Statewide survey of long-term care facilities regarding management of multi-drug resistant organisms

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Background

Long-term care facilities (LTCFs) face significant challenges in controlling multidrug-resistant organisms (MDROs) due to limited resources and the complex medical needs of their residents.1-5 While MDROs are not unique to LTCFs, their unique nature, including high-dose, long-term antibiotic therapy and mortality, complicates control. Thus, facilities have implemented infection prevention and control (IPC) practices, such as infection prevention education and training, IPC infrastructure and policies, and IPC practices and outcomes, to reduce MDRO burden.

Methods

We surveyed administrators and directors of nursing of 180 Oregon LTCFs using a 77-item, self-administered questionnaire. Questions focused on demographic characteristics, IPC programs and policies, and IPC practices. The survey instrument was distributed via email invitation, using SurveyMonkey. Facilities that did not respond were contacted by mail. The survey was completed by 47% of the respondents.

Results: Facility Characteristics

Of the 47 respondents, 74% were assisted living facilities and 26% were skilled nursing facilities. The average daily census of responding facilities was 48 residents (IQR=38, 68). The median number of years spent in position was 5 (IQR=2, 8). The median number of years of experience as an administrator was 2 years (IQR=1, 5).

Results: Infection Control Capacities and Priorities

At the time of the survey, 60% of the responding facilities had a formal infection prevention and control (IPC) committee. Among the surveyed administrators, 51% had a title associated with IPC, of which 48% were infection prevention directors. The median number of years spent in position was 5 years (IQR=2, 8). The median number of years of experience as an administrator was 2 years (IQR=1, 5).

Results: Knowledge and Practices Regarding MDRO

We found that 92% of respondents had a resident with a history of MDRO in the last 12 months. The median number of years spent in position was 5 years (IQR=2, 8). The median number of years of experience as an administrator was 2 years (IQR=1, 5).

Discussion

The results of this survey indicated that limited resources and training for infection control in Oregon LTCFs pose challenges for reducing MDRO transmission. This finding also suggests that infection control and prevention efforts in LTCFs may be undermined by the lack of IPC infrastructure, lack of IPC workforce, and lack of IPC funding. The findings underscore the importance of developing tools and strategies to support the implementation of IPC programs and policies in LTCFs.

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References


