



Preventing Healthcare Associated Pneumonia(HAP)Initiative

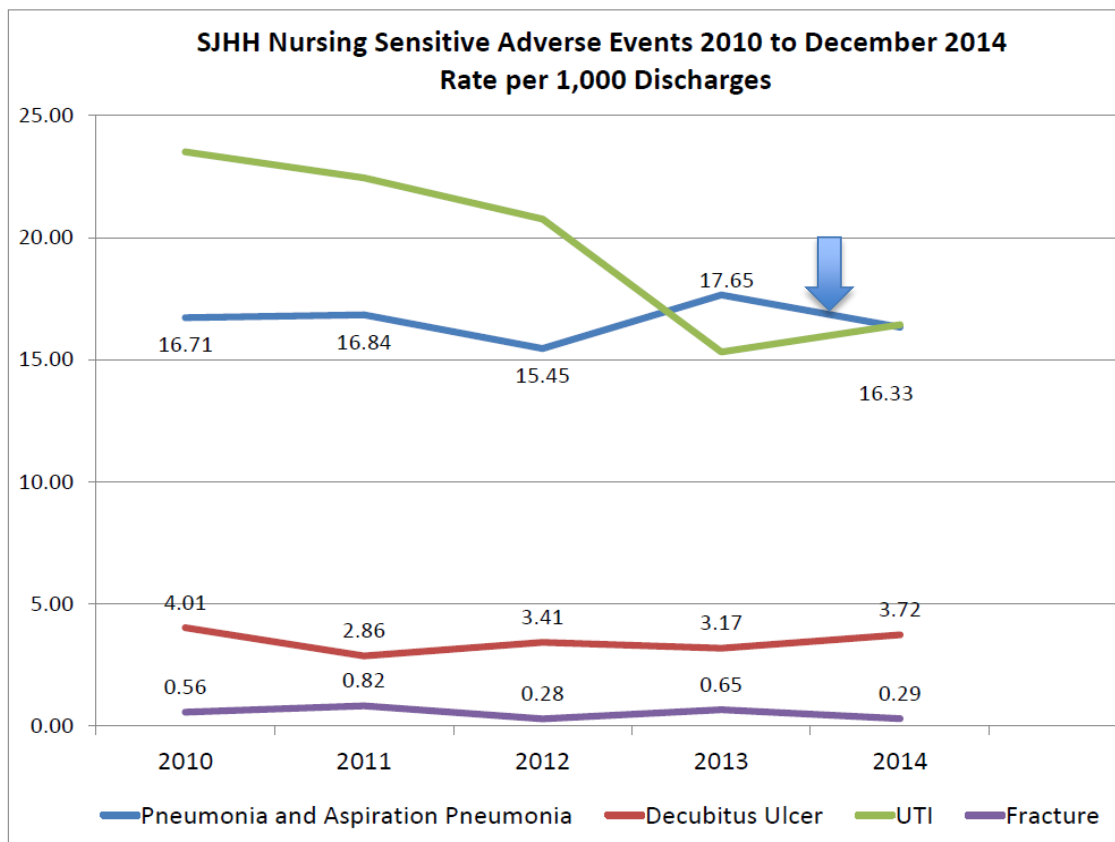
A.Bialachowski SJHH IPAC Manager
April 7, 2016

Issue

The SJHH nurse sensitive data from the Canadian Hospital Reporting Project (CHRP) was elevated (CHRP) in several categories

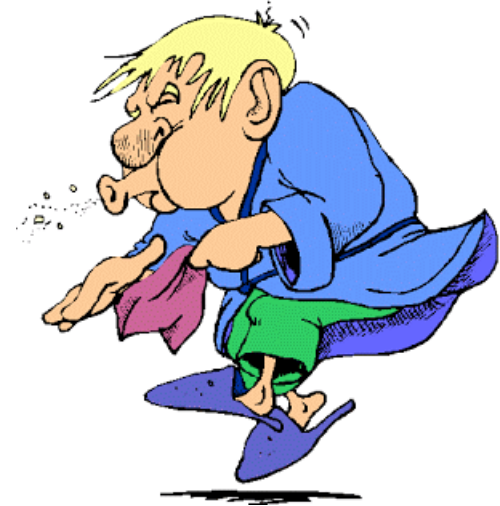
Catheter Associated Urinary Tract Infections (CAUTI)

Healthcare Associated Pneumonias (HAP)



Project

- Interdisciplinary team formed
- Literature review
- Scope defined- Oral Care
- Select Products and Ensure Ease of Access



Project

- Engage & Educate Nursing staff
- Execute- Intervention Toolkit developed
- Evaluate- Regularly assess performance measures and unintended consequences

Why oral care to prevent HAP?

