

Background

Post Intensive Care Syndrome (PICS) and Post intensive care syndrome Family (PICS-F) is a phenomenon that impacts patients and families after discharge from the intensive care unit. PICS consists of three primary complications physical cognitive and psychological.

ICU diaries have been noted to positively impact the complications related to PICS, including reducing depression, anxiety and improving communication. Communication is an important component of care in the ICU. Communication helps patients and families better grasp the clinical picture and make educated decisions about the patients care.

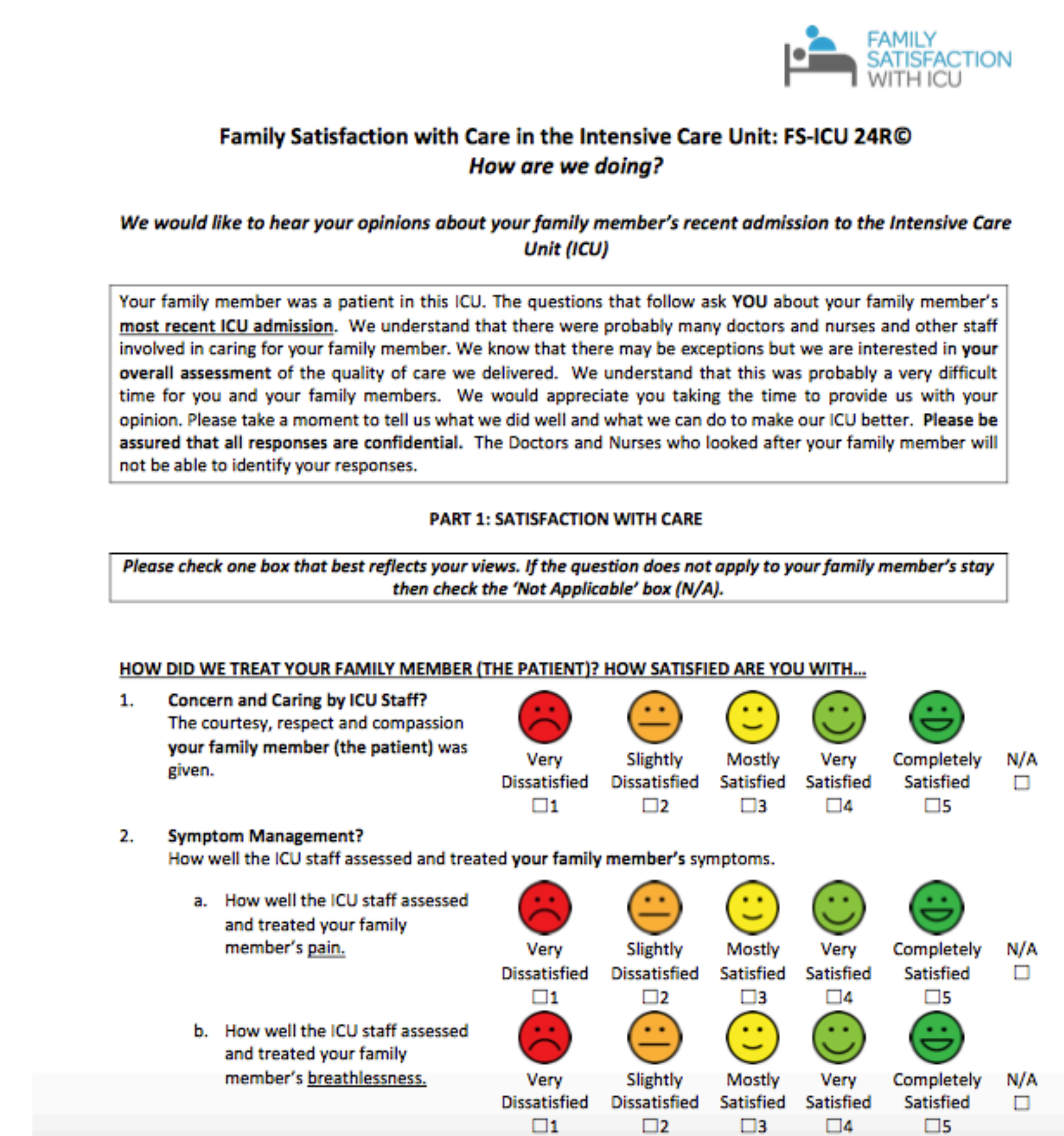
Project Objectives

The purpose of this evidence based project is to determine the impact of ICU diaries on communication and quality indicators (i.e. length of stay (LOS), patient satisfaction and falls) in the cardiovascular intensive care unit (CVICU)

