The Alberta Children's Hospital PAD Initiative
Pain, Agitation & Delirium

Critical Care Strategic Clinical Network™

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BACKGROUND

The Beginning of Our PAD Story:

- PICU clinicians recognized a problem with delirium.
- Our baseline issues were similar to other PICUs:
  - Poor adherence to AHS Analgesia & Sedation Guideline
  - Polypharmacy – PAD management changed based on intensivist preference (additive problems)
  - Inconsistent measurement of Pain and Sedation
  - No tool for Delirium monitoring
  - Complexity of multiple ages and stages of development

AIM

- Our aim was to develop a **comprehensive** and **multidisciplinary** program to improve patient comfort, reduce delirium and improve the functional recovery of ACH PICU survivors.
- **Essential components** of the program:
  - Applied to all ages and developmental stages in the PICU
  - Focused on patient comfort with an analgesia first approach
  - Used tools that were evidence-informed, easily applied at the bedside, and easily integrated into our electronic record

MEASUREABLE GOALS

- Within **1 year** of the ACH PAD program implementation, we aimed to:
  - Ensure optimal **patient comfort** through the daily use of objective pain and sedation tools
  - Score **ALL** patients using objective analgesia and sedation scores Q4H and PRN
  - Establish the **incidence of delirium** in the ACH PICU through the use of a daily delirium score
  - Introduce a program of **early mobilization**
  - Improve **non-pharmacologic** treatment of PAD
  - Enhance our **family centred** model of care to include family members in our PAD program

CHANGE IDEAS

PAD Toolbox:

Pain Assessment Tools

FLACC, FACES, VAS

Sedation Assessment Tools

State Behaviour Scale (SBS)

Spontaneous Breathing & Early Extubation

The ACH Extubation Readiness Test

Delirium Assessment Tools

Cornell Assessment of Pediatric Delirium (CAP-D)

Exercise & Early Mobility

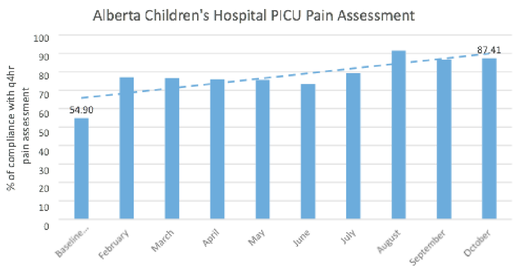
The ACH Mobility Guideline

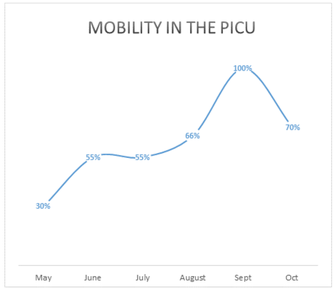
Family Engagement & Involvement

Maintain Family Centred Approach

Develop the ACH Daily Care Map

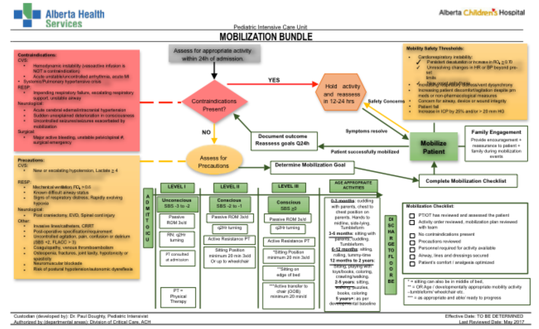
RESULTS

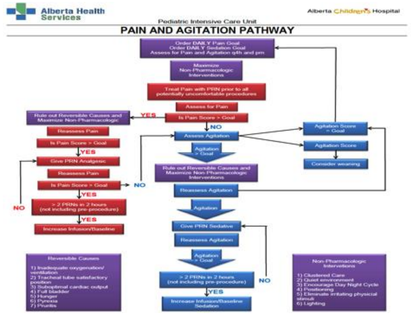




ACH PAD PROGRAM TOOLS

- With few pediatric-specific programs, we had to build, test & implement our own tools. Examples include:





LESSONS LEARNED & NEXT STEPS

- We have achieved a s**ignificant improvement** in patient comfort and mobility in the ACH PICU.
- **Successful program implementation** involved extensive interprofessional planning, research and education.
- **Bedside PAD champions and the willingness of our multi-disciplinary colleagues** from Rehabilitation, SLP and Child Life were key contributors to PAD success.
- **Next steps** include: 1) further analysis of the utilization and effectiveness of PAD program components; 2) a survey to examine current restraint policies in PICUs across Canada to better inform our current restraint policy