Development of CORHA High-Level Guidance for Outbreaks of HealthcareAssociated Infections and Antimicrobial Resistant Pathogens

Operational Workplan

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Overview

This workplan was developed to communicate plans for the completion of chapters and supplements of the CORHA high-level guidance, and includes timelines, prioritization, and key personnel. The consultant will keep CSTE appraised of the progress of each chapter and supplement, including barriers encountered. This workplan can be revised and updated as needed if additional detail is needed and/or if timeline needs to be changed based on workgroup or reviewer needs.

General Timeline for Each Chapter

The general process for chapter and supplement completion will involve a series of steps completed by the consultant and the author (which in some cases will also be the consultant). For some chapters or supplements, this process might need to be modified.

1) Outline (consultant)
    a) Develop outline
    b) Obtain feedback if needed
    c) Review/revise outline
    d) Finalize outline
2) Lit review (consultant with additional review as needed by author)
    a) Review medical literature
    b) Review health department guidance
3) Key informant interviews (author in collaboration with consultant)
    a) Determine who key informants are (consultant in collaboration with author)
    b) Schedule interviews (consultant)
    c) Complete interviews (consultant in collaboration with author)
    d) Incorporate information into outline and chapter as per next two steps (author)
4) Revise outline as needed (author or consultant)
5) Write chapter, including appendices (author)
6) Review (selected reviewers or workgroup, including author and consultant)
    a) Determine reviewers (consultant in collaboration with author)
    b) Invite reviewers, send draft to reviewers with instructions and deadlines (consultant)
    c) Schedule call(s) with reviewers if needed (consultant)

    d) Obtain reviewer feedback (author)
7) Revise chapter (author)
    a) Incorporate reviewer feedback (author)
8) Repeat steps review/revise as needed (author in collaboration with consultant)
9) Miscellaneous pieces:
    a) Compile reference list (consultant in collaboration with author)
    b) Identify acknowledgments (consultant in collaboration with author)
    c) Confirm appendices, which should be written as part of the chapter (consultant)
10) Review and final revisions (consultant)
11) Submit to the CORHA Governance Committee

Progress for each of these steps will be tracked via spreadsheets, which can be shared with CSTE upon request.

Chapter Identification

Chapters identified by CORHA to be completed for the high-level guidance include the following:

Chapter 1: Overview of the CORHA HLG
Chapter 2: Fundamental Concepts of HAI/AR Outbreak Response
Chapter 3: Planning and Preparation for HAI/AR Outbreak Response
Chapter 4: HAI/AR Outbreak Detection and Reporting
Chapter 5: Investigation and Control of HAI/AR Outbreaks
Chapter 6: Laboratory Best Practices in Support of HAI/AR Outbreak Response
Chapter 7: Special Consideration for Multi-Jurisdictional Outbreaks
Chapter 8: Performance Indicators for HAI/AR Outbreak Response
Chapter 9: Legal Considerations for Reporting, Investigation and Control of HAI/AR Outbreaks
Supplement A: Communications, Media, Public Reporting, Notification and Disclosure
Supplement B: Medical Product Investigations
Supplement C: Infection Control Breach Investigations

The consultant will follow this outline, and will communicate to CSTE if a chapter or supplement needs to be added or moved. Two possible minor changes identified by the consultant to date include the possibility of modifying the title of Chapter 7 to “Special Consideration for Multi-Facility and Multi-Jurisdictional Outbreaks,” and changing Supplement A to a chapter just prior to performance indicators. These suggested changes will be suggested to the Governance Committee for approval. No major deficits in chapter structure are identified as of the time of this initial operational workplan.

Key Personnel

Key personnel to be involved in the completion of the CORHA high-level guidance include the following: authors, key informants, and reviewers. Authors will work with the consultant to draft

chapters and supplements; key informants will be selected to be interviewed by the consultant and author to gather information to ensure a complete outline and identify key details for the written chapter/supplement; reviewers will be selected to critically edit the draft version. In some cases the reviewers will be CORHA workgroups already established. Whenever possible, the authors and reviewers will be from CORHA, either CORHA members or workgroup members. Specific personnel will be chosen based on input from the CORHA Governance Committee and CORHA workgroups.

