

National plan for preventing healthcare-associated infections shows progress

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Independent evaluators have found that measurable progress in reducing the rates of some targeted HAIs has been achieved under the umbrella of a national plan to prevent HAIs that was developed by the U.S. Department of Health and Human Services (HHS). The evaluation appears in a special February supplement to *Medical Care*.

The evaluators also found that the [National Action Plan to Prevent Healthcare-Associated Infections: Roadmap to Elimination](#) (Action Plan) led to progress in prioritizing HAI preventing practices and coordinating diverse national data sources for tracking HAIs.

Report Shows Progress in Meeting Goals for Fighting HAIs

The supplement presents 14 papers submitted as part of a formal evaluation of the HHS Action Plan, conducted by IMPAQ International and the RAND Corporation. While HAIs are not a new problem, several aspects of the modern health care—such as widespread use of antibiotics and invasive medical procedures—contribute to the occurrence of HAIs and the challenges in eliminating them. The special issue can be accessed on the [Medical Care](#) website.

"There is widespread recognition of the personal and financial costs associated with HAIs, including the potential for loss of life or impaired functioning, billions of dollars spent annually to treat HAIs, and

decreasing public trust in the health care system," according to an overview by Dr Katherine L. Kahn of RAND and colleagues. "The goal of the HHS Action plan is to enhance collaboration and coordination and strengthen the impact of national efforts to address HAIs."

A key first step in the Action Plan was the selection of six top-priority HAIs: catheter-associated urinary tract infection, surgical site infection, *Clostridium difficile* infection, central line-associated bloodstream infection, methicillin-resistant *Staphylococcus aureus* (MRSA), and ventilator-associated events.

A second major focus was to improve collaboration and coordination of the HAI data systems maintained by various HHS agencies. Along with Daniel Weinberg, PhD, of IMPAQ, Dr. Kahn coauthored a study examining the strengths and weaknesses of data systems for monitoring priority HAIs. The authors highlight the importance of clinical validity, ability to capture a broad range of HAIs, large samples, representativeness, and consistency of cohort, surveillance definition, and system function. Using the available databases, the authors found concordance in HAI trend rates for most, but not all, priority HAIs.

Evaluators Highlight Need for 'Steady Flow of Resources'

While several key Action Plan goals have been met, Dr Kahn and colleagues point out that a "predictable and steady flow of resources" dedicated to curbing HAIs has not always been readily available. They note that many participating agencies have found effective and creative ways to leverage existing resources—on an ad hoc basis—to meet program goals. However, the evaluators believe that the absence of stable resources has slowed progress in identifying and implementing effective approaches to preventing HAIs.

Moving forward, Action Plan leaders at HHS face important decisions regarding how best to sustain momentum in the nationwide effort to reduce and eventually eliminate HAIs. One possible strategy is, "aligning with or embedding within" larger healthcare efforts, such as the patient safety and implementation science movements. Other options include using health information technology, specifically electronic health records, to support HAI data collection and monitoring, and adopting state-of-the-art implementation and dissemination tools to help spread the adoption of HAI prevention practices.

"The potential for alignment offers opportunities to leverage existing resources and capabilities within the health care system on an ongoing basis," Dr Kahn and colleagues write. They add that "regular evaluation of HAI-related efforts, including self-monitoring of key implementation goals" will also be essential to ensure that efforts to track and respond to HAIs stay on track in the years ahead.

Provided by Wolters Kluwer Health

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