

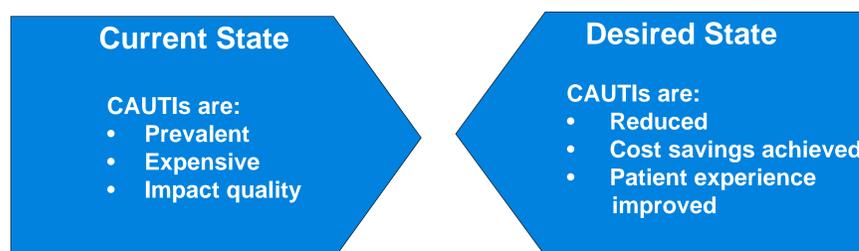
California Health Improvement Project (CHIP)

Leveraging an Integrated Health Care System to Improve Quality of Care by Reducing Catheter Associated Urinary Tract Infections (CAUTI)

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Problem Statement and underlying causes

Catheter Associated Urinary Tract Infections are prevalent and cause significant morbidity and mortality in the United States. Additionally, the economic consequences of these infections are significant. The risk of catheter associated urinary tract infections increases with prolonged catheter use, improper insertion technique, inadequate care of the catheter and patient hygiene.



Project Description

A multi-disciplinary inter-regional CAUTI task force was convened to review and improve current practices and products, and standardize CAUTI Prevention efforts across the Kaiser Permanente (KP) organization.

Goal and Objectives

Goal:

1. To adopt and share regional best practices on CAUTI prevention and minimize clinical care variation across the KP facilities
2. To decrease the volume of CAUTI cases per year by 20% while improving patient care experience

Output-oriented Objectives:

1. Establish a multidisciplinary CAUTI reduction task force representing all hospital based regions by January 2015
2. Transition from local/regional CAUTI prevention guidelines to a national prevention guideline by April 2015
3. Align CAUTI prevention guideline recommendations with the Electronic Medical Record (EMR) content and reminders

Outcome-oriented Objectives:

1. Adopt and implement KP National CAUTI prevention guideline across the organization by April 1st, 2015
2. Reduce the volume of CAUTI cases in Intensive Care Units (ICU) by 20% within 12 months
3. Reduce ICU hospital catheter days by 20% within 12 months through timely removal of urethral catheters
4. Create EMR based reminders for urinary catheter insertion indications as well as timely removal of catheters

Outputs & Outcomes

Outputs Achieved

1. A multidisciplinary KP National CAUTI Reduction Team was established in January 2015
2. The National CAUTI prevention bundle guideline was updated, adopted and implemented by all hospital based regions in March 2015
3. The KP National CAUTI Reduction Team received a \$50,000 Lokahi Grant to review CAUTI data and facilitate sharing best practices across all hospital based regions

Outcomes Achieved

1. Transition from staff reminders to EMR alerts is in process
2. Southern California region will begin implementing EMR recommendations in August 2016 with other regions to follow within a year
3. All clinicians will document clinical necessity for placing a urinary catheter when an order is placed

National (HI,NW,NCAL, SCAL)	2014	2015	Difference
ICU CAUTI rate (per 1000 catheter days)	1.99	1.73	13% Reduction
# Infections	249	184	26% Reduction
# Catheter Days	116,000	108,000	7% Reduction

National CAUTI Prevention Summit in June 2016



Lessons Learned

- An in-depth understanding of the problem is critical prior to developing an improvement plan for CAUTI prevention.
- Take advantage of technology and EMR to reduce variation in care practice and improve compliance with CAUTI reduction recommendations.
- A multidisciplinary collaborative approach is critical to ensure accountability, engagement and patient centered care.

About My Organization

Kaiser Permanente is an integrated health care system serving about 10.5 million members across 8 geographic regions. Over the last 60 plus years, the organization has transformed into a large scale, self sustaining enterprise. In addition to providing high quality care for existing conditions, there has been a significant emphasis on member wellness, education and screening studies. Since the introduction of KP HealthConnect, EMR system, all clinicians at a given region have access to member records at any given time and can coordinate care to reduce errors and duplication.

Contact Me

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