



Healthcare Organization Commitment

Contact Details

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Position

Chief Medical Officer

Organization Name

UCI Health

Commitment Details

How many hospitals are represented in this commitment?

Last Report	Current
1	1

Action Plan

- Use a standardized process, including a checklist for central line insertion - Use a standardized kit and process for central line dressing changes - Use chlorhexadine (CHG) for patient bathing - Use a systematic process to daily assess the central line insertion site and need for removal - Develop and implement use of materials to promote peer to peer hand hygiene accountability CLABSI core improvement team is in place. CLABSI cases provided to unit manager and Medical Director for review. "1,2,3... Count w/Me" continuing in 2018. OC Shield Project housewide - CDC public healthcare initiative targeting reduction of MDROs across the healthcare continuum through decolonization with CHG bathing and nasal iodophor for all adult ICU and contact isolation patients. Nursing educators providing

support with the central line care best practices with roving cart education ongoing. Central line rounds conducted on outlier units focusing on insertion site and dressing appearance. CLISA is being transitioned into Epic.

Commitment Update

Used a systematic process to evaluate central line insertion site and daily assessment for removal; Documentation embedded in Epic. Implemented institution wide scrub the hub practice with nurse and patient/family participation. Daily chlorhexidine bathing and nasal iodophor decolonization for all adult ICU and contact isolation precaution patients. Central line rounding in outlier units. Targeted PI on units with outlier CLABSI performance. Development of an apparent cause analysis form to review CLABSI cases; in progress. New central line dressing product was implemented throughout organization. Central line education video assigned to nursing staff annually. In late 2017, the medical record program transition to Epic resulting in loss of functionality / processes related to central line documentation and central line assessment communication. CLABSI cases were at an all time low in the last 3 months of 2018, with 1 case housewide. CLABSI Performance Improvement Team is active. CLABSI cases provided to unit manager and Medical Director for review.

Other

Challenge 2F - Central Line-associated blood stream infections (CLABSI)

Please describe any best practices your organization has learned through your commitment and share valuable lessons or challenges that were overcome

Supporting compliance with basic best dressing practice has been a key focus in efforts to sustain CLABSI reduction. Staff desire visual demonstrations for appropriate use of products and sequencing of dressing changes, therefore an in-house video was developed. This has helped keep practice consistent and expectations very clear. Dressing change policy has remained at once per week and as needed. This scheduled systematic approach supports accountability and consistency.

Impact Details

Initial Commitment	Commitment Update	Project Next Year
Lives Lost 0	Lives Lost 0	Lives Lost

Lives Spared Harm Target 0	Actual Lives Spared Harm in last 12 months 0	Lives Spared Harm Target for following calendar year 0
Lives Saved Target 0	Actual Lives Saved in last 12 months (might differ from initial target) 0	Projected Target of Lives Saved for following calendar to try to finish commitment 0
	New Lives Lost (lives lost – actual lives saved) 0	

Acknowledgement

Yes, I acknowledge that this commitment may be used for external communication and publicly announced at the World Patient Safety, Science & Technology Summit. Furthermore, I agree that this commitment may appear on the website of The Patient Safety Movement Foundation or the Masimo Foundation. I also give permission for my commitment to be used in support of the promotion of the World Patient Safety, Science & Technology Summit as well as The Patient Safety Movement initiative.