



Department of  
**Health**

# Tennessee's Report on Healthcare-Associated Infections

January 1, 2017 – December 31, 2018

Tennessee Department of Health | Report | September 2019



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Cover image: Methicillin-resistant *Staphylococcus aureus* (MRSA) bacteria, U.S. Centers for Disease Control and Prevention - Medical Illustrator, James Archer 2013

# Executive Summary

Healthcare-associated infections (HAIs) are a major public health problem. According to the Centers for Disease Control and Prevention, there were an estimated 722,000 HAIs and 75,000 HAI-related deaths in the United States in 2011<sup>1</sup>, making HAIs one of the top ten leading causes of death<sup>2</sup>. In December 2006, the Tennessee Legislature passed Senate Bill 2978 and the Governor signed the Public Acts, Public Chapter 904 (PC904) requiring hospitals to report selected HAIs to the Tennessee Department of Health (TDH). The legislation required use of CDC's National Healthcare Safety Network (NHSN) for reporting, a secure internet-based surveillance system maintained by the Centers for Disease Control and Prevention (CDC).

## Key Findings

- In 2017, there were 15% fewer central line-associated bloodstream infections (CLABSI) in Tennessee's adult and pediatric intensive care units (ICUs) and 22% fewer CLABSI in adult and pediatric wards than predicted based on national 2015 data. In 2018, there were 24% fewer CLABSI in Tennessee's adult and pediatric ICUs, and 37% fewer CLABSI in adult and pediatric wards than predicted based on national 2015 data.
- In 2017, there were 29% fewer catheter-associated urinary tract infections (CAUTI) in Tennessee's adult and pediatric ICUs and 28% fewer CAUTI in adult and pediatric wards than predicted based on national 2015 data. In 2018, there were 59% more CAUTI in Tennessee's inpatient rehabilitation facilities, 30% fewer CAUTI in ICUs and 27% fewer CAUTI in Tennessee's adult and pediatric wards than predicted based on national 2015 data.
- In 2017, there were 17% fewer surgical site infections (SSI) following colon surgeries in Tennessee acute care hospitals than predicted based on national 2015 data. In 2018, there were 21% fewer SSI following colon surgeries in Tennessee acute care hospitals as predicted based on national 2015 data.
- In 2017, there were 212% more methicillin-resistant *Staphylococcus aureus* (MRSA) bloodstream infections in Tennessee inpatient rehabilitation hospitals than predicted based on national 2015 data. In 2018, there were 29% more methicillin-resistant *Staphylococcus aureus* (MRSA)

<sup>1</sup> Magill SS, Edwards JR, Bamberg W, et al. Multistate Point-Prevalence Survey of Health Care–Associated Infections. *New England Journal of Medicine* 2014;370:1198-208.

<sup>2</sup> Klevens RM, Edwards JR, Richards CL, Jr., et al. Estimating health care-associated infections and deaths in U.S. hospitals, 2002. *Public health reports* 2007;122:160-6.

bloodstream infections in Tennessee acute care hospitals than predicted based on national 2015 data.

- In 2017, there were 17% fewer *Clostridioides difficile* Infections (CDI) than predicted in Tennessee acute care hospitals, 27% fewer CDI in inpatient rehabilitation facilities, and 38% fewer CDI in long-term acute care hospitals compared to national 2015 data. In 2018, there were 32% fewer *Clostridioides difficile* Infections (CDI) than predicted in Tennessee acute care hospitals, 37% fewer CDI in inpatient rehabilitation facilities, and 51% fewer CDI in long-term acute care hospitals compared to national 2015 data.



**Table 1: Tennessee Standardized Infection Ratios (SIRs) and Distribution of Facility-specific SIRs for Central Line-Associated Bloodstream Infection (CLABSI), Catheter-Associated Urinary Tract Infection (CAUTI), Surgical Site Infection (SSI) and Laboratory-Identified (LabID) Methicillin-Resistant Staphylococcus aureus (MRSA) and C. difficile Infection (CDI) Events, 01/01/2017 - 12/31/2017**

									Distribution of Facility-specific SIRs									
				No. of Infections		Standardized Infection Ratio (SIR) and 95% CI				No. of Facs with SIR Sig. <1.0		No. of Facs with SIR Sig. >1.0		Key Percentiles				
HAI	Unit/Type	No. of Facilities	Device Days/ Procedures Performed/ Patient Days	Obs.	Pred.	SIR	Lower	Upper	No. of Facs with ≥1 Pred. Infection	N	%	N	%	10%	25%	50%	75%	90%
CLABSI	Adult/Pediatric ICUs	86	232,536	204	240	0.85	0.74	0.97	41	2	5%	0	0%	0.21	0.43	0.81	1.00	1.39
	Adult/Pediatric Wards	103	263,665	152	225	0.68	0.57	0.79	43	7	16%	1	2%	0.00	0.21	0.69	1.23	2.08
	Long-term Acute Care	9	44,308	49	55	0.90	0.67	1.18	9	1	11%	0	0%	0.00	0.52	0.94	1.30	2.31
	Neonatal ICUs	25	39,086	41	55	0.75	0.55	1.01	12	1	8%	0	0%	0.00	0.13	0.60	1.03	1.46
CAUTI	Adult/Pediatric ICUs	86	288,095	271	384	0.71	0.63	0.79	47	9	19%	1	2%	0.00	0.21	0.70	0.98	1.42
	Adult/Pediatric Wards	103	259,350	167	233	0.72	0.62	0.83	48	6	13%	1	2%	0.00	0.21	0.64	1.02	1.82
	Long-term Acute Care	9	33,994	48	53	0.91	0.67	1.19	9	1	11%	2	22%	0.00	0.50	0.91	1.29	2.26
	Inpatient Rehabilitation	30	13,102	30	25	1.22	0.84	1.72	9	0	0%	0	0%	0.00	0.68	1.20	1.83	2.93
SSI	Coronary Artery Bypass Graft	29	6,848	53	53	1.00	0.76	1.30	19	0	0%	1	5%	0.00	0.00	0.60	1.23	2.70
	Colon Surgery	99	8,234	180	217	0.83	0.72	0.96	44	4	9%	2	5%	0.00	0.30	0.81	1.35	1.65
	Abdominal Hysterectomy	99	9,169	60	56	1.07	0.83	1.37	16	0	0%	1	6%	0.00	0.47	0.70	1.43	2.45
MRSA	Inpatient Rehabilitation	31	236,275	14	4	3.12	1.77	5.10	.	.	.	.	.	.	.	.	.	.
	Acute Care Hospitals	106	3,923,484	290	268	1.08	0.96	1.21	45	2	4%	5	11%	0.32	0.64	0.99	1.54	2.76
	Long-Term Acute Care	9	95,741	27	21	1.31	0.88	1.88	8	1	13%	2	25%	0.00	0.22	1.65	2.64	3.46
CDI	Inpatient Rehabilitation	30	229,059	72	98	0.73	0.58	0.92	23	3	13%	1	4%	0.00	0.31	0.66	0.94	1.78
	Acute Care Hospitals	105	3,560,834	2,050	2,467	0.83	0.80	0.87	91	29	32%	5	5%	0.16	0.34	0.68	1.03	1.30
	Long-Term Acute Care	9	95,741	70	112	0.62	0.49	0.78	9	3	33%	0	0%	0.00	0.42	0.60	0.84	1.45

Data reported as of June 20, 2019

Adult/Pediatric ICUs exclude burn and trauma units for CLABSI

Adult Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Green highlighting indicates an SIR significantly LOWER than the 2015 national baseline

Red highlighting indicates an SIR significantly HIGHER than the 2015 national baseline

**Table 2: Tennessee Standardized Infection Ratios (SIRs) and Distribution of Facility-specific SIRs for Central Line-Associated Bloodstream Infection (CLABSI), Catheter-Associated Urinary Tract Infection (CAUTI), Surgical Site Infection (SSI) and Laboratory-Identified (LabID) Methicillin-Resistant Staphylococcus aureus (MRSA) and C. difficile Infection (CDI) Events, 01/01/2018 - 12/31/2018**

										Distribution of Facility-specific SIRs									
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HAI	Unit/Type	No. of Facilities	Device Days/ Procedures Performed/ Patient Days	Obs.	Pred.	SIR	Lower	Upper	No. of Facs with ≥1 Pred. Infection	N	%	N	%	10%	25%	50%	75%	90%	
CLABSI	Adult/Pediatric ICUs	87	221,050	173	229	0.76	0.65	0.87	39	3	8%	1	3%	0.00	0.37	0.75	1.00	1.33	
	Adult/Pediatric Wards	104	239,159	130	207	0.63	0.53	0.74	39	4	10%	0	0%	0.00	0.00	0.51	1.16	1.97	
	Long-term Acute Care	9	39,286	45	44	1.03	0.76	1.37	9	0	0%	1	11%	0.00	0.44	0.65	1.27	1.82	
	Neonatal ICUs	25	38,502	42	53	0.79	0.58	1.06	12	0	0%	1	8%	0.00	0.42	0.65	1.11	1.56	
CAUTI	Adult/Pediatric ICUs	87	274,957	261	372	0.70	0.62	0.79	48	7	15%	1	2%	0.00	0.05	0.53	0.97	1.47	
	Adult/Pediatric Wards	104	237,335	154	212	0.73	0.62	0.85	40	5	13%	0	0%	0.00	0.18	0.60	1.19	1.76	
	Long-term Acute Care	9	28,858	31	43	0.73	0.50	1.02	9	0	0%	0	0%	0.00	0.35	0.62	0.99	1.77	
	Inpatient Rehabilitation	29	13,250	35	22	1.59	1.12	2.18	7	0	0%	1	14%	0.00	0.88	1.39	1.99	3.31	
SSI	Coronary Artery Bypass Graft	28	6,598	46	51	0.90	0.67	1.19	17	0	0%	1	6%	0.00	0.22	0.40	0.96	1.75	
	Colon Surgery	99	8,567	183	231	0.79	0.68	0.91	40	5	13%	2	5%	0.00	0.29	0.67	1.18	1.87	
	Abdominal Hysterectomy	100	8,708	42	54	0.78	0.57	1.05	14	0	0%	0	0%	0.00	0.00	0.54	1.15	1.53	
MRSA	Inpatient Rehabilitation	30	236,764	8	5	1.78	0.83	3.37	.	.	.	.	.	.	.	.	.	.	
	Acute Care Hospitals	107	3,864,445	356	275	1.29	1.17	1.43	45	0	0%	6	13%	0.00	0.79	1.01	1.55	2.87	
	Long-Term Acute Care	9	92,696	17	17	1.02	0.62	1.60	7	0	0%	0	0%	0.00	0.00	1.36	2.16	2.56	
CDI	Inpatient Rehabilitation	29	229,832	61	98	0.63	0.48	0.80	24	4	17%	3	13%	0.00	0.00	0.36	0.83	2.06	
	Acute Care Hospitals	106	3,508,615	1,625	2,378	0.68	0.65	0.72	86	38	44%	1	1%	0.00	0.27	0.59	0.77	1.06	
	Long-Term Acute Care	9	92,696	52	105	0.49	0.37	0.64	9	5	56%	0	0%	0.00	0.27	0.39	0.69	1.35	

Data reported as of June 20, 2019

Adult/Pediatric ICUs exclude burn and trauma units for CLABSI

Adult Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)


Green highlighting indicates an SIR significantly LOWER than the 2015 national baseline

Red highlighting indicates an SIR significantly HIGHER than the 2015 national baseline

# Tennessee's Report on Healthcare-Associated Infections

## **Background**

Healthcare-associated infections (HAIs) are a major public health problem. According to the Centers for Disease Control and Prevention (CDC), there were an estimated 722,000 HAIs and 75,000 HAI-related deaths in the United States in 2011<sup>3</sup>, making HAIs one of the top ten leading causes of death<sup>4</sup>. A 2009 CDC report estimated that the annual medical costs (adjusted to 2007 dollars) of HAIs to U.S. hospitals to be between \$35.7 billion and \$45 billion<sup>5</sup>, though the emotional, physical, and personal costs associated with HAIs are not quantifiable.



*In 2011, there were an estimated 75,000 HAI-related deaths in the United States*

The following report summarizes the TDH Healthcare-Associated Infection reporting activities from January 2017 through December 2018.

<sup>3</sup> Magill SS, Edwards JR, Bamberg W, et al. Multistate Point-Prevalence Survey of Health Care-Associated Infections. *New England Journal of Medicine* 2014;370:1198-208.

<sup>4</sup> Klevens RM, Edwards JR, Richards CL, Jr., et al. Estimating health care-associated infections and deaths in U.S. hospitals, 2002. *Public health reports* 2007;122:160-6.

<sup>5</sup> Scott, RD. The direct medical costs of healthcare-associated infections in US hospitals and the benefits of prevention. 2009; 1-16.

## Methods

### Healthcare-Associated Infections Reporting Requirements in Tennessee

Tennessee healthcare-associated infections reporting requirements are summarized in [Figure 1](#).

Since January 2008, hospitals in Tennessee have been required to report central line-associated bloodstream infection (CLABSI) data from adult and pediatric intensive care units (ICUs, also called “critical care units”) to TDH via NHSN. Hospitals with an average daily census (ADC) less than 25 were exempt from this requirement until January 2012. Neonatal ICUs in Tennessee have been reporting CLABSI data since July 2008. Burn and trauma ICUs and long-term acute care (LTAC) hospitals began reporting CLABSI data in July 2010. Acute care hospitals have been reporting CLABSI data from adult and pediatric medical, surgical, and medical/surgical wards since April 2014.

Surgical site infections (SSI) following coronary artery bypass graft (CBGB/C) procedures have been reportable by Tennessee hospitals since January 2008. SSIs following colon (COLO) procedures and those following abdominal hysterectomy (HYST) procedures have been reportable by Tennessee hospitals since January 2012.

Methicillin-Resistant *Staphylococcus aureus* (MRSA) Laboratory-Identified (LabID) Events and *Clostridium difficile* Infection (CDI) LabID Events have been reportable to TDH since July 2010 from acute care hospitals (facility-wide inpatient locations and emergency departments) and long-term acute care hospitals. Hospitals with an ADC less than 25 were exempt from this requirement until July 2012.

Tennessee acute care hospitals have been required to report catheter-associated urinary tract infection (CAUTI) data in adult and pediatric ICUs to TDH since January 2012. Long-term acute care (LTAC) hospitals and inpatient rehabilitation facilities (IRF) began reporting CAUTI data in October 2012. Acute care hospitals have been reporting CAUTI data from adult and pediatric medical, surgical, and medical/surgical wards since July 2014.

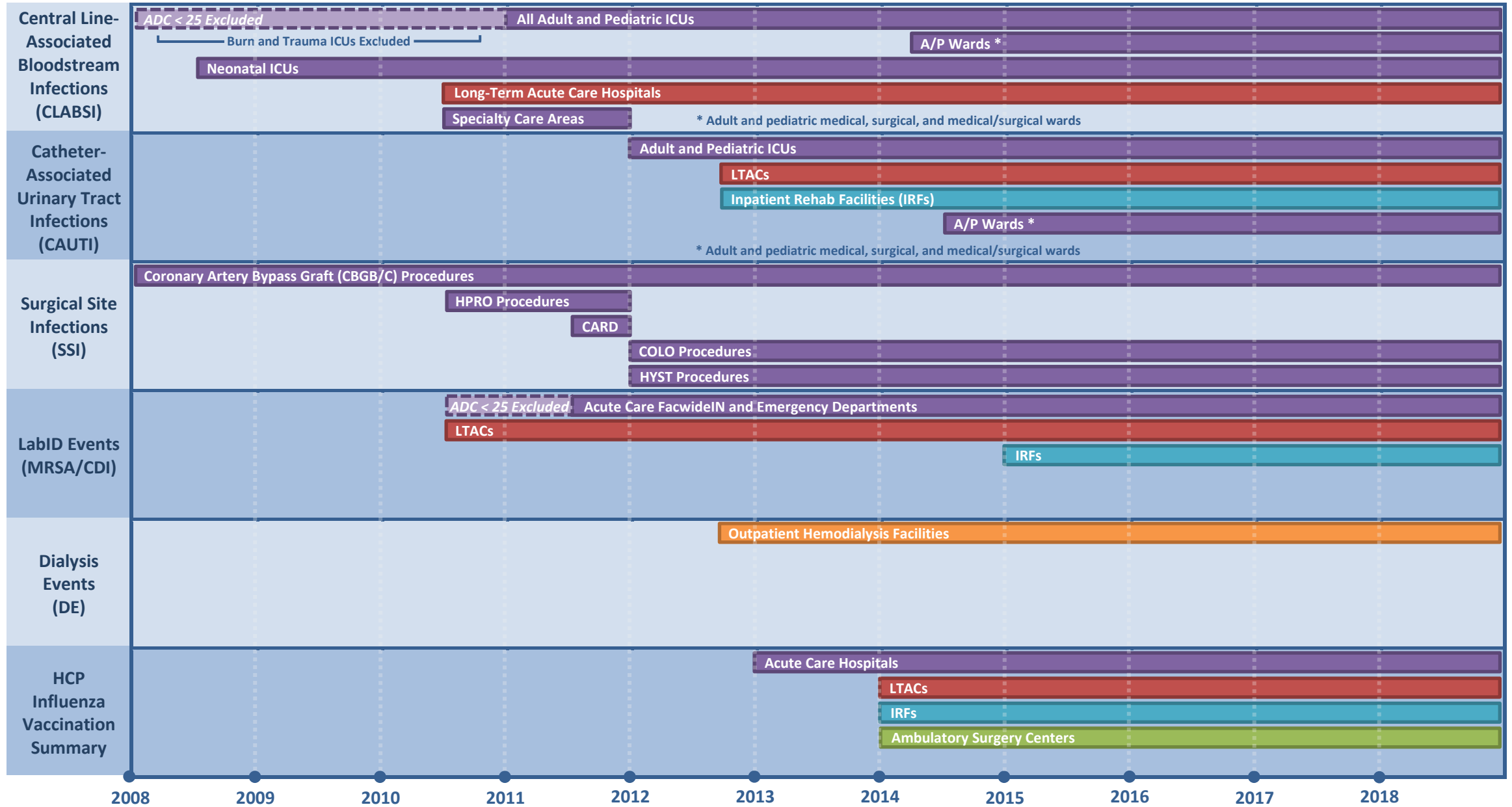
Tennessee acute care hospitals have been required to healthcare personnel influenza vaccination data to TDH through NHSN since the 2012-2013 influenza season. Long-term acute care (LTAC) hospitals and inpatient rehabilitation facilities (IRF) began reporting healthcare personnel influenza vaccination data to TDH in the 2014-2015 influenza season.

*Additional Tennessee Healthcare-Associated Infections Reporting Requirements*

In addition to the Tennessee healthcare-associated infections reporting requirements described above, there are several past and/or current reporting requirements that are not included in this report, including:

- CLABSI from specialty care areas (July 2010-December 2011)
- SSI following hip prosthesis procedures (July 2010-December 2011)
- SSI following cardiac procedures (July 2011-December 2011)
- Dialysis events from outpatient hemodialysis facilities (July 2012-present)
- Healthcare personnel influenza vaccination data from Ambulatory Surgery Centers (2014-2015 influenza season-present)

Figure 1: Tennessee Healthcare-Associated Infections Reporting Requirements, 2008-2018



## Tennessee Reporting Facilities

Characteristics of acute care hospitals reporting HAI data to TDH from January 2017-December 2018 are displayed below. Facilities are stratified by medical school affiliation (as defined by NHSN) and bed size, and data were gathered from the 2017 and 2018 NHSN Annual Facility Survey.

**Table 3. Characteristics of Tennessee Acute Care Hospitals, January-December 2017**

	Number of facilities	Percent
<b>Medical School Affiliation</b>		
Major teaching	22	20.8%
Graduate teaching	9	8.5%
Undergraduate teaching	8	7.5%
None	67	63.2%
<b>Number of Beds</b>		
<50 beds	19	17.9%
50-99 beds	29	27.4%
100-399 beds	48	45.3%
≥400 beds	10	9.4%

**Table 4. Characteristics of Tennessee Acute Care Hospitals, January-December 2018**

	Number of facilities	Percent
<b>Medical School Affiliation</b>		
Major teaching	22	21.8%
Graduate teaching	11	10.9%
Undergraduate teaching	13	12.9%
None	55	54.4%
<b>Number of Beds</b>		
<50 beds	18	17.8%
50-99 beds	30	29.7%
100-399 beds	42	41.6%
≥400 beds	11	10.9%



## Timeliness, Completeness and Accuracy of Reporting

TDH staff monitored the timeliness, completeness, and accuracy of hospital reports. In each Tennessee state HAI report, facilities with missing data during the reporting period are displayed in [Table 5](#). Five facilities did not report the 2018/2019 HCP Influenza Vaccination Data due to facility closure.

**Table 5: Facilities Noncompliant with Healthcare Personnel Influenza Vaccination Data Requirements for the Reporting Period January 2017-December 2018**

Facility	Missing Data	Reason for Missing Data
Decatur County General Hospital	2018/2019 Influenza Data	Non-Reporter
McKenzie Regional Hospital	2018/2019 Influenza Data	Facility Closure
Tennova - Jamestown	2018/2019 Influenza Data	Facility Closure
Tennova - Lakeway Regional Hospital	2018/2019 Influenza Data	Facility Closure
Tennova - Regional Jackson	2018/2019 Influenza Data	Ownership Change

## Data Validation

*Data reported to NHSN are validated using several methods:*

**Point-of-entry checks:** NHSN is a web-based data reporting and submission program that includes validation routines for many data elements, thus reducing common data entry errors. Hospitals can enter, view, edit, and analyze their data at any time.

**Monthly checks for internal consistency:** Each month, TDH staff download CLABSI, CAUTI, SSI, and LabID (MRSA/CDI) data from NHSN and verify completeness with a computerized data validation program. Data that are missing, unusual, inconsistent, or duplicative are identified and investigated through email and/or telephone communication with hospital staff. Hospitals are given the opportunity to verify and/or correct the data.

**On-site audits:** Audits of a sample of medical records were conducted by TDH to assess compliance with reporting requirements. SSI events following COLO procedures reported from January-June 2017 were audited by HAI program staff during onsite visits at 22 reporting hospitals. These visits consisted of reviewing medical charts from facility-wide inpatient units. CLABSI events reported from January-June 2018 were audited by HAI program staff during onsite visits at 20 reporting hospitals. These visits consisted of reviewing medical charts from adult and pediatric ICUs and medical, surgical and medical/surgical wards. The purposes of the audits were to:

- Enhance reliability and consistency in applying NHSN surveillance definitions
- Evaluate the adequacy of surveillance methods to detect infections
- Evaluate intervention strategies designed to reduce or eliminate specific infections
- Discuss identified inconsistencies and allow hospitals to modify records as needed

Ongoing monitoring, education, and trainings are provided to ensure integrity of the data. Some facilities also conduct their own validation studies.

## **Risk Adjustment**

Risk adjustment is a statistical technique that allows hospitals to be compared fairly by accounting for differences in patient populations in terms of illness severity and other factors that may affect the risk of developing a HAI. For example, a hospital that performs a large number of complex procedures on very sick patients would be expected to have a higher infection rate than a hospital that performs more routine procedures on healthier patients. Therefore, before comparing the infection rates of hospitals, it is important to adjust for the number and proportion of high- and low-risk patients by calculating a statistically 'expected' or predicted number of infections. Different risk adjustment methods are used for different types of HAIs.

## **2015 Rebaseline**

The 2015 rebaseline updated both the source of aggregate data and the risk adjustment methodology used to create the original baselines. Before 2015, the baselines, or reference points, varied among the different HAI measures (e.g., several infections had different baselines). In previous Tennessee HAI reports, the number of predicted infections was estimated based on those original baselines. In this report, the number of predicted infections is an estimate based on infections reported to NHSN by participating facilities nationwide during the 2015 national baseline. Therefore, the data in this report are not comparable with previous Tennessee HAI reports. Moving forward, HAI prevention progress for 2015 and subsequent years will be measured in comparison to infection data from 2015.

## Standardized Infection Ratio - Overview

The SIR is identical in concept to a standardized mortality ratio and is an indirect standardization method for summarizing the HAI experience across any number of stratified groups of data. The SIR is calculated by dividing the number of observed infections by the number of statistically predicted infections based on the NHSN standard population and appropriate patient and facility-level risk adjustment:

$$\text{SIR} = \frac{\text{Observed HAIs}}{\text{Predicted HAIs}}$$

- A SIR of 1.0 means the observed number of infections is equal to the number of predicted infections
- A SIR greater than 1.0 means there were more infections than predicted. For example, if a facility has a CLABSI SIR=1.5, they experienced 50% more CLABSIs than predicted.
- A SIR less than 1.0 means there were fewer infections than predicted. For example, if a facility has a CLABSI SIR=0.8, they experienced 20% fewer CLABSIs than predicted.

### Calculation of Confidence Interval of the SIR<sup>6</sup>:

This report uses the 95% confidence interval to describe statistical significance when reporting the SIR. Consistent with CDC/NHSN methodology, exact mid-p confidence intervals are used when observed and expected numbers of events are less than or equal to 100; otherwise, the Byar approximation method is used.<sup>7</sup>

In this report, statistical analyses were performed and tables and figures were created using SAS version 9.4.

<sup>6</sup> Rothman KJ, Boice JD Jr: Epidemiologic analysis with a programmable calculator. NIH Pub No. 79-1649. Bethesda, MD: National Institutes of Health, 1979;31-32.

<sup>7</sup> <http://www.cdc.gov/nhsn/sas/SIRcomp.sas>

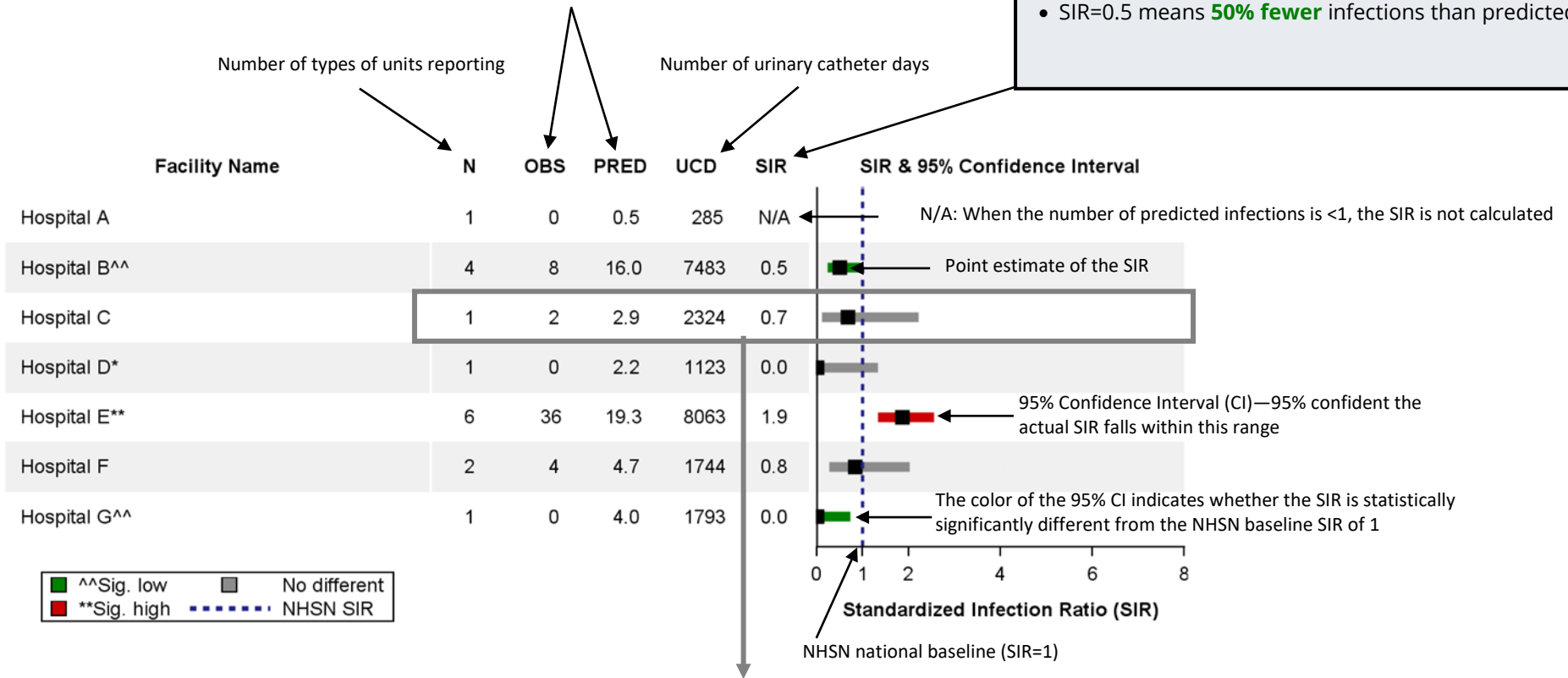
**Figure 2: How to Read Hospital-Specific Standardized Infection Ratio Figures**

**OBS** = Number of infections observed  
**PRED** = Number of infections predicted based on NHSN national baseline data

**Standardized Infection Ratio (SIR):**

$$\text{SIR} = \frac{\text{Number of infections observed}}{\text{Number of infections predicted}}$$

- SIR=1.3 means **30% more** infections than predicted
- SIR=0.5 means **50% fewer** infections than predicted



**Example: Hospital C**

N	OBS	PRED	UCD	SIR	SIR & 95% Confidence Interval
1	2	2.9	2324	0.7	

**During the reporting period, Hospital C:**

- Reported 2,324 urinary catheter days (**UCD**) from one type of ICU (**N**)
- Observed 2 infections (**OBS**)
- Based on NHSN national baseline data, 2.9 infections were predicted (**PRED**)

**Hospital C's Standardized Infection Ratio (SIR)**

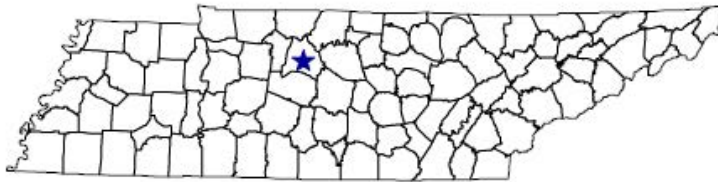
- Not statistically significantly different from the NHSN SIR of 1
- SIR=0.7 (2 observed infections/2.9 predicted infections)
- 30% fewer infections than predicted

**Figure 3: Example Facility-Specific Summary Pages**

**TDH Central - Nashville, Davidson County**

Medical School Affiliation: Graduate teaching

Bed Size Category: 400+ beds



**Section 1:**

Facility information from the NHSN 2017 Annual Survey

**Healthcare-Associated Infections (HAI) Summary**

**Standardized Infection Ratio (SIR) by Infection Type, 01/01/2017-12/31/2017**

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		
		Observed	Predicted		SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	4	11.6	10347	0.34	(0.11, 0.83)	0.85
	Adult/Pediatric Ward	4	11.2	11520	0.36	(0.11, 0.86)	0.68
CAUTI	Adult/Pediatric ICU	8	12.4	7242	0.64	(0.30, 1.22)	0.71
	Adult/Pediatric Ward	1	6.5	5565	0.15	(0.01, 0.75)	0.72
SSI	Colon surgery	12	9.9	368	1.20	(0.65, 2.05)	0.83
	Abdominal hysterectomy	1	1.4	173	0.71	(0.04, 3.50)	1.07
LabID	MRSA bacteremia	9	15.7	170305	0.57	(0.28, 1.05)	1.08
	C. difficile infection	173	140.4	170305	1.23	(1.06, 1.43)	0.83

Green highlighting indicates an SIR significantly LOWER than the 2015 national baseline

Red highlighting indicates an SIR significantly HIGHER than the 2015 national baseline

N/A: Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

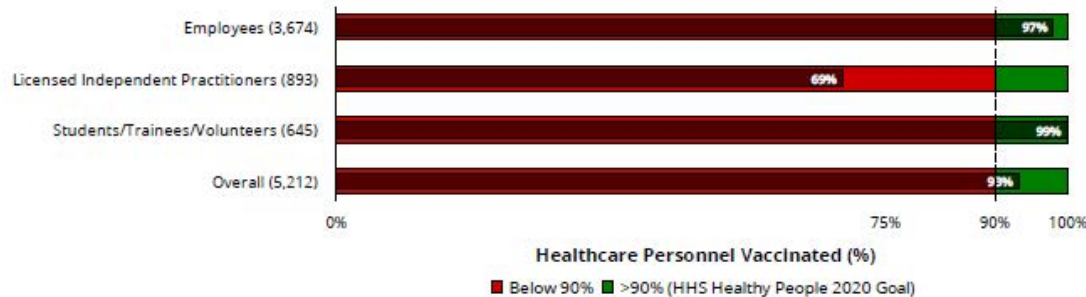
See page 3 for more detailed information about HAI at TDH Central

**Section 2:**

Facility-Specific Standardized Infection Ratios (SIRs) by HAI from January – December 2017

**Healthcare Personnel Influenza Vaccination - '2017/2018' Influenza Season**

**Healthcare Personnel Category (Total)**

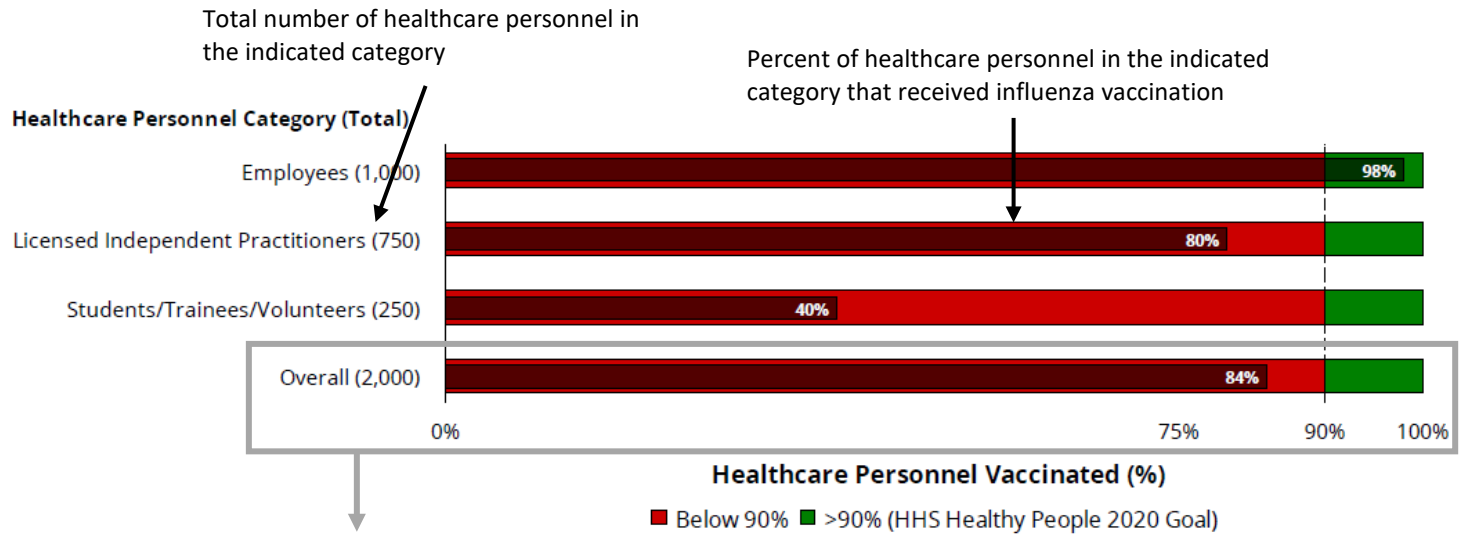


**Section 3:**

Healthcare personnel influenza vaccination rates for the 2017/2018 influenza season

## How to Read Facility-Specific Figures on Facility-Specific Summary Pages

**Figure 4: How to Read Facility-Specific Healthcare Personnel Influenza Vaccination Figures**



**Example:**

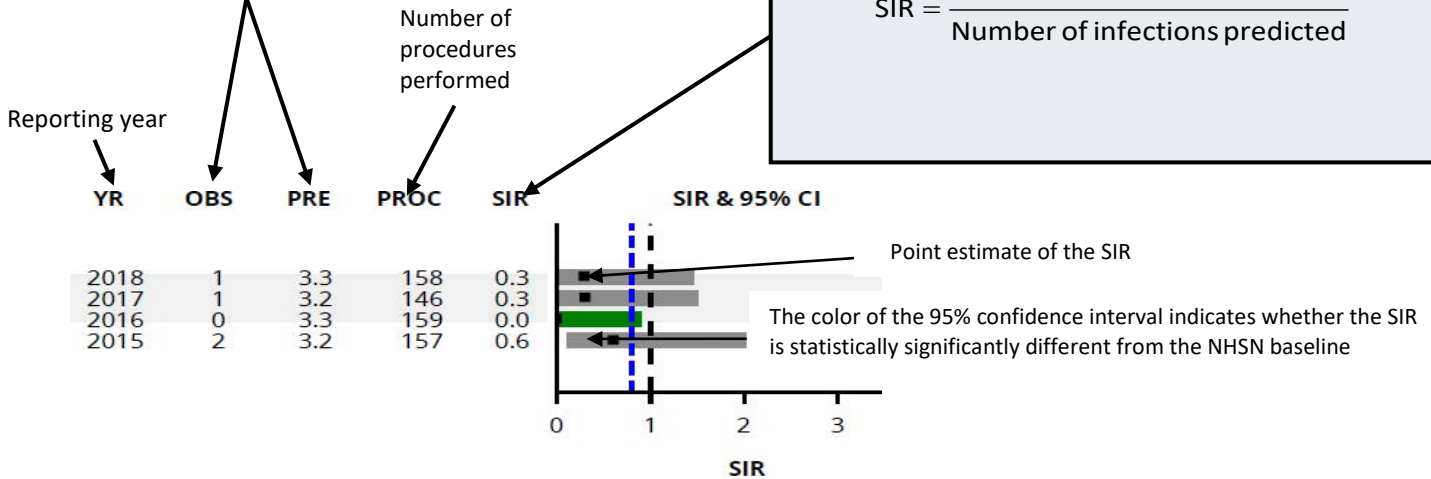
- 2,000 total healthcare personnel at this facility
- 84% received influenza vaccination during this flu season
- Did not reach Healthy People 2020 Goal (90%)

**Figure 5: How to Read Facility-Specific Standardized Infection Ratio Figures**

**OBS** = Number of infections observed

**PRED** = Number of infections predicted based on NHSN national baseline data

$$SIR = \frac{\text{Number of infections observed}}{\text{Number of infections predicted}}$$



**Example:**

**In 2018, this facility:**

- Performed 158 procedures (**PROC**)
- Observed 1 infections (**OBS**)
- Based on NHSN national baseline data, 3.3 infections were predicted (**PRED**)

**This Facility's Standardized Infection Ratio (SIR)**

- Not statistically significantly different from the NHSN SIR of 1
- SIR=0.3 (1 observed infections/3.3 predicted infections)
- 70% fewer infections than predicted

# Central Line-Associated Bloodstream Infections (CLABSI)



## ***Central Line-Associated Bloodstream Infections (CLABSI)***

A central line or central venous catheter is a flexible tube that is inserted in a patient's blood vessel and terminates at or close to the heart or in one of the large vessels near the heart. A central line (or an umbilical line for newborns) can be used to give fluids, antibiotics, medical treatments such as chemotherapy, and/or liquid food. If a central line is inserted incorrectly or not cared for properly, it can lead to dangerous bloodstream infections, known as central line-associated bloodstream infections. Healthcare facilities can prevent CLABSIs by following appropriate infection prevention recommendations when placing and maintaining a central line, and by removing a central line as soon as it is no longer medically necessary (see [Patient Guide to CLABSI](#)<sup>8</sup>).

### **Reporting Requirements**

Since January 2008, acute care hospitals in Tennessee have been required to report CLABSI data from adult and pediatric intensive care units (ICUs, also called "critical care units") to TDH. Hospitals with an average daily census (ADC) less than 25 were exempt from this requirement until January 2012. Neonatal ICUs in Tennessee have been reporting CLABSI data since July 2008. Burn and trauma ICUs, and long-term acute care (LTAC) hospitals began reporting CLABSI data in July 2010. Acute care hospitals began reporting CLABSI from adult and pediatric medical, surgical, and medical/surgical wards in April 2014.

To comply with these reporting requirements, facilities are required to follow the [NHSN CLABSI Surveillance protocol](#)<sup>9</sup>, which is updated each year with CLABSI surveillance definitions and reporting instructions. Facilities must report the number of central line and patient days for each applicable location each month to NHSN. They are also required to report any bloodstream infections which meet the NHSN surveillance definition of a CLABSI in required locations.

### **Facility-Specific Data Thresholds**

When the number of central line days is small, even a few infections will yield a numerically high infection rate. To ensure fair and accurate reporting of facility-specific CLABSI rates and standardized infection ratios (SIR), TDH has adopted the NHSN minimum thresholds for reporting. To report a facility-specific CLABSI rate or SIR, there must be a minimum of 50 central line-days for the reporting period. To report a facility-specific SIR, the statistically predicted number of infections must be at least 1.0.

<sup>8</sup> [http://www.cdc.gov/hai/pdfs/bsi/BSI\\_tagged.pdf](http://www.cdc.gov/hai/pdfs/bsi/BSI_tagged.pdf)

<sup>9</sup> [http://www.cdc.gov/nhsn/PDFs/pscManual/4PSC\\_CLABScurrent.pdf](http://www.cdc.gov/nhsn/PDFs/pscManual/4PSC_CLABScurrent.pdf)

## CLABSI Risk Adjustment

We use the SIR as a summary measure to compare CLABSI data for facilities in TN to the national benchmark from a baseline time period. Recently, CDC introduced the SIR “rebaseline,” a term that is being used to describe updates to the previous (or original) HAI baselines. CDC used 2015 HAI data to create the updated SIR baselines, which includes updates to both the source of aggregate data and the risk adjustment methodology used to calculate the number of predicted events. Before 2015, the time period used to establish the baseline, or reference points, varied among the different HAI measures. Thus, in previous TN HAI reports, the number of predicted infections was estimated based on those original baselines. Therefore, the data in this report are not comparable with previous HAI reports. The CLABSI SIR is calculated by dividing the total number of observed CLABSI events by the predicted\* number of CLABSIs. This predicted number, which can also be understood as a projection, is calculated using a negative binomial regression model and is adjusted for each facility using variables found to be significant predictors of HAI incidence. The model adjusts for hospital location, facility type, bed size and medical school affiliation in acute care hospitals. Additionally, in acute care NICU locations, birthweight is adjusted for. In LTACHs, average length of stay, hospital location, facility bed size, and proportion of admissions on a ventilator and hemodialysis are adjusted for. Further details can be seen in the [NHSN Guide to the SIR](#).<sup>10</sup>

\* “Predicted” is used throughout the report as a synonym for the standard statistical term “expected”.

<sup>10</sup> <https://www.cdc.gov/nhsn/pdfs/ps-analysis-resources/nhsn-sir-guide.pdf>

# CLABSI

*Adult and Pediatric Critical Care Units*

## CLABSIs in Adult/Pediatric ICUs

**Total number of hospitals reporting from January-December 2017: 86**

**Total number of hospitals reporting from January-December 2018: 87**

### **SIRs by Quarter (Figure 6, Figure 7)**

- From January–March 2017 to July–September 2017, the overall CLABSI SIR in Tennessee increased from 0.78 to 1.03 and then decreased to 0.82 during the fourth quarter from October-December 2017. During 2018, the overall CLABSI SIR fluctuated from 0.81 in January-March to 0.72 during October-December. The CLABSI SIR from January 2017-December 2018 remained above the 2020 U.S. Department of Health and Human Services' [National Action Plan to Prevent Healthcare-Associated Infections](#) prevention target of SIR = 0.50.

### **Key Percentiles for Tennessee SIRs (Table 6, Table 7)**

- Including burn and trauma ICUs, the overall SIR across all reporting adult and pediatric ICUs in Tennessee from January-December 2017 was statistically significantly lower than the national SIR of 1 (SIR=0.87; 95% CI: 0.76, 0.98). Including burn and trauma ICUs, the overall SIR across all reporting adult and pediatric ICUs in Tennessee from January-December 2018 was statistically significantly lower than the national SIR of 1 (SIR=0.74 95% CI: 0.64, 0.85).
- Excluding burn and trauma ICUs, the overall SIR across all reporting adult and pediatric ICUs in Tennessee from January-December 2017 was statistically significantly lower than the national SIR of 1 (SIR=0.85; 95% CI: 0.74, 0.97). The SIR from January-December 2018 was statistically significantly lower than the national SIR of 1 (SIR=0.76; 95% CI: 0.65, 0.87).
- In 2017, the median (50<sup>th</sup> percentile) facility-specific SIR was 0.81, indicating that half of all reporting Tennessee hospitals with at least 1 predicted infection had a SIR at or below 0.81. In 2018, the median facility-specific SIR was 0.75.

### **SIRs by Unit Type (Figure 8, Table 8)**

- In 2017, CLABSI SIRs were highest among burn critical care units (SIR=1.21), neurologic critical care (SIR=1.73) and pediatric surgical cardiothoracic critical care locations (SIR=1.26). Tennessee CLABSI SIRs were significantly lower than the 2015 baseline SIR in the medical-surgical critical care locations.

- In 2018, CLABSI SIRs were highest among neurologic critical care and surgical critical care locations. Tennessee CLABSI SIRs were significantly lower than the 2015 baseline SIR in the medical-surgical critical care, pediatric medical-surgical critical care, and trauma critical care locations.

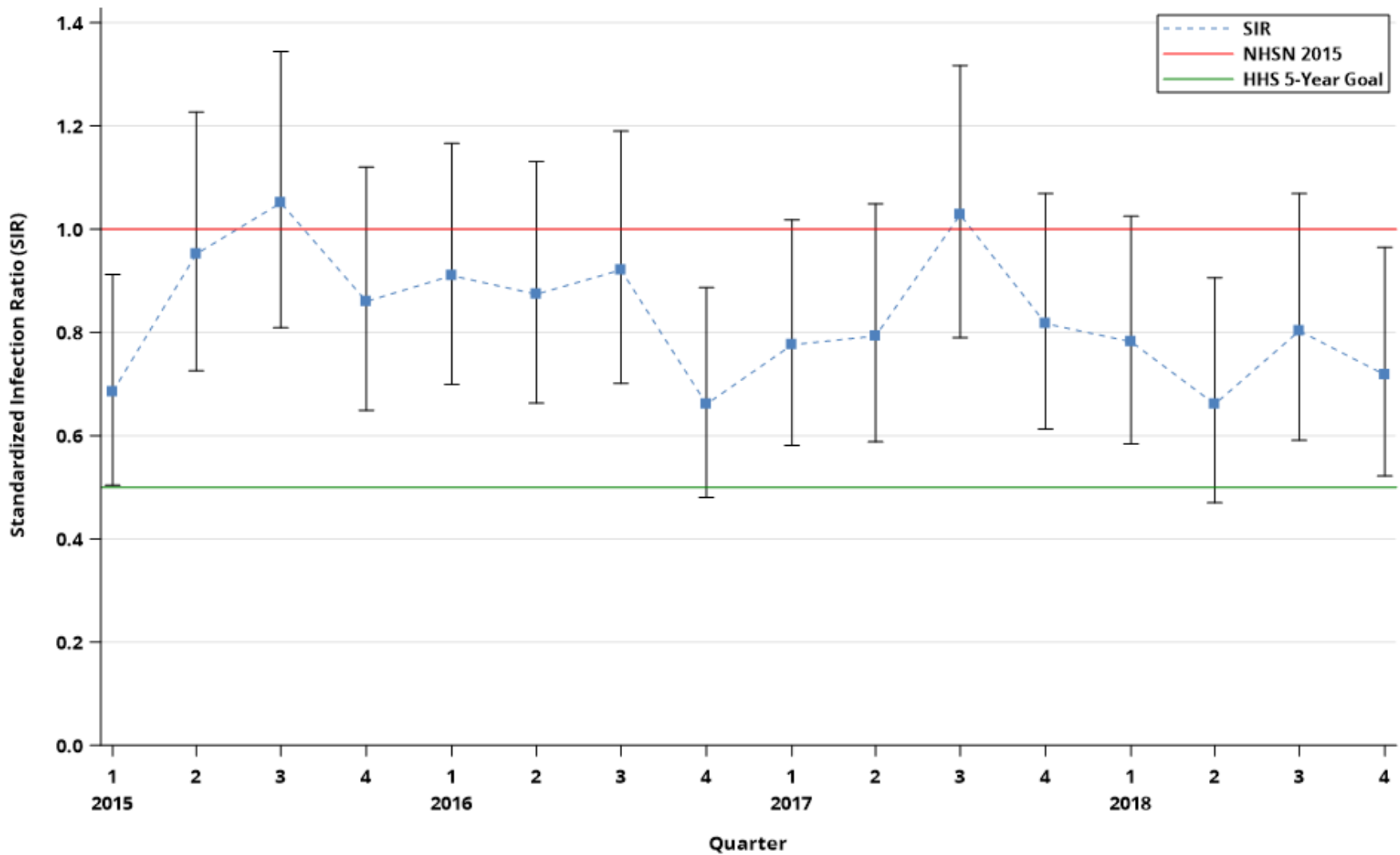
#### **Microorganisms Associated with CLABSIs in Adult and Pediatric ICUs (Table 9, Table 10)**

- Among the 265 pathogens isolated from 242 CLABSIs in 2017, the most common pathogens were *Candida* species and other yeasts (24%), coagulase-negative *Staphylococcus* species (20%), and *Enterococcus* species (14%). Methicillin-Resistant *S. aureus* (MRSA) accounted for 3% and vancomycin-resistant *Enterococcus* (VRE) for 3% of total positive isolates.
- Among the 225 pathogens isolated from 199 CLABSIs in 2018, the most common pathogens were *Candida* species and other yeasts (26%), *Enterococcus* species (16%) and coagulase-negative *Staphylococcus* species (15%). Methicillin-Resistant *S. aureus* (MRSA) accounted for 6% and vancomycin-resistant *Enterococcus* (VRE) for 8% of total positive isolates.

#### **Facility-Specific CLABSI SIRs (Figure 9, Figure 10)**

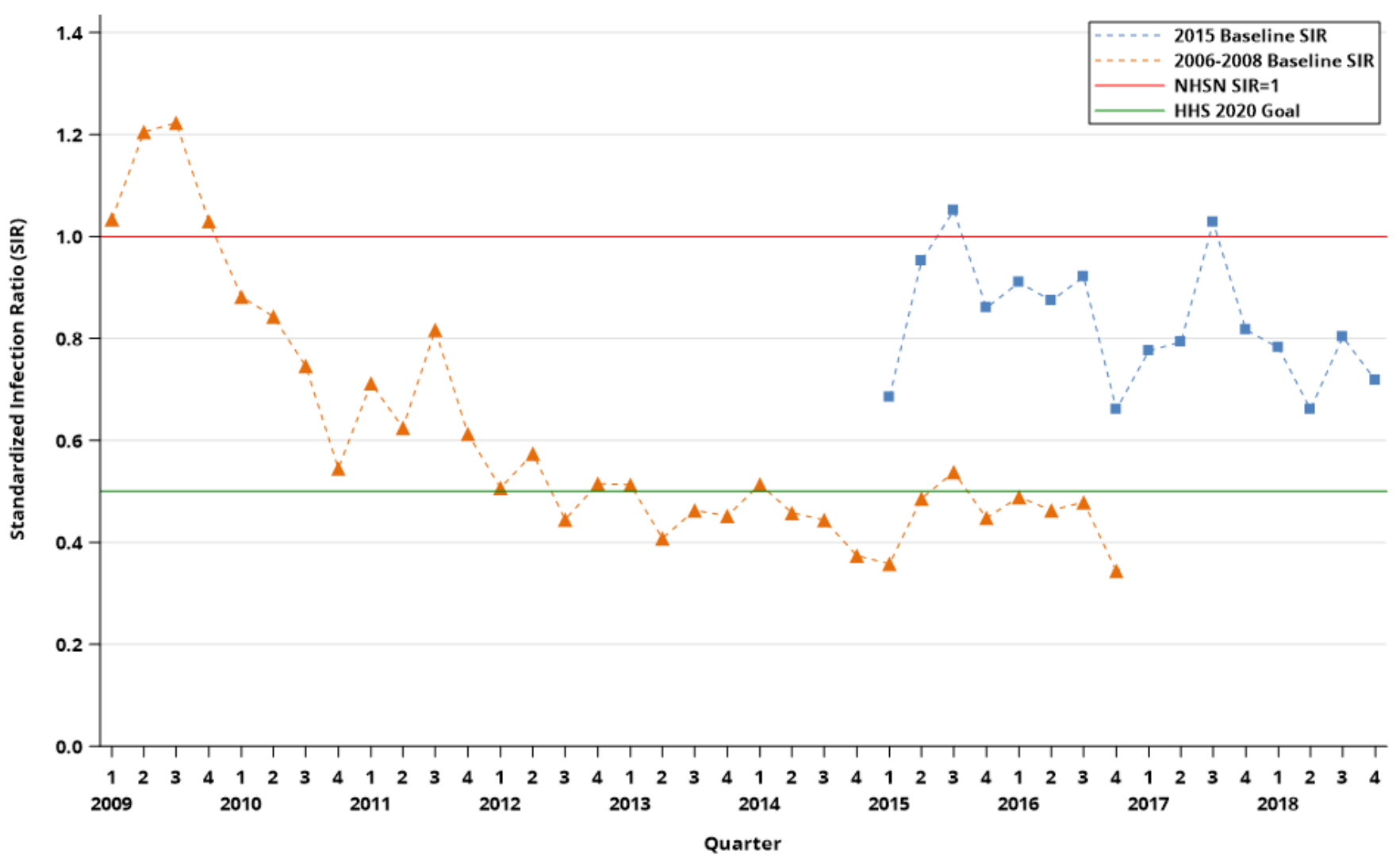
- One CLABSI SIR that accounts for all reporting adult/pediatric ICUs in each facility is displayed in [Figure 9](#) and [Figure 10](#). The bar representing the confidence interval is green if the CLABSI SIR was significantly lower than the national SIR of 1 for 2015, and red if the CLABSI SIR was significantly higher than 1. Some hospitals reported zero CLABSIs (indicated with an asterisk), although the facility's SIR may not be statistically significant due to a relatively small number of central line-days.
- In 2017, two facilities had a CLABSI SIR that was significantly lower than the 2015 national baseline SIR of 1. In 2018, 3 facilities had a CLABSI SIR that was significantly lower than the 2015 national baseline SIR of 1. One facility had a CLABSI SIR that was significantly higher than the baseline.

Figure 6: Standardized Infection Ratios (SIR) for Central Line-Associated Bloodstream Infections (CLABSIs) for Adult and Pediatric Intensive Care Units (ICUs) by Quarter, Excluding Burn and Trauma ICUs, Tennessee, 01/01/2015–12/31/2018 [Reference standard: National Healthcare Safety Network (NHSN), 2015]



Data Reported as of June 20, 2019

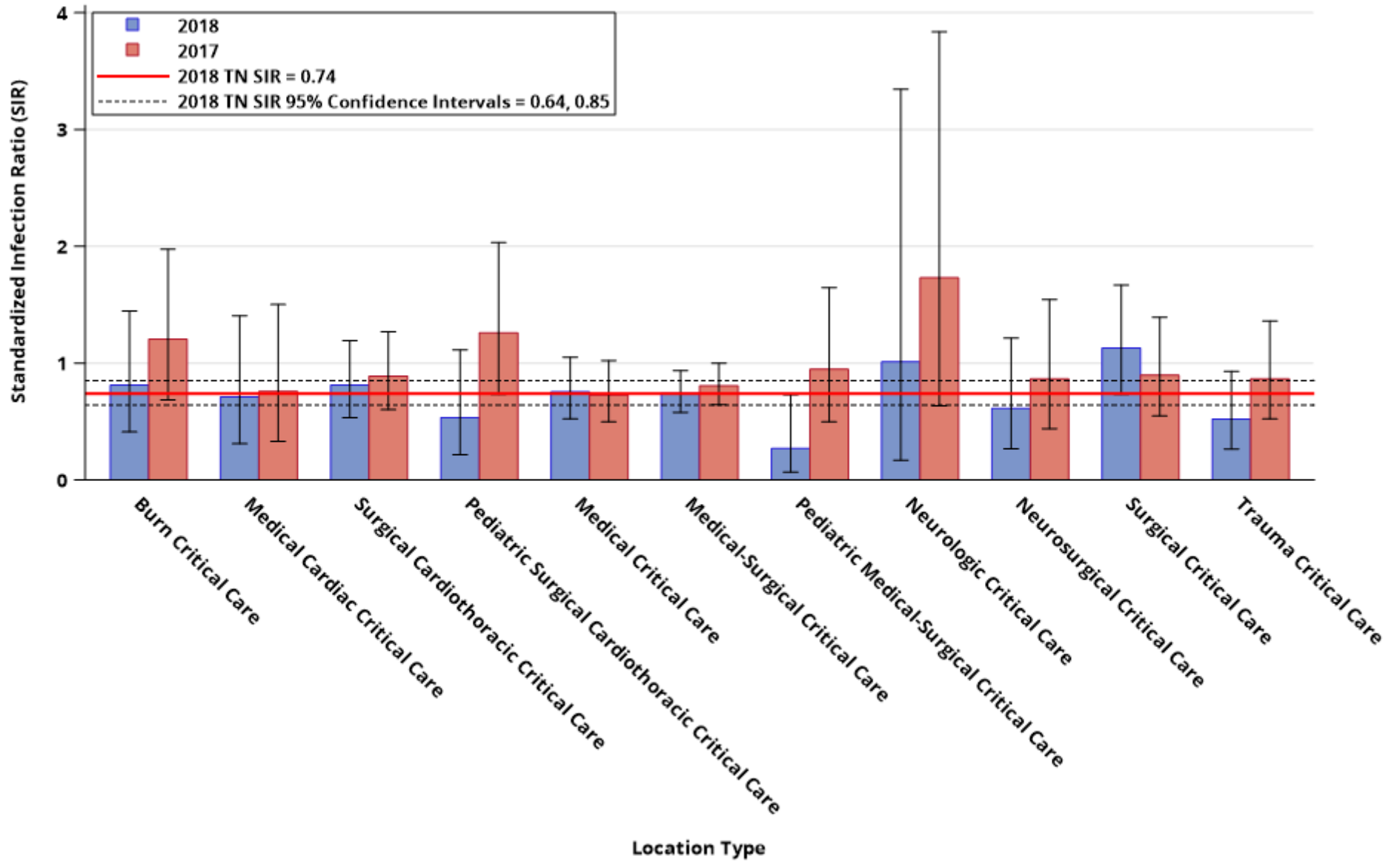
Figure 7: Standardized Infection Ratios (SIR) for Central Line-Associated Bloodstream Infections (CLABSI) for Adult and Pediatric Intensive Care Units (ICUs) by Quarter, Excluding Burn and Trauma ICUs, Tennessee, 01/01/2009–12/31/2018



Data Reported as of June 20, 2019



Figure 8: Standardized Infection Ratios (SIRs) for Central Line-Associated Bloodstream Infections (CLABSI) by Intensive Care Unit (ICU) Type, Tennessee, 2017 and 2018 [Reference standard: National Healthcare Safety Network (NHSN), 2015]



Data Reported as of August 27, 2019

**Table 6: Key Percentiles for Facility-Specific Central Line-Associated Bloodstream Infection (CLABSI) Standardized Infection Ratios (SIRs) in Adult and Pediatric Intensive Care Units (ICUs) by Reporting Year, Including Burn and Trauma Units, Tennessee, 01/01/2017 - 12/31/2018**

									DISTRIBUTION OF FACILITY-SPECIFIC SIRs										
				No. of INFECTIONS		SIR AND 95% CONFIDENCE INTERVAL					No. of FACS WITH SIR SIG. <1.0		No. of FACS WITH SIR SIG. >1.0						
STATE	YEAR	No.	CL DAYS	OBS	PRED	SIR	LOWER LIMIT	UPPER LIMIT	No. of FACS WITH ≥1 PRED INFECTION	N	%	N	%	10%	25%	50%	75%	90%	
Tennessee	2018	87	237,768	193	260.48	0.74	0.64	0.85	39	4	10%	1	3%	0.00	0.35	0.74	1.00	1.25	
	2017	86	249,089	235	270.87	0.87	0.76	0.98	41	2	5%	1	2%	0.16	0.43	0.77	0.99	1.54	

Data reported as of June 20, 2019

No. = number of facilities; CL Days = central line days; OBS = observed number of CLABSI

PRED = statistically 'predicted' number of CLABSI; SIR = standardized infection ratio (observed/predicted number of CLABSI)

Key percentiles include facilities with at least one predicted infection

Red highlighting indicates SIR for reporting period is significantly higher than national 2015 SIR of 1.0

Green highlighting indicates SIR for reporting period is significantly lower than national 2015 SIR of 1.0

**Table 7: Key Percentiles for Facility-Specific Central Line-Associated Bloodstream Infection (CLABSI) Standardized Infection Ratios (SIRs) in Adult and Pediatric Intensive Care Units (ICUs) by Reporting Year, Excluding Burn and Trauma Units, Tennessee, 01/01/2017 - 12/31/2018**

									DISTRIBUTION OF FACILITY-SPECIFIC SIRs										
				No. of INFECTIONS		SIR AND 95% CONFIDENCE INTERVAL					No. of FACS WITH SIR SIG. <1.0		No. of FACS WITH SIR SIG. >1.0						
STATE	YEAR	No.	CL DAYS	OBS	PRED	SIR	LOWER LIMIT	UPPER LIMIT	No. of FACS WITH ≥1 PRED INFECTION	N	%	N	%	10%	25%	50%	75%	90%	
Tennessee	2018	87	221,050	173	229.00	0.76	0.65	0.87	39	3	8%	1	3%	0.00	0.34	0.75	1.00	1.33	
	2017	86	232,536	204	239.67	0.85	0.74	0.97	41	2	5%	0	0%	0.21	0.43	0.81	1.00	1.39	

Data reported as of June 20, 2019

No. = number of facilities; CL Days = central line days; OBS = observed number of CLABSI

PRED = statistically 'predicted' number of CLABSI; SIR = standardized infection ratio (observed/predicted number of CLABSI)

Key percentiles include facilities with at least one predicted infection

Red highlighting indicates SIR for reporting period is significantly higher than national 2015 SIR of 1.0

Green highlighting indicates SIR for reporting period is significantly lower than national 2015 SIR of 1.0

**Table 8: Key Percentiles for Unit-Specific Central Line-Associated Bloodstream Infection (CLABSI) Standardized Infection Ratios (SIRs) by Type of Intensive Care Unit (ICU) and Reporting Year, Tennessee, 01/01/2017 - 12/31/2018**

ICU TYPE	YEAR	No.	CL DAYS	No. of INFECTIONS		SIR AND 95% CONFIDENCE INTERVAL			DISTRIBUTION OF FACILITY-SPECIFIC SIRs					
				OBS	PRED	SIR	LOWER LIMIT	UPPER LIMIT	No. of FACS WITH ≥1 PRED INFECTION	10%	25%	50%	75%	90%
Burn Critical Care	2018	2	3,635	10	12.34	0.81	0.41	1.45	2	N/A	N/A	N/A	N/A	N/A
	2017	2	3,422	14	11.61	1.21	0.69	1.98	2	N/A	N/A	N/A	N/A	N/A
Medical Cardiac Critical Care	2018	5	9,798	7	9.85	0.71	0.31	1.41	4	N/A	N/A	N/A	N/A	N/A
	2017	5	9,245	7	9.22	0.76	0.33	1.50	4	N/A	N/A	N/A	N/A	N/A
Medical Critical Care	2018	28	42,145	32	42.46	0.75	0.52	1.05	13	0.00	0.41	0.76	1.02	1.57
	2017	27	41,088	30	41.35	0.73	0.50	1.02	13	0.00	0.43	0.60	0.88	1.05
Medical-Surgical Critical Care	2018	60	93,714	67	90.37	0.74	0.58	0.94	24	0.00	0.26	0.73	1.26	1.52
	2017	59	103,250	80	99.17	0.81	0.64	1.00	28	0.00	0.33	0.68	1.04	1.73
Neurologic Critical Care	2018	1	1,751	2	1.98	1.01	0.17	3.34	1	N/A	N/A	N/A	N/A	N/A
	2017	1	2,560	5	2.89	1.73	0.63	3.84	1	N/A	N/A	N/A	N/A	N/A
Neurosurgical Critical Care	2018	10	10,974	7	11.41	0.61	0.27	1.21	5	0.00	0.52	0.66	0.79	0.94
	2017	10	11,183	10	11.55	0.87	0.44	1.54	5	0.00	0.00	0.68	1.04	2.02
Pediatric Medical Critical Care	2017	1	0	0	0.00	.	.	.	.	N/A	N/A	N/A	N/A	N/A
Pediatric Medical-Surgical Critical Care	2018	7	7,724	3	11.16	0.27	0.07	0.73	4	N/A	N/A	N/A	N/A	N/A
	2017	6	8,040	11	11.61	0.95	0.50	1.65	3	N/A	N/A	N/A	N/A	N/A
Pediatric Neurosurgical Critical Care	2018	1	431	2	0.72	.	.	.	.	N/A	N/A	N/A	N/A	N/A
	2017	1	307	0	0.51	.	.	.	.	N/A	N/A	N/A	N/A	N/A
Pediatric Surgical Cardiothoracic Critical Care	2018	2	7,361	6	11.21	0.54	0.22	1.11	2	N/A	N/A	N/A	N/A	N/A
	2017	2	7,817	15	11.90	1.26	0.73	2.03	2	N/A	N/A	N/A	N/A	N/A
Surgical Cardiothoracic Critical Care	2018	13	28,063	24	29.50	0.81	0.53	1.19	11	0.00	0.00	0.83	1.23	1.34
	2017	13	29,921	28	31.45	0.89	0.60	1.27	13	0.00	0.29	0.83	0.96	1.57
Surgical Critical Care	2018	9	19,089	23	20.35	1.13	0.73	1.67	8	0.00	0.10	0.93	1.66	2.80
	2017	9	19,125	18	20.04	0.90	0.55	1.39	8	0.00	0.36	0.75	1.14	1.73
Trauma Critical Care	2018	6	13,083	10	19.14	0.52	0.27	0.93	5	0.29	0.43	0.58	0.66	0.70
	2017	6	13,131	17	19.58	0.87	0.52	1.36	6	0.00	0.00	0.00	0.27	2.31

Data reported as of June 20, 2019

No. = number of facilities; CL Days = central line days; OBS = observed number of CLABSI

PRED = statistically 'predicted' number of CLABSI; SIR = standardized infection ratio (observed/predicted number of CLABSI)

N/A = not reported if the number of facilities is <5

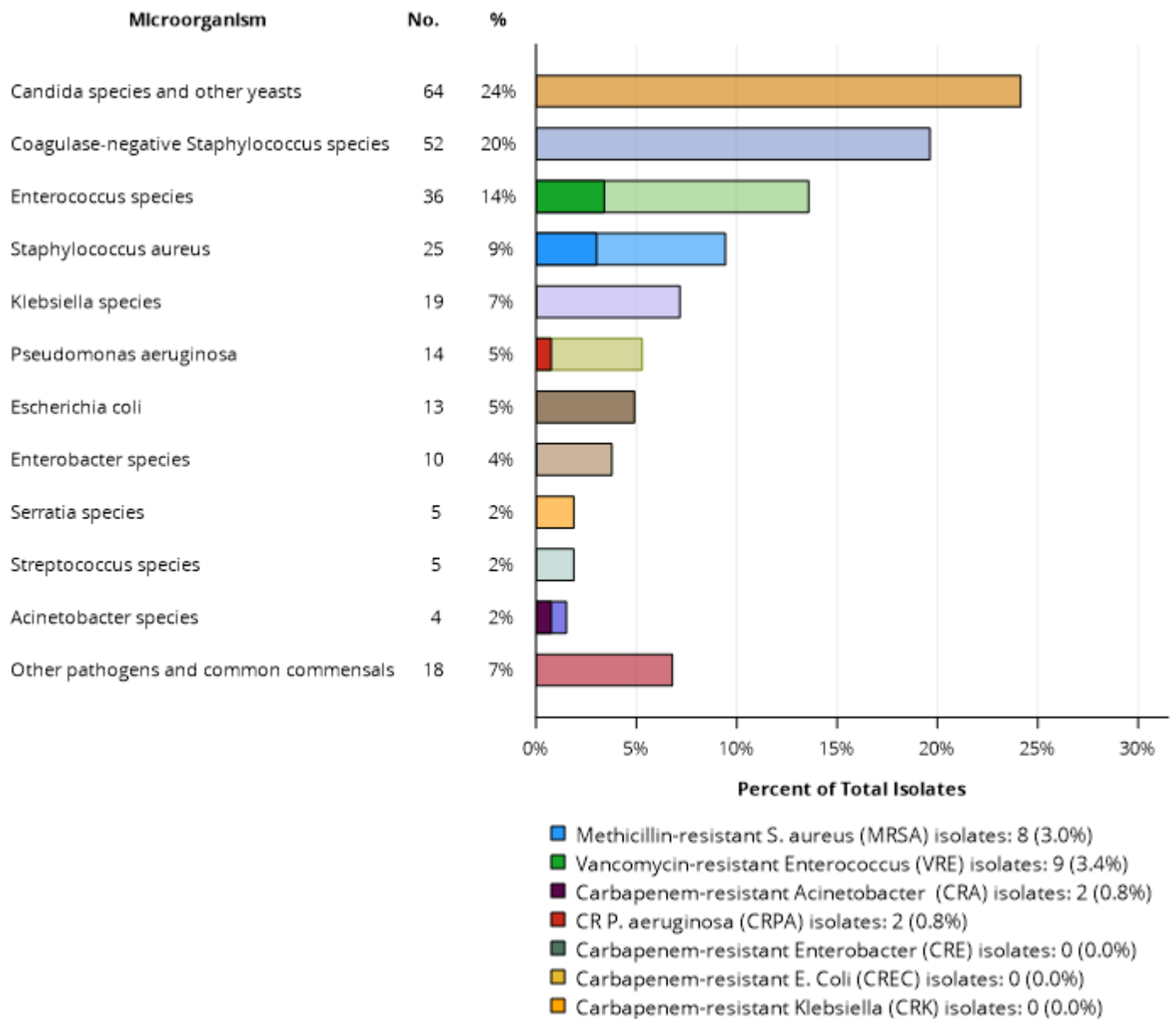
Key percentiles include units with at least one predicted infection

Red highlighting indicates SIR for reporting period is significantly higher than 2015 national SIR of 1.0

Green highlighting indicates SIR for reporting period is significantly lower than 2015 national SIR of 1.0

**Table 9: Microorganisms Identified in Central Line-Associated Bloodstream Infections (CLABSI) in Adult and Pediatric Intensive Care Units, Tennessee, 01/01/2017 - 12/31/2017**

**Number of isolates=265; Number of events=242**



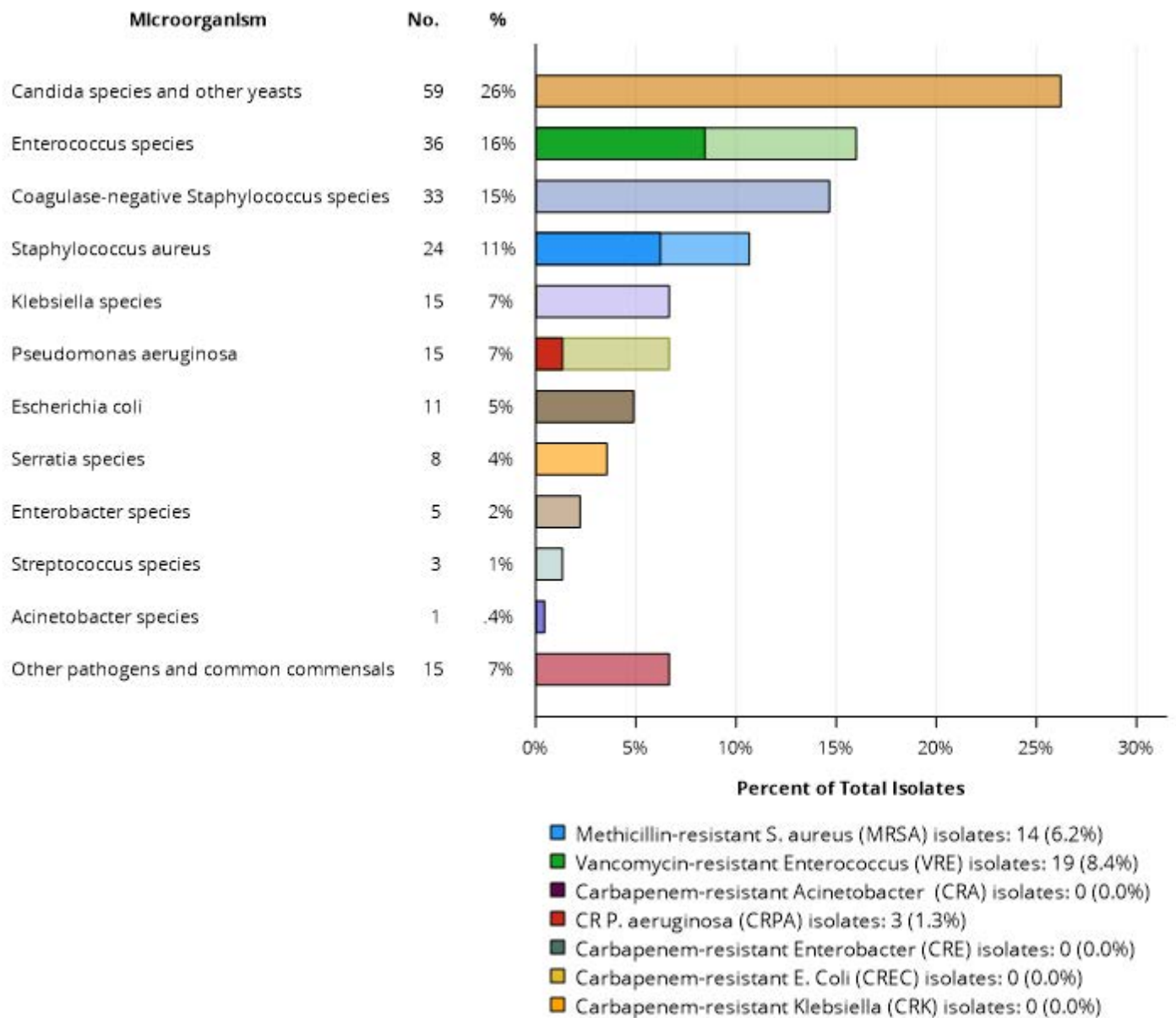
Data reported as of June 20, 2019

Other common commensals = Diphtheroids spp.

Other pathogens = Bacteroides spp., Burkholderia spp., Citrobacter spp., Clostridium spp., Eggerthella spp., Other Staphylococcus spp., Proteus spp., Pseudomonas spp., Rothia spp., Sphingomonas spp., Stenotrophomonas spp.

**Table 10: Microorganisms Identified in Central Line-Associated Bloodstream Infections (CLABSI) in Adult and Pediatric Intensive Care Units, Tennessee, 01/01/2018 - 12/31/2018**

**Number of isolates=225; Number of events=199**

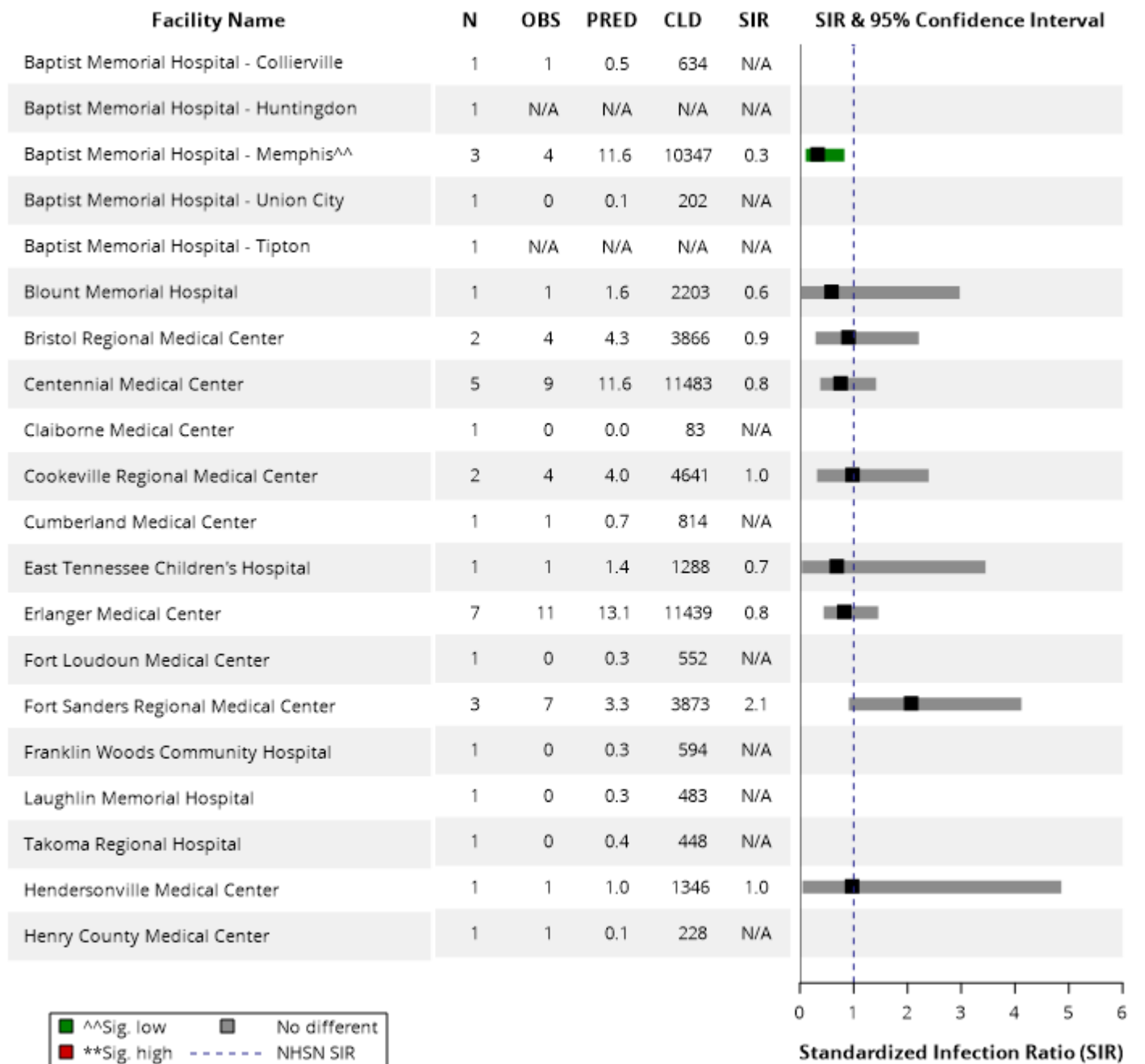


Data reported as of June 20, 2019

Other common commensals = *Aerococcus* spp.

Other pathogens = *Bacteroides* spp., *Citrobacter* spp., *Clostridium* spp., *Lactobacillus* spp., Other *Staphylococcus* spp., *Pantoea* spp., *Parvimonas* spp., *Prevotella* spp., *Proteus* spp., *Providencia* spp.

**Figure 9: CLABSI Standardized Infection Ratio (SIR) for Adult and Pediatric Intensive Care Units in Acute Care Facilities, Tennessee, 01/01/2017 – 12/31/2017**



Data Reported as of August 27, 2019

N = number of types of units reporting

OBS = observed number of CLABSI

PRED = statistically 'predicted' number of CLABSI, based on NHSN baseline data

SIR = standardized infection ratio (observed/predicted number of CLABSI)

CLD = number of central line days

N/A = Data not shown for facilities with <50 central line days / SIR not calculated for facilities with <1 predicted infection

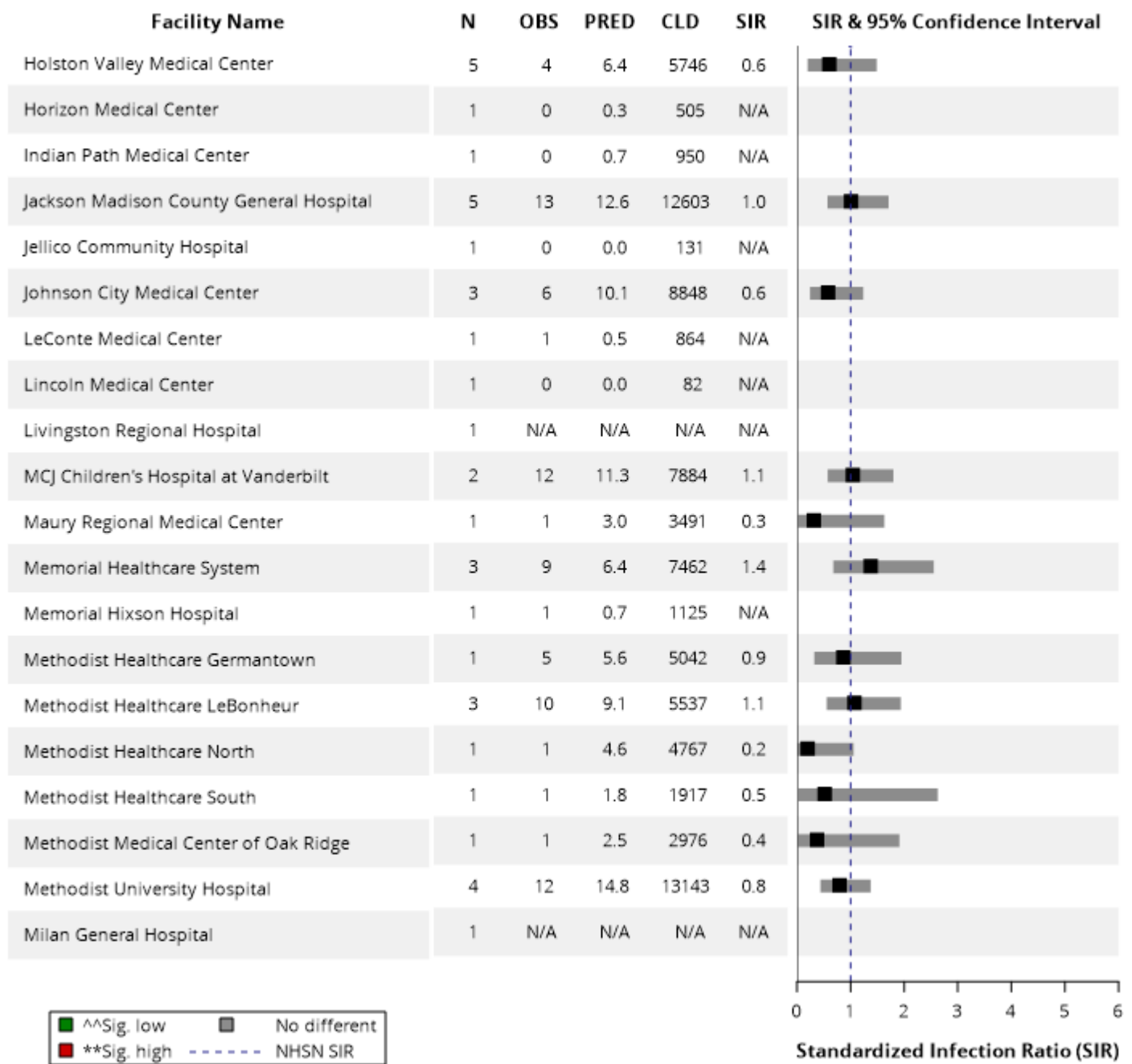
\*\* Significantly higher than 2015 national baseline

^^ Significantly lower than 2015 national baseline

\* Zero infections, but not statistically significant



Figure 9 (cont'd)



Data Reported as of August 27, 2019

N = number of types of units reporting

OBS = observed number of CLABSI

PRED = statistically 'predicted' number of CLABSI, based on NHSN baseline data

SIR = standardized infection ratio (observed/predicted number of CLABSI)

CLD = number of central line days

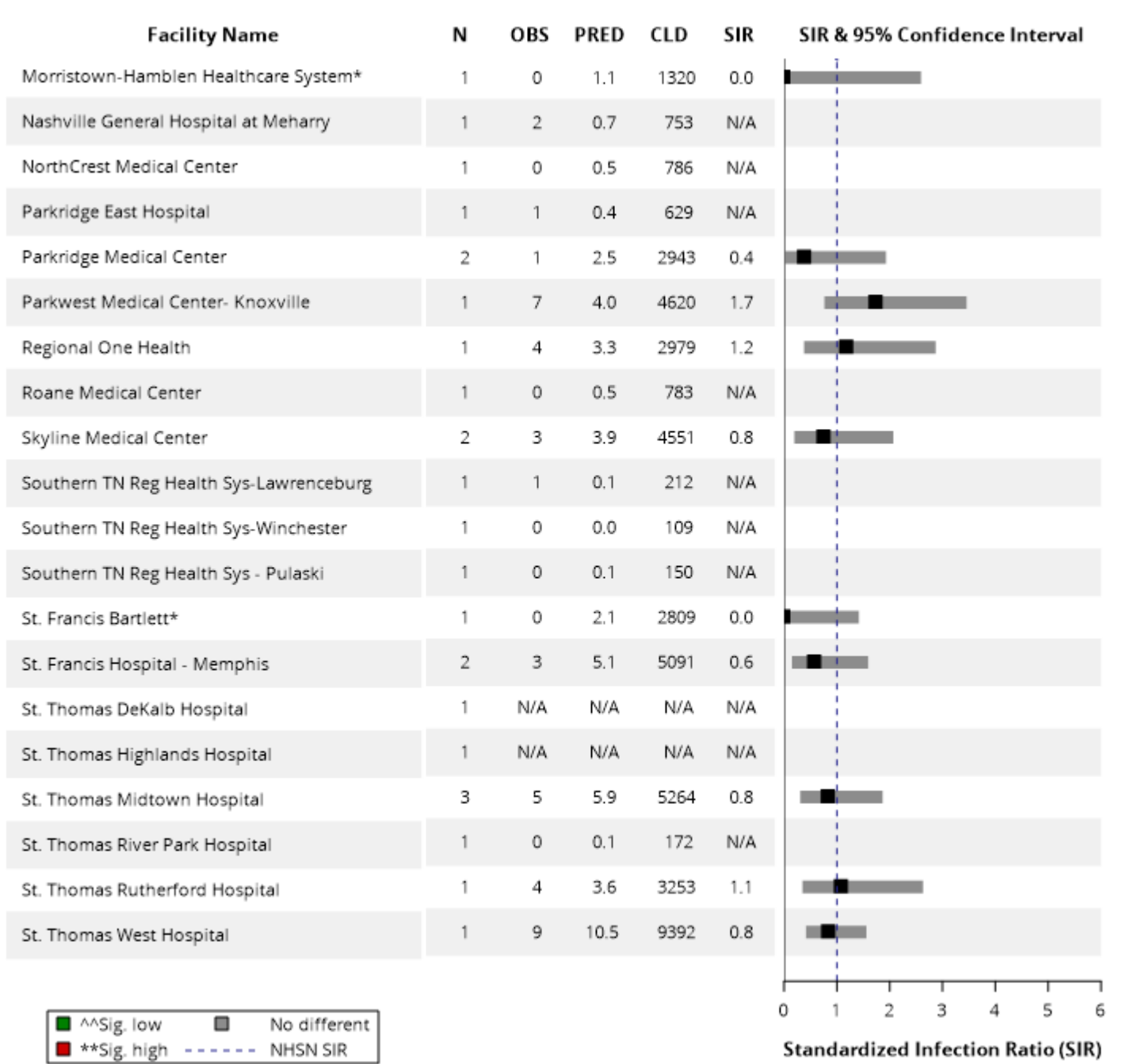
N/A = Data not shown for facilities with <50 central line days / SIR not calculated for facilities with <1 predicted infection

\*\* Significantly higher than 2015 national baseline

^^ Significantly lower than 2015 national baseline

\* Zero infections, but not statistically significant

Figure 9 (cont'd)



Data Reported as of August 27, 2019

N = number of types of units reporting

OBS = observed number of CLABSI

PRED = statistically 'predicted' number of CLABSI, based on NHSN baseline data

SIR = standardized infection ratio (observed/predicted number of CLABSI)

CLD = number of central line days

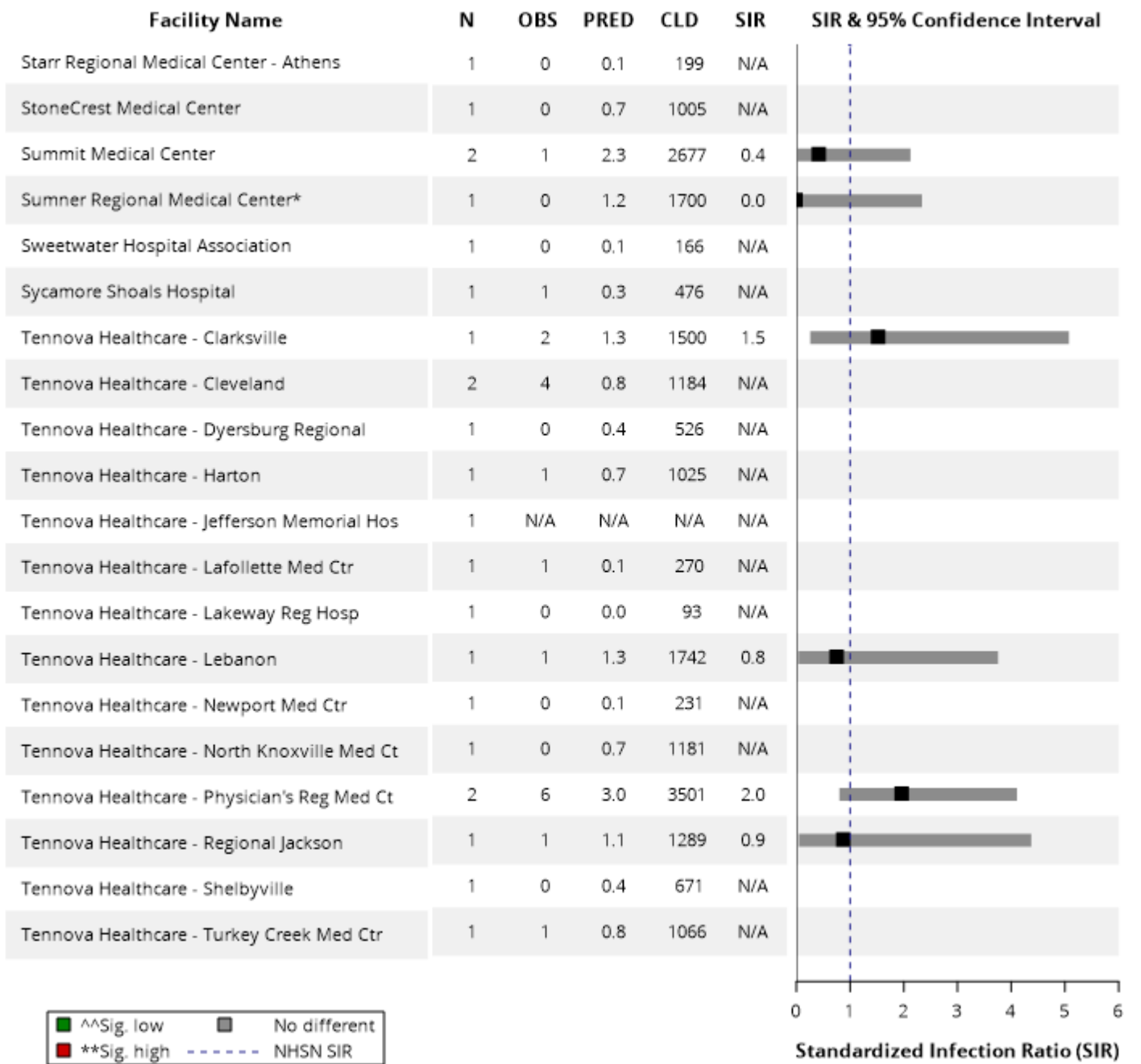
N/A = Data not shown for facilities with <50 central line days / SIR not calculated for facilities with <1 predicted infection

\*\* Significantly higher than 2015 national baseline

^^ Significantly lower than 2015 national baseline

\* Zero infections, but not statistically significant

Figure 9 (cont'd)



Data Reported as of August 27, 2019

N = number of types of units reporting

OBS = observed number of CLABSI

PRED = statistically 'predicted' number of CLABSI, based on NHSN baseline data

SIR = standardized infection ratio (observed/predicted number of CLABSI)

CLD = number of central line days

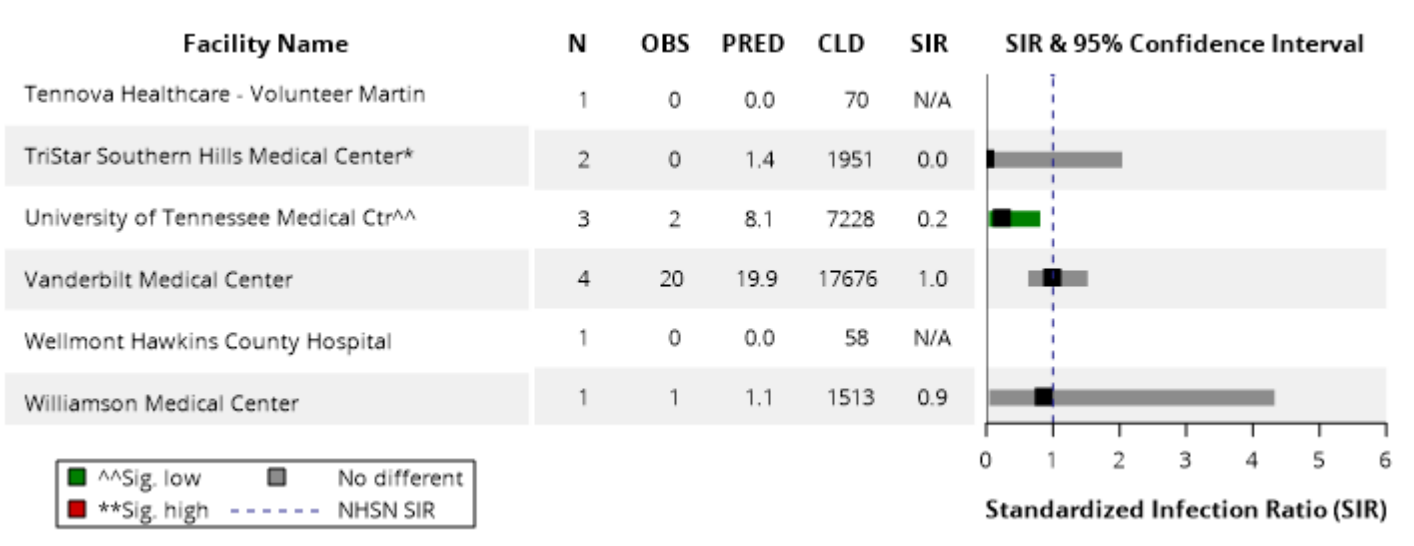
N/A = Data not shown for facilities with <50 central line days / SIR not calculated for facilities with <1 predicted infection

\*\* Significantly higher than 2015 national baseline

^^ Significantly lower than 2015 national baseline

\* Zero infections, but not statistically significant

Figure 9 (cont'd)



Data Reported as of August 27, 2019

N = number of types of units reporting

OBS = observed number of CLABSI

PRED = statistically 'predicted' number of CLABSI, based on NHSN baseline data

SIR = standardized infection ratio (observed/predicted number of CLABSI)

CLD = number of central line days

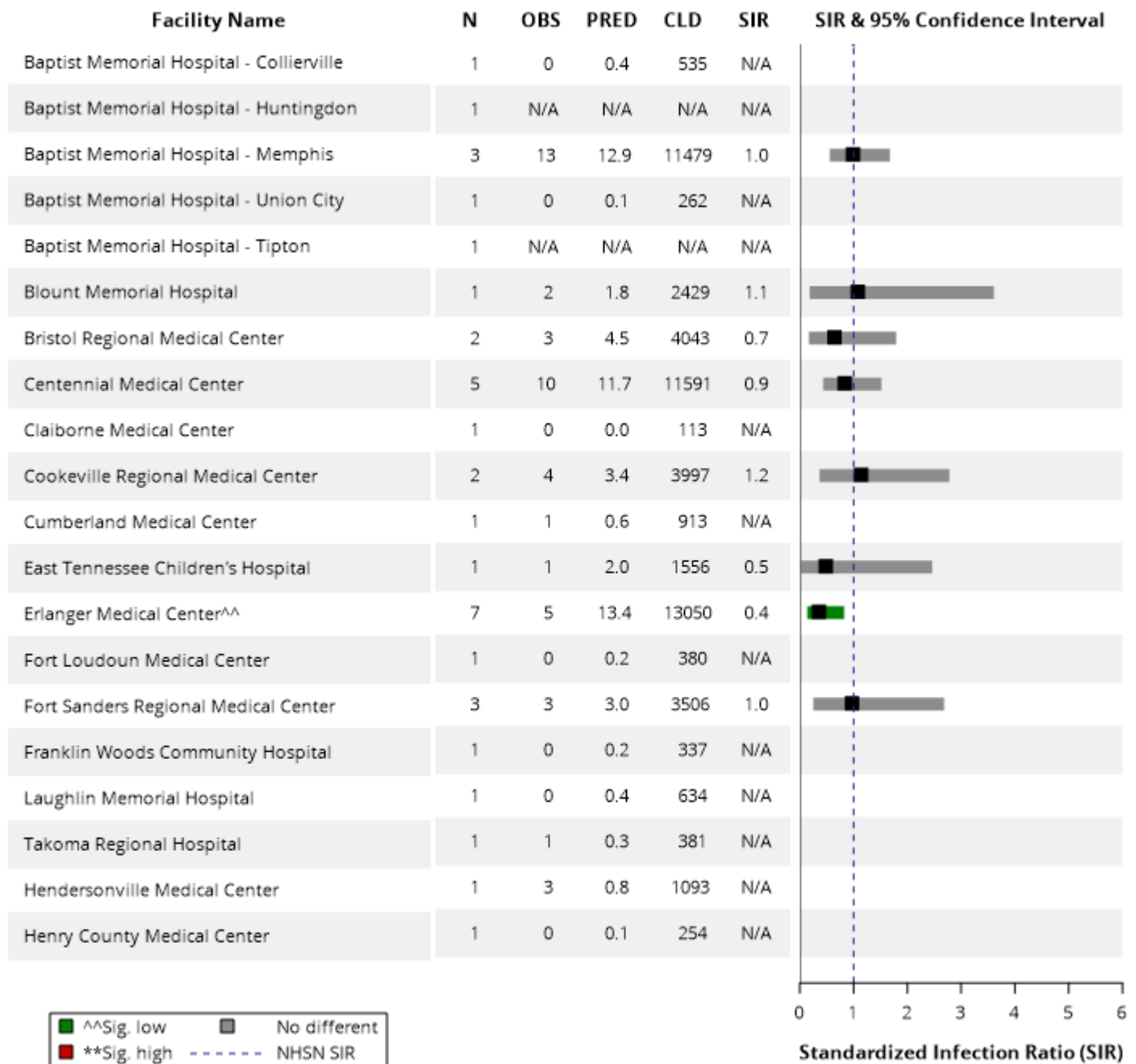
N/A = Data not shown for facilities with <50 central line days / SIR not calculated for facilities with <1 predicted infection

\*\* Significantly higher than 2015 national baseline

^^ Significantly lower than 2015 national baseline

\* Zero infections, but not statistically significant

**Figure 10: CLABSI Standardized Infection Ratio (SIR) for Adult and Pediatric Intensive Care Units in Acute Care Facilities, Tennessee, 01/01/2018 – 12/31/2018**



Data Reported as of August 27, 2019

N = number of types of units reporting

OBS = observed number of CLABSI

PRED = statistically 'predicted' number of CLABSI, based on NHSN baseline data

SIR = standardized infection ratio (observed/predicted number of CLABSI)

CLD = number of central line days

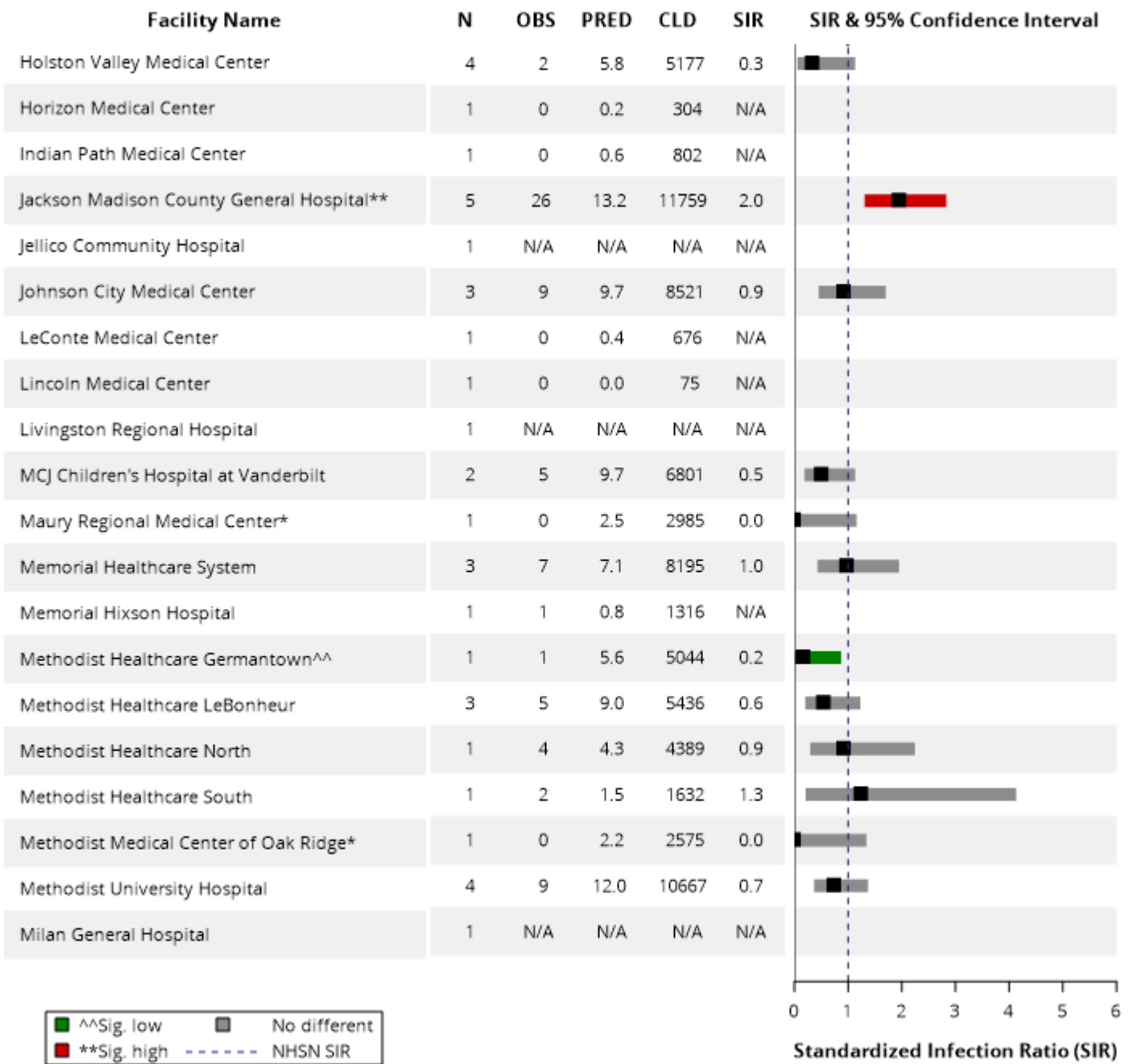
N/A = Data not shown for facilities with <50 central line days / SIR not calculated for facilities with <1 predicted infection

\*\* Significantly higher than 2015 national baseline

^^ Significantly lower than 2015 national baseline

\* Zero infections, but not statistically significant

Figure 10 (cont'd)



Data Reported as of August 27, 2019

N = number of types of units reporting

OBS = observed number of CLABSI

PRED = statistically 'predicted' number of CLABSI, based on NHSN baseline data

SIR = standardized infection ratio (observed/predicted number of CLABSI)

CLD = number of central line days

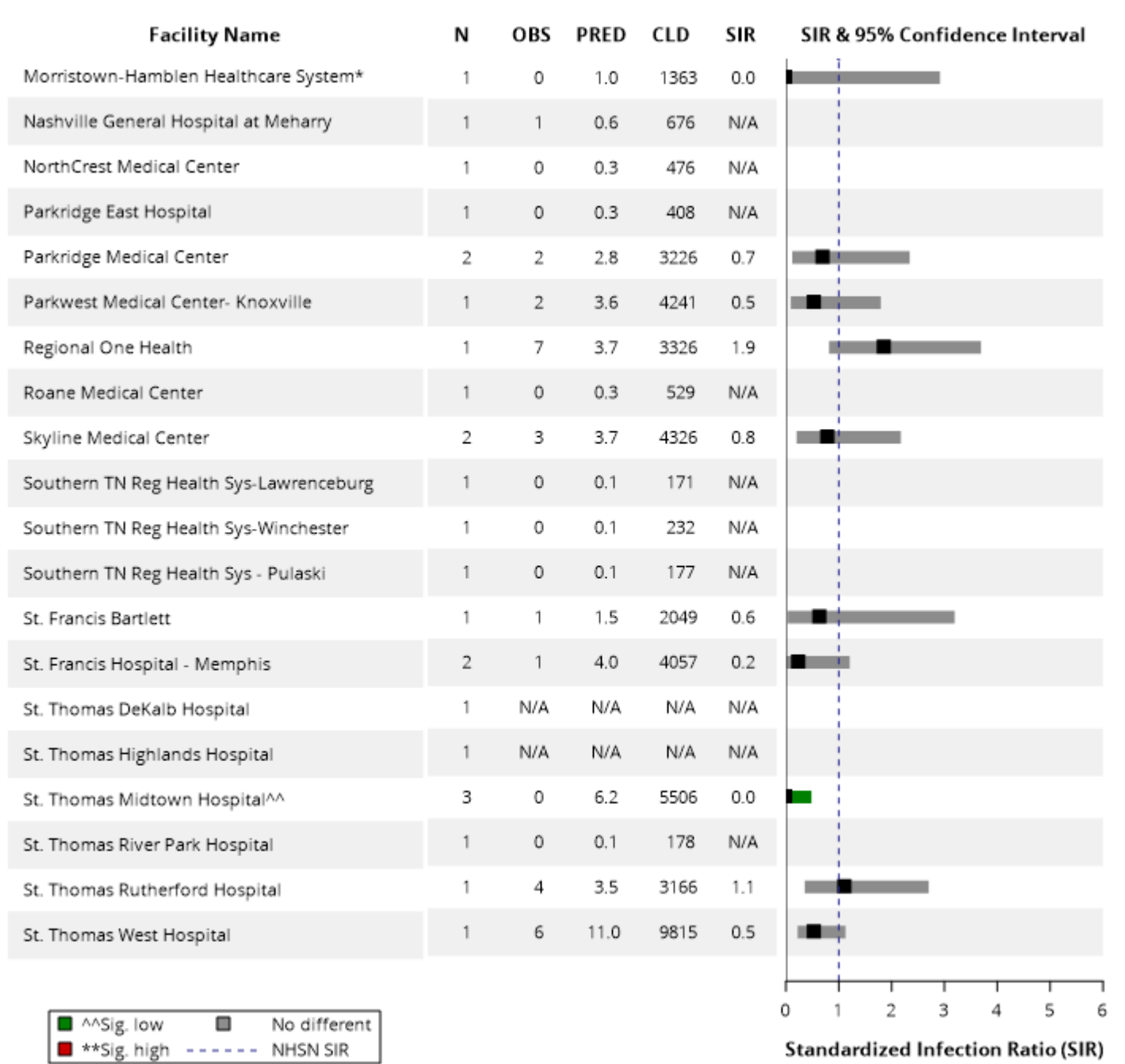
N/A = Data not shown for facilities with <50 central line days / SIR not calculated for facilities with <1 predicted infection

\*\* Significantly higher than 2015 national baseline

^^ Significantly lower than 2015 national baseline

\* Zero infections, but not statistically significant

Figure 10 (cont'd)



Data Reported as of August 27, 2019

N = number of types of units reporting

OBS = observed number of CLABSI

PRED = statistically 'predicted' number of CLABSI, based on NHSN baseline data

SIR = standardized infection ratio (observed/predicted number of CLABSI)

CLD = number of central line days

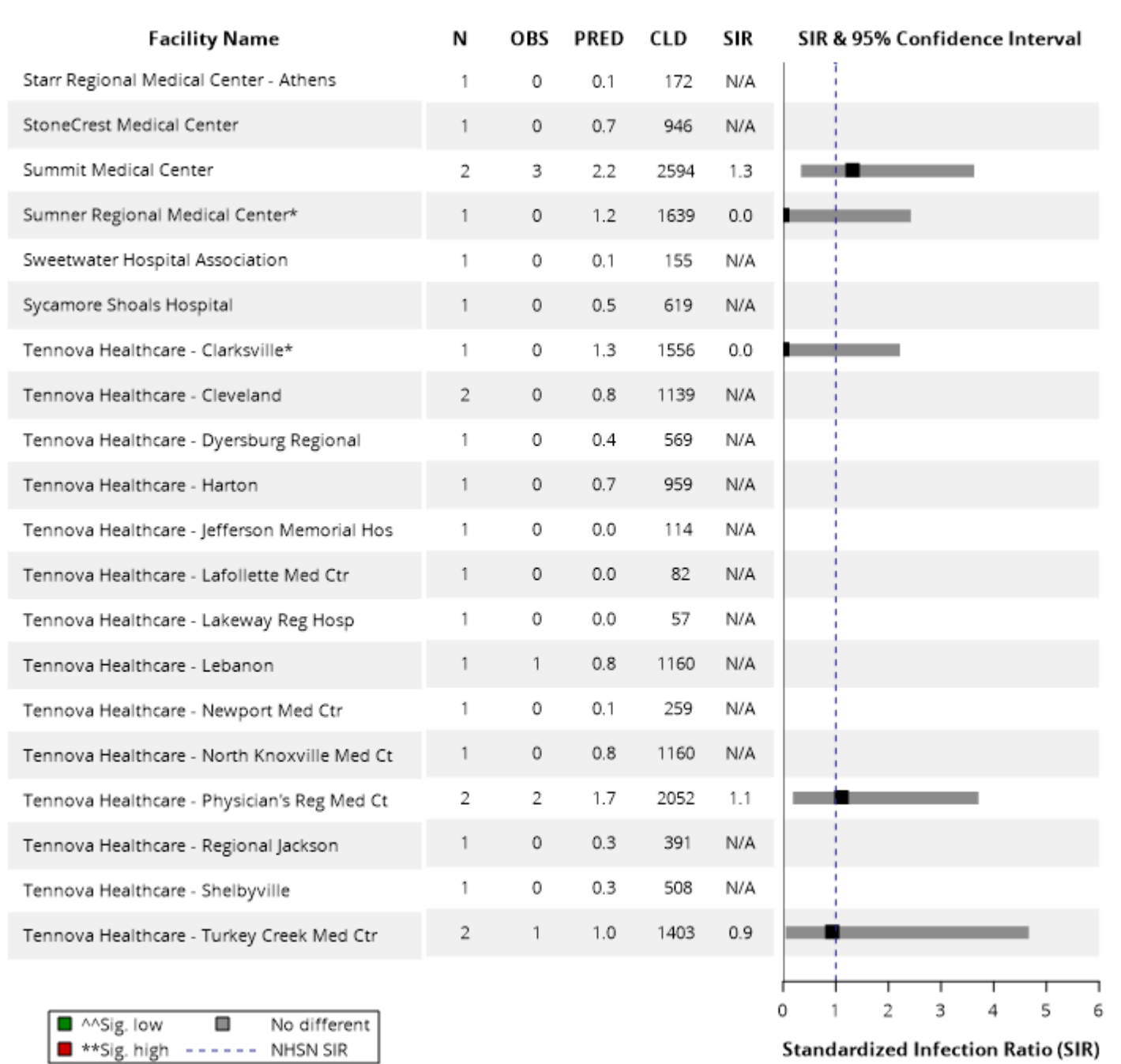
N/A = Data not shown for facilities with <50 central line days / SIR not calculated for facilities with <1 predicted infection

\*\* Significantly higher than 2015 national baseline

^^ Significantly lower than 2015 national baseline

\* Zero infections, but not statistically significant

Figure 10 (cont'd)



Data Reported as of August 27, 2019

N = number of types of units reporting

OBS = observed number of CLABSI

PRED = statistically 'predicted' number of CLABSI, based on NHSN baseline data

SIR = standardized infection ratio (observed/predicted number of CLABSI)

CLD = number of central line days

N/A = Data not shown for facilities with <50 central line days / SIR not calculated for facilities with <1 predicted infection

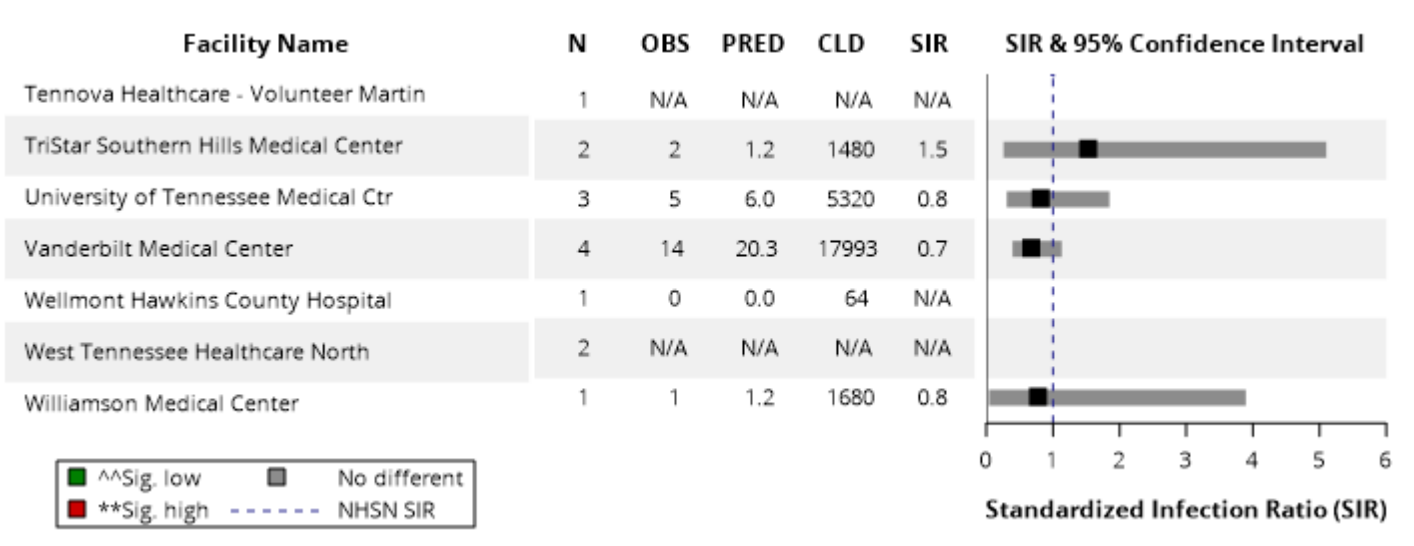
\*\* Significantly higher than 2015 national baseline

^^ Significantly lower than 2015 national baseline

\* Zero infections, but not statistically significant



Figure 10 (cont'd)



Data Reported as of August 27, 2019

N = number of types of units reporting

OBS = observed number of CLABSI

PRED = statistically 'predicted' number of CLABSI, based on NHSN baseline data

SIR = standardized infection ratio (observed/predicted number of CLABSI)

CLD = number of central line days

N/A = Data not shown for facilities with <50 central line days / SIR not calculated for facilities with <1 predicted infection

\*\* Significantly higher than 2015 national baseline

^^ Significantly lower than 2015 national baseline

\* Zero infections, but not statistically significant

# CLABSI

*Neonatal Critical Care Unit*

## CLABSI in Neonatal ICUs

**Total number of neonatal ICUs (NICUs) reporting from January-December 2017: 25**

**Total number of neonatal ICUs (NICUs) reporting from January-December 2018: 25**

### **SIRs by Quarter (Figure 11, Figure 12)**

- The overall CLABSI SIR in Tennessee NICUs decreased from 0.88 to 0.43 during January-March 2017 to April-June 2017 and then increased to 0.89 during the third quarter. From October-December 2017 to October-December 2018, the overall CLABSI SIR in Tennessee NICUs fluctuated very little over time beginning with an SIR of 0.80 and ending with an SIR of 0.82. Throughout 2018, Tennessee NICUs were above the U.S. Department of Health and Human Services' [National Action Plan to Prevent Healthcare-Associated Infections](#)<sup>11</sup> 2020 prevention target of SIR = 0.50.

### **Key Percentiles for Tennessee SIRs (Table 11, Table 12)**

- The overall SIR across all reporting NICUs in Tennessee from January-December 2017 was not statistically significantly different than the national SIR of 1 (SIR=0.75; 95% CI: 0.55, 1.01). The overall SIR across all reporting NICUs in Tennessee from January-December 2018 was not statistically significantly different than the national SIR of 1 (SIR=0.79; 95% CI: 0.58, 1.06).
- From January-December 2017, the median (50<sup>th</sup> percentile) facility-specific SIR was 0.60, indicating that half of all reporting Tennessee hospitals with at least 1 predicted infection had a SIR at or below 0.60. From January-December 2018, the median facility-specific SIR was 0.65.

### **CLABSI SIRs by Unit Type (Figure 13)**

- From January-December 2017, the Tennessee CLABSI SIR in level III NICUs was not statistically significantly different than the 2015 national SIR of 1 (SIR=0.81; 95% CI: 0.54, 1.16). The Tennessee CLABSI SIR in level II/III NICUs was also not significantly different than 1 (SIR=0.66; 95% CI: 0.37, 1.08).

<sup>11</sup> <http://www.hhs.gov/ash/initiatives/hai/actionplan/>

- From January-December 2018, the Tennessee CLABSI SIR in level III NICUs was not statistically significantly different than 2015 national SIR of 1 (SIR=0.77; 95% CI: 0.50, 1.13). The Tennessee CLABSI SIR in level II/III NICUs was also not significantly different than 1 (SIR=0.83; 95% CI: 0.51, 1.28).

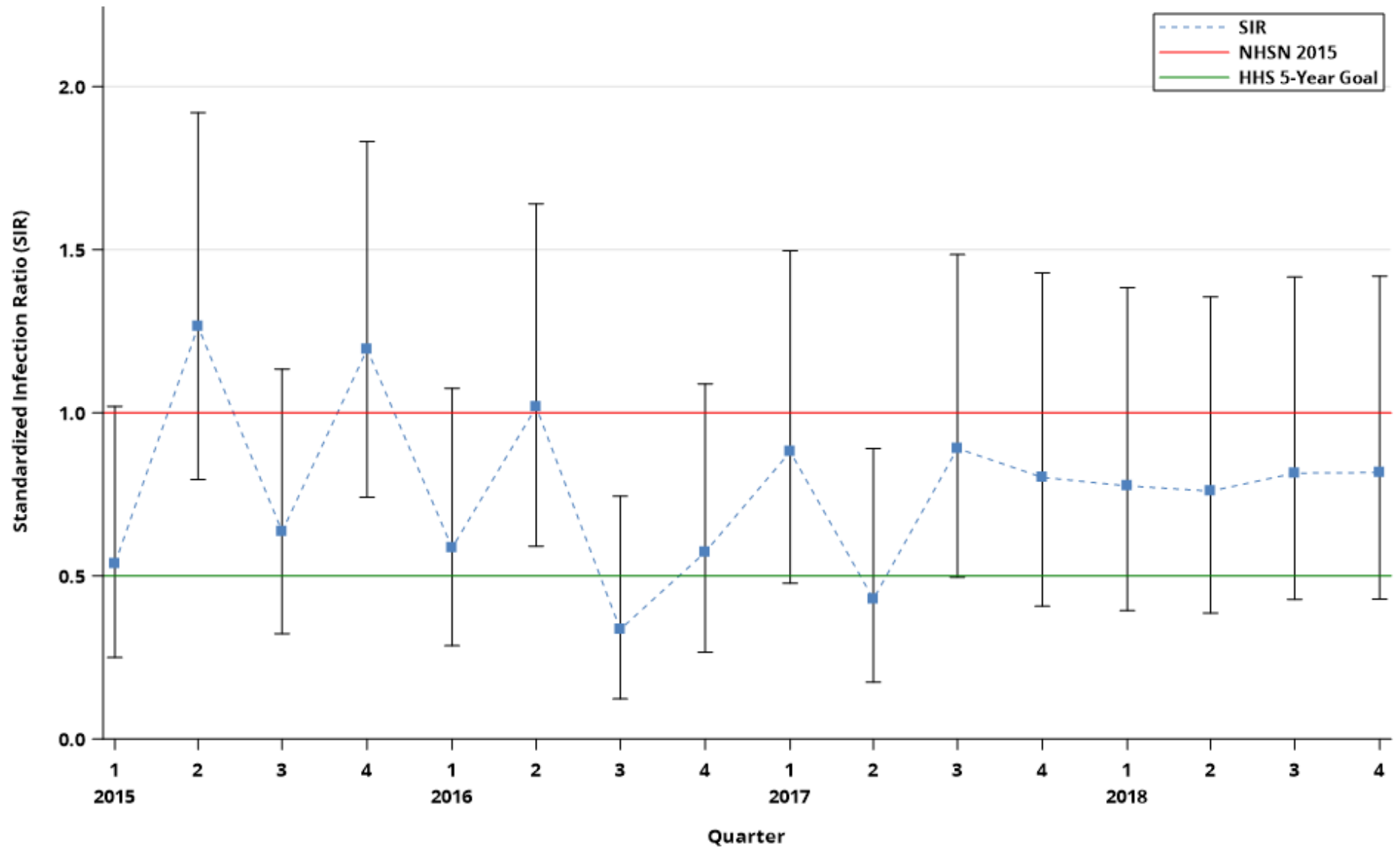
#### **Microorganisms Associated with CLABSIs in Neonatal ICUs (Table 13, Table 14)**

- Among the 45 pathogens isolated from 41 NICU CLABSIs in 2017, the most common pathogens were *Staphylococcus aureus* (30%), *Serratia* species (16%) and *E.coli* (16%). Methicillin-Resistant *S. aureus* (MRSA) accounted for 13% of total positive isolates.
- Among the 43 pathogens isolated from 42 NICU CLABSIs in 2018, the most common pathogens were *Staphylococcus aureus* (30%), *E.coli* (23%) and *Enterococcus* species (14%). Methicillin-Resistant *S. aureus* (MRSA) accounted for 14% of total positive isolates.

#### **Facility-Specific SIRs (Figure 14, Figure 15)**

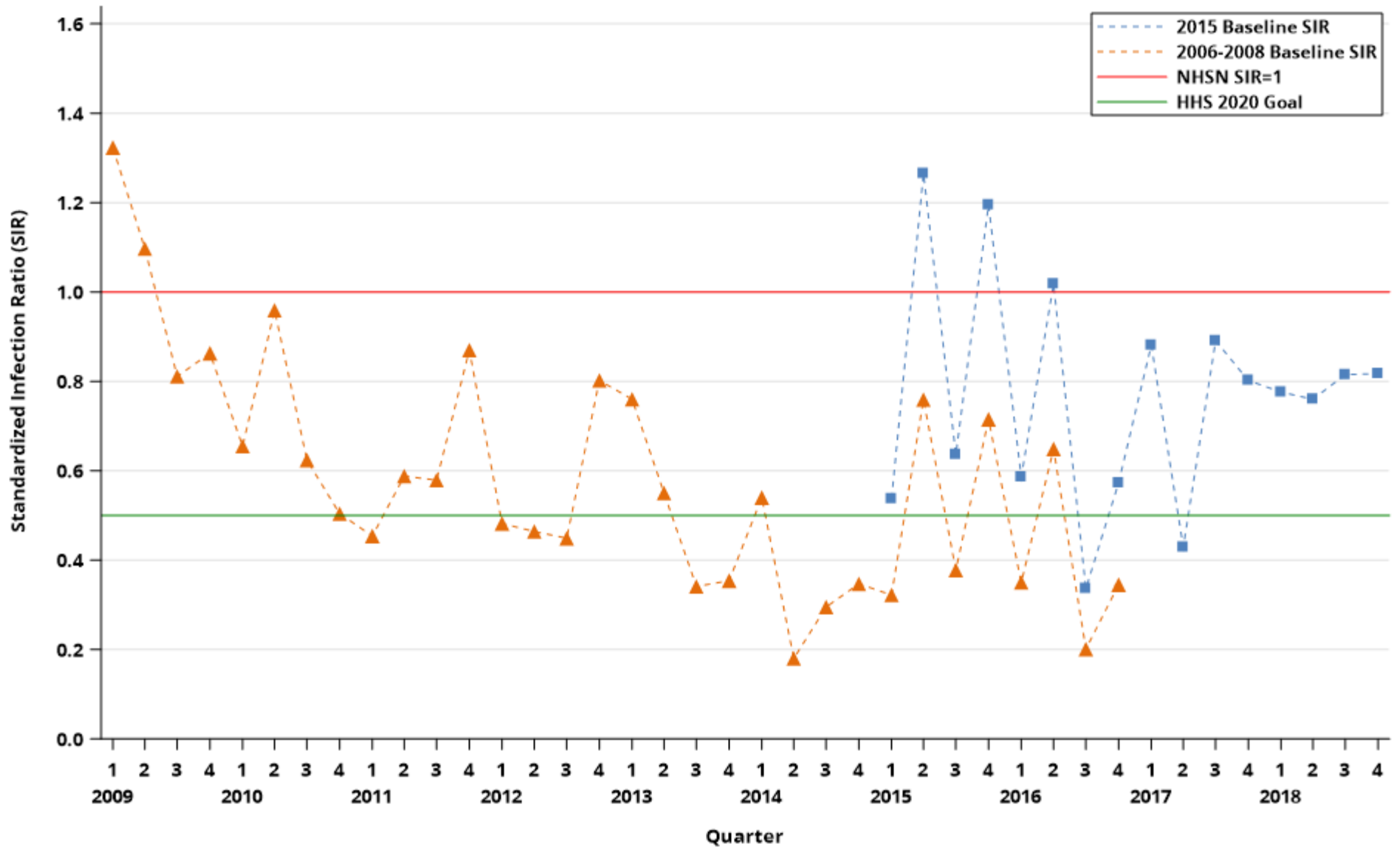
- One NICU CLABSI SIR per facility is displayed in [Figure 14](#) and [Figure 15](#). The bar representing the confidence interval is green if the CLABSI SIR was significantly lower than the national 2015 SIR of 1, and red if the SIR was significantly higher than 1. Some NICUs reported zero CLABSIs (indicated with an asterisk), although the SIR may not be statistically significant due to a relatively small number of central line-days.
- In 2017, one facility had a NICU CLABSI SIR that was statistically significantly lower than the 2015 national baseline SIR of 1. In 2018, no facilities had a NICU CLABSI SIR that was statistically significantly lower than the 2015 national baseline SIR of 1. One facility had a NICU CLABSI SIR that was statistically significantly higher than the baseline.

Figure 11: Standardized Infection Ratios (SIR) for Central Line-Associated Bloodstream Infections (CLABSIs) for Neonatal Intensive Care Units (NICUs) by Quarter, Tennessee, 01/01/2015–12/31/2018 [Reference standard: National Healthcare Safety Network (NHSN), 2015]



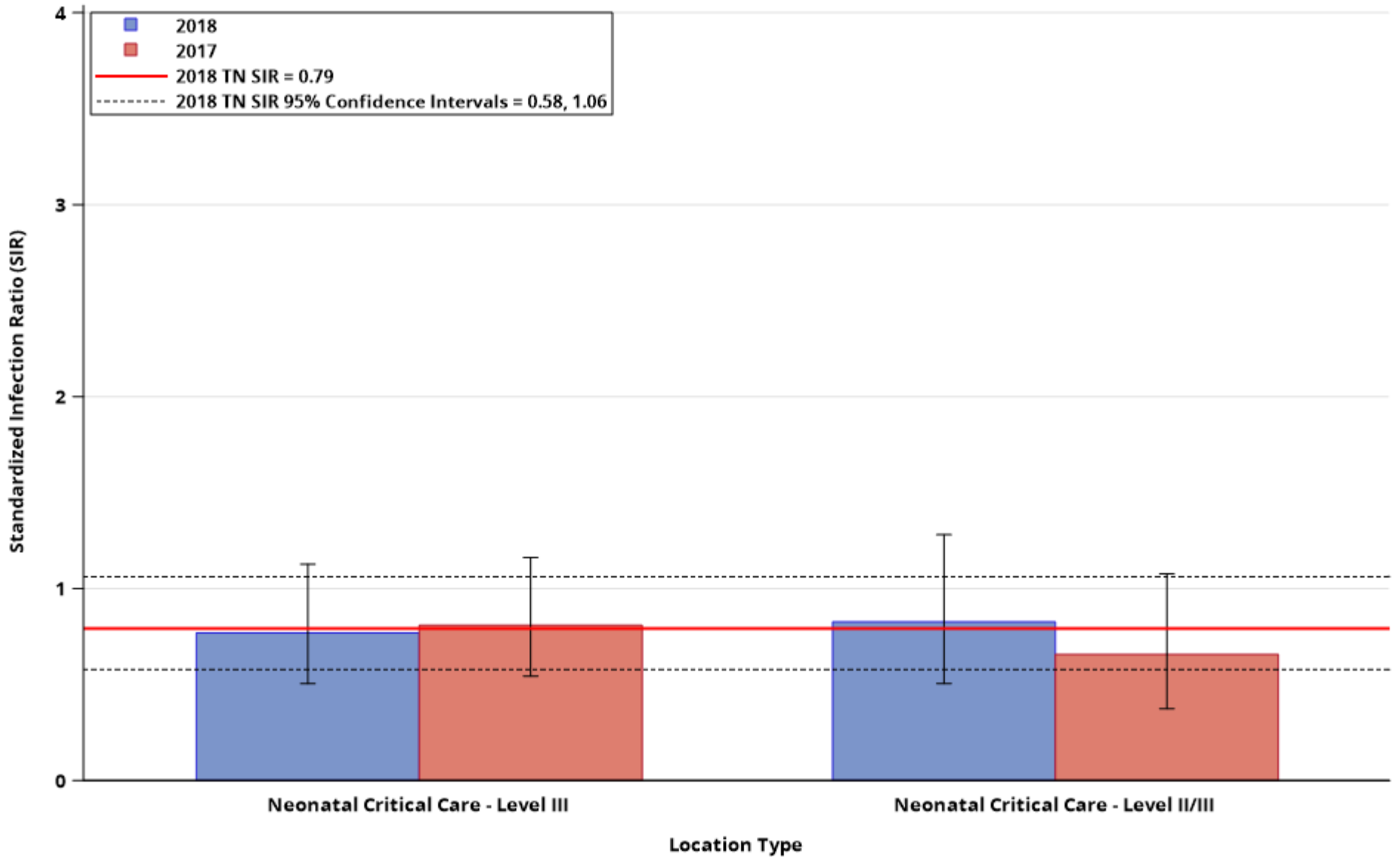
Data Reported as of June 20, 2019

Figure 12: Standardized Infection Ratios (SIR) for Central Line-Associated Bloodstream Infections (CLABSIs) for Neonatal Intensive Care Units (NICUs) by Quarter, Tennessee, 01/01/2009–12/31/2018



Data Reported as of June 20, 2019

Figure 13: Standardized Infection Ratios (SIRs) for Central Line-Associated Bloodstream Infections (CLABSIs) by Neonatal Intensive Care Unit (NICU) Type, Tennessee, 2017 and 2018 [Reference standard: National Healthcare Safety Network (NHSN), 2015]



Data Reported as of June 20, 2019

**Table 11: Key Percentiles for Facility-Specific Central Line-Associated Bloodstream Infection (CLABSI) Standardized Infection Ratios (SIRs) in Neonatal Intensive Care Units (NICUs) by Reporting Year, Tennessee, 01/01/2017 - 12/31/2018**

									DISTRIBUTION OF FACILITY-SPECIFIC SIRs										
				No. of INFECTIONS		SIR AND 95% CONFIDENCE INTERVAL					No. of FACS WITH SIR SIG. <1.0		No. of FACS WITH SIR SIG. >1.0						
STATE	YEAR	No.	CL DAYS	OBS	PRED	SIR	LOWER LIMIT	UPPER LIMIT	No. of FACS WITH ≥1 PRED INFECTION	N	%	N	%	10%	25%	50%	75%	90%	
Tennessee	2018	25	38,502	42	53.00	0.79	0.58	1.06	12	0	0%	1	8%	0.00	0.42	0.65	1.11	1.56	
	2017	25	39,086	41	54.69	0.75	0.55	1.01	12	1	8%	0	0%	0.00	0.13	0.60	1.03	1.46	

Data reported as of June 20, 2019

No. = number of facilities; CL Days = central line days; OBS = observed number of CLABSI

PRED = statistically 'predicted' number of CLABSI; SIR = standardized infection ratio (observed/predicted number of CLABSI)

Key percentiles include facilities with at least one predicted infection

Red highlighting indicates SIR for reporting period is significantly higher than national 2015 SIR of 1.0

Green highlighting indicates SIR for reporting period is significantly lower than national 2015 SIR of 1.0



**Table 12: Key Percentiles for Unit-Specific Central Line-Associated Bloodstream Infection (CLABSI) Standardized Infection Ratios (SIRs) by Type of Neonatal Intensive Care Unit (NICU) and Reporting Year, Tennessee, 01/01/2017 - 12/31/2018**

ICU TYPE	YEAR	No.	CL DAYS	No. of INFECTIONS		SIR AND 95% CONFIDENCE INTERVAL			DISTRIBUTION OF FACILITY-SPECIFIC SIRs					
				OBS	PRED	SIR	LOWER LIMIT	UPPER LIMIT	No. of FACS WITH ≥1 PRED INFECTION	10%	25%	50%	75%	90%
Neonatal ICU, Level II/III	2018	20	15,376	18	21.79	0.83	0.51	1.28	6	0.00	0.40	0.78	1.15	1.56
	2017	20	15,051	14	21.31	0.66	0.37	1.08	6	0.00	0.25	0.42	0.80	1.27
Neonatal ICU, Level III	2018	6	23,126	24	31.21	0.77	0.50	1.13	6	0.00	0.44	0.51	1.07	4.53
	2017	6	24,035	27	33.38	0.81	0.54	1.16	6	0.00	0.00	0.70	1.46	2.36

Data reported as of June 20, 2019

No. = number of facilities; CL Days = central line days; OBS = observed number of CLABSI

PRED = statistically 'predicted' number of CLABSI; SIR = standardized infection ratio (observed/predicted number of CLABSI)

N/A = not reported if the number of facilities is <5

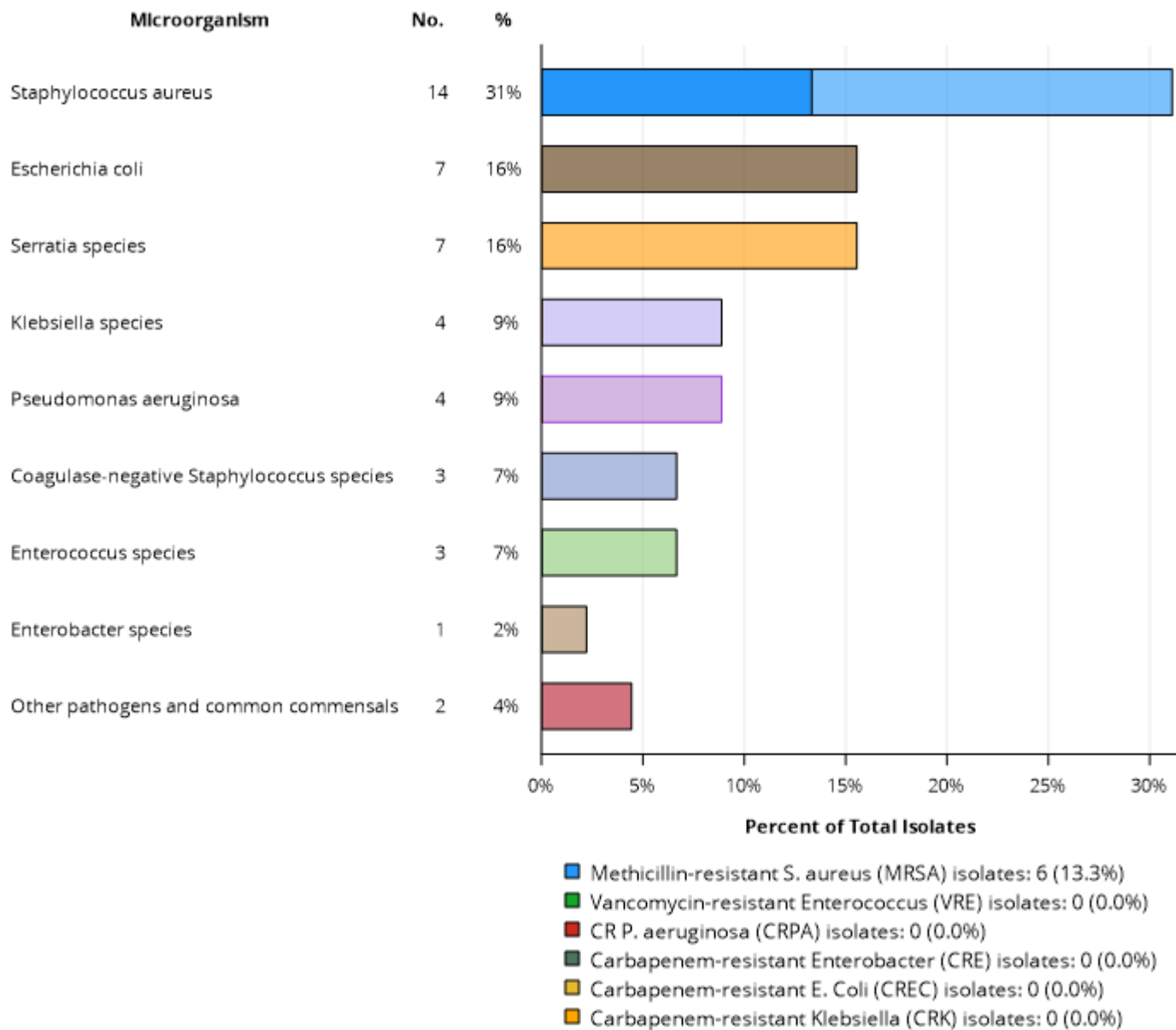
Key percentiles include units with at least one predicted infection

Red highlighting indicates SIR for reporting period is significantly higher than 2015 national SIR of 1.0

Green highlighting indicates SIR for reporting period is significantly lower than 2015 national SIR of 1.0

**Table 13: Microorganisms Identified in Central Line-Associated Bloodstream Infections (CLABSI) in Neonatal Intensive Care Units, Tennessee, 01/01/2017 - 12/31/2017**

**Number of isolates=45; Number of events=41**



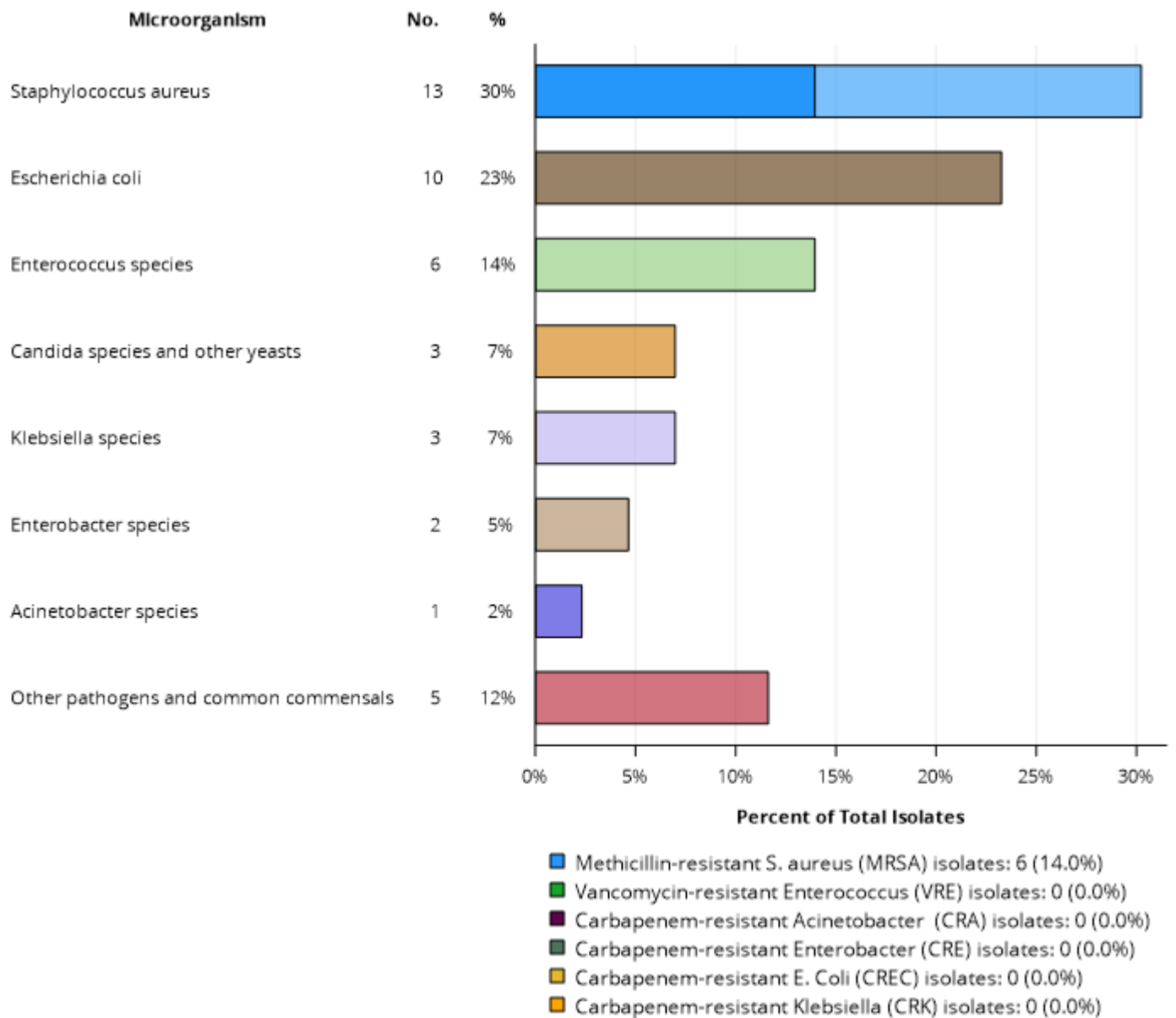
Data reported as of June 20, 2019

Other common commensals = .

Other pathogens = *Candida* spp., *Streptococcus* spp.

**Table 14: Microorganisms Identified in Central Line-Associated Bloodstream Infections (CLABSI) in Neonatal Intensive Care Units, Tennessee, 01/01/2018 - 12/31/2018**

**Number of isolates=43; Number of events=42**

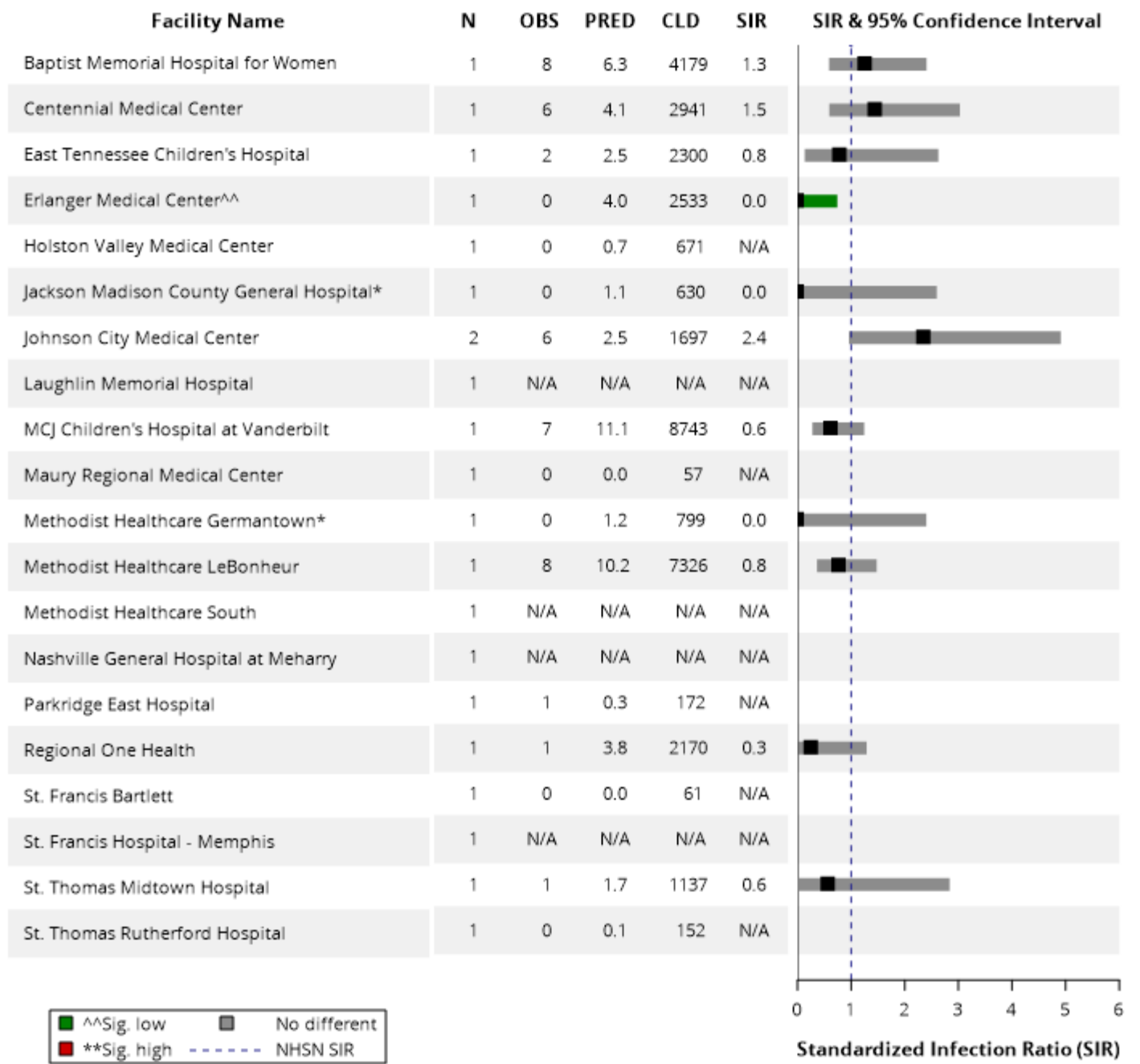


Data reported as of June 20, 2019

Other common commensals = *Bacillus* spp., Coagulase-negative spp.

Other pathogens = *Pantoea* spp., *Streptococcus* spp.

**Figure 14: CLABSI Standardized Infection Ratio (SIR) for Neonatal Intensive Care Units in Acute Care Facilities, Tennessee, 01/01/2017 – 12/31/2017**



Data Reported as of June 20, 2019

N = number of types of units reporting

OBS = observed number of CLABSI

PRED = statistically 'predicted' number of CLABSI, based on NHSN baseline data

SIR = standardized infection ratio (observed/predicted number of CLABSI)

CLD = number of central line days

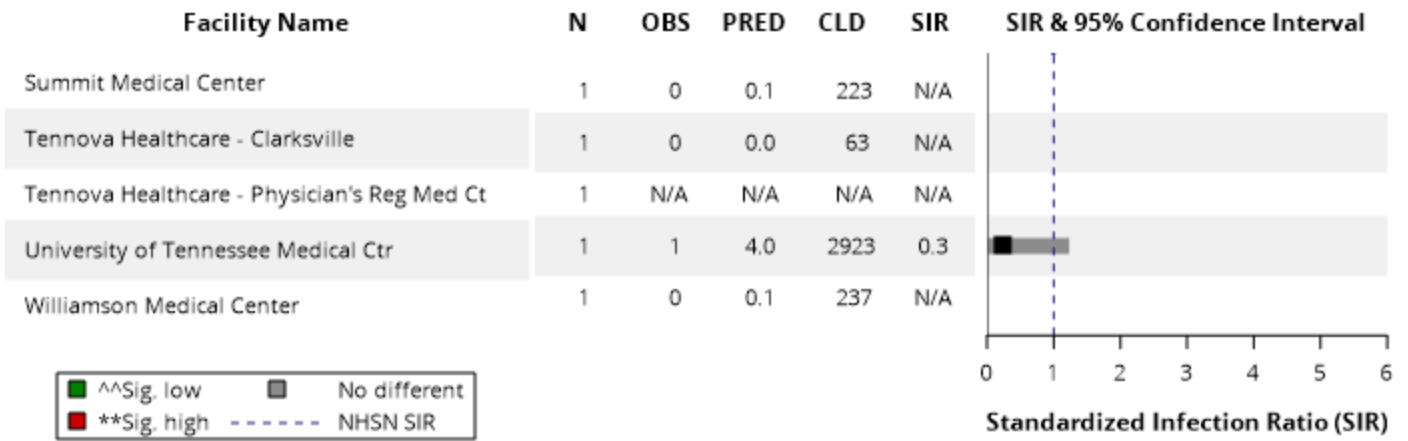
N/A = Data not shown for facilities with <50 central line days / SIR not calculated for facilities with <1 predicted infection

\*\* Significantly higher than national baseline

^^ Significantly lower than national baseline

\* Zero infections, but not statistically significant

**Figure 14 (cont'd)**



Data Reported as of June 20, 2019

N = number of types of units reporting

OBS = observed number of CLABSI

PRED = statistically 'predicted' number of CLABSI, based on NHSN baseline data

SIR = standardized infection ratio (observed/predicted number of CLABSI)

CLD = number of central line days

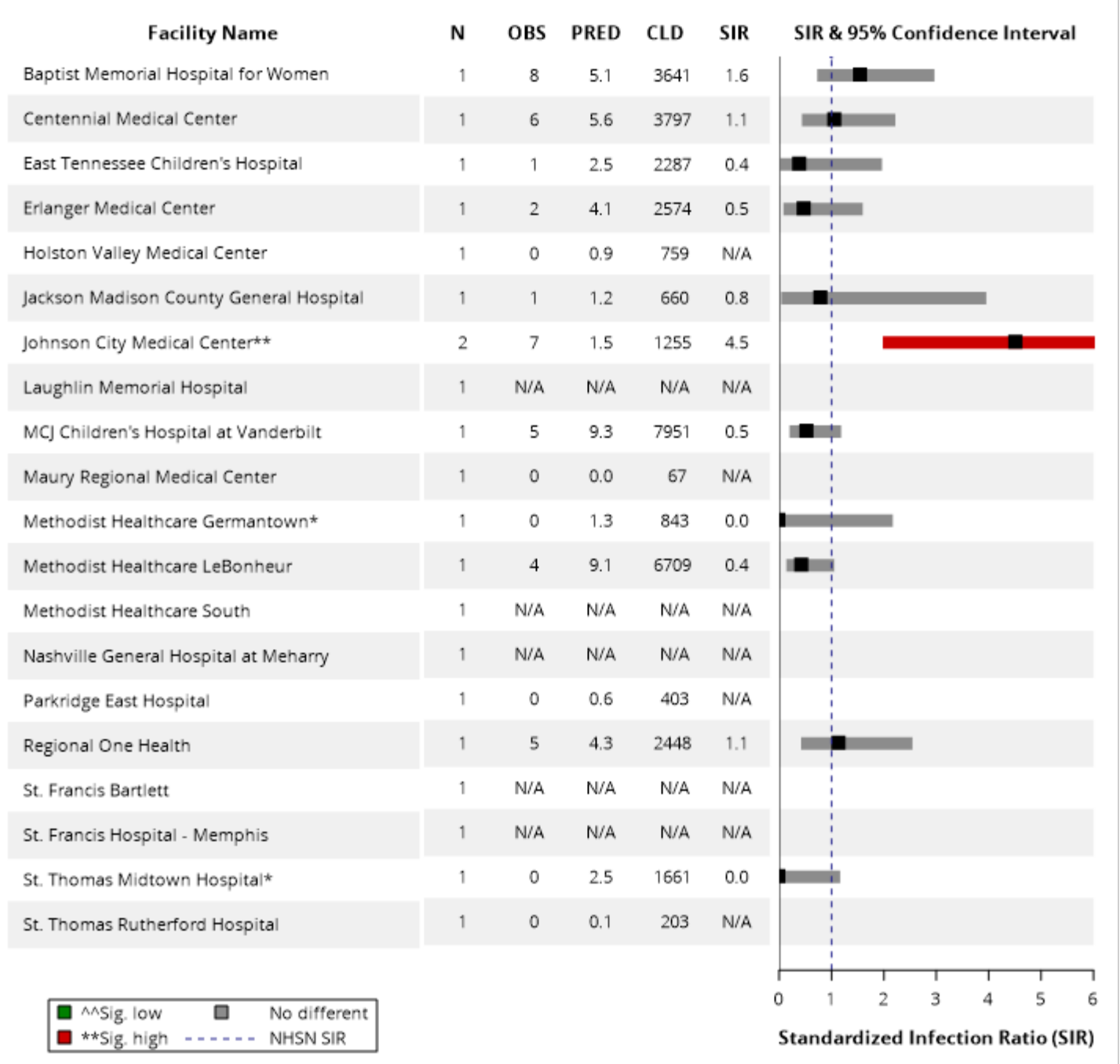
N/A = Data not shown for facilities with <50 central line days / SIR not calculated for facilities with <1 predicted infection

\*\* Significantly higher than national baseline

^^ Significantly lower than national baseline

\* Zero infections, but not statistically significant

**Figure 15: CLABSI Standardized Infection Ratio (SIR) for Neonatal Intensive Care Units in Acute Care Facilities, Tennessee, 01/01/2018 – 12/31/2018**



Data Reported as of June 20, 2019

N = number of types of units reporting

OBS = observed number of CLABSI

PRED = statistically 'predicted' number of CLABSI, based on NHSN baseline data

SIR = standardized infection ratio (observed/predicted number of CLABSI)

CLD = number of central line days

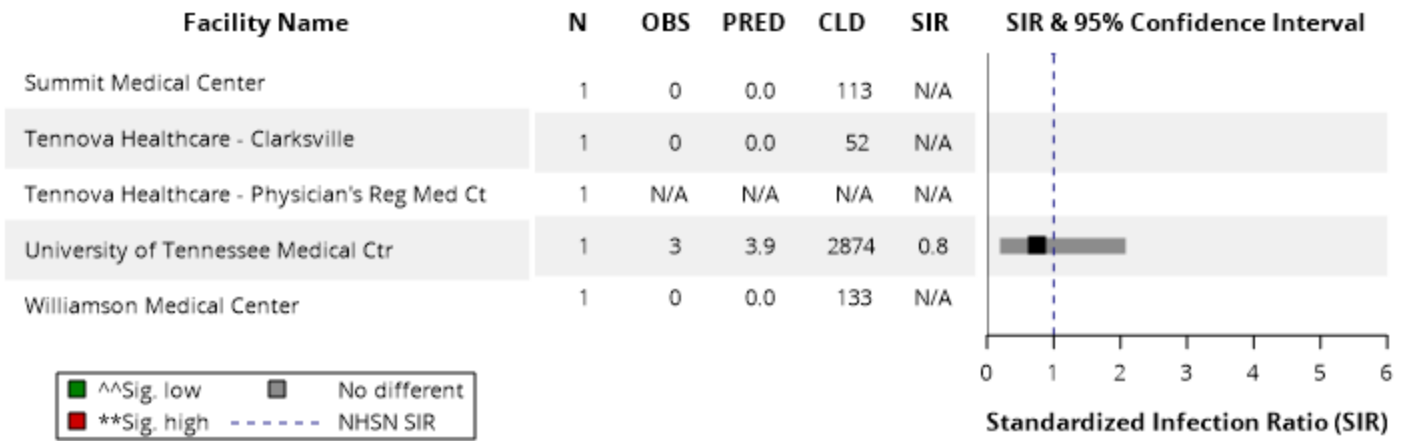
N/A = Data not shown for facilities with <50 central line days / SIR not calculated for facilities with <1 predicted infection

\*\* Significantly higher than national baseline

^^ Significantly lower than national baseline

\* Zero infections, but not statistically significant

**Figure 15 (cont'd)**



Data Reported as of June 20, 2019

N = number of types of units reporting

OBS = observed number of CLABSI

PRED = statistically 'predicted' number of CLABSI, based on NHSN baseline data

SIR = standardized infection ratio (observed/predicted number of CLABSI)

CLD = number of central line days

N/A = Data not shown for facilities with <50 central line days / SIR not calculated for facilities with <1 predicted infection

\*\* Significantly higher than national baseline

^^ Significantly lower than national baseline

\* Zero infections, but not statistically significant

# CLABSI

*Adult and Pediatric Medical, Surgical, and Medical/Surgical Wards*



## CLABSIs in Adult/Pediatric Medical, Surgical, and Medical/Surgical Wards

**Total number of hospitals reporting from January-December 2017: 103**

**Total number of hospitals reporting from January-December 2018: 104**

### **SIRs by Quarter ([Figure 16](#), [Figure 17](#))**

- From January–March 2017 to July–September 2017, the overall CLABSI SIR in Tennessee increased from 0.54 to 0.74 and then decreased to 0.72 during the fourth quarter from October-December 2017. During 2018, the overall CLABSI SIR fluctuated from 0.66 in January-March to 0.64 during October-December. The CLABSI SIR from January 2017-December 2018 remained above the 2020 U.S. Department of Health and Human Services' [National Action Plan to Prevent Healthcare-Associated Infections](#) prevention target of SIR = 0.50.

### **Key Percentiles for Tennessee SIRs ([Table 15](#), [Table 16](#))**

- The overall CLABSI SIR across all reporting adult and pediatric medical, surgical, and medical/surgical wards in Tennessee from January-December 2017 was statistically significantly lower than the national SIR of 1 (SIR=0.68; 95% CI: 0.58, 0.80). This SIR indicates that the number of CLABSIs in wards was 32% lower than predicted, compared to national 2015 NHSN data. The overall CLABSI SIR across all reporting adult and pediatric medical, surgical, and medical/surgical wards in Tennessee from January-December 2018 was statistically significantly lower than the national SIR of 1 (SIR=0.63; 95% CI: 0.53, 0.74). This SIR indicates that the number of CLABSIs in wards was 37% lower than predicted, compared to national 2015 NHSN data.
- In 2017, the median (50<sup>th</sup> percentile) facility-specific SIR was 0.69, indicating that half of all reporting Tennessee hospitals with at least 1 predicted infection had a SIR at or below 0.69. In 2018, the median facility-specific SIR was 0.51, indicating that half of all reporting Tennessee hospitals with at least 1 predicted infection had a SIR at or below 0.51.

### **SIR by Unit Type ([Figure 18](#))**

- In 2017, CLABSI SIRs were highest among the pediatric medical ward locations (SIR=1.11). Tennessee CLABSI SIRs were significantly lower than the 2015 baseline SIR in the medical/surgical wards.

- In 2018, CLABSI SIRs were highest among the pediatric medical/surgical wards (SIR=0.95). Tennessee CLABSI SIRs were significantly lower than the 2015 baseline SIR in the medical wards, medical/surgical wards, pediatric medical wards and surgical wards.

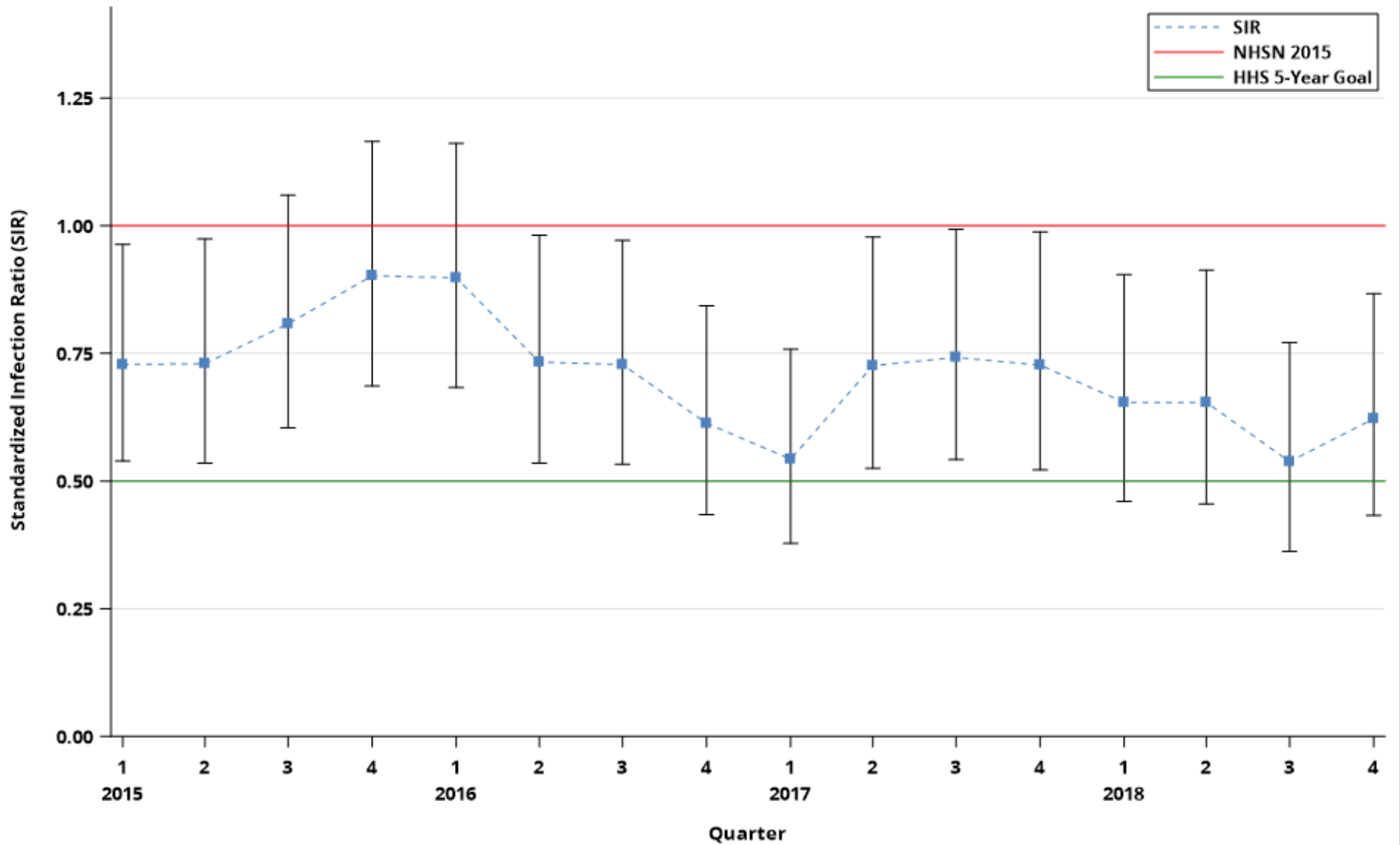
**Microorganisms Associated with CLABSIs in Adult and Pediatric Medical, Surgical, and Medical/Surgical Wards (Table 17, Table 18)**

- Among the 183 pathogens isolated from 164 CLABSIs in 2017, the most common pathogens were *Candida* species and other yeasts (16%), *Enterococcus* species (14%), *Staphylococcus aureus* (14%) and coagulase-negative *Staphylococcus* species (13%). Methicillin-Resistant *S. aureus* (MRSA) accounted for 8% and vancomycin-resistant *Enterococcus* (VRE) for 4% of total positive isolates.
- Among the 160 pathogens isolated from 143 CLABSIs in 2018, the most common pathogens were *Candida* species and other yeasts (17%), coagulase-negative *Staphylococcus* species (11%), *Staphylococcus aureus* (13%) and *Enterococcus* species (11%). Methicillin-Resistant *S. aureus* (MRSA) accounted for 8% and vancomycin-resistant *Enterococcus* (VRE) for 3% of total positive isolates.

**Facility-Specific CLABSI SIRs (Figure 19, Figure 20)**

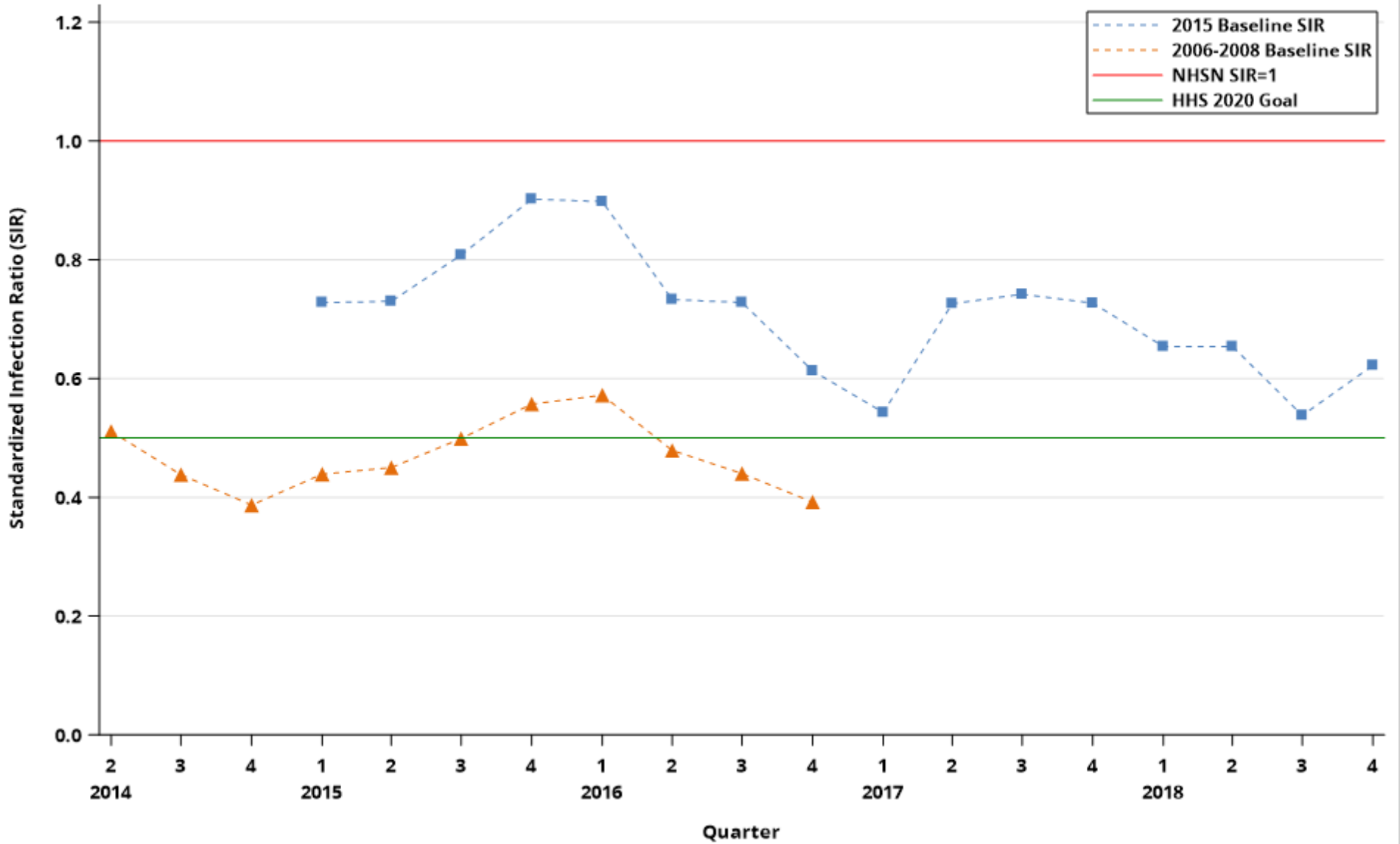
- One CLABSI SIR that accounts for all reporting adult/pediatric ICUs in each facility is displayed in [Figure 19](#) and [Figure 20](#). The bar representing the confidence interval is green if the CLABSI SIR was significantly lower than the national SIR of 1 for 2015, and red if the CLABSI SIR was significantly higher than 1. Some hospitals reported zero CLABSIs (indicated with an asterisk), although the facility's SIR may not be statistically significant due to a relatively small number of central line-days.
- In 2017, 7 facilities had a CLABSI SIR that was significantly lower than the 2015 national baseline SIR of 1. One facility had a CLABSI SIR that was significantly higher than the baseline. In 2018, 4 facilities had a CLABSI SIR that was significantly lower than the 2015 national baseline SIR of 1.

Figure 16: Standardized Infection Ratios (SIR) for Central Line-Associated Bloodstream Infections (CLABSIs) for Adult and Pediatric Medical, Surgical, and Medical/Surgical Wards by Quarter, Tennessee, 01/01/2015–12/31/2018 [Reference standard: National Healthcare Safety Network (NHSN), 2015]



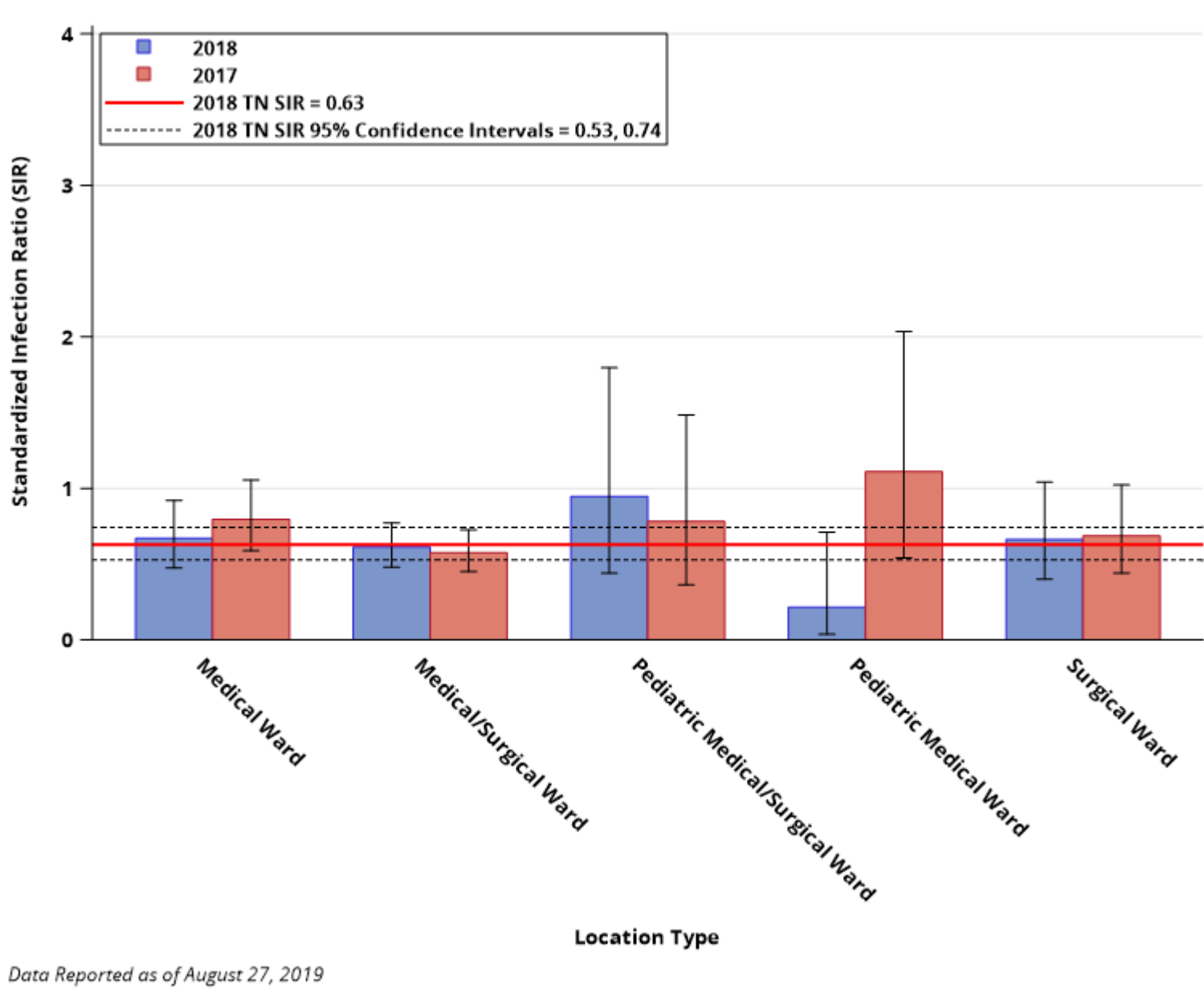
Data Reported as of June 20, 2019

Figure 17: Standardized Infection Ratios (SIR) for Central Line-Associated Bloodstream Infections (CLABSIs) for Adult and Pediatric Medical, Surgical, and Medical/Surgical Wards by Quarter, Tennessee, 04/01/2014–12/31/2018



Data Reported as of June 20, 2019

Figure 18: Standardized Infection Ratios (SIRs) for Central Line-Associated Bloodstream Infections (CLABSI) by Ward Location Type, Tennessee, 2017 and 2018 [Reference standard: National Healthcare Safety Network (NHSN), 2015]



**Table 15: Key Percentiles for Facility-Specific Central Line-Associated Bloodstream Infection (CLABSI) Standardized Infection Ratios (SIRs) in Adult and Pediatric Medical, Surgical, and Medical/Surgical Wards by Reporting Year, Tennessee, 01/01/2017 - 12/31/2018**

									DISTRIBUTION OF FACILITY-SPECIFIC SIRs									
				No. of INFECTIONS		SIR AND 95% CONFIDENCE INTERVAL			No. of FACS WITH SIR SIG. <1.0		No. of FACS WITH SIR SIG. >1.0							
STATE	YEAR	No.	CL DAYS	OBS	PRED	SIR	LOWER LIMIT	UPPER LIMIT	No. of FACS WITH ≥1 PRED INFECTION	N	%	N	%	10%	25%	50%	75%	90%
Tennessee	2018	104	239,159	130	206.93	0.63	0.53	0.74	39	4	10%	0	0%	0.00	0.00	0.51	1.16	1.97
	2017	103	263,665	152	225.17	0.68	0.57	0.79	43	7	16%	1	2%	0.00	0.21	0.69	1.23	2.08

Data reported as of June 20, 2019

No. = number of facilities; CL Days = central line days; OBS = observed number of CLABSI

PRED = statistically 'predicted' number of CLABSI; SIR = standardized infection ratio (observed/predicted number of CLABSI)

Key percentiles include facilities with at least one predicted infection

Red highlighting indicates SIR for reporting period is significantly higher than national 2015 SIR of 1.0

Green highlighting indicates SIR for reporting period is significantly lower than national 2015 SIR of 1.0

**Table 16: Key Percentiles for Unit-Specific Central Line-Associated Bloodstream Infection (CLABSI) Standardized Infection Ratios (SIRs) by Type of Ward and Reporting Year, Tennessee, 01/01/2017 - 12/31/2018**

ICU TYPE				No. of INFECTIONS		SIR AND 95% CONFIDENCE INTERVAL			DISTRIBUTION OF FACILITY-SPECIFIC SIRs					
	YEAR	No.	CL DAYS	OBS	PRED	SIR	LOWER LIMIT	UPPER LIMIT	No. of FACS WITH ≥1 PRED INFECTION	10%	25%	50%	75%	90%
Medical Ward	2018	45	60,846	35	52.33	0.67	0.47	0.92	17	0.00	0.00	0.54	0.73	1.31
	2017	43	67,982	45	56.58	0.80	0.59	1.06	20	0.00	0.00	0.57	1.08	1.78
Medical/Surgical Ward	2018	88	131,129	68	111.19	0.61	0.48	0.77	26	0.00	0.00	0.37	0.78	1.35
	2017	88	139,367	68	118.16	0.58	0.45	0.73	30	0.00	0.00	0.54	1.19	1.75
Pediatric Medical Ward	2018	5	9,110	2	9.31	0.22	0.04	0.71	3	N/A	N/A	N/A	N/A	N/A
	2017	5	8,043	9	8.12	1.11	0.54	2.04	3	N/A	N/A	N/A	N/A	N/A
Pediatric Medical/Surgical Ward	2018	9	8,639	8	8.46	0.95	0.44	1.80	3	N/A	N/A	N/A	N/A	N/A
	2017	9	10,503	8	10.25	0.78	0.36	1.48	3	N/A	N/A	N/A	N/A	N/A
Surgical Ward	2018	26	29,435	17	25.63	0.66	0.40	1.04	8	0.00	0.39	0.83	1.16	1.52
	2017	26	37,770	22	32.07	0.69	0.44	1.02	9	0.00	0.00	0.35	0.93	1.02

Data reported as of August 27, 2019

No. = number of facilities; CL Days = central line days; OBS = observed number of CLABSI

PRED = statistically 'predicted' number of CLABSI; SIR = standardized infection ratio (observed/predicted number of CLABSI)

N/A = not reported if the number of facilities is <5

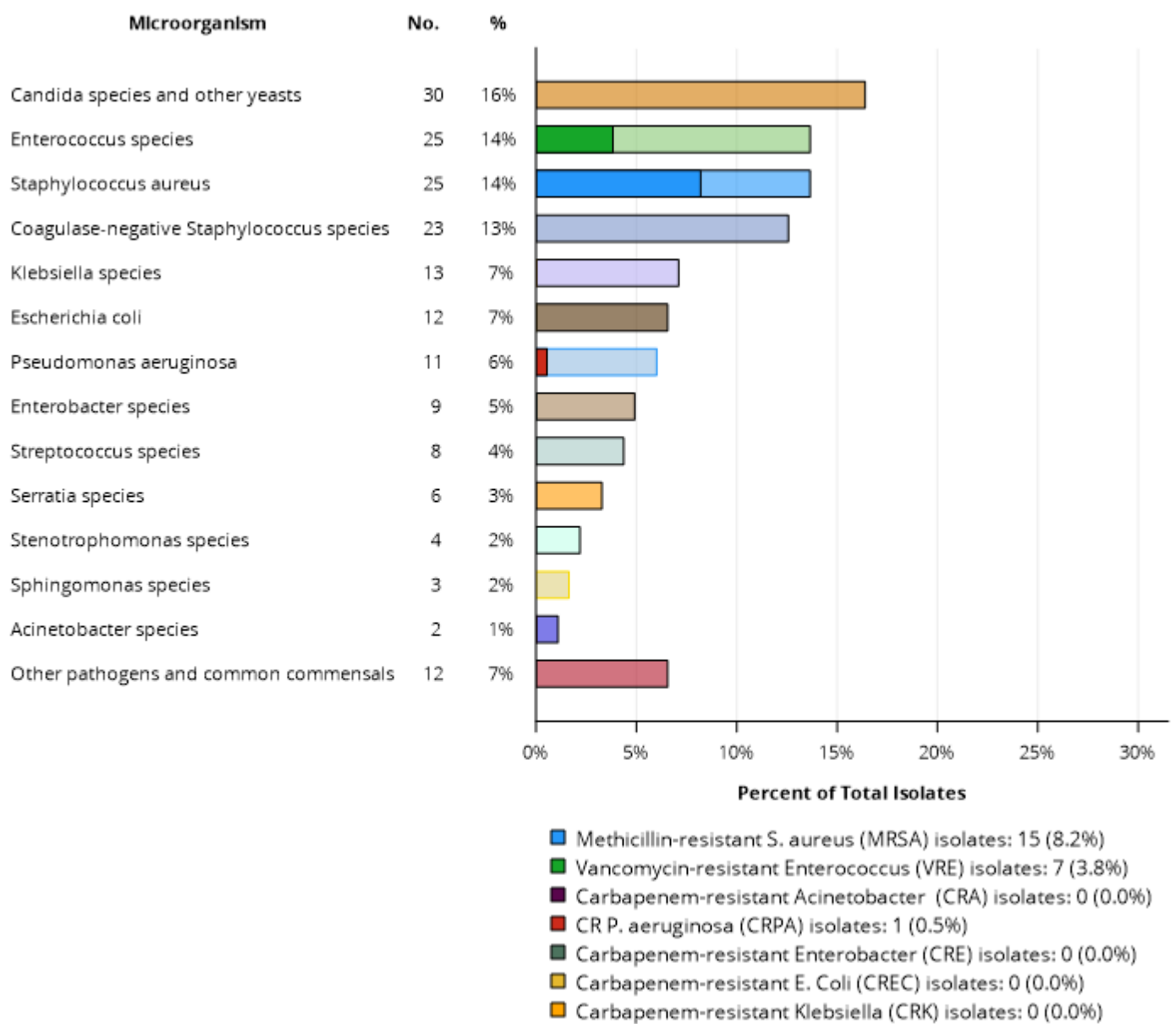
Key percentiles include units with at least one predicted infection

Red highlighting indicates SIR for reporting period is significantly higher than 2015 national SIR of 1.0

Green highlighting indicates SIR for reporting period is significantly lower than 2015 national SIR of 1.0

**Table 17: Microorganisms Identified in Central Line-Associated Bloodstream Infections (CLABSIs) in Adult and Pediatric Wards, Tennessee, 01/01/2017 - 12/31/2017**

**Number of isolates=183; Number of events=164**



Data reported as of June 20, 2019

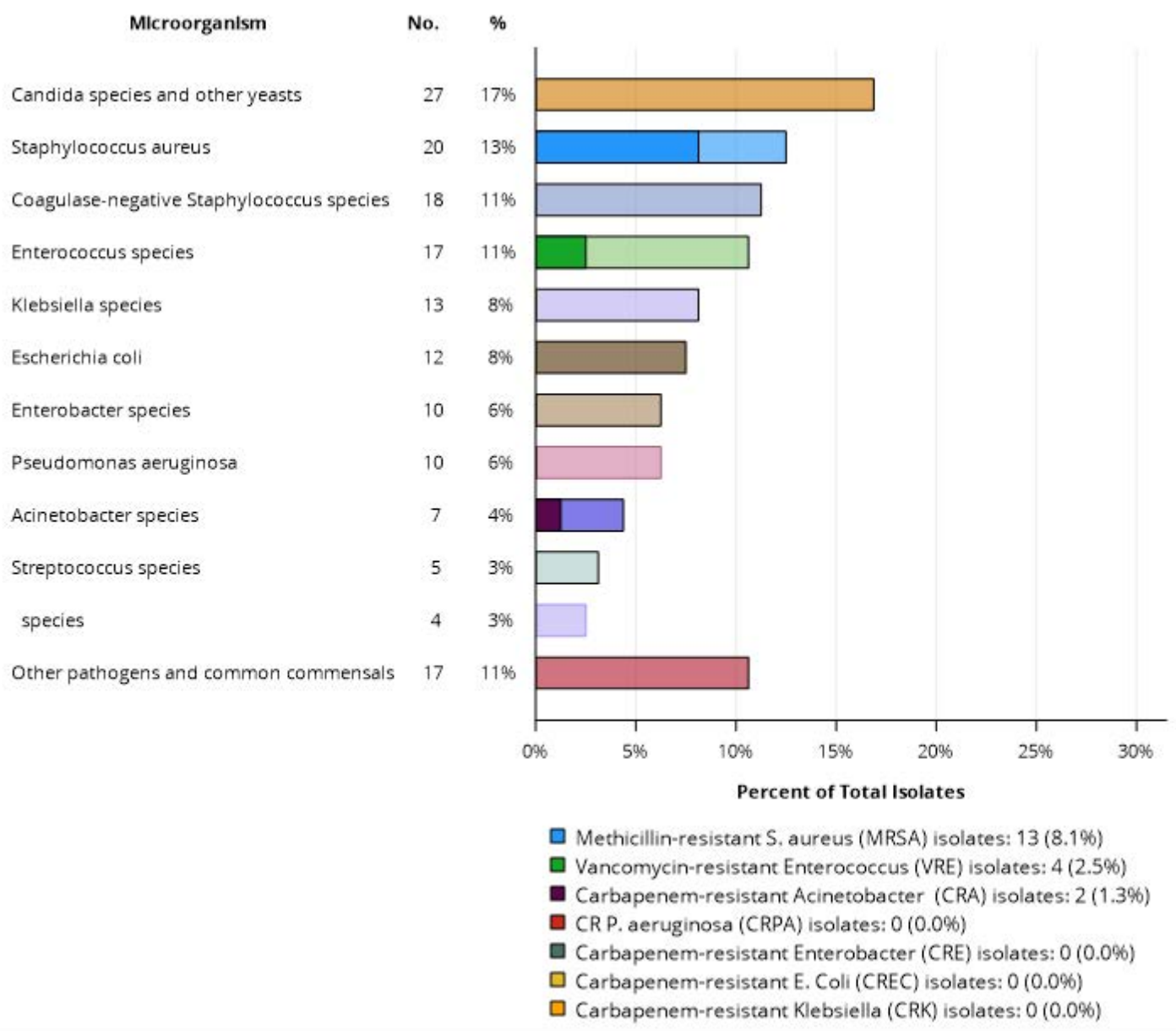
Other common commensals = *Bacillus* spp.

Other pathogens = *Abiotrophia* spp., *Bifidobacterium* spp., *Chryseobacterium* spp., *Clostridium* spp., Gram-negative spp., *Lactobacillus* spp., *Pseudomonas* spp., *Rothia* spp., *Veillonella* spp.



**Table 18: Microorganisms Identified in Central Line-Associated Bloodstream Infections (CLABSIs) in Adult and Pediatric Wards, Tennessee, 01/01/2018 - 12/31/2018**

**Number of isolates=160; Number of events=143**

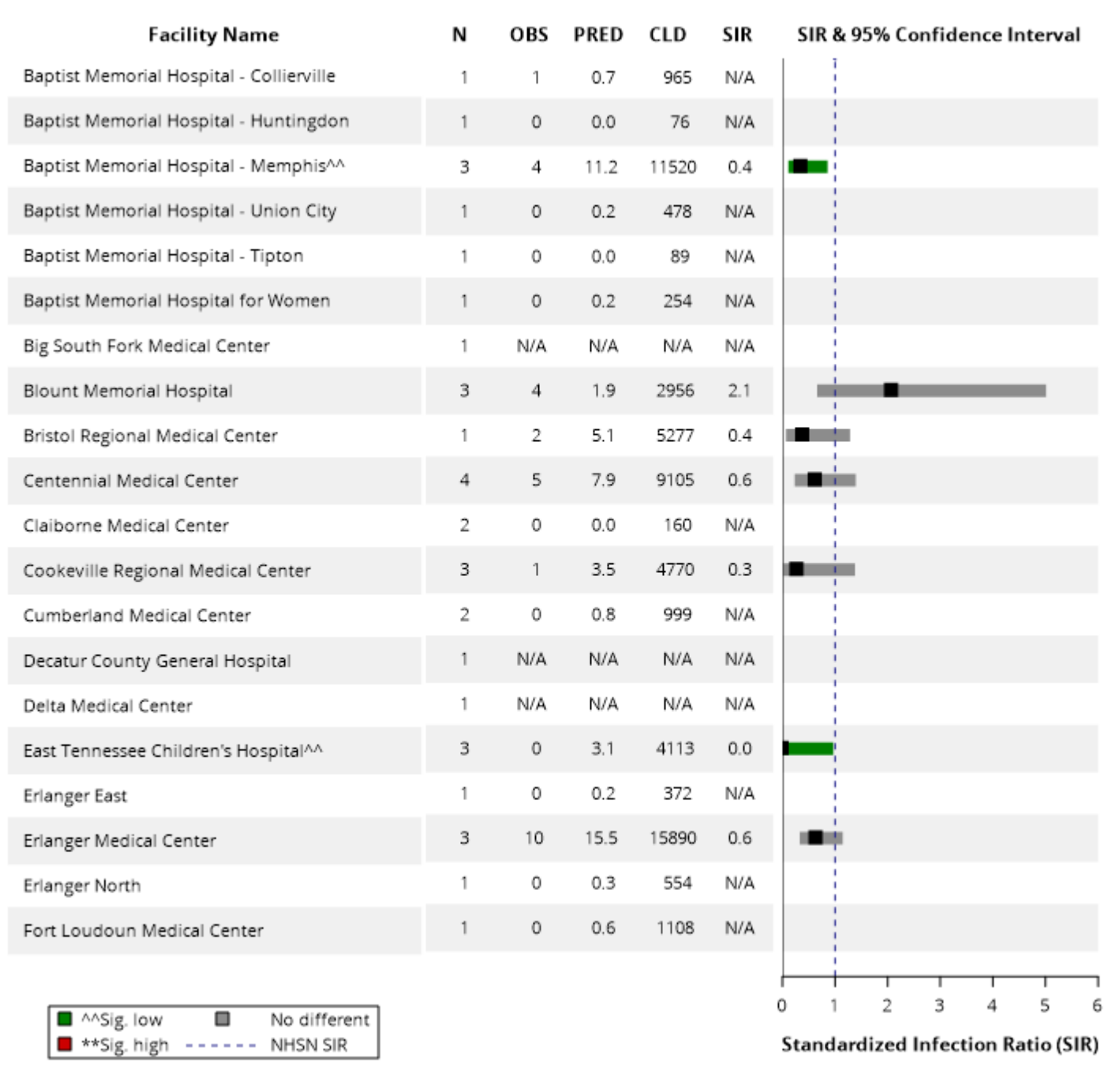


Data reported as of June 20, 2019

Other common commensals = Bacillus spp.

Other pathogens = Bacteroides spp., Bifidobacterium spp., Citrobacter spp., Clostridium spp., Haemophilus spp., Other Staphylococcus spp., Proteus spp., Providencia spp., Pseudomonas spp., Serratia spp., Stenotrophomonas spp.

**Figure 19: CLABSI Standardized Infection Ratio (SIR) for Adult and Pediatric Wards in Acute Care Facilities, Tennessee, 01/01/2017 – 12/31/2017**



Data Reported as of August 27, 2019

N = number of types of units reporting

OBS = observed number of CLABSI

PRED = statistically 'predicted' number of CLABSI, based on NHSN baseline data

SIR = standardized infection ratio (observed/predicted number of CLABSI)

CLD = number of central line days

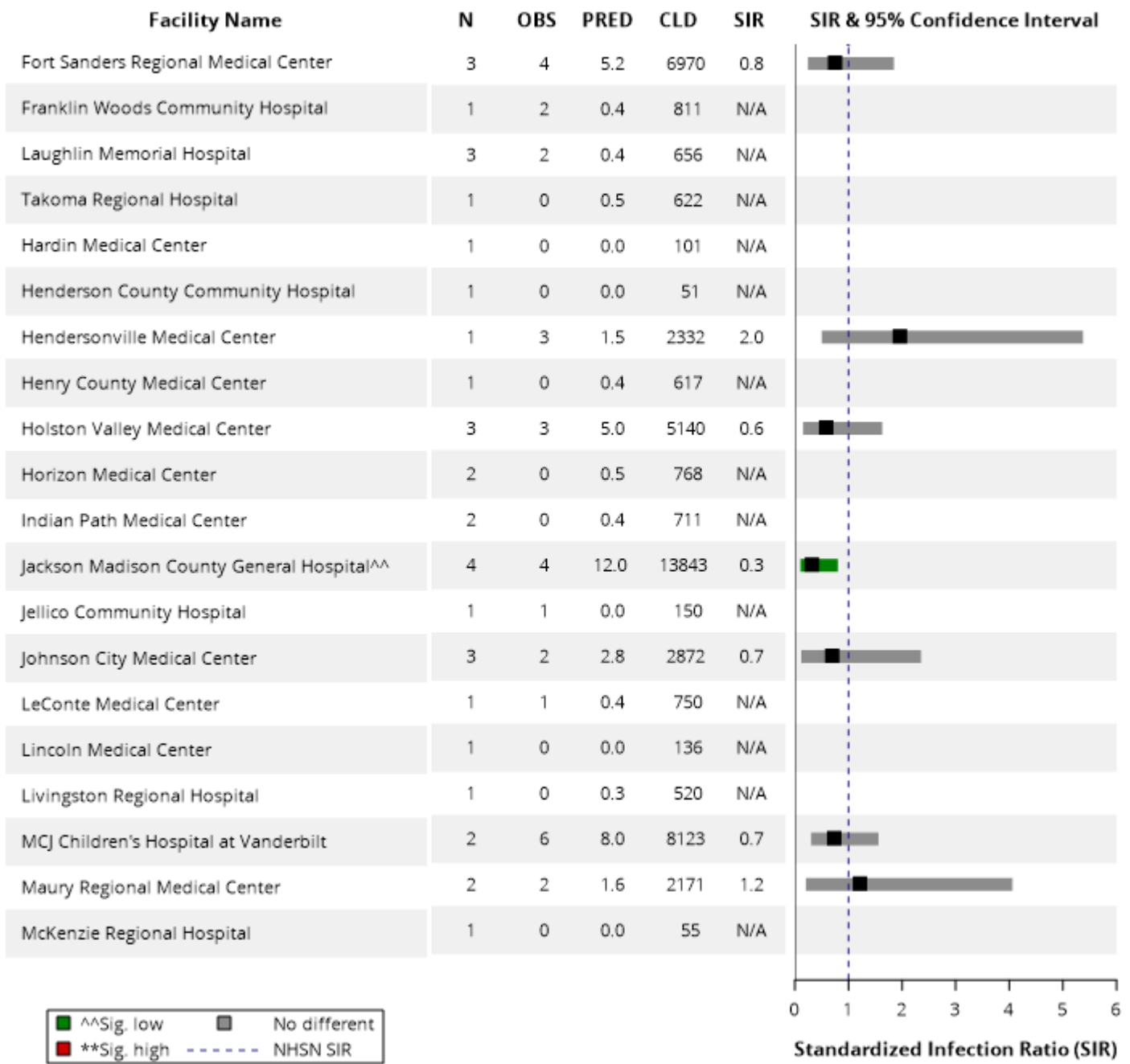
N/A = Data not shown for facilities with <50 central line days / SIR not calculated for facilities with <1 predicted infection

\*\* Significantly higher than 2015 national baseline

^^ Significantly lower than 2015 national baseline

\* Zero infections, but not statistically significant

Figure 19 (cont'd)



Data Reported as of August 27, 2019

N = number of types of units reporting

OBS = observed number of CLABSI

PRED = statistically 'predicted' number of CLABSI, based on NHSN baseline data

SIR = standardized infection ratio (observed/predicted number of CLABSI)

CLD = number of central line days

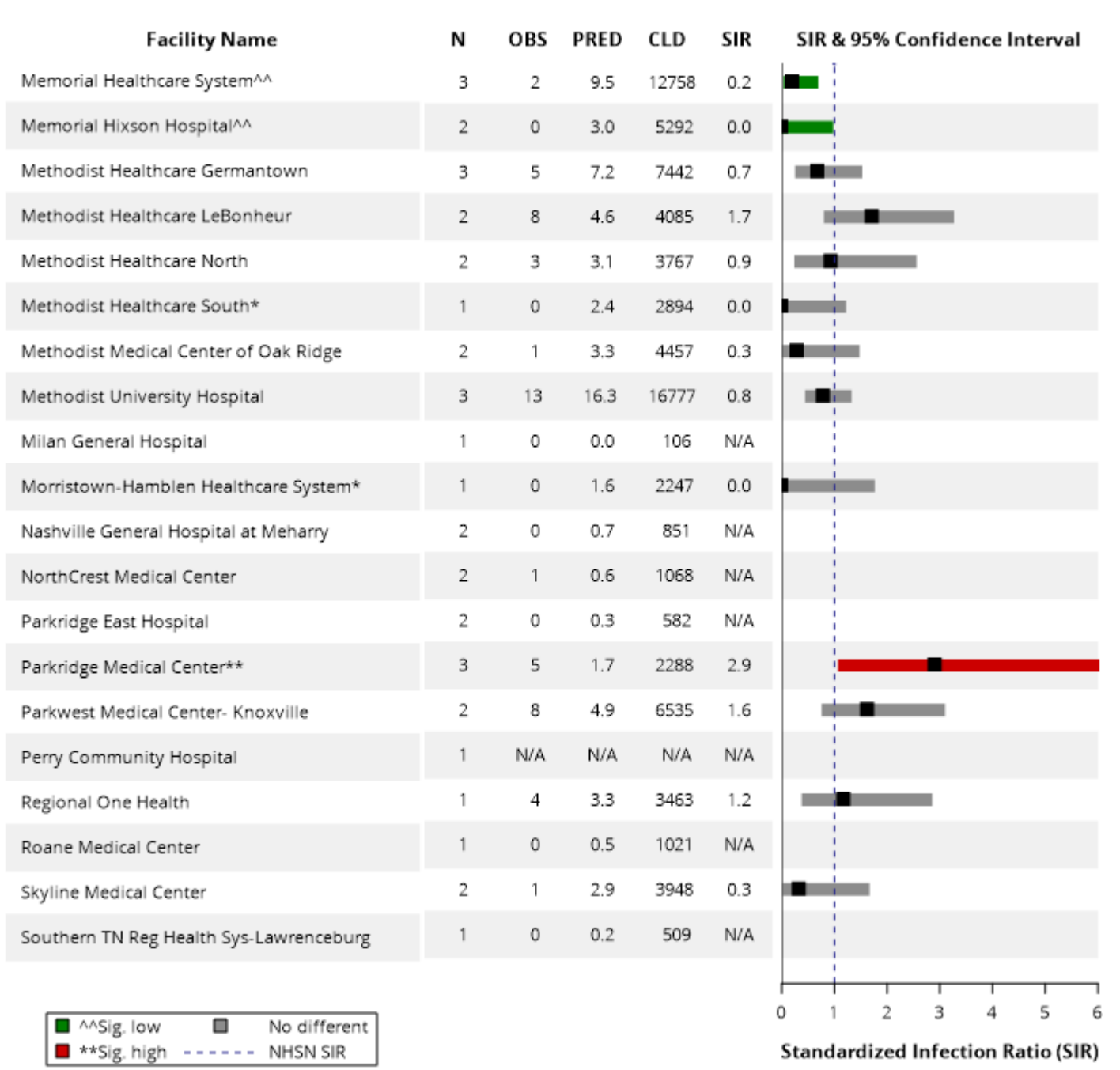
N/A = Data not shown for facilities with <50 central line days / SIR not calculated for facilities with <1 predicted infection

\*\* Significantly higher than 2015 national baseline

^^ Significantly lower than 2015 national baseline

\* Zero infections, but not statistically significant

Figure 19 (cont'd)



Data Reported as of August 27, 2019

N = number of types of units reporting

OBS = observed number of CLABSI

PRED = statistically 'predicted' number of CLABSI, based on NHSN baseline data

SIR = standardized infection ratio (observed/predicted number of CLABSI)

CLD = number of central line days

N/A = Data not shown for facilities with <50 central line days / SIR not calculated for facilities with <1 predicted infection

\*\* Significantly higher than 2015 national baseline

^^ Significantly lower than 2015 national baseline

\* Zero infections, but not statistically significant

Figure 19 (cont'd)



Data Reported as of August 27, 2019

N = number of types of units reporting

OBS = observed number of CLABSI

PRED = statistically 'predicted' number of CLABSI, based on NHSN baseline data

SIR = standardized infection ratio (observed/predicted number of CLABSI)

CLD = number of central line days

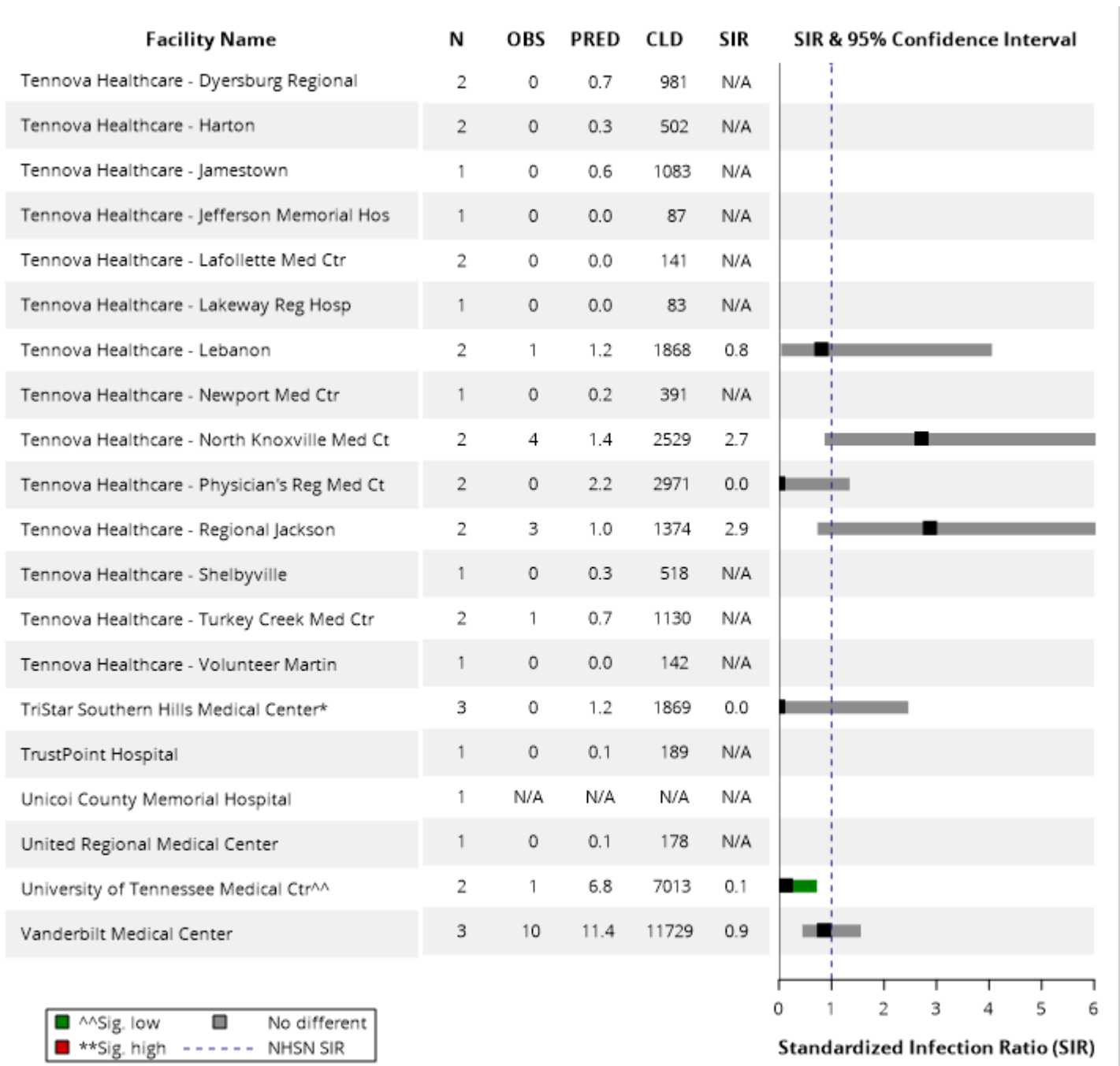
N/A = Data not shown for facilities with <50 central line days / SIR not calculated for facilities with <1 predicted infection

\*\* Significantly higher than 2015 national baseline

^^ Significantly lower than 2015 national baseline

\* Zero infections, but not statistically significant

Figure 19 (cont'd)



Data Reported as of August 27, 2019

N = number of types of units reporting

OBS = observed number of CLABSI

PRED = statistically 'predicted' number of CLABSI, based on NHSN baseline data

SIR = standardized infection ratio (observed/predicted number of CLABSI)

CLD = number of central line days

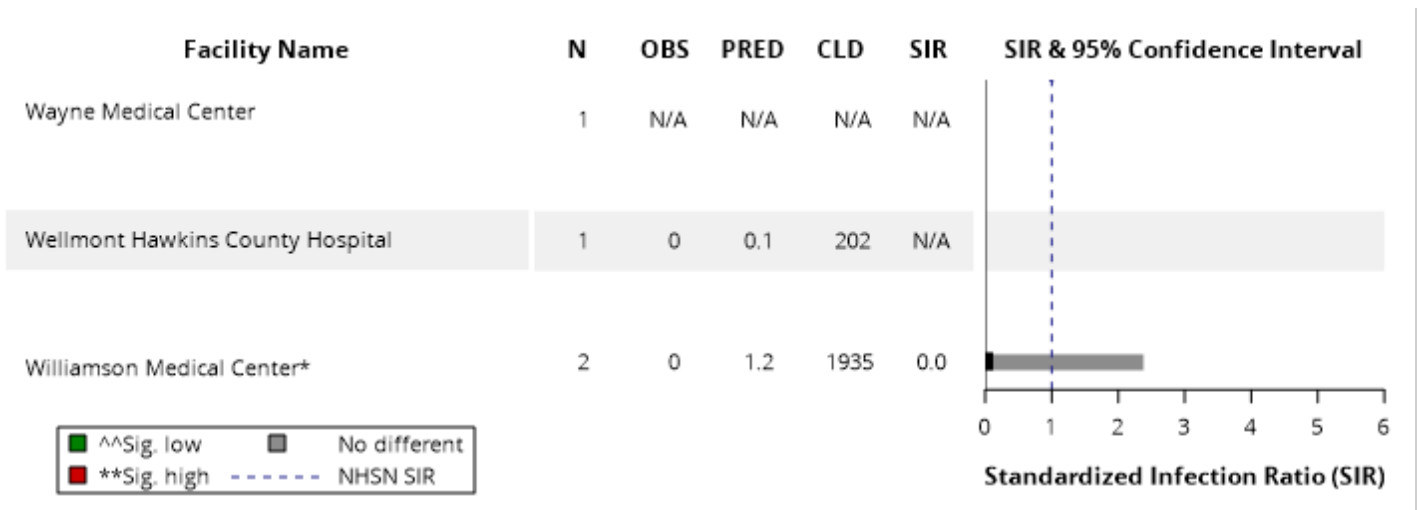
N/A = Data not shown for facilities with <50 central line days / SIR not calculated for facilities with <1 predicted infection

\*\* Significantly higher than 2015 national baseline

^^ Significantly lower than 2015 national baseline

\* Zero infections, but not statistically significant

**Figure 19 (cont'd)**



Data Reported as of August 27, 2019

N = number of types of units reporting

OBS = observed number of CLABSI

PRED = statistically 'predicted' number of CLABSI, based on NHSN baseline data

SIR = standardized infection ratio (observed/predicted number of CLABSI)

CLD = number of central line days

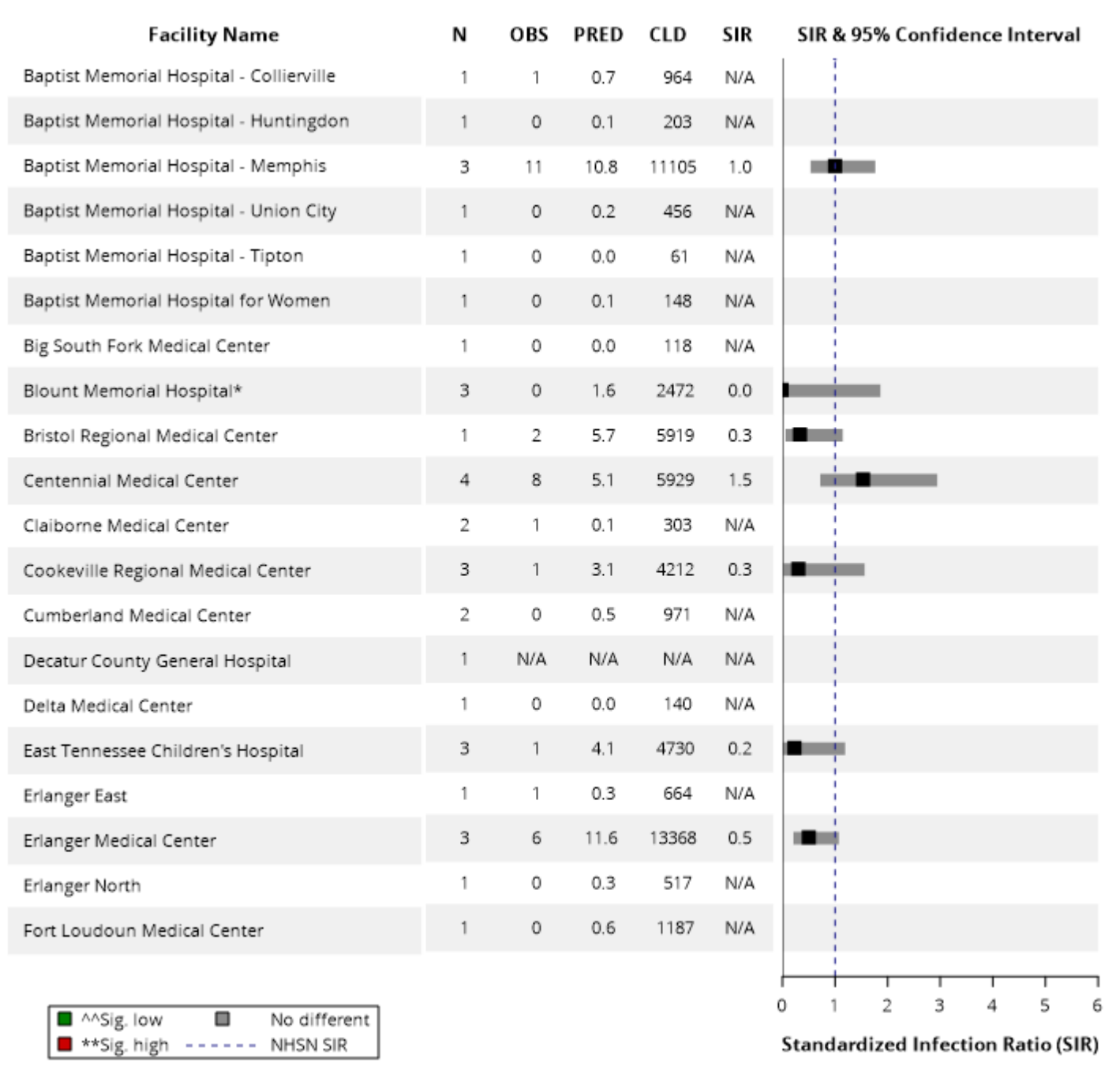
N/A = Data not shown for facilities with <50 central line days / SIR not calculated for facilities with <1 predicted infection

\*\* Significantly higher than 2015 national baseline

^^ Significantly lower than 2015 national baseline

\* Zero infections, but not statistically significant

**Figure 20: CLABSI Standardized Infection Ratio (SIR) for Adult and Pediatric Wards in Acute Care Facilities, Tennessee, 01/01/2018 – 12/31/2018**



Data Reported as of August 27, 2019

N = number of types of units reporting

OBS = observed number of CLABSI

PRED = statistically 'predicted' number of CLABSI, based on NHSN baseline data

SIR = standardized infection ratio (observed/predicted number of CLABSI)

CLD = number of central line days

N/A = Data not shown for facilities with <50 central line days / SIR not calculated for facilities with <1 predicted infection

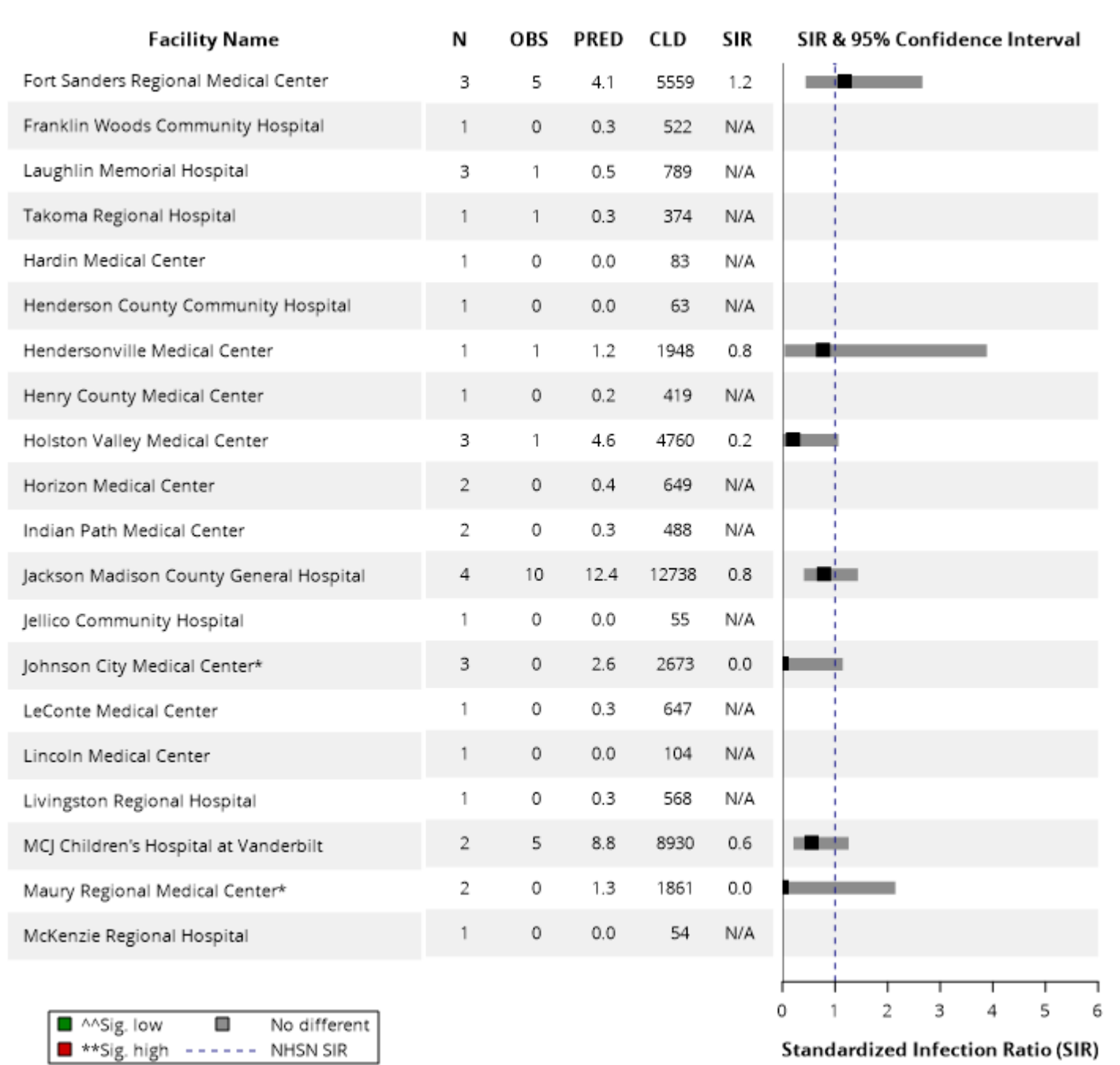
\*\* Significantly higher than 2015 national baseline

^^ Significantly lower than 2015 national baseline

\* Zero infections, but not statistically significant



Figure 20 (cont'd)



Data Reported as of August 27, 2019

N = number of types of units reporting

OBS = observed number of CLABSI

PRED = statistically 'predicted' number of CLABSI, based on NHSN baseline data

SIR = standardized infection ratio (observed/predicted number of CLABSI)

CLD = number of central line days

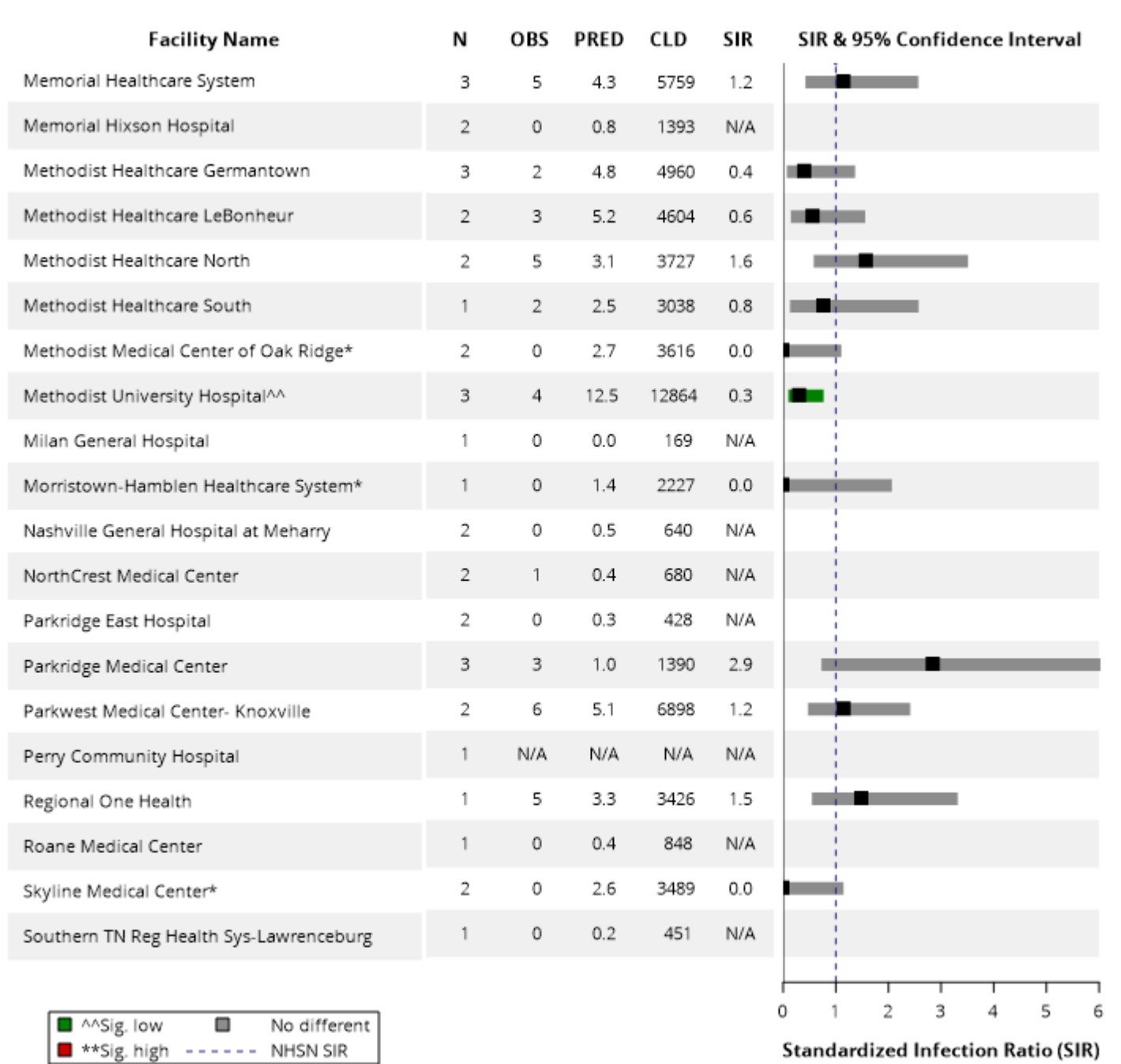
N/A = Data not shown for facilities with <50 central line days / SIR not calculated for facilities with <1 predicted infection

\*\* Significantly higher than 2015 national baseline

^^ Significantly lower than 2015 national baseline

\* Zero infections, but not statistically significant

Figure 20 (cont'd)



Data Reported as of August 27, 2019

N = number of types of units reporting

OBS = observed number of CLABSI

PRED = statistically 'predicted' number of CLABSI, based on NHSN baseline data

SIR = standardized infection ratio (observed/predicted number of CLABSI)

CLD = number of central line days

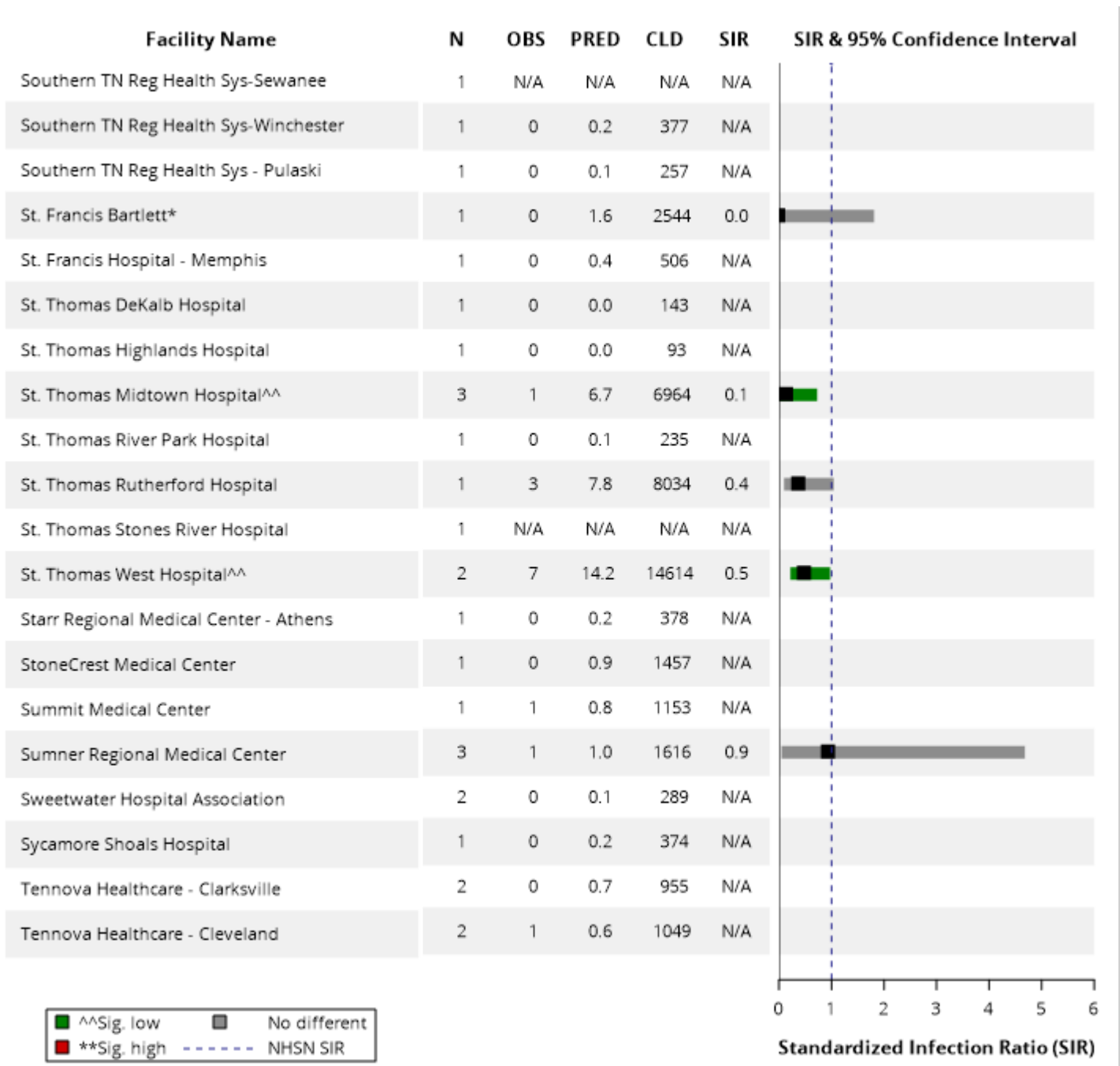
N/A = Data not shown for facilities with <50 central line days / SIR not calculated for facilities with <1 predicted infection

\*\* Significantly higher than 2015 national baseline

^^ Significantly lower than 2015 national baseline

\* Zero infections, but not statistically significant

Figure 20 (cont'd)



Data Reported as of August 27, 2019

N = number of types of units reporting

OBS = observed number of CLABSI

PRED = statistically 'predicted' number of CLABSI, based on NHSN baseline data

SIR = standardized infection ratio (observed/predicted number of CLABSI)

CLD = number of central line days

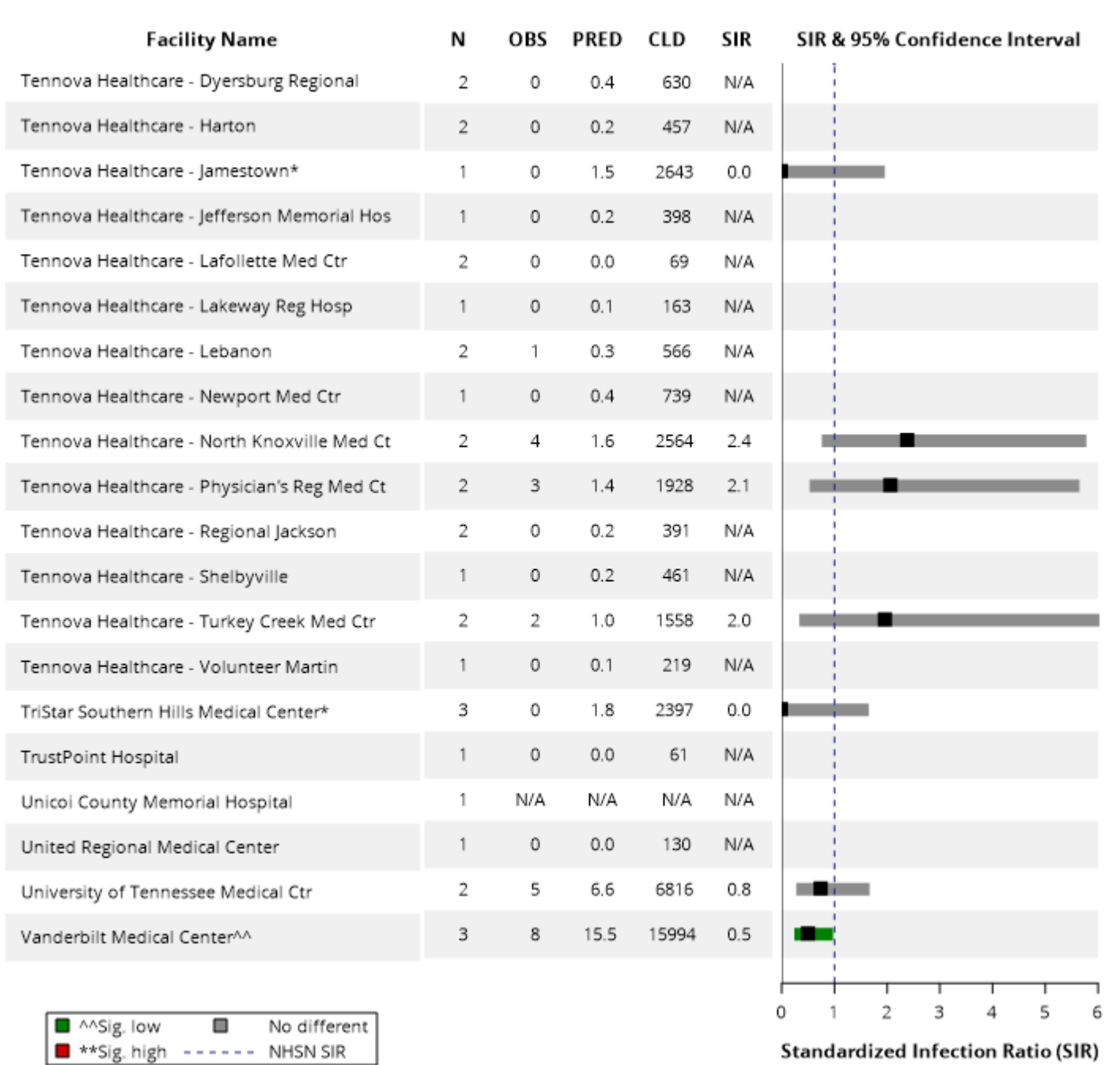
N/A = Data not shown for facilities with <50 central line days / SIR not calculated for facilities with <1 predicted infection

\*\* Significantly higher than 2015 national baseline

^^ Significantly lower than 2015 national baseline

\* Zero infections, but not statistically significant

Figure 20 (cont'd)



Data Reported as of August 27, 2019

N = number of types of units reporting

OBS = observed number of CLABSI

PRED = statistically 'predicted' number of CLABSI, based on NHSN baseline data

SIR = standardized infection ratio (observed/predicted number of CLABSI)

CLD = number of central line days

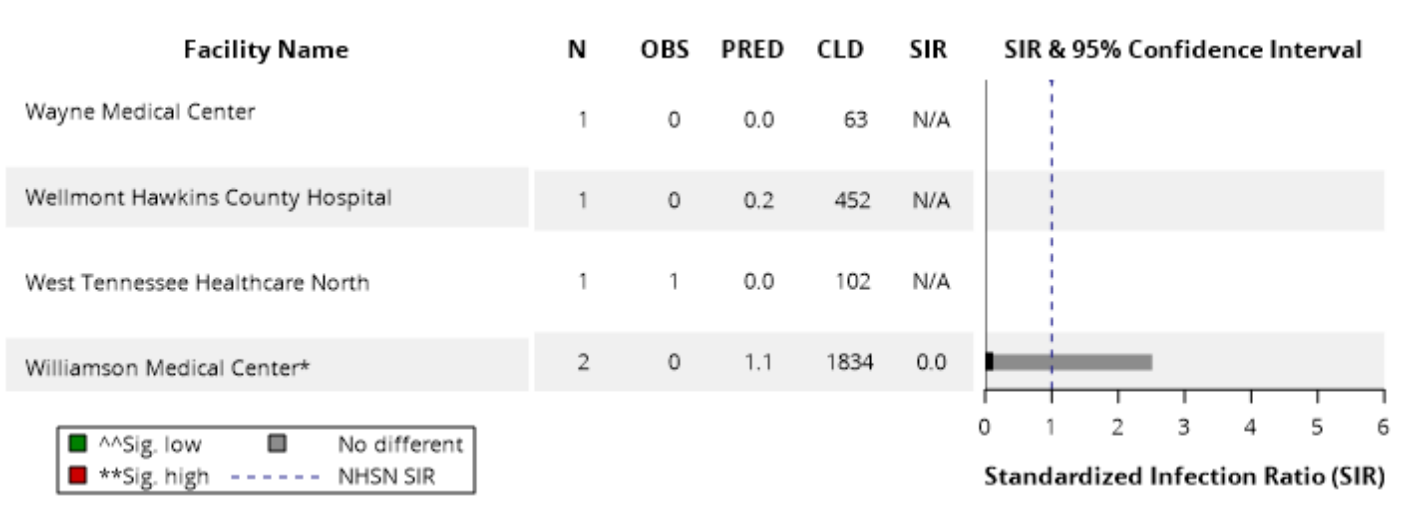
N/A = Data not shown for facilities with <50 central line days / SIR not calculated for facilities with <1 predicted infection

\*\* Significantly higher than 2015 national baseline

^^ Significantly lower than 2015 national baseline

\* Zero infections, but not statistically significant

**Figure 20 (cont'd)**



Data Reported as of August 27, 2019

N = number of types of units reporting

OBS = observed number of CLABSI

PRED = statistically 'predicted' number of CLABSI, based on NHSN baseline data

SIR = standardized infection ratio (observed/predicted number of CLABSI)

CLD = number of central line days

N/A = Data not shown for facilities with <50 central line days / SIR not calculated for facilities with <1 predicted infection

\*\* Significantly higher than 2015 national baseline

^^ Significantly lower than 2015 national baseline

\* Zero infections, but not statistically significant

# CLABSI

*Long-term Acute Care Hospitals*

## CLABSI in Long-Term Acute Care (LTAC) Hospitals:

**Total number of facilities reporting from January-December 2017: 9**

**Total number of facilities reporting from January-December 2018: 9**

### **SIRs by Quarter (Figure 21, Figure 22)**

- From January-March to October–December 2017, the overall CLABSI SIR for Tennessee LTACs fluctuated from a high of 1.29 and a low of 0.72 compared to the national NHSN baseline data from 2015. From January-March to October–December 2018, the overall CLABSI SIR for Tennessee LTACs fluctuated from a high of 1.52 and a low of 0.69 compared to the national NHSN baseline data from 2015. Throughout 2017 and 2018, Tennessee LTACs were above the U.S. Department of Health and Human Services' [National Action Plan to Prevent Healthcare-Associated Infections](#)<sup>12</sup> 2020 prevention target of SIR = 0.50.

### **Unadjusted Rates (Figure 23, Table 19)**

- From January-December 2017, the overall unadjusted CLABSI rate per 1,000 line-days for Tennessee LTACs fluctuated from a high of 1.57 and a low of 0.89. The overall 2017 CLABSI rate was 1.11 per 1,000 line-days.
- From January-December 2018, the overall unadjusted CLABSI rate per 1,000 line-days for Tennessee LTACs fluctuated from a high of 1.64 and a low of 0.77. The overall 2018 CLABSI rate was 1.15 per 1,000 line-days.

### **Key Percentiles for Tennessee SIRs (Table 20)**

- The overall CLABSI SIR across all reporting LTACs in Tennessee from January-December 2017 was not statistically significantly different from the national SIR of 1 (SIR=0.90; 95% CI: 0.67, 1.18). From January-December 2017, the median facility-specific SIR was 0.94, indicating that half of all reporting Tennessee LTACs with at least 1 predicted infection had a SIR at or above 0.94.

<sup>12</sup> <http://www.hhs.gov/ash/initiatives/hai/actionplan/>

- The overall CLABSI SIR across all reporting LTACs in Tennessee from January-December 2018 was statistically significantly lower than the national SIR of 1 (SIR=0.1.03; 95% CI: 0.76, 1.37). From January-December 2018, the median facility-specific SIR was 0.65, indicating that half of all reporting Tennessee LTACs with at least 1 predicted infection had a SIR at or above 0.65.

#### ***Microorganisms Associated with CLABSIs in LTACs (Table 21, Table 22)***

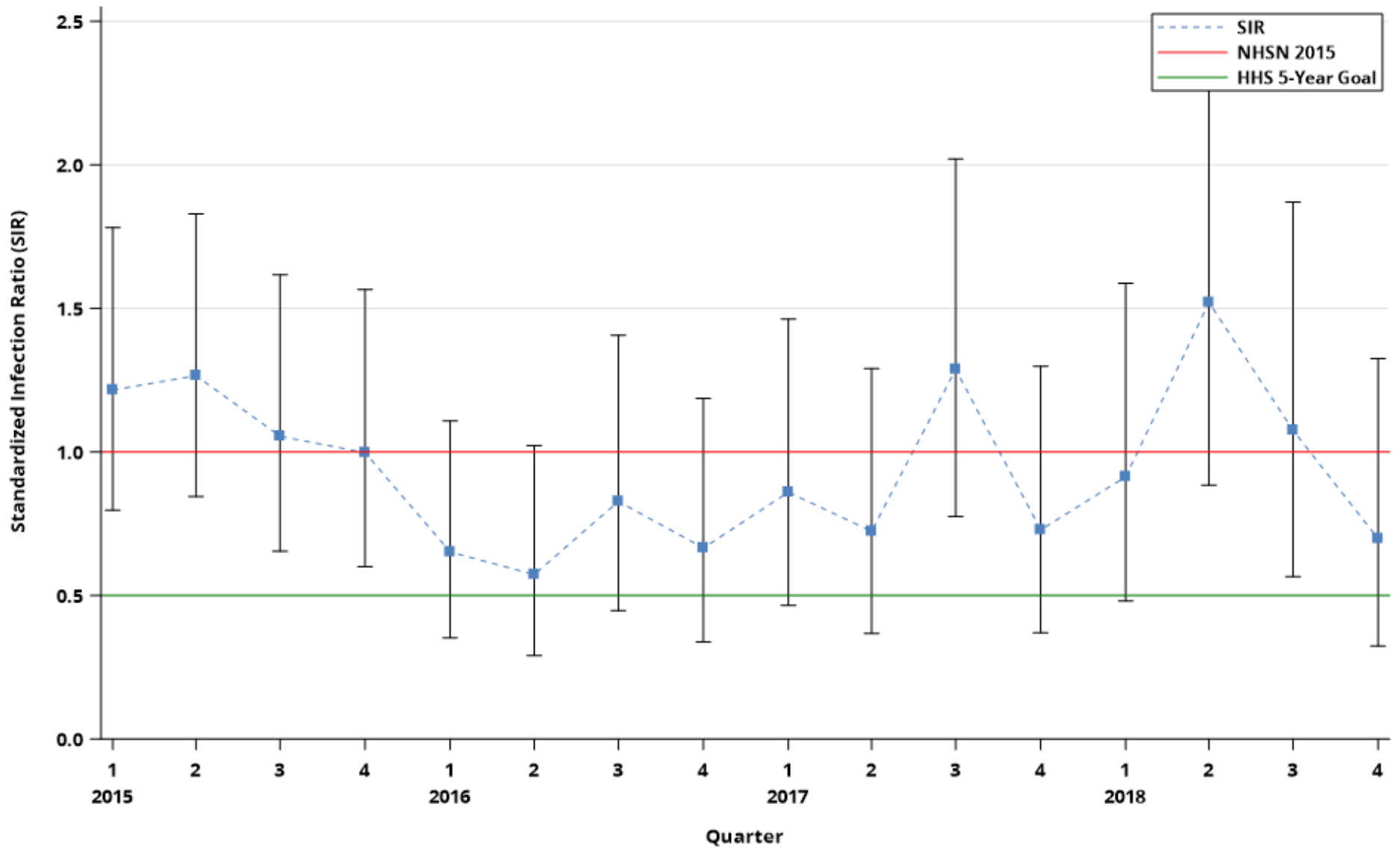
- Among the 50 pathogens isolated from 49 LTAC CLABSIs in 2017, the most common pathogens were *Enterococcus* species (26%), *Candida* species (20%), and *Staphylococcus aureus* (16%). Methicillin-Resistant *S. aureus* (MRSA) accounted for 12%, vancomycin-resistant *Enterococcus* (VRE) for 10% and Carbapenem-resistant *Acinetobacter* for 4% of total positive isolates.
- Among the 51 pathogens isolated from 45 LTAC CLABSIs in 2018, the most common pathogens were *Enterococcus* species (25%) and *Candida* species (24%). Vancomycin-resistant *Enterococcus* (VRE) accounted for 8% and Methicillin-Resistant *S. aureus* (MRSA) accounted for 6% of total positive isolates.

#### ***Facility-Specific SIRs (Figure 24, Figure 25)***

- One LTAC CLABSI SIR per facility is displayed in [Figure 24](#) and [Figure 25](#). The bar representing the confidence interval is green if the CLABSI SIR was significantly lower than the national 2015 SIR of 1, and red if the SIR was significantly higher than 1. Some LTACs reported zero CLABSIs (indicated with an asterisk), although the SIR may not be statistically significant due to a relatively small number of central line-days.
- In 2017, one facility had a LTAC CLABSI SIR that was statistically significantly lower than the 2015 national baseline SIR of 1. In 2018, one facility had a CLABSI SIR that was statistically significantly higher than the baseline.

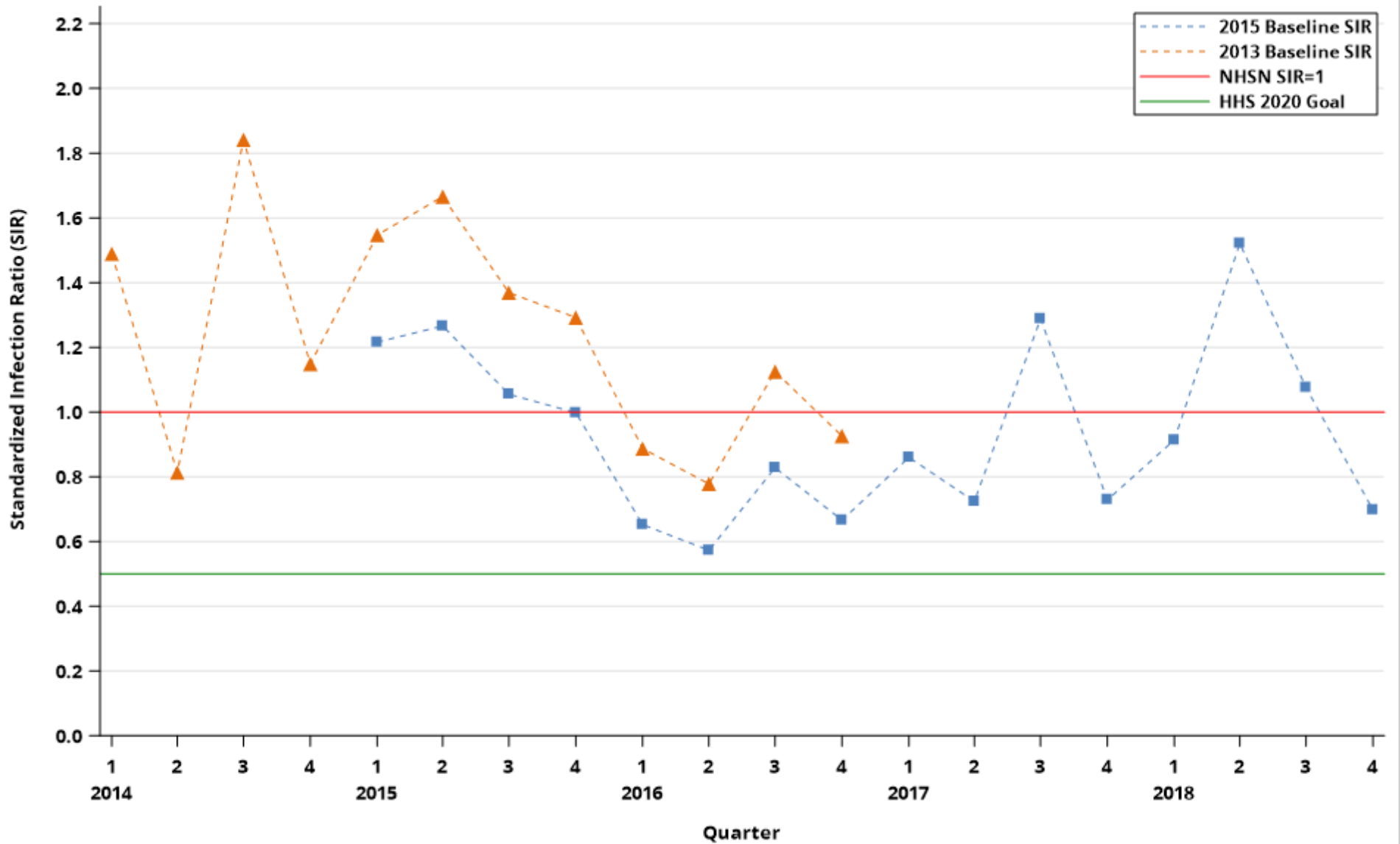


Figure 21: Standardized Infection Ratios (SIR) for Central Line-Associated Bloodstream Infections (CLABSIs) in Long-term Acute Care (LTAC) Facilities by Quarter, Tennessee, 01/01/2015–12/31/2018 [Reference standard: National Healthcare Safety Network (NHSN), 2015]



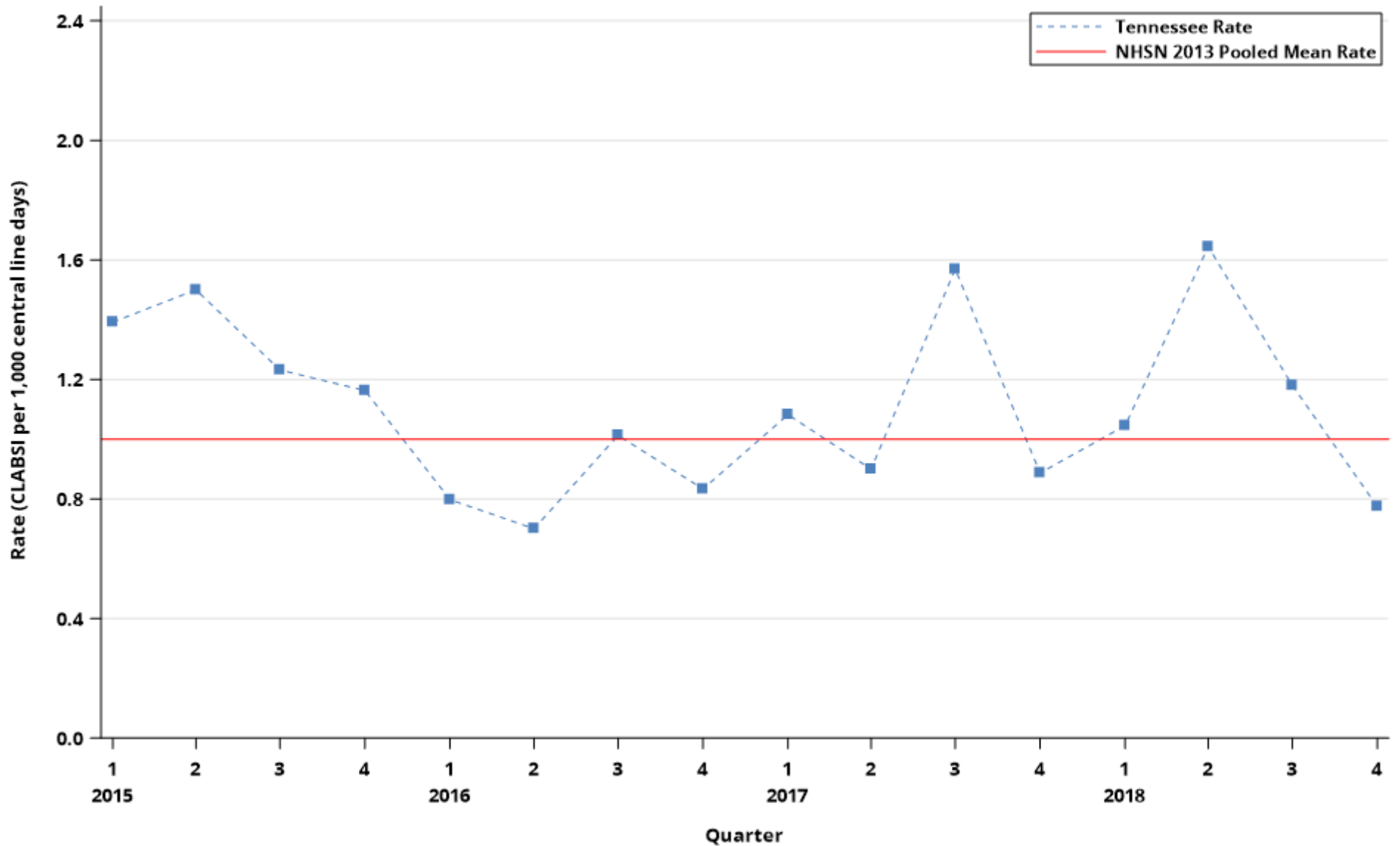
Data Reported as of June 20, 2019

Figure 22: Standardized Infection Ratios (SIR) for Central Line-Associated Bloodstream Infections (CLABSIs) in Long-term Acute Care (LTAC) Facilities by Quarter, Tennessee, 01/01/2014–12/31/2018



Data Reported as of June 20, 2019

**Figure 23: Crude (Unadjusted) Rate of Central Line-Associated Bloodstream Infections (CLABSIs) in Long-term Acute Care (LTAC) Facilities by Quarter, Tennessee, 01/01/2015–12/31/2018 [Reference standard: National Healthcare Safety Network (NHSN), 2013]**



Data Reported as of June 20, 2019

**Table 19: Crude (Unadjusted) Rate of Central Line-Associated Bloodstream Infection (CLABSI) and Catheter Utilization Ratios in Long-term Acute Care (LTAC) Facilities by Reporting Year, Tennessee, 01/01/2017 - 12/31/2018**

STATE	YEAR	No.	CLABSI	CL DAYS	CLABSI Rate*	Patient Days	DU Ratio
Tennessee	2018	9	45	39,286	1.15	93,196	0.42
	2017	9	49	44,308	1.11	95,572	0.46

Data reported as of June 20, 2019

No. = number of facilities; CLABSI = number of observed CLABSI; CL Days = central line days;

DU Ratio = device utilization ratio (central line days/patient days)

\*Per 1,000 central line days

**Table 20: Key Percentiles for Facility-Specific Central Line-Associated Bloodstream Infection (CLABSI) Standardized Infection Ratios (SIRs) in Long-term Acute Care (LTAC) Facilities by Reporting Year, Tennessee, 01/01/2017 - 12/31/2018**

									DISTRIBUTION OF FACILITY-SPECIFIC SIRs									
				No. of INFECTIONS		SIR AND 95% CONFIDENCE INTERVAL			No. of FACS WITH ≥1 PRED INFECTION		No. of FACS WITH SIR SIG. <1.0		No. of FACS WITH SIR SIG. >1.0					
STATE	YEAR	No.	CL DAYS	OBS	PRED	SIR	LOWER LIMIT	UPPER LIMIT	N	%	N	%	10%	25%	50%	75%	90%	
Tennessee	2018	9	39,286	45	43.58	1.03	0.76	1.37	9	0	0%	1	11%	0.00	0.44	0.65	1.27	1.82
	2017	9	44,308	49	54.67	0.90	0.67	1.18	9	1	11%	0	0%	0.00	0.52	0.94	1.30	2.31

Data reported as of June 20, 2019

No. = number of facilities; CL Days = central line days; OBS = observed number of CLABSI

PRED = statistically 'predicted' number of CLABSI; SIR = standardized infection ratio (observed/predicted number of CLABSI)

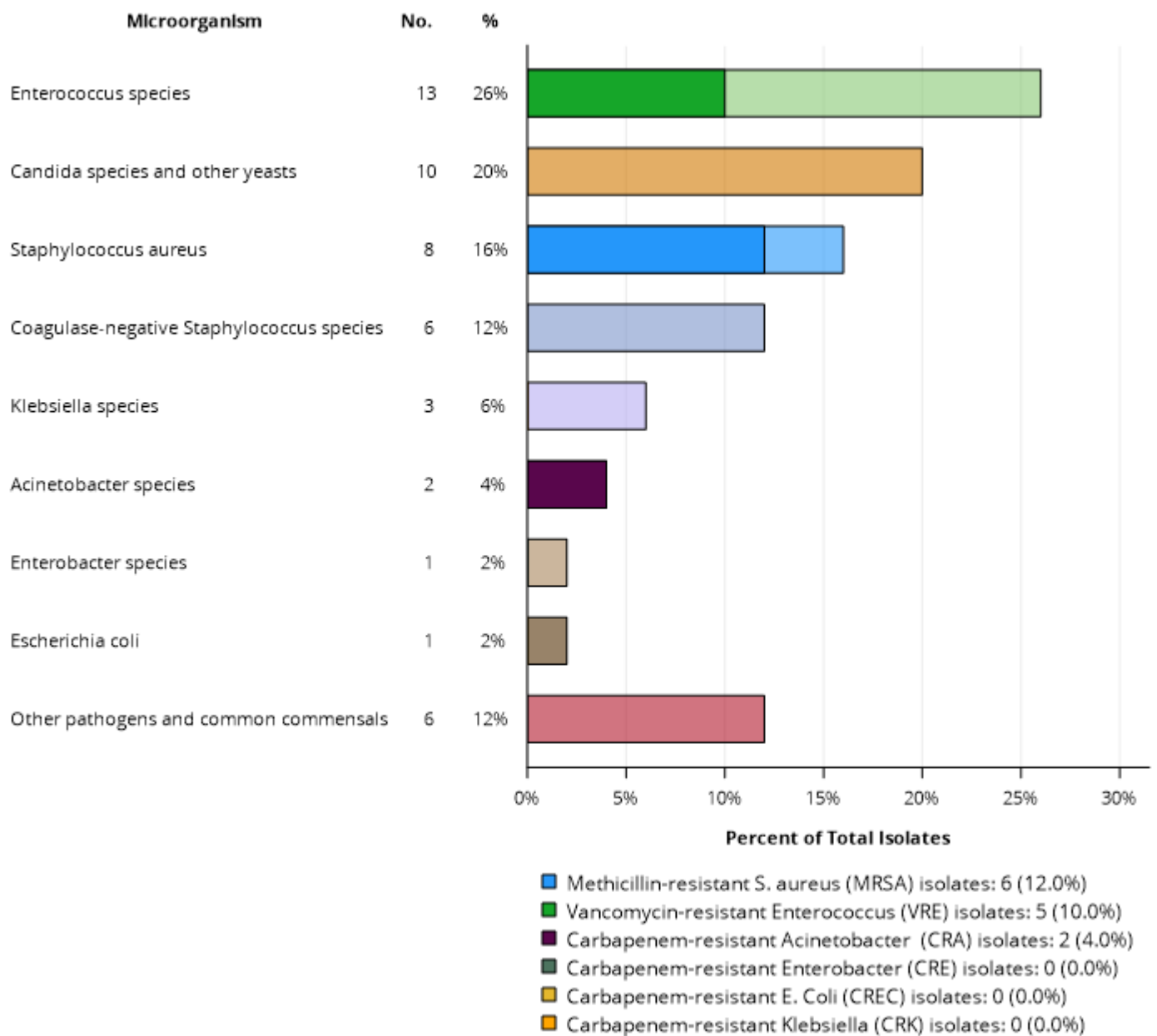
Key percentiles include facilities with at least one predicted infection

Red highlighting indicates SIR for reporting period is significantly higher than national 2015 SIR of 1.0

Green highlighting indicates SIR for reporting period is significantly lower than national 2015 SIR of 1.0

**Table 21: Microorganisms Identified in Central Line-Associated Bloodstream Infections (CLABSI) in Long-term Acute Care (LTAC) Facilities, Tennessee, 01/01/2017 - 12/31/2017**

**Number of isolates=50; Number of events=49**



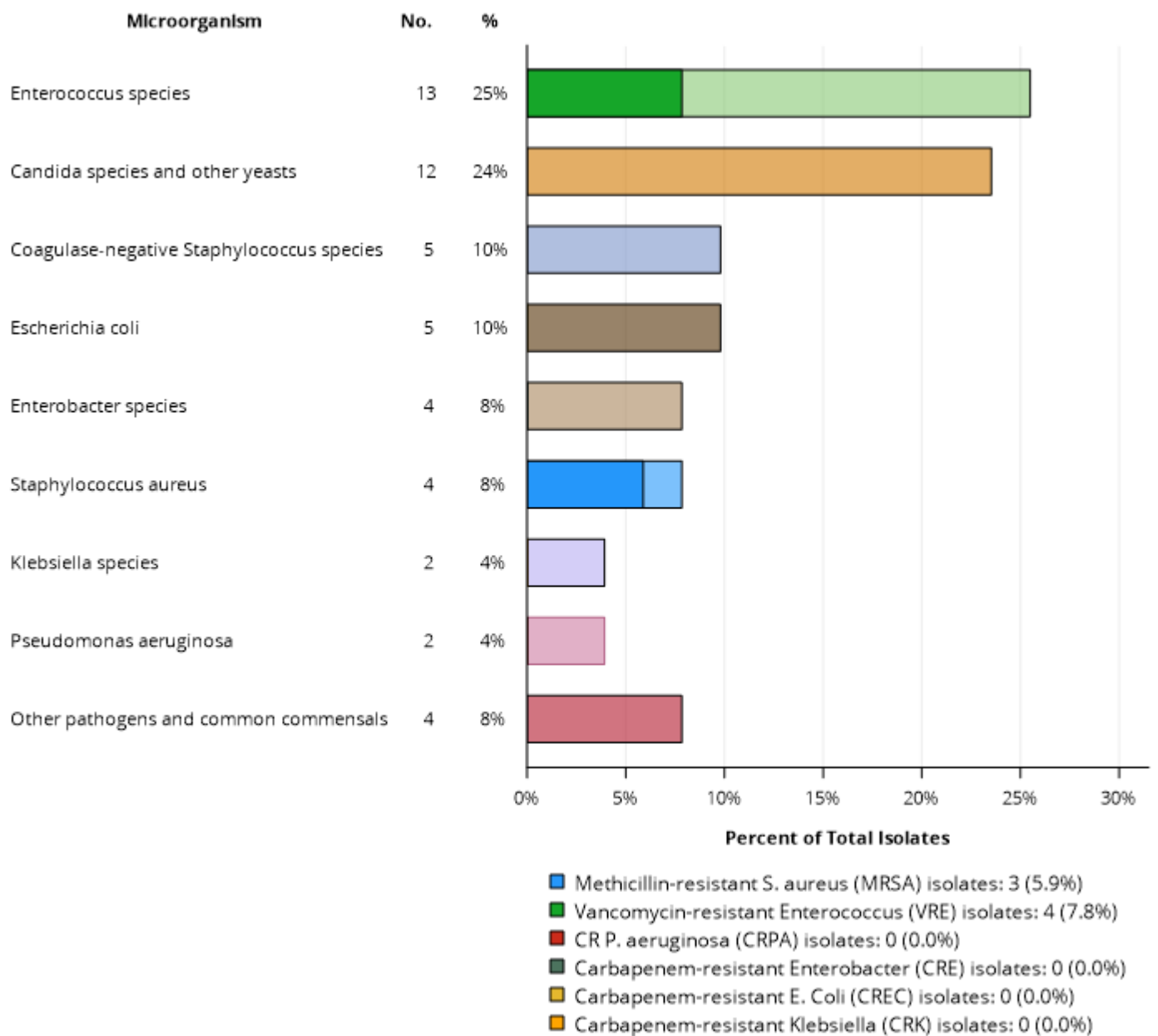
Data reported as of June 20, 2019

Other common commensals = .

Other pathogens = *Bacteroides* spp., *Citrobacter* spp., Gram-positive spp., Other *Staphylococcus* spp., *Serratia* spp., *Streptococcus* spp.

**Table 22: Microorganisms Identified in Central Line-Associated Bloodstream Infections (CLABSIs) in Long-term Acute Care (LTAC) Facilities, Tennessee, 01/01/2018 - 12/31/2018**

**Number of isolates=51; Number of events=45**

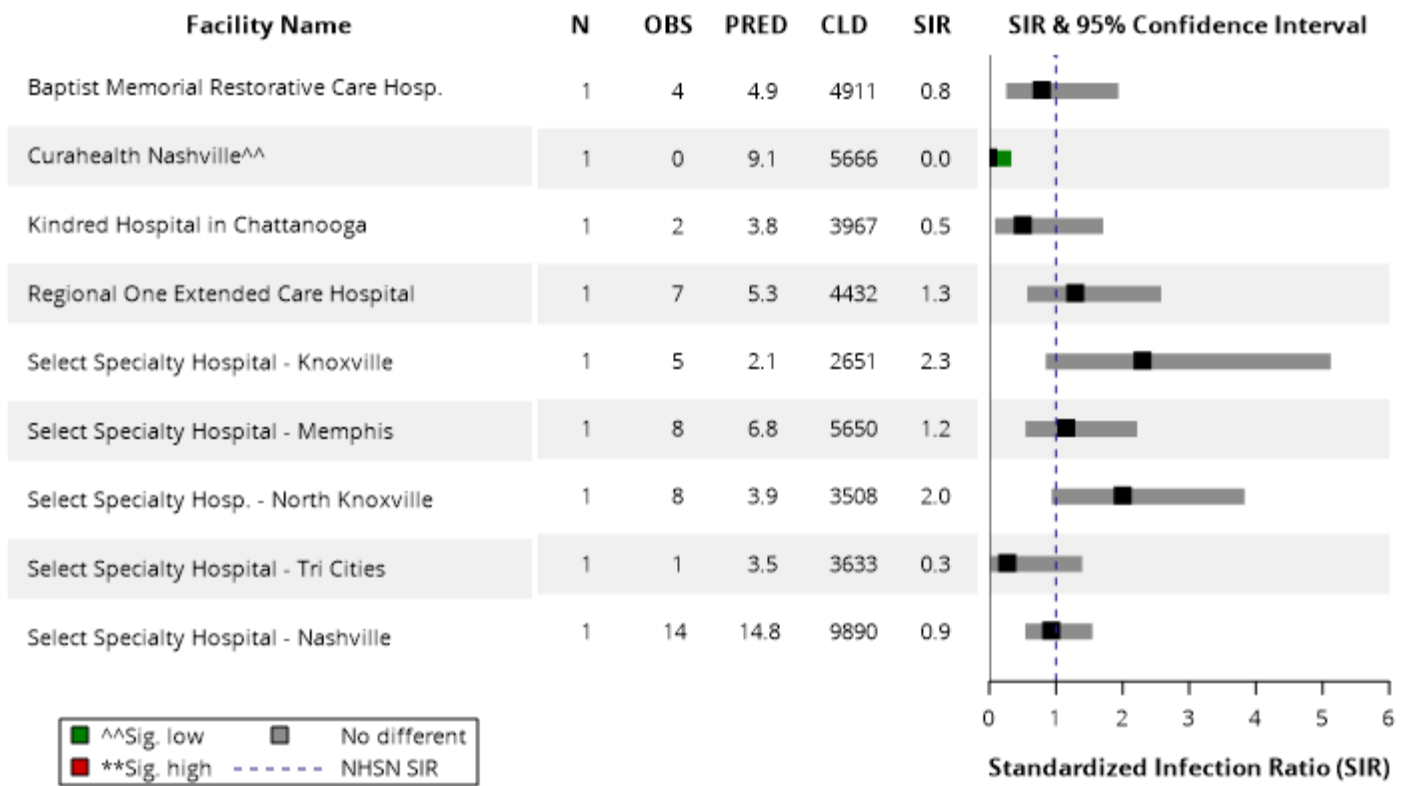


Data reported as of June 20, 2019

Other common commensals = .

