PREVENT HAIs Healthcare-Associated Infections

Overview – AHRQ Safety Program for MRSA and SSI Prevention

Surgical Services

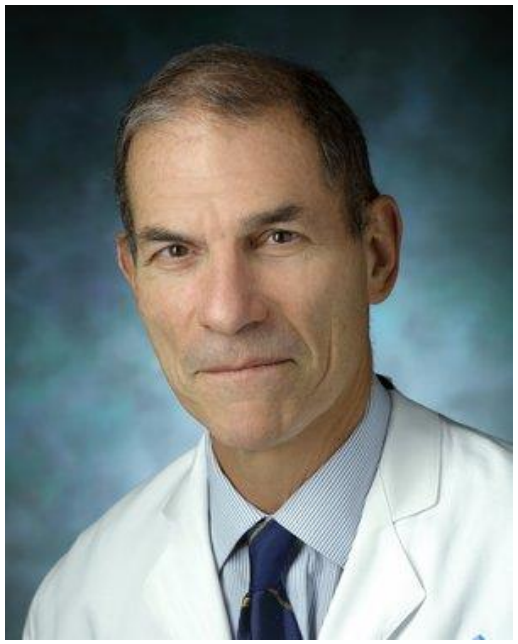
JOHNS HOPKINS MEDICINE

NORC at the UNIVERSITY of CHICAGO

AHRQ Agency for Healthcare Research and Quality

CUSP

Presenters



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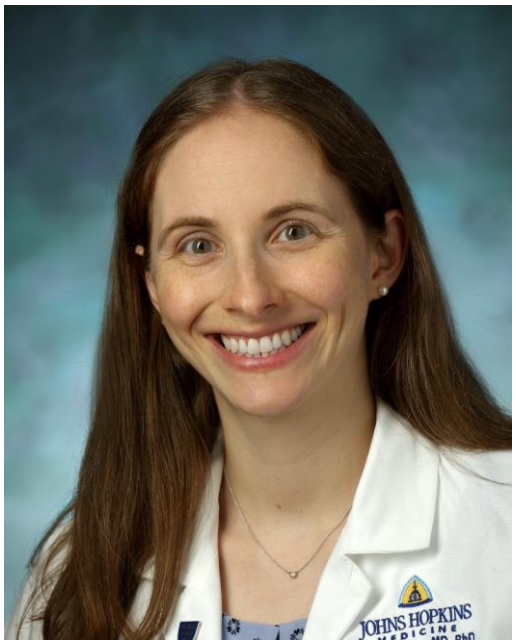

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MRSA and Surgical Site Infections Are a Serious Threat

- Surgical site infections (SSIs) are one of the most common and most costly healthcare-associated infections (HAIs), accounting for nearly 1 million additional inpatient days, and $3.3 billion in healthcare expenditures every year.[1-5]
- *Staphylococcus aureus* is the leading causative organism of SSIs (17.5% of overall SSIs, 38.6% of orthopedic, 27.0% of cardiac).[6]
- SSIs caused by methicillin-resistant *Staph aureus* (MRSA) are associated with higher raw mortality rates, longer lengths of stay, and elevated costs of hospitalization compared with SSIs caused by other organisms.[7]

If you want to reduce MRSA and SSIs in your facility and strengthen team-based infection prevention practices, enroll in the AHRQ Safety Program for MRSA and SSI Prevention by December 2022.

AHRQ Safety Program Overview

Overarching Goal of the AHRQ Safety Program:

To prevent MRSA infections, including surgical site infections, among high-risk surgical patients.

