

Steady and Consistent: Improving Daily CHG Treatments for Patients with Central Lines



Authors: Stephenie Blossomgame MSN, RN, NEA-BC; Aurea Enriquez, BS, M (ASCP), CIC®; Amanda Erman, MS, APRN, CCNS-Neonatal; Tiffany G. Eubanks, MSN, RN; Bridget Garrity, MSN, RN, CCRN; Frances Gomez, MSN, RN; Trevor Jenrich; Rachel Hensley, RN, MSN, OCN, CNL; Rachel Marrs, DNP, RN, CIC; Edmund R. Perez, MSN, MBA, PhD, RN, NE-BC; Sally Walton, DNP, MBA, RN, OCN, NEA-BC, FACHE

Problem

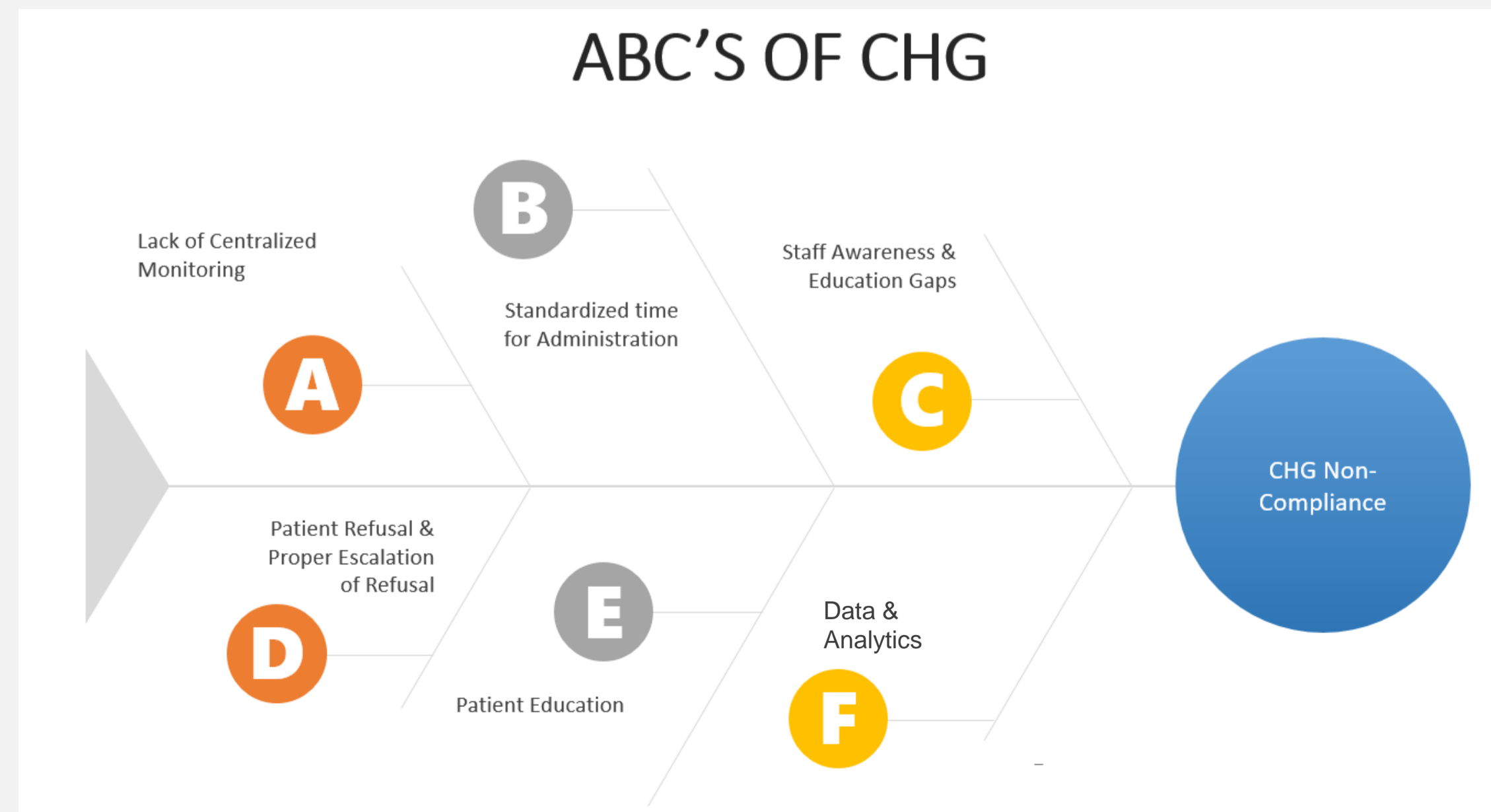
- CLABSIs are associated with increased morbidity and mortality, increased LOS, and significant healthcare costs
- Institutional CLASBI rate increased in FY22 and FY23
- Provision of daily CHG treatment was difficult to track and compile data requiring significant time from unit leaders/team members
- 45.5% of patients with central lines received daily CHG treatments in December 2019

