ANTIMICROBIAL RESISTANCE & INFECTION CONTROL

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P265: Structure for prevention of healthcare-associated infection in Brazilian Hospitals

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Introduction

Minimal structure is required for an effective prevention of Healthcare-Associated Infection (HAI).

Objectives

Countrywide evaluation of structure for HAI prevention in a sample of hospitals from Brazil.

Methods

Hospitals from five Brazilian regions were evaluated (n=91; total of 8,853 beds). A team of trained nurses carried out the evaluation, focusing on structure and process issues for HAI prevention and control (HAI-PCC). Teaching hospitals were used as reference for comparisons.

Results

The majority of components of HAI-PCC in reference hospitals were identified with conformity indexes (CI) above 80%; other hospitals have achieved CI below 70% in most situations. The component of HAI surveillance showed the worst CI in non-reference hospitals (below 65.7%). The worst ratio of beds/sinks was found in hospital with >200 beds (4.5, $p<0.0001$). Regarding alcoholic products, the worst ratio beds/dispensers was found in non reference hospitals with > 200 beds (4.2; $p<0.001$) or with <50 beds (4.0; $p <0.001$) compared to reference hospitals (2.8). The overall CI for handwashing structure was 51.7% and for hand hygiene with alcohol was 81.2%; better CI occurred in reference hospitals (65.2% and 83.1%, respectively). The CI for sterilization services showed huge variation from 0 to 100%, and was better for reference hospitals. Those hospitals were also more likely to have their own microbiology laboratories.

Conclusion

These data point out to problems with structure for infection control in non-teaching hospitals in Brazil.

Competing interests
None declared.

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