**HCAI DRIVER DIAGRAM**

Reducing Blood Stream Infections at Leeds Teaching Hospitals

Getting the basics right.

Identify the risks and act on them

Culture, teamwork and accountability: staff, patients and carers

 “A device (catheter, drain, etc.) is everybody’s business at LTHT”

**Secondary Drivers**

**Interventions**

**Aim**

**Primary Drivers**

* “At a glance” document review of cannula and catheter care -
	+ Support workers - complete on admission
	+ Nursing/medical staff review and care of devices - is the device still needed? PICC/ midlines weekly dressing change. Change catheter bags weekly
* Early device removal -
	+ cannulas - Use cannula removal algorithm
	+ Catheter care - use HOUDINI check.
* Right patient, Right indication, right place right line right time
* Every device is a risk - respect the line on insertion, on-going care and removal
* Education and training
* Access to right expert for line removal, remove line if not used for 24hrs
* Multi professional documentation

* Training for you and your staff -
	+ Masterclass in IPC Study Day.
	+ Clean in 15 seconds ANTT posters.
	+ Ward-based learning bursts
	+ Don’t forget Trust guidelines
* Personal Protective Equipment at a glance
	+ Use PPE advisory notice
* Know your data and use your data to celebrate success and champion preventing blood stream infections -
	+ Debrief any BSIs and learning in ward safety huddle
	+ Have a monthly MDT focussed meeting about HCAI
	+ Certification for achievement of certain milestones

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* Infection risk - MRSA screening, decolonisation and prophylaxis
* Know your risk - know your patient e.g. when to use asepsis
* Education and training - visual aids
* When to wash hands, wear gloves, wear mask, wear apron
* Celebrate success - develop metrics at ward level, CSU level and Trust level
* Enabling culture, open to enquiry, speak out
* Overarching organisational measure
* Multi-disciplinary champions - local
* Shared care - patient/relative involvement