Other pathogens = Achromobacter spp., Prevotella spp., Proteus spp.

**Figure 24: CLABSI Standardized Infection Ratio (SIR) for Long-term Acute Care (LTAC) Facilities, Tennessee, 01/01/2017 – 12/31/2017**



Data Reported as of June 20, 2019

N = number of types of units reporting

OBS = observed number of CLABSI

PRED = statistically 'predicted' number of CLABSI, based on NHSN baseline data

SIR = standardized infection ratio (observed/predicted number of CLABSI)

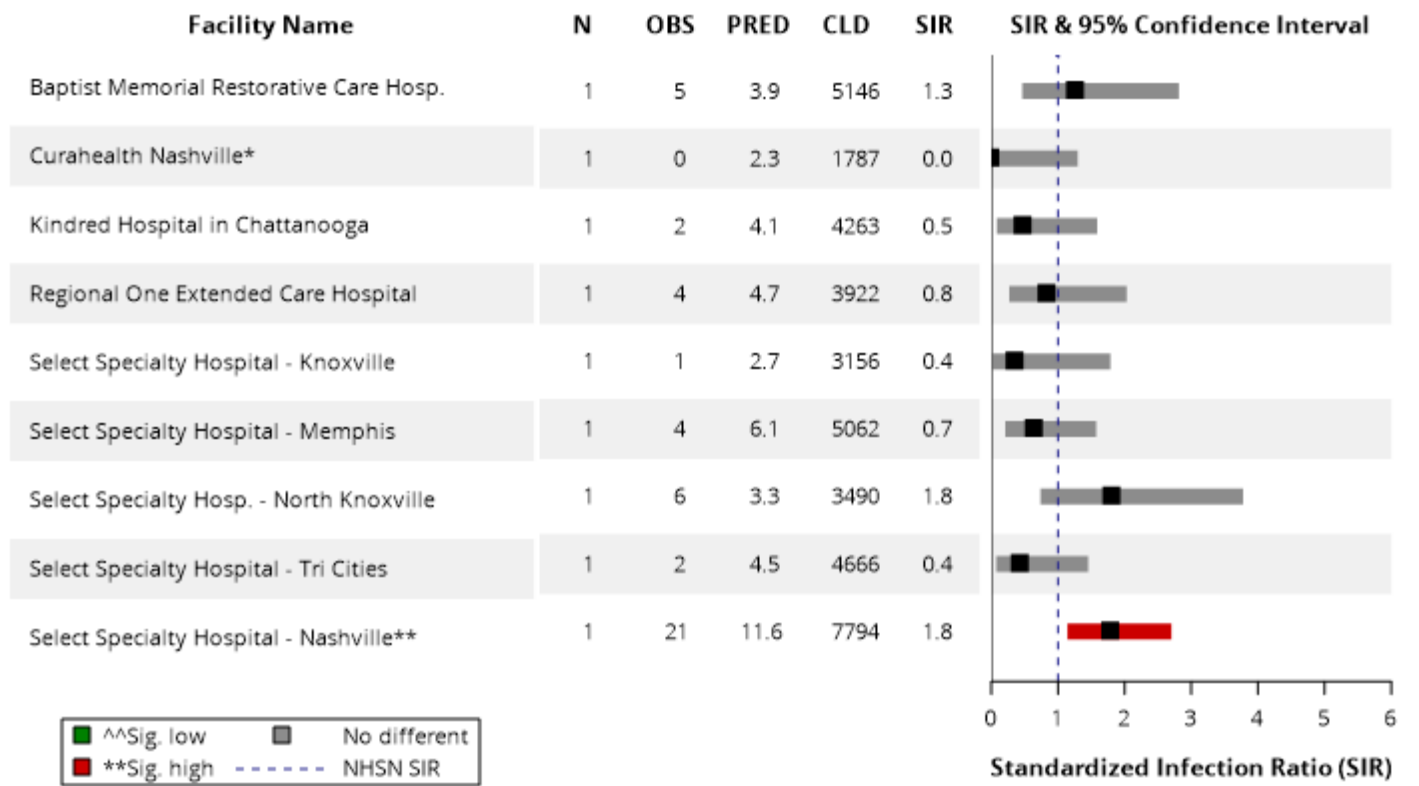
CLD = number of central line days

\*\* Significantly higher than national baseline

^^ Significantly lower than national baseline

\* Zero infections, but not statistically significant

**Figure 25: CLABSI Standardized Infection Ratio (SIR) for Long-term Acute Care (LTAC) Facilities, Tennessee, 01/01/2018 – 12/31/2018**



Data Reported as of June 20, 2019

N = number of types of units reporting

OBS = observed number of CLABSI

PRED = statistically 'predicted' number of CLABSI, based on NHSN baseline data

SIR = standardized infection ratio (observed/predicted number of CLABSI)

CLD = number of central line days

\*\* Significantly higher than national baseline

^^ Significantly lower than national baseline

\* Zero infections, but not statistically significant



# **Catheter-Associated Urinary Tract Infections (CAUTI)**

## ***Catheter-Associated Urinary Tract Infections (CAUTI)***

An indwelling urinary catheter is a drainage tube that is inserted into the urinary bladder through the urethra, is left in place, and is connected to a closed collection system. When pathogens enter the urinary tract through the urinary catheter and lead to urinary tract infections, these infections are known as catheter-associated urinary tract infections. Healthcare facilities can prevent CAUTIs by following appropriate infection prevention recommendations when inserting and maintaining indwelling urinary catheters, and by removing a urinary catheter as soon as it is no longer medically necessary (see [Patient Guide to CAUTI](#)<sup>13</sup>).

### **Reporting Requirements**

Tennessee acute care hospitals have been required to report CAUTI data in adult and pediatric ICUs to TDH since January 2012. Long-term acute care (LTAC) hospitals and inpatient rehabilitation facilities (IRF) began reporting CAUTI data in October 2012. Acute care hospitals began reporting CAUTI from adult and pediatric medical, surgical, and medical/surgical wards in July 2014.

To comply with these reporting requirements, facilities are required to follow the [NHSN CAUTI Surveillance protocol](#)<sup>14</sup>, which is updated each year with CAUTI surveillance definitions and reporting instructions. Facilities must report the number of urinary catheter and patient days for each applicable location each month to NHSN. They are also required to report any urinary tract infections which meet the NHSN surveillance definition of a CAUTI in required locations.

### **Changes to Surveillance Definitions**

In January 2015, NHSN added a new rule to define an eligible urine culture in order to meet UTI criterion. An eligible urine culture was defined as a urine culture with no more than two species of organisms, at least one of which is bacteria of greater than or equal to 100,000 CFU/ml.

### **Facility-Specific Data Thresholds**

When the number of urinary catheter-days (UCD) is small, even a few infections may yield a numerically high infection rate. To ensure fair and accurate reporting of facility-specific CAUTI rates and standardized infection ratios (SIR), TDH has adopted the NHSN minimum thresholds for reporting. To report a facility-specific CAUTI rate or SIR, there must be a minimum of 50 urinary catheter-days for the reporting period. To report a facility-specific SIR, the statistically predicted number of infections

<sup>13</sup> [http://www.cdc.gov/hai/pdfs/uti/CA-UTI\\_tagged.pdf](http://www.cdc.gov/hai/pdfs/uti/CA-UTI_tagged.pdf)

<sup>14</sup> <http://www.cdc.gov/nhsn/PDFs/pscManual/7pscCAUTIcurrent.pdf>

must be at least 1.0.

## CAUTI Risk Adjustment

We use the SIR as a summary measure to compare CAUTI data for facilities in TN to the national benchmark from a baseline time period. Recently, CDC introduced the SIR “rebaseline,” a term that is being used to describe updates to the previous (or original) HAI baselines. CDC used 2015 HAI data to create the updated SIR baselines, which includes updates to both the source of aggregate data and the risk adjustment methodology used to calculate the number of predicted events. Before 2015, the time period used to establish the baseline, or reference points, varied among the different HAI measures. Thus, in previous TN HAI reports, the number of predicted infections was estimated based on those original baselines. Therefore, the data in this report are not comparable with previous HAI reports. The CAUTI SIR is calculated by dividing the total number of observed CAUTI events by the predicted\* number of CAUTIs. This predicted number, which can also be understood as a projection, is calculated using a negative binomial regression model and is adjusted for each facility using variables found to be significant predictors of HAI incidence. The model adjusts for hospital location, facility type, bed size and medical school affiliation in acute care hospitals. In LTACHs, average length of stay, LTACH setting and hospital location are adjusted for. Setting and proportion of admissions with stroke and spinal cord dysfunction are adjusted for in IRFs. Further details can be seen in the [NHSN Guide to the SIR.](#)<sup>15</sup>

\* “Predicted” is used throughout the report as a synonym for the standard statistical term “expected”.

<sup>15</sup> <https://www.cdc.gov/nhsn/pdfs/ps-analysis-resources/nhsn-sir-guide.pdf>

# CAUTI

*Adult and Pediatric Critical Care Units*

## CAUTIs in Adult/Pediatric ICUs:

**Total number of hospitals reporting from January-December 2017: 86**

**Total number of hospitals reporting from January-December 2018: 87**

### **SIRs by Quarter (Figure 26, Figure 27)**

- From January-March 2017 to July-September 2017, the overall CAUTI SIR in Tennessee adult and pediatric ICUs increased from 0.65 to 0.85. The SIR then decreased in the fourth quarter (October-December) to 0.56. In 2018, the January-March SIR was 0.63 and increased over the year to an ending October-December CAUTI SIR of 0.70. The U.S. Department of Health and Human Services' [National Action Plan to Prevent Healthcare-Associated Infections](#)<sup>16</sup> gives a five-year (2020) prevention target of SIR = 0.75.

### **SIR by Unit Type (Figure 28)**

- In 2017, CAUTI SIRs were highest in the pediatric medical-surgical critical care locations (SIR 1.29). Medical, medical-surgical, neurologic, surgical cardiothoracic and surgical critical care locations all had SIRs that were statistically significantly lower than the 2015 national baseline.
- In 2018, CAUTI SIRs were highest in the pediatric surgical cardiothoracic, pediatric medical-surgical, and neurosurgical critical care locations. Medical, medical-surgical, neurologic, and surgical critical care locations all had SIRs that were statistically significantly lower than the 2015 national baseline.

### **Key Percentiles for Tennessee SIRs (Table 23, Table 24)**

- The overall CAUTI SIR across all reporting adult and pediatric ICUs in Tennessee from January-December 2017 was 0.71 (95% CI: 0.63, 0.79). This SIR indicates that the number of CAUTIs in ICUs was statistically significantly lower than the national sir of 1. The overall CAUTI SIR for data reported in 2017 decreased to 0.70 (95% CI: 0.62, 0.79).
- From January-December 2017, the median (50<sup>th</sup> percentile) facility-specific SIR was 0.70, indicating that half of all reporting Tennessee hospitals with at least 1 predicted infection had a SIR at or below 0.70. From January-December 2018, the median (50<sup>th</sup> percentile) facility-specific SIR was 0.53.

<sup>16</sup> <http://www.hhs.gov/ash/initiatives/hai/actionplan/>

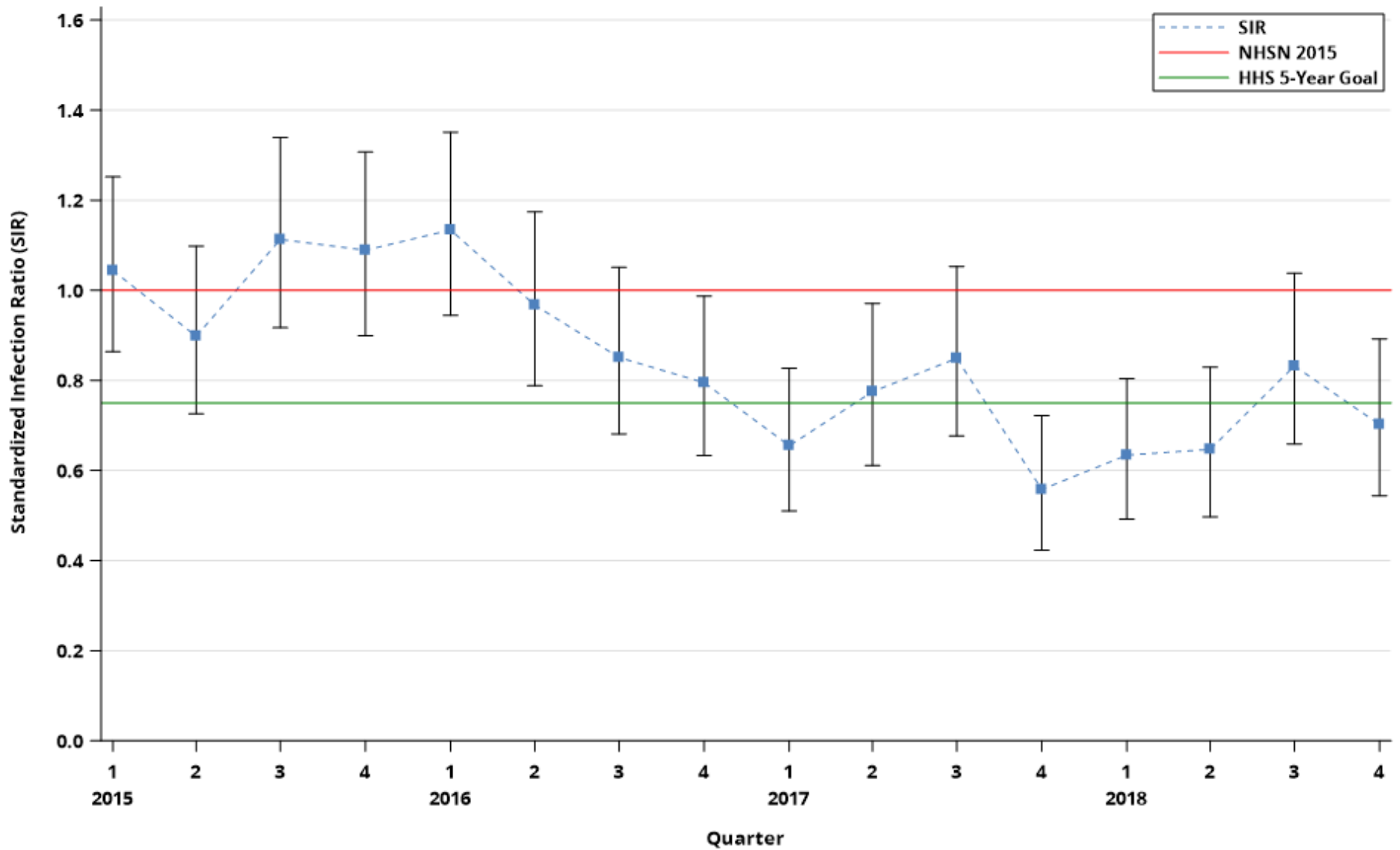
### **Microorganisms Associated with CAUTIs in Adult and Pediatric ICUs (Table 25, Table 26)**

- Among the 305 pathogens isolated from 217 CAUTIs in 2017, the most common pathogens were *Escherichia coli* (35%), *Klebsiella* species (15%), *Pseudomonas aeruginosa* and *Enterococcus* species (13%). Vancomycin-resistant *Enterococcus* (VRE) accounted for 4%, Carbapenem-resistant *P.aeruginosa* for 2% and methicillin-Resistant *S. aureus* (MRSA) accounted for 1% of total positive isolates.
- Among the 296 pathogens isolated from 261 CAUTIs in 2018, the most common pathogens were *Escherichia coli* (34%), *Enterococcus* species (15%), *Klebsiella* species (15%) and *Pseudomonas aeruginosa* (11%). Methicillin-Resistant *S. aureus* (MRSA) accounted for 1%, vancomycin-resistant *Enterococcus* (VRE) for 3%, Carbapenem-resistant *P.aeruginosa* for 2% and Carbapenem-resistant *Acinetobacter* species for 2% of total positive isolates.

### **Facility-Specific SIRs (Figure 29, Figure 30)**

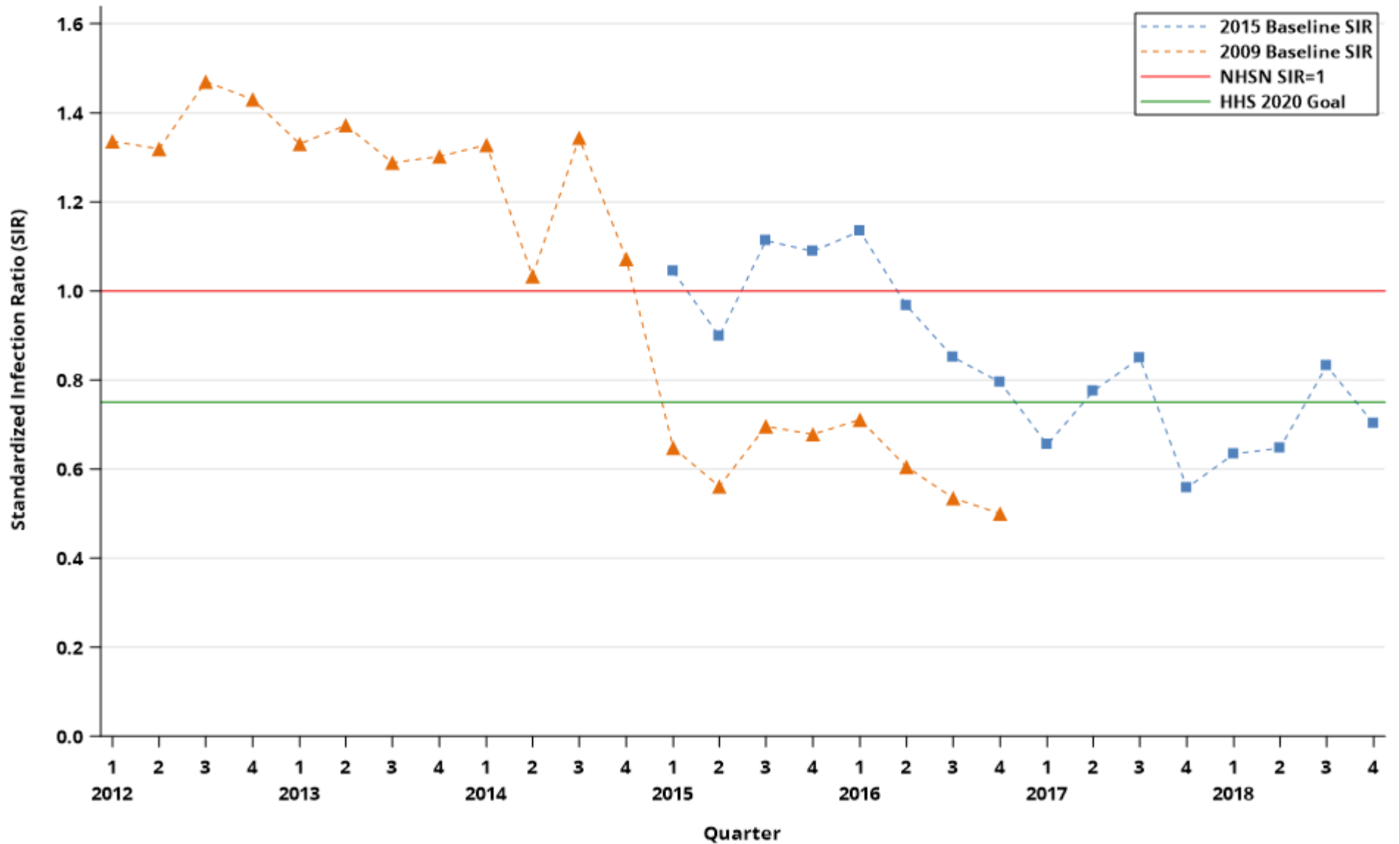
- One CAUTI SIR that accounts for all reporting adult/pediatric ICUs in each facility is displayed in [Figure 29](#) and [Figure 30](#). The bar representing the confidence interval is green if the CAUTI SIR was significantly lower than the national SIR of 1 for 2015 and red if the CAUTI SIR was significantly higher than 1. Some hospitals reported zero CAUTIs (indicated with an asterisk), although the facility's SIR may not be statistically significant due to a relatively small number of urinary catheter-days.
- In 2017, 9 Tennessee facilities had a CAUTI SIR statistically significantly lower than the 2015 national baseline SIR of 1 and one facility had a CAUTI SIR statistically significantly higher than the baseline SIR. In 2018, 7 Tennessee facilities had a CAUTI SIR statistically significantly lower than the 2015 national baseline SIR of 1 and one facility had a CAUTI SIR statistically significantly higher than the baseline SIR.

**Figure 26: Standardized Infection Ratios (SIR) for Catheter-Associated Urinary Tract Infections (CAUTIs) for Adult and Pediatric Intensive Care Units (ICUs) by Quarter, Tennessee, 01/01/2015–12/31/2018 [Reference standard: National Healthcare Safety Network (NHSN), 2015]**



Data Reported as of June 20, 2019

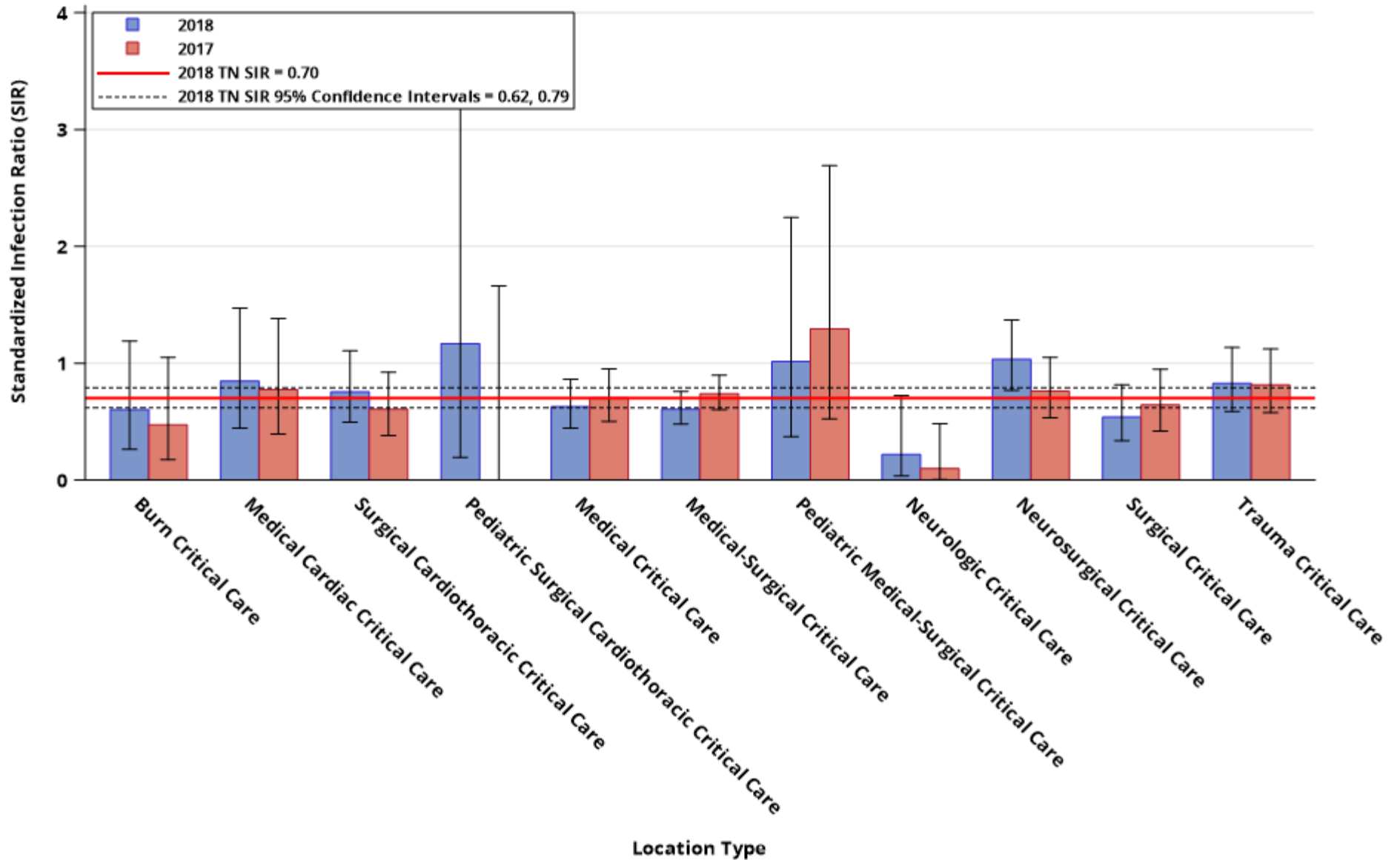
Figure 27: Standardized Infection Ratios (SIR) for Catheter-Associated Urinary Tract Infections (CAUTIs) for Adult and Pediatric Intensive Care Units (ICUs) by Quarter, Tennessee, 01/01/2012–12/31/2018



Data Reported as of June 20, 2019



Figure 28: Standardized Infection Ratios (SIRs) for Catheter-Associated Urinary Tract Infections (CAUTIs) by Intensive Care Unit (ICU) Type, Tennessee, 2017 and 2018 [Reference standard: National Healthcare Safety Network (NHSN), 2015]



Data Reported as of June 20, 2019

**Table 23: Key Percentiles for Facility-Specific Catheter-Associated Urinary Tract Infection (CAUTI) Standardized Infection Ratios (SIRs) in Adult and Pediatric Intensive Care Units (ICUs) by Reporting Year, Tennessee, 01/01/2017 - 12/31/2018**

									DISTRIBUTION OF FACILITY-SPECIFIC SIRs										
				No. of INFECTIONS		SIR AND 95% CONFIDENCE INTERVAL					No. of FACS WITH SIR SIG. <1.0		No. of FACS WITH SIR SIG. >1.0						
STATE	YEAR	No.	UC Days	OBS	PRED	SIR	LOWER LIMIT	UPPER LIMIT	No. of FACS WITH ≥1 PRED INFECTION	N	%	N	%	10%	25%	50%	75%	90%	
Tennessee	2018	87	274,957	261	371.96	0.70	0.62	0.79	48	7	15%	1	2%	0.00	0.05	0.53	0.97	1.47	
	2017	86	288,095	271	383.58	0.71	0.63	0.79	47	9	19%	1	2%	0.00	0.21	0.70	0.98	1.42	

Data reported as of June 20, 2019

No. = number of facilities; UC Days = urinary catheter days; OBS = observed number of CAUTI

PRED = statistically 'predicted' number of CAUTI; SIR = standardized infection ratio (observed/predicted number of CAUTI)

Key percentiles include facilities with at least one predicted infection

Red highlighting indicates SIR for reporting period is significantly higher than national 2015 SIR of 1.0

Green highlighting indicates SIR for reporting period is significantly lower than national 2015 SIR of 1.0

**Table 24: Key Percentiles for Unit-Specific Catheter-Associated Urinary Tract Infection (CAUTI) Standardized Infection Ratios (SIRs) by Type of Intensive Care Unit (ICU) and Reporting Year, Tennessee, 01/01/2017 - 12/31/2018**

ICU TYPE	YEAR	No.	UC Days	No. of INFECTIONS		SIR AND 95% CONFIDENCE INTERVAL			DISTRIBUTION OF FACILITY-SPECIFIC SIRs					
				OBS	PRED	SIR	LOWER LIMIT	UPPER LIMIT	No. of FACS WITH ≥1 PRED INFECTION	10%	25%	50%	75%	90%
Burn Critical Care	2018	2	3,401	7	11.64	0.60	0.26	1.19	2	N/A	N/A	N/A	N/A	N/A
	2017	2	3,083	5	10.55	0.47	0.17	1.05	2	N/A	N/A	N/A	N/A	N/A
Medical Cardiac Critical Care	2018	5	9,606	11	12.98	0.85	0.45	1.47	4	N/A	N/A	N/A	N/A	N/A
	2017	5	10,049	10	12.90	0.78	0.39	1.38	4	N/A	N/A	N/A	N/A	N/A
Medical Critical Care	2018	28	52,867	35	55.75	0.63	0.44	0.86	15	0.00	0.41	0.65	1.14	1.35
	2017	27	51,519	38	54.23	0.70	0.50	0.95	16	0.00	0.00	0.77	1.38	1.85
Medical-Surgical Critical Care	2018	60	120,372	72	118.58	0.61	0.48	0.76	33	0.00	0.00	0.21	0.87	1.65
	2017	59	133,919	98	132.61	0.74	0.60	0.90	32	0.00	0.00	0.62	1.20	1.75
Neurologic Critical Care	2018	1	2,572	2	9.12	0.22	0.04	0.73	1	N/A	N/A	N/A	N/A	N/A
	2017	1	2,872	1	10.18	0.10	0.01	0.48	1	N/A	N/A	N/A	N/A	N/A
Neurosurgical Critical Care	2018	10	14,237	46	44.39	1.04	0.77	1.37	8	0.51	0.59	0.84	1.28	2.30
	2017	10	14,482	34	44.68	0.76	0.54	1.05	9	0.43	0.45	0.65	0.83	1.79
Pediatric Medical Critical Care	2017	1	0	0	0.00	.	.	.	.	N/A	N/A	N/A	N/A	N/A
Pediatric Medical-Surgical Critical Care	2018	7	3,035	5	4.93	1.01	0.37	2.25	2	N/A	N/A	N/A	N/A	N/A
	2017	6	2,849	6	4.64	1.29	0.53	2.69	2	N/A	N/A	N/A	N/A	N/A
Pediatric Neurosurgical Critical Care	2018	1	264	1	0.50	.	.	.	.	N/A	N/A	N/A	N/A	N/A
	2017	1	256	1	0.48	.	.	.	.	N/A	N/A	N/A	N/A	N/A
Pediatric Surgical Cardiothoracic Critical Care	2018	2	1,651	2	1.71	1.17	0.20	3.86	.	N/A	N/A	N/A	N/A	N/A
	2017	2	1,744	0	1.80	0.00	.	1.66	1	N/A	N/A	N/A	N/A	N/A
Surgical Cardiothoracic Critical Care	2018	13	27,562	24	31.78	0.76	0.50	1.11	13	0.00	0.00	0.74	1.32	1.78
	2017	13	28,634	20	32.90	0.61	0.38	0.92	13	0.00	0.00	0.49	0.91	1.32
Surgical Critical Care	2018	9	22,697	20	37.14	0.54	0.34	0.82	9	0.00	0.40	0.43	0.43	2.84
	2017	9	22,697	23	35.75	0.64	0.42	0.95	9	0.00	0.32	0.43	0.93	2.35
Trauma Critical Care	2018	6	16,693	36	43.46	0.83	0.59	1.14	6	0.00	0.18	0.42	0.82	1.55
	2017	6	15,991	35	42.87	0.82	0.58	1.12	6	0.46	0.78	0.84	1.21	1.39

Data reported as of June 20, 2019

No. = number of facilities; UC Days = urinary catheter days; OBS = observed number of CAUTI

PRED = statistically 'predicted' number of CAUTI; SIR = standardized infection ratio (observed/predicted number of CAUTI)

N/A = not reported if the number of facilities is <5

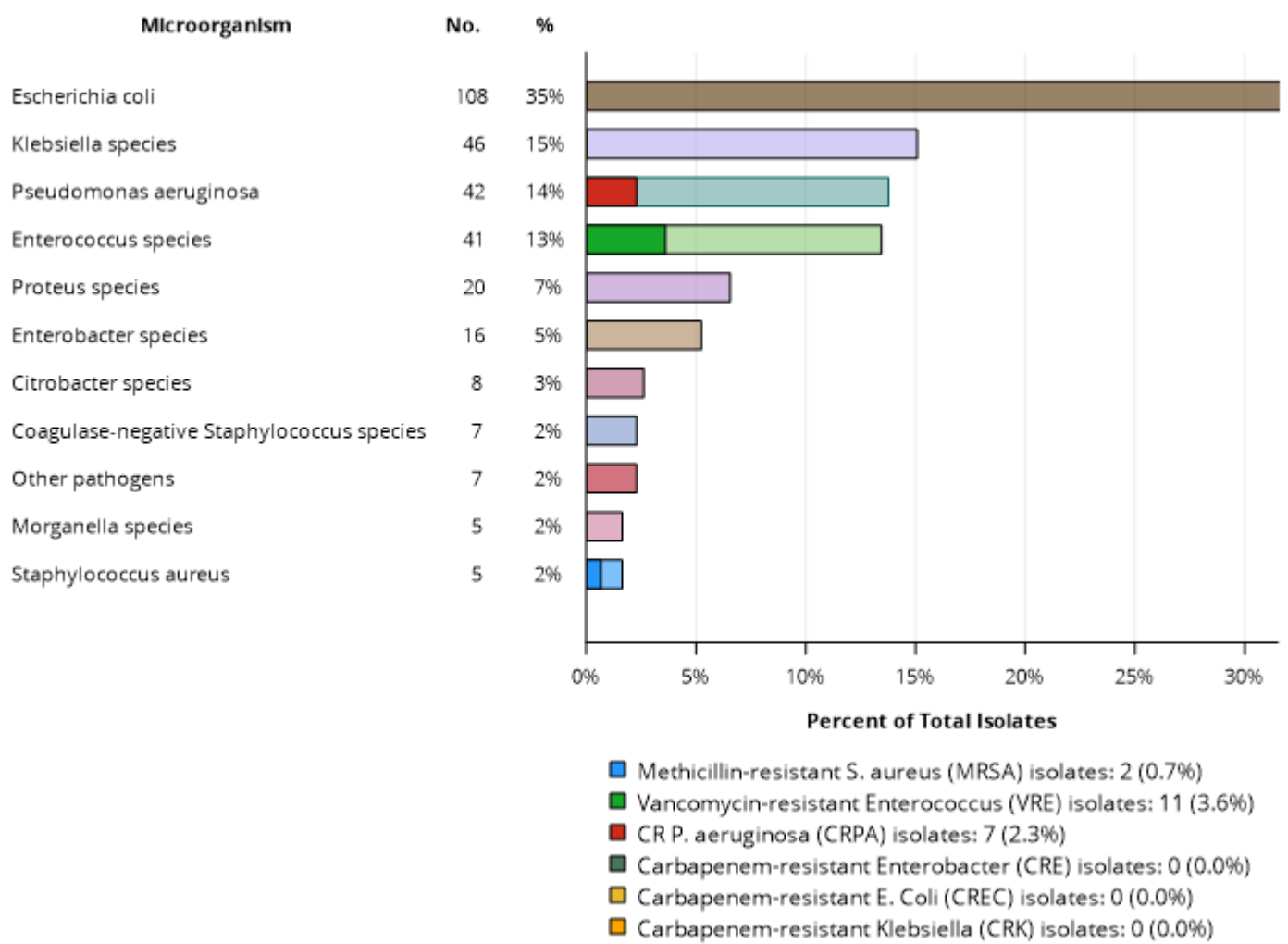
Key percentiles include units with at least one predicted infection

Red highlighting indicates SIR for reporting period is significantly higher than national 2015 SIR of 1.0

Green highlighting indicates SIR for reporting period is significantly lower than national 2015 SIR of 1.0

**Table 25: Microorganisms Identified in Catheter-Associated Urinary Tract (CAUTIs) in Adult and Pediatric Intensive Care Units, Tennessee, 01/01/2017 - 12/31/2017**

**Number of isolates=305; Number of events=271**

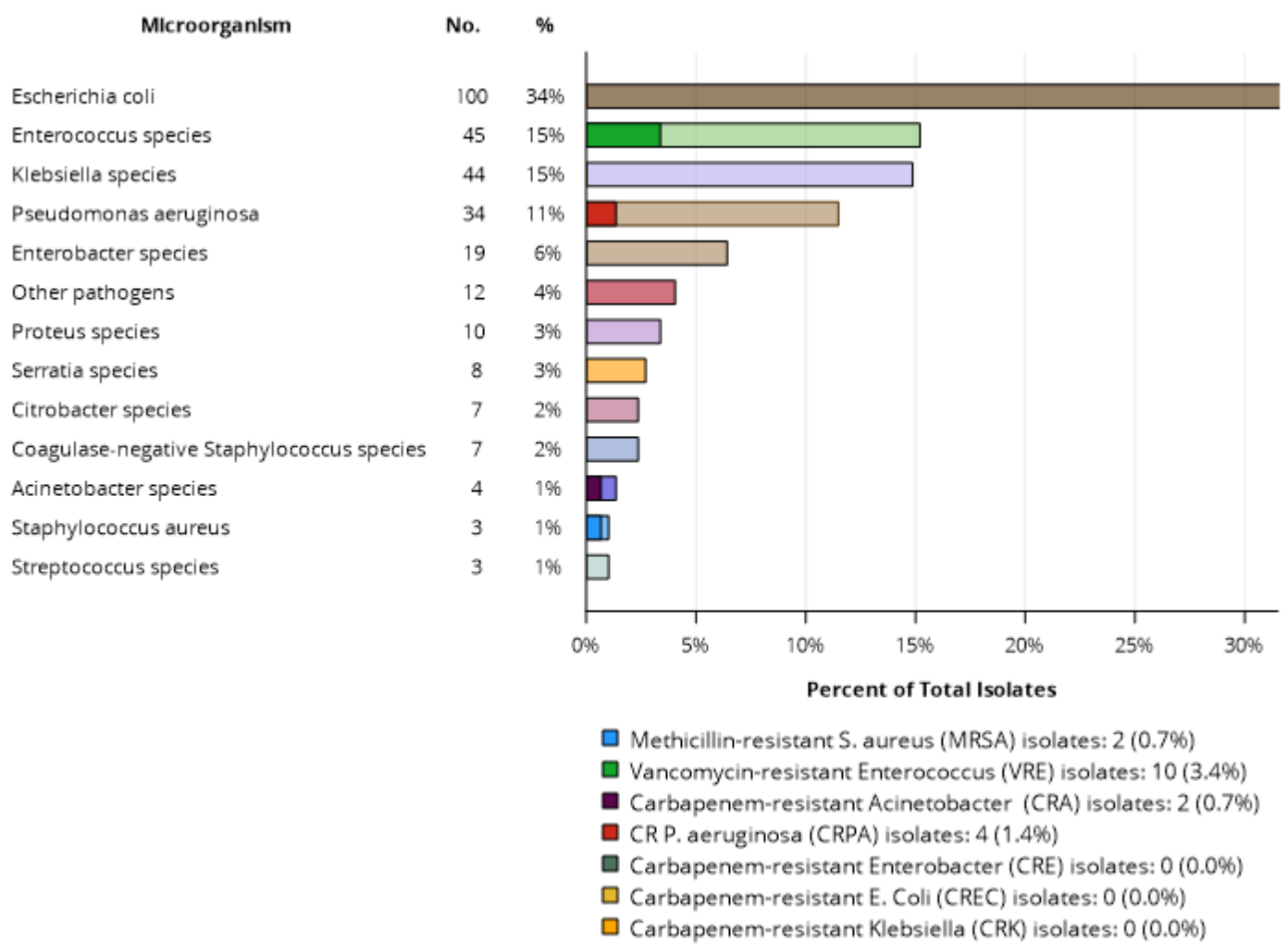


Data reported as of June 20, 2019

Other pathogens = Other *Staphylococcus* spp., *Providencia* spp., *Pseudomonas* spp., *Serratia* spp., *Yokenella* spp.

**Table 26: Microorganisms Identified in Catheter-Associated Urinary Tract (CAUTIs) in Adult and Pediatric Intensive Care Units, Tennessee, 01/01/2018 - 12/31/2018**

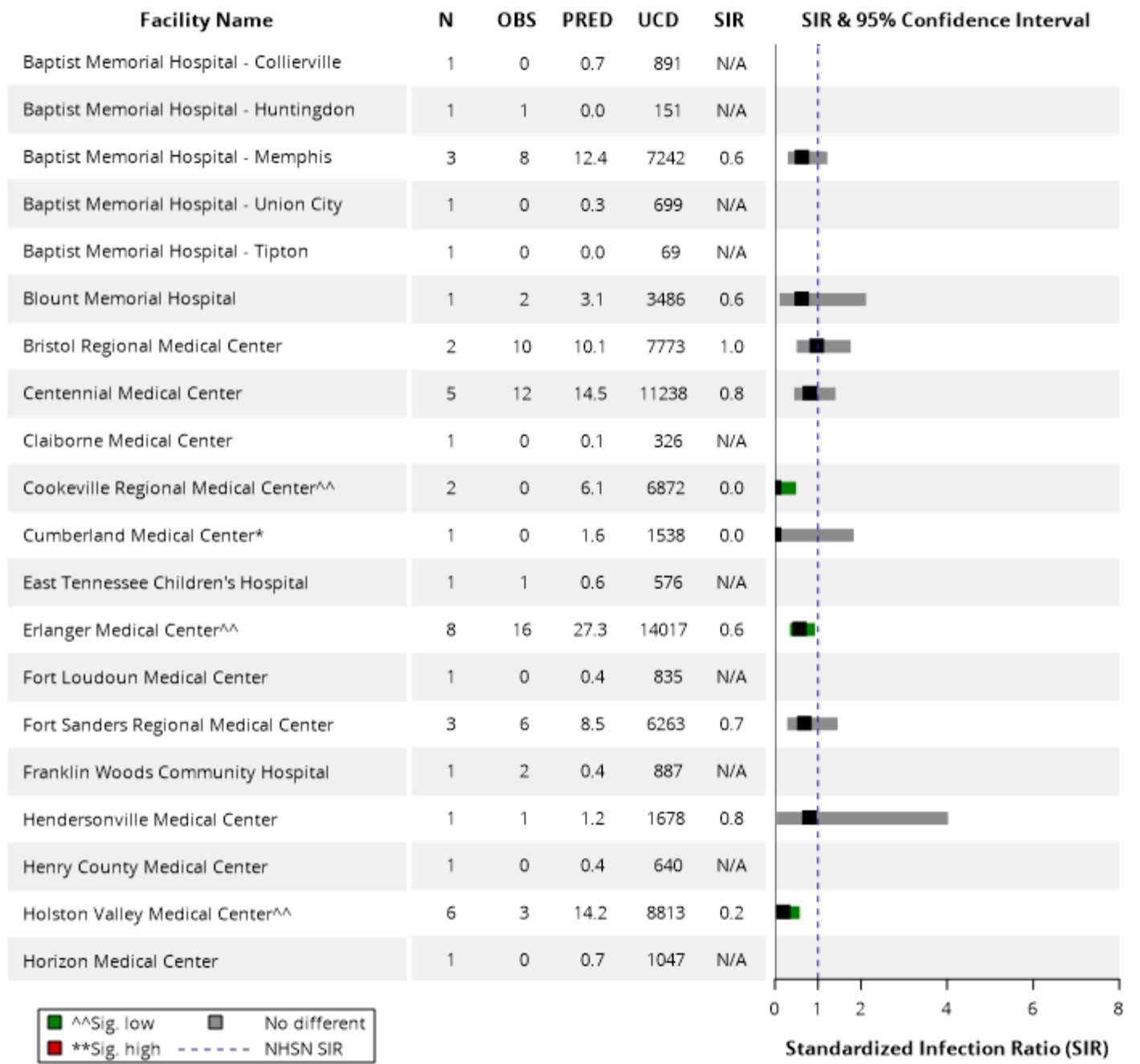
**Number of isolates=296; Number of events=261**



Data reported as of June 20, 2019

Other pathogens = Achromobacter spp., Diphtheroids spp., Escherichia spp., Hafnia spp., Lactobacillus spp., Morganella spp., Other Staphylococcus spp., Providencia spp., Pseudomonas spp.

**Figure 29: CAUTI Standardized Infection Ratio (SIR) for Adult and Pediatric Intensive Care Units in Acute Care Hospitals, Tennessee, 01/01/2017 – 12/31/2017**



Data Reported as of June 20, 2019

N = number of types of units reporting

OBS = observed number of CAUTI

PRED = statistically 'predicted' number of CAUTI, based on NHSN baseline data

SIR = standardized infection ratio (observed/predicted number of CAUTI)

UCD = number of urinary catheter days

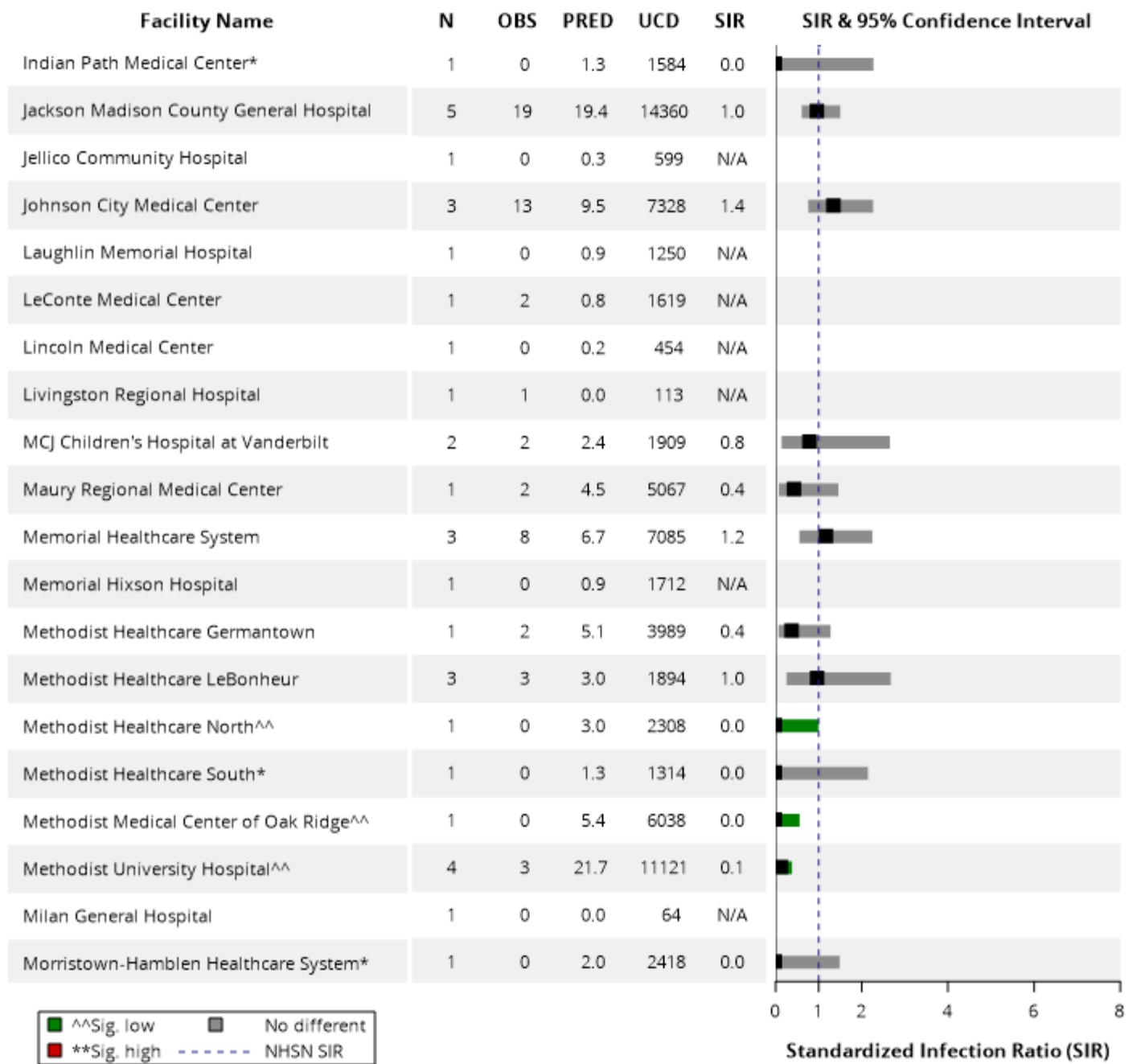
N/A = Data not shown for facilities with <50 urinary catheter days / SIR not calculated for facilities with <1 predicted infection

\*\* Significantly higher than national baseline

^^ Significantly lower than national baseline

\* Zero infections, but not statistically significant

Figure 29 (cont'd)



Data Reported as of June 20, 2019

N = number of types of units reporting

OBS = observed number of CAUTI

PRED = statistically 'predicted' number of CAUTI, based on NHSN baseline data

SIR = standardized infection ratio (observed/predicted number of CAUTI)

UCD = number of urinary catheter days

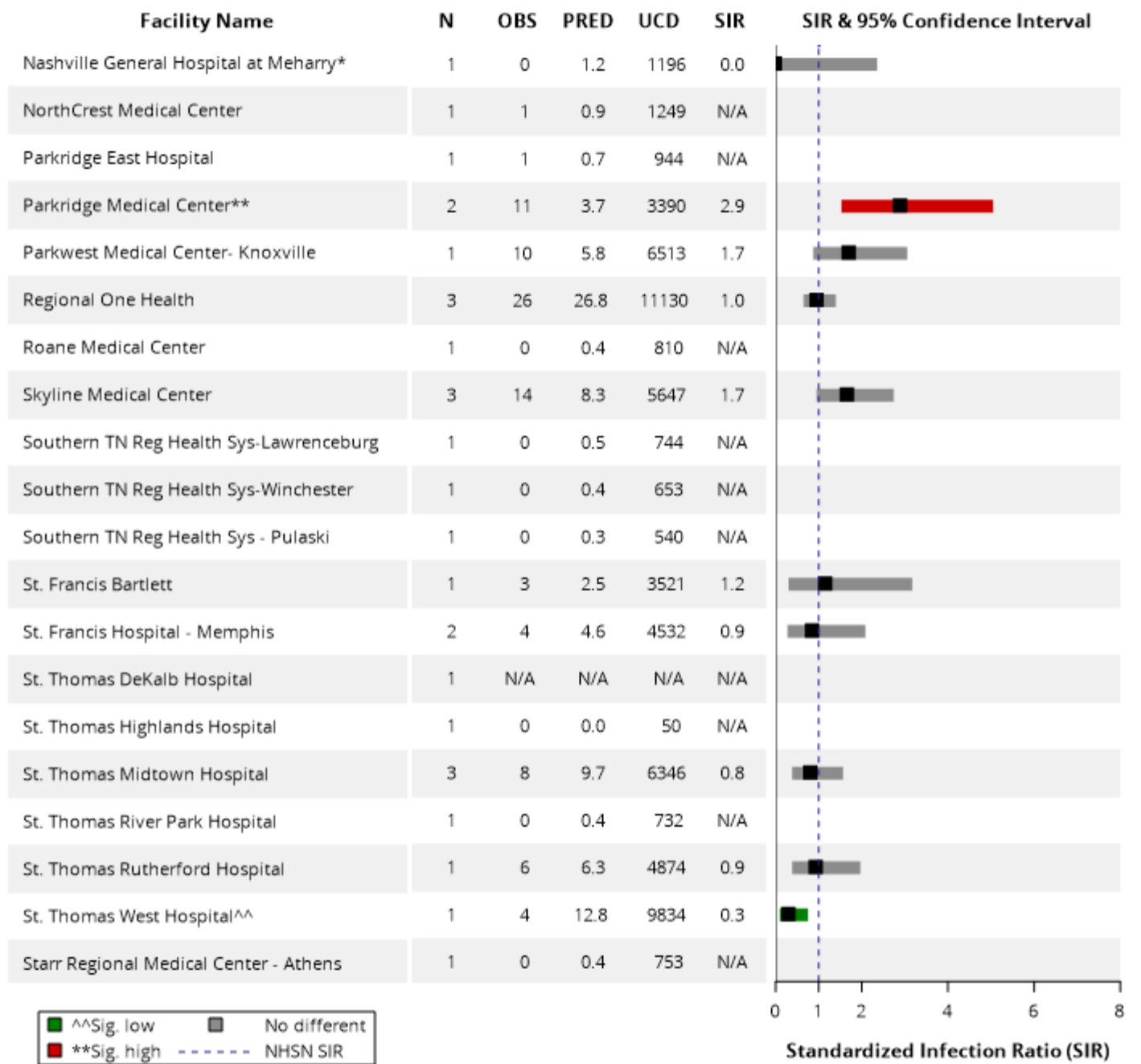
N/A = Data not shown for facilities with <50 urinary catheter days / SIR not calculated for facilities with <1 predicted infection

\*\* Significantly higher than national baseline

^^ Significantly lower than national baseline

\* Zero infections, but not statistically significant

Figure 29 (cont'd)



Data Reported as of June 20, 2019

N = number of types of units reporting

OBS = observed number of CAUTI

PRED = statistically 'predicted' number of CAUTI, based on NHSN baseline data

SIR = standardized infection ratio (observed/predicted number of CAUTI)

UCD = number of urinary catheter days

N/A = Data not shown for facilities with <50 urinary catheter days / SIR not calculated for facilities with <1 predicted infection

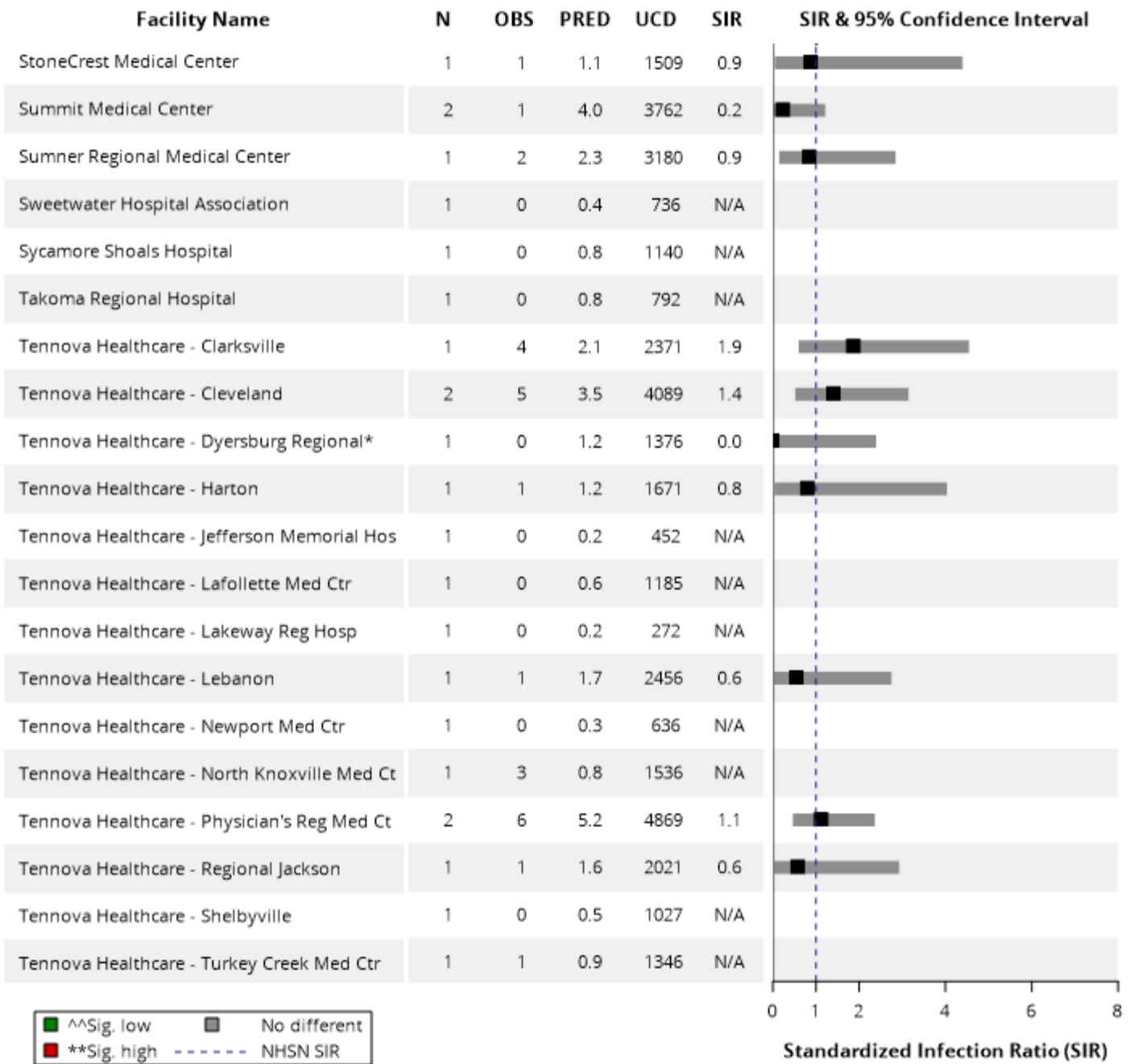
\*\* Significantly higher than national baseline

^^ Significantly lower than national baseline

\* Zero infections, but not statistically significant



Figure 29 (cont'd)



Data Reported as of June 20, 2019

N = number of types of units reporting

OBS = observed number of CAUTI

PRED = statistically 'predicted' number of CAUTI, based on NHSN baseline data

SIR = standardized infection ratio (observed/predicted number of CAUTI)

UCD = number of urinary catheter days

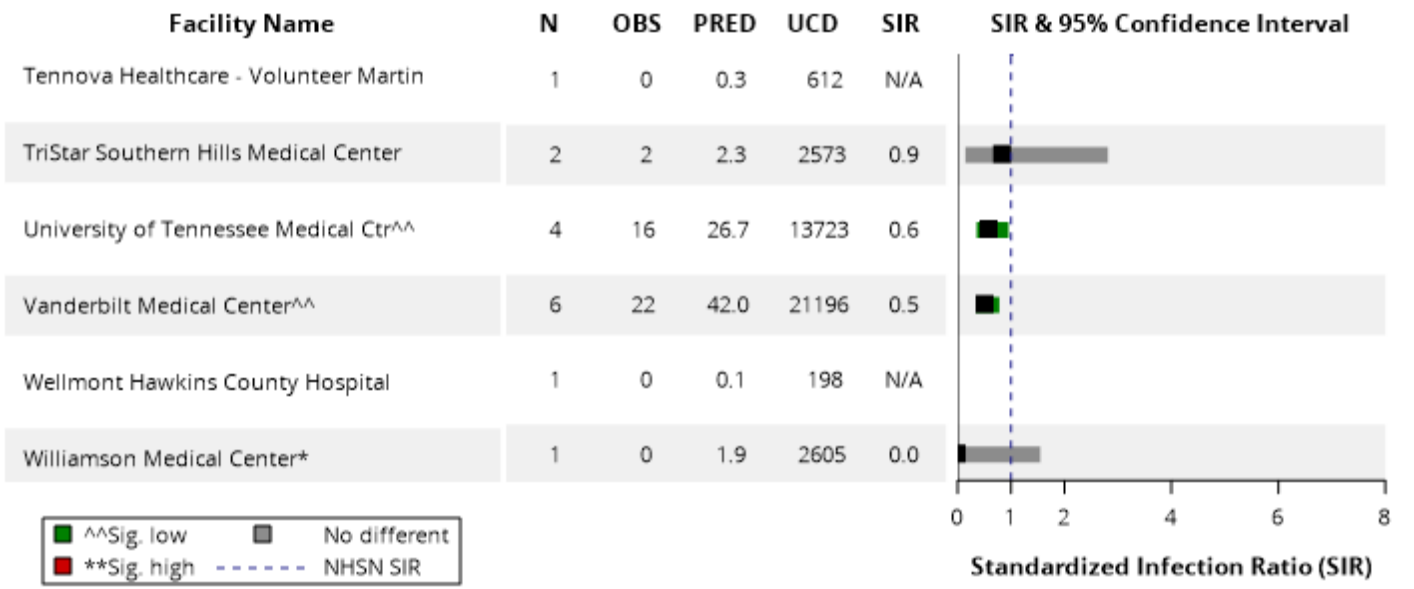
N/A = Data not shown for facilities with <50 urinary catheter days / SIR not calculated for facilities with <1 predicted infection

\*\* Significantly higher than national baseline

^^ Significantly lower than national baseline

\* Zero infections, but not statistically significant

**Figure 29 (cont'd)**



Data Reported as of June 20, 2019

N = number of types of units reporting

OBS = observed number of CAUTI

PRED = statistically 'predicted' number of CAUTI, based on NHSN baseline data

SIR = standardized infection ratio (observed/predicted number of CAUTI)

UCD = number of urinary catheter days

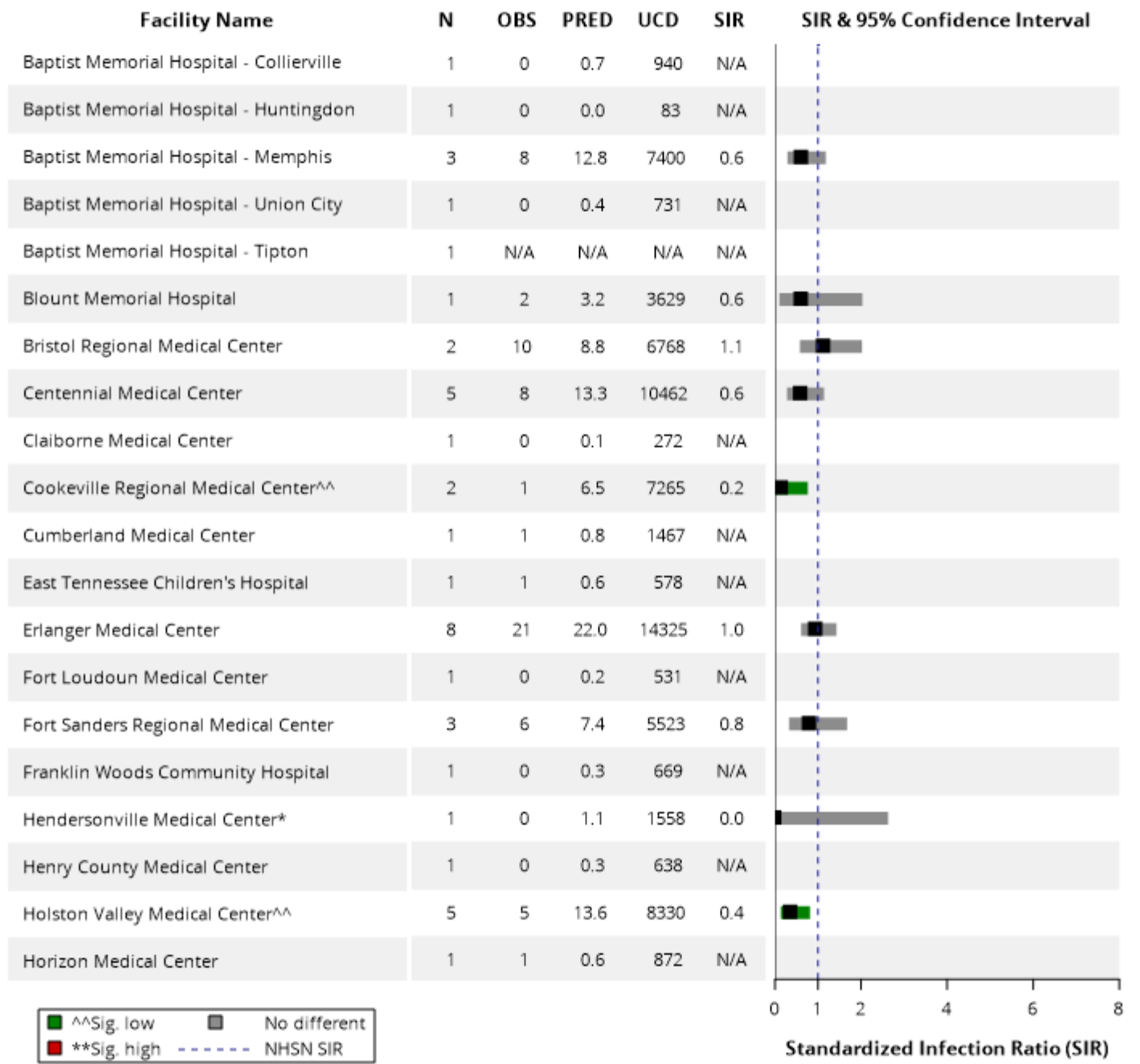
N/A = Data not shown for facilities with <50 urinary catheter days / SIR not calculated for facilities with <1 predicted infection

\*\* Significantly higher than national baseline

^^ Significantly lower than national baseline

\* Zero infections, but not statistically significant

**Figure 30: CAUTI Standardized Infection Ratio (SIR) for Adult and Pediatric Intensive Care Units in Acute Care Hospitals, Tennessee, 01/01/2018 – 12/31/2018**



Data Reported as of June 20, 2019

N = number of types of units reporting

OBS = observed number of CAUTI

PRED = statistically 'predicted' number of CAUTI, based on NHSN baseline data

SIR = standardized infection ratio (observed/predicted number of CAUTI)

UCD = number of urinary catheter days

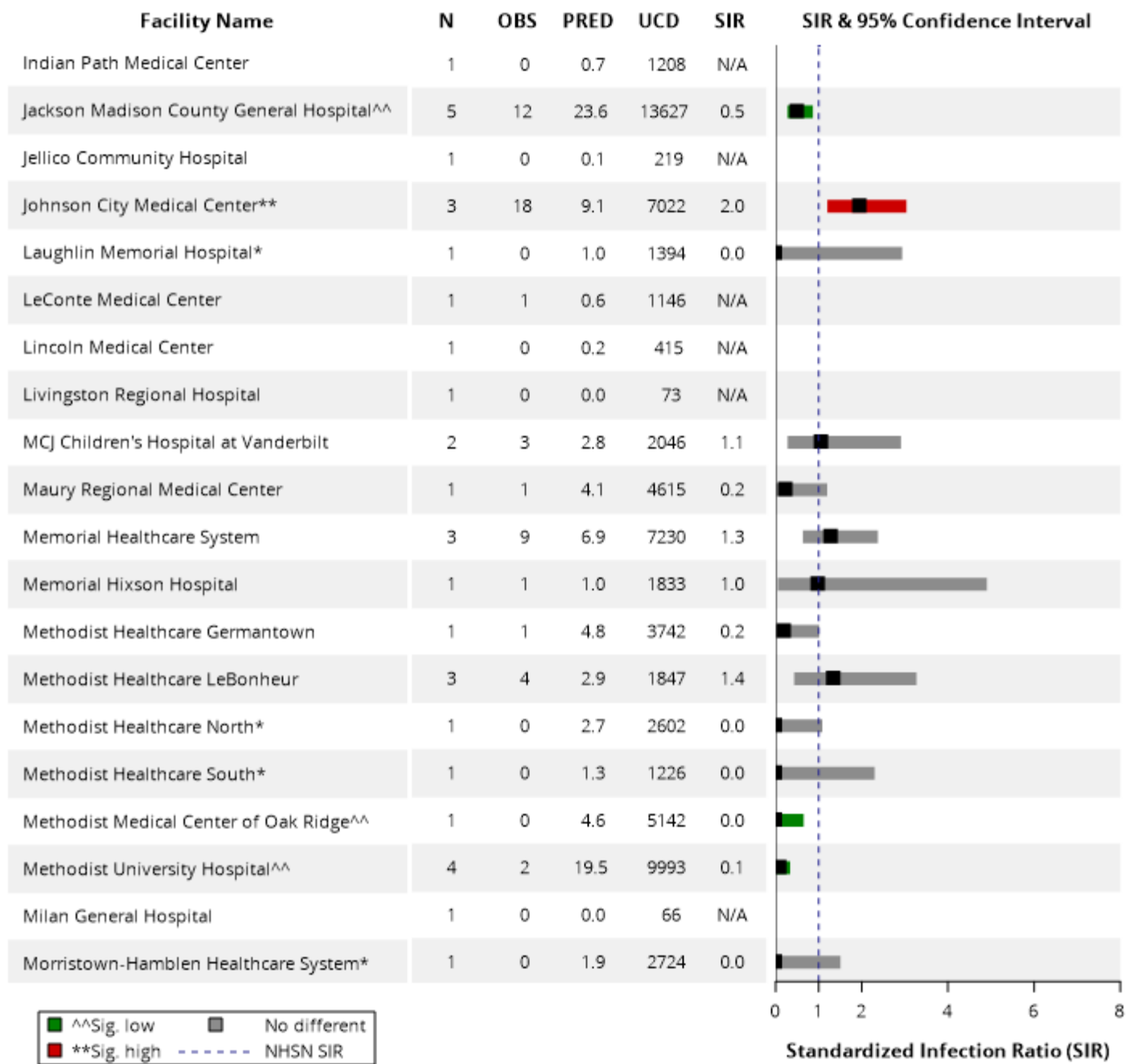
N/A = Data not shown for facilities with <50 urinary catheter days / SIR not calculated for facilities with <1 predicted infection

\*\* Significantly higher than national baseline

^^ Significantly lower than national baseline

\* Zero infections, but not statistically significant

Figure 30 (cont'd)



Data Reported as of June 20, 2019

N = number of types of units reporting

OBS = observed number of CAUTI

PRED = statistically 'predicted' number of CAUTI, based on NHSN baseline data

SIR = standardized infection ratio (observed/predicted number of CAUTI)

UCD = number of urinary catheter days

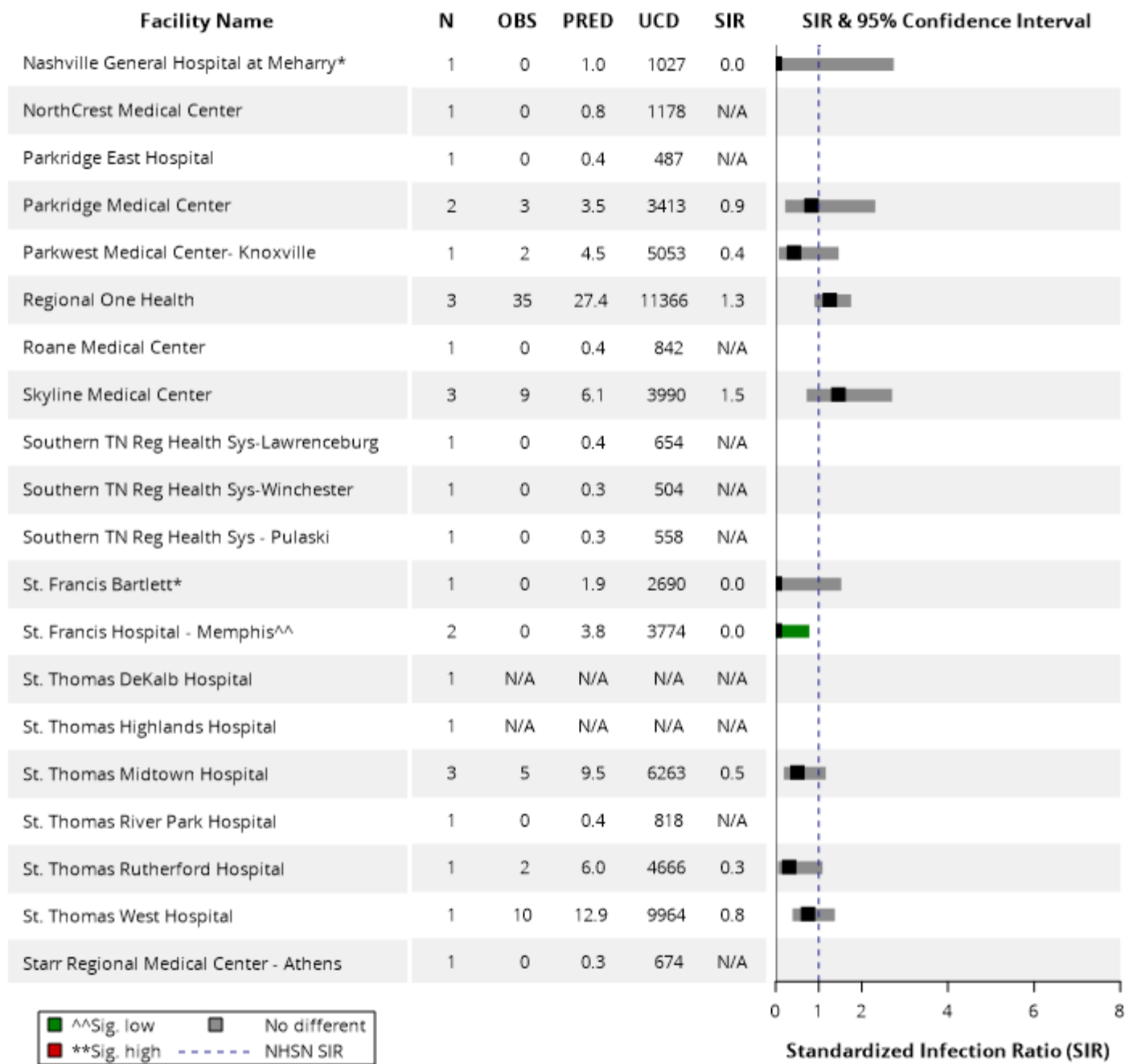
N/A = Data not shown for facilities with <50 urinary catheter days / SIR not calculated for facilities with <1 predicted infection

\*\* Significantly higher than national baseline

^^ Significantly lower than national baseline

\* Zero infections, but not statistically significant

Figure 30 (cont'd)



Data Reported as of June 20, 2019

N = number of types of units reporting

OBS = observed number of CAUTI

PRED = statistically 'predicted' number of CAUTI, based on NHSN baseline data

SIR = standardized infection ratio (observed/predicted number of CAUTI)

UCD = number of urinary catheter days

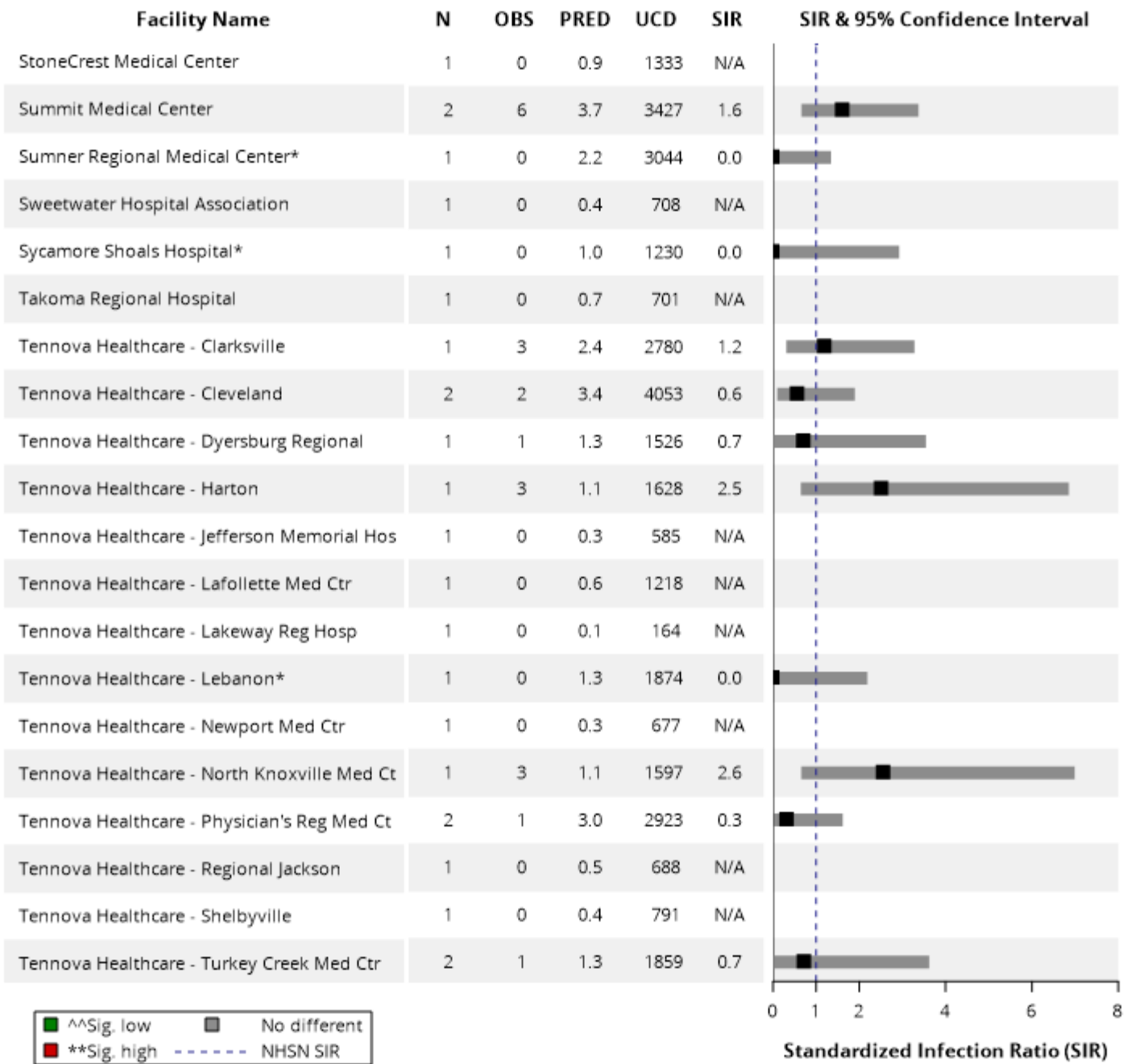
N/A = Data not shown for facilities with <50 urinary catheter days / SIR not calculated for facilities with <1 predicted infection

\*\* Significantly higher than national baseline

^^ Significantly lower than national baseline

\* Zero infections, but not statistically significant

Figure 30 (cont'd)



Data Reported as of June 20, 2019

N = number of types of units reporting

OBS = observed number of CAUTI

PRED = statistically 'predicted' number of CAUTI, based on NHSN baseline data

SIR = standardized infection ratio (observed/predicted number of CAUTI)

UCD = number of urinary catheter days

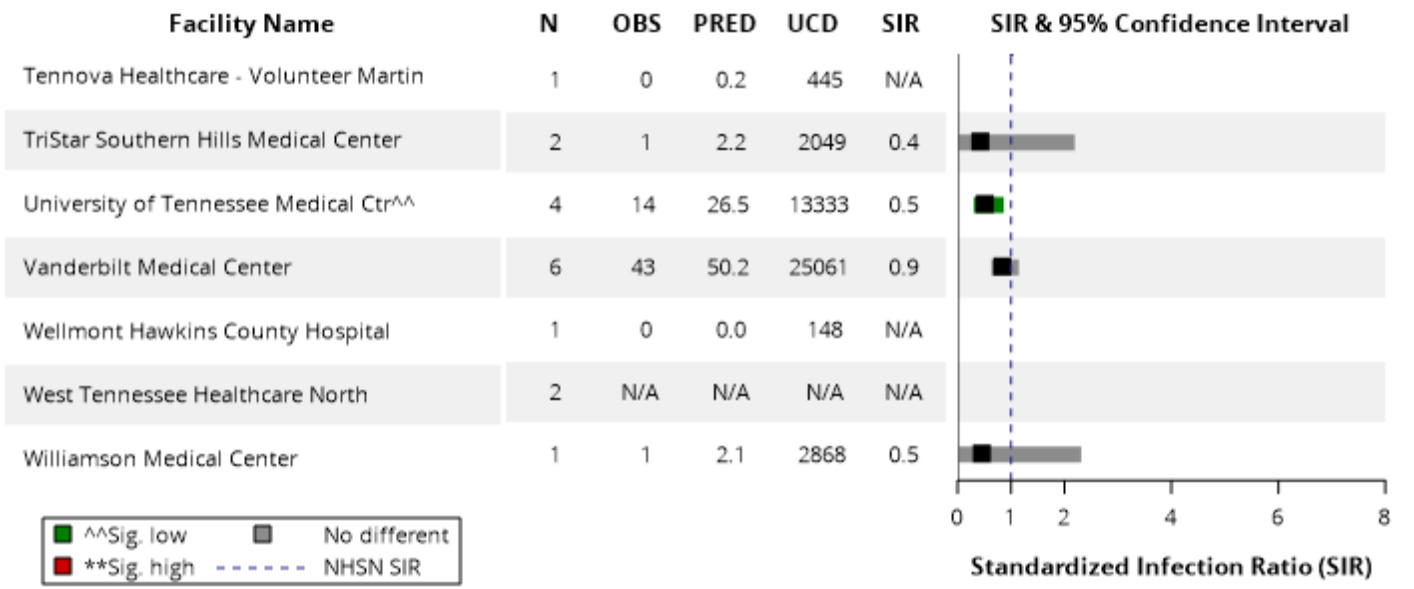
N/A = Data not shown for facilities with <50 urinary catheter days / SIR not calculated for facilities with <1 predicted infection

\*\* Significantly higher than national baseline

^^ Significantly lower than national baseline

\* Zero infections, but not statistically significant

**Figure 30 (cont'd)**



Data Reported as of June 20, 2019

N = number of types of units reporting

OBS = observed number of CAUTI

PRED = statistically 'predicted' number of CAUTI, based on NHSN baseline data

SIR = standardized infection ratio (observed/predicted number of CAUTI)

UCD = number of urinary catheter days

N/A = Data not shown for facilities with <50 urinary catheter days / SIR not calculated for facilities with <1 predicted infection

\*\* Significantly higher than national baseline

^^ Significantly lower than national baseline

\* Zero infections, but not statistically significant

# CAUTI

*Adult and Pediatric Medical, Surgical, and Medical/Surgical Wards*



## CAUTIs in Adult/Pediatric Medical, Surgical, and Medical/Surgical Wards

**Total number of hospitals reporting from January-December 2017: 103**

**Total number of hospitals reporting from January-December 2018: 104**

### **SIRs by Quarter (Figure 31, Figure 32)**

- From January-March 2017 to July-September 2017, the overall CAUTI SIR in Tennessee medical, surgical, and medical/surgical wards increased from 0.61 to 0.93 and then decreased to 0.72 from October-December. From January-March 2018 to October-December 2018, the overall CAUTI SIR in Tennessee medical, surgical, and medical/surgical wards fluctuated from 0.68 to 0.63. The U.S. Department of Health and Human Services' [National Action Plan to Prevent Healthcare-Associated Infections](#)<sup>17</sup> gives a five-year (2020) prevention target of SIR = 0.75.

### **SIR by Unit Type (Figure 33)**

- In 2017 and 2018, Tennessee CAUTI SIRs were significantly lower than the 2015 baseline SIR in adult medical and medical/surgical ward locations. Additionally in 2018, the SIR from adult surgical ward locations was significantly lower than the national baseline.

### **Key Percentiles for Tennessee SIRs (Table 27, Table 28)**

- The overall CAUTI SIR across all reporting adult and pediatric medical, surgical, and medical/surgical wards in Tennessee from January-December 2017 was statistically significantly lower than the national SIR of 1 (SIR=0.72; 95% CI: 0.62, 0.83). This SIR indicates that the number of CAUTIs in adult and pediatric medical, surgical, and medical/surgical wards was 28% lower than predicted, compared to national 2015 NHSN data. The 2018 CAUTI SIR was statistically significantly lower than the national SIR of 1 (SIR=0.73; 95% CI: 0.62, 0.85). This SIR indicates that the number of CAUTIs in adult and pediatric medical, surgical, and medical/surgical wards was 26% lower than predicted, compared to national 2015 NHSN data.
- In 2017, the median (50<sup>th</sup> percentile) facility-specific SIR was 0.64, indicating that half of all reporting Tennessee hospitals with at least 1 predicted infection had a SIR at or below 0.65. In 2018, the median (50<sup>th</sup> percentile) facility-specific SIR was 0.60.

<sup>17</sup> <http://www.hhs.gov/ash/initiatives/hai/actionplan/>

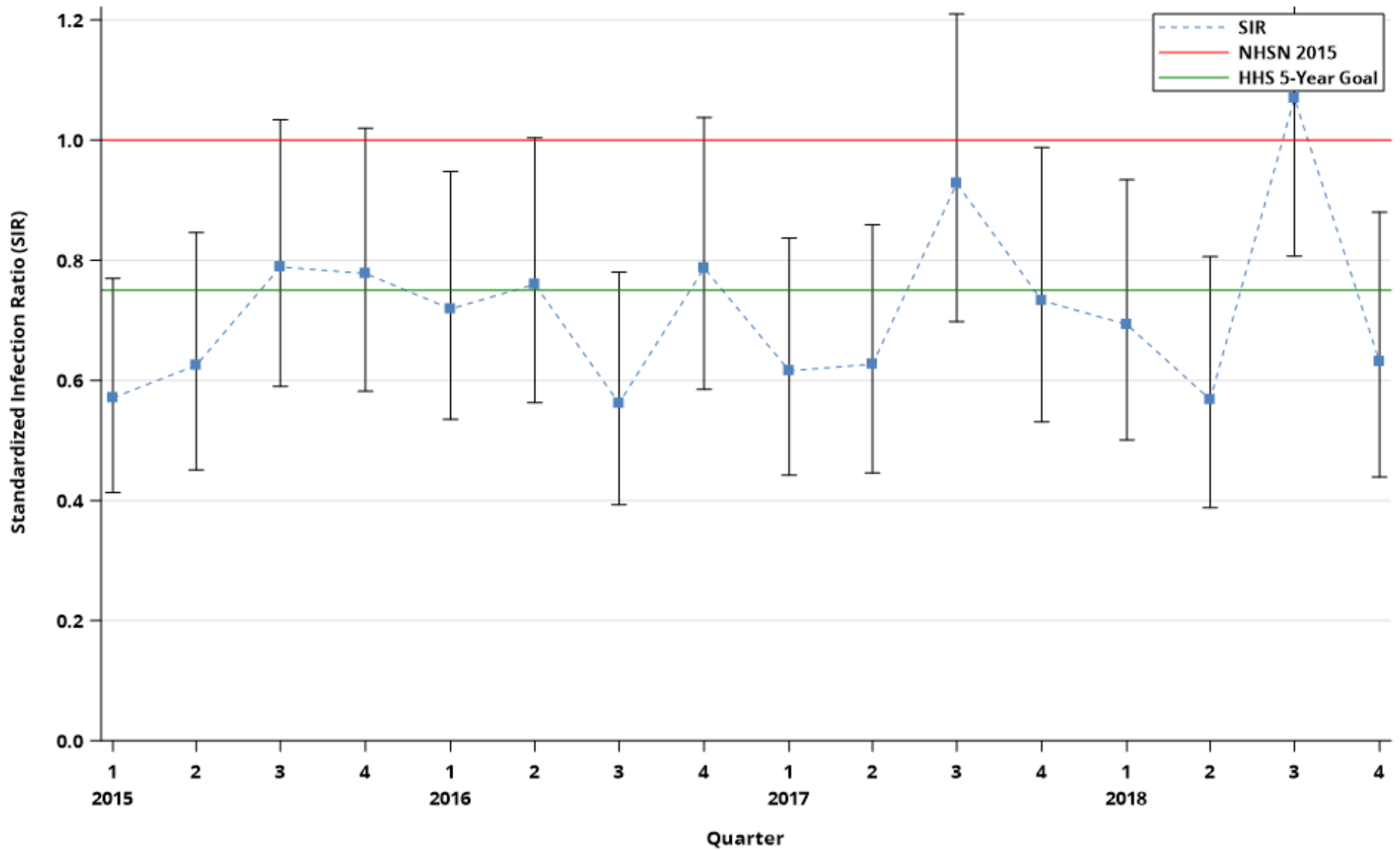
**Microorganisms Associated with CAUTIs in Adult and Pediatric Medical, Surgical, and Medical/Surgical Wards ([Table 29](#), [Table 30](#))**

- Among the 193 pathogens isolated from 167 CAUTIs in 2017, the most common pathogens were *Escherichia coli* (36%), *Klebsiella* species (16%) and *Pseudomonas aeruginosa* (15%). Vancomycin-resistant *Enterococcus* (VRE) accounted for 2%, methicillin-resistant *S. aureus* (MRSA) for 2% and Carbapenem-resistant Acinetobacter accounted for 2% of total positive isolates.
- Among the 169 pathogens isolated from 154 CAUTIs in 2018, the most common pathogens were *Escherichia coli* (31%), *Klebsiella* species (18%), *Enterococcus* species (15%) and *Pseudomonas aeruginosa* (14%). Vancomycin-resistant *Enterococcus* (VRE) accounted for 3%, methicillin-resistant *S. aureus* (MRSA) for 1% and Carbapenem-resistant *Pseudomonas aeruginosa* accounted for 1% of total positive isolates.

**Facility-Specific SIRs ([Figure 34](#), [Figure 35](#))**

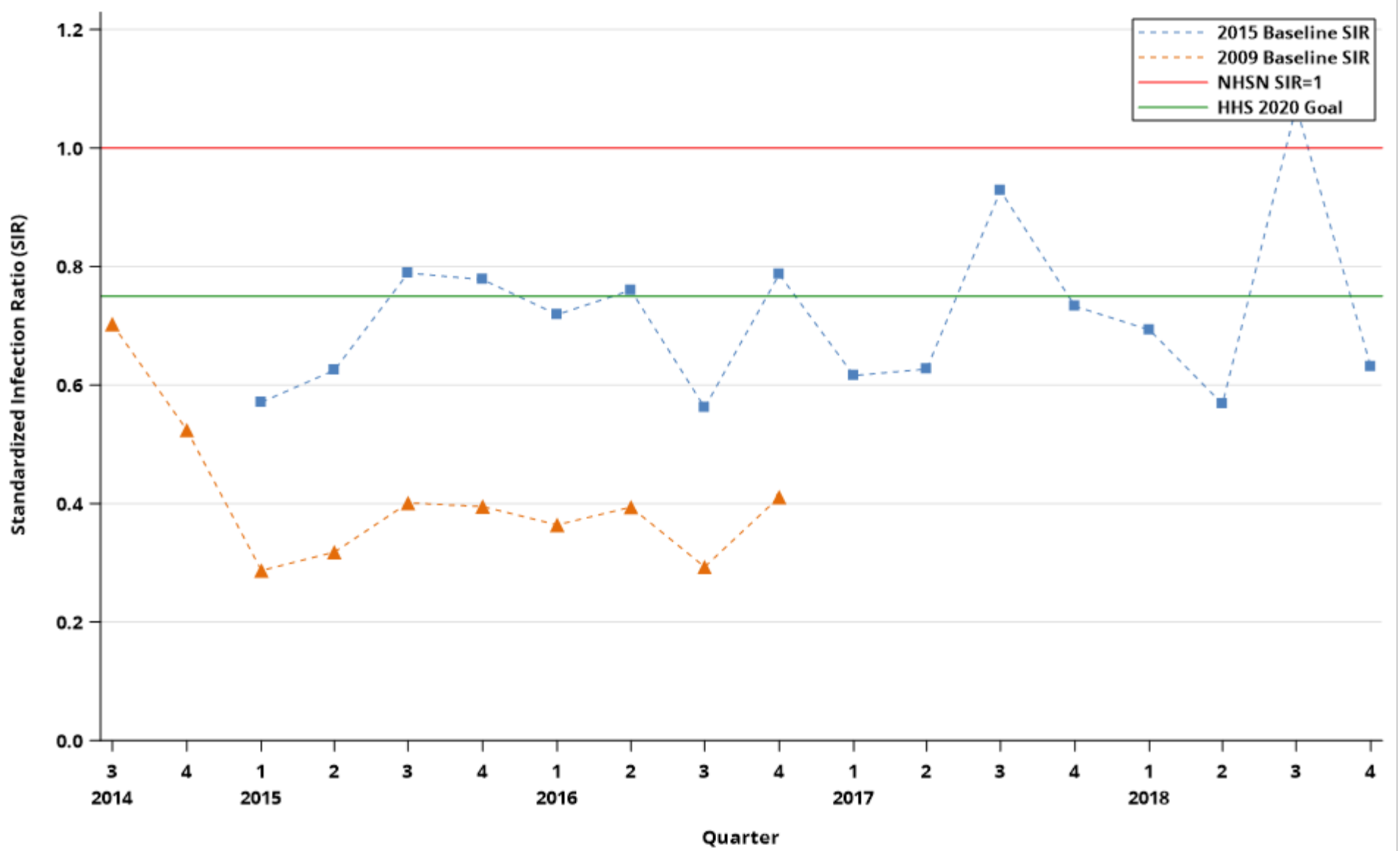
- One CAUTI SIR that accounts for all reporting adult and pediatric medical, surgical, and medical/surgical ward locations in each facility is displayed in [Figure 34](#) and [Figure 35](#). The bar representing the confidence interval is green if the CAUTI SIR was significantly lower than the national SIR of 1 for 2015 and red if the CAUTI SIR was significantly higher than 1. Some hospitals reported zero CAUTIs (indicated with an asterisk), although the facility's SIR may not be statistically significant due to a relatively small number of urinary catheter-days.
- In 2017, one Tennessee facility had a CAUTI SIR statistically significantly higher than the 2015 national baseline SIR of 1 and 6 facilities had a CAUTI SIR statistically significantly lower than the baseline SIR. In 2018, 5 facilities had a CAUTI SIR statistically significantly lower than the baseline SIR.

**Figure 31: Standardized Infection Ratios (SIR) for Catheter-Associated Urinary Tract Infections (CAUTIs) for Adult and Pediatric Medical, Surgical, and Medical/Surgical Wards by Quarter, Tennessee, 01/01/2015–12/31/2018 [Reference standard: National Healthcare Safety Network (NHSN), 2015]**



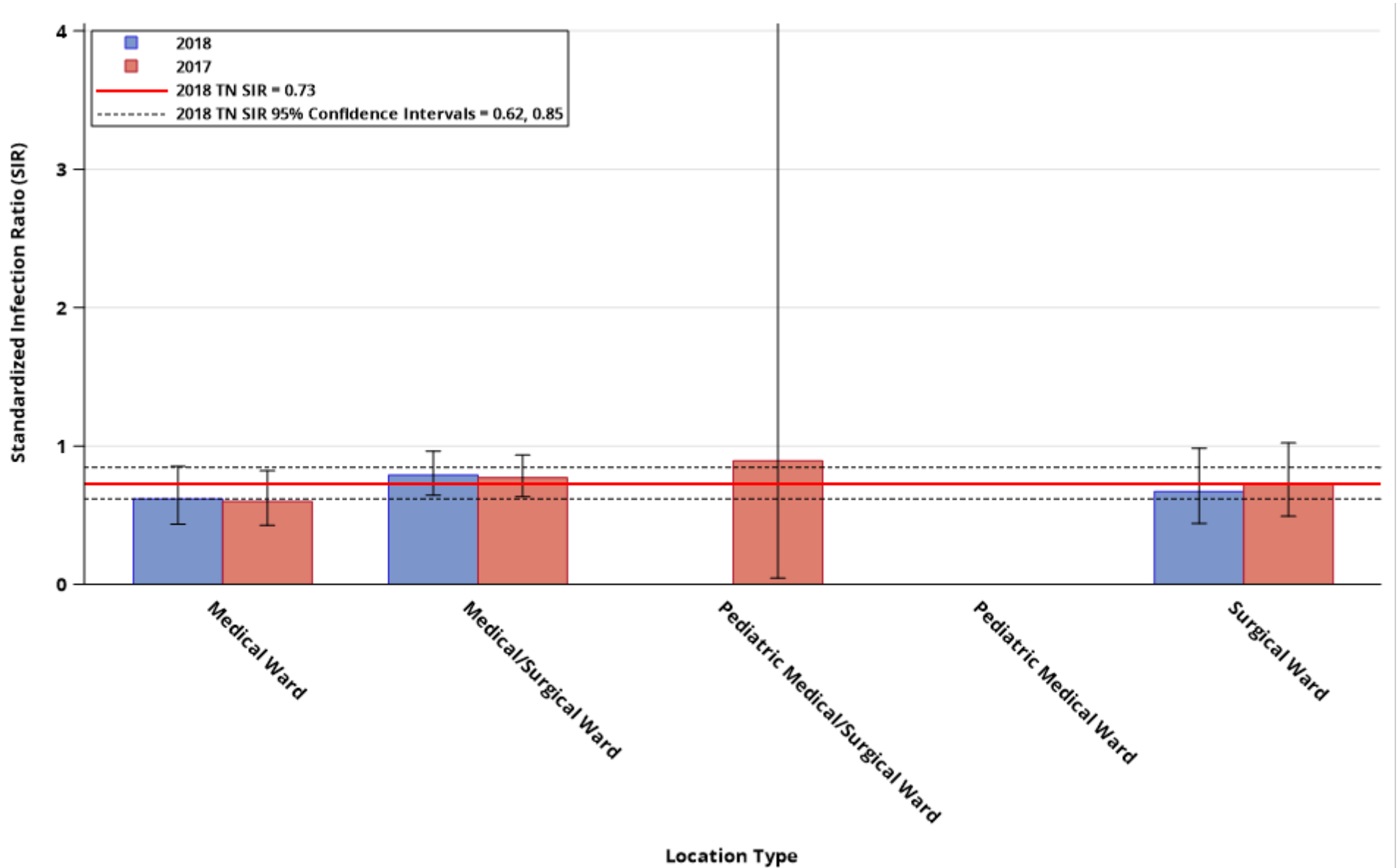
Data Reported as of June 20, 2019

Figure 32: Standardized Infection Ratios (SIR) for Catheter-Associated Urinary Tract Infections (CAUTIs) for Adult and Pediatric Medical, Surgical, and Medical/Surgical Wards by Quarter, Tennessee, 07/01/2014–12/31/2018



Data Reported as of June 20, 2019

Figure 33: Standardized Infection Ratios (SIRs) for Catheter-Associated Urinary Tract Infections (CAUTIs) by Ward Location Type, Tennessee, 2017 and 2018 [Reference standard: National Healthcare Safety Network (NHSN), 2015]



Data Reported as of August 27, 2019

**Table 27: Key Percentiles for Facility-Specific Catheter-Associated Urinary Tract Infection (CAUTI) Standardized Infection Ratios (SIRs) in Adult and Pediatric Medical, Surgical, and Medical/Surgical Wards by Reporting Year, Tennessee, 01/01/2017 - 12/31/2018**

									DISTRIBUTION OF FACILITY-SPECIFIC SIRs										
				No. of INFECTIONS		SIR AND 95% CONFIDENCE INTERVAL					No. of FACS WITH SIR SIG. <1.0		No. of FACS WITH SIR SIG. >1.0						
STATE	YEAR	No.	UC Days	OBS	PRED	SIR	LOWER LIMIT	UPPER LIMIT	No. of FACS WITH ≥1 PRED INFECTION	N	%	N	%	10%	25%	50%	75%	90%	
Tennessee	2018	104	237,335	154	212.46	0.73	0.62	0.85	40	5	13%	0	0%	0.00	0.18	0.60	1.19	1.76	
	2017	103	259,350	167	232.77	0.72	0.62	0.83	48	6	13%	1	2%	0.00	0.21	0.64	1.02	1.82	

Data reported as of June 20, 2019

No. = number of facilities; UC Days = urinary catheter days; OBS = observed number of CAUTI

PRED = statistically 'predicted' number of CAUTI; SIR = standardized infection ratio (observed/predicted number of CAUTI)

Key percentiles include facilities with at least one predicted infection

Red highlighting indicates SIR for reporting period is significantly higher than national SIR of 1.0

Green highlighting indicates SIR for reporting period is significantly lower than national SIR of 1.0

**Table 28: Key Percentiles for Unit-Specific Catheter-Associated Urinary Tract Infection (CAUTI) Standardized Infection Ratios (SIRs) by Type of Ward and Reporting Year, Tennessee, 01/01/2017 - 12/31/2018**

ICU TYPE				No. of INFECTIONS		SIR AND 95% CONFIDENCE INTERVAL			DISTRIBUTION OF FACILITY-SPECIFIC SIRs					
	YEAR	No.	UC Days	OBS	PRED	SIR	LOWER LIMIT	UPPER LIMIT	No. of FACS WITH ≥1 PRED INFECTION	10%	25%	50%	75%	90%
Medical Ward	2018	45	55,985	34	55.16	0.62	0.43	0.85	14	0.20	0.44	0.52	0.70	1.22
	2017	43	62,220	36	60.12	0.60	0.43	0.82	20	0.00	0.00	0.63	1.17	1.77
Medical/Surgical Ward	2018	88	140,344	95	120.22	0.79	0.64	0.96	30	0.00	0.00	0.69	1.11	2.14
	2017	88	150,515	101	130.86	0.77	0.63	0.93	36	0.00	0.00	0.66	1.34	1.77
Pediatric Medical Ward	2018	5	522	1	0.43	.	.	.	.	N/A	N/A	N/A	N/A	N/A
	2017	5	523	0	0.44	.	.	.	.	N/A	N/A	N/A	N/A	N/A
Pediatric Medical/Surgical Ward	2018	9	1,186	0	0.89	.	.	.	.	N/A	N/A	N/A	N/A	N/A
	2017	9	1,443	1	1.12	0.89	0.05	4.40	.	N/A	N/A	N/A	N/A	N/A
Surgical Ward	2018	26	39,298	24	35.76	0.67	0.44	0.98	10	0.00	0.00	0.35	1.11	1.40
	2017	26	44,649	29	40.23	0.72	0.49	1.02	11	0.00	0.30	0.60	0.80	0.86

Data reported as of August 27, 2019

No. = number of facilities; UC Days = urinary catheter days; OBS = observed number of CAUTI

PRED = statistically 'predicted' number of CAUTI; SIR = standardized infection ratio (observed/predicted number of CAUTI)

N/A = not reported if the number of facilities is <5

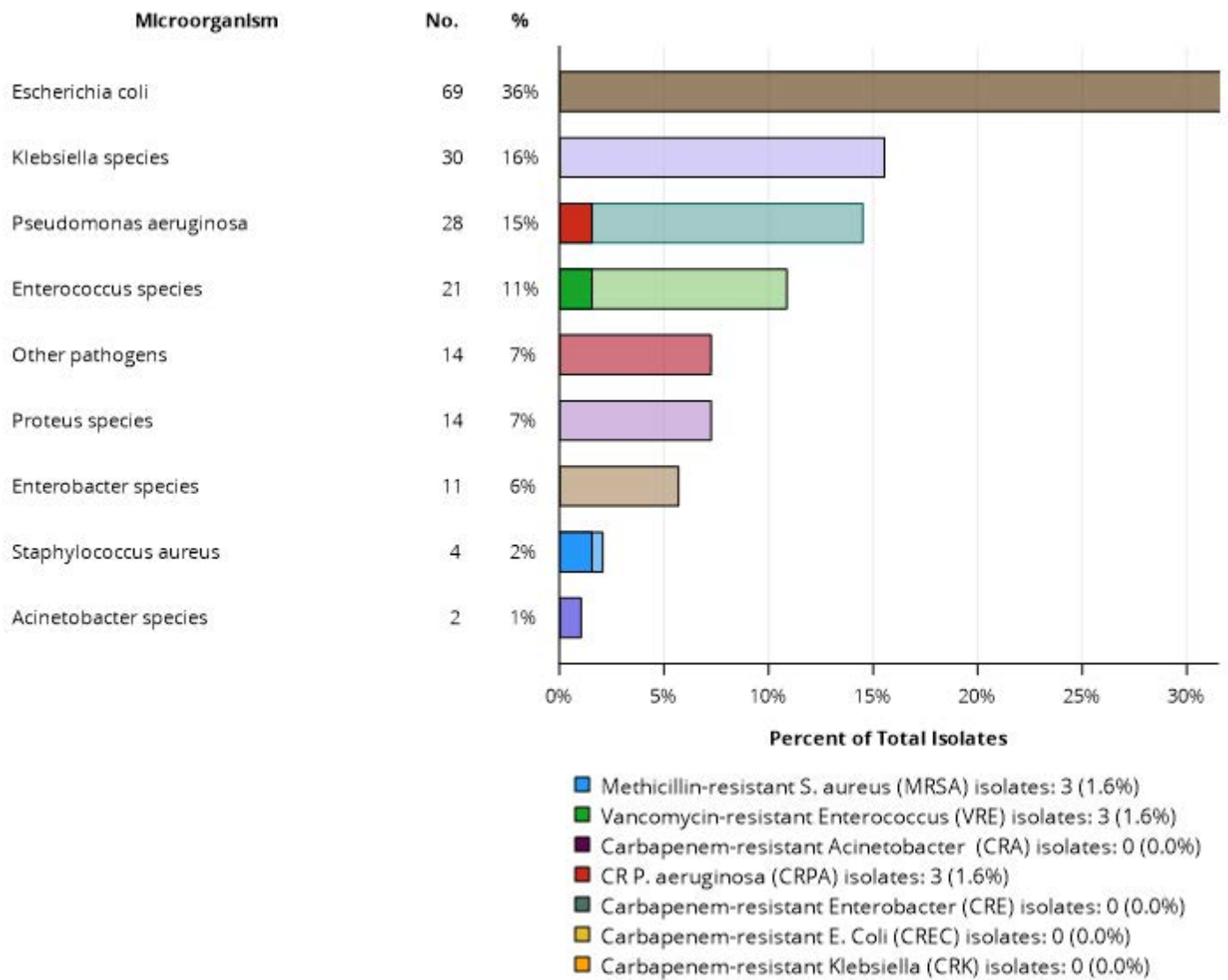
Key percentiles include units with at least one predicted infection

Red highlighting indicates SIR for reporting period is significantly higher than national 2015 SIR of 1.0

Green highlighting indicates SIR for reporting period is significantly lower than national 2015 SIR of 1.0

**Table 29: Microorganisms Identified in Catheter-Associated Urinary Tract (CAUTIs) in Adult and Pediatric Wards, Tennessee, 01/01/2017 - 12/31/2017**

**Number of isolates=193; Number of events=167**



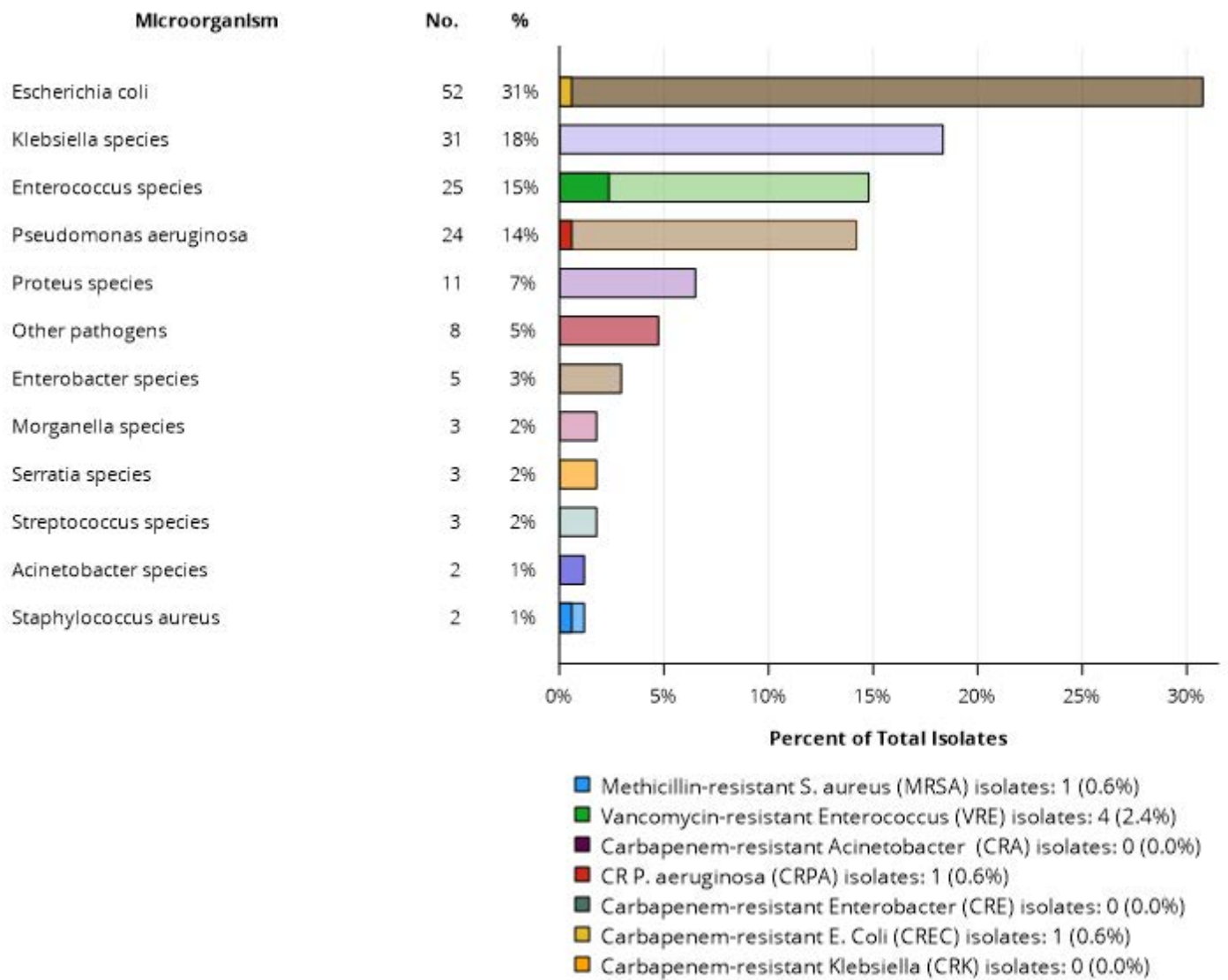
Data reported as of June 20, 2019

Other pathogens = Citrobacter spp., Coagulase-negative spp., Corynebacterium spp., Escherichia spp., Lactobacillus spp., Morganella spp., Providencia spp., Pseudomonas spp., Serratia spp., Streptococcus spp.



**Table 30: Microorganisms Identified in Catheter-Associated Urinary Tract (CAUTIs) in Adult and Pediatric Wards, Tennessee, 01/01/2018 - 12/31/2018**

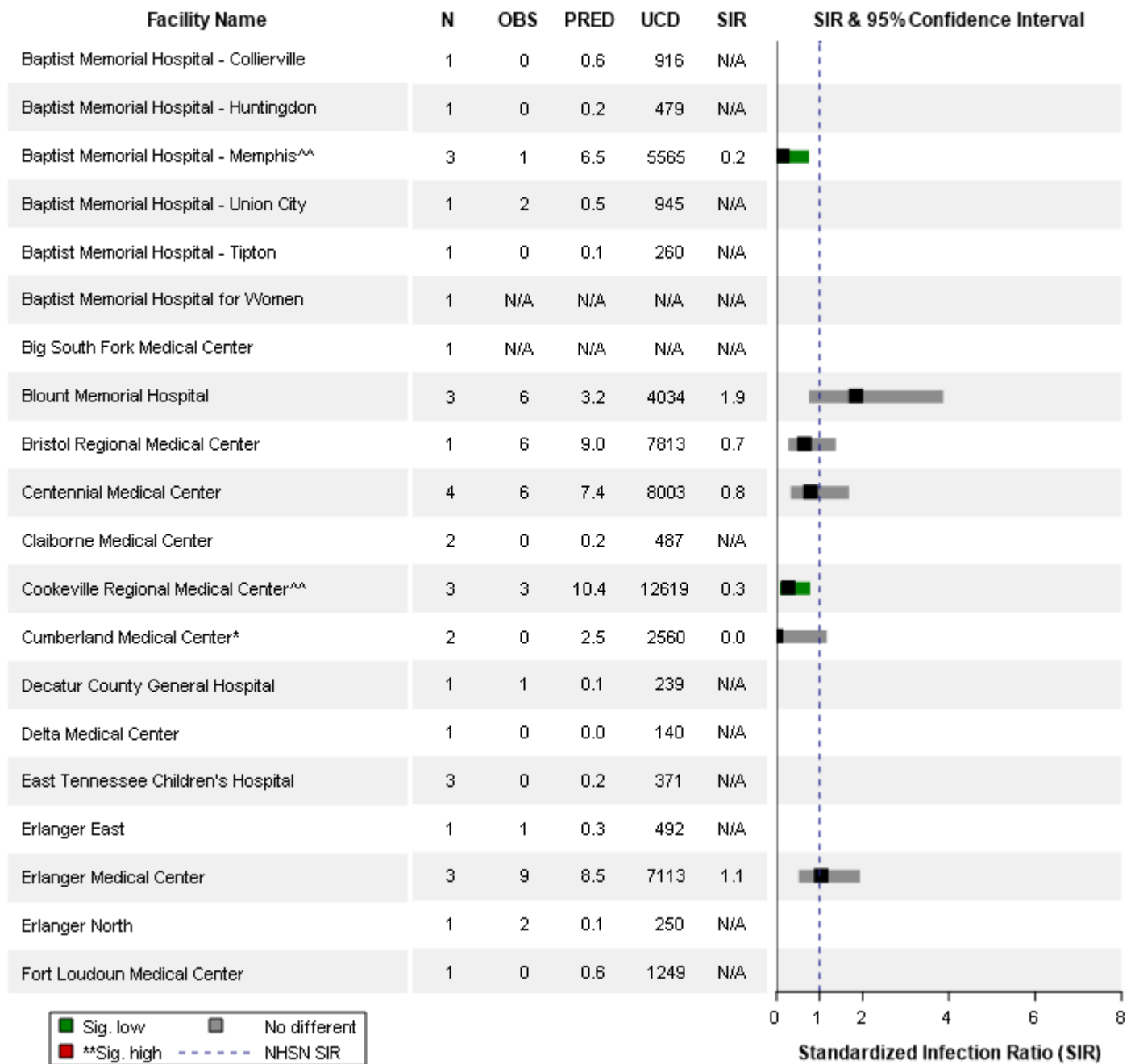
**Number of isolates=169; Number of events=154**



Data reported as of June 20, 2019

Other pathogens = *Aeromonas* spp., *Citrobacter* spp., *Coagulase-negative* spp., *Lactobacillus* spp., *Providencia* spp., *Pseudomonas* spp., *Stenotrophomonas* spp., *Streptococcus* spp.

**Figure 34: CAUTI Standardized Infection Ratio (SIR) for Adult and Pediatric Wards in Acute Care Hospitals, Tennessee, 01/01/2017 – 12/31/2017**



Data Reported as of August 27, 2019

N = number of types of units reporting

OBS = observed number of CAUTI

PRED = statistically 'predicted' number of CAUTI, based on NHSN baseline data

SIR = standardized infection ratio (observed/predicted number of CAUTI)

UCD = number of urinary catheter days

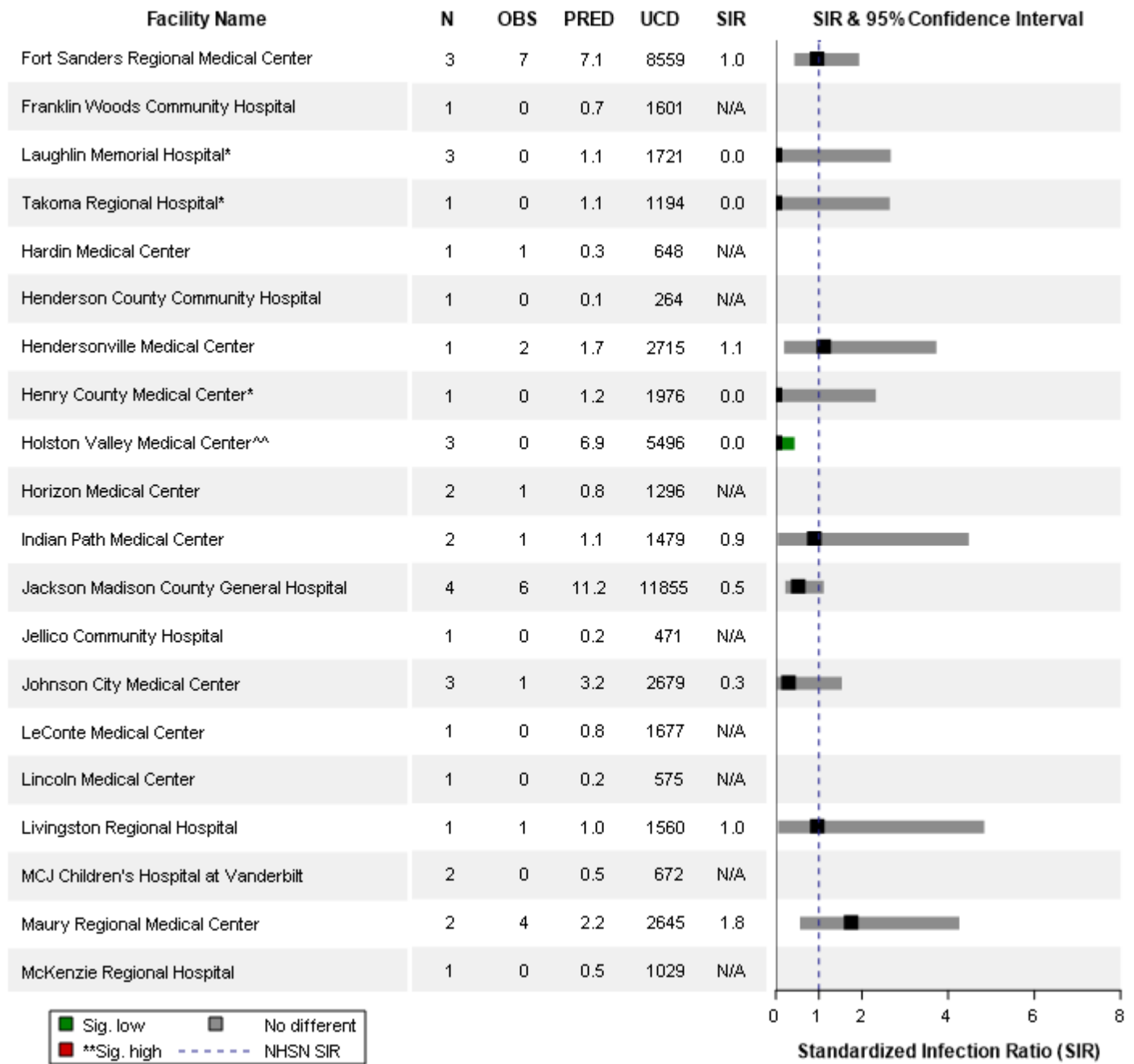
N/A = Data not shown for facilities with <50 urinary catheter days / SIR not calculated for facilities with ≤1.0 predicted infection

\*\* Significantly higher than national baseline

^^ Significantly lower than national baseline

\* Zero infections, but not statistically significant

Figure 34 (cont'd)



Data Reported as of August 27, 2019

N = number of types of units reporting

OBS = observed number of CAUTI

PRED = statistically 'predicted' number of CAUTI, based on NHSN baseline data

SIR = standardized infection ratio (observed/predicted number of CAUTI)

UCD = number of urinary catheter days

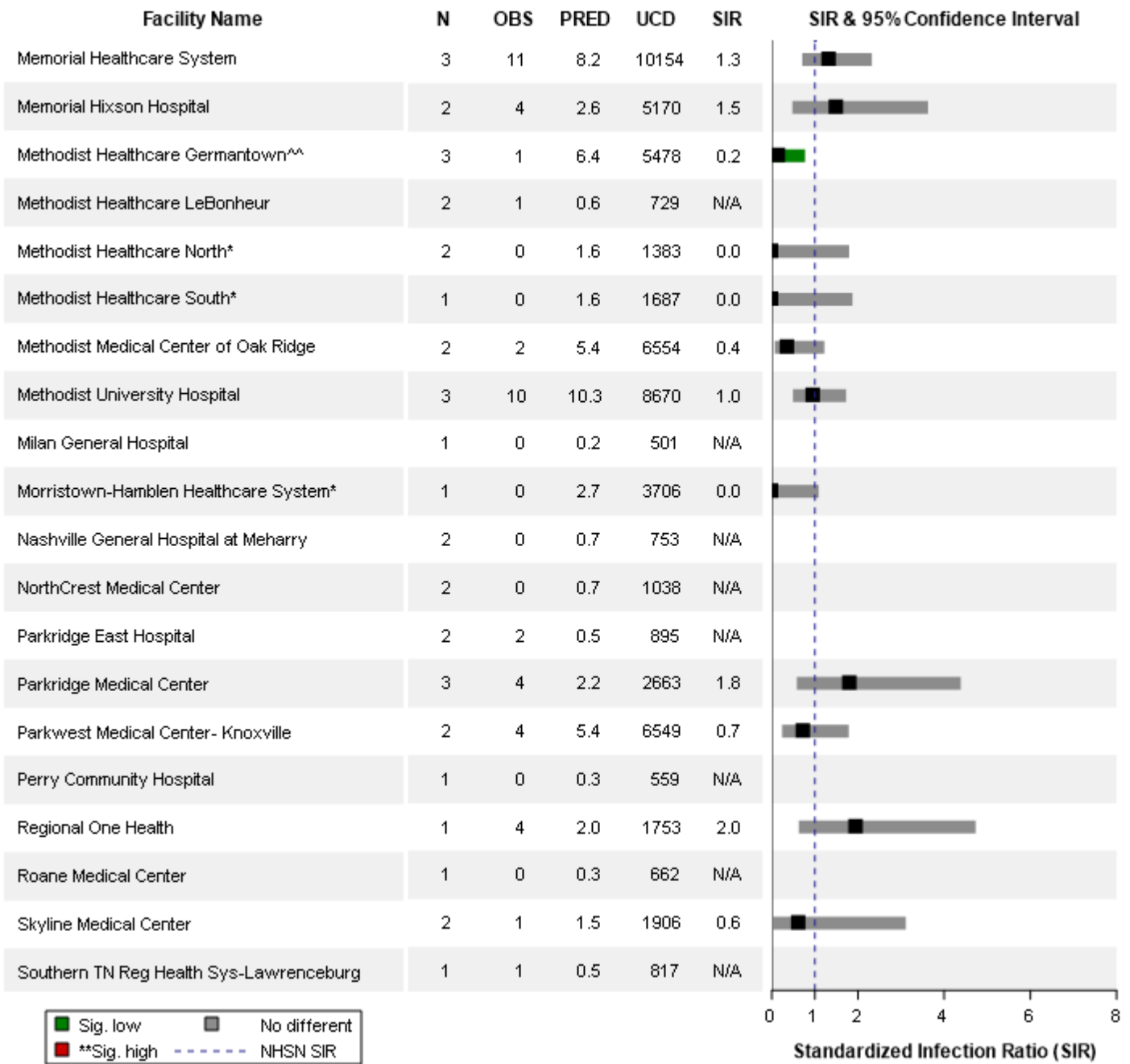
N/A = Data not shown for facilities with <50 urinary catheter days / SIR not calculated for facilities with  $\leq 1.0$  predicted infection

\*\* Significantly higher than national baseline

^^ Significantly lower than national baseline

\* Zero infections, but not statistically significant

Figure 34 (cont'd)



Data Reported as of August 27, 2019

N = number of types of units reporting

OBS = observed number of CAUTI

PRED = statistically 'predicted' number of CAUTI, based on NHSN baseline data

SIR = standardized infection ratio (observed/predicted number of CAUTI)

UCD = number of urinary catheter days

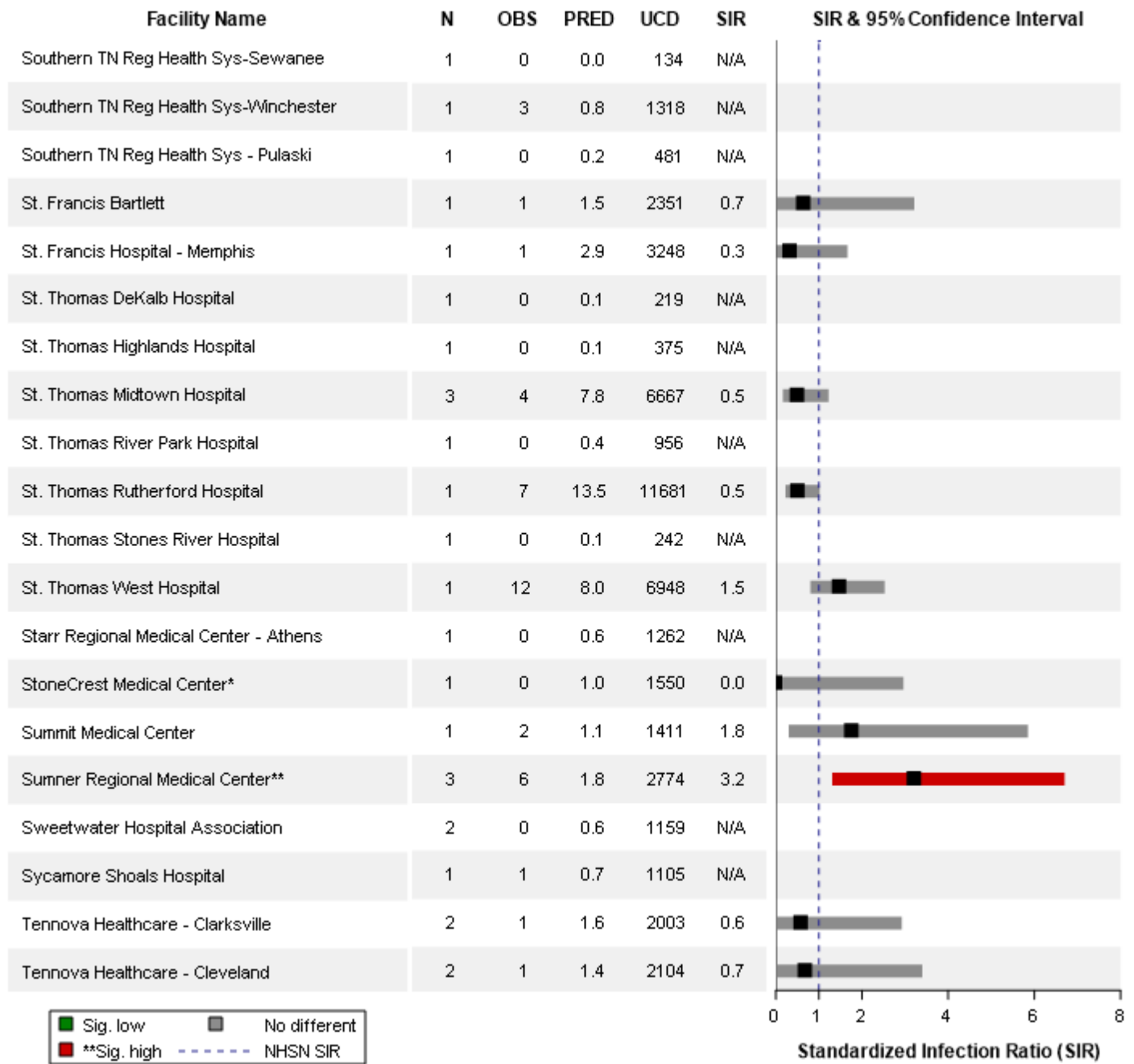
N/A = Data not shown for facilities with <50 urinary catheter days / SIR not calculated for facilities with  $\leq 1.0$  predicted infection

\*\* Significantly higher than national baseline

^^ Significantly lower than national baseline

\* Zero infections, but not statistically significant

Figure 34 (cont'd)



Data Reported as of August 27, 2019

N = number of types of units reporting

OBS = observed number of CAUTI

PRED = statistically 'predicted' number of CAUTI, based on NHSN baseline data

SIR = standardized infection ratio (observed/predicted number of CAUTI)

UCD = number of urinary catheter days

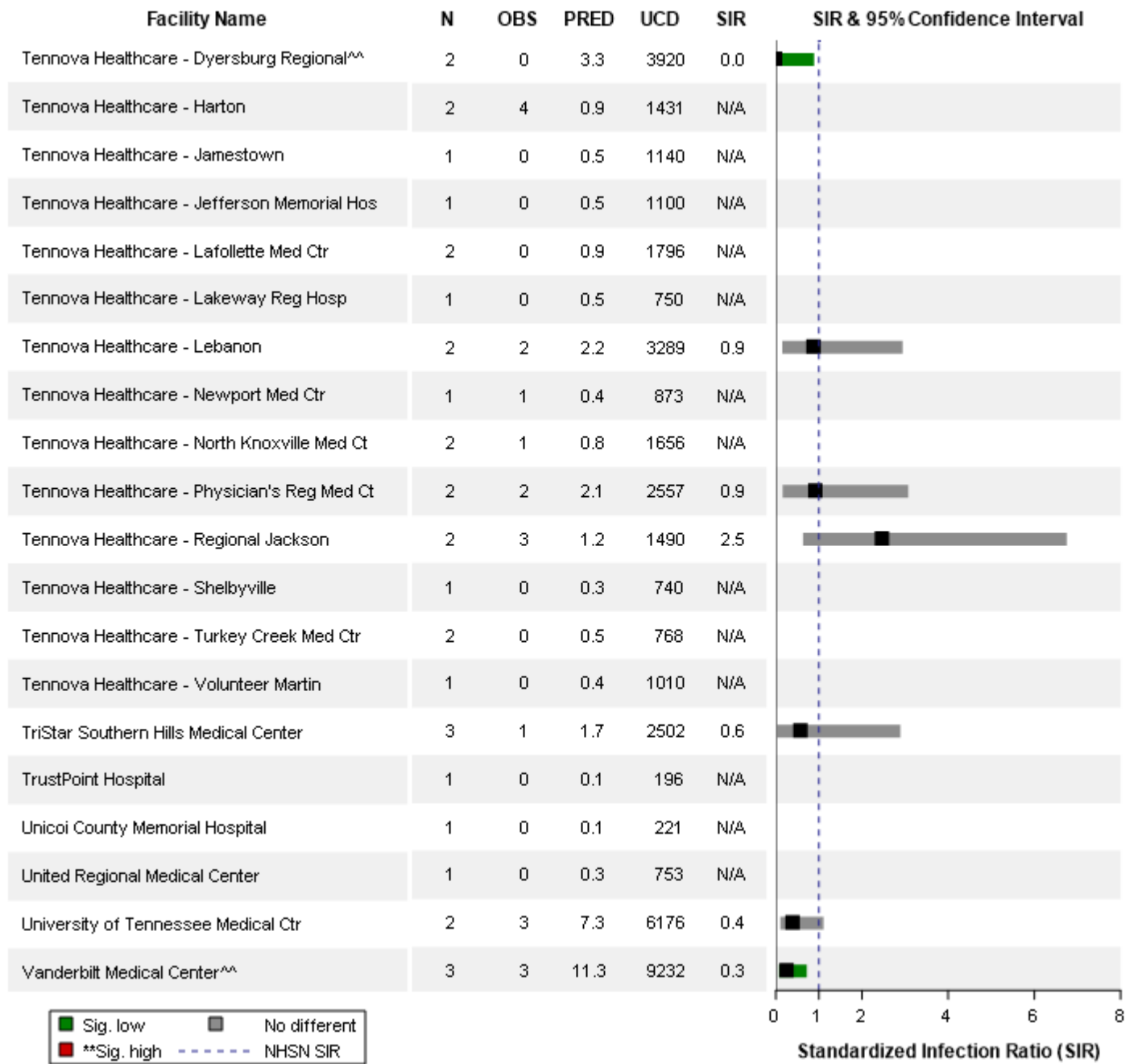
N/A = Data not shown for facilities with <50 urinary catheter days / SIR not calculated for facilities with  $\leq 1.0$  predicted infection

\*\* Significantly higher than national baseline

^^ Significantly lower than national baseline

\* Zero infections, but not statistically significant

Figure 34 (cont'd)



Data Reported as of August 27, 2019

N = number of types of units reporting

OBS = observed number of CAUTI

PRED = statistically 'predicted' number of CAUTI, based on NHSN baseline data

SIR = standardized infection ratio (observed/predicted number of CAUTI)

UCD = number of urinary catheter days

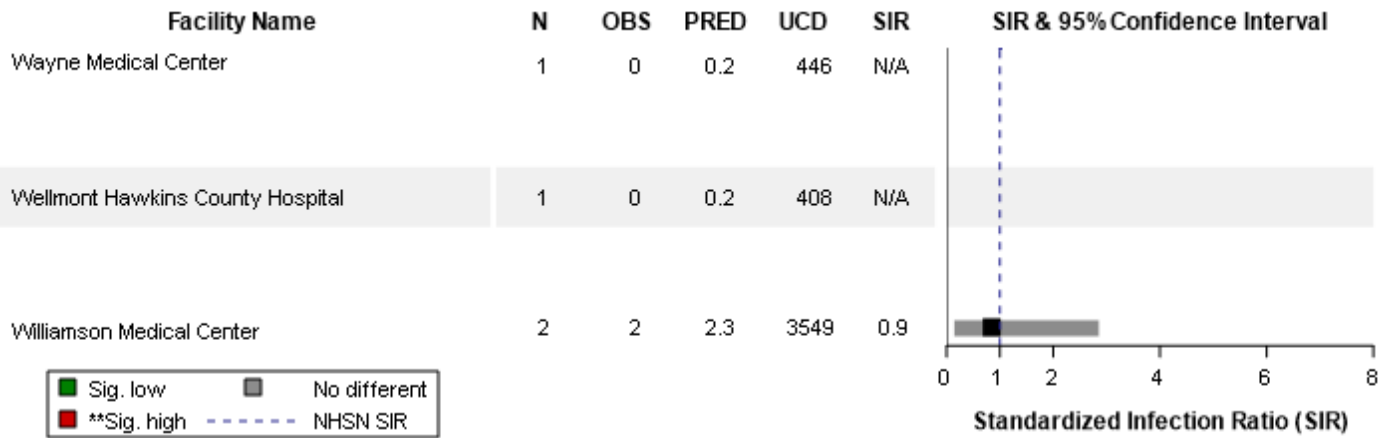
N/A = Data not shown for facilities with <50 urinary catheter days / SIR not calculated for facilities with  $\leq 1.0$  predicted infection

\*\* Significantly higher than national baseline

^^ Significantly lower than national baseline

\* Zero infections, but not statistically significant

**Figure 34 (cont'd)**



Data Reported as of August 27, 2019

N = number of types of units reporting

OBS = observed number of CAUTI

PRED = statistically 'predicted' number of CAUTI, based on NHSN baseline data

SIR = standardized infection ratio (observed/predicted number of CAUTI)

UCD = number of urinary catheter days

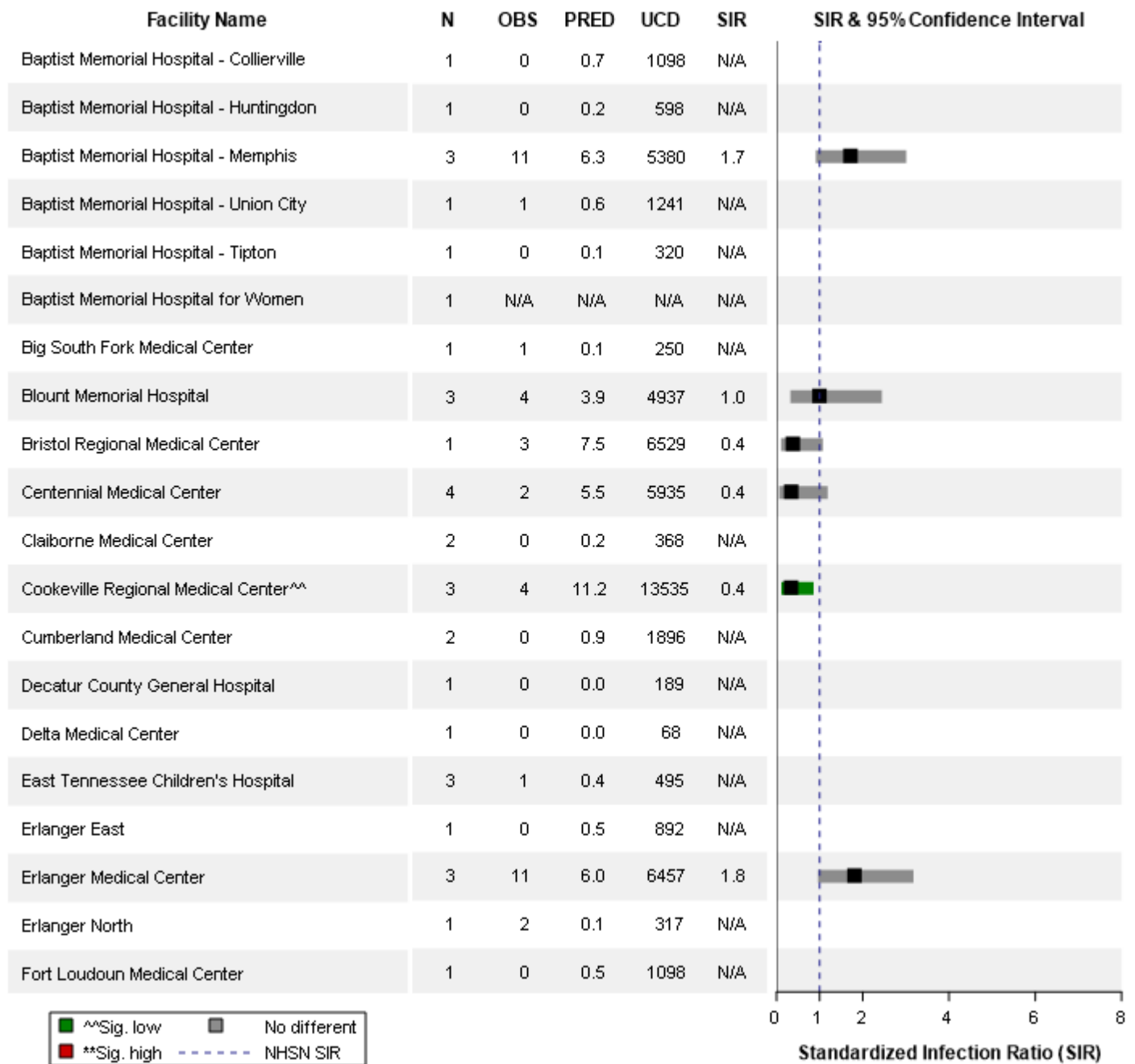
N/A = Data not shown for facilities with <50 urinary catheter days / SIR not calculated for facilities with  $\leq 1.0$  predicted infection

\*\* Significantly higher than national baseline

^^ Significantly lower than national baseline

\* Zero infections, but not statistically significant

**Figure 35: CAUTI Standardized Infection Ratio (SIR) for Adult and Pediatric Wards in Acute Care Hospitals, Tennessee, 01/01/2018 – 12/31/2018**



Data Reported as of August 27, 2019

N = number of types of units reporting

OBS = observed number of CAUTI

PRED = statistically 'predicted' number of CAUTI, based on NHSN baseline data

SIR = standardized infection ratio (observed/predicted number of CAUTI)

UCD = number of urinary catheter days

N/A = Data not shown for facilities with <50 urinary catheter days / SIR not calculated for facilities with ≤1.0 predicted infection

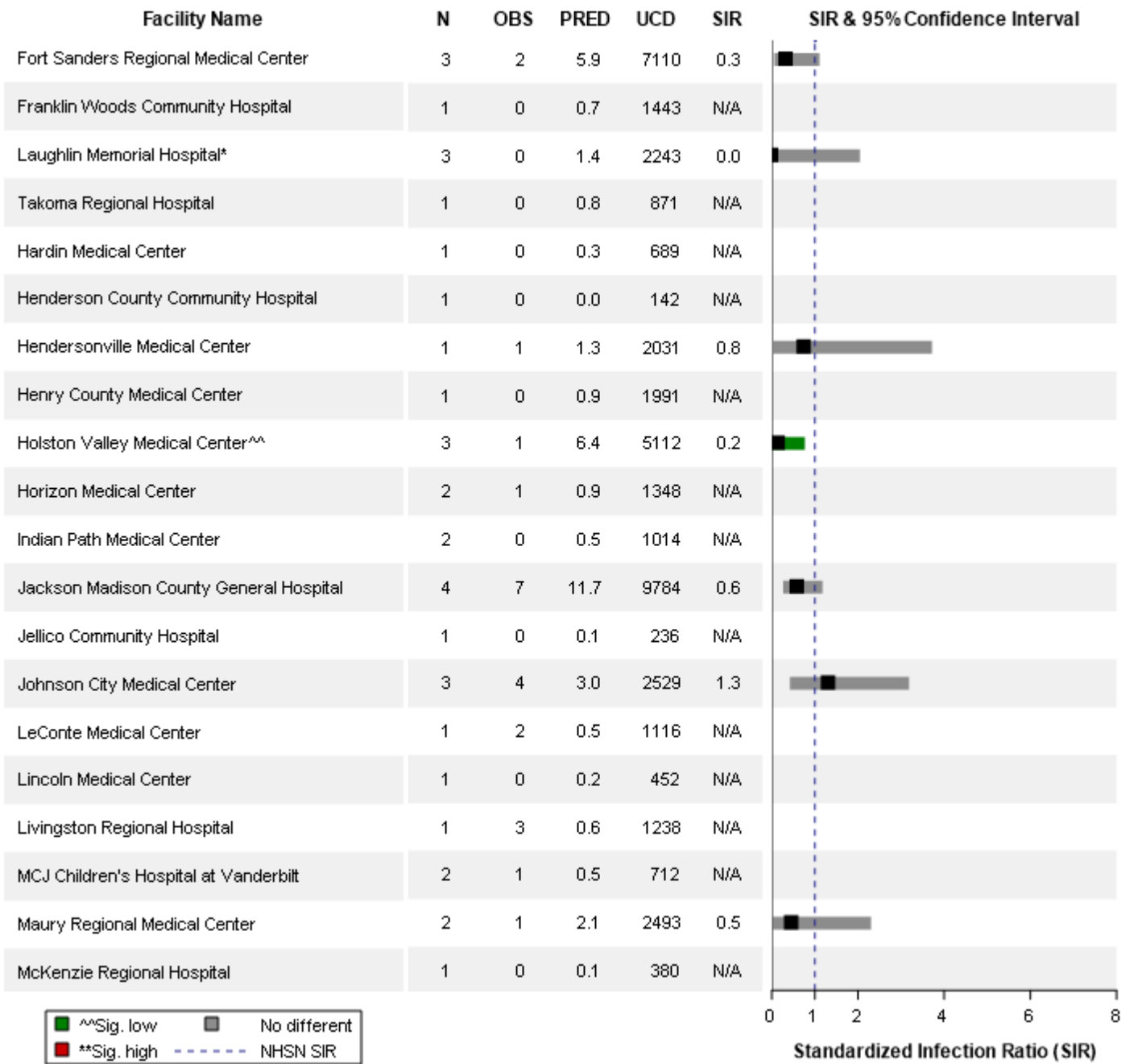
\*\* Significantly higher than national baseline

^^ Significantly lower than national baseline

\* Zero infections, but not statistically significant



Figure 35 (cont'd)



Data Reported as of August 27, 2019

N = number of types of units reporting

OBS = observed number of CAUTI

PRED = statistically 'predicted' number of CAUTI, based on NHSN baseline data

SIR = standardized infection ratio (observed/predicted number of CAUTI)

UCD = number of urinary catheter days

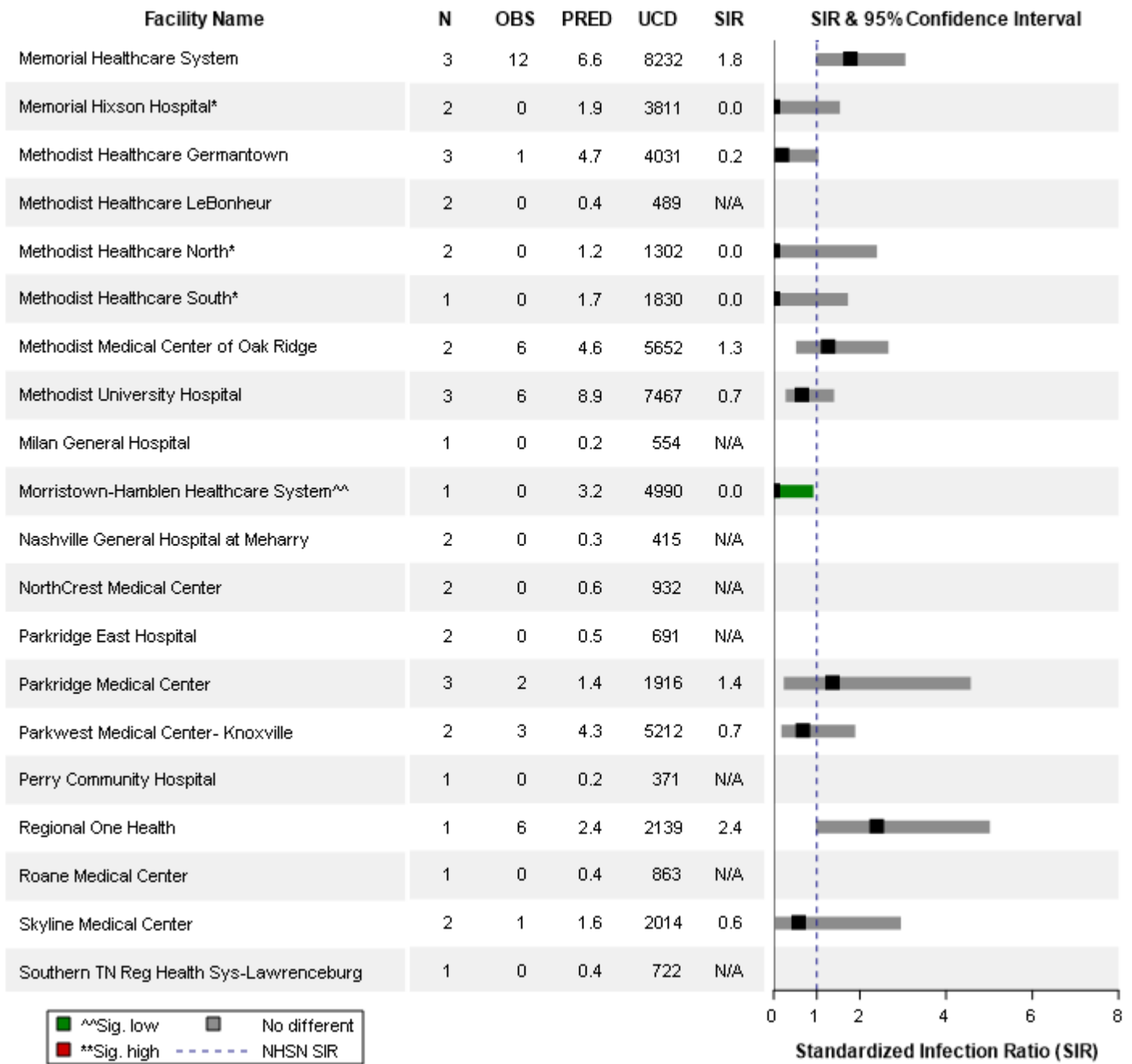
N/A = Data not shown for facilities with <50 urinary catheter days / SIR not calculated for facilities with  $\leq 1.0$  predicted infection

\*\* Significantly higher than national baseline

^^ Significantly lower than national baseline

\* Zero infections, but not statistically significant

Figure 35 (cont'd)



Data Reported as of August 27, 2019

N = number of types of units reporting

OBS = observed number of CAUTI

PRED = statistically 'predicted' number of CAUTI, based on NHSN baseline data

SIR = standardized infection ratio (observed/predicted number of CAUTI)

UCD = number of urinary catheter days

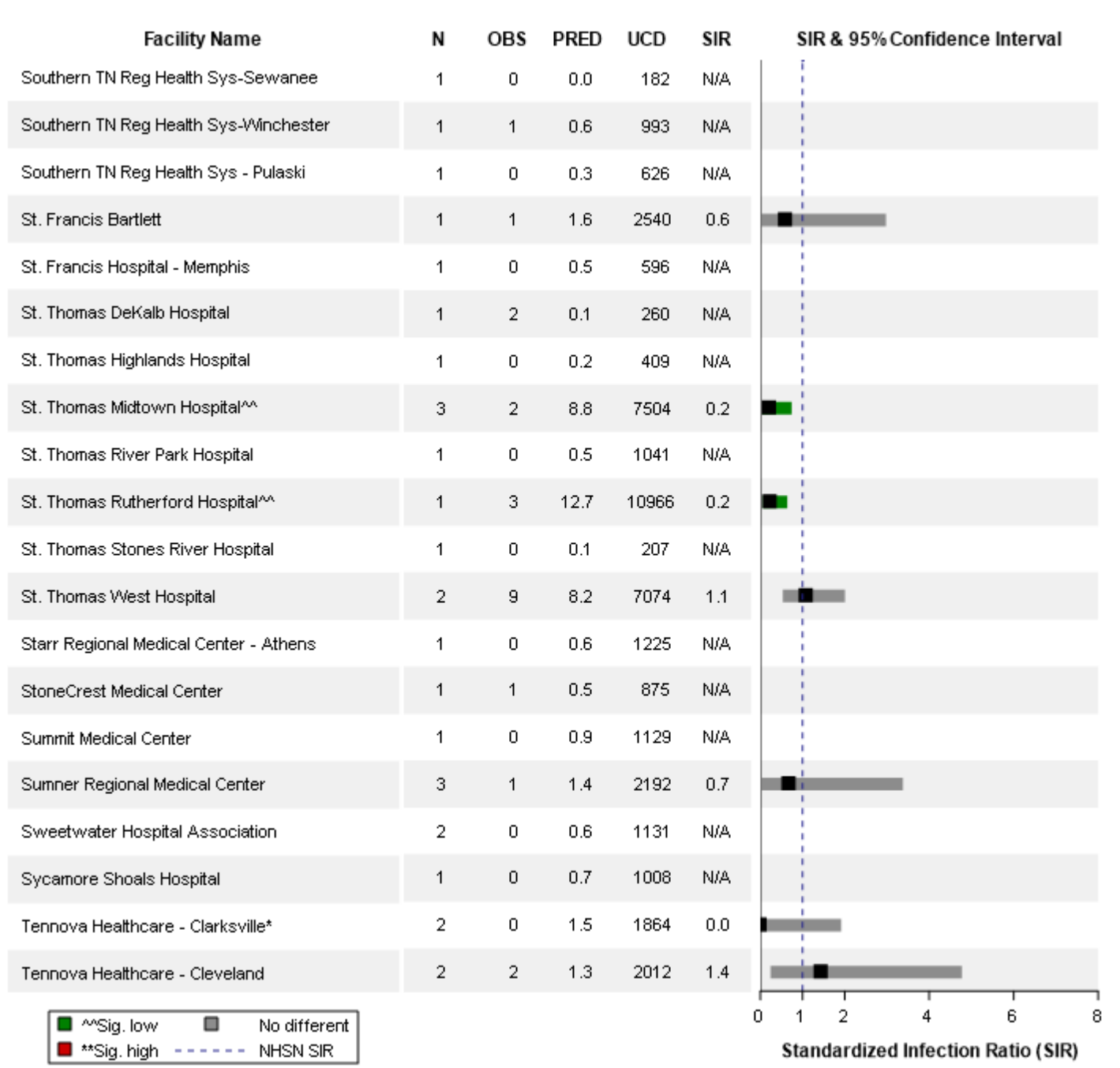
N/A = Data not shown for facilities with <50 urinary catheter days / SIR not calculated for facilities with  $\leq 1.0$  predicted infection

\*\* Significantly higher than national baseline

^^ Significantly lower than national baseline

\* Zero infections, but not statistically significant

Figure 35 (cont'd)



Data Reported as of August 27, 2019

N = number of types of units reporting

OBS = observed number of CAUTI

PRED = statistically 'predicted' number of CAUTI, based on NHSN baseline data

SIR = standardized infection ratio (observed/predicted number of CAUTI)

UCD = number of urinary catheter days

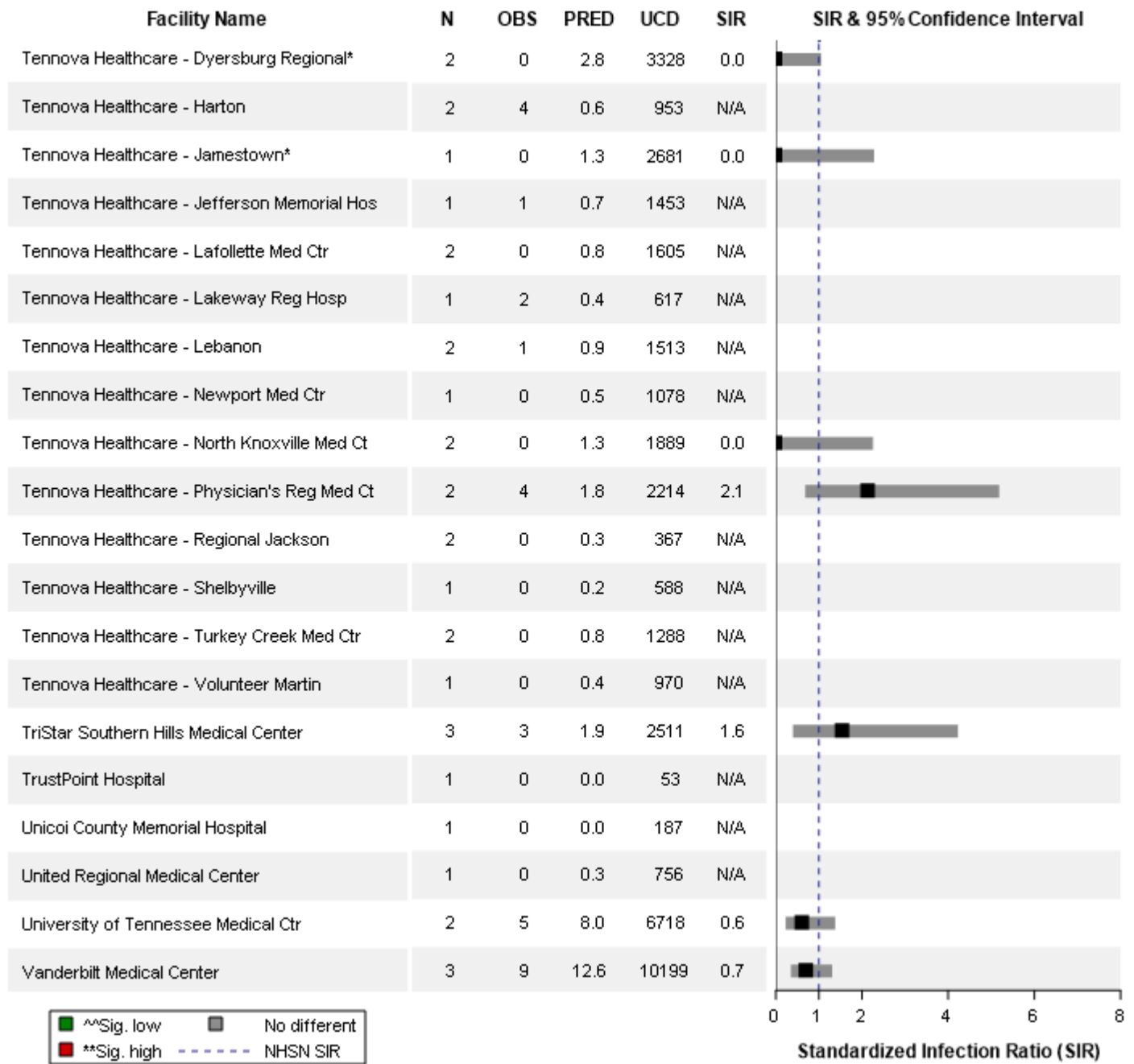
N/A = Data not shown for facilities with <50 urinary catheter days / SIR not calculated for facilities with  $\leq 1.0$  predicted infection

\*\* Significantly higher than national baseline

^^ Significantly lower than national baseline

\* Zero infections, but not statistically significant

Figure 35 (cont'd)



Data Reported as of August 27, 2019

N = number of types of units reporting

OBS = observed number of CAUTI

PRED = statistically 'predicted' number of CAUTI, based on NHSN baseline data

SIR = standardized infection ratio (observed/predicted number of CAUTI)

UCD = number of urinary catheter days

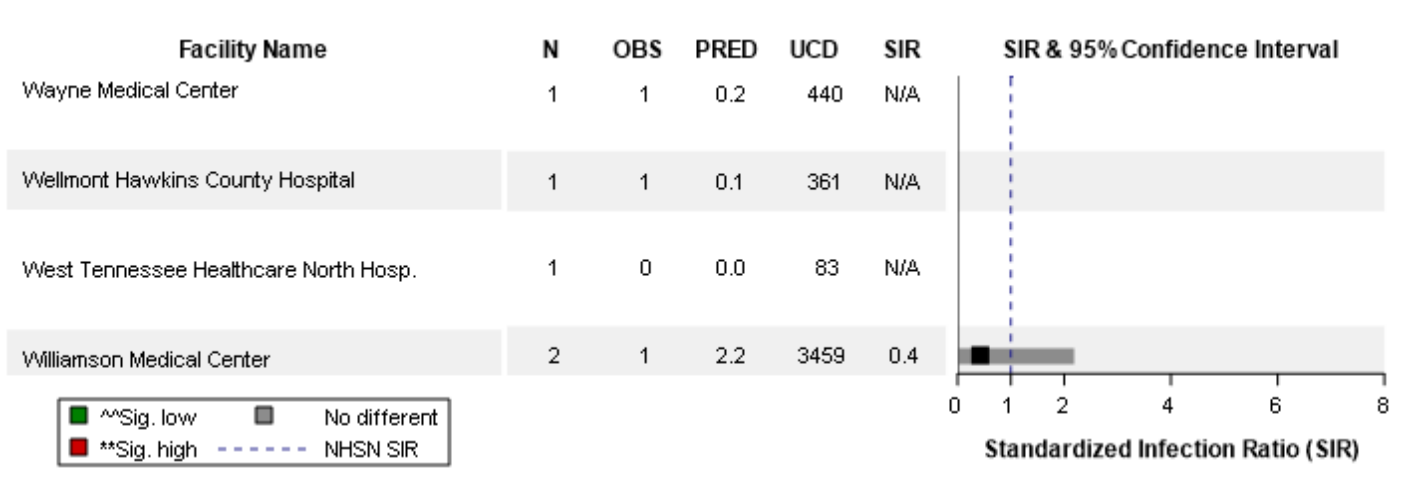
N/A = Data not shown for facilities with <50 urinary catheter days / SIR not calculated for facilities with  $\leq 1.0$  predicted infection

\*\* Significantly higher than national baseline

^^ Significantly lower than national baseline

\* Zero infections, but not statistically significant

**Figure 35 (cont'd)**



Data Reported as of August 27, 2019

N = number of types of units reporting

OBS = observed number of CAUTI

PRED = statistically 'predicted' number of CAUTI, based on NHSN baseline data

SIR = standardized infection ratio (observed/predicted number of CAUTI)

UCD = number of urinary catheter days

N/A = Data not shown for facilities with <50 urinary catheter days / SIR not calculated for facilities with  $\leq 1.0$  predicted infection

\*\* Significantly higher than national baseline

^^ Significantly lower than national baseline

\* Zero infections, but not statistically significant

# CAUTI

## *Long-term Acute Care Hospitals*

## CAUTIs in Long-Term Acute Care (LTAC) Hospitals:

**Total number of facilities reporting from January-December 2017: 9**

**Total number of facilities reporting from January-December 2018: 9**

### **SIRs by Quarter (Figure 36, Figure 37)**

- From January-March 2017 to October-December 2017, the overall CAUTI SIR for Tennessee LTACs fluctuated from a high of 1.25 to a low of 0.53. From January-March 2018 to October-December 2018, the overall CAUTI SIR for Tennessee LTACs increased steadily from 0.67 to 0.75. The U.S. Department of Health and Human Services' [National Action Plan to Prevent Healthcare-Associated Infections](#)<sup>18</sup> gives a five-year (2020) prevention target of SIR = 0.75.

### **Unadjusted Rates (Figure 38, Table 31)**

- The unadjusted pooled mean rate in LTACs was lower in 2018 than the pooled mean rate in 2017 (1.07 vs. 1.41 CAUTIs per 1,000 urinary catheter days).

### **Key Percentiles for Tennessee SIRs (Table 32)**

- The overall CAUTI SIR across all reporting LTACs in Tennessee from January-December 2017 was not statistically significantly different than the 2015 national baseline SIR of 1 (SIR=0.91, 95% CI: 0.67,1.19) . From January-December 2017, the median facility-specific SIR was 0.91, indicating that half of all reporting Tennessee LTACs with at least 1 predicted infection had a SIR at or above 0.91.
- The overall CAUTI SIR across all reporting LTACs in Tennessee from January-December 2018 was not statistically significantly different than the 2015 national baseline SIR of 1 (SIR=0.73, 95% CI: 0.50,1.02) . From January-December 2018, the median facility-specific SIR was 0.62, indicating that half of all reporting Tennessee LTACs with at least 1 predicted infection had a SIR at or above 0.62.

<sup>18</sup> <http://www.hhs.gov/ash/initiatives/hai/actionplan/>

### **Microorganisms Associated with CAUTIs in LTACs (Table 33, Table 34)**

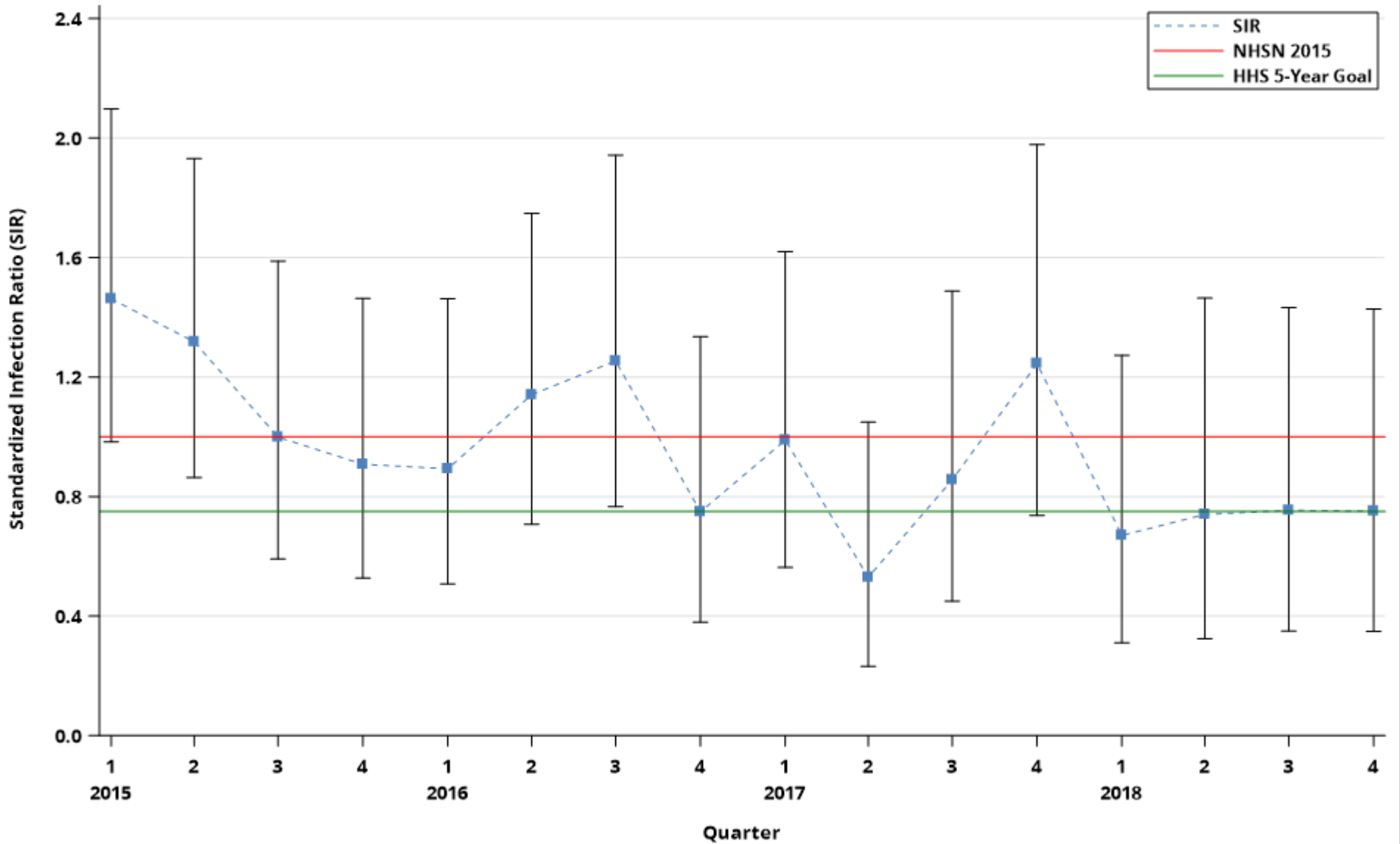
- Among the 54 pathogens isolated from 48 LTAC CAUTIs in 2017, the most common pathogens were *Escherichia coli* (24%), *Pseudomonas aeruginosa* (24%), *Klebsiella* species (15%) and *Enterococcus* species (15%). Vancomycin-resistant *Enterococcus* (VRE) accounted for 7%, methicillin-resistant *S. aureus* (MRSA) and carbapenem-resistant *Pseudomonas aeruginosa* accounted for 2% of total positive isolates.
- Among the 35 pathogens isolated from 31 LTAC CAUTIs in 2018, the most common pathogens were *Klebsiella* species (31%), *Pseudomonas aeruginosa* (26%) and *Escherichia coli* (14%). Vancomycin-resistant *Enterococcus* (VRE) accounted for 4%, and carbapenem-resistant *Pseudomonas aeruginosa* accounted for 3% of total positive isolates.

### **Facility-Specific SIRs (Figure 39, Figure 40)**

- One CAUTI SIR that accounts for all reporting adult and pediatric medical, surgical, and medical/surgical ward locations in each facility is displayed in [Figure 39](#) and [Figure 40](#). The bar representing the confidence interval is green if the CAUTI SIR was significantly lower than the national SIR of 1 for 2015 and red if the CAUTI SIR was significantly higher than 1. Some hospitals reported zero CAUTIs (indicated with an asterisk), although the facility's SIR may not be statistically significant due to a relatively small number of urinary catheter-days.
- In 2017, two Tennessee facilities had a CAUTI SIR statistically significantly higher than the 2015 national baseline SIR of 1 and one facility had a CAUTI SIR statistically significantly lower than the baseline SIR. In 2018, no facilities had an SIR either significantly lower or higher than the baseline SIR.

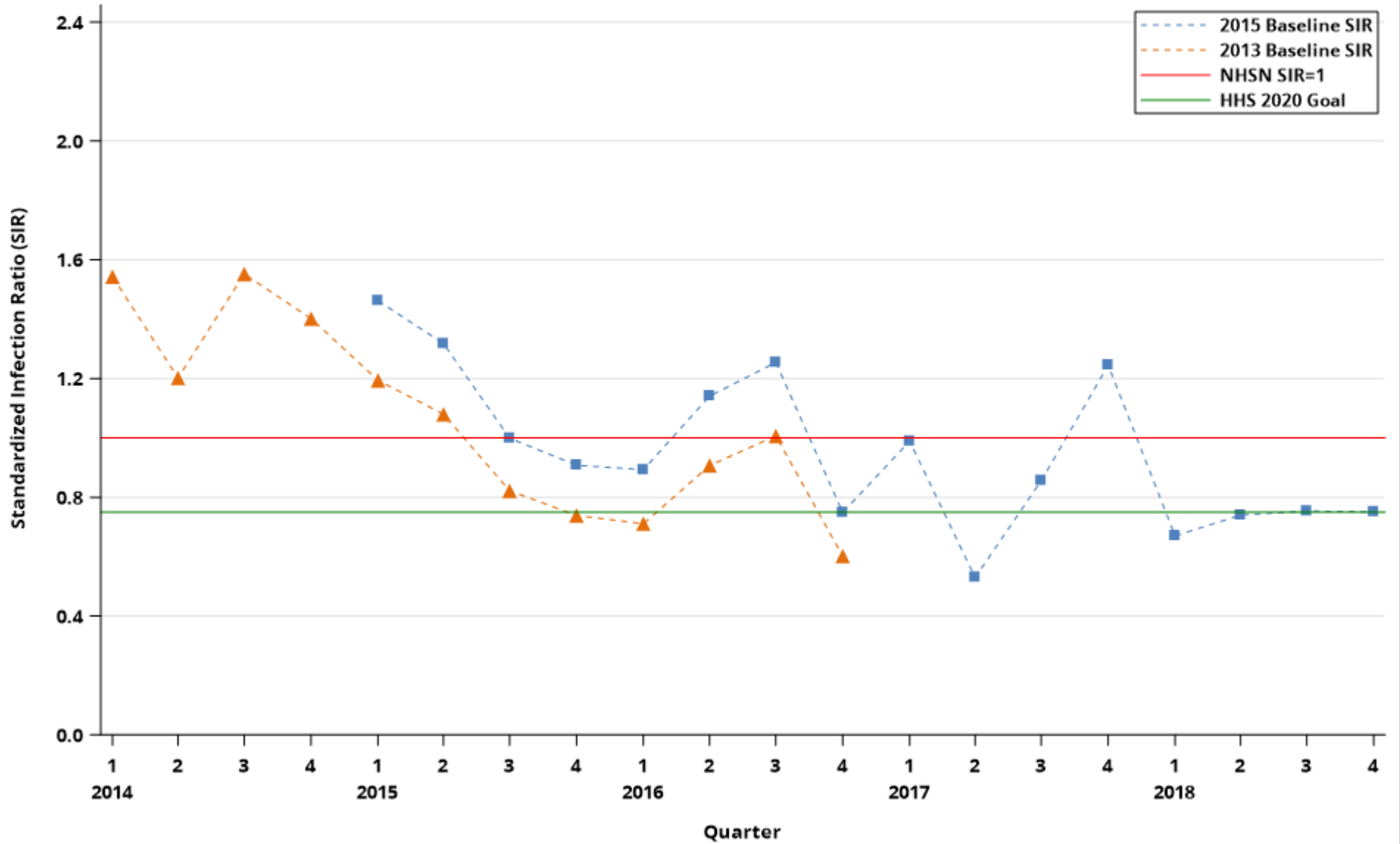


Figure 36: Standardized Infection Ratios (SIR) for Catheter-Associated Urinary Tract Infections (CAUTIs) in Long-term Acute Care (LTAC) Facilities by Quarter, Tennessee, 01/01/2015–12/31/2018 [Reference standard: National Healthcare Safety Network (NHSN), 2015]



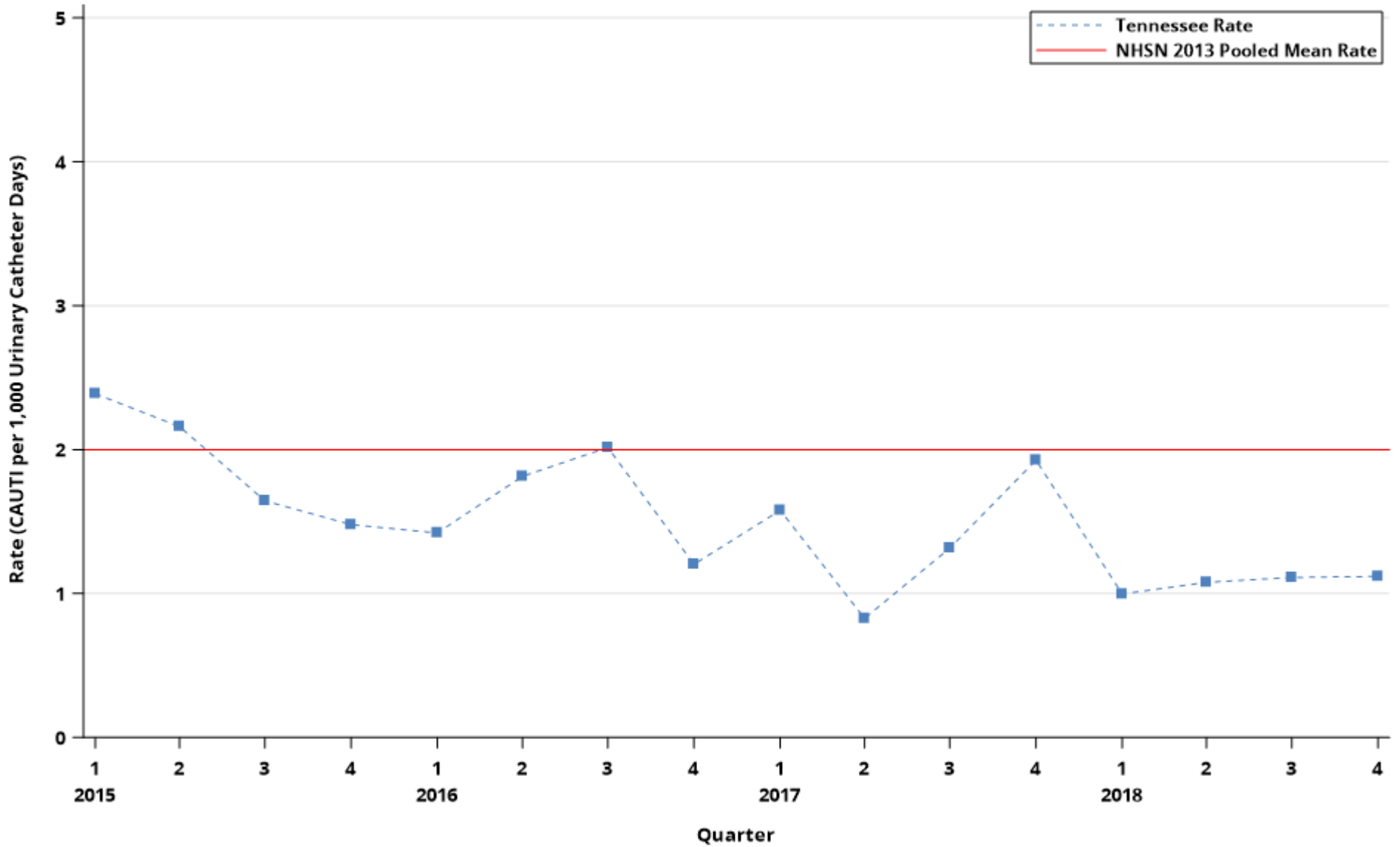
Data Reported as of June 20, 2019

Figure 37: Standardized Infection Ratios (SIR) for Catheter-Associated Urinary Tract Infections (CAUTIs) in Long-term Acute Care (LTAC) Facilities by Quarter, Tennessee, 01/01/2014–12/31/2018



Data Reported as of June 20, 2019

Figure 38: Crude (Unadjusted) Rates of Catheter-Associated Urinary Tract Infections (CAUTIs) in Long-term Acute Care (LTAC) Facilities by Quarter, Tennessee, 01/01/2015–12/31/2018 [Reference standard: National Healthcare Safety Network (NHSN), 2013]



Data Reported as of June 20, 2019

**Table 31: Crude (Unadjusted) Rate of Catheter-Associated Urinary Tract Infection (CAUTI) and Catheter Utilization Ratios in Long-term Acute Care (LTAC) Facilities by Year, Tennessee, 01/01/2017 - 12/31/2018**

STATE	YEAR	No.	CAUTI	UC Days	CAUTI Rate*	PATIENT DAYS	DU Ratio
Tennessee	2018	9	31	28,858	1.07	93,196	0.31
	2017	9	48	33,994	1.41	95,572	0.36

Data reported as of June 20, 2019

No. = number of facilities; CAUTI = observed number of CAUTI; UC DAYS = urinary catheter days

DU Ratio = device utilization ratio (urinary catheter days/patient days)

\*Per 1,000 urinary catheter days

**Table 32: Key Percentiles for Facility-Specific Catheter-Associated Urinary Tract Infection (CAUTI) Standardized Infection Ratios (SIRs) in Long-term Acute Care (LTAC) Facilities by Year, Tennessee, 01/01/2017 - 12/31/2018**

									DISTRIBUTION OF FACILITY-SPECIFIC SIRs									
				No. of INFECTIONS		SIR AND 95% CONFIDENCE INTERVAL			No. of FACS WITH ≥1 PRED INFECTION		No. of FACS WITH SIR <1.0		No. of FACS WITH SIR >1.0					
STATE	YEAR	No.	UC Days	OBS	PRED	SIR	LOWER LIMIT	UPPER LIMIT	N	%	N	%	10%	25%	50%	75%	90%	
Tennessee	2018	9	28,858	31	42.66	0.73	0.50	1.02	9	0	0%	0	0%	0.00	0.35	0.62	0.99	1.77
	2017	9	33,994	48	53.06	0.91	0.67	1.19	9	1	11%	2	22%	0.00	0.50	0.91	1.29	2.26

Data reported as of June 20, 2019

No. = number of facilities; UC Days = urinary catheter days; OBS = observed number of CAUTI

PRED = statistically 'predicted' number of CAUTI; SIR = standardized infection ratio (observed/predicted number of CAUTI)

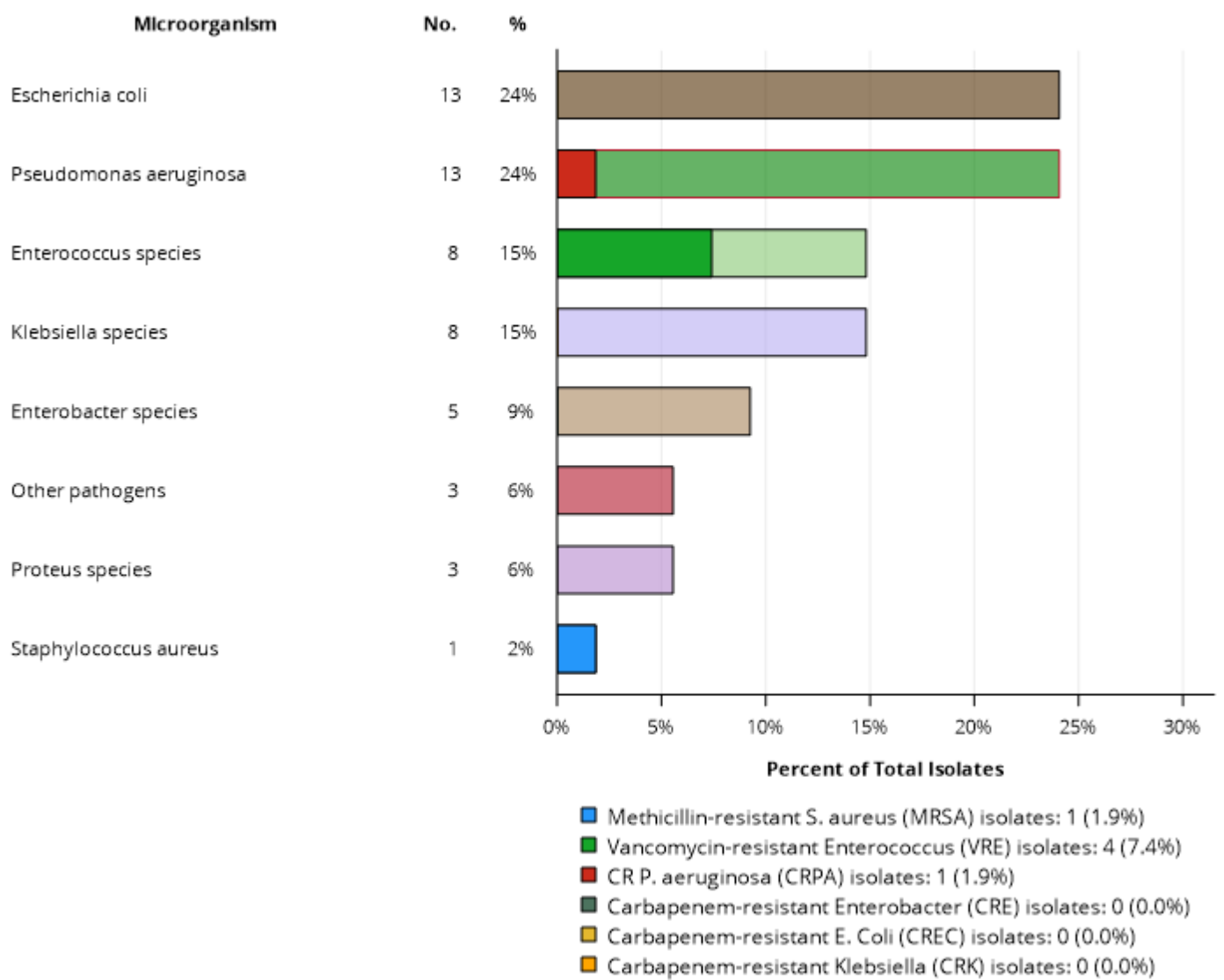
Key percentiles include facilities with at least one predicted infection

Red highlighting indicates SIR for reporting period is significantly higher than national 2015 SIR of 1.0

Green highlighting indicates SIR for reporting period is significantly lower than national 2015 SIR of 1.0

**Table 33: Microorganisms Identified in Catheter-Associated Urinary Tract (CAUTIs) in Long-term Acute Care (LTAC) Facilities, Tennessee, 01/01/2017 - 12/31/2017**

**Number of isolates=54; Number of events=48**

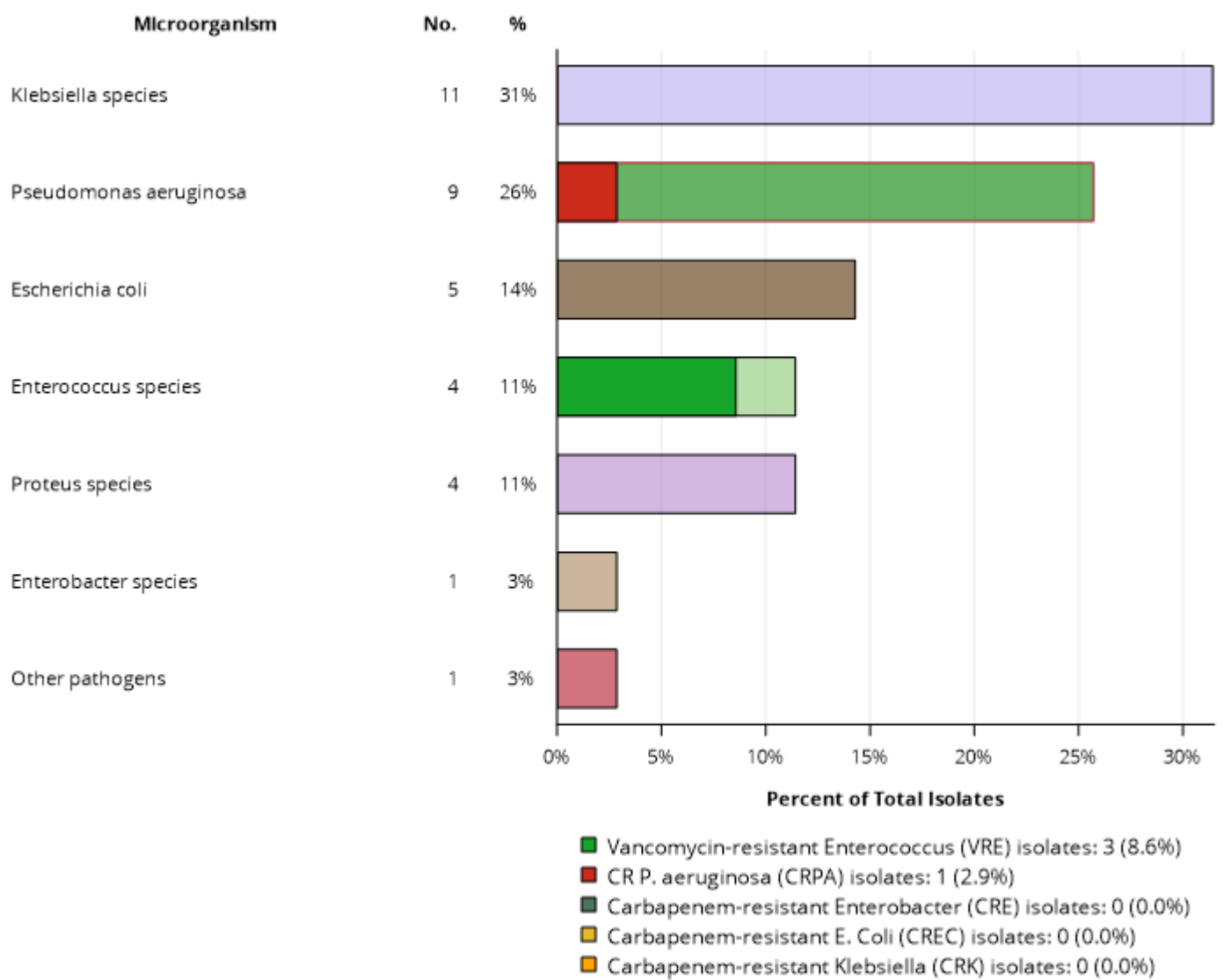


Data reported as of June 20, 2019

Other pathogens = Citrobacter spp., Serratia spp., Stenotrophomonas spp.

**Table 34: Microorganisms Identified in Catheter-Associated Urinary Tract (CAUTIs) in Long-term Acute Care (LTAC) Facilities, Tennessee, 01/01/2018 - 12/31/2018**

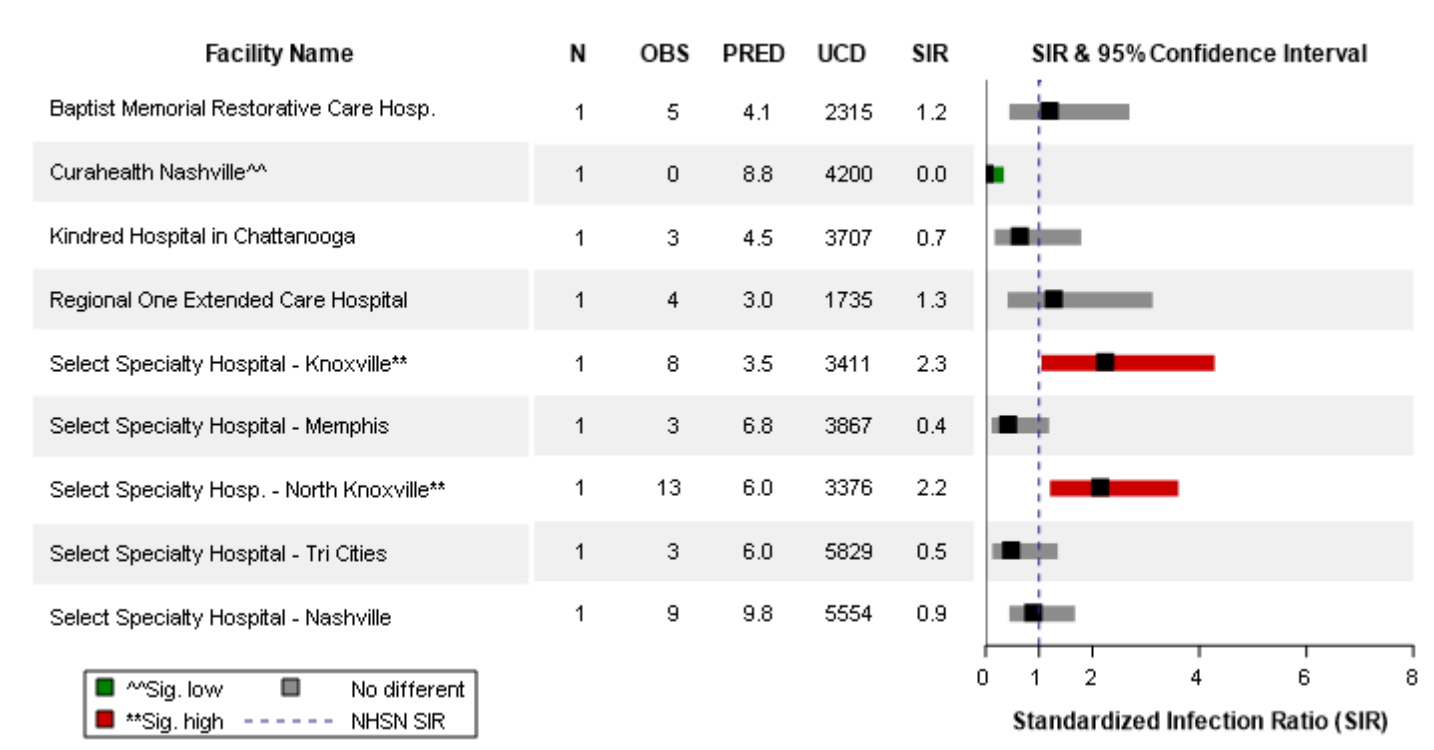
**Number of isolates=35; Number of events=31**



Data reported as of June 20, 2019

Other pathogens = Aerococcus spp.

**Figure 39: CAUTI Standardized Infection Ratio (SIR) for Long-term Acute Care (LTAC) Facilities, Tennessee, 01/01/2017 – 12/31/2017**



Data Reported as of June 20, 2019

N = number of types of units reporting

OBS = observed number of CAUTI

PRED = statistically 'predicted' number of CAUTI, based on NHSN baseline data

SIR = standardized infection ratio (observed/predicted number of CAUTI)

UCD = number of urinary catheter days

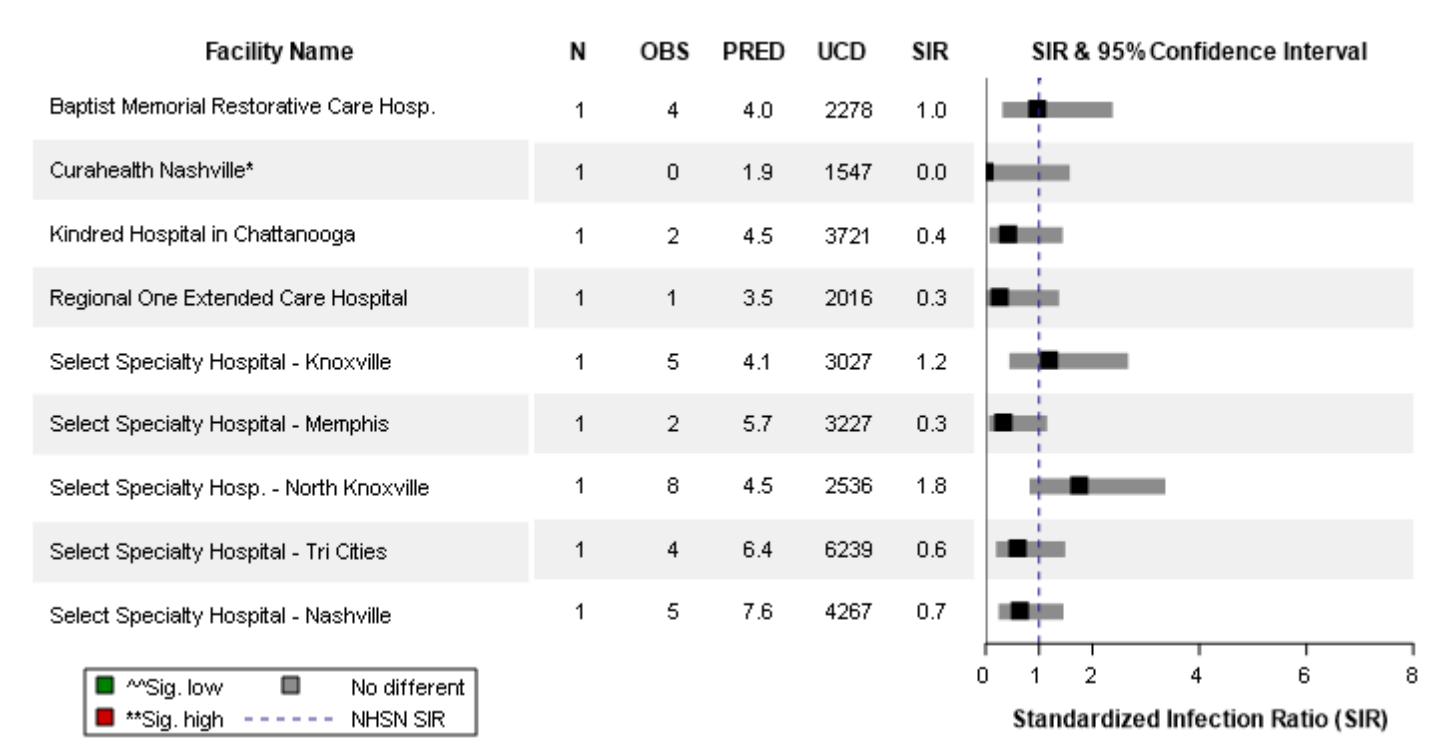
N/A = Data not shown for facilities with <50 urinary catheter days / SIR not calculated for facilities with <1 predicted infection

\*\* Significantly higher than national baseline

^^ Significantly lower than national baseline

\* Zero infections, but not statistically significant

**Figure 40: CAUTI Standardized Infection Ratio (SIR) for Long-term Acute Care (LTAC) Facilities, Tennessee, 01/01/2018 – 12/31/2018**



Data Reported as of June 20, 2019

N = number of types of units reporting

OBS = observed number of CAUTI

PRED = statistically 'predicted' number of CAUTI, based on NHSN baseline data

SIR = standardized infection ratio (observed/predicted number of CAUTI)

UCD = number of urinary catheter days

N/A = Data not shown for facilities with <50 urinary catheter days / SIR not calculated for facilities with ≤1.0 predicted infection

\*\* Significantly higher than national baseline

^^ Significantly lower than national baseline

\* Zero infections, but not statistically significant



# CAUTI

## *Inpatient Rehabilitation Facilities*

## CAUTIs in Inpatient Rehabilitation Facilities:

**Total number of facilities reporting from January-December 2017: 30**

**Total number of facilities reporting from January-December 2018: 29**

### **SIRs by Quarter (Figure 41, Figure 42)**

- From January-March 2017 to July-September 2017, the overall CAUTI SIR for Tennessee inpatient rehabilitation facilities (IRFs) decreased from 1.76 to 0.49. The SIR then increased to 1.63 during October-December 2017. From January-March 2018 to July-September 2018, the overall CAUTI SIR increased from 1.56 to 2.6. The SIR then decreased to 0.53 during October-December 2018. The U.S. Department of Health and Human Services' [National Action Plan to Prevent Healthcare-Associated Infections](#)<sup>19</sup> gives a five-year (2020) prevention target of SIR = 0.75.

### **Unadjusted Rates (Figure 43, Table 35)**

- The unadjusted pooled mean rate in IRFs was higher in 2018 than the pooled mean rate in 2017 (2.64 vs. 2.29 CAUTIs per 1,000 urinary catheter days).

### **Key Percentiles for Tennessee SIRs (Table 36)**

- The overall CAUTI SIR across all reporting IRFs in Tennessee from January-December 2017 was not statistically significantly different than the 2015 national SIR of 1 (SIR=1.22; 95% CI: 0.84, 1.72). The overall CAUTI SIR across all reporting IRFs in Tennessee from January-December 2018 was statistically significantly higher than the 2015 national SIR of 1 (SIR=1.59; 95% CI: 1.12, 2.18).
- From January-December 2017, the median facility-specific SIR was 1.20, indicating that half of all reporting Tennessee IRFs with at least 1 predicted infection had a SIR at or below 1.20. From January-December 2018, the median facility-specific SIR was 1.39, indicating that half of all reporting Tennessee IRFs with at least 1 predicted infection had a SIR at or below 1.39.

<sup>19</sup> <http://www.hhs.gov/ash/initiatives/hai/actionplan/>

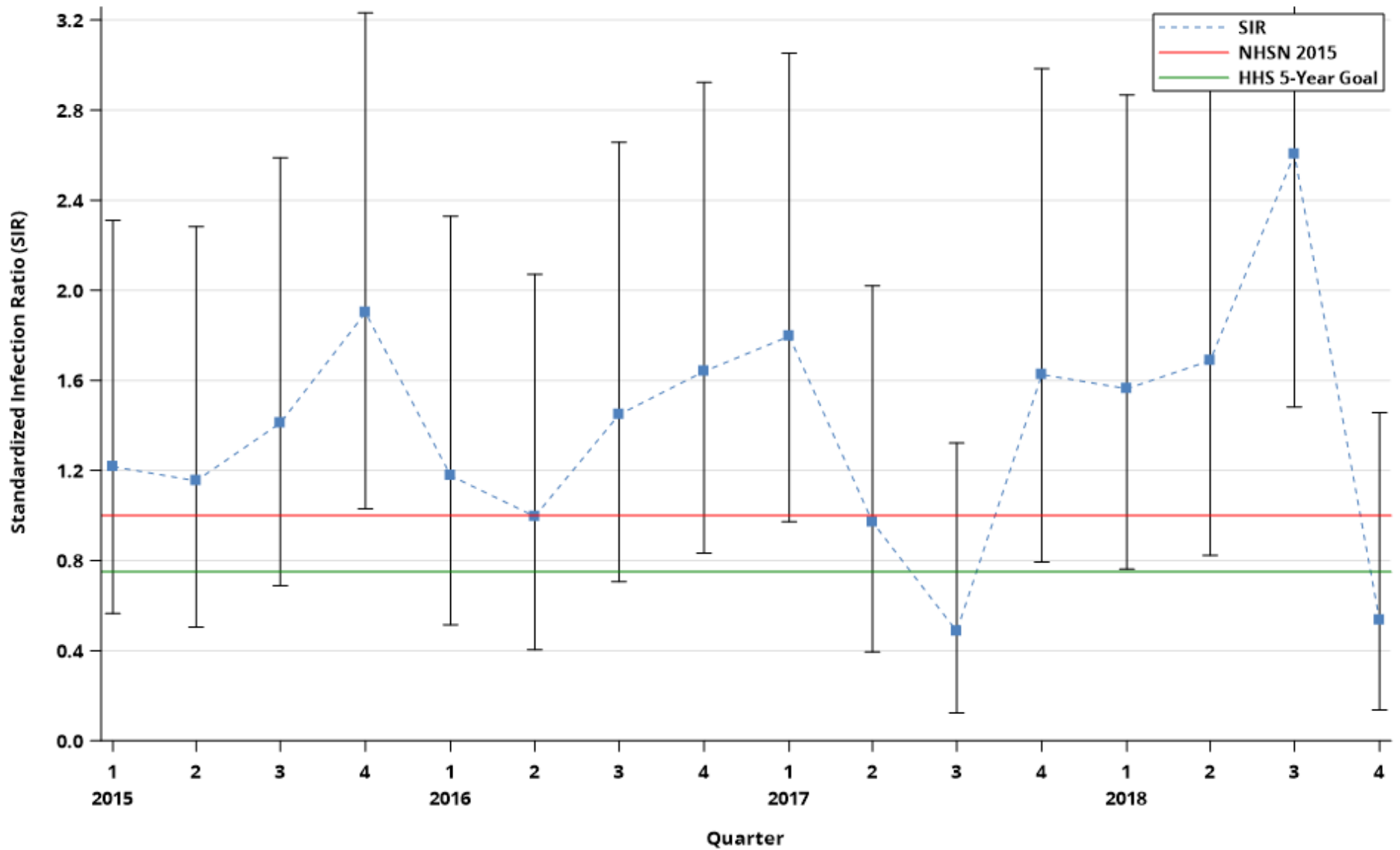
### **Microorganisms Associated with CAUTIs in IRFs (Table 37,-Table 38)**

- Among the 36 pathogens isolated from 30 IRF CAUTIs in 2017, the most common pathogens were *Escherichia coli* (33%), *Pseudomonas aeruginosa* (19%), and *Enterococcus* species (10%). Vancomycin-resistant *Enterococcus* (VRE), carbapenem-resistant *Pseudomonas aeruginosa* and carbapenem-resistant *Klebsiella* species accounted for 2% of total positive isolates.
- Among the 38 pathogens isolated from 35 IRF CAUTIs in 2018, the most common pathogens were *Escherichia coli* (37%), *Klebsiella* species (10%) and *Pseudomonas aeruginosa* (18%).

### **Facility-Specific SIRs (Figure 44, Figure 45)**

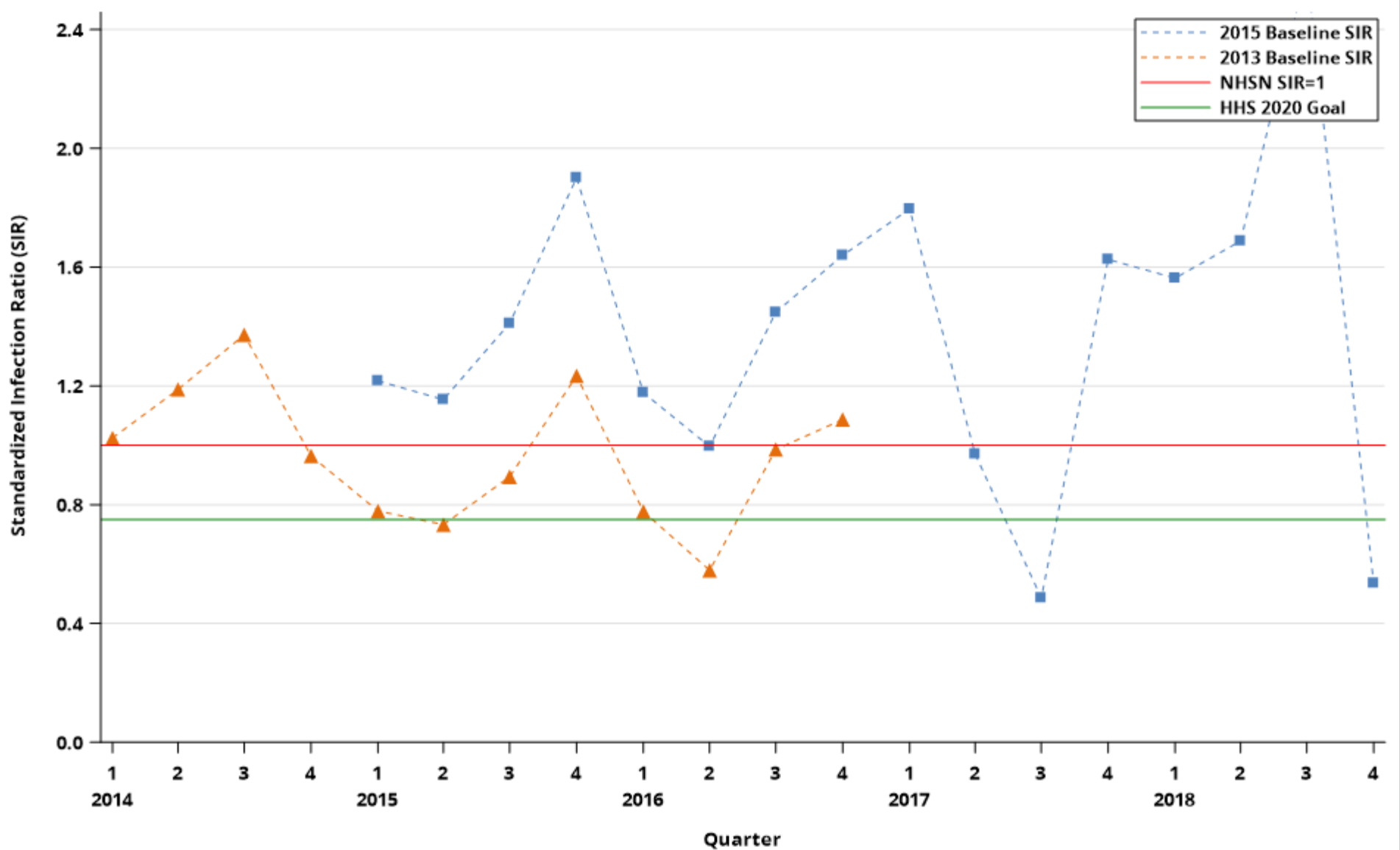
- One CAUTI SIR that accounts for all reporting adult and pediatric medical, surgical, and medical/surgical ward locations in each facility is displayed in [Figure 44](#) and [Figure 45](#). The bar representing the confidence interval is green if the CAUTI SIR was significantly lower than the national SIR of 1 for 2015 and red if the CAUTI SIR was significantly higher than 1. Some hospitals reported zero CAUTIs (indicated with an asterisk), although the facility's SIR may not be statistically significant due to a relatively small number of urinary catheter-days.
- In 2017, no Tennessee facilities had a CAUTI SIR statistically significantly lower or higher than the 2015 national baseline SIR of 1. In 2018, one facility had a CAUTI SIR statistically significantly higher than the baseline SIR.

**Figure 41: Standardized Infection Ratios (SIR) for Catheter-Associated Urinary Tract Infections (CAUTIs) in Inpatient Rehabilitation Facilities (IRF) by Quarter, Tennessee, 01/01/2015–12/31/2018 [Reference standard: National Healthcare Safety Network (NHSN), 2015]**



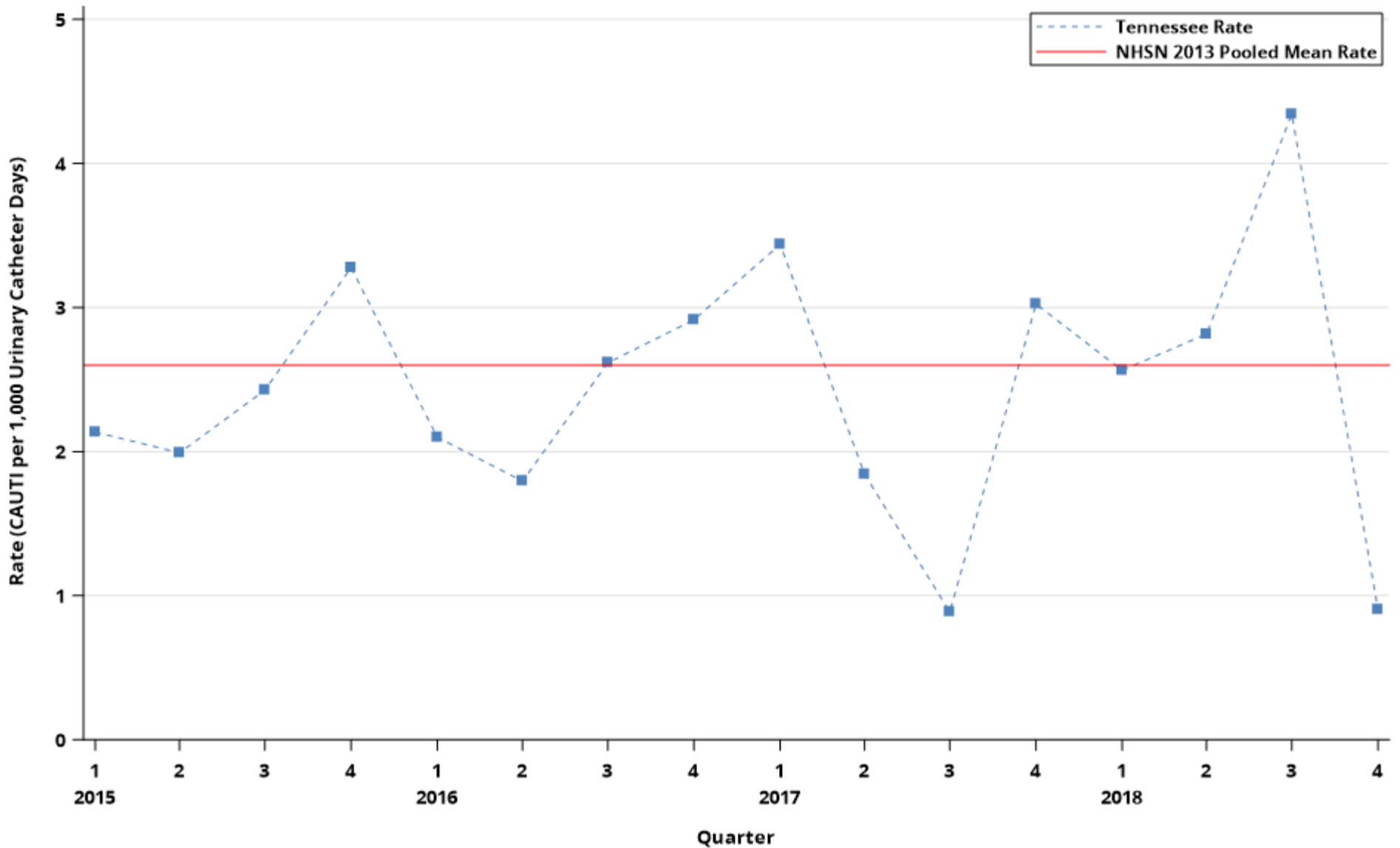
Data Reported as of June 20, 2019

**Figure 42: Standardized Infection Ratios (SIR) for Catheter-Associated Urinary Tract Infections (CAUTIs) in Inpatient Rehabilitation Facilities (IRF) by Quarter, Tennessee, 01/01/2014–12/31/2018**



Data Reported as of June 20, 2019

**Figure 43: Crude (Unadjusted) Rates of Catheter-Associated Urinary Tract Infections (CAUTIs) in Inpatient Rehabilitation Facilities (IRF) by Quarter, Tennessee, 01/01/2015–12/31/2018 [Reference standard: National Healthcare Safety Network (NHSN), 2013]**



Data Reported as of June 20, 2019

**Table 35: Crude (Unadjusted) Rate of Catheter-Associated Urinary Tract Infection (CAUTI) and Catheter Utilization Ratios in Inpatient Rehabilitation Facilities (IRF) by Year, Tennessee, 01/01/2017 - 12/31/2018**

STATE	YEAR	No.	CAUTI	UC Days	CAUTI Rate*	PATIENT DAYS	DU Ratio
Tennessee	2018	30	35	13,250	2.64	222,782	0.06
	2017	31	30	13,102	2.29	222,086	0.06

Data reported as of June 20, 2019

No. = number of facilities; CAUTI = observed number of CAUTI; UC DAYS = urinary catheter days

DU Ratio = device utilization ratio (urinary catheter days/patient days)

\*Per 1,000 urinary catheter days

**Table 36: Key Percentiles for Facility-Specific Catheter-Associated Urinary Tract Infection (CAUTI) Standardized Infection Ratios (SIRs) in Inpatient Rehabilitation Facilities (IRF) Facilities by Year, Tennessee, 01/01/2017 - 12/31/2018**

									DISTRIBUTION OF FACILITY-SPECIFIC SIRs										
				No. of INFECTIONS		SIR AND 95% CONFIDENCE INTERVAL			No. of FACS WITH ≥1 PRED INFECTION		No. of FACS WITH SIR SIG. <1.0		No. of FACS WITH SIR SIG. >1.0						
STATE	YEAR	No.	UC Days	OBS	PRED	SIR	LOWER LIMIT	UPPER LIMIT	N	%	N	%	10%	25%	50%	75%	90%		
Tennessee	2018	29	13,250	35	22.07	1.59	1.12	2.18	7	0	0%	1	14%	0.00	0.88	1.39	1.99	3.31	
	2017	30	13,102	30	24.57	1.22	0.84	1.72	9	0	0%	0	0%	0.00	0.68	1.20	1.83	2.93	

Data reported as of June 20, 2019

No. = number of facilities; UC Days = urinary catheter days; OBS = observed number of CAUTI

PRED = statistically 'predicted' number of CAUTI; SIR = standardized infection ratio (observed/predicted number of CAUTI)

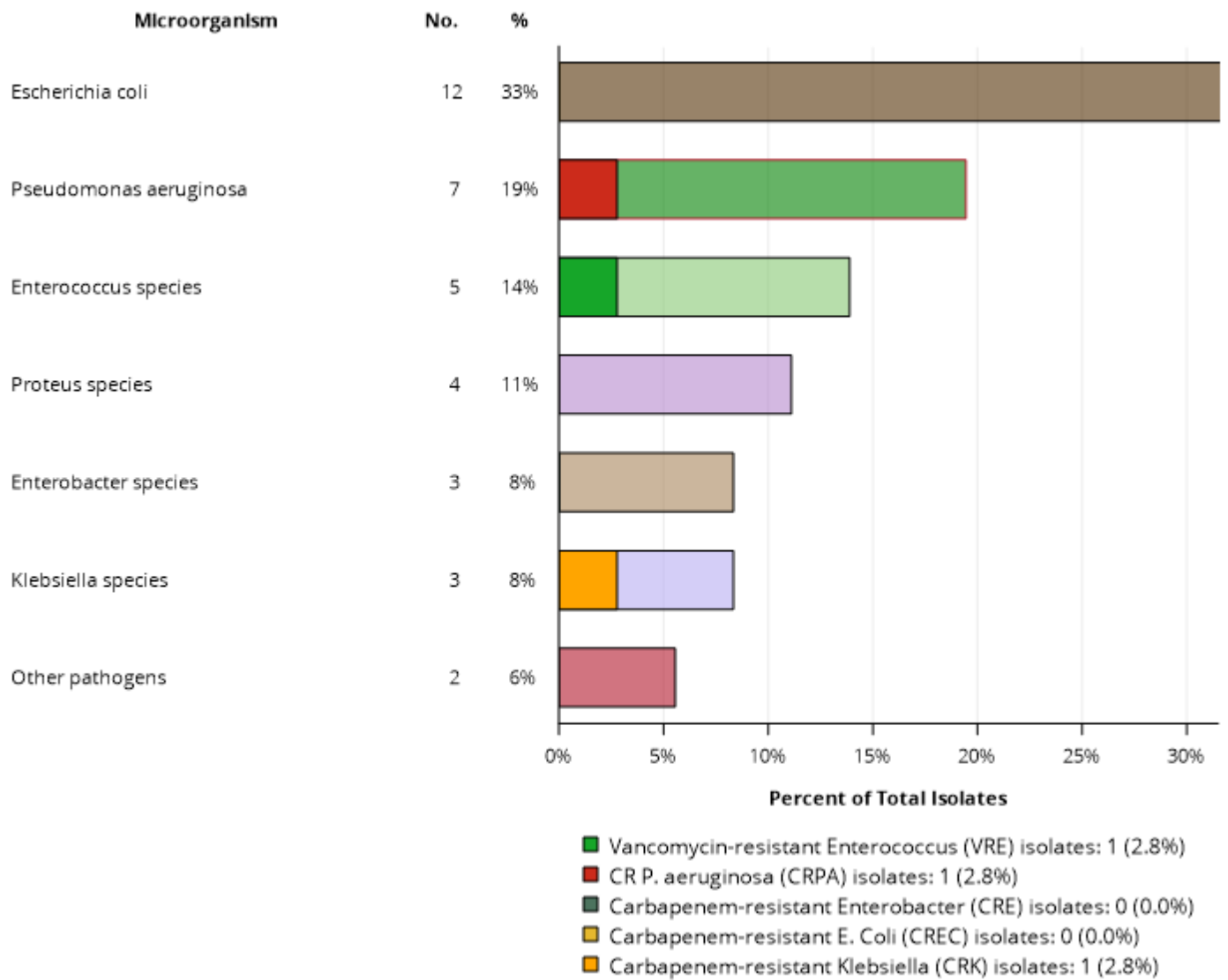
Key percentiles include facilities with at least one predicted infection

Red highlighting indicates SIR for reporting period is significantly higher than national 2013 SIR of 1.0

Green highlighting indicates SIR for reporting period is significantly lower than national 2013 SIR of 1.0

**Table 37: Microorganisms Identified in Catheter-Associated Urinary Tract (CAUTIs) in Inpatient Rehabilitation Facilities (IRF), Tennessee, 01/01/2017 - 12/31/2017**

**Number of isolates=36; Number of events=30**



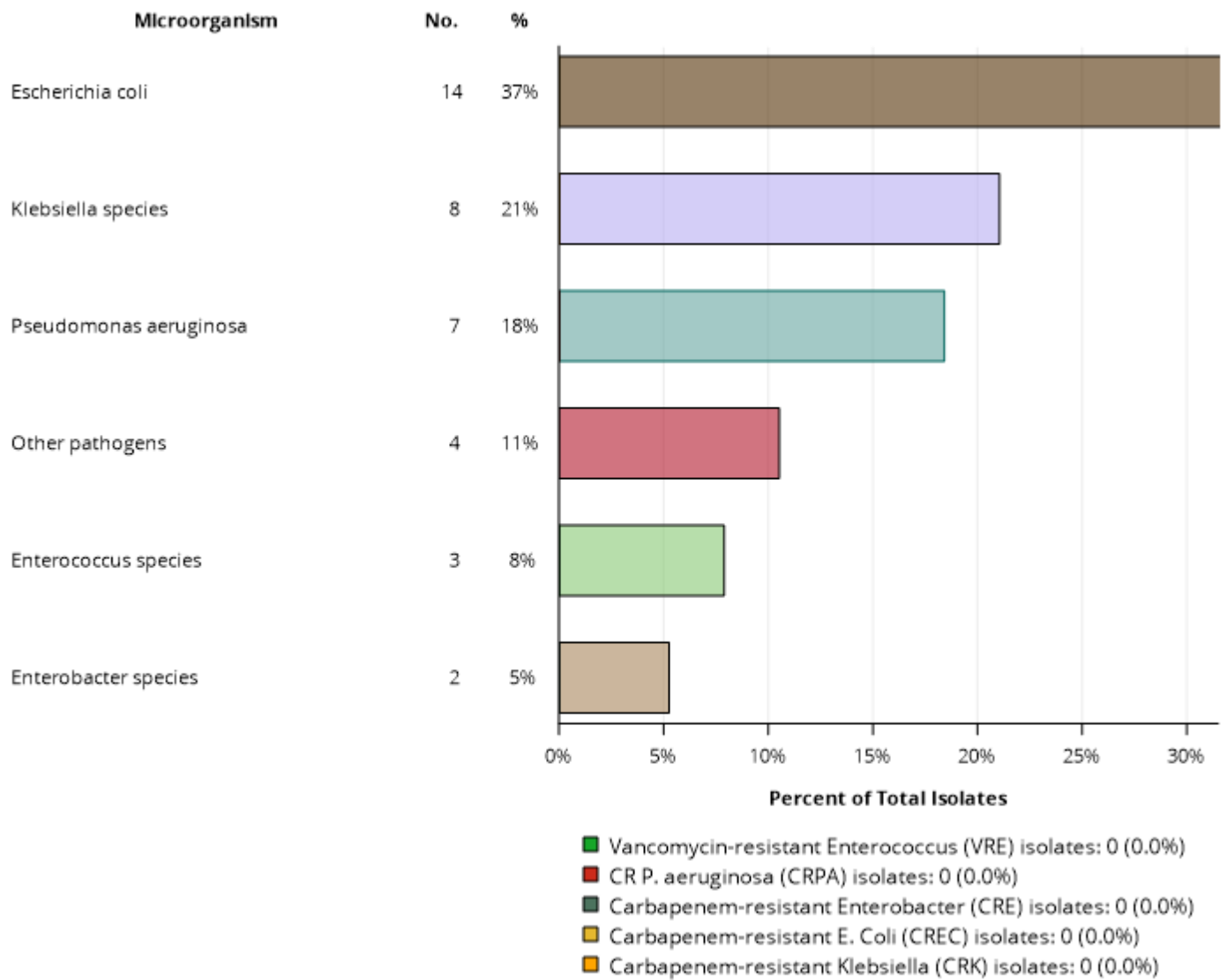
Data reported as of June 20, 2019

Other pathogens = Hafnia spp., Morganella spp.



**Table 38: Microorganisms Identified in Catheter-Associated Urinary Tract (CAUTIs) in Inpatient Rehabilitation Facilities (IRF), Tennessee, 01/01/2018 - 12/31/2018**

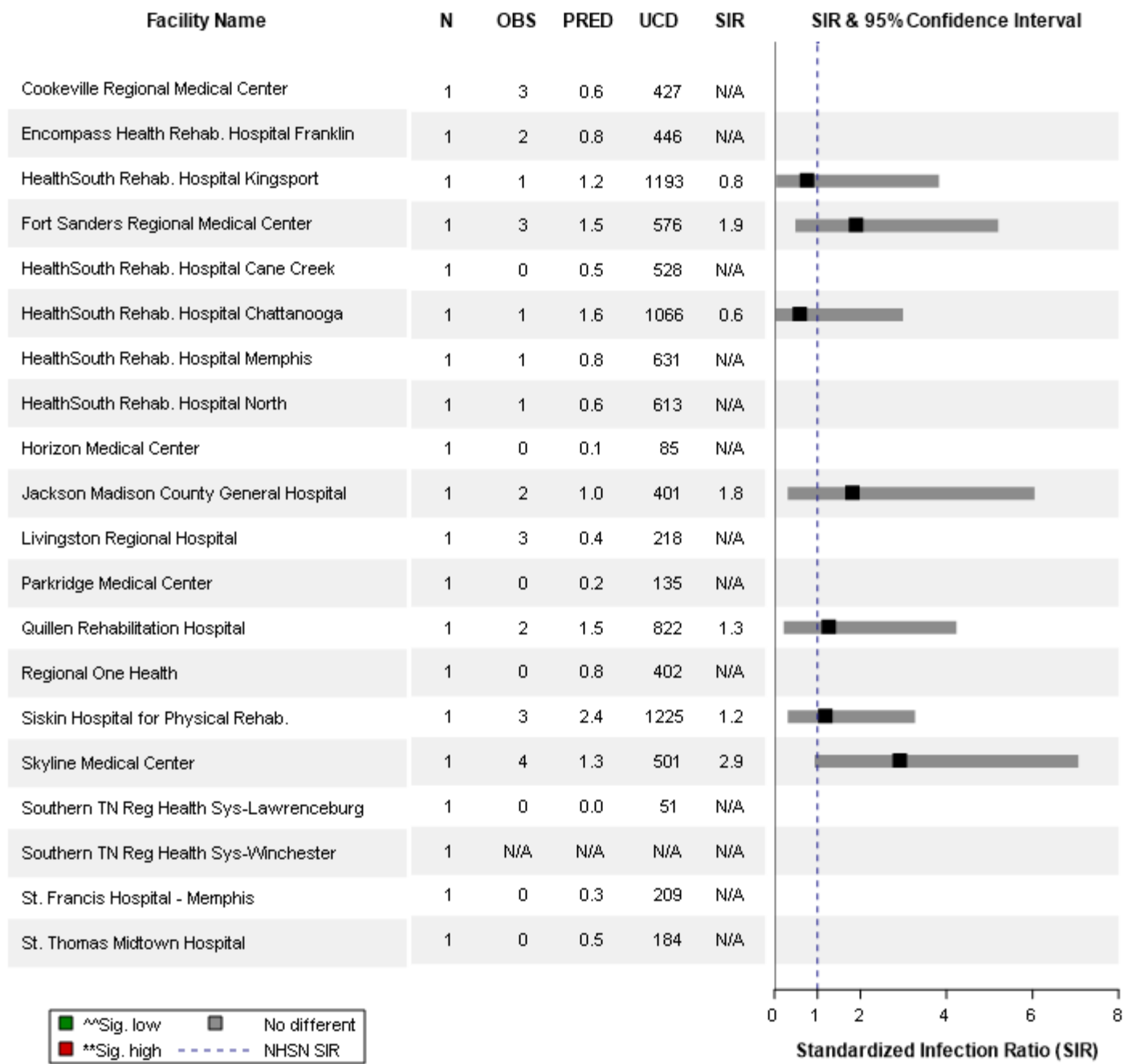
**Number of isolates=38; Number of events=35**



Data reported as of June 20, 2019

Other pathogens = Citrobacter spp., Proteus spp., Serratia spp.

**Figure 44: CAUTI Standardized Infection Ratio (SIR) for Inpatient Rehabilitation Facilities (IRF) Tennessee, 01/01/2017 – 12/31/2017**



Data Reported as of June 20, 2019

N = number of types of units reporting

OBS = observed number of CAUTI

PRED = statistically 'predicted' number of CAUTI, based on NHSN baseline data

SIR = standardized infection ratio (observed/predicted number of CAUTI)

UCD = number of urinary catheter days

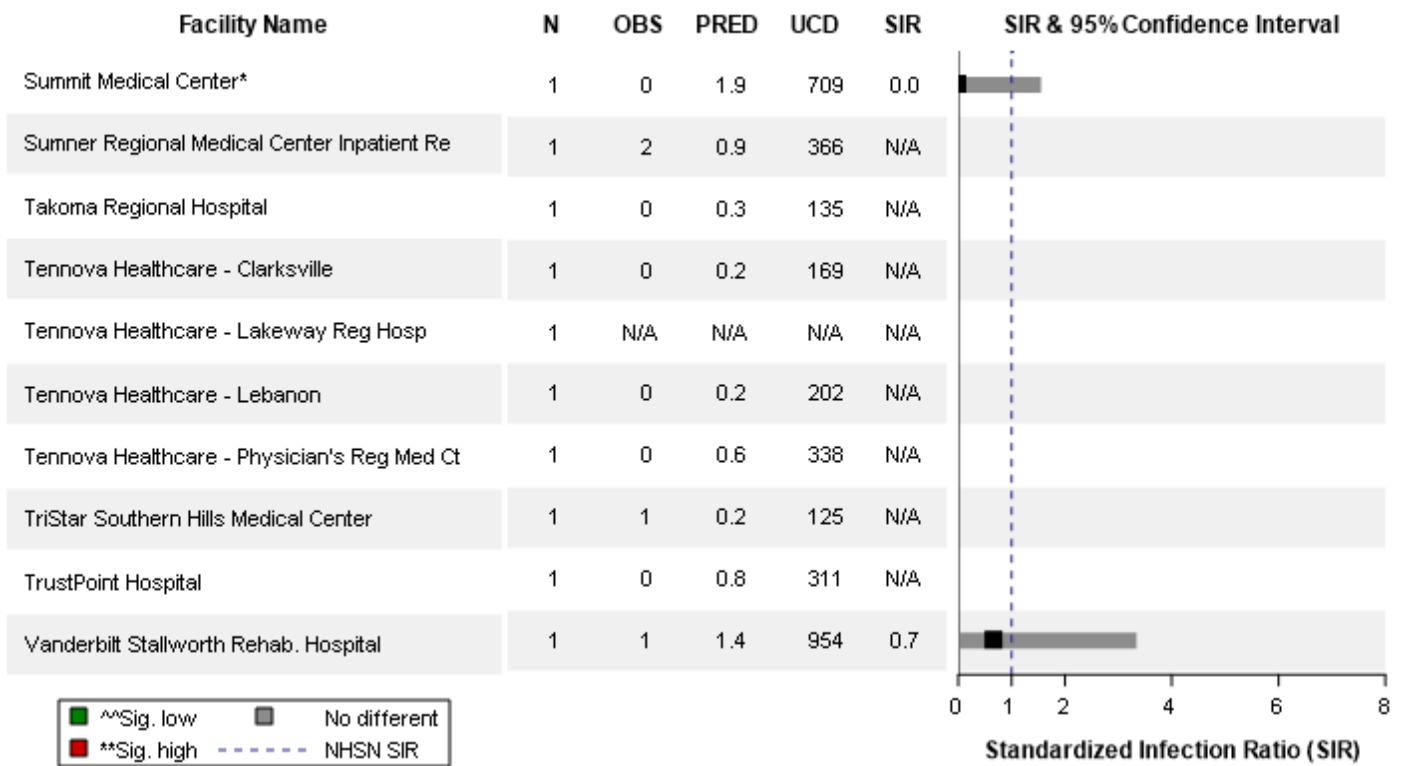
N/A = Data not shown for facilities with <50 urinary catheter days / SIR not calculated for facilities with <1 predicted infection

\*\* Significantly higher than national baseline

^^ Significantly lower than national baseline

\* Zero infections, but not statistically significant

**Figure 44 (cont'd)**



Data Reported as of June 20, 2019

N = number of types of units reporting

OBS = observed number of CAUTI

PRED = statistically 'predicted' number of CAUTI, based on NHSN baseline data

SIR = standardized infection ratio (observed/predicted number of CAUTI)

UCD = number of urinary catheter days

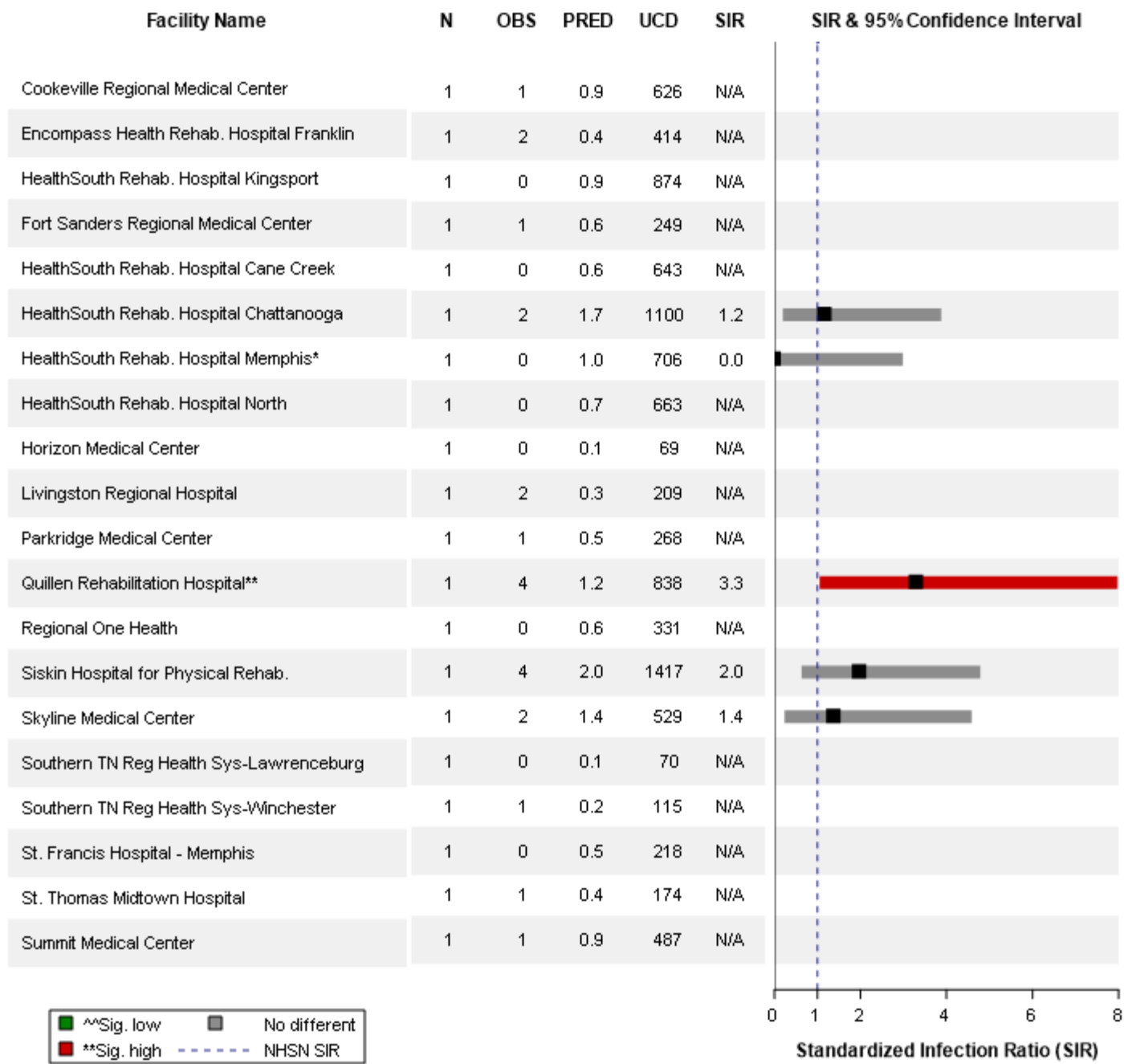
N/A = Data not shown for facilities with <50 urinary catheter days / SIR not calculated for facilities with <1 predicted infection

\*\* Significantly higher than national baseline

^ Significantly lower than national baseline

\* Zero infections, but not statistically significant

**Figure 45: CAUTI Standardized Infection Ratio (SIR) for Inpatient Rehabilitation Facilities (IRF), Tennessee, 01/01/2018 – 12/31/2018**



Data Reported as of June 20, 2019

N = number of types of units reporting

OBS = observed number of CAUTI

PRED = statistically 'predicted' number of CAUTI, based on NHSN baseline data

SIR = standardized infection ratio (observed/predicted number of CAUTI)

UCD = number of urinary catheter days

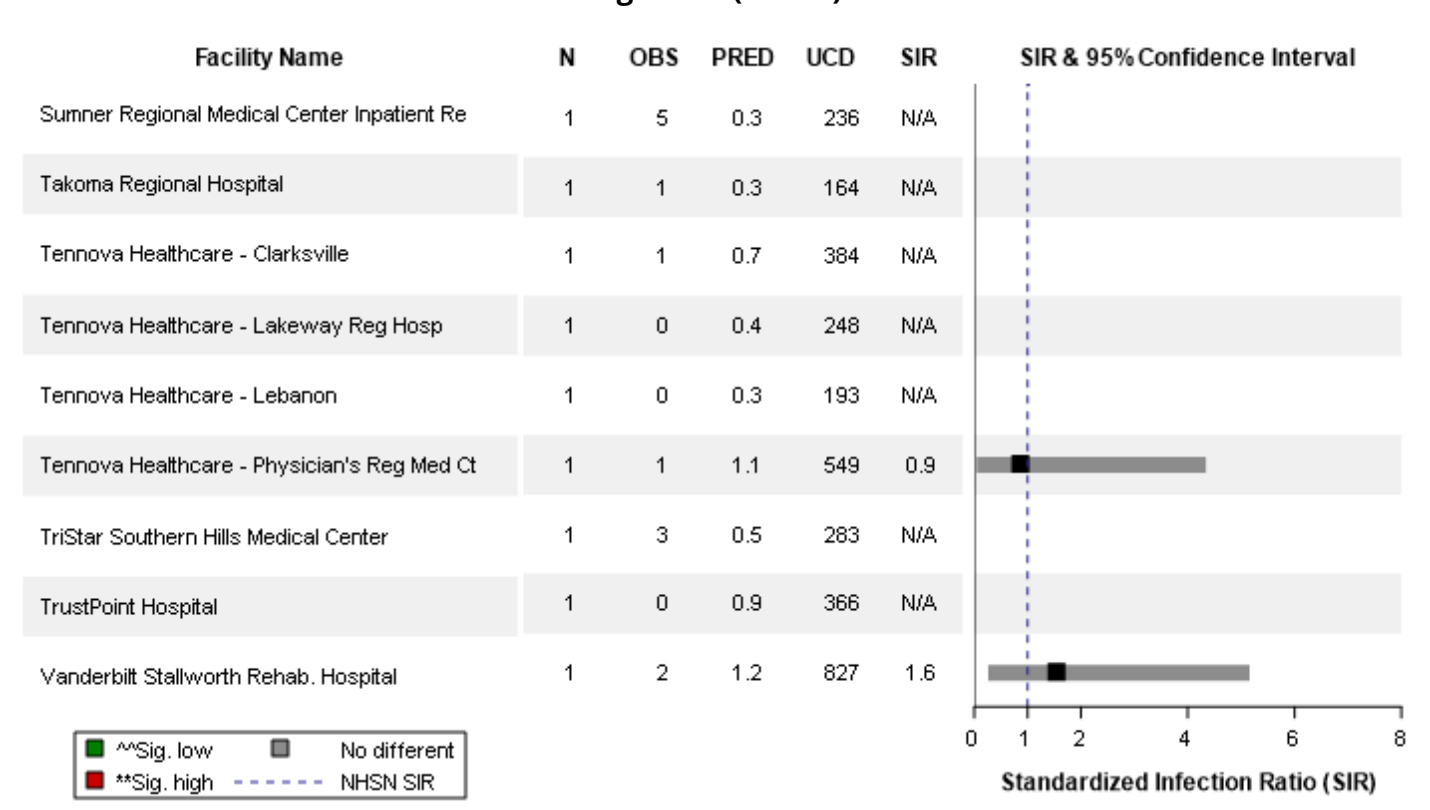
N/A = Data not shown for facilities with <50 urinary catheter days / SIR not calculated for facilities with ≤1.0 predicted infection

\*\* Significantly higher than national baseline

^^ Significantly lower than national baseline

\* Zero infections, but not statistically significant

**Figure 45 (cont'd)**



Data Reported as of June 20, 2019

N = number of types of units reporting

OBS = observed number of CAUTI

PRED = statistically 'predicted' number of CAUTI, based on NHSN baseline data

SIR = standardized infection ratio (observed/predicted number of CAUTI)

UCD = number of urinary catheter days

N/A = Data not shown for facilities with <50 urinary catheter days / SIR not calculated for facilities with ≤1.0 predicted infection

\*\* Significantly higher than national baseline

^^ Significantly lower than national baseline

\* Zero infections, but not statistically significant

# Surgical Site Infections (SSI)

## ***Surgical Site Infections (SSI)***

A surgical site infection (SSI) is an infection that occurs after surgery in the part of the body where the surgery took place. Surgical site infections can sometimes be superficial infections involving the skin only. Other surgical site infections are more serious and can involve tissues under the skin, organs, or implanted material. Healthcare facilities can prevent SSIs by following appropriate infection prevention recommendations before, during, and after surgery (see [Patient Guide to SSI](#)<sup>20</sup>).

### **Reporting Requirements**

Surgical site infections (SSI) following coronary artery bypass graft (CBGB/C) procedures have been reportable by Tennessee acute care hospitals since January 2008. SSIs following hip prosthesis procedures were reportable from July 2010 to December 2011, and SSIs following cardiac procedures were reportable from July 2011 to December 2011. SSIs following colon (COLO) procedures and those following abdominal hysterectomy (HYST) procedures have been reported since January 2012.

To comply with these reporting requirements, facilities are required to follow the [NHSN SSI Surveillance protocol](#)<sup>21</sup>, which is updated each year with SSI surveillance definitions and reporting instructions. Facilities must report each required surgical procedure that is performed every month to NHSN. They are also required to report any surgical site infections which meet the NHSN surveillance definition of a SSI following required procedures.

### **Changes to Surveillance Definitions**

In 2018, NHSN updated the “Scope” guidance for reporting a coronary artery bypass graft procedure with BOTH chest and donor incision sites (CBGB). If a procedure is assigned codes that indicate both an open approach and a scope approach, then the procedure should be entered into NHSN as Scope = NO.

<sup>20</sup> [http://www.cdc.gov/HAI/pdfs/ssi/SSI\\_tagged.pdf](http://www.cdc.gov/HAI/pdfs/ssi/SSI_tagged.pdf)

<sup>21</sup> <http://www.cdc.gov/nhsn/PDFs/pscManual/9pscSSICurrent.pdf>

## Facility-Specific Data Thresholds

When the number of surgical procedures performed is small, even a few infections will yield a numerically high infection rate. To ensure fair and accurate reporting of facility-specific SSI standardized infection ratios (SIR) TDH has adopted the NHSN minimum thresholds for reporting. To report a facility-specific SSI SIR, there must be a minimum of 20 procedures performed for the reporting period and the statistically predicted number of infections must be at least 1.0.

## SSI Risk Adjustment

For individuals undergoing surgical procedures, risk adjustment is calculated through logistic regression models which use national [NHSN baseline data from 2015](#)<sup>22</sup> to represent a standard population<sup>23</sup>. With this method, risk factors are procedure-specific and each risk factor's contribution varies according to its association with risk of SSI.

For statewide SSI data, both crude (unadjusted) rates and SIRs are presented.

**Crude (unadjusted) SSI rates** are calculated as follows:

$$\text{SSIRate} = \frac{\text{Number of SSI reported}}{\text{Number of procedures reported}} \times 100$$

For this report, SSI SIRs are generated by NHSN, and come in two forms: All SSI and Complex Admission/Readmission (Complex A/R) SIRs.

- The **All SSI SIR** includes:
  - All inpatient procedures performed
  - Superficial incisional primary, deep incisional primary, and organ/space SSIs (secondary SSIs are not included)
  - SSIs identified during admission, readmission, or post-discharge surveillance
- The **Complex A/R SIR** includes
  - Inpatient procedures
  - Deep incisional primary and organ/space SSIs
  - SSIs identified during admission or readmission to the reporting facility

<sup>22</sup> <https://www.cdc.gov/nhsn/2015rebaseline/index.html>

<sup>23</sup> Yi M, Edwards JR, et al. Improving risk-adjusted measures of surgical site information for the National Healthcare Safety Network. *Infect Control Hosp Epidemiol* 2011; 32(10):970-986.



The significant risk factors used in risk adjustment also vary between the two forms of SSI SIRs; significant risk factors for each procedure are listed below.

For coronary artery bypass graft (CBGB/C) procedures, significant risk factors include:

- Age
- BMI
- Diabetes
- Procedure duration
- Gender
- Age-gender interaction
- Hospital bed size
- Medical school affiliation
- Trauma
- ASA score (Complex A/R)
- Wound Class (Complex A/R)

For colon surgery (COLO) procedures, significant risk factors include:

- Age
- Anesthesia
- ASA score
- BMI
- Closure Technique
- Diabetes
- Procedure duration
- Endoscope
- Hospital bed size
- Trauma
- Wound class
- Medical school affiliation (All SSI SIR)
- Gender (Complex A/R)

For abdominal hysterectomy (HYST) procedures, significant risk factors include:

- Age
- ASA score
- BMI
- Diabetes
- Procedure duration
- Hospital bed size
- Endoscope
- Medical school affiliation (All SSI SIR)
- Oncology (All SSI SIR)

Below is a general logistic regression model. For each operative procedure, parameter estimates (represented by  $\beta$  in the model) have been calculated by CDC and represent each risk factor's contribution to a patient's overall risk. In this model,  $\hat{p}$  represents a patient's probability of SSI, and  $X=1$  if a given risk factor is present or  $X=0$  if the risk factor is absent.

$$\text{logit}(\hat{p}) = \alpha + \beta_1 X_1 + \beta_2 X_2 + \beta_3 X_3 + \beta_4 X_4$$

For a given NHSN operative procedure, the table below illustrates the parameter estimates for the significant risk factors associated with that procedure. Note that this table is for teaching purposes only and should not be considered an actual model for predicting a patient's risk of SSI<sup>24</sup>.

Factor	Parameter Estimate	p-value	Variable Coding
<b>Intercept</b>	-5.1801	-	-
<b>Diabetes</b>	0.3247	<0.0001	Yes=1 No=0
<b>ASA Score</b>	0.4414	<0.0001	1= 1 2= 2 3= 3 4/5= 4
<b>Body Mass Index (BMI)</b>	0.1106	0.0090	$\geq 30 = 1$ $< 30 = 0$
<b>Age</b>	-0.1501	<0.0001	Age/10
<b>Oncology Hospital</b>	0.5474	0.0005	Yes=1 No=0

<sup>24</sup> Example extracted from "NHSN: A guide to the SIR", Division of Healthcare Quality Promotion, Centers for Disease Control and Prevention, December 2018 (<https://www.cdc.gov/nhsn/pdfs/ps-analysis-resources/nhsn-sir-guide.pdf>)

Applying the parameter estimates to the above model gives the following formula:

$$\text{logit}(\hat{p}) = -5.1801 + 0.3247(DIABETES) + 0.4414(ASA) + 0.1106(BMI) - 0.1501(AGE) + 0.5474(ONCOLOGY HOSPITAL)$$

The probability of SSI for a given patient can be calculated using this formula. For example:

Patient	Age	ASA	Diabetes	BMI	Oncology Hospital
A	32	2	Y	29	Yes

$$\text{logit}(\hat{p}) = -5.1801 + 0.3247(1) + 0.4414(2) + 0.1106(0) - 0.1501(3.2) + 0.5474(1) = -3.9055$$

Solving for  $\hat{p}$  gives a probability of SSI for Patient A of 0.020, this can be interpreted as a 2.0% risk of developing an SSI.

To calculate the predicted number of infections for a population, each patient's risk of SSI is generated using the appropriate logistic regression model, and summed<sup>25</sup>.

<sup>25</sup> Yi M, Edwards JR, et al. Improving risk-adjusted measures of surgical site information for the National Healthcare Safety Network. *Infect Control Hosp Epidemiol* 2011; 32(10):970-986.

# **Surgical Site Infections (SSI)**

## ***Coronary Artery Bypass Graft Procedures***

## SSIs Related to Coronary Artery Bypass Graft (CBGB/C) Procedures

**Total number of facilities reporting from January-December 2017: 29**

**Total number of facilities reporting from January-December 2018: 28**

### **SIRs by Quarter (Figure 46, Figure 47, Figure 48)**

- From January-March 2017 to July-September 2017, the All SSI SIR increased from 0.81 to 1.28 and then decreased to 0.84 during the fourth quarter. The Complex Admission/Readmission SSI SIR fluctuated from 0.65 in January-March 2017 to 0.86 in October-December 2017. The U.S. Department of Health and Human Services' [National Action Plan to Prevent Healthcare-Associated Infections](#)<sup>26</sup> gives a five-year (2020) prevention target of SIR = 0.70.
- From January-March 2018 to October-December 2018, the All SSI SIR decreased from a 1.18 to 0.74. The Complex Admission/Readmission SSI SIR increased from a low of 0.70 from January-March 2018 to 1.05 in October-December 2018 related to CBGB/C procedures in Tennessee.

### **Rates, Infection Sites, and Detection (Figure 49, Figure 50, Figure 51, Figure 52)**

- In 2017, 122 SSIs were reported among 6,861 CBGB/C procedures in Tennessee, for a crude rate of 1.78 infections per 100 operations. Overall, SSIs related to CBGB/C procedures were most often superficial primary (34%), and SSIs related to CBGB/C procedures were least often deep secondary infections (1%). SSIs related to CBGB/C procedures were most often identified upon readmission (66%).
- In 2018, 134 SSIs were reported among 6,618 CBGB/C procedures in Tennessee, for a crude rate of 2.02 infections per 100 operations. Overall, SSIs related to CBGB/C procedures were most often superficial primary (39%), and SSIs related to CBGB/C procedures were least often deep secondary infections (3%). SSIs related to CBGB/C procedures were most often identified upon readmission (53%).

### **Key Percentiles for Tennessee SIRs (Table 39, Table 40)**

- The All SSI SIR for SSIs related to CBGB/C procedures in Tennessee from January-December 2017 was not statistically significantly different than the national SIR of 1 (SIR=0.99; 95% CI: 0.81, 1.20). The All SSI SIR for CBGB/C from January-December 2018 was higher than the SIR for

<sup>26</sup> <http://www.hhs.gov/ash/initiatives/hai/actionplan/>

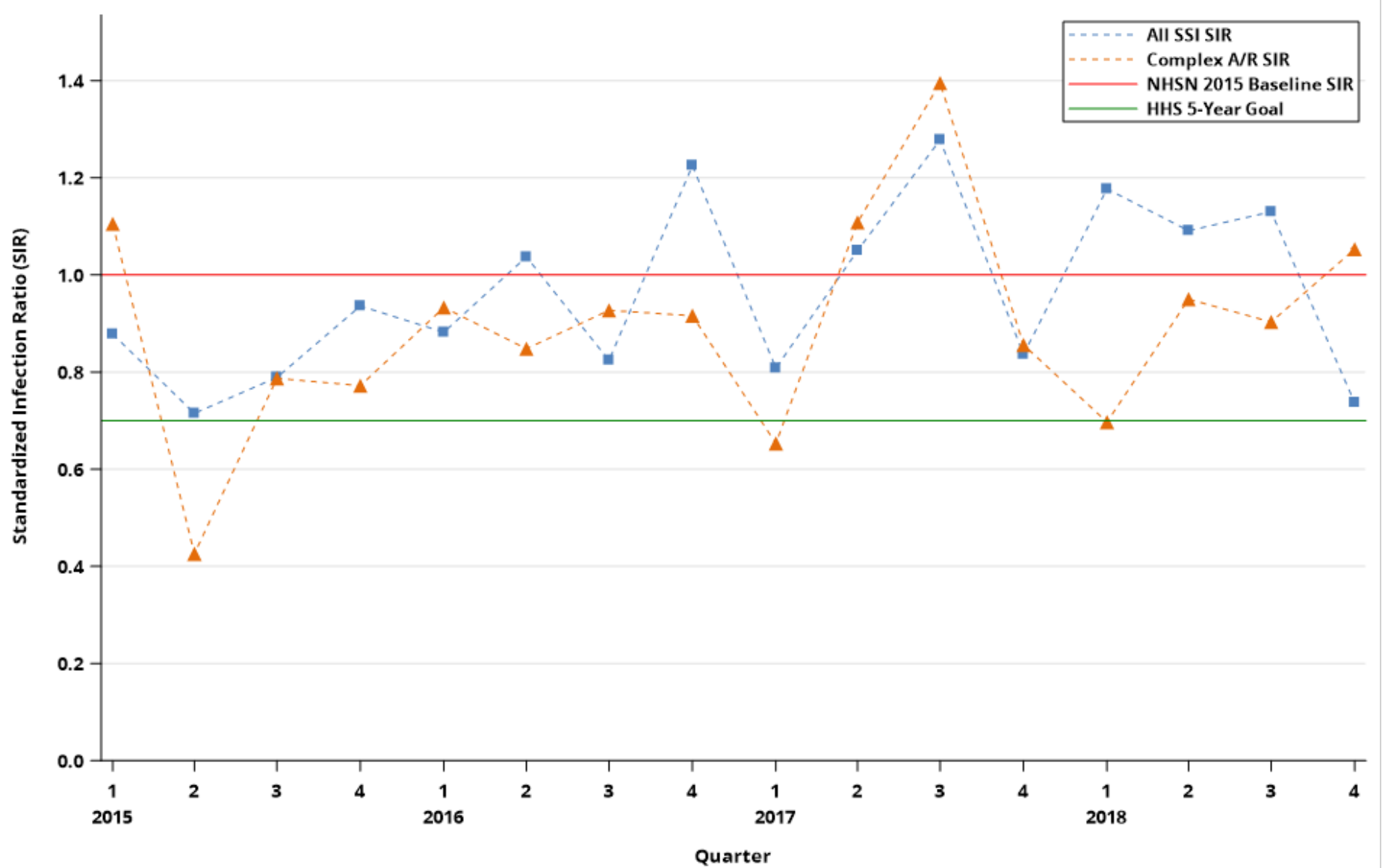
2015, but was still not statistically significantly different than the national baseline (SIR=1.04; 95% CI: 0.85, 1.25).

- From January-December 2017, the median All SSI SIR for CBGB/C procedures was 0.73, indicating that half of reporting facilities with at least 1 predicted infection had an All SSI SIR at or below 0.73. From January-December 2018, the median All SSI SIR for CBGB/C procedures was 0.71.
- The Complex A/R SIRs for SSIs related to CBGB/C procedures in Tennessee from January-December 2017 (SIR=1.00, 95%CI: 0.76, 1.30) and January-December 2018 (SIR=0.90, 95%CI: 0.67, 1.19) were not significantly different than the national SIR of 1.
- From January-December 2017, the median Complex A/R SIR for CBGB/C procedures was 0.60, indicating that half of reporting facilities with at least 1 predicted infection had an All SSI SIR at or below 0.60. From January-December 2018, the median Complex A/R SIR for CBGB/C procedures was 0.40.

#### ***Microorganisms associated with SSIs following CBGB/C Procedures (Table 41,-Table 42)***

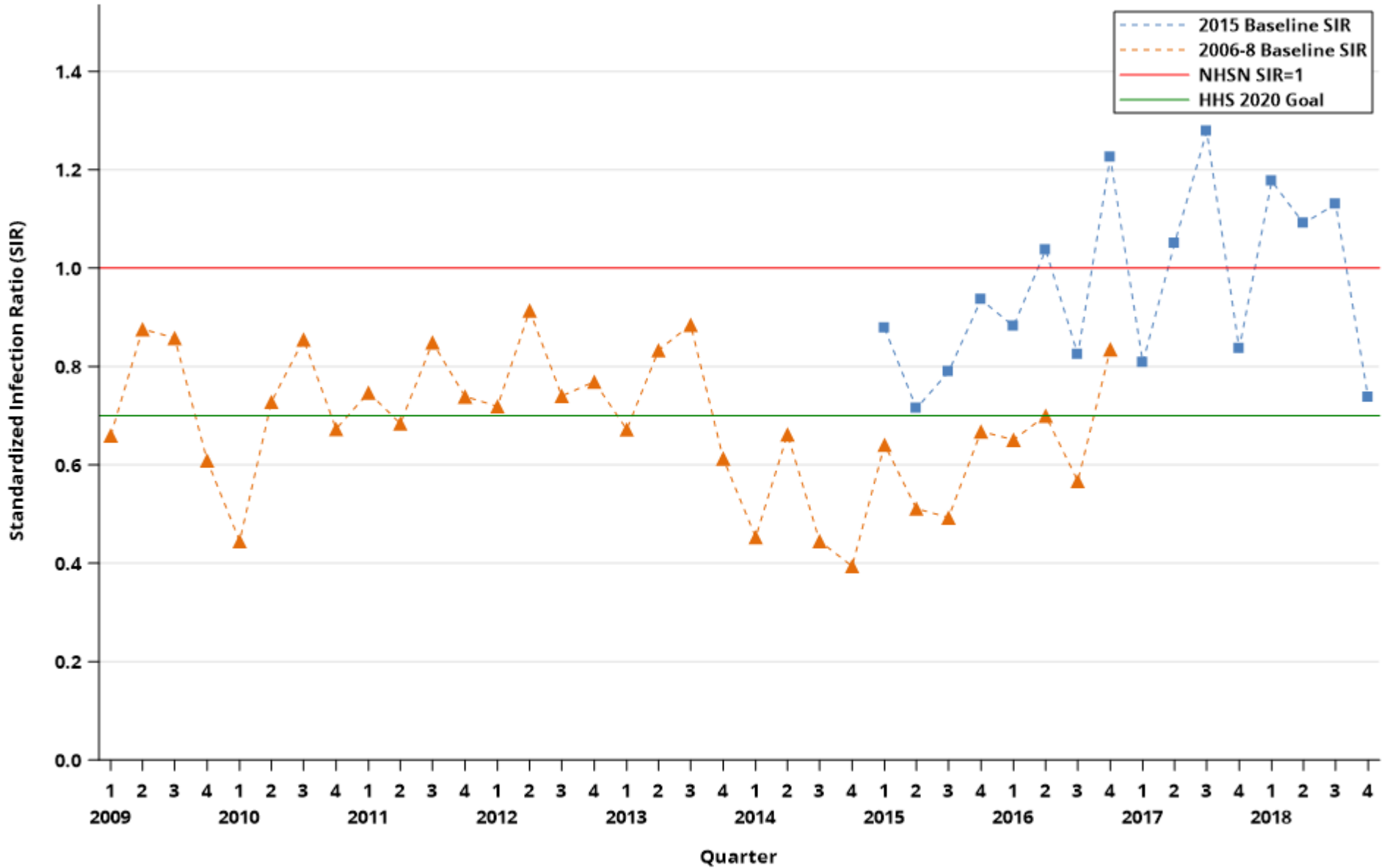
- Among the 128 pathogens isolated from 122 SSIs following CBGB/C procedures in 2017, the most common pathogens were *Staphylococcus aureus* (28%), and coagulase-negative *Staphylococcus* species (19%). Methicillin-resistant *Staphylococcus aureus* (MRSA) accounted for 13% of total positive isolates.
- Among the 147 pathogens isolated from 134 SSIs following CBGB/C procedures in 2018, the most common pathogens were *Staphylococcus aureus* (24%), coagulase-negative *Staphylococcus* species (11%), *Klebsiella* species (11%) and *Pseudomonas aeruginosa* (10%). Methicillin-resistant *Staphylococcus aureus* (MRSA) accounted for 12% and vancomycin-resistant *Enterococcus* (VRE) accounted for 1% of total positive isolates.

