

Minnesota Initiatives and Tools for Preventing Healthcare-Associated Infections (HAIs) and Antimicrobial Resistance

SEPTEMBER 2018

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INTRODUCTION

Many tools and initiatives exist designed to help efforts to prevent healthcare-associated infections (HAI) and antimicrobial resistance (AR). Links to many national and international resources are available on the Minnesota Department of Health (MDH) [HAI website \(www.health.state.mn.us/divs/idepc/dtopics/hai/index.html\)](http://www.health.state.mn.us/divs/idepc/dtopics/hai/index.html) and [One Health Antibiotic Stewardship website \(www.health.state.mn.us/onehealthabx/index.html\)](http://www.health.state.mn.us/onehealthabx/index.html). This document provides a summary description of many such available resources specific to Minnesota.

The title of each resource includes an indication for which setting(s) it is intended: acute care, long-term care, ambulatory, or all.

STATE INFRASTRUCTURE PLANNING FOR HAI SURVEILLANCE, PREVENTION, AND CONTROL

Minnesota HAI Prevention Advisory Group (All)

Who: State and regional partner organizations that have roles in HAI and antimicrobial resistance prevention

What: Meets 3 or 4 times per year in person or by conference call and guides the state's action plan for preventing HAIs, reducing antimicrobial resistance, using data for prevention, improving preparedness for high consequence infectious disease, and identifying specific targets for prevention

Update: Conference calls were held in March, April, and July 2018. An in-person meeting will be held in October 2018. Laboratory representatives including the MDH Public Health Laboratory were added recently as were the Minnesota Boards of Nursing, Dentistry, and Pharmacy.

Lead Organization: Minnesota Department of Health

Contact Information: 651-201-5414 or email Health.HAI@state.mn.us

Collaborative HAI Network (CHAIN) (All)

Who: CHAIN is the umbrella organization that ties all Minnesota HAI and AR prevention activities together. Charter members: Association of Professionals in Infection Control and Epidemiology – Minnesota Chapter (APIC MN), Minnesota Department of Health (MDH), Minnesota Hospital Association (MHA), and Stratis Health. Current members include quality improvement organizations and professional associations representing the spectrum of health care.

What: CHAIN coordinates across the continuum of health care delivery to prevent harm from infections acquired in the process of care and combats antibiotic resistance by leveraging collective capacity and resources, integrating and aligning related initiatives, and breaking down silos and barriers to implementation of best practices. CHAIN accomplishes this through five groups: the CHAIN Leadership Council, the CHAIN Coordinating Committee, CHAIN Acute Care Workgroup, CHAIN Long-term Care and Community Workgroup, and the CHAIN Outpatient Workgroup

Update: In 2017, CHAIN broadened its scope and expanded its membership to include the spectrum of health care. The three new workgroups listed above were established to support the effort. The CHAIN Leaders' Council

meets quarterly to provide guidance for the other groups. The CHAIN Coordinating Committee and workgroups meet monthly. A half-day CHAIN Fall Conference is held each September and CHAIN Awards for Excellence in Infection Prevention are presented at the conference to two teams in recognition of their efforts and success in reducing infections and antimicrobial resistance.

Lead Organizations: APIC MN, MDH, MHA, Stratis Health

Opportunities: The 2018 CHAIN fall Conference provides an opportunity to learn about the latest evidence-based approaches for reducing and preventing healthcare-associated infections (HAIs) in Minnesota. For further information and to register, go to [CHAIN Conference \(www.mnreducinghais.org/conference/index.html\)](http://www.mnreducinghais.org/conference/index.html). Nominations for the 2018 CHAIN Award for Excellence are closed. Instructions for nominations usually are posted on [CHAIN \(www.mnreducinghais.org/\)](http://www.mnreducinghais.org/) in May with nomination submissions due in early August.

Contact Information: Call Stratis Health: 952-853-8503 or use the “Contact Us” email link at www.mnreducinghais.org

Minnesota One Health Antibiotic Stewardship Collaborative (All)

Who: A group of over 40 agencies and organizations representing human, animal, and environment health

What: The group has developed a 5-year strategic plan and, by work group activity, conducts activities to meet strategic plan goals. The Collaborative holds an annual in-person meeting with all members, and each work group holds quarterly calls to move specific activities forward. The foci for the four work groups are: One Health antibiotic stewardship public and professional engagement, advancing stewardship in healthcare settings, advancing stewardship in animal health, and understanding our collective “antibiotic footprint” on Minnesota’s natural and built environments.

