Patient and family resources at St Paul’s Hospital (SPH) Intensive Care Unit (ICU) were limited to a paper-based handbook that was revised in 2017 to incorporate the principles of Patient and Family Centered Care (PFCC). Because this handbook was only available from within the ICU, family members unable to attend the bedside lacked access to information directed towards meeting their needs. The purpose of this project was to redesign SPH ICU website to improve accessibility and efficiency in obtaining information about care in the ICU.

In our capacity as nursing students without ICU experience, we collaborated with patient and family partners and the multidisciplinary team to incorporate PFCC and current clinical practices/policies into the website’s content. The website design is based on evidence-informed strategies that promote ease of use and enhance readability. Content is organized into layers using links that redirect users to information pertaining to their question or interest. Within each layer, the content is presented in small segments to avoid overwhelming the patient or family member. Throughout several iterations of the website, we were consistently challenged with converting medical jargon and authoritative overtones into language that would foster mutually beneficial partnerships between patients, their families, and the healthcare team.

Although currently in the final stages of editing, the development of this website has provided insight to healthcare providers on the use of an online medium as a resource allocation tool. The capabilities of the website will enable the delivery of multimedia such as videos, hyperlinks, audio segments and animations that a paper-based handbook inherently cannot accommodate. The incorporation of this media may positively impact information sharing and understanding between patients and healthcare professionals. Further, patients and their family members may access the website as a valuable, interactive resource to aid in navigating the complexities of the ICU setting.
Abstract Summary:
To accommodate patients and families entering the ICU, St. Paul's Hospital has taken the initiative to shift the paradigm of knowledge transmission from print to online multimedia. Incorporation of this online interface has the potential to strengthen partnerships between consumers and healthcare providers while facilitating patient and family centered care.

Content Outline:
**Background**
Intensive Care Unit (ICU) admissions are emotionally distressing for patients and their families, making it difficult to retain information regarding care. Traditional delivery of this material is often through verbalization or pamphlets. However, there is increasing interest in multimedia to enhance understanding, information retention, and improve patient satisfaction.

**Problem**
In 2017, Langara students revised St. Paul’s hospital ICU’s “For Patients and Families” handbook to integrate patient and family input. With large amounts of content and a time-consuming search for answers, an efficient proxy was required. Conversely, the hospital’s convoluted website was not in accordance with the handbook and failed to incorporate patient and family centered care (PFCC).

**Aim**

To design a website through evidence informed strategies, and tailor its content to promote collaboration among patients, families and the healthcare team in a critical care setting.

**Procedure**

- Review of literature on multimedia usage in healthcare, and design principles that promote ease of use and comprehension
- Meetings with the multidisciplinary team and patient family partners (PFP) to assess common questions, needs and values of patients and families in the critical care setting
- Revision of content from existing website and ICU handbook
  - Tailored to the needs of patients and family members
  - Improved readability
- Redesign of website layout using evidenced informed strategies
  - Simple and minimal: The 5 second rule
  - Content embedment through layering and hyperlinks
    - “Bite, Snack, Meal”
  - Editing by PFP and the multidisciplinary team through conjoint and collaborative meetings

**Outcomes**

- Increased awareness among the multidisciplinary team on multimedia usage for knowledge transmission and resource allocation
- Provided a sustainable platform for updates on information in the ICU
- Implementation of PFCC into the development of an online medium
- Facilitated mutually beneficial partnerships between patients, families and the healthcare team.

**Implications**

- Aids patients and families in navigating the complexities of the critical care setting
- Immediate retrieval of information about care in the ICU, without the intervention of the healthcare team
- Improved information accessibility for family members unable to attend the bedside
- Communication of knowledge that caters to different learning styles
  - Videos, audio segments, animations, and print