



Department of
Health

Tennessee's Report on Healthcare-Associated Infections

January 1, 2019–December 31, 2020

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Executive Summary

Healthcare-associated infections (HAIs) are a major public health problem. Whilst progress has been made in reducing HAIs, the Centers for Disease Control and Prevention estimates that there were more than 600,000 HAIs nationwide in 2015 with approximately 10% of those HAIs resulting in death.¹ 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). Tennessee state requirements complement Centers for Medicare and Medicaid Services (CMS) mandated HAI reporting requirements which have been in effect since January 2011.

Key Findings

Acute Care Hospitals

- In 2019, there were 28%* fewer central line-associated bloodstream infections (CLABSI) in Tennessee's adult and pediatric intensive care units (ICUs) and 48%* fewer CLABSI in adult and pediatric wards than predicted based on national 2015 data. In 2020, there were 9% fewer CLABSI in Tennessee's adult and pediatric ICUs, and 35%* fewer CLABSI in adult and pediatric wards than predicted based on national 2015 data.
- In 2019, there were 26%* fewer catheter-associated urinary tract infections (CAUTI) in Tennessee's adult and pediatric ICUs and 22%* fewer CAUTI in adult and pediatric wards than predicted based on national 2015 data. In 2020, there were 31%* fewer CAUTI events in adult and pediatric ICUs and 32%* fewer CAUTI in Tennessee's adult and pediatric wards than predicted based on national 2015 data.
- In 2020, there were 36%* fewer SSI following colon surgeries in Tennessee Acute Care Hospitals than predicted based on national 2015 data. 2020 also saw 44%* fewer SSI following Coronary Artery Bypass Graft (CABG) surgeries in Tennessee Acute Care Hospitals than predicted based on national 2015 data. Also based on national 2015 data,
- Continuing the pattern detailed in our previous report, methicillin-resistant *Staphylococcus aureus* (MRSA) bloodstream infections in Tennessee Acute Care Hospitals exceeded the

¹ Magill SS, O'Leary E, Janelle S, et al. Changes in Prevalence of Health Care-Associated Infections in U.S. Hospitals. *New England Journal of Medicine* 2018;379:1732-1744.

expected occurrences in both 2019 and 2020 with 19%* more and 23%* more MRSA infections in 2019 and 2020 respectively.

- In 2019, there were 53%* fewer *Clostridioides difficile* Infections (CDI) as predicted in Tennessee Acute Care Hospitals and 64%* fewer CDI infections than predicted in 2020.

Inpatient Rehabilitation Facilities (IRF)

- In 2019, there were 56%* fewer *Clostridioides difficile* Infections (CDI) as predicted in Tennessee IRF whilst there were 53%* fewer CDI in 2020 compared to national 2015 data.

Long-Term Acute Care (LTAC) Facilities

- In 2020, there were 48%* fewer central line-associated bloodstream infections (CLABSI) in LTAC facilities than predicted based on national 2015 data.
- In 2019, there were 32%* fewer catheter-associated urinary tract infections (CAUTI) in Tennessee's LTAC facilities and 30%* fewer CAUTI in 2020 than predicted based on national 2015 data.
- In 2020, there were 50%* more methicillin-resistant *Staphylococcus aureus* (MRSA) bloodstream infections in Tennessee LTAC facilities than predicted as modeled on national 2015 data.
- 2019 and 2020 both saw fewer *Clostridioides difficile* Infections (CDI) than predicted in Tennessee LTAC facilities with 71%* fewer and 69%* fewer CDI in 2019 and 2020 respectively as modeled on national 2015 data.

* indicates that the stated figure is statistically significantly lower than predicted based on the 95% Confidence Interval calculations.

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, 01/01/2019–12/31/2019

									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	82	213,031	159	222	0.72	0.61	0.84	38	4	11%	0	0%	0.00	0.09	0.70	0.96	1.45
	Adult/Pediatric Wards	98	240,971	110	210	0.52	0.43	0.63	35	6	17%	0	0%	0.00	0.17	0.51	0.80	1.06
	Long-term Acute Care	8	34,032	35	40	0.88	0.62	1.21	8	0	0%	0	0%	0.22	0.50	0.94	1.06	1.50
	Neonatal ICUs	24	39,098	24	55	0.44	0.29	0.64	11	4	36%	0	0%	0.00	0.00	0.30	0.65	1.06
CAUTI	Adult/Pediatric ICUs	82	257,201	262	356	0.74	0.65	0.83	43	6	14%	0	0%	0.00	0.00	0.48	0.83	1.10
	Adult/Pediatric Wards	98	227,071	163	209	0.78	0.67	0.91	43	3	7%	3	7%	0.00	0.41	0.78	1.08	1.77
	Long-term Acute Care	9	29,087	34	50	0.68	0.48	0.94	9	0	0%	0	0%	0.23	0.37	0.59	0.91	1.23
	Inpatient Rehabilitation	28	12,879	21	21	0.99	0.63	1.48	7	0	0%	1	14%	0.00	0.00	1.20	1.74	3.08
SSI	Coronary Artery Bypass Graft	26	6,473	45	51	0.88	0.65	1.17	17	1	6%	1	6%	0.00	0.00	0.54	1.22	2.01
	Colon Surgery	95	8,813	218	233	0.94	0.82	1.07	45	2	4%	1	2%	0.00	0.33	0.74	1.48	1.83
	Abdominal Hysterectomy	95	9,251	45	57	0.80	0.59	1.05	14	0	0%	0	0%	0.23	0.57	1.06	1.26	1.59
MRSA	Inpatient Rehabilitation	27	237,353	3	5	0.67	0.17	1.81	.	.	.	.	.	.	.	.	.	.
	Acute Care Hospitals	102	3,945,208	330	277	1.19	1.07	1.33	44	1	2%	7	16%	0.40	0.71	1.01	1.68	2.55
	Long-Term Acute Care	9	93,734	14	16	0.85	0.49	1.40	7	0	0%	0	0%	0.00	0.00	0.48	1.96	2.26
CDI	Inpatient Rehabilitation	27	237,353	44	100	0.44	0.32	0.58	23	6	26%	0	0%	0.00	0.00	0.41	0.73	0.87
	Acute Care Hospitals	102	3,609,751	975	2,078	0.47	0.44	0.50	82	50	61%	1	1%	0.00	0.15	0.36	0.62	0.77
	Long-Term Acute Care	9	93,734	29	99	0.29	0.20	0.42	9	5	56%	0	0%	0.10	0.21	0.28	0.52	0.55

Data reported as of June 3, 2021

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, 01/01/2020–12/31/2020

									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	81	213,074	199	219	0.91	0.79	1.04	42	1	2%	2	5%	0.00	0.46	0.83	1.29	1.80
	Adult/Pediatric Wards	96	200,541	113	175	0.65	0.54	0.77	35	4	11%	0	0%	0.00	0.24	0.51	0.88	1.56
	Long-term Acute Care	9	29,706	19	36	0.52	0.33	0.80	9	2	22%	0	0%	0.00	0.00	0.59	0.96	1.26
	Neonatal ICUs	21	25,852	23	37	0.62	0.40	0.92	9	2	22%	1	11%	0.00	0.00	0.59	0.90	3.63
CAUTI	Adult/Pediatric ICUs	81	267,480	257	371	0.69	0.61	0.78	48	11	23%	1	2%	0.00	0.07	0.41	0.84	1.31
	Adult/Pediatric Wards	96	209,605	132	194	0.68	0.57	0.80	41	3	7%	1	2%	0.00	0.00	0.54	0.86	1.36
	Long-term Acute Care	9	28,221	35	50	0.70	0.50	0.97	9	1	11%	1	11%	0.00	0.00	0.47	0.96	2.07
	Inpatient Rehabilitation	28	15,786	23	24	0.94	0.61	1.39	10	0	0%	0	0%	0.00	0.00	0.00	1.37	1.50
SSI	Coronary Artery Bypass Graft	24	5,486	26	46	0.56	0.38	0.81	14	4	29%	0	0%	0.00	0.00	0.45	1.44	2.14
	Colon Surgery	89	7,491	128	201	0.64	0.53	0.75	37	4	11%	0	0%	0.00	0.00	0.48	0.96	1.43
	Abdominal Hysterectomy	89	6,665	43	43	1.01	0.74	1.34	14	0	0%	0	0%	0.00	0.54	0.89	1.55	1.91
MRSA	Inpatient Rehabilitation	27	229,182	4	4	0.92	0.29	2.21	.	.	.	.	.	.	.	.	.	.
	Acute Care Hospitals	100	3,679,574	333	271	1.23	1.10	1.37	46	2	4%	6	13%	0.00	0.77	1.01	1.48	2.77
	Long-Term Acute Care	9	94,989	29	19	1.50	1.02	2.12	7	0	0%	1	14%	0.49	0.94	1.15	1.80	4.27
CDI	Inpatient Rehabilitation	27	229,182	45	97	0.47	0.34	0.62	24	4	17%	0	0%	0.00	0.00	0.31	0.59	0.99
	Acute Care Hospitals	100	3,368,843	637	1,792	0.36	0.33	0.38	80	55	69%	1	1%	0.00	0.05	0.29	0.47	0.85
	Long-Term Acute Care	9	94,989	31	102	0.31	0.21	0.43	8	5	63%	0	0%	0.09	0.14	0.21	0.54	0.66

Data reported as of June 3, 2021

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. The Centers for Disease Control and Prevention (CDC) have estimated there were over 600,000 HAIs in 2015 in the United States with an estimated 10% of these resulting in death.² A 2009 CDC report estimated that the annual medical costs of HAIs to U.S. hospitals to be between \$35.7 billion and \$45 billion³, though the emotional, physical, and personal costs associated with HAIs are beyond quantification. Positive improvement has been seen in many HAI-related outcomes in Tennessee, yet some HAI burden measures have proven remarkably stubborn to improve. A continued focus on reducing the patient burden of HAIs will significantly improve the health of Tennesseans and positively impact the wider Tennessee community.

In 2015, there were over 600,000 estimated HAI events in the United States

The following report summarizes the TDH's Healthcare-Associated Infection reporting activities from January 2019 through December 2020.

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

² Magill SS, et al. 2014. Op Cit.

³ Scott, RD. The direct medical costs of healthcare-associated infections in US hospitals and the benefits of prevention. 2009; 1-16.

those following abdominal hysterectomy (HYST) procedures have been reportable by Tennessee hospitals since January 2012.

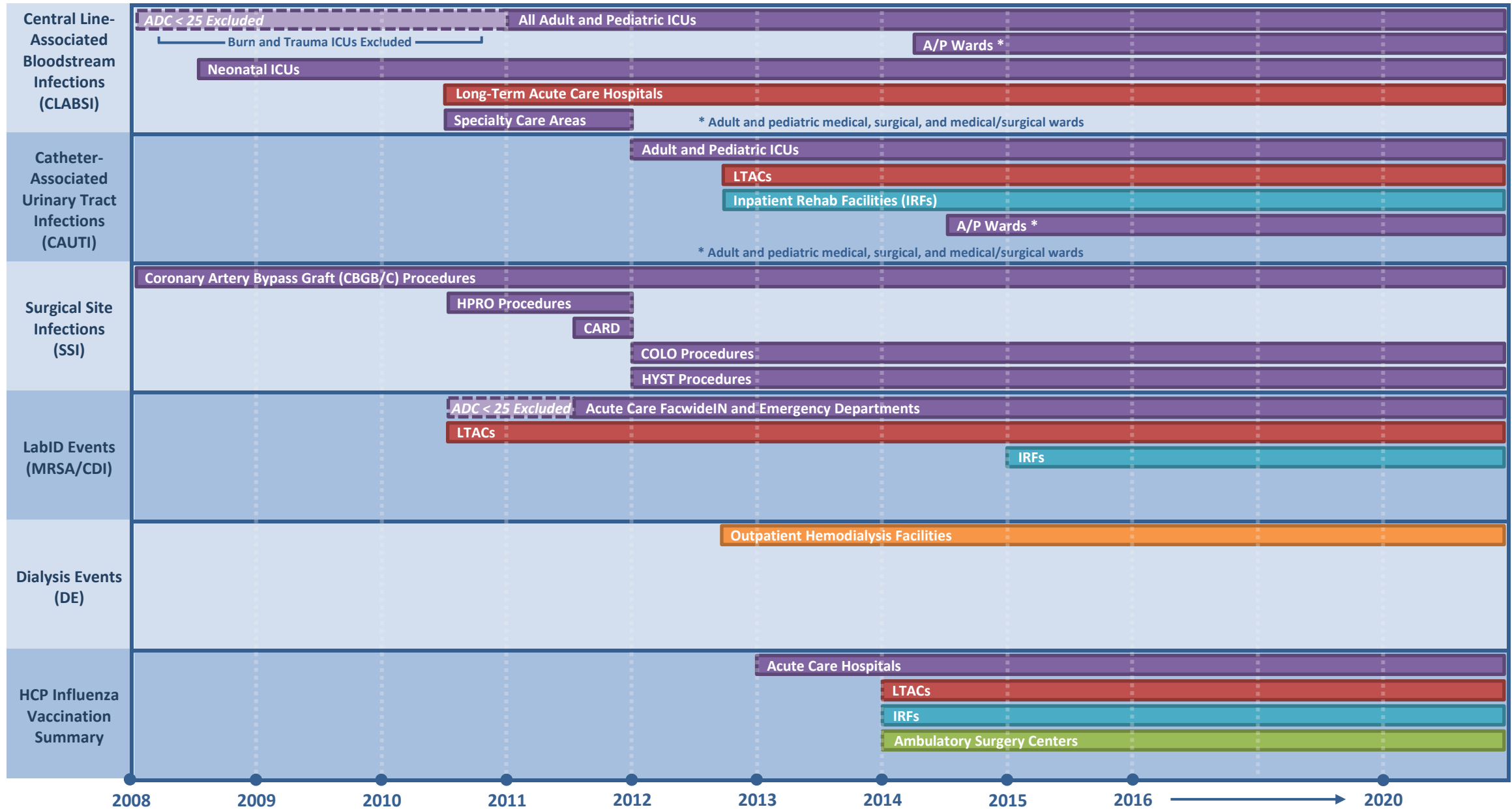
Methicillin-Resistant *Staphylococcus aureus* (MRSA) Laboratory-Identified (LabID) Events and *Clostridium difficile* Infection (CDI) LabID Events have been reportable to TDH since July 2010 from acute care hospitals (facility-wide inpatient locations, 24-hour Observations and emergency departments), inpatient rehabilitation facilities (IRFs), 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 report 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. Outpatient hemodialysis facilities and inpatient psychiatric facilities are required to report healthcare worker influenza vaccination data beginning with the 2015/2016 influenza season.

Note: Dialysis events from outpatient hemodialysis facilities have been reportable in Tennessee since July 2012 and are not included in this report due to the intended scope of the report.

Figure 1: Tennessee Healthcare-Associated Infections Reporting Requirements, 2008-2020



Tennessee Reporting Facilities

Characteristics of acute care hospitals reporting HAI data to TDH from January 2019-December 2020 are displayed below. Facilities are stratified by medical school affiliation (as defined by NHSN) and bed size, with data being gathered from the 2019 and 2020 NHSN Annual Facility Survey.

Table 3. Characteristics of Tennessee Acute Care Hospitals, January-December 2019

	Number of facilities	Percent
Medical School Affiliation		
Major teaching	24	21.4%
Graduate teaching	12	10.7%
Undergraduate teaching	23	20.5%
None	53	47.3%
Number of Beds		
<50 beds	29	25.9%
50-99 beds	30	26.8%
100-399 beds	41	36.6%
≥400 beds	12	10.7%

Table 4. Characteristics of Tennessee Acute Care Hospitals, January-December 2020

	Number of facilities	Percent
Medical School Affiliation		
Major teaching	26	22.6%
Graduate teaching	11	9.6%
Undergraduate teaching	32	27.8%
None	46	40.0%
Number of Beds		
<50 beds	33	28.7%
50-99 beds	27	23.5%
100-399 beds	41	35.6%
≥400 beds	14	12.2%

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](#). The Centers for Medicare & Medicaid Services (CMS) announced in March 2020 that due to the COVID-19 pandemic, it was granting blanket exceptions from quality reporting programs for the period Q4 2019 – Q2 2020 inclusive. The exception has the potential to impact the fidelity of the data in this report with 6 Acute Care Hospitals electing not to report in Q2 2020. Given the intention of the CMS exception, the facilities electing not to report are not highlighted specifically in this report. Outside of the CMS exception, no facilities were missing data through the reporting period.

Table 5: Facilities Noncompliant with Central Line-Associated Bloodstream Infection (CLABSI), Catheter-Associated Urinary Tract Infection (CAUTI), Surgical Site Infection (SSI), Laboratory-Identified (LabID) Events, or Healthcare Personnel Influenza Vaccination Data Requirements for the Reporting Period January 2019-December 2020

Facility	Missing Data		Reason for Missing Data
	From	To	
None	N/A	N/A	N/A

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: On-site audits were planned for 2020 but were not conducted due to the COVID-19 pandemic. On-site data audits are scheduled to resume in late 2022.

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 many 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 Re-baseline

The 2015 re-baseline 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 before 2015. 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:

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

- An SIR of 1.0 means the observed number of infections is equal to the number of predicted infections
- An 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.

- An 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 SIR⁴:

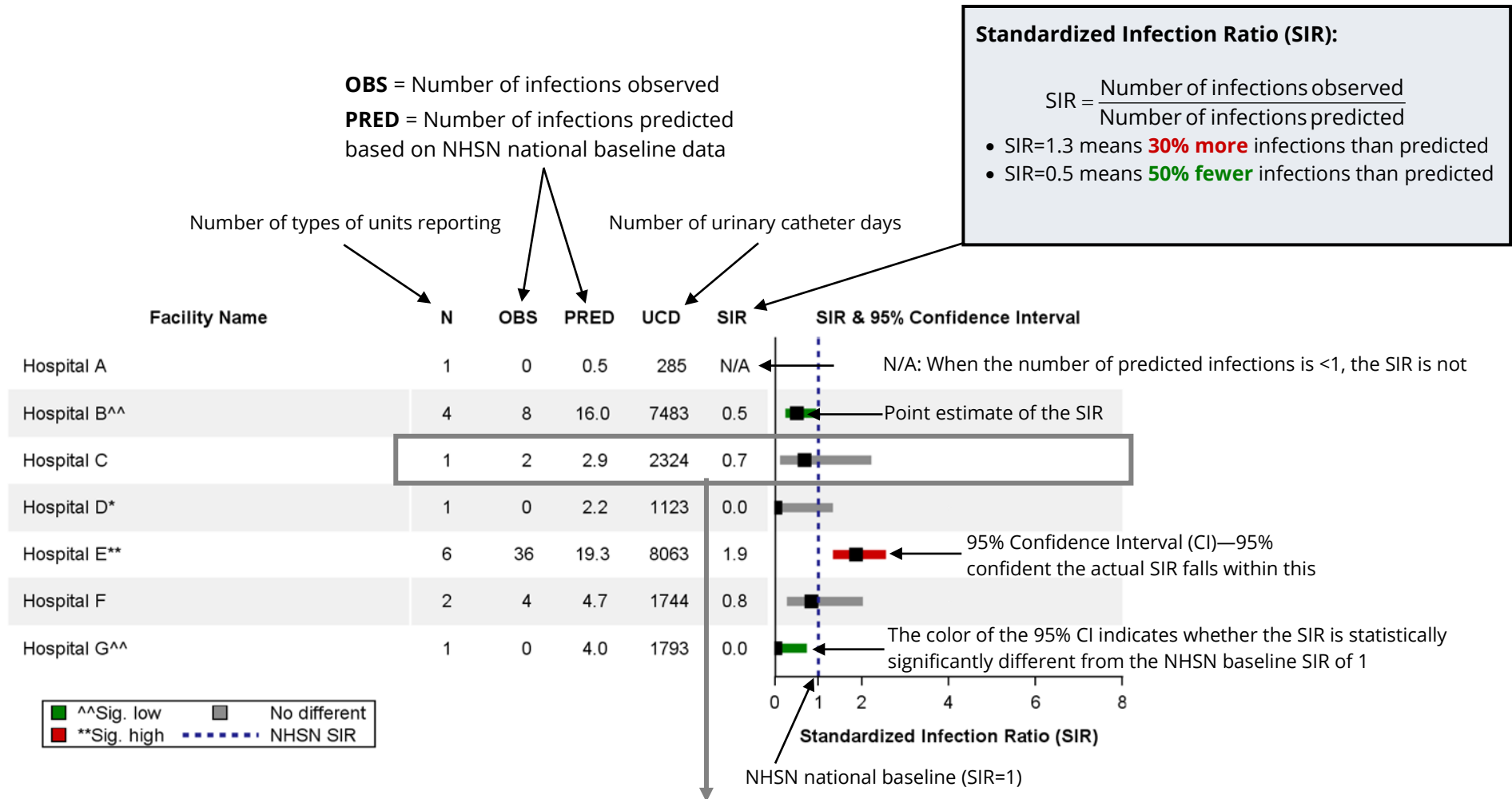
This report uses the 95% confidence interval to describe statistical significance when reporting the SIR. Consistent with CDC/NHSN methodology, exact mid-p confidence intervals are used when observed and expected numbers of events are less than or equal to 100; otherwise, the Byar approximation method is used.⁵

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

⁴ 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.

⁵ <http://www.cdc.gov/nhsn/sas/SIRcomp.sas>

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



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**)

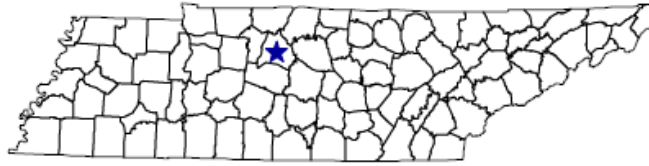
Hospital C's Standardized Infection Ratio (SIR)

- 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 2020 Annual Survey

Healthcare-Associated Infections (HAI) Summary

HAI Reporting Requirements for TDH Central:

- Central line-associated bloodstream infections (CLABSI): Adult and pediatric intensive care units (ICUs) and neonatal intensive care units (NICUs)
- Catheter-associated urinary tract infections (CAUTI): Adult and pediatric ICUs
- Surgical site infections (SSI): Colon surgeries (COLO) and abdominal hysterectomies (HYST)
- Methicillin-resistant *S. aureus* (MRSA) bacteremia and *C. difficile* infection (CDI): All inpatients

Standardized Infection Ratio (SIR) by Infection Type, 01/01/2019–12/31/2019

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	7.0	5007	0.85	(0.34, 1.76)	0.46
	Neonatal ICU	1	10.3	4471	0.10	(0.01, 0.48)	0.34
CAUTI	Adult/Pediatric ICU	10	4.8	2139	2.05	(1.04, 3.66)	1.22
SSI	Colon surgery	3	9.5	272	0.31	(0.08, 0.86)	0.91
	Abdominal hysterectomy	5	2.5	404	1.93	(0.71, 4.28)	0.80
LabID	MRSA bacteremia	11	18.6	191987	0.59	(0.31, 1.03)	1.02
	C. difficile infection	113	154.1	165536	0.73	(0.61, 0.88)	0.78

Green highlighting indicates an SIR significantly LOWER than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009; LabID - 2010-2011)
 Red highlighting indicates an SIR significantly HIGHER than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009; LabID - 2010-2011)
 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)

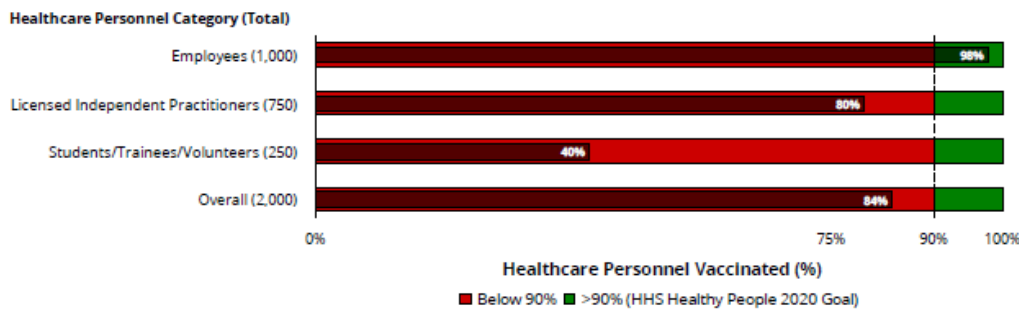
See page 2 for more detailed information about HAIs at TDH Central

Section 2:

HAI reporting requirements for the facility in 2020

Facility-Specific Standardized Infection Ratios (SIRs) by HAI from January – December 2020

Healthcare Personnel Influenza Vaccination - 2019/2020 Influenza Season

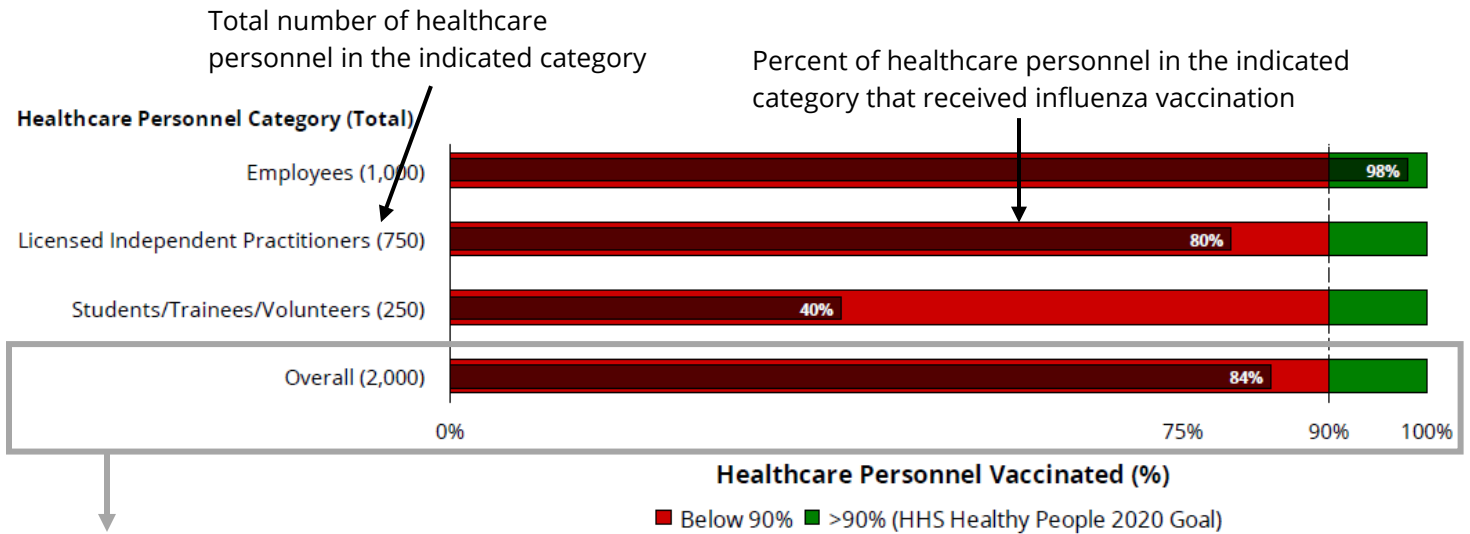


Section 3:

Healthcare personnel influenza vaccination rates for the 2019/2020 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

Number of procedures performed

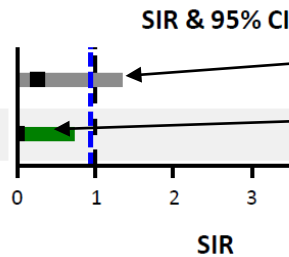
Reporting year

YR	OBS	PRED	PROC	SIR
2019	1	3.6	110	0.3
2020	0	4.0	120	0.0

Standardized Infection Ratio (SIR)

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

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



Point estimate of the

The color of the 95% confidence interval indicates whether the SIR is statistically significantly different from the NHSN

Example:

In 2019, this facility:

- Performed 110 procedures (**PROC**)
- Observed 1 infections (**OBS**)
- Based on NHSN national baseline data, 3.6 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/3.6 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](#)⁶).

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](#)⁷, 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.

⁶ http://www.cdc.gov/hai/pdfs/bsi/BSI_tagged.pdf

⁷ 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 period. CDC uses 2015 HAI data to create the 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 period used to establish the baseline, or reference points, varied among the different HAI measures. Thus, in TN HAI reports before 2015, the number of predicted infections was estimated based on pre-2015 baselines. Therefore, the data in this report are not comparable with pre-2015 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](#).⁸

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

⁸ <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 2019: 82

Total number of hospitals reporting from January-December 2020: 81

SIRs by Quarter (Figure 6)

- The overall CLABSI ICU SIR in Tennessee increased from 0.61 in Q1-2019 to 0.87 in Q3-2019. Q4-2019 through Q2-2020 saw a period of statistically lower than expected ICU SIRs ranging from 0.53 – 0.63. From Q2-2020 through Q4-2020 there was a sustained increase in ICU SIR to 1.12 in Q4-2020. The CLABSI SIR for the entire period January 2019-December 2020 failed to achieve the 2020 U.S. Department of Health and Human Services' [National Action Plan to Prevent Healthcare-Associated Infections](#) prevention target of SIR=0.50.

SIRs by Unit Type (Figure 7)

- In 2019 and 2020, no unit type had a statistically higher yearly CLABSI SIR indicating that no unit type had more CLABSIs than expected on a unit type level. Reporting from Tennessee's 54 Medical-Surgical Critical Care units demonstrated significantly lower CLABSI SIR results in both 2019 and 2020 with SIRs of 0.63 (95% CI: 0.47, 0.82) and 0.72 (95% CI: 0.55, 0.93) respectively.
- In 2020, CLABSI SIRs were significantly lower than the 2015 baseline SIR in the burn critical care, surgical critical care, and trauma critical care locations. In 2019, the CLABSI SIR was also significantly lower in the surgical cardiothoracic critical care unit.

Key Percentiles for Tennessee SIRs (Table 6, Table 7, Table 8)

- Including burn and trauma ICUs, the overall SIR across all reporting adult and pediatric ICUs in Tennessee from January-December 2019 was statistically significantly lower than the national SIR of 1 (SIR=0.70; 95% CI: 0.61, 0.81). Including burn and trauma ICUs, the overall SIR across all reporting adult and pediatric ICUs in Tennessee from January-December 2020 was statistically significantly lower than the national SIR of 1 (SIR=0.84; 95% CI: 0.73, 0.96).
- Excluding burn and trauma ICUs, the overall SIR across all reporting adult and pediatric ICUs in Tennessee from January-December 2019 was statistically significantly lower than the national SIR of 1 (SIR=0.72; 95% CI: 0.61, 0.84). The SIR from January-December 2020 was statistically within the predicted range (SIR=0.91; 95% CI: 0.79, 1.04).

- In 2019, the median (50th percentile) facility-specific SIR including burn and trauma units was 0.69, indicating that half of all reporting Tennessee hospitals with at least 1 predicted infection had an SIR at or below 0.69. In 2020, the median facility-specific SIR was 0.79.

