October 15, 2010

Carolyn Clancy, MD  
Director  
Agency for Healthcare Research and Quality  
Room 3216  
540 Gaither Road  
Rockville, MD 20850  
Attn: Nancy Wilson  

Re: Comments on the National Health Care Quality Strategy and Plan

Dear Dr. Clancy;

The Association for Professionals in Infection Control and Epidemiology (APIC), wishes to thank you for the opportunity to provide input on the National Health Care Quality Strategy and Plan. APIC’s mission is to improve health and patient safety by reducing risks of infection and other adverse outcomes. Our more than 13,500 members direct infection prevention programs that save lives and improve the bottom line for hospitals and other healthcare facilities around the globe. APIC strives to promote a culture within healthcare where targeting zero healthcare-associated infections (HAIs) is fully embraced. The organization advances its mission through education, research, collaboration, practice guidance, and public policy. Among our efforts are sharing best practices for preventing, identifying, monitoring, and treating HAIs, as well as the collection of meaningful data for internal improvement and public reporting. As such we are pleased to offer the following responses to select questions posed in the Plan:

1. Are the proposed Principles for the National Strategy appropriate? What is missing or how could the principles be better guides for the Framework, Priorities and Goals?

APIC agrees and supports the Principles Guiding the National Quality Strategy. We do feel the engagement of patients and their families in prevention of infection should be encouraged to a greater extent. For example, there are roles and responsibilities that patients and families can play in enhancing our unified goal of eliminating healthcare-associated infections (HAIs). These include assuring receipt of recommended immunizations against vaccine preventable diseases, especially among adults; key steps to prepare for a surgical procedure; and both encouraging providers and participating in hand hygiene when in healthcare facilities. The Association sponsors a website that highlights some of the roles that consumers of care can play to help prevent HAIs [see http://preventinfection.org ].
APIC, along with the Centers for Disease Control and Prevention and several other professional organizations, recently published a position paper on the elimination of HAIs.¹ Some essential elements outlined in the paper to realize this goal include:

i) to promote adherence to evidence-based practices through partnering, educating, implementing, and investing;

ii) to increase sustainability through the alignment of financial incentives and reinvestment in successful strategies;

iii) to fill knowledge gaps to respond to emerging threats through basic, translational, and epidemiological research; and

iv) to collect data to target prevention efforts and to measure progress.

This paper might be worth reviewing as part of this request for review and comment of the National Quality Plan.

2. Is the proposed Framework for the National Strategy sound and easily understood? Does the Framework set the right initial direction for the National Health Care Quality Strategy and Plan? How can it be improved?

Yes we feel it is sound, logical and sets the right direction.

4. What aspirational goals should be set for the next 5 years, and to what extent should achievable goals be identified for a shorter timeframe?

APIC representatives were honored to participate in a recent meeting convened by the Department of Health and Human Services (HHS), “Progress Towards Eliminating Healthcare-Associated Infections”, on September 23 and 24 in Arlington, Virginia. The multiple disciplines represented at this meeting provided rich and valuable feedback to HHS on the national Action Plan to Prevent Healthcare-Associated Infections. The feedback and input provided speaks directly to this question and we therefore encourage incorporation of the HAI Action Plan into this Quality Plan. APIC also believes HAIs are a very sensitive barometer of performance and appreciates the inclusion of HAIs in the National Health Care Quality Strategy and Plan. At the HHS meeting, we provided some suggestions of timing of goals and strategies for achieving them which are pertinent to this request.

5. Are there existing, well-established, and widely used measures that can be used or adapted to assess progress towards these goals? What measures would best guide public and private sector action, as well as support assessing the nation’s progress to meeting the goals in the National Quality Strategy?

APIC representatives are participating in development of new metrics by the National Quality Forum. There are some recent, draft metrics that the Association is supporting. We would encourage AHRQ’s review and awareness of these new proposed metrics related to HAIs.

Finally, APIC is pleased that the criteria guiding selection of priorities includes “improve research and dissemination of strategies and best practices to improve patient safety and reduce medical errors, preventable admissions and readmissions, and healthcare-associated infections.” To meet this criterion, we recommend that the National Health Care Quality Strategy and Plan align closely with goals of the HAI Action Plan, which has included significant agency and stakeholder input on the issue of HAIs.

Thank you again for the opportunity to provide input. If you would like additional information, please contact Lisa Tomlinson, Senior Director of Government Affairs, at 202-454-2606 or ltomlinson@apic.org.

Sincerely,

Cathryn Murphy, RN, PhD, CIC
2010 APIC President

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