

A Patient-Centered Approach to Improve Bathing Adherence in Central Line-associated Bloodstream Infection Prevention Efforts in a Pediatric Hematology/Oncology/HSCT Unit

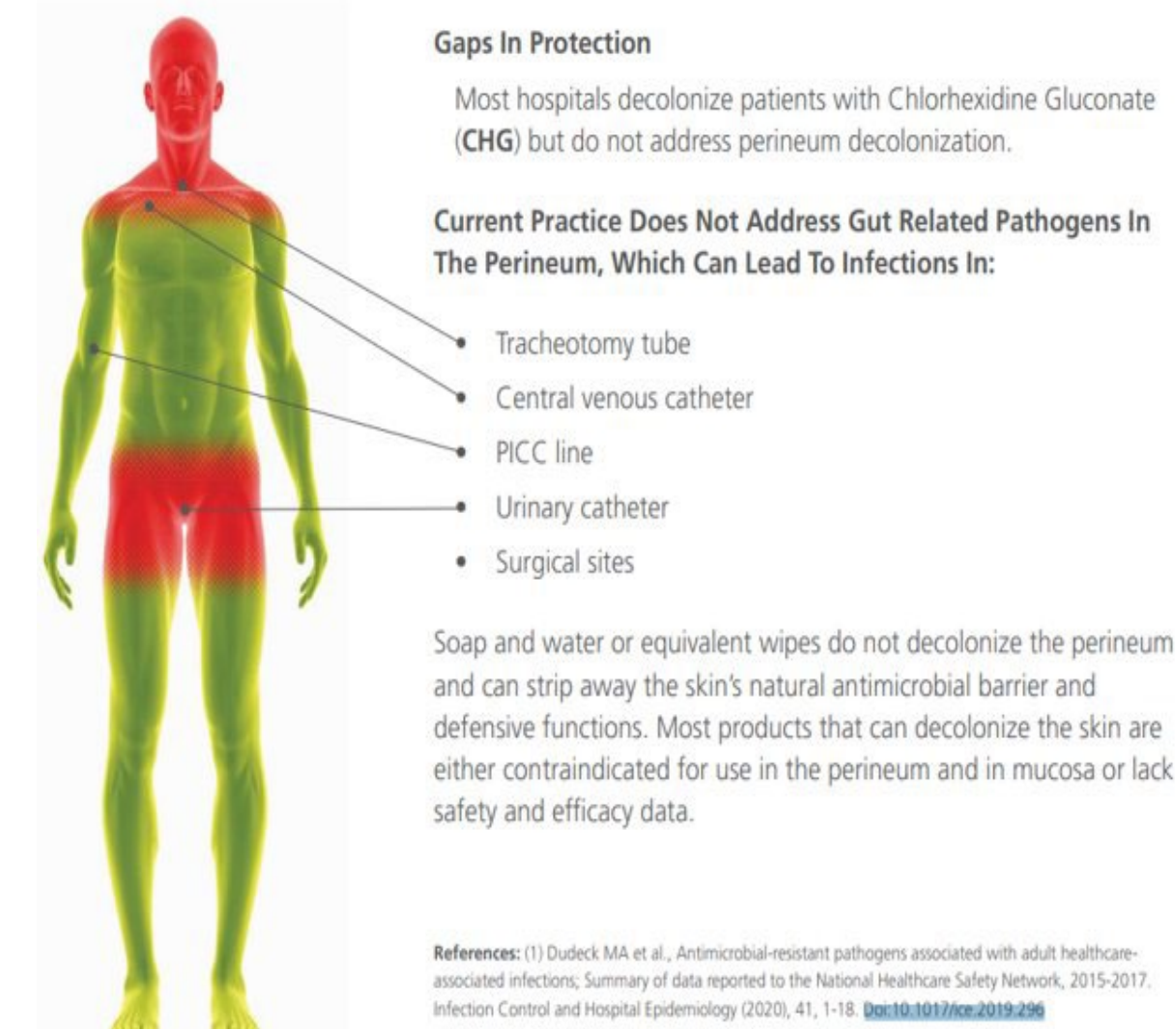
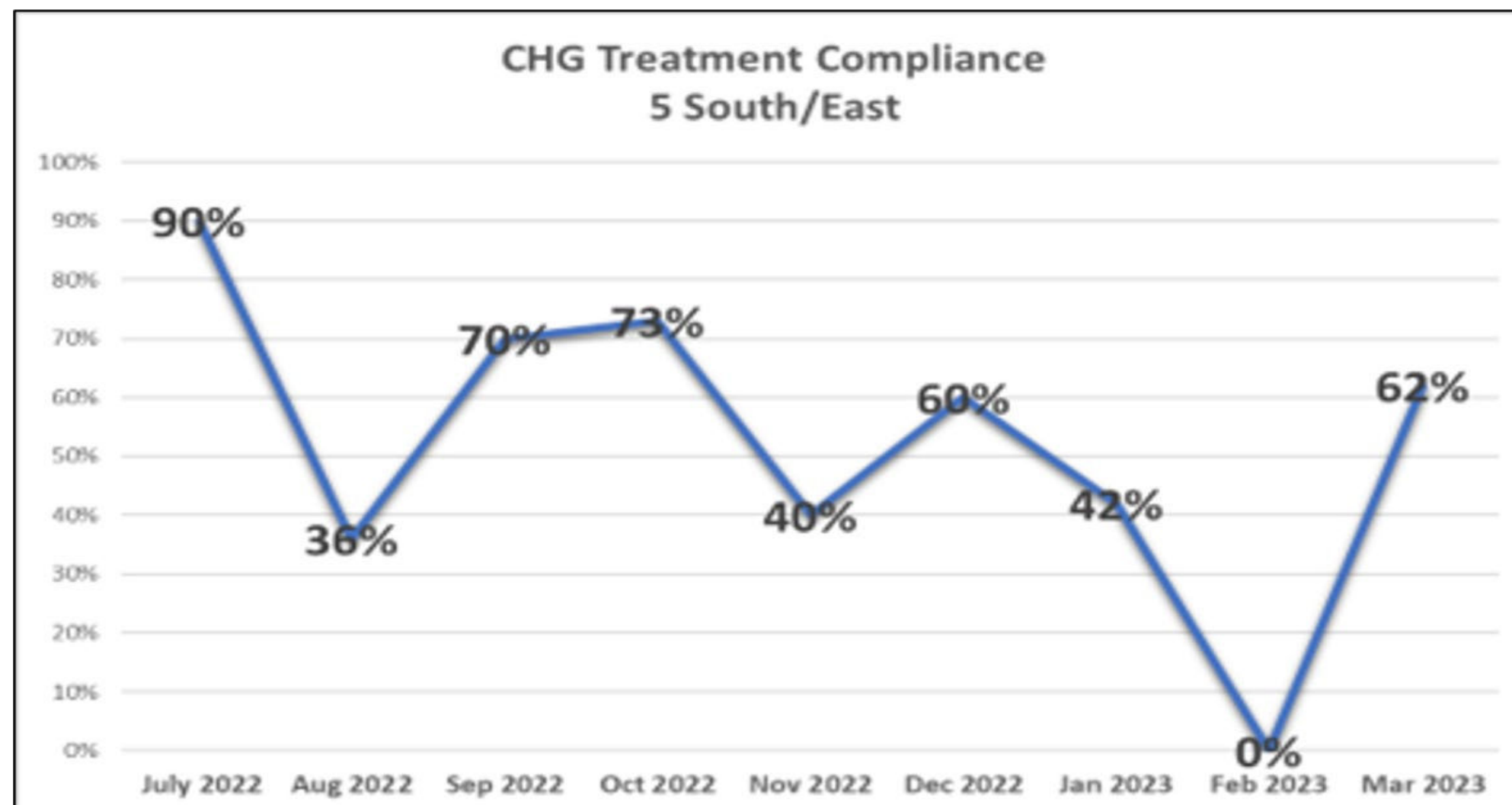
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Background

