Healthcare-Associated Infections Advisory Committee Meeting
May 12, 2016, Oakland, CA 10:00am-3:00pm

Summary Meeting Minutes

Committee Members –
Present: Jeffrey Silvers (Chair), Alicia Cole, Brian Lee, Carole Moss, Brian Lee, Catherine Liu, Dawn Terashita, Enid Eck, John Culver, Karen Anderson, Marisa Holubar, Matt Zahn, Michelle Ramos, Nancy Waters, Patricia Kassab, Roy Boukidjian, Salah Fouad, Zachary Rubin

Participated by phone, at a posted public meeting site, able to vote: No site designated

Participated by phone, not at a public meeting location: Deborah Wiechman

Members Absent: Michael Langberg, Paige Batson, Tim Clark

Liaison Representatives
Present: HSAG/Howard Pitluk, CNA/Kathy Dennis, IDAC/Phillip Robinson, CACC/Schyerle Beal

Participated by phone, not at a public meeting location: CMA/Michael Butera

Liaison Members Absent: CHA/Debby Rogers

Department Staff
Present: Lynn Janssen, Erin Epson, Jorge Palacios, Neely Kazerouni, Vicki Keller, Jon Rosenberg, Lanette Corona, Leah Schultze

Agenda Item/Discussion Points
Call to Order and Introductions Chair, J. Silvers, called the meeting to order @ 10:14 am
Review of Rules The Chair briefly reviewed and referred committee members to Bagley-Keene open meeting act rules, Robert's Rules of Order, and the CDPH HAI Advisory Committee by-laws. Members must refrain from having serial meetings; a serial meeting is when you have a discussion on the phone, face-to-face and/or via e-mail with more than two people, outside of the Committee meeting. All meetings must be public and locations have to be published on the CDPH website. Voting members were reminded that they represent their individual expertise; Liaison

Members represent the organization that appointed them. Jorge Palacios reminded all Committee members that the travel reimbursement forms (Payee Data Record and Travel Expense Claim) can be found online.

Approval of the Minutes

February 11, 2016 Meeting

It was noted that the summary of the public story was felt to be too abbreviated.

Discussion Points:

- Question regarding CDPH update that was to be provided by Jean Iacino. She will join us at our next meeting in August in Sacramento.
- Meeting summary does not reflect that the 19,200 people were infected by hospitals in 2014.
- That number (19,200) is reflected in the summary hyperlink presented by L. Janssen at the February 11 meeting.
- This is now the 6th year of HAI data reporting by hospitals, and it appears the numbers of HAI are going up. The Department has not fined or penalized hospitals.
- Minutes are supposed to reflect actions and not all the discussion details.

Motion: Eck

Move to approve the meeting summary as presented.

Second: J. Culver

In favor: A. Cole, B. Lee, C. Liu, D. Terashita, E. Eck, J. Culver, K. Anderson, M. Holubar, M. Zahn, M. Ramos, N. Waters, P. Kassab, R. Boukidjian, S. Fouad, Z. Rubin

Opposed: C. Moss

Abstained: None

Motion passed

Public Story

New Committee member, Michele Ramos, described becoming an advocate following the death of her 36 year old fiancé, Lloyd Monserratt, following an elective surgery. Ms. Ramos stated that doctors had reported that her fiancé was progressing normally, but three days later he died with no cause given for his death. She stated a pathologist was hired and a private autopsy was done. Ms. Ramos stated the autopsy results showed her fiancé died from surgical mistakes, infection, and sepsis. She stated that the coroner confirmed the results and changed the death certificate, and that medical experts on both sides agreed that had the physician given Lloyd the medical attention he needed that the outcome would have been different. Ms. Ramos stated that both medical experts agreed that Lloyd would have lived. Ms. Ramos stated that a consumer complaint was filed and both a civil search and a criminal search were conducted. She stated that the criminal search revealed that Lloyd's doctor had a criminal record (including felony possession of crack cocaine) spanning 10 years, all while he held a license to practice medicine in California. Ms. Ramos became a health advocate and found that many other people had experienced medical harm. Had Lloyd survived, Ms. Ramos believes he would have taken on this issue and would have made changes to protect California consumers.

