How Can Leadership Line Care Rounds Prevent Central Line Associated Bloodstream Infections?

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INTRODUCTION

- Central venous catheters are essential for care delivery in children with cancer; however, they are not without risk. Central line associated bloodstream infections (CLABSI) are a major cause of morbidity and mortality.
- In January 2013, a quality improvement project involving a multidisciplinary team was initiated to prevent CLABSI at a pediatric oncology hospital. This project included revision and implementation of evidence-based central line maintenance bundles, education, and monitoring of process compliance using a staff self-report tool.
- Although there was high compliance of the bundle elements reported through this tool, CLABSI rates continued to increase.
- To further ascertain compliance and identify improvement opportunities, Leadership Line Rounds (LLR) were implemented in January 2014 for direct observation of care and conversations with patients, families, and staff.
- This study reports the findings and impact of LLR on CLABSI prevention in a pediatric oncology hospital.

METHODS

- Weekly LLR on each of the four inpatient units in a monthly rotation using an audit tool.
- The LLR team consisted of members from the Infection Prevention and Control Department, Nursing, a CLABSI physician champion, and the unit manager.
- LLR served a two-fold purpose: 1) to educate families about practices to prevent infections including daily baths, linen change, mouth care, hand hygiene, dressing maintenance, and hub scrub/dry time; and to empower families to speak up if they observed a breach in technique by any provider; 2) to evaluate compliance with the maintenance bundle through direct observation of care and audit of documentation in the medical records.
- Monthly compliance with bundle elements was reported as percentage of recorded opportunities. Feedback from LLR was distributed in several ways. "Just in time" feedback and education was provided to the patients, families and nursing staff when non-compliant practices were discovered or observed. Positive feedback was immediately communicated when observing compliant practices. A report of bundle compliance for the unit was provided to the unit manager, director, and CLABSI team highlighting areas of excellence and areas for improvement.

RESULTS

Over a two year period 2014-2015, LLR involved 361 patients. Bundle compliance increased and families became more engaged in CLABSI prevention.

CONCLUSION

- Implementation of Leadership Line Rounds has increased compliance with bundle elements and empowered patients and families to speak up when they observe a breach in techniques by any provider.
- Line rounds have proven to be so beneficial and successful they are now being performed in any area where a central line is accessed including ambulatory care areas of the hospital.