

MARYLAND HEALTH CARE COMMISSION

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

November 28, 2012

Committee Members Present

Jacqueline Daley, HBS, MLT, CIC, CSPDS
Elizabeth P. (Libby) Fuss, RN, MS, CIC
Anthony Harris, MD, MPH (conference call)
Robert Imhoff (conference call)
Brenda Roup, PhD, RN, CIC
Lucy Wilson, MD, ScM
Lynne V. Karanfil, RN, MA, CIC
Jack Schwartz JD (conference call)
Andrea Hyatt, CASC
Debra Illig, RN, MBA, CLNC (conference call)
Emily Heil (conference call)
Michael Anne Preas, RN, BSN, CIC

Public Attendance

Malorie Givan
Katie Richards
Becky Perlmutter
Elisabeth Vaeth
Julie Bryan (conference call)
Carolyn Jackson
Nancy Hoyt

Committee Members Absent

Beverly Collins, MD, MBA, MS
Jean E. Lee, PharmD, BCPS
Wendy Gary
Sara E. Cosgrove, MD, MS
Maria E. Eckart, RN, BSN, CIC
Peggy A. Pass, RN, BSN, MS, CIC
Patricia Swartz, MPH, MS
Kerri Thom, MD
Renee Webster, RS

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 minutes of the previous meeting on October 24th 2012 were accepted by the committee with no corrections.

3. Brief update on the Workforce Development

Ms. Lee updated the committee on the progress made by the workforce development group. Brenda Roup's memo outlining literature review of articles associated with Infection Prevention (IP) staffing was presented to the committee. Committee members were in agreement that HAI data collection and analysis is the main issue affecting IP's in Maryland. The committee agreed that the workforce development sub-group should continue exploring ways to come up with some recommendations that will be adopted by the committee.

4. Discussion of New Measures Data Collection

Ms. Lee presented a staff analysis on the volume of colon and abdominal hysterectomy procedures performed in Maryland hospitals. She noted that the staff reported that for FY2012, 6,795 colon surgeries and about 10,000 abdominal hysterectomy procedures were performed. The information was provided in follow up to earlier committee discussion on the feasibility of adding the two procedures to the current SSI data reporting requirements.

Ms. Lee noted that staff analysis (using HSCRC inpatient discharge data) showed there were about 10,000 cases of *Clostridium difficile* (*C.diff*) reported in Maryland hospitals in FY 2012. The committee discussed the feasibility of adding *C.diff* to the NHSN reporting requirements. It was noted that some hospitals in Maryland use the PCR test which is more sensitive than other tests for *C.diff* tests. This may affect the *C.diff* rates of hospitals that use the PCR test as compared to other hospitals that use less sensitive tests. After further discussion, the committee agreed that as of July 1, 2013, all acute care hospitals in Maryland should be required to use NHSN to report facility-wide laboratory confirmed *C.diff*.

5. 2012 CLABSI Audit update

Ms. Lee updated the committee on the ongoing CLABSI audit. This is the third year that the audit has been conducted. In the first year, the CLABSI audit focused on all hospitals and the second year audit focused on every ICU. The current auditor employed focused risk-adjusted sampling criteria. She noted that 40 out of 45 hospitals would be audited. The Bayview Burn Unit and University of Maryland's trauma centers were excluded. A report of the audit will be presented to the committee early next year.

6. 2012 Survey of Hospital Infection Prevention and Control Programs

Ms. Lee informed the committee that a copy of the survey had been emailed to them for their review and comment. She noted that the first 20 questions were included in the 2011 survey. Additional questions were added regarding hospital policies and practices regarding employee vaccination. The survey was also sent to MHA who provided two recommendations. The first one was

to add a question on vaccination administration practices since there has been an increase in pertussis cases. The second recommendation from MHA was to add a question on the use of the sepsis bundle.

7. Other Business

Katie Richards from DHMH presented the results of the Antimicrobial Use Prevalence Survey. She noted that of the 1,376 patient records surveyed, 778 (57%) patients received or were scheduled to receive antimicrobials on the survey date or the calendar day prior to the survey date. She further noted that upon detailed medical record review of these 778 patients, it was determined that 741 patients (54% of the total patients surveyed) had actually received an antimicrobial on the survey date or the day prior to the survey date.

Bonnie Dipietro, the new Director of Operations for the Maryland Patient Safety Center updated the committee on hand hygiene compliance in Maryland hospitals. She noted that 39 out of 45 participating hospitals met the 80/30 rule for the month of October 2012. October hand hygiene compliance was 86%. The goal is 90-100% compliance.

8. Adjournment

The meeting adjourned at approximately 2:30 p.m. The next meeting will be held on December 19, 2012.