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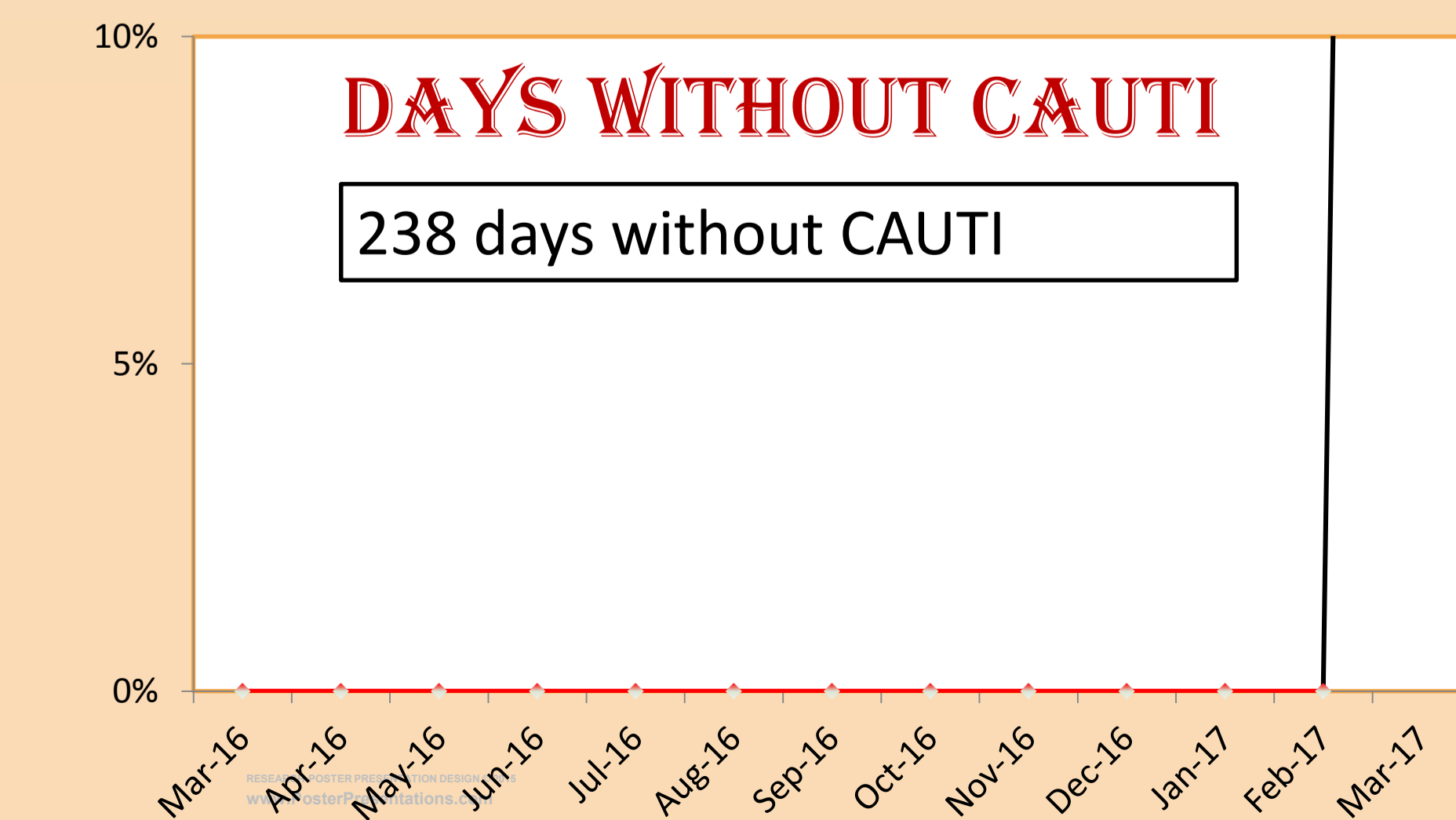
