



Health Care Quality Performance (HCQP) Program

HOSPITAL-ACQUIRED INFECTIONS AND PREVENTION ADVISORY SUBCOMMITTEE

8:00-9:00am, October 25, 2010

Department of Administration, Conference Room C

Goals/Objectives

- To discuss HAI work to date and make policy recommendations for pending and upcoming reports

Members

G Nicole Alexander, MD	T Maureen Marsella, RN, BS	T Janet Robinson, RN, Med, CIC
T Rosa Baier, MPH	T Linda McDonald, RN	T Melinda Thomas
T Utpala Bandy, MD	T Leonard Mermel, DO, ScM	T Nancy Vallande, MSM, MT, CIC
G Margaret Cornell, MS, RN	T Pat Mastors	T Cindy Vanner
T Marlene Fishman, MPH, CIC	T Robin Neale, MT (ASCP), SM, CIC	T Samara Viner-Brown, MS
T Julie Jefferson, RN, MPH, CIC	T Kathleen O'Connell, RN	
T Andrew Komensky, RN	G Lee Ann Quinn, RN, BS, CIC	

Time

Topic/Notes

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| 8:00am | <p>Welcome & Administrative Updates
<i>Leonard Mermel, DO, ScM</i></p> <ul style="list-style-type: none"> - Len opened the meeting and reviewed today's objective, which is to continue the C. difficile discussion begun at the September Subcommittee meeting. |
| 8:05am | <p>C. difficile Reporting
<i>Leonard Mermel, DO, ScM</i></p> <ul style="list-style-type: none"> - Len then opened discussion about next steps for C. difficile reporting, summarizing the discussion to date and the questions that remain. - His conversations with Dr. Gifford helped him understand, despite some initial reluctance, that C. difficile reporting will increase infection control resources needed to reduce C. difficile risk in hospitals. Although not many states were reporting C. difficile (as of the last environmental scan) and there is some between-hospital variability with regards to testing methods and their sensitivity, some of these can be taken into account by stratifying reporting based on test types. - Len asked the Subcommittee to consider the following: <ul style="list-style-type: none"> • What will we recommend for reporting? • What needs to be defined? • What will the timeframe be for reporting? - The Subcommittee discussed the following: |

- Use infections or lab IDs within NHSN. The group previously recommended using NHSN for both MRSA and C. difficile, but had not yet decided on use of infections or lab IDs for C. difficile reporting. Although the HHS priority topics specify lab IDs, the group felt that this was a proxy for true infections and that reporting infections was a better metric for public reporting. Most hospitals are now enrolled in NHSN.
- Feasible data collection timeframes. Given the CMS reporting requirements and Q1 2011 MRSA CLABSI reporting, the group felt that Q2 2011 would be the earliest possible pilot. After the pilot, the Subcommittee can discuss whether to publicly report the data or wait until the next quarter for reporting.
- Data collection definitions. Dr. Bandy asked the group about plans to standardize data collection definitions, with Kathy volunteering that the ICP SNE group could address C. difficile definitions and create a summary document, similar to the one they created for MRSA. The ICP SNE group is next meeting in November.
- Data submission to HEALTH. To minimize data submission burden for the hospitals, Julie asked if the state could obtain access to hospitals' data within NHSN. Maureen indicated she thought it was possible for hospitals to restrict HEALTH's access to a particular module or modules.
- Data report formats. Rosa indicated that while the pilot is ongoing, the Subcommittee can vet report formats and then view their own data and the state average or blinded facility-level scores. The public reporting program asks Subcommittees to vet report format/methodology prior to the availability of data, to ensure a level playing field.

Previously, Len suggested stratifying by testing method (separating hospitals using PCR and non-PCR testing). Rosa indicated that if the group would like to take into account casemix, there is a casemix index that can be incorporated into the statistical analyses. Sam and Rosa will investigate the logistics and present this during the report formatting discussions.

- **Vote:** After discussion, the group approved publicly reporting hospitalwide C. difficile infections using NHSN, beginning with a Q2 2011 pilot and then initiating ongoing publicly reporting with Q3 2011 data—unless the group decides to begin with Q2 2011 after completing the pilot process (Yes – 15, No – 0, Abstain – 2).

8:55am **Action Items & Next Steps**

Rosa Baier, MPH

- After completing the C. difficile discussion, Rosa and Len quickly reviewed upcoming data collection efforts:
 - CLABSI and SCIP: Quarterly data updates are ongoing, with a 2-week CLABSI data submission reminder going out today to hospitals.
 - Flu vaccination: The report and letter will be disseminated as early as today.
 - Hand hygiene: The annual report is due for an update in January, so the public reporting program needs to re-issue the survey then and update the report.
 - MRSA: Hospitals are preparing to submit data to NHSN in January, at which time the Subcommittee will begin developing report formats.

- C. difficile: As above, the ICP SNE group will review the C. difficile definitions in November and share that with the Subcommittee. As with MRSA, the Subcommittee will begin developing report formats in Q1 2011.
- Given the fact that most upcoming steps are slated for January 2011, Len recommended canceling the November meeting (the week of Thanksgiving) and tentatively holding the December date (the week of Christmas), but considering canceling that date, too, if the agenda is not time-sensitive.
- **Action items:**
 - Share Subcommittee recommendation with Dr. Gifford (Len/Sam/Rosa)
 - Review the C. difficile definitions at the November ICP SNE group meeting (Kathy)
 - Verify that hospitals can give the state access to NHSN by module (Maureen)
 - Ask CDC for other states' C. difficile reporting formats (Maureen)
 - Outreach to hospitals to determine NHSN enrollment status (Maureen)
 - Research using the casemix index for risk adjustment (Rosa/Sam)
 - Update environmental scan for C. difficile reporting (Rosa/Hannah)
 - Contact Kim Chapin to share Lifespan's C. difficile testing abstract (Len)
 - Determine whether to hold the December Subcommittee meeting (Len/Sam)
- **Upcoming meetings:**
 - 11/22/10 meeting cancelled
 - Next meeting scheduled for 12/20/10 (may cancel and reconvene in January)