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HAC Your Patients: An Initiative to Decrease Hospital Acquired Conditions

Jobic Ray Butao

West Kendall Baptist Hospital, jobicrayb@baptisthealth.net

Joahna Lausa

West Kendall Baptist Hospital, JoahnaPL@baptisthealth.net

Olivia Cocabo

West Kendall Baptist Hospital, OliviaC@baptisthealth.net

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BACKGROUND

Intensive Care Unit specific Hospital Acquired Conditions (HAC) include Catheter Associated Bloodstream Infections (CLABSI), Catheter Associated Urinary Tract Infections (CAUTI), Falls, Hospital Acquired Pressure Injuries (HAPI) and Ventilator Associated Pneumonia (VAP). Frequent occurrences of HACs reflect poor outcomes, and are costly. Research has shown that purposeful, systematic and evidence-based rounding are tied to positive patient outcomes. ICU's Unit Based Practice Council undertook a project to address HACs in the ICU.

PURPOSE

Through the implementation of HAC Hours, our goals were:

1. To decrease Hospital Acquired Condition (HAC) rates (CLABSI, CAUTI, Falls, HAPI and VAP)
2. To empower staff through education of proper prevention of HACs
3. To standardize management and care of HACs
4. To increase unit awareness about HACs
5. To decrease costs associated with HACs

METHODS

HAC Hours can be summarized into one phrase:

Intentional Rounding.

HAC Hours utilizes a checklist that details the evidence-based and best practice bundles used in the prevention of HACs. The intentional rounding checklist is completed three times a shift, occurring at change of shift between the incoming and outgoing RNs, between twelve and two, and between four and six. These checklists are located in the handoff clipboards of each patient. See Figure 1 for project timeline.

West Kendall Baptist Hospital BAPTIST HEALTH SOUTH FLORIDA An academic affiliate of the FIU Herbert Wertheim College of Medicine		HAC HOURS
CHANGE OF SHIFT to 1000/2200		
<ul style="list-style-type: none"> CAUTI Prevention <ul style="list-style-type: none"> Urinary Catheter is below the bladder, there is unobstructed urine flow, emptied, stabilized, and above the ground Review necessity of urinary catheter CLABSI Prevention <ul style="list-style-type: none"> Flush each port with Push/Pause method Swab caps applied to all unused ports (does not substitute scrubbing the hub with alcohol swab) Tubing/Lines changed/up to date Review necessity of central line Dressing Assessment (Biopatch, Site, Date, Condition) 	<ul style="list-style-type: none"> HAPI Prevention <ul style="list-style-type: none"> Witnessed Skin Check Medical device skin integrity check (BIPaP, NG/ND tube, ETT tube) Allevyn/Skin Protectant applied (Sacrum, Heels, Medical devices) Turn patient q2h, heels/elbows offloaded VAP Prevention <ul style="list-style-type: none"> Oral Care Fall Prevention <ul style="list-style-type: none"> Bed Alarm armed Side Rails Up Call Light at Bedside 	
1200/0000 to 1400/0200		
<ul style="list-style-type: none"> CAUTI Prevention <ul style="list-style-type: none"> Foley care: Theraworx CLABSI Prevention <ul style="list-style-type: none"> Flush each port with Push/Pause method Swab caps applied to all unused ports (does not substitute scrubbing the hub with alcohol swab) 	<ul style="list-style-type: none"> HAPI Prevention <ul style="list-style-type: none"> Turn patient q2h, heels offloaded ETT repositioned VAP Prevention <ul style="list-style-type: none"> Oral Care Fall Prevention <ul style="list-style-type: none"> Bed Alarm armed Side Rails Up Call Light at Bedside 	
1600/0400 to 1800/0600		
<ul style="list-style-type: none"> CAUTI Prevention <ul style="list-style-type: none"> Foley care: Theraworx Penileal Care CLABSI Prevention <ul style="list-style-type: none"> Chlorhexidine Bath Flush each port with Push/Pause method Swab caps applied to all unused ports (does not substitute scrubbing the hub with alcohol swab) Dressing Assessment/Change 	<ul style="list-style-type: none"> HAPI Prevention <ul style="list-style-type: none"> Turn patient q2h, heels offloaded VAP Prevention <ul style="list-style-type: none"> Oral Care Fall Prevention <ul style="list-style-type: none"> Bed Alarm armed Side Rails Up Call Light at Bedside 	

* THIS IS NOT PART OF THE MEDICAL RECORD



August 2017

- UBPC meeting, brainstorm interventions and ideas to improve rates of Hospital Acquired Conditions.
- Present to leadership.
- Education to begin 8/25/17.

January 2018

- First quarter reevaluation of intervention and outcomes in staff meeting.

Figure 1: HAC Hours project timeline

September - October 2017

- Initial education of initiative done in September.
- Execution of HAC Hours initiative in the unit in October.
- Presented in September staff meeting and in daily huddles.