Update: The Collaborative held its first annual meeting in December 2016, and work groups have met quarterly since then. Collaborative members volunteer at a Minnesota State Fair booth, engaging with the public on antibiotic use and resistance topics. Structure and logistics of the Minnesota Antibiotic Stewardship Honor Roll for Acute Care (described in more detail later) were outlined and approved by the Collaborative. To maximize an understanding of One Health antibiotic stewardship, cross-disciplinary antibiotic stewardship exchanges have been held at University of Minnesota Medical Center, Wolf Creek Dairy, and the Metropolitan wastewater treatment plant, highlighting day-to-day antibiotic stewardship practices and challenges. Three field exchanges will be held each year. The [One Health Antibiotic Stewardship \(www.health.state.mn.us/onehealthabx/\)](http://www.health.state.mn.us/onehealthabx/), hosted by MDH, is Minnesota’s central location for antimicrobial stewardship materials. All are welcome to sign up for the Collaborative’s monthly e-newsletter, currently with over 1,700 subscribers, to stay informed of updates and resources related to stewardship.

Lead Organization: Minnesota Department of Health

Contact Information: Call 651-201-5414 or email Health.Stewardship@state.mn.us

SURVEILLANCE, DETECTION, REPORTING, AND RESPONSE

Outbreak Response (All)

Who: MDH HAI and Antimicrobial Resistance (AR) Unit and disease specific units in the Infectious Disease Epidemiology, Prevention and Control (IDEPC) Division

What: The HAI & AR Unit and other units in the MDH IDEPC Division conduct ongoing surveillance for disease outbreaks in the community and health care settings. Health care facilities are encouraged to report outbreaks and clusters to MDH. The HAI & AR Unit responds to HAI & AR outbreaks and infection control breaches utilizing the investigation and response expertise of the division medical director, HAI unit epidemiologists, Infection Control Assessment and Response (ICAR) infection preventionists, and the MDH Public Health Laboratory (PHL) as needed. Support for certain disease outbreaks in health care settings is provided by disease specific units (e.g., influenza, norovirus).

Update: HAI & AR Unit epidemiologists and infection preventionists are available to provide support to health care settings in investigating and responding to HAI outbreaks, infection control breaches, and concerns regarding contaminated products. MDH is also able to consult with CDC when needed.

Lead organization: Minnesota Department of Health

Contact Information: Call 651-201-5414 or 1-877-676-5414 to report and/or seek assistance with an outbreak, infection control breach, or possible contaminated product or device.

Statewide Surveillance of MDROs and *Clostridium difficile* (All)

The Minnesota Department of Health epidemiologists conduct surveillance for many multidrug resistant organisms (MDROs) and *Clostridium difficile*. Health care facilities, the MDH Public Health Laboratory (PHL) and laboratories statewide report cases. Surveillance for CRE, CRA, *C. difficile*, MRSA, Candidemia, and *Candida auris* is essential for identifying and reporting isolates with resistance mechanisms of concern to health care facilities and the CDC, in order to facilitate effective prevention and control strategies. The following sections describe current surveillance activities for each MDRO.

Statewide Surveillance of CRE

Who: Minnesota health care settings and laboratories

What: Carbapenem-resistant Enterobacteriaceae (CRE) became reportable statewide in Minnesota on January 1, 2016. CRE isolated from any body site is to be reported and its isolate submitted to the MDH Public Health Laboratory (PHL). The PHL tests all isolates for carbapenemase production. Epidemiologists follow up with the relevant health care facilities for infection control purposes whenever carbapenemase-producing (CP)-CRE isolates are identified.

Update: The most recent surveillance report can be found in the [Disease Control Newsletter \(www.health.state.mn.us/divs/idepc/newsletters/dcn/index.html\)](http://www.health.state.mn.us/divs/idepc/newsletters/dcn/index.html).

Lead Organization: Minnesota Department of Health

Contact Information: Call 651-201-5414 or email Health.HAI@state.mn.us

MuGSI Surveillance of CRE and CRA *

Who: Sentinel sites in Hennepin and Ramsey Counties participating in the Emerging Infections Program Multi-site Gram-negative Surveillance Initiative (MuGSI)

What: Minnesota MuGSI sites submit case reports and isolates from sterile sites and urine that are carbapenem resistant (CR) for 6 organisms to MDH: *E.coli*, *Enterobacter cloacae*, *Enterobacter aerogenes*, *Klebsiella pneumoniae*, *Klebsiella oxytoca*, and *Acinetobacter baumannii*.

Update: The most recent surveillance report can be found in [Disease Control Newsletter \(www.health.state.mn.us/divs/idepc/newsletters/dcn/index.html\)](http://www.health.state.mn.us/divs/idepc/newsletters/dcn/index.html).

