



Family Presence for ICU Patients During a Pandemic



The effects of critical illness on patients and their families last long after the illness episode. While the patient may be suffering from a serious condition, family members also suffer the consequences and may experience symptoms like depression and traumatic stress.

To provide improved support to families, it is important to incorporate the principles of family-centred care in ICUs. This would involve designing ICU structures that enable family members to be integrated with the critical care team. This way, family members would no longer be visitors but would instead play an active role in interdisciplinary team rounds, caregiving, communication, decision-making, and resuscitative efforts. Family presence is thus a critical component of family-centred care practices in the ICU.

While this approach is extremely important and essential for critical care patients and families, the COVID-19 pandemic has resulted in the de-implementation of family-centred practices. Due to the risk of infection and to ensure the safety of patients, families and healthcare staff, significant restrictions have been imposed on the presence and visitation of family members. These measures are essential to curtail the spread of the virus, but at the same time, have resulted in incomplete grief, emotional distress by patients and families, hurdles to high-quality communication and decision making, and poor clinical outcomes. Many experts believe that prohibiting the visitation of family members of critically ill patients is no longer justified, even if those patients suffer from COVID-19.

With more and more people getting the vaccine and with most healthcare staff already protected, some hospitals have relaxed restrictive visitation policies. However, COVID-19 is not going away anytime soon, and it could be months to years before things go back to normal. The risk of future pandemics is also high. That is why it is important for ICUs to develop visitation policies that maximise family-centred care and mitigate the risks of in-person family presence. These could include:

- Allowing at least two visitors for each patient with COVID-19.
- Overlapping common ICU round times to facilitate family member presence.
- Providing family-centred times that avoid unnecessary gaps during the day, and that can accommodate visits by family members who are travelling from long distances or those with variable work schedules.
- Establishing clear and specific screening rules for all visitors.
- Assigning a dedicated entrance for visitors and have a visitor logging process.
- Providing basic PPE education to all visitors highlighting the need to wear masks, handwashing/sanitise and maintain physical distance.
- Ensuring all family members visiting patients and being present in rooms adhere to PPE guidelines.
- Providing alternatives to in-personal family presence such as through digital platforms.
- Avoiding gatherings of people while COVID-19 cases are high.
- Prohibiting any consumption of food items by family members in a patient's room.

Overall, it is important to have a plan that ensures family engagement and participation. COVID-19 is not going away soon; hence, policy measures must consider the limitations of the pandemic, but at the same time, facilitate family presence to ensure the well-being of critically ill patients and their loved ones.

Source: [CHEST](#)

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