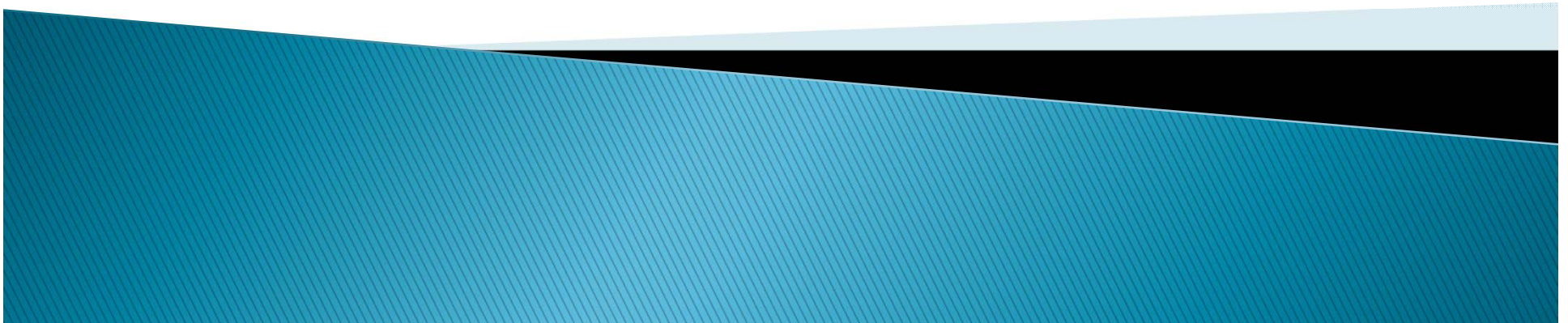


**Getting to Zero!
Central Line–Associated
Infection Prevention
Multidisciplinary Workshops 2016:
Communication & Teamwork**

November 2016



Learner Objectives

1. The Learner will identify the importance of effective communication in the health care setting
2. The Learner will define the standards of effective communication
3. The Learner will identify communication challenges
4. The Learner will identify communication strategies and tools to enhance performance and Patient Safety

Learner Objective # 1

- ▶ The Learner will identify the importance of effective communication in the health care setting





- ▶ Effective Communication Skills are Vital for Patient Safety



Importance of Communication

- Joint Commission data continues to demonstrate the importance of communication in patient safety
 - 1995 - 2005: Ineffective communication identified as root cause for nearly 66 percent of all reported sentinel events*
 - 2010 - 2013: Ineffective communication among top 3 root causes of sentinel events reported**

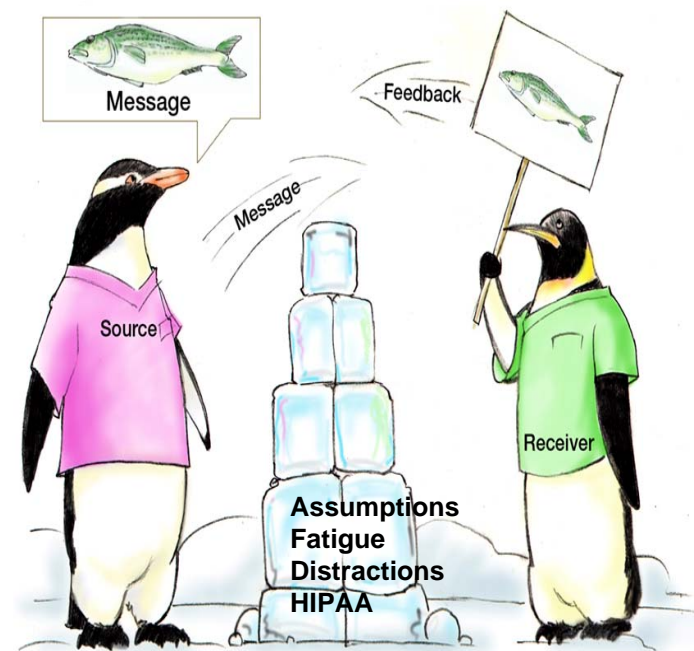
* (JC Root Causes and Percentages for Sentinel Events (All Categories) January 1995–December 2005)

** (JC Sentinel Event Data (Root Causes by Event Type) 2004-2012)



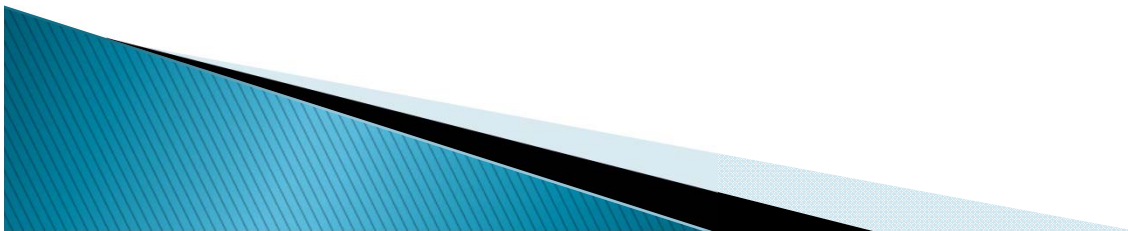
Communication is...

