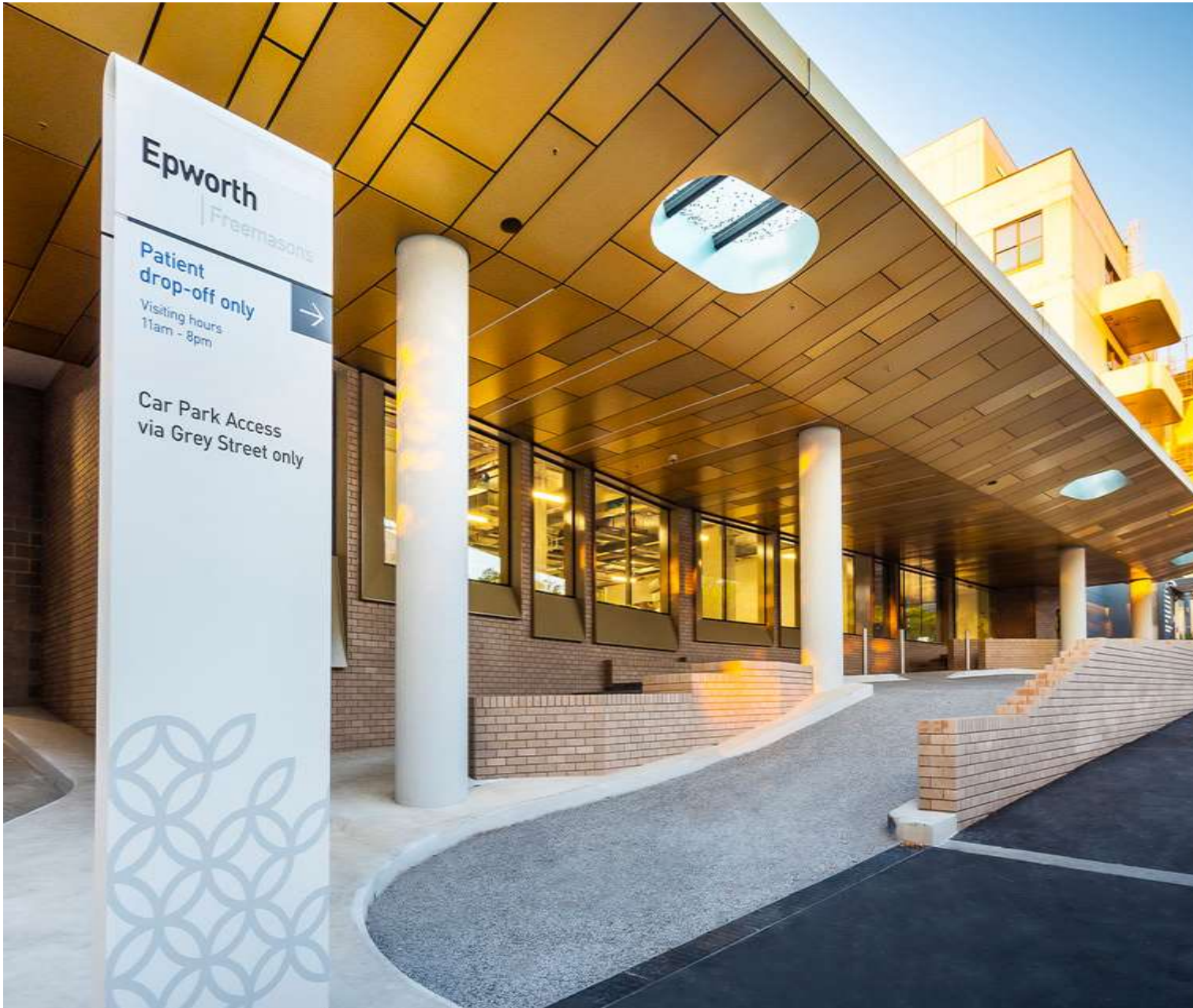


# **Reducing the Incidence of Central Line-Associated Bloodstream Infections (CLABSIs) in a Haematology/Oncology Ward.**

## **A Quality Improvement Project**

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## Background & Rationale

- Infection Prevention & Control (IPAC) Active Surveillance
- The identification and reporting of CLABSI incidence on Haematology/Oncology unit.
- Formation of a multidisciplinary team
- Aims and objectives

# Implementation

1. Multidisciplinary team
2. Data Collection and Analysis
3. Identification of Gaps



# Intervention Bundle Recommendations

## Gap

## Recommendation

Neutral Displacement Valve

Positive Displacement Valve

Practical competency assessments for Central Venous Access Device (CVAD) maintenance infrequently undertaken

Practical competency assessments for CVAD maintenance to be undertaken for all staff

Insufficient number of trolleys for aseptic procedures

Increase number of trolleys available for CVAD maintenance

Practice not aligned with Protocol

Education, with feedback on CVAD maintenance and compliance with Protocol

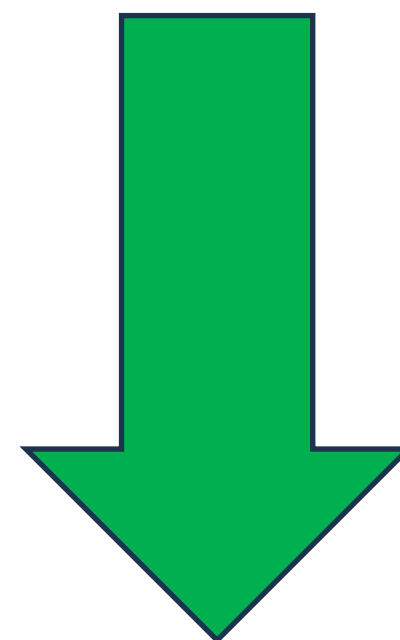
No Central Line days collection

Commence collection of Central Line days

# Results

From the implementation of the Intervention bundle on 11th November 2024 until June 2025 there were no CLABSIs reported

Pre-Intervention  
0.9



Post-Intervention  
0.0

From June 2021 to October 2024, the average monthly CLABSI rate was 0.9 per 1,000 Overnight Bed Days

Following intervention implementation, the average CLABSI rate has reduced to 0.0 per 1,000 Overnight Bed Days

***Working together as a multidisciplinary team allowed us to address a critical issue and achieve safer outcomes for our patients***

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