



Intensive Care Unit (ICU) Orientation Packet - Adapted for the Geriatric Population

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BACKGROUND

Geriatric ICU patients face unique challenges with unexpected complications like delirium, falls, and hospital acquired infections (HAIs) impacting healthcare outcomes and quality of life. As the average age of ICU patients increases, the necessity for geriatric specific resources is crucial to address these aging syndromes (Brunker et al., 2023). Personalized patient and family education has been shown to mitigate these issues. To address this knowledge gap and reduce health complication incidence, an ICU orientation and education packet was developed.

PURPOSE

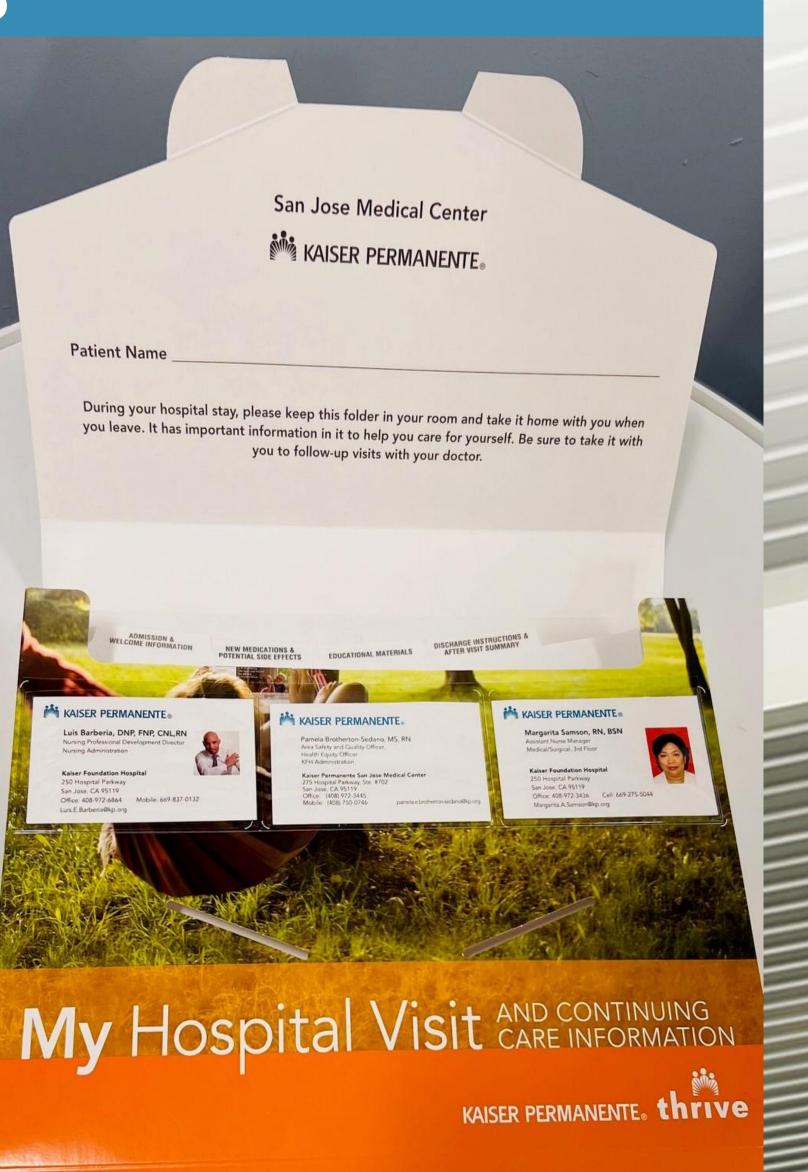
This ICU-based quality improvement project implements personalized patient and family education packets to enhance patient-centered care. By empowering patients and families through education, this initiative aims to reduce preventable adverse events, promote self-advocacy, and improve decision-making participation, ultimately leading to better health outcomes and satisfaction.

AUTHORS' INFORMATION



IMPLEMENTATION PROCESS

The project was implemented in August of 2024, at a medium sized hospital. The packet provided personalized education: general unit information, common complications & preventable measures, equipment, procedures, and healthcare team roles to patients age ≥ 65 and family members. The packet is given upon admission to the ICU, addressing age-related syndromes. The quasi-experimental design uses teachback methods to assess patient and family educational understanding. Improvements are measured using the ICU's Patient Safety & Nursing Sensitive Indicators and the National Research Corporation data on nurse-patient communication.



RESULTS

There is not enough data to prove sustained results. However, the nurse-patient communication scores saw significant improvement post-implementation, trending in the right direction. This, as part of a care bundle, helps with the prevention of adverse events. Further data collection is needed to demonstrate effectiveness on patient and family satisfaction and quality and safety metrics.



DATA

Human understanding System Details | Location

QUESTION: Comfort talking with nurses								
Location	YTD	Last 3 Months	Last Month	n-size	Score	Bench mark	Gap	
6 East SJO	79.2	80.0	100.0	4	100.0	73.7	26.3	
4 East SJO	53.6	77.8	100.0	7	85.7	73.7	12.0	
MAY 2024 – JULY 2024								

Location	YTD	Last 3 Months	Last Month	n-size	Score	Bench mark	Gap
4 East SJO	53.6	77.8	100.0	7	57.1	73.7	-16.6
6 East SJO	79.2	80.0	100.0	6	66.7	73.7	-7.0

HOSPITAL ACQUIRED INFECTIONS & PATIENT SAFETY DATA TRENDS — ICU 2024

DATE	C. DIFF. INCIDENCE	FALL INCIDENCE	CLABSI INCIDENCE	CAUTI INCIDENCE	HAPI INCIDENCE
Oct-24	0	0	0	0	0
Sep-24	0	0	0	0	1
Aug-24	0	0	0	0	0
Jul-24	1	1	1	1	0
Jun-24	0	1	0	0	1
May-24	0	1	0	0	0
Apr-24	1	0	0	0	1
Mar-24	0	1	0	0	0
Feb-24	3	0	1	1	0
Jan-24	0	0	0	0	1

IMPLICATIONS TO PRACTICE

Opening channels of effective nurse-patient-family communication improves patient outcomes, which reduces unintended hospital harms.

REFERENCES

HANDOUTS





