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## The Implementation of Family Centered Care in Hypertensive Patients at Private Clinic

Yosefina D.G.P. Say<sup>1</sup>, Insi Farisa Desy Arya<sup>2</sup>, Indah Amelia<sup>3</sup>

<sup>1</sup> Residency of Family and Primary Care Physician Program, Faculty of Medicine, Padjadjaran University, Indonesia

<sup>2</sup> Family and Primary Care Physician Residency Program, Faculty of Medicine, Padjadjaran University, Indonesia

<sup>3</sup> Department of Public Health, Faculty of Medicine, Universitas Padjadjaran, Indonesia

### Corresponding author:

Yosefina Dwikurnia Gufra Putri Say: Residency of Family and Primary Care Physician Program;  
Faculty of Medicine; Padjadjaran University  
Email: [wiwicksay92@gmail.com](mailto:wiwicksay92@gmail.com)

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### ABSTRACT

**Background:** Hypertension is a condition when a person has systolic blood pressure  $\geq 140$  mmHg and/or diastolic blood pressure  $\geq 90$  mmHg when measured at a clinic or health facility. Hypertension can be a risk factor of important organs damage such as the brain, heart, kidneys, retina, large blood vessels (aorta) and peripheral blood vessels. To prevent the complications, hypertensive patients must control their blood pressure. One approach to achieving controlled blood pressure is involving the family in hypertension management, which is called Family Centered Care. This approach has been implemented at Mitra Sehati Clinic, a private clinic located in Bandung Regency, West Java. This study aims to determine the implementation of hypertension management using the Family Centered Care approach at Mitra Sehati Clinic. **Method:** This research is a qualitative research using a single case study method. The data were obtained through in-depth interviews, observation and documentation and then analyzed using interpretive analysis methods in which emerging themes were interpreted based on the theory of Family Centered Care and hypertension so they became the basis for describing certain conclusions. **Results:** The results obtained show that all elements of Family Centered Care in the management of hypertension have been carried out by health workers at the Mitra Sehati Clinic which are also included in several programs. **Conclusion:** In addition, a positive impact was found on patients, their families and health workers. However, in its implementation, obstacles were found, it was limited time. The solution was to use online consultations via the doctor's or nurse's personal cellphone number. Implementation of Family Centered Care in the management of hypertension has a good impact on patients, their families and health workers.

**Keywords:** Family centered care, hypertension

### BACKGROUND

Hypertension is a condition when a person experiences systolic blood pressure  $\geq 140$  mmHg and/or diastolic blood pressure  $\geq 90$  mmHg measured at a clinic or health facility. Hypertension could be a risk factor of organs damage such as the brain, heart, kidneys, retina, large blood vessels and peripheral blood vessels<sup>1</sup>.

The prevalence of hypertension in the world reached 1.39 billion people in 2010. The prevalence of hypertension was 31% in the adult age group<sup>2</sup>. Only about 1 in 5 (21%) adults with hypertension have normal blood pressure<sup>3</sup>. Indonesia's health research (Riskesdas) in 2018 found hypertension prevalence at age of over 18 years is 34.1%. There was an increase from 2013, where the current prevalence of hypertension was 25.8%<sup>4</sup>. It is only 54.4% took anti-hypertension drugs regularly<sup>4</sup>. West Java Province is the eighth place with the highest prevalence of hypertension in Indonesia<sup>5</sup>. Riskesdas in 2013 the prevalence of hypertension in West Java was 29.4% and increased to 39.6% in 2018. One of the highest hypertension prevalence

in West Java Province is Bandung Regency<sup>5</sup>. Bandung Regency has hypertension prevalence of 41.55% in 2018. The adherence prevalence to anti-hypertensive medication in Bandung Regency is 60.03 %. Most of the reasons for those who did not take anti-hypertensive medication in Bandung Regency were feeling healthy (54.89%)<sup>5</sup>.

