

## **HICPAC Isolation Precautions Guideline Workgroup Call**

June 20, 2024, 2:00 pm ET

### **Participants**

Workgroup: Mike Lin, Sharon Wright, William Bennett, Lisa Brosseau, Elaine Dekker, Judith Guzman-Cottrill, Robert Harrison, Anu Malani, Melissa McDiarmid, Mark Russi, Erica Shenoy, Connie Steed, Jane Thomason, Julie Trivedi, Deborah Yokoe

CDC: Mike Bell, Sydney Byrd, Marie de Perio, Alex Kallen, David Kuhar, Kenneth Mead, Devon Okasako-Schmucker, Melissa Schaefer, Erin Stone, David Weissman, Laura Wells

### **Agenda**

- Attendance and conflicts of interest disclosure
- Recap
- Introduction and Discussion of Question 4
- Next steps

### **Discussion Summary**

- No new conflicts of interest were disclosed.

### Statement to the workgroup

- At the beginning of the meeting, the HICPAC Designated Federal Officer (DFO) addressed the workgroup (WG) with the following statement, “This week, the HICPAC management team received concerns from several workgroup members about a video posted by a workgroup member to a number of social media platforms that was felt to be disparaging to workgroup members. We want to ensure robust debate, constructive participation, and that all have their voices heard. However, actions such as the aforementioned are counterproductive to the process and do not foster scientific debates and workgroup progress. In order to maintain an atmosphere of respectful dialogue, we again ask that workgroup members refrain from these sorts of behaviors.”

### Recap

- Dr. Lin recapped the previous meeting and reviewed upcoming meeting dates.
  - The public HICPAC meeting is tentatively on August 22<sup>nd</sup>.
  - The July 4<sup>th</sup> meeting has been rescheduled to July 11<sup>th</sup>.
- WG members discussed if a decision was made during the previous meeting on whether voluntary use of respirators should remain in the draft's narrative as a consideration or become a recommendation.
- A straw poll on this topic will be sent to the WG.
  - A straw poll is used in WGs to gauge members' thoughts on a topic or question and is not a binding vote.

### Introduction and Discussion of Question 4

- CDC Question 4: “Should there be a recommendation for use of source control in healthcare settings that is broader than current draft recommendations? Should source control be recommended at all times in healthcare facilities?”
- The WG reviewed the language in the current draft on approaches to source control in healthcare settings.

- A WG member asked for clarification on the recommendation, “In most circumstances, it is not necessary for a patient to use source control when in their room; it could be considered when care is being provided.”
  - The WG member expressed that if a patient is not wearing a source control device, they are exhaling infectious particles that could remain in the air, and HCP entering the room could be exposed.
  - Another WG member expressed concern about asking patients to wear a source control device for their entire stay and said that the risk of HCP getting sick is mitigated by HCP wearing the recommended protection.
  - Other WG members spoke about unintended consequences that could occur if patients are asked to mask for their entire stay and expressed that there should be a risk-based approach to using source control.
- WG members agreed that source control is an important tool for preventing disease transmission in healthcare facilities.
  - Some WG members felt the language in the current draft should be expanded, while others agreed with the language as written.
  - WG members also expressed concern about the feasibility of fit testing if a respirator is required for patients and visitors for source control.
  - A WG member noted that masks and respirators are indicated as source control options in the current guideline draft.
  - A WG member suggested that HCP, patients, and visitors should be allowed to wear a respirator voluntarily and that healthcare facilities should provide respirators.
- WG members discussed the draft recommendation on implementing source control during periods of higher levels of community respiratory virus transmission.
  - WG members discussed how healthcare facilities might identify periods of higher community spread in order to be proactive in implementing the use of source control.
  - A WG member pointed out that CDC Core Practices talks about defining higher levels of community respiratory virus transmission and has examples of potential metrics.
  - Another WG member expressed concern about basing the use of source control on community respiratory virus transmission and said that it should be put in place based on the vulnerability of the patient or HCP.
  - A WG member commented that the recommendations in the current guideline draft address implementing source control during periods of higher levels of community respiratory virus transmission and in higher-risk areas of healthcare facilities based on facility risk assessment.
- Dr. Lin gave a brief summary of the discussion and proposed that a future straw poll could be used to allow WG members to further comment on the voluntary use of respirators in healthcare facilities and whether the language in the current source control draft recommendations should be strengthened.

#### Next Steps

- The next meeting is in three weeks and will focus on the CDC questions on ventilation.

The call adjourned at 3:00 pm with no additional comments or questions.

The next Workgroup call is scheduled for July 11, 2024, at 2 pm ET.