

Bullet Rounds: Let's set the Clock to Walk in the ICU

Senior Friendly Hospital & Rehab Network Symposium February 25th 2016





"What fits your busy schedule better, exercising one hour a day or being dead 24 hours a day?"



Context











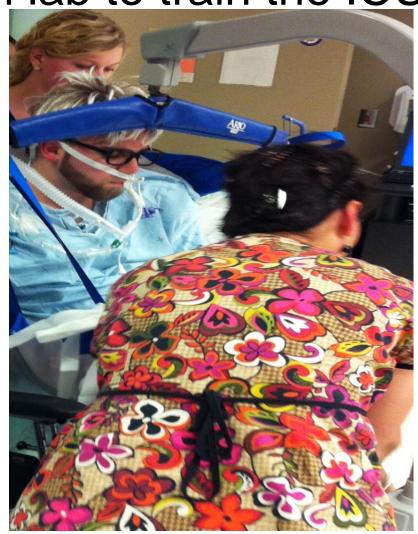


What the ICU team has done well

- Engaged stakeholders early on
- Created a interprofessional and intersectorial working group
- Selected project measures (based on our mobility clock)
- Adopt and implement best practices related to sedation, delirium and pain
- Trained staff using the In-house simulation lab

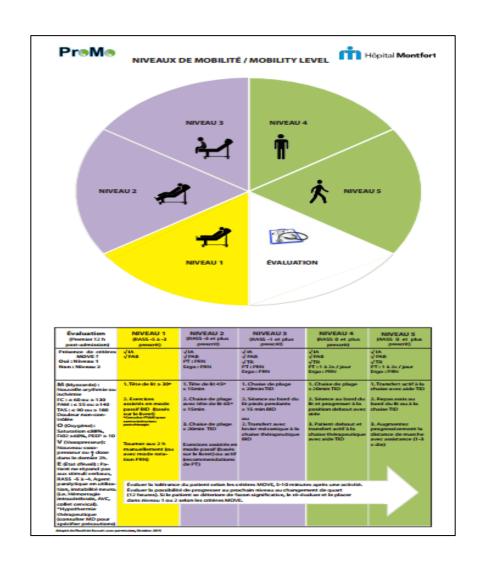


Simulation lab to train the ICU staff





Adapted Tool





Project measures

Increase by January 2016 the percentage of critically ill patients who ambulate while in the ICU to 50 % (baseline 20%).

Process:

a) # of patients admitted to ICU evaluated with the standardized tool (clock) in first 24h

Outcome:

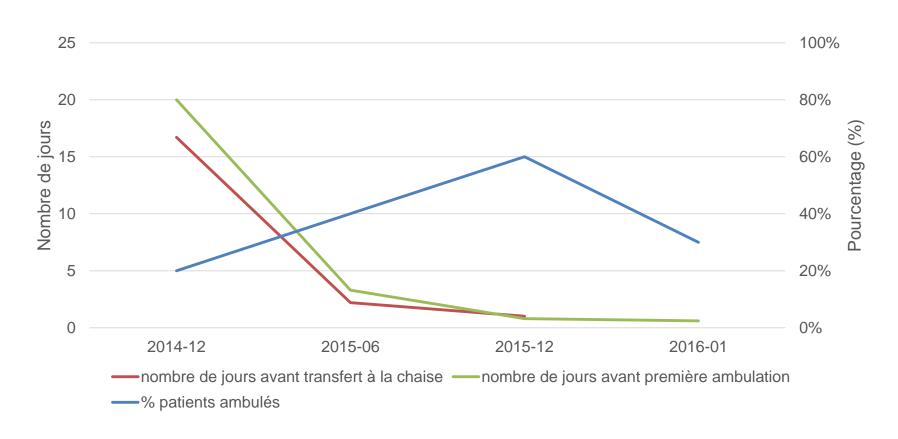
- c) # of days before chair transfer (≥2 on the ICU Mobility Scale)
- d) # of days before ambulation (≥ 5 on the ICU Mobility Scale)
- e) Length of stay in ICU

Balancing:

i) Incidence of falls (# of falls for every 1000 days of presence) in ICU.



Results





Balancing measure

Falls in the ICU

- December 2014: 3 falls
- Decembre 2015: No reported falls in the ICU.



What this really looks like







LESSONS LEARNED

- Importance of communication about the project often and loud
- Patient advisor is a critical part of the team
- Importance of having interprofessional and intersectorial team members
- The imortance of empowering champions to make small but meaningful changes
- Training sessions should be all within a month not to lose momentum
- Make sure the right players are at the table from the beginning



Next steps

- Mandatory mobilization training for new ICU employees (integrated into specific nursing orientation)
- Review sedation practices with physicians
- Discuss sleep hygiene practices in the ICU
- Reinforce mobility documentation practices



NEXT STEPS

- Mandatory mobilization training for new ICU employees (integrated into nursing orientation)
- Review sedation practices
- Discuss sleep hygiene practices in the ICU
- Reinforce mobility documentation practices
- Perform a Gap analysis in ICU regarding pain assessment and treatment



