Ovid® Synthesis
Clinical Evidence Manager

Wolters Kluwer

Case Study:
Reducing CAUTI Rate

How a hospital expedited its "Reducing CAUTI Rate" quality improvement project using Ovid® Synthesis Clinical Evidence Manager

The Challenge

The hospital's infection rate for foley catheter-associated urinary tract infections (CAUTI) inpatients, including ICU patients, was 5% for July through December 2020 — above the 50th percentile in the USA. The nursing staff believed that patients were catheterized too long because physicians were not ordering catheter removal when conditions warranted.

The National Database for Nursing Quality Indicators (NDNQI) quarterly data for medical-surgical units in the first quarter of 2021 indicated 10.04 infections/1,000 catheter days. Therefore, a team decided to launch a QI project to answer this evidence-based question: For inpatients with a foley catheter, what are considerations for a nurse-driven protocol for earliest removal?

The QI team did not know if such protocols existed, and needed an efficient way to conduct its project. Without a single platform to manage the entire process, the team members might duplicate previous research, find it difficult to share information and drafts, and wonder if they were accessing the highest quality research data on which to base their recommendation. A disjointed effort would take too much time and perhaps result in findings that would never have an impact on the hospital's high CAUTI rate.

The team needed a solution to organize and simplify this CAUTI rate reduction project from beginning to end while enhancing the hospital's overall clinical quality improvement program.

The Solution: Ovid® Synthesis Clinical Evidence Manager

The QI team decided to use Ovid® Synthesis Clinical Evidence Manager because it was easy to access and learn, centralized its QI project, and eliminated separate workstreams. Every step could be monitored on the project dashboard by all team members, with an executive-level dashboard offering senior management a snapshot of this project and all ongoing and historical projects.

Like an additional member of the team, Ovid® Synthesis Clinical Evidence Manager guided the users to be more efficient, with reminders and to-do lists. It allowed team members to access and comment on projects through every stage.

The team saved time with the integrated literature search, which allows searching without leaving the application. It was able to identify findings in the published literature applicable to the CAUTI problem and relevant interventions.

Ovid® Synthesis Clinical Evidence Manager offers a single, cohesive view of projects across the institution.

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Several full-text articles from MEDLINE® and Ovid® subscribed content were used to inform the team as it discussed what it was learning, still within the solution.

The literature review tool within Ovid® Synthesis Clinical Evidence Manager helped the QI project team identify the supportive details revealed by the literature search. The solution translated those details — from publications such as *Clinical Infectious Diseases, American Journal of Infection Control, Clinical Nurse Specialist®, and Pediatric Quality and Safety* — to a Table of Evidence, so the team could work in tandem to assess the research. Literature review actions captured notes from team members that all could see, such as "Nurse driven protocol included." With full text stored directly in the tool and the ability to upload additional documents as necessary, the hospital's CAUTI project team quickly reached its conclusions.

Automatically managing citations and offering sample forms to help build a case for implementation, the application's evidence tables helped the team summarize its research findings:

- Nurse-driven protocols that drive to earlier removal of foley catheters in ICUs and medical-surgical areas exist and have been shown to be effective in reducing CAUTI.
- The results depend on a workplace culture that promotes collaboration and trust within the care team.

The Results

Ovid® Synthesis Clinical Evidence Manager enabled the team to use multiple export formats to easily communicate that numerous small studies demonstrated significant reductions — from 40% to 80% — in CAUTI. Due to the high impact and low risk of a defined, well-implemented protocol, the benefits can be significant for patients and overall CAUTI reduction across the hospital and health system.

Given that the evidence revealed that CAUTI is a driver of considerable patient harm resulting in higher costs, **engaging the entire nursing and medical staff in the hospital's ICUs and medical-surgical areas to develop a nurse-driven foley catheter removal protocol would have an immediate impact on the facility's results.** Prompted by the application, the QI project team also listed requirements to bring the initiative forward:

- Must have CNO and CMO as champions
- Develop multidisciplinary improvement team
- Review existing protocols and adapt for this hospital
- Identify analytic and QI expert support
- Gain committee approval
- Develop pilot and metrics
- Deploy pre-post test
- Pilot
- Communicate results

About Ovid® Synthesis Clinical Evidence Manager

Ovid® Synthesis Clinical Evidence Manager is the only solution offering a single, cohesive view of projects across the institution. Managing project workflows and making literature searches and appraisals for QI, EBP, and research projects more efficient ensures that your clinical practice improvements are high quality and based on the latest research insights.

Wolters Kluwer's Customer Engagement Team is fully available for personalized and customized support for any implementation, training requirement, or other need that you may have.

Please feel free to contact support@ovid.com or your Ovid account manager for more information.

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