Discussion Points:

- Chair thanked Ms. Ramos for sharing her story with the Committee.
- Statement that all Committee members, Department staff, and members of the public, no matter their roles, should share their stories.

Subcommittee Presentation Reports

Antimicrobial Stewardship/Antimicrobial Resistance Subcommittee – B. Lee (see slides)
Three motions passed last meeting recommending antimicrobial resistance and stewardship curricula to professional schools and post-graduate training programs. Subcommittee is compiling and list of schools/training programs and survey questions to recommend to the Department. Recognition that CDPH does not have the regulatory oversight of professional education and that by making these recommendation, the Committee is making a statement regarding the importance of and to bring awareness to antimicrobial stewardship education. Subcommittee has also been discussing antimicrobial stewardship in long term care facilities. No new motions to present today.

Discussion Points:

- Statement that we are at an "urgent state" and can't wait to do things voluntarily.
- Tracking who is over-prescribing antibiotics would allow targeting prescribers doing the most inappropriate prescribing.
- Suggestion that the licensing boards can take action on doctors who continue to over-prescribe antibiotics.
- This subcommittee is comprised of leaders who can put new ideas out there.

Environmental Cleaning Subcommittee - C. Moss (see slides)
This newly formed subcommittee first met in March 2016. Identified a list of subject matter experts to participate including

- Karen Hoffman, RN,MS, CIC, FSHEA, Clinical Instructor, University of North Carolina, School of Medicine; Specialist in infection control and prevention for over 30 years and representing the CMS Survey and Certification Group
- Christel Henderson, UCSF Mission Bay Medical Center, Hospitality Service Department
- Coleen Athey, CLLM, Director, Environmental Services & Line
- Phillip Carling, Clinical Professor of Medicine, Boston University School of Medicine, Boston
- Russell Olmsted, Infection Preventionist at Trinity HealthCare, Michigan

The mission of the Environmental Cleaning in Healthcare Subcommittee is to protect the public from HAI by establishing best practices in the area of environmental cleaning in California healthcare facilities.

Discussion Points:

- Suggestion that it could be useful to get someone from the manufacturing companies

on the Subcommittee to ensure that the process for cleaning equipment/tools disinfectants used in hospitals is consistent with manufacturing recommendations.

- Simplification of guidance to clean the equipment would be helpful to hospital staff.
- Comment that it may be unwise for a subcommittee to make a recommendation to CDPH without a state advisor who is an L&C surveyor.
- Comment that clarified CDPH staff can provide information or answer committee questions as needed. CDPH Program or L&C do not serve as ongoing members of-subcommittees. CDPH staff can provide information or answer committee questions as needed.
- There was general disagreement among committee members with the idea of having a retired CDPH L&C surveyor provide guidance to the subcommittee.
- Question if CDPH can provide presentations at subcommittee meetings.
- Ms. Janssen responded that CDPH staff can be (and have been) available to answer questions or provide information at subcommittee meetings. Suggested that subcommittees send questions or requests to HAI Program in advance so that the appropriate CDPH subject matter expert is made available.

Motion: A. Cole
Move that the Environmental Healthcare Cleaning Subcommittee has a representative surveyor from the CDPH Licensing and Certification join the subcommittee as a subject matter expert to participate in the meetings that we can use as resource.
Second: C. Moss

In favor: A. Cole, B. Lee, C. Moss, K. Anderson, M. Ramos, Z. Rubin
Opposed: C. Liu, D. Terashita, E. Eck, M. Zahn, N. Waters, P. Kassab, R. Boukidjian,
Abstained: J. Culver, M. Holubar, S. Fouad

Motion did not pass

Motion: C. Moss
Move that CDPH provide an experienced staff member, as a resource to participate and advise this California Environmental Cleaning Subcommittee, with the knowledge and the experience critical to shape a recommendation that will help reduce the number of patients that are harmed by preventable hospital-acquired and healthcare-related infections
Second: J. Culver

In favor: A. Cole, C. Moss, J. Culver, M. Ramos
Opposed: B. Lee, C. Liu, D. Terashita, E. Eck, M. Zahn, N. Waters, P. Kassab, R. Boukidjian, S. Fouad, Z. Rubin
Abstained: K. Anderson, M. Holubar

Motion did not pass

Public Reporting and Education Subcommittee – E. Eck (see slides)
Results of consumer survey presented. Suggested that the recommendations to the

Department are based on the survey results and should be incorporated into HAI Program activities. Subcommittee member submitted a memo (click link) for Committee consideration describing issues with the HAI interactive map and website.