According to Anna, the Indonesian's health seeking behavior is influenced by several determinants such as sociodemography, opinions and references from other people (family, friends and community), socio-cultural, perceptions about the causes of someone's illness, perceptions about the health system (private health services are more easy than public health service), and costs<sup>6</sup> identify gaps, and highlight important findings. Articles were retrieved from Medline, Scopus, Web of Science, Academic Search Complete (via Ebsco). Families could help hypertensive patients by disciplined them in taking anti-hypertensive drugs, checking blood pressure, preparing healthy food, helping to stop smoking and consuming alcohol, and doing exercise together. Involving the family in disease management is one of the principles

of family doctor service, which is family oriented<sup>7,8</sup>.

The same principle is also applied in Family Centered Care (FCC). The key of FCC is mutualism between health care providers, families and patients. FCC included family in patient care and treatment decisions<sup>9</sup>. FCC is an effective method in treating chronic diseases such as hypertension and diabetes mellitus<sup>8</sup>. Both family oriented physician services and FCC were primarily offered to pediatric patients<sup>7,9</sup>. Nowadays, the FCC's concept can be applied to all ages and backgrounds<sup>10</sup>.

FCC's elements are the family is seen as a constant element while the presence of health workers fluctuates; facilitating collaboration between families and health workers at all levels of health care, respecting differences in race, ethnicity, culture and family beliefs; identify family and individual strengths, and respect different coping methods; share clear and complete information with families and patients in good and supportive manner; encourage the formation of support groups between families; respond to the needs of families and patients as a part of health care practice and ensuring a system of providing flexible and easily accessible health services; making comprehensive policies and programs that include emotional and financial support<sup>10</sup>.

Several studies about FCC implementation for adult have been conducted. Melisa, et al conducted a systematic review of FCC implementation in primary care for elderly patients with cognitive impairment. FCC and family involvement resulted the increasing of health care quality degree, good patient experience and caregiver satisfaction. In addition, FCC promotes the values of family medicine<sup>11</sup>. Another study was conducted by Jiong Tu regarding the perceptions and experiences of primary care providers in practicing FCC in elderly people with diabetes mellitus in China. Primary health care providers generally express the importance of implementing the FCC for the successful management of diabetes mellitus in the elderly. FCC provided a good understanding to families about the management of diabetes mellitus<sup>12</sup>.

Indonesia has a program for hypertension at primary health care in 2016 named PIS – PK. It was a family approach for hypertension management with maximize the function of the family as a health care provider for family members<sup>13</sup>. PIS – PK has been implemented in government primary health care (Puskesmas) so far, but the pattern of hypertension management with a family approach (FCC) is also implemented in one of the private primary health care: Mitra Sehati Clinic in Bandung Regency, Province West Java. Through this research, researcher wanted to explore the implementation of hypertension management using the Family Centered Care (FCC) approach for hypertension patients at the Mitra Sehati Clinic in Bandung Regency, West Java Province 2022.

## RESEARCH METHODS

This research is a qualitative research with single case study. It was conducted at the Mitra Sehati Clinic during

November 2022. The Mitra Sehati Clinic is a private clinic located in the Griya Mitra Residence, Cinunuk, Bandung Regency, West Java Province which provides health services with family medicine approach. The selection of a single subject in this study was because the selected cases were representatives of other similar cases and were able to represent other cases<sup>14</sup>.

The subject was selected by purposive method. The inclusion criteria were health workers who have worked at the Mitra Sehati Clinic for at least 1 year. Hypertensive patient and their families must have been managed for at least 1 year at the Mitra Sehati Clinic. Patient with complications were not included. This research was approved by the Research Ethics Committee of Padjadjaran University under number 1219/UN6.KEP/EC/2022<sup>15</sup>.

