

898. The Impact of State Mandated Healthcare-Associated Infection Reporting on Infection Prevention and Control Departments in Acute Care Hospitals: Results from a National Survey

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Background. In addition to federally mandated reporting, most US states have adopted legislation requiring hospitals to submit healthcare-associated infection (HAI) data. Evidence that state HAI laws have increased patient safety and reduced HAI rates is inconsistent, however, and resources needed to comply are considerable. We evaluated the impact of state HAI laws on infection prevention and control departments (IPCD).

Methods. Web-based survey of a national sample of hospital IPCD was conducted in Fall 2011; all non-VA hospitals enrolled in the National Healthcare Safety Network were eligible to participate. States with HAI laws effective prior to Fall 2011 were identified using systematic legal review. Variations in IPCD resources and characteristics in states with and without laws were compared using χ^2 or Wilcoxon-Mann-Whitney

tests. Multinomial logistic regression was used to identify increases or decreases, vs no change, in resources and characteristics.

Results. 1,038 IPCD provided complete data (30% response rate); 756 (73%) were located in states with laws. When asked how mandatory reporting affected their IPCD, more respondents in states with laws reported differences in resources (42% vs 33%, $p < 0.01$), time for routine activities other than for mandatory reporting (79% vs 71%, $p < 0.01$), influence in hospital decision making (55% vs 48%, $p < 0.05$), and visibility of their department (75% vs 65%, $p < 0.001$); they also spent more hours per week fulfilling mandatory reporting requirements (17 vs 13, $p < 0.0001$). Based on regression analysis, respondents in states with laws were more likely to report increased resources ($p = 0.02$) and influence ($p = 0.04$) and decreased time for routine activities ($p < 0.01$). Perception of visibility in the hospital was mixed with reports of both increased ($p < 0.001$) and decreased ($p = 0.01$) visibility vs the same.

Conclusion. Respondents in states with laws reported a significantly higher burden to their IPCD, beyond what was required by federally mandated HAI reporting alone. However, they also reported receiving increased resources to offset demands on time for routine activities and fulfilling reporting requirements. Further research is needed to investigate resources necessary to comply with state HAI laws, and to evaluate their unintended consequences.

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