

Central Line-Associated Bloodstream Infection (CLABSI)

This domain performs a comprehensive assessment of CLABSI prevention practices performed at your facility as it currently functions.

Leadership Support

1 - Does your facility care for patients (inpatient or outpatient) with central lines?

- Yes
- No

2a - Does your facility perform Central Line-Associated Bloodstream Infection (CLABSI) surveillance?

- Yes
- No

2b - Does your facility report to the National Healthcare Safety Network (NHSN) or other hospital quality data organizations?

- Yes
- No

3 - Is CLABSI data reported to facility leadership?

- Yes
- No
- Unsure

4a - Does facility leadership have goals related to CLABSI improvement efforts?

- Yes
- No
- Unsure

4b - Is the IPC program involved in identifying CLABSI improvement efforts?

- Yes
- No
- Unsure

5 - Are facility CLABSI improvement efforts communicated to frontline staff?

- Yes
- No
- Unsure

6 - Are unit-level leaders engaged in CLABSI Prevention?

- Yes
- No
- Unsure

7a - Does the facility have an individual or a group monitoring CLABSI performance?

- Yes
- No
- Unsure

7b - Does the individual or team monitoring CLABSI report findings to the Infection Control Committee (ICC) or Quality Improvement Committee (QAPI)?

- Yes
- No
- Unsure

8 - Do units perform deep dives when CLABSIs are identified on the unit?

- Always
- Often
- Rarely
- Never

9a - Does your facility utilize a bundle or checklist during central line insertion?

- Yes
- No
- Unsure

9b - What is included in the central line insertion bundle or checklist?

- Signage posted to limit personnel in the room during line placement
- Procedure time out
- Hand hygiene
- Patient positioning
- Use of maximal sterile barrier precautions
- Standardized insertion trays
- Chlorhexidine skin antisepsis unless contraindicated
- Optimal catheter type selected
- Sterile dressing
- Safe disposal of sharps
- Indication for central line
- Avoidance of femoral lines if able
- Presence of trained observer
- None of the above
- Other

9c - Is insertion bundle or checklist adherence documented in the health record?

- Yes
- No
- Unsure

10a - Does the hospital utilize a central-line device maintenance bundle or checklist?

- Yes
- No
- Unsure

10b - What is included in the maintenance practices of a central line? (e.g., bundle, checklist, charting requirements, etc.)

- Daily review of line necessity
- Minimum of Q shift dressing assessment
- Minimum of Q shift site assessment
- Administration delivery system changes
- Needleless component changes
- Minimum weekly dressing changes
- Daily CHG bathing
- Catheter hub disinfection prior to access
- None of the above

Policy & Procedure

12a - Does the facility have a policy and standard operating procedures related to CLABSI Prevention?

- Yes
- No
- Unsure

12b - What is included in the CLABSI prevention policy and procedures?

- Indications for appropriate central line use
- Algorithms or lists for preferred central line placement sites
- Central line insertion protocol
- Central line maintenance protocol
- Central line removal protocol
- Clinical contraindications for specific central lines
- Anatomical contraindications for central line placement
- Administrative set replacement protocols
- Needleless component change protocols
- None
- Other

Education & Training

13a - Does the facility have a competency-based training program for CLABSI prevention activities?

- Yes
- No
- Unsure

13b - CLABSI prevention competency-based training includes:

- Indications for central line use
- Algorithms for central line device choice
- Central line insertion protocol
- Ultrasound guidance for insertion
- Central line maintenance protocol
- Central line removal protocol
- Clinical contraindications for central lines
- Anatomical contraindications for line placement
- Maximal barrier precautions

- Skin preparation
- Hand hygiene
- Catheter site dressing protocol
- Patient bathing protocol
- Administration set replacement
- Central line assessment
- Other

13c - Who receives CLABSI prevention competency-based training as it relates to their job role?

- Clinical healthcare personnel
- Ancillary Services
- Non-clinical healthcare personnel
- Clinical Support
- Students & Trainees
- Volunteers
- None
- Other

13d - What frequency is CLABSI prevention competency-based training provided?

- Upon hire
- Annually
- When new products and protocols are introduced
- As remediation for compliance failures
- Targeted performance improvement
- None

13e - Are healthcare personnel required to demonstrate competency of the task/skill following each training?

