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University of Plymouth

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#400WORDS: CHIEF NURSING OFFICER'S RESEARCH FELLOWS EVIDENCE IMPLEMENTATION PROJECTS

Exploring staff attitudes to urinary catheter care: an evidence informed change project

Rashima Hamdan¹

¹ Senior Infection Prevention and Control Nurse Specialist, Royal Cornwall Hospitals NHS Trust, TRURO, TR1 3LJ, UK.

Email: rashima.hamdan@nhs.net

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Background

Catheter-associated urinary tract infection (CAUTI) is a common healthcare-acquired infection (HAI) worldwide (Abernethy *et al.*, 2017, Smith *et al.*, 2019). It is the leading cause of secondary bloodstream infections and the most common invasive device-related complication in some healthcare facilities (Werneburg, 2022). CAUTI poses a significant burden on healthcare costs, contributes to lost bed days, and impacts patient morbidity and mortality (Kim *et al.*, 2017, Health Protection Agency 2011, Smith *et al.*, 2019). For these reasons, mandatory surveillance of HAI and implementation of preventive strategies have been the focus of many healthcare organisations. However, despite the existing programmes and recommendations, the problem of CAUTI persists (Werneburg 2022).

Review of the evidence

A literature review of CINAHL, Medline and Cochrane databases was conducted. from the last ten years using search terms 'urinary catheter care', 'compliance', 'care bundles' and 'non- compliance'. A total of seven studies were chosen for full-text review.

The review showed evidence-based urinary catheter care guidelines are available to prevent CAUTI, and compliance with these guidelines is critical (Al- Sayaghi *et al.*, 2023). Most studies were primarily conducted in a hospital settings and mostly measured nurses' knowledge, practice, and attitude toward catheter care. Healthcare workers who had participated in the studies showed adequate knowledge of the management of urinary catheters and CAUTI prevention (Taleschian-Tabrizi *et al.*, 2015, Balu *et al.*, 2021, Mong *et al.*, 2022). However, some practices are still inconsistent with guidelines (Mong *et al.*, 2022). Therefore, studies suggested enhanced and sustained education and training on catheter care (Balu *et al.*, 2021). Mong *et al.* (2020) highlighted that staff attitude is an essential predictor of practice compared to knowledge, which is consistent with Frymier and Nadler (2017) assumptions that attitude influences behaviour better. Moreover, a

systematic review conducted by Huang *et al.* (2019) identified barriers to compliance, such as heavy workload, understaffing, inconsistency in urinary catheter care (such as hand hygiene after changing catheter bags and avoiding unnecessary samplings) and poor documentation.

Locally, urinary catheter care plan compliance shows year on year improvement. However, CAUTI remains the top source of bacteraemia in local root cause analysis, especially in the frail older population.

Project plan

This project aims to explore staff attitude towards urinary catheter care. The project will utilise the Evidence Implementation Model (Porritt *et al.*, 2020) to survey staff and co-create a change intervention to impact compliance across six older peoples' inpatient wards. Established organisation-level monitoring will be used to measure longer-term impact.

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