

CACC business case template for assessment to justify additional FTE's needed to comply with the SB 1058 and AFL 11-32-Requirements for Reporting Surgical Site Infections

In our best expert opinion it would take roughly 60 minutes per chart based on the 30 d and 1 year review for implants. This may vary per GACH based on their ability to automatically vs manually upload data and how resourced their current IC program is.

This document is four-fold:

1. Give guidance to CACC members in how to assess and develop a business case to justify additional FTE's needed to comply with the SSI reporting
2. Mechanisms to determine time to obtain data with EMR vs Non EMR
 - a. Upload
 - b. Capability
 - c. Validation
 - i. ICD-9 import
 - ii. Gathering CPT code
 - iii. Description of procedure
 - iv. Wound Class/ASA/length of procedure
 - d. Find surgical procedures-examples
 - i. C-section
 - ii. Cardiac Cath lab procedures –Pacemakers
 - iii. Endoscope/laparoscope use
 - e. Total volumes for each procedure
 - i. 1 month representation 30 d and 1 year review(kick out what you are already doing)
3. Analysis of the case findings: Includes ability to review each case for SSI and create and upload denominator data into NHSN
 - a. 30 day review
 - b. 1 year review
 - c. Hospital Epidemiologists/MD oversight and case review
4. Feedback of findings to the Surgeons
 - a. Follow up recommendations for interventions
 - b. Reporting internally
 - c. Process improvement efforts

Current tasks, duties, regulatory required mandates IP's do

Surveillance(Monthly)
Coordination: MICRO Rounds (0.5-1h/day)

	Investigation: IC Rounds (0.5-1h/day)
	Assessments of Breeches in IC Practices
	Write-Up of Assessment
	Improvement Activities
	Action Plan Follow-up
	Surveillance Analyses and Interpretation
	Sentinel HAI Events: Death Package Review
	Pandemic Influenza/Influenza Planning
	ATD, TB and BBP exposure control planning and investigation
	Abstraction of census reports
	Consultation (Monthly)
	MD/Staff Questions on IC issues
	Review of Policy & Procedures
	TJC/CMS/PSLS Continued Readiness
	Database setup/Analysis (EH&S, COEM, Emerg Preparedness, etc)
	Indicators(Monthly)
	Data Abstraction and Entry: CLABSI, CLIP, SSI, TB, Aspergillus, MDRO's, VAP's, Influenza, Reportable Dx
	Indicator Analysis and Interpretation
	Presentations for Recommendations to organization for improvement IHI, etc.
	PI Projects: CHART, SCIP, NSQUIP, internal Dashboard
	Abstraction of charts
	Data Entry
	CABG/GI
	Orthopedic
	Aspergillus
	CLABSI-Housewide
	Microbiology Reportable
	C-Diff /CDAD
	VRE Bacteremia
	MRSA Bacteremia
	Outbreaks/Clusters(Monthly) Average 4 per year
	High level reprocessing Issue
	Sterilization
	Focused Studies (Monthly) Average 5 per year
	Aspergillus in Transplant
	Breast Implants
	Lap/Chole
	BMT
	L&D observational
	ATLAS(Monthly)
	Set-up
	Testing

Management
Meetings
Education
IC Website (Monthly)
Entry/New Posting
Updates
Management
Education
Construction (Monthly)
Pre & F/U Dust Containment and IC Risk Assessment Mtgs
Construction Rounds/F/U on Containment
ICRA (IC Risk Assessment)
Action plan/implementation/follow-up
Water Damage
eQVR Review & Analysis (Monthly)
Read Unusual Occurrence reports/Follow-up/Support Mgrs
Unusual occurrence problem solving
Tracers (Monthly)
Tracer Process
Write-Up
Meeting
Total hours per month
divided by 5 FTEs/4 = hours per week
Education/Presentations (Monthly)
NEO
Residents/Fellows/Med Students
Staff Meetings+ on the spot unit (TH&HC): NLT, ambu care, etc.
Leaders
MTGS/Committees (Monthly)
ICC Data and Presentation Prep/Agenda/Minutes
Critical Care
Technology Assessment Committee
Products
Prof Svc
Executive Board
Quality Council
Emerg Prep
EOC Planning
Patient Safety
NLT (TH & HC)

Linen Mtg/Plant Visit
Infant Special Care QA mtg
Occupational Medicine/Employee Health
Senior management team/Medical staff executive committee
Public Health
EOC and Safety MTG
Nursing/physician/resident education
Staff meeting
Antibiotic Stewardship
Leadership Development
Policy review Meeting
Tissue Meeting
Influenza
HCW Influenza Immunization Management and Reporting
Professional Committees/Meetings (Monthly)
APIC/IDAC/CACC/IDSA
National Conference
Local community health meetings
ID Rounds
Interscience Conference on Antimicrobial Agents and Chemotherapy (ICAAC)
SHEA
OnCall (Monthly)
Answering on call calls,F/U, Problem solving
Administration (Monthly)
Workplan
IC Risk assessment
Annual Report
Evals
Budget
Misc. Minutes/Schedules/etc.
Ordering Supplies
Filing
Answering phones/Taking messages
Mail
Meeting Coordination
Expense Reports/Travel
Memos

CACC Meeting Sacramento 5/5/11

If no more FTE's were allocated to the IP program what of these tasks above that you currently do would you have to drop in order to meet the regulatory requirements for compliance with mandatory public reporting of SSI.

KD 5/9/11