

MARYLAND HEALTH CARE COMMISSION

Summary of the Healthcare-Associated Infections (HAI) Advisory Committee Meeting

July 25, 2012

Committee Members Present

Sara E. Cosgrove, MD, MS (conference call)
Jacqueline Daley, HBSc, MLT, CIC, CSPDS
Elizabeth P. (Libby) Fuss, RN, MS, CIC
Anthony Harris, MD, MPH (conference call)
Emily Heil
Robert Imhoff
Brenda Roup, PhD, RN, CIC
Lucy Wilson, MD, ScM
Lynne V. Karanfil, RN, MA, CIC (conference call)
Michael Anne Preas, RN, BSN, CIC
Jack Schwartz JD
Wendy Gary (conference call)
Kerri Thom, MD
Renee Webster, RS
Andrea Hyatt, CASC (conference call)
Patricia Swartz, MPH, MS

Public Attendance

Malorie Givan
Katie Richards
Karol Wicker
Julie Bryan (conference call)

Committee Members Absent

Beverly Collins, MD, MBA, MS
Jean E. Lee, PharmD, BCPS
Maria E. Eckart, RN, BSN, CIC
Debra Illig, RN, MBA, CLNC
Peggy A. Pass, RN, BSN, MS, CIC

Commission Staff

Theresa Lee
Kendall Kodey
Evanson Mukira
Mariam Rahman
Mohamed Badawi

1. Welcome and Introductions

Theresa Lee, Chief, Hospital Quality Initiatives, called the meeting to order at 1:05 p.m. and each person in the room and on the phone gave their name and affiliation.

2. Review of Previous Meeting Summary

The meeting summary for June 27, 2012 was accepted by the committee with one correction; Andrea Hyatt was moved from being absent to present in the previous meeting. The staff will make the correction before posting the summary on the Commission's website.

3. Hip Knee, and CABG SSI Data Quality Review and Public Reporting- Next Steps

Committee members discussed and agreed on the display format for SSI data in the Hospital Guide. The Committee recommended that the number of infections, number of procedures, rate and the performance indicator be displayed in the consumer section of the Guide. The number of infections, number of procedures, rate, number predicted, SIR, 95% confidence intervals, and hospital performance indicator should be displayed on the practitioner/hospital leader sections. Ms. Lee noted that MHCC staff plans to send SSI Preview Reports to hospitals with the opportunity to make corrections through NHSN before public release.

4. Ventilator Associated Pneumonia (VAP) Bundle Compliance

Ms. Lee recommended that a VAP subcommittee be established to explore ways of meeting one of the original recommendations outlined in the 2008 recommendations of the HAI Technical Advisory Committee. Dr Sara Cosgrove volunteered to lead this sub-group with Jackie Daley and Michael Anne Preas acting as members. Libby Fuss suggested that in addition to looking at VAP Bundle Compliance, the sub-committee should also look at the new VAP definitions in NHSN. Dr. Cosgrove suggested and the HAI Committee agreed that the workgroup should look at the original recommendation for reporting VAP Bundle compliance in addition to Ventilator-Associated Conditions (VAC) and Infection-related Ventilator-Associated Complications (IVAC).

Mohamed Badawi presented a handout with data outlining hospitalizations associated with VAP events across hospitals in Maryland for CY 2011.

5. Infection Prevention Resource Requirements and Workforce Development Sub-Committee/Scope of Work

Ms. Lee acknowledged the need to reconstitute the IP workforce development committee. Committee members were in agreement. Lynne Karanfil, Brenda Roup, and Ms. Lee agree to meet to discuss this topic and report back to the Committee. They would discuss preliminary recommendation for Infection Prevention staff resource requirements and also explore the feasibility of creating a new IP support position category that could focus on infection data collection/entry and analysis.

6. 2012 Survey on Hospital Employee Influenza Vaccination Policies and Practices

Ms. Lee recommended and the Committee agreed that the MHCC HCW Influenza Vaccination Survey will be used for the 2012-2013 flu season and use of the NHSN Health Care Personnel module would be delayed until the 2013-2014 flu season. Ms Lee also noted that the next Infection Prevention and Control Survey would incorporate questions on hospital vaccination policies and activities.

7. Other Business

Robert Imhoff provided an update on the Maryland Hand Hygiene Collaborative. He noted that hospital performance on Hand Hygiene has been added to the MHA dashboard and 14 additional hospitals have been added to the project, bringing the total number of participating hospitals to 44. The current Hand Hygiene compliance rate is 86 % with a 90% goal. He also noted that the main challenge facing the Maryland Hand Hygiene Collaborative is sustainability.

Carol Wicker noted that MHA has sent VAP collaborative requirement packages to all Maryland Hospitals to solicit participation in the collaborative effort. She also updated the group on the STOP CAUTI Collaborative, stating that the CAUTI rate has not changed since last reported.

Ms. Lee notified the Committee of the upcoming MHCC HAI Update Webinar for Infection Preventionists, which is scheduled for September 19, 2012 from 10.00 a.m. to 12.00 p.m.

8. Adjournment

The meeting adjourned at approximately 2:45 p.m. The next meeting will be held on October 24, 2012.