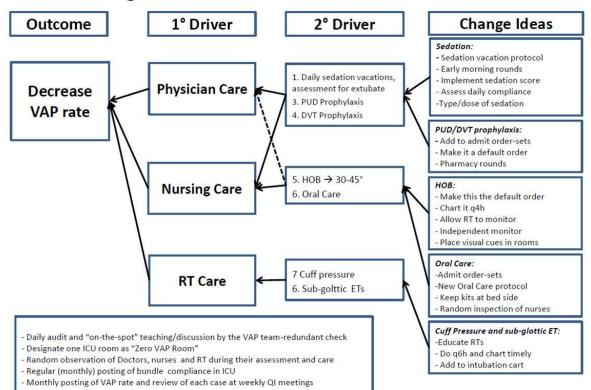
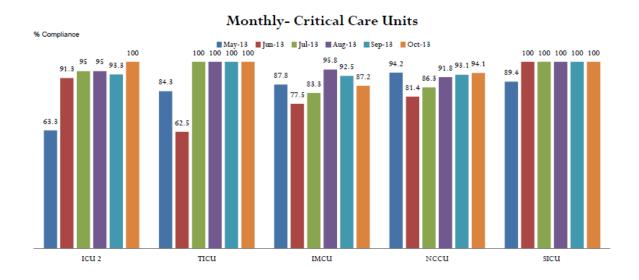
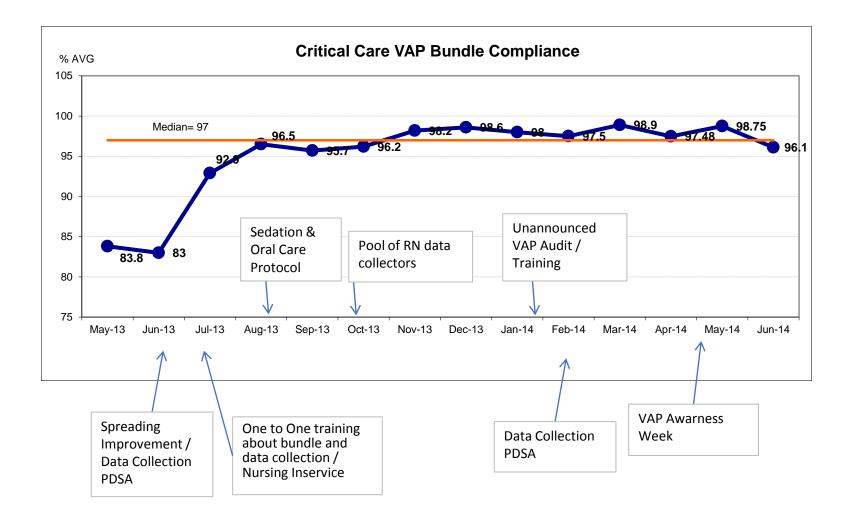
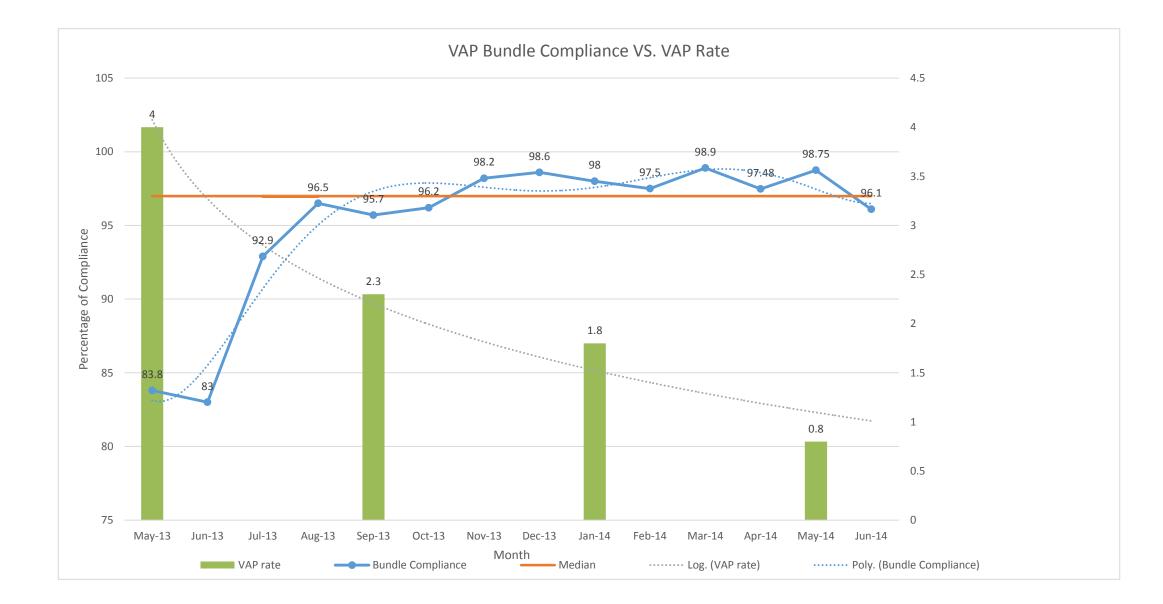
Driver Diagram

