

2015

# **Ebola preparedness one year later:** A poll of APIC members



Association for Professionals in Infection Control and Epidemiology (APIC)  
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## Ebola preparedness one year later: A poll of APIC members

To assess member attitudes about preparedness for Ebola and other lethal infectious diseases, APIC surveyed its 15,000 infection preventionist (IP) members via a 16-question online poll taken September 24-30, 2015. Responses from the 981 U.S. respondents who practice in acute care hospitals are summarized in the charts below. Where possible, results are compared to APIC's 2014 Ebola Readiness Poll conducted October 10-15, 2014.

The survey asked a number of questions to help discern if IPs believe their facilities are more prepared than a year ago to deal with a patient with a highly lethal infectious disease, such as the Ebola virus. APIC's intent is to help inform dialogue, indicate progress, and flag areas where additional work is necessary.

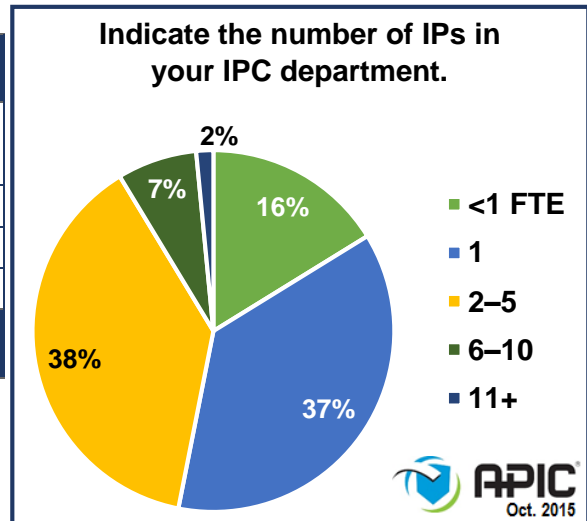


The following results include U.S.-based infection preventionists (IPs) who practice in acute care inpatient facilities.

## Demographics

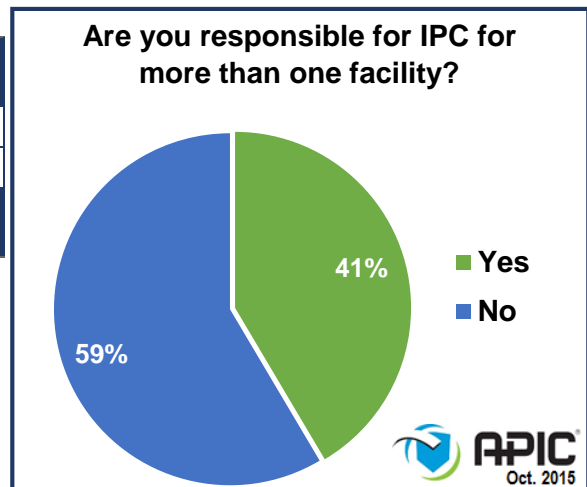
Indicate the number of infection preventionists (IPs) in your infection prevention and control (IPC) department.

Response	Count	2015 percentage	2014 percentage
<1 FTE	159	16.2%	50.6%
1	362	37.0%	
2-5	375	38.2%	41.5%
6-10	70	7.1%	6.5%
11+	15	1.5%	1.1%
<b>Grand total</b>	<b>981</b>		<b>1038</b>



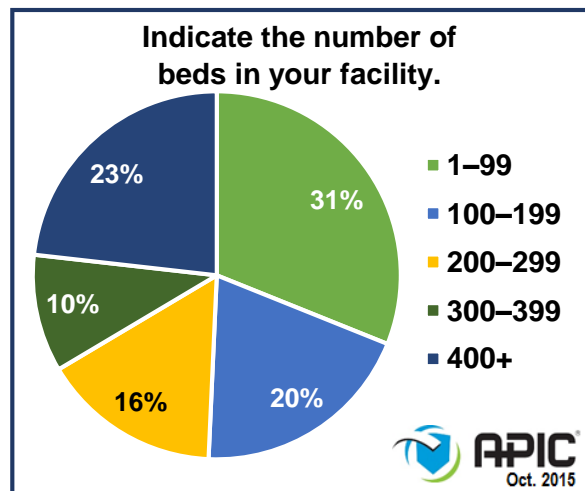
Are you responsible for IPC for more than one facility?