- Yes
- No
- Unsure

13f - Does the facility maintain documentation for the completion of CLABSI prevention competency for healthcare personnel?

- Yes
- No
- Unsure

Audit & Feedback

14a - Does the facility audit adherence to CLABSI prevention strategies?

- Yes
- No
- Unsure

14b - How are CLABSI prevention audits performed?

- Secret shopper observation
- Direct observation
- Chart/ record review

Other

14c - What do the CLABSI prevention audits monitor?

- Central line insertion bundle adherence
- Aseptic technique
- Central line dressing changes
- Central line removal
- Daily assessment for continued need for central line
- Use of maximal barrier precautions for central line insertion
- Use of skin prep prior to insertion
- Sterile gauze or sterile transparent, semi-permeable dressing use
- Avoidance of high-risk sites
- Hand hygiene
- Central lines changes aseptically
- Access ports scrubbed with an appropriate antiseptic prior to accessing
- Daily CHG bathing
- Catheter is accessed only with sterile devices
- Central line dressing adhesive is intact over the catheter insertion site
- Central line drainage is contained within the dressing
- Dressing dated and timed in accordance with hospital policy
- Catheter is secured to reduce movement and tension
- Tubing administration sets are labeled with the medication start time and date
- Inactive ports are capped in accordance with facility policy
- Central line specimen collection
- None of the above
- Other

14d - Do auditor(s) provide immediate real-time feedback to healthcare personnel in the moment?

- Yes
- No
- Unsure

15 - Does the facility utilize CLABSI data to impact performance improvement?

- Yes
- No
- Unsure

16 - Which CLABSI surveillance data do frontline healthcare personnel receive?

- Facility-wide CLABSI data (SIR, SUR, etc.)
- Unit-level CLABSI data
- Antibiotic usage data
- Device-specific data
- Other

17 - Which data are provided to the Infection Control Committee (ICC) or Quality Improvement Committee (QAPI)?

- Audit data
- CLABSI infection count or SIR
- Central line utilization ratios (SUR)

- Phlebitis occurrences
- Antimicrobial utilization
- None
- Other

Dedicated Central Line Teams: In-house vs Vendor

18 - Does the facility utilize a contracted service for:

- Central line insertion
- Central line maintenance
- Central line removal
- None - all is performed in-house

19 - Does the IPC program have information regarding the training and competency of the contracted service for central line insertion and care?

- Yes
- No
- Unsure

20a - Does the vendor adhere to a standardized insertion checklist?

- Yes
- No
- Unsure

20b - Is the insertion checklist based on national standards and guidelines?

- Yes
- No
- Unsure

21 - Is the contracted service notified of identified CLABSIs at the facility?

- Yes
- No
- Unsure

22 - Do trained facility staff monitor the central line insertion performed by the contracted service to ensure the insertion checklist is followed?

- Yes
- No
- Unsure

23a - Does the contracted service perform dressing changes?

- Yes
- No
- Unsure

23b - Are competent staff available for PRN dressing changes if the contracted services are not available, such as during overnight hours?

- Yes
- No

Unsure

24 - Does the contracted service maintain documentation of its procedures?

- Yes
- No
- Unsure

25 - Does the facility utilize ultrasound for central line placement when applicable?

- Yes
- No
- Unsure

General Practice

26 - Are patients with a central venous catheter assessed at least daily for continued medical need for the CVC?

- Yes
- No
- Unsure

27 - Do ordering providers document an indication for the central line?

- Always
- Often
- Rarely
- Never

28 - Are central lines that are no longer needed promptly removed?

- Always
- Often
- Rarely
- Never

29a - Do patients and family receive education regarding central venous catheters?

- Yes
- No
- Unsure

29b - Are patient education materials approved by the CLABSI prevention work group or IPC program?

- Yes
- No
- Unsure

30 - Are healthcare personnel empowered to stop non-emergent central line insertion if proper procedures are not followed?

- Yes
- No
- Unsure

31 - Are supplies or kits for proper central line insertion available in all locations where central lines are inserted?

- Yes
- No
- Unsure

32 - Does your facility use an antimicrobial-embedded central line dressing?

