

Partnering with Family at the Bedside & Beyond: Family Administered Delirium Detection in the intensive care unit (ICU)

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THE PROBLEM: Delirium



Happens suddenly
OR
"comes and goes"



Not able to pay attention



Sleepier than usual
OR
Not thinking clearly

CURRENT DELIRIUM DETECTION



Checklist on computer

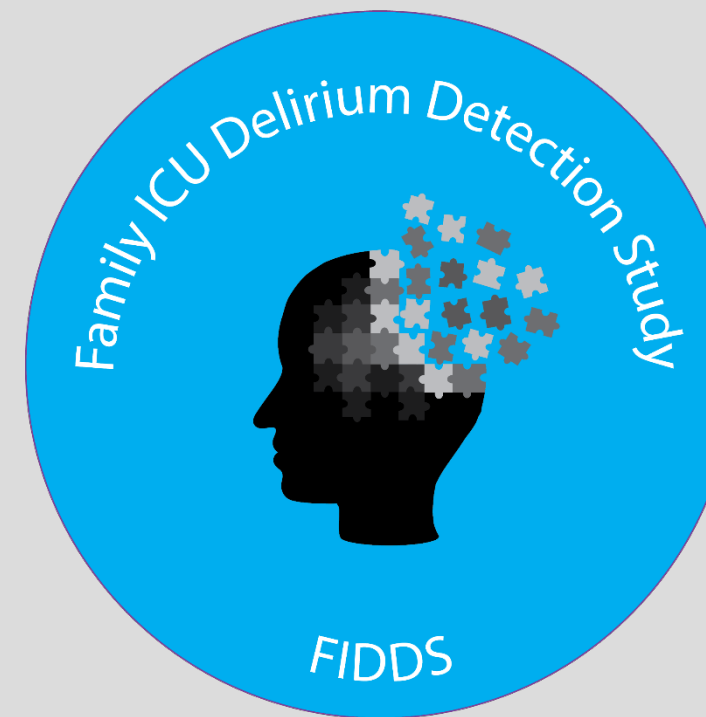
Every 12 hours by bedside RNs



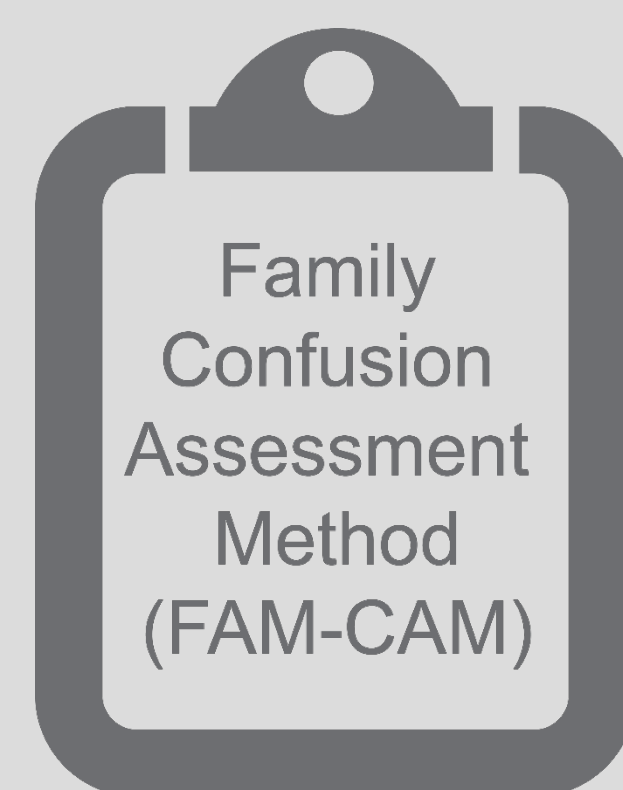
Up to 66% patients with delirium may be missed

HOW DO WE PLAN FOR THIS?

