Call to Action on Eliminating Infection-Related Ventilator-Associated Complications (IVAC)
December 7, 2017
Today’s Agenda

• Welcome and Introductions
• Why the Call to Action
• Resources and Support
• Tracking progress
• How can we help?
Why the Call to Action

**Florida HEN 2.0 Baseline: 2.56 (69 hospitals)**

**Florida HEN 2.0 Apr-June 2016: 1.68 (64 hospitals)**

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Source: Comprehensive Data System as of December 4, 2017
CALL TO ACTION

• FHA Quality Committee
• FHA Annual Meeting
• CEO Call to Action

TO:         FHA Member Hospital CEOs
FROM:       Bruce Rueben, President
SUBJECT:    Call to Action: Ventilator Associated Infections
DATE:       November 20, 2017

Based on recent data, the number of infection-related ventilator associated events (VAC) have increased in Florida hospitals. These events create serious complications and in many cases, result in death. They are preventable and it is our responsibility to reverse this trend.

Strategies to effectively prevent the risk of ventilated patients developing complications have been known for many years. Specific strategies, include:

• Elevate the head of the patient’s bed 30 to 45 degrees
• Administer oral care with chlorhexidine 0.12 percent
• Utilize pepsin inhibitor and deep vein thrombosis prophylaxis
• Initiate spontaneous waking and breathing trials

The following steps are essential to ensure VAC is prevented:

• Know your data. Track your data monthly and review your rates.
• Conduct a root cause analysis on every VAC. Download our online tool to assist with this.
• Review the FHA Top 10 Checklist for VAC, available online.
• Ask staff to use the IVAC Resource Guide, which includes evidence-based strategies, web-based resources and case studies from hospitals successfully maintaining zero VAC.
• Participate in an FHA member webinar: Call to Action on Eliminating Infection-Related Ventilator-Associated Complications (IVAC) on December 7, 2017 at 2 p.m. Register online.
• Share your success stories via email to mission@fha.com to be featured as an FHA member case study.

To assist in this ongoing effort, FHA staff will:

• Monitor monthly progress on reducing VAC and report back on how we are doing as a state.
• Provide one-on-one coaching and support to hospitals that are struggling with reducing their VAC rates.
• Highlight successful hospitals and their strategies.

Reversing the increase in ventilator associated conditions is a critical goal that is well within our collective ability to accomplish. Our success will demonstrate yet again that FHA member hospitals are strongly committed to providing patients with the safest and best care possible.

Please do not hesitate to contact me at 850-222-9800 with any questions. Thank you.
Risks Associated with Ventilators

- Pneumonia/other infections
- Pressure ulcers and other HACs
- Longer hospital stays
- Increased cost
- Risk of Sepsis
- Disability
- Death
FHA Focused Support

• Resources and tools
• Education and training
• Coaching and sharing forums
• Successful hospital stories
• Tracking progress
Resources and Tools

- GAP Assessment (Top 10 Checklist)
- Change Package
- Resource Guide
- Toolkits
- Website (HRET HIIN)

Infection-Related Ventilator-Associated Complications Resource Guide

Patients developing infection-related ventilator-associated complications (IVAC) are at high risk for outcomes such as pneumonia, peptic ulcer disease, gastrointestinal bleeding, sepsis, various thrombotic events and sepsis that can lead to death. Strategies to reduce the risk of ventilated patients from developing complications have been known for years. Below, you will find resources that will assist you in your efforts to reduce the risk for developing an IVAC.

Resources

Health Resource & Educational Trust (HRET):
- IVAC Checklist Top 10 Process Changes
- Ventilator-Associated Events (VAE) Change Package
- VAE Top 10 Checklist / Data of Last VAE Poster
- VAE Resource Library
  - Case Study
  - Journal Articles
- High-flow oxygen through nasal cannula in acute hypoxic respiratory failure
- Does noninvasive positive pressure ventilation improve outcomes in acute hypoxic respiratory failure? A systematic review
- Potential strategies to prevent ventilator-associated events
- Effect of daily chlorhexidine bathing on hospital-acquired infection
- UP Campaign – Cross-cutting harm reduction strategies

Agency for Healthcare Research and Quality (AHRQ):
- Toolkit To Improve Safety for Mechanically Ventilated Patients

Centers for Disease Control and Prevention:
- VAE Calculator v4.0

Coaching Calls: For hospitals struggling with IVAC, the FHA Quality Team is available for one-on-one coaching calls.

Training and Education

Upcoming Events:
- Dec. 7, 2017 | 2:00 - 3:00 p.m. – Webinar: Call to Action on Eliminating IVAC (Register online)
- Regional Meetings – GET UP: Progressive Mobility for All Patients
  - Jan. 9, 2018 | Hollywood, FL (Registration Coming Soon)
  - Jan. 10, 2018 | Orlando, FL (Registration Coming Soon)
  - Jan. 12, 2018 | Pensacola, FL (Registration Coming Soon)
Top 10 Checklist

1. Tracking Data
2. Teamwork & Communication
3. Patient/family engagement
4. Bed of bed
5. Oral care
6. Prophylaxis for peptic ulcer
7. VTE prophylaxis
8. Spontaneous Awakening/Breathy
9. Early exercise/progressive mobility
10. Sedation management

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<th>Will Adopt</th>
<th>Notes</th>
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<td>1. Tracking Data: It is important to collect and analyze data to identify</td>
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<td>a. As a participating FHA HIIN hospital, you may enter your data in NHSN and confer rights for submission of the data to CRIS.</td>
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<td>priorities in practice/processes.</td>
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<td>b. For FHA member hospitals that are not participating in the FHA HIIN, IVAC data is being submitted monthly to FHA via</td>
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<td>ensure bundle compliance and maintain a culture focused on providing the</td>
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<td>best possible care for mechanically ventilated patients. Nurses,</td>
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<td>physicians and respiratory therapy staff must work together to ensure</td>
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<td>bundle items such as head of bed (HOB), spontaneous awakening</td>
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<td>trials (SAT), spontaneous breathing trials (SBT) and oral care are done</td>
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<td>elements of the bundle in charge nurse rounds and nurse-to-nurse/</td>
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Education and Training

• Jan. 17, 2018, 1-2 p.m. ET – Reducing Infections with IVAC

• IVAC Bi-Monthly Webinars, 12-1 p.m. ET
  – Mar. 1, 2018 – IVAC and the UP Campaign
  – May 3, 2018
  – Jul. 5, 2018
  – Sep. 6, 2018

• GET UP: Progressive Mobility for All Patients
  – Jan. 9, 2018 | Hollywood, FL
  – Jan. 10, 2018 | Orlando, FL
  – Jan. 12, 2018 | Pensacola, FL

• Recorded trainings
  – No Tubes, No Vents, No VAE
Support

- Coaching calls
- Site visits
- Partner with mentor hospital
- Other needs?
Tracking Progress

• Monthly tracking and reporting
  – HIIN hospitals
  – Non-HIIN hospitals

• Use to identify
  – Case studies
  – Hospitals with opportunity
Discussion

• What are you doing that works?
• What are your challenges?
• How can FHA support your IVAC improvement work?
We are here to help!

HIIN@fha.org
407-841-6230