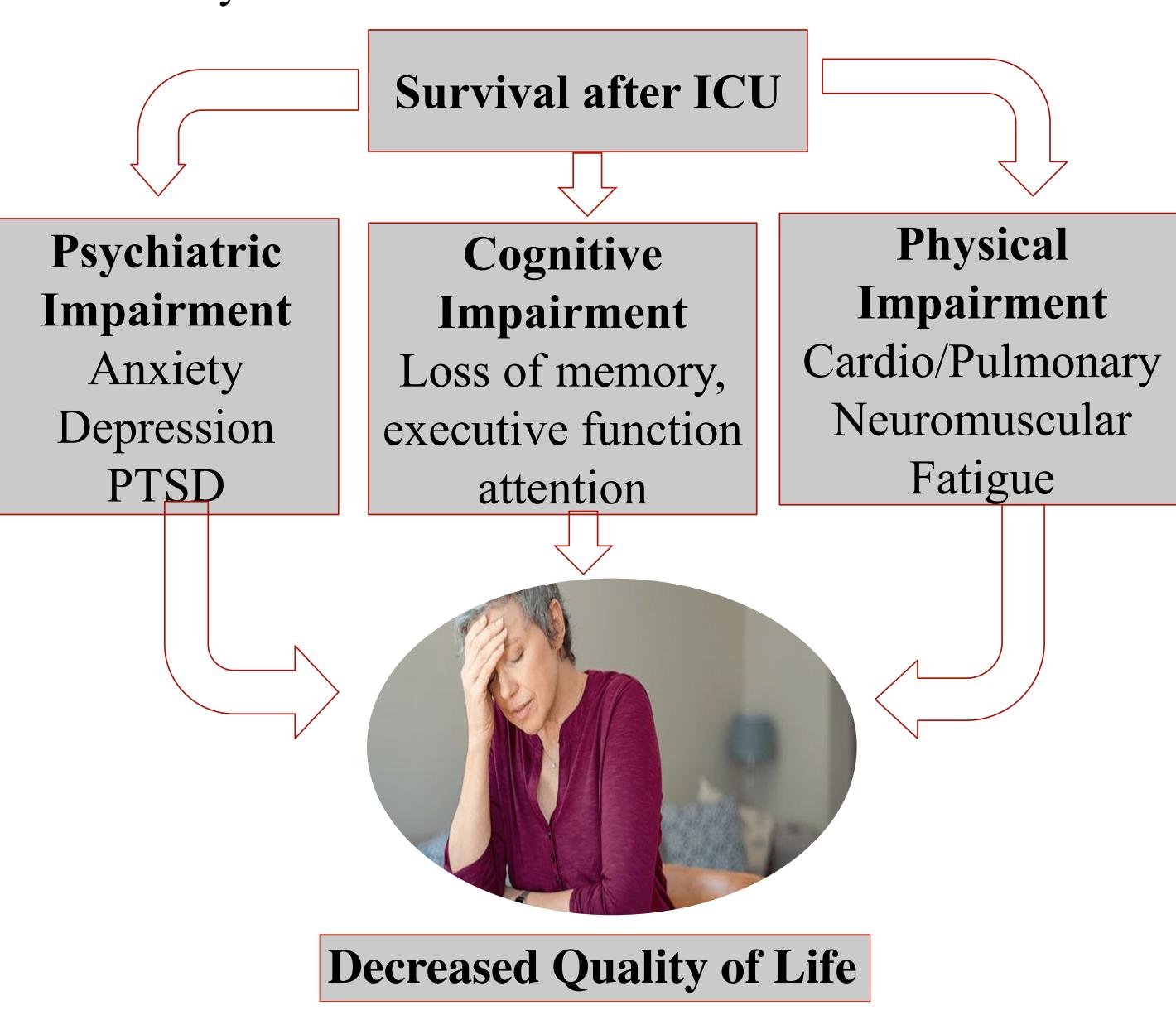
# Using the Iowa Model of Evidence Based Practice to Guide a Pilot Post Intensive Care Syndrome (PICS) Education Project for Community Healthcare Providers

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## Step 1: Identify Trigger(s)

- Post Intensive Care Syndrome (PICS) is a significant clinical issue for ICU survivors and their families.
- This problem is projected to increase substantially due to many thousands of recent COVID-19 ICU survivors.



# Step 2: Consider Organizational Priorities

- Organization values high quality, evidenced-based healthcare that promotes optimal patient and family health outcomes after ICU discharge.
- Leaders approved creation of PICS work group with designated time to work on PICS-related initiatives.

# Step 3: Form a Team of Stakeholders

PICS Stakeholders Committee formed:

- Nurses (BS, MS, DNP) Physicians
- Respiratory therapists APPs
- Palliative care providers Physical therapists

## Step 4: Conduct Lit Search, Appraisal, & Synthesis

- ICU follow-up care to mitigate PICS is necessary
- There is a lack of knowledge regarding the recognition and treatment of PICS among non-critical care clinicians; consequently, PICS symptoms that develop as a result of patients' ICU stay often go unrecognized, and if they are identified, are often not properly evaluated or treated.

## PICO Question:

Does an online education module increase PICS knowledge and positively influence behavioral intent to integrate PICS assessment into clinical practice in community health care providers compared to no education?

## Step 5: Pilot the Project

• Pilot sample of community HCPs employed by a health system in the Midwest (N = 129) invited to complete pre-education survey developed based on TPB

# Theory of Planned Behavior(TPB) Behavioral beliefs Normative beliefs Control beliefs Behavior Behavior

- Survey results used to inform development of a brief online PICS education module targeted toward community HCPs.
- Participants completed post-survey after viewing PICS module.
- Chi square and 2-tailed t test statistics were applied to compare results between the pre-education group (n = 24) and the posteducation group (n = 32).

