



Infection Control

Zeroing in on infection prevention and control

The attention focused health care-associated infections (HAIs) continues to intensify. Outbreaks of methicillin-resistant *Staphylococcus aureus* (MRSA) in schools, hospitals and other locations captured headlines around the country in 2008, underscoring the fact that MRSA is an emerging community pathogen as well. Meanwhile, recent studies have illustrated the growing problem of multidrug-resistant organisms in the hospital setting and the underlying problems in preventing the spread of HAIs.

The Association for Professionals in Infection Control & Epidemiology (APIC) conducted a national prevalence study of MRSA in U.S. health care facilities in the fourth quarter of 2006, releasing its findings in June of last year. Data showed that 46 of every 1,000 patients in the study were either infected or colonized with MRSA—a rate eight to 11 times greater than previous MRSA estimates.

An APIC Pace of Progress Poll of its 12,000 members conducted over a three-week period in April and May of 2008 found that the rise of more virulent strains of MRSA caused 76 percent of

infection prevention and control professionals to implement additional MRSA intervention strategies within the past year.

Institutions that adopted new interventions reported using a group of approaches to prevent the transmission of MRSA, including staff education, more aggressive hand hygiene programs and stricter use of contact precautions (e.g., gloves, gowns, etc.) for patients who test positive for MRSA. In addition, respondents placed more emphasis on house-keeping and equipment cleaning and decontamination practices, targeted patient screening, maintaining tracking systems to flag patients previously identified as having MRSA and taking other steps to try to stem the tide against the pathogen.

But in spite of these and other efforts, 54 percent of APIC respondents still believed their institutions were not doing as much as they could and should be doing to prevent MRSA.

Elsewhere, APIC, the Centers for Disease Control and Prevention and other organizations have continued to place emphasis on hand hygiene compliance and its role in effectively combating HAIs. A joint survey conduct-

ed in 2008 by *Materials Management in Health Care*, APIC and the Association for Healthcare Resource & Materials Management examined current methods being employed by hospitals to measure and enforce hand hygiene compliance. The data demonstrated that while preventing HAIs remains a top priority for infection prevention and control specialists, many continue to struggle with monitoring and enforcing hand hygiene protocols.

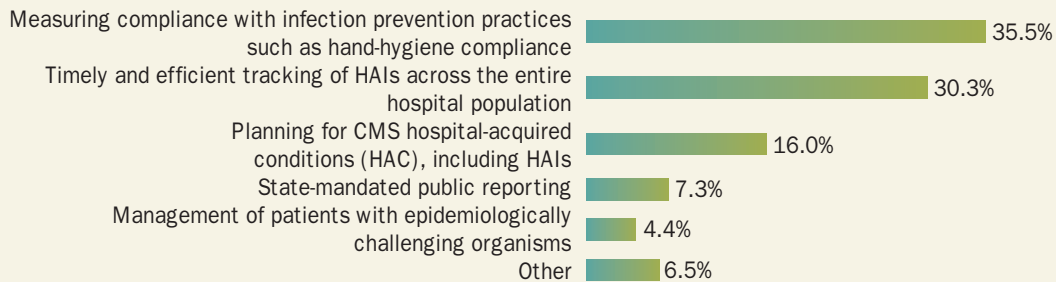
Major challenges to hand hygiene compliance reported by participants included staff not thinking about it (43 percent), being too busy (31 percent), having other patient needs take priority (25 percent) and not having role models (24 percent).

Meanwhile, regulatory and advocacy groups are putting greater pressure on hospitals to control infections and their costs. The Centers for Medicare & Medicaid Services (CMS) implemented a plan last October to eliminate reimbursement payments for certain infections that CMS deems preventable.

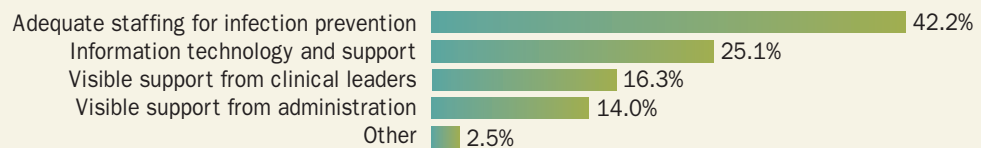
The tables that follow in this section examine some of these issues in greater detail.

