

Central Line Insertion Practices (CLIP) Subcommittee Advisory Committee Recommendation

Situation:

Although many California hospitals report implementation and monitoring of recommended CLIP, some subcommittee members indicated that the current NHSN CLIP form requirements may be substantially more comprehensive than more commonly used tools (e.g. IHI) and that the NHSN data may be a challenge to implement..

Background:

In addition to data reporting to NHSN, the SB739 Advisory Working Group identified several additional recommendations that were published in the December 2005 White Paper presented to DHS including recommendations that:

- California hospitals comply with CDC Vascular Access Device Guideline Recommendations
 - **5.1** - Healthcare facilities using CVCs should develop and implement policies and procedures addressing, at a minimum, category 1A recommendations of the *CDC Guidelines for the Prevention of Intravascular Catheter-Related Infections*, published in the MMWR (August 9, 2002/Vol 51/No. RR10).
 - **5.2** - Healthcare facilities using CVCs should provide training and education to healthcare professionals responsible for inserting and maintaining intravascular catheters.
 - **5.3** - Healthcare facilities using CVCs should assess healthcare worker competency for inserting and maintaining CVC. The method for documenting competency assessment should be determined by the healthcare facility.

Assessment:

In order to ensure the comparability and validity of all data reported to NHSN per SB739, CA hospitals will need to verify the comprehensiveness of current process measure surveillance. The verification process should assure that all required data elements in the NHSN CLIP data set are collected and validated. The Advisory Committee and California Department of Public Health (CDPH) may need to defer NHSN direct reporting to assure that all hospitals have established processes and methods to report all required fields in the CLIP data set.

Recommendation:

There are several short and long term activities that could be initiated to ensure improvements in patient care, accuracy of data collection and useful public reporting.

Concurrent with the process measure data set validation process identified above, a CA-wide survey should be conducted to:

- Determine a rate of hospital compliance with CDC Guidelines via a Progress Letter sent to all hospitals requiring an attestation of compliance with the CDC guidelines.
- Verify that the hospitals' process measure surveillance is consistent with the NHSN CLIP dataset and if not consistent that mechanisms are established to assure compliance with the required datasets.
- Establish a standardized: methodology for data collection, frequency of data collection (all insertions vs. adult ICUs, daily review of CL, etc.) and frequency of submission to NHSN