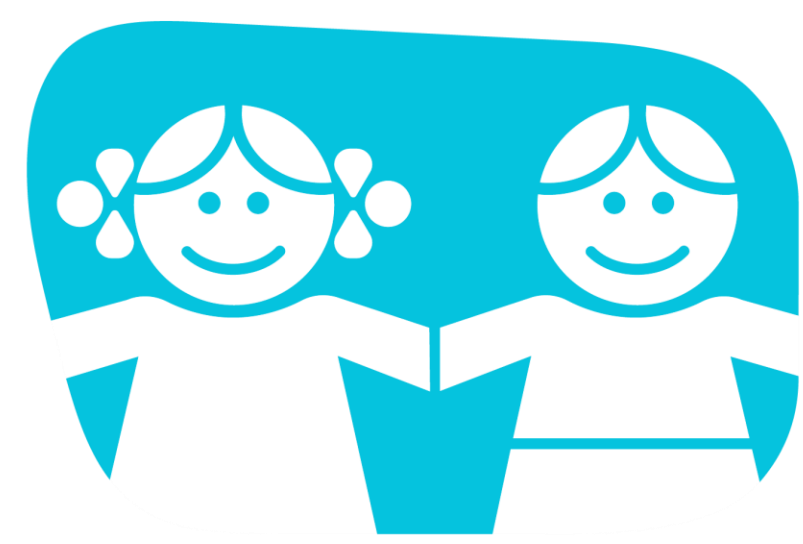


# To infinity and beyond the bundle: a CLABSI prevention initiative

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Manning Family  
Children's  
LCMC Health

## Problem/Clinical Issue

- Central line associated bloodstream infections (CLABSIs) contribute to morbidity and mortality for patients and increased costs for organizations (Chamblee et al., 2021).
- In early 2024, instances of CLABSIs across inpatient units were on the rise, sparking an action plan to improve the organization's inpatient CLABSI rate.

## Purpose

- Assess knowledge gap for current prevention measures compared to best practices
- Implement education and additional prevention measures
- Decrease the inpatient CLABSI rate

## Evidence Summary

Using the John's Hopkins EBP Model, literature recommendations included:

- Continuous education for training and competency, engaging leadership in intentional CLABSI prevention rounds, and involvement and education of caregivers.

## Implementation

Education

Caregiver Engagement

Team Engagement

Process Improvements

- Knowledge gap assessment
- CLABSI boot camp
- CLABSI reeducation plan
- Annual competency

- CVL Daily Care Checklist poster
- Caregiver education flyer

- Beyond the Bundle implementation
- Weekly leadership bedside rounds
- Road to Zero visual poster
- CLABSI review template

- Standardized product availability
- Audit tool revisions

Road to zero!

CAUTI

CLABSI

Pressure Injury

Falls

PIVIE

UE

Days since last event

Beyond the Bundle CLABSI Prevention Huddle Form

Date:

Room:

Participants:

Diagnosis:

CVL Details:

# of lumens:

Insertion Date:

Is the team discussing functionality (patency), utilization, and necessity during rounds?

What is the primary reason for accessing the line?

Are there any issues with maintaining a clean, dry, and occlusive dressing?

High Risk Factors for this patient (circle the number):

1 Exposure to secretions/stool

2 Immunocompromised

3 Previous CLABSI

4 TPN/Lipids dependent

5 Femoral line

6 IJ line

12 Repaired line

13 Frequent line accessing (>2x/shift)

14 TPA use

15 Line migration

16 NG tube

17 G-tube/GJ tube

18 PD catheter

19 Activity/movement/pulling

20 Social (hygiene, cobedding, language/culture barrier)

21 CHG allergy

Other:

Valguard/parafilm around tubing<sup>1,5,6,10,16,17,18,21</sup>

Clearguard (HD catheters)<sup>2</sup>

CHG allergy products<sup>21</sup>

1:1 observation/virtual sitter<sup>19</sup>

Stat Lock<sup>8,10,15,19</sup>

Hemostatic agent (Stat Seal)<sup>8,19</sup>

Mastisol<sup>8,9,10,15,19</sup>

Suture/secure port IV<sup>6,10,15,19</sup>

Education/restriction of co-bedding<sup>20</sup>

Diaper change/ostomy protocol<sup>1,5,8,16,20</sup>

ABD/Maxi-pad in diaper to prevent stool contamination<sup>1,5</sup>

Bibs<sup>1,8</sup>

Central line infection prevention daily care

Cuidado diario para la prevención de infección por la vía central

PICC

CVL

HDC

PAC

Broviac

Location/laterality:

Next dressing change due:

Next room change scheduled for:

Placement date:

Next cap change due:

Week of:	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
CHG bath/linen/clothing change							
Wipe tubing with CHG (with bath)							
High touch surface cleaning							
Oral care (per protocol for intubated patients)							

What can you do to help prevent an infection for your child?

