

University of the Philippines Manila The Health Sciences Center

COLLEGE OF NURSING

WHO Collaborating Center for Leadership in Nursing Development Commission on Higher Education Center of Excellence

Sotejo Hall, Pedro Gil St., Ermita, Manila 1000

HEALTH CARE PLAN: PRESCHOOLER



Client: Sonia Age: 5 years old Gender: Female

IDENTIFIED NURSING PROBLEMS	RATIONALE FOR NURSING PROBLEMS	GOALS OF CARE	INTERVENTIONS	
			The nurse will:	
Ineffective family health management r/t insufficient knowledge about developmental expectations concerning health AEB perception of the child as sickly because of frequent colds, improper management of colds, and failure to take action to reduce risk factors of colds in the family.	Preschoolers often experience minor illnesses, such as colds, ear infections, and flu symptoms (Aldaba, 2022). In the case, the client is specifically experiencing colds for three days, which is also her 5 th episode in a year. In the client's age, however, it is normally expected to have at least 6 to 8 colds a year (Stanford Children's Health, n.d.). Hence, the frequency of the client's colds should not be a cause of concern. However, the mother of the client expressed concern over their child being sickly, implying the lack of knowledge regarding the common health issues encountered by a preschooler. Furthermore, despite the health problem being expected, there are ways to alleviate it. For instance, a risk factor for colds is the presence of smoking adults at home (Aldaba, 2022). However, the family showed inaction on this matter. Additionally, there appears to be	After 1 week of nursing interventions, the client along with their family will: Identify individual factors affecting the frequent experience of colds. Participate in problem-solving of identified concerns. Engage in mutual goal setting for a plan concerning the alleviation of colds. Verbalize acceptance of the need to change actions to achieve agreed-on health outcomes. Demonstrate behaviors and changes in lifestyle necessary to lessen the experience of colds.	 Conduct a health teaching on the common health concerns expected in a preschooler, especially colds. <i>Rationale:</i> To ease the worry of caregivers regarding child being sickly. Assist family members in recognizing inappropriate individual activities that further exacerbate the problem. <i>Rationale:</i> To identify individual actions that contribute to the health problem and modify them, accordingly. Assist the family in modifying individual behaviors that further exacerbate the problem of colds, specifically smoking. <i>Rationale:</i> To help the family take concrete steps in addressing the health problem. 	

	a lack of knowledge on the proper management of colds, as observed by the mother's idea of using Vitamin C to alleviate the client's colds. Experts have found little to no benefit from vitamin C for preventing or treating the common cold (Douglas et al., 2000). Hence, the problem of ineffective family health management was identified.		 Provide family-centered education on the appropriate management of colds in a preschooler. Rationale: To help the family make informed decisions in responding to the health problem of child. Formulate goals and a plan jointly with family members to deal with the management of the client's colds. Rationale: To enhance commitment to the plan, optimizing outcomes. Administer proper medication for colds, as appropriate. Rationale: With collaboration with a physician, proper medication can help alleviate symptoms of colds. Demonstrate non-pharmacological methods for the management of colds. Rationale: To provide solutions to the health problem that are cost-effective and can be easily performed at home.
Risk for overweight AEB preference to consume fast food, inadequate vegetables and fruits in diet, and lack of physically stimulating hobbies.	From the assessment, the client's weight and height were observed to be at par for her age. It was also mentioned that the client has been very choosy and eats very little. This is expected as preschoolers experience decreased growth (Aldaba, 2022). However, it was also mentioned that her diet mostly consists of fast food from Jollibee and is lacking fruits and vegetables. Fast food consumption is strongly associated with weight gain and obesity (Mohammadbeigi, 2018). Furthermore, the client also lacks physically stimulating hobbies, as observed from her preference to stay at home to play with her tablet,	After 1 week of nursing interventions, the client, with the help of their family, will: • Demonstrate appropriate changes in lifestyle and behaviors, including eating patterns, food quality, and physical activity.	 Educate the client and their caregiver on the expected eating habits of a preschooler. <i>Rationale:</i> To know what aspects of the client's nutrition are normal or need more attention. Assist the client and their caregiver in identifying and selecting nutritious meals. <i>Rationale:</i> To help the client make better food choices. Discuss with the client's caregiver creative ways to prepare nutritious food. <i>Rationale:</i> To make the experience of eating

