

## **CDC: Engaging Partners in Infection Prevention and Control in Acute Care Hospitals**

### **Fact Sheet**

#### **Overview**

The Health Research & Educational Trust (HRET) of the American Hospital Association (AHA) and the Centers for Disease Control and Prevention (CDC) are launching a three-year initiative to improve implementation of infection prevention and control efforts in U.S. hospitals. HRET will be working to recruit at least 300 hospitals across the country into this initiative.

CDC is currently providing technical assistance to state health departments and other partners, including the CMS Quality Innovation Network-Quality Improvement Organizations (QIN-QIOs), to strengthen infection control practices in targeted facilities. CDC has also engaged with state health departments and other partners on smaller scale projects that focus on specific infections. This project will work with state hospital associations, state health departments, QIN-QIOs and other applicable partners to foster collaborative relationships and provide technical assistance to hospitals to improve infection prevention and control.

#### **Project Aims and Benefits**

The purpose of this initiative is to improve implementation of infection prevention and control efforts in acute care hospitals and long-term acute care hospitals across the United States. The aim is to accelerate current strategies to:

- Achieve reductions in the overall burden of HAIs
- Strengthen infection control practices by expanding the use of the Targeted Assessment for Prevention (TAP) strategy
- Build and strengthen relationships between state hospital associations, state health departments and QIN-QIOs
- Improve implementation of infection control practices in existing and newly constructed health care facilities

This project will use CDC’s National Healthcare Safety Network (NHSN) to identify short-stay acute care hospitals that have a high burden of *Clostridium difficile* infection (CDI) and at least one of the following infections:

- Central line-associated bloodstream infections (CLABSIs)
- Catheter-associated urinary tract infections (CAUTIs)
- Methicillin-resistant *Staphylococcus aureus* (MRSA) bloodstream infections

Long-term acute care hospitals are encouraged to join the program; however, NHSN standardized infection ratio (SIR) data on CDI or MRSA bacteremia are not currently available for these hospitals.

This project will strengthen working relationships among state hospital associations, state health departments and QIN-QIOs to ensure consistency in communication and alignment of prevention activities with targeted facilities. Hospital leadership and state hospital associations will be engaged to support state health department technical assistance to hospitals. The project will identify barriers to and facilitators of hospital engagement and will provide recommendations for overcoming barriers, enhancing facilitators and improving direct outreach to targeted facilities.

Participating hospitals will have the benefit of:

- Reducing HAI morbidity and mortality
- Assistance in accelerating current strategies for reducing infections
- Networking and learning with peer hospitals
- Opportunities to interact with expert national faculty
- Data submission and interpretation training and support
- Performance benchmarking with other participating hospitals

## Resources

HRET will work closely with the American Society for Healthcare Engineering (ASHE) to develop resources to help design and redesign hospitals in ways that reduce infection risks to patients and staff. Other project partners include:

- Association for Professionals in Infection Control and Epidemiology (APIC)
- University of Michigan (UofM)
- Michigan Health & Hospital Association Keystone Center (MHA)
- HealthInsight QIN (HI)
- Society of Hospital Medicine (SHM)

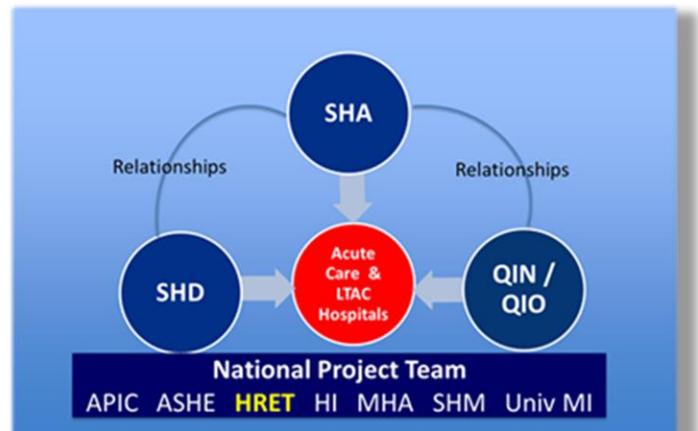


Figure 1: Key partnerships with Acute Care and LTAC Hospitals