Developing family – cardiology - nursing in Denmark

White Rose collaboration
University of Leeds 2016
50 years birthday celebration

12 September 2016
Strategy
Heart Failure Family Trial

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Birte Østergaard
12 September 2016
3 studies:

One RCT pilot study with 61 dyads investigating the effect of family education and family support (autonomy-support) compared to family education on reduced salt intake.

(Dunbar et al 2005)

One case study with 4 couples and a clinical nurse specialist describing respectively the couples and the nurse’s evaluation of using the Calgary-family intervention.

(Duhamel et al 2007)

One RCT where 154 couples were randomized to standard care (n = 71) or psycho-education intervention (n = 84) consisting of 3 modules of nursing counseling, computer-based education and written material in order to support the couples in problem solving skills.

(Ågren et al 2012)
Aim

To study the effect of two methods of treatment for heart failure;

• Conventional treatment with referral to heart failure clinics

• Family Focused Nursing as supplement to conventional treatment of outpatients in heart failure clinics.
Methods, design and settings

Randomized multicenter trial at three Danish heart failure clinics located at:

- OUH – Odense University Hospital
- Vejle Hospital
- Copenhagen University Hospital, Bispebjerg and Frederiksberg
Outcome measurements

Primary outcomes
• Health Related Quality of Life at 3 months, 6 months and 1 year follow-up

Secondary outcomes
• Self-care behavior (self-care, family resources, self-efficacy and depression)
• Time to occurrence of readmission
• Time to occurrence of readmission for heart failure
• Time to occurrence of death
In total 468 consecutively enrolled patients was randomly allocated to two groups by external web-based randomization and stratified for affiliated center and NYHA-classification.

**Inclusion criteria:**
- Confirmation of the HF diagnosis according to the Framingham criteria
- Left ventricular ejection fraction (LVEF) ≤ 40%
- Referred to follow-up nursing care in a HF clinic
- New York Heart Association (NYHA) classification II-IV symptoms
- Signed informed consent

**Exclusion criteria**
- Patients who did not understand and speak Danish
- Patients in the terminal stage of other serious diseases with a life expectancy of less than six months
- Patients not able to give informed consent
Family intervention

CFAM – Calgary Family Assessment Model
CFIM – Calgary Family Intervention Model
Education of nurses

- Health promoting conversations, Linnéuniversity, Kalmar, Sweden
- Externship - Workshop Advanced Family Nursing
- September 23-26, 2013, University of Southern Denmark

CORE CONTENT

- Training and supervision in using a genogram to assess the structure of the family
- Learning how to invite the family to tell their illness narrative
- Practicing skills in enhancing family strengths by using circular questioning and offering commendations to the family
Two sub-studies

Self-assessed family functioning, family health and social support – a cross sectional survey study.

Living with heart failure: Participants’ experiences with Family Focused Nursing.

Expected Articles

- Instrument validation
- Patients’ perspective
- Relatives’ perspective

- Nurse’s experiences
- Patient’s experiences
- Ethical considerations interviewing families
Quality of life, self care behavior, self-efficacy, depression, readmission and mortality:

Final data will be collected by January 2017

- 5 oral presentations and 1 poster at international conferences
- Abstract regarding preliminary analysis submitted for IFNA 2017 Conference
- 1st article under preparation

Self care

- 1 article published
Current status

OUTCOMES

Family functioning, family health and social support
- 1 poster presentation at an international conference
- 1st article regarding validation about to be resubmitted
Current status

Participants’ experiences
- 6 oral presentations and 3 posters at national and international conferences
- 1 thesis and 1 article published
- 2 articles resubmitted

Nurses’ experienced:
- A distinct, closer, and more constructive relationship with the patients and their families
- FNCT increased family bonding and strengthened family relationships.
- FNCT to be feasible interventions in the routine care provided in heart failure outpatient clinics.
Guest lectures

2010: Professor Britt-Inger Saveman, Umeå University, Sweden
2012: Professor Lorraine Wright, University of Calgary, Canada
2013: Professor Marcia Van Riper, University of North Carolina, USA
2014: Professor, Erla Kolbrun Svavarsdottir, University of Iceland

• Annual masterclasses for members of the Danish association

Honorary Professor, Romy Mahrer-Imhof
Implementation at all three heart failure clinics

• Planned as a quality improvement project
• Two courses with 28 participants have been conducted

Further ongoing implementation
• Medical ward, Svendborg Hospital
• University College Lillebaelt, Vejle
• Copenhagen University Hospital, Hvidovre
Thanks for your attention