Lead Organization: Minnesota Department of Health

Contact Information: Call 651-201-5414 or email Health.HAI@state.mn.us

Sentinel Surveillance for *C. difficile* infections (CDI)*

Who: Sentinel sites in Minnesota participating in the Emerging Infections Program *Clostridium difficile* surveillance

What: Laboratories in the 5-county catchment area (Benton, Morrison, Olmsted, Stearns, and Todd) report all cases and submit related specimens for patients residing in the catchment area that test positive for *C. difficile*.

Update: The most recent surveillance report can be found in the [Disease Control Newsletter \(www.health.state.mn.us/divs/idepc/newsletters/dcn/index.html\)](http://www.health.state.mn.us/divs/idepc/newsletters/dcn/index.html).

Lead Organization: Minnesota Department of Health

Contact Information: Call 651-201-5414

Staphylococcus aureus surveillance (includes MRSA)

Who: Health care facilities and laboratories throughout the state for vancomycin-intermediate *Staphylococcus aureus* (VISA) and vancomycin-resistant *Staphylococcus aureus* (VRSA), and death or critical illness due to community-associated *Staphylococcus aureus* in previously healthy individuals. Sentinel surveillance for invasive *Staphylococcus aureus** including MRSA is in Hennepin and Ramsey Counties only.

What: Case report forms and isolates submitted for cases as described above.

Update: The most recent surveillance report can be found in the [Disease Control Newsletter \(www.health.state.mn.us/divs/idepc/newsletters/dcn/index.html\)](http://www.health.state.mn.us/divs/idepc/newsletters/dcn/index.html).

Lead Organization: Minnesota Department of Health

Contact Information: Call 651-201-5414

Surveillance for Candidemia* and *Candida auris*

Who: Health care facilities and laboratories statewide for possible *C. auris*; 7-county metropolitan area for Candidemia

What: Case report forms and specimens are to be submitted for any possible *C. auris* isolates found statewide. Case report forms and specimens are to be submitted for any *Candida spp.* isolated from blood for residents of the 7-county metropolitan area.

Update: *Candida auris* is a new, emerging, highly resistant species of *Candida* that has not been reported in Minnesota as of August 2018.

Lead Organization: Minnesota Department of Health

Contact Information: Call 651-201-5414

Antimicrobial Resistance Laboratory Network (ARLN) (All)

Who: Health care facilities and laboratories statewide seeking to identify and report isolates with resistance mechanisms of concern to health care facilities, CDC, and MDH in order to facilitate effective prevention and control strategies. The MDH Public Health Laboratory (PHL) is 1 of 8 ARLN laboratories in the United States. The MDH ARLN serves Minnesota, North Dakota, South Dakota, Iowa, Nebraska, Kansas, Missouri, Arkansas, and Oklahoma.

What: The ARLN was established to close the gap between capabilities and data needed to combat antimicrobial resistance by creating comprehensive laboratory capacity and using cutting edge technology to detect and track new resistance. The resulting data will be used to identify how transmission is occurring at local levels and supports outbreak response.

Update: ARLN regional laboratories were designated in mid-2016 and much of the work in year one was focused on getting the laboratories and networks established, hiring staff, and providing training. The Minnesota ARLN lab is identifying and reporting isolates with resistance mechanisms of concern to health care facilities, CDC, and the respective state health departments in order to facilitate effective prevention and control strategies. Capacity continues to grow as ARLN laboratories are increasingly able to provide more antimicrobial resistance testing and isolate characterization for health care facilities across the country. Additionally, ARLN laboratories are continuing to build capacity to perform surveillance cultures for organisms of public health concern.

Lead Organization: Minnesota Department of Health, Public Health Laboratory

Contact Information: If your facility or laboratory is seeking assistance to further characterize an MDRO isolate or process screening/surveillance cultures, please contact the public health laboratory at 651-201-5200 or Infection Disease Epidemiology at 651-201-5414 or 1-877-676-5414.

High Consequence Infectious Disease (HCID) Toolbox for Frontline Health Care Facilities (Acute Care)

Who: Frontline Health Care Facilities

What: Provides ready-to-use tools for frontline facilities to prepare to respond to patients who may have a high consequence infectious disease (HCID). Helps facilities meet CMS emergency preparedness regulatory requirements for training and testing programs. Helps facilities develop a multi-year plan for HCID education and exercises. Incorporates standard infection prevention concepts into training and exercises.

Learn More: www.health.state.mn.us/divs/idepc/dtopics/hcid/index.html

Lead Organization Minnesota Department of Health

Contact Information: Email: health.icar@state.mn.us

Statewide Antibigram of Select Pathogens (All)

Who: For prescribers, pharmacists, laboratorians, and health care professionals in Minnesota

What: An annual summary of antimicrobial susceptibilities for isolates of selected bacterial pathogens submitted to the MDH Public Health Laboratory

Update: Antibigrams for the previous year are generally available by mid-year and posted on the MDH website, www.health.state.mn.us/divs/idepc/dtopics/antibioticresistance/abx/index.html.

