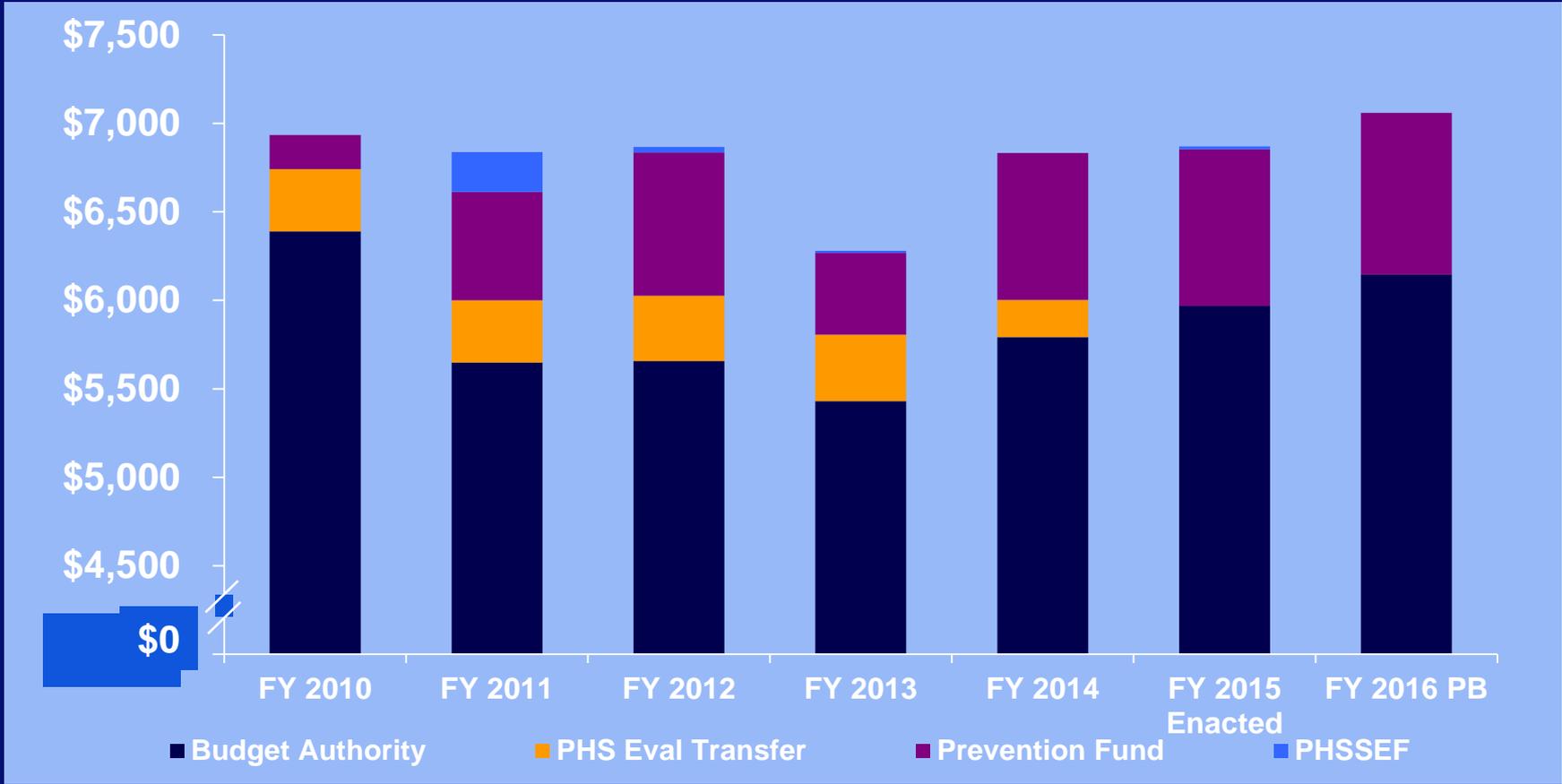# DHQP Policy Updates

Michael Craig

Senior Advisor

Division of Healthcare Quality Promotion

Annual Grantees Meeting

November 17 - 19, 2015

CDC Program Level Funding
Funding in past 7 years

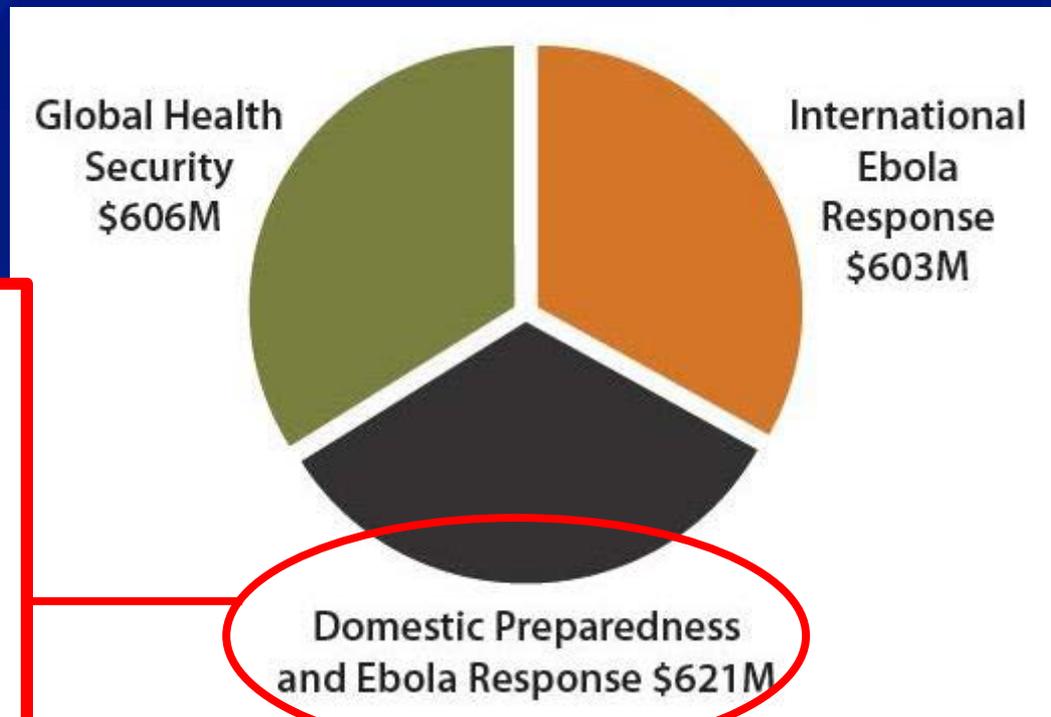

