ICU CAUTI & CLABSI Reduction Program

Our goal is to "Keep You Safe," by providing care in an efficient, safe, and caring environment. Health care-associated infections (HAI) are a threat to patient safety. The prevention and reduction of healthcare associated infections is a top priority for us. We strive to keep you safe by continuously reviewing and improving our outcomes through continual process improvement and following current evidenced based practice guidelines.

Catheter-associated Urinary Tract Infections (CAUTI)

A urinary tract infection (UTI) is an infection involving any part of the urinary system, including urethra, bladder, ureters, and kidney. UTIs are the most common type of healthcare-associated infection reported to the National Healthcare Safety Network (NHSN). Among UTIs acquired in the hospital, approximately 75% are associated with a urinary catheter, which is a tube inserted into the bladder through the urethra to drain urine. Between 15-25% of hospitalized patients receive urinary catheters during their hospital stay. The most important risk factor for developing a catheter-associated UTI (CAUTI) is prolonged use of the urinary catheter. Therefore, catheters should only be used for appropriate indications and should be removed as soon as they are no longer needed.

Central Line-associated Bloodstream Infections (CLABSIs)

A central line (also known as a central venous catheter) is a catheter (tube) that doctors often place in a large vein in the neck, chest, or groin to give medication or fluids or to collect blood for medical tests. You may be familiar with intravenous catheters (also known as IVs) that are used frequently to give medicine or fluids into a vein near the skin's surface (usually on the arm or hand), for short periods of time. Central lines are different from IVs because central lines access a major vein that is close to the heart and can remain in place for weeks or months and be much more likely to cause serious infection. Central lines are commonly used in intensive care units.

A central line-associated bloodstream infection (CLABSI) is a serious infection that occurs when germs (usually bacteria or viruses) enter the bloodstream through the central line.



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We have implemented the following actions to keep you safe and to reduce the incidence of infections:

- Provided additional education to staff on why we perform CHG bathing and the proper CHG bathing techniques.
- Increased CHG bathing surveillance reviews to ensure compliance. Compliance increased from 62% to maintaining 90% or greater since.
- Perform daily surveillance audits of central line and urinary catheters to ensure proper care and maintenance of lines.
- Any breaks in proper care or maintenance are addressed in real time with the staff, to correct the breaks and determine any barriers to current practices.
- Educated staff using multiple tools to increase the awareness of what a CLABSI and CAUTI are and who we can prevent them.
- Work with providers, staff, patients, and family to decrease utilization and educate on why these types of devices are not for routine use.
- Tools were created to help monitor the lines presents and their continued necessity to use during rounds.
- Increased communication with providers during ICU Multidisciplinary rounds regarding how long the lines have been in place and if they can be removed and if not, why they need to be continued.
- Additional education and processes were created around specialized procedures that use central lines, such as CRRT.
- Improved the central line insertion checklist and increased awareness of individuals in the room being in appropriate sterile procedure PPE
- No blood draws are to be done from central lines.
- Application of Nozin (alcohol based nasal antiseptic) to reduce MSSA and MRSA colonization and reduced potential infections.
- Specific criteria required to place central line and urinary catheters.
- Alternatives to central lines and urinary catheters are encouraged.

Standard Infection Ratios (SIR):

Urinary Catheters HAI SIR



Central Lines HAI SIR