Lead Organization: Minnesota Department of Health

Contact Information: Call 651-201-5414 or email Health.Stewardship@state.mn.us

National Healthcare Safety Network (NHSN) (Acute Care, Long-Term Care)

The National Healthcare Safety Network (NHSN) is a web-based tool developed and supported by the CDC for collecting and reporting healthcare-associated infections, antimicrobial resistance, antimicrobial use and a few other healthcare related measures. As its use has grown exponentially, NHSN has become a valuable national resource for tracking HAIs and antimicrobial use and for use in healthcare quality improvement initiatives in acute and long-term care settings. Following are descriptions of some resources available in Minnesota to support the use of NHSN and/or to utilize NHSN for quality improvement purposes.

National Healthcare Safety Network (NHSN)/ NHSN Validation (Acute Care)

Who: MDH HAI & AR Unit epidemiology staff

What: Through the data use agreement with CDC, MDH has access to NHSN data (data required to be reported by prospective payer hospitals to CMS for public reporting) for Minnesota acute care hospitals. The data are used to track statewide progress in reducing device-related HAIs, surgical site infections, methicillin-resistant *Staphylococcus aureus* (MRSA) and *C. difficile* infections and for identifying facilities that may benefit from individual attention to reduce infections.

Update: As one means to assure accurate data, MDH generates and distributes quarterly data quality reports to alert facilities to findings that suggest there may errors in their reporting.

Lead organization: Minnesota Department of Health

Contact Information: Call 651-201-5414 or email Health.HAI@state.mn.us

NHSN Antimicrobial Use and Resistance (AUR) Module (Acute Care)

Who: MDH HAI & AR Unit staff and Minnesota One Health Antibiotic Stewardship and hospitals interested in reporting antimicrobial use and resistance in NHSN.

What: The AUR module is a NHSN module designed to track hospital antimicrobial use and/or antimicrobial resistant organisms. It involves automated submission of data elements queried from hospital electronic health records. Once submitted, hospitals can create detailed reports and also compare their results to national benchmarks. Adopting reporting through this system is technically challenging and expected to be expensive for many hospitals. MDH provides support throughout the process. MDH will be able to access to this data when submitted, through our NHSN DUA. MDH HAI & AR Unit promote the use of this module for antibiotic use (AU).

Update: As of August 2018, there are three Minnesota hospitals submitting AU data. MDH provides information about the features of the AUR module to staff involved in hospital antibiotic stewardship. We want to be sure that they understand the advantages of antibiotic use reporting through this system and provide support for education and training of hospital staff. We promote the use of the AUR module at conferences and through presentations.

Lead Organization: Minnesota Department of Health

Contact Information: Call 651-201-5414 or email Health.HAI@state.mn.us

NHSN Support for Skilled Nursing Facilities (Long-term Care)

Who: MDH HAI and Antimicrobial Resistance (AR) Unit supports long-term care facilities in efforts to report healthcare associated infections in NHSN.

What: MDH encourages skilled nursing facilities to participate in reporting *Clostridium difficile* Lab ID Events and urinary tract infections in NHSN. MDH and Stratis Health [part of Lake Superior Quality Improvement Network (QIN)] have each formed a group in NHSN. The QIN and MDH are coordinating plans to use the data. The QIN plans to use the data to track rates to drive quality improvement efforts. MDH plans to perform quality checks on the data and use the data in the Local Collaborative for Antibiotic Stewardship (see PREVENTION) and the Infection Control Assessment and Response (ICAR) team to assist in targeting improvement efforts.

Update: MDH has developed a *Clostridium difficile* toolkit for long-term care available on the MDH website www.health.state.mn.us/divs/idepc/diseases/cdiff/hcp/toolkit/index.html and is promoting it through APIC, Stratis Health, Leading Age, and Care Providers. MDH offers one on one support for enrolling and reporting in NHSN. Plans are underway to provide support for data quality.

Lead organization: Minnesota Department of Health

Contact Information: Call 651-201-5414 or email Health.HAI@state.mn.us

CHAIN NHSN Hospital User Group (Acute Care)

Who: Organized by CHAIN partners, including the Minnesota Hospital Association (MHA), APIC MN, MDH, and Stratis Health.

What: A bimonthly call to offer hospitals an opportunity to hear NHSN updates, case studies, and other relevant information.

Update: Calls are held the third Thursday of every other month from 1:00 – 2:00 p.m. To see a detailed schedule and register for calls, visit www.mnreducinghais.org/hospitals/nhsn-user-grou.html

Lead Organization: Minnesota Hospital Association

Contact Information: qualityandpatientsafety@mnhospitals.org or call (651) 641-1121.