Dollars in millions; FY 2013 reflects sequestration

For more information see, http://www.cdc.gov/funding/

FY 2015 CDC emergency budget supplemental funding
$1.77 billion to fight Ebola on all fronts

Goals
- Stop Ebola epidemic at its source
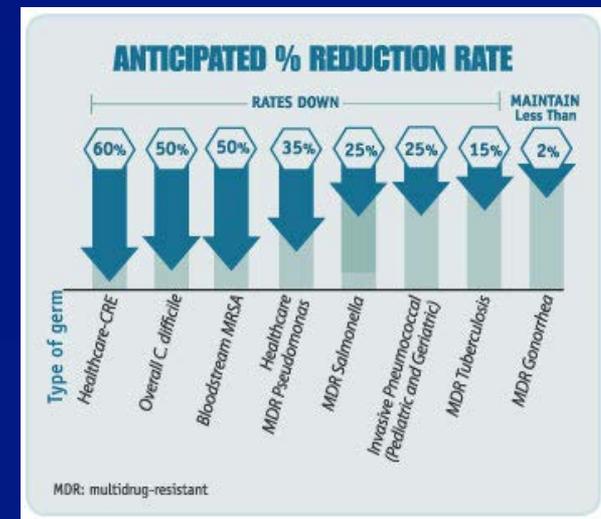- Support immediate and decisive response

