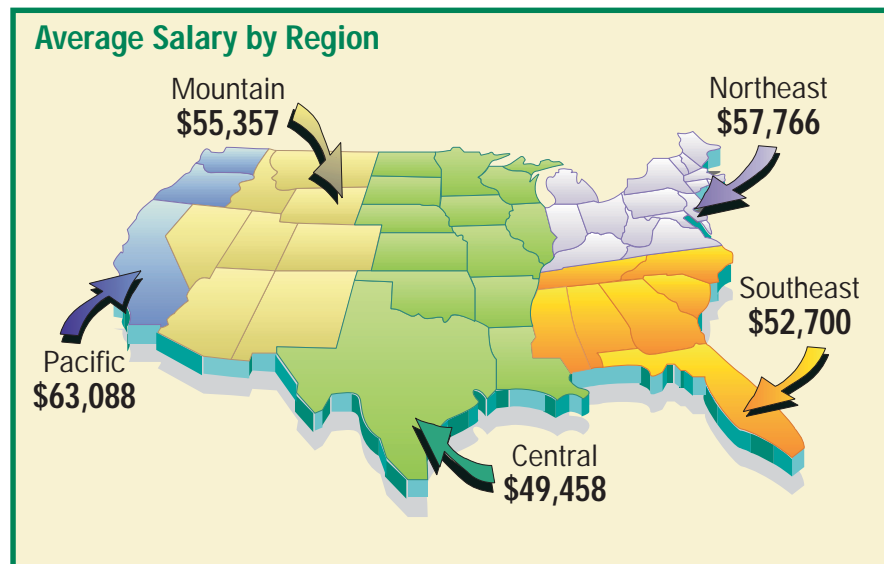


The price of prevention: HPN's 2004 Infection Control salary survey

By Jeannie Akridge

The job they perform is critical to the entire hospital, and encompasses a multitude of functions. Every day they assess new threats to the safety of patients, workers, and even the community outside, and provide their infection control expertise to the entire facility. Once again, *Healthcare Purchasing News* surveyed our Infection Control readers to see how their salaries compared; and what factors affected those numbers.

For 2004, we were pleased to find an increase in the number of respondents to our survey at 158, up from 140 in 2003. Once again, most respondents were female. In fact, women topped the charts this year at nearly 96%; with just 7 men responding. Different than last year though, men have noticed a significant rise in their average salaries, up to \$57,500 from \$52,697 in 2003. Consequently the salaries of this minority group of male infection control practitioners has overtaken that of their female counterparts by over \$3,000 per year (female ICP workers averaged \$54,010 in 2004.)

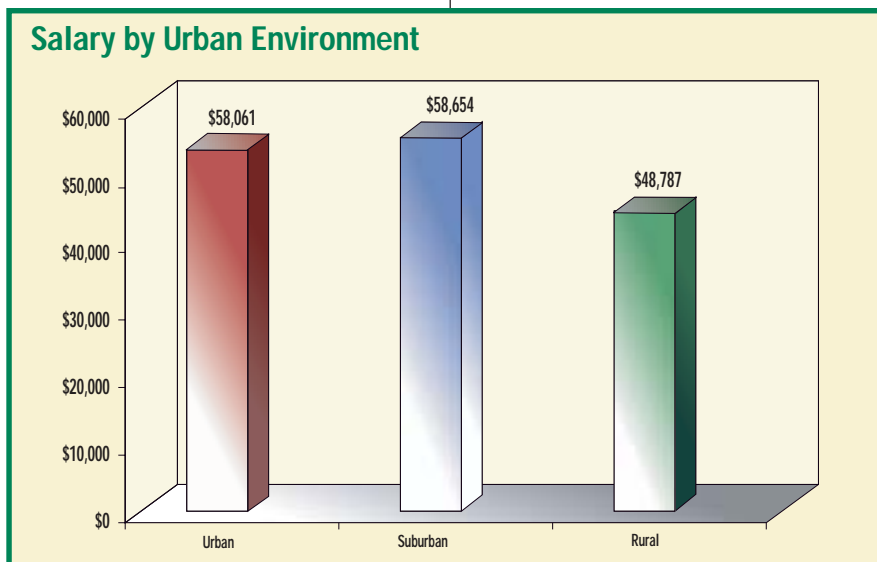


On the whole, 72% of our respondents stated that they had experienced an increase in their 2004 base salary over their 2003 salary. Yet, according to the data, the mean salary of \$ 54,167 for 2004 is a decrease of