Response	Count	2015 percentage	2014 percentage
Yes	407	41.5%	45.0%
No	574	58.5%	54.9%
<b>Grand total</b>	<b>981</b>		<b>1038</b>



Indicate the number of beds in your facility.

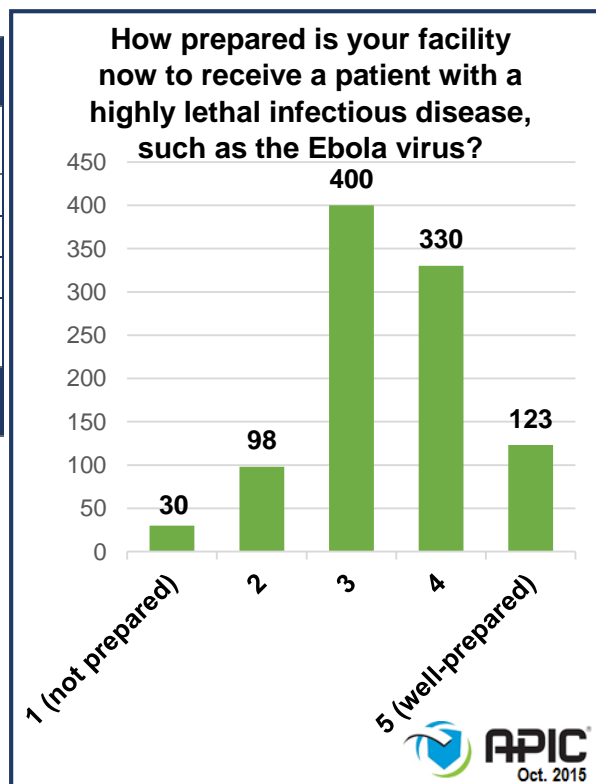
Response	Count	2015 percentage	2014 percentage
1-99	304	31.1%	27.8%
100-199	192	19.6%	21.8%
200-299	154	15.7%	18.6%
300-399	101	10.3%	12.3%
400+	227	23.2%	19.5%
<b>Grand total</b>	<b>978</b>		<b>1030</b>



## Preparation

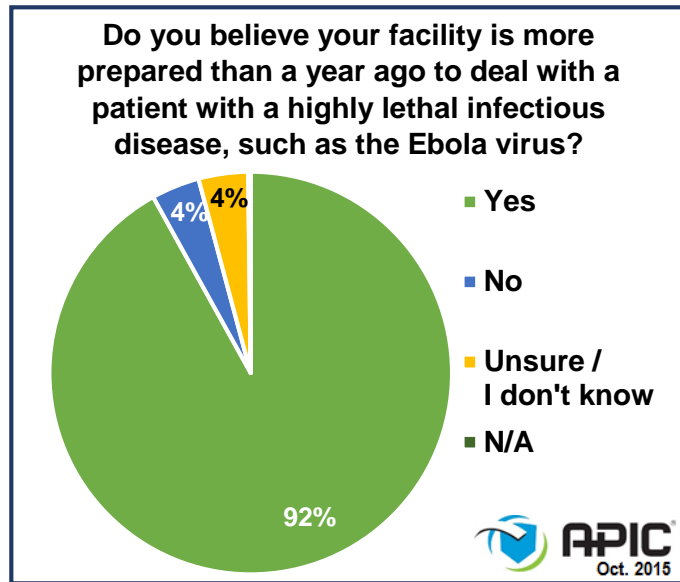
How prepared is your facility now to receive a patient with a highly lethal infectious disease, such as the Ebola virus?

Response	Count	2015 percentage	2014 percentage
1 (not prepared)	30	3.1%	5.1%
2	98	10.0%	16.8%
3	400	40.8%	39.8%
4	330	33.6%	31.8%
5 (well-prepared)	123	12.5%	6.5%
<b>Grand total</b>	<b>981</b>		<b>1037</b>



