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interconnected thinking in order to determine factors of decisive influence on this work process.

The observational study was undertaken in collaboration with the Department for Human Factors Engineering and Product Ergonomics at the Berlin Technical University. The requirements for an IT-supported documentation system for communication with family members were formulated on the basis of the observations.

We also researched the literature on communication with family members in the intensive care setting using the medical database Pubmed.

Results: The Interconnected Thinking workshop also identified the quality of information management as an active element exerting a strong influence on other factors, as well as time pressure and the transparency of information for the team as critical factors which have both a strong influence themselves and are also subject to the influence of other elements. Information management thus formed the focus of the investigation.

The analysis of the observation on the intensive care ward identified inadequate documentation of contact with family members and the absence of structure for standardized definitions, such as visiting rights, as the cause of information losses, lack of transparency and elevated investment in time. A list of advantages and disadvantages of an IT solution was produced. The aims of improving information flow, raising the transparency of information and time savings would be achievable as an integral component of a patient data management system (PDMS).

Discussion: The demands placed on modern intensive care medicine as part of a changing healthcare system are characterized, among other things, by increasing complexity, intensification of work and economization. Rising costs in the healthcare system lead to the justified demands of society for deploying resources responsibly and purposefully. Despite advancing intensification of work, medical and nursing staff wish to and are obliged to meet their core task of providing excellent patient care. Alongside medical aspects, doctors and nurses must therefore increasingly address the work processes in their fields. From this perspective we investigated communication with family members on the intensive care ward.

In the majority of cases, the situation of critical illness of a family member places an enormous burden on those affected. Health disorders, such as posttraumatic stress disorder (PTSD), are common. For this reason, the quality of communication is an important goal that has to be attained even under severe work pressure. The hitherto inadequate documentation of contacts with family members could be improved with an IT solution. A PDMS for an intensive care ward should include a

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Introduction: A specific and important aspect of work on an intensive care ward is communication with the family members of critically ill patients. This work is time-intensive. Information flow between the personnel and the family members and within the team is essential here. The quality of communication with family members is also a recognised quality standard for intensive care units. We are currently conducting a project to investigate the process of communication with family members on the intensive care ward covering the aspects of quality improvement and efficiency.

Methods: We organized a workshop with the participation of medical and nursing staff using the method of

solution for documenting contacts with family members. The modalities for data access, data entry and data protection should be orientated on the real working situation on an intensive care ward and support the team in this important function.