Figure 46: Coronary Artery Bypass Graft (CBGB/C) All and Complex Admission/Readmission Surgical Site Infection (SSI) Standardized Infection Ratios (SIRs) by Quarter, Tennessee, 01/01/2015–12/31/2018 [Reference standard: National Healthcare Safety Network (NHSN), 2015]



Data Reported as of June 20, 2019

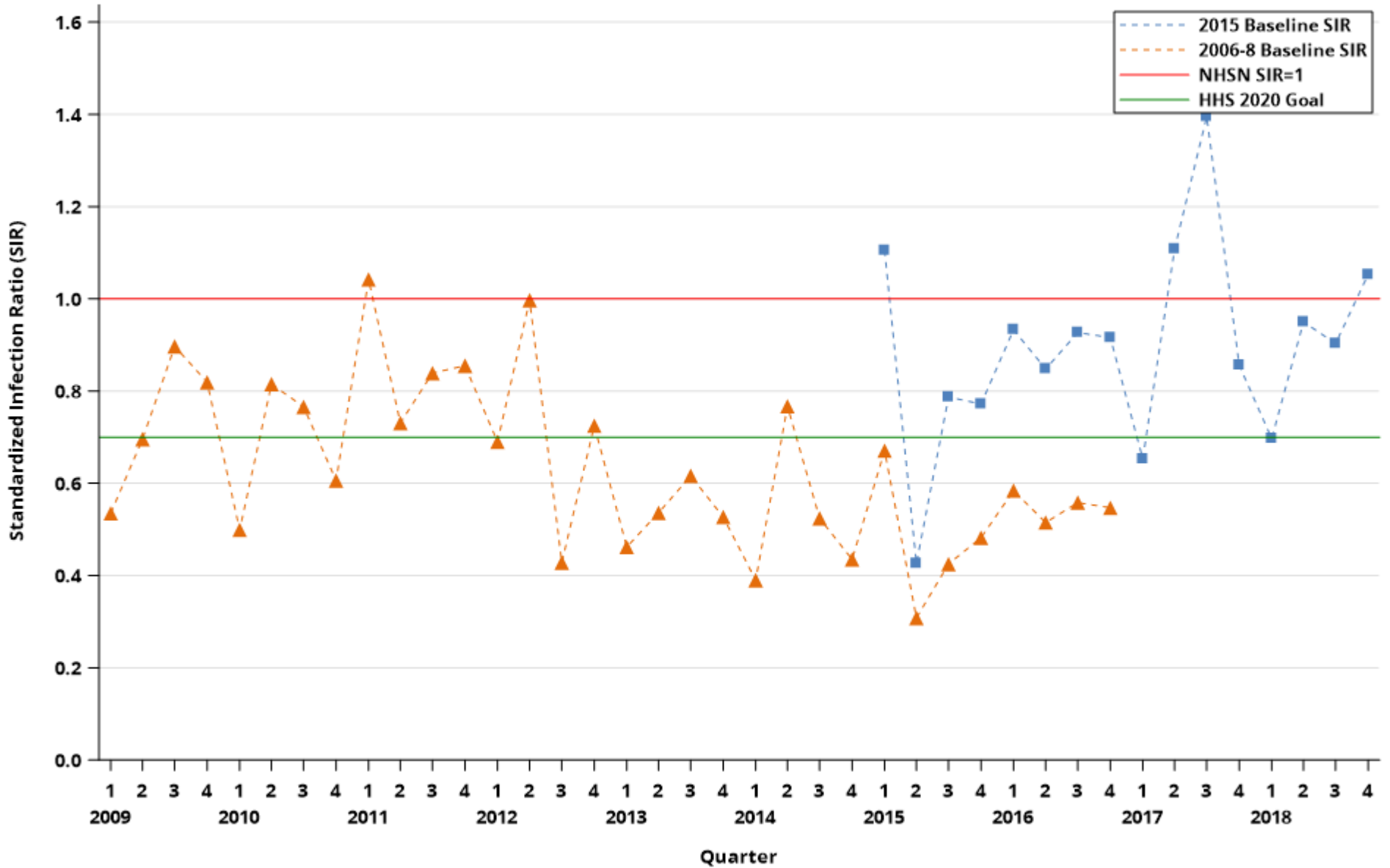
Figure 47: Coronary Artery Bypass Graft (CBGB/C) All Surgical Site Infection (SSI) Standardized Infection Ratio (SIR) by Quarter, Tennessee, 01/01/2009–12/31/2018



Data Reported as of June 20, 2019



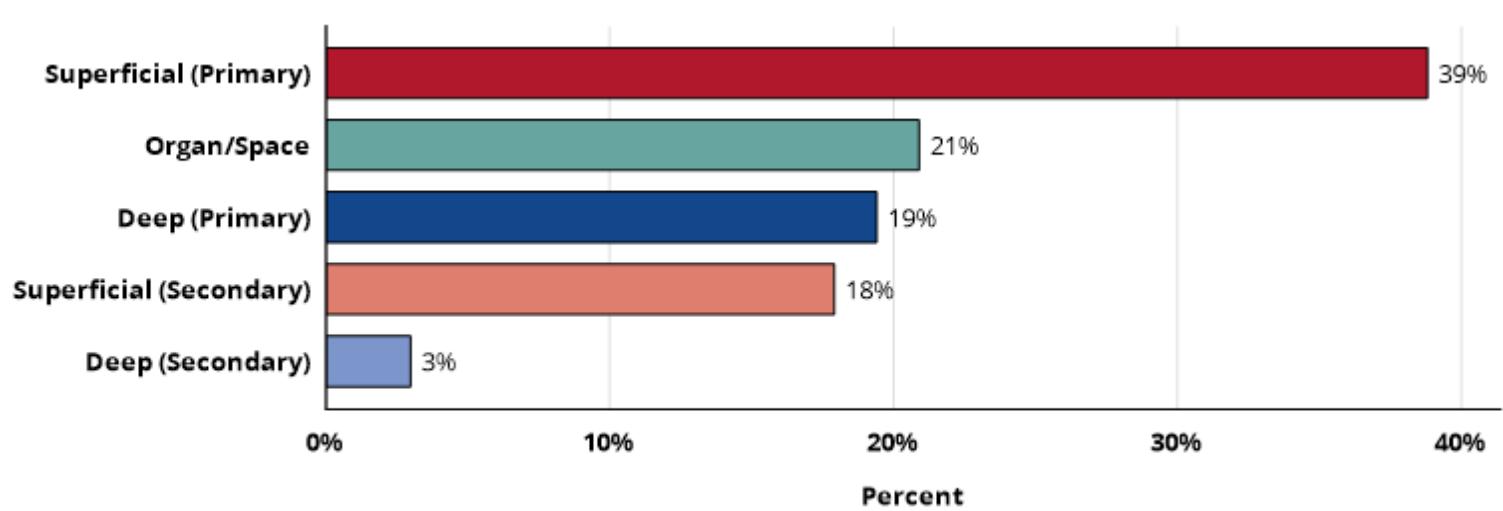
Figure 48: Coronary Artery Bypass Graft (CBGB/C) Complex Admission/Readmission Surgical Site Infection (SSI) Standardized Infection Ratio (SIR) by Quarter, Tennessee, 01/01/2009–12/31/2018



Data Reported as of June 20, 2019

Figure 49: Coronary Artery Bypass Graft (CBGB/C) Surgical Site Infections by Site, Tennessee, 01/01/2018-12/31/2018

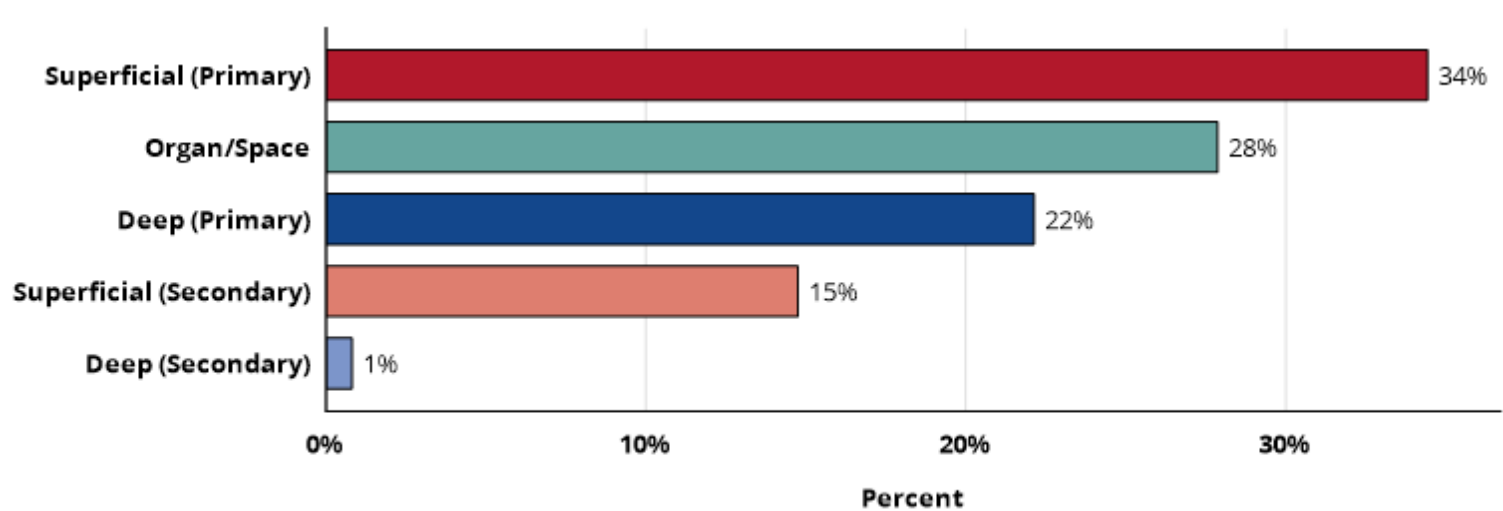
Number of Events= 134



Data Reported as of June 20, 2019

Figure 50: Coronary Artery Bypass Graft (CBGB/C) Surgical Site Infections by Site, Tennessee, 01/01/2017-12/31/2017

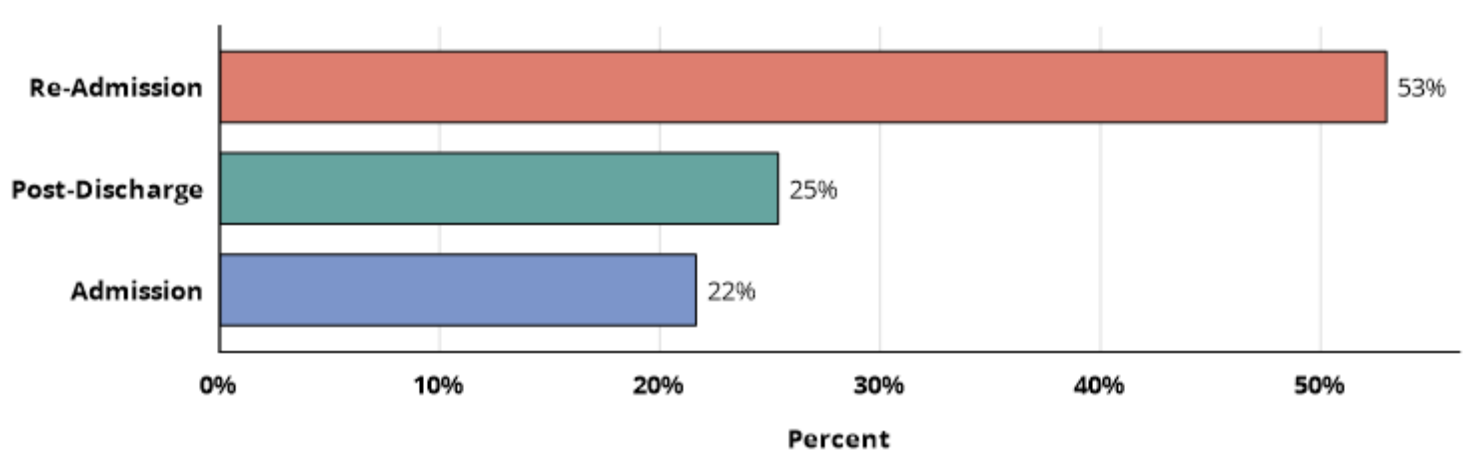
Number of Events= 122



Data Reported as of June 20, 2019

Figure 51: Coronary Artery Bypass Graft (CBGB/C) Surgical Site Infections Detection, Tennessee, 01/01/2018-12/31/2018

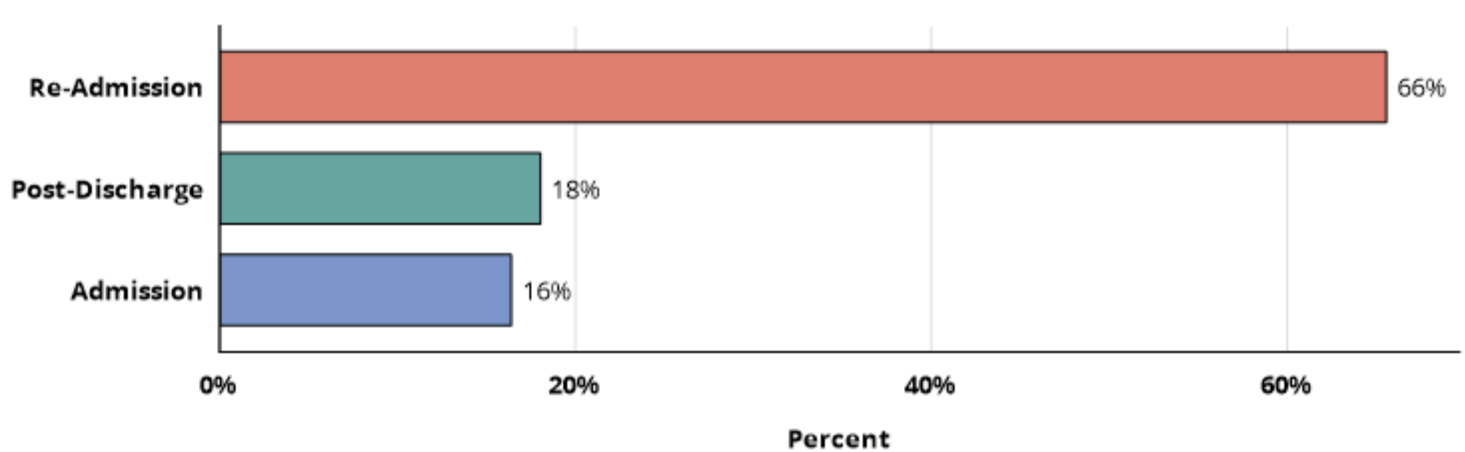
Number of Events= 134



Data Reported as of June 20, 2019

Figure 52: Coronary Artery Bypass Graft (CBGB/C) Surgical Site Infections Detection, Tennessee, 01/01/2017-12/31/2017

Number of Events= 122



Data Reported as of June 20, 2019

**Table 39: Crude (Unadjusted) Rate of Coronary Artery Bypass Graft (CBGB/C) Surgical Site Infection (SSI) by Year, Tennessee, 01/01/2017 - 12/31/2018**

STATE	YEAR	No. of facilities	No. of procedures	No. of SSI	TN Rate*
Tennessee	2018	22	6,618	134	<b>2.02</b>
	2017	23	6,861	122	<b>1.78</b>

Data reported as of June 20, 2019

No. of facilities which performed at least one procedure during the reporting period\*per 100 procedures

**Table 40: Coronary Artery Bypass Graft (CBGB/C) All and Complex Admission/Readmission (AR) Surgical Site Infection (SSI) Standardized Infection Ratios (SIRs) by Reporting Year, Tennessee, 01/01/2017 - 12/31/2018**

										DISTRIBUTION OF FACILITY-SPECIFIC SIRs									
					No. of INFECTIONS		SIR AND 95% CONFIDENCE INTERVAL			No. of FACS WITH ≥1 PRED INFECTION		No. of FACS WITH SIR <1.0		No. of FACS WITH SIR >1.0					
STATE	SIR TYPE	YEAR	No.	PROCS	OBS	PRED	SIR	LOWER LIMIT	UPPER LIMIT		N	%	N	%	10%	25%	50%	75%	90%
Tennessee	All Procedures	2018	28	6,598	105	101.21	1.04	0.85	1.25	21	1	5%	2	10%	0.37	0.47	0.71	0.85	2.09
		2017	29	6,848	103	104.04	0.99	0.81	1.20	22	1	5%	1	5%	0.00	0.45	0.73	1.36	1.87
	Complex A/R	2018	28	6,598	46	51.18	0.90	0.67	1.19	17	0	0%	1	6%	0.00	0.22	0.40	0.96	1.75
		2017	29	6,848	53	53.08	1.00	0.76	1.30	19	0	0%	1	5%	0.00	0.00	0.60	1.23	2.70

Data reported as of June 20, 2019

No. = number of facilities reporting; PROCS = number of procedures; OBS = observed number of SSI

PRED = statistically 'predicted' number of SSI; SIR = Standardized Infection Ratio (observed/predicted number of SSI)

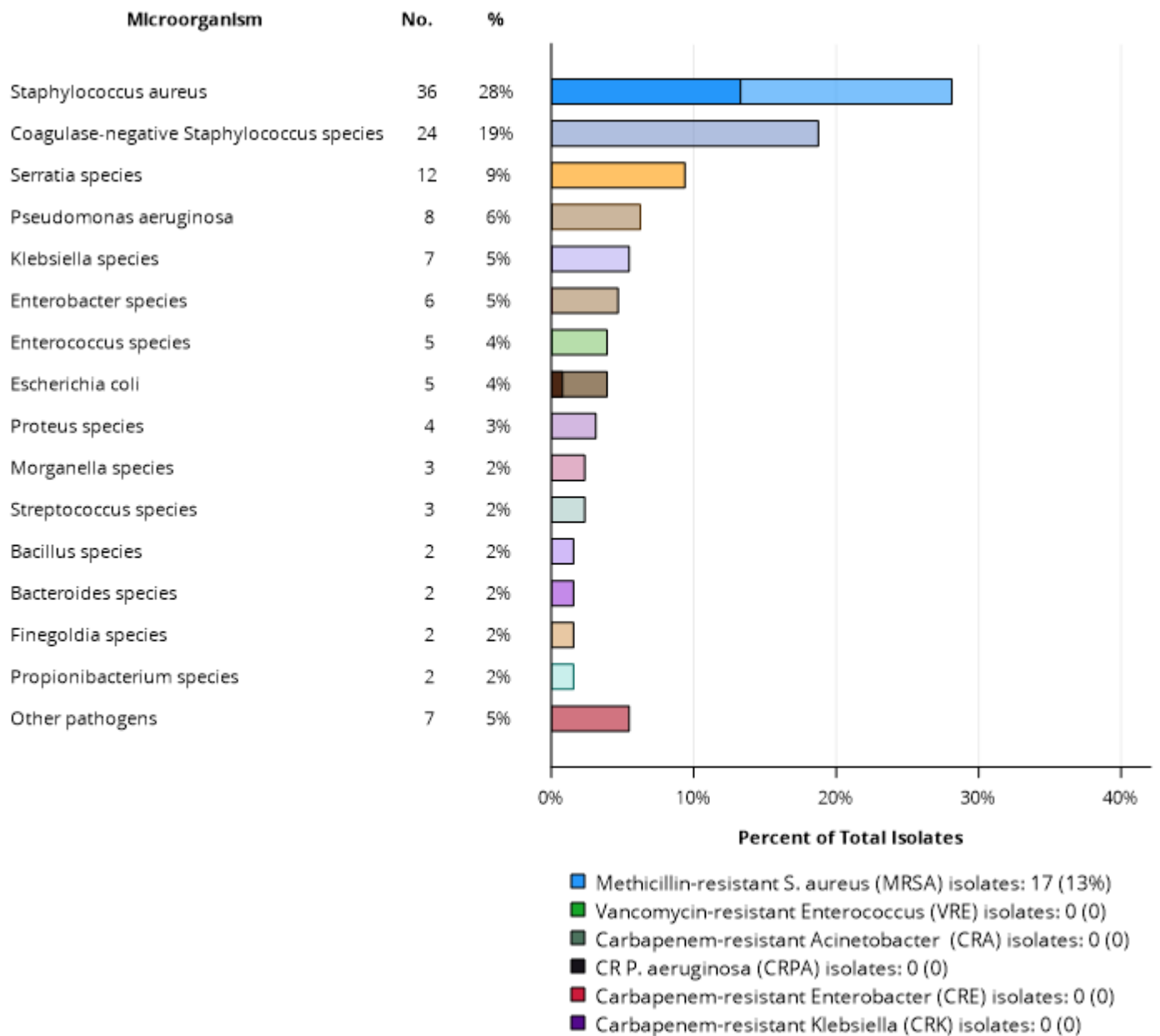
Key percentiles include facilities with at least one predicted infection

Red highlighting indicates SIR for reporting period is significantly higher than 2015 national SIR of 1.0

Green highlighting indicates SIR for reporting period is significantly lower than 2015 national SIR of 1.0

**Table 41: Microorganisms Identified from Surgical Site Infections (SSI) following Coronary Artery Bypass Graft (CBGB/C) Procedures, Tennessee, 01/01/2017 - 12/31/2017**

**Number of isolates=128; Number of events=122**

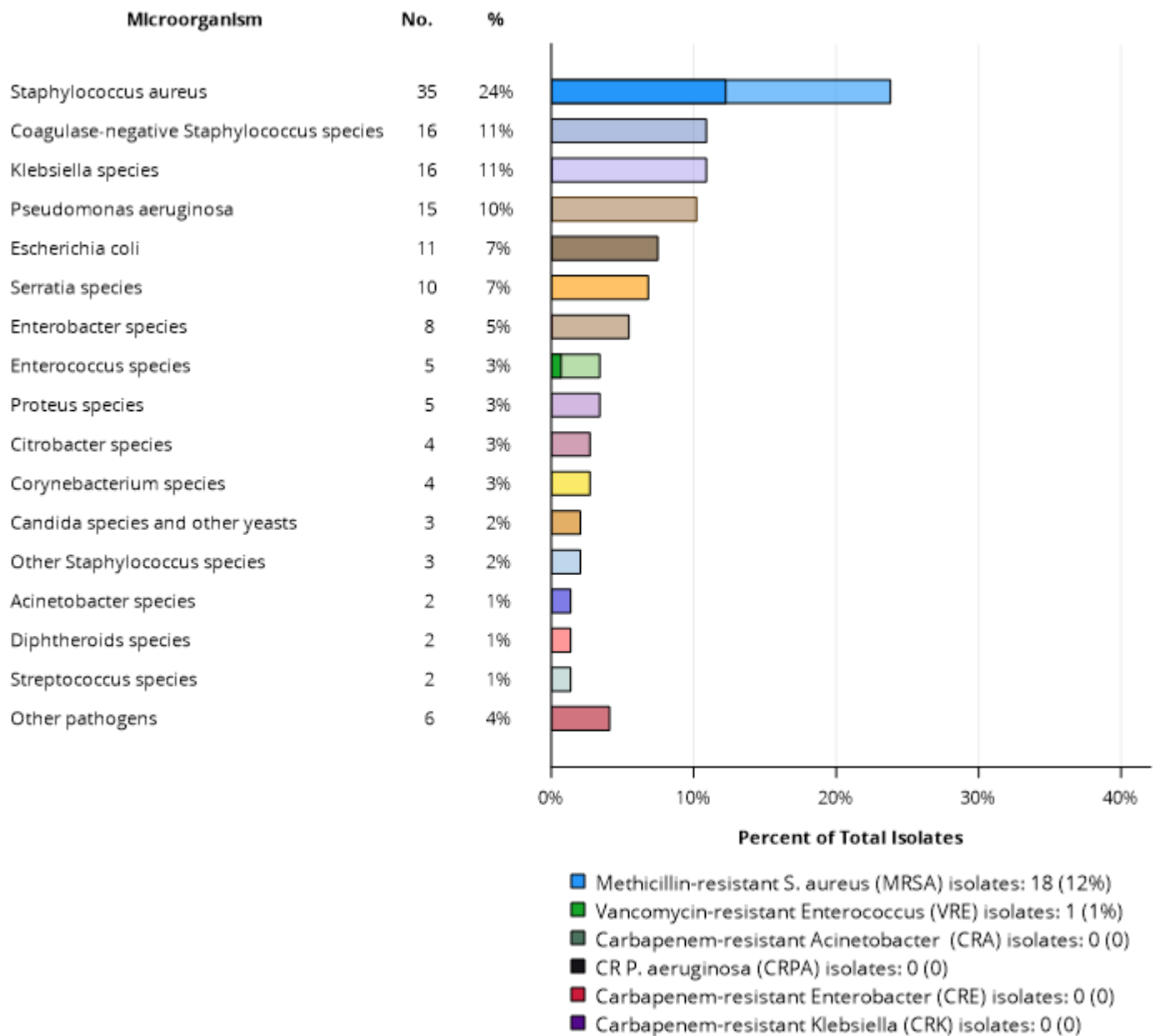


Data reported as of June 20, 2019

Other pathogens = *Candida* spp., *Corynebacterium* spp., Diphtheroids spp., *Hafnia* spp., *Neisseria* spp., *Peptoniphilus* spp., *Prevotella* spp.,

**Table 42: Microorganisms Identified from Surgical Site Infections (SSI) following Coronary Artery Bypass Graft (CBGB/C) Procedures, Tennessee, 01/01/2018 - 12/31/2018**

**Number of isolates=147; Number of events=134**



Data reported as of June 20, 2019

Other pathogens = Aerobic spp., Gram-positive spp., Morganella spp., Mycobacterium spp., Peptostreptococcus spp., Propionibacterium spp.,

# Surgical Site Infections (SSI)

## *Colon Procedures*

## SSIs Related to Colon (COLO) Procedures:

**Total number of facilities reporting from January-December 2017: 99**

**Total number of facilities reporting from January-December 2018: 99**

### **SIRs by Quarter (Figure 53, Figure 54, Figure 55)**

- From January-March 2017 to October-December 2017, the All SSI SIR decreased from 0.93 to 0.71. The Complex Admission/Readmission SSI SIR decreased from 0.87 in January-March 2017 to 0.77 in October-December 2017. The U.S. Department of Health and Human Services' [National Action Plan to Prevent Healthcare-Associated Infections](#)<sup>27</sup> gives a five-year (2020) prevention target of SIR = 0.70.
- From January-March 2018 to July-September 2018, the All SSI SIR increased from a low of 0.68 to 0.82 and then decreased to 0.67 during the fourth quarter. The Complex Admission/Readmission SSI SIR increased from a low of 0.67 from January-March 2018 to 0.91 in July-September 2018 and then decreased to 0.77 during October-December.

### **Rates, Infection Sites, and Detection (Figure 56, Figure 57, Figure 58, Figure 59, Table 43)**

- In 2017, 429 SSIs were reported among 8,556 colon procedures in Tennessee, for a crude rate of 5.01 infections per 100 procedures. Overall, SSIs related to colon procedures were most often organ/space (47%), and superficial primary (40%). SSIs related to colon procedures were least often deep primary infections (13%). SSIs related to colon procedures were most often identified during the same hospital admission as the procedure (51%).
- In 2018, 446 SSIs were reported among 8,991 colon procedures in Tennessee, for a crude rate of 4.96 infections per 100 procedures. Overall, SSIs related to colon procedures were most often organ/space (56%), and superficial primary (33%). SSIs were least often deep primary infections (10%). SSIs related to colon procedures were most often identified during the same hospital admission as the procedure (58%).

<sup>27</sup> <http://www.hhs.gov/ash/initiatives/hai/actionplan/>



### **Key percentiles for Tennessee SIRs (Table 44)**

- The All SSI SIR for SSIs related to COLO procedures in Tennessee from January-December 2017 was statistically significantly lower than the 2015 national SIR of 1 (SIR=0.80; 95% CI: 0.72, 0.89). The All SSI SIR from January-December 2018 was statistically significantly lower than the 2015 national SIR of 1 (SIR=0.72; 95% CI: 0.65, 0.80).
- From January-December 2017, the median All SSI SIR for COLO procedures was 0.61, indicating that half of reporting facilities with at least 1 predicted infection had an All SSI SIR at or below 0.61. From January-December 2018, the median All SSI SIR for COLO procedures was 0.70.
- The Complex A/R SIR for SSIs related to COLO procedures in Tennessee from January-December 2017 was statistically significantly lower from the 2015 national SIR of 1 (SIR=0.83; 95% CI: 0.72, 0.96). The Complex A/R SIR for SSIs related to COLO procedures in Tennessee from January-December 2018 was statistically significantly lower than the 2015 national SIR of 1 (SIR=0.79; 95% CI: 0.68, 0.91).
- From January-December 2017, the median Complex A/R SIR for COLO procedures was 0.81, indicating that half of reporting facilities with at least 1 predicted infection had a Complex A/R SIR at or below 0.81. From January-December 2018, the median Complex A/R SIR for COLO procedures was 0.67.

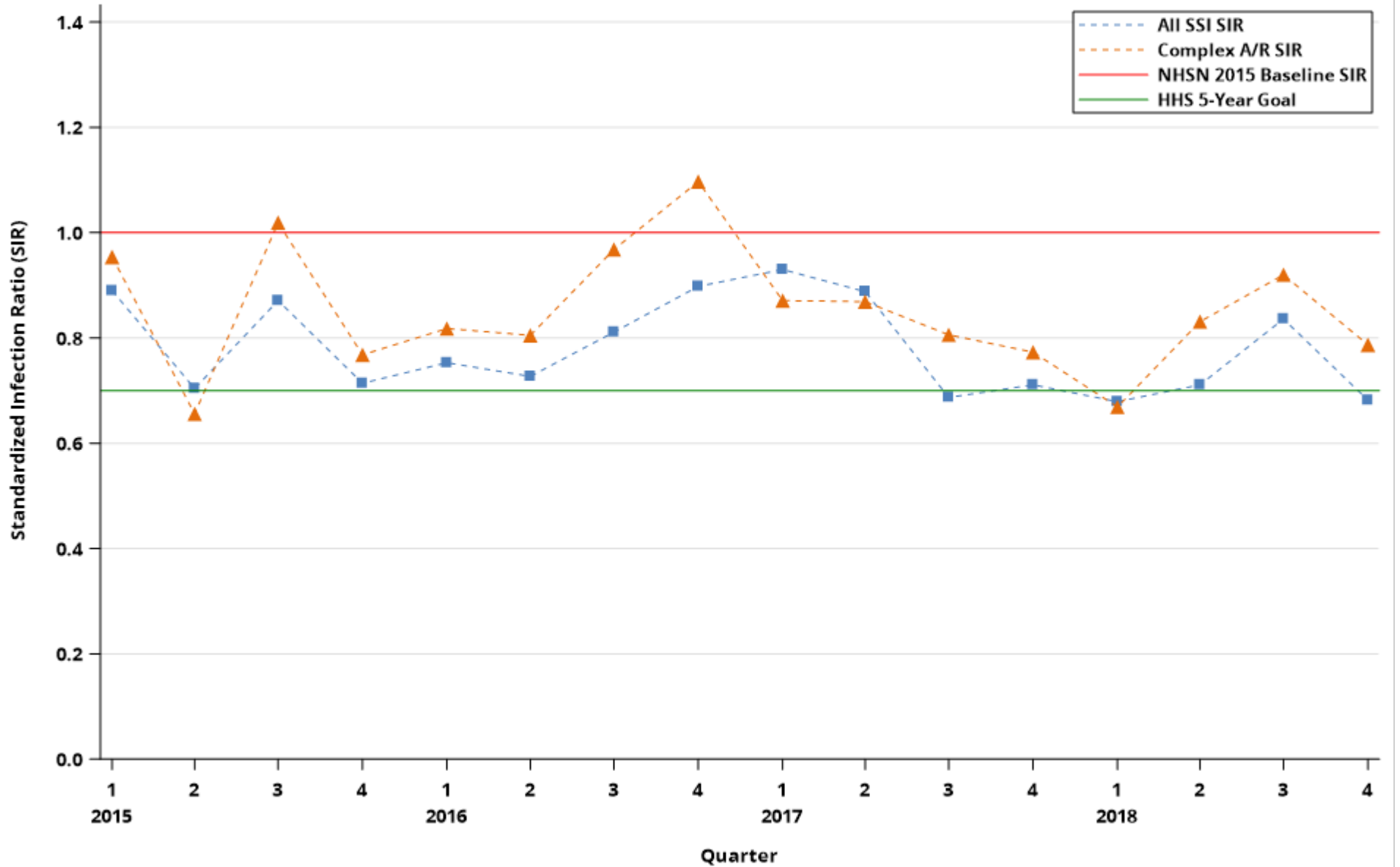
### **Microorganisms associated with SSIs following Colon Procedures (Table 45, Table 46)**

- Among the 537 pathogens isolated from 429 SSIs following colon procedures in 2017, the most common pathogens were *Escherichia coli* (22%), and Enterococcus species (20%). Methicillin-resistant *Staphylococcus aureus* (MRSA) accounted for 4% and vancomycin-resistant *Enterococcus* (VRE) for 4% of total isolates.
- Among the 568 pathogens isolated from 446 SSIs following colon procedures in 2018, the most common pathogens were *Escherichia coli* (23%), and Enterococcus species (19%). Methicillin-resistant *Staphylococcus aureus* (MRSA) accounted for 4% and vancomycin-resistant *Enterococcus* (VRE) for 4% of total isolates.

**Facility-Specific SIRs (Figure 60, Figure 61)**

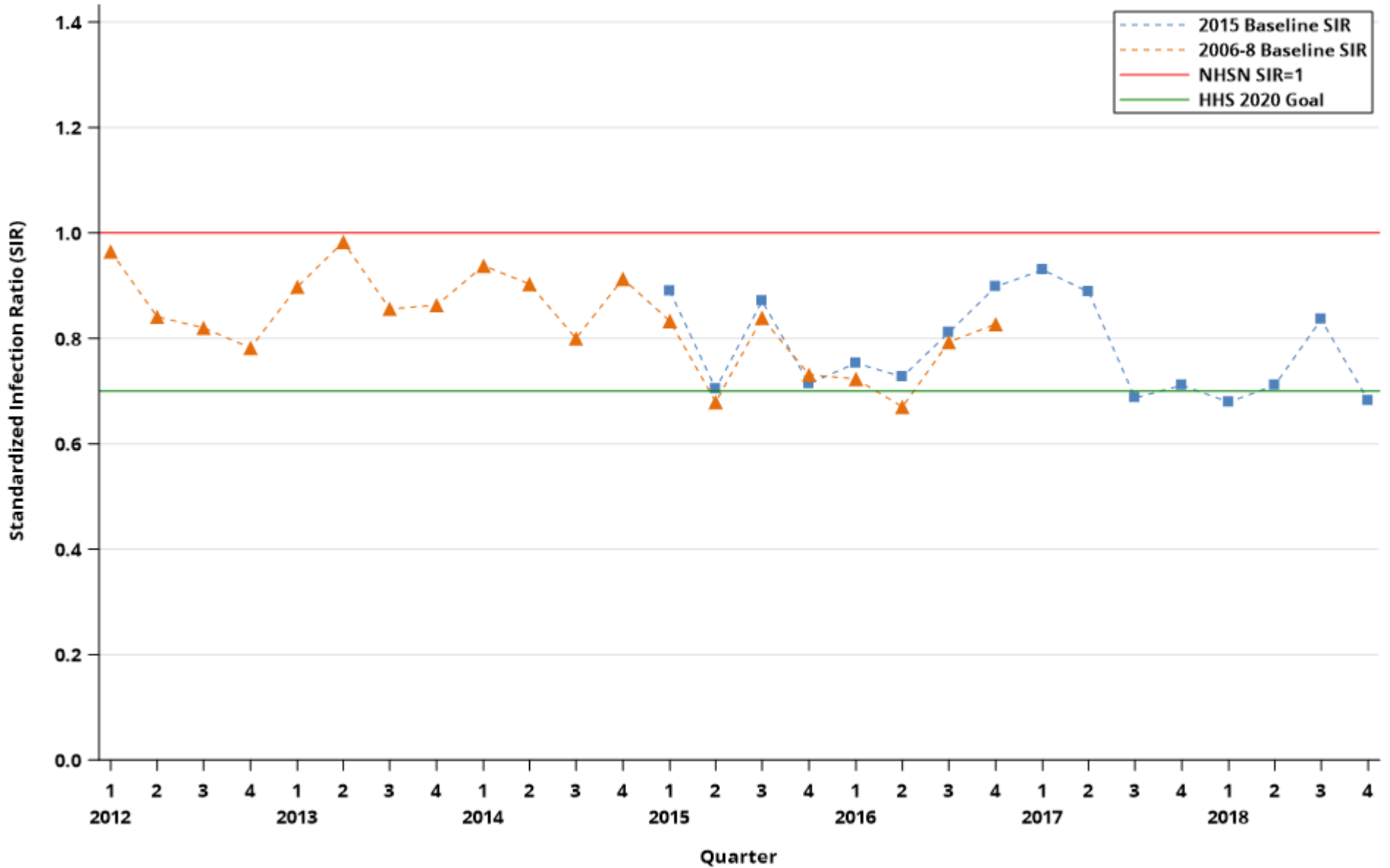
- The Complex A/R SIR for SSIs related to COLO procedures that accounts for all qualifying colon procedures performed at a given facility from January-December 2017 and January-December 2018 are displayed in [Figure 60](#), [Figure 61](#). The bar representing the confidence interval is green if the Complex A/R SIR for SSIs related to COLO procedures was significantly lower than the national SIR of 1 for 2015 and red if the SIR was significantly higher than 1. Some hospitals reported zero SSIs (indicated with an asterisk), although the facility's SIR may not be statistically significant due to a relatively small number of procedures performed.
- In 2017, 4 facilities had a Complex A/R SIR for SSIs related to colon procedures that was statistically significantly lower than the 2015 national baseline SIR of 1. Two facilities had a Complex A/R SIR that was statistically higher than the baseline SIR. In 2018, five facilities had a Complex A/R SIR for SSIs that was statistically significantly lower than the 2015 national baseline SIR of 1. Two facilities had a Complex A/R SIR that was statistically higher than the baseline SIR.

Figure 53: Colon Surgery (COLO) All and Complex Admission/Readmission Surgical Site Infection (SSI) Standardized Infection Ratios (SIRs) by Quarter, Tennessee, 01/01/2015–12/31/2018 [Reference standard: National Healthcare Safety Network (NHSN), 2015]



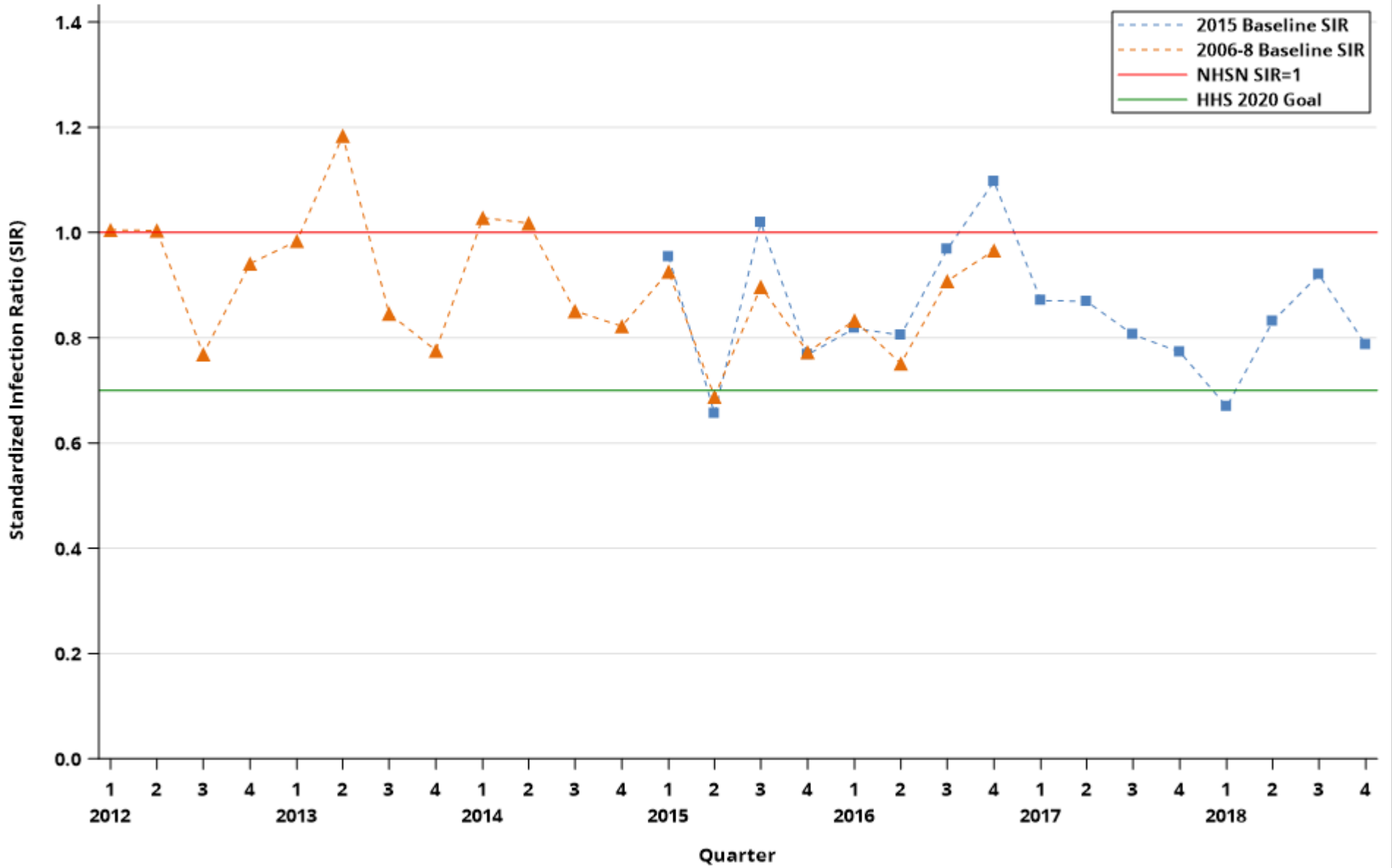
Data Reported as of June 20, 2019

Figure 54: Colon Surgery (COLO) All Surgical Site Infection (SSI) Standardized Infection Ratio (SIR) by Quarter, Tennessee, 01/01/2012–12/31/2018



Data Reported as of June 20, 2019

Figure 55: Colon Surgery (COLO) Complex Admission/Readmission Surgical Site Infection (SSI) Standardized Infection Ratio (SIR) by Quarter, Tennessee, 01/01/2012–12/31/2018



Data Reported as of June 20, 2019

Figure 56: Colon Surgery (COLO) Surgical Site Infections by Site, Tennessee, 01/01/2018–12/31/2018

Number of Events= 446

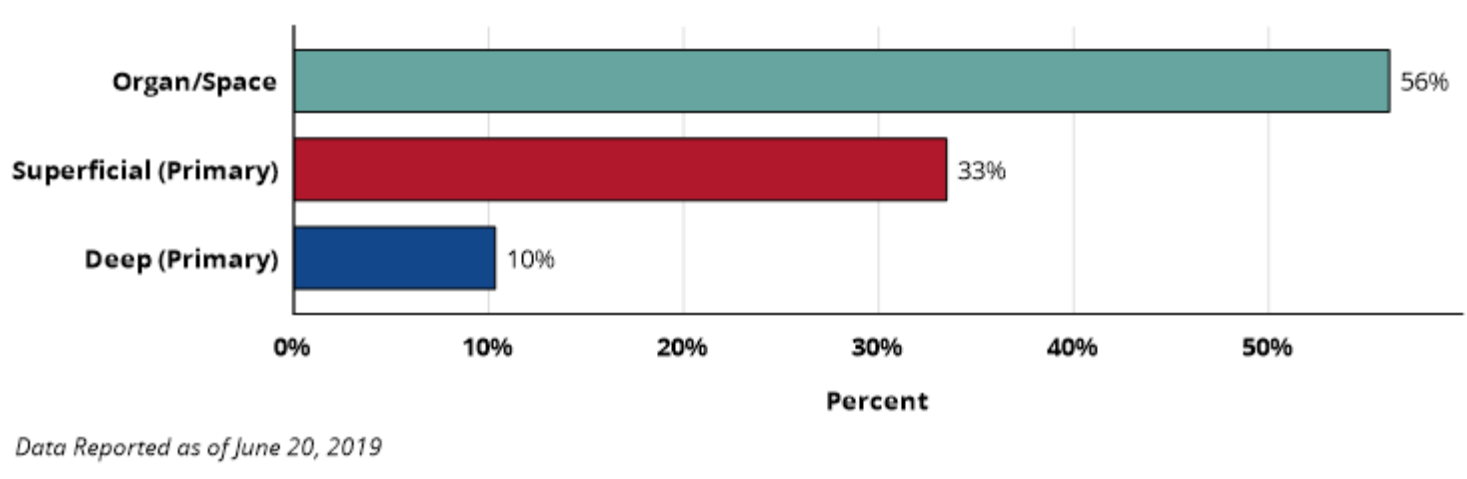
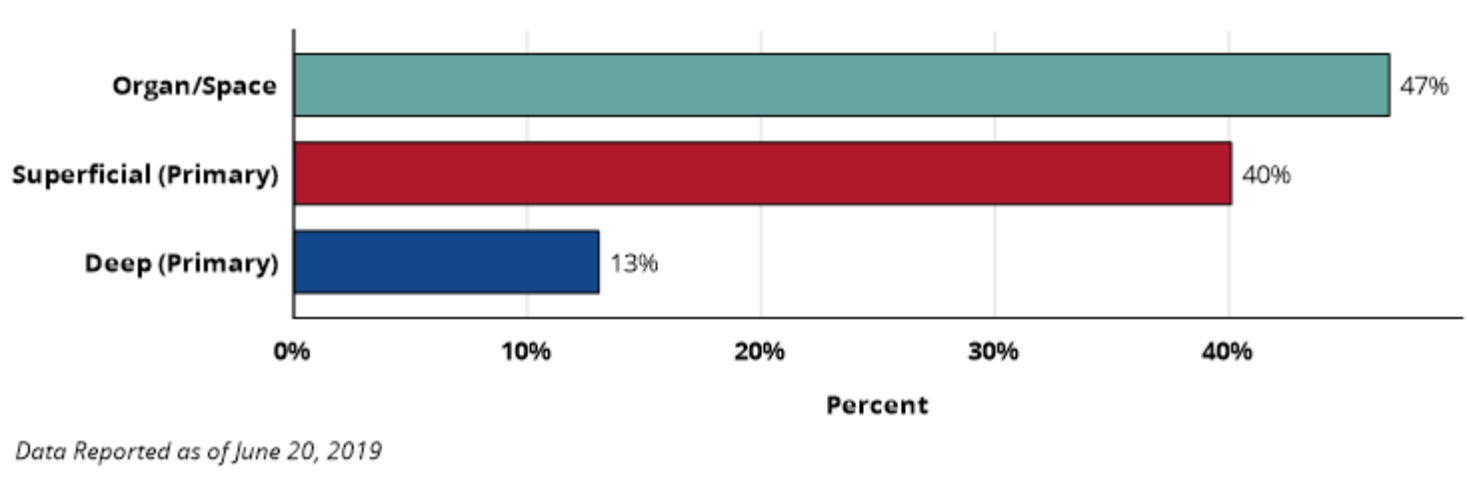
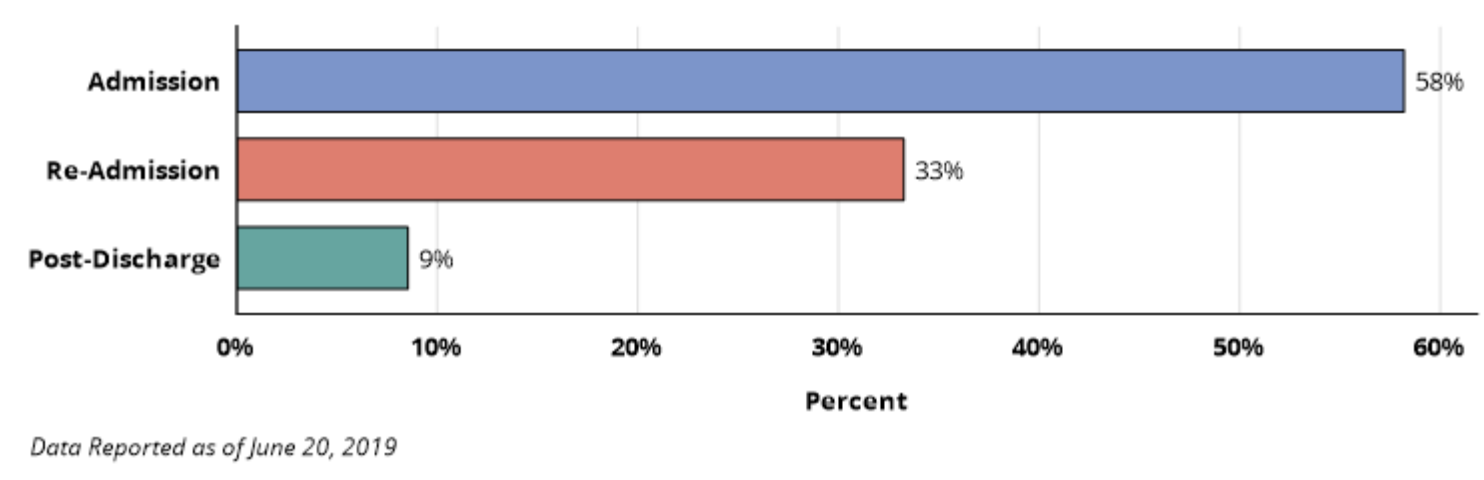


Figure 57: Colon Surgery (COLO) Surgical Site Infections by Site, Tennessee, 01/01/2017–12/31/2017

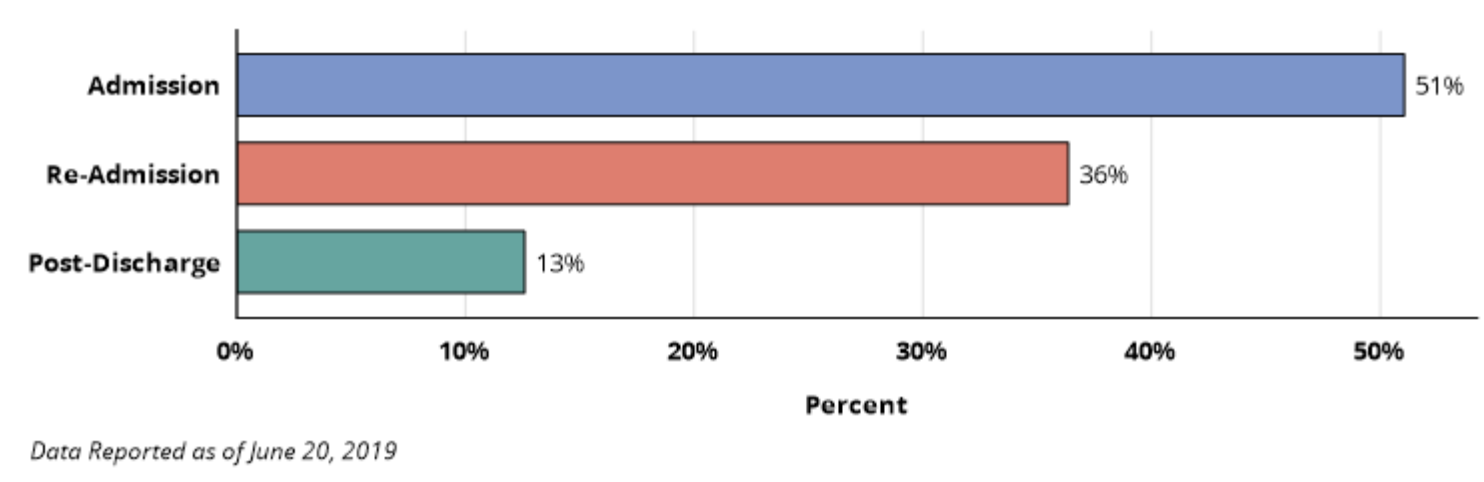
Number of Events= 429



**Figure 58: Colon Surgery (COLO) Surgical Site Infections Detection, Tennessee, 01/01/2018-12/31/2018**  
**Number of Events= 446**



**Figure 59: Colon Surgery (COLO) Surgical Site Infections Detection, Tennessee, 01/01/2017-12/31/2017**  
**Number of Events= 429**



**Table 43: Crude (Unadjusted) Rate of Colon Surgery (COLO) Surgical Site Infection (SSI) by Year, Tennessee, 01/01/2017 - 12/31/2018**

STATE	YEAR	No. of facilities	No. of procedures	No. of SSI	TN Rate*
Tennessee	2018	88	8,991	446	<b>4.96</b>
	2017	87	8,556	429	<b>5.01</b>

Data reported as of June 20, 2019

No. of facilities which performed at least one procedure during the reporting period

\*per 100 procedures

**Table 44: Colon Surgery (COLO) All and Complex Admission/Readmission (AR) Surgical Site Infection (SSI) Standardized Infection Ratios (SIRs) by Reporting Year, Tennessee, 01/01/2015 - 12/31/2018**

										DISTRIBUTION OF FACILITY-SPECIFIC SIRs										
					No. of INFECTIONS		SIR AND 95% CONFIDENCE INTERVAL			No. of FACS WITH SIR SIG. <1.0		No. of FACS WITH SIR SIG. >1.0								
STATE	SIR TYPE	YEAR	No.	PROCS	OBS	PRED	SIR	LOWER LIMIT	UPPER LIMIT	No. of FACS WITH ≥1 PRED INFECTION	N	%	N	%	10%	25%	50%	75%	90%	
Tennessee	All Procedures	2018	99	8,567	330	457.82	0.72	0.65	0.80	58	10	17%	3	5%	0.00	0.31	0.70	1.14	1.73	
		2017	99	8,234	345	429.56	0.80	0.72	0.89	59	8	14%	4	7%	0.00	0.34	0.61	1.05	1.72	
	Complex A/R	2018	99	8,567	183	230.90	0.79	0.68	0.91	40	5	13%	2	5%	0.00	0.29	0.67	1.18	1.87	
		2017	99	8,234	180	216.93	0.83	0.72	0.96	44	4	9%	2	5%	0.00	0.30	0.81	1.35	1.65	

Data reported as of June 20, 2019

No. = number of facilities reporting; PROCS = number of procedures; OBS = observed number of SSI

PRED = statistically 'predicted' number of SSI; SIR = Standardized Infection Ratio (observed/predicted number of SSI)

Key percentiles include facilities with at least one predicted infection

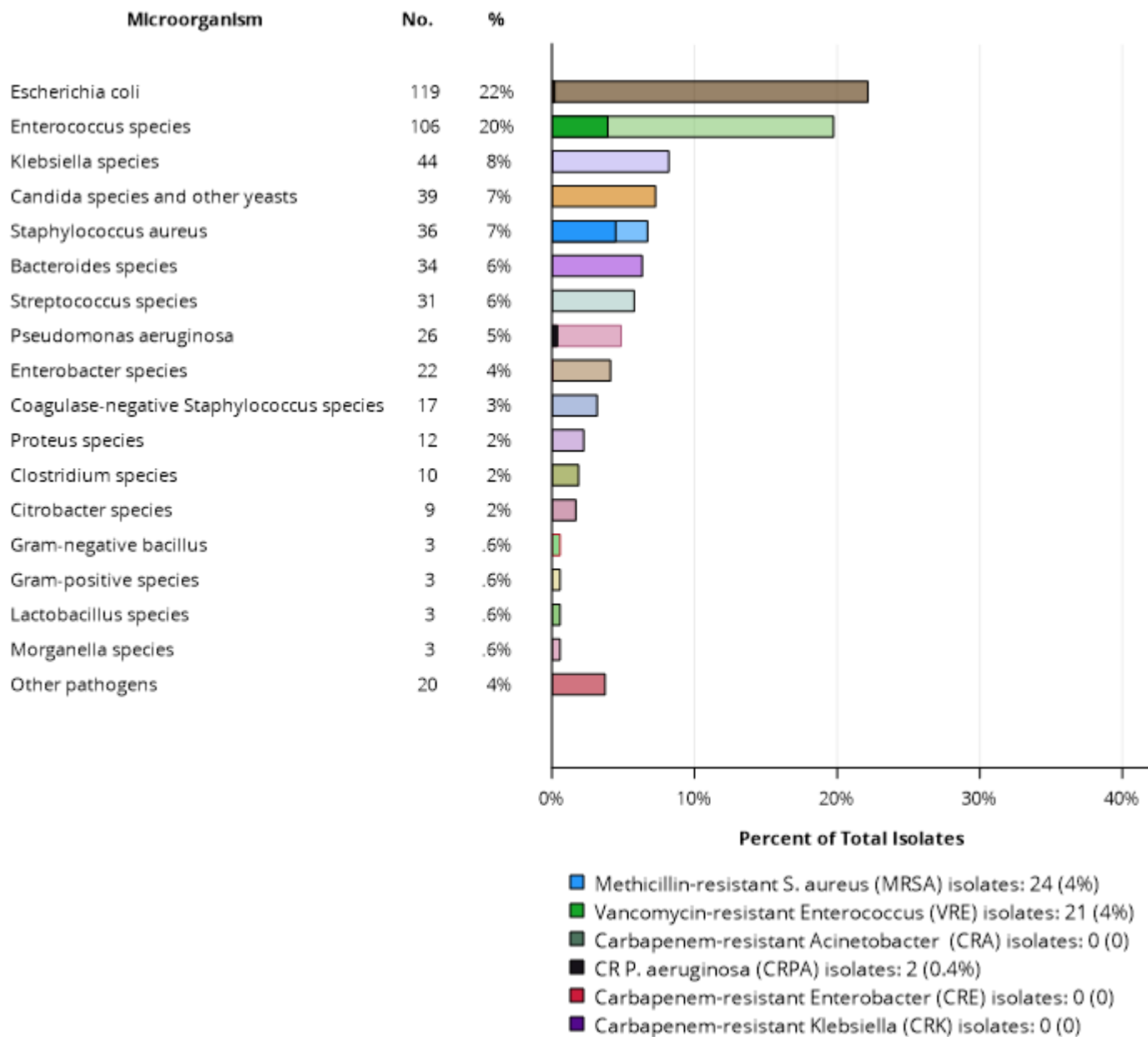
Red highlighting indicates SIR for reporting period is significantly higher than 2015 national SIR of 1.0

Green highlighting indicates SIR for reporting period is significantly lower than 2015 national SIR of 1.0



**Table 45: Microorganisms Identified from Surgical Site Infections (SSI) following Colon (COLO) Procedures, Tennessee, 01/01/2017 - 12/31/2017**

**Number of isolates=537; Number of events=429**

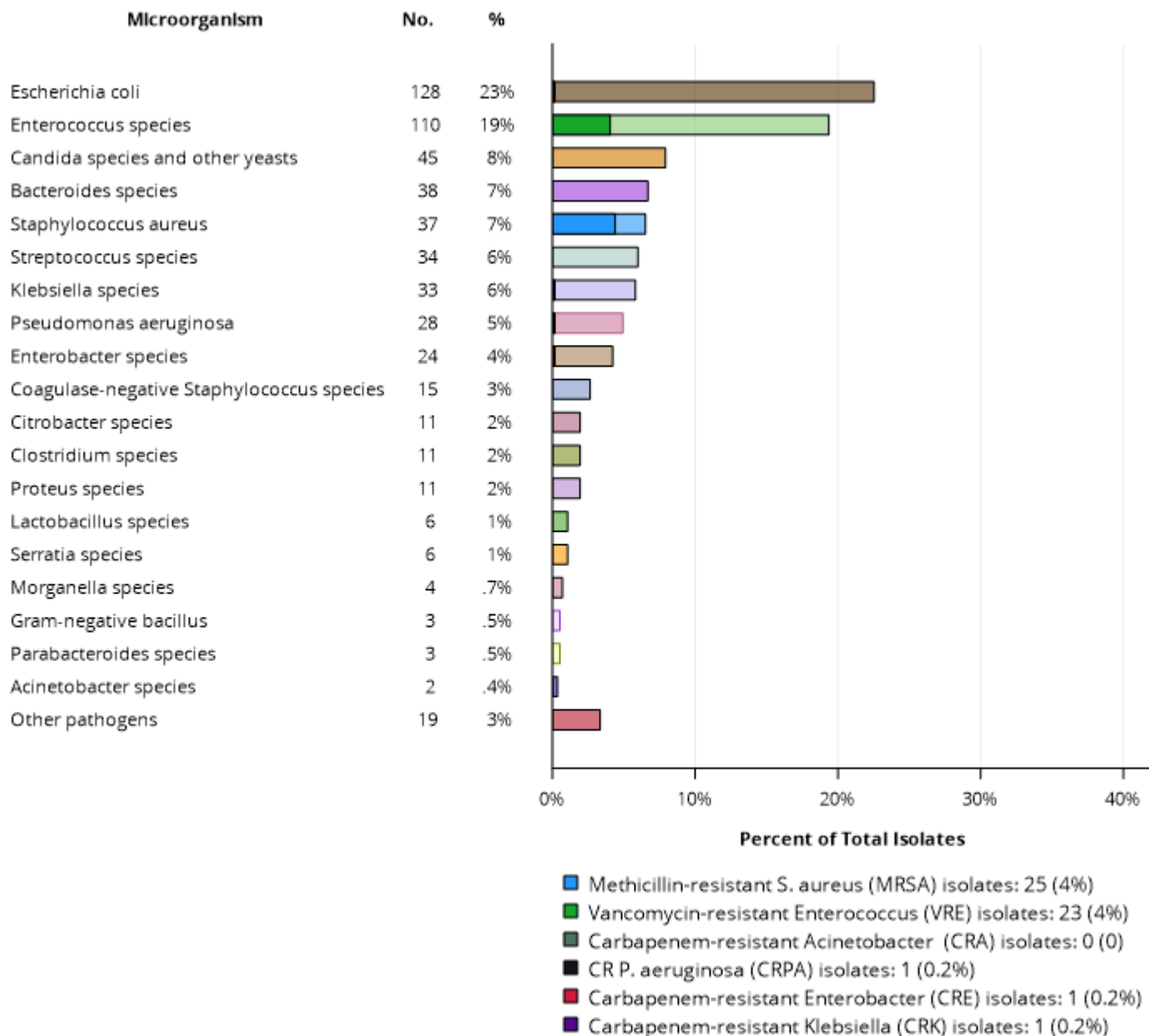


Data reported as of June 20, 2019

Other pathogens = Actinomyces spp., Aeromonas spp., Anaerococcus spp., Bifidobacterium spp., Diphtheroids spp., Eggerthella spp., Fusobacterium spp., Gemella spp., Gram-positive spp., Other Staphylococcus spp., Prevotella spp., Propionibacterium spp., Pseudomonas spp., Serratia spp.,

**Table 46: Microorganisms Identified from Surgical Site Infections (SSI) following Colon (COLO) Procedures, Tennessee, 01/01/2018 - 12/31/2018**

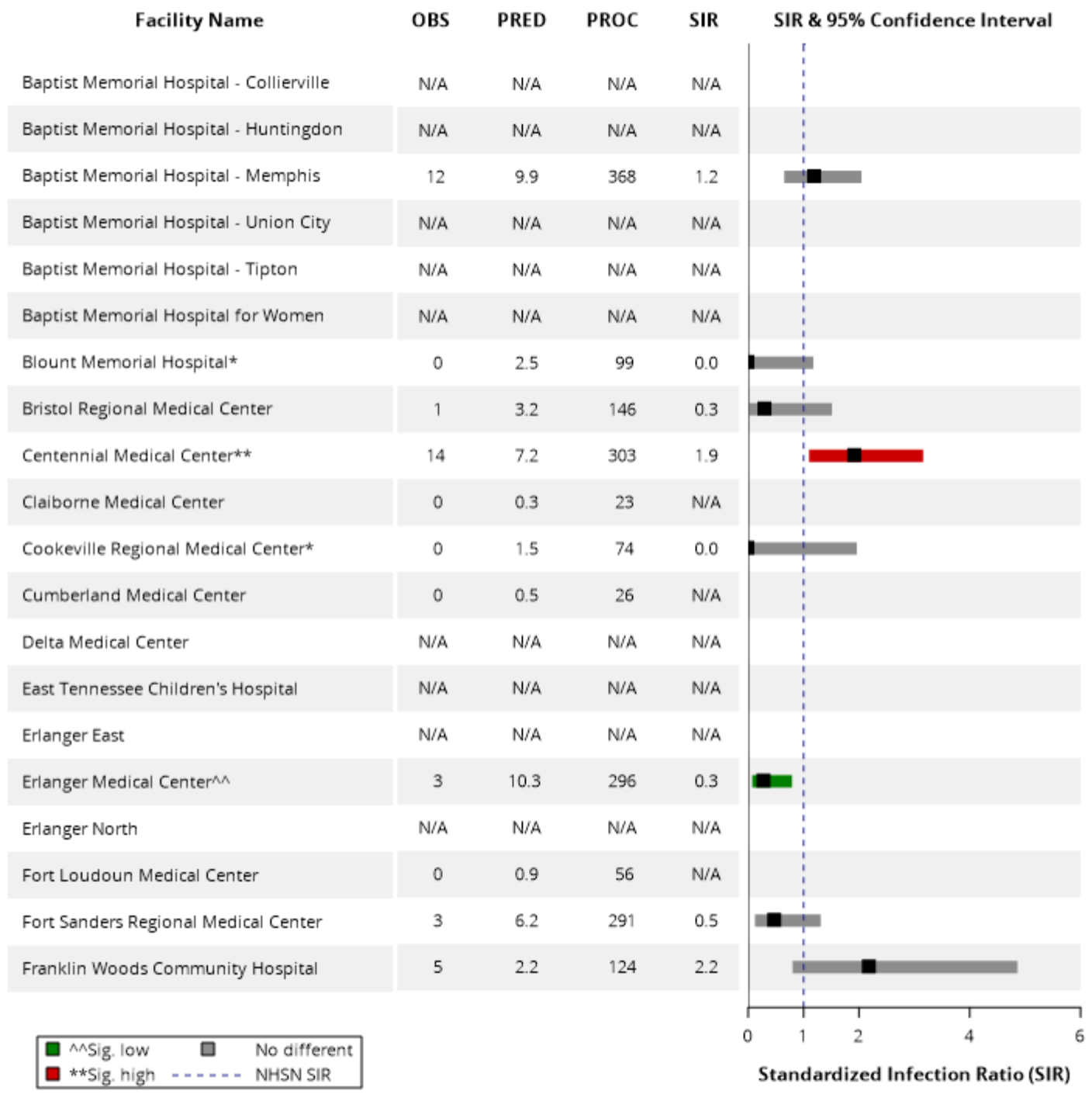
**Number of isolates=568; Number of events=446**



Data reported as of June 20, 2019

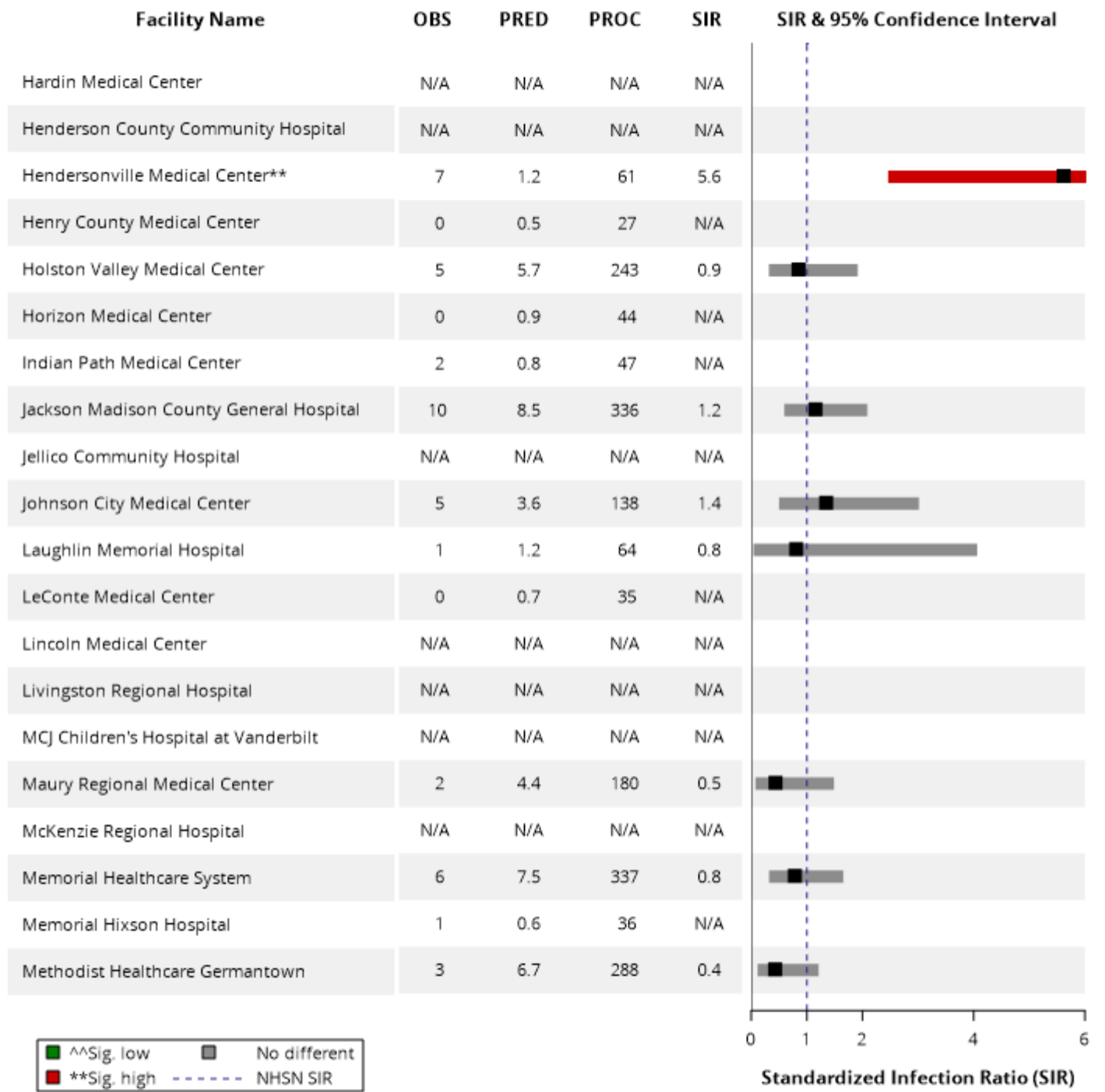
Other pathogens = *Achromobacter* spp., *Anaerococcus* spp., *Brevibacillus* spp., *Corynebacterium* spp., *Diphtheroids* spp., *Eggerthella* spp., *Eubacterium* spp., *Fingoldia* spp., *Fusobacterium* spp., Gram-positive spp., Gram-positive spp., *Kluyvera* spp., Other *Staphylococcus* spp., *Prevotella* spp.,

**Figure 60: Colon Surgery (COLO) Complex Admission/Readmission Surgical Site Infection (SSI) Standardized Infection Ratios (SIRs) in Acute Care Facilities, Tennessee, 01/01/2017 – 12/31/2017**



Data Reported as of June 20, 2019  
 OBS = observed number of SSI; PRED = statistically 'predicted' number of SSI, based on NHSN baseline data  
 SIR = standardized infection ratio (observed/predicted number of SSI); PROC = number of procedures performed  
 N/A = Data not shown for facilities with <20 procedures performed / SIR not calculated for facilities with <1 predicted infection  
 \*\* Significantly higher than 2015 national baseline  
 ^^ Significantly lower than 2015 national baseline  
 \* Zero infections, but not statistically significant

Figure 60 (cont'd)



Data Reported as of June 20, 2019

OBS = observed number of SSI; PRED = statistically 'predicted' number of SSI, based on NHSN baseline data

SIR = standardized infection ratio (observed/predicted number of SSI); PROC = number of procedures performed

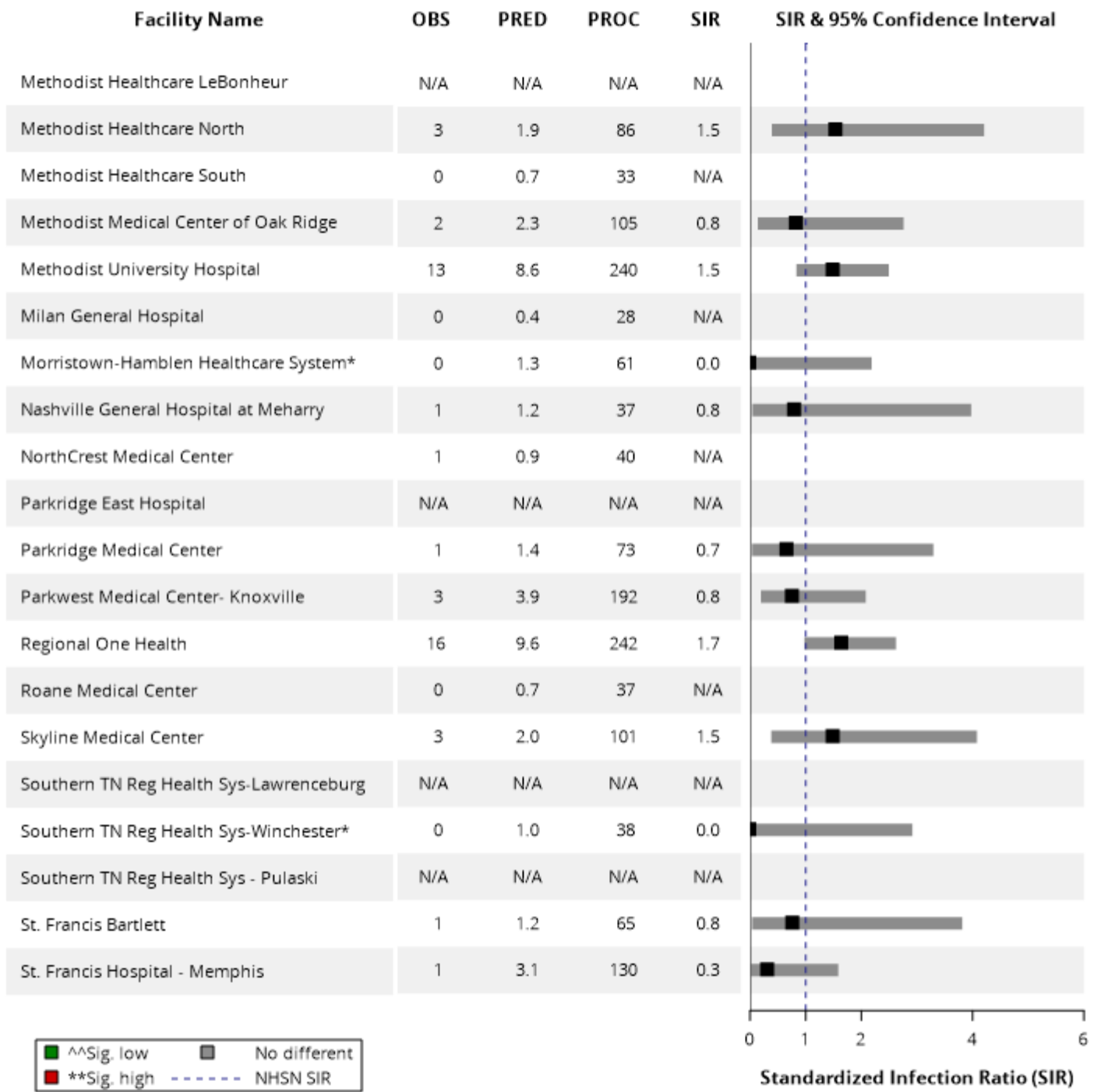
N/A = Data not shown for facilities with <20 procedures performed / SIR not calculated for facilities with <1 predicted infection

\*\* Significantly higher than 2015 national baseline

^^ Significantly lower than 2015 national baseline

\* Zero infections, but not statistically significant

Figure 60 (cont'd)



Data Reported as of June 20, 2019

OBS = observed number of SSI; PRED = statistically 'predicted' number of SSI, based on NHSN baseline data

SIR = standardized infection ratio (observed/predicted number of SSI); PROC = number of procedures performed

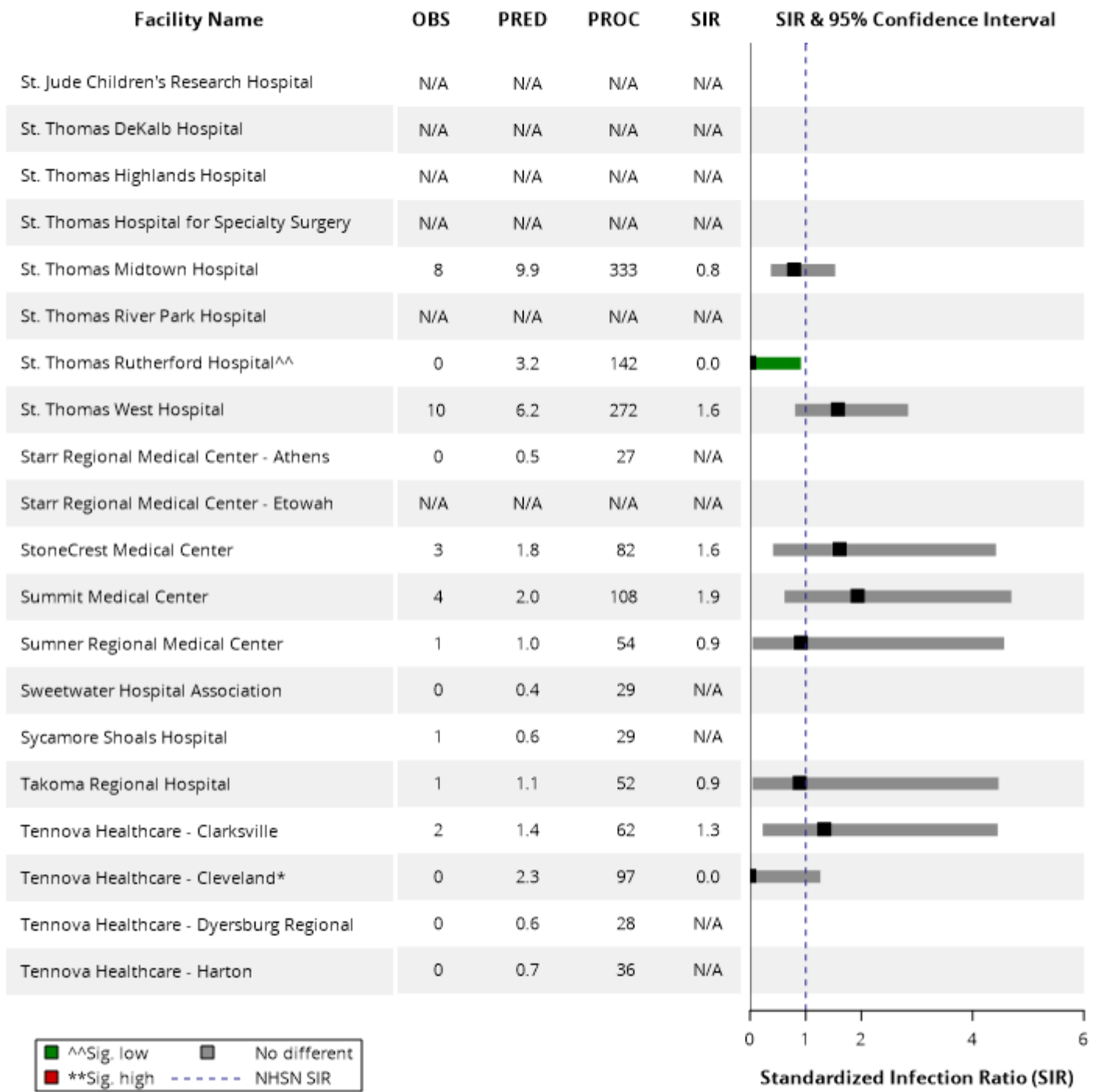
N/A = Data not shown for facilities with <20 procedures performed / SIR not calculated for facilities with <1 predicted infection

\*\* Significantly higher than 2015 national baseline

^^ Significantly lower than 2015 national baseline

\* Zero infections, but not statistically significant

Figure 60 (cont'd)



Data Reported as of June 20, 2019

OBS = observed number of SSI; PRED = statistically 'predicted' number of SSI, based on NHSN baseline data

SIR = standardized infection ratio (observed/predicted number of SSI); PROC = number of procedures performed

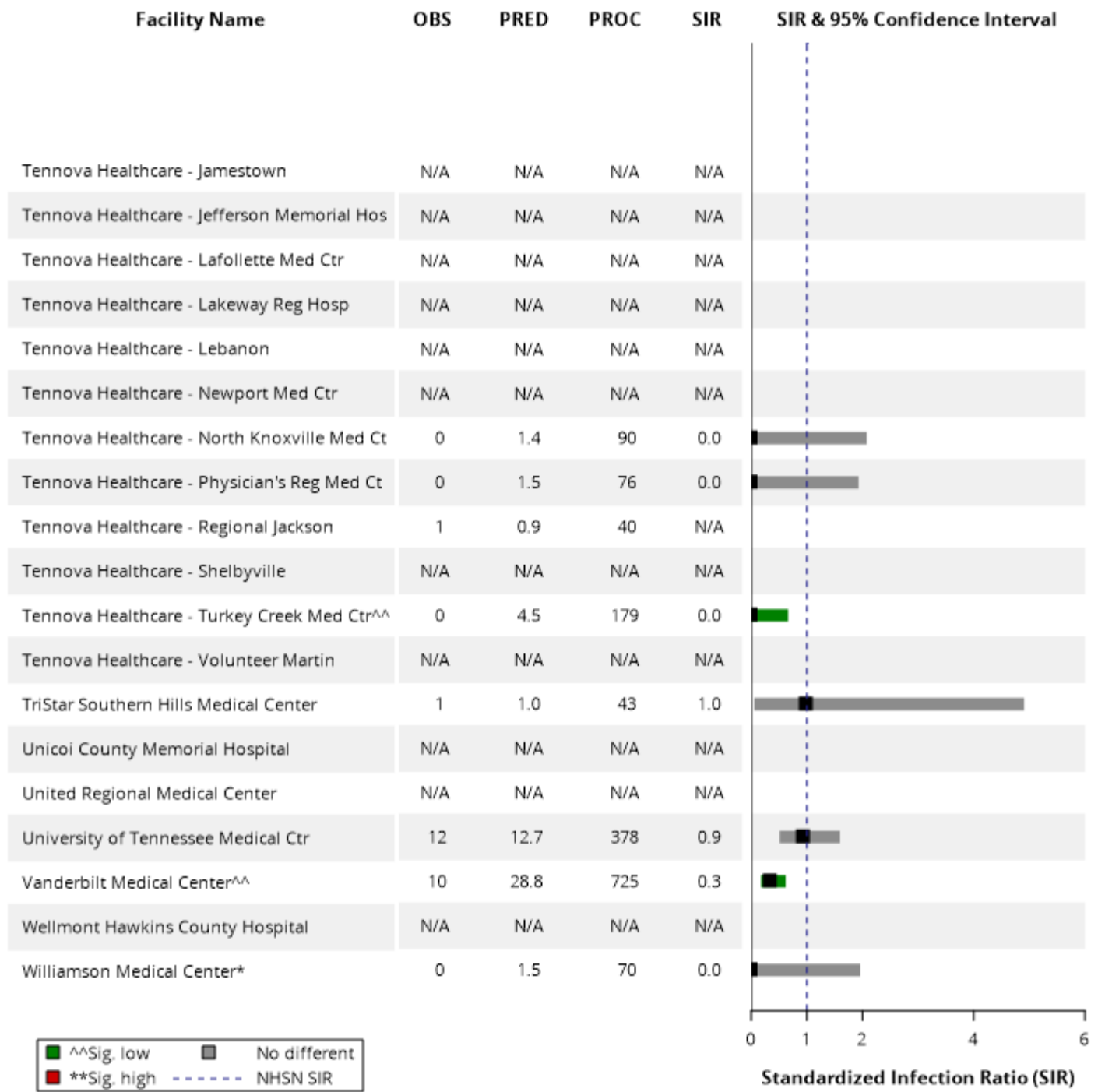
N/A = Data not shown for facilities with <20 procedures performed / SIR not calculated for facilities with <1 predicted infection

\*\* Significantly higher than 2015 national baseline

^^ Significantly lower than 2015 national baseline

\* Zero infections, but not statistically significant

Figure 60 (cont'd)



Data Reported as of June 20, 2019

OBS = observed number of SSI; PRED = statistically 'predicted' number of SSI, based on NHSN baseline data

SIR = standardized infection ratio (observed/predicted number of SSI); PROC = number of procedures performed

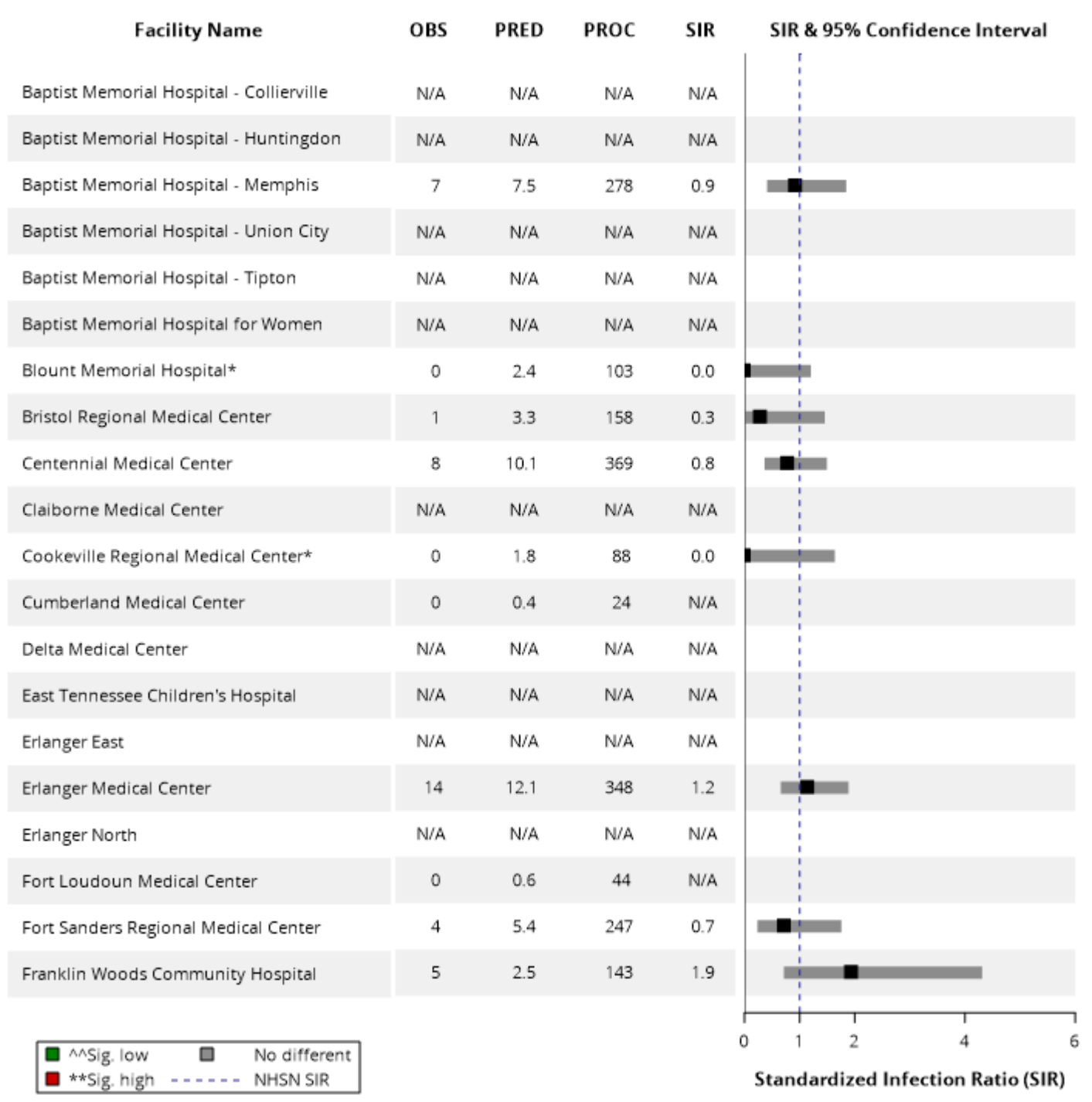
N/A = Data not shown for facilities with <20 procedures performed / SIR not calculated for facilities with <1 predicted infection

\*\* Significantly higher than 2015 national baseline

^^ Significantly lower than 2015 national baseline

\* Zero infections, but not statistically significant

**Figure 61: Colon Surgery (COLO) Complex Admission/Readmission Surgical Site Infection (SSI) Standardized Infection Ratios (SIRs) in Acute Care Facilities, Tennessee, 01/01/2018 – 12/31/2018**



Data Reported as of August 27, 2019

OBS = observed number of SSI; PRED = statistically 'predicted' number of SSI, based on NHSN baseline data

SIR = standardized infection ratio (observed/predicted number of SSI); PROC = number of procedures performed

N/A = Data not shown for facilities with <20 procedures performed / SIR not calculated for facilities with <1 predicted infection

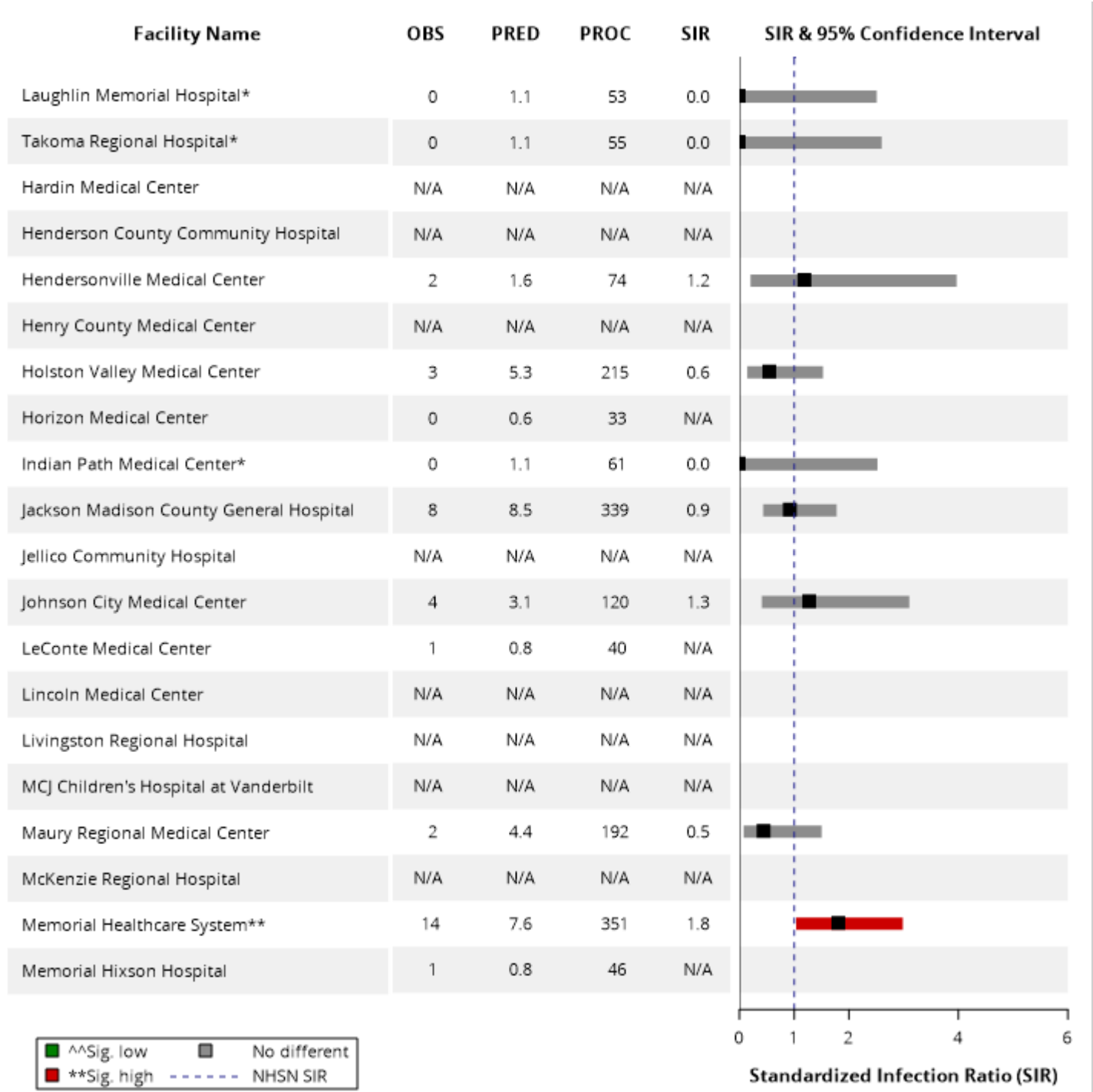
\*\* Significantly higher than 2015 national baseline

^^ Significantly lower than 2015 national baseline

\* Zero infections, but not statistically significant



Figure 61 (cont'd)



Data Reported as of August 27, 2019

OBS = observed number of SSI; PRED = statistically 'predicted' number of SSI, based on NHSN baseline data

SIR = standardized infection ratio (observed/predicted number of SSI); PROC = number of procedures performed

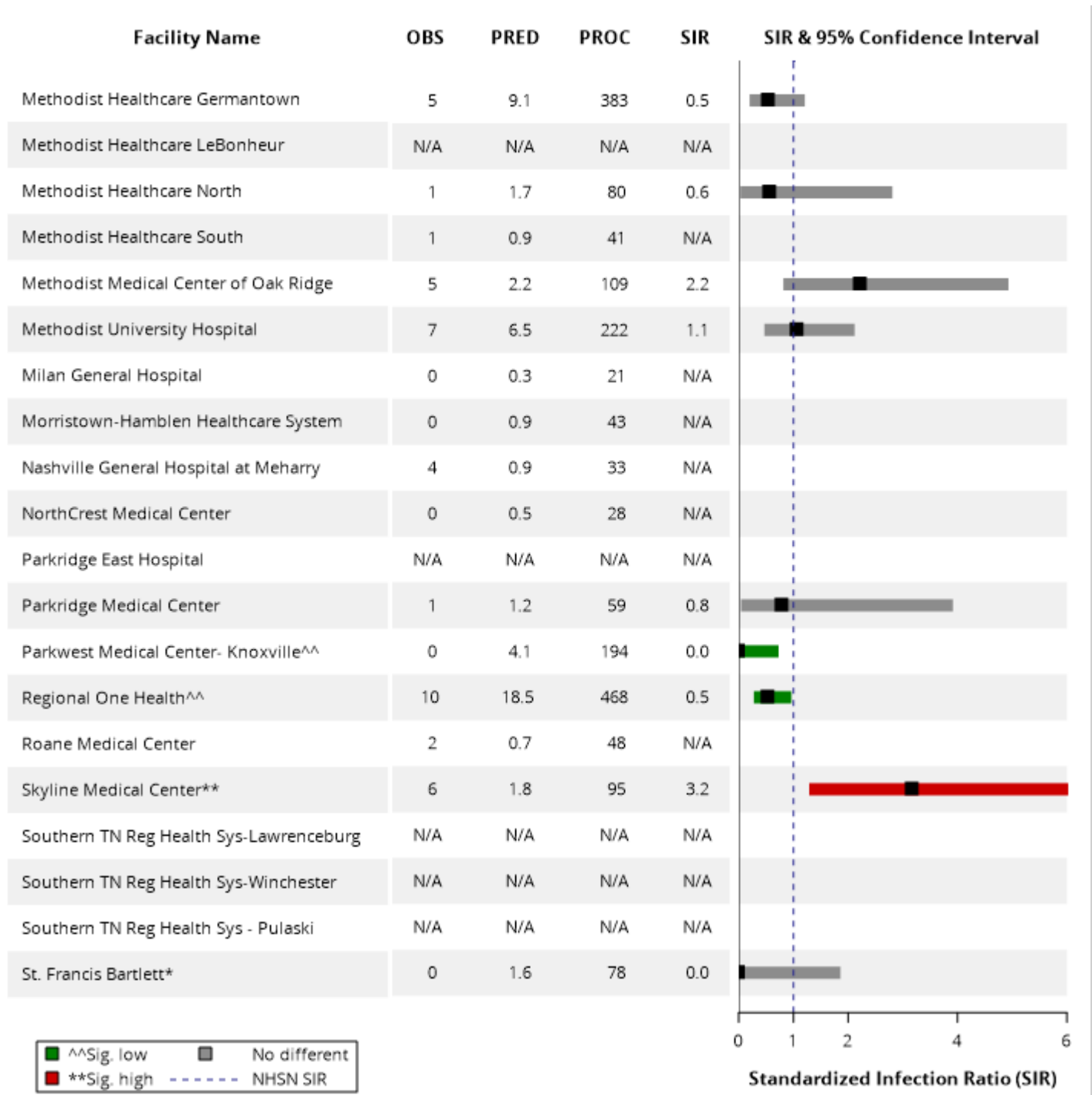
N/A = Data not shown for facilities with <20 procedures performed / SIR not calculated for facilities with <1 predicted infection

\*\* Significantly higher than 2015 national baseline

^^ Significantly lower than 2015 national baseline

\* Zero infections, but not statistically significant

Figure 61 (cont'd)



Data Reported as of August 27, 2019

OBS = observed number of SSI; PRED = statistically 'predicted' number of SSI, based on NHSN baseline data

SIR = standardized infection ratio (observed/predicted number of SSI); PROC = number of procedures performed

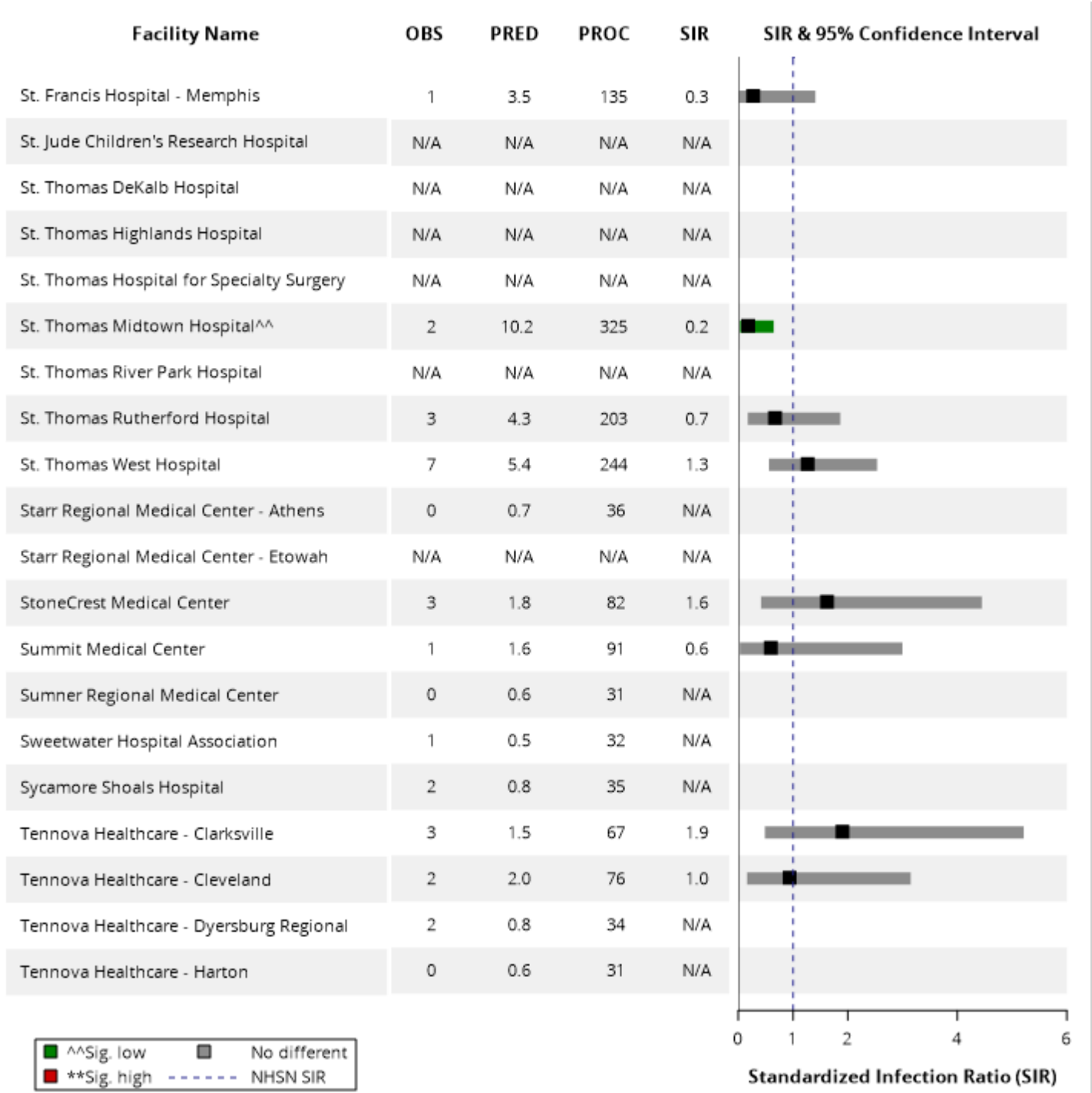
N/A = Data not shown for facilities with <20 procedures performed / SIR not calculated for facilities with <1 predicted infection

\*\* Significantly higher than 2015 national baseline

^^ Significantly lower than 2015 national baseline

\* Zero infections, but not statistically significant

Figure 61 (cont'd)



Data Reported as of August 27, 2019

OBS = observed number of SSI; PRED = statistically 'predicted' number of SSI, based on NHSN baseline data

SIR = standardized infection ratio (observed/predicted number of SSI); PROC = number of procedures performed

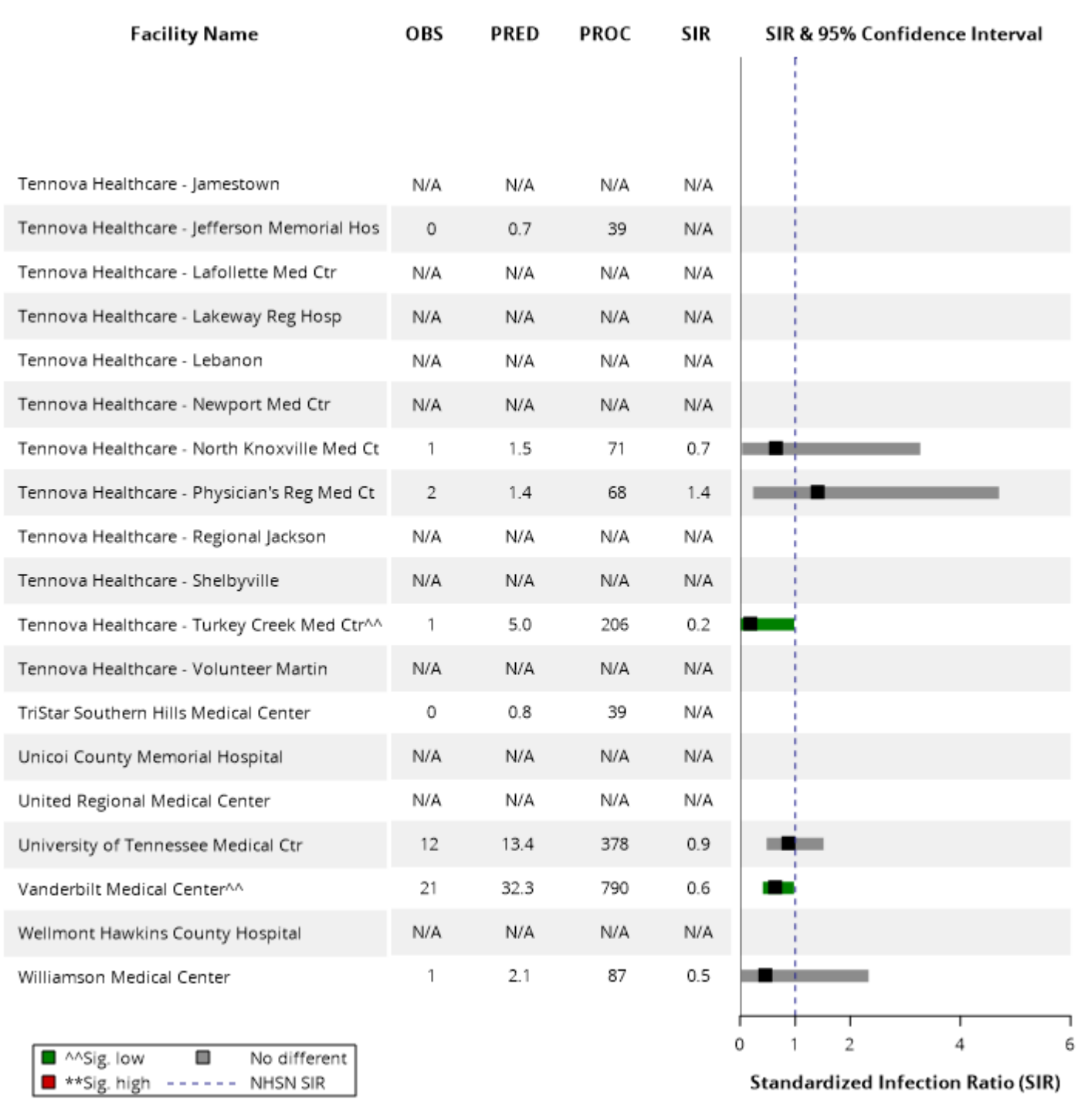
N/A = Data not shown for facilities with <20 procedures performed / SIR not calculated for facilities with <1 predicted infection

\*\* Significantly higher than 2015 national baseline

^^ Significantly lower than 2015 national baseline

\* Zero infections, but not statistically significant

Figure 61 (cont'd)



Data Reported as of August 27, 2019

OBS = observed number of SSI; PRED = statistically 'predicted' number of SSI, based on NHSN baseline data

SIR = standardized infection ratio (observed/predicted number of SSI); PROC = number of procedures performed

N/A = Data not shown for facilities with <20 procedures performed / SIR not calculated for facilities with <1 predicted infection

\*\* Significantly higher than 2015 national baseline

^^ Significantly lower than 2015 national baseline

\* Zero infections, but not statistically significant

# Surgical Site Infections (SSI)

## *Abdominal Hysterectomy Procedures*

## SSIs Related to Abdominal Hysterectomy (HYST) Procedures:

**Total number of facilities reporting from January-December 2017: 99**

**Total number of facilities reporting from January-December 2018: 100**

### **SIRs by Quarter (Figure 62, Figure 63, Figure 64)**

- From January-March 2017 to April-June 2017, the combined All SSI SIR increased from 1.00 to 1.17 and then decreased through October- December, ending with a low SIR of 0.80. The Complex A/R SIR increased from an SIR of 1.11 in January-March to an SIR of 1.49 the next quarter. The SIR then decreased to an SIR of 0.76 during October-December. The U.S. Department of Health and Human Services' [National Action Plan to Prevent Healthcare-Associated Infections](#)<sup>28</sup> gives a five-year (2020) prevention target of SIR = 0.70.
- From January-March 2018 to October-December 2018, the combined All SSI SIR fluctuated over time with a high of 0.95 and a low of 0.71. The Complex A/R SIR increased slightly over time from an SIR of 0.79 in January-March to an SIR of 0.84 in October-December.

### **Rates, Infection Sites, and Detection (Figure 65, Figure 66, Figure 67, Figure 68, Table 47)**

- In 2017, 128 SSIs were reported among 9,259 abdominal hysterectomies in Tennessee, for a crude rate of 1.38 infections per 100 procedures. Overall, SSIs related to abdominal hysterectomies were most often organ/space (43%) and superficial primary (40%). SSIs related to abdominal hysterectomies were most often identified upon readmission (73%) and post-discharge surveillance (23%).
- In 2018, 105 SSIs were reported among 8,813 abdominal hysterectomies in Tennessee, for a crude rate of 1.19 infections per 100 procedures. Overall, SSIs related to abdominal hysterectomies were most often organ/space (49%) and superficial primary (47%). SSIs related to abdominal hysterectomies were most often identified upon readmission (70%) and post-discharge surveillance (29%).

<sup>28</sup> <http://www.hhs.gov/ash/initiatives/hai/actionplan/>

### **Key percentiles for Tennessee SIRs (Table 48)**

- The All SSI SIR for SSIs related to HYST procedures in Tennessee from January-December 2017 was not statistically significantly different than the national SIR of 1 (SIR=0.96; 95% CI: 0.80, 1.15). The All SSI SIR for SSIs related to HYST procedures in Tennessee from January-December 2018 was statistically significantly lower than the national SIR of 1 (SIR=0.81; 95% CI: 0.66, 0.98).
- From January-December 2017, the median All SSI SIR for HYST procedures was 0.96, indicating that half of reporting facilities with at least 1 predicted infection had an All SSI SIR at or below 0.96. From January-December 2018, the median All SSI SIR for HYST procedures was 0.66.
- The Complex A/R SIR for SSIs related to HYST procedures in Tennessee from January-December 2017 was not significantly different from the 2015 national SIR of 1 (SIR=1.07; 95% CI: 0.83, 1.37). The Complex A/R SIR for SSIs related to HYST procedures in Tennessee from January-December 2018 was not significantly different from the 2015 national SIR of 1 (SIR=0.78; 95% CI: 0.57, 1.05).
- From January-December 2017, the median Complex A/R SIR for HYST procedures was 0.70, indicating that half of reporting facilities with at least 1 predicted infection had a Complex A/R SIR at or below 0.70. From January-December 2018, the median Complex A/R SIR for HYST procedures was 0.54.

### **Microorganisms associated with SSIs following Abdominal Hysterectomy Procedures (Table 49, Table 50)**

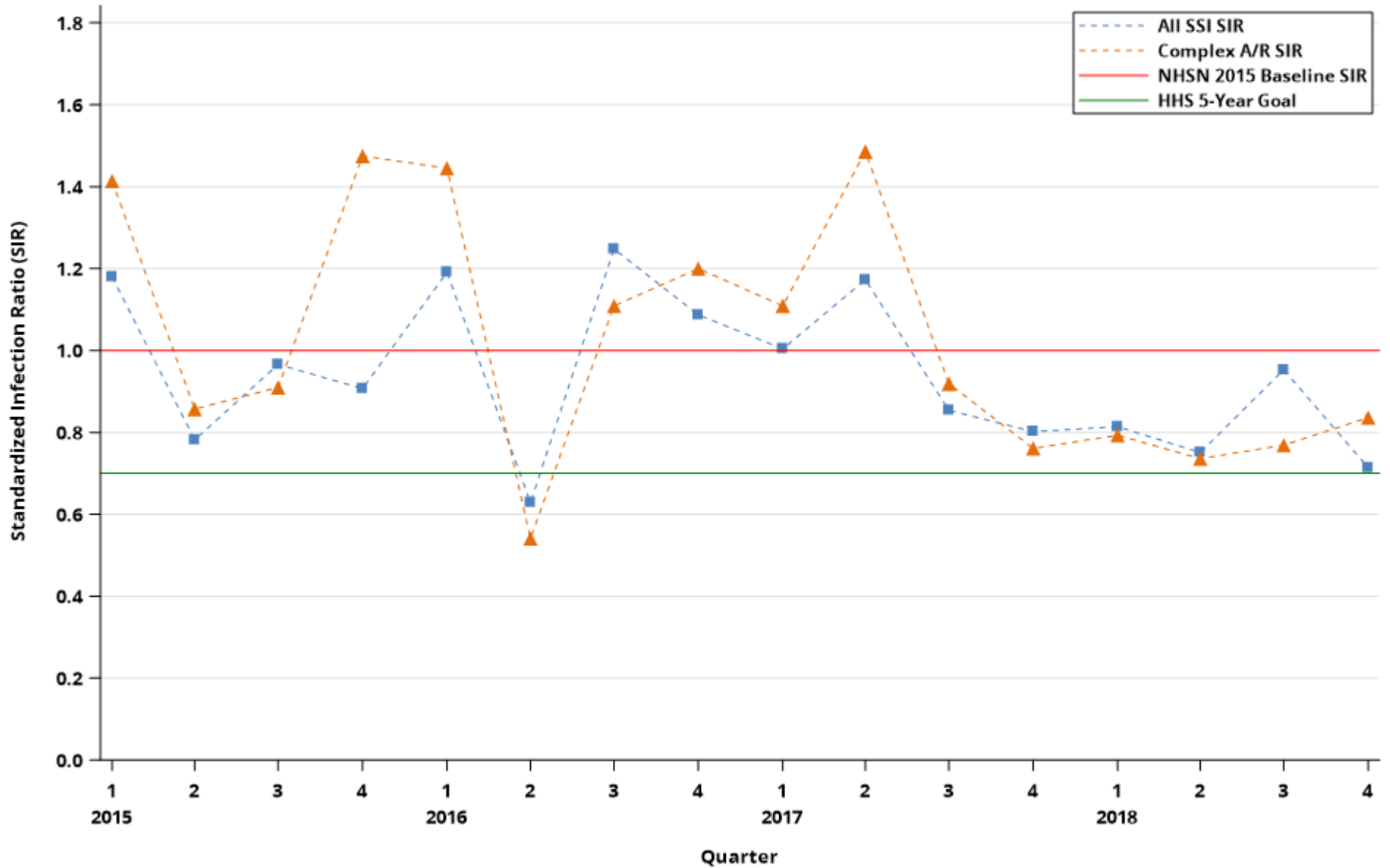
- Among the 143 pathogens isolated from 128 SSIs following abdominal hysterectomies in 2017, the most common pathogens were *Enterococcus* species (17%), *Escherichia coli* (15%) and *Staphylococcus aureus* (12%). Methicillin-resistant *Staphylococcus aureus* (MRSA) accounted for 7% of total isolates, and vancomycin-resistant *Enterococcus* (VRE) isolates accounted for 2% of total positive isolates.
- Among the 124 pathogens isolated from 105 SSIs following abdominal hysterectomies in 2018, the most common pathogens were *Enterococcus* species (16%), *Staphylococcus aureus* (15%), and *Escherichia coli* (12%). Methicillin-resistant *Staphylococcus aureus* (MRSA) accounted for 8% of total isolates, and vancomycin-resistant *Enterococcus* (VRE) isolates accounted for 2% of total positive isolates

**Facility-Specific SIRs (Figure 69, Figure 70)**

- The Complex A/R SIR for SSIs related to HYST procedures that accounts for all qualifying abdominal hysterectomies performed at a given facility in 2017 and 2018 is displayed in [Figure 69](#) and [Figure 70](#). The bar representing the confidence interval is green if the Complex A/R SIR for SSIs related to HYST procedures was significantly lower than the national SIR of 1 for 2015 and red if the SIR was significantly higher than 1. Some hospitals reported zero SSIs (indicated with an asterisk), although the facility's SIR may not be statistically significant due to a relatively small number of procedures performed.
- In 2017, one facility had a Complex A/R SIR that was statistically significantly higher than the baseline SIR. In 2018, no facilities had a Complex A/R SIR for SSIs related to HYST procedures that was statistically significantly lower or higher than the 2015 national baseline SIR of 1.

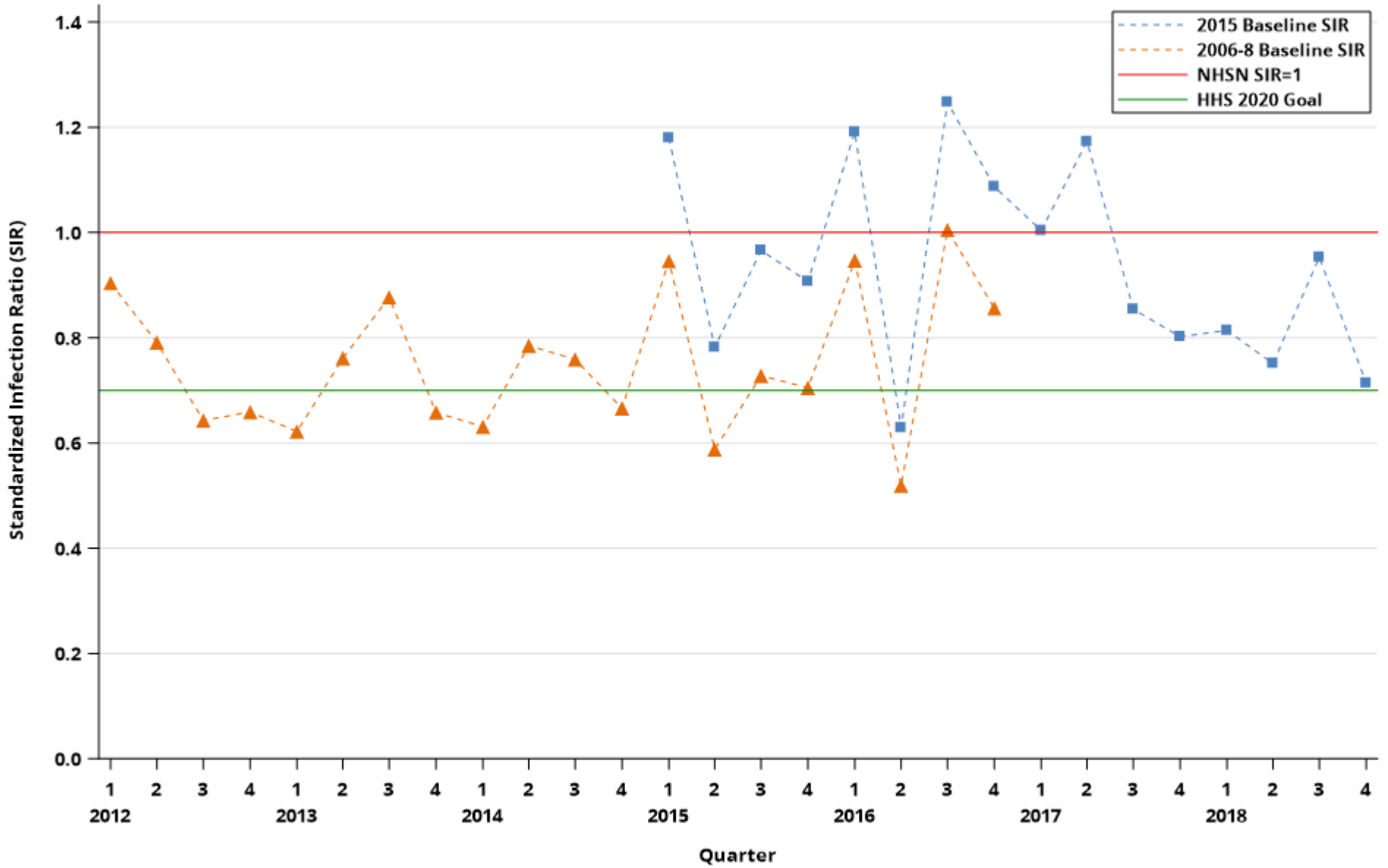


**Figure 62: Abdominal Hysterectomy (HYST) All and Complex Admission/Readmission Surgical Site Infection (SSI) Standardized Infection Ratios (SIRs) by Quarter, Tennessee, 01/01/2015–12/31/2018 [Reference standard: National Healthcare Safety Network (NHSN), 2015]**



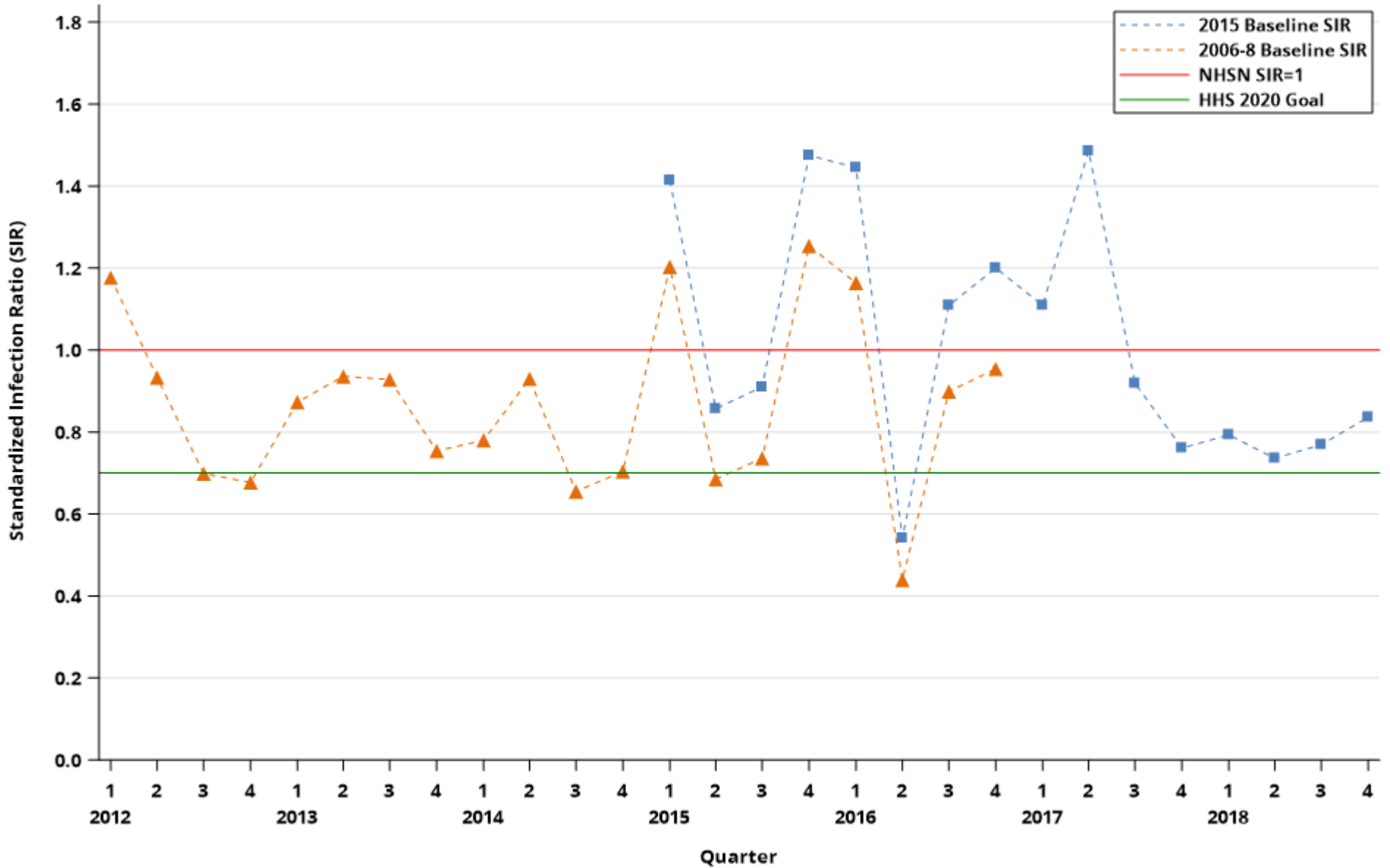
Data Reported as of June 20, 2019

**Figure 63: Abdominal Hysterectomy (HYST) All Surgical Site Infection (SSI) Standardized Infection Ratio (SIR) by Quarter, Tennessee, 01/01/2012–12/31/2018**



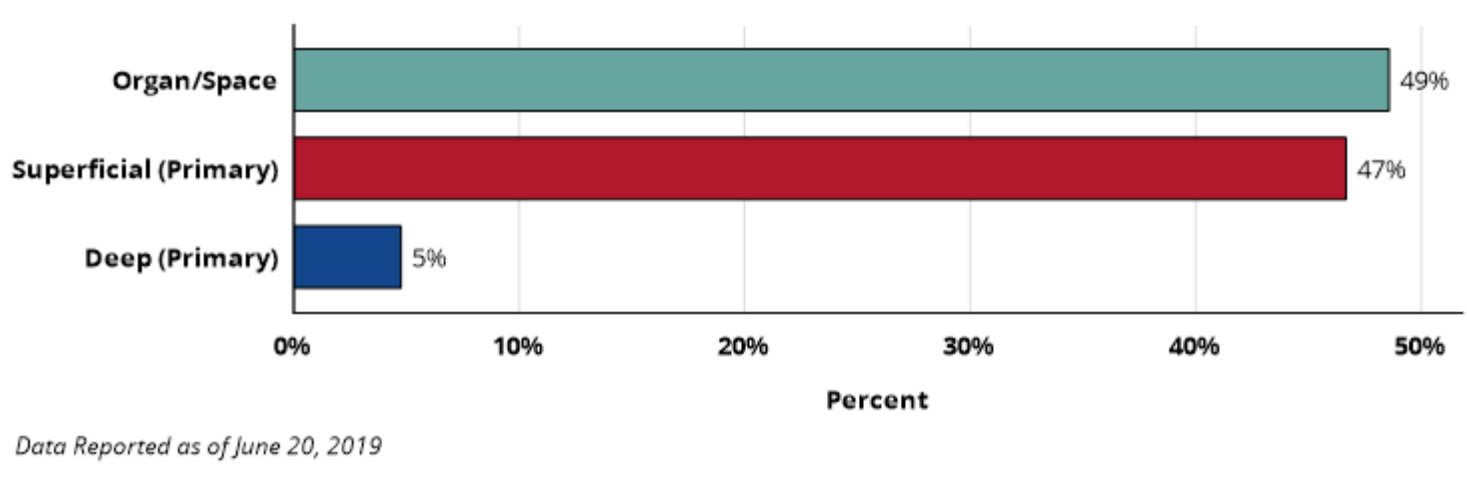
Data Reported as of June 20, 2019

Figure 64: Abdominal Hysterectomy (HYST) Complex Admission/Readmission Surgical Site Infection (SSI) Standardized Infection Ratio (SIR) by Quarter, Tennessee, 01/01/2012–12/31/2018



Data Reported as of June 20, 2019

**Figure 65: Abdominal Hysterectomy (HYST) Surgical Site Infections by Site, Tennessee, 01/01/2018–12/31/2018**  
Number of Events= 105



**Figure 66: Abdominal Hysterectomy (HYST) Surgical Site Infections by Site, Tennessee, 01/01/2017–12/31/2017**  
Number of Events= 128

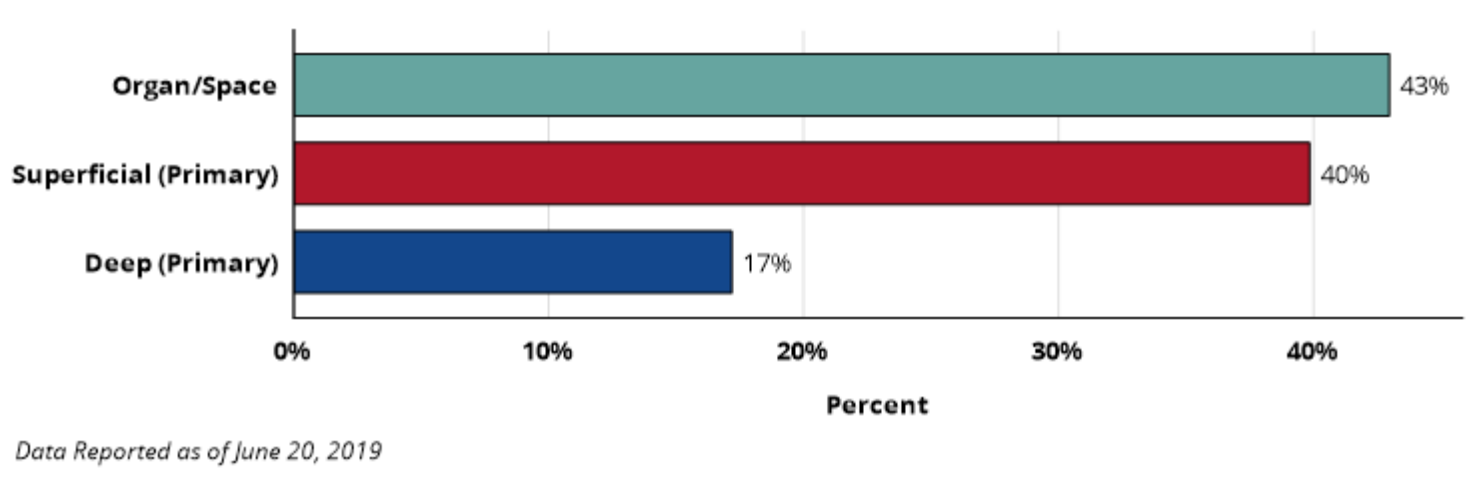
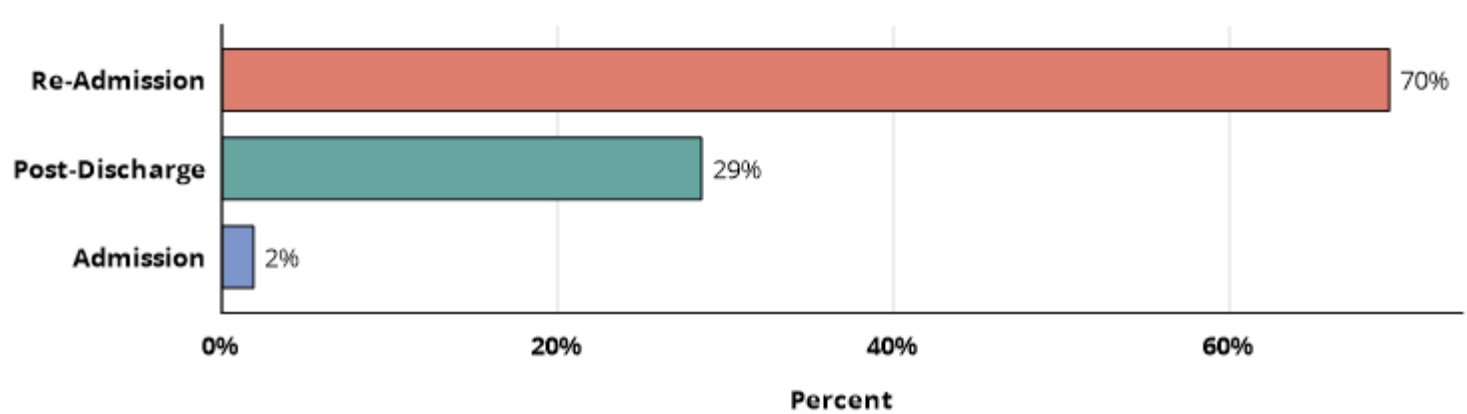


Figure 67: Abdominal Hysterectomy (HYST) Surgical Site Infections Detection, Tennessee, 01/01/2018-12/31/2018

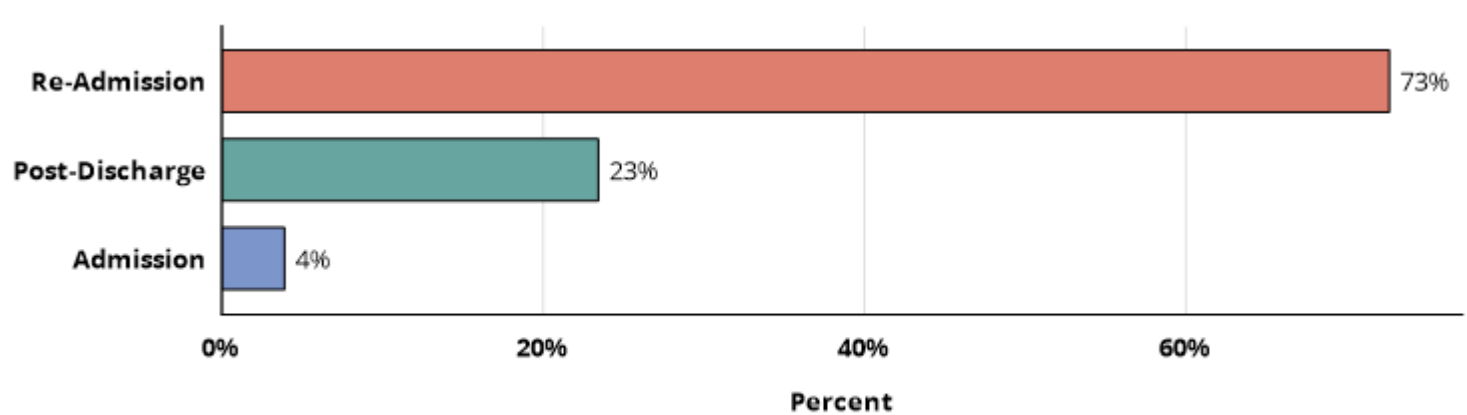
Number of Events= 105



Data Reported as of June 20, 2019

Figure 68: Abdominal Hysterectomy (HYST) Surgical Site Infections Detection, Tennessee, 01/01/2017-12/31/2017

Number of Events= 128



Data Reported as of June 20, 2019

**Table 47: Crude (Unadjusted) Rate of Abdominal Hysterectomy (HYST) Surgical Site Infection (SSI) by Year, Tennessee, 01/01/2017 - 12/31/2018**

STATE	YEAR	No. of facilities	No. of procedures	No. of SSI	TN Rate*
Tennessee	2018	77	8,813	105	<b>1.19</b>
	2017	79	9,259	128	<b>1.38</b>

Data reported as of June 20, 2019

No. of facilities which performed at least one procedure during the reporting period

\*per 100 procedures

**Table 48: Abdominal Hysterectomy (HYST) All and Complex Admission/Readmission (AR) Surgical Site Infection (SSI) Standardized Infection Ratios (SIRs) by Reporting Year, Tennessee, 01/01/2015 - 12/31/2018**

										DISTRIBUTION OF FACILITY-SPECIFIC SIRs									
					No. of INFECTIONS		SIR AND 95% CONFIDENCE INTERVAL			No. of FACS WITH ≥1 PRED INFECTION		No. of FACS WITH SIR <1.0		No. of FACS WITH SIR >1.0					
STATE	SIR TYPE	YEAR	No.	PROCS	OBS	PRED	SIR	LOWER LIMIT	UPPER LIMIT	N	%	N	%	10%	25%	50%	75%	90%	
Tennessee	All Procedures	2018	100	8,708	97	120.50	0.81	0.66	0.98	28	1	4%	1	4%	0.00	0.20	0.66	0.98	1.79
		2017	99	9,169	120	124.83	0.96	0.80	1.15	28	2	7%	2	7%	0.00	0.60	0.96	1.63	2.34
	Complex A/R	2018	100	8,708	42	53.55	0.78	0.57	1.05	14	0	0%	0	0%	0.00	0.00	0.54	1.15	1.53
		2017	99	9,169	60	55.84	1.07	0.83	1.37	16	0	0%	1	6%	0.00	0.47	0.70	1.43	2.45

Data reported as of June 20, 2019

No. = number of facilities reporting; PROCS = number of procedures; OBS = observed number of SSI

PRED = statistically 'predicted' number of SSI; SIR = Standardized Infection Ratio (observed/predicted number of SSI)

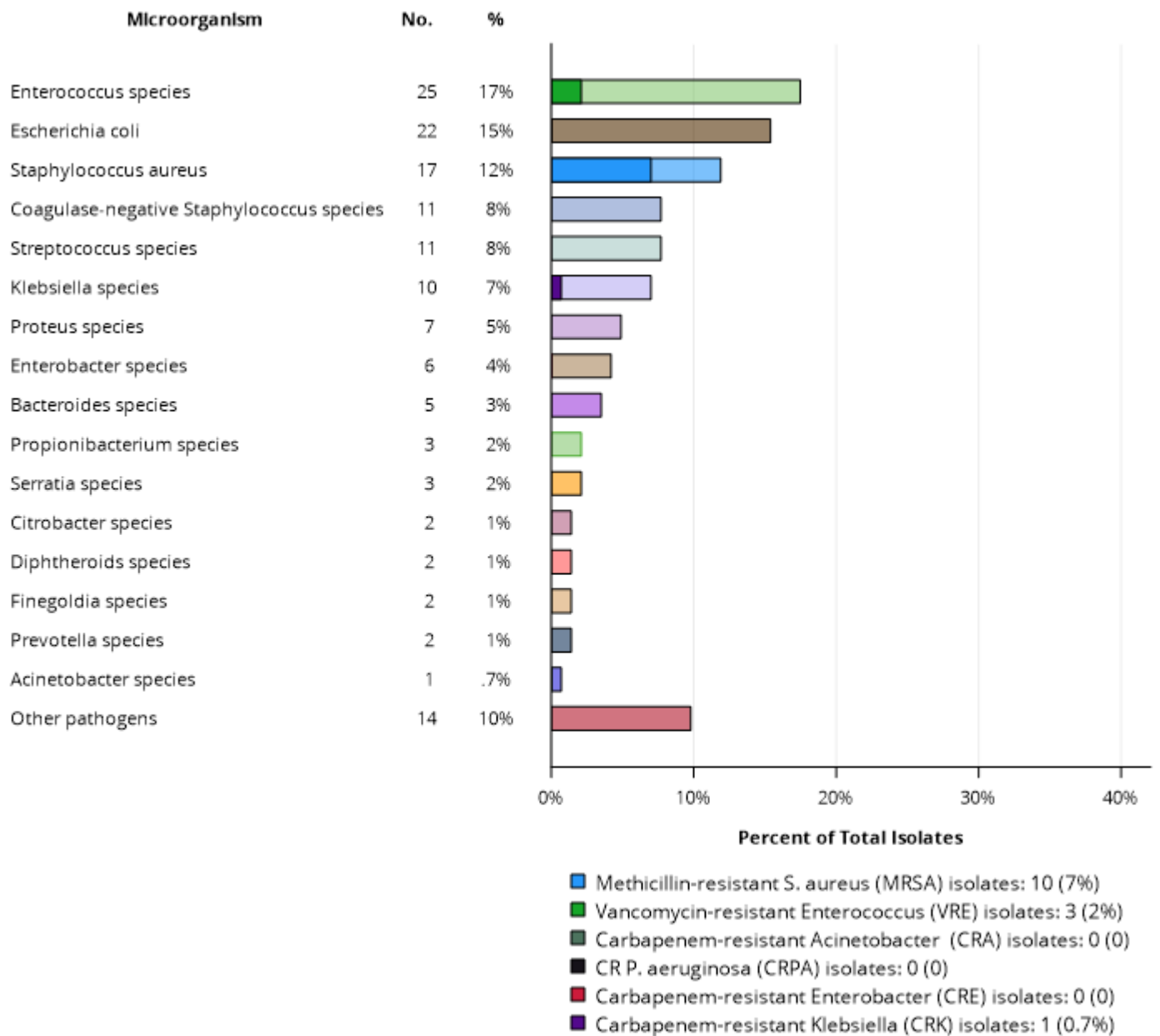
Key percentiles include facilities with at least one predicted infection

Red highlighting indicates SIR for reporting period is significantly higher than 2015 national SIR of 1.0

Green highlighting indicates SIR for reporting period is significantly lower than 2015 national SIR of 1.0

**Table 49: Microorganisms Identified from Surgical Site Infections (SSI) following Abdominal Hysterectomy (HYST) Procedures, Tennessee, 01/01/2017 - 12/31/2017**

**Number of isolates=143; Number of events=128**

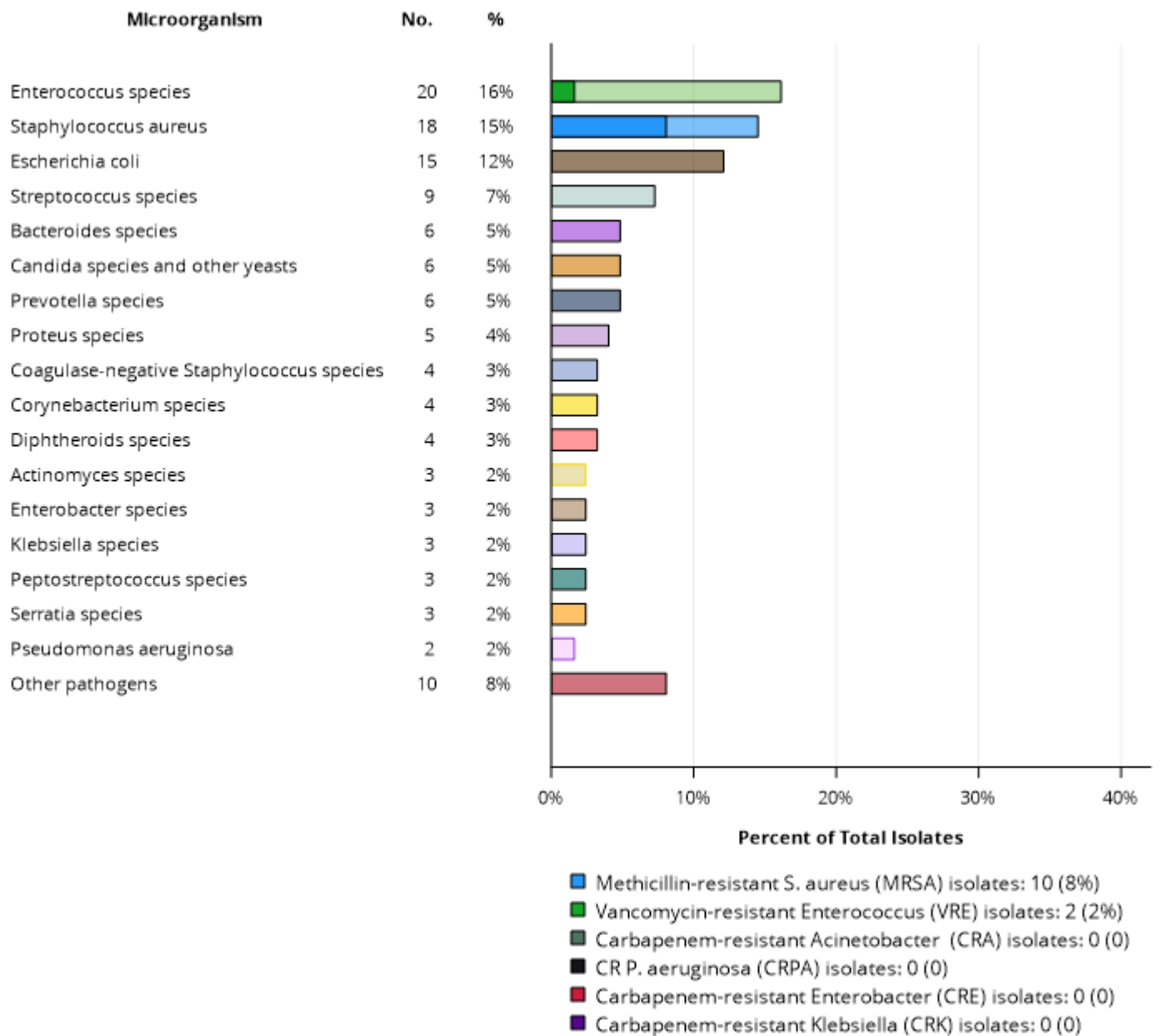


Data reported as of June 20, 2019

Other pathogens = Actinomyces spp., Alpha-hemolytic spp., Anaerobic spp., Anaerococcus spp., Bifidobacterium spp., Candida spp., Clostridium spp., Coronavirus spp., Corynebacterium spp., Fusobacterium spp., Gram-negative spp., Kluyvera spp., Lactobacillus spp., Other Staphylococcus spp.

**Table 50: Microorganisms Identified from Surgical Site Infections (SSI) following Abdominal Hysterectomy (HYST) Procedures, Tennessee, 01/01/2018 - 12/31/2018**

**Number of isolates=124; Number of events=105**

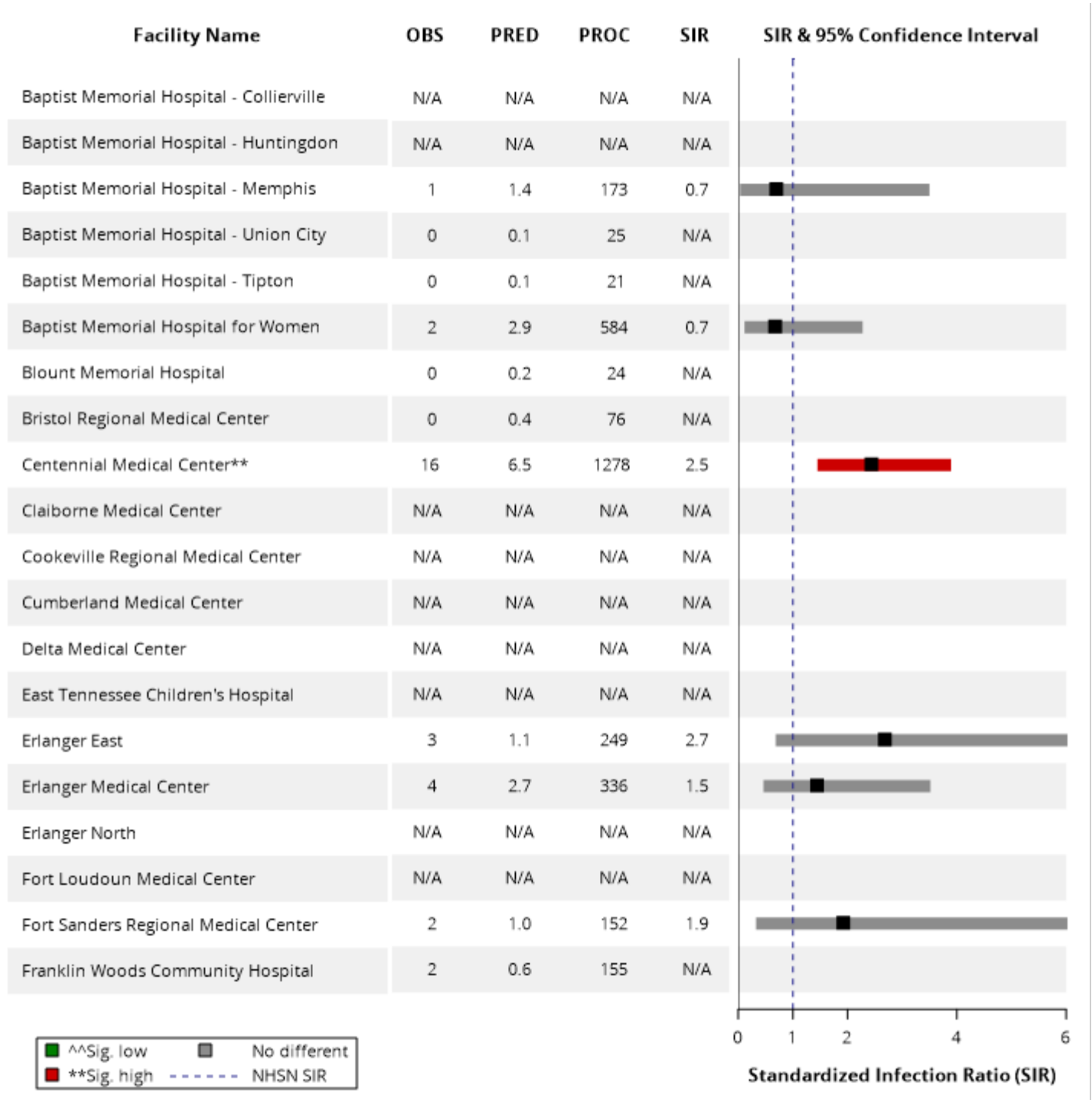


Data reported as of June 20, 2019

Other pathogens = Citrobacter spp., Clostridium spp., Gram-negative spp., Gram-positive spp., Haemophilus spp., Lactobacillus spp., Morganella spp., Parabacteroides spp., Peptoniphilus spp., Propionibacterium spp.



**Figure 69: Abdominal Hysterectomy (HYST) Complex Admission/Readmission Surgical Site Infection (SSI) Standardized Infection Ratios (SIRs) in Acute Care Facilities, Tennessee, 01/01/2017 – 12/31/2017**



Data Reported as of June 20, 2019

OBS = observed number of SSI; PRED = statistically 'predicted' number of SSI, based on NHSN baseline data

SIR = standardized infection ratio (observed/predicted number of SSI); PROC = number of procedures performed

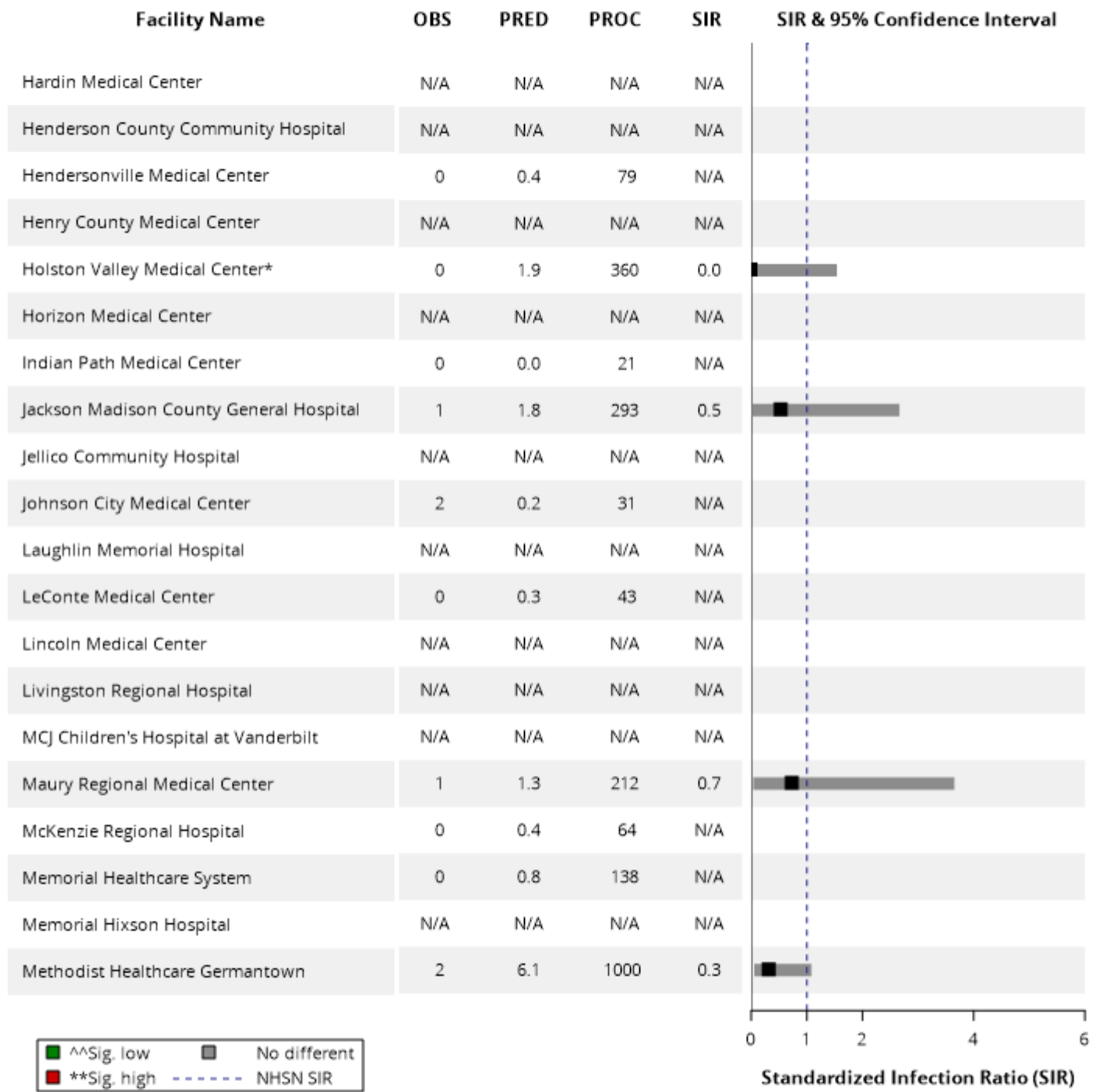
N/A = Data not shown for facilities with <20 procedures performed / SIR not calculated for facilities with <1 predicted infection

\*\* Significantly higher than 2015 national baseline

^^ Significantly lower than 2015 national baseline

\* Zero infections, but not statistically significant

Figure 69 (cont'd)



Data Reported as of June 20, 2019

OBS = observed number of SSI; PRED = statistically 'predicted' number of SSI, based on NHSN baseline data

SIR = standardized infection ratio (observed/predicted number of SSI); PROC = number of procedures performed

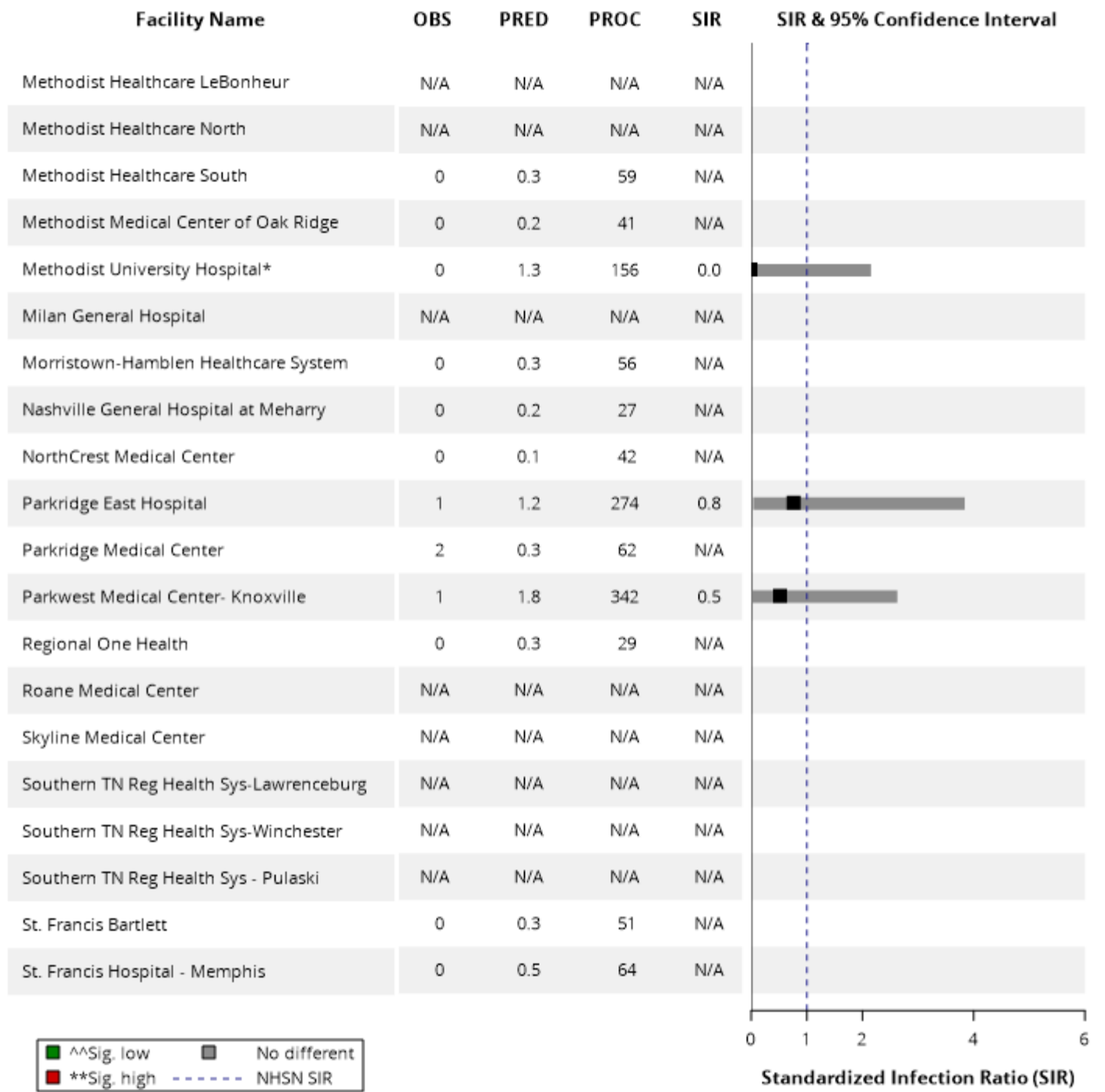
N/A = Data not shown for facilities with <20 procedures performed / SIR not calculated for facilities with <1 predicted infection

\*\* Significantly higher than 2015 national baseline

^^ Significantly lower than 2015 national baseline

\* Zero infections, but not statistically significant

Figure 69 (cont'd)



Data Reported as of June 20, 2019

OBS = observed number of SSI; PRED = statistically 'predicted' number of SSI, based on NHSN baseline data

SIR = standardized infection ratio (observed/predicted number of SSI); PROC = number of procedures performed

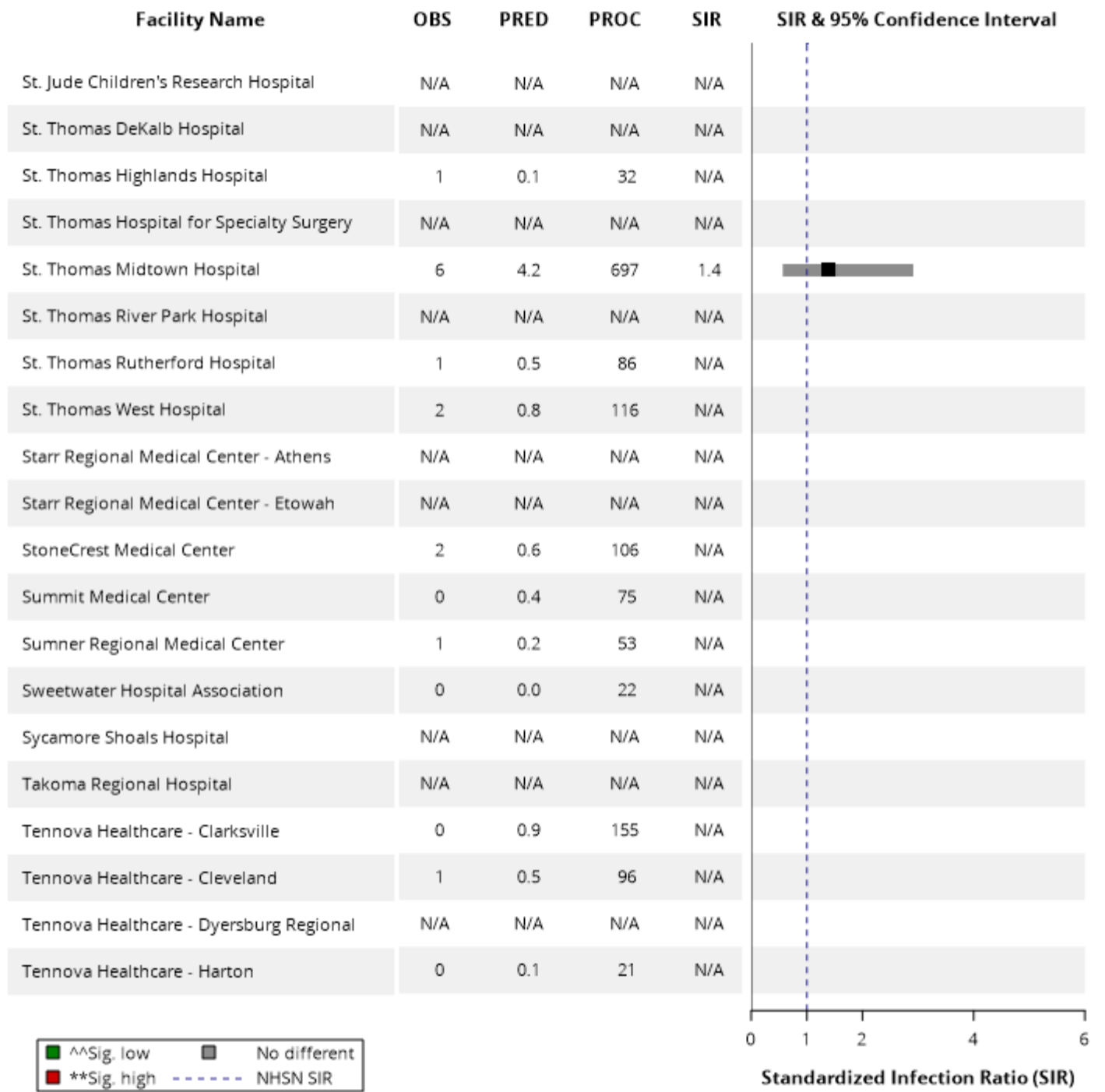
N/A = Data not shown for facilities with <20 procedures performed / SIR not calculated for facilities with <1 predicted infection

\*\* Significantly higher than 2015 national baseline

^^ Significantly lower than 2015 national baseline

\* Zero infections, but not statistically significant

**Figure 69 (cont'd)**



Data Reported as of June 20, 2019

OBS = observed number of SSI; PRED = statistically 'predicted' number of SSI, based on NHSN baseline data

SIR = standardized infection ratio (observed/predicted number of SSI); PROC = number of procedures performed

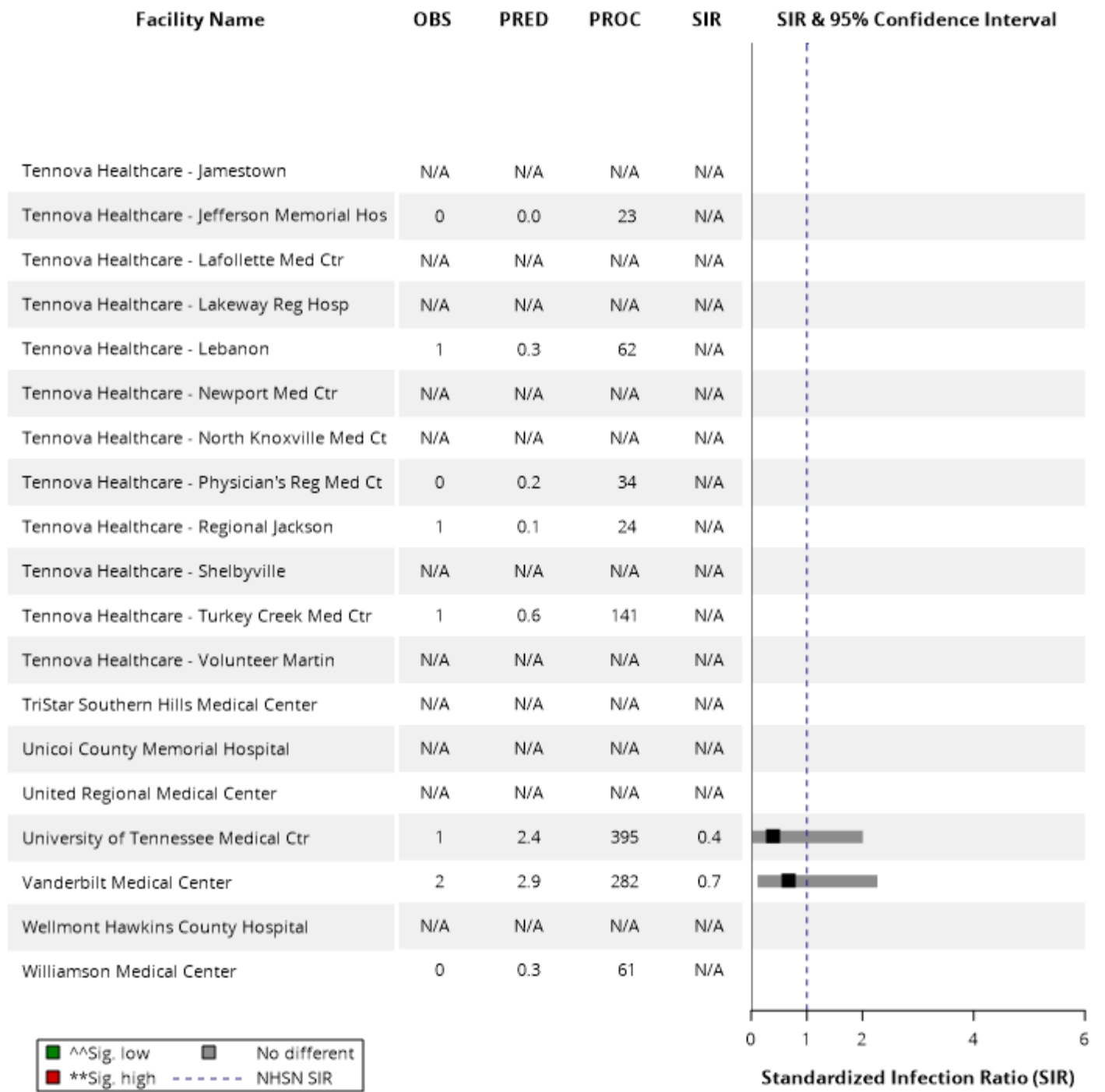
N/A = Data not shown for facilities with <20 procedures performed / SIR not calculated for facilities with <1 predicted infection

\*\* Significantly higher than 2015 national baseline

^^ Significantly lower than 2015 national baseline

\* Zero infections, but not statistically significant

Figure 69 (cont'd)



Data Reported as of June 20, 2019

OBS = observed number of SSI; PRED = statistically 'predicted' number of SSI, based on NHSN baseline data

SIR = standardized infection ratio (observed/predicted number of SSI); PROC = number of procedures performed

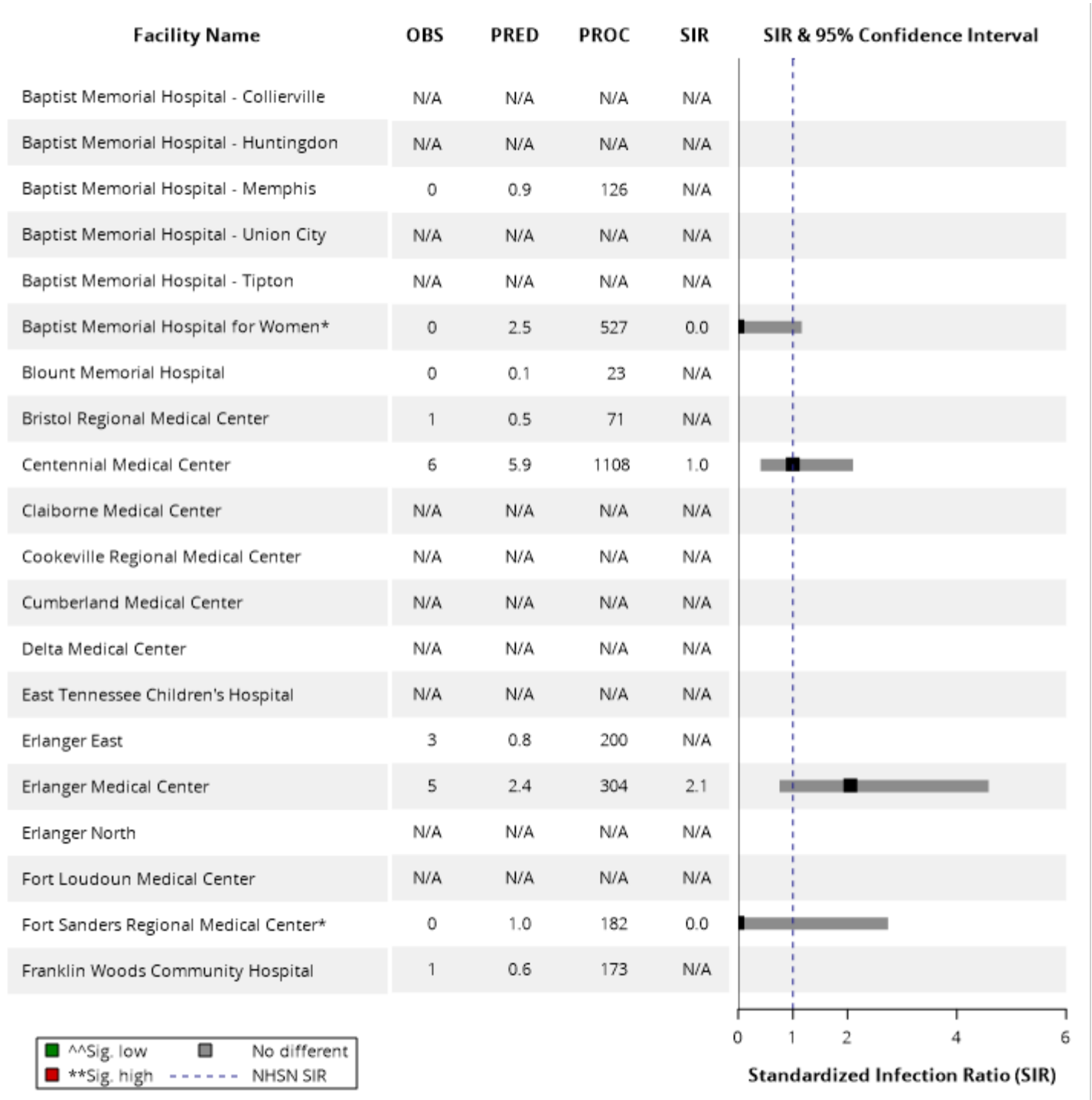
N/A = Data not shown for facilities with <20 procedures performed / SIR not calculated for facilities with <1 predicted infection

\*\* Significantly higher than 2015 national baseline

^^ Significantly lower than 2015 national baseline

\* Zero infections, but not statistically significant

**Figure 70: Abdominal Hysterectomy (HYST) Complex Admission/Readmission Surgical Site Infection (SSI) Standardized Infection Ratios (SIRs) in Acute Care Facilities, Tennessee, 01/01/2018 – 12/31/2018**



Data Reported as of June 20, 2019

OBS = observed number of SSI; PRED = statistically 'predicted' number of SSI, based on NHSN baseline data

SIR = standardized infection ratio (observed/predicted number of SSI); PROC = number of procedures performed

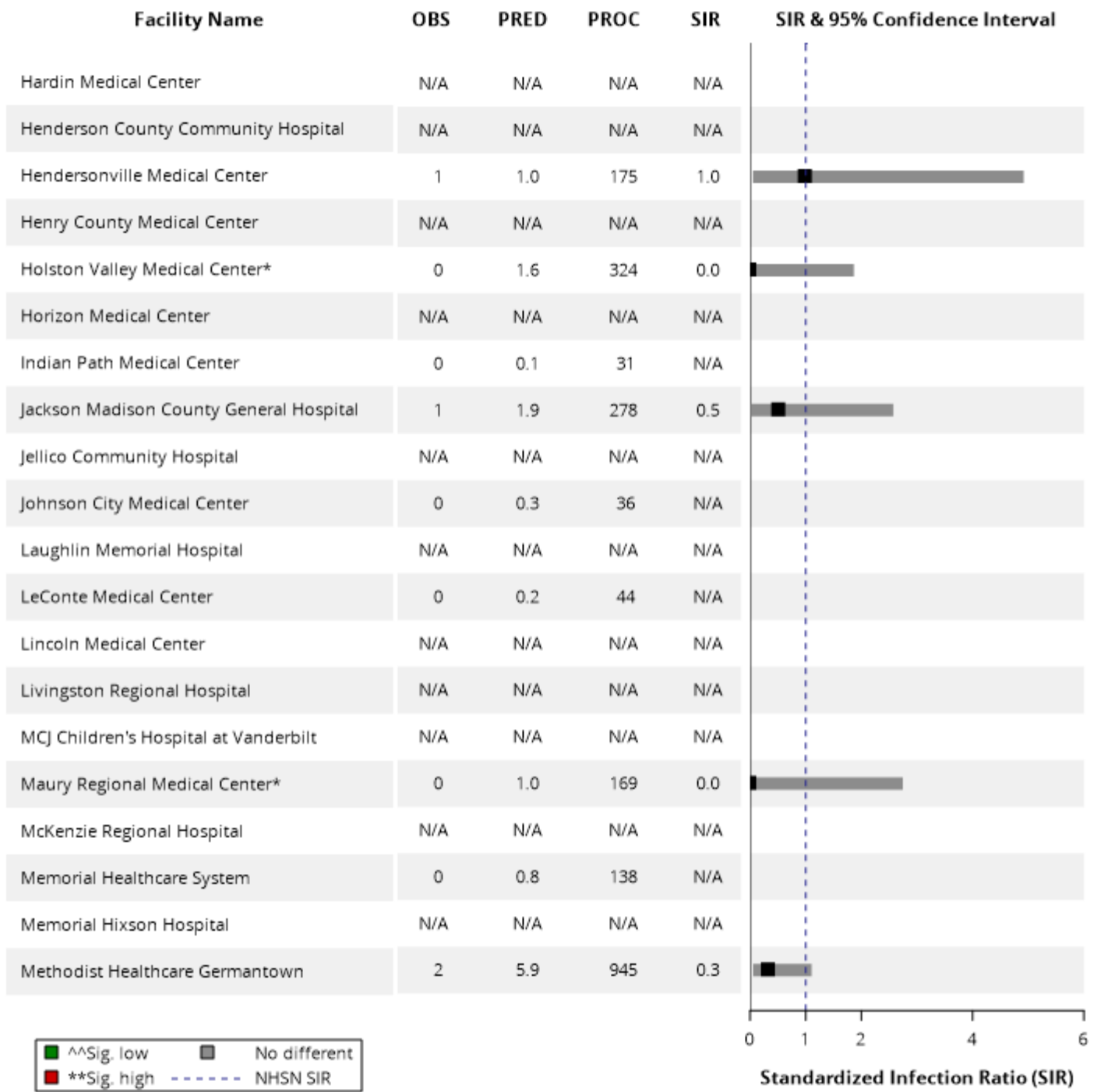
N/A = Data not shown for facilities with <20 procedures performed / SIR not calculated for facilities with <1 predicted infection

\*\* Significantly higher than 2015 national baseline

^^ Significantly lower than 2015 national baseline

\* Zero infections, but not statistically significant

Figure 70 (cont'd)



Data Reported as of June 20, 2019

OBS = observed number of SSI; PRED = statistically 'predicted' number of SSI, based on NHSN baseline data

SIR = standardized infection ratio (observed/predicted number of SSI); PROC = number of procedures performed

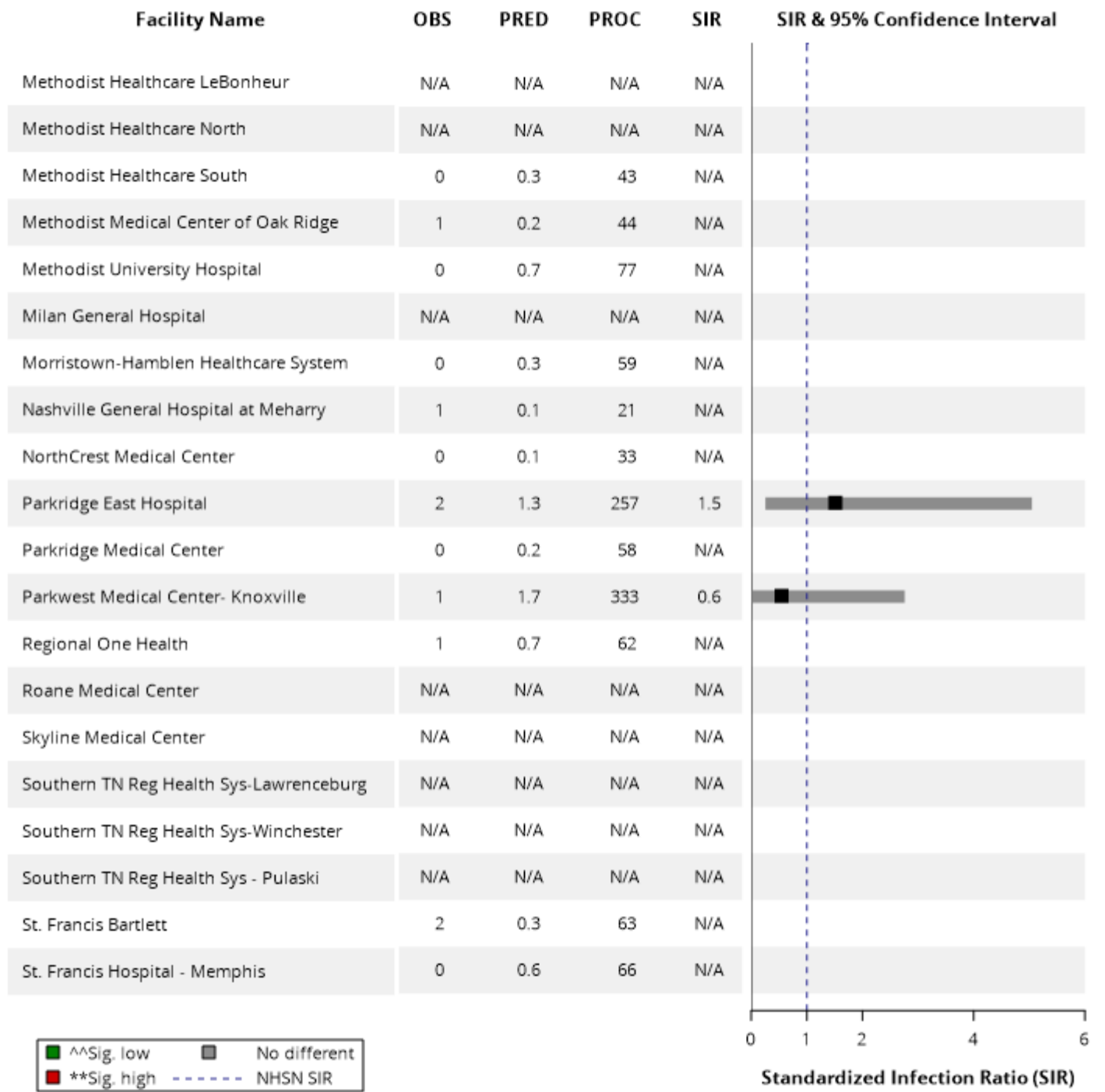
N/A = Data not shown for facilities with <20 procedures performed / SIR not calculated for facilities with <1 predicted infection

\*\* Significantly higher than 2015 national baseline

^^ Significantly lower than 2015 national baseline

\* Zero infections, but not statistically significant

Figure 70 (cont'd)



Data Reported as of June 20, 2019

OBS = observed number of SSI; PRED = statistically 'predicted' number of SSI, based on NHSN baseline data

SIR = standardized infection ratio (observed/predicted number of SSI); PROC = number of procedures performed

N/A = Data not shown for facilities with <20 procedures performed / SIR not calculated for facilities with <1 predicted infection

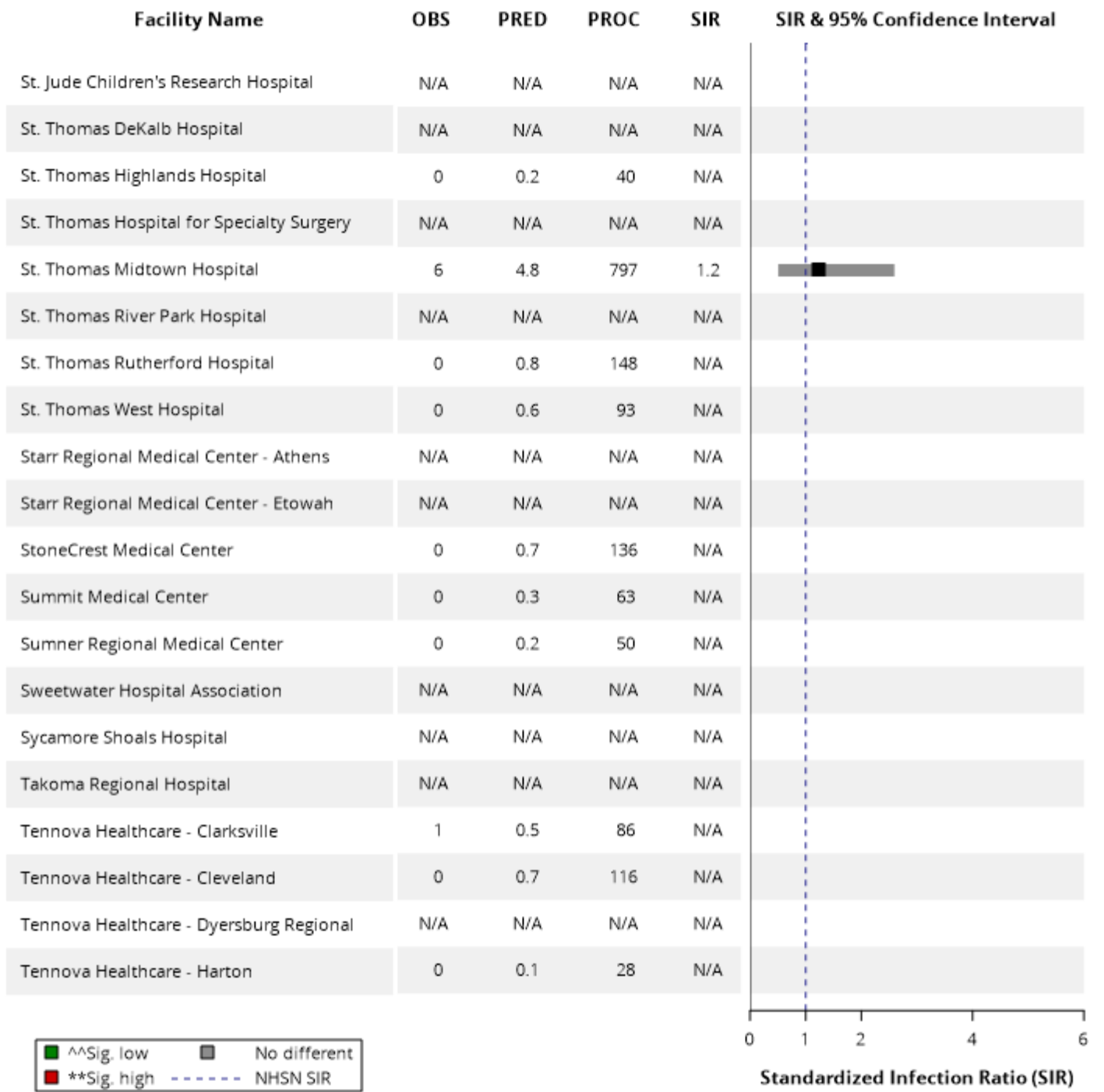
\*\* Significantly higher than 2015 national baseline

^^ Significantly lower than 2015 national baseline

\* Zero infections, but not statistically significant



Figure 70 (cont'd)



Data Reported as of June 20, 2019

OBS = observed number of SSI; PRED = statistically 'predicted' number of SSI, based on NHSN baseline data

SIR = standardized infection ratio (observed/predicted number of SSI); PROC = number of procedures performed

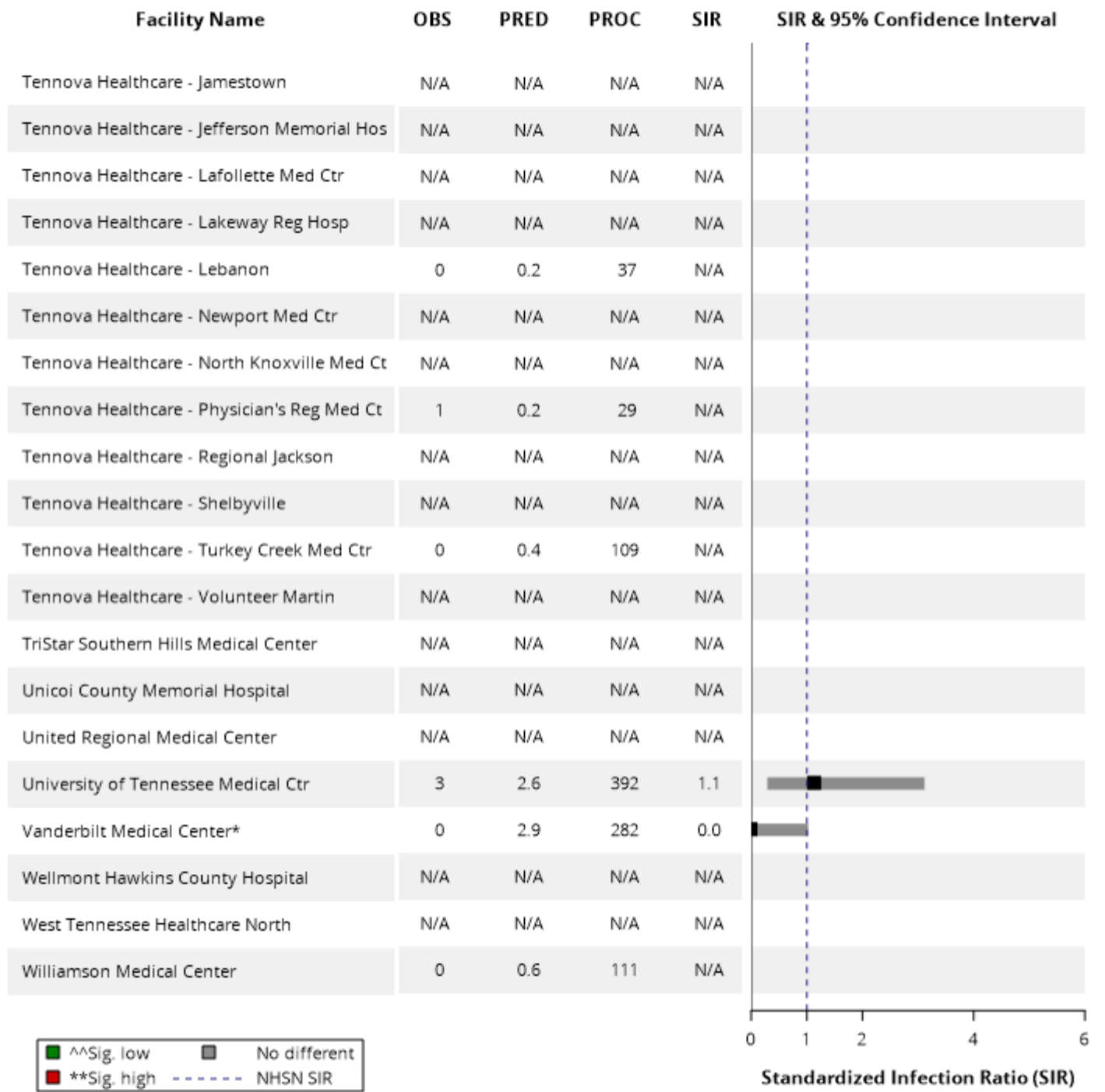
N/A = Data not shown for facilities with <20 procedures performed / SIR not calculated for facilities with <1 predicted infection

\*\* Significantly higher than 2015 national baseline

^^ Significantly lower than 2015 national baseline

\* Zero infections, but not statistically significant

Figure 70 (cont'd)



Data Reported as of June 20, 2019

OBS = observed number of SSI; PRED = statistically 'predicted' number of SSI, based on NHSN baseline data

SIR = standardized infection ratio (observed/predicted number of SSI); PROC = number of procedures performed

N/A = Data not shown for facilities with <20 procedures performed / SIR not calculated for facilities with <1 predicted infection

\*\* Significantly higher than 2015 national baseline

^^ Significantly lower than 2015 national baseline

\* Zero infections, but not statistically significant

**Methicillin-Resistant *Staphylococcus aureus* (MRSA)  
Bacteremia Laboratory-Identified Events**

## ***Methicillin-Resistant Staphylococcus aureus (MRSA) Bacteremia***

Methicillin-Resistant *Staphylococcus aureus* (MRSA) is a type of *Staphylococcus* bacteria that is resistant to many antibiotics. MRSA can be spread via contaminated surfaces or equipment and on the hands of healthcare personnel. When MRSA enters the bloodstream, also known as MRSA bacteremia, it can cause severe and life-threatening bloodstream infections. Healthcare facilities can prevent MRSA infections by following infection prevention recommendations, including hand hygiene, environmental cleaning, and contact precautions to prevent the spread of MRSA in the healthcare setting (see [Patient Guide on MRSA](#)<sup>29</sup>).

### **MRSA Bacteremia LabID Events Reporting Requirements**

MRSA bacteremia Laboratory-Identified (LabID) Events have been reportable to TDH since July 2010 from acute care hospitals (facility-wide inpatient locations and emergency departments) and long-term acute care hospitals (facility-wide inpatient locations). Hospitals with an average daily census less than 25 were exempt from this requirement until July 2012. Inpatient rehabilitation facilities (facility-wide inpatient locations) have been required to report since 2015.

To comply with these reporting requirements, facilities are required to follow the [NHSN Multidrug-Resistant Organism & Clostridium difficile Infection LabID Event Surveillance protocol](#)<sup>30</sup>, which is updated each year with MRSA bacteremia LabID event surveillance definitions and reporting instructions. Facilities must report the total number of admissions and patient days (for all facility-wide inpatient locations), or patient encounters (for Emergency Department reporting) each month to NHSN. They are also required to report any positive MRSA blood cultures which meet the NHSN surveillance definition of a MRSA bacteremia LabID event.

### **Changes to Surveillance Definitions**

In January 2015, NHSN added a new rule that facilities participating in facility-wide inpatient locations (FacWideIN) LabID Event reporting would be required to map and report outpatient LabID Events from emergency departments and 24-hour observation locations for the same organism and LabID Event type. This meant that facilities no longer assigned the admitting inpatient location to LabID Events when specimens are collected in the emergency department or 24-hour observation location on the same calendar day as inpatient admission. This rule facilitates accurate categorization of LabID Events, as well as allows each facility to capture community-onset cases.

<sup>29</sup> [http://www.cdc.gov/mrsa/pdf/SHEA-mrsa\\_tagged.pdf](http://www.cdc.gov/mrsa/pdf/SHEA-mrsa_tagged.pdf)

<sup>30</sup> [http://www.cdc.gov/nhsn/PDFs/pscManual/12pscMDRO\\_CDADcurrent.pdf](http://www.cdc.gov/nhsn/PDFs/pscManual/12pscMDRO_CDADcurrent.pdf)

## Facility-Specific Data Thresholds

To ensure fair and accurate reporting of facility-specific healthcare facility-onset MRSA bacteremia LabID events standardized infection ratios (SIR), TDH has adopted the NHSN minimum thresholds for reporting. To report a facility-specific SIR, the statistically predicted number of infections must be at least 1.0.

## MRSA Bacteremia LabID Events Risk Adjustment

Recently, CDC introduced the SIR “rebaseline,” a term that is being used to describe updates to the previous (or original) HAI baselines. CDC used 2015 HAI data to create the updated SIR baselines, which includes updates to both the source of aggregate data and the risk adjustment methodology used to calculate the number of predicted events. Before 2015, the time period used to establish the baseline, or reference points, varied among the different HAI measures. Thus, in previous TN HAI reports, the number of predicted infections was estimated based on those original baselines. Therefore, the data in this report are not comparable with previous HAI reports. Further details can be seen in the [NHSN Guide to the SIR.](#)<sup>31</sup>

Risk adjustment for healthcare facility-onset Methicillin-Resistant *Staphylococcus aureus* (MRSA) bacteremia is calculated using negative binomial regression based on facility-level characteristics, including MRSA community-onset prevalence rate, average length of stay, facility type, ICU bed size, and outpatient community-onset prevalence rate. The negative binomial regression model is based on national NHSN data from 2015.

This report displays crude (unadjusted) rates of healthcare facility-onset (HO) incidence and community-onset (CO) admission prevalence of MRSA bacteremia. Standardized infection ratios (SIRs) are displayed for LabID events in acute care hospitals beginning January 2015.

**Crude (unadjusted) healthcare facility-onset (HO) incidence rates** are calculated as follows:

$$\text{HO Incidence Rate} = \frac{\text{Number of HO events}}{\text{Number of patient days}} \times 10,000$$

**Community-onset (CO) prevalence rates** are calculated as follows:

$$\text{CO Prevalence Rate} = \frac{\text{Number of CO events}}{\text{Number of admissions}} \times 1,000$$

<sup>31</sup> <https://www.cdc.gov/nhsn/pdfs/ps-analysis-resources/nhsn-sir-guide.pdf>

**MRSA Bacteremia Laboratory-Identified Events**  
*Acute Care Hospitals*

## MRSA Bacteremia LabID Events in Acute Care Hospitals:

**Total number of facilities reporting from January-December 2017: 106**

**Total number of facilities reporting from January-December 2018: 107**

### **SIRs by Quarter (Figure 71, Figure 72)**

- From January-December 2017 the overall healthcare-onset MRSA bacteremia LabID SIR in acute care hospitals fluctuated with a low of 1.05 during April-June and high of 1.15 in July-September. From January-December 2018, the overall healthcare-onset MRSA bacteremia LabID SIR in acute care hospitals fluctuated with a low of 1.18 during April-June and high of 1.43 July-September.
- The U.S. Department of Health and Human Services' [National Action Plan to Prevent Healthcare-Associated Infections](#)<sup>32</sup> prevention target for healthcare-onset MRSA bacteremia LabID is an SIR = 0.50. In 2017 and 2018, the MRSA LabID SIR remained above the national baseline and the 2020 HHS prevention target of 0.50 by fluctuating between an SIR of 1.02 and 1.43.

### **Healthcare Facility-Onset and Community-Onset MRSA LabID Rates (Figure 73, Table 51)**

- The healthcare facility-onset MRSA LABID incidence rate was 0.72 per 10,000 patient days in 2017 and increased to an incidence rate of 0.91 per 10,000 patient days in 2018.
- The prevalence of community-onset MRSA bacteremia LabID events for 2017 was 0.89 per 1,000 admissions; the prevalence of community-onset MRSA increased in 2018 with a pooled mean rate of 0.96 per 1,000 admissions.

### **Key percentiles for Tennessee SIRs (Table 52)**

- The overall healthcare-onset MRSA bacteremia LabID SIR for acute care hospitals in Tennessee from January-December 2017 was not statistically significantly different than the 2015 national SIR of 1 (SIR=1.08; 95% CI: 0.96, 1.21). The 2018 SIR was statistically significantly higher than the 2015 national SIR of 1 (SIR=1.29; 95% CI: 1.17, 1.43).
- From January-December 2017, the median healthcare-onset MRSA bacteremia LabID SIR for acute care hospitals was 0.99 indicating that half of reporting facilities with at least 1 predicted

<sup>32</sup> [http://www.health.gov/hai/prevent\\_hai.asp](http://www.health.gov/hai/prevent_hai.asp)

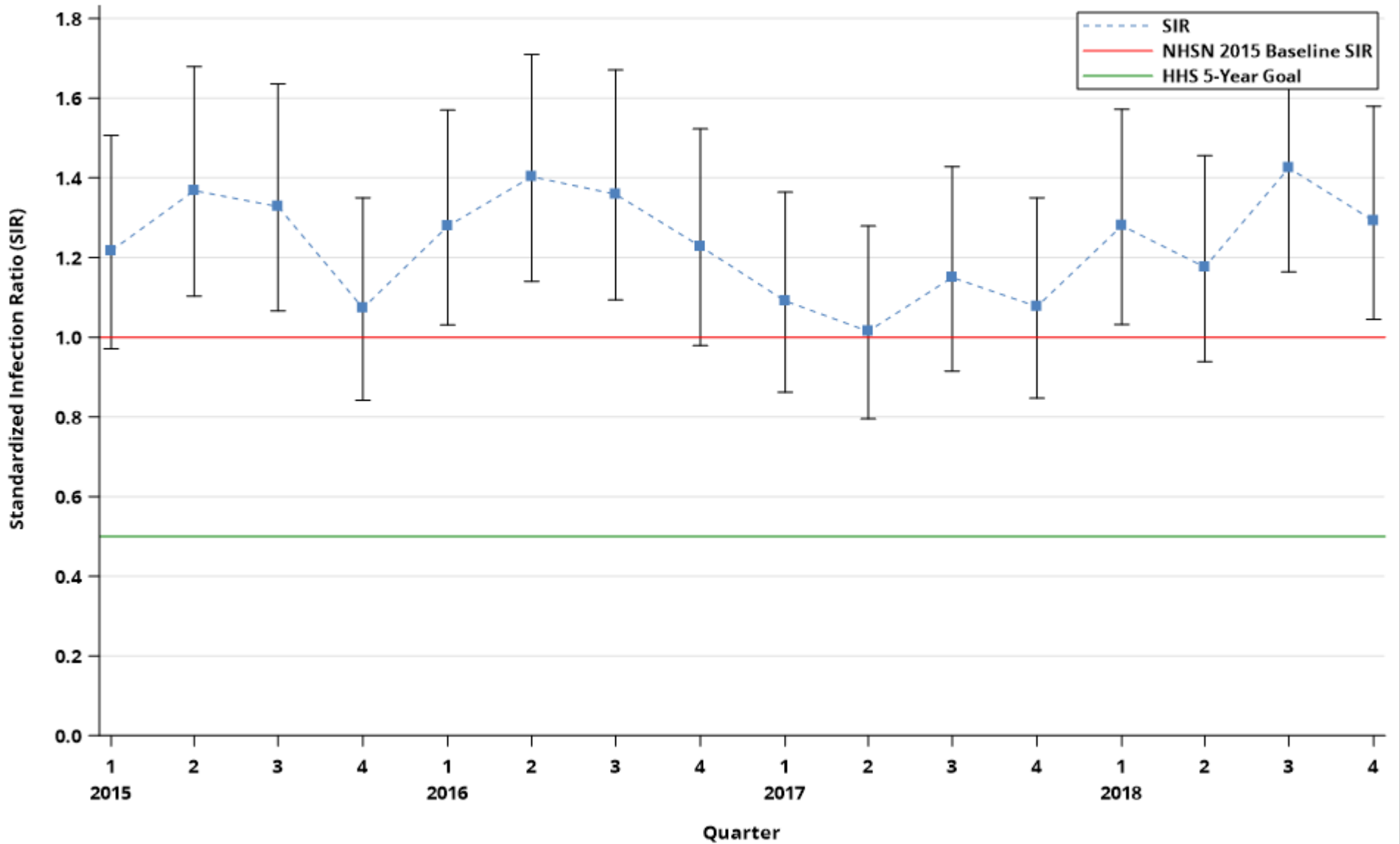
infection had a healthcare-onset MRSA LabID SIR at or below 0.99. From January-December 2018, the median healthcare-onset MRSA bacteremia LabID SIR for acute care hospitals was 1.01.

***Facility-Specific SIRs (Figure 74, Figure 75)***

- The healthcare facility-onset MRSA bacteremia LabID event SIR for January-December 2017 and 2018 for each acute care facility is displayed in [Figure 74](#) and [Figure 75](#). The bar representing the confidence interval is green if the was significantly lower than the 2015 national SIR of 1 and red if the SIR was significantly higher than 1. Some hospitals reported zero events (indicated with an asterisk), although the facility's SIR may not be statistically significant due to a relatively small number of patient days.
- In 2017, 5 facilities had a healthcare facility-onset MRSA bacteremia LabID event SIR that was statistically significantly higher than the 2015 national baseline SIR of 1. Two facilities had an MRSA bacteremia LabID event SIR that was statistically significantly lower. In 2018, 6 facilities had a healthcare facility-onset MRSA bacteremia LabID event SIR that was statistically significantly higher than the 2015 national baseline SIR of 1.

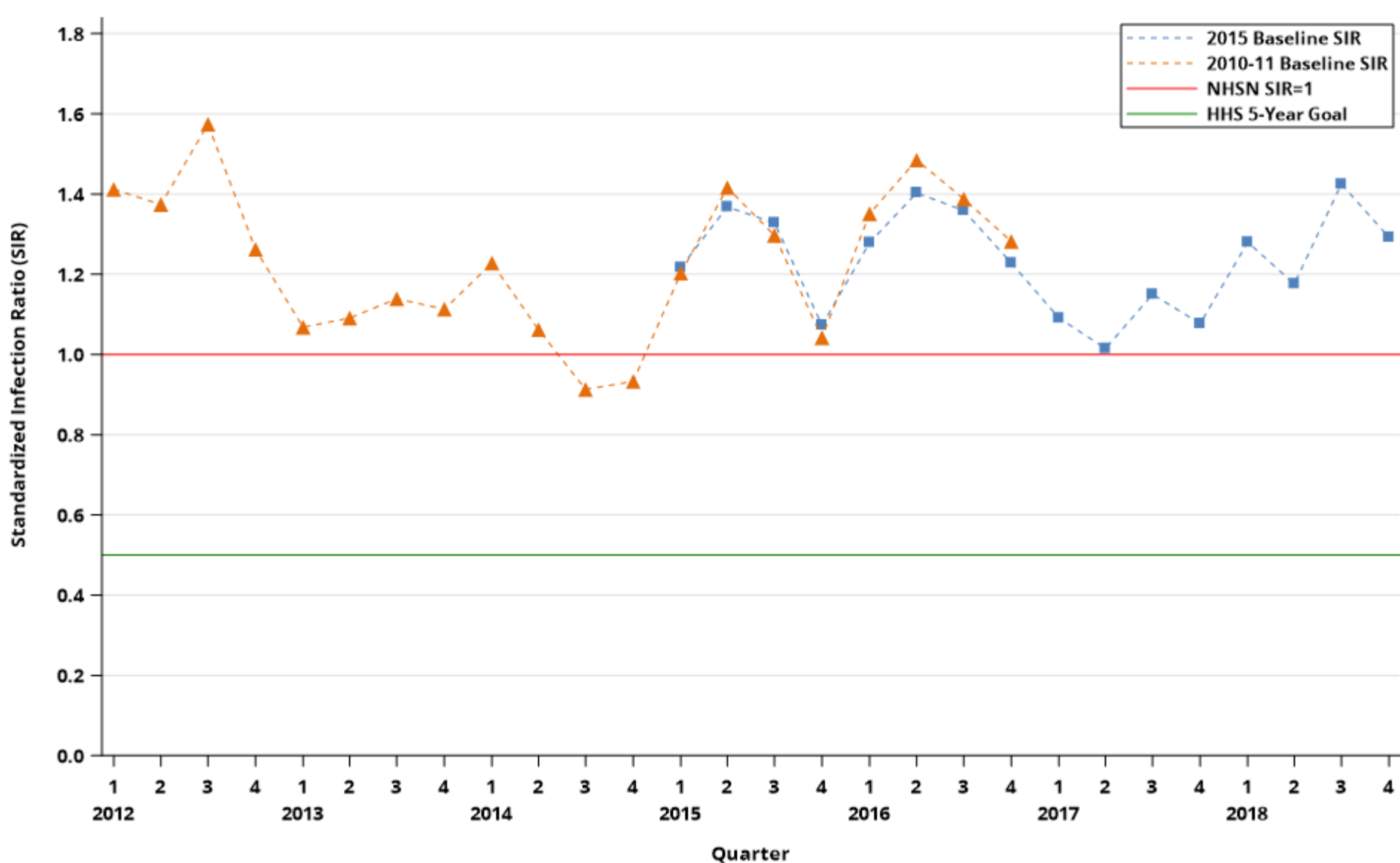


**Figure 71: Standardized Infection Ratio (SIR) for Healthcare-Onset Methicillin-resistant Staphylococcus aureus (MRSA) Bacteremia Laboratory-Identified (LabID) Events for Acute Care Hospitals by Quarter, Tennessee, 01/01/2015–12/31/2018 [Reference standard: National Healthcare Safety Network (NHSN), 2015]**



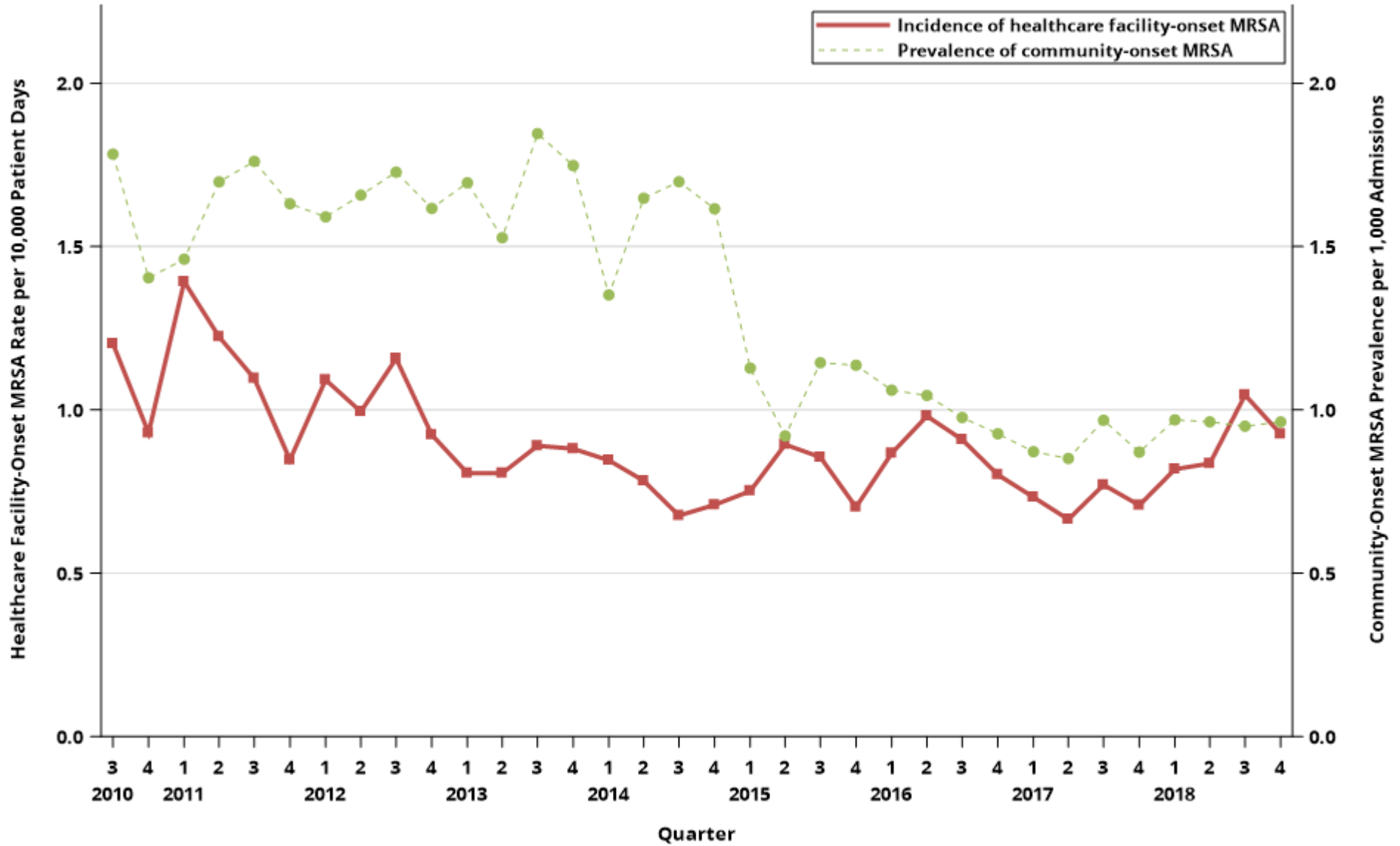
Data Reported as of June 20, 2019

Figure 72: Standardized Infection Ratio (SIR) for Healthcare-Onset Methicillin-resistant Staphylococcus aureus (MRSA) Bacteremia Laboratory-Identified (LabID) Events for Acute Care Hospitals by Quarter, Tennessee, 01/01/2012–12/31/2018



Data Reported as of June 20, 2019

Figure 73: Methicillin-resistant Staphylococcus aureus (MRSA) Bacteremia Laboratory-Identified (LabID) Events Pooled Mean Incidence and Prevalence Rates in Acute Care Hospitals by Quarter, Tennessee, 07/01/2010-12/31/2018



Data Reported as of June 20, 2019

**Table 51: Methicillin-resistant Staphylococcus aureus (MRSA) Laboratory-Identified (LabID) Events Pooled Mean Incidence and Prevalence Rates in Acute Care Hospitals by Year, Tennessee, 01/01/2017 - 12/31/2018**

			Healthcare Facility-Onset Incidence <sup>1</sup>	Community-Onset Prevalence <sup>2</sup>
STATE	YEAR	No.	POOLED MEAN	POOLED MEAN
Tennessee	2018	106	0.91	0.96
	2017	105	0.72	0.89

Data reported as of June 20, 2019

No. of facilities reporting

<sup>1</sup>Events per 10,000 patient days

<sup>2</sup>Events per 1,000 admissions

**Table 52: Healthcare-Onset Methicillin-resistant Staphylococcus aureus (MRSA) Laboratory-Identified (LabID) Events Standardized Infection Ratio (SIR) in Acute Care Hospitals by Reporting Year, Tennessee, 01/01/2017 - 12/31/2018**

									DISTRIBUTION OF FACILITY-SPECIFIC SIRs									
				No. of INFECTIONS		SIR AND 95% CONFIDENCE INTERVAL			No. of FACS WITH ≥1 PRED INFECTION		No. of FACS WITH SIR <1.0		No. of FACS WITH SIR >1.0					
STATE	YEAR	No.	PAT DAYS	OBS	PRED	SIR	LOWER LIMIT	UPPER LIMIT	N	%	N	%	10%	25%	50%	75%	90%	
Tennessee	2018	107	3,864,445	356	275.11	1.29	1.17	1.43	45	0	0%	6	13%	0.00	0.79	1.01	1.55	2.87
	2017	106	3,923,484	290	267.62	1.08	0.96	1.21	45	2	4%	5	11%	0.32	0.64	0.99	1.54	2.76

Data reported as of June 20, 2019

No. = number of facilities reporting; PAT DAYS = number of patient days; OBS = observed number of events

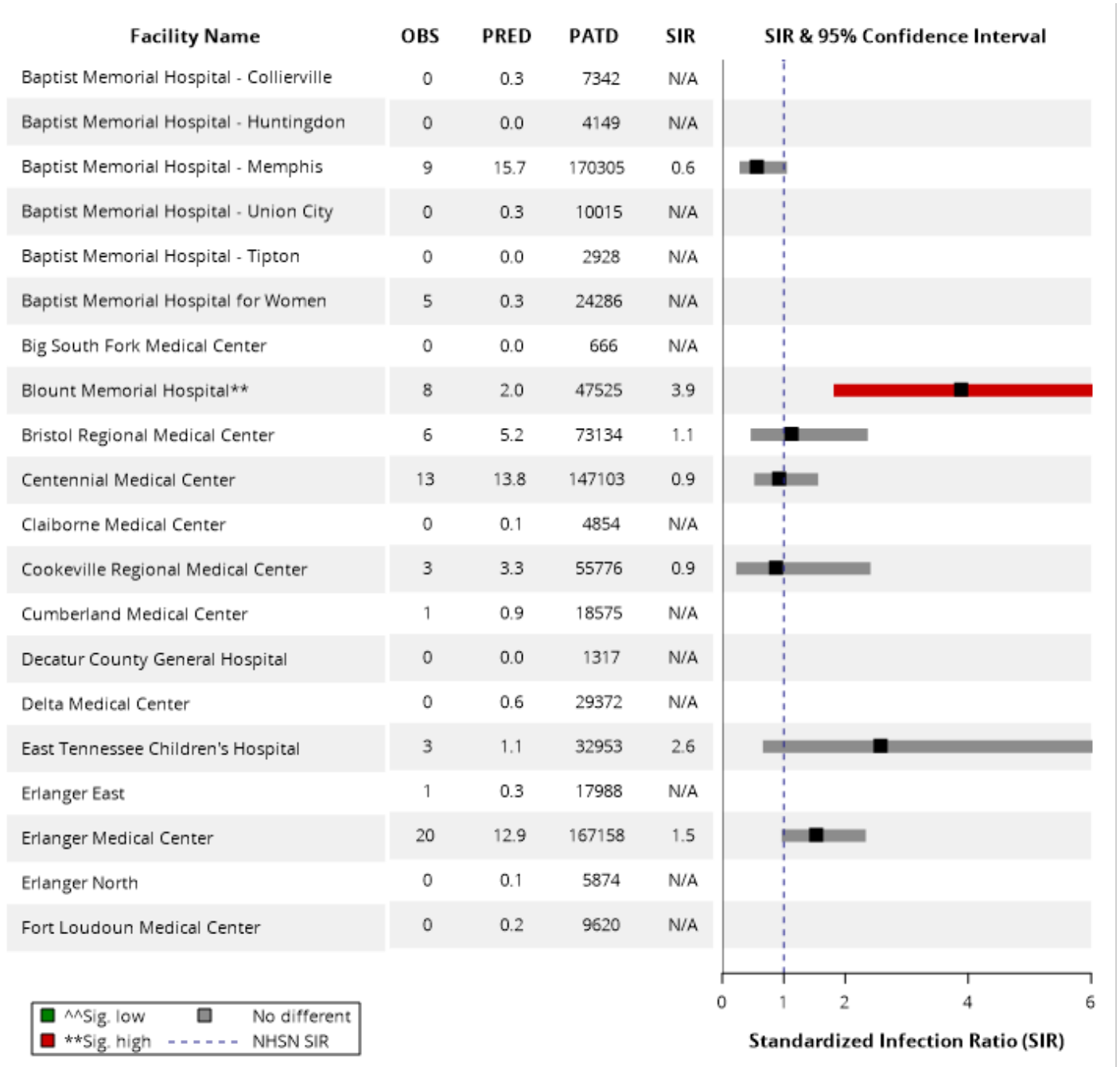
PRED = statistically 'predicted' number of events; SIR = Standardized Infection Ratio (observed/predicted number of events)

Key percentiles include facilities with at least one predicted infection

Red highlighting indicates SIR for reporting period is significantly higher than national 2015 SIR of 1.0

Green highlighting indicates SIR for reporting period is significantly lower than national 2015 SIR of 1.0

**Figure 74: Healthcare Facility-Onset Methicillin-resistant Staphylococcus aureus (MRSA) Laboratory-Identified (LabID) Event Standardized Infection Ratios (SIRs) in Acute Care Facilities, Tennessee, 01/01/2017 – 12/31/2017**



Data Reported as of June 20, 2019

N = number of types of units reporting

OBS = observed number of Healthcare Facility-Onset MRSA LabID Events

PRED = statistically 'predicted' number of events, based on NHSN baseline data

SIR = standardized infection ratio (observed/predicted number of events)

PATD = number of patient days

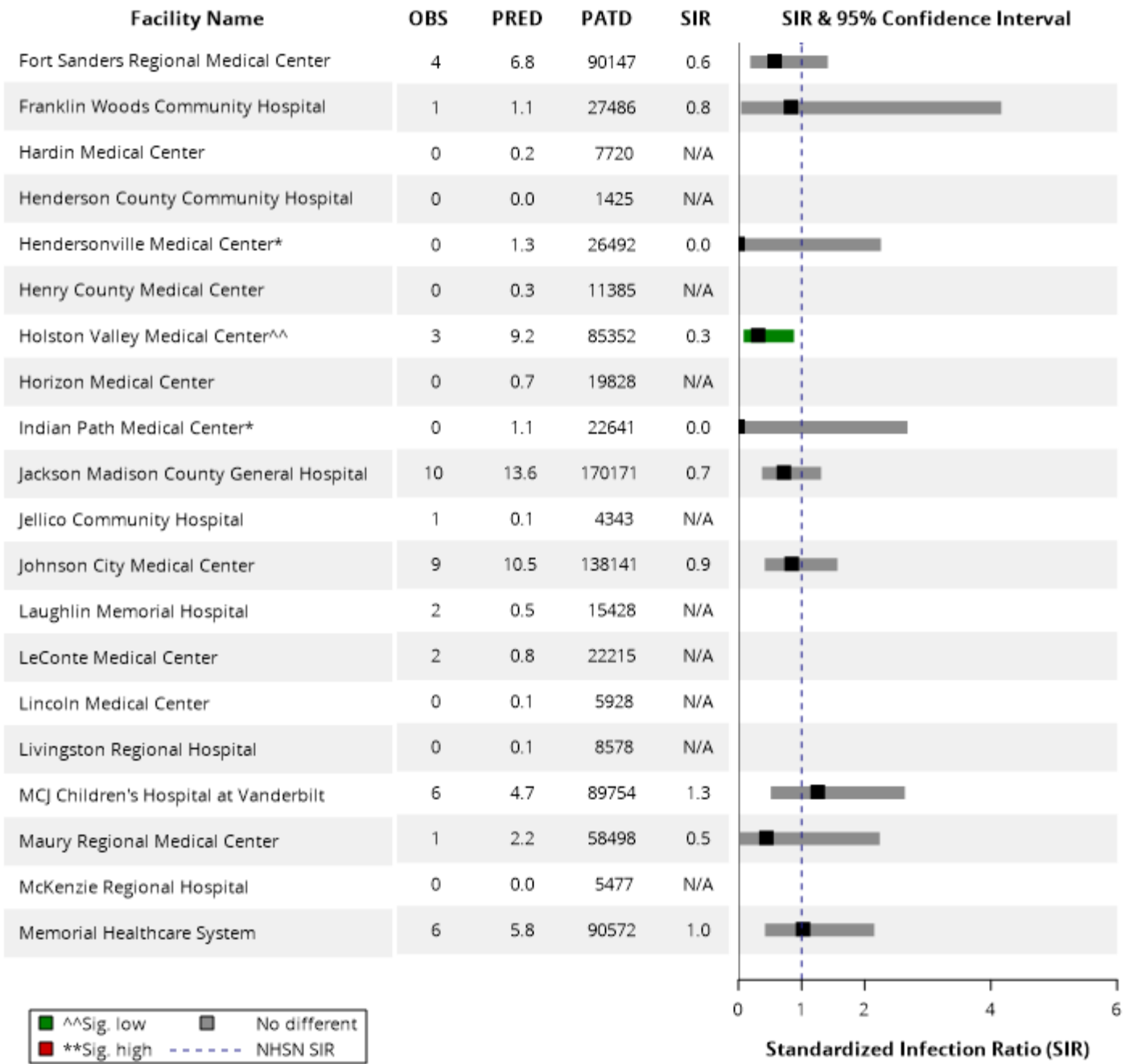
N/A = SIR not calculated for facilities with <1 predicted infection

\*\* Significantly higher than national baseline

^^ Significantly lower than national baseline

\* Zero events, but not statistically significant

Figure 74 (cont'd)



Data Reported as of June 20, 2019

N = number of types of units reporting

OBS = observed number of Healthcare Facility-Onset MRSA LabID Events

PRED = statistically 'predicted' number of events, based on NHSN baseline data

SIR = standardized infection ratio (observed/predicted number of events)

PATD = number of patient days

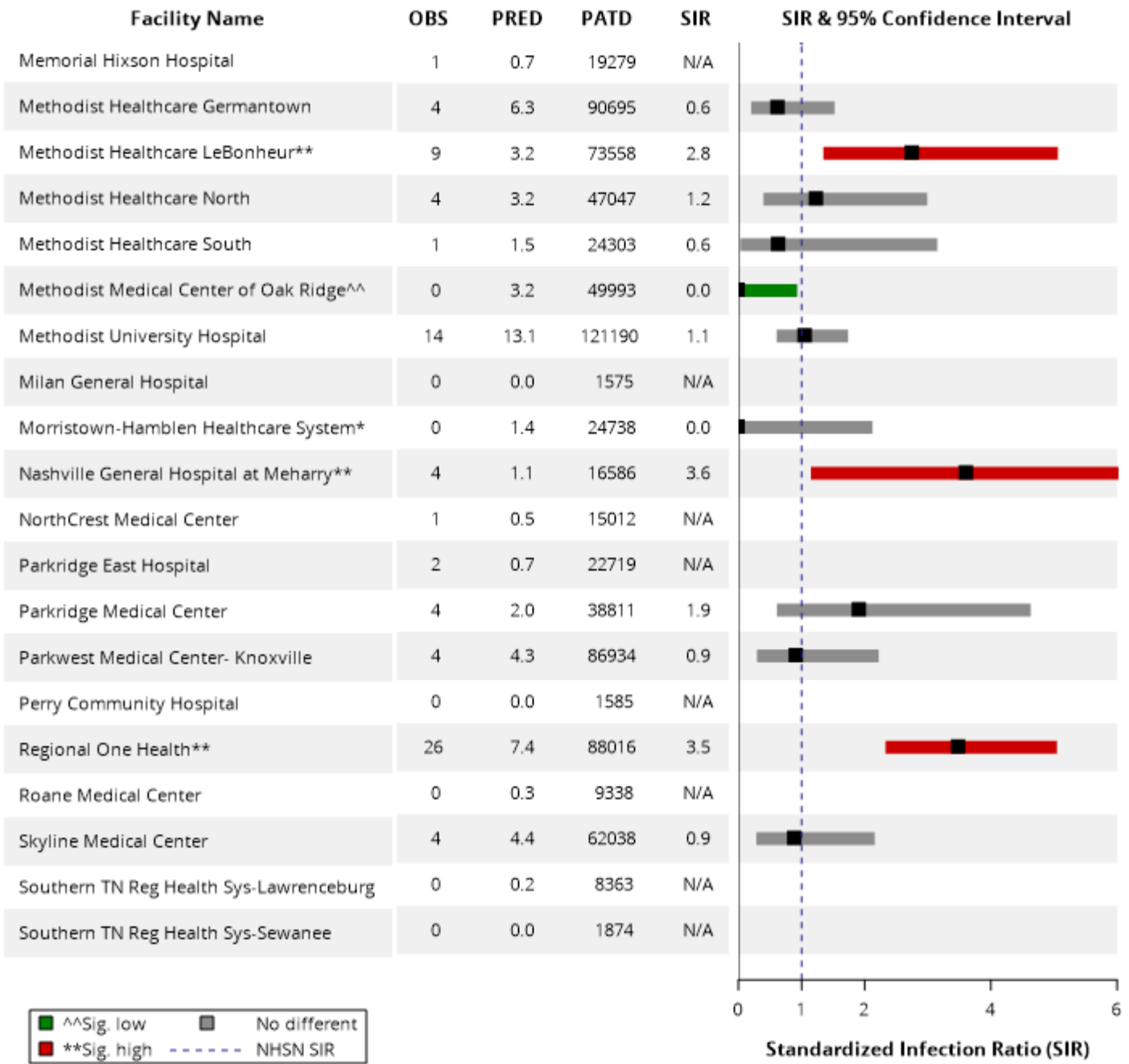
N/A = SIR not calculated for facilities with <1 predicted infection

\*\* Significantly higher than national baseline

^^ Significantly lower than national baseline

\* Zero events, but not statistically significant

Figure 74 (cont'd)



Data Reported as of June 20, 2019

N = number of types of units reporting

OBS = observed number of Healthcare Facility-Onset MRSA LabID Events

PRED = statistically 'predicted' number of events, based on NHSN baseline data

SIR = standardized infection ratio (observed/predicted number of events)

PATD = number of patient days

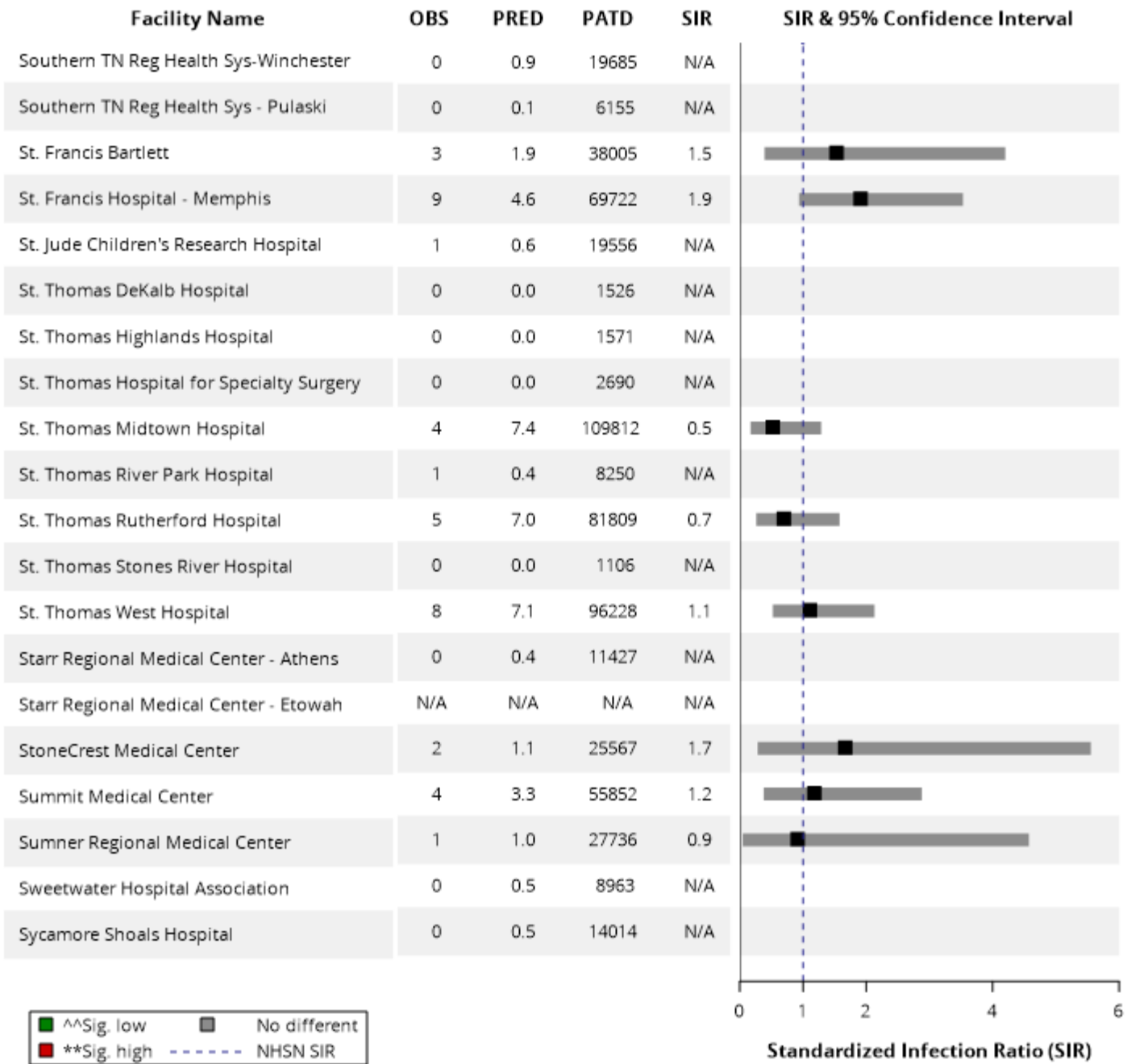
N/A = SIR not calculated for facilities with <1 predicted infection

\*\* Significantly higher than national baseline

^^ Significantly lower than national baseline

\* Zero events, but not statistically significant

Figure 74 (cont'd)



Data Reported as of June 20, 2019

N = number of types of units reporting

OBS = observed number of Healthcare Facility-Onset MRSA LabID Events

PRED = statistically 'predicted' number of events, based on NHSN baseline data

SIR = standardized infection ratio (observed/predicted number of events)

PATD = number of patient days

N/A = SIR not calculated for facilities with <1 predicted infection

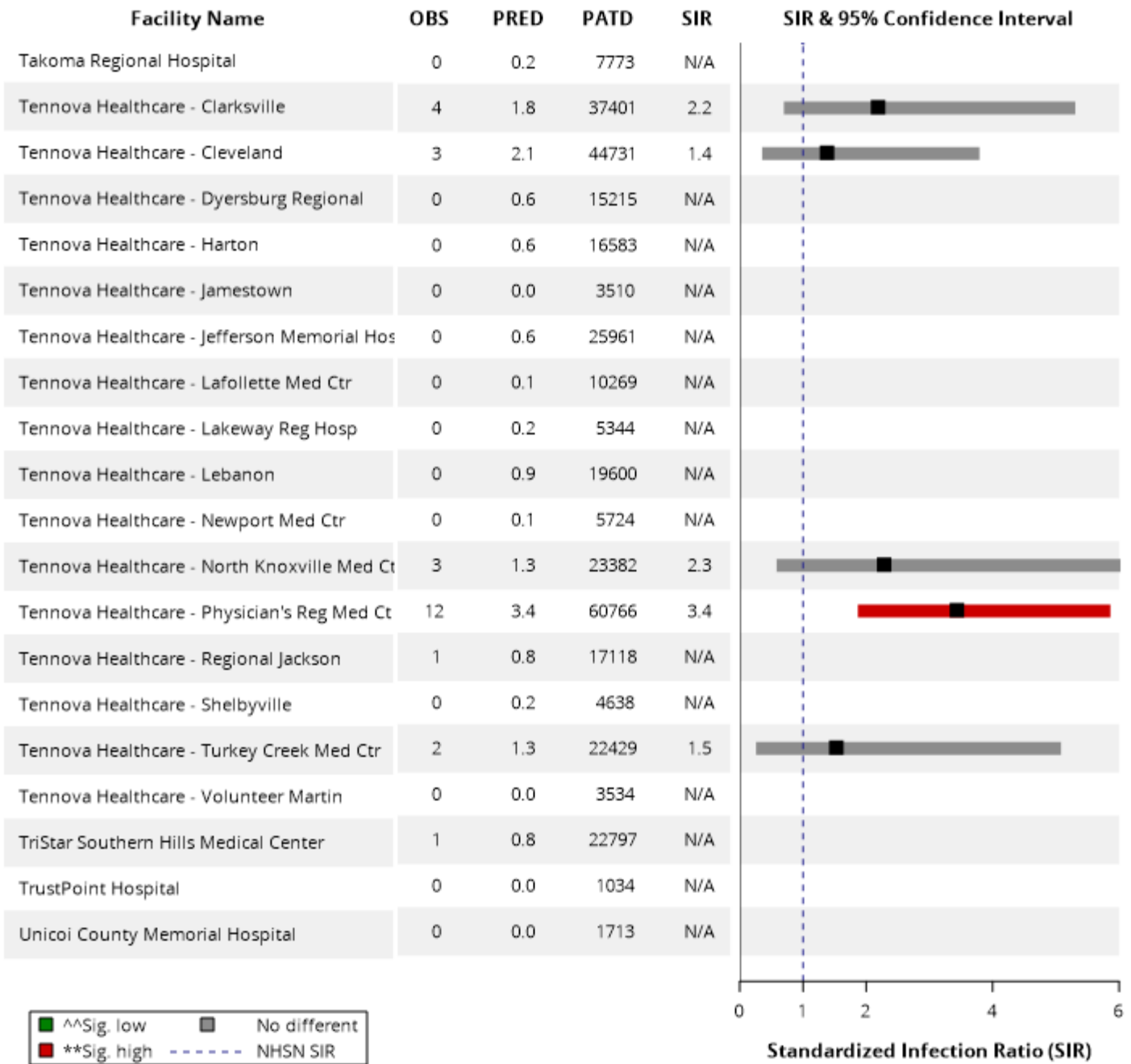
\*\* Significantly higher than national baseline

^^ Significantly lower than national baseline

\* Zero events, but not statistically significant



Figure 74 (cont'd)



Data Reported as of June 20, 2019

N = number of types of units reporting

OBS = observed number of Healthcare Facility-Onset MRSA LabID Events

PRED = statistically 'predicted' number of events, based on NHSN baseline data

SIR = standardized infection ratio (observed/predicted number of events)

PATD = number of patient days

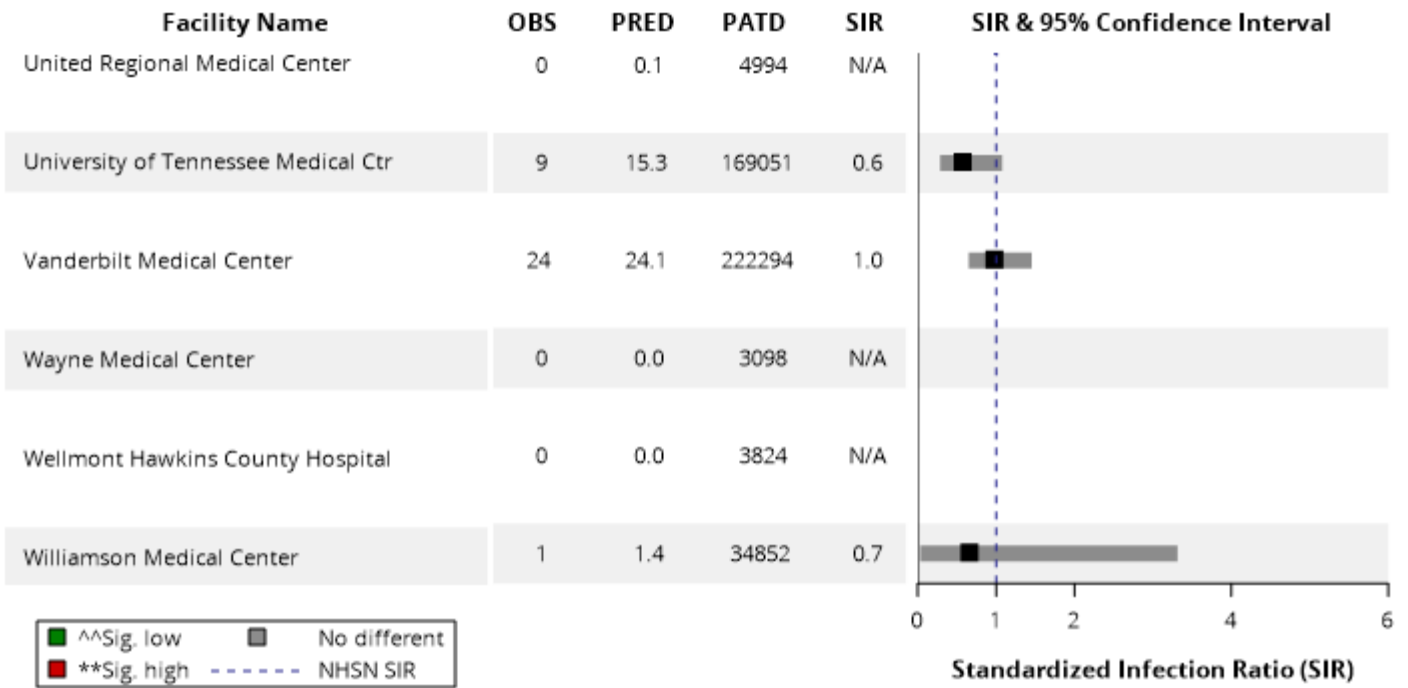
N/A = SIR not calculated for facilities with <1 predicted infection

\*\* Significantly higher than national baseline

^^ Significantly lower than national baseline

\* Zero events, but not statistically significant

Figure 74 (cont'd)



Data Reported as of June 20, 2019

N = number of types of units reporting

OBS = observed number of Healthcare Facility-Onset MRSA LabID Events

PRED = statistically 'predicted' number of events, based on NHSN baseline data

SIR = standardized infection ratio (observed/predicted number of events)

PATD = number of patient days

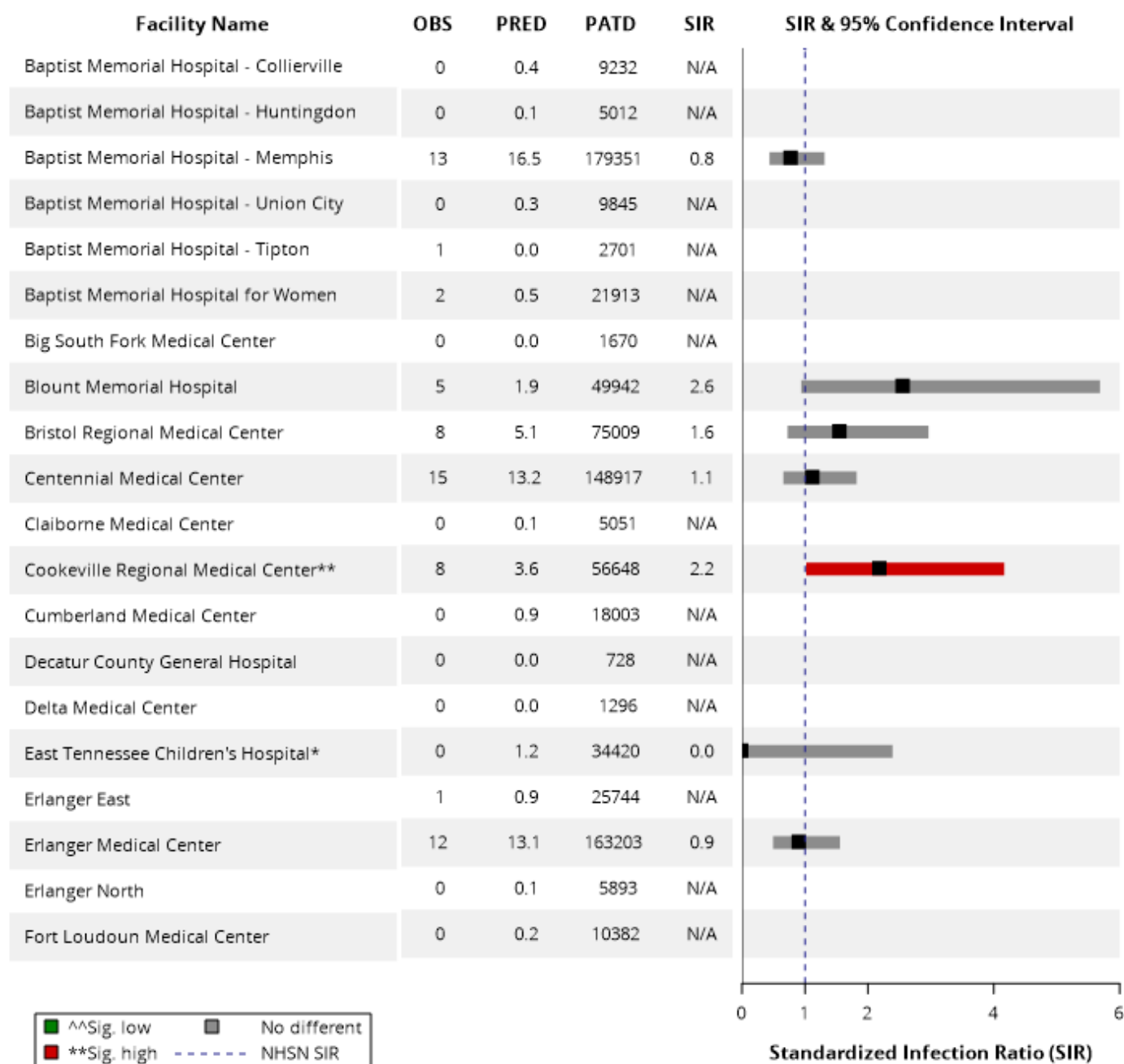
N/A = SIR not calculated for facilities with <1 predicted infection

\*\* Significantly higher than national baseline

^^ Significantly lower than national baseline

\* Zero events, but not statistically significant

**Figure 75: Healthcare Facility-Onset Methicillin-resistant Staphylococcus aureus (MRSA) Laboratory-Identified (LabID) Event Standardized Infection Ratios (SIRs) in Acute Care Facilities, Tennessee, 01/01/2018 – 12/31/2018**



Data Reported as of June 20, 2019

N = number of types of units reporting

OBS = observed number of Healthcare Facility-Onset MRSA LabID Events

PRED = statistically 'predicted' number of events, based on NHSN baseline data

SIR = standardized infection ratio (observed/predicted number of events)

PATD = number of patient days

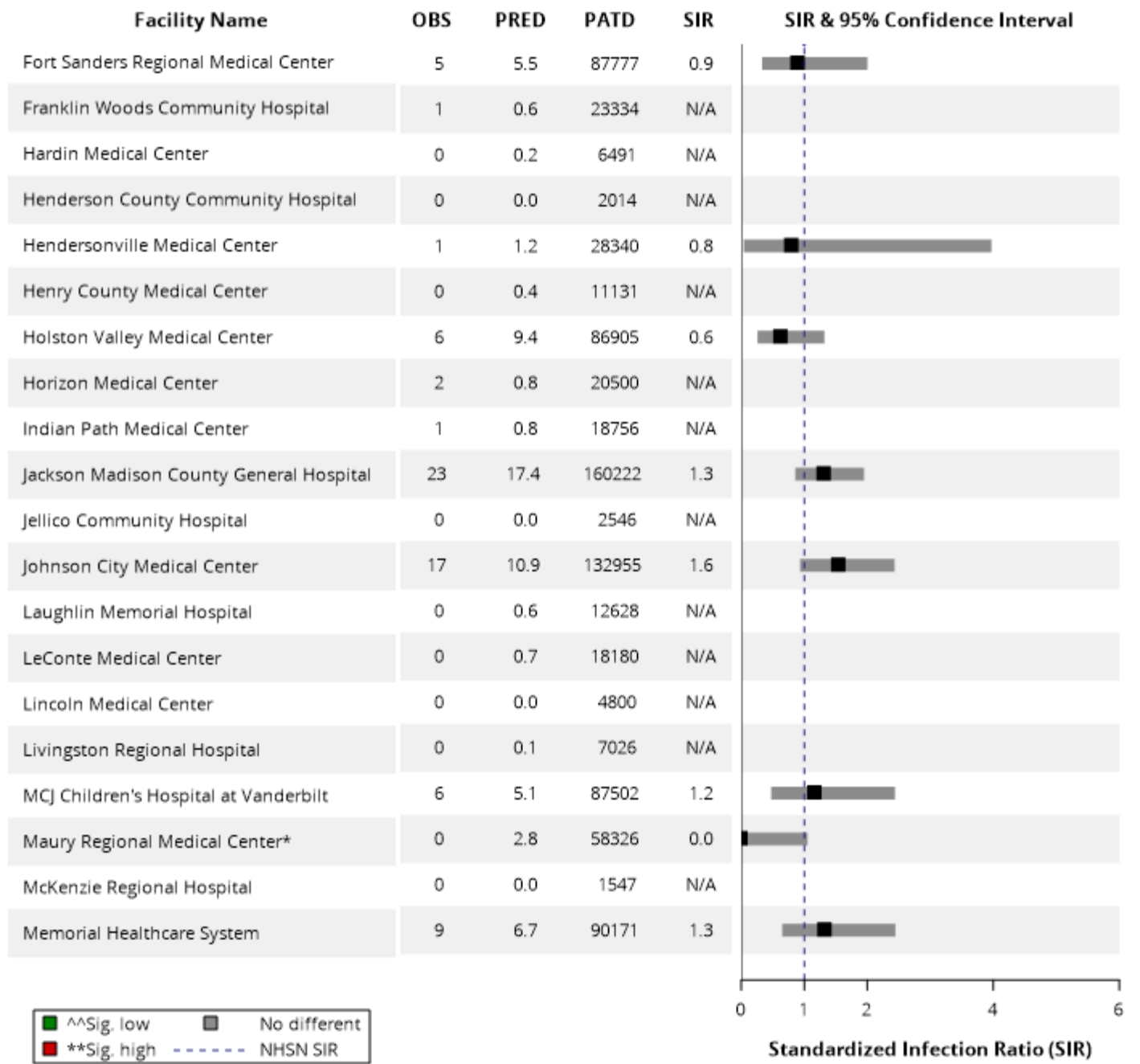
N/A = SIR not calculated for facilities with <1 predicted infection

\*\* Significantly higher than national baseline

^^ Significantly lower than national baseline

\* Zero events, but not statistically significant

Figure 75 (cont'd)



Data Reported as of June 20, 2019

N = number of types of units reporting

OBS = observed number of Healthcare Facility-Onset MRSA LabID Events

PRED = statistically 'predicted' number of events, based on NHSN baseline data

SIR = standardized infection ratio (observed/predicted number of events)

PATD = number of patient days

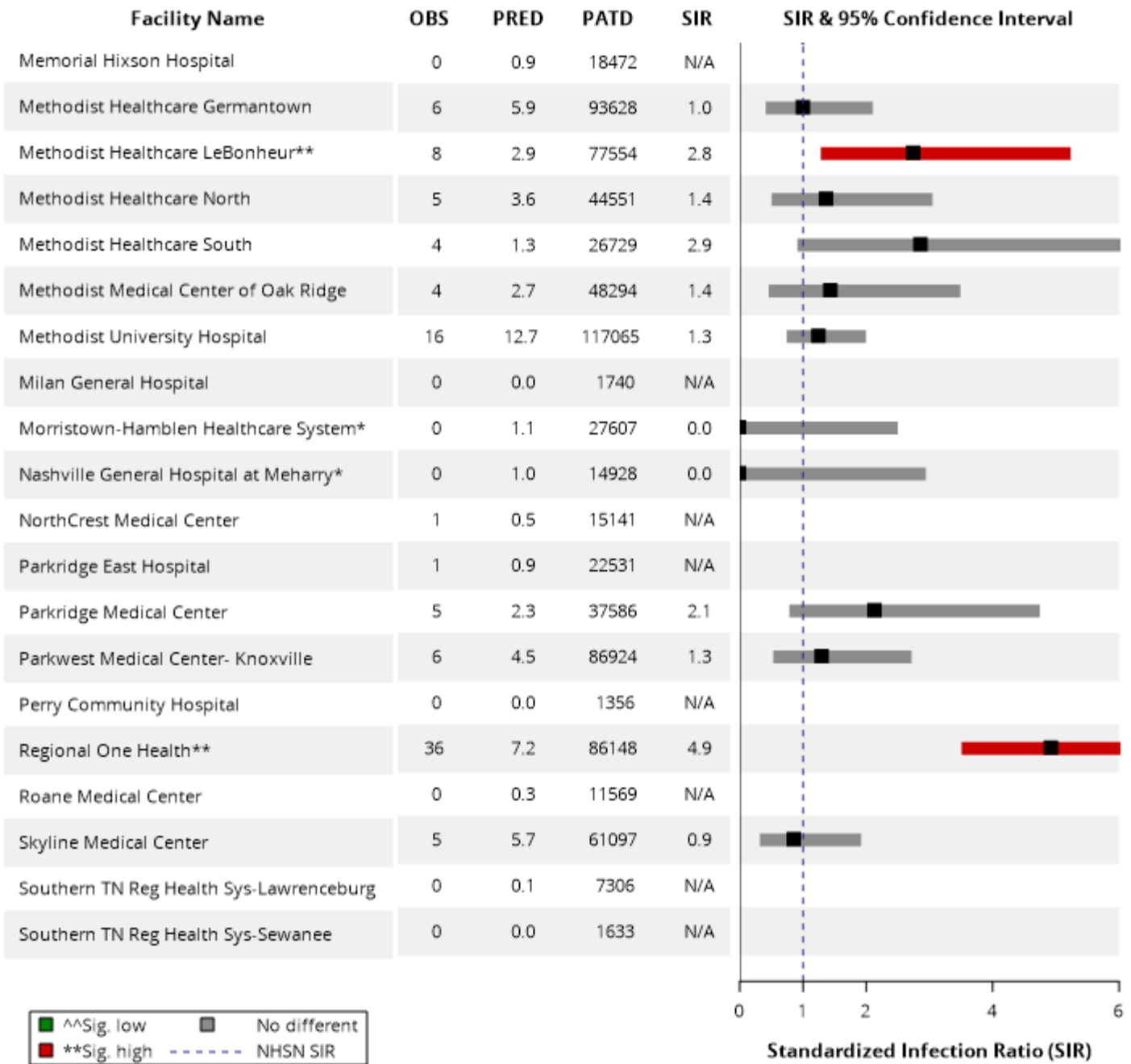
N/A = SIR not calculated for facilities with <1 predicted infection

\*\* Significantly higher than national baseline

^^ Significantly lower than national baseline

\* Zero events, but not statistically significant

Figure 75 (cont'd)



Data Reported as of June 20, 2019

N = number of types of units reporting

OBS = observed number of Healthcare Facility-Onset MRSA LabID Events

PRED = statistically 'predicted' number of events, based on NHSN baseline data

SIR = standardized infection ratio (observed/predicted number of events)

PATD = number of patient days

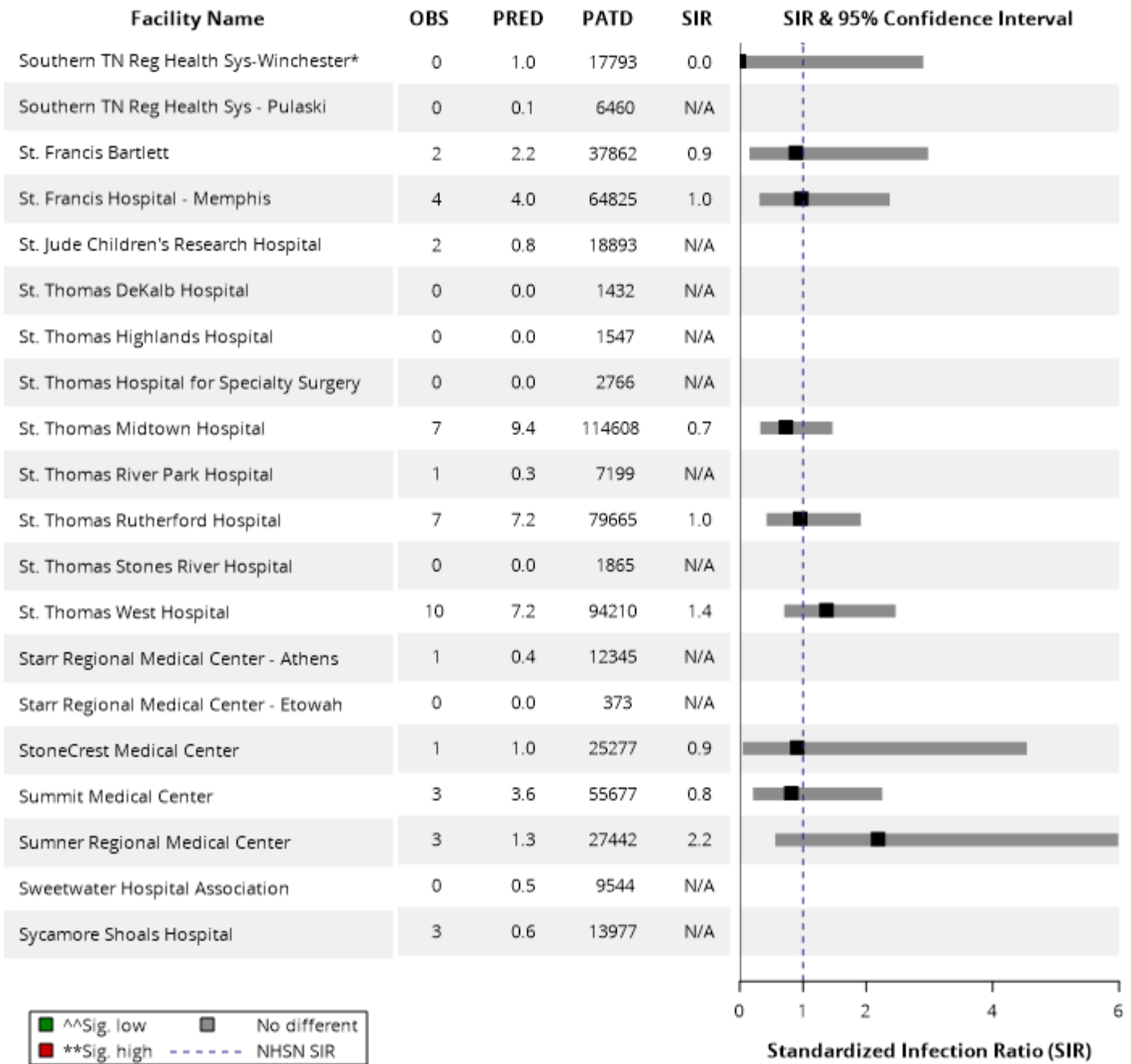
N/A = SIR not calculated for facilities with <1 predicted infection

\*\* Significantly higher than national baseline

^^ Significantly lower than national baseline

\* Zero events, but not statistically significant

Figure 75 (cont'd)



Data Reported as of June 20, 2019

N = number of types of units reporting

OBS = observed number of Healthcare Facility-Onset MRSA LabID Events

PRED = statistically 'predicted' number of events, based on NHSN baseline data

SIR = standardized infection ratio (observed/predicted number of events)

PATD = number of patient days

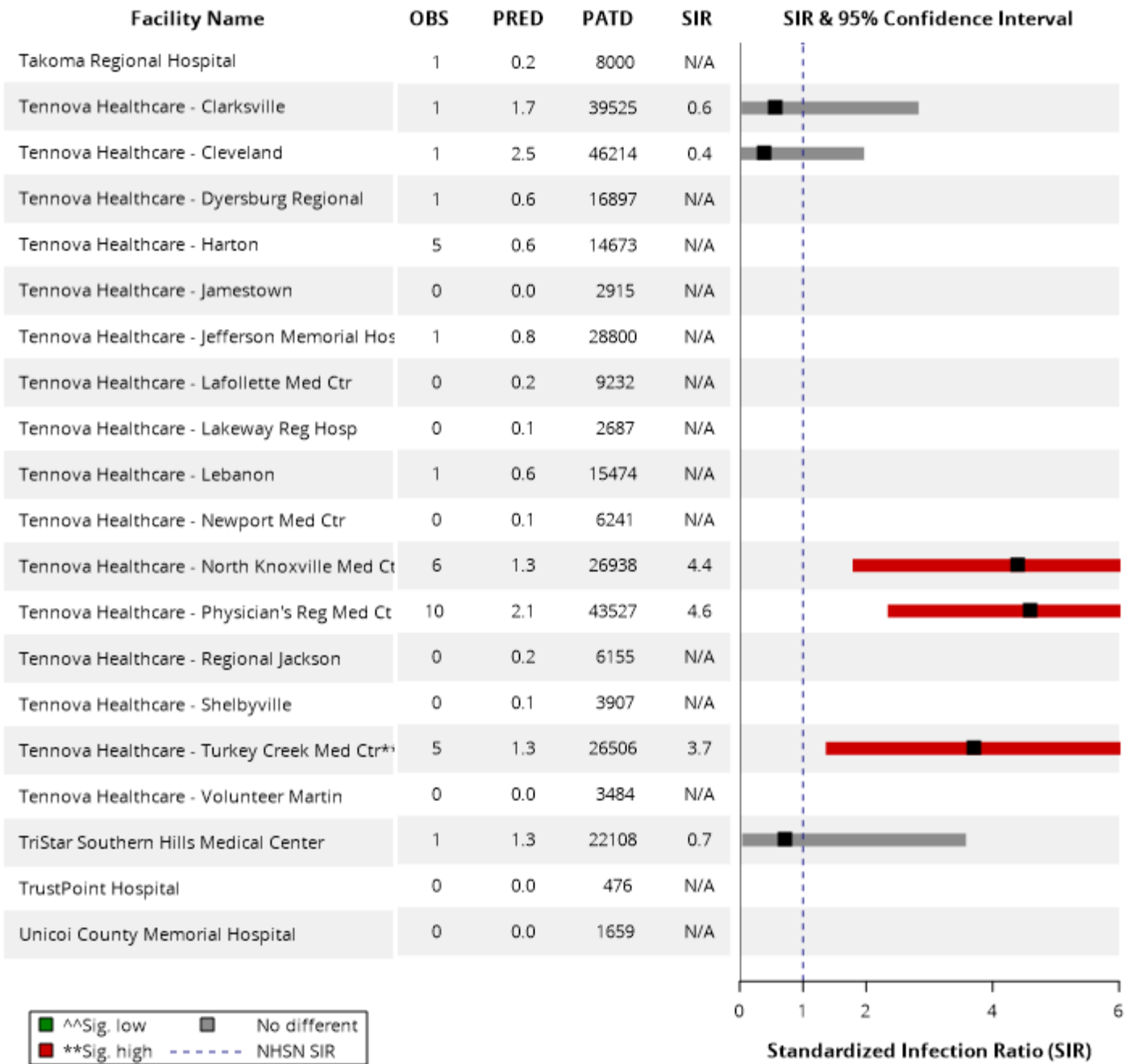
N/A = SIR not calculated for facilities with <1 predicted infection

\*\* Significantly higher than national baseline

^^ Significantly lower than national baseline

\* Zero events, but not statistically significant

Figure 75 (cont'd)



Data Reported as of June 20, 2019

N = number of types of units reporting

OBS = observed number of Healthcare Facility-Onset MRSA LabID Events

PRED = statistically 'predicted' number of events, based on NHSN baseline data

SIR = standardized infection ratio (observed/predicted number of events)

PATD = number of patient days

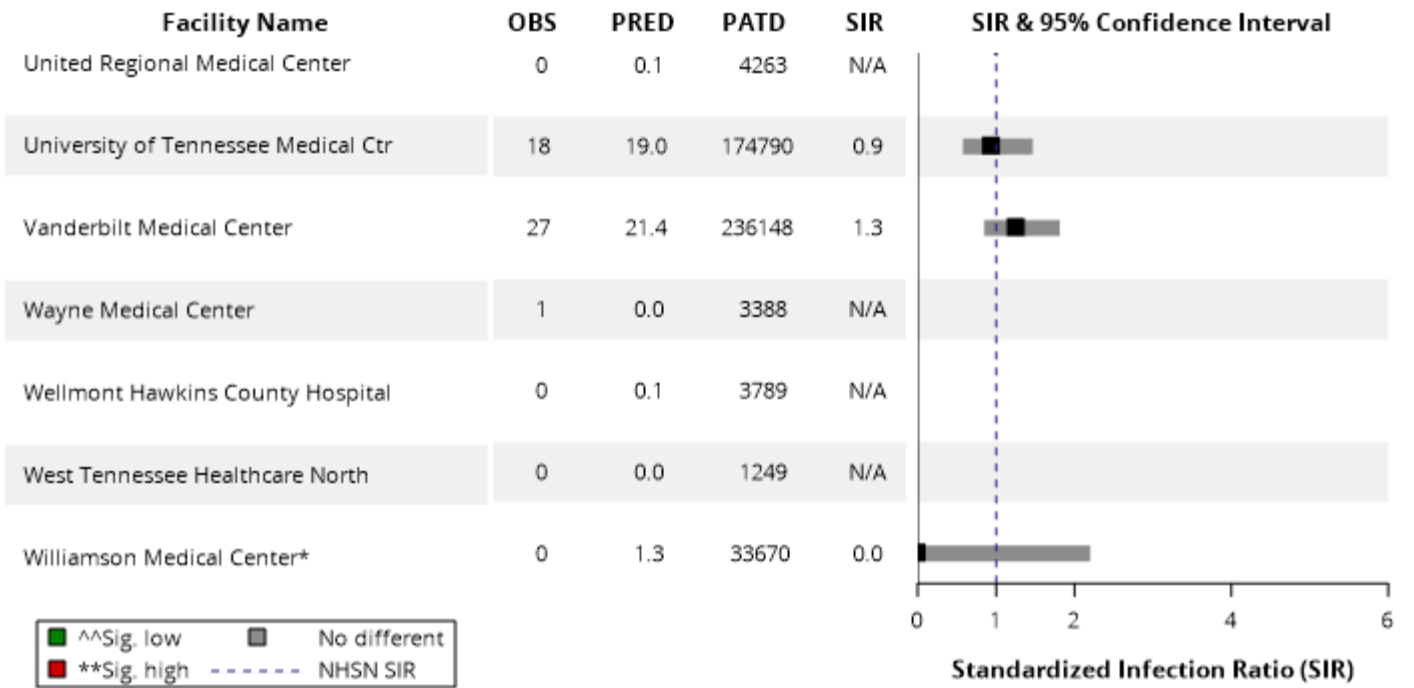
N/A = SIR not calculated for facilities with <1 predicted infection

\*\* Significantly higher than national baseline

^^ Significantly lower than national baseline

\* Zero events, but not statistically significant

Figure 75 (cont'd)



Data Reported as of June 20, 2019

N = number of types of units reporting

OBS = observed number of Healthcare Facility-Onset MRSA LabID Events

PRED = statistically 'predicted' number of events, based on NHSN baseline data

SIR = standardized infection ratio (observed/predicted number of events)

PATD = number of patient days

N/A = SIR not calculated for facilities with <1 predicted infection

\*\* Significantly higher than national baseline

^^ Significantly lower than national baseline

\* Zero events, but not statistically significant



# MRSA Bacteremia Laboratory-Identified Events

*Long-term Acute Care (LTAC) Hospitals*

## MRSA Bacteremia LabID Events in Long Term Acute Care (LTAC) Facilities:

**Total number of facilities reporting from January-December 2017: 9**

**Total number of facilities reporting from January-December 2018: 9**

### **SIRs by Quarter ([Figure 76](#))**

- In 2017, the overall healthcare-onset MRSA bacteremia LabID SIR in long-term acute care hospitals increased from a low SIR of 0.72 in January-March to a peak SIR of 2.25 from October-December 2017. In January-March 2018 the MRSA LabID SIR was 1.61 and gradually decreased to a low SIR of 0.48 in October-December.

### **Healthcare Facility-Onset and Community-Onset MRSA LabID Rates ([Figure 77](#), [Table 53](#))**

- The incidence of healthcare facility-onset MRSA bacteremia LabID events was 2.82 events per 10,000 patient-days in 2017, higher than the incidence of 1.83 events per 10,000 patient-days events in 2018. The prevalence of community-onset MRSA bacteremia LabID events was lower in 2017 (0.98 events per 1,000 admissions) than in 2018 (1.24 events per 1,000 admissions).

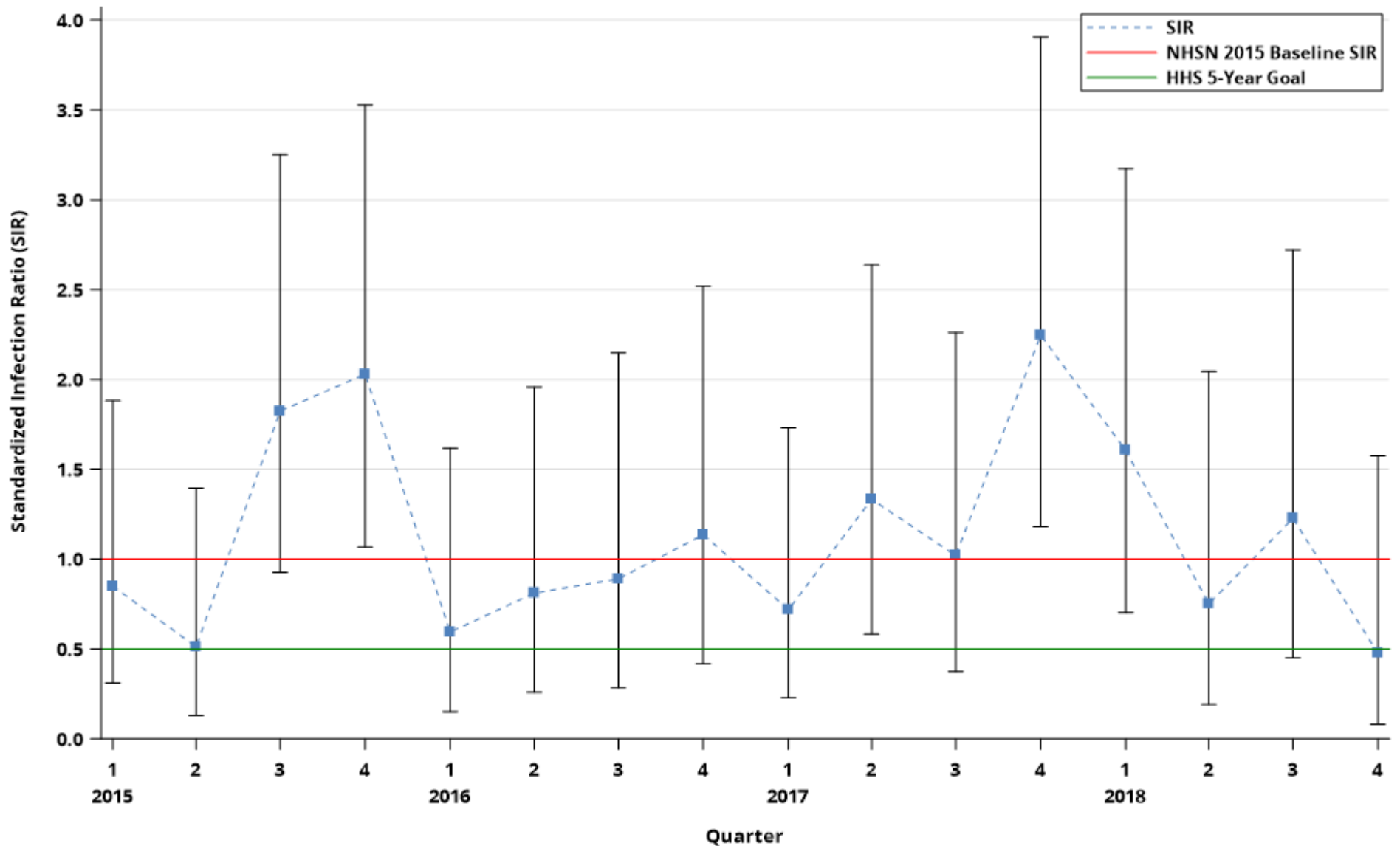
### **Key percentiles for Tennessee SIRs ([Table 54](#))**

- The overall healthcare-onset MRSA bacteremia LabID SIR for long-term acute care hospitals in Tennessee from January-December 2017 was not statistically significantly different than the 2015 national SIR of 1 (SIR=1.31; 95% CI: 0.88, 1.88). The 2018 SIR was lower than the 2017 state SIR, but not statistically significantly different than the 2015 national SIR of 1 (SIR=1.02; 95% CI: 0.62, 1.60).
- From January-December 2017, the median healthcare-onset MRSA bacteremia LabID SIR for long-term acute care hospitals was 1.65 indicating that half of reporting facilities with at least 1 predicted infection had a healthcare-onset MRSA LabID SIR at or below 1.65. From January-December 2018, the median healthcare-onset MRSA bacteremia LabID SIR for long-term acute care hospitals was 1.36

### **Facility-Specific SIRs (Figure 78, Figure 79)**

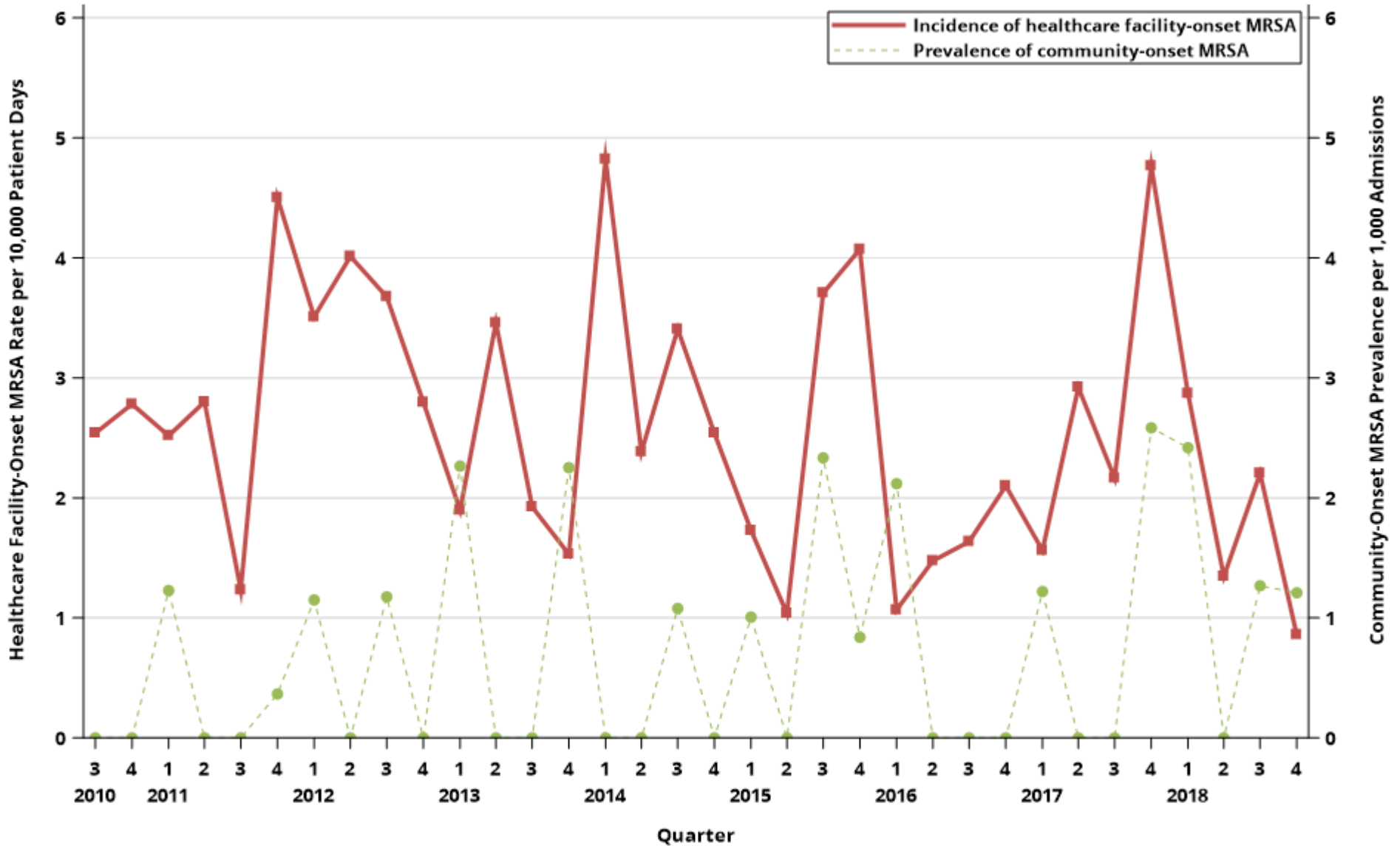
- The healthcare facility-onset MRSA bacteremia LabID event SIR for January-December 2017 and 2018 for each acute care facility is displayed in [Figure 78](#) and [Figure 79](#). The bar representing the confidence interval is green if the was significantly lower than the 2015 national SIR of 1 and red if the SIR was significantly higher than 1. Some hospitals reported zero events (indicated with an asterisk), although the facility's SIR may not be statistically significant due to a relatively small number of patient days.
- In 2017, 1 facility had a healthcare facility-onset MRSA bacteremia LabID event SIR that was statistically significantly lower than the 2015 national baseline SIR of 1. Two facilities had a healthcare facility-onset MRSA bacteremia LabID event SIR that was statistically significantly higher than the 2015 national baseline SIR of 1 in 2016. In 2018, no facilities had a healthcare facility-onset MRSA bacteremia LabID event SIR that was statistically significantly different than the 2015 national baseline SIR of 1.

