# Hospital Commitment Letter

**Background and Objectives**

Hospital Name commits to participate with the North Carolina Healthcare Association and the Health Research & Educational Trust (HRET) in AHRQ Safety Program for Intensive Care Units: Preventing CLABSI and CAUTI. This program will work with intensive care units (ICUs) to eliminate or reduce levels of central line-associated blood stream infections (CLABSI) and/or catheter-associated urinary tract infections (CAUTI) in the United States, the District of Columbia and Puerto Rico. The program is being conducted in collaboration with the Centers for Disease Control and Prevention (CDC) and Centers for Medicare & Medicaid Services (CMS).

This effort will use resources that have been developed as part of earlier national efforts to apply the Comprehensive Unit-based Safety Program (CUSP) to eliminate CLABSI and CAUTI and will gather and apply lessons learned regarding effective implementation of quality improvement efforts in the ICU setting.

**Commitment**

As an active and engaged participant in this initiative, our organization agrees to:

* ICU Assessment
  + Submit a finished ICU Assessment to HRET by **August 14, 2018**. The assessment includes questions about the present and practice of selected care process and other key aspects and should be completed by the unit’s team leader or other individuals with deep understanding of the unit’s HAI policies and procedures.
* Unit Action Plan
  + Develop a unit-specific Action Plan based on opportunities identified in the ICU Assessment and other data sources. ICU teams, along with coaching support from state leads, will determine which materials and tools to utilize over the course of the project to help increase progress towards achieving the goals.
* Educational Curriculum
  + Participate in on-demand education provided to participating ICUs via an eLearning platform. ICU teams will follow a curriculum and have the flexibility of accessing content online when their schedule allows.
* Virtual Learning Groups (VLGs)
  + Monthly coaching web meetings facilitated by HRET and state hospital associations, and attended by participating ICUs. VLGs are an important opportunity for ICU teams to ask questions of the subject matter experts, review progress and engage in peer learning by discussing successes and challenge.
* Progress Measurement
  + ICUs will receive ongoing data support will be available throughout the program. The project will work to prevent duplication of effort around data collection and will work with hospitals to confer CDC NHSN data rights. All data will be kept confidential, and ICUs will be able to benchmark their performance against other program participants in aggregate. Metrics related to outcomes (rates), process measures and culture will be collected. Examples include:
    - Monthly CLABSI and/or CAUTI rates through conferred CDC NHSN data rights
    - Monthly device utilization rates (indwelling urinary catheter and central line utilization)

As part of this initiative, our organization will receive complimentary:

* Support from the state hospital association and the national project team.
* Access to the Comprehensive Data System (CDS), the HRET data warehouse and project extranet sites.
* Access to resources, webinars and educational and network opportunities to support improvement work related to CLABSI and CAUTI reduction.
* Access to virtual and in-person educational offerings and opportunities for networking and peer-sharing.

SHA Primary Contact:

Name: Claudia Paren Title: Patient Safety & Culture Specialist

Phone: 919-677-4134 Email: cparen@ncha.org

By signing below, I hereby commit my hospital to achieving the aims of the AHRQ Safety Program for Intensive Care Units: Preventing CLABSI and CAUTI.

Executive Signature (e.g., CEO, CMO): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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