



HEALTH QUALITY & SAFETY  
COMMISSION NEW ZEALAND

*Kupu Taurangi Hauora o Aotearoa*



APPLIED HEALTHCARE INNOVATION

*Collaborative to Prevent Central Line Associated Bacteraemia*

# National Collaborative to Prevent CLAB

DHB: NELSON ICCU



Team members: Scott Silcock

# Organisational “Buy –In”

- Nelson ICCU is a seven bed combined ICU/CCU/HDU, more than %60 of admissions are for CCU patients and don't require Central line therefore our line days a lot less than the larger scale hospitals
- Nelson ICCU came into the Collaborative after its commencement. An IV committee headed by Margie Burt already had the ball rolling with a CVL insertion and maintenance checklist, I really had the job of creating awareness and advertising the new bundle and also auditing the ICU compliance information, I did this with the backing of Nelson ICCU Intensivist (Dr Bruce King) and Charge Nurse Manager ICCU (Robyn Price).

# What Changes have you tested?

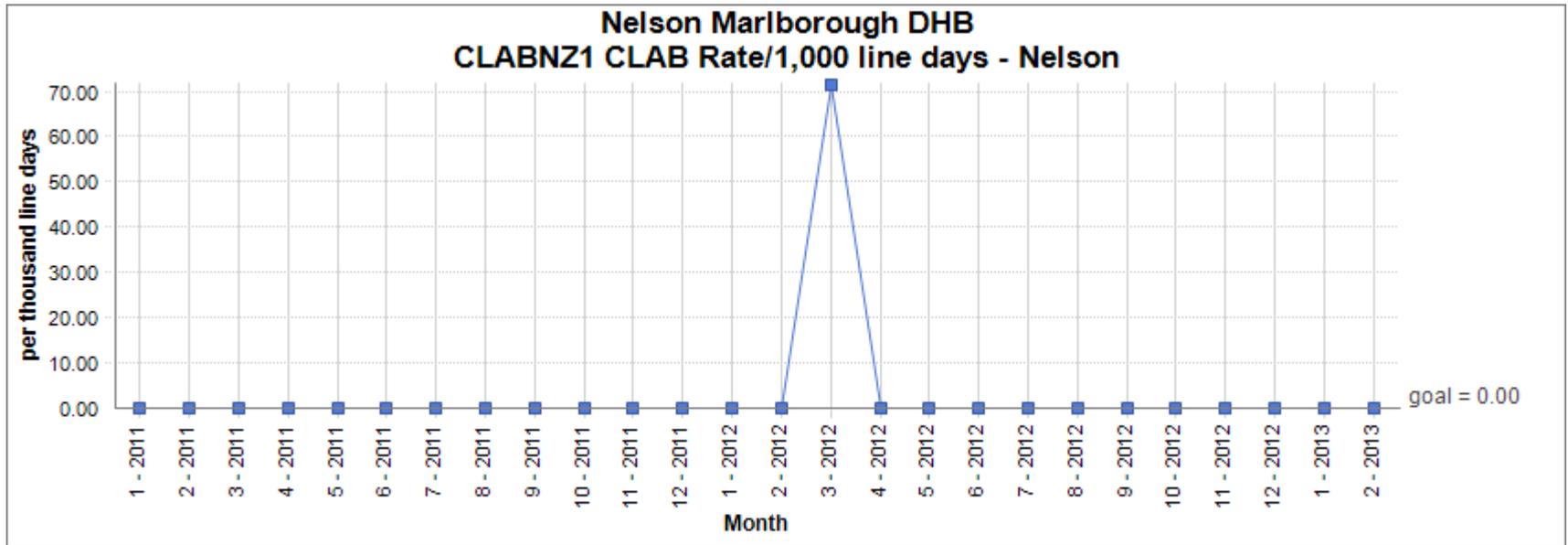
	Change Tested	Outcome
1	Implementation of CV line insertion & maintenance checklists.	Mostly has been a success with the majority of staff, utilising the checklists & viewing them as a tool for maintaining up to date & safe practice
2	Encouraging nursing staff to be proactive with Blood cultures and necessity of Line	The staff have been receptive with this, I have also witnessed staff questioning the necessity of IV cannulas and IDC's more.
3	New CV line packs made up in ICCU to ensure all appropriate measures & equipment are taken when inserting & maintaining CV lines.	The CV line packs in ICCU have had success with those that use them. However the majority of Central lines in Nelson Hospital are inserted in theatre.....