	instead of playing with her peers. Individuals who are less physically active are found to be more likely to gain weight over time (Cox, 2017).		fruits and vegetables more appealing to the client. Provide alternative hobbies that are physically stimulating. Rationale: To increase the physical activity of the client.
Risk for contamination AEB presence of 2 smokers at home.	Risk for contamination refers to the susceptibility to the exposure to environmental contaminants, which may compromise health (Herdman & Kamitsuru, 2018). In the case, it was mentioned that the client resides with 2 smokers, particularly her father and grandfather. This might result in exposure to secondhand smoke, which might cause several health problems, such as more frequent and severe asthma attacks, respiratory infections, and ear infections (Centers for Disease Control and Prevention, 2020).	After 1 week of nursing interventions, the client along with their family will: • Verbalize an understanding of individual factors that can contribute to contamination and take steps to correct situations. • Modify environment, as indicated, to enhance health and well-being. • Demonstrate behaviors or lifestyle changes to reduce risk factors and protect self from contamination.	 Conduct a health teaching on the effects of secondhand smoke on health and importance of refraining from smoking in home/car where others are likely to be exposed. Rationale: To ensure that the family is educated about the consequences of smoking and to encourage them to act on it. Assist the family in finding facilities in their community where they can smoke freely. Rationale: To reduce secondhand smoke in the home environment of the family. Determine the readiness of father and grandfather for smoking cessation. Rationale: To determine the extent of the interventions that will be conducted. Refer father and grandfather to a smoking-cessation program, as needed. Rationale: To assist them in quitting the act of smoking, as it may not be an easy task. Assist the family in practicing proper ventilation and filtration techniques in their household. Rationale: To reduce secondhand smoke.
Impaired social interaction r/t lack of socialization opportunities AEB	As stated in the case, when brought to a playground, the client exhibits shyness toward her peers, which prompts her to not play with them. Instead, she prefers to stay at home to play with her tablet. It was found that	After 1 week of nursing interventions, the client, with the help of their family, will: • Verbalize feelings that lead to poor social interactions.	Encourage the client to verbalize feelings and perceptions on social interactions. Rationale: To provide the client the chance to air out their thoughts and emotions, which

discomfort in social situations, preference to engage in individual activities, and non-attendance to preschool or daycare.	this is normal for preschoolers, as they are more inclined to avoid interacting with unfamiliar people (Raising Children Network, 2022). However, peer exposure is still important for a child's social development (Aldaba, 2022), as it helps in the proper management of their own feelings and in understanding better other people's needs and emotions. But, it was also mentioned that the client is not attending preschool or daycare, which results in limited exposure for socialization opportunities.	 Participate in events that foster social development, such as the enrolment to a preschool or child care center. Engage in positive interactions with their peers. 	might help in formulating appropriate steps that need to be taken in the future. Discuss with the parents of the client the impact of enrolling them in a preschool on their social development. Rationale: To encourage them to enroll the client in a preschool or child care center, where they can be exposed to their peers. Roleplay random social situations in a therapeutically controlled environment with people the client feels safe with. Rationale: To help the client manage their shyness and learn how to make friends. Provide positive reinforcement for
Anvietu yli conovation	Drocebeelers have a fear of concretion or	After 2 days of muraing interpolations, the aligns with the	improvement in social behaviors and interactions. **Rationale:** To encourage the continuation of desired behaviors and efforts for change. **Discuss the client's experience of expertions.**
Anxiety r/t separation from mother AEB crying and clinging when mother leaves for work.	Preschoolers have a fear of separation or abandonment. Their active imagination makes them believe that they are being deserted. Furthermore, their distorted sense of time and distance may affect how they receive certain assurances (Aldaba, 2022). All of these factors can contribute to feelings of anxiety. This is observed in the case, from the client's behavior of being clingy and crying non-stop whenever her mother leaves for work three times a week.	After 3 days of nursing interventions, the client, with the help of their family, will: Express understanding of the need of mother to leave momentarily. Identify healthy ways to deal with and express anxiety. Demonstrate effective coping in the absence of mother.	 Discuss the client's experience of separation anxiety as a sign of a positive developmental milestone. Rationale: To reassure the caregiver that the client is acting according to what is expected of them. Encourage the caregiver to provide an explanation for leaving in language appropriate for the age of the client. Rationale: To provide reassurance. Encourage the client and their caregiver to develop a quick "goodbye" ritual. Rationale: To provide reassurance to the client, helping them adapt better to separation. Reinforce consistency in the home

