

Pacific Hospital Long Beach – Reducing Hospital-Acquired Infections Across the Board

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Over the last few years, Pacific Hospital of Long Beach (PHLB) has enjoyed an astounding record in its fight against several deadly hospital-acquired infections and superbugs. Pacific Hospital Long Beach has completely eliminated cases of Catheter Associated Urinary Tract Infection (CAUTI), Ventilator Associated Pneumonia (VAP), and *Clostridium difficile* (C diff). Additionally, PHLB has the lowest incidence of the devastating Methicillin-resistant *Staphylococ-*

cus aureus (MRSA) in California. We have drastically reduced Surgical Site Infections and central line-associated bloodstream infections.

The excellent results can be attributed to the hospital's Lean practices. Lean management principles have been used in manufacturing companies for decades, originating in Japan and particularly used by Toyota. Lean has been successfully applied to improve the quality of health care in the United States. Strict quality control, innovative disinfectant measures, basic environmental and patient cleanliness methods, and a zero tolerance policy to hospital-acquired infections also played key roles. The most important factor, however, has been our staff's hard work, professionalism, and dedication to patient safety.

To underline the importance of this effort, morbidity related to hospital-acquired infections exceeds deaths caused by AIDS, breast cancer, and prostate cancer combined. According to a 2009 report by the Centers for Disease Control, medical costs

to U.S. hospitals dealing with hospital-acquired infections could reach up to \$33.8 billion¹. Though the financial impact of these hospital related infections is enormous, the human cost of this preventable loss of life is immeasurable.

Our commitment to reduce patient harm across the board is led by Dr. Alfonso Torres-Cook, Director of Infection Control, Dr. Luke Watson, Chief Medical Officer, and Karen Scott, Vice president of Quality Management. According to Dr. Torres-Cook, you are 95% less likely to catch dangerous antibiotic resistant bacteria like MRSA at PHLB. In the United States, MRSA was associated with 8% of hospital-acquired infections as reported to the Centers for Disease Control and Prevention National Healthcare Safety Network from January 2006 to October 2007².

The staff has perfected a system that combines general precautions and specific algorithms for each infection. Surprisingly, many of these techniques are quite simple. For

example, the hospital's air ventilation system employs germ-killing ultraviolet light that provides 24-7 protection against infection-causing bacteria.

This past May, the California Hospital Association's California Hospital Engagement Network congratulated PHLB for maintaining a rate of zero CAUTI's from January 2011 to February 2013. CAUTI's occur when organisms enter a patient's Foley Catheter. CAUTI is associated with increased morbidity and mortality and is the second most common cause of secondary bloodstream infections. Over 600,000 patients each year develop urinary tract infections, and 80 percent of these infections are catheter-related. PHLB's infection control team implemented a program to reduce CAUTI's. The program's five main action points include a Catheter assessment Algorithm, training nursing staff in proper catheter use and maintenance, administering 250 or 500 mgs of Vitamin C to prevent encrustation and other problems, and intermittent catheter use.

At the CHPSO's (California Healthcare Patient Safety Organization) Second Annual Conference this past April, PHLB's program to prevent VAP was praised by the conference participants. VAP occurs in seriously ill patients who are unable to communicate; it's up to the staff to be proactive about their care.

PHLB put together Lean guidelines to prevent VAP back in 2006. The guidelines include basics such as hand washing and patient positioning, oral decontamination, draining subglottic secretions, and tracking endotracheal cuff pressure. These procedures, designed to eliminate VAP, proved successful in 2012, with zero infection cases.

In early 2013, PHLB received an award from Southern California Patient Safety First (SCPSF) for reducing sepsis and other hospital-caused infections from 2010 to 2012. PHLB's infection control programs curbed surgical site infections by 90% and reduced central line bloodstream infections.

In September 2012, the California Hospital Association recently lauded PHLB's quality measures to eliminate causes of C diff and preventing outbreaks through a series of regimented care. PHLB staff adheres to strict hygiene guidelines. Medical personnel wash their hands after treating every patient and always wear sterile gowns. Any patient diagnosed with or exhibiting signs of C diff such as watery diarrhea, is isolated and decontaminated. This includes under the fingernails, where C-diff bacteria can hide. Hospital rooms are cleaned as vigorously as the medical equipment, with special attention paid to TV remotes, phones, bedrails and other frequently used items. Mi-

crofiber technology has been used to prevent cross-contamination. Yogurt and other infection-fighting probiotic foods which are proven to curb infections, are added to the patients' diets. Antibiotics known to increase infections are avoided or discontinued. This comprehensive care program resulted in zero cases of C. diff at PHLB in 2010, 2011, and 2012.

We believe in improving quality and safety through our Lean philosophy. Coupled with a relentless and consistent approach to cleanliness, Pacific Hospital of Long Beach will continue to excel in this important life saving effort.

Francisco Floressantos is the Director of Marketing at Pacific Hospital of Long Beach and has been working there for the past ten years.

Francisco is responsible for the hospital's websites and social media assets, in addition to the overall advertising activity and multimedia production. As a graphic designer, Francisco delivers the hospital's image and message across various channels of communication. He is heavily involved in the internal and external communications strategies at Pacific Hospital of Long Beach.

¹R. Douglas Scott II, http://www.cdc.gov/hai/pdfs/hai/scott_costpaper.pdf

²Hidron AI, Edwards JR, Patel J, et al. (November 2008). "NHSN annual update: antimicrobial-resistant

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