2015

APIC Ebola Readiness Follow-up Poll

Results of a follow-up online poll of infection preventionists



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APIC Ebola Readiness Poll

About the Association for Professionals in Infection Control and Epidemiology (APIC)

APIC is the leading professional association for infection preventionists (IPs) with more than 15,000 members. APIC's mission is to create a safer world through prevention of infection. The association advances its mission through patient safety, implementation science, competencies and certification, advocacy, and data standardization.

Most APIC members are nurses, physicians, public health professionals, epidemiologists, or medical technologists who:

- Collect, analyze, and interpret health data in order to track infection trends, plan appropriate interventions, measure success, and report relevant data to public health agencies.
- Establish scientifically based infection prevention practices and collaborate with the healthcare team to assure implementation.
- Work to prevent healthcare-associated infections (HAIs) in healthcare facilities by isolating sources of infections and limiting their transmission.
- Educate healthcare personnel and the public about infectious diseases and how to limit their spread.

Many IPs are employed within healthcare institutions and also serve as educators, researchers, consultants, and clinical scientists. The majority of APIC members are affiliated with acute care settings. An increasing number practice in ambulatory and outpatient services where they direct programs that protect patients and personnel from HAIs. Members are also involved in long-term care, home health, and other practice settings where infection prevention and control is an increasing area of responsibility for nurses and other healthcare personnel.

APIC's educational programs, products, and services support the infection prevention activities of the many patient safety stakeholders. APIC collaborates with other professional associations, consumer groups, and thought leaders, as well as regulatory and accrediting bodies, to maximize the synergy of shared interests and resources with the goal of improving patient outcomes. Visit APIC online at www.apic.org.

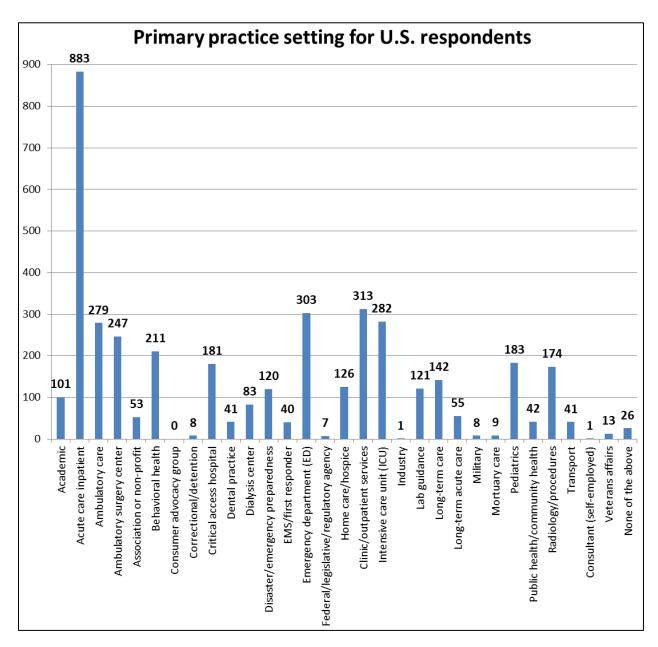
About the readiness follow-up poll

APIC distributed an online survey consisting of 24 open- and closed-ended questions to its 15,000 infection preventionist members on Thursday, December 18, 2014. The survey concluded on Monday, January 5, 2015.

The Ebola Readiness Follow-up Poll provides insight on member preparedness concerning Ebola. The intent is to determine to determine the ongoing needs of infection preventionists and other healthcare workers as they continue to prepare for possible patients with the Ebola virus. Survey responses help APIC be proactive in providing necessary support to members and will provide a better understanding of Ebola preparations among APIC members.



A total of 1,313 infection preventionists from the United States took the follow-up survey. Results from this survey are based on the 883 infection preventionists respondents located in the United States who practice in an acute care inpatient facility.

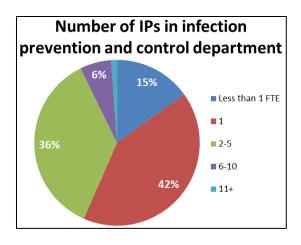




The following results include U.S.-based infection preventionists working in an acute care inpatient facility.

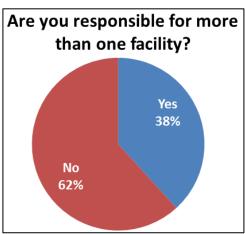
Indicate the number of infection preventionists in your infection prevention and control department.

your infection prevention and control at			
Response	Count	Percentage	
Less than 1 FTE	133	15%	
1	366	41%	
2-5	319	36%	
6-10	54	6%	
11+	10	1%	
Grand Total	882		



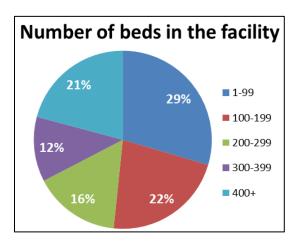
Are you responsible for more than one facility?

