Introduction
Catheter Associated Urinary Tract Infections (CAUTI) are the most common healthcare acquired condition according to the National Healthcare Safety Network. They account for anywhere from 2 to 4 additional hospital days and cost about $500 million dollars a year. Nursing by virtue of time at the bedside is at the forefront of processes and outcomes related to care of patients with catheters. At Penn State Hershey Medical Center our Nursing Clinical Quality Council (NCQC) has embraced the urgency to eliminate CAUTIs; and has applied High Reliability concepts to achieve optimal patient outcomes.

Strategies, Implementation, and Results
Our NCQC collaborates with other departments to monitor nurse sensitive indicators (NSI) and implement appropriate interventions. NCQC members were trained in process improvement methods in a 12 hour program over a 6 month period. They learned to apply high reliability concepts to improve strategies and mitigate risk for CAUTI. NCQC integrated CAUTI cause analyses with collaborating partners and shared incidence data at monthly meetings. Each of the 34 NCQC members was allotted 5 minutes to display unit data via the hospital Quality Intelligence Dashboard and share action plans. This real-time analyses and scrutiny of case variances increased accountability; and led to hardwiring appropriate catheter use, culturing practices, insertion and maintenance, and documentation changes.

Key Characteristics of High Reliability Healthcare Providers
- Preoccupation with failure: all personnel are constantly aware and act based on the potential of safety for everything they do individually and as a group.
- Reluctance to Simplify: never “explaining away” or excusing problems.
- Sensitivity to Operations: understanding the contributions of each job duty and the contribution to the final outcome for the populations we serve.
- Commitment to Resilience: all personnel are committed to flexibility and adapting quickly to changes that optimize processes and outcomes.
- Deference to Expertise: giving discretion for positive change to frontline staff as “experts” in their respective areas.

Evaluation
- High reliability concepts offer simple and practicable solutions for nurses to improve patient outcomes.
- Heightened awareness of preventable healthcare harm by NCQC members has focused on ways to reach zero.

Practice Implications
- The NCQC preoccupation with failure concentrated on mitigating risks for CAUTI.
- Our CAUTI rate decreased in a 6-month period from 3.21 per 1000 patient days to 1.7.
- Efforts continue in solidifying the NCQC collective mindset from reactive to proactive by redesigning care processes to eliminate CAUTI.