What are critical care nurses perceptions of the long-term mechanically ventilated patient in the ICU setting?

Lisa Mace
MSc, BSc (Hons), RN
Cardiac Nurse Specialist
Background

- Working in critical care is challenging and demanding
- Majority of patients' recovery is quick
- Small but increasing number of patients' ICU stay is complicated and prolonged
- Long-term ICU patients have complex needs
- Consequently, they might be perceived as 'difficult' or 'unpopular' to care for
The ‘unpopular’/ ‘difficult’ patient phenomenon

Application not straightforward
- Behavioural characteristics (Stockwell, 1972)
- Personal characteristics (Albarran & Solomon, 2000)
- Challenging competency/control (Strandbery & Jansson, 2003)

In the context of critical care
- The demanding nature of care (Williams, 2007: Lally & Pearce, 1996)
- Challenging nurse’s skill set (Todres et al 2000)
- Personality characteristics
Study Aims

To explore ICU nurses’ experiences and attitudes of caring for long-term critically ill patients.

Methodology

Qualitative design

1. Purposive sample
2. 23 critical care nurse recruited (ICU/CICU)
3. Focus group interviews
4. 4 focus groups: junior/senior group from respective work area
5. Interview schedule
6. Thematic content analysis (Burnard, 1991)
Findings

Three Main Themes Emerged

- Clinical challenges
- Rewarding aspects
- Organisational challenges
Clinical challenges of caring for the long-term intensive care patient

Physical challenges

Physically demanding to care for:

‘I remember one day…with a long-term patient with diarrhoea and I must have had to roll and turn them 25 times and I was nearly crying by the end of the morning’ (F1, U)

On occasions, participants described how they felt

...‘a bit overwhelmed by all the things you have do to attend to when caring for a long-term patient’ (F2, L)

Physical exhaustion – 14 hour shifts
Clinical challenges of caring for the long-term intensive care patient

Physical challenges

Needing to maintaining constant state of hyper-vigilance

‘you just don’t take your eyes off them otherwise infusion lines and tubes become dislodged (F4, F)’

‘He [long-term patient] had not been orientated, pulling… ventilator alarms every five minutes, so I am running around the bed space, like every five minutes… I don’t want to go to that situation every day’ (F3, K)
Clinical challenges of caring for the long-term intensive care patient

**Psychological Challenges:**

Supporting the patient emotionally

‘...he used to be like wean, wean, wean...we would say do half an hour weaning and he will say, I will do an hour, but now it’s no, I don’t want to do anything! That’s hard!’ (F2, L)

Keeping long-term patients upbeat/interested

‘...if you have been there [with long-term patient] for a quite a while, like 3-4 days it’s mentally exhausting’ (F3, H)
Clinical challenges of caring for the long-term intensive care patient

Psychological Challenges:

Facing intimating and manipulative behaviour

‘...long-term patients can be very manipulative...difficult to manage, playing people off against each other...there will be a lot of she does it this way...’ (F2, L)

Relatives’ anger and hostility

‘...if she is having a bad day, she becomes confrontational... she is like a pressure cooker and unfortunately it is the person stood in front of her gets the brunt of it’ (F2, O)
Core Theme: rewarding aspects of caring for long-term patients in ICU

Connecting and forming bonds

‘...it feels so good to look after those patients [long-term patients] if you have been looking after them for quite some time and you really get a chance to bond with them… you feel like you are one of the family’ (F3,H)
Rewarding aspects of caring for long-term patients in ICU

Feeling you have made a difference

‘… sitting them out in the chair and wash their hair and someone comes in and goes wow…and that is like your reward…and they say I feel great’ (F2,L)

‘… hair washing and shaving, that sort of thing gives you a sense of satisfaction, relatives think you have cared for them, the patient, they look so much better … they maybe haven’t advanced in terms of weaning, but they just look so much better’ (F1,T)
Core Theme: Organisational challenges associated with long-term ICU patients

Staff allocation

‘…finding the right person for the right patient’ (F1, S)

‘…when it comes to allocation you think, well that’s a really sick patient, but in the next bed-space is a really, really sick patient …you then start to run out of people who ideally you would like to look after the long-termers’ (F1, T)
Organisational challenges associated with long-term ICU patients

Supporting and protecting the nursing team

‘What I try to do if it is a junior nurse with a long-term patient…I will go and briefly discuss what we are going to do. It is just about getting a vague structure and them knowing that they get your support to do it’ (F1, T)

‘…many people are in and out…they will say everything OK? And without waiting for the answer they will walk off’ (F3, K)
Implications and Recommendations

Providing adequate support:

- Regular breaks
- Senior staff visibly on hand
- De-briefing meetings
- Formal support mechanisms – Action Learning Sets

Equipping ICU nurses with relevant skills/knowledge
Conclusions

This small study identified that the idea of the unpopular patient still pervades and exists in a modern ICU setting

Evidence to suggest that caring for long-term critically ill patients can be difficult and demanding

Equally, such patients were viewed as producing rewarding and satisfying experiences of caring

Adequate formal and informal support mechanisms would help ICU nurses to meet the very complex set of needs of long-term critically ill patients.

Maximising the quality of care long-term patients receive while minimising the stress ICU nurses experience during care delivery