2023 Current Fiscal Year Report: Healthcare Infection Control Practices Advisory Committee

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1. Department or Agency 2. Fiscal Year

Department of Health and Human Services 2023

3b. GSA

Committee No.

Healthcare Infection Control Practices

Advisory Committee 179

4. Is this New During 5. Current 6. Expected 7. Expected Fiscal Year? Charter Renewal Date Term Date

No 01/19/2023 01/19/2025

8a. Was Terminated During 8b. Specific Termination Authority 8c. Actual Term Date

No

9. Agency 10b.

Recommendation for Next Req to Terminate?

FiscalYear Legislation Pending?

Continue Not Applicable Not Applicable

11. Establishment Authority Authorized by Law

12. Specific 13. 14.

Establishment Effective Committee Presidential?

Authority Date Type

42 U.S.C. 217a 11/17/1962 Continuing No

15. Description of Committee Scientific Technical Program

Advisory Board

16a. Total

No Reports for this FiscalYear

Reports

17a.

Open 3 17b. Closed 0 17c. Partially Closed 0 Other Activities 0 17d. Total 3

Meetings and Dates

Purpose Start End

The meeting was held to discuss the Healthcare Personnel Guideline Workgroup; Isolation Precautions Guideline Workgroup;

Neonatal Intensive Care Unit Guideline

Workgroup; Neonatal Pediatric Surveillance Workgroup; and Dental Unit Waterlines Guideline Update.

The meeting was held to discuss updates on

CDC's activities for prevention of

healthcare-associated infections, as well as

updates from the following HICPAC workgroups: the Isolation Precautions
Guideline workgroup, the Dental Unit

Waterline Guideline Workgroup, the 06/08/2023 - 06/09/2023

11/03/2022 - 11/03/2022

08/22/2023 - 08/22/2023

Healthcare Personnel Guideline Workgroup, the Neonatal Intensive Care Unit Guideline Workgroup, and the National Healthcare Safety Network Workgroup. Meeting discussions also included updates on CDC an DHQP activities.

The meeting included discussion on: The Healthcare Personnel Guideline Workgroup;

Isolation Precautions Guideline Workgroup;

National Healthcare Safety Network

Workgroup; and Dental Unit Waterlines

Diem to Federal Staff

Guideline Update.

Number of Committee Meetings Listed: 3

	Current FY	Next FY
18a(1). Personnel		
Pmts to Non-Federal	\$8,750.00	\$38,750.00
Members		
18a(2). Personnel		
Pmts to Federal	\$12,662.00	\$54,165.00
Members		
18a(3). Personnel	¢50.462.00	\$39,550.00
Pmts to Federal Staff	φου, 102.00	φ39,330.00
18a(4). Personnel		
Pmts to Non-Member	\$0.00	\$0.00
Consultants		
18b(1). Travel and Per		
Diem to Non-Federal	\$5,572.00	\$24,073.00
Members		
18b(2). Travel and Per		
Diem to Federal	\$0.00	\$0.00
Members		
18b(3). Travel and Per	\$0.00	20.00

\$0.00

\$0.00

18b(4). Travel and Per

Diem to Non-member \$0.00 \$0.00

Consultants

18c. Other(rents,user

charges, graphics, \$322,759.00\$338,577.00

printing, mail, etc.)

18d. Total \$399,905.00\$495,115.00

19. Federal Staff

Support Years (FTE) 0.25 0.20

20a. How does the Committee accomplish its purpose?

The Committee accomplishes its purpose by: 1) informing the development of evidence-based guidelines for the prevention of healthcare-associated infections; 2) providing infection prevention and control guidance to address new or changing infectious disease threats such as pandemic influenza, severe acute respiratory syndrome coronavirus 2, or antimicrobial (antibiotic) resistant pathogens; and 3) providing input on national surveillance efforts. During fiscal year 2023, the Committee continued to provide input into the draft CDC guideline updates: the Guideline for Infection Control in Healthcare Personnel, and the 2007 Isolation Precautions Guideline I. The Committee also provided input on improving neonatal and pediatric surveillance definitions for the National Healthcare Safety Network, which is the nation's mostly widely used healthcare-associated infection tracking system. The committee also formed a new workgroup, the Dental Waterline Unit Workgroup, which has begun the task of updating the Guidelines for infection Control in Dental Health-Care Settings-2003, Section on Dental Unit Waterlines, Biofilm and Water Quality."

20b. How does the Committee balance its

membership?