# Step 6: Evaluate and Disseminate

## Knowledge PICS Survey Tool

1. I am knowledgeable about post intensive care syndrome (PICS).

### Behavioral Beliefs

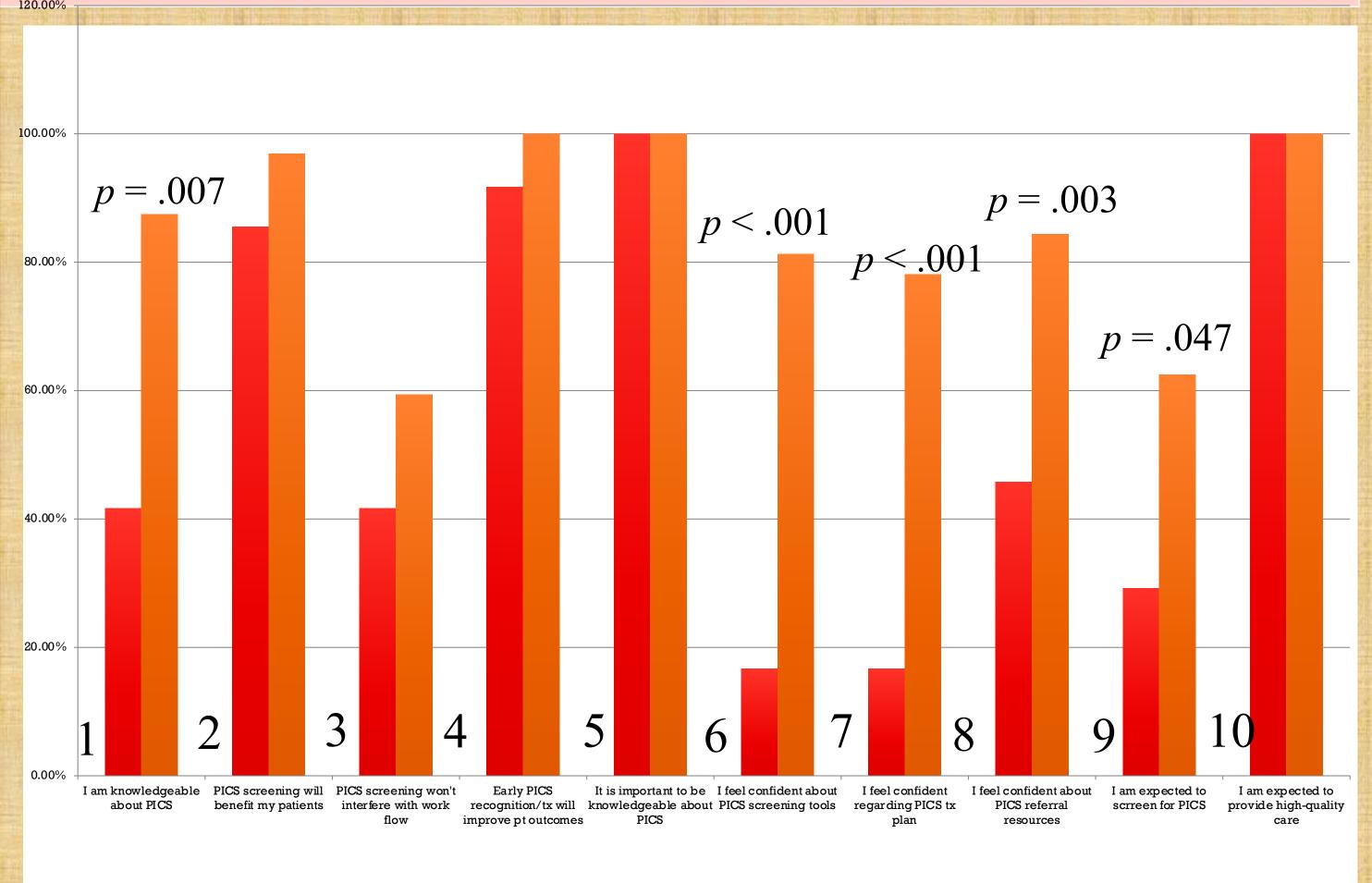
- 2. Screening and assessment for PICS-related symptoms will benefit my patients who have been discharged from the ICU.
- 3. Performing screening and assessment for PICS does not/will not interfere with my workflow.
- 4. Early recognition of PICS-related symptoms promotes timely treatment and improved patient health outcomes.
- 5. It is important to be knowledgeable related to PICS identification and treatment.

### **Control Beliefs**

- 6. I feel confident about available screening tools to identify PICS symptoms in my patients.
- 7. I feel confident regarding the treatment plan for my patients who exhibit PICS-related symptoms.
- 8. I feel confident I can refer patients who exhibit PICS symptoms to appropriate specialty health care resources in the community.

#### **Normative Beliefs**

- 9. My employer and colleagues expect me to screen for and assess my patients who have been discharged from the ICU for PICS.
- 10.My employer and colleagues expect me to provide high quality care for patients I care for who have been discharged from the ICU.



- **Results**: A brief, online PICS education module is an efficient and cost-effective way to improve PICS knowledge among community HCPs and may motivate them to integrate PICS assessment into their practice, resulting in improved ICU follow-up care and early symptom recognition and referral to mitigate the impact of PICS in ICU survivors.
- Project findings were disseminated to organizational leaders, with plans to make the online PICS education module available to a wider audience of community HCPs in the service region. Further study is needed to determine if findings can be generalized.