Bloodstream Infection (BSI) Reduction Quality Improvement Activity (QIA)

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Webinar Attendance

To verify facility attendance:

- Message the host via the chat function with the name of the facility and attendees.

Or

- Send an email after the call with the name of the facility and attendees to JChaine@hsag.com.

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Agenda

- Introduction
- Inclusion criteria
- BSI QIA goals
- BSI QIA interventions and activities
- BSI QIA reporting dates and information
- BSI Quality Assessment and Performance Improvement (QAPI) activities
- Health Information Exchange (HIE) review
- Facility Patient Representative (FPR) program overview
- BSI QIA best practices
- BSI tools and resources
- Questions

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BSI QIA Introduction

Introduction

The Centers for Medicare & Medicaid Services (CMS) and the Network have established goals to reduce BSIs because:

- ESRD patients are at a higher risk for BSIs than the general population:
  - Incidence of healthcare-associated infections (HAIs) can be up to 100 times higher.
  - The rate of mortality due to HAIs is 43% higher.
- Violations in infection prevention protocols (Vtag 0122) were the most cited survey violations in Network 17 facilities in 2018.

Source: National Action Plan to Prevent Healthcare-Associated Infections

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BSI QIA Inclusion Criteria

QIA Inclusion Criteria

Facilities selected for this QIA:

- Have a BSI rate among the top 20% of facilities in the Network service area with the highest rates of infection.

  – The BSI data is based on National Healthcare Safety Network (NHSN) reporting for January–June 2019.

- Are not participating in any other Network QIAs.

- Have a facility census greater than 25 patients.

Data source: NHSN January-June 2019

BSI QIA Goals

BSI QIA Goals in Detail

- Demonstrate a **20% relative reduction** in the rate of BSIs.

- Report dialysis events in NHSN with 100% accuracy.

- Identify at least 1 FPR to participate in the QIA interventions.

- Sustain quality improvement practices to reduce BSI rates in the facility.

- Participate in an HIE or other highly effective facility process to obtain blood culture results and hospitalization records.

BSI QIA Goals (cont.)

- Attend the bi-monthly (every other month) BSI QIA Learning and Action Network (LAN) webinars: https://www.esrdncc.org/en/qia/ .
  - Implement at least two best practices identified from the BSI QIA LAN webinars by the end of the QIA.

BSI QIA
Interventions and Activities

BSI QIA Interventions (Pt. 1)

- Completing monthly reporting to the Network via SurveyMonkey
- Attending bi-monthly LAN webinars and implementing LAN activities
- Building relationships and collaborating with hospitals and nephrologists
- Re-educating patients and staff about BSI prevention topics on a monthly basis
- Auditing BSI events data in NHSN to ensure data accuracy and completion
- Reviewing BSI QIA progress, trends, and barriers each month at QAPI meetings

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BSI QIA Interventions (Part 2)

- Implementing the *CDC Approach to BSI Prevention in Dialysis Facilities* (i.e., 9 CDC Core Interventions)
  - https://www.cdc.gov/dialysis/PDFs/Dialysis-Core-Interventions-5_10_13.pdf
- Ensuring staff watch the video titled, *Preventing Bloodstream Infections in Outpatient Hemodialysis Patients*
  - https://www.youtube.com/watch?v=_0zhY0JMGCA&feature=youtu.be
- Completing the NHSN Annual Dialysis Event Surveillance Training by **March 31, 2020:**
  - https://www.cdc.gov/nhsn/training/dialysis/index.html.
- Using the CDC Audit Tools and Checklists:
  - https://www.cdc.gov/dialysis/prevention-tools/audit-tools.html.

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BSI QIA Interventions (Pt. 3)

- Using the CDC audit tools to perform the audits in the table below
- Selecting five different patients each month to conduct at least one *Hemodialysis Hand Hygiene Observations Audit:* https://www.cdc.gov/dialysis/PDFs/collaborative/Hemodialysis-Hand-Hygiene-Observations.pdf.

Type of Audit	Number of Audits Required
Catheter connection/disconnection	≥ 7 observations per month
Fistula/Graft cannulations	≥ 7 observations per month
Catheter Disinfection Exit Site	≥ 7 observations per month
Hand Hygiene for Staff	≥ 13 observations per month
Hand Hygiene for Patients	≥ 5 observations per month

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The 9 CDC Core Interventions for Dialysis BSI Prevention

Facilities are required to implement the following 9 CDC Core Interventions for BSI Prevention (https://www.cdc.gov/dialysis/PDFs/Dialysis-Core-Interventions-5_10_13.pdf):

1. Surveillance and feedback using NHSN
2. Hand hygiene observations
3. Catheter/vascular access care observations
4. Staff education and competency
5. Patient education/engagement
6. Catheter reduction
7. Chlorhexidine for skin antisepsis
8. Catheter hub disinfection
9. Antimicrobial ointment

BSI QIA Reporting Dates and Information

BSI QIA Reporting Dates

- Submit monthly QIA reporting to the Network via SurveyMonkey links by the **5th of each month.**

  - A new SurveyMonkey link will be emailed approximately 2 weeks before the monthly submission due date (i.e., the 5th of the month).