Confronting HAI challenges

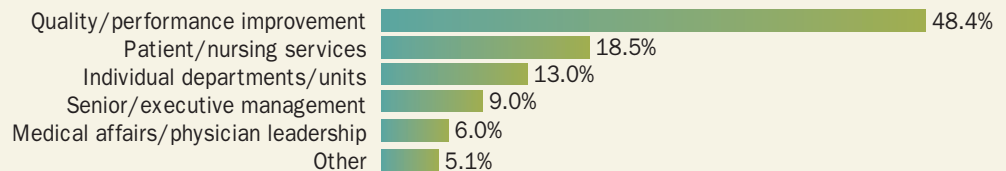
Which of the following do you consider your organization's biggest HAI challenge?



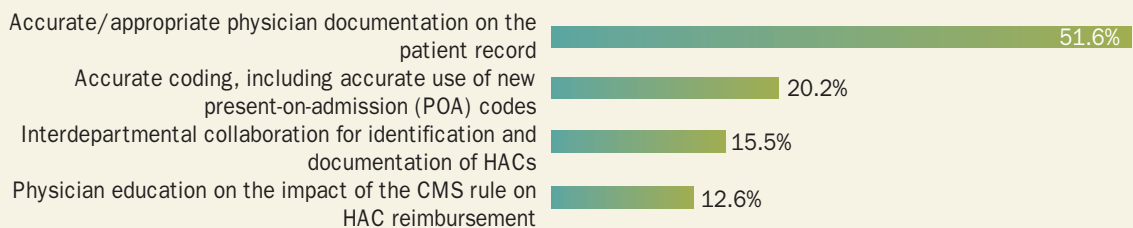
Aside from funding, which of the following is the most important resource needed to meet your current infection prevention challenges?



In your organization, which of the following department leaders provide the most active support for the HAI elimination program?



In anticipation of the October 2008 change in CMS reimbursement for HAC's, which of the following needed the most attention to optimize your organization's readiness?



How timely and efficient is your current surveillance process for detection of problem pathogens and potential HAIs that need further investigation?



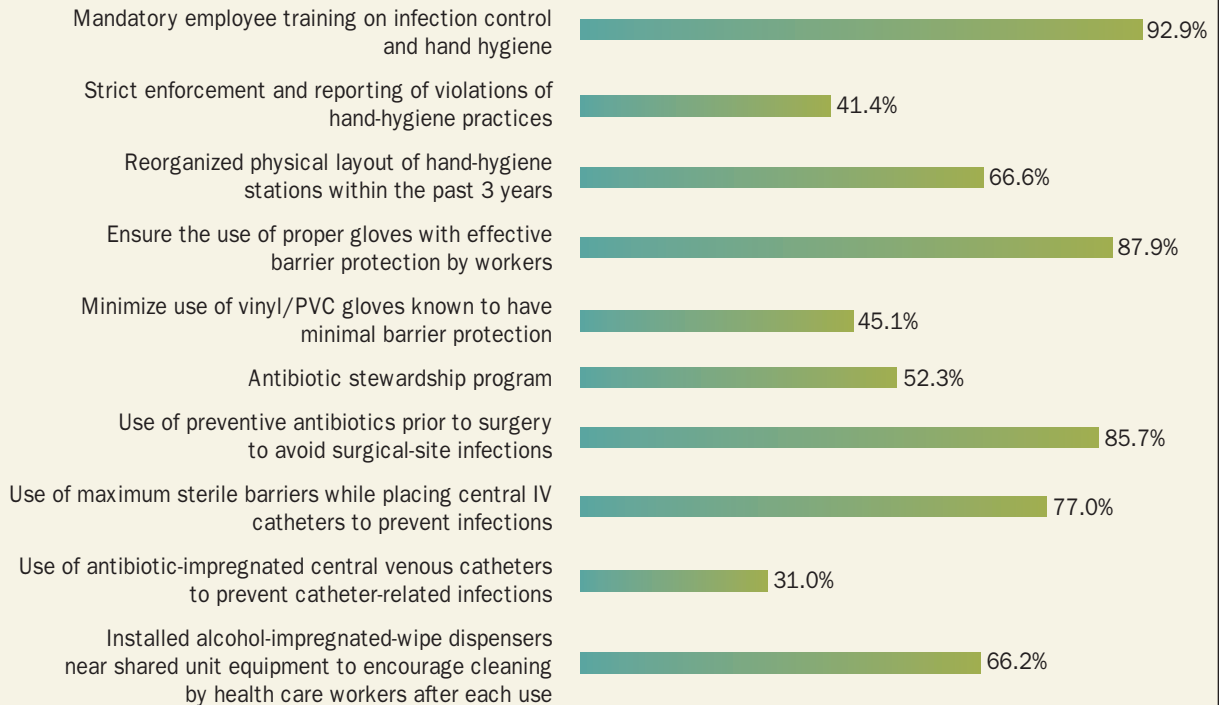
Note: Figures have been rounded to the nearest 10th of a percentage point and thus may not total exactly 100 percent.

