

Oral Defense Announcement

University of Missouri – St. Louis Graduate School

An oral examination in defense of the dissertation for the degree
Doctor of Nursing Practice with an emphasis in Pediatric Nurse Practitioner

Leigh Paridy

B.S.N Goldfarb School of Nursing, August 2012

Implementing the Richmond Agitation-Sedation Scale to Assess Delirium in a Pediatric ICU

Date: October 15, 2021
Time: 3:00 p.m. to 4:00 p.m.
Place: Remote

Abstract

Purpose: The purpose of this quality improvement project was to establish early identification of delirium in the intensive care setting to reduce the impact of long-term patient outcomes.

Description of project: A retrospective-prospective medical chart review was completed. The retrospective chart review looked at fifty-two patients admitted to the pediatric intensive care unit (PICU) between October 1, 2020 and December 1, 2020 for patient demographics and State Behavior Scale (SBS) and the Cornell Assessment for Pediatric Delirium (CAPD) charting compliance especially with children with developmental delay and those with a high susceptibility to delirium. The prospective chart review looked at forty-five patient charts admitted to the PICU between June 1, 2021 and September 1, 2021 for patient demographics and Richmond Agitation-Sedation Scale (RASS) and the CAPD charting compliance along with children with developmental delay and those with a high susceptibility to delirium. Compliance for reviewing delirium screening with the providers was also completed.

Results/Conclusions: The most frequently observed category for SBS charting compliance was 33%. Only four charts were 100% compliant in charting SBS scores. The most frequently observed category for RASS compliance charting was 100%. Only 16% of charts were non-compliant, and the lowest compliance percentage was 80%. In the pre-intervention group, 19% of the patients were identified as being diagnosed with a developmental delay. The post-intervention group, only 4% of patients had a developmental delay. In the post-intervention group, 26% of charts were compliant with reviewing delirium screening with the providing team. In reviewing the analysis of charting compliance for SBS and CAPD screening compared to RASS and CAPD screening, the RASS and CAPD charting compliance percentage was 67% in the PICU. The analysis results showed that nurses managing the patients with the highest susceptibility to delirium, such as those on ECMO and CRRT and those with developmental delay, were compliant with delirium charting; however, they were not consistent with discussing delirium susceptibility with providers. The multidisciplinary education given to the nurses and the providers on the RASS suggests there was an impact on the charting compliance increase post-intervention.

Defense of Dissertation Committee

Cathy Koetting, DNP, APRN, CPNP, PMHS, FNP-C
Katy Reese, DNP, APRN, NP-C, CPNP-AC
Jessica Mann, DNP, APRN, CPNP-AC