

Pilot Evaluation of a Family Nursing Knowledge-to-Action Project in Neonatal Care: Preliminary Findings

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Background and Purpose: In neonatal intensive care, various initiatives have focused on making care practices more family-friendly and participatory. Nurses are often those who control parents' access to their preterm or ill infant, which either promotes family involvement or leaves parents feeling disempowered and miserable. Enabling nurses and other health professionals to support families and strengthen their relationships and capacities is thus vital to ensure quality care. Recent family nursing educational and training interventions (FN-ETI) have shown promising results in pediatric and adult acute care. Hence, the purpose of this study is to examine the effects of an interprofessional FN-ETI on neonatal intensive care nurses' and physicians' ability to work with families.

Framework: The Calgary Family Assessment and Intervention Models guide the FN-ETI.

Methods: A mixed methods study was carried out with health professionals who took part in a 8-month FN-ETI. Their attitudes and skills in working with families were measured with the Families' Importance in Nursing Care – Nurses' Attitudes (FINC-AC) and the Family Nursing Practice Scale (FNPS) before, during (completion of education, month 4) and after (8 months) the FN-ETI. Post-implementation focus group interviews were held to learn about health professionals' self-perceived changes in practice and observations of families' experience. Analysis included group comparisons and qualitative content analysis.

Participants: 71 neonatal intensive care nurses and 14 physicians participated in quantitative part of the study, with 57 (67%) and 48 (57%) of participants completing follow-up at four and eight months, respectively. Participants were for the most part women (92%). They were on average 36 years old (SD±11) and held 13 years (SD±11) of professional experience. 14% of participants had previous training in family nursing and care. 17 health professionals (n=4 physicians, n=13 nurses; 82% women; 37±12 years old, 13±12 years of professional experience) participated in four focus group interviews.

Conclusions: While family-centered initiatives in neonatal care have been widely studied, insights into the outcomes and processes of FN-ETI in neonatal care are absent to date. Most evaluations to date included nurses only. This pilot evaluation study, which is part of a larger hospital-based family nursing and care knowledge-to-action project, makes a systematic and local contribution to the internationally evolving knowledge base about implementing family systems nursing und care.