6%, down from \$57,660 in 2003. Two possible contributing factors to the salary decrease include an increase in the number of respondents from the lowest paying region in the country, as well as a slight decline in the number of years on the job.

For 2004, 38.5% of respondents were from the Central Region of the U.S. vs. just 29.3% in 2003. At the same time, salaries from the Central Region experienced a decline from \$52,313 to \$49,458. (Highest earnings by region could be seen in the Pacific region at \$63,088.)

In addition, the number of years that survey respondents have practiced both in infection control and at their present facility has declined slightly from previous years. While the average number of years that these professionals have been involved in their role in infection control is 10 years, a full 45% have been on the job for just between two and nine years, and are earning in the neighborhood of \$52,000. Interestingly, nearly 15% of those surveyed have practiced in their profession for more than 20 years. The biggest jump in salary increase can be seen for those



who have practiced infection control for 25 or more years; these veterans earn on average \$65,357 per year.

The average number of years that our respondents have worked at their current facility is 8.1 years, while a majority of 27.6% said they have worked at their facility for between two and five years. Average salaries across the board for those with less than ten years of service at their current facility were just over \$52,000; whether they had worked at their facility for less than two years, or nine. Those working at their facility for between 10 and 14 years reported average earnings of \$59,318. One infection control professional reported a salary of \$72,500 for more than 25 years of service at the same facility. The average age for our respondents was 49, with an average salary of \$52,500.

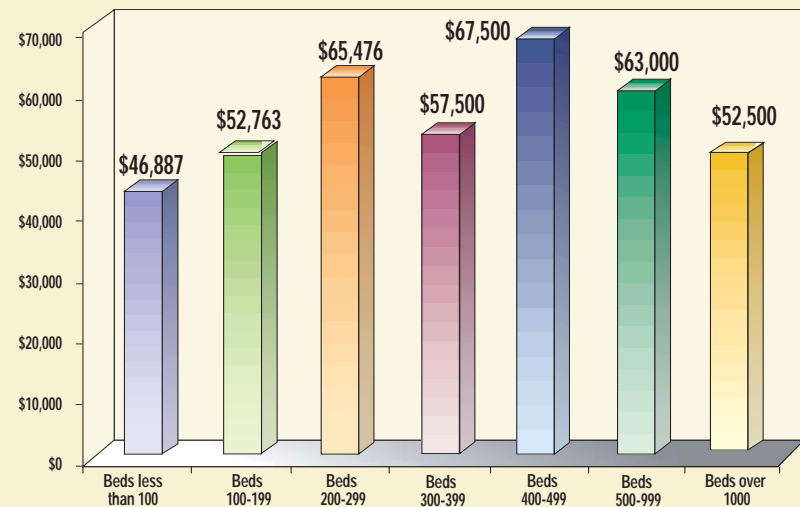
A majority of respondents (34%) said their title could best be described as ICP Coordinator. They reported average earnings of \$51,321, which is just above the average salaries of IC nurses who reported this year's lowest earnings at \$50,086. Next in line was Infection Control Practitioner at 20% of respondents, with average earnings of \$57,500. We calculated 18% of responses as Infection Control nurse, and 16% as ICP Manager. The 2% who reported their job description as "other" earned the most at \$65,833.

This year, 44% of ICP professionals are reporting directly to the Director of Quality/Risk Management, as compared to 36% last year. Those reporting to Vice President/Director, Nursing make up 28% of our totals. We saw a slight decrease in the numbers reporting to CEO/Hospital administrator, COO, and Vice President/Director of Nursing.