**Figure 76: Standardized Infection Ratio (SIR) for Healthcare-Onset Methicillin-resistant Staphylococcus aureus (MRSA) Bacteremia Laboratory-Identified (LabID) Events for Long-term Acute Care (LTAC) Facilities by Quarter, Tennessee, 01/01/2015–12/31/2018**  
 [Reference standard: National Healthcare Safety Network (NHSN), 2015]



Data Reported as of June 20, 2019

Figure 77: Methicillin-resistant Staphylococcus aureus (MRSA) Bacteremia Laboratory-Identified (LabID) Events Pooled Mean Incidence and Prevalence Rates in Long-term Acute Care (LTAC) Facilities by Quarter, Tennessee, 07/01/2010-12/31/2018



Data Reported as of June 20, 2019

**Table 53: Methicillin-resistant Staphylococcus aureus (MRSA) Laboratory-Identified (LabID) Events Pooled Mean Incidence and Prevalence Rates in Long-term Acute Care (LTAC) Facilities by Year, Tennessee, 01/01/2017 - 12/31/2018**

			Healthcare Facility-Onset Incidence <sup>1</sup>	Community-Onset Prevalence <sup>2</sup>
STATE	YEAR	No.	POOLED MEAN	POOLED MEAN
Tennessee	2018	9	1.83	1.24
	2017	9	2.82	0.98

Data reported as of June 20, 2019

No. of facilities reporting

<sup>1</sup>Events per 10,000 patient days

<sup>2</sup>Events per 1,000 admissions

**Table 54: Healthcare-Onset Methicillin-resistant Staphylococcus aureus (MRSA) Laboratory-Identified (LabID) Events Standardized Infection Ratio (SIR) in Long-term Acute Care (LTAC) Facilities by Reporting Year, Tennessee, 01/01/2017 - 12/31/2018**

									DISTRIBUTION OF FACILITY-SPECIFIC SIRs										
				No. of INFECTIONS		SIR AND 95% CONFIDENCE INTERVAL			No. of FACS WITH ≥1 PRED INFECTION		No. of FACS WITH SIR SIG. <1.0		No. of FACS WITH SIR SIG. >1.0						
STATE	YEAR	No.	PAT DAYS	OBS	PRED	SIR	LOWER LIMIT	UPPER LIMIT	N	%	N	%	10%	25%	50%	75%	90%		
Tennessee	2018	9	92,696	17	16.63	1.02	0.62	1.60	7	0	0%	0	0%	0.00	0.00	1.36	2.16	2.56	
	2017	9	95,741	27	20.62	1.31	0.88	1.88	8	1	13%	2	25%	0.00	0.22	1.65	2.64	3.46	

Data reported as of June 20, 2019

No. = number of facilities reporting; PAT DAYS = number of patient days; OBS = observed number of events

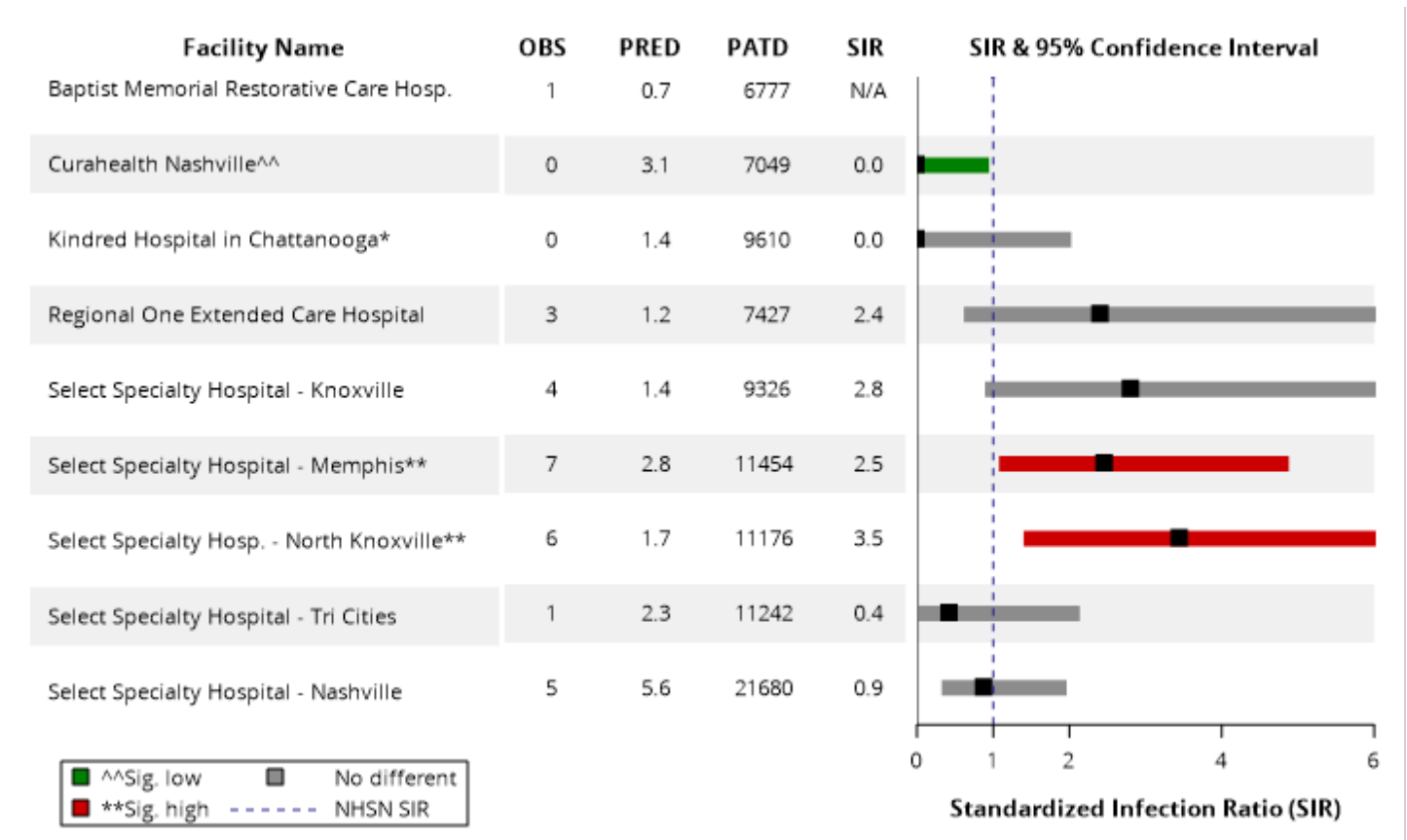
PRED = statistically 'predicted' number of events; SIR = Standardized Infection Ratio (observed/predicted number of events)

Key percentiles include facilities with at least one predicted infection

Red highlighting indicates SIR for reporting period is significantly higher than national 2015 SIR of 1.0

Green highlighting indicates SIR for reporting period is significantly lower than national 2015 SIR of 1.0

**Figure 78: Healthcare Facility-Onset Methicillin-resistant Staphylococcus aureus (MRSA) Laboratory-Identified (LabID) Event Standardized Infection Ratios (SIRs) in Long-Term Acute Care (LTAC) Facilities, Tennessee, 01/01/2017 – 12/31/2017**



Data Reported as of June 20, 2019

N = number of types of units reporting

OBS = observed number of Healthcare Facility-Onset MRSA LabID Events

PRED = statistically 'predicted' number of events, based on NHSN baseline data

SIR = standardized infection ratio (observed/predicted number of events)

PATD = number of patient days

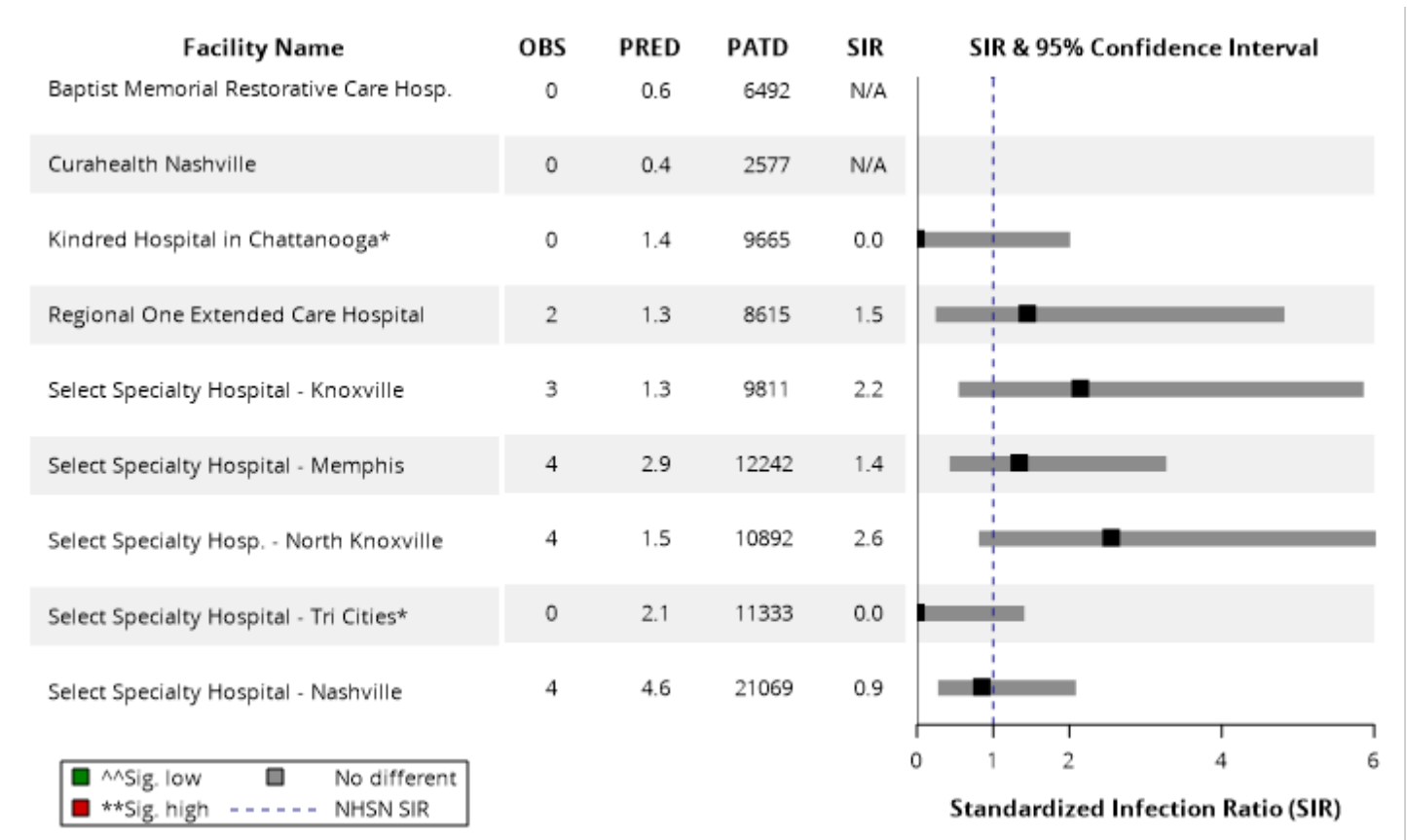
N/A = SIR not calculated for facilities with <1 predicted infection

\*\* Significantly higher than national baseline

^^ Significantly lower than national baseline

\* Zero events, but not statistically significant

**Figure 79: Healthcare Facility-Onset Methicillin-resistant Staphylococcus aureus (MRSA) Laboratory-Identified (LabID) Event Standardized Infection Ratios (SIRs) in Long-Term Acute Care (LTAC) Facilities, Tennessee, 01/01/2018 – 12/31/2018**



Data Reported as of June 20, 2019

N = number of types of units reporting

OBS = observed number of Healthcare Facility-Onset MRSA LabID Events

PRED = statistically 'predicted' number of events, based on NHSN baseline data

SIR = standardized infection ratio (observed/predicted number of events)

PATD = number of patient days

N/A = SIR not calculated for facilities with <1 predicted infection

\*\* Significantly higher than national baseline

^^ Significantly lower than national baseline

\* Zero events, but not statistically significant



# **MRSA Bacteremia Laboratory-Identified Events**

## ***Inpatient Rehabilitation Facilities (IRF)***

## MRSA Bacteremia LabID Events in Inpatient Rehabilitation Facilities (IRF):

**Total number of facilities reporting from January-December 2017: 30**

**Total number of facilities reporting from January-December 2018: 29**

### **SIRs by Quarter ([Figure 80](#))**

- In 2017, the overall healthcare-onset MRSA bacteremia LabID SIR in inpatient rehabilitation facilities decreased from an SIR of 2.65 in January-March to 1.74 from April-June 2017. The SIR then increased to a high of 4.49 during October-December. In 2018, the overall healthcare-onset MRSA bacteremia LabID SIR in inpatient rehabilitation facilities fluctuated from a low SIR of 0.89 in January-March to a peak SIR of 2.62 from April-June 2018.

### **Healthcare Facility-Onset and Community-Onset MRSA LabID Rates ([Figure 81](#), [Table 55](#))**

- The incidence of healthcare facility-onset MRSA bacteremia LabID events was 0.57 events per 10,000 patient-days in 2017, higher than the incidence of 0.35 events per 10,000 patient-day events in 2018. The prevalence of community-onset MRSA bacteremia LabID events was higher in 2018 (0.17 events per 1,000 admissions) than in 2017 (0.06 events per 1,000 admissions).

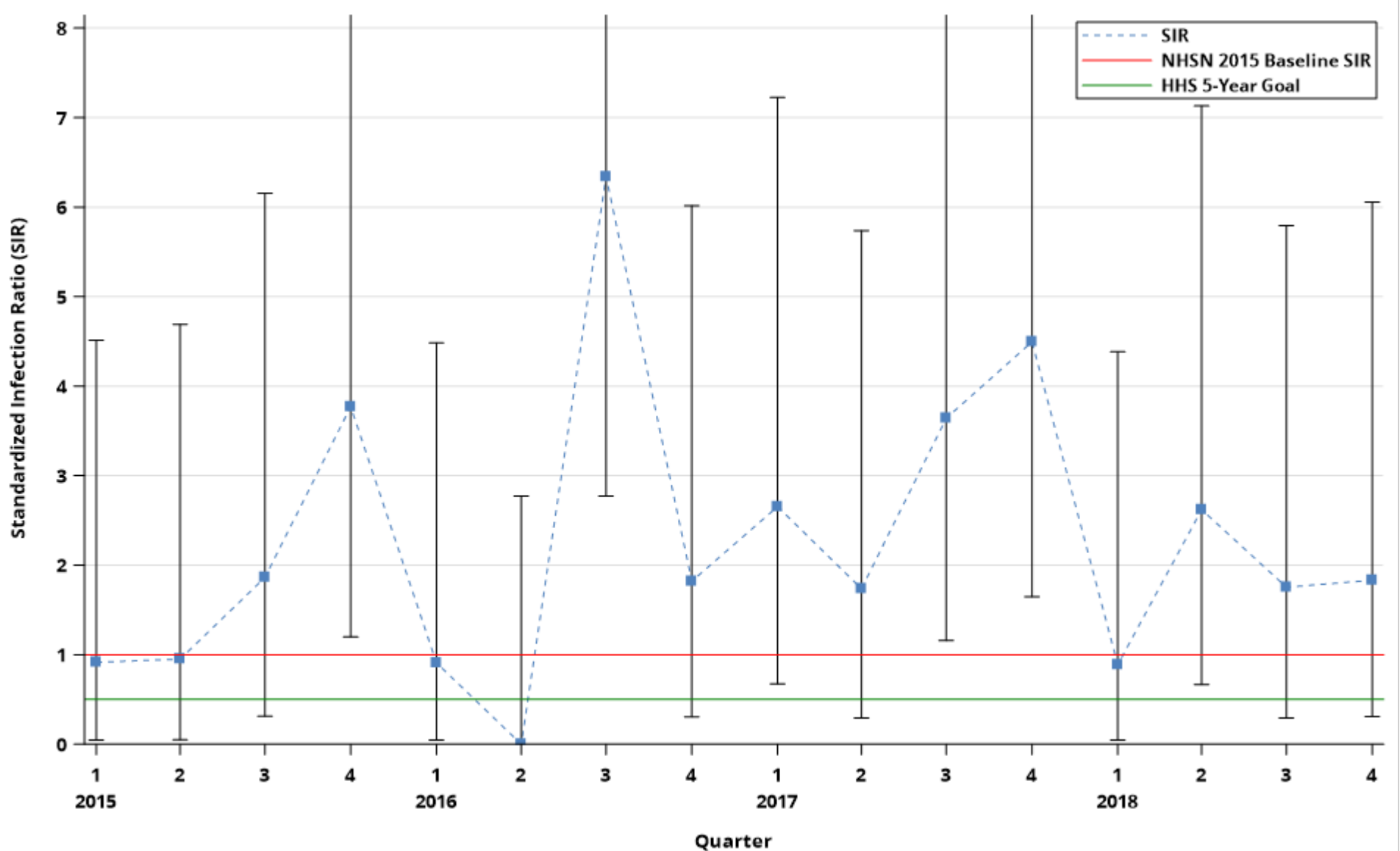
### **Key percentiles for Tennessee SIRs ([Table 56](#))**

- The overall healthcare-onset MRSA bacteremia LabID SIR for IRFs in Tennessee from January-December 2017 was statistically significantly higher than the 2015 national SIR of 1 (SIR=3.12; 95% CI: 1.77, 5.10). The 2018 SIR was not statistically significantly different than the 2015 national SIR of 1 (SIR=1.78; 95% CI: 0.83, 3.37).

### **Facility-Specific SIRs ([Figure 82](#), [Figure 83](#))**

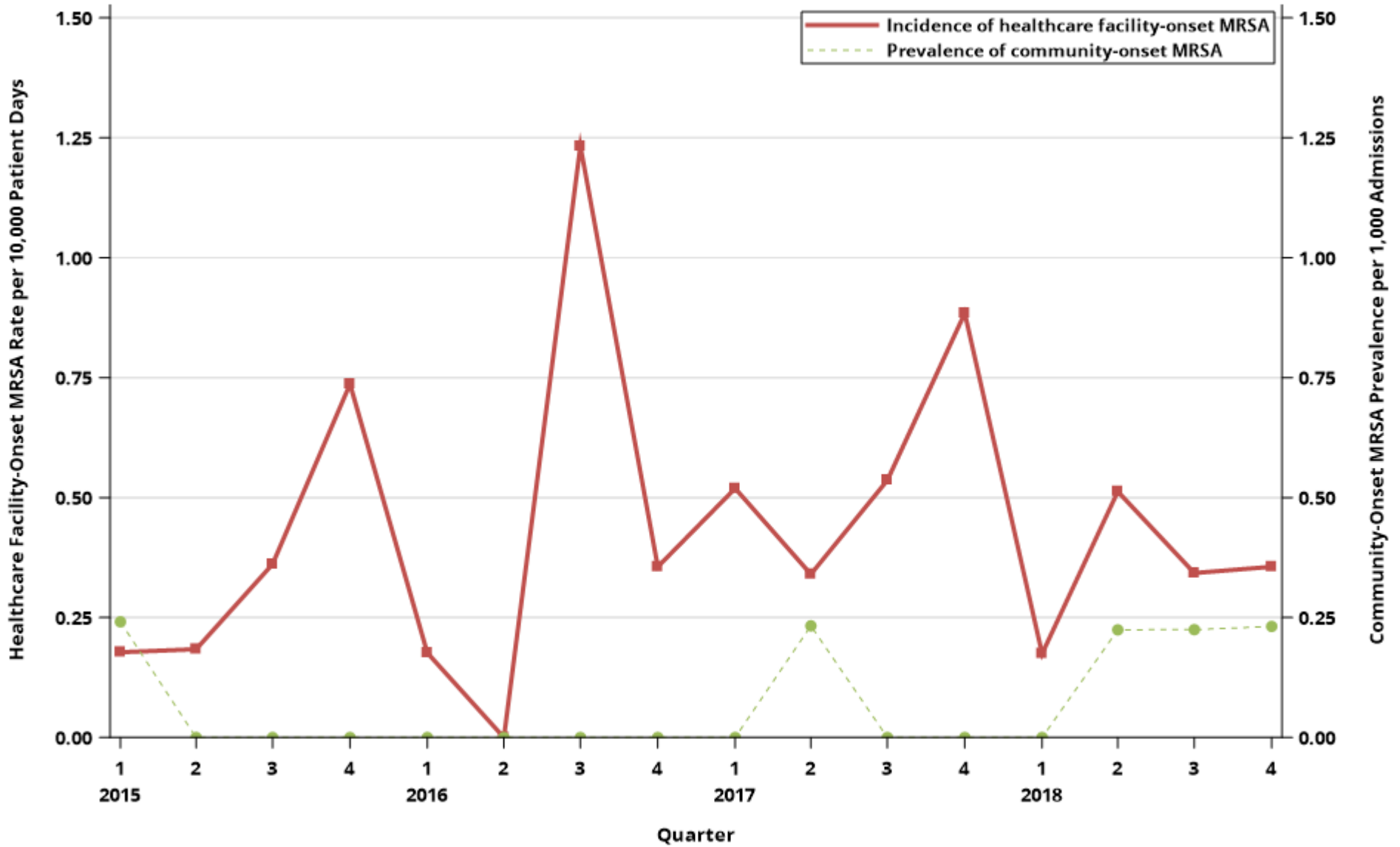
- The healthcare facility-onset MRSA bacteremia LabID event SIR for 2017 and 2018 for each IRF is displayed in [Figure 82](#) and [Figure 83](#). The bar representing the confidence interval is green if the was significantly lower than the 2015 national SIR of 1 and red if the SIR was significantly higher than 1. Some hospitals reported zero events (indicated with an asterisk), although the facility's SIR may not be statistically significant due to a relatively small number of patient days.
- In 2017 and 2018, no facilities had a healthcare facility-onset MRSA bacteremia LabID event SIR that was statistically significantly different than the 2015 national baseline.

**Figure 80: Standardized Infection Ratio (SIR) for Healthcare-Onset Methicillin-resistant Staphylococcus aureus (MRSA) Bacteremia Laboratory-Identified (LabID) Events for Inpatient Rehabilitation Facilities (IRF) by Quarter, Tennessee, 01/01/2015–12/31/2018**  
 [Reference standard: National Healthcare Safety Network (NHSN), 2015]



Data Reported as of June 20, 2019

Figure 81: Methicillin-resistant Staphylococcus aureus (MRSA) Bacteremia Laboratory-Identified (LabID) Events Pooled Mean Incidence and Prevalence Rates in Inpatient Rehabilitation Facilities (IRF) by Quarter, Tennessee, 01/01/2015-12/31/2018



Data Reported as of June 20, 2019

**Table 55: Methicillin-resistant Staphylococcus aureus (MRSA) Laboratory-Identified (LabID) Events Pooled Mean Incidence and Prevalence Rates in Inpatient Rehabilitation Facilities (IRF) by Year, Tennessee, 01/01/2015 - 12/31/2018**

			Healthcare Facility-Onset Incidence <sup>1</sup>	Community-Onset Prevalence <sup>2</sup>
STATE	YEAR	No.	POOLED MEAN	POOLED MEAN
Tennessee	2018	29	0.35	0.17
	2017	30	0.57	0.06

Data reported as of June 20, 2019

No. of facilities reporting

<sup>1</sup>Events per 10,000 patient days

<sup>2</sup>Events per 1,000 admissions

**Table 56: Healthcare-Onset Methicillin-resistant Staphylococcus aureus (MRSA) Laboratory-Identified (LabID) Events Standardized Infection Ratio (SIR) in Inpatient Rehabilitation Facilities (IRF) by Reporting Year, Tennessee, 01/01/2017 - 12/31/2018**

									DISTRIBUTION OF FACILITY-SPECIFIC SIRs										
				No. of INFECTIONS		SIR AND 95% CONFIDENCE INTERVAL			No. of FACS WITH ≥1 PRED INFECTION		No. of FACS WITH SIR SIG. <1.0		No. of FACS WITH SIR SIG. >1.0						
STATE	YEAR	No.	PAT DAYS	OBS	PRED	SIR	LOWER LIMIT	UPPER LIMIT	N	%	N	%	10%	25%	50%	75%	90%		
Tennessee	2018	30	236,764	8	4.50	1.78	0.83	3.37	.	0	0%	0	0%	N/A	N/A	N/A	N/A	N/A	
	2017	31	236,275	14	4.49	3.12	1.77	5.10	.	0	0%	0	0%	N/A	N/A	N/A	N/A	N/A	

Data reported as of June 20, 2019

No. = number of facilities reporting; PAT DAYS = number of patient days; OBS = observed number of events

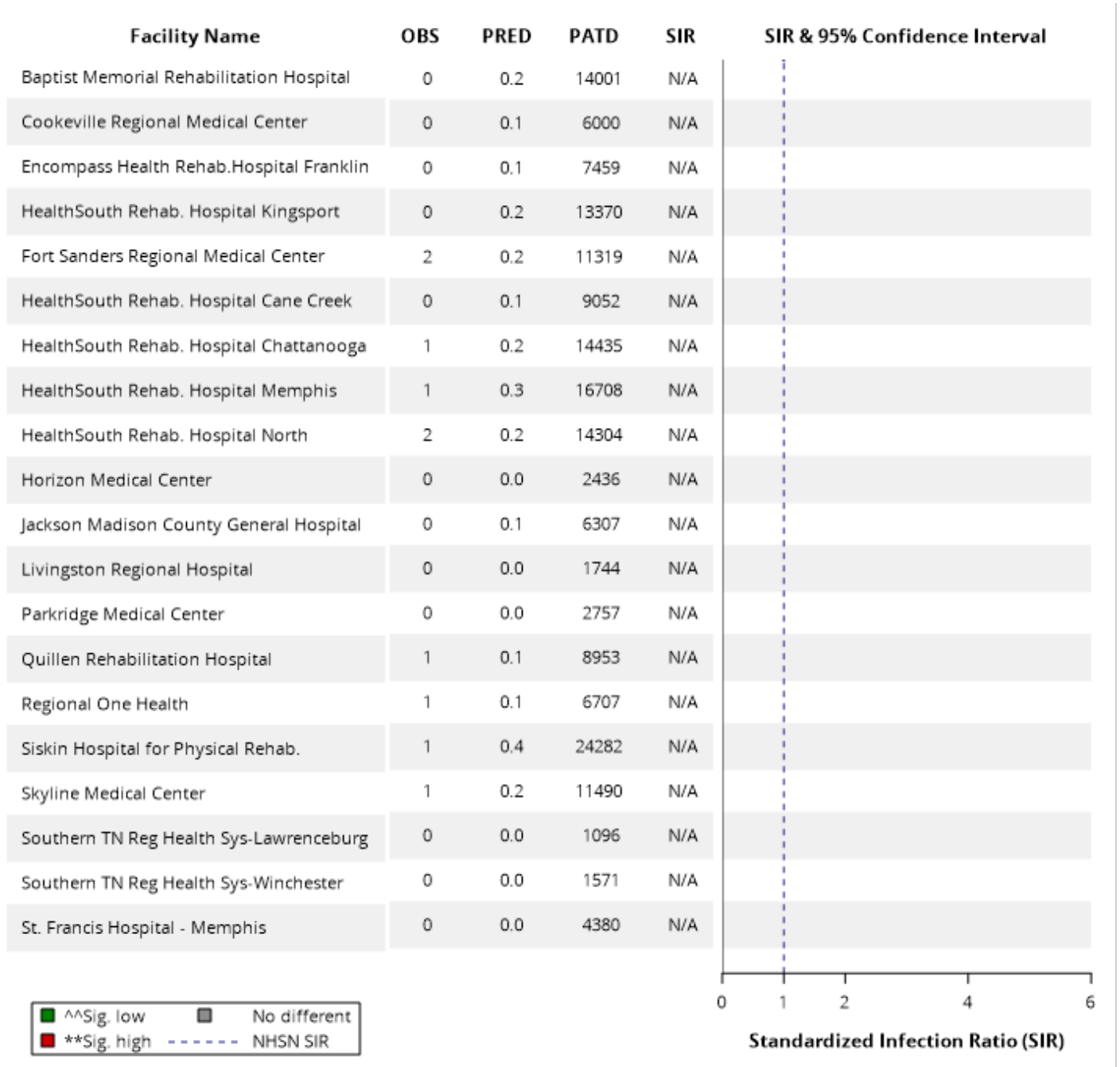
PRED = statistically 'predicted' number of events; SIR = Standardized Infection Ratio (observed/predicted number of events)

Key percentiles include facilities with at least one predicted infection

Red highlighting indicates SIR for reporting period is significantly higher than national 2015 SIR of 1.0

Green highlighting indicates SIR for reporting period is significantly lower than national 2015 SIR of 1.0

**Figure 82: Healthcare Facility-Onset Methicillin-resistant Staphylococcus aureus (MRSA) Laboratory-Identified (LabID) Event Standardized Infection Ratios (SIRs) in Inpatient Rehabilitation Facilities (IRF), Tennessee, 01/01/2017 – 12/31/2017**



Data Reported as of June 20, 2019

N = number of types of units reporting

OBS = observed number of Healthcare Facility-Onset MRSA LabID Events

PRED = statistically 'predicted' number of events, based on NHSN baseline data

SIR = standardized infection ratio (observed/predicted number of events)

PATD = number of patient days

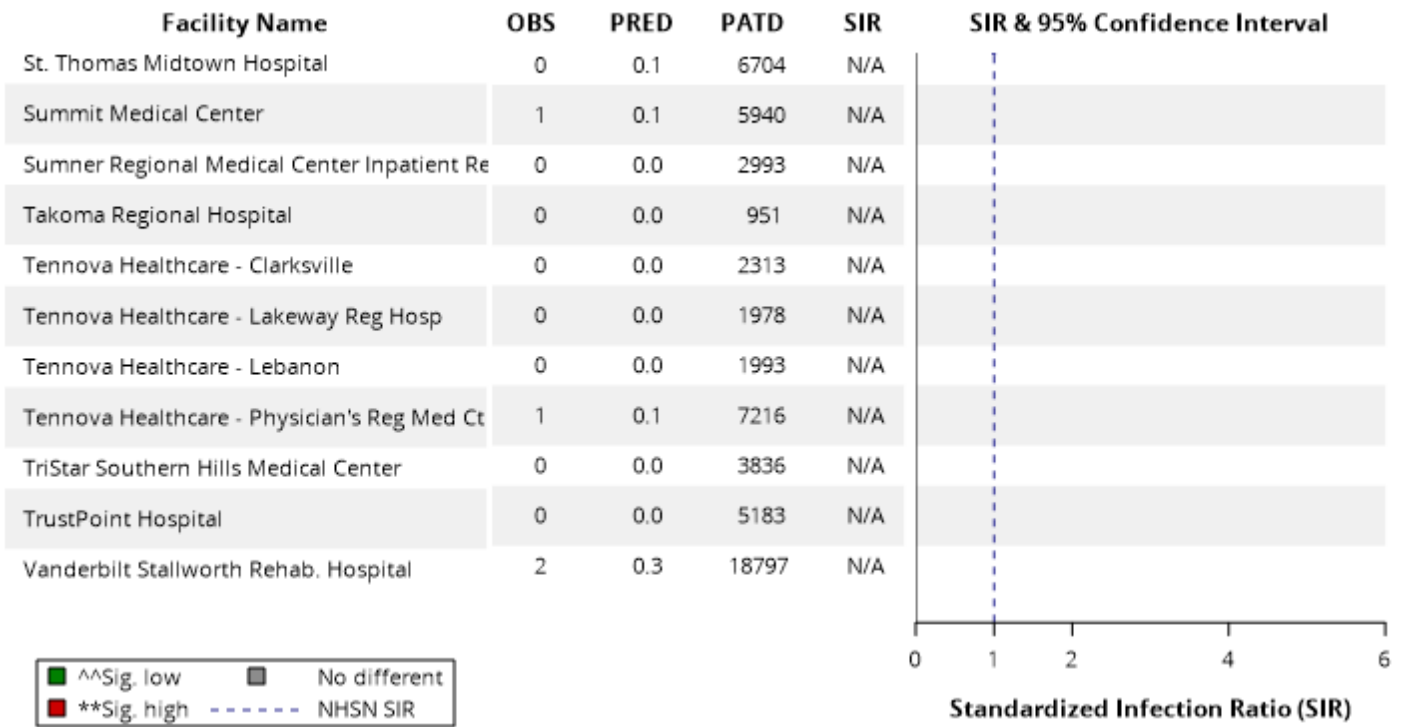
N/A = SIR not calculated for facilities with <1 predicted infection

\*\* Significantly higher than national baseline

^^ Significantly lower than national baseline

\* Zero events, but not statistically significant

**Figure 82 (cont'd)**



Data Reported as of June 20, 2019

N = number of types of units reporting

OBS = observed number of Healthcare Facility-Onset MRSA LabID Events

PRED = statistically 'predicted' number of events, based on NHSN baseline data

SIR = standardized infection ratio (observed/predicted number of events)

PATD = number of patient days

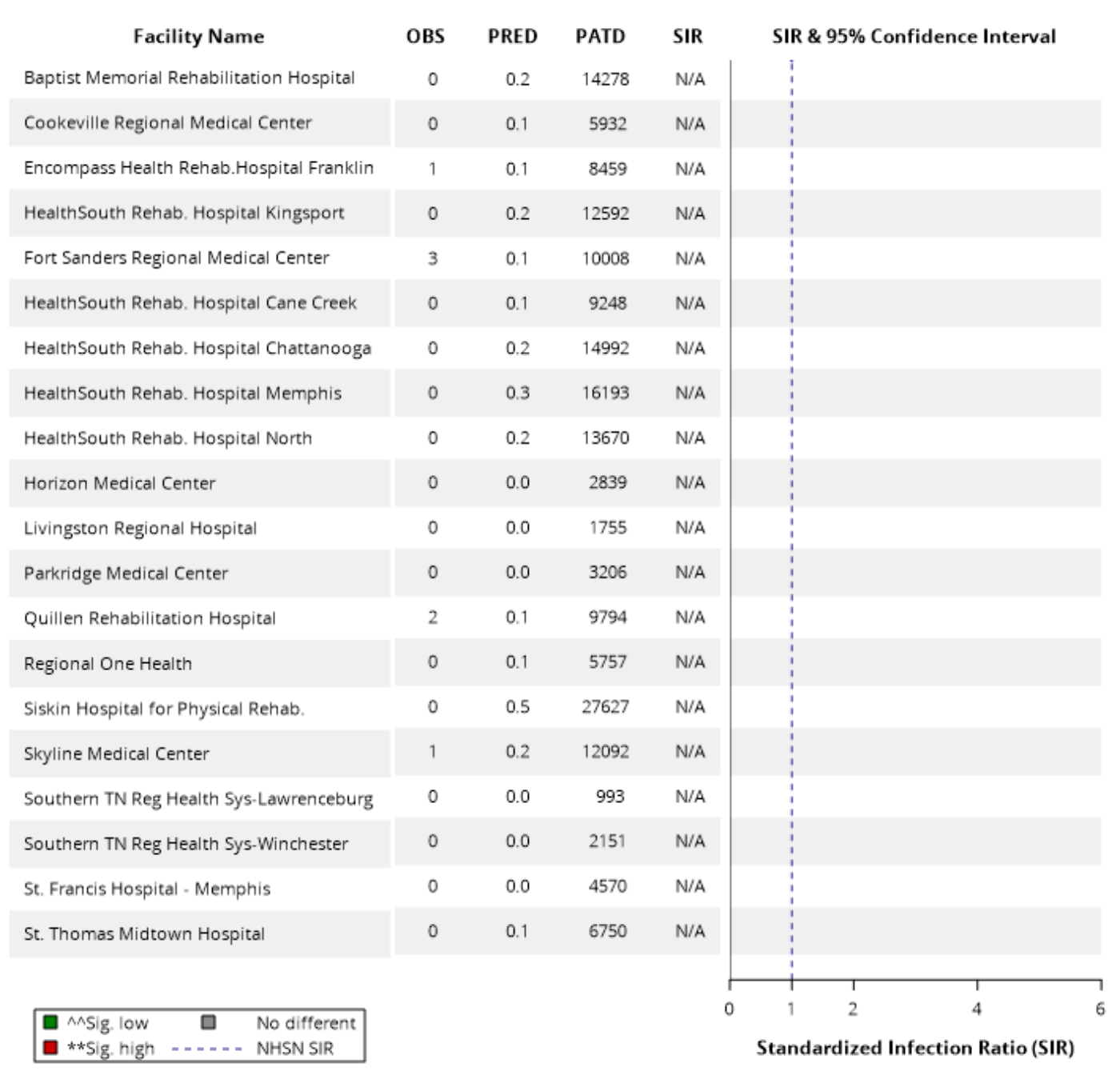
N/A = SIR not calculated for facilities with <1 predicted infection

\*\* Significantly higher than national baseline

^^ Significantly lower than national baseline

\* Zero events, but not statistically significant

**Figure 83: Healthcare Facility-Onset Methicillin-resistant Staphylococcus aureus (MRSA) Laboratory-Identified (LabID) Event Standardized Infection Ratios (SIRs) in Inpatient Rehabilitation Facilities (IRF), Tennessee, 01/01/2018 – 12/31/2018**



Data Reported as of June 20, 2019

N = number of types of units reporting

OBS = observed number of Healthcare Facility-Onset MRSA LabID Events

PRED = statistically 'predicted' number of events, based on NHSN baseline data

SIR = standardized infection ratio (observed/predicted number of events)

PATD = number of patient days

N/A = SIR not calculated for facilities with <1 predicted infection

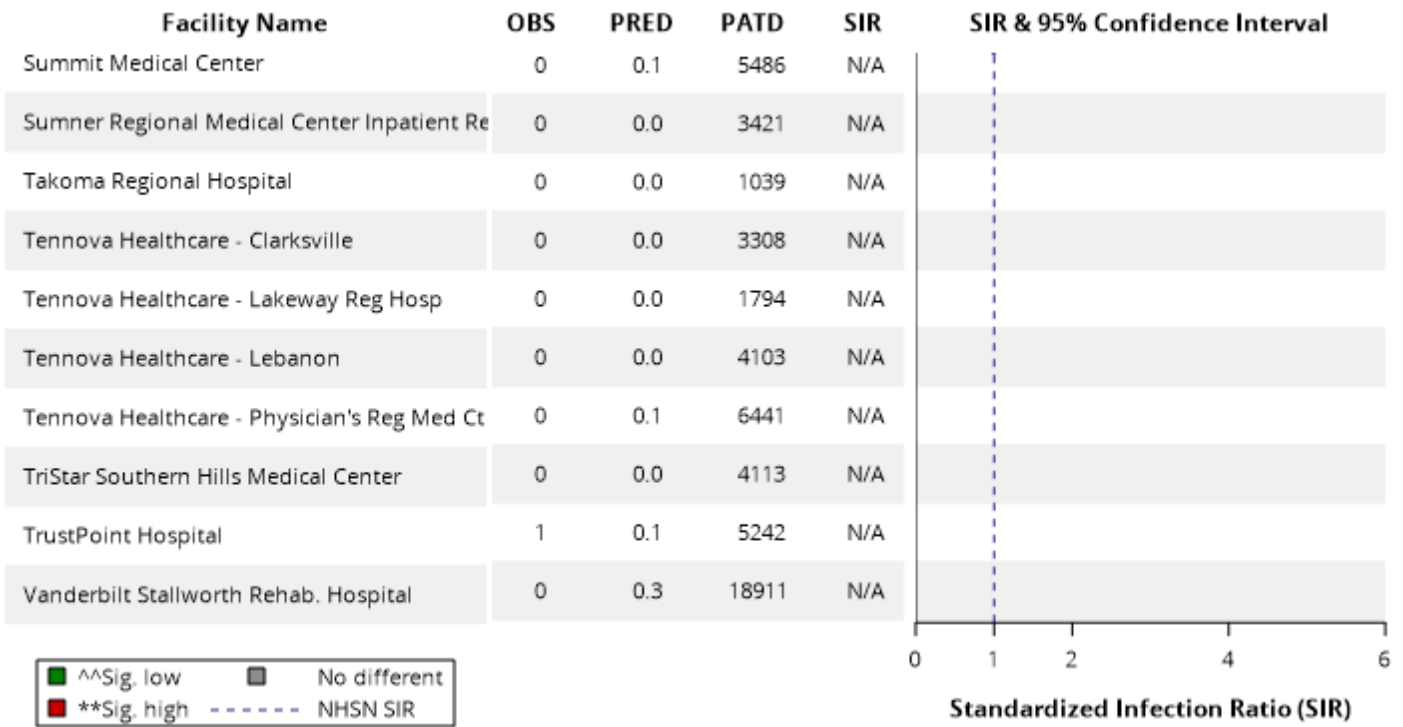
\*\* Significantly higher than national baseline

^^ Significantly lower than national baseline

\* Zero events, but not statistically significant



**Figure 83 (cont'd)**



Data Reported as of June 20, 2019

N = number of types of units reporting

OBS = observed number of Healthcare Facility-Onset MRSA LabID Events

PRED = statistically 'predicted' number of events, based on NHSN baseline data

SIR = standardized infection ratio (observed/predicted number of events)

PATD = number of patient days

N/A = SIR not calculated for facilities with <1 predicted infection

\*\* Significantly higher than national baseline

^^ Significantly lower than national baseline

\* Zero events, but not statistically significant

*Clostridioides difficile* Infection (CDI) Laboratory-  
Identified Events

## ***Clostridioides difficile* Infection (CDI) Laboratory-Identified (LabID) Events**

*Clostridioides difficile* (*C. difficile*) is a bacterium that naturally resides in the bowels of some people without symptoms of infection. *C. difficile* is responsible for a spectrum of *C. difficile* infections (CDI), including gastrointestinal illness which can lead to severe complications including sepsis and death. CDI can occur when *C. difficile* spores are transferred to patients via the hands of healthcare personnel or other contaminated surfaces or items. Healthcare facilities can prevent CDI by using antibiotics wisely and following infection prevention recommendations, including hand hygiene, environmental cleaning, and contact precautions to prevent the spread of *C. difficile* in the healthcare setting (see [Patient Guide on CDI](#)<sup>33</sup>).

### **Reporting Requirements**

*C. difficile* Infection (CDI) Laboratory-Identified (LabID) Events have been reportable to TDH since July 2010 from acute care hospitals (facility-wide inpatient locations and emergency departments) and long-term acute care hospitals (facility-wide inpatient locations). Hospitals with an average daily census less than 25 were exempt from this requirement until July 2012.

To comply with these reporting requirements, facilities are required to follow the [NHSN Multidrug-Resistant Organism & \*Clostridioides difficile\* Infection LabID Event Surveillance protocol](#)<sup>34</sup>, which is updated each year with CDI LabID event surveillance definitions and reporting instructions. Facilities must report the total number of admissions and patient days (for all facility inpatient locations, excluding newborn locations), or patient encounters (for Emergency Department reporting) each month to NHSN. They are also required to report any positive *C. difficile* laboratory results which meet the NHSN surveillance definition of a CDI LabID event.

### **Changes to Surveillance Definitions**

In January 2015, NHSN added a new rule that facilities participating in facility-wide inpatient locations (FacWideIN) LabID Event reporting would be required to map and report outpatient LabID Events from emergency departments and 24-hour observation locations for the same organism and LabID Event type. This meant that facilities no longer assigned the admitting inpatient location to LabID Events when specimens are collected in the emergency department or 24-hour observation location on the same calendar day as inpatient admission. This rule facilitates accurate categorization of LabID Events, as well as allows each facility to capture community-onset cases.

<sup>33</sup> [http://www.cdc.gov/HAI/pdfs/cdiff/Cdiff\\_tagged.pdf](http://www.cdc.gov/HAI/pdfs/cdiff/Cdiff_tagged.pdf)

<sup>34</sup> [http://www.cdc.gov/nhsn/PDFs/pscManual/12pscMDRO\\_CDADcurrent.pdf](http://www.cdc.gov/nhsn/PDFs/pscManual/12pscMDRO_CDADcurrent.pdf)

## Facility-Specific Data Thresholds

To ensure fair and accurate reporting of facility-specific healthcare facility-onset *C. difficile* Infection (CDI) LabID events standardized infection ratios (SIR) TDH has adopted the NHSN minimum thresholds for reporting. To report a facility-specific SIR, the statistically predicted number of infections must be at least 1.0.

## CDI LabID Events Risk Adjustment

Recently, CDC introduced the SIR “rebaseline,” a term that is being used to describe updates to the previous (or original) HAI baselines. CDC used 2015 HAI data to create the updated SIR baselines, which includes updates to both the source of aggregate data and the risk adjustment methodology used to calculate the number of predicted events. Before 2015, the time period used to establish the baseline, or reference points, varied among the different HAI measures. Thus, in previous TN HAI reports, the number of predicted infections was estimated based on those original baselines. Therefore, the data in this report are not comparable with previous HAI reports. Further details can be seen in the [NHSN Guide to the SIR.](#)<sup>35</sup>

Risk adjustment for healthcare facility-onset *C. difficile* (CDI) is calculated using negative binomial regression based on facility-level characteristics, including inpatient community-onset prevalence rate, CDI test type, medical school affiliation, facility type, ICU bed size, and outpatient reporting. The negative binomial regression model is based on national NHSN data from 2015. In long-term acute care hospitals, the regression model includes inpatient-community-onset prevalence rate, percent of admissions on a ventilator, CDI test type and percent of single occupancy rooms. The model for inpatient rehabilitation facilities (IRF) includes CDI test type, IRF setting, percent of admissions with orthopedic conditions, spinal cord dysfunctions and stroke.

This report displays crude (unadjusted) rates of healthcare facility-onset (HO) incidence, community-onset (CO) admission prevalence, and community-onset healthcare facility associated (COHFA) admission prevalence of CDI. Standardized infection ratios (SIRs) are displayed for LabID events in acute care hospitals beginning January 2015.

<sup>35</sup> <https://www.cdc.gov/nhsn/pdfs/ps-analysis-resources/nhsn-sir-guide.pdf>

**Crude (unadjusted) healthcare facility-onset (HO) incidence rates** are calculated as follows:

$$\text{HO Incidence Rate} = \frac{\text{Number of HO events}}{\text{Number of patient days}} \times 10,000$$

**Community-onset (CO) and community-onset healthcare facility-associated (COHFA) prevalence rates** are calculated as follows:

$$\text{CO Incidence Rate} = \frac{\text{Number of CO events}}{\text{Number of patient admissions}} \times 1,000$$

# *C. difficile* Infection (CDI) Laboratory-Identified Events

*Acute Care Hospitals*

## CDI LabID Events in Acute Care Hospitals:

**Total number of facilities reporting from January-December 2017: 105**

**Total number of facilities reporting from January-December 2018: 106**

### **SIRs by Quarter (Figure 84, Figure 85)**

- From January-March 2017 to October-December 2017, the overall healthcare facility-onset CDI LabID SIR in acute care hospitals in Tennessee decreased from 0.94 to 0.81. From January-March 2018 to October-December 2018, the CDI SIR decreased from 0.77 to 0.63, slightly below the U.S. Department of Health and Human Services' [National Action Plan to Prevent Healthcare-Associated Infections](#)<sup>36</sup> prevention target of SIR = 0.70.

### **Healthcare Facility-Onset and Community-Onset CDI LabID Rates (Figure 86, Table 57)**

- The healthcare facility-onset CDI LabID incidence rate was 5.76 per 10,000 patient days in 2017 and decreased to an incidence rate of 4.63 per 10,000 patient days in 2018.
- The prevalence of community-onset CDI LabID events for 2017 was 3.36 per 1,000 admissions; the prevalence of community-onset MRSA decreased in 2018 with a prevalence rate of 3.05 per 1,000 admissions. The community-onset healthcare facility associated prevalence rate was 1.07 per 1,000 admissions in 2017 and 0.85 per 1,000 admissions in 2018.

### **Key percentiles for Tennessee SIRs (Table 58)**

- The overall healthcare facility-onset CDI LabID SIR for acute care hospitals in Tennessee from January-December 2017 was statistically significantly lower than the national SIR of 1 (SIR=0.83; 95% CI: 0.80, 0.87). The overall healthcare facility-onset CDI LabID SIR for acute care hospitals in Tennessee from January-December 2018 was statistically significantly lower than the national SIR of 1 (SIR=0.68; 95% CI: 0.65, 0.72).
- From January-December 2017, the median healthcare facility-onset CDI LabID SIR for acute care hospitals was 0.68, indicating that half of reporting facilities with at least 1 predicted infection had a healthcare facility-onset CDI LabID SIR at or below 0.68. From January-December 2018, the median healthcare facility-onset CDI LabID SIR for acute care hospitals was 0.59.

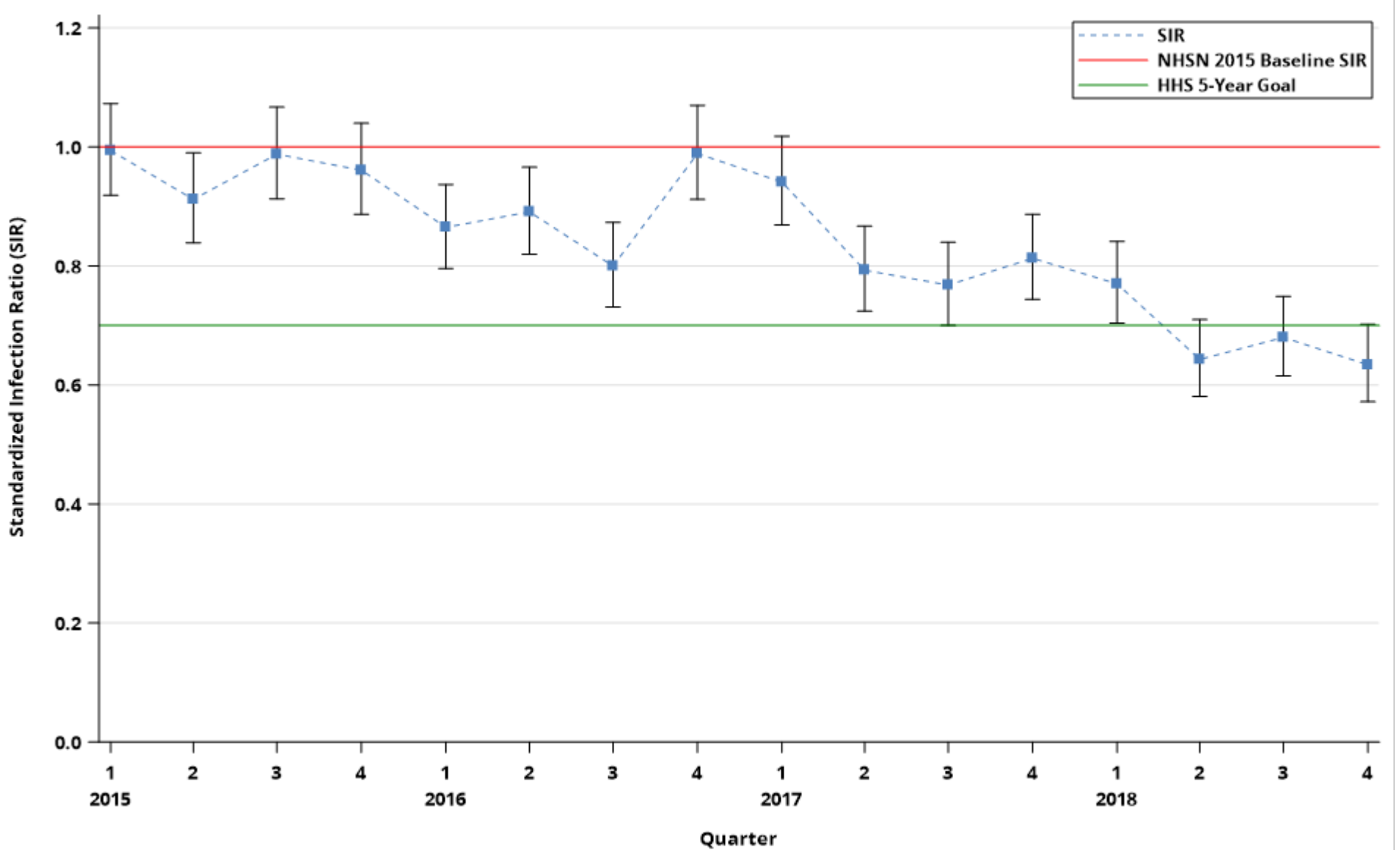
<sup>36</sup> [http://www.health.gov/hai/prevent\\_hai.asp](http://www.health.gov/hai/prevent_hai.asp)

### **Facility-Specific SIRs (Figure 87, Figure 88)**

- The healthcare facility-onset CDI LabID event SIR for 2017 and 2018 for each acute care facility is displayed in [Figure 87](#) and [Figure 88](#). The bar representing the confidence interval is green if the was significantly lower than the 2015 national SIR of 1 and red if the SIR was significantly higher than 1. Some hospitals reported zero events (indicated with an asterisk), although the facility's SIR may not be statistically significant due to a relatively small number of patient days.
- In 2017, 29 facilities had a healthcare facility-onset CDI LabID event SIR that was statistically significantly lower than the 2015 national baseline SIR of 1 and 5 facilities had a SIR that was statistically significantly higher than the baseline SIR. In 2018, 38 facilities had a healthcare facility-onset CDI LabID event SIR that was statistically significantly lower than the 2015 national baseline SIR of 1 and one facility had a SIR that was statistically significantly higher than the baseline SIR.

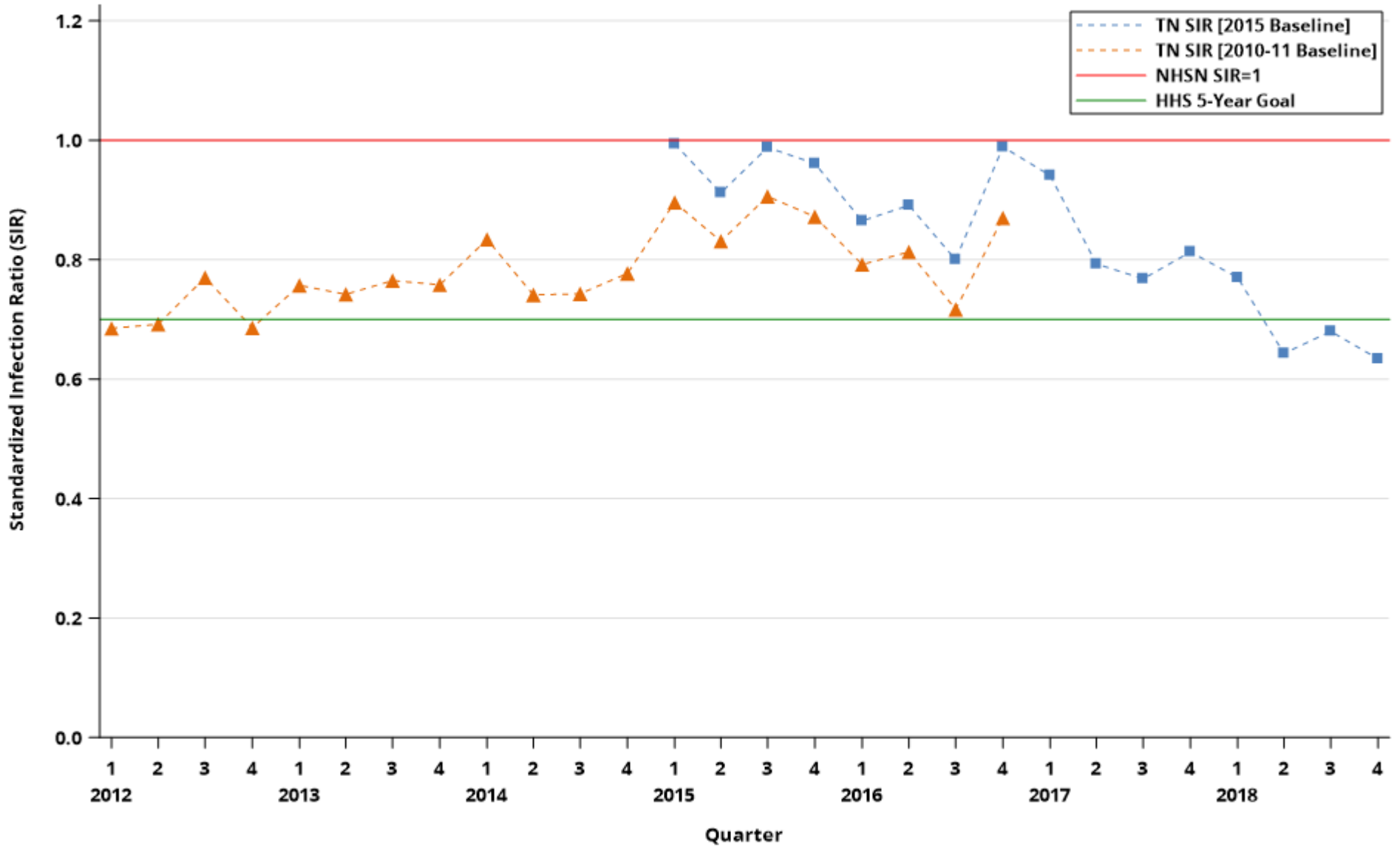


Figure 84: Standardized Infection Ratio (SIR) for Healthcare-Onset *C. difficile* Infection (CDI) Laboratory-Identified (LabID) Events for Acute Care Hospitals by Quarter, Tennessee, 01/01/2015–12/31/2018 [Reference standard: National Healthcare Safety Network (NHSN), 2015]



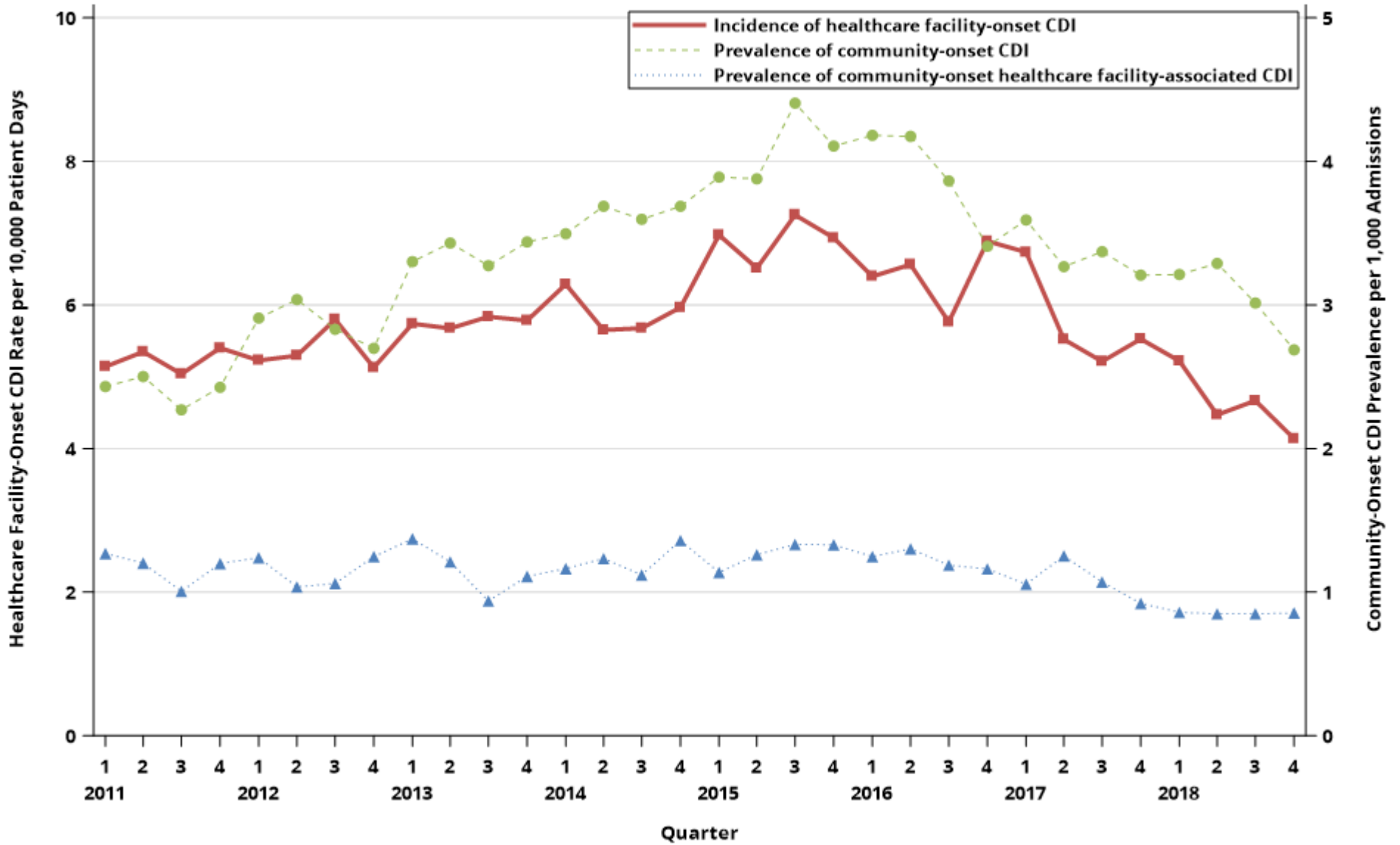
Data Reported as of June 20, 2019

Figure 85: Standardized Infection Ratio (SIR) for Healthcare-Onset C. difficile Infection (CDI) Laboratory-Identified (LabID) Events for Acute Care Hospitals by Quarter, Tennessee, 01/01/2012–12/31/2018



Data Reported as of June 20, 2019

Figure 86: C. difficile Infection (CDI) Laboratory-Identified (LabID) Events Pooled Mean Incidence and Prevalence Rates in Acute Care Hospitals by Quarter, Tennessee, 01/01/2011-12/31/2018



Data Reported as of June 20, 2019

**Table 57: C. difficile Infection (CDI) Laboratory-Identified (LabID) Events Pooled Mean Incidence and Prevalence Rates in Acute Care Hospitals by Year, Tennessee, 01/01/2017 - 12/31/2018**

			Healthcare Facility-Onset Incidence Rate <sup>1</sup>	Community-Onset Prevalence Rate <sup>2</sup>	
STATE	YEAR	No.	POOLED MEAN	CO POOLED MEAN	CO-HFA POOLED MEAN
Tennessee	2018	106	4.63	3.05	0.85
	2017	105	5.76	3.36	1.07

Data reported as of June 20, 2019

No. = number of facilities reporting; CO = community-onset; CO-HFA = community-onset healthcare facility-associated

<sup>1</sup>Events per 10,000 patient days

<sup>2</sup>Events per 1,000 admissions

**Table 58: Healthcare-Onset C. difficile Infection (CDI) Laboratory-Identified (LabID) Events Standardized Infection Ratio (SIR) in Acute Care Hospitals by Reporting Year, Tennessee, 01/01/2017 - 12/31/2018**

									DISTRIBUTION OF FACILITY-SPECIFIC SIRs										
				No. of INFECTIONS		SIR AND 95% CONFIDENCE INTERVAL			No. of FACS WITH ≥1 PRED INFECTION		No. of FACS WITH SIR <1.0		No. of FACS WITH SIR >1.0						
STATE	YEAR	No.	PAT DAYS	OBS	PRED	SIR	LOWER LIMIT	UPPER LIMIT	N	%	N	%	10%	25%	50%	75%	90%		
Tennessee	2018	106	3,508,615	1,625	2,378.01	0.68	0.65	0.72	86	38	44%	1	1%	0.00	0.27	0.59	0.77	1.06	
	2017	105	3,560,834	2,050	2,466.56	0.83	0.80	0.87	91	29	32%	5	5%	0.16	0.34	0.68	1.03	1.30	

Data reported as of June 20, 2019

No. = number of facilities reporting; PAT DAYS = number of patient days; OBS = observed number of events

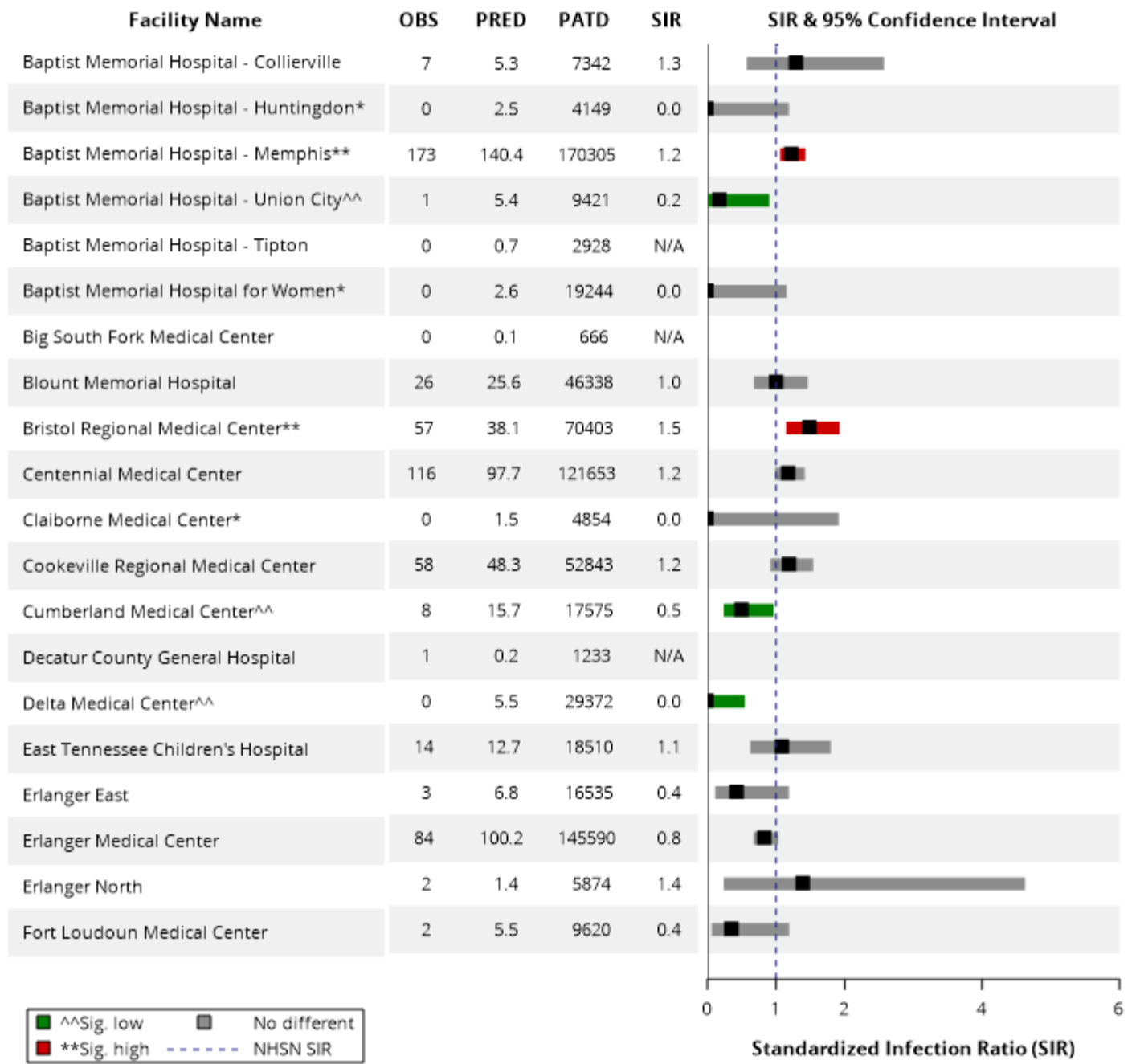
PRED = statistically 'predicted' number of events; SIR = Standardized Infection Ratio (observed/predicted number of events)

Key percentiles include facilities with at least one predicted infection

Red highlighting indicates SIR for reporting period is significantly higher than national 2015 SIR of 1.0

Green highlighting indicates SIR for reporting period is significantly lower than national 2015 SIR of 1.0

**Figure 87: Healthcare Facility-Onset C. difficile Infection (CDI) Laboratory-Identified (LabID) Event Standardized Infection Ratios (SIRs) in Acute Care Facilities, Tennessee, 01/01/2017 – 12/31/2017**



Data Reported as of June 20, 2019

N = number of types of units reporting

OBS = observed number of Healthcare Facility-Onset CDI LabID Events

PRED = statistically 'predicted' number of events, based on NHSN baseline data

SIR = standardized infection ratio (observed/predicted number of events)

PATD = number of patient days

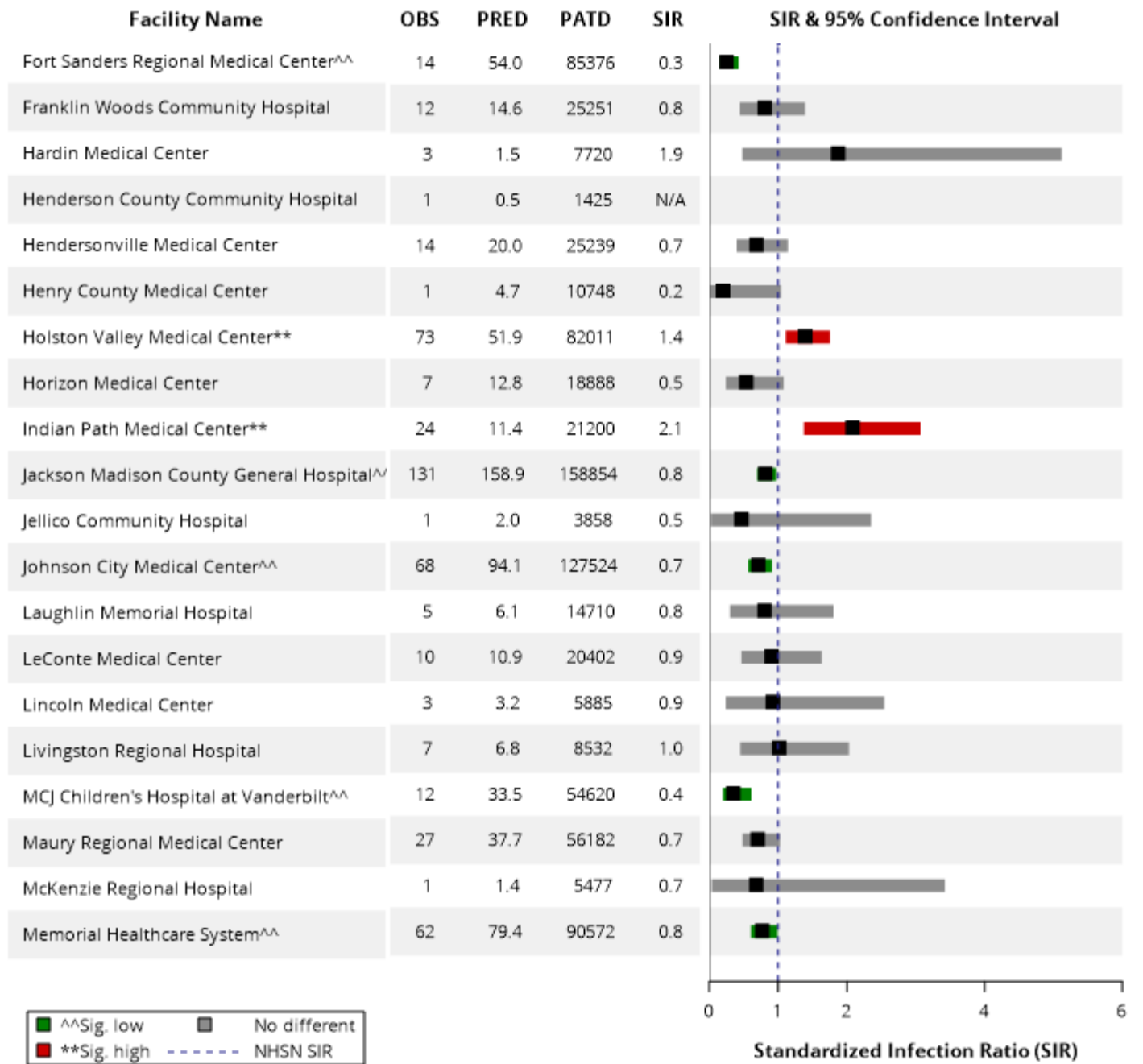
N/A = SIR not calculated for facilities with <1 predicted infection

\*\* Significantly higher than national baseline

^^ Significantly lower than national baseline

\* Zero events, but not statistically significant

Figure 87 (cont'd)



Data Reported as of June 20, 2019

N = number of types of units reporting

OBS = observed number of Healthcare Facility-Onset CDI LabID Events

PRED = statistically 'predicted' number of events, based on NHSN baseline data

SIR = standardized infection ratio (observed/predicted number of events)

PATD = number of patient days

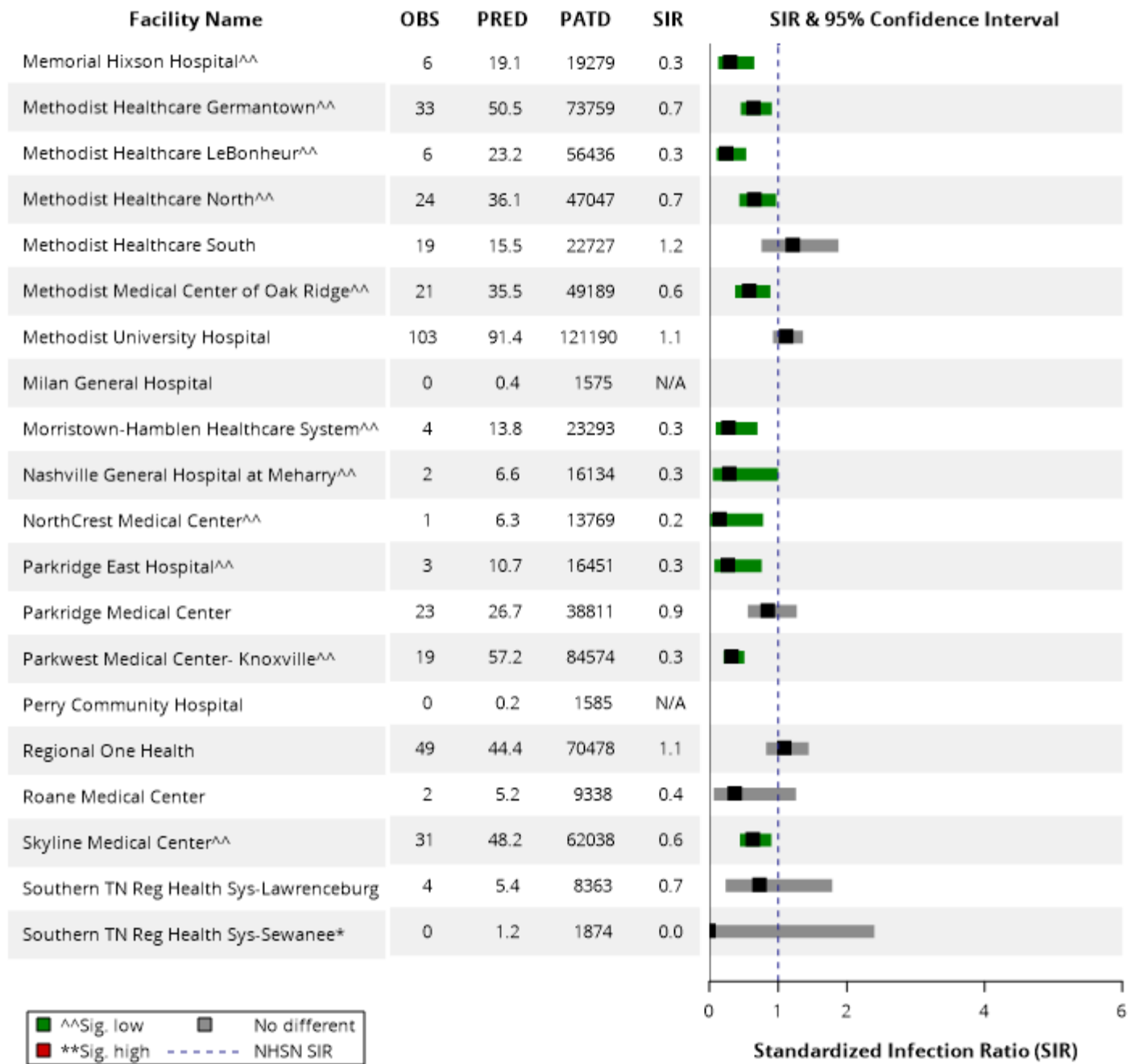
N/A = SIR not calculated for facilities with <1 predicted infection

\*\* Significantly higher than national baseline

^^ Significantly lower than national baseline

\* Zero events, but not statistically significant

Figure 87 (cont'd)



Data Reported as of June 20, 2019

N = number of types of units reporting

OBS = observed number of Healthcare Facility-Onset CDI LabID Events

PRED = statistically 'predicted' number of events, based on NHSN baseline data

SIR = standardized infection ratio (observed/predicted number of events)

PATD = number of patient days

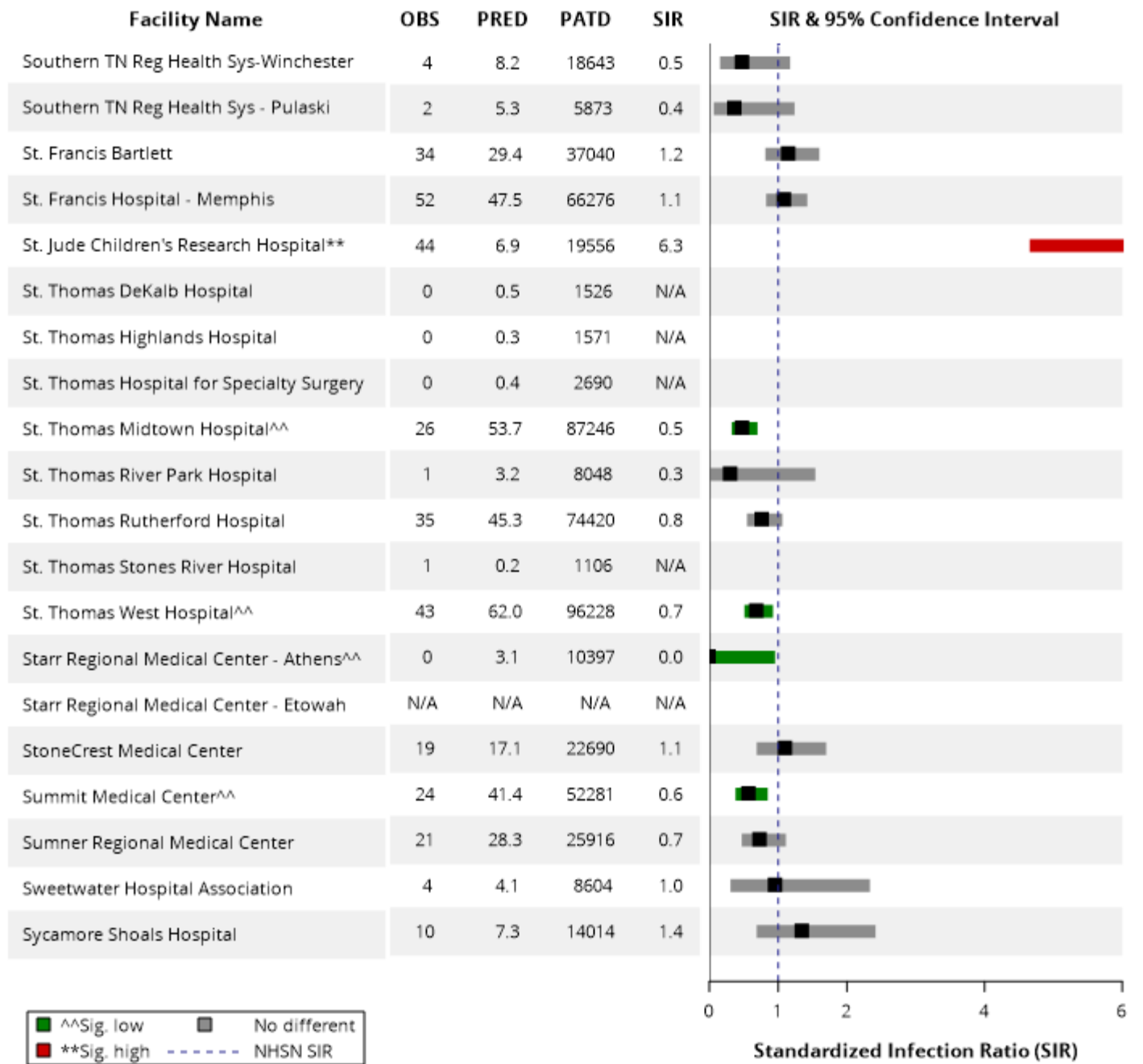
N/A = SIR not calculated for facilities with <1 predicted infection

\*\* Significantly higher than national baseline

^^ Significantly lower than national baseline

\* Zero events, but not statistically significant

Figure 87 (cont'd)



Data Reported as of June 20, 2019

N = number of types of units reporting

OBS = observed number of Healthcare Facility-Onset CDI LabID Events

PRED = statistically 'predicted' number of events, based on NHSN baseline data

SIR = standardized infection ratio (observed/predicted number of events)

PATD = number of patient days

N/A = SIR not calculated for facilities with <1 predicted infection

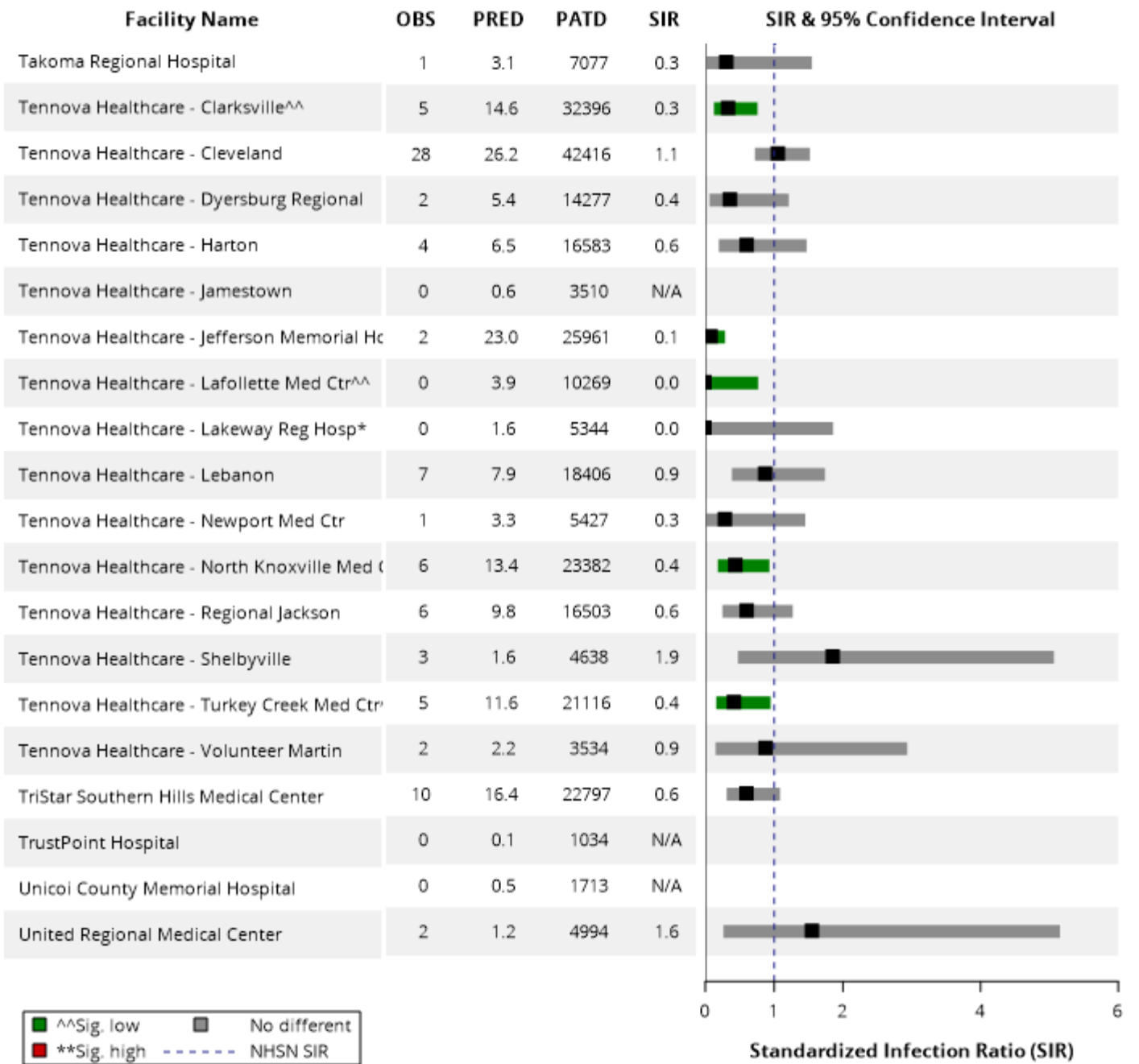
\*\* Significantly higher than national baseline

^^ Significantly lower than national baseline

\* Zero events, but not statistically significant



Figure 87 (cont'd)



Data Reported as of June 20, 2019

N = number of types of units reporting

OBS = observed number of Healthcare Facility-Onset CDI LabID Events

PRED = statistically 'predicted' number of events, based on NHSN baseline data

SIR = standardized infection ratio (observed/predicted number of events)

PATD = number of patient days

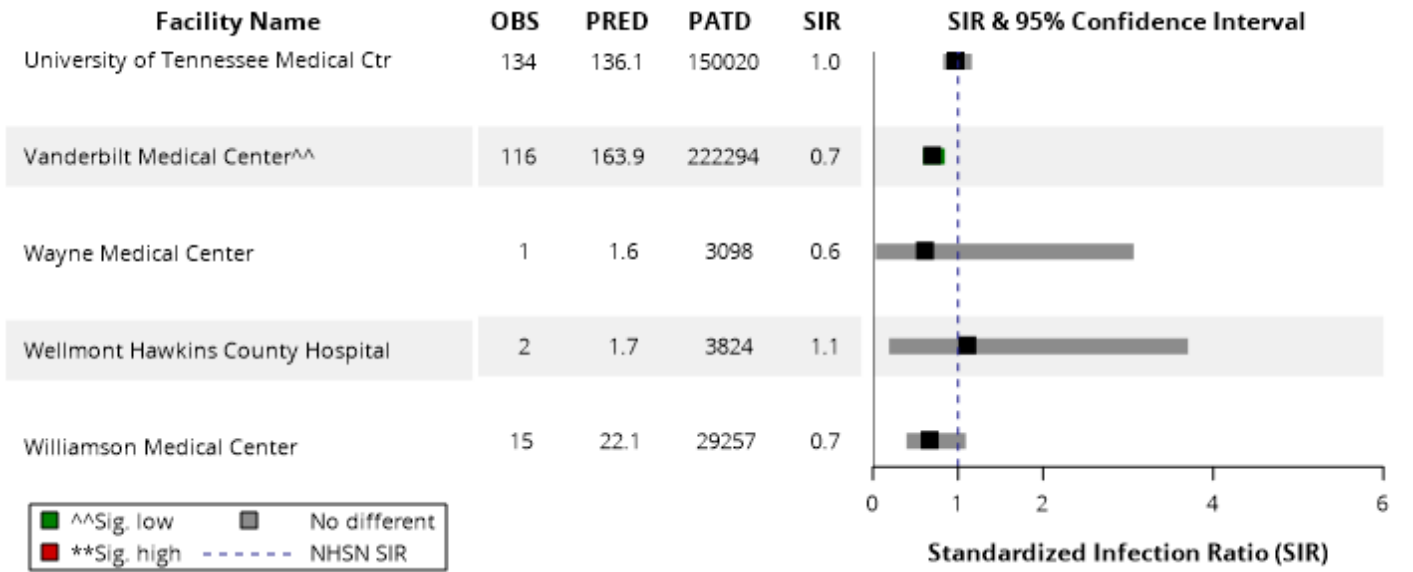
N/A = SIR not calculated for facilities with <1 predicted infection

\*\* Significantly higher than national baseline

^^ Significantly lower than national baseline

\* Zero events, but not statistically significant

**Figure 87 (cont'd)**



Data Reported as of June 20, 2019

N = number of types of units reporting

OBS = observed number of Healthcare Facility-Onset CDI LabID Events

PRED = statistically 'predicted' number of events, based on NHSN baseline data

SIR = standardized infection ratio (observed/predicted number of events)

PATD = number of patient days

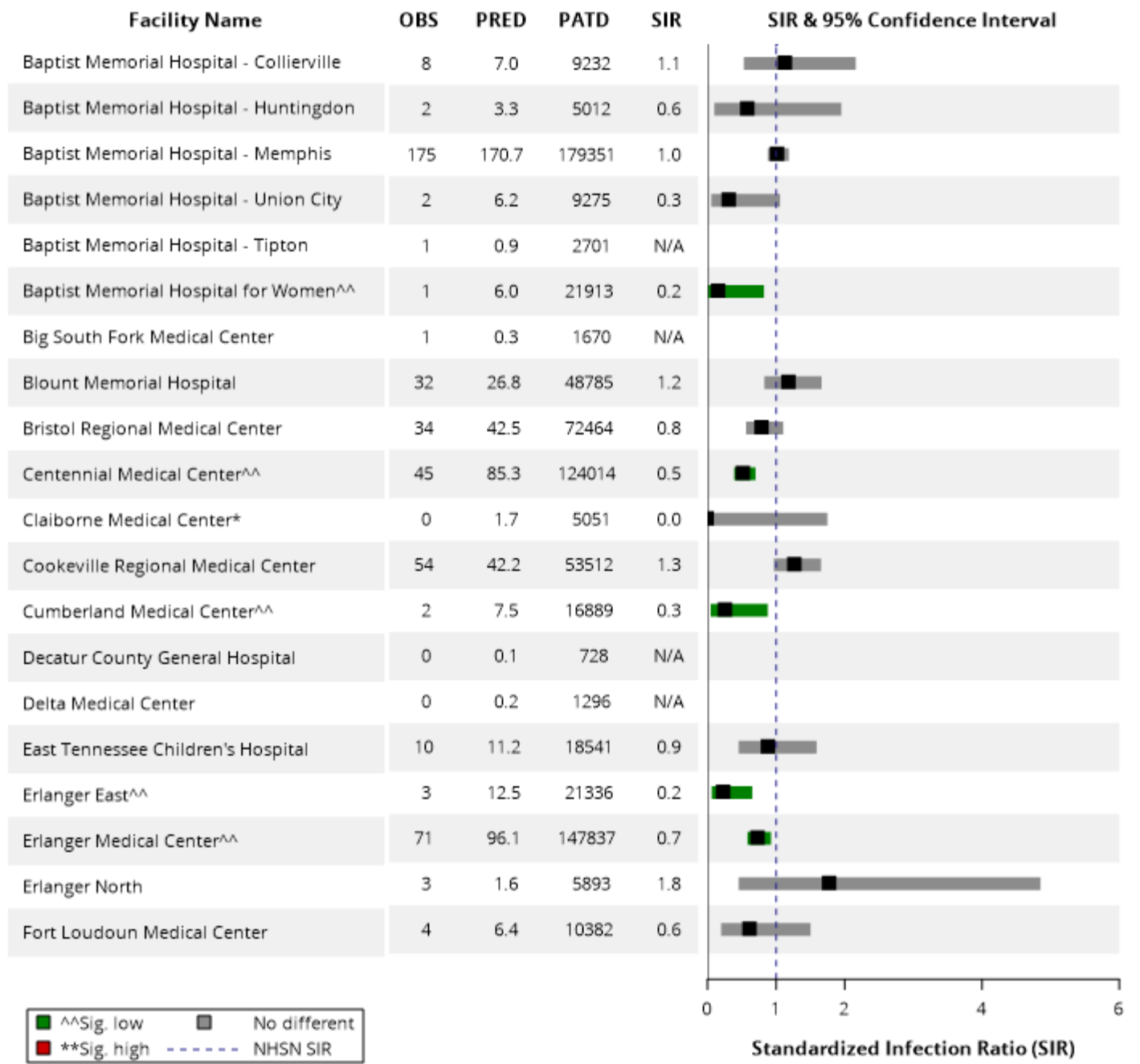
N/A = SIR not calculated for facilities with <1 predicted infection

\*\* Significantly higher than national baseline

^^ Significantly lower than national baseline

\* Zero events, but not statistically significant

**Figure 88: Healthcare Facility-Onset C. difficile Infection (CDI) Laboratory-Identified (LabID) Event Standardized Infection Ratios (SIRs) in Acute Care Facilities, Tennessee, 01/01/2018 – 12/31/2018**



Data Reported as of June 20, 2019

N = number of types of units reporting

OBS = observed number of Healthcare Facility-Onset CDI LabID Events

PRED = statistically 'predicted' number of events, based on NHSN baseline data

SIR = standardized infection ratio (observed/predicted number of events)

PATD = number of patient days

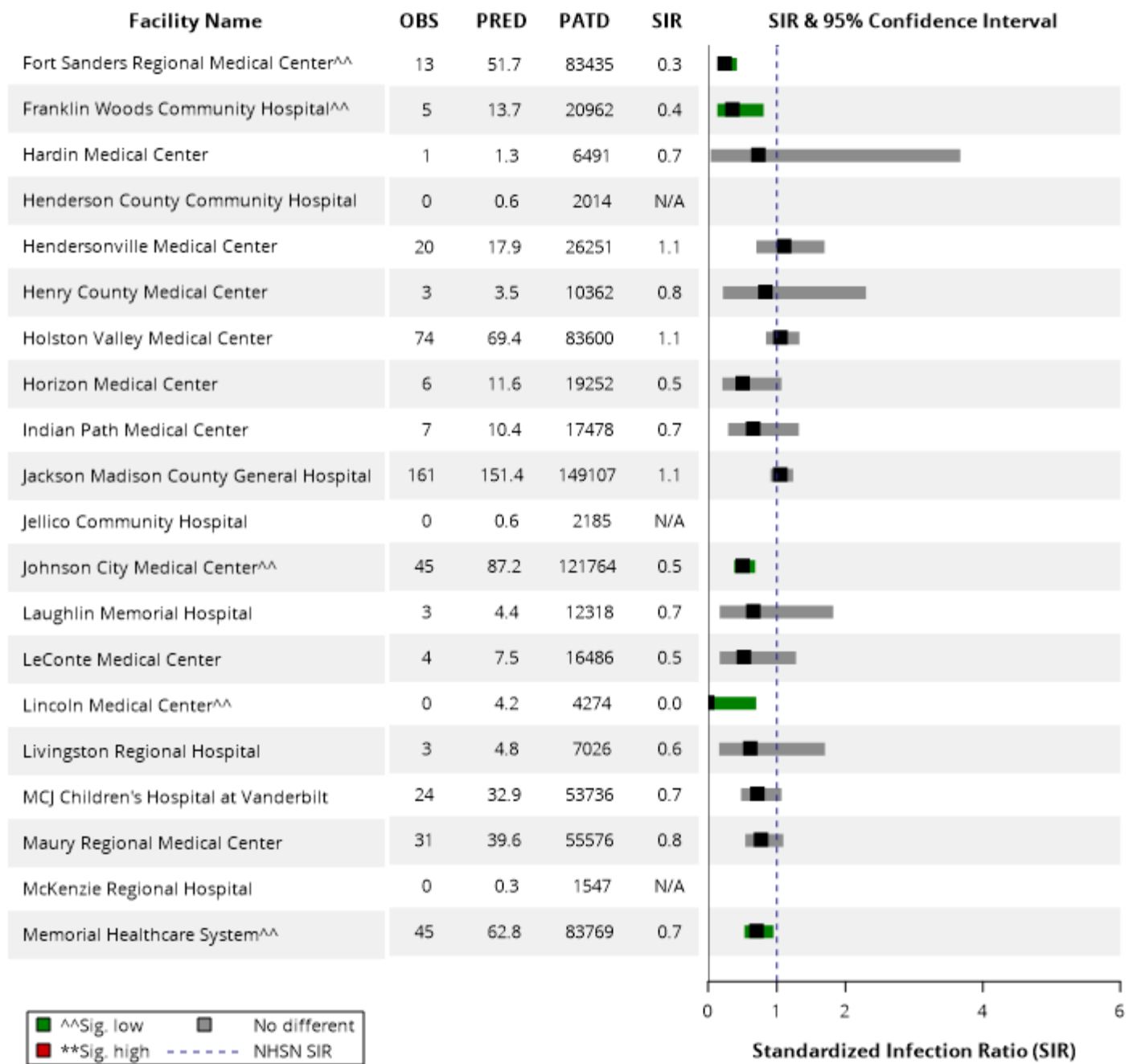
N/A = SIR not calculated for facilities with <1 predicted infection

\*\* Significantly higher than national baseline

^^ Significantly lower than national baseline

\* Zero events, but not statistically significant

Figure 88 (cont'd)



Data Reported as of June 20, 2019

N = number of types of units reporting

OBS = observed number of Healthcare Facility-Onset CDI LabID Events

PRED = statistically 'predicted' number of events, based on NHSN baseline data

SIR = standardized infection ratio (observed/predicted number of events)

PATD = number of patient days

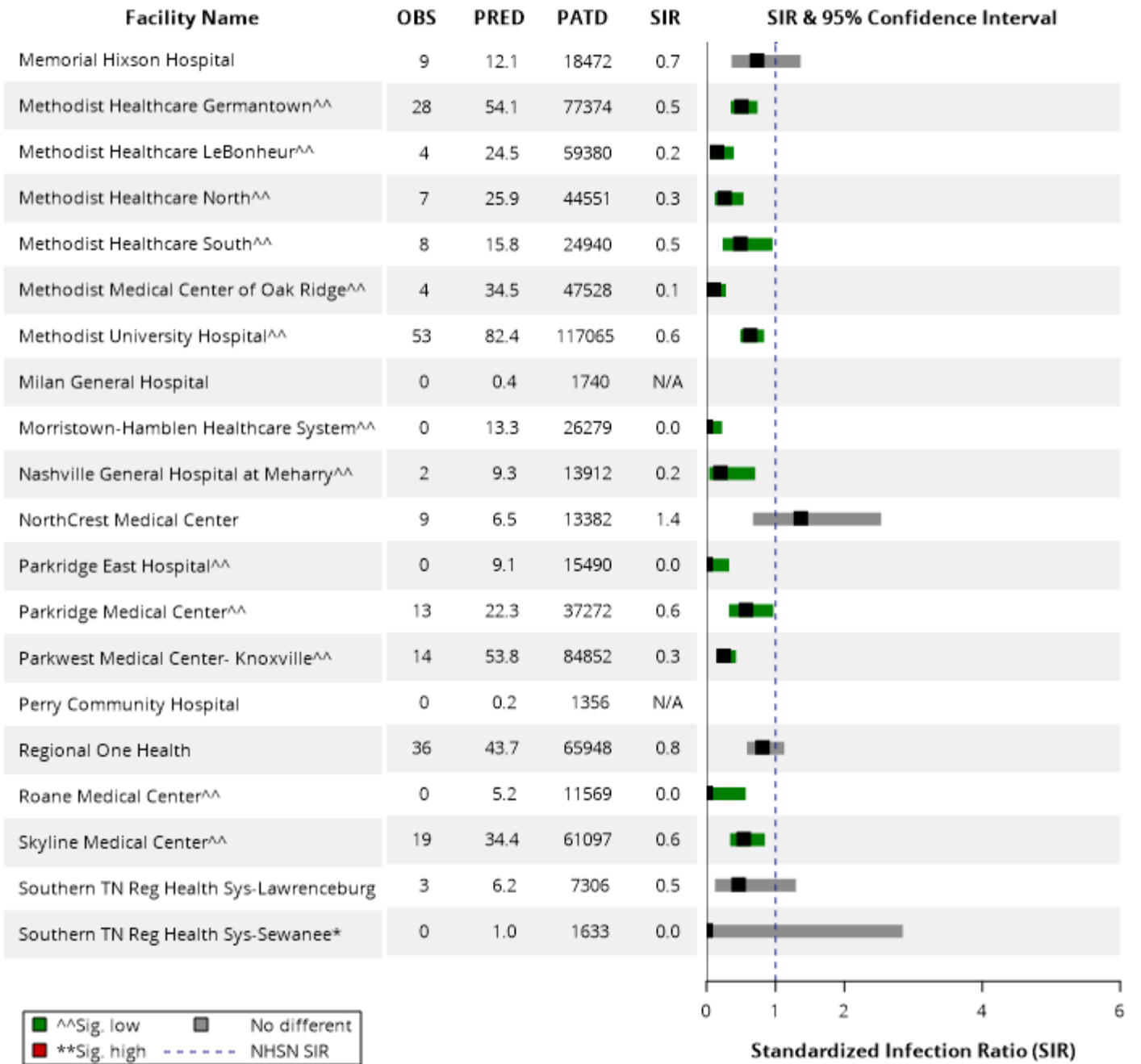
N/A = SIR not calculated for facilities with <1 predicted infection

\*\* Significantly higher than national baseline

^^ Significantly lower than national baseline

\* Zero events, but not statistically significant

Figure 88 (cont'd)



Data Reported as of June 20, 2019

N = number of types of units reporting

OBS = observed number of Healthcare Facility-Onset CDI LabID Events

PRED = statistically 'predicted' number of events, based on NHSN baseline data

SIR = standardized infection ratio (observed/predicted number of events)

PATD = number of patient days

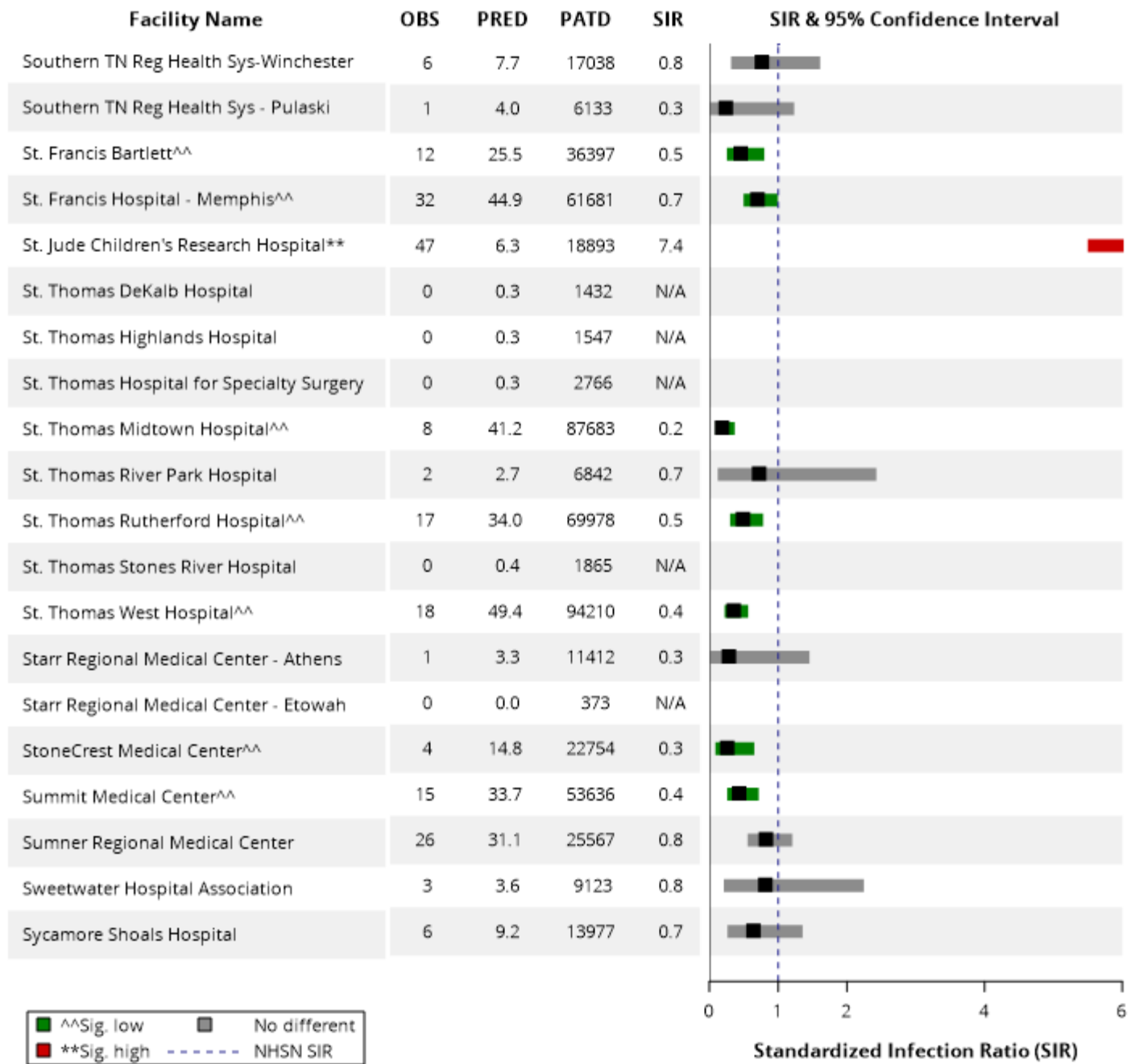
N/A = SIR not calculated for facilities with <1 predicted infection

\*\* Significantly higher than national baseline

^^ Significantly lower than national baseline

\* Zero events, but not statistically significant

Figure 88 (cont'd)



Data Reported as of June 20, 2019

N = number of types of units reporting

OBS = observed number of Healthcare Facility-Onset CDI LabID Events

PRED = statistically 'predicted' number of events, based on NHSN baseline data

SIR = standardized infection ratio (observed/predicted number of events)

PATD = number of patient days

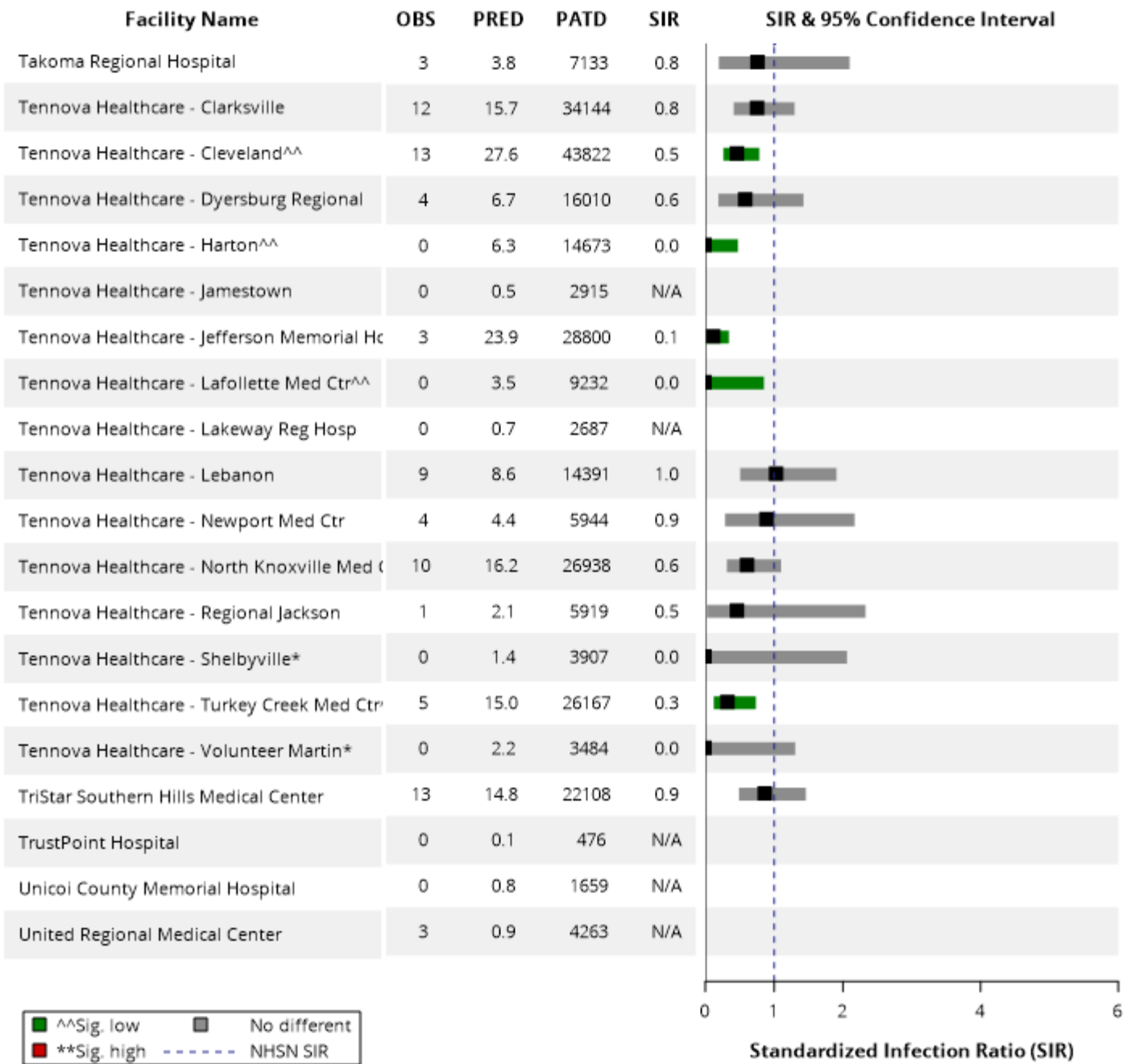
N/A = SIR not calculated for facilities with <1 predicted infection

\*\* Significantly higher than national baseline

^^ Significantly lower than national baseline

\* Zero events, but not statistically significant

Figure 88 (cont'd)



Data Reported as of June 20, 2019

N = number of types of units reporting

OBS = observed number of Healthcare Facility-Onset CDI LabID Events

PRED = statistically 'predicted' number of events, based on NHSN baseline data

SIR = standardized infection ratio (observed/predicted number of events)

PATD = number of patient days

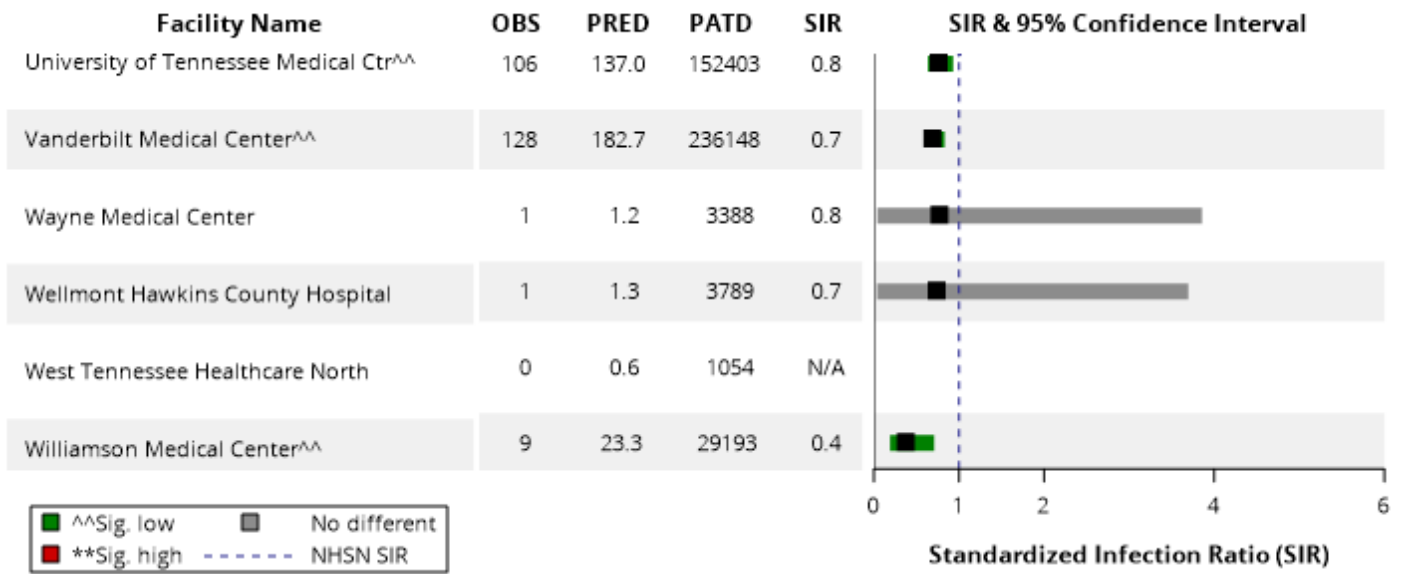
N/A = SIR not calculated for facilities with <1 predicted infection

\*\* Significantly higher than national baseline

^^ Significantly lower than national baseline

\* Zero events, but not statistically significant

**Figure 88 (cont'd)**



Data Reported as of June 20, 2019

N = number of types of units reporting

OBS = observed number of Healthcare Facility-Onset CDI LabID Events

PRED = statistically 'predicted' number of events, based on NHSN baseline data

SIR = standardized infection ratio (observed/predicted number of events)

PATD = number of patient days

N/A = SIR not calculated for facilities with <1 predicted infection

\*\* Significantly higher than national baseline

^^ Significantly lower than national baseline

\* Zero events, but not statistically significant



# *C. difficile* Infection (CDI) Laboratory-Identified Events

*Long-term Acute Care (LTAC) Hospitals*

## CDI LabID Events in Long Term Acute Care (LTAC) Facilities:

**Total number of facilities reporting from January-December 2017: 9**

**Total number of facilities reporting from January-December 2018: 9**

### **SIRs by Quarter (Figure 89)**

- From January-March 2017 to April-June 2017, the overall healthcare facility-onset CDI LabID SIR in long-term acute care hospitals in Tennessee decreased from 0.56 to 0.39. The CDI SIR then increased from July-December, ending with an SIR of 0.87. From January-March 2018 to October-December 2018, the CDI SIR fluctuated over the year beginning with an SIR of 0.58 and ending with an SIR of 0.46. The CDI SIR remained below the U.S. Department of Health and Human Services' [National Action Plan to Prevent Healthcare-Associated Infections](#)<sup>37</sup> prevention target of SIR = 0.70 throughout the entirety of 2018.

### **Key percentiles for Tennessee SIRs (Table 60)**

- The overall healthcare facility-onset CDI LabID SIR for long-term acute care hospitals in Tennessee from January-December 2017 was statistically significantly lower than the national SIR of 1 (SIR=0.62; 95% CI: 0.49, 0.78). The overall healthcare facility-onset CDI LabID SIR for long-term acute care hospitals in Tennessee from January-December 2018 was statistically significantly lower than the national SIR of 1 (SIR=0.49; 95% CI: 0.37, 0.64).
- From January-December 2017, the median healthcare facility-onset CDI LabID SIR for long-term acute care hospitals was 0.60, indicating that half of reporting facilities with at least 1 predicted infection had a healthcare facility-onset CDI LabID SIR at or below 0.60. From January-December 2018, the median healthcare facility-onset CDI LabID SIR for long-term acute care hospitals was 0.39.

<sup>37</sup> [http://www.health.gov/hai/prevent\\_hai.asp](http://www.health.gov/hai/prevent_hai.asp)

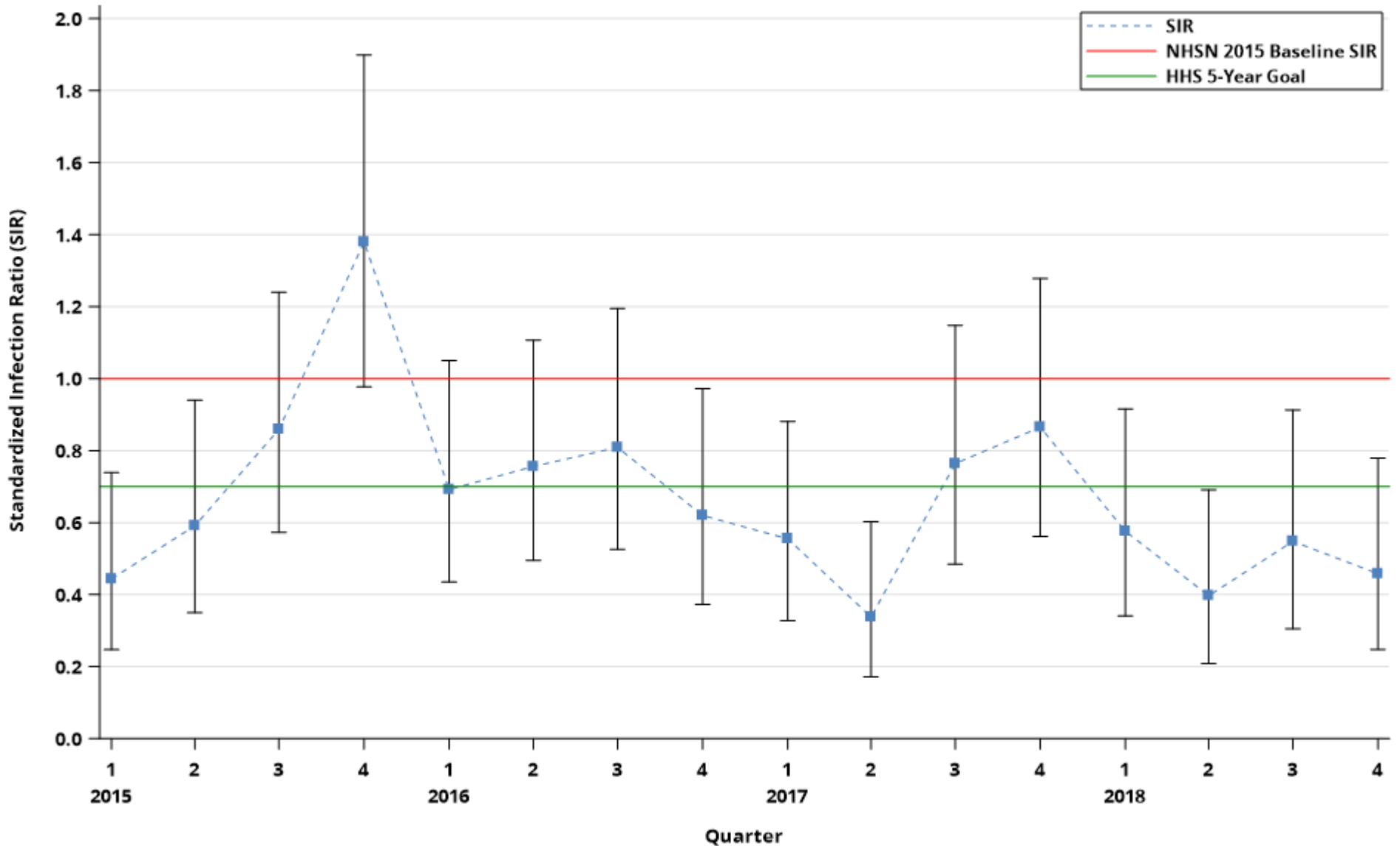
### **Healthcare Facility-Onset and Community-Onset CDI LabID Rates (Figure 90, Table 59)**

- The healthcare facility-onset CDI LabID incidence rate was 7.31 per 10,000 patient days in 2017 and decreased to an incidence rate of 5.61 per 10,000 patient days in 2018.
- The prevalence of community-onset CDI LabID events for 2017 was 5.86 per 1,000 admissions; the prevalence of community-onset CDI decreased in 2018 with a prevalence rate of 4.98 per 1,000 admissions. The community-onset healthcare facility associated prevalence rate was 0.33 per 1,000 admissions in 2017 and there were not any community-onset healthcare facility associated CDI events in 2018.

### **Facility-Specific SIRs (Figure 91, Figure 92)**

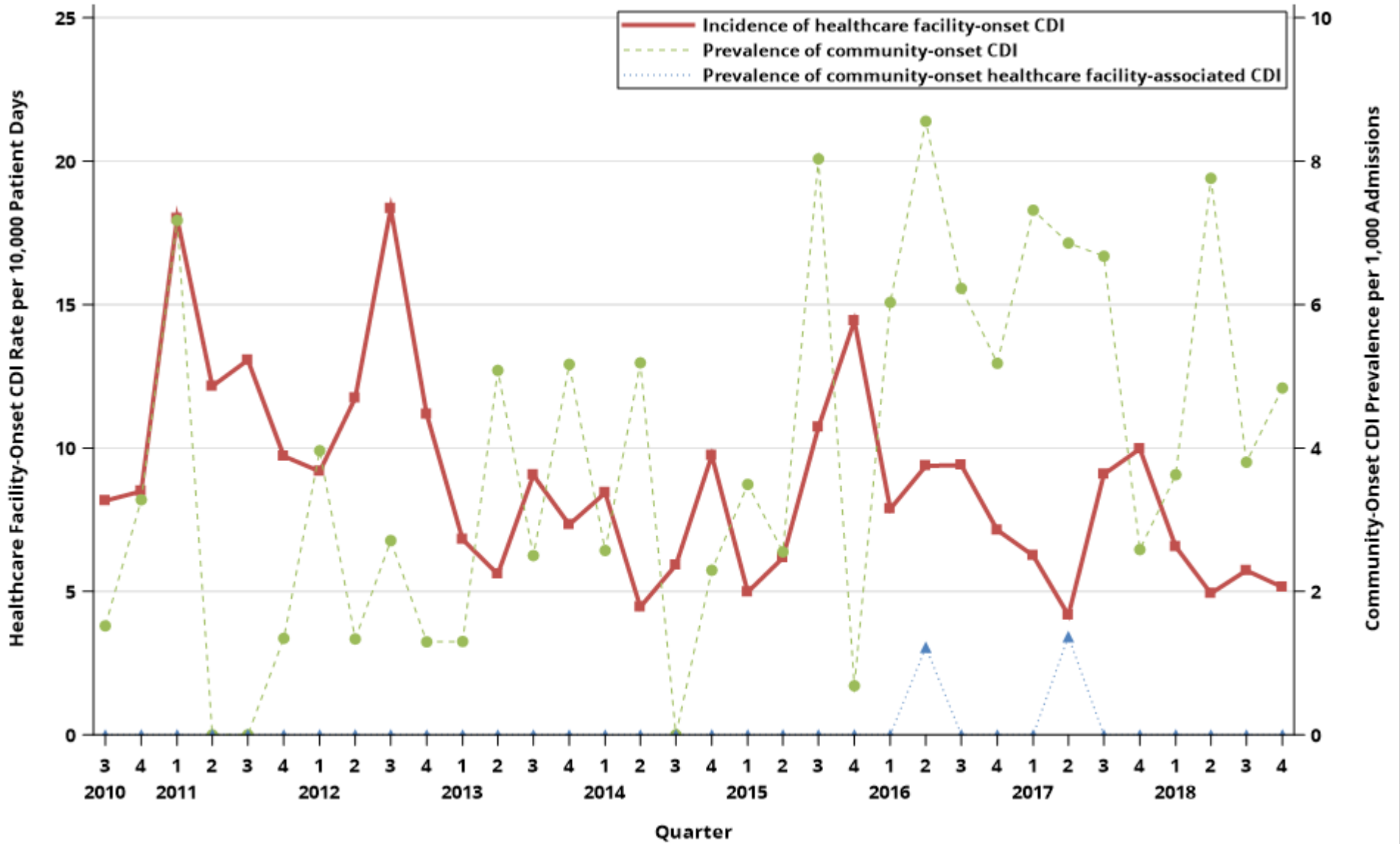
- The healthcare facility-onset CDI LabID event SIR for January-December 2017 and January-December 2018 for each long-term acute care facility is displayed in [Figure 91](#) and [Figure 92](#). The bar representing the confidence interval is green if the was significantly lower than the 2015 national SIR of 1 and red if the SIR was significantly higher than 1. Some hospitals reported zero events (indicated with an asterisk), although the facility's SIR may not be statistically significant due to a relatively small number of patient days.
- In 2017, 3 facilities had a SIR that was statistically significantly lower than the national baseline SIR of 1. In 2018, 5 facilities had a SIR that was statistically significantly lower than the baseline. In 2017 and 2018, there were no long-term acute care hospitals that higher an SIR that was statistically significantly higher than the national baseline.

Figure 89: Standardized Infection Ratio (SIR) for Healthcare-Onset *C. difficile* Infection (CDI) Laboratory-Identified (LabID) Events for Long-Term Acute Care (LTAC) Facilities by Quarter, Tennessee, 01/01/2015–12/31/2018 [Reference standard: National Healthcare Safety Network (NHSN), 2015]



Data Reported as of June 20, 2019

Figure 90: C. difficile Infection (CDI) Laboratory-Identified (LabID) Events Pooled Mean Incidence and Prevalence Rates in Long-term Acute Care (LTAC) Facilities by Quarter, Tennessee, 07/01/2010-12/31/2018



Data Reported as of June 20, 2019

**Table 59: C. difficile Infection (CDI) Laboratory-Identified (LabID) Events Pooled Mean Incidence and Prevalence Rates in Long-term Acute Care (LTAC) Facilities by Year, Tennessee, 01/01/2017 - 12/31/2018**

			Healthcare Facility-Onset Incidence Rate <sup>1</sup>	Community-Onset Prevalence Rate <sup>2</sup>	
STATE	YEAR	No.	POOLED MEAN	CO POOLED MEAN	CO-HFA POOLED MEAN
Tennessee	2018	9	5.61	4.98	0.00
	2017	9	7.31	5.86	0.33

Data reported as of June 20, 2019

No. = number of facilities reporting; CO = community-onset; CO-HFA = community-onset healthcare facility-associated

<sup>1</sup>Events per 10,000 patient days

<sup>2</sup>Events per 1,000 admissions

**Table 60: Healthcare-Onset C. difficile Infection (CDI) Laboratory-Identified (LabID) Events Standardized Infection Ratio (SIR) in Long-Term Acute Care (LTAC) Facilities by Reporting Year, Tennessee, 01/01/2017 - 12/31/2018**

									DISTRIBUTION OF FACILITY-SPECIFIC SIRs									
				No. of INFECTIONS		SIR AND 95% CONFIDENCE INTERVAL			No. of FACS WITH ≥1 PRED INFECTION		No. of FACS WITH SIR SIG. <1.0		No. of FACS WITH SIR SIG. >1.0					
STATE	YEAR	No.	PAT DAYS	OBS	PRED	SIR	LOWER LIMIT	UPPER LIMIT	N	%	N	%	10%	25%	50%	75%	90%	
Tennessee	2018	9	92,696	52	105.37	0.49	0.37	0.64	9	56%	0	0%	0.00	0.27	0.39	0.69	1.35	
	2017	9	95,741	70	112.49	0.62	0.49	0.78	9	33%	0	0%	0.00	0.42	0.60	0.84	1.45	

Data reported as of June 20, 2019

No. = number of facilities reporting; PAT DAYS = number of patient days; OBS = observed number of events

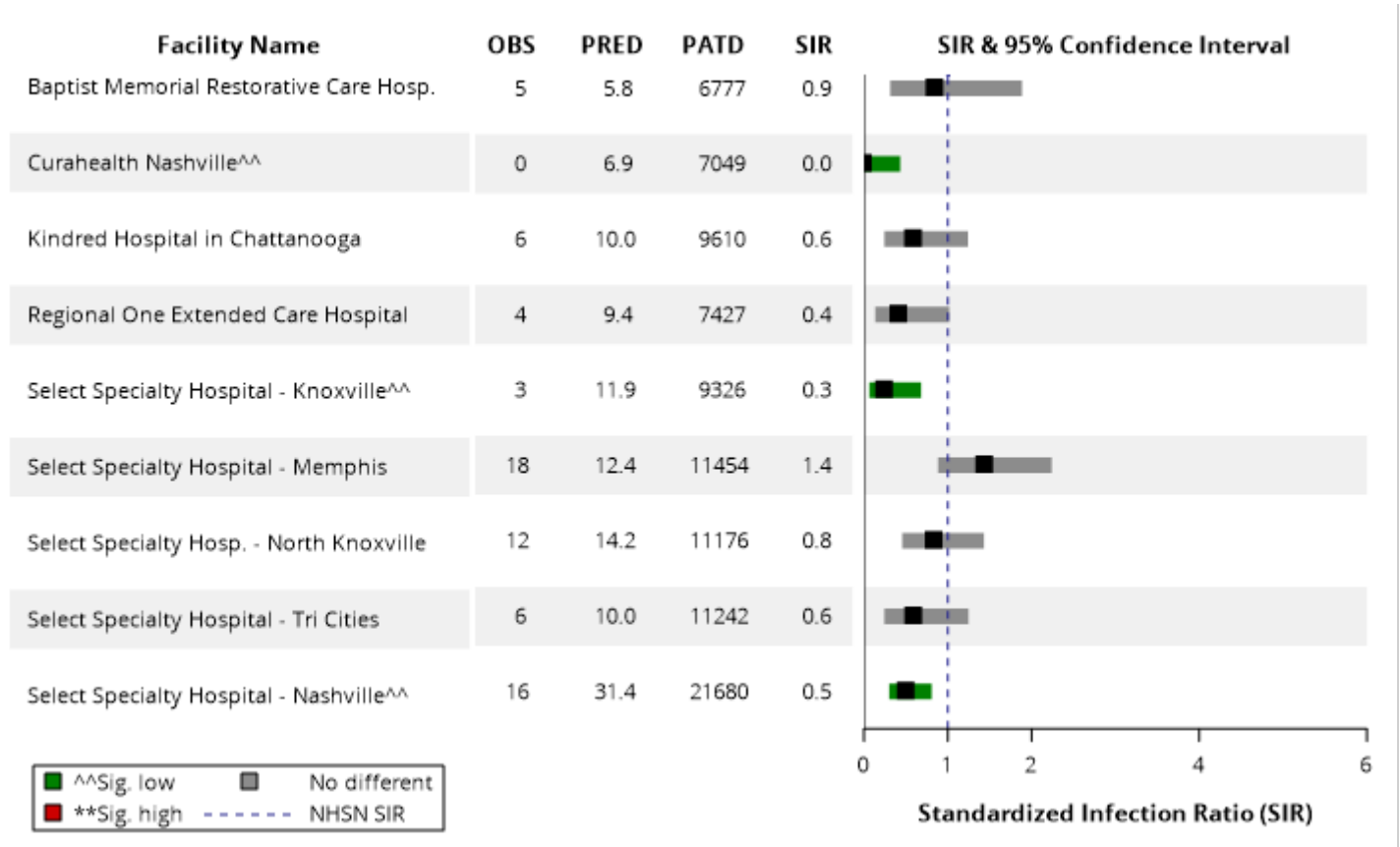
PRED = statistically 'predicted' number of events; SIR = Standardized Infection Ratio (observed/predicted number of events)

Key percentiles include facilities with at least one predicted infection

Red highlighting indicates SIR for reporting period is significantly higher than national 2015 SIR of 1.0

Green highlighting indicates SIR for reporting period is significantly lower than national 2015 SIR of 1.0

**Figure 91: Healthcare Facility-Onset C. difficile Infection (CDI) Laboratory-Identified (LabID) Event Standardized Infection Ratios (SIRs) in Long-term Acute Care Facilities, Tennessee, 01/01/2017 – 12/31/2017**



Data Reported as of June 20, 2019

N = number of types of units reporting

OBS = observed number of Healthcare Facility-Onset CDI LabID Events

PRED = statistically 'predicted' number of events, based on NHSN baseline data

SIR = standardized infection ratio (observed/predicted number of events)

PATD = number of patient days

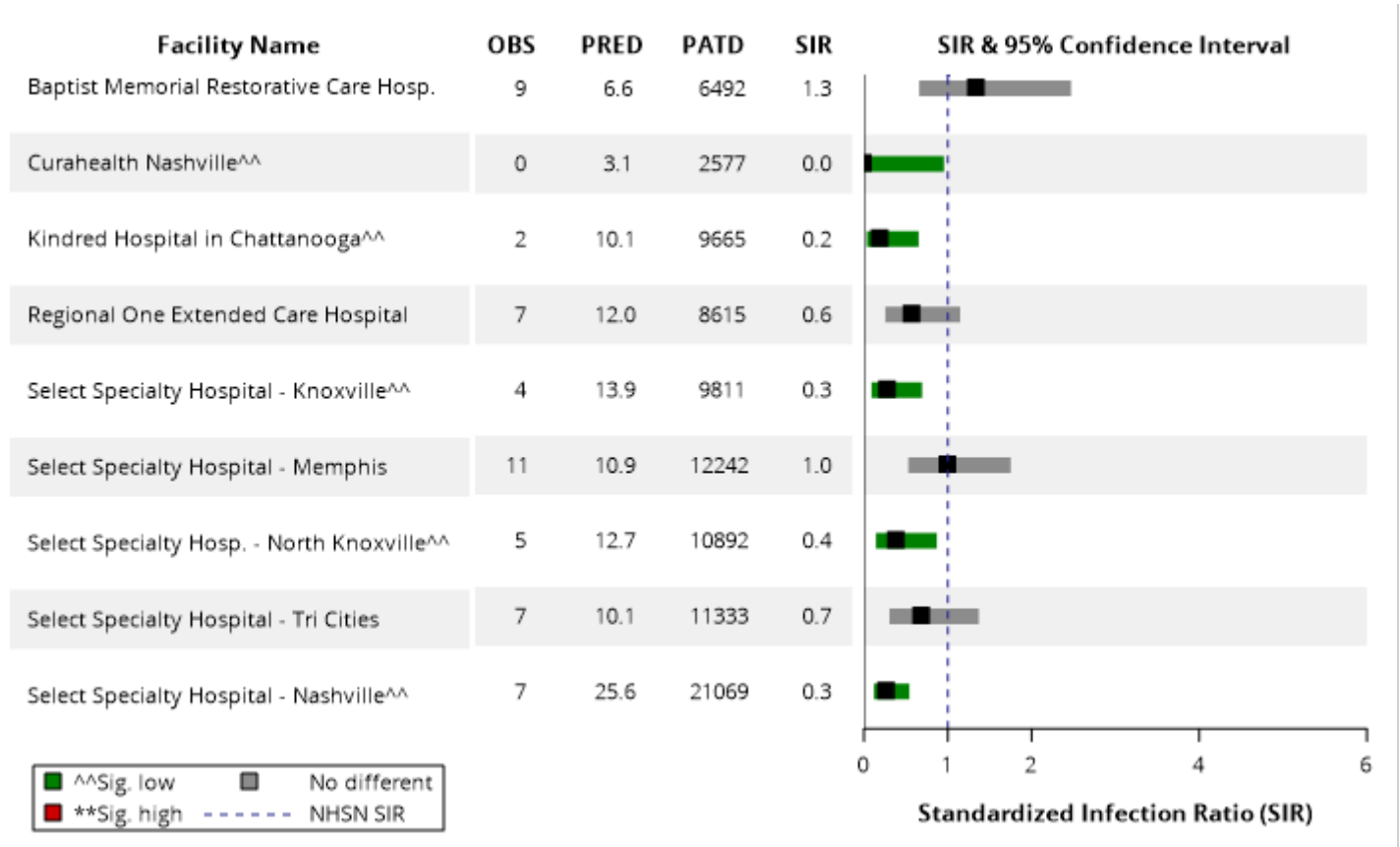
N/A = SIR not calculated for facilities with <1 predicted infection

\*\* Significantly higher than national baseline

^^ Significantly lower than national baseline

\* Zero events, but not statistically significant

**Figure 92: Healthcare Facility-Onset C. difficile Infection (CDI) Laboratory-Identified (LabID) Event Standardized Infection Ratios (SIRs) in Long-term Acute Care Facilities, Tennessee, 01/01/2018 - 12/31/2018**



Data Reported as of June 20, 2019

N = number of types of units reporting

OBS = observed number of Healthcare Facility-Onset CDI LabID Events

PRED = statistically 'predicted' number of events, based on NHSN baseline data

SIR = standardized infection ratio (observed/predicted number of events)

PATD = number of patient days

N/A = SIR not calculated for facilities with <1 predicted infection

\*\* Significantly higher than national baseline

^^ Significantly lower than national baseline

\* Zero events, but not statistically significant



# *C. difficile* Infection (CDI) Laboratory-Identified Events

***Inpatient Rehabilitation Facilities (IRF)***

## CDI LabID Events in Inpatient Rehabilitation Facilities:

**Total number of facilities reporting from January-December 2017: 30**

**Total number of facilities reporting from January-December 2018: 29**

### **SIRs by Quarter (Figure 93)**

- From January-March 2017 to October-December 2017, the overall healthcare facility-onset CDI LabID SIR in inpatient rehabilitation facilities in Tennessee decreased from 0.98 to 0.40. From January-March 2018 to October-December 2018, the overall healthcare facility-onset CDI LabID SIR in inpatient rehabilitation facilities decreased from 0.93 to 0.33, ending below the U.S. Department of Health and Human Services' [National Action Plan to Prevent Healthcare-Associated Infections](#)<sup>38</sup> prevention target of SIR = 0.70.

### **Healthcare Facility-Onset and Community-Onset CDI LabID Rates (Figure 94, Table 61)**

- The healthcare facility-onset CDI LabID incidence rate was 3.14 per 10,000 patient days in 2017 and decreased to an incidence rate of 2.56 per 10,000 patient days in 2018.
- The prevalence of community-onset CDI LabID events for 2017 was 0.53 per 1,000 admissions; the prevalence of community-onset CDI decreased in 2018 with a prevalence rate of 0.51 per 1,000 admissions. The community-onset healthcare facility associated prevalence rate was 0.18 per 1,000 admissions in 2017 and 0.23 per 1,000 admissions in 2018.

### **Key percentiles for Tennessee SIRs (Table 62)**

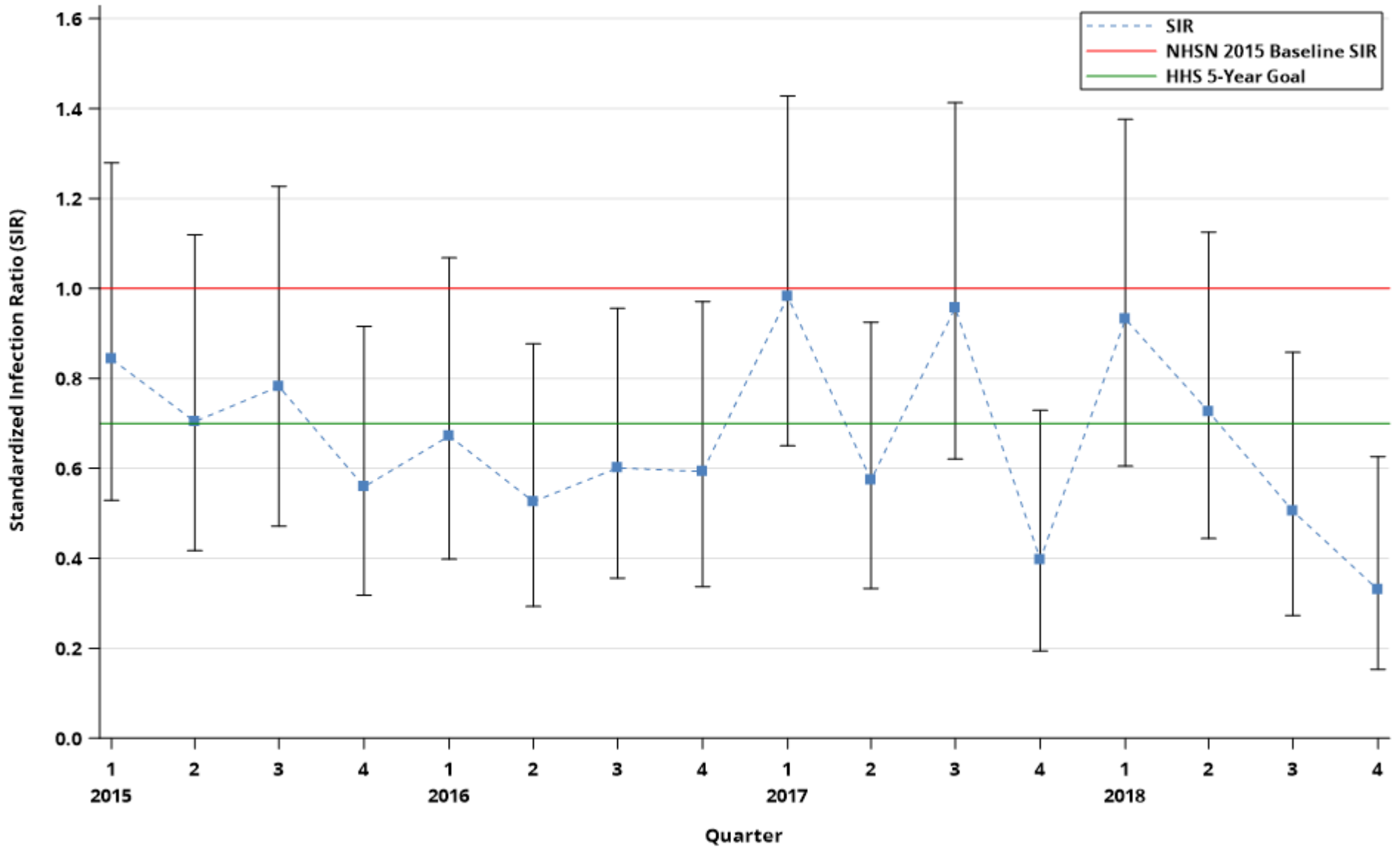
- The overall healthcare facility-onset CDI LabID SIR for IRFs in Tennessee from January-December 2017 was statistically significantly lower than the national SIR of 1 (SIR=0.73; 95% CI: 0.58, 0.92). The overall healthcare facility-onset CDI LabID SIR for IRFs in Tennessee from January-December 2018 was statistically significantly lower than the national SIR of 1 (SIR=0.63; 95% CI: 0.48, 0.80).
- From January-December 2017, the median healthcare facility-onset CDI LabID SIR for IRFs was 0.66, indicating that half of reporting facilities with at least 1 predicted infection had a healthcare facility-onset CDI LabID SIR at or below 0.66. From January-December 2018, the median healthcare facility-onset CDI LabID SIR for IRFs was 0.36.

<sup>38</sup> [http://www.health.gov/hai/prevent\\_hai.asp](http://www.health.gov/hai/prevent_hai.asp)

**Facility-Specific SIRs (Figure 95, Figure 96)**

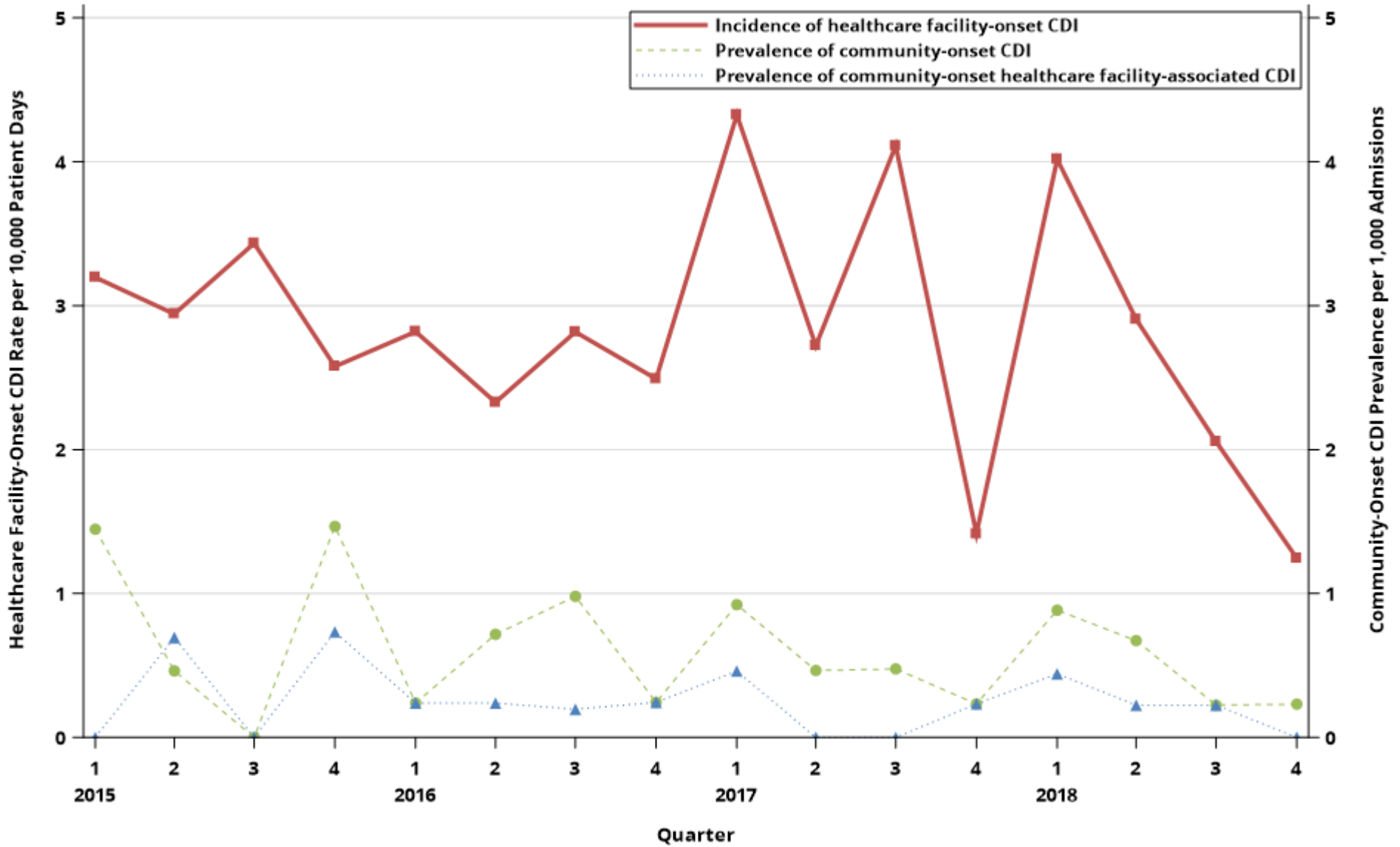
- The healthcare facility-onset CDI LabID event SIR for January-December 2017 and January-December 2018 for each inpatient rehabilitation facility is displayed in [Figure 95](#) and [Figure 96](#). The bar representing the confidence interval is green if the was significantly lower than the 2015 national SIR of 1 and red if the SIR was significantly higher than 1. Some hospitals reported zero events (indicated with an asterisk), although the facility's SIR may not be statistically significant due to a relatively small number of patient days.
- In 2017, one facility had a healthcare facility-onset CDI LabID event SIR that was statistically significantly higher than the 2015 national baseline SIR of 1 and 3 facilities had a SIR that was statistically significantly lower than the baseline. In 2018, 4 facilities had a SIR that was statistically significantly lower than the national baseline SIR of 1. Three facilities had a SIR statistically significantly higher than the national baseline.

Figure 93: Standardized Infection Ratio (SIR) for Healthcare-Onset C. difficile Infection (CDI) Laboratory-Identified (LabID) Events for Inpatient Rehabilitation Facilities (IRF) by Quarter, Tennessee, 01/01/2015–12/31/2018 [Reference standard: National Healthcare Safety Network (NHSN), 2015]



Data Reported as of June 20, 2019

Figure 94: C. difficile Infection (CDI) Laboratory-Identified (LabID) Events Pooled Mean Incidence and Prevalence Rates in Inpatient Rehabilitation Facilities (IRF) by Quarter, Tennessee, 01/01/2015-12/31/2018



Data Reported as of June 20, 2019

**Table 61: C. difficile Infection (CDI) Laboratory-Identified (LabID) Events Pooled Mean Incidence and Prevalence Rates in Inpatient Rehabilitation Facilities (IRF) by Year, Tennessee, 01/01/2017 - 12/31/2018**

			Healthcare Facility-Onset Incidence Rate <sup>1</sup>	Community-Onset Prevalence Rate <sup>2</sup>	
STATE	YEAR	No.	POOLED MEAN	CO POOLED MEAN	CO-HFA POOLED MEAN
Tennessee	2018	29	2.56	0.51	0.23
	2017	30	3.14	0.53	0.18

Data reported as of June 20, 2019

No. = number of facilities reporting; CO = community-onset; CO-HFA = community-onset healthcare facility-associated

<sup>1</sup>Events per 10,000 patient days

<sup>2</sup>Events per 1,000 admissions

**Table 62: Healthcare-Onset C. difficile Infection (CDI) Laboratory-Identified (LabID) Events Standardized Infection Ratio (SIR) in Inpatient Rehabilitation Facilities (IRF) by Reporting Year, Tennessee, 01/01/2017 - 12/31/2018**

										DISTRIBUTION OF FACILITY-SPECIFIC SIRs									
				No. of INFECTIONS		SIR AND 95% CONFIDENCE INTERVAL			No. of FACS WITH ≥1 PRED INFECTION		No. of FACS WITH SIR <1.0		No. of FACS WITH SIR >1.0						
STATE	YEAR	No.	PAT DAYS	OBS	PRED	SIR	LOWER LIMIT	UPPER LIMIT		N	%	N	%	10%	25%	50%	75%	90%	
Tennessee	2018	29	229,832	61	97.53	0.63	0.48	0.80	24	4	17%	3	13%	0.00	0.00	0.36	0.83	2.06	
	2017	30	229,059	72	98.31	0.73	0.58	0.92	23	3	13%	1	4%	0.00	0.31	0.66	0.94	1.78	

Data reported as of June 20, 2019

No. = number of facilities reporting; PAT DAYS = number of patient days; OBS = observed number of events

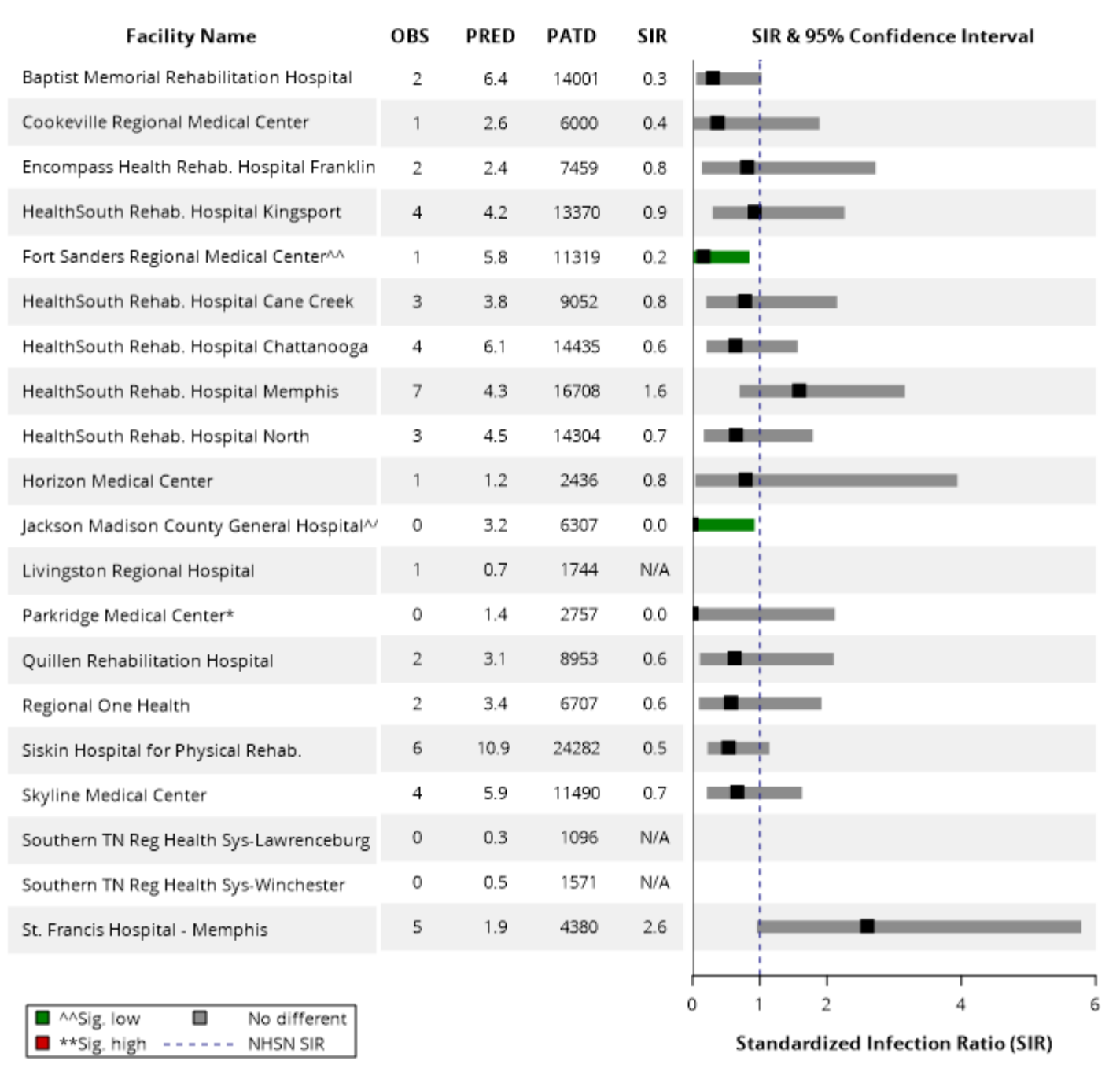
PRED = statistically 'predicted' number of events; SIR = Standardized Infection Ratio (observed/predicted number of events)

Key percentiles include facilities with at least one predicted infection

Red highlighting indicates SIR for reporting period is significantly higher than national 2015 SIR of 1.0

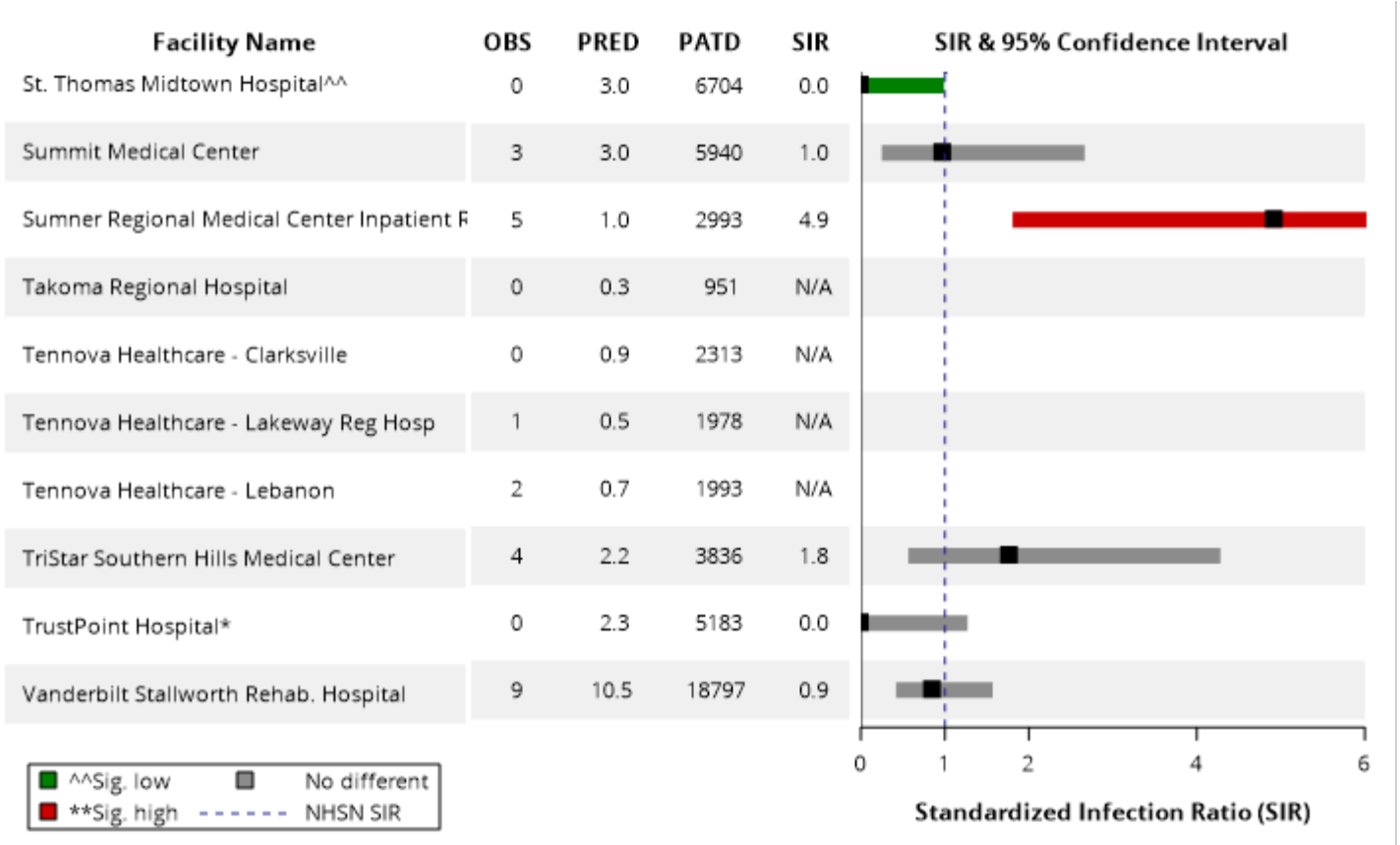
Green highlighting indicates SIR for reporting period is significantly lower than national 2015 SIR of 1.0

**Figure 95: Healthcare Facility-Onset C. difficile Infection (CDI) Laboratory-Identified (LabID) Event Standardized Infection Ratios (SIRs) in Inpatient Rehabilitation Facilities, Tennessee, 01/01/2017 – 12/31/2017**



Data Reported as of June 20, 2019  
 N = number of types of units reporting  
 OBS = observed number of Healthcare Facility-Onset CDI LabID Events  
 PRED = statistically 'predicted' number of events, based on NHSN baseline data  
 SIR = standardized infection ratio (observed/predicted number of events)  
 PATD = number of patient days  
 N/A = SIR not calculated for facilities with <1 predicted infection  
 \*\* Significantly higher than national baseline  
 ^^ Significantly lower than national baseline  
 \* Zero events, but not statistically significant

Figure 95 (cont'd)



Data Reported as of June 20, 2019

N = number of types of units reporting

OBS = observed number of Healthcare Facility-Onset CDI LabID Events

PRED = statistically 'predicted' number of events, based on NHSN baseline data

SIR = standardized infection ratio (observed/predicted number of events)

PATD = number of patient days

N/A = SIR not calculated for facilities with <1 predicted infection

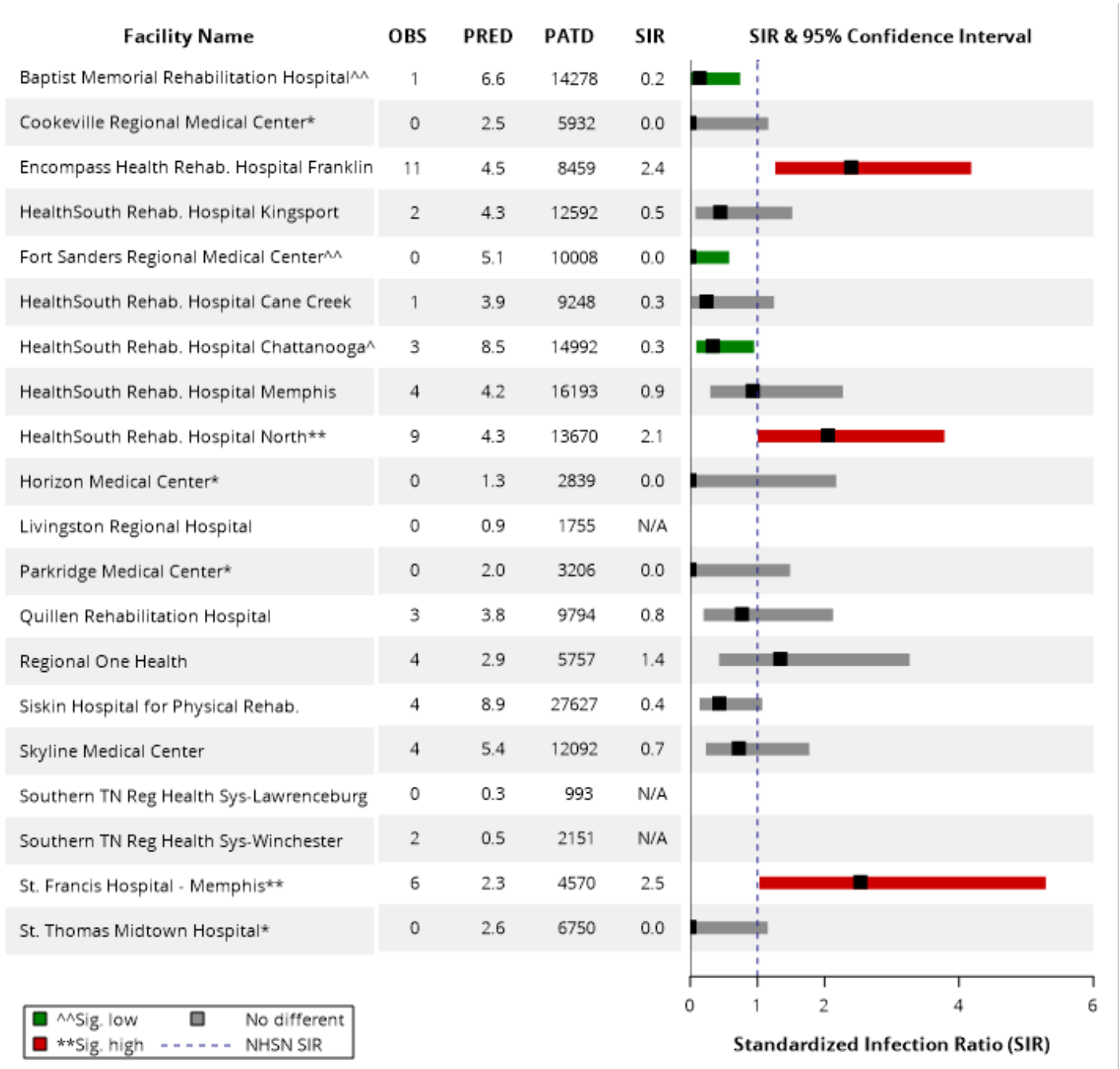
\*\* Significantly higher than national baseline

^^ Significantly lower than national baseline

\* Zero events, but not statistically significant



**Figure 96: Healthcare Facility-Onset C. difficile Infection (CDI) Laboratory-Identified (LabID) Event Standardized Infection Ratios (SIRs) in Inpatient Rehabilitation Facilities, Tennessee, 01/01/2018 – 12/31/2018**



Data Reported as of June 20, 2019

N = number of types of units reporting

OBS = observed number of Healthcare Facility-Onset CDI LabID Events

PRED = statistically 'predicted' number of events, based on NHSN baseline data

SIR = standardized infection ratio (observed/predicted number of events)

PATD = number of patient days

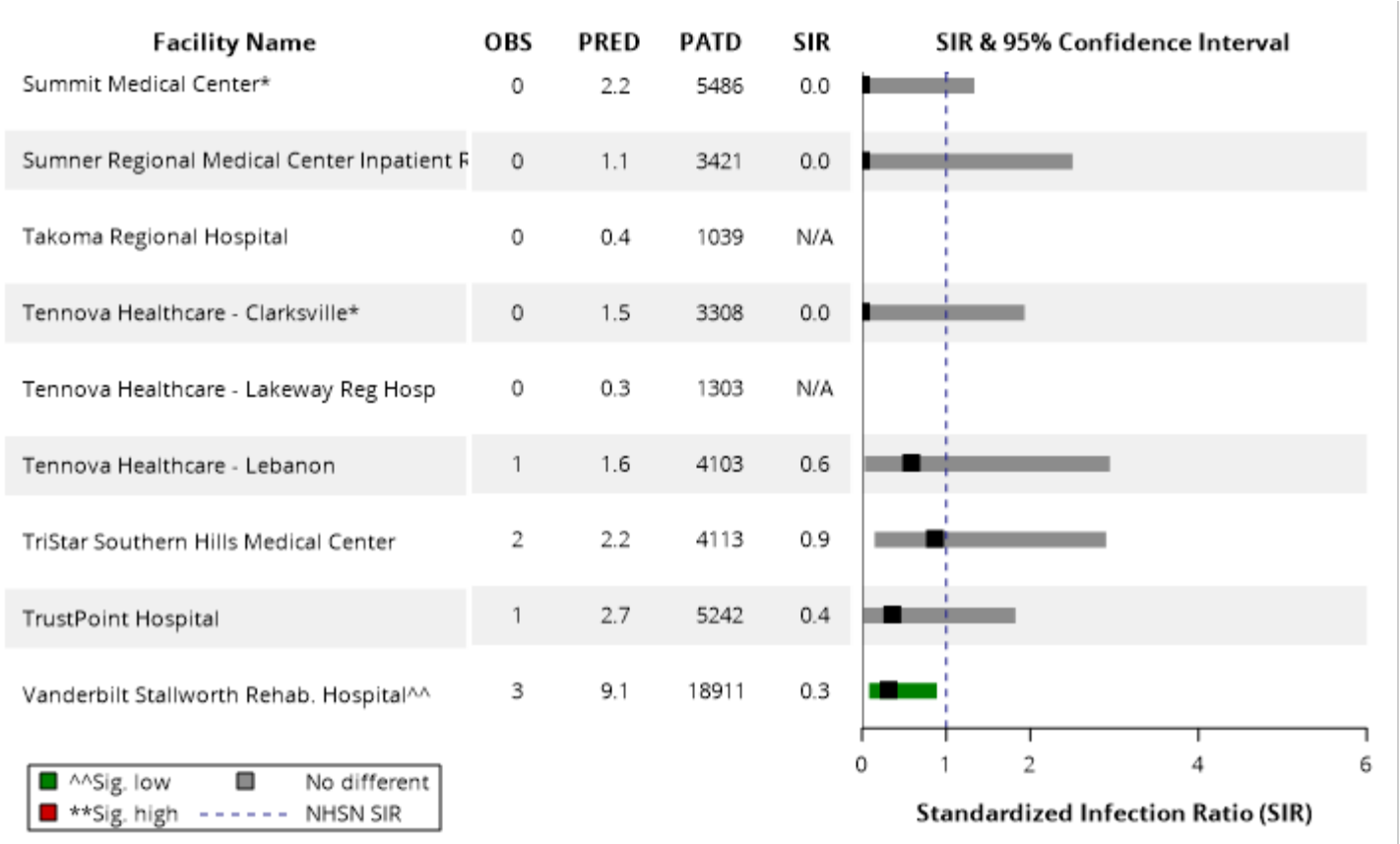
N/A = SIR not calculated for facilities with <1 predicted infection

\*\* Significantly higher than national baseline

^^ Significantly lower than national baseline

\* Zero events, but not statistically significant

Figure 96 (cont'd)



Data Reported as of June 20, 2019

N = number of types of units reporting

OBS = observed number of Healthcare Facility-Onset CDI LabID Events

PRED = statistically 'predicted' number of events, based on NHSN baseline data

SIR = standardized infection ratio (observed/predicted number of events)

PATD = number of patient days

N/A = SIR not calculated for facilities with <1 predicted infection

\*\* Significantly higher than national baseline

^^ Significantly lower than national baseline

\* Zero events, but not statistically significant

# Healthcare Personnel Influenza Vaccination

## ***Healthcare Personnel Influenza Vaccination***

Influenza can be a serious disease that can lead to hospitalization and sometimes even death. Older adults, pregnant women, and very young children, as well as people with certain long-term medical conditions, are at high risk of serious complications from the flu. The Centers for Disease Control and Prevention (CDC), the Advisory Committee on Immunization Practices (ACIP), and the Healthcare Infection Control Practices Advisory Committee (HICPAC) recommend that all U.S. healthcare workers, including those not directly involved in patient care, are vaccinated against influenza every year. By getting vaccinated, healthcare workers can help protect themselves, their families, and their patients, especially those who cannot receive influenza vaccination (see [Influenza Vaccination Information for Health Care Workers](#))<sup>39</sup>.

### **Reporting Requirements**

Healthcare personnel influenza summary data have been reportable to TDH from acute care hospitals beginning with the 2012-2013 influenza season.

To comply with these reporting requirements, facilities are required to follow the [NHSN Healthcare Personnel Vaccination Module: Influenza Vaccination Summary Protocol](#)<sup>40</sup>, which is updated each year with reporting instructions. Facilities must report the number of healthcare personnel who were physically present in their facility for one working day or more during the reporting period (October 1 through March 31), stratified by personnel category (Employees, Licensed Independent Practitioners (LIPs), Adult Students/Trainees and Volunteers, and Other Contract Personnel (optional)), in addition to the number of each who:

- Received an influenza vaccination administered at the healthcare facility
- Reported in writing (paper or electronic) or provided documentation that influenza vaccination was received elsewhere
- Were determined to have a medical contraindication/condition of severe allergic reaction to eggs or other component(s) of the vaccination, or history of Guillain-Barré Syndrome (GBS) within 6 weeks after a previous influenza vaccination
- Were offered but declined influenza vaccination
- Had an unknown vaccination status or did not otherwise meet any of the definitions of the above-mentioned numerator categories

<sup>39</sup> <http://www.cdc.gov/flu/healthcareworkers.htm>

<sup>40</sup> <http://www.cdc.gov/nhsn/PDFs/HPS-manual/vaccination/HPS-flu-vaccine-protocol.pdf>

## **Healthcare Personnel Influenza Vaccination Rates**

This report presents the percent of healthcare personnel in each personnel category (Employees, LIPs, and Adult Students/Trainees and Volunteers) and overall (personnel categories combined) who either received influenza vaccination at the healthcare facility or reported in writing (paper or electronic) or provided documentation that influenza vaccination was received elsewhere. The denominator for this measure includes all healthcare personnel who were physically present in the facility at least one working day during the influenza season (October 1 – March 31), including healthcare personnel whose influenza vaccination status was unknown.

# Healthcare Personnel Influenza Vaccination

## *Acute Care Hospitals*

## Healthcare Personnel Influenza Vaccination in Acute Care Facilities:

**Total number of facilities reporting from October 2017 – March 2018: 108**

**Total number of facilities reporting from October 2018– March 2019: 104**

### **Healthcare Personnel Influenza Vaccination Rates (Table 63)**

- The mean facility-specific overall healthcare personnel vaccination rate at Tennessee acute care hospitals was 89.4% for the 2017/2018 influenza season (October 2017-March 2018), below the [HHS Healthy People](http://www.healthypeople.gov/)<sup>41</sup> 2020 Goal of 90% vaccination. The mean facility-specific overall healthcare personnel vaccination rate at Tennessee acute care hospitals was 90.8% for the 2018/2019 influenza season (October 2018-March 2019), above the [HHS Healthy People](http://www.healthypeople.gov/)<sup>42</sup> 2020 Goal of 90% vaccination.
- The median facility-specific overall healthcare personnel vaccination rate was 93.3%, indicating that half of all Tennessee acute care hospitals documented at least 93.3% of their healthcare personnel received influenza vaccination for the 2017/2018 influenza season. The median facility-specific overall healthcare personnel vaccination rate was 92.8% for the 2018/2019 influenza season, indicating that half of all Tennessee acute care hospitals documented at least 92.8% of their healthcare personnel received influenza vaccination.
- The Tennessee 2017/2018 mean facility-specific influenza vaccination rates were the lowest for licensed independent practitioners (80.1%) and the highest for employees (90.4%) and students/trainees/volunteers (90.6%). The Tennessee 2018/2019 mean facility-specific influenza vaccination rates were the lowest for licensed independent practitioners (79.6%) and the highest for employees (92.0%) and students/trainees/volunteers (95.4%).

### **Facility-Specific Healthcare Personnel Influenza Vaccination Rates (Figure 97, Figure 98)**

- The overall percent of healthcare personnel with documented influenza vaccination for each facility for the 2017/2018 and 2018/2019 influenza seasons are displayed in [Figure 97](#), [Figure 98](#).

<sup>41</sup> <http://www.healthypeople.gov/>

<sup>42</sup> <http://www.healthypeople.gov/>

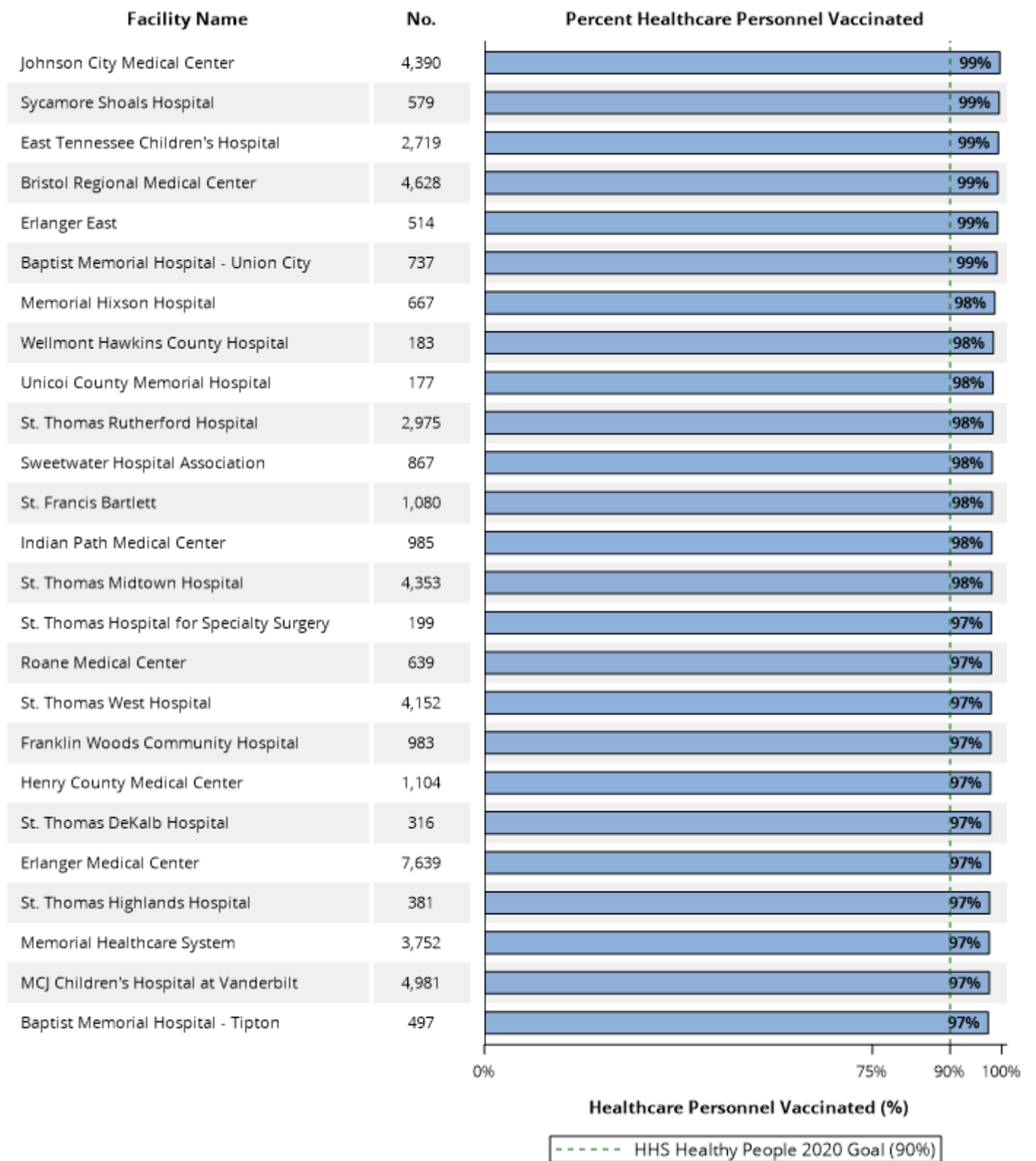
**Table 63: Healthcare Personnel Influenza Vaccination Rate and Key Percentiles by Healthcare Personnel Category by Influenza Season in Acute Care Facilities, Tennessee, 10/01/2017 - 03/31/2019**

STATE	FLU SEASON	HEALTHCARE PERSONNEL CATEGORY	No.	MEAN HCP VACCINATION RATE	DISTRIBUTION OF HCP VACCINATION RATE				
					10%	25%	50%	75%	90%
Tennessee	2018/2019	Employees	104	92.0%	82.4%	88.6%	95.3%	98.1%	99.2%
		Licensed Independent Practitioners	104	79.6%	41.6%	66.7%	87.9%	98.8%	100%
		Students/Trainees/Volunteers	104	95.4%	88.6%	96.5%	100%	100%	100%
		<b>Overall</b>	<b>104</b>	<b>90.8%</b>	<b>82.8%</b>	<b>86.6%</b>	<b>92.8%</b>	<b>97.1%</b>	<b>99.1%</b>
	2017/2018	Employees	108	90.4%	73.3%	85.1%	95.6%	97.4%	99.0%
		Licensed Independent Practitioners	108	80.1%	50.0%	68.4%	87.7%	98.8%	100%
		Students/Trainees/Volunteers	108	90.6%	69.2%	91.3%	99.2%	100%	100%
		<b>Overall</b>	<b>108</b>	<b>89.4%</b>	<b>73.6%</b>	<b>83.8%</b>	<b>93.3%</b>	<b>97.1%</b>	<b>98.2%</b>

Data reported as of July 26, 2019  
 No. = number of facilities reporting  
 HCP = Healthcare Personnel



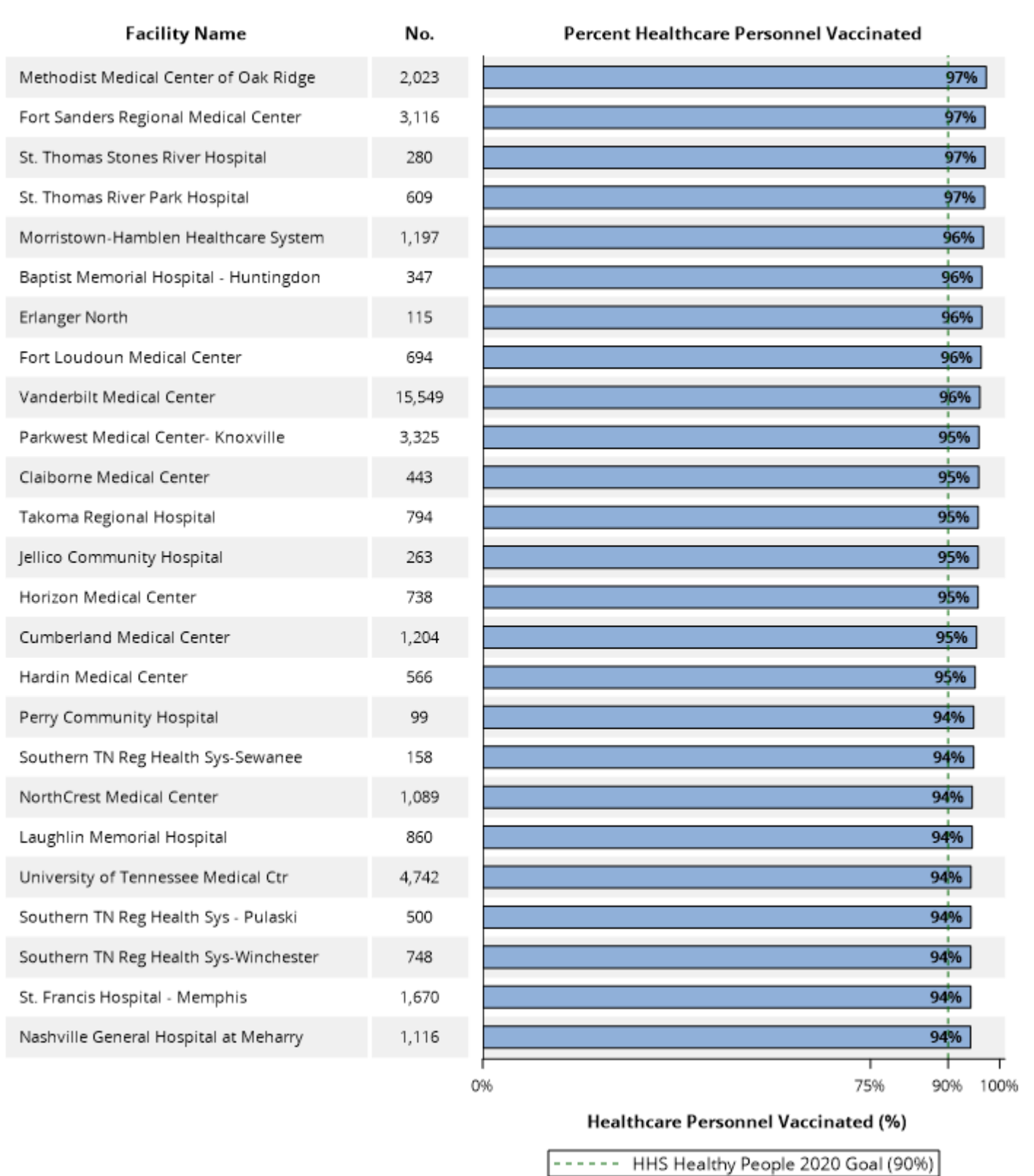
**Figure 97: Healthcare Personnel Influenza Vaccination in Acute Care Facilities, Tennessee, 2017/2018 Influenza Season (10/01/2017-03/31/2018)**



Data Reported as of July 26, 2019

No. = total number of healthcare personnel who worked at least one day between October 1, 2017 and March 31, 2018

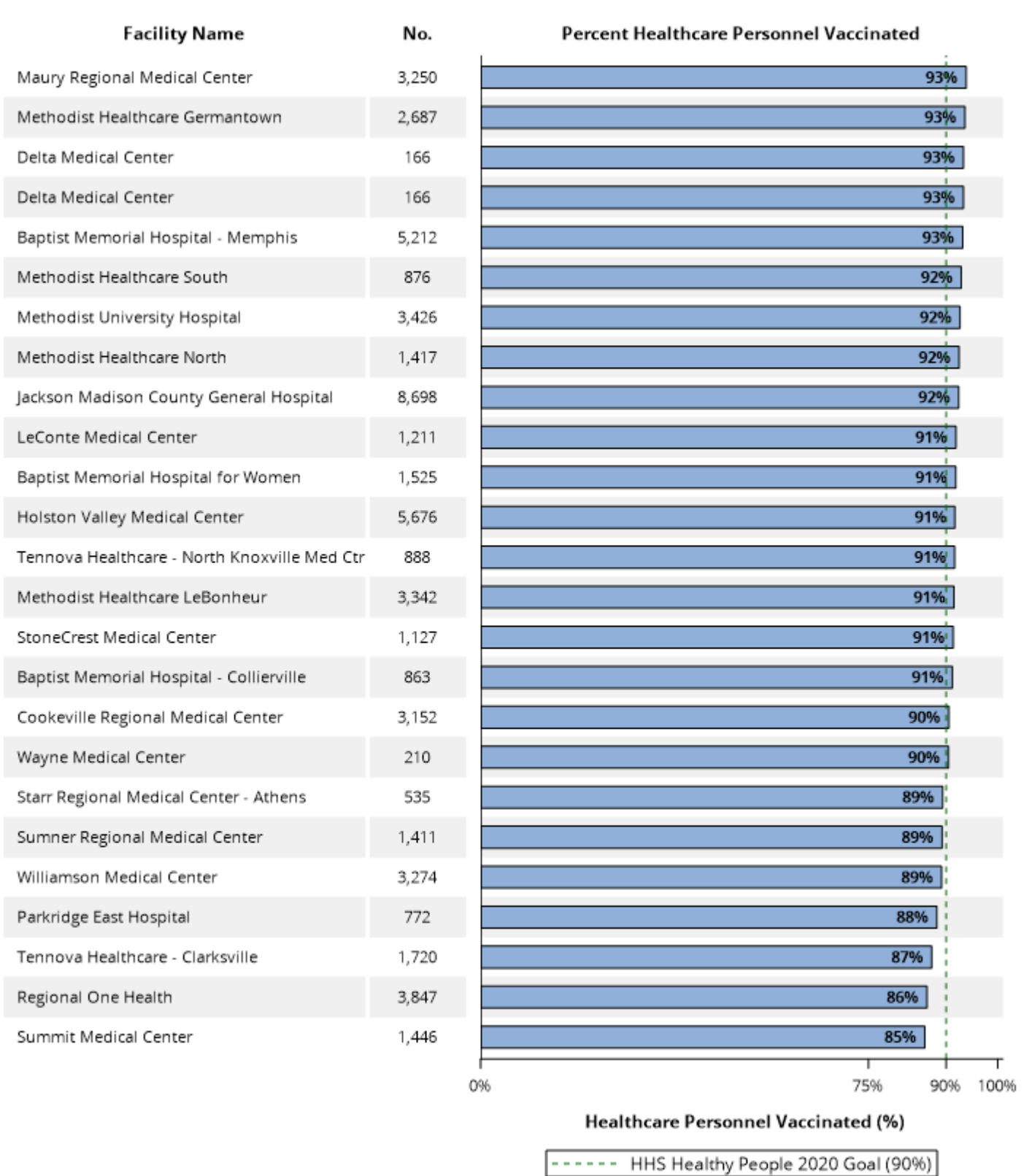
**Figure 97 (cont'd)**



Data Reported as of July 26, 2019

No. = total number of healthcare personnel who worked at least one day between October 1, 2017 and March 31, 2018

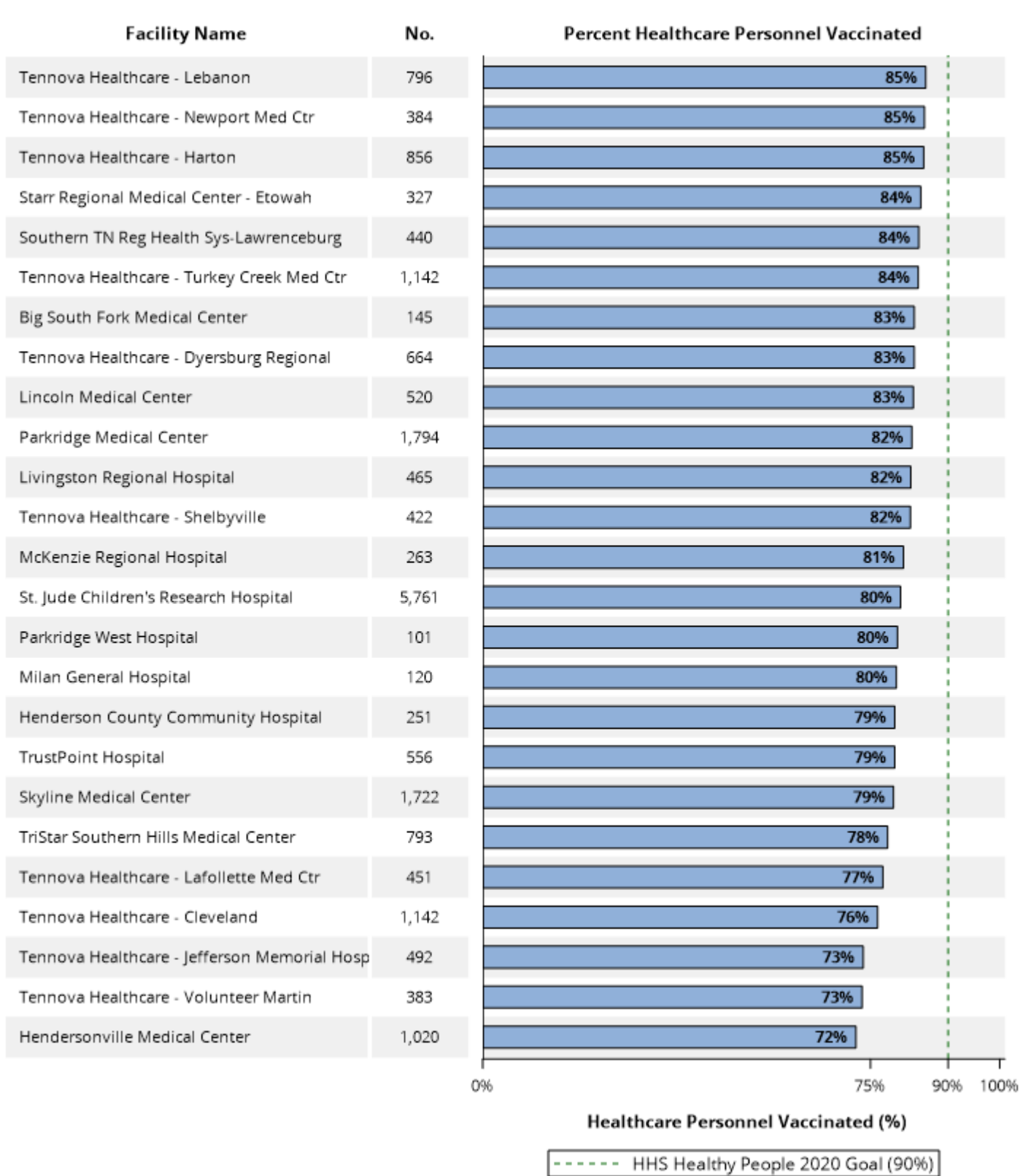
Figure 97 (cont'd)



Data Reported as of July 26, 2019

No. = total number of healthcare personnel who worked at least one day between October 1, 2017 and March 31, 2018

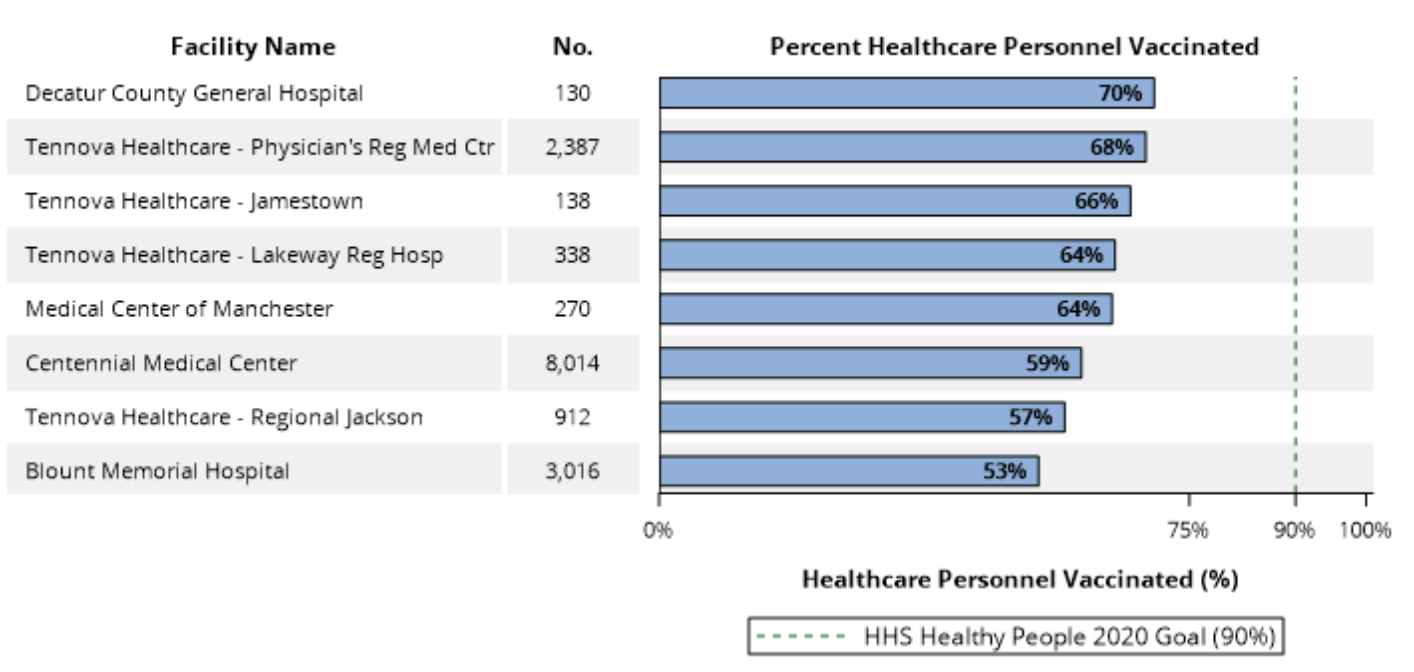
Figure 97 (cont'd)



Data Reported as of July 26, 2019

No. = total number of healthcare personnel who worked at least one day between October 1, 2017 and March 31, 2018

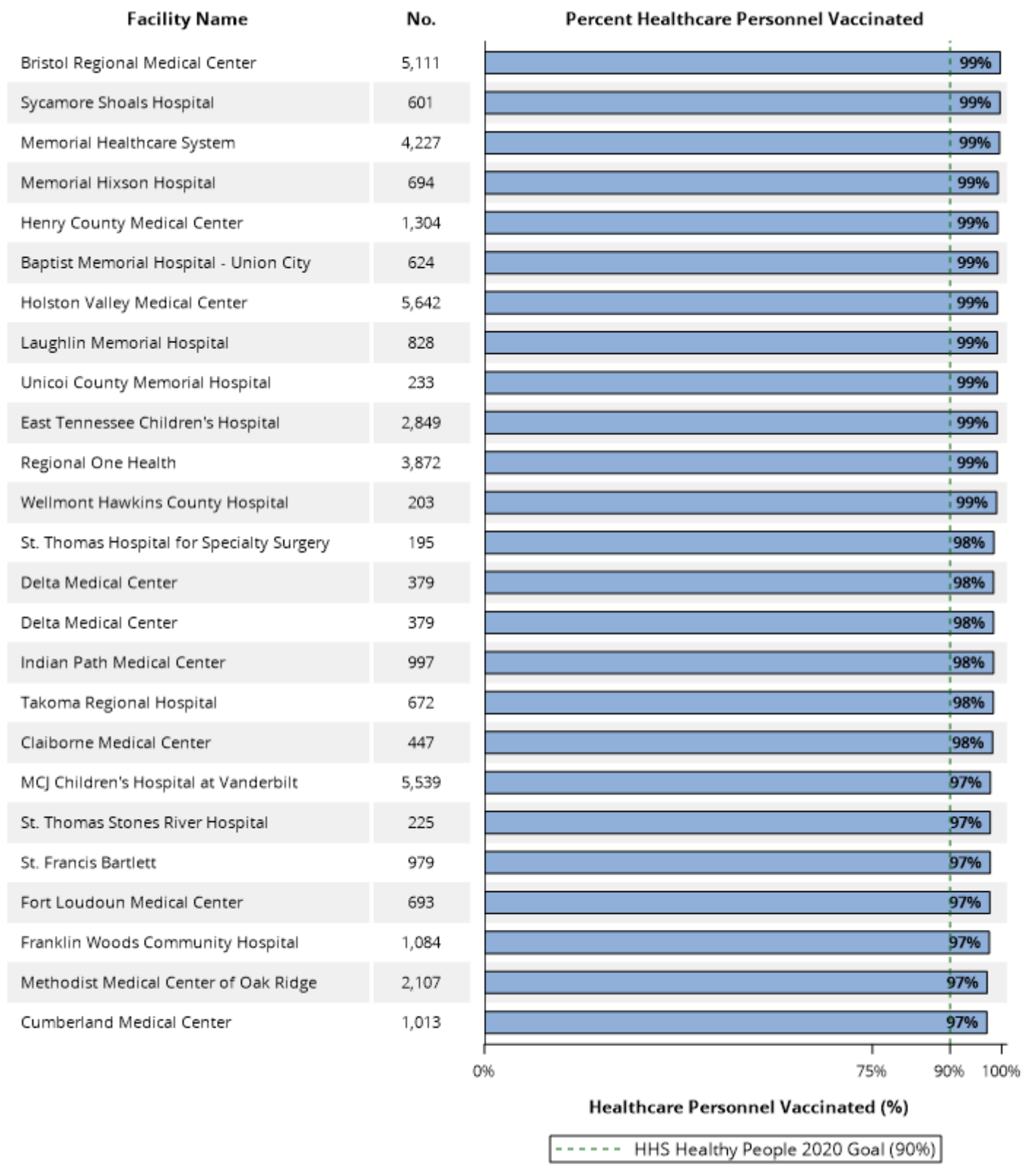
**Figure 97 (cont'd)**



Data Reported as of July 26, 2019

No. = total number of healthcare personnel who worked at least one day between October 1, 2017 and March 31, 2018

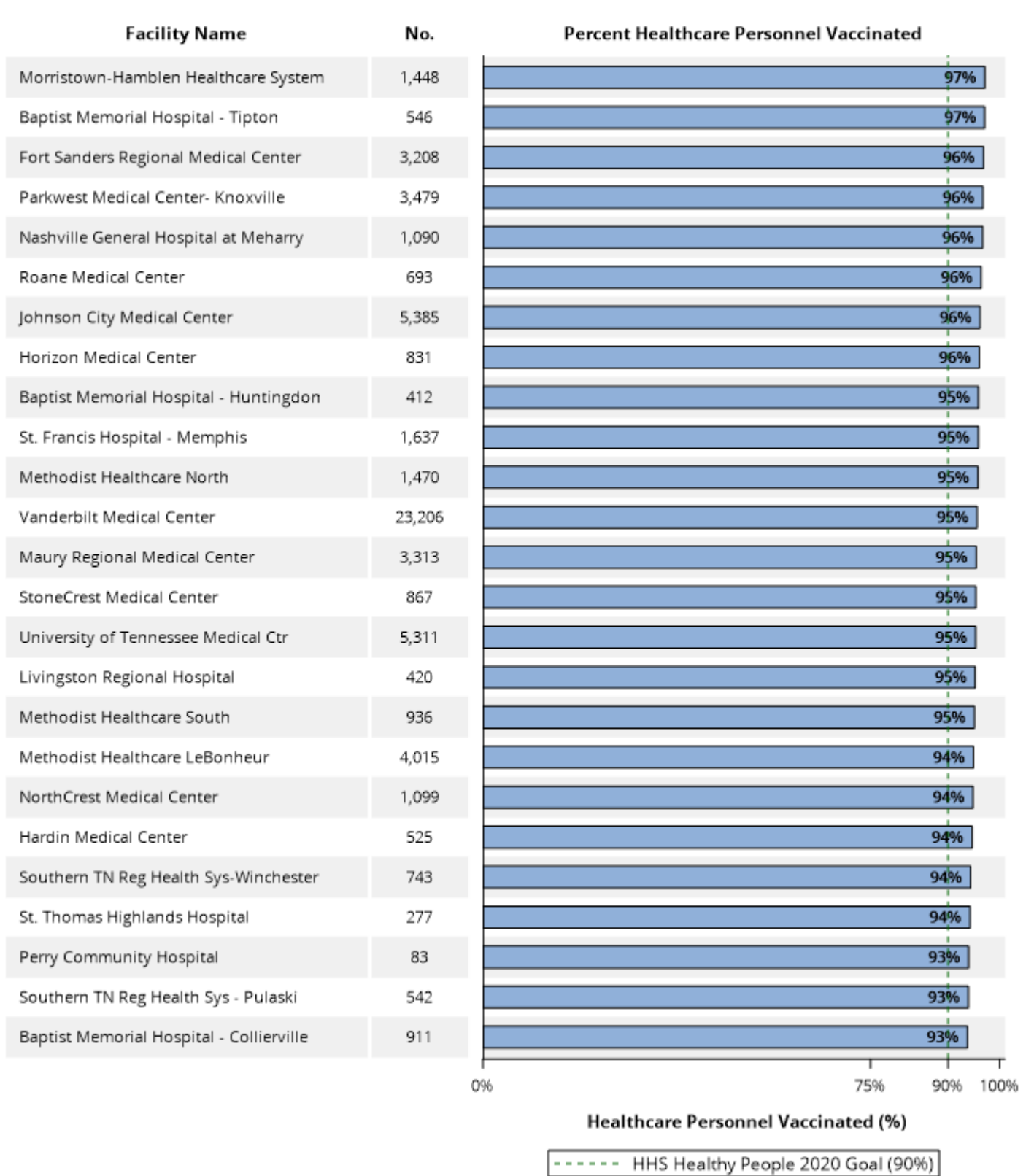
**Figure 98: Healthcare Personnel Influenza Vaccination in Acute Care Facilities, Tennessee, 2018/2019 Influenza Season (10/01/2018-03/31/2019)**



Data Reported as of July 26, 2019

No. = total number of healthcare personnel who worked at least one day between October 1, 2018 and March 31, 2019

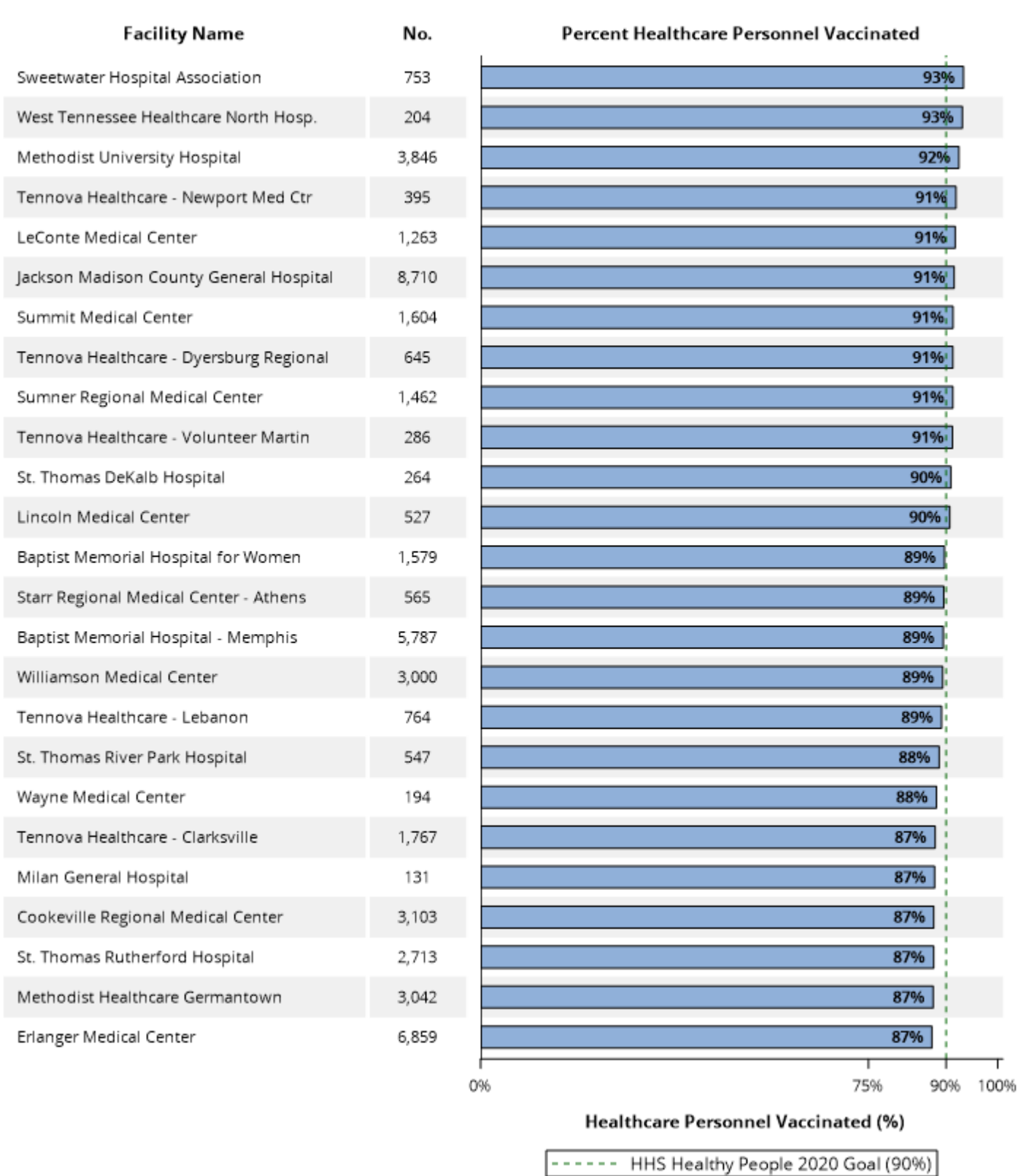
Figure 98 (cont'd)



Data Reported as of July 26, 2019

No. = total number of healthcare personnel who worked at least one day between October 1, 2018 and March 31, 2019

Figure 98 (cont'd)

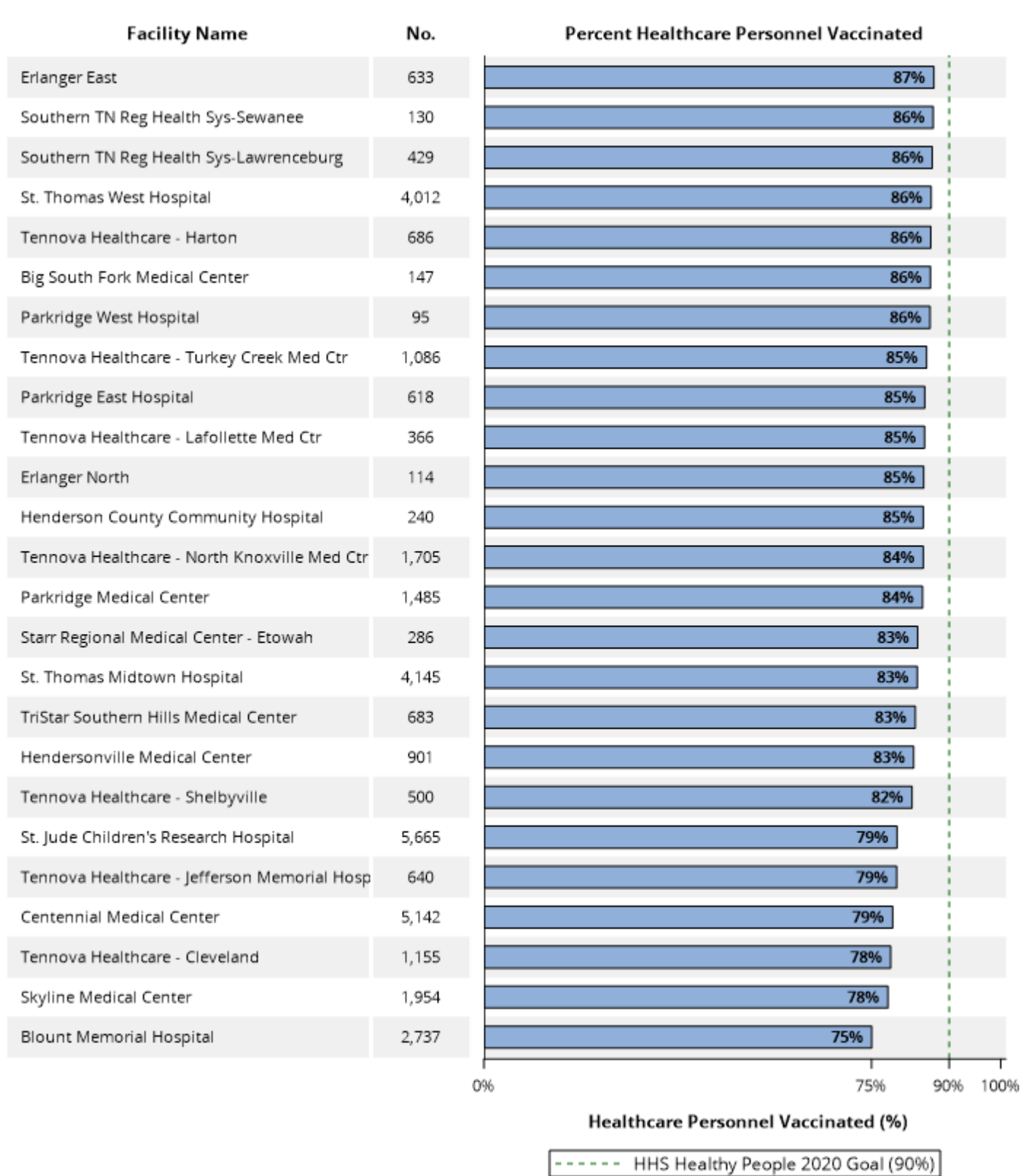


Data Reported as of July 26, 2019

No. = total number of healthcare personnel who worked at least one day between October 1, 2018 and March 31, 2019



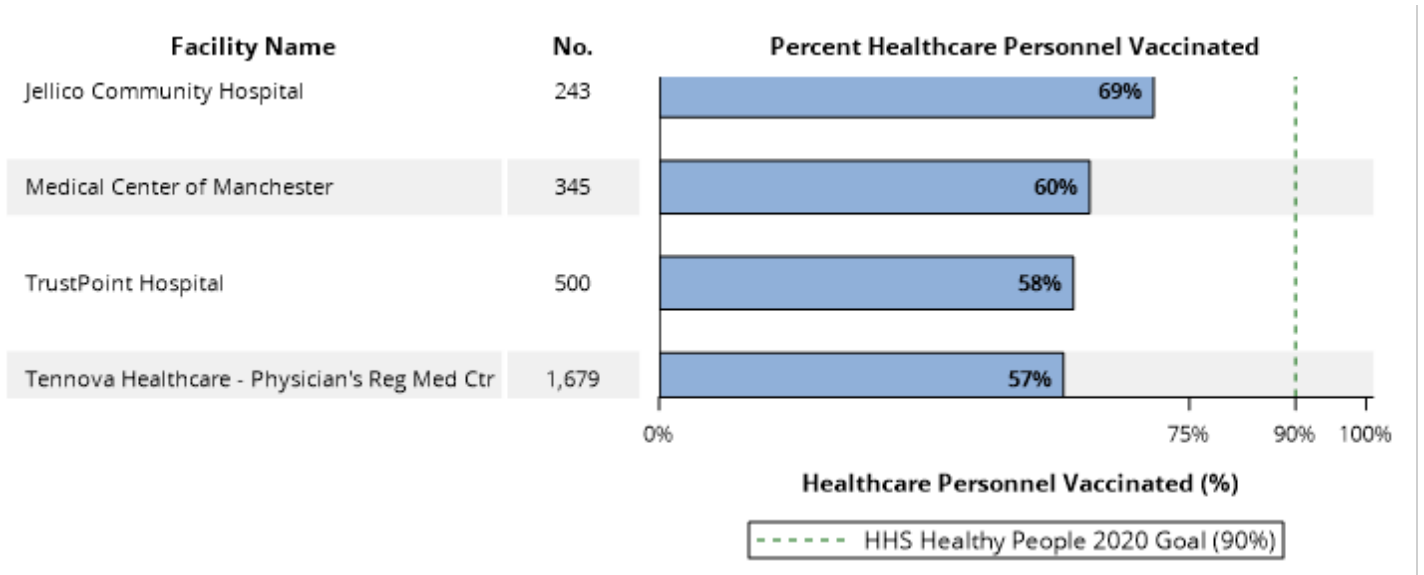
Figure 98 (cont'd)



Data Reported as of July 26, 2019

No. = total number of healthcare personnel who worked at least one day between October 1, 2018 and March 31, 2019

**Figure 98 (cont'd)**



Data Reported as of July 26, 2019

No. = total number of healthcare personnel who worked at least one day between October 1, 2018 and March 31, 2019

# Healthcare Personnel Influenza Vaccination

## *Long-term Acute Care (LTAC) Hospitals*

## Healthcare Personnel Influenza Vaccination in Long-term Acute Care (LTAC) Hospitals:

**Total number of facilities reporting from October 2017 – March 2018: 9**

**Total number of facilities reporting from October 2018 – March 2019: 9**

### **Healthcare Personnel Influenza Vaccination Rates (Table 64)**

- The mean facility-specific overall healthcare personnel vaccination rate in Tennessee long-term acute care hospitals was 92.7% for the 2017/2018 influenza season (October 2017-March 2018), above the [HHS Healthy People](#)<sup>43</sup> 2020 Goal of 90%. The mean facility-specific overall healthcare personnel vaccination rate in Tennessee long-term acute care hospitals was 87.7% for the 2018/2019 influenza season (October 2018-March 2019), below the [HHS Healthy People](#)<sup>44</sup> 2020 Goal of 90%.
- The median facility-specific overall healthcare personnel vaccination rate was 91.6%, indicating that half of all Tennessee long-term acute care hospitals documented at least 91.6% of their healthcare personnel received influenza vaccination for the 2017/2018 influenza season. The median facility-specific overall healthcare personnel vaccination rate was 90.8%, indicating that half of all Tennessee long-term acute care hospitals documented at least 90.8% of their healthcare personnel received influenza vaccination for the 2018/2019 influenza season.
- The Tennessee 2017/2018 mean facility-specific influenza vaccination rates were the lowest for employees (91.4%) and the highest for licensed independent practitioners (91.5%) and adult students/trainees/volunteers (99.6%). The Tennessee 2018/2019 mean facility-specific influenza vaccination rates were the lowest for licensed independent practitioners (88.1%) and the highest for employees (88.8%) and adult students/trainees/volunteers (97.3%).

### **Facility-Specific Healthcare Personnel Influenza Vaccination Rates (Figure 99, Figure 100)**

- The overall percent of healthcare personnel with documented influenza vaccination for each facility for the 2017/2018 and 2018/2019 influenza seasons are displayed in [Figure 99, Figure 100](#).

<sup>43</sup> <http://www.healthypeople.gov/>

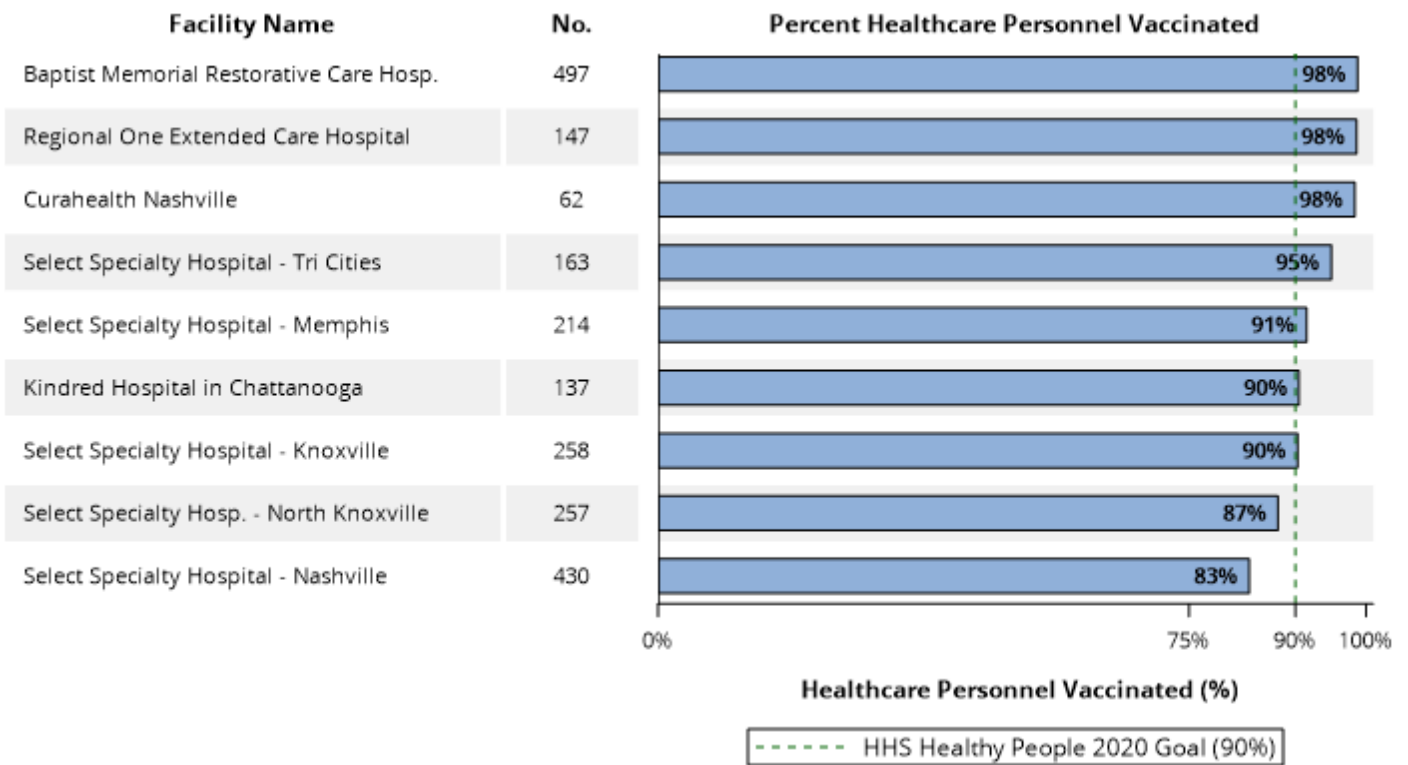
<sup>44</sup> <http://www.healthypeople.gov/>

**Table 64: Healthcare Personnel Influenza Vaccination Rate and Key Percentiles by Healthcare Personnel Category by Influenza Season in Long-Term Acute Care (LTAC) Facilities, Tennessee, 10/01/2017 - 03/31/2019**

STATE	FLU SEASON	HEALTHCARE PERSONNEL CATEGORY	No.	MEAN HCP VACCINATION RATE	DISTRIBUTION OF HCP VACCINATION RATE				
					10%	25%	50%	75%	90%
Tennessee	2018/2019	Employees	9	88.8%	52.4%	89.3%	90.6%	98.8%	100%
		Licensed Independent Practitioners	9	88.1%	57.1%	82.6%	92.1%	99.3%	100%
		Students/Trainees/Volunteers	9	97.3%	88.5%	97.8%	100%	100%	100%
		<b>Overall</b>	<b>9</b>	<b>87.7%</b>	<b>60.0%</b>	<b>84.3%</b>	<b>90.8%</b>	<b>95.5%</b>	<b>99.5%</b>
	2017/2018	Employees	9	91.4%	82.3%	85.2%	89.9%	97.9%	98.6%
		Licensed Independent Practitioners	9	91.5%	78.2%	81.7%	95.7%	99.6%	100%
		Students/Trainees/Volunteers	9	99.6%	97.9%	100%	100%	100%	100%
		<b>Overall</b>	<b>9</b>	<b>92.7%</b>	<b>83.5%</b>	<b>90.3%</b>	<b>91.6%</b>	<b>98.4%</b>	<b>98.8%</b>

Data reported as of July 26, 2019  
 No. = number of facilities reporting  
 HCP = Healthcare Personnel

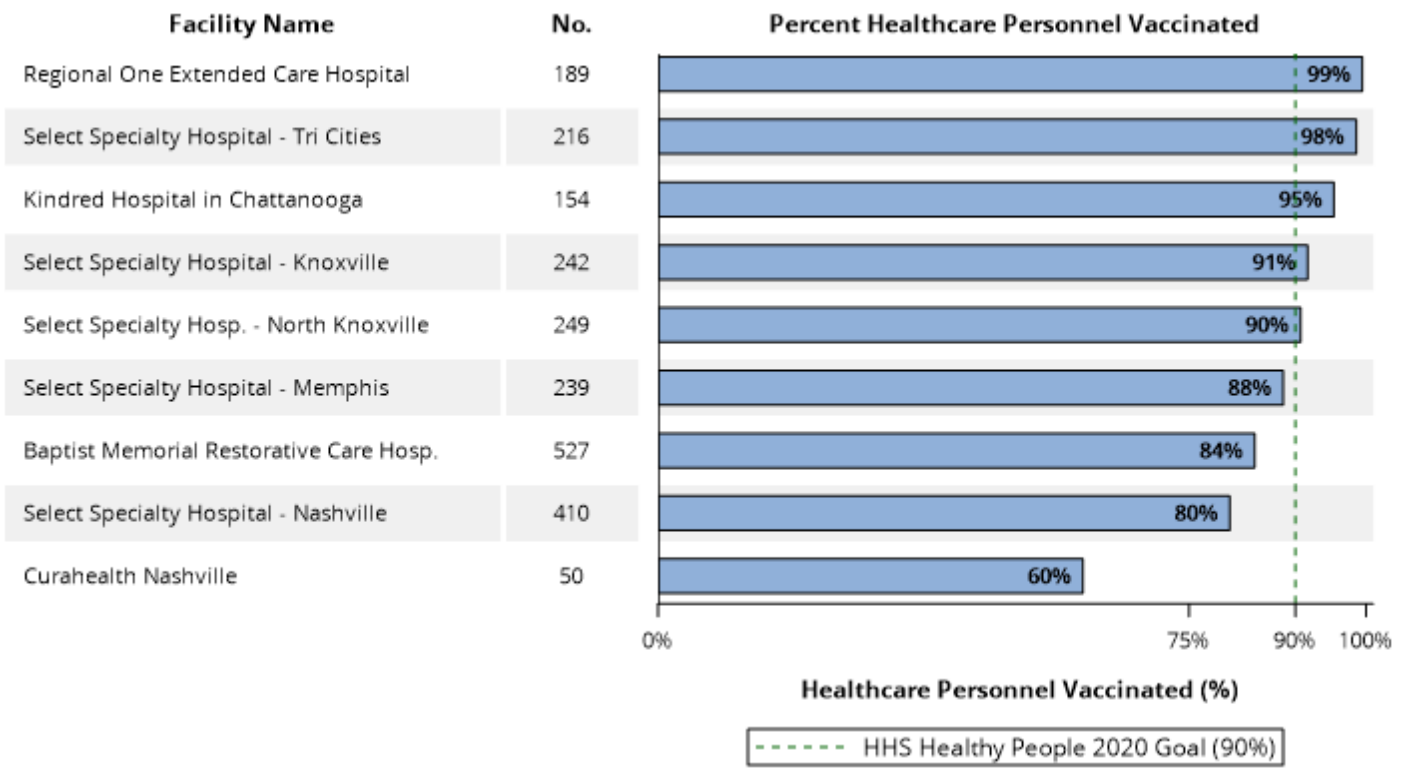
**Figure 99: Healthcare Personnel Influenza Vaccination in Long-Term Acute Care (LTAC) Facilities, Tennessee, 2017/2018 Influenza Season (10/01/2017-03/31/2018)**



Data Reported as of July 26, 2019

No. = total number of healthcare personnel who worked at least one day between October 1, 2017 and March 31, 2018

**Figure 100: Healthcare Personnel Influenza Vaccination in Long-Term Acute Care (LTAC) Facilities, Tennessee, 2018/2019 Influenza Season (10/01/2018-03/31/2019)**



Data Reported as of July 26, 2019

No. = total number of healthcare personnel who worked at least one day between October 1, 2018 and March 31, 2019

# Healthcare Personnel Influenza Vaccination

## *Inpatient Rehabilitation Facilities*



## Healthcare Personnel Influenza Vaccination in Inpatient Rehabilitation Facilities (IRF):

**Total number of facilities reporting from October 2017 – March 2018: 29**

**Total number of facilities reporting from October 2018 – March 2019: 26**

### **Healthcare Personnel Influenza Vaccination Rates (Table 65)**

- The mean facility-specific overall healthcare personnel vaccination rate in Tennessee inpatient rehabilitation facilities was 91.1% for the 2017/2018 influenza season (October 2017-March 2018), above the [HHS Healthy People](http://www.healthypeople.gov/)<sup>45</sup> 2020 Goal of 90%. The mean facility-specific overall healthcare personnel vaccination rate in Tennessee inpatient rehabilitation facilities was 91.4% for the 2018/2019 influenza season (October 2018-March 2019), above the [HHS Healthy People](http://www.healthypeople.gov/)<sup>46</sup> 2020 Goal of 90%.
- The median facility-specific overall healthcare personnel vaccination rate was 95.3%, indicating that half of all Tennessee inpatient rehabilitation facilities documented at least 95.3% of their healthcare personnel received influenza vaccination for the 2017/2018 influenza season. The median facility-specific overall healthcare personnel vaccination rate was 91.6%, indicating that half of all Tennessee inpatient rehabilitation facilities documented at least 91.6% of their healthcare personnel received influenza vaccination for the 2018/2019 influenza season.
- Tennessee 2017/2018 mean facility-specific influenza vaccination rates were the lowest for licensed independent practitioners (85.5%) and the highest for employees (90.1%) and adult students/trainees/volunteers (98.6%). Tennessee 2018/2019 mean facility-specific influenza vaccination rates were the lowest for licensed independent practitioners (90.1%) and the highest for employees (91.3%) and adult students/trainees/volunteers (96.4%).

### **Facility-Specific Healthcare Personnel Influenza Vaccination Rates (Figure 101, Figure 102)**

- The overall percent of healthcare personnel with documented influenza vaccination for each facility for the 2017/2018 and 2018/2019 influenza seasons are displayed in [Figure 101](#), [Figure 102](#).