The committee consists of 14 public members. In addition to considerations of balanced racial and ethnic groups, gender, and geographic representation, to be effective the Committee must also be balanced by depth of experience (e.g., newer to the field vs. senior-level) and perspective (e.g., national, state, local). Furthermore, the Committee must maintain a balance of real-world expertise in healthcare settings that is dependent upon the planned work of the committee. The Committee's membership currently represents expertise including, but not limited to, infectious diseases, infection prevention, healthcare epidemiology, nursing, clinical and environmental microbiology, surgery, hospitalist medicine, internal medicine, epidemiology, health policy, health services research, occupational medicine, public health, and related fields. The committee also includes ex officio and liaison representation bringing the total number of members to 46.

20c. How frequent and relevant are the Committee Meetings?

Historically, the Committee has met in-person, but in fiscal year 2023 the committee met one time in person two times via video/tele-conference due to the COVID-19 pandemic. Continued operation of the Committee in fiscal year 2023 and beyond is required for the ongoing development, dissemination, and evaluation of CDC's infection control guidelines to prevent healthcare-associated infections and related adverse events, prevent the emergence of antimicrobial-resistant microorganisms, and improve quality of care across the spectrum of healthcare delivery. The committee provides critical guidance to CDC regarding these issues and as needed, provides input on related issues

such as surveillance and healthcare infection control practices for novel and emerging infectious diseases (e.g. Avian influenza, MERS, SARS-CoV-2).

20d. Why can't the advice or information this committee provides be obtained elsewhere?

CDC plays a unique role in healthcare-associated infection prevention activities in the U.S. and worldwide by developing and disseminating evidence-based infection control guidelines for preventing healthcare-associated infections and other adverse events in healthcare settings. This guidance issued to inform healthcare facilities in the development of local protocols and procedures for infection control. Some recommendations become the standard for infection control when incorporated into other regulatory Agency and organizations standards (e.g., facility inspectors/surveyors such as those by Accreditation organizations or the Centers for Medicare and Medicaid Services). CDC actively investigates with State Health Departments and derives new evidence from outbreaks of healthcare-associated infections and CDC collaborates with other federal agencies and academic partners to apply those findings to update and improve prevention guidelines. CDC also manages and leads the National Healthcare Safety Network (NHSN), the nation's most widely used healthcare-associated infection (HAI) tracking system. NHSN provides facilities, states, regions, and the nation with data from over 25,000 medical facilities to identify problem areas, measure progress of prevention efforts, and ultimately eliminate healthcare-associated infections. CDC uses input and advice from recognized experts with the real-world experience in healthcare settings described above to optimize

guidelines and recommendations, assess trends, inform ongoing improvements to HAI monitoring and tracking, and review policy implications relevant to prevention of healthcare-associated infections.

20e. Why is it necessary to close and/or partially closed committee meetings?

21. Remarks

Mohamad Fakih, Elaine Dekker, Joanne Reifsnyder, and Judith Guzman-Cottrill were extended through 12/30/23. Lisa Maragakis, Nicholas Daniels, retired in December 31, 2022. Erica Shenoy, Jennie Kwon, David Weber started membership- January 20, 2023. Jasmine Dhinsda was a new ex officio member for CMS filling vacancy. Jasmine started April 4, 2023, and requested replacement by August 23, 2023. Erin Epson is a new liaison member to the committee starting November 2, 2023, Kristina Bryant Replaced Alan Kliger in January 2023. This Committee does not make formal reports. During the reporting period, the Committee did not have a Chair. The DFO served as the Chair.

Designated Federal Officer

Alexander Kallen Director, PRB, DHQP

Committee Members	Start	End	Occupation	Member Designation
Babcock, Hilary	01/01/2023	06/30/2026	SHEA	Representative Member
Brooks, James	02/22/2021	06/30/2026	Director – AMR Division	Representative Member
Bryant, Kristina	01/20/2023	06/30/2026	American Society of Nephrology	Representative Member
Carpenter, Holly	10/01/2018	06/30/2023	Senior Policy Advisor, Nursing Practice and Work Environment	Representative Member
Conway, Paul	10/16/2018	06/30/2023	Chair, Policy and Global Affairs	Representative Member
Costello, Patti	05/26/2021	06/30/2026	Executive Director, AHE	Representative Member

