Attendance:

F	Present	Absent
Cooper	Briody, Carol	
Cooper	Chua, Joel, MD	
Cooper	Dennis, Michele	Klein, Joel, MD
Cooper	Drees, Marci, MD	Olurin, Omo, MD
Cooper	Gardner, Kelly	Peterson, Mary
Cooper	Hasse, Joann	Stipe, Jean
Cooper	Jennings, Sally	Vemulapalli, Ramesh, MD
Cooper	Johnson, Brenda	Watson, Floretta
Cooper	Wroten, Kathleen	
Telephone	Anderson, Donna	
	Edwards, Lydia via Eileen	
Telephone	Sherman	
Telephone	Mulhern, Thomas, E., MBA, CASC	
Telephone	Waldron, Yrene	
	Welch, James, via Tracy	
Telephone	Wilkins (DOC)	
DPH	Offutt-Powell, Tabatha	
DPH	Luta, Lucy	
DPH	Silverman, Paul	
DPH	Mihok, Suzanne	

TOPIC	FINDINGS, CONCLUSIONS AND RECOMMENDATIONS	FOLLOW-UP	STATUS
1. CALL to ORDER			
	The HAIAC meeting was called to order by Kathy Wroten at 9:30 a.m.		
2. APPROVAL of MINUTES			
	Minutes from July 27 th , last meeting, not available. Kathy Wroten will send.	July 27, 2012 Minutes sent to Suzanne Mihok, recd January 22, 2013	
3. INTRODUCTIONS			
	 Organizational changes within DPH, were addressed by Dr. Silverman: Epidemiology now reporting to our new Medical Director, Dr. Awele Maduka Suzanne Mihok and Paul Silverman will continue to provide staff support for time being Dr. Tabatha Offutt-Powell is a new epidemiologist who will be working with the committee 		Resolved
4.0 REPORTS SUBCOMMITTEE			
CMS reporting requirements for dialysis and other facilities	Tabatha Offutt-Powell updated the Committee regarding CMS/DPH reporting requirements (see attachment). There was discussion about the reporting burden on the hospital ICP's.		

CMS reporting requirements for Ambulatory Surgery Centers	Tom Mulhern addressed CMS Reporting requirements for Ambulatory Surgery Centers. CMS has implemented the ASC Quality Reporting Program effective October 1, 2012. The program includes five different quality measures, including a measure to track whether Prophylactic IV Antibiotics are administered timely. The data is reported "real time" on the claims submitted to CMS. Additional quality measures will be added in July 2013. There is a 2% financial penalty for not reporting beginning in 2014.		
Physician responsibility to report	Dr. Silverman proposed language regarding the requirement for physicians to report. This language will be sent to providers and posted the state website. There was concern about the phrase "procedure related infections" as well as the difficulty of non-involved clinicians to understand the nuances of reporting. It was proposed that examples be provided as part of the language. There was also discussion about making the HAIC web pages more visible and asking professional associates to provide a link on their website.	Dr. Silverman work with Drs. Drees and. Chua on more specific language.	Resolved
Quarterly Reports	 Dr. Powell opened discussion on the format for Quarterly Reports. There was discussion about balancing the need for detailed information with the importance of it being understandable by the consumer. It was decided that the report should begin with general, simple information and provide more complex information toward the middle and end of the report. Because the state is behind in publishing quarterly reports, there was a motion which was seconded and approved for Committee to agree with Report Sub-committee format changes until further discussion at the next Advisory Committee meeting so that quarterly reports can be published. 	The report sub- committee, aided by Dr. Powell, will bring a revised proposal to the Committee at their next meeting.	Resolved

Validation Summary	A motion was seconded and approved to post the Validation Report as edited by Report Sub–committee.	DPH to post Validation Report to Website.	Resolved
Technical Assistance	The Report Sub-committee requested that DPH consider how additional technical assistance can be provided to hospitals to aid in NHSN reporting. The addition of Dr. Powell to the DPH staff provides new opportunities. It was agreed that Dr. Powell will be the point person for technical assistance as well as the liaison to NHSN.		Resolved
5.0 New Business			
Proposed Sub- Committee Structure	 Dr. Silverman proposed a revised sub-committee structure for the Advisory Committee given its expanded charge (see handout). The subcommittees would be: Regulation Reporting Membership Prevention Communications, drill down to consumers There was discussion about utilizing people outside of the Committee as Sub-committee members. It was agreed that this would be permissible, that sub-committees must be chaired by a Committee member, and that every member of the Committee must be on a sub- committee. 		Resolved
6.0 Old Business			

Membership	 Dr. Silverman reviewed the Committee membership, pointing out vacancies and inconsistencies with the law. Mary Peterson – no longer Health Facilities Licensing, now Director of Division of Long Term Care No official slot for Dept of Corrections, though they are required to report Dr. Klein retiring Only one slot for each hospital ICP. Need to recruit representatives of Psych and Dialysis No official slot for Quality Insights of Delaware One DPH representative not determined Some members have missed meetings. 	DPH to request opinion from Deputy Attorney General regarding restrictions on adding members beyond provisions in law. DPH will solicit membership to represent psych and dialysis facilities. DPH will solicit interest of members who have missed successive meetings to continue membership.	Pending
Election of New Officers	There was discussion regarding how to go about electing chairs for the new sub-committees as well as Chair of the Committee. DPH will send out a nomination request, check with those nominated, and the send out a ballot. The nomination request should include a brief description of the sub-committees, and also a request of each member to sign up for at least one committee. The nomination request should also include a description of responsibilities of the sub-committee and committee	DPH to send out nomination request and then ballot.	Pending

	chairs.	
7.0 Open Discussion		
	There was discussion about flu vaccination policies and antibiotic prophylaxis of patients with implants.	Resolved
8.0 Adjournment		
	Kathy Wroten adjourned the meeting at 11:36 AM.	Resolved

Next Meeting:	March 22, 2013 @ 9:30 AM		
	Dover:	Jesse Cooper Building, 3 rd Floor Conference Room	
		417 Federal Street, Dover	
	Video Conference connections:		
	New Castle County:	Herman Holloway Campus, Main Admin Bldg, Rm 198	
	Sussex County	Adams SSC Library, 546 S. Bedford St., Georgetown	
	Telephone Conference Line:		
	Date of bridge access: 3/22	2/2013	
	Passcode (pin) for bridge a	ccess: 396632	
	All numbers listed below a	ccess this bridge. Please use the number that is local to your county.	
	The bridge phone n	umbers are:	
	New Castle	County 302-255-2900	
	Kent Count	y 302-741-8695	

Sussex County302-424-8675From an Avaya site52900

Respectfully Submitted,

Suzanne Mihok (Recorder) Kathleen M. Wroten_

(Chairperson)