Data collection was carried out by in-depth interviews with 9 people. Consists of 1 family medicine specialist (Sp. KKLP), 2 general practitioners, 2 nurses, 1 pharmacist, 1 pharmacy staff, 1 hypertension patient and 1 hypertension patient's family. Each subject was interviewed once with duration 40-60 minutes. Interviews were conducted based on interview guidelines which were prepared based on research questions and understanding of hypertension and FCC theory. Observations were made to determine the situation and interactions between patients and health workers at the Mitra Sehati Clinic. The patient's medical records were studied to ensure that the patient haven't complication and length of treatment at Mitra Sehati Clinic. The interviews recordings were transcribed and then coded. Data analysis in this study was carried out by identifying domains that included dominant information so that themes were interpreted based on a number of theories regarding hypertension and FCC. Furthermore, the author can make a summary overview of all existing data or information to not only see the facts but also intertwine them with one another.

Data validation was carried out through a data triangulation process. The triangulation process was carried out by comparing data obtained from in-depth interviews with data obtained from observations and documentation studies<sup>16</sup>terstruktur, sistematis, dan memiliki tujuan tertentu baik praktis maupun teoritis. Dikatakan terstruktur karena kegiatan ini berlangsung mengikuti suatu proses dan tahapan-tahapan tertentu. Salah satu tahapannya adalah tahapan dalam pengumpulan data. Data merupakan hal yang sangat krusial dalam penelitian, sehingga dalam perjalanannya, data yang dikumpulkan harus memenuhi syarat pada pemeriksaan keabsahan data, termasuk dalam penelitian kualitatif.\r Metode: Metode yang digunakan adalah literature review, yaitu literatur dikumpulkan dari berbagai sumber seperti buku, jurnal, artikel ilmiah yang saling terkait.\r Hasil dan Pembahasan: Pemeriksaan terhadap keabsahan data merupakan sebagai unsur yang tidak terpisahkan dari tubuh pengetahuan penelitian kualitatif. Teknik pemeriksaan keabsahan data dalam penelitian kualitatif meliputi uji kredibilitas (perpanjangan pengamatan, meningkatkan ketekunan, triangulasi, analisis kasus negatif, menggunakan bahan referensi, atau mengadakan membercheck.

## RESULTS

### Respondents Characteristics

This study took respondents from Mitra Sehati Clinic's health workers; hypertensive patient and family who get treatment at Mitra Sehati Clinic regularly (table 1 and table 2). All respondents had fulfilled the inclusion and exclusion criteria and had been asked for informed consent.

**Table 1. Characteristics of respondents of mitra sehati clinic health workers**

Respondent	Code	Gender	Age (year)	Length of worked
Medical specialist	Sp	Woman	56	13 years old
General Practitioner 1	dr1	Woman	29	4 years
General Practitioner 2	dr2	Woman	27	3 years
Nurse 1	PR1	Woman	52	10 years
Nurse 2	PR2	Man	24	1 year
Pharmacist	Ap	Woman	30	1 year
Pharmacy	F	Woman	30	5 years

**Table 2. Characteristics of patient and family respondents**

Respondents	Code	Gender	Age (year)	Educa-tion	Length of treatment (year)
Mrs. M	Ps	Woman	67	Bachelor Degree	12
Mr. D	KP	Man	72	High School	12

### Case

Mrs.M, 67 years old has hypertension since 17 years ago. She came to Mitra Sehati Clinic for monthly medical check. On arrival she had no complaints, blood pressure 120/80 mmHg, body mass index was 22.5 kg/m<sup>2</sup>. Examination of cor, pulmo, and abdomen is normal. She denied any other medical history before.

She was first diagnosed with hypertension when 50 years old. At that time she went to the hospital to treat frequent headaches. Every month she went to hospital to take medicine. Then, she moved to another area due to retirement. She transferred her medical check to Mitra Sehati Clinic, which had just opened at that time. Now, she is being treated with Amlodipine 5 mg every night. She currently lived with her husband (72 years) who also involved in Prolanis (Chronic Disease Management Program) because of diabetes mellitus. Their children worked at another city and visited them once a year.

Results from interviews and observations obtained three themes, which are the implementation of FCC elements in hypertension patients, implications, and obstacles of implement the FCC elements.