	Author(s)	Key Informants	Reviewers
Chapter 1	TBD (Might be Wendy Bamberg)	N/A	TBD
Chapter 2	Wendy Bamberg	CDC staff, APIC/SHEA CORHA members	TBD
Chapter 3	Janet Glowitz, Isaac Benowitz, and Rachel Stricoff	N/A (draft already completed)	Wendy Bamberg, CDC staff
Chapter 4	Wendy Bamberg	CDC staff, state and local health department staff TBD	Workgroup A
Chapter 5	Joe Perz, Rachel Stricoff	N/A (draft already completed)	Wendy Bamberg, Workgroup B
Chapter 6	Lab Workgroup	Lab Workgroup to identify	Lab Workgroup
Chapter 7	Wendy Bamberg with possible co-author (CDC or state from CORHA)	CDC staff, state and local health department staff TBD	TBD
Chapter 8	Wendy Bamberg with possible co-author (CDC staff)	CDC staff, state and local health department staff TBD, APIC/SHEA CORHA members	CDC staff, APIC/SHEA CORHA members; possibly CORHA workgroups
Chapter 9	Policy Workgroup	Policy Workgroup to help identify	Policy Workgroup
Supplement A	Policy Workgroup	Policy Workgroup to help identify	Policy Workgroup
Supplement B	CDC staff, FDA staff (CORHA-affiliated)	CDC staff, FDA staff, state and local health department staff TBD	CDC staff, FDA staff (CORHA-affiliated)
Supplement C	CDC staff	CDC staff, state and local health department staff TBD	TBD

Chapter Prioritization and Timeline

Prioritization of chapters and supplements was determined using several factors: (1) current status of completion, (2) availability of authors and other key personnel, (3) estimated workload to complete. The timeline for chapter and supplement completion is as follows, noting that the timeline will be re-assessed frequently and modified as needed to ensure accuracy and maximum efficiency. Note that the timeline is more detailed at the beginning and more general as time passes to allow for flexibility as needed.

Detailed timeline July 22 through September 30, 2019:

