

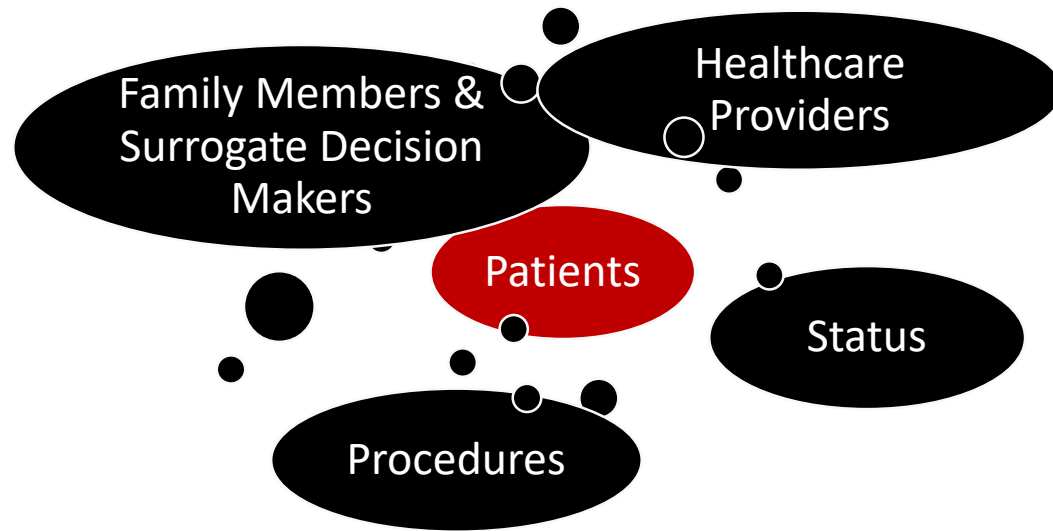
Surrogate decision-making communication in the ICU

Marian Gaviola, PharmD, BCCCP

Learning Objectives

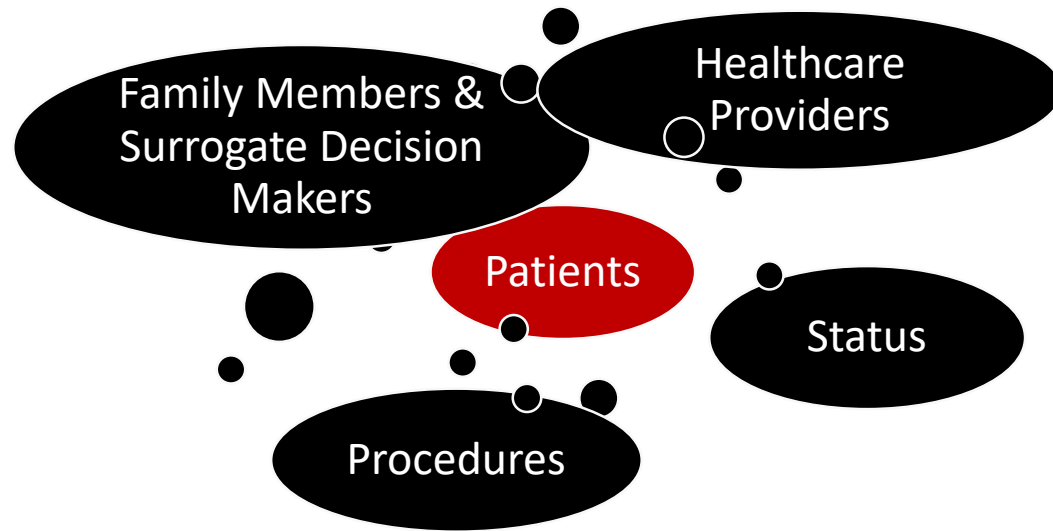
- Identify barriers to effective communication and decision-making in the intensive care unit (ICU)
- Describe examples of health disparities that may occur among patients and caregivers in the ICU
- List potential solutions to improve communication