Cuny, Eve	09/22/2020	06/30/2026	Vice Chairperson, OSAP	Representative Member
Daniels, Nicholas	01/08/2019	12/31/2022	Professor of Clinical Medicine UC- San Diego	Special Government Employee (SGE) Member Special
Dekker, Elaine	01/20/2023	06/30/2023	Registered Nurse	Government Employee (SGE) Member
Ehresmann, Kristen	05/17/2018	06/30/2023	Division Director, Infectious Disease Epidemiology, MN Department of Health	Representative Member
Fakih, Mohamad	07/01/2019	06/30/2023	Vice President, Quality and Clinical Integration, Ascension	Special Government Employee (SGE) Member
Fell, Ashley	11/06/2019	06/30/2023	Epidemiologist Senior/HAI Coordinator, MN Department of Public Health	Representative Member
Guzman-Cottrill, Judith	07/01/2019	06/30/2023	Professor of Pediatrics, Division of Infectious Diseases, Oregon Health and Science University	Special Government Employee (SGE) Member
Hinkle, Hana	09/18/2020	06/30/2023	Associate Director, National Center for Rural Health Professionals	Representative Member
Kliger, Alan	11/15/2018	06/30/2023	Clinical Professor of Medicine, Yale University School of Medicine	Representative Member
Kraft, Colleen	05/04/2021	06/30/2024	Associate Professor, Pathology and Laboratory Medicine Emory University School of Medicine	Special Government Employee (SGE) Member
Kwon, Jennie	01/02/2023	06/30/2026	Infectious Disease, MD	Special Government Employee (SGE) Member
Lombardozzi, Chris	11/15/2018	06/30/2023	Vice President, Chief Medical Officer-Quality, Spartanburg Regional Healthcare System	Representative Member
Maragkis, Lisa	01/10/2019	12/31/2022	CDC	Special Government Employee (SGE) Member
McGiffert, Lisa	02/26/2021	06/30/2026	Member, PSAN	Representative Member

Merrell, Jonathan	02/24/2021	06/30/2026	Indian Health Service	Ex Officio Member
Miller, Melissa	05/01/2015	06/30/2026	Medical Officer, Division of Healthcare-Associated Infections, Agency for Healthcare Research and Quality	
Myburgh, Ronell	09/23/2019	06/30/2023	Program Development and Certification	Representative Member
Ogunremi, Toju	02/26/2021	06/30/2026	Acting Manager, Healthcare Associated Infections (HAI) and Infection Prevention and Control (IPC)	Representative Member
Reifsnyder, JoAnne	07/01/2019	06/30/2023	Executive Vice President, Clinical Operations, Chief Nursing Officer, Genesis HealthCare	Special Government Employee (SGE) Member
Russi, Mark	06/30/2005	06/30/2026	Infection Control	Representative Member
Saint, Sanjay	06/08/2010	06/30/2026	Hospitalist	Representative Member
Sawyer, Robert	01/20/2013	06/30/2026	Professor of Surgery and Medical Engineering Chair, Western Michigan University	Representative Member
Schorr, Christa	02/01/2019	06/30/2023	Associate Professor of Medicine Cooper Medical School of Rowan University	Representative Member
Schwartz, Benjamin	01/22/2020	06/30/2023	Director, Division of Epidemiology and Population Health, Fairfax County Health Department	Representative Member
Shane, Andrea	11/15/2018	06/30/2023	Division Chief of Infectious Diseases	Representative Member
Shenoy, Erica	01/20/2023	06/30/2027	Infectious Disease, MD	Special Government Employee (SGE) Member
Smathers, Sarah	02/23/2021	06/30/2026	System Director Infection Prevention and Control Children's Hospital of Philadelphia	Representative Member
Steffen, Scott	08/10/2021	06/30/2023	The Food and Drug Administration	Ex Officio Member
Truscott, Pamela	09/20/2019	06/30/2023	Senior Manager, Clinical and Regulatory Services	Representative Member

VanAmringe, Margaret	10/01/2013	06/30/2026	Vice President for Public Policy and Government Relations, The Joint Commission	Representative Member
Weber, David	01/20/2023	06/30/2026	Professor -UNC Medical Director	Special Government Employee (SGE) Member
Weber, Stephen	10/01/2018	06/30/2023	Chief Medical Officer, Vice President for Clinical Effectiveness, The University of Chicago Medicine	Representative Member
Wick, Elizabeth	11/01/2014	06/30/2026	Associate Professor of Surgery, Johns Hopkins University	Representative Member
Wright, Sharon	05/04/2021	06/30/2024	Chief Infection Prevention Officer Beth Israel Lahey Health	Special Government Employee (SGE) Member
deKay, Karen	12/12/2018	06/30/2026	Perioperative Practice Specialist	Representative Member

