

## Collaborative Project to Reduce Catheter Associated Urinary Tract Infections (CAUTIs)

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Provided by Collaborative Procurement Partnership LLP



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# Introductions

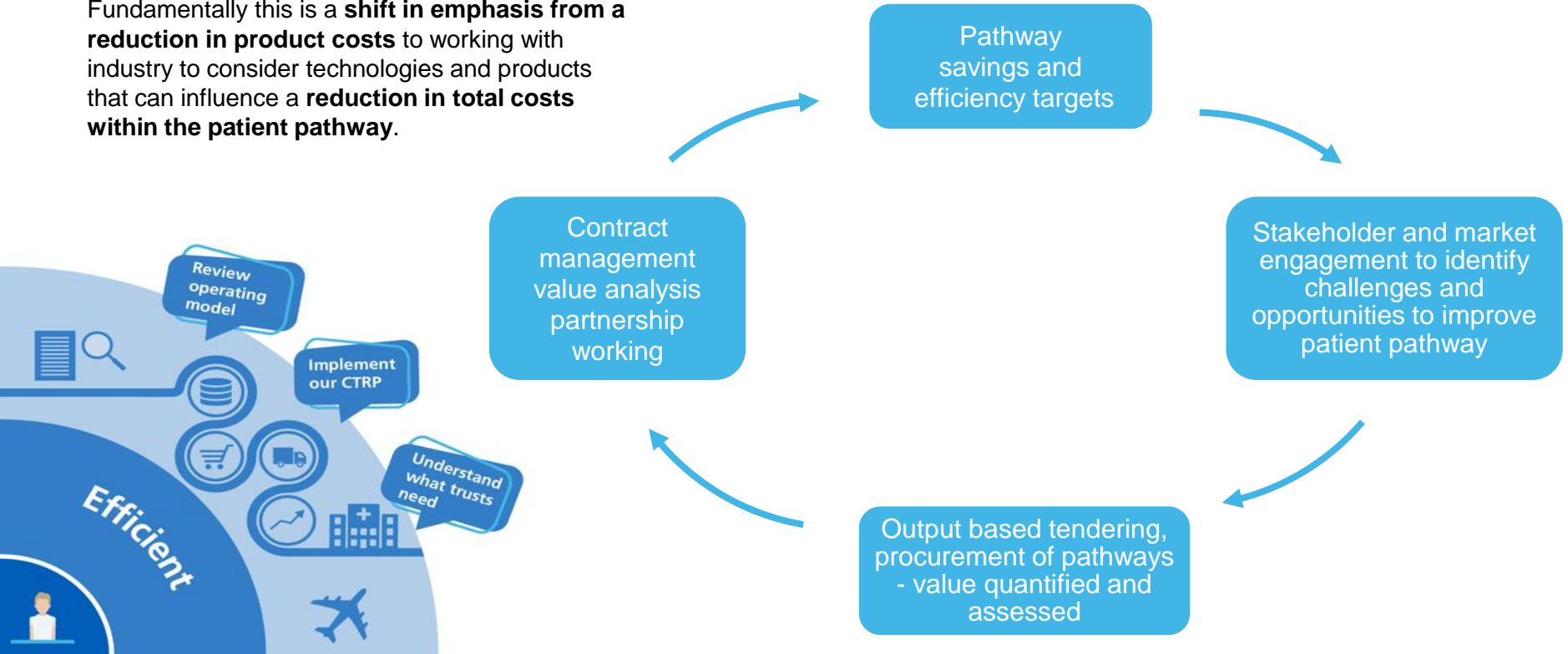
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# Redefining Value in Procurement

Fundamentally this is a **shift in emphasis from a reduction in product costs** to working with industry to consider technologies and products that can influence a **reduction in total costs within the patient pathway**.



