

Collaboration needed to facilitate rapid response to health-care-associated infections, survey says

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The U.S. Department of Health and Human Services (HHS) estimates that about one in every 20 patients develops an infection each year related to their hospital care. The key to preventing an outbreak of potentially deadly healthcare-associated infections (HAIs) -- such as methicillin-resistant *Staphylococcus aureus* (MRSA) or *C. difficile* -- is identifying them before affected individuals can pose a transmission risk.

But, according to a survey released today by the Association for Professionals in Infection Control and Epidemiology (APIC) and the American Society for Microbiology (ASM), the typical turnaround time for laboratory test results may not be meeting expectations. Greater collaboration between labs and infection preventionists may hold the key to addressing the gap -- and to more effective management of some HAIs.

Most (51 percent) of the infection preventionists (IPs) surveyed indicated that they need results for [MRSA screening tests](#) within 12 hours to initiate the necessary precautions; however, MRSA cultures -- a traditional method for screening -- typically take 24 to 48 hours to complete.

The survey identified two factors that could be addressed to help resolve the discrepancy and reduce HAIs: the need for increased communication

between IPs and lab professionals, and the lack of tools and resources for training and educating all healthcare personnel.

"These survey results indicate that there are areas for improvement in the relationship between IPs and lab professionals to ensure the best [patient outcomes](#)," said Lance Peterson, MD, clinical advisor to ASM, director of Microbiology and [Infectious Diseases](#) Research at NorthShore University Health System (Evanston, IL), and clinical professor at the University of Chicago. "In collaboration, APIC and ASM have the ability to improve communication between the laboratory and [infection prevention](#) and facilitate a more rapid response to HAIs."

IPs and lab professionals surveyed indicated that they would value assistance in relationship building between the two groups (70 percent), hearing about other facilities' experience in creating partnerships (83 percent), more education about best practices (78 percent), and resources for educating themselves and other staff (62 percent). Only 63 percent said their facility has effective infrastructure in place for training and educating staff about HAIs.

"As governing organizations increase penalties, scrutiny and reporting of HAIs, testing for HAIs will become even more important," said Lillian Burns, MT, MPH, CIC, clinical advisor to APIC, and administrative director of Epidemiology/[Infection Control](#), Staten Island University Hospital. "A collaborative working relationship between these two professional groups can significantly improve patient safety and care."

The survey is a first step in the collaboration between APIC and ASM to reduce infections and improve patient outcomes. As part of APIC's Building Bridges initiatives, the IP Col-lab-oration Project aims to improve patient outcomes by bridging the communication gap between IPs and lab professionals, augmenting tools and resources currently available, and educating healthcare personnel. For more information,

please visit www.apic.org/labproject.

The survey was conducted by Mathew Greenwald & Associates (www.greenwaldresearch.com), a full-service market research company, from April 19 through May 11, 2011, with 1,839 respondents (8.9 percent response rate). Most respondents were APIC members (78 percent); ASM members represented 22 percent. Eighty-one percent of respondents work in a hospital setting.

Provided by American Society for Microbiology

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