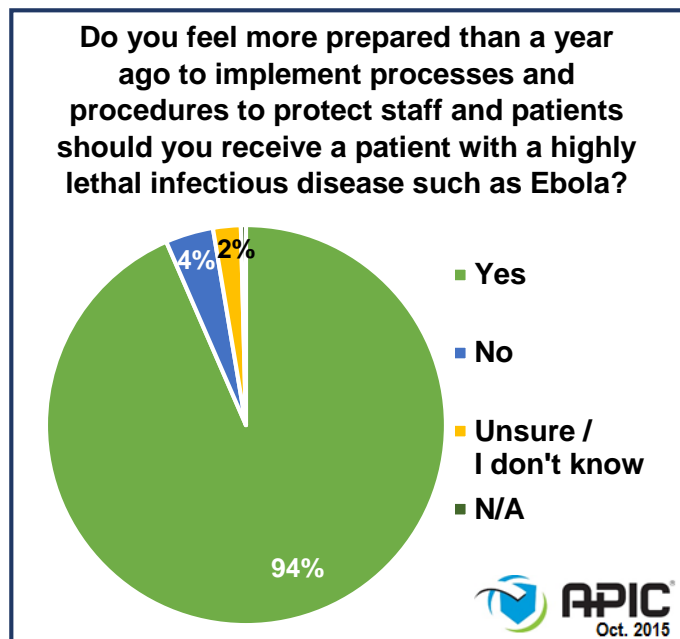
**Do you believe your facility is more prepared than a year ago to deal with a patient with a highly lethal infectious disease, such as the Ebola virus?**

Response	Count	2015 percentage
Yes	902	91.9%
No	38	3.9%
Unsure / I don't know	39	4.0%
N/A	2	0.2%
<b>Grand total</b>	<b>981</b>	



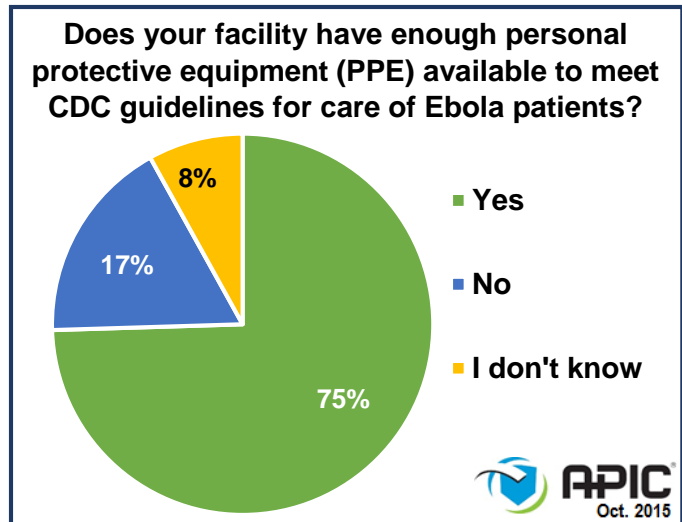
**Do you feel more prepared than a year ago to implement processes and procedures to protect staff and patients should you receive a patient with a highly lethal infectious disease such as Ebola?**

Response	Count	2015 percentage
Yes	917	93.5%
No	38	3.9%
Unsure / I don't know	22	2.2%
N/A	4	0.4%
<b>Grand total</b>	<b>981</b>	



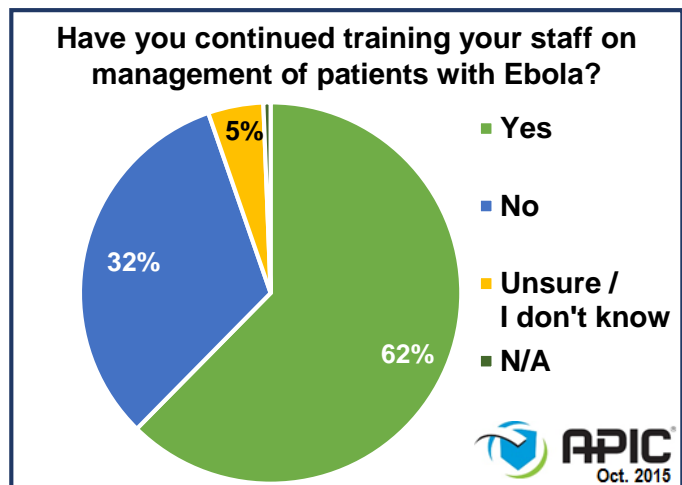
**Does your facility have enough personal protective equipment (PPE) available to meet CDC guidelines for care of Ebola patients?**

Response	Count	2015 percentage
Yes	731	74.5%
No	171	17.4%
I don't know	79	8.1%
<b>Grand total</b>	<b>981</b>	



