CORHA Spring Meeting 2023

May 9 – 10 | Courtyard Downtown Decatur + Virtual (Zoom)

Meeting Notes

Day 1 – Tuesday, May 9

Attendance

In-Person

1. Kimberly McCullor (APHL)
2. Nicholas Moore (APHL)
3. Mary Alice Lavin (APIC)
4. Joe Perz (CDC)
5. Grace Lee (ASTHO)
6. Tracy Stiles (APHL)
7. Elizabeth Beshearse (CDC)
8. Erin Laird (ASTHO)
9. Moon Kim (NACCHO)
10. Erin Epson (CSTE)
11. Waleed Javaid (SHEA)
12. Linda Greene (APIC)
13. Erica Washington (CSTE)
14. Julia Madaras (FDA)
15. Andrea Flinchum (CSTE)
16. Elizabeth Mothershed (CDC)
17. Richard Martinello (SHEA)
18. Kiran Perkins (CDC)
19. Lisa McGiffert (Patient Safety Action Network)
20. Matthew Crist (CDC)
21. Ayana Hart (CDC)
22. Bonnie Herring (CDC)
23. Dawn Terashita (NACCHO)
24. Amelia Keaton (CDC)
25. Michael Bell (CDC)
26. Beth Daly (CSTE)
27. Akila Simmons (CSTE)
28. Lindsay Jordan Pierce (CSTE)
29. Will Fritch (CSTE)

Virtual

1. Christina Baum (NACCHO)
2. Richard Wild (CMS)
3. Chris Baliga (SHEA)
4. Dhara Shah (CSTE)
5. Geeta Sood (SHEA)
6. Kevin Spicer (CDC)
7. Kris Ehresmann (ASTHO)
8. Irene Halferty (NACCHO)
9. Valerie Deloney (SHEA)
10. Tanya Hamburger (CDC)
11. Cal Ham (CDC)
12. Janet Hamilton (CSTE)
13. Jackie Abramson (NACCHO)
14. Rebecca Stuart (Toronto Public Health)

9:45 – 10:00 am: Opening Remarks by Dr. Michael Bell

- Key Takeaways
    - Dr. Bell, Deputy Director of CDC's Division of Healthcare Quality Promotion (DHQP) welcomed meeting participants. He thanked the group for their continued efforts to standardize work and provide resources useful to the complex multijurisdictional landscape of U.S. public health. He acknowledged the work of patient safety organizations in pursuing transparency in healthcare settings and expressed appreciation that CORHA is continuing its work after pandemic-related challenges.

10:00 – 10:45 am: CORHA Activities

- Key Takeaways
    - Communications Updates (Christina Baum – NACCHO)
        - Have observed an increase in CORHA web traffic – particularly following March P&P promotion.
        - NACCHO is bringing on a consultant to update the CORHA website.
        - Christina reviewed recent publications/leadership spotlight, and made call for sharing of CORHA-relevant news items.
    - P&P Updates (Will Fritch – CSTE)
        - Dr. Caitlin Pedati onboarded as consultant with CSTE to finish development of P&P by end of summer 2023.
        - Chapter 6 to be voted on during meeting.
        - Chapter 8 undergoing final formatting.
        - Supplement A to be finished in next couple of months, Chapter 7 and acknowledgments section to follow.
    - Non-P&P Product Updates (Will Fritch – CSTE)
        - CORHA CRE product revisions complete; new version posted since last meeting.
        - Several new focused reference pages on CORHA website (e.g., Mpox, Ebola, water-associated organisms).
    - Policy Workgroup (Grace Lee – ASTHO)
        - The Policy Workgroup is in the process of developing a resource which addresses the use of public-facing dashboards related to HAI/AR outbreaks.
        - The workgroup continues to review practices/resource pertaining to HAI outbreak patient notifications, as well as data reporting and related federal requirements.
    - Detection and Response Workgroup (Will Fritch – CSTE)
        - The D&R workgroup has been prioritizing the development of reference pages for the CORHA website, which are more readily developed than large CORHA documents and allow for CORHA/D&R workgroup members to provide perspective on key resources by topic area.
        - The D&R workgroup is mapping out its anticipated work for the coming year using a product review and development calendar.
    - Laboratory Workgroup (Will Fritch – CSTE)
        - The lab workgroup has submitted suggestions for a robust workgroup roster and is refining that suggested roster in light of feedback from the CORHA GC.
        - The lab workgroup is in the process of developing a toolkit addressing laboratory considerations in HAI/AR outbreak response.

11:00 – 11:45 am: Communications Survey Results

- Key Takeaways
    - NACCHO developed and disseminated, in partnership with the other organizations, a survey for CORHA key stakeholders in March/April 2023.
    - The survey addressed the following questions:
        - To what extent are respondents/stakeholders aware of CORHA and its output?

