CDC Winnable Battles Healthcare-Associated Infections and Antimicrobial Resistance

Jeff Hageman, MHS
Associate Director for Strategy and Integration
Division of Healthcare Quality Promotion



Healthcare-Associated Infections (HAIs)

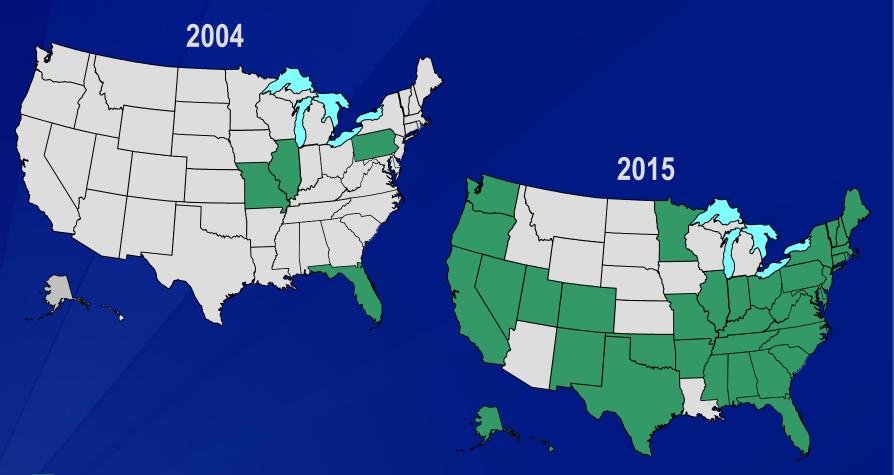
- Infections that patients acquire during the course of receiving treatment for other conditions within a healthcare setting
- HAIs occur across healthcare settings (e.g., long-term care, outpatient)
- Many infections are caused by resistant microorganisms
 - Carbapenem-resistant Enterobacteriaceae (CRE)
 - Methicillin-resistant Staphylococcus aureus (MRSA)
- State HAI Prevention Programs established in 2009

Culture Change

"Many infections are inevitable; some might be preventable"

"Each infection is potentially preventable, unless proven otherwise"

States with Public Reporting Policies for Healthcare-Associated Infections (HAIs)



States required to publicly report some healthcareassociated infections

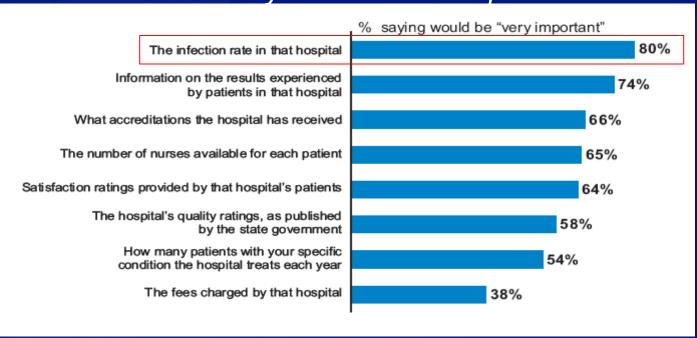
Increasing Transparency: CDC data for State and Federal initiatives



Lower SIRs are better. A score of (0) - meaning no CLABSIs - is best.

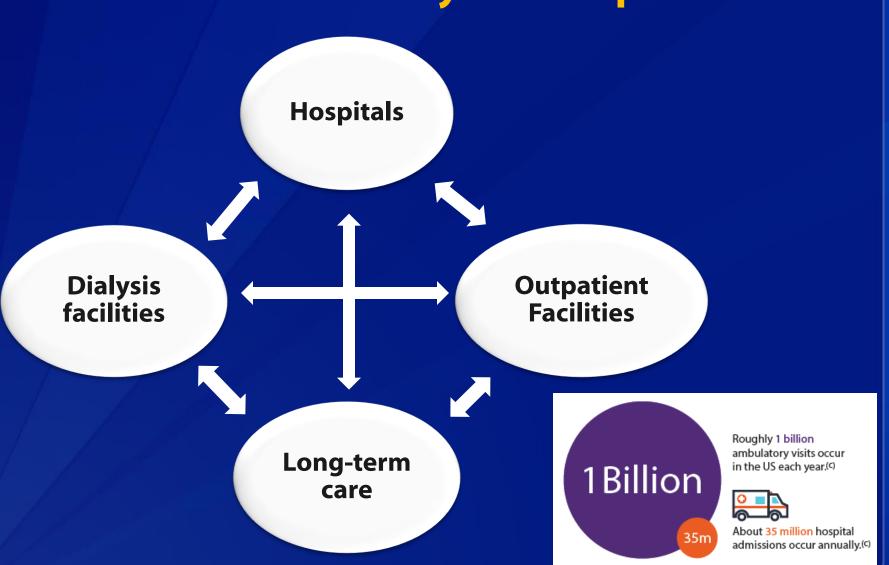
Most Important Information to Consumers Choosing a Hospital

