Alberta Health Services

AHS SCN CC Delirium Unit Gap Analysis

November 23RD, 2016

Site:

**Unit Gap Analysis – ABCDE Bundle**

This Unit Gap Analysis is a tool designed to help determine what elements of the ABCDE bundle may already be in place in your unit. The goal here is to identify areas where your unit is strong, as well as areas where improvement is needed. Once the gaps are identified, it is important to select and prioritize areas for improvement rather than tackling everything at once.

| Communication and Collaboration | **Yes / Always** | **Sometimes** | **No / Never** | Comments |
| --- | --- | --- | --- | --- |
| Every team member on our unit embraces true collaboration as an ongoing process and invests in its development to ensure a sustained culture of collaboration. |  |  |  |  |
| Every team member contributes to the achievement of common unit goals. |  |  |  |  |
| All team members are informed and knowledgeable about delirium performance data for our unit. |  |  |  |  |

| Sedation Awakening Trial / Spontaneous Breathing Trial / Coordination and Choice of Sedation | **Yes / Always** | **Sometimes** | **No / Never** | Comments |
| --- | --- | --- | --- | --- |
| Our unit has a sedation protocol in place. |  |  |  |  |
| We perform a sedation assessment on patients using a validated tool Q4hr and prn at minimum. |  |  |  |  |
| We currently perform Spontaneous Awakening Trials (SATs, aka “sedation vacations”) q24hr on all patients receiving sedation, when appropriate. |  |  |  |  |
| We have a standardized protocol for performing SATs. |  |  |  |  |
| We have a standardized protocol for performing SBTs. |  |  |  |  |
| We currently perform SBTs on all ventilated patients when appropriate. |  |  |  |  |
| SBTs and SATs are discussed on all ventilated patients at daily rounds. |  |  |  |  |

| Pain Assessment and Management | **Yes / Always** | Sometimes | **No / Never** | Comments |
| --- | --- | --- | --- | --- |
| We use a validated tool to assess pain (i.e. CPOT, NRS, BPS) minimum of q4hr and PRN. |  |  |  |  |
| Our unit has a pain management guideline. |  |  |  |  |
| Pain management is discussed during daily rounds for all patients. |  |  |  |  |
| Pain Management is consistently considered as first line treatment before sedation initiation. |  |  |  |  |
| Pain management is always considered prior to any procedure or and/or intervention (i.e. chest tube insertion, line insertion) |  |  |  |  |

| **Delirium Assessment and Management** | **Yes / Always** | **Sometimes** | **No / Never** | **Comments** |
| --- | --- | --- | --- | --- |
| All patients are assessed daily for the presence of delirium q12hr and prn. |  |  |  |  |
| We use a validated tool to assess for the presence of delirium (CAM-ICU, ICDSC, pCAM-ICU). |  |  |  |  |
| Our unit has a standardized delirium management protocol. |  |  |  |  |
| Our unit routinely discusses ICDSC score and risk factors of each patient during daily rounds. |  |  |  |  |
| Our unit routinely utilizes sleep promotion strategies with all patients. |  |  |  |  |

| Early Exercise and Progressive Mobility | **Yes / Always** | **Sometimes** | **No / Never** | Comments |
| --- | --- | --- | --- | --- |
| Our unit has a protocol for progressive mobility for ALL patients. |  |  |  |  |
| All patients are appropriately screened for mobility based on ability and acuity. |  |  |  |  |
| Is the default activity order for every patient ‘activity as tolerated’? |  |  |  |  |
| Our unit has the necessary support equipment to safely assist with patients’ progressive mobility (i.e. Portable ventilators, sit-to-stand lifts, chair slings). |  |  |  |  |
| Respiratory therapists and physical therapists are available to assist with implementing early exercise and progressive mobility protocols. |  |  |  |  |
| Patients receive multiple mobility events every day. |  |  |  |  |
| Mobility **progression** is discussed during daily rounds. |  |  |  |  |
| Barriers to mobility are discussed and addressed during daily rounds. |  |  |  |  |

**Clinical Practice Documents**

*List what protocols/policies that you know of are already in place:*

|  |  |  |  |
| --- | --- | --- | --- |
| Protocol/Guideline | Date Established | Current? Y/N | Comments |
| Pain Management |  |  |  |
| Sedation |  |  |  |
| Spontaneous Breathing |  |  |  |
| Delirium Prevention and Management |  |  |  |
| Early Mobility |  |  |  |
|  |  |  |  |