

Successful implementation of a unit-based quality nurse to reduce central line-associated bloodstream infections.

February 12, 2014

Thom KA, Li S, Custer M, et al. Successful implementation of a unit-based quality nurse to reduce central line-associated bloodstream infections. *Am J Infect Control*. 2014;42(2):139-43.

doi:10.1016/j.ajic.2013.08.006.

<https://psnet.ahrq.gov/issue/successful-implementation-unit-based-quality-nurse-reduce-central-line-associated-bloodstream>

Central line-associated bloodstream infections (CLABSIs) cause substantial morbidity and mortality. [Efforts](#) to combat these complications include implementation of [checklists](#) and—perhaps [more importantly](#)—the enhancement of [safety culture](#). Despite the widespread success of these interventions, some institutions continue to experience CLABSI rates that are above national benchmarks. This study describes the introduction of a unit-based quality nurse dedicated to preventing CLABSIs within a surgical intensive care unit (ICU) at an academic medical center. The quality nurse helped to educate staff about [health care-associated infections](#) and prevention strategies. The nurse also provided immediate, direct feedback to staff regarding their compliance with best practices. The average CLABSI rate decreased significantly, even after adjusting for multiple factors including reduction in CLABSI rates in other adult ICUs. A unit-based quality nurse may prove to be a powerful adjunct to the current available tools for reducing these costly infections.