PREVENTION

Association for Professionals in Infection Control and Epidemiology – Minnesota Chapter (APIC MN) (All)

Who: over 300 professionals from across Minnesota, western Wisconsin, northern Iowa, eastern North Dakota, and eastern South Dakota who work in infection prevention and healthcare epidemiology.

What: APIC MN mission is to create a safer world by developing professional competency in Infection Prevention and Control, through teamwork and education focused on leadership, implementation science, and technology utilization. Professional organization that provides educational offerings in infection prevention and epidemiology; promotes professional development including CIC certification; provides opportunities for networking and peer-to-peer learning; and collaborates with strategic partners in the prevention of HAIs through the following:

- General meetings (which are also available via webinar)
- Basic Infection Prevention (BIP) courses
- 2-day annual conference
- Specialty subgroups in long-term care, ambulatory care, and pediatric settings
- Education and Travel Support
- Monthly newsletter (News and Views)
- Promotion of IP related education events in community
- Providing IP representatives for HAI policy groups (e.g., Minnesota HAI Prevention Advisory Group, CHAIN, Emerging Infections Group, MRSA Recommendations Advisory Group)

Lead Organization: APIC MN

Contact Information: www.apicmn.org/home/contactus

Midwest Kidney Network 11 (Ambulatory Care, Acute Care)

Who: State and Regional (MI, MN, NS, SD, WI) organization. MKN is one of 18 Networks in the US who assures care to the End Stage Renal Disease (ESRD) patient is consistent with CMS guidelines and standards. We work in collaboration with Quality Improvement Organizations (QIOs), Quality Improvement Networks, (QINs) and the National Coordinating Center (NCC) to improve care in the ESRD population.

What: We are a multidisciplinary group that oversees quality within hemodialysis, home dialysis, peritoneal dialysis and transplant facilities in our 5 states. We work in collaboration with CMS, CDC and HHS. We review

referrals to home dialysis and renal transplant, monitor infections and long term catheter rates and grievances from patients and units. We work closely with the State Survey Agencies in all 5 states.

Update: In 2018, we are currently working with 234 dialysis units in the top 50% highest infection rates. We hold monthly coaching calls reviewing the CDC Core Interventions for dialysis units. We provide NHSN information and assistance for the units in monitoring their rates and entering data correctly. We monitor NHSN annual training for all units. We are encouraging all units to join a health information exchange (HIE) to obtain inpatient records and follow infections in their patients. We present best practices within units to all units in our Network.

Here is a link to our web site where we compile all infection information in one place for our dialysis units.

<http://midwestkidneynetwork.org/patient-safety/preventing-infections#>

We constantly update it when new items come out. We included sepsis education for patients and their families these last 2 years (2017-8). One unit developed a sepsis assessment tool to be used in all dialysis patients before each run.

Here is a link to our culture of safety information for dialysis units <http://midwestkidneynetwork.org/node/4500>

Lead Organization: Midwest Kidney Network 11

Contact Information: Deborah Bowe, RN dbowe@nw11.esrd.net

Stratis Health/ Lake Superior Quality Improvement Network (All)

Stratis Health works locally to achieve national health care quality goals through Lake Superior Quality Innovation Network, the Medicare Quality Innovation Network-Quality Improvement Organization (QIN-QIO) which serves Minnesota, Michigan, and Wisconsin. Stratis Health and Lake Superior QIN support quality improvement initiatives in a variety of settings including acute care, long-term care, and ambulatory care settings. Lake Superior QIN initiatives related to HAI prevention and antimicrobial stewardship are described below.

Lake Superior Quality Improvement Network (QIN) Outpatient Antibiotic Stewardship Initiative (Ambulatory Care)

Who: Led by Stratis Health, as part of Lake Superior QIN, for outpatient settings, including clinics, hospital emergency departments, urgent care facilities, and community pharmacies.

What: The goal of the project is to assist all participants in implementing all four of CDC's Four Core Elements of Outpatient Antibiotic Stewardship by July 2019.

Lead Organization: Stratis Health, info@stratishealth.org

Lake Superior QIN Support for Acute Care Quality Improvement (Acute Care)

Who: Stratis Health, as part of Lake Superior QIN, directly supports prospective payment system hospitals, critical access hospitals, inpatient psychiatric facilities, and ambulatory surgery centers with federal quality reporting programs.

What: Support for analyzing data and improving quality outcomes across federal quality reporting programs with measures related to infections including: Hospital Value-Based Purchasing, Hospital-Acquired Condition Reduction Program, Ambulatory Surgery Center Quality Reporting Program, Inpatient Psychiatric Facility Quality Reporting Program, and the Inpatient and Outpatient Quality Reporting Programs.

