Healthcare Quality Reporting Program

HOSPITAL-ACQUIRED INFECTIONS AND PREVENTION ADVISORY SUBCOMMITTEE

8:00-9:00am, 6/18/2012 at Healthcentric Advisors

Goals/Objectives
▪ To discuss HAI work to date and make policy recommendations for pending and upcoming reports

Members		
☐ Nicole Alexander, MD	☐ Linda McDonald, RN	☐ Georgette Uttley, MEd, BSN, RN
☐ Rosa Baier, MPH	☐ Leonard Mermel, DO, ScM	☐ Nancy Vallande, MSM, MT, CIC
☐ Utpala Bandy, MD	☐ Pat Mastors	☐ Cindy Vanner
☐ Marlene Fishman, MPH, CIC	☐ Robin Neale, MT (ASCP), SM,CIC	☐ Margaret Vigorito, MS, RN
☐ Yongwen Jiang	☐ Kathleen O'Connell, RN,BSN,CIC	☐ Samara Viner-Brown, MS
☐ Julie Jefferson, RN, MPH, CIC	☐ Lee Ann Quinn, RN, BS, CIC	
☐ Maureen Marsella, RN, BS	☐ Janet Robinson, RN, Med, CIC	

Time	Topic/Notes
8:00am	**Welcome & Administrative Updates** *Leonard Mermel, DO, ScM* *Samara Viner-Brown, MS* - Today's objectives - Previous meeting's action items: • Share *Rules and Regulations* public hearing date (Rosa/Sam) • Follow-up with the CDC with five quarters of data (Len/Rosa) • Survey lab directors about CRE methods (Nicole/Margaret) • Determine when CMS plans to report CDI using Lab ID (Maureen) • Review the HHS National Action Plan to Eliminate HAI (Subcommittee) • Schedule a call to discuss the National Action Plan to Eliminate HAI (Rosa) • Share HHS's call for public comments and draft National Action Plan (Pat) • Provide input on Pat's letter to HHS re: the National Action Plan (Rosa) • Consider submitting a letter to HHS re: the National Action Plan (Subcommittee
8:15am	**CDI Reporting** *Leonard Mermel, DO, ScM* *Rosa Baier, MPH* - Review CDI measurement options: • NHSN infection rates (current pilot) • NSHN Lab ID (CMS requirement, beginning July 2012) • Hospital Discharge Data Set data

- Discuss next steps:
  - Review Steering Committee guidance
  - Formulate recommendation

8:40am **HHS National Action Plan to Eliminate HAI**
Leonard Mermel, DO, ScM
Rosa Baier, MPH

- Debrief from call to discuss the draft National Action Plan
- Discuss letters in response:
  - Pat's letter
  - Draft Subcommittee advisory letter (handout)

8:50am **Open Forum & Action Items**
Rosa Baier, MPH

- AHRQ's State Snapshot
- Discussion of hospital requirement to inform patients of infection risk (Pat)
  - "The advisory committee shall recommend written guidelines to be given to every individual before and if necessary during their hospitalization for the purpose of preventing hospital-acquired infections. In emergency hospitalizations, written guidelines shall be given within a reasonable period of time." (R.I.G.L. Chapter 23-17.17)
- Action items
- **Next meeting:** 7/16/12 at Healthcentric Advisors

Healthcare Facility HAI Reporting Requirements to CMS via NHSN--
Current and Proposed Requirements

DRAFT (5/9/2012)

CMS Reporting Program	HAI Event	Reporting Specifications	Reporting Start Date
Hospital Inpatient Quality Reporting (IQR) Program	CLABSI	Acute Care Hospitals: Adult, Pediatric, and Neonatal ICUs	January 2011
Hospital Inpatient Quality Reporting (IQR) Program	CAUTI	Acute Care Hospitals: Adult and Pediatric ICUs	January 2012
Hospital Inpatient Quality Reporting (IQR) Program	SSI	Acute Care Hospitals: Inpatient COLO and HYST Procedures	Janaury 2012
ESRD Quality Incentive Program (QIP)	I.V. antimicrobial start	Outpatient Dialysis	January 2012
ESRD Quality Incentive Program (QIP)	Positive blood culture	Outpatient Dialysis	January 2012
ESRD Quality Incentive Program (QIP)	Signs of vascular access infection	Outpatient Dialysis	January 2012
Long Term Care Hospital Quality Reporting (LTCHQR) Program	CLABSI	Long Term Care Hospitals *: Adult and Pediatric LTAC ICUs and Wards	October 2012
Long Term Care Hospital Quality Reporting (LTCHQR) Program	CAUTI	Long Term Care Hospitals *: Adult and Pediatric LTAC ICUs and Wards	October 2012
Inpatient Rehabilitation Facility Quality Reporting Program	CAUTI	Inpatient Rehabilitation Facilities: Adult and Pedatric IRF Wards	October 2012
Hospital Inpatient Quality Reporting (IQR) Program	MRSA Bacteremia LabID Event	Acute Care Hospitals: FacWideIN	January 2013
Hospital Inpatient Quality Reporting (IQR) Program	*C. difficile* LabID Event	Acute Care Hospitals: FacWideIN	January 2013
Hospital Inpatient Quality Reporting (IQR) Program	HCW Influenza Vaccination	Acute Care Hospitals	January 2013
PPS-Exempt Cancer Hospital Quality Reporting (PCHQR) Program	CLABSI *(proposed)*	PPS-Exempt Cancer Hospitals: all locations	TBD
PPS-Exempt Cancer Hospital Quality Reporting (PCHQR) Program	CAUTI *(proposed)*	PPS-Exempt Cancer Hospitals: all locations	TBD
Long Term Care Hospital Quality Reporting (LTCHQR) Program	HCW Influenza Vaccination *(proposed)*	Long Term Care Hospitals*	TBD
Ambulatory Surgery Centers Quality Reporting Program	HCW Influenza Vaccination	Ambulatory Surgery Centers	October 2014
Ambulatory Surgery Centers Quality Reporting Program	TBD *(future proposal)*	Hospital Outpatient Departments and Ambulatory Surgery Centers	TBD
* Long Term Care Hospitals are called **Long Term Acute Care Hospitals** in NHSN			

