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## Hospitals need to embrace prevention programs

Pam Deichmann, M.P.H., R.N., Letter to the Editor 12:45 p.m. CST December 28, 2016



(Photo: Register file photo)

Let's all hope those hospitals receiving Medicare fines for elevated hospital infection rates are now ready to show support of hospital infection preventionists and programs within hospitals. [[Mercy Medical Center in Des Moines penalized over patient-safety scores \(/story/news/health/2016/12/23/des-moines-mercy-penalized-over-patient-safety-scores/95759826/\)](#), Dec. 24] There is no doubt some of Iowa hospital systems could have avoided being penalized by Medicare, and more important reduced hospital acquired infections rates, if they had just chose to invest earlier in Centers for Disease Control infection surveillance programs and staff. Just think how much better an investment in prevention staff would be for hospitals vs. paying Medicare fines for increased infection rates.

Several years back, the Iowa Department of Public Health received grant funding from the CDC to assist hospital infection preventionists across the state and to prepare for reporting hospital infection surveillance data to Medicare. Those efforts produced recommendations to Iowa hospital administrators to invest in infection prevention staff and programs. However, many hospital systems only heard the voices of Tom Evans and Gerd Clabaugh, formerly of the Iowa Healthcare Collaborative. They promoted the idea of "we will do this our own way" and resisted hospital system discussions of standardized definitions and electronic reporting of hospital acquired infection rates. These early efforts lost hospitals several critical years in developing science-based methods to reduce infections and now contributes to large hospital fines.

— Pam Deichmann, M.P.H., R.N., Winterset

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