	environment by encouraging the family to stick to routines. **Rationale:** Inconsistencies can further worsen the child's separation anxiety.**				
ANTICIPATED NURSING PROBLEMS	RATIONALE FOR THE ANTICIPATED NURSING PROBLEMS				
Ineffective airway clearance	As stated in the case, the client resides with 2 smokers, her father and grandfather. Because of this, she might be exposed to second-hand smoke. Cigarette smoke contains chemicals that significantly affect airway secretion through the impairment of the mucociliary clearance (MCC). The MCC allows the airway to be cleared of inhaled foreign objects (Liu & Di, 2012). Thus, its impairment also affects the self-clearing mechanism of the airways of the respiratory system.				
Sedentary lifestyle	It was mentioned in the case that the client is playful. However, it was also stated that she prefers to be at home playing with her tablet, instead of actively playing with her peers. If this persists, the insufficient interest of the client in physically stimulating activities could result in a sedentary lifestyle, which is a habit of life that is characterized by a low physical activity level (Herdman & Kamitsuru, 2018).				
Interrupted family processes	As observed from the case, the caregiver of the client lacks an understanding of childhood development. For instance, she expressed concern over the frequency of the client's colds, perceiving her child as sickly. However, this is an expected occurrence given the client's age. Furthermore, the child is not attending any preschool or child care center, which could be helpful in her social development. The deficient knowledge on the developmental expectations of the child could result in interrupted family processes, which is a break in the continuity of family functioning resulting in the failure to support the health and wellbeing of its members (Herdman & Kamitsuru, 2018).				
Impaired comfort	Impaired comfort refers to the perceived lack of ease, relief, and transcendence in physical, psychospiritual, environmental, cultural, and/or social dimensions (Herdman & Kamitsuru, 2018). In the physical aspect, the frequency of the client's colds might be a source of discomfort. The common symptoms of colds in children are the presence of a stuffy nose and sneezing. Sore throat, cough, headaches, mild fever, and muscle aches may also be encountered, all of which can cause discomfort (Schare, 2020). On the other hand, in the environmental aspect, exposure to tobacco smoke might serve as a source of discomfort. These can increase the client's risk of having several health problems, such as ear infections, lung infections, asthma flare-ups, cough, sore throats, sniffling, and sneezing (Ben-Joseph, 2019). Furthermore, in the social aspect, it was observed that the client refuses to engage in activities with peers. Additional cues might point to social discomfort.				
Risk for loneliness	The client has limited access to socialization opportunities, given her non-attendance to any preschool or daycare. Furthermore, this might be compounded by her preference to spend time alone by herself, as evidenced by her inclination to stay at home to play with her tablet, instead of playing with her peers. Her caregiver also leaves home for work 3 days a week. All of these factors could affect her social development, which in turn might increase her risk for loneliness, which is the susceptibility to the experience of discomfort associated with a desire or need for more contact with others, which may compromise health (Herdman & Kamitsuru, 2018).				

HEALTH EDUCATION PLAN: PRESCHOOLER

Name of Client: Sonia

Age: 5 years old

Gender: Female

Nursing Diagnoses of Focus:

- Ineffective family health management r/t insufficient knowledge about developmental expectations concerning health AEB perception of child as sickly because of frequent colds, improper management of colds, and failure to take action to reduce risk factors of colds in the family.
- Risk for overweight AEB preference to consume fast food, inadequate vegetables and fruits in diet, and lack of physically stimulating hobbies.