Being a Patient in the ICU



- Patients in the ICU are sometimes unable to participate in decision-making
 - DNR/DNI
 - Dialysis
 - Palliative vs hospice care
- Usually due to various contributors
 - Illness (e.g. sepsis, shock)
 - Interventions (e.g. intubation/ventilation)
 - Complications (e.g. delirium, weakness)

Reliance on Surrogate Decision-Makers



- Fast paced, high stress environment
- Variation in patient and surrogate decision maker cultures and beliefs
- Lack of standardized or formal training for healthcare providers on communication

Patient-level Health Disparities

Acute clinical
outcomes

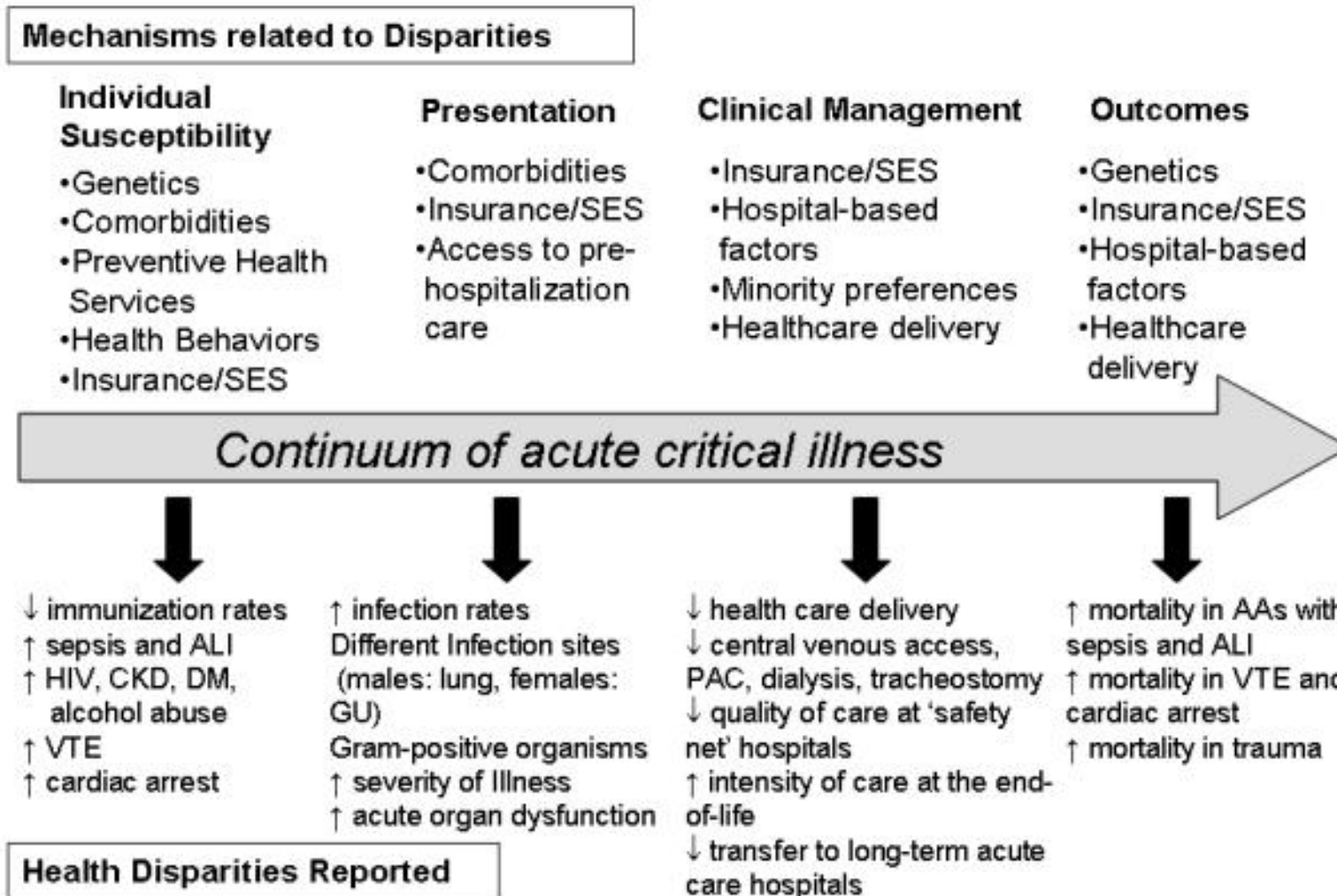
Intervention
utilization

Patient
experience

Transitions
of care

Expenditures

Patient-level Health Disparities



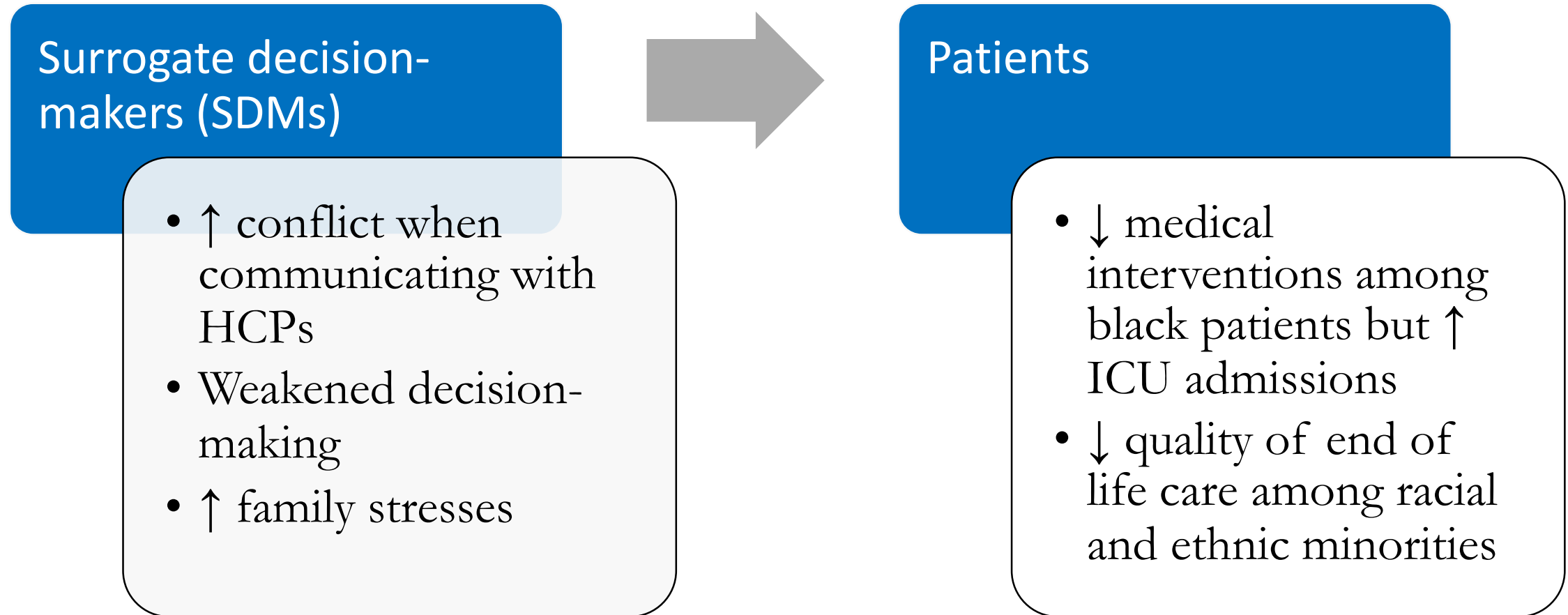
Patient-level Health Disparities: Examples



- Venous thromboembolism is a higher risk for
 - Women of childbearing age
 - Elderly males
- Sepsis
 - Males > Females
 - African American > White

Even after adjusting for differences in poverty and region of residence, African American race remains independently associated with higher incidence of sepsis.

