**Purpose Paper**

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 BSN 485 Capstone Leadership

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 4/23/2021

**Purpose**

The purpose of this capstone project is to find out how hospitals can decrease the

incidences of hospital acquired infections. HAIs are hospital acquired infections that patients get

after their admission. “These infections include catheter-associated urinary tract infections,

central line-associated bloodstream infections, surgical site infections, ventilator-

associated pneumonia, hospital-acquired pneumonia, and Clostridium difficile

infections (Monegro et al, 2020).

 **Statement of Problem**

Decreasing the incidents of HAI is an educational opportunity for the hospital and

its staff. If a new admit is screened upon admission and is negative, the hospital needs

to ensure that patient does not contract an infection during their stay. In order to

prevent the occurrences, they need to first identify how transmission occurs, consult

with the MD’s if lines are medically necessary, if not they need to be removed. They

also need to ensure proper central line care and dressing changes are done using

sterile technique, lines are flushed as ordered, vent patients are getting proper mouth

care with chlorhexidine. Most hospitals have protocols in place ensuring that all

patients with lines be given a CHG bath. There can be dire consequences for the

elderly, and other patients with comorbidities such as diabetes. Diabetic wounds are

harder to heal, the elderly are frail and ABT’s may have more adverse effects that can

affect their overall health.

**Significance of Project**

These types of nosocomial infections are either not present during

admission or they are incubating, therefore undetected. That is why it is important

to screen new admits, so it can be determined if a patient is coming in with an

infection or not, reason being, some infections are reportable in order to

participate in the Medicare program. According to the Centers for Disease Control

and Prevention (CDC 2019), most HAIs are reported through the National

Healthcare Safety Network (NHSN). The timeframe is 48 hours after hospital

admission, 3 days after discharge and 30 days following an operation. The goal of

my capstone is to ensure that the hospital has a low HAI incidence, because too

many reports can affect their Medicare funding.

If it is a true HAI, the state requires the hospital to treat that out of their

own pocket because Medicare won’t pay of it. “These infections lead to tens of

thousands of deaths and cost the U.S. health care system billions of dollars each

year”, (Health.gov, 2020). As mentioned earlier, HAI’s can be central line in nature (CLASI)-

bloodstream infection, foley -UTI, VAP- ventilator associated pneumonia

(especially in the ICU), and infected wounds. The sooner lines are discontinued

the better chance of lowering the infection rate. Sometimes lines are medically

necessary, for instance, if a patient has a foley catheter due to a neurogenic

bladder, then that line has to stay in and proper foley care must be ensured. On the

other hand, if the foley is in because of convenience (not wanting to get up to use

the restroom), then that line needs to be discontinued.

This project will accomplish lessening the occurrences for HAI’s.

The plan is to make sure every new admit gets screened, if positive they need to be placed on

designated isolation (if applicable), and if they have a roommate to make sure they are cohort

appropriate (same bug). Appropriate signage needs to be placed at the door of these patients and

proper PPE to ensure staff easily have the gear available. Facility will provide an in-service on

ways staff can help lower the transmission of infections such as through hand hygiene, CHG

baths, chlorhexidine mouth care for ventilated patients, proper foley cand central line care. Most

central lines are flushed not only before and after use, but also routinely- either Q8 or Q12.

Depending on what is going through the line such as TPN, vanco, or potassium, staff can ask

MD if they can switch from a central line to a peripheral IV.

 Another source of infection transmission are female staff with acrylic nails

providing direct patientcare. According to Saiman, L, et al (2002), “it has been increasingly

evident that artificial nails worn by health care workers can contribute to health care associated

infections. Compared with natural nails, artificial nails have a higher rate of colonization with

gram-negative flora and yeast “.

 **Conclusion**

In conclusion, while this project will benefit the hospital by continuing to

get Medicare funding, and continue to have a good rapport in the community, it will also benefit

the staff by providing opportunity to break the cycle of transmission and increase HCAP scores.

Staff will feel more confident in their skills as they provide direct patient care, and be able to

explain to the patient why certain actions/interventions are being taken. Any patient will be glad

that staff is trying to prevent the start or spread of an infection. “HAI are a threat to patient

safety”, (CDC, 2015).

**References**

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infections.

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APA formatting: college level writing, in-text citations, and references required.
Please upload both assignments as a word document
1) Locate the APA resources in the Library to identify the APA challenges on the assignment.
•Examples: Writing Style, Citations, References, Formatting Paper, Formatting
Reference Page
a. Explain (2-3 sentences) what you learned during your research and how you will
apply your new APA knowledge in the future.
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a. Make corrections to assignment per the comments on the assignment
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1a. My major APA challenge on this assignment was formatting, and this is formatting the entire paper as well as the reference pages. For the body of the essay, indentations were too far, fonts weren’t the same throughout the paper, I missed applying page numbers and margins were not within the 1” parameter. These are things that I will pay more attention to on my next paper.

2a. Attached.