### 1. Implementation of FCC elements in hypertension patients.

- Family is a constant element while the presence of health workers are fluctuated

Health workers at Mitra Sehati Clinic realized the role of the family is very important to manage blood pressure and prevent complications. The role of family is not only when conducting consultations at the clinic but also at home.

"We checked Mrs. M. We give medicine. This is recorded and then re-controlled. We re-informed, we double-checked, and we invited her husband. The family was very important for healing or stability. Chronic disease is difficult and can't be cured right away so it need family cooperation. For example, her husband can remind eating healthy food or routine checks to the clinic." (P1)

"... there are also many elderly people who live alone (without children). So, we always try to educate and invite their family."(dr2)

- Facilitate collaboration between family and health workers at all levels of care.

In hypertension management, Mitra Sehati Clinic's health workers invited patients and their family to discuss the best way to reduce patient's high blood pressure.

"We gave education to family. Several times, we visited Mrs.M and Mr.D's...We really have more attention because they lived alone. Well, that was fun. We saw them arguing each other or sometimes they discussing about food. Like, we have to eat this sir..."(Sp1).

Health workers at the Mitra Sehati Clinic also facilitate family meetings to share things that family members can do to help patient.

"...A year ago, we had family conferences with their children...family counseling at that time was when their children at home..." (P1)

- Respect differences of race, ethnicity, culture and family beliefs.

In carrying out the hypertension management, Mitra Sehati Clinic's health workers didn't forget to consider the patient and family's race, ethnicity, culture and beliefs.

"...For example, Mrs.M is Sundanese. She like eating salted fish. I will speak in Sundanese, for example: I'm still like salted fish. We can try to reduce it, once every 2 days or once a week, and then stop.... (P1)

Religion and belief are also a concern in hypertension management, such as time for taking medication, especially during Ramadhan.

"...sometimes they asked about time to take medicine when Ramadhan. We recommend to take it at night, right after breaking the fast.."(Apt)

- d. Recognize family and individual strengths, and respecting different coping methods.

The strengths and ways of coping of patient and families need to be identified for further treatment. The health workers thought that by holding family conferences and private consultations, they will get clear information about how individual's coping methods.

"...when a patient got hypertension...there must be something that has a negative effect. I often get they felt down. Most of them will deny. Blame someone. Her husband is probably the one who keeps on annoying her like that, and so on. If the family does not know how to care for people with hypertension, we worried conflict could be appeared. So, when a patient come with his partner. It indicated a very good sign. Okay, let's get together. Her life is good and our goal now is yes...good quality of life."(Sp)

In addition to individual strengths and coping, consideration of family strengths in dealing with hypertension needs to be identified.

"I had Mrs.M family conference... They really want to contribute but they lived far away from them. I explained what I know. They asked about this and that... Their children actually able financially, but being busy, distance makes it difficult for them caring their parents....."(Sp)

- e. Sharing clear and complete information about hypertension and its management with families and patients in a good and supportive manner.

Information about hypertension is provided to patient and families during private consultations via offline or online.

"Here is a whats app (online chatting application) group. It is only a communication group such as information about hypertension." (dr1)

"...Prolanis has 2 hours waiting time. At that time we got counseling. And the counseling is interactive. Usually about medicine, sports, types of food, etc..." (Ps)

Informations are most often provided by doctors. If patients ask things beyond nurses, pharmacists or pharmaceutical assistants' knowledge, they will direct patients to doctors.

"Education or counseling is mostly done by doctors. We mostly talk about what we know, for example what kind of exercise, what to eat..." (P2)

"I often remind how and when to take medicine..." (F)

- f. Encourage the formation of support groups between families.

Mitra Sehati Clinic didn't provide a special gathering group for families. However, in Prolanis activities, family members, especially elderly patients, are expected to come

and take part in activities such as counseling.

From the observations, the researcher saw the patients came with their partners who had hypertension or diabetes mellitus. While waiting, the Prolanis participants often talked about their illness experiences.

