

**Hospital Acquired Infections Advisory Committee Meeting**  
**Friday, July 27, 2012 @ 9:30 AM**  
**Jesse Cooper Bldg. – 3<sup>rd</sup> floor conference room**  
**Minutes, Final**

<b>Present:</b>	Donna Anderson	Carol Briody	Lydia Edwards	Joann Hasse	Brenda Johnson
	Brenda Johnson	Jean Stipe	Mary Peterson	Barbara Robbins (Kelly Gardner)	Floretta Watson
	Kathleen Wroten	Gayle Stevens (Tracy Wilkens)			
<b>Excused:</b>	Dr. Joel Chua	Michele Dennis	Thomas Mulheim	Dr. Marci Drees	
<b>Absent:</b>	Sally Jennings	Dr. Joel Klein	Dr. Omo Olurin	Dr. Ramesh Vemulapalli	Yrene Waldron
	James Welch				
<b>Public Health Staff:</b>	Dr. Paul Silverman	Dr. Lucy Luta	Kim Olsen		
<b>Guest:</b>	Maria Caschetta, Advanta	Nancy Hoyt, Advanta			
<b>TOPIC</b>	<b>FINDINGS, CONCLUSIONS AND RECOMMENDATIONS</b>			<b>FOLLOW-UP</b>	<b>STATUS</b>
<b>1. CALL to ORDER</b>	The HAIAC meeting was called to order by Kathy Wroten at 9:29 a.m.				
<b>2. APPROVAL of MINUTES</b>	Minutes from April 27 meeting were approved as written.				Resolved

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<p><b>3. INTRODUCTIONS</b></p>	<p>Maria Caschetta and Nancy Hoyt of Advanta Government Services, LLC presented the results of the <i>Validation study of Central Line – Associated Bloodstream Infections reported to the National Healthcare Safety Network (NHSN) from acute care hospitals in Delaware.</i> Discussed the methodology, findings, and recommendations.</p>		<p>Resolved</p>
<p><b>4.0 SUBCOMMITTEE REPORTS</b></p> <p><b>4.1 Regulations:</b>  <b>4.1.1 HB 403- Modifications to the Legislation/ Regulations (update)</b></p>	<p>Dr. Silverman reported that (House Bill 403), supported by this committee, was signed into law by the Governor.</p> <p><i>Highlights</i></p> <ul style="list-style-type: none"> <li>• Name of act changed from Hospital to Healthcare Associated Infections Disclosure Act</li> <li>• Changed information that is required in quarterly and annual reports based on committee’s experience</li> <li>• Correctional facilities infection reporting will be based on those infections acquired as a result of care delivered in the correctional facilities</li> <li>• “Other health care facilities” referred to in the legislation (section 1007A), will report infections only when it is a requirement from CMS/CDC.</li> <li>• Membership of advisory committee expanded to include representatives from free standing surgical centers, dialysis centers, and psychiatric facilities.</li> <li>• Mission of the committee expanded not only to governing self-reporting, but improving collaboration between healthcare facilities, promoting prevention and control of healthcare associated infections, and encouraging creation of benchmarks to measure progress.</li> </ul>		<p>Pending</p>

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<p><b>4.2 Reports</b></p> <p><b>4.2.1 New Format for HAIAC Reports</b></p>	<p>Committee needs to consider inviting a representative from Long-term acute care hospitals (LTACH) to the Committee since they are now reporting CLABSI &amp; CAUTIs beginning Oct 2012.</p> <p>The Regulations Subcommittee will be responsible for discussions regarding vacancies on the Committee.</p> <p>Report Sub-Committee met June 13, 2012</p> <ul style="list-style-type: none"> <li>-Dr. Luta presented 2 draft data reports.</li> <li>-Discussed the graphs showing confidence intervals &amp; Standard Infection Ratio (SIR).</li> <li>-Committee recommended that the Reports Subcommittee review the quarterly reports including all recommendations.</li> <li>- Contact K. Wroten with any comments/suggestions on how to make the quarterly reports easier for public to understand the report. She will then take recommendation back to the Reports Subcommittee.</li> </ul>		<p>Pending</p>
<p><b>5.0 NEW BUSINESS</b></p> <p><b>5.1 State Healthcare Worker Influenza Report 2011-12</b></p>	<p>Dr. Luta presented the <i>Influenza Vaccination Rates among Healthcare Workers IN Delaware Hospitals 2008-2009 to 2011-2012 Influenza Seasons</i>.</p> <p>Dr. Luta noted that Influenza vaccination rates for healthcare workers in Delaware for 2011-2012 were similar to that of 2010-2011 seasons.</p> <p>The average compliance in Delaware was 80.4%, which is higher than national average of 60.7%. Information will be posted on the state website after the report has been approved.</p> <p>Discussed the “<i>I have been Immunized</i>” badge worn by healthcare workers at Wilmington Hospital. One member suggested that all</p>		<p>Resolved</p>