Improve Laboratory Capacity& State and Local Infection Control Capabilities $255 Million

Global Health Security $606M

International Ebola Response $603M

Domestic Preparedness and Ebola Response $621M

CDC's AR Solutions Initiative $264M: A Comprehensive Response

- The FY 2016 Budget requests more than $264 million to support:

  - ✓ Antibiotic stewardship
  - ✓ Outbreak detection and response
  - ✓ Prevention of infection
  - ✓ Antibiotic use and resistance monitoring
  - ✓ Research and development related to combating antibiotic resistance

ANTICIPATED % REDUCTION RATE

RATES DOWN — MAINTAIN Less Than

60% | 50% | 50% | 35% | 25% | 25% | 15% | 2%

Type of germ: Healthcare CRE, Overall C. difficile, Bloodstream MRSA, Healthcare MDR Pseudomonas, MDR Salmonella, Invasive Pneumococcal (Pediatric and Geriatric), MDR Tuberculosis, MDR Gonorrhea

MDR: multidrug-resistant

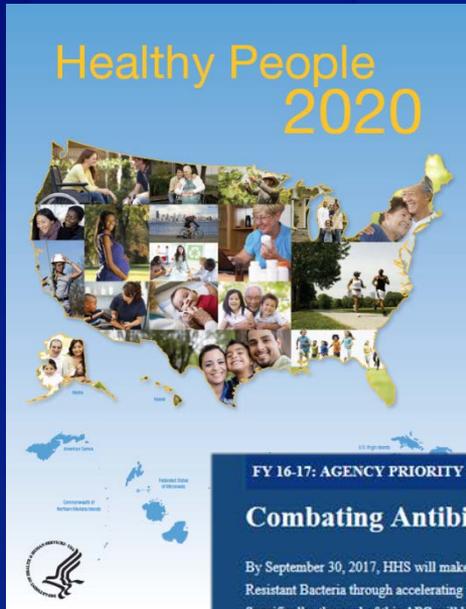- Supports implementation of CDC's activities under the National Strategy and National Action Plan

National Strategy for Combating Antibiotic-Resistant Bacteria (CARB)

Goals for the U.S. Government

1. Slow the Emergence of Resistant Bacteria and Prevent the Spread of Resistant Infections
2. Strengthen National One-Health Surveillance Efforts to Combat Resistance
3. Advance Development and Use of Rapid and Innovative Diagnostic Tests for Identification and Characterization of Resistant Bacteria
4. Accelerate Basic and Applied Research and Development for New Antibiotics, Other Therapeutics, and Vaccines
5. Improve International Collaboration and Capacities for Antibiotic Resistance Prevention, Surveillance, Control, and Antibiotic Research and Development

Increasing Accountability, Transparency and Efficiency

Communicating the value of CDC investments and priorities to Congress, OMB, GAO, state policy makers, others

