

Team approach reduces urinary tract infections in rehab patients

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Nurses, occupational and physical therapists, case managers and education staff, all working together at a 300-bed Nebraska rehabilitation hospital, have successfully implemented a team approach to dramatically reduce infections from urinary catheters, the most prevalent type of infection acquired in healthcare settings.

The interdisciplinary team at Madonna [Rehabilitation Hospital](#) in Lincoln, one of the largest free-standing rehabilitation hospitals in the country, reduced catheter associated [urinary tract infections](#) (CAUTIs) by 89 percent over a 14-month period according to an abstract presented today at the 38th Annual Educational Conference and International Meeting of the Association for Professionals in Infection Control and Epidemiology (APIC).

Led by infection preventionist Kristina Felix, BA, RN, CRRN, CIC, the team worked to decrease the use of catheters, which are a known risk factor for UTIs, discontinuing their use unless medically necessary. In cases where urinary catheters were required, the team educated nursing staff, therapy staff, family members and patients on proper care to reduce the chance of infection.

When the project was initiated in February 2010 the CAUTI prevalence rate was 36.6 percent, but dropped to 6.6 percent three months later. The original pilot concluded in April 2011.

Felix's team identified underlying reasons for catheter use when medical necessity was in question. Contributing factors included patients admitted to rehabilitation settings from acute care facilities with catheters in place, and patients whose families viewed catheters as a more convenient way to manage incontinence. The task force improved bladder management protocols and standards, balancing the medical requirements of the patient with the need for patients to be infection-free, continually re-assessing the appropriateness

for each catheter. They utilized a "decatheterization protocol," to safely remove medically unnecessary catheters and improve the health of the patient.

"We looked at every facet of bladder management, including better ways to assist patients to the bathroom in a timely manner, different types of commodes and engaging the entire care team in the bladder management processes," Felix said. "We implemented education with all members of the care team, including patients and family members, so that everyone understood the process and the benefit to the patient of reduced UTIs."

Felix estimated that their program prevented up to 30 UTIs per month and saved the facility about \$1,000 per infection avoided. There were no additional costs associated with implementing these interventions.

"CAUTIs are the most frequent site of healthcare-associated infections," said APIC 2011 President Russell N. Olmsted, MPH, CIC. "Madonna Rehabilitation Hospital deserves recognition for their outstanding success in improving the safety of the [patients](#) served at their facility."

Provided by Association for Professionals in Infection Control

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