

Designing Family-Centered Aids for the ICU

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Having a family member in the ICU can be terrifying.

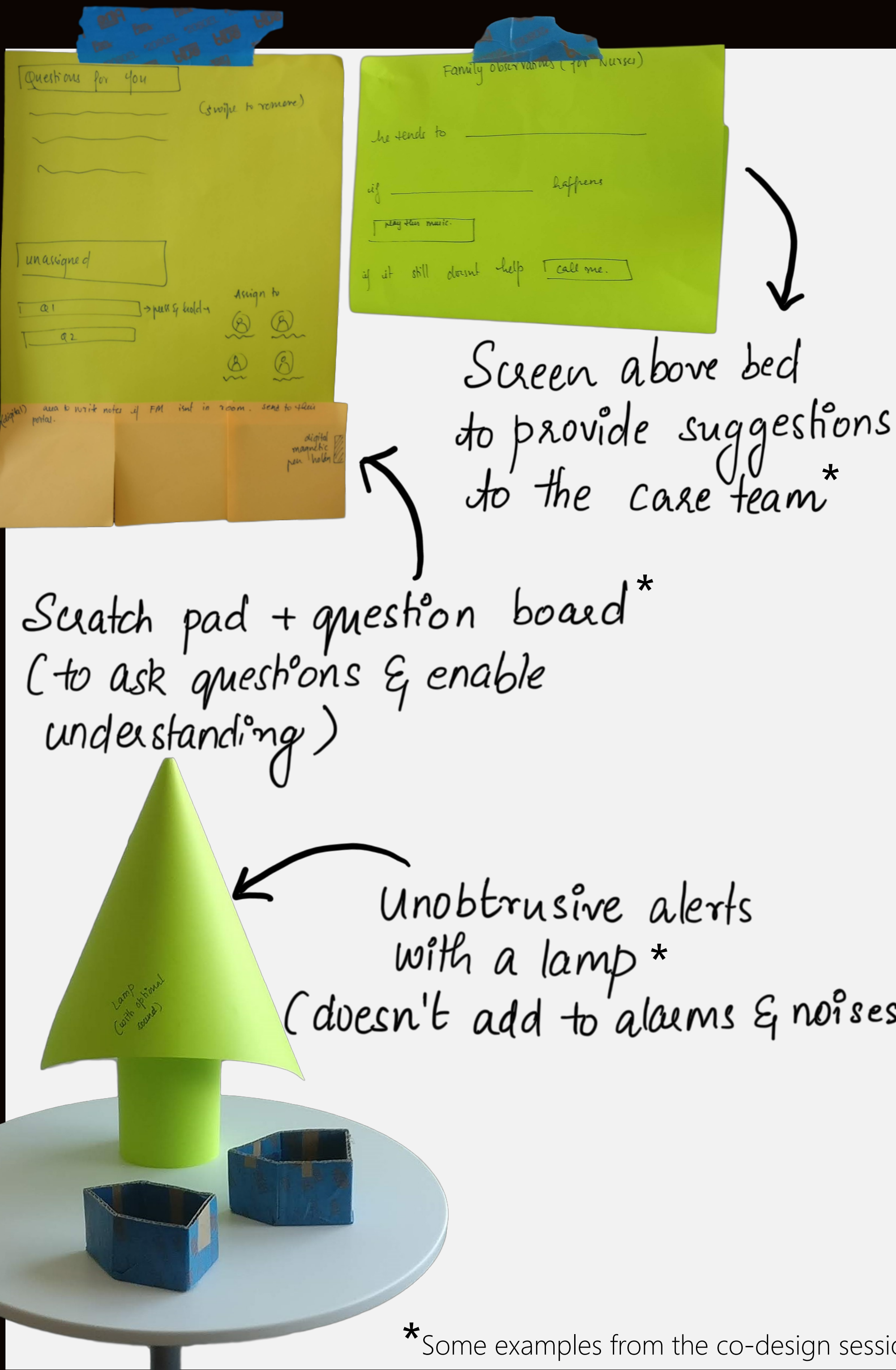
- Complex and overwhelming environment to navigate.
- Need to make difficult medical decisions.
- Might experience anxiety, depression, PTSD, and isolation.
- Heavy workload and a lack of time makes it hard for the care team to provide support.

How can we facilitate family member support in the ICU without adding additional burdens on the care team?

Interviews → Current Aids & Challenges

Verbal Communication	Tablet	Whiteboards	ICU diaries & care pages
Most information and support is provided through face-to-face communications or phone calls.	Tablet in the rooms can show patient records and lab results.	Nurses write down care plan goals and contact information.	Mediums to write about their experience and share with family and friends.
<ul style="list-style-type: none">• Personal interaction styles vary.• Hard for care team to have the time.• Information can be overwhelming and easily forgotten.	<ul style="list-style-type: none">• Hard to understand information without help.• Easy for family members to misinterpret information.	<ul style="list-style-type: none">• Nurses change often.• It is not always updated.• Information is often incomplete.	<ul style="list-style-type: none">• Most family members were unaware of this and no one used it.

Co-Design Session → Paper prototypes & Insights



Preferred Characteristics of Family-Centered Aids

- Alerts that don't demand immediate attention.
- Facilitate asynchronous communication with the right care team member.
- Aid sensemaking by encouraging reflection and providing visual take-aways.
- Allow for personal observations and suggestions for the care team.

What's next?

With an initial direction for how technology could better engage family members throughout their stay in the ICU, we plan on continuing to design and deploy more comprehensive family-centered aids and evaluate their performance in the ICU.

*Some examples from the co-design session