Discussion Points:

- Ms. Janssen reported that approximately 90 HAI-related social media messages have been developed and approved by CDPH, and approximately 25 of those messages have been posted to date.
- Suggestion that in the future, documents should come to the Committee from established subcommittees and not individual members

Motion: E. Eck
The Public Reporting and Education Subcommittee (PRES) moves that the California Department of Public Health (CDPH) optimize the expertise of the PRES by actively seeking input and recommendations to enhance the education and HAI-related information provided to consumers, particularly in languages that reflect the populations across the state.
Second: R. Boukidjian

In favor: A. Cole, B. Lee, C. Moss, C. Liu, D. Terashita, E. Eck, J. Culver, K. Anderson, M. Holubar, M. Zahn, M. Ramos, N. Waters, P. Kassab, R. Boukidjian, S. Fouad, Z. Rubin

Opposed: None

Abstained: None

Motion passes

Motion: E. Eck
The PRES move that CDPH develop a public awareness campaign to inform the public about the current CDPH Social Media presence (Facebook and Twitter).
Second: K. Anderson

In favor: A. Cole, B. Lee, C. Moss, C. Liu, D. Terashita, E. Eck, J. Culver, K. Anderson, M. Holubar, M. Zahn, M. Ramos, N. Waters, P. Kassab, R. Boukidjian, S. Fouad, Z. Rubin

Opposed: None

Abstained: None

Motion passes

Motion: E. Eck
The PRES moves that CDPH incorporates post and tweets on Social Media platforms from educational information that already exists on the HAI Program website to raise public awareness of the currently available resources regarding healthcare-associated infections (HAI) and HAI prevention in California.
Second: A. Cole

In favor: A. Cole, B. Lee, C. Moss, C. Liu, D. Terashita, E. Eck, J. Culver, K. Anderson, M. Holubar, M. Zahn, M. Ramos, N. Waters, P. Kassab, R. Boukidjian, S. Fouad, Z. Rubin

Opposed: None

Abstained: None

Motion passes

Motion: E. Eck

Move that the department use the information contained in the [website recommendations] handout and provide a report at the next meeting identifying those items [1-8] that can be corrected and those that can't be corrected, provide a timeline for correcting those items that can be corrected, and include an update on the comparative data that was requested previously

Second: K. Anderson

In favor: A. Cole, B. Lee, C. Moss, C. Liu, D. Terashita, E. Eck, J. Culver, K. Anderson, M. Holubar, M. Zahn, M. Ramos, N. Waters, P. Kassab, R. Boukidjian, S. Fouad, Z. Rubin

Opposed: None

Abstained: None

Motion passes

Safe Injection Practices Subcommittee: D. Terashita (see slides)

Medical assistants and ambulatory/ outpatient infusion clinics were determined by the subcommittee as the highest priorities for statewide injection safety efforts. Subcommittee piloted a survey of California providers regarding single-dose and multi-dose injectable medication use. Focusing on injectable medication use issues. Many single dose vials are not in use sizes appropriate for facility optimal use.

Motion: D. Terashita

Move that the CDPH HAI Advisory Committee approve the recommendations of the Safe Injection Practices Subcommittee, "Recommendations for the Implementation of a Statewide Injection Safety Campaign"

Second: Z. Rubin

In favor: A. Cole, Brian Lee, Carole Moss, Brian Lee, Catherine Liu, Dawn Terashita, Enid Eck, John Culver, Karen Anderson, Marisa Holubar, Matt Zahn, Michelle Ramos, Nancy Waters, Patricia Kassab, Roy Boukidjian, Salah Fouad, Samantha Tweeten, Zachary Rubin

Opposed: None

Abstained: None

Motion passed

- Ms. Janssen thanked the Committee for these recommendations and stated that the Department will review and requests for clarification (if needed) will be brought back to the Committee.

