“We Are the Champions” played over loudspeakers, nurses representing nearly every unit at The Johns Hopkins Hospital came together to celebrate the incredible achievement of reducing central line-associated bloodstream infections (CLABSI) by 76 percent since 2015. The celebration also commemorated the anniversary of the CLABSI Champions initiative, which helped bolster the goal to reduce these infections.

The CLABSI subgroup, an interdisciplinary team with members from nursing, the Vascular Access Team and Hospital Epidemiology and Infection Control, was originally tasked with bringing down CLABSI rates by 20 percent—a strategic priority under the Johns Hopkins Strategic Plan for the nursing department. To reach this goal, the committee recruited one champion from each unit who gathered monthly to learn about infection prevention and to discuss best practices.

Rather than spending a lot of money on solutions, MiKaela Olsen, a clinical nurse specialist at the Sidney Kimmel Comprehensive Cancer Center at The Johns Hopkins Hospital and one of the CLABSI subgroup leaders, says they took a back-to-basics approach, sharing knowledge and evidence-based strategies with the champions, who took that learning back to their frontline staff.

The committee and the champions also worked to standardize the protocols for preventing CLABSIs across the hospital. Best practices such as using good hand hygiene, proper procedures for changing central line dressings and effectively flushing lines to prevent blockages all contributed to the decrease in infection rates.

“This initiative was a huge success because we gave bedside staff the knowledge to go out and tackle the problem,” Olsen said. “I am very proud of the fact that we did not bring in a list of new and costly equipment but instead we went back to the basics, making sure our practices were correct and safe.”

Deborah Baker, senior vice president for nursing for Johns Hopkins Health System and vice president for nursing and patient care services for The Johns Hopkins Hospital, was on hand to continued on back page.
honour this milestone and the nurses who made it possible. “What is most impres- sive is how this team mobilized around the effort so quickly, and with such passion and focus,” Baker said. “It was really a grassroots effort led by frontline nurses.”

“I think this represents a whole new level of nursing,” said Peter Promov- vost, director of the Armstrong Institute for Patient Safety and Quality, who was also in attendance to recognize this achievement. “They now realize that they have the power to eliminate not just this one patient harm, but all harms related to the treatment of CLABSI.”

The champions celebrated their success with a champagne toast and cupcakes laid out to read “76%.” To Olsen and the entire CLABSI team, the 76 percent reduction in CLABSI is more than just a number. “It means we were able to save 100 patients from acquiring a dangerous central line infection.”

And, Olsen says, the team isn’t resting on its laurels. “We can still do better. When we started this initiative, our mantra was ‘we believe in zero CLABSI’s and we very much still do. We will keep reaching for that goal. 2018 is going to be even better.”

—Laura Motel

CLABSI Champions

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Hurricane Harvey

“However, ‘helping’ may not always be helpful and could even be dangerous if you aren’t on a specific mission.” If you are a well-meaning provider or individual hoping to help, CEPAR rec- ommends that you do not travel to an impacted area without a formal request by a trustworthy relief or response organization. “Disaster zones are typi- cally unsafe, and individuals who decide to travel to these locations could put themselves at risk,” Kelen says. “Most importantly, these volunteers could strain already scarce resources since volunteers need to be housed and fed.”

By registering with an organization, your skills can be called upon at the right time, and you can be given mean- ingful assignments that will have real impact on those affected. When it comes to donations, it’s important to also be cautious. Efforts specifi- cally requested by a reliable relief organization, CEPAR recommends not sending clothing or supplies to a disas- ter area through local drivers. “These items often don’t meet the needs of people in the affected area—there may be too much of one item and not enough of another—and they require volunteers onsite to sort through them, potentially displacing the volunteers from another much-needed effort,” Kelen says.

Many reputable nonprofit disaster response and relief organizations prefer monetary donations after a disaster. This way officials will be able to use the donation in the most appropriate man- ner for what the area specifically needs. It’s best to check the organization’s website before sending these items. Also, while there are many trustworthy organizations, be aware of potential scams. “Bogus charities tend to surface after disasters,” Kelen says. If you would like to make a monetary donation to help the people of Houston and the Gulf Coast, donations can be made to a reputable nonprofit disaster response organization.

What Johns Hopkins Experts are Saying

Lauren M. Sauer
Assistant Professor of Emergency Medicine, School of Medicine

“Hurricane Harvey is unprecedented in its magnitude and the resulting flooding, but we will continue to see storms like this, as a direct result of climate change. While Harvey stalls over the Gulf Coast of Texas, it is critical to consider the most vulnerable populations that will be affected by the storm and its aftermath.”