Surrogate Decision-Maker Disparities



Current State of Communication in the ICU

Healthcare Providers

- Conflict or disagreement between physicians and SDMs may be common
- Discussions with SDMs have been found to lack components of patient preferences and values

Surrogate Decision Makers

- Preference for truthful prognosis, emotional support, checking for understanding
- Participation in health-promotion conversations are considered healing and promote SDM well-being

Anderson, et al. *Ann Am Thorac Soc*, 2015;12(2):142-52.
Schuster, et al. *Crit Care Med*, 2014;42(2):328-35.
Scheunemann LP, et al. *JAMA Intern Med*. 2019. [Epub ahead of print]
Hollman Frisman G, et al. *J Clin Nurs*. 2018;27(3-4):631-39.

Improving Communication and SDM Understanding



ASSESS, PREVENT, AND MANAGE PAIN

Understand pain and find tools for its assessment, treatment and prevention.



BOTH SAT AND SBT

Both Spontaneous Awakening Trials and Spontaneous Breathing Trials



CHOICE OF ANALGESIA AND SEDATION

Understand the importance of defining the depth of sedation choosing the right medication.



DELIRIUM: ASSESS, PREVENT AND MANAGE

Understand delirium risk factors and find tools for its assessment, treatment and prevention.



EARLY MOBILITY AND EXERCISE

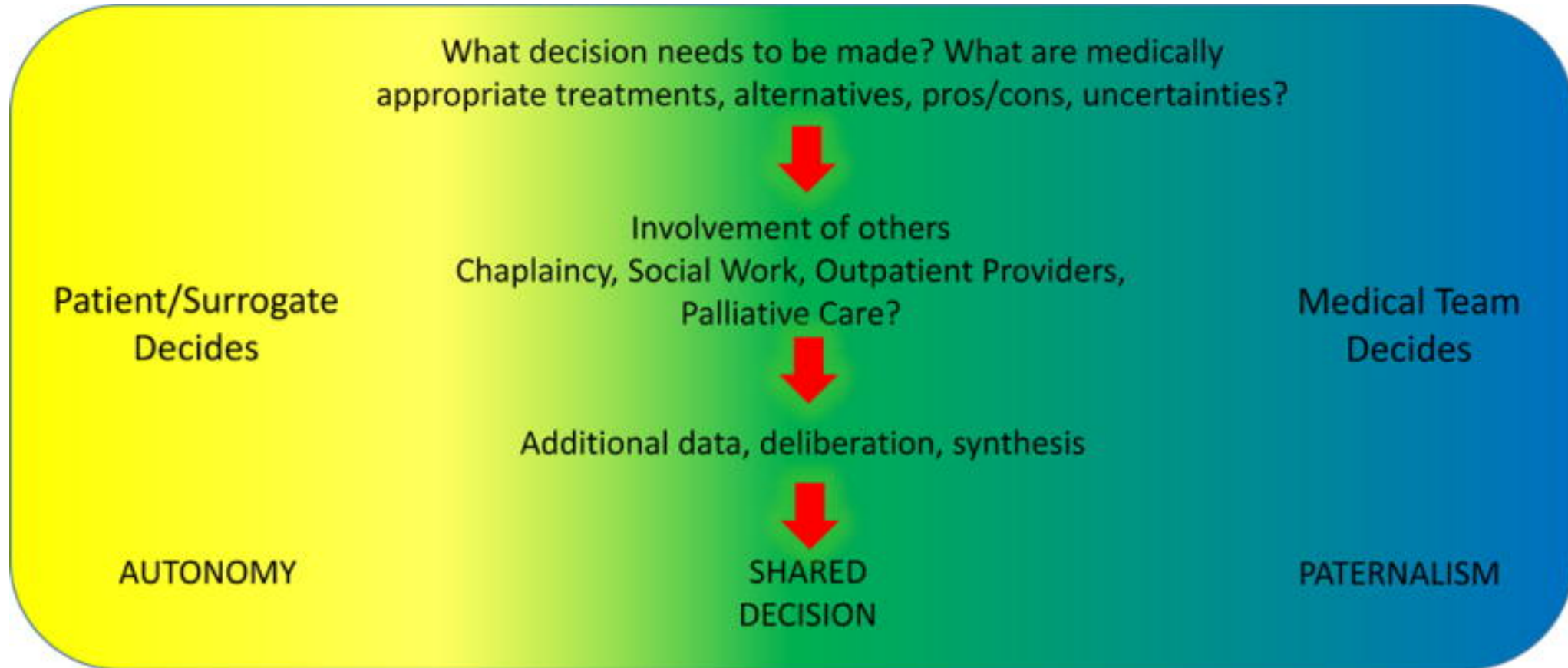
ICU early mobility involves more than changing the patient's position.