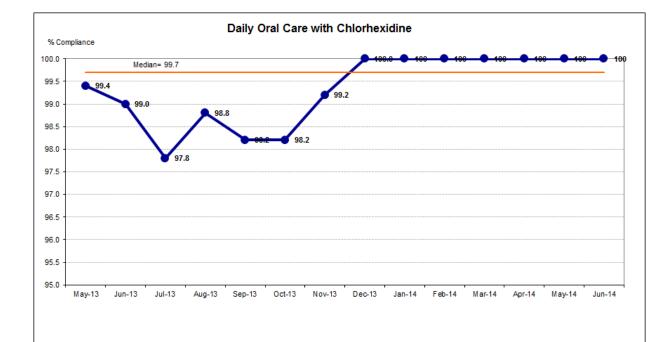


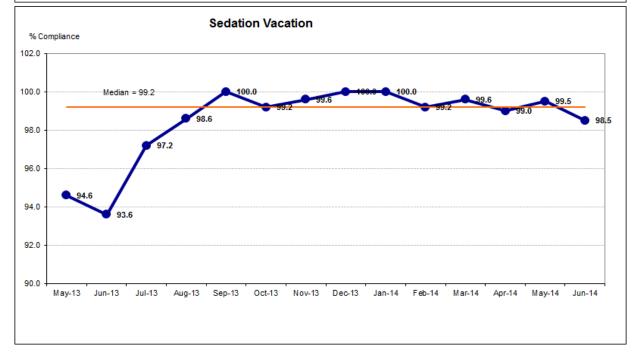
Monthly- Critical Care Units





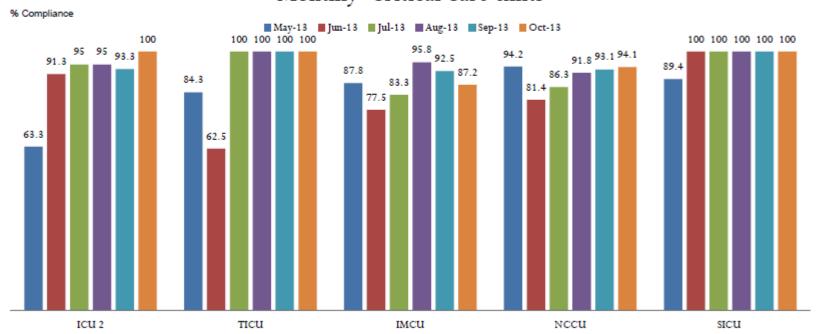






Example of Individual element of the bundle compliance for all the ICUs.