HAI Program Updates – L Janssen, Chief, HAI Program (see slides)

Provided a summary of CDPH follow-up to recent Committee recommendations:

- Recommend that CDPH survey all health professional schools and residency training programs in California (medical, dental, pharmacy, nursing, physician assistant, veterinary, podiatry, and optometry) to assess their current curriculum on antimicrobial stewardship and antimicrobial resistance *(Feb 2016)*
    - The CDPH HAI Program provides education and consultation to healthcare providers in California to implement strategies to prevent the emergence and transmission of antimicrobial resistant infections, including assistance to adopt antimicrobial stewardship practices. We concur that medical professionals who prescribe antimicrobials to patients should receive education in antimicrobial resistance and stewardship as part of their professional training. CDPH will perform a survey, prioritizing the five professional groups most responsible for antimicrobial prescribing: physicians, dentists, pharmacists, nurse practitioners, and physician assistants. We will evaluate the feasibility of surveying podiatrists and optometrists at a later date based on available resources. It is not within the scope of the CDPH HAI Program mandate to provide guidance to veterinarians; we will not survey them.
- Recommend that CDPH send an advisory to all health professional schools and residency training programs in California to develop and implement an integrated antimicrobial stewardship/resistance curriculum and to submit a progress report within 2 years and every 5 years thereafter describing their progress in antimicrobial stewardship/resistance training and related initiatives at each school *(Feb 2016)*
    - The CDPH HAI Program will send a letter to each of the health professional schools and training programs to accompany the survey (Recommendation 1), recommending and describing the importance of the inclusion of curriculum in antimicrobial resistance / stewardship. We do not have the authority to recommend that professional schools and training programs submit progress reports to the Department. We will consider, based on available resources, performing follow-up surveys in 2-5 years to assess professional school adoption of antimicrobial resistance/stewardship curriculum.
- Recommend that CDPH request that the Medical, Dental, Pharmacy, Physician Assistant, Registered Nursing, Podiatry, and Optometry Boards of California require that all licensed practitioners (including physicians, dentists, pharmacists, nurse practitioners, physician assistants, podiatrists, and optometrists) complete at least 10% of all mandatory continuing education hours in a course in the field of antimicrobial prescribing, stewardship, and resistance *(Feb 2016)*
    - CDPH HAI Program staff will schedule meetings with the Medical, Dental, Pharmacy, Physician Assistant, and Registered Nursing Boards to discuss HAIs,

antimicrobial resistance, and antibiotic stewardship, and recommend they consider including as part of continuing education.

- Recommend that CDPH look into creating a public health registry to enable identification of CRE patients that healthcare facilities can use. Due to difficulties in gathering accurate data, the Committee does not recommend making CRE reportable at this time *(Nov 2015)*
    - We are observing the implementation and learning from the experience of the Illinois registry.
- Recommend that someone from CDPH Licensing and Certification Program attend all HAI Advisory Committee meetings *(Nov 2015)*
    - CDPH L&C staff members participate in Committee and subcommittee meetings when invited to provide information or to answer specific questions.
- Recommend that CDPH consider all available enforcement options for hospitals with high HAI incidence *(Feb 2016)*
    - Jean Iacino, Deputy Director, Center for Health Care Quality, CDPH, will provide an overview of options at the August 11, 2016, meeting.

Presented data considerations for the 2015 HAI public report. Presented preliminary findings of hospital-user focus groups aimed to provide CDPH an understanding of how/if the current version of the annual HAI report is being used by hospital staff for infection prevention efforts and to elicit suggestions for improvement. Provided an update on the HAI Program's annual CDC funding proposal. Provided updates on the regional CDI/CRE prevention collaboratives in Orange County, the Sacramento metropolitan area, and the San Francisco Bay area. Described the 6-part "Antimicrobial Stewardship in Skilled Nursing Facilities" webinar series.