FAMILY ENGAGEMENT AND EMPOWERMENT

Involving the family in patient care can help recovery.

Shared Decision-Making



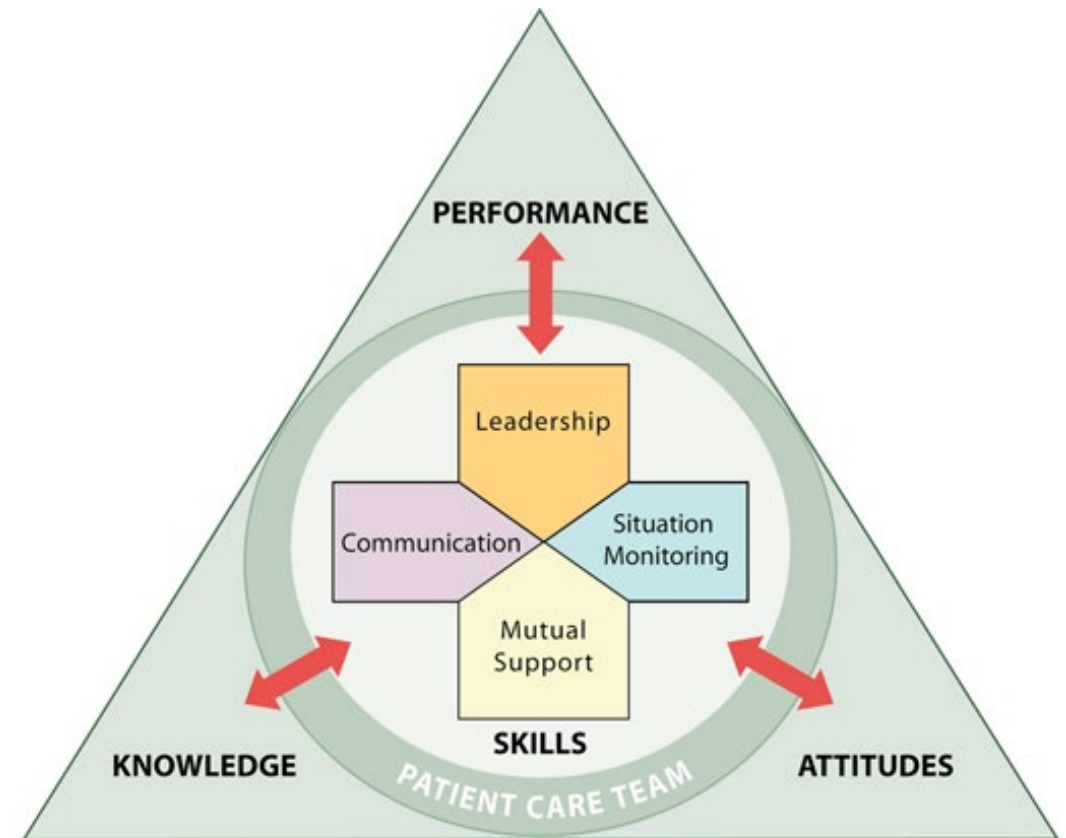
Improving Communication and SDM Understanding



