St Helens and Knowsley Teaching Hospitals NHS Trust: Catheter Infection Improvement Project*

At St Helens and Knowsley Teaching Hospitals NHS Trust, Senior Nurse, Lisa Sams, and Infection Control Nurse Specialist, Julie Grimes, are leading a catheter infection improvement project that has coincided with the introduction of the Bard® Comprehensive Care Foley Tray, an All in One catheterisation system. The aim of the project was to further reduce catheter-associated urinary tract infection (CAUTI) rates, and the results have exceeded all expectations.

In 2011, an audit took place to test all catheterised patients in the Trust on one day, with results showing a CAUTI rate of 6%. Although 6% is below the national average, the ultimate target is an infection rate of close to zero. Therefore, the team started with an initial goal to halve the Trust’s CAUTI rate from 6% in the 2011 audit, to 3% in 2012 and then continue to reduce the infection rate further.

As part of the project, the Trust continued to develop nurses through education and training. Sessions were facilitated to inform staff regarding the Bard® Comprehensive Care Foley Tray, and the Trust implemented the Urinary Catheter Assessment and Monitoring form (UCAM; originally developed at Winchester and Eastleigh Healthcare NHS Trust and adapted for St Helens and Knowsley Teaching Hospitals NHS Trust). The UCAM form is used to track patients who have had catheters inserted, providing patients with the assurance of receiving on-going catheter care, with monitoring checks 3 times daily.

The All in One Bard® Comprehensive Care Foley Tray was introduced to wards in July 2011 and nurse feedback about the product was immediately positive as they embraced the change of products to improve patient care and provide standardisation across the Trust. The project aimed to continue the improvement of catheterisation competency assessment training. Courses completed throughout 2012 enhanced staff skills and knowledge and assisted in the maintenance and reduction of infection in patients.

Following implementation of these additional measures; the UCAM documentation, competency assessment training and education, and the introduction of Bard® Comprehensive Care Foley Tray, measurement and monitoring the improvements has been embedded into the Trust’s monthly infection Prevention and Control audits. Results from February 2012 audit data show that St Helens and Knowsley Teaching Hospitals NHS Trust has achieved a marked reduction in CAUTI rates from 6% to 1.1%. In addition, the most up-to-date safety thermometer™ monthly audit data for the Trust also supports evidence of a reduced CAUTI, which indicates that less than 1% of patients develop a CAUTI whilst in hospital.

Lisa Sams, said: “This project has been a huge success, reducing infection rates and further improving training, promoting best practice across the Trust.”

Staff involved in the project are keen to share their knowledge and experience with local and national teams to promote a reduction in CAUTIs.

The All in One Bard® Comprehensive Care Foley Tray provides the essential items required for a catheterisation or recatheterisation procedure and is designed to support the drive to reduce catheter associated urinary tract infections (CAUTIs) through encouraging best practice and standardising the care pathway.

* Catheter Infection Improvement Project
Caption: Lisa Sams, Senior Nurse, Nursing Development and Julie Grimes, Infection Prevention and Control Nurse Specialist use the Bard® Comprehensive Care Foley Tray
References
1. Data on file - St Helens & Knowsley Teaching Hospitals NHS Trust

The opinions and clinical experiences presented herein are for informational purposes only. The results from these case studies may not be predictive for all patients. Individual results may vary depending on a variety of patient specific attributes.

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Catheter-associated urinary tract infections (CAUTIs) cause discomfort to patients, increase length of hospitalisation and are costly for the NHS. Although infection control protocols are generally well established in UK hospitals, a greater focus is needed on reducing specific infections such as CAUTIs. In Scotland, for example, infection rates have been reported to UTI for 39% of non-acute hospital-acquired infections.

At Nottingham University Hospitals NHS Trust, Clinical Nurse Specialist and Team Leader for Continence, Amy Cartwright, is leading a new initiative to reduce the number of CAUTIs. The hospitals 2011 Urinary Catherisation audit revealed the need to improve staff knowledge and practice. This need is supported by the Trust’s Commissioning for Quality and Innovation (CQUIN) goals and the Department of Health’s High Impact Action for 'Protection from Infection – urinary tract infections’ and the Commissioning for Quality and Innovation (CQUIN) initiatives and is determined to improve patient outcomes. The area of focus is catheter care and the reduction of catheter-associated urinary tract infections (CAUTIs).