State HAI-AR Prevention Programs
Detect, Prevent, Respond
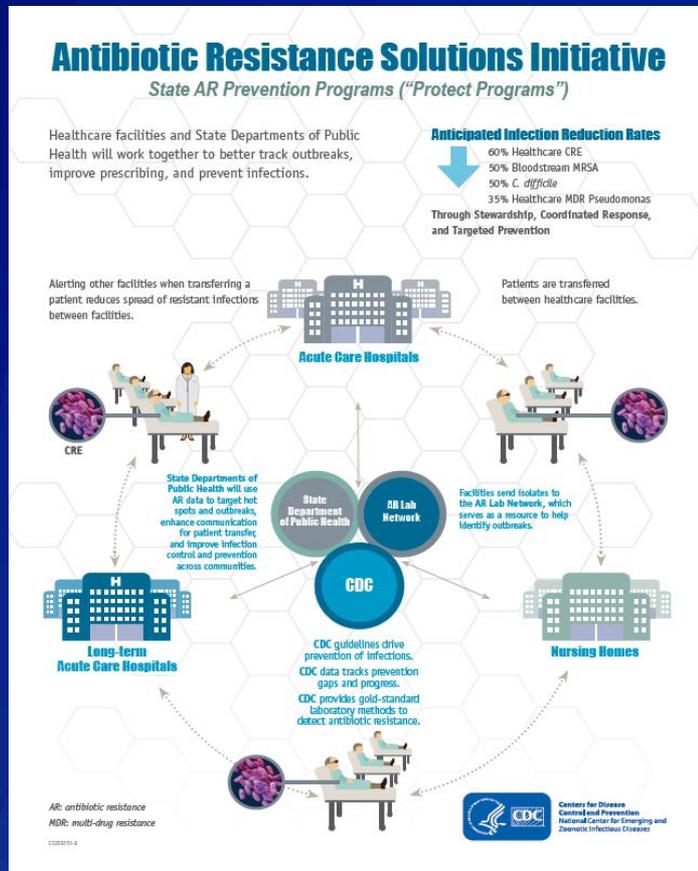
- Prevention of AR transmission and emerging threats needs to be **across healthcare and community settings**
- Networks of healthcare facilities in communities around the country working together with health departments to:
  - Find and stop outbreaks
  - Use Data; Prevent infections
  - Improve abx prescribing

Moving the Needle Through Strategic Partnerships

- Academic partners
- AHA, hospital groups
- ASTHO
- Consumers Union, patient groups
- CSTE
- HRET
- NACCHO
- PEW
- PHF
- The Joint Commission
- MANY OTHERS

Federal Partners
- CMS
- FDA
- AHRQ
- APSR
- ASPE
- ONC

Healthcare, infections, and antibiotic resistance are moving across healthcare, communities
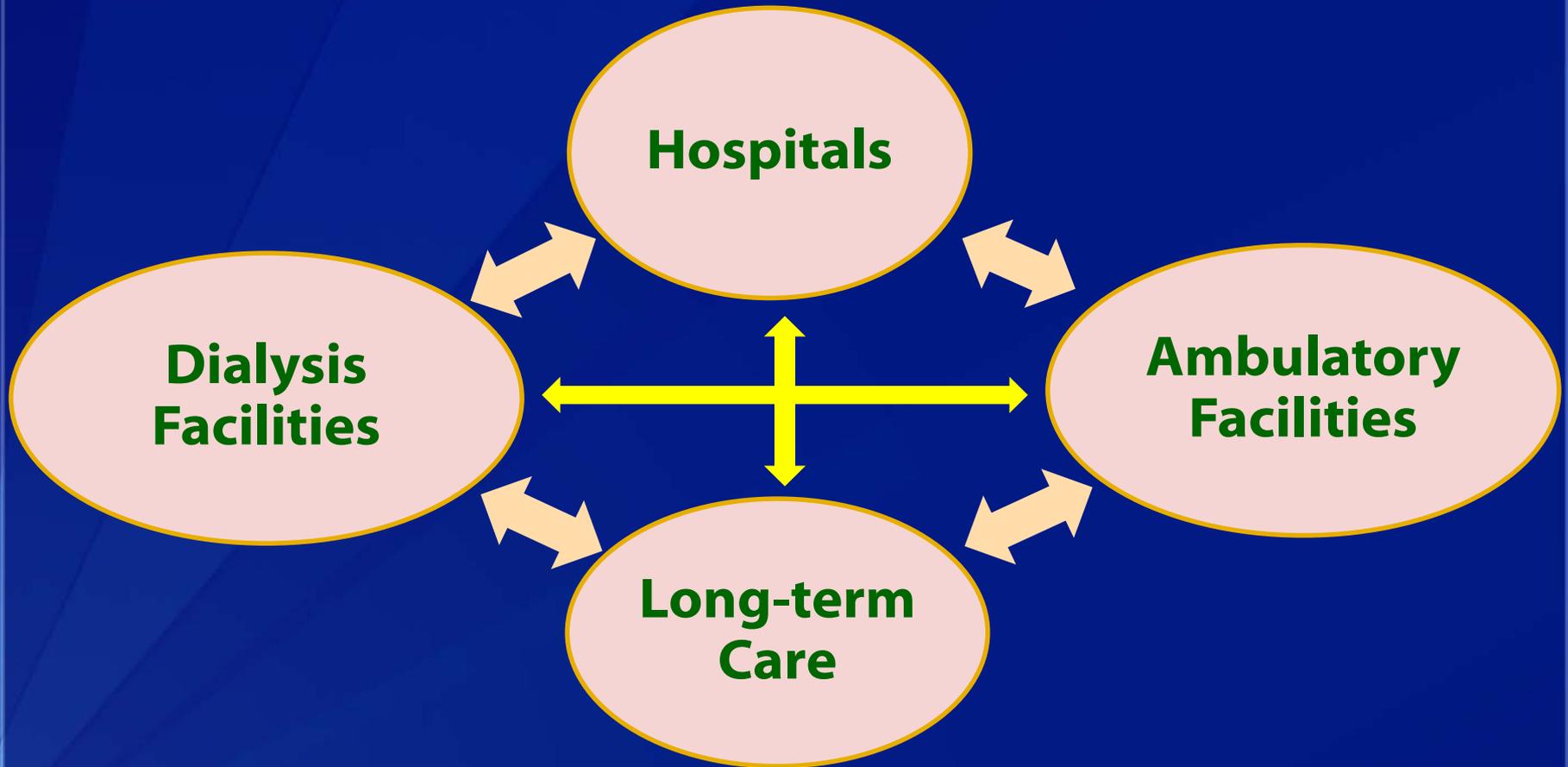
CMS Proposed Conditions of Participation (CoP) for Long Term Care Facilities