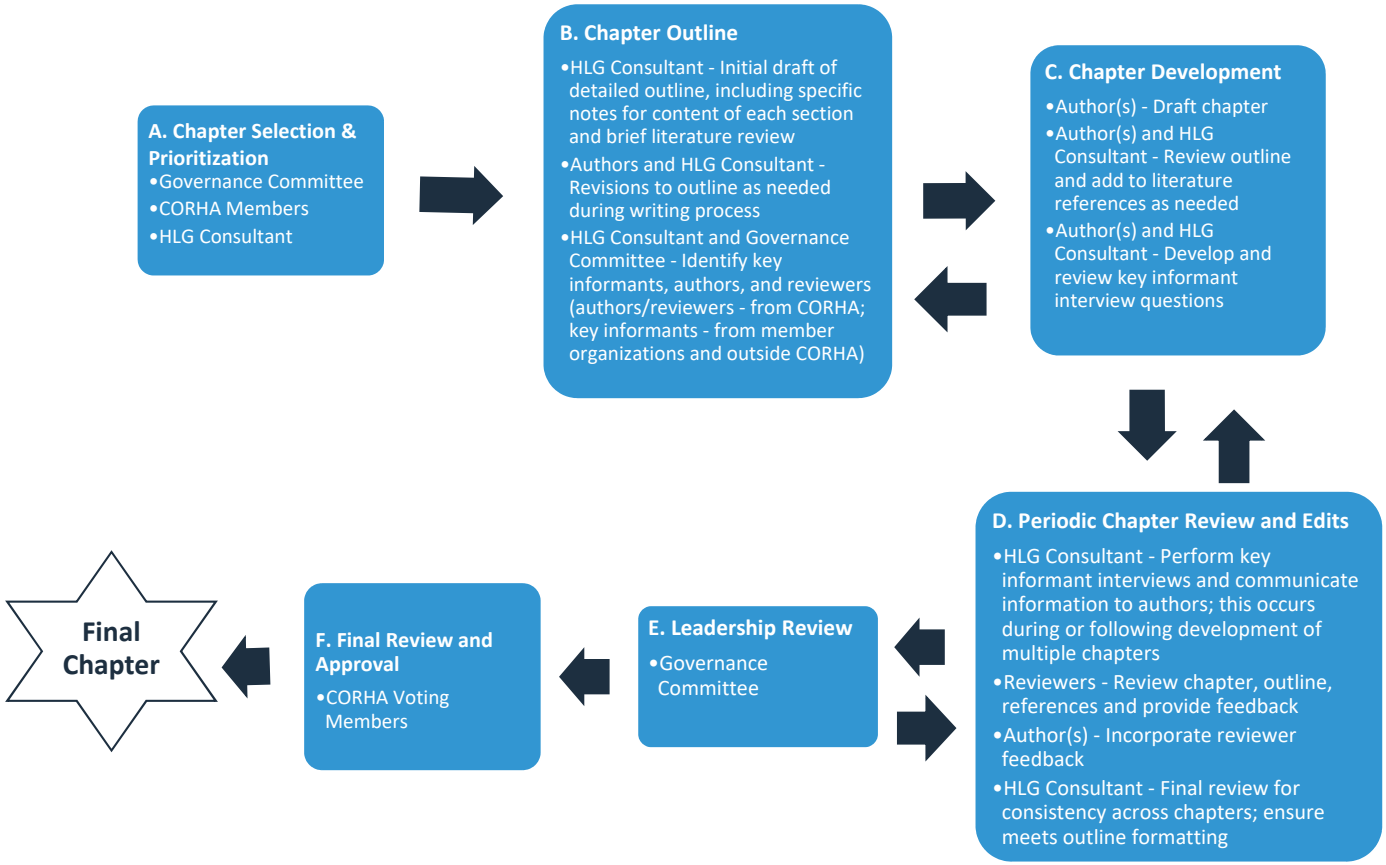
Week of:	July 22	July 29	August 5	August 12	August 19	August 26	September 2	September 9	September 16	September 23	September 30
Planning/process	(1) Come up with plan for key personnel; (2) Come up with plan for chapter drafting process; (3) Develop format for operational workplan; (4) Finalize this timeline through week of August 26 using the plan for chapter drafting	(1) Draft operational workplan	(1) Revise operational workplan	(1) Send final operational workplan to CSTE		(1) Develop plan to track acknowledgments; (2) Re-evaluate and revise this timeline as needed; (3) Develop plan to identify topics for index with each chapter (this might be at the end, so can move if needed; (4) Develop plan for reference list			(1) Re-evaluate and revise this timeline as needed, including adding additional weeks		(1) Save for catch-up activities
Outline		(1) Chapter 2 outline draft	(1) Chapter 6 outline draft	(1) Finalize outlines of Chapters 2 and 6; (2) Draft outlines of Chapters 7 and 8; (3) Determine if outlines should go to Joe	(1) Review and revise outline of Chapter 4; (2) Send outline drafts of 2, 6, 7, 8 to CSTE		(1) Draft outlines of Chapter 9 and Supplement A	(1) Draft outlines of Supplements B and C	(1) Send outlines of Chapter 9 and Supplements A, B, and C to CSTE		
Literature review		(1) Literature and HD review of Chapter 5; (2) Literature and HD review of Chapter 2	(1) Literature and HD review of Chapter 3; (2) Literature and HD review of Chapter 6	(1) Literature and HD review of Chapter 7; (2) Literature and HD review of Chapter 8	(1) Literature and HD review of Chapter 4 topics		(1) Literature and HD review of Chapter 9 and Supplement A	(1) Literature and HD review of Supplements B and C			
Identification of Key Personnel				(1) Firm up key personnel for chapters 2, 3, 4, 5, 6, 7, 8				(1) Identify key personnel for Chapter 9 and Supplements A, B, C			
Key Informant Interviews					(1) Perform key informant interviews for Chapter 4	(1) Perform key informant interviews for Chapter 2	(1) Perform key informant interviews for Chapter 8				
Writing					(1) Write draft of Chapter 4	(1) Revise Chapter 4 draft	(1) Finalize Chapter 4 draft; (2) Send Chapter 4 draft to CSTE; (3) Get Chapter 6 outline to authors		(1) Begin writing Chapter 2	(1) Revise Chapter 2 draft	
Review (Includes Workgroup)	(1) Identify preliminary list (by organization type) of authors, SMEs, reviewers			(1) Send Chapter 5 to WG-B for review	(1) Send Chapter 3 to reviewers as identified			(1) Send Chapter 4 to SMEs and reviewers	(1) Get outlines to authors (Chapter 9, Supplements A, B, and C)		
Revisions/Editing	(1) Read Chapter 5; (2) Begin edits of Chapter 5	(1) Edit Chapter 5	(1) Read Chapter 3; (2) Edit Chapter 3	(1) Chapters 3 and 5 edits complete; (2) Send 3 and 5 chapters to CSTE					(1) Review edits from Chapter 3 SMEs and reviewers; (2) Review edits from Chapter 5 SMEs and reviewers;	(1) Incorporate edits from Chapters 3 and 5 SMEs and reviewers; (2) Clarify any edits from Chapters 3 and 5 as needed; (3) Complete final drafts of Chapters 3 and 5	
Extra pieces		(1) Compile reference list for Chapter 5; (2) Identify/confirm any appendices needed for Chapter 5	(1) Compile reference list for Chapter 3; (2) Identify/confirm any appendices needed for Chapter 3		(1) Compile acknowledgments, references for Chapters 3, 4, 5 if not done					(1) Begin compiling acknowledgments, references for Chapters 2 and 8	

