**Background**

Post-intensive care syndrome (PICS) is a newly recognized condition which occurs in patients following an intensive care stay.

- Symptoms of PICS occur along a spectrum and includes impairments in physical, emotional, cognitive, or psychological functioning.
- PICS has recently been acknowledged in pediatric patients and their families following pediatric intensive care unit (PICU) hospitalizations with symptoms lasting anywhere from months to years.
- In several adult studies, diaries were implemented in the ICU setting and shown to decrease PICS symptoms. These diaries became an outlet for sharing their hospital experience.

**Purpose**

The purpose of this quality improvement project was to educate PICU staff about PICS and implement an ICU diary program for pediatric patients and their families following pediatric intensive care unit (PICU) hospitalizations with symptoms lasting anywhere from months to years.

**Methods**

An educational PowerPoint about PICS was built and assigned to all PICU RNs to complete via hospital online learning system.

PICU RNs and patients with a length of stay ≥ 3 days were asked to participate. However, all members of the healthcare team could make journal entries.

RNs and families completed surveys addressing the workflow, clinical utility, and emotional benefit of the diary program.

**Results**

Patients’ hospital course dictated the use of the ICU diary. Ultimately, 9 patients and their families were enrolled.

All 58 PICU RNs completed PICS educational PowerPoint.

20 nurses completed the post-intervention survey indicating:
- 81% found the diary to be beneficial
- 85% stated diary entries took 10 minutes or less to complete.
- 61% felt that they had a better understanding of PICS
- 45% believed that the diary program improved conversations about family’s psychological/emotional needs

1 of the 9 parents completed a survey suggesting the ICU diary:
- Improved knowledge of the child’s ICU stay
- Provided an additional level of emotional support and enhanced well-being
- Further, the parent planned to share the diary with the child

**Conclusions**

The diaries were a simple, inexpensive means to foster communication between the bedside nursing providers and their patients/families.

Similar to previous research, staff were excited about the ICU diaries as exemplified by their comments:
- “Personalized their care in kid-friendly language”
- Gave the patient and family a tangible item that they could “take home and share with their child”
- Provided a means to “communicate with patients in a unique way” that may not have occurred without the diary as a facilitator

Families were also receptive to the idea and open to using an ICU diary to chronicle their child’s hospital stay.

Limitations of this project included:
- Small sample size; n = 9
- Low rate of return for parental survey (10%)  
- Short timeframe (3-4 months)

**Future Applications**

Future research can be aimed at determining the relationship between ICU diaries and the psychological outcomes of children/families following an ICU stay.

Additionally, there is an increased need for education about PICS for medical providers, so that they can understand how ICU interventions can directly impact the physical, emotional, cognitive, and psychological functioning of children and their families.

The clinical utility of ICU diaries can be enhanced by:
- Implementing a reminder system for making entries
- Storing the diary in a common location
- Encouraging participation from other members of the healthcare team

**Acknowledgements**

Special thanks to Sandra Hagstrom, PhD, Emily VanHeel DNP, APRN-PNP and Clare Evenson, MSN, RN for your guidance and assistance, as well as entire PICU nursing staff who were very supportive of this QI project.
A Strategy to Decrease Post-Intensive Care Syndrome: The Use of ICU Diaries in the Pediatric Intensive Care Unit - Poster #: F13
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Background: Post-intensive care syndrome (PICS) is a newly recognized condition which occurs in patients following an intensive care stay. Symptoms of PICS occur along a spectrum and includes impairments in physical, emotional, cognitive, or psychological functioning. PICS has recently been acknowledged in pediatric patients and their families following pediatric intensive care unit (PICU) hospitalizations with symptoms lasting anywhere from months to years. In several adult studies, diaries were implemented in the ICU setting and shown to decrease PICS symptoms. These diaries became an outlet for sharing their hospital experience.

Purpose: The purpose of this quality improvement project was to educate PICU staff about PICS and implement an ICU diary program for pediatric patients and their families in a Midwestern 12 bed PICU.

Methods: All PICU registered nurses providing direct patient care were assigned an educational PowerPoint regarding PICS and the implementation of the ICU diaries. The primary intervention was the implementation of an ICU diary that included entries made by bedside RNs, parents or guardians, and other members of the healthcare team. Parents/guardians were surveyed at the time of PICU transfer to gather information about how frequently entries were made, as well as other benefits of the project. Additionally, medical providers were surveyed to gather information focused on the workflow and clinical utility of the diaries.

Results: ICU diaries were implemented with 9 patients over the course of a 3-month period. The primary outcomes were focused on both process related factors as well as families’ utilization and acceptance of the diaries. Twenty RNs used the diaries with their patients during the pilot project. The RN responses indicated that 90% enjoyed contributing entries, 85% identified entries taking 10 minutes or less to complete, and 81% felt that the diary program was a worthwhile intervention. In addition, 61% identified that they had an increased knowledge of PICS and 45% believed that that the program improved communication with families about psychological or emotional needs. Families agreed that use of the diary assisted them in understanding more about their child’s PICU stay and they had plans to share the diary with their child.

Conclusions: The diaries were a simple, inexpensive means to foster communication between the bedside nursing providers and their patients/families. Ultimately the ICU diaries were well received by the bedside nursing providers. Nurse’s commented that the diaries were a way to “personalize their care in kid-friendly language” and provided something that would allow patients and families to “make sense of what was occurring, especially in the first few days of an ICU stay”. In addition, families were receptive and open to participation and use of the diary. Several limitations were identified during the pilot phase including a sample size of 9 patients, a low rate of parental survey return, and a short timeframe of 3-4 months.

Future Applications: Future research can be aimed at determining the relationship between ICU diaries and the psychological outcomes of children/families following an ICU stay. Additionally, there is an increased need for education about PICS for medical providers, so that they are able to understand how interventions that are performed in the ICU can directly impact the physical, emotional, cognitive, and psychological functioning of children and their families. The clinical utility of ICU diaries can be enhanced by: a.) implementing a reminder system to encourage entries, b.) storing the diaries in a common location, and c.) encouraging other members of the healthcare team to participate, including medical providers, social work, child life specialists, and spiritual services.

References