

## Featured Article Summary

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### **Optimizing Family Presence through Medical Education. Rona Yu, *Journal of Clinical Ethics*, 2024<sup>1</sup>**

#### **Short Summary**

This article presents an approach to optimizing family presence through medical education. The author argues in favor of family presence in the ICU setting and suggests that doctors should take a more proactive approach to asking family members early on whether they would like to be present in the ICU. Currently, medical students are trained in ICU care through simulation training. However, this training does not prepare the students for the presence of family members in the ICU. Yu argues that proactive training of medical students in the presence of family members during ICU treatment can help them better understand what family members are going through. Moreover, training under pressure while family members are present provides opportunities to practice communication with family members in such situations. This experience may lead to better care for patients and help medical students learn how to optimize the needs of family members in distress.

#### **Introduction**

Families may be reluctant to ask if they can be present in the ICU while their loved one is undergoing treatment. Reluctance might be due to ignorance around the benefits that their presence can have for the patient in recovery, as well as the benefit for the family to help process the grief and distress associated with having a family member undergoing ICU care or dying within an ICU care setting. Reluctance to be present in ICU care may also be due to fear of becoming a burden on the healthcare team. Many providers might find it stressful or distressing to have family members present and may not feel appropriately equipped to communicate with family members about their loved one. However, having family members present in the ICU setting can enable communication about the course of treatment and lead to better care for patients, while minimizing distress for family members as well as for providers.

#### **Key arguments:**

- Decision-making for family members with a loved one in the ICU may be easier if doctors focus more on those who will be making treatment choices on the patient's behalf.
- Doctors should proactively approach family members to discuss how much they want to be involved.

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<sup>1</sup>Yu, R. (2024). Optimizing Family Presence through Medical Education. *Journal of Clinical Ethics*, 35 (2), Summer 2024: 136-140.

- Family presence by way of telehealth should also be offered, as it may be beneficial for all parties. Telehealth options allow family members who live far away or who may not be able to visit in-person for other reasons to remain in contact with the patient and involved in their care. It is particularly important for those who act as substitute decision-makers, as it can help them gain a fuller insight into the various interventions, and hence better equip them to choose what they believe the patient would have wanted.
- Ideally, members of the family who chose to be present during invasive treatments, such as CPR, should be accompanied by a trained person who can offer comfort, provide information, and answer questions. For example, such persons could include students.
- Simulated training of students in ICU care should involve simulated family members / essential care partners, as it will help students become better prepared to interact with family members under pressure and understand what families are going through in such situations. Yu (2024) suggests:
  - Simulation can help optimize patient care, as students become more comfortable performing CPR treatment in front of family members.
  - Students can practice communication skills with simulated family members around difficult concepts, care options, benefits and burdens of different interventions, and learn how to provide grief support in real-time situations.
  - Simulation training should also include training in communication via telehealth.

## **Conclusion**

Family presence in ICU can help bring comfort to the patient. For family members it may also be a chance to spend time and communicate any 'last words' to their loved one, which subsequently may help them in the grieving process. Moreover, good communication around the patient's care and condition is important for the surrogate decision-maker as well as for the health care team to ensure optimal patient care. Simulated interaction with family members (including training in virtual conversations) should be included as part of ICU care training for medical students, thereby enabling them to proactively involve family members in ICU care to optimize patient care.