        - How do respondents/stakeholders hear about CORHA resources?
        - How are respondents/stakeholders using (or not) CORHA resources and what would they like to see from CORHA in the future?
    - Results
        - Most respondents/stakeholders get information and resources from the CDC website most frequently.
        - Respondents/stakeholders hear about CORHA resources through CDC newsletters, colleagues, and CORHA newsletters.
        - Respondents/stakeholders seek out or engage with CORHA resources when they need to for a specific task or issue they are working on.
        - Respondents/stakeholders from clinical settings were least likely to engage with CORHA materials.
        - Barriers to use of CORHA materials included: lack of awareness of CORHA materials, preference for other/non-CORHA materials, limited time or capacity, lack of relevance of CORHA materials to their work, and too much text/information included in CORHA materials.
        - Respondents/stakeholders would like to see more setting-specific resources, disease-specific resources, checklists, guidelines, trainings, and videos.
- Next Steps/Action Items
    - The CORHA GC and membership will need to further explore the rich data available through these survey results.
    - CORHA might prioritize the development of materials which minimize noted barriers (e.g., too much text/information) and address expressed wants (e.g., setting- or disease-specific resources).
    - Lack of awareness of CORHA materials is still reported by survey respondents/stakeholders. CORHA should continue to explore opportunities for promotion. Meeting participants discussed the following opportunities:
        - CORHA member organizations expanding promotion of CORHA publications.
        - Increased engagement with CORHA during member organization meetings and conferences.
        - Highlight “use cases” of how stakeholders successfully utilized CORHA resources.
        - Explore potential for connection with other organizations such as American Clinical Laboratory Association (ACLA), LeadingAge, American Medical Informatics Association (AMIA), state hospital associations, patient and consumer groups.

1:00 – 1:30 pm: Review of COVID-19 Threshold Document

- Key Takeaways
    - Erin Epson (CSTE) led an optional 1:00 pm session addressing the Investigation/Reporting Thresholds and Outbreak Definitions for COVID-19 in Healthcare Settings document, which will include outdated content once COVID-19 community levels data are no longer published. This optional session started the discussion of how best to update this document.

- Next Steps/Action Items
    - Erin will lead a group (D&R workgroup or subset) in the document revisions, which will likely feature a new outbreak definition for long-term care facilities.

1:30 – 2:30 pm: Panel – Requirements for Reporting to Federal Entities

- Key Takeaways
    - Meeting participants had the opportunity to engage a two-person panel of CDC staff on topics related to reporting to federal entities. The panel consisted of:
        - Lauren Wattenmaker – Team Lead for Policy and Operations, NHSN, DHQP
        - Abigail Viall – Associate Director for CMS Strategic Relations, DHQP
    - During the response to COVID-19, there was close collaboration between CDC and CMS. CDC provided insight into appropriate healthcare and public health actions, and CMS established requirements through its Conditions of Participation (CoPs).
        - It was noted that the CoPs are not intended to address specific public health requirements like were leveraged in this response and that this approach will likely change in future emergencies.
    - Meeting participants expressed priorities from their organizations/perspectives, including the desire to make reported data available to protect patient safety, and the ask to provide funding associated with any mandates applying to healthcare facilities.

2:45 – 4:15 pm: Workgroup Breakout Sessions

- Policy Workgroup
    - Key Takeaways
        - This breakout session featured a presentation from Rebecca Stewart at Toronto Public Health. Rebecca provided an overview of Toronto's open data portal for sharing information on specific types of outbreaks (usually respiratory and enteric).
            - This portal includes type of outbreak, agent, start date, status (active or not), and some overview information. It does *not* include case counts, fatalities, etc. Rebecca noted that visitors to homes/facilities reference this tool.
        - The workgroup also continued discussion of federal reporting requirements.
        - The workgroup discussed application of the notifications framework for a recent outbreak in Seattle (and shortcomings of the resource).
    - Next Steps/Action Items
        - The workgroup is interested in reviewing federal requirements (e.g. CMS CoPs, FDA device rules). Grace to connect with Abigail Viall/check with ASTHO staff regarding state-by-state requirements.
- Detection and Response Workgroup
    - Key Takeaways
        - The workgroup reviewed products in development and addressed outstanding issues (e.g., inclusion of "key points" section.