- Family conferences
- Health-promotion and goals of care discussions
- Multidisciplinary team approach
 - Nursing
 - Case management
 - Healthcare navigators
- Web-based communication tools

Improving Communication in the ICU

- TeamSTEPPS : Team Strategies and Tools to Enhance Performance and Patient Safety
 - CUS: concerned, uncomfortable, safety
 - SBAR: situation, background, assessment, recommendation



SDM Communication in the ICU

- **Specific Aim 1:** To determine the needs, barriers, and attitudes of SDMs when communicating with HCPs in the ICU.
- **Specific Aim 2:** Utilizing TeamSTEPPS communication tools as a starting point, develop initial ideas that organize and facilitate healthcare discussions between SDMs and HCPs.
- Mixed-method qualitative study with survey and focus group discussion
 - Survey
 - Demographic information
 - Experiences in the healthcare setting, specifically ICU
 - Relationship to patient
 - Health literacy assessment
 - Short Assessment of Health Literacy (SAHL)

SDM Communication in the ICU: Recruitment

- Screened 29 eligible participants
- Enrolled 20 participants, over 5 focus groups
 - Mean age: 55 ± 14
 - Ethnicity and race
 - 1 Hispanic, 19 non-Hispanic
 - 1 Asian, 3 Black, 15 Caucasian, 1 Hispanic
 - Healthcare experience
 - 3 current HCW, 7 previously HCS, 10 no HCW experience
 - 9 with multiple ICU experiences

SDM Communication in the ICU: Results

- Caregiver vulnerability
 - Concern for patient
 - Decision-making
 - Isolation
- Communication
 - Multiple medical professionals
 - Methods
 - Prompts

“I didn’t know what to ask.”

“Caregivers are asked to **make decisions quickly and sometimes alone**—they are not doing this everyday as the medical professionals are.”

“Other loved ones **don’t necessarily always understand** the decisions that you made...I did struggle with that...”