Response	Count	Percentage
Yes	336	38%
No	543	62%
Grand Total	879	



Indicate the number of beds in your facility.

Response	Count	Percentage
1-99	261	30%
100-199	195	22%
200-299	139	16%
300-399	104	12%
400+	184	21%
Grand Total	883	





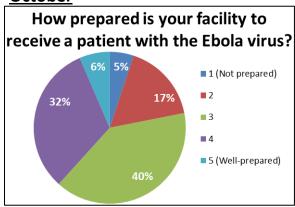
How prepared is your facility to receive a patient with the Ebola virus?

(From 1 not prepared to 5 well-prepared)

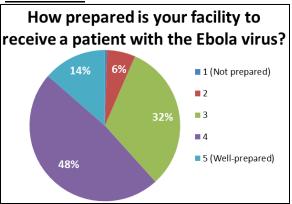
Catalana			
October			
Response	Count	Percentage	
1 Not prepared	53	5%	
2	174	17%	
3	413	40%	
4	330	32%	
5 Well-prepared	67	6%	
Grand Total	1037		

December				
Response Count Percentage				
1 Not prepared	5	1%		
2	40	5%		
3	238	32%		
4	354	48%		
5 Well-prepared	99	13%		
Grand Total	736			

October



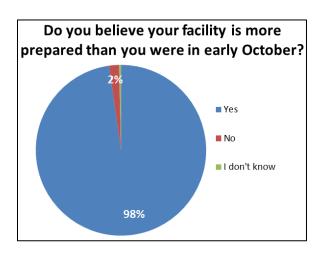
December



The overall weighted average preparedness ranking for October is 3.2. The weighted average preparedness ranking for December is 3.7. There was a 16 percent increase in preparedness among the facilities. Unprepared rankings (1 and 2) decreased 72 percent from October to December. Additionally, preparedness rankings (4 and 5) increased 61 percent.

Do you believe your facility is more prepared than you were in early October?

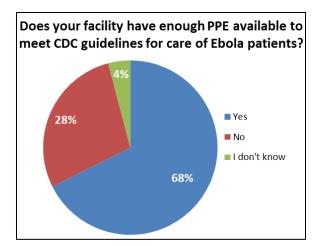
Response	Count	Percentage
Yes	833	98%
No	16	2%
I don't know	3	0%
Grand Total	852	





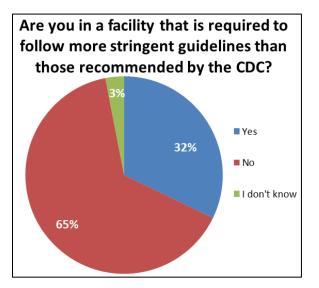
Does your facility have enough PPE available to meet CDC guidelines for care of Ebola patients?

		<u> </u>
Response	Count	Percentage
Yes	577	68%
No	241	28%
I don't know	35	4%
Grand Total	853	



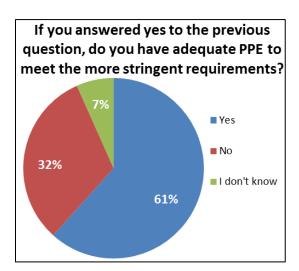
Are you in a facility that is required to follow more stringent guidelines than those recommended by the CDC?

Response	Count	Percentage
Yes	274	32%
No	552	65%
I don't know	26	3%
Grand Total	852	



If you answered yes the previous question, do you have adequate PPE to meet the more stringent requirements you are required to follow?

Response	Count	Percentage
Yes	185	62%
No	95	32%
I don't know	20	7%
Grand Total	300	



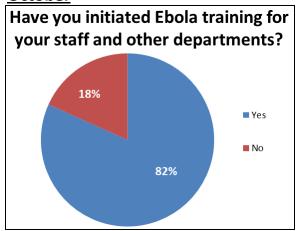


Have you initiated Ebola training for your staff?

