ORLANDO HEALTH® | ARNOLD PALMER HOSPITAL For Children

Central Line Associated Blood Stream Infections (CLABSIs)

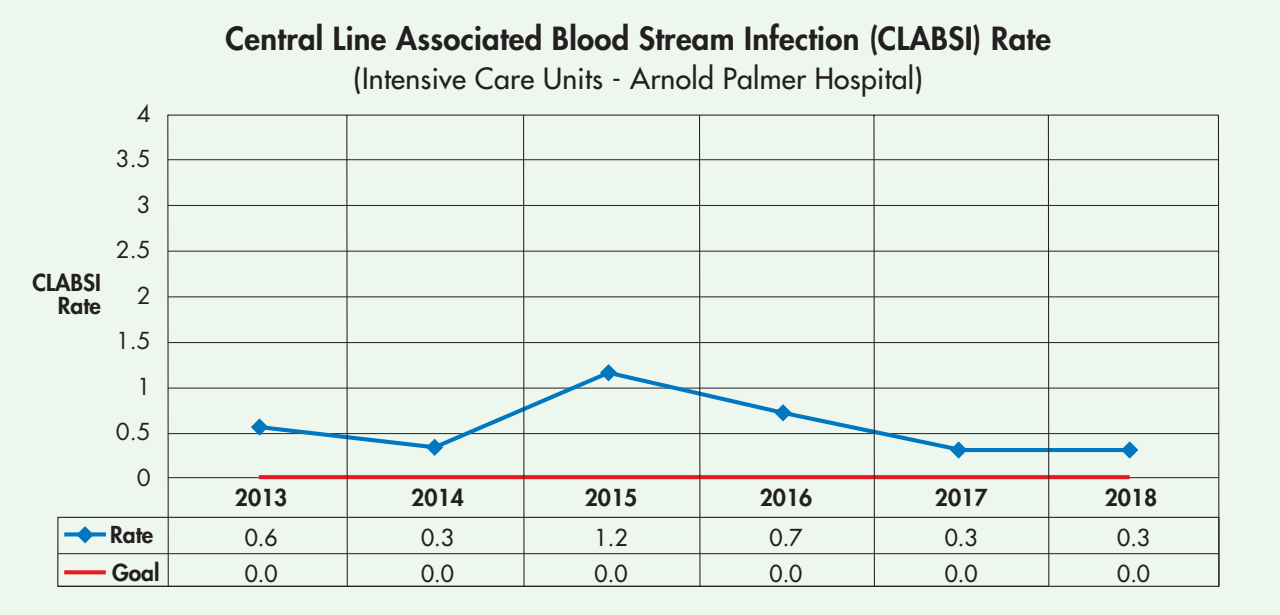
Why is this so important?

A central venous catheter or central line is a small plastic tube that is placed into the blood vessels so that important medications or fluids can be delivered to your child. A central line bloodstream infection can occur when germs enter the bloodstream putting the patient at risk of becoming sick. Given the potential serious complications that may result, we as a team at Arnold Palmer Hospital continue to strive to completely eliminate these types of infections.

How do we measure?

The CLABSI rate is calculated by the number of infections per 1,000 device days. Each day the patient has a catheter in place counts as one catheter day.

How are we doing?



	2013	2014	2015	2016	2017	2018
Rate	0.6	0.3	1.2	0.7	0.3	0.3
Goal	0.0	0.0	0.0	0.0	0.0	0.0

**Data updated January 2019*

How are we improving?

We track our progress through the Center for Disease Control's (CDC) National Healthcare Safety Network (NHSN), a national healthcare-associated infection tracking system.

- Implemented standardized practices which are recognized to lower the risk of central line infections.
- Promote strict hand hygiene practices for all of our staff, as well as patient family and visitors.
- Emphasize "proper care" during insertion and ongoing care of the central venous catheter.
- "Respect" the catheter by recognizing appropriate medical indications for use of the central venous catheter, as well as appropriate timing for its removal when no longer medically indicated.
- Monitor rates of central line infections with immediate action planning and process changes.

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Ventilator Associated Pneumonia (VAPs)

