Maryland Healthcare-Associated Infections Prevention Plan

Presentation to the Maryland Health Quality and Cost Council

Pamela W. Barclay
Director, Center for Hospital Services
Maryland Health Care Commission

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Reducing Healthcare-associated Infections in Maryland
Epidemiology and Laboratory Capacity for Infectious Diseases

Grant Proposal Filed in June 2009 by
- Maryland Health Quality and Cost Council
- DHMH Infectious Disease and Environmental Health Administration
- Maryland Health Care Commission

- CDC Awards Maryland $1.2 million for 28-month project (August 2009-December 2011)

-Funds Awarded Support Work in Three Areas
  - Activity A: Coordination and Reporting of State HAI Prevention Efforts
  - Activity B: Detection and Reporting of HAI Data
  - Activity C: Establishing a Prevention Collaborative
Activity A: Coordination and Reporting of State HAI Prevention Efforts

- Develop and Submit the State HAI Prevention Plan no later than **January 1, 2010**
- State plans will:
  - Be consistent with the HHS Action Plan
  - Contain measurable 5-year goals and interim milestones for preventing HAIs
  - Be reviewed by the Secretary of HHS with a summary report submitted to Congress by **June 1, 2010**
- States receiving Preventive Health and Health Services (PHHS) Block Grant funds required to certify that they will submit a plan to the Secretary of HHS not later than January 1, 2010 (under FY 2009 Omnibus Bill)
HHS Action Plan to Prevent Healthcare-Associated Infections (June 2009)

Tier One Priorities*

HAI Priority Areas
- Catheter-Associated Urinary Tract Infection
- Central Line-Associated Blood Stream Infection
- Surgical Site Infection
- Ventilator-Associated Pneumonia
- MRSA
- Clostridium difficile

Implementation Focus
- Hospitals

*Tier Two will address other types of healthcare facilities

Maryland HAI Prevention Plan

- Developed by the HAI Advisory Committee (Meetings on December 1\textsuperscript{st} and 10\textsuperscript{th} )
- Uses the CDC framework to ensure progress towards five-year national prevention targets as described in the HHS Action Plan in the following areas:
  - Infrastructure Planning for HAI Surveillance, Prevention, and Control
  - Planning for HAI Surveillance, Detection, Reporting, and Response
  - Planning for HAI Prevention Activities
  - HAI Communication and Evaluation Planning
Infrastructure Planning for HAI Surveillance, Prevention, and Control

- Expand Role of Existing HAI Advisory Committee
- Recruit HAI Prevention Coordinator
- Integrate Laboratory Activities
- Establish Subcommittee Structure to Guide Plan Development and Implementation
# Healthcare-Associated Infections Advisory Committee: Organizational Chart

## Healthcare-Associated Infections Advisory Committee
- Develop Maryland HAI Prevention Plan

### HAI Process and Outcome Measures Subcommittee
- Recommend HAI process and outcome measures
- Develop proposed Maryland prevention targets
- Recommend strategies for validating HAI process and outcome measures
- Recommend the format and frequency for HAI public reporting on process and outcome measures

### Infection Prevention Subcommittee
- Recommend uniform, statewide approach for measuring hand hygiene
- Develop HAI Prevention Collaboratives, including the Maryland Hospital Hand Hygiene Collaborative and the Multi-Drug Resistant Organism (MDRO)-Acinetobacter Prevention Collaborative
- Develop an inventory of State-level infection prevention and control programs; and, recommend strategies to increase impact where appropriate
- Recommend key strategies for infection prevention and control

### IP Training and Work Force Development Subcommittee
- Identify training needs to support planned Maryland HAI data collection and reporting initiatives
- Study the capacity of the current Maryland IP workforce to meet future needs
- Study approaches to increasing IP capacity, including development of career ladders
- Develop best practices for training and certification for health care professionals in HAI prevention

### Electronic Laboratory Data Reporting Subcommittee
- Assess current capability of health care providers to transition to an electronic laboratory data reporting environment
- Facilitate electronic transmission of HAI data from clinical laboratories to public health agencies
- Facilitate implementation of electronic laboratory-based data reporting that adheres to Health Level 7 (HL7) standards and existing national surveillance systems (NEDSS and NHSN)
Planning for HAI Surveillance, Detection, Reporting, and Response

- Identify HAI Prevention Targets
- Adopt National Standards to Track HAIs
  - NHSN (Maintain CLABSI/Add SSI/MDRO)
  - Maryland Data Sets (HCW Influenza Vaccination Rates; AST for MRSA in ICUs)
  - Surgical Care Improvement Project Process of Care Measures
- Develop State Surveillance Training Competencies
  - Statewide Training Seminars on NHSN Modules
- Validate HAI Surveillance Data
- Develop Tailored Data Analysis Reports
Planning for HAI Prevention Activities

- Prevention Collaboratives
  - Maryland Hospital Hand Hygiene Collaborative
  - Multi-Drug Resistant Organism (MDRO) – *Acinetobacter* Collaborative
- Identify On-Going Funding to Support Key Collaborative Activities
- Develop State HAI Training Competencies
- Implement HICPAC Recommendations
  - CLABSI
  - SSI
  - MDRO
HAI Communication and Evaluation Planning

- Provide Consumers with Access to Useful Health Care Quality Measures
  - Maryland Hospital Performance Evaluation Guide
- Need Assessment and Evaluation Planning
- Work with Stakeholders to Seek Funding to Implement Priority Patient Safety Initiatives and Research Aimed at Preventing HAIs
Questions?