Comprehensive Unit-Based Safety Program and Stop BSI

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Description:
The Joint Commission has made it a national priority to reduce the risk of healthcare associated infections. Specifically, the prevention of central line associated bloodstream infections (CLABSIs) is recognized as an explicit Hospital National Patient Safety Goal. This goal is highlighted with good reason as central line associated bloodstream infections cause considerable morbidity, mortality, and healthcare costs. In the US alone, there are an estimated 82,000 catheter-related bloodstream infections and up to 28,000 attributable deaths that occur in intensive care units annually. In addition, each infection costs approximately $45,000. Consequently, efforts to reduce bloodstream infections are an essential component of improving patient safety and quality of care.

Evidence for safety and quality interventions is not always robust and translation of quality improvement into practice is not always effective. However, in the case of reducing central line associated bloodstream infections infections, the Keystone ICU project developed at the Johns Hopkins University School of Medicine, led to a 66% reduction in CLABSIs and a median CLABSI rate of zero in over 100 intensive care units in the state of Michigan.

This CME enduring material is an educational resource, developed as a result of the Keystone project, to provide the expertise, education and tools needed to make significant and widespread CLABSI reduction possible.

Target Audience:
This activity is intended for any physician or healthcare professional who is involved with patient safety and quality or infection reduction.

Learning Objectives:
After attending this activity, the participant will demonstrate the ability to:

-recognize the core concepts that support the science of safety, including the role of system factors, standardization, independent checks, and teamwork. Ce physician engagement

-list the 5 evidence-based practices that have been determined to reduce central line associated bloodstream infections

-explain the 5 components of the comprehensive unit-based safety program

-describe the components of creating the right team and of how to enhance physician engagement

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Comprehensive Unit Based Safety Program and Stop BSI
Program

Project Overview
Peter Pronovost, MD, PhD

The Science of Improving Patient Safety
Peter Pronovost, MD, PhD

Eliminating CLABSI
Peter Pronovost, MD, PhD

The Comprehensive Unit-Based Safety Program
Peter Pronovost, MD, PhD

Physician Engagement
Peter Pronovost, MD, PhD

Comprehensive Unit Based Safety Program and Stop BSI
Faculty List

Activity Director and Presenter

Peter Pronovost, MD, PhD
Professor of Medicine
Director, Division of Adult Critical Care Medicine
Director, JHU Quality and Safety Research Group
Medical Director, Center for Innovations in Quality Patient Care
Johns Hopkins University School of Medicine
Baltimore, Maryland

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SPEAKERS NAME AND LECTURE TITLE(S)	RELATIONSHIP(S)
Peter Pronovost, MD • Project Overview • The Science of Improving Patient Safety • Eliminating CLABSI • The Comprehensive Unit-Based Safety Program (CUSP) • Physician Engagement	**Grant/Research Funding:** National Patient Safety Agency, UK; Robert Wood Johnson Foundation; The Commonwealth Fund **Honorarium:** Hospitals and Health Care Systems (speaking on quality and safety) **Royalties:** Author; "Safe Patients, Smart Hospitals: How One Doctor's Checklist Can Help Us Change Health Care from the Inside Out"

PLANNERS NAME	RELATIONSHIP(S)
Peter Pronovost, MD	**Grant/Research Funding:** National Patient Safety Agency, UK; Robert Wood Johnson Foundation; The Commonwealth Fund **Honorarium:** Hospitals and Health Care Systems (speaking on quality and safety) **Royalties:** Author; "Safe Patients, Smart Hospitals: How One Doctor's Checklist Can Help Us Change Health Care from the Inside Out"

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