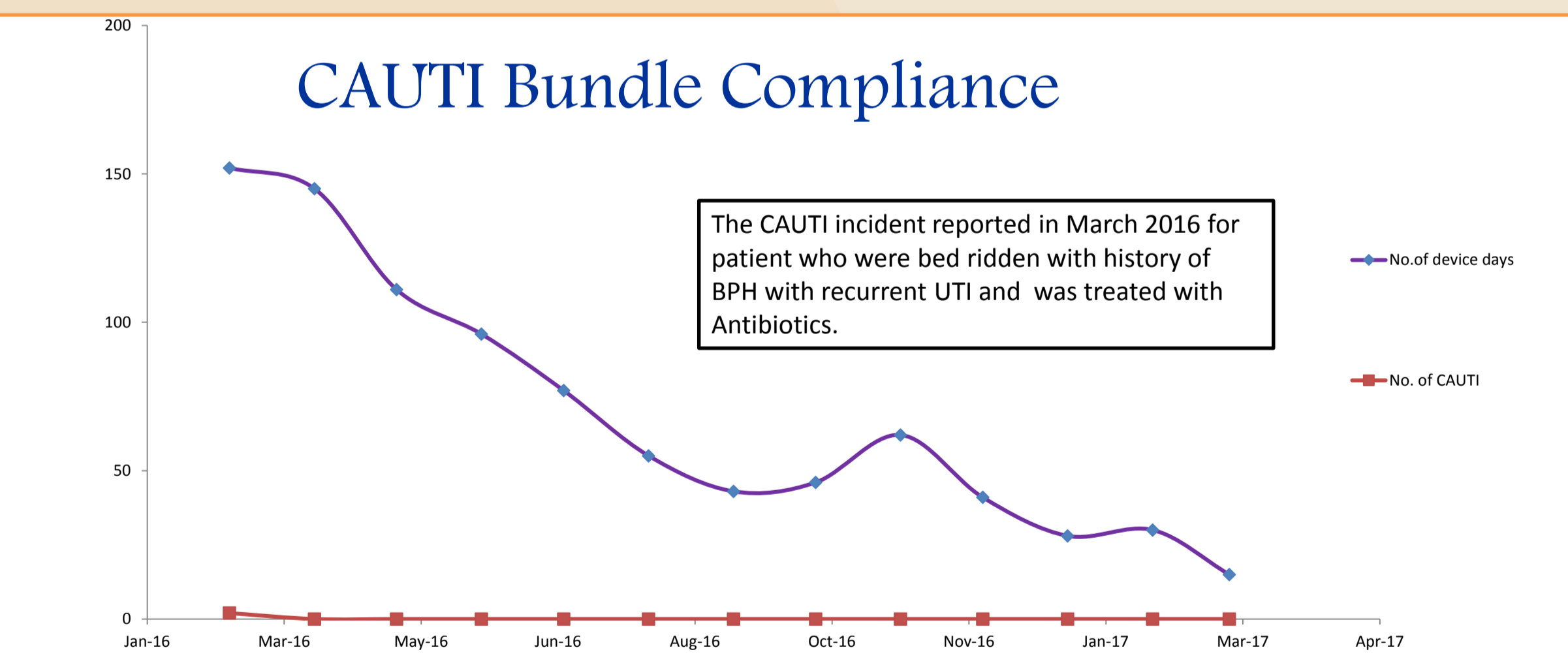
BACK GROUND