# Most Successful PDSA Cycle?

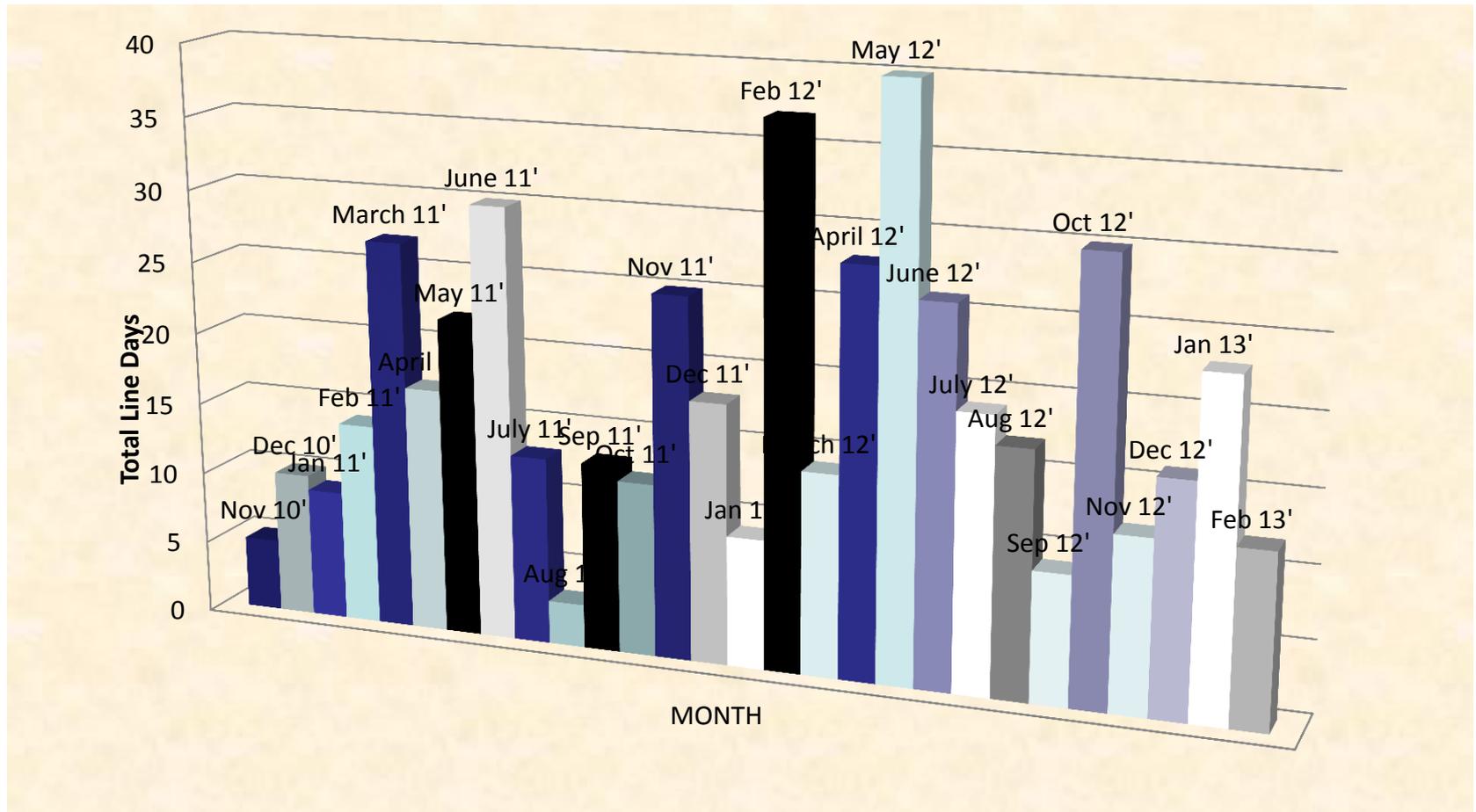
- PLAN** - To obtain compliance from the majority of the CV line inserter's
- Do** - Discuss with Inserters what their current practice is and strive for the best current practice in our Hospital
- STUDY** - Observe the data for trends in compliance, (eg, some inserters weren't wearing masks).
- ASSESS** - Get support from the infection control dept and other compliant CV line inserters. Pinpoint areas of concern and discuss/suggest possible solutions

# Measures Summary

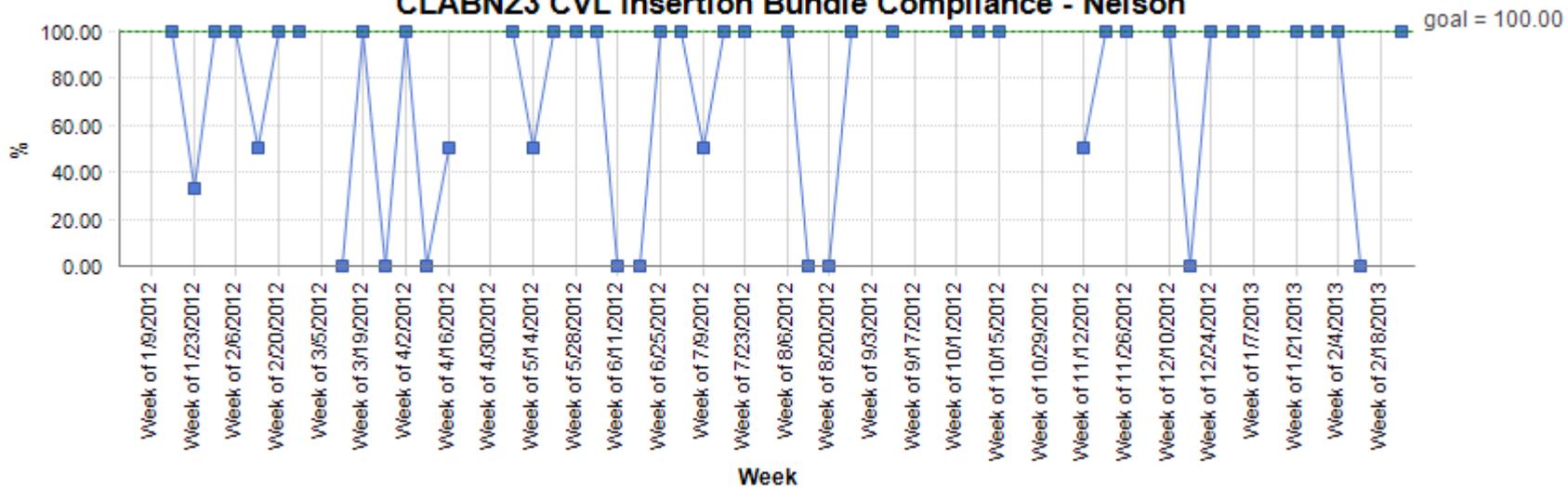
## 345 DAYS SINCE LAST CLAB!