Rationale: Both nursing diagnoses are considered as the highest priority as they are threats to the physiological needs and safety needs, respectively, which are both ranked highest on Maslow's hierarchy of needs.

TITLE: Proper Care of the Preschooler: Health Management and Nutrition

TARGET PARTICIPANT/AUDIENCE: The client, her parents, and her grandparents

GOAL: After a 2-day health teaching, the client and their caregivers will be able to demonstrate appropriate behaviors and actions on the appropriate care for the health and nutrition of a preschooler.

DAY 1 (NDx: Ineffective family health management)

Objectives	Content Outline	Method of Instruction	Time Allotted	Resources	Method of Evaluation
After 25 minutes of health teaching, the client, along with their caregivers will be able to: 1. Verbalize understanding of colds as a common health problem experienced by preschoolers.	 Common health problems of a preschooler Signs and symptoms of identified health problems 	Use of visual aidOne-on-one discussion	5 minutes	 Infographic showing common health problems of a preschooler, with emphasis on the problem of colds 	Question and Answer "How do you now perceive your child's frequent experience of colds?"
Identify at least 1 individual behavior that can exacerbate the problem of colds.	 Risk factors of colds, specifically exposure to tobacco smoke Other consequences 	Use of visual aidOne-on-one discussion	5 minutes	 Infographic showing exposure to tobacco smoke as a risk factor of colds and 	Question and Answer "Can you state at least 1 personal behavior that may

	to health caused by the exposure to secondhand smoke			further impact of secondhand smoke on overall health	further contribute to Sonia's experience of colds?"
Discuss the role of medications in alleviating symptoms of colds.	 Benefits of using medications for the management of colds Age-appropriate medications for the alleviation of the discomfort experienced from colds Importance of consulting a medical doctor in choosing the right medication 	 Use of visual aid One-on-one discussion 	5 minutes	Infographic showing age-appropriate medications for the preschooler and their benefits when it comes to the management of colds.	Question and Answer "How do you think medications can help in the management of colds?"
4. Discuss at least 2 non-pharmacological methods for the management of colds.	 Importance of non-pharmacological methods for the management of colds Benefits of non-pharmacological methods for the management of colds Non-pharmacological methods for the management of colds such as Increasing hydration Using humidifiers 	 Use of visual aid One-on-one discussion 	10 minutes	Brochure showing non-pharmacological methods for the management of colds	Question and answer "Can you explain how at least 2 of the non-pharmacological methods discussed work to alleviate colds?"

				T	
	RestingUsing a saline nasal spray				
		DAY 2 (NDx: Ris	k for overweight)		
After 30 minutes of health teaching, the client, along with their caregivers will be able to:					
5. Discuss the expected eating habits of a preschooler.	 Eating habits of a preschooler Quantity and quality of food normally preferred by preschoolers 	Use of visual aidOne-on-one discussion	5 minutes	 Brochure showing the expected eating habits and food preferences of a preschooler 	Question and Answer "Do you think that your child's nutritional habits are in line with what is expected of a preschooler?"
6. Recall at least 3 of the recommended servings for food groups appropriate for a preschooler.	 Daily recommended servings according to the Daily Nutritional Guide pyramid from DOST-FNRI 	Use of visual aidOne-on-one discussion	5 minutes	 Brochure showing Daily Nutritional Guide pyramid from DOST-FNRI for children age 1-6 	Question and Answer "Can you recall at least 3 out of the 7 recommended servings?"
7. List at least 2 foods that they need to consume less.	Unhealthy foods that preschoolers should consume less, with emphasis on fast food	Use of visual aidOne-on-one discussion	5 minutes	Brochure showing unhealthy foods that should be consumed less for preschoolers	Question and Answer "Can you give me at least 2 unhealthy foods that you should eat less?"
8. Identify at least 1 way to make fruit and vegetables more palatable.	 Creative recipes for the preparation of fruits and vegetables 	Use of visual aidOne-on-one discussion	5 minutes	Brochure showing ways to make fruit and vegetables more palatable	Question and Answer "Can you give me at least 1 way to prepare fruits and vegetables to make them more palatable?"