**Have you continued training your staff on management of patients with Ebola?**

Response	Count	2015 percentage
Yes	612	62.4%
No	317	32.3%
Unsure / I don't know	46	4.7%
N/A	6	0.6%
<b>Grand total</b>	<b>981</b>	



### How did you determine competency among staff on donning and doffing PPE?

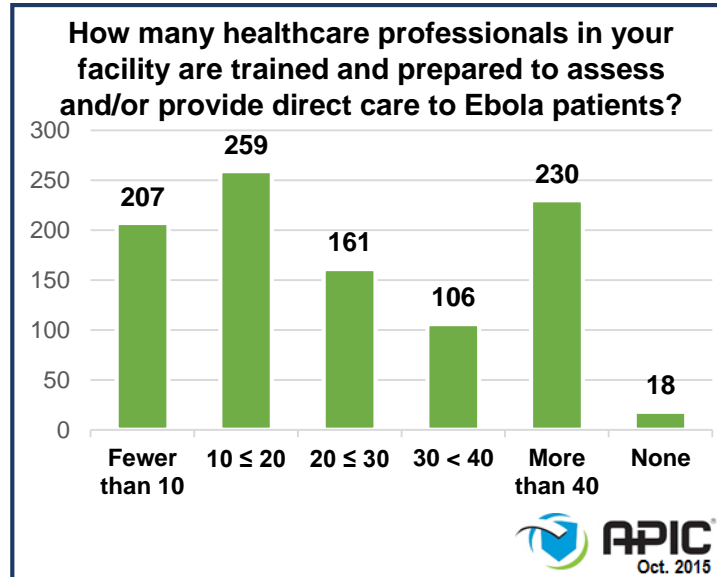
<b>Response</b> (Respondents could check all that applied.)	<b>Count</b>
<b>Use of a standardized checklist</b>	707
<b>Completed video or in-person training</b>	689
<b>Number of times in succession that donning and doffing was correctly performed</b>	316
<b>Amount of time spent on donning/doffing</b>	167
<b>We have not made that determination yet</b>	60
<b>Other</b>	51
<b>N/A</b>	10

### What is the frequency of retraining needed to maintain donning and doffing competency?

<b>Response</b>	<b>Count</b>	<b>2015 percentage</b>
<b>More frequently than once every month</b>	20	2.0%
<b>Monthly</b>	86	8.8%
<b>Every two months</b>	28	2.9%
<b>Quarterly</b>	180	18.3%
<b>2-3 times per year</b>	106	10.8%
<b>Annually</b>	191	19.5%
<b>When different PPE are put into use</b>	30	3.1%
<b>We have not made that determination yet</b>	323	32.9%
<b>N/A</b>	17	1.7%
<b>Grand total</b>	<b>981</b>	

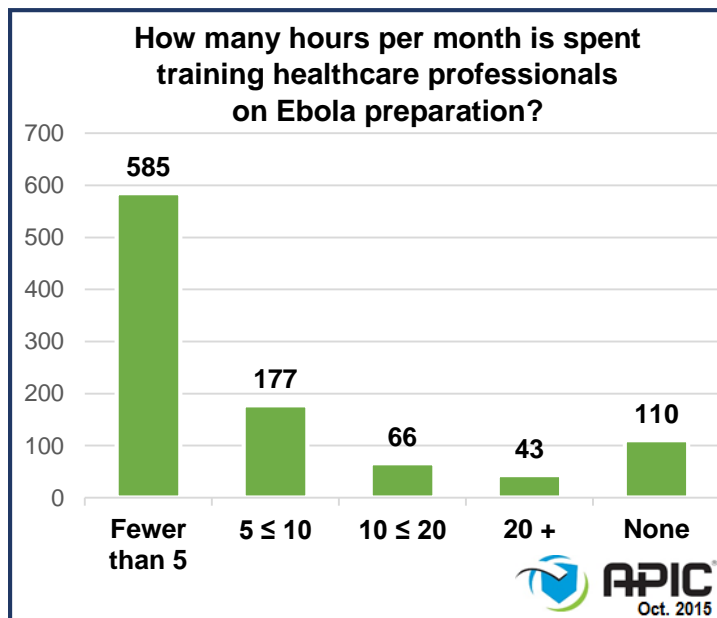
**How many healthcare professionals in your facility are trained and prepared to assess and/or provide direct care to Ebola patients?**

