



## AB013. Quality improvement in pediatric intensive care: successes and pitfalls

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**Abstract:** Although preventing harm has been a central mission in medicine, the publication of the pivotal document “To Err is Human” created a revolution catapulting quality and safety to the forefront of the health care delivery systems. In pediatric critical care, performance assessment shifted from mortality outcome measures to active programs to reduce morbidity based on the Plan-Do-Study-Act (PDSA) cycle. The landmark study “An

Intervention to Decrease Catheter-Related Blood stream Infections in the ICU”, launched a new era of multicenter collaboration to reduce harm, one of the most remarkable developments during the last decade. A number of agencies and societies are currently hosting these multicenter collaborations and serve as hub to exchange information that is critical to sustain these safety programs. We describe our current quality program, emphasizing the importance of some of the critical steps in a quality project, like determine the baseline or the development of intervention bundles as well as defining the most common pitfalls of this process.

**Keywords:** Culture on safety; accurate baseline on quality improvement; challenges and resilience

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