Reducing Dialysis Tunneled Catheter Blood Stream Infections
Sharon Hoffman BSN RN CNN
CentraCare Kidney Program, St. Cloud, Minnesota

Purpose Statement
To reduce blood stream infections related to tunneled dialysis catheters though implementation of aseptic sterile dressing changes completed by RN’s.

Synthesis of Evidence
• Search Terms: Tunneled dialysis central line catheters, blood stream infections, antisepsis, catheter related infections/preventions and control, antisepsis/methods.
• Strength of evidence for 3 research studies and 5 supporting documents was evaluated.
• Level of evidence was C using Iowa Model for Evidence review supporting the use of sterile technique when performing dressing changes on central venous catheters.

Goal: Access-related BSI’s will be reduced by 50% compared to FY16 results.

Pre-Measure/Test of Change
Pre-Measure Data
FY16 (December 2015 – June 2016)
• 6 BSI’s/283 catheter months = 2.12% or 1 BSI every 47.1 catheter months.
• Clean Technique for Drsg Changes = 100%
• Drsg Changes Performed CCHT/LPN = 90% RN = 10%

Test of Change – Pilot
Test Site: CentraCare Kidney Program St. Cloud
• 24 chair facility/110 patient population
• Test period December 2016 – June 2017
• Kick-Off held on 10/25/16 with KDU RN staff and project team.
• RN staff were educated on sterile dressing change technique & completed a demonstration/competency.

Post Measures
Post Measure Data
FY17 (December 2016– June 2017)
• 3 BSI’s/240 catheter months = 1.25% or 1 BSI every 80 catheter months.
• Sterile Technique for Drsg Changes = 100%
• Drsg Changes Performed RN = 100%

Goal of reducing BSI’s by 50% was met!

Practice Change
Based on the outcome success, the practice of sterile technique used for dialysis catheter dressing changes performed by RN staff was implemented program wide on January 15, 2018. RN staff was educated on sterile dressing change technique by viewing a computer based training module demonstrating the correct technique. Each RN staff member then performed a demonstration of sterile dressing change technique to show competency.

Team Members
Karen Chalich BSN RN CNN
Patricia Dumonceaux – MSN RN PHN CIC
Angela Jordahl BSN RN CNN
Angie Stulc CCHT

References

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EBP Project Poster Title
Your name & credentials
Institution, St. Cloud, Minnesota

Purpose Statement
Font size recommended at 10

Synthesis of Evidence
Include bullet points of your literature findings, include the grading as appropriate
• Bullet

Team Members

Pre/Post Measures
Use this template if you want to emphasize measurements/outcomes
Include charts, graphs, policies, orders, Epic screen shots – whatever you can do to show your results
Your pre and post data should be here

EBP Practice Change

References
This can be in font size 6. Template includes APA format as an example provided by Forsyth, D. N., Wright, T., Scherb, C., & Gaspar, P. (2010). Disseminating evidence-based practice projects: Poster design and evaluation. Clinical Scholars Review, 3(1), 14-21.
Your name & credentials
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Introduction
Font size recommended at 10

Research Problem/ Question

Methodology
Include bullet points of your literature findings, include the grading as appropriate
• Bullet

Analysis/Results
Include charts, graphs, policies, orders, Epic screen shots – what ever you can do to show your results
Your pre and post data should be here

Conclusions/Implications

Acknowledgements/Funding
(if appropriate)

References
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Performance Improvement Poster Title
Your name & credentials
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Plan
Identify and analyze the problem

Do
Identify the solution
• Bullet

Study
Gather data and evaluate
Include charts, graphs, policies, orders, Epic screen shots – what ever you can do to show your results
Your pre and post data should be here

Act
Standardize the solution – systematic changes and training needs for full implementation

Team Members

References
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