<sup>45</sup> <http://www.healthypeople.gov/>

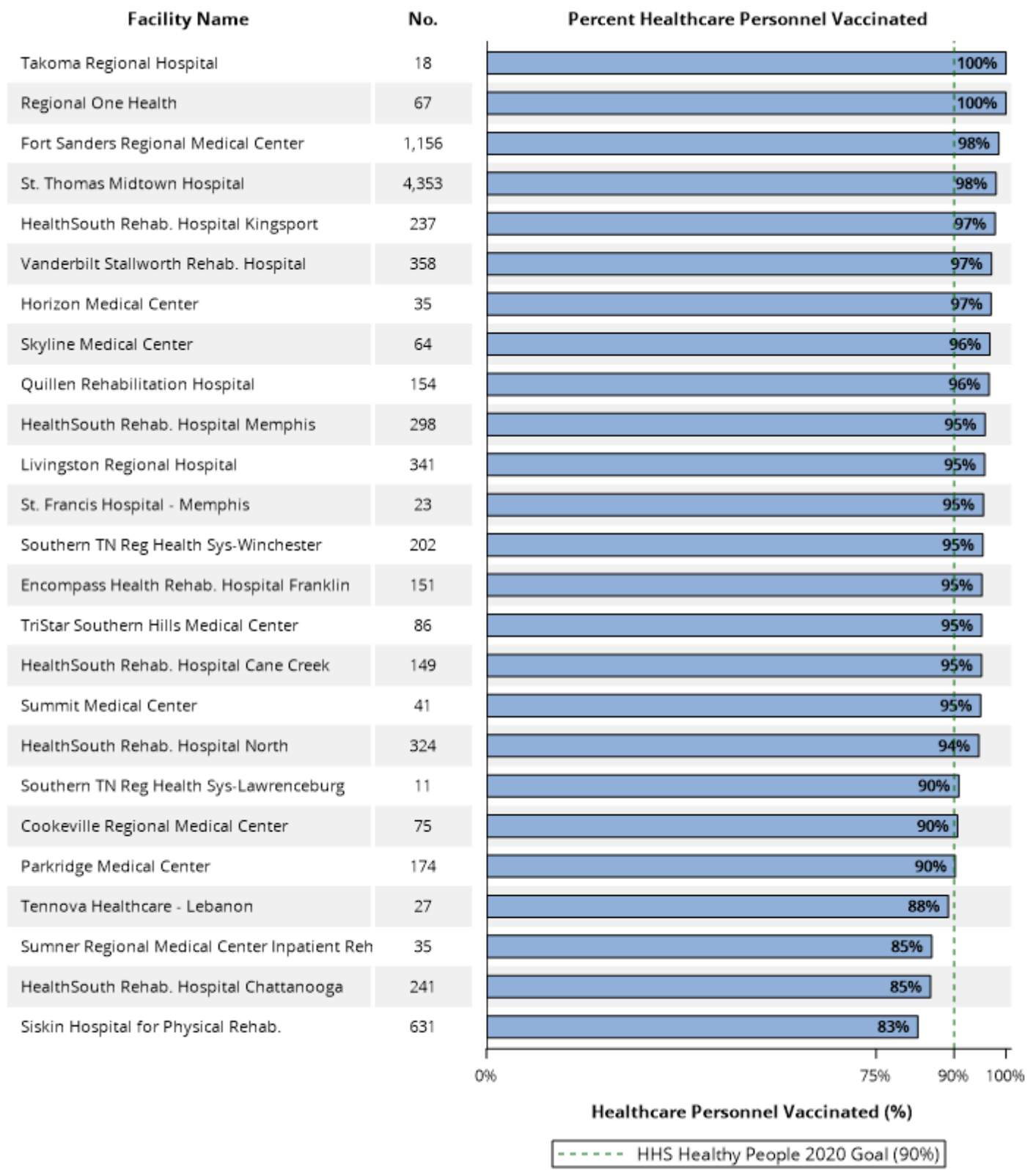
<sup>46</sup> <http://www.healthypeople.gov/>

**Table 65: Healthcare Personnel Influenza Vaccination Rate and Key Percentiles by Healthcare Personnel Category by Influenza Season in Inpatient Rehabilitation Facilities, Tennessee, 10/01/2017 - 03/31/2019**

STATE	FLU SEASON	HEALTHCARE PERSONNEL CATEGORY	No.	MEAN HCP VACCINATION RATE	DISTRIBUTION OF HCP VACCINATION RATE				
					10%	25%	50%	75%	90%
Tennessee	2018/2019	Employees	26	91.3%	83.3%	87.7%	92.6%	96.3%	98.4%
		Licensed Independent Practitioners	26	90.1%	66.7%	83.3%	100%	100%	100%
		Students/Trainees/Volunteers	26	96.4%	84.2%	99.9%	100%	100%	100%
		<b>Overall</b>	<b>26</b>	<b>91.4%</b>	<b>84.2%</b>	<b>86.3%</b>	<b>91.6%</b>	<b>95.0%</b>	<b>98.3%</b>
	2017/2018	Employees	29	90.1%	64.7%	88.0%	94.9%	96.6%	97.5%
		Licensed Independent Practitioners	29	85.5%	28.8%	89.5%	100%	100%	100%
		Students/Trainees/Volunteers	29	98.6%	92.9%	100%	100%	100%	100%
		<b>Overall</b>	<b>29</b>	<b>91.1%</b>	<b>69.2%</b>	<b>88.9%</b>	<b>95.3%</b>	<b>96.9%</b>	<b>98.6%</b>

Data reported as of July 26, 2019  
 No. = number of facilities reporting  
 HCP = Healthcare Personnel

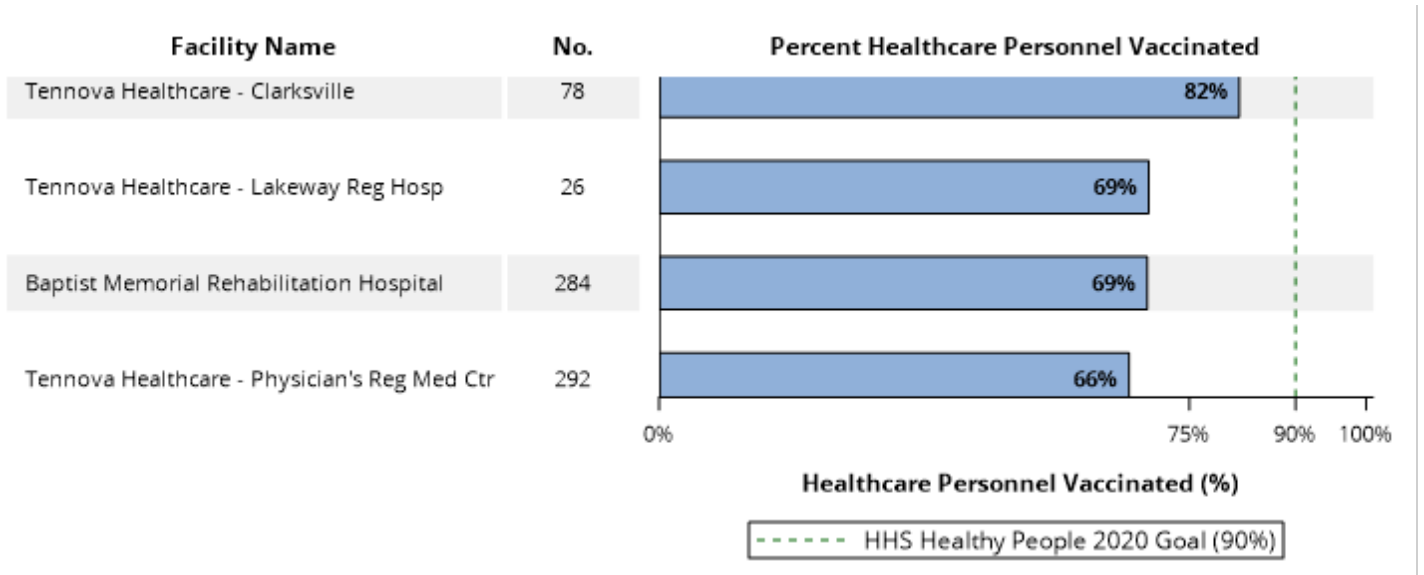
**Figure 101: Healthcare Personnel Influenza Vaccination in Inpatient Rehabilitation Facilities (IRF), Tennessee, 2017/2018 Influenza Season (10/01/2017-03/31/2018)**



Data Reported as of July 26, 2019

No. = total number of healthcare personnel who worked at least one day between October 1,2017 and March 31,2018

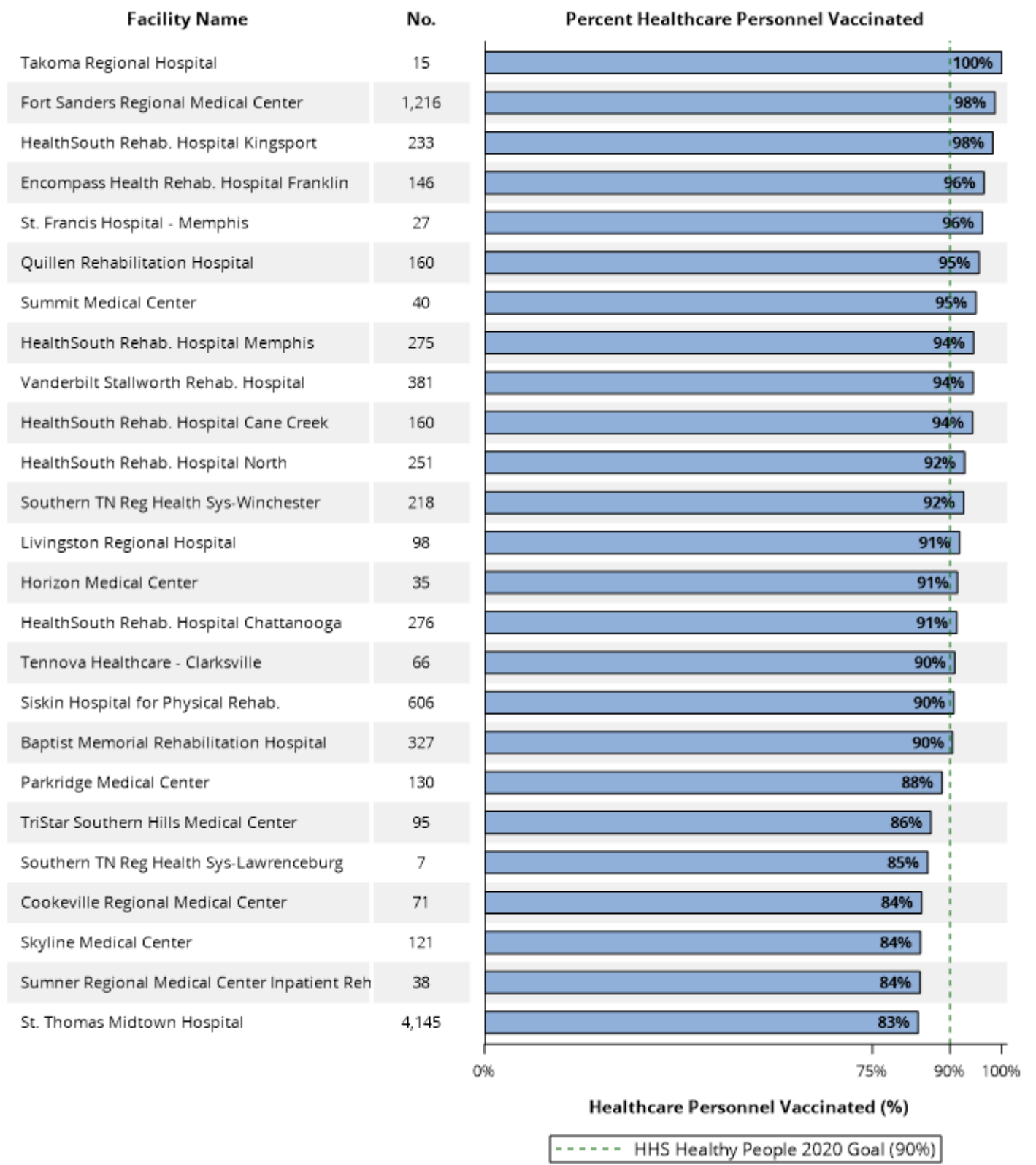
**Figure 101 (cont'd)**



Data Reported as of July 26, 2019

No. = total number of healthcare personnel who worked at least one day between October 1, 2017 and March 31, 2018

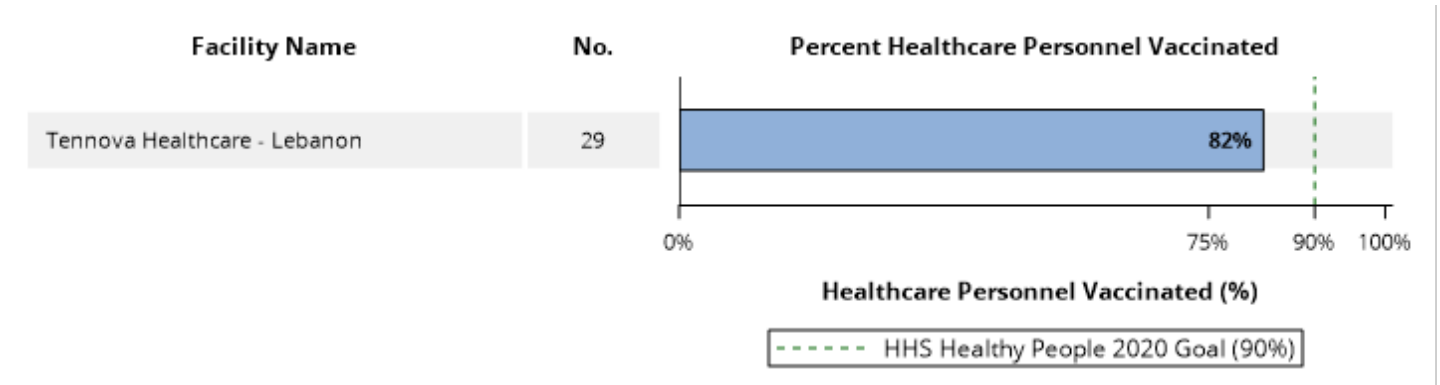
**Figure 102: Healthcare Personnel Influenza Vaccination in Inpatient Rehabilitation Facilities (IRF), Tennessee, 2018/2019 Influenza Season (10/01/2018-03/31/2019)**



Data Reported as of July 26, 2019

No. = total number of healthcare personnel who worked at least one day between October 1, 2018 and March 31, 2019

Figure 102 (cont'd)



Data Reported as of July 26, 2019

No. = total number of healthcare personnel who worked at least one day between October 1,2018 and March 31,2019

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Baptist Memorial Hospital for Women	<a href="#">336</a>
Baptist Memorial Hospital – Tipton	<a href="#">339</a>
Baptist Memorial Hospital – Collierville	<a href="#">342</a>
Baptist Memorial Hospital – Huntingdon	<a href="#">345</a>
Big South Fork Medical Center	<a href="#">348</a>
Blount Memorial Hospital	<a href="#">351</a>
Bristol Regional Medical Center	<a href="#">354</a>
Centennial Medical Center	<a href="#">357</a>
Claiborne County Hospital	<a href="#">360</a>
Cookeville Regional Medical Center	<a href="#">363</a>
Cumberland Medical Center	<a href="#">366</a>
Decatur County General Hospital	<a href="#">369</a>
Delta Medical Center	<a href="#">372</a>
East Tennessee Children's Hospital	<a href="#">375</a>
Erlanger East	<a href="#">378</a>
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Erlanger North	<a href="#">384</a>
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Franklin Woods Community Hospital	<a href="#">393</a>
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Hendersonville Medical Center	<a href="#">402</a>
Henry County Medical Center	<a href="#">405</a>
Holston Valley Medical Center	<a href="#">408</a>
Horizon Medical Center	<a href="#">411</a>
Indian Path Medical Center	<a href="#">414</a>
Jackson Madison County General Hospital	<a href="#">417</a>
Jellico Community Hospital	<a href="#">420</a>
Johnson City Medical Center	<a href="#">423</a>
Laughlin Memorial Hospital	<a href="#">426</a>
LeConte Medical Center	<a href="#">429</a>
Lincoln Medical Center	<a href="#">432</a>
Livingston Regional Hospital	<a href="#">435</a>
Maury Regional Medical Center	<a href="#">438</a>
MCJ Children's Hospital at Vanderbilt	<a href="#">441</a>

Facility Name	Page
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Memorial Healthcare System	<a href="#">447</a>
Memorial Hixson Hospital	<a href="#">450</a>
Methodist Healthcare Germantown	<a href="#">453</a>
Methodist Healthcare LeBonheur	<a href="#">456</a>
Methodist Healthcare North	<a href="#">459</a>
Methodist Healthcare South	<a href="#">462</a>
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Methodist University Hospital	<a href="#">468</a>
Milan General Hospital	<a href="#">471</a>
Morristown-Hamblen Healthcare System	<a href="#">474</a>
Nashville General Hospital at Meharry	<a href="#">477</a>
NorthCrest Medical Center	<a href="#">480</a>
Parkridge East Hospital	<a href="#">483</a>
Parkridge Medical Center	<a href="#">486</a>
Parkwest Medical Center- Knoxville	<a href="#">489</a>
Perry Community Hospital	<a href="#">492</a>
Regional One Health	<a href="#">495</a>
Roane Medical Center	<a href="#">498</a>
Skyline Medical Center	<a href="#">501</a>
Southern TN Reg Health Sys – Lawrenceburg	<a href="#">504</a>
Southern TN Reg Health Sys – Winchester	<a href="#">507</a>
Southern TN Reg Health Sys – Sewanee	<a href="#">510</a>
Southern TN Reg Health Sys – Pulaski	<a href="#">513</a>
Starr Regional Medical Center – Athens	<a href="#">516</a>
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St. Francis Bartlett	<a href="#">522</a>
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StoneCrest Medical Center	<a href="#">531</a>
St. Thomas DeKalb Hospital	<a href="#">534</a>
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St. Thomas Hospital for Specialty Surgery	<a href="#">540</a>
St. Thomas Midtown Hospital	<a href="#">543</a>
St. Thomas River Park Hospital	<a href="#">546</a>
St. Thomas Rutherford Hospital	<a href="#">549</a>
St. Thomas Stones River Hospital	<a href="#">552</a>
St. Thomas West Hospital	<a href="#">555</a>

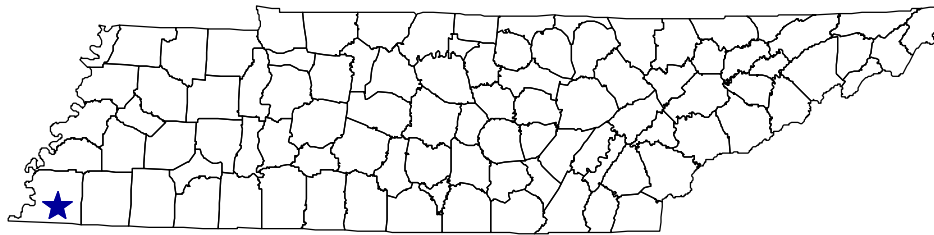


Facility Name	Page
Summit Medical Center	<a href="#">558</a>
Sumner Regional Medical Center	<a href="#">561</a>
Sweetwater Hospital Association	<a href="#">564</a>
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Tennova Healthcare – Dyersburg Regional	<a href="#">579</a>
Tennova Healthcare – Harton	<a href="#">582</a>
Tennova Healthcare – Jefferson Mem Hosp	<a href="#">585</a>
Tennova Healthcare – Jamestown	<a href="#">588</a>
Tennova Healthcare – Lebanon	<a href="#">591</a>
Tennova Healthcare – Lakeway Reg Hosp	<a href="#">594</a>
Tennova Healthcare – Lafollette Med Ctr	<a href="#">597</a>
Tennova Healthcare – N. Knoxville Med Ctr	<a href="#">600</a>
Tennova Healthcare – Newport Med Ctr	<a href="#">603</a>
Tennova Healthcare – Phys Reg Med Ctr	<a href="#">606</a>
Tennova Healthcare – Regional Jackson	<a href="#">609</a>
Tennova Healthcare – Shelbyville	<a href="#">612</a>
Tennova Healthcare – Turkey Creek Med Ctr	<a href="#">615</a>
Tennova Healthcare – Volunteer Martin	<a href="#">618</a>
TriStar Southern Hills Medical Center	<a href="#">621</a>
TrustPoint Hospital	<a href="#">624</a>
Unicoi County Memorial Hospital	<a href="#">627</a>
Unite Regional Medical Center	<a href="#">630</a>
University of Tennessee Medical Ctr	<a href="#">633</a>
Vanderbilt Medical Center	<a href="#">636</a>
Wayne Medical Center	<a href="#">639</a>
Wellmont Hawkins County Hospital	<a href="#">642</a>
West Tennessee Healthcare North Hospital	<a href="#">645</a>
Williamson Medical Center	<a href="#">647</a>

## Baptist Memorial Hospital - Memphis, Memphis, Shelby County

Medical School Affiliation: Major teaching

Bed Size Category: 400+ beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2017-12/31/2017

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		TN SIR
		Observed	Predicted		SIR*	95% CI	
CLABSI	Adult/Pediatric ICU	4	11.6	10347	<b>0.34</b>	<b>(0.11, 0.83)</b>	0.85
	Adult/Pediatric Ward	4	11.2	11520	<b>0.36</b>	<b>(0.11, 0.86)</b>	0.68
CAUTI	Adult/Pediatric ICU	8	12.4	7242	0.64	(0.30, 1.22)	0.71
	Adult/Pediatric Ward	1	6.5	5565	<b>0.15</b>	<b>(0.01, 0.75)</b>	0.72
SSI	Colon surgery	12	9.9	368	1.20	(0.65, 2.05)	0.83
	Abdominal hysterectomy	1	1.4	173	0.71	(0.04, 3.50)	1.08
LabID	MRSA bacteremia	9	15.7	170305	0.57	(0.28, 1.05)	1.09
	C. difficile infection	173	140.4	170305	<b>1.23</b>	<b>(1.06, 1.43)</b>	0.83

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

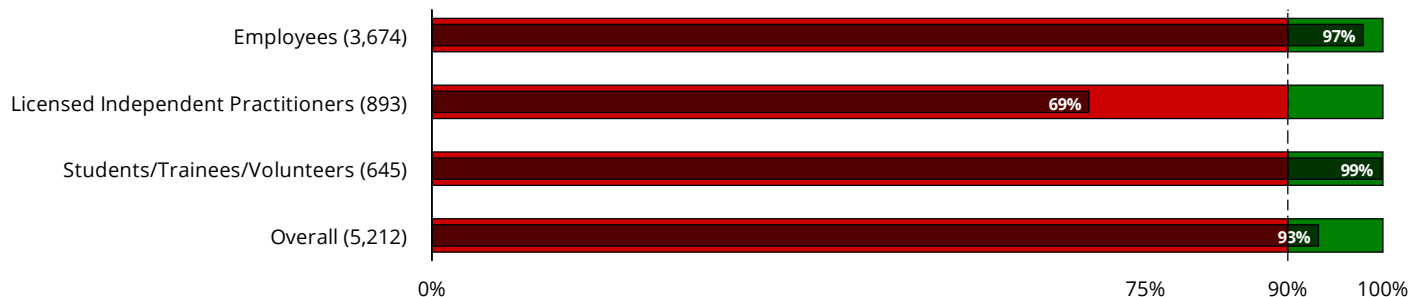
**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at Baptist Memorial Hospital - Memphis*

### Healthcare Personnel Influenza Vaccination - '2017/2018' Influenza Season

#### Healthcare Personnel Category (Total)



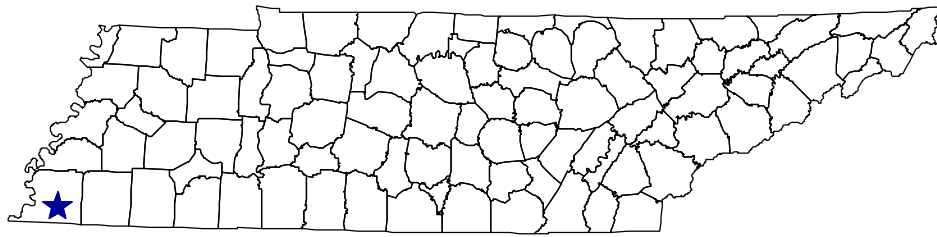
#### Healthcare Personnel Vaccinated (%)

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

## Baptist Memorial Hospital - Memphis, Memphis, Shelby County

Medical School Affiliation: Major teaching

Bed Size Category: 400+ beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2018-12/31/2018

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		
		Observed	Predicted		SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	13	12.9	11479	1.00	(0.56, 1.67)	0.76
	Adult/Pediatric Ward	11	10.8	11105	1.02	(0.53, 1.77)	0.63
CAUTI	Adult/Pediatric ICU	8	12.8	7400	0.62	(0.29, 1.18)	0.70
	Adult/Pediatric Ward	11	6.3	5380	1.73	(0.91, 3.01)	0.73
SSI	Colon surgery	7	7.5	278	0.93	(0.41, 1.84)	0.79
	Abdominal hysterectomy	0	1.0	129	0.00	(0.00, 2.94)	0.78
LabID	MRSA bacteremia	13	16.5	179351	0.79	(0.44, 1.31)	1.29
	C. difficile infection	175	170.7	179351	1.03	(0.88, 1.19)	0.68

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

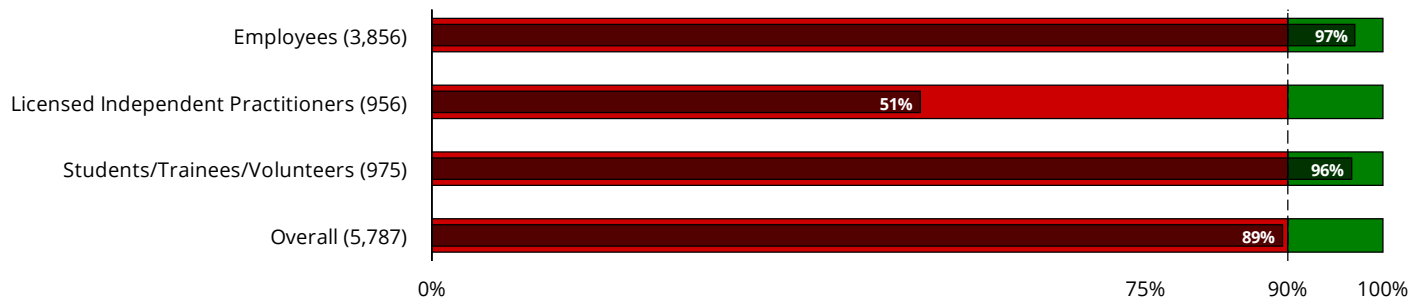
**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at Baptist Memorial Hospital - Memphis*

### Healthcare Personnel Influenza Vaccination - '2018/2019' Influenza Season

#### Healthcare Personnel Category (Total)

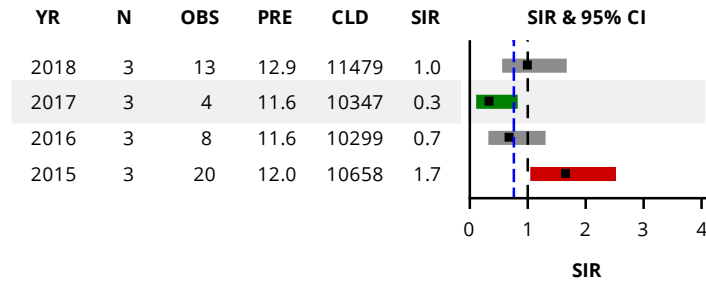


#### Healthcare Personnel Vaccinated (%)

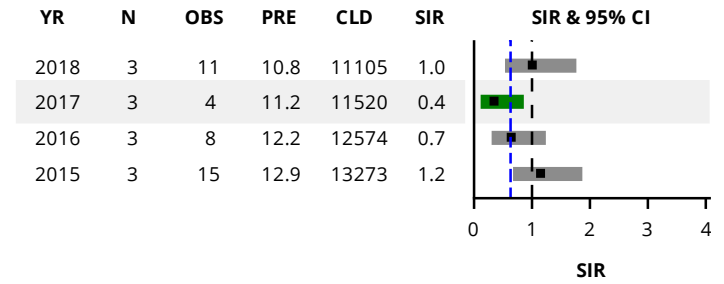
■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

### Central Line-Associated Bloodstream Infections (CLABSI)

#### CLABSI - Adult/Pediatric ICUs

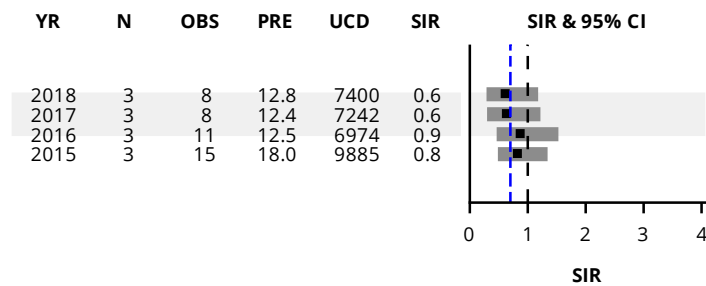


#### CLABSI - Adult/Pediatric Wards

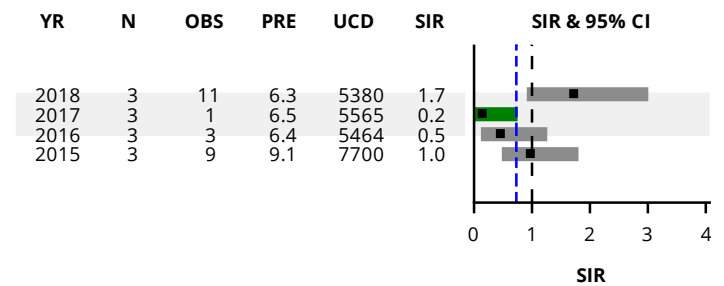


### Catheter-Associated Urinary Tract Infections (CAUTI)

#### CAUTI - Adult/Pediatric ICUs

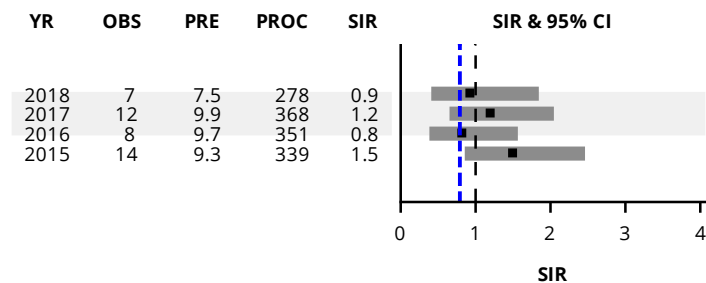


#### CAUTI - Adult/Pediatric Wards

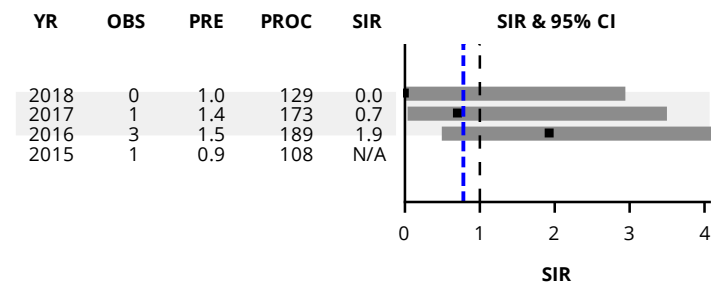


### Surgical Site Infections (SSI)

#### SSI - Colon Surgery

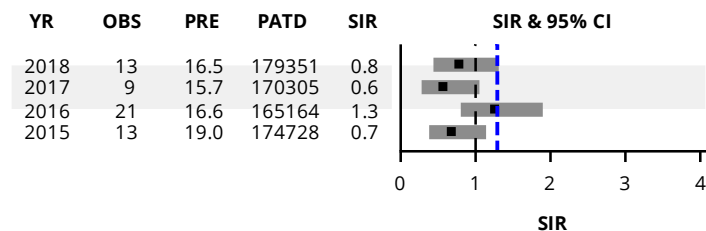


#### SSI - Abdominal Hysterectomy

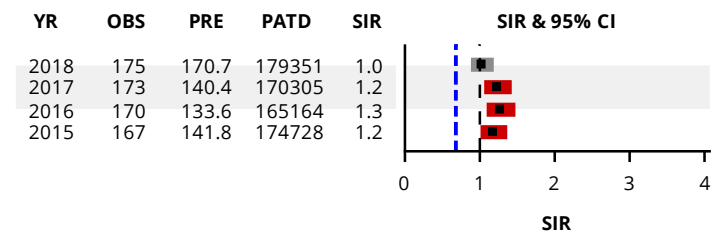


### Healthcare Facility-Onset Laboratory Identified (LabID) Events

#### LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia



#### LabID - *C. difficile* Infection (CDI)



Data reported as of August 27, 2019

YR = reporting year; N = number of units reporting (CLABSI/CAUTI); OBS = observed number of infections

PRE = statistically 'predicted' number of infections, based on NHSN national baseline data

SIR = standardized infection ratio (observed/predicted number of infections)

CLD = central line days; UCD = urinary catheter days; PROC = procedures performed; PATD = patient days;

N/A = data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

■ Significantly lower than NHSN SIR of 1

■ Not significantly different from NHSN SIR of 1

■ Significantly higher than NHSN SIR of 1

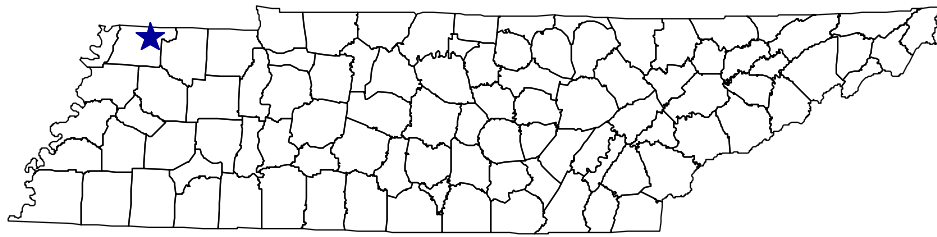
--- 2018 TN SIR

--- NHSN SIR=1

## Baptist Memorial Hospital - Union City, Union City, Obion County

Medical School Affiliation: None

Bed Size Category: 50-99 beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2017-12/31/2017

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		
		Observed	Predicted		SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	0	0.1	202	N/A	N/A	0.85
	Adult/Pediatric Ward	0	0.2	478	N/A	N/A	0.68
CAUTI	Adult/Pediatric ICU	0	0.3	699	N/A	N/A	0.71
	Adult/Pediatric Ward	2	0.5	945	N/A	N/A	0.72
SSI	Colon surgery	N/A	N/A	N/A	N/A	N/A	0.83
	Abdominal hysterectomy	0	0.1	25	N/A	N/A	1.08
LabID	MRSA bacteremia	0	0.3	10015	N/A	N/A	1.09
	C. difficile infection	1	5.4	9421	0.18	(0.01, 0.90)	0.83

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

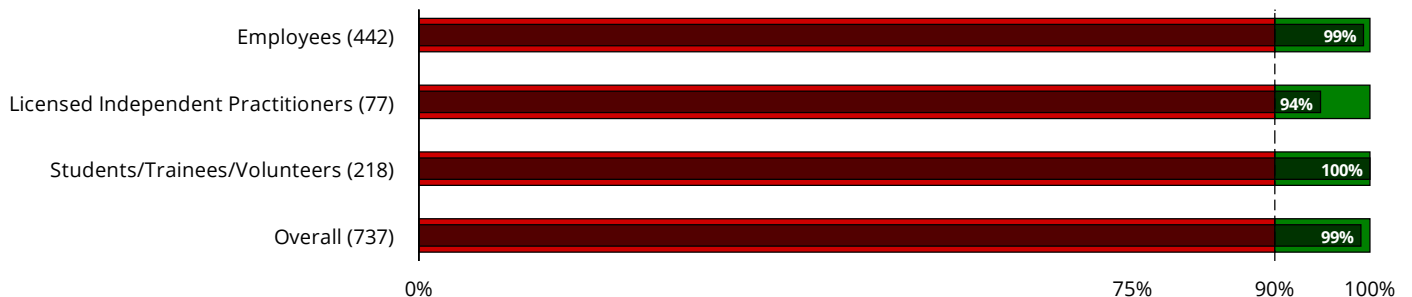
**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at Baptist Memorial Hospital - Union City*

### Healthcare Personnel Influenza Vaccination - '2017/2018' Influenza Season

#### Healthcare Personnel Category (Total)



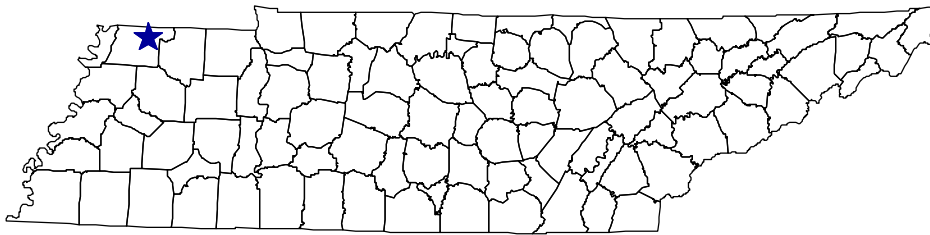
#### Healthcare Personnel Vaccinated (%)

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

## Baptist Memorial Hospital - Union City, Union City, Obion County

Medical School Affiliation: None

Bed Size Category: 50-99 beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2018-12/31/2018

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		
		Observed	Predicted		SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	0	0.1	262	N/A	N/A	0.76
	Adult/Pediatric Ward	0	0.2	456	N/A	N/A	0.63
CAUTI	Adult/Pediatric ICU	0	0.4	731	N/A	N/A	0.70
	Adult/Pediatric Ward	1	0.6	1241	N/A	N/A	0.73
SSI	Colon surgery	N/A	N/A	N/A	N/A	N/A	0.79
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	0.78
LabID	MRSA bacteremia	0	0.3	9845	N/A	N/A	1.29
	C. difficile infection	2	6.2	9275	0.32	( 0.05, 1.06 )	0.68

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at Baptist Memorial Hospital - Union City*

### Healthcare Personnel Influenza Vaccination - '2018/2019' Influenza Season

#### Healthcare Personnel Category (Total)



#### Healthcare Personnel Vaccinated (%)

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric ICUs

YR	N	OBS	PRE	CLD	SIR
2018	1	0	0.1	262	N/A
2017	1	0	0.1	202	N/A
2016	1	0	0.1	216	N/A
2015	1	0	0.1	206	N/A

N/A: Number of predicted infections <1; no SIR calculated

CLABSI - Adult/Pediatric Wards

YR	N	OBS	PRE	CLD	SIR
2018	1	0	0.2	456	N/A
2017	1	0	0.2	478	N/A
2016	1	0	0.2	466	N/A
2015	1	0	0.2	399	N/A

N/A: Number of predicted infections <1; no SIR calculated

Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICUs

YR	N	OBS	PRE	UCD	SIR
2018	1	0	0.4	731	N/A
2017	1	0	0.3	699	N/A
2016	1	0	0.3	656	N/A
2015	1	0	0.3	558	N/A

N/A: Number of predicted infections <1; no SIR calculated

CAUTI - Adult/Pediatric Wards

YR	N	OBS	PRE	UCD	SIR
2018	1	1	0.6	1241	N/A
2017	1	2	0.5	945	N/A
2016	1	0	0.5	1094	N/A
2015	1	0	0.5	985	N/A

N/A: Number of predicted infections <1; no SIR calculated

Surgical Site Infections (SSI)

SSI - Colon Surgery

YR	OBS	PRE	PROC	SIR
2018	N/A	N/A	N/A	N/A
2017	N/A	N/A	N/A	N/A
2016	N/A	N/A	N/A	N/A
2015	N/A	N/A	N/A	N/A

N/A: Number of predicted infections <1; no SIR calculated

SSI - Abdominal Hysterectomy

YR	OBS	PRE	PROC	SIR
2018	N/A	N/A	N/A	N/A
2017	0	0.1	25	N/A
2016	0	0.2	34	N/A
2015	0	0.1	29	N/A

N/A: Number of predicted infections <1; no SIR calculated

Healthcare Facility-Onset Laboratory Identified (LabID) Events

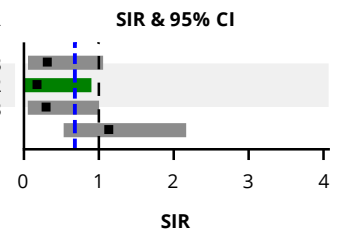
LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia

YR	OBS	PRE	PATD	SIR
2018	0	0.3	9845	N/A
2017	0	0.3	10015	N/A
2016	0	0.3	10658	N/A
2015	0	0.3	9826	N/A

N/A: Number of predicted infections <1; no SIR calculated

LabID - *C. difficile* Infection (CDI)

YR	OBS	PRE	PATD	SIR
2018	2	6.2	9275	0.3
2017	1	5.4	9421	0.2
2016	2	6.5	9923	0.3
2015	8	7.0	9279	1.1



Data reported as of August 27, 2019

YR = reporting year; N = number of units reporting (CLABSI/CAUTI); OBS = observed number of infections

PRE = statistically 'predicted' number of infections, based on NHSN national baseline data

SIR = standardized infection ratio (observed/predicted number of infections)

CLD = central line days; UCD = urinary catheter days; PROC = procedures performed; PATD = patient days;

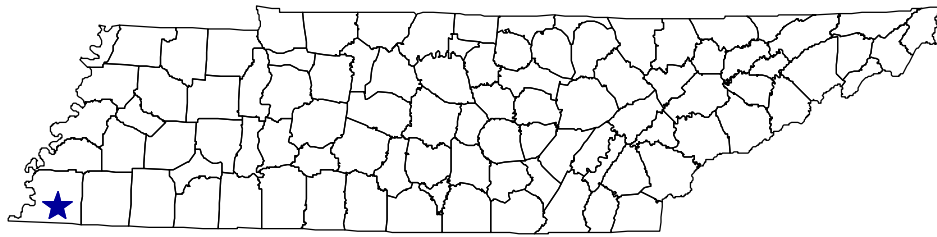
N/A = data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

- Significantly lower than NHSN SIR of 1
- Not significantly different from NHSN SIR of 1
- Significantly higher than NHSN SIR of 1
- - - 2018 TN SIR
- - - NHSN SIR=1

## Baptist Memorial Hospital for Women, Memphis, Shelby County

Medical School Affiliation: Graduate teaching

Bed Size Category: 100-399 beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2017-12/31/2017

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		TN SIR
		Observed	Predicted		SIR*	95% CI	
CLABSI	Neonatal ICU	8	6.3	4179	1.27	( 0.59, 2.41 )	0.75
	Adult/Pediatric Ward	0	0.2	254	N/A	N/A	0.68
CAUTI	Adult/Pediatric Ward	N/A	N/A	N/A	N/A	N/A	0.72
SSI	Colon surgery	N/A	N/A	N/A	N/A	N/A	0.83
	Abdominal hysterectomy	2	2.9	584	0.69	( 0.12, 2.28 )	1.08
LabID	MRSA bacteremia	5	0.3	24286	N/A	N/A	1.09
	C. difficile infection	0	2.6	19244	0.00	( 0.00, 1.15 )	0.83

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at Baptist Memorial Hospital for Women*

### Healthcare Personnel Influenza Vaccination - '2017/2018' Influenza Season

#### Healthcare Personnel Category (Total)



#### Healthcare Personnel Vaccinated (%)

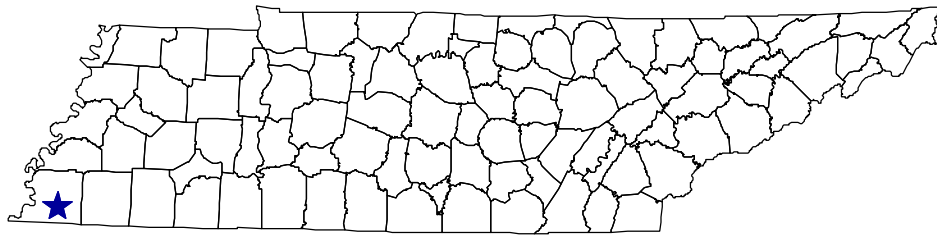
■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)



## Baptist Memorial Hospital for Women, Memphis, Shelby County

Medical School Affiliation: Graduate teaching

Bed Size Category: 100-399 beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2018-12/31/2018

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		TN SIR
		Observed	Predicted		SIR*	95% CI	
CLABSI	Neonatal ICU	8	5.1	3641	1.56	( 0.73, 2.96 )	0.79
	Adult/Pediatric Ward	0	0.1	148	N/A	N/A	0.63
CAUTI	Adult/Pediatric Ward	N/A	N/A	N/A	N/A	N/A	0.73
SSI	Colon surgery	N/A	N/A	N/A	N/A	N/A	0.79
	Abdominal hysterectomy	0	2.5	527	0.00	( 0.00, 1.16 )	0.78
LabID	MRSA bacteremia	2	0.5	21913	N/A	N/A	1.29
	C. difficile infection	1	6.0	21913	0.17	( 0.01, 0.82 )	0.68

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

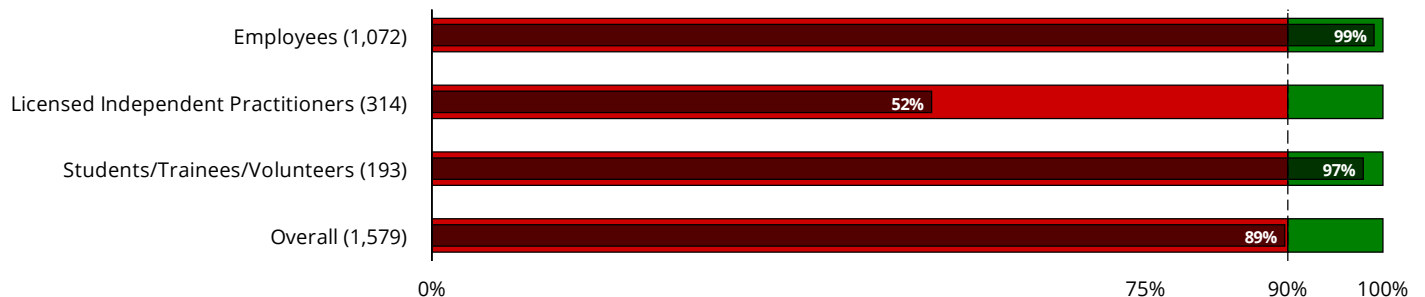
**N/A**: Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at Baptist Memorial Hospital for Women*

### Healthcare Personnel Influenza Vaccination - '2018/2019' Influenza Season

#### Healthcare Personnel Category (Total)

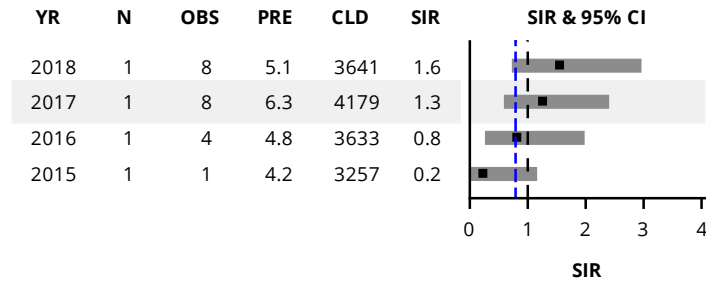


#### Healthcare Personnel Vaccinated (%)

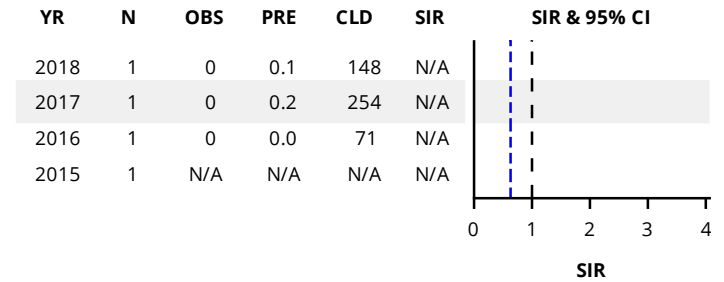
■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Neonatal ICUs



CLABSI - Adult/Pediatric Wards



Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric Wards

YR	N	OBS	PRE	UCD	SIR
2018	1	N/A	N/A	N/A	N/A
2017	1	N/A	N/A	N/A	N/A
2016	1	N/A	N/A	N/A	N/A
2015	1	N/A	N/A	N/A	N/A

N/A: Number of predicted infections <1; no SIR calculated

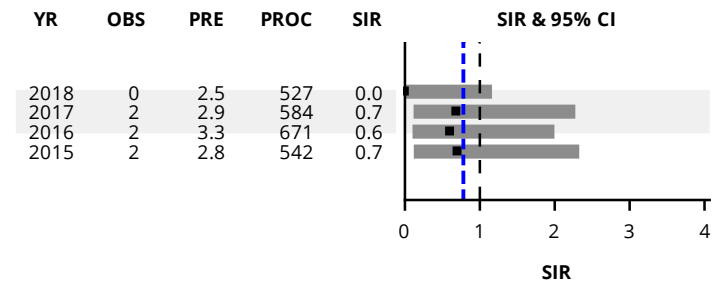
Surgical Site Infections (SSI)

SSI - Colon Surgery

YR	OBS	PRE	PROC	SIR
2018	N/A	N/A	N/A	N/A
2017	N/A	N/A	N/A	N/A
2016	N/A	N/A	N/A	N/A
2015	N/A	N/A	N/A	N/A

N/A: Number of predicted infections <1; no SIR calculated

SSI - Abdominal Hysterectomy



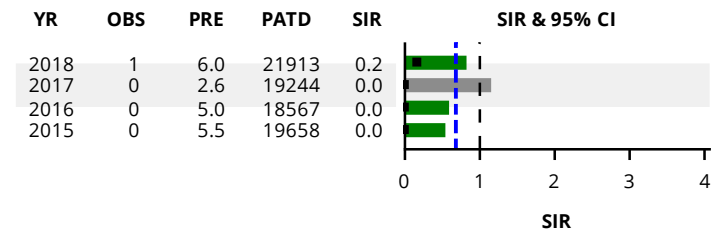
Healthcare Facility-Onset Laboratory Identified (LabID) Events

LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia

YR	OBS	PRE	PATD	SIR
2018	2	0.5	21913	N/A
2017	5	0.3	24286	N/A
2016	1	0.3	18567	N/A
2015	2	0.5	22408	N/A

N/A: Number of predicted infections <1; no SIR calculated

LabID - *C. difficile* Infection (CDI)



Data reported as of August 27, 2019

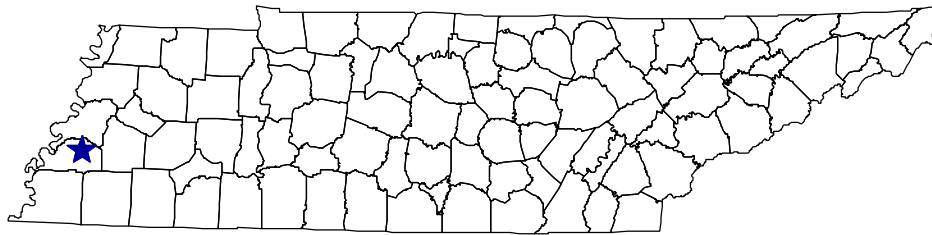
YR = reporting year; N = number of units reporting (CLABSI/CAUTI); OBS = observed number of infections  
 PRE = statistically 'predicted' number of infections, based on NHSN national baseline data  
 SIR = standardized infection ratio (observed/predicted number of infections)  
 CLD = central line days; UCD = urinary catheter days; PROC = procedures performed; PATD = patient days;  
 N/A = data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

■ Significantly lower than NHSN SIR of 1  
 ■ Not significantly different from NHSN SIR of 1  
 ■ Significantly higher than NHSN SIR of 1  
 - - - 2018 TN SIR  
 - - - NHSN SIR=1

## Baptist Memorial Hospital -Tipton, Covington, Tipton County

Medical School Affiliation: None

Bed Size Category: 50-99 beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2017-12/31/2017

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		
		Observed	Predicted		SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	N/A	N/A	N/A	N/A	N/A	0.85
	Adult/Pediatric Ward	0	0.0	89	N/A	N/A	0.68
CAUTI	Adult/Pediatric ICU	0	0.0	69	N/A	N/A	0.71
	Adult/Pediatric Ward	0	0.1	260	N/A	N/A	0.72
SSI	Colon surgery	N/A	N/A	N/A	N/A	N/A	0.83
	Abdominal hysterectomy	0	0.1	21	N/A	N/A	1.08
LabID	MRSA bacteremia	0	0.0	2928	N/A	N/A	1.09
	C. difficile infection	0	0.7	2928	N/A	N/A	0.83

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at Baptist Memorial Hospital -Tipton*

### Healthcare Personnel Influenza Vaccination - '2017/2018' Influenza Season

#### Healthcare Personnel Category (Total)



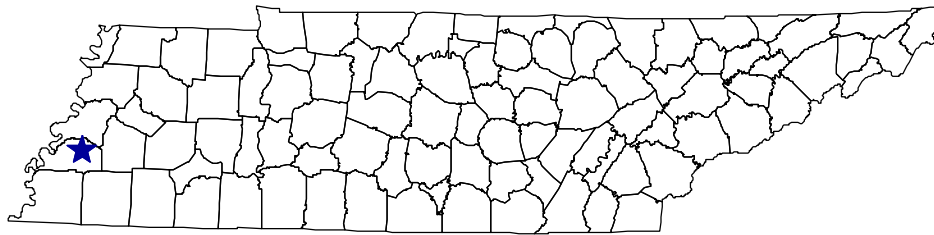
#### Healthcare Personnel Vaccinated (%)

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

## Baptist Memorial Hospital -Tipton, Covington, Tipton County

Medical School Affiliation: None

Bed Size Category: 50-99 beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2018-12/31/2018

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		
		Observed	Predicted		SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	N/A	N/A	N/A	N/A	N/A	0.76
	Adult/Pediatric Ward	0	0.0	61	N/A	N/A	0.63
CAUTI	Adult/Pediatric ICU	N/A	N/A	N/A	N/A	N/A	0.70
	Adult/Pediatric Ward	0	0.1	320	N/A	N/A	0.73
SSI	Colon surgery	N/A	N/A	N/A	N/A	N/A	0.79
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	0.78
LabID	MRSA bacteremia	1	0.0	2701	N/A	N/A	1.29
	C. difficile infection	1	0.9	2701	N/A	N/A	0.68

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at Baptist Memorial Hospital -Tipton*

### Healthcare Personnel Influenza Vaccination - '2018/2019' Influenza Season

#### Healthcare Personnel Category (Total)



#### Healthcare Personnel Vaccinated (%)

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric ICUs

YR	N	OBS	PRE	CLD	SIR
2018	1	N/A	N/A	N/A	N/A
2017	1	N/A	N/A	N/A	N/A
2016	1	N/A	N/A	N/A	N/A
2015	1	N/A	N/A	N/A	N/A

N/A: Number of predicted infections <1; no SIR calculated

CLABSI - Adult/Pediatric Wards

YR	N	OBS	PRE	CLD	SIR
2018	1	0	0.0	61	N/A
2017	1	0	0.0	89	N/A
2016	1	1	0.0	77	N/A
2015	1	0	0.0	83	N/A

N/A: Number of predicted infections <1; no SIR calculated

Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICUs

YR	N	OBS	PRE	UCD	SIR
2018	1	N/A	N/A	N/A	N/A
2017	1	0	0.0	69	N/A
2016	1	0	0.0	80	N/A
2015	1	0	0.1	180	N/A

N/A: Number of predicted infections <1; no SIR calculated

CAUTI - Adult/Pediatric Wards

YR	N	OBS	PRE	UCD	SIR
2018	1	0	0.1	320	N/A
2017	1	0	0.1	260	N/A
2016	1	0	0.1	388	N/A
2015	1	0	0.2	480	N/A

N/A: Number of predicted infections <1; no SIR calculated

Surgical Site Infections (SSI)

SSI - Colon Surgery

YR	OBS	PRE	PROC	SIR
2018	N/A	N/A	N/A	N/A
2017	N/A	N/A	N/A	N/A
2016	N/A	N/A	N/A	N/A
2015	N/A	N/A	N/A	N/A

N/A: Number of predicted infections <1; no SIR calculated

SSI - Abdominal Hysterectomy

YR	OBS	PRE	PROC	SIR
2018	N/A	N/A	N/A	N/A
2017	0	0.1	21	N/A
2016	0	0.1	26	N/A
2015	0	0.1	25	N/A

N/A: Number of predicted infections <1; no SIR calculated

Healthcare Facility-Onset Laboratory Identified (LabID) Events

LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia

YR	OBS	PRE	PATD	SIR
2018	1	0.0	2701	N/A
2017	0	0.0	2928	N/A
2016	0	0.0	2855	N/A
2015	0	0.0	3317	N/A

N/A: Number of predicted infections <1; no SIR calculated

LabID - *C. difficile* Infection (CDI)

YR	OBS	PRE	PATD	SIR
2018	1	0.9	2701	N/A
2017	0	0.7	2928	N/A
2016	1	0.9	2855	N/A
2015	0	1.0	3317	0.0

N/A: Number of predicted infections <1; no SIR calculated

Data reported as of August 27, 2019

YR = reporting year; N = number of units reporting (CLABSI/CAUTI); OBS = observed number of infections

PRE = statistically 'predicted' number of infections, based on NHSN national baseline data

SIR = standardized infection ratio (observed/predicted number of infections)

CLD = central line days; UCD = urinary catheter days; PROC = procedures performed; PATD = patient days;

N/A = data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

■ Significantly lower than NHSN SIR of 1

■ Not significantly different from NHSN SIR of 1

■ Significantly higher than NHSN SIR of 1

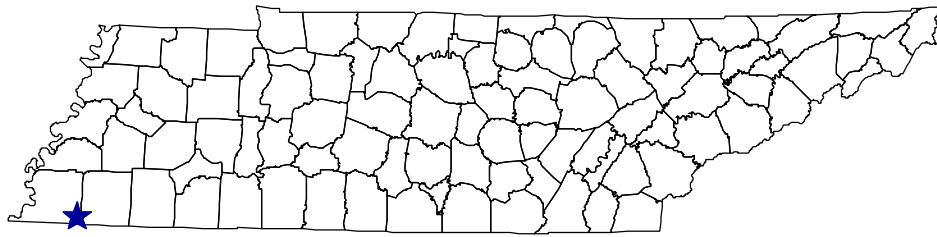
--- 2018 TN SIR

--- NHSN SIR=1

## Baptist Memorial Hospital - Collierville, Collierville, Shelby County

Medical School Affiliation: Major teaching

Bed Size Category: 50-99 beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2017-12/31/2017

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		
		Observed	Predicted		SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	1	0.5	634	N/A	N/A	0.85
	Adult/Pediatric Ward	1	0.7	965	N/A	N/A	0.68
CAUTI	Adult/Pediatric ICU	0	0.7	891	N/A	N/A	0.71
	Adult/Pediatric Ward	0	0.6	916	N/A	N/A	0.72
SSI	Colon surgery	N/A	N/A	N/A	N/A	N/A	0.83
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	1.08
LabID	MRSA bacteremia	0	0.3	7342	N/A	N/A	1.09
	C. difficile infection	7	5.3	7342	1.30	( 0.57, 2.57 )	0.83

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

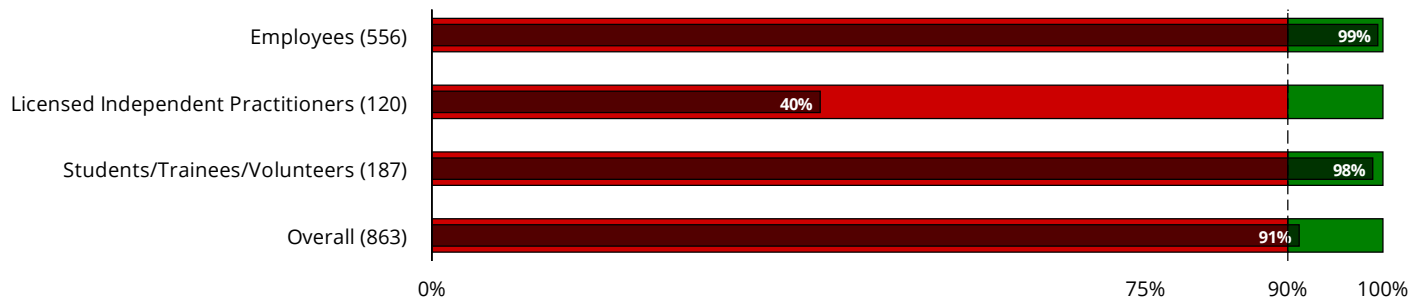
**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at Baptist Memorial Hospital - Collierville*

### Healthcare Personnel Influenza Vaccination - '2017/2018' Influenza Season

#### Healthcare Personnel Category (Total)



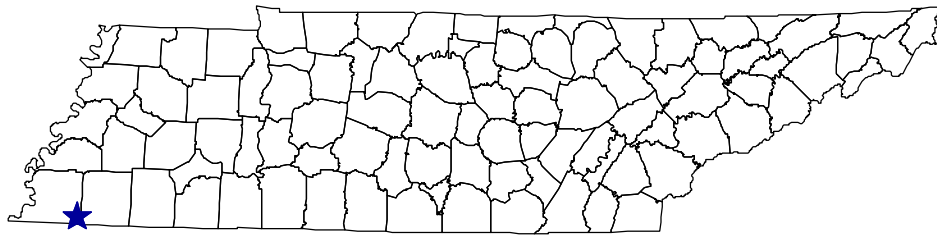
#### Healthcare Personnel Vaccinated (%)

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

## Baptist Memorial Hospital - Collierville, Collierville, Shelby County

Medical School Affiliation: Major teaching

Bed Size Category: 50-99 beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2018-12/31/2018

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		
		Observed	Predicted		SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	0	0.4	535	N/A	N/A	0.76
	Adult/Pediatric Ward	1	0.7	964	N/A	N/A	0.63
CAUTI	Adult/Pediatric ICU	0	0.7	940	N/A	N/A	0.70
	Adult/Pediatric Ward	0	0.7	1098	N/A	N/A	0.73
SSI	Colon surgery	N/A	N/A	N/A	N/A	N/A	0.79
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	0.78
LabID	MRSA bacteremia	0	0.4	9232	N/A	N/A	1.29
	C. difficile infection	8	7.0	9232	1.14	( 0.53, 2.16 )	0.68

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

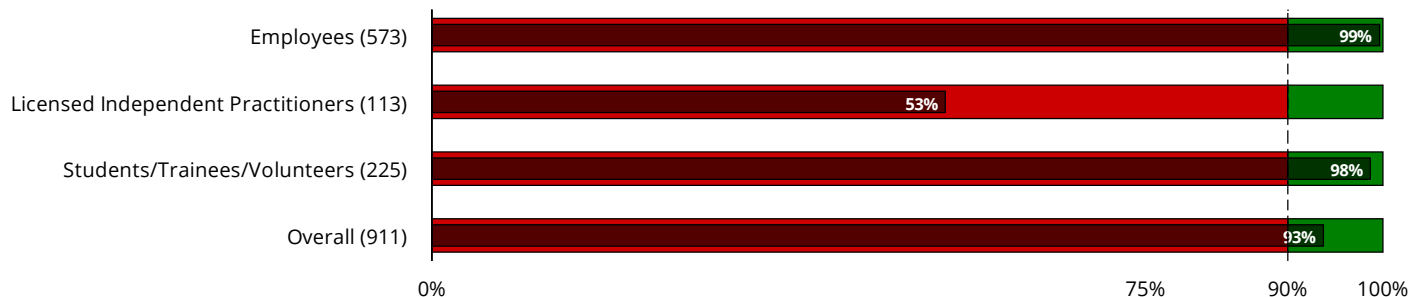
**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at Baptist Memorial Hospital - Collierville*

### Healthcare Personnel Influenza Vaccination - '2018/2019' Influenza Season

#### Healthcare Personnel Category (Total)



#### Healthcare Personnel Vaccinated (%)

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric ICUs

YR	N	OBS	PRE	CLD	SIR
2018	1	0	0.4	535	N/A
2017	1	1	0.5	634	N/A
2016	1	0	0.4	484	N/A
2015	1	0	0.2	291	N/A

N/A: Number of predicted infections <1; no SIR calculated

CLABSI - Adult/Pediatric Wards

YR	N	OBS	PRE	CLD	SIR
2018	1	1	0.7	964	N/A
2017	1	1	0.7	965	N/A
2016	1	0	0.5	701	N/A
2015	1	0	0.5	784	N/A

N/A: Number of predicted infections <1; no SIR calculated

Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICUs

YR	N	OBS	PRE	UCD	SIR
2018	1	0	0.7	940	N/A
2017	1	0	0.7	891	N/A
2016	1	1	0.6	844	N/A
2015	1	0	0.5	659	N/A

N/A: Number of predicted infections <1; no SIR calculated

CAUTI - Adult/Pediatric Wards

YR	N	OBS	PRE	UCD	SIR
2018	1	0	0.7	1098	N/A
2017	1	0	0.6	916	N/A
2016	1	1	0.7	1091	N/A
2015	1	0	0.9	1271	N/A

N/A: Number of predicted infections <1; no SIR calculated

Surgical Site Infections (SSI)

SSI - Colon Surgery

YR	OBS	PRE	PROC	SIR
2018	N/A	N/A	N/A	N/A
2017	N/A	N/A	N/A	N/A
2016	N/A	N/A	N/A	N/A
2015	N/A	N/A	N/A	N/A

N/A: Number of predicted infections <1; no SIR calculated

SSI - Abdominal Hysterectomy

YR	OBS	PRE	PROC	SIR
2018	N/A	N/A	N/A	N/A
2017	N/A	N/A	N/A	N/A
2016	N/A	N/A	N/A	N/A
2015	N/A	N/A	N/A	N/A

N/A: Number of predicted infections <1; no SIR calculated

Healthcare Facility-Onset Laboratory Identified (LabID) Events

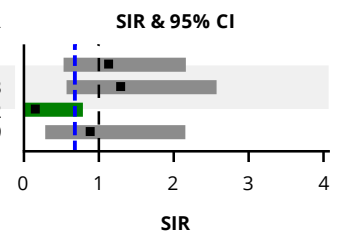
LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia

YR	OBS	PRE	PATD	SIR
2018	0	0.4	9232	N/A
2017	0	0.3	7342	N/A
2016	0	0.3	7393	N/A
2015	0	0.3	8102	N/A

N/A: Number of predicted infections <1; no SIR calculated

LabID - *C. difficile* Infection (CDI)

YR	OBS	PRE	PATD	SIR
2018	8	7.0	9232	1.1
2017	7	5.3	7342	1.3
2016	1	6.2	7393	0.2
2015	4	4.4	8102	0.9



Data reported as of August 27, 2019

YR = reporting year; N = number of units reporting (CLABSI/CAUTI); OBS = observed number of infections

PRE = statistically 'predicted' number of infections, based on NHSN national baseline data

SIR = standardized infection ratio (observed/predicted number of infections)

CLD = central line days; UCD = urinary catheter days; PROC = procedures performed; PATD = patient days;

N/A = data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

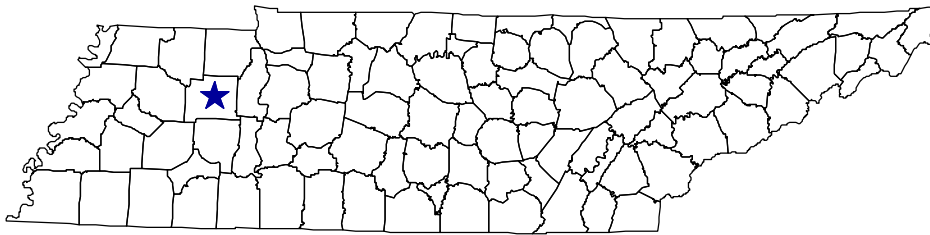
- Significantly lower than NHSN SIR of 1
- Not significantly different from NHSN SIR of 1
- Significantly higher than NHSN SIR of 1
- - - 2018 TN SIR
- - - NHSN SIR=1



## Baptist Memorial Hospital - Huntington, Huntington, Carroll County

Medical School Affiliation: None

Bed Size Category: 50-99 beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2017-12/31/2017

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		
		Observed	Predicted		SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	N/A	N/A	N/A	N/A	N/A	0.85
	Adult/Pediatric Ward	0	0.0	76	N/A	N/A	0.68
CAUTI	Adult/Pediatric ICU	1	0.0	151	N/A	N/A	0.71
	Adult/Pediatric Ward	0	0.2	479	N/A	N/A	0.72
SSI	Colon surgery	N/A	N/A	N/A	N/A	N/A	0.83
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	1.08
LabID	MRSA bacteremia	0	0.0	4149	N/A	N/A	1.09
	C. difficile infection	0	2.5	4149	0.00	( 0.00, 1.18 )	0.83

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

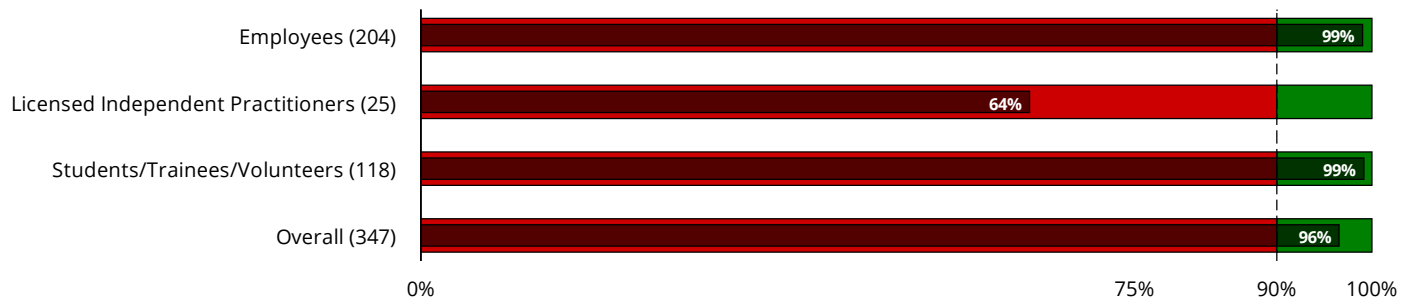
**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at Baptist Memorial Hospital - Huntington*

### Healthcare Personnel Influenza Vaccination - '2017/2018' Influenza Season

#### Healthcare Personnel Category (Total)



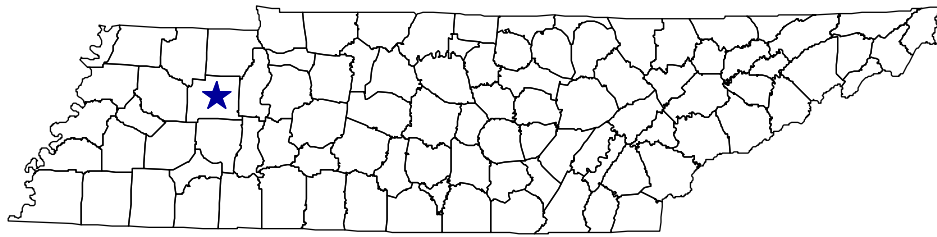
#### Healthcare Personnel Vaccinated (%)

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

## Baptist Memorial Hospital - Huntington, Huntington, Carroll County

Medical School Affiliation: None

Bed Size Category: <50 beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2018-12/31/2018

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		
		Observed	Predicted		SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	N/A	N/A	N/A	N/A	N/A	0.76
	Adult/Pediatric Ward	0	0.1	203	N/A	N/A	0.63
CAUTI	Adult/Pediatric ICU	0	0.0	83	N/A	N/A	0.70
	Adult/Pediatric Ward	0	0.2	598	N/A	N/A	0.73
SSI	Colon surgery	N/A	N/A	N/A	N/A	N/A	0.79
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	0.78
LabID	MRSA bacteremia	0	0.1	5012	N/A	N/A	1.29
	C. difficile infection	2	3.3	5012	0.59	( 0.10, 1.95 )	0.68

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at Baptist Memorial Hospital - Huntington*

### Healthcare Personnel Influenza Vaccination - '2018/2019' Influenza Season

#### Healthcare Personnel Category (Total)



#### Healthcare Personnel Vaccinated (%)

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric ICUs

YR	N	OBS	PRE	CLD	SIR
2018	1	N/A	N/A	N/A	N/A
2017	1	N/A	N/A	N/A	N/A
2016	1	0	0.0	80	N/A
2015	1	0	0.0	101	N/A

N/A: Number of predicted infections <1; no SIR calculated

CLABSI - Adult/Pediatric Wards

YR	N	OBS	PRE	CLD	SIR
2018	1	0	0.1	203	N/A
2017	1	0	0.0	76	N/A
2016	1	0	0.1	198	N/A
2015	1	0	0.1	184	N/A

N/A: Number of predicted infections <1; no SIR calculated

Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICUs

YR	N	OBS	PRE	UCD	SIR
2018	1	0	0.0	83	N/A
2017	1	1	0.0	151	N/A
2016	1	0	0.1	206	N/A
2015	1	0	0.1	303	N/A

N/A: Number of predicted infections <1; no SIR calculated

CAUTI - Adult/Pediatric Wards

YR	N	OBS	PRE	UCD	SIR
2018	1	0	0.2	598	N/A
2017	1	0	0.2	479	N/A
2016	1	0	0.2	479	N/A
2015	1	0	0.2	452	N/A

N/A: Number of predicted infections <1; no SIR calculated

Surgical Site Infections (SSI)

SSI - Colon Surgery

YR	OBS	PRE	PROC	SIR
2018	N/A	N/A	N/A	N/A
2017	N/A	N/A	N/A	N/A
2016	N/A	N/A	N/A	N/A
2015	N/A	N/A	N/A	N/A

N/A: Number of predicted infections <1; no SIR calculated

SSI - Abdominal Hysterectomy

YR	OBS	PRE	PROC	SIR
2018	N/A	N/A	N/A	N/A
2017	N/A	N/A	N/A	N/A
2016	N/A	N/A	N/A	N/A
2015	N/A	N/A	N/A	N/A

N/A: Number of predicted infections <1; no SIR calculated

Healthcare Facility-Onset Laboratory Identified (LabID) Events

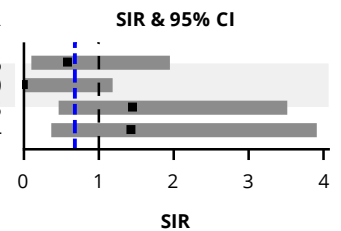
LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia

YR	OBS	PRE	PATD	SIR
2018	0	0.1	5012	N/A
2017	0	0.0	4149	N/A
2016	0	0.1	4271	N/A
2015	0	0.0	4381	N/A

N/A: Number of predicted infections <1; no SIR calculated

LabID - *C. difficile* Infection (CDI)

YR	OBS	PRE	PATD	SIR
2018	2	3.3	5012	0.6
2017	0	2.5	4149	0.0
2016	4	2.7	4271	1.5
2015	3	2.0	4381	1.4



Data reported as of August 27, 2019

YR = reporting year; N = number of units reporting (CLABSI/CAUTI); OBS = observed number of infections

PRE = statistically 'predicted' number of infections, based on NHSN national baseline data

SIR = standardized infection ratio (observed/predicted number of infections)

CLD = central line days; UCD = urinary catheter days; PROC = procedures performed; PATD = patient days;

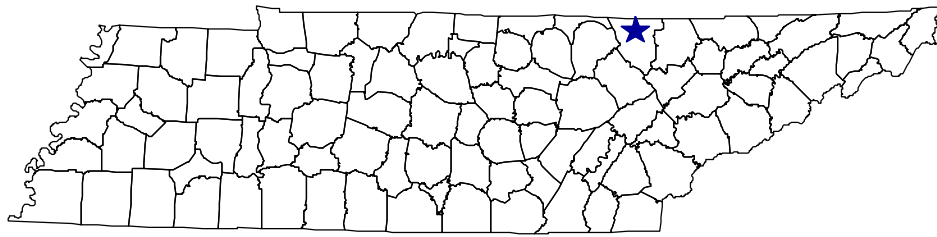
N/A = data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

- Significantly lower than NHSN SIR of 1
- Not significantly different from NHSN SIR of 1
- Significantly higher than NHSN SIR of 1
- - - 2018 TN SIR
- - - NHSN SIR=1

## Big South Fork Medical Center, Oneida, Scott County

Medical School Affiliation: None

Bed Size Category: <50 beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2017-12/31/2017

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		
		Observed	Predicted		SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric Ward	N/A	N/A	N/A	N/A	N/A	0.68
CAUTI	Adult/Pediatric Ward	N/A	N/A	N/A	N/A	N/A	0.72
LabID	MRSA bacteremia	0	0.0	666	N/A	N/A	1.09
	C. difficile infection	0	0.1	666	N/A	N/A	0.83

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

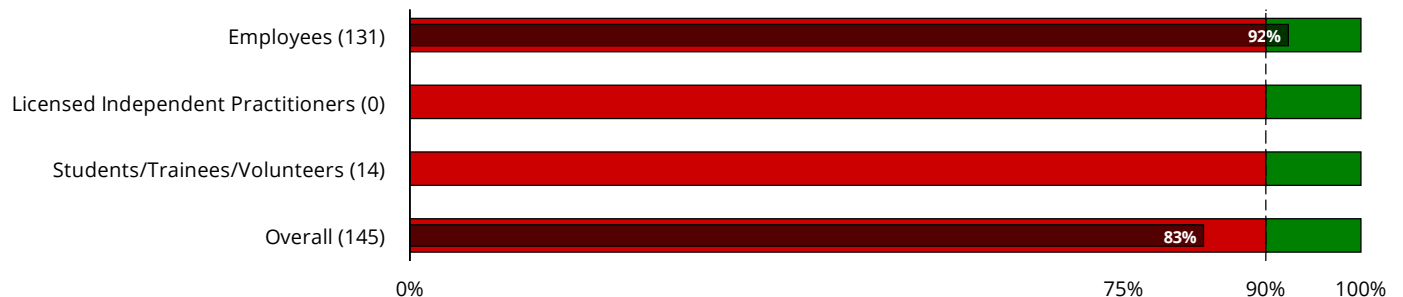
**N/A**: Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at Big South Fork Medical Center*

### Healthcare Personnel Influenza Vaccination - '2017/2018' Influenza Season

#### Healthcare Personnel Category (Total)



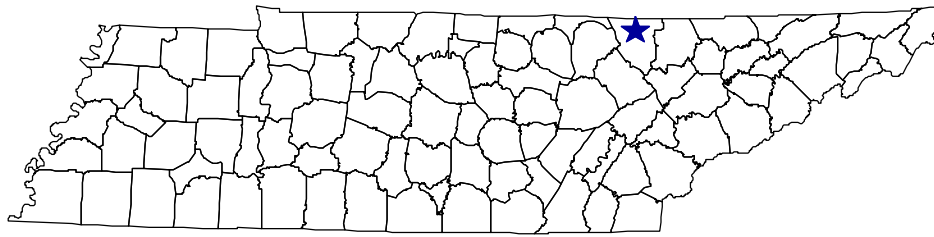
#### Healthcare Personnel Vaccinated (%)

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

## Big South Fork Medical Center, Oneida, Scott County

Medical School Affiliation: None

Bed Size Category: <50 beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2018-12/31/2018

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		
		Observed	Predicted		SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric Ward	0	0.0	118	N/A	N/A	0.63
CAUTI	Adult/Pediatric Ward	1	0.1	250	N/A	N/A	0.73
LabID	MRSA bacteremia	0	0.0	1670	N/A	N/A	1.29
	C. difficile infection	1	0.3	1670	N/A	N/A	0.68

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

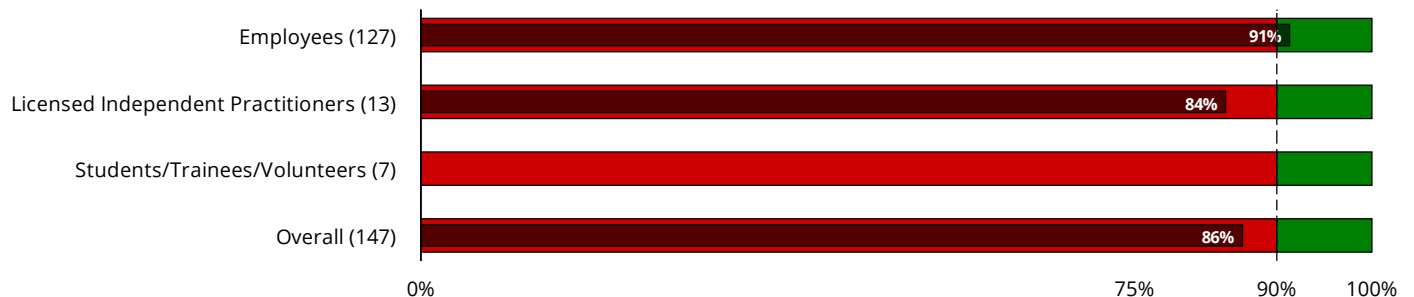
**N/A**: Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at Big South Fork Medical Center*

### Healthcare Personnel Influenza Vaccination - '2018/2019' Influenza Season

#### Healthcare Personnel Category (Total)

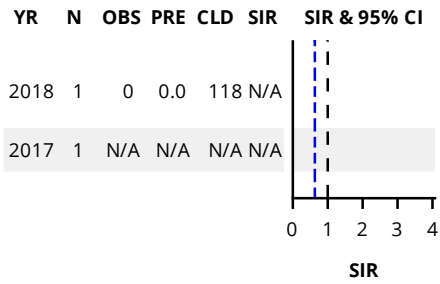


#### Healthcare Personnel Vaccinated (%)

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric Wards



Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric Wards

YR	N	OBS	PRE	UCD	SIR
2018	1	1	0.1	250	N/A
2017	1	N/A	N/A	N/A	N/A

N/A: Number of predicted infections <1; no SIR calculated

Healthcare Facility-Onset Laboratory Identified (LabID) Events

LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia

YR	OBS	PRE	PATD	SIR
2018	0	0.0	1670	N/A
2017	0	0.0	666	N/A

N/A: Number of predicted infections <1; no SIR calculated

LabID - *C. difficile* Infection (CDI)

YR	OBS	PRE	PATD	SIR
2018	1	0.3	1670	N/A
2017	0	0.1	666	N/A

N/A: Number of predicted infections <1; no SIR calculated

Data reported as of August 27, 2019

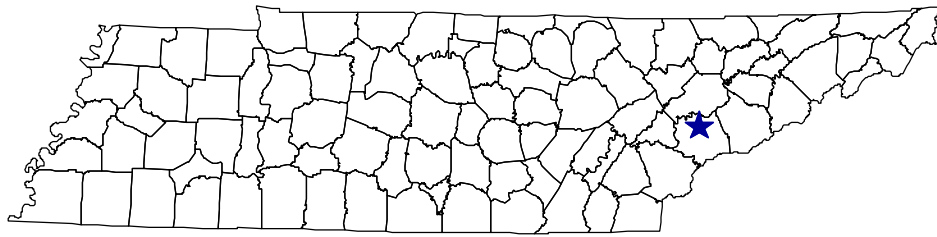
**YR** = reporting year; **N** = number of units reporting (CLABSI/CAUTI); **OBS** = observed number of infections  
**PRE** = statistically 'predicted' number of infections, based on NHSN national baseline data  
**SIR** = standardized infection ratio (observed/predicted number of infections)  
**CLD** = central line days; **UCD** = urinary catheter days; **PROC** = procedures performed; **PATD** = patient days;  
**N/A** = data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

- Significantly lower than NHSN SIR of 1
- Not significantly different from NHSN SIR of 1
- Significantly higher than NHSN SIR of 1
- - - 2018 TN SIR
- - - NHSN SIR=1

## Blount Memorial Hospital, Maryville, Blount County

Medical School Affiliation: None

Bed Size Category: 100-399 beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2017-12/31/2017

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		
		Observed	Predicted		SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	1	1.6	2203	0.60	( 0.03, 2.97 )	0.85
	Adult/Pediatric Ward	4	1.9	2956	2.08	( 0.66, 5.01 )	0.68
CAUTI	Adult/Pediatric ICU	2	3.1	3486	0.64	( 0.11, 2.12 )	0.71
	Adult/Pediatric Ward	6	3.2	4034	1.86	( 0.75, 3.87 )	0.72
SSI	Colon surgery	0	2.5	99	0.00	( 0.00, 1.18 )	0.83
	Abdominal hysterectomy	0	0.2	24	N/A	N/A	1.08
LabID	MRSA bacteremia	8	2.0	47525	3.90	( 1.81, 7.40 )	1.09
	C. difficile infection	26	25.6	46338	1.01	( 0.68, 1.46 )	0.83

Green highlighting indicates an SIR significantly LOWER than the 2015 national baseline

Red highlighting indicates an SIR significantly HIGHER than the 2015 national baseline

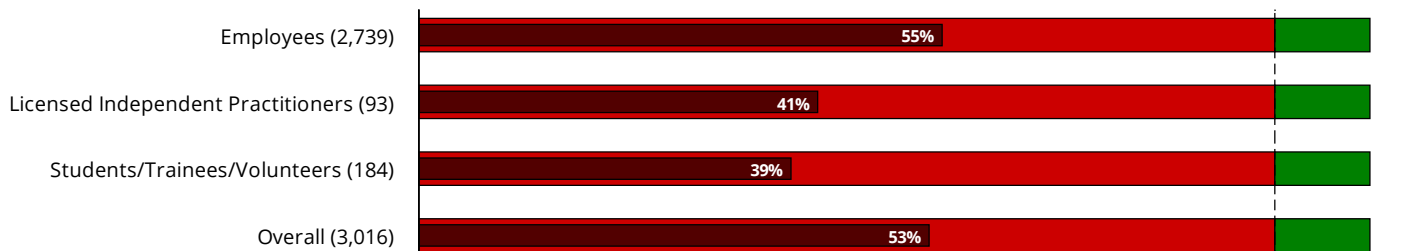
N/A: Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

See page 3 for more detailed information about HAIs at Blount Memorial Hospital

### Healthcare Personnel Influenza Vaccination - '2017/2018' Influenza Season

#### Healthcare Personnel Category (Total)



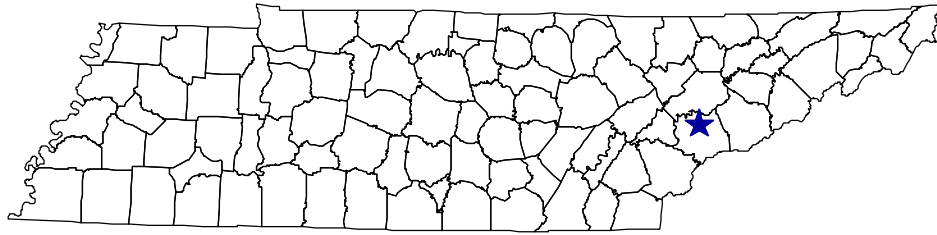
#### Healthcare Personnel Vaccinated (%)

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

## Blount Memorial Hospital, Maryville, Blount County

Medical School Affiliation: None

Bed Size Category: 100-399 beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2018-12/31/2018

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		
		Observed	Predicted		SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	2	1.8	2429	1.09	( 0.18, 3.61 )	0.76
	Adult/Pediatric Ward	0	1.6	2472	0.00	( 0.00, 1.86 )	0.63
CAUTI	Adult/Pediatric ICU	2	3.2	3629	0.62	( 0.10, 2.03 )	0.70
	Adult/Pediatric Ward	4	3.9	4937	1.01	( 0.32, 2.44 )	0.73
SSI	Colon surgery	0	2.4	103	0.00	( 0.00, 1.21 )	0.79
	Abdominal hysterectomy	0	0.1	23	N/A	N/A	0.78
LabID	MRSA bacteremia	5	1.9	49942	2.57	( 0.94, 5.69 )	1.29
	C. difficile infection	32	26.8	48785	1.19	( 0.83, 1.66 )	0.68

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

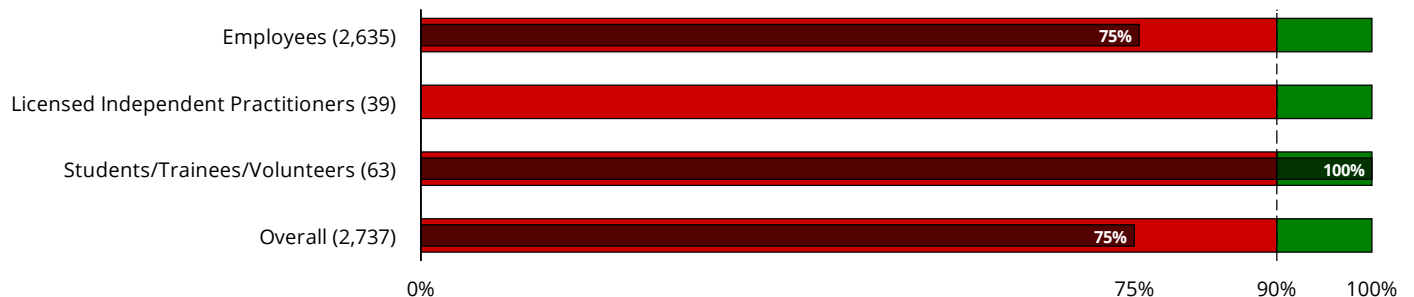
**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at Blount Memorial Hospital*

### Healthcare Personnel Influenza Vaccination - '2018/2019' Influenza Season

#### Healthcare Personnel Category (Total)



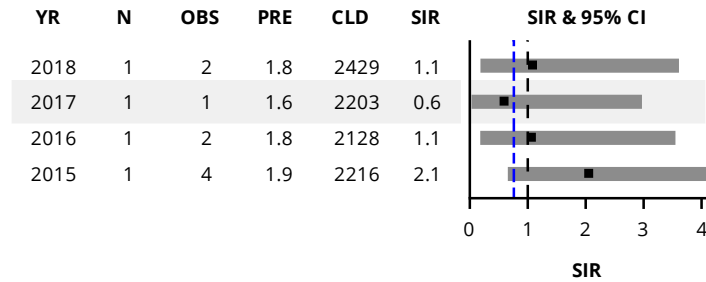
#### Healthcare Personnel Vaccinated (%)

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

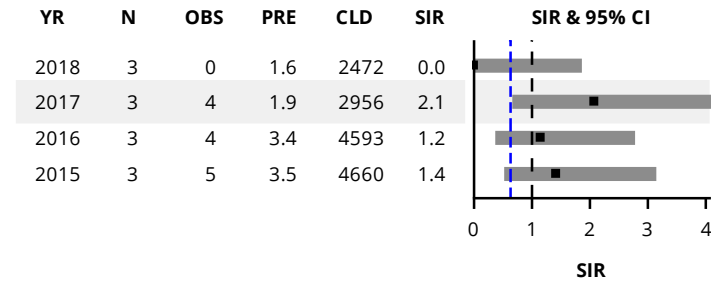


### Central Line-Associated Bloodstream Infections (CLABSI)

#### CLABSI - Adult/Pediatric ICUs

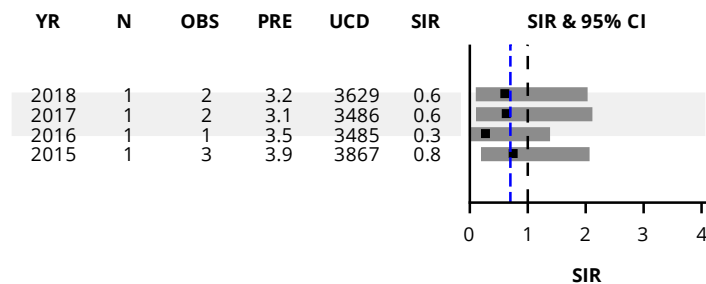


#### CLABSI - Adult/Pediatric Wards

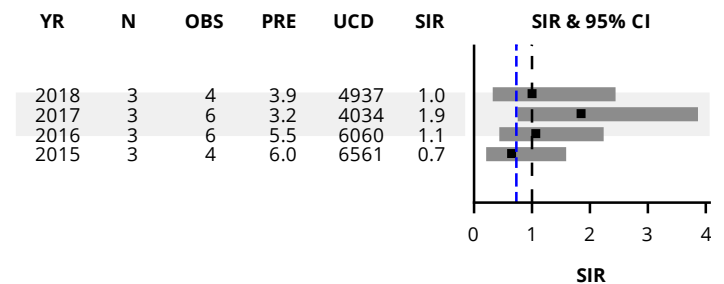


### Catheter-Associated Urinary Tract Infections (CAUTI)

#### CAUTI - Adult/Pediatric ICUs

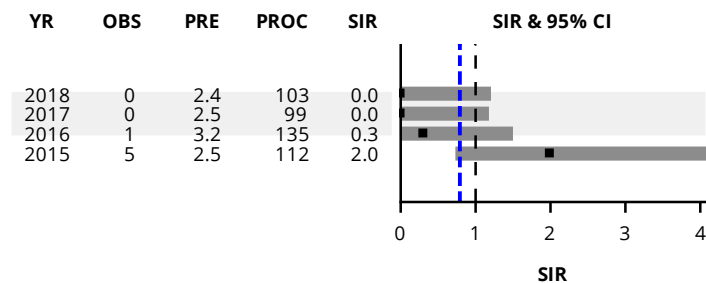


#### CAUTI - Adult/Pediatric Wards

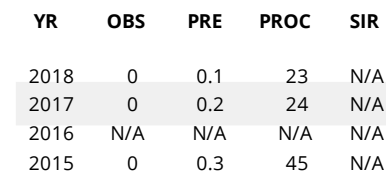


### Surgical Site Infections (SSI)

#### SSI - Colon Surgery



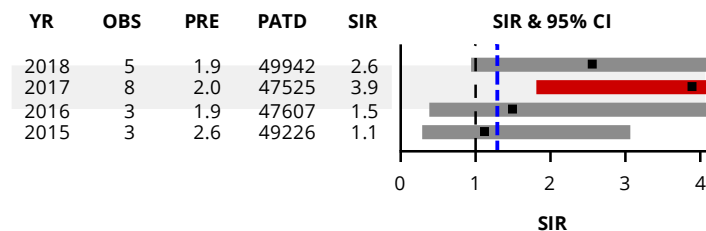
#### SSI - Abdominal Hysterectomy



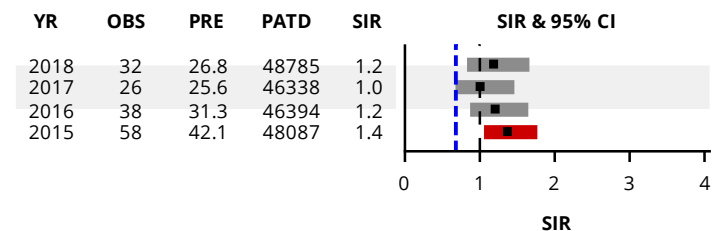
N/A: Number of predicted infections <1; no SIR calculated

### Healthcare Facility-Onset Laboratory Identified (LabID) Events

#### LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia



#### LabID - *C. difficile* Infection (CDI)



Data reported as of August 27, 2019

YR = reporting year; N = number of units reporting (CLABSI/CAUTI); OBS = observed number of infections

PRE = statistically 'predicted' number of infections, based on NHSN national baseline data

SIR = standardized infection ratio (observed/predicted number of infections)

CLD = central line days; UCD = urinary catheter days; PROC = procedures performed; PATD = patient days;

N/A = data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

■ Significantly lower than NHSN SIR of 1

■ Not significantly different from NHSN SIR of 1

■ Significantly higher than NHSN SIR of 1

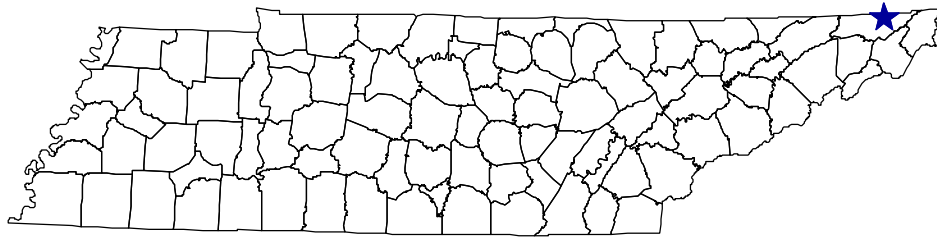
--- 2018 TN SIR

--- NHSN SIR=1

**Bristol Regional Medical Center, Bristol, Sullivan County**

Medical School Affiliation: Major teaching

Bed Size Category: 100-399 beds



**Healthcare-Associated Infections (HAI) Summary**

**Standardized Infection Ratio (SIR) by Infection Type, 01/01/2017-12/31/2017**

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		
		Observed	Predicted		SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	4	4.3	3866	0.92	( 0.29, 2.21 )	0.85
	Adult/Pediatric Ward	2	5.1	5277	0.39	( 0.07, 1.28 )	0.68
CAUTI	Adult/Pediatric ICU	10	10.1	7773	0.99	( 0.50, 1.76 )	0.71
	Adult/Pediatric Ward	6	9.0	7813	0.66	( 0.27, 1.37 )	0.72
SSI	Colon surgery	1	3.2	146	0.31	( 0.02, 1.51 )	0.83
	Abdominal hysterectomy	0	0.4	76	<b>N/A</b>	<b>N/A</b>	1.08
LabID	MRSA bacteremia	6	5.2	73134	1.14	( 0.46, 2.37 )	1.09
	C. difficile infection	57	38.1	70403	<b>1.50</b>	<b>( 1.14, 1.92 )</b>	0.83

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at Bristol Regional Medical Center*

**Healthcare Personnel Influenza Vaccination - '2017/2018' Influenza Season**

**Healthcare Personnel Category (Total)**



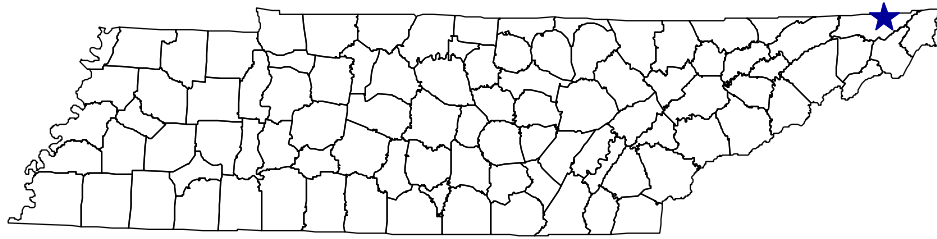
**Healthcare Personnel Vaccinated (%)**

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

## Bristol Regional Medical Center, Bristol, Sullivan County

Medical School Affiliation: Major teaching

Bed Size Category: 100-399 beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2018-12/31/2018

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		
		Observed	Predicted		SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	3	4.5	4043	0.66	( 0.17, 1.79 )	0.76
	Adult/Pediatric Ward	2	5.7	5919	0.35	( 0.06, 1.15 )	0.63
CAUTI	Adult/Pediatric ICU	10	8.8	6768	1.13	( 0.58, 2.02 )	0.70
	Adult/Pediatric Ward	3	7.5	6529	0.40	( 0.10, 1.08 )	0.73
SSI	Colon surgery	1	3.3	158	0.30	( 0.02, 1.46 )	0.79
	Abdominal hysterectomy	1	0.5	71	N/A	N/A	0.78
LabID	MRSA bacteremia	8	5.1	75009	1.56	( 0.72, 2.96 )	1.29
	C. difficile infection	34	42.5	72464	0.80	( 0.56, 1.10 )	0.68

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

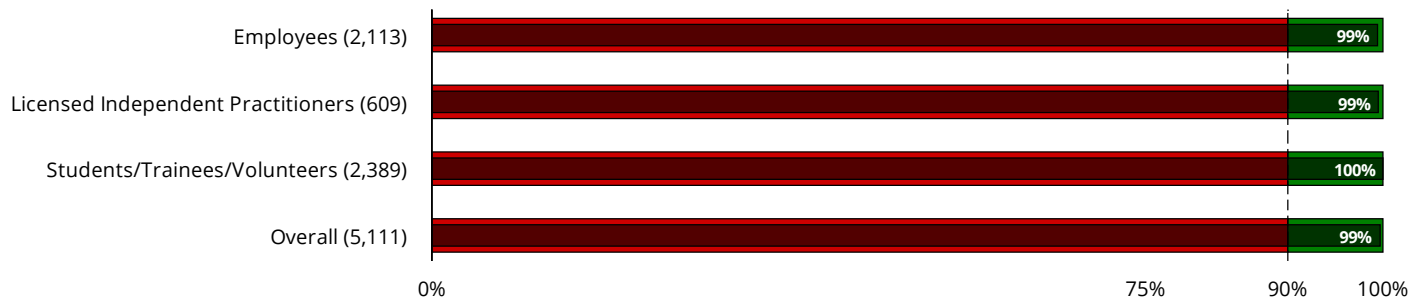
**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at Bristol Regional Medical Center*

### Healthcare Personnel Influenza Vaccination - '2018/2019' Influenza Season

#### Healthcare Personnel Category (Total)

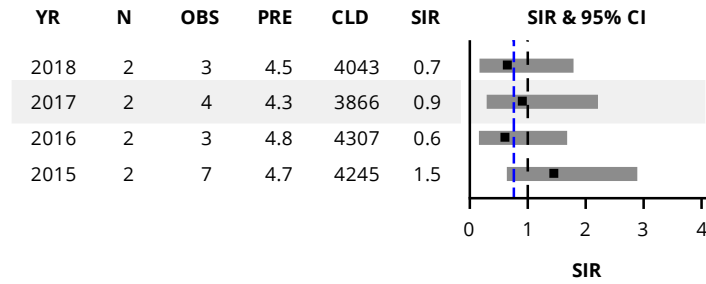


#### Healthcare Personnel Vaccinated (%)

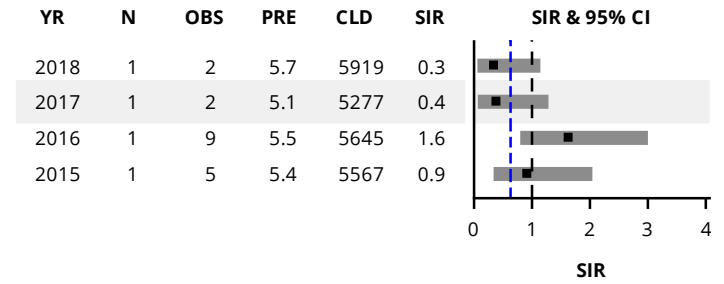
■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

### Central Line-Associated Bloodstream Infections (CLABSI)

#### CLABSI - Adult/Pediatric ICUs

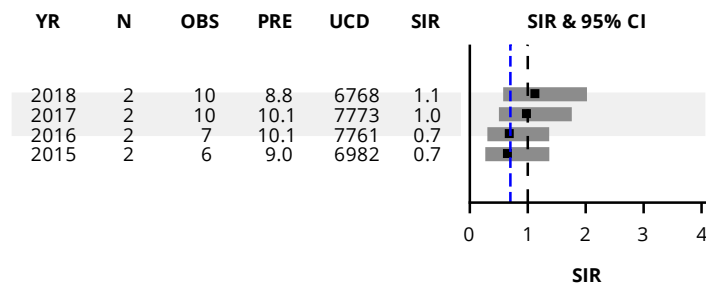


#### CLABSI - Adult/Pediatric Wards

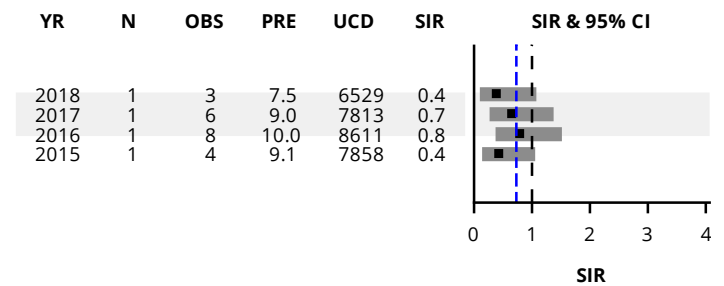


### Catheter-Associated Urinary Tract Infections (CAUTI)

#### CAUTI - Adult/Pediatric ICUs

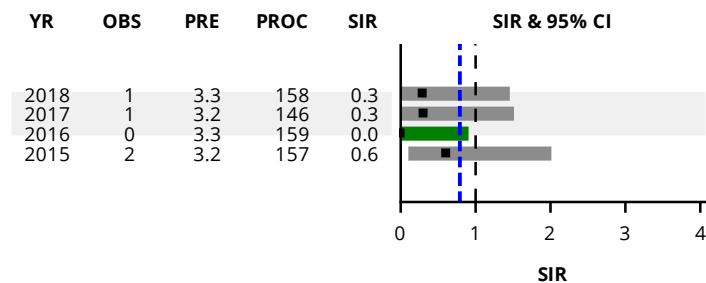


#### CAUTI - Adult/Pediatric Wards

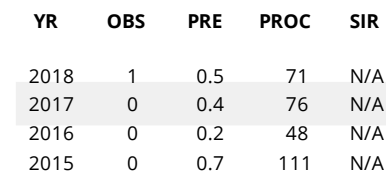


### Surgical Site Infections (SSI)

#### SSI - Colon Surgery



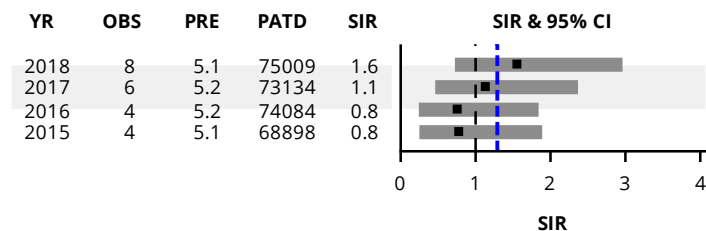
#### SSI - Abdominal Hysterectomy



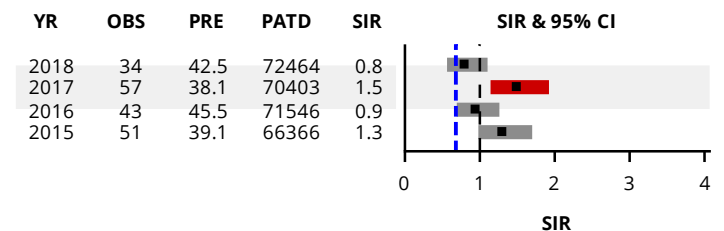
N/A: Number of predicted infections <1; no SIR calculated

### Healthcare Facility-Onset Laboratory Identified (LabID) Events

#### LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia



#### LabID - *C. difficile* Infection (CDI)



Data reported as of August 27, 2019

YR = reporting year; N = number of units reporting (CLABSI/CAUTI); OBS = observed number of infections

PRE = statistically 'predicted' number of infections, based on NHSN national baseline data

SIR = standardized infection ratio (observed/predicted number of infections)

CLD = central line days; UCD = urinary catheter days; PROC = procedures performed; PATD = patient days;

N/A = data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

■ Significantly lower than NHSN SIR of 1

■ Not significantly different from NHSN SIR of 1

■ Significantly higher than NHSN SIR of 1

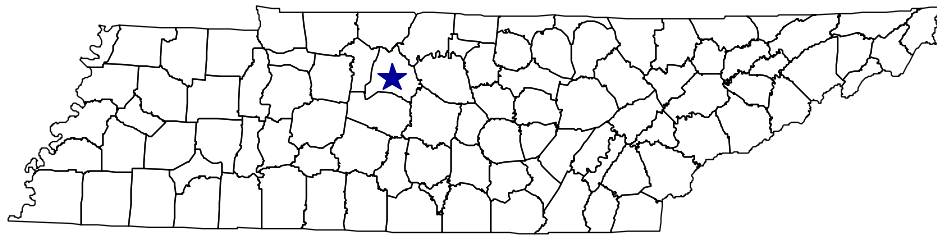
--- 2018 TN SIR

--- NHSN SIR=1

## Centennial Medical Center, Nashville, Davidson County

Medical School Affiliation: Graduate teaching

Bed Size Category: 400+ beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2017-12/31/2017

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		TN SIR
		Observed	Predicted		SIR*	95% CI	
CLABSI	Adult/Pediatric ICU	9	11.6	11483	0.77	( 0.38, 1.42 )	0.85
	Neonatal ICU	6	4.1	2941	1.46	( 0.59, 3.03 )	0.75
	Adult/Pediatric Ward	5	7.9	9105	0.63	( 0.23, 1.40 )	0.68
CAUTI	Adult/Pediatric ICU	12	14.5	11238	0.83	( 0.45, 1.41 )	0.71
	Adult/Pediatric Ward	6	7.4	8003	0.81	( 0.33, 1.68 )	0.72
SSI	Colon surgery	14	7.2	303	<b>1.93</b>	<b>( 1.10, 3.16 )</b>	0.83
	Abdominal hysterectomy	16	6.5	1278	<b>2.45</b>	<b>( 1.45, 3.90 )</b>	1.08
LabID	MRSA bacteremia	13	13.8	147103	0.94	( 0.52, 1.56 )	1.09
	C. difficile infection	116	97.7	121653	1.19	( 0.99, 1.42 )	0.83

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

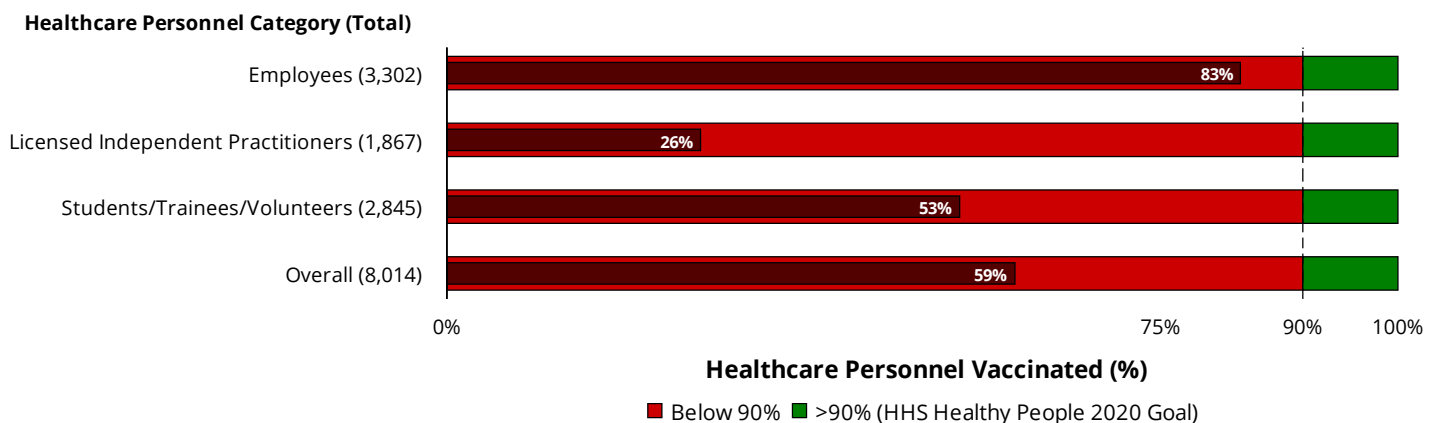
**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at Centennial Medical Center*

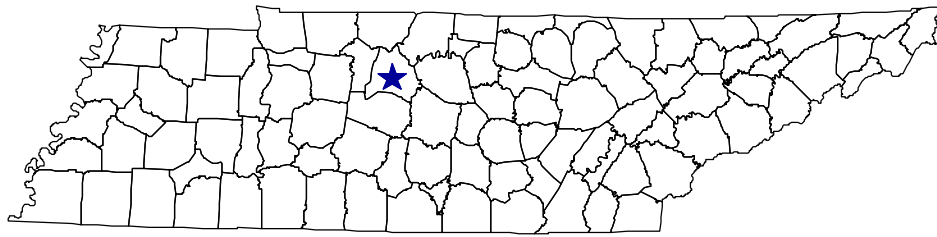
### Healthcare Personnel Influenza Vaccination - '2017/2018' Influenza Season



## Centennial Medical Center, Nashville, Davidson County

Medical School Affiliation: Graduate teaching

Bed Size Category: 400+ beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2018-12/31/2018

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		
		Observed	Predicted		SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	10	11.7	11591	0.85	( 0.43, 1.52 )	0.76
	Neonatal ICU	6	5.6	3797	1.07	( 0.43, 2.22 )	0.79
	Adult/Pediatric Ward	8	5.1	5929	1.55	( 0.72, 2.94 )	0.63
CAUTI	Adult/Pediatric ICU	8	13.3	10462	0.60	( 0.28, 1.14 )	0.70
	Adult/Pediatric Ward	2	5.5	5935	0.36	( 0.06, 1.19 )	0.73
SSI	Colon surgery	8	10.1	369	0.79	( 0.37, 1.49 )	0.79
	Abdominal hysterectomy	6	5.9	1108	1.01	( 0.41, 2.10 )	0.78
LabID	MRSA bacteremia	15	13.2	148917	1.13	( 0.66, 1.82 )	1.29
	C. difficile infection	45	85.3	124014	<b>0.53</b>	<b>( 0.39, 0.70 )</b>	0.68

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

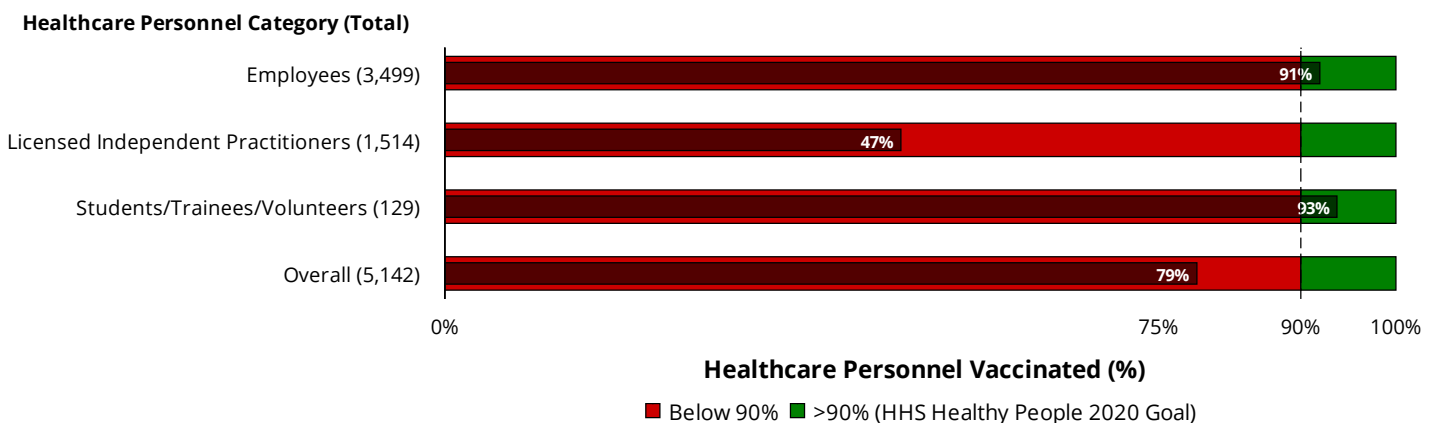
**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

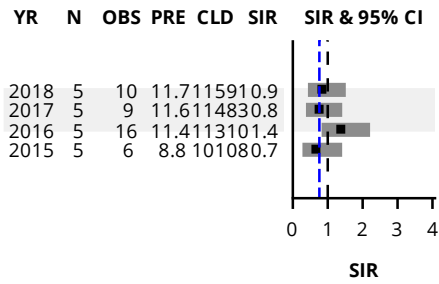
*See page 3 for more detailed information about HAIs at Centennial Medical Center*

### Healthcare Personnel Influenza Vaccination - '2018/2019' Influenza Season

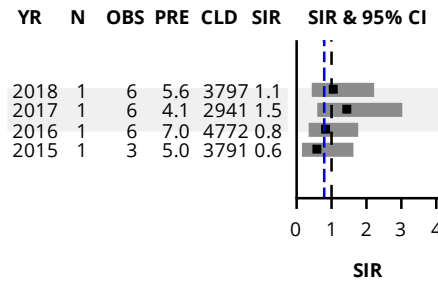


### Central Line-Associated Bloodstream Infections (CLABSI)

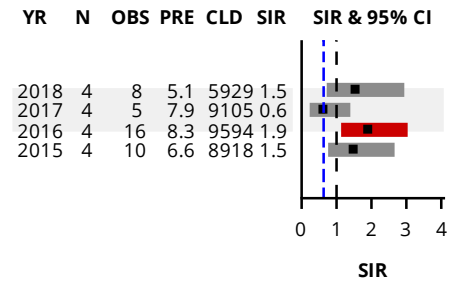
#### CLABSI - Adult/Pediatric ICUs



#### CLABSI - Neonatal ICUs

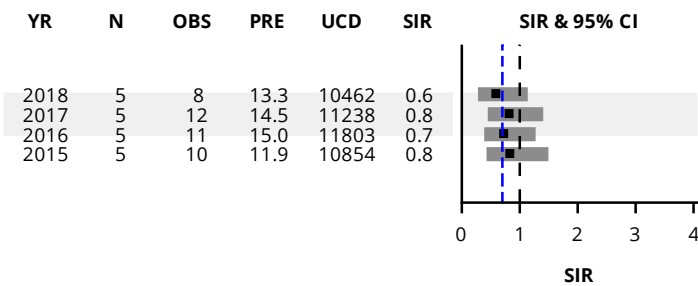


#### CLABSI - Adult/Pediatric Wards

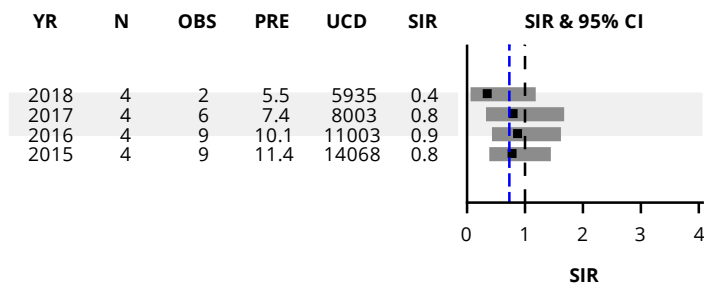


### Catheter-Associated Urinary Tract Infections (CAUTI)

#### CAUTI - Adult/Pediatric ICUs

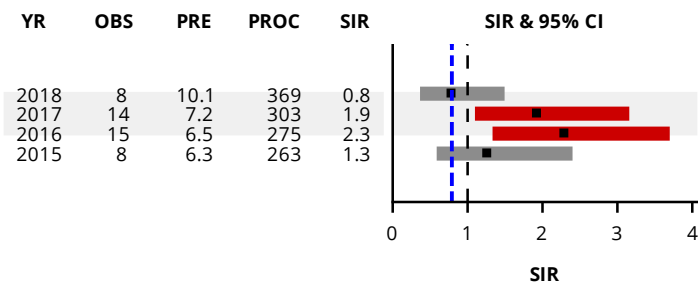


#### CAUTI - Adult/Pediatric Wards

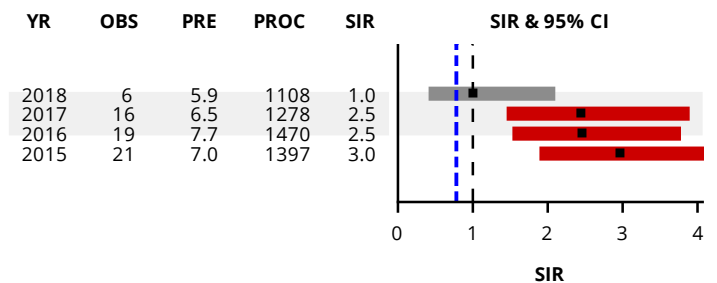


### Surgical Site Infections (SSI)

#### SSI - Colon Surgery

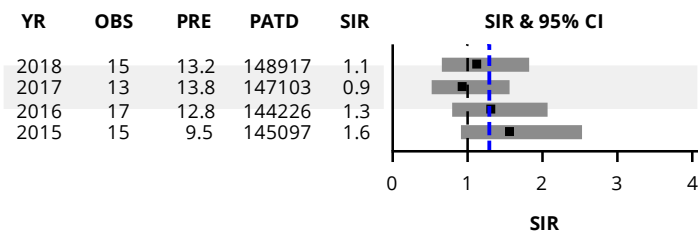


#### SSI - Abdominal Hysterectomy

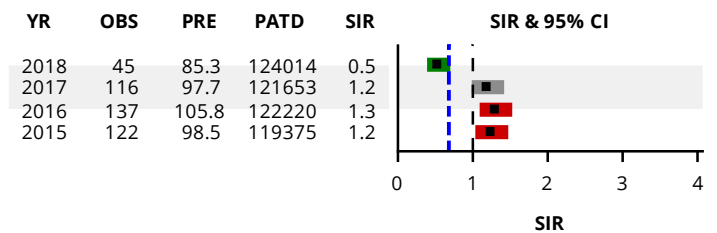


### Healthcare Facility-Onset Laboratory Identified (LabID) Events

#### LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia



#### LabID - *C. difficile* Infection (CDI)



Data reported as of August 27, 2019

YR = reporting year; N = number of units reporting (CLABSI/CAUTI); OBS = observed number of infections

PRE = statistically 'predicted' number of infections, based on NHSN national baseline data

SIR = standardized infection ratio (observed/predicted number of infections)

CLD = central line days; UCD = urinary catheter days; PROC = procedures performed; PATD = patient days;

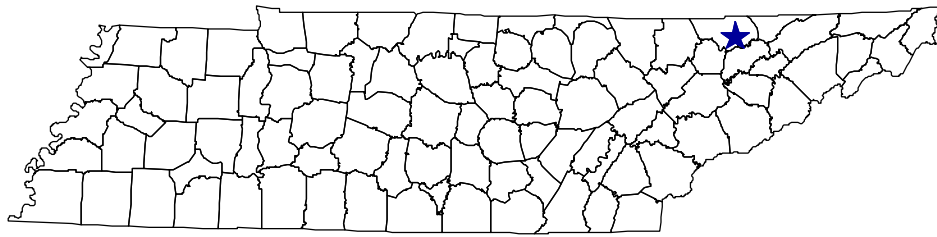
N/A = data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

- Significantly lower than NHSN SIR of 1
- Not significantly different from NHSN SIR of 1
- Significantly higher than NHSN SIR of 1
- - - 2018 TN SIR
- - - NHSN SIR=1

**Claiborne Medical Center, Tazewell, Claiborne County**

Medical School Affiliation: Undergraduate teaching

Bed Size Category: <50 beds



**Healthcare-Associated Infections (HAI) Summary**

**Standardized Infection Ratio (SIR) by Infection Type, 01/01/2017-12/31/2017**

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days/Procedures Performed/Patient Days	SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	0	0.0	83	N/A	N/A	0.85
	Adult/Pediatric Ward	0	0.0	160	N/A	N/A	0.68
CAUTI	Adult/Pediatric ICU	0	0.1	326	N/A	N/A	0.71
	Adult/Pediatric Ward	0	0.2	487	N/A	N/A	0.72
SSI	Colon surgery	0	0.3	23	N/A	N/A	0.83
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	1.08
LabID	MRSA bacteremia	0	0.1	4854	N/A	N/A	1.09
	C. difficile infection	0	1.5	4854	0.00	( 0.00, 1.91 )	0.83

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

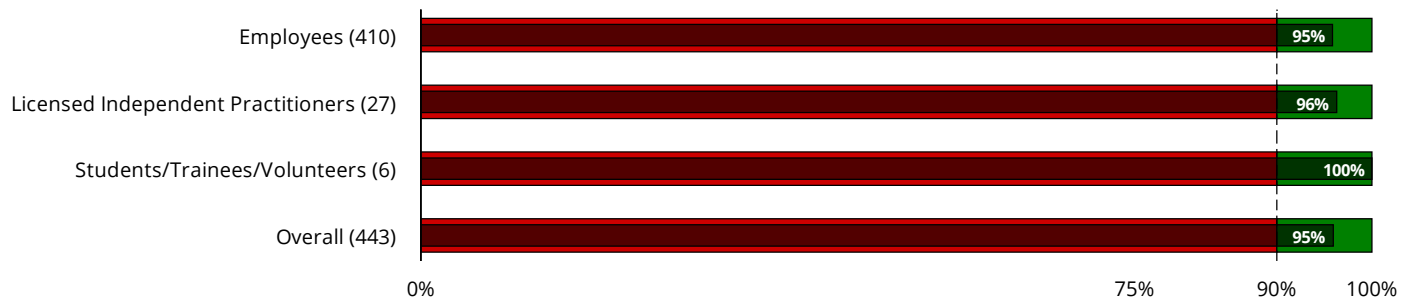
**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

**See page 3 for more detailed information about HAIs at Claiborne Medical Center**

**Healthcare Personnel Influenza Vaccination - '2017/2018' Influenza Season**

**Healthcare Personnel Category (Total)**



**Healthcare Personnel Vaccinated (%)**

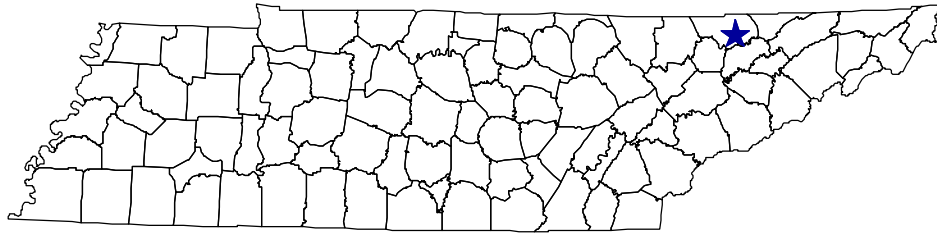
■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)



**Claiborne Medical Center, Tazewell, Claiborne County**

Medical School Affiliation: None

Bed Size Category: <50 beds



**Healthcare-Associated Infections (HAI) Summary**

**Standardized Infection Ratio (SIR) by Infection Type, 01/01/2018-12/31/2018**

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days/Procedures Performed/Patient Days	SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	0	0.0	113	N/A	N/A	0.76
	Adult/Pediatric Ward	1	0.1	303	N/A	N/A	0.63
CAUTI	Adult/Pediatric ICU	0	0.1	272	N/A	N/A	0.70
	Adult/Pediatric Ward	0	0.2	368	N/A	N/A	0.73
SSI	Colon surgery	N/A	N/A	N/A	N/A	N/A	0.79
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	0.78
LabID	MRSA bacteremia	0	0.1	5051	N/A	N/A	1.29
	C. difficile infection	0	1.7	5051	0.00	( 0.00, 1.75 )	0.68

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at Claiborne Medical Center*

**Healthcare Personnel Influenza Vaccination - '2018/2019' Influenza Season**

**Healthcare Personnel Category (Total)**



**Healthcare Personnel Vaccinated (%)**

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric ICUs

YR	N	OBS	PRE	CLD	SIR
2018	1	0	0.0	113	N/A
2017	1	0	0.0	83	N/A
2016	1	0	0.0	146	N/A
2015	1	0	0.1	151	N/A

N/A: Number of predicted infections <1; no SIR calculated

CLABSI - Adult/Pediatric Wards

YR	N	OBS	PRE	CLD	SIR
2018	2	1	0.1	303	N/A
2017	2	0	0.0	160	N/A
2016	2	0	0.1	304	N/A
2015	2	0	0.1	240	N/A

N/A: Number of predicted infections <1; no SIR calculated

Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICUs

YR	N	OBS	PRE	UCD	SIR
2018	1	0	0.1	272	N/A
2017	1	0	0.1	326	N/A
2016	1	0	0.2	498	N/A
2015	1	1	0.2	535	N/A

N/A: Number of predicted infections <1; no SIR calculated

CAUTI - Adult/Pediatric Wards

YR	N	OBS	PRE	UCD	SIR
2018	2	0	0.2	368	N/A
2017	2	0	0.2	487	N/A
2016	2	0	0.2	525	N/A
2015	2	1	0.4	827	N/A

N/A: Number of predicted infections <1; no SIR calculated

Surgical Site Infections (SSI)

SSI - Colon Surgery

YR	OBS	PRE	PROC	SIR
2018	N/A	N/A	N/A	N/A
2017	0	0.3	23	N/A
2016	N/A	N/A	N/A	N/A
2015	0	0.3	22	N/A

N/A: Number of predicted infections <1; no SIR calculated

SSI - Abdominal Hysterectomy

YR	OBS	PRE	PROC	SIR
2018	N/A	N/A	N/A	N/A
2017	N/A	N/A	N/A	N/A
2016	N/A	N/A	N/A	N/A
2015	N/A	N/A	N/A	N/A

N/A: Number of predicted infections <1; no SIR calculated

Healthcare Facility-Onset Laboratory Identified (LabID) Events

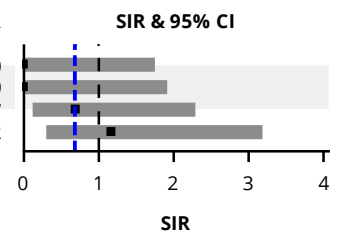
LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia

YR	OBS	PRE	PATD	SIR
2018	0	0.1	5051	N/A
2017	0	0.1	4854	N/A
2016	1	0.1	5314	N/A
2015	0	0.1	5729	N/A

N/A: Number of predicted infections <1; no SIR calculated

LabID - *C. difficile* Infection (CDI)

YR	OBS	PRE	PATD	SIR
2018	0	1.7	5051	0.0
2017	0	1.5	4854	0.0
2016	2	2.8	5314	0.7
2015	3	2.5	5729	1.2



Data reported as of August 27, 2019

YR = reporting year; N = number of units reporting (CLABSI/CAUTI); OBS = observed number of infections

PRE = statistically 'predicted' number of infections, based on NHSN national baseline data

SIR = standardized infection ratio (observed/predicted number of infections)

CLD = central line days; UCD = urinary catheter days; PROC = procedures performed; PATD = patient days;

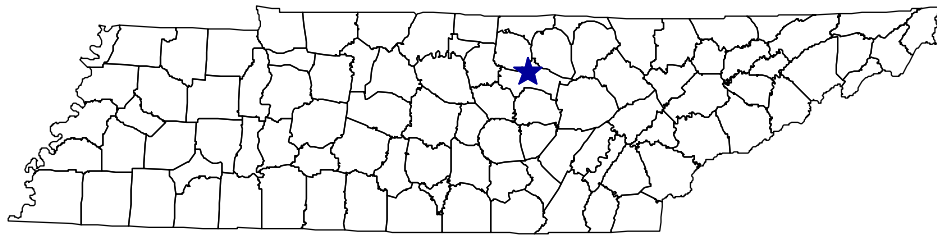
N/A = data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

- Significantly lower than NHSN SIR of 1
- Not significantly different from NHSN SIR of 1
- Significantly higher than NHSN SIR of 1
- - - 2018 TN SIR
- - - NHSN SIR=1

**Cookeville Regional Medical Center, Cookeville, Putnam County**

Medical School Affiliation: Undergraduate teaching

Bed Size Category: 100-399 beds



**Healthcare-Associated Infections (HAI) Summary**

**Standardized Infection Ratio (SIR) by Infection Type, 01/01/2017-12/31/2017**

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		
		Observed	Predicted		SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	4	4.0	4641	0.99	( 0.32, 2.40 )	0.85
	Adult/Pediatric Ward	1	3.5	4770	0.28	( 0.01, 1.38 )	0.68
CAUTI	Adult/Pediatric ICU	0	6.1	6872	<b>0.00</b>	<b>( 0.00, 0.49 )</b>	0.71
	Adult/Pediatric Ward	3	10.4	12619	<b>0.29</b>	<b>( 0.07, 0.78 )</b>	0.72
SSI	Colon surgery	0	1.5	74	0.00	( 0.00, 1.96 )	0.83
	Abdominal hysterectomy	N/A	N/A	N/A	<b>N/A</b>	<b>N/A</b>	1.08
LabID	MRSA bacteremia	3	3.3	55776	0.89	( 0.23, 2.41 )	1.09
	C. difficile infection	58	48.3	52843	1.20	( 0.92, 1.54 )	0.83

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

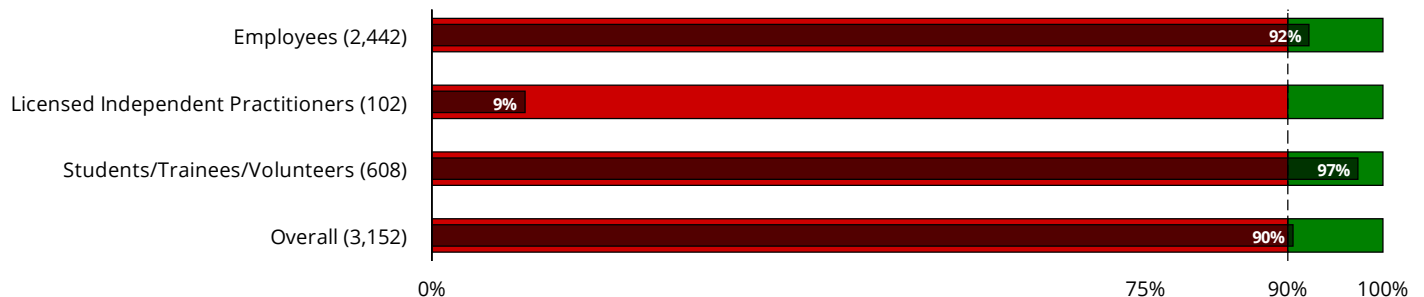
**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at Cookeville Regional Medical Center*

**Healthcare Personnel Influenza Vaccination - '2017/2018' Influenza Season**

**Healthcare Personnel Category (Total)**



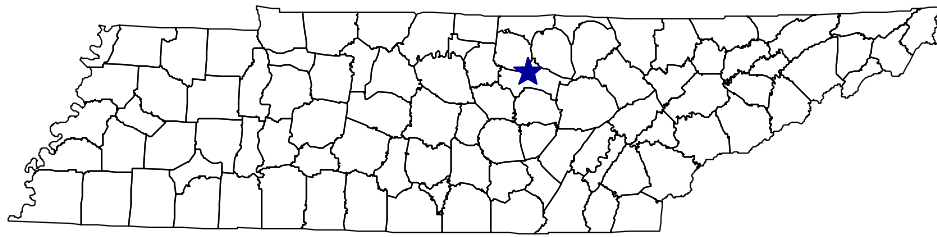
**Healthcare Personnel Vaccinated (%)**

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

**Cookeville Regional Medical Center, Cookeville, Putnam County**

Medical School Affiliation: Undergraduate teaching

Bed Size Category: 100-399 beds



**Healthcare-Associated Infections (HAI) Summary**

**Standardized Infection Ratio (SIR) by Infection Type, 01/01/2018-12/31/2018**

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		TN SIR
		Observed	Predicted		SIR*	95% CI	
CLABSI	Adult/Pediatric ICU	4	3.4	3997	1.15	( 0.37, 2.78 )	0.76
	Adult/Pediatric Ward	1	3.1	4212	0.32	( 0.02, 1.56 )	0.63
CAUTI	Adult/Pediatric ICU	1	6.5	7265	<b>0.15</b>	<b>( 0.01, 0.76 )</b>	0.70
	Adult/Pediatric Ward	4	11.2	13535	<b>0.36</b>	<b>( 0.11, 0.86 )</b>	0.73
SSI	Colon surgery	0	1.8	88	0.00	( 0.00, 1.64 )	0.79
	Abdominal hysterectomy	N/A	N/A	N/A	<b>N/A</b>	<b>N/A</b>	0.78
LabID	MRSA bacteremia	8	3.6	56648	<b>2.20</b>	<b>( 1.02, 4.17 )</b>	1.29
	C. difficile infection	54	42.2	53512	1.28	( 0.97, 1.65 )	0.68

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at Cookeville Regional Medical Center*

**Healthcare Personnel Influenza Vaccination - '2018/2019' Influenza Season**

**Healthcare Personnel Category (Total)**

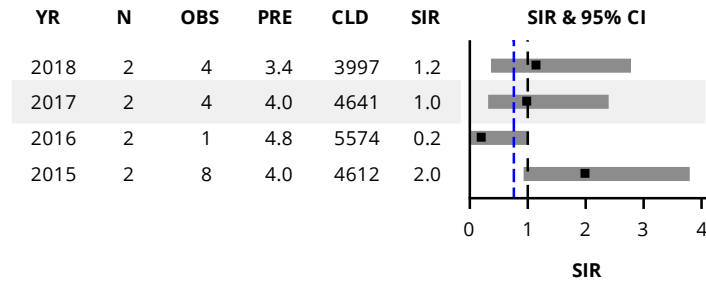


**Healthcare Personnel Vaccinated (%)**

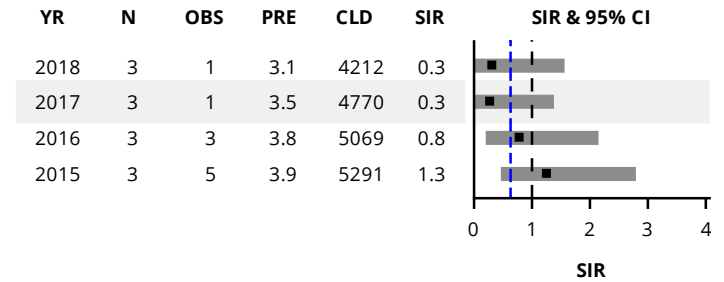
■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

### Central Line-Associated Bloodstream Infections (CLABSI)

#### CLABSI - Adult/Pediatric ICUs

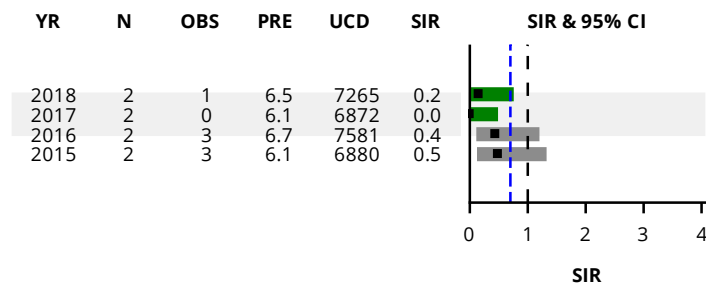


#### CLABSI - Adult/Pediatric Wards

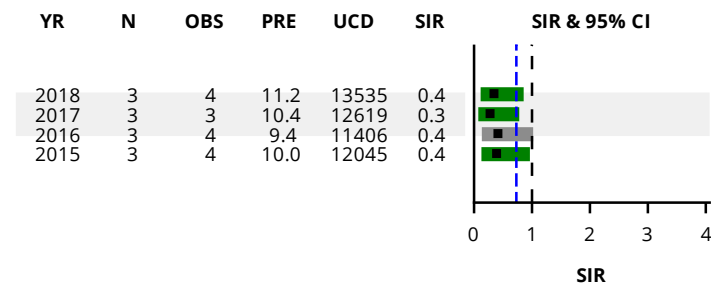


### Catheter-Associated Urinary Tract Infections (CAUTI)

#### CAUTI - Adult/Pediatric ICUs

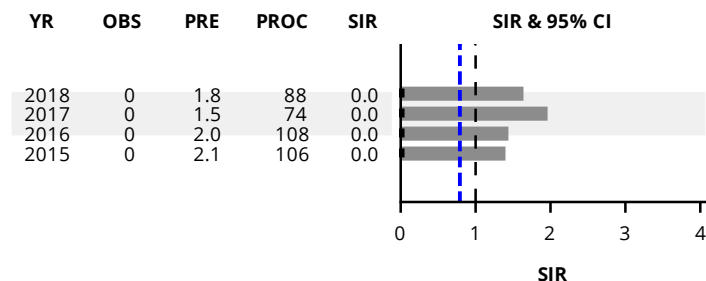


#### CAUTI - Adult/Pediatric Wards



### Surgical Site Infections (SSI)

#### SSI - Colon Surgery



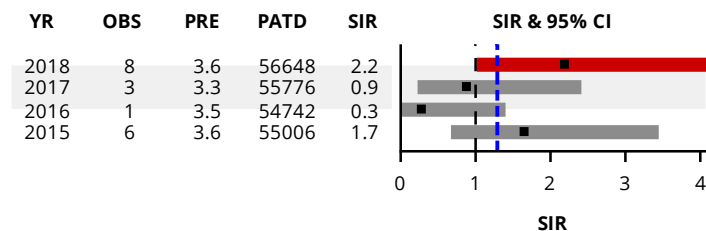
#### SSI - Abdominal Hysterectomy

YR	OBS	PRE	PROC	SIR
2018	N/A	N/A	N/A	N/A
2017	N/A	N/A	N/A	N/A
2016	N/A	N/A	N/A	N/A
2015	N/A	N/A	N/A	N/A

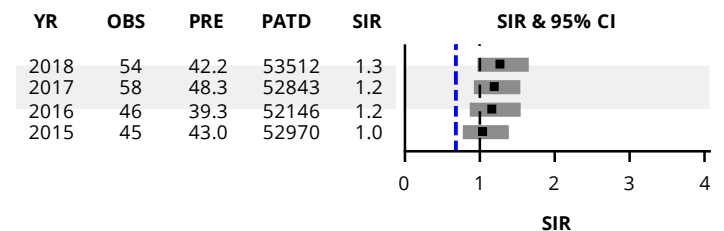
N/A: Number of predicted infections <1; no SIR calculated

### Healthcare Facility-Onset Laboratory Identified (LabID) Events

#### LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia



#### LabID - *C. difficile* Infection (CDI)



Data reported as of August 27, 2019

YR = reporting year; N = number of units reporting (CLABSI/CAUTI); OBS = observed number of infections

PRE = statistically 'predicted' number of infections, based on NHSN national baseline data

SIR = standardized infection ratio (observed/predicted number of infections)

CLD = central line days; UCD = urinary catheter days; PROC = procedures performed; PATD = patient days;

N/A = data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

■ Significantly lower than NHSN SIR of 1

■ Not significantly different from NHSN SIR of 1

■ Significantly higher than NHSN SIR of 1

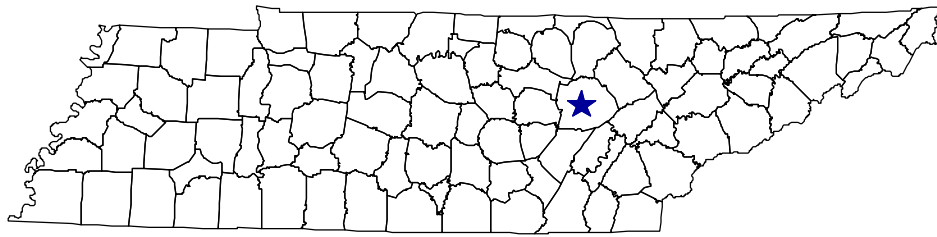
--- 2018 TN SIR

--- NHSN SIR=1

## Cumberland Medical Center, Crossville, Cumberland County

Medical School Affiliation: Major teaching

Bed Size Category: 100-399 beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2017-12/31/2017

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		
		Observed	Predicted		SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	1	0.7	814	N/A	N/A	0.85
	Adult/Pediatric Ward	0	0.8	999	N/A	N/A	0.68
CAUTI	Adult/Pediatric ICU	0	1.6	1538	0.00	( 0.00, 1.83 )	0.71
	Adult/Pediatric Ward	0	2.5	2560	0.00	( 0.00, 1.17 )	0.72
SSI	Colon surgery	0	0.5	26	N/A	N/A	0.83
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	1.08
LabID	MRSA bacteremia	1	0.9	18575	N/A	N/A	1.09
	C. difficile infection	8	15.7	17575	0.51	( 0.24, 0.96 )	0.83

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

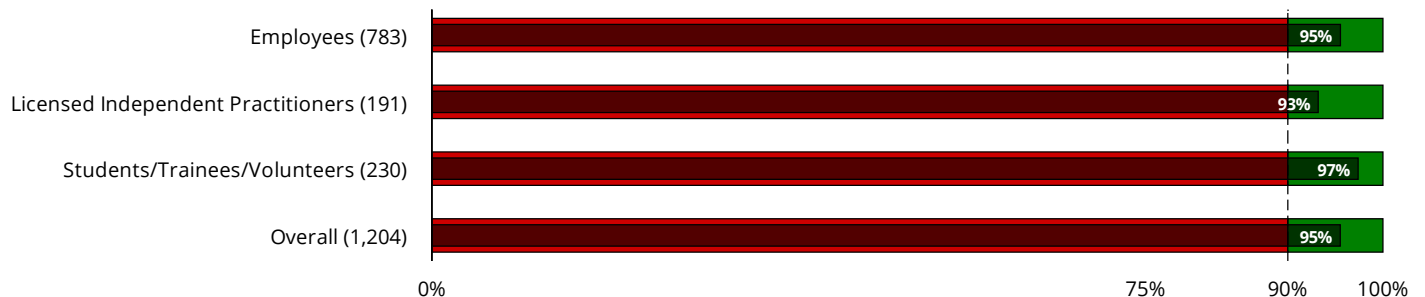
**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at Cumberland Medical Center*

### Healthcare Personnel Influenza Vaccination - '2017/2018' Influenza Season

#### Healthcare Personnel Category (Total)



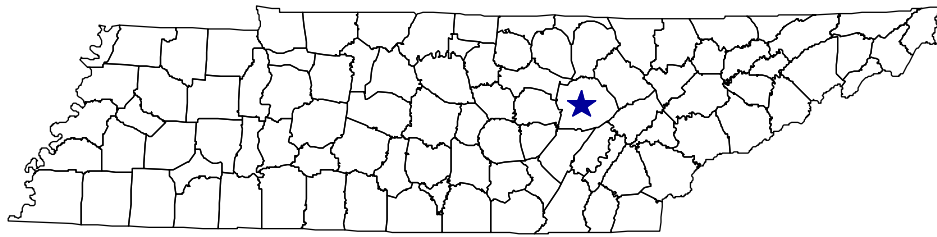
#### Healthcare Personnel Vaccinated (%)

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

## Cumberland Medical Center, Crossville, Cumberland County

Medical School Affiliation: None

Bed Size Category: 50-99 beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2018-12/31/2018

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		
		Observed	Predicted		SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	1	0.6	913	N/A	N/A	0.76
	Adult/Pediatric Ward	0	0.5	971	N/A	N/A	0.63
CAUTI	Adult/Pediatric ICU	1	0.8	1467	N/A	N/A	0.70
	Adult/Pediatric Ward	0	0.9	1896	N/A	N/A	0.73
SSI	Colon surgery	0	0.4	24	N/A	N/A	0.79
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	0.78
LabID	MRSA bacteremia	0	0.9	18003	N/A	N/A	1.29
	C. difficile infection	2	7.5	16889	0.27	(0.05, 0.88)	0.68

Green highlighting indicates an SIR significantly LOWER than the 2015 national baseline

Red highlighting indicates an SIR significantly HIGHER than the 2015 national baseline

N/A: Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

See page 3 for more detailed information about HAIs at Cumberland Medical Center

### Healthcare Personnel Influenza Vaccination - '2018/2019' Influenza Season

#### Healthcare Personnel Category (Total)



#### Healthcare Personnel Vaccinated (%)

Below 90% >90% (HHS Healthy People 2020 Goal)

Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric ICUs

YR	N	OBS	PRE	CLD	SIR
2018	1	1	0.6	913	N/A
2017	1	1	0.7	814	N/A
2016	1	0	0.7	933	N/A
2015	1	2	0.8	1101	N/A

N/A: Number of predicted infections <1; no SIR calculated

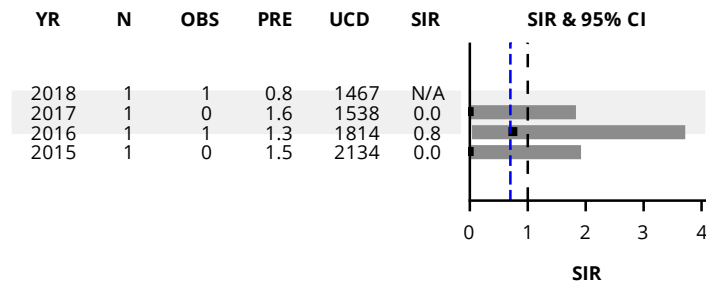
CLABSI - Adult/Pediatric Wards

YR	N	OBS	PRE	CLD	SIR
2018	2	0	0.5	971	N/A
2017	2	0	0.8	999	N/A
2016	2	0	0.8	1332	N/A
2015	2	0	1.0	1675	0.0

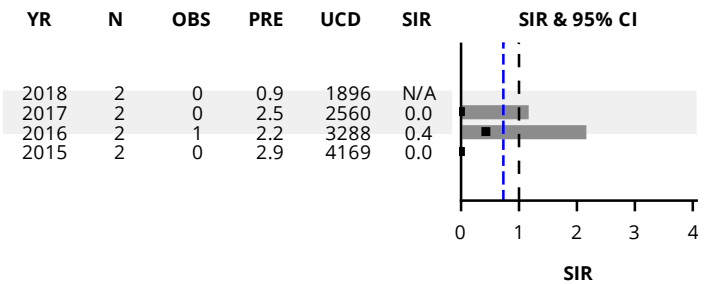
N/A: Number of predicted infections <1; no SIR calculated

Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICUs



CAUTI - Adult/Pediatric Wards



Surgical Site Infections (SSI)

SSI - Colon Surgery

YR	OBS	PRE	PROC	SIR
2018	0	0.4	24	N/A
2017	0	0.5	26	N/A
2016	0	0.7	34	N/A
2015	1	0.7	33	N/A

N/A: Number of predicted infections <1; no SIR calculated

SSI - Abdominal Hysterectomy

YR	OBS	PRE	PROC	SIR
2018	N/A	N/A	N/A	N/A
2017	N/A	N/A	N/A	N/A
2016	N/A	N/A	N/A	N/A
2015	N/A	N/A	N/A	N/A

N/A: Number of predicted infections <1; no SIR calculated

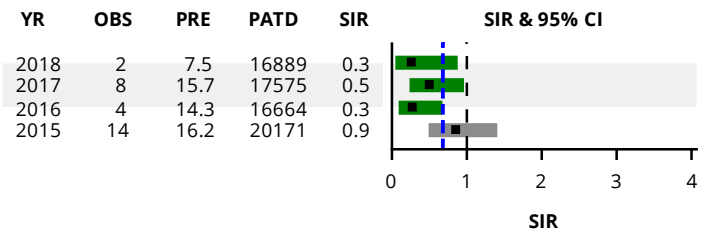
Healthcare Facility-Onset Laboratory Identified (LabID) Events

LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia

YR	OBS	PRE	PATD	SIR
2018	0	0.9	18003	N/A
2017	1	0.9	18575	N/A
2016	0	0.9	18292	N/A
2015	3	1.1	21298	2.6

N/A: Number of predicted infections <1; no SIR calculated

LabID - *C. difficile* Infection (CDI)



Data reported as of August 27, 2019

YR = reporting year; N = number of units reporting (CLABSI/CAUTI); OBS = observed number of infections

PRE = statistically 'predicted' number of infections, based on NHSN national baseline data

SIR = standardized infection ratio (observed/predicted number of infections)

CLD = central line days; UCD = urinary catheter days; PROC = procedures performed; PATD = patient days;

N/A = data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

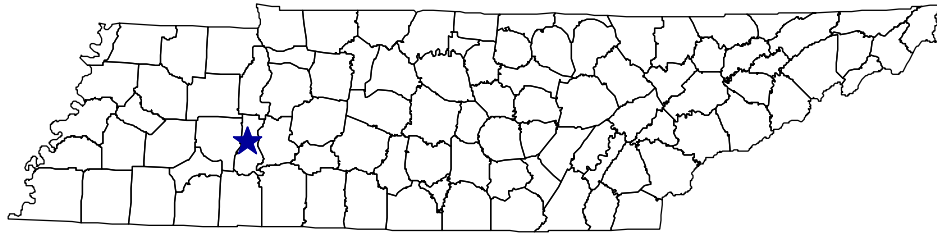
- Significantly lower than NHSN SIR of 1
- Not significantly different from NHSN SIR of 1
- Significantly higher than NHSN SIR of 1
- - - 2018 TN SIR
- - - NHSN SIR=1



## Decatur County General Hospital, Parsons, Decatur County

Medical School Affiliation: None

Bed Size Category: <50 beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2017-12/31/2017

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		
		Observed	Predicted		SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric Ward	N/A	N/A	N/A	N/A	N/A	0.68
CAUTI	Adult/Pediatric Ward	1	0.1	239	N/A	N/A	0.72
LabID	MRSA bacteremia	0	0.0	1317	N/A	N/A	1.09
	C. difficile infection	1	0.2	1233	N/A	N/A	0.83

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

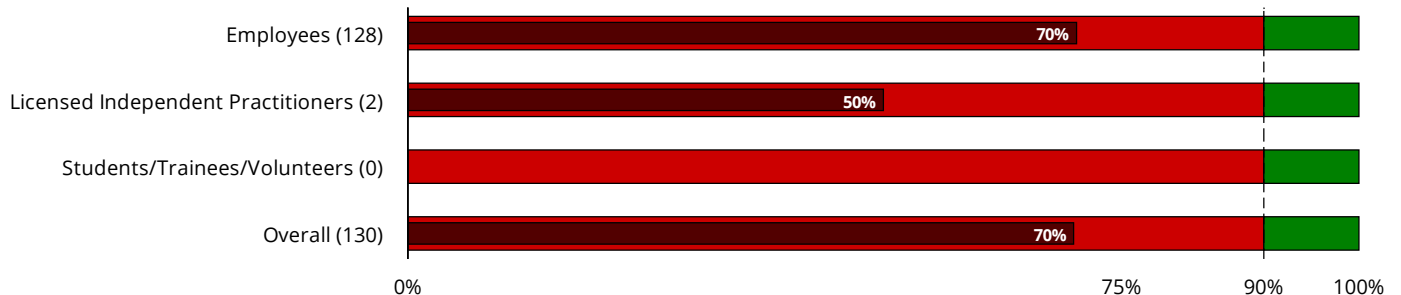
**N/A**: Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at Decatur County General Hospital*

### Healthcare Personnel Influenza Vaccination - '2017/2018' Influenza Season

#### Healthcare Personnel Category (Total)



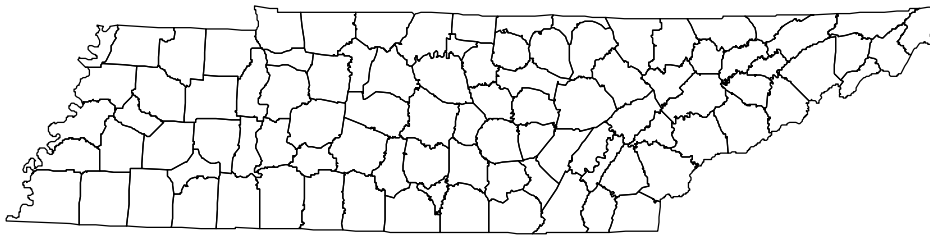
#### Healthcare Personnel Vaccinated (%)

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

**Decatur County General Hospital, , County**

Medical School Affiliation:

Bed Size Category:



**Healthcare-Associated Infections (HAI) Summary**

**Standardized Infection Ratio (SIR) by Infection Type, 01/01/2018-12/31/2018**

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		
		Observed	Predicted		SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric Ward	N/A	N/A	N/A	N/A	N/A	0.63
CAUTI	Adult/Pediatric Ward	0	0.0	189	N/A	N/A	0.73
LabID	MRSA bacteremia	0	0.0	728	N/A	N/A	1.29
	C. difficile infection	0	0.1	728	N/A	N/A	0.68

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

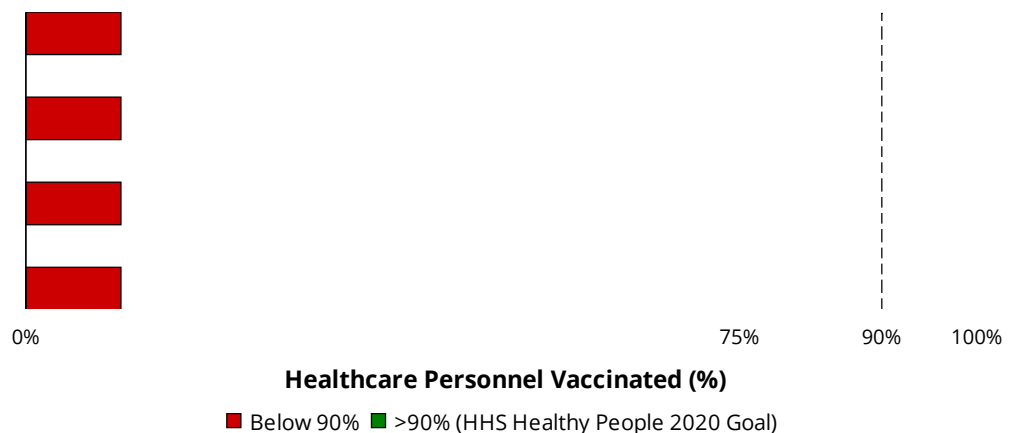
**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

**See page 3 for more detailed information about HAIs at Decatur County General Hospital**

**Healthcare Personnel Influenza Vaccination - '2018/2019' Influenza Season**



Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric Wards

YR	N	OBS	PRE	CLD	SIR
2018	1	N/A	N/A	N/A	N/A
2017	1	N/A	N/A	N/A	N/A
2016	1	0	0.0	61	N/A
2015	1	N/A	N/A	N/A	N/A

N/A: Number of predicted infections <1; no SIR calculated

Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric Wards

YR	N	OBS	PRE	UCD	SIR
2018	1	0	0.0	189	N/A
2017	1	1	0.1	239	N/A
2016	1	0	0.2	471	N/A
2015	1	1	0.2	459	N/A

N/A: Number of predicted infections <1; no SIR calculated

Healthcare Facility-Onset Laboratory Identified (LabID) Events

LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia

YR	OBS	PRE	PATD	SIR
2018	0	0.0	728	N/A
2017	0	0.0	1317	N/A
2016	0	0.0	1893	N/A
2015	0	0.0	2295	N/A

N/A: Number of predicted infections <1; no SIR calculated

LabID - *C. difficile* Infection (CDI)

YR	OBS	PRE	PATD	SIR
2018	0	0.1	728	N/A
2017	1	0.2	1233	N/A
2016	1	0.5	1893	N/A
2015	1	0.6	2295	N/A

N/A: Number of predicted infections <1; no SIR calculated

Data reported as of August 27, 2019

YR = reporting year; N = number of units reporting (CLABSI/CAUTI); OBS = observed number of infections

PRE = statistically 'predicted' number of infections, based on NHSN national baseline data

SIR = standardized infection ratio (observed/predicted number of infections)

CLD = central line days; UCD = urinary catheter days; PROC = procedures performed; PATD = patient days;

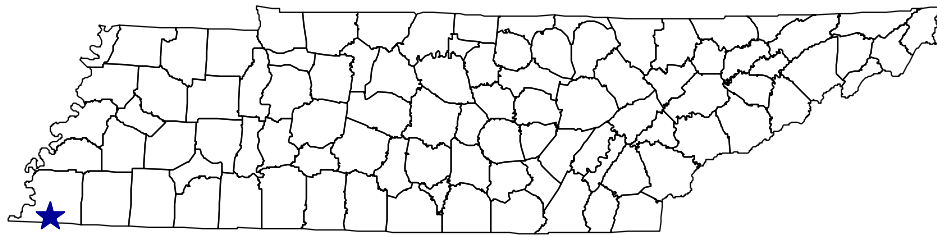
N/A = data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

- Significantly lower than NHSN SIR of 1
- Not significantly different from NHSN SIR of 1
- Significantly higher than NHSN SIR of 1
- 2018 TN SIR
- NHSN SIR=1

## Delta Medical Center, Memphis, Shelby County

Medical School Affiliation: None

Bed Size Category: 100-399 beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2017-12/31/2017

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		
		Observed	Predicted		SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric Ward	N/A	N/A	N/A	N/A	N/A	0.68
CAUTI	Adult/Pediatric Ward	0	0.0	140	N/A	N/A	0.72
SSI	Colon surgery	N/A	N/A	N/A	N/A	N/A	0.83
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	1.08
LabID	MRSA bacteremia	0	0.4	29372	N/A	N/A	1.09
	C. difficile infection	0	3.7	29372	0.00	(0.00, 0.79)	0.83

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

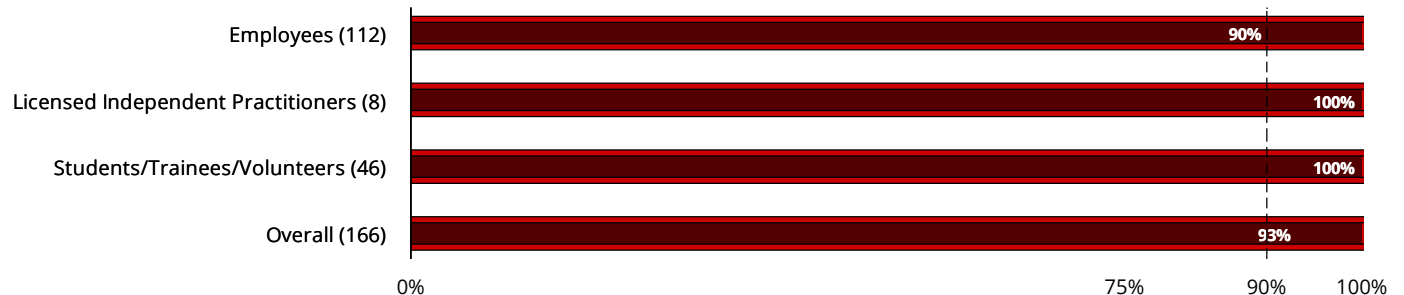
**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at Delta Medical Center*

### Healthcare Personnel Influenza Vaccination - '2017/2018' Influenza Season

#### Healthcare Personnel Category (Total)



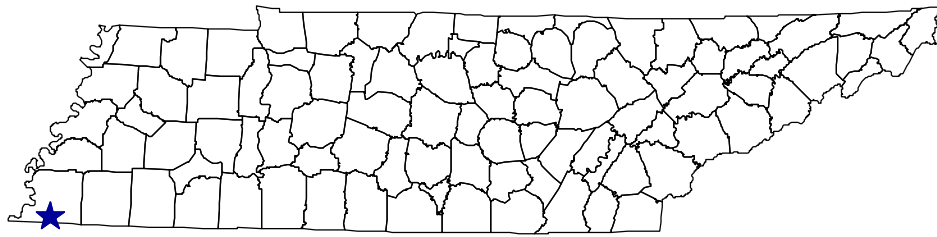
#### Healthcare Personnel Vaccinated (%)

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

## Delta Medical Center, Memphis, Shelby County

Medical School Affiliation: None

Bed Size Category: 100-399 beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2018-12/31/2018

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		
		Observed	Predicted		SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric Ward	0	0.0	140	N/A	N/A	0.63
CAUTI	Adult/Pediatric Ward	0	0.0	68	N/A	N/A	0.73
SSI	Colon surgery	N/A	N/A	N/A	N/A	N/A	0.79
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	0.78
LabID	MRSA bacteremia	0	0.0	1296	N/A	N/A	1.29
	C. difficile infection	0	0.1	1296	N/A	N/A	0.68

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at Delta Medical Center*

### Healthcare Personnel Influenza Vaccination - '2018/2019' Influenza Season

#### Healthcare Personnel Category (Total)



#### Healthcare Personnel Vaccinated (%)

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric Wards

YR	N	OBS	PRE	CLD	SIR
2018	1	0	0.0	140	N/A
2017	1	N/A	N/A	N/A	N/A
2016	1	0	0.2	358	N/A
2015	1	2	0.5	883	N/A

N/A: Number of predicted infections <1; no SIR calculated

Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric Wards

YR	N	OBS	PRE	UCD	SIR
2018	1	0	0.0	68	N/A
2017	1	0	0.0	140	N/A
2016	1	1	0.2	309	N/A
2015	1	1	0.3	609	N/A

N/A: Number of predicted infections <1; no SIR calculated

Surgical Site Infections (SSI)

SSI - Colon Surgery

YR	OBS	PRE	PROC	SIR
2018	N/A	N/A	N/A	N/A
2017	N/A	N/A	N/A	N/A
2016	N/A	N/A	N/A	N/A
2015	N/A	N/A	N/A	N/A

N/A: Number of predicted infections <1; no SIR calculated

SSI - Abdominal Hysterectomy

YR	OBS	PRE	PROC	SIR
2018	N/A	N/A	N/A	N/A
2017	N/A	N/A	N/A	N/A
2016	N/A	N/A	N/A	N/A
2015	N/A	N/A	N/A	N/A

N/A: Number of predicted infections <1; no SIR calculated

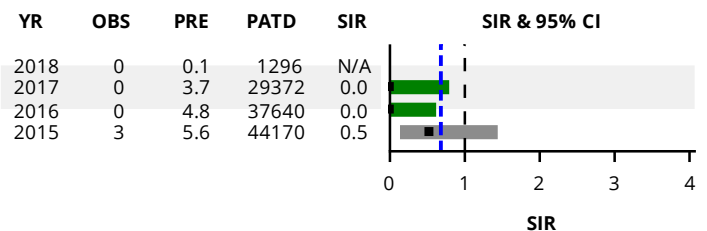
Healthcare Facility-Onset Laboratory Identified (LabID) Events

LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia

YR	OBS	PRE	PATD	SIR
2018	0	0.0	1296	N/A
2017	0	0.4	29372	N/A
2016	0	0.5	37640	N/A
2015	0	0.6	44170	N/A

N/A: Number of predicted infections <1; no SIR calculated

LabID - *C. difficile* Infection (CDI)



Data reported as of August 27, 2019

YR = reporting year; N = number of units reporting (CLABSI/CAUTI); OBS = observed number of infections

PRE = statistically 'predicted' number of infections, based on NHSN national baseline data

SIR = standardized infection ratio (observed/predicted number of infections)

CLD = central line days; UCD = urinary catheter days; PROC = procedures performed; PATD = patient days;

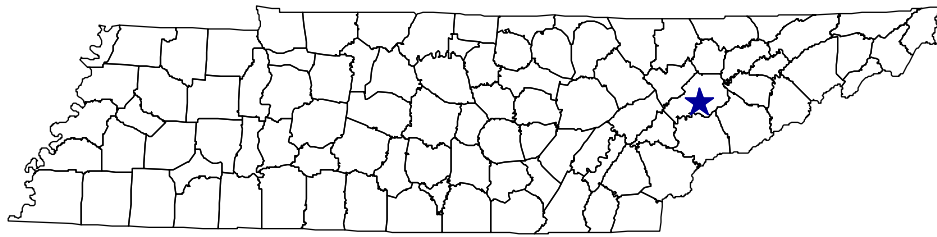
N/A = data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

- Significantly lower than NHSN SIR of 1
- Not significantly different from NHSN SIR of 1
- Significantly higher than NHSN SIR of 1
- - - 2018 TN SIR
- - - NHSN SIR=1

## East Tennessee Children's Hospital, Knoxville, Knox County

Medical School Affiliation: None

Bed Size Category: 100-399 beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2017-12/31/2017

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		TN SIR
		Observed	Predicted		SIR*	95% CI	
CLABSI	Adult/Pediatric ICU	1	1.4	1288	0.70	( 0.04, 3.45 )	0.85
	Neonatal ICU	2	2.5	2300	0.80	( 0.13, 2.63 )	0.75
	Adult/Pediatric Ward	0	3.1	4113	<b>0.00</b>	<b>( 0.00, 0.97 )</b>	0.68
CAUTI	Adult/Pediatric ICU	1	0.6	576	N/A	N/A	0.71
	Adult/Pediatric Ward	0	0.2	371	N/A	N/A	0.72
SSI	Colon surgery	N/A	N/A	N/A	N/A	N/A	0.83
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	1.08
LabID	MRSA bacteremia	3	1.1	32953	2.59	( 0.66, 7.04 )	1.09
	C. difficile infection	14	12.7	18510	1.10	( 0.62, 1.80 )	0.83

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at East Tennessee Children's Hospital*

### Healthcare Personnel Influenza Vaccination - '2017/2018' Influenza Season

#### Healthcare Personnel Category (Total)



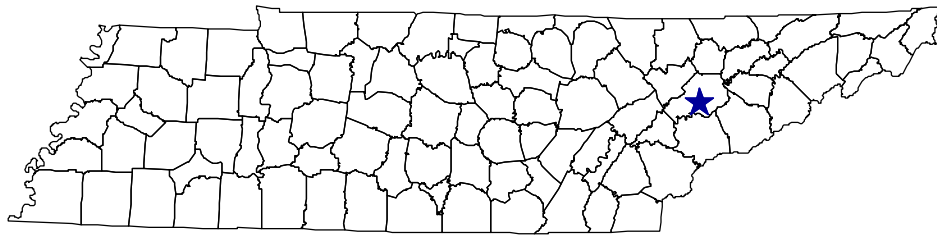
#### Healthcare Personnel Vaccinated (%)

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

## East Tennessee Children's Hospital, Knoxville, Knox County

Medical School Affiliation: Graduate teaching

Bed Size Category: 100-399 beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2018-12/31/2018

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		TN SIR
		Observed	Predicted		SIR*	95% CI	
CLABSI	Adult/Pediatric ICU	1	2.0	1556	0.50	( 0.03, 2.46 )	0.76
	Neonatal ICU	1	2.5	2287	0.40	( 0.02, 1.96 )	0.79
	Adult/Pediatric Ward	1	4.1	4730	0.24	( 0.01, 1.19 )	0.63
CAUTI	Adult/Pediatric ICU	1	0.6	578	N/A	N/A	0.70
	Adult/Pediatric Ward	1	0.4	495	N/A	N/A	0.73
SSI	Colon surgery	N/A	N/A	N/A	N/A	N/A	0.79
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	0.78
LabID	MRSA bacteremia	0	1.2	34420	0.00	( 0.00, 2.39 )	1.29
	C. difficile infection	10	11.2	18541	0.89	( 0.45, 1.59 )	0.68

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

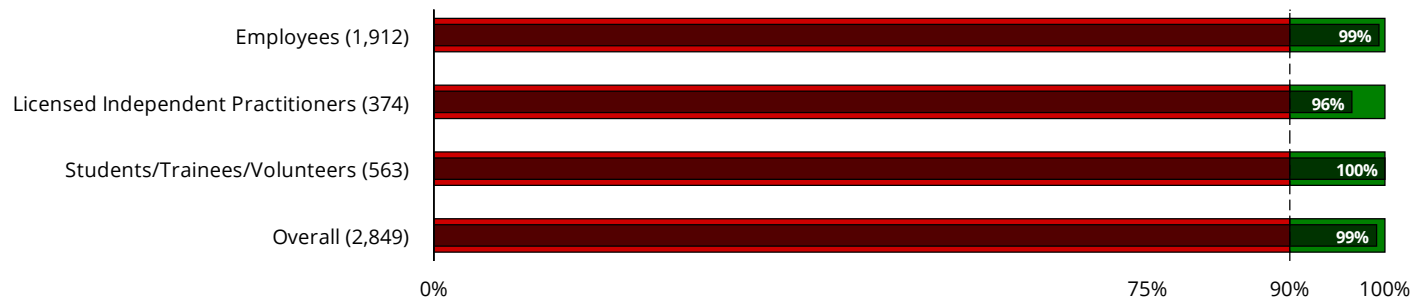
**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at East Tennessee Children's Hospital*

### Healthcare Personnel Influenza Vaccination - '2018/2019' Influenza Season

#### Healthcare Personnel Category (Total)



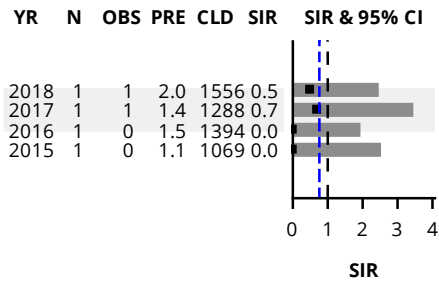
#### Healthcare Personnel Vaccinated (%)

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

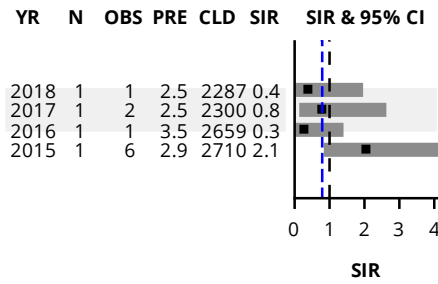


Central Line-Associated Bloodstream Infections (CLABSI)

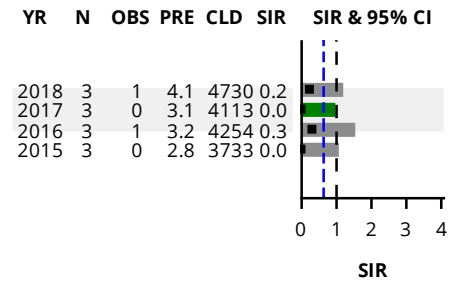
CLABSI - Adult/Pediatric ICUs



CLABSI - Neonatal ICUs



CLABSI - Adult/Pediatric Wards



Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICUs

YR	N	OBS	PRE	UCD	SIR
2018	1	1	0.6	578	N/A
2017	1	1	0.6	576	N/A
2016	1	1	0.7	731	N/A
2015	1	0	0.4	457	N/A

CAUTI - Adult/Pediatric Wards

YR	N	OBS	PRE	UCD	SIR
2018	3	1	0.4	495	N/A
2017	3	0	0.2	371	N/A
2016	3	0	0.3	453	N/A
2015	3	0	0.3	519	N/A

N/A: Number of predicted infections <1; no SIR calculated

N/A: Number of predicted infections <1; no SIR calculated

Surgical Site Infections (SSI)

SSI - Colon Surgery

YR	OBS	PRE	PROC	SIR
2018	N/A	N/A	N/A	N/A
2017	N/A	N/A	N/A	N/A
2016	N/A	N/A	N/A	N/A
2015	N/A	N/A	N/A	N/A

SSI - Abdominal Hysterectomy

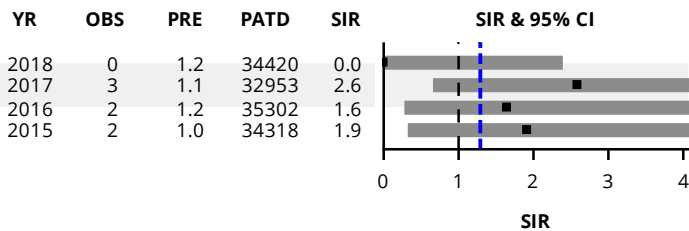
YR	OBS	PRE	PROC	SIR
2018	N/A	N/A	N/A	N/A
2017	N/A	N/A	N/A	N/A
2016	N/A	N/A	N/A	N/A
2015	N/A	N/A	N/A	N/A

N/A: Number of predicted infections <1; no SIR calculated

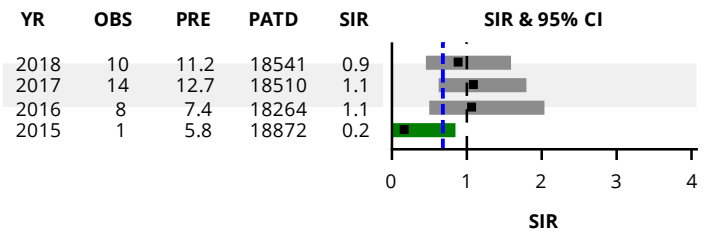
N/A: Number of predicted infections <1; no SIR calculated

Healthcare Facility-Onset Laboratory Identified (LabID) Events

LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia



LabID - *C. difficile* Infection (CDI)



Data reported as of August 27, 2019

YR = reporting year; N = number of units reporting (CLABSI/CAUTI); OBS = observed number of infections

PRE = statistically 'predicted' number of infections, based on NHSN national baseline data

SIR = standardized infection ratio (observed/predicted number of infections)

CLD = central line days; UCD = urinary catheter days; PROC = procedures performed; PATD = patient days;

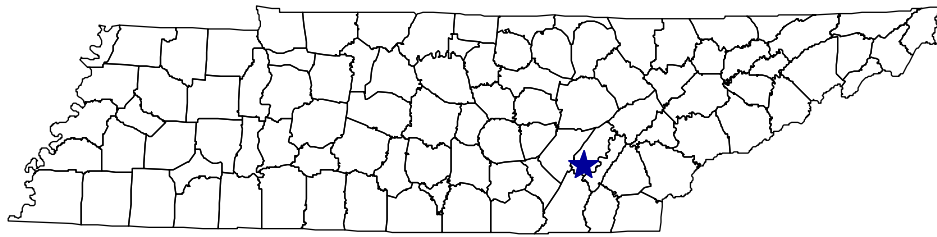
N/A = data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

- Significantly lower than NHSN SIR of 1
- Not significantly different from NHSN SIR of 1
- Significantly higher than NHSN SIR of 1
- - - 2018 TN SIR
- - - NHSN SIR=1

## Erlanger East, Chattanooga, Hamilton County

Medical School Affiliation: None

Bed Size Category: 50-99 beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2017-12/31/2017

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		
		Observed	Predicted		SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric Ward	0	0.2	372	N/A	N/A	0.68
CAUTI	Adult/Pediatric Ward	1	0.3	492	N/A	N/A	0.72
SSI	Colon surgery	N/A	N/A	N/A	N/A	N/A	0.83
	Abdominal hysterectomy	3	1.1	249	2.70	( 0.69, 7.34 )	1.08
LabID	MRSA bacteremia	1	0.3	17988	N/A	N/A	1.09
	C. difficile infection	3	6.8	16535	0.44	( 0.11, 1.19 )	0.83

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at Erlanger East*

### Healthcare Personnel Influenza Vaccination - '2017/2018' Influenza Season

#### Healthcare Personnel Category (Total)



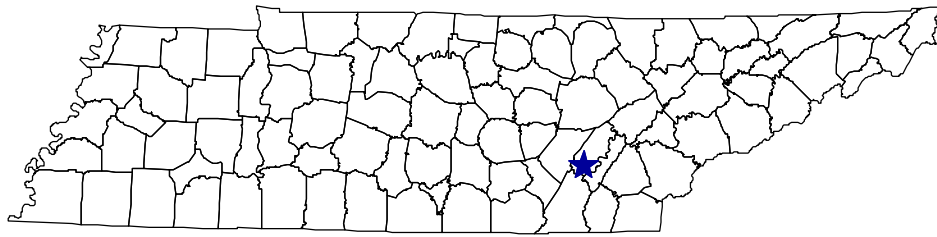
#### Healthcare Personnel Vaccinated (%)

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

## Erlanger East, Chattanooga, Hamilton County

Medical School Affiliation: None

Bed Size Category: 50-99 beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2018-12/31/2018

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		
		Observed	Predicted		SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric Ward	1	0.3	664	N/A	N/A	0.63
CAUTI	Adult/Pediatric Ward	0	0.5	892	N/A	N/A	0.73
SSI	Colon surgery	N/A	N/A	N/A	N/A	N/A	0.79
	Abdominal hysterectomy	3	0.8	200	N/A	N/A	0.78
LabID	MRSA bacteremia	1	0.9	25744	N/A	N/A	1.29
	C. difficile infection	3	12.5	21336	0.24	(0.06, 0.65)	0.68

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at Erlanger East*

### Healthcare Personnel Influenza Vaccination - '2018/2019' Influenza Season

#### Healthcare Personnel Category (Total)



#### Healthcare Personnel Vaccinated (%)

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric Wards

YR	N	OBS	PRE	CLD	SIR
2018	1	1	0.3	664	N/A
2017	1	0	0.2	372	N/A
2016	1	0	0.0	67	N/A
2015	1	N/A	N/A	N/A	N/A

N/A: Number of predicted infections <1; no SIR calculated

Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric Wards

YR	N	OBS	PRE	UCD	SIR
2018	1	0	0.5	892	N/A
2017	1	1	0.3	492	N/A
2016	1	1	0.0	139	N/A
2015	1	0	0.0	126	N/A

N/A: Number of predicted infections <1; no SIR calculated

Surgical Site Infections (SSI)

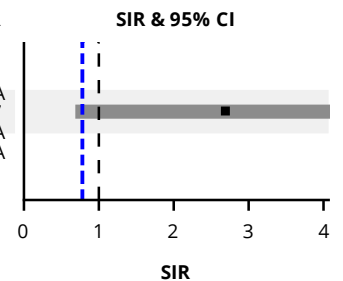
SSI - Colon Surgery

YR	OBS	PRE	PROC	SIR
2018	N/A	N/A	N/A	N/A
2017	N/A	N/A	N/A	N/A
2016	N/A	N/A	N/A	N/A
2015	N/A	N/A	N/A	N/A

N/A: Number of predicted infections <1; no SIR calculated

SSI - Abdominal Hysterectomy

YR	OBS	PRE	PROC	SIR
2018	3	0.8	200	N/A
2017	3	1.1	249	2.7
2016	0	0.9	233	N/A
2015	1	0.7	172	N/A



Healthcare Facility-Onset Laboratory Identified (LabID) Events

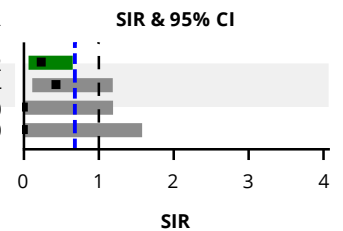
LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia

YR	OBS	PRE	PATD	SIR
2018	1	0.9	25744	N/A
2017	1	0.3	17988	N/A
2016	0	0.2	9507	N/A
2015	0	0.1	7379	N/A

N/A: Number of predicted infections <1; no SIR calculated

LabID - *C. difficile* Infection (CDI)

YR	OBS	PRE	PATD	SIR
2018	3	12.5	21336	0.2
2017	3	6.8	16535	0.4
2016	0	2.5	9322	0.0
2015	0	1.8	7379	0.0



Data reported as of August 27, 2019

YR = reporting year; N = number of units reporting (CLABSI/CAUTI); OBS = observed number of infections

PRE = statistically 'predicted' number of infections, based on NHSN national baseline data

SIR = standardized infection ratio (observed/predicted number of infections)

CLD = central line days; UCD = urinary catheter days; PROC = procedures performed; PATD = patient days;

N/A = data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

■ Significantly lower than NHSN SIR of 1

■ Not significantly different from NHSN SIR of 1

■ Significantly higher than NHSN SIR of 1

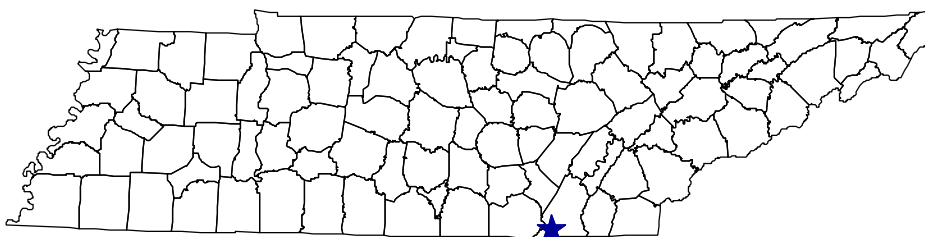
--- 2018 TN SIR

--- NHSN SIR=1

## Erlanger Medical Center, Chattanooga, Hamilton County

Medical School Affiliation: Major teaching

Bed Size Category: 400+ beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2017-12/31/2017

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		TN SIR
		Observed	Predicted		SIR*	95% CI	
CLABSI	Adult/Pediatric ICU	11	13.1	11439	0.84	( 0.44, 1.46 )	0.85
	Neonatal ICU	0	4.0	2533	<b>0.00</b>	<b>( 0.00, 0.74 )</b>	0.75
	Adult/Pediatric Ward	10	15.5	15890	0.64	( 0.33, 1.15 )	0.68
CAUTI	Adult/Pediatric ICU	16	27.3	14017	<b>0.59</b>	<b>( 0.35, 0.93 )</b>	0.71
	Adult/Pediatric Ward	9	8.5	7113	1.05	( 0.51, 1.93 )	0.72
SSI	Colon surgery	3	10.3	296	<b>0.29</b>	<b>( 0.07, 0.79 )</b>	0.83
	Abdominal hysterectomy	4	2.7	336	1.46	( 0.46, 3.52 )	1.08
LabID	MRSA bacteremia	20	12.9	167158	1.54	( 0.97, 2.34 )	1.09
	C. difficile infection	84	100.2	145590	0.84	( 0.67, 1.03 )	0.83

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

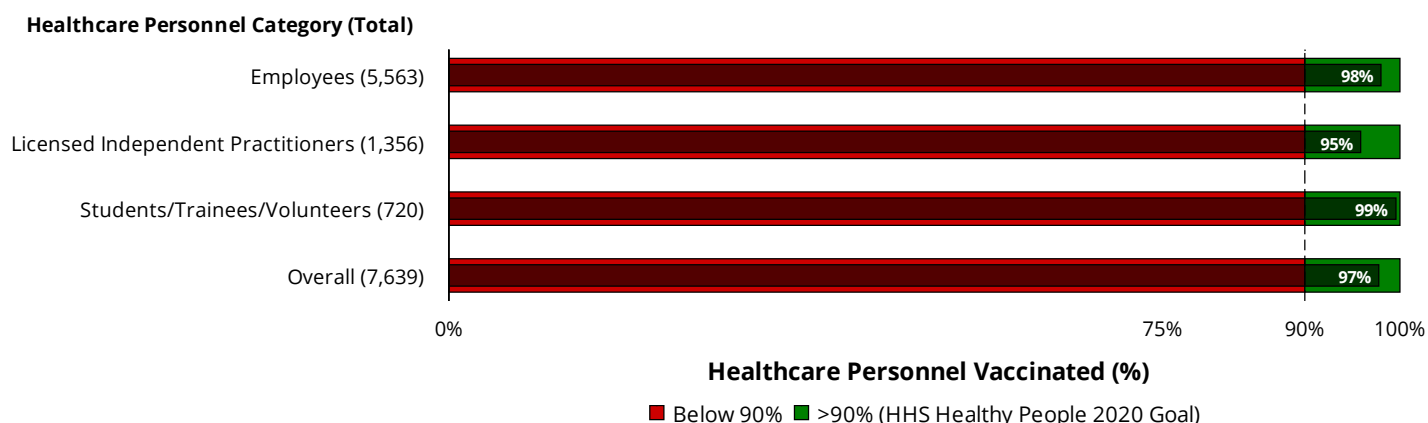
**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at Erlanger Medical Center*

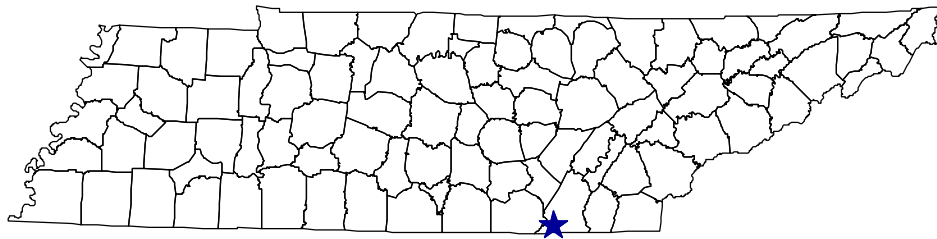
### Healthcare Personnel Influenza Vaccination - '2017/2018' Influenza Season



## Erlanger Medical Center, Chattanooga, Hamilton County

Medical School Affiliation: Graduate teaching

Bed Size Category: 400+ beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2018-12/31/2018

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		TN SIR
		Observed	Predicted		SIR*	95% CI	
CLABSI	Adult/Pediatric ICU	5	13.4	13050	<b>0.37</b>	<b>(0.14, 0.82)</b>	0.76
	Neonatal ICU	2	4.1	2574	0.48	(0.08, 1.60)	0.79
	Adult/Pediatric Ward	6	11.6	13368	0.52	(0.21, 1.07)	0.63
CAUTI	Adult/Pediatric ICU	21	22.0	14325	0.95	(0.61, 1.43)	0.70
	Adult/Pediatric Ward	11	6.0	6457	1.83	(0.96, 3.18)	0.73
SSI	Colon surgery	14	12.1	348	1.15	(0.66, 1.89)	0.79
	Abdominal hysterectomy	5	2.4	304	2.07	(0.76, 4.58)	0.78
LabID	MRSA bacteremia	12	13.1	163203	0.91	(0.50, 1.56)	1.29
	C. difficile infection	71	96.1	147837	<b>0.74</b>	<b>(0.58, 0.93)</b>	0.68

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

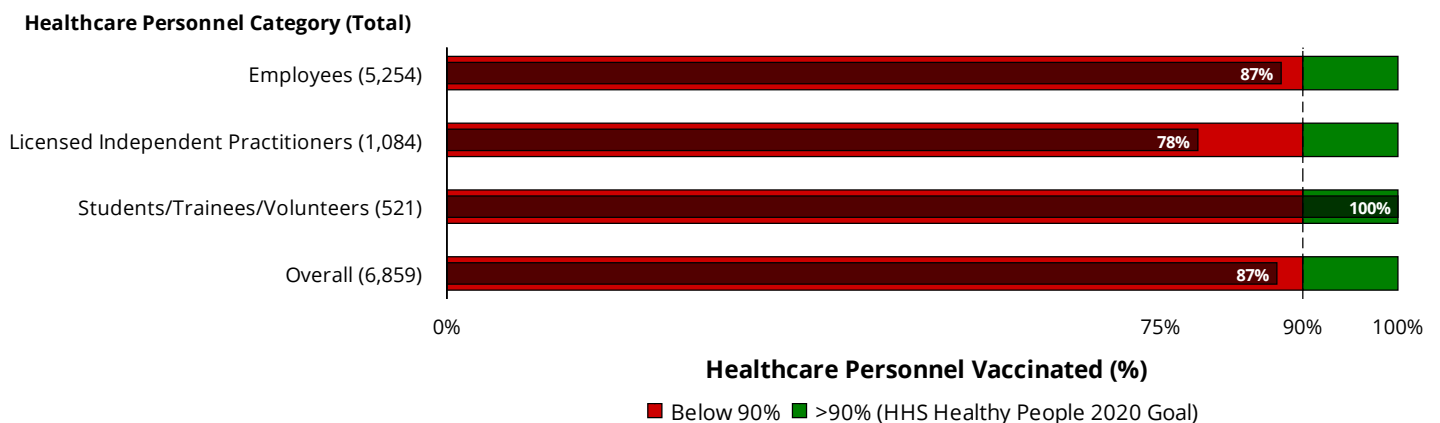
**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

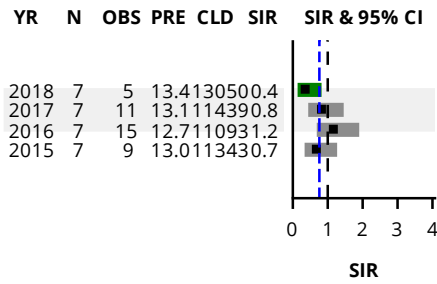
*See page 3 for more detailed information about HAIs at Erlanger Medical Center*

### Healthcare Personnel Influenza Vaccination - '2018/2019' Influenza Season

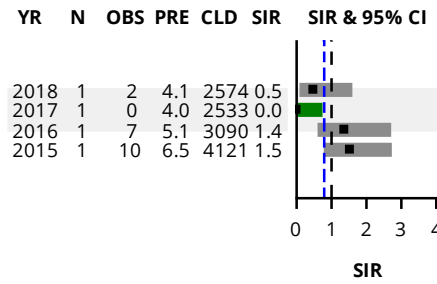


### Central Line-Associated Bloodstream Infections (CLABSI)

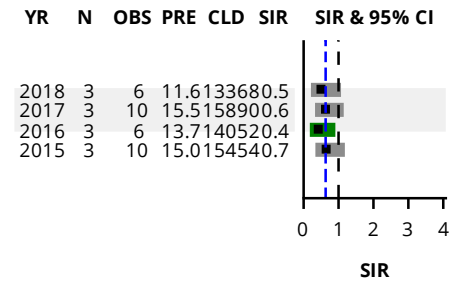
#### CLABSI - Adult/Pediatric ICUs



#### CLABSI - Neonatal ICUs

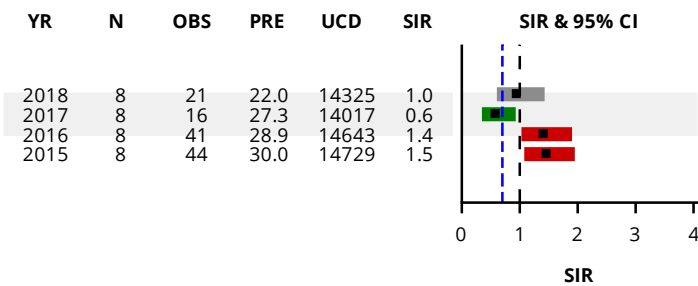


#### CLABSI - Adult/Pediatric Wards

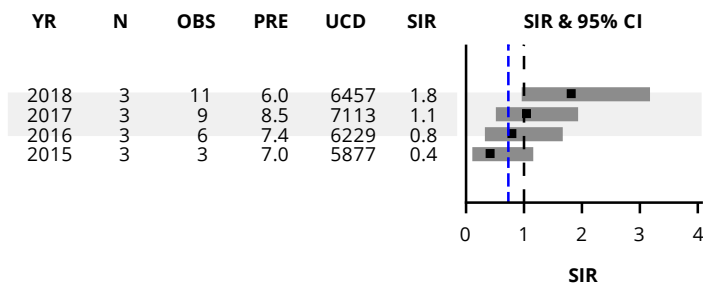


### Catheter-Associated Urinary Tract Infections (CAUTI)

#### CAUTI - Adult/Pediatric ICUs

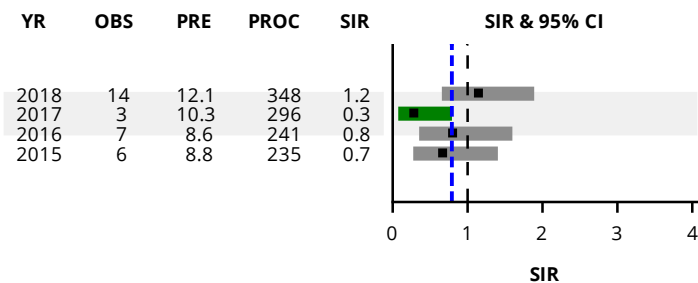


#### CAUTI - Adult/Pediatric Wards

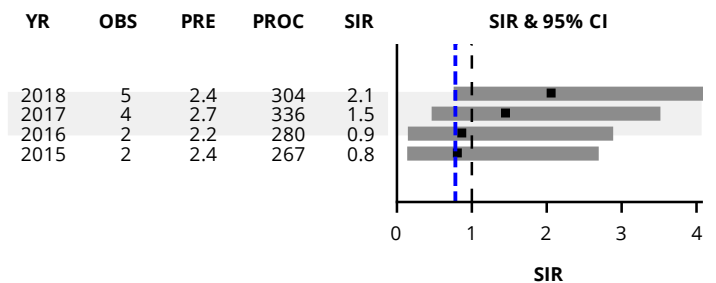


### Surgical Site Infections (SSI)

#### SSI - Colon Surgery

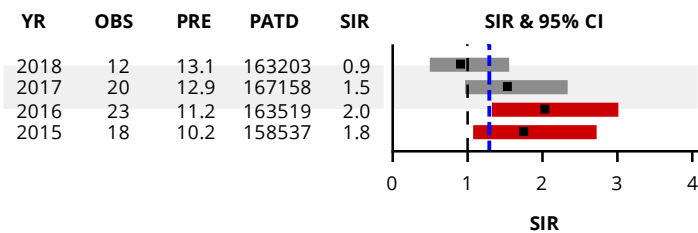


#### SSI - Abdominal Hysterectomy

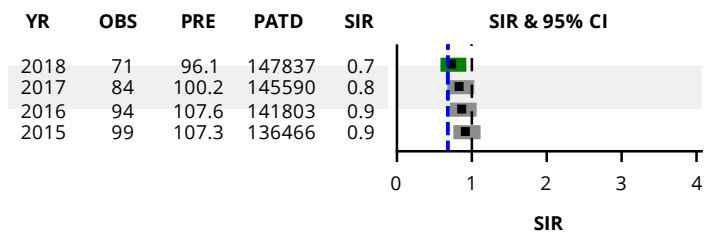


### Healthcare Facility-Onset Laboratory Identified (LabID) Events

#### LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia



#### LabID - *C. difficile* Infection (CDI)



Data reported as of August 27, 2019

YR = reporting year; N = number of units reporting (CLABSI/CAUTI); OBS = observed number of infections

PRE = statistically 'predicted' number of infections, based on NHSN national baseline data

SIR = standardized infection ratio (observed/predicted number of infections)

CLD = central line days; UCD = urinary catheter days; PROC = procedures performed; PATD = patient days;

N/A = data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

■ Significantly lower than NHSN SIR of 1

■ Not significantly different from NHSN SIR of 1

■ Significantly higher than NHSN SIR of 1

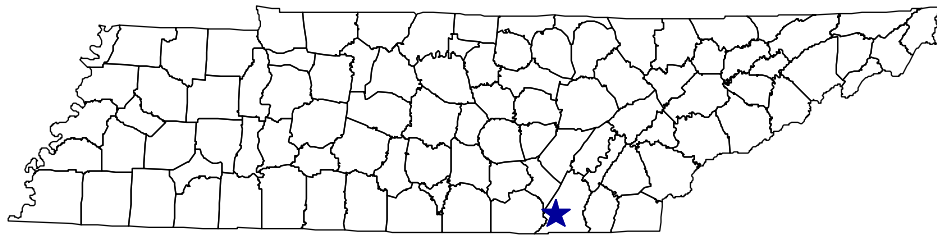
--- 2018 TN SIR

--- NHSN SIR=1

## Erlanger North, Chattanooga, Hamilton County

Medical School Affiliation: None

Bed Size Category: <50 beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2017-12/31/2017

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		
		Observed	Predicted		SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric Ward	0	0.3	554	N/A	N/A	0.68
CAUTI	Adult/Pediatric Ward	2	0.1	250	N/A	N/A	0.72
SSI	Colon surgery	N/A	N/A	N/A	N/A	N/A	0.83
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	1.08
LabID	MRSA bacteremia	0	0.1	5874	N/A	N/A	1.09
	C. difficile infection	2	1.4	5874	1.40	( 0.24, 4.63 )	0.83

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

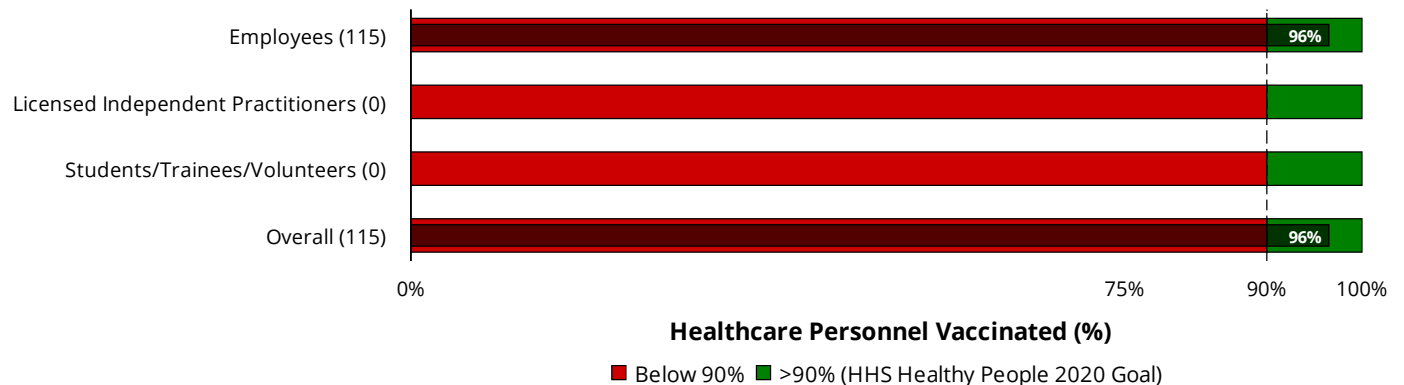
**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at Erlanger North*

### Healthcare Personnel Influenza Vaccination - '2017/2018' Influenza Season

#### Healthcare Personnel Category (Total)

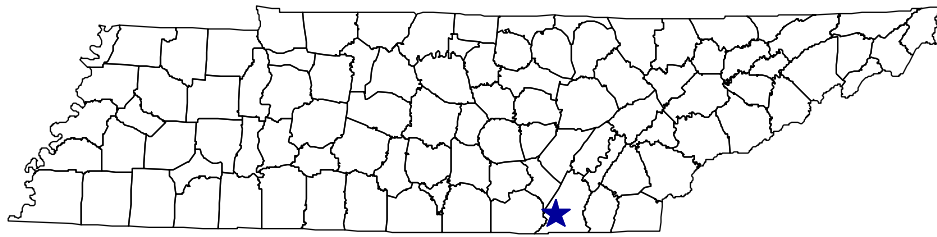




## Erlanger North, Chattanooga, Hamilton County

Medical School Affiliation: None

Bed Size Category: <50 beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2018-12/31/2018

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		
		Observed	Predicted		SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric Ward	0	0.3	517	N/A	N/A	0.63
CAUTI	Adult/Pediatric Ward	2	0.1	317	N/A	N/A	0.73
SSI	Colon surgery	N/A	N/A	N/A	N/A	N/A	0.79
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	0.78
LabID	MRSA bacteremia	0	0.1	5893	N/A	N/A	1.29
	C. difficile infection	3	1.6	5893	1.78	(0.45, 4.85)	0.68

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at Erlanger North*

### Healthcare Personnel Influenza Vaccination - '2018/2019' Influenza Season

#### Healthcare Personnel Category (Total)



#### Healthcare Personnel Vaccinated (%)

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric Wards

YR	N	OBS	PRE	CLD	SIR
2018	1	0	0.3	517	N/A
2017	1	0	0.3	554	N/A
2016	1	0	0.4	843	N/A
2015	1	1	0.0	169	N/A

N/A: Number of predicted infections <1; no SIR calculated

Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric Wards

YR	N	OBS	PRE	UCD	SIR
2018	1	2	0.1	317	N/A
2017	1	2	0.1	250	N/A
2016	1	0	0.1	361	N/A
2015	1	0	0.0	70	N/A

N/A: Number of predicted infections <1; no SIR calculated

Surgical Site Infections (SSI)

SSI - Colon Surgery

YR	OBS	PRE	PROC	SIR
2018	N/A	N/A	N/A	N/A
2017	N/A	N/A	N/A	N/A
2016	N/A	N/A	N/A	N/A
2015	N/A	N/A	N/A	N/A

N/A: Number of predicted infections <1; no SIR calculated

SSI - Abdominal Hysterectomy

YR	OBS	PRE	PROC	SIR
2018	N/A	N/A	N/A	N/A
2017	N/A	N/A	N/A	N/A
2016	N/A	N/A	N/A	N/A
2015	N/A	N/A	N/A	N/A

N/A: Number of predicted infections <1; no SIR calculated

Healthcare Facility-Onset Laboratory Identified (LabID) Events

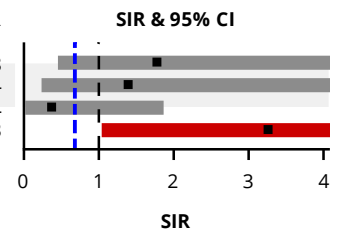
LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia

YR	OBS	PRE	PATD	SIR
2018	0	0.1	5893	N/A
2017	0	0.1	5874	N/A
2016	0	0.1	7522	N/A
2015	0	0.1	5038	N/A

N/A: Number of predicted infections <1; no SIR calculated

LabID - *C. difficile* Infection (CDI)

YR	OBS	PRE	PATD	SIR
2018	3	1.6	5893	1.8
2017	2	1.4	5874	1.4
2016	1	2.6	7522	0.4
2015	4	1.2	5038	3.3



- Significantly lower than NHSN SIR of 1
- Not significantly different from NHSN SIR of 1
- Significantly higher than NHSN SIR of 1
- - - 2018 TN SIR
- - - NHSN SIR=1

Data reported as of August 27, 2019

YR = reporting year; N = number of units reporting (CLABSI/CAUTI); OBS = observed number of infections

PRE = statistically 'predicted' number of infections, based on NHSN national baseline data

SIR = standardized infection ratio (observed/predicted number of infections)

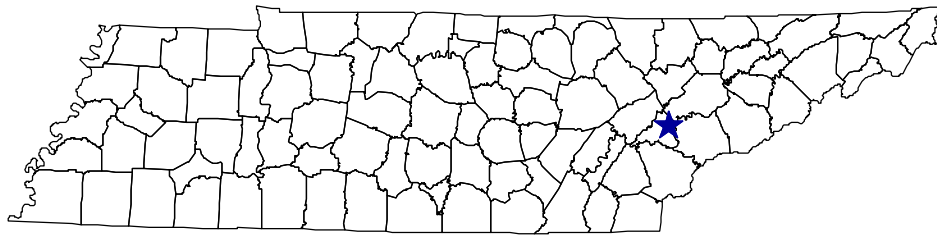
CLD = central line days; UCD = urinary catheter days; PROC = procedures performed; PATD = patient days;

N/A = data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

## Fort Loudoun Medical Center, Lenoir City, Loudon County

Medical School Affiliation: None

Bed Size Category: 50-99 beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2017-12/31/2017

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		
		Observed	Predicted		SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	0	0.3	552	N/A	N/A	0.85
	Adult/Pediatric Ward	0	0.6	1108	N/A	N/A	0.68
CAUTI	Adult/Pediatric ICU	0	0.4	835	N/A	N/A	0.71
	Adult/Pediatric Ward	0	0.6	1249	N/A	N/A	0.72
SSI	Colon surgery	0	0.9	56	N/A	N/A	0.83
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	1.08
LabID	MRSA bacteremia	0	0.2	9620	N/A	N/A	1.09
	C. difficile infection	2	5.5	9620	0.36	( 0.06, 1.19 )	0.83

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at Fort Loudoun Medical Center*

### Healthcare Personnel Influenza Vaccination - '2017/2018' Influenza Season

#### Healthcare Personnel Category (Total)



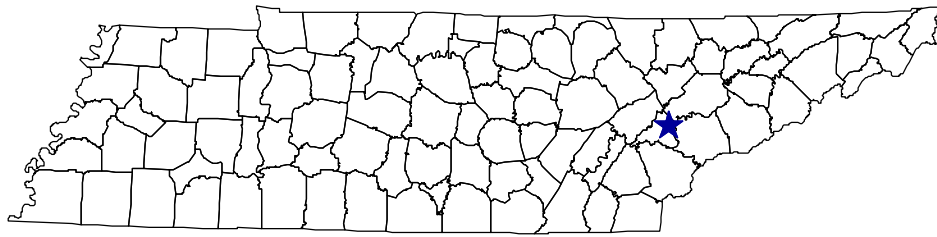
#### Healthcare Personnel Vaccinated (%)

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

## Fort Loudoun Medical Center, Lenoir City, Loudon County

Medical School Affiliation: None

Bed Size Category: 50-99 beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2018-12/31/2018

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		
		Observed	Predicted		SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	0	0.2	380	N/A	N/A	0.76
	Adult/Pediatric Ward	0	0.6	1187	N/A	N/A	0.63
CAUTI	Adult/Pediatric ICU	0	0.2	531	N/A	N/A	0.70
	Adult/Pediatric Ward	0	0.5	1098	N/A	N/A	0.73
SSI	Colon surgery	0	0.6	44	N/A	N/A	0.79
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	0.78
LabID	MRSA bacteremia	0	0.2	10382	N/A	N/A	1.29
	C. difficile infection	4	6.4	10382	0.62	( 0.20, 1.50 )	0.68

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

**See page 3 for more detailed information about HAIs at Fort Loudoun Medical Center**

### Healthcare Personnel Influenza Vaccination - '2018/2019' Influenza Season

#### Healthcare Personnel Category (Total)



#### Healthcare Personnel Vaccinated (%)

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric ICUs

YR	N	OBS	PRE	CLD	SIR
2018	1	0	0.2	380	N/A
2017	1	0	0.3	552	N/A
2016	1	0	0.3	487	N/A
2015	1	0	0.2	331	N/A

N/A: Number of predicted infections <1; no SIR calculated

CLABSI - Adult/Pediatric Wards

YR	N	OBS	PRE	CLD	SIR
2018	1	0	0.6	1187	N/A
2017	1	0	0.6	1108	N/A
2016	1	1	0.8	1399	N/A
2015	1	1	0.5	988	N/A

N/A: Number of predicted infections <1; no SIR calculated

Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICUs

YR	N	OBS	PRE	UCD	SIR
2018	1	0	0.2	531	N/A
2017	1	0	0.4	835	N/A
2016	1	0	0.3	700	N/A
2015	1	1	0.3	657	N/A

N/A: Number of predicted infections <1; no SIR calculated

CAUTI - Adult/Pediatric Wards

YR	N	OBS	PRE	UCD	SIR
2018	1	0	0.5	1098	N/A
2017	1	0	0.6	1249	N/A
2016	1	1	0.6	1424	N/A
2015	1	0	0.6	1326	N/A

N/A: Number of predicted infections <1; no SIR calculated

Surgical Site Infections (SSI)

SSI - Colon Surgery

YR	OBS	PRE	PROC	SIR
2018	0	0.6	44	N/A
2017	0	0.9	56	N/A
2016	1	0.5	38	N/A
2015	0	0.5	34	N/A

N/A: Number of predicted infections <1; no SIR calculated

SSI - Abdominal Hysterectomy

YR	OBS	PRE	PROC	SIR
2018	N/A	N/A	N/A	N/A
2017	N/A	N/A	N/A	N/A
2016	N/A	N/A	N/A	N/A
2015	N/A	N/A	N/A	N/A

N/A: Number of predicted infections <1; no SIR calculated

Healthcare Facility-Onset Laboratory Identified (LabID) Events

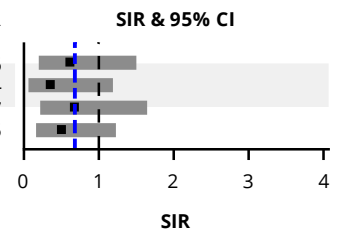
LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia

YR	OBS	PRE	PATD	SIR
2018	0	0.2	10382	N/A
2017	0	0.2	9620	N/A
2016	0	0.2	9370	N/A
2015	0	0.2	8155	N/A

N/A: Number of predicted infections <1; no SIR calculated

LabID - *C. difficile* Infection (CDI)

YR	OBS	PRE	PATD	SIR
2018	4	6.4	10382	0.6
2017	2	5.5	9620	0.4
2016	4	5.8	9370	0.7
2015	4	7.8	8155	0.5



Data reported as of August 27, 2019

YR = reporting year; N = number of units reporting (CLABSI/CAUTI); OBS = observed number of infections

PRE = statistically 'predicted' number of infections, based on NHSN national baseline data

SIR = standardized infection ratio (observed/predicted number of infections)

CLD = central line days; UCD = urinary catheter days; PROC = procedures performed; PATD = patient days;

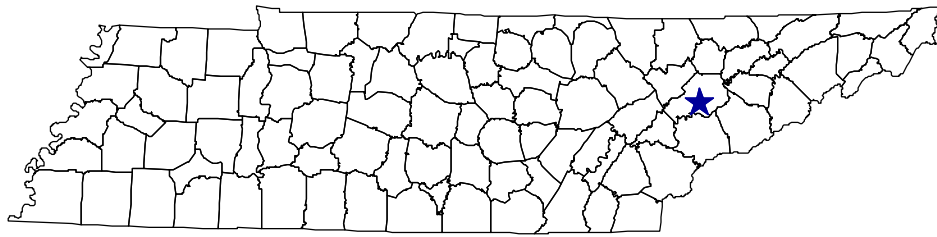
N/A = data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

- Significantly lower than NHSN SIR of 1
- Not significantly different from NHSN SIR of 1
- Significantly higher than NHSN SIR of 1
- - - 2018 TN SIR
- - - NHSN SIR=1

## Fort Sanders Regional Medical Center, Knoxville, Knox County

Medical School Affiliation: None

Bed Size Category: 100-399 beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2017-12/31/2017

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		
		Observed	Predicted		SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	7	3.3	3873	2.08	( 0.91, 4.12 )	0.85
	Adult/Pediatric Ward	4	5.2	6970	0.77	( 0.24, 1.85 )	0.68
CAUTI	Adult/Pediatric ICU	6	8.5	6263	0.70	( 0.28, 1.46 )	0.71
	Adult/Pediatric Ward	7	7.1	8559	0.98	( 0.43, 1.93 )	0.72
SSI	Colon surgery	3	6.2	291	0.48	( 0.12, 1.31 )	0.83
	Abdominal hysterectomy	2	1.0	152	1.94	( 0.33, 6.40 )	1.08
LabID	MRSA bacteremia	4	6.8	90147	0.59	( 0.19, 1.42 )	1.09
	C. difficile infection	14	54.0	85376	<b>0.26</b>	<b>( 0.15, 0.43 )</b>	0.83

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at Fort Sanders Regional Medical Center*

### Healthcare Personnel Influenza Vaccination - '2017/2018' Influenza Season

#### Healthcare Personnel Category (Total)



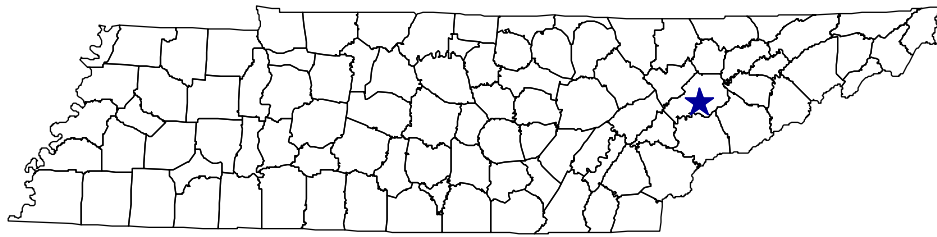
#### Healthcare Personnel Vaccinated (%)

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

## Fort Sanders Regional Medical Center, Knoxville, Knox County

Medical School Affiliation: None

Bed Size Category: 100-399 beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2018-12/31/2018

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		
		Observed	Predicted		SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	3	3.0	3506	0.99	( 0.25, 2.68 )	0.76
	Adult/Pediatric Ward	5	4.1	5559	1.20	( 0.44, 2.66 )	0.63
CAUTI	Adult/Pediatric ICU	6	7.4	5523	0.81	( 0.33, 1.68 )	0.70
	Adult/Pediatric Ward	2	5.9	7110	0.33	( 0.06, 1.10 )	0.73
SSI	Colon surgery	4	5.4	247	0.73	( 0.23, 1.76 )	0.79
	Abdominal hysterectomy	0	1.0	182	0.00	( 0.00, 2.74 )	0.78
LabID	MRSA bacteremia	5	5.5	87777	0.90	( 0.33, 2.00 )	1.29
	C. difficile infection	13	51.7	83435	<b>0.25</b>	<b>( 0.14, 0.42 )</b>	0.68

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

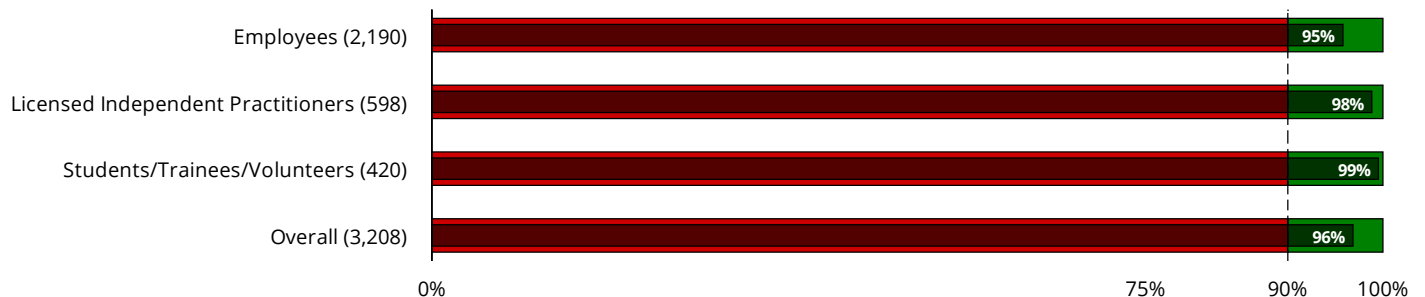
**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at Fort Sanders Regional Medical Center*

### Healthcare Personnel Influenza Vaccination - '2018/2019' Influenza Season

#### Healthcare Personnel Category (Total)

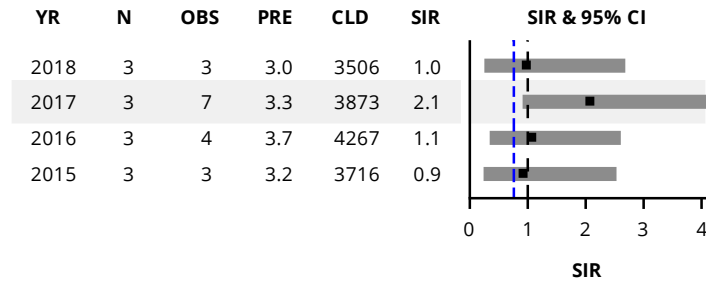


#### Healthcare Personnel Vaccinated (%)

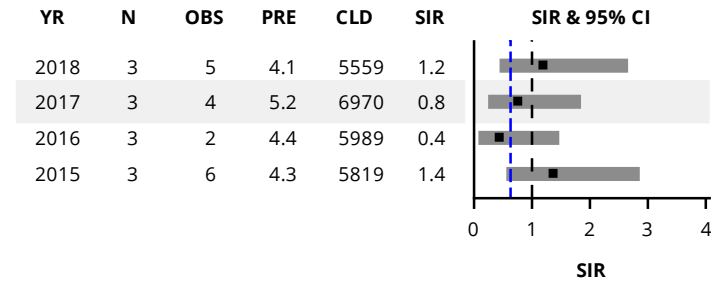
■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric ICUs

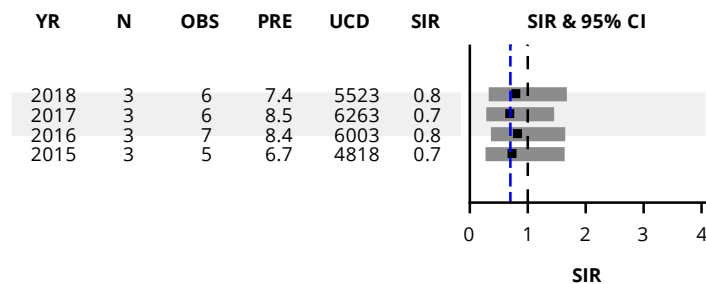


CLABSI - Adult/Pediatric Wards

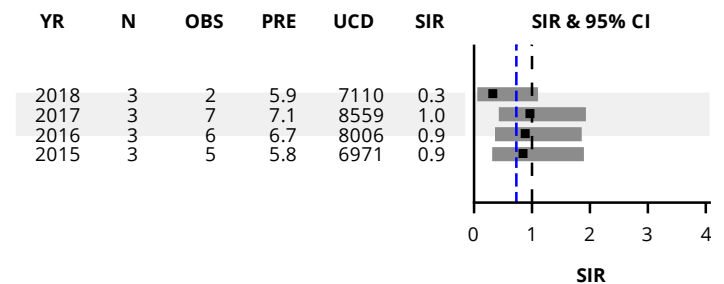


Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICUs

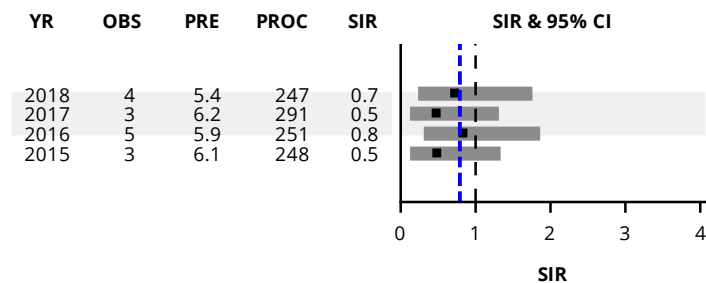


CAUTI - Adult/Pediatric Wards

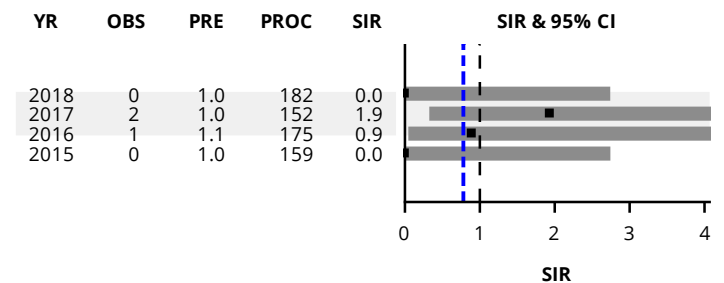


Surgical Site Infections (SSI)

SSI - Colon Surgery

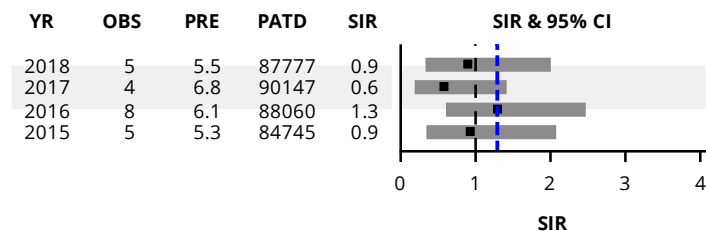


SSI - Abdominal Hysterectomy

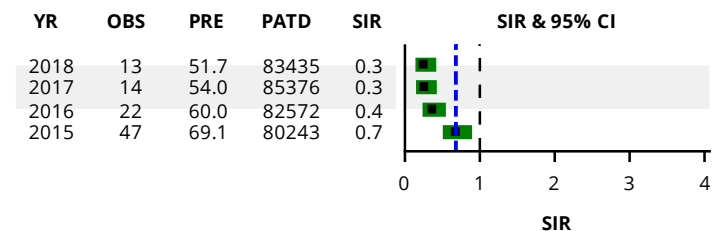


Healthcare Facility-Onset Laboratory Identified (LabID) Events

LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia



LabID - *C. difficile* Infection (CDI)



Data reported as of August 27, 2019

YR = reporting year; N = number of units reporting (CLABSI/CAUTI); OBS = observed number of infections

PRE = statistically 'predicted' number of infections, based on NHSN national baseline data

SIR = standardized infection ratio (observed/predicted number of infections)

CLD = central line days; UCD = urinary catheter days; PROC = procedures performed; PATD = patient days;

N/A = data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

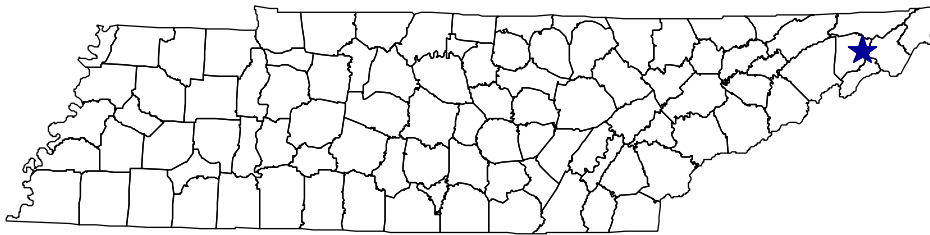
- Significantly lower than NHSN SIR of 1
- Not significantly different from NHSN SIR of 1
- Significantly higher than NHSN SIR of 1
- - - 2018 TN SIR
- - - NHSN SIR=1



## Franklin Woods Community Hospital, Johnson City, Washington County

Medical School Affiliation: None

Bed Size Category: 50-99 beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2017-12/31/2017

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		
		Observed	Predicted		SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	0	0.3	594	N/A	N/A	0.85
	Adult/Pediatric Ward	2	0.4	811	N/A	N/A	0.68
CAUTI	Adult/Pediatric ICU	2	0.4	887	N/A	N/A	0.71
	Adult/Pediatric Ward	0	0.7	1601	N/A	N/A	0.72
SSI	Colon surgery	5	2.2	124	2.19	( 0.80, 4.86 )	0.83
	Abdominal hysterectomy	2	0.6	155	N/A	N/A	1.08
LabID	MRSA bacteremia	1	1.1	27486	0.85	( 0.04, 4.17 )	1.09
	C. difficile infection	12	14.6	25251	0.82	( 0.44, 1.39 )	0.83

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at Franklin Woods Community Hospital*

### Healthcare Personnel Influenza Vaccination - '2017/2018' Influenza Season

#### Healthcare Personnel Category (Total)



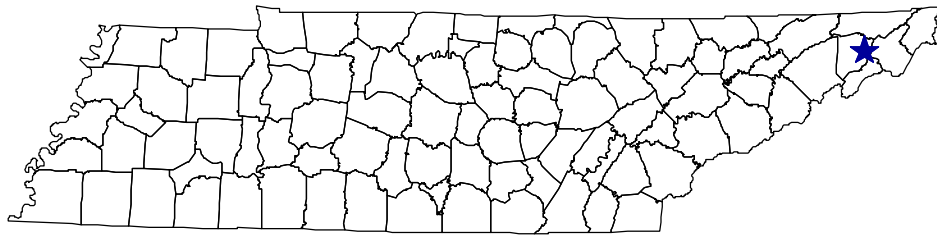
#### Healthcare Personnel Vaccinated (%)

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

## Franklin Woods Community Hospital, Johnson City, Washington County

Medical School Affiliation: None

Bed Size Category: 50-99 beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2018-12/31/2018

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		
		Observed	Predicted		SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	0	0.2	337	N/A	N/A	0.76
	Adult/Pediatric Ward	0	0.3	522	N/A	N/A	0.63
CAUTI	Adult/Pediatric ICU	0	0.3	669	N/A	N/A	0.70
	Adult/Pediatric Ward	0	0.7	1443	N/A	N/A	0.73
SSI	Colon surgery	5	2.5	143	1.95	( 0.71, 4.31 )	0.79
	Abdominal hysterectomy	1	0.6	173	N/A	N/A	0.78
LabID	MRSA bacteremia	1	0.6	23334	N/A	N/A	1.29
	C. difficile infection	5	13.7	20962	0.36	( 0.13, 0.81 )	0.68

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

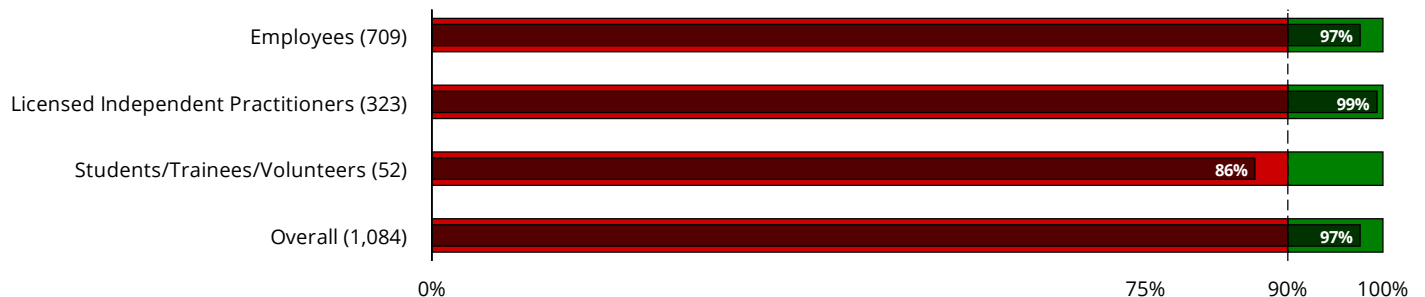
**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at Franklin Woods Community Hospital*

### Healthcare Personnel Influenza Vaccination - '2018/2019' Influenza Season

#### Healthcare Personnel Category (Total)



#### Healthcare Personnel Vaccinated (%)

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric ICUs

YR	N	OBS	PRE	CLD	SIR
2018	1	0	0.2	337	N/A
2017	1	0	0.3	594	N/A
2016	1	0	0.5	798	N/A
2015	1	0	0.6	953	N/A

N/A: Number of predicted infections <1; no SIR calculated

CLABSI - Adult/Pediatric Wards

YR	N	OBS	PRE	CLD	SIR
2018	1	0	0.3	522	N/A
2017	1	2	0.4	811	N/A
2016	1	0	0.3	586	N/A
2015	1	0	0.4	700	N/A

N/A: Number of predicted infections <1; no SIR calculated

Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICUs

YR	N	OBS	PRE	UCD	SIR
2018	1	0	0.3	669	N/A
2017	1	2	0.4	887	N/A
2016	1	0	0.4	800	N/A
2015	1	1	0.5	991	N/A

N/A: Number of predicted infections <1; no SIR calculated

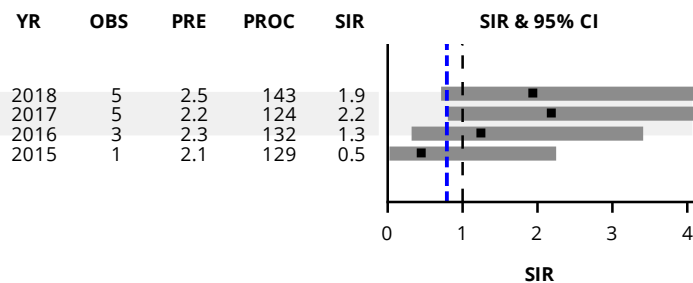
CAUTI - Adult/Pediatric Wards

YR	N	OBS	PRE	UCD	SIR
2018	1	0	0.7	1443	N/A
2017	1	0	0.7	1601	N/A
2016	1	0	0.7	1451	N/A
2015	1	0	0.6	1344	N/A

N/A: Number of predicted infections <1; no SIR calculated

Surgical Site Infections (SSI)

SSI - Colon Surgery



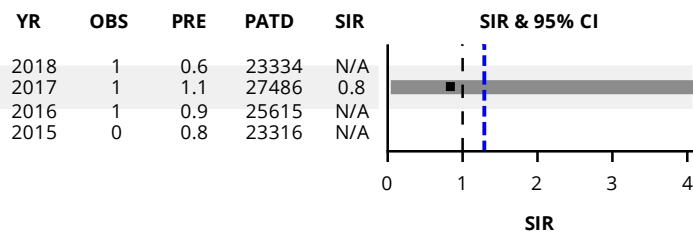
SSI - Abdominal Hysterectomy

YR	OBS	PRE	PROC	SIR
2018	1	0.6	173	N/A
2017	2	0.6	155	N/A
2016	0	0.5	140	N/A
2015	0	0.7	176	N/A

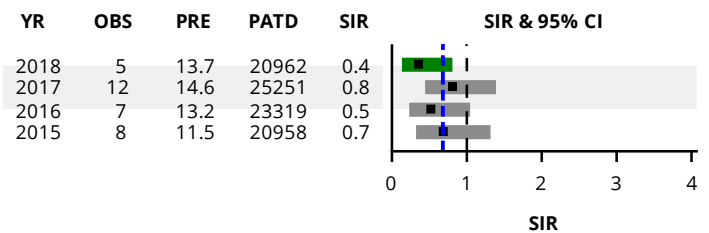
N/A: Number of predicted infections <1; no SIR calculated

Healthcare Facility-Onset Laboratory Identified (LabID) Events

LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia



LabID - *C. difficile* Infection (CDI)



Data reported as of August 27, 2019

YR = reporting year; N = number of units reporting (CLABSI/CAUTI); OBS = observed number of infections

PRE = statistically 'predicted' number of infections, based on NHSN national baseline data

SIR = standardized infection ratio (observed/predicted number of infections)

CLD = central line days; UCD = urinary catheter days; PROC = procedures performed; PATD = patient days;

N/A = data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

■ Significantly lower than NHSN SIR of 1

■ Not significantly different from NHSN SIR of 1

■ Significantly higher than NHSN SIR of 1

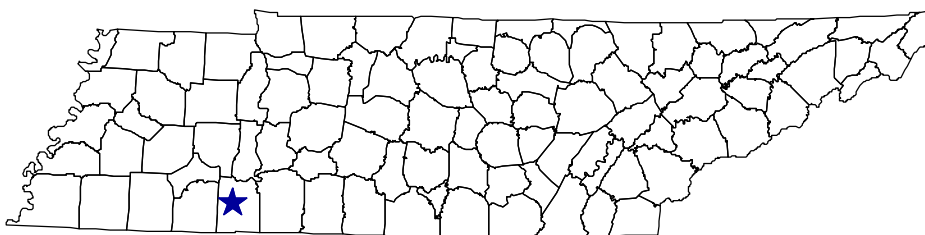
--- 2018 TN SIR

--- NHSN SIR=1

## Hardin Medical Center, Savannah, Hardin County

Medical School Affiliation: None

Bed Size Category: 50-99 beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2017-12/31/2017

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		
		Observed	Predicted		SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric Ward	0	0.0	101	N/A	N/A	0.68
CAUTI	Adult/Pediatric Ward	1	0.3	648	N/A	N/A	0.72
SSI	Colon surgery	N/A	N/A	N/A	N/A	N/A	0.83
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	1.08
LabID	MRSA bacteremia	0	0.2	7720	N/A	N/A	1.09
	C. difficile infection	3	1.5	7720	1.88	(0.48, 5.12)	0.83

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

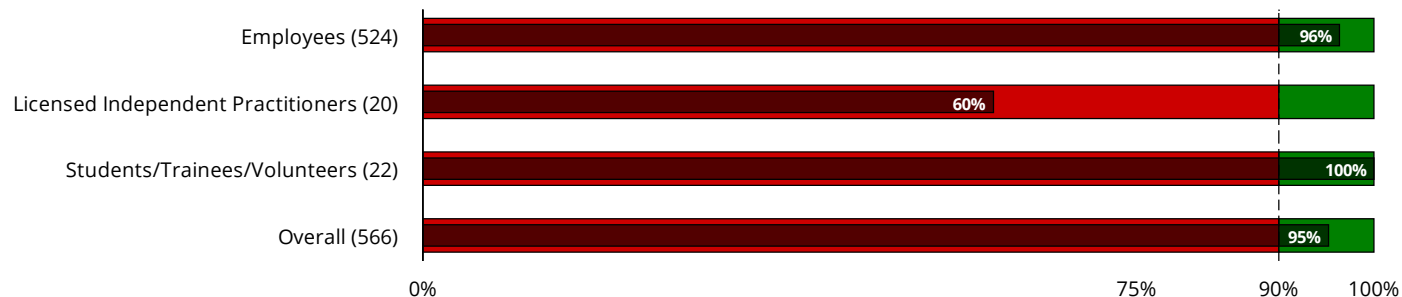
**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at Hardin Medical Center*

### Healthcare Personnel Influenza Vaccination - '2017/2018' Influenza Season

#### Healthcare Personnel Category (Total)



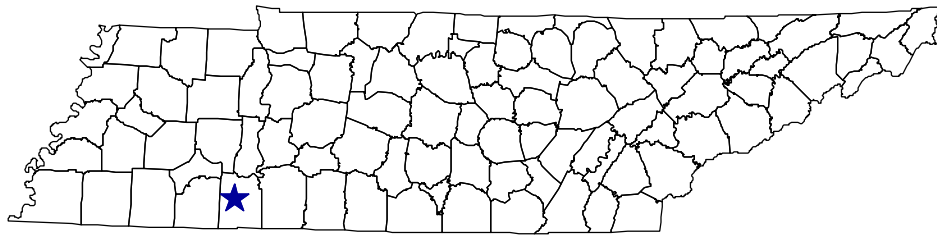
#### Healthcare Personnel Vaccinated (%)

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

## Hardin Medical Center, Savannah, Hardin County

Medical School Affiliation: None

Bed Size Category: 50-99 beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2018-12/31/2018

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		
		Observed	Predicted		SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric Ward	0	0.0	83	N/A	N/A	0.63
CAUTI	Adult/Pediatric Ward	0	0.3	689	N/A	N/A	0.73
SSI	Colon surgery	N/A	N/A	N/A	N/A	N/A	0.79
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	0.78
LabID	MRSA bacteremia	0	0.2	6491	N/A	N/A	1.29
	C. difficile infection	1	1.3	6491	0.74	( 0.04, 3.67 )	0.68

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

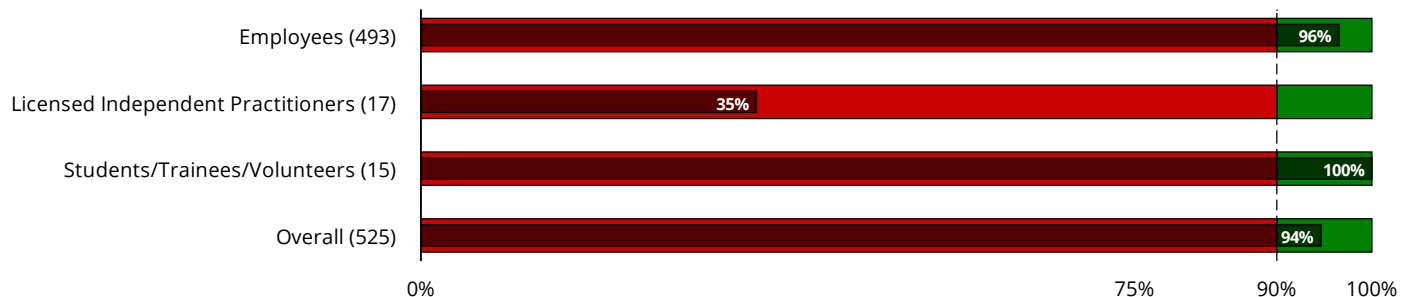
**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at Hardin Medical Center*

### Healthcare Personnel Influenza Vaccination - '2018/2019' Influenza Season

#### Healthcare Personnel Category (Total)



#### Healthcare Personnel Vaccinated (%)

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric Wards

YR	N	OBS	PRE	CLD	SIR
2018	1	0	0.0	83	N/A
2017	1	0	0.0	101	N/A
2016	1	0	0.0	153	N/A
2015	1	0	0.1	174	N/A

N/A: Number of predicted infections <1; no SIR calculated

Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric Wards

YR	N	OBS	PRE	UCD	SIR
2018	1	0	0.3	689	N/A
2017	1	1	0.3	648	N/A
2016	1	0	0.3	788	N/A
2015	1	0	0.4	902	N/A

N/A: Number of predicted infections <1; no SIR calculated

Surgical Site Infections (SSI)

SSI - Colon Surgery

YR	OBS	PRE	PROC	SIR
2018	N/A	N/A	N/A	N/A
2017	N/A	N/A	N/A	N/A
2016	N/A	N/A	N/A	N/A
2015	N/A	N/A	N/A	N/A

N/A: Number of predicted infections <1; no SIR calculated

SSI - Abdominal Hysterectomy

YR	OBS	PRE	PROC	SIR
2018	N/A	N/A	N/A	N/A
2017	N/A	N/A	N/A	N/A
2016	0	0.1	25	N/A
2015	N/A	N/A	N/A	N/A

N/A: Number of predicted infections <1; no SIR calculated

Healthcare Facility-Onset Laboratory Identified (LabID) Events

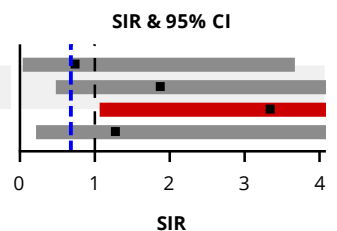
LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia

YR	OBS	PRE	PATD	SIR
2018	0	0.2	6491	N/A
2017	0	0.2	7720	N/A
2016	0	0.1	5823	N/A
2015	0	0.1	6036	N/A

N/A: Number of predicted infections <1; no SIR calculated

LabID - *C. difficile* Infection (CDI)

YR	OBS	PRE	PATD	SIR
2018	1	1.3	6491	0.7
2017	3	1.5	7720	1.9
2016	4	1.1	5823	3.3
2015	2	1.5	6036	1.3



Data reported as of August 27, 2019

YR = reporting year; N = number of units reporting (CLABSI/CAUTI); OBS = observed number of infections

PRE = statistically 'predicted' number of infections, based on NHSN national baseline data

SIR = standardized infection ratio (observed/predicted number of infections)

CLD = central line days; UCD = urinary catheter days; PROC = procedures performed; PATD = patient days;

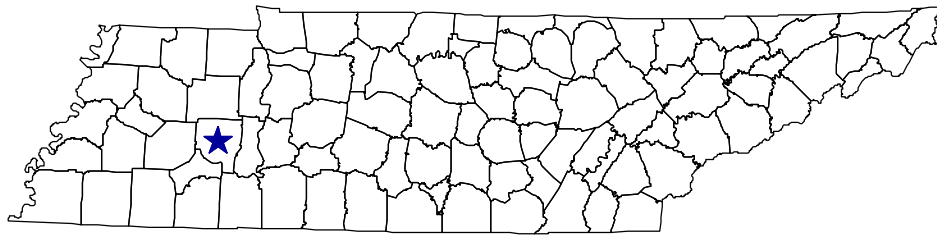
N/A = data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

- Significantly lower than NHSN SIR of 1
- Not significantly different from NHSN SIR of 1
- Significantly higher than NHSN SIR of 1
- - - 2018 TN SIR
- - - NHSN SIR=1

## Henderson County Community Hospital, Lexington, Henderson County

Medical School Affiliation: Undergraduate teaching

Bed Size Category: <50 beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2017-12/31/2017

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		
		Observed	Predicted		SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric Ward	0	0.0	51	N/A	N/A	0.68
CAUTI	Adult/Pediatric Ward	0	0.1	264	N/A	N/A	0.72
SSI	Colon surgery	N/A	N/A	N/A	N/A	N/A	0.83
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	1.08
LabID	MRSA bacteremia	0	0.0	1425	N/A	N/A	1.09
	C. difficile infection	1	0.5	1425	N/A	N/A	0.83

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at Henderson County Community Hospital*

### Healthcare Personnel Influenza Vaccination - '2017/2018' Influenza Season

#### Healthcare Personnel Category (Total)



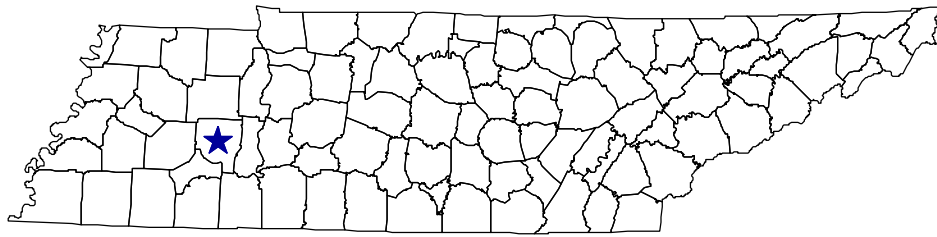
#### Healthcare Personnel Vaccinated (%)

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

## Henderson County Community Hospital, Lexington, Henderson County

Medical School Affiliation: Undergraduate teaching

Bed Size Category: <50 beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2018-12/31/2018

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		
		Observed	Predicted		SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric Ward	0	0.0	63	N/A	N/A	0.63
CAUTI	Adult/Pediatric Ward	0	0.0	142	N/A	N/A	0.73
SSI	Colon surgery	N/A	N/A	N/A	N/A	N/A	0.79
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	0.78
LabID	MRSA bacteremia	0	0.0	2014	N/A	N/A	1.29
	C. difficile infection	0	0.6	2014	N/A	N/A	0.68

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

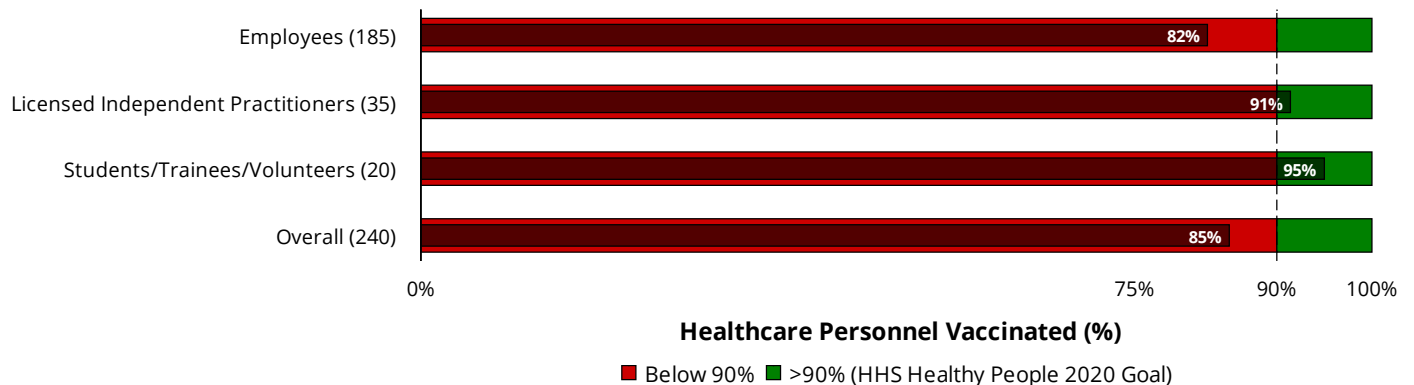
**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at Henderson County Community Hospital*

### Healthcare Personnel Influenza Vaccination - '2018/2019' Influenza Season

#### Healthcare Personnel Category (Total)





Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric Wards

YR	N	OBS	PRE	CLD	SIR
2018	1	0	0.0	63	N/A
2017	1	0	0.0	51	N/A
2016	1	N/A	N/A	N/A	N/A
2015	1	0	0.0	71	N/A

N/A: Number of predicted infections <1; no SIR calculated

Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric Wards

YR	N	OBS	PRE	UCD	SIR
2018	1	0	0.0	142	N/A
2017	1	0	0.1	264	N/A
2016	1	0	0.1	215	N/A
2015	1	0	0.1	290	N/A

N/A: Number of predicted infections <1; no SIR calculated

Surgical Site Infections (SSI)

SSI - Colon Surgery

YR	OBS	PRE	PROC	SIR
2018	N/A	N/A	N/A	N/A
2017	N/A	N/A	N/A	N/A
2016	N/A	N/A	N/A	N/A
2015	N/A	N/A	N/A	N/A

N/A: Number of predicted infections <1; no SIR calculated

SSI - Abdominal Hysterectomy

YR	OBS	PRE	PROC	SIR
2018	N/A	N/A	N/A	N/A
2017	N/A	N/A	N/A	N/A
2016	N/A	N/A	N/A	N/A
2015	N/A	N/A	N/A	N/A

N/A: Number of predicted infections <1; no SIR calculated

Healthcare Facility-Onset Laboratory Identified (LabID) Events

LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia

YR	OBS	PRE	PATD	SIR
2018	0	0.0	2014	N/A
2017	0	0.0	1425	N/A
2016	0	0.0	1222	N/A
2015	0	0.0	1013	N/A

N/A: Number of predicted infections <1; no SIR calculated

LabID - *C. difficile* Infection (CDI)

YR	OBS	PRE	PATD	SIR
2018	0	0.6	2014	N/A
2017	1	0.5	1425	N/A
2016	1	0.4	1222	N/A
2015	0	0.2	813	N/A

N/A: Number of predicted infections <1; no SIR calculated

Data reported as of August 27, 2019

YR = reporting year; N = number of units reporting (CLABSI/CAUTI); OBS = observed number of infections

PRE = statistically 'predicted' number of infections, based on NHSN national baseline data

SIR = standardized infection ratio (observed/predicted number of infections)

CLD = central line days; UCD = urinary catheter days; PROC = procedures performed; PATD = patient days;

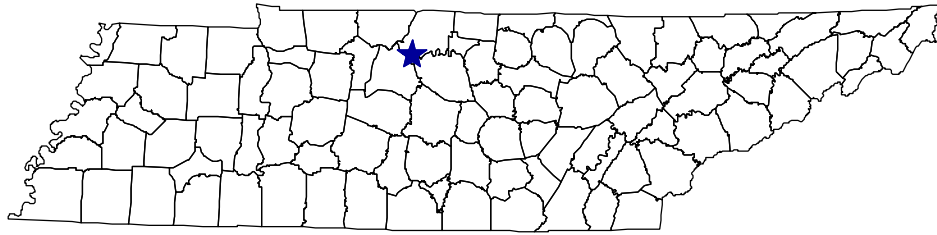
N/A = data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

- Significantly lower than NHSN SIR of 1
- Not significantly different from NHSN SIR of 1
- Significantly higher than NHSN SIR of 1
- 2018 TN SIR
- NHSN SIR=1

## Hendersonville Medical Center, Hendersonville, Sumner County

Medical School Affiliation: None

Bed Size Category: 100-399 beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2017-12/31/2017

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		
		Observed	Predicted		SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	1	1.0	1346	0.99	( 0.05, 4.86 )	0.85
	Adult/Pediatric Ward	3	1.5	2332	1.98	( 0.50, 5.38 )	0.68
CAUTI	Adult/Pediatric ICU	1	1.2	1678	0.82	( 0.04, 4.02 )	0.71
	Adult/Pediatric Ward	2	1.7	2715	1.13	( 0.19, 3.73 )	0.72
SSI	Colon surgery	7	1.2	61	<b>5.63</b>	<b>( 2.46, 11.14 )</b>	0.83
	Abdominal hysterectomy	0	0.4	79	<b>N/A</b>	<b>N/A</b>	1.08
LabID	MRSA bacteremia	0	1.3	26492	0.00	( 0.00, 2.26 )	1.09
	C. difficile infection	14	20.0	25239	0.70	( 0.40, 1.14 )	0.83

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

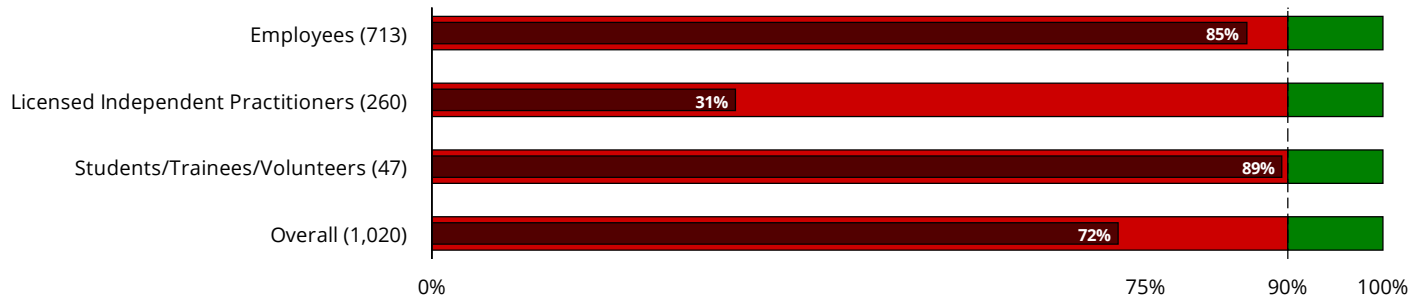
**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at Hendersonville Medical Center*

### Healthcare Personnel Influenza Vaccination - '2017/2018' Influenza Season

#### Healthcare Personnel Category (Total)



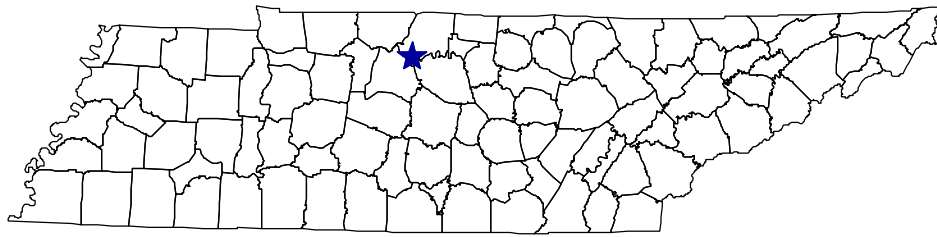
#### Healthcare Personnel Vaccinated (%)

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

## Hendersonville Medical Center, Hendersonville, Sumner County

Medical School Affiliation: None

Bed Size Category: 100-399 beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2018-12/31/2018

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		
		Observed	Predicted		SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	3	0.8	1093	N/A	N/A	0.76
	Adult/Pediatric Ward	1	1.2	1948	0.79	(0.04, 3.89)	0.63
CAUTI	Adult/Pediatric ICU	0	1.1	1558	0.00	(0.00, 2.63)	0.70
	Adult/Pediatric Ward	1	1.3	2031	0.75	(0.04, 3.72)	0.73
SSI	Colon surgery	2	1.6	74	1.20	(0.20, 3.97)	0.79
	Abdominal hysterectomy	1	1.0	175	1.00	(0.05, 4.92)	0.78
LabID	MRSA bacteremia	1	1.2	28340	0.81	(0.04, 3.97)	1.29
	C. difficile infection	20	17.9	26251	1.12	(0.70, 1.69)	0.68

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

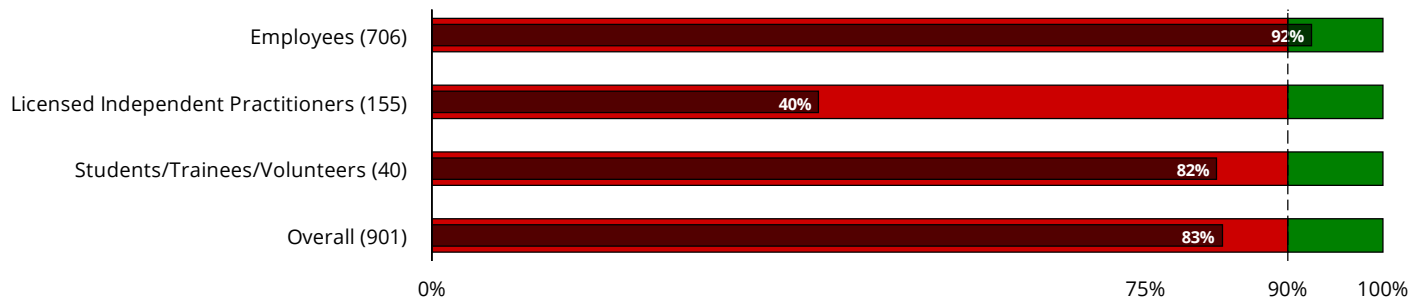
**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at Hendersonville Medical Center*

### Healthcare Personnel Influenza Vaccination - '2018/2019' Influenza Season

#### Healthcare Personnel Category (Total)

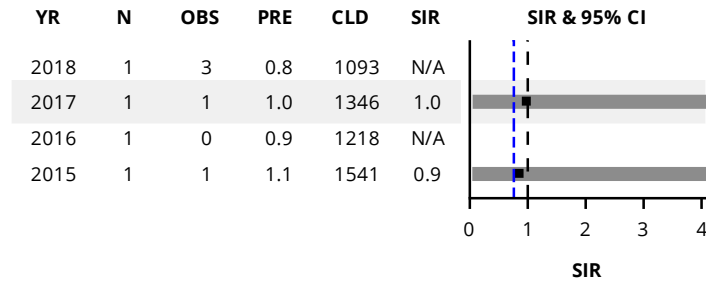


#### Healthcare Personnel Vaccinated (%)

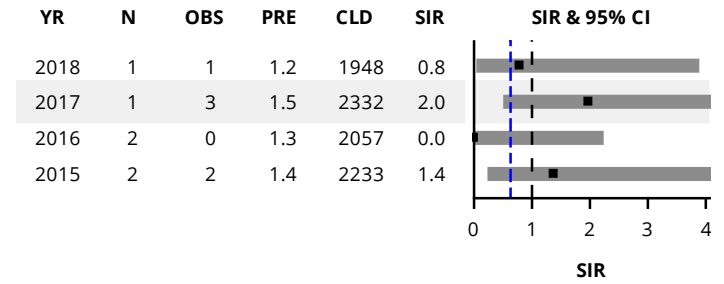
■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric ICUs

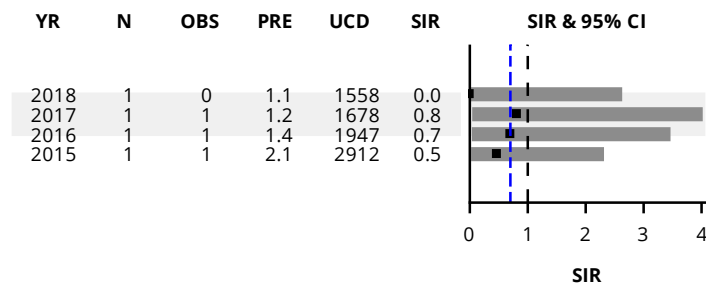


CLABSI - Adult/Pediatric Wards

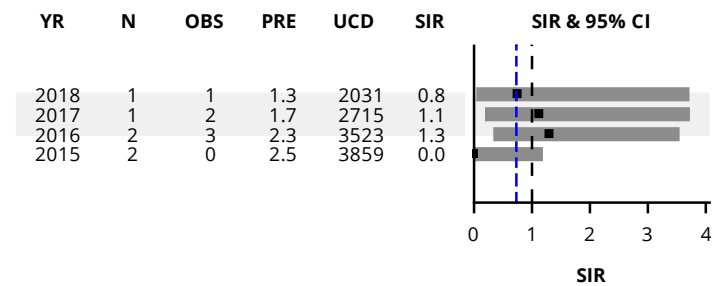


Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICUs

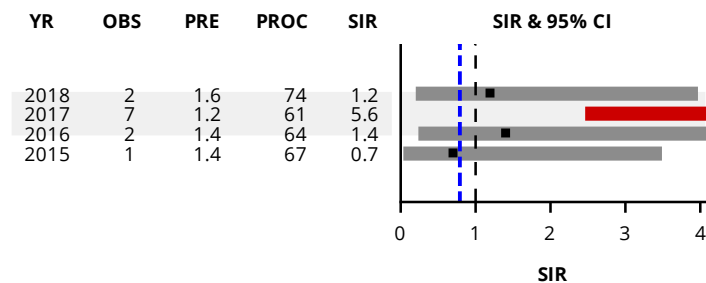


CAUTI - Adult/Pediatric Wards

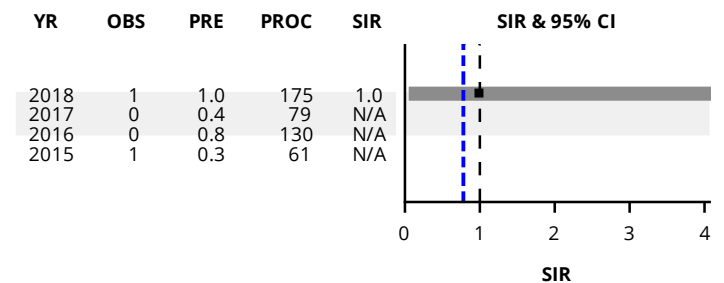


Surgical Site Infections (SSI)

SSI - Colon Surgery

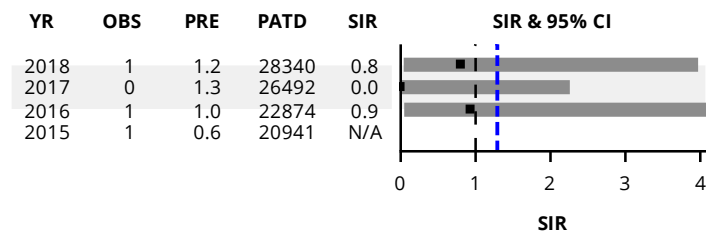


SSI - Abdominal Hysterectomy

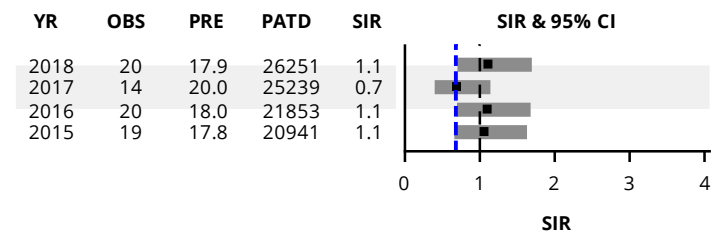


Healthcare Facility-Onset Laboratory Identified (LabID) Events

LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia



LabID - *C. difficile* Infection (CDI)



Data reported as of August 27, 2019

YR = reporting year; N = number of units reporting (CLABSI/CAUTI); OBS = observed number of infections

PRE = statistically 'predicted' number of infections, based on NHSN national baseline data

SIR = standardized infection ratio (observed/predicted number of infections)

CLD = central line days; UCD = urinary catheter days; PROC = procedures performed; PATD = patient days;

N/A = data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

■ Significantly lower than NHSN SIR of 1

■ Not significantly different from NHSN SIR of 1

■ Significantly higher than NHSN SIR of 1

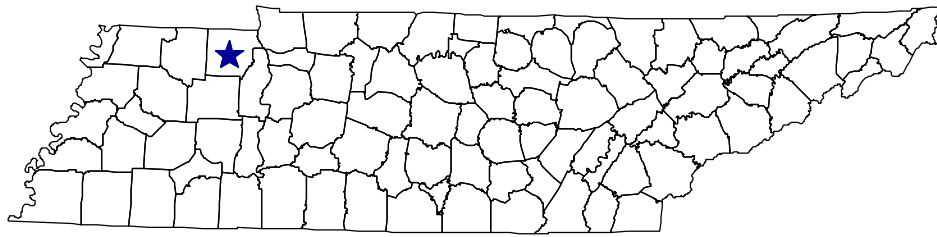
--- 2018 TN SIR

--- NHSN SIR=1

## Henry County Medical Center, Paris, Henry County

Medical School Affiliation: None

Bed Size Category: 100-399 beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2017-12/31/2017

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		
		Observed	Predicted		SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	1	0.1	228	N/A	N/A	0.85
	Adult/Pediatric Ward	0	0.4	617	N/A	N/A	0.68
CAUTI	Adult/Pediatric ICU	0	0.4	640	N/A	N/A	0.71
	Adult/Pediatric Ward	0	1.2	1976	0.00	( 0.00, 2.32 )	0.72
SSI	Colon surgery	0	0.5	27	N/A	N/A	0.83
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	1.08
LabID	MRSA bacteremia	0	0.3	11385	N/A	N/A	1.09
	C. difficile infection	1	4.7	10748	0.21	( 0.01, 1.04 )	0.83

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

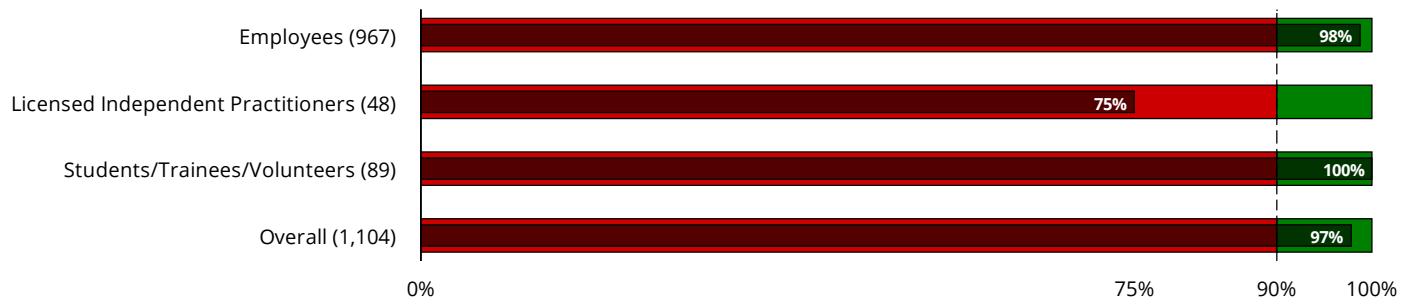
**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at Henry County Medical Center*

### Healthcare Personnel Influenza Vaccination - '2017/2018' Influenza Season

#### Healthcare Personnel Category (Total)



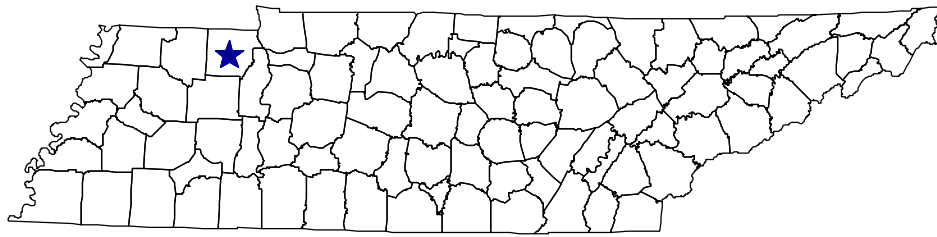
#### Healthcare Personnel Vaccinated (%)

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

## Henry County Medical Center, Paris, Henry County

Medical School Affiliation: None

Bed Size Category: 50-99 beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2018-12/31/2018

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		
		Observed	Predicted		SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	0	0.1	254	N/A	N/A	0.76
	Adult/Pediatric Ward	0	0.2	419	N/A	N/A	0.63
CAUTI	Adult/Pediatric ICU	0	0.3	638	N/A	N/A	0.70
	Adult/Pediatric Ward	0	0.9	1991	N/A	N/A	0.73
SSI	Colon surgery	N/A	N/A	N/A	N/A	N/A	0.79
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	0.78
LabID	MRSA bacteremia	0	0.4	11131	N/A	N/A	1.29
	C. difficile infection	3	3.5	10362	0.85	( 0.22, 2.30 )	0.68

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

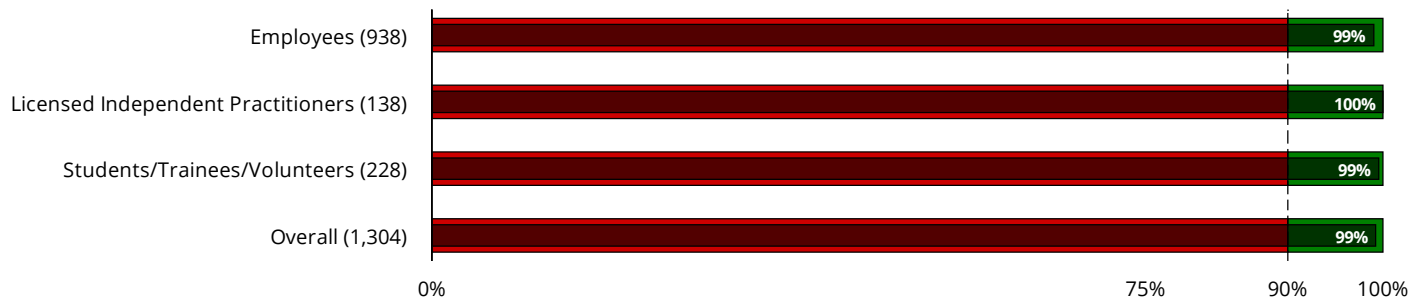
**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

**See page 3 for more detailed information about HAIs at Henry County Medical Center**

### Healthcare Personnel Influenza Vaccination - '2018/2019' Influenza Season

#### Healthcare Personnel Category (Total)



#### Healthcare Personnel Vaccinated (%)

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric ICUs

YR	N	OBS	PRE	CLD	SIR
2018	1	0	0.1	254	N/A
2017	1	1	0.1	228	N/A
2016	1	0	0.0	126	N/A
2015	1	0	0.1	192	N/A

N/A: Number of predicted infections <1; no SIR calculated

CLABSI - Adult/Pediatric Wards

YR	N	OBS	PRE	CLD	SIR
2018	1	0	0.2	419	N/A
2017	1	0	0.4	617	N/A
2016	1	0	0.3	608	N/A
2015	1	0	0.4	718	N/A

N/A: Number of predicted infections <1; no SIR calculated

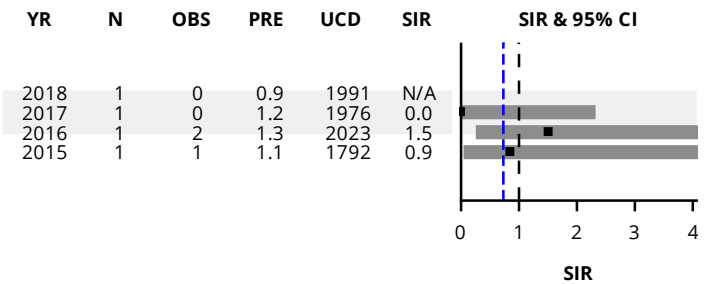
Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICUs

YR	N	OBS	PRE	UCD	SIR
2018	1	0	0.3	638	N/A
2017	1	0	0.4	640	N/A
2016	1	1	0.5	711	N/A
2015	1	0	0.4	649	N/A

N/A: Number of predicted infections <1; no SIR calculated

CAUTI - Adult/Pediatric Wards



Surgical Site Infections (SSI)

SSI - Colon Surgery

YR	OBS	PRE	PROC	SIR
2018	N/A	N/A	N/A	N/A
2017	0	0.5	27	N/A
2016	N/A	N/A	N/A	N/A
2015	N/A	N/A	N/A	N/A

N/A: Number of predicted infections <1; no SIR calculated

SSI - Abdominal Hysterectomy

YR	OBS	PRE	PROC	SIR
2018	N/A	N/A	N/A	N/A
2017	N/A	N/A	N/A	N/A
2016	N/A	N/A	N/A	N/A
2015	N/A	N/A	N/A	N/A

N/A: Number of predicted infections <1; no SIR calculated

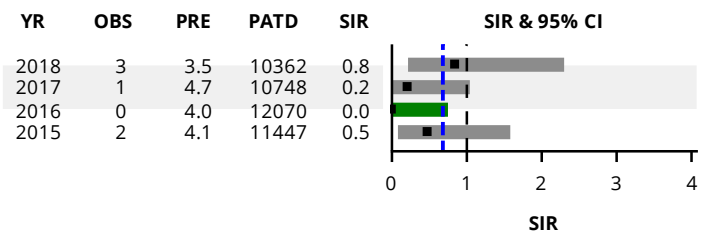
Healthcare Facility-Onset Laboratory Identified (LabID) Events

LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia

YR	OBS	PRE	PATD	SIR
2018	0	0.4	11131	N/A
2017	0	0.3	11385	N/A
2016	0	0.4	12783	N/A
2015	1	0.5	12210	N/A

N/A: Number of predicted infections <1; no SIR calculated

LabID - *C. difficile* Infection (CDI)



Data reported as of August 27, 2019

YR = reporting year; N = number of units reporting (CLABSI/CAUTI); OBS = observed number of infections

PRE = statistically 'predicted' number of infections, based on NHSN national baseline data

SIR = standardized infection ratio (observed/predicted number of infections)

CLD = central line days; UCD = urinary catheter days; PROC = procedures performed; PATD = patient days;

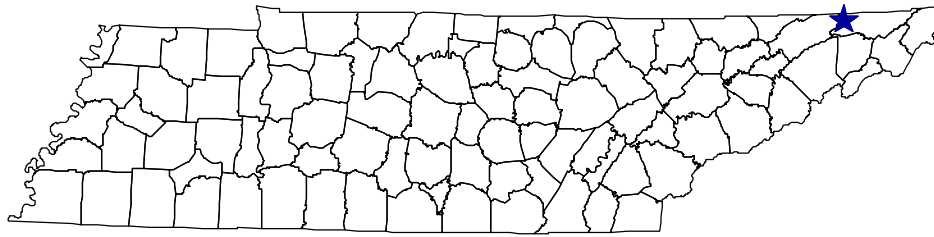
N/A = data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

- Significantly lower than NHSN SIR of 1
- Not significantly different from NHSN SIR of 1
- Significantly higher than NHSN SIR of 1
- - - 2018 TN SIR
- - - NHSN SIR=1

## Holston Valley Medical Center, Kingsport, Sullivan County

Medical School Affiliation: Major teaching

Bed Size Category: 100-399 beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2017-12/31/2017

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		TN SIR
		Observed	Predicted		SIR*	95% CI	
CLABSI	Adult/Pediatric ICU	4	6.4	5746	0.62	( 0.20, 1.49 )	0.85
	Neonatal ICU	0	0.7	671	N/A	N/A	0.75
	Adult/Pediatric Ward	3	5.0	5140	0.60	( 0.15, 1.63 )	0.68
CAUTI	Adult/Pediatric ICU	3	14.2	8813	<b>0.21</b>	<b>( 0.05, 0.57 )</b>	0.71
	Adult/Pediatric Ward	0	6.9	5496	<b>0.00</b>	<b>( 0.00, 0.43 )</b>	0.72
SSI	Colon surgery	5	5.7	243	0.86	( 0.32, 1.92 )	0.83
	Abdominal hysterectomy	0	1.9	360	0.00	( 0.00, 1.54 )	1.08
LabID	MRSA bacteremia	3	9.2	85352	<b>0.32</b>	<b>( 0.08, 0.88 )</b>	1.09
	C. difficile infection	73	51.9	82011	<b>1.40</b>	<b>( 1.11, 1.76 )</b>	0.83

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

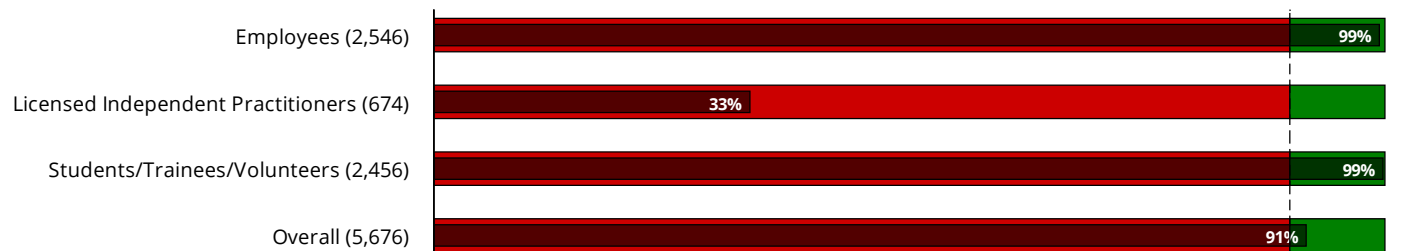
**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at Holston Valley Medical Center*

### Healthcare Personnel Influenza Vaccination - '2017/2018' Influenza Season

#### Healthcare Personnel Category (Total)



#### Healthcare Personnel Vaccinated (%)

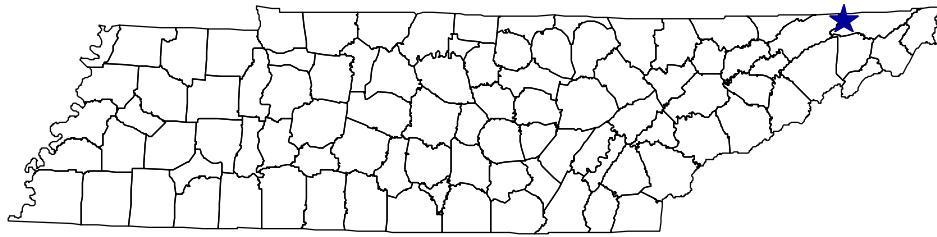
■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)



## Holston Valley Medical Center, Kingsport, Sullivan County

Medical School Affiliation: Major teaching

Bed Size Category: 100-399 beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2018-12/31/2018

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		TN SIR
		Observed	Predicted		SIR*	95% CI	
CLABSI	Adult/Pediatric ICU	2	5.8	5177	0.34	( 0.06, 1.13 )	0.76
	Neonatal ICU	0	0.9	759	<b>N/A</b>	<b>N/A</b>	0.79
	Adult/Pediatric Ward	1	4.6	4760	0.22	( 0.01, 1.06 )	0.63
CAUTI	Adult/Pediatric ICU	5	13.6	8330	<b>0.37</b>	<b>( 0.13, 0.81 )</b>	0.70
	Adult/Pediatric Ward	1	6.4	5112	<b>0.16</b>	<b>( 0.01, 0.77 )</b>	0.73
SSI	Colon surgery	3	5.3	215	0.56	( 0.14, 1.53 )	0.79
	Abdominal hysterectomy	0	1.6	324	0.00	( 0.00, 1.87 )	0.78
LabID	MRSA bacteremia	6	9.4	86905	0.63	( 0.26, 1.32 )	1.29
	C. difficile infection	74	69.4	83600	1.07	( 0.84, 1.33 )	0.68

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

**N/A**: Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at Holston Valley Medical Center*

### Healthcare Personnel Influenza Vaccination - '2018/2019' Influenza Season

#### Healthcare Personnel Category (Total)

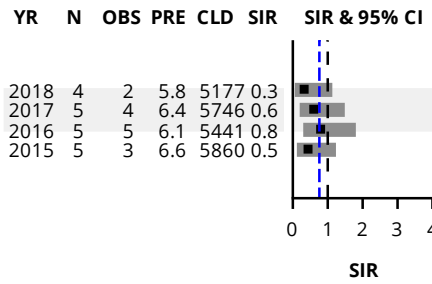


#### Healthcare Personnel Vaccinated (%)

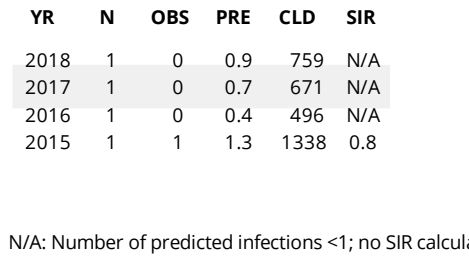
■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

### Central Line-Associated Bloodstream Infections (CLABSI)

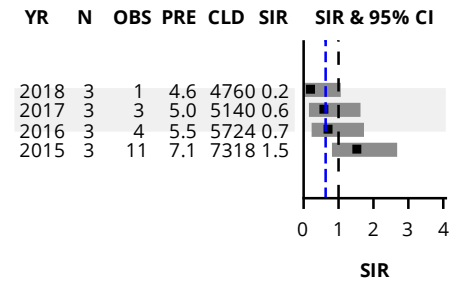
#### CLABSI - Adult/Pediatric ICUs



#### CLABSI - Neonatal ICUs

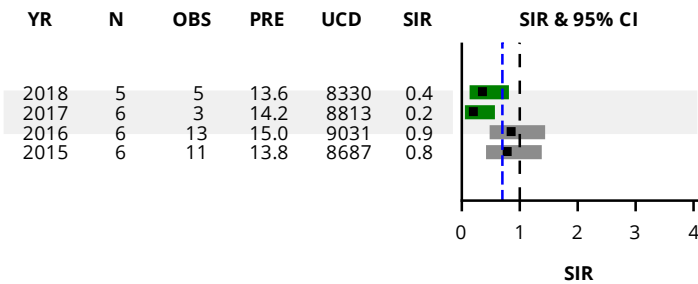


#### CLABSI - Adult/Pediatric Wards

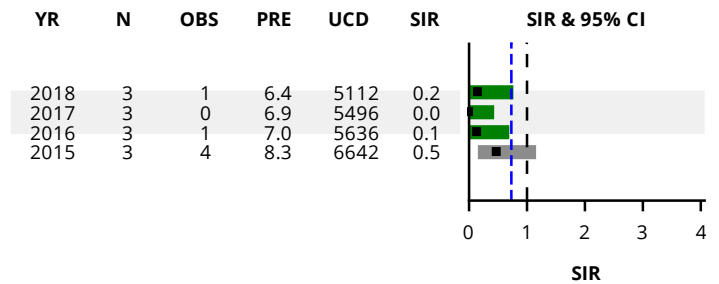


### Catheter-Associated Urinary Tract Infections (CAUTI)

#### CAUTI - Adult/Pediatric ICUs

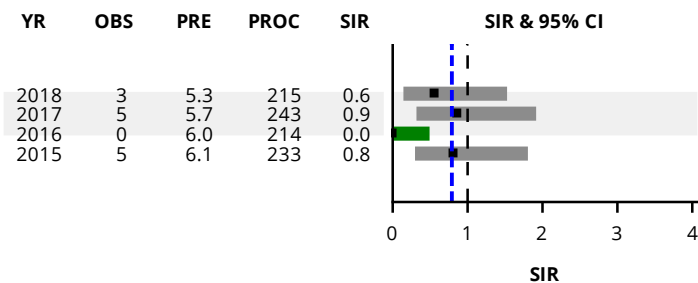


#### CAUTI - Adult/Pediatric Wards

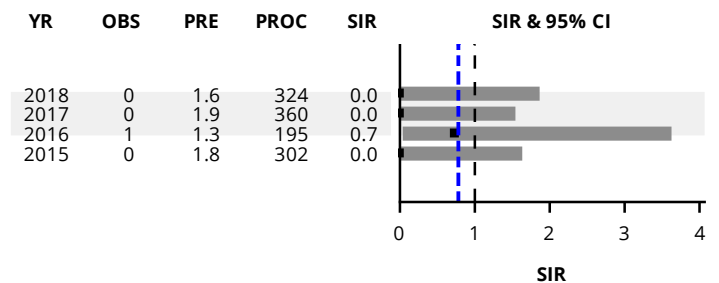


### Surgical Site Infections (SSI)

#### SSI - Colon Surgery

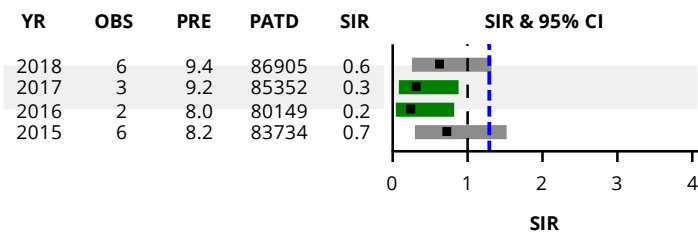


#### SSI - Abdominal Hysterectomy

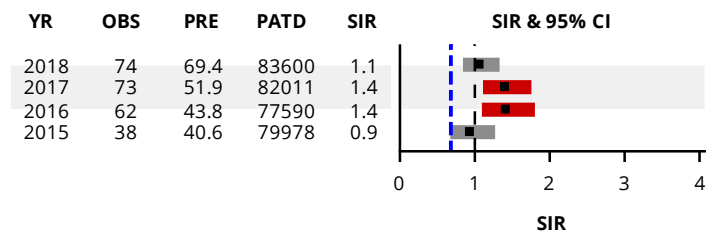


### Healthcare Facility-Onset Laboratory Identified (LabID) Events

#### LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia



#### LabID - *C. difficile* Infection (CDI)



Data reported as of August 27, 2019

YR = reporting year; N = number of units reporting (CLABSI/CAUTI); OBS = observed number of infections

PRE = statistically 'predicted' number of infections, based on NHSN national baseline data

SIR = standardized infection ratio (observed/predicted number of infections)

CLD = central line days; UCD = urinary catheter days; PROC = procedures performed; PATD = patient days;

N/A = data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

■ Significantly lower than NHSN SIR of 1

■ Not significantly different from NHSN SIR of 1

■ Significantly higher than NHSN SIR of 1

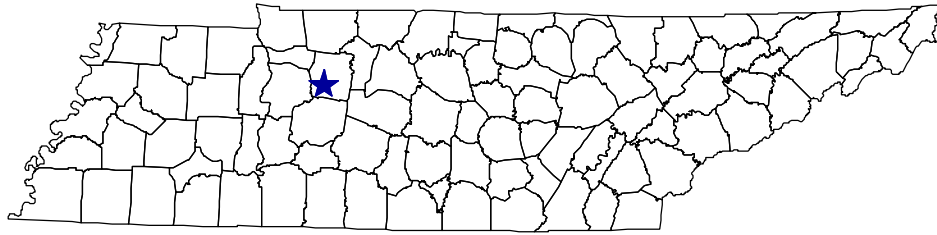
--- 2018 TN SIR

--- NHSN SIR=1

## Horizon Medical Center, Dickson, Dickson County

Medical School Affiliation: Undergraduate teaching

Bed Size Category: 50-99 beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2017-12/31/2017

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		
		Observed	Predicted		SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	0	0.3	505	N/A	N/A	0.85
	Adult/Pediatric Ward	0	0.5	768	N/A	N/A	0.68
CAUTI	Adult/Pediatric ICU	0	0.7	1047	N/A	N/A	0.71
	Adult/Pediatric Ward	1	0.8	1296	N/A	N/A	0.72
SSI	Colon surgery	0	0.9	44	N/A	N/A	0.83
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	1.08
LabID	MRSA bacteremia	0	0.7	19828	N/A	N/A	1.09
	C. difficile infection	7	12.8	18888	0.55	( 0.24, 1.08 )	0.83

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

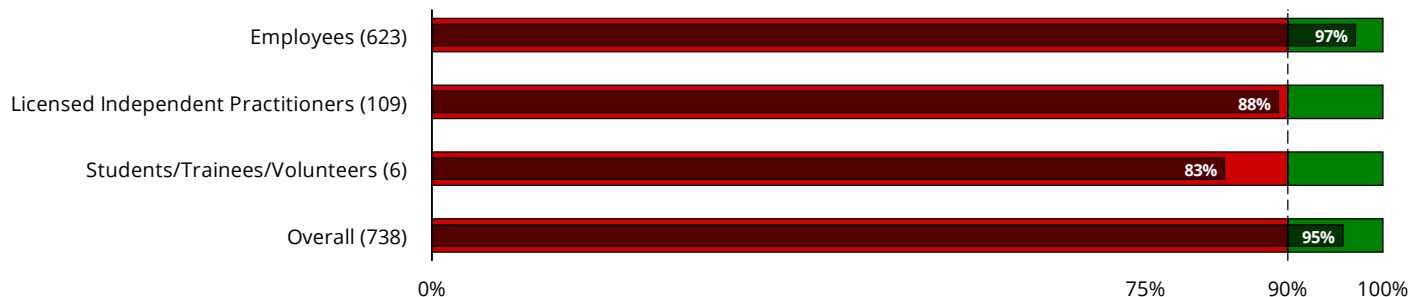
**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at Horizon Medical Center*

### Healthcare Personnel Influenza Vaccination - '2017/2018' Influenza Season

#### Healthcare Personnel Category (Total)



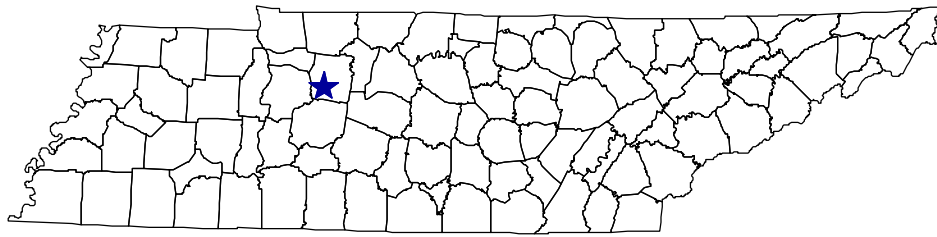
#### Healthcare Personnel Vaccinated (%)

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

## Horizon Medical Center, Dickson, Dickson County

Medical School Affiliation: Undergraduate teaching

Bed Size Category: 50-99 beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2018-12/31/2018

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		
		Observed	Predicted		SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	0	0.2	304	N/A	N/A	0.76
	Adult/Pediatric Ward	0	0.4	649	N/A	N/A	0.63
CAUTI	Adult/Pediatric ICU	1	0.6	872	N/A	N/A	0.70
	Adult/Pediatric Ward	1	0.9	1348	N/A	N/A	0.73
SSI	Colon surgery	0	0.6	33	N/A	N/A	0.79
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	0.78
LabID	MRSA bacteremia	2	0.8	20500	N/A	N/A	1.29
	C. difficile infection	6	11.6	19252	0.51	( 0.21, 1.07 )	0.68

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at Horizon Medical Center*

### Healthcare Personnel Influenza Vaccination - '2018/2019' Influenza Season

#### Healthcare Personnel Category (Total)



#### Healthcare Personnel Vaccinated (%)

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric ICUs

YR	N	OBS	PRE	CLD	SIR
2018	1	0	0.2	304	N/A
2017	1	0	0.3	505	N/A
2016	1	1	0.4	566	N/A
2015	1	0	0.3	574	N/A

N/A: Number of predicted infections <1; no SIR calculated

CLABSI - Adult/Pediatric Wards

YR	N	OBS	PRE	CLD	SIR
2018	2	0	0.4	649	N/A
2017	2	0	0.5	768	N/A
2016	2	1	0.6	1038	N/A
2015	2	0	0.6	1069	N/A

N/A: Number of predicted infections <1; no SIR calculated

Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICUs

YR	N	OBS	PRE	UCD	SIR
2018	1	1	0.6	872	N/A
2017	1	0	0.7	1047	N/A
2016	1	0	0.7	1049	N/A
2015	1	1	0.5	1049	N/A

N/A: Number of predicted infections <1; no SIR calculated

CAUTI - Adult/Pediatric Wards

YR	N	OBS	PRE	UCD	SIR	SIR & 95% CI
2018	2	1	0.9	1348	N/A	
2017	2	1	0.8	1296	N/A	
2016	2	3	1.0	1509	2.9	
2015	2	2	0.8	1592	N/A	

N/A: Number of predicted infections <1; no SIR calculated

Surgical Site Infections (SSI)

SSI - Colon Surgery

YR	OBS	PRE	PROC	SIR
2018	0	0.6	33	N/A
2017	0	0.9	44	N/A
2016	0	0.8	43	N/A
2015	0	0.3	22	N/A

N/A: Number of predicted infections <1; no SIR calculated

SSI - Abdominal Hysterectomy

YR	OBS	PRE	PROC	SIR
2018	N/A	N/A	N/A	N/A
2017	N/A	N/A	N/A	N/A
2016	N/A	N/A	N/A	N/A
2015	N/A	N/A	N/A	N/A

N/A: Number of predicted infections <1; no SIR calculated

Healthcare Facility-Onset Laboratory Identified (LabID) Events

LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia

YR	OBS	PRE	PATD	SIR
2018	2	0.8	20500	N/A
2017	0	0.7	19828	N/A
2016	0	0.5	18644	N/A
2015	0	0.4	18381	N/A

N/A: Number of predicted infections <1; no SIR calculated

LabID - *C. difficile* Infection (CDI)

YR	OBS	PRE	PATD	SIR	SIR & 95% CI
2018	6	11.6	19252	0.5	
2017	7	12.8	18888	0.5	
2016	6	10.5	17856	0.6	
2015	14	11.3	17561	1.2	

N/A: Number of predicted infections <1; no SIR calculated

Data reported as of August 27, 2019

YR = reporting year; N = number of units reporting (CLABSI/CAUTI); OBS = observed number of infections

PRE = statistically 'predicted' number of infections, based on NHSN national baseline data

SIR = standardized infection ratio (observed/predicted number of infections)

CLD = central line days; UCD = urinary catheter days; PROC = procedures performed; PATD = patient days;

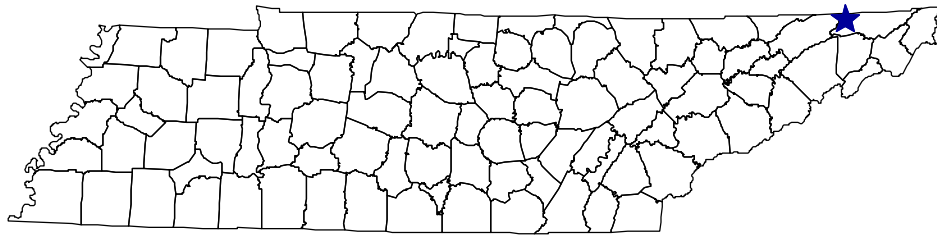
N/A = data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

- Significantly lower than NHSN SIR of 1
- Not significantly different from NHSN SIR of 1
- Significantly higher than NHSN SIR of 1
- - - 2018 TN SIR
- - - NHSN SIR=1

## Indian Path Community Hospital, Kingsport, Sullivan County

Medical School Affiliation: Graduate teaching

Bed Size Category: 50-99 beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2017-12/31/2017

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		
		Observed	Predicted		SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	0	0.7	950	N/A	N/A	0.85
	Adult/Pediatric Ward	0	0.4	711	N/A	N/A	0.68
CAUTI	Adult/Pediatric ICU	0	1.3	1584	0.00	( 0.00, 2.27 )	0.71
	Adult/Pediatric Ward	1	1.1	1479	0.91	( 0.05, 4.48 )	0.72
SSI	Colon surgery	2	0.8	47	N/A	N/A	0.83
	Abdominal hysterectomy	0	0.0	21	N/A	N/A	1.08
LabID	MRSA bacteremia	0	1.1	22641	0.00	( 0.00, 2.68 )	1.09
	C. difficile infection	24	11.4	21200	2.09	( 1.37, 3.07 )	0.83

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

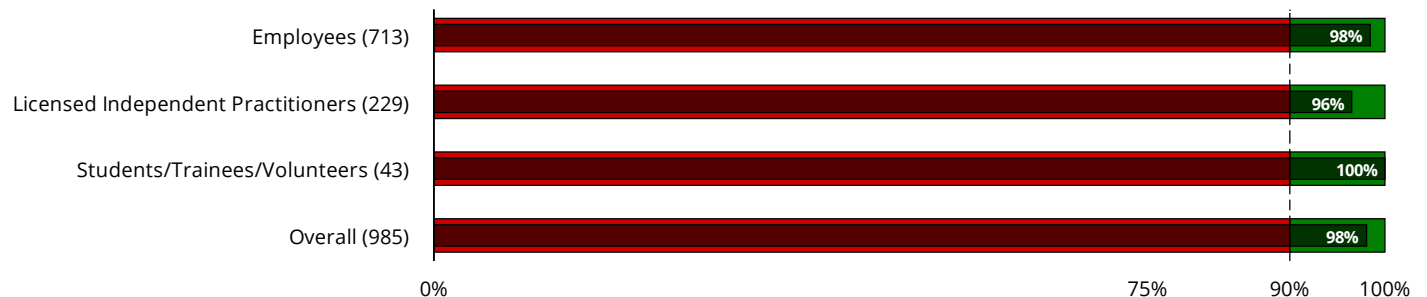
**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at Indian Path Community Hospital*

### Healthcare Personnel Influenza Vaccination - '2017/2018' Influenza Season

#### Healthcare Personnel Category (Total)



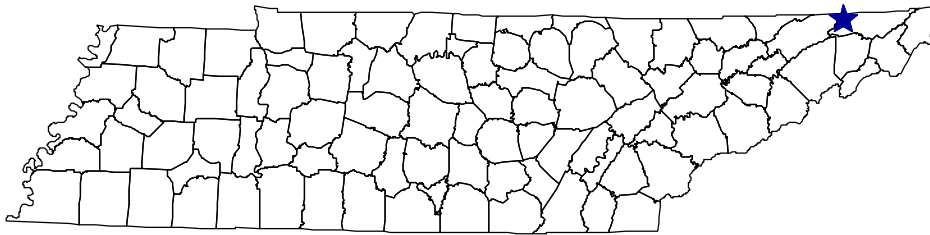
#### Healthcare Personnel Vaccinated (%)

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

## Indian Path Community Hospital, Kingsport, Sullivan County

Medical School Affiliation: Graduate teaching

Bed Size Category: 50-99 beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2018-12/31/2018

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		
		Observed	Predicted		SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	0	0.6	802	N/A	N/A	0.76
	Adult/Pediatric Ward	0	0.3	488	N/A	N/A	0.63
CAUTI	Adult/Pediatric ICU	0	0.7	1208	N/A	N/A	0.70
	Adult/Pediatric Ward	0	0.5	1014	N/A	N/A	0.73
SSI	Colon surgery	0	1.1	61	0.00	( 0.00, 2.52 )	0.79
	Abdominal hysterectomy	0	0.1	31	N/A	N/A	0.78
LabID	MRSA bacteremia	1	0.8	18756	N/A	N/A	1.29
	C. difficile infection	7	10.4	17478	0.67	( 0.29, 1.32 )	0.68

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at Indian Path Community Hospital*

### Healthcare Personnel Influenza Vaccination - '2018/2019' Influenza Season

#### Healthcare Personnel Category (Total)

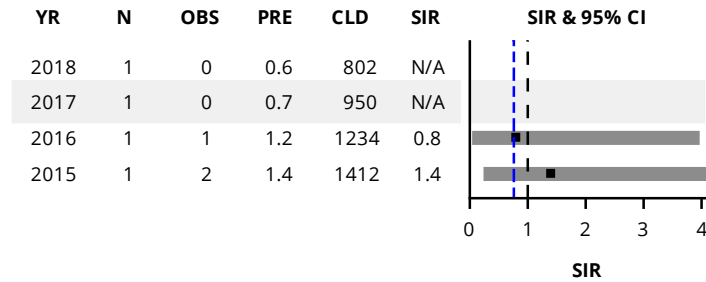


#### Healthcare Personnel Vaccinated (%)

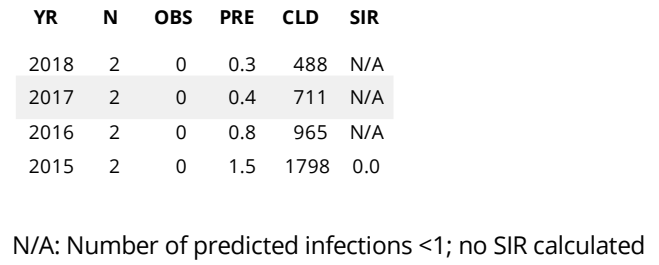
■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric ICUs

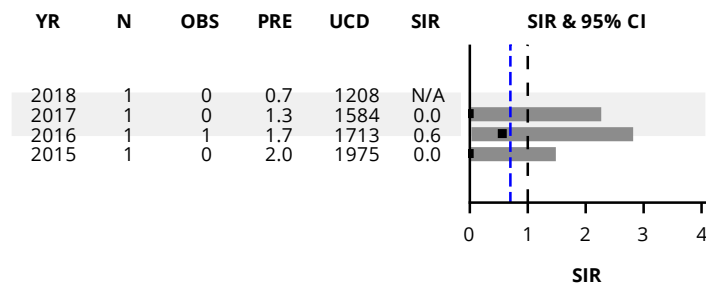


CLABSI - Adult/Pediatric Wards

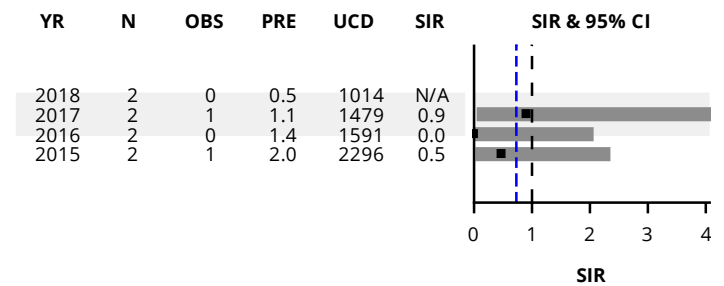


Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICUs

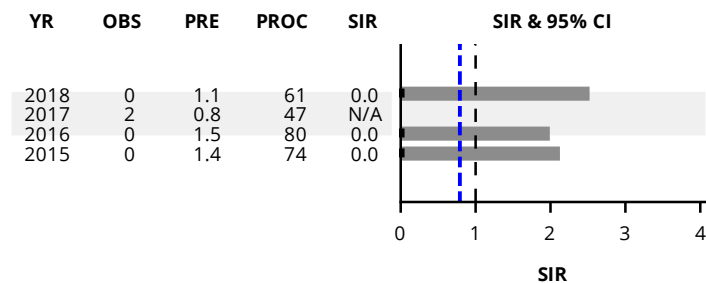


CAUTI - Adult/Pediatric Wards

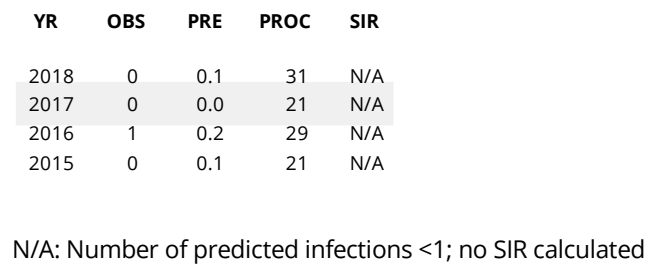


Surgical Site Infections (SSI)

