

Decreasing CAUTI Rates to Zero by Decreasing Device Days in CCC

The Problem

Above average Foley catheter Device Days in our CCC

When we engaged in the MHA CAUTI Cohort and received National comparative data, we realized that our device day rates were unacceptable. In order to best accomplish decreasing CAUTI, we needed to evaluate device days and the practices of placing and removing Foley catheters in the CCC. The initial evaluation highlighted the need to raise awareness and accountability for placing and removing Foley catheters. Our aim was to decrease device days for our patients and hopefully, CAUTI rates in CCC. We set a goal to be more efficient with removing Foley catheters, which in turn would improve safety and quality of care in CCC.

Aim/Goal

Our overall CAUTI rate fell from a high of 6.74 to 0 and has sustained at 0 for 10 months as of 12/31/13. . When we began the project, our goal was to decrease device days/utilization rates by 50% and achieve and maintain a zero CAUTI rate for 6 months or more. The entire project was planned and implemented from November 2012 through December 2013.

The Team

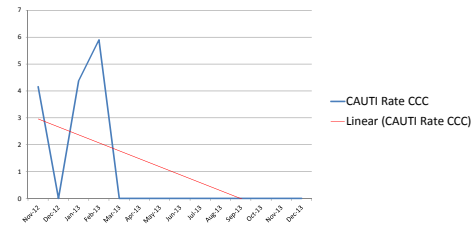
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 Lisa Bergendahl, RN BSN , Director, CCC
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 CCC Staff

The Interventions

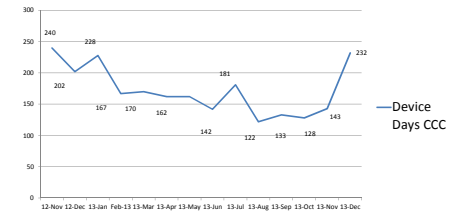
- Gathered and shared current data and best practices around removing Foley catheters in a timely fashion
- Developed criteria for placing Foley catheters using evidence based research
- Educated staff in CCC and ED on the criteria established for placing and removing Foley catheters
- Shared data monthly and as needed with CCC staff
- Review of CCC patients/devices by IP+C daily
- Implemented daily rounding with core focus on devices and evaluation of the necessity of those devices
- Engaged in one-on-one staff conversations when IP+C felt a Foley catheter should be removed per record review
- As an alternative to indwelling catheters, offered a full stock of condom catheters, wicking under pads and commodes
- Held staff accountable for driving down device days and CAUTI rates in CCC once they had the tools to succeed.

The Results/Progress to Date

CAUTI Rate in CCC
per 1,000 device days



Device Days CCC
per month



Lessons Learned:

Backing up the entire process to recognize that our ED was placing far too many catheters encouraged education and increased awareness of the criteria for placing Foley catheters. Once we reduced the number of unnecessary catheters overall, we then learned that the CCC did not have the tools with which to succeed. For instance, they only stocked one size of condom catheters and had limited commodes.

Next Steps/What Should Happen Next

- Monthly updates shared throughout the hospital
- Sustain the current zero CAUTI rate throughout 2014
- Share criteria for placing, then removing Foley catheters within 48 hours of insertion with all nursing units
- Implement GU consulting protocol for Foley catheters on all units that remain in place > 48 hours for evaluation by Urologist
- Continue to ensure that all nursing and medical staff have the tools they need to succeed
- Celebrate successes and implement a plan for improvement when challenges or “slips” occur

For more information, contact:

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