

PROCEDURAL SEDATION IN THE EMERGENCY DEPARTMENT

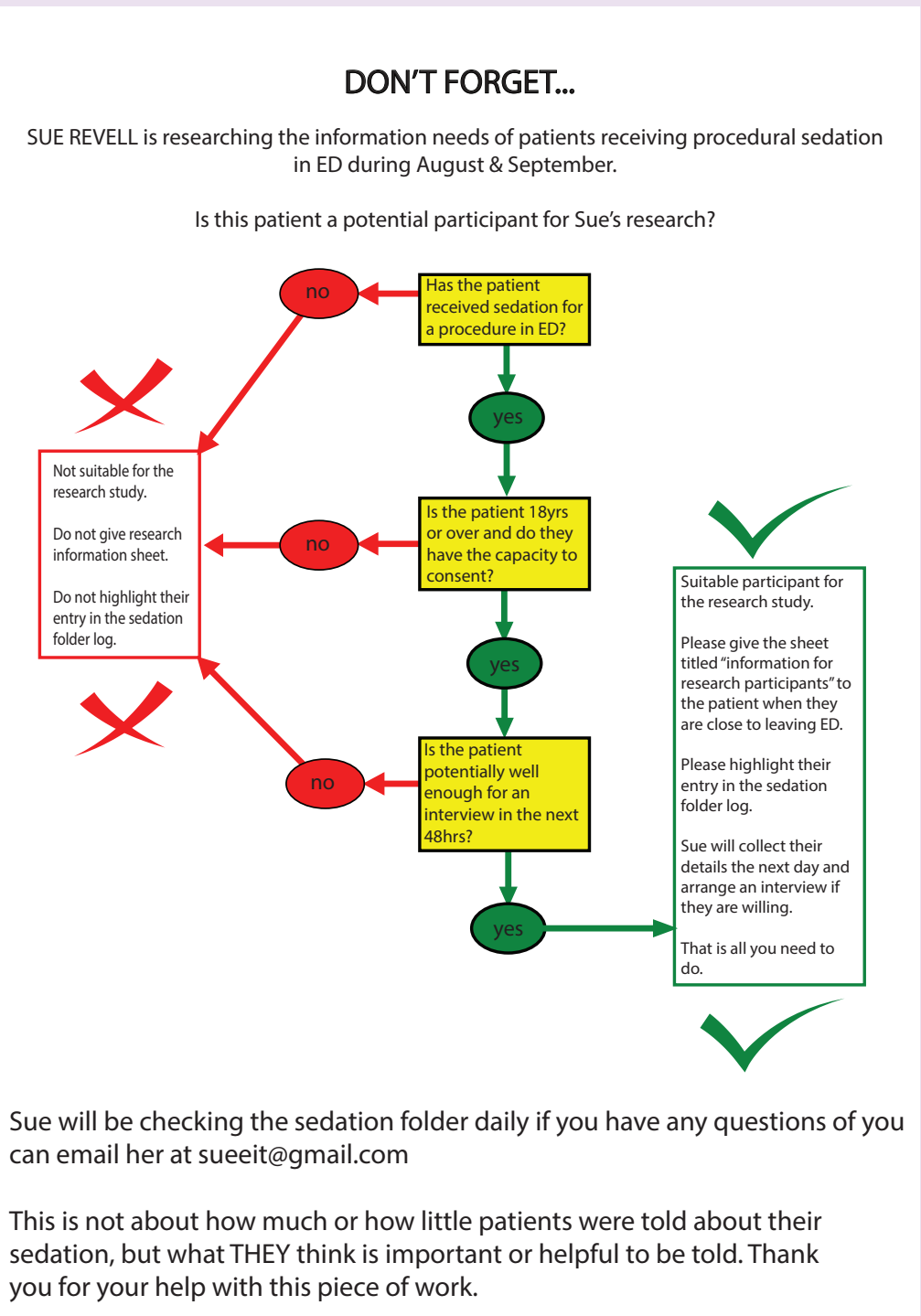
WHAT DO PATIENTS REALLY WANT TO KNOW?