SSI - Colon Surgery

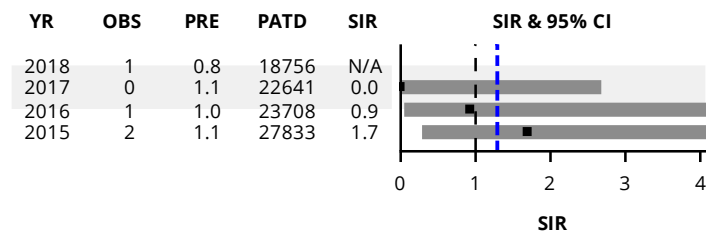


SSI - Abdominal Hysterectomy

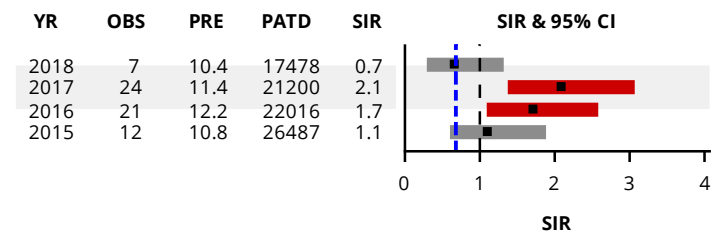


Healthcare Facility-Onset Laboratory Identified (LabID) Events

LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia



LabID - *C. difficile* Infection (CDI)



Data reported as of August 27, 2019

YR = reporting year; N = number of units reporting (CLABSI/CAUTI); OBS = observed number of infections

PRE = statistically 'predicted' number of infections, based on NHSN national baseline data

SIR = standardized infection ratio (observed/predicted number of infections)

CLD = central line days; UCD = urinary catheter days; PROC = procedures performed; PATD = patient days;

N/A = data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

■ Significantly lower than NHSN SIR of 1

■ Not significantly different from NHSN SIR of 1

■ Significantly higher than NHSN SIR of 1

--- 2018 TN SIR

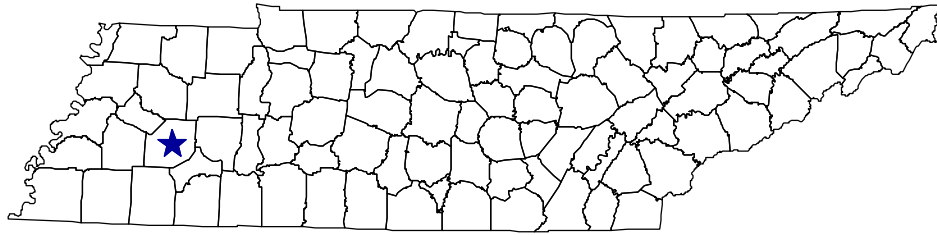
--- NHSN SIR=1



## Jackson Madison County General Hosp., Jackson, Madison County

Medical School Affiliation: Graduate teaching

Bed Size Category: 400+ beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2017-12/31/2017

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		
		Observed	Predicted		SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	13	12.6	12603	1.02	( 0.57, 1.71 )	0.85
	Neonatal ICU	0	1.1	630	0.00	( 0.00, 2.60 )	0.75
	Adult/Pediatric Ward	4	12.0	13843	<b>0.33</b>	<b>( 0.11, 0.80 )</b>	0.68
CAUTI	Adult/Pediatric ICU	19	19.4	14360	0.98	( 0.61, 1.50 )	0.71
	Adult/Pediatric Ward	6	11.2	11855	0.53	( 0.22, 1.11 )	0.72
SSI	Colon surgery	10	8.5	336	1.17	( 0.59, 2.09 )	0.83
	Abdominal hysterectomy	1	1.8	293	0.54	( 0.03, 2.67 )	1.08
LabID	MRSA bacteremia	10	13.6	170171	0.73	( 0.37, 1.31 )	1.09
	C. difficile infection	131	158.9	158854	<b>0.82</b>	<b>( 0.69, 0.98 )</b>	0.83

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

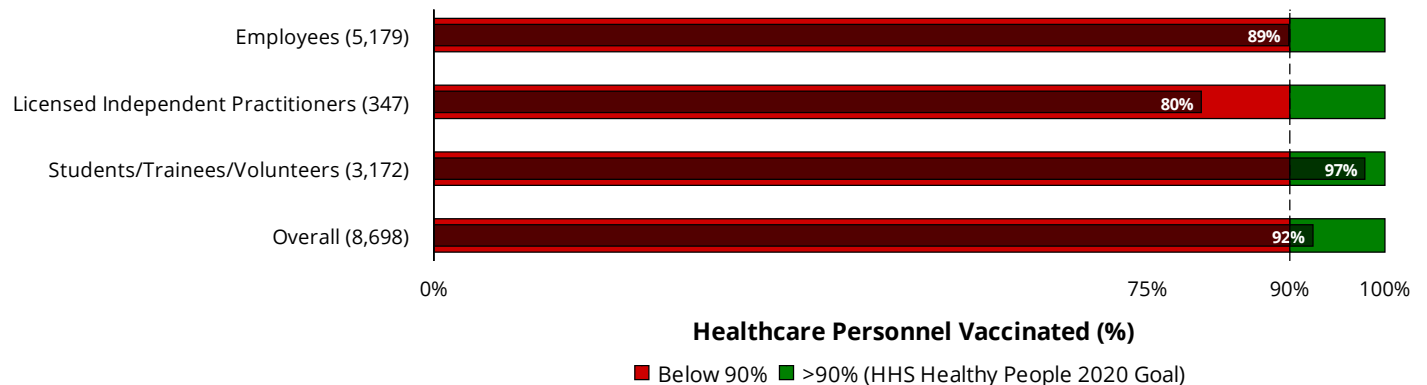
**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at Jackson Madison County General Hosp.*

### Healthcare Personnel Influenza Vaccination - '2017/2018' Influenza Season

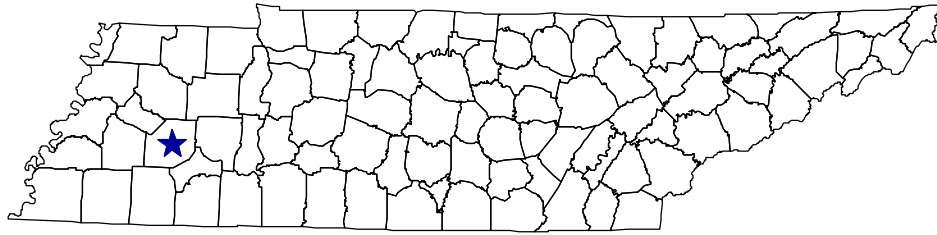
#### Healthcare Personnel Category (Total)



## Jackson Madison County General Hosp., Jackson, Madison County

Medical School Affiliation: Major teaching

Bed Size Category: 400+ beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2018-12/31/2018

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		TN SIR
		Observed	Predicted		SIR*	95% CI	
CLABSI	Adult/Pediatric ICU	26	13.2	11759	<b>1.96</b>	<b>( 1.31, 2.83 )</b>	0.76
	Neonatal ICU	1	1.2	660	0.80	( 0.04, 3.96 )	0.79
	Adult/Pediatric Ward	10	12.4	12738	0.81	( 0.41, 1.44 )	0.63
CAUTI	Adult/Pediatric ICU	12	23.6	13627	<b>0.51</b>	<b>( 0.28, 0.86 )</b>	0.70
	Adult/Pediatric Ward	7	11.7	9784	0.60	( 0.26, 1.18 )	0.73
SSI	Colon surgery	8	8.5	339	0.93	( 0.43, 1.77 )	0.79
	Abdominal hysterectomy	1	1.9	278	0.52	( 0.03, 2.58 )	0.78
LabID	MRSA bacteremia	23	17.4	160222	1.32	( 0.86, 1.95 )	1.29
	C. difficile infection	161	151.4	149107	1.06	( 0.91, 1.24 )	0.68

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

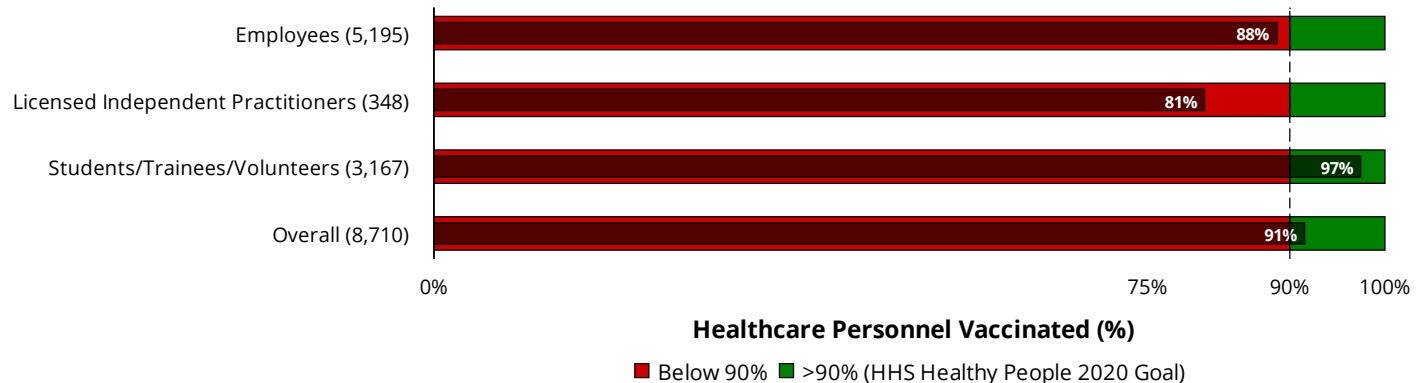
**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at Jackson Madison County General Hosp.*

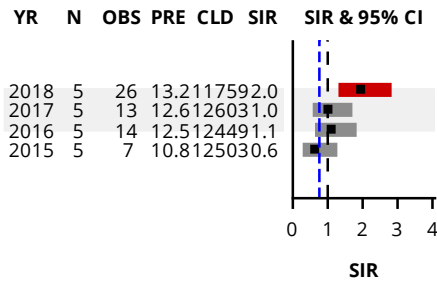
### Healthcare Personnel Influenza Vaccination - '2018/2019' Influenza Season

#### Healthcare Personnel Category (Total)

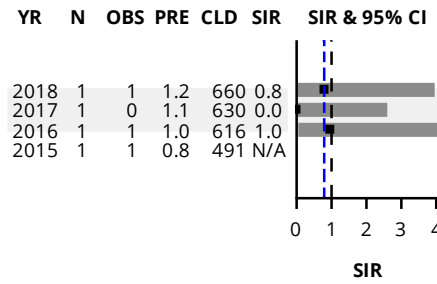


Central Line-Associated Bloodstream Infections (CLABSI)

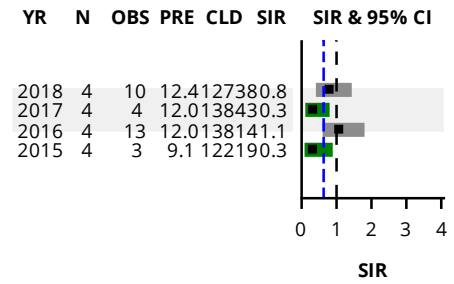
CLABSI - Adult/Pediatric ICUs



CLABSI - Neonatal ICUs

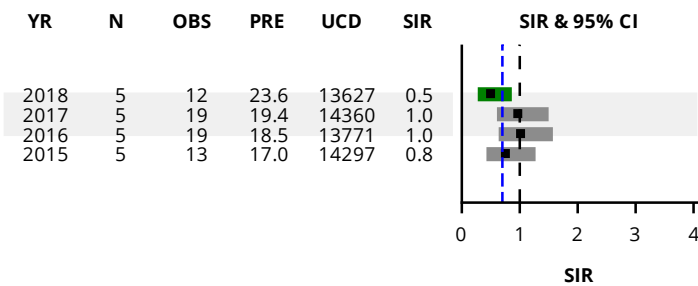


CLABSI - Adult/Pediatric Wards

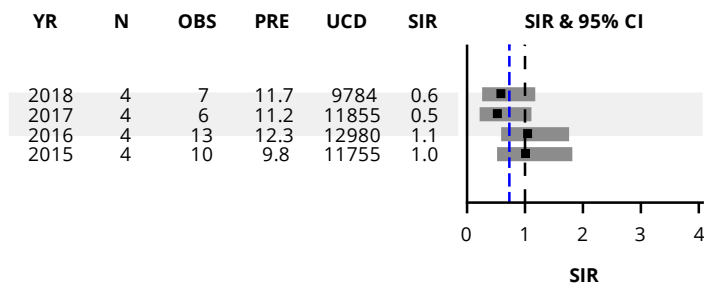


Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICUs

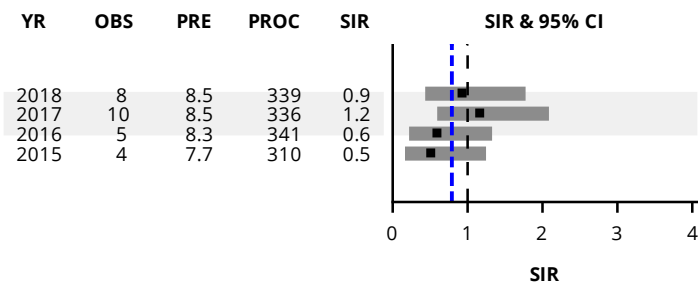


CAUTI - Adult/Pediatric Wards

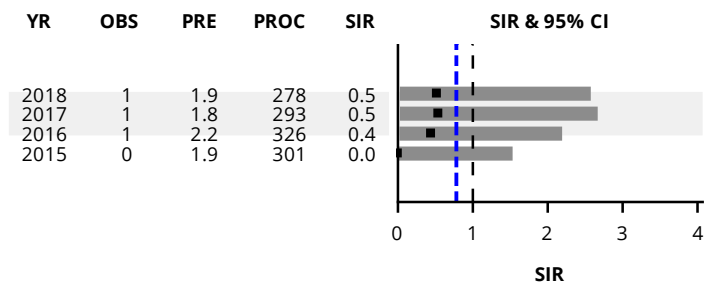


Surgical Site Infections (SSI)

SSI - Colon Surgery

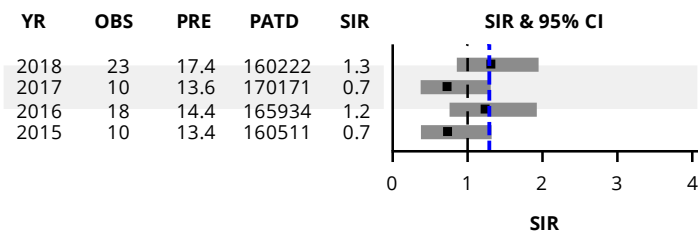


SSI - Abdominal Hysterectomy

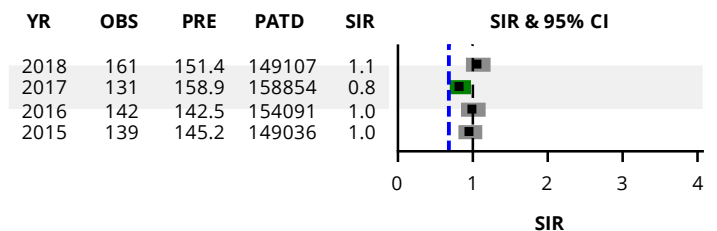


Healthcare Facility-Onset Laboratory Identified (LabID) Events

LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia



LabID - *C. difficile* Infection (CDI)



Data reported as of August 27, 2019

YR = reporting year; N = number of units reporting (CLABSI/CAUTI); OBS = observed number of infections

PRE = statistically 'predicted' number of infections, based on NHSN national baseline data

SIR = standardized infection ratio (observed/predicted number of infections)

CLD = central line days; UCD = urinary catheter days; PROC = procedures performed; PATD = patient days;

N/A = data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

■ Significantly lower than NHSN SIR of 1

■ Not significantly different from NHSN SIR of 1

■ Significantly higher than NHSN SIR of 1

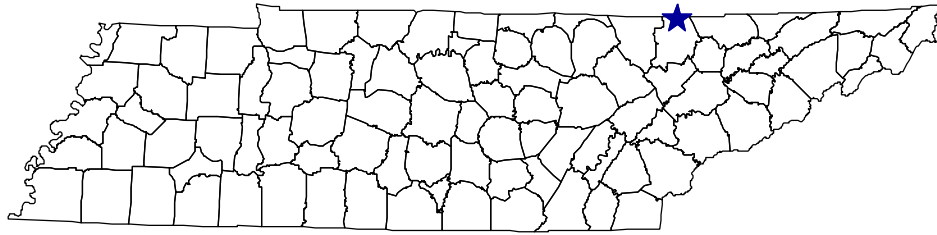
--- 2018 TN SIR

--- NHSN SIR=1

**Jellico Community Hospital, Jellico, Campbell County**

Medical School Affiliation: None

Bed Size Category: <50 beds



**Healthcare-Associated Infections (HAI) Summary**

**Standardized Infection Ratio (SIR) by Infection Type, 01/01/2017-12/31/2017**

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		
		Observed	Predicted		SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	0	0.0	131	N/A	N/A	0.85
	Adult/Pediatric Ward	1	0.0	150	N/A	N/A	0.68
CAUTI	Adult/Pediatric ICU	0	0.3	599	N/A	N/A	0.71
	Adult/Pediatric Ward	0	0.2	471	N/A	N/A	0.72
SSI	Colon surgery	N/A	N/A	N/A	N/A	N/A	0.83
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	1.08
LabID	MRSA bacteremia	1	0.1	4343	N/A	N/A	1.09
	C. difficile infection	1	2.0	3858	0.48	( 0.02, 2.35 )	0.83

Green highlighting indicates an SIR significantly LOWER than the 2015 national baseline

Red highlighting indicates an SIR significantly HIGHER than the 2015 national baseline

N/A: Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

See page 3 for more detailed information about HAIs at Jellico Community Hospital

**Healthcare Personnel Influenza Vaccination - '2017/2018' Influenza Season**

**Healthcare Personnel Category (Total)**



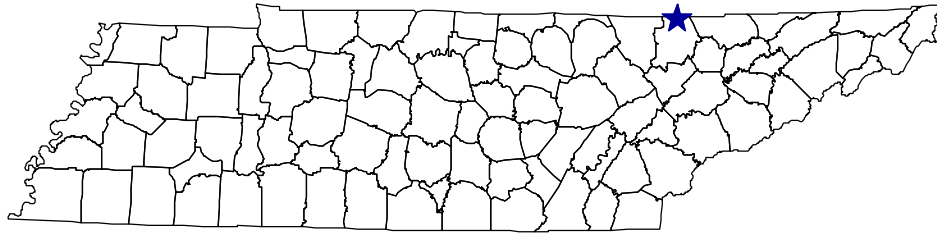
**Healthcare Personnel Vaccinated (%)**

Below 90% >90% (HHS Healthy People 2020 Goal)

**Jellico Community Hospital, Jellico, Campbell County**

Medical School Affiliation: None

Bed Size Category: <50 beds



**Healthcare-Associated Infections (HAI) Summary**

**Standardized Infection Ratio (SIR) by Infection Type, 01/01/2018-12/31/2018**

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		
		Observed	Predicted		SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	N/A	N/A	N/A	N/A	N/A	0.76
	Adult/Pediatric Ward	0	0.0	55	N/A	N/A	0.63
CAUTI	Adult/Pediatric ICU	0	0.1	219	N/A	N/A	0.70
	Adult/Pediatric Ward	0	0.1	236	N/A	N/A	0.73
SSI	Colon surgery	N/A	N/A	N/A	N/A	N/A	0.79
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	0.78
LabID	MRSA bacteremia	0	0.0	2546	N/A	N/A	1.29
	C. difficile infection	0	0.6	2185	N/A	N/A	0.68

Green highlighting indicates an SIR significantly LOWER than the 2015 national baseline

Red highlighting indicates an SIR significantly HIGHER than the 2015 national baseline

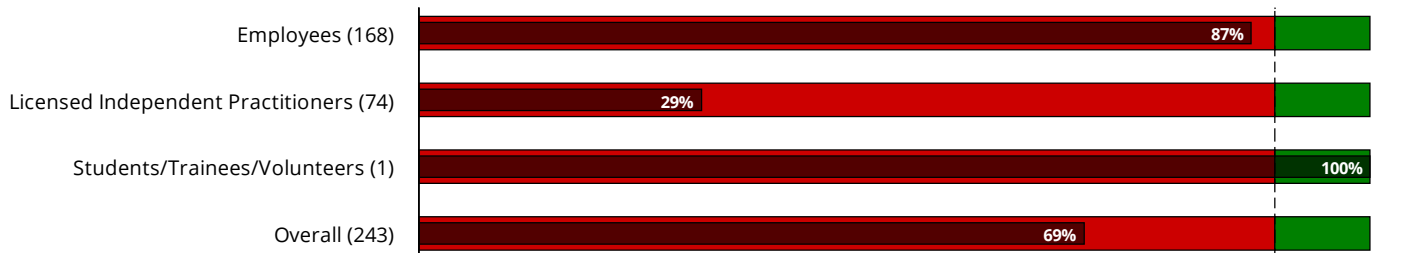
N/A: Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

See page 3 for more detailed information about HAIs at Jellico Community Hospital

**Healthcare Personnel Influenza Vaccination - '2018/2019' Influenza Season**

**Healthcare Personnel Category (Total)**



**Healthcare Personnel Vaccinated (%)**

Below 90% >90% (HHS Healthy People 2020 Goal)

Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric ICUs

YR	N	OBS	PRE	CLD	SIR
2018	1	N/A	N/A	N/A	N/A
2017	1	0	0.0	131	N/A
2016	1	0	0.0	103	N/A
2015	1	0	0.0	130	N/A

N/A: Number of predicted infections <1; no SIR calculated

CLABSI - Adult/Pediatric Wards

YR	N	OBS	PRE	CLD	SIR
2018	1	0	0.0	55	N/A
2017	1	1	0.0	150	N/A
2016	1	0	0.0	86	N/A
2015	1	1	0.1	240	N/A

N/A: Number of predicted infections <1; no SIR calculated

Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICUs

YR	N	OBS	PRE	UCD	SIR
2018	1	0	0.1	219	N/A
2017	1	0	0.3	599	N/A
2016	1	0	0.2	374	N/A
2015	1	0	0.2	542	N/A

N/A: Number of predicted infections <1; no SIR calculated

CAUTI - Adult/Pediatric Wards

YR	N	OBS	PRE	UCD	SIR
2018	1	0	0.1	236	N/A
2017	1	0	0.2	471	N/A
2016	1	0	0.1	385	N/A
2015	1	0	0.2	549	N/A

N/A: Number of predicted infections <1; no SIR calculated

Surgical Site Infections (SSI)

SSI - Colon Surgery

YR	OBS	PRE	PROC	SIR
2018	N/A	N/A	N/A	N/A
2017	N/A	N/A	N/A	N/A
2016	N/A	N/A	N/A	N/A
2015	N/A	N/A	N/A	N/A

N/A: Number of predicted infections <1; no SIR calculated

SSI - Abdominal Hysterectomy

YR	OBS	PRE	PROC	SIR
2018	N/A	N/A	N/A	N/A
2017	N/A	N/A	N/A	N/A
2016	N/A	N/A	N/A	N/A
2015	N/A	N/A	N/A	N/A

N/A: Number of predicted infections <1; no SIR calculated

Healthcare Facility-Onset Laboratory Identified (LabID) Events

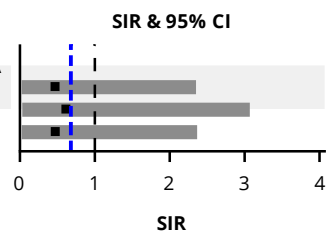
LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia

YR	OBS	PRE	PATD	SIR
2018	0	0.0	2546	N/A
2017	1	0.1	4343	N/A
2016	0	0.0	3646	N/A
2015	0	0.0	4586	N/A

N/A: Number of predicted infections <1; no SIR calculated

LabID - *C. difficile* Infection (CDI)

YR	OBS	PRE	PATD	SIR
2018	0	0.6	2185	N/A
2017	1	2.0	3858	0.5
2016	1	1.6	3226	0.6
2015	1	2.0	4145	0.5



Data reported as of August 27, 2019

YR = reporting year; N = number of units reporting (CLABSI/CAUTI); OBS = observed number of infections

PRE = statistically 'predicted' number of infections, based on NHSN national baseline data

SIR = standardized infection ratio (observed/predicted number of infections)

CLD = central line days; UCD = urinary catheter days; PROC = procedures performed; PATD = patient days;

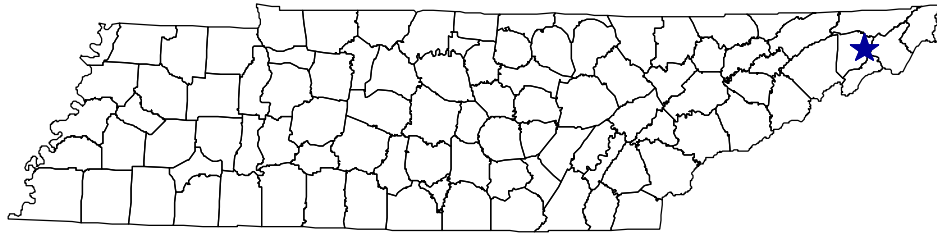
N/A = data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

- Significantly lower than NHSN SIR of 1
- Not significantly different from NHSN SIR of 1
- Significantly higher than NHSN SIR of 1
- - - 2018 TN SIR
- - - NHSN SIR=1

**Johnson City Medical Center, Johnson City, Washington County**

Medical School Affiliation: Major teaching

Bed Size Category: 400+ beds



**Healthcare-Associated Infections (HAI) Summary**

**Standardized Infection Ratio (SIR) by Infection Type, 01/01/2017-12/31/2017**

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		
		Observed	Predicted		SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	6	10.1	8848	0.59	( 0.24, 1.24 )	0.85
	Neonatal ICU	6	2.5	1697	2.36	( 0.96, 4.91 )	0.75
	Adult/Pediatric Ward	2	2.8	2872	0.71	( 0.12, 2.36 )	0.68
CAUTI	Adult/Pediatric ICU	13	9.5	7328	1.36	( 0.75, 2.26 )	0.71
	Adult/Pediatric Ward	1	3.2	2679	0.31	( 0.02, 1.53 )	0.72
SSI	Colon surgery	5	3.6	138	1.36	( 0.50, 3.02 )	0.83
	Abdominal hysterectomy	2	0.2	31	<b>N/A</b>	<b>N/A</b>	1.08
LabID	MRSA bacteremia	9	10.5	138141	0.86	( 0.42, 1.57 )	1.09
	C. difficile infection	68	94.1	127524	<b>0.72</b>	<b>( 0.57, 0.91 )</b>	0.83

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at Johnson City Medical Center*

**Healthcare Personnel Influenza Vaccination - '2017/2018' Influenza Season**

**Healthcare Personnel Category (Total)**



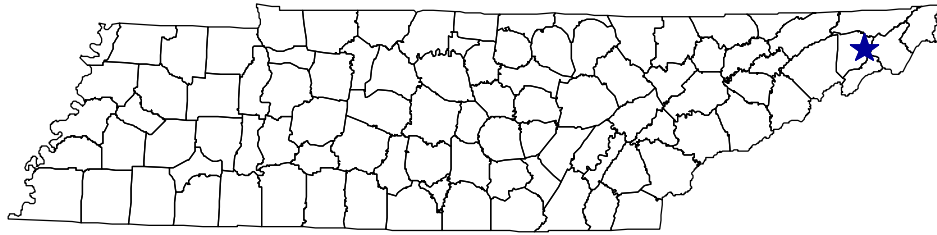
**Healthcare Personnel Vaccinated (%)**

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

**Johnson City Medical Center, Johnson City, Washington County**

Medical School Affiliation: Major teaching

Bed Size Category: 400+ beds



**Healthcare-Associated Infections (HAI) Summary**

**Standardized Infection Ratio (SIR) by Infection Type, 01/01/2018-12/31/2018**

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		TN SIR
		Observed	Predicted		SIR*	95% CI	
CLABSI	Adult/Pediatric ICU	9	9.7	8521	0.93	( 0.45, 1.70 )	0.76
	Neonatal ICU	7	1.5	1255	<b>4.53</b>	<b>( 1.98, 8.95 )</b>	0.79
	Adult/Pediatric Ward	0	2.6	2673	0.00	( 0.00, 1.15 )	0.63
CAUTI	Adult/Pediatric ICU	18	9.1	7022	<b>1.96</b>	<b>( 1.20, 3.04 )</b>	0.70
	Adult/Pediatric Ward	4	3.0	2529	1.32	( 0.42, 3.19 )	0.73
SSI	Colon surgery	4	3.1	120	1.29	( 0.41, 3.10 )	0.79
	Abdominal hysterectomy	0	0.3	36	<b>N/A</b>	<b>N/A</b>	0.78
LabID	MRSA bacteremia	17	10.9	132955	1.55	( 0.93, 2.44 )	1.29
	C. difficile infection	45	87.2	121764	<b>0.52</b>	<b>( 0.38, 0.68 )</b>	0.68

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at Johnson City Medical Center*

**Healthcare Personnel Influenza Vaccination - '2018/2019' Influenza Season**

**Healthcare Personnel Category (Total)**



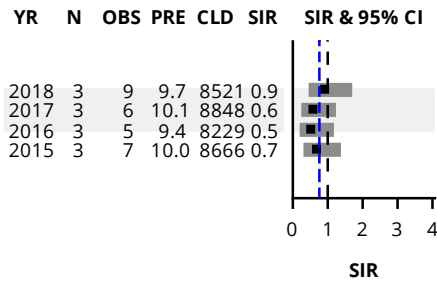
**Healthcare Personnel Vaccinated (%)**

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

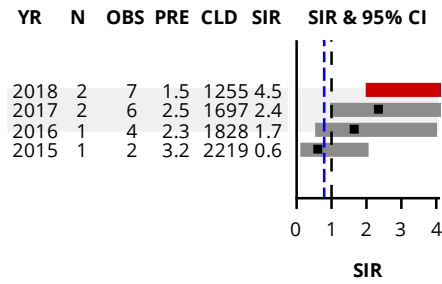


### Central Line-Associated Bloodstream Infections (CLABSI)

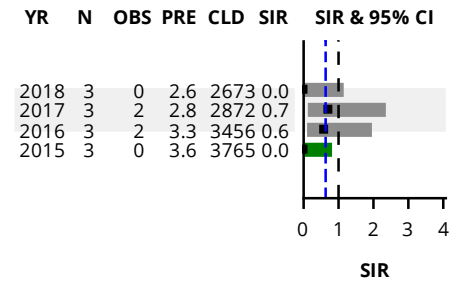
#### CLABSI - Adult/Pediatric ICUs



#### CLABSI - Neonatal ICUs

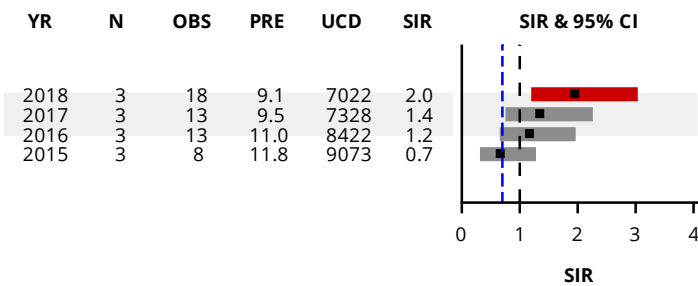


#### CLABSI - Adult/Pediatric Wards

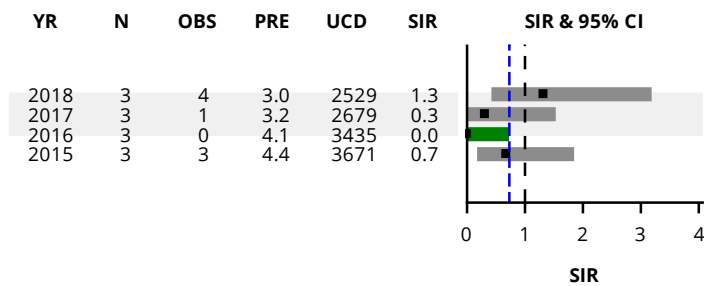


### Catheter-Associated Urinary Tract Infections (CAUTI)

#### CAUTI - Adult/Pediatric ICUs

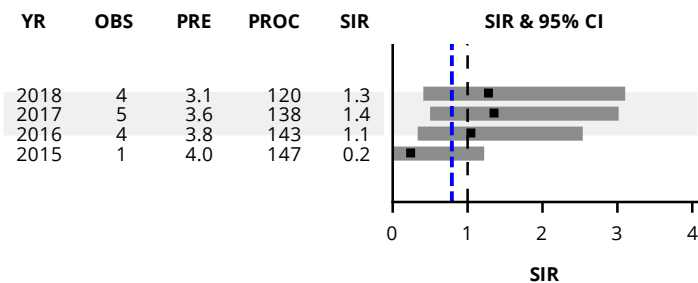


#### CAUTI - Adult/Pediatric Wards

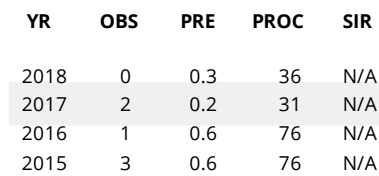


### Surgical Site Infections (SSI)

#### SSI - Colon Surgery



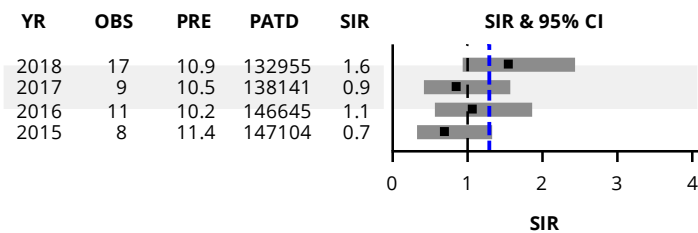
#### SSI - Abdominal Hysterectomy



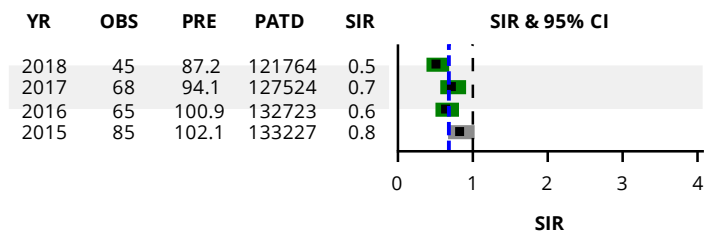
N/A: Number of predicted infections <1; no SIR calculated

### Healthcare Facility-Onset Laboratory Identified (LabID) Events

#### LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia



#### LabID - *C. difficile* Infection (CDI)



Data reported as of August 27, 2019

YR = reporting year; N = number of units reporting (CLABSI/CAUTI); OBS = observed number of infections

PRE = statistically 'predicted' number of infections, based on NHSN national baseline data

SIR = standardized infection ratio (observed/predicted number of infections)

CLD = central line days; UCD = urinary catheter days; PROC = procedures performed; PATD = patient days;

N/A = data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

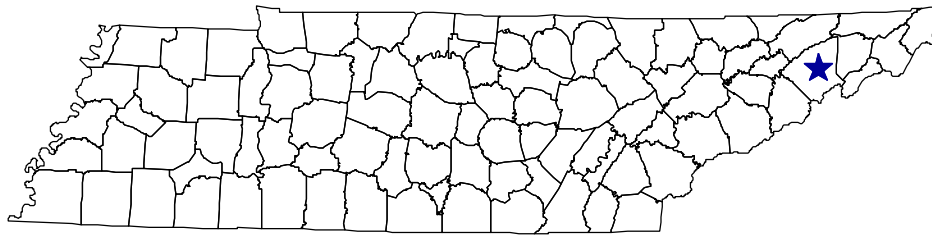
■ Significantly lower than NHSN SIR of 1

■ Not significantly different from NHSN SIR of 1

■ Significantly higher than NHSN SIR of 1

--- 2018 TN SIR

--- NHSN SIR=1



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2017-12/31/2017

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		
		Observed	Predicted		SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	0	0.3	483	N/A	N/A	0.85
	Neonatal ICU	N/A	N/A	N/A	N/A	N/A	0.75
	Adult/Pediatric Ward	2	0.4	656	N/A	N/A	0.68
CAUTI	Adult/Pediatric ICU	0	0.9	1250	N/A	N/A	0.71
	Adult/Pediatric Ward	0	1.1	1721	0.00	( 0.00, 2.67 )	0.72
SSI	Colon surgery	1	1.2	64	0.82	( 0.04, 4.06 )	0.83
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	1.08
LabID	MRSA bacteremia	2	0.5	15428	N/A	N/A	1.09
	C. difficile infection	5	6.1	14710	0.81	( 0.30, 1.80 )	0.83

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

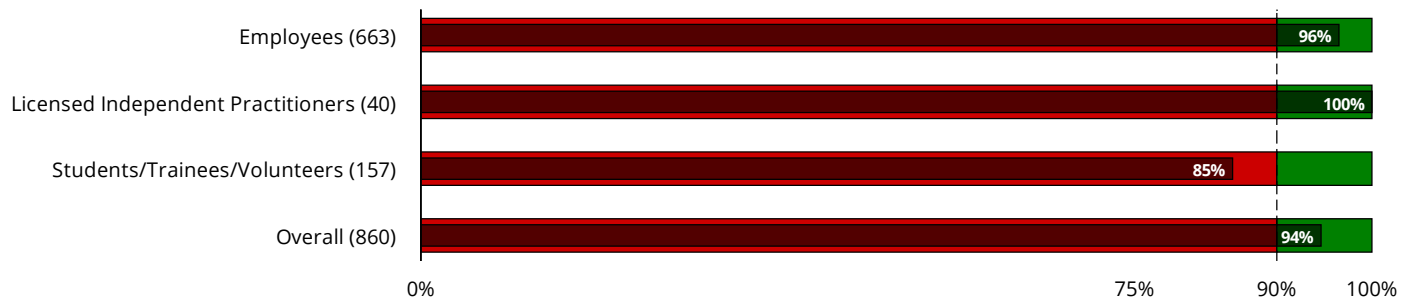
**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

**See page 3 for more detailed information about HAIs at Greeneville Community Hospital East (Laughlin Memorial Hospital)**

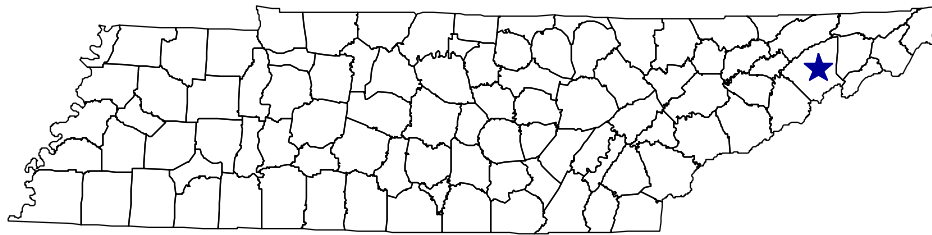
### Healthcare Personnel Influenza Vaccination - '2017/2018' Influenza Season

#### Healthcare Personnel Category (Total)



#### Healthcare Personnel Vaccinated (%)

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2018-12/31/2018

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		
		Observed	Predicted		SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	0	0.4	634	N/A	N/A	0.76
	Neonatal ICU	N/A	N/A	N/A	N/A	N/A	0.79
	Adult/Pediatric Ward	1	0.5	789	N/A	N/A	0.63
CAUTI	Adult/Pediatric ICU	0	1.0	1394	0.00	( 0.00, 2.94 )	0.70
	Adult/Pediatric Ward	0	1.4	2243	0.00	( 0.00, 2.05 )	0.73
SSI	Colon surgery	0	1.1	53	0.00	( 0.00, 2.51 )	0.79
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	0.78
LabID	MRSA bacteremia	0	0.6	12628	N/A	N/A	1.29
	C. difficile infection	3	4.4	12318	0.67	( 0.17, 1.82 )	0.68

Green highlighting indicates an SIR significantly LOWER than the 2015 national baseline

Red highlighting indicates an SIR significantly HIGHER than the 2015 national baseline

N/A: Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

See page 3 for more detailed information about HAIs at Greenville Community Hospital East (Laughlin Memorial Hospital)

### Healthcare Personnel Influenza Vaccination - '2018/2019' Influenza Season

#### Healthcare Personnel Category (Total)



#### Healthcare Personnel Vaccinated (%)

Below 90% >90% (HHS Healthy People 2020 Goal)

### Central Line-Associated Bloodstream Infections (CLABSI)

#### CLABSI - Adult/Pediatric ICUs

YR	N	OBS	PRE	CLD	SIR
2018	1	0	0.4	634	N/A
2017	1	0	0.3	483	N/A
2016	1	0	0.3	410	N/A
2015	1	0	0.2	372	N/A

#### CLABSI - Neonatal ICUs

YR	N	OBS	PRE	CLI
2018	1	N/A	N/A	N/A
2017	1	N/A	N/A	N/A
2016	1	N/A	N/A	N/A
2015	1	N/A	N/A	N/A

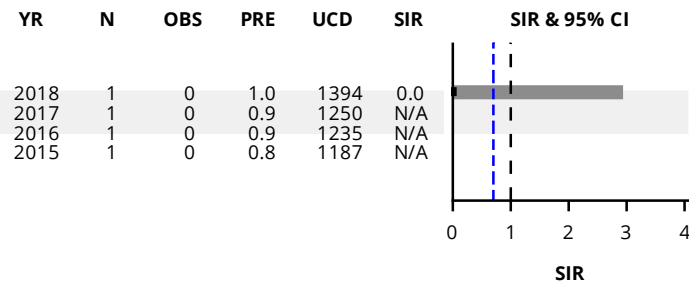
#### CLABSI - Adult/Pediatric Wards

YR	N	OBS	PRE	CLD	SIR
2018	3	1	0.5	789	N/A
2017	3	2	0.4	656	N/A
2016	3	0	0.5	897	N/A
2015	3	0	0.6	957	N/A

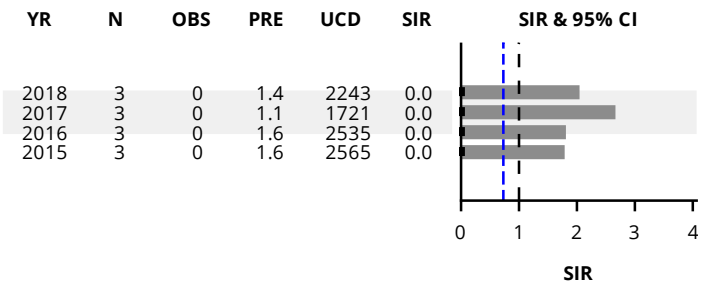
N/A: Number of predicted infections <1; no SIR calculated

### Catheter-Associated Urinary Tract Infections (CAUTI)

#### CAUTI - Adult/Pediatric ICUs

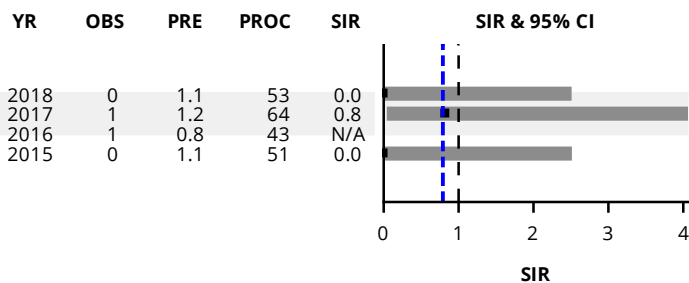


#### CAUTI - Adult/Pediatric Wards



### Surgical Site Infections (SSI)

#### SSI - Colon Surgery



#### SSI - Abdominal Hysterectomy

YR	OBS	PRE	PROC	SIR
2018	N/A	N/A	N/A	N/A
2017	N/A	N/A	N/A	N/A
2016	N/A	N/A	N/A	N/A
2015	N/A	N/A	N/A	N/A

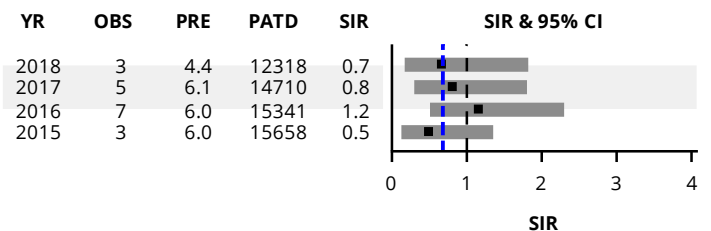
N/A: Number of predicted infections <1; no SIR calculated

### Healthcare Facility-Onset Laboratory Identified (LabID) Events

#### LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia

YR	OBS	PRE	PATD	SIR
2018	0	0.6	12628	N/A
2017	2	0.5	15428	N/A
2016	0	0.6	16039	N/A
2015	0	0.6	16220	N/A

#### LabID - *C. difficile* Infection (CDI)



N/A: Number of predicted infections <1; no SIR calculated

Data reported as of August 27, 2019

YR = reporting year; N = number of units reporting (CLABSI/CAUTI); OBS = observed number of infections

PRE = statistically 'predicted' number of infections, based on NHSN national baseline data

SIR = standardized infection ratio (observed/predicted number of infections)

CLD = central line days; UCD = urinary catheter days; PROC = procedures performed; PATD = patient days;

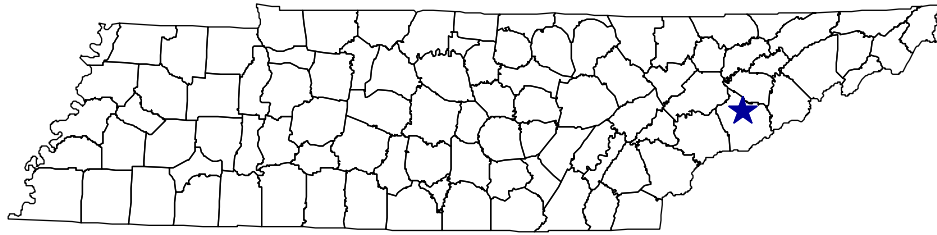
N/A = data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

- Significantly lower than NHSN SIR of 1
- Not significantly different from NHSN SIR of 1
- Significantly higher than NHSN SIR of 1
- - - 2018 TN SIR
- - - NHSN SIR=1

**LeConte Medical Center, Sevierville, Sevier County**

Medical School Affiliation: None

Bed Size Category: 50-99 beds



**Healthcare-Associated Infections (HAI) Summary**

**Standardized Infection Ratio (SIR) by Infection Type, 01/01/2017-12/31/2017**

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		
		Observed	Predicted		SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	1	0.5	864	N/A	N/A	0.85
	Adult/Pediatric Ward	1	0.4	750	N/A	N/A	0.68
CAUTI	Adult/Pediatric ICU	2	0.8	1619	N/A	N/A	0.71
	Adult/Pediatric Ward	0	0.8	1677	N/A	N/A	0.72
SSI	Colon surgery	0	0.7	35	N/A	N/A	0.83
	Abdominal hysterectomy	0	0.3	43	N/A	N/A	1.08
LabID	MRSA bacteremia	2	0.8	22215	N/A	N/A	1.09
	C. difficile infection	10	10.9	20402	0.92	( 0.47, 1.63 )	0.83

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

**See page 3 for more detailed information about HAIs at LeConte Medical Center**

**Healthcare Personnel Influenza Vaccination - '2017/2018' Influenza Season**

**Healthcare Personnel Category (Total)**



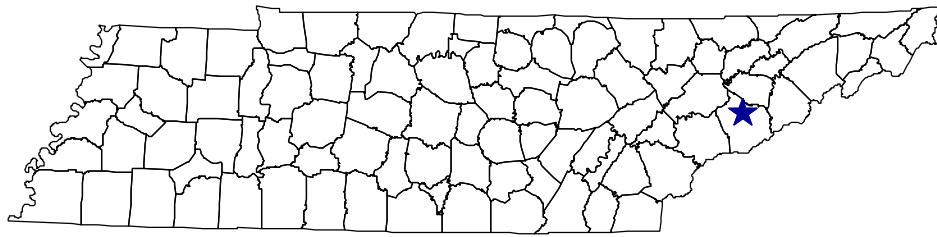
**Healthcare Personnel Vaccinated (%)**

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

## LeConte Medical Center, Sevierville, Sevier County

Medical School Affiliation: None

Bed Size Category: 50-99 beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2018-12/31/2018

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		
		Observed	Predicted		SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	0	0.4	676	N/A	N/A	0.76
	Adult/Pediatric Ward	0	0.3	647	N/A	N/A	0.63
CAUTI	Adult/Pediatric ICU	1	0.6	1146	N/A	N/A	0.70
	Adult/Pediatric Ward	2	0.5	1116	N/A	N/A	0.73
SSI	Colon surgery	1	0.8	40	N/A	N/A	0.79
	Abdominal hysterectomy	0	0.2	44	N/A	N/A	0.78
LabID	MRSA bacteremia	0	0.7	18180	N/A	N/A	1.29
	C. difficile infection	4	7.5	16486	0.53	( 0.17, 1.28 )	0.68

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at LeConte Medical Center*

### Healthcare Personnel Influenza Vaccination - '2018/2019' Influenza Season

#### Healthcare Personnel Category (Total)



#### Healthcare Personnel Vaccinated (%)

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric ICUs

YR	N	OBS	PRE	CLD	SIR
2018	1	0	0.4	676	N/A
2017	1	1	0.5	864	N/A
2016	1	0	0.5	882	N/A
2015	1	1	0.7	1176	N/A

N/A: Number of predicted infections <1; no SIR calculated

CLABSI - Adult/Pediatric Wards

YR	N	OBS	PRE	CLD	SIR
2018	1	0	0.3	647	N/A
2017	1	1	0.4	750	N/A
2016	1	1	0.4	832	N/A
2015	1	3	0.6	1147	N/A

N/A: Number of predicted infections <1; no SIR calculated

Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICUs

YR	N	OBS	PRE	UCD	SIR	SIR & 95% CI
2018	1	1	0.6	1146	N/A	
2017	1	2	0.8	1619	N/A	
2016	1	0	1.0	1846	0.0	
2015	1	1	0.9	1762	N/A	

CAUTI - Adult/Pediatric Wards

YR	N	OBS	PRE	UCD	SIR
2018	1	2	0.5	1116	N/A
2017	1	0	0.8	1677	N/A
2016	1	1	0.9	2035	N/A
2015	1	2	1.1	2292	1.8

N/A: Number of predicted infections <1; no SIR calculated

Surgical Site Infections (SSI)

SSI - Colon Surgery

YR	OBS	PRE	PROC	SIR
2018	1	0.8	40	N/A
2017	0	0.7	35	N/A
2016	1	0.6	33	N/A
2015	0	0.5	29	N/A

N/A: Number of predicted infections <1; no SIR calculated

SSI - Abdominal Hysterectomy

YR	OBS	PRE	PROC	SIR
2018	0	0.2	44	N/A
2017	0	0.3	43	N/A
2016	0	0.2	40	N/A
2015	0	0.3	54	N/A

N/A: Number of predicted infections <1; no SIR calculated

Healthcare Facility-Onset Laboratory Identified (LabID) Events

LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia

YR	OBS	PRE	PATD	SIR
2018	0	0.7	18180	N/A
2017	2	0.8	22215	N/A
2016	0	1.0	21459	0.0
2015	0	0.7	19649	N/A

N/A: Number of predicted infections <1; no SIR calculated

LabID - *C. difficile* Infection (CDI)

YR	OBS	PRE	PATD	SIR	SIR & 95% CI
2018	4	7.5	16486	0.5	
2017	10	10.9	20402	0.9	
2016	5	10.1	20081	0.5	
2015	8	12.4	18365	0.6	

- Significantly lower than NHSN SIR of 1
- Not significantly different from NHSN SIR of 1
- Significantly higher than NHSN SIR of 1
- - - 2018 TN SIR
- - - NHSN SIR=1

Data reported as of August 27, 2019

YR = reporting year; N = number of units reporting (CLABSI/CAUTI); OBS = observed number of infections

PRE = statistically 'predicted' number of infections, based on NHSN national baseline data

SIR = standardized infection ratio (observed/predicted number of infections)

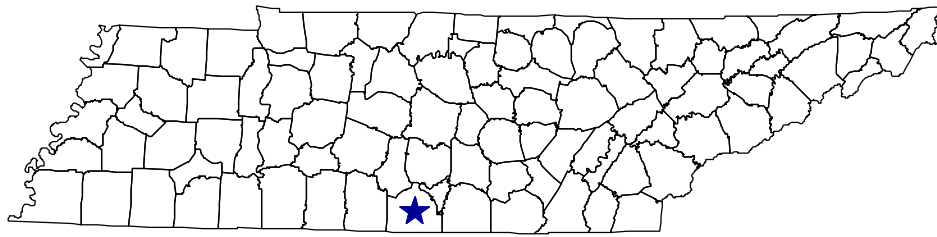
CLD = central line days; UCD = urinary catheter days; PROC = procedures performed; PATD = patient days;

N/A = data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

## Lincoln Medical Center, Fayetteville, Lincoln County

Medical School Affiliation: None

Bed Size Category: <50 beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2017-12/31/2017

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		
		Observed	Predicted		SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	0	0.0	82	N/A	N/A	0.85
	Adult/Pediatric Ward	0	0.0	136	N/A	N/A	0.68
CAUTI	Adult/Pediatric ICU	0	0.2	454	N/A	N/A	0.71
	Adult/Pediatric Ward	0	0.2	575	N/A	N/A	0.72
SSI	Colon surgery	N/A	N/A	N/A	N/A	N/A	0.83
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	1.08
LabID	MRSA bacteremia	0	0.1	5928	N/A	N/A	1.09
	C. difficile infection	3	3.2	5885	0.93	( 0.24, 2.54 )	0.83

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at Lincoln Medical Center*

### Healthcare Personnel Influenza Vaccination - '2017/2018' Influenza Season

#### Healthcare Personnel Category (Total)



#### Healthcare Personnel Vaccinated (%)

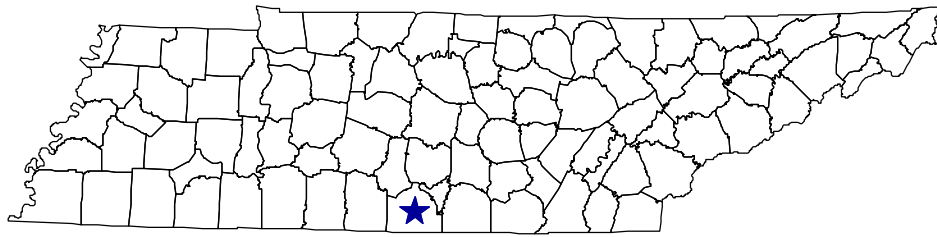
■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)



## Lincoln Medical Center, Fayetteville, Lincoln County

Medical School Affiliation: None

Bed Size Category: <50 beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2018-12/31/2018

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		
		Observed	Predicted		SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	0	0.0	75	N/A	N/A	0.76
	Adult/Pediatric Ward	0	0.0	104	N/A	N/A	0.63
CAUTI	Adult/Pediatric ICU	0	0.2	415	N/A	N/A	0.70
	Adult/Pediatric Ward	0	0.2	452	N/A	N/A	0.73
SSI	Colon surgery	N/A	N/A	N/A	N/A	N/A	0.79
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	0.78
LabID	MRSA bacteremia	0	0.0	4800	N/A	N/A	1.29
	C. difficile infection	0	4.2	4274	0.00	(0.00, 0.70)	0.68

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

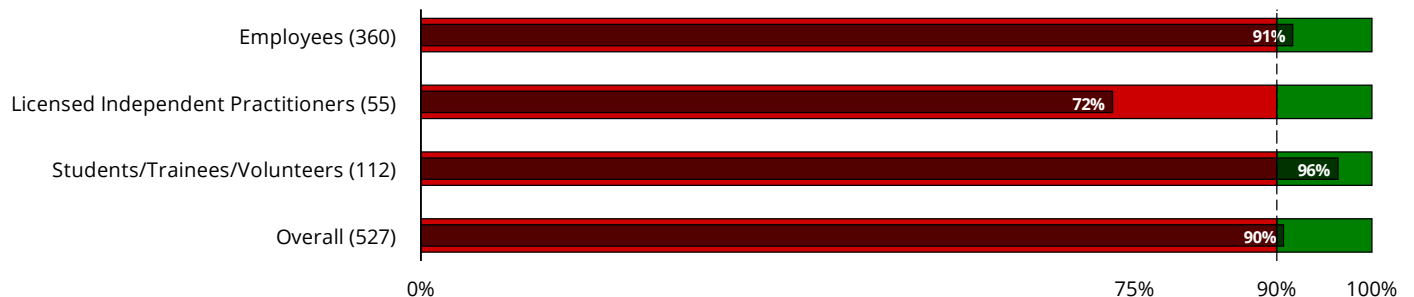
**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at Lincoln Medical Center*

### Healthcare Personnel Influenza Vaccination - '2018/2019' Influenza Season

#### Healthcare Personnel Category (Total)



#### Healthcare Personnel Vaccinated (%)

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric ICUs

YR	N	OBS	PRE	CLD	SIR
2018	1	0	0.0	75	N/A
2017	1	0	0.0	82	N/A
2016	1	0	0.0	139	N/A
2015	1	0	0.1	208	N/A

N/A: Number of predicted infections <1; no SIR calculated

CLABSI - Adult/Pediatric Wards

YR	N	OBS	PRE	CLD	SIR
2018	1	0	0.0	104	N/A
2017	1	0	0.0	136	N/A
2016	1	0	0.0	158	N/A
2015	1	0	0.1	216	N/A

N/A: Number of predicted infections <1; no SIR calculated

Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICUs

YR	N	OBS	PRE	UCD	SIR
2018	1	0	0.2	415	N/A
2017	1	0	0.2	454	N/A
2016	1	0	0.3	629	N/A
2015	1	0	0.4	784	N/A

N/A: Number of predicted infections <1; no SIR calculated

CAUTI - Adult/Pediatric Wards

YR	N	OBS	PRE	UCD	SIR
2018	1	0	0.2	452	N/A
2017	1	0	0.2	575	N/A
2016	1	1	0.2	561	N/A
2015	1	0	0.3	792	N/A

N/A: Number of predicted infections <1; no SIR calculated

Surgical Site Infections (SSI)

SSI - Colon Surgery

YR	OBS	PRE	PROC	SIR
2018	N/A	N/A	N/A	N/A
2017	N/A	N/A	N/A	N/A
2016	N/A	N/A	N/A	N/A
2015	N/A	N/A	N/A	N/A

N/A: Number of predicted infections <1; no SIR calculated

SSI - Abdominal Hysterectomy

YR	OBS	PRE	PROC	SIR
2018	N/A	N/A	N/A	N/A
2017	N/A	N/A	N/A	N/A
2016	1	0.1	26	N/A
2015	N/A	N/A	N/A	N/A

N/A: Number of predicted infections <1; no SIR calculated

Healthcare Facility-Onset Laboratory Identified (LabID) Events

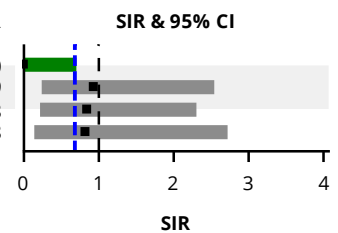
LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia

YR	OBS	PRE	PATD	SIR
2018	0	0.0	4800	N/A
2017	0	0.1	5928	N/A
2016	0	0.1	6863	N/A
2015	0	0.1	5262	N/A

N/A: Number of predicted infections <1; no SIR calculated

LabID - *C. difficile* Infection (CDI)

YR	OBS	PRE	PATD	SIR
2018	0	4.2	4274	0.0
2017	3	3.2	5885	0.9
2016	3	3.5	6863	0.8
2015	2	2.4	5262	0.8



Data reported as of August 27, 2019

YR = reporting year; N = number of units reporting (CLABSI/CAUTI); OBS = observed number of infections

PRE = statistically 'predicted' number of infections, based on NHSN national baseline data

SIR = standardized infection ratio (observed/predicted number of infections)

CLD = central line days; UCD = urinary catheter days; PROC = procedures performed; PATD = patient days;

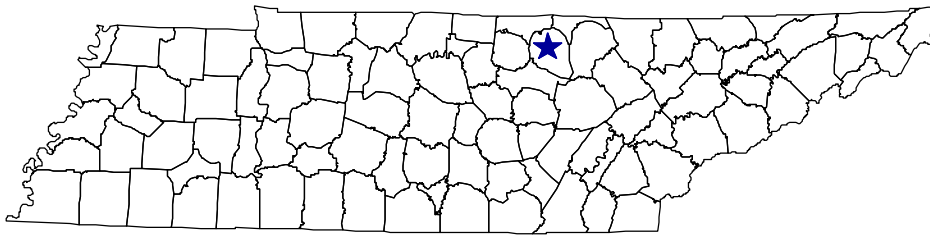
N/A = data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

- Significantly lower than NHSN SIR of 1
- Not significantly different from NHSN SIR of 1
- Significantly higher than NHSN SIR of 1
- - - 2018 TN SIR
- - - NHSN SIR=1

## Livingston Regional Hospital, Livingston, Overton County

Medical School Affiliation: None

Bed Size Category: 100-399 beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2017-12/31/2017

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		
		Observed	Predicted		SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	N/A	N/A	N/A	N/A	N/A	0.85
	Adult/Pediatric Ward	0	0.3	520	N/A	N/A	0.68
CAUTI	Adult/Pediatric ICU	1	0.0	113	N/A	N/A	0.71
	Adult/Pediatric Ward	1	1.0	1560	0.98	( 0.05, 4.84 )	0.72
SSI	Colon surgery	N/A	N/A	N/A	N/A	N/A	0.83
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	1.08
LabID	MRSA bacteremia	0	0.1	8578	N/A	N/A	1.09
	C. difficile infection	7	6.8	8532	1.03	( 0.45, 2.03 )	0.83

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

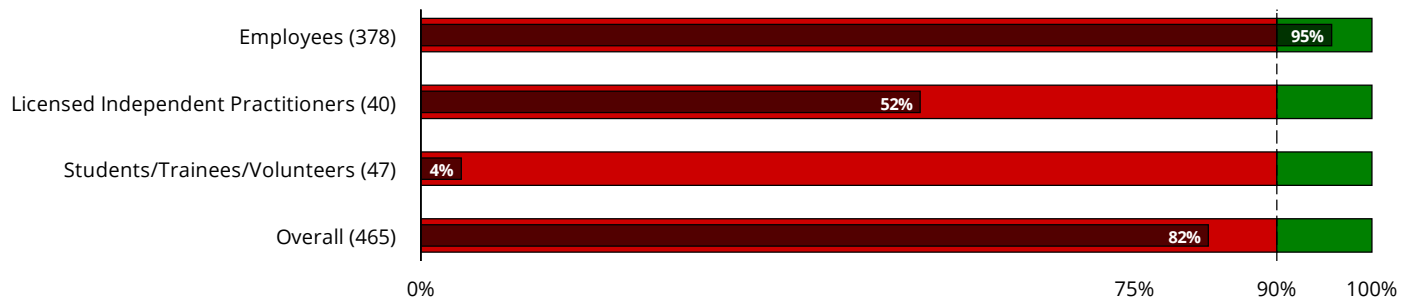
**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at Livingston Regional Hospital*

### Healthcare Personnel Influenza Vaccination - '2017/2018' Influenza Season

#### Healthcare Personnel Category (Total)



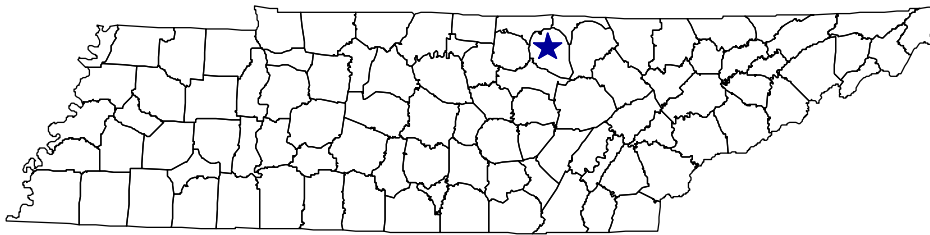
#### Healthcare Personnel Vaccinated (%)

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

## Livingston Regional Hospital, Livingston, Overton County

Medical School Affiliation: Undergraduate teaching

Bed Size Category: 50-99 beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2018-12/31/2018

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		
		Observed	Predicted		SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	N/A	N/A	N/A	N/A	N/A	0.76
	Adult/Pediatric Ward	0	0.3	568	N/A	N/A	0.63
CAUTI	Adult/Pediatric ICU	0	0.0	73	N/A	N/A	0.70
	Adult/Pediatric Ward	3	0.6	1238	N/A	N/A	0.73
SSI	Colon surgery	N/A	N/A	N/A	N/A	N/A	0.79
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	0.78
LabID	MRSA bacteremia	0	0.1	7026	N/A	N/A	1.29
	C. difficile infection	3	4.8	7026	0.63	( 0.16, 1.70 )	0.68

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

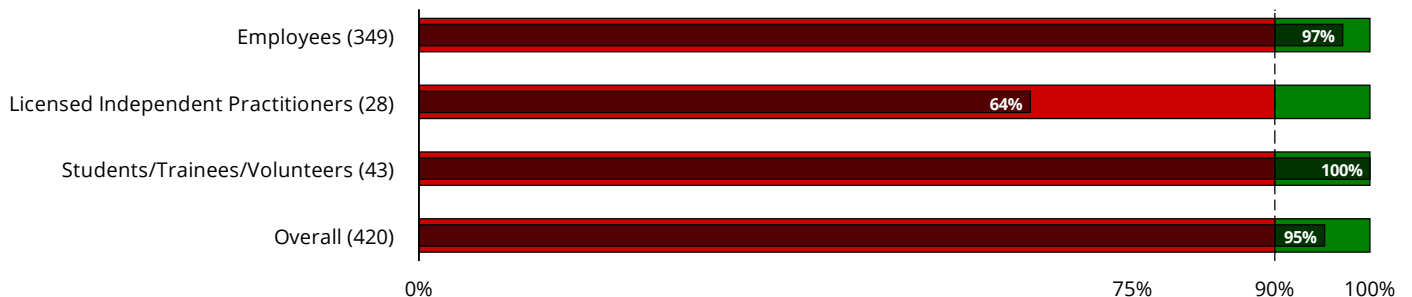
**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at Livingston Regional Hospital*

### Healthcare Personnel Influenza Vaccination - '2018/2019' Influenza Season

#### Healthcare Personnel Category (Total)



#### Healthcare Personnel Vaccinated (%)

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric ICUs

YR	N	OBS	PRE	CLD	SIR
2018	1	N/A	N/A	N/A	N/A
2017	1	N/A	N/A	N/A	N/A
2016	1	N/A	N/A	N/A	N/A
2015	1	N/A	N/A	N/A	N/A

N/A: Number of predicted infections <1; no SIR calculated

CLABSI - Adult/Pediatric Wards

YR	N	OBS	PRE	CLD	SIR
2018	1	0	0.3	568	N/A
2017	1	0	0.3	520	N/A
2016	1	0	0.0	128	N/A
2015	1	0	0.0	143	N/A

N/A: Number of predicted infections <1; no SIR calculated

Catheter-Associated Urinary Tract Infections (CAUTI)

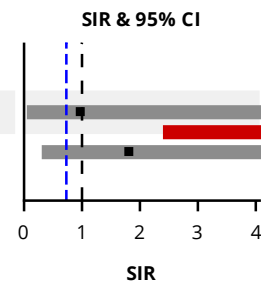
CAUTI - Adult/Pediatric ICUs

YR	N	OBS	PRE	UCD	SIR
2018	1	0	0.0	73	N/A
2017	1	1	0.0	113	N/A
2016	1	1	0.0	112	N/A
2015	1	0	0.1	212	N/A

N/A: Number of predicted infections <1; no SIR calculated

CAUTI - Adult/Pediatric Wards

YR	N	OBS	PRE	UCD	SIR
2018	1	3	0.6	1238	N/A
2017	1	1	1.0	1560	1.0
2016	1	6	1.0	1553	5.9
2015	1	2	1.0	1683	1.8



Surgical Site Infections (SSI)

SSI - Colon Surgery

YR	OBS	PRE	PROC	SIR
2018	N/A	N/A	N/A	N/A
2017	N/A	N/A	N/A	N/A
2016	N/A	N/A	N/A	N/A
2015	N/A	N/A	N/A	N/A

N/A: Number of predicted infections <1; no SIR calculated

SSI - Abdominal Hysterectomy

YR	OBS	PRE	PROC	SIR
2018	N/A	N/A	N/A	N/A
2017	N/A	N/A	N/A	N/A
2016	N/A	N/A	N/A	N/A
2015	N/A	N/A	N/A	N/A

N/A: Number of predicted infections <1; no SIR calculated

Healthcare Facility-Onset Laboratory Identified (LabID) Events

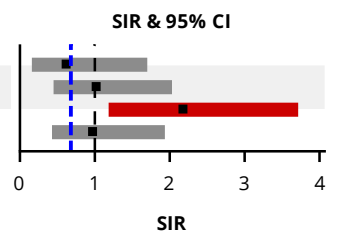
LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia

YR	OBS	PRE	PATD	SIR
2018	0	0.1	7026	N/A
2017	0	0.1	8578	N/A
2016	0	0.1	8486	N/A
2015	1	0.3	11341	N/A

N/A: Number of predicted infections <1; no SIR calculated

LabID - *C. difficile* Infection (CDI)

YR	OBS	PRE	PATD	SIR
2018	3	4.8	7026	0.6
2017	7	6.8	8532	1.0
2016	12	5.4	8020	2.2
2015	7	7.1	11341	1.0



Data reported as of August 27, 2019

YR = reporting year; N = number of units reporting (CLABSI/CAUTI); OBS = observed number of infections

PRE = statistically 'predicted' number of infections, based on NHSN national baseline data

SIR = standardized infection ratio (observed/predicted number of infections)

CLD = central line days; UCD = urinary catheter days; PROC = procedures performed; PATD = patient days;

N/A = data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

■ Significantly lower than NHSN SIR of 1

■ Not significantly different from NHSN SIR of 1

■ Significantly higher than NHSN SIR of 1

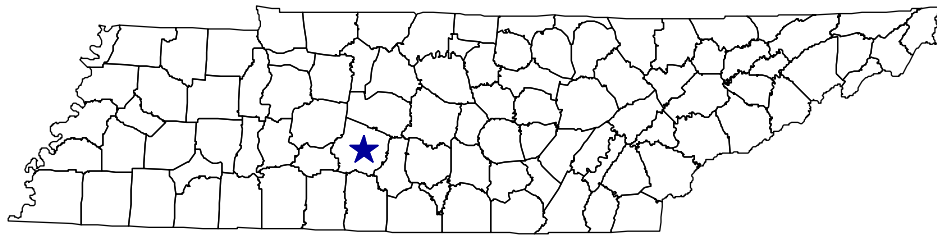
--- 2018 TN SIR

--- NHSN SIR=1

## Maury Regional Medical Center, Columbia, Maury County

Medical School Affiliation: None

Bed Size Category: 100-399 beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2017-12/31/2017

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		
		Observed	Predicted		SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	1	3.0	3491	0.33	( 0.02, 1.63 )	0.85
	Neonatal ICU	0	0.0	57	<b>N/A</b>	<b>N/A</b>	0.75
	Adult/Pediatric Ward	2	1.6	2171	1.23	( 0.21, 4.06 )	0.68
CAUTI	Adult/Pediatric ICU	2	4.5	5067	0.44	( 0.07, 1.46 )	0.71
	Adult/Pediatric Ward	4	2.2	2645	1.77	( 0.56, 4.26 )	0.72
SSI	Colon surgery	2	4.4	180	0.45	( 0.08, 1.49 )	0.83
	Abdominal hysterectomy	1	1.3	212	0.74	( 0.04, 3.65 )	1.08
LabID	MRSA bacteremia	1	2.2	58498	0.45	( 0.02, 2.24 )	1.09
	C. difficile infection	27	37.7	56182	0.72	( 0.48, 1.03 )	0.83

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

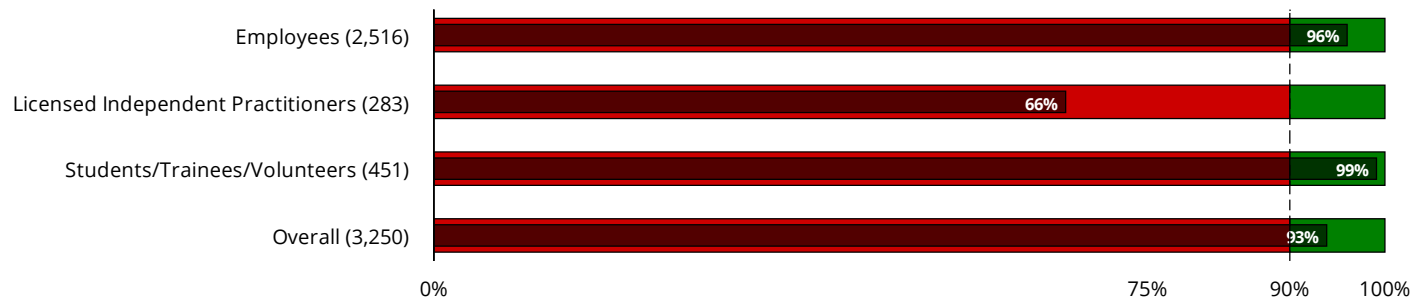
**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at Maury Regional Medical Center*

### Healthcare Personnel Influenza Vaccination - '2017/2018' Influenza Season

#### Healthcare Personnel Category (Total)



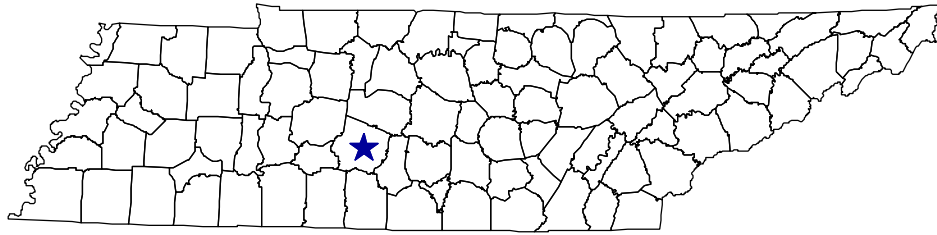
#### Healthcare Personnel Vaccinated (%)

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

## Maury Regional Medical Center, Columbia, Maury County

Medical School Affiliation: None

Bed Size Category: 100-399 beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2018-12/31/2018

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		
		Observed	Predicted		SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	0	2.5	2985	0.00	( 0.00, 1.16 )	0.76
	Neonatal ICU	0	0.0	67	<b>N/A</b>	<b>N/A</b>	0.79
	Adult/Pediatric Ward	0	1.3	1861	0.00	( 0.00, 2.15 )	0.63
CAUTI	Adult/Pediatric ICU	1	4.1	4615	0.24	( 0.01, 1.19 )	0.70
	Adult/Pediatric Ward	1	2.1	2493	0.47	( 0.02, 2.30 )	0.73
SSI	Colon surgery	2	4.4	192	0.45	( 0.08, 1.50 )	0.79
	Abdominal hysterectomy	0	1.0	169	0.00	( 0.00, 2.75 )	0.78
LabID	MRSA bacteremia	0	2.8	58326	0.00	( 0.00, 1.05 )	1.29
	C. difficile infection	31	39.6	55576	0.78	( 0.54, 1.10 )	0.68

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

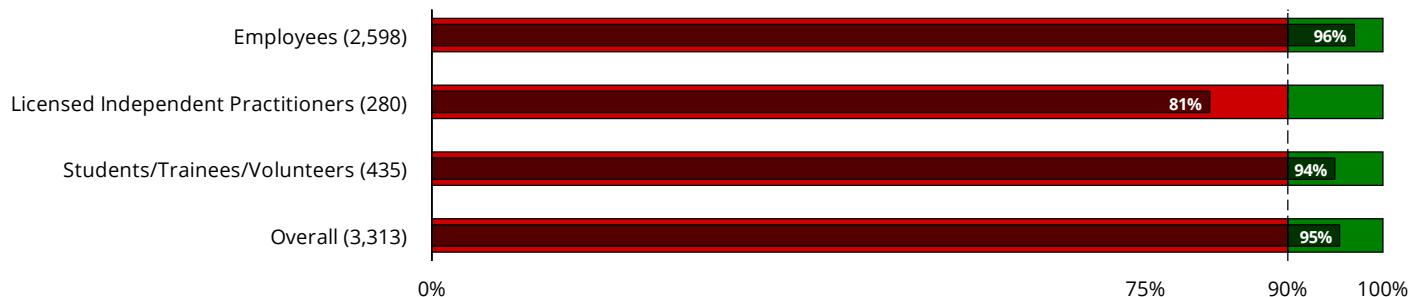
**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at Maury Regional Medical Center*

### Healthcare Personnel Influenza Vaccination - '2018/2019' Influenza Season

#### Healthcare Personnel Category (Total)

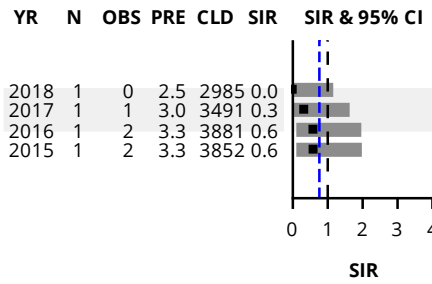


#### Healthcare Personnel Vaccinated (%)

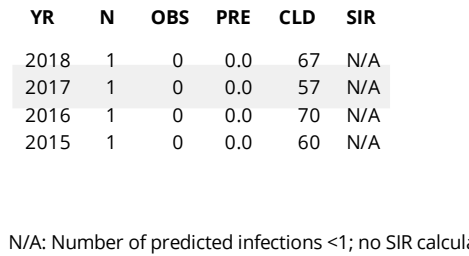
■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

Central Line-Associated Bloodstream Infections (CLABSI)

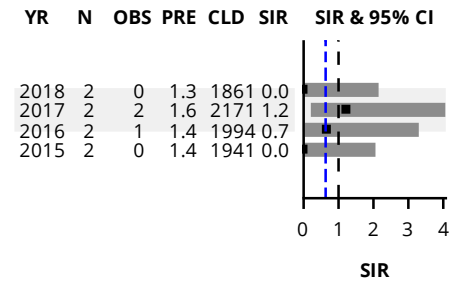
CLABSI - Adult/Pediatric ICUs



CLABSI - Neonatal ICUs

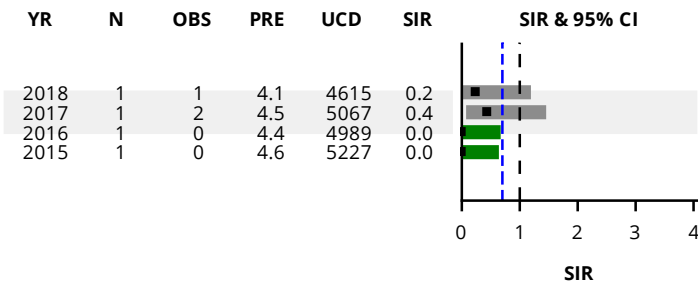


CLABSI - Adult/Pediatric Wards

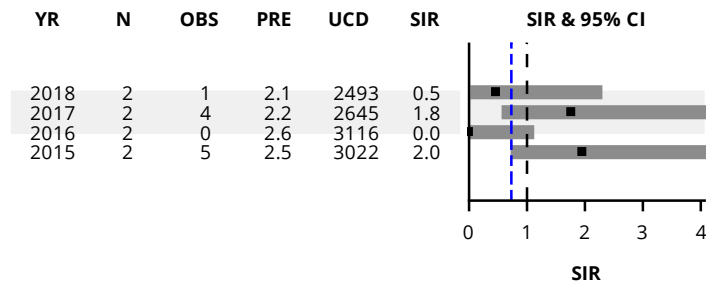


Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICUs

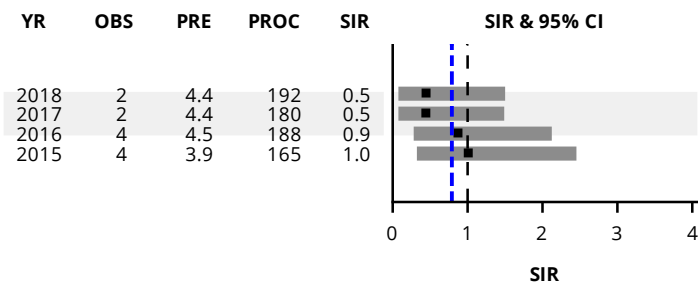


CAUTI - Adult/Pediatric Wards

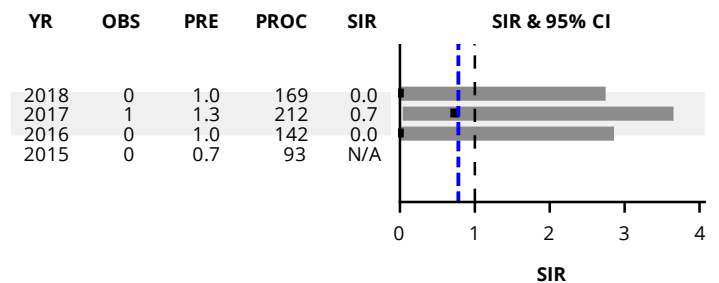


Surgical Site Infections (SSI)

SSI - Colon Surgery

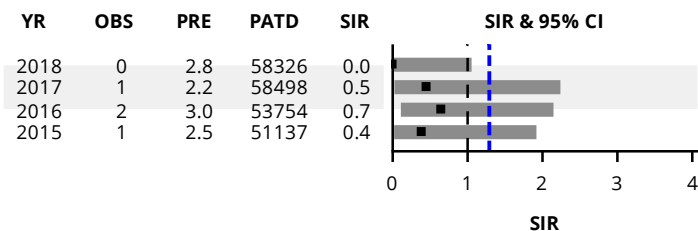


SSI - Abdominal Hysterectomy

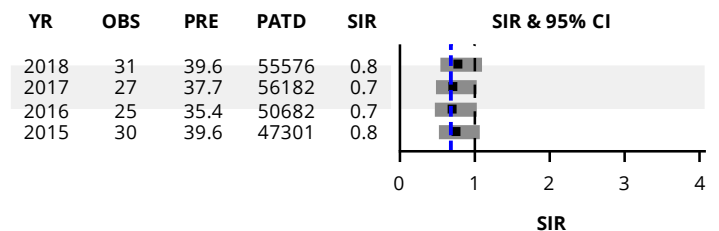


Healthcare Facility-Onset Laboratory Identified (LabID) Events

LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia



LabID - *C. difficile* Infection (CDI)



Data reported as of August 27, 2019

YR = reporting year; N = number of units reporting (CLABSI/CAUTI); OBS = observed number of infections

PRE = statistically 'predicted' number of infections, based on NHSN national baseline data

SIR = standardized infection ratio (observed/predicted number of infections)

CLD = central line days; UCD = urinary catheter days; PROC = procedures performed; PATD = patient days;

N/A = data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

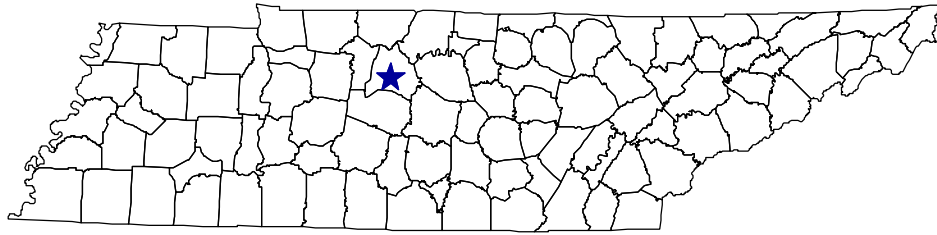
- Significantly lower than NHSN SIR of 1
- Not significantly different from NHSN SIR of 1
- Significantly higher than NHSN SIR of 1
- - - 2018 TN SIR
- - - NHSN SIR=1



## MCJ Children's Hospital at Vanderbilt, Nashville, Davidson County

Medical School Affiliation: Major teaching

Bed Size Category: 100-399 beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2017-12/31/2017

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		
		Observed	Predicted		SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	12	11.3	7884	1.06	( 0.57, 1.80 )	0.85
	Neonatal ICU	7	11.1	8743	0.63	( 0.28, 1.24 )	0.75
	Adult/Pediatric Ward	6	8.0	8123	0.75	( 0.30, 1.56 )	0.68
CAUTI	Adult/Pediatric ICU	2	2.4	1909	0.80	( 0.13, 2.65 )	0.71
	Adult/Pediatric Ward	0	0.5	672	N/A	N/A	0.72
SSI	Colon surgery	N/A	N/A	N/A	N/A	N/A	0.83
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	1.08
LabID	MRSA bacteremia	6	4.7	89754	1.27	( 0.51, 2.64 )	1.09
	C. difficile infection	12	33.5	54620	<b>0.36</b>	<b>( 0.19, 0.61 )</b>	0.83

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at MCJ Children's Hospital at Vanderbilt*

### Healthcare Personnel Influenza Vaccination - '2017/2018' Influenza Season

#### Healthcare Personnel Category (Total)



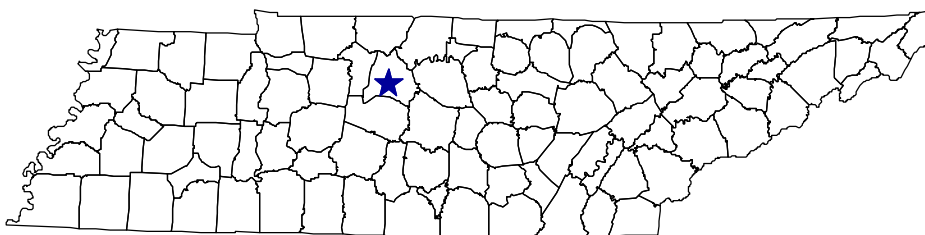
#### Healthcare Personnel Vaccinated (%)

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

## MCJ Children's Hospital at Vanderbilt, Nashville, Davidson County

Medical School Affiliation: Major teaching

Bed Size Category: 100-399 beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2018-12/31/2018

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		
		Observed	Predicted		SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	5	9.7	6801	0.51	( 0.19, 1.13 )	0.76
	Neonatal ICU	5	9.3	7951	0.54	( 0.20, 1.19 )	0.79
	Adult/Pediatric Ward	5	8.8	8930	0.57	( 0.21, 1.26 )	0.63
CAUTI	Adult/Pediatric ICU	3	2.8	2046	1.07	( 0.27, 2.91 )	0.70
	Adult/Pediatric Ward	1	0.5	712	N/A	N/A	0.73
SSI	Colon surgery	N/A	N/A	N/A	N/A	N/A	0.79
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	0.78
LabID	MRSA bacteremia	6	5.1	87502	1.17	( 0.48, 2.44 )	1.29
	C. difficile infection	24	32.9	53736	0.73	( 0.48, 1.07 )	0.68

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

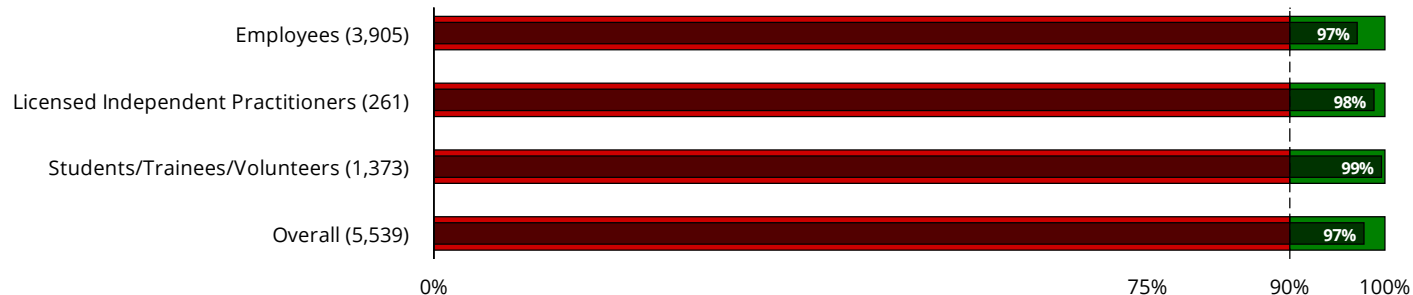
**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at MCJ Children's Hospital at Vanderbilt*

### Healthcare Personnel Influenza Vaccination - '2018/2019' Influenza Season

#### Healthcare Personnel Category (Total)

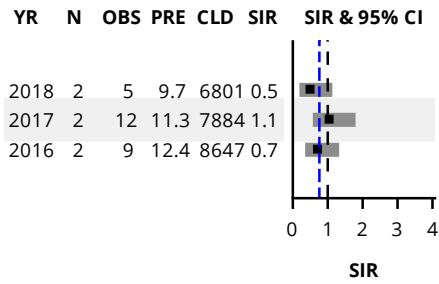


#### Healthcare Personnel Vaccinated (%)

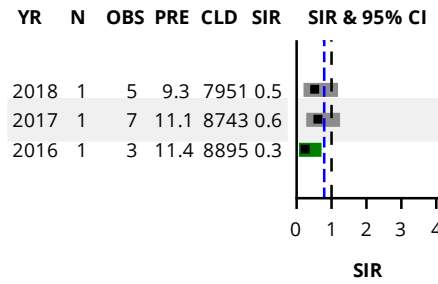
■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

Central Line-Associated Bloodstream Infections (CLABSI)

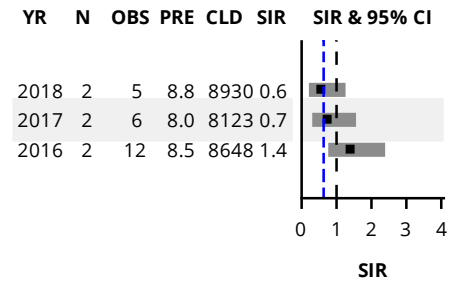
CLABSI - Adult/Pediatric ICUs



CLABSI - Neonatal ICUs

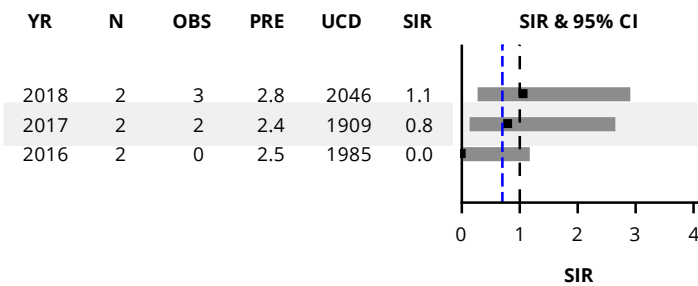


CLABSI - Adult/Pediatric Wards



Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICUs



CAUTI - Adult/Pediatric Wards

YR	N	OBS	PRE	UCD	SIR
2018	2	1	0.5	712	N/A
2017	2	0	0.5	672	N/A
2016	2	0	0.6	856	N/A

N/A: Number of predicted infections <1; no SIR calculated

Surgical Site Infections (SSI)

SSI - Colon Surgery

YR	OBS	PRE	PROC	SIR
2018	N/A	N/A	N/A	N/A
2017	N/A	N/A	N/A	N/A

SSI - Abdominal Hysterectomy

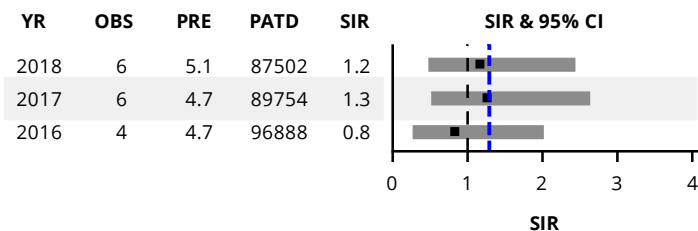
YR	OBS	PRE	PROC	SIR
2018	N/A	N/A	N/A	N/A
2017	N/A	N/A	N/A	N/A

N/A: Number of predicted infections <1; no SIR calculated

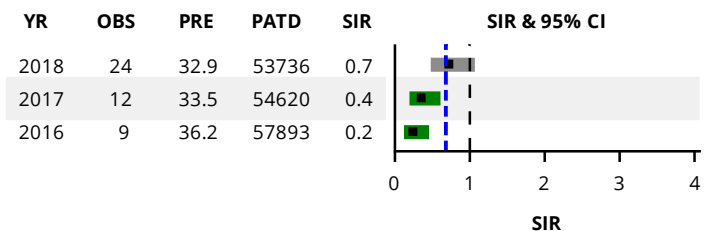
N/A: Number of predicted infections <1; no SIR calculated

Healthcare Facility-Onset Laboratory Identified (LabID) Events

LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia



LabID - *C. difficile* Infection (CDI)



Data reported as of August 27, 2019

YR = reporting year; N = number of units reporting (CLABSI/CAUTI); OBS = observed number of infections

PRE = statistically 'predicted' number of infections, based on NHSN national baseline data

SIR = standardized infection ratio (observed/predicted number of infections)

CLD = central line days; UCD = urinary catheter days; PROC = procedures performed; PATD = patient days;

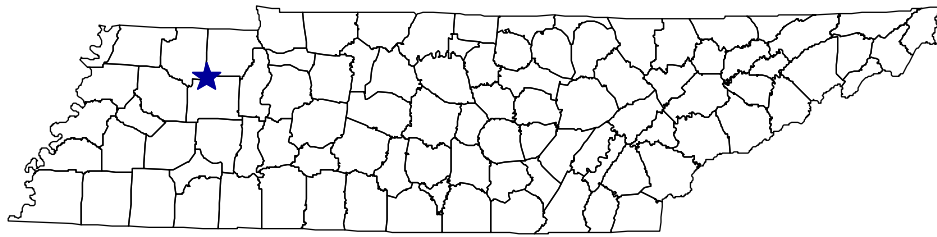
N/A = data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

- Significantly lower than NHSN SIR of 1
- Not significantly different from NHSN SIR of 1
- Significantly higher than NHSN SIR of 1
- - - 2018 TN SIR
- - - NHSN SIR=1

## McKenzie Regional Hospital, McKenzie, Carroll County

Medical School Affiliation: None

Bed Size Category: <50 beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2017-12/31/2017

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		
		Observed	Predicted		SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric Ward	0	0.0	55	N/A	N/A	0.68
CAUTI	Adult/Pediatric Ward	0	0.5	1029	N/A	N/A	0.72
SSI	Colon surgery	N/A	N/A	N/A	N/A	N/A	0.83
	Abdominal hysterectomy	0	0.4	64	N/A	N/A	1.08
LabID	MRSA bacteremia	0	0.0	5477	N/A	N/A	1.09
	C. difficile infection	1	1.4	5477	0.69	( 0.04, 3.42 )	0.83

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

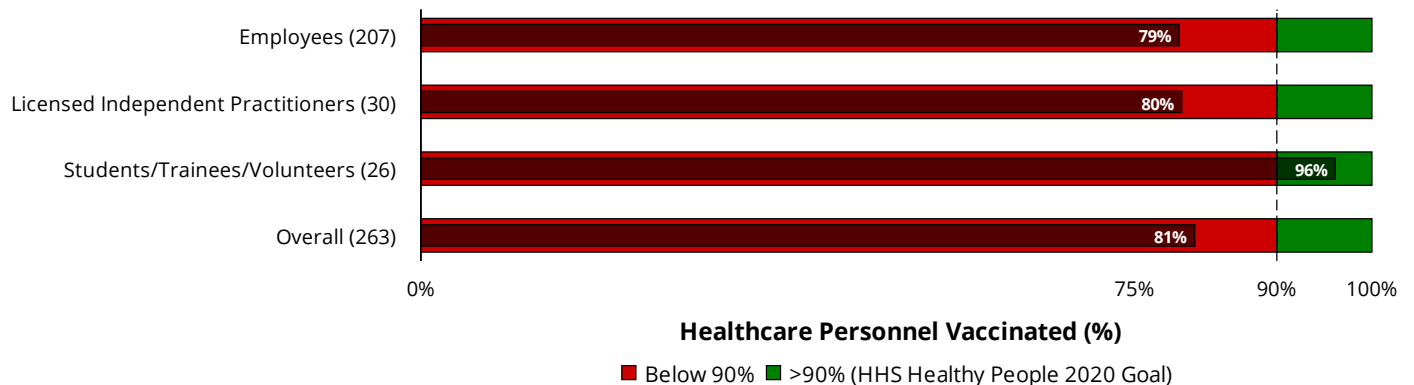
**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at McKenzie Regional Hospital*

### Healthcare Personnel Influenza Vaccination - '2017/2018' Influenza Season

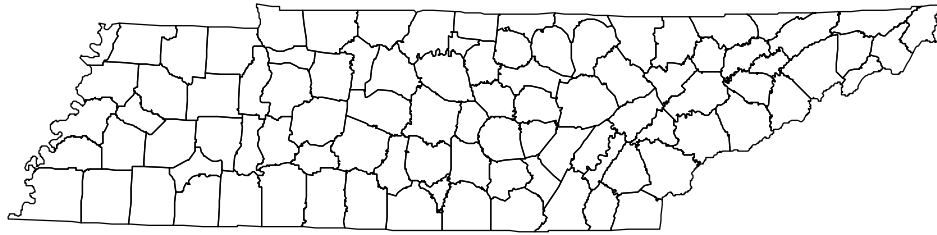
#### Healthcare Personnel Category (Total)



**McKenzie Regional Hospital, , County**

Medical School Affiliation:

Bed Size Category:



**Healthcare-Associated Infections (HAI) Summary**

**Standardized Infection Ratio (SIR) by Infection Type, 01/01/2018-12/31/2018**

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		
		Observed	Predicted		SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric Ward	0	0.0	54	N/A	N/A	0.63
CAUTI	Adult/Pediatric Ward	0	0.1	380	N/A	N/A	0.73
SSI	Colon surgery	N/A	N/A	N/A	N/A	N/A	0.79
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	0.78
LabID	MRSA bacteremia	0	0.0	1547	N/A	N/A	1.29
	C. difficile infection	0	0.3	1547	N/A	N/A	0.68

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

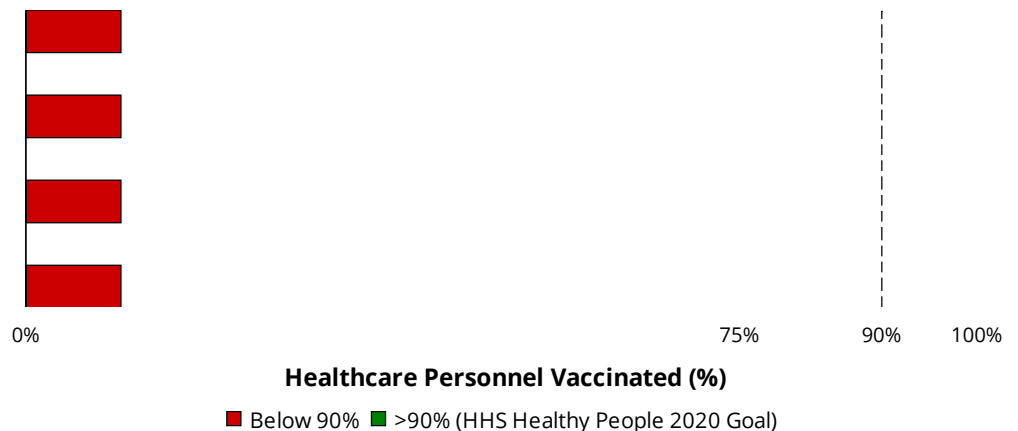
**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at McKenzie Regional Hospital*

**Healthcare Personnel Influenza Vaccination - '2018/2019' Influenza Season**



Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric Wards

YR	N	OBS	PRE	CLD	SIR
2018	1	0	0.0	54	N/A
2017	1	0	0.0	55	N/A
2016	1	N/A	N/A	N/A	N/A
2015	1	N/A	N/A	N/A	N/A

N/A: Number of predicted infections <1; no SIR calculated

Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric Wards

YR	N	OBS	PRE	UCD	SIR
2018	1	0	0.1	380	N/A
2017	1	0	0.5	1029	N/A
2016	1	0	0.3	798	N/A
2015	1	0	0.3	665	N/A

N/A: Number of predicted infections <1; no SIR calculated

Surgical Site Infections (SSI)

SSI - Colon Surgery

YR	OBS	PRE	PROC	SIR
2018	N/A	N/A	N/A	N/A
2017	N/A	N/A	N/A	N/A
2016	N/A	N/A	N/A	N/A
2015	N/A	N/A	N/A	N/A

N/A: Number of predicted infections <1; no SIR calculated

SSI - Abdominal Hysterectomy

YR	OBS	PRE	PROC	SIR
2018	N/A	N/A	N/A	N/A
2017	0	0.4	64	N/A
2016	0	0.3	54	N/A
2015	0	0.2	38	N/A

N/A: Number of predicted infections <1; no SIR calculated

Healthcare Facility-Onset Laboratory Identified (LabID) Events

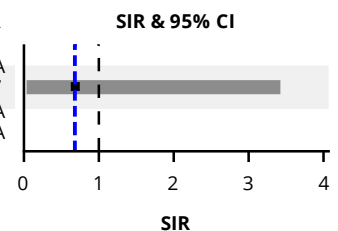
LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia

YR	OBS	PRE	PATD	SIR
2018	0	0.0	1547	N/A
2017	0	0.0	5477	N/A
2016	0	0.0	4109	N/A
2015	0	0.0	1936	N/A

N/A: Number of predicted infections <1; no SIR calculated

LabID - *C. difficile* Infection (CDI)

YR	OBS	PRE	PATD	SIR
2018	0	0.3	1547	N/A
2017	1	1.4	5477	0.7
2016	0	0.8	4109	N/A
2015	0	0.5	1940	N/A



Data reported as of August 27, 2019

YR = reporting year; N = number of units reporting (CLABSI/CAUTI); OBS = observed number of infections

PRE = statistically 'predicted' number of infections, based on NHSN national baseline data

SIR = standardized infection ratio (observed/predicted number of infections)

CLD = central line days; UCD = urinary catheter days; PROC = procedures performed; PATD = patient days;

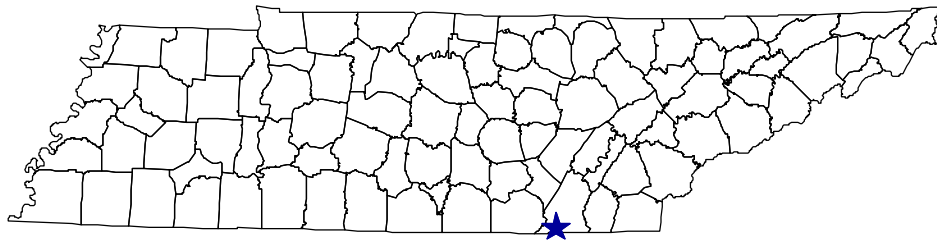
N/A = data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

- Significantly lower than NHSN SIR of 1
- Not significantly different from NHSN SIR of 1
- Significantly higher than NHSN SIR of 1
- - - 2018 TN SIR
- - - NHSN SIR=1

## Memorial Healthcare System, Chattanooga, Hamilton County

Medical School Affiliation: None

Bed Size Category: 100-399 beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2017-12/31/2017

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		TN SIR
		Observed	Predicted		SIR*	95% CI	
CLABSI	Adult/Pediatric ICU	9	6.4	7462	1.39	( 0.68, 2.55 )	0.85
	Adult/Pediatric Ward	2	9.5	12758	<b>0.21</b>	<b>( 0.04, 0.69 )</b>	0.68
CAUTI	Adult/Pediatric ICU	8	6.7	7085	1.18	( 0.55, 2.25 )	0.71
	Adult/Pediatric Ward	11	8.2	10154	1.33	( 0.70, 2.32 )	0.72
SSI	Colon surgery	6	7.5	337	0.80	( 0.32, 1.66 )	0.83
	Abdominal hysterectomy	0	0.8	138	<b>N/A</b>	<b>N/A</b>	1.08
LabID	MRSA bacteremia	6	5.8	90572	1.04	( 0.42, 2.15 )	1.09
	C. difficile infection	62	79.4	90572	<b>0.78</b>	<b>( 0.60, 0.99 )</b>	0.83

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

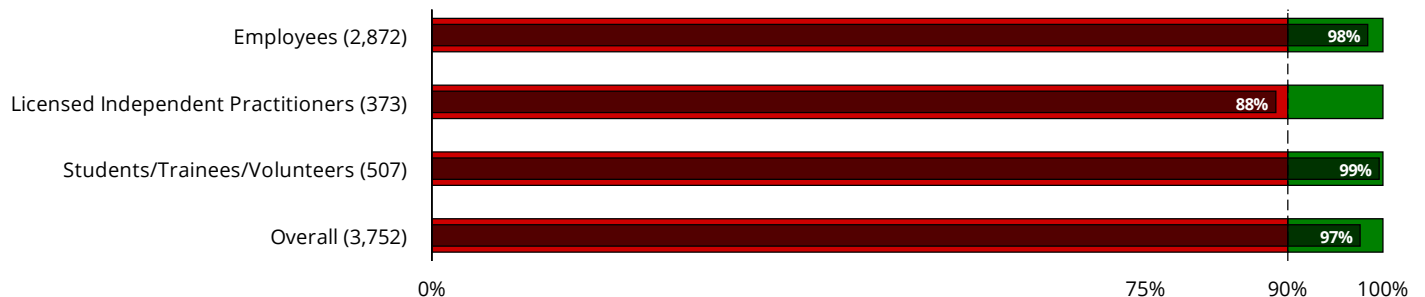
**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at Memorial Healthcare System*

### Healthcare Personnel Influenza Vaccination - '2017/2018' Influenza Season

#### Healthcare Personnel Category (Total)



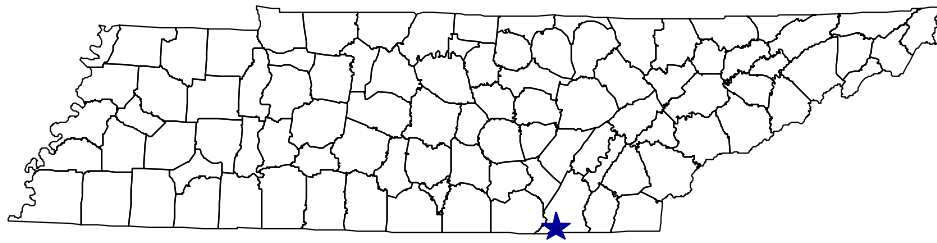
#### Healthcare Personnel Vaccinated (%)

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

## Memorial Healthcare System, Chattanooga, Hamilton County

Medical School Affiliation: None

Bed Size Category: 100-399 beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2018-12/31/2018

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		TN SIR
		Observed	Predicted		SIR*	95% CI	
CLABSI	Adult/Pediatric ICU	7	7.1	8195	0.98	( 0.43, 1.95 )	0.76
	Adult/Pediatric Ward	5	4.3	5759	1.16	( 0.42, 2.57 )	0.63
CAUTI	Adult/Pediatric ICU	9	6.9	7230	1.29	( 0.63, 2.37 )	0.70
	Adult/Pediatric Ward	12	6.6	8232	1.80	( 0.97, 3.05 )	0.73
SSI	Colon surgery	14	7.6	351	<b>1.82</b>	<b>( 1.04, 2.98 )</b>	0.79
	Abdominal hysterectomy	0	0.8	138	<b>N/A</b>	<b>N/A</b>	0.78
LabID	MRSA bacteremia	9	6.7	90171	1.33	( 0.65, 2.45 )	1.29
	C. difficile infection	45	62.8	83769	<b>0.72</b>	<b>( 0.53, 0.95 )</b>	0.68

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

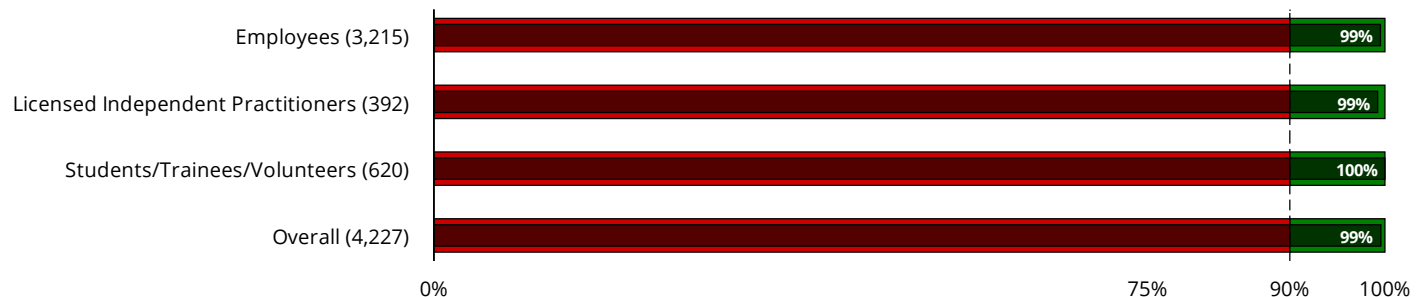
**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at Memorial Healthcare System*

### Healthcare Personnel Influenza Vaccination - '2018/2019' Influenza Season

#### Healthcare Personnel Category (Total)



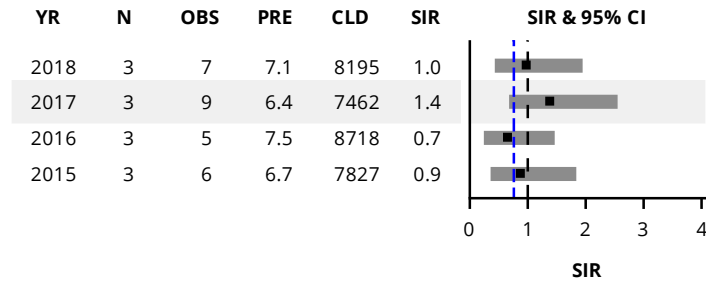
#### Healthcare Personnel Vaccinated (%)

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

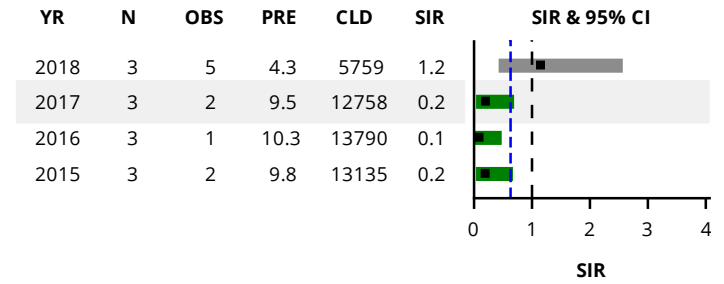


### Central Line-Associated Bloodstream Infections (CLABSI)

#### CLABSI - Adult/Pediatric ICUs

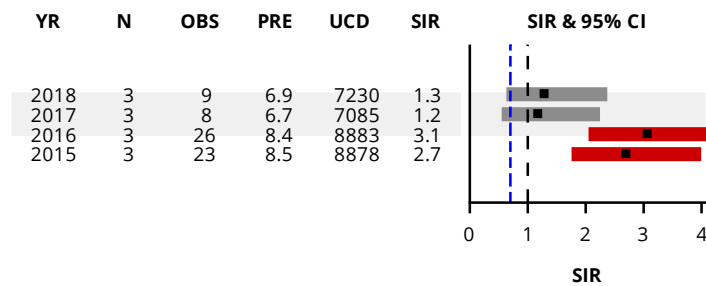


#### CLABSI - Adult/Pediatric Wards

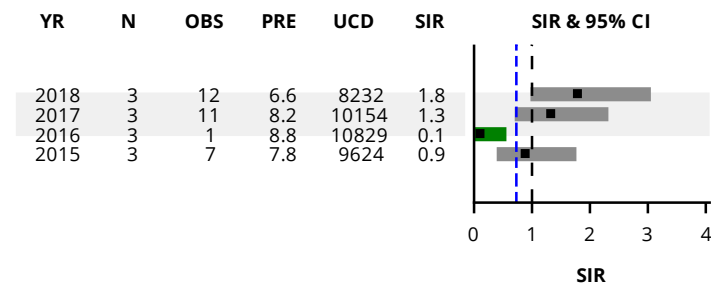


### Catheter-Associated Urinary Tract Infections (CAUTI)

#### CAUTI - Adult/Pediatric ICUs

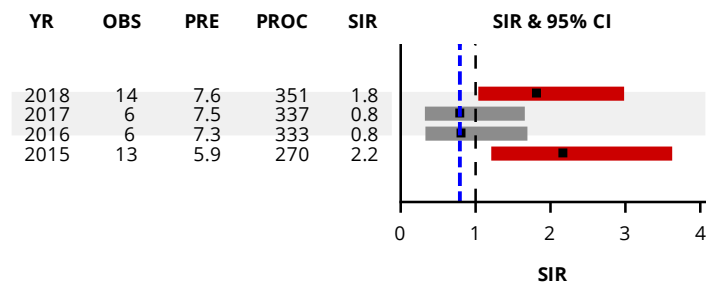


#### CAUTI - Adult/Pediatric Wards



### Surgical Site Infections (SSI)

#### SSI - Colon Surgery



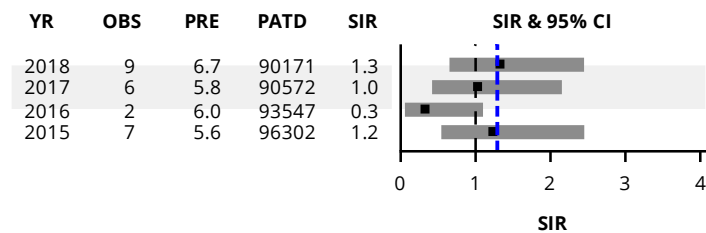
#### SSI - Abdominal Hysterectomy

YR	OBS	PRE	PROC	SIR
2018	0	0.8	138	N/A
2017	0	0.8	138	N/A
2016	0	0.8	124	N/A
2015	1	0.6	94	N/A

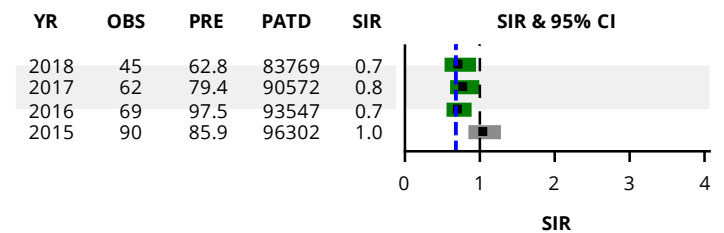
N/A: Number of predicted infections <1; no SIR calculated

### Healthcare Facility-Onset Laboratory Identified (LabID) Events

#### LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia



#### LabID - *C. difficile* Infection (CDI)



Data reported as of August 27, 2019

YR = reporting year; N = number of units reporting (CLABSI/CAUTI); OBS = observed number of infections

PRE = statistically 'predicted' number of infections, based on NHSN national baseline data

SIR = standardized infection ratio (observed/predicted number of infections)

CLD = central line days; UCD = urinary catheter days; PROC = procedures performed; PATD = patient days;

N/A = data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

■ Significantly lower than NHSN SIR of 1

■ Not significantly different from NHSN SIR of 1

■ Significantly higher than NHSN SIR of 1

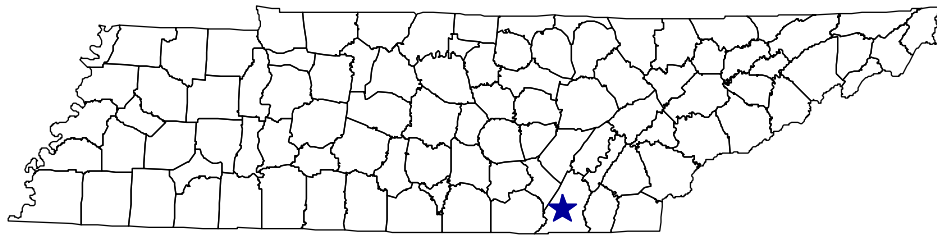
--- 2018 TN SIR

--- NHSN SIR=1

## Memorial Hixson Hospital, Hixson, Hamilton County

Medical School Affiliation: None

Bed Size Category: 50-99 beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2017-12/31/2017

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		
		Observed	Predicted		SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	1	0.7	1125	N/A	N/A	0.85
	Adult/Pediatric Ward	0	3.0	5292	0.00	(0.00, 0.98)	0.68
CAUTI	Adult/Pediatric ICU	0	0.9	1712	N/A	N/A	0.71
	Adult/Pediatric Ward	4	2.6	5170	1.50	(0.48, 3.63)	0.72
SSI	Colon surgery	1	0.6	36	N/A	N/A	0.83
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	1.08
LabID	MRSA bacteremia	1	0.7	19279	N/A	N/A	1.09
	C. difficile infection	6	19.1	19279	0.31	(0.13, 0.65)	0.83

Green highlighting indicates an SIR significantly LOWER than the 2015 national baseline

Red highlighting indicates an SIR significantly HIGHER than the 2015 national baseline

N/A: Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

See page 3 for more detailed information about HAIs at Memorial Hixson Hospital

### Healthcare Personnel Influenza Vaccination - '2017/2018' Influenza Season

#### Healthcare Personnel Category (Total)



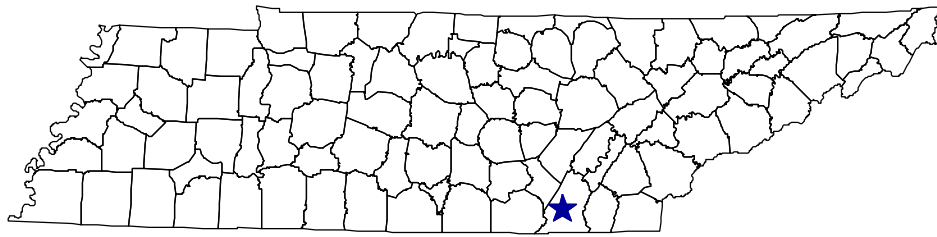
#### Healthcare Personnel Vaccinated (%)

Below 90% >90% (HHS Healthy People 2020 Goal)

## Memorial Hixson Hospital, Hixson, Hamilton County

Medical School Affiliation: None

Bed Size Category: 50-99 beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2018-12/31/2018

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		
		Observed	Predicted		SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	1	0.8	1316	N/A	N/A	0.76
	Adult/Pediatric Ward	0	0.8	1393	N/A	N/A	0.63
CAUTI	Adult/Pediatric ICU	1	1.0	1833	0.99	( 0.05, 4.90 )	0.70
	Adult/Pediatric Ward	0	1.9	3811	0.00	( 0.00, 1.54 )	0.73
SSI	Colon surgery	1	0.8	46	N/A	N/A	0.79
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	0.78
LabID	MRSA bacteremia	0	0.9	18472	N/A	N/A	1.29
	C. difficile infection	9	12.1	18472	0.74	( 0.36, 1.37 )	0.68

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

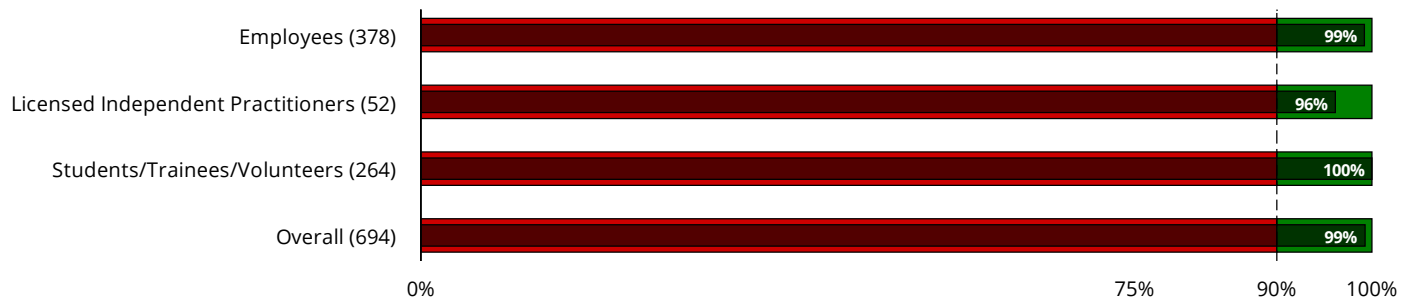
**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at Memorial Hixson Hospital*

### Healthcare Personnel Influenza Vaccination - '2018/2019' Influenza Season

#### Healthcare Personnel Category (Total)



#### Healthcare Personnel Vaccinated (%)

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric ICUs

YR	N	OBS	PRE	CLD	SIR
2018	1	1	0.8	1316	N/A
2017	1	1	0.7	1125	N/A
2016	1	0	0.4	725	N/A
2015	1	0	0.4	637	N/A

CLABSI - Adult/Pediatric Wards

YR	N	OBS	PRE	CLD	SIR	SIR & 95% CI
2018	2	0	0.8	1393	N/A	
2017	2	0	3.0	5292	0.0	
2016	2	0	3.1	5488	0.0	
2015	2	0	2.5	4461	0.0	

N/A: Number of predicted infections <1; no SIR calculated

Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICUs

YR	N	OBS	PRE	UCD	SIR	SIR & 95% CI
2018	1	1	1.0	1833	1.0	
2017	1	0	0.9	1712	N/A	
2016	1	0	0.5	1053	N/A	
2015	1	1	0.6	1243	N/A	

CAUTI - Adult/Pediatric Wards

YR	N	OBS	PRE	UCD	SIR	SIR & 95% CI
2018	2	0	1.9	3811	0.0	
2017	2	4	2.6	5170	1.5	
2016	2	3	2.3	4565	1.3	
2015	2	1	1.8	3674	0.5	

Surgical Site Infections (SSI)

SSI - Colon Surgery

YR	OBS	PRE	PROC	SIR
2018	1	0.8	46	N/A
2017	1	0.6	36	N/A
2016	1	0.5	33	N/A
2015	0	0.5	34	N/A

SSI - Abdominal Hysterectomy

YR	OBS	PRE	PROC	SIR
2018	N/A	N/A	N/A	N/A
2017	N/A	N/A	N/A	N/A
2016	N/A	N/A	N/A	N/A
2015	N/A	N/A	N/A	N/A

N/A: Number of predicted infections <1; no SIR calculated

N/A: Number of predicted infections <1; no SIR calculated

Healthcare Facility-Onset Laboratory Identified (LabID) Events

LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia

YR	OBS	PRE	PATD	SIR
2018	0	0.9	18472	N/A
2017	1	0.7	19279	N/A
2016	0	0.7	18222	N/A
2015	0	0.9	19119	N/A

LabID - *C. difficile* Infection (CDI)

YR	OBS	PRE	PATD	SIR	SIR & 95% CI
2018	9	12.1	18472	0.7	
2017	6	19.1	19279	0.3	
2016	13	18.2	18222	0.7	
2015	12	16.7	19119	0.7	

N/A: Number of predicted infections <1; no SIR calculated

Data reported as of August 27, 2019

YR = reporting year; N = number of units reporting (CLABSI/CAUTI); OBS = observed number of infections

PRE = statistically 'predicted' number of infections, based on NHSN national baseline data

SIR = standardized infection ratio (observed/predicted number of infections)

CLD = central line days; UCD = urinary catheter days; PROC = procedures performed; PATD = patient days;

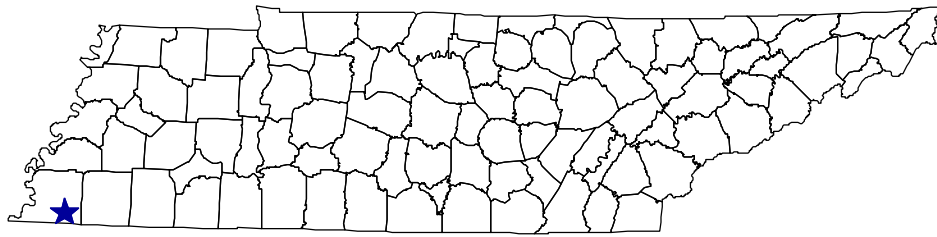
N/A = data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

- Significantly lower than NHSN SIR of 1
- Not significantly different from NHSN SIR of 1
- Significantly higher than NHSN SIR of 1
- - - 2018 TN SIR
- - - NHSN SIR=1

## Methodist Healthcare Germantown, Memphis, Shelby County

Medical School Affiliation: Major teaching

Bed Size Category: 100-399 beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2017-12/31/2017

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		
		Observed	Predicted		SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	5	5.6	5042	0.88	( 0.32, 1.95 )	0.85
	Neonatal ICU	0	1.2	799	0.00	( 0.00, 2.40 )	0.75
	Adult/Pediatric Ward	5	7.2	7442	0.69	( 0.25, 1.53 )	0.68
CAUTI	Adult/Pediatric ICU	2	5.1	3989	0.39	( 0.07, 1.27 )	0.71
	Adult/Pediatric Ward	1	6.4	5478	<b>0.16</b>	<b>( 0.01, 0.77 )</b>	0.72
SSI	Colon surgery	3	6.7	288	0.45	( 0.11, 1.21 )	0.83
	Abdominal hysterectomy	2	6.1	1000	0.33	( 0.06, 1.08 )	1.08
LabID	MRSA bacteremia	4	6.3	90695	0.63	( 0.20, 1.52 )	1.09
	C. difficile infection	33	50.5	73759	<b>0.65</b>	<b>( 0.46, 0.91 )</b>	0.83

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at Methodist Healthcare Germantown*

### Healthcare Personnel Influenza Vaccination - '2017/2018' Influenza Season

#### Healthcare Personnel Category (Total)



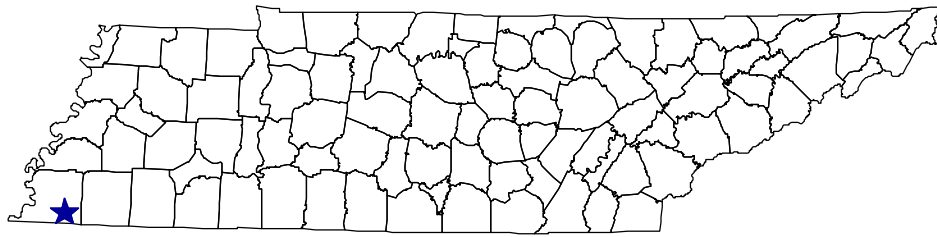
#### Healthcare Personnel Vaccinated (%)

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

## Methodist Healthcare Germantown, Memphis, Shelby County

Medical School Affiliation: Major teaching

Bed Size Category: 100-399 beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2018-12/31/2018

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		TN SIR
		Observed	Predicted		SIR*	95% CI	
CLABSI	Adult/Pediatric ICU	1	5.6	5044	0.18	(0.01, 0.87)	0.76
	Neonatal ICU	0	1.3	843	0.00	(0.00, 2.17)	0.79
	Adult/Pediatric Ward	2	4.8	4960	0.41	(0.07, 1.37)	0.63
CAUTI	Adult/Pediatric ICU	1	4.8	3742	0.21	(0.01, 1.01)	0.70
	Adult/Pediatric Ward	1	4.7	4031	0.21	(0.01, 1.03)	0.73
SSI	Colon surgery	5	9.1	383	0.55	(0.20, 1.21)	0.79
	Abdominal hysterectomy	2	5.9	945	0.34	(0.06, 1.11)	0.78
LabID	MRSA bacteremia	6	5.9	93628	1.01	(0.41, 2.11)	1.29
	C. difficile infection	28	54.1	77374	0.52	(0.35, 0.74)	0.68

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

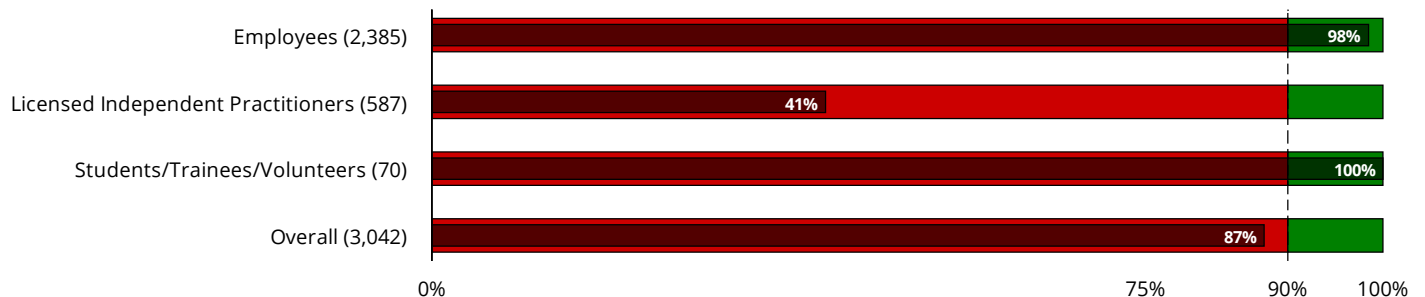
**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

See page 3 for more detailed information about HAIs at Methodist Healthcare Germantown

### Healthcare Personnel Influenza Vaccination - '2018/2019' Influenza Season

#### Healthcare Personnel Category (Total)

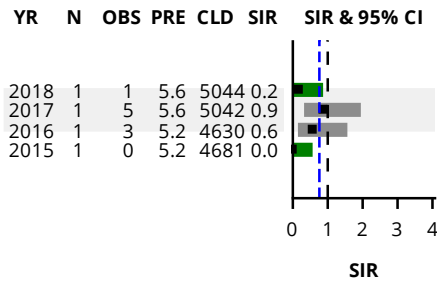


#### Healthcare Personnel Vaccinated (%)

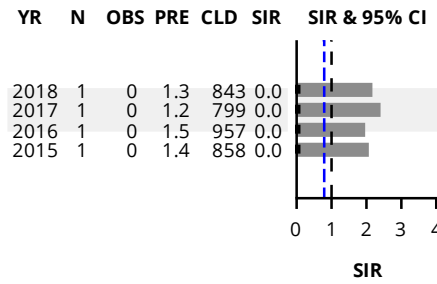
■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

Central Line-Associated Bloodstream Infections (CLABSI)

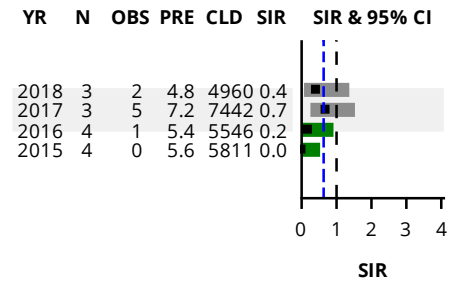
CLABSI - Adult/Pediatric ICUs



CLABSI - Neonatal ICUs

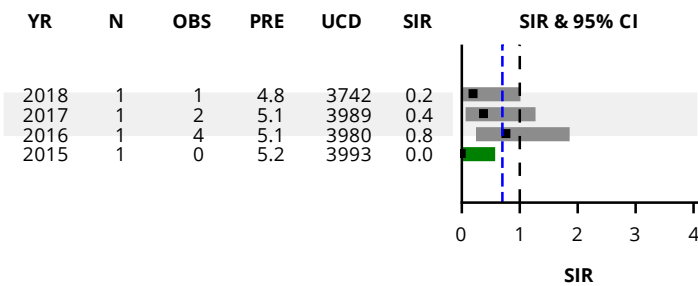


CLABSI - Adult/Pediatric Wards

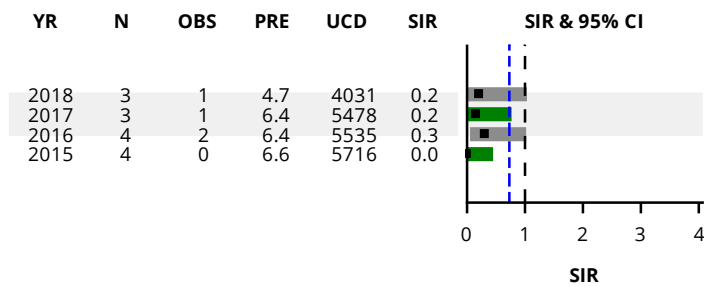


Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICUs

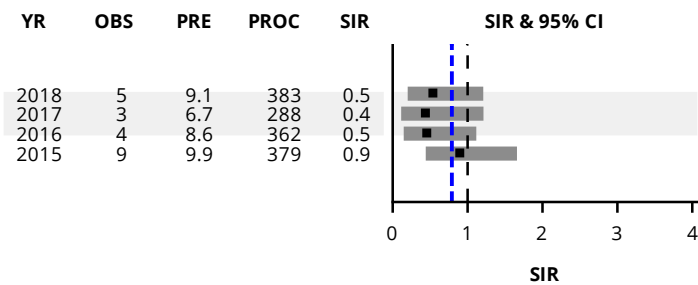


CAUTI - Adult/Pediatric Wards

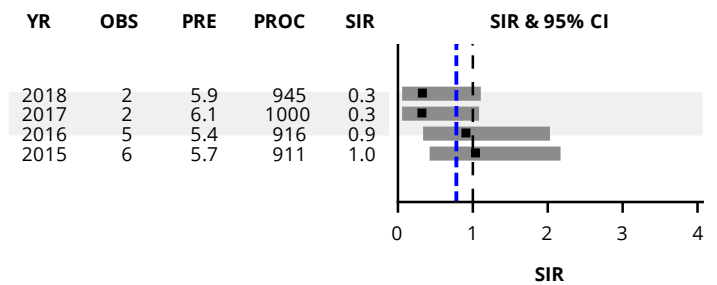


Surgical Site Infections (SSI)

SSI - Colon Surgery

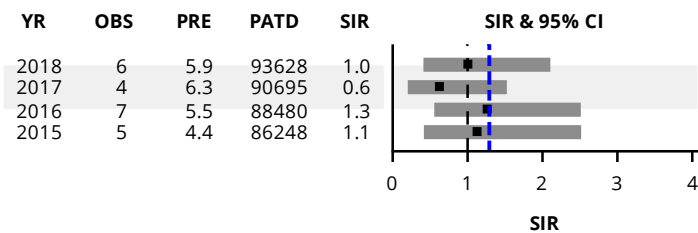


SSI - Abdominal Hysterectomy

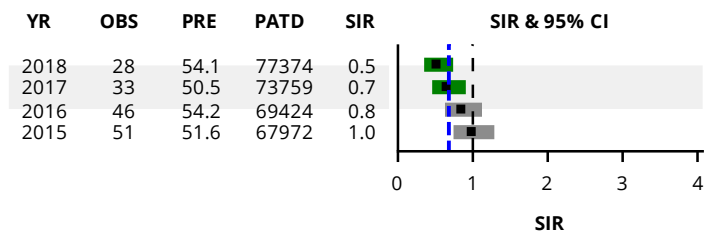


Healthcare Facility-Onset Laboratory Identified (LabID) Events

LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia



LabID - *C. difficile* Infection (CDI)



Data reported as of August 27, 2019

YR = reporting year; N = number of units reporting (CLABSI/CAUTI); OBS = observed number of infections

PRE = statistically 'predicted' number of infections, based on NHSN national baseline data

SIR = standardized infection ratio (observed/predicted number of infections)

CLD = central line days; UCD = urinary catheter days; PROC = procedures performed; PATD = patient days;

N/A = data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

■ Significantly lower than NHSN SIR of 1

■ Not significantly different from NHSN SIR of 1

■ Significantly higher than NHSN SIR of 1

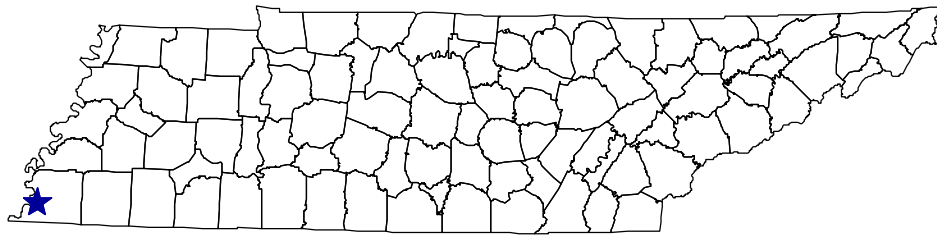
--- 2018 TN SIR

--- NHSN SIR=1

## Methodist Healthcare LeBonheur, Memphis, Shelby County

Medical School Affiliation: Major teaching

Bed Size Category: 100-399 beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2017-12/31/2017

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		TN SIR
		Observed	Predicted		SIR*	95% CI	
CLABSI	Adult/Pediatric ICU	10	9.1	5537	1.09	( 0.55, 1.94 )	0.85
	Neonatal ICU	8	10.2	7326	0.78	( 0.36, 1.48 )	0.75
	Adult/Pediatric Ward	8	4.6	4085	1.72	( 0.80, 3.27 )	0.68
CAUTI	Adult/Pediatric ICU	3	3.0	1894	0.98	( 0.25, 2.67 )	0.71
	Adult/Pediatric Ward	1	0.6	729	N/A	N/A	0.72
SSI	Colon surgery	N/A	N/A	N/A	N/A	N/A	0.83
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	1.08
LabID	MRSA bacteremia	9	3.2	73558	<b>2.76</b>	<b>( 1.35, 5.06 )</b>	1.09
	C. difficile infection	6	23.2	56436	<b>0.26</b>	<b>( 0.10, 0.54 )</b>	0.83

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

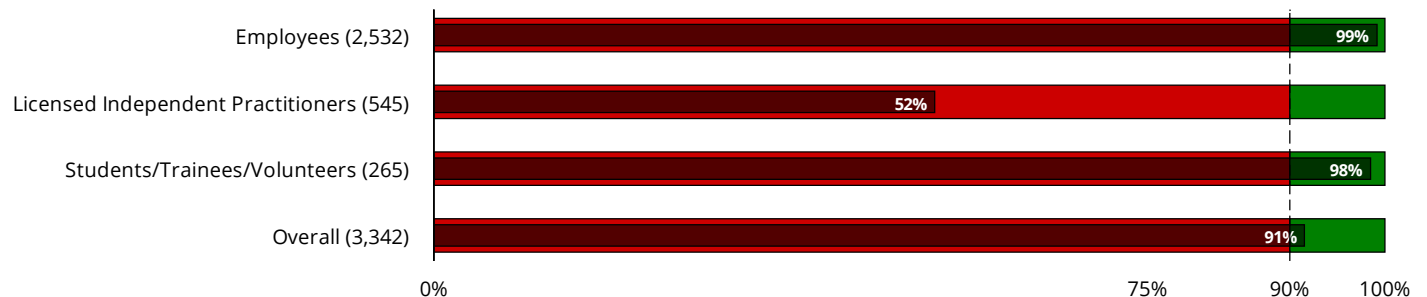
**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at Methodist Healthcare LeBonheur*

### Healthcare Personnel Influenza Vaccination - '2017/2018' Influenza Season

#### Healthcare Personnel Category (Total)



#### Healthcare Personnel Vaccinated (%)

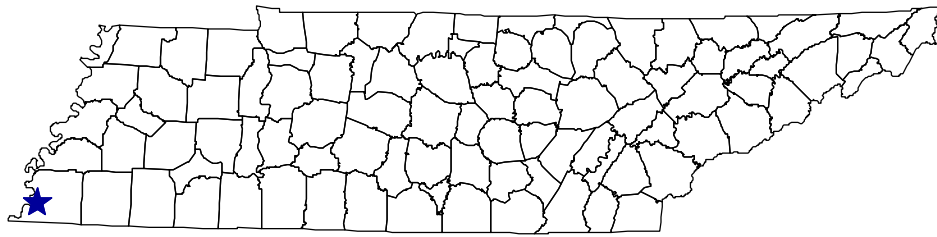
■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)



## Methodist Healthcare LeBonheur, Memphis, Shelby County

Medical School Affiliation: Major teaching

Bed Size Category: 100-399 beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2018-12/31/2018

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		TN SIR
		Observed	Predicted		SIR*	95% CI	
CLABSI	Adult/Pediatric ICU	5	9.0	5436	0.55	( 0.20, 1.23 )	0.76
	Neonatal ICU	4	9.1	6709	0.44	( 0.14, 1.05 )	0.79
	Adult/Pediatric Ward	3	5.2	4604	0.57	( 0.15, 1.56 )	0.63
CAUTI	Adult/Pediatric ICU	4	2.9	1847	1.36	( 0.43, 3.27 )	0.70
	Adult/Pediatric Ward	0	0.4	489	N/A	N/A	0.73
SSI	Colon surgery	N/A	N/A	N/A	N/A	N/A	0.79
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	0.78
LabID	MRSA bacteremia	8	2.9	77554	<b>2.76</b>	<b>( 1.28, 5.24 )</b>	1.29
	C. difficile infection	4	24.5	59380	<b>0.16</b>	<b>( 0.05, 0.39 )</b>	0.68

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

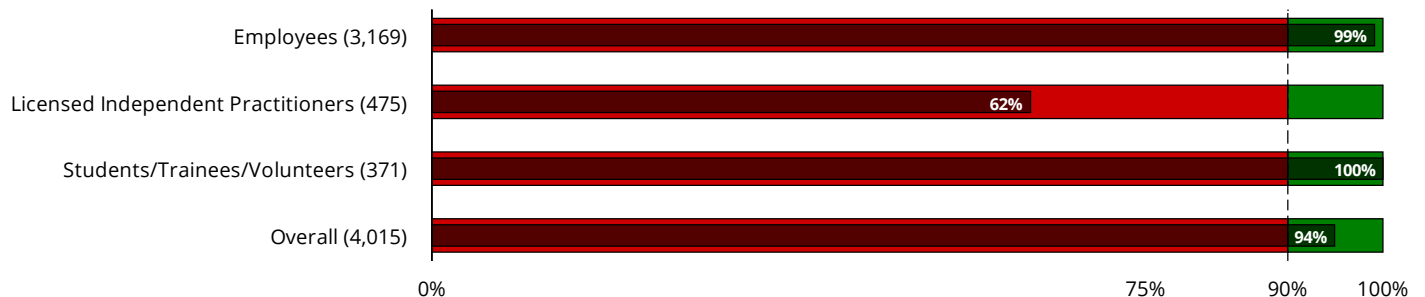
**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at Methodist Healthcare LeBonheur*

### Healthcare Personnel Influenza Vaccination - '2018/2019' Influenza Season

#### Healthcare Personnel Category (Total)

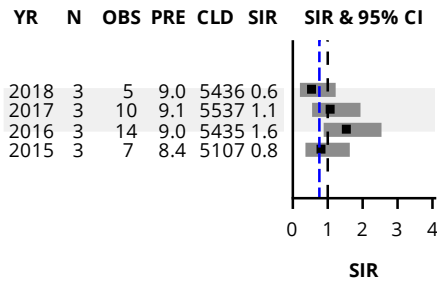


#### Healthcare Personnel Vaccinated (%)

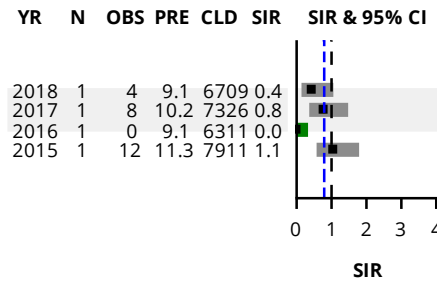
■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

Central Line-Associated Bloodstream Infections (CLABSI)

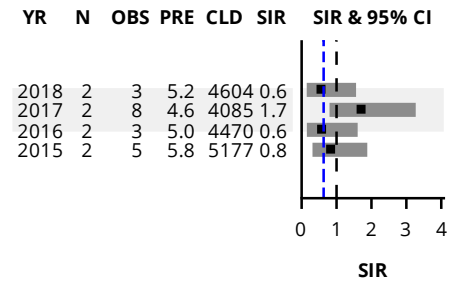
CLABSI - Adult/Pediatric ICUs



CLABSI - Neonatal ICUs

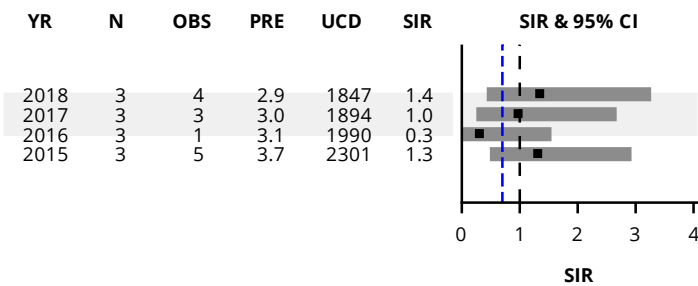


CLABSI - Adult/Pediatric Wards



Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICUs



CAUTI - Adult/Pediatric Wards

YR	N	OBS	PRE	UCD	SIR
2018	2	0	0.4	489	N/A
2017	2	1	0.6	729	N/A
2016	2	0	0.8	943	N/A
2015	2	0	0.5	673	N/A

N/A: Number of predicted infections <1; no SIR calculated

Surgical Site Infections (SSI)

SSI - Colon Surgery

YR	OBS	PRE	PROC	SIR
2018	N/A	N/A	N/A	N/A
2017	N/A	N/A	N/A	N/A
2016	N/A	N/A	N/A	N/A
2015	N/A	N/A	N/A	N/A

N/A: Number of predicted infections <1; no SIR calculated

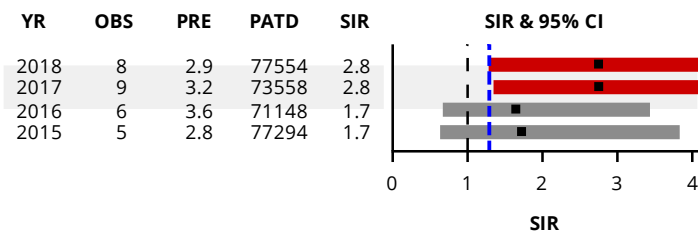
SSI - Abdominal Hysterectomy

YR	OBS	PRE	PROC	SIR
2018	N/A	N/A	N/A	N/A
2017	N/A	N/A	N/A	N/A
2016	N/A	N/A	N/A	N/A
2015	N/A	N/A	N/A	N/A

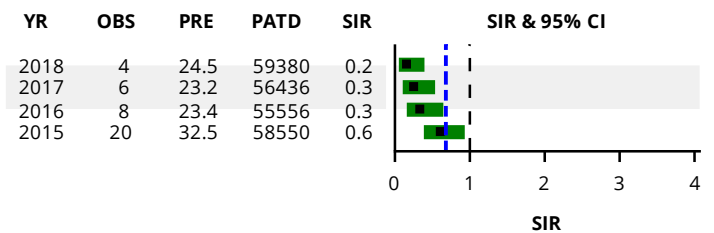
N/A: Number of predicted infections <1; no SIR calculated

Healthcare Facility-Onset Laboratory Identified (LabID) Events

LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia



LabID - *C. difficile* Infection (CDI)



Data reported as of August 27, 2019

YR = reporting year; N = number of units reporting (CLABSI/CAUTI); OBS = observed number of infections

PRE = statistically 'predicted' number of infections, based on NHSN national baseline data

SIR = standardized infection ratio (observed/predicted number of infections)

CLD = central line days; UCD = urinary catheter days; PROC = procedures performed; PATD = patient days;

N/A = data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

■ Significantly lower than NHSN SIR of 1

■ Not significantly different from NHSN SIR of 1

■ Significantly higher than NHSN SIR of 1

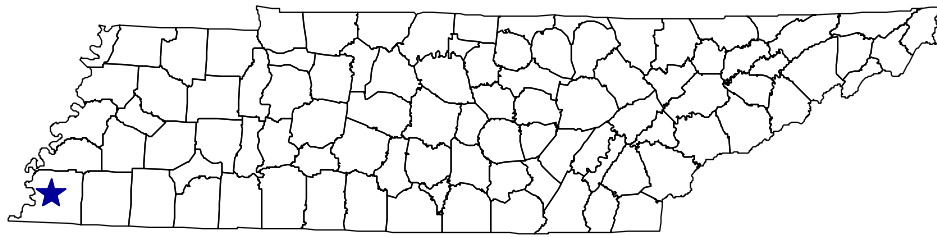
--- 2018 TN SIR

--- NHSN SIR=1

## Methodist Healthcare North, Memphis, Shelby County

Medical School Affiliation: Major teaching

Bed Size Category: 100-399 beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2017-12/31/2017

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		TN SIR
		Observed	Predicted		SIR*	95% CI	
CLABSI	Adult/Pediatric ICU	1	4.6	4767	0.21	( 0.01, 1.06 )	0.85
	Adult/Pediatric Ward	3	3.1	3767	0.94	( 0.24, 2.56 )	0.68
CAUTI	Adult/Pediatric ICU	0	3.0	2308	<b>0.00</b>	<b>( 0.00, 1.00 )</b>	0.71
	Adult/Pediatric Ward	0	1.6	1383	0.00	( 0.00, 1.79 )	0.72
SSI	Colon surgery	3	1.9	86	1.55	( 0.39, 4.21 )	0.83
	Abdominal hysterectomy	N/A	N/A	N/A	<b>N/A</b>	<b>N/A</b>	1.08
LabID	MRSA bacteremia	4	3.2	47047	1.24	( 0.39, 2.99 )	1.09
	C. difficile infection	24	36.1	47047	<b>0.66</b>	<b>( 0.44, 0.97 )</b>	0.83

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

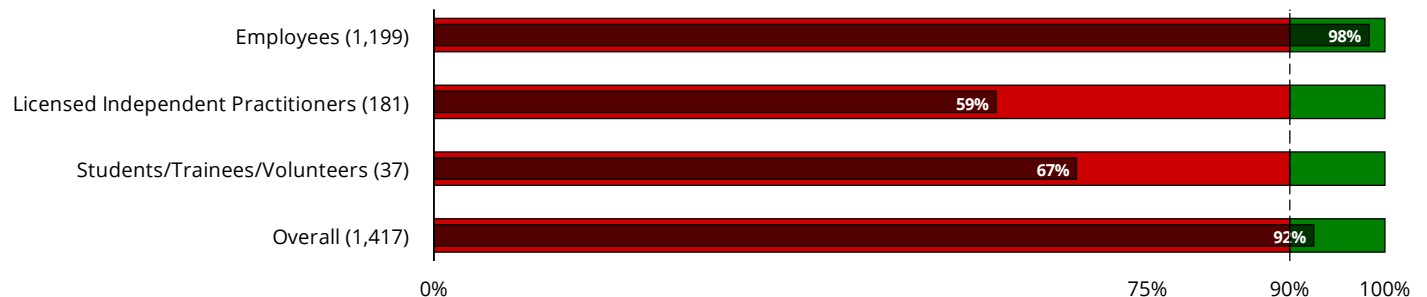
**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at Methodist Healthcare North*

### Healthcare Personnel Influenza Vaccination - '2017/2018' Influenza Season

#### Healthcare Personnel Category (Total)



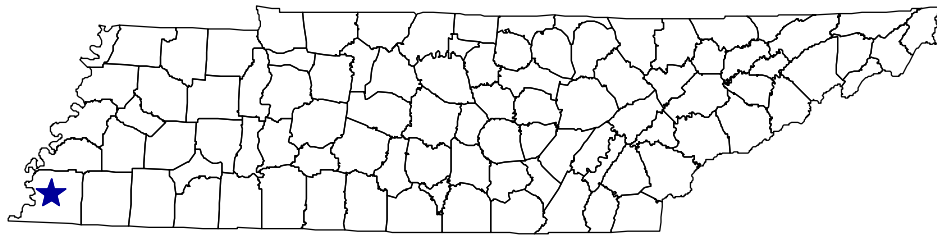
#### Healthcare Personnel Vaccinated (%)

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

## Methodist Healthcare North, Memphis, Shelby County

Medical School Affiliation: Major teaching

Bed Size Category: 100-399 beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2018-12/31/2018

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		
		Observed	Predicted		SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	4	4.3	4389	0.93	( 0.30, 2.24 )	0.76
	Adult/Pediatric Ward	5	3.1	3727	1.58	( 0.58, 3.51 )	0.63
CAUTI	Adult/Pediatric ICU	0	2.7	2602	0.00	( 0.00, 1.08 )	0.70
	Adult/Pediatric Ward	0	1.2	1302	0.00	( 0.00, 2.39 )	0.73
SSI	Colon surgery	1	1.7	80	0.57	( 0.03, 2.81 )	0.79
	Abdominal hysterectomy	N/A	N/A	N/A	<b>N/A</b>	<b>N/A</b>	0.78
LabID	MRSA bacteremia	5	3.6	44551	1.38	( 0.50, 3.05 )	1.29
	C. difficile infection	7	25.9	44551	<b>0.27</b>	<b>( 0.12, 0.53 )</b>	0.68

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

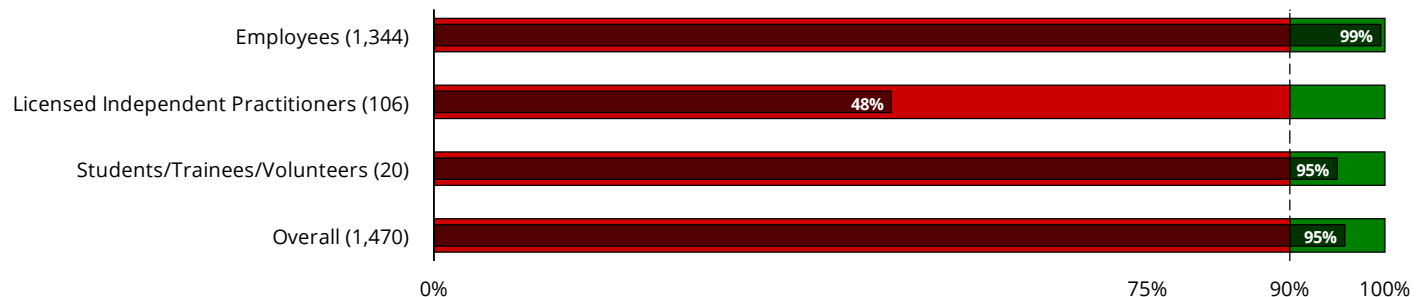
**N/A**: Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at Methodist Healthcare North*

### Healthcare Personnel Influenza Vaccination - '2018/2019' Influenza Season

#### Healthcare Personnel Category (Total)

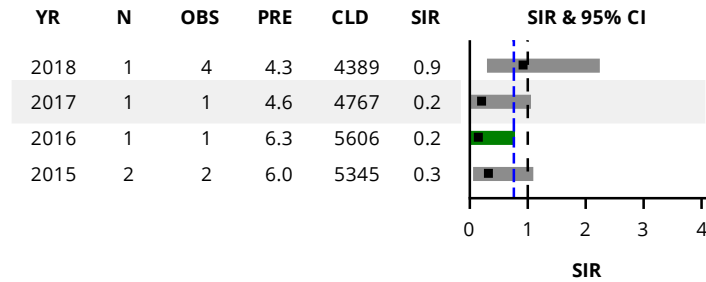


#### Healthcare Personnel Vaccinated (%)

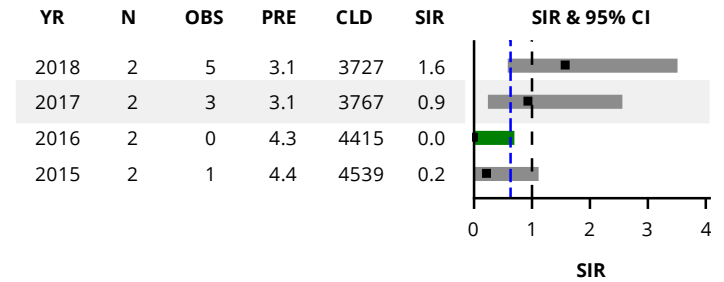
■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

### Central Line-Associated Bloodstream Infections (CLABSI)

#### CLABSI - Adult/Pediatric ICUs

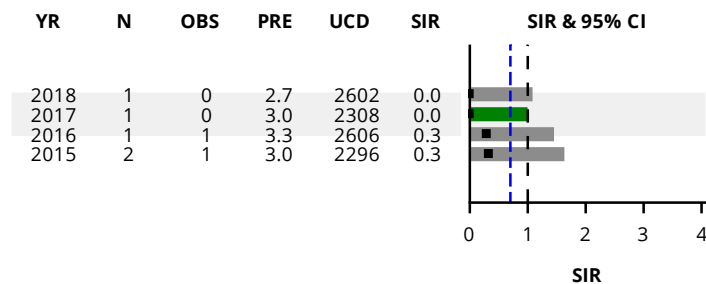


#### CLABSI - Adult/Pediatric Wards

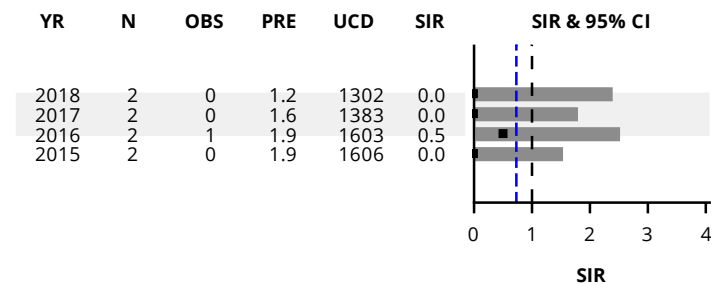


### Catheter-Associated Urinary Tract Infections (CAUTI)

#### CAUTI - Adult/Pediatric ICUs

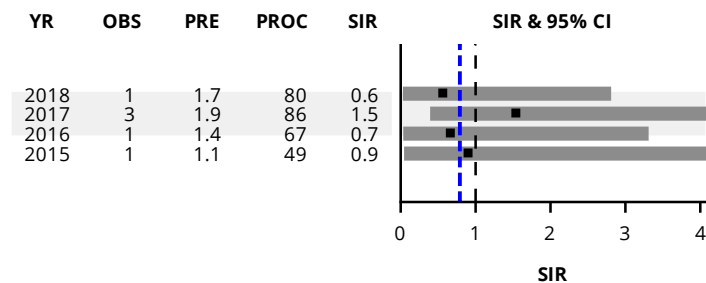


#### CAUTI - Adult/Pediatric Wards



### Surgical Site Infections (SSI)

#### SSI - Colon Surgery



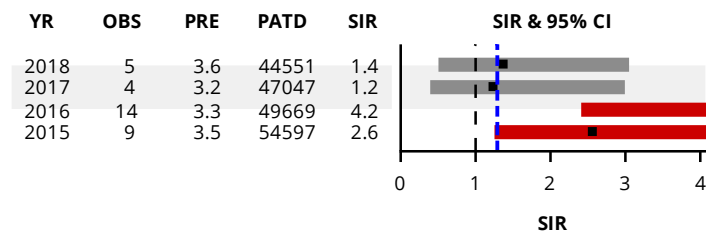
#### SSI - Abdominal Hysterectomy

YR	OBS	PRE	PROC	SIR
2018	N/A	N/A	N/A	N/A
2017	N/A	N/A	N/A	N/A
2016	N/A	N/A	N/A	N/A
2015	N/A	N/A	N/A	N/A

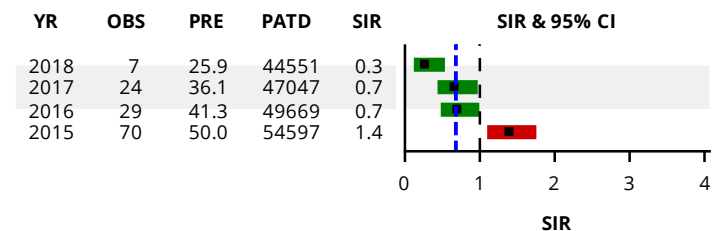
N/A: Number of predicted infections <1; no SIR calculated

### Healthcare Facility-Onset Laboratory Identified (LabID) Events

#### LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia



#### LabID - *C. difficile* Infection (CDI)



Data reported as of August 27, 2019

YR = reporting year; N = number of units reporting (CLABSI/CAUTI); OBS = observed number of infections

PRE = statistically 'predicted' number of infections, based on NHSN national baseline data

SIR = standardized infection ratio (observed/predicted number of infections)

CLD = central line days; UCD = urinary catheter days; PROC = procedures performed; PATD = patient days;

N/A = data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

■ Significantly lower than NHSN SIR of 1

■ Not significantly different from NHSN SIR of 1

■ Significantly higher than NHSN SIR of 1

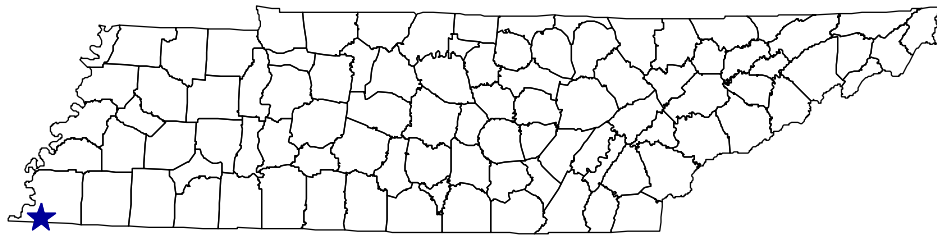
--- 2018 TN SIR

--- NHSN SIR=1

## Methodist Healthcare South, Memphis, Shelby County

Medical School Affiliation: Major teaching

Bed Size Category: 100-399 beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2017-12/31/2017

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		
		Observed	Predicted		SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	1	1.8	1917	0.53	( 0.03, 2.63 )	0.85
	Neonatal ICU	N/A	N/A	N/A	N/A	N/A	0.75
	Adult/Pediatric Ward	0	2.4	2894	0.00	( 0.00, 1.22 )	0.68
CAUTI	Adult/Pediatric ICU	0	1.3	1314	0.00	( 0.00, 2.14 )	0.71
	Adult/Pediatric Ward	0	1.6	1687	0.00	( 0.00, 1.87 )	0.72
SSI	Colon surgery	0	0.7	33	N/A	N/A	0.83
	Abdominal hysterectomy	0	0.3	59	N/A	N/A	1.08
LabID	MRSA bacteremia	1	1.5	24303	0.64	( 0.03, 3.15 )	1.09
	C. difficile infection	19	15.5	22727	1.22	( 0.76, 1.88 )	0.83

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

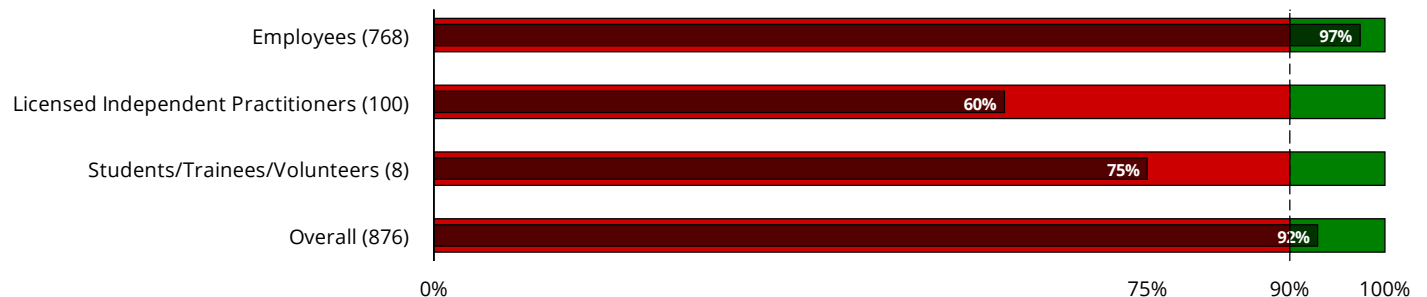
**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at Methodist Healthcare South*

### Healthcare Personnel Influenza Vaccination - '2017/2018' Influenza Season

#### Healthcare Personnel Category (Total)



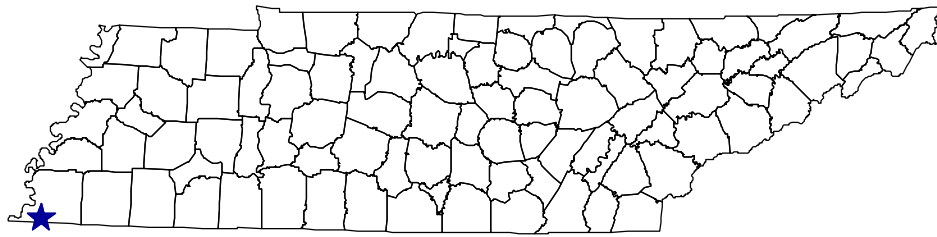
#### Healthcare Personnel Vaccinated (%)

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

## Methodist Healthcare South, Memphis, Shelby County

Medical School Affiliation: Major teaching

Bed Size Category: 100-399 beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2018-12/31/2018

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		TN SIR
		Observed	Predicted		SIR*	95% CI	
CLABSI	Adult/Pediatric ICU	2	1.5	1632	1.25	( 0.21, 4.13 )	0.76
	Neonatal ICU	N/A	N/A	N/A	N/A	N/A	0.79
	Adult/Pediatric Ward	2	2.5	3038	0.78	( 0.13, 2.57 )	0.63
CAUTI	Adult/Pediatric ICU	0	1.3	1226	0.00	( 0.00, 2.30 )	0.70
	Adult/Pediatric Ward	0	1.7	1830	0.00	( 0.00, 1.72 )	0.73
SSI	Colon surgery	1	0.9	41	N/A	N/A	0.79
	Abdominal hysterectomy	0	0.3	43	N/A	N/A	0.78
LabID	MRSA bacteremia	4	1.3	26729	2.87	( 0.91, 6.93 )	1.29
	C. difficile infection	8	15.8	24940	0.50	( 0.23, 0.96 )	0.68

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at Methodist Healthcare South*

### Healthcare Personnel Influenza Vaccination - '2018/2019' Influenza Season

#### Healthcare Personnel Category (Total)

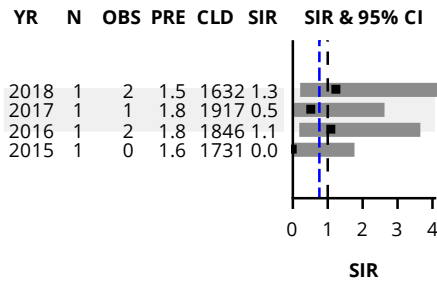


#### Healthcare Personnel Vaccinated (%)

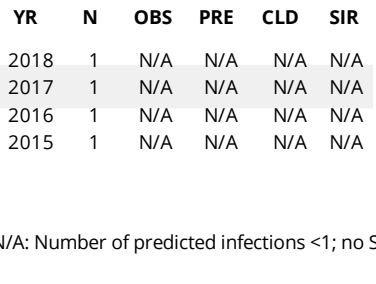
■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

Central Line-Associated Bloodstream Infections (CLABSI)

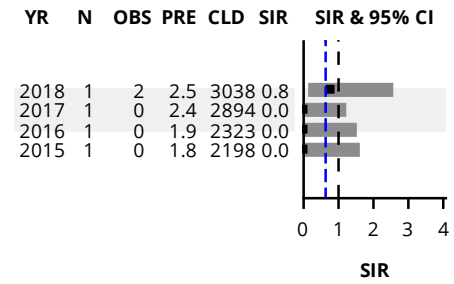
CLABSI - Adult/Pediatric ICUs



CLABSI - Neonatal ICUs

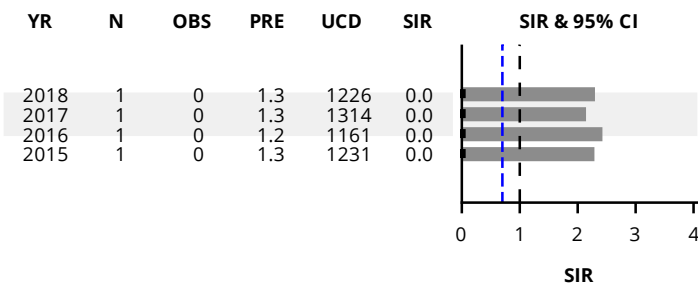


CLABSI - Adult/Pediatric Wards

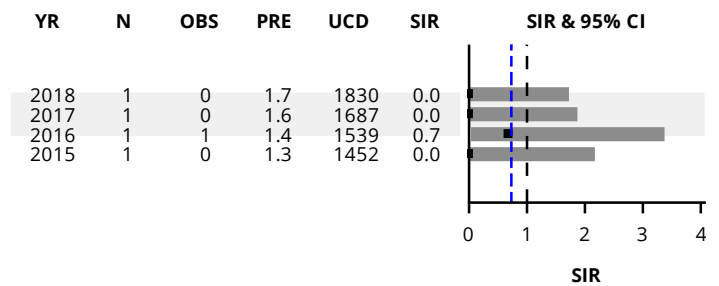


Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICUs

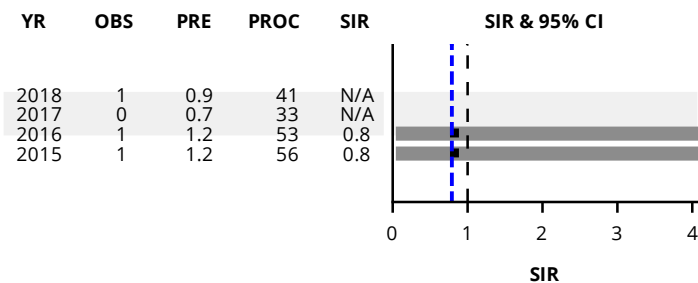


CAUTI - Adult/Pediatric Wards

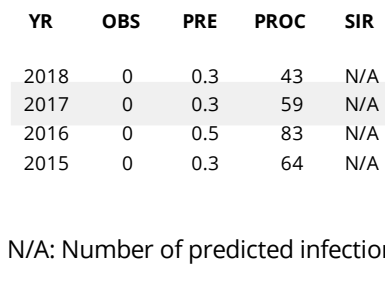


Surgical Site Infections (SSI)

SSI - Colon Surgery

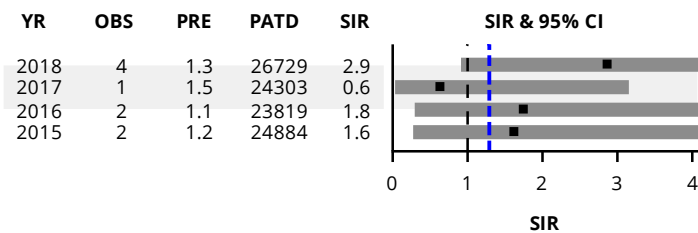


SSI - Abdominal Hysterectomy

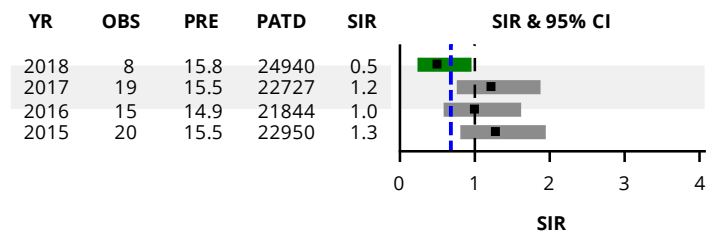


Healthcare Facility-Onset Laboratory Identified (LabID) Events

LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia



LabID - *C. difficile* Infection (CDI)



Data reported as of August 27, 2019

YR = reporting year; N = number of units reporting (CLABSI/CAUTI); OBS = observed number of infections

PRE = statistically 'predicted' number of infections, based on NHSN national baseline data

SIR = standardized infection ratio (observed/predicted number of infections)

CLD = central line days; UCD = urinary catheter days; PROC = procedures performed; PATD = patient days;

N/A = data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

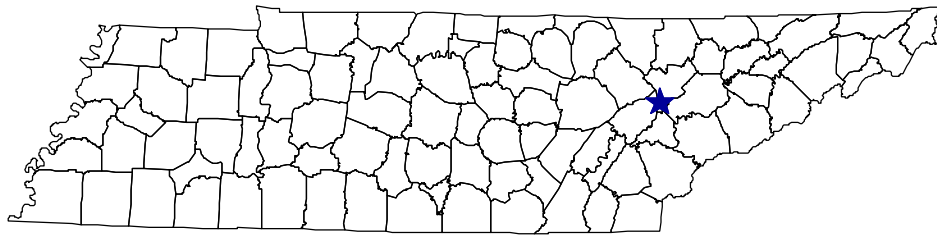
- Significantly lower than NHSN SIR of 1
- Not significantly different from NHSN SIR of 1
- Significantly higher than NHSN SIR of 1
- - - 2018 TN SIR
- - - NHSN SIR=1



## Methodist Medical Center of Oak Ridge, Oak Ridge, Anderson County

Medical School Affiliation: Undergraduate teaching

Bed Size Category: 100-399 beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2017-12/31/2017

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		
		Observed	Predicted		SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	1	2.5	2976	0.39	( 0.02, 1.91 )	0.85
	Adult/Pediatric Ward	1	3.3	4457	0.30	( 0.02, 1.48 )	0.68
CAUTI	Adult/Pediatric ICU	0	5.4	6038	<b>0.00</b>	<b>( 0.00, 0.55 )</b>	0.71
	Adult/Pediatric Ward	2	5.4	6554	0.37	( 0.06, 1.22 )	0.72
SSI	Colon surgery	2	2.3	105	0.84	( 0.14, 2.76 )	0.83
	Abdominal hysterectomy	0	0.2	41	<b>N/A</b>	<b>N/A</b>	1.08
LabID	MRSA bacteremia	0	3.2	49993	<b>0.00</b>	<b>( 0.00, 0.93 )</b>	1.09
	C. difficile infection	21	35.5	49189	<b>0.59</b>	<b>( 0.38, 0.89 )</b>	0.83

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at Methodist Medical Center of Oak Ridge*

### Healthcare Personnel Influenza Vaccination - '2017/2018' Influenza Season

#### Healthcare Personnel Category (Total)



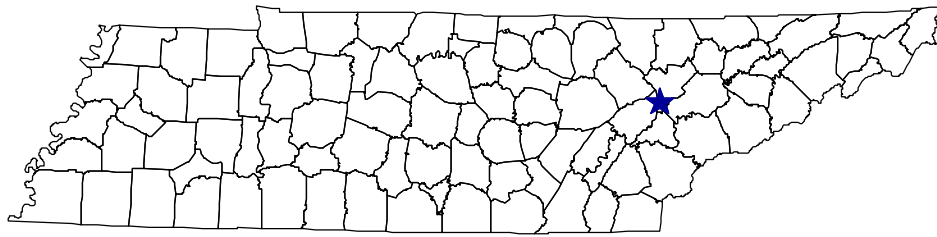
#### Healthcare Personnel Vaccinated (%)

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

## Methodist Medical Center of Oak Ridge, Oak Ridge, Anderson County

Medical School Affiliation: None

Bed Size Category: 100-399 beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2018-12/31/2018

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		
		Observed	Predicted		SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	0	2.2	2575	0.00	( 0.00, 1.34 )	0.76
	Adult/Pediatric Ward	0	2.7	3616	0.00	( 0.00, 1.11 )	0.63
CAUTI	Adult/Pediatric ICU	0	4.6	5142	<b>0.00</b>	<b>( 0.00, 0.65 )</b>	0.70
	Adult/Pediatric Ward	6	4.6	5652	1.28	( 0.52, 2.66 )	0.73
SSI	Colon surgery	5	2.2	109	2.23	( 0.82, 4.93 )	0.79
	Abdominal hysterectomy	1	0.2	44	<b>N/A</b>	<b>N/A</b>	0.78
LabID	MRSA bacteremia	4	2.7	48294	1.45	( 0.46, 3.49 )	1.29
	C. difficile infection	4	34.5	47528	<b>0.12</b>	<b>( 0.04, 0.28 )</b>	0.68

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at Methodist Medical Center of Oak Ridge*

### Healthcare Personnel Influenza Vaccination - '2018/2019' Influenza Season

#### Healthcare Personnel Category (Total)

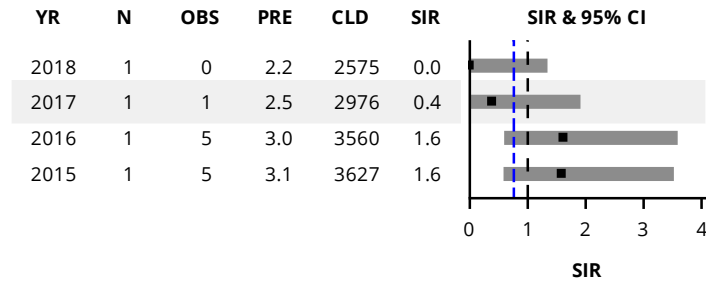


#### Healthcare Personnel Vaccinated (%)

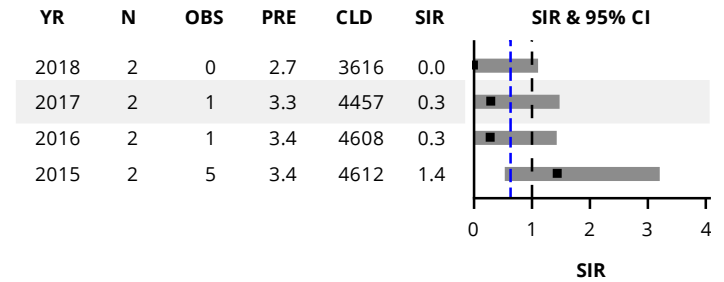
■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

### Central Line-Associated Bloodstream Infections (CLABSI)

#### CLABSI - Adult/Pediatric ICUs

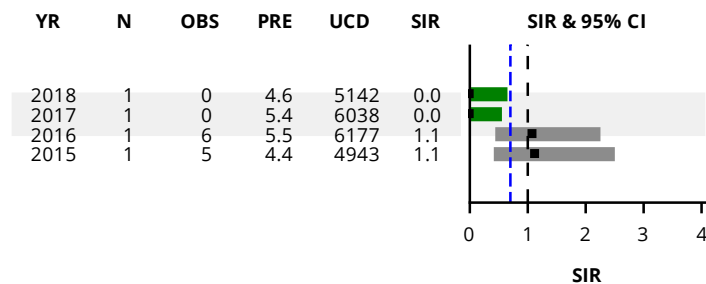


#### CLABSI - Adult/Pediatric Wards

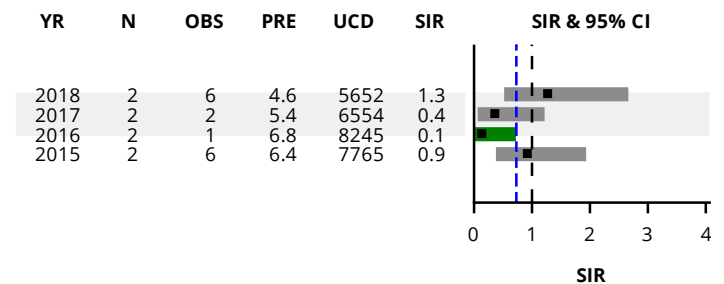


### Catheter-Associated Urinary Tract Infections (CAUTI)

#### CAUTI - Adult/Pediatric ICUs

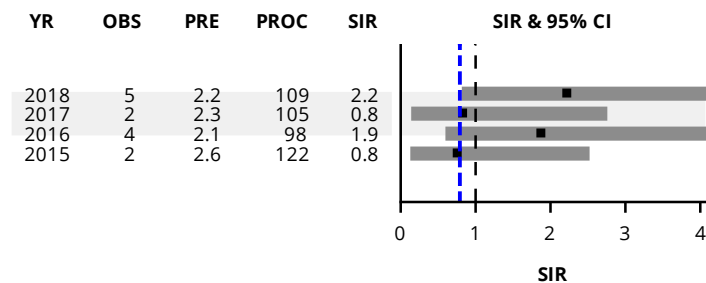


#### CAUTI - Adult/Pediatric Wards



### Surgical Site Infections (SSI)

#### SSI - Colon Surgery



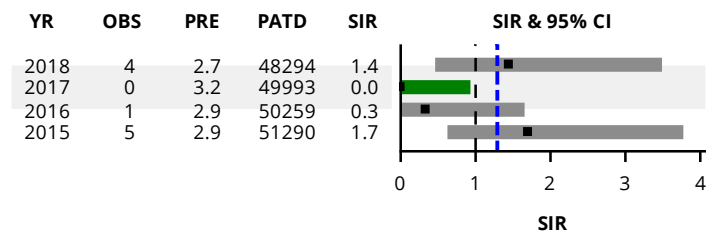
#### SSI - Abdominal Hysterectomy

YR	OBS	PRE	PROC	SIR
2018	1	0.2	44	N/A
2017	0	0.2	41	N/A
2016	0	0.1	29	N/A
2015	1	0.2	47	N/A

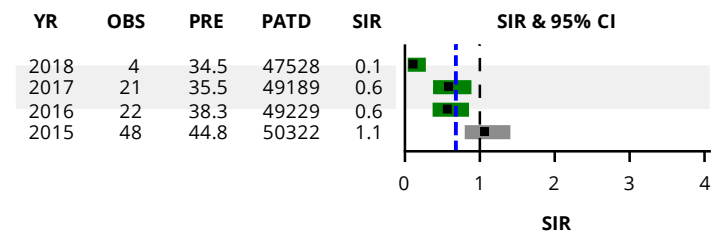
N/A: Number of predicted infections <1; no SIR calculated

### Healthcare Facility-Onset Laboratory Identified (LabID) Events

#### LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia



#### LabID - *C. difficile* Infection (CDI)



Data reported as of August 27, 2019

YR = reporting year; N = number of units reporting (CLABSI/CAUTI); OBS = observed number of infections

PRE = statistically 'predicted' number of infections, based on NHSN national baseline data

SIR = standardized infection ratio (observed/predicted number of infections)

CLD = central line days; UCD = urinary catheter days; PROC = procedures performed; PATD = patient days;

N/A = data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

■ Significantly lower than NHSN SIR of 1

■ Not significantly different from NHSN SIR of 1

■ Significantly higher than NHSN SIR of 1

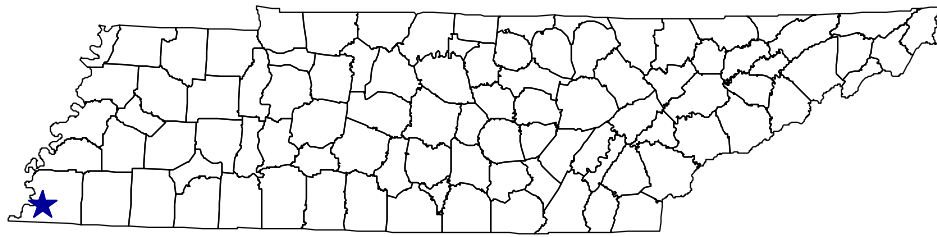
--- 2018 TN SIR

--- NHSN SIR=1

## Methodist University Hospital, Memphis, Shelby County

Medical School Affiliation: Major teaching

Bed Size Category: 400+ beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2017-12/31/2017

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		TN SIR
		Observed	Predicted		SIR*	95% CI	
CLABSI	Adult/Pediatric ICU	12	14.8	13143	0.81	( 0.44, 1.38 )	0.85
	Adult/Pediatric Ward	13	16.3	16777	0.80	( 0.44, 1.33 )	0.68
CAUTI	Adult/Pediatric ICU	3	21.7	11121	<b>0.14</b>	<b>( 0.04, 0.38 )</b>	0.71
	Adult/Pediatric Ward	10	10.3	8670	0.97	( 0.49, 1.72 )	0.72
SSI	Colon surgery	13	8.6	240	1.50	( 0.83, 2.50 )	0.83
	Abdominal hysterectomy	0	1.3	156	0.00	( 0.00, 2.16 )	1.08
LabID	MRSA bacteremia	14	13.1	121190	1.06	( 0.60, 1.74 )	1.09
	C. difficile infection	103	91.4	121190	1.13	( 0.92, 1.36 )	0.83

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

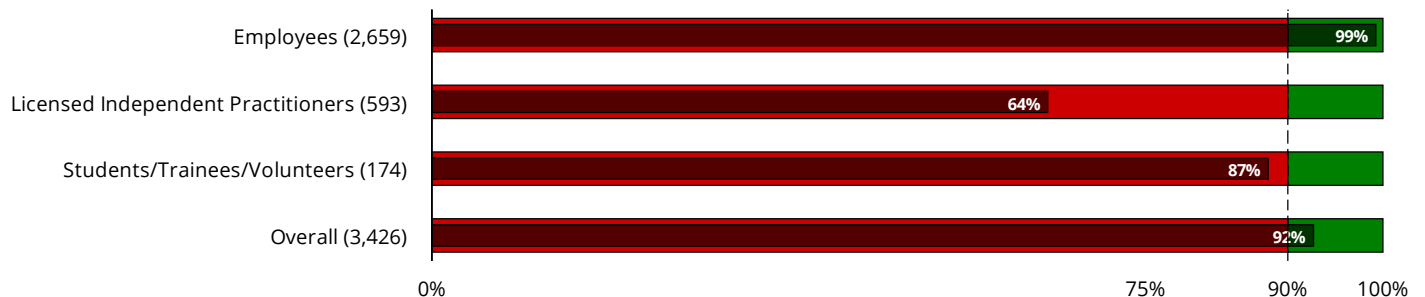
**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at Methodist University Hospital*

### Healthcare Personnel Influenza Vaccination - '2017/2018' Influenza Season

#### Healthcare Personnel Category (Total)



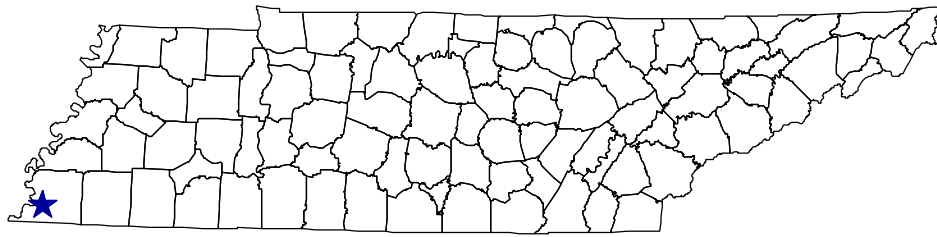
#### Healthcare Personnel Vaccinated (%)

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

## Methodist University Hospital, Memphis, Shelby County

Medical School Affiliation: Major teaching

Bed Size Category: 400+ beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2018-12/31/2018

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		TN SIR
		Observed	Predicted		SIR*	95% CI	
CLABSI	Adult/Pediatric ICU	9	12.0	10667	0.75	( 0.37, 1.37 )	0.76
	Adult/Pediatric Ward	4	12.5	12864	<b>0.32</b>	<b>( 0.10, 0.77 )</b>	0.63
CAUTI	Adult/Pediatric ICU	2	19.5	9993	<b>0.10</b>	<b>( 0.02, 0.34 )</b>	0.70
	Adult/Pediatric Ward	6	8.9	7467	0.67	( 0.27, 1.40 )	0.73
SSI	Colon surgery	7	6.5	222	1.07	( 0.47, 2.12 )	0.79
	Abdominal hysterectomy	0	0.7	77	<b>N/A</b>	<b>N/A</b>	0.78
LabID	MRSA bacteremia	16	12.7	117065	1.26	( 0.74, 2.00 )	1.29
	C. difficile infection	53	82.4	117065	<b>0.64</b>	<b>( 0.49, 0.84 )</b>	0.68

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

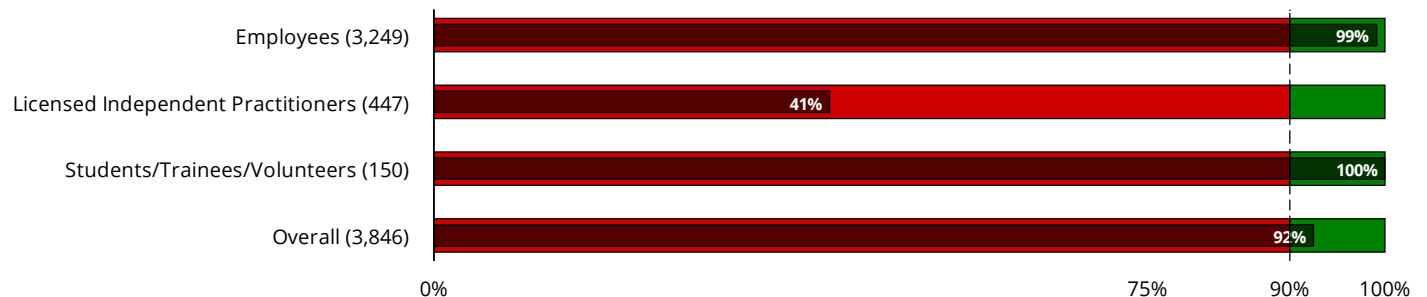
**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at Methodist University Hospital*

### Healthcare Personnel Influenza Vaccination - '2018/2019' Influenza Season

#### Healthcare Personnel Category (Total)

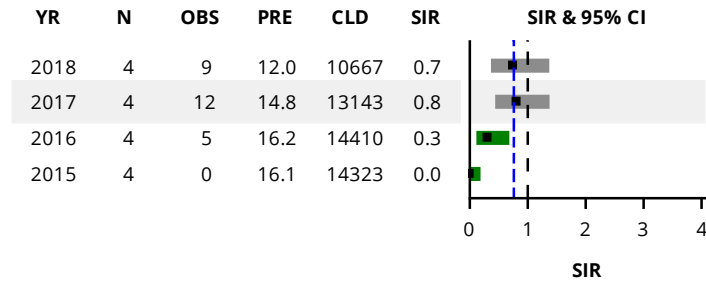


#### Healthcare Personnel Vaccinated (%)

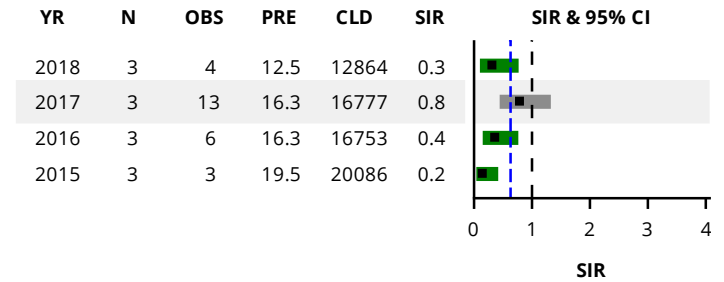
■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

### Central Line-Associated Bloodstream Infections (CLABSI)

#### CLABSI - Adult/Pediatric ICUs

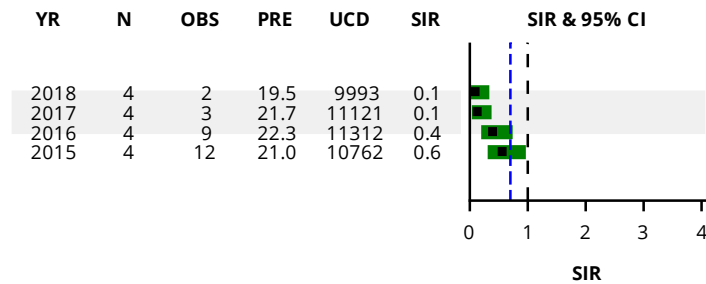


#### CLABSI - Adult/Pediatric Wards

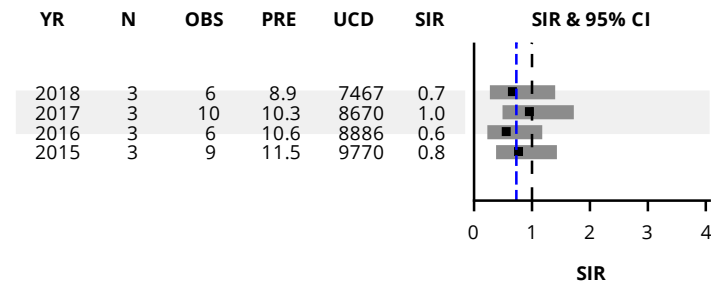


### Catheter-Associated Urinary Tract Infections (CAUTI)

#### CAUTI - Adult/Pediatric ICUs

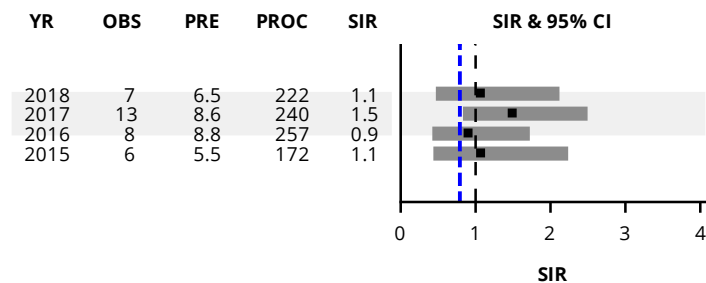


#### CAUTI - Adult/Pediatric Wards

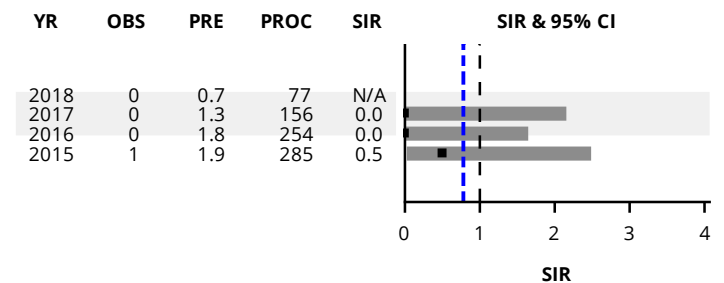


### Surgical Site Infections (SSI)

#### SSI - Colon Surgery

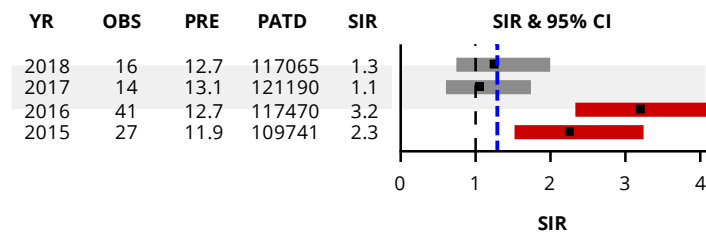


#### SSI - Abdominal Hysterectomy

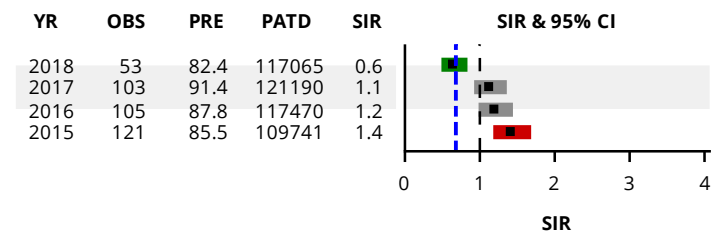


### Healthcare Facility-Onset Laboratory Identified (LabID) Events

#### LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia



#### LabID - *C. difficile* Infection (CDI)



Data reported as of August 27, 2019

YR = reporting year; N = number of units reporting (CLABSI/CAUTI); OBS = observed number of infections

PRE = statistically 'predicted' number of infections, based on NHSN national baseline data

SIR = standardized infection ratio (observed/predicted number of infections)

CLD = central line days; UCD = urinary catheter days; PROC = procedures performed; PATD = patient days;

N/A = data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

■ Significantly lower than NHSN SIR of 1

■ Not significantly different from NHSN SIR of 1

■ Significantly higher than NHSN SIR of 1

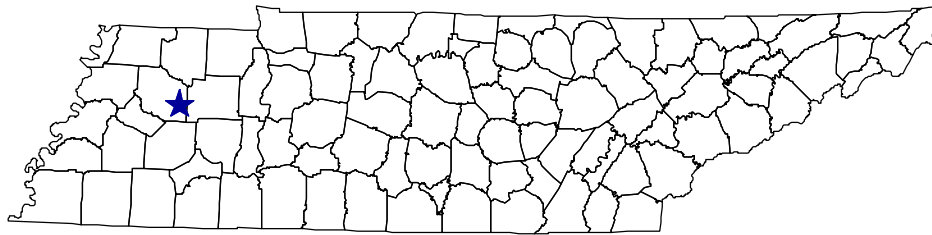
--- 2018 TN SIR

--- NHSN SIR=1

**Milan General Hospital, Milan, Gibson County**

Medical School Affiliation: None

Bed Size Category: 50-99 beds



**Healthcare-Associated Infections (HAI) Summary**

**Standardized Infection Ratio (SIR) by Infection Type, 01/01/2017-12/31/2017**

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		
		Observed	Predicted		SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	N/A	N/A	N/A	N/A	N/A	0.85
	Adult/Pediatric Ward	0	0.0	106	N/A	N/A	0.68
CAUTI	Adult/Pediatric ICU	0	0.0	64	N/A	N/A	0.71
	Adult/Pediatric Ward	0	0.2	501	N/A	N/A	0.72
SSI	Colon surgery	0	0.4	28	N/A	N/A	0.83
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	1.08
LabID	MRSA bacteremia	0	0.0	1575	N/A	N/A	1.09
	C. difficile infection	0	0.4	1575	N/A	N/A	0.83

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at Milan General Hospital*

**Healthcare Personnel Influenza Vaccination - '2017/2018' Influenza Season**

**Healthcare Personnel Category (Total)**



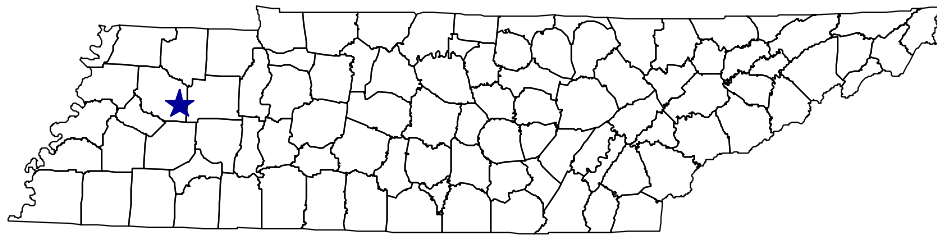
**Healthcare Personnel Vaccinated (%)**

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

## Milan General Hospital, Milan, Gibson County

Medical School Affiliation: None

Bed Size Category: 50-99 beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2018-12/31/2018

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		
		Observed	Predicted		SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	N/A	N/A	N/A	N/A	N/A	0.76
	Adult/Pediatric Ward	0	0.0	169	N/A	N/A	0.63
CAUTI	Adult/Pediatric ICU	0	0.0	66	N/A	N/A	0.70
	Adult/Pediatric Ward	0	0.2	554	N/A	N/A	0.73
SSI	Colon surgery	0	0.3	21	N/A	N/A	0.79
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	0.78
LabID	MRSA bacteremia	0	0.0	1740	N/A	N/A	1.29
	C. difficile infection	0	0.4	1740	N/A	N/A	0.68

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

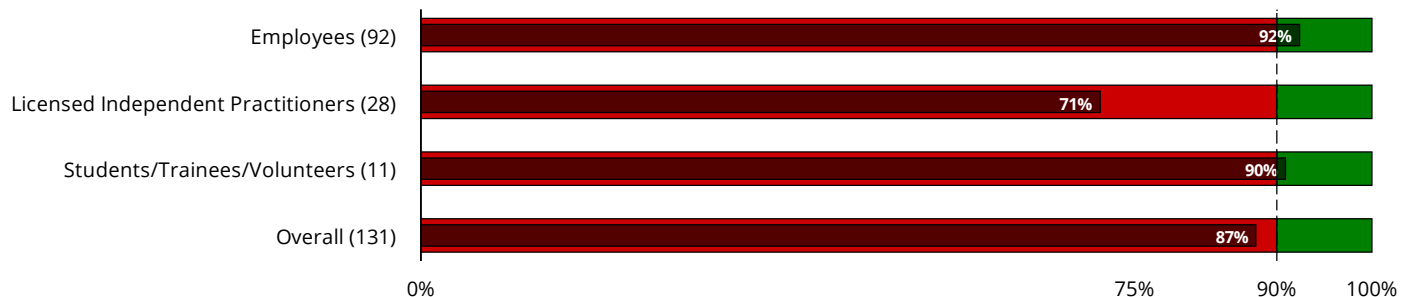
**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at Milan General Hospital*

### Healthcare Personnel Influenza Vaccination - '2018/2019' Influenza Season

#### Healthcare Personnel Category (Total)



#### Healthcare Personnel Vaccinated (%)

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)



Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric ICUs

YR	N	OBS	PRE	CLD	SIR
2018	1	N/A	N/A	N/A	N/A
2017	1	N/A	N/A	N/A	N/A
2016	1	N/A	N/A	N/A	N/A
2015	1	N/A	N/A	N/A	N/A

N/A: Number of predicted infections <1; no SIR calculated

CLABSI - Adult/Pediatric Wards

YR	N	OBS	PRE	CLD	SIR
2018	1	0	0.0	169	N/A
2017	1	0	0.0	106	N/A
2016	1	0	0.0	96	N/A
2015	1	0	0.1	245	N/A

N/A: Number of predicted infections <1; no SIR calculated

Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICUs

YR	N	OBS	PRE	UCD	SIR
2018	1	0	0.0	66	N/A
2017	1	0	0.0	64	N/A
2016	1	0	0.0	69	N/A
2015	1	0	0.0	80	N/A

N/A: Number of predicted infections <1; no SIR calculated

CAUTI - Adult/Pediatric Wards

YR	N	OBS	PRE	UCD	SIR
2018	1	0	0.2	554	N/A
2017	1	0	0.2	501	N/A
2016	1	0	0.2	534	N/A
2015	1	0	0.2	409	N/A

N/A: Number of predicted infections <1; no SIR calculated

Surgical Site Infections (SSI)

SSI - Colon Surgery

YR	OBS	PRE	PROC	SIR
2018	0	0.3	21	N/A
2017	0	0.4	28	N/A
2016	0	0.3	25	N/A
2015	0	0.6	32	N/A

N/A: Number of predicted infections <1; no SIR calculated

SSI - Abdominal Hysterectomy

YR	OBS	PRE	PROC	SIR
2018	N/A	N/A	N/A	N/A
2017	N/A	N/A	N/A	N/A
2016	N/A	N/A	N/A	N/A
2015	N/A	N/A	N/A	N/A

N/A: Number of predicted infections <1; no SIR calculated

Healthcare Facility-Onset Laboratory Identified (LabID) Events

LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia

YR	OBS	PRE	PATD	SIR
2018	0	0.0	1740	N/A
2017	0	0.0	1575	N/A
2016	0	0.0	1475	N/A
2015	0	0.0	2115	N/A

N/A: Number of predicted infections <1; no SIR calculated

LabID - *C. difficile* Infection (CDI)

YR	OBS	PRE	PATD	SIR
2018	0	0.4	1740	N/A
2017	0	0.4	1575	N/A
2016	0	0.3	1475	N/A
2015	0	0.4	2115	N/A

N/A: Number of predicted infections <1; no SIR calculated

Data reported as of August 27, 2019

YR = reporting year; N = number of units reporting (CLABSI/CAUTI); OBS = observed number of infections

PRE = statistically 'predicted' number of infections, based on NHSN national baseline data

SIR = standardized infection ratio (observed/predicted number of infections)

CLD = central line days; UCD = urinary catheter days; PROC = procedures performed; PATD = patient days;

N/A = data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

■ Significantly lower than NHSN SIR of 1

■ Not significantly different from NHSN SIR of 1

■ Significantly higher than NHSN SIR of 1

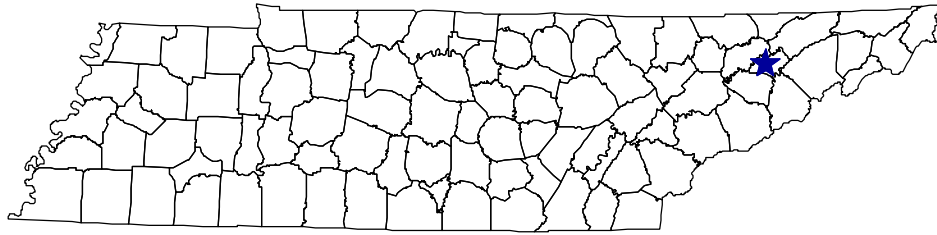
--- 2018 TN SIR

--- NHSN SIR=1

**Morristown-Hamblen Healthcare System, Morristown, Hamblen County**

Medical School Affiliation: Graduate teaching

Bed Size Category: 100-399 beds



**Healthcare-Associated Infections (HAI) Summary**

**Standardized Infection Ratio (SIR) by Infection Type, 01/01/2017-12/31/2017**

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		
		Observed	Predicted		SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	0	1.1	1320	0.00	( 0.00, 2.59 )	0.85
	Adult/Pediatric Ward	0	1.6	2247	0.00	( 0.00, 1.76 )	0.68
CAUTI	Adult/Pediatric ICU	0	2.0	2418	0.00	( 0.00, 1.49 )	0.71
	Adult/Pediatric Ward	0	2.7	3706	0.00	( 0.00, 1.09 )	0.72
SSI	Colon surgery	0	1.3	61	0.00	( 0.00, 2.19 )	0.83
	Abdominal hysterectomy	0	0.3	56	<b>N/A</b>	<b>N/A</b>	1.08
LabID	MRSA bacteremia	0	1.4	24738	0.00	( 0.00, 2.12 )	1.09
	C. difficile infection	4	13.8	23293	<b>0.29</b>	<b>( 0.09, 0.70 )</b>	0.83

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

**See page 3 for more detailed information about HAIs at Morristown-Hamblen Healthcare System**

**Healthcare Personnel Influenza Vaccination - '2017/2018' Influenza Season**

**Healthcare Personnel Category (Total)**



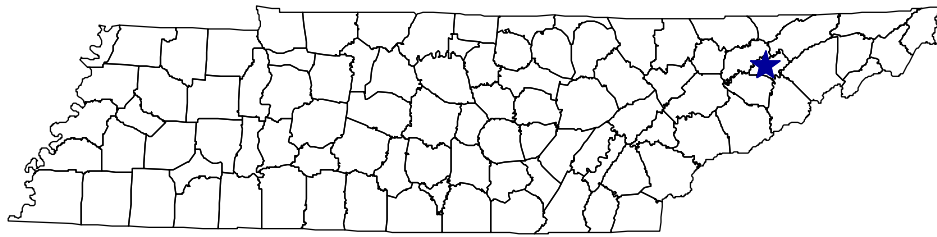
**Healthcare Personnel Vaccinated (%)**

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

## Morristown-Hamblen Healthcare System, Morristown, Hamblen County

Medical School Affiliation: None

Bed Size Category: 100-399 beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2018-12/31/2018

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		
		Observed	Predicted		SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	0	1.0	1363	0.00	( 0.00, 2.92 )	0.76
	Adult/Pediatric Ward	0	1.4	2227	0.00	( 0.00, 2.07 )	0.63
CAUTI	Adult/Pediatric ICU	0	1.9	2724	0.00	( 0.00, 1.50 )	0.70
	Adult/Pediatric Ward	0	3.2	4990	<b>0.00</b>	<b>( 0.00, 0.92 )</b>	0.73
SSI	Colon surgery	0	0.9	43	<b>N/A</b>	<b>N/A</b>	0.79
	Abdominal hysterectomy	0	0.3	59	<b>N/A</b>	<b>N/A</b>	0.78
LabID	MRSA bacteremia	0	1.1	27607	0.00	( 0.00, 2.50 )	1.29
	C. difficile infection	0	13.3	26279	<b>0.00</b>	<b>( 0.00, 0.22 )</b>	0.68

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at Morristown-Hamblen Healthcare System*

### Healthcare Personnel Influenza Vaccination - '2018/2019' Influenza Season

#### Healthcare Personnel Category (Total)

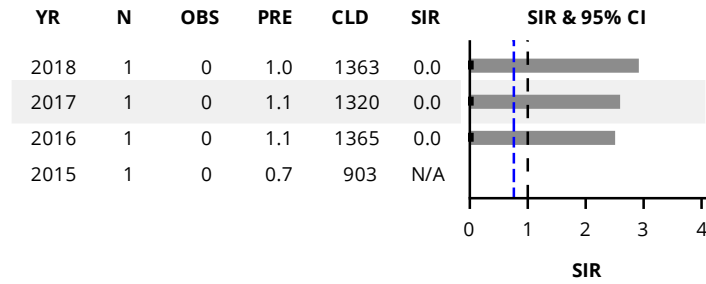


#### Healthcare Personnel Vaccinated (%)

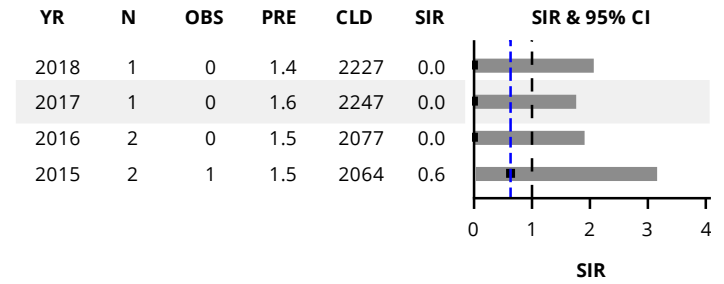
■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric ICUs

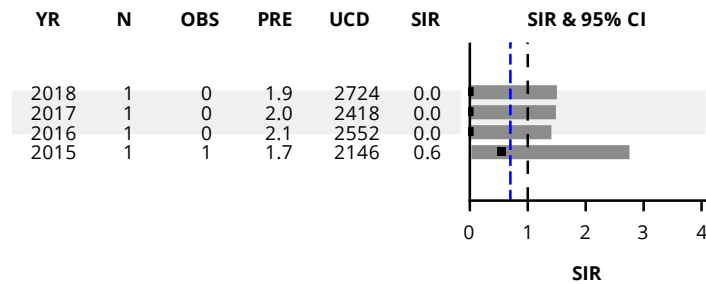


CLABSI - Adult/Pediatric Wards

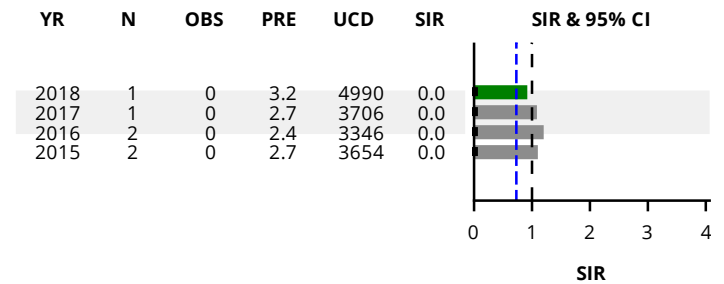


Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICUs

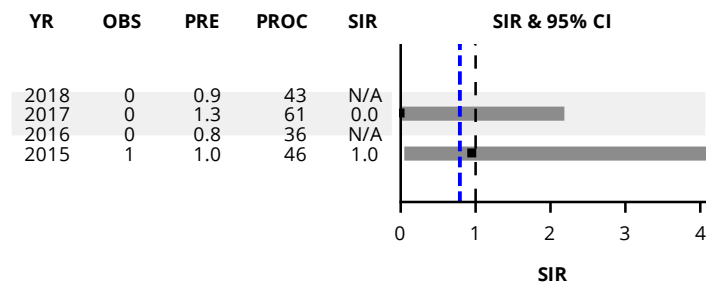


CAUTI - Adult/Pediatric Wards

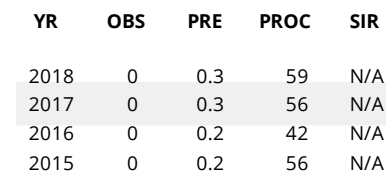


Surgical Site Infections (SSI)

SSI - Colon Surgery



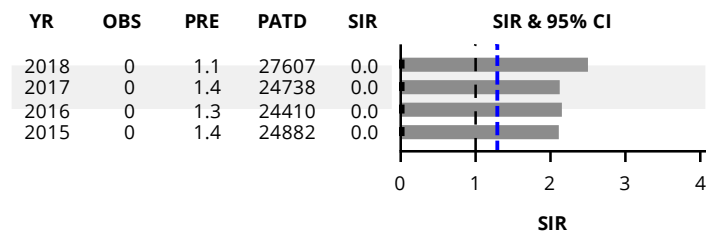
SSI - Abdominal Hysterectomy



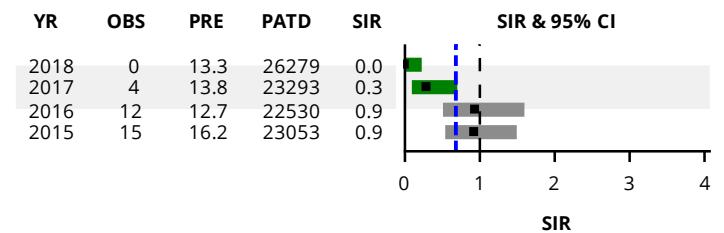
N/A: Number of predicted infections <1; no SIR calculated

Healthcare Facility-Onset Laboratory Identified (LabID) Events

LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia



LabID - *C. difficile* Infection (CDI)



Data reported as of August 27, 2019

YR = reporting year; N = number of units reporting (CLABSI/CAUTI); OBS = observed number of infections

PRE = statistically 'predicted' number of infections, based on NHSN national baseline data

SIR = standardized infection ratio (observed/predicted number of infections)

CLD = central line days; UCD = urinary catheter days; PROC = procedures performed; PATD = patient days;

N/A = data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

■ Significantly lower than NHSN SIR of 1

■ Not significantly different from NHSN SIR of 1

■ Significantly higher than NHSN SIR of 1

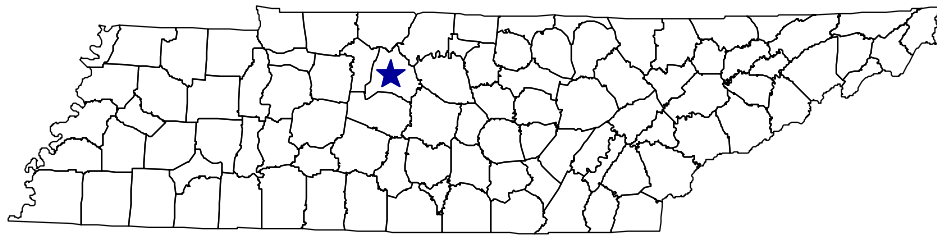
--- 2018 TN SIR

--- NHSN SIR=1

## Nashville General Hospital at Meharry, Nashville, Davidson County

Medical School Affiliation: Major teaching

Bed Size Category: 100-399 beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2017-12/31/2017

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		
		Observed	Predicted		SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	2	0.7	753	N/A	N/A	0.85
	Neonatal ICU	N/A	N/A	N/A	N/A	N/A	0.75
	Adult/Pediatric Ward	0	0.7	851	N/A	N/A	0.68
CAUTI	Adult/Pediatric ICU	0	1.2	1196	0.00	( 0.00, 2.36 )	0.71
	Adult/Pediatric Ward	0	0.7	753	N/A	N/A	0.72
SSI	Colon surgery	1	1.2	37	0.81	( 0.04, 3.98 )	0.83
	Abdominal hysterectomy	0	0.2	27	N/A	N/A	1.08
LabID	MRSA bacteremia	4	1.1	16586	3.62	( 1.15, 8.72 )	1.09
	C. difficile infection	2	6.6	16134	0.30	( 0.05, 1.00 )	0.83

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

See page 3 for more detailed information about HAIs at Nashville General Hospital at Meharry

### Healthcare Personnel Influenza Vaccination - '2017/2018' Influenza Season

#### Healthcare Personnel Category (Total)



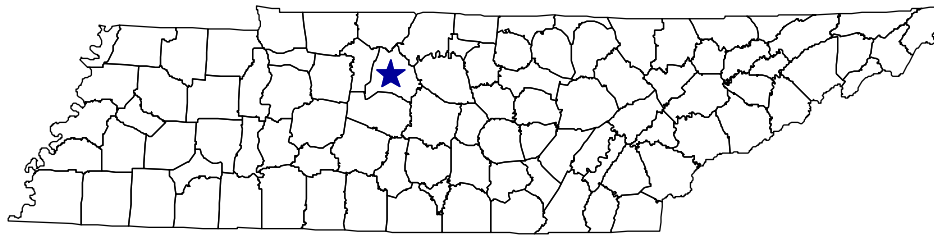
#### Healthcare Personnel Vaccinated (%)

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

## Nashville General Hospital at Meharry, Nashville, Davidson County

Medical School Affiliation: Major teaching

Bed Size Category: 50-99 beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2018-12/31/2018

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		
		Observed	Predicted		SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	1	0.6	676	N/A	N/A	0.76
	Neonatal ICU	N/A	N/A	N/A	N/A	N/A	0.79
	Adult/Pediatric Ward	0	0.5	640	N/A	N/A	0.63
CAUTI	Adult/Pediatric ICU	0	1.0	1027	0.00	( 0.00, 2.74 )	0.70
	Adult/Pediatric Ward	0	0.3	415	N/A	N/A	0.73
SSI	Colon surgery	4	0.9	33	N/A	N/A	0.79
	Abdominal hysterectomy	1	0.1	21	N/A	N/A	0.78
LabID	MRSA bacteremia	0	1.0	14928	0.00	( 0.00, 2.95 )	1.29
	C. difficile infection	2	9.3	13912	0.21	( 0.04, 0.71 )	0.68

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at Nashville General Hospital at Meharry*

### Healthcare Personnel Influenza Vaccination - '2018/2019' Influenza Season

#### Healthcare Personnel Category (Total)

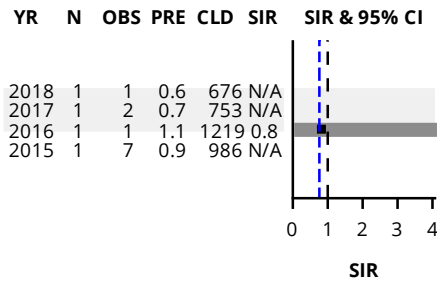


#### Healthcare Personnel Vaccinated (%)

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric ICUs



CLABSI - Neonatal ICUs

YR	N	OBS	PRE	CLI
2018	1	N/A	N/A	N/A
2017	1	N/A	N/A	N/A
2016	1	N/A	N/A	N/A
2015	1	N/A	N/A	N/A

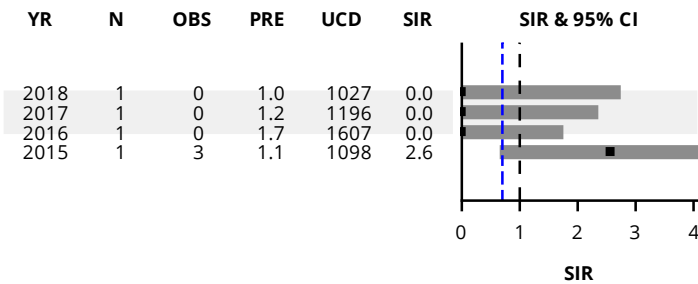
N/A: Number of predicted infections <1; no SIR calculated

CLABSI - Adult/Pediatric Wards

YR	N	OBS	PRE	CLD	SIR
2018	2	0	0.5	640	N/A
2017	2	0	0.7	851	N/A
2016	2	0	0.8	1050	N/A
2015	2	1	0.7	845	N/A

Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICUs



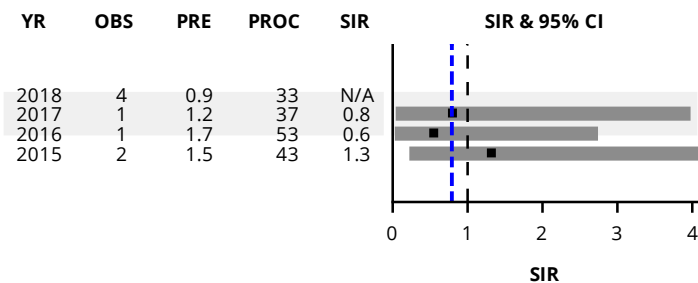
CAUTI - Adult/Pediatric Wards

YR	N	OBS	PRE	UCD	SIR
2018	2	0	0.3	415	N/A
2017	2	0	0.7	753	N/A
2016	2	2	0.8	907	N/A
2015	2	3	0.8	852	N/A

N/A: Number of predicted infections <1; no SIR calculated

Surgical Site Infections (SSI)

SSI - Colon Surgery



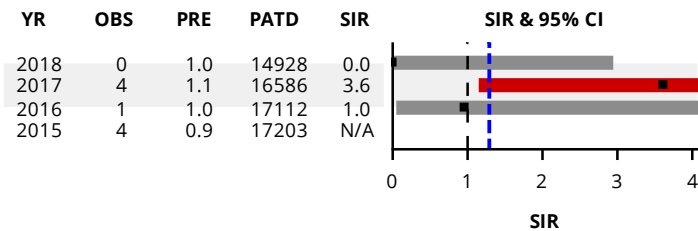
SSI - Abdominal Hysterectomy

YR	OBS	PRE	PROC	SIR
2018	1	0.1	21	N/A
2017	0	0.2	27	N/A
2016	1	0.3	38	N/A
2015	1	0.2	27	N/A

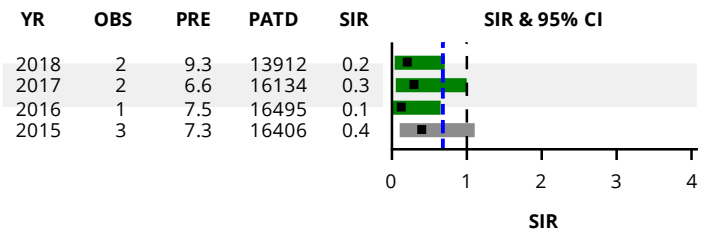
N/A: Number of predicted infections <1; no SIR calculated

Healthcare Facility-Onset Laboratory Identified (LabID) Events

LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia



LabID - *C. difficile* Infection (CDI)



Data reported as of August 27, 2019

YR = reporting year; N = number of units reporting (CLABSI/CAUTI); OBS = observed number of infections

PRE = statistically 'predicted' number of infections, based on NHSN national baseline data

SIR = standardized infection ratio (observed/predicted number of infections)

CLD = central line days; UCD = urinary catheter days; PROC = procedures performed; PATD = patient days;

N/A = data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

■ Significantly lower than NHSN SIR of 1

■ Not significantly different from NHSN SIR of 1

■ Significantly higher than NHSN SIR of 1

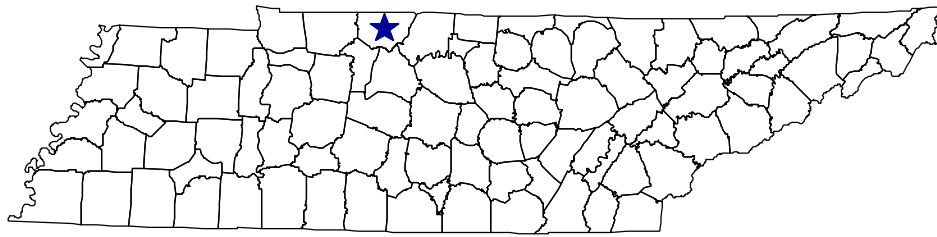
--- 2018 TN SIR

--- NHSN SIR=1

## NorthCrest Medical Center, Springfield, Robertson County

Medical School Affiliation: None

Bed Size Category: 100-399 beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2017-12/31/2017

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		
		Observed	Predicted		SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	0	0.5	786	N/A	N/A	0.85
	Adult/Pediatric Ward	1	0.6	1068	N/A	N/A	0.68
CAUTI	Adult/Pediatric ICU	1	0.9	1249	N/A	N/A	0.71
	Adult/Pediatric Ward	0	0.7	1038	N/A	N/A	0.72
SSI	Colon surgery	1	0.9	40	N/A	N/A	0.83
	Abdominal hysterectomy	0	0.1	42	N/A	N/A	1.08
LabID	MRSA bacteremia	1	0.5	15012	N/A	N/A	1.09
	C. difficile infection	1	6.3	13769	0.16	(0.01, 0.78)	0.83

Green highlighting indicates an SIR significantly LOWER than the 2015 national baseline

Red highlighting indicates an SIR significantly HIGHER than the 2015 national baseline

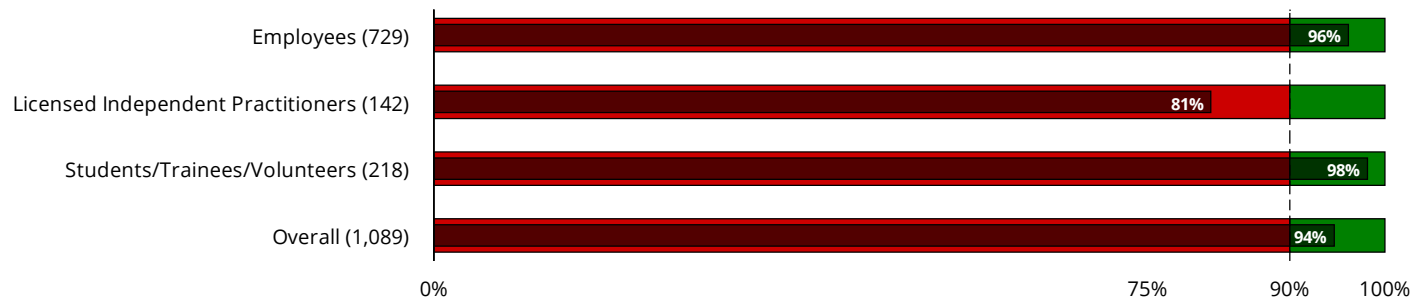
N/A: Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

See page 3 for more detailed information about HAIs at NorthCrest Medical Center

### Healthcare Personnel Influenza Vaccination - '2017/2018' Influenza Season

#### Healthcare Personnel Category (Total)



#### Healthcare Personnel Vaccinated (%)

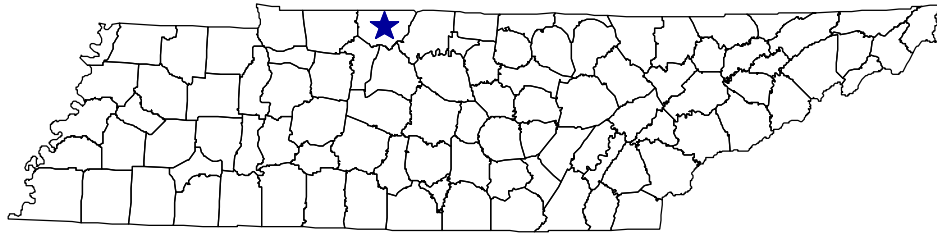
Below 90% >90% (HHS Healthy People 2020 Goal)



## NorthCrest Medical Center, Springfield, Robertson County

Medical School Affiliation: None

Bed Size Category: 100-399 beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2018-12/31/2018

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		
		Observed	Predicted		SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	0	0.3	476	N/A	N/A	0.76
	Adult/Pediatric Ward	1	0.4	680	N/A	N/A	0.63
CAUTI	Adult/Pediatric ICU	0	0.8	1178	N/A	N/A	0.70
	Adult/Pediatric Ward	0	0.6	932	N/A	N/A	0.73
SSI	Colon surgery	0	0.5	28	N/A	N/A	0.79
	Abdominal hysterectomy	0	0.1	33	N/A	N/A	0.78
LabID	MRSA bacteremia	1	0.5	15141	N/A	N/A	1.29
	C. difficile infection	9	6.5	13382	1.38	( 0.67, 2.53 )	0.68

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at NorthCrest Medical Center*

### Healthcare Personnel Influenza Vaccination - '2018/2019' Influenza Season

#### Healthcare Personnel Category (Total)



#### Healthcare Personnel Vaccinated (%)

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric ICUs

YR	N	OBS	PRE	CLD	SIR
2018	1	0	0.3	476	N/A
2017	1	0	0.5	786	N/A
2016	1	0	0.8	1113	N/A
2015	1	0	0.4	629	N/A

N/A: Number of predicted infections <1; no SIR calculated

CLABSI - Adult/Pediatric Wards

YR	N	OBS	PRE	CLD	SIR
2018	2	1	0.4	680	N/A
2017	2	1	0.6	1068	N/A
2016	2	0	0.8	1376	N/A
2015	2	0	0.8	1256	N/A

N/A: Number of predicted infections <1; no SIR calculated

Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICUs

YR	N	OBS	PRE	UCD	SIR	SIR & 95% CI
2018	1	0	0.8	1178	N/A	
2017	1	1	0.9	1249	N/A	
2016	1	1	1.0	1454	0.9	
2015	1	0	0.8	1160	N/A	

CAUTI - Adult/Pediatric Wards

YR	N	OBS	PRE	UCD	SIR
2018	2	0	0.6	932	N/A
2017	2	0	0.7	1038	N/A
2016	2	1	0.9	1379	N/A
2015	2	1	1.0	1496	1.0

N/A: Number of predicted infections <1; no SIR calculated

Surgical Site Infections (SSI)

SSI - Colon Surgery

YR	OBS	PRE	PROC	SIR
2018	0	0.5	28	N/A
2017	1	0.9	40	N/A
2016	0	0.7	33	N/A
2015	0	0.6	26	N/A

N/A: Number of predicted infections <1; no SIR calculated

SSI - Abdominal Hysterectomy

YR	OBS	PRE	PROC	SIR
2018	0	0.1	33	N/A
2017	0	0.1	42	N/A
2016	0	0.2	61	N/A
2015	0	0.1	31	N/A

N/A: Number of predicted infections <1; no SIR calculated

Healthcare Facility-Onset Laboratory Identified (LabID) Events

LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia

YR	OBS	PRE	PATD	SIR
2018	1	0.5	15141	N/A
2017	1	0.5	15012	N/A
2016	0	0.6	16886	N/A
2015	0	0.7	17221	N/A

N/A: Number of predicted infections <1; no SIR calculated

LabID - *C. difficile* Infection (CDI)

YR	OBS	PRE	PATD	SIR	SIR & 95% CI
2018	9	6.5	13382	1.4	
2017	1	6.3	13769	0.2	
2016	3	6.9	15615	0.4	
2015	7	5.4	16086	1.3	

Data reported as of August 27, 2019

YR = reporting year; N = number of units reporting (CLABSI/CAUTI); OBS = observed number of infections

PRE = statistically 'predicted' number of infections, based on NHSN national baseline data

SIR = standardized infection ratio (observed/predicted number of infections)

CLD = central line days; UCD = urinary catheter days; PROC = procedures performed; PATD = patient days;

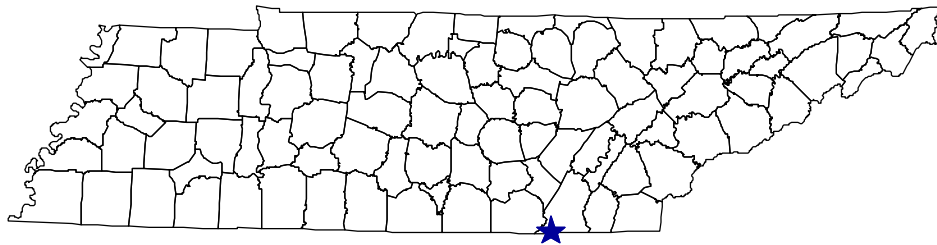
N/A = data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

- Significantly lower than NHSN SIR of 1
- Not significantly different from NHSN SIR of 1
- Significantly higher than NHSN SIR of 1
- - - 2018 TN SIR
- - - NHSN SIR=1

## Parkridge East Hospital, Chattanooga, Hamilton County

Medical School Affiliation: None

Bed Size Category: 100-399 beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2017-12/31/2017

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		
		Observed	Predicted		SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	1	0.4	629	N/A	N/A	0.85
	Neonatal ICU	1	0.3	172	N/A	N/A	0.75
	Adult/Pediatric Ward	0	0.3	582	N/A	N/A	0.68
CAUTI	Adult/Pediatric ICU	1	0.7	944	N/A	N/A	0.71
	Adult/Pediatric Ward	2	0.5	895	N/A	N/A	0.72
SSI	Colon surgery	N/A	N/A	N/A	N/A	N/A	0.83
	Abdominal hysterectomy	1	1.2	274	0.78	( 0.04, 3.84 )	1.08
LabID	MRSA bacteremia	2	0.7	22719	N/A	N/A	1.09
	C. difficile infection	3	10.7	16451	0.28	( 0.07, 0.76 )	0.83

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at Parkridge East Hospital*

### Healthcare Personnel Influenza Vaccination - '2017/2018' Influenza Season

#### Healthcare Personnel Category (Total)



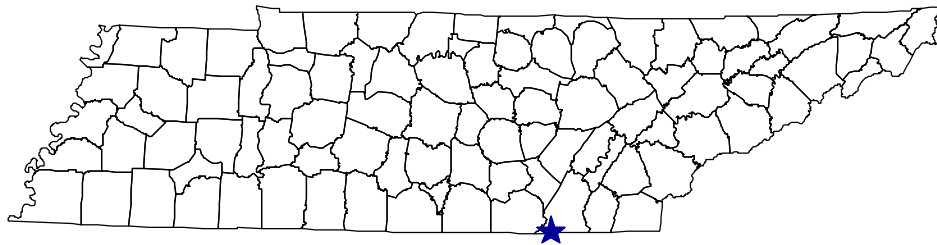
#### Healthcare Personnel Vaccinated (%)

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

## Parkridge East Hospital, Chattanooga, Hamilton County

Medical School Affiliation: Graduate teaching

Bed Size Category: 100-399 beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2018-12/31/2018

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		
		Observed	Predicted		SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	0	0.3	408	N/A	N/A	0.76
	Neonatal ICU	0	0.6	403	N/A	N/A	0.79
	Adult/Pediatric Ward	0	0.3	428	N/A	N/A	0.63
CAUTI	Adult/Pediatric ICU	0	0.4	487	N/A	N/A	0.70
	Adult/Pediatric Ward	0	0.5	691	N/A	N/A	0.73
SSI	Colon surgery	N/A	N/A	N/A	N/A	N/A	0.79
	Abdominal hysterectomy	2	1.3	257	1.53	( 0.26, 5.05 )	0.78
LabID	MRSA bacteremia	1	0.9	22531	N/A	N/A	1.29
	C. difficile infection	0	9.1	15490	0.00	( 0.00, 0.33 )	0.68

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

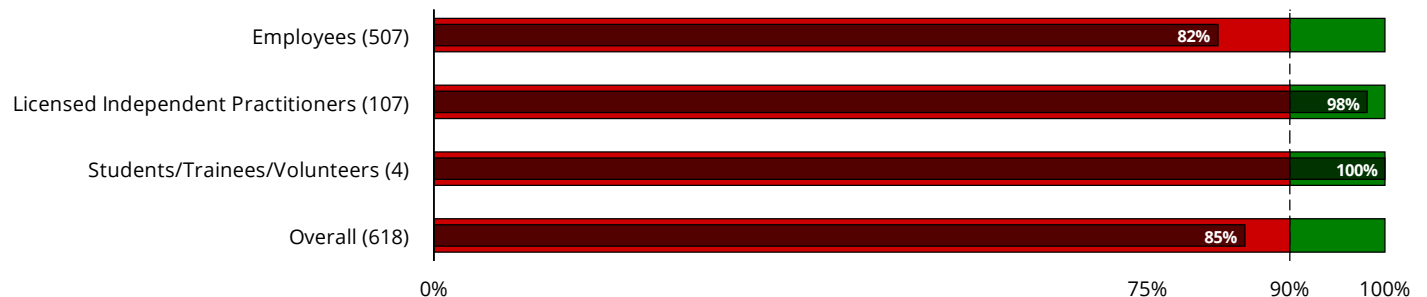
**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

**See page 3 for more detailed information about HAIs at Parkridge East Hospital**

### Healthcare Personnel Influenza Vaccination - '2018/2019' Influenza Season

#### Healthcare Personnel Category (Total)



#### Healthcare Personnel Vaccinated (%)

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric ICUs

YR	N	OBS	PRE	CLD	SIR
2018	1	0	0.3	408	N/A
2017	1	1	0.4	629	N/A
2016	1	1	0.4	533	N/A
2015	1	1	0.3	399	N/A

CLABSI - Neonatal ICUs

YR	N	OBS	PRE	CLI	SIR
2018	1	0	0.6	40	N/A
2017	1	1	0.3	17	N/A
2016	1	0	0.3	20	N/A
2015	1	1	0.3	25	N/A

CLABSI - Adult/Pediatric Wards

YR	N	OBS	PRE	CLD	SIR
2018	2	0	0.3	428	N/A
2017	2	0	0.3	582	N/A
2016	2	0	0.3	508	N/A
2015	2	0	0.3	545	N/A

N/A: Number of predicted infections <1; no SIR calculated

Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICUs

YR	N	OBS	PRE	UCD	SIR
2018	1	0	0.4	487	N/A
2017	1	1	0.7	944	N/A
2016	1	1	0.9	1283	N/A
2015	1	1	0.8	1210	N/A

CAUTI - Adult/Pediatric Wards

YR	N	OBS	PRE	UCD	SIR
2018	2	0	0.5	691	N/A
2017	2	2	0.5	895	N/A
2016	2	2	0.8	1374	N/A
2015	2	1	1.0	1539	1.0

N/A: Number of predicted infections <1; no SIR calculated

N/A: Number of predicted infections <1; no SIR calculated

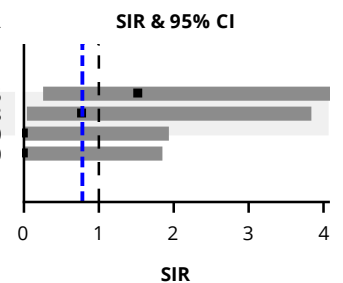
Surgical Site Infections (SSI)

SSI - Colon Surgery

YR	OBS	PRE	PROC	SIR
2018	N/A	N/A	N/A	N/A
2017	N/A	N/A	N/A	N/A
2016	N/A	N/A	N/A	N/A
2015	N/A	N/A	N/A	N/A

SSI - Abdominal Hysterectomy

YR	OBS	PRE	PROC	SIR
2018	2	1.3	257	1.5
2017	1	1.2	274	0.8
2016	0	1.5	346	0.0
2015	0	1.6	379	0.0



N/A: Number of predicted infections <1; no SIR calculated

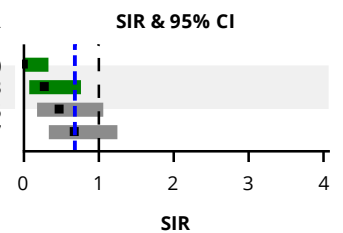
Healthcare Facility-Onset Laboratory Identified (LabID) Events

LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia

YR	OBS	PRE	PATD	SIR
2018	1	0.9	22531	N/A
2017	2	0.7	22719	N/A
2016	2	0.6	19556	N/A
2015	1	0.9	22398	N/A

LabID - *C. difficile* Infection (CDI)

YR	OBS	PRE	PATD	SIR
2018	0	9.1	15490	0.0
2017	3	10.7	16451	0.3
2016	5	10.4	16521	0.5
2015	9	13.2	20954	0.7



N/A: Number of predicted infections <1; no SIR calculated

Data reported as of August 27, 2019

YR = reporting year; N = number of units reporting (CLABSI/CAUTI); OBS = observed number of infections

PRE = statistically 'predicted' number of infections, based on NHSN national baseline data

SIR = standardized infection ratio (observed/predicted number of infections)

CLD = central line days; UCD = urinary catheter days; PROC = procedures performed; PATD = patient days;

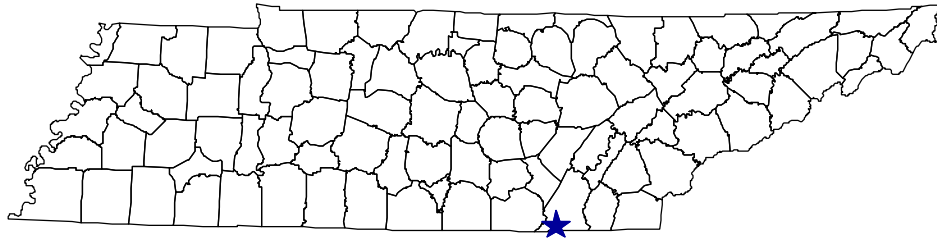
N/A = data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

- Significantly lower than NHSN SIR of 1
- Not significantly different from NHSN SIR of 1
- Significantly higher than NHSN SIR of 1
- - - 2018 TN SIR
- - - NHSN SIR=1

**Parkridge Medical Center, Chattanooga, Hamilton County**

Medical School Affiliation: Graduate teaching

Bed Size Category: 100-399 beds



**Healthcare-Associated Infections (HAI) Summary**

**Standardized Infection Ratio (SIR) by Infection Type, 01/01/2018-12/31/2018**

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		
		Observed	Predicted		SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	2	2.8	3226	0.71	( 0.12, 2.34 )	0.76
	Adult/Pediatric Ward	3	1.0	1390	2.86	( 0.73, 7.77 )	0.63
CAUTI	Adult/Pediatric ICU	3	3.5	3413	0.85	( 0.22, 2.31 )	0.70
	Adult/Pediatric Ward	2	1.4	1916	1.38	( 0.23, 4.57 )	0.73
SSI	Colon surgery	1	1.2	59	0.79	( 0.04, 3.92 )	0.79
	Abdominal hysterectomy	0	0.2	58	<b>N/A</b>	<b>N/A</b>	0.78
LabID	MRSA bacteremia	5	2.3	37586	2.14	( 0.79, 4.75 )	1.29
	C. difficile infection	13	22.3	37272	<b>0.58</b>	<b>( 0.32, 0.97 )</b>	0.68

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at Parkridge Medical Center*

**Healthcare Personnel Influenza Vaccination - '2018/2019' Influenza Season**

**Healthcare Personnel Category (Total)**



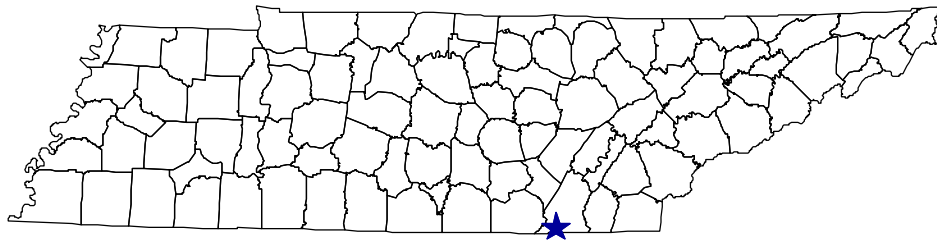
**Healthcare Personnel Vaccinated (%)**

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

## Parkridge Medical Center, Chattanooga, Hamilton County

Medical School Affiliation: None

Bed Size Category: 100-399 beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2017-12/31/2017

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		TN SIR
		Observed	Predicted		SIR*	95% CI	
CLABSI	Adult/Pediatric ICU	1	2.5	2943	0.39	( 0.02, 1.93 )	0.85
	Adult/Pediatric Ward	5	1.7	2288	<b>2.92</b>	<b>( 1.07, 6.46 )</b>	0.68
CAUTI	Adult/Pediatric ICU	11	3.7	3390	<b>2.90</b>	<b>( 1.53, 5.05 )</b>	0.71
	Adult/Pediatric Ward	4	2.2	2663	1.82	( 0.58, 4.39 )	0.72
SSI	Colon surgery	1	1.4	73	0.67	( 0.03, 3.30 )	0.83
	Abdominal hysterectomy	2	0.3	62	<b>N/A</b>	<b>N/A</b>	1.08
LabID	MRSA bacteremia	4	2.0	38811	1.92	( 0.61, 4.63 )	1.09
	C. difficile infection	23	26.7	38811	0.86	( 0.56, 1.27 )	0.83

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

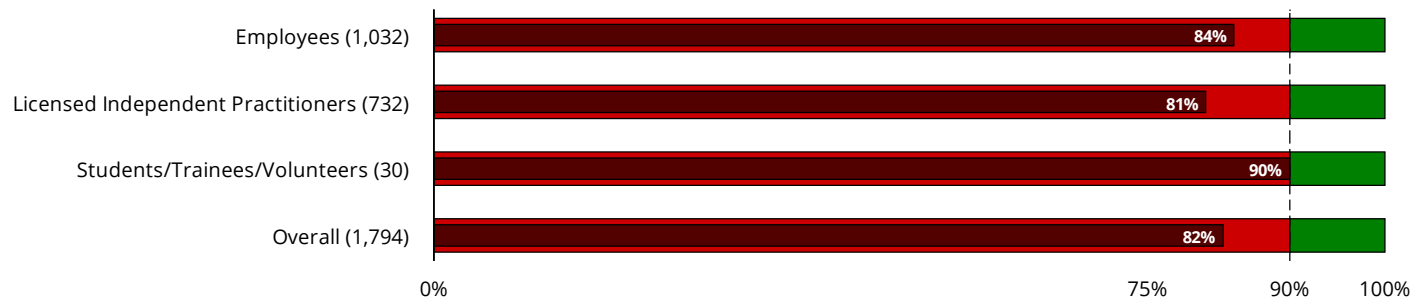
**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at Parkridge Medical Center*

### Healthcare Personnel Influenza Vaccination - '2017/2018' Influenza Season

#### Healthcare Personnel Category (Total)

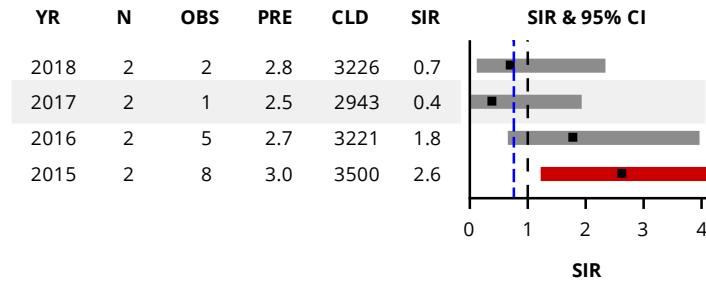


#### Healthcare Personnel Vaccinated (%)

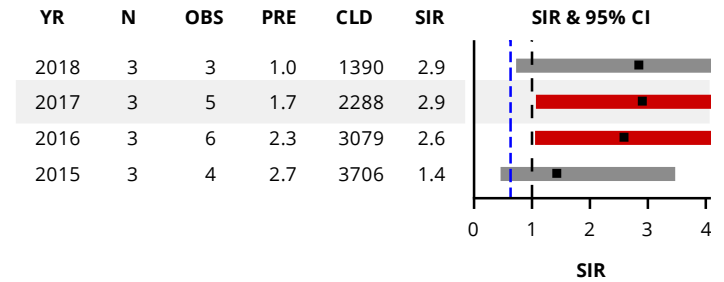
■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

### Central Line-Associated Bloodstream Infections (CLABSI)

#### CLABSI - Adult/Pediatric ICUs

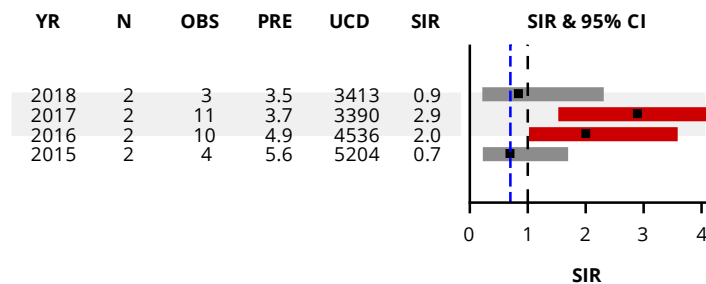


#### CLABSI - Adult/Pediatric Wards

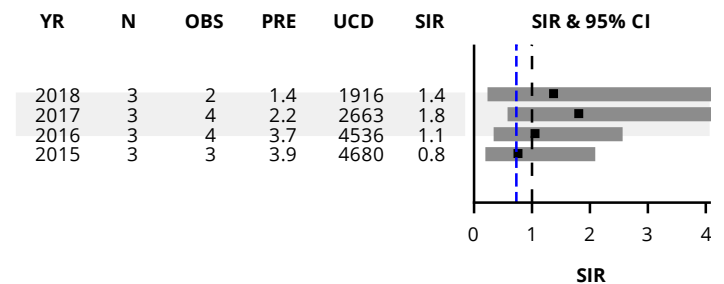


### Catheter-Associated Urinary Tract Infections (CAUTI)

#### CAUTI - Adult/Pediatric ICUs

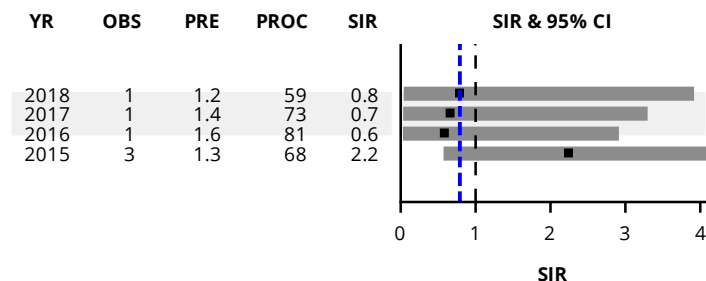


#### CAUTI - Adult/Pediatric Wards

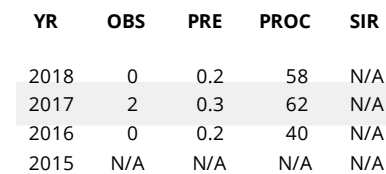


### Surgical Site Infections (SSI)

#### SSI - Colon Surgery



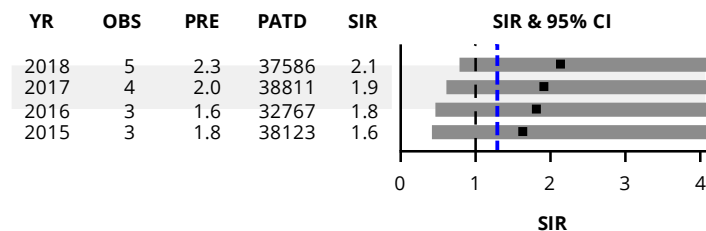
#### SSI - Abdominal Hysterectomy



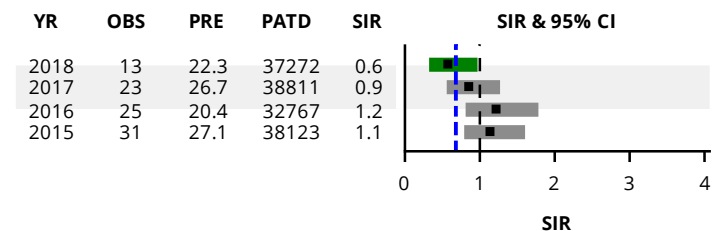
N/A: Number of predicted infections <1; no SIR calculated

### Healthcare Facility-Onset Laboratory Identified (LabID) Events

#### LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia



#### LabID - *C. difficile* Infection (CDI)



Data reported as of August 27, 2019

YR = reporting year; N = number of units reporting (CLABSI/CAUTI); OBS = observed number of infections

PRE = statistically 'predicted' number of infections, based on NHSN national baseline data

SIR = standardized infection ratio (observed/predicted number of infections)

CLD = central line days; UCD = urinary catheter days; PROC = procedures performed; PATD = patient days;

N/A = data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

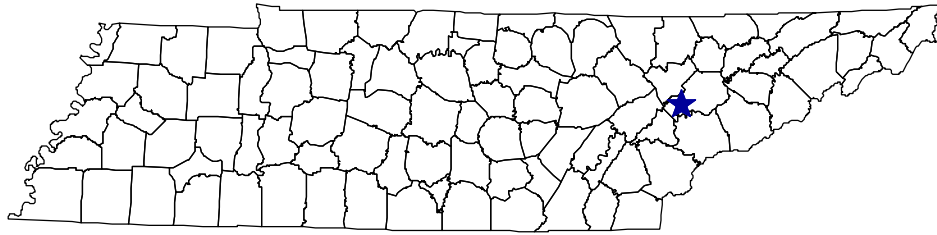
- Significantly lower than NHSN SIR of 1
- Not significantly different from NHSN SIR of 1
- Significantly higher than NHSN SIR of 1
- - - 2018 TN SIR
- - - NHSN SIR=1



## Parkwest Medical Center- Knoxville, Knoxville, Knox County

Medical School Affiliation: None

Bed Size Category: 100-399 beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2017-12/31/2017

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		
		Observed	Predicted		SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	7	4.0	4620	1.75	( 0.76, 3.45 )	0.85
	Adult/Pediatric Ward	8	4.9	6535	1.63	( 0.76, 3.10 )	0.68
CAUTI	Adult/Pediatric ICU	10	5.8	6513	1.71	( 0.87, 3.06 )	0.71
	Adult/Pediatric Ward	4	5.4	6549	0.74	( 0.24, 1.78 )	0.72
SSI	Colon surgery	3	3.9	192	0.77	( 0.20, 2.08 )	0.83
	Abdominal hysterectomy	1	1.8	342	0.53	( 0.03, 2.63 )	1.08
LabID	MRSA bacteremia	4	4.3	86934	0.92	( 0.29, 2.22 )	1.09
	C. difficile infection	19	57.2	84574	<b>0.33</b>	<b>( 0.21, 0.51 )</b>	0.83

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at Parkwest Medical Center- Knoxville*

### Healthcare Personnel Influenza Vaccination - '2017/2018' Influenza Season

#### Healthcare Personnel Category (Total)



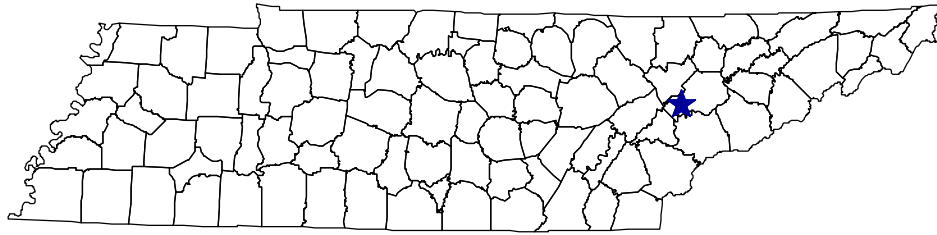
#### Healthcare Personnel Vaccinated (%)

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

## Parkwest Medical Center- Knoxville, Knoxville, Knox County

Medical School Affiliation: None

Bed Size Category: 100-399 beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2018-12/31/2018

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		TN SIR
		Observed	Predicted		SIR*	95% CI	
CLABSI	Adult/Pediatric ICU	2	3.6	4241	0.54	( 0.09, 1.80 )	0.76
	Adult/Pediatric Ward	6	5.1	6898	1.16	( 0.47, 2.41 )	0.63
CAUTI	Adult/Pediatric ICU	2	4.5	5053	0.44	( 0.07, 1.46 )	0.70
	Adult/Pediatric Ward	3	4.3	5212	0.70	( 0.18, 1.89 )	0.73
SSI	Colon surgery	0	4.1	194	<b>0.00</b>	<b>( 0.00, 0.73 )</b>	0.79
	Abdominal hysterectomy	1	1.7	333	0.56	( 0.03, 2.76 )	0.78
LabID	MRSA bacteremia	6	4.5	86924	1.31	( 0.53, 2.72 )	1.29
	C. difficile infection	14	53.8	84852	<b>0.26</b>	<b>( 0.15, 0.43 )</b>	0.68

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at Parkwest Medical Center- Knoxville*

### Healthcare Personnel Influenza Vaccination - '2018/2019' Influenza Season

#### Healthcare Personnel Category (Total)

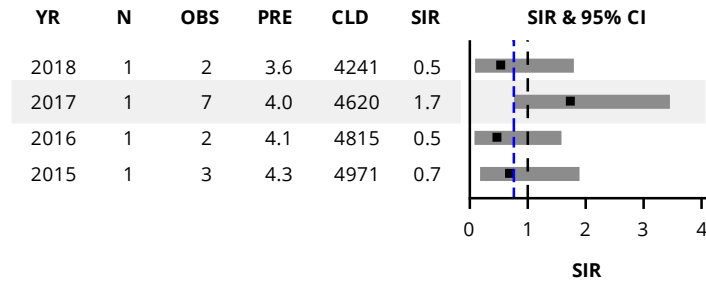


#### Healthcare Personnel Vaccinated (%)

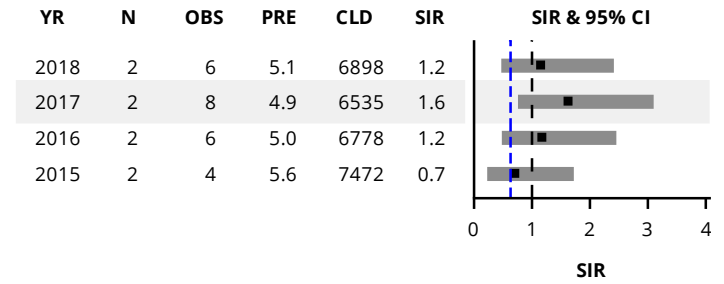
■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

### Central Line-Associated Bloodstream Infections (CLABSI)

#### CLABSI - Adult/Pediatric ICUs

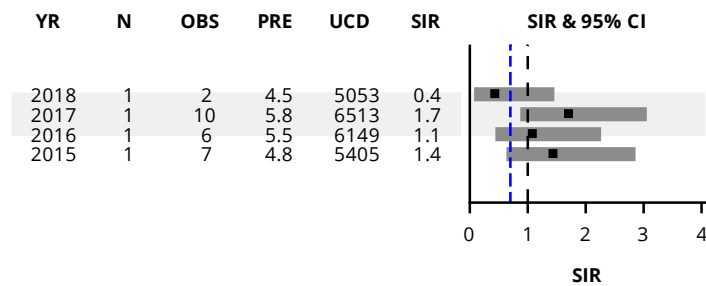


#### CLABSI - Adult/Pediatric Wards

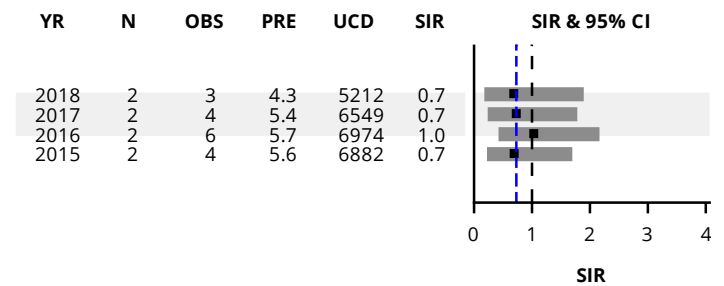


### Catheter-Associated Urinary Tract Infections (CAUTI)

#### CAUTI - Adult/Pediatric ICUs

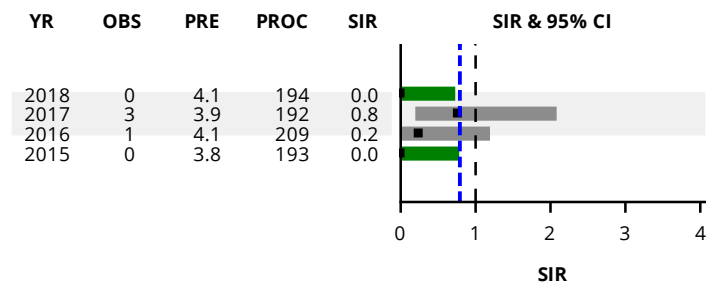


#### CAUTI - Adult/Pediatric Wards

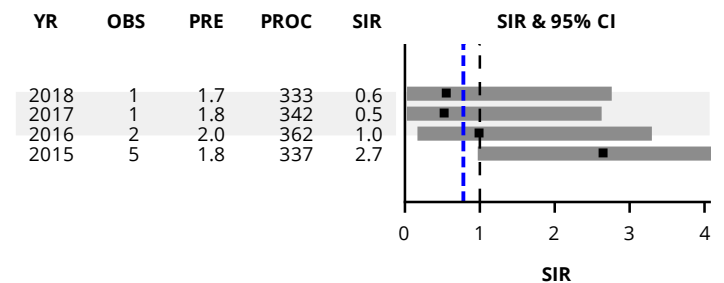


### Surgical Site Infections (SSI)

#### SSI - Colon Surgery

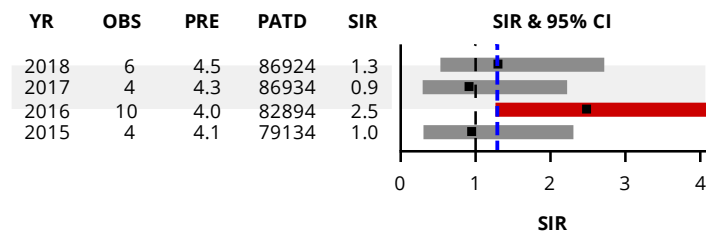


#### SSI - Abdominal Hysterectomy

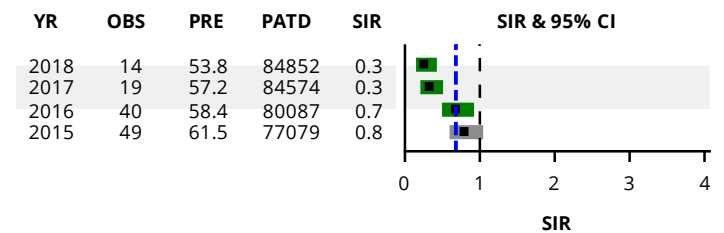


### Healthcare Facility-Onset Laboratory Identified (LabID) Events

#### LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia



#### LabID - *C. difficile* Infection (CDI)



Data reported as of August 27, 2019

YR = reporting year; N = number of units reporting (CLABSI/CAUTI); OBS = observed number of infections