Response	Count	2015 percentage
Fewer than 10	207	21.1%
10 ≤ 20	259	26.4%
20 ≤ 30	161	16.4%
30 ≤ 40	106	10.8%
More than 40	230	23.4%
None	18	1.8%
<b>Grand total</b>	<b>981</b>	



**How many hours per month do you and other members of the infection prevention and control department spend to ensure that healthcare professionals in your facility are properly trained and prepared to assess and/or provide direct care to patients with Ebola or other highly lethal infectious diseases?**

Response	Count	2015 percentage
Fewer than 5	585	59.6%
5 ≤ 10	177	18.0%
10 ≤ 20	66	6.7%
20 +	43	4.4%
None	110	11.2%
<b>Grand total</b>	<b>981</b>	

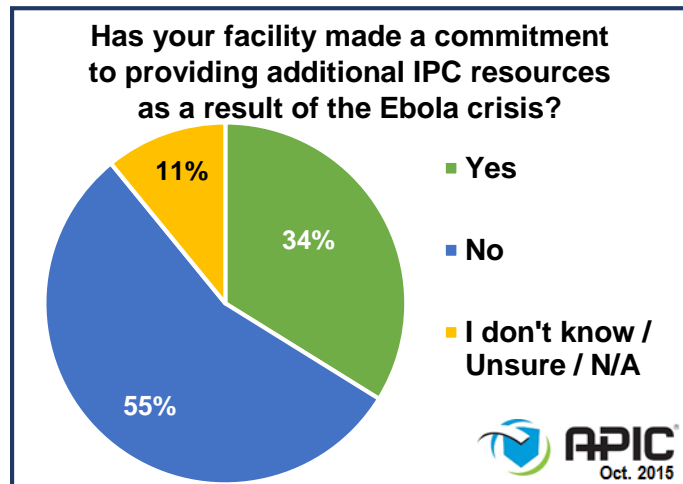




## Resources

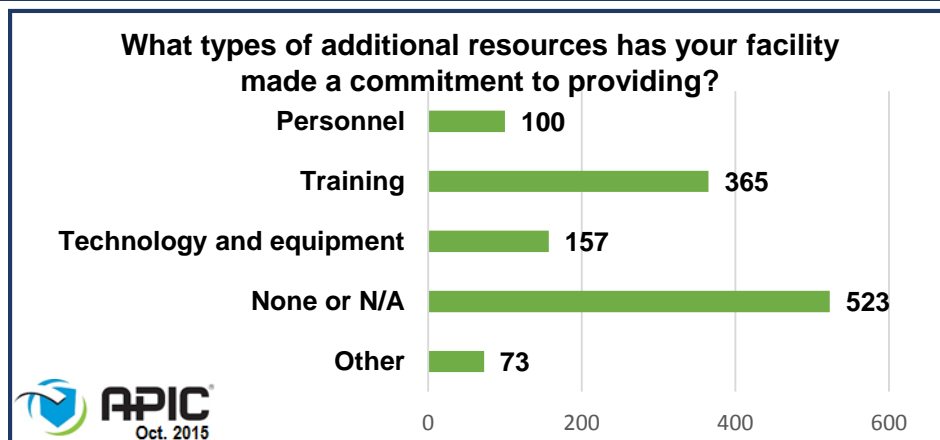
**Has your facility made a commitment to providing additional IPC resources as a result of the Ebola crisis?**

Response	Count	2015 percentage
Yes	332	33.8%
No	542	55.2%
I don't know / Unsure / N/A	107	10.9%
<b>Grand total</b>	<b>981</b>	



