Ready, Set, Go: Know Your Risks

Leadership Tool for a Learning Organization

Infection Prevention and Control in Hospitals

WHY IS INFECTION PREVENTION AND CONTROL IMPORTANT?

- ❑ About 1 in 25 hospital patients has at least one healthcare-associated infection (HAI) on any given day. Roughly 12% of patients with HAIs die during their hospitalization.[1]
- ❑ HAIs are associated with significant morbidity in and of themselves, and they may complicate care of the patient's other conditions. They increase morbidity, costs, and length of stay even after underlying illness is adjusted for.[2]
- ❑ Estimates of the direct medical costs of HAIs to U.S. hospitals range from $28 billion to $45 billion annually.[3]
- ❑ The cost of treating HAIs is not offset largely by reimbursement. HAIs do not garner higher diagnosis-related group reimbursement, they divert resources, and they may affect payment under federal programs to reduce healthcare-associated conditions and readmissions. Patients may sue, and regulatory noncompliance could lead to monetary penalties.[4]

DID YOU ASK?

- ❑ Are our infection preventionists allotted enough work time to perform their infection prevention and control duties and perform rounds? Do they have no or few other competing priorities?
- ❑ Do we pay for our infection preventionists' membership in a professional society for infection prevention and control, as well as allot time for them to attend society meetings and events and pursue further education and certification in infection control?
- ❑ How do we perform surveillance for infectious diseases and evaluate the effectiveness of our infection prevention and control program?
- ❑ How do we promote the appropriate use of antimicrobials?

Need More Information?

As a member of ECRI's risk and patient safety program, you and your staff can access guidance outlining strategies for an effective infection prevention and control program:

- ▶ Guidance: Overview of Infection Prevention and Control
- ▶ Guidance: High-Profile Healthcare-Associated Infections

ECRI can help you with all of your patient safety, quality, and risk management projects. E-mail us at HealthSystemRM@ecri.org.

1 Magill SS, Edwards JR, Bamberg W, et al. Multistate point-prevalence survey of health care-associated infections. *N Engl J Med 2014 Mar 27;370(13):1198-208. Also available at* http://www.nejm.org/doi/full/10.1056/NEJMoa1306801#t=article

2 Sydnor ERM, Perl TM. Hospital epidemiology and infection control in acute-care settings. *Clin Microbiol Rev 2011 Jan;24(1):141-73. Also available at* http://www.ncbi.nlm.nih.gov/pmc/articles/PMC3021207

3 Scott RD II. The direct medical costs of healthcare-associated infections in U.S. hospitals and the benefits of prevention [online]. 2009 Mar [cited 2015 Jul 10]. http://www.cdc.gov/HAI/pdfs/hai/Scott_CostPaper.pdf

4 Demonstrating return on investment for infection prevention and control. Pa Patient Saf Advis [online] 2010 Sep [cited 2015 Jul 21]. http://patientsafetyauthority.org/ADVISORIES/AdvisoryLibrary/2010/Sep7(3)/Pages/102.aspx

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