PRE = statistically 'predicted' number of infections, based on NHSN national baseline data

SIR = standardized infection ratio (observed/predicted number of infections)

CLD = central line days; UCD = urinary catheter days; PROC = procedures performed; PATD = patient days;

N/A = data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

■ Significantly lower than NHSN SIR of 1

■ Not significantly different from NHSN SIR of 1

■ Significantly higher than NHSN SIR of 1

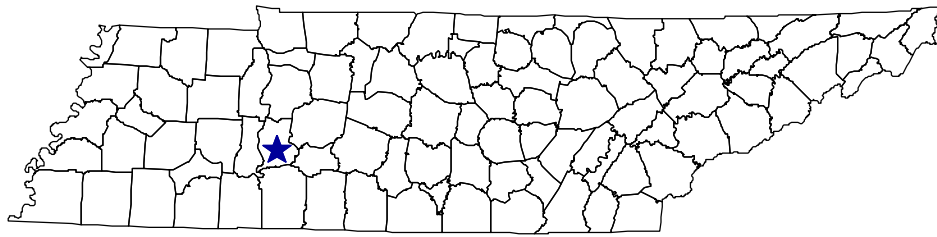
--- 2018 TN SIR

--- NHSN SIR=1

## Perry Community Hospital, Linden, Perry County

Medical School Affiliation: None

Bed Size Category: <50 beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2017-12/31/2017

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		
		Observed	Predicted		SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric Ward	N/A	N/A	N/A	N/A	N/A	0.68
CAUTI	Adult/Pediatric Ward	0	0.3	559	N/A	N/A	0.72
LabID	MRSA bacteremia	0	0.0	1585	N/A	N/A	1.09
	C. difficile infection	0	0.2	1585	N/A	N/A	0.83

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

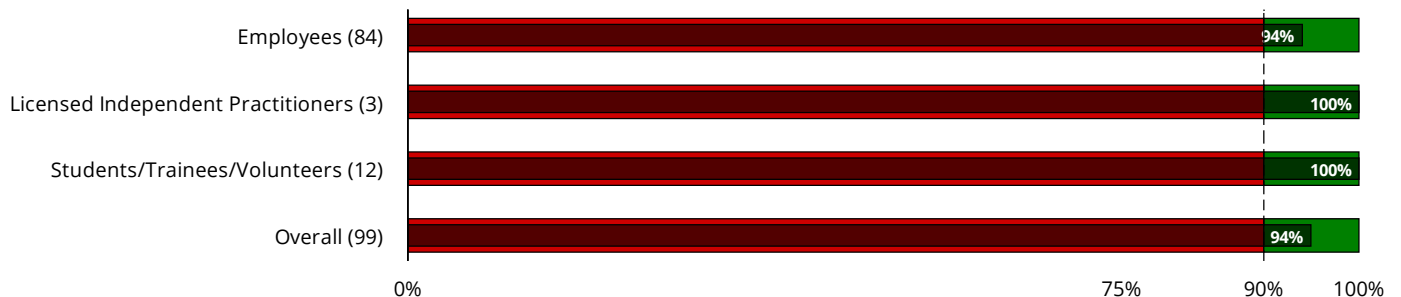
**N/A**: Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at Perry Community Hospital*

### Healthcare Personnel Influenza Vaccination - '2017/2018' Influenza Season

#### Healthcare Personnel Category (Total)



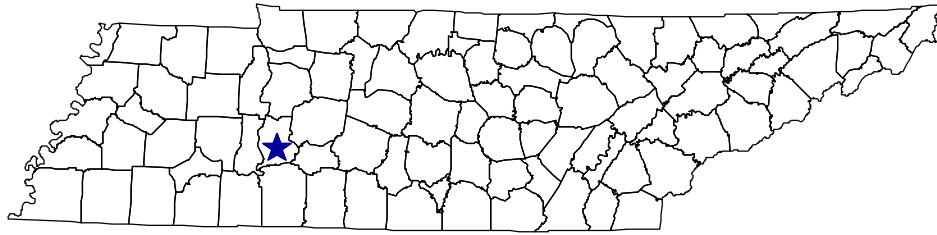
#### Healthcare Personnel Vaccinated (%)

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

**Perry Community Hospital, Linden, Perry County**

Medical School Affiliation: None

Bed Size Category: <50 beds



**Healthcare-Associated Infections (HAI) Summary**

**Standardized Infection Ratio (SIR) by Infection Type, 01/01/2018-12/31/2018**

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		
		Observed	Predicted		SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric Ward	N/A	N/A	N/A	N/A	N/A	0.63
CAUTI	Adult/Pediatric Ward	0	0.2	371	N/A	N/A	0.73
LabID	MRSA bacteremia	0	0.0	1430	N/A	N/A	1.29
	C. difficile infection	0	0.2	1430	N/A	N/A	0.68

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at Perry Community Hospital*

**Healthcare Personnel Influenza Vaccination - '2018/2019' Influenza Season**

**Healthcare Personnel Category (Total)**



**Healthcare Personnel Vaccinated (%)**

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric Wards

YR	N	OBS	PRE	CLD	SIR
2018	1	N/A	N/A	N/A	N/A
2017	1	N/A	N/A	N/A	N/A
2016	1	N/A	N/A	N/A	N/A
2015	1	0	0.0	76	N/A

N/A: Number of predicted infections <1; no SIR calculated

Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric Wards

YR	N	OBS	PRE	UCD	SIR
2018	1	0	0.2	371	N/A
2017	1	0	0.3	559	N/A
2016	1	0	0.4	895	N/A
2015	1	0	0.5	939	N/A

N/A: Number of predicted infections <1; no SIR calculated

Healthcare Facility-Onset Laboratory Identified (LabID) Events

LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia

YR	OBS	PRE	PATD	SIR
2018	0	0.0	1430	N/A
2017	0	0.0	1585	N/A
2016	0	0.0	1844	N/A
2015	1	0.0	2149	N/A

N/A: Number of predicted infections <1; no SIR calculated

LabID - *C. difficile* Infection (CDI)

YR	OBS	PRE	PATD	SIR
2018	0	0.2	1430	N/A
2017	0	0.2	1585	N/A
2016	1	0.3	1844	N/A
2015	2	0.7	2149	N/A

N/A: Number of predicted infections <1; no SIR calculated

Data reported as of August 27, 2019

YR = reporting year; N = number of units reporting (CLABSI/CAUTI); OBS = observed number of infections

PRE = statistically 'predicted' number of infections, based on NHSN national baseline data

SIR = standardized infection ratio (observed/predicted number of infections)

CLD = central line days; UCD = urinary catheter days; PROC = procedures performed; PATD = patient days;

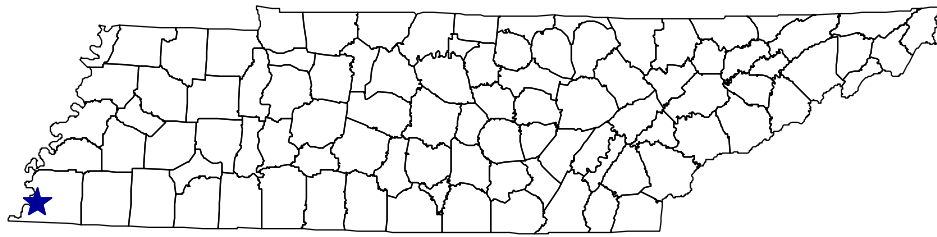
N/A = data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

- Significantly lower than NHSN SIR of 1
- Not significantly different from NHSN SIR of 1
- Significantly higher than NHSN SIR of 1
- 2018 TN SIR
- NHSN SIR=1

## Regional One Health (Reg. Med.Ctr Memphis), Memphis, Shelby County

Medical School Affiliation: Major teaching

Bed Size Category: 100-399 beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2017-12/31/2017

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		TN SIR
		Observed	Predicted		SIR*	95% CI	
CLABSI	Adult/Pediatric ICU	4	3.3	2979	1.19	( 0.38, 2.87 )	0.85
	Neonatal ICU	1	3.8	2170	0.26	( 0.01, 1.29 )	0.75
	Adult/Pediatric Ward	4	3.3	3463	1.19	( 0.38, 2.86 )	0.68
CAUTI	Adult/Pediatric ICU	26	26.8	11130	0.97	( 0.65, 1.40 )	0.71
	Adult/Pediatric Ward	4	2.0	1753	1.96	( 0.62, 4.73 )	0.72
SSI	Colon surgery	16	9.6	242	1.65	( 0.98, 2.63 )	0.83
	Abdominal hysterectomy	0	0.3	29	N/A	N/A	1.08
LabID	MRSA bacteremia	26	7.4	88016	<b>3.49</b>	<b>( 2.33, 5.05 )</b>	1.09
	C. difficile infection	49	44.4	70478	1.10	( 0.82, 1.44 )	0.83

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

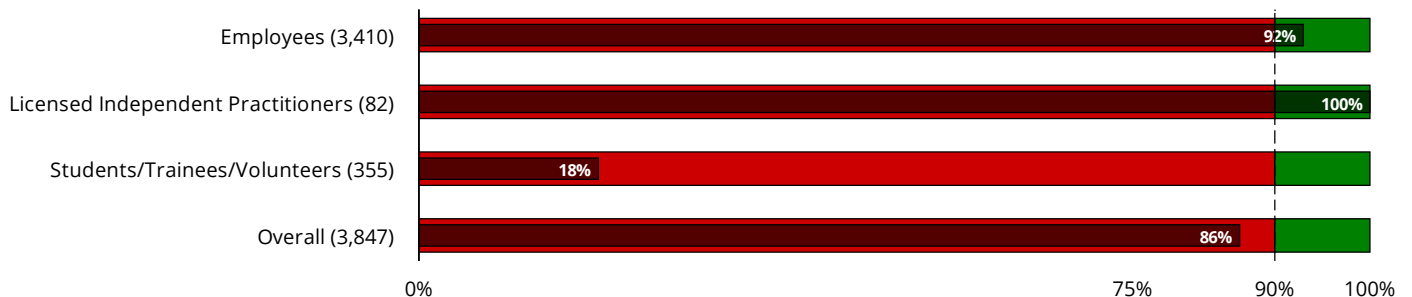
**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

See page 3 for more detailed information about HAIs at Regional One Health (Reg. Med.Ctr Memphis)

### Healthcare Personnel Influenza Vaccination - '2017/2018' Influenza Season

#### Healthcare Personnel Category (Total)



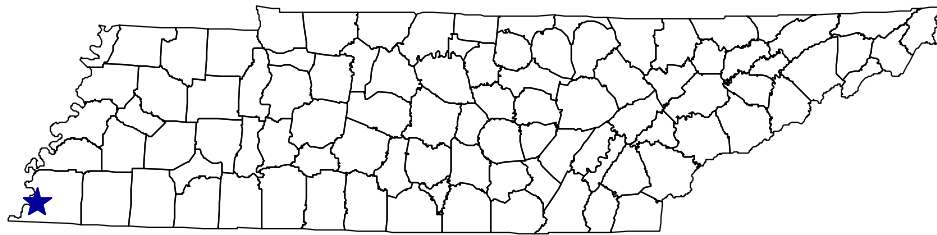
#### Healthcare Personnel Vaccinated (%)

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

## Regional One Health (Reg. Med.Ctr Memphis), Memphis, Shelby County

Medical School Affiliation: Major teaching

Bed Size Category: 100-399 beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2018-12/31/2018

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		
		Observed	Predicted		SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	7	3.7	3326	1.87	( 0.82, 3.69 )	0.76
	Neonatal ICU	5	4.3	2448	1.15	( 0.42, 2.54 )	0.79
	Adult/Pediatric Ward	5	3.3	3426	1.50	( 0.55, 3.32 )	0.63
CAUTI	Adult/Pediatric ICU	35	27.4	11366	1.27	( 0.90, 1.75 )	0.70
	Adult/Pediatric Ward	6	2.4	2139	2.41	( 0.98, 5.01 )	0.73
SSI	Colon surgery	10	18.5	468	<b>0.54</b>	<b>( 0.27, 0.96 )</b>	0.79
	Abdominal hysterectomy	1	0.7	62	<b>N/A</b>	<b>N/A</b>	0.78
LabID	MRSA bacteremia	36	7.2	86148	<b>4.93</b>	<b>( 3.51, 6.76 )</b>	1.29
	C. difficile infection	36	43.7	65948	0.82	( 0.59, 1.13 )	0.68

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

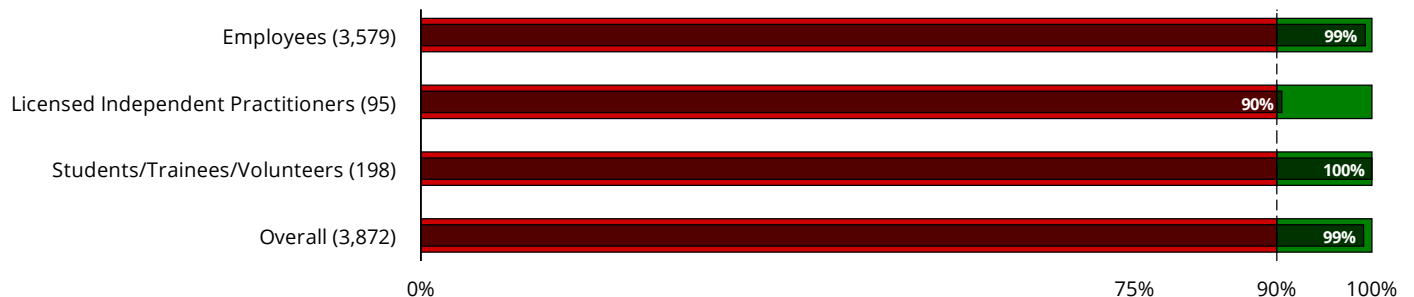
**N/A**: Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at Regional One Health (Reg. Med.Ctr Memphis)*

### Healthcare Personnel Influenza Vaccination - '2018/2019' Influenza Season

#### Healthcare Personnel Category (Total)



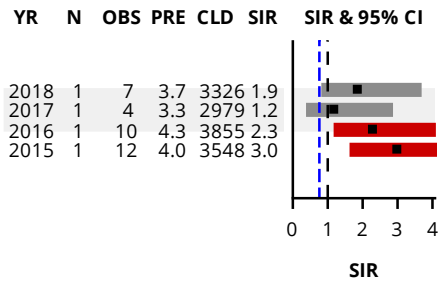
#### Healthcare Personnel Vaccinated (%)

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

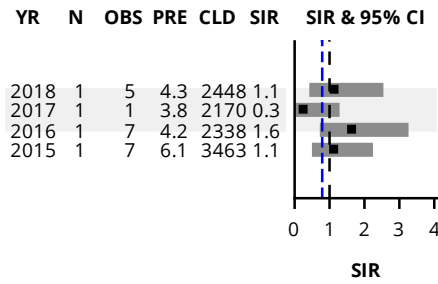


### Central Line-Associated Bloodstream Infections (CLABSI)

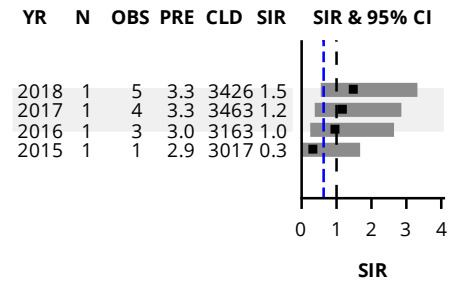
#### CLABSI - Adult/Pediatric ICUs



#### CLABSI - Neonatal ICUs

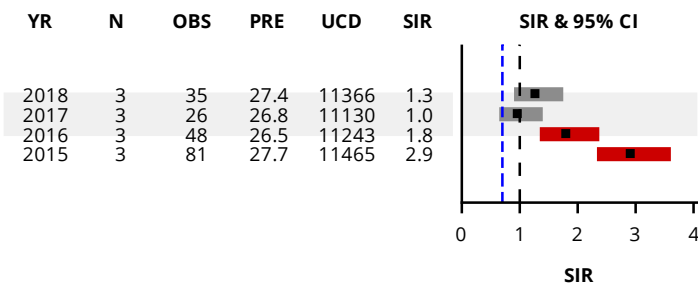


#### CLABSI - Adult/Pediatric Wards

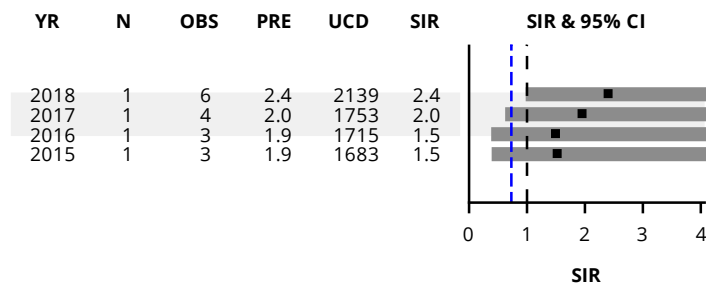


### Catheter-Associated Urinary Tract Infections (CAUTI)

#### CAUTI - Adult/Pediatric ICUs

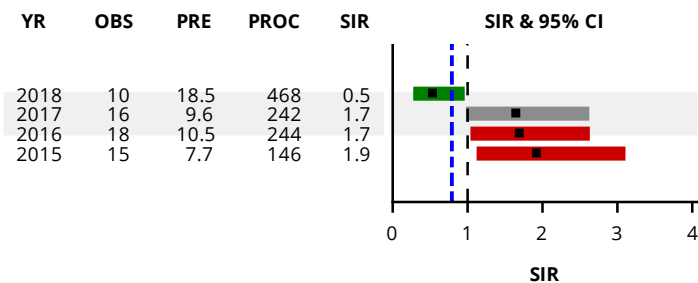


#### CAUTI - Adult/Pediatric Wards

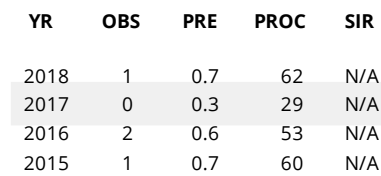


### Surgical Site Infections (SSI)

#### SSI - Colon Surgery



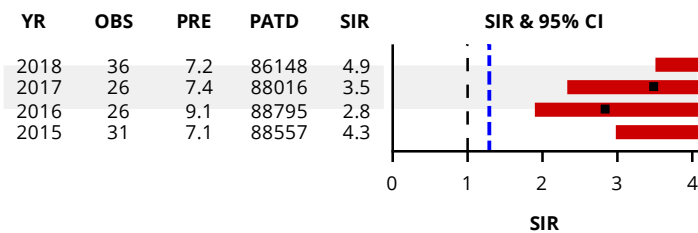
#### SSI - Abdominal Hysterectomy



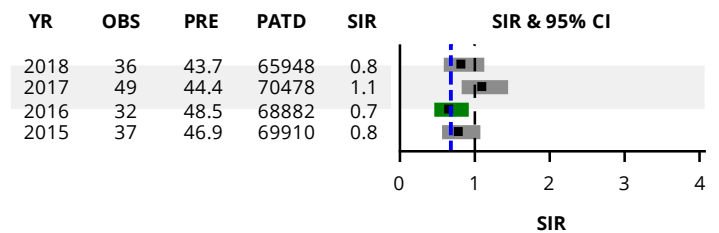
N/A: Number of predicted infections <1; no SIR calculated

### Healthcare Facility-Onset Laboratory Identified (LabID) Events

#### LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia



#### LabID - *C. difficile* Infection (CDI)



Data reported as of August 27, 2019

YR = reporting year; N = number of units reporting (CLABSI/CAUTI); OBS = observed number of infections

PRE = statistically 'predicted' number of infections, based on NHSN national baseline data

SIR = standardized infection ratio (observed/predicted number of infections)

CLD = central line days; UCD = urinary catheter days; PROC = procedures performed; PATD = patient days;

N/A = data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

■ Significantly lower than NHSN SIR of 1

■ Not significantly different from NHSN SIR of 1

■ Significantly higher than NHSN SIR of 1

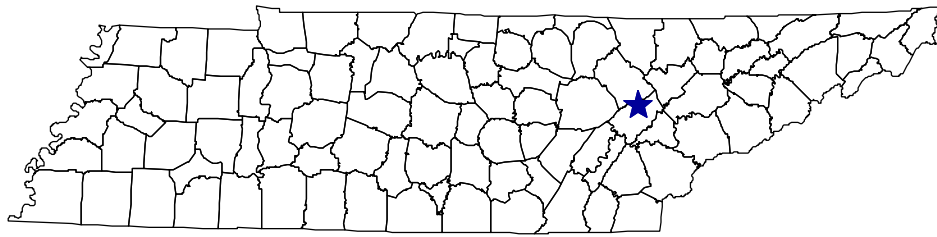
--- 2018 TN SIR

--- NHSN SIR=1

## Roane Medical Center, Harriman, Roane County

Medical School Affiliation: None

Bed Size Category: 50-99 beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2017-12/31/2017

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		
		Observed	Predicted		SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	0	0.5	783	N/A	N/A	0.85
	Adult/Pediatric Ward	0	0.5	1021	N/A	N/A	0.68
CAUTI	Adult/Pediatric ICU	0	0.4	810	N/A	N/A	0.71
	Adult/Pediatric Ward	0	0.3	662	N/A	N/A	0.72
SSI	Colon surgery	0	0.7	37	N/A	N/A	0.83
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	1.08
LabID	MRSA bacteremia	0	0.3	9338	N/A	N/A	1.09
	C. difficile infection	2	5.2	9338	0.38	( 0.06, 1.26 )	0.83

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

**See page 3 for more detailed information about HAIs at Roane Medical Center**

### Healthcare Personnel Influenza Vaccination - '2017/2018' Influenza Season

#### Healthcare Personnel Category (Total)



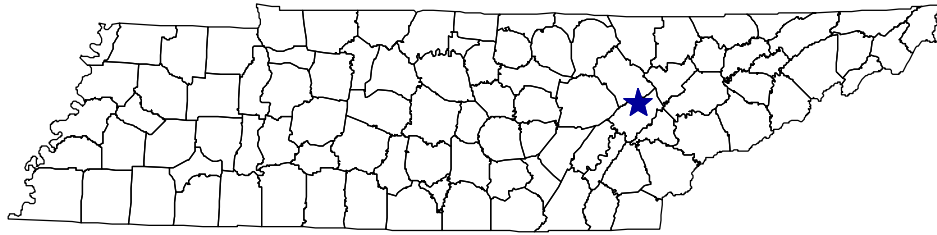
#### Healthcare Personnel Vaccinated (%)

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

## Roane Medical Center, Harriman, Roane County

Medical School Affiliation: None

Bed Size Category: 50-99 beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2018-12/31/2018

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		
		Observed	Predicted		SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	0	0.3	529	N/A	N/A	0.76
	Adult/Pediatric Ward	0	0.4	848	N/A	N/A	0.63
CAUTI	Adult/Pediatric ICU	0	0.4	842	N/A	N/A	0.70
	Adult/Pediatric Ward	0	0.4	863	N/A	N/A	0.73
SSI	Colon surgery	2	0.7	48	N/A	N/A	0.79
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	0.78
LabID	MRSA bacteremia	0	0.3	11569	N/A	N/A	1.29
	C. difficile infection	0	5.2	11569	0.00	(0.00, 0.57)	0.68

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at Roane Medical Center*

### Healthcare Personnel Influenza Vaccination - '2018/2019' Influenza Season

#### Healthcare Personnel Category (Total)



#### Healthcare Personnel Vaccinated (%)

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric ICUs

YR	N	OBS	PRE	CLD	SIR
2018	1	0	0.3	529	N/A
2017	1	0	0.5	783	N/A
2016	1	0	0.4	696	N/A
2015	1	0	0.3	485	N/A

N/A: Number of predicted infections <1; no SIR calculated

CLABSI - Adult/Pediatric Wards

YR	N	OBS	PRE	CLD	SIR
2018	1	0	0.4	848	N/A
2017	1	0	0.5	1021	N/A
2016	1	0	0.5	991	N/A
2015	1	1	0.5	941	N/A

N/A: Number of predicted infections <1; no SIR calculated

Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICUs

YR	N	OBS	PRE	UCD	SIR
2018	1	0	0.4	842	N/A
2017	1	0	0.4	810	N/A
2016	1	0	0.4	809	N/A
2015	1	0	0.3	660	N/A

N/A: Number of predicted infections <1; no SIR calculated

CAUTI - Adult/Pediatric Wards

YR	N	OBS	PRE	UCD	SIR
2018	1	0	0.4	863	N/A
2017	1	0	0.3	662	N/A
2016	1	0	0.3	810	N/A
2015	1	0	0.3	812	N/A

N/A: Number of predicted infections <1; no SIR calculated

Surgical Site Infections (SSI)

SSI - Colon Surgery

YR	OBS	PRE	PROC	SIR
2018	2	0.7	48	N/A
2017	0	0.7	37	N/A
2016	0	0.6	39	N/A
2015	0	0.7	37	N/A

N/A: Number of predicted infections <1; no SIR calculated

SSI - Abdominal Hysterectomy

YR	OBS	PRE	PROC	SIR
2018	N/A	N/A	N/A	N/A
2017	N/A	N/A	N/A	N/A
2016	N/A	N/A	N/A	N/A
2015	N/A	N/A	N/A	N/A

N/A: Number of predicted infections <1; no SIR calculated

Healthcare Facility-Onset Laboratory Identified (LabID) Events

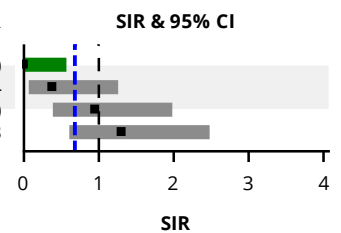
LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia

YR	OBS	PRE	PATD	SIR
2018	0	0.3	11569	N/A
2017	0	0.3	9338	N/A
2016	0	0.2	9283	N/A
2015	1	0.2	10177	N/A

N/A: Number of predicted infections <1; no SIR calculated

LabID - *C. difficile* Infection (CDI)

YR	OBS	PRE	PATD	SIR
2018	0	5.2	11569	0.0
2017	2	5.2	9338	0.4
2016	6	6.2	9283	1.0
2015	8	6.1	10177	1.3



Data reported as of August 27, 2019

YR = reporting year; N = number of units reporting (CLABSI/CAUTI); OBS = observed number of infections

PRE = statistically 'predicted' number of infections, based on NHSN national baseline data

SIR = standardized infection ratio (observed/predicted number of infections)

CLD = central line days; UCD = urinary catheter days; PROC = procedures performed; PATD = patient days;

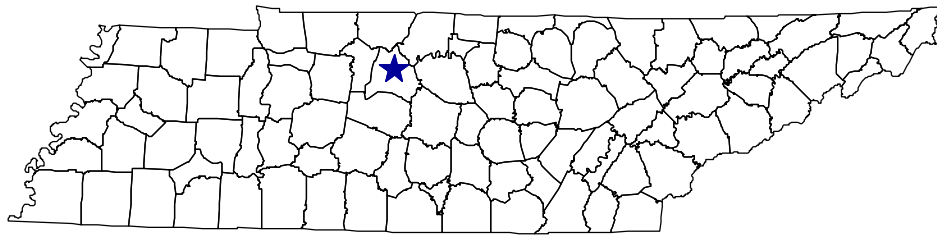
N/A = data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

- Significantly lower than NHSN SIR of 1
- Not significantly different from NHSN SIR of 1
- Significantly higher than NHSN SIR of 1
- - - 2018 TN SIR
- - - NHSN SIR=1

## Skyline Medical Center, Nashville, Davidson County

Medical School Affiliation: Undergraduate teaching

Bed Size Category: 100-399 beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2017-12/31/2017

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		TN SIR
		Observed	Predicted		SIR*	95% CI	
CLABSI	Adult/Pediatric ICU	3	3.9	4551	0.76	( 0.19, 2.07 )	0.85
	Adult/Pediatric Ward	1	2.9	3948	0.34	( 0.02, 1.67 )	0.68
CAUTI	Adult/Pediatric ICU	14	8.3	5647	1.67	( 0.95, 2.74 )	0.71
	Adult/Pediatric Ward	1	1.5	1906	0.63	( 0.03, 3.11 )	0.72
SSI	Colon surgery	3	2.0	101	1.50	( 0.38, 4.08 )	0.83
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	1.08
LabID	MRSA bacteremia	4	4.4	62038	0.90	( 0.28, 2.16 )	1.09
	C. difficile infection	31	48.2	62038	0.64	( 0.44, 0.90 )	0.83

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at Skyline Medical Center*

### Healthcare Personnel Influenza Vaccination - '2017/2018' Influenza Season

#### Healthcare Personnel Category (Total)



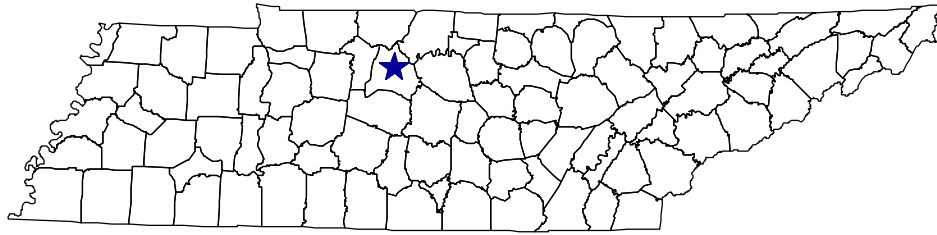
#### Healthcare Personnel Vaccinated (%)

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

## Skyline Medical Center, Nashville, Davidson County

Medical School Affiliation: Undergraduate teaching

Bed Size Category: 100-399 beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2018-12/31/2018

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		
		Observed	Predicted		SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	3	3.7	4326	0.80	( 0.20, 2.18 )	0.76
	Adult/Pediatric Ward	0	2.6	3489	0.00	( 0.00, 1.15 )	0.63
CAUTI	Adult/Pediatric ICU	9	6.1	3990	1.47	( 0.72, 2.70 )	0.70
	Adult/Pediatric Ward	1	1.6	2014	0.60	( 0.03, 2.95 )	0.73
SSI	Colon surgery	6	1.8	95	<b>3.18</b>	<b>( 1.29, 6.61 )</b>	0.79
	Abdominal hysterectomy	N/A	N/A	N/A	<b>N/A</b>	<b>N/A</b>	0.78
LabID	MRSA bacteremia	5	5.7	61097	0.87	( 0.32, 1.92 )	1.29
	C. difficile infection	19	34.4	61097	<b>0.55</b>	<b>( 0.34, 0.85 )</b>	0.68

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

**N/A**: Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at Skyline Medical Center*

### Healthcare Personnel Influenza Vaccination - '2018/2019' Influenza Season

#### Healthcare Personnel Category (Total)

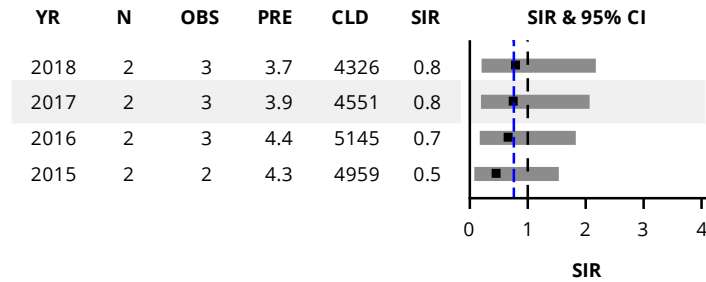


#### Healthcare Personnel Vaccinated (%)

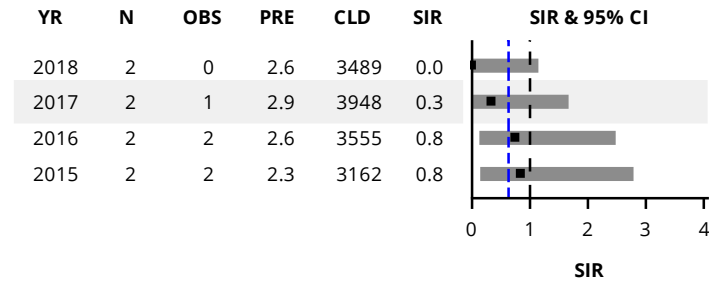
■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

### Central Line-Associated Bloodstream Infections (CLABSI)

#### CLABSI - Adult/Pediatric ICUs

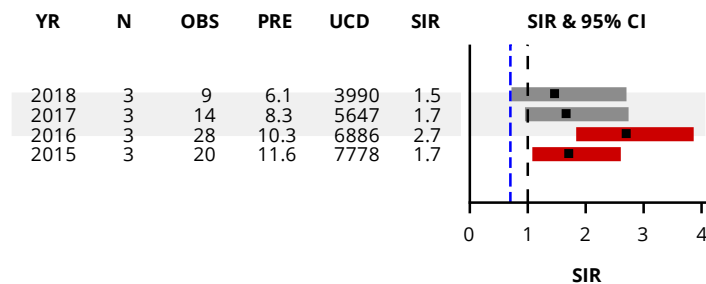


#### CLABSI - Adult/Pediatric Wards

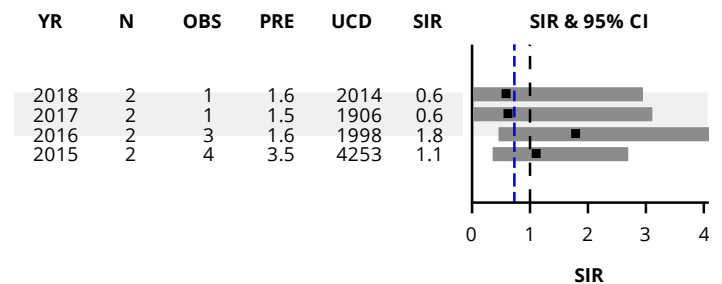


### Catheter-Associated Urinary Tract Infections (CAUTI)

#### CAUTI - Adult/Pediatric ICUs

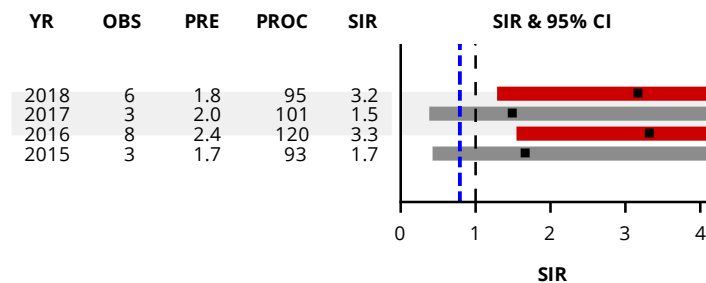


#### CAUTI - Adult/Pediatric Wards



### Surgical Site Infections (SSI)

#### SSI - Colon Surgery



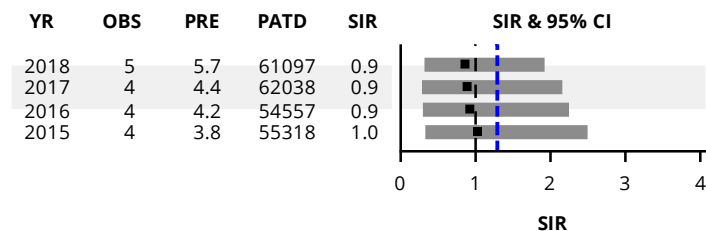
#### SSI - Abdominal Hysterectomy

YR	OBS	PRE	PROC	SIR
2018	N/A	N/A	N/A	N/A
2017	N/A	N/A	N/A	N/A
2016	N/A	N/A	N/A	N/A
2015	N/A	N/A	N/A	N/A

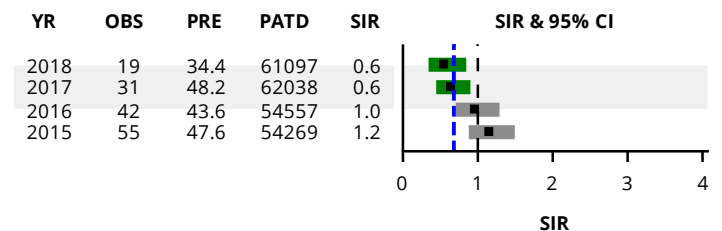
N/A: Number of predicted infections <1; no SIR calculated

### Healthcare Facility-Onset Laboratory Identified (LabID) Events

#### LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia



#### LabID - *C. difficile* Infection (CDI)



Data reported as of August 27, 2019

YR = reporting year; N = number of units reporting (CLABSI/CAUTI); OBS = observed number of infections

PRE = statistically 'predicted' number of infections, based on NHSN national baseline data

SIR = standardized infection ratio (observed/predicted number of infections)

CLD = central line days; UCD = urinary catheter days; PROC = procedures performed; PATD = patient days;

N/A = data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

■ Significantly lower than NHSN SIR of 1

■ Not significantly different from NHSN SIR of 1

■ Significantly higher than NHSN SIR of 1

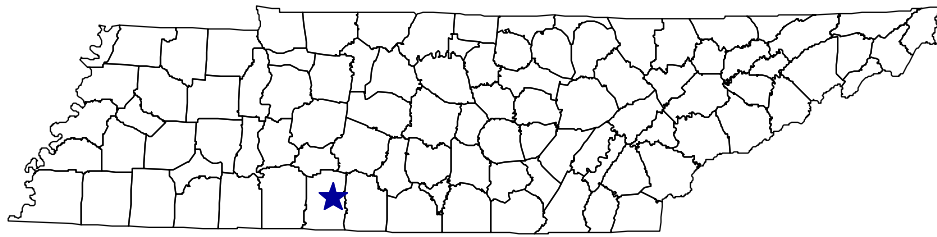
--- 2018 TN SIR

--- NHSN SIR=1

**Southern TN Reg. Health System - Lawrenceburg (Crockett Hosp), Lawrenceburg, Lawrence County**

Medical School Affiliation: None

Bed Size Category: 50-99 beds



**Healthcare-Associated Infections (HAI) Summary**

**Standardized Infection Ratio (SIR) by Infection Type, 01/01/2017-12/31/2017**

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		
		Observed	Predicted		SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	1	0.1	212	N/A	N/A	0.85
	Adult/Pediatric Ward	0	0.2	509	N/A	N/A	0.68
CAUTI	Adult/Pediatric ICU	0	0.5	744	N/A	N/A	0.71
	Adult/Pediatric Ward	1	0.5	817	N/A	N/A	0.72
SSI	Colon surgery	N/A	N/A	N/A	N/A	N/A	0.83
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	1.08
LabID	MRSA bacteremia	0	0.2	8363	N/A	N/A	1.09
	C. difficile infection	4	5.4	8363	0.74	( 0.24, 1.79 )	0.83

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

**See page 3 for more detailed information about HAIs at Southern TN Reg. Health System - Lawrenceburg (Crockett Hosp)**

**Healthcare Personnel Influenza Vaccination - '2017/2018' Influenza Season**

**Healthcare Personnel Category (Total)**



**Healthcare Personnel Vaccinated (%)**

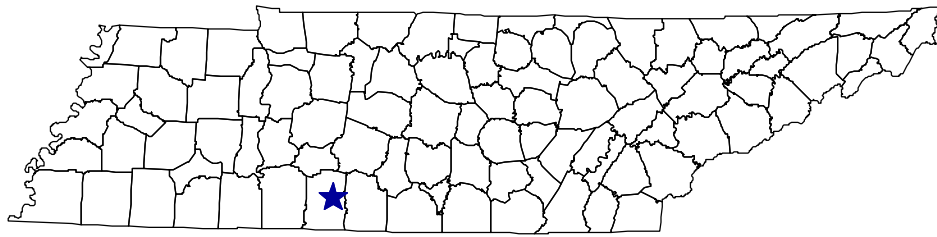
■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)



**Southern TN Reg. Health System - Lawrenceburg (Crockett Hosp), Lawrenceburg, Lawrence County**

Medical School Affiliation: Undergraduate teaching

Bed Size Category: 50-99 beds



**Healthcare-Associated Infections (HAI) Summary**

**Standardized Infection Ratio (SIR) by Infection Type, 01/01/2018-12/31/2018**

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		
		Observed	Predicted		SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	0	0.1	171	N/A	N/A	0.76
	Adult/Pediatric Ward	0	0.2	451	N/A	N/A	0.63
CAUTI	Adult/Pediatric ICU	0	0.4	654	N/A	N/A	0.70
	Adult/Pediatric Ward	0	0.4	722	N/A	N/A	0.73
SSI	Colon surgery	N/A	N/A	N/A	N/A	N/A	0.79
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	0.78
LabID	MRSA bacteremia	0	0.1	7306	N/A	N/A	1.29
	C. difficile infection	3	6.2	7306	0.48	( 0.12, 1.30 )	0.68

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

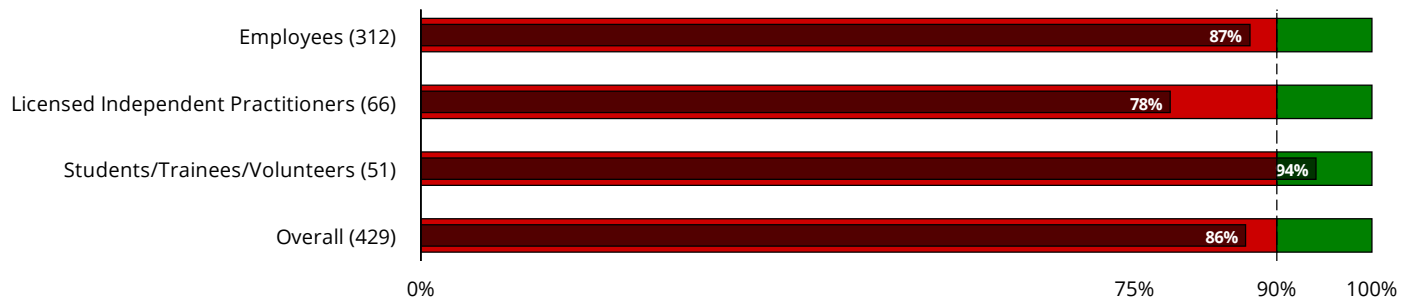
**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

**See page 3 for more detailed information about HAIs at Southern TN Reg. Health System - Lawrenceburg (Crockett Hosp)**

**Healthcare Personnel Influenza Vaccination - '2018/2019' Influenza Season**

**Healthcare Personnel Category (Total)**



**Healthcare Personnel Vaccinated (%)**

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric ICUs

YR	N	OBS	PRE	CLD	SIR
2018	1	0	0.1	171	N/A
2017	1	1	0.1	212	N/A
2016	1	0	0.1	271	N/A
2015	1	0	0.1	186	N/A

N/A: Number of predicted infections <1; no SIR calculated

CLABSI - Adult/Pediatric Wards

YR	N	OBS	PRE	CLD	SIR
2018	1	0	0.2	451	N/A
2017	1	0	0.2	509	N/A
2016	1	0	0.3	527	N/A
2015	1	0	0.2	480	N/A

N/A: Number of predicted infections <1; no SIR calculated

Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICUs

YR	N	OBS	PRE	UCD	SIR
2018	1	0	0.4	654	N/A
2017	1	0	0.5	744	N/A
2016	1	0	0.3	664	N/A
2015	1	0	0.3	575	N/A

N/A: Number of predicted infections <1; no SIR calculated

CAUTI - Adult/Pediatric Wards

YR	N	OBS	PRE	UCD	SIR
2018	1	0	0.4	722	N/A
2017	1	1	0.5	817	N/A
2016	1	0	0.3	740	N/A
2015	1	0	0.3	794	N/A

N/A: Number of predicted infections <1; no SIR calculated

Surgical Site Infections (SSI)

SSI - Colon Surgery

YR	OBS	PRE	PROC	SIR
2018	N/A	N/A	N/A	N/A
2017	N/A	N/A	N/A	N/A
2016	N/A	N/A	N/A	N/A
2015	N/A	N/A	N/A	N/A

N/A: Number of predicted infections <1; no SIR calculated

SSI - Abdominal Hysterectomy

YR	OBS	PRE	PROC	SIR
2018	N/A	N/A	N/A	N/A
2017	N/A	N/A	N/A	N/A
2016	N/A	N/A	N/A	N/A
2015	N/A	N/A	N/A	N/A

N/A: Number of predicted infections <1; no SIR calculated

Healthcare Facility-Onset Laboratory Identified (LabID) Events

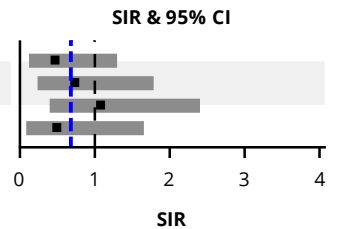
LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia

YR	OBS	PRE	PATD	SIR
2018	0	0.1	7306	N/A
2017	0	0.2	8363	N/A
2016	0	0.1	7305	N/A
2015	0	0.1	7607	N/A

N/A: Number of predicted infections <1; no SIR calculated

LabID - *C. difficile* Infection (CDI)

YR	OBS	PRE	PATD	SIR
2018	3	6.2	7306	0.5
2017	4	5.4	8363	0.7
2016	5	4.6	7305	1.1
2015	2	3.9	7607	0.5



Data reported as of August 27, 2019

YR = reporting year; N = number of units reporting (CLABSI/CAUTI); OBS = observed number of infections

PRE = statistically 'predicted' number of infections, based on NHSN national baseline data

SIR = standardized infection ratio (observed/predicted number of infections)

CLD = central line days; UCD = urinary catheter days; PROC = procedures performed; PATD = patient days;

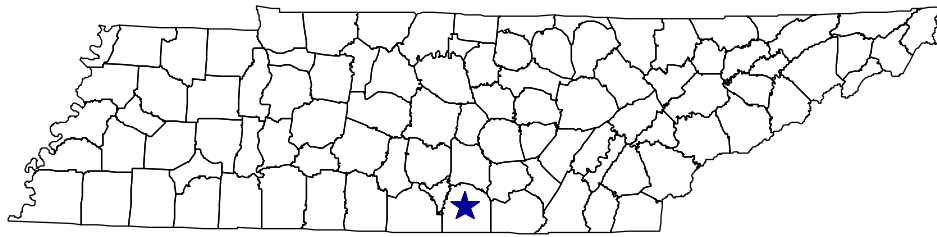
N/A = data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

- Significantly lower than NHSN SIR of 1
- Not significantly different from NHSN SIR of 1
- Significantly higher than NHSN SIR of 1
- - - 2018 TN SIR
- - - NHSN SIR=1

**Southern TN Reg. Health System - Winchester (Southern TN Med Ctr), Winchester, Franklin County**

Medical School Affiliation: None

Bed Size Category: 100-399 beds



**Healthcare-Associated Infections (HAI) Summary**

**Standardized Infection Ratio (SIR) by Infection Type, 01/01/2017-12/31/2017**

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		
		Observed	Predicted		SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	0	0.0	109	N/A	N/A	0.85
	Adult/Pediatric Ward	0	0.1	274	N/A	N/A	0.68
CAUTI	Adult/Pediatric ICU	0	0.4	653	N/A	N/A	0.71
	Adult/Pediatric Ward	3	0.8	1318	N/A	N/A	0.72
SSI	Colon surgery	0	1.0	38	0.00	( 0.00, 2.92 )	0.83
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	1.08
LabID	MRSA bacteremia	0	0.9	19685	N/A	N/A	1.09
	C. difficile infection	4	8.2	18643	0.49	( 0.16, 1.17 )	0.83

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at Southern TN Reg. Health System - Winchester (Southern TN Med Ctr)*

**Healthcare Personnel Influenza Vaccination - '2017/2018' Influenza Season**

**Healthcare Personnel Category (Total)**



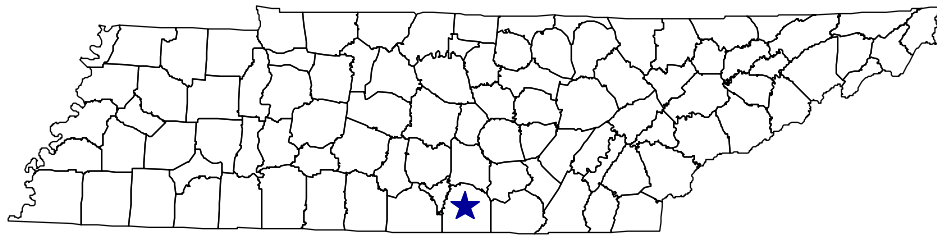
**Healthcare Personnel Vaccinated (%)**

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

**Southern TN Reg. Health System - Winchester (Southern TN Med Ctr), Winchester, Franklin County**

Medical School Affiliation: Undergraduate teaching

Bed Size Category: 100-399 beds



**Healthcare-Associated Infections (HAI) Summary**

**Standardized Infection Ratio (SIR) by Infection Type, 01/01/2018-12/31/2018**

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		
		Observed	Predicted		SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	0	0.1	232	N/A	N/A	0.76
	Adult/Pediatric Ward	0	0.2	377	N/A	N/A	0.63
CAUTI	Adult/Pediatric ICU	0	0.3	504	N/A	N/A	0.70
	Adult/Pediatric Ward	1	0.6	993	N/A	N/A	0.73
SSI	Colon surgery	N/A	N/A	N/A	N/A	N/A	0.79
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	0.78
LabID	MRSA bacteremia	0	1.0	17793	0.00	( 0.00, 2.90 )	1.29
	C. difficile infection	6	7.7	17038	0.77	( 0.31, 1.61 )	0.68

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at Southern TN Reg. Health System - Winchester (Southern TN Med Ctr)*

**Healthcare Personnel Influenza Vaccination - '2018/2019' Influenza Season**

**Healthcare Personnel Category (Total)**



**Healthcare Personnel Vaccinated (%)**

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric ICUs

YR	N	OBS	PRE	CLD	SIR
2018	1	0	0.1	232	N/A
2017	1	0	0.0	109	N/A
2016	1	0	0.1	204	N/A
2015	1	0	0.2	326	N/A

N/A: Number of predicted infections <1; no SIR calculated

CLABSI - Adult/Pediatric Wards

YR	N	OBS	PRE	CLD	SIR
2018	1	0	0.2	377	N/A
2017	1	0	0.1	274	N/A
2016	1	0	0.2	426	N/A
2015	1	0	0.3	468	N/A

N/A: Number of predicted infections <1; no SIR calculated

Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICUs

YR	N	OBS	PRE	UCD	SIR
2018	1	0	0.3	504	N/A
2017	1	0	0.4	653	N/A
2016	1	0	0.4	592	N/A
2015	1	2	0.5	711	N/A

N/A: Number of predicted infections <1; no SIR calculated

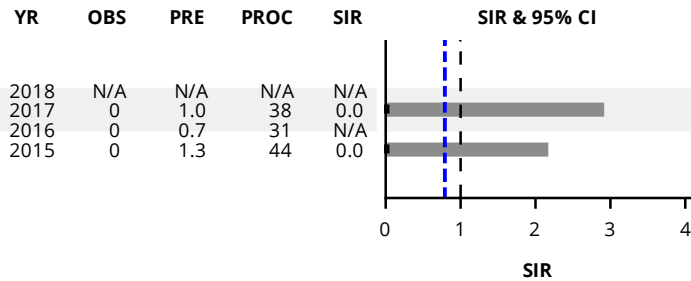
CAUTI - Adult/Pediatric Wards

YR	N	OBS	PRE	UCD	SIR
2018	1	1	0.6	993	N/A
2017	1	3	0.8	1318	N/A
2016	1	1	0.6	969	N/A
2015	1	1	1.7	2693	0.6

N/A: Number of predicted infections <1; no SIR calculated

Surgical Site Infections (SSI)

SSI - Colon Surgery



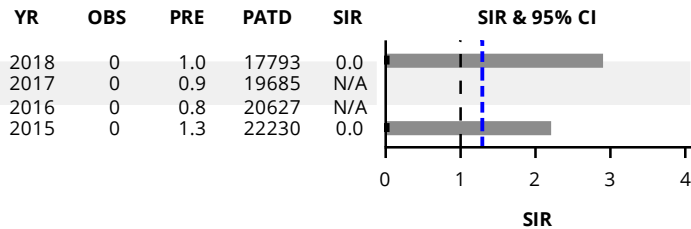
SSI - Abdominal Hysterectomy

YR	OBS	PRE	PROC	SIR
2018	N/A	N/A	N/A	N/A
2017	N/A	N/A	N/A	N/A
2016	N/A	N/A	N/A	N/A
2015	N/A	N/A	N/A	N/A

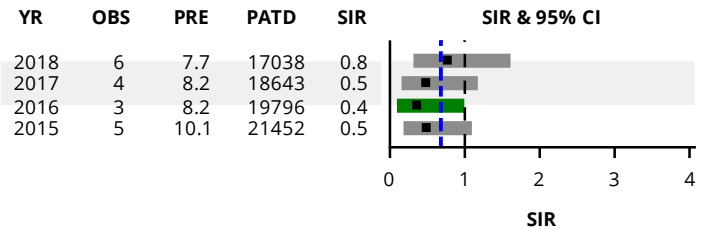
N/A: Number of predicted infections <1; no SIR calculated

Healthcare Facility-Onset Laboratory Identified (LabID) Events

LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia



LabID - *C. difficile* Infection (CDI)



Data reported as of August 27, 2019

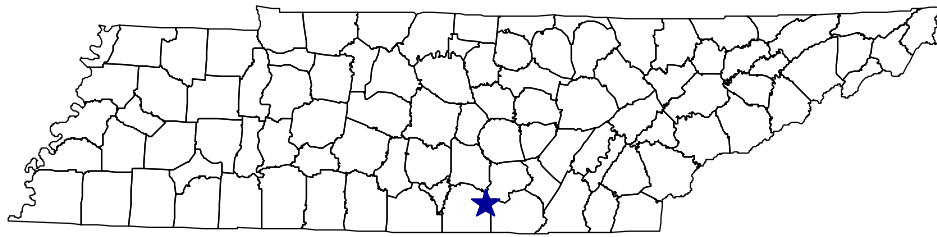
YR = reporting year; N = number of units reporting (CLABSI/CAUTI); OBS = observed number of infections  
 PRE = statistically 'predicted' number of infections, based on NHSN national baseline data  
 SIR = standardized infection ratio (observed/predicted number of infections)  
 CLD = central line days; UCD = urinary catheter days; PROC = procedures performed; PATD = patient days;  
 N/A = data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

■ Significantly lower than NHSN SIR of 1  
 ■ Not significantly different from NHSN SIR of 1  
 ■ Significantly higher than NHSN SIR of 1  
 - - - 2018 TN SIR  
 - - - NHSN SIR=1

**Southern TN Reg. Health System - Sewanee (Emerald-Hodgson Hosp), Sewanee, Franklin County**

Medical School Affiliation: None

Bed Size Category: <50 beds



**Healthcare-Associated Infections (HAI) Summary**

**Standardized Infection Ratio (SIR) by Infection Type, 01/01/2017-12/31/2017**

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		
		Observed	Predicted		SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric Ward	N/A	N/A	N/A	N/A	N/A	0.68
CAUTI	Adult/Pediatric Ward	0	0.0	134	N/A	N/A	0.72
LabID	MRSA bacteremia	0	0.0	1874	N/A	N/A	1.09
	C. difficile infection	0	1.2	1874	0.00	( 0.00, 2.40 )	0.83

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

**See page 3 for more detailed information about HAIs at Southern TN Reg. Health System - Sewanee (Emerald-Hodgson Hosp)**

**Healthcare Personnel Influenza Vaccination - '2017/2018' Influenza Season**

**Healthcare Personnel Category (Total)**



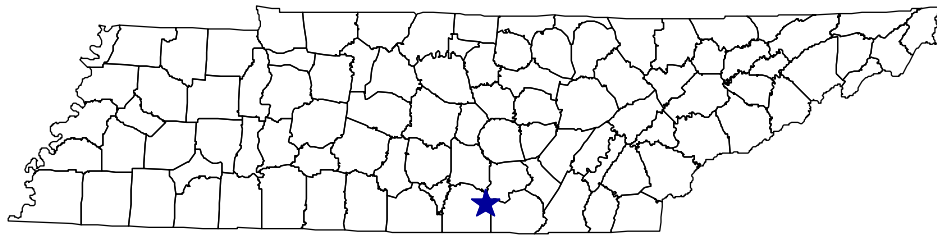
**Healthcare Personnel Vaccinated (%)**

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

**Southern TN Reg. Health System - Sewanee (Emerald-Hodgson Hosp), Sewanee, Franklin County**

Medical School Affiliation: None

Bed Size Category: <50 beds



**Healthcare-Associated Infections (HAI) Summary**

**Standardized Infection Ratio (SIR) by Infection Type, 01/01/2018-12/31/2018**

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		TN SIR
		Observed	Predicted		SIR*	95% CI	
CLABSI	Adult/Pediatric Ward	N/A	N/A	N/A	N/A	N/A	0.63
CAUTI	Adult/Pediatric Ward	0	0.0	182	N/A	N/A	0.73
LabID	MRSA bacteremia	0	0.0	1633	N/A	N/A	1.29
	C. difficile infection	0	1.0	1633	0.00	( 0.00, 2.85 )	0.68

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

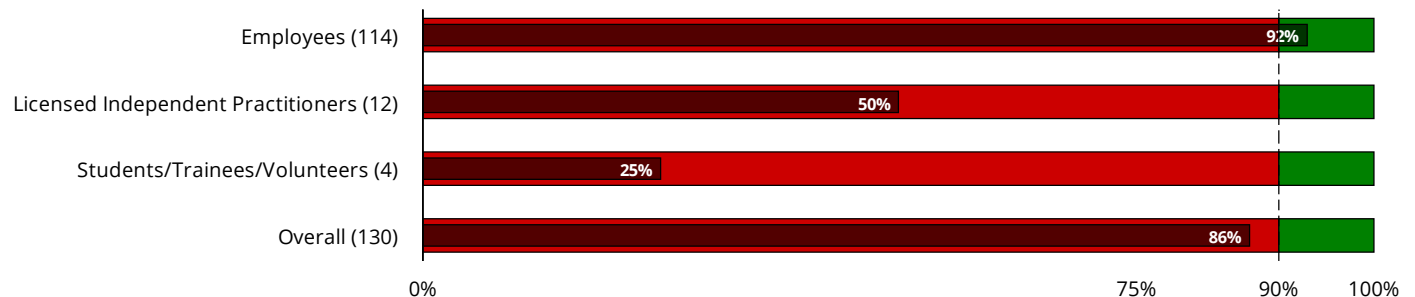
**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at Southern TN Reg. Health System - Sewanee (Emerald-Hodgson Hosp)*

**Healthcare Personnel Influenza Vaccination - '2018/2019' Influenza Season**

**Healthcare Personnel Category (Total)**



**Healthcare Personnel Vaccinated (%)**

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric Wards

YR	N	OBS	PRE	CLD	SIR
2018	1	N/A	N/A	N/A	N/A
2017	1	N/A	N/A	N/A	N/A
2016	1	N/A	N/A	N/A	N/A
2015	1	N/A	N/A	N/A	N/A

N/A: Number of predicted infections <1; no SIR calculated

Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric Wards

YR	N	OBS	PRE	UCD	SIR
2018	1	0	0.0	182	N/A
2017	1	0	0.0	134	N/A
2016	1	0	0.0	155	N/A
2015	1	0	0.1	306	N/A

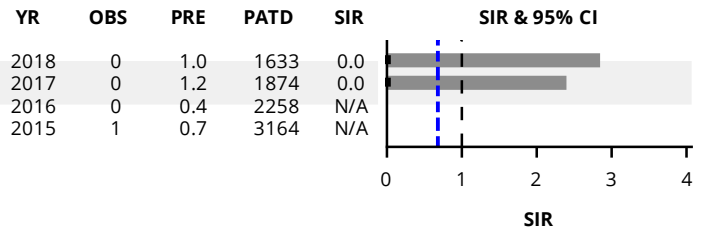
N/A: Number of predicted infections <1; no SIR calculated

Healthcare Facility-Onset Laboratory Identified (LabID) Events

LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia

YR	OBS	PRE	PATD	SIR
2018	0	0.0	1633	N/A
2017	0	0.0	1874	N/A
2016	0	0.0	2258	N/A
2015	0	0.0	3164	N/A

LabID - *C. difficile* Infection (CDI)



N/A: Number of predicted infections <1; no SIR calculated

Data reported as of August 27, 2019

YR = reporting year; N = number of units reporting (CLABSI/CAUTI); OBS = observed number of infections

PRE = statistically 'predicted' number of infections, based on NHSN national baseline data

SIR = standardized infection ratio (observed/predicted number of infections)

CLD = central line days; UCD = urinary catheter days; PROC = procedures performed; PATD = patient days;

N/A = data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

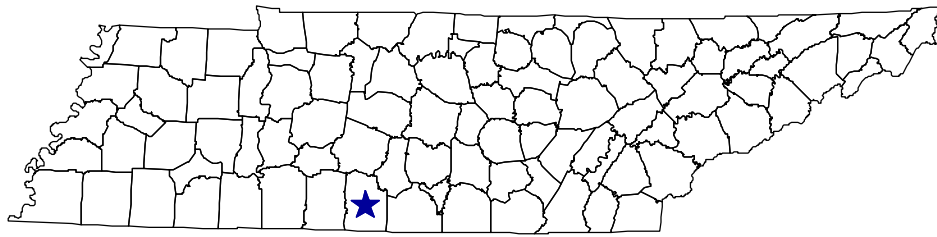
- Significantly lower than NHSN SIR of 1
- Not significantly different from NHSN SIR of 1
- Significantly higher than NHSN SIR of 1
- - - 2018 TN SIR
- - - NHSN SIR=1



## Southern TN Regional Health System - Pulaski (Hillside Hospital), Pulaski, Giles County

Medical School Affiliation: Undergraduate teaching

Bed Size Category: 50-99 beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2017-12/31/2017

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		TN SIR
		Observed	Predicted		SIR*	95% CI	
CLABSI	Adult/Pediatric ICU	0	0.1	150	N/A	N/A	0.85
	Adult/Pediatric Ward	0	0.1	269	N/A	N/A	0.68
CAUTI	Adult/Pediatric ICU	0	0.3	540	N/A	N/A	0.71
	Adult/Pediatric Ward	0	0.2	481	N/A	N/A	0.72
SSI	Colon surgery	N/A	N/A	N/A	N/A	N/A	0.83
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	1.08
LabID	MRSA bacteremia	0	0.1	6155	N/A	N/A	1.09
	C. difficile infection	2	5.3	5873	0.37	( 0.06, 1.24 )	0.83

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

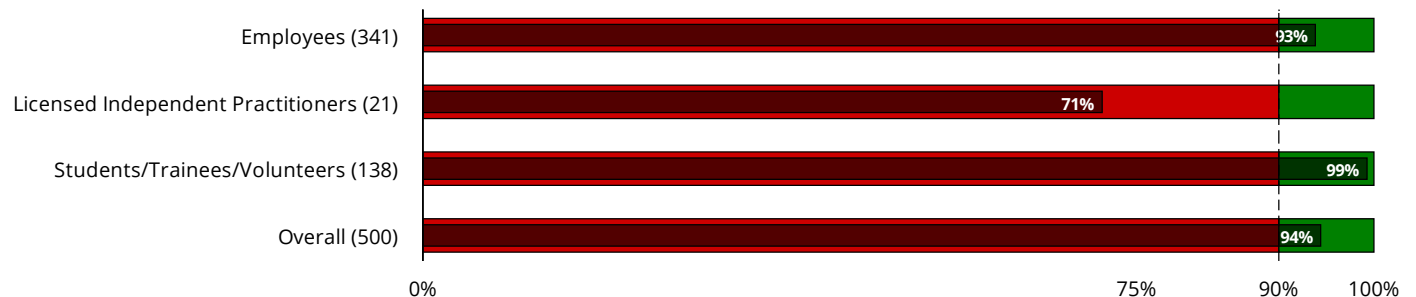
**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at Southern TN Regional Health System - Pulaski (Hillside Hospital)*

### Healthcare Personnel Influenza Vaccination - '2017/2018' Influenza Season

#### Healthcare Personnel Category (Total)



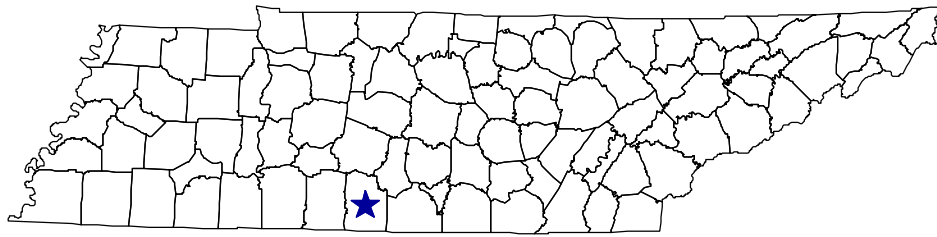
#### Healthcare Personnel Vaccinated (%)

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

## Southern TN Regional Health System - Pulaski (Hillside Hospital), Pulaski, Giles County

Medical School Affiliation: Undergraduate teaching

Bed Size Category: 50-99 beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2018-12/31/2018

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		
		Observed	Predicted		SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	0	0.1	177	N/A	N/A	0.76
	Adult/Pediatric Ward	0	0.1	257	N/A	N/A	0.63
CAUTI	Adult/Pediatric ICU	0	0.3	558	N/A	N/A	0.70
	Adult/Pediatric Ward	0	0.3	626	N/A	N/A	0.73
SSI	Colon surgery	N/A	N/A	N/A	N/A	N/A	0.79
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	0.78
LabID	MRSA bacteremia	0	0.1	6460	N/A	N/A	1.29
	C. difficile infection	1	4.0	6133	0.25	( 0.01, 1.23 )	0.68

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at Southern TN Regional Health System - Pulaski (Hillside Hospital)*

### Healthcare Personnel Influenza Vaccination - '2018/2019' Influenza Season

#### Healthcare Personnel Category (Total)



#### Healthcare Personnel Vaccinated (%)

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric ICUs

YR	N	OBS	PRE	CLD	SIR
2018	1	0	0.1	177	N/A
2017	1	0	0.1	150	N/A
2016	1	0	0.0	144	N/A
2015	1	0	0.1	190	N/A

N/A: Number of predicted infections <1; no SIR calculated

CLABSI - Adult/Pediatric Wards

YR	N	OBS	PRE	CLD	SIR
2018	1	0	0.1	257	N/A
2017	1	0	0.1	269	N/A
2016	1	0	0.2	395	N/A
2015	1	0	0.2	385	N/A

N/A: Number of predicted infections <1; no SIR calculated

Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICUs

YR	N	OBS	PRE	UCD	SIR
2018	1	0	0.3	558	N/A
2017	1	0	0.3	540	N/A
2016	1	0	0.2	415	N/A
2015	1	0	0.2	398	N/A

N/A: Number of predicted infections <1; no SIR calculated

CAUTI - Adult/Pediatric Wards

YR	N	OBS	PRE	UCD	SIR
2018	1	0	0.3	626	N/A
2017	1	0	0.2	481	N/A
2016	1	0	0.1	406	N/A
2015	1	0	0.2	424	N/A

N/A: Number of predicted infections <1; no SIR calculated

Surgical Site Infections (SSI)

SSI - Colon Surgery

YR	OBS	PRE	PROC	SIR
2018	N/A	N/A	N/A	N/A
2017	N/A	N/A	N/A	N/A
2016	N/A	N/A	N/A	N/A
2015	N/A	N/A	N/A	N/A

N/A: Number of predicted infections <1; no SIR calculated

SSI - Abdominal Hysterectomy

YR	OBS	PRE	PROC	SIR
2018	N/A	N/A	N/A	N/A
2017	N/A	N/A	N/A	N/A
2016	N/A	N/A	N/A	N/A
2015	N/A	N/A	N/A	N/A

N/A: Number of predicted infections <1; no SIR calculated

Healthcare Facility-Onset Laboratory Identified (LabID) Events

LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia

YR	OBS	PRE	PATD	SIR
2018	0	0.1	6460	N/A
2017	0	0.1	6155	N/A
2016	0	0.1	5340	N/A
2015	0	0.1	4713	N/A

N/A: Number of predicted infections <1; no SIR calculated

LabID - *C. difficile* Infection (CDI)

YR	OBS	PRE	PATD	SIR	SIR & 95% CI
2018	1	4.0	6133	0.3	
2017	2	5.3	5873	0.4	
2016	1	5.6	5050	0.2	
2015	2	5.1	4400	0.4	

Data reported as of August 27, 2019

YR = reporting year; N = number of units reporting (CLABSI/CAUTI); OBS = observed number of infections

PRE = statistically 'predicted' number of infections, based on NHSN national baseline data

SIR = standardized infection ratio (observed/predicted number of infections)

CLD = central line days; UCD = urinary catheter days; PROC = procedures performed; PATD = patient days;

N/A = data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

■ Significantly lower than NHSN SIR of 1

■ Not significantly different from NHSN SIR of 1

■ Significantly higher than NHSN SIR of 1

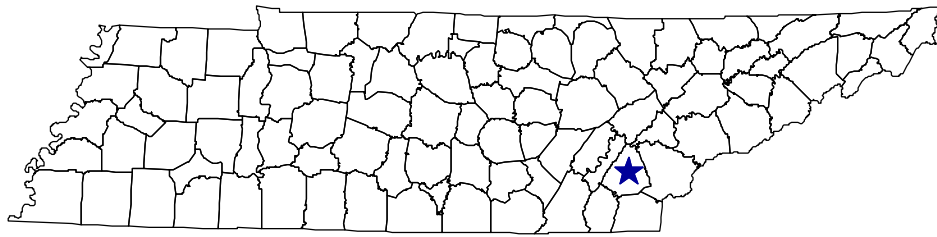
--- 2018 TN SIR

--- NHSN SIR=1

**Starr Regional Med. Center-Athens (Athens Reg. Med. Ctr.), Athens, McMinn County**

Medical School Affiliation: None

Bed Size Category: 50-99 beds



**Healthcare-Associated Infections (HAI) Summary**

**Standardized Infection Ratio (SIR) by Infection Type, 01/01/2017-12/31/2017**

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		
		Observed	Predicted		SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	0	0.1	199	N/A	N/A	0.85
	Adult/Pediatric Ward	0	0.1	332	N/A	N/A	0.68
CAUTI	Adult/Pediatric ICU	0	0.4	753	N/A	N/A	0.71
	Adult/Pediatric Ward	0	0.6	1262	N/A	N/A	0.72
SSI	Colon surgery	0	0.5	27	N/A	N/A	0.83
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	1.08
LabID	MRSA bacteremia	0	0.4	11427	N/A	N/A	1.09
	C. difficile infection	0	3.1	10397	0.00	( 0.00, 0.95 )	0.83

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

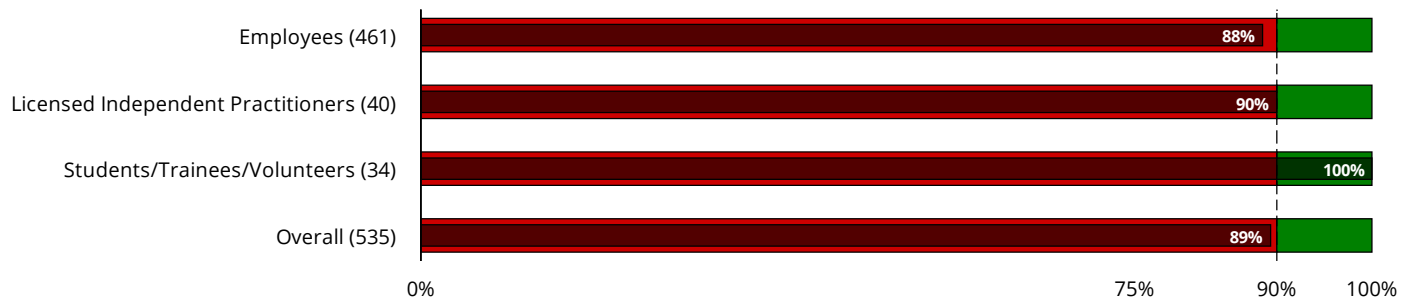
**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

**See page 3 for more detailed information about HAIs at Starr Regional Med. Center-Athens (Athens Reg. Med. Ctr.)**

**Healthcare Personnel Influenza Vaccination - '2017/2018' Influenza Season**

**Healthcare Personnel Category (Total)**



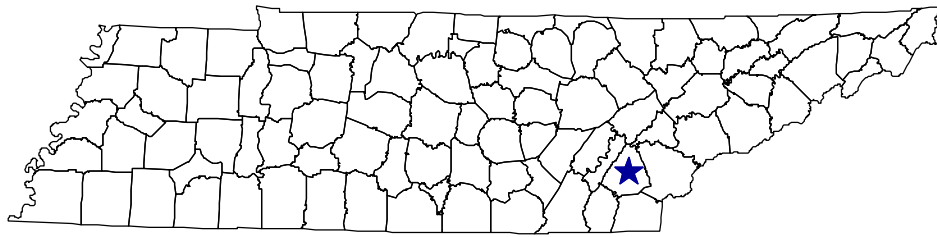
**Healthcare Personnel Vaccinated (%)**

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

**Starr Regional Med. Center-Athens (Athens Reg. Med. Ctr.), Athens, McMinn County**

Medical School Affiliation: None

Bed Size Category: 50-99 beds



**Healthcare-Associated Infections (HAI) Summary**

**Standardized Infection Ratio (SIR) by Infection Type, 01/01/2018-12/31/2018**

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days/Procedures Performed/Patient Days	SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	0	0.1	172	N/A	N/A	0.76
	Adult/Pediatric Ward	0	0.2	378	N/A	N/A	0.63
CAUTI	Adult/Pediatric ICU	0	0.3	674	N/A	N/A	0.70
	Adult/Pediatric Ward	0	0.6	1225	N/A	N/A	0.73
SSI	Colon surgery	0	0.7	36	N/A	N/A	0.79
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	0.78
LabID	MRSA bacteremia	1	0.4	12345	N/A	N/A	1.29
	C. difficile infection	1	3.3	11412	0.30	( 0.02, 1.46 )	0.68

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

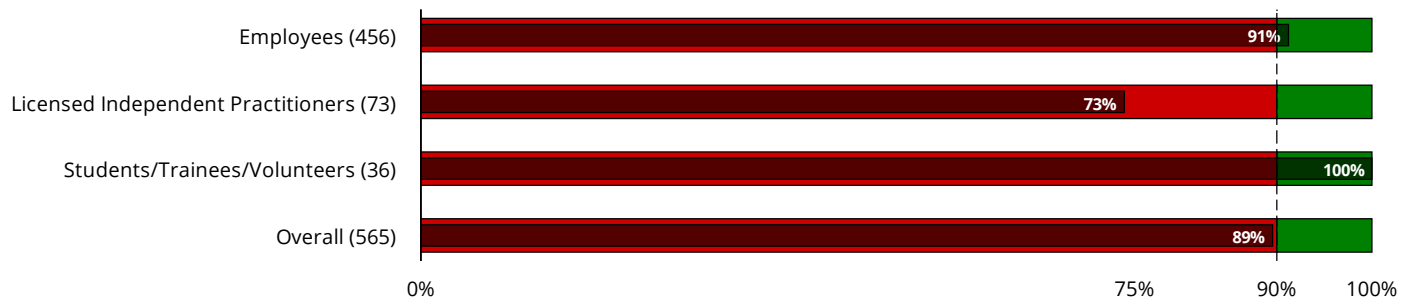
**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

**See page 3 for more detailed information about HAIs at Starr Regional Med. Center-Athens (Athens Reg. Med. Ctr.)**

**Healthcare Personnel Influenza Vaccination - '2018/2019' Influenza Season**

**Healthcare Personnel Category (Total)**



**Healthcare Personnel Vaccinated (%)**

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

**Central Line-Associated Bloodstream Infections (CLABSI)**

**CLABSI - Adult/Pediatric ICUs**

YR	N	OBS	PRE	CLD	SIR
2018	1	0	0.1	172	N/A
2017	1	0	0.1	199	N/A
2016	1	0	0.1	179	N/A
2015	1	0	0.1	227	N/A

N/A: Number of predicted infections <1; no SIR calculated

**CLABSI - Adult/Pediatric Wards**

YR	N	OBS	PRE	CLD	SIR
2018	1	0	0.2	378	N/A
2017	1	0	0.1	332	N/A
2016	1	1	0.2	387	N/A
2015	1	1	0.1	318	N/A

N/A: Number of predicted infections <1; no SIR calculated

**Catheter-Associated Urinary Tract Infections (CAUTI)**

**CAUTI - Adult/Pediatric ICUs**

YR	N	OBS	PRE	UCD	SIR
2018	1	0	0.3	674	N/A
2017	1	0	0.4	753	N/A
2016	1	1	0.3	645	N/A
2015	1	0	0.3	626	N/A

N/A: Number of predicted infections <1; no SIR calculated

**CAUTI - Adult/Pediatric Wards**

YR	N	OBS	PRE	UCD	SIR
2018	1	0	0.6	1225	N/A
2017	1	0	0.6	1262	N/A
2016	1	0	0.4	992	N/A
2015	1	0	0.5	1027	N/A

N/A: Number of predicted infections <1; no SIR calculated

**Surgical Site Infections (SSI)**

**SSI - Colon Surgery**

YR	OBS	PRE	PROC	SIR
2018	0	0.7	36	N/A
2017	0	0.5	27	N/A
2016	0	0.3	20	N/A
2015	0	0.8	42	N/A

N/A: Number of predicted infections <1; no SIR calculated

**SSI - Abdominal Hysterectomy**

YR	OBS	PRE	PROC	SIR
2018	N/A	N/A	N/A	N/A
2017	N/A	N/A	N/A	N/A
2016	0	0.1	23	N/A
2015	0	0.2	25	N/A

N/A: Number of predicted infections <1; no SIR calculated

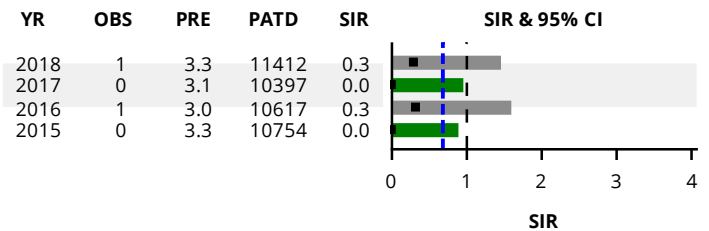
**Healthcare Facility-Onset Laboratory Identified (LabID) Events**

**LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia**

YR	OBS	PRE	PATD	SIR
2018	1	0.4	12345	N/A
2017	0	0.4	11427	N/A
2016	0	0.4	11535	N/A
2015	0	0.4	11807	N/A

N/A: Number of predicted infections <1; no SIR calculated

**LabID - *C. difficile* Infection (CDI)**



Data reported as of August 27, 2019

**YR** = reporting year; **N** = number of units reporting (CLABSI/CAUTI); **OBS** = observed number of infections

**PRE** = statistically 'predicted' number of infections, based on NHSN national baseline data

**SIR** = standardized infection ratio (observed/predicted number of infections)

**CLD** = central line days; **UCD** = urinary catheter days; **PROC** = procedures performed; **PATD** = patient days;

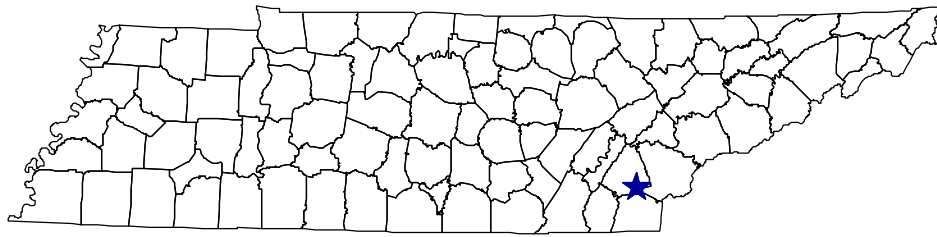
**N/A** = data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

- Significantly lower than NHSN SIR of 1
- Not significantly different from NHSN SIR of 1
- Significantly higher than NHSN SIR of 1
- - - 2018 TN SIR
- - - NHSN SIR=1

**Starr Regional Med. Center-Etowah (Woods Memorial Hosp.), Etowah, McMinn County**

Medical School Affiliation: None

Bed Size Category: <50 beds



**Healthcare-Associated Infections (HAI) Summary**

**Standardized Infection Ratio (SIR) by Infection Type, 01/01/2017-12/31/2017**

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		
		Observed	Predicted		SIR*	95% CI	TN SIR
SSI	Colon surgery	N/A	N/A	N/A	N/A	N/A	0.83
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	1.08
LabID	MRSA bacteremia	N/A	N/A	N/A	N/A	N/A	1.09
	C. difficile infection	N/A	N/A	N/A	N/A	N/A	0.83

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

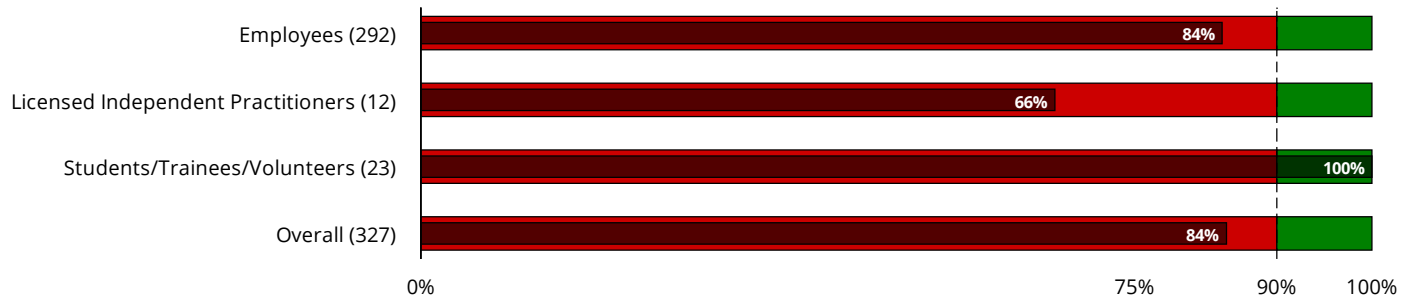
**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at Starr Regional Med. Center-Etowah (Woods Memorial Hosp.)*

**Healthcare Personnel Influenza Vaccination - '2017/2018' Influenza Season**

**Healthcare Personnel Category (Total)**



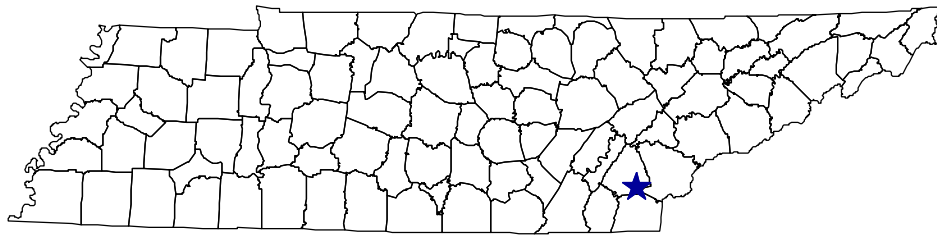
**Healthcare Personnel Vaccinated (%)**

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

**Starr Regional Med. Center-Etowah (Woods Memorial Hosp.), Etowah, McMinn County**

Medical School Affiliation: None

Bed Size Category: <50 beds



**Healthcare-Associated Infections (HAI) Summary**

**Standardized Infection Ratio (SIR) by Infection Type, 01/01/2018-12/31/2018**

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		
		Observed	Predicted		SIR*	95% CI	TN SIR
SSI	Colon surgery	N/A	N/A	N/A	N/A	N/A	0.79
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	0.78
LabID	MRSA bacteremia	0	0.0	373	N/A	N/A	1.29
	C. difficile infection	0	0.0	373	N/A	N/A	0.68

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at Starr Regional Med. Center-Etowah (Woods Memorial Hosp.)*

**Healthcare Personnel Influenza Vaccination - '2018/2019' Influenza Season**

**Healthcare Personnel Category (Total)**



**Healthcare Personnel Vaccinated (%)**

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)



**Surgical Site Infections (SSI)**

**SSI - Colon Surgery**

YR	OBS	PRE	PROC	SIR
2018	N/A	N/A	N/A	N/A
2017	N/A	N/A	N/A	N/A
2016	N/A	N/A	N/A	N/A
2015	N/A	N/A	N/A	N/A

N/A: Number of predicted infections <1; no SIR calculated

**SSI - Abdominal Hysterectomy**

YR	OBS	PRE	PROC	SIR
2018	N/A	N/A	N/A	N/A
2017	N/A	N/A	N/A	N/A
2016	N/A	N/A	N/A	N/A
2015	N/A	N/A	N/A	N/A

N/A: Number of predicted infections <1; no SIR calculated

**Healthcare Facility-Onset Laboratory Identified (LabID) Events**

**LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia**

YR	OBS	PRE	PATD	SIR
2018	0	0.0	373	N/A
2017	N/A	N/A	N/A	N/A
2016	N/A	N/A	N/A	N/A
2015	0	0.0	3124	N/A

N/A: Number of predicted infections <1; no SIR calculated

**LabID - *C. difficile* Infection (CDI)**

YR	OBS	PRE	PATD	SIR
2018	0	0.0	373	N/A
2017	N/A	N/A	N/A	N/A
2016	N/A	N/A	N/A	N/A
2015	0	0.5	3124	N/A

N/A: Number of predicted infections <1; no SIR calculated

Data reported as of August 27, 2019

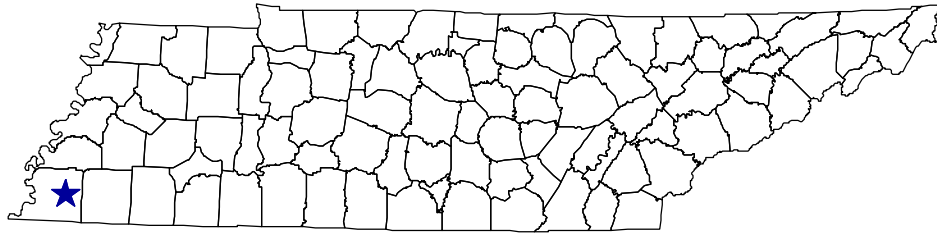
**YR** = reporting year; **N** = number of units reporting (CLABSI/CAUTI); **OBS** = observed number of infections  
**PRE** = statistically 'predicted' number of infections, based on NHSN national baseline data  
**SIR** = standardized infection ratio (observed/predicted number of infections)  
**CLD** = central line days; **UCD** = urinary catheter days; **PROC** = procedures performed; **PATD** = patient days;  
**N/A** = data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

- Significantly lower than NHSN SIR of 1
- Not significantly different from NHSN SIR of 1
- Significantly higher than NHSN SIR of 1
- 2018 TN SIR
- NHSN SIR=1

**St. Francis Bartlett, Bartlett, Shelby County**

Medical School Affiliation: None

Bed Size Category: 100-399 beds



**Healthcare-Associated Infections (HAI) Summary**

**Standardized Infection Ratio (SIR) by Infection Type, 01/01/2017-12/31/2017**

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		TN SIR
		Observed	Predicted		SIR*	95% CI	
CLABSI	Adult/Pediatric ICU	0	2.1	2809	0.00	( 0.00, 1.42 )	0.85
	Neonatal ICU	0	0.0	61	<b>N/A</b>	<b>N/A</b>	0.75
	Adult/Pediatric Ward	2	1.6	2481	1.24	( 0.21, 4.09 )	0.68
CAUTI	Adult/Pediatric ICU	3	2.5	3521	1.17	( 0.30, 3.17 )	0.71
	Adult/Pediatric Ward	1	1.5	2351	0.65	( 0.03, 3.21 )	0.72
SSI	Colon surgery	1	1.2	65	0.77	( 0.04, 3.81 )	0.83
	Abdominal hysterectomy	0	0.3	51	<b>N/A</b>	<b>N/A</b>	1.08
LabID	MRSA bacteremia	3	1.9	38005	1.54	( 0.39, 4.20 )	1.09
	C. difficile infection	34	29.4	37040	1.16	( 0.81, 1.60 )	0.83

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at St. Francis Bartlett*

**Healthcare Personnel Influenza Vaccination - '2017/2018' Influenza Season**

**Healthcare Personnel Category (Total)**



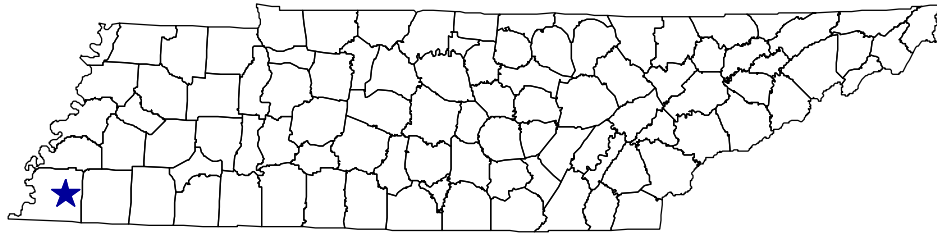
**Healthcare Personnel Vaccinated (%)**

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

**St. Francis Bartlett, Bartlett, Shelby County**

Medical School Affiliation: None

Bed Size Category: 100-399 beds



**Healthcare-Associated Infections (HAI) Summary**

**Standardized Infection Ratio (SIR) by Infection Type, 01/01/2018-12/31/2018**

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		TN SIR
		Observed	Predicted		SIR*	95% CI	
CLABSI	Adult/Pediatric ICU	1	1.5	2049	0.65	( 0.03, 3.19 )	0.76
	Neonatal ICU	N/A	N/A	N/A	<b>N/A</b>	<b>N/A</b>	0.79
	Adult/Pediatric Ward	0	1.6	2544	0.00	( 0.00, 1.81 )	0.63
CAUTI	Adult/Pediatric ICU	0	1.9	2690	0.00	( 0.00, 1.52 )	0.70
	Adult/Pediatric Ward	1	1.6	2540	0.60	( 0.03, 2.97 )	0.73
SSI	Colon surgery	0	1.6	78	0.00	( 0.00, 1.86 )	0.79
	Abdominal hysterectomy	2	0.3	64	<b>N/A</b>	<b>N/A</b>	0.78
LabID	MRSA bacteremia	2	2.2	37862	0.90	( 0.15, 2.98 )	1.29
	C. difficile infection	12	25.5	36397	<b>0.47</b>	<b>( 0.25, 0.80 )</b>	0.68

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at St. Francis Bartlett*

**Healthcare Personnel Influenza Vaccination - '2018/2019' Influenza Season**

**Healthcare Personnel Category (Total)**

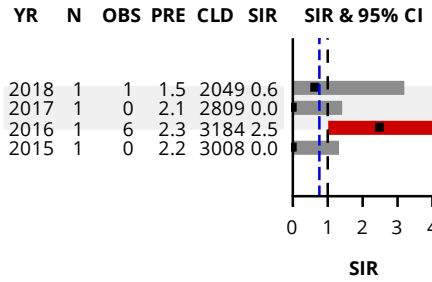


**Healthcare Personnel Vaccinated (%)**

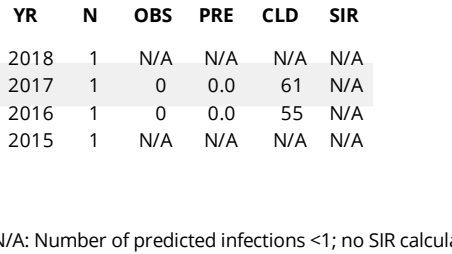
■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

Central Line-Associated Bloodstream Infections (CLABSI)

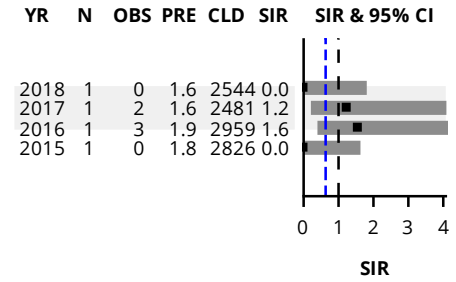
CLABSI - Adult/Pediatric ICUs



CLABSI - Neonatal ICUs

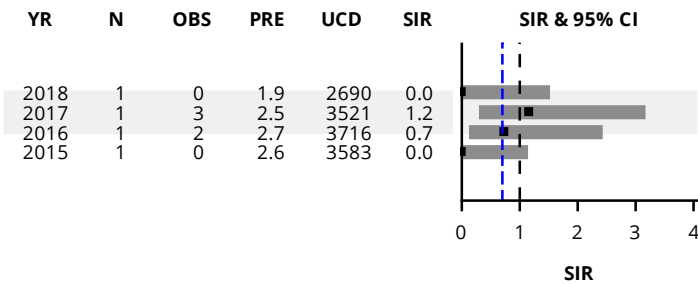


CLABSI - Adult/Pediatric Wards

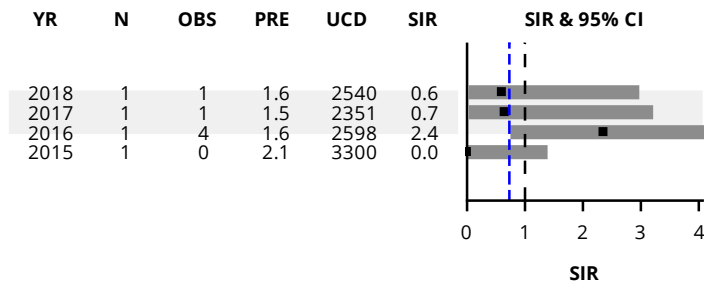


Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICUs

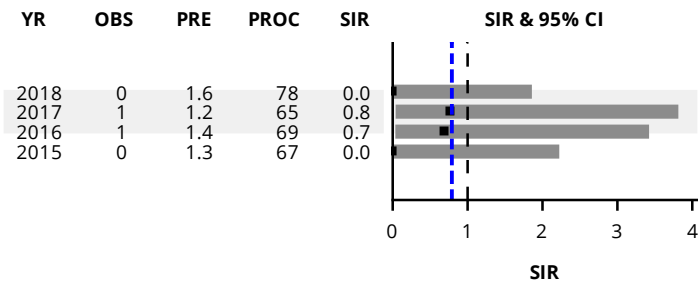


CAUTI - Adult/Pediatric Wards

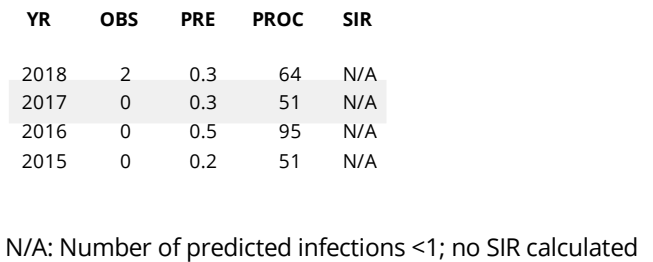


Surgical Site Infections (SSI)

SSI - Colon Surgery

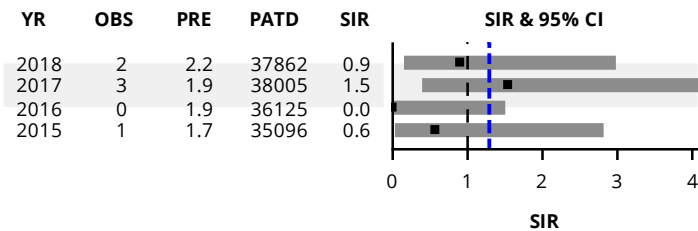


SSI - Abdominal Hysterectomy

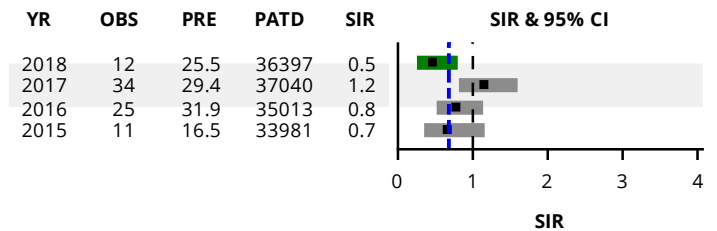


Healthcare Facility-Onset Laboratory Identified (LabID) Events

LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia



LabID - *C. difficile* Infection (CDI)



Data reported as of August 27, 2019

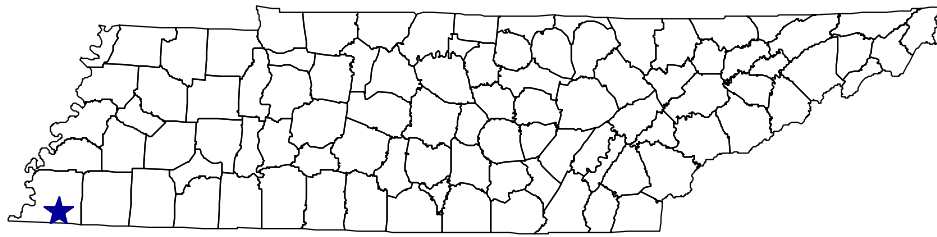
YR = reporting year; N = number of units reporting (CLABSI/CAUTI); OBS = observed number of infections  
 PRE = statistically 'predicted' number of infections, based on NHSN national baseline data  
 SIR = standardized infection ratio (observed/predicted number of infections)  
 CLD = central line days; UCD = urinary catheter days; PROC = procedures performed; PATD = patient days;  
 N/A = data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

■ Significantly lower than NHSN SIR of 1  
 ■ Not significantly different from NHSN SIR of 1  
 ■ Significantly higher than NHSN SIR of 1  
 - - - 2018 TN SIR  
 - - - NHSN SIR=1

## St. Francis Hospital - Memphis, Memphis, Shelby County

Medical School Affiliation: Graduate teaching

Bed Size Category: 400+ beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2017-12/31/2017

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		TN SIR
		Observed	Predicted		SIR*	95% CI	
CLABSI	Adult/Pediatric ICU	3	5.1	5091	0.59	( 0.15, 1.59 )	0.85
	Neonatal ICU	N/A	N/A	N/A	<b>N/A</b>	<b>N/A</b>	0.75
	Adult/Pediatric Ward	3	2.7	3108	1.11	( 0.28, 3.02 )	0.68
CAUTI	Adult/Pediatric ICU	4	4.6	4532	0.86	( 0.28, 2.08 )	0.71
	Adult/Pediatric Ward	1	2.9	3248	0.34	( 0.02, 1.66 )	0.72
SSI	Colon surgery	1	3.1	130	0.32	( 0.02, 1.59 )	0.83
	Abdominal hysterectomy	0	0.5	64	<b>N/A</b>	<b>N/A</b>	1.08
LabID	MRSA bacteremia	9	4.6	69722	1.92	( 0.94, 3.53 )	1.09
	C. difficile infection	52	47.5	66276	1.10	( 0.83, 1.42 )	0.83

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

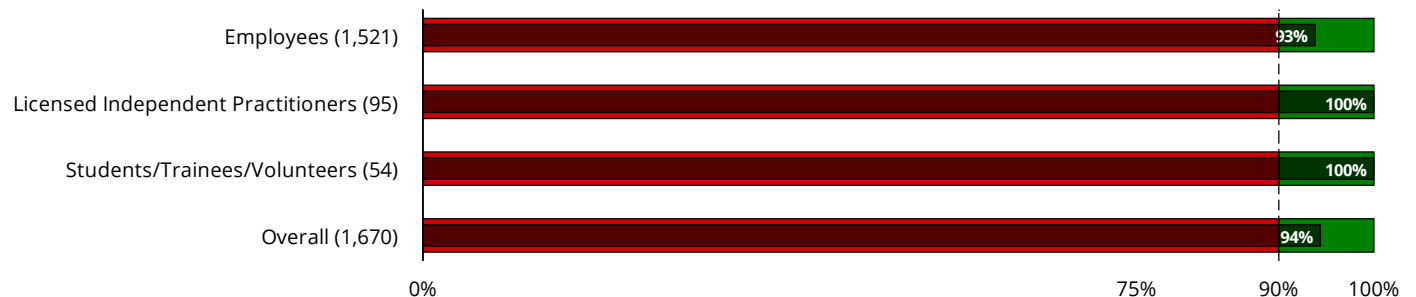
**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at St. Francis Hospital - Memphis*

### Healthcare Personnel Influenza Vaccination - '2017/2018' Influenza Season

#### Healthcare Personnel Category (Total)



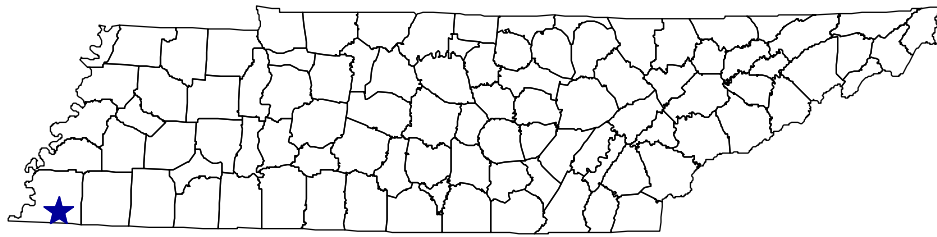
#### Healthcare Personnel Vaccinated (%)

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

## St. Francis Hospital - Memphis, Memphis, Shelby County

Medical School Affiliation: Graduate teaching

Bed Size Category: 400+ beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2018-12/31/2018

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		TN SIR
		Observed	Predicted		SIR*	95% CI	
CLABSI	Adult/Pediatric ICU	1	4.0	4057	0.25	( 0.01, 1.21 )	0.76
	Neonatal ICU	N/A	N/A	N/A	N/A	N/A	0.79
	Adult/Pediatric Ward	0	0.4	506	N/A	N/A	0.63
CAUTI	Adult/Pediatric ICU	0	3.8	3774	0.00	( 0.00, 0.78 )	0.70
	Adult/Pediatric Ward	0	0.5	596	N/A	N/A	0.73
SSI	Colon surgery	1	3.5	135	0.29	( 0.01, 1.41 )	0.79
	Abdominal hysterectomy	0	0.6	66	N/A	N/A	0.78
LabID	MRSA bacteremia	4	4.0	64825	0.98	( 0.31, 2.37 )	1.29
	C. difficile infection	32	44.9	61681	0.71	( 0.50, 0.99 )	0.68

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

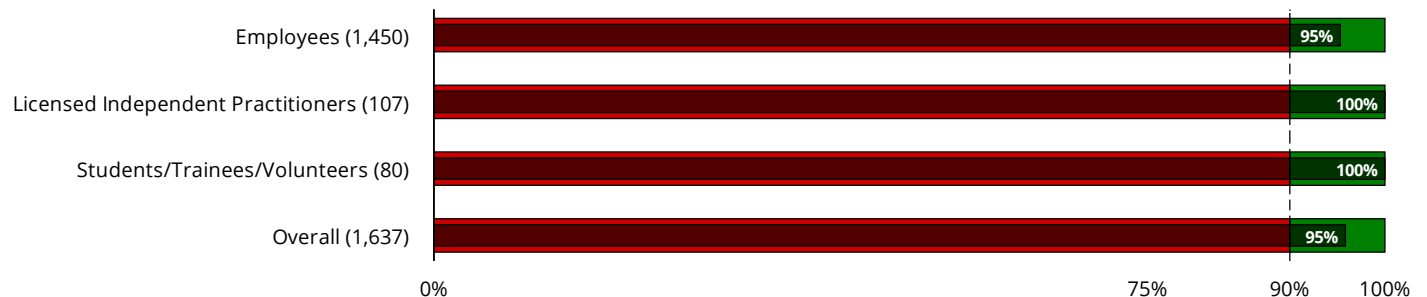
**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at St. Francis Hospital - Memphis*

### Healthcare Personnel Influenza Vaccination - '2018/2019' Influenza Season

#### Healthcare Personnel Category (Total)

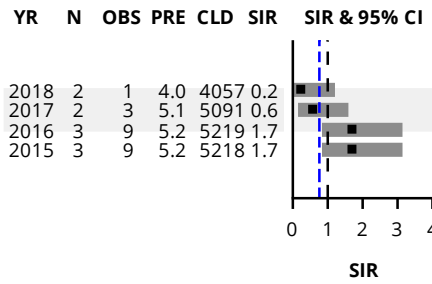


#### Healthcare Personnel Vaccinated (%)

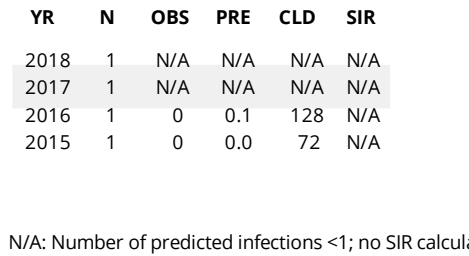
■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

Central Line-Associated Bloodstream Infections (CLABSI)

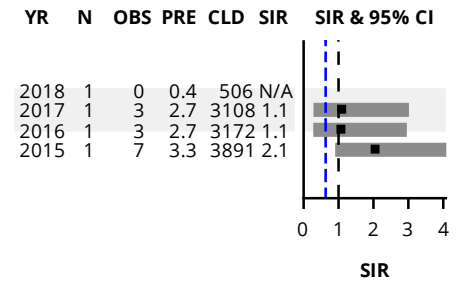
CLABSI - Adult/Pediatric ICUs



CLABSI - Neonatal ICUs

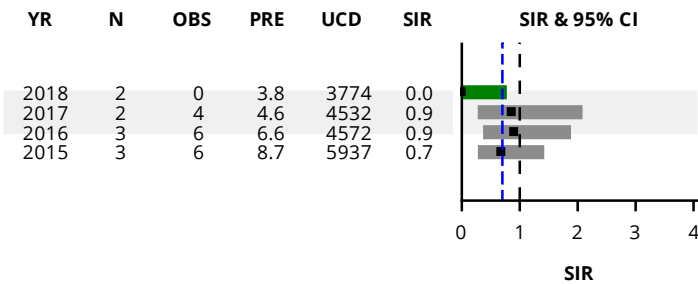


CLABSI - Adult/Pediatric Wards

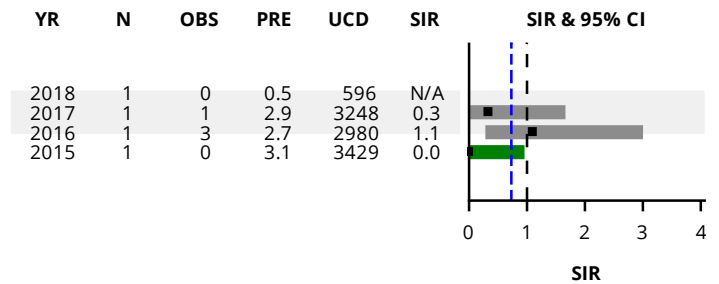


Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICUs

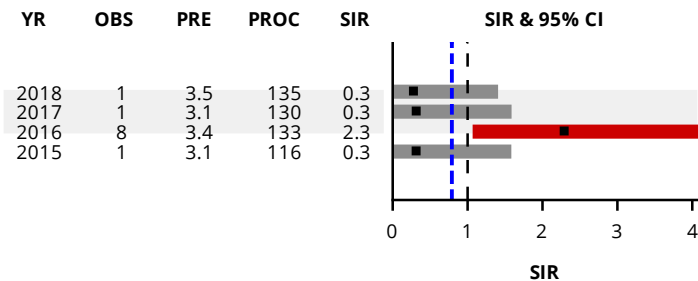


CAUTI - Adult/Pediatric Wards

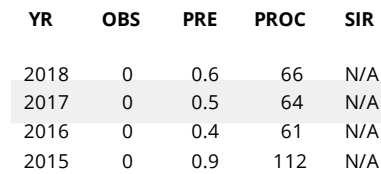


Surgical Site Infections (SSI)

SSI - Colon Surgery



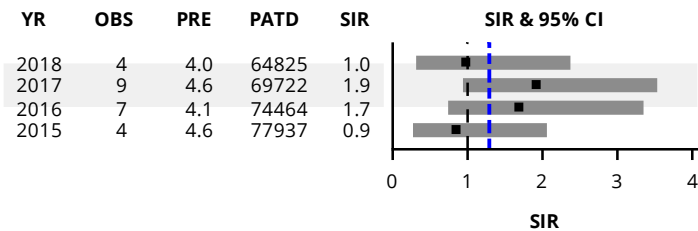
SSI - Abdominal Hysterectomy



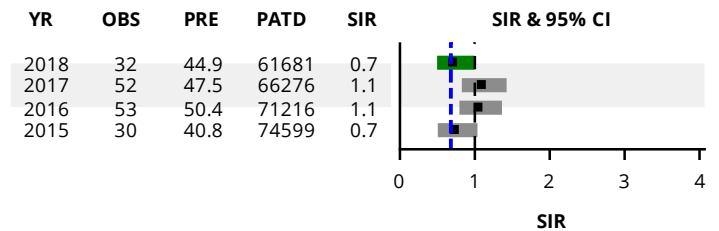
N/A: Number of predicted infections <1; no SIR calculated

Healthcare Facility-Onset Laboratory Identified (LabID) Events

LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia



LabID - *C. difficile* Infection (CDI)



Data reported as of August 27, 2019

YR = reporting year; N = number of units reporting (CLABSI/CAUTI); OBS = observed number of infections

PRE = statistically 'predicted' number of infections, based on NHSN national baseline data

SIR = standardized infection ratio (observed/predicted number of infections)

CLD = central line days; UCD = urinary catheter days; PROC = procedures performed; PATD = patient days;

N/A = data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

■ Significantly lower than NHSN SIR of 1

■ Not significantly different from NHSN SIR of 1

■ Significantly higher than NHSN SIR of 1

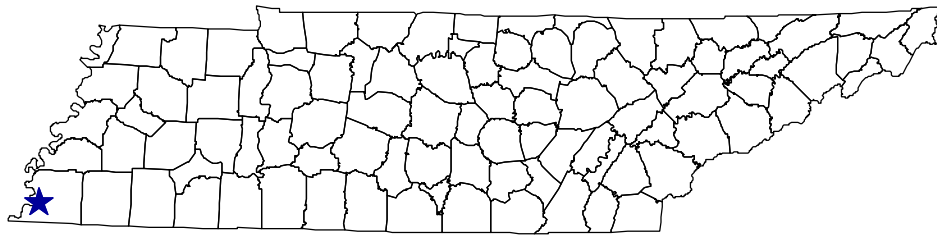
--- 2018 TN SIR

--- NHSN SIR=1

## St. Jude Children's Research Hospital, Memphis, Shelby County

Medical School Affiliation: Major teaching

Bed Size Category: 50-99 beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2017-12/31/2017

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		
		Observed	Predicted		SIR*	95% CI	TN SIR
SSI	Colon surgery	N/A	N/A	N/A	N/A	N/A	0.83
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	1.08
LabID	MRSA bacteremia	1	0.6	19556	N/A	N/A	1.09
	C. difficile infection	44	6.9	19556	6.33	(4.66, 8.43)	0.83

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

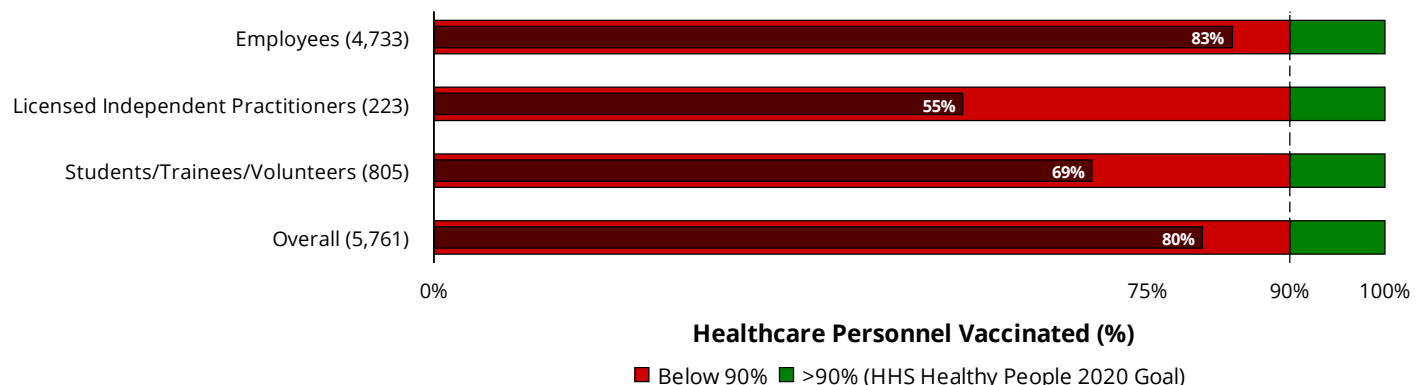
**N/A**: Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at St. Jude Children's Research Hospital*

### Healthcare Personnel Influenza Vaccination - '2017/2018' Influenza Season

#### Healthcare Personnel Category (Total)

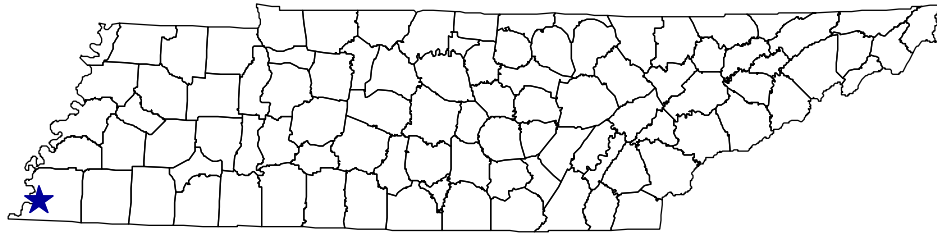




## St. Jude Children's Research Hospital, Memphis, Shelby County

Medical School Affiliation: Major teaching

Bed Size Category: 50-99 beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2018-12/31/2018

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		
		Observed	Predicted		SIR*	95% CI	TN SIR
SSI	Colon surgery	N/A	N/A	N/A	N/A	N/A	0.79
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	0.78
LabID	MRSA bacteremia	2	0.8	18893	N/A	N/A	1.29
	C. difficile infection	47	6.3	18893	7.40	(5.50, 9.76)	0.68

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

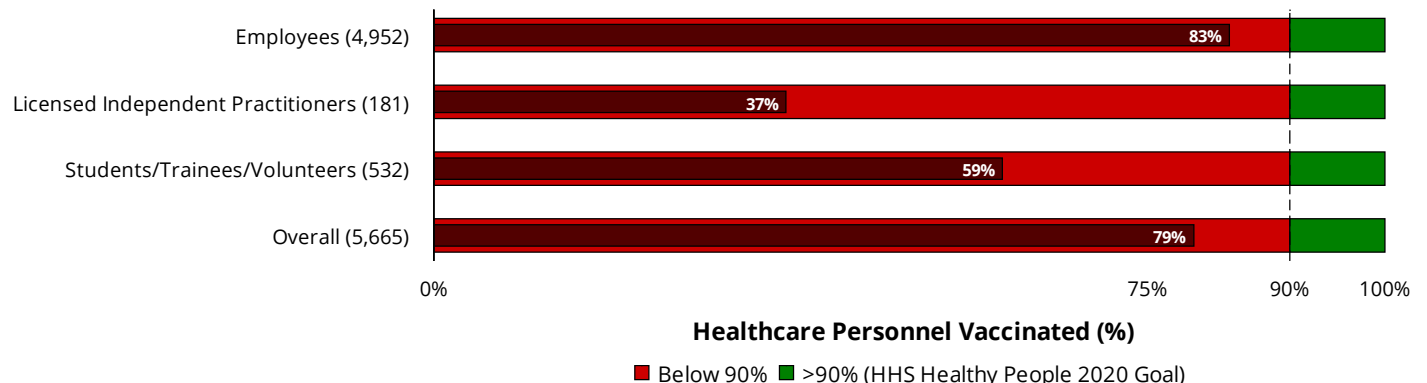
**N/A**: Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at St. Jude Children's Research Hospital*

### Healthcare Personnel Influenza Vaccination - '2018/2019' Influenza Season

#### Healthcare Personnel Category (Total)



Surgical Site Infections (SSI)

SSI - Colon Surgery

YR	OBS	PRE	PROC	SIR
2018	N/A	N/A	N/A	N/A
2017	N/A	N/A	N/A	N/A
2016	N/A	N/A	N/A	N/A
2015	N/A	N/A	N/A	N/A

N/A: Number of predicted infections <1; no SIR calculated

SSI - Abdominal Hysterectomy

YR	OBS	PRE	PROC	SIR
2018	N/A	N/A	N/A	N/A
2017	N/A	N/A	N/A	N/A
2016	N/A	N/A	N/A	N/A
2015	N/A	N/A	N/A	N/A

N/A: Number of predicted infections <1; no SIR calculated

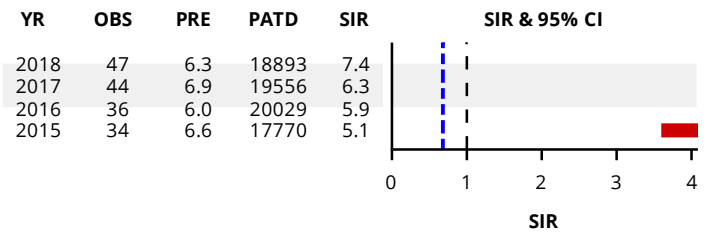
Healthcare Facility-Onset Laboratory Identified (LabID) Events

LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia

YR	OBS	PRE	PATD	SIR
2018	2	0.8	18893	N/A
2017	1	0.6	19556	N/A
2016	0	0.7	20029	N/A
2015	0	0.7	17770	N/A

N/A: Number of predicted infections <1; no SIR calculated

LabID - *C. difficile* Infection (CDI)



Data reported as of August 27, 2019

YR = reporting year; N = number of units reporting (CLABSI/CAUTI); OBS = observed number of infections

PRE = statistically 'predicted' number of infections, based on NHSN national baseline data

SIR = standardized infection ratio (observed/predicted number of infections)

CLD = central line days; UCD = urinary catheter days; PROC = procedures performed; PATD = patient days;

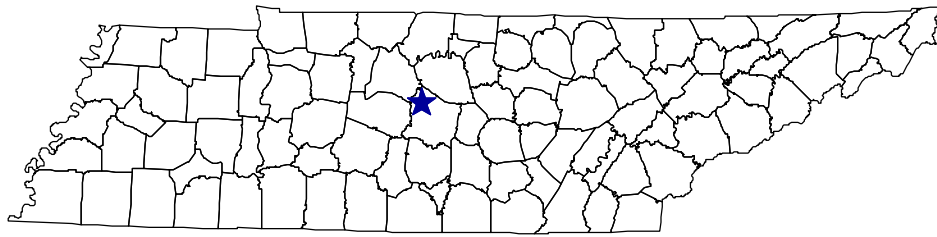
N/A = data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

- Significantly lower than NHSN SIR of 1
- Not significantly different from NHSN SIR of 1
- Significantly higher than NHSN SIR of 1
- - - 2018 TN SIR
- - - NHSN SIR=1

## StoneCrest Medical Center, Smyrna, Rutherford County

Medical School Affiliation: None

Bed Size Category: 100-399 beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2017-12/31/2017

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		
		Observed	Predicted		SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	0	0.7	1005	N/A	N/A	0.85
	Adult/Pediatric Ward	1	0.9	1503	N/A	N/A	0.68
CAUTI	Adult/Pediatric ICU	1	1.1	1509	0.89	(0.05, 4.39)	0.71
	Adult/Pediatric Ward	0	1.0	1550	0.00	(0.00, 2.96)	0.72
SSI	Colon surgery	3	1.8	82	1.62	(0.41, 4.42)	0.83
	Abdominal hysterectomy	2	0.6	106	N/A	N/A	1.08
LabID	MRSA bacteremia	2	1.1	25567	1.68	(0.28, 5.55)	1.09
	C. difficile infection	19	17.1	22690	1.11	(0.69, 1.70)	0.83

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

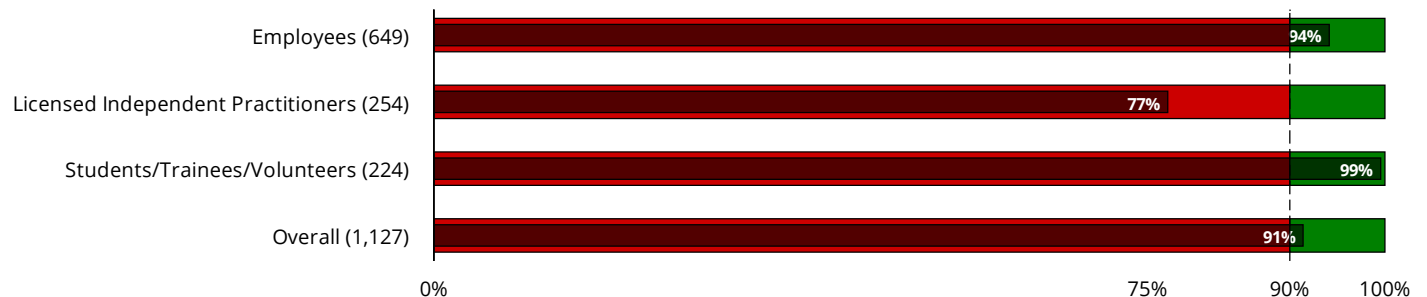
**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at StoneCrest Medical Center*

### Healthcare Personnel Influenza Vaccination - '2017/2018' Influenza Season

#### Healthcare Personnel Category (Total)



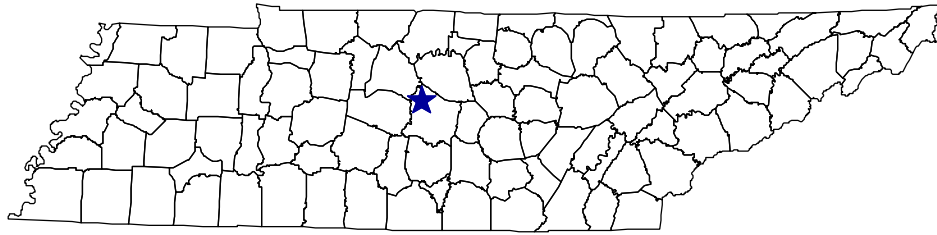
#### Healthcare Personnel Vaccinated (%)

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

## StoneCrest Medical Center, Smyrna, Rutherford County

Medical School Affiliation: None

Bed Size Category: 100-399 beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2018-12/31/2018

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		
		Observed	Predicted		SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	0	0.7	946	N/A	N/A	0.76
	Adult/Pediatric Ward	0	0.9	1457	N/A	N/A	0.63
CAUTI	Adult/Pediatric ICU	0	0.9	1333	N/A	N/A	0.70
	Adult/Pediatric Ward	1	0.5	875	N/A	N/A	0.73
SSI	Colon surgery	3	1.8	82	1.64	( 0.42, 4.45 )	0.79
	Abdominal hysterectomy	0	0.7	136	N/A	N/A	0.78
LabID	MRSA bacteremia	1	1.0	25277	0.92	( 0.05, 4.54 )	1.29
	C. difficile infection	4	14.8	22754	0.27	( 0.09, 0.65 )	0.68

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

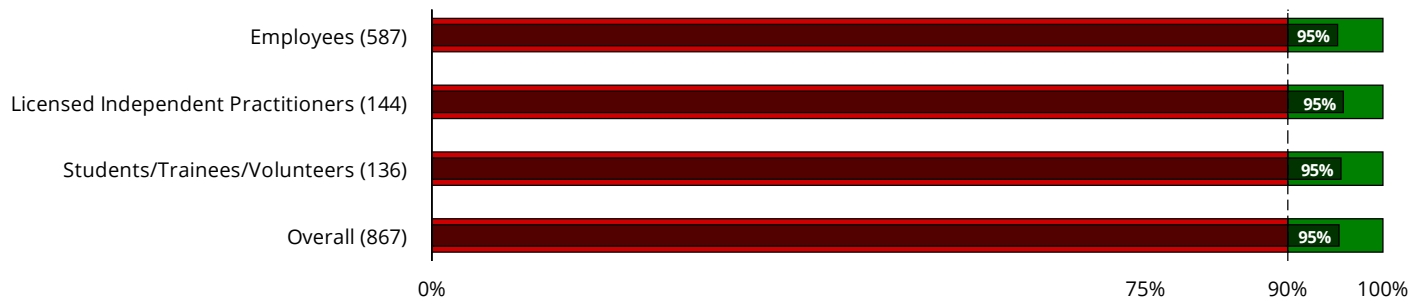
**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at StoneCrest Medical Center*

### Healthcare Personnel Influenza Vaccination - '2018/2019' Influenza Season

#### Healthcare Personnel Category (Total)



#### Healthcare Personnel Vaccinated (%)

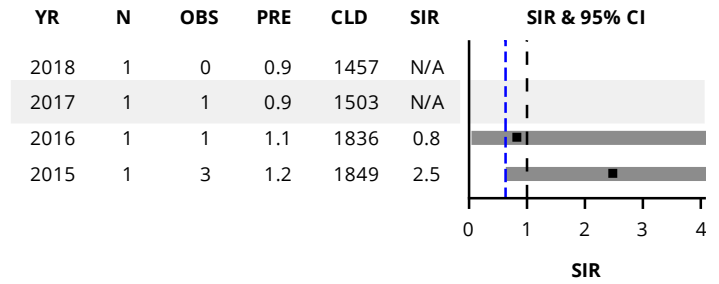
■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric ICUs

YR	N	OBS	PRE	CLD	SIR
2018	1	0	0.7	946	N/A
2017	1	0	0.7	1005	N/A
2016	1	1	0.6	875	N/A
2015	1	0	0.7	940	N/A

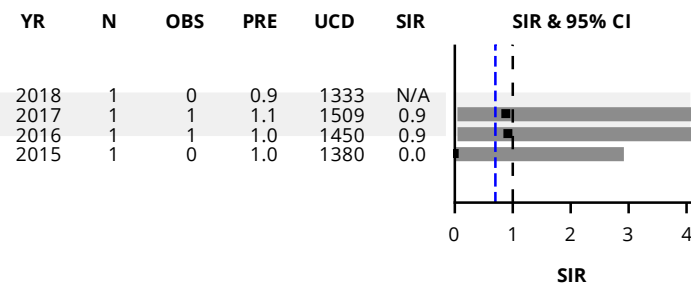
CLABSI - Adult/Pediatric Wards



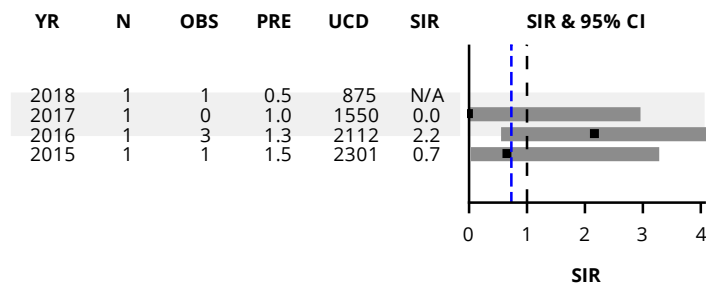
N/A: Number of predicted infections <1; no SIR calculated

Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICUs

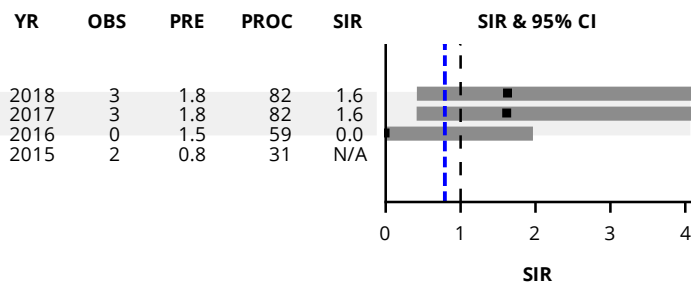


CAUTI - Adult/Pediatric Wards



Surgical Site Infections (SSI)

SSI - Colon Surgery



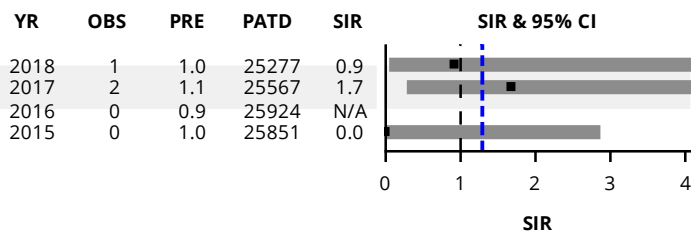
SSI - Abdominal Hysterectomy

YR	OBS	PRE	PROC	SIR
2018	0	0.7	136	N/A
2017	2	0.6	106	N/A
2016	0	0.7	143	N/A
2015	0	0.6	103	N/A

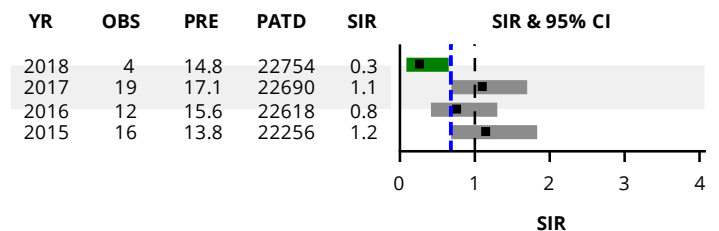
N/A: Number of predicted infections <1; no SIR calculated

Healthcare Facility-Onset Laboratory Identified (LabID) Events

LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia



LabID - *C. difficile* Infection (CDI)



Data reported as of August 27, 2019

YR = reporting year; N = number of units reporting (CLABSI/CAUTI); OBS = observed number of infections

PRE = statistically 'predicted' number of infections, based on NHSN national baseline data

SIR = standardized infection ratio (observed/predicted number of infections)

CLD = central line days; UCD = urinary catheter days; PROC = procedures performed; PATD = patient days;

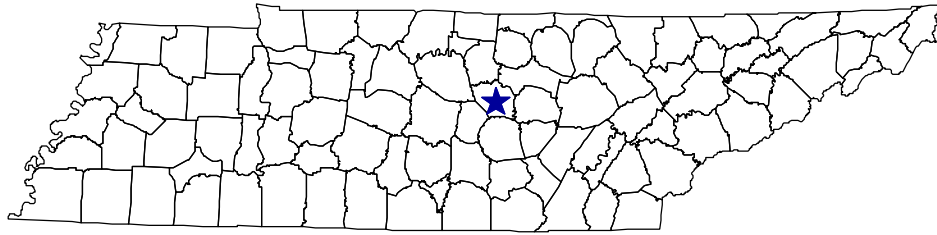
N/A = data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

- Significantly lower than NHSN SIR of 1
- Not significantly different from NHSN SIR of 1
- Significantly higher than NHSN SIR of 1
- - - 2018 TN SIR
- - - NHSN SIR=1

## St. Thomas DeKalb Hospital, Smithville, DeKalb County

Medical School Affiliation: None

Bed Size Category: 50-99 beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2017-12/31/2017

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		
		Observed	Predicted		SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	N/A	N/A	N/A	N/A	N/A	0.85
	Adult/Pediatric Ward	0	0.0	79	N/A	N/A	0.68
CAUTI	Adult/Pediatric ICU	N/A	N/A	N/A	N/A	N/A	0.71
	Adult/Pediatric Ward	0	0.1	219	N/A	N/A	0.72
SSI	Colon surgery	N/A	N/A	N/A	N/A	N/A	0.83
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	1.08
LabID	MRSA bacteremia	0	0.0	1526	N/A	N/A	1.09
	C. difficile infection	0	0.5	1526	N/A	N/A	0.83

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at St. Thomas DeKalb Hospital*

### Healthcare Personnel Influenza Vaccination - '2017/2018' Influenza Season

#### Healthcare Personnel Category (Total)



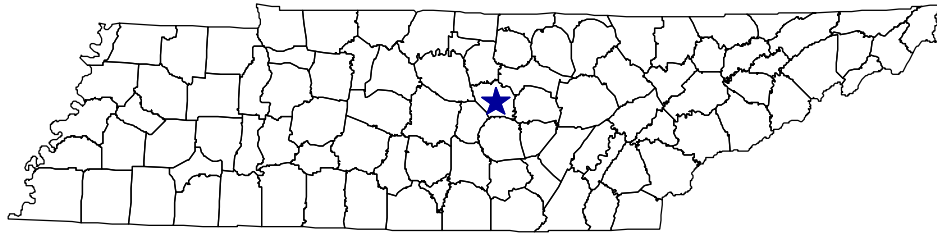
#### Healthcare Personnel Vaccinated (%)

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

## St. Thomas DeKalb Hospital, Smithville, DeKalb County

Medical School Affiliation: None

Bed Size Category: 50-99 beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2018-12/31/2018

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		
		Observed	Predicted		SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	N/A	N/A	N/A	N/A	N/A	0.76
	Adult/Pediatric Ward	0	0.0	143	N/A	N/A	0.63
CAUTI	Adult/Pediatric ICU	N/A	N/A	N/A	N/A	N/A	0.70
	Adult/Pediatric Ward	2	0.1	260	N/A	N/A	0.73
SSI	Colon surgery	N/A	N/A	N/A	N/A	N/A	0.79
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	0.78
LabID	MRSA bacteremia	0	0.0	1432	N/A	N/A	1.29
	C. difficile infection	0	0.3	1432	N/A	N/A	0.68

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

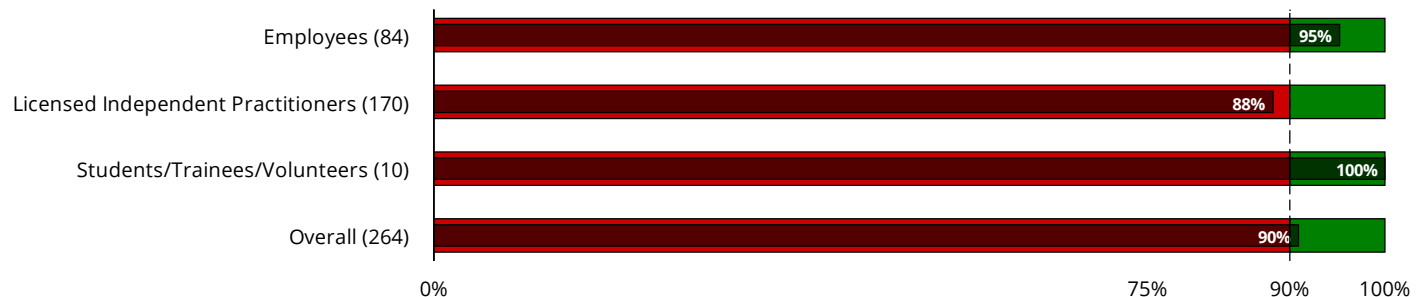
**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at St. Thomas DeKalb Hospital*

### Healthcare Personnel Influenza Vaccination - '2018/2019' Influenza Season

#### Healthcare Personnel Category (Total)



#### Healthcare Personnel Vaccinated (%)

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric ICUs

YR	N	OBS	PRE	CLD	SIR
2018	1	N/A	N/A	N/A	N/A
2017	1	N/A	N/A	N/A	N/A
2016	1	N/A	N/A	N/A	N/A
2015	1	N/A	N/A	N/A	N/A

N/A: Number of predicted infections <1; no SIR calculated

CLABSI - Adult/Pediatric Wards

YR	N	OBS	PRE	CLD	SIR
2018	1	0	0.0	143	N/A
2017	1	0	0.0	79	N/A
2016	1	0	0.0	169	N/A
2015	1	0	0.1	242	N/A

N/A: Number of predicted infections <1; no SIR calculated

Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICUs

YR	N	OBS	PRE	UCD	SIR
2018	1	N/A	N/A	N/A	N/A
2017	1	N/A	N/A	N/A	N/A
2016	1	0	0.0	79	N/A
2015	1	0	0.0	78	N/A

N/A: Number of predicted infections <1; no SIR calculated

CAUTI - Adult/Pediatric Wards

YR	N	OBS	PRE	UCD	SIR
2018	1	2	0.1	260	N/A
2017	1	0	0.1	219	N/A
2016	1	0	0.1	349	N/A
2015	1	1	0.2	537	N/A

N/A: Number of predicted infections <1; no SIR calculated

Surgical Site Infections (SSI)

SSI - Colon Surgery

YR	OBS	PRE	PROC	SIR
2018	N/A	N/A	N/A	N/A
2017	N/A	N/A	N/A	N/A
2016	N/A	N/A	N/A	N/A
2015	N/A	N/A	N/A	N/A

N/A: Number of predicted infections <1; no SIR calculated

SSI - Abdominal Hysterectomy

YR	OBS	PRE	PROC	SIR
2018	N/A	N/A	N/A	N/A
2017	N/A	N/A	N/A	N/A
2016	N/A	N/A	N/A	N/A
2015	N/A	N/A	N/A	N/A

N/A: Number of predicted infections <1; no SIR calculated

Healthcare Facility-Onset Laboratory Identified (LabID) Events

LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia

YR	OBS	PRE	PATD	SIR
2018	0	0.0	1432	N/A
2017	0	0.0	1526	N/A
2016	0	0.0	2561	N/A
2015	1	0.0	3349	N/A

N/A: Number of predicted infections <1; no SIR calculated

LabID - *C. difficile* Infection (CDI)

YR	OBS	PRE	PATD	SIR
2018	0	0.3	1432	N/A
2017	0	0.5	1526	N/A
2016	4	1.0	2561	3.9
2015	2	1.1	3349	1.8

N/A: Number of predicted infections <1; no SIR calculated

Data reported as of August 27, 2019

**YR** = reporting year; **N** = number of units reporting (CLABSI/CAUTI); **OBS** = observed number of infections  
**PRE** = statistically 'predicted' number of infections, based on NHSN national baseline data  
**SIR** = standardized infection ratio (observed/predicted number of infections)  
**CLD** = central line days; **UCD** = urinary catheter days; **PROC** = procedures performed; **PATD** = patient days;  
**N/A** = data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

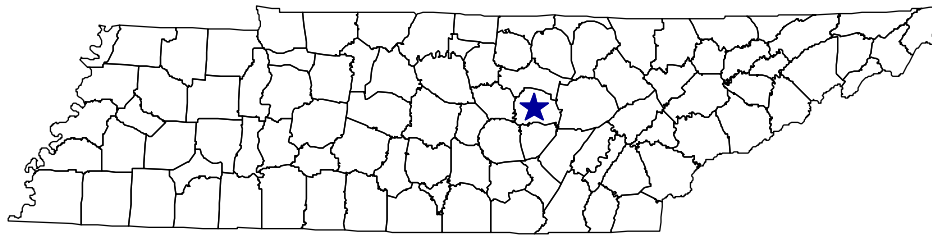
■ Significantly lower than NHSN SIR of 1  
 ■ Not significantly different from NHSN SIR of 1  
 ■ Significantly higher than NHSN SIR of 1  
 - - - 2018 TN SIR  
 - - - NHSN SIR=1



## St. Thomas Highlands Hospital, Sparta, White County

Medical School Affiliation: None

Bed Size Category: 50-99 beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2017-12/31/2017

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		
		Observed	Predicted		SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	N/A	N/A	N/A	N/A	N/A	0.85
	Adult/Pediatric Ward	0	0.0	67	N/A	N/A	0.68
CAUTI	Adult/Pediatric ICU	0	0.0	50	N/A	N/A	0.71
	Adult/Pediatric Ward	0	0.1	375	N/A	N/A	0.72
SSI	Colon surgery	N/A	N/A	N/A	N/A	N/A	0.83
	Abdominal hysterectomy	1	0.1	32	N/A	N/A	1.08
LabID	MRSA bacteremia	0	0.0	1571	N/A	N/A	1.09
	C. difficile infection	0	0.3	1571	N/A	N/A	0.83

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

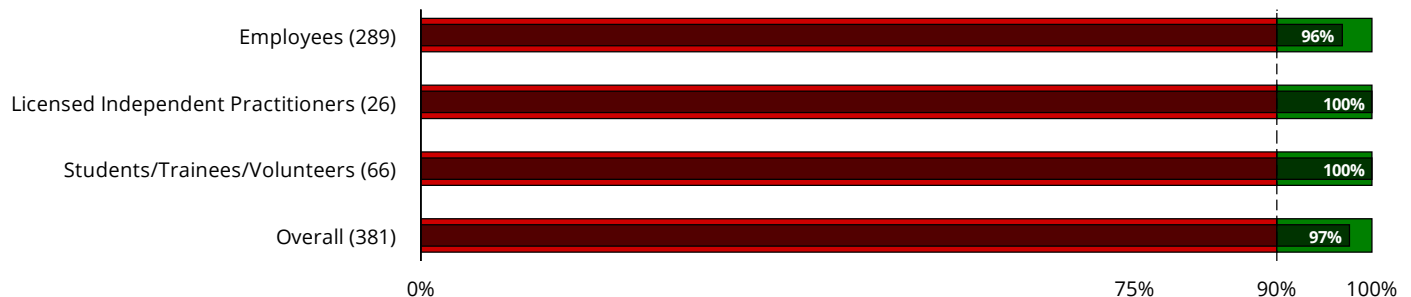
**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at St. Thomas Highlands Hospital*

### Healthcare Personnel Influenza Vaccination - '2017/2018' Influenza Season

#### Healthcare Personnel Category (Total)



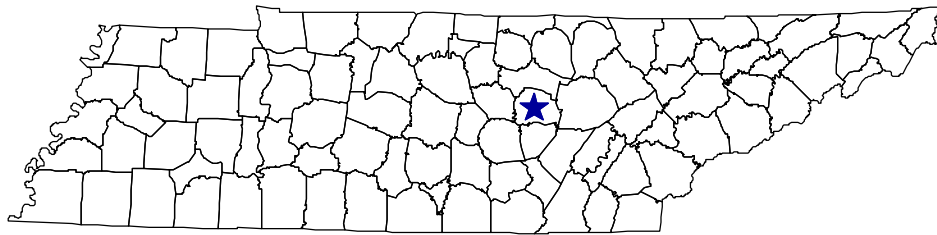
#### Healthcare Personnel Vaccinated (%)

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

## St. Thomas Highlands Hospital, Sparta, White County

Medical School Affiliation: None

Bed Size Category: <50 beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2018-12/31/2018

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		
		Observed	Predicted		SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	N/A	N/A	N/A	N/A	N/A	0.76
	Adult/Pediatric Ward	0	0.0	93	N/A	N/A	0.63
CAUTI	Adult/Pediatric ICU	N/A	N/A	N/A	N/A	N/A	0.70
	Adult/Pediatric Ward	0	0.2	409	N/A	N/A	0.73
SSI	Colon surgery	N/A	N/A	N/A	N/A	N/A	0.79
	Abdominal hysterectomy	0	0.2	40	N/A	N/A	0.78
LabID	MRSA bacteremia	0	0.0	1547	N/A	N/A	1.29
	C. difficile infection	0	0.3	1547	N/A	N/A	0.68

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

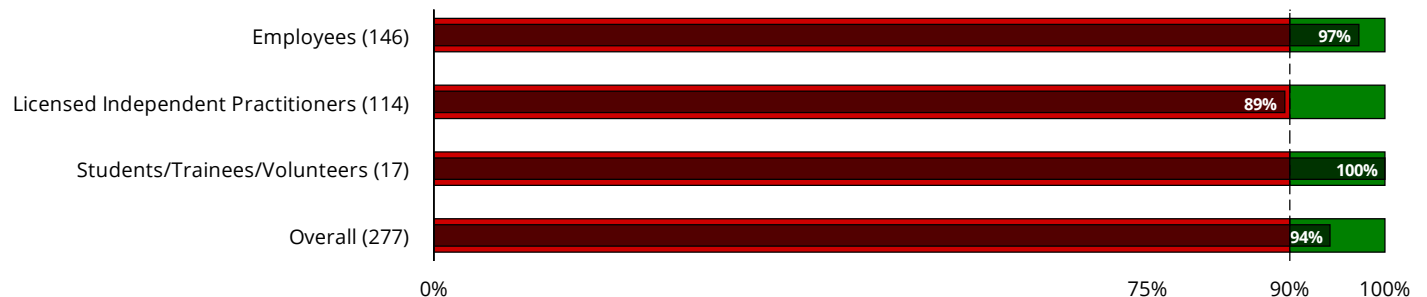
**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at St. Thomas Highlands Hospital*

### Healthcare Personnel Influenza Vaccination - '2018/2019' Influenza Season

#### Healthcare Personnel Category (Total)



#### Healthcare Personnel Vaccinated (%)

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric ICUs

YR	N	OBS	PRE	CLD	SIR
2018	1	N/A	N/A	N/A	N/A
2017	1	N/A	N/A	N/A	N/A
2016	1	N/A	N/A	N/A	N/A
2015	1	N/A	N/A	N/A	N/A

N/A: Number of predicted infections <1; no SIR calculated

CLABSI - Adult/Pediatric Wards

YR	N	OBS	PRE	CLD	SIR
2018	1	0	0.0	93	N/A
2017	1	0	0.0	67	N/A
2016	1	0	0.0	103	N/A
2015	1	0	0.0	105	N/A

N/A: Number of predicted infections <1; no SIR calculated

Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICUs

YR	N	OBS	PRE	UCD	SIR
2018	1	N/A	N/A	N/A	N/A
2017	1	0	0.0	50	N/A
2016	1	1	0.1	192	N/A
2015	1	0	0.1	224	N/A

N/A: Number of predicted infections <1; no SIR calculated

CAUTI - Adult/Pediatric Wards

YR	N	OBS	PRE	UCD	SIR
2018	1	0	0.2	409	N/A
2017	1	0	0.1	375	N/A
2016	1	0	0.3	697	N/A
2015	1	0	0.4	925	N/A

N/A: Number of predicted infections <1; no SIR calculated

Surgical Site Infections (SSI)

SSI - Colon Surgery

YR	OBS	PRE	PROC	SIR
2018	N/A	N/A	N/A	N/A
2017	N/A	N/A	N/A	N/A
2016	N/A	N/A	N/A	N/A
2015	N/A	N/A	N/A	N/A

N/A: Number of predicted infections <1; no SIR calculated

SSI - Abdominal Hysterectomy

YR	OBS	PRE	PROC	SIR
2018	0	0.2	40	N/A
2017	1	0.1	32	N/A
2016	0	0.2	36	N/A
2015	0	0.2	46	N/A

N/A: Number of predicted infections <1; no SIR calculated

Healthcare Facility-Onset Laboratory Identified (LabID) Events

LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia

YR	OBS	PRE	PATD	SIR
2018	0	0.0	1547	N/A
2017	0	0.0	1571	N/A
2016	0	0.0	1923	N/A
2015	0	0.0	2227	N/A

N/A: Number of predicted infections <1; no SIR calculated

LabID - *C. difficile* Infection (CDI)

YR	OBS	PRE	PATD	SIR
2018	0	0.3	1547	N/A
2017	0	0.3	1571	N/A
2016	1	0.4	1923	N/A
2015	0	0.5	2227	N/A

N/A: Number of predicted infections <1; no SIR calculated

Data reported as of August 27, 2019

YR = reporting year; N = number of units reporting (CLABSI/CAUTI); OBS = observed number of infections

PRE = statistically 'predicted' number of infections, based on NHSN national baseline data

SIR = standardized infection ratio (observed/predicted number of infections)

CLD = central line days; UCD = urinary catheter days; PROC = procedures performed; PATD = patient days;

N/A = data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

■ Significantly lower than NHSN SIR of 1

■ Not significantly different from NHSN SIR of 1

■ Significantly higher than NHSN SIR of 1

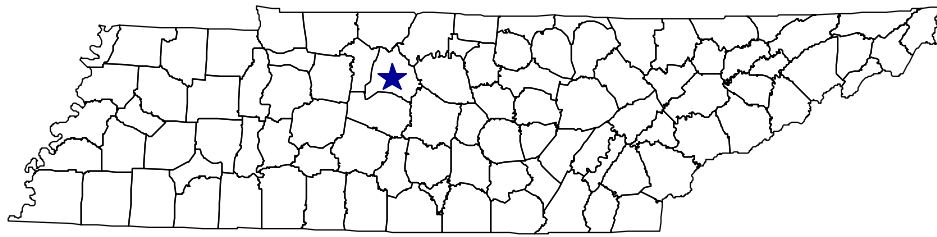
--- 2018 TN SIR

--- NHSN SIR=1

## St. Thomas Hospital for Specialty Surgery, Nashville, Davidson County

Medical School Affiliation: None

Bed Size Category: <50 beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2017-12/31/2017

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		
		Observed	Predicted		SIR*	95% CI	TN SIR
SSI	Colon surgery	N/A	N/A	N/A	N/A	N/A	0.83
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	1.08
LabID	MRSA bacteremia	0	0.0	2690	N/A	N/A	1.09
	C. difficile infection	0	0.4	2690	N/A	N/A	0.83

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

**N/A**: Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at St. Thomas Hospital for Specialty Surgery*

### Healthcare Personnel Influenza Vaccination - '2017/2018' Influenza Season

#### Healthcare Personnel Category (Total)



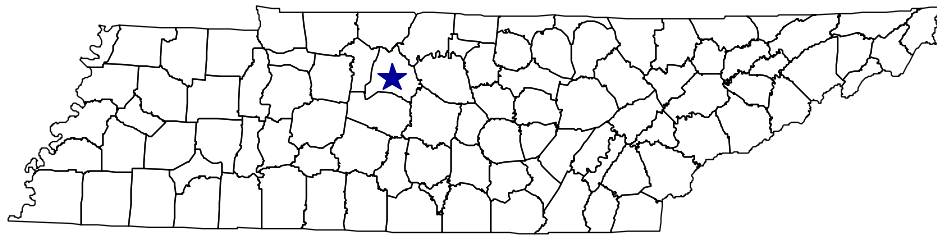
#### Healthcare Personnel Vaccinated (%)

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

## St. Thomas Hospital for Specialty Surgery, Nashville, Davidson County

Medical School Affiliation: None

Bed Size Category: <50 beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2018-12/31/2018

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		
		Observed	Predicted		SIR*	95% CI	TN SIR
SSI	Colon surgery	N/A	N/A	N/A	N/A	N/A	0.79
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	0.78
LabID	MRSA bacteremia	0	0.0	2766	N/A	N/A	1.29
	C. difficile infection	0	0.3	2766	N/A	N/A	0.68

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

**N/A**: Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at St. Thomas Hospital for Specialty Surgery*

### Healthcare Personnel Influenza Vaccination - '2018/2019' Influenza Season

#### Healthcare Personnel Category (Total)



#### Healthcare Personnel Vaccinated (%)

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

Surgical Site Infections (SSI)

SSI - Colon Surgery

YR	OBS	PRE	PROC	SIR
2018	N/A	N/A	N/A	N/A
2017	N/A	N/A	N/A	N/A
2016	N/A	N/A	N/A	N/A
2015	N/A	N/A	N/A	N/A

N/A: Number of predicted infections <1; no SIR calculated

SSI - Abdominal Hysterectomy

YR	OBS	PRE	PROC	SIR
2018	N/A	N/A	N/A	N/A
2017	N/A	N/A	N/A	N/A
2016	N/A	N/A	N/A	N/A
2015	N/A	N/A	N/A	N/A

N/A: Number of predicted infections <1; no SIR calculated

Healthcare Facility-Onset Laboratory Identified (LabID) Events

LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia

YR	OBS	PRE	PATD	SIR
2018	0	0.0	2766	N/A
2017	0	0.0	2690	N/A
2016	0	0.0	2439	N/A
2015	0	0.0	2199	N/A

N/A: Number of predicted infections <1; no SIR calculated

LabID - *C. difficile* Infection (CDI)

YR	OBS	PRE	PATD	SIR
2018	0	0.3	2766	N/A
2017	0	0.4	2690	N/A
2016	0	0.3	2439	N/A
2015	0	0.3	2199	N/A

N/A: Number of predicted infections <1; no SIR calculated

Data reported as of August 27, 2019

YR = reporting year; N = number of units reporting (CLABSI/CAUTI); OBS = observed number of infections

PRE = statistically 'predicted' number of infections, based on NHSN national baseline data

SIR = standardized infection ratio (observed/predicted number of infections)

CLD = central line days; UCD = urinary catheter days; PROC = procedures performed; PATD = patient days;

N/A = data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

■ Significantly lower than NHSN SIR of 1

■ Not significantly different from NHSN SIR of 1

■ Significantly higher than NHSN SIR of 1

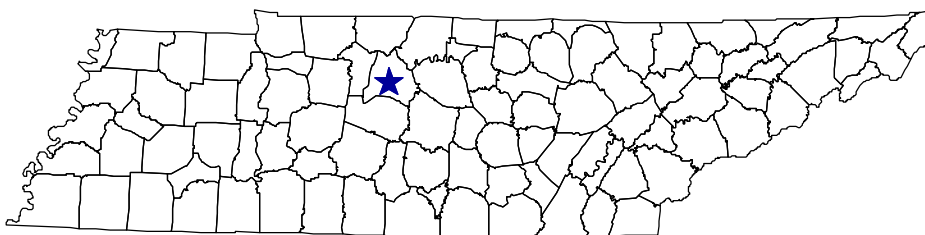
--- 2018 TN SIR

--- NHSN SIR=1

## St. Thomas Midtown (Baptist Hospital- Nashville), Nashville, Davidson County

Medical School Affiliation: Major teaching

Bed Size Category: 400+ beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2017-12/31/2017

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		
		Observed	Predicted		SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	5	5.9	5264	0.84	( 0.31, 1.87 )	0.85
	Neonatal ICU	1	1.7	1137	0.58	( 0.03, 2.84 )	0.75
	Adult/Pediatric Ward	6	5.4	5568	1.11	( 0.45, 2.30 )	0.68
CAUTI	Adult/Pediatric ICU	8	9.7	6346	0.82	( 0.38, 1.56 )	0.71
	Adult/Pediatric Ward	4	7.8	6667	0.51	( 0.16, 1.22 )	0.72
SSI	Colon surgery	8	9.9	333	0.81	( 0.37, 1.53 )	0.83
	Abdominal hysterectomy	6	4.2	697	1.40	( 0.57, 2.92 )	1.08
LabID	MRSA bacteremia	4	7.4	109812	0.53	( 0.17, 1.29 )	1.09
	C. difficile infection	26	53.7	87246	<b>0.48</b>	<b>( 0.32, 0.70 )</b>	0.83

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at St. Thomas Midtown (Baptist Hospital- Nashville)*

### Healthcare Personnel Influenza Vaccination - '2017/2018' Influenza Season

#### Healthcare Personnel Category (Total)



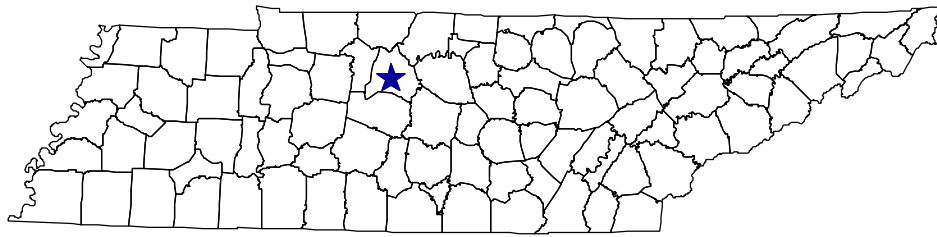
#### Healthcare Personnel Vaccinated (%)

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

## St. Thomas Midtown (Baptist Hospital- Nashville), Nashville, Davidson County

Medical School Affiliation: Major teaching

Bed Size Category: 400+ beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2018-12/31/2018

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		TN SIR
		Observed	Predicted		SIR*	95% CI	
CLABSI	Adult/Pediatric ICU	0	6.2	5506	<b>0.00</b>	<b>( 0.00, 0.48 )</b>	0.76
	Neonatal ICU	0	2.5	1661	0.00	( 0.00, 1.17 )	0.79
	Adult/Pediatric Ward	1	6.7	6964	<b>0.15</b>	<b>( 0.01, 0.73 )</b>	0.63
CAUTI	Adult/Pediatric ICU	5	9.5	6263	0.52	( 0.19, 1.16 )	0.70
	Adult/Pediatric Ward	2	8.8	7504	<b>0.23</b>	<b>( 0.04, 0.74 )</b>	0.73
SSI	Colon surgery	2	10.2	325	<b>0.20</b>	<b>( 0.03, 0.65 )</b>	0.79
	Abdominal hysterectomy	6	4.8	797	1.25	( 0.51, 2.59 )	0.78
LabID	MRSA bacteremia	7	9.4	114608	0.74	( 0.32, 1.47 )	1.29
	C. difficile infection	8	41.2	87683	<b>0.19</b>	<b>( 0.09, 0.37 )</b>	0.68

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

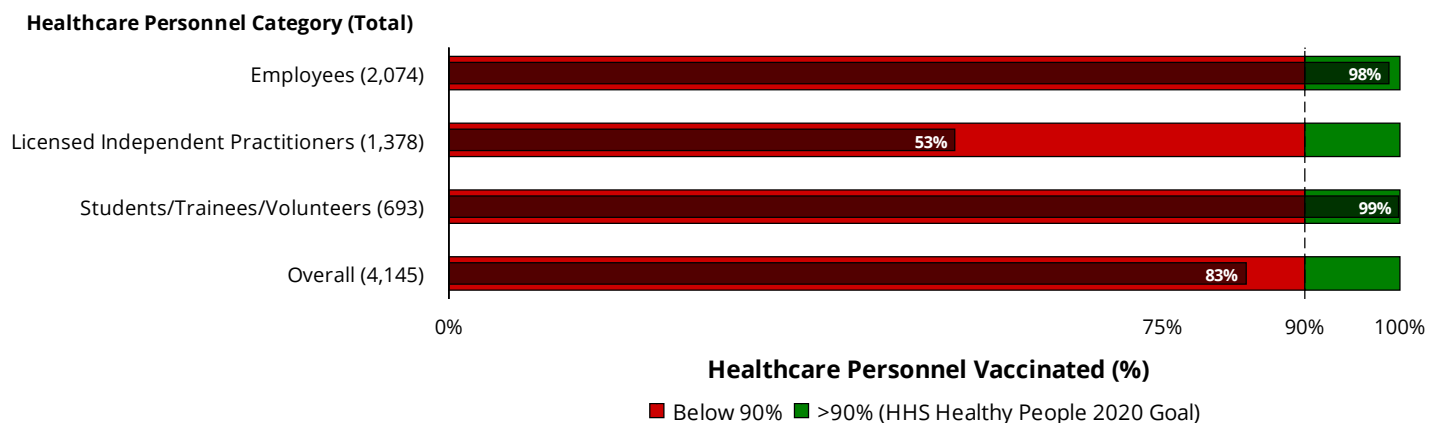
**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at St. Thomas Midtown (Baptist Hospital- Nashville)*

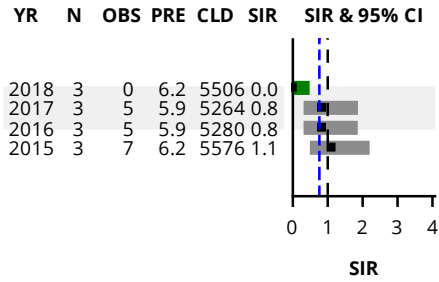
### Healthcare Personnel Influenza Vaccination - '2018/2019' Influenza Season



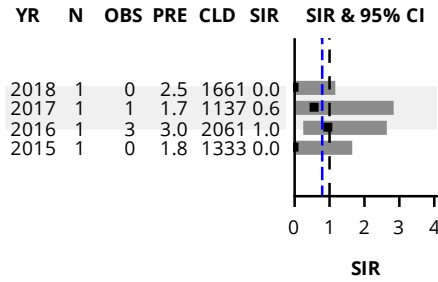


Central Line-Associated Bloodstream Infections (CLABSI)

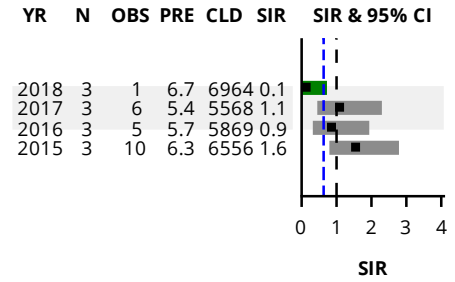
CLABSI - Adult/Pediatric ICUs



CLABSI - Neonatal ICUs

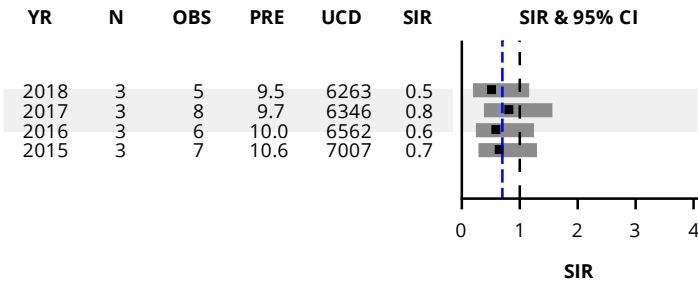


CLABSI - Adult/Pediatric Wards

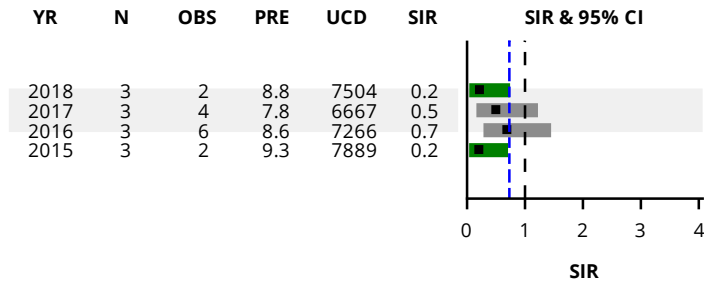


Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICUs

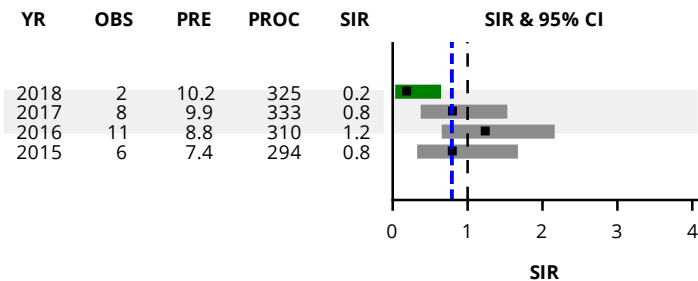


CAUTI - Adult/Pediatric Wards

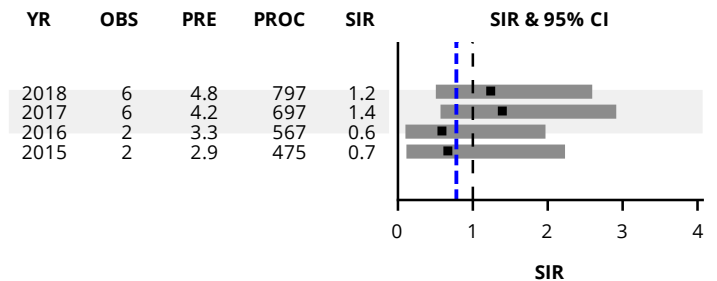


Surgical Site Infections (SSI)

SSI - Colon Surgery

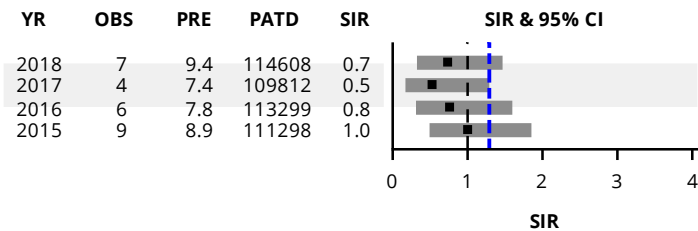


SSI - Abdominal Hysterectomy

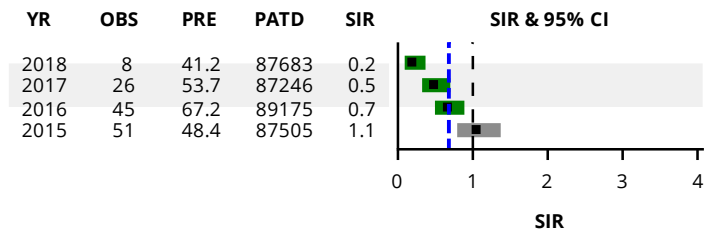


Healthcare Facility-Onset Laboratory Identified (LabID) Events

LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia



LabID - *C. difficile* Infection (CDI)



Data reported as of August 27, 2019

YR = reporting year; N = number of units reporting (CLABSI/CAUTI); OBS = observed number of infections

PRE = statistically 'predicted' number of infections, based on NHSN national baseline data

SIR = standardized infection ratio (observed/predicted number of infections)

CLD = central line days; UCD = urinary catheter days; PROC = procedures performed; PATD = patient days;

N/A = data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

■ Significantly lower than NHSN SIR of 1

■ Not significantly different from NHSN SIR of 1

■ Significantly higher than NHSN SIR of 1

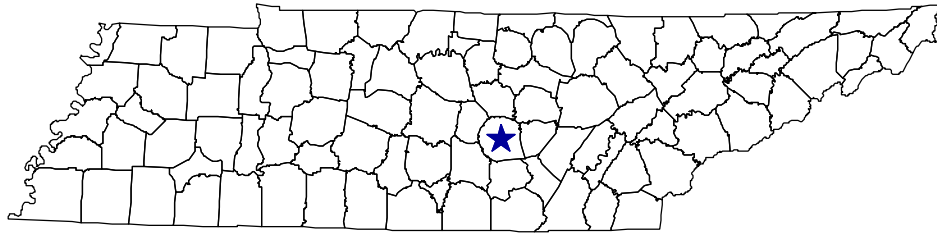
--- 2018 TN SIR

--- NHSN SIR=1

**St. Thomas River Park Hospital, Mc Minnville, Warren County**

Medical School Affiliation: None

Bed Size Category: <50 beds



**Healthcare-Associated Infections (HAI) Summary**

**Standardized Infection Ratio (SIR) by Infection Type, 01/01/2017-12/31/2017**

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days/Procedures Performed/Patient Days	SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	0	0.1	172	N/A	N/A	0.85
	Adult/Pediatric Ward	0	0.1	288	N/A	N/A	0.68
CAUTI	Adult/Pediatric ICU	0	0.4	732	N/A	N/A	0.71
	Adult/Pediatric Ward	0	0.4	956	N/A	N/A	0.72
SSI	Colon surgery	N/A	N/A	N/A	N/A	N/A	0.83
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	1.08
LabID	MRSA bacteremia	1	0.4	8250	N/A	N/A	1.09
	C. difficile infection	1	3.2	8048	0.31	( 0.02, 1.54 )	0.83

Green highlighting indicates an SIR significantly LOWER than the 2015 national baseline

Red highlighting indicates an SIR significantly HIGHER than the 2015 national baseline

N/A: Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at St. Thomas River Park Hospital*

**Healthcare Personnel Influenza Vaccination - '2017/2018' Influenza Season**

**Healthcare Personnel Category (Total)**



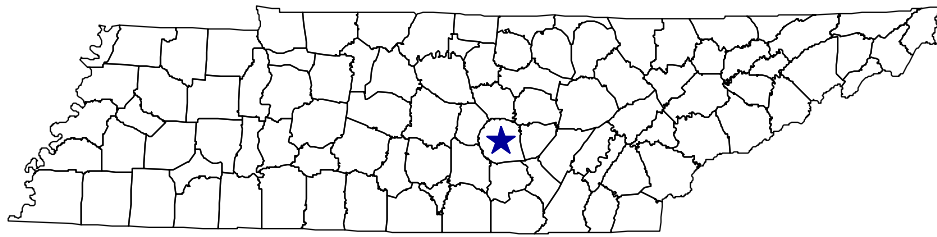
**Healthcare Personnel Vaccinated (%)**

Below 90% >90% (HHS Healthy People 2020 Goal)

## St. Thomas River Park Hospital, Mc Minnville, Warren County

Medical School Affiliation: None

Bed Size Category: 50-99 beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2018-12/31/2018

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		
		Observed	Predicted		SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	0	0.1	178	N/A	N/A	0.76
	Adult/Pediatric Ward	0	0.1	235	N/A	N/A	0.63
CAUTI	Adult/Pediatric ICU	0	0.4	818	N/A	N/A	0.70
	Adult/Pediatric Ward	0	0.5	1041	N/A	N/A	0.73
SSI	Colon surgery	N/A	N/A	N/A	N/A	N/A	0.79
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	0.78
LabID	MRSA bacteremia	1	0.3	7199	N/A	N/A	1.29
	C. difficile infection	2	2.7	6842	0.73	( 0.12, 2.43 )	0.68

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

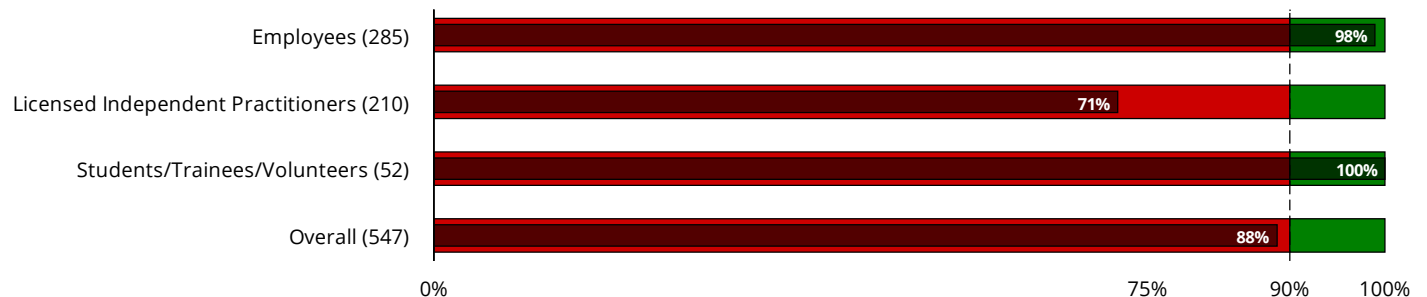
**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at St. Thomas River Park Hospital*

### Healthcare Personnel Influenza Vaccination - '2018/2019' Influenza Season

#### Healthcare Personnel Category (Total)



#### Healthcare Personnel Vaccinated (%)

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric ICUs

YR	N	OBS	PRE	CLD	SIR
2018	1	0	0.1	178	N/A
2017	1	0	0.1	172	N/A
2016	1	0	0.0	128	N/A
2015	1	0	0.1	270	N/A

N/A: Number of predicted infections <1; no SIR calculated

CLABSI - Adult/Pediatric Wards

YR	N	OBS	PRE	CLD	SIR
2018	1	0	0.1	235	N/A
2017	1	0	0.1	288	N/A
2016	1	0	0.1	305	N/A
2015	1	0	0.2	427	N/A

N/A: Number of predicted infections <1; no SIR calculated

Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICUs

YR	N	OBS	PRE	UCD	SIR
2018	1	0	0.4	818	N/A
2017	1	0	0.4	732	N/A
2016	1	1	0.3	539	N/A
2015	1	0	0.3	698	N/A

N/A: Number of predicted infections <1; no SIR calculated

CAUTI - Adult/Pediatric Wards

YR	N	OBS	PRE	UCD	SIR
2018	1	0	0.5	1041	N/A
2017	1	0	0.4	956	N/A
2016	1	0	0.4	832	N/A
2015	1	0	0.5	1149	N/A

N/A: Number of predicted infections <1; no SIR calculated

Surgical Site Infections (SSI)

SSI - Colon Surgery

YR	OBS	PRE	PROC	SIR
2018	N/A	N/A	N/A	N/A
2017	N/A	N/A	N/A	N/A
2016	N/A	N/A	N/A	N/A
2015	N/A	N/A	N/A	N/A

N/A: Number of predicted infections <1; no SIR calculated

SSI - Abdominal Hysterectomy

YR	OBS	PRE	PROC	SIR
2018	N/A	N/A	N/A	N/A
2017	N/A	N/A	N/A	N/A
2016	N/A	N/A	N/A	N/A
2015	N/A	N/A	N/A	N/A

N/A: Number of predicted infections <1; no SIR calculated

Healthcare Facility-Onset Laboratory Identified (LabID) Events

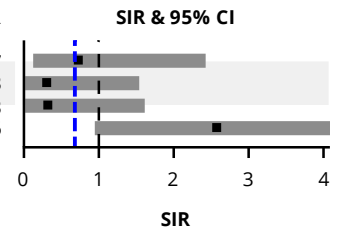
LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia

YR	OBS	PRE	PATD	SIR
2018	1	0.3	7199	N/A
2017	1	0.4	8250	N/A
2016	0	0.3	7320	N/A
2015	0	0.2	4109	N/A

N/A: Number of predicted infections <1; no SIR calculated

LabID - *C. difficile* Infection (CDI)

YR	OBS	PRE	PATD	SIR
2018	2	2.7	6842	0.7
2017	1	3.2	8048	0.3
2016	1	3.0	7280	0.3
2015	5	1.9	4109	2.6



Data reported as of August 27, 2019

YR = reporting year; N = number of units reporting (CLABSI/CAUTI); OBS = observed number of infections

PRE = statistically 'predicted' number of infections, based on NHSN national baseline data

SIR = standardized infection ratio (observed/predicted number of infections)

CLD = central line days; UCD = urinary catheter days; PROC = procedures performed; PATD = patient days;

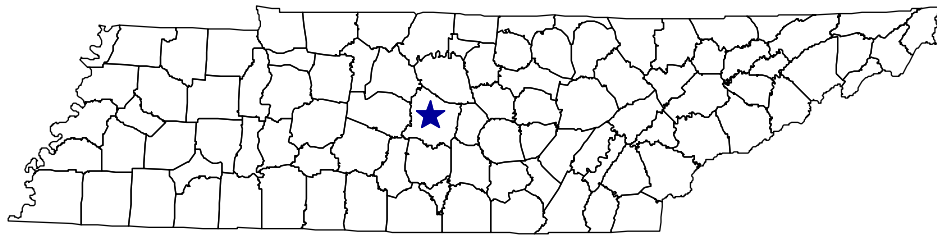
N/A = data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

- Significantly lower than NHSN SIR of 1
- Not significantly different from NHSN SIR of 1
- Significantly higher than NHSN SIR of 1
- - - 2018 TN SIR
- - - NHSN SIR=1

## St. Thomas Rutherford Hospital (Middle TN Med. Ctr), Murfreesboro, Rutherford County

Medical School Affiliation: Major teaching

Bed Size Category: 100-399 beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2017-12/31/2017

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		TN SIR
		Observed	Predicted		SIR*	95% CI	
CLABSI	Adult/Pediatric ICU	4	3.6	3253	1.09	( 0.35, 2.63 )	0.85
	Neonatal ICU	0	0.1	152	<b>N/A</b>	<b>N/A</b>	0.75
	Adult/Pediatric Ward	3	7.3	7499	0.41	( 0.10, 1.12 )	0.68
CAUTI	Adult/Pediatric ICU	6	6.3	4874	0.95	( 0.38, 1.97 )	0.71
	Adult/Pediatric Ward	7	13.5	11681	0.52	( 0.23, 1.02 )	0.72
SSI	Colon surgery	0	3.2	142	<b>0.00</b>	<b>( 0.00, 0.92 )</b>	0.83
	Abdominal hysterectomy	1	0.5	86	<b>N/A</b>	<b>N/A</b>	1.08
LabID	MRSA bacteremia	5	7.0	81809	0.71	( 0.26, 1.58 )	1.09
	C. difficile infection	35	45.3	74420	0.77	( 0.55, 1.06 )	0.83

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

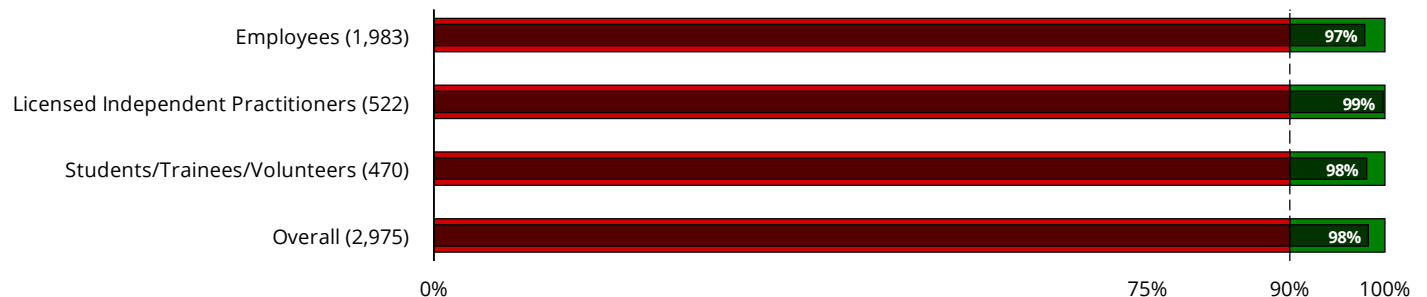
**N/A**: Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at St. Thomas Rutherford Hospital (Middle TN Med. Ctr)*

### Healthcare Personnel Influenza Vaccination - '2017/2018' Influenza Season

#### Healthcare Personnel Category (Total)



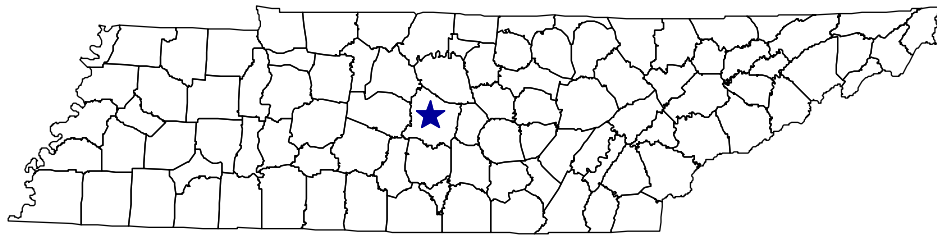
#### Healthcare Personnel Vaccinated (%)

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

**St. Thomas Rutherford Hospital (Middle TN Med. Ctr), Murfreesboro, Rutherford County**

Medical School Affiliation: Major teaching

Bed Size Category: 100-399 beds



**Healthcare-Associated Infections (HAI) Summary**

**Standardized Infection Ratio (SIR) by Infection Type, 01/01/2018-12/31/2018**

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		TN SIR
		Observed	Predicted		SIR*	95% CI	
CLABSI	Adult/Pediatric ICU	4	3.5	3166	1.12	( 0.36, 2.70 )	0.76
	Neonatal ICU	0	0.1	203	N/A	N/A	0.79
	Adult/Pediatric Ward	3	7.8	8034	0.38	( 0.10, 1.04 )	0.63
CAUTI	Adult/Pediatric ICU	2	6.0	4666	0.33	( 0.06, 1.09 )	0.70
	Adult/Pediatric Ward	3	12.7	10966	<b>0.24</b>	<b>( 0.06, 0.64 )</b>	0.73
SSI	Colon surgery	3	4.3	203	0.68	( 0.17, 1.86 )	0.79
	Abdominal hysterectomy	0	0.8	148	N/A	N/A	0.78
LabID	MRSA bacteremia	7	7.2	79665	0.97	( 0.42, 1.92 )	1.29
	C. difficile infection	17	34.0	69978	<b>0.50</b>	<b>( 0.30, 0.78 )</b>	0.68

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

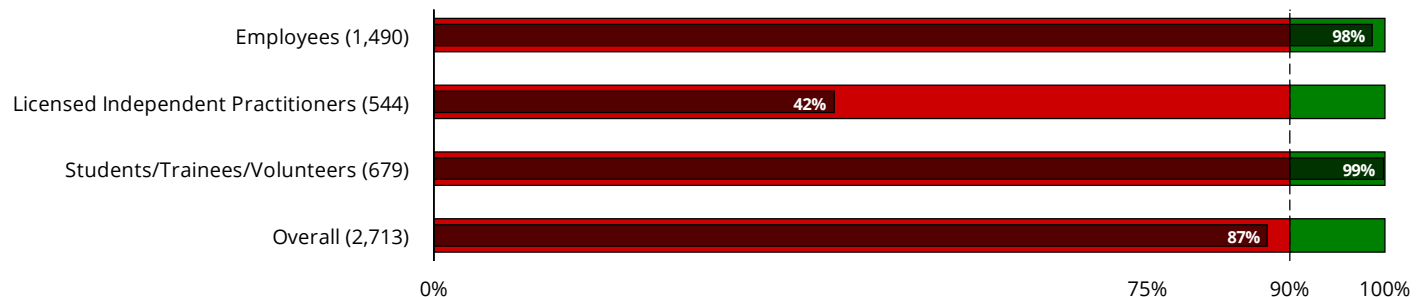
**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at St. Thomas Rutherford Hospital (Middle TN Med. Ctr)*

**Healthcare Personnel Influenza Vaccination - '2018/2019' Influenza Season**

**Healthcare Personnel Category (Total)**

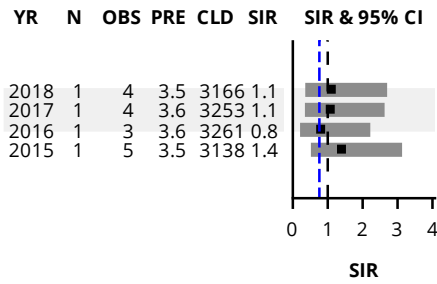


**Healthcare Personnel Vaccinated (%)**

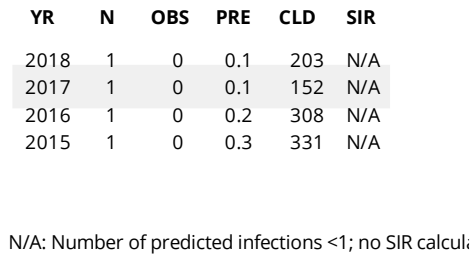
■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

Central Line-Associated Bloodstream Infections (CLABSI)

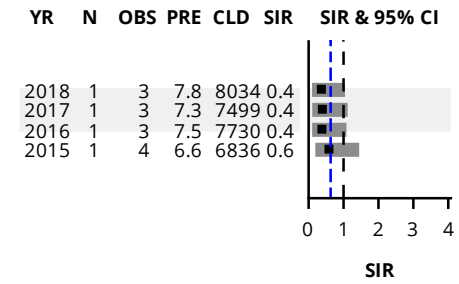
CLABSI - Adult/Pediatric ICUs



CLABSI - Neonatal ICUs

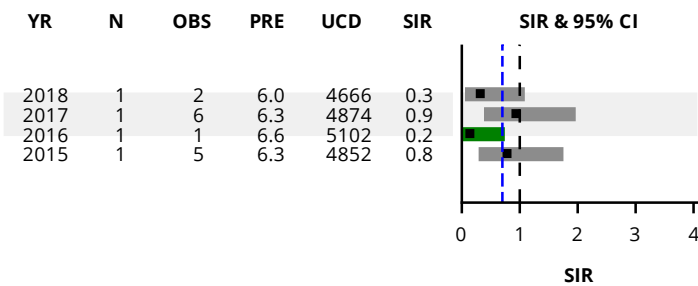


CLABSI - Adult/Pediatric Wards

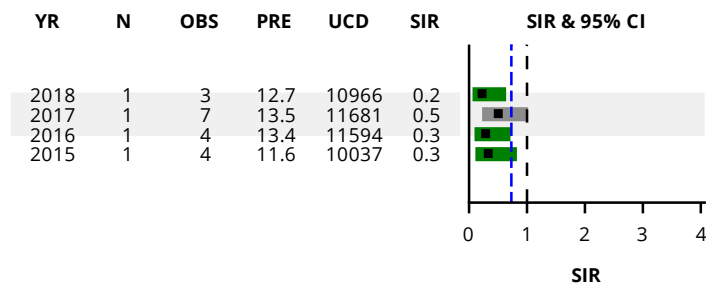


Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICUs

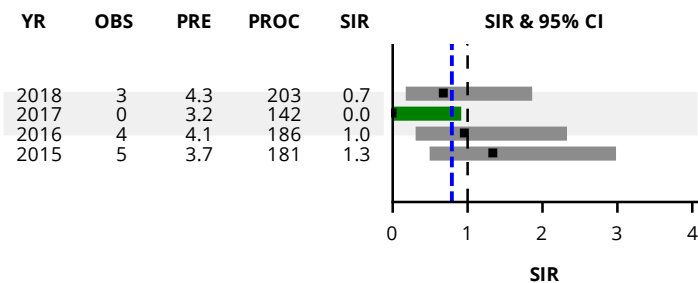


CAUTI - Adult/Pediatric Wards

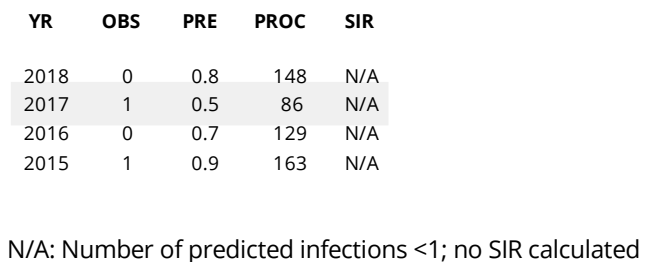


Surgical Site Infections (SSI)

SSI - Colon Surgery

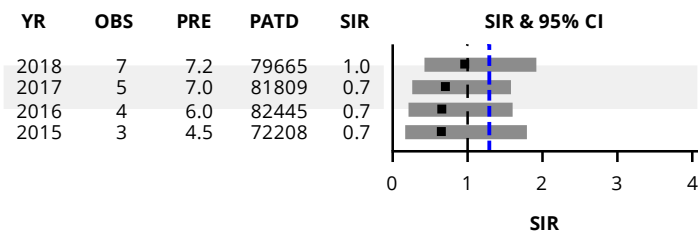


SSI - Abdominal Hysterectomy

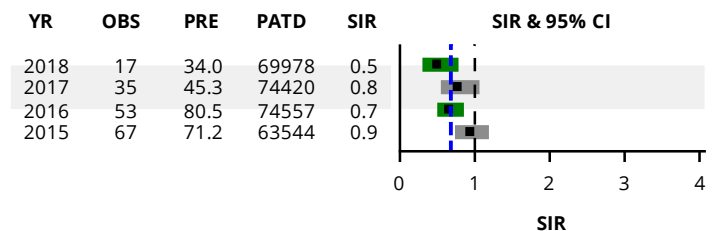


Healthcare Facility-Onset Laboratory Identified (LabID) Events

LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia



LabID - *C. difficile* Infection (CDI)



Data reported as of August 27, 2019

YR = reporting year; N = number of units reporting (CLABSI/CAUTI); OBS = observed number of infections

PRE = statistically 'predicted' number of infections, based on NHSN national baseline data

SIR = standardized infection ratio (observed/predicted number of infections)

CLD = central line days; UCD = urinary catheter days; PROC = procedures performed; PATD = patient days;

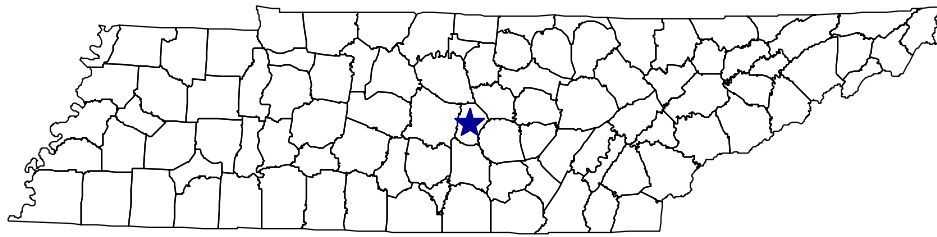
N/A = data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

- Significantly lower than NHSN SIR of 1
- Not significantly different from NHSN SIR of 1
- Significantly higher than NHSN SIR of 1
- - - 2018 TN SIR
- - - NHSN SIR=1

## St. Thomas Stones River Hospital, Woodbury, Cannon County

Medical School Affiliation: None

Bed Size Category: <50 beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2017-12/31/2017

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		
		Observed	Predicted		SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric Ward	N/A	N/A	N/A	N/A	N/A	0.68
CAUTI	Adult/Pediatric Ward	0	0.1	242	N/A	N/A	0.72
LabID	MRSA bacteremia	0	0.0	1106	N/A	N/A	1.09
	C. difficile infection	1	0.2	1106	N/A	N/A	0.83

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at St. Thomas Stones River Hospital*

### Healthcare Personnel Influenza Vaccination - '2017/2018' Influenza Season

#### Healthcare Personnel Category (Total)



#### Healthcare Personnel Vaccinated (%)

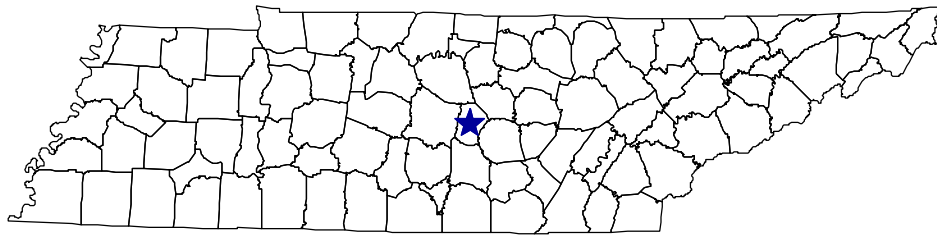
■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)



## St. Thomas Stones River Hospital, Woodbury, Cannon County

Medical School Affiliation: None

Bed Size Category: <50 beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2018-12/31/2018

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		
		Observed	Predicted		SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric Ward	N/A	N/A	N/A	N/A	N/A	0.63
CAUTI	Adult/Pediatric Ward	0	0.1	207	N/A	N/A	0.73
LabID	MRSA bacteremia	0	0.0	1865	N/A	N/A	1.29
	C. difficile infection	0	0.4	1865	N/A	N/A	0.68

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

**N/A**: Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at St. Thomas Stones River Hospital*

### Healthcare Personnel Influenza Vaccination - '2018/2019' Influenza Season

#### Healthcare Personnel Category (Total)



#### Healthcare Personnel Vaccinated (%)

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric Wards

YR	N	OBS	PRE	CLD	SIR
2018	1	N/A	N/A	N/A	N/A
2017	1	N/A	N/A	N/A	N/A
2016	1	0	0.1	210	N/A
2015	1	0	0.0	114	N/A

N/A: Number of predicted infections <1; no SIR calculated

Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric Wards

YR	N	OBS	PRE	UCD	SIR
2018	1	0	0.1	207	N/A
2017	1	0	0.1	242	N/A
2016	1	0	0.2	469	N/A
2015	1	0	0.2	482	N/A

N/A: Number of predicted infections <1; no SIR calculated

Healthcare Facility-Onset Laboratory Identified (LabID) Events

LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia

YR	OBS	PRE	PATD	SIR
2018	0	0.0	1865	N/A
2017	0	0.0	1106	N/A
2016	0	0.1	4221	N/A
2015	0	0.0	1879	N/A

N/A: Number of predicted infections <1; no SIR calculated

LabID - *C. difficile* Infection (CDI)

YR	OBS	PRE	PATD	SIR
2018	0	0.4	1865	N/A
2017	1	0.2	1106	N/A
2016	0	1.1	4221	0.0
2015	0	0.8	1879	N/A

N/A: Number of predicted infections <1; no SIR calculated

Data reported as of August 27, 2019

YR = reporting year; N = number of units reporting (CLABSI/CAUTI); OBS = observed number of infections

PRE = statistically 'predicted' number of infections, based on NHSN national baseline data

SIR = standardized infection ratio (observed/predicted number of infections)

CLD = central line days; UCD = urinary catheter days; PROC = procedures performed; PATD = patient days;

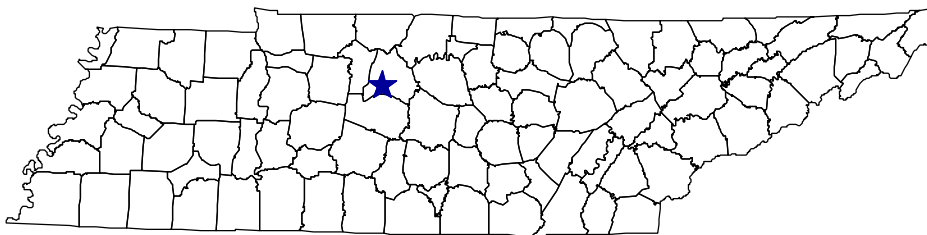
N/A = data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

- Significantly lower than NHSN SIR of 1
- Not significantly different from NHSN SIR of 1
- Significantly higher than NHSN SIR of 1
- 2018 TN SIR
- NHSN SIR=1

## St. Thomas West Hospital, Nashville, Davidson County

Medical School Affiliation: Major teaching

Bed Size Category: 100-399 beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2017-12/31/2017

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		TN SIR
		Observed	Predicted		SIR*	95% CI	
CLABSI	Adult/Pediatric ICU	9	10.5	9392	0.85	( 0.41, 1.56 )	0.85
	Adult/Pediatric Ward	2	12.1	12480	<b>0.16</b>	<b>( 0.03, 0.54 )</b>	0.68
CAUTI	Adult/Pediatric ICU	4	12.8	9834	<b>0.31</b>	<b>( 0.10, 0.75 )</b>	0.71
	Adult/Pediatric Ward	12	8.0	6948	1.48	( 0.80, 2.52 )	0.72
SSI	Colon surgery	10	6.2	272	1.59	( 0.81, 2.84 )	0.83
	Abdominal hysterectomy	2	0.8	116	<b>N/A</b>	<b>N/A</b>	1.08
LabID	MRSA bacteremia	8	7.1	96228	1.12	( 0.52, 2.13 )	1.09
	C. difficile infection	43	62.0	96228	<b>0.69</b>	<b>( 0.51, 0.93 )</b>	0.83

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at St. Thomas West Hospital*

### Healthcare Personnel Influenza Vaccination - '2017/2018' Influenza Season

#### Healthcare Personnel Category (Total)



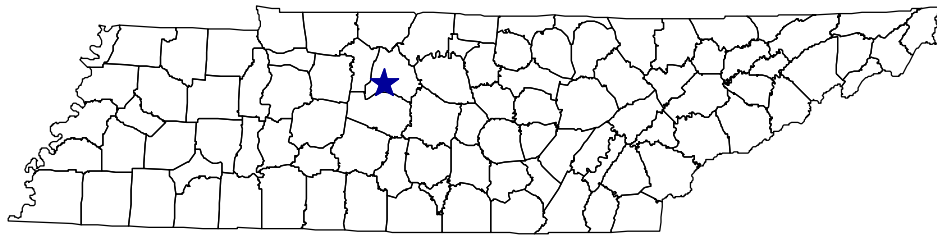
#### Healthcare Personnel Vaccinated (%)

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

## St. Thomas West Hospital, Nashville, Davidson County

Medical School Affiliation: Major teaching

Bed Size Category: 400+ beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2018-12/31/2018

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		
		Observed	Predicted		SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	6	11.0	9815	0.54	( 0.22, 1.13 )	0.76
	Adult/Pediatric Ward	7	14.2	14614	<b>0.49</b>	<b>( 0.22, 0.97 )</b>	0.63
CAUTI	Adult/Pediatric ICU	10	12.9	9964	0.77	( 0.39, 1.37 )	0.70
	Adult/Pediatric Ward	9	8.2	7074	1.09	( 0.53, 2.00 )	0.73
SSI	Colon surgery	7	5.4	244	1.28	( 0.56, 2.54 )	0.79
	Abdominal hysterectomy	0	0.6	93	<b>N/A</b>	<b>N/A</b>	0.78
LabID	MRSA bacteremia	10	7.2	94210	1.38	( 0.70, 2.47 )	1.29
	C. difficile infection	18	49.4	94210	<b>0.36</b>	<b>( 0.22, 0.56 )</b>	0.68

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

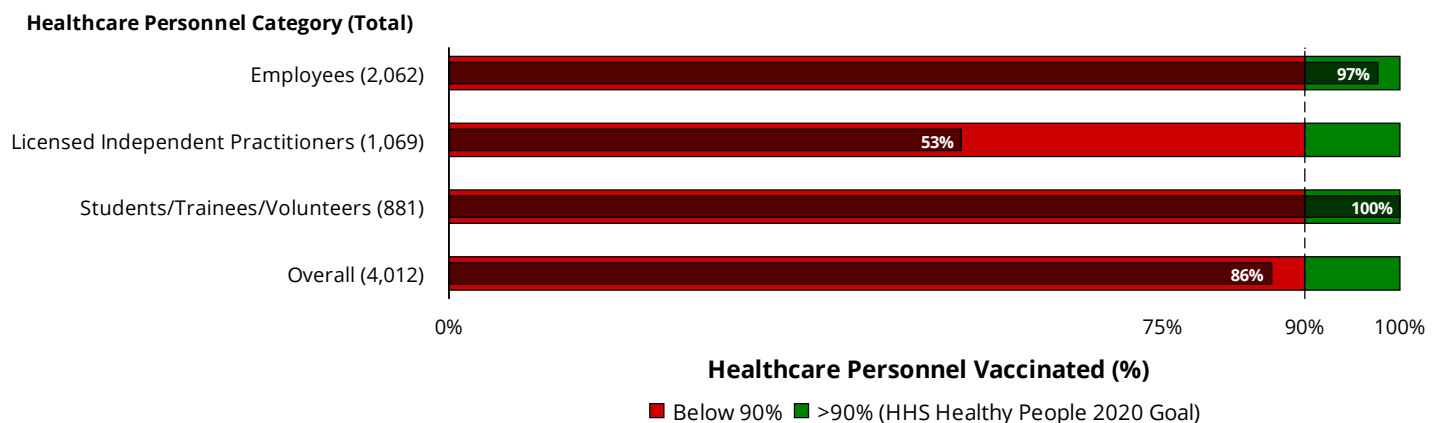
**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

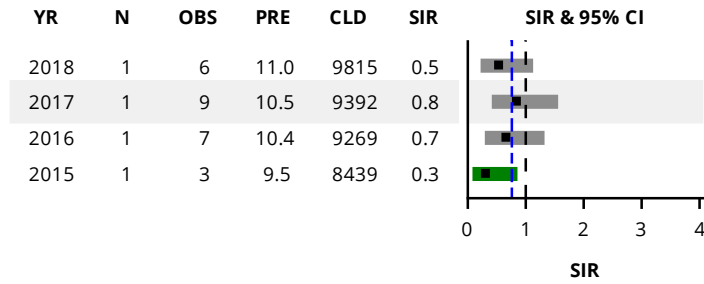
*See page 3 for more detailed information about HAIs at St. Thomas West Hospital*

### Healthcare Personnel Influenza Vaccination - '2018/2019' Influenza Season

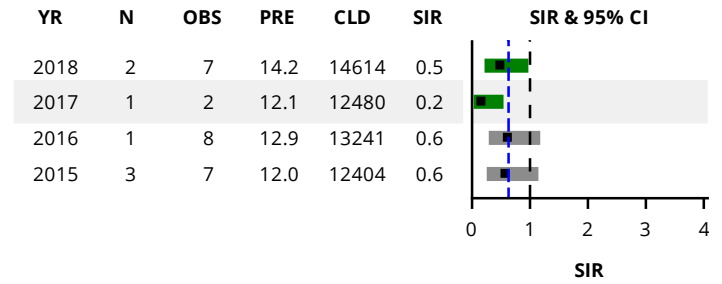


Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric ICUs

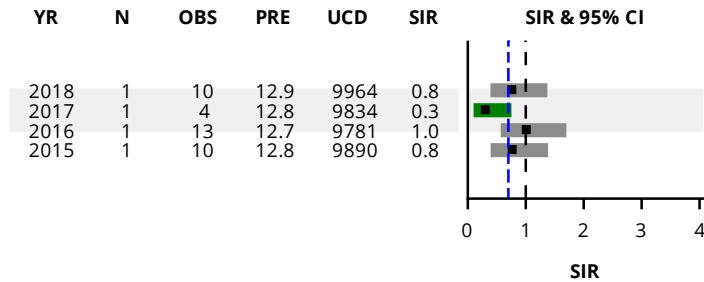


CLABSI - Adult/Pediatric Wards

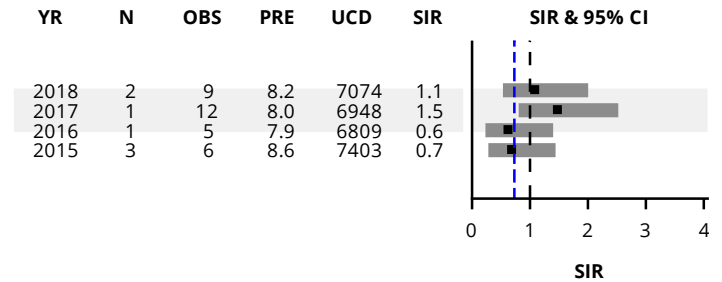


Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICUs

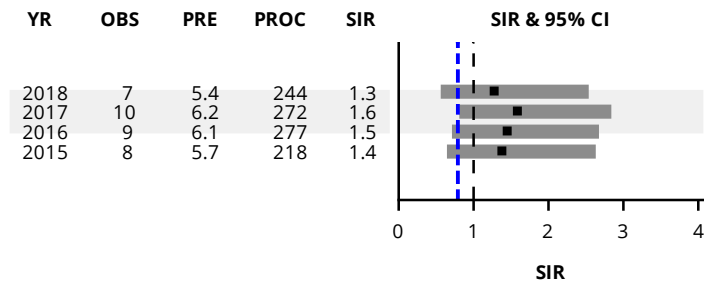


CAUTI - Adult/Pediatric Wards



Surgical Site Infections (SSI)

SSI - Colon Surgery



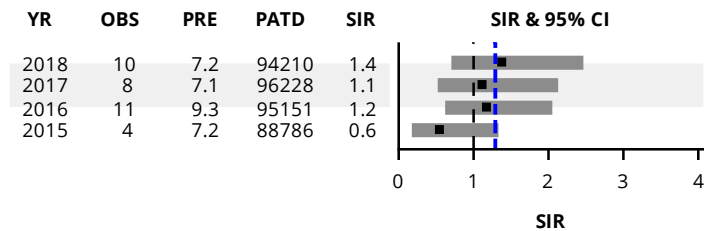
SSI - Abdominal Hysterectomy

YR	OBS	PRE	PROC	SIR
2018	0	0.6	93	N/A
2017	2	0.8	116	N/A
2016	3	0.9	138	N/A
2015	2	0.9	141	N/A

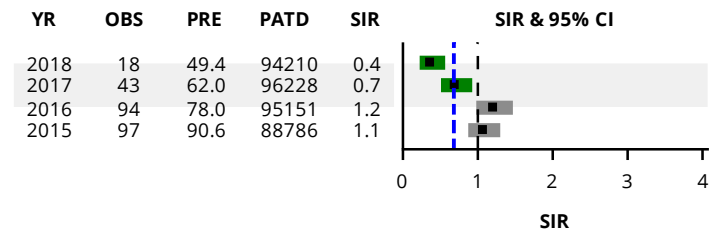
N/A: Number of predicted infections <1; no SIR calculated

Healthcare Facility-Onset Laboratory Identified (LabID) Events

LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia



LabID - *C. difficile* Infection (CDI)



Data reported as of August 27, 2019

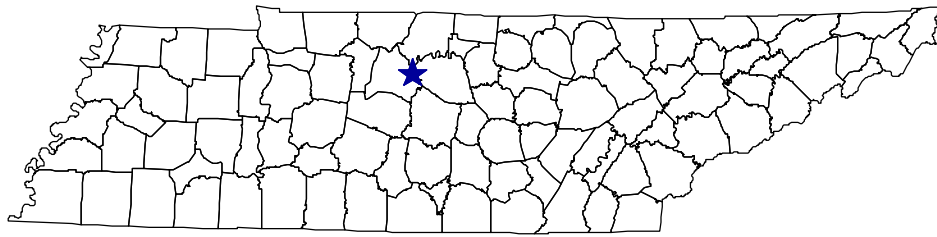
YR = reporting year; N = number of units reporting (CLABSI/CAUTI); OBS = observed number of infections  
 PRE = statistically 'predicted' number of infections, based on NHSN national baseline data  
 SIR = standardized infection ratio (observed/predicted number of infections)  
 CLD = central line days; UCD = urinary catheter days; PROC = procedures performed; PATD = patient days;  
 N/A = data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

■ Significantly lower than NHSN SIR of 1  
 ■ Not significantly different from NHSN SIR of 1  
 ■ Significantly higher than NHSN SIR of 1  
 - - - 2018 TN SIR  
 - - - NHSN SIR=1

## Summit Medical Center, Hermitage, Davidson County

Medical School Affiliation: Undergraduate teaching

Bed Size Category: 100-399 beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2017-12/31/2017

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		
		Observed	Predicted		SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	1	2.3	2677	0.43	( 0.02, 2.12 )	0.85
	Neonatal ICU	0	0.1	223	<b>N/A</b>	<b>N/A</b>	0.75
	Adult/Pediatric Ward	2	1.1	1521	1.75	( 0.29, 5.79 )	0.68
CAUTI	Adult/Pediatric ICU	1	4.0	3762	0.25	( 0.01, 1.21 )	0.71
	Adult/Pediatric Ward	2	1.1	1411	1.77	( 0.30, 5.85 )	0.72
SSI	Colon surgery	4	2.0	108	1.95	( 0.62, 4.70 )	0.83
	Abdominal hysterectomy	0	0.4	75	<b>N/A</b>	<b>N/A</b>	1.08
LabID	MRSA bacteremia	4	3.3	55852	1.19	( 0.38, 2.88 )	1.09
	C. difficile infection	24	41.4	52281	<b>0.58</b>	<b>( 0.38, 0.85 )</b>	0.83

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

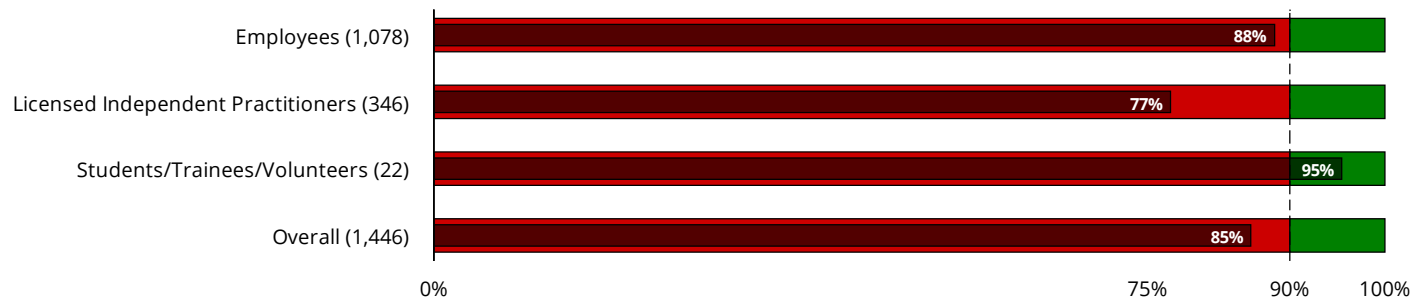
**N/A**: Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at Summit Medical Center*

### Healthcare Personnel Influenza Vaccination - '2017/2018' Influenza Season

#### Healthcare Personnel Category (Total)



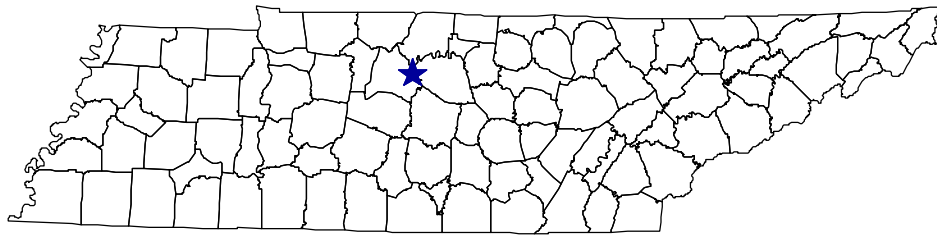
#### Healthcare Personnel Vaccinated (%)

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

## Summit Medical Center, Hermitage, Davidson County

Medical School Affiliation: Undergraduate teaching

Bed Size Category: 100-399 beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2018-12/31/2018

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		TN SIR
		Observed	Predicted		SIR*	95% CI	
CLABSI	Adult/Pediatric ICU	3	2.2	2594	1.33	( 0.34, 3.63 )	0.76
	Neonatal ICU	0	0.0	113	N/A	N/A	0.79
	Adult/Pediatric Ward	1	0.8	1153	N/A	N/A	0.63
CAUTI	Adult/Pediatric ICU	6	3.7	3427	1.62	( 0.66, 3.37 )	0.70
	Adult/Pediatric Ward	0	0.9	1129	N/A	N/A	0.73
SSI	Colon surgery	1	1.6	91	0.61	( 0.03, 3.00 )	0.79
	Abdominal hysterectomy	0	0.3	63	N/A	N/A	0.78
LabID	MRSA bacteremia	3	3.6	55677	0.83	( 0.21, 2.26 )	1.29
	C. difficile infection	15	33.7	53636	0.45	( 0.26, 0.72 )	0.68

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

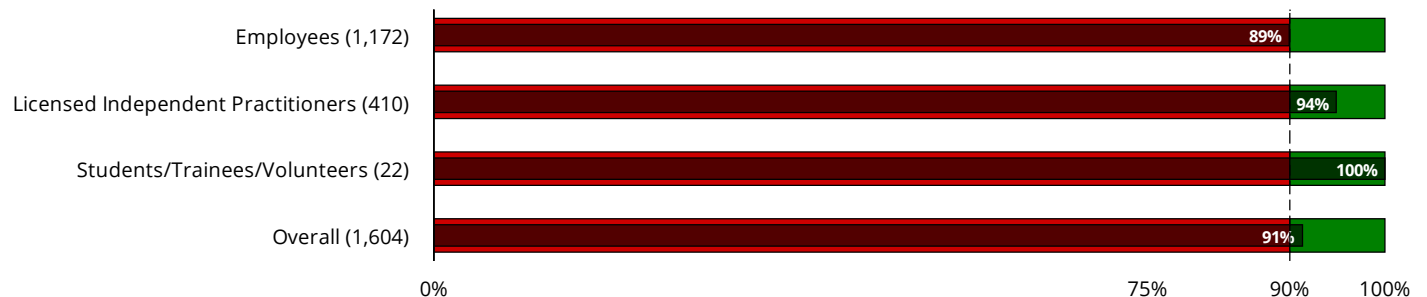
**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at Summit Medical Center*

### Healthcare Personnel Influenza Vaccination - '2018/2019' Influenza Season

#### Healthcare Personnel Category (Total)

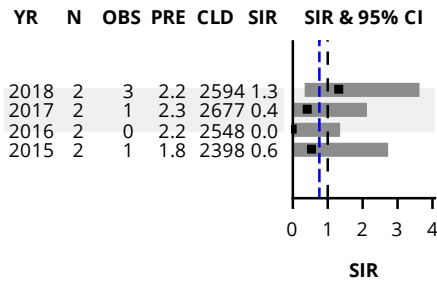


#### Healthcare Personnel Vaccinated (%)

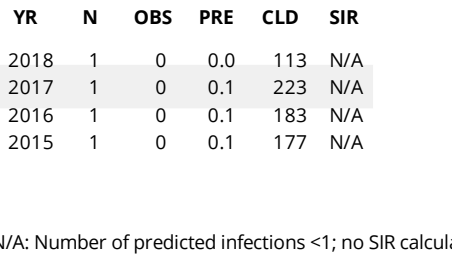
■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

Central Line-Associated Bloodstream Infections (CLABSI)

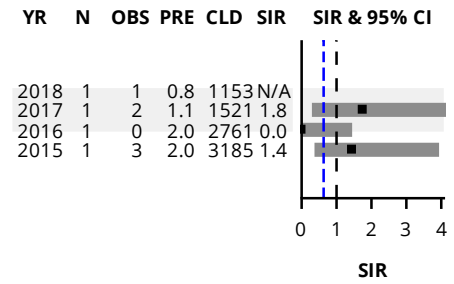
CLABSI - Adult/Pediatric ICUs



CLABSI - Neonatal ICUs

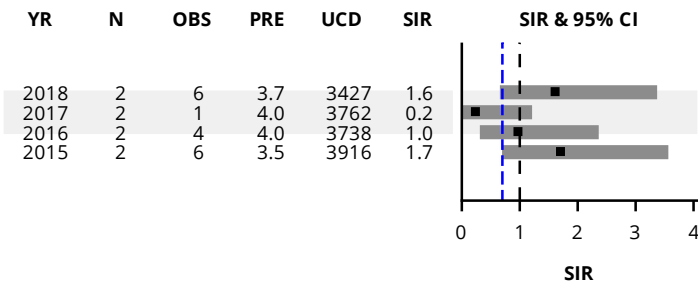


CLABSI - Adult/Pediatric Wards

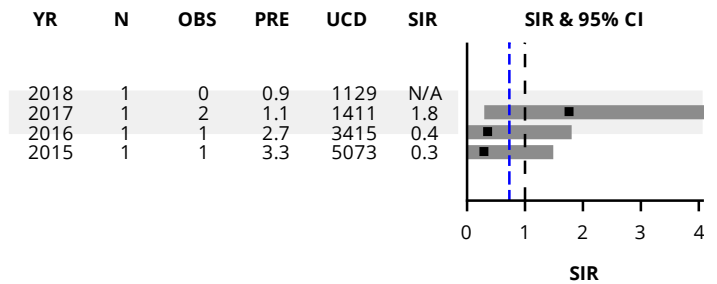


Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICUs

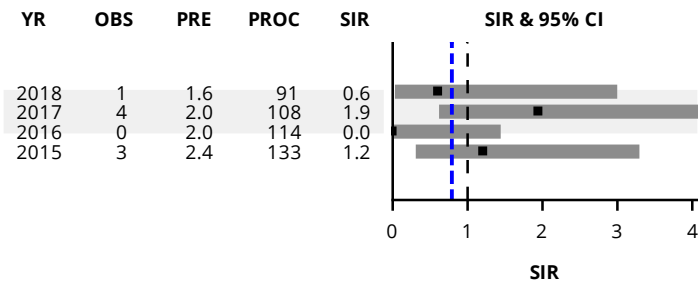


CAUTI - Adult/Pediatric Wards

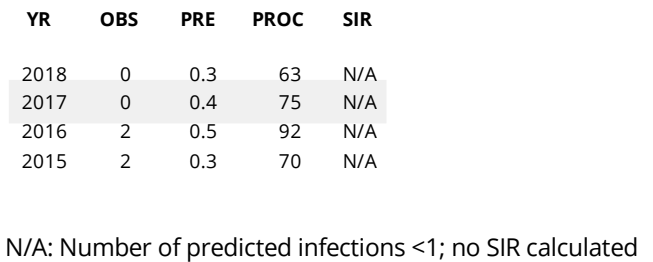


Surgical Site Infections (SSI)

SSI - Colon Surgery

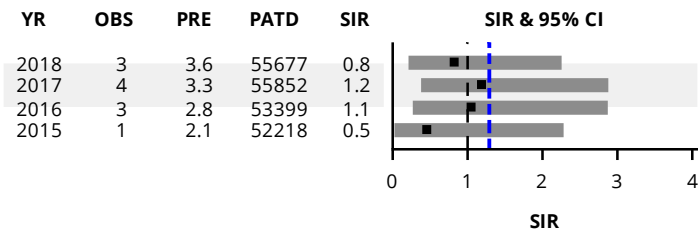


SSI - Abdominal Hysterectomy

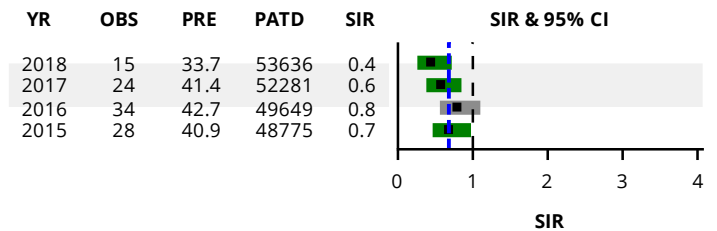


Healthcare Facility-Onset Laboratory Identified (LabID) Events

LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia



LabID - *C. difficile* Infection (CDI)



Data reported as of August 27, 2019

YR = reporting year; N = number of units reporting (CLABSI/CAUTI); OBS = observed number of infections

PRE = statistically 'predicted' number of infections, based on NHSN national baseline data

SIR = standardized infection ratio (observed/predicted number of infections)

CLD = central line days; UCD = urinary catheter days; PROC = procedures performed; PATD = patient days;

N/A = data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

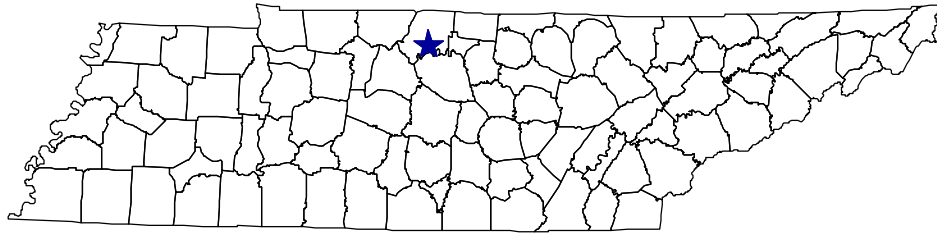
- Significantly lower than NHSN SIR of 1
- Not significantly different from NHSN SIR of 1
- Significantly higher than NHSN SIR of 1
- - - 2018 TN SIR
- - - NHSN SIR=1



## Sumner Regional Medical Center, Gallatin, Sumner County

Medical School Affiliation: None

Bed Size Category: 100-399 beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2017-12/31/2017

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		
		Observed	Predicted		SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	0	1.2	1700	0.00	( 0.00, 2.34 )	0.85
	Adult/Pediatric Ward	0	1.2	1984	0.00	( 0.00, 2.32 )	0.68
CAUTI	Adult/Pediatric ICU	2	2.3	3180	0.86	( 0.14, 2.84 )	0.71
	Adult/Pediatric Ward	6	1.8	2774	<b>3.22</b>	<b>( 1.31, 6.70 )</b>	0.72
SSI	Colon surgery	1	1.0	54	0.93	( 0.05, 4.57 )	0.83
	Abdominal hysterectomy	1	0.2	53	<b>N/A</b>	<b>N/A</b>	1.08
LabID	MRSA bacteremia	1	1.0	27736	0.93	( 0.05, 4.58 )	1.09
	C. difficile infection	21	28.3	25916	0.74	( 0.47, 1.11 )	0.83

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

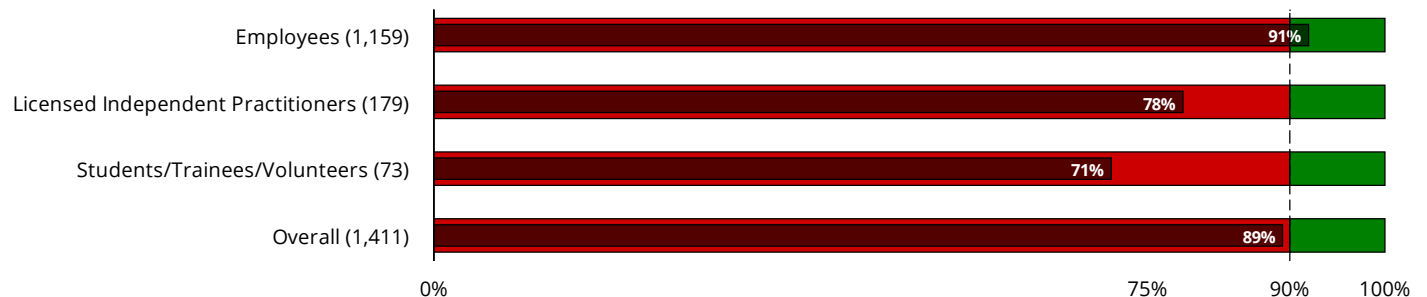
**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at Sumner Regional Medical Center*

### Healthcare Personnel Influenza Vaccination - '2017/2018' Influenza Season

#### Healthcare Personnel Category (Total)



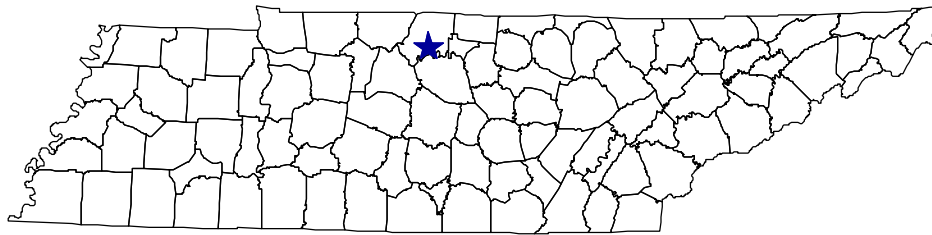
#### Healthcare Personnel Vaccinated (%)

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

## Sumner Regional Medical Center, Gallatin, Sumner County

Medical School Affiliation: Undergraduate teaching

Bed Size Category: 100-399 beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2018-12/31/2018

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		
		Observed	Predicted		SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	0	1.2	1639	0.00	( 0.00, 2.43 )	0.76
	Adult/Pediatric Ward	1	1.0	1616	0.95	( 0.05, 4.68 )	0.63
CAUTI	Adult/Pediatric ICU	0	2.2	3044	0.00	( 0.00, 1.35 )	0.70
	Adult/Pediatric Ward	1	1.4	2192	0.68	( 0.03, 3.38 )	0.73
SSI	Colon surgery	0	0.6	31	N/A	N/A	0.79
	Abdominal hysterectomy	0	0.2	50	N/A	N/A	0.78
LabID	MRSA bacteremia	3	1.3	27442	2.20	( 0.56, 5.99 )	1.29
	C. difficile infection	26	31.1	25567	0.84	( 0.56, 1.21 )	0.68

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

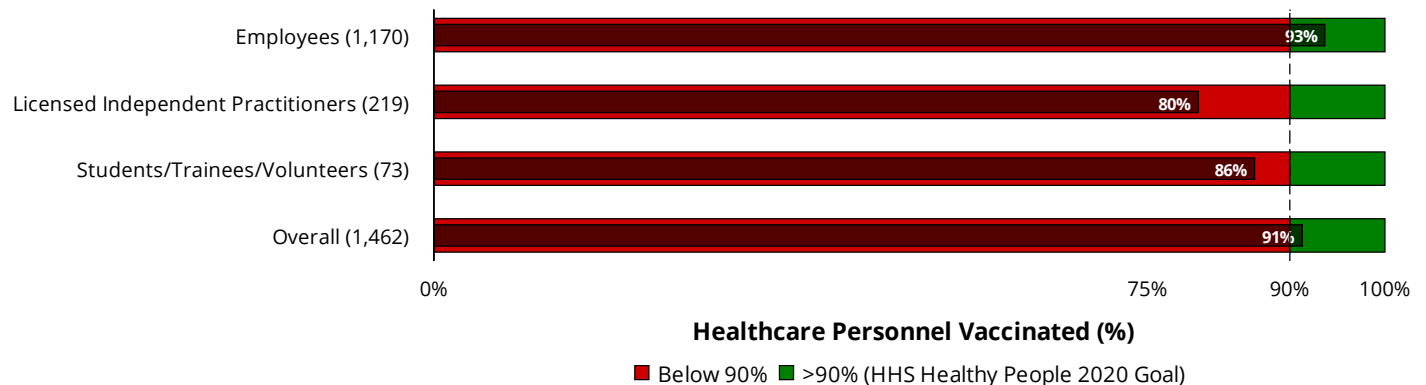
**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at Sumner Regional Medical Center*

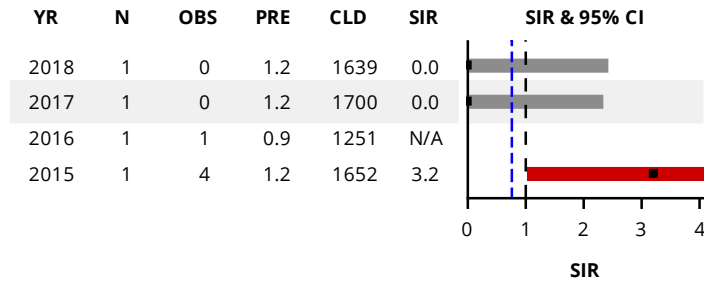
### Healthcare Personnel Influenza Vaccination - '2018/2019' Influenza Season

#### Healthcare Personnel Category (Total)

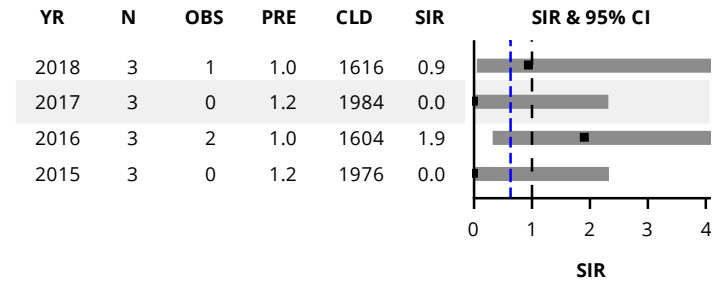


### Central Line-Associated Bloodstream Infections (CLABSI)

#### CLABSI - Adult/Pediatric ICUs

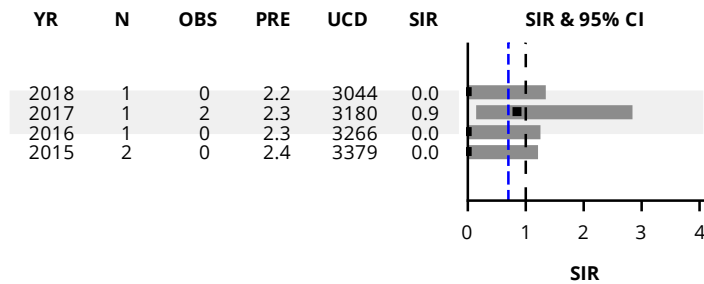


#### CLABSI - Adult/Pediatric Wards

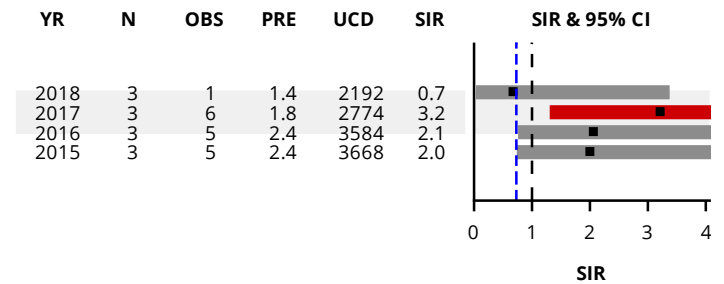


### Catheter-Associated Urinary Tract Infections (CAUTI)

#### CAUTI - Adult/Pediatric ICUs

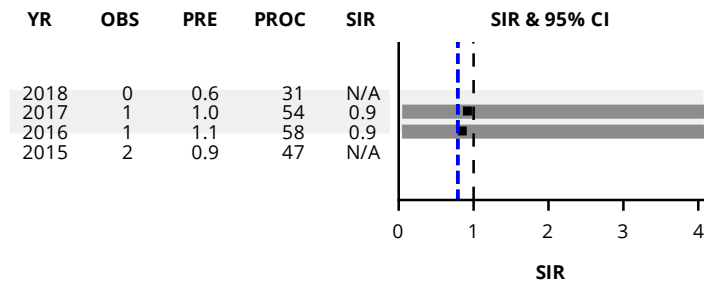


#### CAUTI - Adult/Pediatric Wards

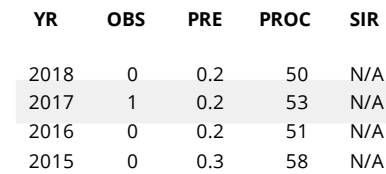


### Surgical Site Infections (SSI)

#### SSI - Colon Surgery



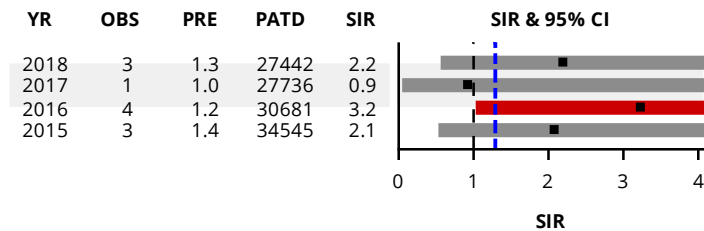
#### SSI - Abdominal Hysterectomy



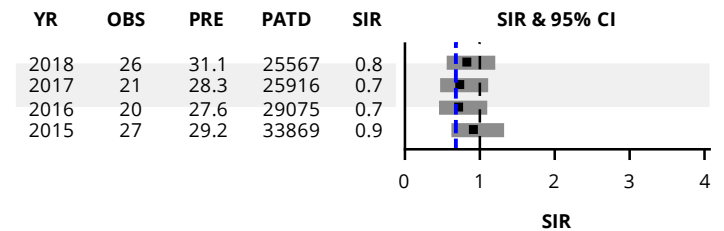
N/A: Number of predicted infections <1; no SIR calculated

### Healthcare Facility-Onset Laboratory Identified (LabID) Events

#### LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia



#### LabID - *C. difficile* Infection (CDI)



Data reported as of August 27, 2019

YR = reporting year; N = number of units reporting (CLABSI/CAUTI); OBS = observed number of infections

PRE = statistically 'predicted' number of infections, based on NHSN national baseline data

SIR = standardized infection ratio (observed/predicted number of infections)

CLD = central line days; UCD = urinary catheter days; PROC = procedures performed; PATD = patient days;

N/A = data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

■ Significantly lower than NHSN SIR of 1

■ Not significantly different from NHSN SIR of 1

■ Significantly higher than NHSN SIR of 1

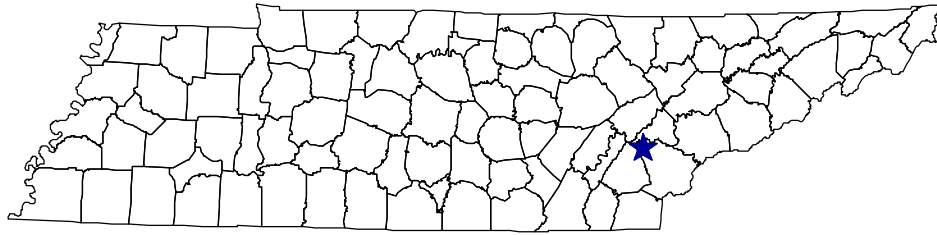
--- 2018 TN SIR

--- NHSN SIR=1

**Sweetwater Hospital Association, Sweetwater, Monroe County**

Medical School Affiliation: Graduate teaching

Bed Size Category: 50-99 beds



**Healthcare-Associated Infections (HAI) Summary**

**Standardized Infection Ratio (SIR) by Infection Type, 01/01/2017-12/31/2017**

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		
		Observed	Predicted		SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	0	0.1	166	N/A	N/A	0.85
	Adult/Pediatric Ward	0	0.2	379	N/A	N/A	0.68
CAUTI	Adult/Pediatric ICU	0	0.4	736	N/A	N/A	0.71
	Adult/Pediatric Ward	0	0.6	1159	N/A	N/A	0.72
SSI	Colon surgery	0	0.4	29	N/A	N/A	0.83
	Abdominal hysterectomy	0	0.0	22	N/A	N/A	1.08
LabID	MRSA bacteremia	0	0.5	8963	N/A	N/A	1.09
	C. difficile infection	4	4.1	8604	0.97	( 0.31, 2.33 )	0.83

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at Sweetwater Hospital Association*

**Healthcare Personnel Influenza Vaccination - '2017/2018' Influenza Season**

**Healthcare Personnel Category (Total)**



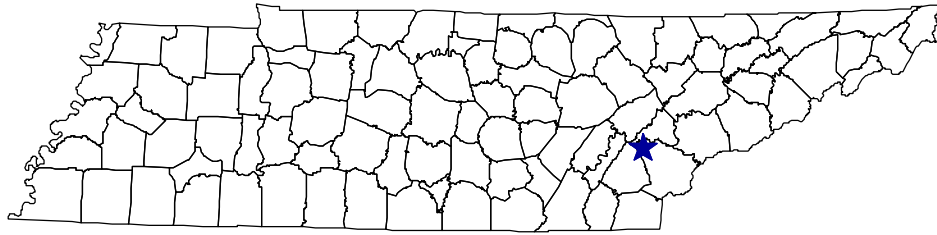
**Healthcare Personnel Vaccinated (%)**

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

**Sweetwater Hospital Association, Sweetwater, Monroe County**

Medical School Affiliation: Graduate teaching

Bed Size Category: 50-99 beds



**Healthcare-Associated Infections (HAI) Summary**

**Standardized Infection Ratio (SIR) by Infection Type, 01/01/2018-12/31/2018**

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days/Procedures Performed/Patient Days	SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	0	0.1	155	N/A	N/A	0.76
	Adult/Pediatric Ward	0	0.1	289	N/A	N/A	0.63
CAUTI	Adult/Pediatric ICU	0	0.4	708	N/A	N/A	0.70
	Adult/Pediatric Ward	0	0.6	1131	N/A	N/A	0.73
SSI	Colon surgery	1	0.5	32	N/A	N/A	0.79
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	0.78
LabID	MRSA bacteremia	0	0.5	9544	N/A	N/A	1.29
	C. difficile infection	3	3.6	9123	0.83	( 0.21, 2.25 )	0.68

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at Sweetwater Hospital Association*

**Healthcare Personnel Influenza Vaccination - '2018/2019' Influenza Season**

**Healthcare Personnel Category (Total)**



**Healthcare Personnel Vaccinated (%)**

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric ICUs

YR	N	OBS	PRE	CLD	SIR
2018	1	0	0.1	155	N/A
2017	1	0	0.1	166	N/A
2016	1	0	0.1	203	N/A
2015	1	0	0.1	170	N/A

N/A: Number of predicted infections <1; no SIR calculated

CLABSI - Adult/Pediatric Wards

YR	N	OBS	PRE	CLD	SIR
2018	2	0	0.1	289	N/A
2017	2	0	0.2	379	N/A
2016	2	0	0.3	457	N/A
2015	2	0	0.4	599	N/A

N/A: Number of predicted infections <1; no SIR calculated

Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICUs

YR	N	OBS	PRE	UCD	SIR
2018	1	0	0.4	708	N/A
2017	1	0	0.4	736	N/A
2016	1	0	0.4	779	N/A
2015	1	1	0.4	717	N/A

N/A: Number of predicted infections <1; no SIR calculated

CAUTI - Adult/Pediatric Wards

YR	N	OBS	PRE	UCD	SIR
2018	2	0	0.6	1131	N/A
2017	2	0	0.6	1159	N/A
2016	2	0	0.8	1342	N/A
2015	2	0	0.7	1236	N/A

N/A: Number of predicted infections <1; no SIR calculated

Surgical Site Infections (SSI)

SSI - Colon Surgery

YR	OBS	PRE	PROC	SIR
2018	1	0.5	32	N/A
2017	0	0.4	29	N/A
2016	0	0.2	20	N/A
2015	0	0.4	31	N/A

N/A: Number of predicted infections <1; no SIR calculated

SSI - Abdominal Hysterectomy

YR	OBS	PRE	PROC	SIR
2018	N/A	N/A	N/A	N/A
2017	0	0.0	22	N/A
2016	1	0.0	27	N/A
2015	N/A	N/A	N/A	N/A

N/A: Number of predicted infections <1; no SIR calculated

Healthcare Facility-Onset Laboratory Identified (LabID) Events

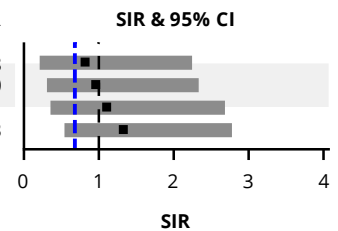
LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia

YR	OBS	PRE	PATD	SIR
2018	0	0.5	9544	N/A
2017	0	0.5	8963	N/A
2016	0	0.5	9771	N/A
2015	0	0.6	9772	N/A

N/A: Number of predicted infections <1; no SIR calculated

LabID - *C. difficile* Infection (CDI)

YR	OBS	PRE	PATD	SIR
2018	3	3.6	9123	0.8
2017	4	4.1	8604	1.0
2016	4	3.5	9460	1.1
2015	6	4.4	9423	1.3



Data reported as of August 27, 2019

YR = reporting year; N = number of units reporting (CLABSI/CAUTI); OBS = observed number of infections

PRE = statistically 'predicted' number of infections, based on NHSN national baseline data

SIR = standardized infection ratio (observed/predicted number of infections)

CLD = central line days; UCD = urinary catheter days; PROC = procedures performed; PATD = patient days;

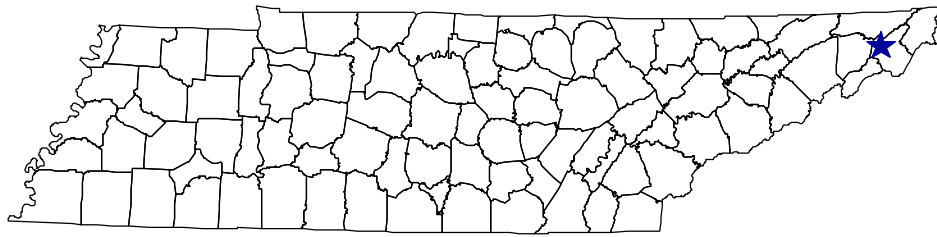
N/A = data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

- Significantly lower than NHSN SIR of 1
- Not significantly different from NHSN SIR of 1
- Significantly higher than NHSN SIR of 1
- - - 2018 TN SIR
- - - NHSN SIR=1

## Sycamore Shoals Hospital, Elizabethton, Carter County

Medical School Affiliation: None

Bed Size Category: 100-399 beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2017-12/31/2017

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		
		Observed	Predicted		SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	1	0.3	476	N/A	N/A	0.85
	Adult/Pediatric Ward	0	0.2	324	N/A	N/A	0.68
CAUTI	Adult/Pediatric ICU	0	0.8	1140	N/A	N/A	0.71
	Adult/Pediatric Ward	1	0.7	1105	N/A	N/A	0.72
SSI	Colon surgery	1	0.6	29	N/A	N/A	0.83
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	1.08
LabID	MRSA bacteremia	0	0.5	14014	N/A	N/A	1.09
	C. difficile infection	10	7.3	14014	1.36	( 0.69, 2.42 )	0.83

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at Sycamore Shoals Hospital*

### Healthcare Personnel Influenza Vaccination - '2017/2018' Influenza Season

#### Healthcare Personnel Category (Total)



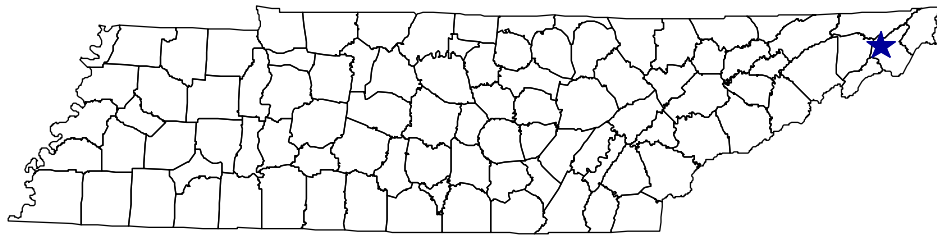
#### Healthcare Personnel Vaccinated (%)

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

## Sycamore Shoals Hospital, Elizabethton, Carter County

Medical School Affiliation: Graduate teaching

Bed Size Category: 100-399 beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2018-12/31/2018

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		
		Observed	Predicted		SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	0	0.5	619	N/A	N/A	0.76
	Adult/Pediatric Ward	0	0.2	374	N/A	N/A	0.63
CAUTI	Adult/Pediatric ICU	0	1.0	1230	0.00	( 0.00, 2.92 )	0.70
	Adult/Pediatric Ward	0	0.7	1008	N/A	N/A	0.73
SSI	Colon surgery	2	0.8	35	N/A	N/A	0.79
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	0.78
LabID	MRSA bacteremia	3	0.6	13977	N/A	N/A	1.29
	C. difficile infection	6	9.2	13977	0.65	( 0.26, 1.35 )	0.68

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at Sycamore Shoals Hospital*

### Healthcare Personnel Influenza Vaccination - '2018/2019' Influenza Season

#### Healthcare Personnel Category (Total)



#### Healthcare Personnel Vaccinated (%)

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)



Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric ICUs

YR	N	OBS	PRE	CLD	SIR
2018	1	0	0.5	619	N/A
2017	1	1	0.3	476	N/A
2016	1	1	0.5	699	N/A
2015	1	0	0.4	547	N/A

N/A: Number of predicted infections <1; no SIR calculated

CLABSI - Adult/Pediatric Wards

YR	N	OBS	PRE	CLD	SIR
2018	1	0	0.2	374	N/A
2017	1	0	0.2	324	N/A
2016	1	0	0.2	330	N/A
2015	1	0	0.2	436	N/A

N/A: Number of predicted infections <1; no SIR calculated

Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICUs

YR	N	OBS	PRE	UCD	SIR	SIR & 95% CI
2018	1	0	1.0	1230	0.0	
2017	1	0	0.8	1140	N/A	
2016	1	0	1.0	1407	0.0	
2015	1	0	0.9	1235	N/A	

CAUTI - Adult/Pediatric Wards

YR	N	OBS	PRE	UCD	SIR
2018	1	0	0.7	1008	N/A
2017	1	1	0.7	1105	N/A
2016	1	0	0.6	951	N/A
2015	1	1	0.7	1203	N/A

N/A: Number of predicted infections <1; no SIR calculated

Surgical Site Infections (SSI)

SSI - Colon Surgery

YR	OBS	PRE	PROC	SIR
2018	2	0.8	35	N/A
2017	1	0.6	29	N/A
2016	0	0.7	30	N/A
2015	0	0.5	21	N/A

N/A: Number of predicted infections <1; no SIR calculated

SSI - Abdominal Hysterectomy

YR	OBS	PRE	PROC	SIR
2018	N/A	N/A	N/A	N/A
2017	N/A	N/A	N/A	N/A
2016	N/A	N/A	N/A	N/A
2015	N/A	N/A	N/A	N/A

N/A: Number of predicted infections <1; no SIR calculated

Healthcare Facility-Onset Laboratory Identified (LabID) Events

LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia

YR	OBS	PRE	PATD	SIR
2018	3	0.6	13977	N/A
2017	0	0.5	14014	N/A
2016	1	0.6	14944	N/A
2015	0	0.5	15154	N/A

N/A: Number of predicted infections <1; no SIR calculated

LabID - *C. difficile* Infection (CDI)

YR	OBS	PRE	PATD	SIR	SIR & 95% CI
2018	6	9.2	13977	0.7	
2017	10	7.3	14014	1.4	
2016	10	8.9	14944	1.1	
2015	11	6.5	15154	1.7	

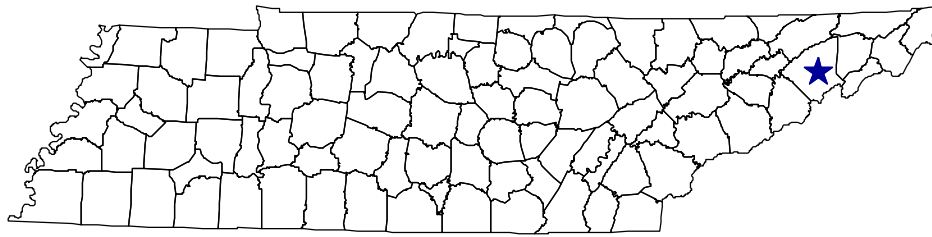
Data reported as of August 27, 2019

YR = reporting year; N = number of units reporting (CLABSI/CAUTI); OBS = observed number of infections  
 PRE = statistically 'predicted' number of infections, based on NHSN national baseline data  
 SIR = standardized infection ratio (observed/predicted number of infections)  
 CLD = central line days; UCD = urinary catheter days; PROC = procedures performed; PATD = patient days;  
 N/A = data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

■ Significantly lower than NHSN SIR of 1  
 ■ Not significantly different from NHSN SIR of 1  
 ■ Significantly higher than NHSN SIR of 1  
 - - - 2018 TN SIR  
 - - - NHSN SIR=1

teaching

Bed Size Category: 100-399 beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2017-12/31/2017

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		
		Observed	Predicted		SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	0	0.4	448	N/A	N/A	0.85
	Adult/Pediatric Ward	0	0.5	622	N/A	N/A	0.68
CAUTI	Adult/Pediatric ICU	0	0.8	792	N/A	N/A	0.71
	Adult/Pediatric Ward	0	1.1	1194	0.00	( 0.00, 2.64 )	0.72
SSI	Colon surgery	1	1.1	52	0.91	( 0.05, 4.47 )	0.83
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	1.08
LabID	MRSA bacteremia	0	0.2	7773	N/A	N/A	1.09
	C. difficile infection	1	3.1	7077	0.31	( 0.02, 1.55 )	0.83

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

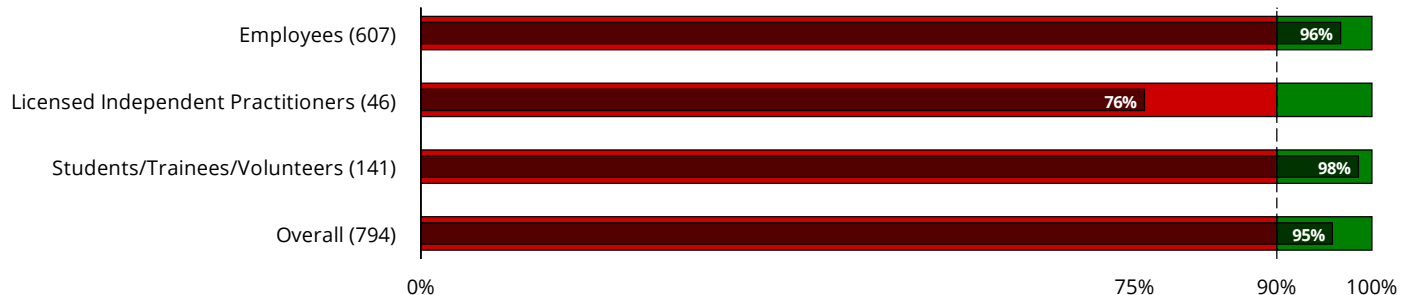
**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at Greeneville Community Hospital West (Takoma Regional Hospital)*

### Healthcare Personnel Influenza Vaccination - '2017/2018' Influenza Season

#### Healthcare Personnel Category (Total)

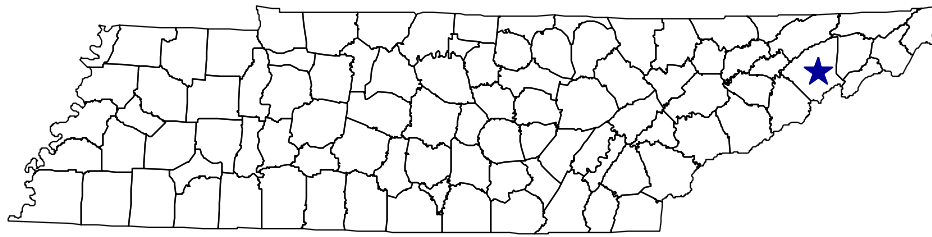


#### Healthcare Personnel Vaccinated (%)

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

teaching

Bed Size Category: 100-399 beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2018-12/31/2018

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		
		Observed	Predicted		SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	1	0.3	381	N/A	N/A	0.76
	Adult/Pediatric Ward	1	0.3	374	N/A	N/A	0.63
CAUTI	Adult/Pediatric ICU	0	0.7	701	N/A	N/A	0.70
	Adult/Pediatric Ward	0	0.8	871	N/A	N/A	0.73
SSI	Colon surgery	0	1.1	55	0.00	( 0.00, 2.60 )	0.79
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	0.78
LabID	MRSA bacteremia	1	0.2	8000	N/A	N/A	1.29
	C. difficile infection	3	3.8	7133	0.77	( 0.20, 2.10 )	0.68

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

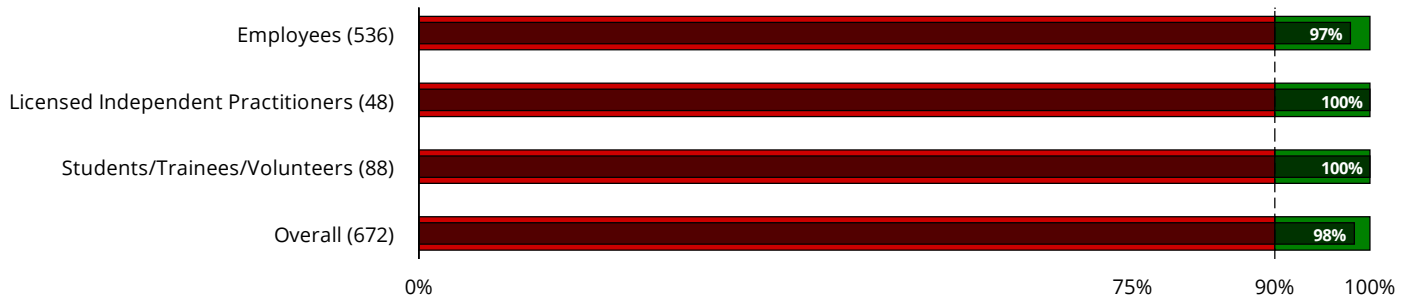
**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at Greeneville Community Hospital West (Takoma Regional Hospital)*

### Healthcare Personnel Influenza Vaccination - '2018/2019' Influenza Season

#### Healthcare Personnel Category (Total)



#### Healthcare Personnel Vaccinated (%)

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

### Central Line-Associated Bloodstream Infections (CLABSI)

#### CLABSI - Adult/Pediatric ICUs

YR	N	OBS	PRE	CLD	SIR
2018	1	1	0.3	381	N/A
2017	1	0	0.4	448	N/A
2016	1	0	0.3	369	N/A
2015	1	0	0.3	423	N/A

N/A: Number of predicted infections <1; no SIR calculated

#### CLABSI - Adult/Pediatric Wards

YR	N	OBS	PRE	CLD	SIR
2018	1	1	0.3	374	N/A
2017	1	0	0.5	622	N/A
2016	1	0	0.3	500	N/A
2015	1	0	0.5	676	N/A

N/A: Number of predicted infections <1; no SIR calculated

### Catheter-Associated Urinary Tract Infections (CAUTI)

#### CAUTI - Adult/Pediatric ICUs

YR	N	OBS	PRE	UCD	SIR
2018	1	0	0.7	701	N/A
2017	1	0	0.8	792	N/A
2016	1	0	0.7	910	N/A
2015	1	1	0.7	954	N/A

N/A: Number of predicted infections <1; no SIR calculated

#### CAUTI - Adult/Pediatric Wards

YR	N	OBS	PRE	UCD	SIR	SIR & 95% CI
2018	1	0	0.8	871	N/A	
2017	1	0	1.1	1194	0.0	
2016	1	1	1.1	1537	0.9	
2015	1	1	1.1	1578	0.9	

### Surgical Site Infections (SSI)

#### SSI - Colon Surgery

YR	OBS	PRE	PROC	SIR	SIR & 95% CI
2018	0	1.1	55	0.0	
2017	1	1.1	52	0.9	
2016	0	1.0	53	0.0	
2015	0	1.1	56	0.0	

#### SSI - Abdominal Hysterectomy

YR	OBS	PRE	PROC	SIR
2018	N/A	N/A	N/A	N/A
2017	N/A	N/A	N/A	N/A
2016	N/A	N/A	N/A	N/A
2015	N/A	N/A	N/A	N/A

N/A: Number of predicted infections <1; no SIR calculated

### Healthcare Facility-Onset Laboratory Identified (LabID) Events

#### LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia

YR	OBS	PRE	PATD	SIR
2018	1	0.2	8000	N/A
2017	0	0.2	7773	N/A
2016	0	0.2	8672	N/A
2015	0	0.2	10479	N/A

N/A: Number of predicted infections <1; no SIR calculated

#### LabID - *C. difficile* Infection (CDI)

YR	OBS	PRE	PATD	SIR	SIR & 95% CI
2018	3	3.8	7133	0.8	
2017	1	3.1	7077	0.3	
2016	1	2.6	7877	0.4	
2015	1	3.7	9808	0.3	

Data reported as of August 27, 2019

**YR** = reporting year; **N** = number of units reporting (CLABSI/CAUTI); **OBS** = observed number of infections

**PRE** = statistically 'predicted' number of infections, based on NHSN national baseline data

**SIR** = standardized infection ratio (observed/predicted number of infections)

**CLD** = central line days; **UCD** = urinary catheter days; **PROC** = procedures performed; **PATD** = patient days;

**N/A** = data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

■ Significantly lower than NHSN SIR of 1

■ Not significantly different from NHSN SIR of 1

■ Significantly higher than NHSN SIR of 1

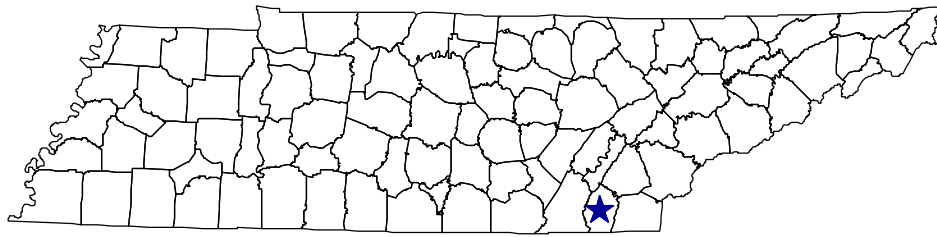
--- 2018 TN SIR

--- NHSN SIR=1

## Tennova Healthcare - Cleveland (SkyRidge Medical Center), Cleveland, Bradley County

Medical School Affiliation: None

Bed Size Category: 100-399 beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2017-12/31/2017

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		
		Observed	Predicted		SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	4	0.8	1184	N/A	N/A	0.85
	Adult/Pediatric Ward	2	0.6	926	N/A	N/A	0.68
CAUTI	Adult/Pediatric ICU	5	3.5	4089	1.42	( 0.52, 3.14 )	0.71
	Adult/Pediatric Ward	1	1.4	2104	0.69	( 0.03, 3.40 )	0.72
SSI	Colon surgery	0	2.3	97	0.00	( 0.00, 1.26 )	0.83
	Abdominal hysterectomy	1	0.5	96	N/A	N/A	1.08
LabID	MRSA bacteremia	3	2.1	44731	1.39	( 0.35, 3.79 )	1.09
	C. difficile infection	28	26.2	42416	1.07	( 0.72, 1.52 )	0.83

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at Tennova Healthcare - Cleveland (SkyRidge Medical Center)*

### Healthcare Personnel Influenza Vaccination - '2017/2018' Influenza Season

#### Healthcare Personnel Category (Total)



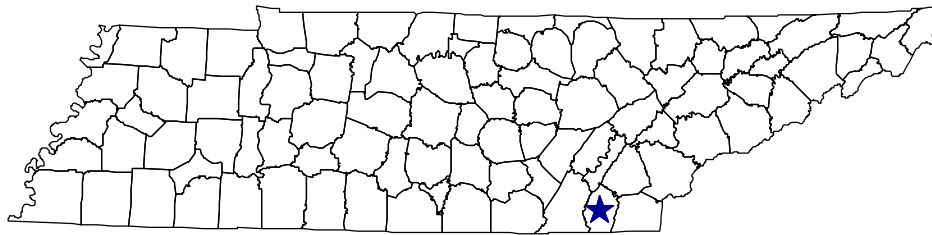
#### Healthcare Personnel Vaccinated (%)

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

**Tennova Healthcare - Cleveland (SkyRidge Medical Center), Cleveland, Bradley County**

Medical School Affiliation: Undergraduate teaching

Bed Size Category: 100-399 beds



**Healthcare-Associated Infections (HAI) Summary**

**Standardized Infection Ratio (SIR) by Infection Type, 01/01/2018-12/31/2018**

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		
		Observed	Predicted		SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	0	0.8	1139	N/A	N/A	0.76
	Adult/Pediatric Ward	1	0.6	1049	N/A	N/A	0.63
CAUTI	Adult/Pediatric ICU	2	3.4	4053	0.57	( 0.10, 1.89 )	0.70
	Adult/Pediatric Ward	2	1.3	2012	1.45	( 0.24, 4.77 )	0.73
SSI	Colon surgery	2	2.0	76	0.95	( 0.16, 3.15 )	0.79
	Abdominal hysterectomy	0	0.7	116	N/A	N/A	0.78
LabID	MRSA bacteremia	1	2.5	46214	0.40	( 0.02, 1.97 )	1.29
	C. difficile infection	13	27.6	43822	0.47	( 0.26, 0.79 )	0.68

Green highlighting indicates an SIR significantly LOWER than the 2015 national baseline

Red highlighting indicates an SIR significantly HIGHER than the 2015 national baseline

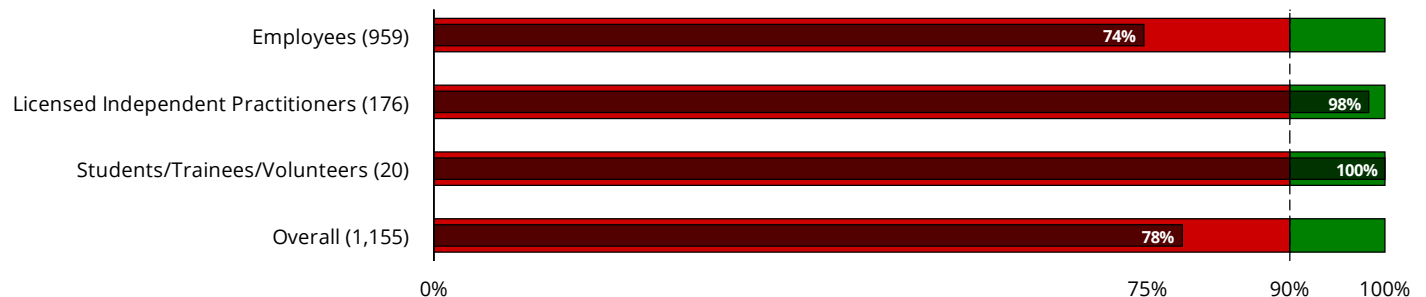
N/A: Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

See page 3 for more detailed information about HAIs at Tennova Healthcare - Cleveland (SkyRidge Medical Center)

**Healthcare Personnel Influenza Vaccination - '2018/2019' Influenza Season**

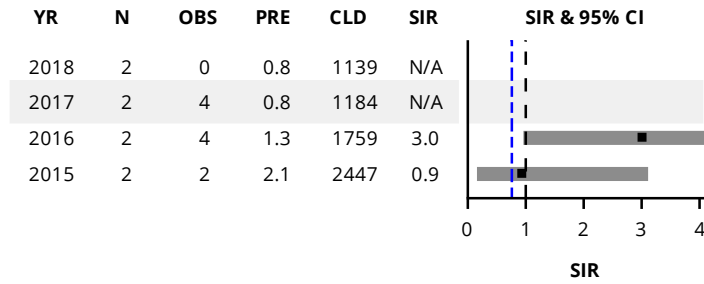
**Healthcare Personnel Category (Total)**



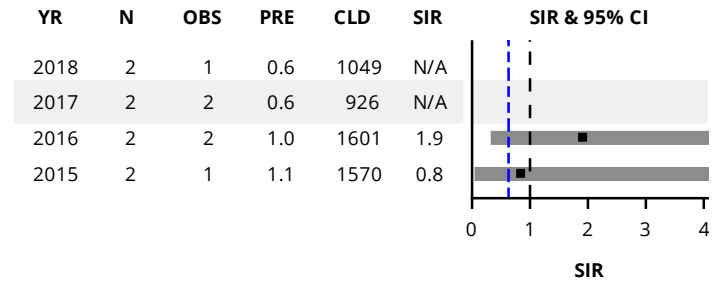
Healthcare Personnel Vaccinated (%)  
 ■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric ICUs

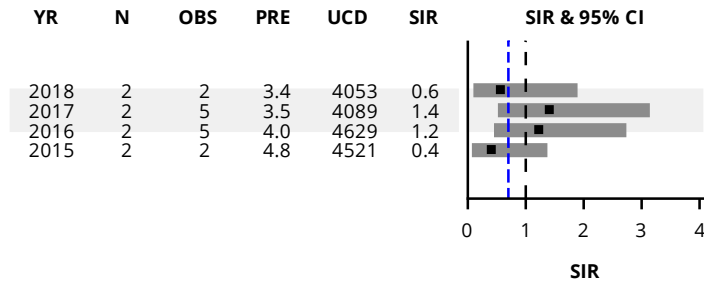


CLABSI - Adult/Pediatric Wards

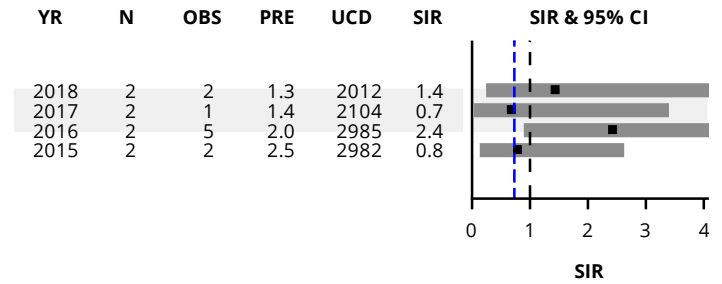


Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICUs

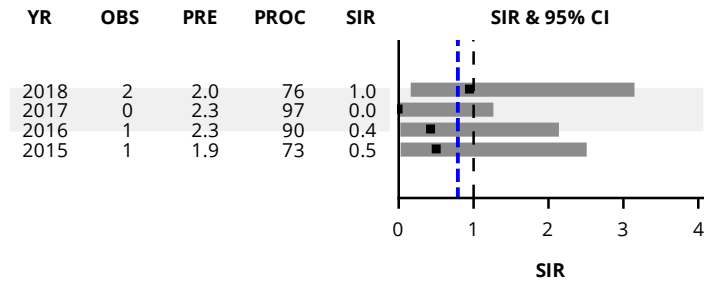


CAUTI - Adult/Pediatric Wards



Surgical Site Infections (SSI)

