Background

The Canadian Foundation for Healthcare Improvement (CFHI) has partnered with the Institute for Patient and Family Centered Care (IPFCC) to support and implement family presence programs in major Canadian hospitals. As part of this nation-wide initiative, families of patients having surgery are expected to be reunited with their loved ones in the Post Anesthesia Care Unit (PACU) as soon as surgery on their family member is completed. Recently Humber River Hospital, a community hospital in Toronto, Canada, amalgamated three sites and became North America’s first fully digital hospital. However, lack of a structured visitation program resulted in inconsistent access to PACU, families’ confusion, and staff dissatisfaction with family presence.

Aim

The aim of the project was to implement an effective PACU family presence visitation program that balances the needs of staff, patients, and their families.

Actions Taken

An electronic patient tracking system was used to aid communication with families. The system provides real time information about patients’ location and sends automated messages on an electronic communication board or individual telephone text messages. We used Kurt Lewin’s model for change to implement a PACU family presence program:

- **Unfreeze:** Recognize need for change (staff, patients and families surveys, engaged leadership support; education for patient staff and volunteers)
- **Change:** Implement changes (family presence pathway implementation; family presence identification tag, family members as care partners, patient liaison role at key points of the hospital visit.)
- **Freeze:** Reinforce change (ongoing staff and family surveys to evaluate changes).

Survey and education material were developed based on literature review and with input from the surgical team. A multidisciplinary team of nurses, clerks and volunteers supported the project.

Summary of Results

Surveys conducted one month post implementation showed that patients and families were 100% satisfied with the family presence program. The percentage of nurses who agreed that family presence was beneficial to patients increased from 33% at pre-implementation to 100% at post-implementation. Also, we observed an increase of 25% post-implementation of nurses finding the family presence program helpful. Survey results demonstrated that a structured approach to family presence improves satisfaction with care and decreases patient and family anxiety.