Evolution of Infection Prevention and Control Policies and Processes in U.S.

COLUMBIA
SCHOOL OF NURSING

Home Health Care Agencies



Tenzin Trinley, MPH¹; Ashley M. Chastain, DrPH, MPH¹; Monika Pogorzelska-Maziarz, PhD, MPH, CIC, FAPIC²; Suning Zhao, MPH¹; Patricia W. Stone, PhD, RN, FAAN, FAPIC¹; Jingjing Shang, PhD, RN, FAAN, OCN¹

¹ Center for Health Policy, Columbia University School of Nursing, New York, NY 10032; ² College of Nursing, Thomas Jefferson University, Philadelphia, PA 19107

Background

- Prior to COVID-19, infection prevention and control (IPC) programs in home healthcare (HHC) agencies were suboptimal.
- Their IPC capacity was insufficient, leaving them underprepared for the pandemic.

Objective

To describe the evolution of HHC agencies' IPC policies and processes, especially in response to COVID-19.

Study Design

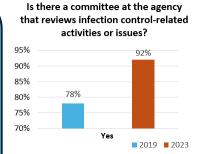
- We conducted national surveys of Medicarecertified HHC agencies in 2019 and 2023 to examine agency IPC policies and processes.
- 1,506 and 1,501 U.S. HHC agencies (including Puerto Rico) were included in the 2019 and 2023 samples, respectively.
- We stratified by key characteristics for national representativeness and oversampled rural agencies.
- Agency administrators or clinical managers were asked to complete the survey online or on paper.
- Questions covered topics like: IPC staffing, IPC compliance and training, current IPC policies/processes, and IPC challenges.
- Descriptive statistics comparing 2019 and 2023 weighted responses (allowing for national representativeness) were calculated using Stata 17.

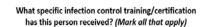
We achieved a response rate of **35.6**% for the 2019 survey

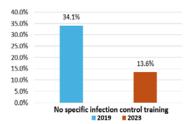
In 2023, 76% of respondents completed the survey online (compared to 56% in 2019), while 24% opted for the paper version (compared to 44% in 2019), possibly due to greater technology comfortability.

and 30.5% in 2023.

Results



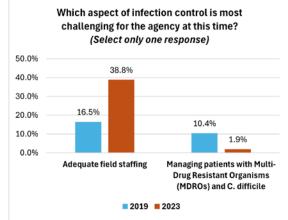




 In 2023, more agencies reported having specific committees or dedicated staff to review IPC activities. There was also an increase in HHC IP personnel who had received specific IPC training in 2023.

Which infection/organism is the greatest infection control challenge for the agency at this time? (Select only one response) UTIS CAUTIS CA

 While fewer number of HHC agencies reported UTI, CAUTI, and C. diff as the primary infection control challenge, the number of agencies reporting upper respiratory infections (e.g., pneumonia) and wound infections as challenges increased in 2023.



- In 2023, more HHC agencies reported that ensuring adequate field staffing was the most challenging aspect of IPC, compared to 2019.
- Fewer agencies reported challenges with MDROs and C. diff in 2023.

Discussion

- The COVID-19 pandemic highlighted the importance of hand hygiene, bag technique, donning and doffing procedures and proper surface sanitizing methods.
- There appeared to be increased emphasis on infection prevention & control committees and training at agencies nationwide.
- Agencies faced staffing shortages, which can be addressed through cross-training, and flexible scheduling.
- Managing respiratory and wound infections requires innovative approaches such as telehealth, remote monitoring and enhanced coordination with specialized providers.

Conclusion

- Since COVID-19, HHC agencies have updated their IPC policies/processes, with increased focus on specialized IPC training for their staff.
- Challenges related to field staffing continue to persist with respect to recruitment and retainment.¹

Reference

U.S. Department of Health and Human Services, Office of the Assistant Secretary for Planning and Evaluation. (n.d.). COVID-19 intensifies home care workforce challenges. Retrieved from https://aspe.hhs.gov/reports/covid-19-intensifies-home-care-workforce-challenges

Disclosures

This research is funded by the National Institute of Nursing Research (R01NR016865).

Contact Information: Tenzin Trinley, MPH Project Coordinator Center for Health Policy, CUSON