  - The first monthly reporting via SurveyMonkey link will be **February 5, 2020.**

- Submit all BSI event data to NHSN by the last day of the month.

BSI QIA QAPI Requirements

QAPI Meetings

- Facilities are required to review the BSI QIA in monthly QAPI meetings.
- The following topics should be reviewed in QAPI by the interdisciplinary team:
  - Implementation of the 9 CDC Core Interventions.
  - Monthly audit results.
  - BSI QIA interventions and progress towards goals.
  - Barriers to BSI reduction.
  - FPR involvement in the QIA.
  - Facility participation in an HIE or other effective process to obtain hospitalization records and blood cultures.

BSI QIA QAPI Form

QUALITY ASSESSMENT AND PERFORMANCE IMPROVEMENT (QAPI) QUALITY IMPROVEMENT ACTIVITY (QIA) MONITORING FORM
Reducing Bloodstream Infections (BSIs)

Date of QAPI Meeting: _____

Facility QIA Baseline: _____   **Facility QIA Goal:** _____

Goal Met: ☐Yes ☐No   **Facility Patient Representative Present:** ☐Yes ☐No

Monitoring Metrics												
	Number of Patients by Month											
Number of Patients with:	Jan.	Feb.	Mar.	Apr.	May	June	July	Aug.	Sep.	Oct.	Nov.	Dec.
A BSI												
A vascular access related BSI												
A central venous catheter (CVC) related BSI												
Two or more BSIs within 12-months												
A BSI this month who received education on BSI prevention												

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Network 17 BSI QIA QAPI Form

What QIA interventions have been implemented at the facility this month?
(including recommendations from the Learning and Action Network (LAN) calls)

_____

What interventions were successful? _____

_____

After implementing the interventions, what barriers remain for reducing BSIs? _____

_____

What is the facility's BSI reduction plan for the next month? _____

_____

Does the facility participate in a Health Information Exchange (HIE)? If no, what is the facility's process to effectively obtain blood culture results and hospitalization records? _____

_____

Has the facility discussed the 9 CDC core interventions in QAPI? If no, what is the facility plan to so?

_____

_____   _____
Facility Administrator/Date   **Facility Medical Director/Date**

HIE Participation

HIE Participation

- An HIE is a system to share clinical information, including hospitalization records and blood cultures, between outpatient dialysis providers, hospitals, and other healthcare providers.

- BSI QIA facilities are required to participate in an HIE **or** demonstrate another highly effective facility process to obtain blood culture results and hospitalization records.

- Facilities that do not participate in an HIE are **required** to **demonstrate an effective process to transfer and obtain medical records information,** such as hospitalization records and blood cultures.

HIE Participation (cont.)

- Examples of information transfers include, but are not limited to:
  - Encrypted email.
  - Encrypted text messaging.
  - An effective process to obtain records via fax.
  - Direct log-in access to a hospital medical records system.

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FPR Program

The FPR Program

- The FPR program is a patient-centered approach to spread educational information to patients, provide peer-to-peer support, and provide additional support for staff at the dialysis facility.

- An FPR can be:
  - A patient currently on dialysis.
  - A patient who has had a kidney transplant.
  - A dialysis patient caregiver.
  - A volunteer at his/her dialysis facility or another facility in his/her area.

What Is the FPR Role

- FPRs may:
    - Act as the "patient voice" by addressing patient interests, concerns, and by providing new ideas and QIA feedback during monthly QAPI meetings.
    - Hand out the Network 17 Patient Newsletter: http://www.hsag.com/NW17PatientNewsletter.
    - Distribute QIA educational materials.
    - Act as a greeter for newly admitted patients.
    - Act as a peer mentor to support patients to prevent infection and pursue permanent access placement.
    - Assist with QIA interventions or other activities to meet the needs of the facility.

FPR Program Resources

- [The FPR Guide](#) explains the role of an FPR, including FPR selection criteria, how FPRs can assist the Network, what is expected of an FPR, and more.
  - https://www.hsag.com/contentassets/57fa392060b1488fbafda0bd076319dc/nw17nprguidefinal508.pdf.
- The FPR Recruitment Flyer
  - https://www.hsag.com/contentassets/57fa392060b1488fbafda0bd076319dc/nw17nprflyerfinal508.pdf.
- The FPR Agreement Form
  - https://www.hsag.com/contentassets/57fa392060b1488fbafda0bd076319dc/2019nw17npragrmntformqiafnl508.pdf.

