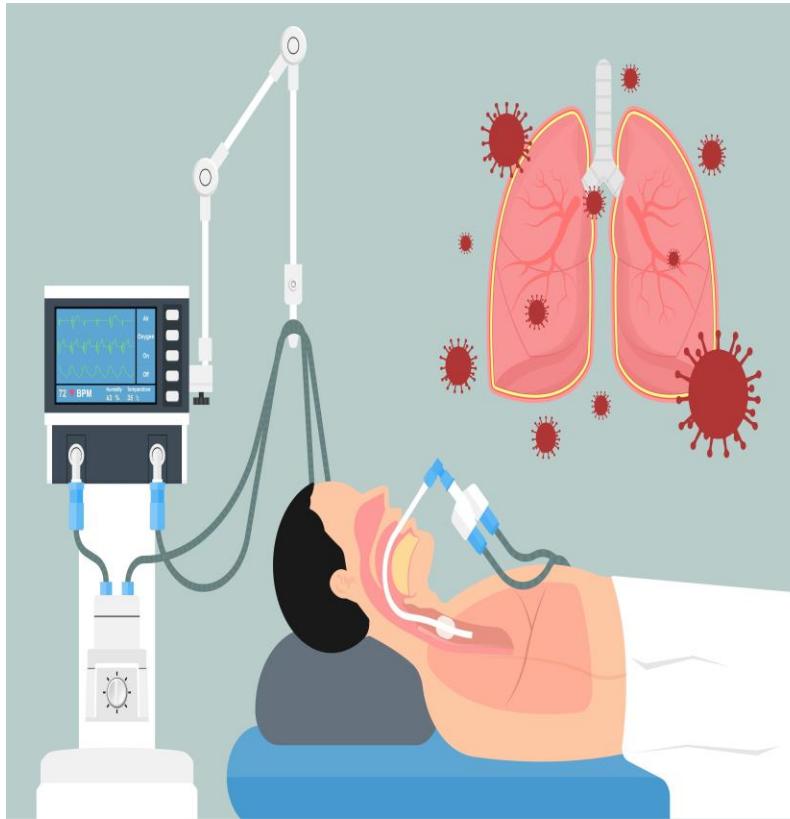


## BACKGROUND

- Why: Ventilator-associated complications (VACs/IVACs) increase morbidity, mortality, length of stay, and cost. Our unit's IVAC rate is 5.57 (2nd quarter), showing a need for action.
- How: Evidence-based ventilator bundles (HOB elevation, sedation vacation, oral care) are proven to reduce complications when consistently applied.
- What: Improving bundle compliance in the SICU/NSCU will help close the gap, enhance patient safety, and reduce ventilator-associated complications.



## PURPOSE

- Reduce ventilator-associated complications in SICU/NSCU by improving bundle compliance.
- Achieve consistent adherence to evidence-based ventilator bundle practices among staff.
- Enhance patient outcomes by lowering IVAC rates, decreasing length of stay, and improving overall safety.

## METHODS

- Design: Quality improvement project using **Plan-Do-Study-Act (PDSA)** cycles.
- Setting: SICU
- Participants: All adult patients requiring mechanical ventilation in the SICU during the study period.
- Data collection: Bundle compliance audited daily



## RESULTS

- Increased compliance with ventilator bundle elements in SICU/NSCU.
- Reduction in IVAC rate from the current 5.57.
- Improved patient safety, decreased ICU length of stay, and lower healthcare costs.

## CONCLUSIONS

- Implementing and adhering to ventilator bundle protocols in the SICU/NSCU can significantly reduce ventilator-associated complications.
- Regular staff education, consistent monitoring, and compliance audits are critical to sustaining best practices.
- This project highlights the importance of teamwork and evidence-based interventions in improving patient outcomes and minimizing infection rates.

## REFERENCES

