

SYNERGY: COMBINING EFFORTS FOR HAI PREVENTION

August 2010

News from the Virginia Department of Health's
Healthcare-Associated Infections (HAI) Program

Volume 1, Issue 4

Edited by:
Andrea Alvarez

Notes from VDH

In early August, Cheryl Sharp joined the VDH HAI Team as a health educator. Cheryl has a breadth of experience creating educational materials for a variety of audiences. Most of her work at VDH will focus on developing infection prevention educational resources for long-term care facilities and general consumers.

A report summarizing the findings of the acute care needs assessment was distributed this month to administrators,

quality improvement professionals, and infection preventionists. In the near future, the report will be available on the VDH portion of the APIC-VA website (http://www.apic-va.com/VDH_HAI.html). This website is still under development but will be updated regularly with resources and news. If you have not yet received a copy of the needs assessment report and would like one, please contact Andrea Alvarez at Andrea.Alvarez@vdh.virginia.gov or 804-864-8097.

Long-Term Care Update

On July 28th, a Long-Term Care (LTC) Advisory Committee meeting was held in Richmond and included representatives from nursing homes and assisted living facilities, Virginia Department of Health – Office of Licensure and Certification, Virginia Health Care Association, Virginia Association of Nonprofit Homes for the Aging, Virginia Assisted Living Association, and the Virginia Department of Health HAI Team. The Advisory Committee was briefed on VDH's HAI Program, the American Recovery and Reinvestment Act of 2009, and the program's planned projects aimed at reducing HAIs in the LTC setting.

A needs assessment of LTC facilities is planned for September and the format and topics were discussed by the group. The Advisory Committee members will review a draft of the assessment, which will then be pilot-tested by a handful of LTC facilities before being disseminated statewide via an

online survey instrument. The assessment will cover facility demographics, infection prevention policies and surveillance activities, training needs, relationships with external agencies, and communication with other facilities when transferring residents on transmission-based precautions or with multidrug-resistant organisms. If possible, the needs assessment should be completed by the facility's main point of contact for infection prevention issues. Results from the assessment will be used to craft trainings for both types of LTC settings and to develop infection prevention toolkits and other educational resources.

In the coming months, VDH will be eliciting participation from a small cohort of nursing homes to be a part of a prevention collaborative to work together to conduct surveillance on *Clostridium difficile* infections or diarrheal disease in their facilities.

In this issue:

Notes from VDH	1
Long-Term Care Update	1
Centers for Medicare and Medicaid Services (CMS) Updates	2
VDH-VHHA HAI Advisory Committee Meeting Update	2
NHSN News	2

Upcoming Events:

Sept 15, 2010:

July 2010 SSI events, procedure data, time and effort, and SCIP I-2-3 2010Q1 data due for SSI pilot hospitals

Questions? Comments?

Contact:

Deb Kalunian,
HAI Coordinator
804-864-7548

Centers for Medicare and Medicaid Services (CMS) Updates

The Centers for Medicare and Medicaid Services (CMS) recently published a new rule with significant changes for reporting and payment associated with healthcare-associated infections (HAIs). Inpatient Prospective Payment System (IPPS) hospitals participating in CMS's Reporting Hospital Quality Data for Annual Payment Update (RHQDAPU) program will be required to submit HAI data via the National Healthcare Safety Network (NHSN). These data will be available publicly on Hospital Compare in a format similar to how Surgical Care Improvement Project (SCIP) data are currently displayed. Hospitals that comply and report quality measures including HAI indicators to RHQDAPU will receive more CMS dollars (pay-for-reporting) and within a few years will be paid for their performance. Central

line-associated bloodstream infections (CLABSIs) in adult and neonatal intensive care units will be reportable starting January of 2011, and surgical site infections associated with colon, knee replacement, hip replacement, vaginal or abdominal hysterectomy, vascular, coronary artery bypass graft, or other cardiac surgery will be reportable starting January of 2012. An interagency group is meeting regularly to work on operational plans and more information will be forthcoming as it becomes available. This CMS Rule is another indication that the federal agencies are working toward aligning efforts to decrease HAIs nationwide.

To view the full CMS Rule, please visit:

<http://edocket.access.gpo.gov/2010/pdf/2010-19092.pdf>

VDH-VHHA HAI Advisory Committee Meeting Update

A meeting of the VDH-VHHA HAI Advisory Committee took place on July 22nd. The group was updated on the status of several HAI-related initiatives including the SSI pilot project, acute care needs assessment, and long-term care needs assessment. APIC-VA members who attended the national APIC conference briefed the members on the surgical site infection (SSI) surveillance pilot and noted that CDC was not able to clarify the issues pilot facilities have been having with the SSI definitions. Further discussion is still needed to resolve these issues. A consumer member of the committee asked if VDH had a timeline for broadening HAI public reporting and encouraged that an implementation strategy be developed. VDH noted that there is no concrete timeline for increasing measures per se, but in April 2010, the Board of Health did approve proceeding

with requiring reporting of three additional measures [CLABSI in two units outside the adult ICU, laboratory-identified *Clostridium difficile* infection, and Surgical Care Improvement Project (SCIP) measures specific to coronary artery bypass graft, hip arthroplasty, and knee arthroplasty surgeries]. These measures are currently under Executive Branch review and not yet available for public comment.

VHQC gave updates on their methicillin-resistant *Staphylococcus aureus* (MRSA) and SCIP projects. The participating hospitals are showing improvement in their MRSA infection rates for the selected unit under surveillance. Individual SCIP measures as well as composite measures have shown improvement in the facilities participating in the VHQC SCIP initiative.

NHSN News

In 2011, NHSN plans to introduce a long-term care module in which existing NHSN protocols and data collection requirements will be modified to align with HAI surveillance needs in long-term care facilities. The decision to make changes to current protocols and data collection requirements was informed by feedback from multiple LTC stakeholders who said that any national HAI surveillance strategy for LTC must be based on definitions appropriate for residents in that setting; the

system must be simple to use and able to provide information back to facility users which is directly relevant and applicable to surveillance and prevention efforts. NHSN has already begun to work with states to involve their LTC facilities in prevention collaboratives that use paper-based data collection tools that can capture data in a way that will mirror the eventual web-based LTC module in NHSN.