

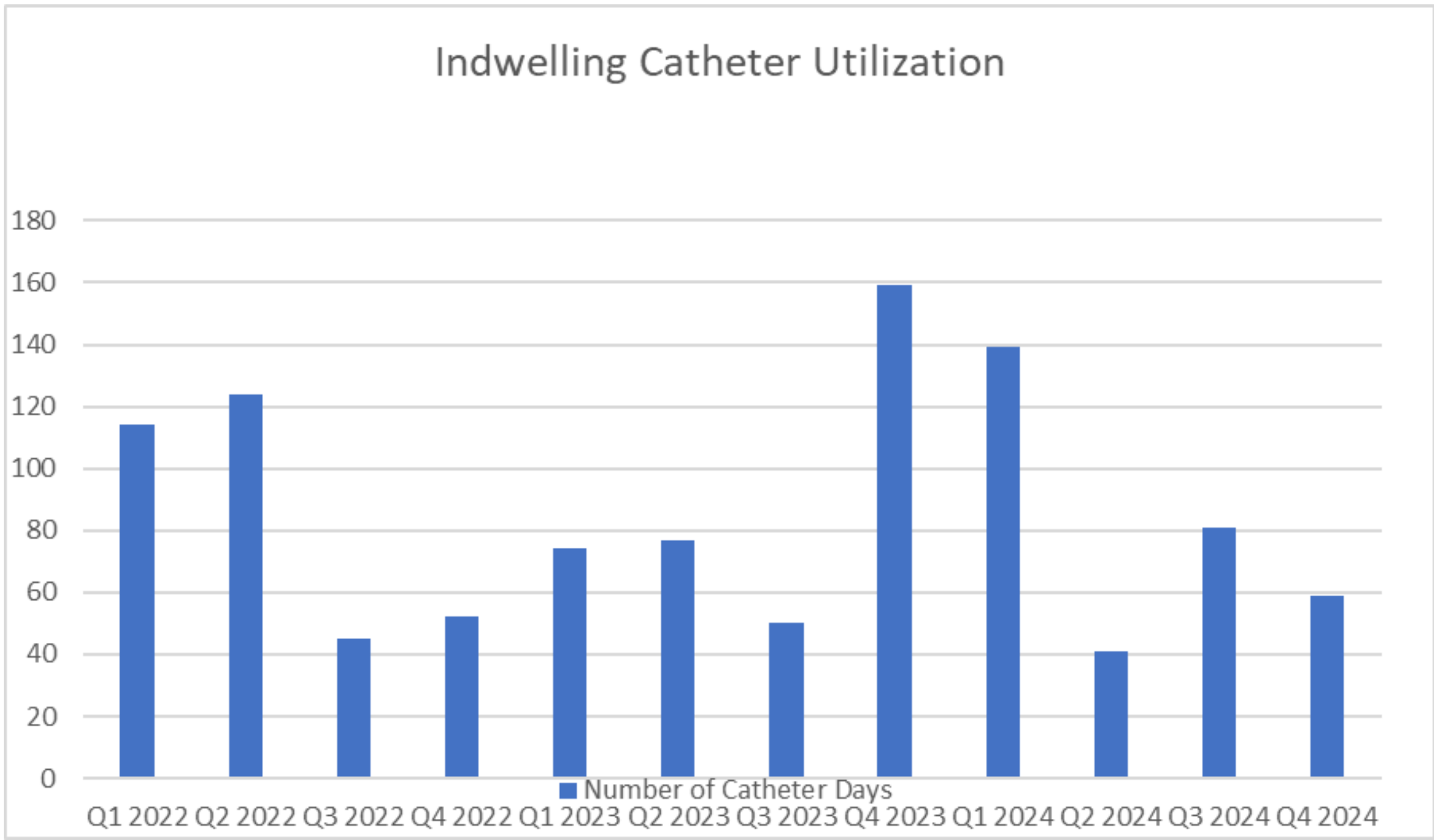
Prevention of CAUTI and CLABSI

Memorial Community Hospital & Health System, Med/Surg, Blair, NE



Background

- 19 bed Medical/Surgical unit in a 25 bed critical access hospital
- Device utilization rate, gap and inconsistency in appropriate use of indwelling catheters, inconsistent CHG bathing from chart audits



