

# Rockyview General Hospital ICU/CCU

Delirium Team Poster Contributors: Melissa Redlich, Christine Filipek, Kelsey Slemko, Coralee Johnson

## THE PAST

- Our RGH ICU/CCU delirium committee “delirium dream team” was established in 2012
- Began assessing for Delirium in 2012 (ICDSC)
- Delirium bundle rolled out zonally in 2013
- Audited and surveyed staff to assess barriers
- Proactively assessed and implemented targeted roll outs based on unit statistics
  - % of patients eligible for “out-of-bed mobility” who were mobilized 3 times in 24 hours in 2016 - 20%
  - Ever Delirium was 40.45% in 2016



- Minding our Gap: Based on our statistics from the first Delirium Collaborative our gap was mobilization.

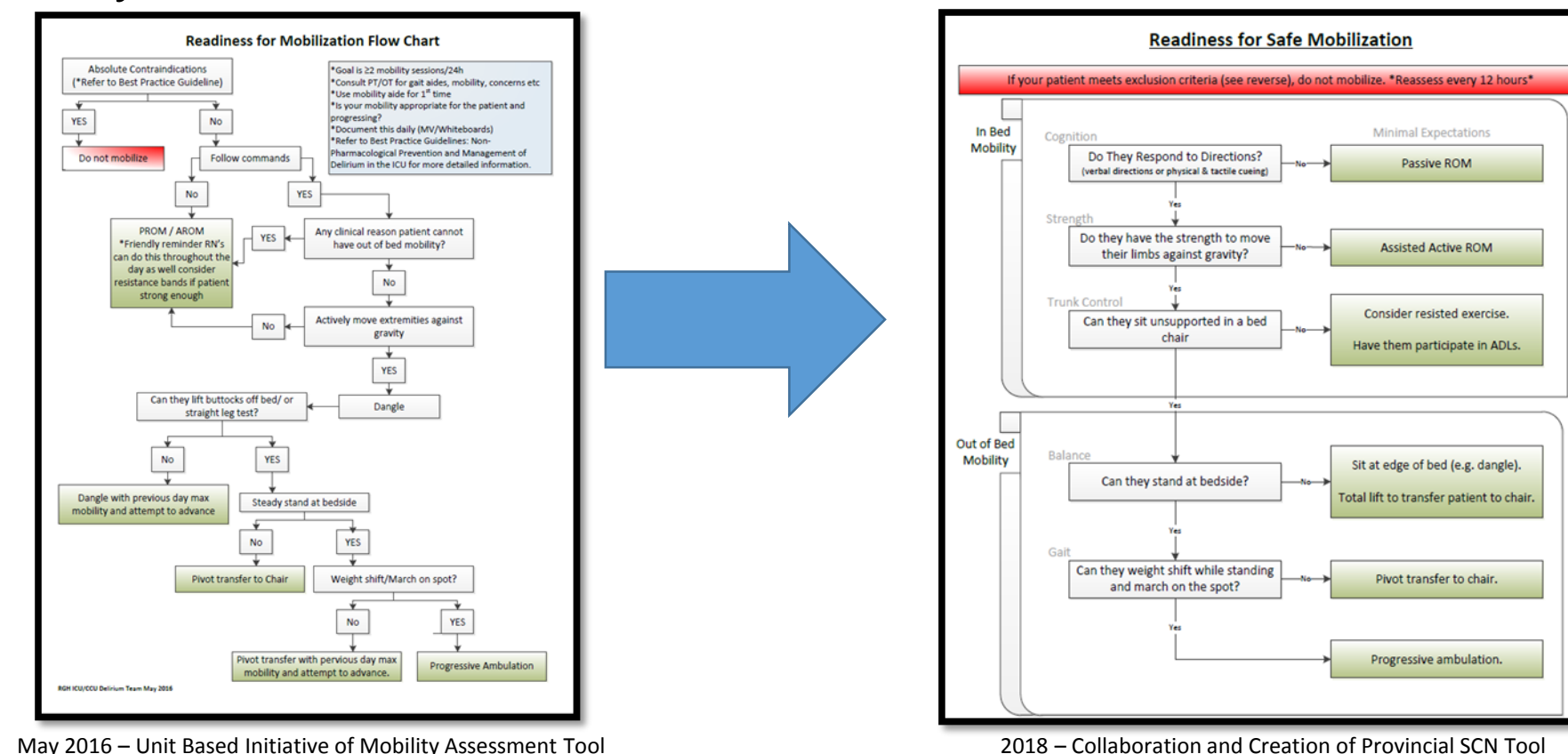
## OUR UNIT DELIRIUM TEAM

**RGH Delirium “Dream Team”:**  
 Melissa Redlich, Christine Filipek,  
 Kelsey Slemko, Coralee Johnson,  
 Lyle Geldof, Matt Ankerman, Monica  
 Nguyen, Tamara Solkalski, Lidel  
 Rivera

