

Clinical Network™

Provincial ICU Delirium

Innovation Learning Collaborative Glossary of Terms

- Innovation Collaborative: An opportunity for individual unit teams to come together and analyze performance, share knowledge and develop improvement strategies based in evidence. For the CC-SCN Provincial Delirium Initiative, 22 units will come together and collaborate on strategies to improve delirium care.
- Adult Steering Committee: A group of provincial critical care people within Alberta Health Services. This
 group includes critical care AHS staff and members from the Strategic Clinical Network.
- Framework: An essential supporting structure created to guide and support decision making by provincial teams. This document outlines provincially agreed-upon recommendations, clinical practice expectations, targets, and key performance indicators (KPIs) and how each of these interrelate. This document has been developed and vetted by the provincial Delirium Initiative Steering Committee, and is iterative in nature (will evolve as this initiative evolves).
- **Provincial Recommendation**: A statement put forward from the Provincial Steering Committee. These statements are supported by current evidence and literature, the primary supporting document being the Society of Critical Care Medicine's Pain, Agitation, and Delirium Guidelines (2013).
- Clinical Practice Expectation: A detailed objective outlining the standard achievements to support the current evidence-based recommendation.
- **Provincial Target**: The "gold standard" to which units participating in this initiative should aim.
- Key Performance Indicator: A measurement for each recommendation and practice expectation that allows for tracking quality improvement. These "KPIs" are what are placed under each Quality Dimension on the scorecard as "metrics"
- Metric: Another word for Key Performance Indicator
- eCritical: An AHS single system that provides a single access to patient data. This includes
 MetaVision the program in which patient data is entered at the bedside, and TRACER the
 warehouse for information. For AHS employees, the eCritical/TRACER reporting page is found on
 InSite.
- Scorecard: A tool used within the Innovation Collaborative to measure intervals of quality improvement. In order for the scorecard to be completed, units must collect baseline data and subsequent data at least every month to track performance. More information about how to use the scorecard can be found here: https://albertaboneandjoint.com/webinar-balanced-scorecards-101/ (courtesy of Bone and Joint Health Strategic Clinical Network)
- Quality Indicator: a measure that enables the user to quantify the quality of care and services provided (see National Quality Measures http://qualitymeasures.ahrq.gov/tutorial/index.aspx for more info on measurement)
- Quality Dimensions
 - ✓ Accessibility: Health services are obtained in the most suitable setting in a reasonable time and distance
 - ✓ Acceptability: Health services are respectful and responsive to user needs, preferences, and expectations.
 - ✓ Appropriateness: Health services are relevant to user needs and are based on accepted or evidence-based practice
 - ✓ Effectiveness: Health services are provided based on scientific knowledge to achieve desired outcomes
 - ✓ Efficiency: Resources are optimally used to achieve desired outcomes



Critical Care Strategic Clinical Network™

- ✓ Safety: Mitigate risks to avoid unintended or harmful results
- **Action Plan**: A beginning "action plan" will be required of each team what will the team do as soon as they get back to their site?
 - Must plan HOW they will collect the data required to demonstrate change on the chosen indicator (this might be the first step in the action plan)
- P.D.S.A. Cycle: The PDSA cycle is shorthand for testing a change by developing a plan to test the change (PLAN), carrying out the test (DO), observing and learning from the consequences (STUDY), and determining what modifications should be made to the test (ACT). Each action item could generate a PDSA cycle to see whether the action had the desired benefit. If a PDSA cycle is not successful (if your action did not have the desired results) it does not mean you have failed. It may show you whether an idea is worth adopting or abandoning.
- **Report Out**: An opportunity to publically present open and honest feedback about unit delirium work. Formatted to provide quick "bulleted" communication on challenges, successes, and "bragging points" for each unit's work.