Lead Organization: Stratis Health, info@stratishealth.org

Lake Superior Quality Improvement Network (QIN) *C. difficile* Initiative (Long-Term Care)

Who: Stratis Health, as part of Lake Superior QIN, and Minnesota nursing homes participating in the *C. difficile* initiative.

What: Lake Superior QIN, with assistance from MDH, has helped long-term care facilities to enroll in NHSN and report *C. difficile* infections (CDI) as part of a national strategy to establish a CDI baseline and form QIN-based collaboratives for the reduction of CDI in skilled nursing facilities. Lake Superior QIN developed four webinars related to antibiotic use, antibiotic stewardship, and *C. difficile* prevention and management

Lead Organization: Stratis Health, info@stratishealth.org

Other Lake Superior QIN Educational Offerings for Skilled Nursing Facilities (Long-Term Care)

Who: Stratis Health, as part of Lake Superior QIN, and Minnesota nursing homes

What: Online and in-person training and education. Stratis – Lake Superior QIN developed resources to assist nursing homes in meeting the new infection control regulations and is promoting CMS National Coordinating Center online training sessions.

Lead Organization: Stratis Health, info@stratishealth.org

The Minnesota Hospital Association (Acute Care)

The Minnesota Hospital Association is actively engaged in HAI improvement in Minnesota, offering a range of educational opportunities and resources that support hospitals in meeting their infection prevention and antibiotic stewardship quality improvement goals. Current HAI offerings include:

Minnesota Hospital Association (MHA) Hospital Improvement Innovation Network (HIIN) HAI Peer Learning Network Webinar (Acute Care)

Who: Led by MHA for acute care hospitals

What: Webinars are held on the 4th Tuesday of every other month from 1:00 – 2:00 p.m. The webinars incorporate best practice presentations and interactive discussion focused on specific HAI best practices, tools,

and resources to support hospitals in their efforts to reduce HAIs. Participants have the opportunity to take a deep dive into the specific elements of practice to ask questions, share challenges, and connect with hospitals that may have found solutions and success.

Update: MHA posts resources, slides, and webinar recordings online: <http://mnhospitals.org/quality-patient-safety-initiatives/health-care-associated-infections>

Lead Organization: Minnesota Hospital Association

For more information or to get engaged, contact qualityandpatientsafety@mnhospitals.org or call 651-641-1121.

MHA HIIN Antibiotic Stewardship/MDRO Collaborative Webinars (Acute Care)

Who - The Minnesota and Ohio HIINs for acute care hospitals

What - ASP/CDI Collaborative webinar and action series: Webinars occur on the 2nd Tuesday of every other month at 11:30 a.m. The collaboration addresses antibiotic stewardship, *Clostridium difficile* infection and MDRO through a partnership with the Ohio Hospital Association.

Lead Organization: Minnesota Hospital Association

For more information or to get engaged, contact qualityandpatientsafety@mnhospitals.org or call 651-641-1121.

MHA HIIN Individual Technical Assistance and Coaching (Acute Care)

Who: MHA for individual acute care facilities

What: Individual technical assistance, road map audits, and coaching: 1:1 assistance from an HAI specialist is available for facilities looking for more support with their current infection prevention programs.

Update: HAI road maps focused on CAUTI, CLABSI, CDI, SSI, and VAE prevention: MHA's road maps provide hospitals and health systems with evidence-based recommendations and standards for the development of topic-specific prevention and quality improvement programs, and are intended to align process improvements with outcome data. Road maps reflect published literature and guidance from relevant professional organizations and regulatory agencies, as well as identified proven practices.

www.mnhospitals.org/quality-patient-safety-initiatives/health-care-associated-infections.

For more information or to get engaged, contact qualityandpatientsafety@mnhospitals.org or call 651-641-1121.

MHA HIIN Infection Prevention Certification Reimbursement (Acute Care)

Who: Offered by Minnesota Hospital Association for hospital infection preventionists

What: MHA offers reimbursement up to \$250 to hospital infection preventionists who pass the certification process for the first time. Costs may include the exam fee, books, and other preparatory education.

For more information or to get engaged, contact qualityandpatientsafety@mnhospitals.org or call 651-641-1121.

Care Providers of Minnesota (Long-Term Care)

What - Care Providers of Minnesota works with various partners to prevent HAIs and antimicrobial resistance in post-acute care settings such as nursing homes, home care and assisted living settings. Multiple learning opportunities, including an on-line Infection Preventionist certificate program are available to improve infection control outcomes in these settings.

