

# Delirium and Medication Reconciliation Collaborative

Enrolment  
deadline  
extended



safer healthcare  
*now!*

## A Call to Action

The Canadian ICU Collaborative and *Safer Healthcare Now!* invite interested teams from intensive care units to participate in a 12-month Collaborative to work on one or both of the following aims:

- Improve care for critically ill patients through implementation of standardized screening tools and prevention and management strategies for delirium
- Reduce avoidable adverse drug events for critically ill patients by following a medication reconciliation process.

Accreditation Canada has included both topics in its accreditation process in Standard 9.8 and Required Organizational Practice (ROP) 7.4 and 11.5.

## The Challenge

Delirium and adverse drug events can have a significant impact on a patient's life. There is a wealth of research in improving the care of critically ill patients with delirium and on how to prevent adverse drug events. However, healthcare does not always reliably transfer evidence into practice and processes frequently fail despite the best intentions of a dedicated and highly skilled workforce. Our system, which intends to heal, often does just the opposite, leading to unintended harm for patients.

## A Solution

Collaboratives are known to help close the gap between what we know and what we do. A Collaborative brings together teams that share a commitment to making significant and rapid changes to achieve results. It provides the structure, topic expertise and proven methods to create lasting improvement. Participants attend three learning sessions (two virtual sessions plus one face-to-face session) and are supported by expert faculty between sessions. Participation in this Collaborative can contribute to the achievement of your delirium and medication reconciliation goals.

## Who Should Enrol?

This initiative is open to all inter-professional teams in the intensive care unit. In addition, teams that enrol must have senior leadership support, willingness to rapidly test and implement local solutions, prefer structure and focused deadlines, actively share learning and data with other teams and have the ability and financial resources for a partial team to travel to a face-to-face learning session in May.

Teams can expect:

- Evidence-based changes that are ready to test and implement
- Coaching from experienced Faculty
- Networking with like-minded peers
- Education and training on methods for accelerating improvement and measurement techniques
- Advice on strategies to overcome resistance and address barriers
- Feedback on progress
- Monthly conference calls
- A Community of Practice and a list serve for keeping in touch
- Increased capability to support improvement efforts that can be applicable to other contexts

## Cost

This initiative is supported by *Safer Healthcare Now!* and the Canadian ICU Collaborative. An enrolment fee of \$750 per team (up to seven members) partially covers the cost of Learning Sessions, conference calls and Faculty support. Travel, accommodation and implementation costs are at the expense of participating centres.

## Key Dates – Mark your Calendars!

### 2011

Nov. 30	Free, one-hour Information Session for Interested Teams
Dec. 16	Enrollment Deadline

### 2012

Jan. 10	Web-Ex Training for Enrolled Teams
Jan. 18	Learning Session 1A (3 hrs, virtual)
Jan. 25	Learning Session 1B (3 hrs, virtual)
May	Learning Session 2 (1.5 days, face to face, location TBD)
Oct.	Learning Session 3 (virtual)
Nov.	Closing Congress

There will be team calls between learning sessions. More details provided in your Enrolment Package.

## Faculty

### Chaim Bell, MD, PhD, FRCPC

Associate Professor of Medicine and Health Policy, Management, & Evaluation  
CIHR/CPSI Chair in Patient Safety & Continuity of Care  
University of Toronto; St. Michael's Hospital

### Paule Bernier, P. DT., MSc.

Nutritionist, Critical Care Team, Jewish General Hospital and Safety and Improvement Advisor for *Safer Healthcare Now!* (Québec)

### Eva Cohen, PharmD

Chief, Department of Pharmacy  
Jewish General Hospital

### Vanda DesRoches, RN, BN

Clinical Development Nurse  
Prince County Hospital

### Greg Duchscherer, RRT, FCSRT

Quality Improvement and Patient Safety Leader,  
Department of Critical Care Medicine  
Alberta Health Services – Calgary Zone

### Denny Laporta, MD, FRCPC

Intensivist, Department of Adult Critical Care,  
Jewish General Hospital  
Faculty of Medicine, McGill University

### Cathy Mawdsley, RN, MScN, CNCC

Clinical Nurse Specialist, Critical Care,  
London Health Sciences Centre

### Yoanna Skrobik, MD, FRCPC

Intensivist, Hôpital Maisonneuve Rosemont, Montréal  
Expert Panel for the new Pain, Sedation and Delirium Guidelines,  
Society of Critical Care Medicine (SCCM)

### Jennifer Turple, BSc Pharm, ACPR

Medication Safety Specialist  
ISMP Canada

## Planning & Support Team

### Claudio Martin, MD, MSc, FRCPC

Collaborative Chair  
Intensivist, London Health Sciences Centre,  
Critical Care Trauma Centre  
Professor of Medicine and Physiology,  
University of Western Ontario  
Chair/Chief of Critical Care Western

### Bruce Harries

Collaborative Director, Improvement Associates Ltd.

### Leanne Couves

Improvement Advisor, Improvement Associates Ltd.

### Ardis Eliason

Project Coordinator, Improvement Associates Ltd.

### Anne MacLaurin

Project Manager, Canadian Patient Safety Institute

## For more information

To learn more, join the free Information Session by clicking the links below:

[Wednesday, November 30 @ 1000 MST / 1200 EST](#)

If interested in enrolling your team, contact Ardis Eliason at [aeliason@telus.net](mailto:aeliason@telus.net) to request an Enrolment Package that provides more details about expectations, how to enrol and preparation activities for the first Learning Session.



Canadian Patient Safety Institute  
Institut canadien pour la sécurité des patients

