

# Examination of the Role of Interprofessional Teamwork in the Implementation and Maintenance of the ABCDE Bundle in Jefferson Intensive Care Units

JCIPE Conference  
October 29, 2016

Dena Lehmann, Pharmacy Student

Shoshana Sicks, EdM

Nethra Ankam, MD

Cara McDaniel, PharmD, BCPS

June Andrews Horowitz, PhD, RN, PMHCNS-BC, FAAN

Beth Colburn, DPT

Elizabeth Speakman, EdD, RN, ANEF, FNAP

Jessica Shank, PT, MPT

Ashley Tarkiainen, Medical Student

# Today's Objectives

- Identify three overall barriers and strategies perceived by ICU staff in the implementation and maintenance of the ABCDE bundle.
- Compare and contrast the barriers and strategies identified by profession.
- Evaluate the role of interprofessional collaboration in the implementation and maintenance of the ABCDE bundle in the ICU setting.

# Purpose

- Assess the role of interprofessional teamwork in Jefferson intensive care units (ICUs)
- Analyze the attitudes and perceptions of Jefferson ICU staff regarding the ABCDE Bundle and interprofessionalism within their teams via a survey

# Background

- ABCDE Bundle rolled out in spring 2014
  - Awakening and Breathing Coordination, Delirium Monitoring and Management, and Early Mobility
- Interprofessional team training workshop held in spring 2014
  - 60 Jefferson ICU interprofessional staff from all units