CLABSI is an organizational priority. BCH is aligned and submits outcome data to the Solution for Patient Safety (SPS) for up-to-date evidence best practices (EBP). BCH has a cross-bay goal of decreasing the CLABSI rate by 10% for the fiscal year of 2023.

BCH Oakland continues to benchmark below the national average but experienced an increase in both Mucosal Barrier Injury (MBI) and non-MBI combined CLABSI rates in the 2022 fiscal year. Since August 2022 we consistently fell below the 75% adherence rate for Chlorhexidine gluconate (CHG) compliance. Based on the data, opportunities to improve elements of the CLABSI bundle adherence were explored.

The results of a needs assessment identified low satisfaction with CHG products in Hem/Onc/HSCT teen population. In addition, EBP recommendations in the Heme/Onc/HSCT community are shifting the focus off CHG and increasing the focus on the daily bathing. Of note, SPS changed CHG from **required** to recommended guidelines excluding the hem onc population.



Project Goals

1

Increase Compliance

- Provide an EBP alternative for daily bathing treatment for CLABSI prevention

2

Increase Satisfaction

- Measure patient, family and staff satisfaction with bathing treatment options via survey

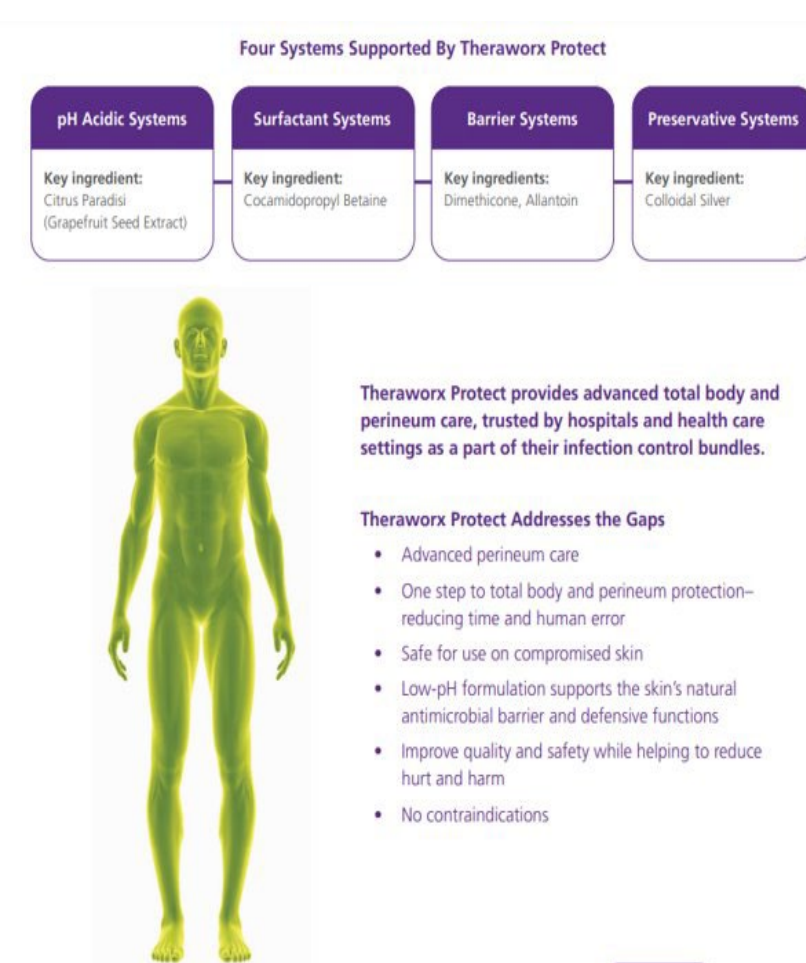
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Track Outcome Data

- CLABSI rate
- CLAMBI rate

WE AIM TO IMPROVE CLABSI BUNDLE COMPLIANCE BY INCREASING DAILY BATHING "TREATMENT" TO ≥ 80% COMPLIANCE

Project Plan and Interventions



Problem

Low bathing CHG compliance
Hem/Onc/BMT community re-evaluating and removing recommendations for CHG bathing as a standard of care for patients with CVCs
↑ in CLABSI/CLAMBI BCH OAK rates.

Purpose

Pilot test of Theraworx® as an alternative bathing treatment (instead of CHG) for CLABSI prevention

Provide a convenient bathing option that is safe for skin with non-integrity issues and safe for perineal, genital and facial cleansing.

Aims

- Compliance
 - ↑ Bathing treatment compliance
- Satisfaction
 - ↑ staff satisfaction
 - ↑ patient satisfaction
- Outcomes:
 - Monitor CLAMBI/CLABSI rates

Population

Acute Care Unit: 5South
Inclusion Criteria:

- Inpatient Hem / Onc / HSCT patients with CVC and/or PICC line

Select Exclusion Criteria:

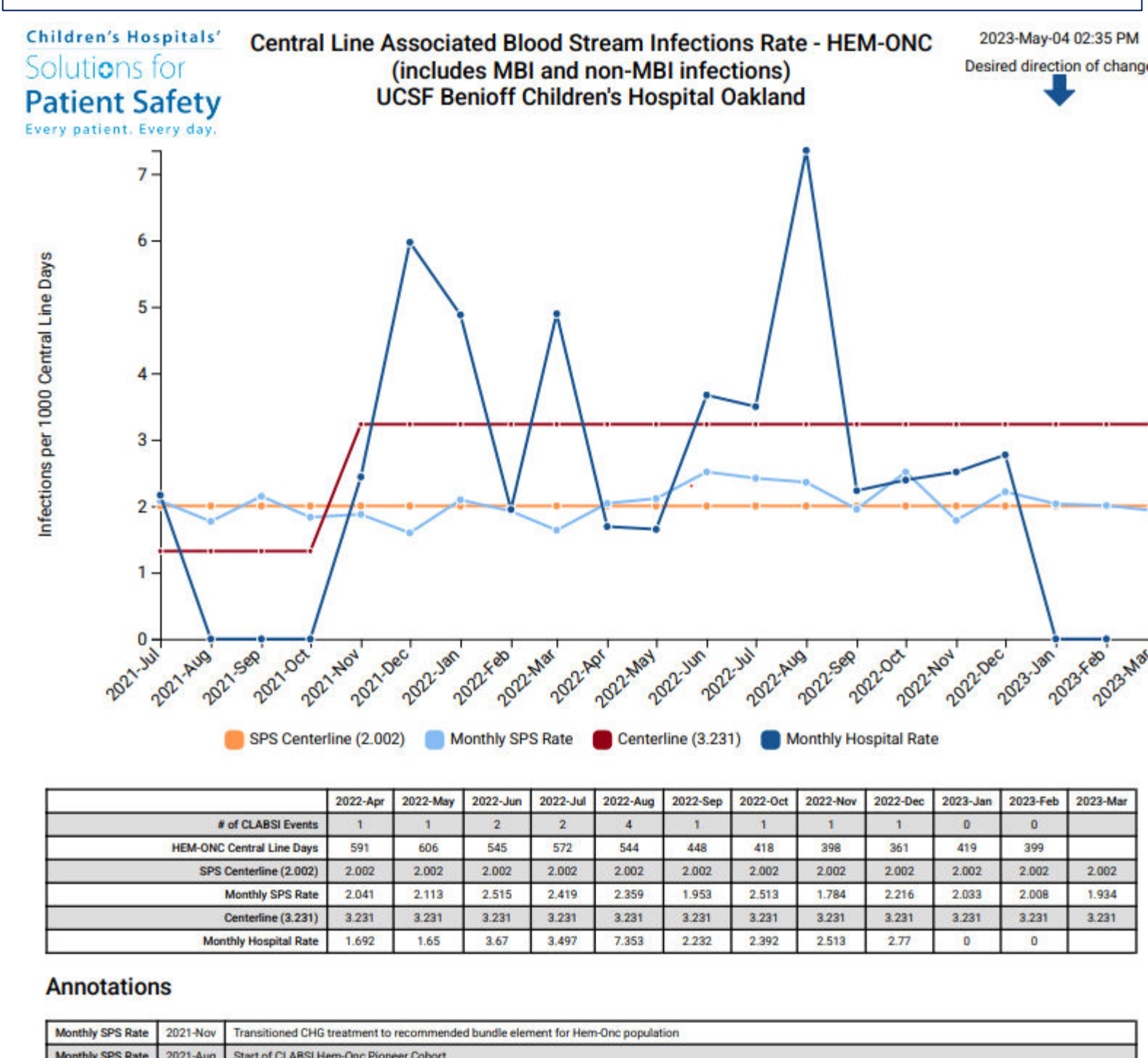
- Patients within 48 hours of Thiotepea
- Disseminated or severe skin denuding (e.g., Grade IV GVHD)

