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Guardians of the Catheters, Interprofessional Collaboration Reduced CAUTI Rates at PHFH

Dawn Doud

Providence Holy Family Hospital, Spokane, WA

Angela Shemwell

Providence Holy Family Hospital, Spokane, WA

Stephanie Brown

Providence Holy Family Hospital, Spokane, WA

Tobi Bryan

Providence Holy Family Hospital, Spokane, WA

Georgia Gauron

Providence Holy Family Hospital, Spokane, WA

See next page for additional authors

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Authors

Dawn Doud, Angela Shemwell, Stephanie Brown, Tobi Bryan, Georgia Gauron, Tasha Anisimov, Peter Weitzman, Emma Peterson, and Tiffanie Rampley

Dawn Doud, DNP, MSN, RN, NE-BC, PCCN¹; Angela Shemwell, BSN, RN, CCRN¹; Stephanie Brown, BSN, RN¹; Tobi Bryan MSN, RN, CCRN¹; Georgia Gauron MA, BSN RN, CIC, FAPIC¹; Tasha Anisimov MSc, CIC¹; Peter Weitzman, MD¹; Emma Peterson WSU PL BSN Student²; Tiffanie Rampley, PhD, RN²

Background

- Catheter Associated Urinary Tract Infection (CAUTIs) are associated with increased morbidity, mortality, healthcare costs and length of stay, (CDC, n.d.)
- Multidisciplinary teams with varied interventions have successfully reduced CAUTIs (Whitaker et al. 2023)
- In January 2024, CAUTI rates at Providence Holy Family Hospital (PHFH) spiked to 3.41 per 1,000 catheter days; exceeding the benchmarks

Methods

- Formed interprofessional working group
- Reviewed literature
- Developed evidence-based education binders
- Demonstration of proper catheter care for all inpatient unit NA-Cs
- Provider/hospitalist education and SBAR
- Promotion of early catheter removal and nurse driven protocol
- Completion of pre/post tests and CAUTI review modules for nurses

Results

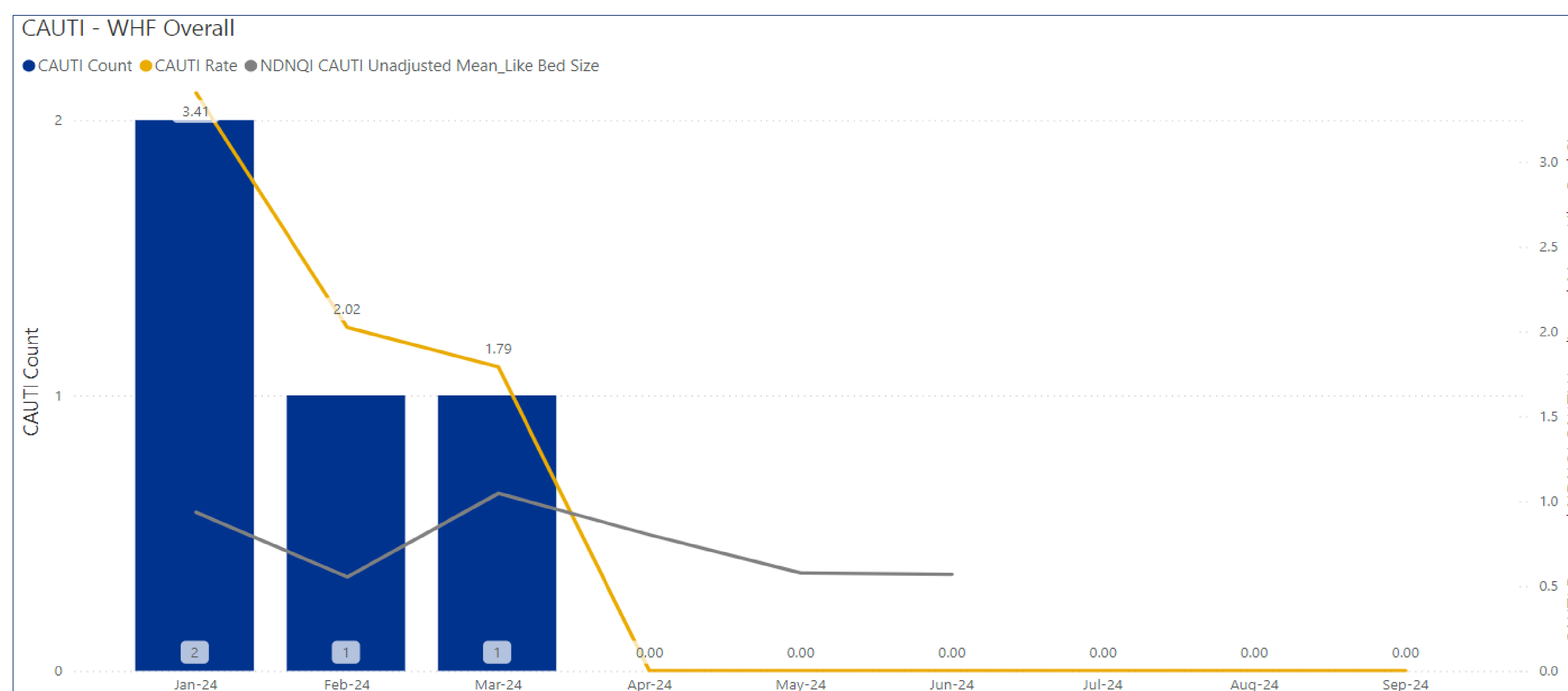
- Nurse education completion rate: 66.1%
- NA-C catheter care observations: 66.7%
- Nurses understanding of appropriate indications for indwelling catheters increased from 58% to 77% evidenced by pre and post quiz results
- 26 inpatient providers and hospitalists educated
- Reduced CAUTI rates from 3.41 to zero with sustained improvement across multiple inpatient units

Discussion

- Reeducation and demonstration decreases overall CAUTI rates
- Interprofessional collaboration and participation within the inpatient units leads to infection prevention

Purpose

- Reduce CAUTI rates across inpatient units
- Utilization of interprofessional collaboration
- Form academic partnership with nursing students for data analysis



Implications for Practice

- Interprofessional collaboration can reduce Healthcare Associated Infections (HAIs)
- Low cost intervention
- Easy to adopt by other facilities

Acknowledgments

- Thank you to the interprofessional teams that reduced CAUTI rates and improved patient outcomes at PHFH