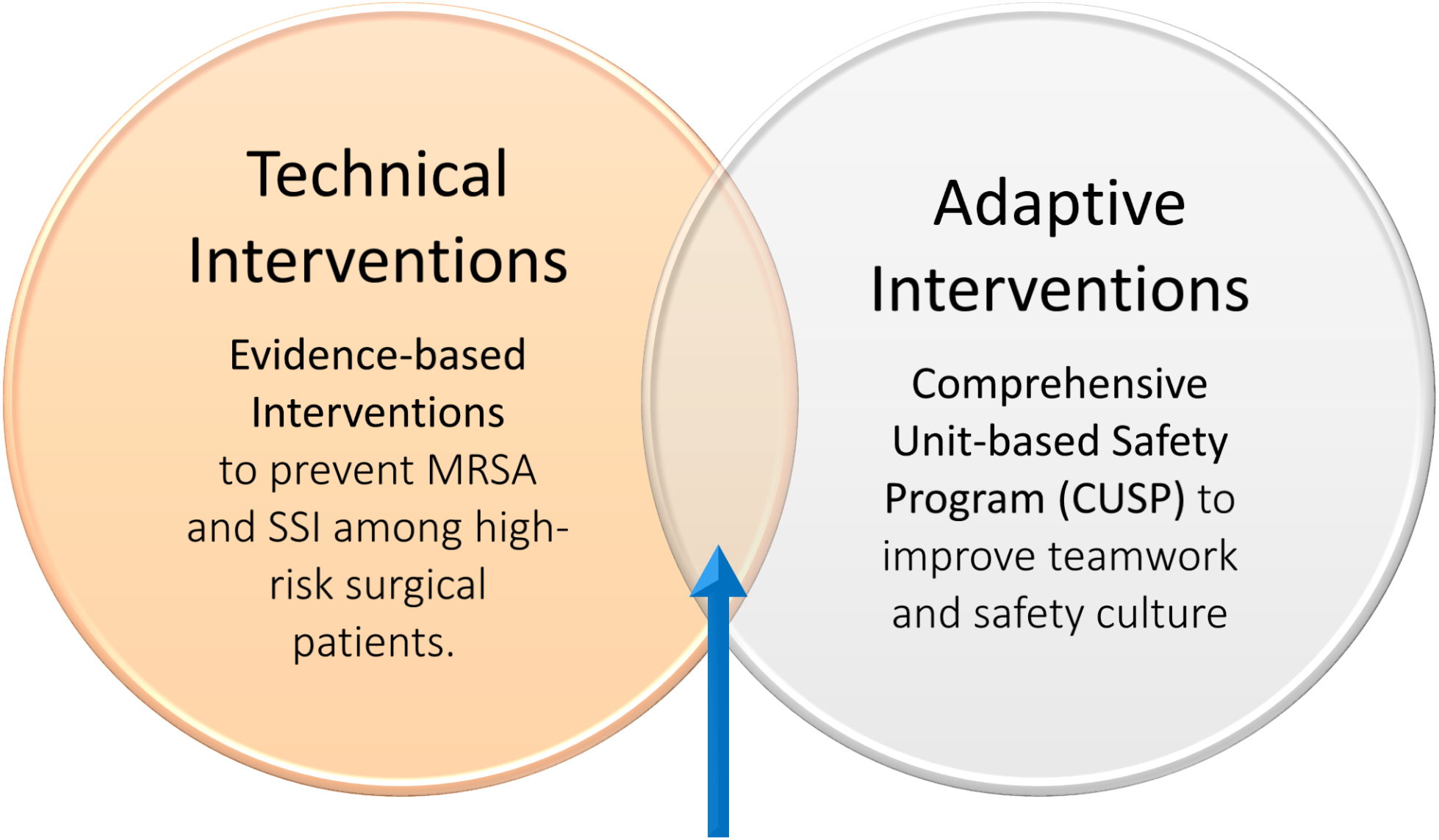
Additional Goals:

- To **strengthen the culture of safety and build capacity** for team-based quality improvement activities.
- To provide technical assistance for the implementation of **evidence-based infection prevention practices** that help prevent surgical site infections

