
Standardised pain, agitation and delirium practice guidelines subcommittee

Expression of interest

BACKGROUND

The Critical Care Clinical Network (CCCN) works with critical care clinicians to improve the quality of care and patient experiences in Victorian critical care Units (ICU/HDU/Critical Care Units). A key priority area for CCCN is to reduce variation in clinical practice and improve consistency of care. A method identified to achieve this is through the use of standardised guidelines.

In 2018, the Victorian ICUs identified the need to standardise practice around the prevention, assessment, management and follow-up of pain, agitation and delirium for critically ill patients. Standardisation of practices around pain, agitation and delirium will improve the care and management of patients and as such patient harm. It will also benefit clinicians through ensuring access to up-to-date evidence based guidelines and reducing the need for unit's to create or review their guidelines. Moreover, it will reduce staff training and potential confusion for those who work across multiple sites.

Professor Yahya Shehabi is leading this work as the chair of this subcommittee.

The project is currently in phase one: scoping and assessment phase. This involves a survey of clinicians' knowledge, attitudes and practice around pain, agitation and delirium as well as the adaptation of existing evidence-based tools to a standard assessment, monitoring and education resource for Victorian ICUs. ICUs will be given the opportunity to implement these resources with support around change management and measurement.

WHY APPLY?

As a member of this subcommittee you will:

- have a unique opportunity to contribute to a statewide quality initiative in critical care
- identify the issues surrounding preventing, assessing, managing and following up pain, agitation and delirium specific to the Victorian critical care setting
- identify best practice for prevention, assessment, management and follow-up of pain, agitation and delirium in critical care with respect to unit design, staff training, clinical guidelines, referral pathways and access to specialised care and consultations
- contribute to the adaptation of best practice including international guidelines to Victorian critical care practice for assessing pain, agitation and delirium
- provide expert oversight of the measurement of clinician knowledge, attitudes, and practices around pain agitation and delirium in critical care in Victoria
- provide oversight and report on the implementation of these resources in Victorian ICUs.

WHO ARE WE LOOKING FOR?

We are seeking **critical care clinicians** from both metropolitan and regional/rural areas in public and private hospitals with relevant expertise and experience to join the expert working group. Relevant clinical backgrounds include medicine, nursing, allied health/pharmacy and adult retrieval.

We are also seeking **consumers** who have experienced critical care (intensive care unit, high dependency unit or critical care unit) as a patient or family member.

TIME COMMITMENT:

The expectation is that subcommittee members will attend four times two hour tele/videoconference meetings and one half day face to face workshop in Melbourne. The proposed dates of the meetings are:

- 23 August 2018
- 4 October 2018
- 8 November (Workshop 2–5pm)
- 4 December 2018
- 21 March 2019.

WHAT ELSE DO I NEED TO KNOW?

- Submit your application by **Friday 17 August**
- A selection committee from CCCN will review applications by Monday 20 August.

HOW TO APPLY

Email criticalcare.clinicalnetwork@safercare.vic.gov.au and include:

- 'CCCN Pain agitation and delirium practice' in the subject line
- one paragraph telling us:
 - why you are interested in being involved in the subcommittee
 - any relevant experience or skills you will bring to the subcommittee
- a completed confidentiality agreement.

MORE INFORMATION

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FREQUENTLY ASKED QUESTIONS

Who is Safer Care Victoria (SCV)?

Safer Care Victoria (SCV) is the state's healthcare quality and safety improvement agency. SCV works with consumers, families and carers, clinicians and health services to monitor and improve the quality and safety of care delivered across our health system.

Relevant publications

- [SCV Strategic plan 2017–2020](#)
- [SCV Corporate plan 2017–2018](#)
- [SCV framework for Clinical Networks](#)
- [Clinicians as partners: A framework for clinician engagement](#)

What is Safer Care Victoria's relationship with the Department of Health and Human Services?

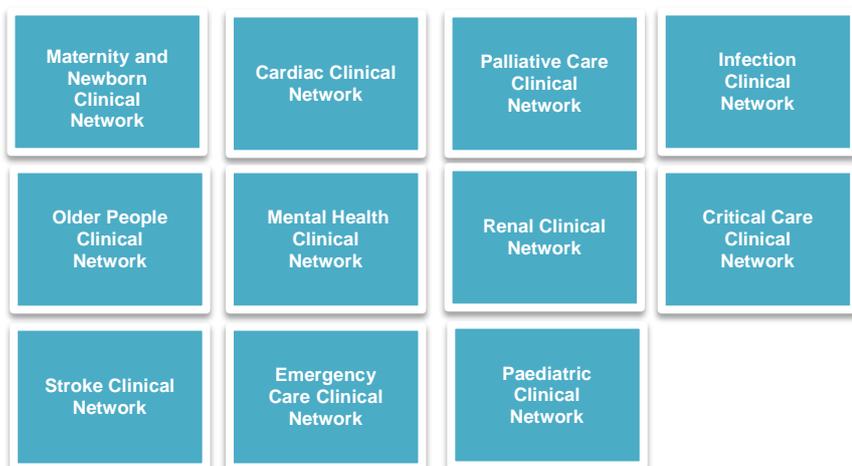
SCV is an administrative office Administrative Office of the Department of Health and Human Services.

Under section 14(1) of the Public Administration Act 2004, an Administrative Office head is responsible to the Secretary in relation for the general conduct and effective management of the functions and activities of the Administrative Office.

At a functional level, SCV provides advice to the department on clinical quality and the safety implications of policy, planning and funding decisions.

What are the Clinical Networks?

Our 11 clinical networks link SCV with clinicians in health and community services, drawing on their expertise to drive improvements. They play an important role in supporting high quality healthcare, which is person-centred, safe and effective.



The clinical networks are tasked with:

- identifying and implementing care that is supported by the best available research
- improving the quality and safety of care delivered to patients
- monitoring the performance of health services over time
- providing advice to SCV and the Department of Health and Human Services.

Each clinical network has a governance committee, an insight (data and evidence) subcommittee and various other working groups that will provide clinical leadership, expertise and advice to SCV.

A core principle for the clinical networks is to always act in the best interests of consumers and the wider Victorian community.

As part of our commitment to consumer representation, we include consumers and/or carers on each of our clinical network's governance, insight committees and expert working groups. We need consumer representatives from throughout regional, rural and metropolitan Victoria. Teleconferencing options are supported.

To ensure consumers are able to contribute as true partners in clinical network activities, all consumer representatives will be provided with appropriate orientation on commencement.

What is the Critical Care Clinical Network?

The Critical Care Clinical Network aims to support an integrated statewide approach to health services for patients who require critical care, promoting and supporting the delivery of efficient, effective and equitable healthcare for patients in Victoria.

The network has formal governance structures and a clinical lead. The network also has strong links with clinician bodies such as Australia and New Zealand Intensive Care Society and Australian College of Critical Care Nursing. The network engages with the healthcare sector to seek opportunities to support best practice and to address issues that might impact on delivery of high quality services.

What is the Governance Committee?

The clinical network governance committees represent the consumer and clinician member interests, and provide a mechanism for making decisions as well as an avenue for two-way information exchange with SCV.

What is the Insight subcommittee?

The clinical network Insight subcommittees facilitate the identification and use of meaningful clinical data. Specific to this committee is the ability to identify, analyse and interpret data and use this information to participate in decision-making processes to inform the work of the clinical network.

What are the subcommittees?

Subcommittees or working groups will be mobilised to address specific issues and are considered an important engagement strategy for the networks.