

Catheter-associated Urinary Tract Infection (CAUTI)
Targeted Assessment for Prevention (TAP) Facility Assessment Tool

Notes for the Respondent:

- This assessment is meant to capture your *awareness and perceptions of policies and practices* related to catheter-associated urinary tract infection (CAUTI) prevention.
- Responses should refer to what is *currently* in place at the facility or unit in which the assessment is being administered.
- Please use the comment boxes to elaborate and capture information as needed - such detailed comments may help focus additional drill down opportunities and next steps.

Facility Name or ID: _____

Date of Assessment: _____

Unit Name or ID: _____

Unit Type:

- | | | | |
|--|-------------------------------------|--|--------------------------------|
| <input type="checkbox"/> Med/Surg (Ward) | <input type="checkbox"/> ED | <input type="checkbox"/> Facility Wide | <input type="checkbox"/> Other |
| <input type="checkbox"/> ICU | <input type="checkbox"/> Pediatrics | <input type="checkbox"/> N/A | |

Title or role of person completing tool:

- | | | |
|---|---|--|
| <input type="checkbox"/> Nurse | <input type="checkbox"/> Physician | <input type="checkbox"/> Infection Prevention |
| <input type="checkbox"/> Nurse – Unit Manager or above | <input type="checkbox"/> Physician – Resident/Fellow | <input type="checkbox"/> Quality |
| <input type="checkbox"/> Certified Nurse Assistant / Patient Care Assistant / Patient Care Tech | <input type="checkbox"/> Physician – Administrative Leadership | <input type="checkbox"/> Ancillary Service Staff (e.g., radiology tech, PT/OT, respiratory therapy, food |
| <input type="checkbox"/> Nurse Practitioner | <input type="checkbox"/> Physician Assistant | |
| <input type="checkbox"/> Nurse Educator | <input type="checkbox"/> Administrative Leadership, Please Specify: _____ | <input type="checkbox"/> Other, Please Specify: _____ |

Do you provide direct patient care? Yes No

Years of experience at facility: _____

During which shift do you primarily work? Day Evening Night Other, Please Specify: _____

I. General Infrastructure, Capacity, and Processes

1. Does your facility's senior leadership actively promote catheter-associated urinary tract infection (CAUTI) prevention?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown
2. Is unit-level leadership involved in CAUTI prevention?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown
3. Does your facility currently have a team/workgroup focusing on CAUTI prevention?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown
4. Does your facility have unit-based nurse champions for CAUTI prevention?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown
5. Does your facility have a physician champion for CAUTI prevention?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown
Comments: (Please specify question number as applicable)	

Training	
6. Is <i>training</i> on aseptic technique for urinary catheter insertion provided at least once per year for all personnel with this responsibility?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown
7. Is a <i>knowledge assessment</i> (e.g., quiz, test) on aseptic technique for urinary catheter insertion conducted at least once per year for all personnel with this responsibility?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown
8. Is a <i>skills assessment</i> (i.e., personnel demonstration of tasks) on aseptic technique for urinary catheter insertion conducted at least once per year for all personnel with this responsibility?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown
9. Is <i>training</i> on urinary catheter maintenance provided at least once per year for all personnel with this responsibility (e.g., aseptic emptying of drainage bag, maintaining a closed drainage system, maintaining unobstructed urine flow)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown
10. Is a <i>knowledge assessment</i> (e.g., quiz, test) on urinary catheter maintenance conducted at least once per year for all personnel with this responsibility?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown
11. Is a <i>skills assessment</i> (i.e., personnel demonstration of tasks) on urinary catheter maintenance conducted at least once per year for all personnel with this responsibility?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown
Comments: (Please specify question number as applicable)	

I. General Infrastructure, Capacity, and Processes (Continued)

Training (Continued)	
12. Is <i>training</i> on use of bladder scanners provided at least once per year for all personnel who use them?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown
13. Is a <i>knowledge assessment</i> (e.g, quiz, test) on use of bladder scanners conducted at least once per year for all personnel who use them?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown
14. Is a <i>skills assessment</i> (i.e, personnel demonstration of tasks) on use of bladder scanners conducted at least once per year for all personnel who use them?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown
15. Is <i>training</i> on the placement of the drainage bag during transport provided at least once per year for all personnel that may transport patients, including ancillary personnel?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown
Comments: (Please specify question number as applicable)	

Audits and Feedback	
*Definitions: Audit is defined as monitoring (typically by direct observation) and documenting healthcare personnel adherence to facility policies. Feedback may include a summary of how well personnel performed their job tasks.	
16. Is use of indwelling urinary catheters <i>audited</i> (monitored) to ensure appropriate indications are present?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown
17. Is <i>feedback</i> on appropriate indications for indwelling urinary catheters provided to personnel?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown
18. Is aseptic technique for urinary catheter insertion <i>audited</i> (monitored) for all personnel with this responsibility?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown
19. Is <i>feedback</i> on aseptic technique for urinary catheter insertion provided to all personnel with this responsibility?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown
20. Are urinary catheter maintenance procedures <i>audited</i> (monitored) for all personnel with this responsibility?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown
21. Is <i>feedback</i> on urinary catheter maintenance procedures provided to all personnel with this responsibility?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown
22. Is <i>feedback</i> provided to all healthcare personnel on: A. CAUTI rates and/or standardized infection ratios (SIR)? B. Indwelling urinary catheter device utilization (e.g., device utilization ratios (DUR), standardized utilization ratios (SUR))?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown
Comments: (Please specify question number as applicable)	

