

**LAC+USC MEDICAL CENTER
SICU - C5B
SCOPE OF SERVICES**

Departmental Purpose

Ward C5B is a 20 bed Surgical Intensive Care Unit that serves as an important component of the continuum of care in the LAC+USC Medical Center. The unit exists to provide medical, nursing and interdisciplinary care to critically ill surgical and trauma patients. The unit goal is to provide the ICU level of care to restore, support and maintain the patient's physiologic stability and recognize the multifaceted dimensions of care needed by the patient including physical, emotional, spiritual and cultural aspects as well as the support and educational needs of the families during the patient's critical condition and recovery. The unit also aims to promote patient/family service satisfaction to the culturally diverse community of Los Angeles County.

Types and Ages of Patients Served

The Surgical Intensive Care Unit cares for adolescent, adult, geriatric surgical patients, and pediatric trauma patients. Fifty to sixty percent of these patients are trauma related cases and a smaller percentage of cases encompass a wide variety of Surgical Specialties including: Medicine, Hepatobiliary, Foregut, Colorectal, Vascular, Tumor, Neurosurgical, Orthopedic, ENT, Thoracic, Genito-urologic, Plastics, and rarely Pediatric and OB/GYN Surgery.

Methods Used to Assess Patient Needs

An interdisciplinary approach to patient care management is used to assist the patient/family in making an educated decision about his/her care. Nursing and surgical house staff, under the direction of a surgical attending and a unit intensivist act collaboratively with respiratory therapists, nutritionists, and pharmacists to develop and plan an appropriate plan of care with the patient/family. Additional collaboration exists with Social Services, Pastoral Care, OT/P.T., Radiology, and Epidemiology.

Scope of Service and Complexity of Care

The unit cares for patients for the purpose of supporting patients in varying states of recuperation from traumatic injuries and/or surgical interventions; preventing complications and promoting healing; evaluating and treating acute traumatic injuries; educating patient/family to improve self-care abilities, health maintenance and rehabilitation; and facilitating transfer from the Intensive Care setting.

Quality Control Indicators

- Nursing process
- Inpatient/family teaching
- Blood transfusion self-monitoring
- Pain monitoring
- Restraint monitoring
- Environmental rounds
- Fall prevention
- Pre-op Preparation
- Clinical Alarms
- Central Line associated Bloodstream Infections
- Universal Protocol
- Patient Identification Practices
- Catheter Associated Infections
- Pressure Ulcer Prevention and Management
- Ventilator Associated Pneumonia

Refreshed/Reviewed: March 2005; December 2012; January 2016; June 2020

Approved: August 2020

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Performance Improvement Indicators

- Pulmonary function improvement of patients on mechanical ventilation
- Decrease pressure ulcer episodes
- Decrease restraints episodes
- Hand Hygiene Compliance
- Reduce Catheter Associated Blood Stream Infections
- Reduce Pressure Ulcers
- 1115 Waiver VTE Prevention and Compliance
- 1115 Early Sepsis Recognition and Intervention.
- Decrease Call light Time
- Increase Patient Satisfaction Scores
- Increase Vaccine Assessment and Administration
- Welcome Packets for the ICU

Recognized Standards

Care is provided consistent with applicable regulatory and professional standards inclusive of, but not limited to the California Board of Registered Nursing, OSHA, Joint Commission for the Accreditation of Hospital Organizations, Title 22, DHS, FDA, American Association of Critical Care Nurses, and the American College of Surgeons.

Availability of Necessary Staff

The unit operates 24 hours a day, 7 days a week. The nursing staff reports to a Nurse Manager (NM) who works collaboratively with the unit intensivist. The NM is responsible for providing sufficient quantities of nursing staff to meet the acuity needs of the patients and the census of the unit. S/he is responsible for the quality of the nursing care provided and the performance of assigned staff. Staff on the unit have specific competency assessments for their professional level and /or job description. Registered Nurses provide patient care. Nursing Attendants and clerical staff provide support.