## 2018 HAI REPORT

### DAY KIMBALL HOSPITAL

**Healthcare-associated infections (HAIs)** are infections patients can get while receiving medical treatment in a healthcare facility. Working toward the elimination of HAIs is a CDC and Connecticut Department of Public Health priority. The standardized infection ratio (SIR) is a summary statistic that can be used to track HAI prevention progress over time; lower SIRs are better. The infection data are reported to CDC's National Healthcare Safety network (NHSN) and analyzed by the CT DPH.

This report is based on 2018 data using the 2015 baseline.

# **CLABSIs**

INFECTIONS

PROGRESS

# SIR = N/A

CENTRAL LINE-ASSOCIATED BLOODSTREAM INFECTIONS

When a tube is placed in a large vein and not put in correctly or kept clean, it can become a way for germs to enter the body and cause deadly infections in the blood.

Facility SIR cannot be calculated

# **CAUTIs**

# SIR = N/A

SIR = N/A

#### CATHETER-ASSOCIATED URINARY TRACT INFECTIONS

When a urinary catheter is not put in correctly, not kept clean, or left in a patient for too long, germs can travel through the catheter and infect the bladder and kidneys.

Facility SIR cannot be calculated

# MRSA Bacteremia

LABORATORY IDENTIFIED HOSPITAL-ONSET BLOODSTREAM INFECTIONS

Methicillin-resistant *Staphylococcus aureus* (MRSA) is bacterium usually spread by contaminated hands. In a healthcare setting, such as a hospital, MRSA can cause serious bloodstream infections.



# SSIs

#### SURGICAL SITE INFECTIONS

When germs get into an area where surgery is or was performed, patients can get a surgical site infection. Sometimes these infections involve only the skin. Other SSIs can involve tissues under the skin, organs, or implanted material.

### SSI: Abdominal Hysterectomy

SIR = N/A

Facility SIR cannot be calculated

## **SSI: Colon Surgery**

SIR = N/A

Facility SIR cannot be calculated

# C. difficile Infections

## SIR = 0.00

#### LABORATORY IDENTIFIED HOSPITAL-ONSET C. DIFFICILE INFECTIONS

When a person takes antibiotics, good bacteria that protect against infection are damaged for up to months. During this time, patients can get sick from *Clostridium difficile*, bacteria that cause potentially deadly diarrhea, which can be spread in healthcare settings.



Facility SIR was statistically significantly lower than the statewide 2018 SIR of 0.82



Facility SIR was statistically significantly lower than the statewide 2018 SIR of 1.0

## 2018 HAI REPORT

# INFECTIONS PROGRESS

#### WHAT IS THE STANDARDIZED INFECTION RATIO?

The standardized infection ratio (SIR) is a summary statistic that can be used to track HAI prevention progress over time; lower SIRs are better. The SIR for a facility or state is adjusted to account for factors that might cause infection rates to be higher or lower, such as hospital size, teaching status, the type of patients a hospital serves, and surgery and patient characteristics.

WHAT DO THE PERCENTAGES MEAN?

DAY KIMBALL HOSPITAL

The percentage next to each arrow shows the percent change of the facility's SIR from the national baseline SIR of 1.0, or the change from the statewide SIR for that HAI in given type of unit in 2018.



LEGEND facility SIR is significant- ver (better) than compari-	HAI type	Unit type		Observed infections	Predicted infections	SIR	95%Cl	How does this facility compare?	
								State (2018)	National baseline
group (state or national line)	CLABSI	Adult ICUs	268	0	0.18				
a facility SIR is significant- gher (worse) than com- on group (state or na- l baseline)		Adult Wards	604	0	0.35				
	CAUTI	Adult ICUs	582	0	0.32				
facility SIR is not statisti- significantly different from parison group; arrow		Adult Wards	783	1	0.38				
tion indicates if SIR is or less than comparison	Colon procedures SSI		31	0	0.84				
facility SIR cannot be lated	Abdominal hysterectomy SSI		22	0	0.18				
	MRSA events		16,677	1	0.53				
tewide 2018SIRs	CDI events		15,712	0	5.54	0.00	(, 0.54)	100%	100%

#### FACILITY PROFILE

-							
3							
)	Number of staffed beds	Full time infection preventionists (40hr/wk)	Beds/full-time IP	CDC AMS Core elements fulfillment (max 7)			
)	63	1	62	7			
	05	T	63	/			
;							
1							

#### √ 2018 facility SIR ly lower (better) son group (state baseline)

2018 facility SIR ly higher (worse) parison group (st tional baseline)

fr or d 2018 facility SIR cally significantly comparison group direction indicates more or less than group

2018 facility SIR calculated

Statewide 2018SIRs		
CLABSI	0.82	
Adult ICUs	0.67	
Neonatal ICUs	0.47	
Pediatric ICUs	1.71	
Adult Wards	0.92	
Pediatric Wards	1.36	
CAUTI	0.93	
Adult ICUs	0.80	
Pediatric ICUs	0.61	
Adult Wards	1.10	
Pediatric Wards	<1	
COLO SSI	1.05	
HYST SSI	1.41	
MRSA	0.74	
CDI	0.82	