

## BUILDING BRIDGES



A roundtable event at the APIC 2011 Annual Conference gave the IP Col-*lab*-oration Project clinical advisors an opportunity to elaborate on the barriers facing IPs and laboratory professionals.

# The IP Col-*lab*-oration Project

APIC's newest collaboration builds a bridge between infection preventionists and lab professionals.

BY KRIS CAREY PREVATTE, APIC DIRECTOR OF BUSINESS DEVELOPMENT AND WALTER JOSEPHS, APIC BUSINESS DEVELOPMENT PROJECT MANAGER

When it came time to choose APIC's next *Building Bridges* project, there were many possibilities. After all, IPs must collaborate with just about everyone across the continuum of care. Ultimately, APIC determined that the next project in the *Building Bridges* series would focus on building a bridge between IPs and laboratory professionals.

Dubbed the IP Col-*lab*-oration Project, the collaboration between APIC and The American Society for Microbiology (ASM) is funded by a grant from Roche Diagnostics – an APIC Strategic Partner since 2009.

## WHY THE DECISION TO FOCUS ON THE LAB?

Screening, diagnostics, and surveillance increasingly are a critical part of a comprehensive infection prevention program.

APIC's lead clinical advisor to the project, Lillian Burns, MT, MPH, CIC, provided her perspective on the importance of the focus: "I think it is very important that there be a bridge between the

laboratory personnel and the IP, because as we go forward into the future, with the changing climate of healthcare, we need to work together for the common goal of achieving better patient outcomes. That can only be achieved by having open dialogue," she said.

"I feel that [IPs and laboratory professionals] are working in parallel to one another, and that both of them understand the issues of healthcare-associated infections, but I do not feel that they understand all of the issues surrounding the change in healthcare climate we are faced with today."

Clinical Advisor Marc-

Oliver Wright, MT (ASCP), MS, CIC, believes that many of the departments in health institutions are set up to specialize in given functions, with the unintended consequence of creating silos. Wright observed, "These departments struggle to communicate effectively because they are not being completely integrated due to the organizational structures."

## PROJECT GOALS

The IP Col-*lab*-oration Project seeks to:

- Increase communication and understanding between laboratory professionals and IPs



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### Meet the clinical advisory council

- Lillian Burns, MT, MPH, CIC, lead clinical advisor for APIC
- Lance Peterson, MD, lead clinical advisor for ASM
- Kathy Aureden, MS, MT(ASCP), SI, CIC,
- Martin Evans, MD
- Marc-Oliver Wright, MT(ASCP), MS, CIC

■ Equip IPs and laboratory professionals with compelling educational resources and tools that will lead to improved outcomes

■ Educate in the area of microbiology, the importance of surveillance via diagnostics/screening, and the role of the IP in diagnostic decisions

#### KEY RESEARCH FINDINGS

Early in the development phase, APIC and ASM conducted joint research to determine the best direction for the project. Greenwald & Associates, an independent Washington, DC-based market research firm, executed both quantitative and qualitative research activities.

An online survey of both APIC and ASM members found:

■ A disparity exists in the involvement of each group in critical cross-cutting issues in handling healthcare-associated infections (HAIs).

■ Eighty percent of the respondents want to hear how other facilities are creating partnerships between laboratory and IP staff. Seventy percent want assistance with building these partnerships. Laboratory professionals are especially open to bridge-building educational materials.

■ The issue of turnaround time varies between the two groups. IPs feel pressured to conduct more timely screening

for specific HAIs so as to keep HAI rates low, while there is little pressure applied to the laboratory technologist in providing test results for specified HAIs within 12 hours.

■ A turnaround time of 12 hours or less would be ideal, given that rapid testing is available, versus the traditional culture testing, which takes 48 hours.

■ IPs view the screening for MRSA as a lesser issue, while the laboratory professional shows greater concern for surveillance/screening for MRSA.

■ Sixty-one percent of IPs surveyed stated that their institutions conduct Active Surveillance Testing (AST) for MRSA.

Based on the foregoing, the advisory panel determined that there is a need for new educational tools and resources.

#### PANEL DISCUSSION

The research activities were followed by a lively and interesting panel discussion convened at the APIC 2011 Annual Conference held in Baltimore, Maryland. Recorded in front of a “studio audience” comprised primarily of IPs, the event gave the clinical advisors an opportunity to elaborate on the barriers facing IPs and laboratory professionals – and to identify concrete solutions that APIC and ASM could promote. To view an online video of the event in its entirety, or to see short highlight clips, visit [www.apic.org/labproject](http://www.apic.org/labproject).

### About APIC’s Building Bridges initiative

APIC believes that collaboration is essential to achieving its vision of a world without infection. That’s why APIC launched the *Building Bridges* initiative, which aims to improve patient outcomes by building bridges between infection preventionists (IPs) and stakeholders across the continuum of care.

Each *Building Bridges* project focuses on one key area and dives deep with a society partner or partners. Guiding each project is a clinical advisory council comprised of recognized subject matter experts, with a lead advisor appointed by each participating society. After conducting extensive joint research to identify the greatest needs, the advisory council produces useful educational programs and resources – all of which are made available for free. These large-scale initiatives are funded by educational grants.

To explore all of APIC’s *Building Bridges* project to date, visit [www.apic.org/buildingbridges](http://www.apic.org/buildingbridges).

#### EDUCATIONAL RESOURCES

As a result of the survey – and guidance provided by the clinical advisors and members in the field – new tools and resources are currently being created for IPs and laboratory professionals. Since January 2012, APIC has been launching various free educational programs tied to this project. Each month, members can expect to gain access to new original content, such as CE-accredited webinars, as well as a collection of useful existing content focused on this theme.

More than two years in the making, and a labor of love for a cadre of passionate content experts led by editors Patricia A. Kulich, RN, CIC, and David L. Taylor, PhD, *The Infection Preventionist’s Guide to the Lab* is APIC’s new resource. This guide was authored by IPs and clinical microbiologists, and vetted by both IPs and laboratory professionals. While the printed book is available for purchase in the APIC online store, all APIC and ASM members have free electronic access to this resource, thanks to the generous grant provided by Roche.

To access the educational programs and tools available as part of the IP Col-lab-oration Project, visit [www.apic.org/labproject](http://www.apic.org/labproject).

*If you have a suggestion or want to get involved in this project, please send an email to [buildingbridges@apic.org](mailto:buildingbridges@apic.org).*



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