Number of Committee Members Listed: 41

Narrative Description

CDC's mission is to protect America from health safety and security threats and to increase quality of life by preventing and controlling disease, injury, and disability. The agency accomplishes its mission by working with partners to monitor health, develop and advocate sound public health policies, and implement prevention strategies. The Healthcare Infection Control Practices Advisory Committee supports CDC's mission by providing input into CDC's guidelines and recommendations for prevention of healthcare-associated infections (HAIs) and antimicrobial resistance. HICPAC also supports the CDC mission by providing strategy for surveillance as well as monitoring and tracking HAIs to improve patient safety in U.S. healthcare facilities.

What are the most significant program outcomes associated with this committee?

Checked if Applies

Improvements to health or safety
Trust in government



Major policy changes	✓
Advance in scientific research	✓
Effective grant making	
Improved service delivery	•
Increased customer satisfaction	✓
Implementation of laws or regulatory	
requirements	
Other	
Outcome Comments	
NA	
What are the cost savings associa	ted with this committee?
	Checked if Applies
None	
Unable to Determine	✓
Under \$100,000	
\$100,000 - \$500,000	
\$500,001 - \$1,000,000	
\$1,000,001 - \$5,000,000	

Cost Savings Comments

\$5,000,001 - \$10,000,000

Over \$10,000,000

528

Cost Savings Other

Healthcare associated infections cost the United States tens of millions of dollars annually. Implementation and adherence to CDC infection control guidelines that were informed from input from HICPAC potentially represent substantial cost savings for the nation and improved patient safety by reducing morbidity and mortality.

What is the approximate $\underline{\text{Number}}$ of recommendations produced by this committee for the life of the committee?

Number of Recommendations Comments

There were ten additional recommendations made in FY2023. Eight recommendations were made for the healthcare personnel guideline (Varicella, Measles, Mumps, Rubella, Cytomegalovirus, Parvovirus B19, Conjunctivitis and Pregnant Healthcare Personnel).

The last two FY23 recommendation were for the committee to modify the Isolation Precaution 2007 Guideline-Protective Environment recommendation to improve clarity and to adjust recommendations in Appendix A of the guideline to clarify recommendations for personal protective equipment use when caring for patients with high-consequence pathogens like viral hemorrhagic fevers.

What is the approximate <u>Percentage</u> of these recommendations that have been or will be <u>Fully</u> implemented by the agency?

90%

% of Recommendations Fully Implemented Comments

Recommendations to the agency have been implemented and are reflected in CDC guidelines and possible CDC Guideline recommendation updates.

What is the approximate <u>Percentage</u> of these recommendations that have been or will be <u>Partially</u> implemented by the agency?

10%

% of Recommendations Partially Implemented Comments

Sometimes recommendations from the Committee are one of several internal and external inputs that CDC might use to inform decisions (e.g., federal register public comment period, other federal agency review, etc). Also, some recommendations will not be implemented until CDC Guidelines are published. CDC is currently working to refine, finalize, and publish the surveillance methods and guidelines that are informed by Committee's input.

Does the agency provide the committee with feedback regarding actions taken to implement recommendations or advice offered?

Yes No Not Applicable	′es 🗸	No 🗆	Not Applicable	
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Agency Feedback Comments

The agency provides feedback to the committee through updates at regularly scheduled meetings and email communication to notify the HICPAC when action has been taken based on their recommendations. Draft recommendations are presented in the Federal Register for public review and comment as part of our routine processes. In addition, deliberations and feedback is recorded in the HICPAC meeting minutes published our the HICPAC website for public viewing.

What other actions has the agency taken as a result of the committee's advice or recommendation?

recommendation?	
	Checked if Applies
Reorganized Priorities	~
Reallocated resources	
Issued new regulation	
Proposed legislation	
Approved grants or other payments	
Other	
Action Comments	
NA	
Is the Committee engaged in the review No	of applications for grants?
Grant Review Comments	
This committee does not engage in grant re	eview.
How is access provided to the informati	on for the Committee's documentation?
	Checked if Applies

	Checked if Applies
Contact DFO	✓
Online Agency Web Site	✓
Online Committee Web Site	✓
Online GSA FACA Web Site	✓
Publications	✓
Other	✓

Access Comments

Public Meetings