



Health Watch USAsm

Member of the National Quality Forum and a designated
"Community Leader" for Value-Driven Healthcare
by the U.S. Dept. of Health and Human Services

www.healthwatchusa.org, www.healthconference.org

Comment Regarding June 2, 2022, Healthcare Infection Control Practices Advisory Committee (HICPAC)

To whom it may concern:

I wanted to submit a short written comment regarding some of the committee member's statements and policy directions which they may elicit. There was a comment regarding not making recommendations too burdensome and that recommendations must be able to be implemented in our healthcare system.

Health Watch USA is an international organization. Internationally, many depend upon the CDC and their recommendations. Unfortunately, our healthcare delivery system has fallen behind most of the world in the ability to deliver care. For the most part, it has become "cost driven".

The CDC will not be able to maintain its world leadership position if it tailors recommendations which are needed to stop the spread of disease to a healthcare system in desperate need of reform. Our system needs to rise to the occasion to meet the challenges of this pandemic.

The CDC is missing a very important voice, that of frontline healthcare workers. The advocacy organizations for these individuals include the Mass. Nurses Association and National Nurses United. Healthcare facilities may not want to spend some of their profits on providing the safest possible workplace but if they do not, frontline workers may not be willing to work in this setting. The United States already has a severe nursing shortage. Many nurses are unwilling to work in facilities. At the same time there are abundant nurses who have left the profession and are no longer working.

The CDC needs to adopt the highest level of safety standards until these standards are proven no longer needed. We should not require the highest level of proof of need before safety standard adoption. If we do the latter, we are creating a workplace environment and providing care which has not proven to be safe.

Finally, we do not have adequate vaccine or pharmacologic protection against Long COVID. In the United Kingdom, 2.1% of their entire population reports having symptoms of Long COVID(1) and the country's workforce has shrunk by 440,000(2) over the last year. One of the major

driving forces for this decrease has been identified as Long COVID.

Not having the highest quality safety policies will only exacerbate the shortage of frontline workers.

Thank you for this consideration,

A handwritten signature in black ink, appearing to read "Kevin Kavanagh". The signature is fluid and cursive, with a long, sweeping tail on the final letter.

Kevin Kavanagh, MD, MS
Health Watch USA

References:

- 1) Sakay YN. UK data sheds light on long COVID: Groups at risk, Omicron, and more. Medical News Today. Feb. 10, 2022. <https://www.medicalnewstoday.com/articles/uk-data-sheds-light-on-long-covid-groups-at-risk-omicron-and-more>
- 2) Werber C. Long covid is shrinking the British workforce. Quartz. May 19, 2022. <https://qz.com/work/2167480/long-covid-is-shrinking-the-workforce/>