CCMC CAUTI TEAM REDUCES ORGANIZATIONAL CAUTI RATE

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Purpose

• CCMC was challenged to decrease the incidence of catheter-associated urinary tract infection (CAUTI).

• A documented increase in rates of CAUTI had been noted organization-wide in the first quarter of 2013.

Problem/Significance

• Preventing catheter associated urinary tract infections will improve quality and safety through the impact it will have on decreasing morbidity/mortality rates and length of stay.

• The utilization of evidence based practice, assessment of data has led to enhancing safety and cost reduction in delivering patient care.

• The clinical nurse engagement in this project led to significant results throughout the entire organization.

Strategy and Implementation

Decrease the total number of urinary catheters inserted and encourage removal of catheters as soon as possible.

Develop a CAUTI Bundle of best practices and provide education to the staff.

CAUTI TEAM FORMATION

A Root Cause Analysis tool was developed to examine care in the 48-72 hour window prior to each CAUTI.

The team included the perioperative specialty in the education, as a large percent of catheters were inserted in the OR.

Promote Consistent Insertion and Maintenance Guidelines

Standardize Equipment to Correlate with Best Practice

Daily Rounds Script Necessity of Catheter

CAUTI BUNDLE

Evaluation

CCMC CAUTI Rate 1Q13-1Q15

Implications for Practice

• The creation of the CAUTI team and its ultimate interventions led to a significant decrease in catheter associated urinary tract infections.

• These practices have been disseminated throughout the organization as well as the pediatric service line as best practice.