

The Bree Collaborative Infection Control Charter and Roster

Problem Statement

The past several decades have seen a significant shift in healthcare delivery from inpatient to outpatient settings, yet outpatient settings often lack the infrastructure or resources to support infection prevention and surveillance activities.¹ The COVID-19 pandemic has demonstrated the importance of infection control measures and as of December 2021 over 800,000 Washingtonians have been infected.² At the same time, strong infection control policies and procedures introduced during the COVID-19 pandemic like physical distancing and masking have disrupted the circulation of other respiratory viruses and infectious diseases.³

Aim

To help standardize infection control practices in the outpatient setting in order to mitigate the spread of prevalent infectious diseases.

Purpose

To propose evidence-informed recommendations to the full Bree Collaborative on practical and evidence-based methods for implementation of infection control in the outpatient setting, including:

- Outpatient transmission-based protocols, sterilization and disinfectant protocols.
- Accessing appropriate testing, PPE, and other needed resources.
- Surveillance of infectious disease transmissibility.
- Developing clinical workflows for high-risk/crisis situations.
- Partnering with patients to provide education about disease risk.
- Engaging community leaders to mitigate community spread.
- Designing benefits and incentives to help encourage behavior change.
- Applying existing infection control guidelines to the varied resources available in outpatient settings.

Duties & Functions

The workgroup will:

- Research evidence-informed and expert-opinion informed guidelines and best practices (emerging and established).
- Identify current barriers and future opportunities for implementing interventions.
- Consult relevant professional associations and other stakeholder organizations and subject matter experts for feedback, as appropriate.
- Maintain an equity lens throughout the guideline development process.
- Align recommendations with federal, state, local, and manufacturer guidance when possible.
- Meet for approximately nine months, as needed.
- Provide updates at Bree Collaborative meetings.
- Post draft report(s) on the Bree Collaborative website for public comment prior to sending report to the Bree Collaborative for approval and adoption.
- Present findings and recommendations in a report.
- Recommend data-driven and practical implementation strategies including metrics or a process for measurement.
- Create and oversee subsequent subgroups to help carry out the work, as needed.
- Revise this charter as necessary based on scope of work.

Structure

The workgroup will consist of individuals confirmed by Bree Collaborative members or appointed by the chair of the Bree Collaborative. The Bree Collaborative director and program coordinator will staff and provide management and support services for the workgroup.

Less than the full workgroup may convene to: gather and discuss information; conduct research; analyze relevant issues and facts; or draft recommendations for the deliberation of the full workgroup. A quorum shall be a simple majority and shall be required to accept and approve recommendations to send to the Bree Collaborative.

Meetings

The workgroup will hold meetings as necessary. Bree Collaborative staff will conduct meetings, arrange for the recording of each meeting, and distribute meeting agendas and other materials prior to each meeting. Additional workgroup members may be added at the discretion of the Bree Collaborative director.

Name	Title	Organization
Mark Haugen, MD (chair)	Family Medicine Physician	Walla Walla Clinic & Surgery Center
Anne Sumner, BSN, MBA	VP Head of Operations	Baker Boyer Bank
Cathy Carrol		WA Health Care Authority
Faiza Zafar, DO, FACOI	Medical Director	Community Health Plan of Washington
Larissa Lewis, MPH, CIC	HAI Education and Guidance Development Supervisor	WA Department of Health
Lisa Hannah, RN, CIC	Infection Prevention Team Supervisor	WA Department of Health
Lisa Waldowski, DNP, CIC	Regional Director, Infection Prevention and Control	Kaiser Permanente
Rhonda Bowen, CIC, CPPS, CPHQ	Senior Improvement Advisor, Patient Safety	Comagine Health
Stephanie Jaross, BSN, RN	ASC Director	Proliance Center for Outpatient Spine and Joint Surgery
Sierra Bertolone-Smith	Medical Student	Pacific Northwest University of Health Sciences

¹ Centers for Disease Control and Prevention. (September 2016). Guide to Infection Prevention for Outpatient Settings: Minimum Expectations for Safe Care. <https://www.cdc.gov/infectioncontrol/pdf/outpatient/guide.pdf>

² WA Department of Health. (December 2021) COVID-19 Data Dashboard. <https://www.doh.wa.gov/Emergencies/COVID19/DataDashboard>

³ Centers for Disease Control and Prevention. (July 2021) Changes in Influenza and Other Respiratory Virus Activity During the COVID-19 Pandemic. <https://www.cdc.gov/mmwr/volumes/70/wr/mm7029a1.htm>