

Abstract

Background and Purpose: Delirium is a prevalent condition among critically ill children. Pediatric patients in the cardiothoracic intensive care unit are exposed to several risk factors that make them especially vulnerable to delirium. Left unmanaged, pediatric delirium leads to increased morbidity and mortality, prolonged hospital length of stay, increased mechanical ventilation time, and increased hospital costs. A key step in delirium management is screening. The purpose of this quality improvement project was to implement a delirium screening tool in a pediatric cardiothoracic intensive care unit in an effort to enhance staff knowledge and assessment of this condition.

Methods: This project took place in a 24-bed pediatric cardiothoracic intensive care unit and followed a pre- and post-intervention design consisting of three phases. Phase I involved distribution of pre-knowledge surveys to nurses utilizing a published pediatric delirium knowledge questionnaire. Phase II established nurse knowledge of pediatric delirium through education. Phase III consisted of the roll-out of the Cornell Assessment of Pediatric Delirium, a validated and reliable delirium screening tool for patients 0-21 years old. Following education and delirium screening rollout, the knowledge survey was redistributed to nurses to evaluate knowledge growth.

Results: Among the 29 nurses who completed pre- and post-knowledge assessments, there was an increase in pediatric delirium knowledge scores from 82.35% to 88.23%. Average compliance using the Cornell Assessment of Pediatric Delirium reached 72.2%. Nurses also demonstrated 80.2% compliance with reporting delirium screening scores during interdisciplinary rounds.

Conclusions: Findings suggest that, with education and routine discussion of delirium during interdisciplinary rounds, pediatric delirium screening tools can be effectively integrated into a unit's culture.

Implications: This quality improvement project offers methods to implement a delirium screening tool in a unit with no prior delirium screening practice. Continued assessment of screening compliance is crucial to ensure the sustainability of this initiative.

Keywords: Pediatric delirium, intensive care, cardiac, screening, Cornell Assessment of Pediatric Delirium