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BSI QIA Best Practices

BSI QIA Best Practices in Detail

Best practices for successful completion of the
BSI QIA include:

- Implementing all 9 CDC core interventions.
- Involving **patients** and **staff** in conducting monthly audits to help identify strategies to improve infection-control practices.
- Providing monthly patient and staff education on infection control policies and procedures.
- Conducting infection control-specific staff meetings, in-services, and huddles.
- Posting educational bulletin boards and hosting infection prevention Lobby Days.
- Identifying at least one QIA lead person.
- Incorporating the FPR in BSI QIA interventions.

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BSI QIA Resources and Tools

BSI Resources and Tools

The Network will distribute the following BSI QIA resources via email and the HSAG: ESRD Network 17 website (https://www.hsag.com/en/esrd-networks/esrd-network-17/quality-improvement-activities-for-2019/reducing-rates-of-healthcare-associated-infections-hais-qias/reducing-long-term-catheter-ltc-use-and-bsis/) to support your success throughout the QIA:

- *CDC Approach to BSI Prevention in Dialysis Facilities* (i.e., 9 CDC Core Interventions)
  - https://www.cdc.gov/dialysis/PDFs/Dialysis-Core-Interventions-5_10_13.pdf
- CDC Audit Tools and Checklists
  - https://www.cdc.gov/dialysis/prevention-tools/audit-tools.html
- *Days Since Last BSI*
  - https://www.cdc.gov/dialysis/pdfs/Days-since-infection-poster_8.5x11_fillable_508.pdf
- *Preventing Bloodstream Infections in Outpatient Hemodialysis Patients* (11 minute video for staff)
  - https://www.youtube.com/watch?v=_0zhY0JMGCA&feature=youtu.be
- *Test Your Hand Hygiene Knowledge* (6 minute video for patients)
  - https://fmqaimedia.com/demo/handwashing/
- *Infection Prevention: Washing Your Vascular Access*
  - https://www.hsag.com/contentassets/530f076546974940b86cf0c04ad5dd8d/nw17_infection-prevention-washingknowing-symptoms_final_508.pdf
- *Clean Hands Save Lives*
  - https://www.hsag.com/contentassets/530f076546974940b86cf0c04ad5dd8d/nw17_clean-hands-saves-lives-2017_final_508.pdf
- *Six Tips to Prevent Dialysis Infections*
  - https://www.cdc.gov/dialysis/PDFs/Dialysis-Patient-PocketGuide.pdf

BSI Resources and Tools (cont.)

- Clean Hands Count Campaign
  - https://www.cdc.gov/handhygiene/campaign/promotional.html#anchor_1555103350
- *Patient Handwashing Pledge*
  - https://www.hsag.com/contentassets/b2eebc3ac48b4a4ca19d1d43d2c48555/nw17_hand-hygiene-patient-pledge_final_508.pdf
- *Sepsis Zone Tool*
  - https://www.hsag.com/contentassets/530f076546974940b86cf0c04ad5dd8d/zonetoolsepsis508.pdf
- *BSI QIA QAPI Form*
  - https://www.hsag.com/contentassets/530f076546974940b86cf0c04ad5dd8d/nw17bsimonthlyqapireview508-1.pdf
- *Medical Records Request Form*
  - https://www.hsag.com/contentassets/0860b71f1b1e417fa1c9a2b07116c8cb/medicalrecordsrequestform508_fillable.pdf
- CDC Making Dialysis Safer for Patients Coalition Resource Center
  - https://www.cdc.gov/dialysis/coalition/resource.html
- Hemodialysis Central Venous Catheter Scrub-the-Hub Protocol
  - https://www.cdc.gov/dialysis/prevention-tools/scrub-protocols.html
- Recommended Antiseptics & Antimicrobials by Catheter Type
  - https://www.cdc.gov/dialysis/prevention-tools/catheter-compatibility-information.html
- CDC Guidelines, Recommendations, and Resources: Dialysis Wall Boxes and Drains
  - https://www.cdc.gov/dialysis/guidelines/wall-boxes.html

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HSAG: ESRD Network 17 QIAs:
https://www.hsag.com/en/esrd-networks/esrd-network-17/quality-improvement-activities-for-2019/

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Thank you!

HSAG: ESRD Network 17:

https://www.hsag.com/en/esrd-networks/esrd-network-17/

Questions