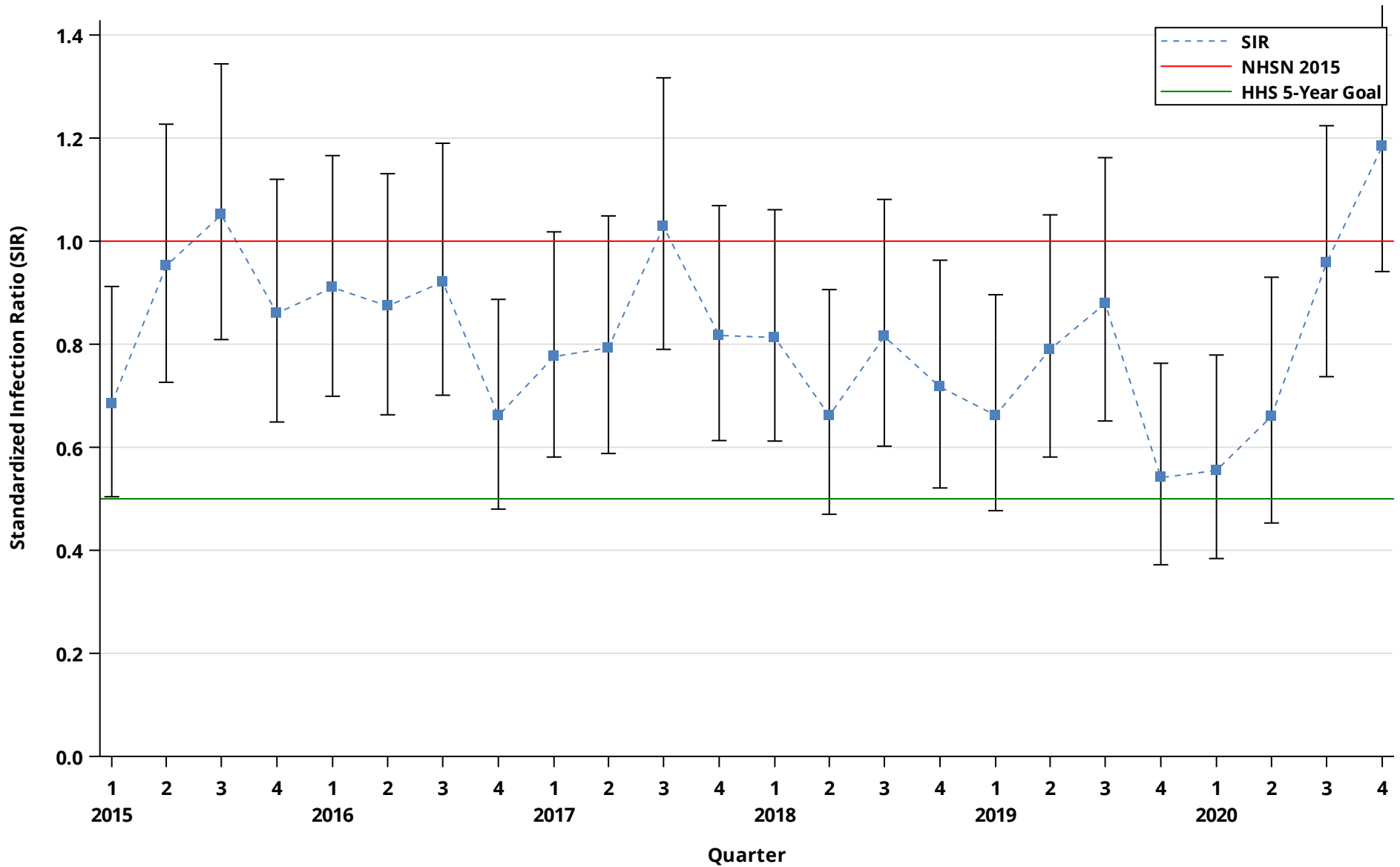
Microorganisms Associated with CLABSIs in Adult and Pediatric ICUs (Figure 8, Figure 9)

- Among the 237 pathogens isolated from 207 CLABSIs in 2019, the most common pathogens were *Candida* species and other yeasts (24%), coagulase-negative *Staphylococcus* species (14%), and *Enterococcus* species (12%). These three organisms were also the most common pathogens in 2017-2020. Methicillin-Resistant *S. aureus* (MRSA) accounted for 7% and vancomycin-resistant *Enterococcus* (VRE) for 3% of total positive isolates in 2019.
- Among the 271 pathogens isolated from 240 CLABSIs in 2020, the most common pathogens were coagulase-negative *Staphylococcus* species (24%) *Candida* species and other yeasts (21%), and *Enterococcus* species (17%). Both Methicillin-Resistant *S. aureus* (MRSA) and vancomycin-resistant *Enterococcus* (VRE) accounted for 4% of total positive isolates in 2020.

Facility-Specific CLABSI SIRs (Figure 10, Figure 11)

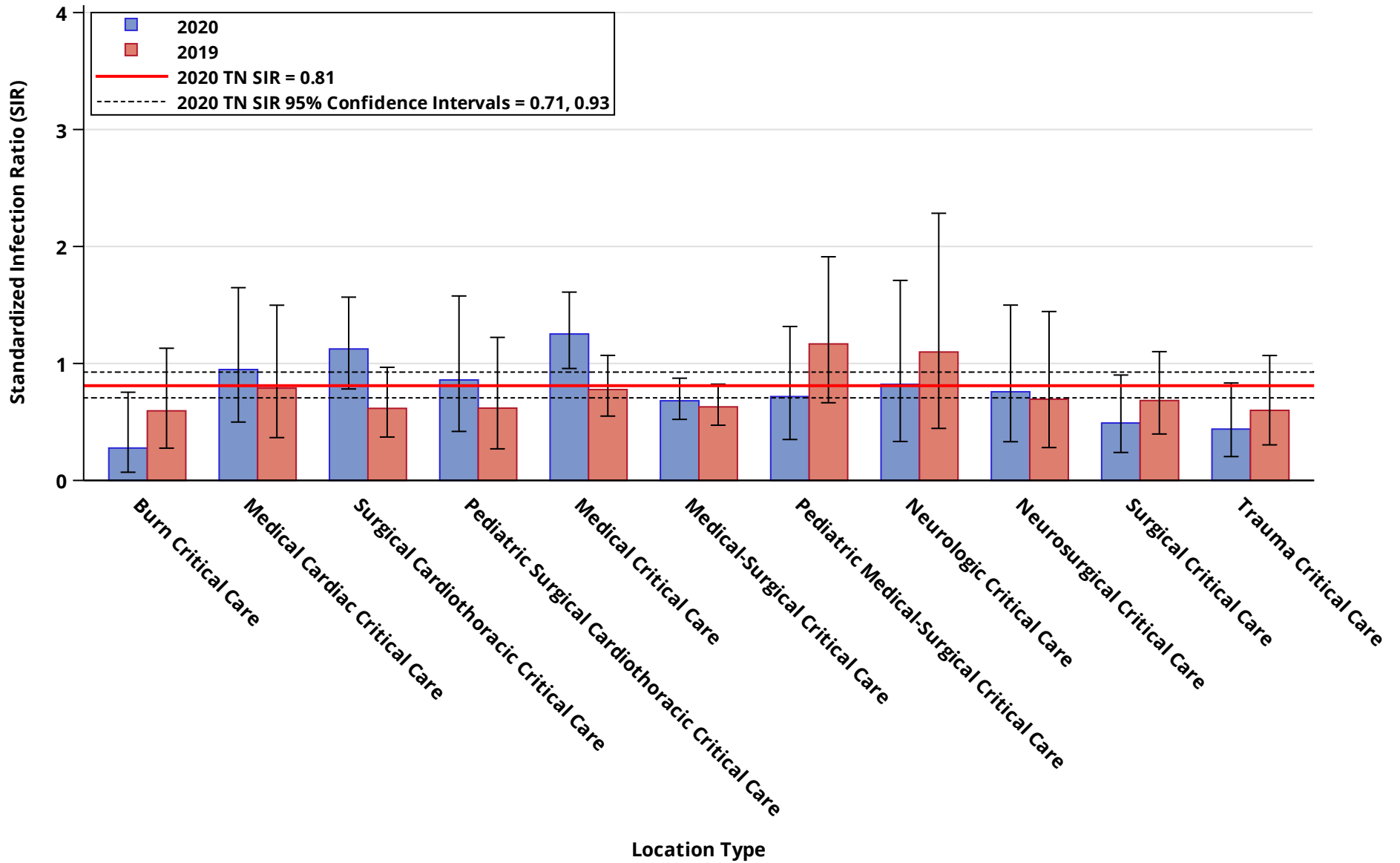
- A single CLABSI SIR that accounts for all reporting adult/pediatric ICUs in each facility is displayed in [Figure 10](#) and [Figure 11](#). The bar representing the confidence interval is green if the CLABSI SIR was significantly lower than the national SIR of 1, and red if the CLABSI SIR was significantly 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 2019, excluding burns and trauma units, four facilities had a CLABSI SIR that was significantly lower than the 2015 national baseline SIR of 1 with none being significantly higher. In 2020, three facilities had a CLABSI SIR that was significantly lower than the 2015 national baseline SIR of 1 while two facilities 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, 01/01/2015–12/31/2020 [Reference standard: National Healthcare Safety Network (NHSN), 2015]



Data Reported as of June 01, 2021

Figure 7: Standardized Infection Ratios (SIRs) for Central Line-Associated Bloodstream Infections (CLABSI) by Intensive Care Unit (ICU) Type, Tennessee, 2020 [Reference standard: National Healthcare Safety Network (NHSN), 2015]



Data Reported as of June 01, 2021

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, 01/01/2019–12/31/2020

									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	YEA R	No .	CL DAYS	OBS	PRED	SIR	LOWE R LIMIT	UPPE R LIMIT	No. of FACS WITH ≥1 PRED INFECTION	N	%	N	%	10 %	25 %	50 %	75 %	90 %
Tennessee	2020	81	228,670	209	247.92	0.84	0.73	0.96	42	2	5%	2	5%	0.00	0.46	0.79	1.04	1.80
	2019	82	228,432	177	251.99	0.70	0.61	0.81	38	5	13%	0	0%	0.00	0.17	0.69	0.96	1.45

Data reported as of June 01, 2021

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, 01/01/2019–12/31/2020

									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	YEA R	No .	CL DAYS	OBS	PRED	SIR	LOWE R LIMIT	UPPE R LIMIT	No. of FACS WITH ≥1 PRED INFECTION	N	%	N	%	10 %	25 %	50 %	75 %	90 %
Tennessee	2020	81	213,074	199	218.87	0.91	0.79	1.04	42	1	2%	2	5%	0.00	0.46	0.83	1.29	1.80
	2019	82	213,031	159	221.85	0.72	0.61	0.84	38	4	11%	0	0%	0.00	0.09	0.70	0.96	1.45

Data reported as of June 01, 2021

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, 01/01/2019–12/31/2020

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	2020	2	3,190	2	10.83	0.19	0.03	0.61	2	N/A	N/A	N/A	N/A	N/A
	2019	2	3,960	8	13.44	0.60	0.28	1.13	2	N/A	N/A	N/A	N/A	N/A
Medical Cardiac Critical Care	2020	6	10,555	11	11.12	0.99	0.52	1.72	3	N/A	N/A	N/A	N/A	N/A
	2019	6	9,580	8	9.68	0.83	0.38	1.57	4	N/A	N/A	N/A	N/A	N/A
Medical Critical Care	2020	28	45,682	58	44.83	1.29	0.99	1.66	14	0.34	0.95	1.09	1.42	2.10
	2019	30	44,602	35	45.03	0.78	0.55	1.07	13	0.00	0.38	0.83	1.38	1.60
Medical-Surgical Critical Care	2020	54	84,646	58	80.19	0.72	0.55	0.93	27	0.00	0.00	0.68	1.18	1.80
	2019	54	82,453	50	79.49	0.63	0.47	0.82	23	0.00	0.00	0.64	1.03	1.68
Neurologic Critical Care	2020	4	6,055	6	6.47	0.93	0.38	1.93	4	N/A	N/A	N/A	N/A	N/A
	2019	4	4,929	6	5.46	1.10	0.45	2.28	3	N/A	N/A	N/A	N/A	N/A
Neurosurgical Critical Care	2020	7	8,460	7	9.24	0.76	0.33	1.50	4	N/A	N/A	N/A	N/A	N/A
	2019	8	8,264	6	8.64	0.69	0.28	1.44	3	N/A	N/A	N/A	N/A	N/A
Pediatric Medical-Surgical Critical Care	2020	6	8,014	9	11.38	0.79	0.39	1.45	4	N/A	N/A	N/A	N/A	N/A
	2019	6	8,486	14	12.00	1.17	0.66	1.91	4	N/A	N/A	N/A	N/A	N/A
Pediatric Neurosurgical Critical Care	2020	1	84	0	0.14	.	.	.	.	N/A	N/A	N/A	N/A	N/A
	2019	1	421	1	0.70	.	.	.	.	N/A	N/A	N/A	N/A	N/A
Pediatric Surgical Cardiothoracic Critical Care	2020	2	6,226	9	9.22	0.98	0.48	1.79	2	N/A	N/A	N/A	N/A	N/A
	2019	2	7,484	7	11.32	0.62	0.27	1.22	2	N/A	N/A	N/A	N/A	N/A
Surgical Cardiothoracic Critical Care	2020	13	26,600	32	28.48	1.12	0.78	1.57	11	0.00	0.00	1.20	2.35	2.38
	2019	13	26,423	17	27.58	0.62	0.37	0.97	12	0.00	0.00	0.27	0.78	0.80
Surgical Critical Care	2020	8	16,752	9	17.80	0.51	0.25	0.93	5	0.00	0.54	0.64	0.69	1.18
	2019	10	20,389	15	21.96	0.68	0.40	1.10	9	0.00	0.00	0.48	0.60	1.70
Trauma Critical Care	2020	6	12,406	8	18.23	0.44	0.20	0.83	5	0.00	0.00	0.27	0.74	0.80
	2019	6	11,441	10	16.69	0.60	0.30	1.07	5	0.00	0.26	0.34	0.86	1.21

Data reported as of June 01, 2021

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

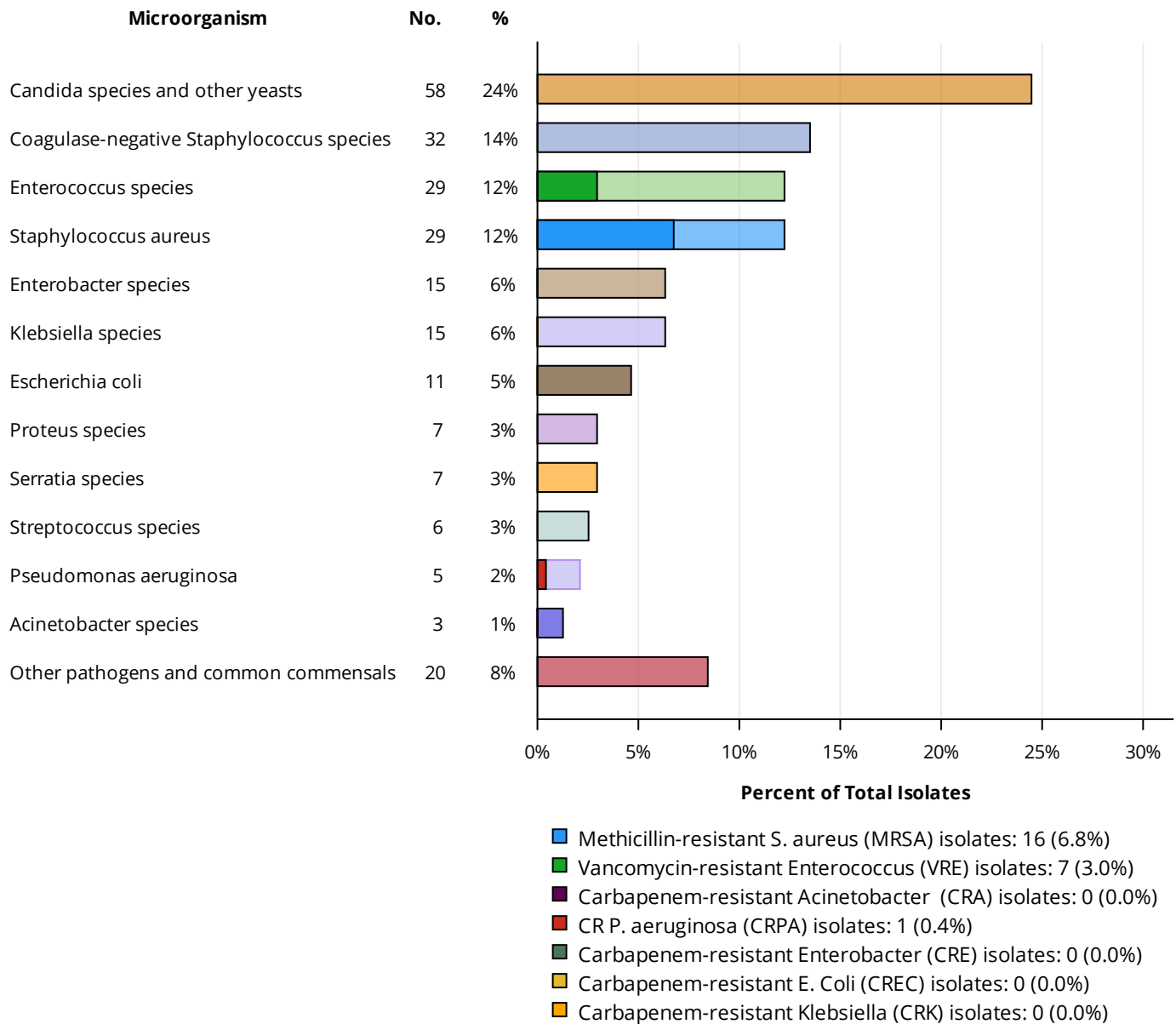
Key percentiles include units with at least one predicted infection

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

Figure 8: Microorganisms Identified in Central Line-Associated Bloodstream Infections (CLABSIs) in Adult and Pediatric Intensive Care Units, Tennessee, 01/01/2019–12/31/2019

Number of isolates=237; Number of events=207



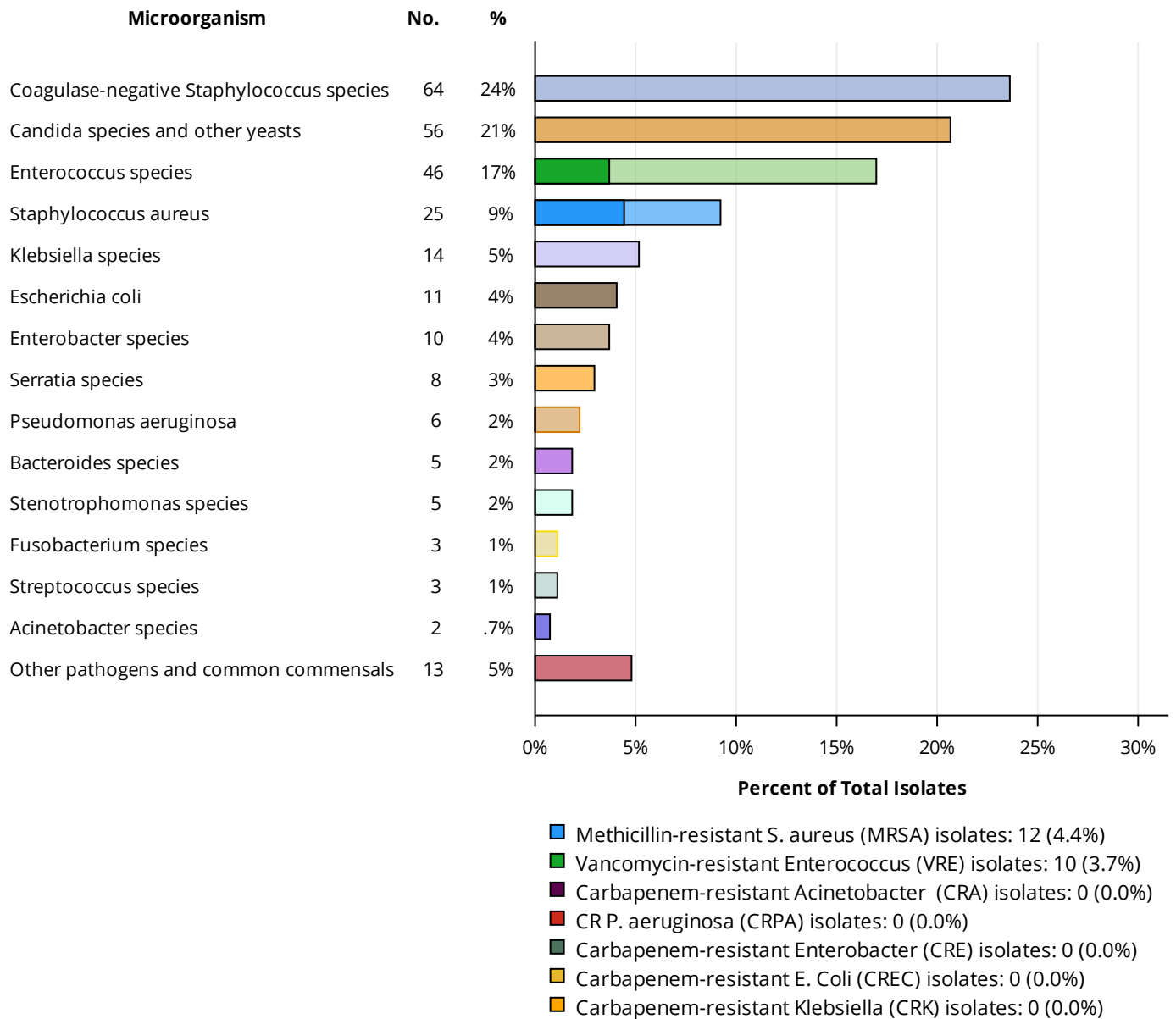
Data reported as of June 01, 2021

Other common commensals =

Other pathogens = *Aeromonas* spp., *Burkholderia* spp., *Citrobacter* spp., *Clostridium* spp., *Cronobacter* spp., Family spp., Fungus spp., Gram-negative spp., *Lactobacillus* spp., *Leclercia* spp., Other *Staphylococcus* spp., *Parvimonas* spp., *Prevotella* spp., *Pseudomonas* spp., *Stenotrophomonas* spp., *Veillonella* spp.,

Figure 9: Microorganisms Identified in Central Line-Associated Bloodstream Infections (CLABSIs) in Adult and Pediatric Intensive Care Units, Tennessee, 01/01/2020–12/31/2020

Number of isolates=271; Number of events=240



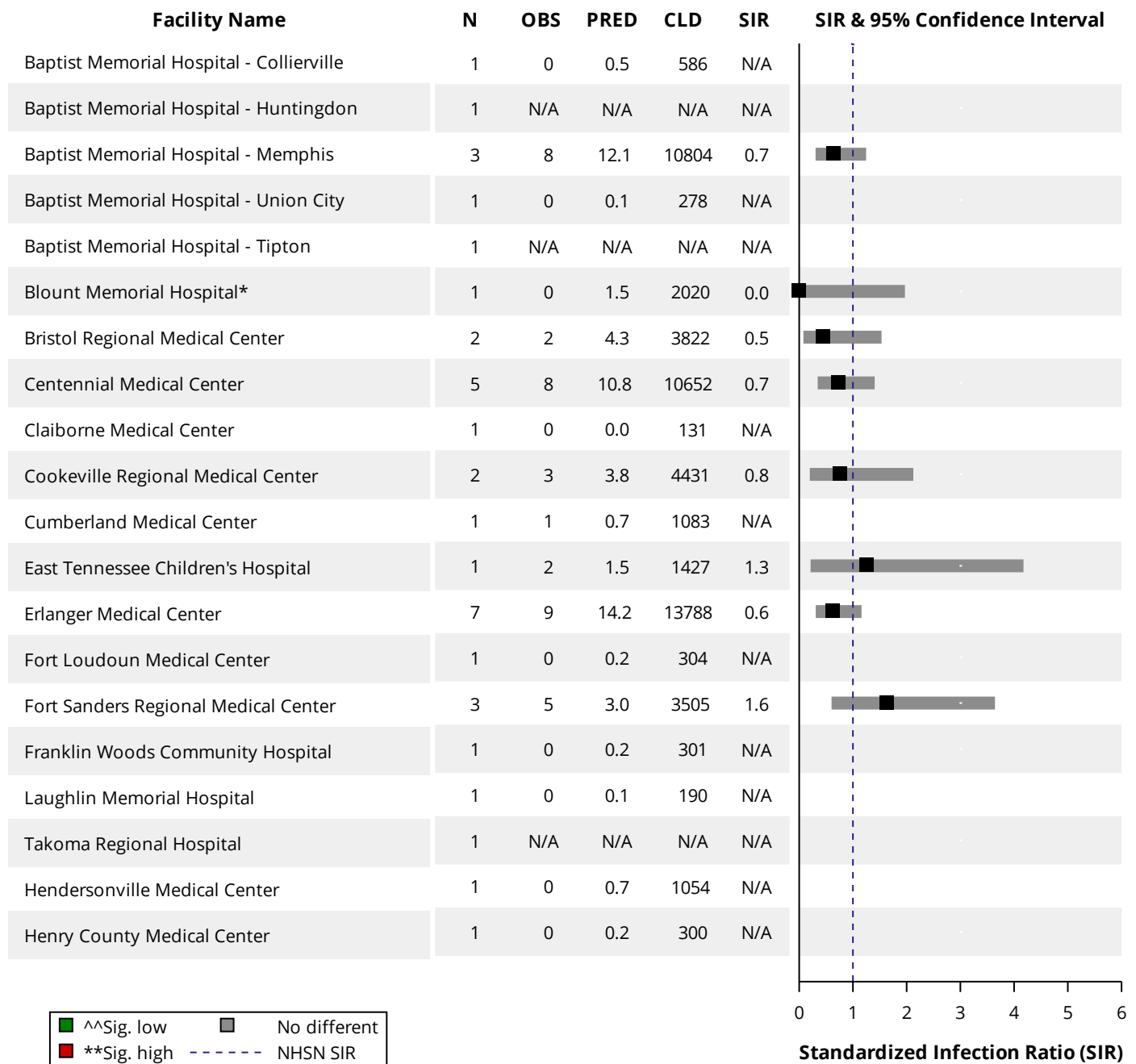
Data reported as of June 01, 2020

Other common commensals = *Corynebacterium* spp.,

Other pathogens = *Achromobacter* spp., *Burkholderia* spp., *Clostridium* spp., *Mycobacterium* spp., Other *Staphylococcus* spp.,

Prevotella spp., *Proteus* spp., *Veillonella* spp., species spp.,

Figure 10: CLABSI Standardized Infection Ratio (SIR) for Adult and Pediatric Intensive Care Units in Acute Care Facilities, Tennessee, 01/01/2019 – 12/31/2019



Data Reported as of June 01, 2021

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

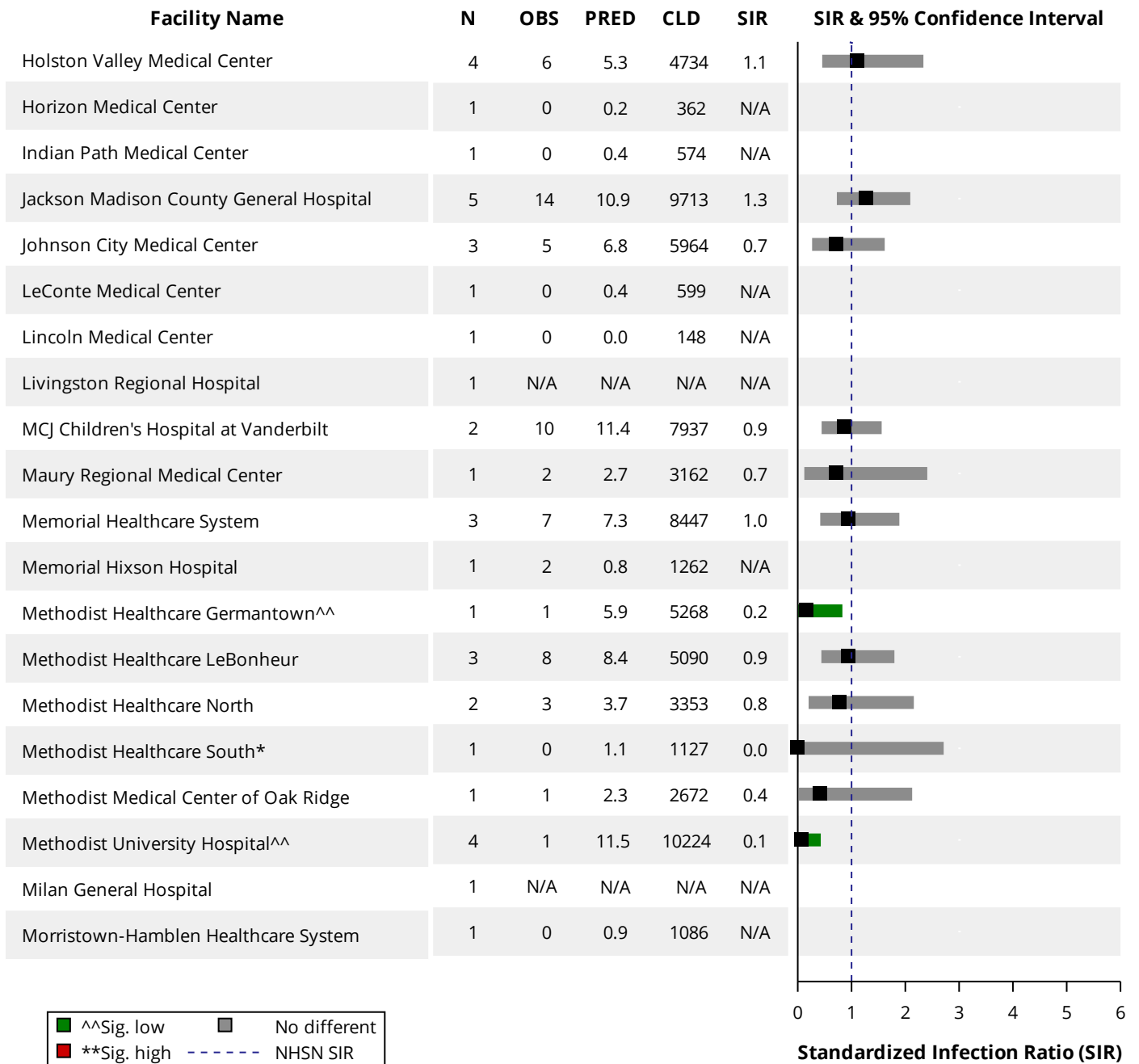
N/A = Data not shown for facilities with <50 central line days / SIR not calculated for facilities with <1 predicted infection

** 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 June 01, 2021

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

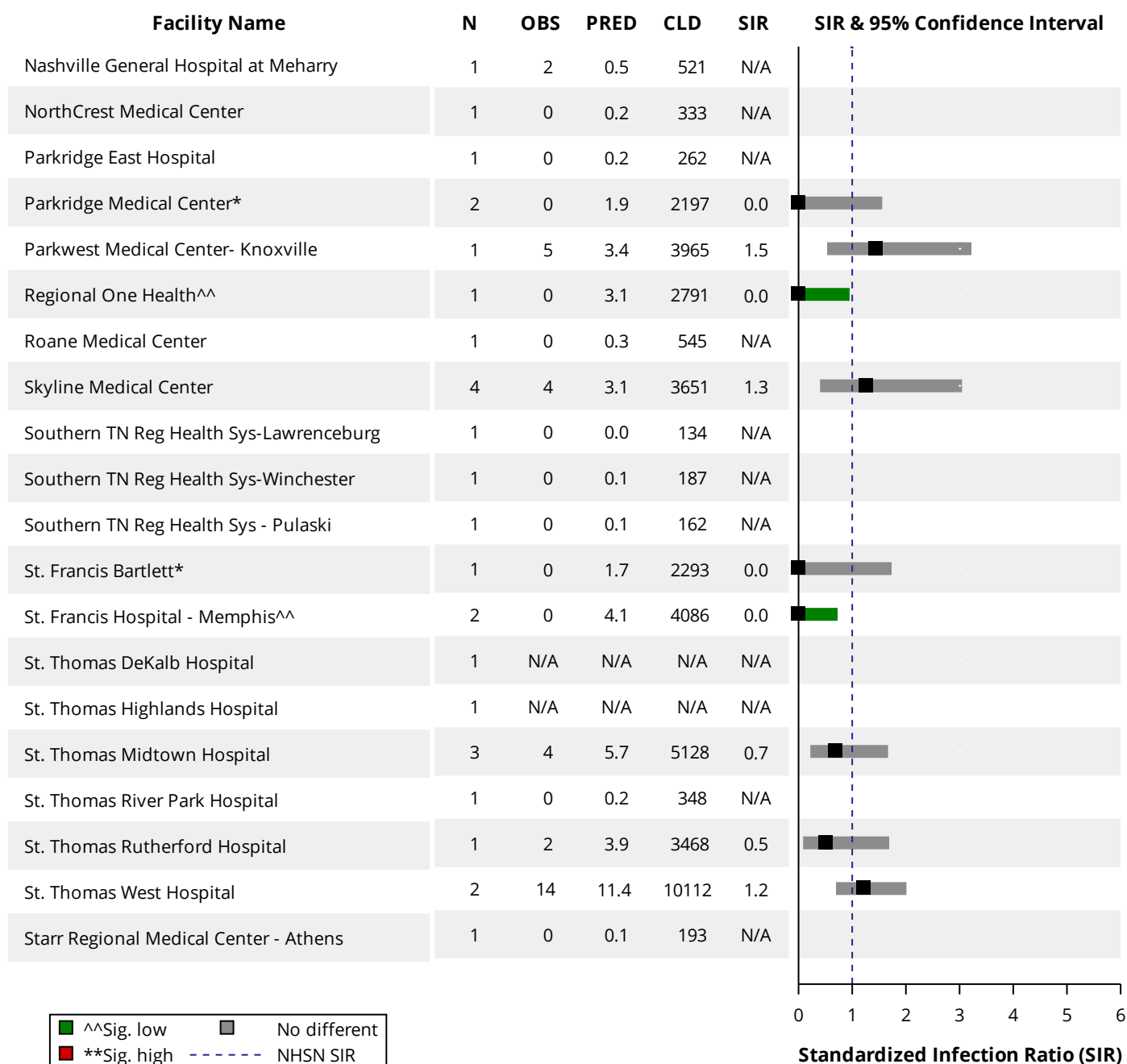
N/A = Data not shown for facilities with <50 central line days / SIR not calculated for facilities with <1 predicted infection