Source: 2008 APIC-Premier Inc. Survey on HAI Prevention Strategies; based on 934 responses.

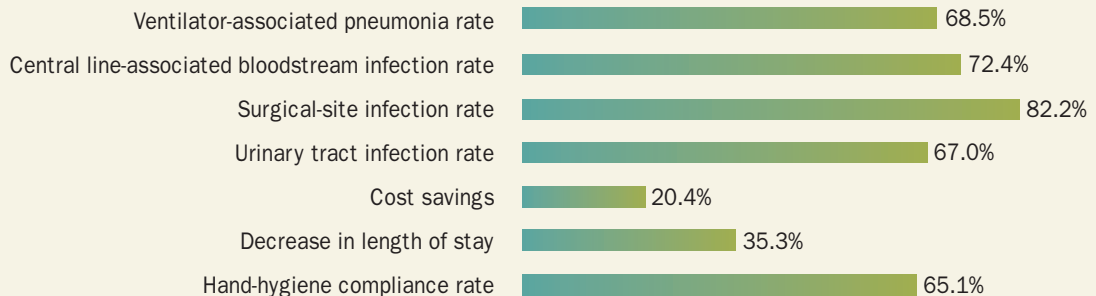


Hospitals implement HAI prevention strategies

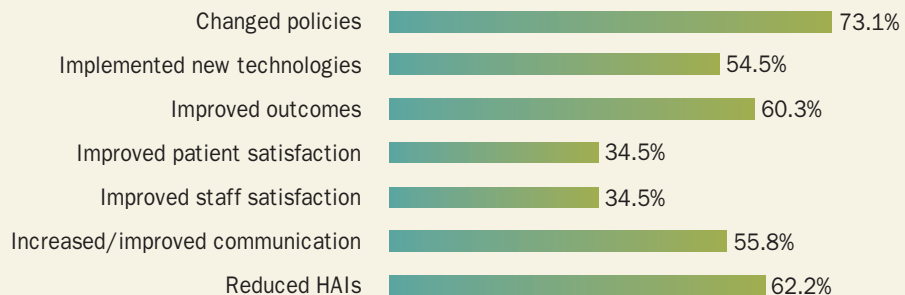
What steps has your organization taken to prevent HAIs?



What metrics does your hospital use to measure reductions in the number of HAIs?



What changes have occurred as a result of your hospital's initiatives to prevent HAIs?



Source: 2008 *Materials Management in Health Care*/AHRMM/APIC Infection Control Survey