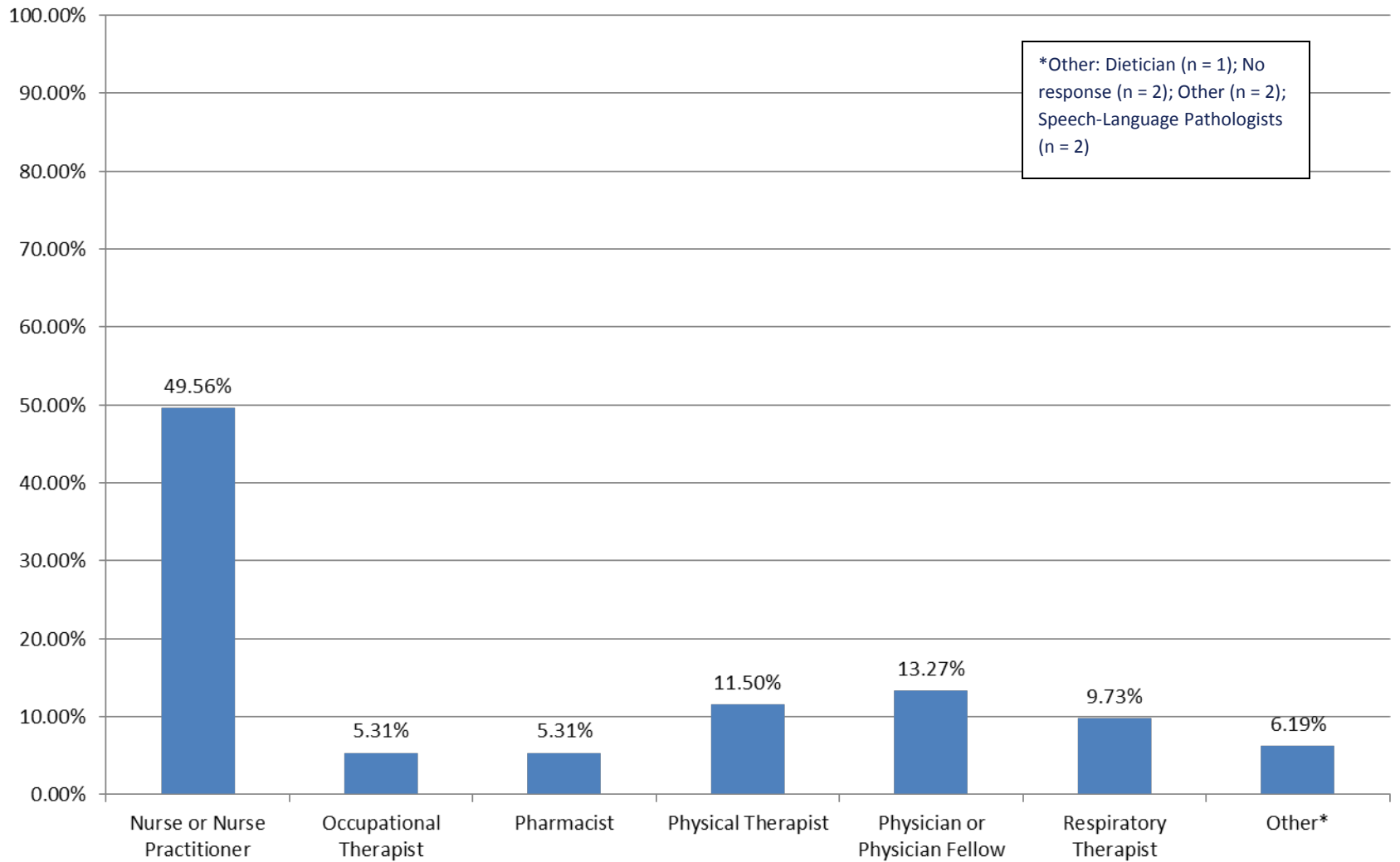
# Survey

- Barriers to and strategies for ABCDE Bundle implementation brainstormed by staff during workshop
- Questions taken directly from the brainstorming session
- Additional questions repeated from pre/post-workshop evaluation

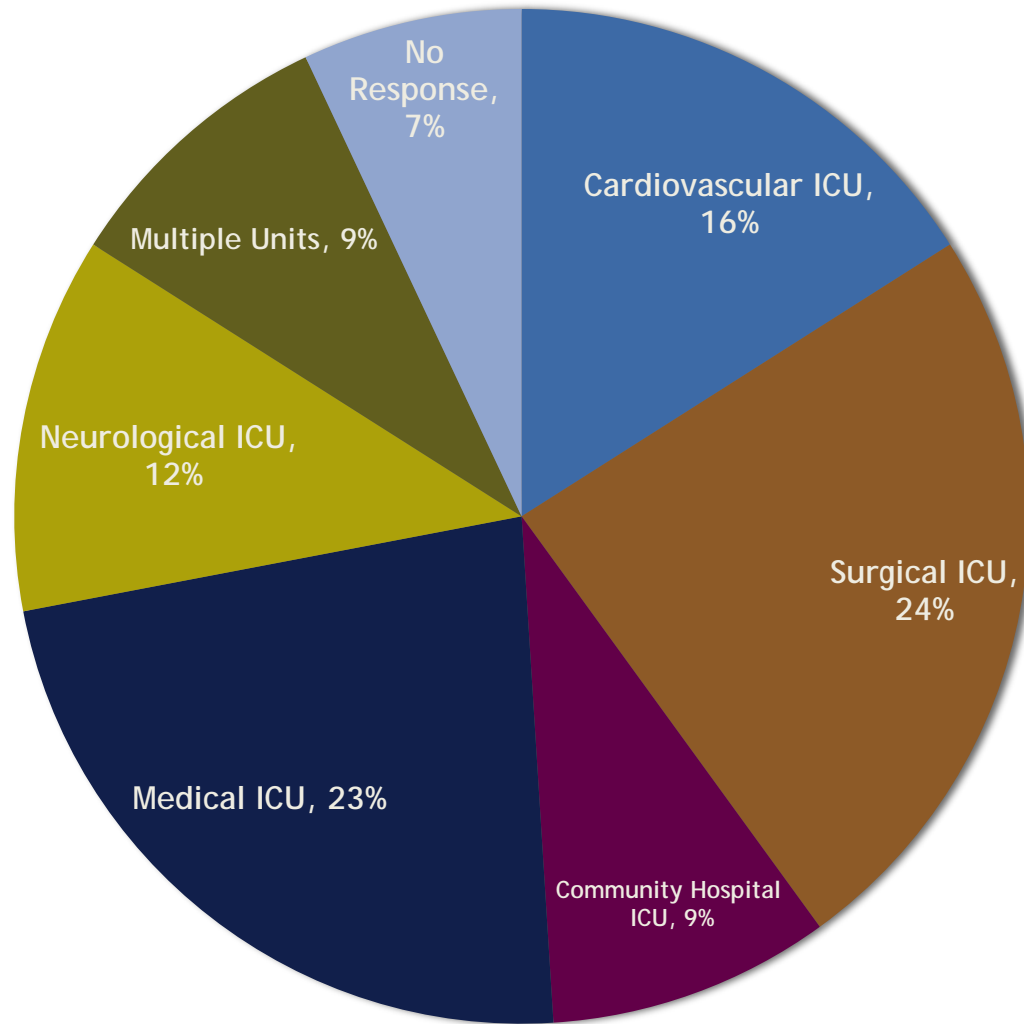
# Survey

- Administered in August 2015 over one month
- Advertised in all ICUs and via targeted emails to professional groups
  - e.g., rehabilitation medicine therapists, respiratory therapists, clinical nurse specialists, attending physician staff in various departments, etc.

