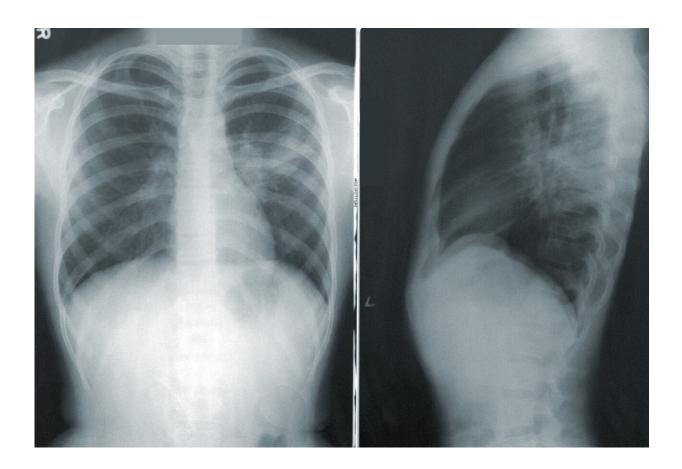


Health care leaders call for national focus on preventing hospital-acquired pneumonia

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A group of health care leaders, including a University of Massachusetts Amherst nurse innovator, has published a national call to action to prevent non-ventilator-associated, hospital-acquired pneumonia



(NVHAP).

This call to action was developed by a joint task force of key national healthcare stakeholders, including the Centers for Disease Control and Prevention (CDC), the Veterans Health Administration, The Joint Commission on Accreditation of Healthcare Organizations, the American Dental Association, the Patient Safety Movement Foundation, Oral Health Nursing Education and Practice, Teaching Oral-Systemic Health and academia.

In a commentary paper published in the journal Infection Control & Hospital Epidemiology (ICHE), the joint task force, which included UMass Amherst's Karen K. Giuliano, lays out their recommendations for improved research and prevention efforts to reduce harm from NVHAP.

According to the National Organization to Prevent Hospital-acquired Pneumonia (NOHAP), most hospitals do not track, report or have initiatives to actively prevent NVHAP, even though it's the most common <u>hospital</u>-acquired infection.

The negative patient outcomes associated with NVHAP include 15-30% mortality, extended hospital length of stay, unexpected ICU admission of up to 46% and increased risk for hospital readmission within 30 days, according to the ICHE paper.

Unlike ventilator-associated pneumonia (VAP) and other deviceassociated hospital-acquired infections, NVHAP is not recognized as one of the National Database of Nursing Quality indicators, nor do the Centers for Medicare and Medicaid Services (CMS) require hospitals to report cases to the CDC National Healthcare Safety Network or include it in pay-for-reporting or performance programs.

NVHAP is one focus of Giuliano's ongoing research, for which she



received the Association for Professionals in Infection Control and Epidemiology's 2020 award for publication excellence.

"The hidden harm from NVHAP in acute care is a significant patient safety issue. NVHAP should be elevated to the same level of concern, attention and effort as prevention of VAP in hospitals," says Giuliano, who holds a joint position as an associate professor in the College of Nursing and the Institute for Applied Life Sciences (IALS), and is codirector of the recently launched Center for Nursing and Engineering Innovation.

In addition to raising awareness about NVHAP, the paper recommends educating patients, health care professionals and students about prevention measures, including standardized, therapeutic oral care for all patients; implementing surveillance strategies; and supporting research to develop new strategies for both surveillance and prevention.

"Adding NVHAP to these lists of high-stakes conditions is one way to draw hospitals' attention to NVHAP, to catalyze the discovery of optimized prevention initiatives and implementation strategies, and drive down NVHAP incidence and morbidity," the white paper concludes.

More information: Shannon C. Munro et al, Nonventilator hospitalacquired pneumonia: A call to action, *Infection Control & Hospital Epidemiology* (2021). DOI: 10.1017/ice.2021.239

Provided by University of Massachusetts Amherst

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