Enhancing Patient Safety During Central Catheter Insertion through Interprofessional Division of Education

Cindy Umbrell MSN, RN, CNS, CCRN
Lehigh Valley Health Network, Cindy.Umbrell@lvhn.org

Barbara Hemphill NSB, RN, CCRN
Lehigh Valley Health Network, hemphill@wmich.edu

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**Background:**
“All health care organizations and schools of nursing should foster a culture of lifelong learning and provide resources for interprofessional continuing competency programs;” and, “expand opportunities for nurses to lead and diffuse collaborative improvement efforts.” The Robert Wood Johnson Initiative on the Future of Nursing, at the Institute of Medicine.

**Purpose:**
Prior to this above report, LVHN RNs were key participants in an initiative to develop and hone an interprofessional educational experience related to central catheter insertions.

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**THE INTERPROFESSIONAL EXPERIENCE**

1st - Didactic Education
- Resident physicians & advanced practice clinicians
- First week of orientation
- Taught by attending physicians
- Content:
  - Collaboration is THE STANDARD!
  - Sterile technique
  - Landmarks

2nd - Simulation
- Roles:
  - Resident physician – Learner
  - Attending physician – Validation of technical competency
  - RN – Recorder/Observer to insure patient safety
  - GN – Observer orientee
- Key Points:
  - Acknowledgement of respective roles & responsibilities
  - Use of standard checklist & varied scripted scenarios

3rd - Debriefing
- Resident, attending physician & RN
- Significance:
  - RN responsible & accountable to stop procedure if patient safety compromised.
  - Per the evidence, interprofessional education fosters collaborative relationships and ultimately, patient safety.

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**Outcomes**
Central Line Associated Bloodstream Infections (CLABSI)

- Procedures
- Ultrasound

**Qualitative Feedback**
- The collaborative simulation gives me confidence that physicians understand my role to insure patient safety. Barb Hemphill, RN
- A bedside nurse present during insertion has become part of our patient safety culture. Daniel Taylor, CRNP

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