



To: CDC Stakeholders

From: Dixie Snider, M.D., Senior Advisor, Office of the Director
Toby Merlin, M.D., Senior Medical Advisor, Influenza Coordination Unit

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Subject: Process for Stakeholder and Public Review of Interim H1N1 Guidance for Infection Control in a Healthcare Setting, July - October 2009

A critical part of CDC's response to the ongoing 2009 A (H1N1) influenza pandemic is the development and dissemination of interim public health guidance based on the best available information. CDC is committed to reviewing and updating these guidance documents to ensure that they provide up-to-date, practical, and effective public health recommendations.

The purpose of this notice is to outline steps being taken to assess and revise one of these H1N1 guidance documents, [Interim Guidance for Infection Control for Care of Patients with Confirmed or Suspected Novel Influenza A \(H1N1\) Virus Infection in a Healthcare Setting](#). The current interim guidance is based on well-established strategies and practices, but it is also shaped by issues for which information remains very limited, such as the epidemiology of 2009 A (H1N1) influenza and the primary modes of transmission of this virus, and concerns about changes in the virus which could affect its transmissibility, pathogenicity, and/or virulence. A particular concern is the current interim guidance regarding personal protective equipment (PPE) for healthcare personnel (e.g., use of N95 respirators vs. surgical masks).

On July 15, 2009, the CDC Director called a meeting with internal subject matter experts to discuss measures for protection of healthcare workers, including practices known to be beneficial (including prompt identification of infectious patients, appropriate enforcement of sick leave policies, and vaccination of healthcare personnel), but for which implementation has been inadequate.

To elicit further input, CDC is convening multiple public and stakeholder groups to help provide broad input on the influenza infection control recommendations for the upcoming fall season for the healthcare setting. Based on this and other input, the guidance will be revised as needed, and disseminated by October 1, 2009. Currently, a range of varying CDC and non-CDC recommendations exist in this area. This variance is largely a reflection of limitations in existing scientific evidence and differences in risk tolerance give the uncertainties, thus warranting a consultative process. Updates about this consultative process will be posted on CDC's H1N1 Web page as additional information becomes available.

Consultative Process

CDC, in consultation with various partners, has established the following three-part process for reviewing the current guidance.

- 1) Novel Influenza A(H1N1) Infection Control Working Group: CDC requested feedback from a Working Group formed under the auspices of the Healthcare Infection Control Practices Advisory Committee



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(HICPAC)*. The Working Group initially consisted of representatives from HICPAC, three major labor unions representing interests of healthcare and affiliated workers (Service Employees International Union [SEIU], American Federation of State, County, and Municipal Employees [AFSCMS], and American Federation of Labor and Congress of Industrial Organizations [AFL-CIO]), the National Institute for Occupational Safety and Hygiene (NIOSH), and the Occupational Safety and Health Administration (OSHA). The Working Group held an initial meeting in June 2009 to define major issues and options for H1N1 infection control guidance in healthcare settings.

The next meeting of the Working Group is with the full HICPAC a conference call on July 23, 2009. Members of the public who are interested in listening to the Working Group's deliberations can call into the meeting at 1-800-779-6036 Passcode: 6417394 (listen-only mode). At the meeting, the HICPAC will vote on recommendations from the Working Group following which recommendations regarding the H1N1 infection control guidance will be provided to CDC.

- 2) Labor Union Stakeholders: The second part of the process is designed specifically to listen to concerns of labor unions representing healthcare workers and other employees. A separate meeting with union representatives, U.S. government officials, and others will be held in Washington, D.C. on July 28, 2009. Because of space constraints, attendance at the July 28 meeting is by invitation only.
- 3) Institute of Medicine*: The Institute of Medicine (IOM) has agreed to convene an expert panel with diverse expertise on "Personal Protective Equipment for Healthcare Workers in the Workplace Against Novel H1N1 Influenza A". Issue to be addressed include, but are not limited to, 1) the potential for exposure to the nH1N1 virus among health care workers, which groups of workers are at risk, which patient care activities pose a risk of exposure and what degree of risk, and what is known and unknown about transmissibility, severity, and virulence of the current virus and how transmissibility might change. This panel is being co-sponsored by CDC and OSHA. Kenneth I. Shine, M.D., executive vice-chancellor for health affairs at the University of Texas System and former President of IOM, will chair the panel. The IOM panel will convene its meeting on guidance-related issues in Washington, D.C., on August 11-14, 2009; scientists, researchers and members of the public will be invited to provide comments on August 12-13. The IOM panel will provide a letter report on its findings by September 1, 2009.

H1N1 Infection Control Guidance Revision and Dissemination

CDC will use the recommendations and other information obtained from this deliberative process to revise the current infection control guidance as needed. The revised guidance document will be reviewed through official clearance channels and then posted on CDC H1N1 Web site. It is anticipated that the process will be completed by October 1, 2009.

***About HICPAC**

The Healthcare Infection Control Practices Advisory Committee is a federal advisory committee made up of 14 external infection control experts who provide advice and guidance to CDC and the Secretary of the Department of Health and Human Services regarding the practice of healthcare infection control, and strategies for surveillance and prevention and control of healthcare-associated infections in U.S. healthcare facilities.



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***About IOM**

The Institute of Medicine is a component of the congressionally chartered National Academy of Sciences and serves as advisor to the Nation on matters of biomedical science, medicine, and health. The Institute provides unbiased, evidence-based, and authoritative information and advice concerning health and science policy to policy-makers, professionals, leaders in every sector of society, and the public at large.



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