Overview:
Wisconsin Healthcare-Associated Infections in Long-Term Care Coalition
UTI Toolkit
UTI Toolkit – Module 1

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Content developed in partnership with the Wisconsin Healthcare-Associated Infections in Long-Term Care Coalition

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The Problem

ANTIBIOTIC USE IN NURSING HOMES

Up to 70% of nursing home residents will receive one or more treatments of antibiotics annually.

50% of antibiotics treatments are started for suspected urinary tract infection.

50% of antibiotics treatment for suspected urinary tract infection in nursing homes are unnecessary or inappropriate.
Toolkit Objectives

**UTI Toolkit: Staff Education & Training**

- **Resident with suspected UTI**
  - **Improved Resident Evaluation:**
    - Standardized resident assessment
    - Determine and assign likelihood of UTI (Stoplight)
  - **LOWER RISK (YELLOW)**
  - **HIGHER RISK (GREEN)**
  - **Improved Staff/Provider Communication:**
    - Determine appropriate mode of communication
    - Convey pertinent elements of history, exam and tests
    - Provide management recommendations

**Recommendations for Lower Risk:**
- Initiate active monitoring care plan
- Do not test or treat with antibiotics unless the resident’s status changes

**Recommendations for Higher Risk:**
- Determine if antibiotics should be started immediately
- Ensure resident receives the right antibiotic at the right dose for the right duration

**EXPECTED OUTCOMES TO IMPROVE RESIDENT CARE**

**FOR LOW-RISK RESIDENTS**
- Decreased number of urine tests
- Decreased number of antibiotic treatments

**FOR HIGH-RISK RESIDENTS**
- Decreased use of broad-spectrum antibiotics (especially fluoroquinolones)
- Decreased number of antibiotic treatment courses exceeding 7 days
The UTI Toolkit is comprised of 5 modules. Content includes presentations, resources and references to help nursing home staff improve the management of suspected UTIs.

- Overview & Rationale
- UTI Prevention
- Urine Testing
- UTI Treatment
- Quality Improvement
Overview and Rationale

• This module is organized into three sections.
  o Background and overview of the Wisconsin Urinary Tract Infection (UTI) Toolkit.
  o Clinical rationale for antibiotic stewardship.
  o Related regulatory information.
How to Prevent CAUTI

• This module is organized into three sections.
  o Background and risk factors for indwelling urinary catheter use and CAUTI.
  o Appropriate indications and alternatives for indwelling catheter use.
  o Indwelling catheter insertion and maintenance.
When to Test a Urine Specimen

• This module is organized into four sections.
  o Urinary tract infections, definitions and signs/symptoms.
  o Introduction to the UTI Stoplight Tool and When to Test Urine-Nursing Tool.
  o Practical application of the When to Test Urine-Nursing Tool to case studies.
  o Suggested educational plan for implementing the tools and resources.
When and How to Treat a UTI

- This module is organized into four sections.
  - Clinical decision about when to treat a suspected urinary tract infection and the five moments of antibiotic decision-making.
  - Basic principles related to initiating treatment, along with guidance about empiric treatment of uncomplicated and complicated urinary tract infection.
  - Opportunities to modify existing antibiotic therapy, including antibiotic timeout.
  - Collaborative role of the pharmacist in antibiotic stewardship and establishing a Collaborative Practice Agreement.
Quality Improvement

• This module includes presentations and additional resources.
  o Preparing for Successful Organizational Change
  o Coaching Change Through Data-Driven Teamwork
  o Sustainability of Organizational Change
  o Sustainability Planning
  o Antibiotic Stewardship, Antiibiograms, etc.
Thank You!