Lead Organization: Care Providers of Minnesota

Contact Information: Call 952-812-2489 or email information@careproviders.org

Safe Injection Practices Coalition/One and Only Campaign (All)

Who: MDH for Minnesota health care providers that administer medications or other products by injection or intravenously or use needles to collect specimens for diagnostic purposes and for organizations that work to prevent HAIs related to injection safety.

What: Minnesota is a partner state in the Safe Injection Practices Coalition. As such, Minnesota Department of Health participates in regular conference call updates with the Coalition, provides trainings for facility policy development, provides injection safety presentations for health care professionals, exhibits at conferences, and maintains a webpage devoted to injection safety. Any health care organization is eligible and encouraged to apply to be a member of the One and Only Campaign.

Update: Injection safety and facility injection safety policy development training is presented at least annually as a webinar and upon request through speaking engagements. Check the following website for more information about injection safety and the webinars as they becomes available:

www.health.state.mn.us/divs/idepc/dtopics/infectioncontrol/is/index.html.

Lead Organization: Minnesota Department of Health

Contact Information: Call 651-201-5414 or email Health.HAI@state.mn.us

Antimicrobial Stewardship Conferences (All)

Who: Hosted by MDH and CHAIN Partners. In recent years, each conference has targeted an audience from a specific care setting (e.g., long-term care in 2017; ambulatory care in 2018).

What: An annual day-long conference (2012 – 2014, 2017, 2018) hosted by CHAIN to provide education about stewardship and promote implementation of antimicrobial stewardship programs in a variety of health care settings and for all members of an antimicrobial stewardship program team (e.g., senior leadership, pharmacists, physicians, nurses, infection control).

Update: A conference devoted to antibiotic stewardship in the ambulatory care setting was held in May 2018. The event was attended by 150 professionals with over 60 individuals on the waiting list. The decision to focus on the outpatient setting, was driven by the CDC's expansion of focus which includes outpatient settings. Recent conferences have been held in the spring.

Lead Organization: Minnesota Department of Health

Contact Information: Call 651-201-5414 or email Health.Stewardship@state.mn.us

Sample Antibiotic Stewardship Policy and Companion Guide for Long-Term Care (Long-Term Care)

Who: Developed by MDH with input from the Long-Term Care Antibiotic Stewardship Advisory Group

What: The Sample Antibiotic Stewardship Policy for long-term care provides an example of how a nursing home might get started with an antibiotic stewardship program. The companion guide walks the facility through each section of the sample policy, with recommendations of what to consider when drafting the facility's own policy document.

Update: The sample policy is available in both PDF and Word format on the MDH One Health Antibiotic Stewardship website, www.health.state.mn.us/onehealthabx/lc/samplepolicy.pdf. The Companion Guide is also available: www.health.state.mn.us/onehealthabx/lc/samplepolicyguide.pdf.

Lead Organization: Minnesota Department of Health

Contact Information: Call 651-201-5414 or email Health.Stewardship@state.mn.us

Long-Term Care Sample Antibiotic Stewardship Infection Surveillance Tracking Tool and Instructions (Long-Term Care)

Who: For long-term care facilities

What: A template of a line list to track infections and antibiotic use in long-term care facilities. (Appendix L of the MN Antimicrobial Stewardship Program Toolkit for LTC www.health.state.mn.us/divs/idepc/dtopics/antibioticresistance/asp/lc/index.html)

Update: The line list was developed by the ICAR Team to support LTCFs efforts to develop antibiotic stewardship programs and was reviewed by the APIC-MN Long-Term Care Committee.

Lead Organization: Minnesota Department of Health

Contact Information: Call 651-201-5414 or email Health.HAI@state.mn.us

Acute Care Antibiotic Stewardship Honor Roll (Acute Care)

Who: Any Minnesota acute care hospital that has particular features of an antimicrobial stewardship program in place and chooses to be recognized by the Minnesota Department of Health and be included in the list of honorees on the One Health Antibiotic Stewardship website.

What: Hospitals can apply at any time, and the online list of honorees is updated quarterly. Hospitals self-select for honor roll level: bronze ("commitment"), silver ("action"), and gold ("collaboration"). Honor roll facilities receive a certificate and electronic honor roll images to use in facility promotional materials.

Update: The current honor roll and more information can be found at www.health.state.mn.us/onehealthabx/honor/honorac.html.

Lead Organization: Minnesota Department of Health

Contact Information: Call 651-201-5414 or email Health.Stewardship@state.mn.us

Long-Term Care Antibiotic Stewardship Honor Roll (Long-Term Care)

Who: Any Minnesota long-term care facility that has particular features of an antimicrobial stewardship program in place and chooses to be recognized by the Minnesota Department of Health and be included in the list of honorees on the One Health Antibiotic Stewardship website.

