

Decolonization of Non-ICU Patients With Devices

Section 12-5 – Sample Adherence Report

Use this document to build a useful report that allows for tracking of daily adherence and for drilling down as needed to identify shifts or personnel who have the lowest adherence and therefore may need reinforcement or retraining. Routine assessment of adherence with feedback to frontline staff is essential for the success of the targeted decolonization protocol. If adherence is low, provide feedback to frontline staff via brief messaging using huddle documents or targeted feedback to specific staff.

Options for monitoring adherence may include:

1. Electronic medical record—generate reports based upon bathing documentation from a routine nursing shift query. Elements that may be helpful for effective feedback include:
 - a. Unit name
 - b. Patients with selected medical devices
 - c. Assigned nurse(s)
 - d. Date and time of bath (day versus evening versus night shift)
 - e. Type of soap (chlorhexidine [CHG], non-CHG)
 - f. Reason(s) why CHG bath/shower not given/not taken
2. Manual process—if electronic reports are not available, perform manual checks over designated time intervals (e.g., daily, weekly, biweekly).

The following is an example of a daily adherence report generated from a nursing documentation query. The denominator is the sum total of all hospital days for patients with devices targeted to received decolonization. The numerator represents the sum of calendar days where those same patients received CHG baths.

Unit	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sept	Oct	Nov	Dec
Med A	73%	88%	85%	73%	83%	85%	86%	74%	79%	84%	97%	81%
Med B	86%	66%	85%	100%	100%	85%	86%	88%	100%	90%	90%	91%
Cardiac	59%	87%	79%	76%	79%	74%	82%	78%	80%	82%	83%	74%
Surg A	81%	100%	90%	67%	66%	70%	88%	70%	81%	77%	79%	81%
Surg B	86%	85%	58%	86%	97%	92%	95%	91%	95%	90%	98%	100%
Stepdown	62%	65%	43%	53%	50%	72%	72%	74%	80%	82%	83%	86%

Color	Key
	80% or higher adherence
	70-79% adherence
	<70% adherence

3. Nasal product adherence report

- a. Medication administration including mupirocin (or iodophor) is tracked in all hospitals. Reports can be built to track adherence of these products in MRSA carriers as well. Refer to your local information technology department for assistance building a report.