How important would that information be to you personally the next time you choose a hospital?



Source: Blue Cross Blue Shield of Massachusetts. Looking for Answers: How consumers make health care decisions in Massachusetts, a survey of Massachusetts adults. Presented at the *High-Performance Health Care: What It Takes* Conference, April 2, 2007. Available at: http://www.bluecrossma.com/common/en_US/pdfs/aboutUs/consumers-make-health-care-decisions-in-ma.pdf.

Healthcare, infections, and antibiotic resistance have moved beyond hospitals



http://www.npsf.org/?page=freefromhar7

Outpatient Settings

- Provide healthcare to patients who do not remain overnight
- □ Increasingly complex procedures, vulnerable patients
 - Each year more than one million cancer patients receive outpatient chemotherapy and/or radiation therapy
- Expansion of services without parallel increases in attention to and oversight of infection control
 - Many outpatient facilities are operated independently and are not accredited, CMS-certified, or state-licensed
- □ Lack systematic surveillance to detect infections

Seattle Children's warns of potential infection risk

Originally published August 26, 2015 at 2:59 pm | Updated August 27, 2015 at 6:15 pm



Seattle Children's CEO Jeff Sperring, third from left, at a press conference Wednesday in Seattle, addresses sterilization concerns for equipment used at Seattle Children's Believue campus that could affect. as many... (Bettina Hansen / The Seattle Times) More





Seattle Childrens Hospital asking 12,000 patients to get Hep B,C &HIV blood tests- more @ 4:58 kiro.tv/LiveNews

7:43 PM - 26 Aug 2015

- Breaches in cleaning and sterilization of surgical instruments, and other errors related to device reprocessing
- Families of 13,700 pediatric surgery patients and 1,600 clinic or urgent care patients were notified

Stay Informed

Safety Issue Information: Bellevue Clinic and Surgery Center







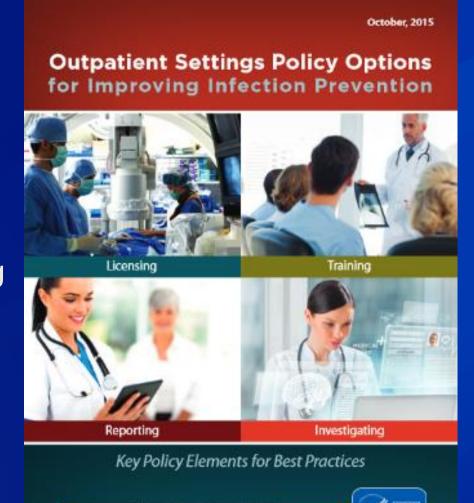




Outpatient Settings Policy Options

Consider more effective and proactive oversight of outpatient facilities through:

- (1) Facility licensing/accreditation
- (2) Provider training, licensing and certification
- (3) Reporting requirements
- (4) Investigation authorities



http://www.cdc.gov/hai/prevent/policy.html

National Action Plan for Combating Antibiotic-Resistant Bacteria (CARB)

National Action Plan for CARB called for a CDC response to:

- Detect and respond to resistant pathogens
- Prevent spread of resistant infections
- Encourage innovation for new strategies

Steps needed to meet CARB goals:

- Build state capacity
- Expand nation-wide lab capacity
- Expand efforts to address community AR threats



