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Literature review: Perception of family members regarding physio and psychological needs of immobilized patients admitted in Tertiary Care Hospital

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Abstract

Background: Each individual plays a vital role in his/her circle of relatives. Family members too play a crucial role in the life of the individual and should be a significant an area of the context of the individual's life. It's among the families that an individual grow, nurtured, acquire the sense of selfworth, develop beliefs and value regarding life. The members of the family do not appear to be psychologically prepared for his or her relative's crucial health problem as results of most admissions occur as emergencies. Family members are caught off guard once their relatives become critically unwell as a result their life becomes disordered and discontinuous. Family-centered care could also be a notion which acknowledges that patients are part of a larger "whole". Apart from providing data regarding the patient, family members collectively facilitate to supply emotional support to the patient. **Objective**: To collect the data and review various studies.

Methodology: The study design was systematic review. The study includes the studies those which are related to the physio and psychological needs of patient admitted in Tertiary Care of Hospital.

Analysis: The data were grouped and analyzed in terms of Meta-analysis. Studies were identified through the search of MEDLINE, PUBMED, Elsevier and Google Scholar. Abstracted information is about the study design, population characteristics, intervention and outcomes.

Conclusion: Study conclude that if health care professionals can collaborate and identify the physio and psychological needs which are perceived by family members who are taking care of patient in hospital can improve the quality of care which really a patient needs to recover fast.

Keywords: Perception, family members, physio and psychological needs, immobilized patient

Introduction

Versatile experience and lay information teach the advantage of exercise and the hazards of idleness. But the parable persists that "bed rest is good for you" once unwell or convalescing. A plentiful of scientific proof in the past fifty years has demonstrated the precise damage done to each of the body's organ systems by inactivity and immobilization [1].

Care givers play a vital role in providing care to their patient. Care givers are the one who will be with patient on each occasion than physicians and nurses. Hence the care givers information regarding general measures like positioning, exercise, skin care, nutrition and support will enhance the quality of outcome and forestall complications. Care giving could also be a difficult job and many of care givers show psychological stress associated declaim in physical and mental health mostly care giving continuous quite a year. If adequate information is provided to care givers it's going to assist them to deal with the stressors and enhance the quality of life of themselves and their patients [2].

Materials and Methods

Research Design: systematic review

Inclusion criteria: The study includes the studies those are related to Perception of family members regarding physio and psychological needs of immobilized patients admitted in Tertiary Care Hospital.

Exclusion criteria: The study excludes the studies those are related to staff nurses perception regarding needs of patients admitted in critical care settings.

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Simulation Educator, North, Delta Healthcare New Delhi, Delhi, India **Data Analysis:** The data was grouped and analyzed Relevant articles based on the topic Perception of family members regarding physio and psychological needs of immobilized patients admitted in Tertiary Care Hospital were identified by search of significant articles Pubmed/Medline, Scopus, CINAHL and Google Scholar.

Result: A Systematic review was done to do assess the Perception of family members regarding physio and psychological needs of immobilized patients admitted in Tertiary Care Hospital. Total 25 studies were selected for review out of which 16 were finding appropriate for systematic review. Data were divided into 1 section:-

Section I: Review related to the Perception of family members regarding physio and psychological needs of immobilized patients admitted in Tertiary Care Hospital.

Review related to the perception of family members regarding physio and psychological needs of immobilized patients

Seyed A S, Yadollah J (2016) conducted a descriptive study on a randomly 80 staff nurses and 80 caregivers of Intensive Care Unit clients. Two-part questionnaire was used for data collection which include selected personal variable and the Critical Care Family Need Inventory the result showed that the top 5 foremost desires reported by family members were as follows: "To feel that the health care professional care about the client", "to be poised that the best care is given to the patient", "to have queries answered truthfully", "to grasp facts concerning patient's condition", and "to be called at home about changes in the patient's condition." The top five foremost needs identified by staff nurses were as follows: "To be assured that the best possible care is being given to the patient", "to be told about transfer plans while they are being made", "to feel that the health care personnel care about the patient" [3].

