STEPs TO REDUCING INFECTION RISK:
A MULTI-HOSPITAL SYSTEM APPROACH TO HOSPITAL-ACQUIRED INFECTION (HAI) REDUCTION

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**Situation**

- Hospital-Acquired Infections still represent substantial risk of harm to our patients
- There is a need to standardize the approach to HAI prevention to achieve favorable results
- It is important to ensure a favorable impact on improving safety and reducing cost to all ministries
- Ascension Health was selected as one of 26 Hospital Engagement Networks in 2011
- Support was provided as a System to provide educational/technical help for improving the work of our Health Ministries preventing HAIs

**Background**

The Centers for Medicare and Medicaid Services (CMS) have recently funded efforts to address HAIs through “Partnership for Patients”. Twenty-six Hospital Engagement Networks (HEN) were created to address hospital-acquired conditions including four infections: central line-associated bloodstream infection (CLABSI), catheter-associated urinary tract infection (CAUTI), ventilator-associated pneumonia (VAP), and surgical site infection (SSI). In January 2012, Ascension Health was selected by CMS as one of 26 networks to participate in the Partnership for Patients HEN, with goals to reduce hospital acquired conditions by 40%, and readmissions by 20%. Ascension Health conducted a survey of Ascension Health hospitals addressing infection control processes applicable to CAUTI, CLABSI, VAP, and SSI. The survey addressed policies, healthcare worker (HCW) competencies and practice and patient outcomes evaluation.

**Assessment**


**Key Findings:**

- Overall, the vast majority of hospitals had established policies to address urinary catheters, vascular catheters, surgery and mechanical ventilation.
- Despite reporting high compliance with measures to reduce risk, evaluating competencies and offering education to healthcare workers is an opportunity.
- Although feedback is provided to medical and nursing staff, adequate analysis of the event such as root cause analysis was inconsistent across Health Ministries.

**Recommendation**

Identifying the gaps and addressing them as a System will help lead to marked improvements in safety for our patients.

Our results show that additional opportunities for improvement lie in **processes, practices and outcome evaluation and feedback**.

- Implementing periodic evaluation of HCWs’ competencies
- Auditing actual practices and prompt feedback on performance
- Optimizing feedback on outcomes to the different stakeholders.

Evaluation of policies, competencies and practices are essential to help focus efforts of improvement in a large system.

- **General**: standardize policies, education and tools
- **Specific**: identify underperforming hospitals and directly engage them to optimize their performance
- **Essential to success**: regular evaluation of processes and outcomes with feedback