Funded and Guided by: AHRQ

Led by:
- Johns Hopkins Medicine
- NORC at the University of Chicago

AHRQ Safety Program Approach

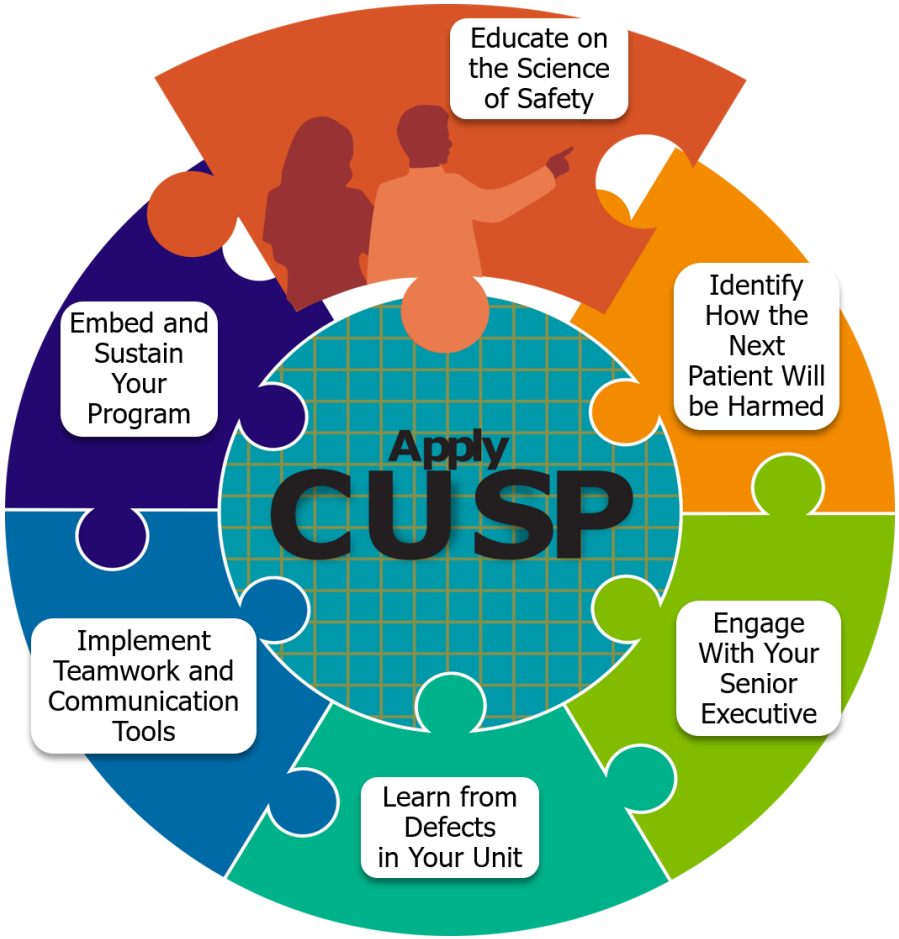


Local Adaptation

Tapping Into the Wisdom of Frontline Staff

The Benefits of CUSP

- Facilitates communication and teamwork in the surgical environment
- Helps clinical teams improve patient safety
- Partners management and clinical staff efforts
- Implements clinical best practices



More info on CUSP is available here: *https://www.ahrq.gov/hai/cusp/index.html*

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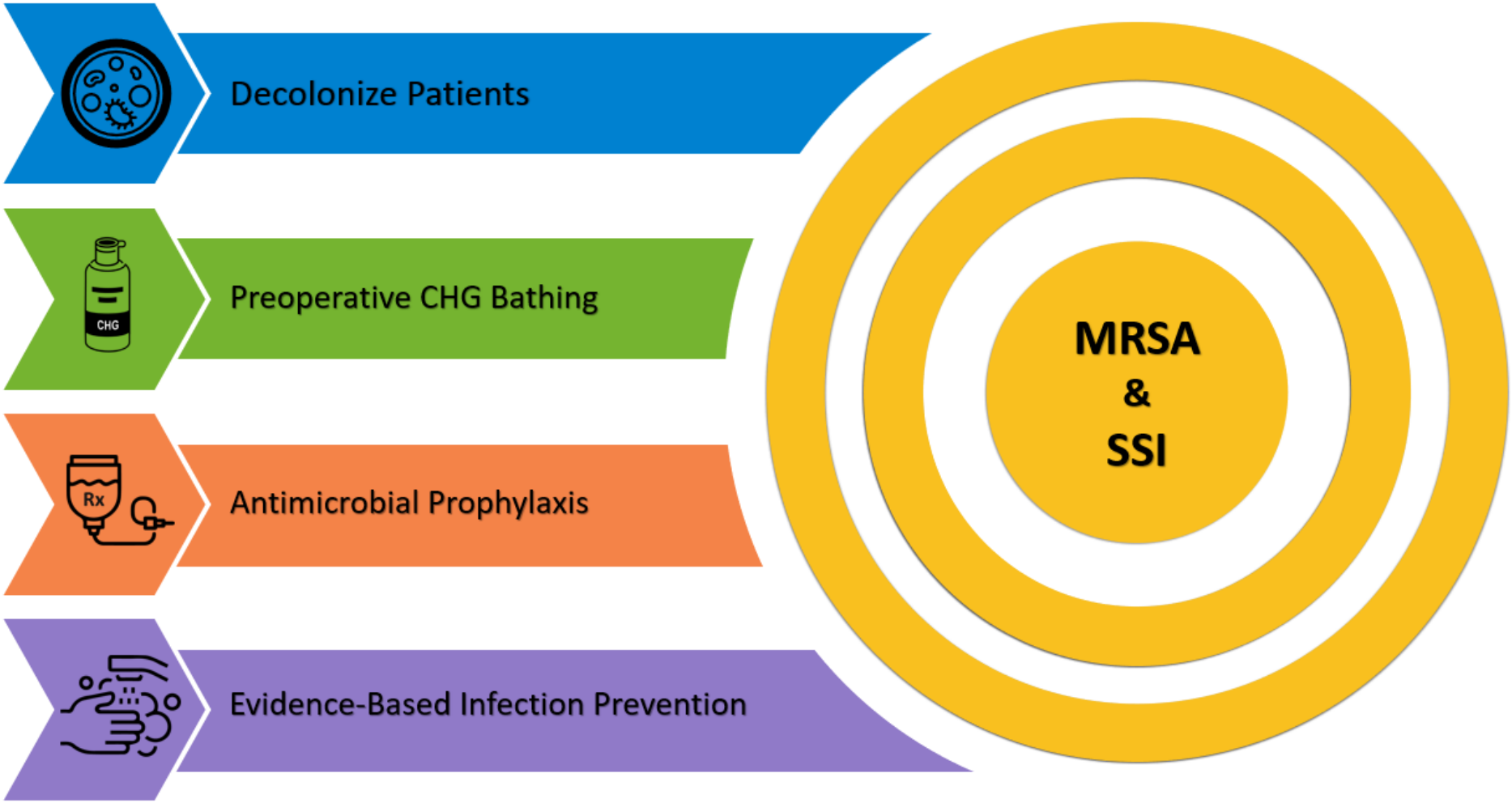
Target MRSA and Surgical Site Infections



