

May 9, 2018

ICU RESEARCH Newsletter

Dear ICU Team,

Thank you for all your help with recruiting for our research study! We have almost reached our goal for our first study, and we could not have done it without your assistance! We only need to recruit 10 pediatric/caregiver pairs to conclude the study! Please notify Dr. Hetland if you have a pediatric patient on your unit.

-ICU Research Team



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Research Project 1

Exploration of Psychophysiological Factors that influence Caregivers' Willingness to Participate in Patient Care in the ICU.

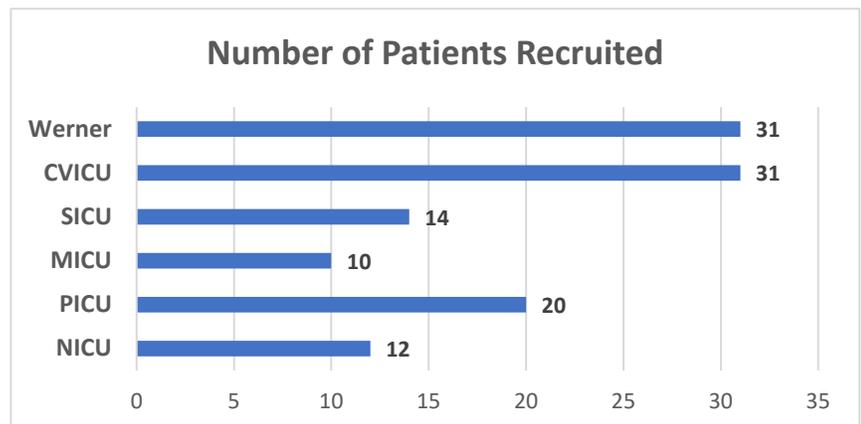
UPDATE on Progress: Currently we have enrolled 118 patient/caregiver pairs to our research study. We have been able to recruit sufficient number of adult patient/caregivers to meet our study needs. **We currently need 10 pediatric patient/caregiver pairs to complete the study.** We hope to achieve this over the next four months. See graph for recruitment for each unit.

Data is starting to be analyzed for statistical significance. The goal of this study is to

enhance our current understanding of the clinical and psychological variables that may influence caregivers' active involvement in hands-on care that is appropriate for caregivers to perform in the ICU. Our results will enable us to develop tailored interventions (see Research Project 2) that effectively promotes caregiver involvement in patient care at the bedside to enhance patient and caregiver outcomes

How you can help:

- Please continue to pass out our study postcards and encourage **pediatric patient caregivers (18 years or younger)** to contact us about the study or to participate in the study.
- If you have a pediatric patient/caregiver that you think would be willing to participate, feel free to **contact Dr. Hetland directly** (see contact information above).
- Caregivers need to be at least 19 years old. If they participate they will get a \$5 meal ticket. The interview of the caregiver will take approximately 30 minutes.



Research Project 2

Evaluation of a Web-Based Intervention to Promote Family Caregiver Engagement in Symptom Assessment and Management during Mechanical Ventilation in the Intensive Care Unit

UPDATE on Progress: We are creating a native app that will be housed within the App Store. It will be available for download on the Android tablets currently being given to ICU patients and caregivers in the Werner ICU. We are excited to announce our partnership with Omaha Media Group to develop this app, which will consist of three separate educational modules focused on ICU Orientation, Symptom Assessment, and Symptom Management. We will be beta testing the app this summer and will be in need of 5 nurses to volunteer to participate in our focus group. Please let Dr. Hetland know if you are interested. We will be sharing more information when we get closer to officially launching the project.

Caregiver Engagement from the Nursing Perspective

Nurses are critical to promoting and implementing family engagement in the ICU. However, they have differing ideas regarding the logistics of engagement (who, when, how often, etc.) as well as concerns about the legal and practice implications of involving family members directly in patient care. Before Dr. Hetland could design the family engagement interventions for testing at Nebraska Medicine, she felt it important to first ask nurses how they felt about family engagement. In 2017, she conducted a large study with a national sample of ICU nurses. She and her team analyzed the data quantitatively and qualitatively; both abstracts are below.

Quantitative Abstract

The Questionnaire on Factors That Influence Family Engagement (QFIFE) was given to a national sample of 433 critical care nurses. This correlational study explored the impact of nurse and organizational characteristics on barriers and facilitators to family engagement. Study results indicate that (1) nurses were most likely to invite family caregivers to provide simple daily care; (2) age, degree earned, critical care experience, hospital location, unit type, and staffing ratios influenced the scores; and (3) nursing workflow partially mediated the relationships between the intensive care unit environment and nurses' attitudes and between patient acuity and nurses' attitudes. These results help inform nursing leaders on ways to promote nurse support of active family engagement in the intensive care unit.

Hetland, B., Hickman, R. McAndrew, N. & Daly, B. (2017). Factors that influence active family engagement in care among critical care nurses. AACN Advanced Critical Care, 28(2), 160-170.

Qualitative Abstract

This is a qualitative content analysis of text captured through an electronic survey. A convenience sample of 374 critical care nurses in the United States who were subscribers to one of the American Association of Critical Care Nurses social media sites or electronic newsletters. Critical care nurses' responded to five open-ended questions about their approaches to family involvement in direct patient care. Nurse, patient, and family caregiver factors intersected in the context of the professional practice environment and the available resources for family care. Two main themes were identified: "Involving family caregivers in patient care in the intensive care unit requires careful assessment" and "There are barriers and facilitators to caregiver involvement in patient care in the intensive care unit." Patient care demands, the professional practice environment and a lack of resources for families hindered nursing family caregiver involvement. Greater attention to these barriers as they relate to family caregiver involvement and clinical outcomes should be a priority in future research.

Hetland, B., McAndrew, N., Perazzo, J., & Hickman, R. (2018). A qualitative study of factors that influence active family involvement with patient care in the ICU: Survey of critical care nurses. Submitted to the Journal of Intensive and Critical Care Nursing, 44, 67-75.