** 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 June 01, 2021

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

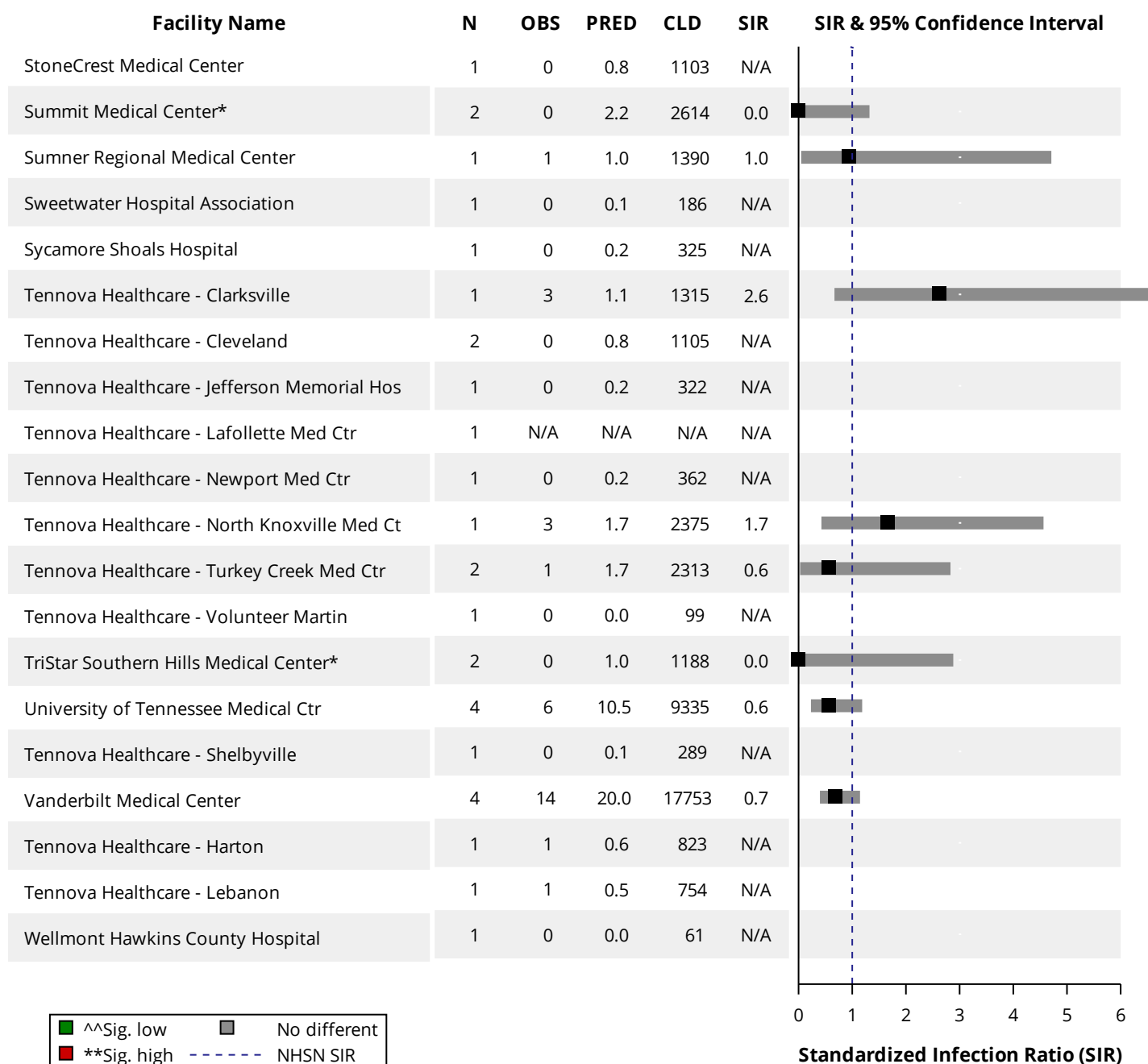
N/A = Data not shown for facilities with <50 central line days / SIR not calculated for facilities with <1 predicted infection

** 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 June 01, 2021

N = number of types of units reporting

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

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

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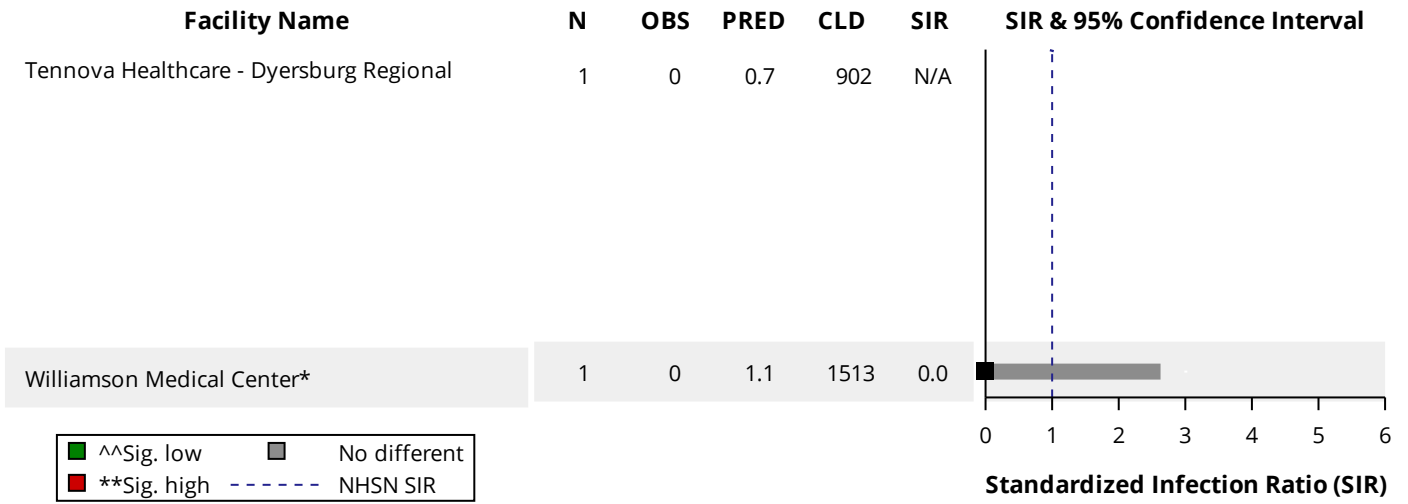
N/A = Data not shown for facilities with <50 central line days / SIR not calculated for facilities with <1 predicted infection

** 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 June 01, 2021

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

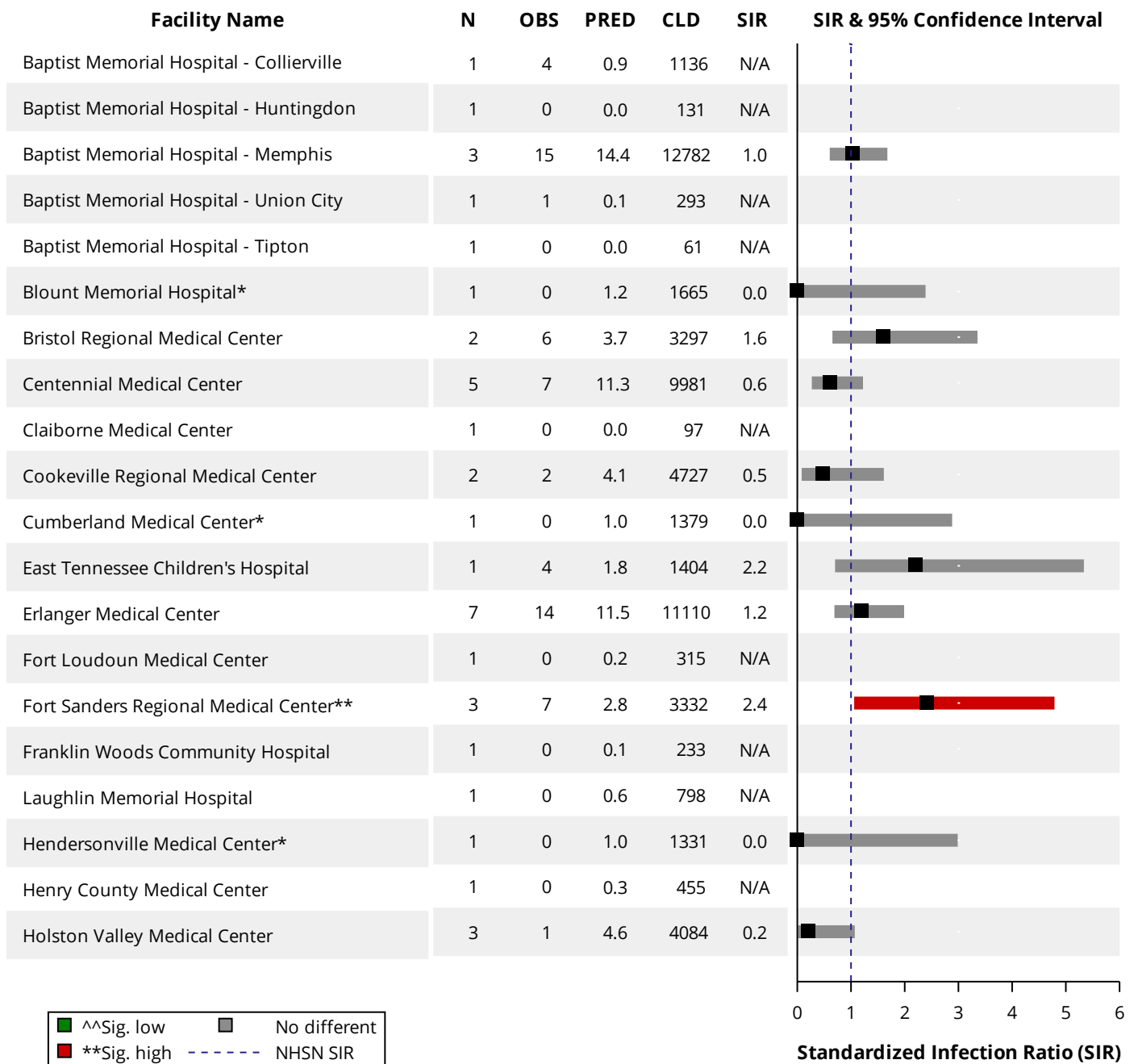
N/A = Data not shown for facilities with <50 central line days / SIR not calculated for facilities with <1 predicted infection

** Significantly higher than 2015 national baseline

^^ Significantly lower than 2015 national baseline

* Zero infections, but not statistically significant

Figure 11: CLABSI Standardized Infection Ratio (SIR) for Adult and Pediatric Intensive Care Units in Acute Care Facilities, Tennessee, 01/01/2020 – 12/31/2020



Data Reported as of June 01, 2020

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

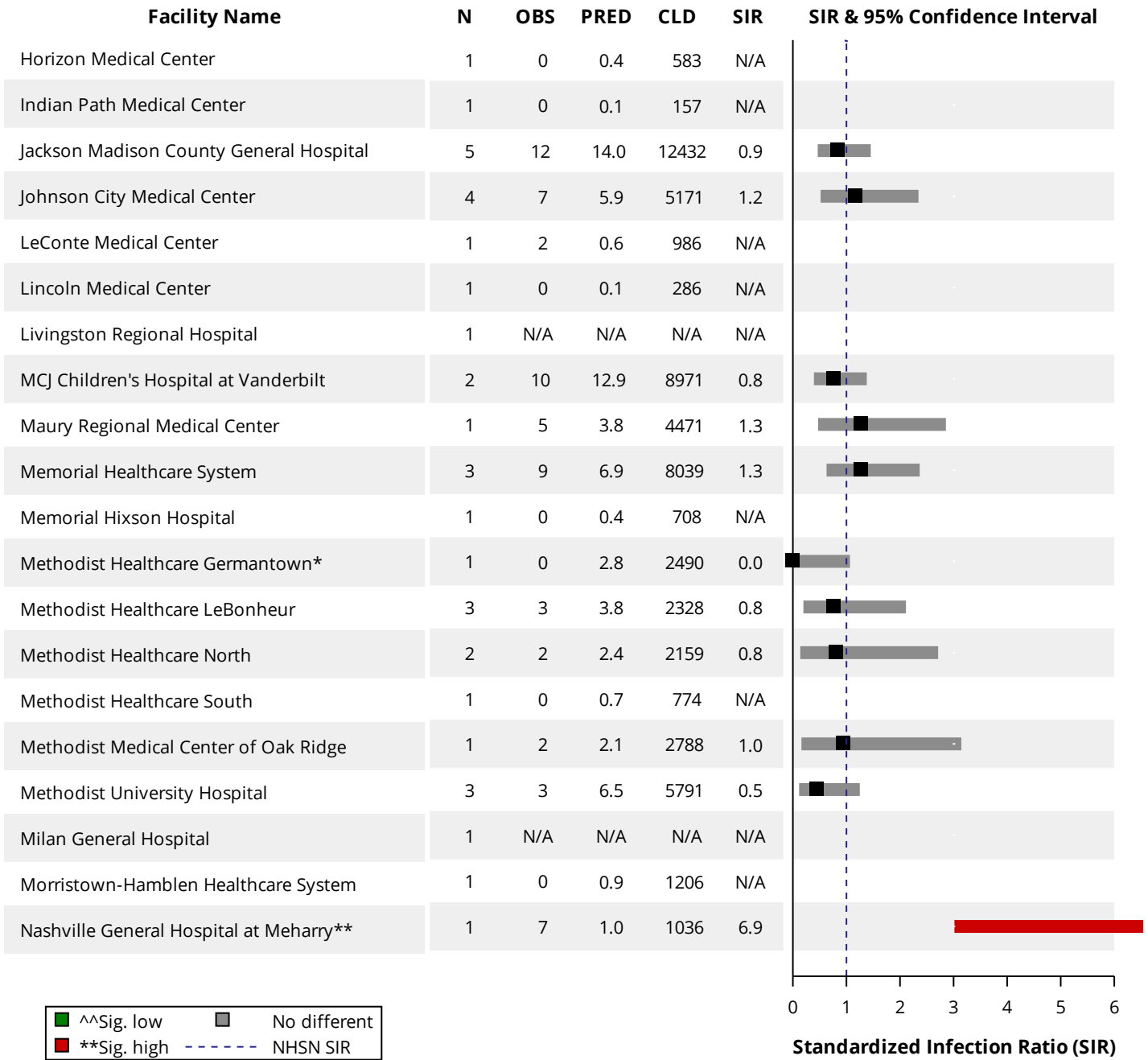
N/A = Data not shown for facilities with <50 central line days / SIR not calculated for facilities with <1 predicted infection

** Significantly higher than 2015 national baseline

^^ Significantly lower than 2015 national baseline

* Zero infections, but not statistically significant

Figure 11 (cont'd)



Data Reported as of June 01, 2020

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

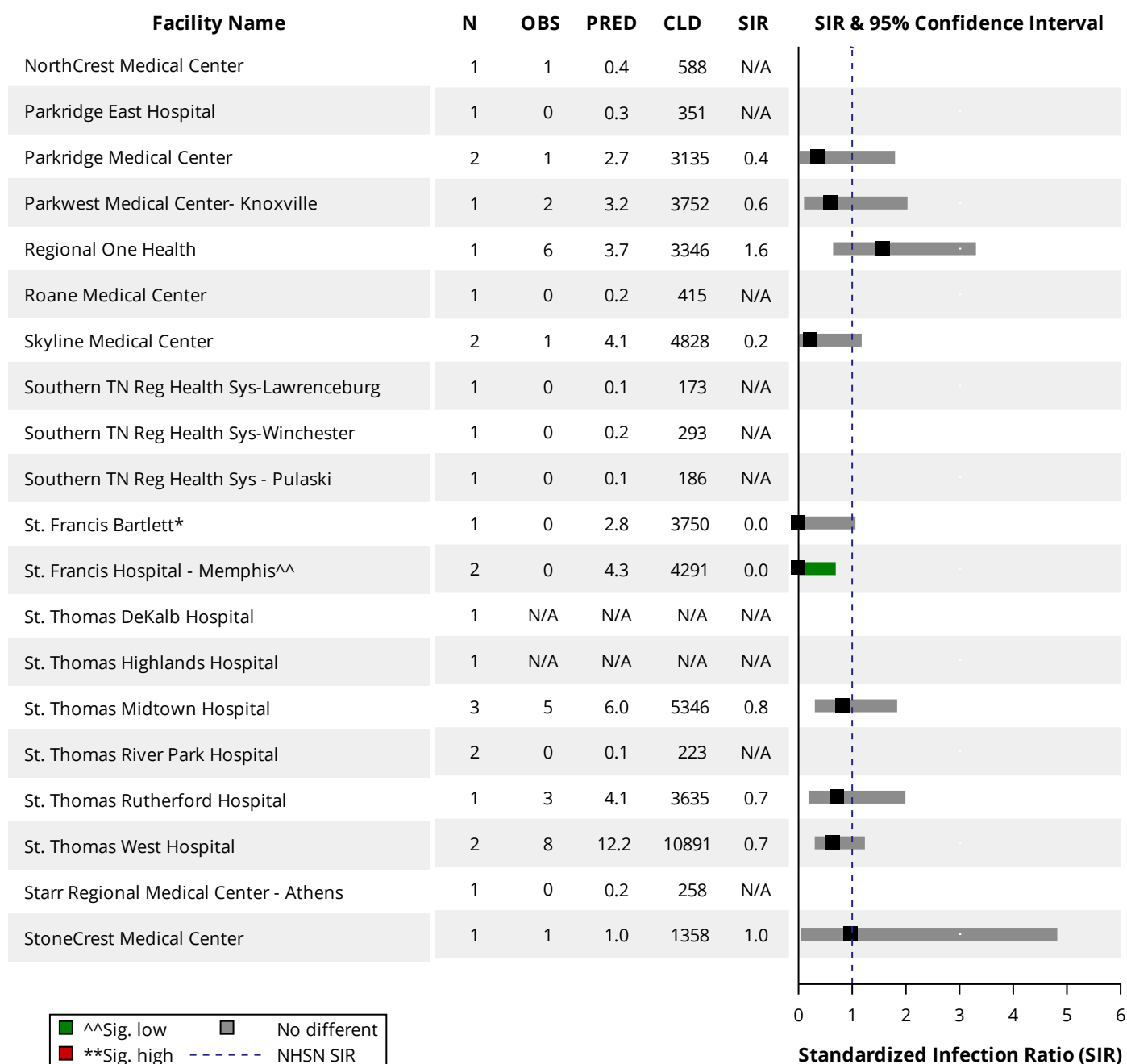
N/A = Data not shown for facilities with <50 central line days / SIR not calculated for facilities with <1 predicted infection

** Significantly higher than 2015 national baseline

^^ Significantly lower than 2015 national baseline

* Zero infections, but not statistically significant

Figure 11 (cont'd)



Data Reported as of June 01, 2020

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

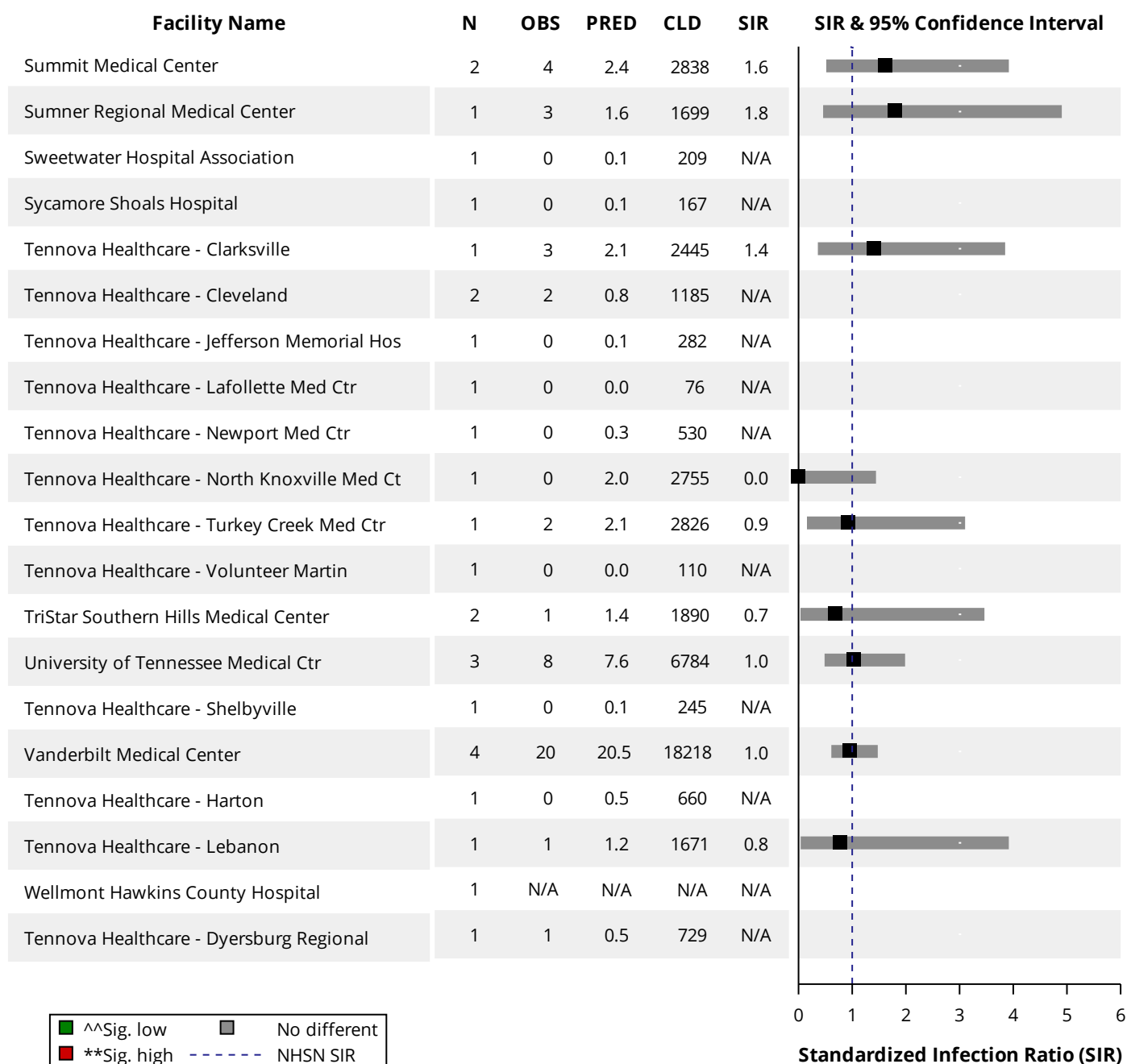
N/A = Data not shown for facilities with <50 central line days / SIR not calculated for facilities with <1 predicted infection

** Significantly higher than 2015 national baseline

^^ Significantly lower than 2015 national baseline

* Zero infections, but not statistically significant

Figure 11 (cont'd)



Data Reported as of June 01, 2020

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

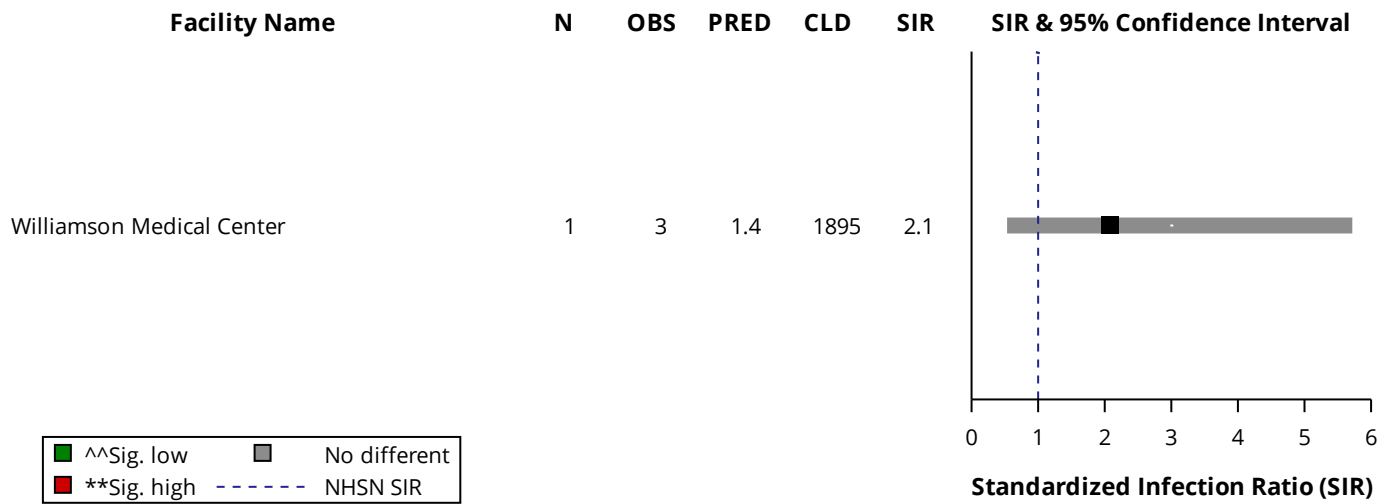
N/A = Data not shown for facilities with <50 central line days / SIR not calculated for facilities with <1 predicted infection

** Significantly higher than 2015 national baseline

^^ Significantly lower than 2015 national baseline

* Zero infections, but not statistically significant

Figure 11 (cont'd)



Data Reported as of June 01, 2020

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

CLABSIs in Neonatal ICUs

Total number of neonatal ICUs (NICUs) reporting from January-December 2019: 24

Total number of neonatal ICUs (NICUs) reporting from January-December 2020: 21

SIRs by Quarter (Figure 12)

- The overall CLABSI SIR in Tennessee NICUs between Q1-2019 and Q2-2020 remained below the expected 2015 baseline SIR of 1.0 ranging from 0.30 to 0.42 except for Q2-2019 which had an SIR of 0.63. Q3 and Q4 2020 saw an increase in CLABSI SIR from Q2-2020 to 1.10 and 0.92 respectively. Throughout 2019 and 2020, Tennessee NICUs had 5 of 8 quarterly points that were below the U.S. Department of Health and Human Services' [National Action Plan to Prevent Healthcare-Associated Infections](#)⁹ 2020 prevention target of SIR = 0.50 though none were statistically significantly below this goal.

CLABSI SIRs by Unit Type (Figure 13)

- The Tennessee CLABSI SIR in combination level II/III NICUs were not statistically significantly different than 2015 national SIR of 1 across 2019 and 2020. Level II/III NICUs had an SIR of 0.64 in 2019 and 0.88 in 2020.
- The Tennessee CLABSI SIRs in level III NICUs were significantly lower than predicted in both 2019 and 2020. The Tennessee CLABSI SIR in level III NICUs in 2019 was 0.33 (95% CI: 0.18:0.57) and 0.33 (95% CI: 0.14:0.70) in 2020.

Key Percentiles for Tennessee SIRs (Table 9, Table 10, Table 11)

- The overall SIR across all reporting NICUs in Tennessee from January-December 2019 was statistically significantly lower than the national SIR of 1 (SIR=0.44; 95% CI: 0.29, 0.64). The overall SIR across all reporting NICUs in Tennessee from January-December 2020 was also statistically below the national SIR of 1 with an SIR=0.62; 95% CI: 0.40, 0.92).
- From January-December 2019, the median (50th percentile) facility-specific SIR was 0.30, indicating that half of all reporting Tennessee hospitals with at least 1 predicted infection had an SIR at or below 0.30. From January-December 2020, the median facility-specific SIR was a lower 0.59.

⁹ <http://www.hhs.gov/ash/initiatives/hai/actionplan/>

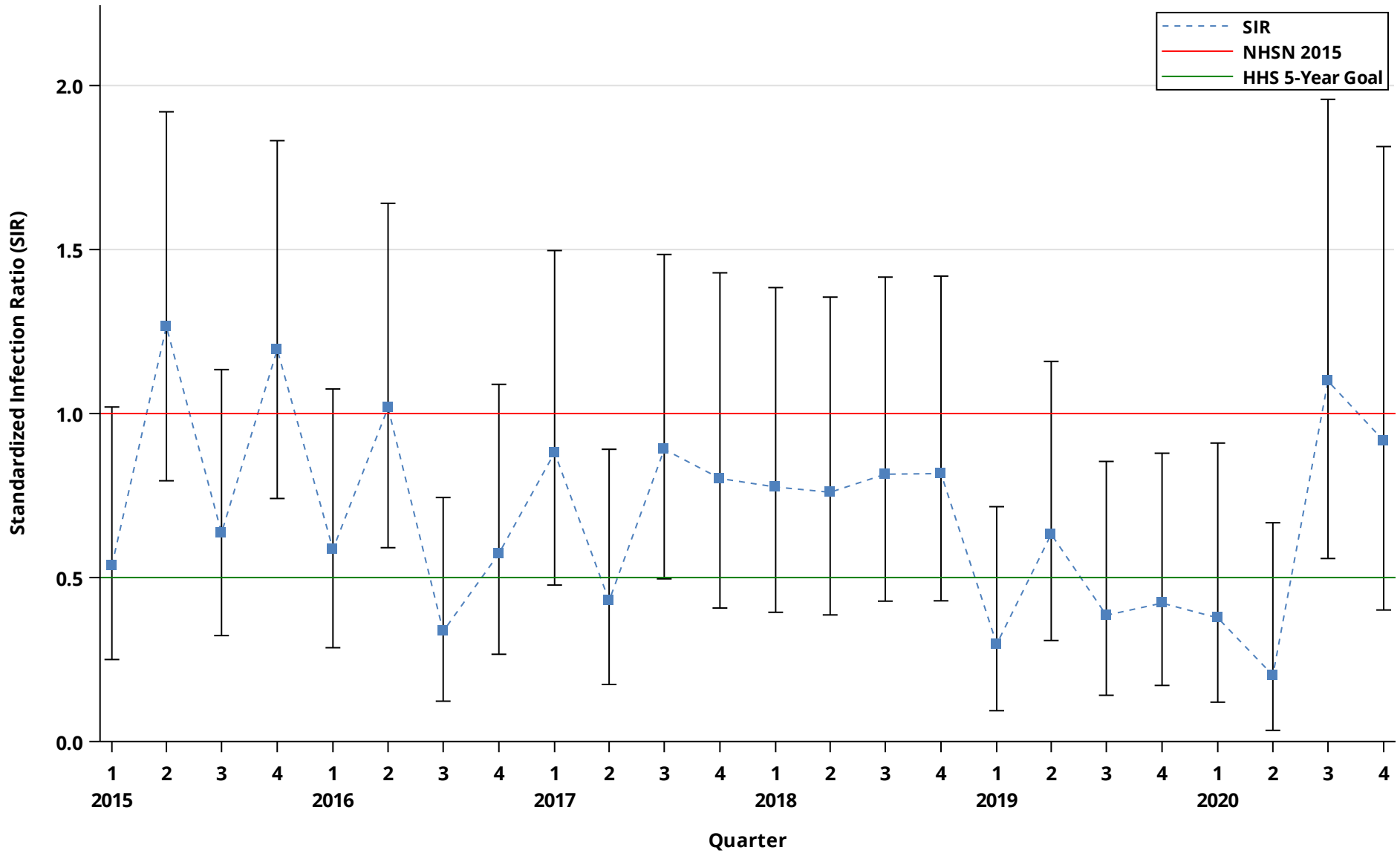
Microorganisms Associated with CLABSIs in Neonatal ICUs (Figure 14, Figure 15)

- Among the 29 pathogens isolated from 25 NICU CLABSIs in 2019, the most common pathogens were coagulase-negative *Staphylococcus* species (17%), *Enterococcus* species (17%), and *Staphylococcus aureus* (17%). Methicillin-Resistant *S. aureus* (MRSA) accounted for 10% of total positive isolates.
- Among the 25 pathogens isolated from 23 NICU CLABSIs in 2020, the most common pathogens were *Staphylococcus aureus* (44%), *Enterococcus* species (16%), and *E. coli* (16%). Methicillin-Resistant *S. aureus* (MRSA) accounted for 16% of total positive isolates.