Sue Revell RN, MN
Emergency Dept. HBDHB

OBJECTIVES

- To discover patients' perceived information needs around ED procedural sedation
- To discover ED nurses' beliefs around what information the patient needs to know about ED procedural sedation
- To discover Emergency Medical staffs' beliefs around what information the patient needs to know about ED procedural sedation
- To discover the best format to deliver those information needs consistently & in a way that is acceptable to all 3 groups

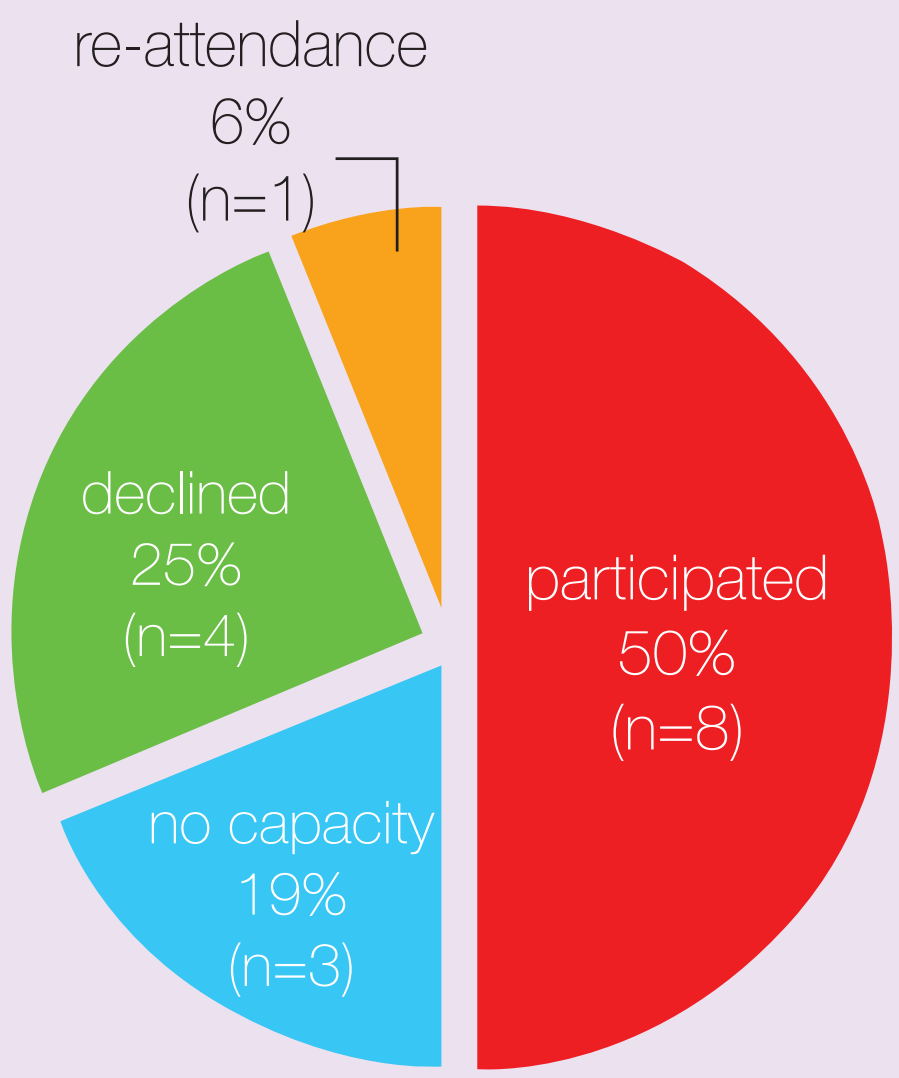
PATIENT SELECTION PROCESS



- ED staff emailed with info regarding upcoming research project contained
- Details of what they would be asked to do
- Patient inclusion/exclusion criteria
- Patient information sheets and simplified flow chart (shown) placed in sedation folder with usual sedation paperwork