- Yes
- No
- Unsure

33 - Is daily CHG bathing a part of the bathing protocol for patients with a central line?

- Always
- Often
- Rarely
- Never

34 - Is the IPC program involved in product selection for CLABSI reduction efforts?

- Yes
- No
- Unsure

35 - Does the facility use any additional approaches for BSI prevention? If so, what approaches are used?

- Silver impregnated lines
- Antimicrobial-coated lines
- Antimicrobial impregnated dressings
- CHG bathing kits/ wipes
- Other
- None of the above

Answer Key

Leadership Support

1 - Does your facility care for patients (inpatient or outpatient) with central lines? **(Not Scored)**

Yes

No

2a - Does your facility perform Central Line-Associated Bloodstream Infection (CLABSI) surveillance?

(Not Scored)

Yes

No

2b - Does your facility report to the National Healthcare Safety Network (NHSN) or other hospital quality data organizations? **(Not Scored)**

Yes

No

3 - Is CLABSI data reported to facility leadership?

Yes - Preferred

No

Unsure

4a - Does facility leadership have goals related to CLABSI improvement efforts?

Yes - Preferred

No

Unsure

4b - Is the IPC program involved in identifying CLABSI improvement efforts?

Yes - Preferred

No

Unsure

5 - Are facility CLABSI improvement efforts communicated to frontline staff?

Yes - Preferred

No

Unsure

6 - Are unit-level leaders engaged in CLABSI Prevention?

Yes - Preferred

No

Unsure

7a - Does the facility have an individual or a group monitoring CLABSI performance?

Yes - Preferred

No

Unsure

7b - Does the individual or team monitoring CLABSI report findings to the Infection Control Committee (ICC) or Quality Improvement Committee (QAPI)?

Yes - Preferred

No

Unsure

8 - Do units perform deep dives when CLABSIs are identified on the unit?

Always - Preferred

Often - Preferred

Rarely

Never

9a - Does your facility utilize a bundle or checklist during central line insertion?

Yes - Preferred

No

Unsure

9b - What is included in the central line insertion bundle or checklist? **(Select all preferred options)**

Signage posted to limit personnel in the room during line placement - Preferred

Procedure time out - Preferred

Hand hygiene - Preferred

Patient positioning - Preferred

Use of maximal sterile barrier precautions - Preferred

Standardized insertion trays - Preferred

Chlorhexidine skin antisepsis unless contraindicated - Preferred

Optimal catheter type selected - Preferred

Sterile dressing - Preferred

Safe disposal of sharps - Preferred

Indication for central line - Preferred

Avoidance of femoral lines if able - Preferred

Presence of trained observer - Preferred

None of the above

Other

9c - Is insertion bundle or checklist adherence documented in the health record?

Yes - Preferred

No

Unsure

10a - Does the hospital utilize a central-line device maintenance bundle or checklist?

Yes - Preferred

No

Unsure

10b - What is included in the maintenance practices of a central line? (e.g., bundle, checklist, charting requirements, etc.) **(Select all preferred options)**

Daily review of line necessity - Preferred

Minimum of Q shift dressing assessment - Preferred

Minimum of Q shift site assessment - Preferred

- Administration delivery system changes - **Preferred**
- Needleless component changes - **Preferred**
- Minimum weekly dressing changes - **Preferred**
- Daily CHG bathing - **Preferred Optional**
- Catheter hub disinfection prior to access - **Preferred**
- None of the above

Policy & Procedure

12a - Does the facility have a policy and standard operating procedures related to CLABSI Prevention?

- Yes - Preferred**
- No
- Unsure

12b - What is included in the CLABSI prevention policy and procedures? (**Select all preferred options**)

- Indications for appropriate central line use - **Preferred**
- Algorithms or lists for preferred central line placement sites - **Preferred**
- Central line insertion protocol - **Preferred**
- Central line maintenance protocol - **Preferred**
- Central line removal protocol - **Preferred**
- Clinical contraindications for specific central lines - **Preferred**
- Anatomical contraindications for central line placement - **Preferred**
- Administrative set replacement protocols - **Preferred**
- Needleless component change protocols - **Preferred**
- None
- Other

Education & Training

13a - Does the facility have a competency-based training program for CLABSI prevention activities?

