Edited by Robert Weinstein, MD

The Society of Hospital Epidemiolgists of America

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Paying for Hospital Epidemiology

A ten-question survey was distributed to SHEA members in mid-1987. Responses were obtained from 212 of 420 members (50.5%); 203 questionnaires contained usable data. Information related to hospital bed size, teaching affiliation and annual pay for hospital epidemiology functions is reported in the Table.

Table
SHEA Survey Results

University Affiliation	Annual Payment for Hospital Epidemiology Function, Thousands of Dollars (no. respondents)				
	Hospital Bed Size				
	<200	200-299	300-399	400-499	≥500
Primary hospital		19 (3)	26.7 (3)	16.3 (6)	38.4 (23)
Major affiliate	19.2 (4)	11.2 (6)	14.9 (7)	16.3 (6)	25.8 (18)
Minor affiliate	0 (2)	11.6 (8)	21.3 (5)	22.9 (8)	21 7 (21)
Non-teaching	13.7 (3)	22 (11)	17.5 (4)	8.8 (5)	0 (1)

For university and affiliated teaching hospitals, there is a rough correlation between increasing hopital size and increasing payment for performing the duties of "hospital epidemiologist." There were very few individuals who indicated that they received some payment for controlling antimicrobial agents within the hospital, for employee health-related activities or for clinical microbiology.

The number of respondents in some cells is quite small and the degree of reporting bias may be large. However, these data reflect the opinion that physicians (and others) who perform the administrative, political and epidemiologic duties of the "hospital epidemiologist" should be paid for this work. The pay may vary depending on the size and complexity of the institution and the extent of the task. Nevertheless, this task is not comparable to serving as chair of a medical staff committee where the work is performed by hospital administrative staff hired for the purpose. Another survey within the next two years would be helpful to determine the degree of change in these figures.

Bruce Hamory, MD
Hershey, Pennsylvania

Year 2000 Health Objectives

The National Academy of Sciences held a 'Year 2000 Health Objectives Consortium Meeting" October 31-November 1 in Washington, D.C. The object was to provide a forum for public comment on the draft of the "Objectives" that had been formulated by the U.S. Public Health Service with input from over 7000 people. C. Glen Mayhall, MD, represented SHEA and provided the substance of this report.

Three of the 21 sections for which objectives had been developed contained issues of direct concern to SHEA. In addition, there was a fourth section, "Surveillance and Data Systems," that was of potential concern, but contained no objectives related to nosocomial infections. Specific objectives of interest to SHEA included:

OCCUPATIONAL SAFETY AND HEALTH

9.6. Reduce Hepatitis B infections among healthcare workers to no more than 620 new cases yearly (Baseline: an estimated 6,200 cases in 1987).

9.12. Increase Hepatitis B immunization levels to 90% among healthcare workers (Baseline data unavailable).

9.26. For facilities in which workers are at risk for occupational transmission of HIV, increase to at least 95% the proportion that have formal written policies and procedures for infection control precautions for all workers (Baseline data unavailable).

IMMUNIZATION AND INFECTIOUS DISEASES

12.5. Reduce by at least 10% the incidence of surgical wound infec-

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tions and nosocomial infections in intensive care patients (Baseline data available in 1990).

HIV INFECTION

13.17. Expand to all states prohibitions on discrimination against people with AIDS or HIV infection to enhance opportunities for early diagnosis and prevention of the spread of infection (Baseline: 25 states in 1989).

Written comments were invited from meeting attendees. Dr. Mayhall responded that an objective for the National Nosocomial Infection Study should be included in the section on "Surveillance and Data Systems." He also expressed concern that heavy emphasis on HIV infection and AIDS may have been at the expense of an appropriate level of concern and funding for the control and prevention of nosocomial infections.

There will be a meeting in July 1990 to celebrate the release of the final Year 2000 Health Objectives.

Clinical Epidemiology Fellowship

The Merck Company Foundation and The Society for Epidemiologic Research (SER) announce the availability of a fellowship program in clinical epidemiology. Awards will be made to medical schools, schools of public health or other suitable U.S. institutions to support career development for full-time clinical epidemiologists and to 'foster clinical epidemiologic research and methodology development by junior faculty The awards are payable at the rate of $60,000 in year 1, $63,000 in year 2 and $67,000 in year 3. It is expected that in general $10,000 will be used for research, education and other expenses and the remainder for salary.

To be considered for a Merck/SER Fellowship, applicants must be full-time doctoral-level members of faculty of a U.S. school of medicine or public health. Preference will be given to persons with not less than two nor more than five years of experience in epidemiology or a related field.

The institution sponsoring the applicant must submit the application. Only two applications per institution will be accepted. Award selection will be made by a Scientific Advisory Committee that has been appointed upon the advice of SER. There will be no representatives from Merck on the Advisory Committee. It is anticipated that two awards will be made annually. The 1990 award will be announced June 1, 1990.

Obtain application instructions from, and submit completed application packets to David Savitz, PhD, Department of Epidemiology, CB#7400 Rosenau Hall, School of Public Health, University of North Carolina, Chapel Hill, NC 27599. The deadline for applications is April 1, 1990.

Membership Application Inquiry:

Mail to: Secretary
Society of' Hospital
Epidemiologists of' America
% Slack, Incorporated
6900 Grove Road
Thorofare, NJ 08086

NAME: _____
CURRENT POSITION: _____
ADDRESS: _____
_____
_____ ZIP _____

Doctoral Degree - MD __ PhD
Date and University:
_____

Specify work in hospital epidemiology and related fields:
_____
_____

Dates in this position:
_____

Related work in the field:
_____

(✓) Check type of' membership application:

__ Active Membership
(Calendar year dues $75)

__ Associate Membership
(Calendar year dues $35)

Items of interest for the SHEA Newsletter should be sent to Robert A. Weinstein, MD, SHEA Newsletter Editor, Division of Infectious Diseases, Michael Reese Hospital, Lake Shore Drive at 31st St., Chicago, IL 60616. Copy must be typed, double-spaced and may not exceed five pages.

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