

Healthcare-Associated Infections Advisory Committee
Meeting Summary
April 14, 2022
Video Conference

Voting Members Present

Marian Hollingsworth, Amber Theel, Anjali Bisht, David Ha, Deborah Ellis, Jorge Salinas, Marian Hollingsworth, Marisa Holubar (Chair) Michele Lampshire, Patricia Sung

Voting Members Absent

Geanny Ryan, Zachary Rubin

Liaison Members Present

Jeffery Silvers-IDAC, Michael Butera-CMA

Liaison Members Absent

Howard Pitluck-QIN/HSAG, Louise McNitt-CPICD, Kathy Dennis-CAN, Trina Gonzalez-CHA

CDPH Guest

Chelsea Driscoll

Department Staff Present

Erin Epon-Chief HAI Program, Chelsea Driscoll-CHCQ/CEA, Lanette Corona, Valerie Sandles, Hosniyeh Bagheri, Priscilla Bennett, Erin Garcia, Geraldo Garcia, Vicki Keller, Idamae Kennedy, Satya Keshav, Janice Kim, Jane Kriengkauykiat, Tracy Lanier, Monise Magro, Tisha Mitsunaga, Andrea Parriott, Peea Purkayastha, Neha Sardana, Jane Siegel, Patrick Stendel, Genie Tang, Myesha Febres, Neely Kazerouni, Ayda Alemayehu, Mitra Baradar, Rachel Lizette, Deweese Quigley, Brie Martin, Teresa Nelson, Shantala Ahanya, Sangeetha Moorthy, Elsa Villarino

Call to order, introductions, and review meeting requirements

Chair, Marisa Holubar, called the meeting to order at 10:05 AM and reviewed the meeting procedures for the new members.

Item 1. Approve the December 9, 2021, meeting summary

Meeting summary approved.

Item 2. CDPH HAI Program updates – Erin Epon

The California Department of Public Health, Healthcare-Associated Infections Program is engaging hospitals for CLABSI reduction. The HAI Program has analyzed CLABSI standard infection ratios (SIR) reported during the first six months of 2021 and selected 36 hospitals with significantly high SIR (higher than the 2015 national baseline) or high cumulative attributable difference (CAD) which represents the overall number of infections a facility must prevent to achieve an HAI reduction goal. Ten (10) hospitals were identified with substantial CLABSI SIR reductions during the first six months of 2021.

CLABSI Reduction Project Activities & Timeline

During the week of March 21, 2022, a letter inviting the 36 hospitals identified with high rates of CLABSI to participate in a reduction project. 18 of the 36 hospitals have confirmed thus far. There is an ongoing outreach to introduce our program to newer IPs. A pre-visit questionnaire was distributed the first week in April. Onsite assessments conducted by a HAI IP at each of the hospitals are scheduled for May. The visits will include adherence monitoring on central line insertion and maintenance practices. Consultation will include developing facility-specific one (1) year CLABSI reduction plans. A target SIR goal of 0.7 is set for the end of the 2nd quarter, 2023. There will be regular scheduled follow up check-ins, individual and group coaching sessions, educational webinars to coordinate with the Health Services Advisory Group through June 2023. An outcome analyses will begin in September of 2023.

Discussion: Why was there a gap between 2019 and 2020 reporting? This was to reflect the suspension of the CMS reporting during the pandemic. Many hospitals did continue to report during the first six months of 2020, however because the accuracy could not be validated, it was decided not to report. Who set the 2015 National Baseline 0.5 goal, CDPH HAI? No, the baseline was set by the Department of Health and Human Services. The HAI team is conducting a deeper look into CLABSI and the added effects of COVID. The committee looks forward to hearing from the ten (10) hospitals that had reduction and to hear what they did.

Item 3. Overview of Title 22 Regulation Revision Process – Chelsea Driscoll

CDPH coordinates development with CDPH/CHCQ subject matter experts and stakeholders. They keep in mind who is the audience, i.e., facilities, CDPH enforcement, the public. The process can take up to three years.

Internal Regulations Process:

- 1) Identify the need,
- 2) Preliminary Steps/Initial Report,
- 3) Rulemaking documents development,
- 4) Stakeholders are engaged for comments,
- 5) Internal Approval,
- 6) Agency Approval,
- 7) Department finance approval,
- 8) Submission to Office of Administrative Law

External Regulations Process:

- 1) 45 day comment period begins,
- 2) A Public Hearing (if requested),
- 3) Review of and response to public comments,
- 4) Changes to regulations (if identified),
- 5) Additional 15 or 45 day comment period for the public,

- 6) Final statement of reasons,
- 7) Regulations filled with the Secretary of State.

Where does the HAI Advisory Committee fit in? During the public comment period the Advisory Committee can make recommendations for CDPH to consider.

Discussion: When is Title 22 up for revision? There are a number of regulatory packages up for review. 5 are related to Acute Care Hospitals and one is Infection Control & Physical Environments. It was paused because of the pandemic. Currently being readdressed. The HAI Advisory Committee previously gave comments. There will be another round of public comments. That is the time the Advisory Committee can provide comment. The Advisory Committee needs to be ready when this occurs to provide feedback quickly.

Item 4. Subcommittees

Form a small ad/hoc group to be ready when Title 22 goes out for public review. An email will be sent to Advisory Committee members for volunteers.

Discussion: When would the committee know when the regulation is ready for public comment? CDPH HAI will follow up with Chelsea to identify when notice will go out.

Propose to restart the Antimicrobial Stewardship subcommittee. Email past members to see if they are interested in joining. A subcommittee to help the HAI Program develop materials to promote discussion of resilience in infection control with hospital Administrators. Brainstorm on best practices and focusing on CLABSI as a possible starting point.

Item 5. Review action items and propose agenda topics for future meetings

Next committee meeting June 9, 2022. Meeting adjourned at 12:02 PM