Germs in the Mouth

- Dental plaques provides a microhabitat
- Replicates 5x in 24hrs

Aspirated

- 45% of healthy adults micro-aspirate in their sleep

Weak Host

- poor cough
- Immunocompromised
- Multiple co-morbidities

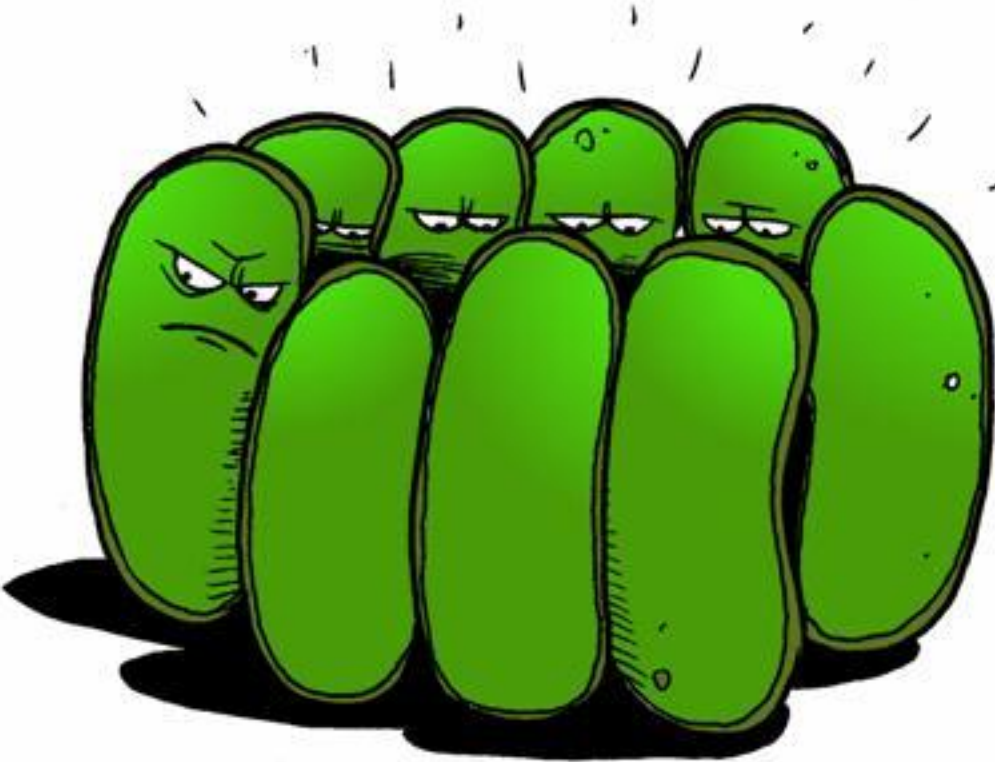
Within 48 hours of admission to hospital the oropharyngeal flora of critically ill patients changes from

→ the usual gram + streptococci and dental pathogens to

→ gram negative organisms including Pathogens that cause VAP and Aspiration Pneumonia

American Journal of Critical Care (2004)

IS IT BECAUSE I'M
GRAM NEGATIVE?