General timeline October 28 through July 31, 2020:

November 2019	• Complete drafts of Chapters 2, 7, and 8 • Review process complete with final draft of Chapter 4

	• Draft in progress of Chapter 6
December 2019	• Review process complete with final drafts of Chapters 2 and 8 • Review process in progress for Chapter 7 • Drafts of Chapters 6 and 9 and Supplements A, B, C complete and ready for review (dependent on workgroup and author progress)
Jan. 1–July 31, 2020	Depending on funding and priorities, consultant might assist with the following; timeline as yet undetermined • Review and edit Chapters 6, 7, 9 and/or Supplements A, B, C • Author/co-author Chapter 1 • Support work to complete supporting sections (preface, acknowledgements, appendices, index, references) • Provide support to CSTE and CORHA Communications Taskforce in editing/branding

Detailed HLG Chapter Development and Review Process – Updated August 6, 2019



Commented [WB1]: Questions for the GC:
1) Who identifies authors/key informants/reviewers? Do these folks need to be vetted by GC? Who invites them to participate?
2) Does the GC need to review the chapter outline prior to the chapter writing?
3) Ok with authors/reviewers being from CORHA, and key informants can be within or outside of CORHA?

Key differences in this version:
1) No writing team. Few (1-3) reviewers instead of a review team.
2) Use key informant interviews to gather broader perspective instead of writing/reviewing teams with conference calls. Key informant interviews will occur across the chapters (e.g., series of questions for a particular informant type will include questions from multiple chapters).

Chapter 1: Overview of the CORHA High-Level Guidance
Chapter 2: Fundamental Concepts of Public Health Surveillance of Healthcare-Associated Infections and Antimicrobial Resistant Pathogens
Chapter 3: Planning and Preparation for Healthcare-Associated Infection and Antimicrobial Resistant Pathogen Outbreak Response
Chapter 4: Healthcare-Associated Infection and Antimicrobial Resistant Pathogen Outbreak Detection and Reporting
Chapter 5: Investigation and Control of Healthcare-Associated Infection and Antimicrobial Resistant Pathogen Outbreaks
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Supplement A: Communications, Media, Public Reporting, Notification and Disclosure
Supplement B: Medical Product Investigations
Supplement C: Infection Control Breach Investigations

Commented [1]: Logically to me it makes sense to have these two (Chapter 9 and Supplement A) as chapters prior to "performance indicators". Rearrange order?