ICU VISITATION... THE EVIDENCE IS OUT THERE

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York Hospital
Open Heart Intensive Care Unit

Presentation Objectives

1. Define the practice issue regarding ICU visitation
2. State the EBP question
3. Describe the EBP process used by the ICU workgroup
4. List three EBP recommendations for implementing open visitation in the ICU

The Johns Hopkins Nursing Evidence-Based Practice Model and Guidelines

PICO
Patient, Population, Problem
Intervention
Comparison with another variable
Outcome

The Patient, Population and Problem

P: Adult ICU patients at York Hospital
P: Family, visitors, and ICU staff
P: Inconsistent implementation of visiting hours among and within the ICUs.

Background and Current Practice

The PICO QUESTION

Patient, Population, Problem
Intervention
Comparison with another variable
Outcome

The Johns Hopkins Nursing Evidence-Based Practice Model and Guidelines

PICO
Patient, Population, Problem
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The Patient, Population and Problem

P: Adult ICU patients at York Hospital
P: Family, visitors, and ICU staff
P: Inconsistent implementation of visiting hours among and within the ICUs.
**Why do we do that?**

Variations in policy

- Numbered visitation
- Individualized
- Rest & sleep

**The Intervention**

More structure to the visitation policy

**The Comparison**

Current visitation policy at York Hospital

**The Outcome**

Promotes patient safety and patient, family & staff satisfaction

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**Our Current Practice**

<table>
<thead>
<tr>
<th>ICU</th>
<th>Visitation Hours</th>
</tr>
</thead>
<tbody>
<tr>
<td>OHICU</td>
<td>0800 rounds: 11am - 8pm, 15 minutes post-op</td>
</tr>
<tr>
<td>CCU</td>
<td>11am - 8pm</td>
</tr>
<tr>
<td>MSICU</td>
<td>liberal visitation</td>
</tr>
<tr>
<td>TSICU</td>
<td>10am - 12pm, 2pm - 4pm, 6pm - 8pm</td>
</tr>
<tr>
<td>MTCU</td>
<td>liberal visitation</td>
</tr>
<tr>
<td>STCU</td>
<td>11am - 8pm</td>
</tr>
</tbody>
</table>

**EBP QUESTION**

Is a more structured visitation regimen in the ICU more conducive to patient safety and rest, and nurse, patient and family satisfaction than our current ICU visitation policy?

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**The ICU Visitation Workgroup**

All ICUs in York Hospital were represented.

<table>
<thead>
<tr>
<th>OHICU</th>
<th>MSICU</th>
<th>CCU</th>
<th>TSICU</th>
<th>MTCU</th>
<th>STCU</th>
</tr>
</thead>
<tbody>
<tr>
<td>Becky Smith</td>
<td>Doris Lentz</td>
<td>Margie Lane</td>
<td>Cheryl Churilla</td>
<td>Renee Pruner</td>
<td>Maria Smith</td>
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<tr>
<td>Allison Taylor</td>
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</tbody>
</table>

**Collecting the Evidence**

<table>
<thead>
<tr>
<th>Databases</th>
<th>Pub Med, CINAHL, Cochrane, Google Scholar, reference lists, professional organizations</th>
</tr>
</thead>
<tbody>
<tr>
<td>Key Words</td>
<td>ICU visitation, critical care visitation, effects of visitation on patients, family visitation, and ICU</td>
</tr>
<tr>
<td>Search Parameters</td>
<td>English language, articles from 1995-2011</td>
</tr>
<tr>
<td># Articles</td>
<td>41 articles reviewed, 7 articles discarded</td>
</tr>
</tbody>
</table>
Levels of Evidence

<table>
<thead>
<tr>
<th>Evidence Level</th>
<th>Number of Articles</th>
</tr>
</thead>
<tbody>
<tr>
<td>I: Experimental</td>
<td>0</td>
</tr>
<tr>
<td>II: Quasi-experimental</td>
<td>1</td>
</tr>
<tr>
<td>III: Non-experimental/Descriptive</td>
<td>9</td>
</tr>
<tr>
<td>IV: Opinion of nationally recognized experts based on scientific evidence</td>
<td>8</td>
</tr>
<tr>
<td>V: Opinion of nationally recognized experts based on experiential evidence</td>
<td>18</td>
</tr>
</tbody>
</table>

**41 articles reviewed. 7 articles were “C” quality and not used for recommendations.**

Definition of Open Visitation

- Variable
- 24/7
- Closed during resuscitation or codes
- Closed during change of shift report
- Closed during rounds

EVIDENCE HIGHLIGHTS

**PATIENT**

- Patients prefer to be given the choice for visiting preferences (Carroll, 2009)
- Visiting does not cause detrimental physiological changes (HR, BP, rhythm, ICP, stress hormones) (Fumigalli, 2006)
- Patients prefer to have family near for support (Cypress, 2010)

**FAMILY**

1. Close proximity to the patient
2. Honest communication
3. To be informed
4. Care and support from staff (Molter, 1976), (Gavaghan & Carroll, 2002)

**NURSING**

1. Visiting policies are enforced to varying degrees in ICUs
2. Resistance to open visitation
   - patient safety
   - interruptions/debays in patient care
   - space
   - HIPAA

(Lee et al., 2007), (Livesay et al., 2005), (Kirchhoff & Dahl, 2006)

Support for Open Visitation

1. Institute of Medicine
2. Centers for Medicare and Medicaid
3. Institute for Patient and Family-Centered Care
4. The Joint Commission: Advancing Effective Communication, Cultural Competence, and Patient- and Family-Centered Care: A Roadmap for Hospitals
5. Institute for Healthcare Improvement
6. Relationship-Based Care Initiatives
EBP QUESTION

Is structured visitation in the ICU setting more effective than York Hospital’s current policy in promoting patient safety and rest, and nurse, patient, and family satisfaction?

Practice Recommendations

1. Planning
   - It’s more than revising a policy
   - Implementation of open visitation is an ongoing process
     - changes will happen along the way
   - The process is lengthy
     - Use a trial period

2. Communication
   - Involve all stakeholders in implementation (patient & family, ICU staff, security, leadership, RRT, PT, physician, risk mgmt...)
     - Patient Advisory Councils
     - Nursing Committees
     - ICU CET
     - Staff surveys
   - Use bulletin boards, pamphlets, signage

3. Education
   - Disseminate the information
   - Educate at many levels within the organization
   - Incorporate education into required learning for staff
   - Use many forms of education: presentations, posters, pamphlets for patients
     - Patient Educator/Liaison

4. Broad Policy Recommendations
   - The patient should dictate visitation preferences
   - Utilize a spokesperson to maintain HIPAA
   - Create a written visitation policy
   - Safety and security of patient and staff should never be compromised.

Evidence shows that open visitation in ICUs is safe to the patient and preferred by families and patients over structured visitation policies.
5. Expect Challenges

- Open visitation is a culture change for most ICUs
- Nursing will resist
  - Education and communication will facilitate change

References


Thank You