

## **Healthcare-Associated Infection Prevention Strategies Survey**

*Association for Professionals in Infection Control and Epidemiology (APIC)/Premier healthcare alliance*

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### **Areas of needed improvement cited by respondents to prevent healthcare-associated infections (HAIs), improve quality of care:**

#### **1.) Executive and physician leadership**

##### Survey findings:

- Only 15 percent of survey respondents indicated that executive and physician leadership are actively engaged and leading the charge against infections in their facilities;
  - 30.3 percent suggested executives and physicians are the most important resource to meet HAI challenges.
- When asked how HAI data is shared between infection preventionists and executives, 57.6 percent of respondents cited regular agenda discussions at Board meetings;
  - Only 15.3 percent responded that senior leadership provides feedback and recommendations.

##### Opportunities for improvement identified:

- Specific calls to action are needed from physician and administrative leadership to elevate the priority level of HAI management.
- Incorporation of methods for regular sharing of and trends around HAI data with executive leaders.
- Infection prevention needs a team approach focusing on earlier identification and intervention.
- Clinicians stated a need for additional resources and support from administration and other hospital staff to appropriately initiate additional quality and patient safety improvements.

#### **2.) General infection prevention practices and measures**

##### Survey Findings:

- Respondents cited removing unnecessary indwelling urinary catheters (55.5 percent), which can lead to urinary tract infections (UTIs), as the most challenging HAI prevention intervention to implement in their organization.
- Measuring compliance with infection prevention practices, such as hand hygiene (35.5 percent), was also selected as a significant challenge.

##### Opportunities for improvement identified:

- Integration of prevention measures and processes throughout the hospital must be proactive, aggressive and structured.

#### **3.) Education around physician documentation of healthcare-associated conditions (HACs) and HAIs, accurate identification of those that are present on admission (POA).**

##### Survey findings:

- Accurate/appropriate physician documentation of patient records needs improvement - 51.6 percent
- Understanding documentation's affect on new POA codes, needs improvement – 20.2 percent

##### Opportunities for improvement identified:

- In anticipation of the October 1, 2008 changes in Centers for Medicare & Medicaid Services (CMS) reimbursement for hospital-acquired conditions (HAC), physician education is needed to optimize organization readiness.
- Additional education investments may be needed in some medical schools and hospitals on HAI management and documentation, particularly in those hospitals with higher turnover rates.

Total responses: 934 infection prevention and control staff nationwide.

To access the survey results, visit: [www.premierinc.com/about/news/08-sep/APIC-premier-survey.jsp](http://www.premierinc.com/about/news/08-sep/APIC-premier-survey.jsp).