Rhode Island Healthcare Quality Reporting Program
Hospital-Acquired Infections Subcommittee

Leonard Mermel, DO, ScM
HAI Subcommittee Co-Chair and Academic Researcher (Rhode Island Hospital)

Utalpa Bandy, MD
State Epidemiologist (Rhode Island Department of Health)

Marlene Fishman, MPH, CIC
Infection Prevention Representative (Our Lady of Fatima Hospital)

Julie Jefferson, RN, MPH, CIC
Infection Prevention Representative and Infection Control Practitioners of Southeast New England Liaison (Rhode Island Hospital)

Maureen Marsella, RN, BS
Medicare QIO Liaison (Healthcentric Advisors)

Linda McDonald, RN
Organized Labor Representative (United Nurses and Allied Professionals)

Pat Mastors
Consumer Organization Representative (Pear Health, LLC)

Robin Neale, MT (ASCP), SM, CIC
Infection Prevention Representative (Women & Infants' Hospital)

Kathleen O'Connell, RN, BSN, CIC
Infection Prevention Representative (Kent Hospital)

Lee Ann Quinn, RN, BS, CIC
Infection Prevention Representative (South County Hospital)

Janet Robinson, MEd, RN, CIC
Infection Prevention Representative (East Side Clinical Laboratory Inc.)

Georgette Uttley, MEd, BSN, RN
Health Insurer and HMO Representative (Blue Cross & Blue Shield of Rhode Island)

Nancy Vallande, MSM, MT, CIC
Infection Prevention Representative (The Miriam Hospital)

Margaret Vigorito, MS, RN
ICU Collaborative Representative (Healthcentric Advisors)

Cindy Vanner
State Laboratory Representative (Rhode Island Department of Health)

Samara Viner-Brown, MS
HAI Subcommittee Co-Chair (Rhode Island Department of Health)

June 18, 2012

Department of Health and Human Services (HHS)
Office of Healthcare Quality
200 Independence Ave, SW., Room 711G
Washington, DC 20201,
Attention: Draft National HAI AP

To Whom It May Concern:

On behalf of the Rhode Island Department of Health's Hospital-Acquired Infections (HAI) Subcommittee, which we facilitate, we are writing to provide our committee's feedback on the draft *National Action Plan to Prevent Healthcare-Associated Infections: Roadmap to Elimination (HAI AP).*

The Rhode Island HAI Subcommittee is a multi-disciplinary stakeholder group charged with implementing our state's HAI Plan, under the 2009 National HAI AP and publicly reporting HAI, as part of a legislatively-mandated healthcare quality reporting program.

Our group membership, listed at left, is mandated by Rhode Island General Law Chapter 23-17.17-6 and includes the following categories listed in the Federal Register: the general public; healthcare, professional and educational organizations/ societies; health system providers; state and local public health agencies; public health organizations; and insurers and business groups. This composition ensures that we have the knowledge and expertise to inform implementation of our state's HAI Plan and also to react to the draft HAI AP.

First, we commend HHS for including numerous federal agencies in the development of the draft HAI AP, for explicitly stating that your goal is to coordinate and maximize the efficiency of prevention efforts across the federal government, and for specifying different agencies' roles in implementing the HAI AP. Ensuring alignment and preventing duplication is of the utmost importance, both (1) to ensure that all payors, policymakers and stakeholders are collecting and benchmarking performance using the same methods and (2) to streamline data requests for providers, encouraging efficiency. We encourage you to further alignment between federal agencies, such as the CDC and CMS, to ensure alignment between NSHN surveillance and public reporting.

Second, we support the expansion of the draft HAI AP from the acute-care setting to other healthcare settings, including nursing homes. HAIs require care coordination and precautions as patients transition from one provider to another, making them an important issue for providers across the care continuum. Expanding the HAI AP to include other healthcare settings recognizes the cross-setting nature of HAIs and elevates the importance of related prevention efforts within local communities.

Finally, we applaud the draft HAI AP's inclusion of healthcare worker influenza vaccination. Vaccinating healthcare workers is an important strategy to protect vulnerable patients by curbing the transmission of influenza. In Rhode Island, we publicly report healthcare worker influenza vaccination rates for our hospitals and are piloting a similar report for nursing homes. We also have draft rules and regulations that propose mandating influenza vaccination for workers. Including healthcare worker influenza vaccination in the HAI AP will further state and national efforts to increase influenza vaccination uptake.

We thank you for your consideration of these comments and encourage you to contact us with questions or for clarification.

Sincerely,

Samara Viner-Brown, MS
Rhode Island Department of Health
Samara.Viner-Brown@health.ri.gov

Rosa Baier, MPH
Healthcentric Advisors
rbaier@healthcentricadvisors.org

CC: HAI Subcommittee Members