

Conclusion

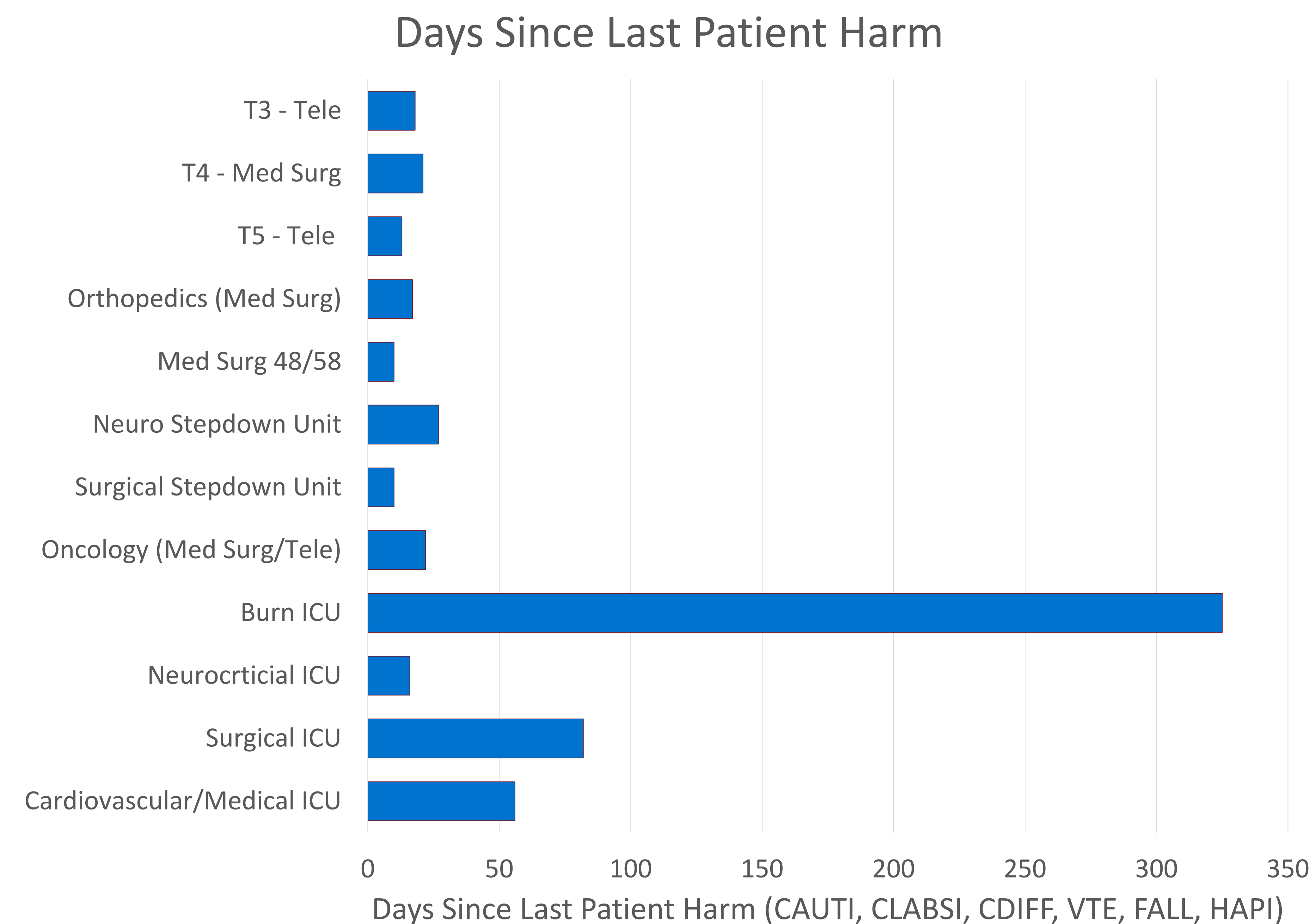
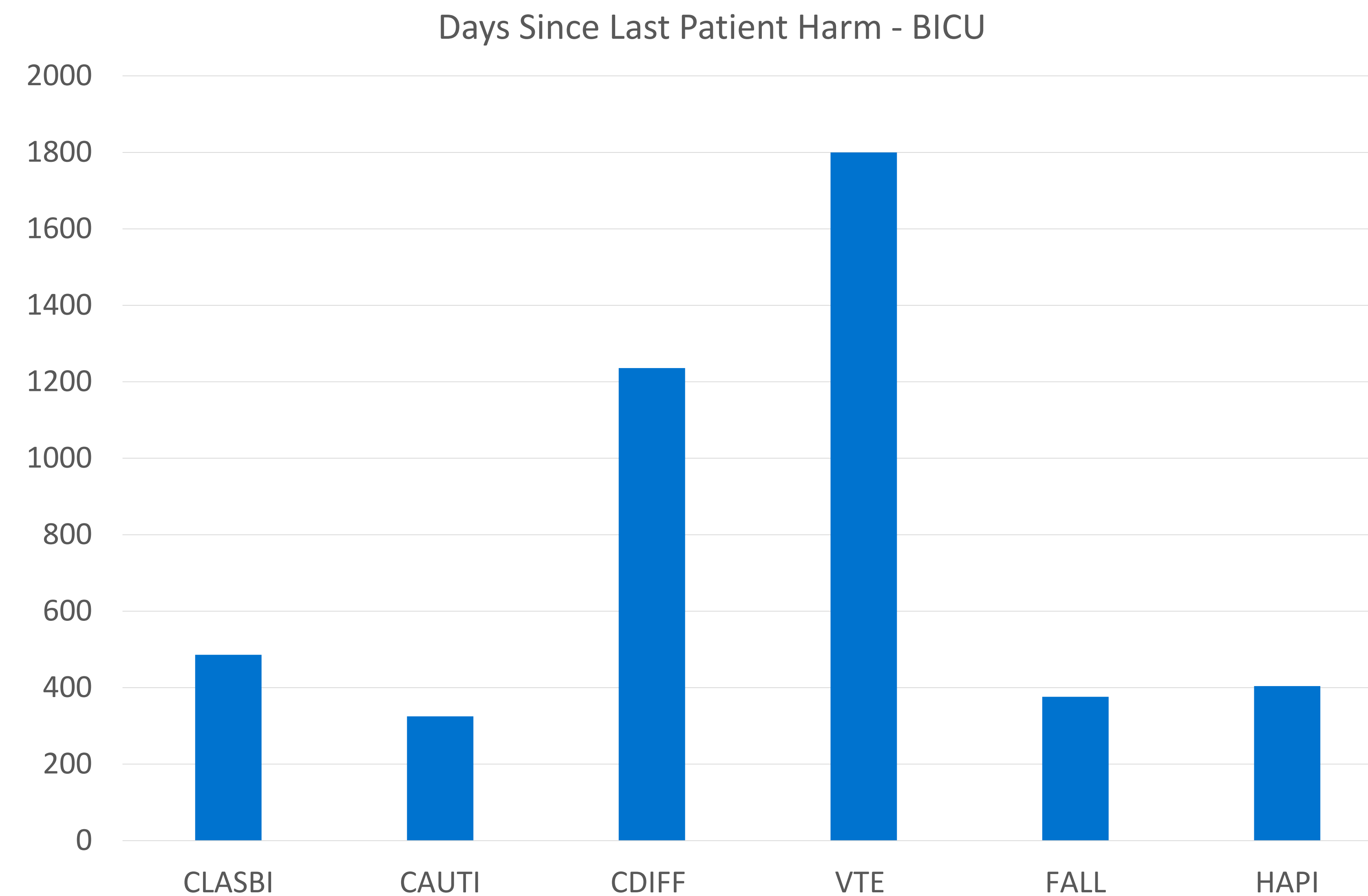
Apart from best practices and protocols, quality metrics can be achieved using teamwork and contextual modification through unit specific interventions.

