Using Narratives to Improve ICU Care

The Problem

The Intensive Care Unit is a high stress environment for family members who may find it difficult to communicate with staff. Frequently, important questions go unanswered. Using the narratives from the Family Satisfaction Survey, we developed a process of real time feedback to increase patient and family centeredness.

Aim/Goal

The family members of ICU patients (both survivors and non-survivors) will have an opportunity to share their experience and have their questions/concerns about ICU care answered in a timely manner.

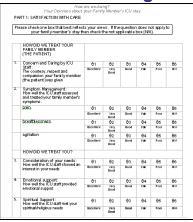
The Team

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The Interventions

- FS-ICU survey mailed to all non-survivor families 7 weeks after the death of an ICU patient.
- In person interview with ICU families using FS-ICU survey within 3 days of discharge out of ICU.
- Created a cover letter for FS-ICU survey with contact number and address so that families can contact Health Care Quality representative if they have concerns about ICU care.
- Held targeted meetings arranged as soon as possible with Patient Relations representatives, ICU Nurse Managers, Social Worker Manager and/or Pastoral Care Director depending on family/pt concerns.

The Results/Progress to Date



(excerpt from FS-ICU Survey)

Anonymous weekly verbatims from surveys are emailed to appropriate Nurse Managers, the Social Work Director and/or the Pastoral Care Director to encourage real time quality improvement initiatives based on family satisfaction narratives. As a result of sharing patient and family feedback the following actions have occurred:

- A letter was created describing the process of obtaining autopsy results be given to next of kin at time of consent to autopsy.
- Family members referred to Social Work for bereavement support.
- Three former ICU family members were referred to Patient Relations for help in obtaining their deceased loved one's medical record.
- Communication was facilitated between patient/family and SICU and CVICU Nurse Managers regarding ICU nursing care issues on numerous occasions.

Lessons Learned

The FS-ICU survey was initially used as a tool to examine family satisfaction. We were intrigued at the intense desire of many ICU families to relate their experience and to what depth the non-survivor families wanted to clarify some aspects of their loved one's ICU care. The real time problem solving provided satisfaction for the ICU family as well as the staff members even after the patient was discharged from ICU. Important quality improvement initiatives were generated from family narratives.

Next Steps/What Should Happen Next

We will continue to conduct the FS-ICU survey and address any Health Care Quality concerns we learn about in the narrative section. We are also planning on studying the PTSD of family members of ICU patients and we will evaluate whether real time problem solving decreases PTSD.





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