"While waiting, we chatted, only elderly who were sick. What we talked is what we feel (sick). Sharing experiences to stay healthy with this disease..."(Ps)

Patient and their families at the Mitra Sehati Clinic who are members of Prolanis also persuade other patients who also had hypertension by sharing their illness experiences or inviting other person to participate Prolanis or exercise activities at Mitra Sehati Clinic.

"I joined it because Mrs.Jubaedah. She was the first saying to me about Mitra Sehati clinic.. the family doctor clinic..Now, my blood pressure always normal. rarely any complaints."(Ps1)

- g. Responding to the families' and patients' needs as a part of health care practice, as well as ensuring a flexible and accessible system of health service.

Based on the interview, it was found Mrs.M felt helped by doctors and nurses provided them personal contact. They could consult and get answers about their health conditions easily.

"If something uncomfortable happen, such as headache. I will definitely send message to doctor..She (doctor) would reply later. Sometimes she visits me." (KP)

Doctors and nurses are happy to provide their personal contact to the patients. Online consultation is a way to bring services closer and find out the needs of patients and families.

"..Please sir/madam ask for our phone number... So it provides an opportunity for patients to consult, understand, get correct information."(P1)

"Patients who are rarely come to clinic are usually contacted by doctors personally." (P2)

"And one more thing, they (doctors and nurses) memorize us. And if someone missing or come rarely to Prolanis. They will visit his / her home."(Ps)

- h. Making right policies and programs for emotional and financial support.

Patients diagnosed with hypertension will be directed to join an association called Prolanis organized by the BPJS (Healthcare and Social Security Agency). They should have Indonesian Health Card (KIS). This program helped them to get drugs, exercise, and knowledge.

"Routine medical check programs are from BPJS. If they don't have KIS, they still can join the program. But we still give information about the advantages having KIS, such as free of antihypertensive drugs and laboratory exam." (P1)



Considering that hypertension must always be routinely checked and take anti-hypertensive medication regularly, patients who doesn't have KIS but are constrained by the cost of buying medicine, the clinic will advise patients to buy medicine every week.

Mitra Sehati Clinic also has a program called Obat Hibah. It is a program to collect drugs from patients who stopped using the drug and then used for other patients who can't afford it for free.

"I gave my leftovers amlodipine to the clinic. Later it could be used for other patients freely." (Ps)

## 2. Impact of implementation FCC in hypertension patients.

The application of FCC in hypertension management provided same perceptions about hypertension between patients and health workers. FCC able to make them accepting their illness. It was highly considered by doctors before starting a therapy.

"Firstly, reaching the same perceptions about hypertension among them." (dr1)

"... we must counsel the patient so they can remember and understand that hypertension cannot stop taking medication even though their blood pressure is normal." (Apt)

Education delivered to patient's family also. Family conferences and home visit by doctors or nurses provide a good understanding of the patient's family in caring for patients at home. Keeping the patient's blood pressure normal is the goal of managing hypertension. In addition, the patient's family can adopt a healthier lifestyle too.

"We (patients and husbands) were told to eat regularly. Don't forget to exercise. We have to adjust our diet, don't eat coconut milk, salt, anything that tastes good." (KP)

".. Alhamdulillah my blood pressure is always normal. This family doctor clinic organized our diet... we took medicine and doing exercise regularly." (Ps)

The application of FCC in hypertension management brought patients and families closer to each other emotionally so the mental health are effected. Based on observations of researchers, patients and their families who also have other illnesses such as diabetes mellitus are active in excercises, Angklung Club, and interactive discussions when counseling is given.

"We are participating Angklung Club, and sometimes recreation activity. So, we can forget about the disease we had..." (PS)

"There is also an Angklung Club here... It has increased their motivation to be healthy. They do their hobbies. They can chat each other. They also support each other." (dr2)

The application of FCC does not only have an impact on patients and families, but doctors, nurses and pharmacists also felt the ease of supervising and controlling patients in managing their hypertension when the patient is at home.

