

## **2013 PARTNERSHIP IN PREVENTION AWARD**

**Sponsored by:**

**U.S. Department of Health & Human Services (HHS)**

**Association for Professionals in Infection Control and Epidemiology, Inc (APIC)**

**Society for Healthcare Epidemiology of America (SHEA)**

The award program will recognize prevention leaders in the U.S. acute care community who have achieved wide-scale reduction and progress toward elimination of targeted health care associated-infections (HAIs). It also intends to showcase the outstanding efforts of clinicians, hospital executives, and hospital facilities that have improved clinical practice through utilization of evidence-based guidelines, achieved and maintained superior prevention results, and advanced best practices to improve patient safety.

### **AWARD**

- The award recipient will be presented with a plaque by senior-level HHS, APIC, and SHEA officials in Washington, DC during International Infection Prevention Week, October 20-26, 2013.
- HHS, APIC, and SHEA also may recognize the award recipient at other events and/or meetings, as well as through various communications platforms.
- Local HHS, APIC, and SHEA representatives in the award recipient's city may recognize the award recipient by visiting the facility or through other local recognition events or media activities.
- Honorable mentions may be awarded.

### **ELIGIBILITY CRITERIA**

- Award candidate team must include executive team representatives (e.g., CEO, COO, CFO, CNO, CMO), healthcare epidemiology and infection prevention and control leader and personnel involvement, and other sectors relevant to infection prevention and control (e.g., pharmacy, environmental health, occupational health).
- The multidisciplinary team may be established (i.e., as in a committee or task force) or may represent an ad hoc team formed around a unique initiative. The candidate team should submit evidence documenting the impact of the team-led program(s), action(s), or policy(ies) implemented as part of the intervention or prevention program. Refer to the "Data Requested" section below for more information on evidence to be submitted.

- Award candidate team may be a hospital unit or represent multiple units, including the hospital as a whole-house applicant. **We especially encourage hospitals to submit applications for either whole-house accomplishments or successes achieved in, intensive care units (ICUs) or units other than ICUs.**
- Award submissions may come from a hospital of any size and in any geographic location within the United States (U.S.). Though APIC and SHEA do have an international presence, this award's intent is to honor U.S. hospitals that are working to achieve the goals set forth in the [Partnership for Patients](#) and the [National Action Plan to Prevent Health Care-Associated Infections: Roadmap to Elimination](#).

## DATA REQUESTED

**Evidence submitted by the award candidate team should demonstrate excellence according to at least one of the two outcome measures and at least two of the three process measures listed below:**

### *Outcome Measures*

1. Demonstration of reductions in two or more of the below-listed HAIs as part of the Partnership for Patients goal of an overall 40-percent<sup>a</sup> reduction in preventable hospital-acquired conditions by the end of 2013. The reductions can take place in one or more hospital units.<sup>b</sup> Provide and define the specific measures that the candidate team used to assess and improve the specific HAI(s) that were targeted.
  - Catheter-associated urinary tract infection (CAUTI)
  - Central-line associated bloodstream infection (CLABSI)
  - *Clostridium difficile* infection (CDI)
  - Surgical site infection (SSI)
  - Ventilator-associated pneumonia (VAP)
  - a. Data that specifically includes denominator data, statistical analysis (e.g., confidence intervals, p-values), and statistically significant reductions when describing accomplishments will be weighted higher during the application review process.
  - b. Applicants that show reductions in two or more units will be weighted higher during the application review process.
2. Demonstration of reduced hospital readmissions due to infectious complications as part of the Partnership for Patients goal of a 20-percent<sup>a</sup> reduction in hospital readmissions. Provide and define the specific measure that the award candidate team used to assess and improve hospital readmissions due to infectious complications.

- a. Data that specifically includes statistical analysis (e.g., confidence intervals, p-values) and statistically significant reductions when describing accomplishments will be weighted higher during the application review process.

### *Process Measures*

1. Demonstration of adherence to published guidelines<sup>c,d</sup> for infection control and prevention or evidence-based practices for infection control and prevention. Please provide information on the practices employed by the candidate team to reduce the targeted HAI(s). Provide and define the measures that the candidate team used to assess and improve adherence to select evidence-based practices (e.g., compliance with using central-line insertion bundles, hand-washing, daily assessment of readiness to extubate, improved terminal cleaning of patient rooms, antibiotic use assessments).
  - c. Please name the guidelines that were used to reduce HAIs in your hospital.
  - d. Hospitals that report that they used two or more guidelines will be weighted higher during the application review process.
2. Demonstration of improved measurable processes<sup>e</sup> attributed to increased organizational capacity and/or expanded infrastructure for infection prevention in one or more areas of the facility. Provide and define the specific measures that the candidate team used to assess and improve organizational capacity and/or expanded infrastructure.
  - e. Hospitals that report that they used two or more processes will be weighted higher during the application review process.
3. Demonstration of improved measurable processes<sup>f</sup> supporting the use of team-based, collaborative infection prevention models. Provide and define the specific measures that the candidate team used to assess and support the use of team-based, collaborative models.
  - f. Hospitals that report that they used two or more processes will be weighted higher during the application review process.

## **APPLICATION PACKAGE**

Please use the following checklist to ensure a complete application package:

- **Nomination Letter**
  - No more than two double-space pages
  - Describe why the award candidate team should be considered for the award and include the following:
    - ***Introductory Statement:***

- A concise introductory section briefly “pitching” your story (250 words maximum)
  - ***Operating Bed Count:*** (for contextual purposes only and not part of the evaluation criteria)
    - Total hospital
    - Unit(s) where intervention took place
- **Data**
  - No more than 10 double-space pages, including appendices.
  - Any content provided in this section beyond 10 double-space pages will not be reviewed.
  - Deconstruct the story and support it with evidence according to the criteria listed below.
  - ***Baseline Data***
    - Baseline data for at least three months prior to the program start
  - ***Achievement Data***
    - Achievement data for at least 18 months
- **Two Letters of Support:**
  - Should be from persons who work with the award candidate team in promoting infection prevention and control.
  - Letters of support can come from a variety of sources, including sources outside the hospital, but must be from persons with whom you work closely to reduce HAIs (e.g., Quality Improvement Organization, state hospital associations, etc.).
- **Designated Contact:**
  - Indicate a designated person and contact information for the application.
- **Completed Application Package Submission:**
  - Submit a complete application as a Microsoft Word file in a single e-mail to awards@apic.org.
  - E-mail subject line: “2013 HHS-APIC-SHEA Partnership in Prevention Award”
  - Deadline for receipt of applications including necessary supplemental information is **July 15, 2013** by 8:00 PM, ET.
  - Incomplete applications will not be processed.
- **Costs**
  - There is no cost associated with applying for the award.

## **PROJECTED TIME FRAME**

- Open Application Period: April 1, 2013 to July 15, 2013
- Award Notification: September 15, 2013

- Award Date: International Infection Prevention Week, October 20-26, 2013. Final Award presentation date TBD.

## **FOR QUESTIONS AND INFORMATION**

Please contact the HHS/APIC/SHEA Awards team at [awards@apic.org](mailto:awards@apic.org) if you have any questions.