

Research Abstract on the study to assess the information expected and received from the nurses by the family members of critically ill patients and to prepare policies for information in a selected hospital, at Salem.

Mr. Jerin Rajan¹, S.Maragatham², Mrs.K.S.Pushpalatha³,

¹Assistant Professor, Shri Vinoba Bhawe College of Nursing Silvassa, Dadra and Nagar Haveli, India.

²Principal, Shanmuga College of Nursing, Salem, India

³Associate Professor, Shanmuga College of Nursing, Salem, India

Email - jerinrajan@yahoo.co.in

Abstract: This study was conducted among 30 family members of critically ill patients and ICU nurses who were admitted to selected hospitals of Salem during the month of August – September 2009. The study was aimed to assess the information expected and received from the nurses during admission to ICU and Transfer out from ICU by the family members of critically ill patients and to prepare policy. The findings clearly prove that the information provided by the nurse 84.4%, has reached only 50.3% of the family members. There is a difference of 34.1%, which shows they had not adequately received the information during the admission to the ICU. And also the information provided by the nurse 98% regarding the transfer out of the patient from the ICU to the ward, has reached only 60.8% of the family members. There is a difference of 37.2%, which shows that they had not adequately received the information. This clearly specifies that there is a communication gap between the ICU nurses and the family members of the critically ill patient admitted in the ICU and projects the need of a protocol / policies regarding the information's to be provided to the family members by the nurses in ICU during Admission to the ICU and transfer out of the patient / relative from ICU to ward.

Key Words: Critically ill Patients, Family Members, Nurses, Information Expected, Information Received, Policies.

1. INTRODUCTION:

Any hospitalization in ICU, is a sudden unexpected illness which can precipitate a disequilibrium within the family. When such event occurs all the family members gathers in the hospital and some members stay in the hospital all the time in order to closely follow the condition of their loved ones. The challenge for critical care nurses is to provide more concentrate on care of critically ill patients at the same time attend to the needs of stressed family members and it can be influenced by many factors like, need to promote patients rest, need to prevent physiological and psychological complications to the patient and the need to improve communications between the nurses and relatives. There is always dissatisfaction for the family members in receiving the information's, and communicational clashes are common between the nurses and family members especially during admission and transfer out of patients. These made the researcher to assess the information provided by nurses are perceived by the family members or not.

2. STATEMENT:

A study to assess the information expected and received from the nurses by the family members of critically ill patients and to prepare policies for information in a selected hospital, at Salem

3. OBJECTIVES:

- To assess the existing policies (admission and Transfer out) of the hospital on providing information by nurses to family members about critically ill patients.
- To assess the information provided by nurses to family members of critically ill patients.
- To assess the information expected and received from nurses by family members of critically ill patients.
- To assess and compare the information expected and received by family members of critically ill patients and provided by ICU nurses.
- To prepare a polices (admission and Transfer out) for the nurses and patients relatives related to the information to be given to family members of critically ill patients.(based on the information's collected from the samples.)

4. METHOD:

Information Expected: It is the communication expected from the nurses by the family members at the time of admission to ICU and transfer out from ICU .**Information Received:** It is the communication received from the nurses by the family members at the time of admission to ICU and transfer out from ICU. **Policies:** Based on the information's expected and received, a written guidelines is prepared to the level of information received by the family members from the nurses in ICU during the tine of admission to ICU and transfer out from ICU in Shanmuga

hospital. **Admission:** The time at which the patient is admitted to ICU. **Transfer Out:** The time at which the patient is permitted to move out of the ICU as per the physician's order.

The research design adopted for the study was descriptive design and was conducted in Intensive care unit at Shanmuga Hospital, Salem The data collection was done in two phases, Phase I was done to study about the existing policies of ICU provided by the nurse to the close relatives of patients admitted. For this the researcher has undergone an observatory period of two weeks (22/06/09-04/07/09) in a selected ICU by using non participatory concealed approach and identified that information's were not given adequately to the family members of critically ill patients admitted in ICU, especially during admission and transfer out.

In phase II the data collection for the study was done in Shanmuga hospital, Salem, over a period of 6 weeks from 11-08-2009 to 22-09-2009 between 8.00- 6.00pm.The total sample size was thirty.

On the first day of admission of the patient in the ICU, the samples were selected by using Non probability convenient sampling technique. The purpose of the study was explained to the samples and written consent was obtained. Then the information's provided by nurses during admission of their relative in ICU were collected by using structured interview schedule questionnaire and the information's given by nurses during admission of patient in ICU were also collected from nurses using self administered questionnaire.

During the transfer out of the same patient from ICU to the ward certain other information's regarding the transfer out were collected by using the structured interview schedule questionnaire from the samples regarding the information's provided by nurses during transfer out and the information's given by nurses during transfer out were collected using self administered questionnaire.

5. MAJOR FINDINGS OF THE STUDY:

5.1. Information's during admission to ICU

The information provided by the nurse during the admission has “adequately reached” all the family members regarding the permission on meeting the doctors in the ICU after the daily rounds , as the hospital has already the policy of allowing the family members to meet the doctor after the rounds in the ICU. (100% adequate information was provided).

The information provided by the nurses during admission had “not adequately reached” the family members in the case of

Clarifying the doubts (4%), List of things that needed to be maintained the daily activities (7%), Explaining the type of diet. (14%), Staying area (17%), Oriented the time for receiving prescriptions (20%), Waiting area (24%), Visiting hours of doctor's, (50%), Meeting the spiritual needs (64%), Receive the hospital enquiry number (90%), Oriented to pharmacy (90%), the name of the nurse in charge, (90%), Providing contact number to the nurse (94%), Preparation of the therapeutic diet (97%), Visiting hours of ICU (100%)

These findings clearly prove that the information provided by the nurse 84.4%, has reached only 50.3% of the family members. There is a difference of 34.1%, which shows they had not adequately received the information during the admission to the ICU.

5. 2. Information's during transfer out from ICU to the ward.

The information provided by the nurse regarding the transfer out of the patient from the ICU to the ward has “adequately reached” all the family members regarding meeting the office person (100% adequate information was provided).

The information provided by the nurse regarding the transfer out of the patient from the ICU to the ward has “not adequately reached” the family members in the case of, Handing over of all the belongings (4%), Clarifying the doubts (7%), Place of transfer (10%), Time of Transfer Out (54%), Need of transfer (90%).

These findings clearly prove that the information provided by the nurse 98% regarding the transfer out of the patient from the ICU to the ward, has reached only 60.8% of the family members. There is a difference of 37.2%., which shows that they had not adequately received the information.

6. LIMITATIONS:

1. The study is limited to only one ICU (Shanmuga hospital, Salem)
2. The study is limited only one close relative of critically ill patients in ICU.

7. CONCLUSION:

This specifies that there is a communication gap between the ICU nurses and the family members of the critically ill patient admitted in the ICU and projects the need of a protocol / policies regarding the information's to be provided to family members during the admission to ICU transfer out of the patient / relative from ICU to ward.

REFERENCES:

1. American Association of Critical-Care Nurses. (2005). *Key statements, beliefs and philosophies behind the American Association of Critical-Care Nurses* . Retrieved December 2, 2008, from <http://www.aacn.org/>
2. Al-Hassan, M., Hweidi, I. (2004). The perceived needs of Jordanian families of hospitalized, critically ill patients. *International Journal of Nursing Practice* , **10**, P 64–71.