1. Hospital/Respondent Information
Before beginning the survey, please take a moment to read the following clarifications.
1) This survey covers topics that pertain to both clinical knowledge and infection control. Therefore, it is best to have a staff member with knowledge of both areas on hand to complete this survey.
2) Each unit or clinical area should complete ONLY one assessment. Duplicate entries for the same unit or clincal area will be deleted.
3) Shared data WILL NOT include identifiers. Hospital and individual data are confidential.
4) This is not the Hospital Survey on Patient Safety (HSOPS).
Thank you for taking the time to complete the assessment.
* 2. How many staffed beds are there in this hospital?  * 3. Unit Name
4. What is your Unit's CareCounts ID number? (This number can be found in the CareCounts database on the data entry screen next to your unit's name.)
* 5. City and State  City/Town:  State:
* 6. Who may we contact with follow-up questions on the content of these responses (primary respondent)?  7. Contact Title

\* 8. Contact Phone Number

9. Contact Email Address

### 2. Description of Clinical Area

12. Numbers of beds in this unit

## \* 10. Are you reporting data for an ICU or another clinical area? j⊓ Med-Surg jn ICU j₁ Surgery n Orthopedics Telemetry Neuro/Neurosurgery Obstetrics Pediatrics jn Emergency Department Psychiatry/Mental Health Rehabilitation jn PACU re-Op jn Other 11. For ICU's ONLY: Type/Designation of the ICU for which you are reporting jn Burn ICU j⁻∩ Coronary ICU Surgical Cardiothoracic ICU Medical ICU Medical/Surgical ICU - Major Teaching Medical/Surgical ICU - All Others Neonatal ICU Pediatric Medical/Surgical ICU j∵∩ Neurosurgical ICU jn Surgical ICU †n Trauma ICU

13.	What is the average nurse to patient ratio on this unit?
jn	Don't Know
jn	1:1 - 1:2
jn	1:3 - 1:4
jn	1:5 - 1:7
jn	1:8 or Greater
<b>j</b> m	If greater than 1:8, please specify ratio
14.	Do you know your unit's catheter-associated urinary tract infection rate?
jn	Yes
jn	No
qua	rterly) reported to hospital senior executives?
-	
<b>j</b> m	
jn jn	No Don't Know
jm jm 16. '	No
jm jm 16. V prev	No Don't Know  Which of the following initiatives or programs have your unit participated in to
jn jm 16. \ pre\ €	No Don't Know  Which of the following initiatives or programs have your unit participated in to vent catheter-associated urinary tract infections? Select all that apply.
jn jm 16. \ pre\ €	Don't Know  Which of the following initiatives or programs have your unit participated in to vent catheter-associated urinary tract infections? Select all that apply.  IHI 5 Million Lives Campaign
jm jm 16. V prev e	Don't Know  Which of the following initiatives or programs have your unit participated in to vent catheter-associated urinary tract infections? Select all that apply.  IHI 5 Million Lives Campaign  Premier
jm jm 16. V prev e e	Don't Know  Which of the following initiatives or programs have your unit participated in to vent catheter-associated urinary tract infections? Select all that apply.  IHI 5 Million Lives Campaign  Premier  VHA
jm jm 16. V prev e e e	Don't Know  Which of the following initiatives or programs have your unit participated in to vent catheter-associated urinary tract infections? Select all that apply.  IHI 5 Million Lives Campaign  Premier  VHA  Association of Professionals in Infection Control
jn jn 16. V prev e e e e e	Don't Know  Which of the following initiatives or programs have your unit participated in to event catheter-associated urinary tract infections? Select all that apply.  IHI 5 Million Lives Campaign  Premier  VHA  Association of Professionals in Infection Control  State program
jm jm 16. ' pre' e e e e e e	Don't Know  Which of the following initiatives or programs have your unit participated in to event catheter-associated urinary tract infections? Select all that apply.  IHI 5 Million Lives Campaign  Premier  VHA  Association of Professionals in Infection Control  State program  Hospital/System Program
jm jm 16. V prev e e e e e e e e e e	Don't Know  Which of the following initiatives or programs have your unit participated in to event catheter-associated urinary tract infections? Select all that apply.  IHI 5 Million Lives Campaign  Premier  VHA  Association of Professionals in Infection Control  State program  Hospital/System Program  None

jr. Yes jr. No	* 17. Do you have a protoco	ol in place for Nurse-Initiated Discontinuance of Urinary
jn N0	jr∩ Yes	
	j <sub>n</sub> No	

#### 3. Safety Activities

For each of the following questions, please indicate the degree to which each of the following has taken place in your ICU/clinical area by selecting the item that reflects the experience in your ICU/clinical area.

