

A Focus on: Clostridium difficile

Targeted Assessment for Prevention (TAP) Strategy

The TAP Strategy was developed by CDC as a framework for quality improvement to use data for action to prevent health care-associated infections (HAIs)

See <https://www.cdc.gov/hai/prevent/tap.html> for detailed resources and information



Target infections and units with excess HAIs using NHSN data

- Evaluate the number of infections needed to prevent to reach an SIR goal using the Cumulative Attributable Difference (CAD)
$$\text{CAD} = \text{Observed HAIs} - (\text{Predicted HAIs} \times \text{SIR goal})$$
- Prioritize and identify a specific infection type and unit within a facility to participate in a TAP Facility Assessment

Assess gaps in infection prevention

- Administer the free TAP Facility Assessment (survey) tool
- Survey aims to capture *awareness* and *perceptions* among healthcare personnel related to prevention policies and practices
- Administer to a variety of healthcare personnel (frontline staff and providers, mid-level staff, and senior leadership)
- Focused sections for laboratory and antimicrobial stewardship staff

Prevent infections by implementing interventions to address the gaps

- MDH/MHA/OHA compiles results from the TAP Facility Assessment
- Identify key 'leading' and 'lagging' areas
- Deep dives into top opportunities for improvement
- CDC's TAP Implementation Guide includes a list of resources to address gaps

TAP Assessment – FAQ Sheet

Why use the TAP Assessment?

The TAP Assessment can be a useful tool for an HAI prevention program at any stage.

TAP Assessment Benefits

Established HAI Prevention Program
<ul style="list-style-type: none"> • Staff awareness/compliance with policies • Educational needs • Policy gaps

New/Developing HAI Prevention Program
<ul style="list-style-type: none"> • Data to drive and support efforts • Identify priority areas to target • Identify areas of strength

What is in the TAP Assessment?

- Multiple choice survey organized into domains
- Takes about 10 minutes to complete

IV. Contact Precautions/Hand Hygiene, Continued...	Response		
	Never	Rarely	Sometimes
In your experience, do the following persons adhere to use of gowns/gloves for patients on Contact Precautions?			
14. Physicians	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
15. Physician Assistants / Nurse Practitioners	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Who should complete the TAP Assessment?

- Staff targeted to complete the assessment should include frontline staff and providers, mid-level staff (nurse/unit managers), environmental services, and senior leadership.
- A minimum of 30-50 completed assessments is recommended to ensure results are representative of your facility.

What do the results look like?

The Facility Assessment Feedback Report summarizes your NHSN data, survey results identify key leading and lagging areas in a scorecard format, as well as top opportunities for improvement organized by domain. Results are also aggregated by respondent role, unit type, and specific question.

Prevention resources for each domain are available on the [CDC TAP website](https://www.cdc.gov/tap/).

Date Range:	X	X	X	X	0.92	X	
Enter Date Range of Data	Number of healthcare facility-onset CDIs	Number of predicted healthcare facility-onset CDIs	Facility Cumulative Attributable Difference (CAD), or the number of infections the facility would have needed to prevent to achieve an SIR reduction	healthcare facility-onset CDI standardized infection Ratio (SIR)	2014 National healthcare facility-onset CDI SIR	2014 State healthcare facility-onset CDI SIR	
Assessment Overview			Leading*		Lagging†		
# Collected: 250 # Analyzed: 250 Overall Mean Score: 46.7 out of 72, or 65%			Hand hygiene & PPE training to all healthcare personnel upon Hire and At Least Annually Feedback of performance to personnel on Hand Hygiene & Contact Precautions Housing of CDI patients separately from patients without CDI and use of signs Cleaning of shared medical equipment between patient uses		Provider & patient/family education about risk of CDI with antibiotics Monitor & Reduce use of Fluoroquinolones & Cephalosporins Appropriate testing and lab reporting for CDI, and communication of CDI status upon transfers Use EPA product effective against CdBF spores for Daily and Terminal disinfection in CDI rooms, following manufacturer's instructions		
- Scoring and results are for the purpose of internal quality improvement and should not be used as a method to benchmark against other units or facilities							
Selected Deep Dives – Top Opportunities for Improvement‡			SIR > 1.0 indicates more infections than predicted				
I. General Infrastructure 73%		II. Antibiotic Stewardship 41%		III. Early Detection, Appropriate Testing 87%		IV. Contact Precautions 69%	
Staff person with dedicated time to coordinate CDI prevention activities		Provider education about risk of CDI with antibiotics		Avoidance of testing for CDI for inappropriate indications		CDI patients remain on Contact Precautions beyond duration of diarrhea	
Patient/family education about risk of CDI with antibiotics		Monitor & Reduce use of Fluoroquinolones (antibiotic that is high-risk for CDI)		Laboratory reporting of initial test results within 24hrs of stool collection		Adherence to use of gowns/gloves: Patients' Families/Visitors	
Monitor & Reduce use of Fluoroquinolones (antibiotic that is high-risk for CDI)		Monitor & Reduce use of 5rd/4th Gen. Cephalosporins		Communication of CDI status upon transfer to your facility		Adherence to hand hygiene policies: Patients' Families/Visitors	
				Communication of CDI status to receiving facilities		EPA product effective against CdBF spores for Daily disinfection in CDI rooms	
						EPA product effective against CdBF for Terminal disinfection in CDI rooms	
						Manufacturer's instructions followed for use of disinfectants	

Are there resources available to help implement the TAP Assessment?

Yes! The Ohio Hospital Association can provide hospitals with free support including:

- Hospital-specific NHSN data reports
- Infection prevention consultation and resources
- Planning and logistics for survey distribution

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