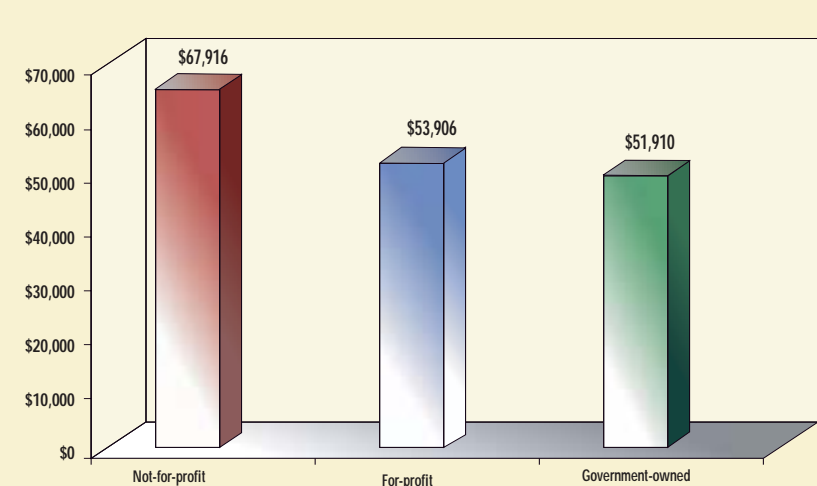
Also, as in years past, we found the greater part of our readers (73%) work in a standalone hospital environment. This reflects a slight increase from previous years, along with an 8% decrease in the number working for an IDN or multi-group alliance. This year 4% work in a long term care facility or home health agency.

The number working specifically in the non-profit sector continues to be the majority this year at 68%. Next in line is for-profit at 21%, followed by those working in the government sector at 12%. Those in non-profit hospitals are earning the most with an average salary of \$67,916, followed by for-profit at \$53,906; and the lowest earners can be found in government facilities at \$51,910.

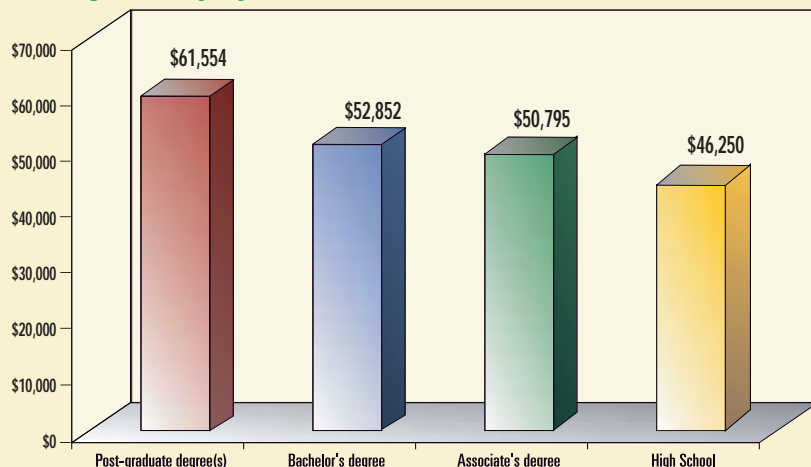
Average Salary by Number of Beds



Salary by Type of Hospital



Average Salary by Education



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Once again, the majority of our infection control salary survey respondents work in rural areas at 43%. Those working in urban areas totaled 31%; and suburban areas, 25%. In contrast to last year's results suburban areas house the highest earners at \$58,654 compared to 2003 averages of \$55,687. Those working in urban areas report average earnings of \$58,061 for 2004, as compared to \$59,131 for 2003. Rural areas continue to report the lowest earnings at \$48,787, very close to last year's figure of \$48,455.

