PII-28: Supporting Families of Intensive Care Patients: A Review of the Evidence

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Abstract:
Introduction: More than 5 million patients are admitted into intensive care units (ICU) each year (Society of Critical Care Medicine, 2006) The experience of having a family member in intensive care can be a stressful event for family members and may negatively affect their emotional and physical health. To provide holistic care, the needs of the family must also be addressed. Many interventions are used by nurses to provide family care, but evidence-based interventions have yet to be well documented. The purposes of this literature review were to examine the body of interventional research focusing on support of family members of adult patients in an ICU and to make evidence-based recommendations for nursing practice.

Method(s): A search of health-related databases from 1999 through 2009 was conducted to identify family intervention studies in an ICU. Ten studies meeting the criteria (English, peer-reviewed, and intervention during acute illness) were placed in a database for analysis and
evaluated using the Matrix Method framework (Gerrard, 2007). Study data were analyzed to examine the effectiveness of interventions and make recommendations for nursing practice and research.

**Results:** The studies were conducted in a variety of ICU settings in hospitals in the U.S. and internationally. The majority of samples had greater than 50 participants. Three categories of interventions were identified: (a) end of life care, (b) preparing for patient transfer from the ICU, and (c) meeting family needs for information and support. Most of the studies were conducted by a multidisciplinary team; only three studies were conducted solely by nurses. Measureable outcomes included family member depression and anxiety, affect, and needs and satisfaction. Intervention strategies included patient care team conferences, family education sessions, and improving communication about patient status or care.

**Discussion & Conclusions:** Interventions provided by a direct care nurse or physician resulted in more favorable family outcomes compared to those provided by a liaison or volunteer. Additional research is needed on the effectiveness of independent nursing interventions and should include cultural considerations when working with families.

**Abstract History:**
This abstract has not been presented or accepted for presentation in whole or in part at the SNRS or other scientific meeting.

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