What: Long-term care facilities can apply at any time, and the online list of honorees is updated quarterly. Facilities self-select for honor roll level: bronze (“commitment”), silver (“action”), and gold (“collaboration”). Honor roll facilities receive a certificate and electronic honor roll images to use in facility promotional materials.

Update: The current list of honorees and more information can be found at www.health.state.mn.us/onehealthabx/honor/honorlrc.html.

Lead Organization: Minnesota Department of Health

Contact Information: Call 651-201-5414 or email Health.Stewardship@state.mn.us

Local Collaborative for Antibiotic Stewardship (All)

Who: Eight health care facilities in the Detroit Lakes, MN area

What: The facilities have formed an antibiotic stewardship collaborative. Objectives are to enhance communication among facilities sharing patient populations, improve antibiotic stewardship in individual facilities and across care transitions, and prevent transmission of multi-drug resistant organisms within and among facilities.

Update: The collaborative members meet quarterly in-person and two work groups meet monthly by Skype or conference call. The group plans to implement patient education for antibiotic stewardship, and also improve communication and effectiveness of antibiotic use management during transitions of care.

Lead Organization: Minnesota Department of Health

Contact Information: Call 651-201-5414 or email Health.Stewardship@state.mn.us

Ambulatory Surgery Center (ASC) HAI Prevention Group (Ambulatory)

Who: Persons responsible for infection prevention (IP) in Minnesota ASCs

What: Monthly conference calls to provide presentations and an opportunity to discuss concerns that pertain to IP in ASCs. Prevention of surgical site infections, injection safety, instrument reprocessing, and outbreak investigation are some of the topics chosen based on a survey administered to ASC infection preventionists.

Update: Monthly calls alternate between 10:00 am on the 4th Wednesday of the month and 9:00 am on the fourth Monday of the month.

Lead Organization: Minnesota Department of Health

Contact Information: Call 651-201-5414 or email Health.HAI@state.mn.us

EVALUATION, OVERSIGHT, AND COMMUNICATION

HAI Update E-newsletter (All)

Who: Available to any interested subscribers

What: The e-newsletter is published monthly and shares information and resources concerning current topics in HAI and antimicrobial resistance.

Update: Past issues and information on how to subscribe can be found at www.health.state.mn.us/divs/idepc/dtopics/infectioncontrol/news.html.

Lead Organization: Minnesota Department of Health

Contact Information: Subscribe at www.health.state.mn.us/divs/idepc/dtopics/hai/index.html

TARGETED HEALTHCARE INFECTION PREVENTION PROGRAMS

Infection Control Assessment and Response (ICAR) Assessments and Gap Mitigation Across the Health Care Spectrum (All)

Who: For hospitals, long-term care facilities, hemodialysis centers, clinics, and other ambulatory settings

What: A team of experienced Infection Preventionists provide guidance and resources to assist facilities with infection prevention and control questions and concerns. The ICAR team conducts no cost, non-regulatory, comprehensive onsite facility assessments and ongoing consultation via phone, email, or onsite visit when needed (i.e. outbreaks).

Lead Organization: Minnesota Department of Health

To learn more about the ICAR team visit the website: www.health.state.mn.us/divs/idepc/dtopics/icar/index.html

Contact Information: Email the team at Health.icar@state.mn.us or call 651-201-5414

Targeted Assessment for Prevention (TAP) Strategy (Acute Care)

Who: Currently available for hospitals that report *C. difficile* infections (CDI), central-line associated bloodstream infections (CLABSI), or catheter-associated urinary tract infections (CAUTI) to NHSN

What: The TAP strategy utilizes a metric called the cumulative attributable difference (CAD) which is equal to the number of infections that must be prevented to achieve a goal standardized infection ratio (SIR). TAP reports and the CAD metric allow for the ranking of facilities and individual unit locations to prioritize prevention efforts. Identified facilities or units can complete a TAP facility assessment, which is a short survey developed by CDC to assess staff awareness and perceptions related to HAI prevention. After completing the TAP facility assessment, MDH will prepare a TAP Feedback Report, which summarizes results from the assessment and identifies strengths and top opportunities for improvement.

Update: Facility-level TAP reports and additional TAP-related resources are available on request.

Lead Organization: Minnesota Department of Health

Contact Information: 651-201-5414 or email Health.HAI@state.mn.us

*An Emerging Infections Program (EIP) Healthcare-Associated Infection Community Interface (HAIC) Project. The Minnesota Department of Health is one of ten sites in the United States that works in collaboration with the Centers for Disease Control and Prevention to gain a better understanding about emerging infections using surveillance and other special projects in order to develop effective disease prevention and control. The HAIC component focuses on emerging HAI threats and antibiotic resistance. More information can be found at www.cdc.gov/hai/eip/index.html.

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