Facilitating the Care of Families: ICU Nurses’ Perspectives

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BACKGROUND

- What patients admitted to the ICU are at physiological risk, their families are at psychosocial risk.
- Extending care to vulnerable family members becomes a priority when standard of care discussions focus on efforts to extend care to families presents significant challenges for ICU nurses.
- Qualitative studies of ICU nurses’ experiences working with families have provided some insight as to what may facilitate their work with families.
- No previous investigation has delibrately explored what ICU nurses believe is most conducive to family centered care.
- The importance of supportive resources for ICU nurses who must balance the care of both critically ill patients and family members require an in-depth investigation of nurses’ perspectives.

PURPOSE

To specifically explore what ICU nurses believe would benefit them to extend care to family members of critically ill patients.

METHODOLOGY

Design: Qualitative descriptive design
- Convenience sample of ICU nurses
- Purposively selected focus groups
- Selective thematic content analysis of verbatim transcripts

Setting: 12-bed medical-surgical ICU
- University affiliated teaching hospital in Montreal, Quebec
- Commitment to family centered care
- Minimal auditing restrictions
- Open information sharing
- Signed decision making
- Shared decision making

Sample: 16 ICU health-care provider respondents
- 14 female
- 25 – 39 years old (n = 29
- College, Bachelor’s and Master’s education
- 3 months – 4 years nursing experience (mean = 7.5 yr)
- 3 years – 10 years ICU nursing experience (mean = 10 yr)
- 4 of 16 respondents reporting busy family life

CONCLUSION

- The revised perspective on family centered care in the ICU necessary to explore and understand the potential ways family centered care in the ICU may be extended.
- ICU nurses and families are at increased risk when trying to identify and switch care to family centered care that needs to be effective in balancing the needs of both patients and families.
- Facilitability of implementation must also be considered, particularly when determining professional group and department is concerned.

CLINICAL IMPLICATIONS

- This project explored what ICU nurses believe would benefit them to extend care to family members of critically ill patients.
- Findings not only provide further insight into the debates based on their experiences in the ICU for families who must be allotted visited nurses’ suggestions for facilitating the challenging aspect of framing positions.
- Of particular note, nurses believe successfully caring for family members and the families’ identification until the development of the ICU nurse and the nurse is required to intercede for each topic, the study’s participants did not report new or additional resources for home programs and allocation of critical resources.

REFERENCES