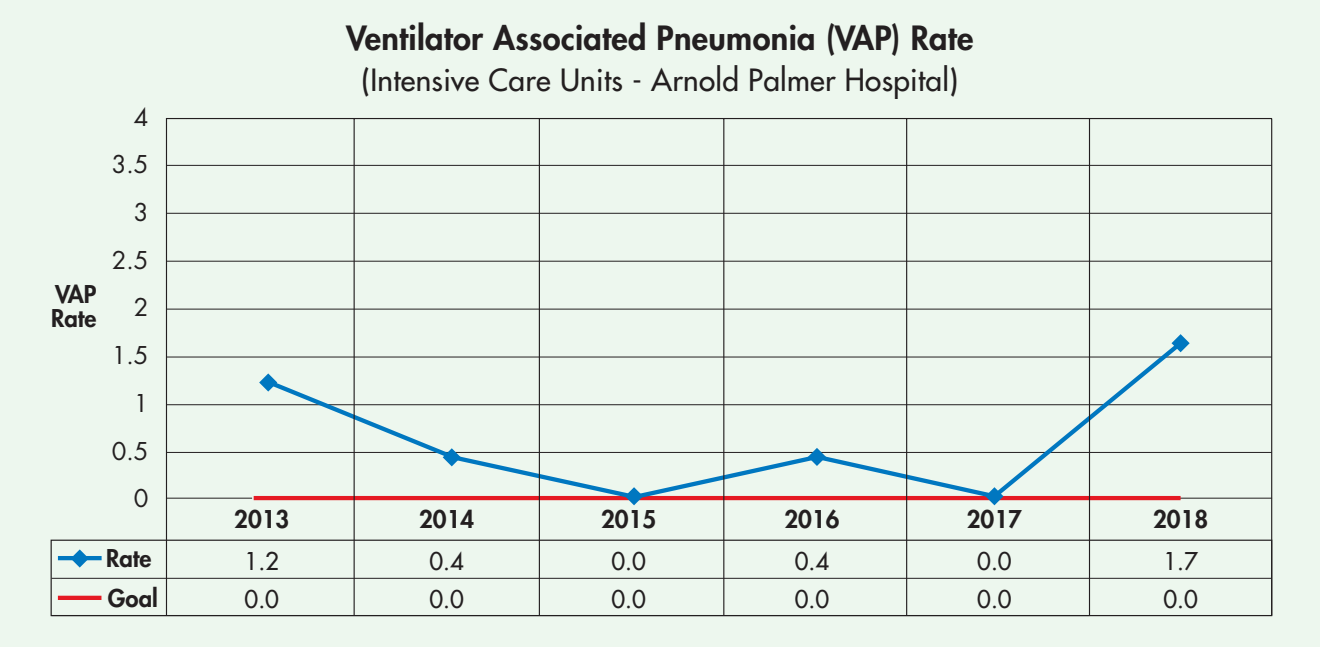
Why is this so important?

Ventilator-associated pneumonia (VAP) is an infection that can be acquired during your child's hospital stay while your child is in the intensive care unit on a mechanical ventilator device. Patients who develop this type of infection are at risk of becoming very sick. Given the potential serious complications that may result, we as a team at Arnold Palmer Hospital continue to strive to completely eliminate these types of infections.

How do we measure?

The VAP rate is calculated using the total number of patients infected for every 1,000 ventilator days. Each day your child is on a ventilator counts as one ventilator day.

How are we doing?



	2013	2014	2015	2016	2017	2018
Rate	1.2	0.4	0.0	0.4	0.0	1.7
Goal	0.0	0.0	0.0	0.0	0.0	0.0

**Data updated January 2019*

How are we improving?

We track our progress through the Center for Disease Control's (CDC) National Healthcare Safety Network (NHSN), a national healthcare-associated infection tracking system.

- Implemented standardized practices which are recognized to lower the risk of VAP, including proper patient positioning and oral hygiene while your child is on a ventilator.
- Promote strict hand hygiene practices for all of our staff, as well as patient family and visitors.
- Limiting ventilator use only when medically indicated.
- Enforcing proper guidelines for care of ventilator equipment.
- Monitor rates of infection with immediate action planning and process change.

Surgical Site Infections (SSIs)

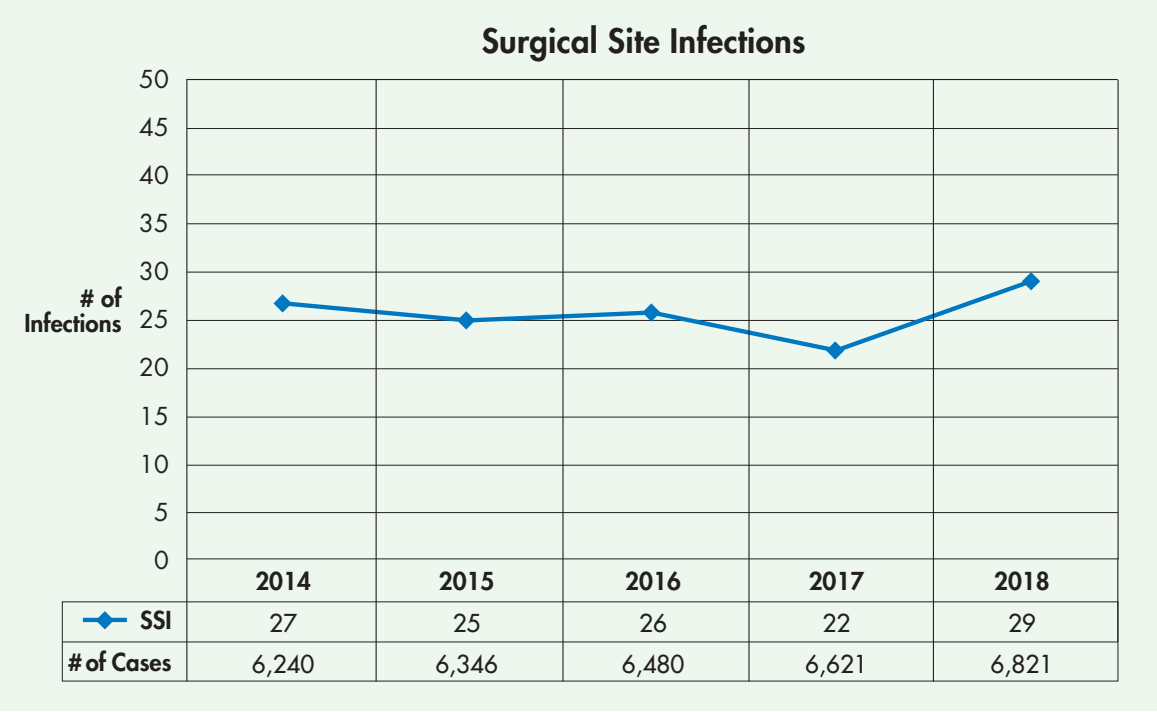
Why is this so important?