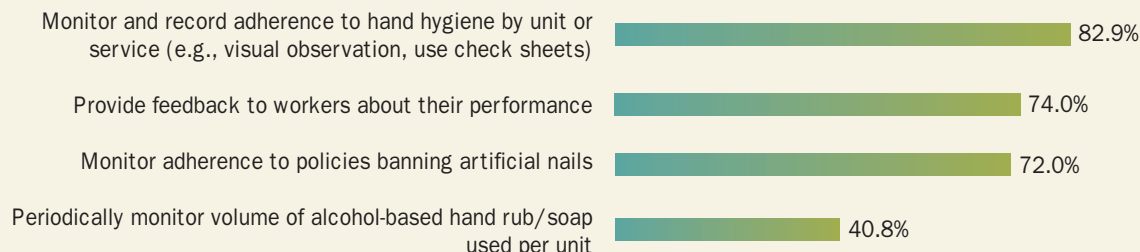


Assessing hand hygiene compliance

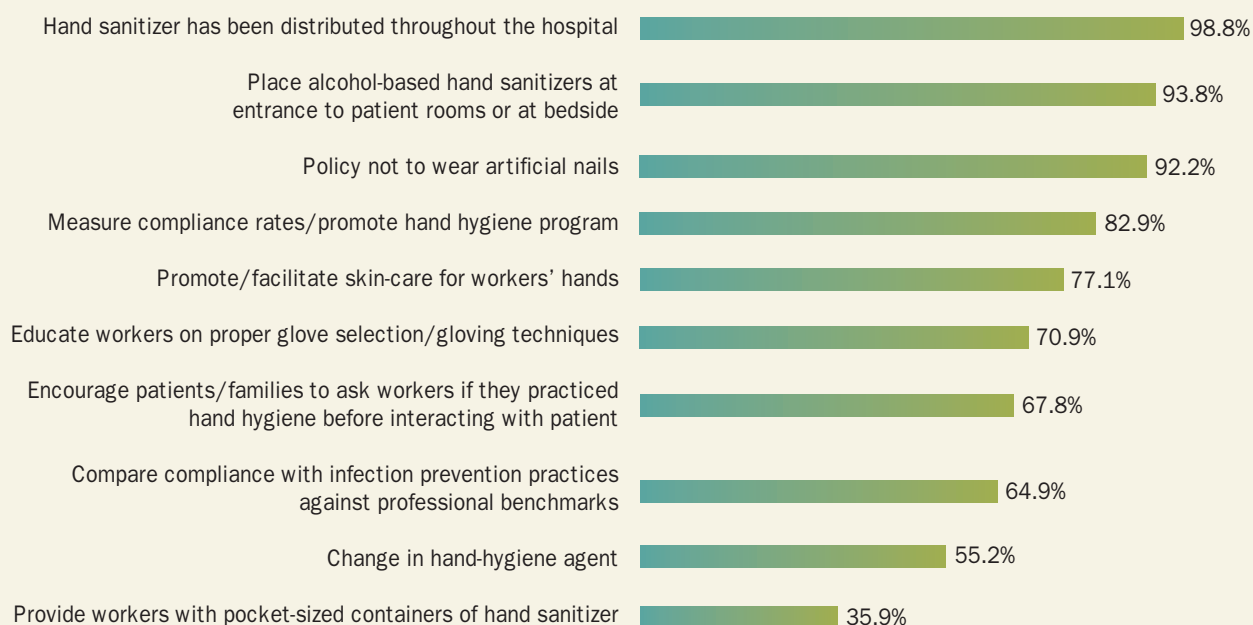
What types of compliance-building programs does your hospital employ?

Program	Currently employ	Plan to employ	Do not employ
Staff education and intervention	98.1%	1.0%	1.0%
Hand hygiene product measurement and usage reporting	61.8%	11.9%	26.2%
Patient empowerment	64.5%	23.1%	12.3%
Monitoring/observation	91.9%	5.4%	2.7%
Behavior modification/change programs	48.4%	19.3%	32.4%
Visual support materials	90.6%	6.4%	3.1%

How does your hospital monitor/measure hand-hygiene compliance?



What strategies have hospitals employed in the last three years to promote hand hygiene?



Note: Figures have been rounded to the nearest 10th of a percentage point and thus may not total exactly 100 percent.

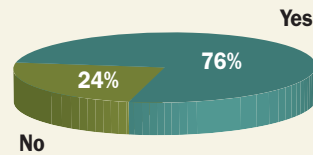
Source: 2008 *Materials Management in Health Care*/AHRMM/APIC Infection Control Survey



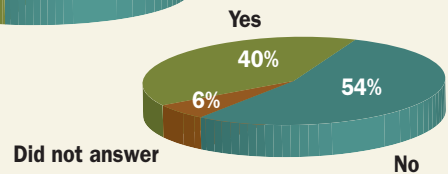
Examining the pace of progress on MRSA

In June 2008, the Association for Professionals in Infection Control & Epidemiology (APIC) released results on an online survey of its members entitled the 2008 MRSA Pace of Progress Poll. The poll was a follow-up survey to APIC's 2006 MRSA Prevalence Survey. The data on this page illustrate the Pace of Progress Poll results.

