FAMILIES’ OPINIONS REGARDING CARE IN ADULT
INTENSIVE CARE UNITS AT A PUBLIC SECTOR TERTIARY
HOSPITAL IN GAUTENG

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A research report submitted to the
Faculty of Health Sciences, University of the Witwatersrand, Johannesburg
in partial fulfilment of the requirements for the degree
of
Master of Science in Nursing

Johannesburg, 2011
DECLARATION

I, Gaye Rodrigues, declare that this research report is my own work. It is being submitted for the degree of Master of Science (Nursing) to the University of the Witwatersrand, Johannesburg. It has not been submitted before for any degree or examination at this or any other university.

Signature …………………………………………………

…………………………………day of ………………. 2011

Protocol Number M10421
DEDICATION

This study is dedicated to the families of patients in ICU. Whose endurance, strength, belief, hope and love have been a source of inspiration and upliftment.
ACKNOWLEDGEMENTS

I thank God for his presence in my life

With sincere gratitude I would like to thank the following people who have contributed towards the completion of this research report:

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To my friends, for their heartening inspiration in challenging moments.

To the families who participated in this study, for their trust in me without whom this study would not have been possible.
ABSTRACT

The purpose of this study was to describe family members’ opinions regarding the quality of care and decision-making in the adult intensive care units. A quantitative descriptive research design was utilized to meet the study objectives. Structured interviews were conducted using the FS-ICU (24) questionnaire with participants (family members, n=100) drawn from three intensive care units. Descriptive and comparative statistics were used to analyse the data.

Satisfaction with care was rated by family members’ as higher than their satisfaction with decision-making. Overall 91.0% (n=91) of family members’ were mostly satisfied with the care provided. Of the 24 items the management of patient symptoms was the most highly rated items. The least satisfied item related to the waiting room, which was rated as 93.0% (n=93) dissatisfactory. Frequency of communication, completeness of information, feeling excluded and unsupported during decision-making and the rigid visiting hours were areas identified for improvement in the ICU. These findings suggest that deficiencies exist in meeting family’ needs.

Based on the research findings, it can be concluded that results of this study have supported the existing evidence in literature from previous studies on family satisfaction with care and decision-making in the ICU.

Recommendations for nursing practice, education, research and institution are proposed.
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