

SUPPORTING STATEMENT

Part B

Reducing Healthcare Associated Infections (HAI): Barriers and Challenges
to Improving Patient Safety at the Point of Care

Version: November 7, 2008

Agency of Healthcare Research and Quality (AHRQ)

Table of Contents

B. Collections of Information Employing Statistical Methods.....	3
1. Respondent Universe and Sampling Methods.....	3
2. Information Collection Procedures.....	3
3. Methods to Maximize Response Rates.....	4
4. Tests of Procedures.....	4
5. Statistical Consultants.....	4

B. Collections of Information Employing Statistical Methods

1. Respondent Universe and Sampling Methods

The respondent universe is the clinician and hospital staff at the 34 hospitals collaborating with the five ACTION Partnerships in the HAI project (See Attachment G). This data collection has not been conducted previously; however the estimated response rate is at least 80 percent. The subject matter and purpose of the HAI project, including resulting information from the data collection instruments, is highly salient to the universe of respondents. During the monthly teleconferences with the five ACTION partnerships, AHRQ found that the HAI project participants felt the subject matter was important and that the staff from the participating hospitals would be willing to participate and provide information about the challenges and barriers to preventing HAIs and improving patient safety. For these reasons, achieving a high response rate for the data collection instruments is expected.

2. Information Collection Procedures

This study includes a survey of hospital clinicians and staff on their opinions and experiences of how to effectively mitigate hospital associated infections. This one-time exploratory study uses three instruments designed to gather common information to inform future improvements in hospital safety and to identify the barriers and challenges of the project hospitals in their efforts to reduce HAIs. These instruments were developed collaboratively with staff at Social & Scientific Systems, Inc. (SSS) and AHRQ HAI project staff. As the instruments were being developed, AHRQ asked for input from the five ACTION partnerships through conference call discussions. In addition, AHRQ provided drafts of the instruments to the five ACTION partnerships, including staff at the 34 participating hospitals, for their review and comment. In addition, HAI project staff requested and received input for an AHRQ survey expert, Dr. Charles Darby, who helped lead the CAHPS program which surveys patients on their experiences with healthcare. Finally, HAI project staff consulted with Dr. William Baine who is AHRQ's Senior Medical Advisor on infectious disease.

The administration of paper-based instruments will be coordinated and managed by each of the five ACTION partnerships. The three instruments will be administered at each hospital for a three month period beginning in January 2009. The timeline may change since data collection cannot begin until the project is approved by OMB.

There will be an HAI project coordinator at each of the 34 hospitals who will be responsible for managing the administration of the instruments. Each coordinator will be provided instructions for fielding the instruments and an overview of the goals and objectives of the HAI project (See Attachments H & I). The coordinators will be

responsible for ensuring that the information collection instruments are fielded at the appropriate time and are returned to the ACTION partnership.

Two of the instruments will be administered to one respondent at each of the 34 hospitals. The HAI Information Collection and Reporting Summary will be administered to lead infection control person for the hospital and the Patient Safety and Infection Prevention Catalogue will be administered to the hospital patient safety officer. For the Patient Safety and Infection Prevention Assessment, the number of respondents is based on an estimate of 250 respondents from the five ACTION Partnerships' collaborating hospitals. Each ACTION partnership will select a convenience group of hospital staff which will be distributed evenly across their collaborating hospitals and represent each hospital staff category. The number of collaborating hospitals for the five ACTION partnerships is outlined below.

ACTION Partnership	Number of Collaborating Hospitals
American Institutes for Research	6 hospitals
Denver Health & Hospital Authority	2 hospitals
Health Research and Educational Trust	4 hospitals
University of Iowa	16 hospitals
Yale University	6 hospitals

3. Methods to Maximize Response Rates

To maximize responses, staff from the five ACTION partnerships and the HAI assessment contractor will work with the hospitals to discuss the goals of the project and offer a debriefing at the conclusion of the project. Before the administration of the instruments, the HAI assessment contractor will conduct technical assistance conference calls with each of the five ACTION partnerships, including the coordinators for their collaborating hospitals, and AHRQ staff. The purpose of this call is to discuss the goals and objectives of the HAI project; review the instruments, HAI project overview, and the instructions for fielding the instruments; and to answer any questions. Following the call, the HAI assessment contractor will serve as a resource, technical advisor, and primary contact for each ACTION partnership staff.

4. Tests of Procedures

A pretest of these instruments will be conducted by the HAI Assessment contractor with 9 staff from the ACTION partnerships.

5. Statistical Consultants

Since this information collection will not involve a statistical design, no statisticians were consulted on the design of this project.

- Attachment G: ACTION PARTNERSHIPS & COLLABORATING HOSPITALS
- Attachment H: Instructions for Fielding HAI Project Common Data Collection Instruments
- Attachment I: HAI Project Overview