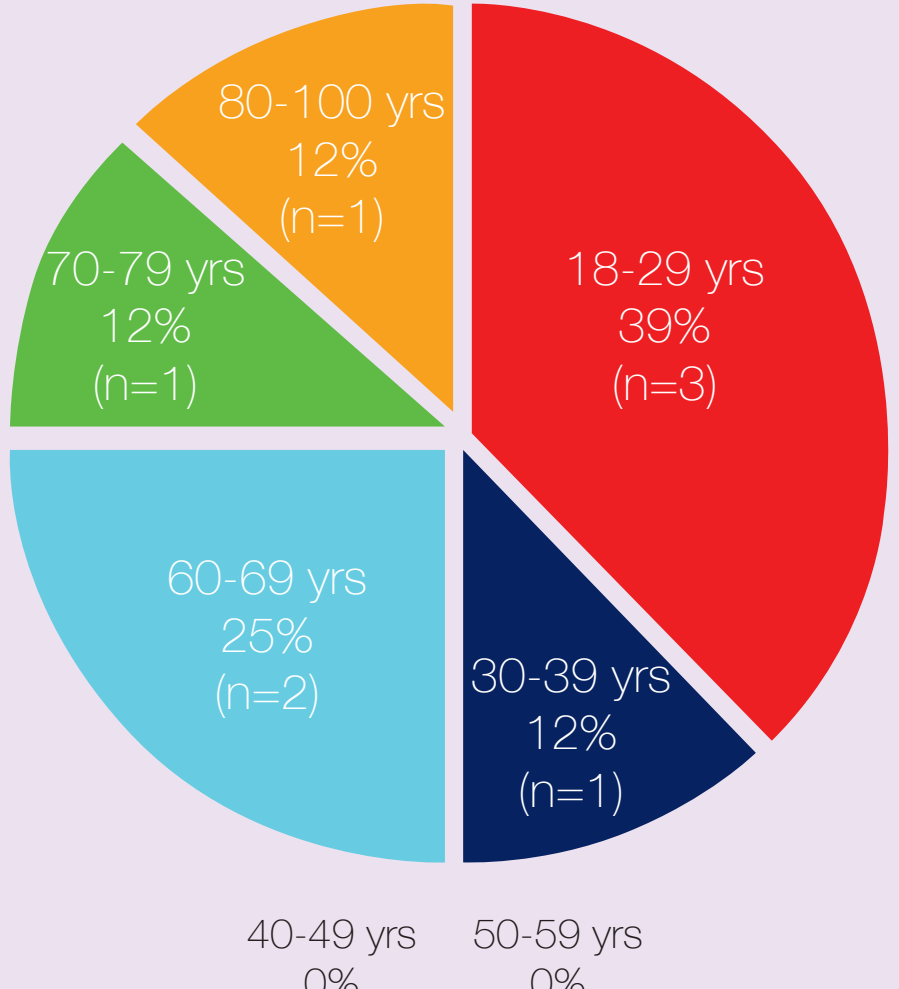
- Folder checked daily for patients who had been given an info sheet
- Patients contacted 1-2 days after procedural sedation and asked to consent to participate in an interview