#### \* 18. Participation in any organized multi-site effort to reduce CAUTI

- Not implemented and no plans to do so outside of STOP CAUTI project
- Currently planning for implementation outside of STOP CAUTI project
- Fully implemented outside of STOP CAUTI project

#### \* 19. Having all staff view the Josie King video

- Not implemented and no plans to do so outside of STOP CAUTI project
- Currently planning for implementation outside of STOP CAUTI project
- Fully implemented outside of STOP CAUTI project

#### \* 20. "Partnership" with unit by a Senior Executive for patient safety

- Not implemented and no plans to do so outside of STOP CAUTI project
- Currently planning for implementation outside of STOP CAUTI project
- Fully implemented outside of STOP CAUTI project

# \* 21. Systematic analysis and proactive learning from harmful events or events with potential for harm as raised by front-line staff (other than M&Ms and official RCA)

- $\uparrow_{\Omega}$  Not implemented and no plans to do so outside of STOP CAUTI project
- Currently planning for implementation outside of STOP CAUTI project
- Fully implemented outside of STOP CAUTI project

#### \* 22. Setting daily goals for each patient based on a standard tool

- Not implemented and no plans to do so outside of STOP CAUTI project
- Currently planning for implementation outside of STOP CAUTI project
- Fully implemented outside of STOP CAUTI project

#### \* 23. Educating staff on the "Science of Safety"

- Not implemented and no plans to do so outside of STOP CAUTI project
- Currently planning for implementation outside of STOP CAUTI project
- Fully implemented outside of STOP CAUTI project

## \* 24. Use of guidelines on appropriate indications for urinary catheter use Not implemented and no plans to do so outside of the STOP CAUTI project $\uparrow_{\Omega}$ Currently planning for implementation outside of STOP CAUTI project Fully implemented outside of STOP CAUTI project \* 25. Use of guidelines on proper techniques for urinary catheter insertion Not implemented and no plans to do so outside of the STOP CAUTI project Currently planning for implementation outside of STOP CAUTI project Fully implemented outside of STOP CAUTI project \* 26. Use of guidelines on proper techniques for urinary catheter maintenance Not implemented and no plans to do so outside of the STOP CAUTI project Currently planning for implementation outside of STOP CAUTI project Fully implemented outside of STOP CAUTI project \* 27. System of documenting urinary catheter insertions Not implemented and no plans to do so outside of the STOP CAUTI project Currently planning for implementation outside of STOP CAUTI project Fully implemented outside of STOP CAUTI project \* 28. System of documenting urinary catheter removals Not implemented and no plans to do so outside of the STOP CAUTI project $\uparrow \cap$ Currently planning for implementation outside of STOP CAUTI project Fully implemented outside of STOP CAUTI project \* 29. Regular in-service training for appropriate healthcare personnel on techniques and procedures for urinary catheter insertion, maintenance, and removal $\uparrow_{\Omega}$ Not implemented and no plans to do so outside of the STOP CAUTI project † Currently planning for implementation outside of STOP CAUTI project Fully implemented outside of STOP CAUTI project \* 30. Readily available supplies necessary for aseptic urinary catheter insertion Not implemented and no plans to do so outside of the STOP CAUTI project Currently planning for implementation outside of STOP CAUTI project Fully implemented outside of STOP CAUTI project

