

Red Deer Regional Hospital Center ICU/CCU

THE PAST

Previously, barriers to mobilization included:

- Sedation/analgesic concerns (60%)
- Equipment (20%)
- Patient acuity (70%)
- Staffing (50%)
- Physician direction regarding mobilization or lack of mobilization algorithm (20%)
- Knowledge regarding mobility's importance in delirium prevention (30%)

Nurses state that prior to September 2016, **80%** patients were mobilized less than 3 times in 24 hours.

OUR UNIT DELIRIUM TEAM

THE PRESENT

Overall RDRHC Delirium Prevention Strategies:

- Sedation and analgesic protocol development and roll out
- Mobility education and discussion during multidisciplinary rounds
- Sound reduction in the unit to assist in maintaining day/night cycles (sound ear)
- White board roll out
- Early identification and treatment of delirium

100% of nurses state they speak about mobilization during multidisciplinary rounds.

60% of nurses state they mobilize their patients 3 or more times in 24hrs.

Current barriers to mobilization include:

- Patient acuity (50%)
- Analgesic/sedation concerns (40%)
- Staffing (70%)
- Equipment (20%)

THE FUTURE

- Continue with mobilization discussion during multidisciplinary rounds
- Develop new in-room white boards to include daily mobilization
- Continue with “Readiness for Safe Mobilization” algorithm roll out with e-Critical update in June 2018
- Continue with education regarding delirium management and prevention

We commit to de-adopt:

Solely relying on physiotherapy to mobilize our patients

We will adopt: To utilize our present equipment to continue to mobilize our patients