- Yes - Preferred**
- No
- Unsure

13b - CLABSI prevention competency-based training includes: (**Select all preferred options**)

- Indications for central line use - **Preferred**
- Algorithms for central line device choice - **Preferred Optional**
- Central line insertion protocol - **Preferred**
- Ultrasound guidance for insertion - **Preferred**
- Central line maintenance protocol - **Preferred**
- Central line removal protocol - **Preferred**
- Clinical contraindications for central lines - **Preferred**
- Anatomical contraindications for line placement - **Preferred**
- Maximal barrier precautions - **Preferred**
- Skin preparation - **Preferred**
- Hand hygiene - **Preferred**
- Catheter site dressing protocol - **Preferred**
- Patient bathing protocol - **Preferred**

- Administration set replacement - **Preferred**
- Central line assessment - **Preferred**
- Other

13c - Who receives CLABSI prevention competency-based training as it relates to their job role?

(Select all preferred options)

- Clinical healthcare personnel - **Preferred**
- Ancillary Services - **Preferred**
- Non-clinical healthcare personnel - **Preferred Optional**
- Clinical Support - **Preferred**
- Students & Trainees - **Preferred**
- Volunteers - **Preferred Optional**
- None
- Other

13d - What frequency is CLABSI prevention competency-based training provided? **(Select all preferred options)**

- Upon hire - **Preferred**
- Annually - **Preferred**
- When new products and protocols are introduced - **Preferred**
- As remediation for compliance failures - **Preferred**
- Targeted performance improvement - **Preferred**
- None

13e - Are healthcare personnel required to demonstrate competency of the task/skill following each training?

- Yes - Preferred**
- No
- Unsure

13f - Does the facility maintain documentation for the completion of CLABSI prevention competency for healthcare personnel?

- Yes - Preferred**
- No
- Unsure

Audit & Feedback

14a - Does the facility audit adherence to CLABSI prevention strategies?

- Yes - Preferred**
- No
- Unsure

14b - How are CLABSI prevention audits performed? **(Select all preferred options)**

- Secret shopper observation - **Preferred Optional**
- Direct observation - **Preferred**
- Chart/ record review - **Preferred**
- Other

- 14c - What do the CLABSI prevention audits monitor? **(Select all preferred options)**
- Central line insertion bundle adherence - **Preferred**
 - Aseptic technique - **Preferred**
 - Central line dressing changes - **Preferred**
 - Central line removal - **Preferred**
 - Daily assessment for continued need for central line - **Preferred**
 - Use of maximal barrier precautions for central line insertion - **Preferred**
 - Use of skin prep prior to insertion - **Preferred**
 - Sterile gauze or sterile transparent, semi-permeable dressing use - **Preferred**
 - Avoidance of high-risk sites - **Preferred Optional**
 - Hand hygiene - **Preferred**
 - Central lines changes aseptically - **Preferred**
 - Access ports scrubbed with an appropriate antiseptic prior to accessing - **Preferred**
 - Daily CHG bathing - **Preferred Optional**
 - Catheter is accessed only with sterile devices - **Preferred**
 - Central line dressing adhesive is intact over the catheter insertion site - **Preferred**
 - Central line drainage is contained within the dressing - **Preferred**
 - Dressing dated and timed in accordance with hospital policy - **Preferred**
 - Catheter is secured to reduce movement and tension - **Preferred**
 - Tubing administration sets are labeled with medication start time and date - **Preferred**
 - Inactive ports are capped in accordance with facility policy - **Preferred**
 - Central line specimen collection - **Preferred**
 - None of the above
 - Other
- 14d - Do auditor(s) provide immediate real-time feedback to healthcare personnel in the moment?
- Yes - Preferred**
 - No
 - Unsure
- 15 - Does the facility utilize CLABSI data to impact performance improvement?
- Yes - Preferred**
 - No
 - Unsure
- 16 - Which CLABSI surveillance data do frontline healthcare personnel receive? **(Select all preferred options)**
- Facility-wide CLABSI data (SIR, SUR, etc.) - **Preferred Optional**
 - Unit level CLABSI data - **Preferred**
 - Antibiotic usage data - **Preferred Optional**
 - Device-specific data - **Preferred**
 - Other
- 17 - Which data are provided to the Infection Control Committee (ICC) or Quality Improvement Committee (QAPI)? **(Select all preferred options)**
- Audit data - **Preferred Optional**
 - CLABSI infection count or SIR - **Preferred**
 - Central line utilization ratios (SUR) - **Preferred**
 - Phlebitis occurrences - **Preferred**