## THE PRESENT

**What we changed:**

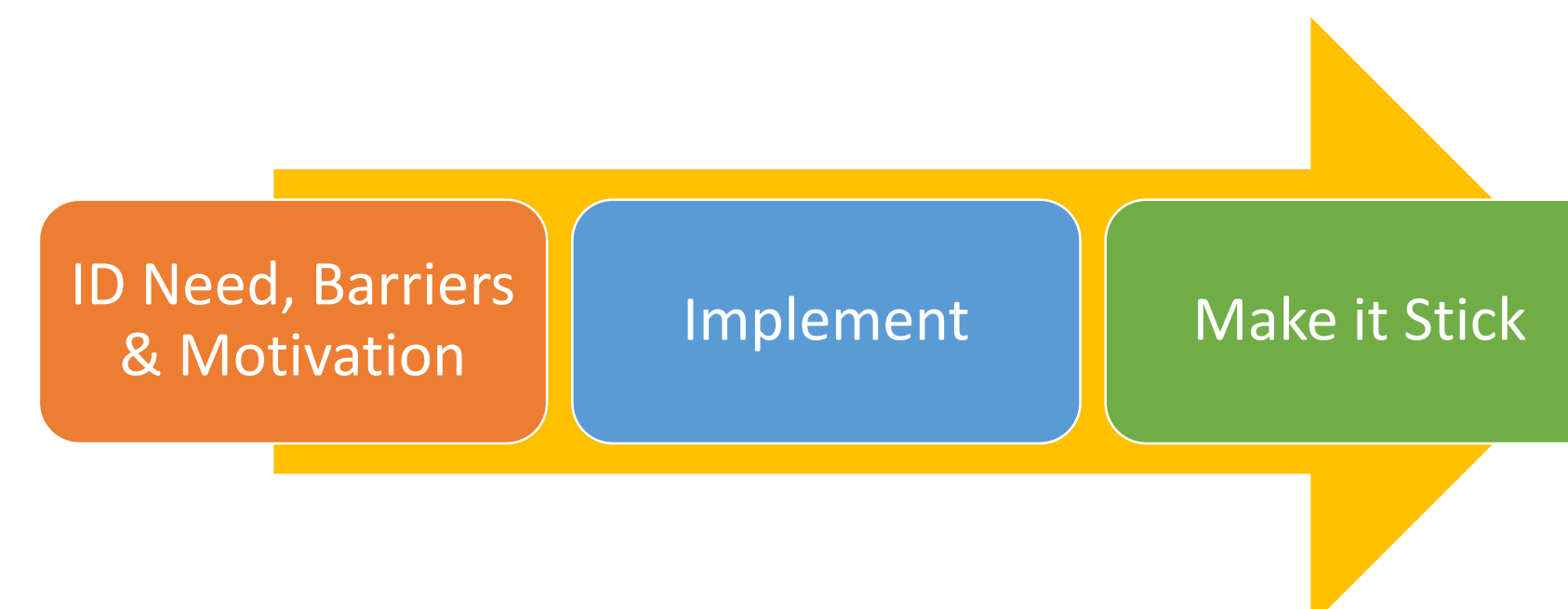
- Mobility Assessment



- Mobility Activities & Brain Games
- Night Routine (March – April 2018)

**Key to Success:** “We don’t just manage delirium, we provide the best patient care”

**Biggest Learning:** Our biggest success is the realization that our patient care team is motivated by optimizing patient care and seeing the impact of these initiatives on patient outcomes. Creating a change process, integrating the multidisciplinary team and understanding that change is always evolving supported our success



**Biggest Challenges:** Change fatigue & over auditing

**Solution:** Changing from a “delirium statistics” focus to optimizing patient care.

## THE FUTURE

**Sustainability:**

- Our Delirium Committee is a well established, reflective committee that will continue to re-evaluate priorities and lead initiatives
- Keep it “fresh” with new members
- Keep the focus on initiatives which add value to patient care

**We commit to de-adopt:** Over-auditing and surveying staff. Keep these tools focused.

**We will adopt:**

- Transparency with KPI’s with staff while focusing on “Best Practice”
- Engaging Families to understanding expectations around “Best Practice”

**Next steps :**

- Continue optimizing sleep promotion
- Continue with mobilization and other delirium bundle strategies

**Team Kudos!!!**

- Ever delirium improved from **40.45 % in 2016 to 18.6% in 2018!**
- 90% of patients assessed for and received 3 mobilizations in 24 hours in Jan 2018. Down to 63% in April – Need to “make it stick”
- From January to April 2018, the percentage of time our team created a 4 hour time interval for sleep improved from 69% to 85%