Collaborate with former family caregivers and patients to design the Family ICU Delirium Detection Study

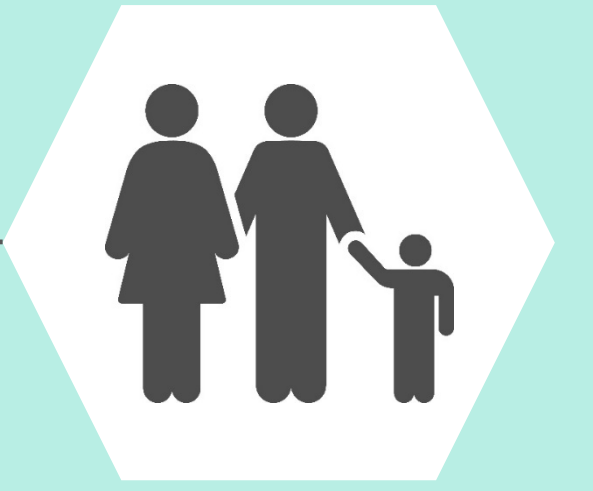


Validate family-administered delirium detection tools for family caregivers of eligible ICU patients



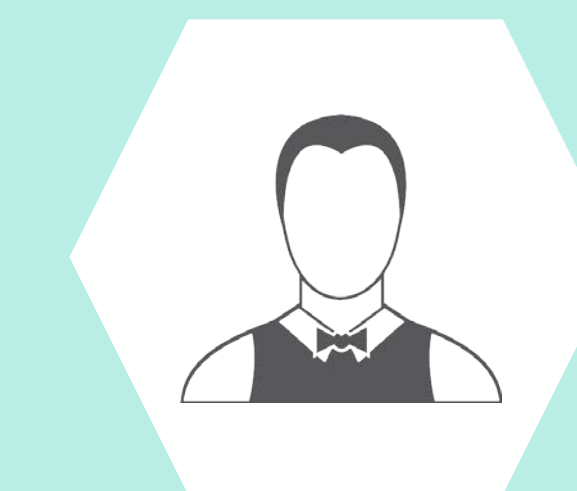
CHALLENGES WE ENCOUNTERED

Family not present for assessments



Family overwhelmed by the ICU

Nurses not providing access to patients



Patient researchers frustrated by constraints of clinical research

WHAT HAPPENS IF WE PARTNER WITH FAMILY CAREGIVERS TO DETECT DELIRIUM?



They know the patient the best



They know how the patient was thinking BEFORE they were admitted to hospital



Many family caregivers want to be meaningfully engaged in patient care

PILOT STUDY

99 patients admitted
28-bed, general systems ICU at Foothills Medical Centre

37 patients eligible

- Able to communicate
- No primary brain injury
- Stay in ICU \geq 24 hours

17 dyads consented
Dyad=patient + family caregiver

46% recruited

- 64% of family caregivers are female
- 48% of family caregivers are spouse/common-law partner

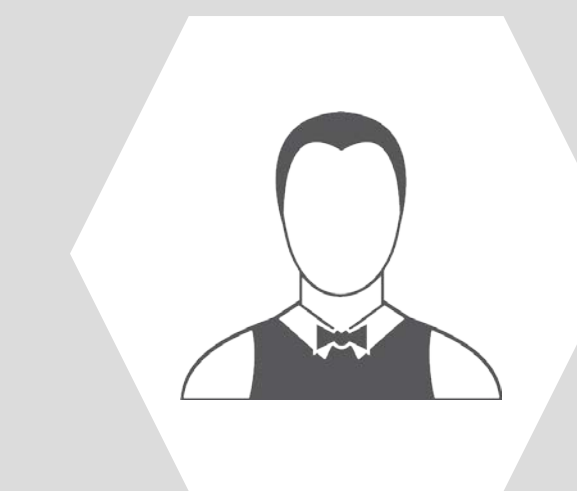
HOW TO OVERCOME THESE CHALLENGES

Complete questionnaires at time of enrollment



Past family caregiver with lived experience to enroll participants

Draws for \$5 coffee card as incentive



Engaged supervision of patient researchers

WHAT WE FOUND & NEXT STEPS

- Using family-administered delirium detection tools in the ICU is feasible
- Former ICU patients and family members can be successfully engaged as researchers with the appropriate training and supervision
- Future studies will validate the use of these tools in the ICU and beyond