A surgical site infection (SSI) is a type of complication resulting from surgery. An infection can potentially occur following any type of surgery to your body. SSIs develop when germs get into the surgical wound either during or after surgery and can cause delayed wound healing or result in a longer hospital stay for you or your child.

How do we measure?

- We collect information on proper timing and dosing of antibiotics and proper pre-surgical skin preparation.
- For most SSIs, an infection is considered related to surgery if it occurs within 30 days following surgery (or within 90 days if an implant is involved).

How are we doing?



	2014	2015	2016	2017	2018
SSI	27	25	26	22	29
# of Cases	6,240	6,346	6,480	6,621	6,821

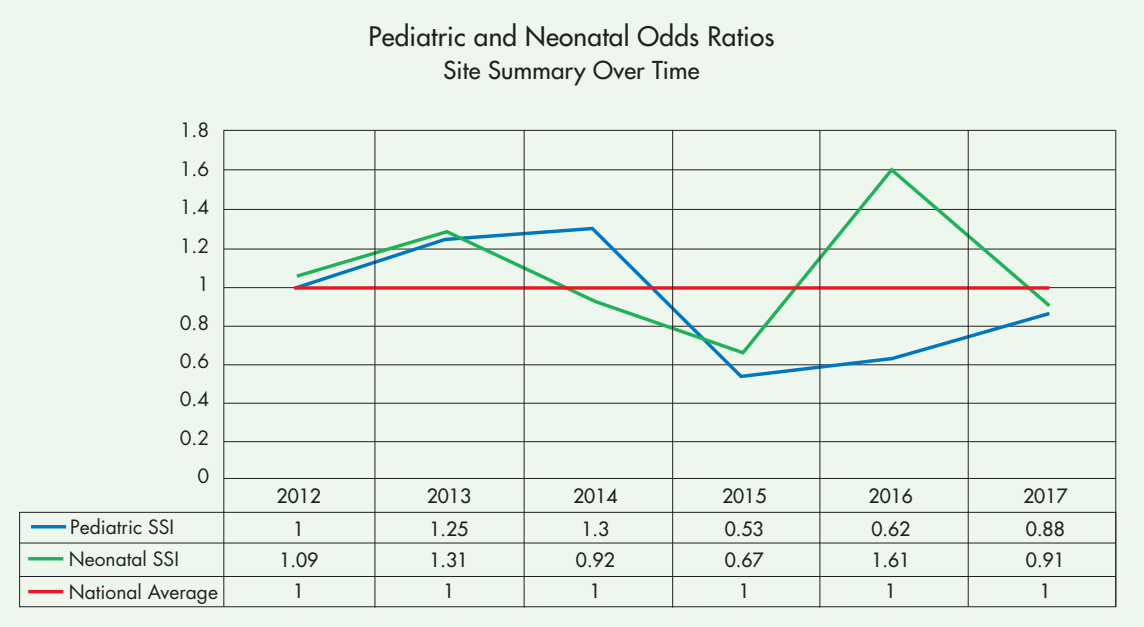
**Data updated January 2019*

How do we compare to other children's hospitals?

We compare ourselves to other children's hospitals by using an odds ratio. An odds ratio measures outcomes of a group. If the outcome is the same in comparison groups, the odds ratio will be 1.0; it is better to be below 1.0 *(see comparison chart next page).*

SSIs, *continued next page*

SSIs, *continued*



	2012	2013	2014	2015	2016	2017
Pediatric SSI	1	1.25	1.3	0.53	0.62	0.88
Neonatal SSI	1.09	1.31	0.92	0.67	1.61	0.91
National Average	1	1	1	1	1	1

How are we improving?

- Family education is given regarding proper bathing of children prior to surgical procedures, and includes specific infection prevention measures to implement before and after their child's surgery.
- All children are bathed with special medicated wipes prior to surgery to decrease the chance of an infection occurring.
- All surgical site infection cases are reviewed by a team of clinicians to identify trends and processes for improvement.
- Promote strict hand hygiene practices for all of our staff, as well as our patients and visitors.
- Communication to each individual surgeon regarding his/her SSI rates to promote internal process improvement activities.