Summer Training at Care Hospitals, Hyderabad

PROJECT ON: MEASURES TO INCREASE COMPLIANCE TO CARE BUNDLES

OBJECTIVE: To determine the percentage of bundle documentation compliance in critical care areas of 1st and 2nd floors of hospital.

METHODOLOGY:

1. Duration of study: Two months from 1st April to 31st May 2016

2. Sample: The sample includes bundle check list of VAP, CAUTI and CLABSI in files of the patient who were admitted in the critical care areas of 1st and 2nd floor of the hospital.

   Inclusion criteria: Patients who were on ventilator, central line and Foley's Catheter.
   Exclusion criteria: Patients who doesn't have any catheter and central line.

3. Sampling method: Random sampling

4. Sample size: To determine the compliances I have taken bundle check list of all the patients who were on ventilator, central line and Foleys catheter in critical care areas.

5. Area of study: Critical care areas of 1st and 2nd floors of the hospital

   MICU-1
   MICU-2
   NICU
   ICCU
   ICU
   LICU

6. Type of data: Primary data

7. Tool and technique for data collection:

- Bundle check list which was specifically designed to record the details of inserted devices to the patients including their duration such as intubation and extubation date and time.
- It focuses mainly on documentation of check list of VAP, CAUTI, and CLABSI within stipulated time.
- Observations are done according to the timings that is followed to record the checklist.
- For assessment of the checklist only morning and evening data has been taken till 4 pm.

OBSERVATIONS:

- Few bundles [7.2%] were observed to be documented till 8 pm.
- Catheter is not checked properly and urine is stagnated in the tube [3.5%] and sometimes nurses are recording without checking the checklist.
- Remnants of blood[2%] is seen in some central line cannula
- Handling the lines and ports of central line without gloves sometimes.
- Bundles were not found in the place where it should be in patient case sheet.
- In NICU, time discrepancies were observed in documentation of bundles during evening hour as few staff are documenting CAUTI bundle at 12 noon, few at 3 pm and so on.

RECOMMENDATIONS

- Proper timings should be maintained in each and every department and the check list should be placed in proper place.
- Nurses who will be on night duty should monitor all the check list regarding catheter, central line and ventilator before they leave in the morning.
- If a night duty nurse didn't document the morning parameters of the check list before she leave then the morning duty nurse has to document the check list.
- The check list has to be documented at particular timings with a grace time of 30-40 min.
- In some critical areas beds doesn't have indicators to measure the angle of the bed head for intubated patients and it should be properly maintained.
- Some beds doesn't have clamp to hang the Urobag and it has to be maintained.
- One nurse has to be allotted as supervisor for HAI and he/she is responsible for the maintenance of proper check list and look after all other nurses in the dept.
- Check list should be updated and make some necessary corrections.
- Proper training classes should be conducted to all the nursing and housekeeping staff regarding Hospital acquired infections and its prevention.
- In some critical areas some beds doesn't have a clamp to hang the Foley's catheter and in those cases the catheters are placed in some higher level which is not below the bladder level of the pa-