AHRQ Safety Program Details

How Long Is the Program?

- 18-month program
- Begins January 2023
- Enrollment deadline is December 2022

Who Is Eligible To Participate?

- High-risk adult inpatient surgical services:
  - Neurosurgical
  - Orthopedic
  - Cardiac

How Much Does It Cost To Participate?

- Free

How Much Time Does It Require?

- Minimum of 3 hours per month

Will CME and CEU Credits Be Awarded for Participation?

- CME and CEU credits will be available for participating physicians and nursing staff

Procedure Types

- ***Neurosurgical***
  - Spinal fusion
- ***Orthopedic***
  - Hip joint replacement
  - Knee joint replacement
  - Spinal fusion
- ***Cardiac***
  - Cardiac valve replacement
  - Coronary artery bypass graft
  - Surgeries that involve a median sternotomy

National IRB is acknowledged as Not Human Subjects Research. Individual sites are not expected to obtain local IRB review unless requested by their home institutions.

AHRQ Safety Program Timeline

Participation Timeline

November 2022–December 2022

- Assemble a multidisciplinary Comprehensive Unit-based Safety Program (CUSP) team within hospital
- Ensure members of team have access to the Safety Program website

January 2023–July 2024

- Participate in educational programs, including an orientation webinar and monthly to twice monthly educational webinars
- Meet at least once a month with Implementation Advisers (IAs)
- Meet regularly with CUSP team and implement evidence-based interventions
- Submit project data on monthly or quarterly basis (details on next slide)

May 2023

- Submit baseline infection data (January 2022–December 2022)
- Submit infection data for the first quarter of the project

Data Collection for Neurosurgical & Orthopedic Surgeries

Monthly Neurosurgical and Orthopedic Surgeries Data Submission

Electronic data pulls of monthly data on a quarterly basis from January 2023 to June 2024

Clinical Outcomes Data	***Data Source***
Number of surgical procedures performed for the following surgical procedure types: • Spinal fusion • Hip joint replacement • Knee joint replacement Service-level clinical outcomes for the above surgical procedure types • SSI events, overall and by severity (deep/organ space or superficial) • SSI events by MRSA and by *Staphylococcus aureus* (if available)	For these data points, your hospital will have the opportunity to confer NHSN data rights to the AHRQ Safety Program.

