What is the aim of the CRC?
The aim of the CRC is to support facility quality improvement team efforts to minimize the number of patients utilizing a central venous catheter (CVC).

The CRC consists of “Better Practices” (Care Bundle), or catheter reduction management strategies to support physician and staff efforts to reduce patient exposure to CVCs.

Why reduce catheters?
- *Primum non nocere* “First, do no harm.” We all must vigorously advocate for the best quality vascular access for our patients to minimize exposure and harm from catheters.
- By decreasing catheters, your facility is more likely to improve adequacy, hemoglobin, albumin and mortality rates.
- This project can be a stimulus to build a more effective Quality Improvement team that can improve not only catheter rates, but other clinical and operational opportunities using the new processes learned.

Key components of the CRC Care Bundle Include:
- Medical Director along with clinical and operational personnel identifies surgeon(s)/interventionalist(s) based on best outcomes as well as willingness/ability to provide needed services to minimize CVC rates.
- Utilization of Vascular Access Manager(s).
- Staff and patient education on the health risks of CVCs
- Timeline expectations for patient appointments, access maturation assessments and referrals to specialists.
- Use of standardized AVF cannulation procedures.
- Team focus on educating and intervening with patients who refuse permanent access placement.
- CVC tracking and team communication
- Identifying trends and opportunities in incident and prevalent patients to reduce catheter rates