Timeline

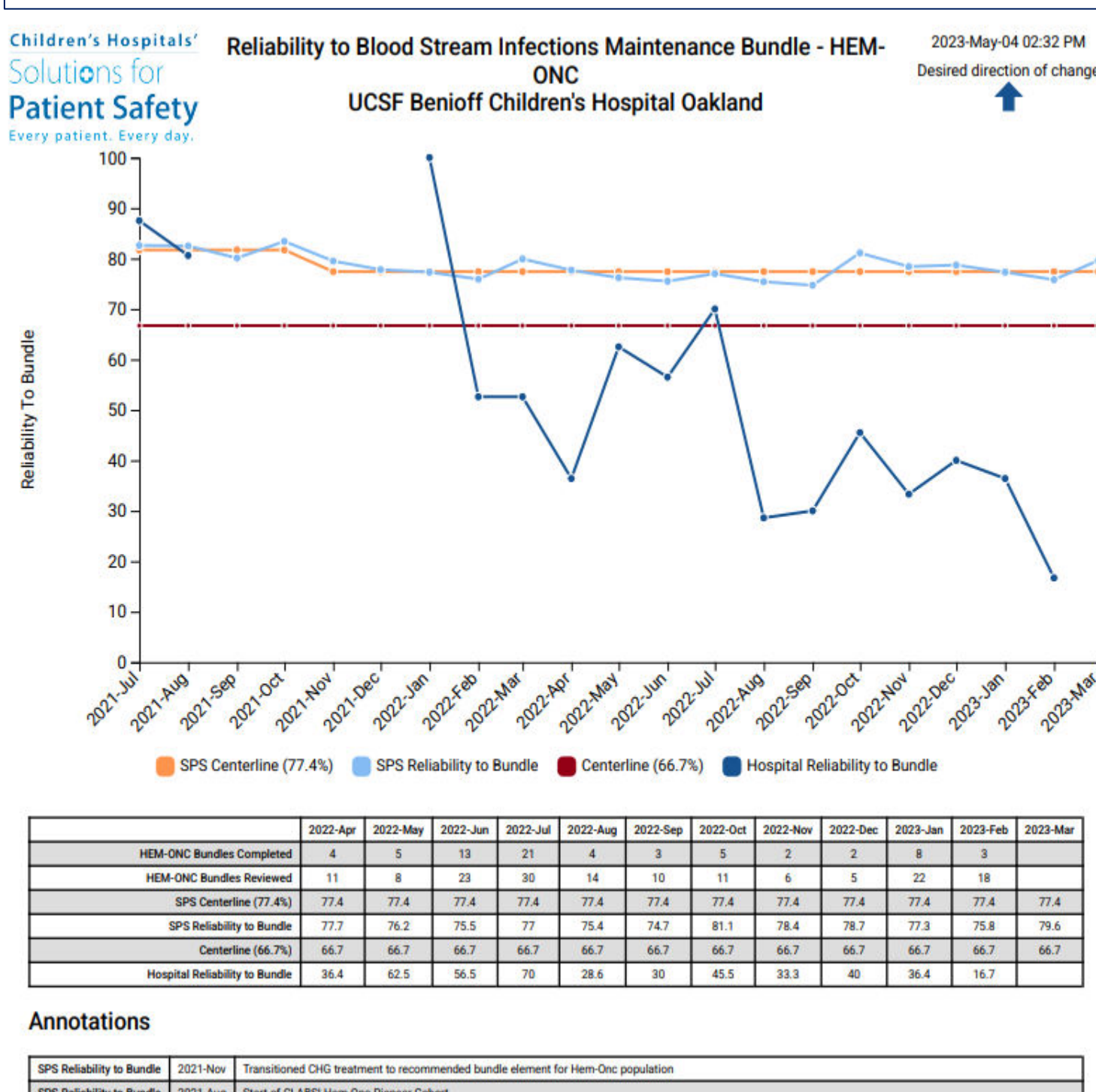
April 10, 2023: Education and pilot approval
April 24, 2023: Education & training roll out
May 17, 2023: Pilot rollout

Project Outcomes, Results & Impact

Pre-Pilot HemOnc SPS outcomes data



Pre-Pilot HemOnc SPS Process data



Lessons Learned

- Outcome implications on standardizing recommended bathing and hygiene care.
- Financial implications of product use and infection treatment

Next Steps

- Reinforce the standard of care of daily bathing as an infection prevention tool against CLAMBI/CLABSI
- Offer EBP daily bathing products that are acceptable to patients, families, and staff that are effective in preventing CLABSI/CLAMBI.
- Explore aligning hygiene products with other BCH harm initiatives such as the BCH CAUTI Taskforce team utilizing Theraworx® as a standard for urinary catheter care.

Future Dissemination

- Ideal next steps would be to include CHG *and* Theraworx® as the gold standing for bathing treatment for CLABSI prevention
- Monitor and evaluate the pilot outcome to share at BCH cross-bay structures
- Based on the clinical significance BCH CLABSI Taskforce will determine to adapt, adopt, or abandon further system-level (BCH) expansion.
- Disseminate findings with SPS and Hem/Onc/HSCT forums.