7.1.5 Infection Prevention
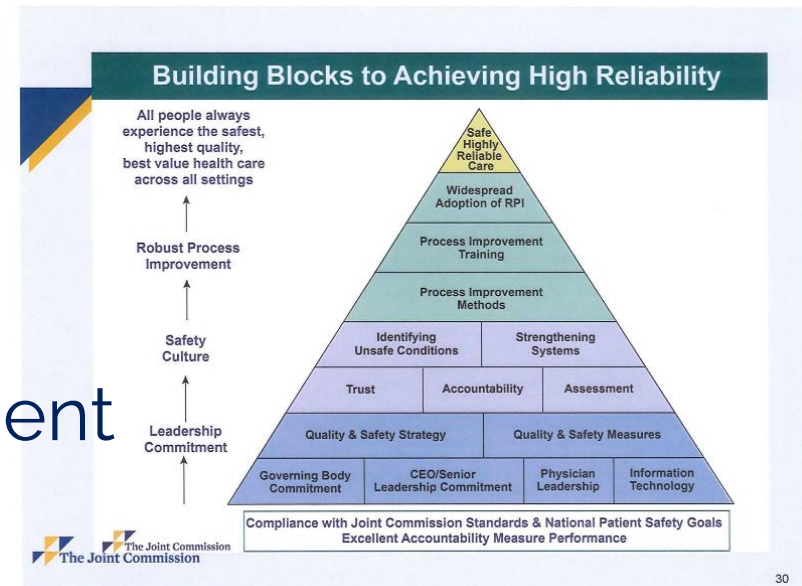
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High Reliable Organization

- Chief Medical Offices, Infection Control Physicians, Quality Leaders & Infection Control Staff

- Transformational Change

  - Leadership

  - Safety Culture

  - Robust Process Improvement

- Commitment to Zero Harm

Building Blocks to Achieving High Reliability

All people always experience the safest, highest quality, best value health care across all settings

Robust Process Improvement

Safety Culture

Leadership Commitment

Safe Highly Reliable Care

Widespread Adoption of RPI

Process Improvement Training

Process Improvement Methods

Identifying Unsafe Conditions | Strengthening Systems

Trust | Accountability | Assessment

Quality & Safety Strategy | Quality & Safety Measures

Governing Body Commitment | CEO/Senior Leadership Commitment | Physician Leadership | Information Technology

Compliance with Joint Commission Standards & National Patient Safety Goals
Excellent Accountability Measure Performance

The Joint Commission

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Standardization

- District-wide Infection Prevention Plan

  - Standardize approach to emerging threats

    - (Measles) 9 screened – 1 positive

- Standardize Products & Protocols

- Intense Analysis for every event

  - At local level, evaluate processes, track & trend

- Unified Goals

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Chasing Zero

	CLABSI- Central Line Associated Blood Stream Infection	CAUTI- Catheter Associated Urinary Tract Infection	C-DIFF	MRSA
FY20	23 (38)	25 (38)	74 (178)	20 (22)
SIR	**0.60**	**0.65**	**0.42**	**0.93**
FY21	32 (42) (15 Covid)	28 (44) (4 Covid)	66 (190)	20 (21)
SIR	**0.75**	**0.63**	**0.35**	**1.02**
FY22	29 (46)	21 (48)	45 (219)	12 (23)
SIR	**0.63**	**0.44**	**0.21**	**0.54**
FY23	12 (38)	7(42)	19 (164)	15 (21)
SIR	**0.32**	**0.167**	**0.12**	**0.73**
FY24 through Dec	**8 (18)**	**6 (21)**	**13 (104)**	**5 (11)**
SIR	**0.45**	**0.28**	**0.13**	**0.48**

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Processes FY24 YTD (Dec)

- Central Line Associated Blood Steam Infection (CLABSI)
  - Out of **14,170**-line days
  - **8** clabsi
  - Action Plan: Utilization, line location, LOS, care & maintenance
- Catheter Associated Urinary Tract Infection (CAUTI)
  - Out of **11,437** Foley days
  - **6** cauti
  - Action Plan: Utilization, HOUDINI Protocol, LOS, care & maintenance

- Multi-Drug Resistant Organisms
  - Out of **161,630** patient days
  - **13** C Diff cases
  - **5** MRSA cases
  - Early Identification- POA vs. HAC
- Surgical Site Infections (SSI)
  - Out of TAH & Colon cases
  - **10** SSI (5 Colo, 5 TAH)
  - Standardize
    - Pre-op: Weights, CHG, Glucose
    - Inter-op: Weight based ABX, temp control, re-dosing ABX
    - Post-op: Glucose, wound care

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Outcomes

- Accountability in practice
  - Onboarding & annual competence
- Chasing Zero -Benchmark & Thresholds
- Standardize Presentation of Data
- Evidence based practice review
- Improve Public Reporting
  - CMS Star Rating, Leapfrog, & Value Based Purchasing

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