



Because applying all of the evidence en masse (especially in hospitals struggling with high rates of HAI, such as CLABSI) was unlikely to be successful, we used lessons learned from a successful Veterans Affairs collaborative to create a tiered, or stepped, approach to prevent CLABSI” Patel et al (2019).

Extract:

Because applying all of the evidence en masse (especially in hospitals struggling with high rates of HAI, such as CLABSI) was unlikely to be successful, we used lessons learned from a successful Veterans Affairs collaborative to create a tiered, or stepped, approach to prevent CLABSI (25). The tiered approach was simple: First, components that were supported by high-quality evidence, lower intensity, and lower cost would be emphasized. If these were not successful in reducing infection, interventions that required more resources and human capital were introduced. The first tier was designed to prioritize basic practices (for example, hand hygiene) before more expensive interventions (for example, antimicrobial catheters) were suggested in tier 2, mirroring the way in which guidelines approach CLABSI prevention (16). The approach is also adaptable and flexible, thus helping with implementation across individual hospitals (10).

You may also be interested in...

Seasonal differences in central line-associated bloodstream infection
Risk factors for non-central line-associated bloodstream infection
Systematic review of central-line-associated bloodstream infection

[Full Text](#)

Reference:

Patel, P.K., Olmsted, R.N., Hung, L., Popovich, K.J., Meddings, J., Jones, K., Calfee, D.P., Fowler, K.E., Saint, S. and Chopra, V. (2019) A Tiered Approach for Preventing Central Line-Associated Bloodstream Infection. *Annals of Internal Medicine*. 171(7_Supplement), p.S16-S22. doi: 10.7326/M18-3469.