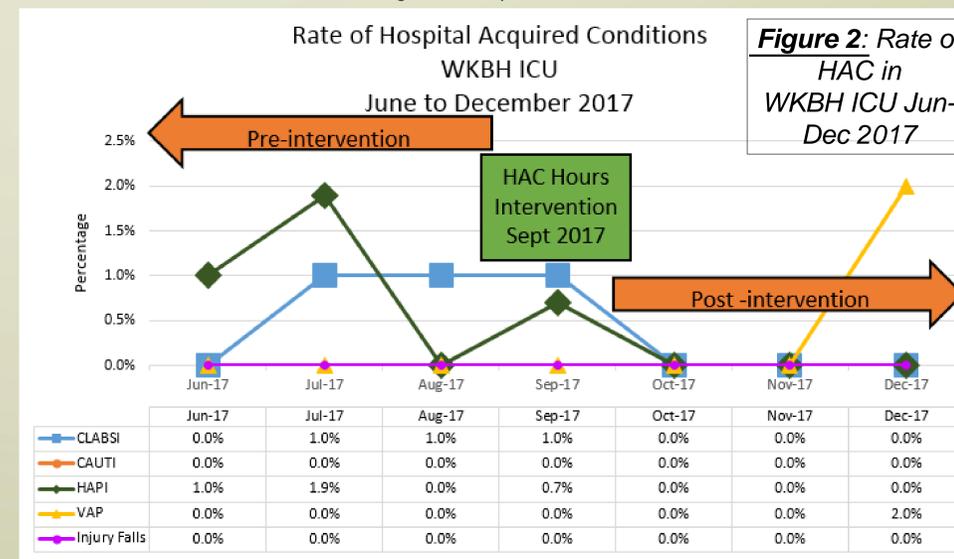


Figure 2: Rate of HAC in WKBH ICU Jun-Dec 2017

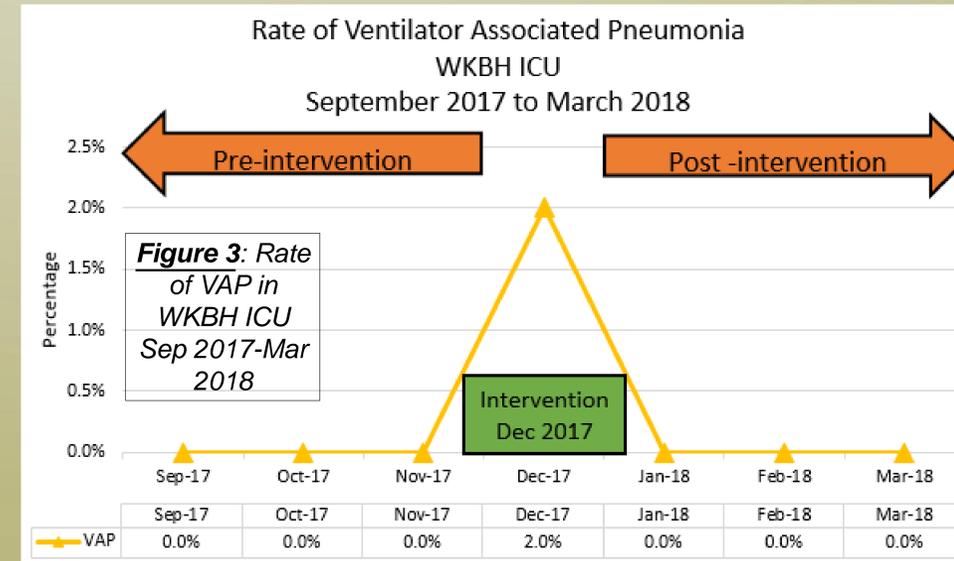


Figure 3: Rate of VAP in WKBH ICU Sep 2017-Mar 2018

RESULTS

Following the implementation of the HAC Hours, CLABSI and HAPI rates improved to zero, CAUTI and Injury falls rates were maintained at zero. However, there was a bump in the VAP rate in month 3 post implementation, the first in two years (Figure 2). We were then able to research more evidence-based prevention bundles and add to our HAC Hours checklist, which has resulted in an improved VAP rate (Figure 3).

DISCUSSION

Intentional rounding facilitated and guided through the use of a checklist proved to be an effective approach to preventing HACs. The checklist became more than a checklist, but became a standard practice and part of the ICU culture of patient care. It also helped to standardize the practice when new hires and float nurses came to the unit, which has had a positive impact towards condition specific outcomes. Since nursing practice is continuously evolving, the fight to prevent hospital acquired conditions will always be a nurse driven priority.

PRACTICE IMPLICATIONS

Intentional rounding with the use of a systematic checklist assists the clinical nurse to drive positive patient outcomes and decrease hospital costs. While the checklist contains interventions that are standards of practice, there are times that these standards get lost in the commotion of a busy shift. The HAC Hours checklist serves as an innovative reminder for the clinical nurse to continuously push to drive positive patient outcomes, incorporating interventions during rounding. This is valuable to nursing practice since it allows focus on these opportunities without impacting work flow.

CONTACT INFORMATION

JobicRayB@baptisthealth.net
JoahnaPL@baptisthealth.net
OliviaC@baptisthealth.net