Facility-Specific SIRs (Figure 16, Figure 17)

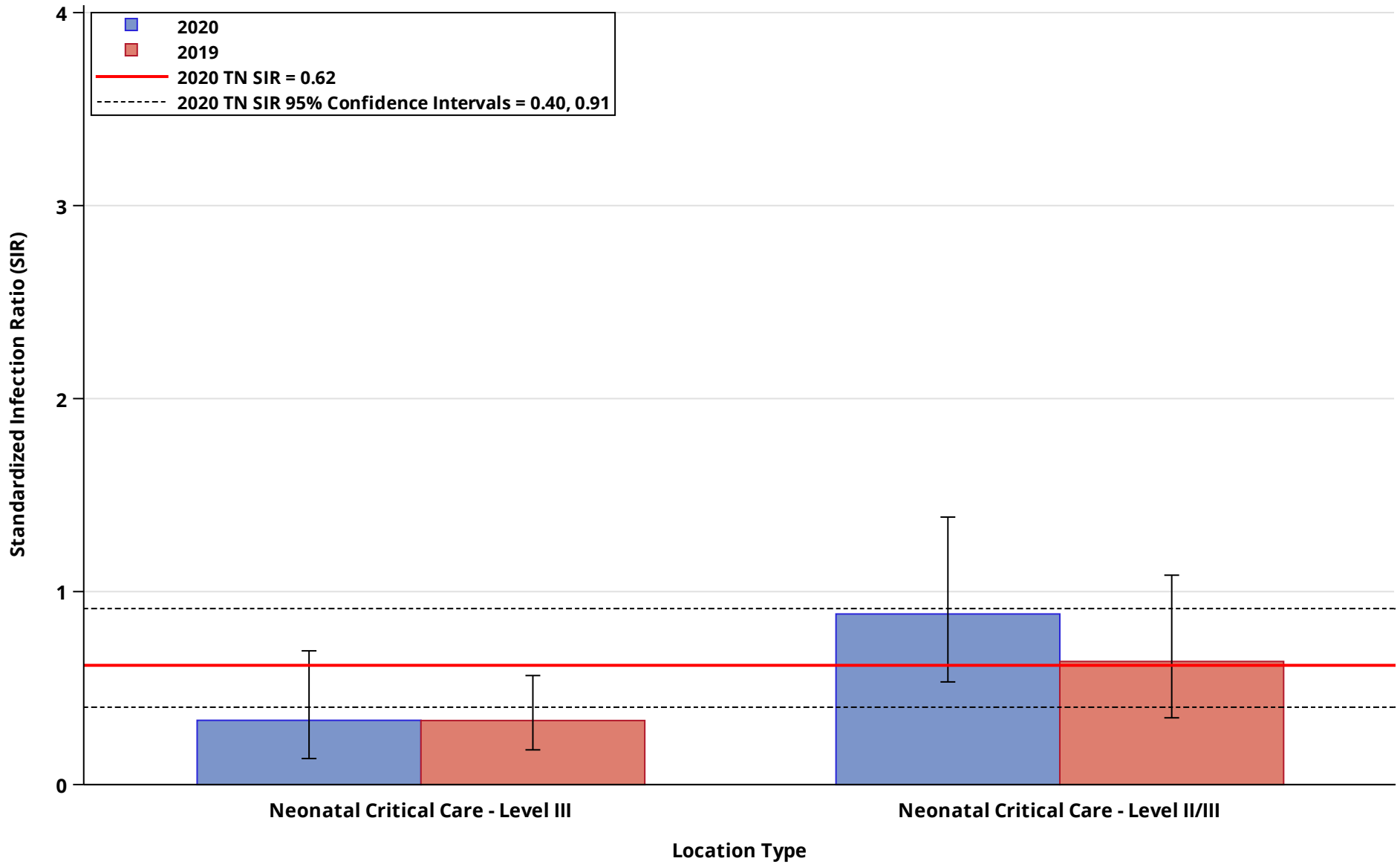
- A single NICU CLABSI SIR per facility is displayed in [Figure 16](#) and [Figure 17](#). The bar representing the confidence interval is green if the CLABSI SIR was significantly lower than the national 2015 SIR of 1, and red if the SIR was significantly higher than 1. Some NICUs reported zero CLABSIs (indicated with an asterisk), although the SIR may not be statistically significant due to a relatively small number of central line-days.
- In 2020, one facility had a NICU CLABSI SIR that was statistically significantly higher than the 2015 national baseline SIR of 1 while no facilities had a statistically significantly higher NICU CLABSI SIR in 2020. There were four facilities in 2019 and two in 2020 that had a NICU CLABSI SIR that was statistically significantly lower than the 2015 national baseline SIR of 1.

Figure 12: Standardized Infection Ratios (SIR) for Central Line-Associated Bloodstream Infections (CLABSI) for Neonatal Intensive Care Units (NICUs) by Quarter, Tennessee, 01/01/2015–12/31/2020 [Reference standard: National Healthcare Safety Network (NHSN), 2015]



Data Reported as of June 01, 2021

Figure 13: Standardized Infection Ratios (SIRs) for Central Line-Associated Bloodstream Infections (CLABSI) by Neonatal Intensive Care Unit (NICU) Type, Tennessee, 2020 [Reference standard: National Healthcare Safety Network (NHSN), 2015]



Data Reported as of June 01, 2021

Table 9: 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, 01/01/2019–12/31/2020

									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	2020	21	25,852	23	37.02	0.62	0.40	0.92	9	2	22%	1	11%	0.00	0.00	0.59	0.90	3.63
	2019	24	39,098	24	54.91	0.44	0.29	0.64	11	4	36%	0	0%	0.00	0.00	0.30	0.65	1.06

Data reported as of June 01, 2020

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 10: 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, 01/01/2019–12/31/2020

				No. of INFECTIONS		SIR AND 95% CONFIDENCE INTERVAL			DISTRIBUTION OF FACILITY-SPECIFIC SIRs					
ICU TYPE	YEAR	No.	CL DAYS	OBS	PRED	SIR	LOWER LIMIT	UPPER LIMIT	No. of FACS WITH ≥1 PRED INFECTION	10%	25%	50%	75%	90%
Neonatal ICU, Level II/III	2020	17	13,367	17	19.24	0.88	0.53	1.39	5	0.00	0.59	0.83	0.90	1.54
	2019	19	13,660	12	18.80	0.64	0.35	1.09	5	0.00	0.00	0.30	1.06	1.09
Neonatal ICU, Level III	2020	5	12,631	6	18.00	0.33	0.14	0.70	4	N/A	N/A	N/A	N/A	N/A
	2019	6	25,438	12	36.11	0.33	0.18	0.57	6	0.00	0.20	0.27	0.46	0.65

Data reported as of June 01, 2020

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

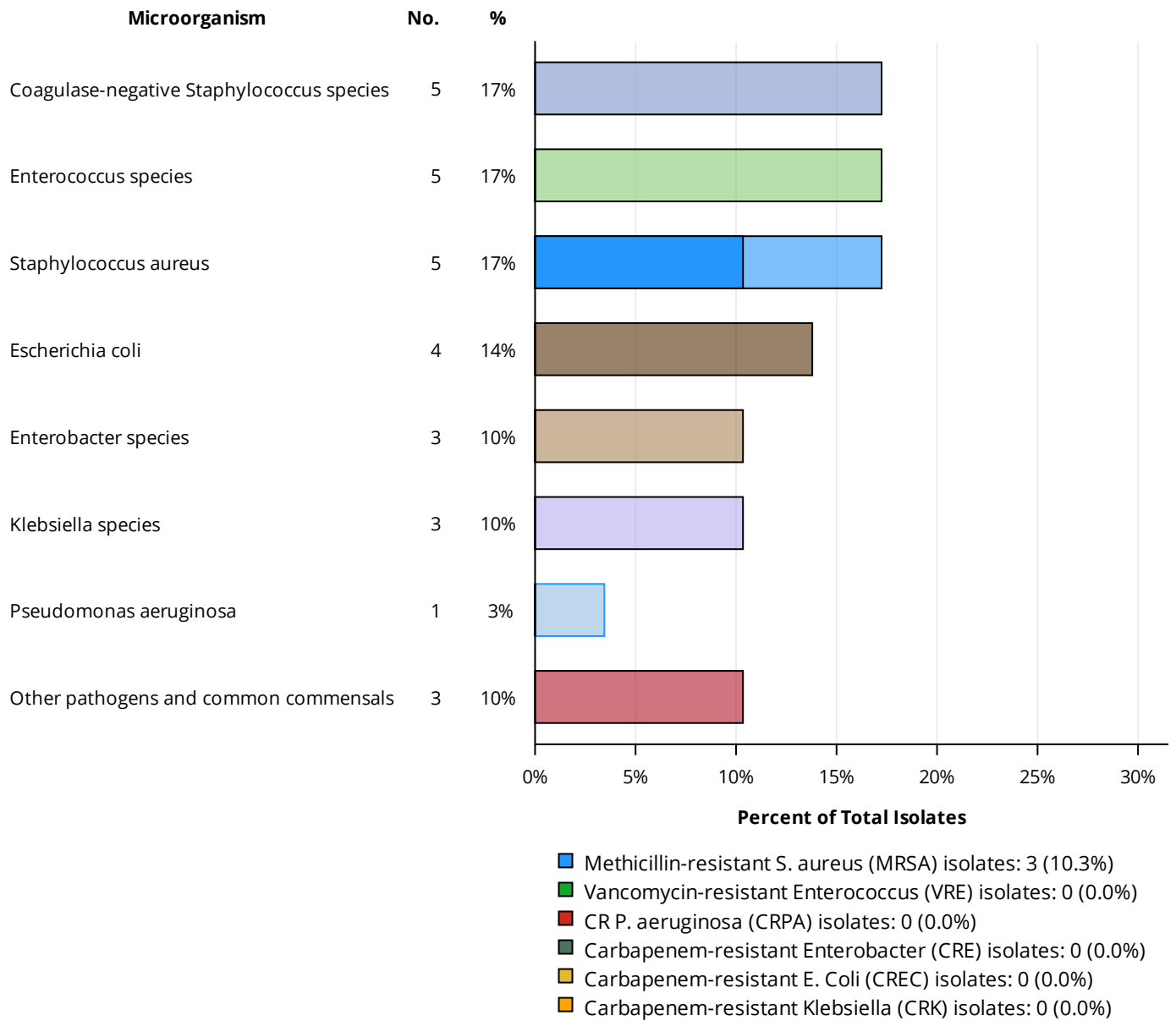
Key percentiles include units with at least one predicted infection

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

Figure 14: Microorganisms Identified in Central Line-Associated Bloodstream Infections (CLABSIs) in Neonatal Intensive Care Units, Tennessee, 01/01/2019–12/31/2019

Number of isolates=29; Number of events=25



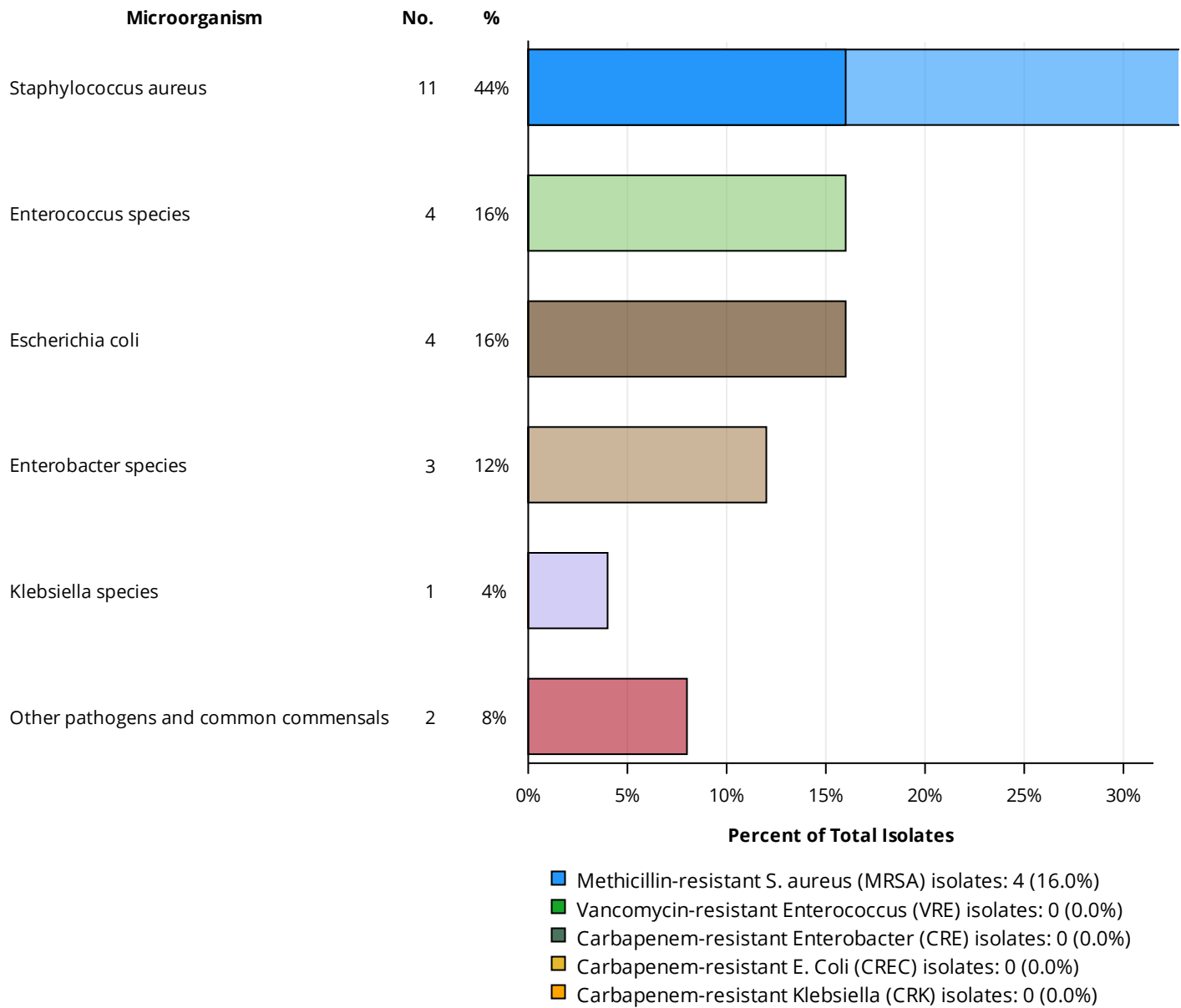
Data reported as of June 01, 2021

Other common commensals =

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

Figure 15: Microorganisms Identified in Central Line-Associated Bloodstream Infections (CLABSIs) in Neonatal Intensive Care Units, Tennessee, 01/01/2020–12/31/2020

Number of isolates=25; Number of events=23

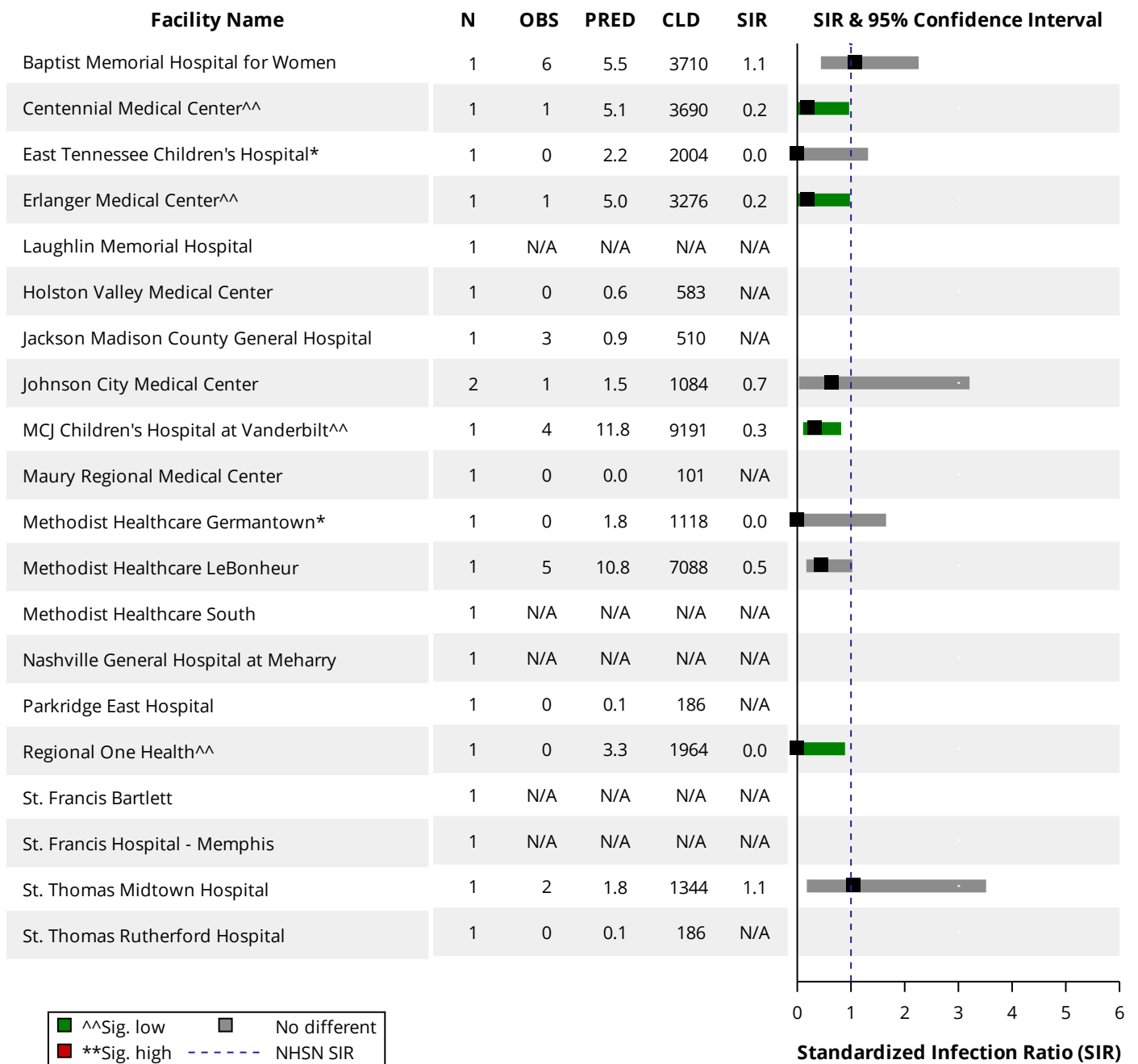


Data reported as of June 01, 2020

Other common commensals = Coagulase-negative spp.

Other pathogens = *Candida* spp.

Figure 16: CLABSI Standardized Infection Ratio (SIR) for Neonatal Intensive Care Units in Acute Care Facilities, Tennessee, 01/01/2019 – 12/31/2019



Data Reported as of June 01, 2021

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

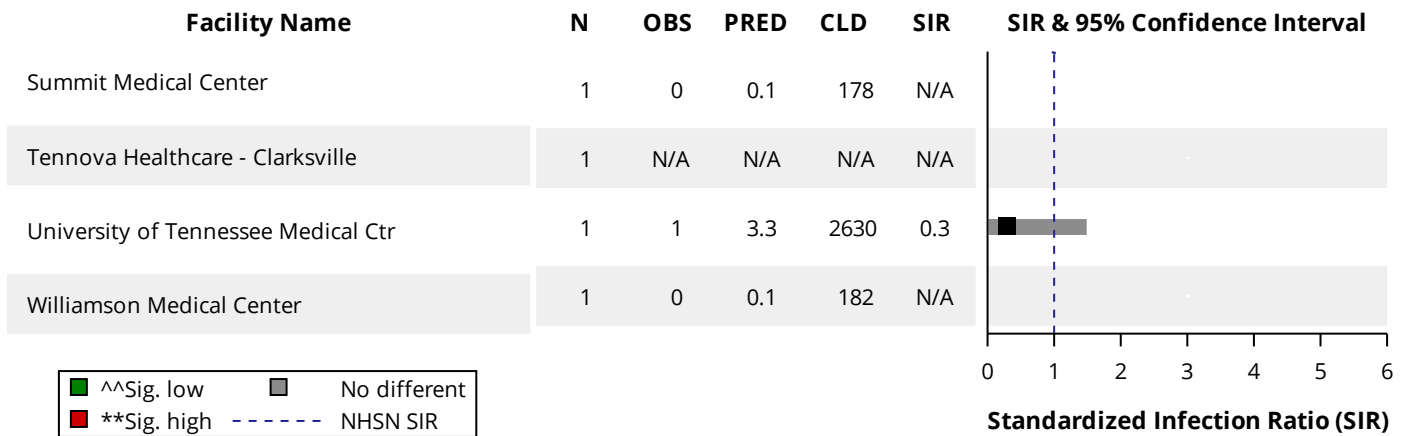
N/A = Data not shown for facilities with <50 central line days / SIR not calculated for facilities with <1 predicted infection

** Significantly higher than national baseline

^^ Significantly lower than national baseline

* Zero infections, but not statistically significant

Figure 16 (cont'd)



Data Reported as of June 01, 2021

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

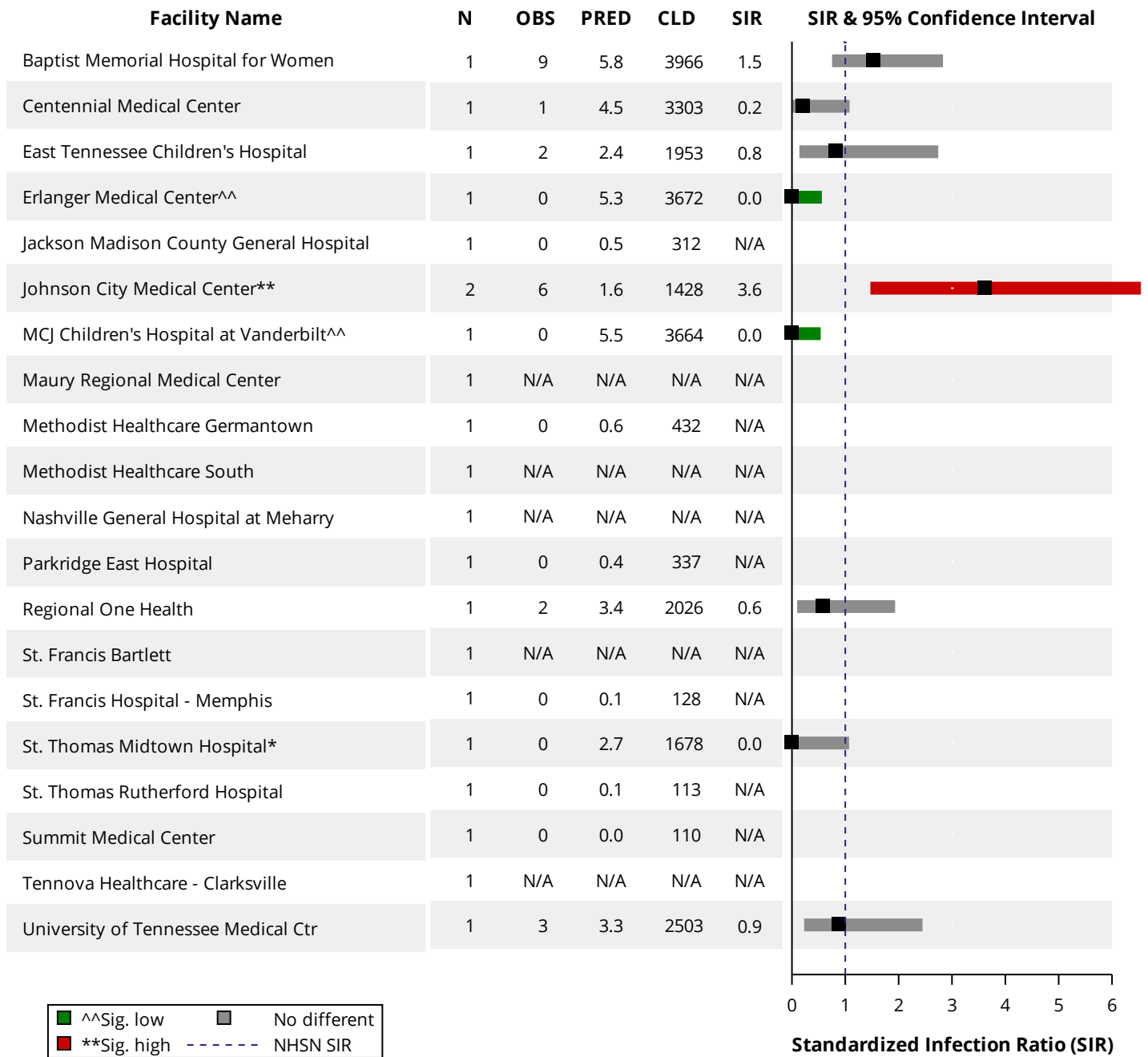
N/A = Data not shown for facilities with <50 central line days / SIR not calculated for facilities with <1 predicted infection

** Significantly higher than national baseline

^^ Significantly lower than national baseline

* Zero infections, but not statistically significant

Figure 17: CLABSI Standardized Infection Ratio (SIR) for Neonatal Intensive Care Units in Acute Care Facilities, Tennessee, 01/01/2020 – 12/31/2020



Data Reported as of June 01, 2020

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

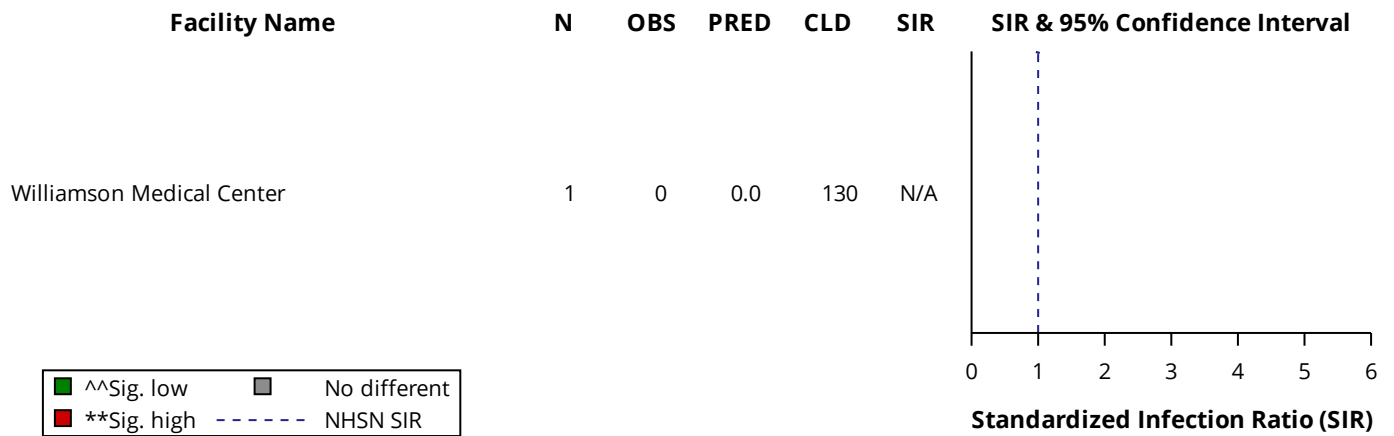
N/A = Data not shown for facilities with <50 central line days / SIR not calculated for facilities with <1 predicted infection

** Significantly higher than national baseline

^^ Significantly lower than national baseline

* Zero infections, but not statistically significant

Figure 17 (cont'd)



Data Reported as of June 01, 2020

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 2019 98

Total number of hospitals reporting from January-December 2020: 96

SIRs by Quarter ([Figure 18](#))

The overall CLABSI wards SIR in Tennessee decreased from 0.81 in Q1-2019 to 0.29 in Q2-2019 which was the first quarter Tennessee has had a wards CLABSI SIR below the U.S. Department of Health and Human prevention target of SIR = 0.50. During Q2-2019 through Q1-2020, Tennessee wards maintained a lower-than-expected CLABSI SIR ranging from 0.34–0.63. Quarters 2 and 3 of 2020 had a CLABSI SIR in the range of expected infections whilst again recording a lower-than-expected CLABSI SIR in Q4-2020 of 0.44. Outside of Q2-2019, The CLABSI ward SIR for the entire period January 2019-December 2020 failed to achieve the 2020 U.S. Department of Health and Human Services' prevention target.

SIR by Unit Type ([Figure 19](#))

- In 2019 and 2020, no individual unit type recorded a statistically higher CLABSI SIR than predicted from the 2015 baseline.
- In 2019, Tennessee's medical wards and combination medical/surgical wards had statistically lower CLABSI SIRs. The combination medical/surgical wards in 2020 also had a statistically lower CLABSI SIRs. Tennessee's medical wards had CLABSI SIRs of 0.42 and 0.74 in 2019 and 2020 respectively while the combination medical/surgical wards had CLABSI SIRs of 0.53 in 2019 and 0.49 in 2020. Standalone surgical wards also had a significantly lower CLABSI SIR of 0.37 (95%CI: 0.18, 0.67) in 2019.

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

- The overall CLABSI SIR across all reporting adult and pediatric medical, surgical, and medical/surgical wards in Tennessee from January-December 2019 was statistically significantly lower than the national SIR of 1 (SIR=0.52; 95% CI: 0.43, 0.63). This SIR indicates that the number of CLABSIs in wards was 48% 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 for the 2020 year was also statistically significantly lower than the national SIR of 1 (SIR=0.65; 95% CI: 0.54, 0.77). This SIR indicates that the number of CLABSIs in wards was 35% lower than predicted, compared to national 2015 NHSN data.

- In 2019, the median (50th percentile) facility-specific SIR was 0.51, indicating that half of all reporting Tennessee hospitals with at least 1 predicted infection had an SIR at or below 0.51. In 2020, the median facility-specific SIR was 0.51, indicating that half of all reporting Tennessee hospitals with at least 1 predicted infection had an SIR at or below 0.51.

