



ON THE CUSP: STOP CAUTI

Estimated Annual Hospital Staff Time Commitment (Based on National Project Participant Experience)

Hospital Executive or Senior Management Champion: (1 hour/month)

- The project sponsor who partners with the unit and is responsible and accountable to the organization for the performance and results of the project improvement team.
- Ensures that the project remains an organizational priority.

Physician Champion (unit medical director or physician who provides care in the unit): (6–8 hours/month)

- Advocates, leads, and supports the initiative.
- Assists in process development, adding input in areas within his/her role.
- Assists with educating and communicating with peers.

Project Team Leader (ideally the nurse manager or unit designee): (16 hours/month)

- The unit team's primary contact; will play a key role in the initiative's success.
- Holds staff accountable to the processes that are being implemented, and facilitates the assignment of necessary resources.
- Organizes the team, articulates clear goals, makes decisions through collective input of members, and actively promotes and facilitates good teamwork.
- Receives all communication from the collaborative's leadership team and promptly disseminates information to the team members.

Infection Preventionist/Epidemiologist: (incorporate into current role)

- Provides infection prevention expertise to the project team; should attend monthly safety meetings with the *On the CUSP: Stop CAUTI* team.
- May also be responsible for collecting monthly outcome data, such as CAUTI rate data, and providing it to the team.

The following roles could be filled by the same person, or by any of the above team members.

Process Data Collector: (4–6 hours/month)

- Collects data on prevalence and appropriateness based on the schedule established by the national project team and identified by the project team leader.

Data Entry and Report User: (1–2 hours/month)

- Enters collected data and runs reports in *Care Counts*.
- Collects and ensures that monthly CAUTI rates and process data are submitted according to the established schedule.
- Maintains communication with the collaborative's leadership team and conveys relevant information at monthly project improvement meetings.

Culture survey (HSOPS) coordinator: (survey is administered twice during the project)

- Ensures that the AHRQ Hospital Survey on Patient Safety Culture is completed at the beginning of the collaborative and at a specified follow-up date.
- Responsible for HSOPS registration and distribution of survey to staff on the unit.