Jn Not implemented and no plans to do so outside of STOP CAUTI project  Jn Fully implemented outside of STOP CAUTI project  32. Any unit-wide assessment of teamwork and safety culture (e.g., Safety Attitude Questionnaire, Hospital Survey on Patient Safety)  Jn Not implemented and no plans to do so outside of the STOP CAUTI project  Jn Currently planning for implementation outside of STOP CAUTI project  Jn Fully implemented outside of STOP CAUTI project  33. If you answered "currently planning for implementation" or "fully implemented Question 32, when did you last complete the unit-wide assessment of teamwork a safety culture?  34. Do you have the ability to distribute the survey electronically to your physician staff?  Jn Yes  Jn No	olemented" to amwork and
32. Any unit-wide assessment of teamwork and safety culture (e.g., Safety Attitude Questionnaire, Hospital Survey on Patient Safety)  jn Not implemented and no plans to do so outside of the STOP CAUTI project  jn Currently planning for implementation outside of STOP CAUTI project  jn Fully implemented outside of STOP CAUTI project  33. If you answered "currently planning for implementation" or "fully implemented Question 32, when did you last complete the unit-wide assessment of teamwork a safety culture?  34. Do you have the ability to distribute the survey electronically to your physician staff?  jn Yes	olemented" to amwork and
32. Any unit-wide assessment of teamwork and safety culture (e.g., Safety Attitude Questionnaire, Hospital Survey on Patient Safety)  jn Not implemented and no plans to do so outside of the STOP CAUTI project  jn Currently planning for implementation outside of STOP CAUTI project  jn Fully implemented outside of STOP CAUTI project  33. If you answered "currently planning for implementation" or "fully implemented Question 32, when did you last complete the unit-wide assessment of teamwork a safety culture?  34. Do you have the ability to distribute the survey electronically to your physician staff?  jn Yes	olemented" to amwork and
Questionnaire, Hospital Survey on Patient Safety)  jn Not implemented and no plans to do so outside of the STOP CAUTI project  jn Currently planning for implementation outside of STOP CAUTI project  jn Fully implemented outside of STOP CAUTI project  33. If you answered "currently planning for implementation" or "fully implemented Question 32, when did you last complete the unit-wide assessment of teamwork a safety culture?  34. Do you have the ability to distribute the survey electronically to your physician staff?  jn Yes	olemented" to amwork and
jn Currently planning for implementation outside of STOP CAUTI project  jn Fully implemented outside of STOP CAUTI project  33. If you answered "currently planning for implementation" or "fully implemented Question 32, when did you last complete the unit-wide assessment of teamwork a safety culture?  34. Do you have the ability to distribute the survey electronically to your physician staff?  jn Yes	amwork and
33. If you answered "currently planning for implementation" or "fully implemented Question 32, when did you last complete the unit-wide assessment of teamwork a safety culture?  34. Do you have the ability to distribute the survey electronically to your physician staff?  jn Yes	amwork and
33. If you answered "currently planning for implementation" or "fully implemented Question 32, when did you last complete the unit-wide assessment of teamwork a safety culture?  34. Do you have the ability to distribute the survey electronically to your physician staff?	amwork and
Question 32, when did you last complete the unit-wide assessment of teamwork a safety culture?  34. Do you have the ability to distribute the survey electronically to your physiciar staff?	amwork and
staff?  jn Yes	pilyalcialia dil
staff?  jn Yes	physicians an
j <sub>n</sub> Yes	
jn No	

4. Catheter Management Strategies
For each item below, please check the answer that best applies, on a scale from Never to Always.
* 35. Urinary catheters used for management of incontinence
j∵∩ Never
j <sub>∵∩</sub> Rarely
j∩ Sometimes
j⁻∩ Often
jn Always
$^{\star}$ 36. Urinary catheters removed post-operatively within 24-48 hours unless there are appropriate indications for continued use
j⁻∩ Never
j⁻∩ Rarely
jr∩ Sometimes
jn Often
jn Always
$^{\star}$ 37. Alternatives to indwelling catheters (e.g. intermittent catheters, condom catheters) used when appropriate
j∵∩ Never
j⁻∩ Rarely
j₁ Sometimes
jn Often
j⁻∩ Always
$^{\star}$ 38. Urinary catheters inserted using aseptic technique and sterile equipment
j₁ Never
jn Rarely
$j_{\cap}$ Sometimes
jn Often
jn Always

* 39. Portable bladder ultrasound used to as	sess urine volume
jn Never	
jn Rarely	
jn Sometimes	
jn Often	
jn Always	
$^\star$ 40. Urinary drainage systems with pre-con	nected, sealed catheter-tubing junctions used
jn Never	
jn Rarely	
jn Sometimes	
j <sub>n</sub> Often	
jn Always	
$^\star$ 41. Catheters changed at routine, fixed into	ervals
j∩ Never	
jn Rarely	
jn Sometimes	
jn Often	
jn Always	
$^\star$ 42. Nitrofurazone-releasing catheters used	I
j∩ Never	
jn Rarely	
jn Sometimes	
jn Often	
jn Always	
$^\star$ 43. Silver alloy catheters used	
jn Never	
jn Rarely	
jn Sometimes	
jn Often	
j <sub>n</sub> Always	