The Plan
- Introduce all in one Bard Comprehensive Care Foley Tray - an All in One catheterisation tray.
- Introduce Bard Medical facilitators to establish the tray, including the ‘Bard’ study day.
- Introduce an educational ‘grab pack’, containing ten key messages on catheter care, use of the Bard Comprehensive Care Foley Tray and high impact interventions.
- Update the Urinary Catheter Assessment and Monitoring (UCAM) form to enhance the documentation of catheter care.
- Work across the Trust to standardise practice.
- Develop a ‘catheter passport’ for all catheterised patients.

Lancashire Teaching Hospitals NHS Foundation Trust: Spotlight on Catheter Care*

Lancashire Teaching Hospitals (LTH) NHS Foundation Trust has embraced the Department of Health’s High Impact Action for ‘Protection from Infection – urinary tract infections’ and the Commissioning for Quality and Innovation (CQUIN) initiatives and is determined to improve patient outcomes. The area of focus is catheter care and the reduction of catheter-associated urinary tract infections (CAUTIs). In 2010, a point prevalence audit at the trust revealed a catheterisation rate of 17% and a CAUTI rate of 3%.

In 2012, a point prevalence audit at the trust revealed a catheterisation rate of 11% and a CAUTI rate of 1.9%.

The team has introduced these changes in the community too, where the UCAM form and passport are also in use. The passport, which was jointly designed with Bard and stays with the patient, details vital patient information (for example, the reason for catheterisation and the date of catheterisation).

Outcomes
The All in One (AIO) Comprehensive Care Foley Tray has been generously well received by staff, and the benefits of the tray have been seen both in the hospital and the community setting, with no increase in costs to the Trust. Table 1 presents the infection rate and number of catheterised patients pre- and post-introduction of the tray.

Table 1. Lancashire Teaching Hospitals NHS Foundation Trust — urinary tract infection and catheterisation rates*

<table>
<thead>
<tr>
<th>Year</th>
<th>Urinary tract infection</th>
<th>Catheterised patients</th>
</tr>
</thead>
<tbody>
<tr>
<td>2010</td>
<td>3.0%</td>
<td>17%</td>
</tr>
<tr>
<td>2012</td>
<td>1.9%</td>
<td>16.6%</td>
</tr>
</tbody>
</table>

* Data from a point prevalence audit in November 2010
** Data from a point prevalence audit in November 2012

Monthly audits of the UCAM forms are being conducted in all clinical areas and a point prevalence audit is conducted annually. Links nurses for catheter care have been identified and are overseeing the practice.

Future Initiatives
The trust recognises that nurses are often best placed to monitor and record catheter care. Following a national pilot led by the Infection Prevention Society, HOODIE* — a urinary catheter removal protocol that aims to reduce the number of days of catheter usage — has been introduced at the Trust. It is expected that HOODIE may lead to even better documentation and a reduction in catheter in situ time.

Sharing knowledge
As Head of Patient Safety, Claire is in an ideal position to push forward infection control initiatives. She is pleased to share the experience at Lancashire Teaching Hospitals NHS Foundation Trust and hopes it will encourage other trusts to review their catheter practice and consider the benefits of implementing the Bard® Comprehensive Care Foley Tray.

The Small Changes, Big Impact Programme*

Example e-learning package access

- In addition, CAUTI prevention and catheter care has been introduced as part of the healthcare assistant (HCA) induction course at Nottingham. This is a three-week training course for newly employed HCAs, and training is also provided for those already working on the wards. Part of this course covers urinary catheter care.

Evaluation:
- The effectiveness of the programme will be evaluated by:
  - Repeat audits by the Trust, with the initial audit used as a benchmark to identify improvements.
  - A nursing dashboard survey (a national monthly survey, which includes urinary catheter management).
  - The ‘Essence of Care’ benchmark scheme – which includes bladder, bowel and continence care.

Sharing knowledge:
- Amy is dedicated to improving patient safety and recognises the importance of sharing best practice. To inform healthcare professionals and managers about the success of the programme, the results will be published at the end of 2013 and a poster designed to share the results both within and outside the Trust. Amy will also use networking opportunities to communicate her findings and hopes that sharing this knowledge will lead to an important change in culture, a better experience and improved outcomes for patients, and less financial burden for hospitals throughout the UK.

* The Small Changes, Big Impact Programme

References
3. Data on file - Nottingham University Hospitals NHS Trust
8. Delivering the NHS Safety Thermometer CQUIN 2012/13 - NHS

Lancashire Teaching Hospitals NHS Foundation Trust: Spotlight on Catheter Care*

* Spotlight on Catheter Care

References
2. Delivering the NHS Safety Thermometer CQUIN 2012/13 - NHS