- ❑ **First major revision since 1991**

- ❑ **New requirements for infection control and antibiotic stewardship programs**

- ❑ **Aligns with strategies in the National Action Plan for Combatting Antibiotic Resistant Bacteria (CARB)**

- ❑ **Potential challenges due to cost and resources for implementation**

ASTHO/CDC Meeting, June 2015 Addressing Antibiotic Resistance in Healthcare

- Participants: HAI program, state/local epis, state health officials, CMS, PH and healthcare partners
- Developed state health agency action steps for
  - Technical expertise
  - Using data for prevention
  - Patient movement and regional approach
  - Antibiotic stewardship programs

HAI Outbreak Council

- ❑ **Co-led by ASTHO and CSTE**
- ❑ **Governance committee and council will be established December 2015**
- ❑ **Other partners to be added**
- ❑ **Purpose is to provide strategic direction to enhance detection and response to outbreaks in healthcare**

Outpatient Settings Policy Options

October, 2015

Outpatient Settings Policy Options
for Improving Infection Prevention

Licensing | Training
Reporting | Investigating

Key Policy Elements for Best Practices

National Center for Emerging and Zoonotic Infectious Diseases
Division of Healthcare Quality Promotion

CDC, with input from multiple stakeholders, identified four key areas that should be assessed for improving infection control and oversight in outpatient healthcare settings:

- **Facility licensing/accreditation requirements**
- **Provider training requirements for licensing and certification**
- **Infection and sentinel event reporting requirements**
- **Establishment and use of effective investigation authorities**

http://www.cdc.gov/HAI/settings/outpatient/outpatient-settings.html.

DETECT - PREVENT - RESPOND

Division of Healthcare Quality Promotion

NCEZID/CDC

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
E-mail: cdcinfo@cdc.gov   Web: www.cdc.gov

National Center for Emerging and Zoonotic Infectious Diseases
Division of Healthcare Quality Promotion