Jacob M, Horton C, Rance-Ashley S, Field T, Patterson R, Johnson C et al. (2015) conducted a exploratory descriptive study design was used to identify the effects of continuous family visitation in the neuroscience ICU on patients' caregivers and their needs and experiences during their time in the unit. Convenient sampling method was used in the study. The study was done in neuroscience ICU unit. The standardized tool that is the Critical Care Needs Inventory (CCNI), the Family Satisfaction in the ICU (FS-ICU) was used in the study. Total time taken by the participant was less than 15 minutes. The results showed that the foremost needs identified by the 45 caregivers surveyed were items relating to information about the patient, visiting the patient, being given hope, talking with a doctor each day, and being assured that the standard of nursing care is being given to the patient. Least important items were related to physical comforts for the family caregivers. The vast majority of caregivers rated their needs as being met for all of the items in the survey and reported a high level of satisfaction with care [4].

Olding M, Reeves S, Puntillo K, Kitto S (2015) conducted an exploratory study focusing on patient and family involvement in adult critical care unit. Data collected through the medical literature MEDLINE, CINAHL, Social Work Abstracts and PsycINFO were conducted and English-language articles published between 2003 and 2014 were retrieved. Articles were included if the studies were undertaken in an critical care setting, direct the topic of patient and care giver involvement, included a sample of

adult critical care patients, their families and/or critical health care providers. A total of 892 articles were screened, 124 were eligible for analysis, including 2 mixed- methods studies, 61 quantitaiv and 61 qualitative. There was a significant gap in research on patient involvement in the intensive care unit. The analysis identified five different elements of family and patient involvement: (i) presence, (ii) having needs met/being supported, (iii) communication, (iv) decision making and (v) contributing to care [5].

Turkan, Nurten T. Esma O (2014) conducted a cross sectional study with the purpose to compare the ICU nurses and patients family members perceptions regarding intensive care family needs in Turkey. Descriptive crosssectional design was adopted by the investigator along with Turkish version of Critical Care Family Needs Inventory tool was opted to find the family member's desires of a convenience sample of 70 caregivers of ICU client and the perceptions of the 70 ICU staff nurses regarding the needs of patients. The result of the study showed that foremost need which was perceived by family members is assurance and for nurses "information about the client health status [6]. Suhair H. Al Ghabeesh, Hana Abu-Snieneh, Luay Abu-Shahror Firas Abu-Sneineh, Mohammad A (2014) conducted a descriptive study with the aim to transverse the self-perceived desires of caregivers having seriously ill client. The study was done in Intensive Care Unit. Critical Care Family Need Inventory with convenient sampling method was used by the investigator in order to select the study subjects for study. Findings of the study showed that the family member's classify desire of information as the highest; need for support as the lowest [7].

Plummer V, Clerehan R, Brien A (2013) conducted descriptive exploratory qualitative study focusing on needs and experiences of patients' family members admitted in intensive care unit Saudi Arabia. Individual, semi-structured interviews of a purposive sample of 12 family members were administered between November 2011 and February 2012. The closest family members or caregivers were recruited to take part in the interviews with a mean age of 44.25 years in eight mixed medical-surgical Intensive Care Units of eight major trauma hospitals in Saudi Arabia. The results showed that family members sought to access information readily to reduce their patient anxiety. They also needed to be reassured that the best possible care was being delivered to their loved one and to feel supported during this critical time. Saudi family members have cultural and spiritual healing beliefs and practices including faith in God and that God are the ultimate healer, reading of the Our'an, prayer and charity. These lessen their stress and connect them to hold on to hope [8].

Andreza S A, Neylor R O (2012) conducted a qualitative study emphasize on the caregiver's fondness regarding client admitted in critical care unit. Interview technique was used to elict the responses from the study participants. Data were collected between July and August 2007. The findings of the study showed that subsequent feelings: anguishes and worry, powerless, anxiety, sadness, fear, lost and disquit, stress, faith. Apprehension was the foremost usual one and was associated with inexplicable environment, the diversified strategy, dismay of what is going to happen tomorrow and supposition of their loved ones to get better ^[9].

