What Have We Learned about Family Presence During Cardiac Arrest at UK Healthcare

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Previous State at UKHC and “Why”

- Two separate events where family presence was managed less than optimally
- Staff and Faculty asked “Should we be doing this”
- Resuscitation Committee believed in presenting the option
- Chandler Emergency Department (ED) 10 years of positive experience facilitating family presence
  - Formal policy in Chandler ED since 2008
- No policy outside of emergency services
Study Objectives

1. Assess baseline attitudes and beliefs of faculty and staff about family presence during resuscitation.
2. Determine if attitudes and beliefs about family presence differ among health care professionals by discipline.
3. Identify differences in attitudes and beliefs about family presence by practice area.
4. Determine if education impacted the attitudes and perceptions of faculty and staff.
5. Synthesize differences between pre/post attitude and beliefs.

What does “science” say?

- Over 300 references on the topic
- McAlvin and Carew-Lyons (2014) systematic review:
  - Parents wanted to be present during resuscitation and invasive procedures
    - Would want to be present again in similar circumstances, would not change their experience, and would recommend being present to other parents.
  - Parents present during their child’s unsuccessful resuscitation experienced better coping and adjustment than those who were not present.
What does “science” say?

• Tudor, et al, 2014 - Nurses with the most confidence in their ability to facilitate family presence, identified greater perceived benefits from families being present.
• Jabre, et al, 2013 NEJM – “Family presence during CPR was associated with positive results on psychological variables and did not interfere with medical efforts, increase stress in the health care team, or result in medico-legal conflicts.”
• Lowry, 2012 –“It’s just what we do”: A qualitative study of emergency nurses working with well-established family presence protocol.

What does “science” say?

• Jones, et al, 2011 - Understanding health care professionals views of family presence during pediatric resuscitation
• Egging, et al, 2011 – ENR: Family presence during invasive procedures and resuscitation in the ED.
• Pasquale, et al, 2010 – Family presence during trauma resuscitation: ready for prime time?
• Moreland (2005) “meta-analysis” type review
Current Practice Then and Now

- Despite support by large organizations (ENA, AHA, ACEP, AACN, AAP) **less than 50%** facilities have formal policies in place
- More facilities report “it depends on who is there”

UK Study Data

- Collected attitude and belief baseline data
- Overall supportive of concept at baseline
- Occurring in several units without a defined process
- Pre Survey n= 459
- After baseline data reviewed:
  - Targeted education in “pilot units”
- Post Survey n= 467
### Group Statistics

<table>
<thead>
<tr>
<th></th>
<th>Pre</th>
<th>Post</th>
<th>N</th>
<th>Mean</th>
<th>Std. Deviation</th>
<th>Std. Error Mean</th>
</tr>
</thead>
<tbody>
<tr>
<td>Does UK Healthcare currently have a written policy that either allows or prohibits family presence during resuscitation?</td>
<td>Pre 498</td>
<td>Post 493</td>
<td>1.02</td>
<td>.560</td>
<td>.025</td>
<td></td>
</tr>
<tr>
<td>Family presence interferes with the resuscitation process</td>
<td>Pre 487</td>
<td>Post 493</td>
<td>.99</td>
<td>.927</td>
<td>.042</td>
<td></td>
</tr>
<tr>
<td>Family presence increases levels of stress for the medical team</td>
<td>Pre 492</td>
<td>Post 496</td>
<td>1.42</td>
<td>.856</td>
<td>.036</td>
<td></td>
</tr>
<tr>
<td>Family presence creates fear of medicolegal litigation</td>
<td>Pre 489</td>
<td>Post 494</td>
<td>1.19</td>
<td>.605</td>
<td>.041</td>
<td></td>
</tr>
<tr>
<td>Written policies on family presence during resuscitation</td>
<td>Pre 493</td>
<td>Post 491</td>
<td>1.43</td>
<td>.787</td>
<td>.035</td>
<td></td>
</tr>
<tr>
<td>Consent among the team allowing families to be present during resuscitation</td>
<td>Pre 490</td>
<td>Post 464</td>
<td>1.60</td>
<td>.603</td>
<td>.037</td>
<td></td>
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<tr>
<td>An increased understanding among healthcare professionals on the benefits of family presence</td>
<td>Pre 490</td>
<td>Post 464</td>
<td>1.61</td>
<td>.890</td>
<td>.031</td>
<td></td>
</tr>
<tr>
<td>I support offering families the option to be present during resuscitation if a support person is present?</td>
<td>Pre 497</td>
<td>Post 466</td>
<td>1.43</td>
<td>.615</td>
<td>.037</td>
<td></td>
</tr>
<tr>
<td>I believe family presence during resuscitation can be beneficial for helping families to decide when to stop life saving measures.</td>
<td>Pre 496</td>
<td>Post 464</td>
<td>1.55</td>
<td>.744</td>
<td>.033</td>
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</table>

### Independent Samples Test

<table>
<thead>
<tr>
<th></th>
<th>Levene's Test for Equal of Variances</th>
<th>Welch's t-test for Unequal of Variances</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>df</td>
<td>Sig.</td>
</tr>
<tr>
<td>Direct healthcare providers have a written policy that either allows or prohibits family presence during resuscitation?</td>
<td>6.852</td>
<td>.009</td>
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<tr>
<td>Family presence interferes with the resuscitation process</td>
<td>3.95</td>
<td>.050</td>
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**Legend:**
- df: Degrees of Freedom
- Sig: Significance
- Mean Difference: Mean difference between groups
- Std. Error Mean: Standard Error of the Mean
I support offering families the option to be present during resuscitation if a support person is present?
**Circumstances that may Prohibit Family Presence**

- No support person available
- Extremes of treatment
- ED Thoractomy
- Invasive procedures in the NICU for infection control reasons
- Family decision

**Case Studies**

- 60 year old male, CPR in progress at home, family with patient
- 55 year old female, CPR in progress, family en route
- 6 month old female, at daycare, CPR in progress, parents en route
- Good decisions?
Enterprise Actions

- Identified physician champions
- Education for targeted units
- Piloted in targeted units
- Enterprise policy in place
- Continue to trend families present

References


Questions?

• Thank you