Collecting and comparing data both before and after an intervention provides an objective way to evaluate if your interventions are successful in reducing unnecessary catheter days and catheter-associated urinary tract infection (CAUTI). Ongoing assessments allow you to assess if the intervention is sustained.

1. **The what and when of data collection**
   - **What to collect:**
     - The presence of a Foley
     - The explanation for its original insertion or continued use
     - Number of symptomatic CAUTI
   - **When to collect it**
     - At baseline: daily for 2 weeks (phase 1)
     - During implementation: daily for two weeks (phase two)
     - After implementation: one day a week for 5 weeks (phase 3)
     - During sustainability: daily for one week each quarter (phase 4)

2. **Calculations you should make from the data you collect:**
   - **Process measure:**
     - Catheter utilization rate: \( \frac{\text{Total # catheter-days}}{\text{Total # patient-days}} \times 100 \)
   - **Outcome measure:**
     - NHSN measure: \( \frac{\text{# of symptomatic CAUTI}}{1,000 \text{ urinary catheter days}} \) as measured in NHSN.
     - Population-based measure: \( \frac{\text{Total # of symptomatic CAUTI}}{10,000 \text{ patient days}} \)
   - **Additional measures to consider:**
     - Unnecessary Urinary Catheter %: \( \frac{\text{# of unnecessary catheter-days}}{\text{Total # catheter-days}} \times 100 \)
   - For more information on these calculations click [here](#).

3. It is important to apply a consistent approach to data collection at all stages of your prevention program so that you can compare across time periods and units.
   - For an example of a data collection tool click [here](#).
   - Modify this tool or use a different option altogether.

4. **Ensure that you have someone on the team who is responsible for collecting data**
   - This is typically an infection preventionist or a member of the quality improvement department.
   - Responsibilities of this team member include
     - Collecting and collating information – specifically, the presence of a Foley, the explanation for its original insertion or continued use, and any indication of a healthcare-associated urinary tract infection.
Feeding it back to the floor unit involved and to the hospital office responsible for sending the results to the CDC.

5. Further reading suggestions

6. For an example data collection process currently used by several hospitals click here.