the growth development of an infant 2b. Explain proper nutrition for 4-month-old infants 2c. Explain the effects of adding multivitamins to the infant's diet 2d. Compare growth and development from breastfed babies to formula-fed, and mixed breastmilk and milk formula-fed babies 2e. Discuss when to introduce solid foods and what type of solid foods to feed at a specific age of the infant 2f. List nutritional characteristics of an ideal type of formula milk and multivitamins	Lecture/Discussion Question and Answer One-on-one instruction	10 minutes	Visual aids for lecture (Infographics, Powerpoint Presentation) Brochure on advantages of exclusive breastfeeding Examples of photos of nutritional labels of milk formula and multivitamins	The client verbalized understanding of the nutritional needs of an infant that must be met to ensure proper growth and development in her own words The client correctly interprets the nutritional labels and values that would help her choose the ideal formula milk and multivitamins
3.	Demonstrate proper pumping of breast, breastfeeding, and storing of breast milk	3a. Instruct how to assess breast prior to breastfeeding and pumping of breast 3b. Demonstrate how to hand express breast milk 3c. Demonstrate different positioning to facilitate breastfeeding 3d. Describe the 4 key points of positioning a baby onto the mother's breast 3e. Describe the 4 key points of infant attachment to the mother's breast 3f. Demonstrate how to handle expressed breastmilk (e.g. collection,	Lecture/discussion One-on-one instruction Demonstration/return demonstration	25 minutes	Visual aids for lecture (Infographics, Powerpoint Presentation) Photos of proper attachment and position of the baby to mother's breast Videos on how to pump breast and hand express breastmilk Baby doll/mannequin and breast model for demonstration	The client correctly demonstrates how to position and attach infant to her breast when breastfeeding The client correctly recalls the steps on how to pump breast, hand express milk, handle hand expressed milk and optimize breastmilk supply

		storage, thawing, preparation, fortification, and warming) 3g. List strategies to optimize breast milk supply (e.g. (e.g., breast massage, frequent milk expression, complete emptying of breasts, medications)				
4.	Create a written plan/timetable for her 18-year-old sibling who will take care of Joshua once she starts to work at the office every weekday	<ul> <li>4a. Explain the specific needs and aspects of taking care of an infant (e.g. nutrition, sleep, activity, safety, dressing, and hygiene)</li> <li>4b. Construct a written plan/timetable that would guide the 18-year-old substitute caregiver once she begins taking care of the client's infant</li> <li>4c. Address questions and concerns the client has regarding the care of an infant</li> </ul>	Lecture/discussion One-on-one instruction Question and Answer	15 minutes	Visual aids for lecture (Infographics, Powerpoint Presentation) Paper and Pen for written plan/timetable	The client creates a realistic and informational guide/timetable plan for the 18-year-old substitute caregiver once she begins taking care of the client's infant The client verbalizes understanding of clarifications and explanations to her concerns regarding the care of an infant

## **Reference:**

Aldaba, J. (2022). Care of the Infant. Lecture Slides

lellamo, E.A. (2022). Infant and Young Child Feeding. Lecture Slides. Pillitteri, A. (6th ed.).(2010). Maternal & Child Health Nursing Care of the Childbearing & Childrearing Family. Lippincott Williams & Wilkins. Philadelphia.