

### Caring for Mentally Ill Patients in the Intensive Care Unit: Development of a Survey of Nurses' Knowledge, Skills, and Attitudes

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**Introduction:** Mental illness is common among patients admitted to intensive care units (ICU), with a reported prevalence twice that of the general population. Despite this, ICU nurses receive relatively little education about caring for mentally ill patients, and stigma associated with psychiatric diagnoses persists. At present, there is little evidence around ICU nurses' attitudes towards caring for patients with mental illness.

**Objectives:** To develop and pilot a questionnaire for the investigation of ICU nurses knowledge, skills, and attitudes towards caring for patients with mental illness.

**Methods:** A survey was developed in collaboration between researchers and clinicians with experience in mental health and ICU. Questions were adapted from the Elsom Therapeutic Optimism Scale, Attitudes to Attempted Suicide Questionnaire, and Jefferson Scale of Empathy. Face validity was established by independent clinicians experience in mental health; and internal consistency was assessed through a pilot study of an opportunistic sample of ICU nurses. Responses were rated on a five-point Likert-type scale.

**Results:** Twelve ICU nurses completed the pilot survey. Participants ranged in nursing experience, age, and tertiary qualifications. Three nurses had previously worked in a mental health setting. Cronbach's Alpha indicated good internal consistency within the three sections of the survey (Knowledge:  $\alpha = 0.76$ ; Skills:  $\alpha = 0.90$ ; Attitudes:  $\alpha = 0.82$ ). A majority (58.3%) felt they had not received adequate training to care for patients with mental illness, and respondents unanimously agreed that they required further education and training. Seventeen percent of respondents believed that patients received adequate psychological support while in ICU.

**Conclusion(s):** This survey was well received by ICU nurses and demonstrated high internal consistency. This instrument will be used to further investigate the knowledge, skills and attitudes of a larger sample of ICU nurses towards caring for patients with psychiatric illness.

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### Families' Perspectives of Participation in Patient Care in Adult ICU: A Descriptive Study

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**Introduction:** When a relative is admitted to the intensive care unit (ICU), stress, anxiety and failure to cope may place families, and the patient, at risk for adverse psychological outcomes. Participation in patient care, a central tenet of Patient- and Family-Centre Care (PFCC), may reduce the families' psychological morbidity after ICU discharge. However, to date, little is known about how families perceive and participate in ICU, nor research to guide clinicians about supporting family participation in this context.

**Objectives:** To describe family perspectives of participation in patient care in adult ICU.

**Methods:** Using a mixed methods design, survey, observation and interview data were collected from a convenience sample of 30 family members in the ICU's at two metropolitan hospitals in Melbourne, Australia. Surveys collected data about families' preferences for participation in direct patient care and decision making in ICU. Naturalistic observations and semi-structured interviews explored families' actions and perceptions of participation. Analyses integrated descriptive statistics, content and thematic analysis.

**Results:** Of 194 family participation activities observed, 74% related to activities, such as communication with staff or psychosocial-emotional support for the patient. Less frequent activities were related to activities, such as participation in physical care (24%). Families' perceived their participation in provision of reassurance and companionship as important contributions to patient care. Most family members preferred a shared role with health professionals in decision-making about patient care, and a passive role for participating in physical tasks for patient care.

**Conclusion(s):** These results can be used to inform clinical practice, educational initiatives and further research to test the effectiveness of interventions that lead to high quality PFCC.

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