<b>* 44.</b>	Systemic anti-microbial prophylaxis for urinary catheters used
jn	Never
<b>j</b> m	Rarely
<b>j</b> n	Sometimes
<b>j</b> m	Often
<b>j</b> m	Always
<b>* 45.</b>	Urinary drainage bags kept below level of bladder
jn	Never
<b>j</b> n	Rarely
jn	Sometimes
Jm	Often
<b>j</b> n	Always
<b>* 46.</b>	Urinary drainage bags instilled with anti-septics or anti-microbials
jn	Never
<b>j</b> n	Rarely
<b>j</b> m	Sometimes
Jm	Often
jn	Always
<b>* 47.</b>	Urinary catheters disconnected from collecting systems (e.g., for irrigation)
<b>j</b> n	Never
<b>j</b> m	Rarely
jm	Sometimes
<b>j</b> n	Often
Jm	Always
<b>* 48.</b>	Screening for asymptomatic bateriuria (ASB) performed
jn	Never
jn	Rarely
jn	Sometimes
<b>j</b> m	Often
<b>j</b> n	Always

* 49. Sharing of unit's CAUTI rates with physicians/nurses
j₁ Never
jn Rarely
jn Sometimes
jn Often
j⁻∩ Always
$^\star$ 50. Adherence to hand hygiene policies measured in at least one patient care area
j∕∩ Never
j⊓ Rarely
j₁ Sometimes
j <sub>n</sub> Often
jn Always
$^\star$ 51. Adherence to proper aseptic insertion of urinary catheters measured
j∕∩ Never
j <sup>™</sup> Rarely
jn Sometimes
jn Often
j⁻∩ Always
$^\star$ 52. Adherence to documentation of catheter insertion and removal dates measured
j∕∩ Never
j <sub>n</sub> Rarely
jn Sometimes
jn Often
jn Always
$^\star$ 53. Adherence to documentation of indication for urinary catheter placement measured
j⁻∩ Never
jn Rarely
jn Sometimes
j∕∩ Often
jn Always

At my facility On my unit  55. Who inserts to the state of the state o	Strongly agree	of CAUTI i	Neither disa	agree or [	Disagree S	trongly disagree
On my unit  55. Who inserts to the service of the s	ja jn	ja	disa	•	Disagree S	trongly disagree
On my unit  55. Who inserts to the service of the s	<b>j</b> m	J	j			
At my facility	3	<b>j</b> m			<b>j</b> n	ja
At my facility	urinary cathete		j	n	<b>j</b> m	<b>j</b> m
At my facility	, , , , , , , , , , , , , , , , , , ,	ers at vour	facility (plea	se check all	that apply)?	•
	RNs	LPNs	Nurse aides	Physicians	Medical Students	Other
	€	€	€	€	€	€
On my unit	€	ê	ê	ê	ê	ē
Other (please specify)						
56. Is surveilland	e for CAUTI pe	erformed a	t your facility	y?		
	No		Yes, Hos	pital-wide	Yes, unit	-specific
At my facility	<b>J</b> o.		j		j:	
On my unit	<b>j</b> n		j	n	<b>j</b> ú	٦
Specify units						
On my unit		<b>j</b> n			<b>j</b> m	
58. If the answer	to Question 5	7 is No, are	e CDC/NHSN	l surveillanc	e definitions	for CAU
used?		Van			Na	
At my facility		Yes			No jsa	
On my unit		jn			jn	
59. Are any quali facility (please cl	heck all that ap	oply)? Guidelines or	grams for C <i>l</i>	•	·	at your
	Alerts or reminders for removing unnecessary catheters	algorithms for appropriate perioperative catheter management	Multidisciplinary urinary catheter "rounds"	Protocols for nurse- directed removal of unnecessary catheters	Stop orders for urinary catheters	Other
At my facility	6	€	É	é	ē	€
On my unit	ê	€	€	ē	Ē	€
Other (please specify)		_				
		5				