

Catheter-associated urinary tract infection (CAUTI)

What

CAUTI

A catheter-associated urinary tract infection (CAUTI) occurs when germs (usually bacteria) enter the urinary tract through a urinary catheter and cause infection. A CAUTI, when acquired in the hospital, is considered a hospital-acquired condition (HAC). The most significant risk factor for developing a CAUTI is prolonged use of a urinary catheter. Therefore, catheters should only be used for appropriate indications and should be removed as soon as they are no longer needed.



Impact

CAUTI by the numbers

13,000

- Deaths per year associated with urinary tract infections (UTIs) in the U.S.¹

80%

- Hospital-acquired UTIs that are attributable to indwelling urinary catheters²



\$340M

- Amount spent per year in the U.S. for CAUTIs³

1 %

- Medicare payment reduction for hospitals with the worst HAC scores⁴



Requirement

- Implement evidence-supported practices for preventing CAUTIs (TJC National Patient Safety Goal 07.06.01)
- Report CAUTIs to the CDC's National Healthcare Safety Network

Action

Pathway to excellence



1 ENGAGE

- Develop a multidisciplinary team that includes nurses, infection preventionists, Quality personnel, and physicians.
- Designate urinary champions (including a physician champion) to promote CAUTI prevention guidelines throughout the facility.
- Include finance leadership in reporting to bring attention to CMS' payment reduction rule for HACs and other value-based reimbursement penalties.

2 EDUCATE

- Provide regular education on appropriate indications for catheter insertion, catheter care and maintenance, insertion technique, alternatives for indwelling catheters, and nurse-driven removal protocols.
- Discuss risks of indwelling urinary catheters with patients and families.

3 EXECUTE

- Incorporate urinary bundle elements into the electronic medical record and require regular ongoing assessment for indications and continued use.
- Develop nurse-driven protocols to discontinue the catheter if indications are no longer met.
- Consider medical record, automatic stop orders, or system alerts.
- Standardize catheter kits to meet the elements of the urinary bundle.
- Use alternatives to indwelling catheters, such as intermittent straight catheters, condom catheters, and bladder scanning.

4 EVALUATE

- Collect and report data on catheter use (such as device days).
- Conduct routine, ongoing surveillance and observations, especially in high-risk areas.
- Develop a performance improvement tool to determine the root cause of CAUTIs and provide feedback to the nursing and medical staff involved in patient care.
- Set goals for CAUTI prevention and provide monthly feedback to the staff and facility leadership.

How do you compare?

Crowe performs independent audits of CAUTI prevention. Some common deficiencies include:

- Catheter maintenance not performed according to CDC guidelines (e.g., collection bag too high, obstructed urine flow, etc.)
- Lack of regular assessment for continued use and timely discontinuation of the catheter

Crowe clinical risk services: linking the dimensions of healthcare delivery to achieve excellence. To learn how a clinical assessment or clinical risk project can support your performance excellence efforts, please contact:

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¹ "Urinary Tract Infection (Catheter-Associated Urinary Tract Infection [CAUTI] and Non-Catheter-Associated Urinary Tract Infection [UTI]) and Other Urinary System Infection [USI] Events," Centers for Disease Control and Prevention (CDC), January 2018, <https://www.cdc.gov/nhsn/pdfs/pscManual/7pscCAUTIcurrent.pdf>

² "Catheter-Associated Urinary Tract Infection," Institute for Healthcare Improvement (IHI), <http://www.ihii.org/topics/CAUTI/Pages/default.aspx>

³ "Catheter-Associated Urinary Tract Infection (CAUTI) Outcome Measure," National Healthcare Safety Network (NHSN), <http://www.hospitalsafetyscore.org/media/file/CAUTI.pdf>

⁴ "Hospital-Acquired Condition Reduction Program (HACRP)," Centers for Medicare & Medicaid Services (CMS), July 2017, <https://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/AcuteInpatientPPS/HAC-Reduction-Program.html>