## Respondent Demographics (n = 113)

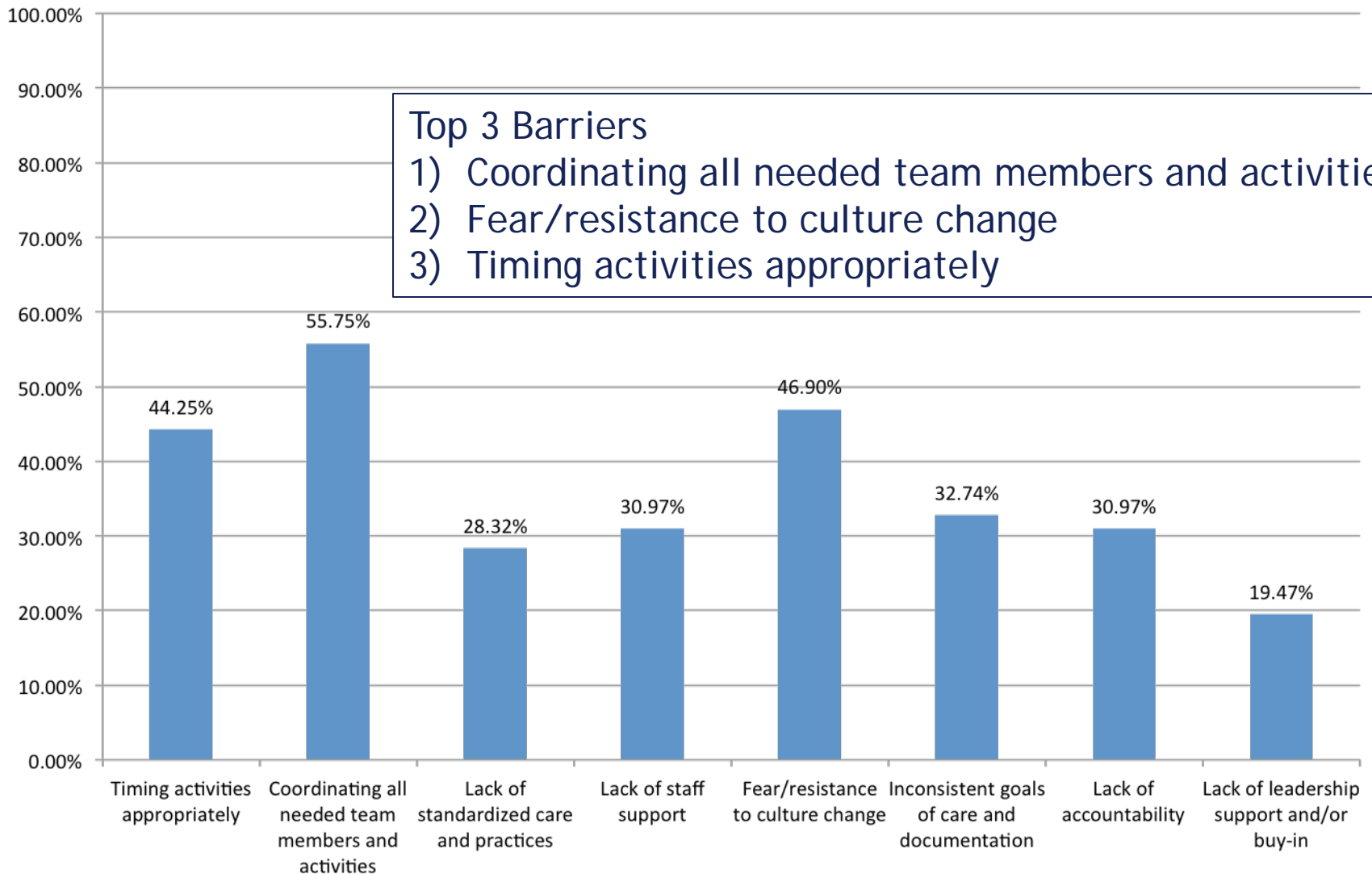


## Units (n = 113)

