CAUTI Reduction

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Euclid Hospital

Over 800 employees

Over 600 Licensed Independent Practitioners on Staff

Over 39,000 Emergency Department Visits per year
Euclid Hospital

• Have on site post-acute units including Behavioral Medicine, Skilled Nursing and Acute Rehabilitation

• Average daily census is around 160
Background

• We noted that we had a higher number of CAUTI’s compared to other enterprise hospitals
  – Began to monitor Foley catheter utilization ratios by unit.
  – Consistently above the national average based on the NHSN ratios published in the AJIC journal
  – Whole house reporting
• 2011- 17 CAUTI
• 2012- 19 CAUTI
• 2013- 23 CAUTI * First Theraworx trial
• 2014- 12 CAUTI * Second Theraworx trial
• 2015- 7 CAUTI * Theraworx consistant usage
Early 2013

• Noted that the CAUTI rate was going up despite interventions listed below:
  – Education
  – Poster presentations
  – Product In-services
  – Mandatory Foley insertion in-services
  – Change in policy for peri-care
  – Nurse driven Foley removal protocol July 2015
2013- First Trial

- Researched available products and best practices.
- Chose to begin using the Theraworx product with catheter insertion in the Emergency Dept.
- Theraworx foam was trialed for use twice daily for peri-care and post incontinence care in the ICU and in the Skilled Nursing Units.
- The other nursing units continued to use the Medline peri-wipes, but did increase peri-care to twice daily.
2013- First Trial

• After the 3 month trial, data showed that we did have a decrease in CAUTI but only in areas where Theraworx was used. No area reached zero.

• Problem identified: Because patient locations during care changes frequently (ED-ICU-RNF-SNF), no patient had continual care with the Theraworx product.

• Based on the reduction of CAUTI’s that did occur, Nursing administration agreed to trial the Theraworx product a second time-this time including the whole hospital to ensure that all patients used Theraworx the length of stay.
2014- Second Trial

• In-services provided by Theraworx representatives to staff in May 2014.
• The trial lasted for 3 months (June-August)
• We reached ZERO CAUTI in July, August, September and October.
• After the trial period, we returned to the Medline peri-wipe.
• The annualized cost of product was added to the 2015 budget (in planning)
2015

• CAUTI occurrences began to increase again after the trial ended: Nov-1; Dec-2; Jan-1; Feb-1.

• Administration and Infection Prevention initiated discussions about reinstituting Theraworx in February

• The product was brought back into the hospital, again with in-servicing April/May 2015.

• Theraworx was rolled out house-wide at that time and is part of our standard of care.
Results-2015/2016

- Decision made to return to Theraworx Product
- Theraworx In servicing and product Returned
Discussion

• July and August CAUTI were reviewed. It was determined that patients had peri-care completed 100% of the time. Length of catheterization determined as possible cause.

• Since September of 2015- we are at 6 months with Zero CAUTI (and counting)

• Trials and utilization at other enterprise hospitals underway at this time
Cost savings

<table>
<thead>
<tr>
<th>Annualization of Therworx Cost</th>
<th># of Boxes</th>
<th># of Product</th>
<th>Annualized Cost</th>
</tr>
</thead>
<tbody>
<tr>
<td>Wipes</td>
<td>8</td>
<td>800</td>
<td>$8,318.40</td>
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<tr>
<td>Foam</td>
<td>13</td>
<td>624</td>
<td>$10,917.40</td>
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<tr>
<td>Total</td>
<td></td>
<td></td>
<td>$19,235.80</td>
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</tbody>
</table>

Estimated Cost per CAUTI: $3,664 to $4,823

<table>
<thead>
<tr>
<th></th>
<th>2011</th>
<th>2012</th>
<th>2013</th>
<th>2014</th>
</tr>
</thead>
<tbody>
<tr>
<td>Critical Care</td>
<td>4</td>
<td>8</td>
<td>7</td>
<td>1</td>
</tr>
<tr>
<td>Med-Surg/Post Acute</td>
<td>13</td>
<td>11</td>
<td>16</td>
<td>8</td>
</tr>
<tr>
<td>Total</td>
<td>17</td>
<td>19</td>
<td>23</td>
<td>9</td>
</tr>
<tr>
<td>Estimated Cost per Year</td>
<td>$61,948-$81,991</td>
<td>$69,236-$91,637</td>
<td>$83,812-$110,929</td>
<td>$32,796-$43,407</td>
</tr>
</tbody>
</table>

This does not account for any penalty program benefits (VBP, HAC program)
Conclusions

• Have reached Zero CAUTI for 6 months running
• Nursing staff are engaged in using the product
• Added benefit: can continue to use product after Foley removed to continue to balance pH and heal any irritation or micro abrasions in peri-area
• Cost savings