PERIOPERATIVE FOLEY REMOVAL PROJECT USING RAPID CYCLE IMPROVEMENT AND LEAN METHODOLOGY

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Background Information: The insertion of a Foley catheter is a common intervention when clinically indicated. Patients with prolonged use of a Foley catheter are at risk to develop a catheter associated urinary tract infection (CAUTI). Prompt removal of non-clinically necessary Foley catheters has been identified as an effective measure for decreasing the incidence of CAUTIs. Initial data showed 32% of post-surgical patients were transferred from PACU to nursing units with a Foley catheter present.

Objectives of Project: By the end of fiscal year 2015, data showed a slight improvement with 28% of post-surgical patients transitioning to nursing units with Foley catheters. The aim of the project was to decrease the number of patients with Foley catheters from 28% to 24% by identifying and verifying the appropriateness of catheter usage and discontinuing Foley catheters in OR and PACU.

Implementation: The team examined catheter usage of specific surgical procedures, then identified opportunities for improvement, and implemented action plans using rapid cycle improvement and lean methodology. The PACU data collection tool was revised to include the presence or absence of Foley catheters and staff education was implemented. Daily progress was checked by tracking the number of patients with Foley and number of Foley's removed in PACU. Data was shared with staff in daily huddles. The scope of this project was extended to the OR team and a perioperative nurse driven process for Foley insertion and removal was developed. The OR team included Foley removal as part of the surgical safety checklist. A drill down for missed opportunities of Foley removal was addressed with 1:1 staff education.

Statement of Successful Practice: By the end of fiscal year 2016, data showed a 4% reduction in the number of patients transferring from PACU to nursing units with a Foley catheter present.

Implications for Advancing the Practice of Perianesthesia Nursing: This project required stakeholders at all levels of care to engage in collaboration, partnership, clear communication and to understand the impact of CAUTI to the patient. Active monitoring of Foley catheter utilization and early removal are paramount to the prevention of hospital acquired infections.