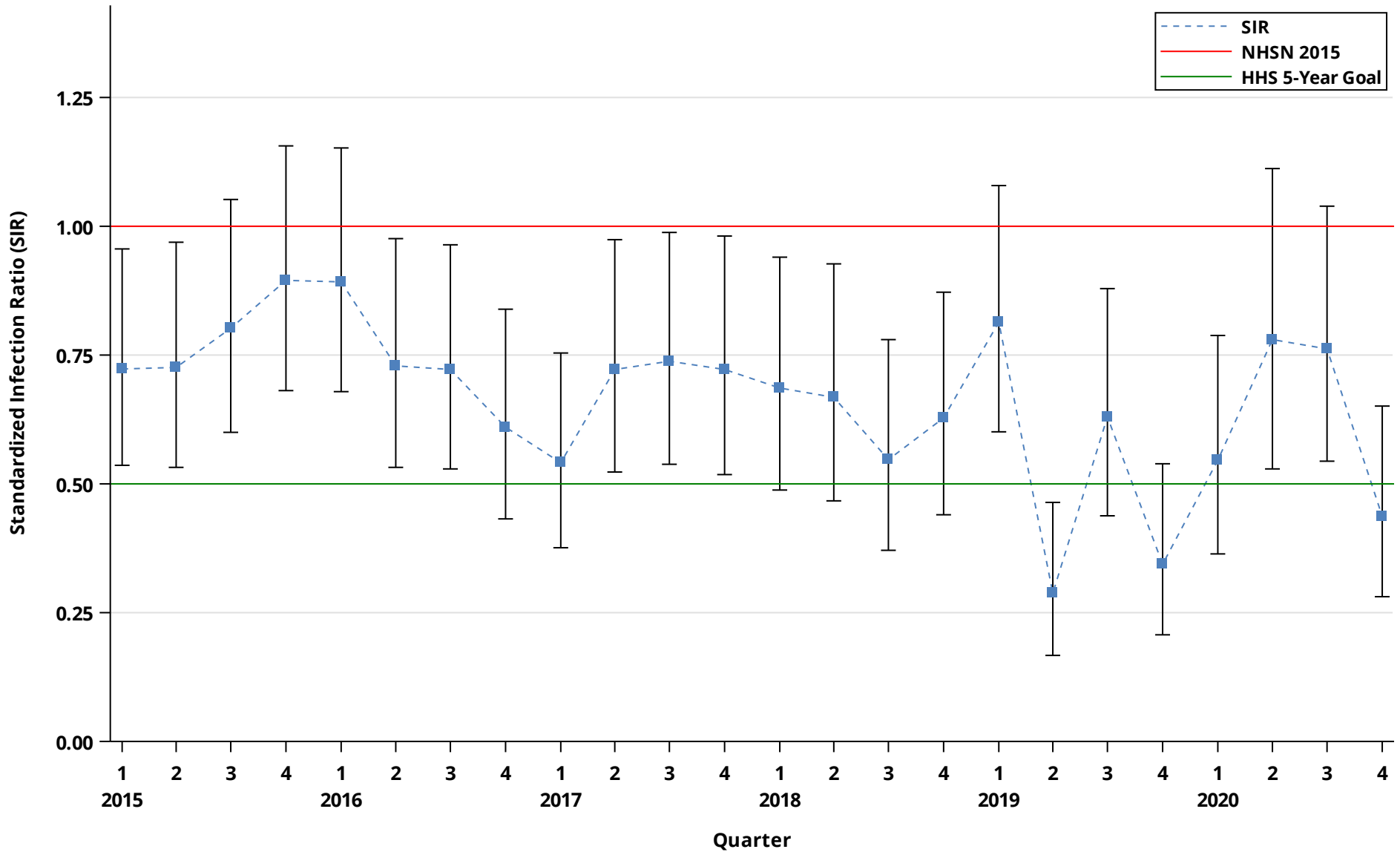
Microorganisms Associated with CLABSIs in Adult and Pediatric Medical, Surgical, and Medical/Surgical Wards (Figure 20, Figure 21)

- Among the 132 pathogens isolated from 116 CLABSIs in 2019, the most common pathogens were *Staphylococcus aureus* (20%), *Candida* species and other yeasts (13%), *Enterococcus* species (13%), and *Klebsiella* species (13%). Methicillin-Resistant *S. aureus* (MRSA) accounted for 10% and vancomycin-resistant *Enterococcus* (VRE) for 3% of total positive isolates.
- Among the 140 pathogens isolated from 122 CLABSIs in 2020, the most common pathogens were *Candida* species and other yeasts (19%), *Enterococcus* species (18%), *Staphylococcus aureus* (15%), and coagulase-negative *Staphylococcus* species (11%), and. Methicillin-Resistant *S. aureus* (MRSA) accounted for 8% and vancomycin-resistant *Enterococcus* (VRE) for 3% of total positive isolates.

Facility-Specific CLABSI SIRs (Figure 22, Figure 23)

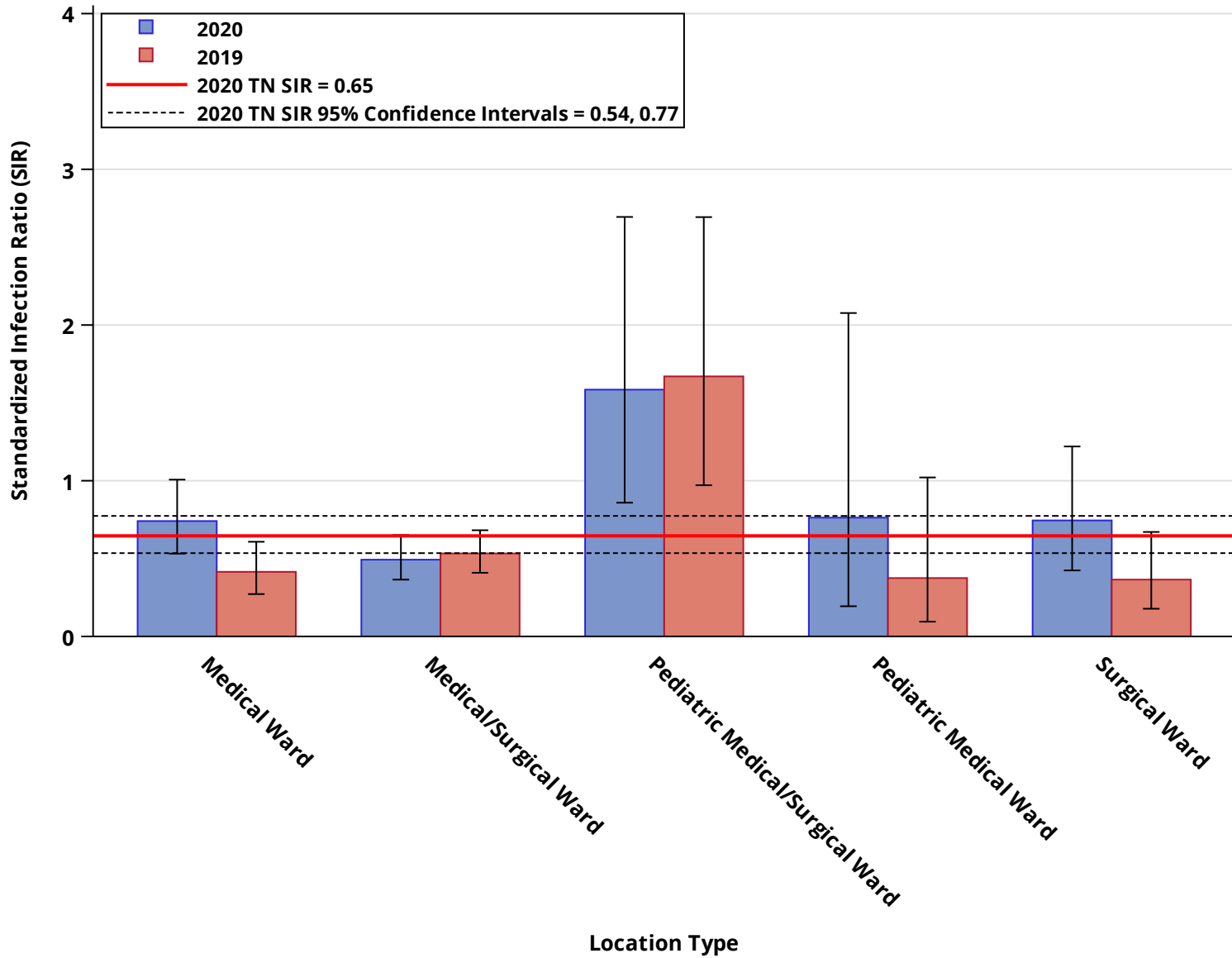
- A single CLABSI SIR that accounts for all reporting adult/pediatric ICUs in each facility is displayed in [Figure 22](#) and [Figure 23](#). The bar representing the confidence interval is green if the CLABSI SIR was significantly lower than the national SIR of 1, and red if the CLABSI SIR was significantly 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.
- 6 facilities in 2019 had a CLABSI SIR that was significantly lower than the 2015 national baseline SIR of 1 while 4 facilities were significantly lower in 2020. No facilities in 2019 or 2020 had ward CLABSI SIRs that were significantly higher than the 2015 baseline.

Figure 18: Standardized Infection Ratios (SIR) for Central Line-Associated Bloodstream Infections (CLABSI) for Adult and Pediatric Medical, Surgical, and Medical/Surgical Wards by Quarter, Tennessee, 01/01/2015–12/31/2020 [Reference standard: National Healthcare Safety Network (NHSN), 2015]



Data Reported as of June 01, 2021

Figure 19: Standardized Infection Ratios (SIRs) for Central Line-Associated Bloodstream Infections (CLABSI) by Ward Location Type, Tennessee, 2020 [Reference standard: National Healthcare Safety Network (NHSN), 2015]



Data Reported as of August 16, 2021

Table 11: 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, 01/01/2019–12/31/2020

									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	2020	96	200,541	113	174.94	0.65	0.54	0.77	35	4	11%	0	0%	0.00	0.24	0.51	0.88	1.56	
	2019	98	240,971	110	210.23	0.52	0.43	0.63	36	6	17%	0	0%	0.00	0.17	0.51	0.80	1.06	

Data reported as of June 01, 2020

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 Ward and Reporting Year, Tennessee, 01/01/2019–12/31/2020

				No. of INFECTIONS		SIR AND 95% CONFIDENCE INTERVAL			DISTRIBUTION OF FACILITY-SPECIFIC SIRs										
ICU TYPE	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	2020	41	58,740	38	51.26	0.74	0.53	1.01	13	0.00	0.55	0.69	0.97	1.57					
	2019	41	66,213	24	57.84	0.42	0.27	0.61	17	0.00	0.00	0.36	0.81	0.98					
Medical/Surgical Ward	2020	81	108,841	46	93.37	0.49	0.37	0.65	24	0.00	0.09	0.41	0.88	1.02					
	2019	82	129,627	59	110.78	0.53	0.41	0.68	26	0.00	0.00	0.36	0.77	1.52					
Pediatric Medical Ward	2020	5	3,973	3	3.93	0.76	0.19	2.08	1	N/A	N/A	N/A	N/A	N/A					
	2019	5	7,924	3	8.00	0.38	0.10	1.02	2	N/A	N/A	N/A	N/A	N/A					
Pediatric Medical/Surgical Ward	2020	8	7,814	12	7.57	1.59	0.86	2.69	2	N/A	N/A	N/A	N/A	N/A					
	2019	9	9,263	15	8.98	1.67	0.97	2.69	2	N/A	N/A	N/A	N/A	N/A					
Surgical Ward	2020	22	21,173	14	18.80	0.75	0.42	1.22	7	0.00	0.23	0.73	2.21	2.73					
	2019	25	27,944	9	24.63	0.37	0.18	0.67	8	0.00	0.00	0.18	0.67	0.89					

Data reported as of June 01, 2020

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

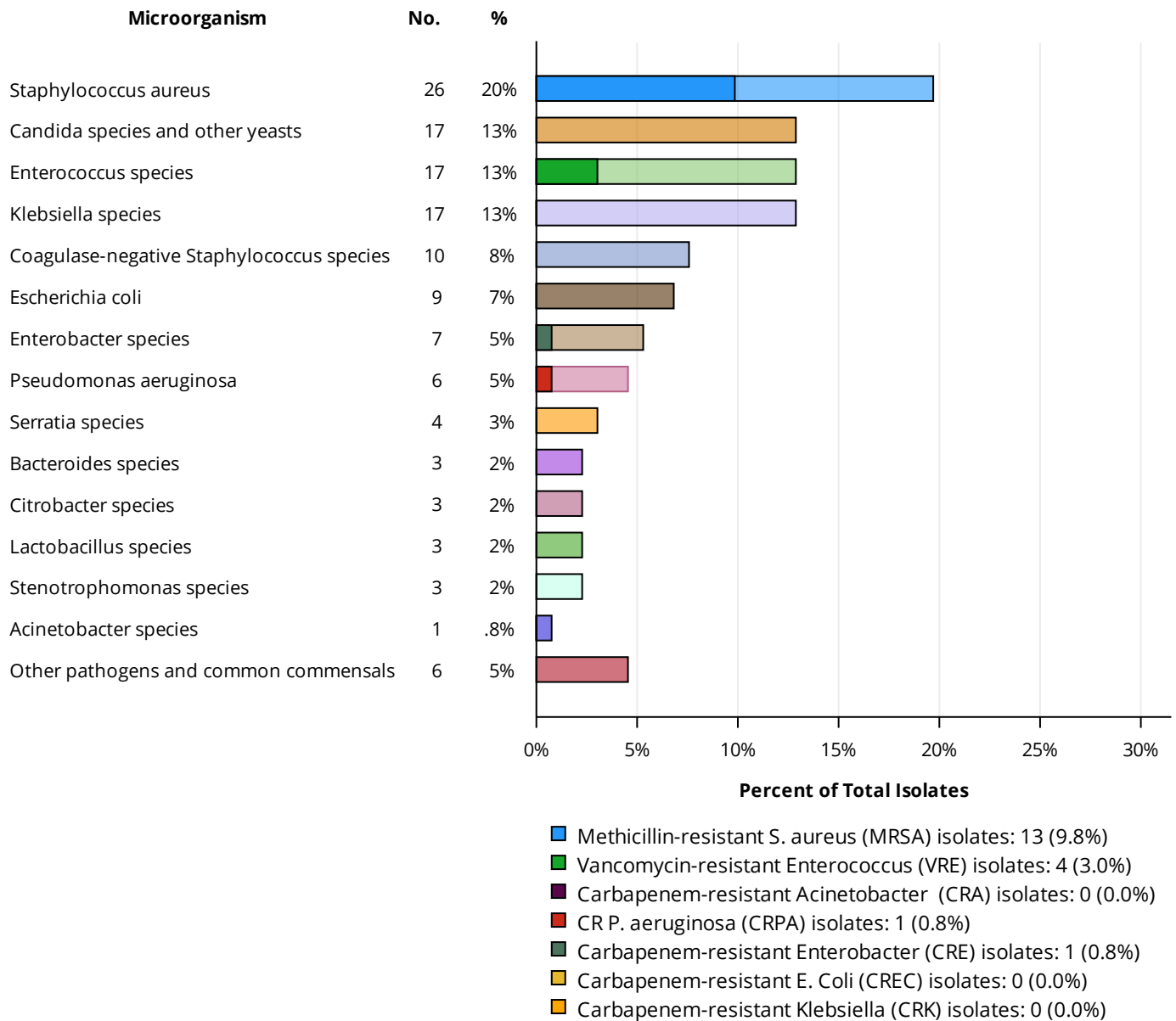
Key percentiles include units with at least one predicted infection

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

Figure 20: Microorganisms Identified in Central Line-Associated Bloodstream Infections (CLABSIs) in Adult and Pediatric Wards, Tennessee, 01/01/2019–12/31/2019

Number of isolates=132; Number of events=116



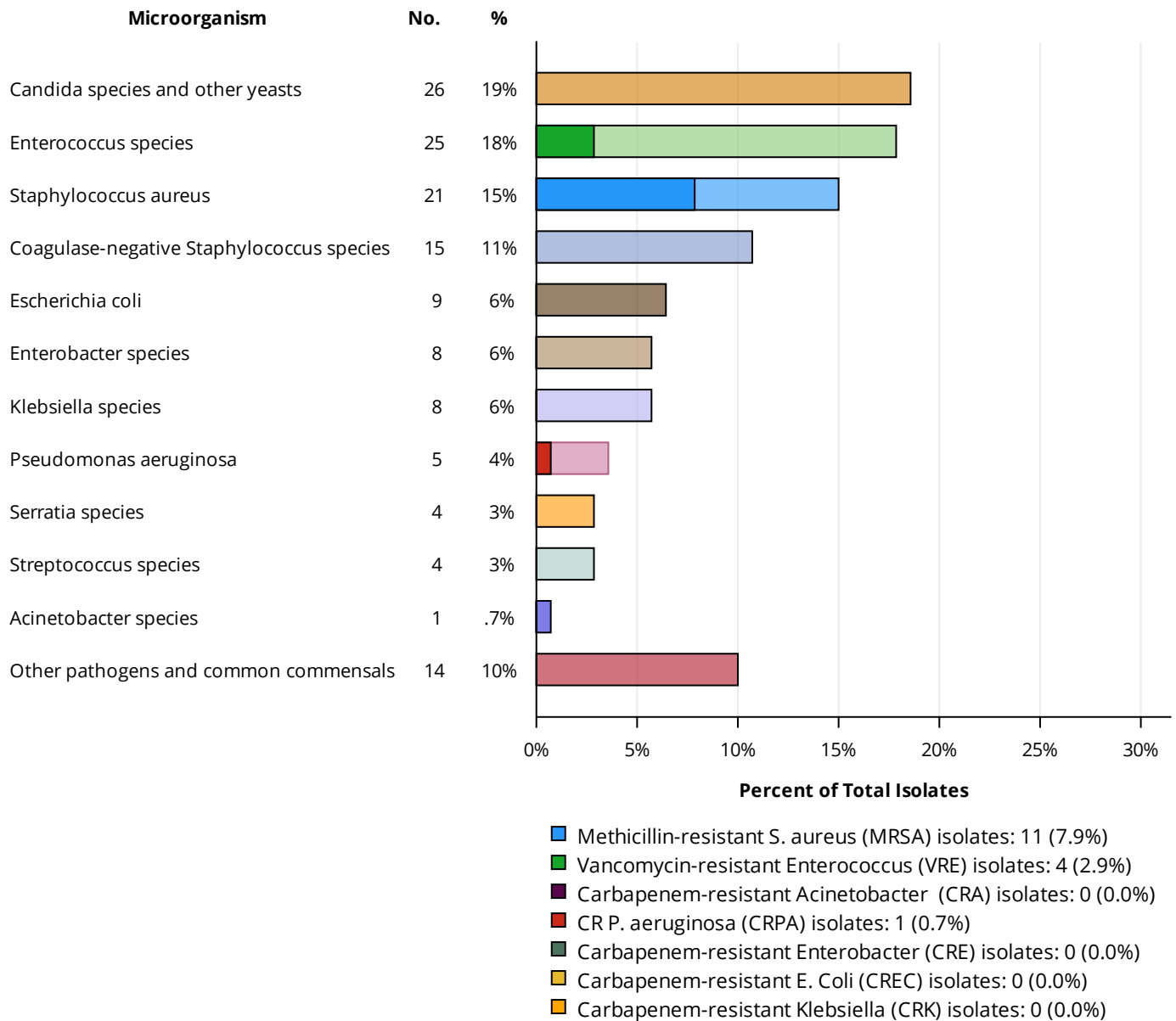
Data reported as of June 01, 2021

Other common commensals = *Bacillus* spp., *Micrococcus* spp.

Other pathogens = Other *Staphylococcus* spp., *Proteus* spp., *Streptococcus* spp.

Figure 21: Microorganisms Identified in Central Line-Associated Bloodstream Infections (CLABSIs) in Adult and Pediatric Wards, Tennessee, 01/01/2020–12/31/2020

Number of isolates=140; Number of events=122

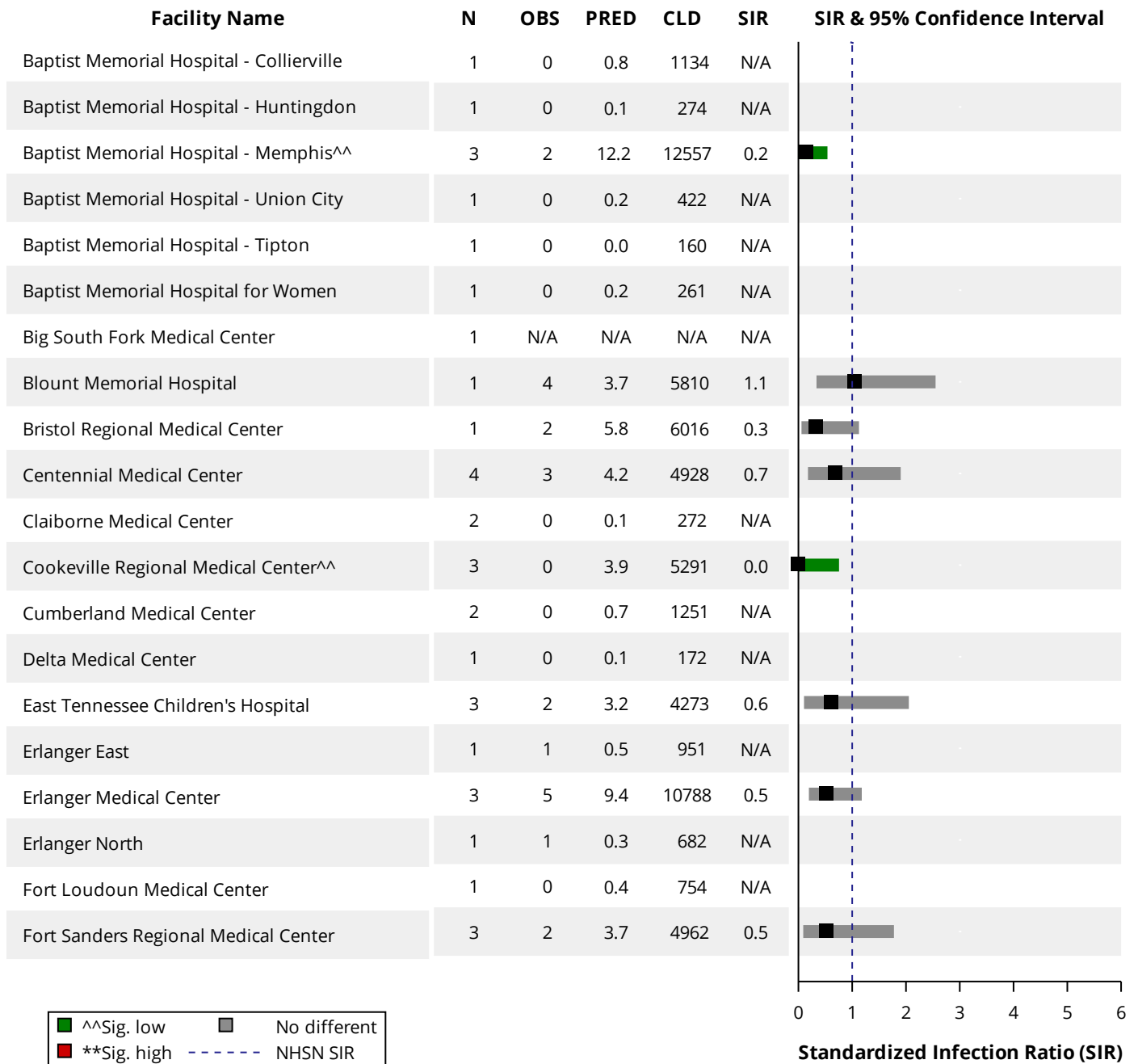


Data reported as of June 01, 2020

Other common commensals =

Other pathogens = *Abiotrophia* spp., *Bacteroides* spp., *Citrobacter* spp., *Elizabethkingia* spp., *Granulicatella* spp., *Neisseria* spp., *Ochrobactrum* spp., Other *Staphylococcus* spp., *Pantoea* spp., *Proteus* spp., *Raoultella* spp., *Stenotrophomonas* spp.

Figure 22: CLABSI Standardized Infection Ratio (SIR) for Adult and Pediatric Wards in Acute Care Facilities, Tennessee, 01/01/2019 – 12/31/2019



Data Reported as of June 01, 2021

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

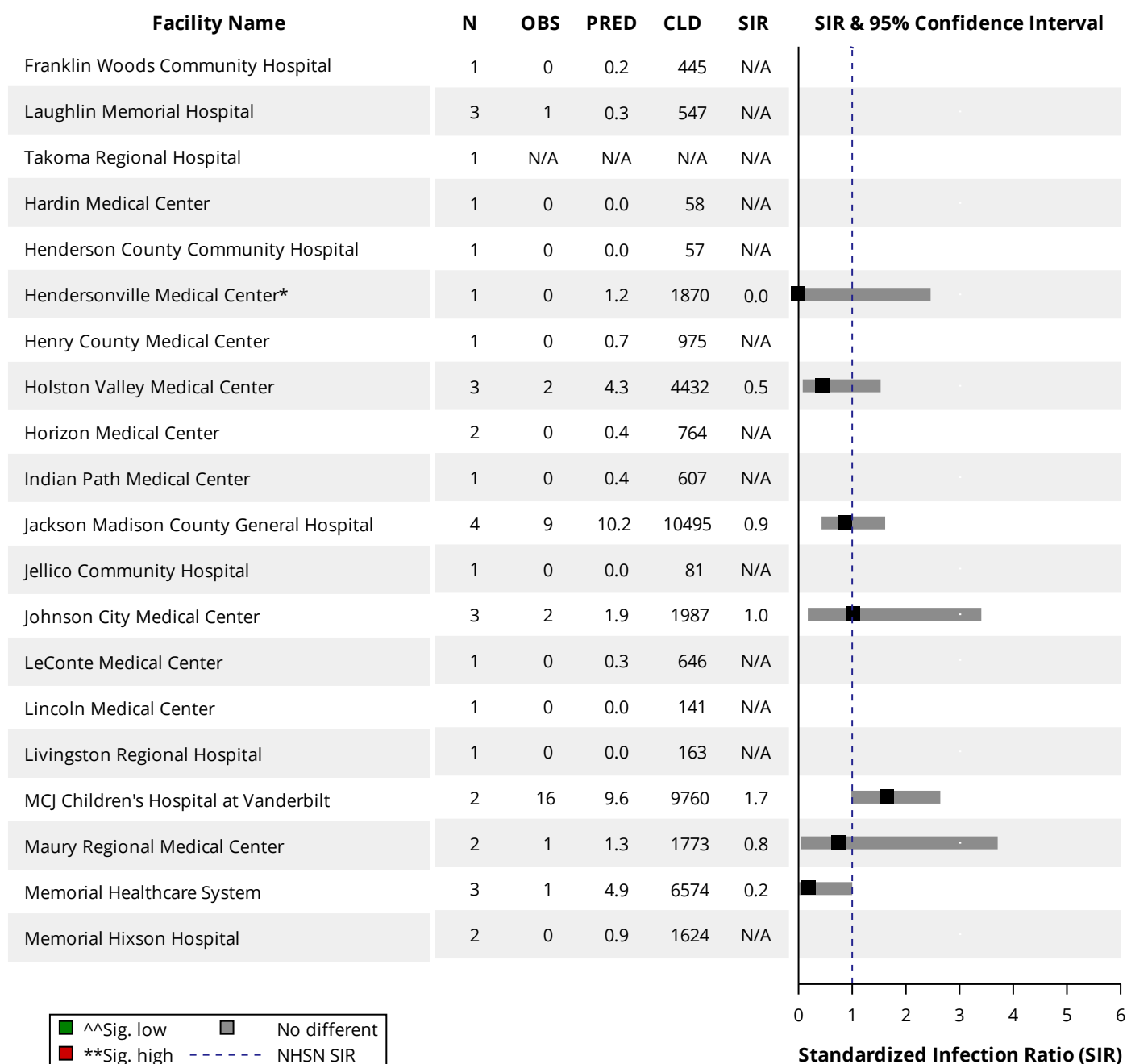
N/A = Data not shown for facilities with <50 central line days / SIR not calculated for facilities with <1 predicted infection

** Significantly higher than 2015 national baseline

^^ Significantly lower than 2015 national baseline

* Zero infections, but not statistically significant

Figure 22 (cont'd)



Data Reported as of June 01, 2021

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

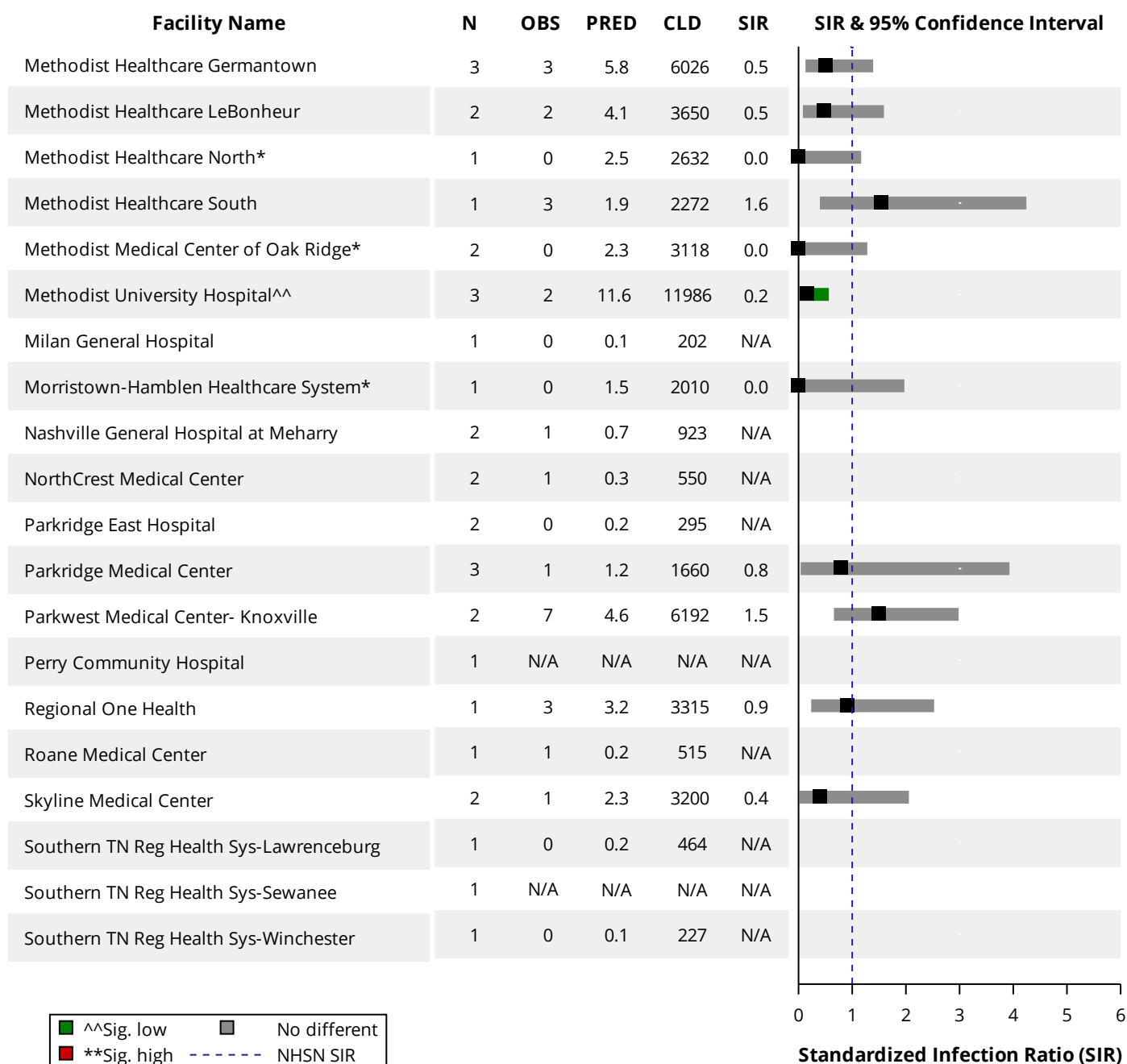
N/A = Data not shown for facilities with <50 central line days / SIR not calculated for facilities with <1 predicted infection

** Significantly higher than 2015 national baseline

^^ Significantly lower than 2015 national baseline

* Zero infections, but not statistically significant

Figure 22 (cont'd)



Data Reported as of June 01, 2021

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

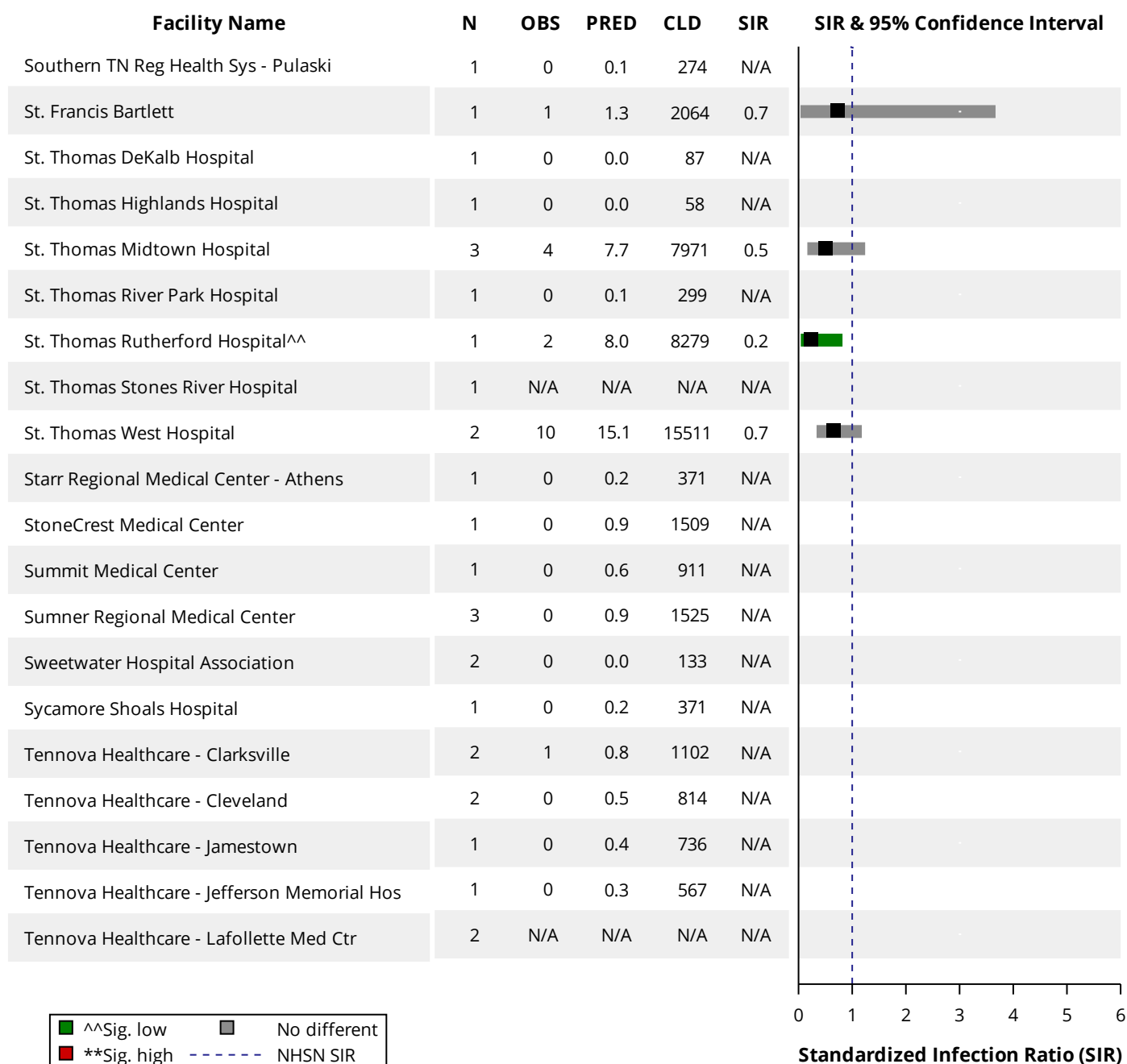
N/A = Data not shown for facilities with <50 central line days / SIR not calculated for facilities with <1 predicted infection

