



## Airway Bundle QI Project

Congratulations on beginning the next Quality Improvement (QI) Project for the NEAR4Kids project, Airway Bundle Checklist (ABC). We have learned many lessons from the institutions that have already implemented the ABC that will hopefully make your process a smooth transition.

It is important to know that even though the NEAR4Kids project is considered research at many institutions, this is a QI project and needs to be rolled out just as you do for all other QI safety bundles (i.e. VAP, CLABSI, CAUBI). You will need to show that your unit has a commitment to the project by providing a letter from your QI chair or unit medical director (template attached). We also recommend that you develop a **multidisciplinary team** to assist with education, implementation and continued maintenance to ingrain this safety QI into the culture of your unit. The multidisciplinary team should include MD (attending, fellow), RN, RT, NP, PA &/or research assistant depending on the make-up of the providers in your unit. Each discipline will have a varied level of participation depending on the commitment they can make. At a minimum it is best to have a point person that can give input on workflow and ensure education and information is translated to their own teams.

“At Risk” criteria should be established for your institution. Attached is the minimum that all centers should include. This is the population that should have the first page of the bundle filled out and at the bedside because they are “at risk” of being intubated. You will need to report your compliance with having the bundle filled out and at the bedside for the “at risk” population monthly and it is due by the 5th of the next month. You should audit the at risk population at least twice a month, however we recommend it be done more often in the beginning until you reach an 80% compliance rate.

Attached you will find the initial ABC (simple version) and the newest version adopted by most centers (check box version). You may choose to use each version. Once you have edited the document to be applicable for your practice, please send to Hayley Buffman (buffmanh@email.chop.edu) for QI committee approval. You must maintain a minimum amount of information on the form to ensure uniformity amongst all centers.

We recommend that you develop inclusive education to be provided at least 2 weeks prior to implementation so that everyone knows what will be happening, where to get everything, and the purpose of this QI project. We have included a copy of the online education used from CHOP. There is also a [demonstration video](#) on the NEAR4Kids website using the ABC. Feel free to include this link in your education. It is also helpful to provide compliance feedback to disciplines so they can assist with achieving the team goal of 80% compliance for both at risk and intubated patients.

Lastly, we recommend that you determine an appropriate multidisciplinary unit committee to report the compliance rates and trend in TIAE rates.

Please let us know if there are questions or barriers to implementation that we can assist you with.

**Sincerely,**  
Akira Nishisaki  
Natalie Napolitano  
Hayley Buffman

## Checklist for QI Implementation:

- Receive letter of support and send to Hayley Buffman
- Form Multidisciplinary Airway QI Team
- Develop At Risk Criteria
- Edit ABC for institutional practice and send to QI committee for approval
- Determine work flow that best suits your unit culture including who has ultimate ownership
- Outline compliance monitoring plan
- Set Go Live date and notify us
- Develop education plan for each discipline
- Go Live