PATIENT PARTICIPATION DATA

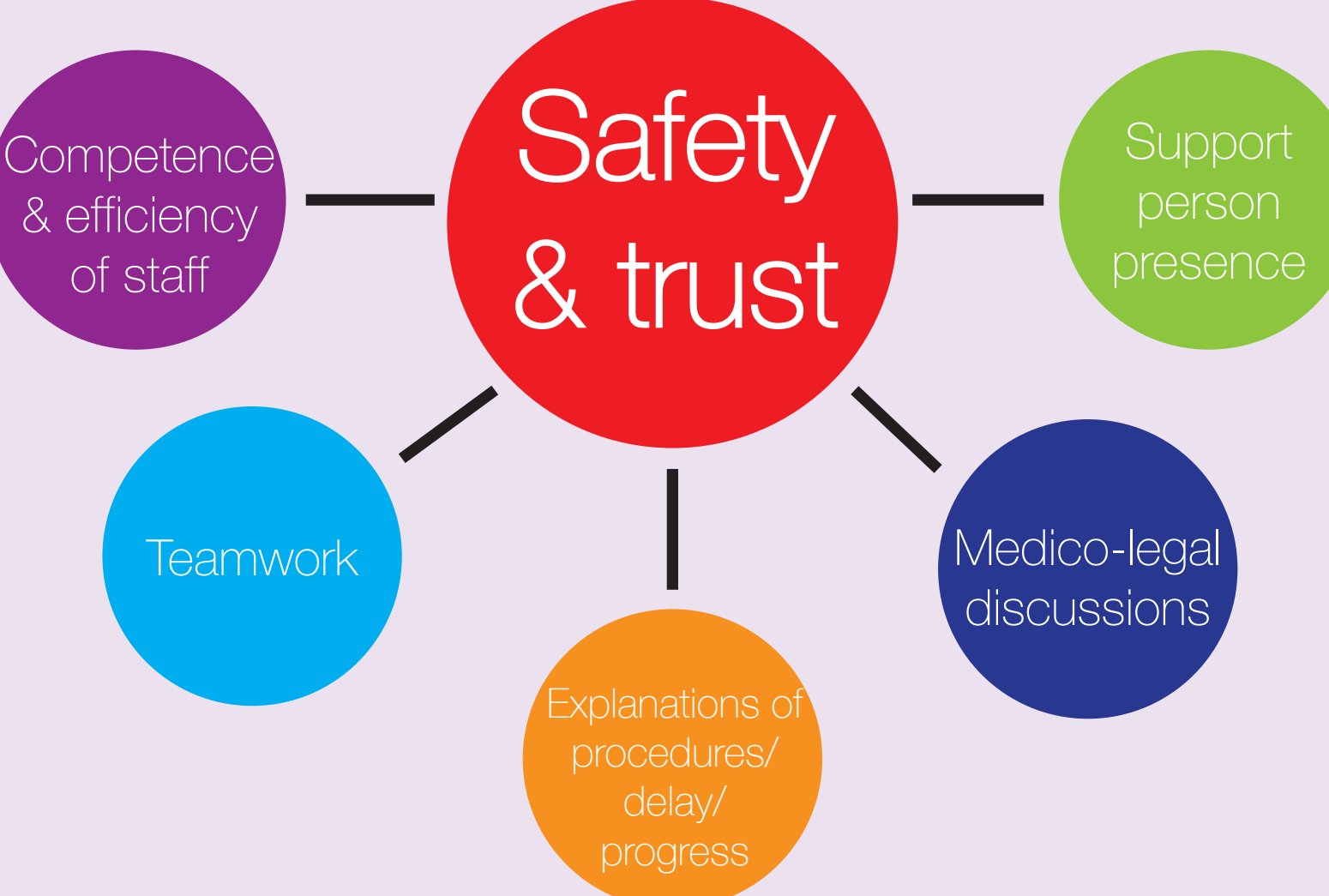


PATIENT AGE-RANGE DATA

Age Range: 21-82 yrs (mean age 48yrs)



THEMES IDENTIFIED - PATIENTS



- Overriding theme was the need to feel safe and that they could trust the staff.
- This feeling of safety and trust was created by the surrounding sub-themes
 - Multiple explanations given by more than one person
 - Patient's observations of staff teamwork, professional and competent behaviours and interactions
 - Medico-legal discussions were of less importance
 - Support person presence was important to the patient; the support person valued the details of the risk/benefit discussions more than the patient