Modern medicine at risk

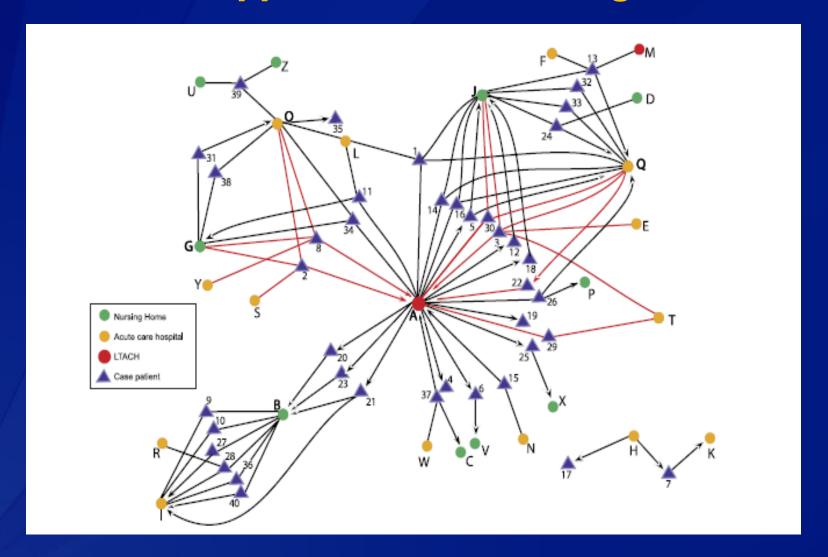
- Loss of effective antibiotic treatment could make routine infections deadly
 - Pneumonia
 - Urinary tract infections
 - Wound infections
- Patients who receive specialized care will be at highest risk
 - Cancer chemotherapy
 - Complex surgery
 - Joint replacements
 - Organ transplants
 - Chronic conditions (e.g., rheumatoid arthritis)
 - Dialysis

Cancer Treatment

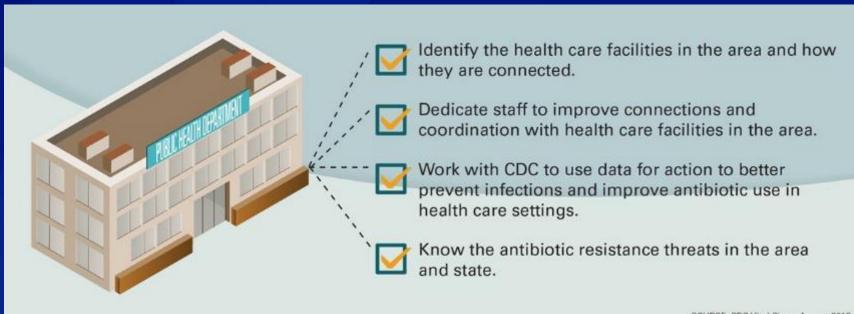
- >600,000 patients receive chemotherapy¹
- ~60,000 cancer patients will be hospitalized with neutropenia and infections²
- 1 in 14 of these will die from this complication²

¹Kantar Health, Cancer Impact ²Caggiano et al, 2005, Cancer

Coordinated Approach to Combatting Resistance



Public Health is in key position to work with healthcare partners and lead coordination



HAI/AR Priorities

- Combat Antimicrobial Resistance (AR)
 - Improve antibiotic use
 - Decrease AR infections (*Clostridium difficile*, CRE, MRSA)
 - Coordinated approach across healthcare
- Decrease device- and procedure-related infections (CLABSI, CAUTI, SSI)
- Working with states and other partners to prevent HAIs and AR infections

Thank You

JHageman@cdc.gov

For more information please contact Centers for Disease Control and Prevention

1600 Clifton Road NE, Atlanta, GA 30333

Telephone: 1-800-CDC-INFO (232-4636)/TTY: 1-888-232-6348

Visit: www.cdc.gov | Contact CDC at: 1-800-CDC-INFO or www.cdc.gov/info

The findings and conclusions in this report are those of the authors and do not necessarily represent the official position of the Centers for Disease Control and Prevention.

