
From: Helpdesk
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To: CL Announcements
Subject: 2012 Charles L. Brown Award Winner Announcement

TO: UVA Health System Faculty and Staff

FROM: R. E. Howell, Vice President and Chief Executive Officer
Robert (Bo) Cofield, Associate Vice President for Hospital and Clinic Operation

SUBJECT: 2012 Charles L. Brown Award Winner Announcement

DATE: October 23, 2012

The Quality Committee of the University of Virginia Medical Center is pleased to announce the winner of the 2012 Charles L. Brown Award for Patient Care Quality “Reducing Catheter Associated Bloodstream Infections in Pediatric Patients: Collaboration Across Units.”

The project was sponsored by Dr. Jim Nataro, Dr. Nancy McDaniel, Dr. Tracey Hoke and Sheila Smith, Associate Chief Children’s Hospital and Women’s Health. Team members representing the Pediatric Intensive Care Unit, Acute Care Pediatrics, KCRC, Department of Pediatrics, Department of Anesthesiology, Infection Prevention and Control- UVA Hospital Epidemiology, and Quality and Performance Improvement demonstrated a collaborative effort and outstanding commitment to improve patient care.

The Team: Laura Lee MD and Gene McGahren MD (Team Leaders), Tausha Grim RN, Sandy Neumayr MSN ed, Lisa Fuzy RN, Virginia Syptak RN, Amber Dillon RN, Amber Tyson RN, Cathy Davis RN, Susan Steck RN, Rochelle Jobes RN, Karin League MSN RN, Sherry Nelson MSN RN, Evie Nicholson RN, Li Jin PhD, Sharon Bowles, Ron Turner MD, Victor Baum MD, Rebecca Gilbert RN, Karri Mills RN, and Laurie Brock RN.

The specific goal for this project was to reduce and ultimately eliminate catheter associated bloodstream infections among inpatient pediatric patients by implementing best practice insertion and maintenance guidelines. Evidenced based practice states that children who develop a bloodstream infection during their Pediatric Intensive Care Unit admission have a statistically longer average length of stay in the PICU and acute care setting.

The team met monthly to review all patients who had developed a Catheter Associated Bloodstream Infection (CABSI), analyzed data and studied trends for each unit (monthly CABSI rates, days between CABSI’s, insertion bundle compliance, maintenance bundle compliance), followed by discussions that led to the implementation of new strategies to reduce infections including:

- the implementation of a best practice central line maintenance bundle in PICU, Acute Care Pediatrics, and KCRC
- initiated peer and independent audits focused on central line maintenance
- ability to bolus medications from syringe pumps to provide sedation and pain control without needing to repeatedly access central lines

Exhibit SE11.f

- in depth review and evaluation of central line placement practices on all units to ensure best practice
- switched to an alcohol impregnated barrier device eliminating the need to scrub the central line access point
- and extensive education for all clinicians throughout the medical center caring Pediatric patients.

As a result the Children's Hospital pediatric units, as a group, reduced their catheter associated bloodstream infection rates from 3.9 CA-BSIs/1,000 catheter days to 1.9 CA-BSIs/1,000 catheter days.

The Charles L. Brown Award was created to honor the late Charles L. Brown's service and generosity to the Health System as a former member of the Health Sciences Council in the 1990's. He served as an advisor to the former Vice President for Health Sciences, Don E. Detmer, M.D. Through this fund, \$10,000 is awarded to Health System faculty and staff to recognize excellence in patient care.

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