Paul Spiegel
Director, Johns Hopkins Center for Humanitarian Health, Bloomberg School of Public Health

“Given the scale of this event, prioritization needs to occur, as not everyone will be helped at the same time. Despite back-up generators, some hospitals may need to be evacuated not everyone will be able to be helped at the same time. Despite

Paul Ferraro
Bloomberg Distinguished Professor of Business and Engineering, with faculty appointments at the Carey Business School, Bloomberg School of Public Health, and Whiting School of Engineering.

“As a nation, we need to be better prepared for catastrophic floods so we can mitigate the widespread damage and loss of life. Fifty inches in a few days might be unusual, but extensive flood- ing with its subsequent property damage and loss of life is not. We have the tools to prepare ourselves for these events, if we’re bold enough to use them.”

Elisabeth Serlemitos
Director of the Center for Communication Programs’ Breakthrough ACTION project and leader of CCP’s work in West Africa during and after the 2014 Ebola outbreak

“In the immediate aftermath of a disaster, good, accurate com- munication is one of the most effective tools we have to help. Many information needs are urgent: where to go for food, shelter and medical care. Using trusted sources of information and counteracting rumors and misinformation are also key.”

Common Face of Health Care

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health care deaf-friendly through advoc- acy, policy changes and the creation of new medical devices designed to improve patient-provider communication. A $12,000 grant from the Johns Hopkins Office of Diversity and Inclusion in 2014 allowed DeCarlo to host the first deaf-focused cultural competency workshop for Johns Hopkins medical students. DeCarlo, who depends on a combi- nation of sign language and access to lip reading/visual expressions, pulled from his personal experiences of growing up profoundly deaf, such as having to reschedule appointments after missing the audio cue of a nurse calling his name while in a waiting room.

With DeCarlo’s initiative, Delano focuses on advocacy to improve medi- cal care for the deaf and hard of hearing community, using platforms such as TED Global to share the importance of nonverbal communication and sign language exposure to an audience of nearly 1,000.

“We’re going to introduce the world to the idea that if there is an opportunity to not only improve the hospital experience for deaf and hard of hearing patients, but to also improve communication and reduce the potential for medical errors, why not do it?”

Read a short recap of Kyle’s presenta- tion at TED Global.

—Katherine Sachs

Noteworthy Information and Events

Next Johns Hopkins Medicine Town Meeting: Meeting to Focus on Telemedicine, Precision Medicine

If you could FaceTime your doctor instead of making an office appoint- ment, would you? How important is it to you for physicians to consider your genetic makeup, family history and other unique factors to create a tailored treatment plan for you? Find out what your colleagues’ thoughts on these questions and more at the next Johns Hopkins Medicine Town Meeting on Tuesday, Sept. 12, from noon to 1 p.m. in The Johns Hopkins Hospital’s Hunt Hall. Deborah Baker, senior vice president for nursing at Johns Hopkins Medicine, and Tom Lewis, vice president of government and community affairs for Johns Hopkins Medicine, will lead you on a 1-mile walking tour around the East Baltimore community. The walk will start at 88 N. Broadway. Space is limited, so please register today at: booknow-wcs.appointment-plus. com/o/d30yzgv or email healthy-@hopkinsjhm.edu with any questions.

Unified Steps Community Walk on Sept. 13

Grab your walking shoes and take steps for a healthier you at the next Unified Steps community walk on Wednesday, Sept. 13, from 11:30 a.m. to 12:30 p.m. Dalal Haldeman, senior vice president of marketing and communications for Johns Hopkins Medicine, and Tom Lewis, vice president of government and community affairs for Johns Hopkins University and Johns Hopkins Medicine, will lead you on a 1-mile walking tour around the East Baltimore community. The walk will start at 88 N. Broadway. Space is limited, so please register today at: booknow-wcs.appointment-plus. com/o/d30yzgv or email healthy-@hopkinsjhm.edu with any questions.

Donation Dates for the Fall Best Dressed Sale

The Fall Best Dressed Sale is just around the corner, when shoppers galore will come seeking new and gently used clothing, shoes, jewelry, accessories and more. If you have items to donate, drop them off at the Evergreen Museum & Library Carriage House between 8:30 a.m. and 5 p.m. on Sept. 18 and 19. The Best Dressed Sale will take place at the carriage house from Nov. 3 through 5. All proceeds from the annual sale benefit patient care at The Johns Hopkins Hospital.