NK6-5 ICU EBP Council Minutes Request Literature Review

**ICU Evidence-Based Practice Council** Friday, May 4, 2012 @ 0800

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| **Present:** |  | Roni Ferrenberg, RN, Chair Daniele Lakin, RN, Vice ChairPatricia Morse, RN Muzette Atencio, RNLisa Larson, RN Penny Sharkey, RNRobin Tillman, RN Kate Peterson, RN | Jennifer Robertson, RN, ICU Nurse ManagerDan Harmon, RN Tonya Kurtz, RNOlinda Spitzer, RN, CNS Stefanie Quirk, RN – St. FrancisGuest: Alka Patel, Respiratory Therapist, Rochelle Salmore, RN (EBP Council) |
| **Absent** |  | Highlighted  |
| **Agenda Items** | Content | Leader | **Actions** | **follow-up** |
| Evidence on **Sedation Vacations and Delirium** | Discuss direction for sedation vacations and delirium. Update on findings from ICU Meditech Committee.  | Roni | Discussed where committee should focus. New VAP bundles and sedation bundles will be coming out soon. Both will provide direction on sedation/weaning should be handled. Concern was that committee may be doing duplicate work and should wait until bundles come out with a final draft. In meantime, can begin education process on delirium which moves into the sedation/weaning portion of the new bundles. | All |
| Quantitative and Qualitative research forms | [S:\Penrose ICU Council\EBP Council\Forms\UCH Qualit Study Review.doc](file:///S%3A%5CPenrose%20ICU%20Council%5CEBP%20Council%5CForms%5CUCH%20Qualit%20Study%20Review.doc)[S:\Penrose ICU Council\EBP Council\Forms\UCH Quant Study Review.doc](file:///S%3A%5CPenrose%20ICU%20Council%5CEBP%20Council%5CForms%5CUCH%20Qualit%20Study%20Review.doc)[S:\Penrose ICU Council\EBP Council\Forms\Levels\_of\_Evidence.doc](file:///S%3A%5CPenrose%20ICU%20Council%5CEBP%20Council%5CForms%5CLevels_of_Evidence.doc)[S:\Penrose ICU Council\EBP Council\Forms\Critique\_Form.doc](file:///S%3A%5CPenrose%20ICU%20Council%5CEBP%20Council%5CForms%5CCritique_Form.doc) | Roni | Kate Peterson provided copies of Qualitative and Quantitative research review forms from the University of Colorado Hospital. The forms take you step-by-step through a research document and allow you to dissect your article. A copy of our levels of evidence flowsheet was provided and a critique from – both can be found on the HWEBP site or through the attached hyperlink.  | All will review forms. |
| Begin reviewing articles with input from Rochelle and Alka Patel. Rochelle provided guidance on the levels of evidence. Levels 1 through 4 were discussed – the more types of research within an article, the better the article. Level 1 is required. Descriptions of the levels are on each of the Qualitative and Quantitative forms and the levels of evidence flow sheet. There are 5 phases: assess, link, synthesize, design, implement and evaluate, and then integrate and maintain.Our committee is currently in the synthesize phase. We have assessed a need for change, linked the problem to an intervention and outcomes and are now seeking out the best evidence. Once we have gathered our evidence, we will design the practice change and begin the implementation process. Rochelle reassured our committee that the project we are currently looking at could take a year to integrate. She suggested that we have one project at a time and not divide the committee between projects. The committee discussed that sedation vacations/weaning and delirium are each their own separate problem and issue. Due to the new bundles that will be coming out, our committee will be focusing on delirium. Changes in our delirium practice were introduced last year and it was agreed that our unit is ready to move into additional training and understanding. Rochelle suggested we utilize the Centura medical librarian, Richard Maxwell. Literature search requests can be sent to him and he will provide abstracts. You then select what articles you want and he sends them to you. Richard is an RN and does excellent literature searches. Turnaround time varies from 1 week to 2weeks. **It was agreed that we would submit a research request to Richard on delirium articles. Articles will address the vented and unvented patient in a critical care environment.** Our committee will be focusing on research that addresses delirium in the critical care environment for vented and unvented patients. Research can include all types of medications that affect delirium, assessment tools, as well as mortality rates and patient outcomes. The committee agreed that educating our staff on delirium, why it is important and how to properly assess it will pave the way for the new VAP bundles. We can then move on to sedation/weaning. Once articles are received from Richard, we will post them on the share drive. Each person on the committee will be asked to select an article to evaluate for our June 8th meeting. The evaluation tools provide can be used to decide if the selected article will be useful and relevant for our needs. Please paraphrase your article for presentation at our next meeting. |