

# INTEGRATIVE JOINT UNIT (IJU)-CAUTI FREE FOR 500 DAYS! COUNTING ON!



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## BACKGROUND

University Medical center (UMC), Nevada had 38 CAUTIs reported in 2021. UMC started a CAUTI/CLABSI prevention task force in 2022 to reduce the number of CAUTI and CLABSI in the hospital to ensure patient safety .

## PURPOSE

- 1.To identify the knowledge gap among the staff for CAUTI and prevention of CAUTI
2. To Analyze if staff education and / OR practice changes could decrease the incidence of CAUTI
3. Re- educate and empower staff to identify the need and remove the urinary catheter early if not indicated .

## RELEVANCE/SIGNIFICANCE

Preventing CAUTI is a major NSPG. Urinary tract infections are the most common type of Health care associated infections reported by the National Health Care Safety Network. CDC reports each day if the catheter remains the risk for CAUTI increases by 3-5%. CAUTI results 13,000 deaths per year.

## STRATEGY & IMPLEMENTATION

**Charge Nurses:** Monitor all the patients with foley catheter every shift the following elements

- Indication for the Foley Cather evaluate daily?
- What is the alternate method , such as condom catheter?
- Scope for Nurse driven Foley removal protocol?
- Red seal intact?/Loops?/Bag not touching the floor?/Stat lock date?
- Bladder scanning / Straight cath indication?
- Patient on medication to help with the urinary retention.
- Pericare/ Foley care q shift and CAUTI prevention care plan q shifts and documentation?
- Patient education – Hand hygiene education
- High touch surface disinfection practice q shift?

**Unit Leadership Ensure the Following:**

- Daily purposeful rounding to observe the practice, compliance and timely feedback and coaching to staff.
- Daily chart audit for Patients with foley Catheter to monitor the documentation compliance.
- Select and engage unit wise CAUTI/CLABSI prevention champion. Engage them to educate and share the information in Unit Based Council and staff meetings.
- Celebrate the small wins and major milestones, and recognize good catches.

## IMPLICATIONS OF PRACTICE

Empower the charge nurses and front line staff for the removal of unnecessary foley catheters. Improve the standard of care and enhance practice to prevent CAUTI.

## RESULTS

- Integrative Joint Unit (IJU) remains CAUTI free.
- Increase the bundle compliance for the charge nurses to 100%.
- Share the Strategy / implementation proposal of the project in UMC CAUTI/CLABSI prevention task force and set a hospital wide goal to reduce CAUTI by 50% for the next 12 months.

## REFERENCES

References available upon request Healthcare-Associated Infection Working Group of the Joint Public Policy Committee. Essentials of public reporting of healthcare-associated infections: a tool kit. January 2007. Available at: [http://www.cdc.gov/ncidod/dhqp/pdf/ar/06\\_107498\\_Essentials\\_Tool\\_Kit.pdf](http://www.cdc.gov/ncidod/dhqp/pdf/ar/06_107498_Essentials_Tool_Kit.pdf)  
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