THEMES IDENTIFIED - NURSES

- Aims - safety, reduction in anxiety, comfort and success of procedure
- Medico-legal was seen as the doctor's responsibility
- Patient's advocate - ensure comprehension was seen as the nurse's responsibility
- Reassurance and reduction of anxiety - not always verbal
- Constant explanations
- Inclusion of support persons

THEMES IDENTIFIED - DOCTORS

- Priority is informed consent including discussion of risks and benefits
- Reliance on nursing staff to reiterate info and provide clarification as needed
- Effects of the sedative agents, confidence in the newer agents
- Safety of the environment to manage potential adverse effects
- Acceptance of support person - newer concept

REFLECTION ON THE RESULTS

- Common aims of all participant groups – safety and trust.
 - Patients need to feel safe and to have trust in the staff
 - Nurse and doctor groups both stated their aims were to provide a safe environment and to provide open and honest communication for patients
- Commonality between 3 participant groups themes
 - competence and efficiency of staff
 - explanations of progress, delays, procedure and environment
 - repetition and clarification of information using a whole team approach
 - support person presence
 - medico-legal discussions and risk versus benefit information
- Theme specific to 1 participant group – pharmacology
- Rejection of the use of additional written information

METHOD

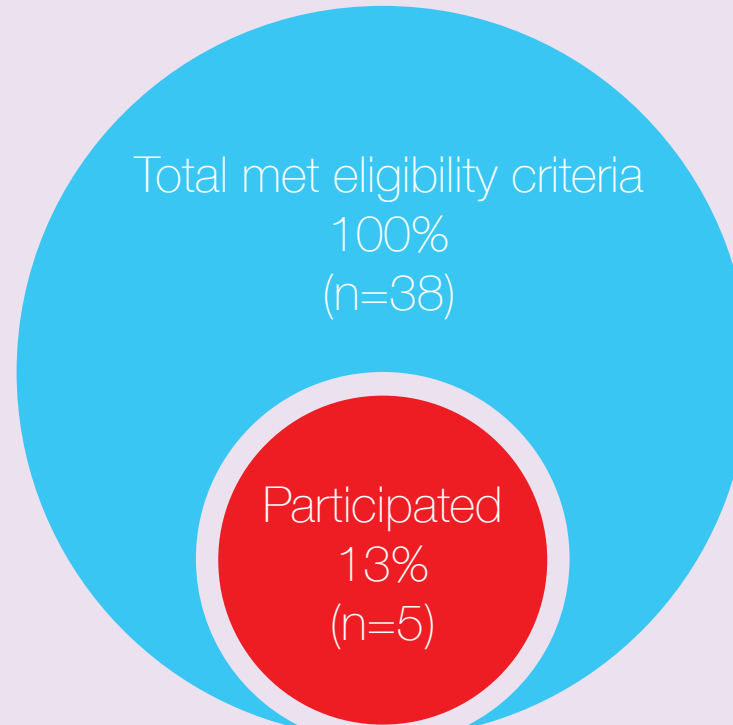
- Qualitative – evaluation research - purposive sampling
- 1:1 interviews of eligible patients, August 2012; and focus group discussions with medical and nursing staff, September 2012
- Patients identified from contemporaneous log of sedations carried out. Initial information sheet given to patient by RN in ED
- Semi-structured open ended questions, in one-to-one interview (5 conducted at home and 3 conducted in hospital)
- Brief preliminary analysis of data gathered from patient interviews to be used to inform the staff focus groups
- All recordings de-identified and transcribed for detailed analysis
- Ethical approval for the study was granted by EIT Research Ethics Academic Committee & HBDHB Research Committee

STAFF SELECTION PROCESS

- Senior medical & nursing staff identified as those who regularly work in the resuscitation area
- Research information sheets and posters requesting volunteers sent by email, placed in individual mail slots and in staff communication book
- Negotiated a date and time where most who responded could attend a focus group

