

EFFECTIVENESS ANALYSIS OF INTERPROFESSIONAL COLLABORATIVE PRACTICE ON CENTRAL LINE ASSOCIATED BLOODSTREAM INFECTION

P222

Hui Hsien Lai¹, Hui-Chun Tu², Ming-Yuan Hsieh¹, Hsin-Yi Chiu¹, Chih-Cheng Wu¹

¹Center of Quality Management, ²Infection Control Center, NTU BioMedical Park Hospital, Hsinchu County, Taiwan

INTRODUCTION

Central Line-Associated Bloodstream Infection (CLABSI) is an important indicator of medical care in various hospitals. The number of central line-associated bloodstream infection in general wards of our hospital has increased month by month since August 2021, and the infection rate in October was as high as 0.52‰, higher than the average of hospitals in Taiwan is 0.28‰, and CLABSI is above the annual average of 0.23‰ for six consecutive months, which is an indicator that needs to be improved. Analysis infection rate from 2021 to 2022 in our hospital, bloodstream infection in general wards and CLABSI accounted for 64% on infection rate. Deploying interprofessional collaborative practice to achieve the effect of CLABSI in general wards, improve the quality of medical services and save medical costs.

AIM

Reduced bloodstream infection in general ward.

METHOD

Personnel include: physicians and nurses, infection control center, quality management center. Use focus PDCA, Gantt chart and 5W1H and other quality control methods to improve the effectiveness of the project.

Four strategies are proposed including:

1. Revise 4 related care specifications for CLABSI.
2. Nursing audit of catheter insertion: (1) Infection center goes to the ward every month to conduct and audit the operation and audit of aseptic technique of tube administration; (2) Implement combined care (Bundle Care) measures, "central catheter placement inspection Form" and "Central Catheter Daily Care Evaluation Form"; (3) Strengthen publicity on the correct selection of catheter placement sites, avoiding high-risk infection sites.
3. Strengthen the compliance and correctness of hand hygiene of medical staff: conduct courses and increase the frequency of audits.
4. Implement newcomer and on-the-job education and training: (1) pipeline care is included in the newcomer education training and test; (2) learning at any time from the teaching video on the hospital education and training network (TMS); (3) on-the-job education in the sensory center Training (4) The head nurse conducts publicity in the morning meeting.

RESULTS

Completed during the period:

1. Revise a total of 4 related care specifications related to central catheters.
2. Nurses' compliance with combined care increased from 20% to 60%; the ratio of femoral vein location selection for central catheter placement decreased from 65% before improvement to 40%.
3. The hand hygiene compliance rate of medical staff increased from 94% to 97%, and the correct rate of hand hygiene increased from 93% to 98%.
4. The education and training completion rate of new recruits was 80% increased to 90%; on-the-job education and training increased from 25% before improvement to 60%. Through the improvement of various strategies, the bloodstream infection rate related to the central catheter in the general ward of our hospital will be from October 2021 to January 2022, the average value before improvement is 0.43‰; from February to May 2022, the continuous follow-up improvement will be 0.23‰. The rate of change dropped significantly by 47.18%.

(1) the bloodstream infection rate related to the central catheter in the general ward (0.43 ‰→0.23 ‰)