SSI - Colon Surgery



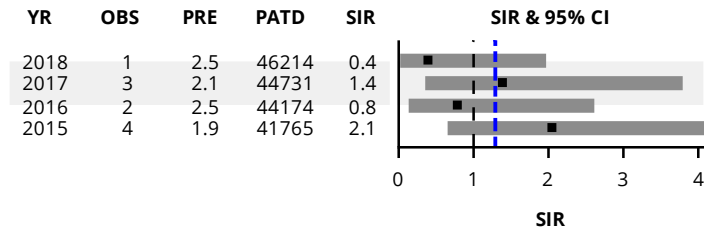
SSI - Abdominal Hysterectomy

YR	OBS	PRE	PROC	SIR
2018	0	0.7	116	N/A
2017	1	0.5	96	N/A
2016	N/A	N/A	N/A	N/A
2015	N/A	N/A	N/A	N/A

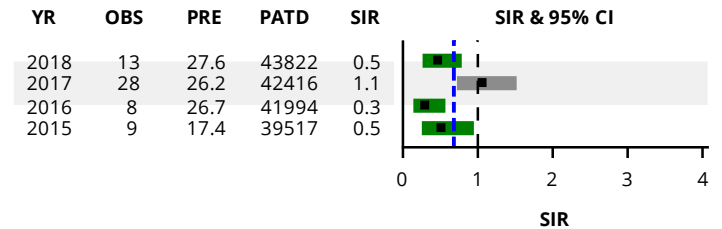
N/A: Number of predicted infections <1; no SIR calculated

Healthcare Facility-Onset Laboratory Identified (LabID) Events

LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia



LabID - *C. difficile* Infection (CDI)



Data reported as of August 27, 2019

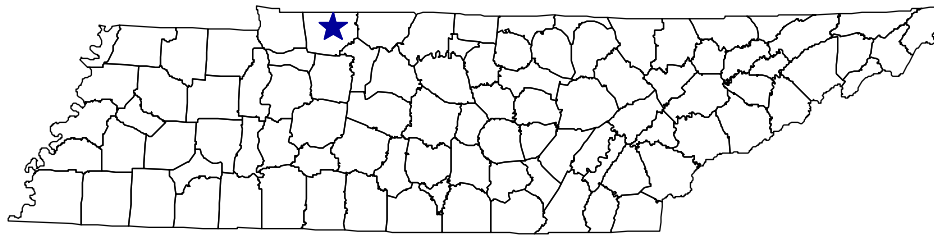
YR = reporting year; N = number of units reporting (CLABSI/CAUTI); OBS = observed number of infections  
 PRE = statistically 'predicted' number of infections, based on NHSN national baseline data  
 SIR = standardized infection ratio (observed/predicted number of infections)  
 CLD = central line days; UCD = urinary catheter days; PROC = procedures performed; PATD = patient days;  
 N/A = data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

■ Significantly lower than NHSN SIR of 1  
 ■ Not significantly different from NHSN SIR of 1  
 ■ Significantly higher than NHSN SIR of 1  
 - - - 2018 TN SIR  
 - - - NHSN SIR=1

## Tennova Healthcare - Clarksville (Gateway Med Ctr), Clarksville, Montgomery County

Medical School Affiliation: None

Bed Size Category: 100-399 beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2017-12/31/2017

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		TN SIR
		Observed	Predicted		SIR*	95% CI	
CLABSI	Adult/Pediatric ICU	2	1.3	1500	1.54	( 0.26, 5.08 )	0.85
	Neonatal ICU	0	0.0	63	<b>N/A</b>	<b>N/A</b>	0.75
	Adult/Pediatric Ward	3	1.0	1347	2.97	( 0.76, 8.08 )	0.68
CAUTI	Adult/Pediatric ICU	4	2.1	2371	1.88	( 0.60, 4.54 )	0.71
	Adult/Pediatric Ward	1	1.6	2003	0.59	( 0.03, 2.93 )	0.72
SSI	Colon surgery	2	1.4	62	1.35	( 0.23, 4.45 )	0.83
	Abdominal hysterectomy	0	0.9	155	<b>N/A</b>	<b>N/A</b>	1.08
LabID	MRSA bacteremia	4	1.8	37401	2.20	( 0.70, 5.31 )	1.09
	C. difficile infection	5	14.6	32396	<b>0.34</b>	<b>( 0.13, 0.76 )</b>	0.83

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

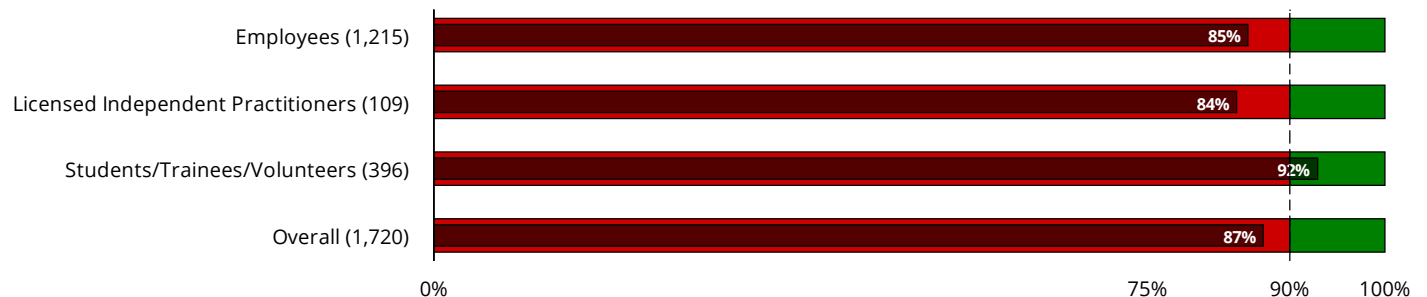
**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

See page 3 for more detailed information about HAIs at Tennova Healthcare - Clarksville (Gateway Med Ctr)

### Healthcare Personnel Influenza Vaccination - '2017/2018' Influenza Season

#### Healthcare Personnel Category (Total)



#### Healthcare Personnel Vaccinated (%)

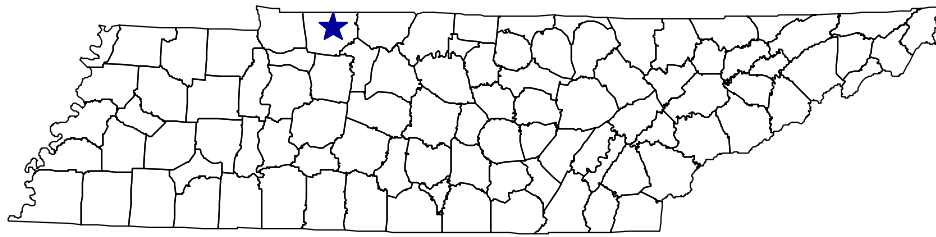
■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)



## Tennova Healthcare - Clarksville (Gateway Med Ctr), Clarksville, Montgomery County

Medical School Affiliation: None

Bed Size Category: 100-399 beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2018-12/31/2018

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		TN SIR
		Observed	Predicted		SIR*	95% CI	
CLABSI	Adult/Pediatric ICU	0	1.3	1556	0.00	( 0.00, 2.22 )	0.76
	Neonatal ICU	0	0.0	52	N/A	N/A	0.79
	Adult/Pediatric Ward	0	0.7	955	N/A	N/A	0.63
CAUTI	Adult/Pediatric ICU	3	2.4	2780	1.21	( 0.31, 3.28 )	0.70
	Adult/Pediatric Ward	0	1.5	1864	0.00	( 0.00, 1.91 )	0.73
SSI	Colon surgery	3	1.5	67	1.92	( 0.49, 5.21 )	0.79
	Abdominal hysterectomy	1	0.5	86	N/A	N/A	0.78
LabID	MRSA bacteremia	1	1.7	39525	0.57	( 0.03, 2.83 )	1.29
	C. difficile infection	12	15.7	34144	0.76	( 0.41, 1.30 )	0.68

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

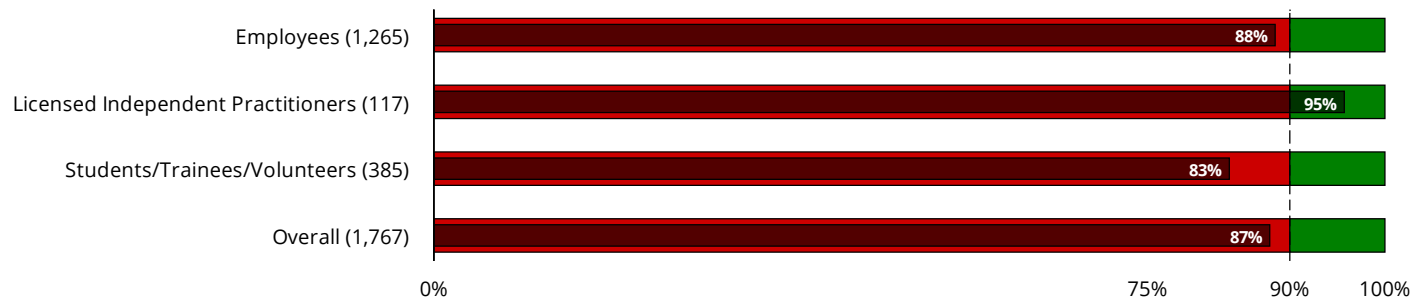
**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at Tennova Healthcare - Clarksville (Gateway Med Ctr)*

### Healthcare Personnel Influenza Vaccination - '2018/2019' Influenza Season

#### Healthcare Personnel Category (Total)

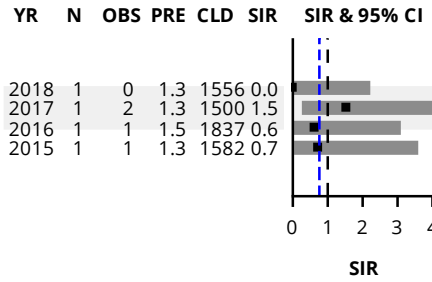


#### Healthcare Personnel Vaccinated (%)

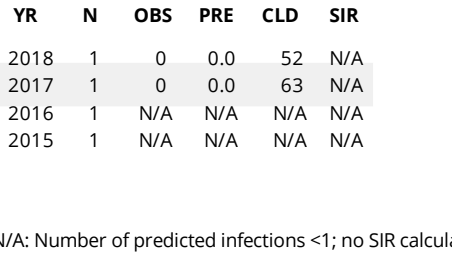
■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

Central Line-Associated Bloodstream Infections (CLABSI)

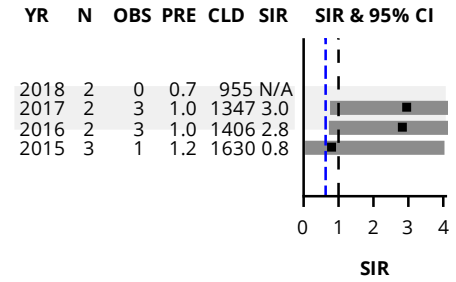
CLABSI - Adult/Pediatric ICUs



CLABSI - Neonatal ICUs

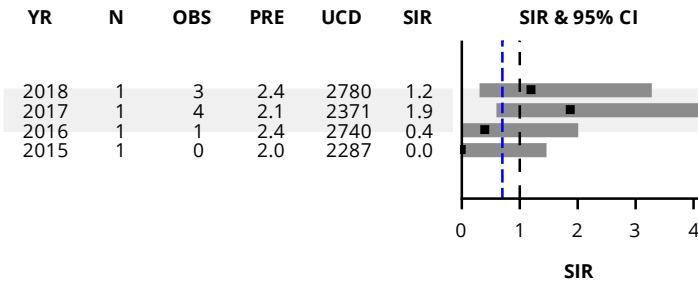


CLABSI - Adult/Pediatric Wards

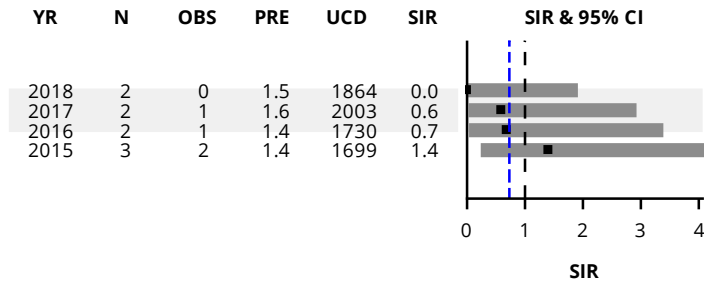


Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICUs

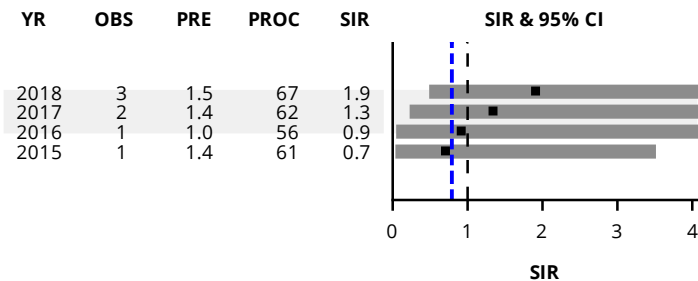


CAUTI - Adult/Pediatric Wards

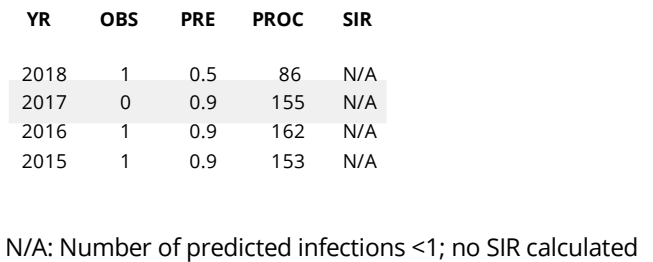


Surgical Site Infections (SSI)

SSI - Colon Surgery

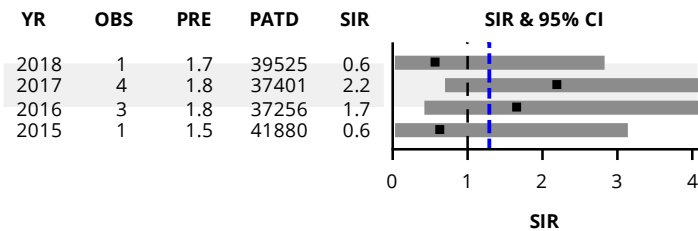


SSI - Abdominal Hysterectomy

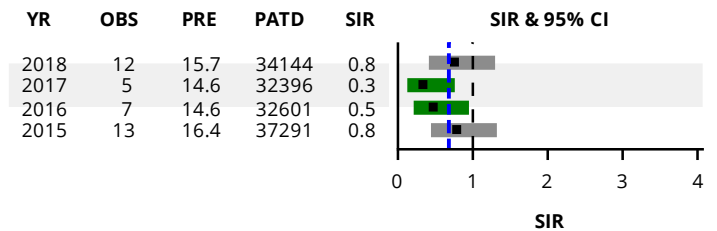


Healthcare Facility-Onset Laboratory Identified (LabID) Events

LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia



LabID - *C. difficile* Infection (CDI)



Data reported as of August 27, 2019

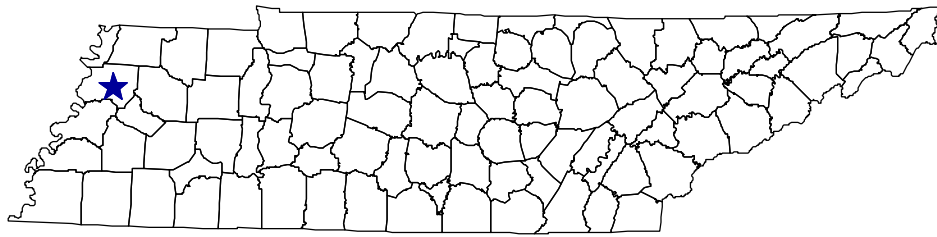
YR = reporting year; N = number of units reporting (CLABSI/CAUTI); OBS = observed number of infections  
 PRE = statistically 'predicted' number of infections, based on NHSN national baseline data  
 SIR = standardized infection ratio (observed/predicted number of infections)  
 CLD = central line days; UCD = urinary catheter days; PROC = procedures performed; PATD = patient days;  
 N/A = data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

■ Significantly lower than NHSN SIR of 1  
 ■ Not significantly different from NHSN SIR of 1  
 ■ Significantly higher than NHSN SIR of 1  
 - - - 2018 TN SIR  
 - - - NHSN SIR=1

## Tennova Healthcare - Dyersburg Regional, Dyersburg, Dyer County

Medical School Affiliation: None

Bed Size Category: 100-399 beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2017-12/31/2017

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		TN SIR
		Observed	Predicted		SIR*	95% CI	
CLABSI	Adult/Pediatric ICU	0	0.4	526	N/A	N/A	0.85
	Adult/Pediatric Ward	0	0.7	981	N/A	N/A	0.68
CAUTI	Adult/Pediatric ICU	0	1.2	1376	0.00	( 0.00, 2.39 )	0.71
	Adult/Pediatric Ward	0	3.3	3920	0.00	( 0.00, 0.89 )	0.72
SSI	Colon surgery	0	0.6	28	N/A	N/A	0.83
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	1.08
LabID	MRSA bacteremia	0	0.6	15215	N/A	N/A	1.09
	C. difficile infection	2	5.4	14277	0.37	( 0.06, 1.21 )	0.83

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at Tennova Healthcare - Dyersburg Regional*

### Healthcare Personnel Influenza Vaccination - '2017/2018' Influenza Season

#### Healthcare Personnel Category (Total)



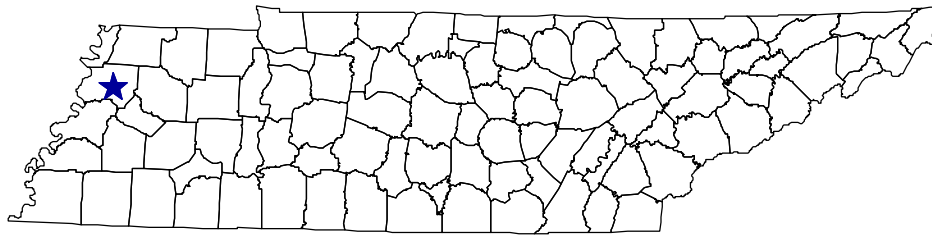
#### Healthcare Personnel Vaccinated (%)

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

## Tennova Healthcare - Dyersburg Regional, Dyersburg, Dyer County

Medical School Affiliation: Undergraduate teaching

Bed Size Category: 100-399 beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2018-12/31/2018

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		TN SIR
		Observed	Predicted		SIR*	95% CI	
CLABSI	Adult/Pediatric ICU	0	0.4	569	N/A	N/A	0.76
	Adult/Pediatric Ward	0	0.4	630	N/A	N/A	0.63
CAUTI	Adult/Pediatric ICU	1	1.3	1526	0.72	( 0.04, 3.55 )	0.70
	Adult/Pediatric Ward	0	2.8	3328	0.00	( 0.00, 1.05 )	0.73
SSI	Colon surgery	2	0.8	34	N/A	N/A	0.79
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	0.78
LabID	MRSA bacteremia	1	0.6	16897	N/A	N/A	1.29
	C. difficile infection	4	6.7	16010	0.59	( 0.19, 1.43 )	0.68

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

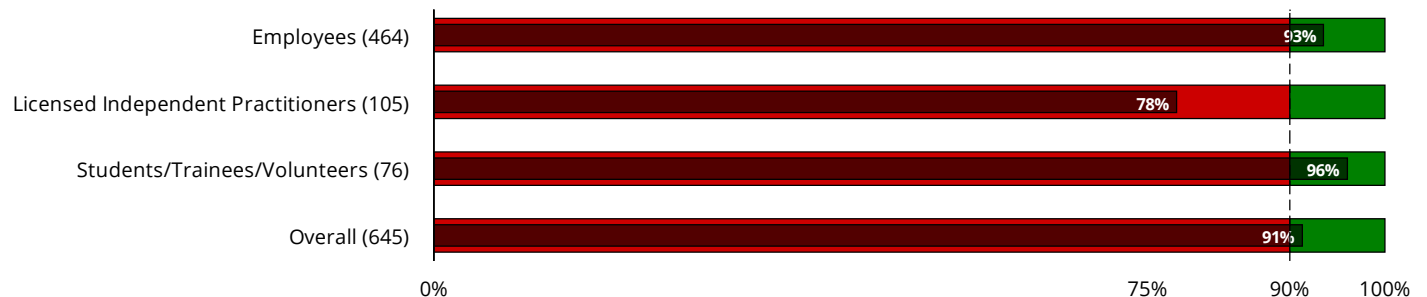
**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at Tennova Healthcare - Dyersburg Regional*

### Healthcare Personnel Influenza Vaccination - '2018/2019' Influenza Season

#### Healthcare Personnel Category (Total)



#### Healthcare Personnel Vaccinated (%)

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric ICUs

YR	N	OBS	PRE	CLD	SIR
2018	1	0	0.4	569	N/A
2017	1	0	0.4	526	N/A
2016	1	0	0.3	437	N/A
2015	1	0	0.3	388	N/A

N/A: Number of predicted infections <1; no SIR calculated

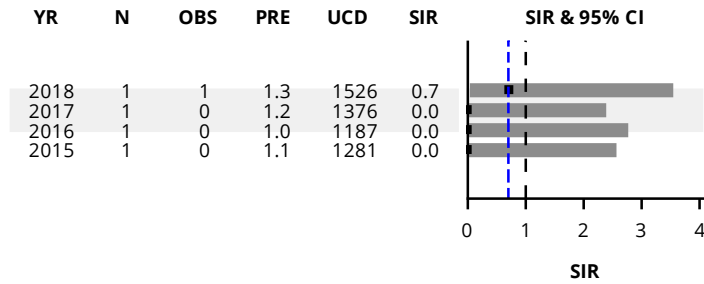
CLABSI - Adult/Pediatric Wards

YR	N	OBS	PRE	CLD	SIR
2018	2	0	0.4	630	N/A
2017	2	0	0.7	981	N/A
2016	2	0	0.6	879	N/A
2015	2	0	0.8	1093	N/A

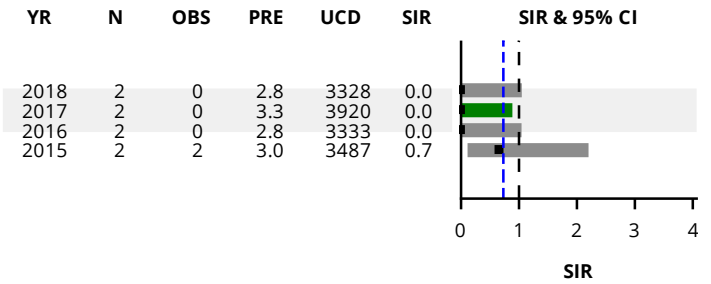
N/A: Number of predicted infections <1; no SIR calculated

Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICUs



CAUTI - Adult/Pediatric Wards



Surgical Site Infections (SSI)

SSI - Colon Surgery

YR	OBS	PRE	PROC	SIR
2018	2	0.8	34	N/A
2017	0	0.6	28	N/A
2016	0	0.6	25	N/A
2015	0	0.6	25	N/A

N/A: Number of predicted infections <1; no SIR calculated

SSI - Abdominal Hysterectomy

YR	OBS	PRE	PROC	SIR
2018	N/A	N/A	N/A	N/A
2017	N/A	N/A	N/A	N/A
2016	N/A	N/A	N/A	N/A
2015	N/A	N/A	N/A	N/A

N/A: Number of predicted infections <1; no SIR calculated

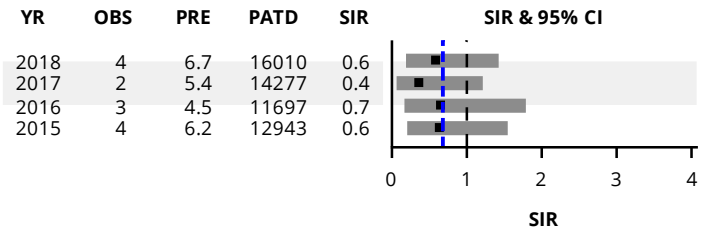
Healthcare Facility-Onset Laboratory Identified (LabID) Events

LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia

YR	OBS	PRE	PATD	SIR
2018	1	0.6	16897	N/A
2017	0	0.6	15215	N/A
2016	2	0.5	12457	N/A
2015	2	0.5	13849	N/A

N/A: Number of predicted infections <1; no SIR calculated

LabID - *C. difficile* Infection (CDI)



Data reported as of August 27, 2019

YR = reporting year; N = number of units reporting (CLABSI/CAUTI); OBS = observed number of infections

PRE = statistically 'predicted' number of infections, based on NHSN national baseline data

SIR = standardized infection ratio (observed/predicted number of infections)

CLD = central line days; UCD = urinary catheter days; PROC = procedures performed; PATD = patient days;

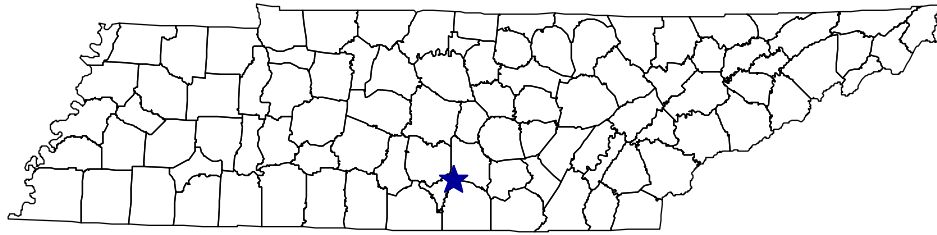
N/A = data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

- Significantly lower than NHSN SIR of 1
- Not significantly different from NHSN SIR of 1
- Significantly higher than NHSN SIR of 1
- - - 2018 TN SIR
- - - NHSN SIR=1

**Tennova Healthcare - Harton (Harton Reg Med Ctr), Tullahoma, Coffee County**

Medical School Affiliation: None

Bed Size Category: 50-99 beds



**Healthcare-Associated Infections (HAI) Summary**

**Standardized Infection Ratio (SIR) by Infection Type, 01/01/2017-12/31/2017**

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		
		Observed	Predicted		SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	1	0.7	1025	N/A	N/A	0.85
	Adult/Pediatric Ward	0	0.3	502	N/A	N/A	0.68
CAUTI	Adult/Pediatric ICU	1	1.2	1671	0.82	( 0.04, 4.04 )	0.71
	Adult/Pediatric Ward	4	0.9	1431	N/A	N/A	0.72
SSI	Colon surgery	0	0.7	36	N/A	N/A	0.83
	Abdominal hysterectomy	0	0.1	21	N/A	N/A	1.08
LabID	MRSA bacteremia	0	0.6	16583	N/A	N/A	1.09
	C. difficile infection	4	6.5	16583	0.61	( 0.19, 1.47 )	0.83

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at Tennova Healthcare - Harton (Harton Reg Med Ctr)*

**Healthcare Personnel Influenza Vaccination - '2017/2018' Influenza Season**

**Healthcare Personnel Category (Total)**



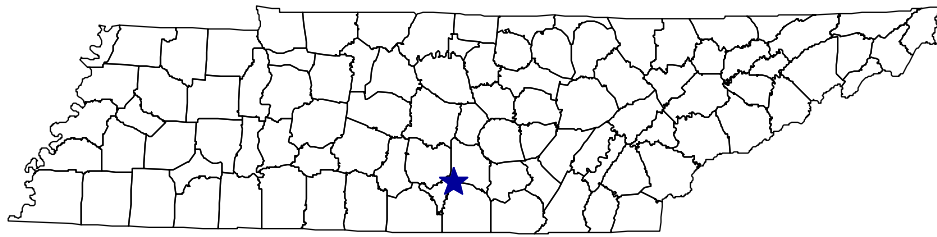
**Healthcare Personnel Vaccinated (%)**

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

**Tennova Healthcare - Harton (Harton Reg Med Ctr), Tullahoma, Coffee County**

Medical School Affiliation: None

Bed Size Category: 100-399 beds



**Healthcare-Associated Infections (HAI) Summary**

**Standardized Infection Ratio (SIR) by Infection Type, 01/01/2018-12/31/2018**

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		TN SIR
		Observed	Predicted		SIR*	95% CI	
CLABSI	Adult/Pediatric ICU	0	0.7	959	N/A	N/A	0.76
	Adult/Pediatric Ward	0	0.2	457	N/A	N/A	0.63
CAUTI	Adult/Pediatric ICU	3	1.1	1628	2.52	( 0.64, 6.86 )	0.70
	Adult/Pediatric Ward	4	0.6	953	N/A	N/A	0.73
SSI	Colon surgery	0	0.6	31	N/A	N/A	0.79
	Abdominal hysterectomy	0	0.1	28	N/A	N/A	0.78
LabID	MRSA bacteremia	5	0.6	14673	N/A	N/A	1.29
	C. difficile infection	0	6.3	14673	0.00	( 0.00, 0.48 )	0.68

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at Tennova Healthcare - Harton (Harton Reg Med Ctr)*

**Healthcare Personnel Influenza Vaccination - '2018/2019' Influenza Season**

**Healthcare Personnel Category (Total)**



**Healthcare Personnel Vaccinated (%)**

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric ICUs

YR	N	OBS	PRE	CLD	SIR
2018	1	0	0.7	959	N/A
2017	1	1	0.7	1025	N/A
2016	1	0	0.6	913	N/A
2015	1	0	0.6	908	N/A

N/A: Number of predicted infections <1; no SIR calculated

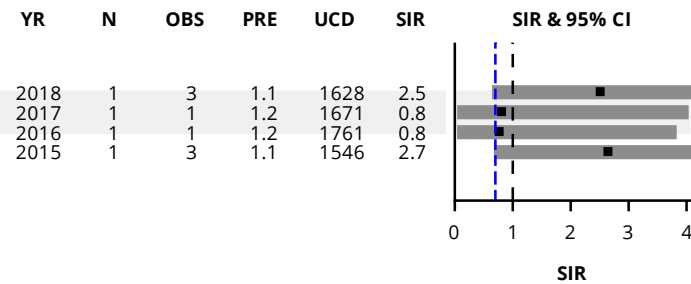
CLABSI - Adult/Pediatric Wards

YR	N	OBS	PRE	CLD	SIR
2018	2	0	0.2	457	N/A
2017	2	0	0.3	502	N/A
2016	2	0	0.4	697	N/A
2015	2	0	0.5	917	N/A

N/A: Number of predicted infections <1; no SIR calculated

Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICUs



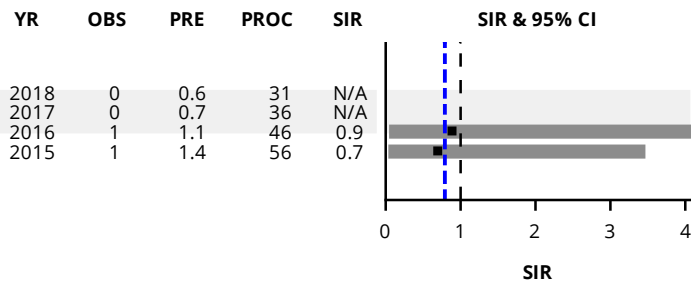
CAUTI - Adult/Pediatric Wards

YR	N	OBS	PRE	UCD	SIR
2018	2	4	0.6	953	N/A
2017	2	4	0.9	1431	N/A
2016	2	1	0.9	1386	N/A
2015	2	4	1.0	1654	3.7

N/A: Number of predicted infections <1; no SIR calculated

Surgical Site Infections (SSI)

SSI - Colon Surgery



SSI - Abdominal Hysterectomy

YR	OBS	PRE	PROC	SIR
2018	0	0.1	28	N/A
2017	0	0.1	21	N/A
2016	0	0.1	23	N/A
2015	0	0.2	27	N/A

N/A: Number of predicted infections <1; no SIR calculated

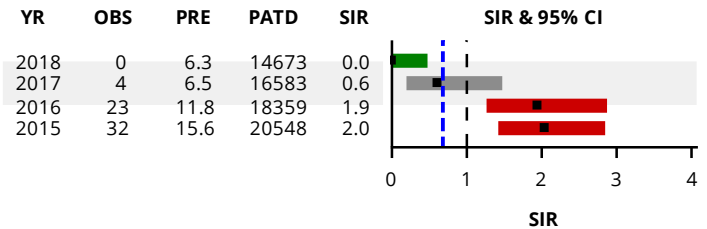
Healthcare Facility-Onset Laboratory Identified (LabID) Events

LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia

YR	OBS	PRE	PATD	SIR
2018	5	0.6	14673	N/A
2017	0	0.6	16583	N/A
2016	1	0.7	18359	N/A
2015	2	0.8	20550	N/A

N/A: Number of predicted infections <1; no SIR calculated

LabID - *C. difficile* Infection (CDI)



Data reported as of August 27, 2019

YR = reporting year; N = number of units reporting (CLABSI/CAUTI); OBS = observed number of infections  
 PRE = statistically 'predicted' number of infections, based on NHSN national baseline data  
 SIR = standardized infection ratio (observed/predicted number of infections)  
 CLD = central line days; UCD = urinary catheter days; PROC = procedures performed; PATD = patient days;  
 N/A = data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

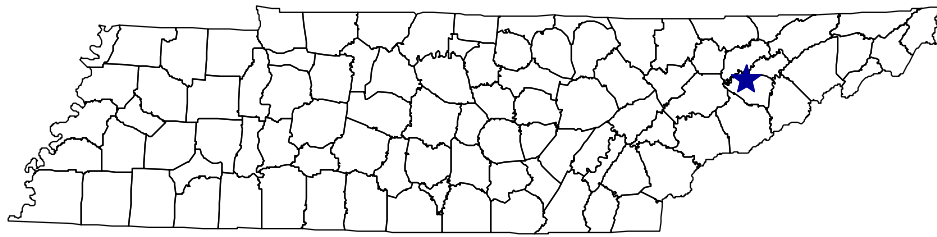
■ Significantly lower than NHSN SIR of 1  
 ■ Not significantly different from NHSN SIR of 1  
 ■ Significantly higher than NHSN SIR of 1  
 - - - 2018 TN SIR  
 - - - NHSN SIR=1



## Tennova Healthcare - Jefferson Memorial Hospital, Jefferson City, Jefferson County

Medical School Affiliation: None

Bed Size Category: 50-99 beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2017-12/31/2017

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		
		Observed	Predicted		SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	N/A	N/A	N/A	N/A	N/A	0.85
	Adult/Pediatric Ward	0	0.0	87	N/A	N/A	0.68
CAUTI	Adult/Pediatric ICU	0	0.2	452	N/A	N/A	0.71
	Adult/Pediatric Ward	0	0.5	1100	N/A	N/A	0.72
SSI	Colon surgery	N/A	N/A	N/A	N/A	N/A	0.83
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	1.08
LabID	MRSA bacteremia	0	0.6	25961	N/A	N/A	1.09
	C. difficile infection	2	23.0	25961	0.09	(0.02, 0.29)	0.83

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

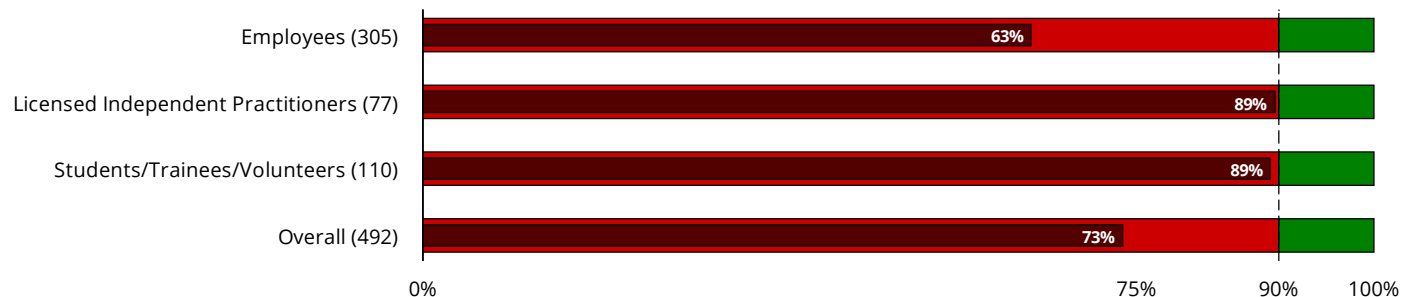
**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at Tennova Healthcare - Jefferson Memorial Hospital*

### Healthcare Personnel Influenza Vaccination - '2017/2018' Influenza Season

#### Healthcare Personnel Category (Total)



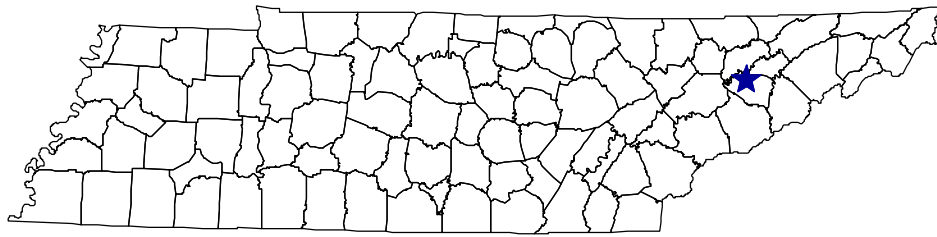
#### Healthcare Personnel Vaccinated (%)

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

## Tennova Healthcare - Jefferson Memorial Hospital, Jefferson City, Jefferson County

Medical School Affiliation: None

Bed Size Category: 50-99 beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2018-12/31/2018

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		TN SIR
		Observed	Predicted		SIR*	95% CI	
CLABSI	Adult/Pediatric ICU	0	0.0	114	N/A	N/A	0.76
	Adult/Pediatric Ward	0	0.2	398	N/A	N/A	0.63
CAUTI	Adult/Pediatric ICU	0	0.3	585	N/A	N/A	0.70
	Adult/Pediatric Ward	1	0.7	1453	N/A	N/A	0.73
SSI	Colon surgery	0	0.7	39	N/A	N/A	0.79
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	0.78
LabID	MRSA bacteremia	1	0.8	28800	N/A	N/A	1.29
	C. difficile infection	3	23.9	28800	0.13	(0.03, 0.34)	0.68

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

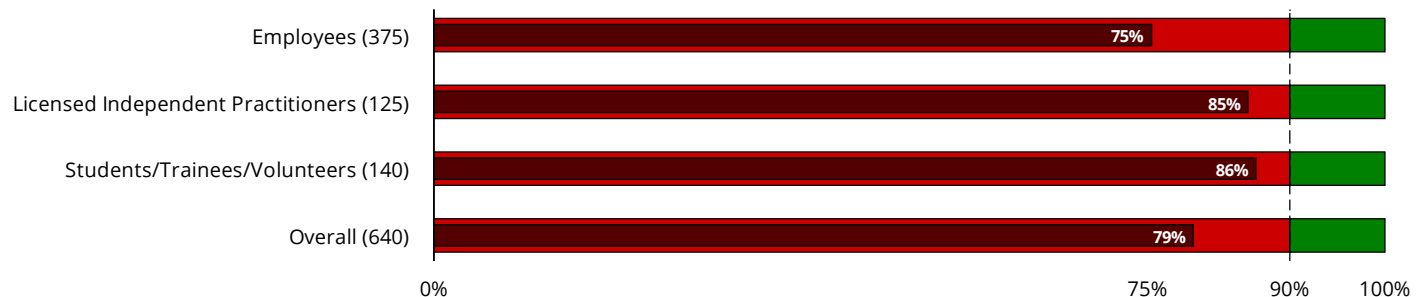
**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at Tennova Healthcare - Jefferson Memorial Hospital*

### Healthcare Personnel Influenza Vaccination - '2018/2019' Influenza Season

#### Healthcare Personnel Category (Total)



#### Healthcare Personnel Vaccinated (%)

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric ICUs

YR	N	OBS	PRE	CLD	SIR
2018	1	0	0.0	114	N/A
2017	1	N/A	N/A	N/A	N/A
2016	1	0	0.0	107	N/A
2015	1	0	0.1	211	N/A

N/A: Number of predicted infections <1; no SIR calculated

CLABSI - Adult/Pediatric Wards

YR	N	OBS	PRE	CLD	SIR
2018	1	0	0.2	398	N/A
2017	1	0	0.0	87	N/A
2016	1	0	0.1	174	N/A
2015	1	0	0.1	201	N/A

N/A: Number of predicted infections <1; no SIR calculated

Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICUs

YR	N	OBS	PRE	UCD	SIR
2018	1	0	0.3	585	N/A
2017	1	0	0.2	452	N/A
2016	1	0	0.2	463	N/A
2015	1	0	0.4	789	N/A

N/A: Number of predicted infections <1; no SIR calculated

CAUTI - Adult/Pediatric Wards

YR	N	OBS	PRE	UCD	SIR
2018	1	1	0.7	1453	N/A
2017	1	0	0.5	1100	N/A
2016	1	0	0.5	1045	N/A
2015	1	0	0.6	1356	N/A

N/A: Number of predicted infections <1; no SIR calculated

Surgical Site Infections (SSI)

SSI - Colon Surgery

YR	OBS	PRE	PROC	SIR
2018	0	0.7	39	N/A
2017	N/A	N/A	N/A	N/A
2016	N/A	N/A	N/A	N/A
2015	N/A	N/A	N/A	N/A

N/A: Number of predicted infections <1; no SIR calculated

SSI - Abdominal Hysterectomy

YR	OBS	PRE	PROC	SIR
2018	N/A	N/A	N/A	N/A
2017	N/A	N/A	N/A	N/A
2016	N/A	N/A	N/A	N/A
2015	N/A	N/A	N/A	N/A

N/A: Number of predicted infections <1; no SIR calculated

Healthcare Facility-Onset Laboratory Identified (LabID) Events

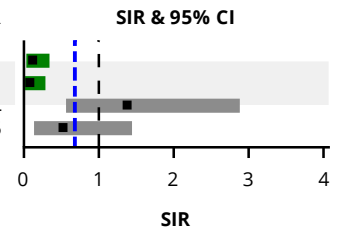
LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia

YR	OBS	PRE	PATD	SIR
2018	1	0.8	28800	N/A
2017	0	0.6	25961	N/A
2016	0	0.1	5927	N/A
2015	1	0.2	7610	N/A

N/A: Number of predicted infections <1; no SIR calculated

LabID - *C. difficile* Infection (CDI)

YR	OBS	PRE	PATD	SIR
2018	3	23.9	28800	0.1
2017	2	23.0	25961	0.1
2016	6	4.3	5927	1.4
2015	3	5.6	7268	0.5



Data reported as of August 27, 2019

YR = reporting year; N = number of units reporting (CLABSI/CAUTI); OBS = observed number of infections

PRE = statistically 'predicted' number of infections, based on NHSN national baseline data

SIR = standardized infection ratio (observed/predicted number of infections)

CLD = central line days; UCD = urinary catheter days; PROC = procedures performed; PATD = patient days;

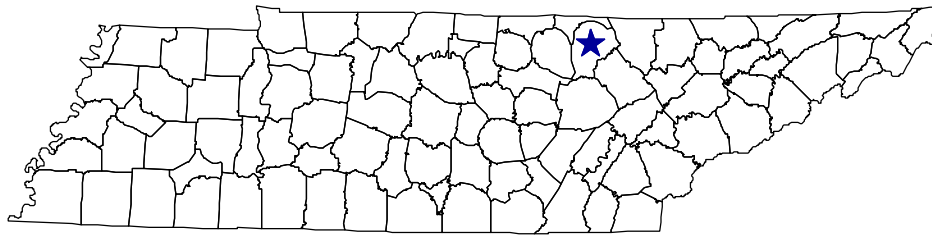
N/A = data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

- Significantly lower than NHSN SIR of 1
- Not significantly different from NHSN SIR of 1
- Significantly higher than NHSN SIR of 1
- - - 2018 TN SIR
- - - NHSN SIR=1

**Tennova Healthcare - Jamestown (Jamestown Reg Med Ctr), Jamestown, Fentress County**

Medical School Affiliation: None

Bed Size Category: 50-99 beds



**Healthcare-Associated Infections (HAI) Summary**

**Standardized Infection Ratio (SIR) by Infection Type, 01/01/2017-12/31/2017**

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		
		Observed	Predicted		SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric Ward	0	0.6	1083	N/A	N/A	0.68
CAUTI	Adult/Pediatric Ward	0	0.5	1140	N/A	N/A	0.72
SSI	Colon surgery	N/A	N/A	N/A	N/A	N/A	0.83
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	1.08
LabID	MRSA bacteremia	0	0.0	3510	N/A	N/A	1.09
	C. difficile infection	0	0.6	3510	N/A	N/A	0.83

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

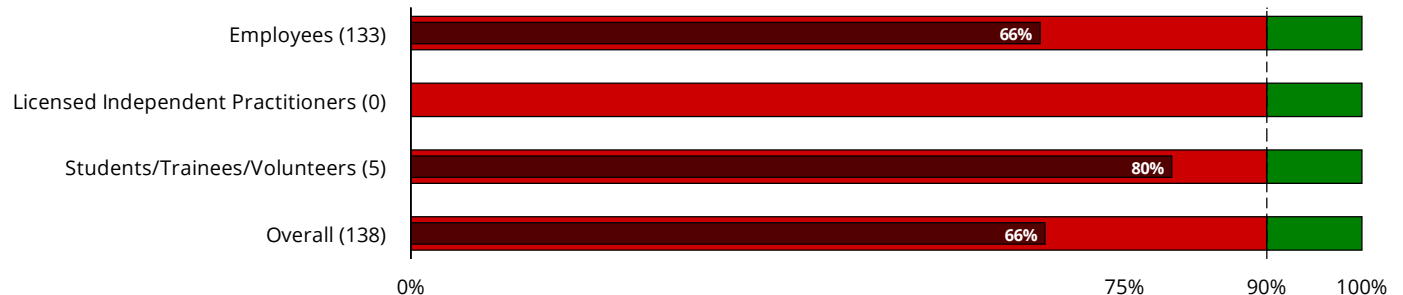
**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at Tennova Healthcare - Jamestown (Jamestown Reg Med Ctr)*

**Healthcare Personnel Influenza Vaccination - '2017/2018' Influenza Season**

**Healthcare Personnel Category (Total)**



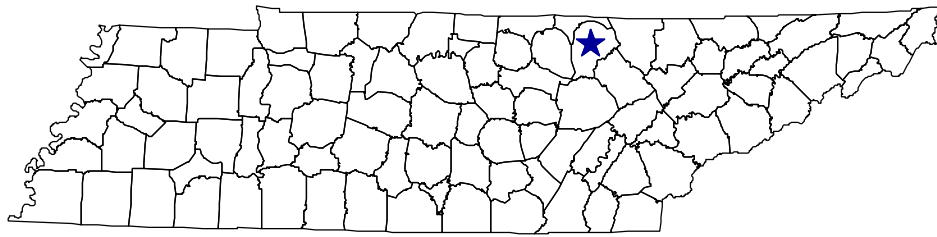
**Healthcare Personnel Vaccinated (%)**

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

**Tennova Healthcare - Jamestown (Jamestown Reg Med Ctr), Jamestown, Fentress County**

Medical School Affiliation: None

Bed Size Category: 50-99 beds



**Healthcare-Associated Infections (HAI) Summary**

**Standardized Infection Ratio (SIR) by Infection Type, 01/01/2018-12/31/2018**

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		TN SIR
		Observed	Predicted		SIR*	95% CI	
CLABSI	Adult/Pediatric Ward	0	1.5	2643	0.00	( 0.00, 1.96 )	0.63
CAUTI	Adult/Pediatric Ward	0	1.3	2681	0.00	( 0.00, 2.28 )	0.73
SSI	Colon surgery	N/A	N/A	N/A	N/A	N/A	0.79
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	0.78
LabID	MRSA bacteremia	0	0.0	2915	N/A	N/A	1.29
	C. difficile infection	0	0.5	2915	N/A	N/A	0.68

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

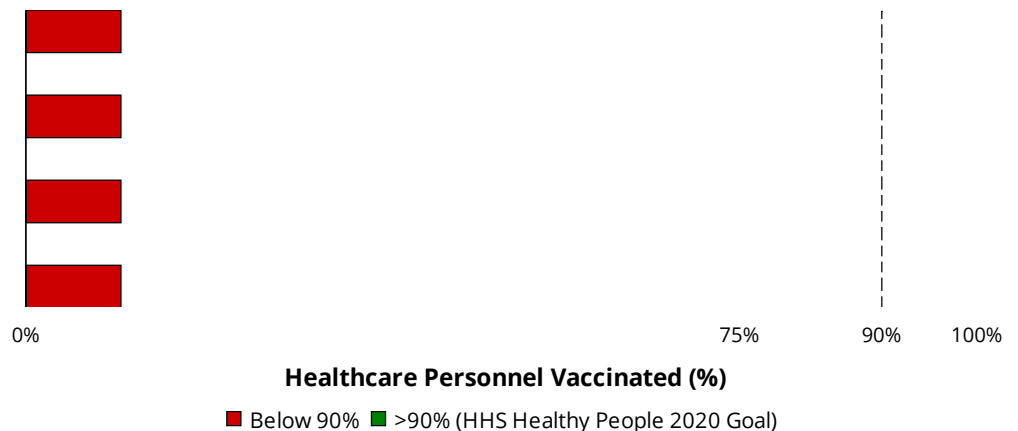
**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

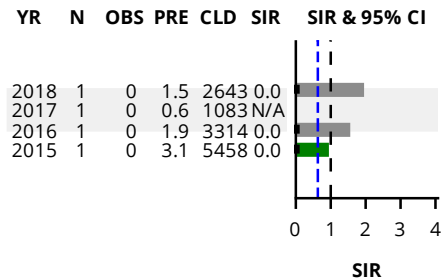
*See page 3 for more detailed information about HAIs at Tennova Healthcare - Jamestown (Jamestown Reg Med Ctr)*

**Healthcare Personnel Influenza Vaccination - '2018/2019' Influenza Season**



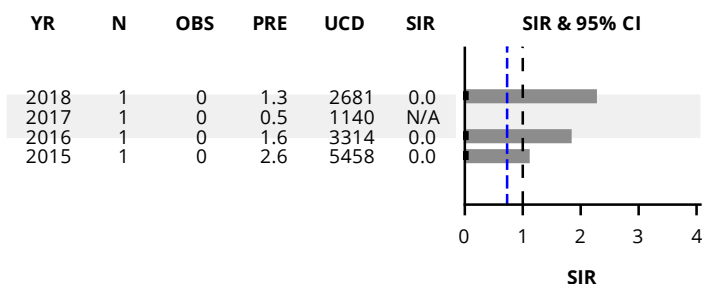
### Central Line-Associated Bloodstream Infections (CLABSI)

#### CLABSI - Adult/Pediatric Wards



### Catheter-Associated Urinary Tract Infections (CAUTI)

#### CAUTI - Adult/Pediatric Wards



### Surgical Site Infections (SSI)

#### SSI - Colon Surgery

YR	OBS	PRE	PROC	SIR
2018	N/A	N/A	N/A	N/A
2017	N/A	N/A	N/A	N/A
2016	N/A	N/A	N/A	N/A
2015	N/A	N/A	N/A	N/A

#### SSI - Abdominal Hysterectomy

YR	OBS	PRE	PROC	SIR
2018	N/A	N/A	N/A	N/A
2017	N/A	N/A	N/A	N/A
2016	N/A	N/A	N/A	N/A
2015	N/A	N/A	N/A	N/A

N/A: Number of predicted infections <1; no SIR calculated

N/A: Number of predicted infections <1; no SIR calculated

### Healthcare Facility-Onset Laboratory Identified (LabID) Events

#### LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia

YR	OBS	PRE	PATD	SIR
2018	0	0.0	2915	N/A
2017	0	0.0	3510	N/A
2016	0	0.0	3314	N/A
2015	0	0.1	5056	N/A

#### LabID - *C. difficile* Infection (CDI)

YR	OBS	PRE	PATD	SIR
2018	0	0.5	2915	N/A
2017	0	0.6	3510	N/A
2016	0	0.6	3314	N/A
2015	0	0.9	5056	N/A

N/A: Number of predicted infections <1; no SIR calculated

N/A: Number of predicted infections <1; no SIR calculated

Data reported as of August 27, 2019

**YR** = reporting year; **N** = number of units reporting (CLABSI/CAUTI); **OBS** = observed number of infections

**PRE** = statistically 'predicted' number of infections, based on NHSN national baseline data

**SIR** = standardized infection ratio (observed/predicted number of infections)

**CLD** = central line days; **UCD** = urinary catheter days; **PROC** = procedures performed; **PATD** = patient days;

**N/A** = data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

■ Significantly lower than NHSN SIR of 1

■ Not significantly different from NHSN SIR of 1

■ Significantly higher than NHSN SIR of 1

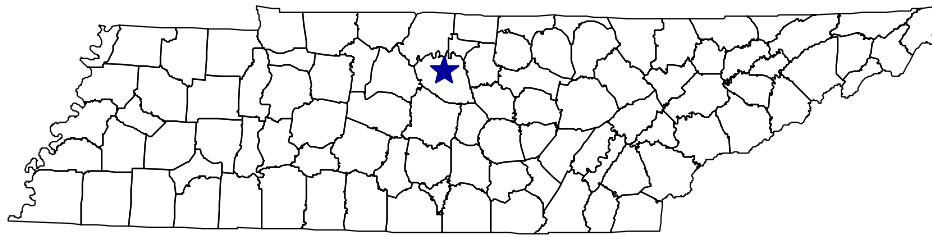
--- 2018 TN SIR

--- NHSN SIR=1

**Tennova Healthcare - Lebanon (University Med Ctr- Lebanon), Lebanon, Wilson County**

Medical School Affiliation: None

Bed Size Category: 100-399 beds



**Healthcare-Associated Infections (HAI) Summary**

**Standardized Infection Ratio (SIR) by Infection Type, 01/01/2017-12/31/2017**

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		TN SIR
		Observed	Predicted		SIR*	95% CI	
CLABSI	Adult/Pediatric ICU	1	1.3	1742	0.76	( 0.04, 3.76 )	0.85
	Adult/Pediatric Ward	1	1.2	1868	0.82	( 0.04, 4.06 )	0.68
CAUTI	Adult/Pediatric ICU	1	1.7	2456	0.56	( 0.03, 2.75 )	0.71
	Adult/Pediatric Ward	2	2.2	3289	0.89	( 0.15, 2.94 )	0.72
SSI	Colon surgery	N/A	N/A	N/A	N/A	N/A	0.83
	Abdominal hysterectomy	1	0.3	62	N/A	N/A	1.08
LabID	MRSA bacteremia	0	0.9	19600	N/A	N/A	1.09
	C. difficile infection	7	7.9	18406	0.88	( 0.39, 1.74 )	0.83

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

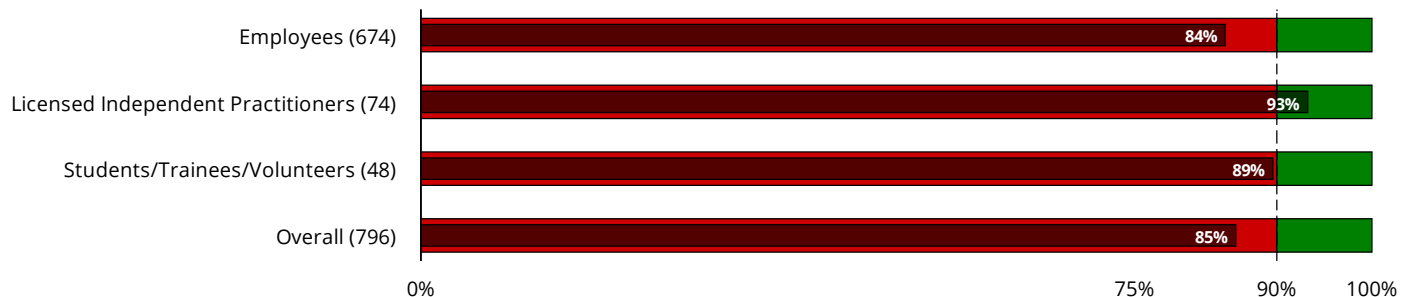
**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at Tennova Healthcare - Lebanon (University Med Ctr- Lebanon)*

**Healthcare Personnel Influenza Vaccination - '2017/2018' Influenza Season**

**Healthcare Personnel Category (Total)**



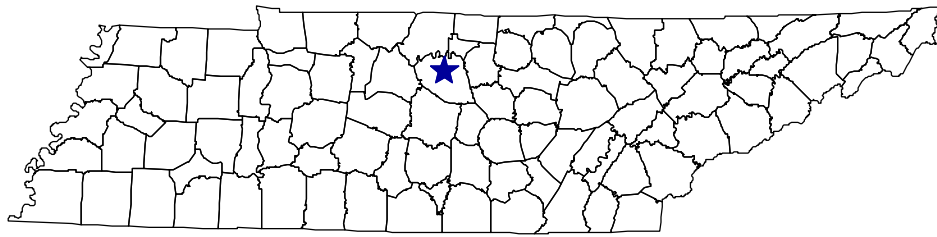
**Healthcare Personnel Vaccinated (%)**

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

## Tennova Healthcare - Lebanon (University Med Ctr- Lebanon), Lebanon, Wilson County

Medical School Affiliation: None

Bed Size Category: 100-399 beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2018-12/31/2018

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		TN SIR
		Observed	Predicted		SIR*	95% CI	
CLABSI	Adult/Pediatric ICU	1	0.8	1160	N/A	N/A	0.76
	Adult/Pediatric Ward	1	0.3	566	N/A	N/A	0.63
CAUTI	Adult/Pediatric ICU	0	1.3	1874	0.00	( 0.00, 2.19 )	0.70
	Adult/Pediatric Ward	1	0.9	1513	N/A	N/A	0.73
SSI	Colon surgery	N/A	N/A	N/A	N/A	N/A	0.79
	Abdominal hysterectomy	0	0.2	37	N/A	N/A	0.78
LabID	MRSA bacteremia	1	0.6	15474	N/A	N/A	1.29
	C. difficile infection	9	8.6	14391	1.04	( 0.51, 1.91 )	0.68

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at Tennova Healthcare - Lebanon (University Med Ctr- Lebanon)*

### Healthcare Personnel Influenza Vaccination - '2018/2019' Influenza Season

#### Healthcare Personnel Category (Total)



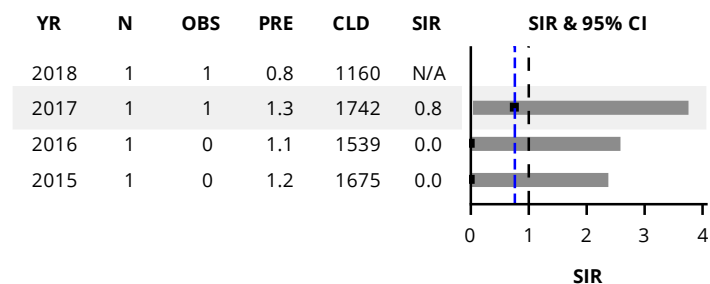
#### Healthcare Personnel Vaccinated (%)

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

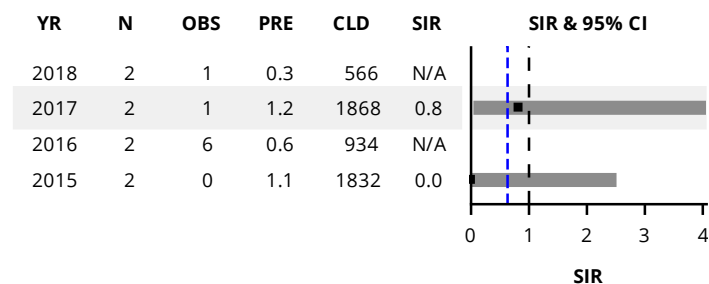


### Central Line-Associated Bloodstream Infections (CLABSI)

#### CLABSI - Adult/Pediatric ICUs

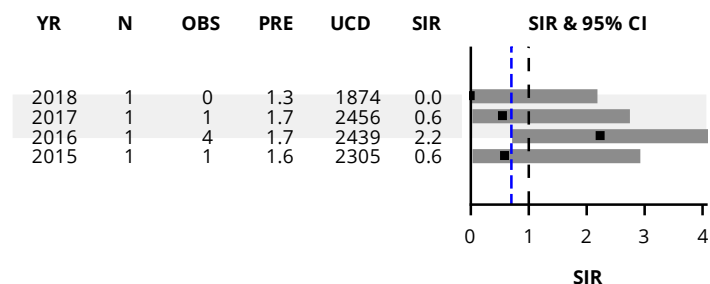


#### CLABSI - Adult/Pediatric Wards

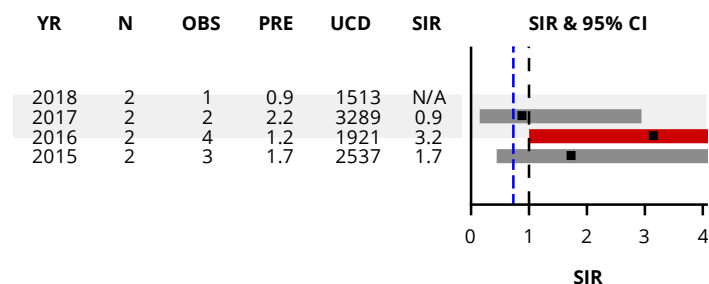


### Catheter-Associated Urinary Tract Infections (CAUTI)

#### CAUTI - Adult/Pediatric ICUs



#### CAUTI - Adult/Pediatric Wards



### Surgical Site Infections (SSI)

#### SSI - Colon Surgery

YR	OBS	PRE	PROC	SIR
2018	N/A	N/A	N/A	N/A
2017	N/A	N/A	N/A	N/A
2016	0	0.3	26	N/A
2015	0	0.6	33	N/A

#### SSI - Abdominal Hysterectomy

YR	OBS	PRE	PROC	SIR
2018	0	0.2	37	N/A
2017	1	0.3	62	N/A
2016	0	0.4	67	N/A
2015	0	0.5	86	N/A

N/A: Number of predicted infections <1; no SIR calculated

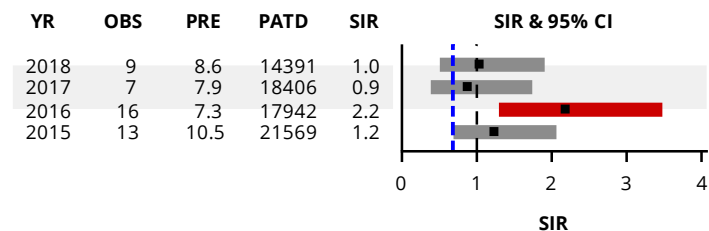
N/A: Number of predicted infections <1; no SIR calculated

### Healthcare Facility-Onset Laboratory Identified (LabID) Events

#### LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia

YR	OBS	PRE	PATD	SIR
2018	1	0.6	15474	N/A
2017	0	0.9	19600	N/A
2016	1	0.9	19173	N/A
2015	1	1.0	23032	0.9

#### LabID - *C. difficile* Infection (CDI)



N/A: Number of predicted infections <1; no SIR calculated

Data reported as of August 27, 2019

YR = reporting year; N = number of units reporting (CLABSI/CAUTI); OBS = observed number of infections

PRE = statistically 'predicted' number of infections, based on NHSN national baseline data

SIR = standardized infection ratio (observed/predicted number of infections)

CLD = central line days; UCD = urinary catheter days; PROC = procedures performed; PATD = patient days;

N/A = data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

■ Significantly lower than NHSN SIR of 1

■ Not significantly different from NHSN SIR of 1

■ Significantly higher than NHSN SIR of 1

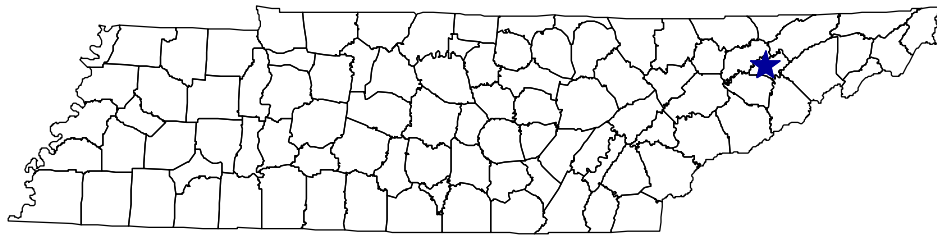
--- 2018 TN SIR

--- NHSN SIR=1

## Tennova Healthcare - Lakeway Regional Hospital, Morristown, Hamblen County

Medical School Affiliation: Graduate teaching

Bed Size Category: 100-399 beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2017-12/31/2017

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		TN SIR
		Observed	Predicted		SIR*	95% CI	
CLABSI	Adult/Pediatric ICU	0	0.0	93	N/A	N/A	0.85
	Adult/Pediatric Ward	0	0.0	83	N/A	N/A	0.68
CAUTI	Adult/Pediatric ICU	0	0.2	272	N/A	N/A	0.71
	Adult/Pediatric Ward	0	0.5	750	N/A	N/A	0.72
SSI	Colon surgery	N/A	N/A	N/A	N/A	N/A	0.83
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	1.08
LabID	MRSA bacteremia	0	0.2	5344	N/A	N/A	1.09
	C. difficile infection	0	1.6	5344	0.00	( 0.00, 1.86 )	0.83

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

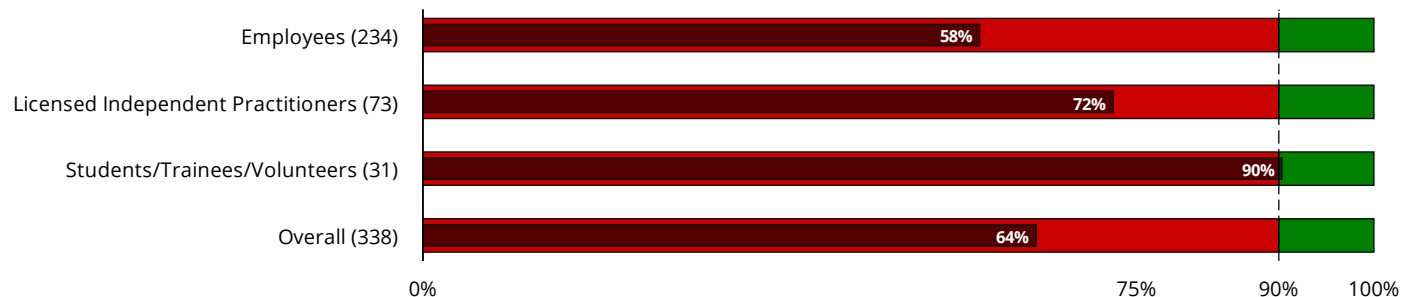
**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at Tennova Healthcare - Lakeway Regional Hospital*

### Healthcare Personnel Influenza Vaccination - '2017/2018' Influenza Season

#### Healthcare Personnel Category (Total)



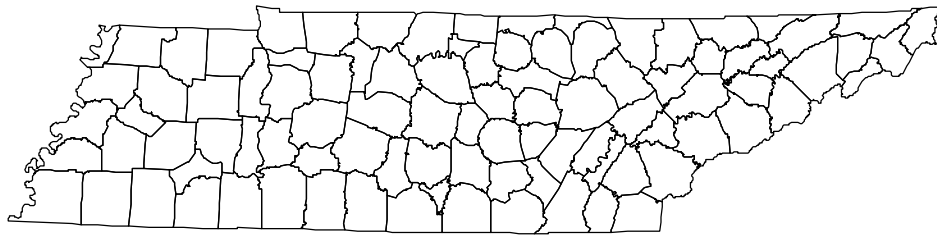
#### Healthcare Personnel Vaccinated (%)

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

## Tennova Healthcare - Lakeway Regional Hospital, , County

Medical School Affiliation:

Bed Size Category:



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2018-12/31/2018

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		
		Observed	Predicted		SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	0	0.0	57	N/A	N/A	0.76
	Adult/Pediatric Ward	0	0.1	163	N/A	N/A	0.63
CAUTI	Adult/Pediatric ICU	0	0.1	164	N/A	N/A	0.70
	Adult/Pediatric Ward	2	0.4	617	N/A	N/A	0.73
SSI	Colon surgery	N/A	N/A	N/A	N/A	N/A	0.79
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	0.78
LabID	MRSA bacteremia	0	0.1	2687	N/A	N/A	1.29
	C. difficile infection	0	0.7	2687	N/A	N/A	0.68

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

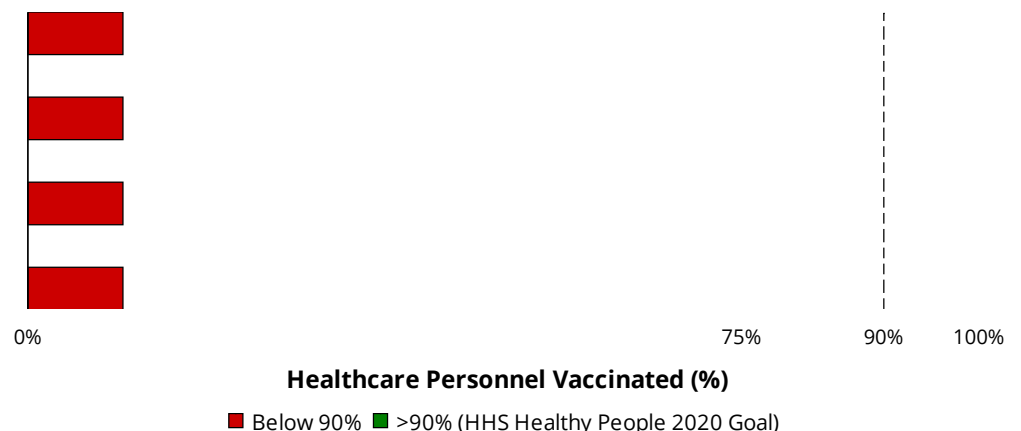
**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at Tennova Healthcare - Lakeway Regional Hospital*

### Healthcare Personnel Influenza Vaccination - '2018/2019' Influenza Season



### Central Line-Associated Bloodstream Infections (CLABSI)

#### CLABSI - Adult/Pediatric ICUs

YR	N	OBS	PRE	CLD	SIR
2018	1	0	0.0	57	N/A
2017	1	0	0.0	93	N/A
2016	1	0	0.0	72	N/A
2015	1	0	0.1	138	N/A

N/A: Number of predicted infections <1; no SIR calculated

#### CLABSI - Adult/Pediatric Wards

YR	N	OBS	PRE	CLD	SIR
2018	1	0	0.1	163	N/A
2017	1	0	0.0	83	N/A
2016	1	0	0.0	119	N/A
2015	1	1	0.0	96	N/A

N/A: Number of predicted infections <1; no SIR calculated

### Catheter-Associated Urinary Tract Infections (CAUTI)

#### CAUTI - Adult/Pediatric ICUs

YR	N	OBS	PRE	UCD	SIR
2018	1	0	0.1	164	N/A
2017	1	0	0.2	272	N/A
2016	1	0	0.2	293	N/A
2015	1	0	0.5	628	N/A

N/A: Number of predicted infections <1; no SIR calculated

#### CAUTI - Adult/Pediatric Wards

YR	N	OBS	PRE	UCD	SIR
2018	1	2	0.4	617	N/A
2017	1	0	0.5	750	N/A
2016	1	0	0.7	987	N/A
2015	1	0	0.7	1066	N/A

N/A: Number of predicted infections <1; no SIR calculated

### Surgical Site Infections (SSI)

#### SSI - Colon Surgery

YR	OBS	PRE	PROC	SIR
2018	N/A	N/A	N/A	N/A
2017	N/A	N/A	N/A	N/A
2016	N/A	N/A	N/A	N/A
2015	N/A	N/A	N/A	N/A

N/A: Number of predicted infections <1; no SIR calculated

#### SSI - Abdominal Hysterectomy

YR	OBS	PRE	PROC	SIR
2018	N/A	N/A	N/A	N/A
2017	N/A	N/A	N/A	N/A
2016	N/A	N/A	N/A	N/A
2015	N/A	N/A	N/A	N/A

N/A: Number of predicted infections <1; no SIR calculated

### Healthcare Facility-Onset Laboratory Identified (LabID) Events

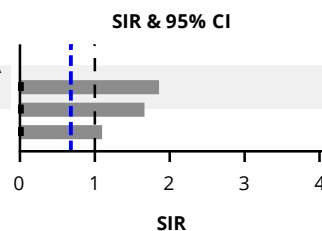
#### LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia

YR	OBS	PRE	PATD	SIR
2018	0	0.1	2687	N/A
2017	0	0.2	5344	N/A
2016	0	0.2	5965	N/A
2015	1	0.2	7005	N/A

N/A: Number of predicted infections <1; no SIR calculated

#### LabID - *C. difficile* Infection (CDI)

YR	OBS	PRE	PATD	SIR
2018	0	0.7	2687	N/A
2017	0	1.6	5344	0.0
2016	0	1.8	5965	0.0
2015	0	2.7	7147	0.0



Data reported as of August 27, 2019

YR = reporting year; N = number of units reporting (CLABSI/CAUTI); OBS = observed number of infections

PRE = statistically 'predicted' number of infections, based on NHSN national baseline data

SIR = standardized infection ratio (observed/predicted number of infections)

CLD = central line days; UCD = urinary catheter days; PROC = procedures performed; PATD = patient days;

N/A = data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

■ Significantly lower than NHSN SIR of 1

■ Not significantly different from NHSN SIR of 1

■ Significantly higher than NHSN SIR of 1

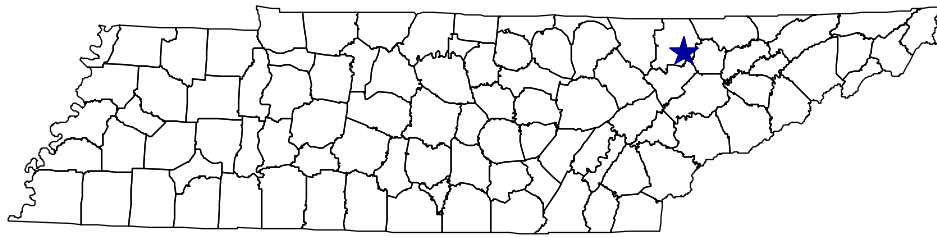
--- 2018 TN SIR

--- NHSN SIR=1

## Tennova Healthcare - Lafollette Medical Center, Lafollette, Campbell County

Medical School Affiliation: None

Bed Size Category: 50-99 beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2017-12/31/2017

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		
		Observed	Predicted		SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	1	0.1	270	N/A	N/A	0.85
	Adult/Pediatric Ward	0	0.0	141	N/A	N/A	0.68
CAUTI	Adult/Pediatric ICU	0	0.6	1185	N/A	N/A	0.71
	Adult/Pediatric Ward	0	0.9	1796	N/A	N/A	0.72
SSI	Colon surgery	N/A	N/A	N/A	N/A	N/A	0.83
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	1.08
LabID	MRSA bacteremia	0	0.1	10269	N/A	N/A	1.09
	C. difficile infection	0	3.9	10269	0.00	(0.00, 0.77)	0.83

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

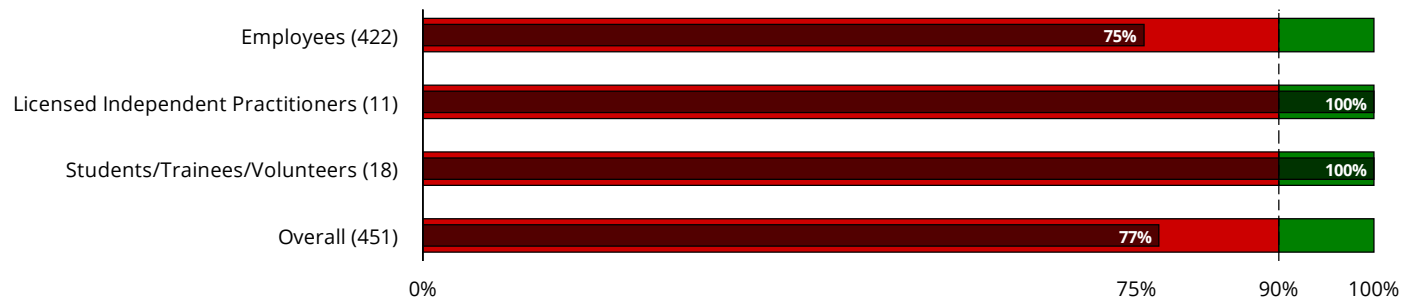
**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at Tennova Healthcare - Lafollette Medical Center*

### Healthcare Personnel Influenza Vaccination - '2017/2018' Influenza Season

#### Healthcare Personnel Category (Total)



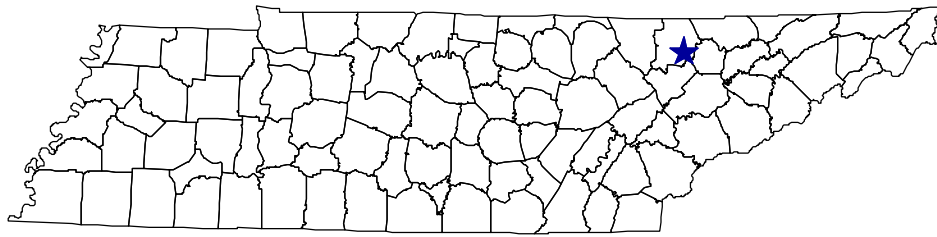
#### Healthcare Personnel Vaccinated (%)

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

**Tennova Healthcare - Lafollette Medical Center, Lafollette, Campbell County**

Medical School Affiliation: None

Bed Size Category: 50-99 beds



**Healthcare-Associated Infections (HAI) Summary**

**Standardized Infection Ratio (SIR) by Infection Type, 01/01/2018-12/31/2018**

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days/Procedures Performed/Patient Days	SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	0	0.0	82	N/A	N/A	0.76
	Adult/Pediatric Ward	0	0.0	69	N/A	N/A	0.63
CAUTI	Adult/Pediatric ICU	0	0.6	1218	N/A	N/A	0.70
	Adult/Pediatric Ward	0	0.8	1605	N/A	N/A	0.73
SSI	Colon surgery	N/A	N/A	N/A	N/A	N/A	0.79
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	0.78
LabID	MRSA bacteremia	0	0.2	9232	N/A	N/A	1.29
	C. difficile infection	0	3.5	9232	0.00	(0.00, 0.85)	0.68

Green highlighting indicates an SIR significantly LOWER than the 2015 national baseline

Red highlighting indicates an SIR significantly HIGHER than the 2015 national baseline

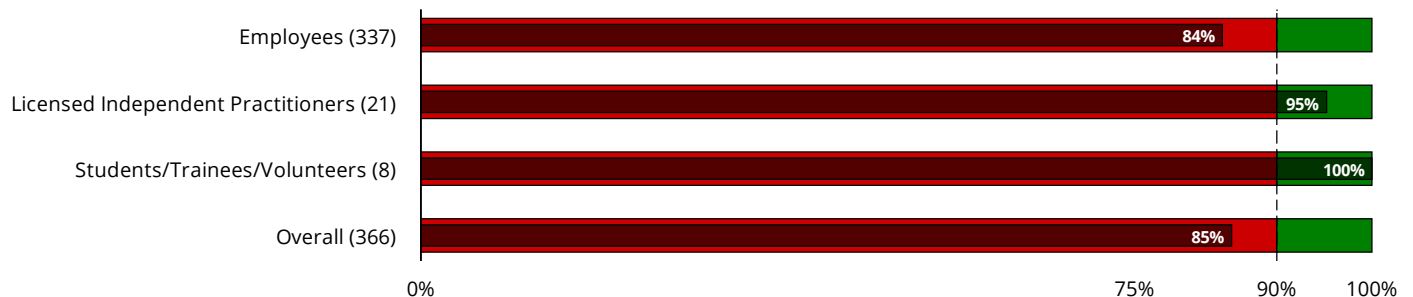
N/A: Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

See page 3 for more detailed information about HAIs at Tennova Healthcare - Lafollette Medical Center

**Healthcare Personnel Influenza Vaccination - '2018/2019' Influenza Season**

**Healthcare Personnel Category (Total)**



**Healthcare Personnel Vaccinated (%)**

Below 90% >90% (HHS Healthy People 2020 Goal)

Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric ICUs

YR	N	OBS	PRE	CLD	SIR
2018	1	0	0.0	82	N/A
2017	1	1	0.1	270	N/A
2016	1	0	0.1	168	N/A
2015	1	0	0.2	328	N/A

N/A: Number of predicted infections <1; no SIR calculated

CLABSI - Adult/Pediatric Wards

YR	N	OBS	PRE	CLD	SIR
2018	2	0	0.0	69	N/A
2017	2	0	0.0	141	N/A
2016	2	0	0.3	461	N/A
2015	2	0	0.3	574	N/A

N/A: Number of predicted infections <1; no SIR calculated

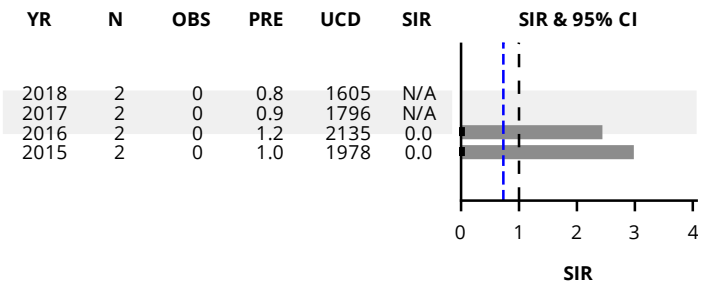
Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICUs

YR	N	OBS	PRE	UCD	SIR
2018	1	0	0.6	1218	N/A
2017	1	0	0.6	1185	N/A
2016	1	0	0.7	1164	N/A
2015	1	0	0.7	1445	N/A

N/A: Number of predicted infections <1; no SIR calculated

CAUTI - Adult/Pediatric Wards



N/A: Number of predicted infections <1; no SIR calculated

Surgical Site Infections (SSI)

SSI - Colon Surgery

YR	OBS	PRE	PROC	SIR
2018	N/A	N/A	N/A	N/A
2017	N/A	N/A	N/A	N/A
2016	N/A	N/A	N/A	N/A
2015	N/A	N/A	N/A	N/A

N/A: Number of predicted infections <1; no SIR calculated

SSI - Abdominal Hysterectomy

YR	OBS	PRE	PROC	SIR
2018	N/A	N/A	N/A	N/A
2017	N/A	N/A	N/A	N/A
2016	N/A	N/A	N/A	N/A
2015	N/A	N/A	N/A	N/A

N/A: Number of predicted infections <1; no SIR calculated

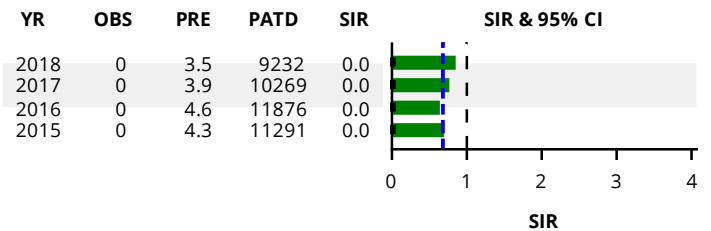
Healthcare Facility-Onset Laboratory Identified (LabID) Events

LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia

YR	OBS	PRE	PATD	SIR
2018	0	0.2	9232	N/A
2017	0	0.1	10269	N/A
2016	0	0.3	11876	N/A
2015	0	0.2	11309	N/A

N/A: Number of predicted infections <1; no SIR calculated

LabID - *C. difficile* Infection (CDI)



N/A: Number of predicted infections <1; no SIR calculated

Data reported as of August 27, 2019

YR = reporting year; N = number of units reporting (CLABSI/CAUTI); OBS = observed number of infections

PRE = statistically 'predicted' number of infections, based on NHSN national baseline data

SIR = standardized infection ratio (observed/predicted number of infections)

CLD = central line days; UCD = urinary catheter days; PROC = procedures performed; PATD = patient days;

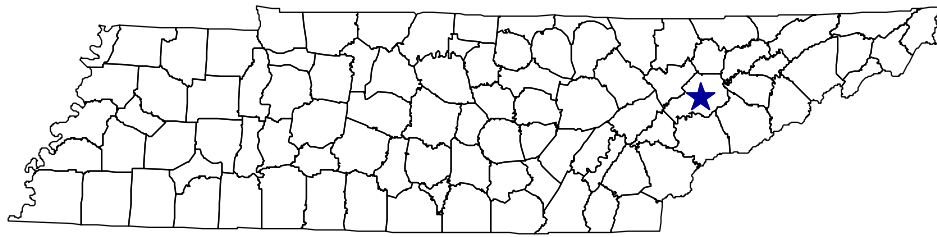
N/A = data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

- Significantly lower than NHSN SIR of 1
- Not significantly different from NHSN SIR of 1
- Significantly higher than NHSN SIR of 1
- - - 2018 TN SIR
- - - NHSN SIR=1

## Tennova Healthcare - North Knoxville Medical Center, Knoxville, Knox County

Medical School Affiliation: None

Bed Size Category: 50-99 beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2017-12/31/2017

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		
		Observed	Predicted		SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	0	0.7	1181	N/A	N/A	0.85
	Adult/Pediatric Ward	4	1.4	2529	2.73	(0.87, 6.58)	0.68
CAUTI	Adult/Pediatric ICU	3	0.8	1536	N/A	N/A	0.71
	Adult/Pediatric Ward	1	0.8	1656	N/A	N/A	0.72
SSI	Colon surgery	0	1.4	90	0.00	(0.00, 2.08)	0.83
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	1.08
LabID	MRSA bacteremia	3	1.3	23382	2.30	(0.58, 6.25)	1.09
	C. difficile infection	6	13.4	23382	0.45	(0.18, 0.93)	0.83

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

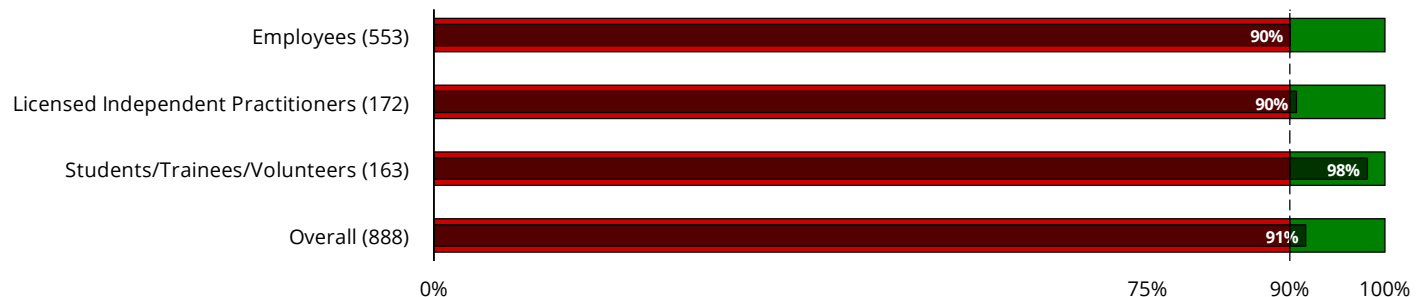
**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at Tennova Healthcare - North Knoxville Medical Center*

### Healthcare Personnel Influenza Vaccination - '2017/2018' Influenza Season

#### Healthcare Personnel Category (Total)



#### Healthcare Personnel Vaccinated (%)

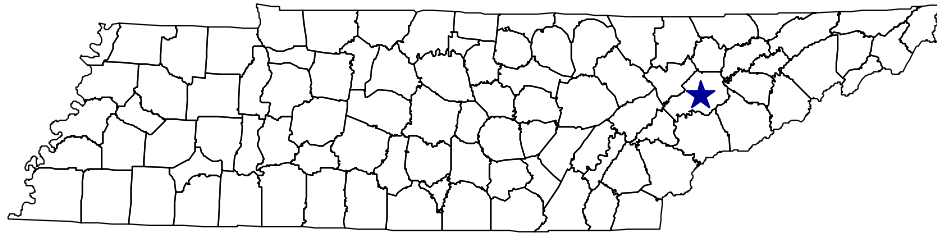
■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)



**Tennova Healthcare - North Knoxville Medical Center, Knoxville, Knox County**

Medical School Affiliation: None

Bed Size Category: 100-399 beds



**Healthcare-Associated Infections (HAI) Summary**

**Standardized Infection Ratio (SIR) by Infection Type, 01/01/2018-12/31/2018**

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		
		Observed	Predicted		SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	0	0.8	1160	N/A	N/A	0.76
	Adult/Pediatric Ward	4	1.6	2564	2.40	(0.76, 5.78)	0.63
CAUTI	Adult/Pediatric ICU	3	1.1	1597	2.57	(0.65, 6.99)	0.70
	Adult/Pediatric Ward	0	1.3	1889	0.00	(0.00, 2.25)	0.73
SSI	Colon surgery	1	1.5	71	0.66	(0.03, 3.27)	0.79
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	0.78
LabID	MRSA bacteremia	6	1.3	26938	4.41	(1.79, 9.17)	1.29
	C. difficile infection	10	16.2	26938	0.62	(0.31, 1.10)	0.68

Green highlighting indicates an SIR significantly LOWER than the 2015 national baseline

Red highlighting indicates an SIR significantly HIGHER than the 2015 national baseline

N/A: Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

See page 3 for more detailed information about HAIs at Tennova Healthcare - North Knoxville Medical Center

**Healthcare Personnel Influenza Vaccination - '2018/2019' Influenza Season**

**Healthcare Personnel Category (Total)**



**Healthcare Personnel Vaccinated (%)**

Below 90% >90% (HHS Healthy People 2020 Goal)

Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric ICUs

YR	N	OBS	PRE	CLD	SIR
2018	1	0	0.8	1160	N/A
2017	1	0	0.7	1181	N/A
2016	1	0	0.7	1103	N/A
2015	1	2	0.8	1337	N/A

CLABSI - Adult/Pediatric Wards

YR	N	OBS	PRE	CLD	SIR	SIR & 95% CI
2018	2	4	1.6	2564	2.4	
2017	2	4	1.4	2529	2.7	
2016	2	4	1.5	2625	2.6	
2015	2	2	1.7	3072	1.1	

N/A: Number of predicted infections <1; no SIR calculated

Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICUs

YR	N	OBS	PRE	UCD	SIR	SIR & 95% CI
2018	1	3	1.1	1597	2.6	
2017	1	3	0.8	1536	N/A	
2016	1	2	0.8	1504	N/A	
2015	1	2	0.9	1760	N/A	

CAUTI - Adult/Pediatric Wards

YR	N	OBS	PRE	UCD	SIR	SIR & 95% CI
2018	2	0	1.3	1889	0.0	
2017	2	1	0.8	1656	N/A	
2016	2	1	0.9	1701	N/A	
2015	2	1	1.1	2094	0.9	

Surgical Site Infections (SSI)

SSI - Colon Surgery

YR	OBS	PRE	PROC	SIR	SIR & 95% CI
2018	1	1.5	71	0.7	
2017	0	1.4	90	0.0	
2016	1	1.3	75	0.7	
2015	2	1.5	94	1.3	

SSI - Abdominal Hysterectomy

YR	OBS	PRE	PROC	SIR
2018	N/A	N/A	N/A	N/A
2017	N/A	N/A	N/A	N/A
2016	0	0.1	35	N/A
2015	N/A	N/A	N/A	N/A

N/A: Number of predicted infections <1; no SIR calculated

Healthcare Facility-Onset Laboratory Identified (LabID) Events

LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia

YR	OBS	PRE	PATD	SIR	SIR & 95% CI
2018	6	1.3	26938	4.4	
2017	3	1.3	23382	2.3	
2016	3	0.9	22840	N/A	
2015	6	0.9	21757	N/A	

LabID - *C. difficile* Infection (CDI)

YR	OBS	PRE	PATD	SIR	SIR & 95% CI
2018	10	16.2	26938	0.6	
2017	6	13.4	23382	0.4	
2016	12	15.5	22840	0.8	
2015	10	13.0	21757	0.8	

Data reported as of August 27, 2019

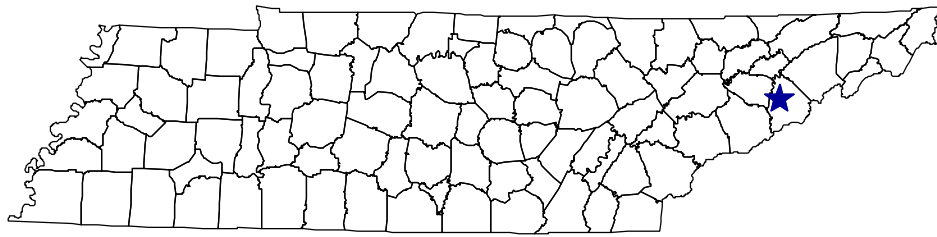
YR = reporting year; N = number of units reporting (CLABSI/CAUTI); OBS = observed number of infections  
 PRE = statistically 'predicted' number of infections, based on NHSN national baseline data  
 SIR = standardized infection ratio (observed/predicted number of infections)  
 CLD = central line days; UCD = urinary catheter days; PROC = procedures performed; PATD = patient days;  
 N/A = data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

■ Significantly lower than NHSN SIR of 1  
 ■ Not significantly different from NHSN SIR of 1  
 ■ Significantly higher than NHSN SIR of 1  
 - - - 2018 TN SIR  
 - - - NHSN SIR=1

## Tennova Healthcare - Newport Medical Center, Newport, Cocke County

Medical School Affiliation: None

Bed Size Category: <50 beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2017-12/31/2017

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		
		Observed	Predicted		SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	0	0.1	231	N/A	N/A	0.85
	Adult/Pediatric Ward	0	0.2	391	N/A	N/A	0.68
CAUTI	Adult/Pediatric ICU	0	0.3	636	N/A	N/A	0.71
	Adult/Pediatric Ward	1	0.4	873	N/A	N/A	0.72
SSI	Colon surgery	N/A	N/A	N/A	N/A	N/A	0.83
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	1.08
LabID	MRSA bacteremia	0	0.1	5724	N/A	N/A	1.09
	C. difficile infection	1	3.3	5427	0.29	( 0.02, 1.45 )	0.83

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at Tennova Healthcare - Newport Medical Center*

### Healthcare Personnel Influenza Vaccination - '2017/2018' Influenza Season

#### Healthcare Personnel Category (Total)



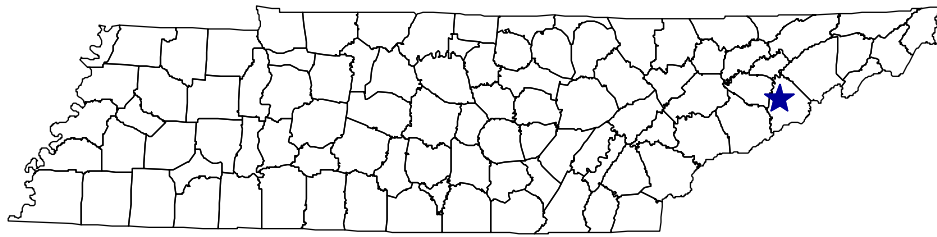
#### Healthcare Personnel Vaccinated (%)

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

## Tennova Healthcare - Newport Medical Center, Newport, Cocke County

Medical School Affiliation: None

Bed Size Category: <50 beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2018-12/31/2018

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		
		Observed	Predicted		SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	0	0.1	259	N/A	N/A	0.76
	Adult/Pediatric Ward	0	0.4	739	N/A	N/A	0.63
CAUTI	Adult/Pediatric ICU	0	0.3	677	N/A	N/A	0.70
	Adult/Pediatric Ward	0	0.5	1078	N/A	N/A	0.73
SSI	Colon surgery	N/A	N/A	N/A	N/A	N/A	0.79
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	0.78
LabID	MRSA bacteremia	0	0.1	6241	N/A	N/A	1.29
	C. difficile infection	4	4.4	5944	0.90	( 0.29, 2.17 )	0.68

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

**See page 3 for more detailed information about HAIs at Tennova Healthcare - Newport Medical Center**

### Healthcare Personnel Influenza Vaccination - '2018/2019' Influenza Season

#### Healthcare Personnel Category (Total)



#### Healthcare Personnel Vaccinated (%)

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

### Central Line-Associated Bloodstream Infections (CLABSI)

#### CLABSI - Adult/Pediatric ICUs

YR	N	OBS	PRE	CLD	SIR
2018	1	0	0.1	259	N/A
2017	1	0	0.1	231	N/A
2016	1	0	0.1	158	N/A
2015	1	0	0.0	88	N/A

N/A: Number of predicted infections <1; no SIR calculated

#### CLABSI - Adult/Pediatric Wards

YR	N	OBS	PRE	CLD	SIR
2018	1	0	0.4	739	N/A
2017	1	0	0.2	391	N/A
2016	1	0	0.1	280	N/A
2015	1	0	0.1	268	N/A

N/A: Number of predicted infections <1; no SIR calculated

### Catheter-Associated Urinary Tract Infections (CAUTI)

#### CAUTI - Adult/Pediatric ICUs

YR	N	OBS	PRE	UCD	SIR
2018	1	0	0.3	677	N/A
2017	1	0	0.3	636	N/A
2016	1	1	0.3	675	N/A
2015	1	0	0.2	531	N/A

N/A: Number of predicted infections <1; no SIR calculated

#### CAUTI - Adult/Pediatric Wards

YR	N	OBS	PRE	UCD	SIR
2018	1	0	0.5	1078	N/A
2017	1	1	0.4	873	N/A
2016	1	1	0.5	984	N/A
2015	1	0	0.5	968	N/A

N/A: Number of predicted infections <1; no SIR calculated

### Surgical Site Infections (SSI)

#### SSI - Colon Surgery

YR	OBS	PRE	PROC	SIR
2018	N/A	N/A	N/A	N/A
2017	N/A	N/A	N/A	N/A
2016	N/A	N/A	N/A	N/A
2015	N/A	N/A	N/A	N/A

N/A: Number of predicted infections <1; no SIR calculated

#### SSI - Abdominal Hysterectomy

YR	OBS	PRE	PROC	SIR
2018	N/A	N/A	N/A	N/A
2017	N/A	N/A	N/A	N/A
2016	N/A	N/A	N/A	N/A
2015	N/A	N/A	N/A	N/A

N/A: Number of predicted infections <1; no SIR calculated

### Healthcare Facility-Onset Laboratory Identified (LabID) Events

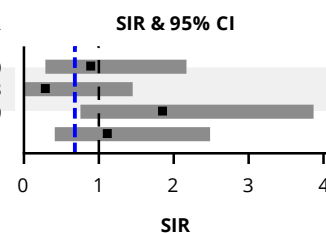
#### LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia

YR	OBS	PRE	PATD	SIR
2018	0	0.1	6241	N/A
2017	0	0.1	5724	N/A
2016	0	0.1	6121	N/A
2015	0	0.1	6591	N/A

N/A: Number of predicted infections <1; no SIR calculated

#### LabID - *C. difficile* Infection (CDI)

YR	OBS	PRE	PATD	SIR
2018	4	4.4	5944	0.9
2017	1	3.3	5427	0.3
2016	6	3.2	5812	1.9
2015	5	4.4	6028	1.1



Data reported as of August 27, 2019

**YR** = reporting year; **N** = number of units reporting (CLABSI/CAUTI); **OBS** = observed number of infections

**PRE** = statistically 'predicted' number of infections, based on NHSN national baseline data

**SIR** = standardized infection ratio (observed/predicted number of infections)

**CLD** = central line days; **UCD** = urinary catheter days; **PROC** = procedures performed; **PATD** = patient days;

**N/A** = data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

■ Significantly lower than NHSN SIR of 1

■ Not significantly different from NHSN SIR of 1

■ Significantly higher than NHSN SIR of 1

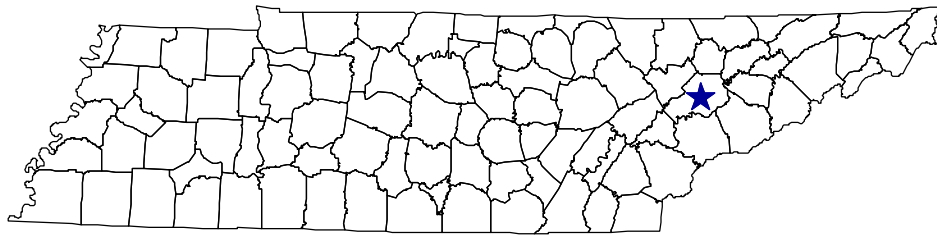
--- 2018 TN SIR

--- NHSN SIR=1

## Tennova Healthcare - Physician's Regional Medical Center, Knoxville, Knox County

Medical School Affiliation: None

Bed Size Category: 100-399 beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2017-12/31/2017

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		TN SIR
		Observed	Predicted		SIR*	95% CI	
CLABSI	Adult/Pediatric ICU	6	3.0	3501	1.98	( 0.80, 4.11 )	0.85
	Neonatal ICU	N/A	N/A	N/A	<b>N/A</b>	<b>N/A</b>	0.75
	Adult/Pediatric Ward	0	2.2	2971	0.00	( 0.00, 1.35 )	0.68
CAUTI	Adult/Pediatric ICU	6	5.2	4869	1.14	( 0.46, 2.36 )	0.71
	Adult/Pediatric Ward	2	2.1	2557	0.93	( 0.16, 3.08 )	0.72
SSI	Colon surgery	0	1.5	76	0.00	( 0.00, 1.93 )	0.83
	Abdominal hysterectomy	0	0.2	34	<b>N/A</b>	<b>N/A</b>	1.08
LabID	MRSA bacteremia	12	3.4	60766	<b>3.45</b>	<b>( 1.87, 5.86 )</b>	1.09

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

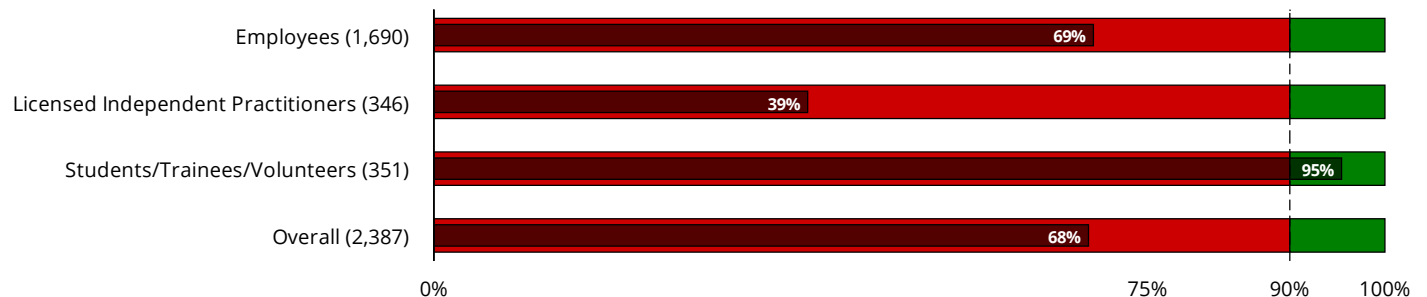
**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at Tennova Healthcare - Physician's Regional Medical Center*

### Healthcare Personnel Influenza Vaccination - '2017/2018' Influenza Season

#### Healthcare Personnel Category (Total)



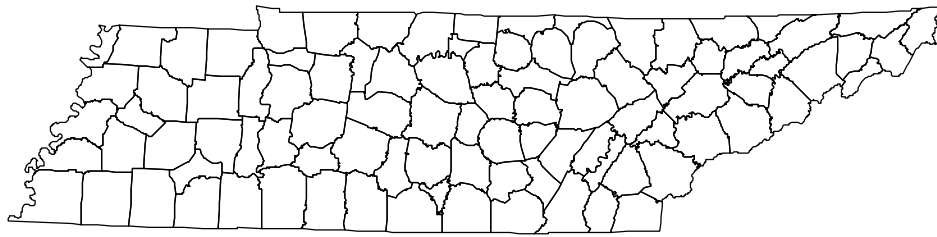
#### Healthcare Personnel Vaccinated (%)

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

## Tennova Healthcare - Physician's Regional Medical Center, , County

Medical School Affiliation:

Bed Size Category:



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2018-12/31/2018

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		TN SIR
		Observed	Predicted		SIR*	95% CI	
CLABSI	Adult/Pediatric ICU	2	1.7	2052	1.12	( 0.19, 3.71 )	0.76
	Neonatal ICU	N/A	N/A	N/A	<b>N/A</b>	<b>N/A</b>	0.79
	Adult/Pediatric Ward	3	1.4	1928	2.08	( 0.53, 5.65 )	0.63
CAUTI	Adult/Pediatric ICU	1	3.0	2923	0.33	( 0.02, 1.62 )	0.70
	Adult/Pediatric Ward	4	1.8	2214	2.15	( 0.68, 5.18 )	0.73
SSI	Colon surgery	2	1.4	68	1.42	( 0.24, 4.70 )	0.79
	Abdominal hysterectomy	1	0.2	29	<b>N/A</b>	<b>N/A</b>	0.78
LabID	MRSA bacteremia	10	2.1	43527	<b>4.61</b>	<b>( 2.34, 8.21 )</b>	1.29

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

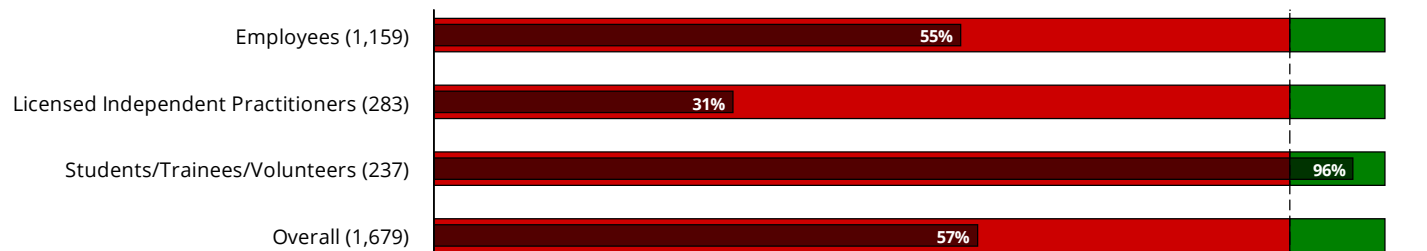
**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at Tennova Healthcare - Physician's Regional Medical Center*

### Healthcare Personnel Influenza Vaccination - '2018/2019' Influenza Season

#### Healthcare Personnel Category (Total)

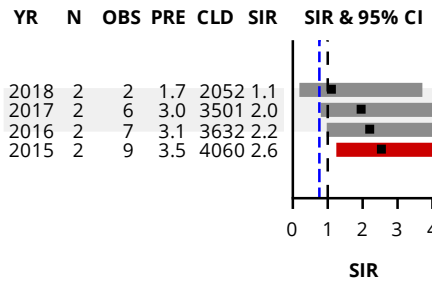


#### Healthcare Personnel Vaccinated (%)

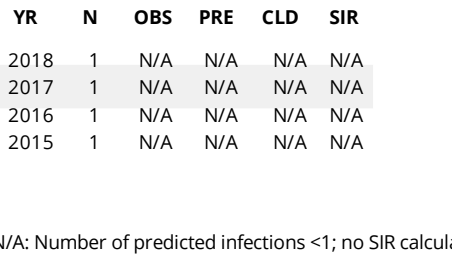
■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

### Central Line-Associated Bloodstream Infections (CLABSI)

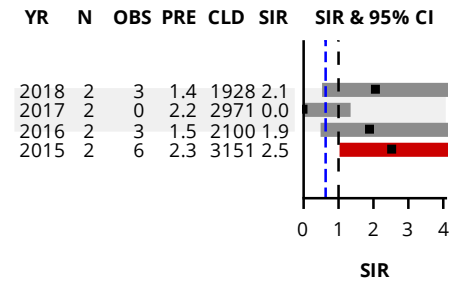
#### CLABSI - Adult/Pediatric ICUs



#### CLABSI - Neonatal ICUs

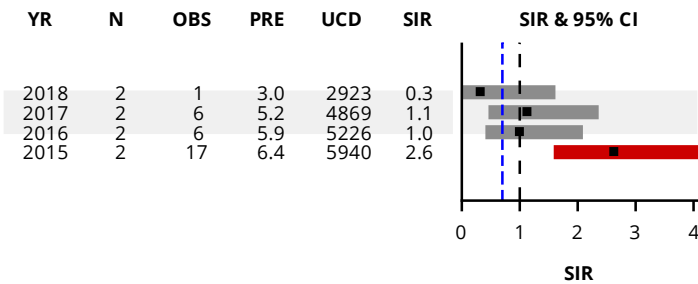


#### CLABSI - Adult/Pediatric Wards

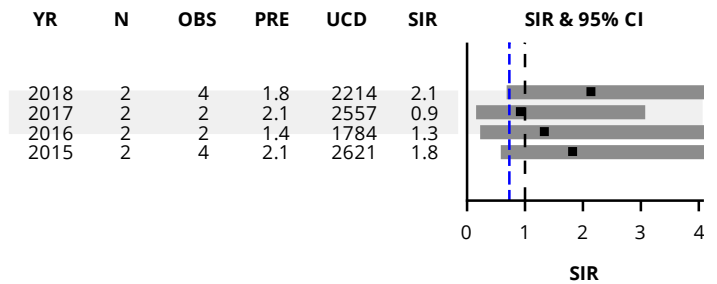


### Catheter-Associated Urinary Tract Infections (CAUTI)

#### CAUTI - Adult/Pediatric ICUs

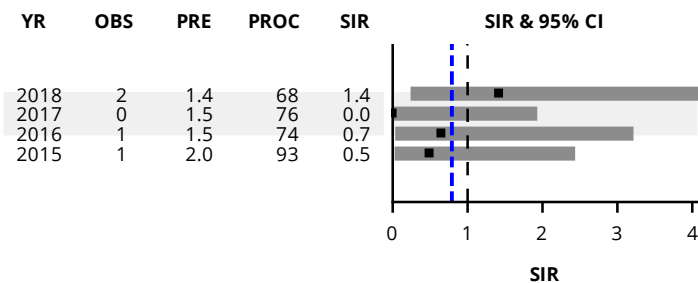


#### CAUTI - Adult/Pediatric Wards

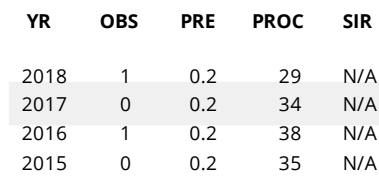


### Surgical Site Infections (SSI)

#### SSI - Colon Surgery



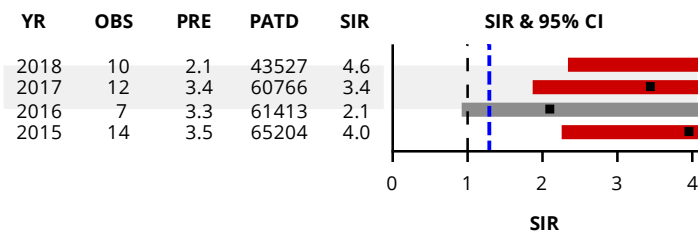
#### SSI - Abdominal Hysterectomy



N/A: Number of predicted infections <1; no SIR calculated

### Healthcare Facility-Onset Laboratory Identified (LabID) Events

#### LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia



Data reported as of August 27, 2019

YR = reporting year; N = number of units reporting (CLABSI/CAUTI); OBS = observed number of infections

PRE = statistically 'predicted' number of infections, based on NHSN national baseline data

SIR = standardized infection ratio (observed/predicted number of infections)

CLD = central line days; UCD = urinary catheter days; PROC = procedures performed; PATD = patient days;

N/A = data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

■ Significantly lower than NHSN SIR of 1

■ Not significantly different from NHSN SIR of 1

■ Significantly higher than NHSN SIR of 1

--- 2018 TN SIR

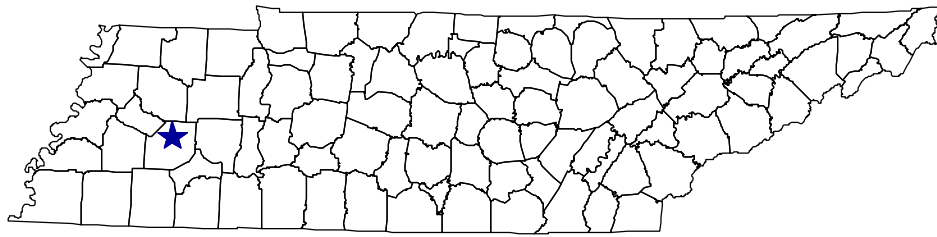
--- NHSN SIR=1



## Tennova Healthcare - Regional Jackson, Jackson, Madison County

Medical School Affiliation: Graduate teaching

Bed Size Category: 100-399 beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2017-12/31/2017

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		TN SIR
		Observed	Predicted		SIR*	95% CI	
CLABSI	Adult/Pediatric ICU	1	1.1	1289	0.89	( 0.04, 4.37 )	0.85
	Adult/Pediatric Ward	3	1.0	1374	2.89	( 0.74, 7.86 )	0.68
CAUTI	Adult/Pediatric ICU	1	1.6	2021	0.59	( 0.03, 2.93 )	0.71
	Adult/Pediatric Ward	3	1.2	1490	2.48	( 0.63, 6.75 )	0.72
SSI	Colon surgery	1	0.9	40	N/A	N/A	0.83
	Abdominal hysterectomy	1	0.1	24	N/A	N/A	1.08
LabID	MRSA bacteremia	1	0.8	17118	N/A	N/A	1.09
	C. difficile infection	6	9.8	16503	0.61	( 0.25, 1.27 )	0.83

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

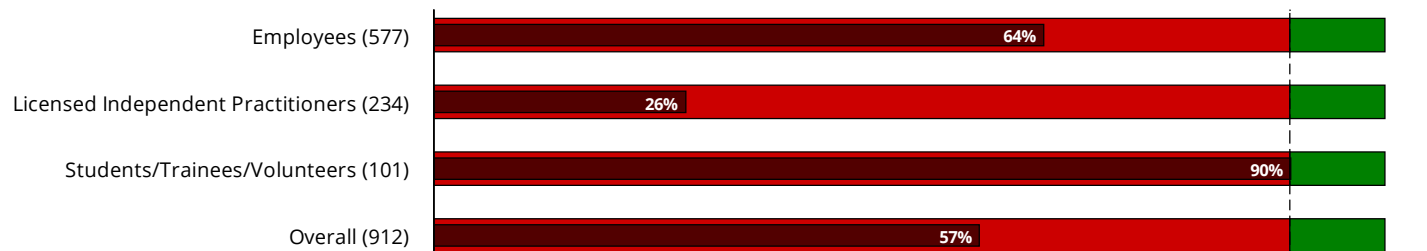
**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at Tennova Healthcare - Regional Jackson*

### Healthcare Personnel Influenza Vaccination - '2017/2018' Influenza Season

#### Healthcare Personnel Category (Total)



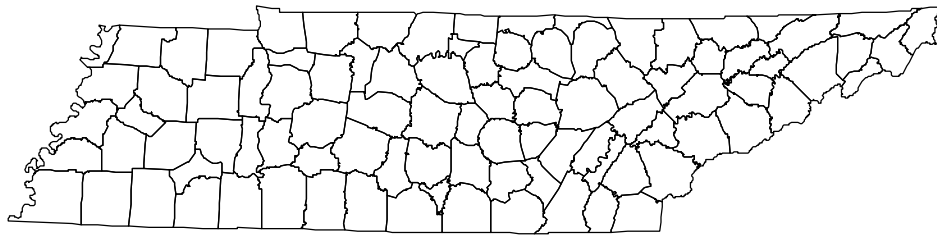
#### Healthcare Personnel Vaccinated (%)

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

## Tennova Healthcare - Regional Jackson, , County

Medical School Affiliation:

Bed Size Category:



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2018-12/31/2018

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		
		Observed	Predicted		SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	0	0.3	391	N/A	N/A	0.76
	Adult/Pediatric Ward	0	0.2	391	N/A	N/A	0.63
CAUTI	Adult/Pediatric ICU	0	0.5	688	N/A	N/A	0.70
	Adult/Pediatric Ward	0	0.3	367	N/A	N/A	0.73
SSI	Colon surgery	N/A	N/A	N/A	N/A	N/A	0.79
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	0.78
LabID	MRSA bacteremia	0	0.2	6155	N/A	N/A	1.29
	C. difficile infection	1	2.1	5919	0.47	( 0.02, 2.33 )	0.68

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

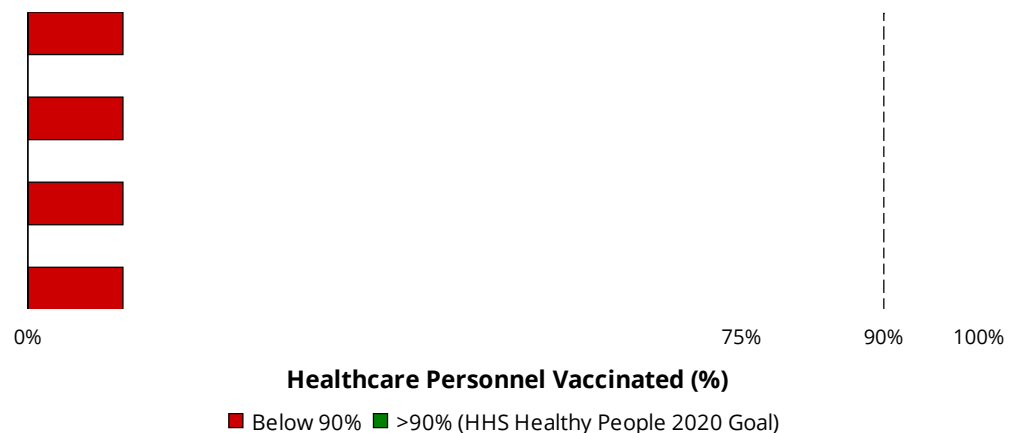
**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

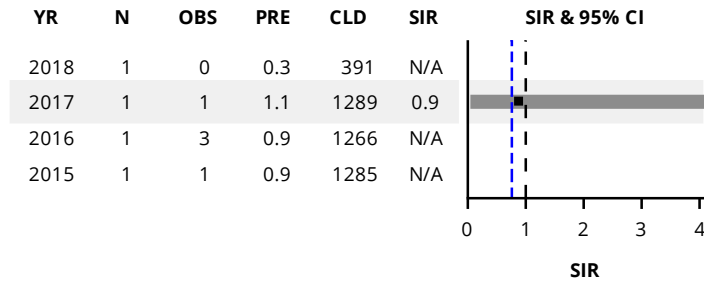
*See page 3 for more detailed information about HAIs at Tennova Healthcare - Regional Jackson*

### Healthcare Personnel Influenza Vaccination - '2018/2019' Influenza Season

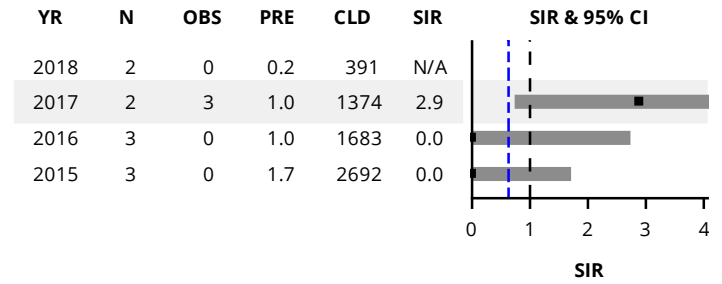


Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric ICUs

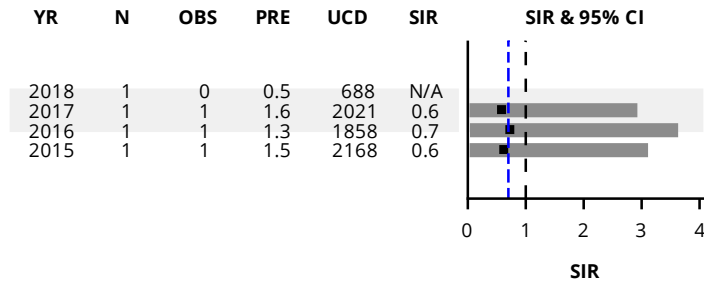


CLABSI - Adult/Pediatric Wards

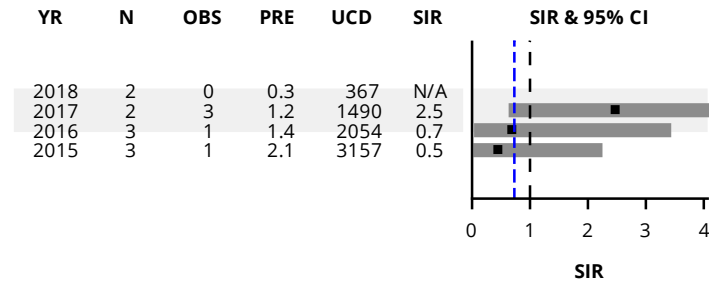


Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICUs

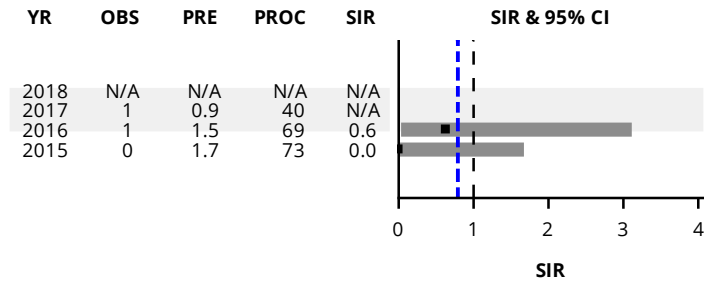


CAUTI - Adult/Pediatric Wards

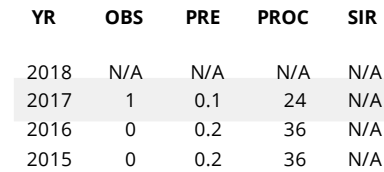


Surgical Site Infections (SSI)

SSI - Colon Surgery



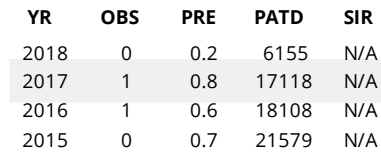
SSI - Abdominal Hysterectomy



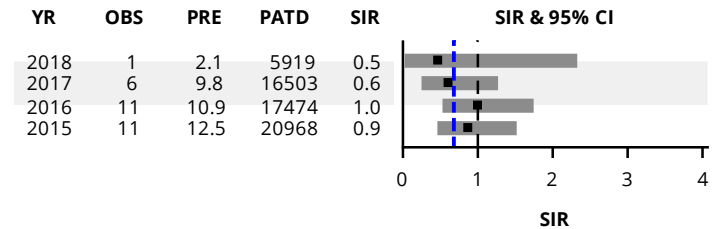
N/A: Number of predicted infections <1; no SIR calculated

Healthcare Facility-Onset Laboratory Identified (LabID) Events

LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia



LabID - *C. difficile* Infection (CDI)



N/A: Number of predicted infections <1; no SIR calculated

Data reported as of August 27, 2019

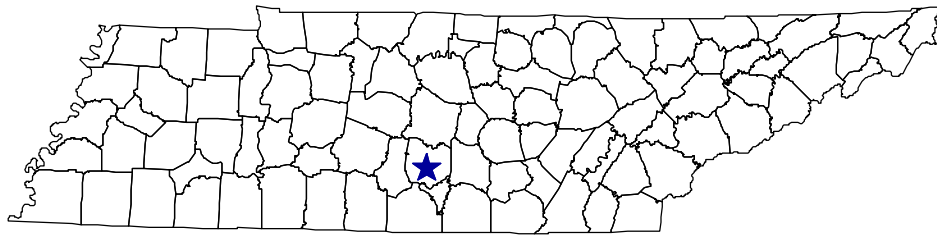
YR = reporting year; N = number of units reporting (CLABSI/CAUTI); OBS = observed number of infections  
 PRE = statistically 'predicted' number of infections, based on NHSN national baseline data  
 SIR = standardized infection ratio (observed/predicted number of infections)  
 CLD = central line days; UCD = urinary catheter days; PROC = procedures performed; PATD = patient days;  
 N/A = data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

■ Significantly lower than NHSN SIR of 1  
 ■ Not significantly different from NHSN SIR of 1  
 ■ Significantly higher than NHSN SIR of 1  
 - - - 2018 TN SIR  
 - - - NHSN SIR=1

## Tennova Healthcare - Shelbyville (Heritage Med Ctr), Shelbyville, Bedford County

Medical School Affiliation: None

Bed Size Category: 50-99 beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2017-12/31/2017

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		
		Observed	Predicted		SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	0	0.4	671	N/A	N/A	0.85
	Adult/Pediatric Ward	0	0.3	518	N/A	N/A	0.68
CAUTI	Adult/Pediatric ICU	0	0.5	1027	N/A	N/A	0.71
	Adult/Pediatric Ward	0	0.3	740	N/A	N/A	0.72
SSI	Colon surgery	N/A	N/A	N/A	N/A	N/A	0.83
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	1.08
LabID	MRSA bacteremia	0	0.2	4638	N/A	N/A	1.09
	C. difficile infection	3	1.6	4638	1.86	(0.47, 5.07)	0.83

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at Tennova Healthcare - Shelbyville (Heritage Med Ctr)*

### Healthcare Personnel Influenza Vaccination - '2017/2018' Influenza Season

#### Healthcare Personnel Category (Total)



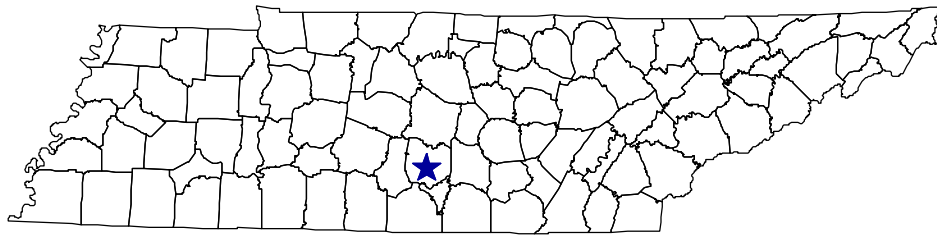
#### Healthcare Personnel Vaccinated (%)

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

## Tennova Healthcare - Shelbyville (Heritage Med Ctr), Shelbyville, Bedford County

Medical School Affiliation: None

Bed Size Category: 50-99 beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2018-12/31/2018

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		
		Observed	Predicted		SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	0	0.3	508	N/A	N/A	0.76
	Adult/Pediatric Ward	0	0.2	461	N/A	N/A	0.63
CAUTI	Adult/Pediatric ICU	0	0.4	791	N/A	N/A	0.70
	Adult/Pediatric Ward	0	0.2	588	N/A	N/A	0.73
SSI	Colon surgery	N/A	N/A	N/A	N/A	N/A	0.79
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	0.78
LabID	MRSA bacteremia	0	0.1	3907	N/A	N/A	1.29
	C. difficile infection	0	1.4	3907	0.00	( 0.00, 2.06 )	0.68

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

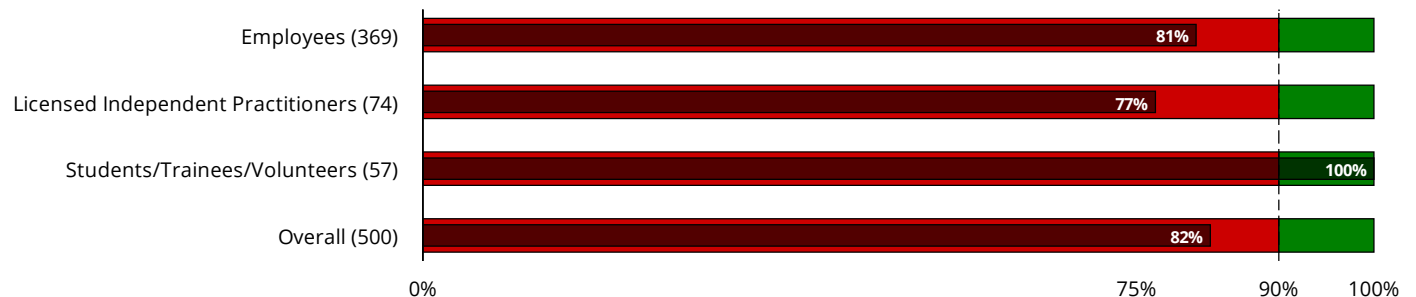
**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at Tennova Healthcare - Shelbyville (Heritage Med Ctr)*

### Healthcare Personnel Influenza Vaccination - '2018/2019' Influenza Season

#### Healthcare Personnel Category (Total)



#### Healthcare Personnel Vaccinated (%)

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

### Central Line-Associated Bloodstream Infections (CLABSI)

#### CLABSI - Adult/Pediatric ICUs

YR	N	OBS	PRE	CLD	SIR
2018	1	0	0.3	508	N/A
2017	1	0	0.4	671	N/A
2016	1	0	0.4	608	N/A
2015	1	0	0.5	763	N/A

N/A: Number of predicted infections <1; no SIR calculated

#### CLABSI - Adult/Pediatric Wards

YR	N	OBS	PRE	CLD	SIR
2018	1	0	0.2	461	N/A
2017	1	0	0.3	518	N/A
2016	1	0	0.3	555	N/A
2015	1	2	0.4	706	N/A

N/A: Number of predicted infections <1; no SIR calculated

### Catheter-Associated Urinary Tract Infections (CAUTI)

#### CAUTI - Adult/Pediatric ICUs

YR	N	OBS	PRE	UCD	SIR
2018	1	0	0.4	791	N/A
2017	1	0	0.5	1027	N/A
2016	1	0	0.5	975	N/A
2015	1	0	0.6	1214	N/A

N/A: Number of predicted infections <1; no SIR calculated

#### CAUTI - Adult/Pediatric Wards

YR	N	OBS	PRE	UCD	SIR
2018	1	0	0.2	588	N/A
2017	1	0	0.3	740	N/A
2016	1	0	0.3	810	N/A
2015	1	0	0.5	1093	N/A

N/A: Number of predicted infections <1; no SIR calculated

### Surgical Site Infections (SSI)

#### SSI - Colon Surgery

YR	OBS	PRE	PROC	SIR
2018	N/A	N/A	N/A	N/A
2017	N/A	N/A	N/A	N/A
2016	N/A	N/A	N/A	N/A
2015	N/A	N/A	N/A	N/A

N/A: Number of predicted infections <1; no SIR calculated

#### SSI - Abdominal Hysterectomy

YR	OBS	PRE	PROC	SIR
2018	N/A	N/A	N/A	N/A
2017	N/A	N/A	N/A	N/A
2016	N/A	N/A	N/A	N/A
2015	N/A	N/A	N/A	N/A

N/A: Number of predicted infections <1; no SIR calculated

### Healthcare Facility-Onset Laboratory Identified (LabID) Events

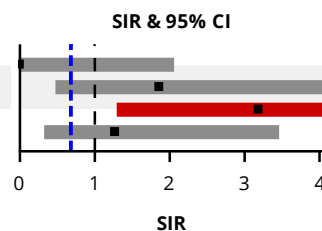
#### LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia

YR	OBS	PRE	PATD	SIR
2018	0	0.1	3907	N/A
2017	0	0.2	4638	N/A
2016	2	0.1	5321	N/A
2015	2	0.2	6525	N/A

N/A: Number of predicted infections <1; no SIR calculated

#### LabID - *C. difficile* Infection (CDI)

YR	OBS	PRE	PATD	SIR
2018	0	1.4	3907	0.0
2017	3	1.6	4638	1.9
2016	6	1.8	5321	3.2
2015	3	2.3	6525	1.3



Data reported as of August 27, 2019

YR = reporting year; N = number of units reporting (CLABSI/CAUTI); OBS = observed number of infections

PRE = statistically 'predicted' number of infections, based on NHSN national baseline data

SIR = standardized infection ratio (observed/predicted number of infections)

CLD = central line days; UCD = urinary catheter days; PROC = procedures performed; PATD = patient days;

N/A = data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

■ Significantly lower than NHSN SIR of 1

■ Not significantly different from NHSN SIR of 1

■ Significantly higher than NHSN SIR of 1

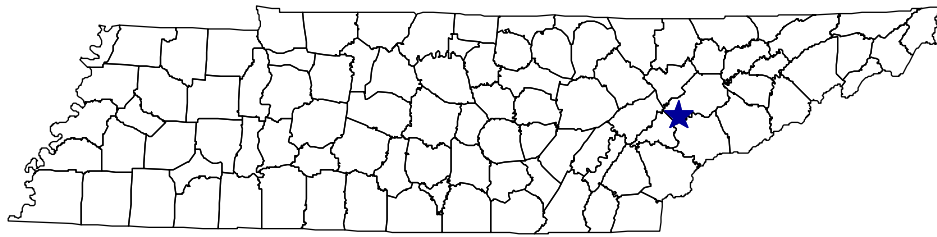
--- 2018 TN SIR

--- NHSN SIR=1

## Tennova Healthcare - Turkey Creek Medical Center, Knoxville, Knox County

Medical School Affiliation: None

Bed Size Category: 100-399 beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2017-12/31/2017

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		TN SIR
		Observed	Predicted		SIR*	95% CI	
CLABSI	Adult/Pediatric ICU	1	0.8	1066	N/A	N/A	0.85
	Adult/Pediatric Ward	1	0.7	1130	N/A	N/A	0.68
CAUTI	Adult/Pediatric ICU	1	0.9	1346	N/A	N/A	0.71
	Adult/Pediatric Ward	0	0.5	768	N/A	N/A	0.72
SSI	Colon surgery	0	4.5	179	0.00	(0.00, 0.66)	0.83
	Abdominal hysterectomy	1	0.6	141	N/A	N/A	1.08
LabID	MRSA bacteremia	2	1.3	22429	1.54	(0.26, 5.08)	1.09
	C. difficile infection	5	11.6	21116	0.43	(0.16, 0.95)	0.83

Green highlighting indicates an SIR significantly LOWER than the 2015 national baseline

Red highlighting indicates an SIR significantly HIGHER than the 2015 national baseline

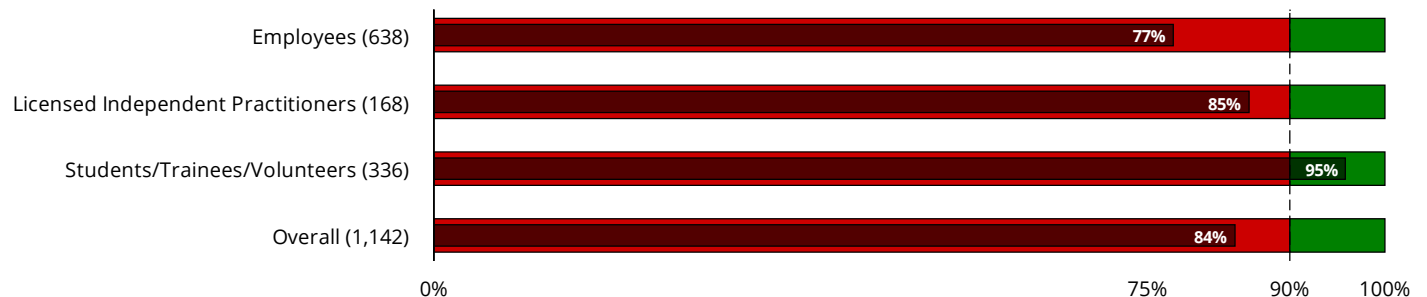
N/A: Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

See page 3 for more detailed information about HAIs at Tennova Healthcare - Turkey Creek Medical Center

### Healthcare Personnel Influenza Vaccination - '2017/2018' Influenza Season

#### Healthcare Personnel Category (Total)



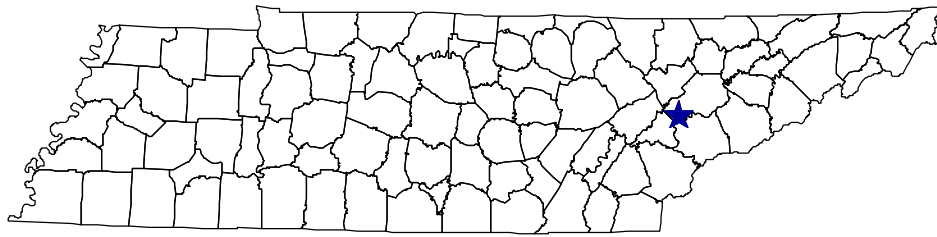
#### Healthcare Personnel Vaccinated (%)

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

## Tennova Healthcare - Turkey Creek Medical Center, Knoxville, Knox County

Medical School Affiliation: None

Bed Size Category: 100-399 beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2018-12/31/2018

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		TN SIR
		Observed	Predicted		SIR*	95% CI	
CLABSI	Adult/Pediatric ICU	1	1.0	1403	0.95	( 0.05, 4.67 )	0.76
	Adult/Pediatric Ward	2	1.0	1558	1.97	( 0.33, 6.51 )	0.63
CAUTI	Adult/Pediatric ICU	1	1.3	1859	0.73	( 0.04, 3.62 )	0.70
	Adult/Pediatric Ward	0	0.8	1288	N/A	N/A	0.73
SSI	Colon surgery	1	5.0	206	0.20	( 0.01, 0.98 )	0.79
	Abdominal hysterectomy	0	0.4	109	N/A	N/A	0.78
LabID	MRSA bacteremia	5	1.3	26506	3.72	( 1.36, 8.24 )	1.29
	C. difficile infection	5	15.0	26167	0.33	( 0.12, 0.74 )	0.68

Green highlighting indicates an SIR significantly LOWER than the 2015 national baseline

Red highlighting indicates an SIR significantly HIGHER than the 2015 national baseline

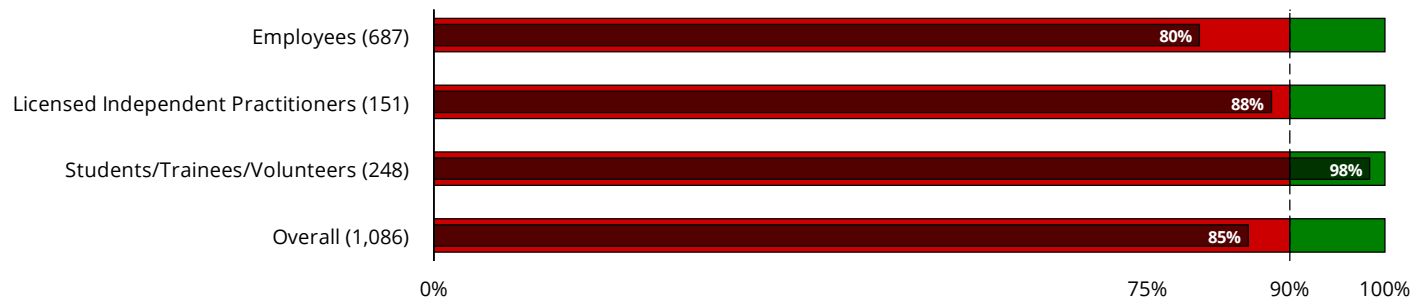
N/A: Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

See page 3 for more detailed information about HAIs at Tennova Healthcare - Turkey Creek Medical Center

### Healthcare Personnel Influenza Vaccination - '2018/2019' Influenza Season

#### Healthcare Personnel Category (Total)



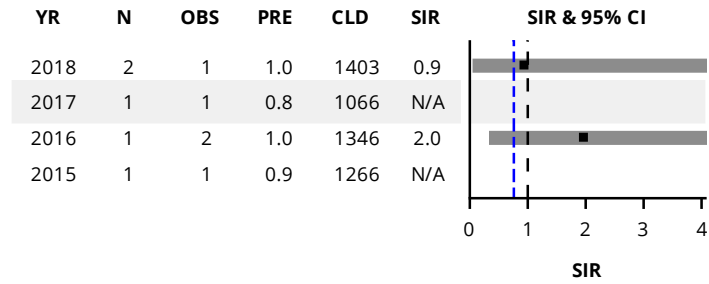
#### Healthcare Personnel Vaccinated (%)

Below 90% >90% (HHS Healthy People 2020 Goal)

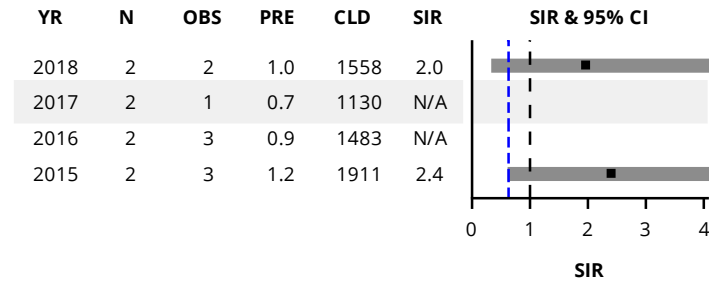


Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric ICUs

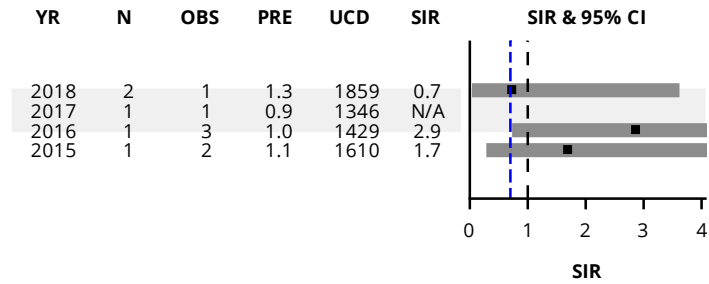


CLABSI - Adult/Pediatric Wards

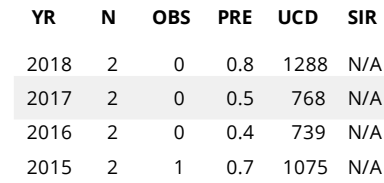


Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICUs



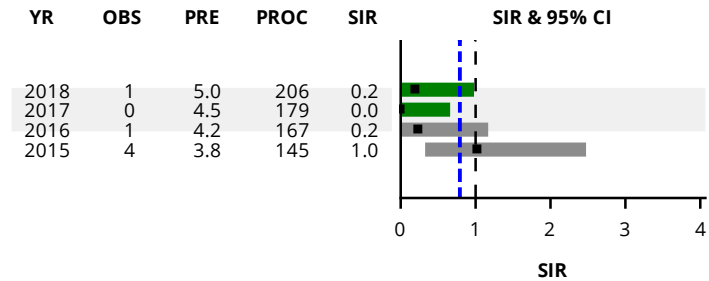
CAUTI - Adult/Pediatric Wards



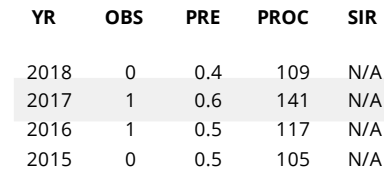
N/A: Number of predicted infections <1; no SIR calculated

Surgical Site Infections (SSI)

SSI - Colon Surgery



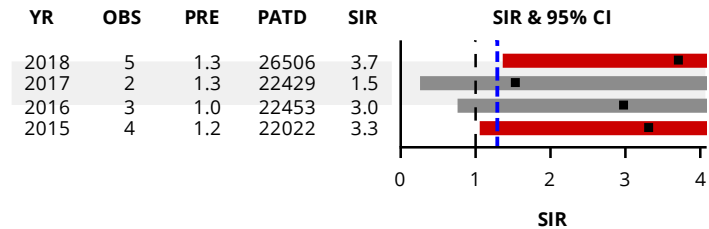
SSI - Abdominal Hysterectomy



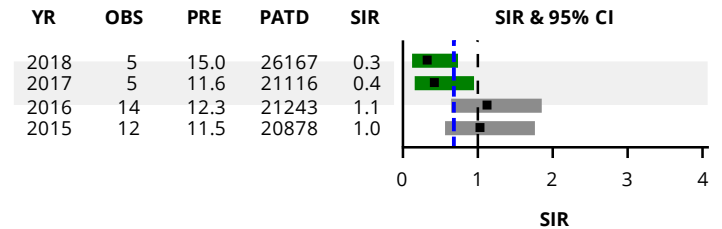
N/A: Number of predicted infections <1; no SIR calculated

Healthcare Facility-Onset Laboratory Identified (LabID) Events

LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia



LabID - *C. difficile* Infection (CDI)



Data reported as of August 27, 2019

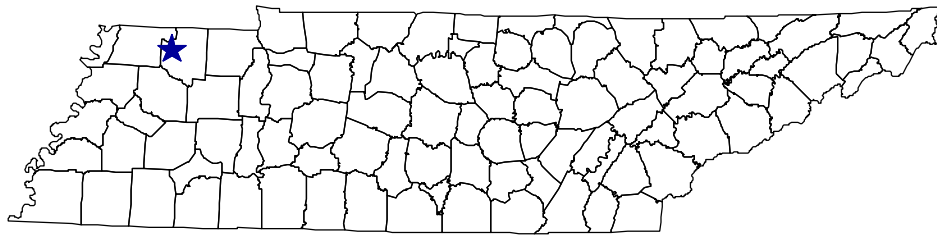
YR = reporting year; N = number of units reporting (CLABSI/CAUTI); OBS = observed number of infections  
 PRE = statistically 'predicted' number of infections, based on NHSN national baseline data  
 SIR = standardized infection ratio (observed/predicted number of infections)  
 CLD = central line days; UCD = urinary catheter days; PROC = procedures performed; PATD = patient days;  
 N/A = data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

■ Significantly lower than NHSN SIR of 1  
 ■ Not significantly different from NHSN SIR of 1  
 ■ Significantly higher than NHSN SIR of 1  
 - - - 2018 TN SIR  
 - - - NHSN SIR=1

## Tennova Healthcare - Volunteer Martin (Volunteer Community Hosp), Martin, Weakley County

Medical School Affiliation: None

Bed Size Category: <50 beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2017-12/31/2017

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		
		Observed	Predicted		SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	0	0.0	70	N/A	N/A	0.85
	Adult/Pediatric Ward	0	0.0	142	N/A	N/A	0.68
CAUTI	Adult/Pediatric ICU	0	0.3	612	N/A	N/A	0.71
	Adult/Pediatric Ward	0	0.4	1010	N/A	N/A	0.72
SSI	Colon surgery	N/A	N/A	N/A	N/A	N/A	0.83
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	1.08
LabID	MRSA bacteremia	0	0.0	3534	N/A	N/A	1.09
	C. difficile infection	2	2.2	3534	0.89	( 0.15, 2.94 )	0.83

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

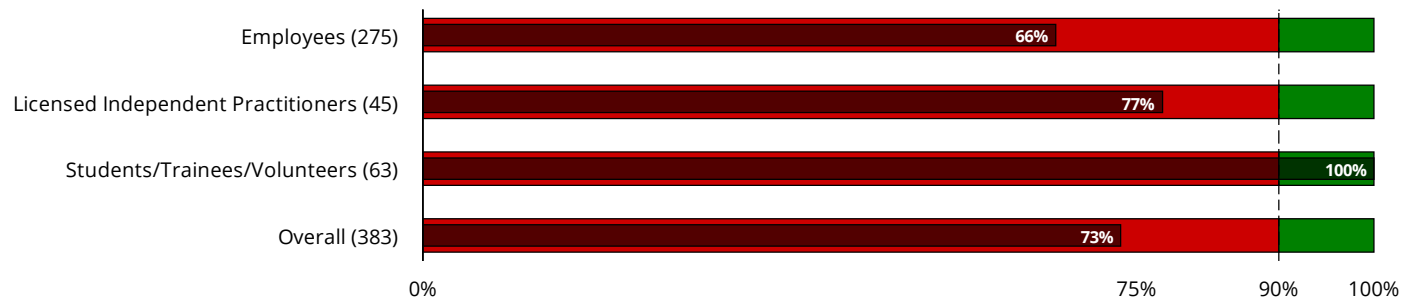
**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at Tennova Healthcare - Volunteer Martin (Volunteer Community Hosp)*

### Healthcare Personnel Influenza Vaccination - '2017/2018' Influenza Season

#### Healthcare Personnel Category (Total)



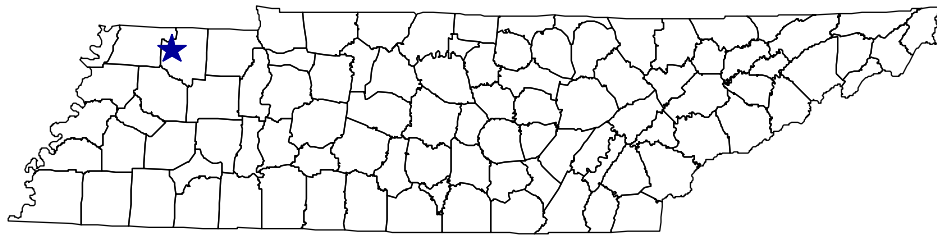
#### Healthcare Personnel Vaccinated (%)

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

## Tennova Healthcare - Volunteer Martin (Volunteer Community Hosp), Martin, Weakley County

Medical School Affiliation: None

Bed Size Category: <50 beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2018-12/31/2018

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		
		Observed	Predicted		SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	N/A	N/A	N/A	N/A	N/A	0.76
	Adult/Pediatric Ward	0	0.1	219	N/A	N/A	0.63
CAUTI	Adult/Pediatric ICU	0	0.2	445	N/A	N/A	0.70
	Adult/Pediatric Ward	0	0.4	970	N/A	N/A	0.73
SSI	Colon surgery	N/A	N/A	N/A	N/A	N/A	0.79
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	0.78
LabID	MRSA bacteremia	0	0.0	3484	N/A	N/A	1.29
	C. difficile infection	0	2.2	3484	0.00	( 0.00, 1.31 )	0.68

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

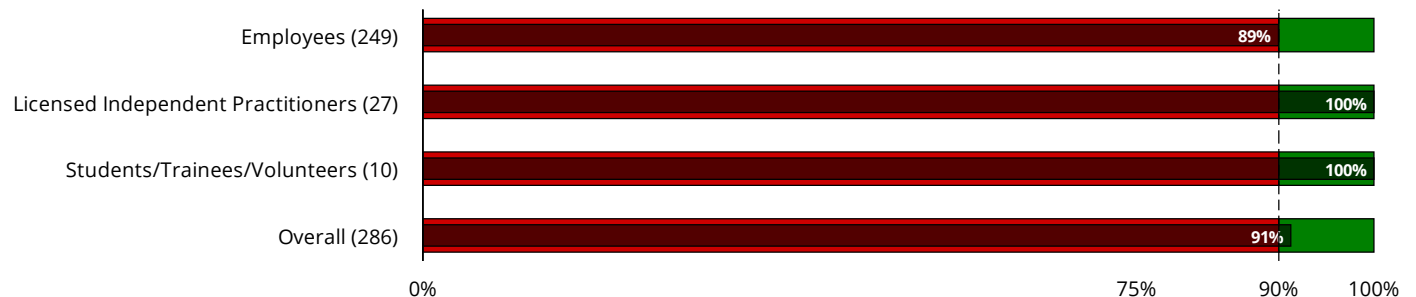
**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at Tennova Healthcare - Volunteer Martin (Volunteer Community Hosp)*

### Healthcare Personnel Influenza Vaccination - '2018/2019' Influenza Season

#### Healthcare Personnel Category (Total)



#### Healthcare Personnel Vaccinated (%)

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric ICUs

YR	N	OBS	PRE	CLD	SIR
2018	1	N/A	N/A	N/A	N/A
2017	1	0	0.0	70	N/A
2016	1	0	0.0	108	N/A
2015	1	0	0.0	102	N/A

N/A: Number of predicted infections <1; no SIR calculated

CLABSI - Adult/Pediatric Wards

YR	N	OBS	PRE	CLD	SIR
2018	1	0	0.1	219	N/A
2017	1	0	0.0	142	N/A
2016	1	0	0.1	200	N/A
2015	1	0	0.1	204	N/A

N/A: Number of predicted infections <1; no SIR calculated

Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICUs

YR	N	OBS	PRE	UCD	SIR
2018	1	0	0.2	445	N/A
2017	1	0	0.3	612	N/A
2016	1	0	0.3	644	N/A
2015	1	0	0.3	593	N/A

N/A: Number of predicted infections <1; no SIR calculated

CAUTI - Adult/Pediatric Wards

YR	N	OBS	PRE	UCD	SIR
2018	1	0	0.4	970	N/A
2017	1	0	0.4	1010	N/A
2016	1	0	0.4	995	N/A
2015	1	0	0.6	1335	N/A

N/A: Number of predicted infections <1; no SIR calculated

Surgical Site Infections (SSI)

SSI - Colon Surgery

YR	OBS	PRE	PROC	SIR
2018	N/A	N/A	N/A	N/A
2017	N/A	N/A	N/A	N/A
2016	N/A	N/A	N/A	N/A
2015	N/A	N/A	N/A	N/A

N/A: Number of predicted infections <1; no SIR calculated

SSI - Abdominal Hysterectomy

YR	OBS	PRE	PROC	SIR
2018	N/A	N/A	N/A	N/A
2017	N/A	N/A	N/A	N/A
2016	N/A	N/A	N/A	N/A
2015	N/A	N/A	N/A	N/A

N/A: Number of predicted infections <1; no SIR calculated

Healthcare Facility-Onset Laboratory Identified (LabID) Events

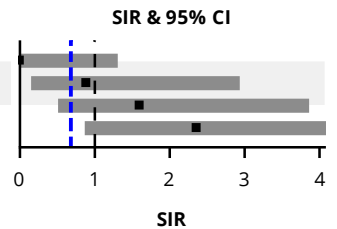
LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia

YR	OBS	PRE	PATD	SIR
2018	0	0.0	3484	N/A
2017	0	0.0	3534	N/A
2016	0	0.0	4072	N/A
2015	0	0.0	4565	N/A

N/A: Number of predicted infections <1; no SIR calculated

LabID - *C. difficile* Infection (CDI)

YR	OBS	PRE	PATD	SIR
2018	0	2.2	3484	0.0
2017	2	2.2	3534	0.9
2016	4	2.4	4072	1.6
2015	5	2.1	4565	2.4



Data reported as of August 27, 2019

YR = reporting year; N = number of units reporting (CLABSI/CAUTI); OBS = observed number of infections

PRE = statistically 'predicted' number of infections, based on NHSN national baseline data

SIR = standardized infection ratio (observed/predicted number of infections)

CLD = central line days; UCD = urinary catheter days; PROC = procedures performed; PATD = patient days;

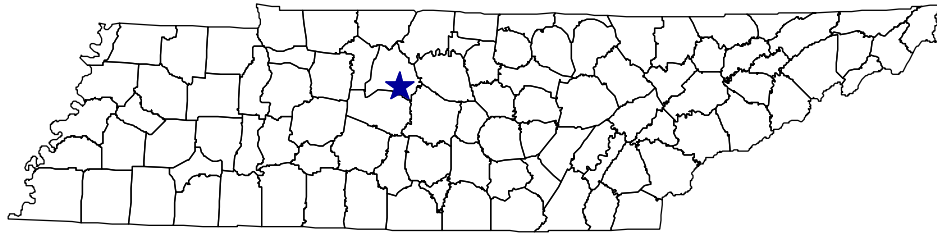
N/A = data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

- Significantly lower than NHSN SIR of 1
- Not significantly different from NHSN SIR of 1
- Significantly higher than NHSN SIR of 1
- - - 2018 TN SIR
- - - NHSN SIR=1

**TriStar Southern Hills Medical Center, Nashville, Davidson County**

Medical School Affiliation: None

Bed Size Category: 100-399 beds



**Healthcare-Associated Infections (HAI) Summary**

**Standardized Infection Ratio (SIR) by Infection Type, 01/01/2017-12/31/2017**

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		
		Observed	Predicted		SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	0	1.4	1951	0.00	( 0.00, 2.04 )	0.85
	Adult/Pediatric Ward	0	1.2	1869	0.00	( 0.00, 2.46 )	0.68
CAUTI	Adult/Pediatric ICU	2	2.3	2573	0.85	( 0.14, 2.81 )	0.71
	Adult/Pediatric Ward	1	1.7	2502	0.59	( 0.03, 2.89 )	0.72
SSI	Colon surgery	1	1.0	43	1.00	( 0.05, 4.91 )	0.83
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	1.08
LabID	MRSA bacteremia	1	0.8	22797	N/A	N/A	1.09
	C. difficile infection	10	16.4	22797	0.61	( 0.31, 1.09 )	0.83

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

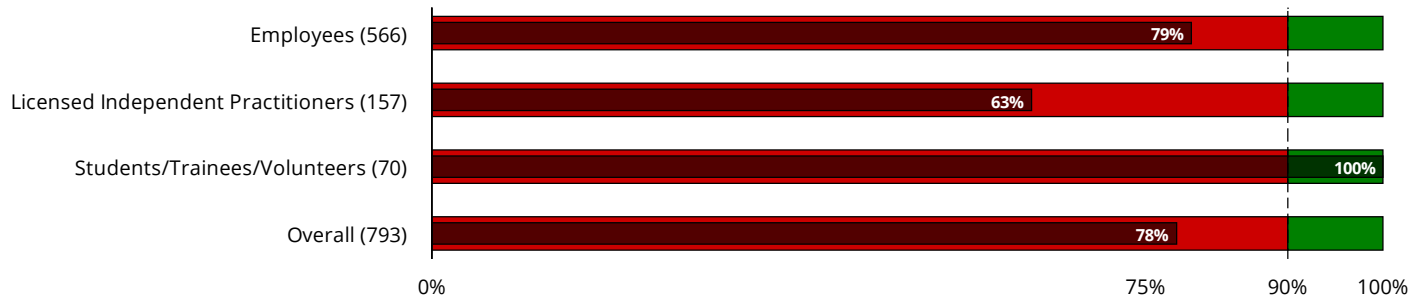
**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at TriStar Southern Hills Medical Center*

**Healthcare Personnel Influenza Vaccination - '2017/2018' Influenza Season**

**Healthcare Personnel Category (Total)**



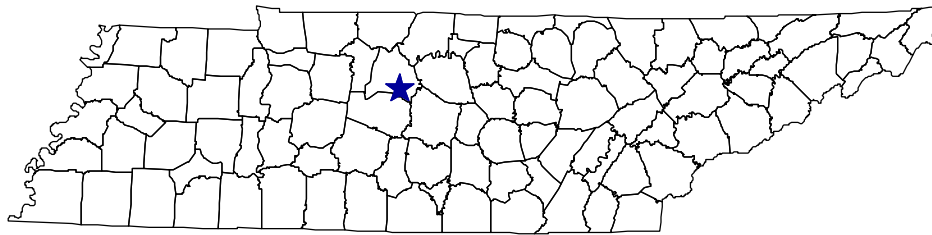
**Healthcare Personnel Vaccinated (%)**

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

**TriStar Southern Hills Medical Center, Nashville, Davidson County**

Medical School Affiliation: Graduate teaching

Bed Size Category: 100-399 beds



**Healthcare-Associated Infections (HAI) Summary**

**Standardized Infection Ratio (SIR) by Infection Type, 01/01/2018-12/31/2018**

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		TN SIR
		Observed	Predicted		SIR*	95% CI	
CLABSI	Adult/Pediatric ICU	2	1.2	1480	1.55	( 0.26, 5.10 )	0.76
	Adult/Pediatric Ward	0	1.8	2397	0.00	( 0.00, 1.65 )	0.63
CAUTI	Adult/Pediatric ICU	1	2.2	2049	0.44	( 0.02, 2.19 )	0.70
	Adult/Pediatric Ward	3	1.9	2511	1.55	( 0.40, 4.23 )	0.73
SSI	Colon surgery	0	0.8	39	N/A	N/A	0.79
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	0.78
LabID	MRSA bacteremia	1	1.3	22108	0.73	( 0.04, 3.58 )	1.29
	C. difficile infection	13	14.8	22108	0.88	( 0.49, 1.46 )	0.68

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at TriStar Southern Hills Medical Center*

**Healthcare Personnel Influenza Vaccination - '2018/2019' Influenza Season**

**Healthcare Personnel Category (Total)**

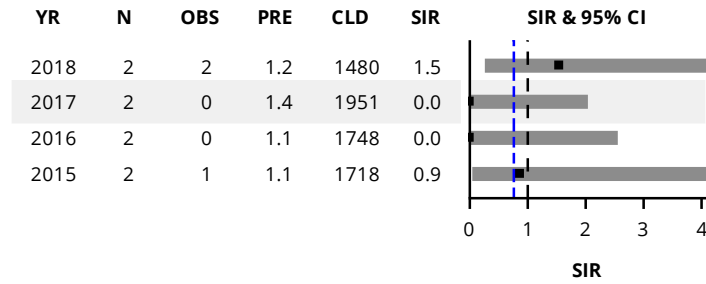


**Healthcare Personnel Vaccinated (%)**

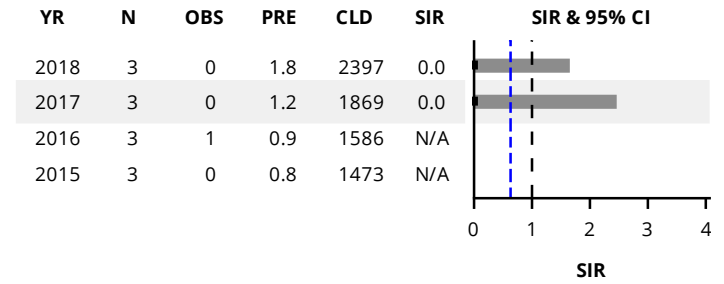
■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

### Central Line-Associated Bloodstream Infections (CLABSI)

#### CLABSI - Adult/Pediatric ICUs

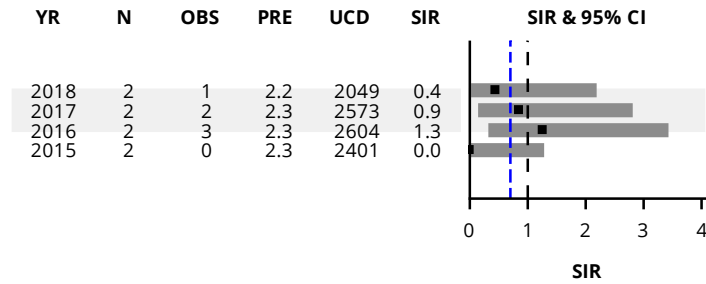


#### CLABSI - Adult/Pediatric Wards

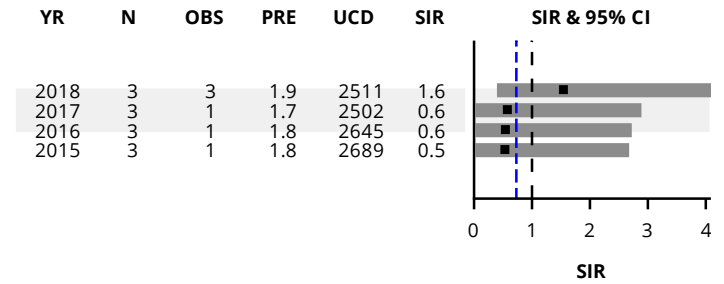


### Catheter-Associated Urinary Tract Infections (CAUTI)

#### CAUTI - Adult/Pediatric ICUs

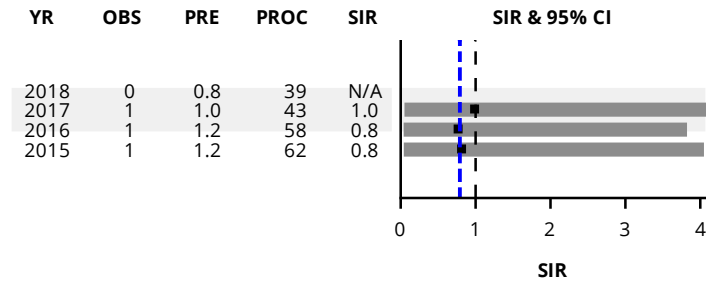


#### CAUTI - Adult/Pediatric Wards

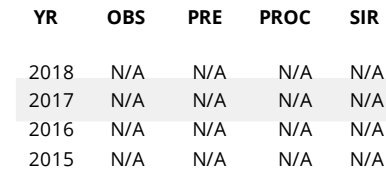


### Surgical Site Infections (SSI)

#### SSI - Colon Surgery



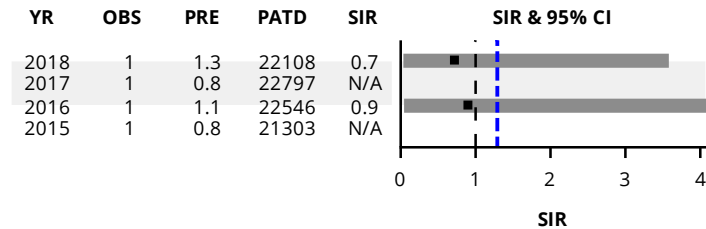
#### SSI - Abdominal Hysterectomy



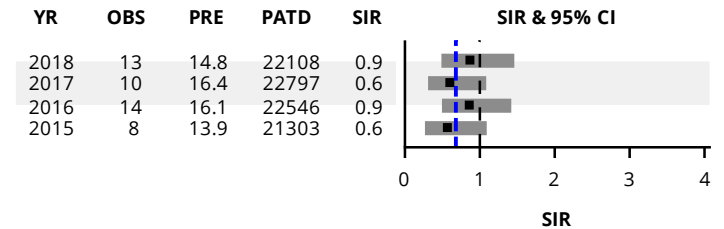
N/A: Number of predicted infections <1; no SIR calculated

### Healthcare Facility-Onset Laboratory Identified (LabID) Events

#### LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia



#### LabID - *C. difficile* Infection (CDI)



Data reported as of August 27, 2019

YR = reporting year; N = number of units reporting (CLABSI/CAUTI); OBS = observed number of infections

PRE = statistically 'predicted' number of infections, based on NHSN national baseline data

SIR = standardized infection ratio (observed/predicted number of infections)

CLD = central line days; UCD = urinary catheter days; PROC = procedures performed; PATD = patient days;

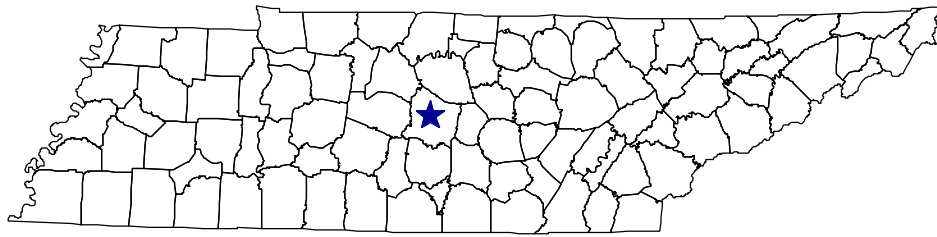
N/A = data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

- Significantly lower than NHSN SIR of 1
- Not significantly different from NHSN SIR of 1
- Significantly higher than NHSN SIR of 1
- - - 2018 TN SIR
- - - NHSN SIR=1

## TrustPoint Hospital, Murfreesboro, Rutherford County

Medical School Affiliation: None

Bed Size Category: 100-399 beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2017-12/31/2017

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		
		Observed	Predicted		SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric Ward	0	0.1	189	N/A	N/A	0.68
CAUTI	Adult/Pediatric Ward	0	0.1	196	N/A	N/A	0.72
LabID	MRSA bacteremia	0	0.0	1034	N/A	N/A	1.09
	C. difficile infection	0	0.1	1034	N/A	N/A	0.83

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

**N/A**: Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at TrustPoint Hospital*

### Healthcare Personnel Influenza Vaccination - '2017/2018' Influenza Season

#### Healthcare Personnel Category (Total)



#### Healthcare Personnel Vaccinated (%)

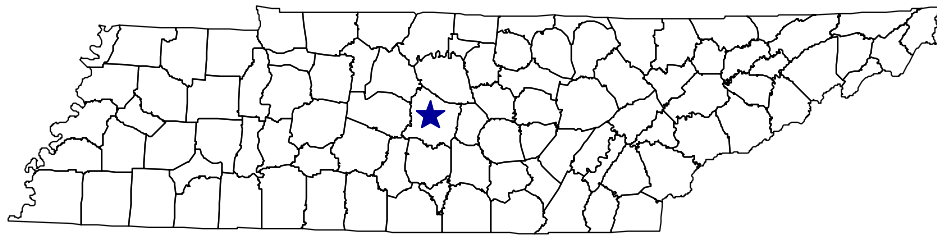
■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)



## TrustPoint Hospital, Murfreesboro, Rutherford County

Medical School Affiliation: None

Bed Size Category: 100-399 beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2018-12/31/2018

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		
		Observed	Predicted		SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric Ward	0	0.0	61	N/A	N/A	0.63
CAUTI	Adult/Pediatric Ward	0	0.0	53	N/A	N/A	0.73
LabID	MRSA bacteremia	0	0.0	476	N/A	N/A	1.29
	C. difficile infection	0	0.1	476	N/A	N/A	0.68

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

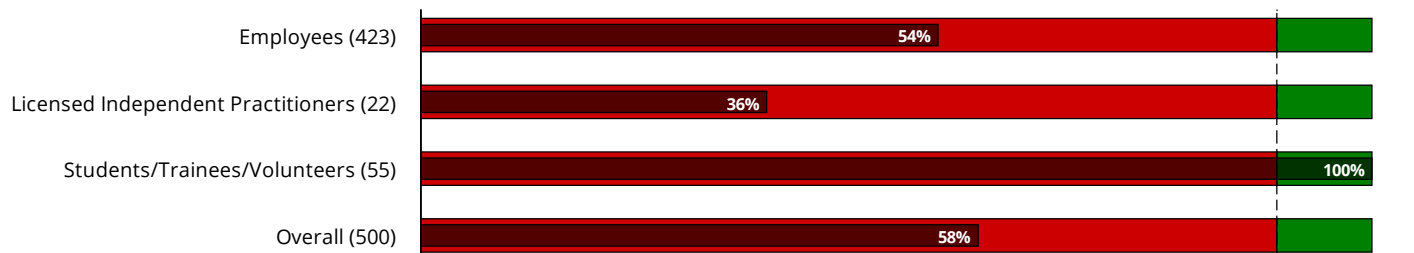
**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at TrustPoint Hospital*

### Healthcare Personnel Influenza Vaccination - '2018/2019' Influenza Season

#### Healthcare Personnel Category (Total)



#### Healthcare Personnel Vaccinated (%)

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric Wards

YR	N	OBS	PRE	CLD	SIR
2018	1	0	0.0	61	N/A
2017	1	0	0.1	189	N/A
2016	1	0	0.1	245	N/A
2015	1	0	0.1	201	N/A

N/A: Number of predicted infections <1; no SIR calculated

Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric Wards

YR	N	OBS	PRE	UCD	SIR
2018	1	0	0.0	53	N/A
2017	1	0	0.1	196	N/A
2016	1	0	0.1	188	N/A
2015	1	0	0.1	139	N/A

N/A: Number of predicted infections <1; no SIR calculated

Healthcare Facility-Onset Laboratory Identified (LabID) Events

LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia

YR	OBS	PRE	PATD	SIR
2018	0	0.0	476	N/A
2017	0	0.0	1034	N/A
2016	0	0.0	1840	N/A
2015	0	0.0	2064	N/A

N/A: Number of predicted infections <1; no SIR calculated

LabID - *C. difficile* Infection (CDI)

YR	OBS	PRE	PATD	SIR
2018	0	0.1	476	N/A
2017	0	0.1	1034	N/A
2016	0	0.3	1840	N/A
2015	2	0.3	2064	N/A

N/A: Number of predicted infections <1; no SIR calculated

Data reported as of August 27, 2019

YR = reporting year; N = number of units reporting (CLABSI/CAUTI); OBS = observed number of infections

PRE = statistically 'predicted' number of infections, based on NHSN national baseline data

SIR = standardized infection ratio (observed/predicted number of infections)

CLD = central line days; UCD = urinary catheter days; PROC = procedures performed; PATD = patient days;

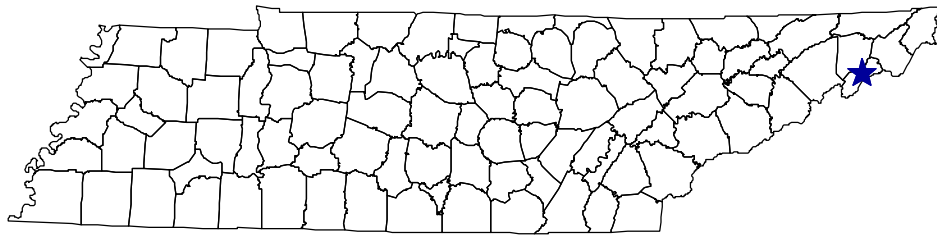
N/A = data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

- Significantly lower than NHSN SIR of 1
- Not significantly different from NHSN SIR of 1
- Significantly higher than NHSN SIR of 1
- 2018 TN SIR
- NHSN SIR=1

## Unicoi County Memorial Hospital, Erwin, Unicoi County

Medical School Affiliation: None

Bed Size Category: <50 beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2017-12/31/2017

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		
		Observed	Predicted		SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric Ward	N/A	N/A	N/A	N/A	N/A	0.68
CAUTI	Adult/Pediatric Ward	0	0.1	221	N/A	N/A	0.72
SSI	Colon surgery	N/A	N/A	N/A	N/A	N/A	0.83
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	1.08
LabID	MRSA bacteremia	0	0.0	1713	N/A	N/A	1.09
	C. difficile infection	0	0.5	1713	N/A	N/A	0.83

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at Unicoi County Memorial Hospital*

### Healthcare Personnel Influenza Vaccination - '2017/2018' Influenza Season

#### Healthcare Personnel Category (Total)



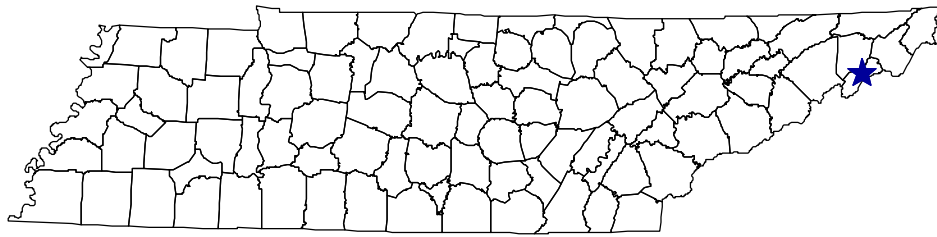
#### Healthcare Personnel Vaccinated (%)

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

## Unicoi County Memorial Hospital, Erwin, Unicoi County

Medical School Affiliation: None

Bed Size Category: <50 beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2018-12/31/2018

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		
		Observed	Predicted		SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric Ward	N/A	N/A	N/A	N/A	N/A	0.63
CAUTI	Adult/Pediatric Ward	0	0.0	187	N/A	N/A	0.73
SSI	Colon surgery	N/A	N/A	N/A	N/A	N/A	0.79
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	0.78
LabID	MRSA bacteremia	0	0.0	1659	N/A	N/A	1.29
	C. difficile infection	0	0.8	1659	N/A	N/A	0.68

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

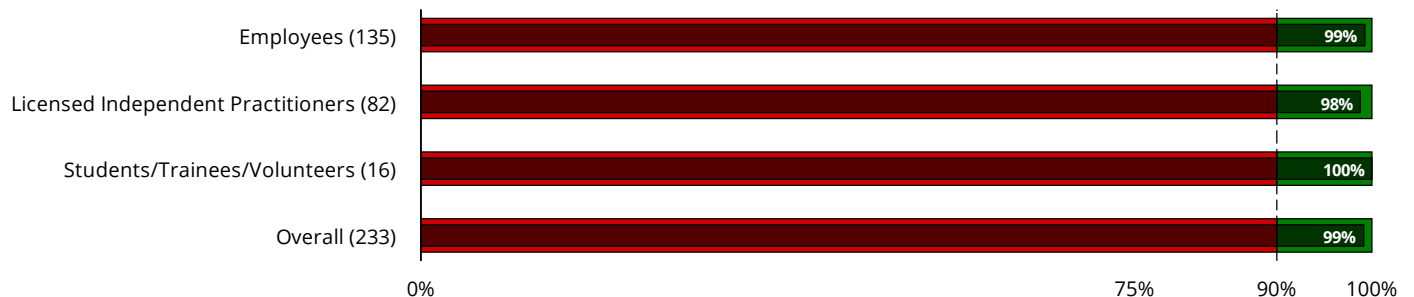
**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at Unicoi County Memorial Hospital*

### Healthcare Personnel Influenza Vaccination - '2018/2019' Influenza Season

#### Healthcare Personnel Category (Total)



#### Healthcare Personnel Vaccinated (%)

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric Wards

YR	N	OBS	PRE	CLD	SIR
2018	1	N/A	N/A	N/A	N/A
2017	1	N/A	N/A	N/A	N/A
2016	1	0	0.1	228	N/A
2015	1	0	0.0	88	N/A

N/A: Number of predicted infections <1; no SIR calculated

Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric Wards

YR	N	OBS	PRE	UCD	SIR
2018	1	0	0.0	187	N/A
2017	1	0	0.1	221	N/A
2016	1	0	0.2	523	N/A
2015	1	0	0.2	418	N/A

N/A: Number of predicted infections <1; no SIR calculated

Surgical Site Infections (SSI)

SSI - Colon Surgery

YR	OBS	PRE	PROC	SIR
2018	N/A	N/A	N/A	N/A
2017	N/A	N/A	N/A	N/A
2016	N/A	N/A	N/A	N/A
2015	N/A	N/A	N/A	N/A

N/A: Number of predicted infections <1; no SIR calculated

SSI - Abdominal Hysterectomy

YR	OBS	PRE	PROC	SIR
2018	N/A	N/A	N/A	N/A
2017	N/A	N/A	N/A	N/A
2016	N/A	N/A	N/A	N/A
2015	N/A	N/A	N/A	N/A

N/A: Number of predicted infections <1; no SIR calculated

Healthcare Facility-Onset Laboratory Identified (LabID) Events

LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia

YR	OBS	PRE	PATD	SIR
2018	0	0.0	1659	N/A
2017	0	0.0	1713	N/A
2016	0	0.0	1889	N/A
2015	0	0.0	2541	N/A

N/A: Number of predicted infections <1; no SIR calculated

LabID - *C. difficile* Infection (CDI)

YR	OBS	PRE	PATD	SIR
2018	0	0.8	1659	N/A
2017	0	0.5	1713	N/A
2016	0	0.5	1889	N/A
2015	0	0.6	2541	N/A

N/A: Number of predicted infections <1; no SIR calculated

Data reported as of August 27, 2019

YR = reporting year; N = number of units reporting (CLABSI/CAUTI); OBS = observed number of infections

PRE = statistically 'predicted' number of infections, based on NHSN national baseline data

SIR = standardized infection ratio (observed/predicted number of infections)

CLD = central line days; UCD = urinary catheter days; PROC = procedures performed; PATD = patient days;

N/A = data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

■ Significantly lower than NHSN SIR of 1

■ Not significantly different from NHSN SIR of 1

■ Significantly higher than NHSN SIR of 1

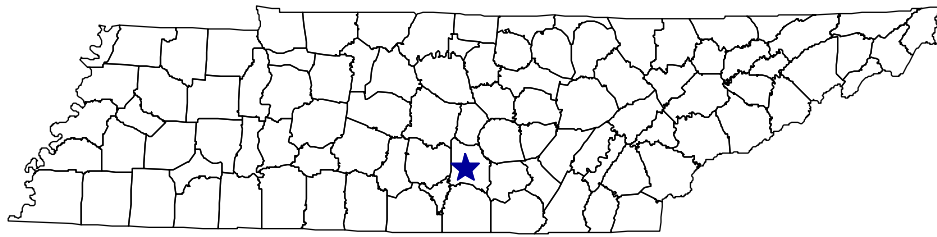
--- 2018 TN SIR

--- NHSN SIR=1

## United Regional Medical Center, Manchester, Coffee County

Medical School Affiliation: None

Bed Size Category: <50 beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2017-12/31/2017

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		
		Observed	Predicted		SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric Ward	0	0.1	178	N/A	N/A	0.68
CAUTI	Adult/Pediatric Ward	0	0.3	753	N/A	N/A	0.72
SSI	Colon surgery	N/A	N/A	N/A	N/A	N/A	0.83
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	1.08
LabID	MRSA bacteremia	0	0.1	4994	N/A	N/A	1.09
	C. difficile infection	2	1.2	4994	1.56	( 0.26, 5.16 )	0.83

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

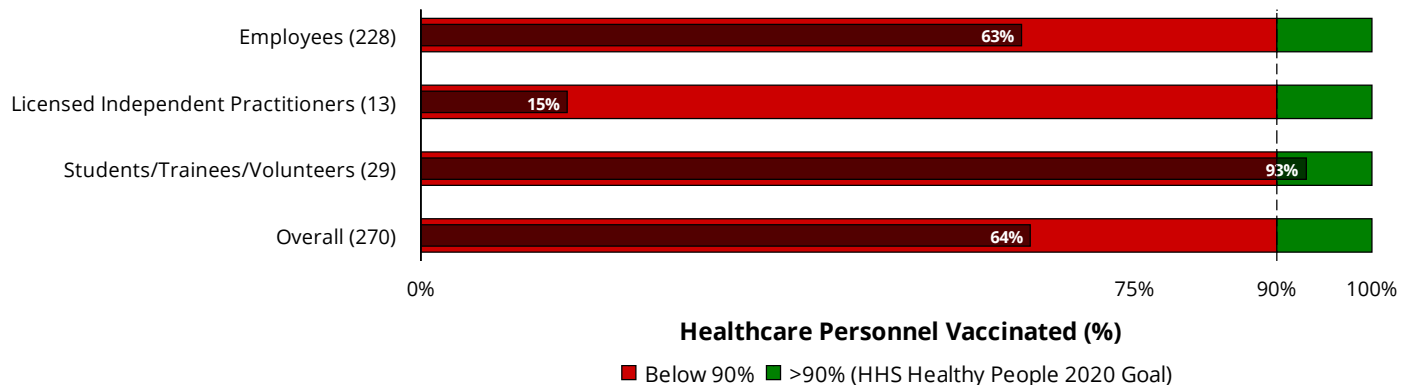
**N/A**: Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at United Regional Medical Center*

### Healthcare Personnel Influenza Vaccination - '2017/2018' Influenza Season

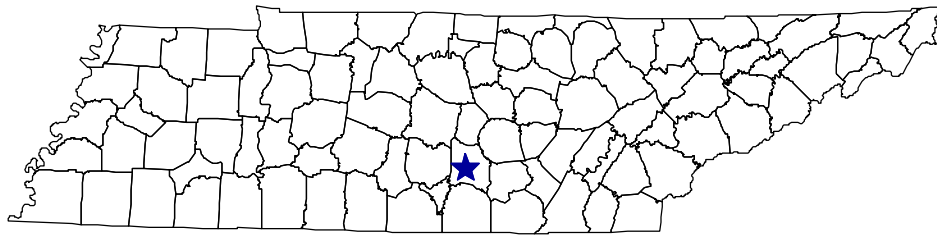
#### Healthcare Personnel Category (Total)



## United Regional Medical Center, Manchester, Coffee County

Medical School Affiliation: None

Bed Size Category: <50 beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2018-12/31/2018

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		
		Observed	Predicted		SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric Ward	0	0.0	130	N/A	N/A	0.63
CAUTI	Adult/Pediatric Ward	0	0.3	756	N/A	N/A	0.73
SSI	Colon surgery	N/A	N/A	N/A	N/A	N/A	0.79
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	0.78
LabID	MRSA bacteremia	0	0.1	4263	N/A	N/A	1.29
	C. difficile infection	3	0.9	4263	N/A	N/A	0.68

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

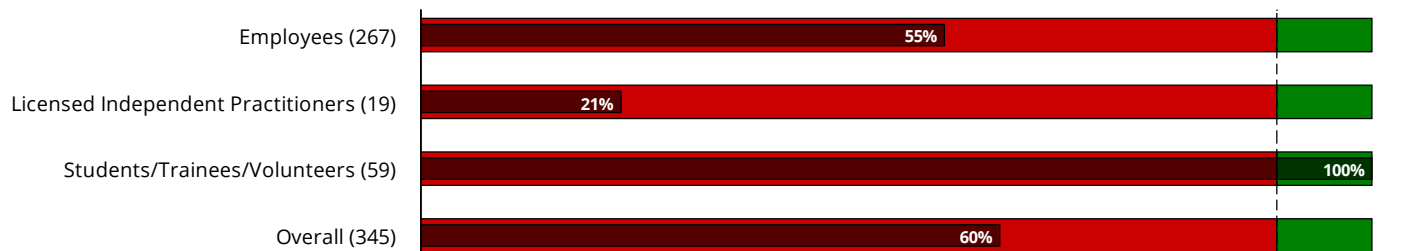
**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at United Regional Medical Center*

### Healthcare Personnel Influenza Vaccination - '2018/2019' Influenza Season

#### Healthcare Personnel Category (Total)



#### Healthcare Personnel Vaccinated (%)

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric Wards

YR	N	OBS	PRE	CLD	SIR
2018	1	0	0.0	130	N/A
2017	1	0	0.1	178	N/A
2016	1	0	0.0	149	N/A
2015	1	0	0.1	183	N/A

N/A: Number of predicted infections <1; no SIR calculated

Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric Wards

YR	N	OBS	PRE	UCD	SIR
2018	1	0	0.3	756	N/A
2017	1	0	0.3	753	N/A
2016	1	0	0.3	697	N/A
2015	1	0	0.2	493	N/A

N/A: Number of predicted infections <1; no SIR calculated

Surgical Site Infections (SSI)

SSI - Colon Surgery

YR	OBS	PRE	PROC	SIR
2018	N/A	N/A	N/A	N/A
2017	N/A	N/A	N/A	N/A
2016	N/A	N/A	N/A	N/A
2015	N/A	N/A	N/A	N/A

N/A: Number of predicted infections <1; no SIR calculated

SSI - Abdominal Hysterectomy

YR	OBS	PRE	PROC	SIR
2018	N/A	N/A	N/A	N/A
2017	N/A	N/A	N/A	N/A
2016	N/A	N/A	N/A	N/A
2015	N/A	N/A	N/A	N/A

N/A: Number of predicted infections <1; no SIR calculated

Healthcare Facility-Onset Laboratory Identified (LabID) Events

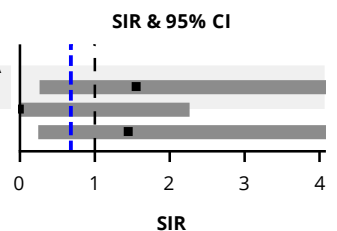
LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia

YR	OBS	PRE	PATD	SIR
2018	0	0.1	4263	N/A
2017	0	0.1	4994	N/A
2016	0	0.1	5903	N/A
2015	1	0.1	4252	N/A

N/A: Number of predicted infections <1; no SIR calculated

LabID - *C. difficile* Infection (CDI)

YR	OBS	PRE	PATD	SIR
2018	3	0.9	4263	N/A
2017	2	1.2	4994	1.6
2016	0	1.3	5903	0.0
2015	2	1.3	4252	1.5



- Significantly lower than NHSN SIR of 1
- Not significantly different from NHSN SIR of 1
- Significantly higher than NHSN SIR of 1
- - - 2018 TN SIR
- - - NHSN SIR=1

Data reported as of August 27, 2019

YR = reporting year; N = number of units reporting (CLABSI/CAUTI); OBS = observed number of infections

PRE = statistically 'predicted' number of infections, based on NHSN national baseline data

SIR = standardized infection ratio (observed/predicted number of infections)

CLD = central line days; UCD = urinary catheter days; PROC = procedures performed; PATD = patient days;

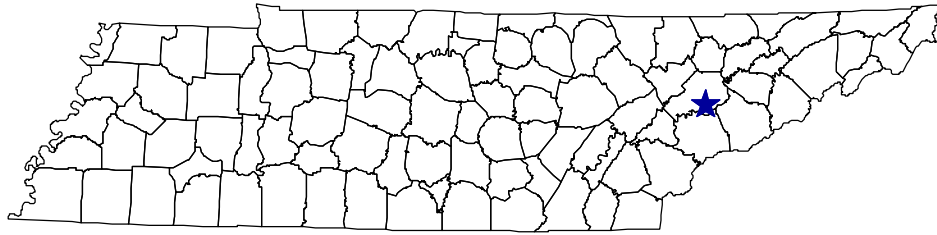
N/A = data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted



**University of Tennessee Medical Ctr, Knoxville, Knox County**

Medical School Affiliation: Major teaching

Bed Size Category: 400+ beds



**Healthcare-Associated Infections (HAI) Summary**

**Standardized Infection Ratio (SIR) by Infection Type, 01/01/2017-12/31/2017**

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		TN SIR
		Observed	Predicted		SIR*	95% CI	
CLABSI	Adult/Pediatric ICU	2	8.1	7228	<b>0.25</b>	<b>( 0.04, 0.81 )</b>	0.85
	Neonatal ICU	1	4.0	2923	0.25	( 0.01, 1.23 )	0.75
	Adult/Pediatric Ward	1	6.8	7013	<b>0.15</b>	<b>( 0.01, 0.72 )</b>	0.68
CAUTI	Adult/Pediatric ICU	16	26.7	13723	<b>0.60</b>	<b>( 0.35, 0.95 )</b>	0.71
	Adult/Pediatric Ward	3	7.3	6176	0.41	( 0.10, 1.11 )	0.72
SSI	Colon surgery	12	12.7	378	0.94	( 0.51, 1.60 )	0.83
	Abdominal hysterectomy	1	2.4	395	0.41	( 0.02, 2.01 )	1.08
LabID	MRSA bacteremia	9	15.3	169051	0.59	( 0.29, 1.08 )	1.09
	C. difficile infection	134	136.1	150020	0.98	( 0.83, 1.16 )	0.83

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

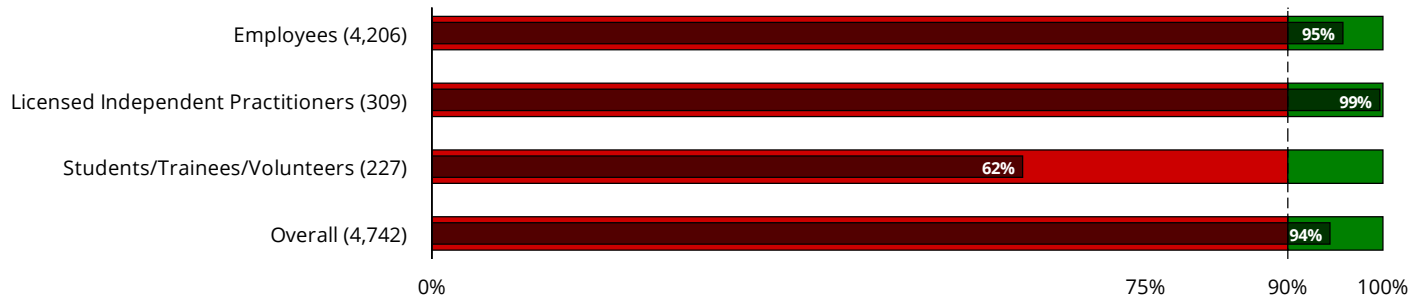
**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at University of Tennessee Medical Ctr*

**Healthcare Personnel Influenza Vaccination - '2017/2018' Influenza Season**

**Healthcare Personnel Category (Total)**



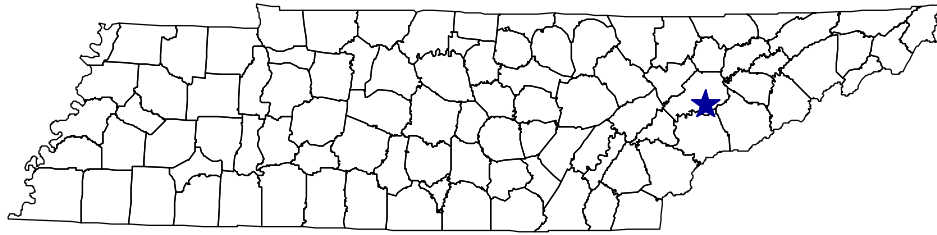
**Healthcare Personnel Vaccinated (%)**

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

**University of Tennessee Medical Ctr, Knoxville, Knox County**

Medical School Affiliation: Major teaching

Bed Size Category: 400+ beds



**Healthcare-Associated Infections (HAI) Summary**

**Standardized Infection Ratio (SIR) by Infection Type, 01/01/2018-12/31/2018**

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		TN SIR
		Observed	Predicted		SIR*	95% CI	
CLABSI	Adult/Pediatric ICU	5	6.0	5320	0.83	( 0.31, 1.85 )	0.76
	Neonatal ICU	3	3.9	2874	0.76	( 0.19, 2.08 )	0.79
	Adult/Pediatric Ward	5	6.6	6816	0.75	( 0.28, 1.67 )	0.63
CAUTI	Adult/Pediatric ICU	14	26.5	13333	<b>0.53</b>	<b>( 0.30, 0.86 )</b>	0.70
	Adult/Pediatric Ward	5	8.0	6718	0.62	( 0.23, 1.38 )	0.73
SSI	Colon surgery	12	13.4	378	0.89	( 0.48, 1.52 )	0.79
	Abdominal hysterectomy	3	2.6	392	1.15	( 0.29, 3.12 )	0.78
LabID	MRSA bacteremia	18	19.0	174790	0.95	( 0.58, 1.47 )	1.29
	C. difficile infection	106	137.0	152403	<b>0.77</b>	<b>( 0.64, 0.93 )</b>	0.68

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at University of Tennessee Medical Ctr*

**Healthcare Personnel Influenza Vaccination - '2018/2019' Influenza Season**

**Healthcare Personnel Category (Total)**

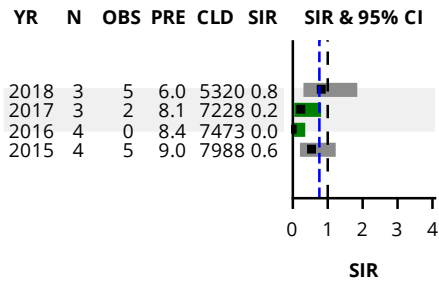


**Healthcare Personnel Vaccinated (%)**

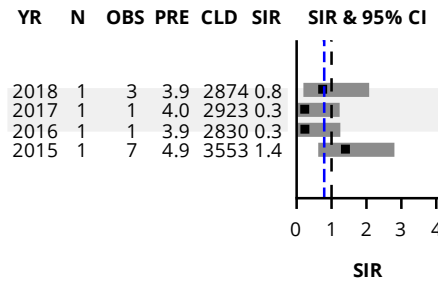
■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

### Central Line-Associated Bloodstream Infections (CLABSI)

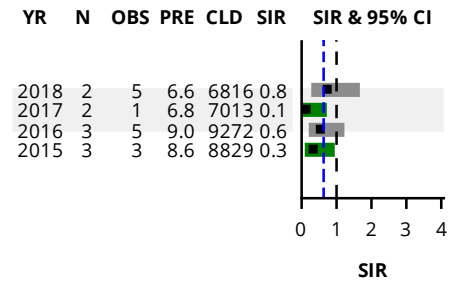
#### CLABSI - Adult/Pediatric ICUs



#### CLABSI - Neonatal ICUs

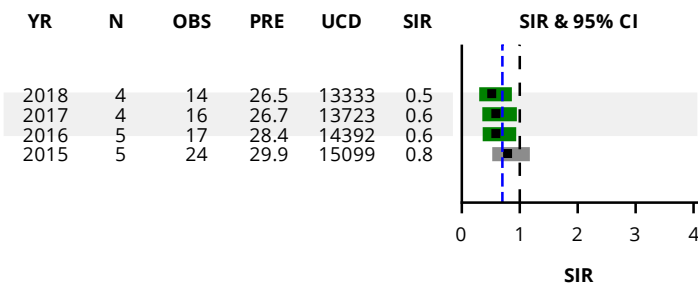


#### CLABSI - Adult/Pediatric Wards

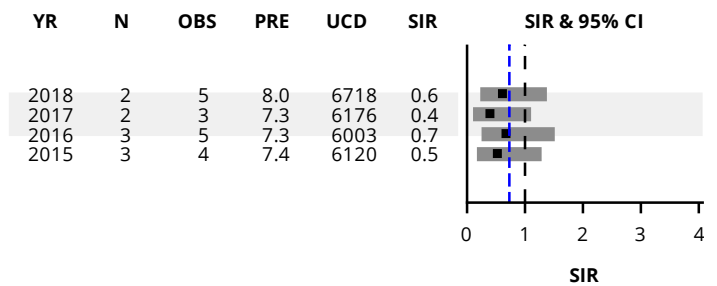


### Catheter-Associated Urinary Tract Infections (CAUTI)

#### CAUTI - Adult/Pediatric ICUs

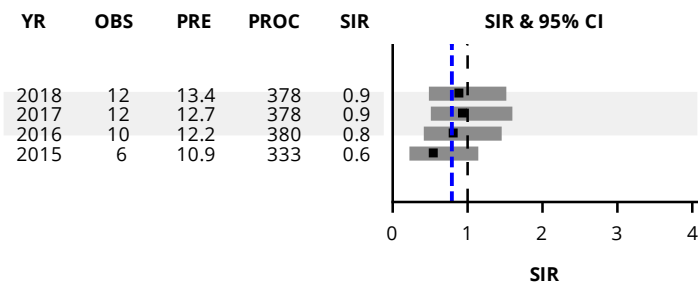


#### CAUTI - Adult/Pediatric Wards

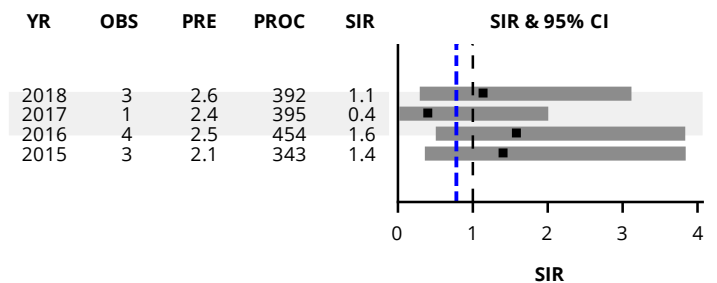


### Surgical Site Infections (SSI)

#### SSI - Colon Surgery

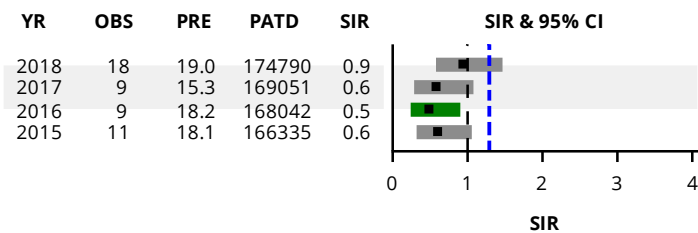


#### SSI - Abdominal Hysterectomy

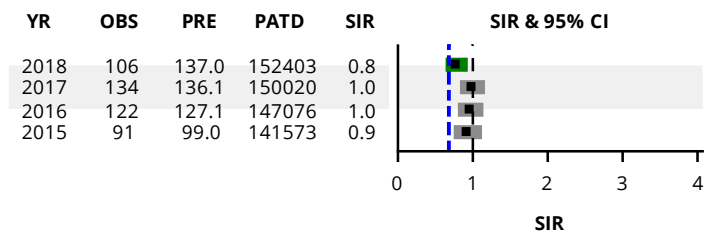


### Healthcare Facility-Onset Laboratory Identified (LabID) Events

#### LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia



#### LabID - *C. difficile* Infection (CDI)



Data reported as of August 27, 2019

YR = reporting year; N = number of units reporting (CLABSI/CAUTI); OBS = observed number of infections

PRE = statistically 'predicted' number of infections, based on NHSN national baseline data

SIR = standardized infection ratio (observed/predicted number of infections)

CLD = central line days; UCD = urinary catheter days; PROC = procedures performed; PATD = patient days;

N/A = data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

■ Significantly lower than NHSN SIR of 1

■ Not significantly different from NHSN SIR of 1

■ Significantly higher than NHSN SIR of 1

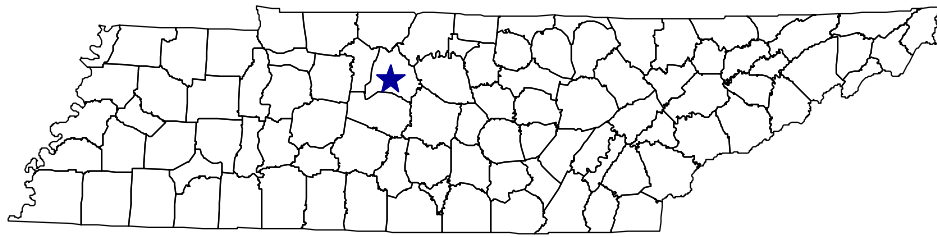
--- 2018 TN SIR

--- NHSN SIR=1

## Vanderbilt Medical Center, Nashville, Davidson County

Medical School Affiliation: Major teaching

Bed Size Category: 400+ beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2017-12/31/2017

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		
		Observed	Predicted		SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	20	19.9	17676	1.00	( 0.63, 1.52 )	0.85
	Adult/Pediatric Ward	10	11.4	11729	0.87	( 0.44, 1.56 )	0.68
CAUTI	Adult/Pediatric ICU	22	42.0	21196	<b>0.52</b>	<b>( 0.34, 0.78 )</b>	0.71
	Adult/Pediatric Ward	3	11.3	9232	<b>0.26</b>	<b>( 0.07, 0.72 )</b>	0.72
SSI	Colon surgery	10	28.8	725	<b>0.35</b>	<b>( 0.18, 0.62 )</b>	0.83
	Abdominal hysterectomy	2	2.9	282	0.69	( 0.12, 2.27 )	1.08
LabID	MRSA bacteremia	24	24.1	222294	0.99	( 0.65, 1.45 )	1.09
	C. difficile infection	116	163.9	222294	<b>0.71</b>	<b>( 0.59, 0.85 )</b>	0.83

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

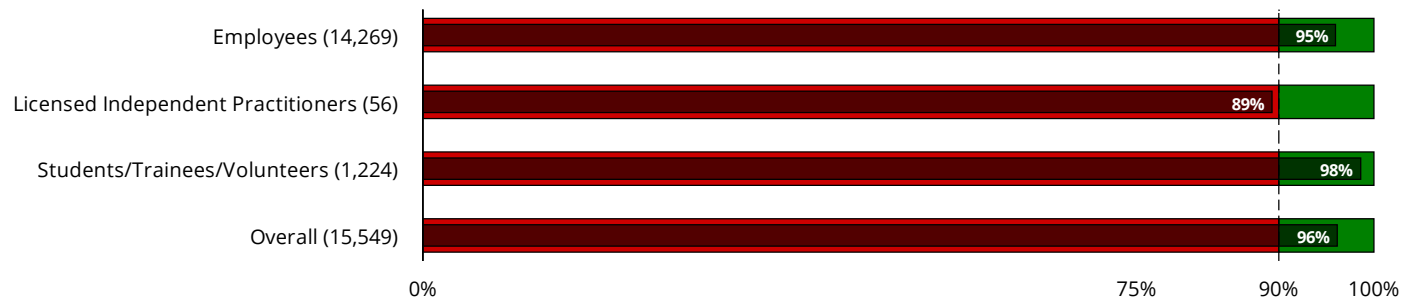
**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at Vanderbilt Medical Center*

### Healthcare Personnel Influenza Vaccination - '2017/2018' Influenza Season

#### Healthcare Personnel Category (Total)



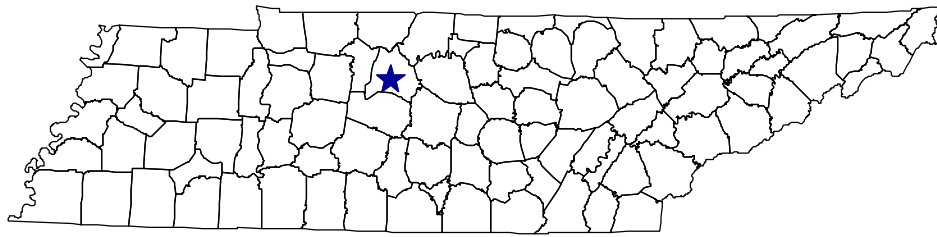
#### Healthcare Personnel Vaccinated (%)

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

## Vanderbilt Medical Center, Nashville, Davidson County

Medical School Affiliation: Major teaching

Bed Size Category: 400+ beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2018-12/31/2018

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		TN SIR
		Observed	Predicted		SIR*	95% CI	
CLABSI	Adult/Pediatric ICU	14	20.3	17993	0.69	( 0.39, 1.13 )	0.76
	Adult/Pediatric Ward	8	15.5	15994	<b>0.51</b>	<b>( 0.24, 0.97 )</b>	0.63
CAUTI	Adult/Pediatric ICU	43	50.2	25061	0.86	( 0.63, 1.14 )	0.70
	Adult/Pediatric Ward	9	12.6	10199	0.71	( 0.35, 1.31 )	0.73
SSI	Colon surgery	21	32.3	790	<b>0.65</b>	<b>( 0.41, 0.98 )</b>	0.79
	Abdominal hysterectomy	0	2.9	282	0.00	( 0.00, 1.03 )	0.78
LabID	MRSA bacteremia	27	21.4	236148	1.26	( 0.85, 1.81 )	1.29
	C. difficile infection	128	182.7	236148	<b>0.70</b>	<b>( 0.59, 0.83 )</b>	0.68

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at Vanderbilt Medical Center*

### Healthcare Personnel Influenza Vaccination - '2018/2019' Influenza Season

#### Healthcare Personnel Category (Total)

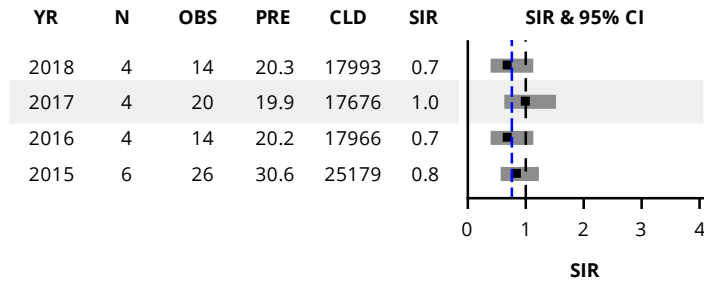


#### Healthcare Personnel Vaccinated (%)

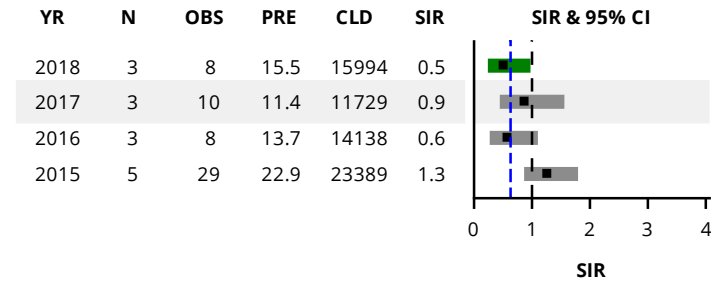
■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

### Central Line-Associated Bloodstream Infections (CLABSI)

#### CLABSI - Adult/Pediatric ICUs

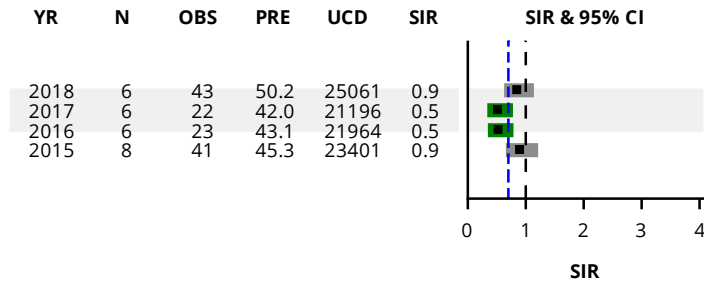


#### CLABSI - Adult/Pediatric Wards

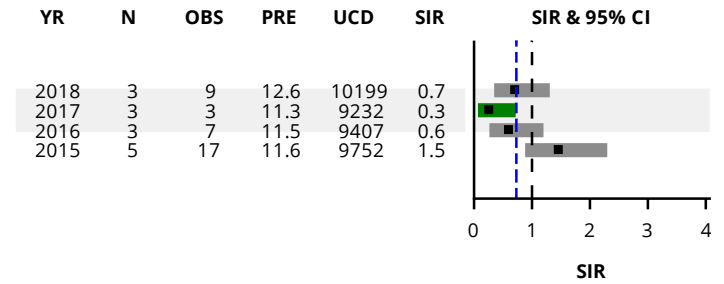


### Catheter-Associated Urinary Tract Infections (CAUTI)

#### CAUTI - Adult/Pediatric ICUs

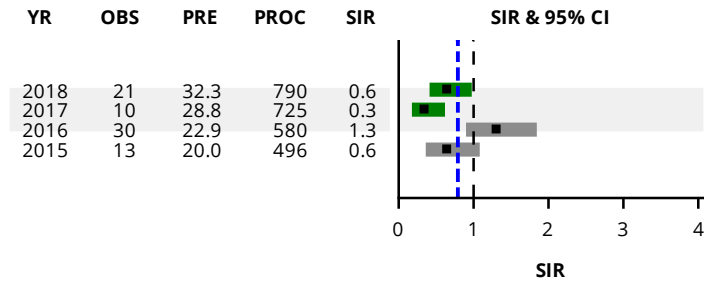


#### CAUTI - Adult/Pediatric Wards

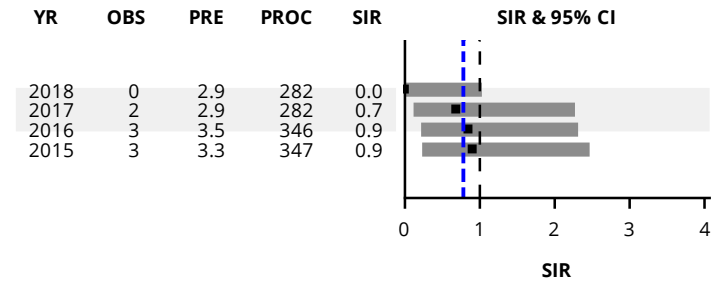


### Surgical Site Infections (SSI)

#### SSI - Colon Surgery

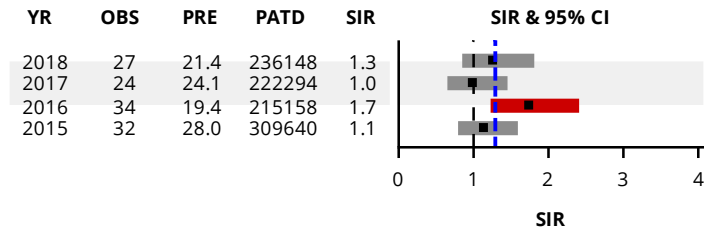


#### SSI - Abdominal Hysterectomy

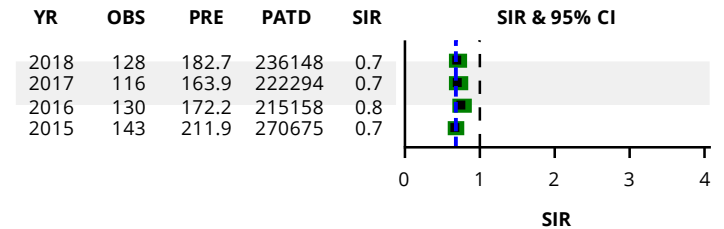


### Healthcare Facility-Onset Laboratory Identified (LabID) Events

#### LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia



#### LabID - *C. difficile* Infection (CDI)



Data reported as of August 27, 2019

YR = reporting year; N = number of units reporting (CLABSI/CAUTI); OBS = observed number of infections

PRE = statistically 'predicted' number of infections, based on NHSN national baseline data

SIR = standardized infection ratio (observed/predicted number of infections)

CLD = central line days; UCD = urinary catheter days; PROC = procedures performed; PATD = patient days;

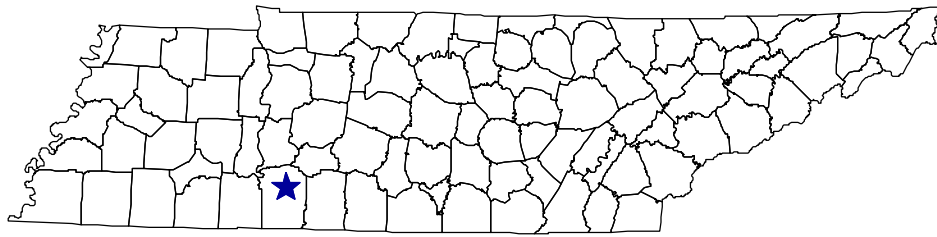
N/A = data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

- Significantly lower than NHSN SIR of 1
- Not significantly different from NHSN SIR of 1
- Significantly higher than NHSN SIR of 1
- - - 2018 TN SIR
- - - NHSN SIR=1

## Wayne Medical Center, Waynesboro, Wayne County

Medical School Affiliation: None

Bed Size Category: 50-99 beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2017-12/31/2017

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		
		Observed	Predicted		SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric Ward	N/A	N/A	N/A	N/A	N/A	0.68
CAUTI	Adult/Pediatric Ward	0	0.2	446	N/A	N/A	0.72
LabID	MRSA bacteremia	0	0.0	3098	N/A	N/A	1.09
	C. difficile infection	1	1.6	3098	0.62	( 0.03, 3.07 )	0.83

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

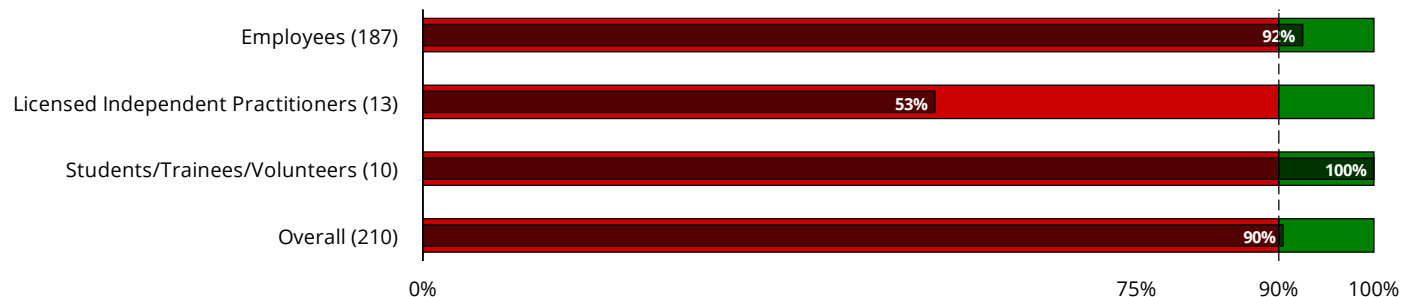
**N/A**: Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at Wayne Medical Center*

### Healthcare Personnel Influenza Vaccination - '2017/2018' Influenza Season

#### Healthcare Personnel Category (Total)



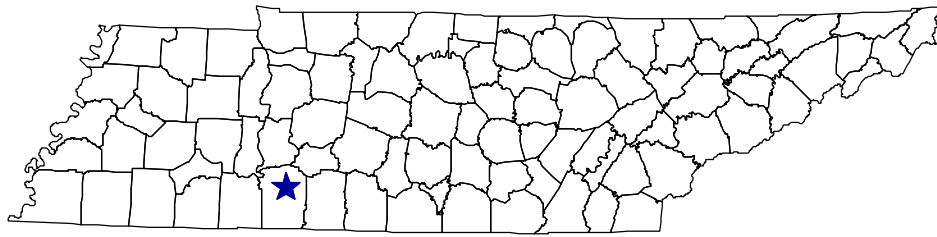
#### Healthcare Personnel Vaccinated (%)

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

## Wayne Medical Center, Waynesboro, Wayne County

Medical School Affiliation: None

Bed Size Category: 50-99 beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2018-12/31/2018

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		
		Observed	Predicted		SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric Ward	0	0.0	63	N/A	N/A	0.63
CAUTI	Adult/Pediatric Ward	1	0.2	440	N/A	N/A	0.73
LabID	MRSA bacteremia	1	0.0	3388	N/A	N/A	1.29
	C. difficile infection	1	1.2	3388	0.78	( 0.04, 3.86 )	0.68

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

**N/A**: Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at Wayne Medical Center*

### Healthcare Personnel Influenza Vaccination - '2018/2019' Influenza Season

#### Healthcare Personnel Category (Total)



#### Healthcare Personnel Vaccinated (%)

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)



### Central Line-Associated Bloodstream Infections (CLABSI)

#### CLABSI - Adult/Pediatric Wards

YR	N	OBS	PRE	CLD	SIR
2018	1	0	0.0	63	N/A
2017	1	N/A	N/A	N/A	N/A
2016	1	0	0.1	193	N/A
2015	1	0	0.0	159	N/A

N/A: Number of predicted infections <1; no SIR calculated

### Catheter-Associated Urinary Tract Infections (CAUTI)

#### CAUTI - Adult/Pediatric Wards

YR	N	OBS	PRE	UCD	SIR
2018	1	1	0.2	440	N/A
2017	1	0	0.2	446	N/A
2016	1	0	0.2	560	N/A
2015	1	1	0.2	589	N/A

N/A: Number of predicted infections <1; no SIR calculated

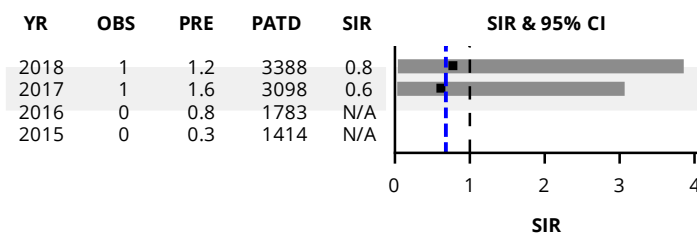
### Healthcare Facility-Onset Laboratory Identified (LabID) Events

#### LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia

YR	OBS	PRE	PATD	SIR
2018	1	0.0	3388	N/A
2017	0	0.0	3098	N/A
2016	0	0.0	1783	N/A
2015	0	0.0	1833	N/A

N/A: Number of predicted infections <1; no SIR calculated

#### LabID - *C. difficile* Infection (CDI)



Data reported as of August 27, 2019

YR = reporting year; N = number of units reporting (CLABSI/CAUTI); OBS = observed number of infections

PRE = statistically 'predicted' number of infections, based on NHSN national baseline data

SIR = standardized infection ratio (observed/predicted number of infections)

CLD = central line days; UCD = urinary catheter days; PROC = procedures performed; PATD = patient days;

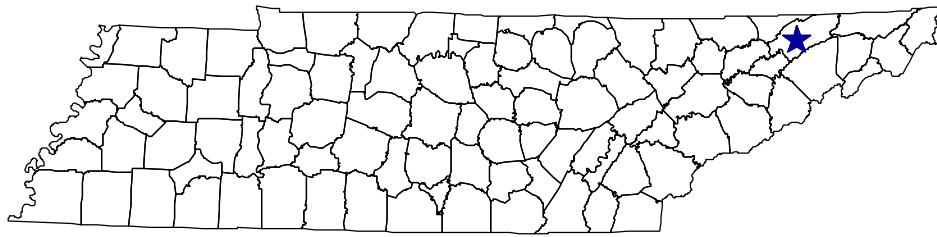
N/A = data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

- Significantly lower than NHSN SIR of 1
- Not significantly different from NHSN SIR of 1
- Significantly higher than NHSN SIR of 1
- - - 2018 TN SIR
- - - NHSN SIR=1

## Wellmont Hawkins County Hospital, Rogersville, Hawkins County

Medical School Affiliation: Undergraduate teaching

Bed Size Category: 50-99 beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2017-12/31/2017

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		
		Observed	Predicted		SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	0	0.0	58	N/A	N/A	0.85
	Adult/Pediatric Ward	0	0.1	202	N/A	N/A	0.68
CAUTI	Adult/Pediatric ICU	0	0.1	198	N/A	N/A	0.71
	Adult/Pediatric Ward	0	0.2	408	N/A	N/A	0.72
SSI	Colon surgery	N/A	N/A	N/A	N/A	N/A	0.83
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	1.08
LabID	MRSA bacteremia	0	0.0	3824	N/A	N/A	1.09
	C. difficile infection	2	1.7	3824	1.12	(0.19, 3.71)	0.83

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

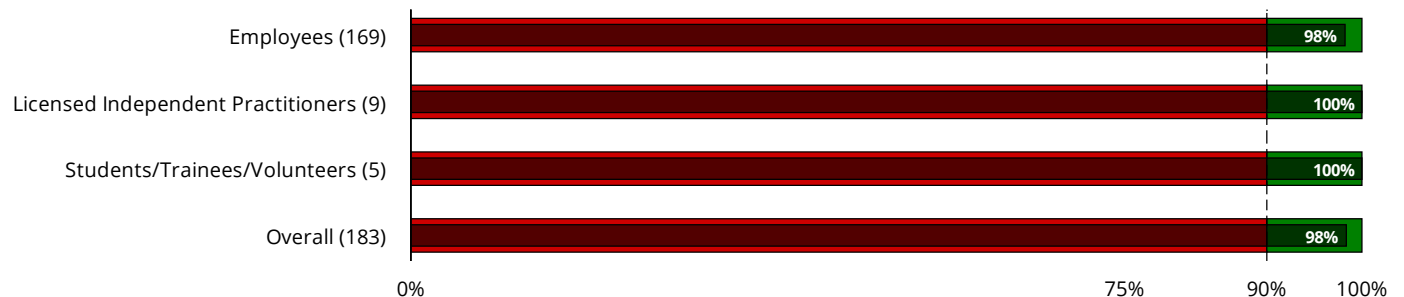
**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at Wellmont Hawkins County Hospital*

### Healthcare Personnel Influenza Vaccination - '2017/2018' Influenza Season

#### Healthcare Personnel Category (Total)



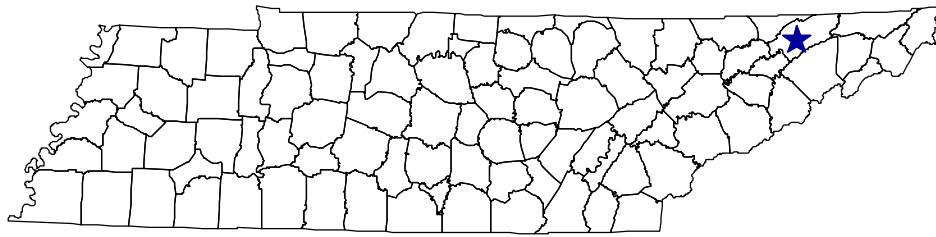
#### Healthcare Personnel Vaccinated (%)

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

## Wellmont Hawkins County Hospital, Rogersville, Hawkins County

Medical School Affiliation: Undergraduate teaching

Bed Size Category: 50-99 beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2018-12/31/2018

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		
		Observed	Predicted		SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	0	0.0	64	N/A	N/A	0.76
	Adult/Pediatric Ward	0	0.2	452	N/A	N/A	0.63
CAUTI	Adult/Pediatric ICU	0	0.0	148	N/A	N/A	0.70
	Adult/Pediatric Ward	1	0.1	361	N/A	N/A	0.73
SSI	Colon surgery	N/A	N/A	N/A	N/A	N/A	0.79
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	0.78
LabID	MRSA bacteremia	0	0.1	3789	N/A	N/A	1.29
	C. difficile infection	1	1.3	3789	0.75	( 0.04, 3.70 )	0.68

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

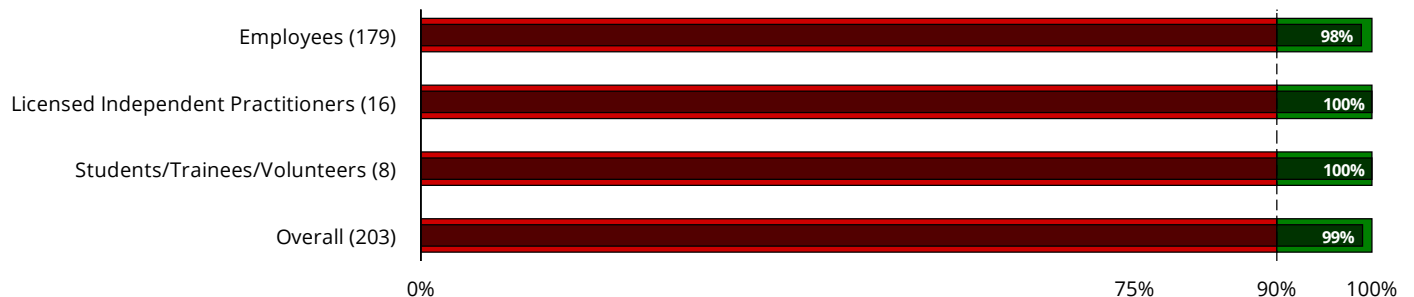
**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at Wellmont Hawkins County Hospital*

### Healthcare Personnel Influenza Vaccination - '2018/2019' Influenza Season

#### Healthcare Personnel Category (Total)



#### Healthcare Personnel Vaccinated (%)

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

### Central Line-Associated Bloodstream Infections (CLABSI)

#### CLABSI - Adult/Pediatric ICUs

YR	N	OBS	PRE	CLD	SIR
2018	1	0	0.0	64	N/A
2017	1	0	0.0	58	N/A
2016	1	N/A	N/A	N/A	N/A

N/A: Number of predicted infections <1; no SIR calculated

#### CLABSI - Adult/Pediatric Wards

YR	N	OBS	PRE	CLD	SIR
2018	1	0	0.2	452	N/A
2017	1	0	0.1	202	N/A
2016	1	0	0.0	143	N/A
2015	1	0	0.2	419	N/A

N/A: Number of predicted infections <1; no SIR calculated

### Catheter-Associated Urinary Tract Infections (CAUTI)

#### CAUTI - Adult/Pediatric ICUs

YR	N	OBS	PRE	UCD	SIR
2018	1	0	0.0	148	N/A
2017	1	0	0.1	198	N/A
2016	1	0	0.0	72	N/A

N/A: Number of predicted infections <1; no SIR calculated

#### CAUTI - Adult/Pediatric Wards

YR	N	OBS	PRE	UCD	SIR
2018	1	1	0.1	361	N/A
2017	1	0	0.2	408	N/A
2016	1	0	0.1	371	N/A
2015	1	0	0.2	484	N/A

N/A: Number of predicted infections <1; no SIR calculated

### Surgical Site Infections (SSI)

#### SSI - Colon Surgery

YR	OBS	PRE	PROC	SIR
2018	N/A	N/A	N/A	N/A
2017	N/A	N/A	N/A	N/A
2016	N/A	N/A	N/A	N/A
2015	N/A	N/A	N/A	N/A

N/A: Number of predicted infections <1; no SIR calculated

#### SSI - Abdominal Hysterectomy

YR	OBS	PRE	PROC	SIR
2018	N/A	N/A	N/A	N/A
2017	N/A	N/A	N/A	N/A
2016	N/A	N/A	N/A	N/A
2015	N/A	N/A	N/A	N/A

N/A: Number of predicted infections <1; no SIR calculated

### Healthcare Facility-Onset Laboratory Identified (LabID) Events

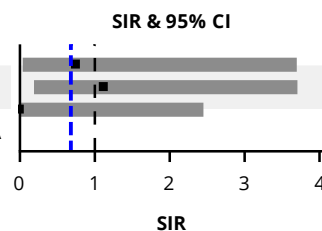
#### LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia

YR	OBS	PRE	PATD	SIR
2018	0	0.1	3789	N/A
2017	0	0.0	3824	N/A
2016	0	0.1	3776	N/A
2015	0	0.0	4247	N/A

N/A: Number of predicted infections <1; no SIR calculated

#### LabID - *C. difficile* Infection (CDI)

YR	OBS	PRE	PATD	SIR
2018	1	1.3	3789	0.7
2017	2	1.7	3824	1.1
2016	0	1.2	3776	0.0
2015	1	0.9	4247	N/A



Data reported as of August 27, 2019

YR = reporting year; N = number of units reporting (CLABSI/CAUTI); OBS = observed number of infections

PRE = statistically 'predicted' number of infections, based on NHSN national baseline data

SIR = standardized infection ratio (observed/predicted number of infections)

CLD = central line days; UCD = urinary catheter days; PROC = procedures performed; PATD = patient days;

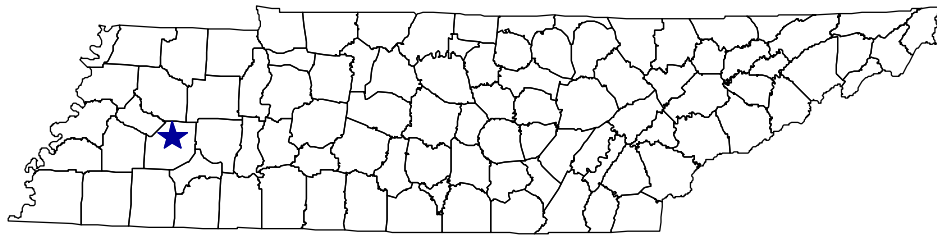
N/A = data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

- Significantly lower than NHSN SIR of 1
- Not significantly different from NHSN SIR of 1
- Significantly higher than NHSN SIR of 1
- - - 2018 TN SIR
- - - NHSN SIR=1

## West Tennessee Healthcare North Hospital, JACKSON, Madison County

Medical School Affiliation: Major teaching

Bed Size Category: <50 beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2018-12/31/2018

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		
		Observed	Predicted		SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	N/A	N/A	N/A	N/A	N/A	0.76
	Adult/Pediatric Ward	1	0.0	102	N/A	N/A	0.63
CAUTI	Adult/Pediatric ICU	N/A	N/A	N/A	N/A	N/A	0.70
	Adult/Pediatric Ward	0	0.0	83	N/A	N/A	0.73
SSI	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	0.78
LabID	MRSA bacteremia	0	0.0	1249	N/A	N/A	1.29
	C. difficile infection	0	0.4	1054	N/A	N/A	0.68

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

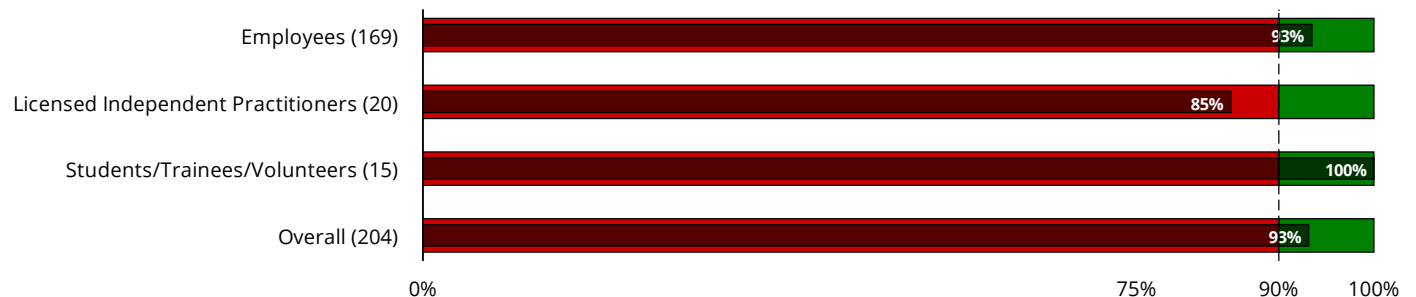
**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at West Tennessee Healthcare North Hospital*

### Healthcare Personnel Influenza Vaccination - '2018/2019' Influenza Season

#### Healthcare Personnel Category (Total)

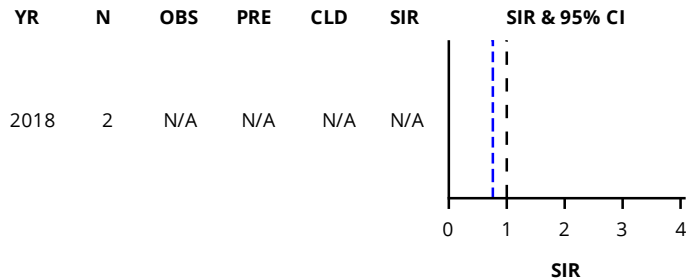


#### Healthcare Personnel Vaccinated (%)

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

### Central Line-Associated Bloodstream Infections (CLABSI)

#### CLABSI - Adult/Pediatric ICUs



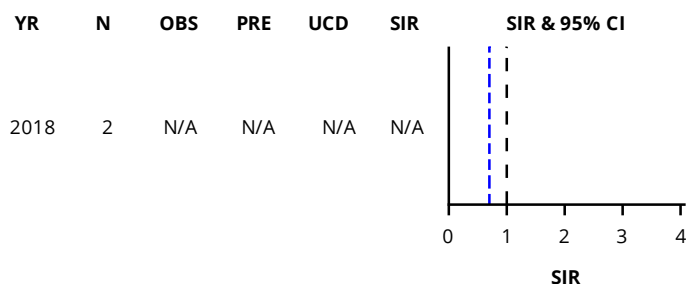
#### CLABSI - Adult/Pediatric Wards

YR	N	OBS	PRE	CLD	SIR
2018	1	1	0.0	102	N/A

N/A: Number of predicted infections <1; no SIR calculated

### Catheter-Associated Urinary Tract Infections (CAUTI)

#### CAUTI - Adult/Pediatric ICUs



#### CAUTI - Adult/Pediatric Wards

YR	N	OBS	PRE	UCD	SIR
2018	1	0	0.0	83	N/A

N/A: Number of predicted infections <1; no SIR calculated

### Surgical Site Infections (SSI)

#### SSI - Colon Surgery

#### SSI - Abdominal Hysterectomy

YR	OBS	PRE	PROC	SIR
2018	N/A	N/A	N/A	N/A

N/A: Number of predicted infections <1; no SIR calculated

### Healthcare Facility-Onset Laboratory Identified (LabID) Events

#### LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia

#### LabID - *C. difficile* Infection (CDI)

YR	OBS	PRE	PATD	SIR
2018	0	0.0	1249	N/A

YR	OBS	PRE	PATD	SIR
2018	0	0.4	1054	N/A

N/A: Number of predicted infections <1; no SIR calculated

N/A: Number of predicted infections <1; no SIR calculated

Data reported as of August 27, 2019

**YR** = reporting year; **N** = number of units reporting (CLABSI/CAUTI); **OBS** = observed number of infections

**PRE** = statistically 'predicted' number of infections, based on NHSN national baseline data

**SIR** = standardized infection ratio (observed/predicted number of infections)

**CLD** = central line days; **UCD** = urinary catheter days; **PROC** = procedures performed; **PATD** = patient days;

**N/A** = data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

■ Significantly lower than NHSN SIR of 1

■ Not significantly different from NHSN SIR of 1

■ Significantly higher than NHSN SIR of 1

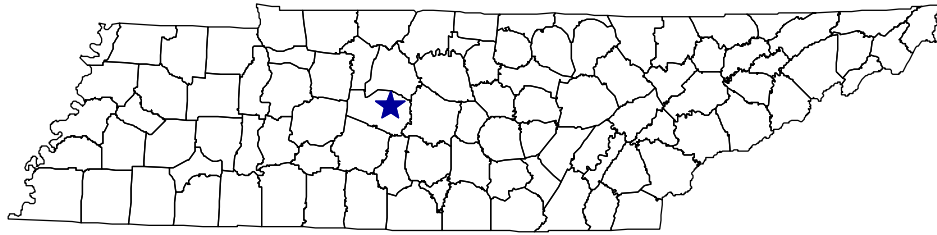
--- 2018 TN SIR

--- NHSN SIR=1

## Williamson Medical Center, Franklin, Williamson County

Medical School Affiliation: None

Bed Size Category: 100-399 beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2017-12/31/2017

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		
		Observed	Predicted		SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	1	1.1	1513	0.88	( 0.04, 4.33 )	0.85
	Neonatal ICU	0	0.1	237	N/A	N/A	0.75
	Adult/Pediatric Ward	0	1.2	1935	0.00	( 0.00, 2.38 )	0.68
CAUTI	Adult/Pediatric ICU	0	1.9	2605	0.00	( 0.00, 1.55 )	0.71
	Adult/Pediatric Ward	2	2.3	3549	0.86	( 0.15, 2.85 )	0.72
SSI	Colon surgery	0	1.5	70	0.00	( 0.00, 1.96 )	0.83
	Abdominal hysterectomy	0	0.3	61	N/A	N/A	1.08
LabID	MRSA bacteremia	1	1.4	34852	0.67	( 0.03, 3.31 )	1.09
	C. difficile infection	15	22.1	29257	0.68	( 0.39, 1.09 )	0.83

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at Williamson Medical Center*

### Healthcare Personnel Influenza Vaccination - '2017/2018' Influenza Season

#### Healthcare Personnel Category (Total)



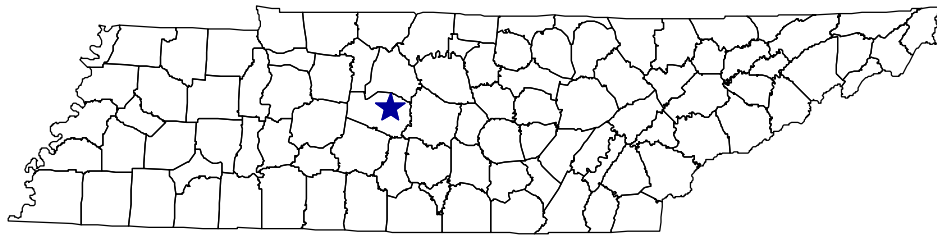
#### Healthcare Personnel Vaccinated (%)

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

## Williamson Medical Center, Franklin, Williamson County

Medical School Affiliation: None

Bed Size Category: 100-399 beds



### Healthcare-Associated Infections (HAI) Summary

#### Standardized Infection Ratio (SIR) by Infection Type, 01/01/2018-12/31/2018

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		TN SIR
		Observed	Predicted		SIR*	95% CI	
CLABSI	Adult/Pediatric ICU	1	1.2	1680	0.79	( 0.04, 3.90 )	0.76
	Neonatal ICU	0	0.0	133	N/A	N/A	0.79
	Adult/Pediatric Ward	0	1.1	1834	0.00	( 0.00, 2.51 )	0.63
CAUTI	Adult/Pediatric ICU	1	2.1	2868	0.47	( 0.02, 2.31 )	0.70
	Adult/Pediatric Ward	1	2.2	3459	0.44	( 0.02, 2.18 )	0.73
SSI	Colon surgery	1	2.1	87	0.47	( 0.02, 2.33 )	0.79
	Abdominal hysterectomy	0	0.6	111	N/A	N/A	0.78
LabID	MRSA bacteremia	0	1.3	33670	0.00	( 0.00, 2.20 )	1.29
	C. difficile infection	9	23.3	29193	0.39	( 0.19, 0.71 )	0.68

**Green highlighting** indicates an SIR significantly **LOWER** than the 2015 national baseline

**Red highlighting** indicates an SIR significantly **HIGHER** than the 2015 national baseline

**N/A:** Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

\*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

*See page 3 for more detailed information about HAIs at Williamson Medical Center*

### Healthcare Personnel Influenza Vaccination - '2018/2019' Influenza Season

#### Healthcare Personnel Category (Total)



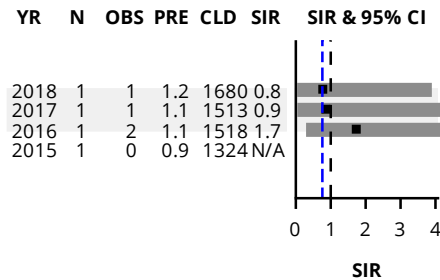
#### Healthcare Personnel Vaccinated (%)

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

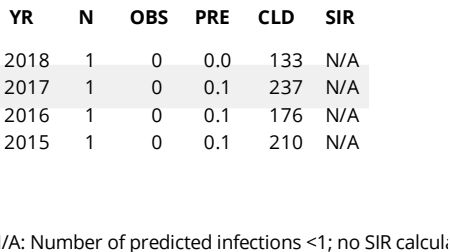


### Central Line-Associated Bloodstream Infections (CLABSI)

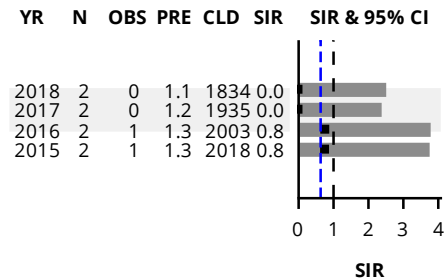
#### CLABSI - Adult/Pediatric ICUs



#### CLABSI - Neonatal ICUs

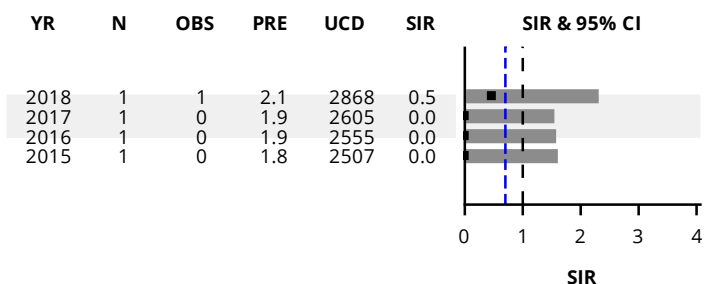


#### CLABSI - Adult/Pediatric Wards

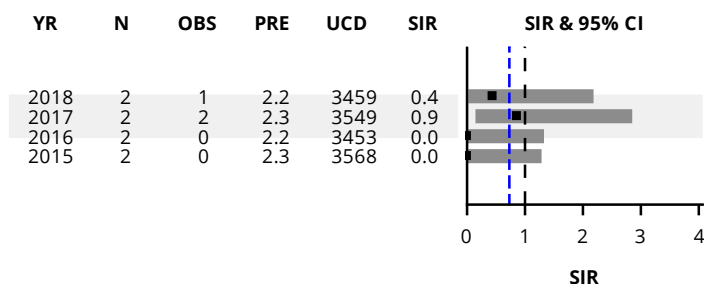


### Catheter-Associated Urinary Tract Infections (CAUTI)

#### CAUTI - Adult/Pediatric ICUs

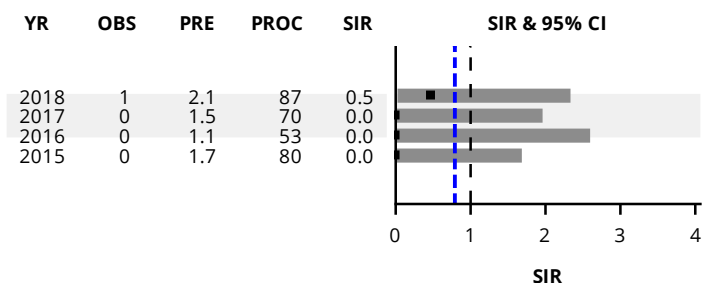


#### CAUTI - Adult/Pediatric Wards

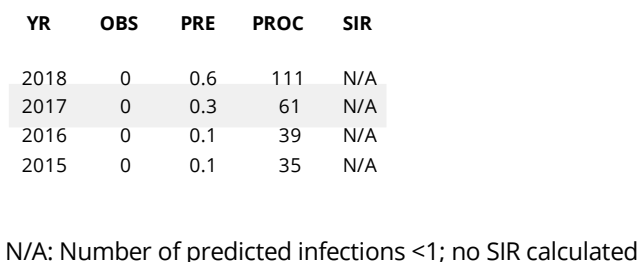


### Surgical Site Infections (SSI)

#### SSI - Colon Surgery

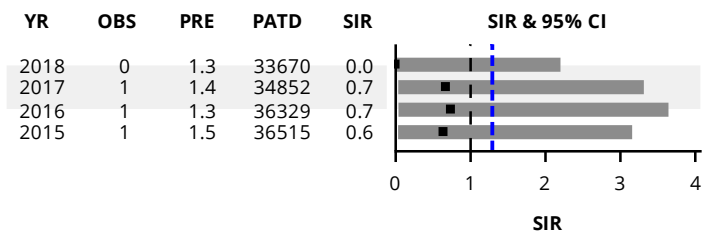


#### SSI - Abdominal Hysterectomy

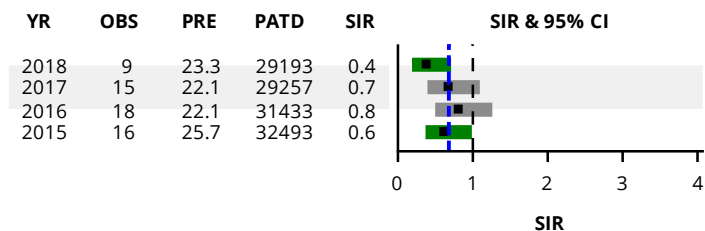


### Healthcare Facility-Onset Laboratory Identified (LabID) Events

#### LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia



#### LabID - *C. difficile* Infection (CDI)



Data reported as of August 27, 2019

YR = reporting year; N = number of units reporting (CLABSI/CAUTI); OBS = observed number of infections

PRE = statistically 'predicted' number of infections, based on NHSN national baseline data

SIR = standardized infection ratio (observed/predicted number of infections)

CLD = central line days; UCD = urinary catheter days; PROC = procedures performed; PATD = patient days;

N/A = data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

■ Significantly lower than NHSN SIR of 1

■ Not significantly different from NHSN SIR of 1

■ Significantly higher than NHSN SIR of 1

--- 2018 TN SIR

--- NHSN SIR=1

# Appendices

## Appendix A. Definitions

**Abdominal hysterectomy (HYST):** Hysterectomy performed through the abdomen; includes laparoscopic procedures.

**All Surgical Site Infection Standardized Infection Ratio (All SSI SIR):** (See Standardized Infection Ratio.) A standardized infection ratio calculated by NHSN for surgical site infections, which includes all inpatient and outpatient procedures and all primary SSIs identified during admission, readmission, or post-discharge surveillance, as defined in the NHSN Patient Safety Component Manual.

**ASA Score:** Assessment by the anesthesiologist of the patient's preoperative physical condition using the American Society of Anesthesiologists' (ASA) Classification of Physical Status. Patient is assigned one of the following which is used as one element of the SSI Basic Risk index:

- 1 -- Normally healthy patient
- 2 -- Patient with mild systemic disease
- 3 -- Patient with severe systemic disease that is not incapacitating
- 4 -- Patient with an incapacitating systemic disease that is a constant threat to life
- 5 -- Moribund patient who is not expected to survive for 24 hours with or without the operation

**Catheter-associated urinary tract infection (CAUTI):** When a patient develops a urinary tract infection while having a urinary catheter in place or within 48 hours of urinary catheter removal, the infection is considered a CAUTI (see [Patient Guide to CAUTI](#)<sup>47</sup>).

**CAUTI infection rate:** The total number of catheter-associated urinary tract infections divided by the number of urinary catheter-days, multiplied by 1,000.

**Central line:** A flexible tube that is inserted in a patient's blood vessel and terminates at or close to the heart or in one of the large vessels near the heart. A central line (or an umbilical line for newborns) can be used to give fluids, antibiotics, medical treatments such as chemotherapy, and/or liquid food. If a central line is inserted incorrectly or not cared for properly, it can lead to dangerous bloodstream infections (see [Patient Guide to CLABSI](#)<sup>48</sup>). Central lines are also sometimes called central venous lines or central venous catheters.

**Central line-associated bloodstream infection (CLABSI):** When a patient develops a bloodstream infection while having a central line in place or within 48 hours of central line removal, the infection is considered a CLABSI (see [Patient Guide to CLABSI](#)<sup>49</sup>).

<sup>47</sup> [http://www.cdc.gov/hai/pdfs/uti/CA-UTI\\_tagged.pdf](http://www.cdc.gov/hai/pdfs/uti/CA-UTI_tagged.pdf)

<sup>48</sup> [http://www.cdc.gov/hai/pdfs/bsi/BSI\\_tagged.pdf](http://www.cdc.gov/hai/pdfs/bsi/BSI_tagged.pdf)

<sup>49</sup> [http://www.cdc.gov/hai/pdfs/bsi/BSI\\_tagged.pdf](http://www.cdc.gov/hai/pdfs/bsi/BSI_tagged.pdf)

**Central line-days:** The total number of days a central line is in place for patients in a particular unit. The count is performed at the same time each day. Each patient with one or more central lines at the time the count is performed is counted as one central line day. In specialty care areas, central line-days are collected separately for permanent and temporary central lines (see “Central line” definition). If a patient has both a permanent and a temporary central line, the day is recorded as a temporary central line-day.

Example: 5 patients on the first day of the month had one or more central lines in place. Similarly, 5 patients on day two, 2 patients on day three, 5 patients on day four, 3 patients on day five, 4 patients on day six, and 4 patients on day seven had central lines in place. Adding the number of patients with central lines on days one through seven, we would have  $5 + 5 + 2 + 5 + 3 + 4 + 4 = 28$  central line-days for the first week. The number of central line-days for the month is the sum of the daily counts.

**Central line-associated bloodstream infection (CLABSI) rate:** This rate is the total number of central line-associated bloodstream infections divided by the number of central line-days, multiplied by 1,000.

**Central line utilization ratio:** See Device Utilization Ratio

**Clostridioides difficile:** A bacterium that naturally resides in the bowels of some people without symptoms of infection. *Clostridioides difficile* (*C. difficile*) is responsible for a spectrum of *C. difficile* infections (CDI), including gastrointestinal illness which can lead to severe complications including sepsis and death. CDI can occur when *C. difficile* spores are transferred to patients via the hands of healthcare personnel or other contaminated surfaces or items (See [Patient Guide on C. difficile Infection](#)<sup>50</sup>).

**Colon surgery (COLO):** Procedure performed on the large intestine; does not include rectal operations.

**Community-onset (CO):** LabID event specimen collected as an outpatient or an inpatient  $\leq 3$  days after admission to the facility (i.e., days 1, 2, or 3 of admission).

**Community-onset healthcare facility-associated (CO-HFA):** Community-onset (CO) LabID event specimen collected from a patient who was discharged from the facility  $\leq 4$  weeks prior to the current date of stool specimen collection (*Clostridioides difficile* infection LabID events only).

**Complex Admission/Readmission Standardized Infection Ratio (Complex A/R SIR):** (See Standardized Infection Ratio) A standardized infection ratio calculated by NHSN for surgical site infections, which only includes inpatient procedures and deep incisional primary and organ/space SSIs identified during admission or readmission to the reporting facility, as defined in the NHSN Patient Safety Component Manual.

<sup>50</sup> [http://www.cdc.gov/HAI/pdfs/cdiff/Cdiff\\_tagged.pdf](http://www.cdc.gov/HAI/pdfs/cdiff/Cdiff_tagged.pdf)

**Confidence intervals:** Confidence intervals describe the reliability of a point estimate, such as a standardized infection ratio or infection rate. If TDH mentions a confidence interval of 95%, it means that the TDH is 95% confident that the hospital's precise infection rate (the point estimate) falls within the range given. In this report, the confidence interval is based on the number of infections observed and the number of central line-days accumulated during the specified time period.

If two hospitals have different infection rates, but the confidence intervals for the two rates overlap, then it is reasonably possible that the true rates are the same (see [Discussion of Confidence Intervals](#)<sup>51</sup>).

**Coronary Artery Bypass Graft (CBGB/C):** *Coronary artery bypass graft with both chest and donor site incisions (CBGB):* Chest procedure to perform direct revascularization of the heart; includes obtaining suitable vein from donor site for grafting.

*Coronary artery bypasses graft with chest incision only (CBGC):* Chest procedure to perform direct vascularization of the heart using, for example, the internal mammary (thoracic) artery.

**Deep incisional SSI:** A surgical site infection that involves the deep soft tissues (e.g., fascial and muscle layers) of the incision and meets the NHSN criteria for a deep incisional SSI as described in the NHSN Patient Safety Manual. A deep incisional SSI can be either 1) *primary* – identified in the primary incision in a patient that had an operation with one or more incisions (e.g., chest incision in a CBGB) or 2) *secondary* – identified in the secondary incision in a patient that had an operation with more than one incision (e.g., donor site (leg) incision in a CBGB).

**Device Utilization (DU) Ratio:** This ratio is the number of device (central line or urinary catheter) days divided by the number of patient-days (see also: central line utilization ratio and urinary catheter utilization ratio).

**Healthcare-associated infection (HAI):** For an infection to be considered healthcare-associated, there must be no evidence that the infection was present or incubating at the time of hospital admission. An HAI may be confined to one area of the body (localized) or be spread throughout (systemic). It is the body's adverse reaction to the presence of an infectious agent(s) or its toxin(s).

**Healthcare facility-onset (HO):** LabID event specimen collected >3 days after admission to the facility (i.e., on or after day 4).

**Hip prosthesis (HPRO):** In HPRO surgery (also called a "hip arthroplasty"), all or part of a diseased hip joint is removed and replaced with an artificial joint.

<sup>51</sup> <https://www.scdhec.gov/sites/default/files/docs/Health/docs/CIs%20explained%20-final2.pdf>

**Infection control/prevention processes:** These are routine measures that can be used in all healthcare settings to prevent infections. These steps or principles can be expanded to meet the needs of specialized types of hospitals. Examples include:

- Diligent hand cleaning
- Use of personal protective equipment such as gloves, gowns, and/or masks when caring for patients in select situations to prevent the spread of infections
- Use of an infection prevention checklist when inserting central lines. The list reminds healthcare workers to clean their hands thoroughly; clean the patient's skin with the appropriate type of disinfectant before insertion; wear the recommended sterile gown, gloves and mask; and place sterile barriers around the insertion site.
- Monitoring staff to ensure that they are following proper infection prevention procedures

**Infection preventionist (IPs):** Health professionals with special training in infection prevention and monitoring.

**Intensive care unit (ICU) (also called a "critical care unit"):** ICUs are hospital units that provide intensive observation and treatment for patients either dealing with, or at risk of developing, life-threatening problems. Smaller hospitals typically care for both medical and surgical patients in a combined medical-surgical ICU. Larger hospitals often have separate ICUs for medical patients and surgical patients.

**Inpatient:** As defined by NHSN, a patient whose date of admission to the healthcare facility and the date of discharge are different calendar days

**Laboratory-identified (LabID) event:** A monitoring method for multidrug-resistant organisms which relies almost exclusively on data obtained from the laboratory. Surveillance is performed using the [NHSN MDRO/CDI Module Protocol](#)<sup>52</sup>.

**Long-Term Acute Care (LTAC) Facility:** LTACs provide evaluation, treatment, and management of patients suffering medically complex conditions, or who have suffered recent catastrophic illness or injury, and require and extended stay in an acute care environment.

**Methicillin-Resistant *Staphylococcus aureus*:** Methicillin-Resistant *Staphylococcus aureus* (MRSA) is a type of *Staphylococcus* bacteria that is resistant to certain antibiotics including methicillin. MRSA can be spread via contaminated surfaces or equipment and on the hands of healthcare personnel. MRSA infections can be severe and life threatening and treatment options are often limited and expensive (see [Patient Guide on MRSA](#)<sup>53</sup>).

<sup>52</sup> [http://www.cdc.gov/nhsn/PDFs/pscManual/12pscMDRO\\_CDADcurrent.pdf](http://www.cdc.gov/nhsn/PDFs/pscManual/12pscMDRO_CDADcurrent.pdf)

<sup>53</sup> [http://www.cdc.gov/mrsa/pdf/SHEA-mrsa\\_tagged.pdf](http://www.cdc.gov/mrsa/pdf/SHEA-mrsa_tagged.pdf)

**National Healthcare Safety Network (NHSN):** This is the online system that Tennessee hospitals must use to report HAI data to the Tennessee Department of Health. NHSN is a secure, internet-based surveillance (monitoring and reporting) system. Among other features, the network offers integrated patient and healthcare worker safety surveillance systems. NHSN is managed by CDC's Division of Healthcare Quality Promotion. In NHSN, hospitals submit information that is needed to calculate HAI rates and standardized infection ratios (SIRs). Hospitals must confer rights to TDH in order for TDH to collect data from NHSN and report the information to the public.

**NHSN Patient Safety Component Manual:** This manual contains standardized surveillance definitions and data collection methods that are essential for fair reporting of HAIs. Surveillance definitions are updated annually; [current protocols](#)<sup>54</sup> are available online.

**NHSN operative procedure:** A procedure that:

- 1) Is performed on a patient who is an NHSN inpatient or an NHSN outpatient
- 2) Takes place during an operation where a surgeon makes at least one incision through the skin or mucous membrane, including laparoscopic approach, and closes the incision before the patient leaves the operating room, and
- 3) That is included in Table 1, Chapter 9 of the NHSN Patient Safety Manual

**Operation:** A single trip to the operating room (OR) where a surgeon makes at least one incision through the skin or mucous membrane, including laparoscopic approach, and closes the incision before the patient leaves the OR.

**Organ/space SSI:** A surgical site infection that involves any part of the body, excluding the skin incision, fascia, or muscle layers, that is opened or manipulated during the operative procedure (e.g., osteomyelitis).

**Outpatient:** As defined by NHSN, a patient whose date of admission to the healthcare facility and the date of discharge are the same calendar day.

**Standardized infection ratio (SIR):** The SIR is a summary measure used to compare infection data from one population to data from a "standard" population. For HAI reports, the standard population comes from data reported from U.S. hospitals that report to NHSN. The SIR is calculated by dividing the observed number of infections by the predicted (or statistically expected) number of infections, which is calculated using data from the standard population. See Methods section for more information.

**Superficial incisional SSI:** A surgical site infection that involves only skin and soft tissue layers of the incision and meets the NHSN criteria for a superficial incisional SSI as described in the NHSN Patient Safety Manual. A incisional SSI can be either 1) *primary* – identified in the primary incision in a patient that had an operation with one or more incisions (e.g., chest incision in a CBGB) or 2) *secondary* – identified in the secondary incision in a patient that had an operation with more than one incision (e.g., donor site (leg) incision in a CBGB).

<sup>54</sup> [https://www.cdc.gov/nhsn/pdfs/pscmanual/pscmanual\\_current.pdf](https://www.cdc.gov/nhsn/pdfs/pscmanual/pscmanual_current.pdf)

**Surgical Site Infection (SSI):** An infection found after an operation in the part of the body where the surgery was performed (see [Patient Guide to SSI](#)<sup>55</sup>).

**Surveillance:** The process of finding and documenting infections.

- Active surveillance: This includes, but is not limited to, active, patient-based, prospective surveillance by a trained infection preventionist (IP). The IP seeks out infections during a patient's stay by screening a variety of data sources. The sources may include patient charts and laboratory, pharmacy, radiology/imaging, admission/discharge/transfer, and pathology databases. The complete definition of surveillance, including how to capture denominator data to calculate infection rates, is found in each module of the NHSN Patient Safety Component Manual (see above).
- Post-discharge surveillance: This is the process IPs use to seek out infections after patients have been discharged from the hospital. Post-discharge surveillance includes screening data sources such as re-admission and emergency department visit records.

**Urinary catheter:** A drainage tube that is inserted into the urinary bladder through the urethra, left in place, and connected to a closed collection system.

**Urinary catheter days:** The total number of days a urinary catheter is in place for patients in a particular unit. The count is performed at the same time each day. Each patient with urinary catheter in place at the time the count is performed is counted as one urinary catheter day.

Example: 5 patients on the first day of the month had a urinary catheter in place. Similarly, 5 patients on day two, 2 patients on day three, 5 patients on day four, 3 patients on day five, 4 patients on day six, and 4 patients on day seven had urinary catheters in place. Adding the number of patients with urinary catheters on days one through seven, we would have  $5 + 5 + 2 + 5 + 3 + 4 + 4 = 28$  urinary catheter-days for the first week. The number of urinary catheter days for the month is the sum of the daily counts.

**Urinary catheter utilization ratio:** See Device Utilization Ratio

**Validation:** Validation is the process of making sure that HAI data reported to NHSN are complete and accurate to:

- Assess the accuracy and quality of data submitted to NHSN
- Provide hospitals with information to help them correctly use the NHSN application
- Provide education to IPs and other hospital staff to improve data accuracy and quality, if necessary
- Teach IPs how to confirm the accuracy of written or electronic data they receive from hospital departments
- Look for unreported HAIs
- Assess selected infection control processes
- Make recommendations for improvements if data accuracy and/or quality issues are discovered

<sup>55</sup> [http://www.cdc.gov/HAI/pdfs/ssi/SSI\\_tagged.pdf](http://www.cdc.gov/HAI/pdfs/ssi/SSI_tagged.pdf)



## **Appendix B. Acronyms**

A/R – admission/readmission  
ASA – American Society of Anesthesiologists  
CAUTI – catheter-associated urinary tract infection  
CBGB – coronary artery bypass graft surgery: both chest and donor site incisions  
CBGC – coronary artery bypass graft surgery: chest incision only  
CCU – critical care unit (used interchangeably with intensive care unit (ICU))  
CDC – Centers for Disease Control and Prevention  
CDI – *C. difficile* infection  
CI – confidence interval  
CLD – central line-days  
CLABSI – central line-associated bloodstream infection  
CMS – Centers for Medicare and Medicaid Services  
CO – community onset  
COLO – colon surgery  
DD – device days  
DIP – deep incisional primary SSI  
DIS – deep incisional secondary SSI  
DU ratio – device utilization ratio  
HAI – healthcare-associated infection  
HO – healthcare facility onset  
HYST – abdominal hysterectomy  
IP – infection preventionist  
ICU – intensive care unit (use interchangeably with critical care unit (CCU))  
LTAC – long-term acute care  
MRSA – methicillin-resistant *Staphylococcus aureus*  
NHSN – National Healthcare Safety Network  
NICU – neonatal intensive care unit  
OR – operating room  
PROC – surgical procedures  
SIP – superficial incisional primary SSI  
SIR – standardized infection ratio  
SIS – superficial incisional secondary SSI  
SSI – surgical site infection  
TDH – Tennessee Department of Health  
TN – Tennessee  
UCD – Urinary catheter days  
VRE – vancomycin-resistant *Enterococcus*