"If they come with their family, it's good.. It's easy for us to take care of the patient's diet.. Because the ones who prepared meal is family..." (P1)

"Because Ms. M lives with her husband, so we told them about time to take medicine. In the past, we set an alarm on their mobile phone for taking medicine." (Apt)

## 3. Barriers to the implementation of FCC elements in hypertensive patients.

FCC at Mitra Sehati Clinic has a barrier in its implementation. It was limited time.

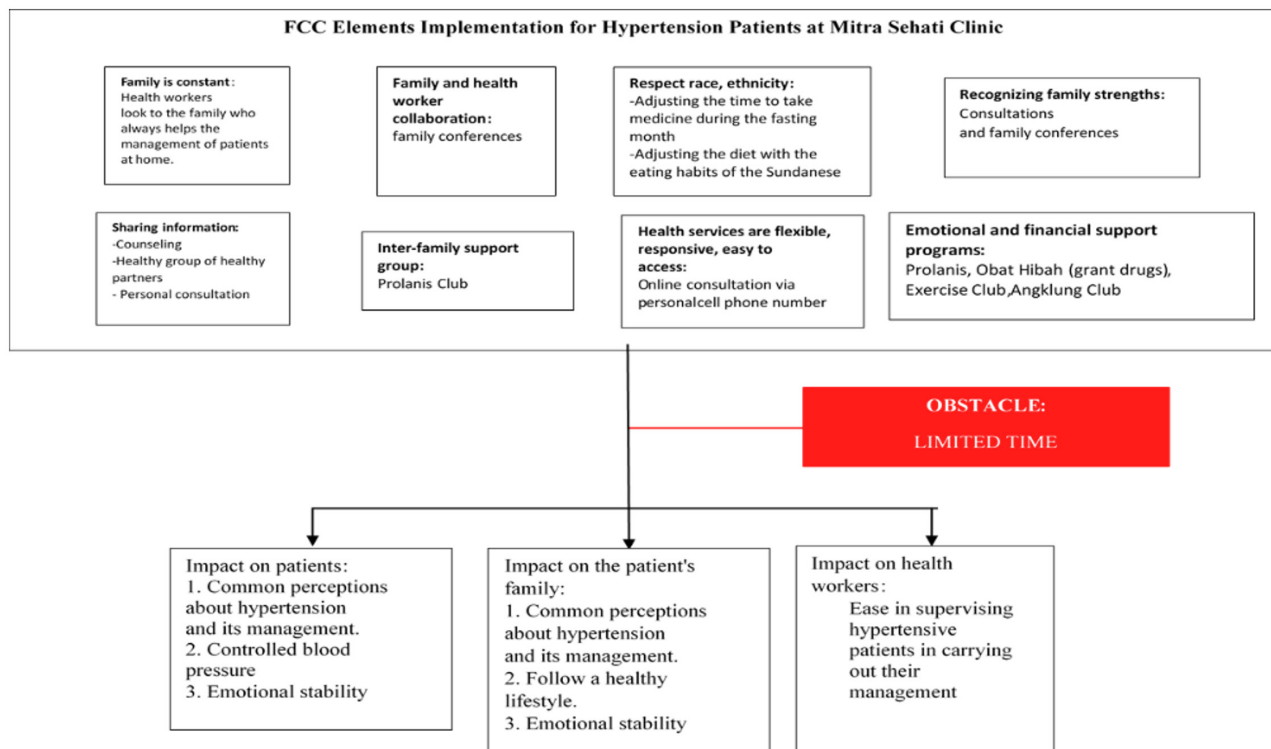
"For example there are a lot of patients, so we are hampered, we don't talk too much with Ms. M." (P1)

"For explaining the illness and what to do for the illness, it takes times.. Sometimes the other patients grumble because they have been waiting for so long." (dr1)

The health workers solved this obstacle by made an online consultation via personal cellphone number so families and patients can consult anytime. They also made a WhatsApp (WA) group for hypertension patients as a media for sharing informations.