Goal

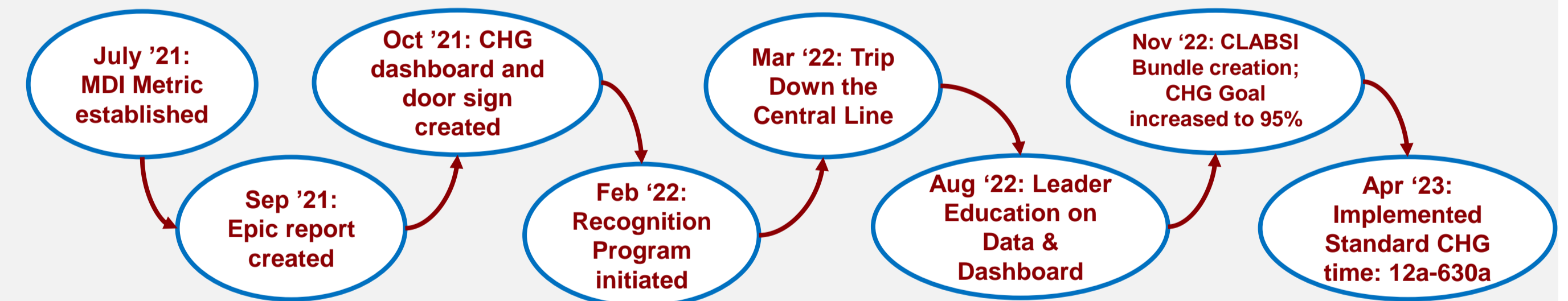
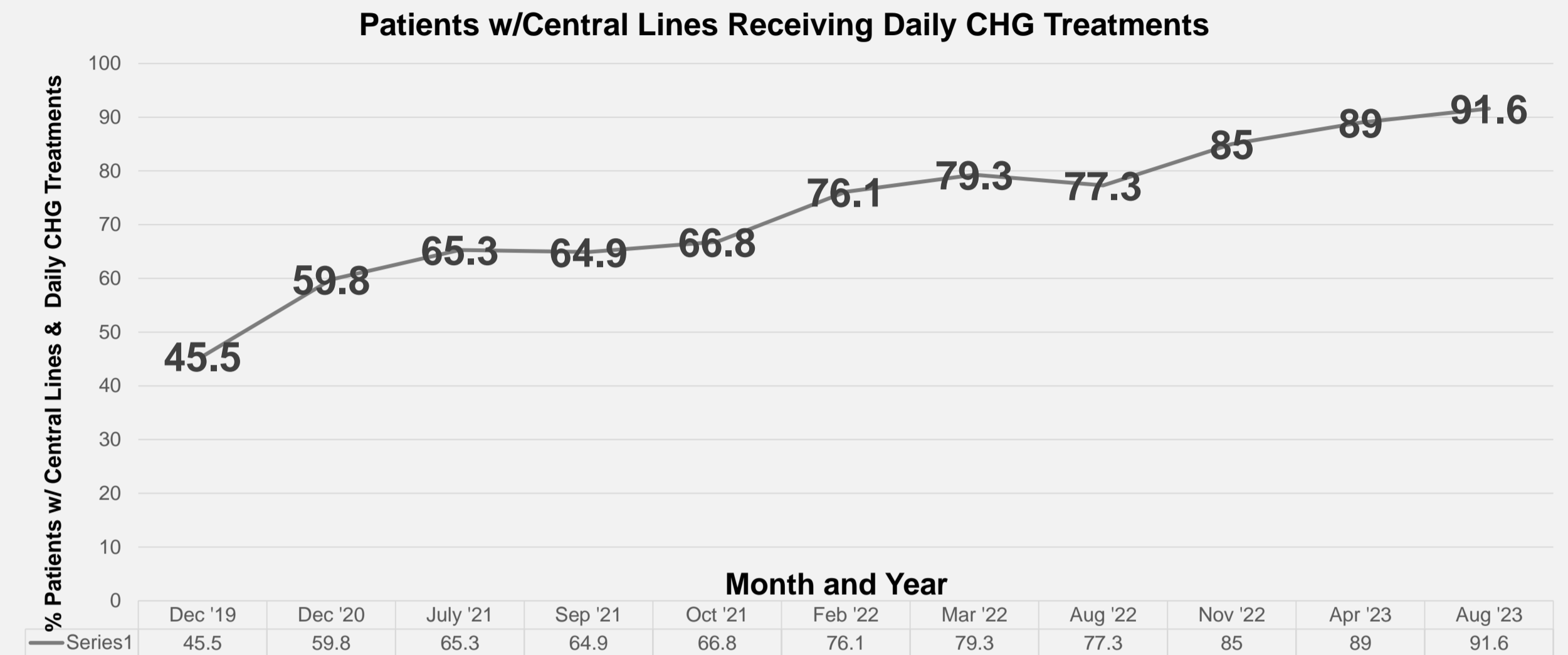
- Meet FY24 CLABSI Goals: Rate = 0.87 or # of CLABSIs < 58/year (<5/month) and SIR= 0.71
- At least 95% of patients with central lines receive daily CHG treatments
- Provide visible, meaningful, and actionable data to frontline staff, unit leaders, and provider teams

Strategy

- CLABSI committee establish meeting cadence (monthly or bi-monthly) to review data
- Meeting outcomes aimed at implementing strategies for improving daily CHG treatment provision across all disciplines
- Stakeholders across all units and disciplines engaged in implementation strategy planning
- CHG dashboard created to track CHG treatment trends



Results to Date and Strategic Intervention Timeline



Next Steps

- Between 2019 and 2023, there was continued improvement in providing daily CHG treatments to patients with central lines
- Although, CLABSI goals were not met, next steps include standardizing blood culture practices, continuing to discuss central lines in multidisciplinary rounds, partnering with provider teams and simulation center for continued education opportunities, developing processes for the use of midline catheters when possible

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