- The process by which information is exchanged between individuals, departments, or organizations
- The lifeline of the Core Team
- Effective when it permeates every aspect of an organization



Learner Objective # 2

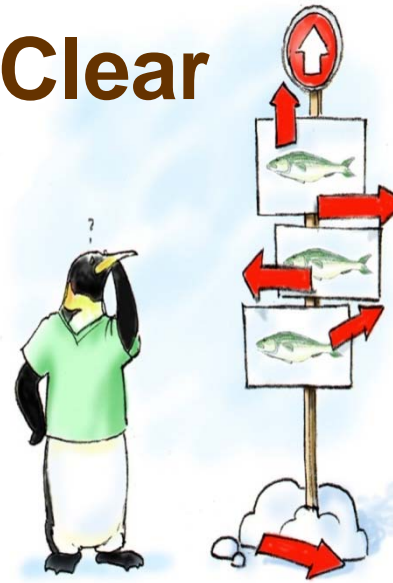
- ▶ The Learner will define the standards of effective communication



Brief



Clear



Timely



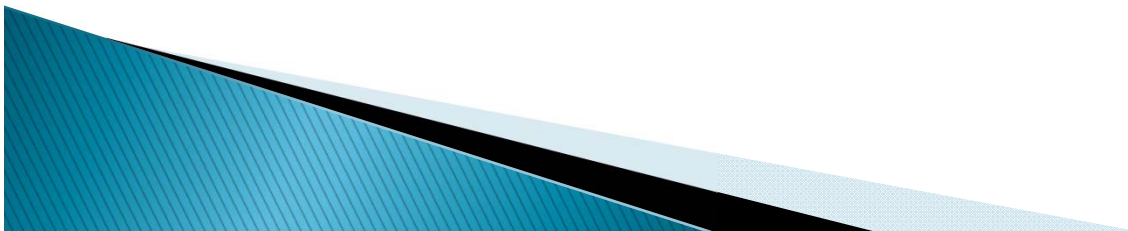
Standards of Effective Communication

- **Complete**
 - Communicate all relevant information
- **Clear**
 - Convey information that is plainly understood
- **Brief**
 - Communicate the information in a concise manner
- **Timely**
 - Offer and request information in an appropriate timeframe
 - Verify authenticity
 - Validate or acknowledge information



Learner Objective # 3

- ▶ The Learner will identify communication challenges



Communication Challenges

- Language barrier
- Distractions
- Physical proximity
- Personalities
- Workload
- Varying communication styles
- Conflict
- Lack of information verification
- Shift change

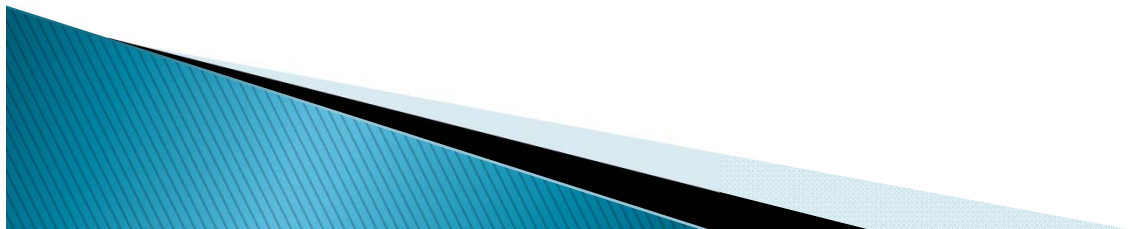


Central Line Placement



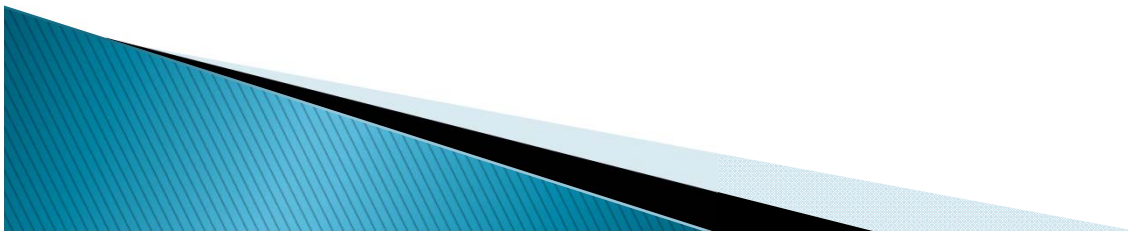
Debrief on Video

- ▶ What went well?
- ▶ What didn't go well?
- ▶ Have you been involved in a clinical situation similar to this?
- ▶ What could have been done differently?



