Alberta Health Services

Critical Care Strategic Clinical Network[™]



Delirium team members and poster contributors:

BACKGROUND

- 6 bed unit (may go up to 7 beds if warranted)
- 3 Registered Nurses on both Days and Nights; 1 part-time Unit Clerk during Days; 1 Attending Physician on-call (not in facility 24/7)
- Allied Health (ie. RT, PT, OT, Pharm, etc) not unit specific
- Other Duties: Rapid Response Team, Telemetry monitoring, Code **Team Response**

AIM

- Increase Physiotherapy presence on unit to improve patient mobility
- Delirium Bundle your aim supports:
- **E** Early mobility and exercise

MEASUREABLE GOALS

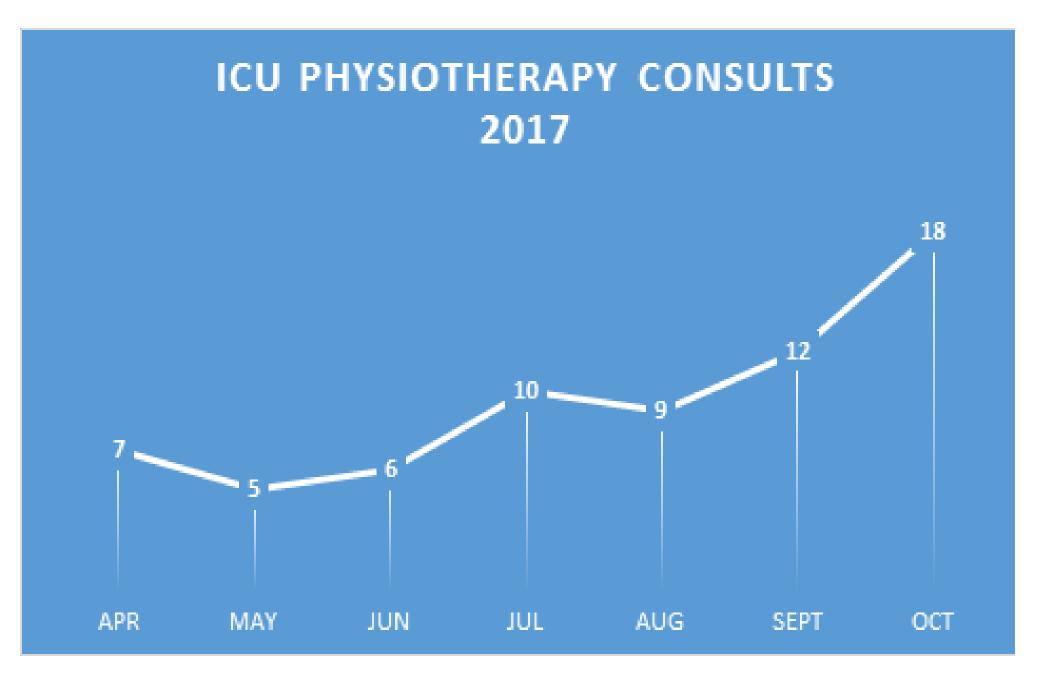
• Increase patient Physiotherapy consults by 25%

Northern Lights **Regional Health Centre ICU**

CHANGE IDEAS

- Displayed signs and reminders on unit regarding PT consults
- Started an Interdisciplinary Bullet Rounds, Physiotherapy is present ٠ and we discuss mobility for each patient
- Automatic Physiotherapy consult on our new ICU Admission Orders

RESULIS



LESSONS LEARNED

- Consistent reminders are key to promote culture change.
- Physician availability to participate in Bullet Rounds is challenging (due to their varying schedules).
- Asking staff to provide feedback and suggestions promotes their involvement and acceptance of the changes.
- 0900 Bullet Rounds is difficult for RNs (mornings are usually quite busy).

NEXT STEPS

- Implement our new Critical Care Admission Orders.
- Start Bullet Rounds at 1400 (try for 2 weeks and re-evaluate).
- Continue to encourage all disciplines to attend Bullet Rounds.