II. Appropriate Indications for Indwelling Urinary Catheter Insertion

	Never	Rarely	Sometimes	Often	Always	Unknown
1. Do ordering providers document an indication for indwelling urinary catheters?						
2. Do ordering providers use indwelling urinary catheters for appropriate indications?						
3. Do personnel use alternative strategies for management of urinary incontinence (e.g., external catheters, bedside commodes, scheduled toileting, garments/pads, when appropriate)?						
4. Do personnel use bladder scanners to confirm urinary retention before placing or replacing urinary catheters?						
5. Do personnel use bladder scanners with intermittent catheterization for management of postoperative urinary retention?						
6. Does your facility provide instructions/protocols for personnel to act upon bladder scanner results?						
7. Are patients and/or families educated on appropriate indications for and care of urinary catheters?						
8. When receiving patients with indwelling urinary catheters from the Emergency Department (ED), is the indication for the indwelling urinary catheter communicated upon transfer? <input type="checkbox"/> <i>Do not receive patients from the ED</i>						
Comments: (Please specify question number as applicable)						

III. Aseptic Indwelling Urinary Catheter Insertion

	Never	Rarely	Sometimes	Often	Always	Unknown
1. Are all supplies necessary for urinary catheter insertions packaged together (e.g., in a kit or bundle)?						
2. Are supplies/kits for aseptic indwelling urinary catheter insertion available in all patient care locations where urinary catheters are inserted?						
3. Do personnel receive instruction when new urinary catheter equipment or protocols are introduced?						
4. Are only personnel who are trained on the correct technique for aseptic insertion given the responsibility for inserting urinary catheters?						
5. Are at least two personnel present for indwelling urinary catheter insertions – one to perform the insertion and the other(s) to observe the procedure to ensure aseptic technique (e.g., using a checklist) and assist as needed?						
6. Are insertion procedures documented (e.g., date, person[s] performing procedure, complications)?						
7. Are urinary catheters secured to prevent movement and urethral traction?						
Comments: (Please specify question number as applicable)						

IV. Indwelling Urinary Catheter Maintenance

	Never	Rarely	Sometimes	Often	Always	Unknown
1. Does your facility utilize pre-connected, sealed urinary catheter drainage systems?						
2. Are the urinary drainage systems kept closed to maintain sterility (e.g., open irrigation of the urinary catheter is not performed)?						
3. Is an unobstructed urine flow maintained from the catheters to the drainage bags?						
4. Are drainage bags kept below the level of the bladder at all times?						
5. Are drainage bags kept off the floor?						
6. Are drainage bags emptied using a separate, clean collecting container for each patient?						
7. While emptying drainage bags, do personnel make sure that the draining spigot does not touch the collecting container?						
Comments: (Please specify question number as applicable)						

	Never	Rarely	Sometimes	Often	Always	Unknown
8. Are indwelling urinary catheters removed:						
A. When there are signs and/or symptoms of infection?						
B. When there are signs and/or symptoms of obstruction (e.g., leakage)?						
C. When the closed system is compromised (i.e., disconnection)?						
Comments: (Please specify question number as applicable)						

V. Timely Removal of Indwelling Urinary Catheters

	Never	Rarely	Sometimes	Often	Always	Unknown
1. Does your facility maintain a daily list of patients with indwelling urinary catheters?						
2. Are patients with indwelling urinary catheters reviewed daily to assess for their continued need?						
3. Does your facility use alerts, reminders, or stop orders for indwelling urinary catheter removal?						
4. Do physicians respond to alerts or reminders by ordering removal of unnecessary urinary catheters? <input type="checkbox"/> Alerts, Reminders, or Stop Orders Not Used in Facility						
5. Do nurses respond to alerts or reminders by removing unnecessary urinary catheters or speaking with the physician? <input type="checkbox"/> Alerts, Reminders, or Stop Orders Not Used in Facility						
6. Are removal procedures documented (e.g., date, person performing procedure, complications, criteria for removal)?						
Comments: (Please specify question number as applicable)						

VI. Appropriate Urine Culturing Practices

	Never	Rarely	Sometimes	Often	Always	Unknown
1. For patients with a urinary catheter, are signs and/or symptoms of a urinary tract infection present when a urine culture is ordered (i.e., for the purpose of making a clinical diagnosis of a urinary tract infection)?						
2. If a urine culture is ordered, is a urinalysis ordered at the same time?						
3. For patients with a urinary catheter, are urine cultures collected aseptically (using a sterile syringe/cannula adapter after cleansing the port with a disinfectant)?						
4. When urine is collected for culture from a patient with a urinary catheter, is the urine aspirated from the needleless sampling port (not from the drainage bag)?						
5. Are urine culture specimens transported to the lab for testing promptly following collection (i.e., not allowed to sit unrefrigerated for prolonged periods of time)?						
Comments: (Please specify question number as applicable)						

Additional Comments/Observations (Please specify/describe in detail):