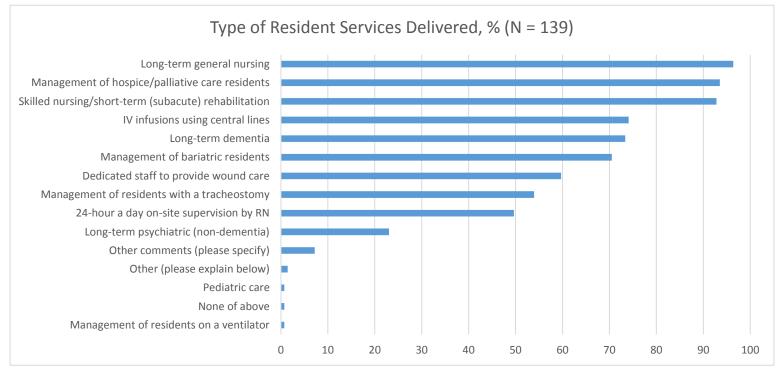
Highlights from the 2015 Skilled Nursing Facility Survey Performed by the Oregon Health Authority, Spring 2015



I. INFECTION CONTROL INFRASTRUCTURE

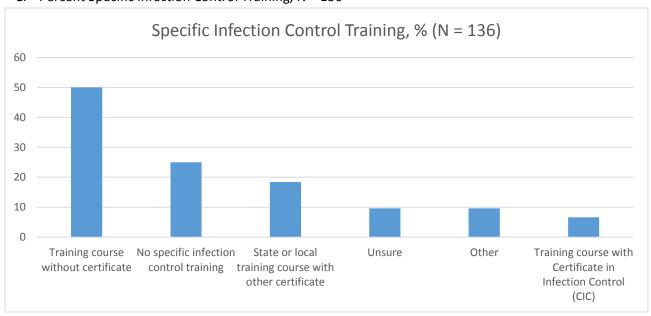
A. Percent Type of Resident Services Delivered, N = 139 respondents



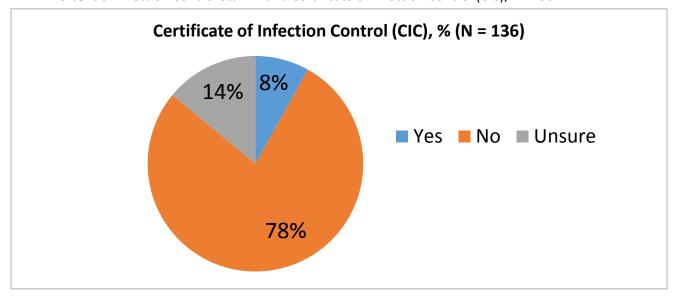
B. Years of Experience of main infection control staff, N = 142

Ī	MIN	0.3	years	MEDIAN	9	years
	MAX	35	years	AVERAGE	11	years

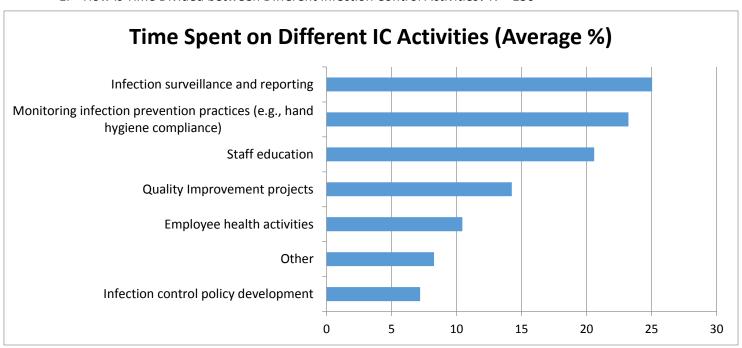
C. Percent Specific Infection Control Training, N = 136



