

CAUTI REDUCTION IN THE INPATIENT SETTING

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BACKGROUND

Catheter-associated urinary tract infections (CAUTI) are the most common and preventable hospital acquired infection impacting hospitalized patients today. Complications associated with CAUTI result in increased length of stay, patient discomfort, excess health care costs, and contribute to increased mortality. Beginning in Fiscal Year (FY) 2021 through FY 2023, the inpatient units began experiencing a consistent rise in urinary tract infections in patients with indwelling urinary catheters in place, and a decrease in overall CAUTI bundle compliance.

PROJECT AIM

As a result of having two Catheter Associated Urinary Tract Infections in 2023, the Inpatient Units at ECU Health Chowan Hospital will achieve a 50% reduction in Catheter Associated Urinary Tract Infections, and a 10% decrease in overall foley catheter utilization days by the end of the 2024 by standardizing documentation and care practices.

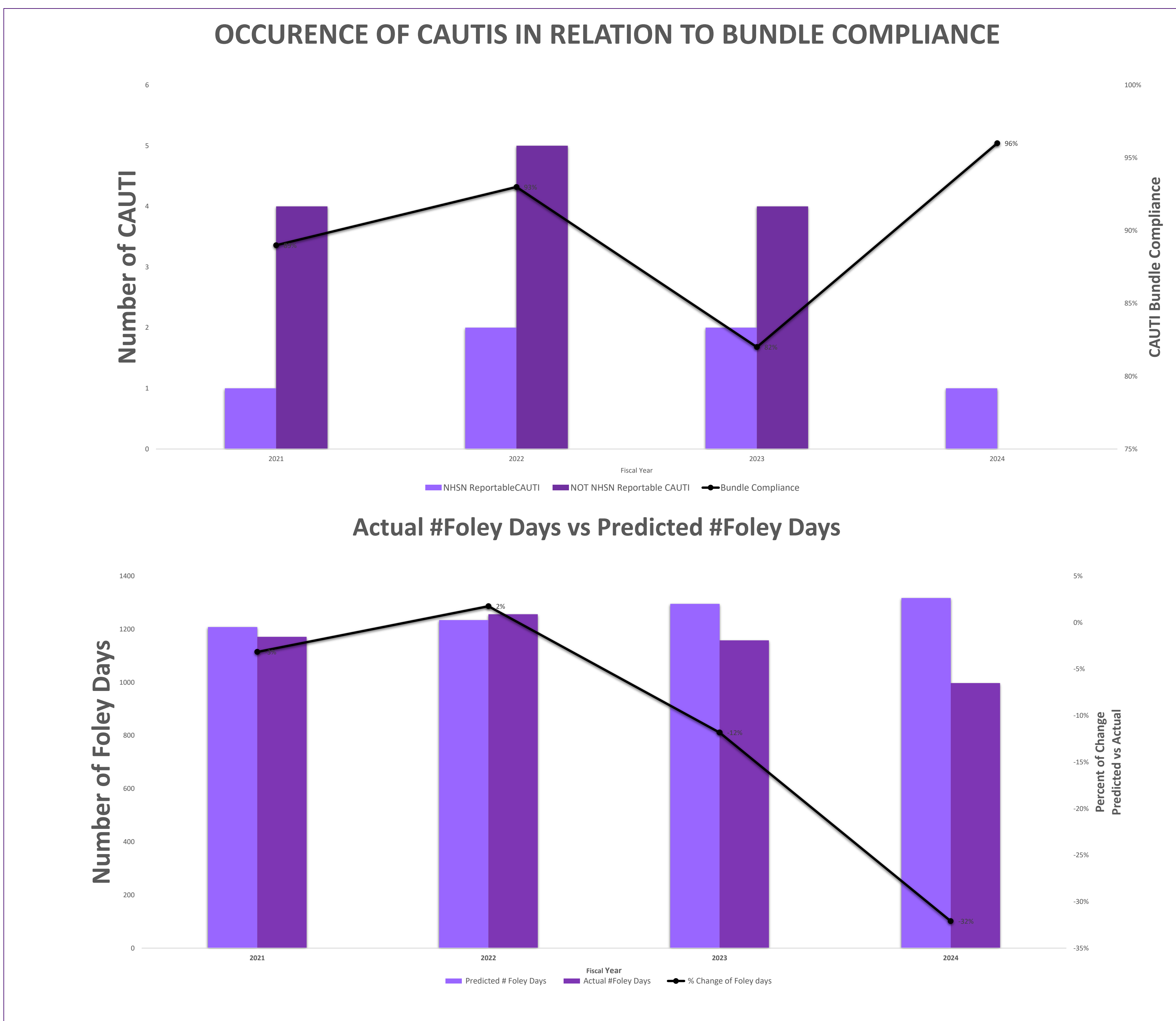
PROJECT DESIGN/STRATEGY

In response to the increase of urinary tract infections (UTI) in our inpatient population, a multi-disciplinary CAUTI prevention task force was formed to review current practices surrounding care of patients with an indwelling urinary catheter and to develop additional interventions to improve quality of care delivered. Emphasis was also placed on utilization of alternative methods to indwelling catheters. Education was provided to all current and incoming staff outlining expectations and daily chart audits were conducted to monitor for staff compliance.

CHANGES MADE (PDSA CYCLES)

- Developed a multi-disciplinary CAUTI prevention taskforce to review current practices surrounding care of patients with indwelling catheters and implement additional interventions to improve quality of care delivered
- Educate all current and incoming inpatient staff about alternative methods to indwelling catheters, how to use bladder scanner, and charting expectations.
- Included “necessity of foley catheter” discussion in Bedside Shift Report and Daily Progression of Care Rounds to encourage early device removal
- Provide education on Nurse Driven Foley Removal Protocol to front line staff and providers to encourage early device removal
- Partner with providers facility wide to assist with the reduction of placement of indwelling urinary catheters.
- Perform daily chart audits of all inpatients with indwelling catheter for bundle compliance and provide just in time education to staff.

RESULTS/OUTCOMES



RESULTS (cont'd)

- Bundle compliance increased from 89% in FY 2021 to 96% in FY 2024
 - FY 2024 ended with 32% below the predicted number of foley catheter days
- FY 2024 had one NHSN reportable CAUTI and zero non-NHSN reportable infections.



NEXT STEPS

- To continue the path to success, it is important to:
- Continue chart audits to monitor for compliance.
 - Continue team member education on alternatives to foley catheters.
 - Increase collaboration between departments to reduce use of foley catheters.
 - Empower staff to discuss catheter necessity in bedside shift report and progression of care rounds.

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