

School of Health Professions Institute of Nursing

Family Involvement in an Orthopedic Clinic – Does it Make a Difference?

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Background

- Pressure has increased to reduce length of hospital stay and increase economic efficiency (OECD/WHO 2011, SAMW 2014)
- Standardization of care delivery processes often occur in the form of care pathways (Beazley and Brady 2006; EPA, 2007; Rotter et al., 2012)
- Care pathways often are criticized for their organization-driven focus and missing a holistic approach to care (Hellige & Stemmer, 2005; Schrijvers et al., 2012)



Nurse-led Patient Pathways (NPP)

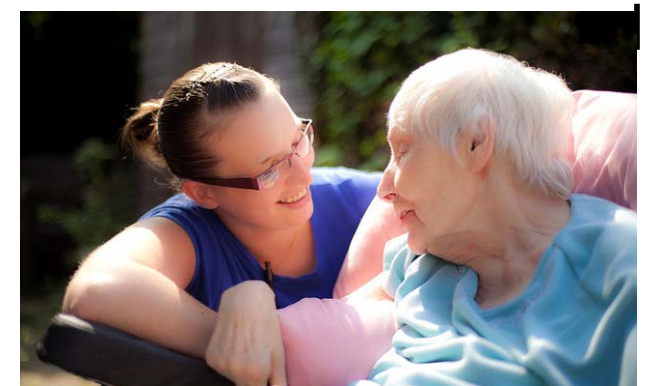
- The NPPs are characterized by four principles:

- Patient and family centered care,

- Comprehensive needs and goal assessment
- Patient and family-centered goals/objectives
- Follow-up phone call after discharge

- Aim: to enhance quality of nursing care patient satisfaction without increasing costs

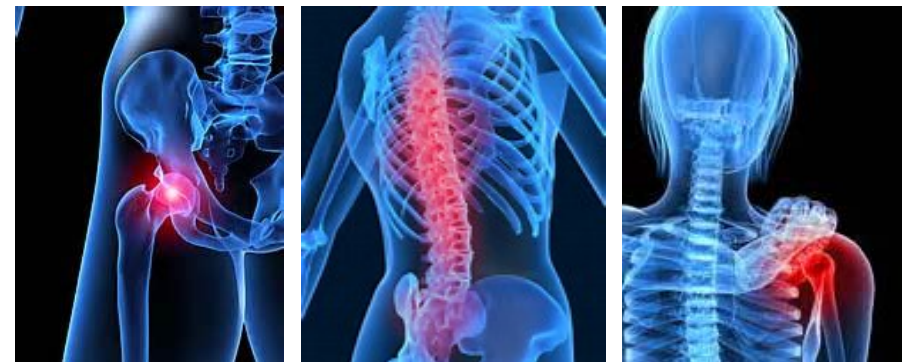
(Imhof et al., 2014, Seitz & Imhof, 2012; Zigan et al., 2012a&b)



Substudy

- Purpose: To analyze whether length of hospital stay is different in patients with low or high family involvement in nursing care
- Secondary data analysis, quantitative comparative study design
- Population: surgical patients hospitalized for
 - Total hip arthroplasty,
 - Decompression of the spinal cord,
 - Rotator cuff reconstruction
- Setting: two orthopedic units

(Imhof et al., 2014)



Variables and analysis

- Family involvement in nursing care: single item on patient survey to measure patient satisfaction with nursing care quality (PSNCQQ) (Laschinger et al., 2005)

Involving Family or Friends in your Care	Excellent	Very Good	Good	Fair	Poor
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	High-level		Low-level		

- Length of hospital stay (LOS): in days, retrieved from patients' clinical record entries (Imhof et al., 2014)
- Analysis: Mann-Whitney test



Results

Table: Characteristics of the patients (N=265)

Variable		Low-level group N=124 (47%)	High-level group N=141 (53%)	P value
Age in years	M (SD)	59 (14)	54 (16)	.004**
Gender <i>female</i>	N (%)	55 (44)	62 (44)	n.s.
Family status <i>married</i>	N (%)	70 (57)	90 (64)	n.s.
Relatives <i>yes</i>	N (%)	121 (98)	139 (99)	n.s.
Type of admission Planned / emergency / SDS ¹	N (%)	90 / 8 / 26 (73 / 6 / 21)	90 / 8 / 26 (72 / 3 / 25)	n.s.
Type of pathway NPP-1 / NPP-2 / NPP-3 ²	N (%)	54 / 41 / 29 (44 / 33 / 23)	41 / 61 / 39 (29 / 43 / 28)	.05*

¹SDS = Same day surgery;

²NPP-1 = Total hip arthroplasty; NPP-2 = Decompression of the spinal cord; NPP-3 = Rotator cuff reconstruction

Results

Length of hospital stay (LOS)

Table: Statistics for the two groups (N=265)

Length of hospital stay in days	Low-level group 124 (47%)	High-level group 141 (53%)	Statistics p-value
Mean (SD)	6.3 (2.2)	5.8 (2.1)	$U=7\ 535.5$ $z= -1.96$ $p= .05^*$ $r= - .12$
Median (Q1,Q3)	6 (5, 8)	6 (4, 7)	
Min - Max	3 - 14	2 -13	

Discussion / Conclusion

- Older patients had less family involvement
- Patients with total hip arthroplasty had less family involvement
- Patients who reported high-level family involvement had a shorter length of hospital stay (Ollson et al., 2014)
- Family involvement is an important component of care pathways
- Further research, which includes specific characteristics of patients and their relatives

Thank you for your attention!

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