** Significantly higher than 2015 national baseline

^^ Significantly lower than 2015 national baseline

* Zero infections, but not statistically significant

Figure 22 (cont'd)



Data Reported as of June 01, 2021

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

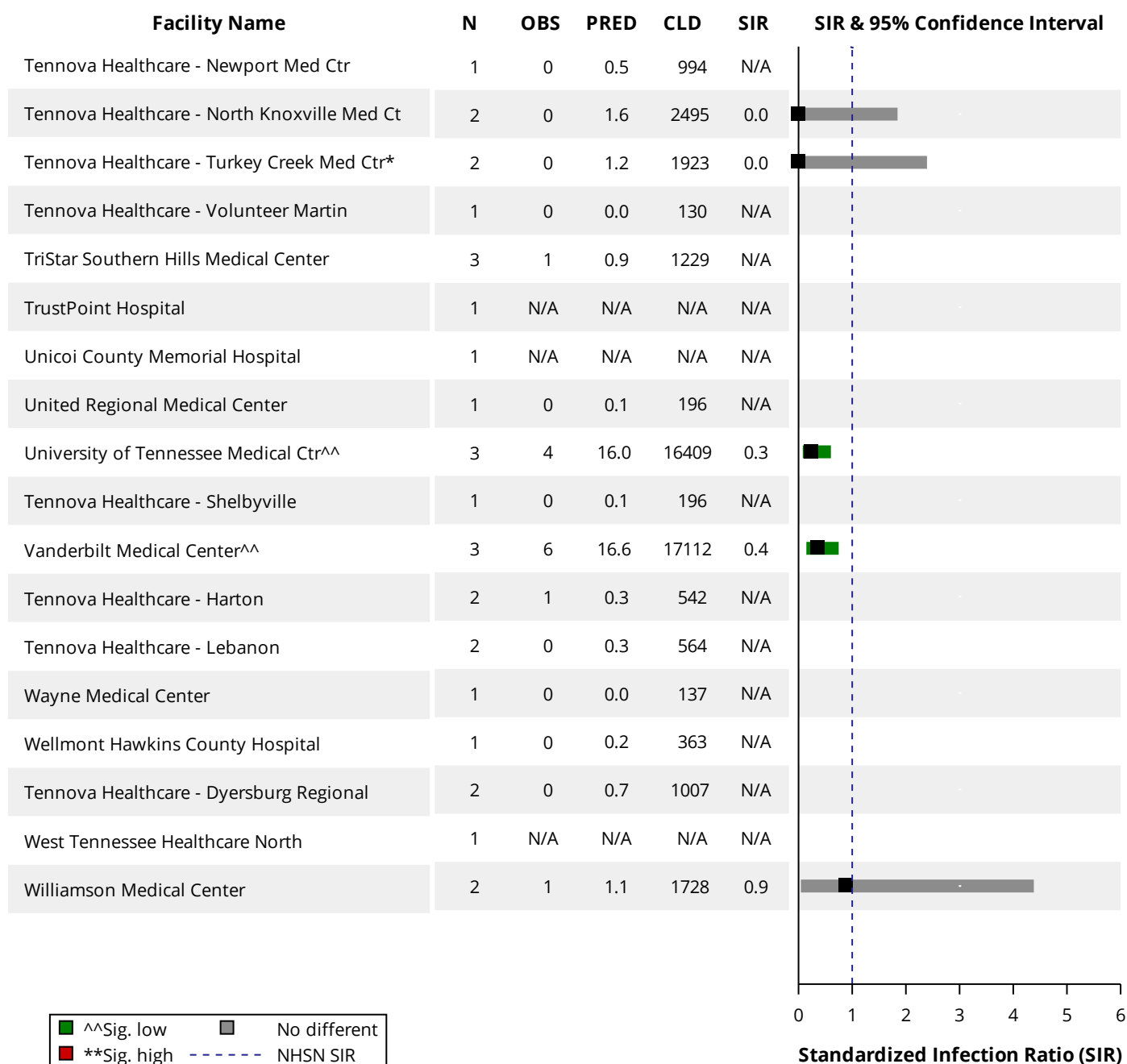
N/A = Data not shown for facilities with <50 central line days / SIR not calculated for facilities with <1 predicted infection

** Significantly higher than 2015 national baseline

^^ Significantly lower than 2015 national baseline

* Zero infections, but not statistically significant

Figure 22 (cont'd)



Data Reported as of June 01, 2021

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

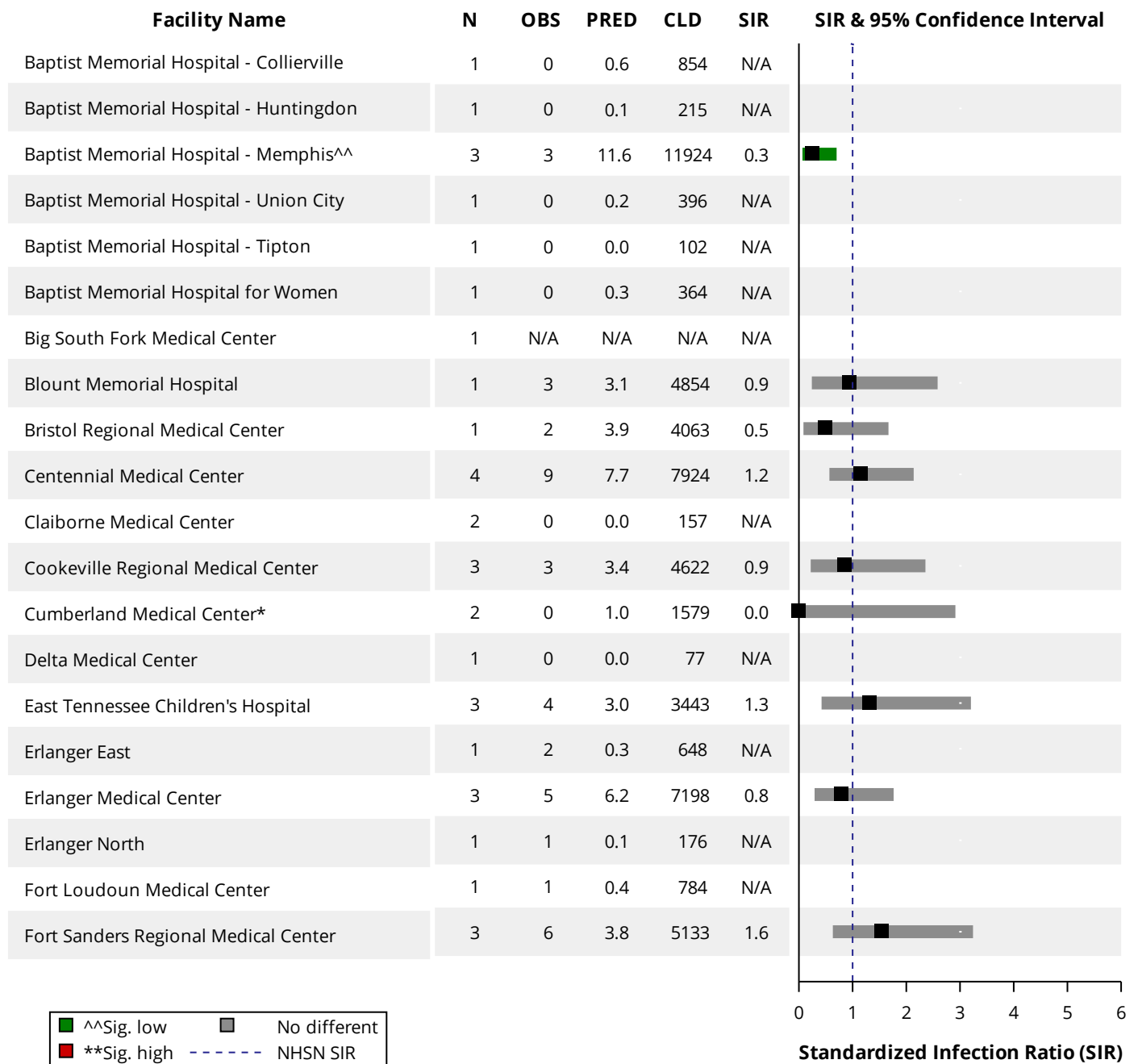
N/A = Data not shown for facilities with <50 central line days / SIR not calculated for facilities with <1 predicted infection

** Significantly higher than 2015 national baseline

^^ Significantly lower than 2015 national baseline

* Zero infections, but not statistically significant

Figure 23: CLABSI Standardized Infection Ratio (SIR) for Adult and Pediatric Wards in Acute Care Facilities, Tennessee, 01/01/2020 – 12/31/2020



Data Reported as of June 01, 2020

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

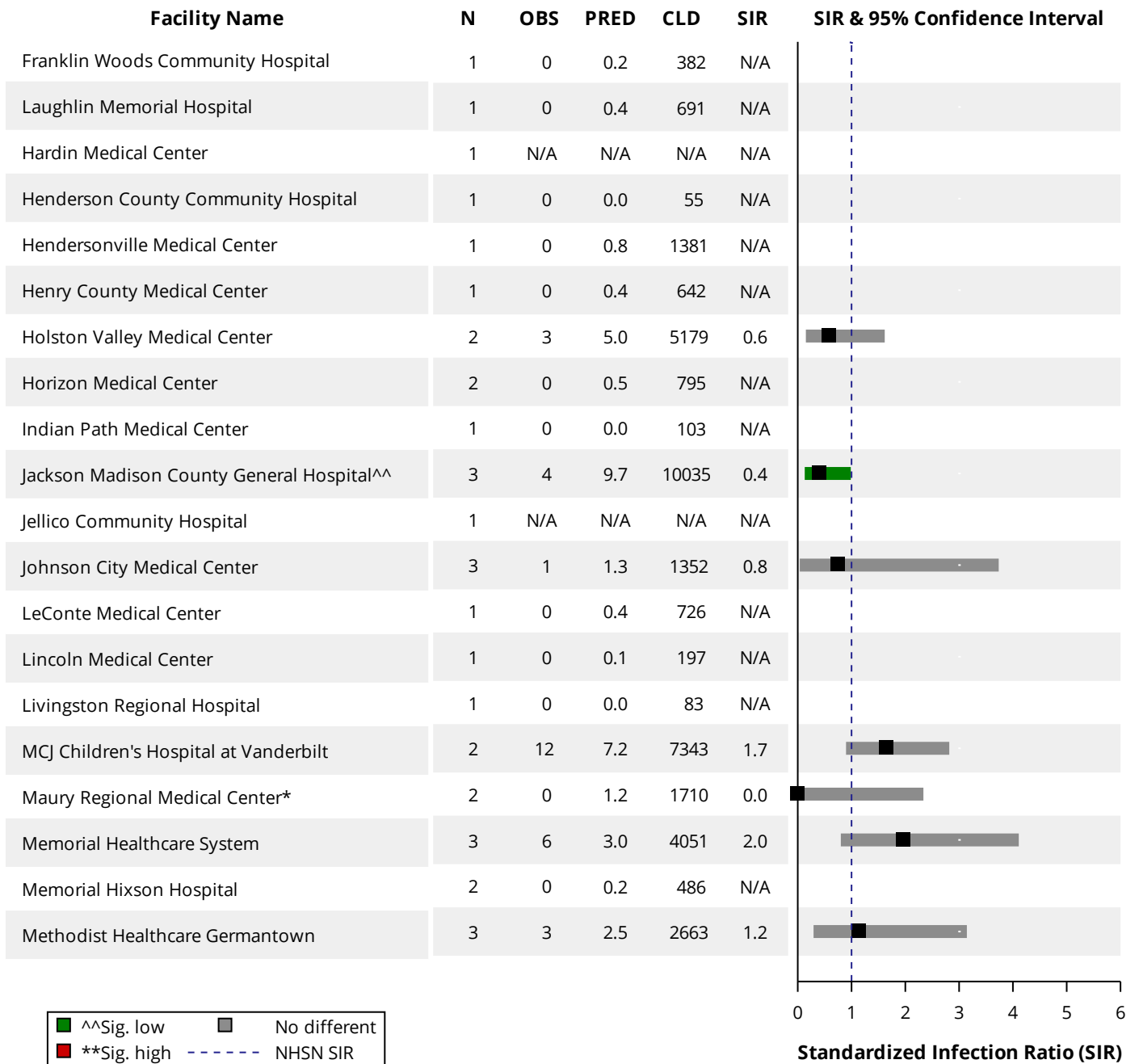
N/A = Data not shown for facilities with <50 central line days / SIR not calculated for facilities with <1 predicted infection

** Significantly higher than 2015 national baseline

^^ Significantly lower than 2015 national baseline

* Zero infections, but not statistically significant

Figure 23 (cont'd)



Data Reported as of June 01, 2020

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

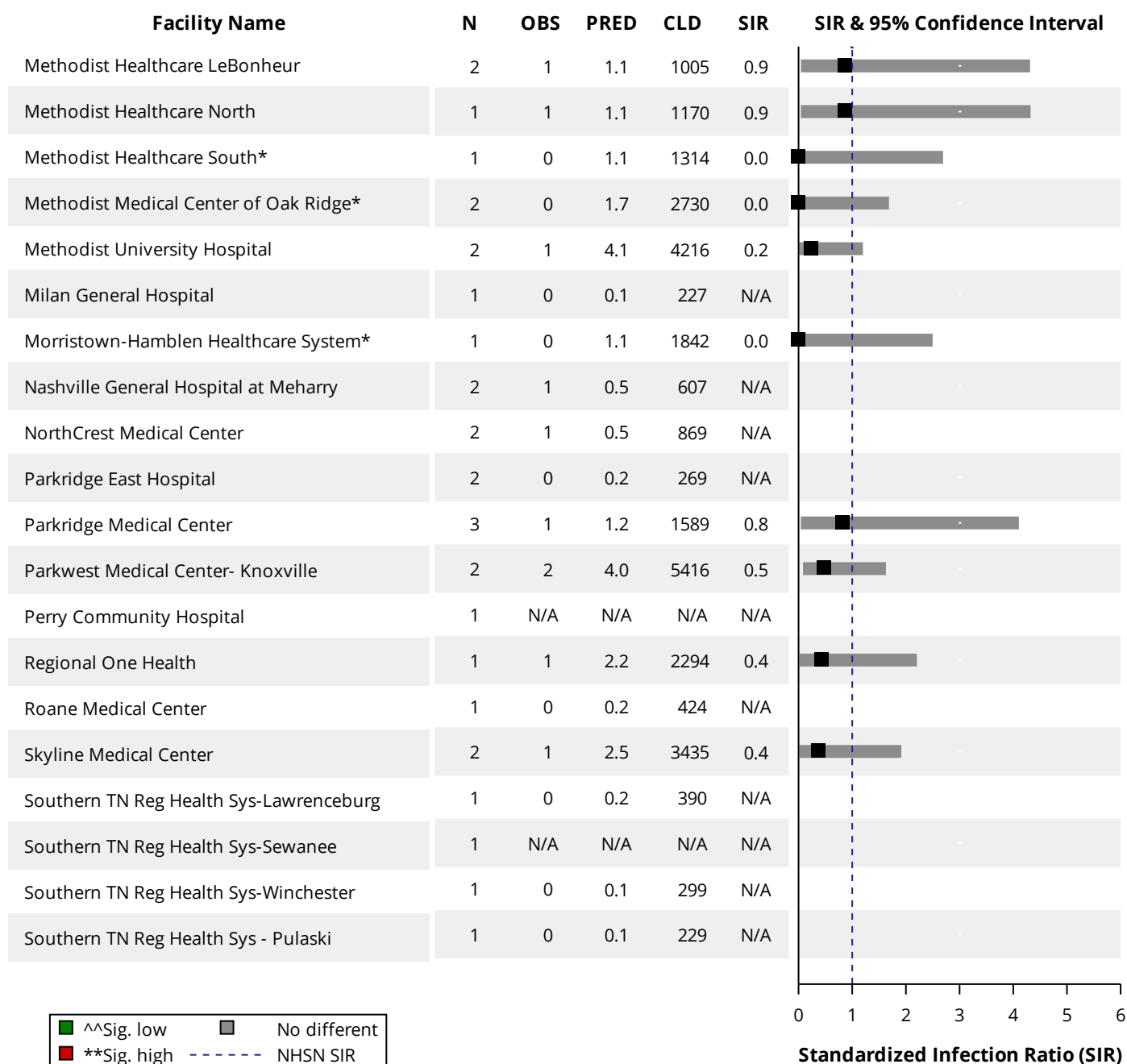
N/A = Data not shown for facilities with <50 central line days / SIR not calculated for facilities with <1 predicted infection

** Significantly higher than 2015 national baseline

^^ Significantly lower than 2015 national baseline

* Zero infections, but not statistically significant

Figure 23 (cont'd)



Data Reported as of June 01, 2020

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

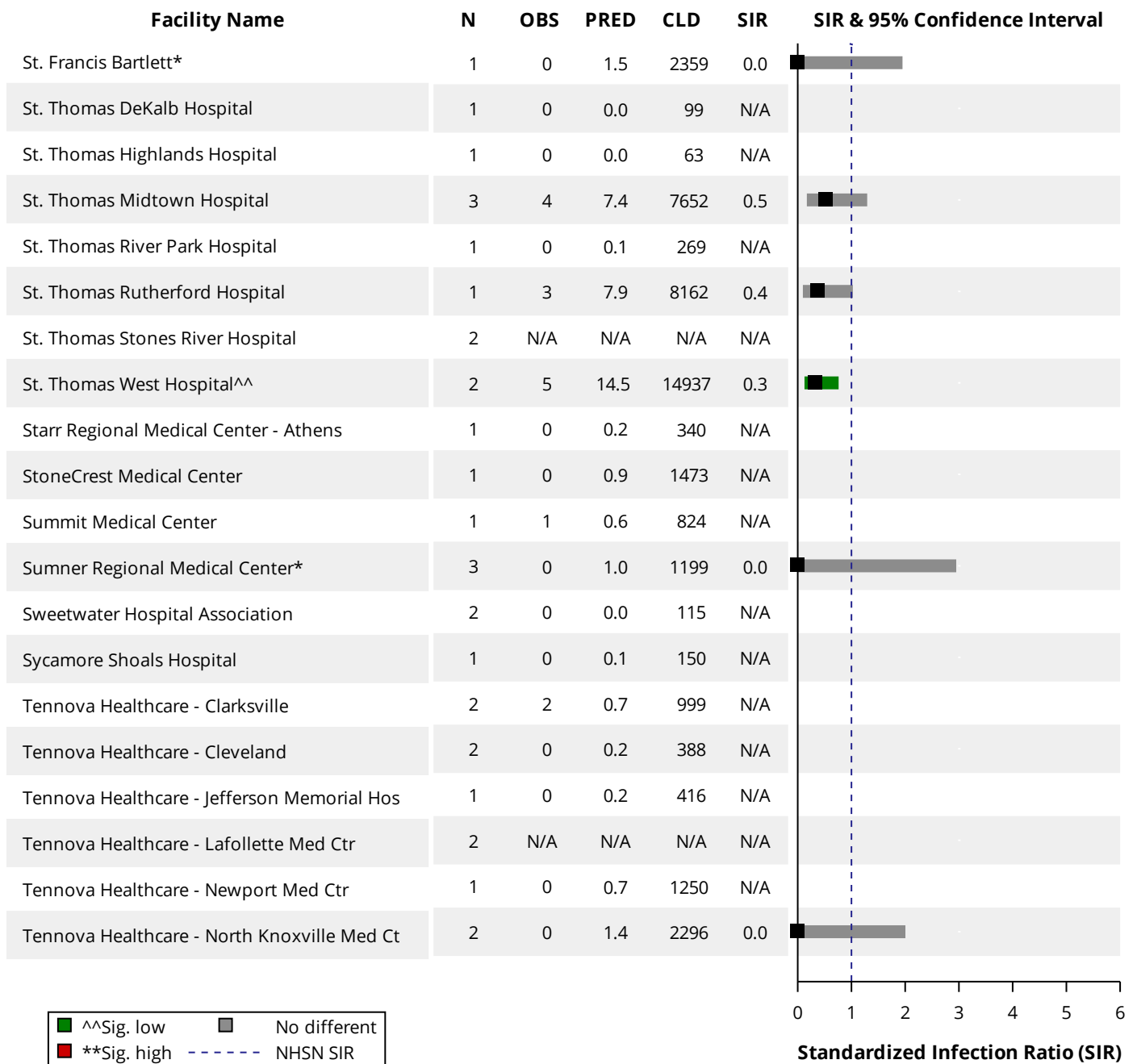
N/A = Data not shown for facilities with <50 central line days / SIR not calculated for facilities with <1 predicted infection

** Significantly higher than 2015 national baseline

^^ Significantly lower than 2015 national baseline

* Zero infections, but not statistically significant

Figure 23 (cont'd)



Data Reported as of June 01, 2020

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

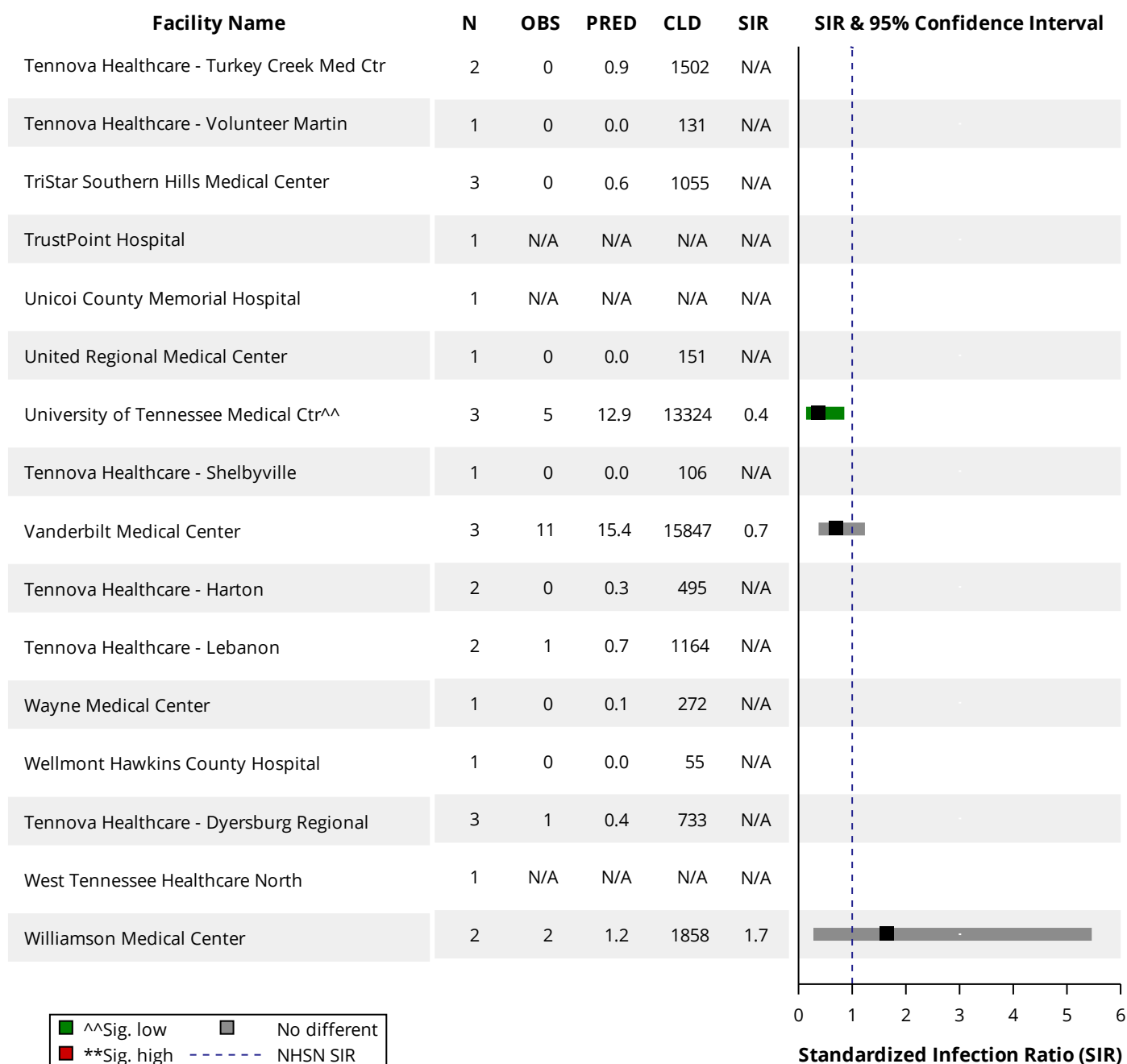
N/A = Data not shown for facilities with <50 central line days / SIR not calculated for facilities with <1 predicted infection

** Significantly higher than 2015 national baseline

^^ Significantly lower than 2015 national baseline

* Zero infections, but not statistically significant

Figure 23 (cont'd)



Data Reported as of June 01, 2020

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 2019: 9

Total number of facilities reporting from January-December 2020: 9

Unadjusted Rates (Figure 24)

- From January-December 2019, the overall unadjusted CLABSI rate per 1,000 line-days for Tennessee LTACs remained stable with a high of 1.06 and a low of 0.89. The overall 2019 CLABSI rate was 1.00 per 1,000 line-days.
- From January-December 2020, the overall unadjusted CLABSI rate per 1,000 line-days for Tennessee LTACs fluctuated from a high of 1.04 and a low of 0.27. The overall 2020 CLABSI rate was 0.64 per 1,000 line-days.

SIRs by Quarter (Figure 25)

- From Q1-2019 through Q1-2020, the overall CLABSI SIR for Tennessee LTACs remained relatively stable reporting SIRs ranging from 0.77 to 0.89 as compared to the national NHSN baseline data from 2015. Q2 and Q3 of 2020 saw significantly better overall CLABSI SIR results for Tennessee LTACs with Q2-2020 reporting an SIR of 0.32 and an SIR of 0.22 in Q3-2020. There was a rise in LTAC overall SIR to 0.73 for Q4-2020. Throughout 2019 and 2020, Tennessee LTACs were above the U.S. Department of Health and Human Services' [National Action Plan to Prevent Healthcare-Associated Infections](#)¹⁰ 2020 prevention target of SIR = 0.50.

Key Percentiles for Tennessee SIRs (Table 13, Table 14)

- The overall CLABSI SIR across all reporting LTACs in Tennessee from January-December 2019 was not statistically significantly different from the national SIR of 1 (SIR=0.85; 95% CI: 0.61, 1.16). From January-December 2019, the median facility-specific SIR was 0.92, indicating that half of all reporting Tennessee LTACs with at least 1 predicted infection had an SIR at or above 0.92.
- The overall CLABSI SIR across all reporting LTACs in Tennessee for the 2020 year was statistically significantly lower than the national SIR of 1 (SIR=0.52; 95% CI: 0.33, 0.80). From January-December 2020, the median facility-specific SIR was 0.59, indicating that half of all reporting Tennessee LTACs with at least 1 predicted infection had an SIR at or above 0.59.

¹⁰ <http://www.hhs.gov/ash/initiatives/hai/actionplan/>

January-December 2020, the median facility-specific SIR was 0.59, indicating that half of all reporting Tennessee LTACs with at least 1 predicted infection had an SIR at or above 0.59.

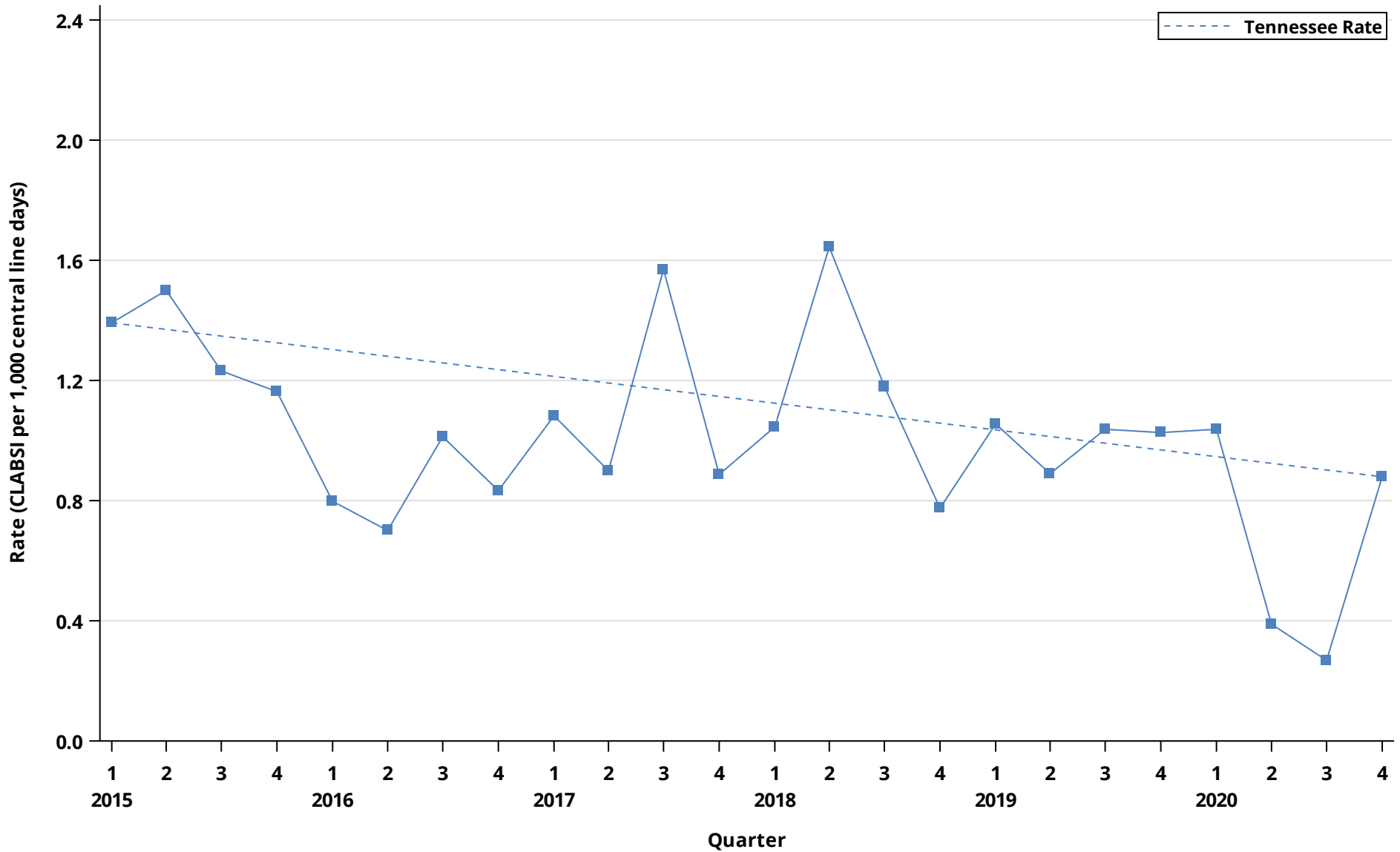
Microorganisms Associated with CLABSIs in LTACs (Figure 26, Figure 27)

- Among the 45 pathogens isolated from 39 LTAC CLABSIs in 2019, the most common pathogens were *Candida* species (29%), *Staphylococcus aureus* (24%), and *Enterococcus* species (20%). Of all pathogens isolated, Methicillin-Resistant *S. aureus* (MRSA) accounted for 18%, vancomycin-resistant *Enterococcus* (VRE) for 13% and there was a single Carbapenem-resistant *Acinetobacter* isolate.
- Among the 21 pathogens isolated from 19 LTAC CLABSIs in 2020, the most common pathogens were *Enterococcus* species (33%) and coagulase-negative *Staphylococcus* species (19%). Vancomycin-resistant *Enterococcus* (VRE) accounted for 14% and Methicillin-Resistant *S. aureus* (MRSA) accounted for 10% of total positive isolates.