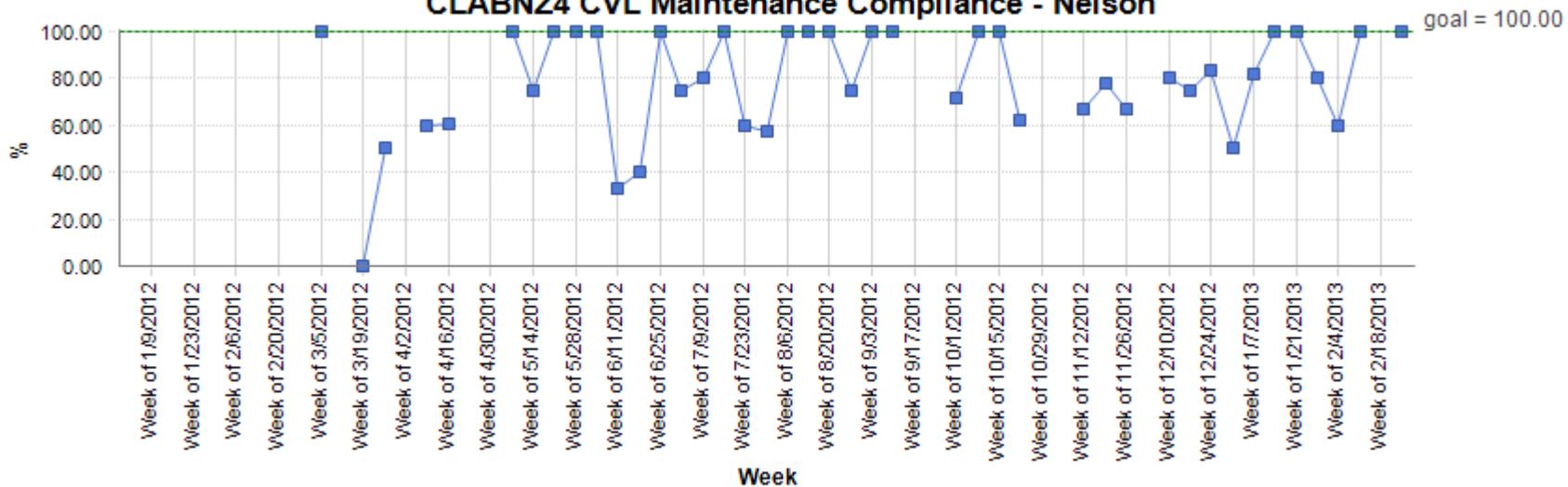
# Number of CV line days - Nelson



### Nelson Marlborough DHB CLABNZ3 CVL Insertion Bundle Compliance - Nelson



### Nelson Marlborough DHB CLABNZ4 CVL Maintenance Compliance - Nelson



# ***HIGHLIGHTS***

- Most of the CV line inserters have been compliant since the implementation of this program, insertion compliance has most definitely improved
- The nursing staff in ICCU have become more proactive with taking blood cultures, reviewing the necessity of CV lines and general maintenance/awareness has improved
- I believe when we diagnosed our first CLAB in March this 2012, most staff have since become more aware of the Collaborative and the likely benefits and therefore began taking it more seriously

# **LOWLIGHTS**

- *Some of the staff were hesitant to being filling out more “bloody paperwork”*
- *Our first confirmed CLAB of the year, although I put this on the highlights list also, I thought I better put it on the lowlights list since our goal is zero CLAB!*
- *A high percentage of central lines in our ICCU came from HDU patients post op, this sometimes made it difficult for me to track the CV line’s journey (especially if paperwork wasn’t filled out correctly)*

# Roll Out

- The CV insertion and maintenance bundles have already begun being implemented throughout Nelson Hospital as per the IV committee.
- As well as ICCU, we now have roll out in the two surgical wards, theatre and the Emergency Department.