**BACKGROUND**

Adherence to care bundles is an important strategy to eliminate Hospital Acquired Conditions (HACs). Our Cardiac Intensive Care Unit (CICU) HAC rates lacked consistent performance and we had limited data on bundle compliance. Utilizing a web-based data collection tool, we sought to initiate a paradigm shift to focus assessments and audits on comprehensive patient care rather than auditing individual HACs in order to provide real-time feedback and increase staff knowledge of bundle elements.

**RESULTS**

After implementation, quarterly audits increased from an average of 25 to >150. The increase in audits temporally correlated with a reduction in multiple HACs. Compared to historical data (FY13 to FY15):

- Cardiovascular-Surgical Site Infections (CV-SSIs) decreased from 4.0 to 0.4 per 100 procedures, with a record of 375 days without an event
- Central Line Associated Bloodstream Infections (CLABSI) decreased from 1.82 to 0.31 per 1000 central line days (2 events in a year)

**CURRENT PROJECTS AND GOALS**

- Create dashboard generated from EHR to display real-time bundle compliance status
- Increase audit numbers from 50/month to >1200/month thru automatic data collection from EHR
- Update bundle elements as needed to align with SPS
- Continue to provide monthly feedback to bedside nurses

**CONCLUSION**

Continual assessment of patient-centered HAC bundle compliance is associated with a reduction in CICU HAC rates. We speculate this association is due to increased staff knowledge and real-time feedback to ensure compliance with bundle elements.

**REFERENCES**