A team from Johns Hopkins University has developed the “ICU-RESPECT” index to evaluate patient and family experiences of respect in the intensive care unit (ICU). The questionnaire was administered to patients and families in 5 ICUs, and showed high reliability and concurrent validity in ICU patients and families. The researchers describe it as a brief and simple instrument that specifically describes and quantifies the nature of respectful treatment in ICUs.

Gail Geller, Berman Institute of Bioethics, Johns Hopkins University, Baltimore, USA and colleagues developed a 21-item questionnaire following interviews with ICU patients and families. Their previous research has identified 12 broad themes that show what it means to be treated with respect. These include clinicians’ use of greetings and introductions, their demeanour/bedside manner, how well they listen and share information, attention to body/modesty/appearance, honouring patients’ preferences and choices, and responsiveness to patients’ needs and requests. ICU-RESPECT covers the thematic categories of introductions, courtesy, understanding, responsiveness, engagement, selfhood, privacy, equal, comfort and treated as human.

See Also: Don’t Forget to Ask! The Patient and Relative Perspective

Fifty-seven self-reported questionnaires were completed. Factor analysis resulted in a unidimensional scale consisting of 10 items with an α of .85 and an Eigen value of 11.3. Factor loadings ranged from 0.54 to 0.84, and item-test correlations ranged from 0.47 to 0.71. The mean total score was 7.25 out of a maximum of 10. Scores were lower for surgical than medical or disease-specific ICUs.

The researchers recommend that the index is validated in other ICU settings, assessed for its predictive validity and evaluated for different ways to maximise the response rate. They suggest that the index “could identify particular behaviours or ICUs that would benefit from interventions to enhance respectful treatment.”

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