**What types of additional resources has your facility made a commitment to providing?**

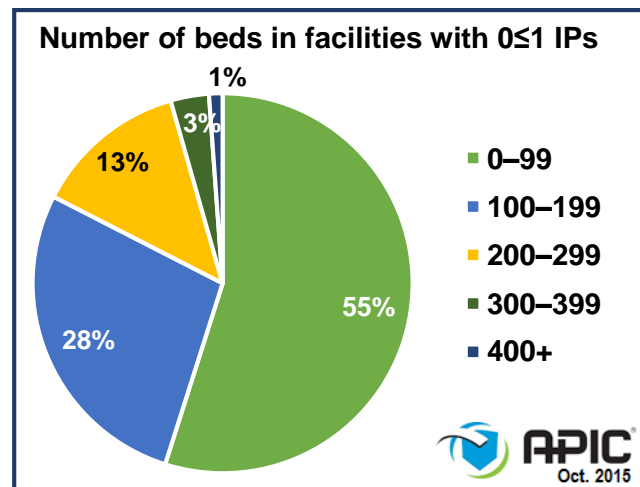
Response (Respondents could check all that applied.)	Count
<b>Personnel</b> (additional staff to support the facility's IPC program)	100
<b>Training</b> (additional resources to train healthcare workers to prepare for potential Ebola patients and others with highly lethal infectious diseases)	365
<b>Technology and equipment</b> (infection surveillance, tracking, and monitoring technology to ease surveillance burden)	157
<b>None or N/A</b>	523
<b>Other</b>	73



## Cross-tabulation: Assessment of facilities with 0≤1 IPs

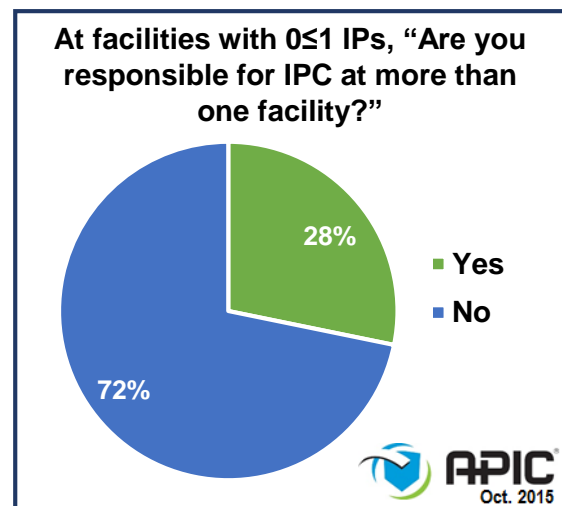
### Number of IPs in the facility vs. number of beds in the facility

Number of IPs	0-99	100-199	200-299	300-399	400+	N/A	Grand total
<1 FTE	137	19	2	0	1	0	159
1	149	125	66	17	5	0	362
2-5	17	47	85	79	146	1	375
6-10	1	1	1	5	62	0	70
11+	0	0	0	0	13	2	15
<b>Grand Total</b>	<b>304</b>	<b>192</b>	<b>154</b>	<b>101</b>	<b>227</b>	<b>3</b>	<b>981</b>



### Number of IPs in the facility vs. number of IPs who are responsible for IPC for more than one facility

Number of IPs	Yes	No	Grand total
<1 FTE	35	124	159
1	112	250	362
2-5	201	174	375
6-10	46	24	70
11+	13	2	15
<b>Grand Total</b>	<b>407</b>	<b>574</b>	<b>981</b>





## About the Association for Professionals in Infection Control and Epidemiology (APIC)

APIC is the leading professional association for infection preventionists (IPs) with more than 15,000 members. APIC's mission is to create a safer world through prevention of infection. The association advances its mission through patient safety, implementation science, competencies and certification, advocacy, and data standardization.

Most APIC members are nurses, physicians, public health professionals, epidemiologists, or medical technologists who:

- **Collect, analyze, and interpret health data in order to track infection trends, plan appropriate interventions, measure success, and report relevant data to public health agencies.**
- **Establish scientifically based infection prevention practices and collaborate with the healthcare team to assure implementation.**
- **Work to prevent healthcare-associated infections (HAIs) in healthcare facilities by isolating sources of infections and limiting their transmission.**
- **Educate healthcare personnel and the public about infectious diseases and how to limit their spread.**

Many IPs are employed within healthcare institutions and also serve as educators, researchers, consultants, and clinical scientists. The majority of APIC members are affiliated with acute care settings. An increasing number of members practice in ambulatory and outpatient services where they direct programs that protect patients and personnel from HAIs. Members are also involved in long-term care, home health, and other practice settings where infection prevention and control is an increasing area of responsibility for nurses and other healthcare personnel.

APIC's educational programs, products, and services support the infection prevention activities of the many patient safety stakeholders. APIC collaborates with other professional associations, consumer groups, and thought leaders, as well as regulatory and accrediting bodies, to maximize the synergy of shared interests and resources with the goal of improving patient outcomes. Visit APIC online at [www.apic.org](http://www.apic.org).