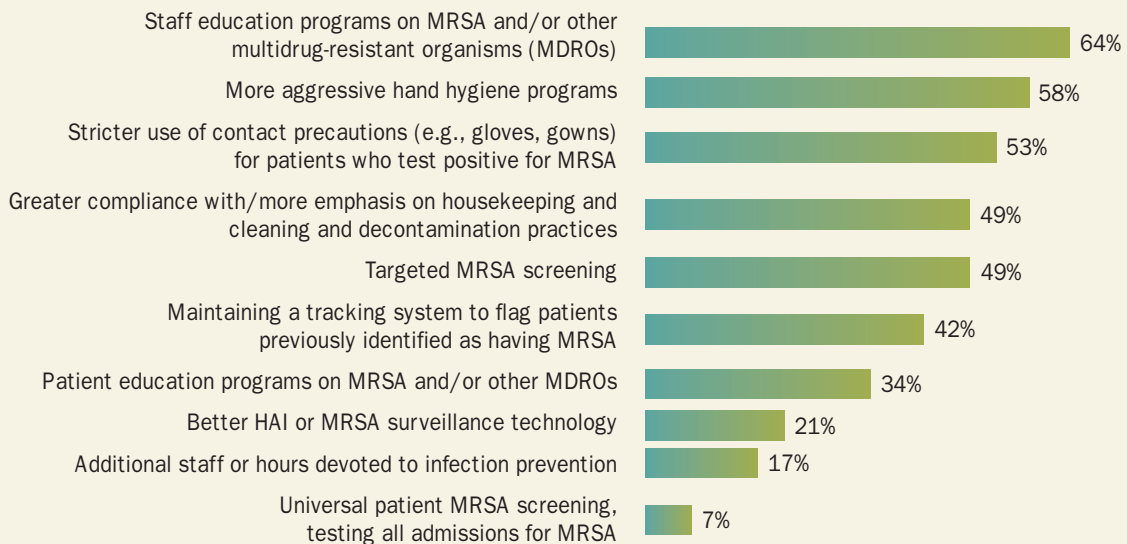
In the one year since the announcement of APIC's MRSA prevalence survey, has your health care facility adopted any additional interventions to address the problem of MRSA?



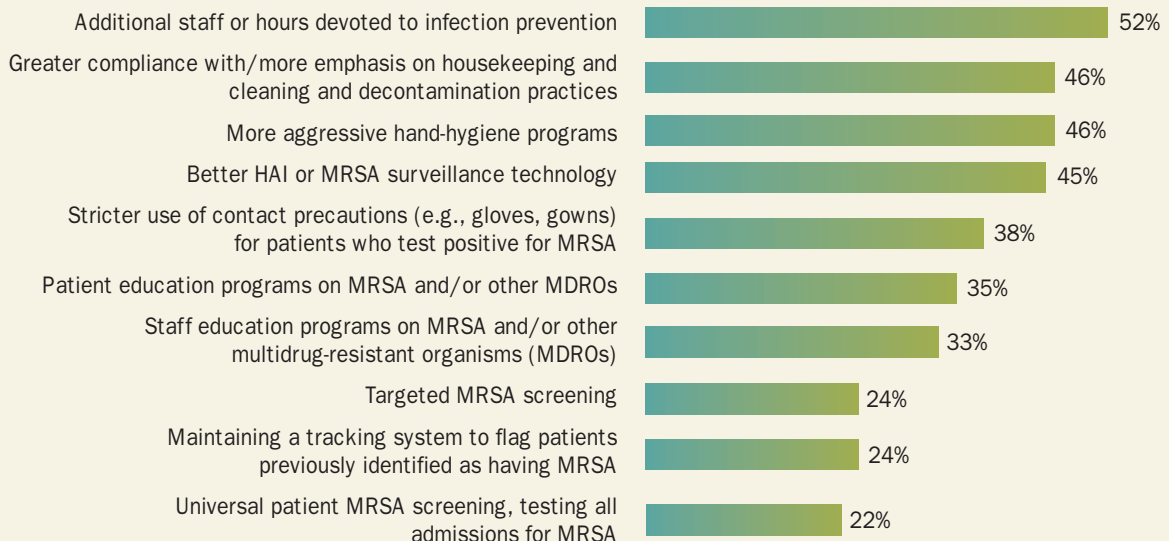
Is your institution doing as much as it could and should be doing to prevent and control MRSA?



What new interventions have you adopted?



What steps do you hope your facility implements?



Source: MRSA Pace of Progress Report, APIC, June 2008