The Hospital Corporation of America is a system participant in the Institute for Healthcare Improvement National 100,000 Lives Campaign to improve quality and patient safety. This survey addresses two Campaign aims (central line infections and ventilator-associated pneumonia) and will provide a better understanding of current critical care practices at HCA hospitals. This survey should be distributed to the ICU managers. A separate survey should be completed for each ICU in your hospital. Please take a moment to complete a survey. Thank you.

Facility /
COID
Select your facility, please.

Type of Critical Care Unit (Mark all that apply to this single unit)

- Medical ICU
- Cardiac/coronary (nonsurgical) ICU
- Surgical ICU
- Pediatric ICU
- Respiratory ICU
- Trauma ICU
- Neonatal ICU
- Neurological ICU
- Cardiac/Cardiothoracic (surgical) ICU
- Burn ICU
- Other

The Department number for this ICU

The nursing manager of this ICU

- This ICU does not have a nursing ICU manager.

The nursing ICU manager reports

The physician director of this ICU

- This ICU does not have a physician director.

The physician director e-mail

Please continue to Survey (Part 2)
The size of this ICU is: 0 beds.
The average daily census for the past year is 0%.
The number of ICU discharges for 2004 calendar year was 0.

Do you have intensivist physicians managing patients in your ICU? An intensivist is a pulmonologist, cardiologist, neonatologist or other specialist who is board-certified in critical care. (Please select one.)

Select One

Other (describe please):

Is there a Clinical Nurse Specialist assigned to your ICU unit/patients?

Select One

Does a pharmacist make clinical rounds in the ICU?

Select One

Hospital infection control personnel collect and report data on our ICU for:

Our infection control personnel use the Centers for Disease Control and Prevention National Nosocomial Infection Surveillance (NNIS) system's definitions to define the above infections.

Select One

Our BSI rates are currently:

Select One

Our VAP rates are currently:

Select One

Our ICU participates in national quality improvement projects (e.g., VHA or other) to improve critical care.

Select One

Our ICU has a QI project or organizational initiative to improve blood stream infection rates. If yes, please briefly describe.

Select One

Our ICU has a QI project or organizational initiative to improve ventilator-associated pneumonia rates. If yes, please briefly describe.

Select One

Please continue to Survey (Part 3)
Our ICU is enrolled and participating in the following aspects of the IHI 100,000 Lives Campaign (mark all that apply):

- Deploy Rapid Response Teams
- Prevent Adverse Drug Events
- Prevent Surgical Site Infection
- None of the above

Our hospital is participating in the following aspects of the IHI 100,000 Lives Campaign (mark all that apply):

- Deploy Rapid Response Teams
- Prevent Adverse Drug Events
- Prevent Surgical Site Infection
- None of the above

Instructions: For each organizational characteristic provided below, please select the description that best describes your ICU and its processes of care.

Accessibility of data to ICU providers and staff

- Select One

Format of ICU clinical documentation (mark all that apply):

- Nursing documentation is done on paper
- Nursing documentation is done on computer
- Nursing documentation is done partially on paper and partially on the computer
- Medication documentation is done on paper
- Medication documentation is done on eMAR
- Ventilator documentation is done on paper
- Ventilator documentation is done on

Please continue to Survey (Part 4)
Safe Critical Care: Testing Improvement Strategies. The Agency for Healthcare Research and Quality recently awarded over $8 million in funding for 15 two-year projects to help clinicians, facilities, and patients implement evidence-based patient safety practices. A Hospital Corporation of America initiative on improving critical care is one of those funded projects. Our project aims to:

1. Implement a campaign for Improving Critical Care (blood-stream infections and ventilator-associated pneumonia) as part of the IHI 100,000 Lives campaign.
2. Develop tool kits for reducing blood-stream infections and ventilator-associated pneumonia.
3. Conduct a randomized controlled trial to compare the effectiveness of a collaborative continuous quality improvement effort versus just the Campaign and Tool Kit strategy for attaining the Improving Critical Care project goals.
4. Examine the organizational and provider factors that contribute toward and enable successful performance improvement.

Would your ICU like to participate in this HCA project?  Select One