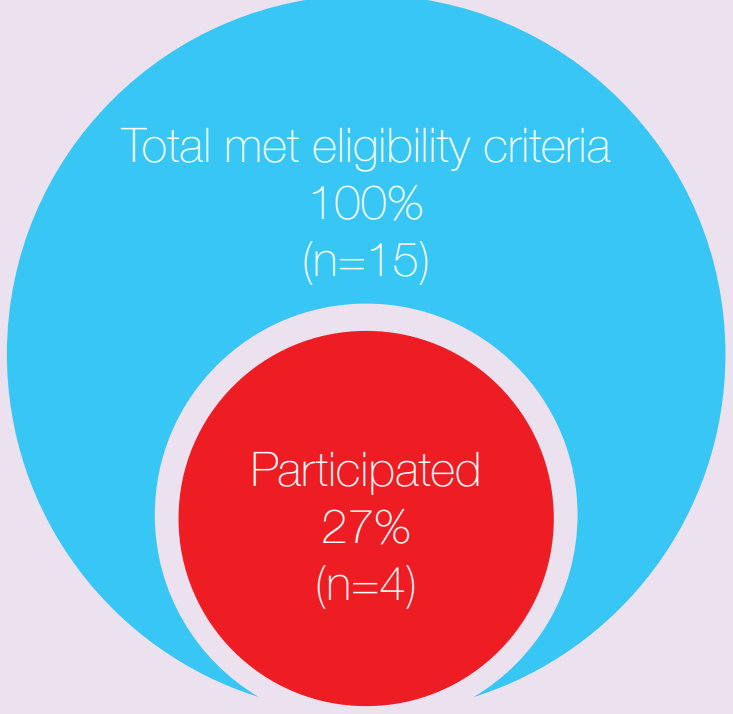
NURSING STAFF FOCUS GROUP

- 8 nurses showed willingness to participate
- 5 were able to attend the scheduled focus group