# CAUTI Information

- Urinary tract infection (UTI) is the most common healthcare associated infection (HCAI), accounting for 17.2% of all HCAs, with between 43% and 56% of UTIs associated with an indwelling urethral catheter (EPIC 3, 2014).
- Patients with invasive devices such as urinary catheters are at a greater risk of developing an infection (NICE, 2012).
- In addition to increased costs, each one of these infections means additional use of NHS resources, greater patient discomfort and a decrease in patient safety.
- Long-term catheterisation carries a significant risk of symptomatic UTI, which can lead to serious complications such as blood stream infections (NICE 2012).
- The diagnosis of a CAUTI increases the use of antibiotics which will increase the burden and development of antimicrobial resistance (DH, 2007).



# Background

## National Safety Thermometer data at that time

- University Hospitals of North Midlands NHS Trust (UHNM) reported 1.7% CAUTI against a national average of 0.6%.
- 220 catheters in situ in the audited areas representing 19.2% utilisation.

## Quality improvement opportunity highlighted in the audit

- General documentation including the catheter life chart and product code stickers in the medical notes.
- No catheter stabilisation in place in any area.
- Access to bladder scanners – only 19 available across the organisation, many areas were borrowing equipment.
- There was a wide variation in catheter insertion process.
- Improved catheter selection process including size and material.
- High use of urine meter bags when unnecessary. Impacts mobilisation and plastic use (embedded carbon).
- Gaps in the discharge process.
- Clinical time in identifying products and preparation.



# Pilot Study

**The Objective** – to reduce variation in equipment and process delivery for catheterisation, reducing risk and improving patient experience.

- 350 beds.
- Took place over three months – January to March 2020.

## The Changes

- Following an audit of practice, the trust moved to a complete catheterisation tray solution.
- Rolled out during COVID-19 to main hospitals
  - Assisted staff as all products in one place.
  - Benefits due to staff being displaced and new staff members, in unfamiliar environments.
  - Patients critically ill – require urgent treatment.

- CAUTI rate reduced to zero.
- Savings of over £47,000 per annum.
- Reduction in patient stay.
- Reduction in complaints.
- 78kg of clinical waste saved.
- 11kg plastic waste avoided.
- 5 minute per catheterisation time saving.

Scaled up for a large trust could mean.....

## Potential Trust Benefits



80% infection  
reduction



£415,200 cost  
avoidance



1,200 additional  
bed day capacity

\* Based on an average of 200 CAUTIs per year



## Our Value Based Procurement (VBP) Pipeline

| Concept   | Description   |
|---|---|
| PureWick™ Female External Catheter                        | The PureWick™ Female External Catheter allows for simple, non-invasive urine output management in female patients. Using low pressure wall suction, the PureWick™ Female External Catheter wicks urine away from the patient and into a designated collection canister. |
| Urethrotech Urethral Catheterisation Device               | The Urethrotech Urethral Catheterisation Device is a NICE approved innovative solution to manage difficult or failed urethral catheterisation in the outpatient or inpatient setting.   |
| Uroshield   | The action of the ultrasonic waves on the surfaces of the catheter interfere with the attachment of bacteria, reduce catheter encrustations and blockages, prevent infections from developing and may decrease or eliminate the need for antibiotics.                   |
| Modern v Traditional Disposable Continence Products       | Higher absorbency and less leakage, resulting in less pad changes and development of sores.   |
| Increase in usage of washable products                    | Review products classified as “light” incontinence, as well as children’s nappies, and comparing them against washable alternatives. Positive sustainability impact due to reduction in waste to landfill.  |
| Provizio® SEM Scanner                                     | The Provizio® SEM Scanner provides objective Pressure Ulcer (PU) risk assessment on admission, regardless of skin tone.   |
| Use of Smart technology in disposable continence products | Allows accurate monitoring of wetness saturation and alerts care givers on when a protection must be changed. This results in a lower risk of leakages, an optimal use of absorbents and has a positive impact on dignity, direct cost and sustainability.              |



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