Monthly- Critical Care Units



Monthly- Critical Care Units

ICU2 - General ICU / TICU- Trauma ICU / IMCU- Intermediate ICU / NCCU- Neuro ICU / SICU - Surgical ICU

VAP Project - Using the NHS Sustainability Model

Sustainability (Total Score= 66)

	Factor	Factor Level	Score	Max Score	GAP
Process	Benefits beyond helping patients	А	8.5	8.5	0
	Credibility of the evidence	А	9.1	9.1	0
	Adaptability of improved process	А	7	7.0	0
ā	Effectiveness of the system to monitor progress	В	3.3	6.5	3.2
Staff	Staff involvement and training to sustain the process	В	6.3	11.4	5.1
	Staff behaviours toward sustaining the change	A	11	11.0	0
	Senior leadership engagement	В	6.2	15.0	8.8
	Clinical leadership engagement	В	6.7	15.0	8.3
Organization	Fit with the organization's strategic aims and culture	В	3.5	7.0	3.5
ō	Infrastructure for sustainability	В	4.4	9.5	5.1

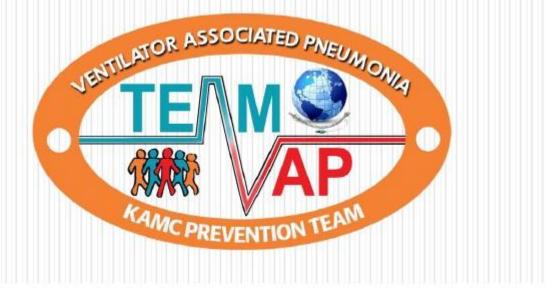
Using the NHS Sustainability model, we were able to visualize the gap we have to sustain the project, and we highlighted in bold the problematic areas that we addressed.

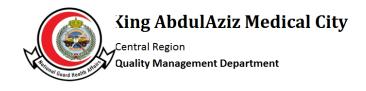
Calculate your total scores

Process total score	21	
+		
Staff total score	30	
+		
Organisation total score	8	
=		
Sustainability total score	59	Date:



VAP Team Logo and Poster by SICU











Statement

This tool is developped to monitor the compliance of the VAP bundle in Critical Care Units. Audits should be done on Ventilated patients ONLY (via Tracheostomoy or ET Tube)

Instructions:

- 1. Enter the date, shift (Day, Night, Weekend) and the MRN number of the patient reviewed. Data Collectors need to enter their Initials.
- 2. For each element of the bundle, choose from the drop down menu: YES for compliant and NO for non-compliance
- 3. Use the remarks field to enter the explanation for any N/A or NO item
- 4. Place NA for patients having any contraindication for head of the bed elevation: Log Roll Protocol Pelvic Fractures Morbid Obesity & Elevation Impossibility Prone Position • Active Resuscitation for MAP Below Target • Intra-aortic balloon pump • Spine unstable or not cleared
- 5. Mouth Care is done as observation of the patient mouth and verification of equipment use (Mouth care set)
- 6. DVT Prophylaxis is considered as YES in case of patient has at least (1) or (2):
- (1)- Mechanical Prophylaxis (Ted Stockings, or Pneumatic sequential devices), AND /OR (2)- Any pharmacological DVT prophylaxis (Heparin, Enoxaparin...)
- Contradictions for pharmacological DVT prophylaxis include: INR >2 / Platletts < 50 000 / PTT > 45 / Coagulopathy / Active Bleeding
- 7. This form will generate automatically the individual bundle compliance for each patient, compliance for each element of the bundle, and the overall unit compliance.

Members of VAP Improvement Project :

			Data Collection:				
Dr. Raymond Khan (Team	Consultant, Intensive		Unit	Frequency	Total / Month	Variability	
Leader)	Care Unit						
Dr. Saeed Obbed	Staff Physician, Intensive		ICU2	3 times/week	60 observations	1 day, 1 night, 1 weekend	
	Care Unit					,, o ,	
Emma Querubin / Amal Al-	Acting Nurse Manager,		IMCU	3 times/week	60 observations	1 day, 1 night, 1 weekend	
Matroud	ICU2						
Jude Amara	Interim Nurse Manager,		TICU, SICU, NCCU	3 times/week	100 % of Ventilated	d 1 day, 1 night, 1 weekend	
	IMCU			-	patients		
Molly Maletshe	Actina - Nurse Manager						
P DATA KIT VER.2 ICU2	TICU SICU NCCU	J <mark>IMCU</mark>	+				

Screen Shot of the Data Collection Tool kit that was used by all units