- Antimicrobial utilization - ***Preferred Optional***
- None
- Other

Dedicated Central Line Teams: In-house vs Vendor

18 - Does the facility utilize a contracted service for: **(Not Scored)**

- Central line insertion
- Central line maintenance
- Central line removal
- None- all is performed in-house

19 - Does the IPC program have information regarding the training and competency of the contracted service for central line insertion and care?

- Yes - Preferred**
- No
- Unsure

20a - Does the vendor adhere to a standardized insertion checklist?

- Yes - Preferred**
- No
- Unsure

20b - Is the insertion checklist based on national standards and guidelines?

- Yes - Preferred**
- No
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21 - Is the contracted service notified of identified CLABSIs at the facility?

- Yes - Preferred**
- No
- Unsure

22 - Do trained facility staff monitor the central line insertion performed by the contracted service to ensure the insertion checklist is followed?

- Yes - Preferred**
- No
- Unsure

23a - Does the contracted service perform dressing changes?

- Yes - Preferred**
- No
- Unsure

23b - Are competent staff available for PRN dressing changes if the contracted services are not available, such as during overnight hours?

- Yes - Preferred**
- No
- Unsure

24 - Does the contracted service maintain documentation of its procedures?

Yes - Preferred

No

Unsure

25 - Does the facility utilize ultrasound for central line placement when applicable?

Yes - Preferred

No

Unsure

General Practice

26 - Are patients with a central venous catheter assessed at least daily for continued medical need for the CVC?

Yes - Preferred

No

Unsure

27 - Do ordering providers document an indication for the central line?

Always - Preferred

Often - Preferred

Rarely

Never

28 - Are central lines that are no longer needed promptly removed?

Always - Preferred

Often - Preferred

Rarely

Never

29a - Do patients and family receive education regarding central venous catheters?

Yes - Preferred

No

Unsure

29b - Are patient education materials approved by the CLABSI prevention work group or IPC program?

Yes - Preferred

No

Unsure

30 - Are healthcare personnel empowered to stop non-emergent central line insertion if proper procedures are not followed?

Yes - Preferred

No

Unsure

31 - Are supplies or kits for proper central line insertion available in all locations where central lines are inserted?

Yes - Preferred

No

Unsure

32 - Does your facility use an antimicrobial-embedded central line dressing?

Yes - Preferred

No

Unsure

33 - Is daily CHG bathing a part of the bathing protocol for patients with a central line?

Always - Preferred

Often - Preferred

Rarely

Never

34 - Is the IPC program involved in product selection for CLABSI reduction efforts?

Yes - Preferred

No

Unsure

35 - Does the facility use any additional approaches for BSI prevention? If so, what approaches are used? **(Not Scored)**

Silver impregnated lines

Antimicrobial-coated lines

Antimicrobial impregnated dressings

CHG bathing kits/ wipes

Other

None of the above

Guidance

Leadership Support

Core Element Description: Assessment of leadership accountability, engagement, and support of central line-associated bloodstream infection prevention practices within the facility.

Free Access: Resources

Centers for Disease Control and Prevention. (2022). Central Line-associated Blood Stream Infection (CLABSI) Targeted Assessment for Prevention (TAP) facility Assessment Tool.

<https://www.cdc.gov/healthcare-associated-infections/media/pdfs/CLABSI-TAP-Facility-Assessment-Tool-v4-2022-508.pdf>

Policy & Procedure

Core Element Description: Assessment of policy and procedures related to central line-associated bloodstream infection prevention practices within the facility.

Free Access: Resources

Association for Professionals in Infection Control and Epidemiology. (2015). APIC Implementation Guide: Guide to Preventing Central Line-Associated Bloodstream Infections.

