Lessons Learned

Active Bathing to Eliminate Infection Project
ABATE Infection Project
Active Bathing to Eliminate Infection

Trial Design
- 2-arm cluster randomized trial; 53 HCA hospitals and their adult non critical care units
- Includes: adult medical, surgical, step down, oncology
- Excludes: rehab, psych, peri-partum, BMT

Arm 1: Routine Care
- Routine policy for showering/bathing

Arm 2: Decolonization
- Daily CHG shower or CHG cloth bathing routine for all patients
- Mupirocin x 5 days if MRSA+ by history, culture, or screen

Primary Outcomes
- Unit-attributable clinical cultures with MRSA and VRE*

Additional Outcomes
- Unit-attributable clinical cultures with GNR MDRO*
- Bloodstream infections: all pathogens*
- 30 day readmissions (total and infectious)
- Urinary tract infections: all pathogens*
- *Clostridium difficile* infection
- Bloodstream contaminants
- Emergence of resistance (strain collection)

*occurring >2 days into a participating unit stay through 2 days after discharge
The UH2 planning period proved to be a useful mechanism that allowed time for adequate administrative and scientific resources to be dedicated toward laying a solid foundation for a successful pragmatic trial.
Lessons Learned Summary: Keys to Success

- Leadership support*
- True collaboration and respect with academic and federal partners*
- Preliminary planning around IRB considerations*
- Develop enduring tools & resources
- Leveraging HCAs centralized communication, data & IT infrastructure to support a “Learning Health System”
  - CDW, multiple data streams & EHR
  - Intranet (ATLAS) as arm-specific ABATE resource repository
  - Pharmacy, microbiology, ADT
  - Coaching calls, front line training/site visits

* Collaboratory Coordinating Center involvement/support
Lessons Learned Highlight: IRB

- Importance around preliminary meetings with HPHC IRB leadership and responsible HCA executive(s)
- Collaboratory as a resource for raising issues around necessity of informed consent to OHRP and FDA
- Willingness of a partnering HCA IRB to provide vulnerable population oversight
Lessons Learned Highlight: Develop Enduring Tools and Resources

- Central repository (ATLAS) to house ABATE protocols, presentations, etc to reference at any time across 50+ participating hospitals
- Study binders, wall clings, patient bathing instructions

Sometimes, a picture is worth MORE than 1,000 words:
http://vimeo.com/user12015874/review/83610758/ac9bcd7b15