# Connecticut Healthcare Associated Infections Advisory Committee Minutes November 2, 2011

**Attendees:** Lauren Backman, Jaya Bhargava, Matthew Bizzaro, Dale Cunningham, Louise-Marie Dembry, Carol Dietz, Brenda Grant, Nancy Havel, Cynthia Kohan, Cathy Ligi, Alessandra Litro, Meghan Maloney, Harry Mazadoorian, Richard Melchreit, Gayle Nobert, Julie Petrellis, Jean Rexford, Richard Rodriguez, Carl Schiessel, Ethel Smith, Douglas Waite,

Attendees on the Telephone: Laurie Brentlinger, Heidi Joseph, Trini Ann Mathew, Jack Ross, Lisa Winkler

**Call to order:** Richard Melchreit called the meeting to order at 9:07 a.m.

Review and approval of prior Advisory Committee meeting minutes (08/03/11): The draft minutes were reviewed and the revised motion was discussed at length to include all healthcare sectors. The Committee moved to accept the minutes with the revised motion.

### **New Advisory Committee Member**

Dr. Matthew Bizzarro is a new member to the Advisory Committee. He is a pediatrician from Yale and specializes in neonatology. He is excited to be a part of this committee and bring his background and expertise to us.

### The Current State of Things

Dr. Melchreit showed the committee different presentations from recent meetings he had attended in Dallas and Atlanta. The take home messages from the Dallas meetings were we need to have better collaboration with each other in order to accomplish our goals. The Atlanta meetings also highlighted the great work that has been accomplished by stimulus funds in the last 28 months that we hope to continue to.

#### **Dialysis Update**

Jaya spoke about the dialysis project that is being done in collaboration with DPH. She spoke about why dialysis patients are susceptible to HAIs and the current mandates dialysis centers must adhere to. There was confusion who should track infections in dialysis facilities and ESRD Network of New England partnered with DPH to conduct a validation study which allows them to conduct validation of data by site visits, Provide interventions to improve outcomes, and develop validation protocol. They have about 25 centers enrolled at the moment and they are working to validate denominator data, validate numerator data and develop a protocol for validation to be used by the state.

### CLABSI data validation, educational trainings, and DPH public information campaign:

The validation is complete and data has been analyzed and presented at the trainings in the summer. The educational trainings were a huge success. The agenda was jam packed and the feedback was great. The participants got a lot out of the training. The marketing firm is working on the campaign. They will do bus cards, radio and television ads, a video, press release and a kickoff meeting at the capitol. The committee discussed if a separate group should assist with the kickoff meeting and that was agreed

upon. The marketing firm will have another meeting inviting all people to showcase the campaign and obtain more feedback. The committee was impressed by the work completed.

## HAI Program, stimulus update & new application (EIP, ELC):

The HAI program applied for two grant applications that we are waiting to hear of award funding. This can continue the work that has taken place in the last few years. The program has applied for a no cost extension for the stiumulus funds for the ELC grant. The funds will be used to reschedule the APIC 101 course after historic snowstorm in CT this past week and the funds will also be used to continue the planning process and keep Ethel Smith as the primary person for the plan.

# The function, structure, and processes of the HAI Committee, in light of #2 – development of a stronger "working" rather than "informational" model:

Richard Melchreit would like to show different models of advisory committees to the group. In particular Tennessee, Arizona and some other states. It was discussed if we should have a separate meeting to conduct this or speak about it at the next advisory committee meeting. The group agreed that they need to have materials from the other states or invite the other states to give a presentation about their advisory committee and its structure. DPH will work on putting documents together and speaking with model states. The group also discussed the charge of the CT HAI Advisory Committee and we may not be able to change our structure because that is not our role put forth by legislation and the commissioner, however we may be able to have a sub committee that will be able to do this.

### Prevention Collaboratives update (CUSP: Stop BSI/CAUTI, MDRO):

**CUSP:** Stop BSI – CUSP: Cohort 1 has come to an end is beginning to wind down, and is now in the sustainability phase. The CUSP: CAUTI project is moving along and there will be a team building and kickoff meeting on November 14<sup>th</sup> for all people on the committee.

Qualidigm is starting The 10<sup>th</sup> scope of work which will focus on CLABSIs, CAUTIs, CDIs and SSIs. The project is in the recruitment stage and partnership meetings are taking place. This project will include collaborations for all healthcare sectors including long term care.

#### Adjournment

The meeting was adjourned at 11:07

The next quarterly HAIC meeting will be held February 1st at 9:00 to 11:00 am at the Connecticut Hospital Association.