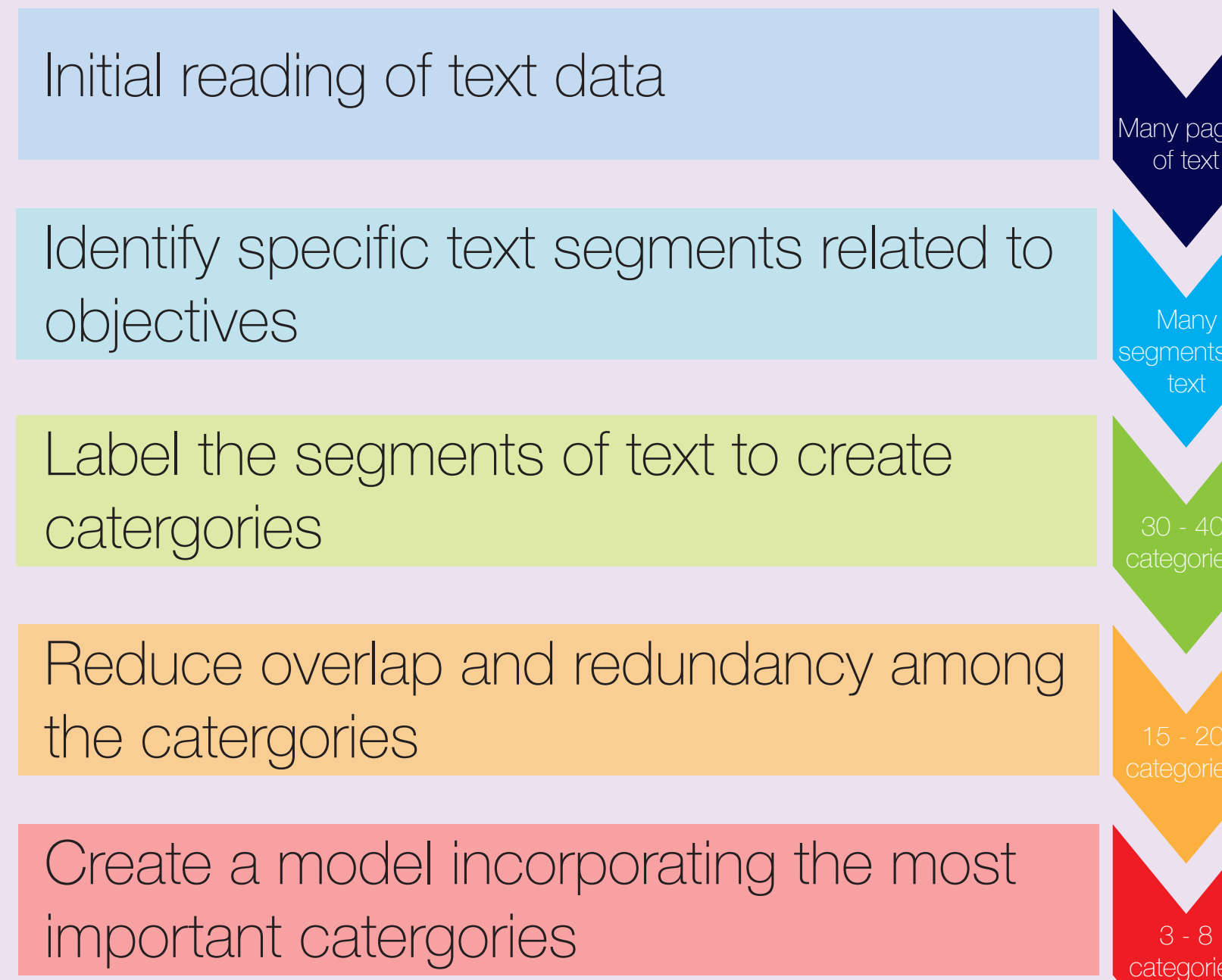


MEDICAL STAFF FOCUS GROUP

- Only 1 reply from original contact
- Opportunistic focus group organised when 4 ED consultants present for meeting



ANALYSIS OF DATA GENERAL INDUCTIVE APPROACH



OBJECTIVES OF THE ANALYSIS

- Identification of common themes - to all participant groups and also those unique to individual groups
- Highlight any differences in perceived importance the separate groups placed on themes identified
- Identification of what aspects of the event patients found most helpful/unhelpful
- Identification of how essential information is best delivered and received

100% REJECTION BY PATIENTS OF WRITTEN INFORMATION

"It is the way they present the information and their voice ... they are just letting you know this is happening and it helps you to start to calm. And you are willing to hear what is going on better than sitting there with a piece of paper"

"I like things verbally and I just get a better picture in my mind of what is going to happen ... If it is written down on a bit of paper you read it and you think well ok then, [but] if someone is saying to you, you know I can ask questions back at the same time"

"No not really I don't think, no. Not as I say, they seem to, yes, they seem to impart their knowledge pretty clearly and they put one at rest"

"I don't think that is what I [would want], I think it is a bit, it lacks sort of, well human warmth, and that is what you want. I think just reading it on a piece of paper isn't going to console you in a way is it?"

CONCLUSION AND SUMMARY

- Limitations
 - Small study; one regional ED
 - Patients less focussed on sedation; whole ED experience
 - No dissatisfied patients recruited
 - No children; parent's perspectives may be different
- Overall patient's needs were well met
 - Repetition/clarification of information important
 - Proactive enabling of support person presence
 - Providing examples of what patients value (eg. patient-provider communication)
- ED team's practise shows compliance with national/international clinical guidelines
 - High quality procedural sedation practices
 - Focus on safety
 - Enhancing the quality of ED nursing practice

c/o Hawke's Bay Soldiers' Memorial Hospital
Omahu Rd, Private Bag 9014, Hastings New Zealand
06 878 8109
suee1@gmail.com



SCAN TO VIEW THE FULL THESIS