**Urinary Catheter Types and How To Care for Them Activity**

**Staff Role Play—How good are your catheter care skills?**

Roleplaying can be a helpful training and educational tool. Roleplaying allows staff to actively practice the skills they are learning about and helps build team communication. The following activity will help staff practice the catheter care skills highlighted in the “Catheter Types and Care for Residents with Catheters” video. You should gather supplies and prepare for this activity before showing the video.

**Supplies**

* CPR mannequin or a staff member volunteer
* An empty resident room and/or bed
* A indwelling urinary catheter, its tubing, and drainage bag
* Urine receptacle or urinometer
* Marker for writing on the urinometer
* Water with yellow food coloring
* Towel
* Case scenarios (provided) cut into individual slips of paper per scenario

**Instructions**

Volunteers will take turns acting out the different case scenarios. Each scenario involves caring for a fictional resident with an indwelling urinary catheter. This resident can either be the CPR mannequin or another staff member who volunteer. Please note that the fifth scenario requires two people, and the sixth, and final scenario should be acted out last because it requires an empty drainage bag. Feel free to switch up the order the case scenarios are performed or add your own scenarios.

1. Make sure you have all of the supplies available and review the scenarios before starting the activity.
2. Fill the drainage bag with the water dyed yellow; this will simulate urine for the scenarios. Make sure the volunteers do not actually throw away the yellow water so you can use it for multiple scenarios.
3. Identify volunteers and handout the scenarios to the volunteers. Answer any clarifying questions they might have.
4. Have the CPR mannequin or volunteer positioned in a bed or chair with the catheter tubing and drainage bag properly placed.
5. Have the volunteers act out one scenario at a time. After each scenario has been acted out ask participating staff members the following questions:

* What part of catheter care did the volunteer do well?
* What part of catheter care did the volunteer miss?
  + Some scenarios may have only one error while others will have more.
  + Consider using [TeamSTEPPS for Long-term Care](http://www.ahrq.gov/professionals/education/curriculum-tools/teamstepps/longtermcare/) communication strategies and tools.
* What can be done at our facility to help prevent this error or mistake in catheter care?

**Scenario Answer Key**

### Scenario 1

A staff member comes in to say “hi” to the resident. The staff person does not perform hand hygiene or put on gloves, but proceeds to touch the resident. As the staff member leaves the room they also do not perform proper hand hygiene.

**Error/Corrective Action:** Hand hygiene was not performed upon entering or leaving the room. Hand hygiene should always be performed when entering and exiting a resident’s room.

Scenario 2

The staff member enters the resident’s room and appropriately performs hand hygiene. She/he does not put on gloves. The staff member checks the catheter drainage bag, touching it in the process. She/he says, “Oh, it looks like we need to empty your bag.” She/he exits the room to gather supplies to empty the drainage bag and performs hand hygiene as she/he exits.

**Error/Corrective Action:** Gloves should be worn when handling a resident’s catheter, the catheter tubing, and the drainage bag.

Scenario 3

*Note:* Do not discard the yellow water because it will be used for other scenarios.

A staff member walks into a resident’s room and performs proper hand hygiene. She/he puts on gloves before examining the drainage bag. She/he notices that the bag needs to be emptied and places it on the resident’s bed or floor while gathering the appropriate supplies. She/he empties the drainage bag into an unlabeled collection receptacle/urinometer, and then removes his/her gloves and performs proper hand hygiene.

**Error/Corrective Action:** The catheter drainage bag should not be positioned above the level of the bladder—in this case, left on the resident’s bed or on the floor. The collection receptacle should have the residents’ name on it and only be used for that resident.

### Scenario 4

*Note:* Do not discard the yellow water because it will be used for other scenarios.

A staff person walks into a resident’s room and performs proper hand hygiene. She/he puts on gloves before examining the drainage bag. She/he notices that the bag needs to be emptied and gathers the appropriate supplies. She/he writes the resident’s name on the collection receptacle/urinometer. Next she/he empties the drainage bag, but during the emptying process accidently touches the emptying port to the side of the collection receptacle/urinometer. After emptying the bag she removes her gloves, but does not perform hand hygiene since she didn’t spill any of the urine.

**Error/Corrective Action:** The urine collection receptacle/urinometer should not touch the catheter emptying port because it could introduce contamination into the closed system and put a resident at risk for an infection. Also, hand hygiene should always be performed when leaving a resident’s room.

Scenario 5

*Note:* Two volunteers needed.

Two staff members walk into a resident’s room and performs hand hygiene. One person puts on gloves and examines the drainage bag. She/he notices that the bag needs to be emptied and the second staff person (the one not wearing gloves) helps gather the necessary supplies. The first staff person proceeds with emptying the drainage bag. She/he hands the urine collection device to the second staff person who empties the collection device, rinses it out, and dries it with a towel. Both staff members perform hand hygiene as they are exiting the room.

**Error/Corrective Action:** Both staff members should be wearing gloves since both are handling either the catheter or the urine collection receptacle. Additionally, the urine collection receptacle should never be dried with a towel, but should instead be left to air dry.

Scenario 6

*Note:* This scenario should be performed last because it requires an empty drainage bag.

A staff person enters a resident’s room, performs hand hygiene, and puts on gloves. She/he notices that there is not urine in the drainage bag and decides to check to see if there is a blockage. She/he breaks the closed system while examining to check for breaks or blockages. After seeing that the catheter system is free of blocks, she/he puts the device back together. She/he removes their gloves and exits the room.

**Error/Corrective Action:** Hand hygiene should always be performed when exiting a resident’s room. The closed catheter system should be maintained at all times. Breaking the closed system can introduce contamination that could lead to an infection.

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