Healthcare-Associated Infections Advisory Committee Meeting Summary December 14, 2023 Video Conference

Voting Members Present

Ariana Longley, Carole Moss, David Ha, Deborah Ellis, Ethan Smith, Francesca Torriani, Jorge Salinas, Michael Vollmer, Robert Enteen, Zachary Rubin (Chair),

Voting Members Absent

Amber Theel, Anjali Bisht, Carolyn Caughell, Geanny Ryan, Michele Lampshire, Patricia Sung

Liaison Members Present

Michael Butera-CMA

Liaison Members Absent

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

Center Staff Present

Chelsea Driscoll

Department Staff Present

Erin Epson, Julie Stoltey, Lanette Corona, Satya Keshav, Alejando Gonzalez, Deweese Quigley, Margaret Turner, Barbara Allen, Jane Kriengkauykiat, Rebeca Elliott, Jane Siegel, Sujit Vettam, Becca Czerny, Tracy Lanier, Liz Mason, Sydney Loewen, Anisah Alshiekh, Pearlie Beltran, Diana Holden, Mushfika Maknun, Lana Sato, Shannon Malindzak, Myesha Febres, Jon Rosenberg, Lian Hsiao, Andrea Parriott, Erin Garcia, Lynn Janssen, Tisha Mitsunaga, Kiya Komaiko, Idamae Kennedy, Allison Bailey, Sophie Frank, Hosniyeh Bagheri, Teresa Nelson, Josie Williams, Diana Ortiz-Kennedy

Call to order, introductions, and review meeting requirements.

Chair, Zachary Rubin, called the meeting to order at 10:04 AM.

Item 1. Approve the September 14, 2023, meeting summary.

Meeting summary approved.

Item 2. CDPH HAI Program Updates

A reminder of why the HAI Advisory Committee was formed. Created by legislative mandate (Health and Safety Code 1288.5) to make recommendations to CDPH on issues related to HAI in California general acute care hospitals: surveillance, reporting and prevention.

By-laws list specifically mandated functions pertaining primarily to HAI surveillance and reporting methods; however, "list is not intended to limit the HAI-AC from making additional recommendations to the Department for the prevention, surveillance, and public reporting of HAIs."

CDPH highlighted HAI Program activities:

- Respiratory virus prevention and control guidance for skilled nursing facilities
 (www.cdph.ca.gov/Programs/CHCQ/LCP/Pages/AFL-23-36.aspx)
 CDPH Recommendations for Prevention and Control of Respiratory Viral Infections in Skilled
 Nursing Facilities: Key Messages. Streamlined guidance that can be broadly applied for the
 prevention and control of SARS-CoV-2, influenza, respiratory syncytial virus, and other
 respiratory viruses.
- Encourage residents and healthcare personnel (HCP) to be up-to-date on recommended vaccinations

Overall, only 74% influenza vaccination coverage among hospital HCP. Only 58 (15%) hospitals met 90% Healthy People 2020 goal; Develop policies for source control masking; Initiate prompt testing and treatment of COVID-19 and influenza.

2022 hospital HAI and 2022-23 hospital healthcare personnel (HCP) influenza vaccination data, interactive maps, and internal HAI data validation participation list
 (www.cdph.ca.gov/Programs/CHCQ/HAI/Pages/ACH_Internal_Data_Validation.aspx)

 CDPH shared the 2023 validation process and timeline.

• Antimicrobial Stewardship Program Honor Roll application

Three phases of the honor roll: phase 1: week 1-4 post deadline, CDPH review of coarse elements, review if submitted documentation; phase 2: week 5-8 post deadline, CDPH and external blinded ASP expert review outcome; phase 3: week 9-12 deadline, CDPH review each program as a whole and determine final designation. Most recent enrollment period (deadline Sept 1): 62 applications received; 13 new, 7 upgrade, and 42 renewals. Applications include examples of good ways to conduct and demonstrate, the tracking adherence to facility-specific treatment guidelines and competency-based training.

Updated Candida auris webpage and resources

(www.cdph.ca.gov/Programs/CHCQ/HAI/Pages/Candida-auris.aspx)
CDPH shared the *C. auris* webpage. Highlighted map and table of case counts updated monthly; wastewater surveillance dashboard and FAQs links; differentiates between single cases and clusters in lower risk settings, simplifies screening for single cases and wider screening for clusters/outbreaks.

• Health Equity strategic planning

The HAI Program held a Health Equity Strategic Planning Workshop on September 28, 2023. The goal was to identify and prioritize Health Equity (HE) goals for the CDPH HAI Program. Guests from Centers for Disease Control and Prevention (CDC) and CDPH HE liaisons.

CDC's Division of Healthcare Quality Promotion HE goals and CDPH HAI Program are to align. By December 2026, implement at least two strategies in long-term care facilities (LTCF), (e.g., nursing homes, assisted living communities), caring for residents at-risk for experiencing healthcare inequities. By December 2026, implement at least three actionable, data-informed strategies that impact diverse frontline healthcare personnel's ability to protect themselves and their patients from infections. By December 2026, reduce disparities by improving antibiotic use (AU) and reducing antimicrobial-resistant (AR) infections among disproportionally affected populations, as informed by the systematic incorporation of disparities and equity-focused data into surveillance and detection efforts.

Share updates on federal funding for HAI Program

CDC Epidemiology and Laboratory Capacity (ELC) Funding: 64 state, large local, territorial health departments. CDPH shared an outline of the ELC Core funding and Supplemental ELC Funding. Currently, HAI has 30 of the 65 program positions federally funded.

Discussion: The committee wanted to know how many hospitals that submitted data are on the published interactive map and why is the process taking so long to publish. CDPH reminded that the publication processes for the interactive map and the narrative report were separated and the approval process for the narrative report takes time. Committee members feel all the data are not reported by the hospitals. They feel the hospitals need to be held accountable to report all their data. Past reports were easier to read by the public. The committee wants to know how they can assist in getting the report out timelier.

CDPH explained that where the interactive map indicates 'not enough data,' this does not mean the hospital didn't report. The facility may have been too small or performed too few procedures to make meaningful statistical comparisons between their data and other hospitals this is what 'not enough data' is intended to communicate. CDPH will review how the public may interpret the report and investigate other ways of communicating the information. The committee also suggested looking at a crosswalk to determine the accuracy of the report. The committee suggested having a working session to work through identified issues with the report. Suggested to revive the Public Reporting subcommittee. Carol Moss, Francesca Torriani and Ariana Longley volunteer to be a part of the subcommittee.

The committee raised a motion:

Motion: The CDPH HAI Advisory Committee requests that CDPH publicly publish the most recent HAI narrative report as soon as possible.

<u>Voted in favor:</u> Ariana Longley, Carole Moss, David HA, Deborah Ellis, Francesca Torriani, Michael

Vollmer, Robert Enteen, Zachary Rubin

<u>Opposed</u>: None <u>Abstained</u>: None

Subcommittee Report(s)

Item 3. Antimicrobial Resistance/Stewardship Subcommittee - David HA, Chair

- HAI AS Team (gave feedback on activities)
- Incorporating AR efforts (continue being interested on how to collaborate/public education that is supported by the committee, etc.)
- o They have been very busy, and meetings routinely go over time.

Item 4. Discuss items and details of the Recognition and Recruitment of HAI-AC members.

Committee chair asked all members to reach out to their associations and colleague to possible join the committee.

Item 5. Discuss future meeting agenda items.

Any suggests, or requests can be emailed to Valerie.

The Advisory Committee meetings for 2024 will be determined later. Meeting adjourned at 11:55 AM.