Association for Professionals in Infection Control and Epidemiology. (2021).

https://apic.org/Resource_/TinyMceFileManager/2015/APIC_CLABSI_WEB.pdf

Education & Training

Core Element Description: Assessment of education and training of healthcare personnel to appropriately perform central line-associated bloodstream infection prevention practices as it relates to their job role.

Free Access: Resources

Centers for Disease Control and Prevention. (2022). Central Line-associated Blood Stream Infection (CLABSI) Targeted Assessment for Prevention (TAP) facility Assessment Tool.

<https://www.cdc.gov/healthcare-associated-infections/media/pdfs/CLABSI-TAP-Facility-Assessment-Tool-v4-2022-508.pdf>

Audit & Feedback

Core Element Description: Assessment of audit and feedback practices regarding central line-associated bloodstream infection prevention practices.

Free Access: Guidelines

Centers for Disease Control and Prevention. (2002) Guideline for Hand Hygiene in Health-Care Settings: Recommendations of the Healthcare Infection Control Practices Advisory Committee and the HICPAC/SHEA/APIC/IDSA Hand Hygiene Task Force. MMWR 2002; 51.

<https://www.cdc.gov/mmwr/PDF/rr/rr5116.pdf>

Free Access: Resources

Washer, L., Gilmartin, H.M., Olmstead, R. Centers for Disease Control and Prevention. (n.d.) Hand Hygiene: Education, Monitoring, and Feedback. <https://www.cdc.gov/infection->

[control/media/pdfs/Strive-HH102-508.pdf](https://www.cdc.gov/media/pdfs/Strive-HH102-508.pdf)

Dedicated Central Line Teams: In-house vs vendor

Core Element Description: Assessment of the use of a dedicated in-house central line care/insertion team or the use of contracted staff to perform central line care at the facility.

No Guidance Available - Intentionally left blank

General Practice

Core Element Description: Assessment of central line-associated bloodstream infection prevention practices at the facility.

Free Access: Resources

Centers for Disease Control and Prevention. (2022). Central Line-associated Blood Stream Infection (CLABSI) Targeted Assessment for Prevention (TAP) facility Assessment Tool.

<https://www.cdc.gov/healthcare-associated-infections/media/pdfs/CLABSI-TAP-Facility-Assessment-Tool-v4-2022-508.pdf>

Additional Guidance

Free Access: Guidelines

Healthcare Infection Control Practices Advisory Committee. (2017) Core Infection Prevention and Control Practices for Safe Healthcare Delivery in All Settings—Recommendations of the Healthcare Infection Control Practices Advisory Committee (HICPAC).

<https://www.cdc.gov/infection-control/hcp/core-practices/index.html>

Marschall, J., Mermel, L., Fakih, M., Hadaway, L., Kallen, A., O'Grady, N., . . . Yokoe, D. (2014). Strategies to Prevent Central Line-Associated Bloodstream Infections in Acute Care Hospitals: 2014 Update. *Infection Control & Hospital Epidemiology*, 35(S2), S89-S107.

<https://www.cambridge.org/core/services/aop-cambridge-core/content/view/CB398EB001FEADE0D9B4FF1A096ECA52/S0899823X00193870a.pdf/strategies-to-prevent-central-line-associated-bloodstream-infections-in-acute-care-hospitals-2014-update.pdf>

Siegel JD, Rhinehart E, Jackson M, Chiarello L, and the Healthcare Infection Control Practices Advisory Committee, 2007 Guideline for Isolation Precautions: Preventing Transmission of Infectious Agents in Healthcare Settings. https://www.cdc.gov/infection-control/media/pdfs/guideline-isolation-h.pdf?CDC_AAref_Val=https://www.cdc.gov/infectioncontrol/pdf/guidelines/isolation-guidelines-H.pdf

Free Access: Resources

Centers for Disease Control and Prevention. (2021, December 21.) Quick observation tools (QUOTs) for infection prevention. <https://www.cdc.gov/infection-control/media/pdfs/All-Quick-Observation-Tools-P.pdf>

Centers for Disease Control and Prevention. (2021, December 21.) TAP central line-associated infections (CLABSI) implementation guide: links to example resources.

<https://www.cdc.gov/healthcare-associated-infections/media/pdfs/HAI-Toolkit-TAP-Strategy-CLABSI-Implementation-Guide-508.pdf>