Relevant Health Professions Competencies

- Institutes of Medicine Competencies
  - Work in interdisciplinary teams
  - Eliminate evidence-based decisions that are at high risk for post-surgical delirium
  - Patient safety: Develop a culture of safety.
- Quality improvement skills
- Teamwork skills and culture
- Positive impact on the targeted problem selected for an IPTL project
- Facilitation
  - Availability of personnel with the skills to facilitate the process
  - Availability of professionals seen by the organization as worthy of investment
- Systems-based practice
- Interprofessional Team Learning
  - Application of group dynamics to help teams manage conflict, make decisions
  - Support CE documentation and reporting requirements for participating professions

Example 1: Reducing Post-surgical Delirium

- Site: Eisenhower Medical Center (EMC)
- Problem: EMC experiences post-surgical delirium that are at high risk for post-surgical delirium.
- Patients admitted through the ED with a high fraction are among the highest risk.
- Post-surgical delirium doubles the length of stay and contributes to poor long-term outcomes.
- Participating Professions:
  - Nursing
  - Anesthesiology
  - Orthopedic surgery
  - Pharmacy
  - Medical informatics

- Intervention:
  - Implementation of a multi-disciplinary team
  - ED meeting literature-based indicators of high risk for delirium
  - Literature review
  - No significant control was noted in the 15-month project period.

Example 2: Hospital Glycemic Control in the Hospital: A Quality Improvement Project

- Site: Eisenhower Medical Center (EMC)
- Problem: Many patients are underperforming physiological insulin administration orders.
- Six teams developed and implemented new physiologic insulin administration order sets.
- Six new glycemic control teams were formed, 2 were re-chartered or relaunched, 1 team was reorganized its internal functioning, and 1 remained unchanged in terms of composition or functional process.
- All teams have become permanent and have a continuing agenda to improve IV administration of insulin in the ICU, and 1 team worked to improve the response to the insulin crisis.
- All teams were able to demonstrate improvement during the 15-month project period.

- Outcome:
  - No significant control was noted during the 15-month project period.

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