



HEALTH RESEARCH &
EDUCATIONAL TRUST
In Partnership with AHA

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NEWS RELEASE

HRET Awarded New Contract from AHRQ to Reduce Infections in Long-Term Care Facilities and Improve Patient Safety

CHICAGO – December 3, 2013 – Today the Health Research & Educational Trust (HRET) of the American Hospital Association (AHA) announced that they were awarded a contract by the Agency for Healthcare Research and Quality (AHRQ) to reduce catheter associated urinary tract infections (CAUTI) and other health care-associated infections (HAIs) in long-term care facilities (LTC). The project seeks to implement the Comprehensive Unit-based Safety Program (CUSP) in nursing homes and skilled nursing homes nationwide.

CUSP is a customizable program that helps clinical teams care for patients by combining clinical best practices with an understanding of the science of safety, improving safety culture, creating a learning culture and increasing focus on teamwork. In 2012, AHRQ announced that a project led by HRET and funded by the agency successfully implemented CUSP in more than 1,000 hospital ICUs and achieved a 41 percent reduction in central line-associated bloodstream infections. A similar AHRQ-funded project spearheaded by HRET – implementing CUSP in hospital units nationwide to reduce CAUTI – is ongoing, and preliminary data indicate that it, too, is producing positive results.

“CUSP has proven to be a powerful tool to reduce HAIs and make care safer in hospitals. Now we’re building on this success by introducing it to clinical teams in long-term care facilities,” said Richard Kronick, PhD, AHRQ Director. “Keeping our vulnerable elderly and disabled residents safe is a national priority,” adds Dr. Kronick.

Addressing safety for nursing home residents will be achieved by developing training resources that help caregivers understand how to identify safety problems that affect the care of their residents. Based on the experience of previous projects, it will include teaching tools and resources to support implementation at LTCs.

“The ongoing success and adoption of CUSP has demonstrated that incredible improvements in patient care are achievable,” said Maulik Joshi, president of HRET and senior vice president of AHA. “The new contract is a natural extension of our work with AHRQ in that area and will offer LTCs a chance to benefit from the program and drive quality improvement into new areas of the health care field.”

The contract will be administered by HRET in partnership with others including the University of Michigan, the Society for Hospital Medicine, the Association for Professionals in Infection Control and Epidemiology, Abt Associates and Qualidigm. The contract is for one base year plus two option years. For more information, visit www.hret.org.

This project, and other HAI-related projects funded by AHRQ, are consistent with the goals of the “[National Action Plan to Prevent Health Care-Associated Infections: Road Map to Elimination](#),” which calls for expanding efforts to long term care facilities.

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Health Research & Educational Trust (HRET)

Founded in 1944, the Health Research & Educational Trust (HRET) is the not-for-profit research and education affiliate of the American Hospital Association (AHA). HRET’s mission is to transform health care through research and education. It focuses on identifying and exploring key issues affecting the health care delivery system. HRET’s applied research focuses on improving quality, eliminating disparities, improving care coordination, improving leadership and governance, conducting data analysis and supporting the spread of improvement. Through AHA’s Hospitals in Pursuit of Excellence (HPOE) strategy, HRET has helped hospital leaders to accelerate performance improvement by disseminating best practices, producing actionable reports and toolkits, conducting leadership development programs and implementing national improvement projects. For more information, visit www.hret.org.

Agency for Healthcare Research and Quality (AHRQ)

To produce evidence to make health care safer, higher quality, more accessible, equitable, and affordable, and to work with HHS and other partners to make sure that the evidence is understood and used.