Catheter-associated urinary tract infections (CAUTIs) are common healthcare-associated infections that can prolong lengths of stay and increase morbidity and mortality. Despite their best efforts, many hospitals continue to struggle with climbing CAUTI rates. Recognizing inappropriate or prolonged urinary catheterization as a primary risk factor, our team decided to target urinary-catheter device days as a way to reduce CAUTIs.

AIM

OUR MAIN AIM IS TO MAINTAIN ZERO CAUTI, for that quality-improvement our initiative was to decrease the number of urinary catheters inserted and reduce the time they stayed in place. Each additional day of indwelling catheterization further increases the risk of developing a CAUTI.

RESULTS



PROCESS

- In June 2015 we implemented IHI change package for CAUTI bundle.
- The following steps were done to ensure that we can prevent CAUTI incidence in our unit.
- The most challenging aspect of this initiative was implementing interventions aimed at improving our culture of safety and accountability around urinary catheters.
- Weekly review of all catheters by unit doctor infection control practitioner and staffs.
- The team implemented a daily review of all catheters, including the indication for the catheter and patient's length of stay, at unit-based shift handovers.
- Monitoring tool was used to be able to collect data and to monitor compliance.
- Collaborated with other team members of the multidisciplinary team such as dietician physician infection control practitioner for a holistic approach to patient care.
- To monitor the effectiveness of our interventions, we established redundant auditing processes to determine compliance with evidence-based recommendations for insertion and care maintenance bundles.



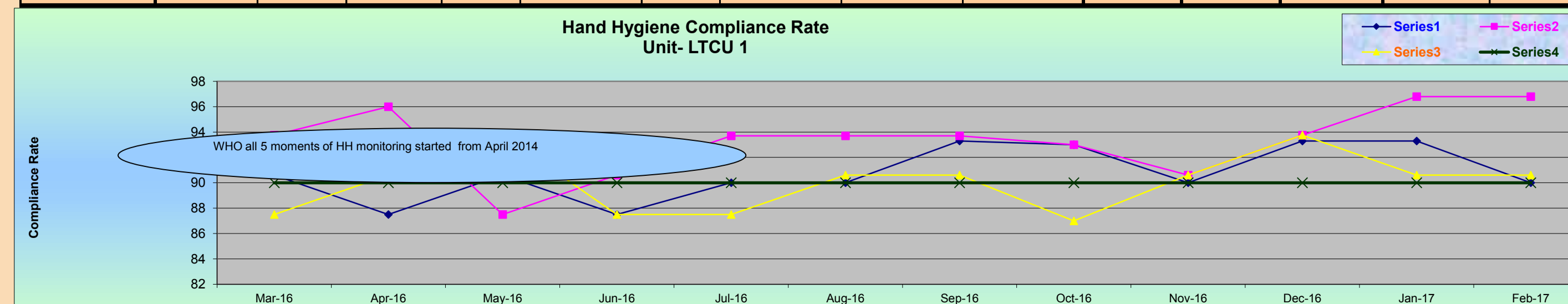
CONSTANT PLAN

EVALUATION

Zero CAUTI for 255 days

Utilizing CAUTI bundle surveillance and monitoring by unit infection control team and infection control link nurse for early detection of CAUTI and hand hygiene compliance.

HCW type	2016												Jan-17	Feb-17
	Jan-16	Feb-16	Mar-16	Apr-16	May-16	Jun-16	Jul-16	Aug-16	Sep-16	Oct-16	Nov-16	Dec-16		
Doctors	90.6	87.5	90.6	87.5	90	90	93.3	93	90	93.3	93.3	90	90	93.3
Nurses	93.75	96	87.5	90.6	93.7	93.7	93.7	93	90.6	93.75	96.8	96.8	91	96.8
Other HCW	87.5	90.6	93.75	87.5	87.5	90.6	90.6	87	90.6	93.75	90.6	90.6	92	93.75
Target	90	90	90	90	90	90	90	90	90	90	90	90	90	90
Overall Rate	90.61667	91.3667	90.61667	88.533	90.4	91.433	92.5333333	91	90.4	93.6	93.56667	92.46667	91	94.6



Implement strict compliance on maintenance bundle and insertion bundle

Continuous monitoring the incidence of CAUTI complication and patient safety through residents log book and OVA reports.

Reinforcement of education by competency validation, peer review and in service education. Maintain 100% compliance in 5 moments of hand hygiene Patient safety is considered first.