2012 PARTNERSHIP IN PREVENTION AWARD

Sponsored by:

U.S. Department of Health & Human Services (HHS)
Association for Professionals in Infection Control and Epidemiology, Inc (APIC)
Society for Healthcare Epidemiology of America (SHEA)

PURPOSE

The nature and purpose of the Partnership in Prevention Award is to highlight and promote the work of one hospital that has achieved sustainable improvements based on the concepts of the “National Action Plan to Prevent Healthcare-Associated Infections: Roadmap to Elimination” and is helping to achieve the goals outlined of the HHS Partnership for Patients. Preventing healthcare-associated infections (HAIs) requires a multi-disciplinary and team-based approach – involving facility-level executive leaders, clinical leaders, infection control and prevention experts, and others.

The award program intends to recognize prevention leaders in the U.S. acute care community who have achieved wide-scale reduction and progress toward elimination of targeted HAIs. It also intends to showcase the outstanding efforts of clinicians, hospital executives, and hospital facilities who have improved clinical practice through utilization of evidence-based guidelines, achieved and maintained superior prevention results, and advanced best practices to improve patient safety.

Awards will be granted according to specific criteria tied to national standards. The inaugural award will be presented during International Infection Prevention Week, October 15, 2012.

AWARD

- The award recipient will be presented with a plaque by senior-level HHS, APIC, and SHEA officials in Washington, D.C., October 15, 2012 during International Infection Prevention Week.

- HHS, APIC, and SHEA may also recognize the award recipient at other events and/or meetings, as well as in various publications, via various communication vehicles, and related programs.

- Local HHS, APIC, and SHEA representatives in the award recipient’s city may take the opportunity to recognize the award recipient by visiting the facility or through other local recognition events or media.
ELIGIBILITY CRITERIA

To apply for the award, the candidate team:

- Must include executive team representation (e.g., CEO, COO, CFO, CNO, CMO), healthcare epidemiology and infection prevention and control leader and personnel involvement, and other sectors relevant to infection prevention and control (e.g., pharmacy, environmental health, occupational health). The multidisciplinary team may be established (i.e., as in a committee or task force) or may represent an ad hoc team formed around a unique initiative. The candidate team should submit evidence documenting the impact of the team-led program(s), action(s), or policy(ies) implemented as part of the intervention or prevention program. See the “Data Requested” section for more information on evidence to be submitted.

- May be a hospital unit or represent the hospital as whole-house applicant.

- May come from a hospital of any size and in any geographic location within the United States. Although APIC and SHEA have an international presence, we will honor only hospitals in the United States, so that the partnering organizations can highlight hospitals working to achieve the goals set forth in the Partnership for Patients and the “National Action Plan to Prevent Healthcare-Associated Infections: Roadmap to Elimination.”

DATA REQUESTED

Evidence to be submitted by the candidate team should demonstrate excellence according to at least one of the two Outcome Measure categories and at least two of the three Process Measure categories:

1. Demonstration of reductions in one or more of the below-listed HAIs as part of the Partnership for Patients goal of an overall 40% reduction in preventable hospital-acquired conditions by the end of 2013. Provide and define the specific measures that the candidate team used to assess and improve the specific HAI(s) that were targeted. (Outcome Measure)
   - Catheter-associated urinary tract infection (CAUTI)
   - Central-line associated bloodstream infection (CLABSI)
   - *Clostridium difficile* infection (CDI)
   - Surgical site infection (SSI)
   - Ventilator-associated pneumonia (VAP)

2. Demonstration of reduced hospital readmissions due to infectious complications as part of the Partnership for Patients goal of a 20% reduction in hospital readmissions. Provide and define the specific measure that the candidate team used to assess and improve hospital readmissions due to infectious complications. (Outcome Measure)
3. Demonstration of adherence to published guidelines for infection control and prevention or evidence-based practices for infection control and prevention. Please provide information on the practices employed by the candidate team to reduce the targeted HAI(s). Provide and define the measures that the candidate team used to assess and improve adherence to select evidence-based practices (e.g., compliance with using central-line insertion bundles, hand-washing, daily assessment of readiness to extubate, improved terminal cleaning of patient rooms, antibiotic use assessments). (Process Measure)

4. Demonstration of improved measurable processes attributed to increased organizational capacity and/or expanded infrastructure for infection prevention in one or more areas of the facility. Provide and define the specific measures that the candidate team used to assess and improve organizational capacity and/or expanded infrastructure. (Process Measure)

5. Demonstration of improved measurable processes supporting the use of team-based, collaborative infection prevention models. Provide and define the specific measures that the candidate team used to assess and support the use of team-based, collaborative models. (Process Measure)

TO APPLY

There is no cost to apply for the award. Please use the following checklist to ensure a complete application:

- The deadline for receipt of applications is **August 17, 2012**.
- A nomination letter, no more than ten double-space pages, describing why the team should be considered for the award.
- Operating bed count (this will be used for context and not to include or exclude facilities.):
  - Total hospital
  - Unit
- Provide data for at least the following timeframes:
  - Baseline data for at least 3 months prior to the program’s start
  - Achievement data for at least 18 months
- A concise introductory section in which you tell us your story “as if you had one minute at the microphone” (250 words or less)
- In the remainder of the application, please deconstruct the story and support it with evidence according to the criteria listed above.
- Two letters of support from persons who work with the team in promoting infection prevention and control. These letters of support can come from a variety of sources,
including those who may be outside of the hospital, but whom you work closely with to reduce HAIs (e.g. Quality Improvement Organization (QIO), Hospital Associations, etc).

- Indicate a designated person and contact information for the application.
- Submit a complete application as a Microsoft Word file in a single e-mail to awards@apic.org. Incomplete applications will not be processed.
- E-mail subject line: “HHS-APIC-SHEA Partnership in Prevention Award.”

**PROJECTED TIME FRAME**

- Open Application Period: April 24, 2012 to August 17, 2012
- Award Determination: September 15, 2012
- Award Presentation: International Infection Prevention Week, October 15, 2012

**FOR QUESTIONS AND INFORMATION**

Please contact the HHS/APIC/SHEA Awards team at awards@apic.org if you have any questions.