

Legislated Duties of HAI-AC

Legislation – SB 739	Action/Follow-up	Notes/Priority
<p>1288.5. By July 1, 2007, the department shall appoint a Healthcare Associated Infection (HAI) Advisory Committee that shall make recommendations related to methods of reporting cases of hospital acquired infections occurring in general acute care hospitals, and shall make recommendations on the use of national guidelines and the public reporting of process measures for preventing the spread of HAI that are reported to the department pursuant to subdivision (b) of Section 1288.8.</p> <p>The advisory committee shall include persons with expertise in the surveillance, prevention, and control of hospital-acquired infections, including department staff, local health department officials, health care infection control professionals, hospital administration professionals, health care providers, health care consumers, physicians with expertise in infectious disease and hospital epidemiology, and integrated health care systems experts or representatives.</p>	<ul style="list-style-type: none"> HAI-AC appointed by July 1, 2007; first meeting August 27, 2007. 	
<p>(2) (CDPH shall) Investigate the development of electronic reporting databases and report its findings to the HAI advisory committee established pursuant to Section 1288.5.</p>	<p>NHSN selected as reporting database by HAI-AC.</p> <p>68% CA hospitals are currently registered into NHSN.</p>	<p>NHSN is not working out as anticipated because of the volume of information requested per case.</p>
<p>In consultation with the advisory committee established pursuant to Section 1288.5, the department shall make this information public no later than six months after receiving the data.</p> <p>(c) The Healthcare Associated Infection Advisory Committee shall make recommendations for phasing in the implementation and public reporting of additional process measures and outcome measures by January 1, 2008, and, in doing so, shall consider the measures recommended by the CDC.</p> <p>SB 158 (3) By January 1, 2011, in consultation with the HAI-AC,</p>		<ul style="list-style-type: none"> Need for Committee to review data in a timely manner

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<p>develop a scientifically valid statewide electronic reporting system or utilize an existing scientifically valid database system capable of receiving electronically transmitted reports from hospitals related to HAI.</p>		
Legislation – SB 158	Action/Follow-up	Notes/Priority
<p>1288.5 (c) The advisory committee shall meet at least every quarter and shall serve without compensation, but shall be reimbursed for travel-related expenses that include transportation, lodging, and meals at the state per diem reimbursement rate.</p>	<p>Committee has met 9 times. Budget for reimbursement is being submitted by L&C. Specifics will be shared as soon as available.</p>	
<p>(d) In addition to the responsibilities enumerated in subdivision (a), the advisory committee shall do all of the following:</p> <p style="padding-left: 40px;">(1) Review and evaluate federal and state legislation, regulations, and accreditation standards and communicate to the department how hospital infection prevention and control programs will be impacted.</p>		
<p style="padding-left: 40px;">(2) In accordance with subdivision (a) of Section 1288.6, recommend a method by which the number of infection prevention professionals would be assessed in each hospital.</p>		
<p style="padding-left: 40px;">(3) Recommend an educational curriculum by which health facility evaluator nurses and department consultants would be trained to survey for hospital infection surveillance, prevention, and control programs.</p>		

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<p>(4) Recommend a method by which hospitals are audited to determine the validity and reliability of data submitted to the NHSN and the department.</p>		
<p>(5) Recommend a standardized method by which an HAI occurring after hospital discharge would be identified.</p>		
<p>(6) Recommend a method by which risk-adjusted HAI data would be reported to the public, the Legislature, and the Governor.</p>		
<p>(7) Recommend a standardized method by which department health facility evaluator nurses and consultants would evaluate health care workers for compliance with infection prevention procedures including, but not limited to, hand hygiene and environmental sanitation procedures.</p>		
<p>(8) Recommend a method by which all hospital infection prevention professionals would be trained to use the NHSN HAI surveillance reporting system.</p>	<p>This is self-evident; the process is not optional.</p>	

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Questions:

1. How should subcommittee work be prioritized?

Recommendations for Other Quarterly Reporting Requirements effective July 1, 2009	Action/Follow-up	Notes/Priority
Patient Safety Issues	Will check to see if HAI-AC will have a role in making recommendations.	
<p>MRSA Active surveillance testing Specifically,</p> <p>The patient is scheduled for inpatient surgery and has a documented medical condition making the patient susceptible to infection, based either upon federal Centers for Disease Control and Prevention findings or the recommendations of the committee or its successor.</p>		How is this to be defined?
Cases of MRSA BSIs, C. diff, VRE BSIs		

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CLA-BSIs		
Surgical Site infections All health-care-associated surgical site infections of deep or organ space surgical sites, health-care-associated infections of orthopedic surgical sites, cardiac surgical sites, and gastrointestinal surgical sites designated as clean and clean-contaminated, and the number of surgeries involving deep or organ space, and orthopedic, cardiac, and gastrointestinal surgeries designated clean and clean-contaminated.		