



Healthcare Quality Reporting Program

HOSPITAL-ACQUIRED INFECTIONS AND PREVENTION ADVISORY SUBCOMMITTEE

8:00-9:00am, 2/24/14 at Healthcentric Advisors

Goals/Objectives

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

Members

- | | | |
|---|---|---|
| <input type="checkbox"/> Nicole Alexander, MD | ✓ Maureen Marsella, RN, BS | <input type="checkbox"/> Lee Ann Quinn, RN, BS, CIC |
| ✓ Rosa Baier, MPH | ✓ Linda McDonald, RN | ✓ Janet Robinson, RN, Med, CIC |
| ✓ Utpala Bandy, MD | ✓ Leonard Mermel, DO, ScM | ✓ Nancy Vallande, MSM, MT, CIC |
| ✓ Emily Cooper, MPH | ✓ Pat Mastors | <input type="checkbox"/> Cindy Vanner |
| ✓ Marlene Fishman, MPH, CIC | ✓ Robin Neale, MT (ASCP), SM, CIC | ✓ Samara Viner-Brown, MS |
| ✓ Yongwen Jiang | <input type="checkbox"/> Kathleen O'Connell, RN,BSN,CIC | |
| ✓ Julie Jefferson, RN, MPH, CIC | ✓ Sheila Turner, RN, MA | |

Time Topic/Notes

8:00am **Welcome & Administrative Updates**

Leonard Mermel, DO, ScM
Samara Viner-Brown, MS

- Len welcomed the subcommittee members and reviewed the previous meeting's action items:
 - **Look into comparison pages for Google Analytics** (Emily) – **complete**
Emily presented several pages as comparison pages (see below).
 - **Populate Hospital Summary report** (Emily/Rosa) – **complete**
The Hospital Summary Report has been published on the HEALTH website. This report was discussed further during the meeting (see below).
 - **Create Methods report for Hospital Summary Report** (Emily/Rosa) – **complete**
Emily and Rosa created the methods report for the hospital summary report. This report has been published on the Health Department website and will be discussed further during this meeting.
 - **Further research NHSN's instructions for health system employees** (Emily/Rosa) – **pending**
This action item relates to prior discussion about health systems excluding (not reporting data for) non-employees who receive a paycheck from the system vs. the hospital. Rosa corresponded with NHSN in mid-December, and said she would include the response with the minutes.

Time	Topic/Notes
	<p><i>Post-meeting update:</i> NHSN responded that individuals on the corporate payroll should be included in the “other contract personnel” category. This is the only non-employee category that includes both clinical and non-clinical roles.</p> <ul style="list-style-type: none"> <p>Research CMS’s planned measures to determine how they will aggregate the data (Emily/Rosa/Maureen) – <i>pending</i></p> <p>This action item relates to CMS’s planned flu vaccination reporting; no further information has been released, but Maureen will continue to keep the group apprised of any news.</p> <p>Brainstorm ways to increase employee flu vaccination reporting among nursing homes and home health agencies (All) – <i>in progress</i></p> <p>Emily has been attending Immunizations Programs workgroups related to this topic and the HCQP program is also working with Home Health and Nursing Home Subcommittee members to spread awareness of the requirement.</p> <p>– Google analytics (handout)</p> <p>The group reviewed the report that Emily provided. Emily responded to questions about the meaning of the various columns. The number of ‘page views’ is the number of people who went to a specific page; this number does not, however, indicate the number of people who might have opened a specific report to look at data. ‘Unique page views’ indicates the number of individual computers used to view that page. The ‘bounce rate’ indicates the number of people who went to a page from a link, not from the Healthcare Quality Reporting main page, and then left the website from that same page, without looking further through the website. The ‘% exit’ indicates the number of people who looked at the page and then exited the page.</p> <p>Julie asked how the number of page views compares with other reports viewed by consumers, such as consumers looking for information related to Lyme disease. Emily and Rosa will look into this before the next meeting. <i>Post-meeting update:</i> Google analytics for the Lyme disease page are included with the minutes.</p>
8:10pm	<p>Hospital Summary Report <i>Rosa Baier, MPH</i> <i>Emily Cooper, MPH</i></p> <p>– C. difficile data source</p> <p>When the Hospital Summary Report was shared prior to publication, the project team received several suggestions that we were able to incorporate in the version that is now available on the website. There were also some comments about that data source to use for <i>C. difficile</i>, NHSN or Hospital Compare, so we included the report as a discussion topic today.</p> <p>Several committee members were concerned that the data on Hospital Compare does not reflect the recent improvements they have made in infection prevention, and might therefore be misleading to consumers. Some members suggested pulling the data directly from NHSN, so that we do not have to contend with the lag time experienced when pulling the data from Hospital Compare. Rosa explained that this would involve re-instating the <i>C. difficile</i> white paper because the Hospital Summary Report pulls data from existing reports. Adding additional white papers for other infection topics would also require approval by the Steering Committee, as this change would require additional program resources.</p>