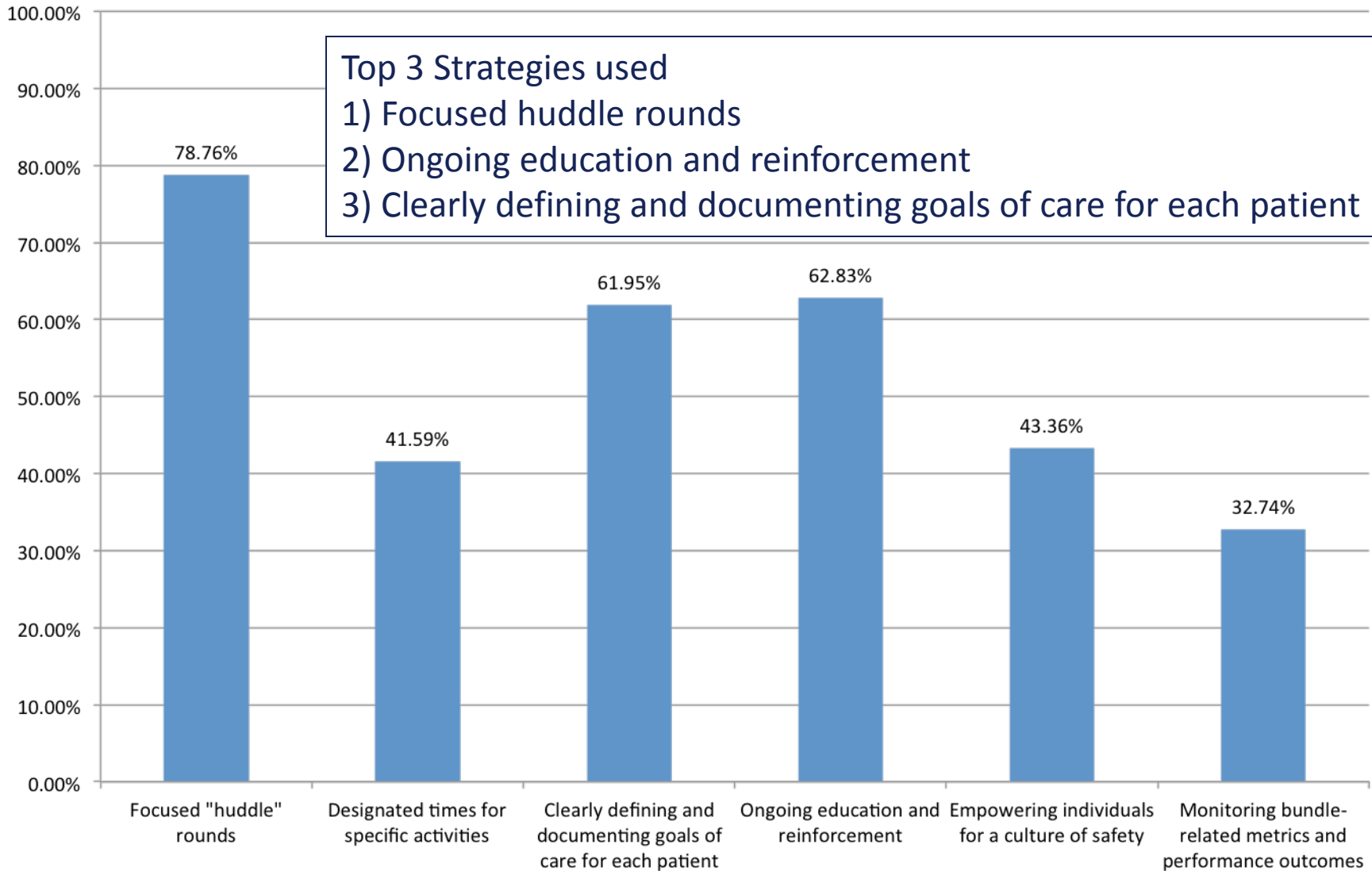




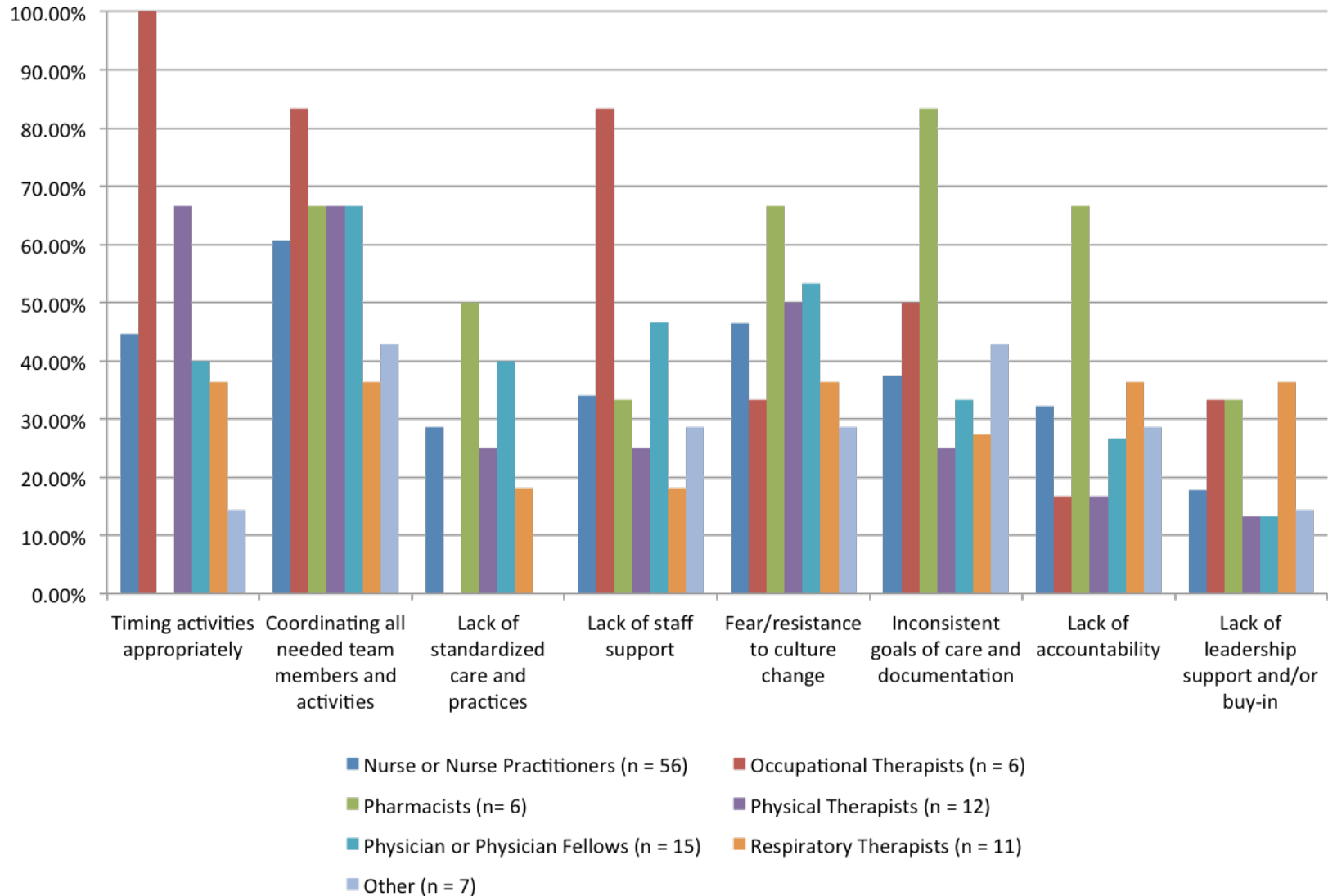
## Overall Barriers Perceived (n = 113)



