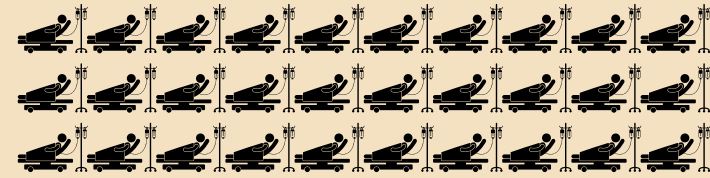


Implementing a Compliance Monitoring Process to Promote Chlorhexidine Gluconate Bathing and Hand Hygiene: An Initiative to Decrease Central Line–Associated Bloodstream Infections



According to CDC, **1 in 31** hospitalized patients get an HAI



HAI annual costs:

\$28.4 billion (direct) + \$12.4 billion (indirect)

CLABSI = \$18,000–\$95,000

AHRQ-estimated cost per incident

Areas of investigation to use to determine why CLABSI HAI is increasing in the hospital setting:

- *Is it insertion or prevention and maintenance?*
- *What type of organism is causing the infections?*
- *Was there any change in the healthcare environment?*
- *Are the providers following aseptic technique to insert lines?*
- *Are the nursing staff performing the bundle components?*



Improving hand hygiene and **ensuring CHG bathing occurs** results in fewer CLABSI HAI and considerable cost savings (\$1.4 million in less than 12 months; $p=0.011$)

Baseline Data for CLABSI Bundle Components

Goal = 75% compliance

