



LINE ALERT! SOUTH SEMINOLE PCU

CENTRAL LINE BLOODSTREAM INFECTION PREVENTION

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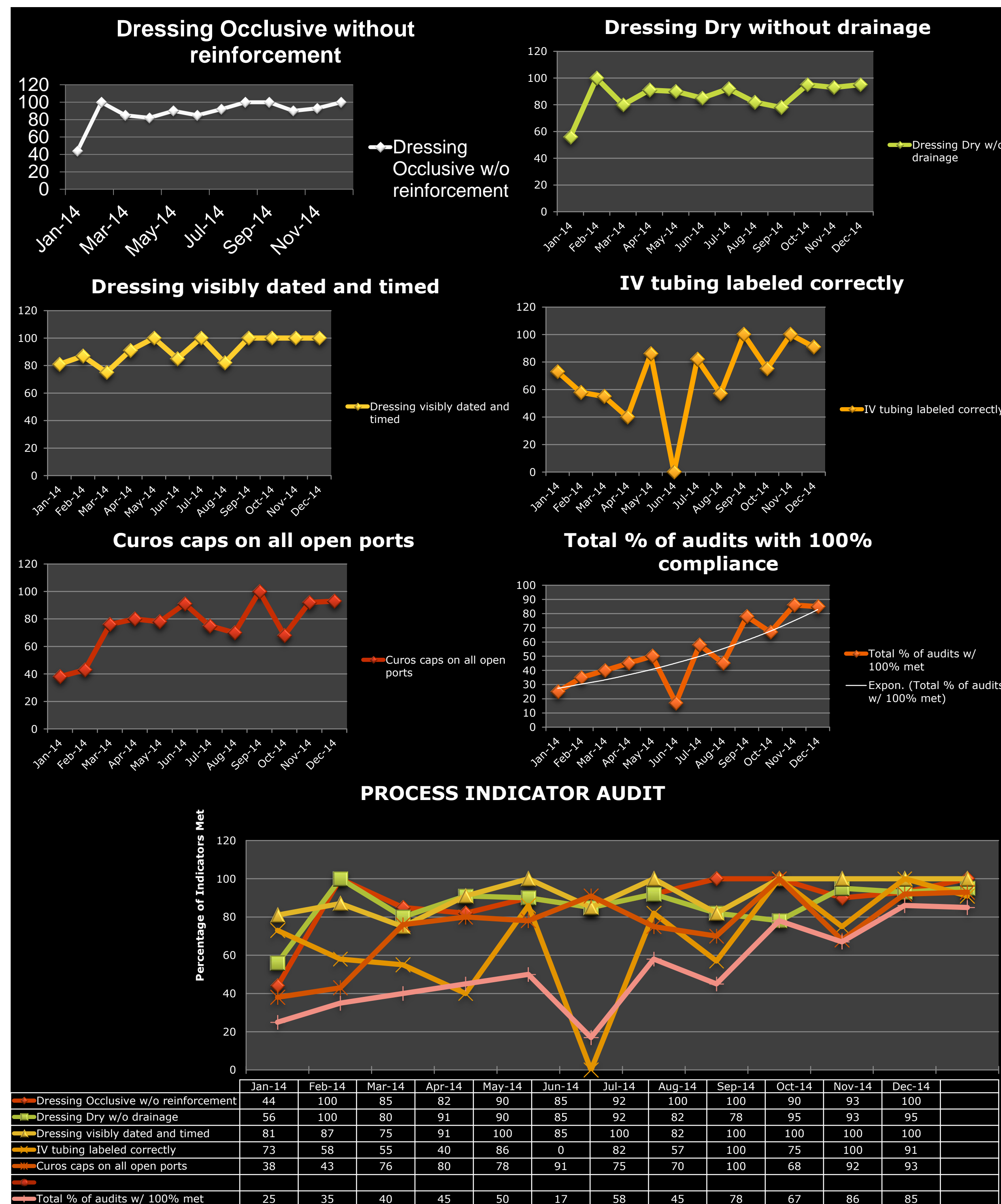


Problem

South Seminole Hospital PCU had a CLABSI in November of 2013. In 2014, corporate standards were announced for non-ICU areas to measure evidence based processes shown to prevent CLABSI. Initial data collection on PCU showed large variability and poor compliance on several of the process metrics, leaving our patients potentially at risk for CLABSI.

Methods

- Audits were conducted once weekly for all patients on the PCU census.
- Included Patients:**
 - Patients with triple lumen CVLs, PICC lines, implanted ports, temporary dialysis catheters, or other CVLs.
- Metrics:**
 - Dressing occlusive without reinforcement
 - Dressing dry without drainage
 - Dressing dated and timed
 - IV tubing labeled per policy
 - Green alcohol-impregnated caps present on all open ports.



Approach to the Problem

- Audits Conducted Weekly
- Real time feedback to team members on opportunities for improvement.
- Central Line Checks included in charge RN & CANM daily rounding checklists.
- Trends and opportunities posted on unit quality board and shared with the UPC on a monthly basis.

Results

- Baseline Data Jan 2014:** 25% of audits had 100% compliance for all metrics.
- Dec 2014:** 85% of all audits achieved 100% compliance.
- All metrics showed positive compliance trends throughout the year.
- Metric with most improvement:**
 - Compliance with alcohol-impregnated cap use
 - 38% in January 2014 improved to 93% in December 2014
- Labeling of IV tubing reduced variability:**
 - Compliance January -August ranged from 0% to 86%,
 - September through December compliance consistently greater than 75% each month.

Conclusions & Outcomes

- PCU engaged frontline nursing staff through real time feedback on weekly audits from peers.
- The UPC, charge RN & CANMs, and quality boards were also key in providing feedback.
- The South Seminole PCU did not have a CLABSI in 2014!**