"What I often do is communicating via WhatsApp. I asked her children to exchange our numbers (cellphone numbers). Actually this is what they need. They want us to be among them... The wa group is used by patients to get information, such as activities' schedule, health informations, etc." (Sp)

The hypertension management at Mitra Sehati Clinic has implemented the elements of Family Centered Care shown in Figure 1. The family as a constant element in hypertension management has been well understood by the all health workers at Mitra Sehati Clinic. Mitra Sehati Clinic has carried out many innovative programs as an effort so the family becoming partner in health services, such as consultations (online and offline), family conferences, Prolanis, Angklung Club, Exercise Club, and Obat Hibah. Its were the forums for sharing informations, recognizing family and individual strengths, collaboration, making of support between families and patients to maintain emotional stability; and also accessible and flexible health service system. By use FCC in managing hypertension, good impacts on patients, families and health workers have been obtained. Patients, families and health workers have same perceptions about hypertension. The patient's blood pressure becomes normal and their emotional are well cared. The patient's family also adopts a healthy lifestyle that could prevent disease occurred. The FCC also provides convenience for health workers in supervising patients doing the management. However, there was an obstacle in



**Figure 1. Hypertension management with family centered care approach**

its application. It was health workers' limited time.

## DISCUSSION

Mitra Sehati Clinic as a Family Doctors Clinic has been applied the principles of family medicine in practice. So the pattern of making family as a partner in dealing with diseases, especially chronic diseases, has been used by all health workers.

They realized that family is the person who always available to care for hypertension patients outside the health facilities. Doctors collaborated with patients and families by making family consultation (online or offline) to determine the best therapy for patients. This integrated families in the care team, attracted them as partners, and provided facilities for patients and their families by having doctors and nurses cellphone numbers that can always be contacted when they need health assistance<sup>17,18</sup>.

The hypertension management consists of medication and lifestyle changes, such as cutting salt consumption, changing diet, losing weight and maintaining ideal body weight, regular exercise, quit smoking, reducing alcohol consumption and reducing stress.<sup>1</sup> Doctors and nurses at the Mitra Sehati Clinic shared this knowledge by conducting consultation to get same perceptions. The family was included in this program because lifestyle changes arranged by the family at home. Family is an important part of patients' therapy compliance. Families who pay attention to family members who experience health problems and determine when they need help during illness<sup>19</sup>.

In implementing the hypertension management, health workers also consider the culture and beliefs of patients and families. Adjusting to the culture and beliefs of patients and

families would easier to communicate and accepting the therapy<sup>18</sup>. Chen, et al suggest respecting cultural differences, but still warn the family if there is contradictory evidence related to health outcomes<sup>20</sup>.

Discussions between patients, families and health workers are needed to find out the needs, strengths, ways of coping, and the financial situation of patients and families which will later influence the decision to choose therapy. Families have varying strengths that can be affected by the illness of its members. The strength of the family in dealing with these health problems is important in the family's participation in caring for patients<sup>17</sup>. From this research, it appeared that Mitra Sehati Clinic was trying to create a drug grant program to solve the problem of costs when buying medicines. In addition, patients who have been diagnosed with hypertension are always offered to participate the Prolanis if they have KIS. Lack of funds is one of the most influential factors for patients who do not routinely take anti-hypertension drugs<sup>5</sup>.

The Prolanis Club is a place for patients to receive information about hypertension and method to treat it. At this club, they discussed and exchanged ideas which ultimately made the participants more motivated to reduce their blood pressure and have a good quality of life. Feinberg's said that the relationship of patient with family and friends improves mental, physical, spiritual health status<sup>18</sup>. Mitra Sehati Clinic also created an Angklung Club which is an entertainment for people with chronic diseases.

Sharing complete and accurate informations is important for family so they can do patient's selfcare independently. It is important for health workers to explain each procedure using simple language to patients and families. This

communication should be carried out periodically so the family can participate effectively in care and decision making<sup>17</sup>. FCC in hypertension management provided understanding about hypertension and its management among patients, families and health workers who are the first door in providing management plan.<sup>18</sup> The knowledge of hypertension influenced families in caring patients. Lack of understanding about hypertension can reduce patients' compliance to anti-hypertension drugs<sup>21,22</sup>.