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<p><b>5.1.1 CMS requirements for 2013</b></p>	<p>healthcare facilities should have vaccinated employees wear a badge similar to those at Wilmington Hospital.</p> <p>Discussed future Influenza reporting related to the Centers for Medicare and Medicaid (CMS) mandate. CMS is in the process of defining a Healthcare worker for next year's reporting.</p> <p>National Healthcare Safety Network (NHSN) is also changing the Healthcare Worker Influenza Module to comply with CMS.</p> <p>Discuss the controversies around making Flu vaccinations mandatory.</p> <p>Decision to postpone the discussions of new CMS proposed reporting for 2014.</p>		
<p><b>5.2 CMS-Proposed reporting for 2014</b></p>	<p>Member requested a clarification for the state reporting measures.</p> <ul style="list-style-type: none"> <li>-Central Line Associated Blood Stream Infections (CLABSI) reporting includes all Intensive Care Units, including Neonatal Intensive Care Units (NICU).</li> <li>-Catheter Associated Urinary Tract Infections (CAUTI) reporting includes all adult units</li> <li>-Surgical Site Infections (SSI) includes all acute care hospitals reporting infection following colons &amp; hysterectomy surgeries</li> <li>-Jan 2013 – Acute care hospitals will report MRSA bacteremia and number of C. difficile isolates through Lab identification..</li> </ul> <p>There are CMS reporting requirements for long-term acute care facilities for CLABSI and CAUTI starting in Oct 2012.</p> <p>In 2013 there is proposed reporting of SSIs for out-patient surgery centers and will also include influenza healthcare worker vaccination rates.</p>		<p>Pending</p>

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<p><b>5.3 HHS-The Office of Healthcare Quality Solicits Public Comment on Draft-National Action Plan to Prevent Healthcare-Associated Infections: Roadmap to Elimination</b></p>	<p>The dialysis requirement for outpatient dialysis centers is that they enroll in NSHN and complete the training modules. They must also submit 3 months of event and denominator data before March 2013.</p> <p>Rehabilitation units are required to report CAUTI in Oct 2012.</p> <p>The office of Healthcare Quality is asking for comments regarding a national action plan to eliminate Healthcare Associated Infections. Committee suggests that this report be shared with the state long term care facilities.</p>		<p>Pending</p>
<p><b>6.0 OLD BUSINESS</b>  <b>6.1 HAI Quarterly and Annual Reports</b></p> <p><b>6.2 APIC Consultants – Presentation for DE Healthcare Association (5/15/2012)</b></p>	<p>Recommendation to remove quarterly report after annual report is published.</p> <p>APIC Consultants presented the results of the Infection Prevention Program assessment for the De hospitals to the DE Healthcare Association on May 15.</p>	<p>K. Wroten to</p>	<p>Pending</p>

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<p><b>6.3 CLABSI-Validation for DE (Presentation)</b></p>	<p>Committee discussed current and future state of public reporting. Committee proposed that a formal letter be sent to the hospital CEOs from the committee bringing attention to the results of the validation and Infection Prevention (IP) program assessment study. The letter should highlight the changing legislation the need to support the Infection Prevention staff with electronic systems or staff in order tot would improve efficiency and meet federal and other reporting requirements.</p> <p>Maria Caschetta and Nancy Hoyt of Advanta, Government Services, LLC. presented: <i>Validation Study of Data Reported to The National Healthcare Safety Network (NHSN)</i> to the committee. A copy of the presentation was distributed during the meeting.</p> <p>Advanta’s purpose was to review the completeness &amp; accuracy CLABSIs data collected by selected ICUs in 8 DE Hospitals via the NHSN program of the CDC. Focused on samples collected from January 1, 2011 – December 31, 2011.</p> <p>N.Hoyt reviewed the methodology used, the infrastructure, the sampling logic, and their data validation approach. Also reviewed and discussed a questionnaire that was administered to personnel responsible for collecting central line &amp; patient days in each facility.</p> <p>A summary of their findings covered the accuracy of reporting and the over and under reporting of CLABSI cases.</p> <p>Recommendations presented include:</p> <ul style="list-style-type: none"> <li>• Insure NHSN training for all IPs</li> <li>• Train hospital personnel in data collection</li> <li>• For the purpose of NHSN definition of infection ;clarify meaning of</li> </ul>	<p>draft letter for committee approval</p>	
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Respectfully Submitted,

Kim Olsen  
(Recorder)

Kathleen M. Wroten  
(Chairperson)