Penelope
2006

Germs in the mouth

- Comprehensive Oral care

Aspirated

- Swallow screens
- Tube feeding protocols
- Head of bed elevated

Weak Host

- Mobilize
- Adequate nutrition

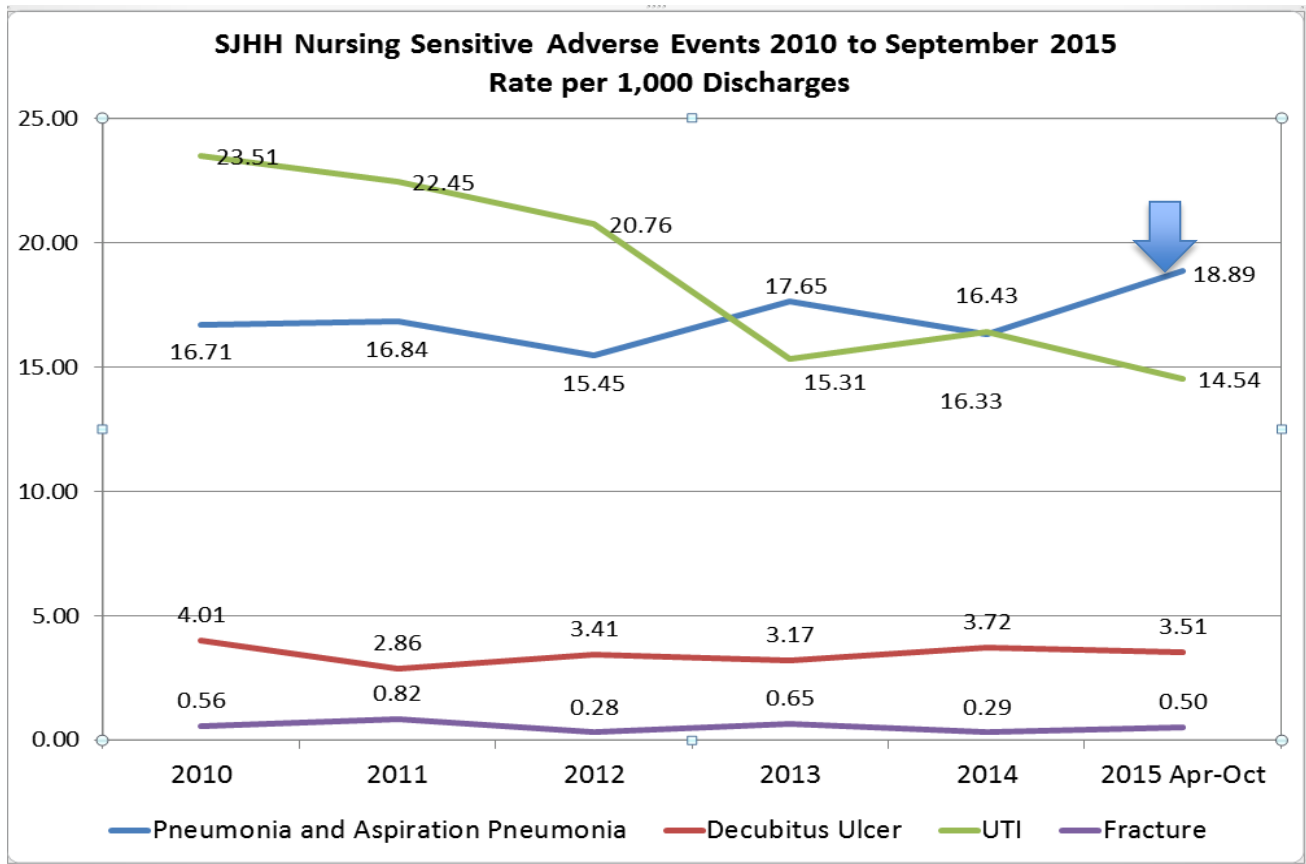


		MANUAL DEPARTMENTAL	Section NURSING	Pages 6	Number 033-0
Subject: Oral Care Protocol for Adult Patients who are at risk of aspiration				Date June 3, 2014	
Supersedes: NEW		Cross Reference: 082-MED		Issuing Authority: NAC	
<input checked="" type="checkbox"/> Charlton Campus		<input checked="" type="checkbox"/> West 5th Campus		<input type="checkbox"/> King Campus	

Table of Contents

- 1.0 Purpose & Goals Description
- 2.0 Definitions

Oral Care Protocol Audit Tool					
UNIT:	DATE:		AUDITORS:		
	Patient ID: _____	Patient ID: _____	Patient ID: _____	Patient ID: _____	Patient ID: _____
Interview Nurse/ HCP Is the nurse/HCP aware if patient is at risk for aspiration?	Y <input type="checkbox"/> N <input type="checkbox"/>	Y <input type="checkbox"/> N <input type="checkbox"/>	Y <input type="checkbox"/> N <input type="checkbox"/>	Y <input type="checkbox"/> N <input type="checkbox"/>	Y <input type="checkbox"/> N <input type="checkbox"/>
Documentation Is the patient risk for aspiration documented in the Kardex (Patient Plan of Care)?	Y <input type="checkbox"/> N <input type="checkbox"/>	Y <input type="checkbox"/> N <input type="checkbox"/>	Y <input type="checkbox"/> N <input type="checkbox"/>	Y <input type="checkbox"/> N <input type="checkbox"/>	Y <input type="checkbox"/> N <input type="checkbox"/>
Bedside Observation Is the Equipment available?	PLAK VAC <input type="checkbox"/> SAGE <input type="checkbox"/> Not available <input type="checkbox"/>	PLAK VAC <input type="checkbox"/> SAGE <input type="checkbox"/> Not available <input type="checkbox"/>	PLAK VAC <input type="checkbox"/> SAGE <input type="checkbox"/> Not available <input type="checkbox"/>	PLAK VAC <input type="checkbox"/> SAGE <input type="checkbox"/> Not available <input type="checkbox"/>	PLAK VAC <input type="checkbox"/> SAGE <input type="checkbox"/> Not available <input type="checkbox"/>
Patient Interview Was the oral care completed?	Self <input type="checkbox"/> HCP <input type="checkbox"/> Not done <input type="checkbox"/>	Self <input type="checkbox"/> HCP <input type="checkbox"/> Not done <input type="checkbox"/>	Self <input type="checkbox"/> HCP <input type="checkbox"/> Not done <input type="checkbox"/>	Self <input type="checkbox"/> HCP <input type="checkbox"/> Not done <input type="checkbox"/>	Self <input type="checkbox"/> HCP <input type="checkbox"/> Not done <input type="checkbox"/>
Practice Is the oral care done as per protocol? Described as per protocol Documented as per protocol	Y <input type="checkbox"/> N <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/>	Y <input type="checkbox"/> N <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/>	Y <input type="checkbox"/> N <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/>	Y <input type="checkbox"/> N <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/>	Y <input type="checkbox"/> N <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/>
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- Stores report shows on-going demand for brushes
- Some issues with defining HAP(Coder and physicians)
- Documentation of oral care inconsistent
- Patients dependent for care are at highest risk

Further work is required

- Ensure that the protocols are being followed before expanding and adding new dimensions
- Need to engage other groups outside of the working group (coders, physicians etc.)
- Data needs to be widely available to all clinical areas
- Regular evaluation will always be required

Thank-you

Co-chairs for the Project

Dr Sandra Ireland

Stephen Fraser

& the

Healthcare Associated Pneumonia working Group

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