

Specific Action(s)	Gap Analysis Questions	Yes	No	If answered question "No" – identify the Specific Action plan(s) including persons responsible and timeline to complete.
Documentation				
Required documentation in the medical record includes:				
4a) Indications for central line insertion		<input type="checkbox"/>	<input type="checkbox"/>	
4b) Type of catheter and tip location		<input type="checkbox"/>	<input type="checkbox"/>	
4c) Date and time of insertion/removal		<input type="checkbox"/>	<input type="checkbox"/>	
4d) Daily review of continued need for central line use <ul style="list-style-type: none"> · Remove when mechanical complications cannot be resolved, infusion therapy has been discontinued, or when no longer necessary for the plan of care. [2] 		<input type="checkbox"/>	<input type="checkbox"/>	
4e) Ongoing central line maintenance, including site inspection for signs of infection and dressing changes.		<input type="checkbox"/>	<input type="checkbox"/>	
4f) Daily CHG bathing		<input type="checkbox"/>	<input type="checkbox"/>	
4g) Date of last dressing change and/or next dressing change due		<input type="checkbox"/>	<input type="checkbox"/>	
4h) Patient and family education provided		<input type="checkbox"/>	<input type="checkbox"/>	
4i) Names of all staff providing catheter care		<input type="checkbox"/>	<input type="checkbox"/>	
Monitoring and Evaluation				
Performance improvement monitoring includes:				
6a) Observation monitoring of every central line insertion using an insertion checklist.		<input type="checkbox"/>	<input type="checkbox"/>	
6b) Development of insertion and maintenance process measures.		<input type="checkbox"/>	<input type="checkbox"/>	
6c) Communicate progress on outcome and process measures to staff and providers regularly.		<input type="checkbox"/>	<input type="checkbox"/>	
6d) Conduct audits of indication selected with available clinical information		<input type="checkbox"/>	<input type="checkbox"/>	
6e) Conduct CLABSI surveillance using standardized methodology such as National Healthcare Safety Network (NHSN) definitions [1,4].		<input type="checkbox"/>	<input type="checkbox"/>	
6f) Review and summarize learnings from every CLABSI event with clinical team		<input type="checkbox"/>	<input type="checkbox"/>	
A process is in place to provide feedback to patient care staff including:				
6g) Process measures, evaluated on a regular basis (e.g., line indications, compliance with central line insertion practices, compliance with central line maintenance practices, central line utilization by units/areas [such as the emergency department]).		<input type="checkbox"/>	<input type="checkbox"/>	
6h) Outcome measures, evaluated on a regular basis (e.g., CLABSI rates, days since last CLABSI, central line utilization rates) [1,4].		<input type="checkbox"/>	<input type="checkbox"/>	
Staff Education				
7a) The facility has a process to ensure that the individual(s) inserting central venous catheters are qualified and trained in central line insertion.		<input type="checkbox"/>	<input type="checkbox"/>	
7b) Education for staff caring for patients with central lines is provided at orientation which includes, at a minimum: <ul style="list-style-type: none"> · Appropriate adherence to aseptic technique · Daily review and Identification for removal of catheters that are no longer needed · Adherence to hand hygiene · Proper maintenance of catheters · Proper removal of catheter · Teamwork/communication tools 		<input type="checkbox"/>	<input type="checkbox"/>	
7c) Staff caring for patients with central lines receive annual education		<input type="checkbox"/>	<input type="checkbox"/>	
7d) Consider the use of ongoing central line insertion competency assessments		<input type="checkbox"/>	<input type="checkbox"/>	
Infrastructure				
The facility has a process in place to develop a multidisciplinary team to engage staff and guide CLABSI prevention efforts, including:				
8a) Identifying a CLABSI champion that reports to an interdisciplinary performance improvement structure supported by leadership, physicians and nursing		<input type="checkbox"/>	<input type="checkbox"/>	
8b) Involving front-line staff as local champions [1,4].		<input type="checkbox"/>	<input type="checkbox"/>	

REFERENCES:

1. Avalos, David. Vascular Access Device-Associated Infections. In: Boston K.M., et al, eds. APIC Text. 2019. Available at <http://text.apic.org/toc/epidemiology-surveillance-performance-and-patient-safety-measures/use-of-statistics-in-infection-prevention>. Accessed October 22, 2021.
2. Gorski L, Hadaway L, Hagle ME, et al. Infusion therapy standards of practice. J Infus Nurs. Jan/Feb 2016; 39(1S)
3. Marschall J, Mermel LA, Classen D, et al. Strategies to prevent central line-associated bloodstream infections in acute care hospitals. Infect Control Hosp Epidemiol. 2014;35:7:pp753-771.
4. O'Grady NP, Alexander M, Burns LA, et al. Guidelines for the prevention of intravascular catheter-related infections. Am J Infect Control. 2011;39: S1 -S34.

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