

**Iowa Healthcare Collaborative
Hospital Learning Community (formerly the Iowa Node)**

**February 2010 Cluster Conference Call
Hospital Associated Infections Cluster
Discussion Summary**

Housekeeping Guidelines for all Cluster Calls

- Participants are encouraged to share their experiences, issues and learnings.
- Ask questions – questions make everyone think outside of their own box.
- Make suggestions to improve the value of the conference calls.
- Please don't put your telephone on HOLD; MUTE your line if needed.
- When speaking to the group, give your name and the facility you are from.

General Announcements for all Cluster Call

- ✓ IHC has a new website with a new look. Visit www.ihconline.org and give us your feedback.
- ✓ **IHC Patient Safety Conference - March 10, 2010** at the Scheman Building on the ISU Campus in Ames features:
 - AM keynote speaker – Dr. Sanjaya Kumar, physician and author of *Fatal Care* – a book of stories of failures in the healthcare system. A family member will share her mother's experience of a medical error and its impact.
 - PM keynote speaker – Dr. Harold Adams, U of I, speaking on the legal ramifications of failure to treat stroke.
- ✓ **Hospital Learning Community Work Day – March 11, 2010** at the Scheman Building on the ISU Campus in Ames features:
 - Pre-conference Session 101 for first time work day attendees to prepare them for participation.
 - Cluster Breakout Sessions 201 – All teach/all learn
 - Improvement Map demonstration
 - Afternoon workshop topics –
 - ✓ Setting up a stroke system in your hospital
 - ✓ NHSN reporting for HAIs
 - ✓ Transitioning patients home – reducing readmissions
- ✓ **Spread Exercise Changes**
 - A new Spread Exercise survey tool has been developed – shorter, easier to complete.
 - Sent to quality leaders in organizations for reporting hospital spread status for 4th quarter 2009.
 - IHC will continue to monitor implementation of improvement strategies in 2010.
 - Some initiatives seem to have stalled in their implementation progress.
 - Those hospitals will be offered assistance in identifying and overcoming barriers.
 - IHC will also focus on sustainability strategies for hospitals that have achieved full implementation of initiatives.
 - CAUTI, Aortic Dissection, Surgical Safety Checklist will be added to the Spread Exercise Survey for 2010 to establish a baseline. Stroke will be added later in 2010.

✓ Improvement Map

- I-Map provides 70 improvement topics for hospitals.
- Comprehensive resource of improvement elements by topic, including key measures, standards, guidelines, resources and a list of mentor hospitals for the topic.
- Go to www.ihc.org/IHO/Programs/ImprovementMap or Google IHI Improvement Map. There is no charge for use of the Improvement Map.
- Need to download Silverlight, a free Microsoft application, in order to use the Improvement Map. Follow the prompts on the IHI Improvement Map website.

Hospital Associated Infections (HAI) February 10, 2010 10:00am Call Summary

Lisa Caffery, Genesis Medical Center - Davenport facilitated the HAI discussion.

Catheter- Associated Urinary Tract Infection (CAUTI)

- Will track implementation of the CAUTI bundle in 2010 to establish baseline
- CAUTI toolkit is on the IHC website: <http://www.ihconline.org/toolkits/cauti.cfm>
- CAUTI is a topic on the IHI Improvement Map.
- Mercy-Des Moines uses catheter order stickers – will share for posting on IHC website
- Burgess Health Center-Onawa – on patient care worksheet, if catheter is scheduled to come out, documentation required if catheter needs to remain inserted
- Winneshiek Medical Center-Decorah uses electronic prompts to physicians
- Mercy-Dubuque uses electronic prompts and daily reminders. Appears in red on daily task list. Have champions on each unit.
- Genesis-Davenport does daily assessments during daily discharge planning process.

HAI/MRSA

- Q'3 2009 Spread data indicates 55% of Iowa hospitals fully deployed
- 2010 goal – 60%
- Patient transfers with MDROs between acute and LTCs remains an issue
- Collecting an inventory of collaboration/initiatives from hospital infection preventionists. If you have examples of something that is working in your area, ways you have enhanced the communication/ information exchange, send them to Lisa Caffery, Mary Rexroat or Trula Foughty
- The two LTC organizations in Iowa willing to collaborate
- Hospitals are using conducting surveillance on various populations
- Lack of standard guidelines for managing colonized patients
- Updated Iowa Antibiotics Resistance Task Force in final review at IDPH
- Request task force report include guidance on when to remove patient flags
- Request for quality tool to measure patient isolation and how well isolation was maintained
- Genesis-Davenport does rounding 3 times/week – observations to see if precautions used
- Patient isolation education difficult

- Iowa Health-Des Moines educates contact precaution patients in a simple manner. Will share their language

C.diff

- Brainstorming session at Iowa Health-DM on isolation for C.diff patients
 - Residents need extra large gloves
 - Availability of equipment
 - If attending physician doesn't wear PPE, residents don't either
- Iowa HAI Plan identified C.diff and CAUTI as the two focus topics – waiting to hear more on interventions related to C. diff
- I-Map has an Infection Prevention process

Healthcare Work Immunizations

- Campaign goes through March
- Dr. Evans sending letter to CEOs, quality leaders for last push to achieve 95% goal
- IDPH noted difficulty in getting people immunized for H1N1

Central Line Infections (CLI)

- Q'3 2009 Spread data shows 66% fully deployed
- 2010 goal - 70%
- Genesis-Davenport includes checklist in insertion kit
- Checklist can be used in OR but difficult

Ventilator-associated Pneumonia (VAP)

- Q'3 2009 Spread data – 56% of hospitals fully deployed VAP bundle
- 2010 goal – 65%
- Physicians resistant to place some patients in elevated positions such as tracheal revisions, radical neck cases

SSI/SCIP

- SSI 3'Q 2009 Spread data – 73% of hospitals fully deployed
- 2010 goal – 84%
- SCIP 3'Q 2009 - 53% of hospitals fully deployed
- 2010 goal – 60%
- Chlorhexedine bathing for article in NEJM, 1/7/10
- IDS-SHEA magazine – article on use of dura prep
- NEJM editorial on preventing SSIs
- SCIP can be found in the IHI Improvement Map

Next HAI Cluster Call – May 12, 2010 10:00AM

Call-in Number: 800-882-3610

Passcode: 7340904#