Normal blood pressure can be achieved and maintained by implementing FCC. This is described in a study by Costa which stated that family participation is important in controlling the patient's blood pressure<sup>23</sup>. Keshvari mentioned that involving the family in the management of hypertension in the elderly makes it easier to improve the patient's blood pressure<sup>8</sup>. In this study, the health workers at Mitra Sehati Clinic included the patient's husband as someone who always with her. They can help each other to take medicine regularly, manage their diet, and exercise regularly.

In addition, the patient's family also followed the healthy lifestyle to prevent diseases occur. A research by Keshvari said that the application of FCC has an effect on the preventive behavior of all family members to maintain and improve their health<sup>8</sup>. Yogi, et al also explained that families also have a desire to maintain their own health because of the knowledge obtained by nurses and doctors<sup>19</sup>.

For health workers, FCC provided convenience in supervising patients do the recommendations for managing hypertension at home. Health workers at Mitra Sehati Clinic realized that the presence of family is always a constant in patient's life. The same thing is illustrated in Jiong Tu's research that health workers aware of their limitations in coverage the management of a patient's chronic disease (diabetes) so that family involvement is very important in the success of therapy<sup>12</sup>. Families can pay attention to family members who are sick and determine when family members need help. The family become an important part in terms of patient adherence in treatment<sup>24</sup>. A study in Yogyakarta showed that family members gave comprehensive attention to patients by reminding them take medication, adhering to diet and exercise, and trying to create a conducive atmosphere to prevent anger<sup>19</sup>.

Implementation of FCC in hypertensive patients sometimes has obstacles. This study encountered an obstacle. It was the limited time when discussing with patients and families. The same obstacle was seen in Noerdin's research which said that time was a barrier for nurses and doctors to explain to patients. Nurses finally find it difficult to provide information according to patient needs<sup>25</sup>. Previous research by Lloyd said that a busy department and heavy workload make implementing the FCC difficult<sup>26</sup>.

The solution for this obstacle is online consultation via whatsapp to doctor's and nurse's personal cellphone number. Family integration in the care team by providing

facilities for patients and their families to have doctors and nurses' cellphone numbers that can always be contacted when they need health assistance is useful for easy assistance and solutions for health problems<sup>18</sup>. A systematic review study stated that telehealth (a program that uses telecommunications for health services outside of health facilities) in chronic disease management has a satisfactory impact and this innovation feels suitable for addressing patient health problems<sup>27</sup>.

The limitation in this study is the results of this study came from small-scale studies and some research subjects had differences in length of time they worked which was quite far, so the experience in treating patients was different. This single case study research also has advantage such as single case allows in-depth observation and recognition. The small number of research subjects allowed researchers to conduct in-depth interviews well. These things make this case study able to reveal specific, unique and detailed things such as habits, customs, culture, patient and family beliefs, as well as views on Mitra Sehati Clinic's innovative programs that are followed by patients and families.

## CONCLUSION

Hypertension is a chronic disease that required lifelong care. One approach that can be used to achieve normal blood pressure is Family Centered Care. FCC solved biomedically and kept emotional stability of hypertension patients. FCC is health promotion activity for family members of hypertension patients, especially to adopt the healthy lifestyle. FCC implementation can be held into various programs such as consultations (online and offline), family conferences, Prolanis clubs, Angklung club, Exercise Club, and Obat Hibah. However, there is an obstacle in its implementation which is limited time from health workers. The solution is to use online consultations to the doctor's or nurse's personal cellphone number.

Researchers suggest the implementation of FCC for hypertension patients at the Mitra Sehati Clinic should be made in standard operating procedures, besides that training to health workers about FCC and hypertension must be increased. The implementation of FCC in hypertension patients needs to be carried out in quantitative research also so we can see the influence of hypertension management.

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