Chatzaki M, Klimathianaki M, Georgios C, Eleni A, Georgopoulos D (2012) conducted a prospective cohort study focusing on desires of Critical Care Unit client

caregivers in a rural population family members of client admitted in the ICU for ≥48 hours over 18 months. Critical Care Family Need Inventory, which consists of 45 needs, was used by the researcher. Result showed that the reassurance graded as the highest need by the family members and subjects with a less educational and socio-economical status rated support need items as foremost important than those with a higher educational and socio-economic status [10].

Khalaila R (2012) conducted a cross sectional study specializing in Patients' family satisfaction with needs met at the medical aid unit. A complete of seventy relatives of critically unwell patients was enclosed during this study conducted in a very medical aid unit in Israel between Oct 2007-September 2008, employing a structured interview. These outcomes analyzed by the Family Satisfaction within the medical aid Unit Inventory were regressed singly for baseline variables and family needs met subscales as measured by the Critical Care Family wants Inventory (CCFNI). The results showed variations between the perceived importance and also the perceived met needs of relatives. Satisfaction with care was completely associated with meeting all need domains except the knowledge need. However, satisfaction with information and decision making was connected solely to meeting information and emotional support needs [11].

Hashim F Hussin R (2012) conducted a descriptive study focusing on Family member's desires of client admitted to Critical Care Unit with bed capacity of 12. The aim is to assess needs of family members. Caregivers of patient admitted to the ICU were selected as a sample of the study. A sum of 110 caregivers from 45 ICU clients was choosed as a participant for the study. Data were collected from February 2010 till April 2010. The result showed that caregivers placed hope and faith on the medical professionals as foremost need. The findings of the study reveled that the good communication skills for nurses to be able to meet the needs of caregivers [12].

Obringer K, Hilgenberg C, Booker K (2012) conducted a descriptive study focusing on current perceptions of caregivers desires of Critical care unit clients. The CCFNI was used for data collection and with the help of convenience sampling method 50 family members from a 22-bed ICU in the USA was selected by the investigator. Findings of the study showed that assurance was the foremost important needs as perceived by family member and support as the least important need [13].

Munyiginya P, Brysiewicz P (2011) conducted a quantitative study with aim to transverse the desires of patient primary caregivers in the critical care unit in Kigali, Rwanda. Critical Care Family Needs Inventory tool was used for data collection and family members whose patients are admitted in critical care unit were selected by convenience sampling method. The result showed that foremost desires perceived by the caregivers were the desire of assurance, desires of information, consolation, presence and support [14].

Omari F H. (2009) conducted a descriptive study done in ICUs located in three different types of hospitals in Irbid, a city in Northern Jordan, by using Critical Care Family Needs Inventory (CCFNI), and Needs Met Inventory (NMI) studied a convenience sample of 139 family members of 85 critically ill patients. The findings of the study showed that the 10 most vital needs identified by adult Jordanian family members were in the Assurance and Information subscales.

The need "to be assured that the best possible care is being given to the patient" was reported as the foremost need. Use of the NMI indicated that none of the 10 most important needs were perceived as being met. Meeting these needs might help family member to coped better and be more supportive to their critically ill patient [15].

Sturdivant L, Warren N (2009) conducted a descriptive exploratory pilot study with 20 caregivers in the pediatric intensive care unit, Nashville, Tennessee, by using socio demographic characteristics and the Need Met Inventory (NMI) to transverse the perceived desires of caregivers of client. Convenience sampling method followed by structured interview method was used. The result of the study depicts that the foremost need which was perceived by the family members was the need of assurance and lowest need was the need of support [16].

Fridh, Forsberg & Bergbom (2009) orchestrate a phenomenological study with the purpose to assess the family member's encounter of caring and when a client dies in an ICU. Convenience sampling procedure followed by the structured Interview method was used by the researcher in orders to elict the responses. The phenomenological-hermeneutic method was used to analyze the interview. The findings of the study revealed in seven sub categories; Being oppose with the ultimatum of loss, The need for privacy and togetherness, death, Maintaining a vigil, The desire for isolation and closeness and encounter reconciliation. The encounter of a caring relationship was midway, which meant that the piloted the family members past the hidden reefs of the unfamiliar technology and environment, waiting characterized by uncertainty and distressing information [17].

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