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Fact or Fiction: Evidence Surrounding Family Presence

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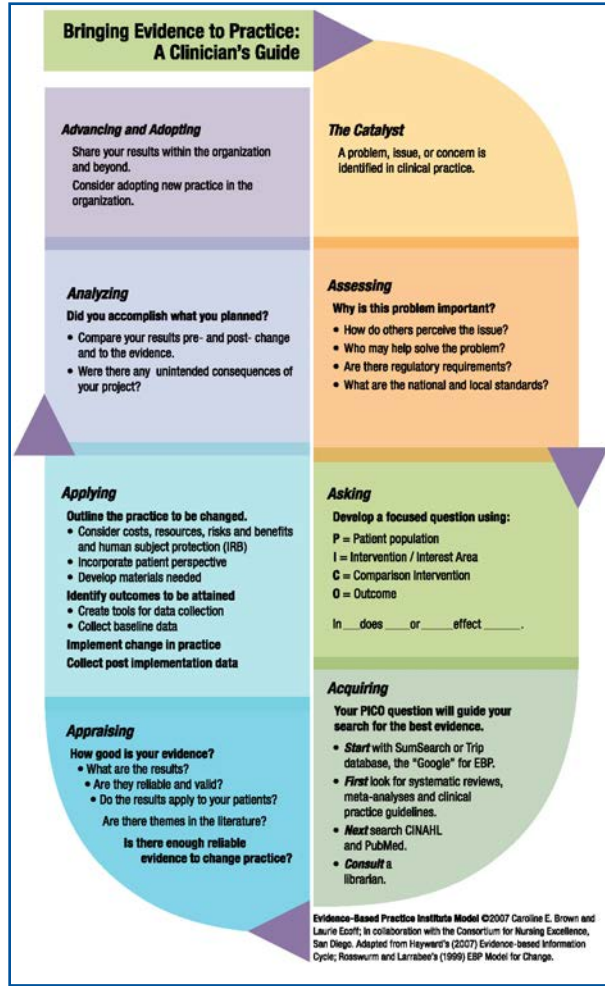
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The 8 A's



Council has partnered with the Professional Development Council (CPC) to offer workshops to CNIII candidates. The goal of the CNIII workshops is to review advancement criteria, address frequently asked questions, review project types (Quality Improvement, EBP, and Nursing Research) to help candidates frame their work, and use examples of completed projects for small group discussion.

This forum allows many more candidates to directly hear CNIII information and encourages participants to provide peer review to other attendees, all the while interacting with members of both Councils, in the hope of eliminating the mystery of the advancement process. Ultimately, the goal of the CNIII workshop is to facilitate the growth

and advancement of as many staff nurses to CNIII as are interested in completing a project and promoting.

In order to fulfill the objective of education and dissemination, Council members coordinate the Annual Nursing Research and EBP Council Conference – Nursing Innovations and Inquiry. The conference has grown a great deal over the last 8 years and is recognized as a high quality and professional forum for the dissemination of the wonderful work being done by nursing at UC San Diego and from the San Diego area as a whole. Additional information about the conference, and details about this year's event are located on page _____.

An innovative approach to connecting at least 55 nurses who have conducted research at UC San Diego is the "virtual interest network". This network is considered a 'task force' of the Council. Nurses within this group may use the list for networking, consultation, or to celebrate their successes as they advance the practice and science of nursing. Contact jdavidson@ucsd.edu if you would like to be added to the list.

The Nursing Research and EBP Council welcomes new members. Meetings are located in Hillcrest in the EDR conference room located at 4235 Front Street, Room 130. A call in option is available, if you are unable to be present. No experience with nursing research is required, just a spirit of inquiry and desire to learn about and support nursing research and evidence-based practice within our organization.

	PI	EBP	Research
Purpose	Review, Revise & change processes to achieve improved outcomes	Improve practices by using the latest, most appropriate evidence	Create new knowledge
Structure	Group/team	Individual or group	Individual or group/team
Process (all involvement measurement)	Process Improvement Methods: PDSA	EBP methods: 8A's method, Ecoff/Brown	Research methods
Outcomes	Improved procedures or processes	Practice changes, new protocols, standards	New knowledge that can be tested and applied to practice

mentors participate and develop change projects every year. UC San Diego participants are selected each year by the Nursing Research and EBP Council and asked to share their work at our annual conference. The culmination of the EBPI each Fall is a wonderful conference to highlight the participants' work and graduation ceremony. This is an opportunity for any interested staff to learn more about the program and what is involved in the projects.

Staff nurses interested in advancing to Clinical Nurse III are strongly encouraged to bring a project idea to the Council for support and feedback on their project ideas. The group will help to narrow the project scope, suggest steps for initiating the project, direct the nurse to resources, and help determine appropriate outcomes for monitoring success. In the last three years, the Nursing Research and EBP

Fact or Fiction: Evidence Surrounding Family Presence

By Judy Davidson, DNP, RN, FCCM

This year Mary Ekno, Kim Savidan, Nancy Newman, Dianne Warmuth, Annemarie Degen-De Cort and Judy Davidson conducted a review of the literature and wrote a manuscript that will be published in Critical Care Nursing Quarterly, reviewing the literature on the obstacles to implementation of a family-centered care model inclusive of family presence. Test yourself on these statements regarding family presence. Are they fact, fiction or partial fact? (See answers below)

	CONCERN	ANSWER
1	Open visiting practices increase infection	
2	Family presence during procedures increases infection	
3	Family presence in burn patients increases infection	
4	Family presence in the NICU increases infection	
5	Family presence on rounds is anxiety producing for families	
6	Family presence on rounds will slow down rounds	
7	Family presence on rounds will decrease the quality of teaching rounds	
8	Family presence on rounds increases legal risk	



Judy Davidson, DNP, RN, FCCM is an experienced researcher, educator, lecturer and clinical nurse specialist. She is doctorally prepared with a specialization in Organizational Leadership from Case Western Reserve University. She is actively involved in the Society of Critical Care Medicine (SCCM) as chair of the Post Intensive Care Syndrome task force, chair of the SCCM Ethics Committee, co-author of the 2013 SCCM Pain Agitation and Delirium guidelines, and lead author of the SCCM guidelines for Patient and Family Centered Care. Dr. Davidson is also involved in the American Association of Critical Care Nurses, Research Chair for the Gamma Gamma Chapter of Sigma Theta Tau and member of NaCNS and the ANA. She is adjunct faculty for SDSU and guest lecturer for PLNU. She is a nurse theorist and has published a midrange theory entitled Facilitated Sensemaking which guides nurses in the care of the families of patients experiencing critical illness. Dr. Davidson has published over 50 peer-reviewed manuscripts in medical and nursing journals. She has also authored book chapters on "Measuring CNS Outcomes" and "Moral Distress".

Answers:
 (1) Fiction, (2) Fiction, (3) Fiction, (4) Fiction, (5) Partial fact. If rounds are not managed properly both staff and family may have anxiety. The majority of family members would prefer to be present on rounds (6) Fiction, (7) Fiction, (8) Mostly fiction. The risk of confidentiality needs to be managed, but the benefit to the patient and family of improved communication appears worth the risk.
 For a list of references supporting these statements contact jdavidson@ucsd.edu