**Problem**

- Catheter-Associated Urinary Tract Infections (CAUTIs) are the most common Hospital-Acquired Infection in the U.S. CAUTIs account for 50% of all nosocomial infections.
- Front line staff were not consistently practicing evidence-based CAUTI prevention strategies.
- CAUTI occurrences and prevention information were not easily available or frequently communicated to staff.
- CAUTI rates and urinary catheter days at the University of Iowa Hospital and Clinics (UIHC) were greater than the median of peer Academic Medical Centers.

**Goal**

- Create a theme-based CAUTI prevention campaign that includes weekly information sharing.
- Lower CAUTI rate by 10%.
- Decrease hospital costs associated with treated CAUTI by 10%.
- Decrease NHIIN defined CAUTI by 40% to meet our Partnership for Patient program target.

**Methods**

- Real-time Reporting:
  - Days Since Last CAUTI* reports sent to all unit leadership to increase awareness and encourage friendly competition.
  - Quarterly catheter utilization ratio (catheter days/patient days) updates to see if catheter days are truly decreasing and to benchmark our units' utilization across “like” NHIIN units.
  - EPIC report sent out weekly to nurse managers that list active inpatients on their units who have had a Foley catheter in for more than 2 days.
- Routine Analysis:
  - Root Cause Analysis conducted for every CAUTI to identify trends and opportunities.
  - Identify risk assessment opportunities, i.e., patients who are transported with Foley catheters.
- CAUTI “Lunch and Learn” which included lunch and CEU's for attendees, a product fair to show alternative urinary products, brainstorming interventions, and sharing of unit success stories.
- Weekly Education/Recognition:
  - Educational updates sent out to increase awareness on CAUTI prevention bundle elements.
  - Recognition for units with 30, 185, and 365 days without a CAUTI. Photos of winning units shared in house-wide blogs.

**Results**

**Staff Education Campaign**

- FY 2013 Days since last Catheter Associated Urinary Tract Infection (CAUTI) entered into PIU Updated 8/4/2013
- Watch Out for Urinary Infection-Early Intervention

**References**

- Real-time reporting with frequent feedback, targeted education, and a reward system promotes healthy competition and engagement in CAUTI prevention.
- Routine analysis of risk assessment and root cause variables improves the effectiveness of interventions and buy-in from front line staff.
- Weekly education doesn't need to be overwhelming or dull.