## Overall Strategies Used (n = 113)



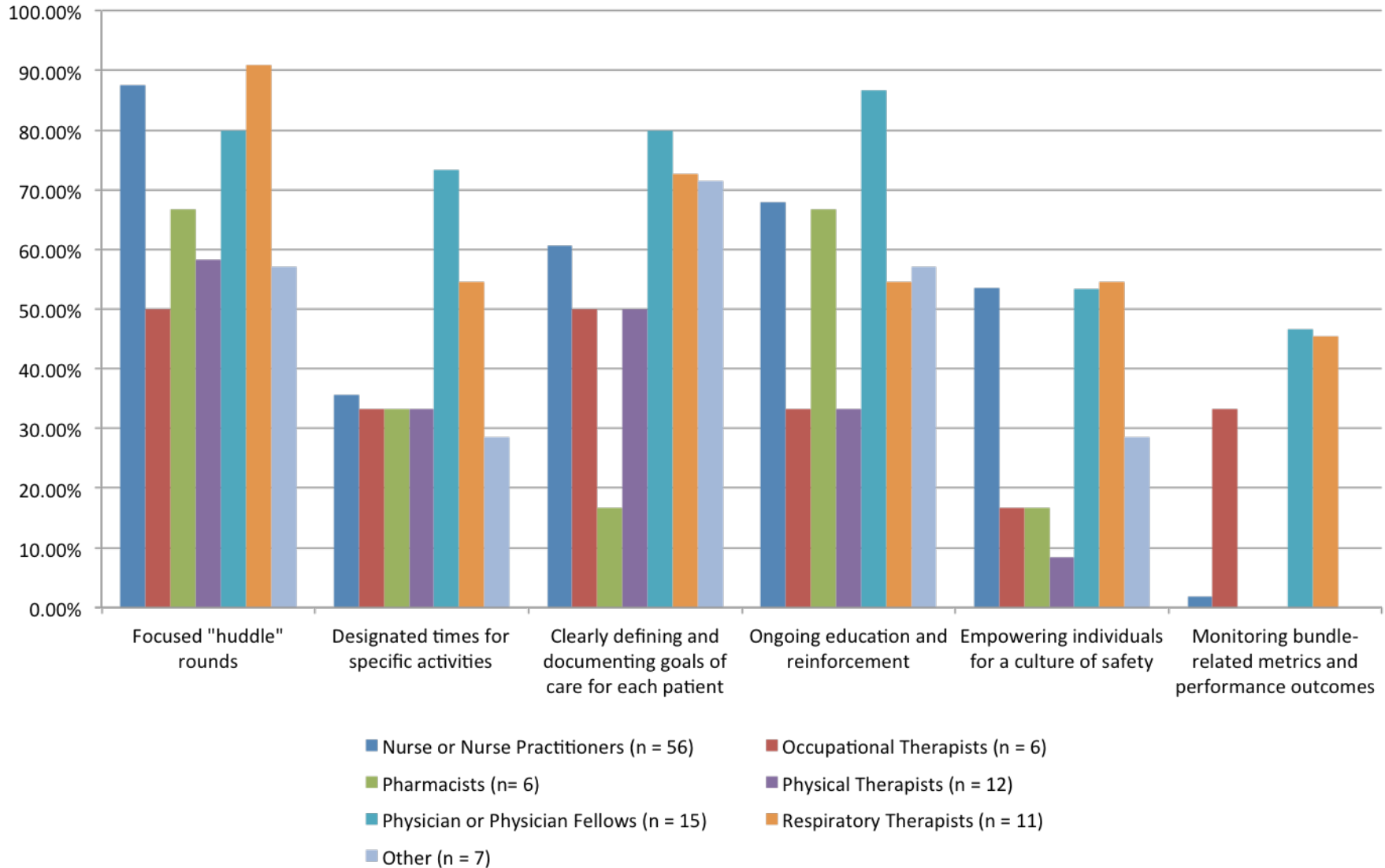
## Overall Barriers Perceived by Profession



# Summary: Barriers

- Consistent agreement on lack of coordination as perceived barrier
- Fear and resistance to culture change also relatively consistent
- Consensus around leadership support
- Certain professions perceived barriers more so than others:
  - Timing activities appropriately not problematic - Pharmacy
  - Inconsistent goals of care and documentation - Pharmacy
  - Lack of staff support - Occupational Therapy

## Overall Strategies Used by Profession



# Summary: Strategies

- Huddle rounds popular, but some variation in usage/ inclusion by profession
- Certain professions use particular strategies more so than others:
  - Not empowered for a culture of safety - OT, Pharmacy, PT, Others
  - Metrics and performance outcomes being monitored - Medicine, OT, Respiratory Therapy
  - Not a lot of ongoing education and reinforcement - OT, PT
- Overall, physicians feel that most strategies are being used

# Lessons Learned

- Difficult to disseminate survey to all ICU staff
- Difficult to calculate total n and thus the response rate
- Lack of statistical support

# Follow-up

- Presented to medical directors of the ICUs and to unit specific councils
- Resource to guide quality improvement projects



# Further Investigation

- Attitudinal changes from pre/post-workshop and follow-up survey
- Comparisons between workshop attendees and non-workshop attendees
- Impact of bundle on patient care outcomes
- Perceptions of interprofessional care from patient's perspective

Questions?