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| Improving Care for Mechanically Ventilated Patients |
| 1. Serve as a clinical role model for evidence-based practices
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| 1. Ensure physicians are educated about project goals and progress
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| 1. Solicit other physicians to participate
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| 1. Ensure your intensive care unit (ICU) has an overarching protocolized approach to daily ICU patient management including paired spontaneous breathing trials with spontaneous awakening trials and use of the 2013 Pain, Agitation, and Delirium guidelines
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| 1. Ensure your ICU has a protocolized approach for the appropriate use of noninvasive ventilation
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| 1. Ensure your ICU has a protocolized approach for using subglottic secretion drainage endotracheal tubes for patients likely to be intubated more than 72 hours
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| 1. Ensure infection control reports of ventilator-associated event (VAE) rates are reviewed with unit staff monthly; contribute to each event investigation process
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| 1. Partner with hospital leadership to measure and track objective outcomes, including average duration of mechanical ventilation, ICU length of stay, and mortality rates
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| 1. Confirm all physicians receive reports of current data for VAE rates, number of patients who develop a VAE, performance on process measures, and objective outcome measures
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| 1. Review resources available on AHRQ Safety Program for Mechanically Ventilated Patients Web site (www.ahrq.gov/haimvp).
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| 1. Become an active member of Comprehensive Unit-based Safety Program (CUSP) quality improvement (QI) team; meet at least monthly with the team; solicit other physicians to participate
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| 1. Value the input of ALL members of the multidisciplinary CUSP QI team
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| 1. Advocate science of safety training for all current and new physicians
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| 1. Evaluate results of the staff safety survey with CUSP QI team: How can we get patients off the ventilator faster?
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| 1. Meet monthly with senior executive
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| 1. Foster organizational learning and actively participate in the process of learning from defects
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| 1. Develop/adapt a patient-specific daily goals checklist for interdisciplinary rounds
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| 1. Serve as a role model for CUSP efforts and implement tools to improve teamwork and communication
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