

Creative approach, diversified infection prevention and control roles create on-ramp for non-traditional hospital staff

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In an era of hospital budget cuts and staffing freezes, a Florida hospital more than doubled staff positions for infection prevention and control

(IPC) over a four-year period, reducing infections and creating opportunities for non-clinical team members to enter the field and excel.

By presenting a [business case](#) showing costs of excess health care-associated infections (HAIs), infection preventionist (IP) Luz Caicedo, MPH, CPH, CIC, CRCST, VA-BC at AdventHealth in Celebration, Florida was able to increase IPC staff from 2 to 4.8 full-time equivalents (FTEs) and decrease HAIs and communicable disease exposures between 2019 and 2023, according to an oral abstract presented at the [2024 APIC Annual Conference](#). She also created an IPC career ladder with diversified roles, outlining career progression and enhancing retention among the team.

The oral abstract, "[Advancing Infection Prevention: Navigating Staffing Growth and Implementing a Career Ladder \(LDPM 16\)](#)" is being presented at 1:41pm CT, June 4, at the APIC Annual Conference in San Antonio, Texas.

When Caicedo joined AdventHealth in 2019, there were just two [full-time](#) equivalent IPs on staff and the 217-bed Florida hospital was in the midst of an expansion to accommodate 357 beds, in addition to bringing on more operating rooms, catheterization labs, [interventional radiology](#), endoscopy, and ambulatory sites. Already understaffed and unable to visit operating rooms or ambulatory sites more than a few times a year, Caicedo knew she needed to expand IP capacity to adequately protect patients and staff from HAIs.

To assess the resources necessary to provide adequate coverage and build her business case, she based her ideal IP staffing ratio not just on the number of inpatient beds, but also on the hospital's growing number of procedural areas and outpatient service lines, using the [2012 New York State Acute Care Bed equivalent](#) as a model.

Starting with surgical site infections (SSIs), she was able to convince hospital leaders to let her hire a new IP to cover the surgical service. When SSIs decreased markedly, she received approval for additional staff. As a result of expanding the size of the IP team from 2 in 2019 to 4.8 FTEs in 2023, AdventHealth Celebration achieved a 37% decrease in CLABSIs, and a 45% decrease in health care-onset *C. difficile* as the hospital increased its operations.

"Our Chief Nursing Officer is very supportive of the IPC department because we've been able to show her results," said Caicedo. "Every time that she has invested IPC staff positions, we've been able to lower our infection rates."

With approval to grow the department came the challenge of determining the type of positions to bring on. To address this, Caicedo created an IPC career ladder and diversified the roles in the department to include an entry-level IP Associate and IP Coordinator, as well as Infection Preventionist, and IP Manager. This structured career progression has enhanced retention and has created pathways for non-clinical team members to enter the field.

Additional staffing has allowed the IPC team to introduce quality improvement initiatives like building dashboards to track device rounds, launching a "CAUTI bootcamp," which has dramatically reduced catheter-associated [urinary tract infections](#), and working with the lab to lower blood culture contamination rates.

"The work that the AdventHealth IPC team is undertaking and the success they have achieved would be impossible without proper staffing," said Tania Bubb, Ph.D., RN, CIC, FAPIC, 2024 APIC president. "Their success is a testament to the support received from hospital leaders and also to Luz's ability to demonstrate that investment in [infection prevention](#) can impact the whole facility. Tools like the

[APIC IP Staffing Calculator](#) and the one that Luz used can help facilities quantify IPC staffing needs to make the case for adequate resources."

Provided by Association for Professionals in Infection Control

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