SDM Communication in the ICU: Results

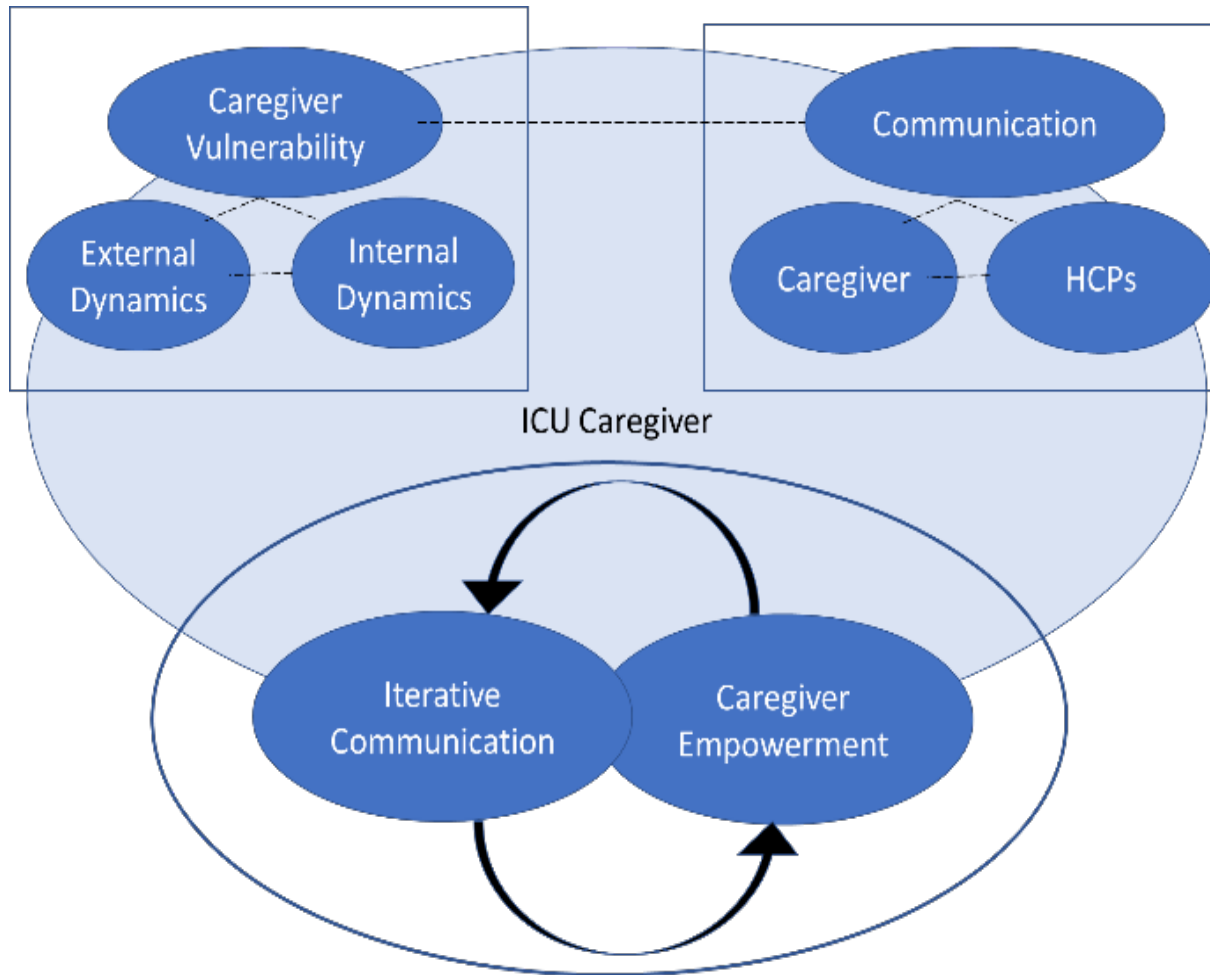
- Caregiver vulnerability
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“You could just wait and wait and wait and not know and then the doctor would show up as soon as you left...real frustrating...”

“Audio, sight, ear, and hands-on. I’m so high stressed my child’s life is hanging in the balance and I can’t hear what you [the doctor] is saying.”

“‘You’ve traveled a long way, do you have questions? How can I help? How can I answer your questions?’ That was very nice.”

SDM Communication in the ICU: Results



- Solutions
 - CUS > SBAR
 - **Caregiver Empowerment**
 - **Iterative Communication**
 - Patient advocates
 - ICU diaries
 - Appointment times

COVID-19 and ICU Experiences

- No visitors allowed in hospitals.
- Hospital staff focused on clinical interventions, less availability for family communication.
- Interpersonal communication hindered.
- Caregiver self-care during pandemic.

COVID-19 and ICU Experiences



March 30, 2020

Nurse comforts COVID-19 ICU patients, 'You are not alone'

Mohini Chand, RN, is one of many Kaiser Permanente medical professionals nationwide working tirelessly to help those diagnosed with COVID-19.



abc NEWS

VIDEO

LIVE

SHOWS

2020 ELECTIONS

CORONAVIRUS



ICU nurse on helping COVID-19 patient's wife FaceTime with him after he died



Looking to the Future

- Gap in our knowledge of what health disparity intersections occur among caregivers in the ICU.
- Greater barriers to health literacy and decision-making exist in the ICU.
- Developing tools to improve communication in the ICU is important.
- Simpler tools and a communication framework may improve caregiver perceptions and experiences in the ICU.