Facility-Specific SIRs (Figure 28, Figure 29)

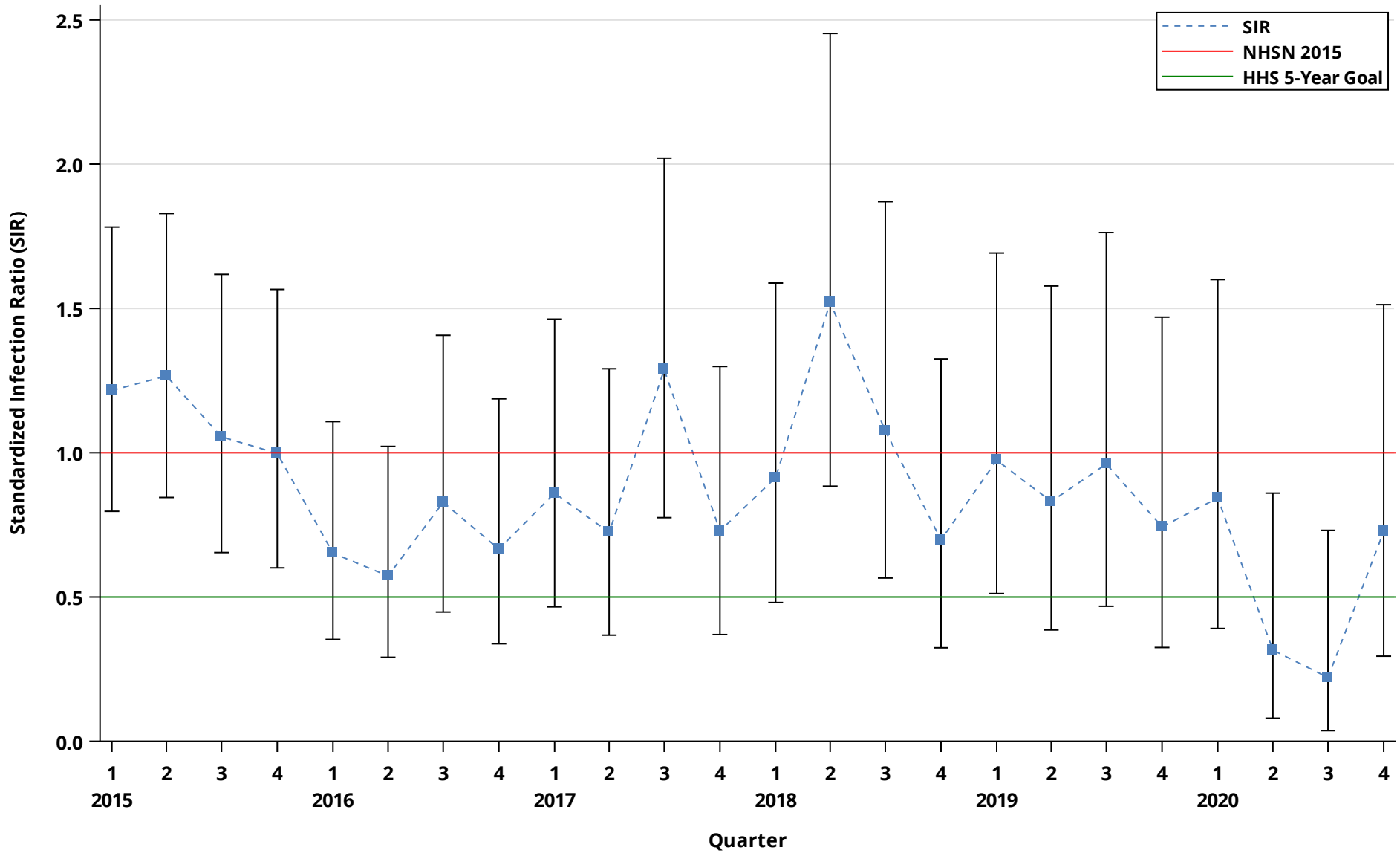
- A single LTAC CLABSI SIR per facility is displayed in [Figure 28](#) and [Figure 29](#). The bar representing the confidence interval is green if the CLABSI SIR was significantly lower than the national 2015 SIR of 1, and red if the SIR was significantly higher than 1. Some LTACs reported zero CLABSIs (indicated with an asterisk), although the SIR may not be statistically significant due to a relatively small number of central line-days.
- In 2020, two facilities had a LTAC CLABSI SIR that was statistically significantly lower than the 2015 national baseline SIR of 1 while there were none in 2019. In neither 2019 nor 2020 did any facilities have a CLABSI SIR that was statistically significantly higher than the baseline.

Figure 24: Crude (Unadjusted) Rate of Central Line-Associated Bloodstream Infections (CLABSIs) in Long-term Acute Care (LTAC) Facilities by Quarter, Tennessee, 01/01/2015–12/31/2020 [Reference standard: National Healthcare Safety Network (NHSN), 2015]



Data Reported as of June 01, 2021

Figure 25: Standardized Infection Ratios (SIR) for Central Line-Associated Bloodstream Infections (CLABSI) in Long-term Acute Care (LTAC) Facilities by Quarter, Tennessee, 01/01/2015–12/31/2020 [Reference standard: National Healthcare Safety Network (NHSN), 2015]



Data Reported as of August 16, 2021

Table 13: 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, 01/01/2019–12/31/2020

									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	2020	9	29,706	19	36.27	0.52	0.33	0.80	9	2	22%	0	0%	0.00	0.00	0.59	0.96	1.26	
	2019	9	36,856	37	43.36	0.85	0.61	1.16	9	0	0%	0	0%	0.22	0.55	0.92	0.99	1.50	

Data reported as of June 01, 2020

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 14: 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, 01/01/2019–12/31/2020

STATE	YEAR	No.	CLABSI	CL DAYS	CLABSI Rate*	Patient Days	DU Ratio
Tennessee	2020	10	76	118,824	0.64	384,928	0.31
	2019	10	148	147,424	1.00	378,196	0.39

Data reported as of June 01, 2020

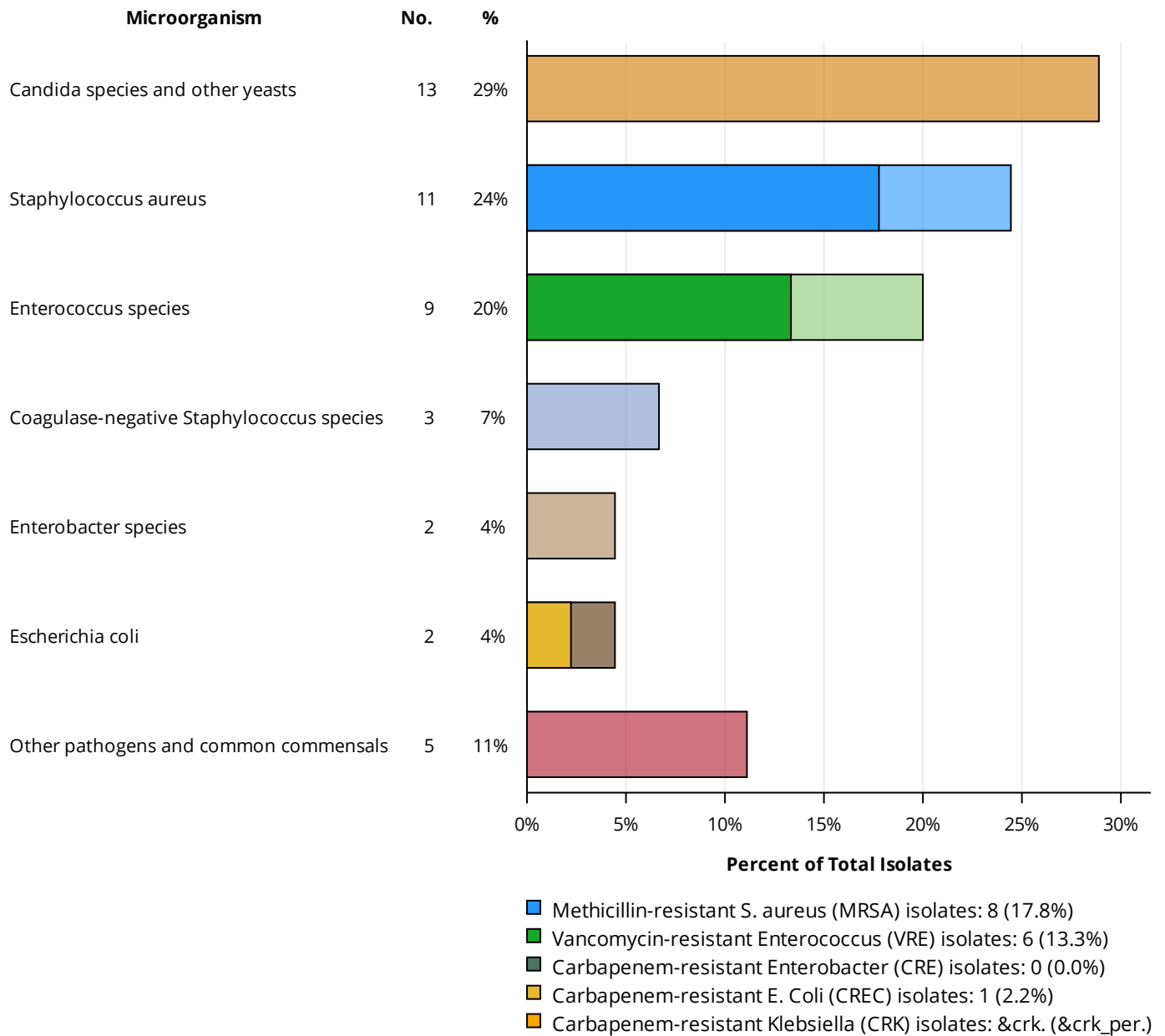
No. = number of facilities; CLABSI = number of observed CLABSI; CL Days = central line days.

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

*Per 1,000 central line days

Figure 26: Microorganisms Identified in Central Line-Associated Bloodstream Infections (CLABSIs) in Long-term Acute Care (LTAC) Facilities, Tennessee, 01/01/2019–12/31/2019

Number of isolates=45; Number of events=39



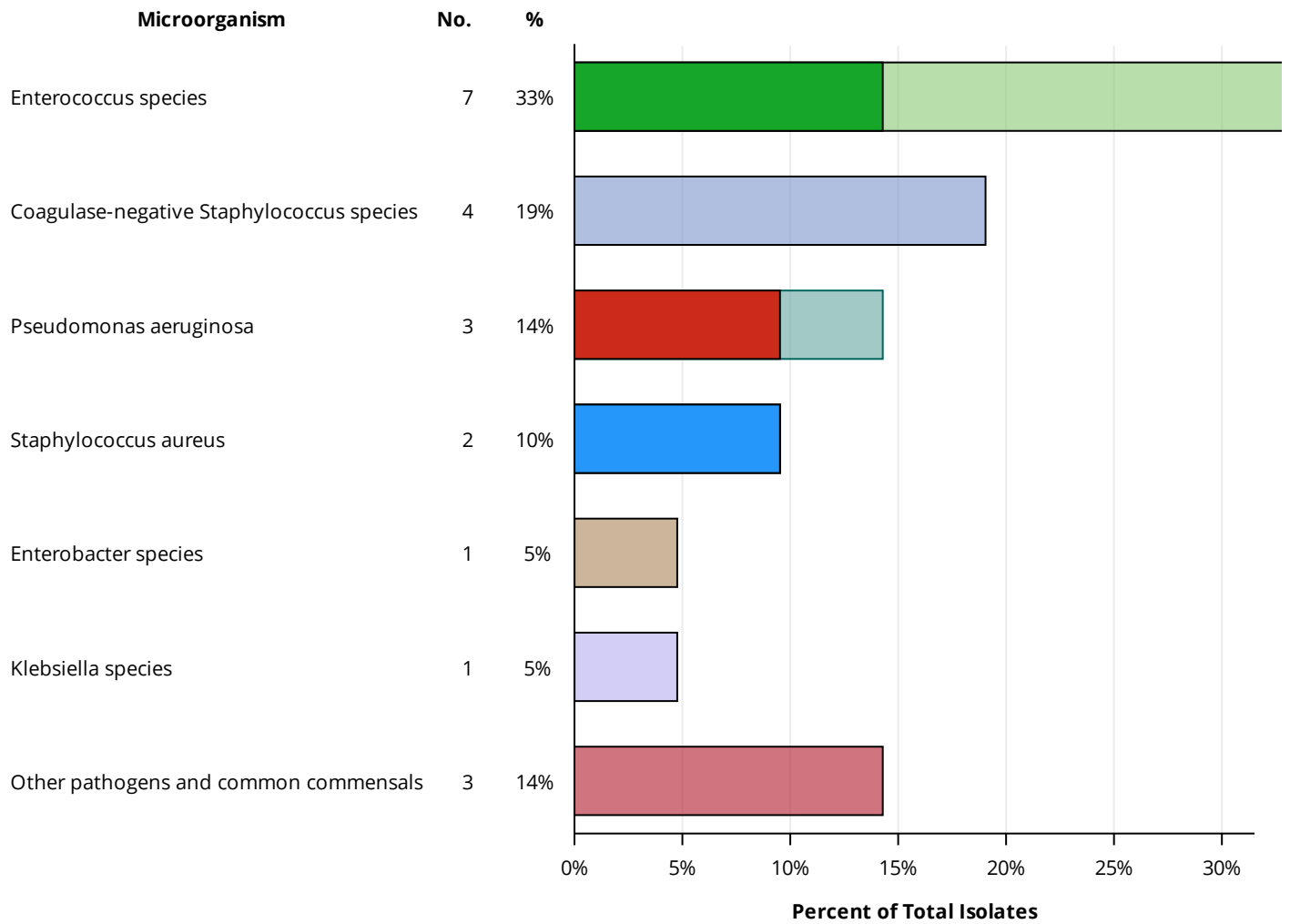
Data reported as of June 01, 2021

Other common commensals =

Other pathogens = *Bacteroides* spp., *Haemophilus* spp., Other *Staphylococcus* spp., *Proteus* spp., *Serratia* spp.

Figure 27: Microorganisms Identified in Central Line-Associated Bloodstream Infections (CLABSIs) in Long-term Acute Care (LTAC) Facilities, Tennessee, 01/01/2020–12/31/2020

Number of isolates=21; Number of events=19



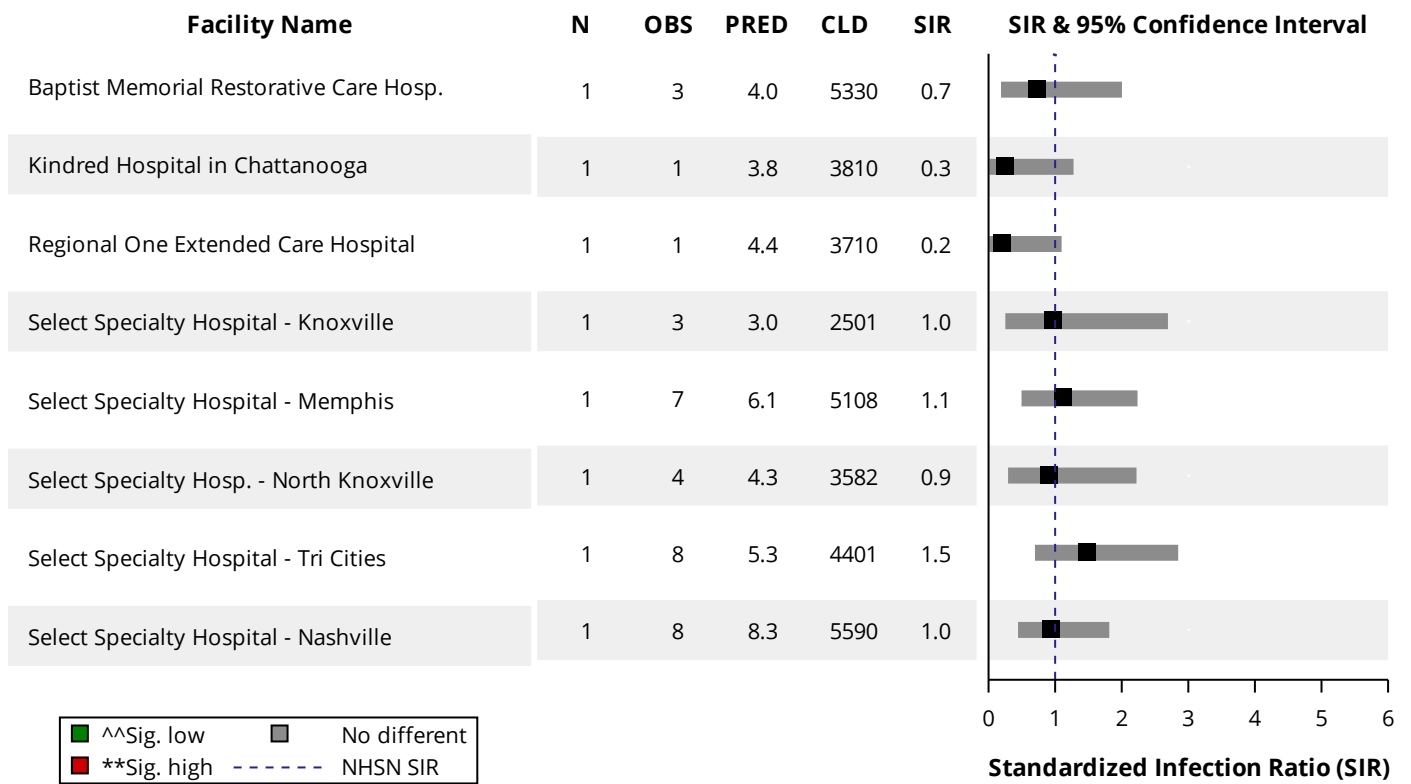
- Methicillin-resistant *S. aureus* (MRSA) isolates: 2 (9.5%)
- Vancomycin-resistant Enterococcus (VRE) isolates: 3 (14.3%)
- CR *P. aeruginosa* (CRPA) isolates: 2 (9.5%)
- Carbapenem-resistant Enterobacter (CRE) isolates: 0 (0.0%)
- Carbapenem-resistant *E. Coli* (CREC) isolates: &crec. (&crec_per.)
- Carbapenem-resistant *Klebsiella* (CRK) isolates: 0 (0.0%)

Data reported as of June 01, 2020

Other common commensals =

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

Figure 28: CLABSI Standardized Infection Ratio (SIR) for Long-term Acute Care (LTAC) Facilities, Tennessee, 01/01/2019 – 12/31/2019



Data Reported as of June 01, 2021

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)

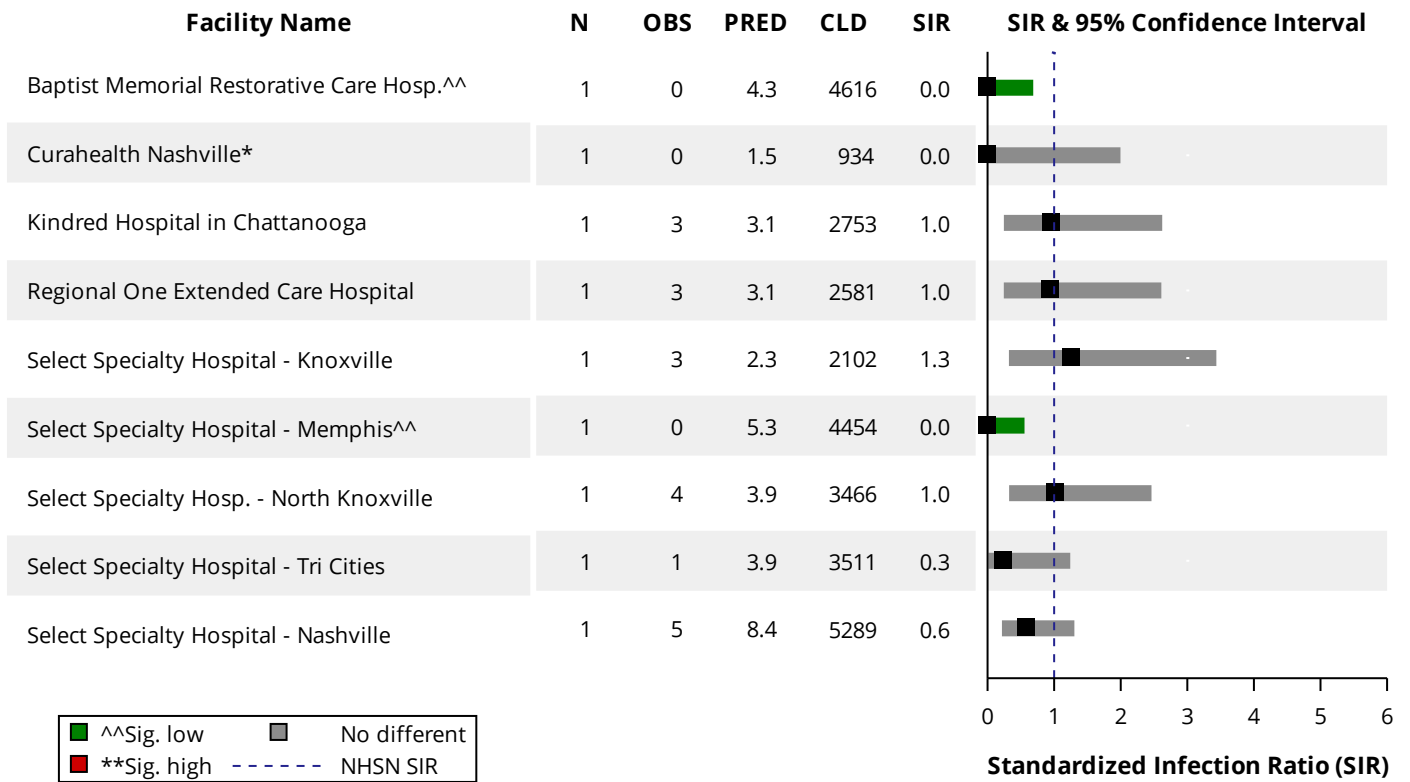
CLD = number of central line days

** Significantly higher than national baseline

^^ Significantly lower than national baseline

* Zero infections, but not statistically significant

Figure 29: CLABSI Standardized Infection Ratio (SIR) for Long-term Acute Care (LTAC) Facilities, Tennessee, 01/01/2020 – 12/31/2020



Data Reported as of June 01, 2020

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 (UTI), 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](#)¹¹).

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](#)¹², 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 2013, NHSN added a new rule that an indwelling urinary catheter must be both in place for > 2 days before all elements of the UTI criterion were first present together, and the urinary catheter must be in place the day of the event or the day before in order to meet the definition of a CAUTI. Criterion elements must occur within the Infection Window Period (IWP) as defined as the 7 days during which all site-specific infection criteria must be met. In January 2015, NHSN added a new rule to define an eligible urine culture 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.

¹¹ http://www.cdc.gov/hai/pdfs/uti/CA-UTI_tagged.pdf

¹² <http://www.cdc.gov/nhsn/PDFs/pscManual/7pscCAUTIcurrent.pdf>

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 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 period. CDC used 2015 HAI data to create the 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 period used to establish the baseline, or reference points, varied among the different HAI measures. Thus, in TN HAI reports before 2015, the number of predicted infections was estimated based on those original baselines. Therefore, the data in this report are not comparable with HAI reports before 2015. 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](#).¹³

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

¹³ <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 2019: 82

Total number of hospitals reporting from January-December 2020: 81

SIRs by Quarter (Figure 30)

- In all quarters of 2019 and 2020 except Q3-2019, the overall CAUTI SIR in Tennessee adult and pediatric ICUs was statistically lower than the predicted SIR of 1.0 based on the 2015 baseline. The Q1-2019 through Q3-2019 period resulted in SIRs of 0.76-0.80 while there was an observed decrease in the period Q4-2019 and Q2-2020 with SIRs ranging from 0.51 to 0.64. There was a subsequent increase in adult and pediatric ICU CAUTI SIRs in quarters 3 and 4 of 2020 to the same range observed in the Q1-2019 through Q3-2019 period. Tennessee's adult and pediatric ICUs achieved the U.S. Department of Health and Human Services' [National Action Plan to Prevent Healthcare-Associated Infections](#)¹⁴ 2020 prevention target of SIR = 0.75 in Q2 of 2020.

SIR by Unit Type (Figure 31)

- In 2019, CAUTI SIRs remained highest in the pediatric medical-surgical critical care locations (SIR 2.61). Medical, medical-surgical, neurologic, surgical cardiothoracic, trauma, and surgical critical care locations all had SIRs that were statistically significantly lower than the 2015 national baseline.
- In 2020, no ICU unit type has a statistically greater number of CAUTIs than predicted based on the 2015 baseline. Burn, medical, medical-surgical, neurologic and neurosurgical, surgical cardiothoracic, and surgical critical care locations all had SIRs that were statistically significantly lower than the 2015 national baseline.

Key Percentiles for Tennessee SIRs (Table 15, Table 16)

- The overall CAUTI SIR across all reporting adult and pediatric ICUs in Tennessee from January-December 2019 was 0.74 (95% CI: 0.65, 0.83). This SIR indicates that the number of CAUTIs in ICUs was statistically significantly lower than the national sir of 1. Adult and pediatric ICUs in Tennessee in 2020 also had a statistically lower CAUTI SIR than predicted from the 2015 baseline with an SIR of 0.69 (95% CI: 0.61:0.78)

¹⁴ <http://www.hhs.gov/ash/initiatives/hai/actionplan/>

- From January-December 2019, the median (50th percentile) facility-specific SIR was 0.48, indicating that half of all reporting Tennessee hospitals with at least 1 predicted infection had an SIR at or below 0.48. From January-December 2020, the median (50th percentile) facility-specific SIR was 0.41.

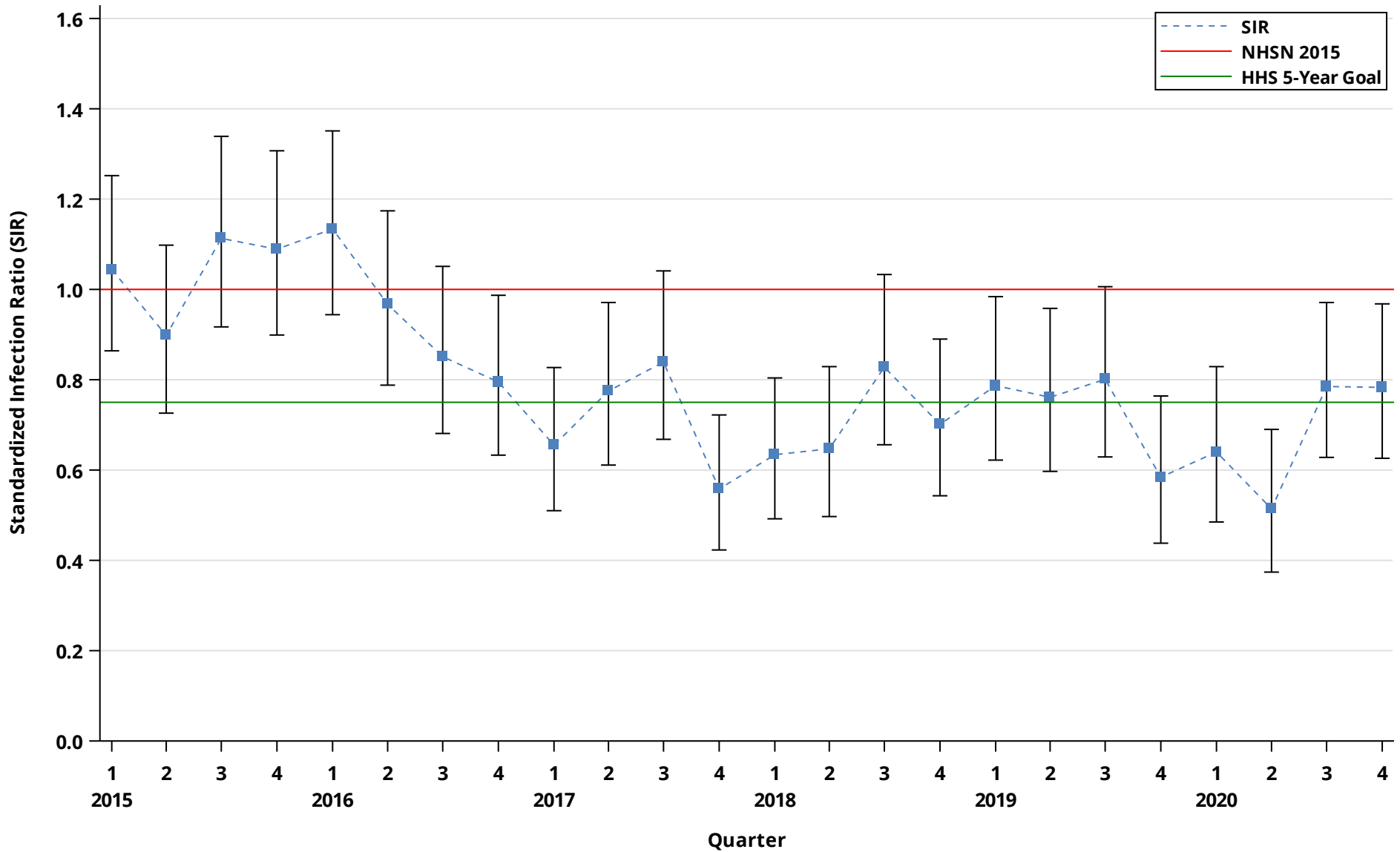
Microorganisms Associated with CAUTIs in Adult and Pediatric ICUs (Figure 32, Figure 33)

- Among the 286 pathogens isolated from 262 CAUTIs in 2019, the most common pathogens were *Escherichia coli* (33%), *Enterococcus* species (15%), and *Pseudomonas aeruginosa* (14%). Vancomycin-resistant *Enterococcus* (VRE) and Carbapenem-resistant *P. aeruginosa* both accounted for 3% while methicillin-Resistant *S. aureus* (MRSA) accounted for 1% of total positive isolates.
- Among the 275 pathogens isolated from 257 CAUTIs in 2020, the most common pathogens were *Escherichia coli* (40%), *Enterococcus* species (16%), and *Klebsiella* species (13%). Vancomycin-resistant *Enterococcus* (VRE) for 3% and Carbapenem-resistant *P. aeruginosa* accounted for 1.5% of total positive isolates.

