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The role of nurses in reducing UTIs

Urinary tract infections make up 40% of hospital-acquired infections, and the vast majority are caused by indwelling urethral catheters. **Hartmann** speaks to Jeannette Verkerk, a clinical nurse specialist in urology/andrology in the Netherlands and member of the European Association of Urology Nurses board, explains how hospitals can make sure that nursing staff follow good practice to minimise Catheter Associated Urinary Tract Infection (CAUTI).

Catheter Associated Urinary Tract Infection (CAUTI) is a major cause of hospital-associated infections. How can correct insertion and maintenance of catheters reduce CAUTI?

Jeannette Verkerk: CAUTI can cause higher mortality rates and longer hospital stays as a result of comorbidities such as secondary bloodstream infection resulting from a urinary tract infection (UTD). Generally, it is estimated that 69% of CAUTI events are avoidable. Aside from adherence to guidelines, there are two main factors in reducing CAUTI rates. One is that the insertion of a catheter needs to be carried out using an aseptic non-touch technique (ANTT), including disinfecting hands effectively. The second is that catheter maintenance needs to be performed carefully to prevent traction and to avoid disconnecting the bag from the catheter.

understanding of, and attitude towards, CAUTI prevention is essential for the safe practice of urinary catheter care. The most important signs and symptoms of CAUTI are fever (>38°C), bladder symptoms or dysuria, lower back pain, feeling ill and a positive urine culture of >100.000 CFU/ml.

How can education and training improve nurses' ability to minimise CAUTI through the correct insertion and maintenance of catheters?

Education and training are the most important elements of prevention of CAUTI. Ivrology nurses are familiar with the signs and symptoms of CAUTI, but other specialised nurses are often not familiar, or not familiar, or not familiar, or not familiar, or not familiar on the familiar, is to keep asking the question: Is this catheter still needed? Is there a good reason to keep it in place? Nurses can be educated through CPD e-learning sessions,

catheter bag too frequently. The European Association of Urology Nurses (EAUN) guideline on indwelling catheters advises avoiding unnecessary disconnection of a closed drainage system, but if it does occur, the catheter and collecting system must be replaced using aseptic technique and sterile equipment. Bags with an anti-reflux valve are used to prevent bacteria from getting to the bladder. The best way to avoid CAUTI is to avoid inserting a catheter altogether. If a catheter is in place, however, then the reason for the catheter should be reviewed daily.

Protocols and guidelines exist for minimising CAUTI. To what extent is CAUTI caused by a failure to adhere to these?

It's not possible to put numbers on this. If guidelines are not followed, there is a bigger risk of CAUTI developing, I recommend following the EAUN guideline, "Catheterisation Indwelling catheters in adults", which is used in the webinar on CAUTI organised by ESNO, the international organisation representing the interests of specialist nurses in Europe. This guideline includes a chapter dedirated to CAUTI.

Can you explain the role of nurses in identifying signs and symptoms of CAUTI?

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Nurses see patients more than any other health care professional. They play a primary role in urinary catheter management and CAUTI prevention through the insertion and maintenance of urinary catheters. Adherence to guidelines, aseptic insertion of a catheter and avoidance of disconnection of the bag from the catheter are the most important ways to prevent CAUTI.

Nurses are also the first to identify signs and symptoms of CAUTI. Their at the annual nursing congress and through webinars. But CAUTI prevention should also be taught in basic nursing training.

What are the key preventive elements that nurses need to adopt to prevent CAUTI?

Aseptic Non-Touch Technique (ANTT) is the key preventive element that nurses can use. ANTT is an international set of principles designed to standardise practice, support health care workers to practise safely and efficiently, and increase patient safety. It is important to insert a catheter in an aseptic way, and not to change the

How can hospitals make sure both that protocols and guidelines are kept up to date and adhered to?

Use simple cards that summarise the guidelines. This makes them easy to memorise. Review protocols every two to three years, and make sure they are in keeping with the latest national or international guidelines. Carry out audits using certified internal auditors to check adherence to protocols and guidelines.

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