Learner Objective # 4

- ▶ The Learner will identify communication strategies and tools to enhance performance and Patient Safety



Communication Toolbox



I am **C** ONCERNED!

I am **U** NCOMFORTABLE!

This is a **S** AFETY ISSUE!

“Stop the Line”

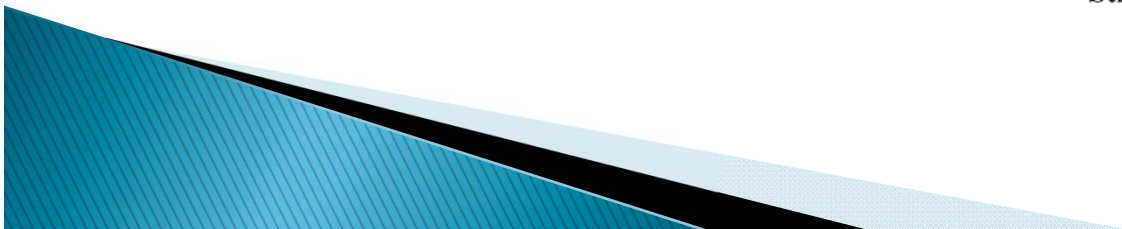


TeamSTEPPS Communication Pocket Guides

- ▶ Handout to Participants
- ▶ Contains Team Strategies and Communication Tools



Strategies and Tools to Enhance Performance and Patient Safety



REMEMBER—How To Access CVL Observation Checklist

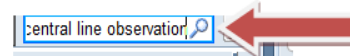
- Applies to ALL central lines (UVC, UAC and PICC)
- No longer use the paper forms
- RN must add LDA after line placement (note “cm” marking)

CENTRAL LINE PLACEMENT OBSERVATION CHECKLIST

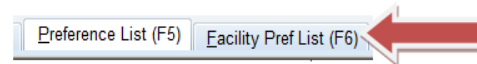
- OPEN PT CHART
- CLICK ON FLOWSHEETS ACTIVITY



- CLICK ON MAGNIFYING GLASS IN SEARCH BOX



- CHANGE TAB TO FACILITY PREFERENCE LIST*



- WRENCH IN CENTRAL LINE OBSERVATION CHECKLIST

Procedure Planning	Mode: Accordion Expanded View All	Admissi...
Before the procedure, t...		6/23/15
During the procedure, t...		1400
After the procedure, th...		
Break in Sterile Proced...		
Roles		
Procedure Planning		
Consent documented separately		
Time-Out occurred?		
Line Insertion Site		
Emergent placement		
Before the procedure, the operator will:		
Confirm hand sanitizing or antimicrobial soap immediately prior		
Disinfect procedure site per protocol		
Allow site to dry for 30 seconds		
Operator(s): hat, mask, sterile gown/gloves, eye protection		
Assistant/Monitor: hat, mask & standard precautions (if at risk for entering sterile field)		
Use sterile technique to drape from head to toe; Pediatrics use judgment to		
During the procedure, the operator will:		
Maintain a sterile field		
Guide wires, dilators removed and intact		
Flush and cap line before removal of drapes		
After the procedure, the operator will:		
Sterile dressing applied per protocol		
Sticker applied to line		
Break in Sterile Procedure?		
Break in sterile procedure?		
Roles		
Operator		
Supervisor		
Monitor/Observer		

References

1. BWH–CWN Clinical Practice Manual
2. AJN–“Champions for Central Line Care” A Team Approach for reducing CLABSI’s. September, 2014.
3. Advances in Neonatal Care. “Nurse–Driven Quality Improvement Interventions to Reduce Hospital–Acquired Infection in the NICU”. Vol 13. 2013
4. CDC. Guidelines for the Prevention of Intravascular Catheter–Related Infections, 2011
5. AHRQ–Agency for Healthcare Research and Quality Pub. No.14-0001-2 December 2013