D. Percent of Infection Control Staff with a Certificate of Infection Control (CIC), N =136



E. How is Time Divided between Different Infection Control Activities? N = 136



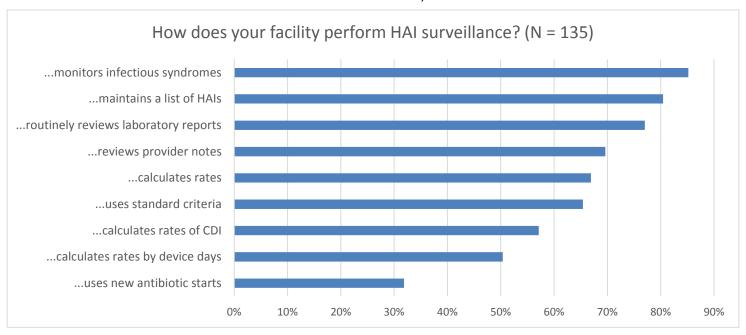
II. ANTIBIOTIC STEWARDSHIP

- A. Who Reviews Antibiotic Utilization at Your Facility? N = 136
 - a. 71% report the Director of Nursing
 - b. 39% report the Pharmacist
 - c. Less than 10% report having a physician, resident care manager, quality assurance manager, or other staff member review.
 - d. 7% (N = 9) do not review antibiotic utilization

B. Does your facility restrict the use of specific antibiotics? N = 136

Does your facility restrict the use of specific antibiotics?				
Answer Options	Response Percent	Response Count		
Yes	6.6%	9		
No	77.2%	105		
Unsure	16.2%	22		

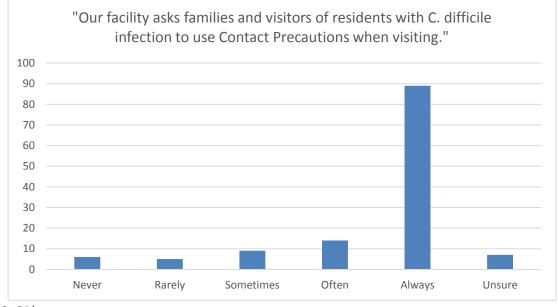
C. Methods of Healthcare-associated Infection Surveillance, N = 135



III. C. difficile MANAGEMENT

- A. How long are Contact Precautions continued for *C. difficile* positive residents? N = 135
 - a. 83.7 % (N = 113) used a combination of resolution of diarrhea AND completion of treatment prior to discontinuing Contact Precautions.

B. Facility Requests Visitors Use Contact Precautions for Resident with C. difficile, N = 135



C. Cleaning Products Used by Facility for C. difficile-positive Residents, N = 135

What cleaning product(s) does your facility use to clean the room of a resident with C. difficile infection (CDI)? Select all that apply.				
Answer Options	Response Percent	Response Count		
Facility-mixed bleach solution*	41.5%	56		
Commercial pre-mixed bleach product EPA-registered with sporicidal claim	46.7%	63		
Other EPA-registered disinfectant with sporicidal claim	17.8%	24		
I'm not sure.	11.9%	16		
Other (please specify)	5.2%	7		

^{*}Facility-mixed bleach solutions are more prone to mixing errors, thus under-disinfecting surfaces or over-exposing staff.

- D. C. difficile Lab Specimen Quality, N = 135
 - a. Only 17% reported that their laboratory rejected stool for *C. difficile* testing if it was formed; 41% were unsure. (Interpretation: Educate facilities that testing of unformed stool increases the accuracy of *C. difficile* testing)
 - b. 43% had results of *C. difficile* within 4–24 hours; 38% within 25–48 hours; 4% had results returned in <4 hours; 4% within 3–5 days.
- E. *C. difficile* surveillance, N = 135

Is there a staff member who looks for new positive C. difficile test results on a daily basis?				
Answer Options	Response Percent	Response Count		
Yes	62.2%	84		
No	33.3%	45		
Unsure	4.4%	6		