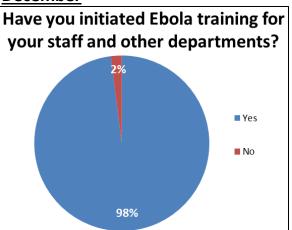
October		
Response	Count	Percentage
Yes	845	82%
No	189	18%
Grand Total	1037	

December		
Response	Count	Percentage
Yes	827	98%
No	17	2%
Grand Total	844	

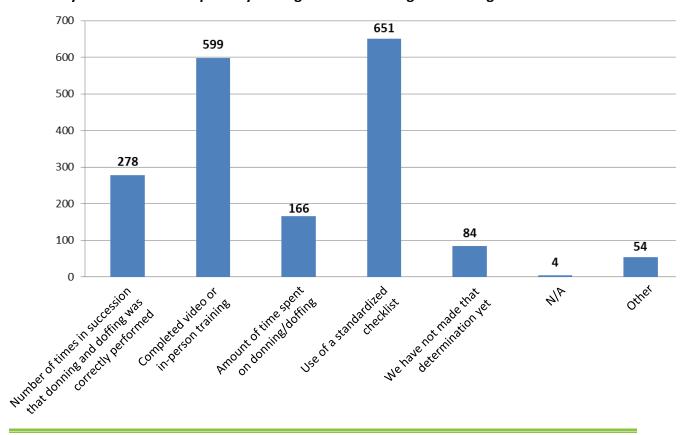
October



December



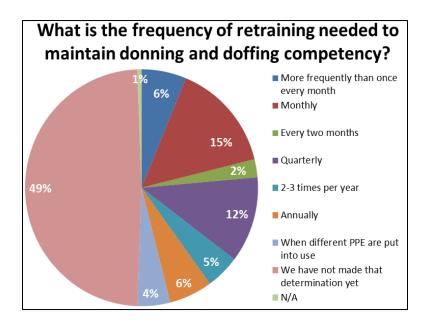
How did you determine competency among staff on donning and doffing PPE?





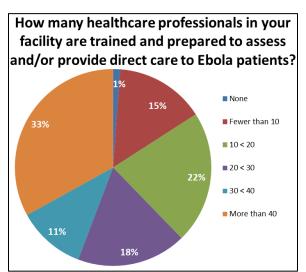
What is the frequency of retraining needed to maintain donning and doffing competency?

Response	Count	Percentage
More frequently than once every month	53	6%
Monthly	127	15%
Every two months	21	2%
Quarterly	100	12%
2-3 times per year	40	5%
Annually	51	6%
When different PPE are put into use	39	5%
We have not made that determination yet	416	49%
N/A	5	1%
Grand Total	852	



How many healthcare professionals in your facility are trained and prepared to assess and/or provide direct care to Ebola patients?

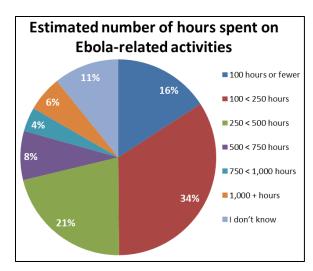
Response	Count	Percentage
None	10	1%
Fewer than 10	108	14%
10 < 20	162	22%
20 < 30	131	18%
30 < 40	81	11%
More than 40	253	34%
Grand Total	745	





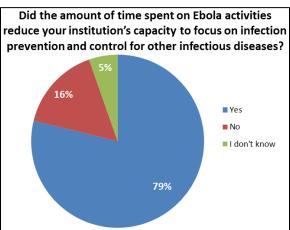
Please estimate the number of hours you have spent on Ebola-related activities.

Response	Count	Percentage	
100 hours or fewer	135	16%	
100 < 250 hours	290	34%	
250 < 500 hours	182	21%	
500 < 750 hours	69	8%	
750 < 1,000 hours	34	4%	
1,000 + hours	50	6%	
I don't know	92	11%	
Grand Total	852		

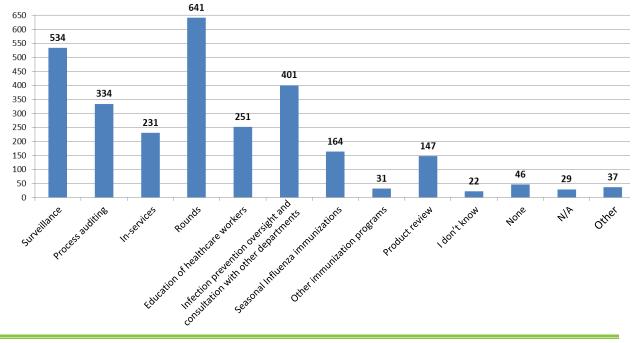


Did the amount of time spent on Ebola activities reduce your institution's capacity to focus on infection prevention and control for other infectious diseases?

Response	Count	Percentage
Yes	673	79%
No	135	16%
I don't know	46	5%
Grand Total	854	



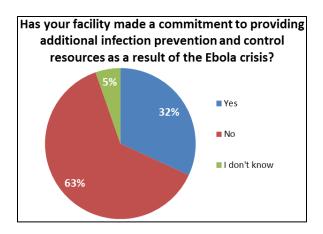
With the intensive re-direction of activities toward Ebola, what infection prevention areas did not receive adequate attention and should have received more attention?





