Implementation of the Pain, Agitation and Delirium bundle in the Intensive Care Unit: catches

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The reported incidence of delirium in the intensive care unit varies from 16 to 89%. A delirium is associated with increased mortality, increased hospital length of stay, higher cost of care and cognitive impairment. The Pain, Agitation and Delirium…

Ethische beoordeling	Positief advies
Status	Anders
Type aandoening	-
Onderzoekstype	Observationeel onderzoek, zonder invasieve metingen

Samenvatting

ID

NL-OMON23049

Bron
NTR

Aandoening

Pain, Sedation, Delirium, Intensive Care

Pijn, Sedatie, Delirium, Intensive Care

Ondersteuning

Primaire sponsor: none
Overige ondersteuning: none

Onderzoeksproduct en/of interventie

Uitkomstmaten

Primaire uitkomstmaten

Factors influencing the use of validated scores.

Toelichting onderzoek

Achtergrond van het onderzoek

The Pain, Agitation and Delirium (PAD) bundle, which has been published in 2013, shows that integrated management of pain agitation and delirium is of great importance. This is because optimal pain management and light sedation are necessary to evaluate delirium in a patient and the occurrence of pain, agitation and delirium are associated with negative clinical outcomes. In this integrated approach daily measurement of pain, agitation and delirium plays a central role.
However, recent studies show many Dutch intensive care units do not use validated scores, the factors causing this are not yet identified.
The aim of this study is to identify these factors, this could lead to improved implementation of the PAD bundle and an improvement in the clinical outcomes of ICU patients. In addition, the effect of implementation of the PAD bundle on the use of validated scores by ICU nurses will be evaluated.

Recruiting countries: The Netherlands

Doel van het onderzoek

The reported incidence of delirium in the intensive care unit varies from 16 to 89%. A delirium is associated with increased mortality, increased hospital length of stay, higher cost of care and cognitive impairment. The Pain, Agitation and Delirium bundle, which has been published in 2013, shows that integrated management of pain, agitation and delirium is of great importance. This is because optimal pain management and light sedation are necessary to evaluate delirium in a patient and the occurrence of pain, agitation and delirium are associated with negative clinical outcomes. In this integrated approach, daily measurement of pain, agitation and delirium plays a central role.
However, recent studies show many Dutch intensive care units do not use validated scores, the factors causing this have yet to be identified.
The aim of this study is to identify those factors, that could lead to improved implementation of the PAD bundle and an improvement in the clinical outcomes of ICU patients. In addition, the effect of implementation of the PAD bundle on the use of validated scores by ICU nurses will be evaluated.

Onderzoeksopzet

The primary and secondary outcome measures are measured using a questionnaire about the following factors which could prevent the use of validated scores: the amount of scores that have to be filled out, knowledge of the use of different scores, knowledge of the importance of the use of validated scores, registering the performed score and the time necessary to perform a pain score.

For the primary outcome measure the questionnaires were conducted at the end of 2016.

For the secondary outcome measure the questionnaires will be conducted 6 months after the implementation of the PAD bundle.

Onderzoeksproduct en/of interventie

In order to be able to implement the PAD-bundle in an Intensive Care Unit, training (either intern or extern) will be organized for each hospital. Questionnaires will be sent to ICU nurses, working in different Dutch Intensive Care Units, before and 6 months after the training. The questionnaire contains questions about the following factors which could prevent the use of validated scores: the amount of scores that have to be filled out, knowledge of the use of different scores, knowledge of the importance of the use of validated scores, registering the performed score and the time necessary to perform a pain score.

Contactpersonen

Publiek

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Wetenschappelijk

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Deelname eisen

Belangrijkste voorwaarden om deel te mogen nemen (Inclusiecriteria)

ICU nurses working in Dutch Intensive Care Units.

Belangrijkste redenen om niet deel te kunnen nemen (Exclusiecriteria)

Poor/no understanding of the Dutch language
Under the age of 18 years

Onderzoeksopzet

Opzet

Type:	Observationeel onderzoek, zonder invasieve metingen
Onderzoeksmodel:	Anders

Controle: N.v.t. / onbekend

Deelname

Nederland

Status:	Anders
(Verwachte) startdatum:	01-10-2016
Aantal proefpersonen:	250
Type:	Onbekend

Ethische beoordeling

Positief advies

Datum:	20-03-2017
Soort:	Eerste indiening

Registraties

Opgevolgd door onderstaande (mogelijk meer actuele) registratie

Geen registraties gevonden.

Andere (mogelijk minder actuele) registraties in dit register

Geen registraties gevonden.

In overige registers

Register	ID
NTR-new	NL6298
NTR-old	NTR6472
Ander register	METC Zuyderland : 17-N-38

Resultaten