

HAI BSI REDUCTION- PROJECT AGREEMENT JANUARY 2016 – OCTOBER 2016

The undersigned hereby agrees to participate and cooperate with the goals and activities, including quality improvement projects, as set forth by IPRO ESRD Network (42 CFR Part 494.180.V772 (i) of Centers for Medicare & Medicaid Services (CMS) regulations).

Facility Name (DBA):	Medicare Provider # (CCN):
Project Lead Name:	Project Lead Title <u>:</u>
Project Lead Signature:	Date:
Project Lead Email:	
Medical Director:	
Medical Director's Signature:	Date:
Medical Director Email:	
Facility Administrator/Nurse Manager Name:	
Facility Administrator/Nurse Manager Signature:	
Regional Director/Area Administrator:	Phone:
Regional Director/Area Administrator Email:	

Any changes to the above listed contacts must be reported to the Network <u>and</u> corrected in CROWNWeb <u>within 5 business days</u> to ensure continuity with project implementation and communications between the **Network and Facility.** Plans are reviewed periodically, and are subject to change based on the CMS Statement of Work (SOW).

QUALITY IMPROVEMENT ACTIVITY

- PROJECT OBJECTIVE: Reduce BSI at the facility level
 - PRIMARY PROJECT MEASURES
 - 1. BSI data from NHSN
 - PRIMARY PROJECT GOALS
 - 1. Reduce BSI Rates at the facility level
- ACTION ITEMS / FACILTY REQUIREMENTS
 - o Perform CDC Surveillance Audits (January March)
 - Perform Root Cause Analysis (RCA) of infections (February)
 - o Identify 3 CDC tools/resources to implement at the facility (February/Report in March)
 - Implement tools, review monthly at QAPI, provide summary report, report in NHSN (April-October)

INFORMATION MANAGEMENT / DATA REPORTING RELATED TO THIS PROJECT

• National Healthcare Safety Network (NHSN): Report infection data and prevention process measures. Comply with CMS Quality Incentive Program requirements.