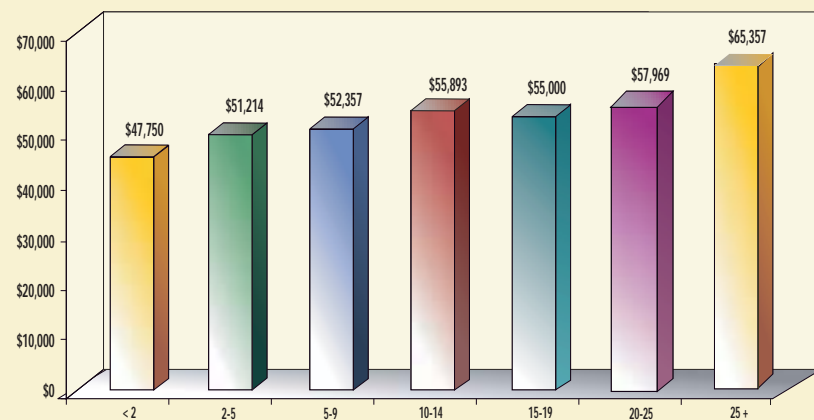
The average bed-size of our responders' facilities was 246; however a majority of 34.6% reported their facility's bed-size as less than 99. Earnings for these small hospitals averaged \$46,887 as compared to an average salary of \$67,500 for hospitals with between 400-499 beds.

Falling in line with previous year's research, the *HPN* survey shows that 85% of responses came from practitioners that were currently licensed or had previous experience as registered nurses. Also similar to previous surveys, 9% of respondents have experience as a medical technologist.

With the ever-increasing need for front line medical professionals to move into operational positions within the medical facility, education, licensing, and continuing education play a key role. A bachelor's degree is held by 72% of those that answered our survey followed by 44% with an associate's degree. This varied only slightly from years previous with 76% with bachelor's degrees and 32% earning an associate's degree. Nearly 25% of 2004 respondents hold post-graduate degrees which earns them an average salary of \$61,554 as compared to those holding Bachelor's degrees at \$52,852.

We also saw that participating in an industry organization and obtaining an industry certification was particularly important to most ICPs. This year, a majority of 38% of respondents reported that they were certified by CBIC (Certification Board of Infection Control and Epidemiology); 26% percent reported APIC (Association for Professionals in Infection Control and Epidemiology) certification; 34.2% said they had certifications from other organizations.

Salary by Years in Infection Control

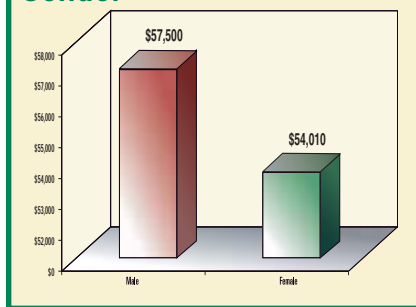


As a conduit for continuing education, *HPN* is also pleased to report that nearly all of our survey respondents participate in CE classes. With the medical field changing as quickly as the days that pass, it is imperative that those involved in infection control keep up with all new and relevant industry information. For this reason, nearly all of *HPN's* IC salary survey respondents participate in CE courses each year with 27% partaking in more

somewhat secure with their job, compared to 41% last year. And up 3% from last year were the number of ICP workers who felt somewhat insecure in their jobs. Numbers continue to rise for those who say they did not, or do not expect to receive a bonus/incentive as part of their annual compensation. A majority of 89% are not counting on such a windfall. Last year that figure was 79%. Infection control practitioners continue to work mostly solo in their departments. A full 94% said that their infection control department included just one to three infection control practitioners. For the first time this year, a lone respondent said their infection control department had more than 10 ICPs.

The time that ICPs spent on infection control work hovered around 80% again this year, but a majority of 41% said that they spent 91 to 100% of their time on directly infection-control related issues. Those that spent about half of their time on infection control issues totaled 16%. And what are they doing when they're not working on infection control? Employee health issues accounted for 28% of responses; 36% answered "other"; 11% answered Patient Safety; and 10% Quality Performance Management. *HPN*

Average Salary by Gender



than 20 classes each year. We calculated the average number of CE tests taken per year at thirteen.

Still, with their obvious dedication to keeping current on the latest in infection control issues and standards, the number of ICP practitioners who felt very secure in their jobs has unfortunately dropped from 53% to 47%. Now 46% of respondents said they are