Healthcare-Associated Infections Advisory Committee Connecticut Hospital Association (CHA)

Wednesday, May 03, 2017, 9-11 am 110 Barnes Road, Wallingford, CT 06492



The meeting was called to order by Lauren A. Backman, RN, MHS, Epidemiologist III at 9:00 a.m. In Attendance

Voting Members present: Dale Cunningham, Louise-Marie Dembry, Jack Ross, Jacqueline Murillo, Jean Rexford, and Brenda Grant.

Members Excused: Carl Schiessel, Lynne Garner, Alison Hong, Wendy Furniss

Liaison Members present: Lauren Backman, Bianca Cartagena, Lisa Freeman, Lynn Sosa, Tracy Creatore, Kathryn Cusano, Paul Gentile, Laurie Brentlinger, Meghan Maloney, Noelisa Montero, Carol Dietz, Kathy Smith, Linda Sullivan, Anjali Poudyal, Jaclyn Camley, Jana Lohrova Present via Telephone: Brenda Nurse, Acacia F. Ransom, Florence Johnson

Welcome

L. Backman began the meeting with a warm welcome and introductions. Each person attending introduced himself/herself as well as the company he/she represents. Including members who were in attendance, via telephone.

Motion to approve the minutes from the February meeting was heard and accepted. For future meetings, minutes and attachments will be sent out in word format with ample time to review in detail.

Infection Control & Response (ICAR) Activities: L. Backman

L. Backman gave an overview on future infection surveillance and prevention in CT Long Term Care Facilities. There was a general discussion about the roles of public health surveillance in Long Term Care (LTC) Facilities, CT DPH Healthcare Associated Infections (HAI) Program, CDC "National Healthcare Safety Network (NHSN)" reporting of HAIs, and the Centers for Medicaid & Medicare (CMS) reporting of HAIs. She also talked about the infection control gaps found during the ICAR site visits for both LTC facilities and ACH.

Committee Member Input

- L. Dembry & T. Creatore both suggested that APIC New England would be a great resource for IC educational needs.
- L. Backman felt that it is difficult for the smaller LTC facilities to use resources like APIC for their IP&IC training, due to their financial restrictions and the constant changing of IP staff.

Action: L. Backman will be working on a plan to incorporate an infection prevention skills fair and/or training seminar starting September/October of 2017. Will also being to meet with ACH staff to help mitigate gaps found during ACH ICAR site visits.





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An Update from the Antimicrobial Resistance/Antimicrobial Stewardship Multidisciplinary Advisory Group: M. Maloney/J. Rexford

M. Maloney presented the committee with updates related to CRE isolates submission and testing at the state lab. An interim guidance for a public health response to contain or target MDROs. Goals of prompt response & containment and a description of the 3 Tier System where reviewed. The three different categories of organism (Tiers 1-3) and the recommended approach to each were discussed.

Action: The AR/AMS committee will be meeting sometime in August.

The Deadly epidemic America is ignoring "The Uncounted" A Reuters Investigation M. Maloney led a discussion on Reuter's multiple news article on their investigation into drugresistant infections. In September, a Reuter's investigation revealed that tens of thousands of superbug deaths nationwide go uncounted every year. The infections are often omitted from death certificates, and even when they are recorded, they aren't counted because of the lack of a unified national surveillance system. This article highlighted some of the problems that have come from the lack of information, the lack of reporting, especially deaths. Because there is no federal surveillance system, monitoring of superbug infections and deaths falls to the states.

To read the full article and any further coverage please see the following link: http://www.reuters.com/investigates/section/usa-uncounted/

Action: Copies of the article will be sent out electronically after adjournment.

Committee Member Input

 Some committee members were not aware that in CT it is not required for doctors to specify on death certificates when a superbug was the leading or a contributing cause of death.

Update on CMS – Qualidigm: Nursing Home *Clostridium difficile* (CDI) Reporting and Reduction Collaborative

F. Johnson called in and gave a brief update on NHSN and the Medicare Quality Reporting Programs. The following program was discussed: reporting and reduction for C. Diff. in CT nursing facilities. So far, 30 nursing homes have been enrolled in NHSN for the reporting of C-diff cases. Some of the discussion was difficult to hear, due to phone static.

Action: DPH will ask if Qualidigm can provide the committee with updates at the August HAI meeting

Adjournment: Meeting was adjourned at 11:00 am