Hand hygiene: wash your hands frequently (and encourage visitors to do the same)

Clean environment: throw away trash, keep unnecessary items out of the bed

Bathing/clothing change: shower and change into clean clothes daily

Co-bedding: avoid laying in the bed with your child when possible

¿Qué puede hacer para ayudar a prevenir una infección en su hijo/a?

Higiene de manos: lavarse las manos con frecuencia (y animar a los visitantes a hacer lo mismo)

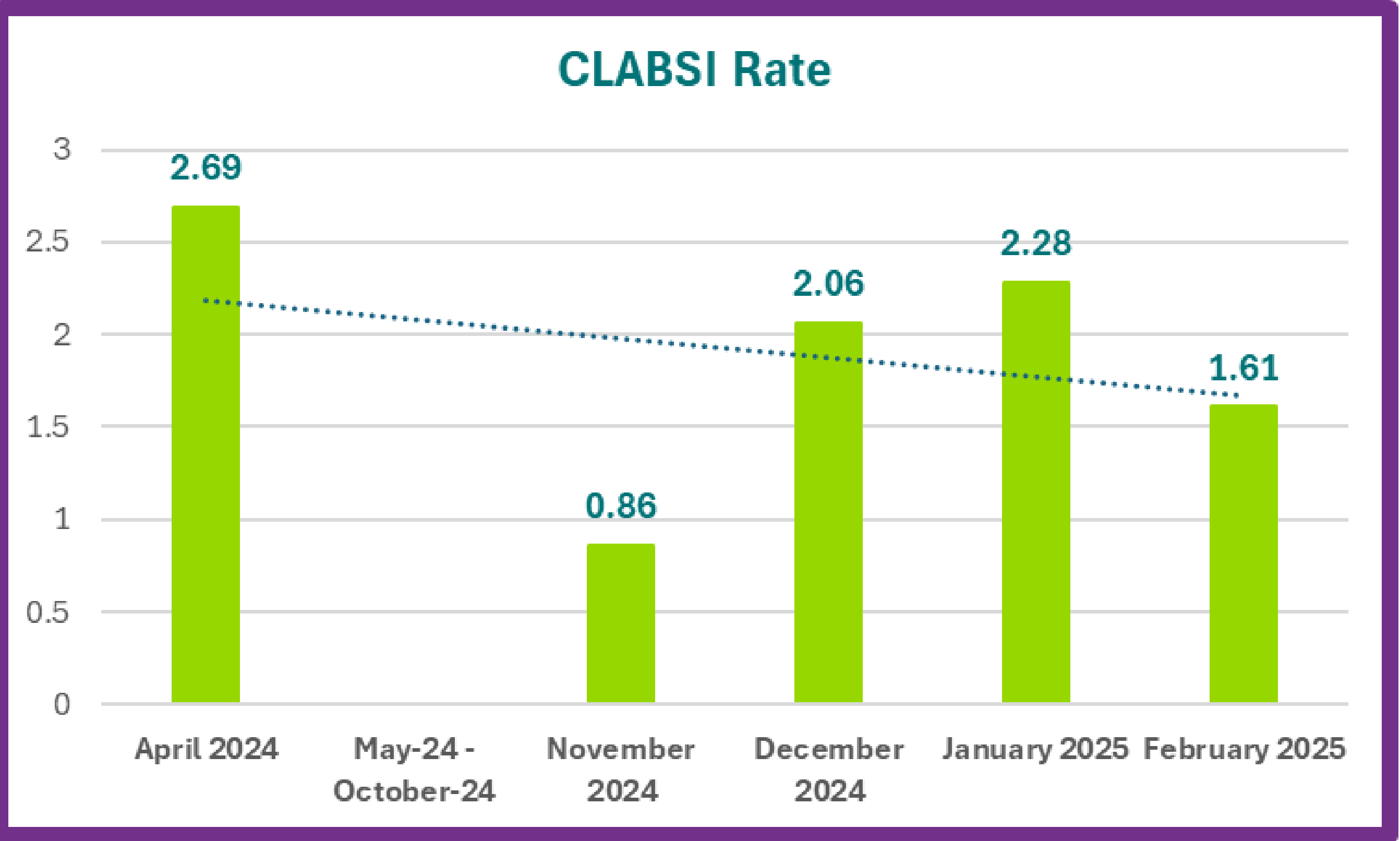
Entorno limpio: botar la basura, mantener los artículos innecesarios fuera de la cama

Baño/cambio de ropa: ducharse y ponerse ropa limpia todos los días

Cama compartida: evitar acostarse en la cama con su hijo/a cuando sea posible

## Results

As new practice implementations of staff education, caregiver engagement, team engagement, and process improvements are enculturated, the CLABSI rate has decreased.



## References

References available upon request.

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