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Automate Isolation Infection-Prevention Precautions (AID-IP): Improving the Efficiency of Hospital Isolation with Viral Respiratory Infections

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Automate Isolation Infection-Prevention Precautions (AID-IP): Improving the Efficiency of Hospital Isolation with Viral Respiratory Infections

Timothy Burchard, MD, Michael Platt, MD, FAAP, Sonya Buford, BSN, RN

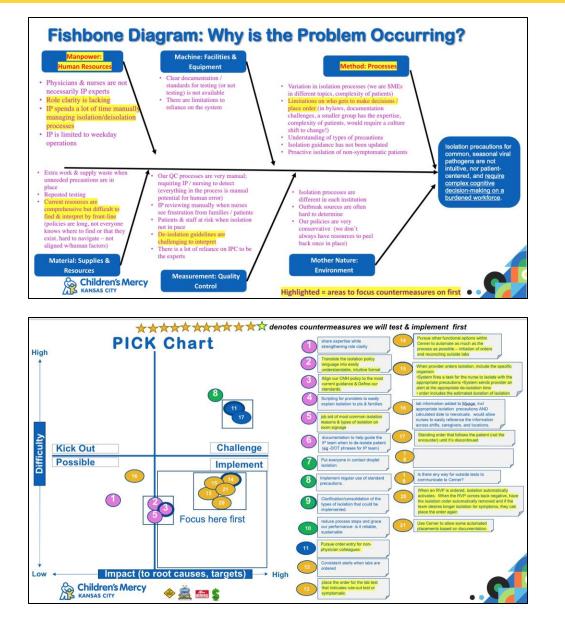
Children's Mercy Hospital, Kansas City

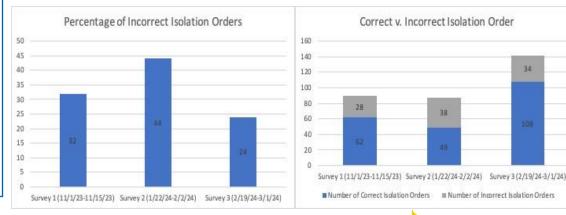
Background

- Isolation precautions are crucial for limiting infection spread but pose difficulties for patients and staff
- Little research exists on best practice for isolation efficiency and institutions like Children's Mercy have а
- Our goal is to reduce cognitive demand and overall • time spent by staff while optimizing isolation efficiency
- The aim of this work is to reduce incorrect isolation orders from 32% to 16% by March 31, 2024

Method

- A multidisciplinary team created a full process map to identify inefficiencies in staff isolation workflow
- A Fishbone diagram and PICK chart were used to identify problems with isolation process workflow and first countermeasures to correct these issues
- Our team implemented EMR modifications to automate isolation ordering of correct precautions
- Isolation policy was made easily accessible to staff for reference





- audits following EMR changes
- As of March 15th, incorrect isolation orders decreased from 32% to 24%
- 17% to 12%

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SCHOOL

FMEDICINE

Correct v. Incorrect Isolation Order

- correct orders
- policy.

Results

- Results were obtained through Infection prevention
- Room signage and order mismatch decreased from
- Infection Prevention survey time decreased from
- 20.4 minutes to 15.0 minutes

Conclusion and Next Steps

- Automation of precaution ordering had mixed
- results in order accuracy and decreased IP workload
- Confusion related to RSV isolation is a possible
- cause for incorrect isolation orders
- Updating Infection Prevention viral respiratory
- precaution policy should increase frequency of
- Moving forward, our team will explore automating
- de-isolation of patients and updating isolation

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