Aims

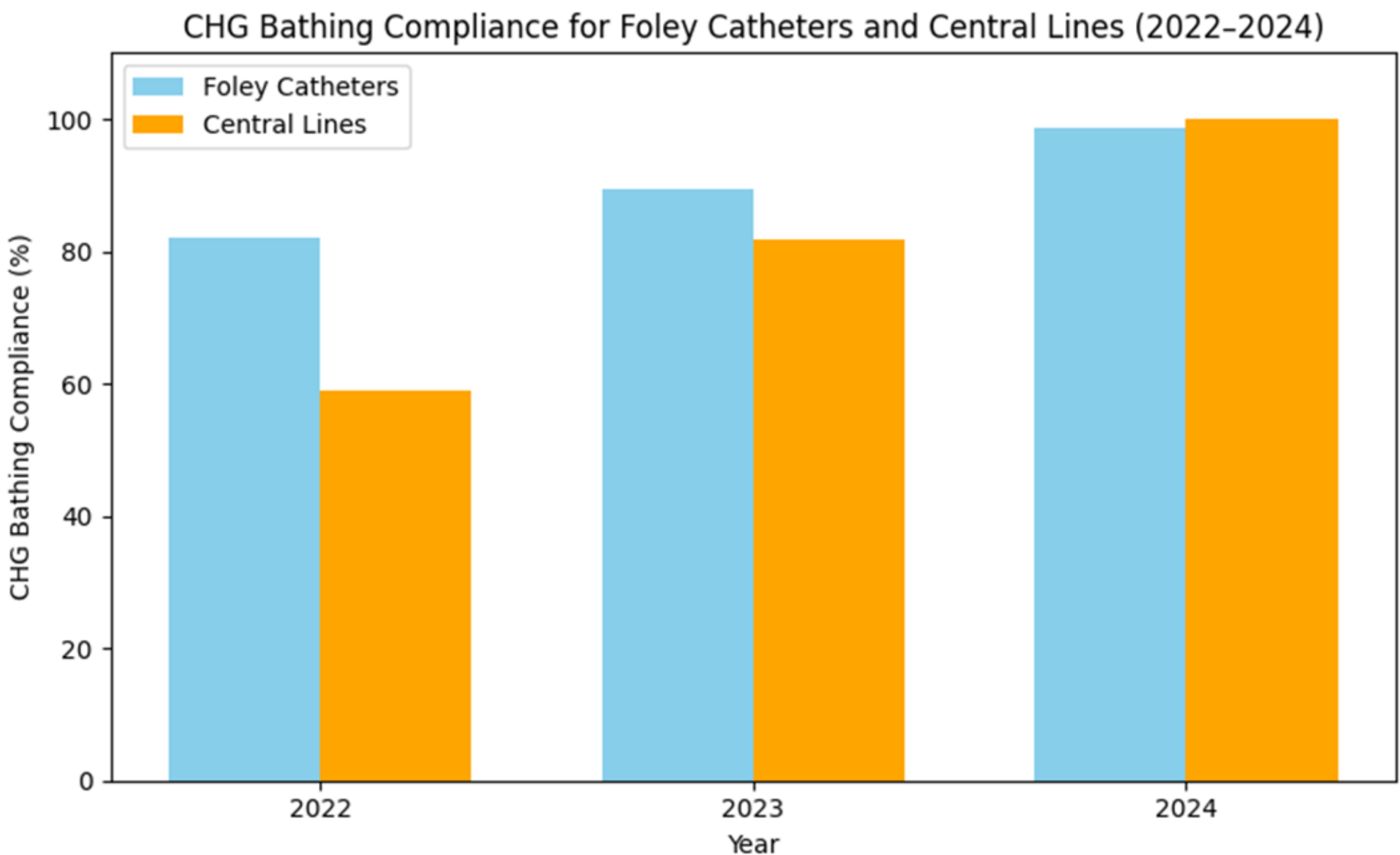
- Prevent healthcare acquired infections; specifically CAUTI and CLABSI.
- Decrease indwelling catheter utilization by January 2025.

Plan

- Implemented CHG bathing on all patients on Medical/Surgical unit, with chart auditing.
- Streamlined central line dressing changes
- Developed nurse driven indwelling catheter removal policy and procedure
- Hands-on competency with central line dressing changes, CHG bathing, and indwelling catheter placement

Results

- Bedside staff and leadership involved in indwelling catheter removal
- Average completion rate of CHG bathing for central lines is 100%
- Average completion of indwelling catheter care is 98.59%



Measure

- Total number of indwelling catheter days per number of patient days
- Total number of healthcare-acquired infections per number of device days

Next Steps

- Continue to monitor device utilization rates and compliance with CHG bathing
- Nurse driven central line removal policy

Team

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