

Oral Care Compliance and Preventing Ventilator Acquired Pneumonia (VAP)



Units: Surgical Trauma Intensive Care Unit (STICU), Medical Intensive Care Unit (MICU)

Northeast Georgia Medical Center

PICOT Question

Would implementing a brain task for oral care every two hours in STICU improve oral care compliance and VAP outcomes compared to not having a brain task reminder over a 4-week period?

Evidence Summary

- The use of oral care packets such as CHG and mouthwash "reduces the incidence of developing ventilator-associated pneumonia (VAP) in critically ill patients from 26% to about 18%, when compared to placebo or usual care" (Zhao et al., 2020).
- According to Jannson et al. (2018), "combining active strategies, such as reminders, decision support, use of information technology, rewards, and regular auditing, and giving feedback to providers might be more cost-effective than increasing resource capacity in attempts to encourage providers to implement and adhere to clinical guidelines."
- We are combining the evidence of using oral care packets with the evidence of utilizing reminders and information technology to implement our evidence-based change

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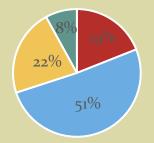
Description of Change

- Evidence was gathered from literature to help develop informational handouts for the unit staff along with a pre survey.
- Information and surveys were handed out to Day and Night shift staff.
- Design nurse driven reevaluation tool/checklist to ensure oral care compliance.
- The changes we plan to implement according to our gathered evidence and feedback from unit staff include:
- Scanning oral care packets to ensure an increased compliance rate with oral care every

two hours

• Adding oral care reminder tasks to the Epic Brain feature on every ventilated patient

Baseline Data of Oral Frequency



Every two hours (6x) Every four hours (3x)
Every six hours (1x) PRN as needed

Results/Limitations

Project is ongoing. We are currently working alongside pharmacy to make mouthcare kits scannable for the brain. The research and implementation of this project will show if adding a task to the brain will increase compliance with oral care, therefore decreasing instances of VAP.

• Pre-data includes nurses' attitudes toward current oral care practices as well as oral care compliance.

• Post-data will also include nurses' attitudes toward the new Epic brain task, oral care

compliance rates, and instances of VAP on the unit.

Recommendation

Once pharmacy has added a scannable barcode to the oral care packets and administration is integrated into Epic, the project can be initiated, and data collection can be obtained.

References

Jansson MM, Syrjälä HP, Talman K, Meriläinen MH, Ala-Kokko TI. Critical care nurses' knowledge of, adherence to, and barriers toward institution-specific ventilator bundle. Am J Infect Control. 2018 Sep;46(9):1051-1056. doi: 10.1016/j.ajic.2018.02.004. Epub 2018 Mar 21. PMID: 29573832.

Zhao T, Wu X, Zhang Q, Li C, Worthington HV, Hua F. Oral hygiene care for critically ill patients to prevent ventilatorassociated pneumonia. Cochrane Database Syst Rev. 2020 Dec 24;12(12):CD008367. doi: 10.1002/14651858.CD008367.pub4. PMID: 33368159; PMCID: PMC8111488