Time	Topic/Notes
	<p>Maureen reminded the group that the <i>C. difficile</i> white paper was discontinued because of the burden on the infection preventionists and because there was concern about the hospital CEOs seeing different data on this report than what is published on Hospital Compare. If we brought back this report, the IPs would have to review it every quarter before it is published.</p> <p>After discussion of the pros and cons of using NHSN vs. MRSA data, Len polled the group. Although the initial poll was a tie, after further discussion the participants decided to continue to use Hospital Compare data.</p> <ul style="list-style-type: none"> - Report edits <p>Marlene asked about using the word ‘infection’ in the heading for the <i>C. difficile</i> column, because the data are LabID events. Rosa explained that the wording is the language used on Hospital Compare, which is chosen to be consumer friendly. Pat and others questioned whether or not consumers know what a LabID event means, or how it differs from an infection. Options for alternative headings were suggested; however, after Len polled the group, participants decided to keep the current heading.</p> <p>Marlene asked about differentiating between ICU and hospital wide measures by adding ‘ICU’ to the heading for the CAUTI and CLABSI columns. The group agreed and also recommended amending the narrative at the top of the page to include a sentence explaining that some data come from the whole hospital and some just from the ICU. Additionally it was decided that ‘MRSA Bloodstream Infections’ would now be ‘MRSA Central Line-Associated Bloodstream Infections.’</p> <p>The group also discussed whether consumers are aware of the difference in the hospitals’ patient populations and specialties, and recommended adding a sentence about these differences to the top of the report.</p> - Methods edits <p>The group then discussed the Methods wording, asking to update the definition of <i>C. difficile</i> to indicate that a LabID event does not mean that the patient exhibited clinical symptoms.</p> <p>Participants asked how often Hospital Compare updates the <i>C. difficile</i> data, since the Methods report notes annually. <i>Post-meeting update:</i> The Methods report is accurate; Hospital Compare updates <i>C. difficile</i> data annually.</p>
8:40am	<p>Hand Hygiene Survey <i>Rosa Baier, MPH</i> <i>Emily Cooper, MPH</i></p> <ul style="list-style-type: none"> - 2014 survey timeline and requirements (handout) <p>Rosa noted that the 2014 hand hygiene survey is live and will be open until Tuesday, March 4th. She reminded the group that this is a short survey aimed at determining whether hospitals are providing hand hygiene education, whether hand hygiene is being monitored and whether hand hygiene is being reported.</p> <p>Once the data are analyzed and the hospitals have had the opportunity to preview the reports during a 5-day period, we will post the report to HEALTH’s website and update the Hospital Summary Report.</p>

Time	Topic/Notes
	<ul style="list-style-type: none"> - Discussion: Group discussion included the expansion of this year's survey to include Butler and Bradley Hospitals.
8:55am	<p>Open Forum & Action Items <i>Rosa Baier, MPH</i></p> <ul style="list-style-type: none"> - Action items: <ul style="list-style-type: none"> • Create the Hand Hygiene Report (Emily/Blake) • Revise the Hospital Summary Report and Methods for the next update (Emily) • Send information regarding NHSN's instructions for health system employees to the Subcommittee (Emily/Rosa) - Next meeting: 4/21 at Healthcentric Advisors