



Service Priorities and Programmes
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Submitting author: Miss Y L WONG

Post title: Registered Nurse, QMH, HKWC

Is Attitude of Nurses Towards Presence of Family During Paediatric Resuscitation Affected by Their Confidence on It?

Wong YL (1)

(1) Department of Paediatrics and Adolescent Medicine, Queen Mary Hospital

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Introduction

Although several studies gave strong evidence that resuscitation with family presence has positive effects on both family and patients, this practice is still controversial and not a routine practice in Hong Kong. Limited guidelines and formal trainings were given to local nurses.

Objectives

To explore nurses' self-confidence on Family Presence During Resuscitation (FPDR), to identify the differences in attitude towards FPDR between nurses from Paediatric/neonatal Intensive Care Unit (PNICU) and Accident and Emergency Department (AED).

Methodology

Questionnaires were distributed to 135 nurses working in combined PNICU and AED in a local hospital, 70 completed questionnaires received within the study period. The survey consists of demographic questions, opinion questions on risks and benefits of FPDR, and the Family Presence Self-confidence Scale (FPS-CS) developed and proved to be valid by previous studies.

Result

Self-confidence was significantly greater in nurses who are APN or above, have children, completed PRCC training and post-graduate studies. Total scores of FPS-CS are normally distributed with a mean of 38.89. The mean score of PNICU nurses are significantly higher than that of AED nurses. Most of the nurses recognised that FPDR is a right that patients should have and family should be given an option to be present. 92% of nurses addressed their concern on the needs of extra manpower to take care of family psychological needs. 68% of the respondents were reluctant to invite family presence in resuscitation.

Lack of manpower is identified by local nurses as one of the obstacles of implementing FPDR in HK. More relevant guideline or training should be provided to increase nurses' self-confidence towards FPDR. Strategies can be focus on manpower allocation and enhancement of skills on supporting grieving family.