Improving the flow of urinary catheter care in St Michael's M. Cooney, Urology CNS, St. Michael's Hospital, Dun Laoghaire, Co. Dublin

Background

An audit in 2008 highlighted poor documentation of urinary catheter care. A re-audit of practice in 2011.



CATHETER CARE AUDIT

41.70%

Reason catheter still in place

Aims

- Improve catheter care documentation and therefore improve catheter care
- Ensure patient safety goals met (JCI 2010)
- Prevention of catheterisation associated urinary tract infectior (CAUTI)

Methodology

Retrospective study of 12 patient records

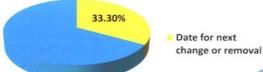
Audit Tool: Questionnaire based on Catheter Checklist and Catheter Care Plan adapted from the accredited form from the SIGN, CAUTI bundle, Health Protection Scotland 2006

Findings & Discussion:

Catheter insertion date documented - 100%
Drainage bag change was documented - 75%
The form did not capture some aspects of catheter care
Urology Link Nurses provided continuous monitoring of the new
Catheter Care Plan.

The Urology CNS provided education sessions





Conclusions & Recommendations

Revised form to include bullet points for

- Date catheter inserted or changed .../.../...
- If not removed, please state reason and sign
- Change Urine Drainage Bag every 7 days, 5 days if Haematuria/infected
- Please document daily review details and sign

Two extra columns were added to the Care Plan

(a) Date of next Draining bag change due

(b) Hunlane - Urethral Orifice or Sueva Public S

References

St. Vincent's Healthcare Group (2009) Infection Prevention and Control Manual, Guideline for Prevention of Infections associated with the Insertion and Maintenance of Indwelling

SARI (2011) Guidelines for the Prevention of Catheter associated urinary tract infection (CAUTI) www.hpsc.ie

Scottish Intercollegiate Guideline Network, CAUTI bundle, Health Protection Scotland (2006) www.sign.ac.uk