



Strategic Priority: **SPI- Medical, Research, Academic Research**

Project Name

Zero Hospital- Acquired Central Line Associated Blood Stream Infection (CLABSI)

Site

Riyadh

Department

Multidisciplinary

Project Status

In Progress

Project Start Date

01-01-2018

Project End Date

12-31-2020

Problem: Why the project was needed?

Central line associated blood stream infections (CLABSI) are among the most common, lethal, and costly healthcare associated infections. Recent large collaborative quality improvement efforts have achieved unprecedented and sustained reductions in CLABSI rates, and demonstrate that these infections are largely preventable, even for exceedingly ill patients. The broad acceptance that zero CLABSI rate is an achievable goal, that has motivated and stimulated the hospital leadership and stakeholders to develop policy tools and mobilize their effort toward achieving this goal. Nevertheless, attributing reductions in CLABSI rates achieved by multifaceted quality improvement efforts solely to the use of care bundle to ensure adherence with appropriate infection control practices is an easily made but crucial mistake. CLABSI prevention is a shared responsibility and creating partnerships between different care providers in our hospital. It is critical to make and sustain progress in achieving the goal toward eliminating CLABSI.

Aims: What will the project achieve?

To decrease the number of Central Line Associated Blood Stream Infection (CLABSI) Events in all inpatient units from 144, in 2017, to less than 115 (20%) by 31st of December 2018.

Benefits/Impact: What is the improvement outcome?

(check all that apply)

- Contained or reduced costs
- Improved productivity
- Improved work process
- Improved cycle time
- Increased customer satisfaction
- Other (please explain)
Click or tap here to enter text.

Quality Domain: Which of the domains of healthcare quality does this project support?

(Select only one)

Safe

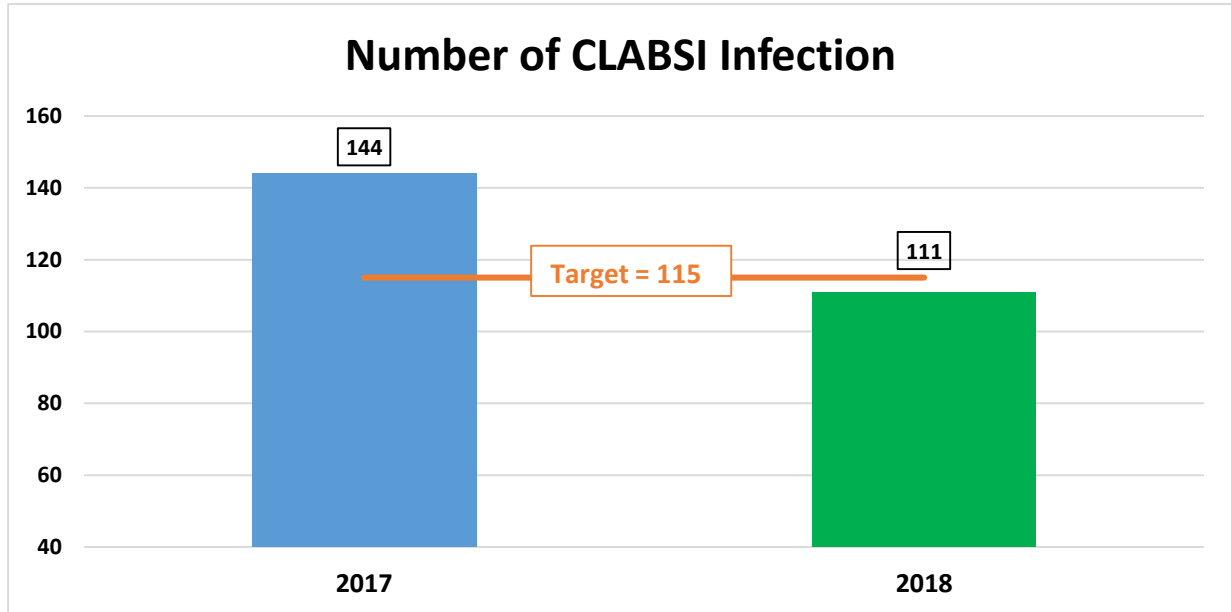
Measures: Performance metrics to be evaluated	Targets: Expected outcomes
Number of Central Line Associated Blood Stream Infection (CLABSI) Events	20%

Interventions: Overview of key steps/work completed

- Start physician training through simulation.
- Standardize the hospital policy for Vascular Lines insertion, maintenance and removal.
- Implement Lines Bundles Documentation in ICIS.
- Start Hand Hygiene Awareness Campaign.
- Engage patients and families in CLABSI prevention.
- Implement CLABSI Root Cause Analysis.

Results: Insert relevant graphs and charts to illustrate improvement pre and post project

- After a year of dedicated effort, the hospital was able to reduce the CLABSI by **22.93%**. We managed to save **33 lives** and made these patients go back to their families safe. According to a meta-analysis study, one case of CLABSI cost approximately \$50,000. This means the group **saved around \$1,650,000 which equal SR 6,187,500** in the first year. Moreover, we reduced the average length of stay to improve our productivity and quality.
- This early success—expressed in lives saved and the resulting economic impact—strengthens our resolve to focus on safety, raise the bar of expectations, and challenge our hospitals to pursue zero harm.



Project Lead

Name

(person accountable for project)

Mohammed Hijazi, MD, Consultant, Intensivist, Critical Care Medicine

Team Members

Names

(persons involved in project)

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