

Multidisciplinary Critical Care Daily Goal Checklist

(All elements must be discussed during rounds)

Critical Care Goals

- ✓ Zero BSI & VAP
- ✓ Sepsis Mortality rate < 25%
- ✓ Glycemic control 80-180
- ✓ ↓ CHF Readmission to 21%
- ✓ Delirium Prevention & Treatment
- ✓ 100% Core Measure Compliance
- ✓ Patient/Family Focused Care
- ✓ Effective Communication among caregivers
- ✓ Teamwork

ARDS:

- P/F ratio documented
- Tidal volume near 6ml/kg for IBW and Inspiratory plateau pressures <30cm H2O for vented patients
- Monitor for potential side effects of negative fluid balance

Sedation/Analgesia: Ordered Yes No

RASS goal & current score _____

Pain goal & current score _____

Delirium:

Delirium Prevention Protocol Yes No

Current CAM ICU: _____

DVT prophylaxis: screen initiated Yes No

PUD Prophylaxis: ordered Yes No

Head of Bed: > 30 degrees Yes No

If not contraindicated

Skin Condition:

Braden score _____

Specialty bed needed/ordered Yes No

Wound Care Nurse Consulted Yes No

Nutrition: Diet: _____

Goal rate: ____ current rate: __ ml/hr

Interrupted >4 hours in past 24 hrs

Diet modification needed Yes No

Dietician Referral Yes No

RN Signature: _____

Disposition/code status

- DNR Full Code
- Advance Directive in chart POA in Chart
- Palliative Care consulted
- SW consulted

Glucose Control: range within last shift _____

- Insulin protocol needed Yes No
- Sliding Scale Low Medium High

Severe Sepsis/ Septic Shock:

Screened positive Yes No

Protocol ordered Yes No

Therapies:

PT ordered Active

OT ordered Active

Swallow eval Done Pass/Fail

BSI Bundles:

- € Hand washing
- € Avoid Femoral lines
- € Remove unnecessary lines
- € Use maximal barrier protection
- € Chlorhexidine for skin antiseptics
- € Biopatch in place

*Use Bedside Procedure Checklist & Time Out Form
Prior to Procedure*

VAP Bundles:

- € Elevate HOB >30
- € Prevent DVT
- € Prevent PUD
- € Mouth Care Q 2-4hrs
- € Chlorhexidine mouthwash Q 12hrs
- € Sedation Awakening/Breathing Trials RSBI
- € Glucose Control 80-180

Increase monitoring for Self-Extubation

Core Measures:

See Nursing Hand Off

Patient/Family Focused Care:

Update patient/family on condition and plan of care

Update communication tools: hand off, white board

MD/PA Signature: _____

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JCMC Critical Care Division Nursing Model of Care

American Association of Critical Care Nurses (AACN) Synergy Model

Patient Characteristic	Scale					Number Rating
Stability	1 Min	2	3 Mod	4	5 High	
Predictability	1 Not	2	3 Mod	4	5 High	
Vulnerability	1 High	2	3 Mod	4	5 Min	
Complexity	1 High	2	3 Mod	4	5 Min	
Resiliency	1 Min	2	3 Mod	4	5 High	
Resource Availability	1 Few	2	3 Mod	4	5 Many	
Participation in Decision Making & Care	1 None	2	3 Mod	4	5 Full	
Lower number rating= Higher risk/Acuity						Total Score:

Patient characteristics should be assessed daily, and used to guide the plan of care.

“Optimal patient care can best be achieved when the patient’s characteristics (expressed as needs) are matched by the nurse’s characteristics (expressed as competencies)”

(Alspach, G., 2006)

Nurse Competency	Scale					Number Rating
Clinical Judgment	1 Novice	2	3 Competent	4	5 Expert	
Collaboration	1 Novice	2	3 Competent	4	5 Expert	
Clinical Inquiry	1 Novice	2	3 Competent	4	5 Expert	
Advocacy & Moral Agency	1 Novice	2	3 Competent	4	5 Expert	
Caring Practices	1 Novice	2	3 Competent	4	5 Expert	
Systems Thinking	1 Novice	2	3 Competent	4	5 Expert	
Diversity Responsiveness	1 Novice	2	3 Competent	4	5 Expert	
Facilitation of Learning	1 Novice	2	3 Competent	4	5 Expert	
Higher number rating = Higher overall competency						Total Score:

Scale adapted to reflect Patricia Benner’s Model (1984). From novice to expert: Excellence and power in clinical nursing practice

RN Signature: _____

MD/PA Signature: _____