9. Choose at least 1 hobby that is high in physical activity.	 Importance of physical activity Benefits of physical activity Examples of hobbies that are high in physical activity 	Use of visual aidOne-on-one discussion	5 minutes	Brochure showing hobbies that are physically stimulating	Question and Answer "Which of the hobbies discussed that are high in physical activity would you want to try?"
10. Monitor their nutritional and physical activity.	 Importance of monitoring food intake and physical activity Content of food and physical activity diary entries 	 Demonstration of monitoring of nutritional and physical activity 	5 minutes	Food diaryPhysical activity diary	Observation of entries in the diaries

References:

Aldaba, J. (2022). Care of the Child from Infancy to Adolescence: Care of the Preschooler [PowerPoint Slides]. University of the Philippines Manila Virtual Learning Environment: https://vle.upm.edu.ph/login/index.php

Ben-Joseph. (2019). Secondhand Smoke. KidsHealth. https://kidshealth.org/en/parents/secondhand-smoke.html

Bulechek, G.M., Butcher, H.K., Dochterman, J.M., & Wagner, C. (2013). Nursing Interventions Classification (NIC) (6th ed.). Mosby Inc.

Centers for Disease Control and Prevention. (2020). Health Effects of Secondhand Smoke. $https://www.cdc.gov/tobacco/data_statistics/fact_sheets/secondhand_smoke/health_effects/index.htm\#:\sim:text=There\%20is\%20no\%20risk\%2Dfree,inf ant\%20death\%20syndrome\%20(SIDS).$

Cox, C. E. (2017). Role of physical activity for weight loss and weight maintenance. Diabetes Spectrum, 30(3), 157-160.

Doenges, M. E., Moorhouse, M. F., & Murr, A. C. (2019). Nursing care plans: Guidelines for individualizing client care across the life span. FA Davis.

Douglas, R. M., Chalker, E. B., & Treacy, B. (2000). Vitamin C for preventing and treating the common cold. Cochrane Database Syst Rev, 2, CD000980.

Herdman, T.H., & Kamitsuru, S. (2018). NANDA International, Inc. Nursing Diagnoses Definitions and Classification 2018-2020 (11th ed.). NANDA International.

Liu, Y., & Di, Y. P. (2012). Effects of second hand smoke on airway secretion and mucociliary clearance. Frontiers in Physiology, 3, 342.

Mohammadbeigi, A., Asgarian, A., Moshir, E., Heidari, H., Afrashteh, S., Khazaei, S., & Ansari, H. (2018). Fast food consumption and overweight/obesity prevalence in students and its association with general and abdominal obesity. *Journal of preventive medicine and hygiene*, *59*(3), E236.

Moorhead, S., Johnson, M., Maas, M.L., & Swanson, E. (2013). Nursing Outcomes Classification (NOC). Mosby Inc.

- Raising Children Network. (2022). Shyness: babies and children. https://raisingchildren.net.au/toddlers/behaviour/common-concerns/shyness#:~:text=Shy%20behaviour%20is%20normal%20in,unfamiliar%20people %20speak%20to%20them.
- Schare, R.S. (2020). Colds. *Primary Care Pediatrics at Nemours Children's Health*. https://kidshealth.org/en/parents/cold.html#:~:text=The%20first%20symptoms%20of%20a,become%20thick%20yellow%20or%20green.
- Silbert-Flagg, J. & Pillitteri, A. (2018). *Maternal & Child Health Nursing: Care of the Childbearing & Childrearing Family* (8th ed., pp. 1820-1868). Wolters Kluwer.

Stanford Children's Health. (n.d.). Common Cold in Children. https://www.stanfordchildrens.org/en/topic/default?id=common-cold-in-children-90-P02966