        - The group discussed the larger project to redesign the CORHA website and how it might engage in that process or see that the workgroup's priorities are addressed (see next steps below).
    - Next Steps/Action Items
        - CSTE to bring in-progress reference pages to completion in light of decisions made by the workgroup during in-person meeting.
        - For pages where authors feel a "key points" section is useful, it will be added (optional/not all pages) at the end of the intro/background content and separate from the "featured resources" list.
        - As part of the website redesign process, the workgroup wishes to improve how the resources it develops are represented with the goal of increasing usability. They discussed the following potential steps:
            - On the resources landing page (currently with blue A to Z icons – page after redesign TBD), add a paragraph or blurb that calls out:
                - 1 - The unique perspective/strengths of CORHA (e.g., emphasize perspective at the intersection of public health and healthcare).
                - 2 – Who these materials are for – explicitly address target audiences and consider including previously (perhaps) overlooked audiences such as outpatient facilities.
                - 3 – How these materials can be used (e.g., how an HAI epi might turn to a specific CORHA page when they are beginning response to an outbreak).
        - The workgroup also discussed the potential for developing multimedia content including videos and audio recordings/podcasts that concisely address the three points above and showcase effective use of CORHA resources.
        - Revision of COVID-19 investigation/reporting thresholds and outbreak definitions document to commence. The workgroup to confirm that CMS no longer defines a nursing home outbreak as 1 facility-onset resident case.
- Laboratory Workgroup
    - Key Takeaways
        - The workgroup is in a period of reformation and attempting to finalize a roster in communication with the GC.
        - The workgroup charge was reviewed and deemed sufficient at least until the roster is finalized and larger group can review.
        - The workgroup discussed the toolkit they had been considering as their first and primary project. They are concerned about the scope of this unfunded project and may decide to pivot to smaller resources to supplement P&P chapter 6.
    - Next Steps/Action Items
        - Finalize list of workgroup members with GC by end of May.
        - Host workgroup kick-off call by end of June.
        - Initiate work around their selected project.

4:15 – 5:00 pm: Council Business Meeting

Key Takeaways

- The group discussed the proposed Chapter 6 draft which went to vote, engagement with CORHA newsletters, organization membership renewals, and engagement with stakeholders in meetings.

Next Steps/Action Items

- Vote on Chapter 6 was held online immediately following the business meeting and passed. Chapter 6 to be posting following remaining few edits.
- ASTHO to follow-up on outstanding organization CORHA membership renewals.
- Explore opportunities for increased engagement with CORHA during each membership organization's regular calls (e.g., CSTE's HAI/AR Subcommittee calls).

Day 2 – Wednesday, May 10

Attendance

In-Person

1. Kimberly McCullor (APHL)
2. Nicholas Moore (APHL)
3. Mary Alice Lavin (APIC)
4. Joe Perz (CDC)
5. Grace Lee (ASTHO)
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10. Tanya Hamburger (CDC)
11. Cal Ham (CDC)
12. Jackie Abramson (NACCHO)
13. Elizabeth Mothershed (CDC)

8:45 – 10:15 am: De-escalation Discussion

- Key Takeaways
    - When do we de-escalate? When do we declare an outbreak resolved?

        - Participants discussed scenarios in which a "2 incubation period" resolution threshold is appropriate and others in which it is not, or a return to a baseline prevalence (which itself needs to be confirmed as appropriate) is all that can be achieved.
    - How should we reflect de-escalation and outbreak resolution in CORHA materials?
        - Add more explicit references in products outside the P&P (even if those references just point to the P&P).
    - What new capacities or relationships developed as part of the response to COVID-19 do we want to see continue beyond the PHE?
        - Strengthening of local health department response capacity.
        - Regular communication between public health and healthcare.
        - Strong partnerships between LTCFs and public health (e.g., regular calls, established points of contact).
    - In addition to engagement with the discussion questions above, it was shared that we should consider whether CORHA has a role in helping reestablish trust in public health.
- Next Steps/Action Items
    - Explore opportunities to add "ending the investigation" or "outbreak resolution" content beyond chapters in the P&P (i.e., add to pathogen-specific materials)
        - This might come in the form of adding links to relevant sections of the P&P (i.e., 5.1.13.2) or, where a simplified approach is feasible, adding resolution criteria to the bottom of existing tables.

10:35 – 11:35 am: Updates to CDC's Interim Guidance for a Public Health Response to Contain Novel or Targeted Multidrug-resistant Organisms (MDROs)

- Key Takeaways
    - Cal Ham (CDC) provided an overview of CDC's recently revised MDRO Containment Guidance.
    - There was some discussion of challenges in implementing this guidance, such as lack of resources/funding to implement recommendations in healthcare facilities, and interruptions to patient discharge to long-term care facilities.
- Next Steps/Action Items
    - There may be a role for CORHA in identifying and compiling challenges in implementing this and related guidance from CDC (e.g., MDRO prevention guidance).

11:35 am – 12:00 pm: Closing Session

Key Takeaways

- Erica Washington (CSTE) shared how her jurisdiction relies on CORHA materials, like the COVID-19 thresholds/definitions document which informs ELC performance measure reporting. She noted that she wants CORHA to serve as a "guiding light" for other aspects of ELC.
- Waleed Javaid (SHEA) shared that CORHA might consider intervening in communications between healthcare facilities, such as during patient transfer.
- Lab partners emphasized the importance of continuing to engage the lab in these discussions, and in getting specimens to the lab for sequencing.

- There was broad discussion of how to continue promoting CORHA, as well as specific mention of necessary changes (i.e., getting the “marketing” label removed from CORHA newsletters).

Next Steps/Action Items

- ASTHO to explore removing the “marketing” tag from the CORHA Insider.
- In the revision process for the COVID-19 investigation/reporting thresholds and outbreak definitions document, consider implications for ELC reporting.