Significance

- Hospitals constantly invest in improving patient quality and safety metrics thus reducing patient harms.
- Currently the goal is to have zero cases for the following quality safety metrics: Central Line Associated Blood Stream Infection (CLABSI), Catheter Associated Urinary Tract Infection (CAUTI), Venous Thromboembolism (VTE), Clostridium difficile (C.Diff), Falls, and Hospital Acquired Pressure Injury (HAPI).
- Success is often achievable for a single parameter but becomes challenging to achieve in all quality metrics.

Methods

- A dashboard was created to display all six-quality metrics for each unit in the hospital.
 - This was updated and reviewed daily leadership huddle.
- Teamwork:
 - A multidisciplinary team informally discussed the potential quality metrics for each patient.
 - Staff participated in a formal discussion during root cause analysis meetings of each incident.
- Contextual modification:
 - Population specific interventions:
 - ✓ Delineating between existing burns/skin conditions from HAPI
 - ✓ Decreasing bioburdens through Chlorhexidine gluconate bathing on burns
- Unit Specific Intervention:
 - Fall reduction through modifications to the patient care environment



Results

- The number of events related to CLABSI, CAUTI, VTE, C.Diff, Falls, and HAPI were compared between the Burn ICU (BICU) to other ICUs, Stepdown, Tele, and Med Surg units.
- The BICU was above national benchmarks for all six quality safety metrics and had outstanding success within the hospital.
- The last patient harm was 328 days ago compared to the other 11 units which averaged 32 days.
 - In the non-ICU units, Falls were the most frequent patient harm compared to CLABSI or CAUTIS for the ICUs
 - For 2018, the BICU worked on reducing CAUTI, Falls, and HAPIs while maintaining zero cases in C diff, VTE, and CLABSI.

Recommendations

Soft intelligence combined with scientific evidences could improve quality metrics and patient care.