Methods

- This evidence based project will utilize de identified aggregated PI/QI data.
- EBP procedure includes
 - Review de identified data and patient satisfaction scores
 - Education of CVICU staff
 - Distribution of research flyer and brochure
 - Meetings with leadership team to identify appropriate subjects
 - Consent subjects
 - Subjects will be asked to complete the Family Satisfaction with Care in the ICU 24 FS-ICU24R© survey.
 - Review of PI/QI data falls, LOS, and patient satisfaction.
- Convenience sample (n= max of 40)
- Setting-CVICU in an academic medical center
- Qualitative approach – FS-ICU 24R ©

FS-ICU 24R ©



Family Satisfaction with Care in the Intensive Care Unit: FS-ICU 24R©
How are we doing?

We would like to hear your opinions about your family member's recent admission to the Intensive Care Unit (ICU)

Your family member was a patient in this ICU. The questions that follow ask YOU about your family member's most recent ICU admission. We understand that there were probably many doctors and nurses and other staff involved in caring for your family member. We know that there may be exceptions but we are interested in your overall assessment of the quality of care we delivered. We understand that this was probably a very difficult time for you and your family members. We would appreciate you taking the time to provide us with your opinion. Please take a moment to tell us what we did well and what we can do to make our ICU better. Please be assured that all responses are confidential. The Doctors and Nurses who looked after your family member will not be able to identify your responses.

PART 1: SATISFACTION WITH CARE

Please check one box that best reflects your views. If the question does not apply to your family member's stay then check the 'Not Applicable' box (N/A).

HOW DID WE TREAT YOUR FAMILY MEMBER (THE PATIENT)? HOW SATISFIED ARE YOU WITH...

1. Concern and Caring by ICU Staff?
The courtesy, respect and compassion your family member (the patient) was given.

Very Dissatisfied [1] Slightly Dissatisfied [2] Mostly Satisfied [3] Very Satisfied [4] Completely Satisfied [5] N/A []

2. Symptom Management?
How well the ICU staff assessed and treated your family member's symptoms.

a. How well the ICU staff assessed and treated your family member's pain.

Very Dissatisfied [1] Slightly Dissatisfied [2] Mostly Satisfied [3] Very Satisfied [4] Completely Satisfied [5] N/A []

b. How well the ICU staff assessed and treated your family member's breathlessness.

Very Dissatisfied [1] Slightly Dissatisfied [2] Mostly Satisfied [3] Very Satisfied [4] Completely Satisfied [5] N/A []

- 34 Item questionnaire that measures family satisfaction with care provided
- Original tool revised to 24 items
- Divided in two parts (satisfaction with care and satisfaction with information provided)
- Available in several languages
- Validity and reliability conducted
- Permission granted as long as tool is not manipulated

Theoretical Framework

- Plan – Do- Check- Act
 - Plan- Establish EBP project and provide education for CVICU staff- distribute flyers to unit. Initiate project
 - Do- Consent participants
 - Check (Study) –Compare baseline data with data collected over 3 month period
 - Act – Provide re education as necessary, discuss preliminary findings with interdisciplinary team members and unit leadership

Anticipated Findings

- Improved communication between family members of patients in the CVICU and interdisciplinary team members.
- Improved patient outcomes related to quality indicators including patient satisfaction scores, falls and LOS.
- Staff will more knowledgeable regarding the impact of PICS and PICS-F on patients discharged from the ICU.

Results

This evidence based project was implemented in November 2021 In December 2021 increased COVID cases lead to visitor restrictions and the project was placed on hold Visitation restrictions were lifted in February 2021 and the project resumed. A total of 7 eligible family members were enrolled One survey was returned- A statistical analysis was not completed due to the low survey response

Conclusion

ICU diaries have been noted throughout the literature as a method of fostering communication between patients, families and interdisciplinary team members. ICU diaries have also been noted to impact PICS a long term issue associated with prolonged ICU admission. The result of this performance improvement project could not show the impact of communication in the CVICU. There was anecdotal evidence that suggests family members were less enthusiastic about journaling in the traditional sense but open to discussions with the project lead. This would suggest that programs like an ICU support group /person maybe beneficial to this patient population

Implications for Nursing Practice

PICS and PICS-F are under recognized and undertreated complications of ICU care. Patients can experience these complications long after the ICU admission. Recognizing and addressing risk factors of PICS during the hospital stay can decrease its incidence and degree. Utilizing tools such as the ICU diary can assist with the challenges of PICS faced both during and after the ICU admission.

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