**CAUTI Data Collection Practices Survey - Texas Department of State Health Services**

**Hospital Name: \_\_\_\_­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Name of Auditor:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Site Visit Date:** \_\_\_/\_\_\_/\_\_\_

1. Were there any changes in the number and/or organization of ICUs during the reporting period? If yes, please describe and indicate how those changes were reflected in reporting to NHSN.
2. Which staff members are involved with the collection of ICU **patient** days?
3. Identify the method used to collect ICU **patient** days:

[ ]  At the same time each day, count the number of patients on the unit (e.g. midnight census)

[ ]  Count the total number of patients that were cared for in the ICU on a given day

[ ]  Count the number of admissions for the day

[ ]  Other (specify):

Comments:

1. How are ICU **patient** dayscollected?

[ ]  Electronically – collected by electronic medical record

[ ]  Manually collected by Infection Prevention staff

[ ]  Manually collected by staff in ICU location

[ ]  Other (specify)

Comments:

1. Which staff members are involved with the collection of ICU **foley catheter** days?
2. Identify the method used to collect ICU **foley catheter** days:

[ ]  At the same time each day, count the number of patients on the unit with a foley catheter

[ ]  Count the total number of foley catheters that were maintained in the ICU that day

[ ]  Other (specify):

Comments:

1. How are ICU **foley catheter days** collected? (verify documentation):

[ ]  Electronically – collected by electronic medical record

[ ]  Manually collected by Infection Prevention staff

[ ]  Manually collected by staff in ICU location

[ ]  Other (specify)

Comments:

1. For those with electronically collected foley catheter days, when was the last time the data was validated and what were the results? Was this within +5% of manual collection?
2. Who counts patient days and foley catheter days when the “regular” data collector(s) is/are not working?
3. What do you do if no one collected this information over a weekend/holiday or for another reason?
4. Do staff count suprapubic and condom caths as indwelling foley catheters?

[ ]  Yes

[ ]  No

1. If a patient has a foley removed in the AM and a new one inserted in the PM, how many foley days are counted for this day?

[ ]  Two

[ ]  One

[ ]  None

1. Are foley catheters that are irrigated counted in foley days?

[ ]  Yes

[ ]  No

1. How are CAUTIs identified? Explain the process involved in case identification. (Example: daily IP gets positive urine culture results from the lab. The IP conducts chart review for those that meet CDC criteria.)
2. Do you consider asymptomatic urinary tract infections for reporting?

[ ]  Yes

[ ]  No

1. When recording fever for purposes of NHSN reporting, do you use the temperature documented in the patient’s medical record or do you perform a conversion of temperature based on route of collection?
2. In cases of ambiguity, who makes the final decision regarding the determination of whether an infection is a CAUTI?
3. Does anyone, other than the facility IP(s), have final say as to whether an infection should or should not be reported as an HAI in NHSN? If so, what is their training/background in regards to NHSN surveillance definitions?
4. Which staff member(s) is/are responsible for entering CAUTI data into NHSN?
5. What data quality control activities are performed on the CAUTI event and/or denominator data?
6. What do you do when you identify an error in data that has already been reported to NHSN?
7. Do you provide any ongoing or periodic training for staff involved in CAUTI data collection and reporting? Including NHSN training for the infection preventionist. If so, describe the training activities and frequency of training.
8. What steps have you taken to prevent and/or reduce the risk of patients developing CAUTI in your facility? What have been the biggest challenges/successes?
9. In preparing for this audit, what challenges (if any) did you face in obtaining the data for this audit?