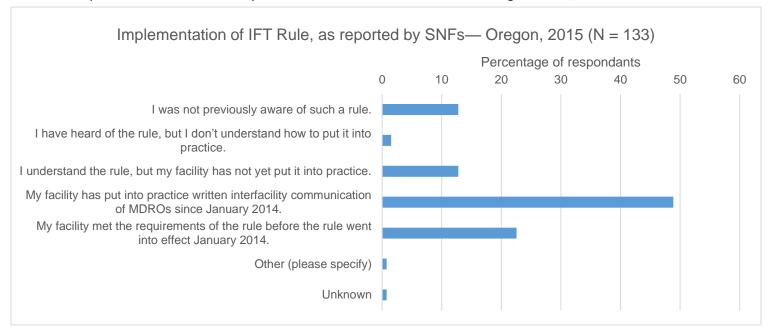
IV. MULTIDRUG-RESISTANT ORGANISMS

A. CRE-infected or –colonized Residents (N = 135)

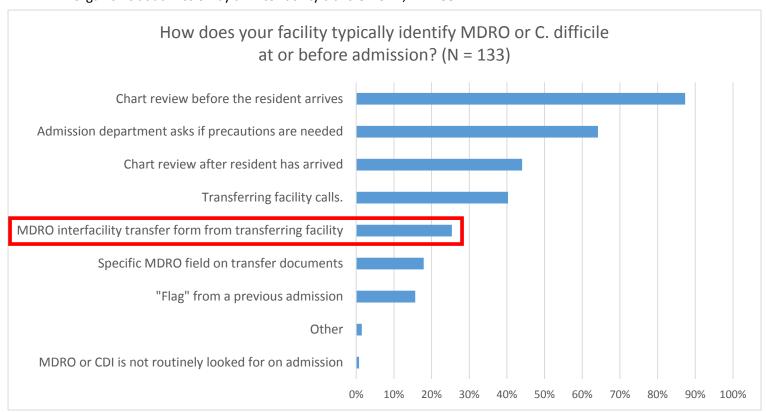
During the past 12 months, have any CRE-infected or -colonized residents been present in your facility?					
Answer Options	Response Percent	Response Count			
Yes	12.6%	17			
No	73.3%	99			
Unsure	14.1%	19			

- B. Which organisms get an alert or "flag" in the resident's chart? N = 133
 - a. 36% (N = 48) do not routinely alert or "flag" MDROs or C. difficile in resident's chart
 - b. 60% chart MRSA
 - c. 55% chart VRE
 - d. 42% chart multidrug-resistant Acinetobacter
 - e. 45% chart CRE
 - f. 54% chart C. difficile

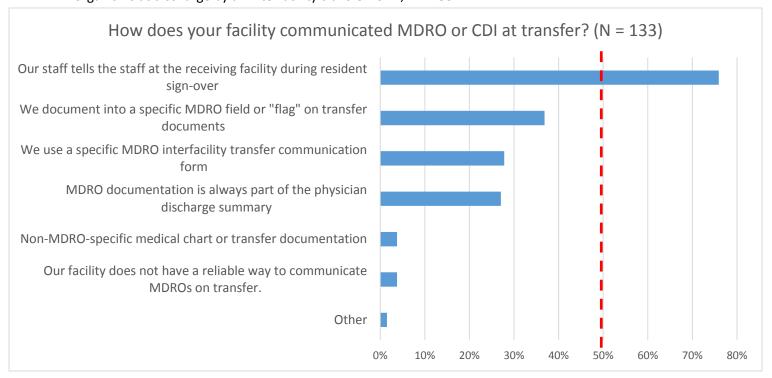
C. Implementation of Interfacility Transfer Communication at Skilled Nursing Facilities, N = 133



- D. Interfacility Transfer Communication Performance, N = 132
 - a. 92% of discharging facilities report notifying the receiving facility of a resident's MDRO/*C. difficile* at transfer.
 - b. 53% of receiving facilities report receiving notification of a resident's MDRO/*C. difficile* status from the transferring facility upon admission.
- E. Methods for identifying MDROs or *C. difficile* at admission: 25% of facilities receive information about these organisms at admission by an interfacility transfer form, N = 133

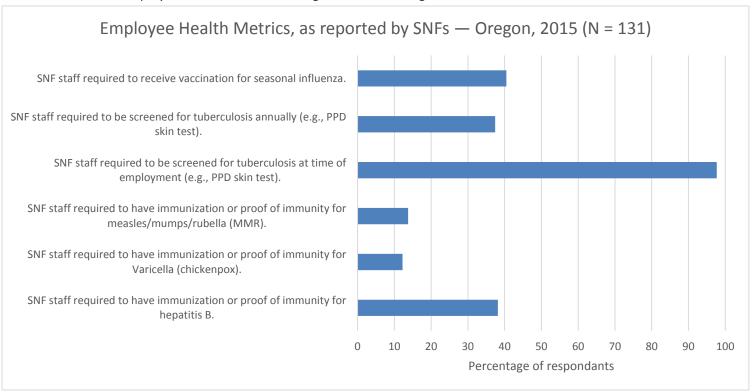


F. Methods to communicate MDROs or *C. difficile* at discharge: 28% of facilities send information about these organisms at discharge by an interfacility transfer form, N = 133



V. EMPLOYEE HEALTH

A. Selected Employee Health Metrics at Oregon Skilled Nursing Facilities, N = 131



- B. Infection Control Materials Provided in a non-English Language, N = 131
 - a. Yes: 35%; No: 47%; Unsure: 18%