



Illinois Hospital Association 2009 Patient Safety Collaborative

“Stop Central Line Associated Blood Stream Infections”

Why Focus on Central Line Associated Blood Stream Infections (CLABSIs)?

In April 2008, the Congressional House Committee on Oversight and Government Reform focused on CLABSIs in a hearing and determined that Michigan’s Keystone initiative (MHA) with Johns Hopkins University (JHU) successfully showed that CLABSIs are almost entirely preventable in hospital ICUs.

Chairman Waxman then surveyed all 50 state hospital associations to assess their plans for replicating MHA/JHU’s model. Thirty-four states, including Illinois, did not report steps to implement this proven program. The Waxman Report estimated 15,680 lives and \$1.3 billion could be saved if every state adopted the MHA/JHU safety effort.

2009 IHA Patient Safety Collaborative (PSC)

IHA has been selected to participate in Johns Hopkins University’s nationally-recognized, multi-state “STOP BSI” initiative, an outstanding opportunity for member hospitals to show collective leadership and commitment to decrease/sustain reduction of CLABSIs across Illinois.

Why participate?

- (1) Enhances visible efforts of Illinois hospitals working together to improve patient safety
- (2) Intense public focus on hospital-acquired CLABSI infections:
 - Federal government and media post Waxman Report; CDC, NQF, IHI
 - Regulatory/accrediting standards apply to all units – CMS, IDPH, JC, AOA, NIAHO
 - Mandatory reporting - Illinois Hospital Report Card Act (ICUs)
 - Pay for performance: CMS potential payment reduction (all units), Medicare, private payers
- (3) Proven evidence-based protocol with successful, measurable results

Advantages to Hospitals:

- Complements existing work - No additional burden for data reporting
- Focus on infection control/culture of safety benefits hospitals of any size
- Limited travel, access to expert faculty from JHU/MI Keystone Project; On-site IHA support
 - Increase in regional meetings, fewer statewide meetings
 - Conference calls/webinars recorded/available on the web
- Participation in PSC recognized in BCBS Quality Surveys 2006, 2007, 2008

What Blood Stream Infections Mean to Your Hospital and Illinois:

- Est. avoidable costs per CLABSI \$45,000
- Est. avoidable costs 2008 \$59,000,000
- Est. avoidable hospital days 2008 40,569

Registration begins March 15

**For more information contact:
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Overview

2009 IHA Patient Safety Collaborative

Now in our fifth year, the IHA Patient Safety Collaborative is a nationally recognized program, acknowledged by past participants for accelerating change within their organization.

How does the Collaborative work?

The 2009 IHA Patient Safety Learning Collaborative (PSC) is a formal partnership with Johns Hopkins University (JHU) to implement strategies proven to reduce CLABSI during the Michigan Keystone ICU Project. Participants will engage national and regional experts in face-to-face discussions to develop strategies specific to their organizations, and become part of a statewide network of resources to brainstorm new ideas and resolve barriers to hospital-wide success. Lessons learned from previous IHA PSCs on teamwork, handoff communications, and working with patients and families will be applied to the prevention of central line infections.

- ❖ Faculty from JHU and Michigan Keystone Center will use conference calls and in-person learning sessions to share best practices to prevent CLABSI as well as strategies to implement, spread and sustain improvement. To enable greater participation, all calls will be recorded and available through the web the following day.
- ❖ Teams will receive tools, materials and strategies to overcome barriers. Teams will test new ideas using rapid-cycle improvement methods, measure changes, and develop alternative strategies.
- ❖ Regional meetings to increase networking and accelerate improvement will be held at locations similar to those for IHA leadership meetings. Attendance at the regional meetings is optional, but highly encouraged.

Hospitals without ICUs are encouraged to participate as an opportunity to refine general infection control practices and develop additional skills to implement, spread, and sustain improvement under the guidance of JHU faculty.

Responsibilities of participating hospitals

- ❖ Create and support a project team;
- ❖ Submit data that is complete and on time;
 - *Under the Illinois Hospital Report Card Act, hospitals with ICUs are required to report CLABSI via the NHSN. To avoid duplicate reporting, this data will be shared with JHU contingent upon receipt of a signed agreement from each facility.*
- ❖ Submit monthly team checklist to provide insight on local project management;
- ❖ Participate in conference calls;
- ❖ Participate in face-to-face meetings;
- ❖ Implement improvement tools that are part of the project; and
- ❖ Share team experiences within their hospital and with other participants.

A schedule of informational Webinars is available at www.ihatoday.org.

Online registration begins March 15 at <https://ihref.ihatoday.org>

A \$500 deposit will be requested at time of registration

Hospitals with ICUs

- ❖ Up to 75 hospitals \$2,500 per hospital
- ❖ 76 to 125 hospitals \$2,000 per hospital
- ❖ 126 or more hospitals \$1,500 per hospital

Hospitals without ICUs

\$ 500 per hospital