Fig: 1 PERCENTAGE OF BUNDLE DOCUMENTATION COMPLIANCE- VAP

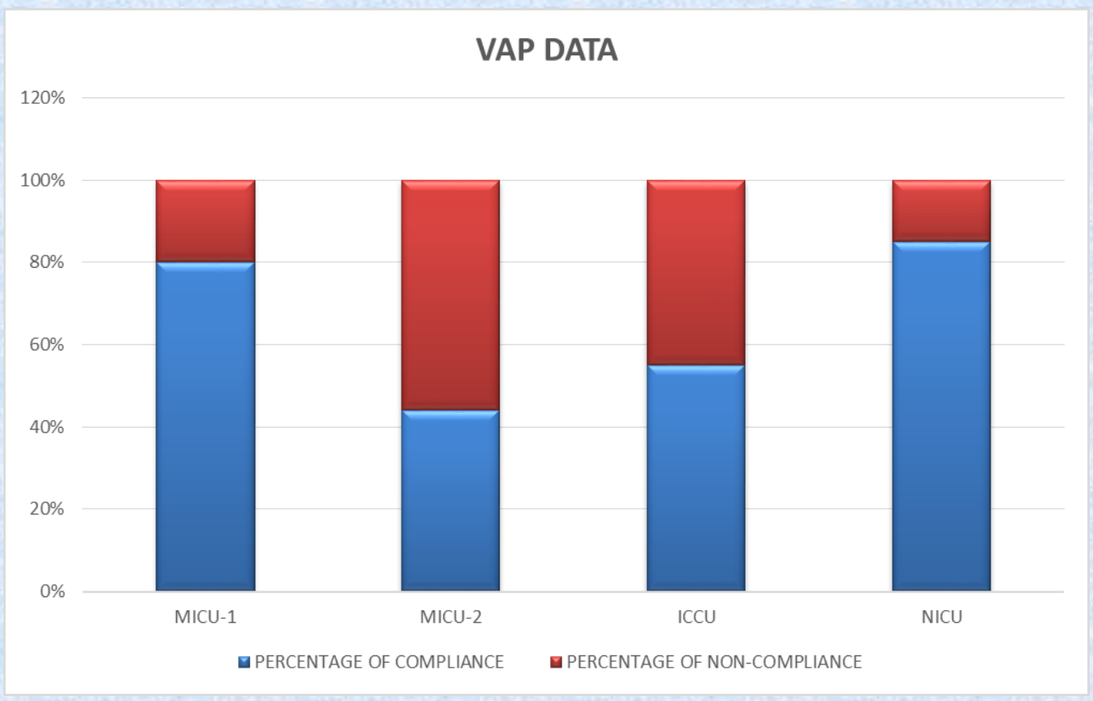


Fig: 2 PERCENTAGE OF BUNDLE DOCUMENTATION COMPLIANCE-CAUTI

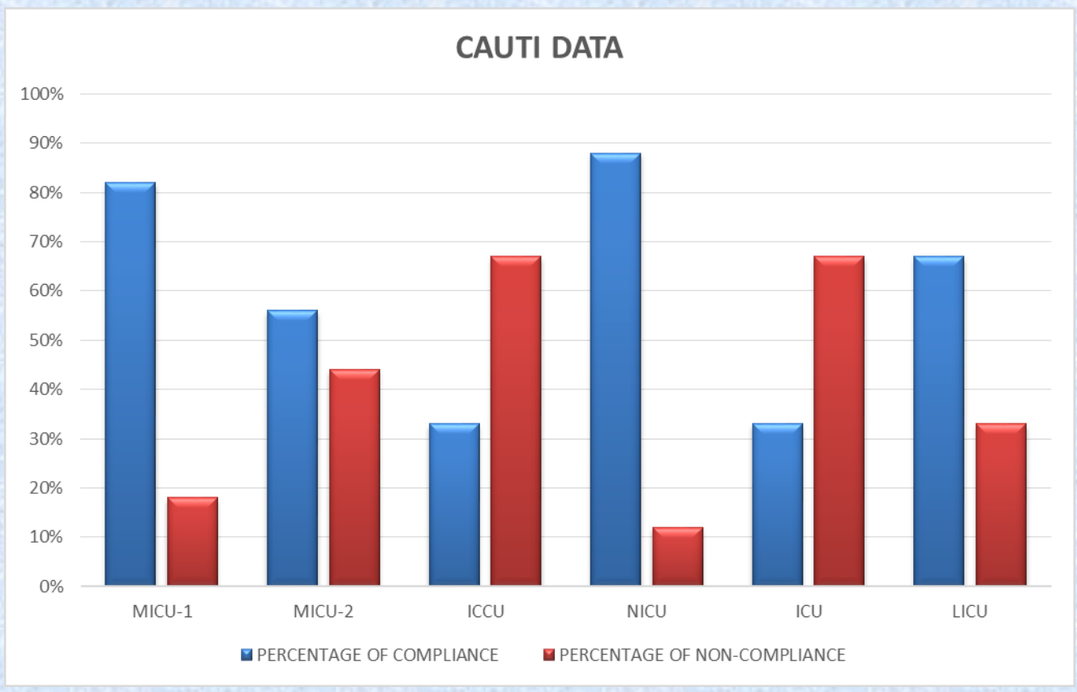
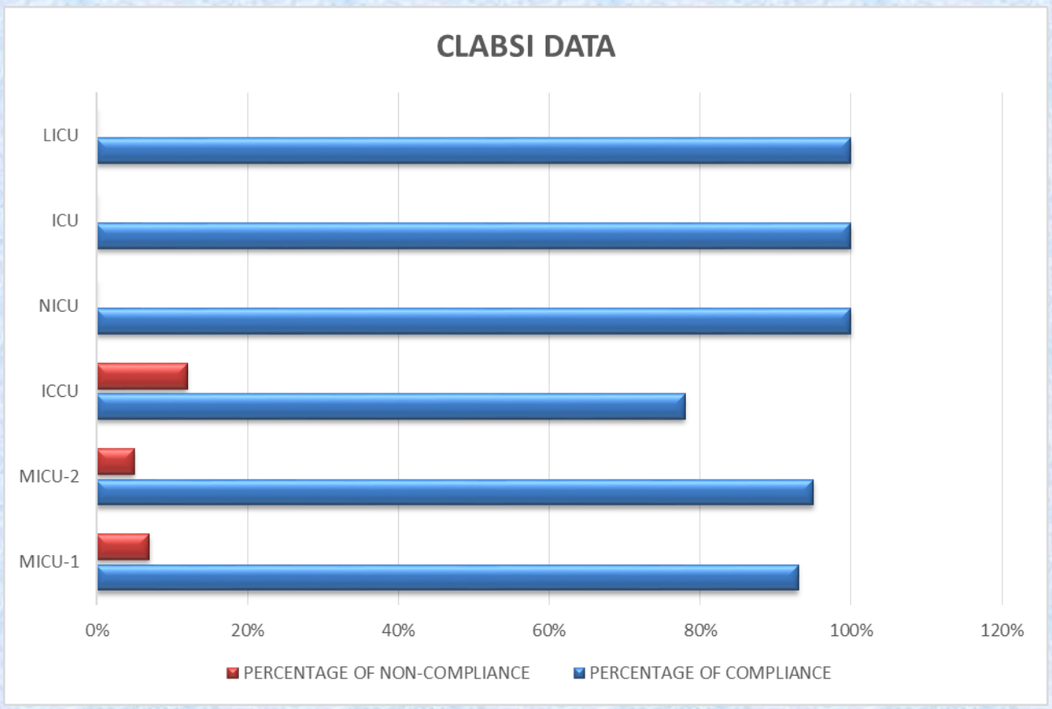


Fig: 3 PERCENTAGE OF BUNDLE DOCUMENTATION COMPLIANCE-CLABSI



Presented By: **DR.VANAMALI.P**

Roll No: 0360 MBA-HM-20

Under the guidance of **DR.S.K.PURI**