

Abstract:

Neonatal infections, including those associated with central lines, continue to be a major cause of morbidity and mortality despite many other improvements in neonatal outcomes. Over the past decades, significant advances have been made to reduce central line-associated bloodstream infections (CLABSIs) using quality improvement methodology. This article will review pertinent studies that used both the Institute for Healthcare Improvement Model for Improvement and other innovative techniques such as orchestrated testing and health care failure mode and effects analysis. These studies, by applying best practices, have demonstrated substantial and sustainable reductions in CLABSI. Some initiatives have been able to achieve rates of zero CLABSI for prolonged periods of time. While neonates often require prolonged central venous access and suffer from impaired immunity which increases the risk of CLABSI, this review demonstrates the journey to zero is feasible.

Reference:

Pearlman SA. Quality Improvement to Reduce Neonatal CLABSI: The Journey to Zero. *Am J Perinatol.* 2020;37(S 02):S14-S17. doi:10.1055/s-0040-1713605