HEALTH CARE ACQUIRED INFECTIONS ADVISORY COMMITTEE

October 12, 2011　　　　　　　　　　　　　**Portland State Office Building Room 1D**
1:00 pm to 3:00 pm　　　　　　　　　　　　 **800 NE Oregon St.**
　　　　　　　　　　　　　　　　　　　　　　　　 Portland, OR

MEMBERS PRESENT:　　**Bruce Bayley**
　　　　　　　　　　　　　Paul Cieslak, MD
　　　　　　　　　　　　　Lynda Enos (phone)
　　　　　　　　　　　　　Bethany Higgins (phone)
　　　　　　　　　　　　　Laurie Murray Snyder (representing Stacy Moritz)
　　　　　　　　　　　　　Nancy O'Connor
　　　　　　　　　　　　　Bethany Higgins
　　　　　　　　　　　　　Pat Preston (phone)
　　　　　　　　　　　　　Kecia Rardin
　　　　　　　　　　　　　Rodger Sleven (phone)
　　　　　　　　　　　　　Ann Thomas (representing Paul Cieslak)
　　　　　　　　　　　　　Marjorie Underwood
　　　　　　　　　　　　　Dee Dee Vallier
　　　　　　　　　　　　　Diane Waldo
　　　　　　　　　　　　　Angel Wynia (phone)

MEMBERS EXCUSED:　　**Eric Chang, MD**
　　　　　　　　　　　　　Kathy Loretz
　　　　　　　　　　　　　Susan Mullaney
　　　　　　　　　　　　　Eric Thorsen

STAFF PRESENT:　　**Jeanne Negley, Healthcare Acquired Infection Prevention Coordinator**
　　　　　　　　　　　Elyssa Tran, Health System Research & Data Manager

ISSUES HEARD:

- **Call to Order**
- **Approval of Minutes**
- **Federal and State Health Reform**
- **Update on Validation Studies**
- **Review of ASC Report and Next Steps**
- **Public Comment / Adjourn**

Item	Discussion	Follow-up
Call to Order	The meeting was called to order at approximately 1:00pm. There was a quorum.	
Approval of Minutes	There was a request to add "discussion" to page 3 under "Recommendations from the Subcommittee" and specifically refer to the ASC survey under "Next Steps." The minutes were unanimously approved with these changes.	• Minutes to be revised and posted to HAI AC web site.
Federal and State Health Reform Jeanne Negley	• The Federal and State Health Reform Update: o From a recent Office of Healthcare Quality meeting, the Essential Components for State HAI Efforts were identified as: ▪ Coordination, collaboration, integration and stakeholder engagement: including a Multidisciplinary Advisory group. ▪ Surveillance, analysis and reporting of data. ▪ Quality improvement / best practices: including training on QI and disseminating information on best practices. ▪ Culture change of safety and learning, with a commitment from leadership. ▪ Members commented that our state program included these elements and that long-term care is an area that needs to be addressed. ▪ On the Status Report grid for US HHS Action Plan Tier 1, Jeanne will add CDI as it will be reported on January 1, 2012, and	

Item	Discussion	Follow-up
	finds long-term care as the area needing to be addressed. ○ CMS Prospective Payment System will include CAUTI reporting starting in October 2012, C. diff starting in January 2013. It also includes proposed SSI outpatient surgery / ASCs starting January 2014.	

Update on Validation Studies
Zints Beldavs
	• The objective is to evaluate the quality of the reported data and to provide feedback and guidance to the facilities.
	• Methodology: evaluated all 44 hospitals required to report CLABSI data for 2009.
	• Results of medical record analysis and adjudication follow-up call:
	   ○ 16 additional CLABSIs identified.
	   ○ 6 false positive identified.
	   ○ 33 hospitals had no validation findings.
	• Surgical Site Infection Validation Research
	   ○ More complicated than CLABSI research
	   ○ There is no ideal method for sampling proxy indicator: home infusion, pharmacy, and NNIS risk index were considered.
	• Pilot Surgical Site Infection Validation
	   ○ The pilot was conducted in June 2011
	   ○ The procedures in 2009 where SSIs would be reportable were KPRO and CABG
	   ○ Post-discharge surveillance: only readmissions to the same hospital would fall under this.
	• The Next Steps in Validation
	   ○ Funding over the next five years has been requested.
	   ○ The goal is to validate baseline state-wide validations of every reportable HAI and create a sustainable plan on a yearly basis.	

Review of ASC Report and Next Steps	• There were 4 main category of findings: ○ Injection safety	

Item	Discussion	Follow-up
Jeanne Negley / Staff	○ Point-of-Care devices such as glucometers ○ Equipment reprocessing ○ Environmental cleaning - The Patient Safety Commission is supporting educational focus efforts around building a model infection prevention program specific to ASC, with extension funding to take it into a broader area of focus in 2012-2013.	
Update on Healthcare Worker Influenza Vaccination Programs Holly Groom	- Healthcare Worker definition in 2009-2010 includes those paid and unpaid workers who have the potential for exposure to patients and/or infectious materials. - For 2010-2011, we revised the definition of Healthcare Worker definition to follow CDC guidelines. It includes three categories of workers: employees, non-employees, credential, and non-employees, others. ○ With the new definition of Healthcare Workers, it was found that most facilities could only report vaccination rates for the employee category.. ○ In 2009-2010, the ability to report vaccination rates was 100% for hospitals and 81% for long-term care facilities. In 2010-2011, it went down to 98% for hospitals and up to 91% for long-term care facilities. ○ The Healthcare worker vaccination rates for 2009-10 and 2010-11 for hospitals was 62% and 69% and for long-term care (skilled nursing facilities) was 55% and 52%, respectively. - A legislative taskforce for healthcare worker influenza vaccination has been formed: ○ In August a decision was made regarding the importance of reaching the goal of 90% vaccination coverage and better representing long-term care facilities.	
Next Steps Chair	The statute will be reviewed to see whether it offers authority to the HAI Advisory Committee to make a recommendation on flu vaccination.	

Item	Discussion	Follow-up
	• It was requested that options for ASC surveillance be distributed to committee members before the next meeting.	
Public Comment / Adjourn	• Ron Jamtgaard requested that OHPR add multi-year data by hospital to the Healthcare Acquired Infections reports to show clearly where the improvements lie.	

Next meeting will be January 11, 1:00 pm to 3:00 pm, at the Portland State Office Building, Room 1D.

Submitted By: Reviewed By:
Shawna Kennedy   Jeanne Negley

EXHIBIT SUMMARY

A – Agenda

B – July 13, 2011 Minutes
C – Health Reform Update
D – CLABSI Validation Study Update
E – SSI Validation Plans
F – SSI Validation Protocol
G – Draft Ambulatory Surgical Center Report
H – Healthcare Worker Influenza Vaccination Presentation and Report

See Meeting Materials: http://www.oregon.gov/OHPPR/Healthcare_Acquired_infections.shtml