



CAUTI Baseline Prevention Practices Assessment Tool For States Establishing HAI Prevention Collaboratives Using ARRA Funds

The attached example tool and questions are being sent to state health departments for use in your Prevention Collaborative hospitals to assist you in facilitating your shared learning, communication, and feedback efforts. We hope that you will consider administering these 37 questions in each of your participating collaborative hospitals as a way to evaluate the status of the catheter-associated urinary tract infection (CAUTI) control efforts in your state. It also will help you understand what is being done in your state as you develop implementation strategies and determine next steps. The results from these baseline assessment questions can be used to measure practice change(s) as well as to determine the extent to which targets are being met and the effectiveness of outcomes being achieved. The results can and should be shared with members of your multidisciplinary advisory group and participating prevention collaborative stakeholders, partners, and hospitals as an important piece of feedback.

IMPORTANT POINTS TO NOTE:

- Questions/assessment tool should be completed by a member of each participating collaborative hospital's infection control program
- The questions should take no longer than five to ten minutes to complete
- States are encouraged to administer these questions at more than one time point in their Collaborative as part of their evaluation efforts (i.e., baseline [at start of Collaborative] and then six months later)
- States and Collaboratives are encouraged to add additional questions to supplement the 37 example questions as appropriate
- The responses/results to questions can be used both as a "conversation starter" in Collaborative meetings and as a way to sustain momentum among participants (i.e., to learn what works and what does not work)
- The responses/results also can be used to track progress and changes among Collaborative hospitals as well as between states

If you have any questions, please feel free to contact your CDC Prevention Liaison – we are glad to consult on the results and provide technical assistance when needed.



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Catheter-associated Urinary Tract Infection (CAUTI) Baseline Questionnaire

Please complete the following background questions regarding your facility's current status.

1. What is the total number of staff currently working in infection control at your facility? Please describe using full-time equivalents of people working directly in infection control, do not include support staff (for example, if a facility had one full-time person and one half-time person, this would equal 1.5 staff members)._____
2. Currently, how many active acute care hospital beds does your facility have? _____
3. Currently, how many active adult Intensive Care Unit beds (ICU) does your facility have? _____
4. Currently, how many active pediatric beds (including nursery, NICU beds, etc.) does your facility have? _____
5. Currently, how many post-acute care (such as rehabilitation or assisted living) beds does your facility have? _____
6. Is your facility a teaching facility (i.e., your facility has physicians-in-training and/or nurses-in-training providing care to patients)?
Yes
No

Please indicate whether your facility provides the following with respect to urinary catheters:

	Yes, hospital-wide	Yes, service or unit-specific	No
7. Guidelines on appropriate indications for urinary catheter use			
8. Guidelines on proper techniques for urinary catheter insertion			
9. Guidelines on proper techniques for urinary catheter maintenance			
10. System of documenting urinary catheter insertions			
11. System of documenting urinary catheter removals			
12. Regular in-service training for appropriate healthcare personnel on techniques and procedures for urinary catheter insertion, maintenance, and removal			
13. Readily available supplies necessary for aseptic urinary catheter insertion			



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For each item below, please check the answer that best applies, on a scale from Never to Always, regarding urinary catheter policies and practices at your facility.

	Never (1)	Rarely (2)	Sometimes (3)	Often (4)	Always (5)
14. Urinary catheters used for management of incontinence					
15. Urinary catheters removed postoperatively within 24-48 hours unless there are appropriate indications for continued use					
16. Alternatives to indwelling catheters (e.g., intermittent catheters, condom catheters) used when appropriate					
17. Urinary catheters inserted using aseptic technique and sterile equipment					
18. Portable bladder ultrasounds used to assess urine volume					
19. Urinary drainage systems with pre-connected, sealed catheter-tubing junctions used					
20. Catheters changed at routine, fixed intervals					
21. Nitrofurazone-releasing catheters used					
22. Silver alloy catheters used					
23. Systemic antimicrobial prophylaxis for urinary catheters used					
24. Urinary drainage bags kept below level of bladder					
25. Urinary drainage bags instilled with antiseptics or antimicrobials					
26. Urinary catheters disconnected from collecting systems (e.g., for irrigation)					
27. Screening for asymptomatic bacteriuria (ASB) performed					
28. CAUTI rates fed back to providers					
29. Adherence to hand hygiene policies measured in at least one patient care area					
30. Adherence to proper aseptic insertion of urinary catheters measured in at least one patient care area					
31. Adherence to documentation of catheter insertion and removal dates measured in at least one patient care area					
32. Adherence to documentation of indication for urinary catheter placement measured in at least one patient care area					



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The following questions ask about current specific CAUTI prevention practices at your facility. Please complete each question as appropriate at this time.

33. How great a priority is the control and prevention of CAUTI at your facility? Please indicate how much you agree or disagree with the following statement: **The control and prevention of CAUTI is a priority at my facility.**

- Strongly agree
- Agree
- Neither agree or disagree
- Disagree
- Strongly disagree

34. Who inserts urinary catheters at your facility (please check all that apply)?

- RNs
- LPNs
- Nurse aides
- Physicians
- Medical students
- Other (please specify): _____

35. Is surveillance for CAUTI performed at your facility?

- Yes
- No

35a. If YES, where is surveillance performed?

- Hospital-wide
- Unit-specific (specify unit[s]): _____

36. Is the National Healthcare Safety Network (NHSN) used for CAUTI surveillance?

- Yes
- No

36a. If NO, are CDC/NHSN surveillance definitions for CAUTI used?

- Yes
- No

37. Are any quality improvement (QI) programs for CAUTI prevention in place at your facility (please check all that apply)?

- Alerts or reminders for removing unnecessary catheters
- Guidelines or algorithms for appropriate perioperative catheter management
- Multidisciplinary urinary catheter "rounds"
- Protocols for nurse-directed removal of unnecessary catheters
- Stop orders for urinary catheters
- Other (please specify): _____
- None



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