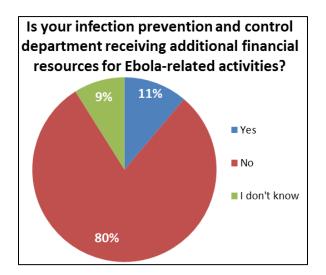
Has your facility made a commitment to providing additional infection prevention and control resources as a result of the Ebola crisis?

Response	Count	Percentage
Yes	268	32%
No	528	63%
I don't know	45	5%
Grand Total	841	



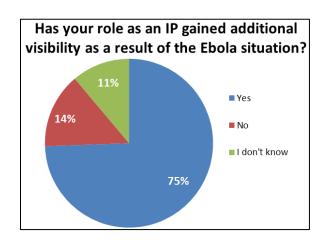
Is your infection prevention and control department receiving additional financial resources for Ebola-related activities?

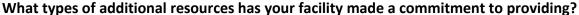
Response	Count	Percentage
Yes	94	11%
No	670	80%
I don't know	75	9%
Grand Total	839	

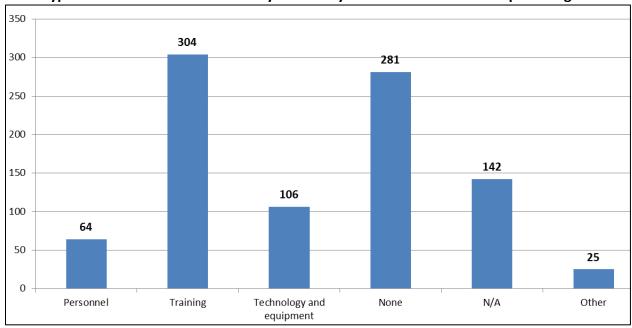


Has your role as an IP gained additional visibility as a result of the Ebola situation?

Response	Count	Percentage
Yes	620	75%
No	120	14%
I don't know	93	11%
Grand Total	833	







Label descriptions

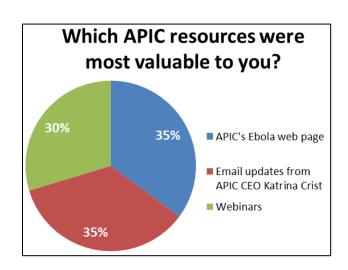
Personnel—Additional staff to support the facility's infection prevention and control program

Training—Additional resources to train healthcare workers to prepare for potential Ebola patients

Technology and equipment—Including personal protective equipment and point of care laboratory equipment, as well as infection surveillance, tracking, and monitoring technology to ease surveillance burden.

Which APIC resources were most valuable to you? (select all that apply)

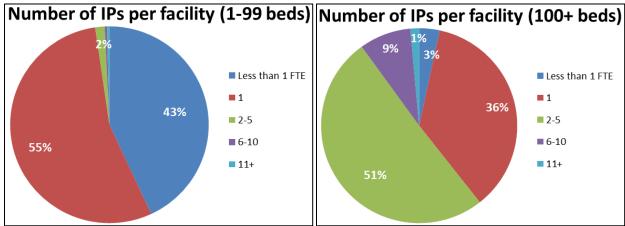
Response	Count
APIC's Ebola web page	561
Email updates from APIC CEO Katrina Crist	562
Webinars	474
Grand Total	1597

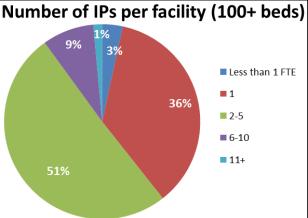


The following results include U.S.-based infection preventionists working in an acute care inpatient facility, separated by the number of infection preventionists working in the facility.

Indicate the number of IPs per facility, broken down by number of beds.

	1-99 beds	100+ beds	Grand Total
Number of IPs			
Less than 1 FTE	112	21	133
1	142	224	366
2-5	4	315	319
6-10	1	53	54
11+	1	9	10
Grand Total	260	622	882





How prepared is your facility to receive a patient with the Ebola virus? (From 1 not prepared to 5 well-prepared)

	1 Not prepared	2	3	4	5 Well-prepared	Grand Total
Number of IPs						
Less than 1 FTE	3	14	41	56	15	129
1	1	21	124	166	38	350
2-5	0	15	92	145	46	298
6-10	0	1	8	32	11	52
11+	0	0	0	4	4	8
Grand Total	4	51	265	403	114	837

