LAC+USC MEDCIAL CENTER NEUROSCIENCE ICU – 4C SCOPE OF SERVICES

Departmental Purpose

The Neuroscience ICU is a 20-bed unit, which serves as an important component of the continuum of care in the Northeast Cluster. The unit exists to provide intensive care nursing to those patients who are critically ill who require intensive monitoring and treatment in the LAC+USC Medical Center. Care is ongoing and encompasses varying states of recuperation from diagnosis to treatment and rehabilitation.

Types and Ages of Patients Served

The Neuroscience ICU cares for critically ill adolescents, adults and geriatric patients with a focus on Neurologic dysfunction admitted from the Emergency Department, the Medical and Surgical Wards or outside transfers requiring higher level of care. Major medical diagnoses include: Penetrating head trauma; blunt head trauma; spinal cord injuries; aneurysms; A.V.M.; brain tumors; cranial fractures; hydrocephalus; intracranial hemorrhage, subarachnoid hemorrhage; and epidural hematoma, Cerebral Vascular Accidents, Seizure Disorders, Meningitis/Encephalitis, Brain/Spinal Tumors, Guillain-Barre Syndrome/Myasthenia Gravis and Multiple Sclerosis.

Methods Used to Assess Patient Needs

A multidisciplinary approach to patient care management is utilized to asses and assist the patient/family in making educated decisions about his/her care. Nursing and the neurosurgery / neuromedicine house staff that are under the direction of a Neuroscience Attending and Neurology Critical Care Attending, act collaboratively with PT/OT, Nutritionist, Social Services, Pharmacy, and Speech Therapy to develop and plan an appropriate plan of care with each patient. Additional collaboration exists with Pastoral Care, Palliative Care, the Department of Radiology, Laboratory Services, One Legacy, Epidemiology, and the Pain Management Team.

Scope of Service and Complexity of Care

The focus of care is to stabilize and restore the patient to their optimal level of functioning by supporting critically ill patients in varying states of recuperation from traumatic injury, surgical or therapeutic interventions. Important aspects of care involves managing appropriate invasive monitoring equipment; managing life support equipment; preventing complications and promoting healing; evaluating and treating acute injuries; providing a therapeutic environment; educating patient/family to improve self-care abilities, health maintenance and rehabilitation; and facilitating transfer from the intensive care setting.

Determining the Extent to Which the Level of Care Meets Patient Needs

Patients are continually assessed for their response to therapeutic interventions and for the attainment of desired goals. Nursing participates in performance improvement activities and quality monitoring. Patient satisfaction surveys are mailed to patients after discharge.

Quality Control Indicators

- Nursing Process
- Pain Management
- Restraints
- Patient Falls
- Clinical Alarms
- Ventilator Associated Pneumonia

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Quality Control Indicators conti.

- Patient Identification Practices
- Core Measures
- Central Line Associated Blood Stream Infection
- Catheter Associated Urinary Tract Infection
- Hand Hygiene
- Pressure Ulcer Prevention and Management
- Patient/Family Teaching

Performance Improvement Indicators

- Hand Hygiene Compliance
- Fall Prevention
- Reduce Catheter Related Blood Stream Infection
- Reduce Catheter Associated Urinary Tract Infection
- Reduce Hospital Acquired Pressure Ulcer Incidence

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, Title 22, the American Nurses Association, the FDA, the Department of Health Services, the American Association of Critical Care Nurses, the American Medical Association, and the American Academy of Neurosurgeons and the American Academy of Neurologists.

Availability of Necessary Staff

The unit operates 24 hours a day, 7 days a week. The nursing staff reports to a Nurse Manager who works collaboratively with the service Chief of Neurosurgery/Neuromedicine. The Nurse Manager is responsible for staffing the unit with adequate nursing staff and ancillary staff to meet the acuity needs of the patients and the census of the unit. She or he is responsible for the quality of the nursing care provided and the performance of the assigned staff. Staff on the unit has specific competencies for their professional level and/or job description. Patient care is provided by Registered Nurses who have successfully completed all aspects of the CORE Critical Care Program and/or have obtained a CCRN credential. Nursing attendants and clerical staff provide additional support.