Discussion Points:

- Question about calculating SIR if the predicted number of infections is greater than 0.2. Unclear when CDC will begin calculating SIR using this method.
- Questioned if HAIs reported by hospitals are being shared with the L&C Program.
- The law requires CDPH to publish HAI data annually. HAI data are available to all including L&C.
- HAI information is readily available on the CDPH website.
- Suggestion that the HAI Program should collaborate more with L&C.
- Surveyors' survey based on two sets of regulations, state and federal. L&C surveys for compliance with laws and regulations.
- Suggestion that L&C surveyors should collaborate with the hospitals' infection divisions so they wouldn't be looking at numbers they can't interpret.
- Suggestion that the HAI Program should collaborate more with L&C.

Motion: C. Moss
Move that each year CDPH identifies the hospitals with the highest number of patients who contracted infections at their hospitals, and that the lowest 25 percent performing hospitals will be inspected by California State Licensing and Certification without notification. The inspection will begin no later than one month after notification of hospital-acquired infection

report. The results of the inspection outcome will be made public.
Second A. Cole

In favor: A. Cole, Carole Moss

Opposed: Brian Lee, Brian Lee, Catherine Liu, Dawn Terashita, Enid Eck, John Culver, Karen Anderson, Marisa Holubar, Matt Zahn, Michelle Ramos, Nancy Waters, Patricia Kassab, Roy Boukidjian, Salah Fouad, Samantha Tweeten, Zachary Rubin

Abstained: None

Motion did not pass

Motion: C. Moss

The CDPH Licensing and Certification Program will have access to all hospital-acquired infection data, now collected as a part of SB1058 Alquist 2008 Nile's Law AKA The Healthcare Facility Infection Prevention Act and SB158 Florez 2008, as the data are received from the state of California quarterly reports and will move forward with correcting the problems that are contributing to hospital-acquired infections harming and ending the lives of many."

Second: A. Cole

In favor: A. Cole, C. Moss

Opposed: B. Lee, C. Liu, D. Terashita, E. Eck, J. Culver, K. Anderson, M. Holubar, M. Zahn, M. Ramos, N. Waters, P. Kassab, R. Boukidjian, S. Fouad, Z. Rubin

Abstained: None

Motion did not pass

Action Items

- Request to add the following to next meeting's agenda: What does CDPH and the advisory committee plan to do for hospitals that are in the lowest 25% of infection control practices?

Announcements

- Committee Chair stated the need for a meeting facilitation plan to provide better time management and ensure time for discussion. Details will be forthcoming.

Meeting dates for 2016 are

August 11 – Sacramento

November 10 – Oakland

The meeting was adjourned at 3:00 pm.

Acronyms added

AAMI	Association for Advancement of Medical Instrumentation
ABS	Antibiotic Stewardship
AFL	All Facilities Letter
APIC	Association for Professionals in Infection Control and Epidemiology
CACC	California APIC Coordinating Council
CACDC	California Association of Communicable Disease Controllers
CAUTI	Catheter-associated Urinary Tract Infection
CDC	Centers for Disease Control and Prevention
CDI	*Clostridium difficile* infection
CDPH	California Department of Public Health
CHA	California Hospital Association
CMA	California Medical Association
CNA	California Nurses Association
CHCQ	Center for Health Care Quality
CHG	Chlorhexidine gluconate – a topical antimicrobial used for hand hygiene, patient bathing
CLABSI	Central Line-Associated Blood Stream Infection
CLIP	Central Line Insertion Practice
CMS	Centers for Medicare and Medicaid Services
CRE	Carbapenem-resistant Enterobacteriaceae
CSTE	Council for State and Territorial Epidemiologists
CUSP	Comprehensive Unit-Based Surveillance Program
HAI AC	Healthcare-Associated Infections Advisory Committee
HCP	Health Care Personnel
HICPAC	Healthcare Infection Control Practices Advisory Committee (CDC)
HSAG	Health Services Advisory Group - California's CMS-funded Quality Improvement Network
ICU	Intensive Care Unit
IDSA	Infectious Diseases Society of America
IP	Infection Preventionist
L&C	Licensing and Certification
MRSA	Methicillin-resistant *Staphylococcus aureus*
NHSN	National Healthcare Safety Network
NICU	Neonatal Intensive Care Unit
PD	Patient Days
PDSA	Plan Do Study Act – a quality improvement approach
QA/QC	Quality Assurance/Quality Control
QIO	Quality Improvement Organization
SIR	Standardized Infection Ratio
SSI	Surgical Site Infection