Implementation Data Collected

- Hospital Survey on Patient Safety Culture (HSOPS) – *baseline and at end of project*
- Infrastructure Assessment (Gap Analysis Tool) – *baseline and at end of project*
- Implementation Assessment (Team Checkup Tool) – *monthly*

Data Collection for Cardiac Surgeries

Monthly Cardiac Surgery Data Submission

Electronic data pulls of monthly data on a quarterly basis from January 2023 to June 2024

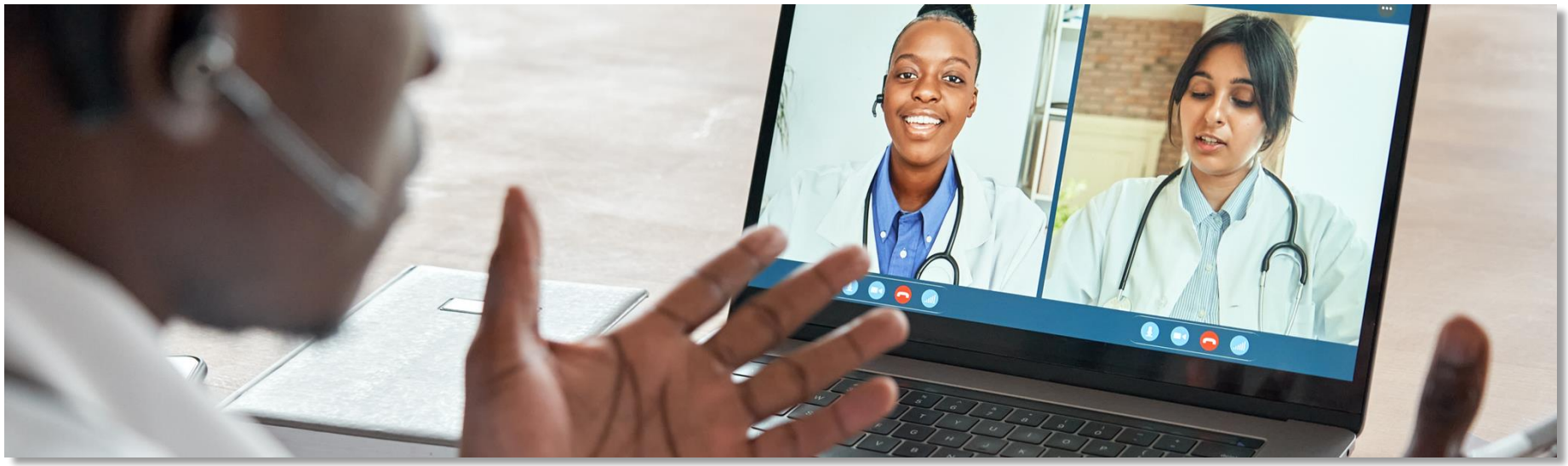
Clinical Outcomes Data	*Data Source*
Number of sternotomy procedures performed and surgical site infections following sternotomy procedures, as reported to the Society of Thoracic Surgeons (STS) and available through the STS National Database: • SSI events, overall and by severity (deep/organ space or superficial) • Hospital readmission for infection and other select reasons	Your hospital will be provided clear instruction for how to reuse data submitted to STS and generate queries for outcomes used in this evaluation.
If you also report SSIs to NHSN, please submit NHSN data regarding the number of cardiac bypass graft surgeries (CABG) and for SSI events following CABG: • SSI events, overall and by severity (deep/organ space or superficial) • Organisms causing each SSI following CABG (MRSA, MSSA or other)	Your hospital will have the opportunity to confer NHSN data rights to the AHRQ Safety Program for these data points.

Implementation Data Collected

- Hospital Survey on Patient Safety Culture (HSOPS) – *baseline and at end of project*
- Infrastructure Assessment (Gap Analysis Tool) – *baseline and at end of project*
- Implementation Assessment (Team Checkup Tool) – *monthly*

Benefits of Participating

- Expert coaching in MRSA SSI prevention and CUSP
- Support for data collection, reporting, analysis, and feedback
- Access to Implementation Advisors
- Teamwork tools and guides
- Monthly office hours
- Peer-to-peer learning with other participating facilities
- Monthly/twice monthly webinars
- Facilitator guides
- Posters
- Summary sheets
- Educational material for patients and families



Anticipated Outcomes of Participation

- Reduced MRSA infections
- Reduced overall SSIs
- Improved team-based infection prevention practices (decolonization, CHG bathing, and antimicrobial prophylaxis)
- Enhanced communication and teamwork regarding prevention of MRSA infections and SSIs
- Improved teamwork and patient safety culture

Thank you.

We look forward to working with you on improving the delivery of high-quality care for all patients across the United States.

To learn more and enroll, visit:

http://safetyprogram4mrsaprevention.org

Or email: MRSAPrevention@norc.org

The deadline to enroll is ***December 2022***

This program is funded and guided by the Agency for Healthcare Research and Quality and led by Johns Hopkins Armstrong Institute for Patient Safety and Quality and NORC at the University of Chicago.

References

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