



## Reduction of Long Term Catheters Cohort 3 Checklist March / April

### Questions and Comments, please contact the Quality Improvement Department

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Resources:  
[CDC CORE interventions](#)  
[CDC CORE intervention Audit Tools](#)  
[Fistula First materials](#)  
[Algorithm Management of LTC removal](#)  
[CROWNWeb data cleanup](#)  
[CROWNWeb data definitions](#)  
[NHSN Dialysis Surveillance Training](#)

Dear Project Participants,

IPRO End Stage Renal Disease (ESRD) Network of the Ohio River Valley supports the national initiative on the reduction of blood stream infection (BSI) rate by 50% over the next five years. In order to reach this national goal, facilities that were select for in Cohort 3 of the BSI quality improvement activity (QIA) will achieve a 2% reduction in their LTC rate based on data available in October 2018. Each facility in this QIA has received information on the activities they are supposed to undertake to reach this goal.

**To assist you with compliance in this project we are providing you with a checklist of current activities your facility should be engaging in to meet the goal:**

### Facility Project Lead Checklist:

- Complete monthly Network survey that is emailed to you to identify best practices and challenges
- Attend the National LAN call in April (Invitation to follow)
- Review your quarterly Facility Summary Report, due for distribution April 2018 for trends and areas of improvement.
- Develop and review interventions and access plans in QAPI for all patients with LTCs.
- Print educational materials for the Patient Ambassadors to distribute, see below
- Review individual patient Vascular Access information in CROWNWeb for accuracy and update the information as needed.  
[CROWNWeb data cleanup](#)
- Review monthly batched VA data for accuracy and update as necessary. [CROWNWeb Data Definitions](#).

### Patient Ambassador Role:

- Distribute [Look Listen & Feel](#) information
- Distribute [What is Sepsis](#) information
- Perform Hand washing audits and report findings to the facility manager and/or at the QAPI(see CORE audit tools in resources)
- Optional: host a lobby day or design a bulletin board using the NCC vascular access materials provided

#### **NHSN Surveillance Training:**

- Minimum of 1 person per facility) needs to complete the NHSN Dialysis Surveillance training by May 1, 2018
- Sign the Attestation and return it to the Network (you will receive the attestation via an email survey to the facility manager)

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