# **Beth Israel Deaconess Hospital-Milton**

# **CAUTI: Sustaining the Reduction and Elimination of Preventable Patient Harm**

#### The Problem

Catheter-associated urinary tract infection (CAUTI) is the most common hospital associated infection (HAI), accounting for more than 1 million cases each year in US hospitals and nursing homes (Behnaz, 2012). The significant number of infections, associated costs, potential for patient harm and dissemination of resistant bacteria in hospitals make it important to find ways to decrease their incidence.

In 2009, BID-M's Infection Prevention surveillance process identified an increase in the number of urinary tract infections acquired during inpatient hospitalization and associated with the use of urinary catheters.

#### Aim/Goal

Eliminate the incidence of Catheter Associated Urinary Tract Infection (HAI attributable) by implementing evidence-based criteria for catheter use and implementing processes to reduce device days and faciliate prompt removal once indicated.

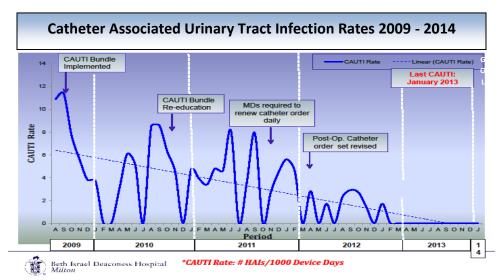
#### The Team

- Nursing
- Medical Staff
- Clinical Education
- Infection Prevention

## The Interventions (Select Actions Taken)

- Implementation and adherence to IHI endorsed CAUTI practice bundle
- Purchase and utilization of a bladder scanner device as a means to determine the need for catheterization prior to insertion
- Extensive education and competency development for involved clinicians
- Daily renewal of all inpatient catheter orders, including justification for continuation of use
- Post-operative urinary catheter order set as a means to ensure prompt postoperative removal (CMS SCIP Measure #9). Hospital has maintained 100% compliance with this measure for > 2 years.

### The Results/Progress to Date



### **Lessons Learned**

- Outcome validates the efficacy and benefit of implementing evidence-based practices
- Used as a sentinel success to support the implementation of and buy-in from clinicians in regards to other evidence-based practice guidelines
- Focusing on this important safety measure positively impacted other externally reported metrics i.e., CMS/JC measures, Hospital Acquired Conditions (HACs)
- $\bullet \quad \text{Reduction of non-reimbursable costs associated with Hospital Associated CAUTI's} \\$

## Next Steps/What Should Happen Next

- FY 2014 Goal for Infection Prevention and the Hospital's Antibiotic Stewardship Committee:
  - Eliminate the non-evidence based use of antibiotics for patients presenting with asymptomatic bacteruria (ASB) as a means to mitigate/reduce antibiotic resistance
- Explore the development and implementation of nurse-driven protocols associated with urinary catheter utilization