Facility-Specific SIRs (Figure 34, Figure 35)

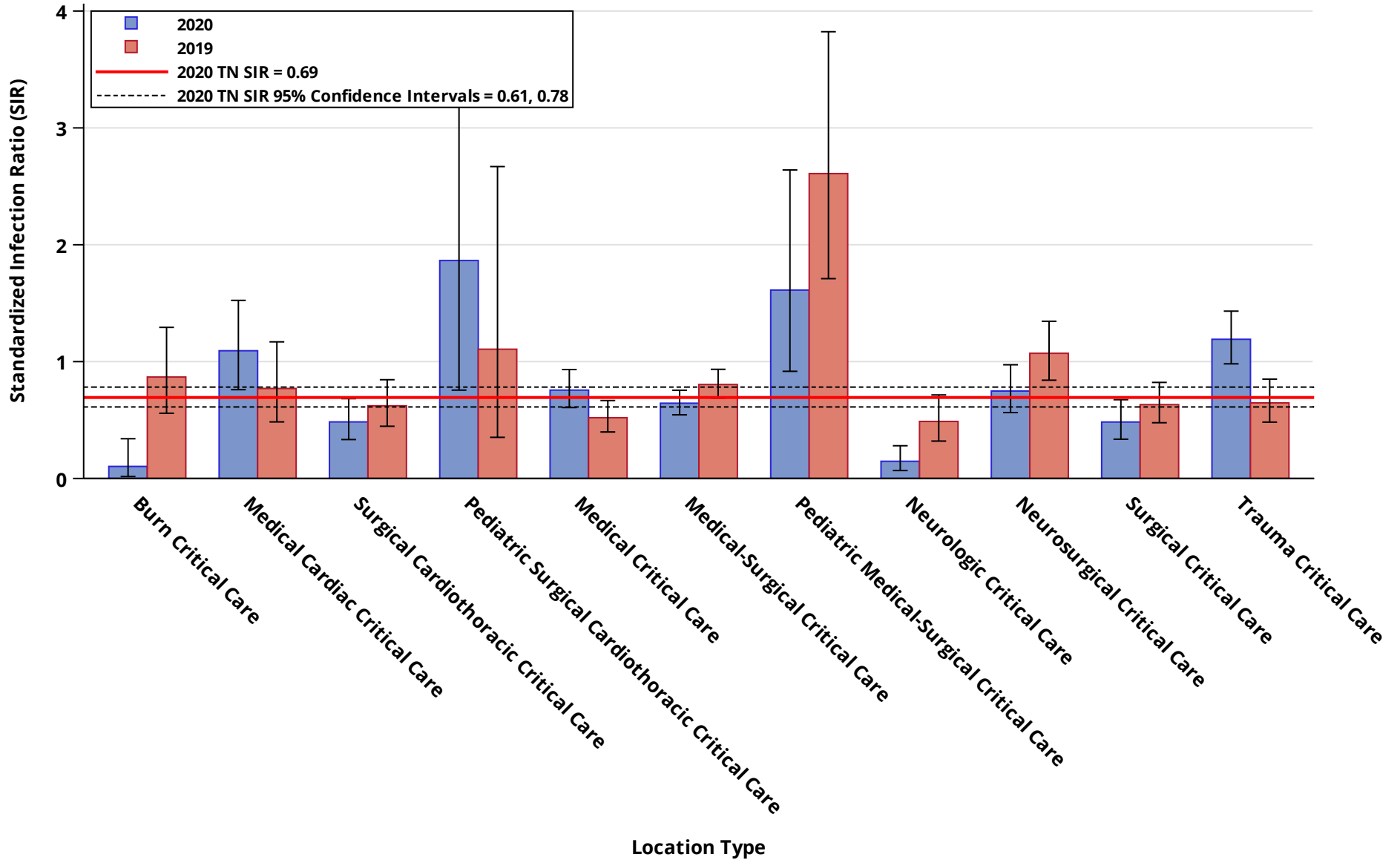
- A single CAUTI SIR that accounts for all reporting adult/pediatric ICUs in each facility is displayed in [Figure 34](#) and [Figure 35](#). The bar representing the confidence interval is green if the CAUTI SIR was significantly lower than the national SIR of 1 for 2015 and red if the CAUTI SIR was 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 2019, 6 Tennessee facilities had a CAUTI SIR statistically significantly lower than the 2015 national baseline SIR of 1 and zero facilities had CAUTI SIRs statistically significantly higher than the baseline SIR. In 2020, 11 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 30: Standardized Infection Ratios (SIR) for Catheter-Associated Urinary Tract Infections (CAUTIs) for Adult and Pediatric Intensive Care Units (ICUs) by Quarter, Tennessee, 01/01/2015–12/31/2020 [Reference standard: National Healthcare Safety Network (NHSN), 2015]



Data Reported as of June 01, 2021

Figure 31: Standardized Infection Ratios (SIRs) for Catheter-Associated Urinary Tract Infections (CAUTIs) by Intensive Care Unit (ICU) Type, Tennessee, 2020 [Reference standard: National Healthcare Safety Network (NHSN), 2015]



Data Reported as of June 01, 2021

Table 15: 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, 01/01/2019–12/31/2020

									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	2020	81	267,480	257	370.76	0.69	0.61	0.78	48	11	23%	1	2%	0.00	0.07	0.41	0.84	1.31	
	2019	82	257,201	262	356.36	0.74	0.65	0.83	43	6	14%	0	0%	0.00	0.00	0.48	0.83	1.10	

Data reported as of June 01, 2021

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 16: 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, 01/01/2019-12/31/2020

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	2020	3	5,672	2	19.41	0.10	0.02	0.34	3	N/A	N/A	N/A	N/A	N/A
	2019	3	7,404	22	25.33	0.87	0.56	1.29	3	N/A	N/A	N/A	N/A	N/A
Medical Cardiac Critical Care	2020	8	19,980	32	29.29	1.09	0.76	1.52	6	0.00	0.00	1.33	2.02	2.72
	2019	8	19,746	20	25.96	0.77	0.48	1.17	7	0.00	0.00	0.45	1.15	2.49
Medical Critical Care	2020	29	107,028	84	111.08	0.76	0.61	0.93	20	0.00	0.14	0.72	1.08	1.75
	2019	31	104,730	58	111.56	0.52	0.40	0.67	16	0.00	0.00	0.16	0.85	1.10
Medical-Surgical Critical Care	2020	55	228,392	146	226.81	0.64	0.55	0.76	31	0.00	0.00	0.42	0.79	1.74
	2019	55	206,590	164	204.05	0.80	0.69	0.93	28	0.00	0.00	0.57	1.05	1.74
Neurologic Critical Care	2020	5	15,818	8	54.32	0.15	0.07	0.28	5	0.00	0.11	0.15	0.24	0.51
	2019	5	14,050	24	49.17	0.49	0.32	0.72	4	N/A	N/A	N/A	N/A	N/A
Neurosurgical Critical Care	2020	8	21,064	52	69.53	0.75	0.56	0.97	7	0.00	0.33	0.67	0.83	1.08
	2019	9	20,682	70	65.38	1.07	0.84	1.35	8	0.00	0.64	1.12	1.25	1.64
Pediatric Medical-Surgical Critical Care	2020	7	5,382	14	8.69	1.61	0.92	2.64	3	N/A	N/A	N/A	N/A	N/A
	2019	7	5,818	24	9.20	2.61	1.71	3.82	3	N/A	N/A	N/A	N/A	N/A
Pediatric Neurosurgical Critical Care	2020	2	180	0	0.34	.	.	.	.	N/A	N/A	N/A	N/A	N/A
	2019	2	446	0	0.84	.	.	.	.	N/A	N/A	N/A	N/A	N/A
Pediatric Surgical Cardiothoracic Critical Care	2020	3	3,144	6	3.22	1.87	0.76	3.88	2	N/A	N/A	N/A	N/A	N/A
	2019	3	3,510	4	3.62	1.11	0.35	2.67	2	N/A	N/A	N/A	N/A	N/A
Surgical Cardiothoracic Critical Care	2020	14	52,276	30	61.93	0.48	0.33	0.68	14	0.00	0.00	0.48	0.93	1.24
	2019	14	53,336	38	61.07	0.62	0.45	0.85	14	0.00	0.00	0.48	0.73	1.26
Surgical Critical Care	2020	9	40,782	32	66.21	0.48	0.34	0.67	9	0.00	0.36	0.48	0.58	0.77
	2019	11	49,040	52	82.29	0.63	0.48	0.82	11	0.13	0.22	0.63	1.22	1.23
Trauma Critical Care	2020	7	35,242	108	90.71	1.19	0.98	1.43	7	0.00	0.00	0.78	1.19	2.58
	2019	7	29,050	48	74.24	0.65	0.48	0.85	7	0.00	0.10	0.53	0.77	1.22

Data reported as of June 01, 2021

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

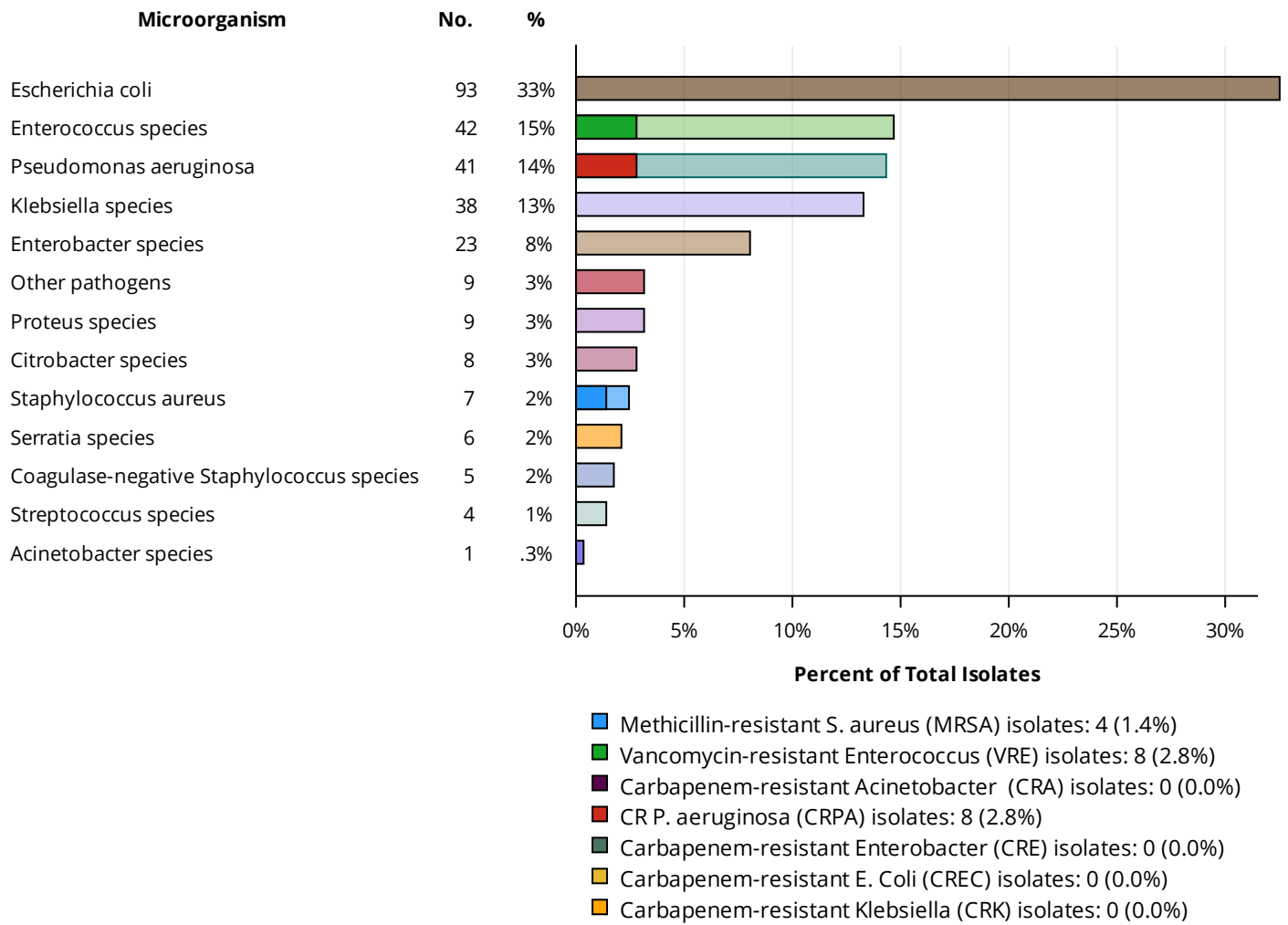
Key percentiles include units with at least one predicted infection

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

Figure 32: Microorganisms Identified in Catheter-Associated Urinary Tract (CAUTIs) in Adult and Pediatric Intensive Care Units, Tennessee, 01/01/2019–12/31/2019

Number of isolates=286; Number of events=262

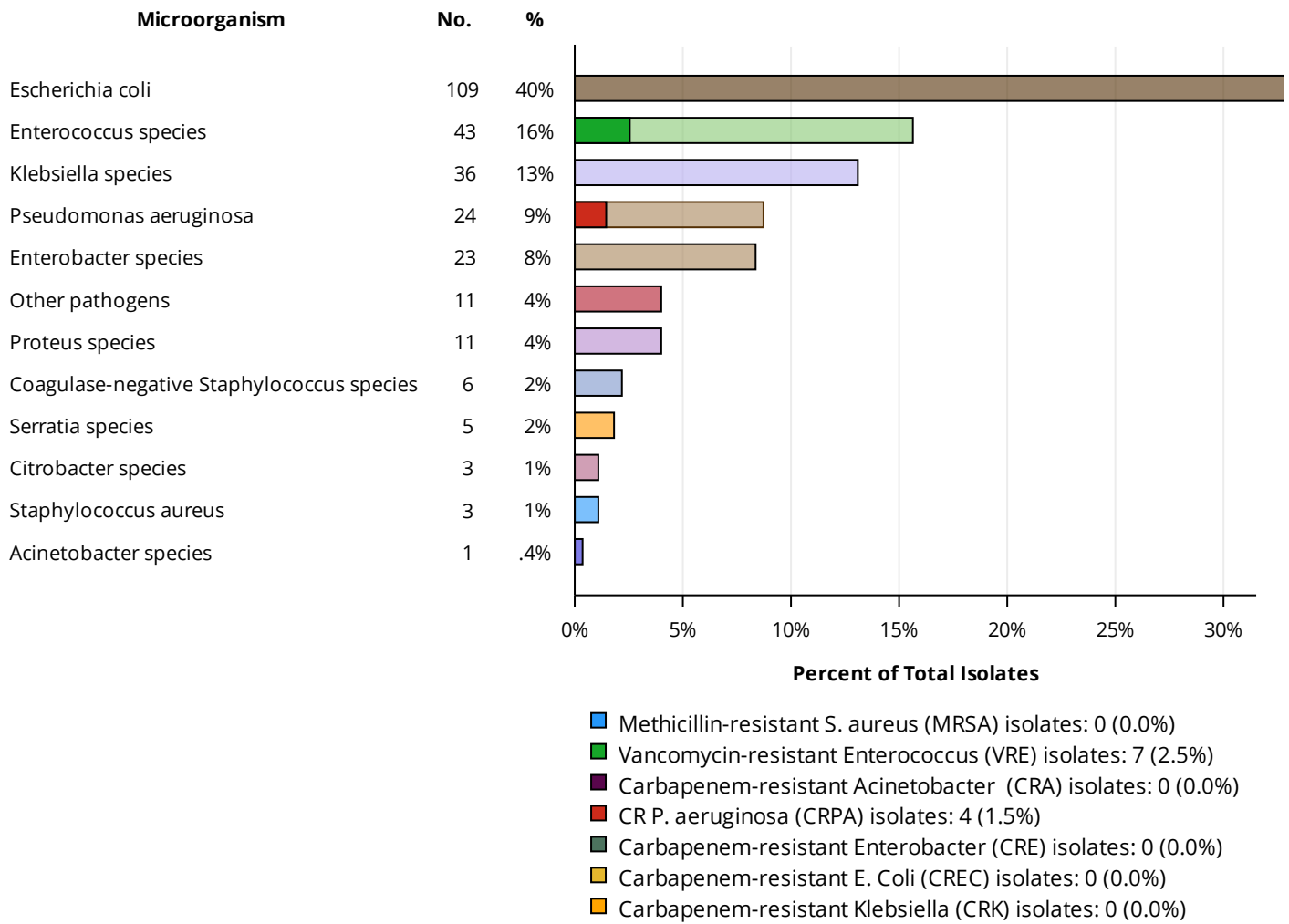


Data reported as of June 01, 2021

Other pathogens = *Corynebacterium* spp., *Escherichia* spp., *Morganella* spp., Other *Staphylococcus* spp., *Pantoea* spp., *Providencia* spp., *Raoultella* spp., *Stenotrophomonas* spp.

Figure 33: Microorganisms Identified in Catheter-Associated Urinary Tract (CAUTIs) in Adult and Pediatric Intensive Care Units, Tennessee, 01/01/2020–12/31/2020

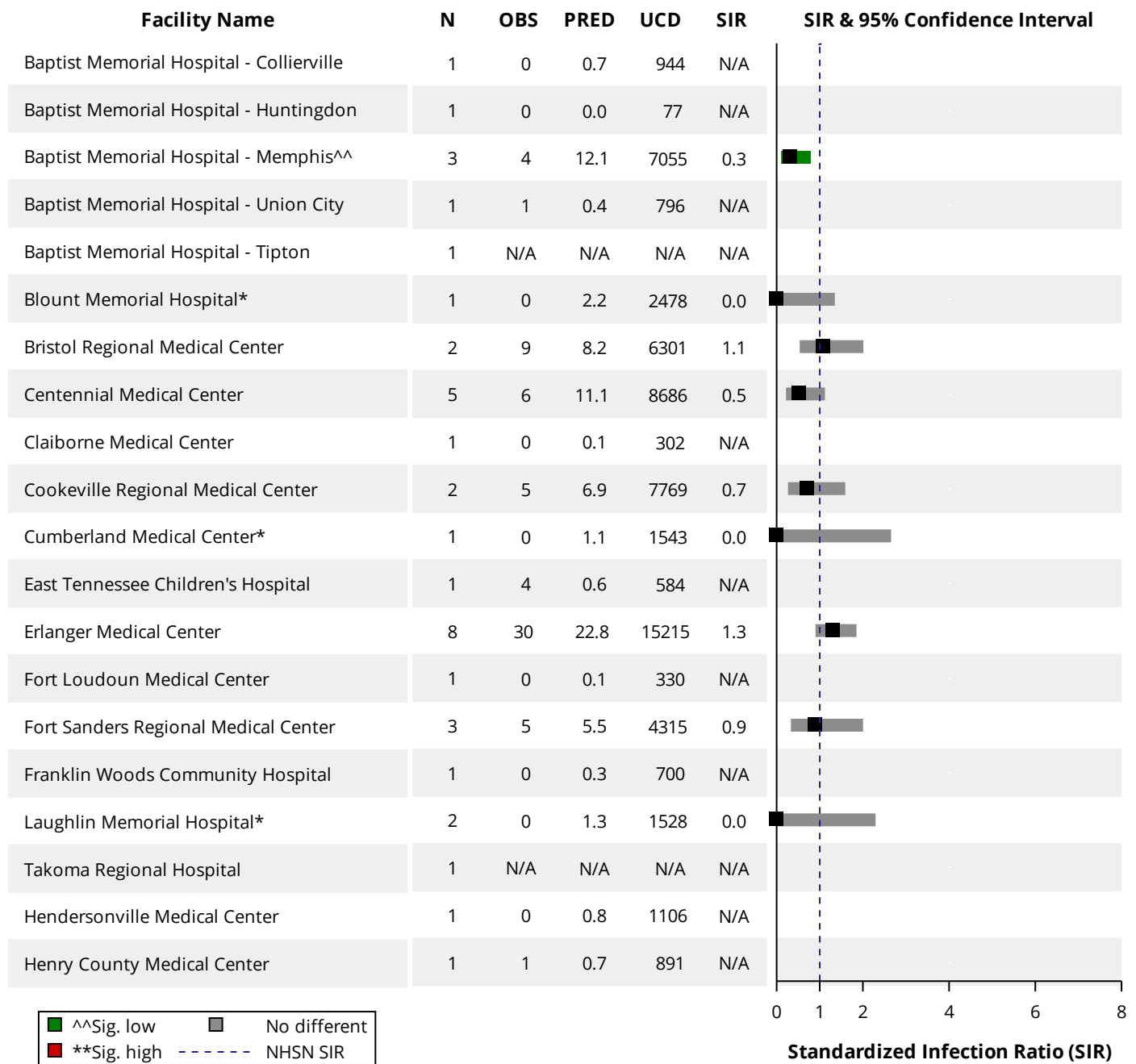
Number of isolates=275; Number of events=257



Data reported as of June 01, 2021

Other pathogens = Achromobacter spp., Burkholderia spp., Escherichia spp., Gram-negative spp., Hafnia spp., Lactobacillus spp., Morganella spp., Providencia spp., Raoultella spp., Streptococcus spp.

Figure 34: CAUTI Standardized Infection Ratio (SIR) for Adult and Pediatric Intensive Care Units in Acute Care Hospitals, Tennessee, 01/01/2019 – 12/31/2019



Data Reported as of June 01, 2021

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

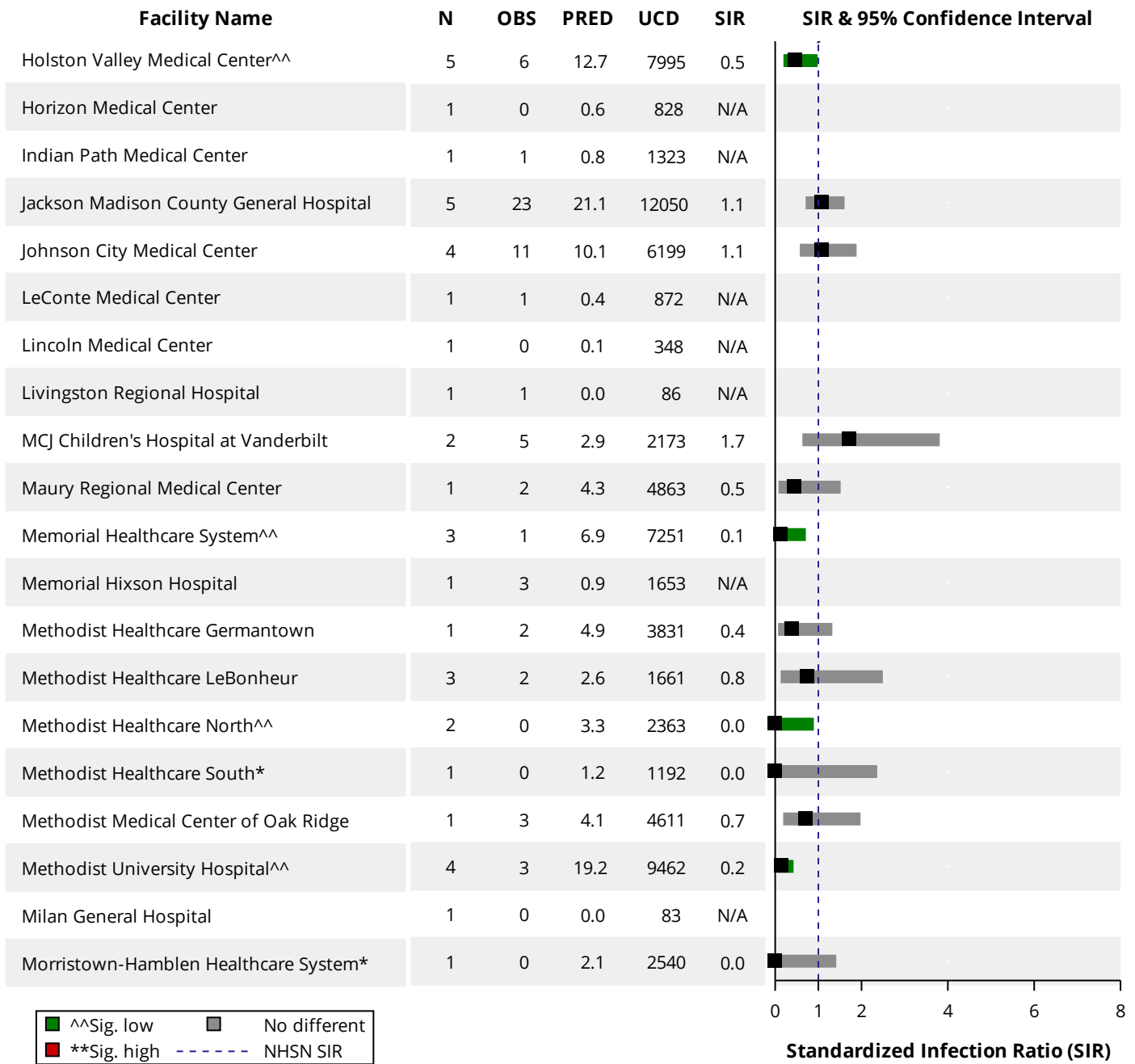
N/A = Data not shown for facilities with <50 urinary catheter days / SIR not calculated for facilities with <1 predicted infection

** Significantly higher than national baseline

^^ Significantly lower than national baseline

* Zero infections, but not statistically significant

Figure 34 (cont'd)



Data Reported as of June 01, 2021

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

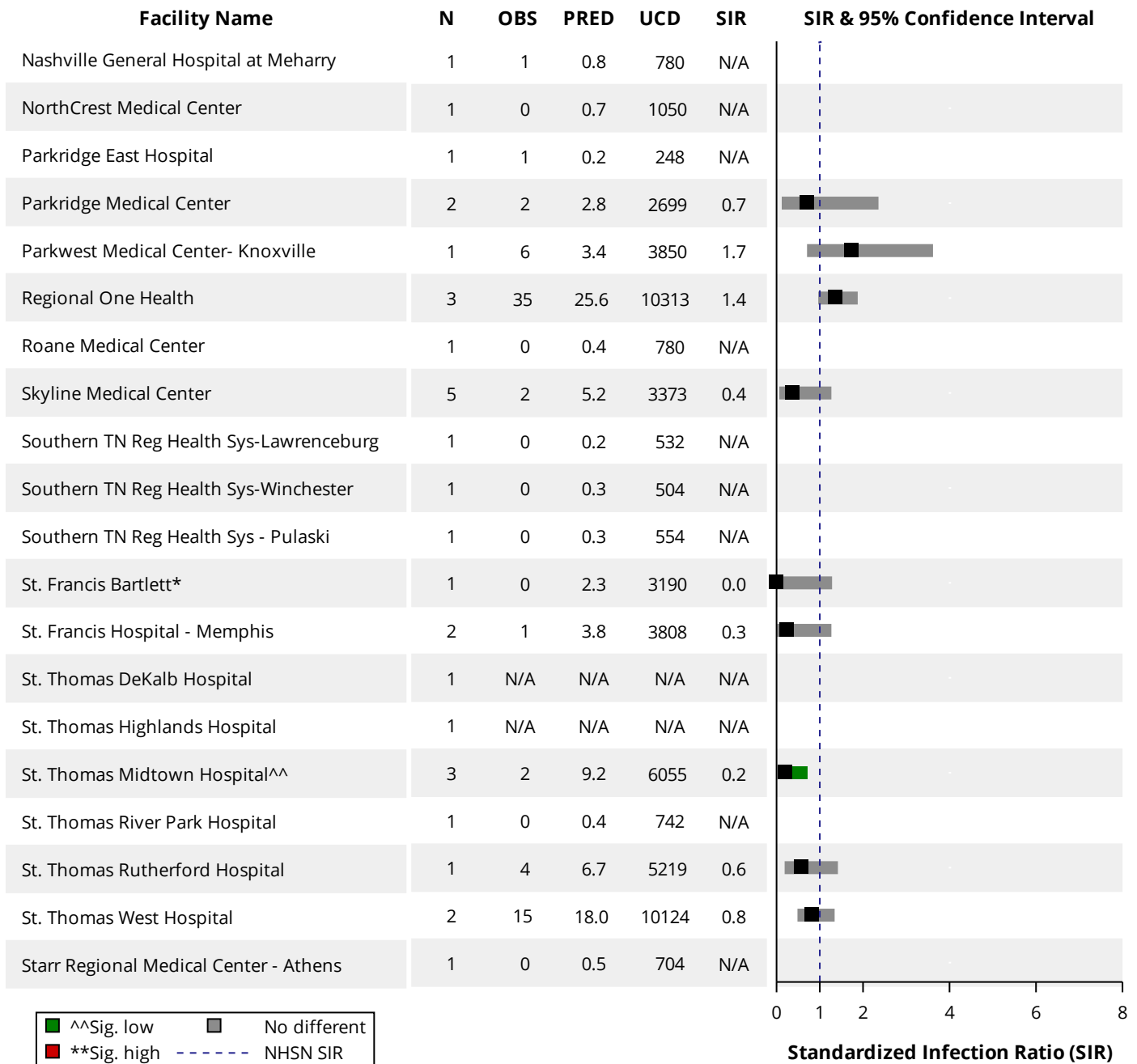
N/A = Data not shown for facilities with <50 urinary catheter days / SIR not calculated for facilities with <1 predicted infection

** Significantly higher than national baseline

^^ Significantly lower than national baseline

* Zero infections, but not statistically significant

Figure 34 (cont'd)



Data Reported as of June 01, 2021

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

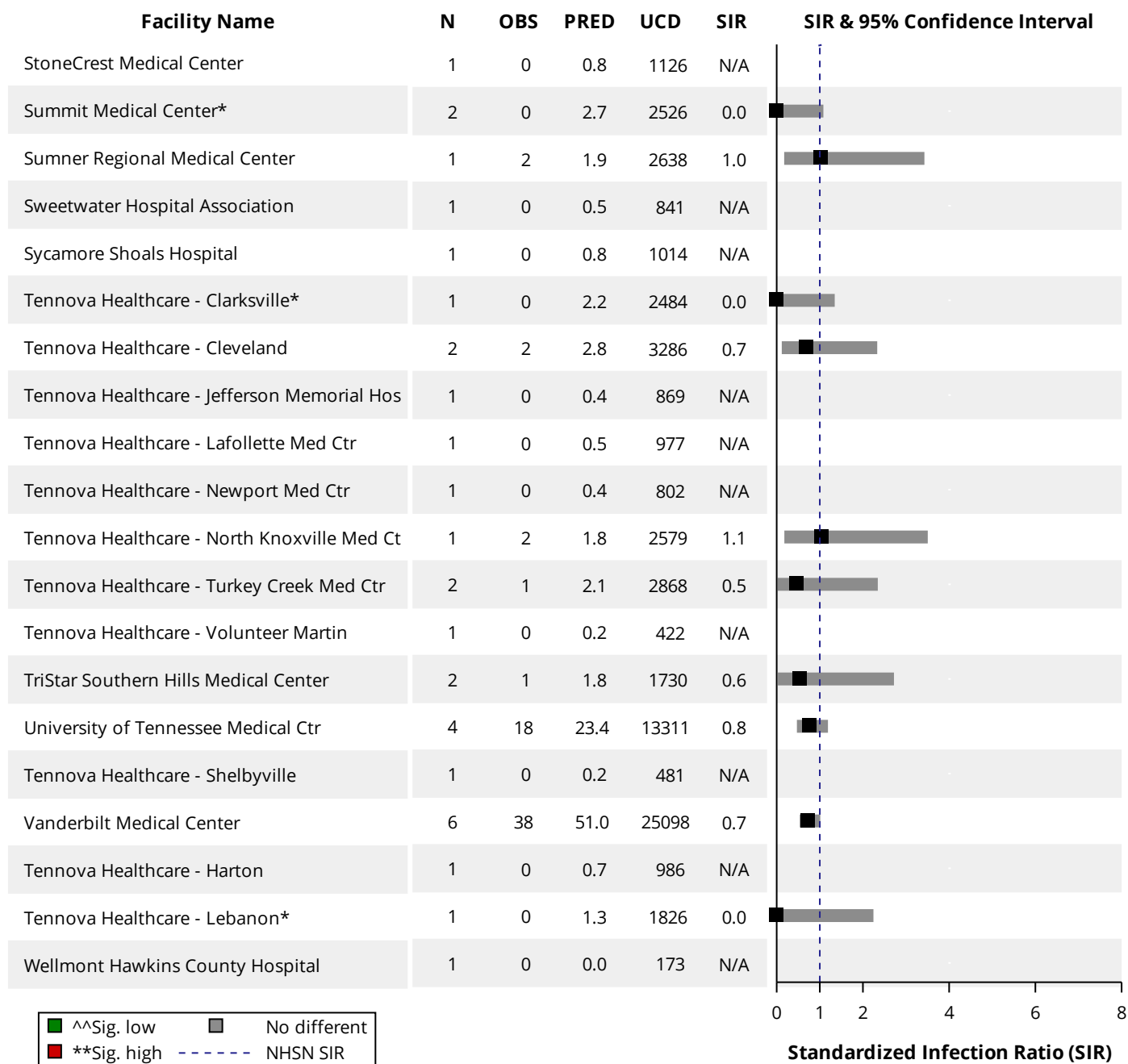
N/A = Data not shown for facilities with <50 urinary catheter days / SIR not calculated for facilities with <1 predicted infection

** Significantly higher than national baseline

^^ Significantly lower than national baseline

* Zero infections, but not statistically significant

Figure 34 (cont'd)



Data Reported as of June 01, 2021

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

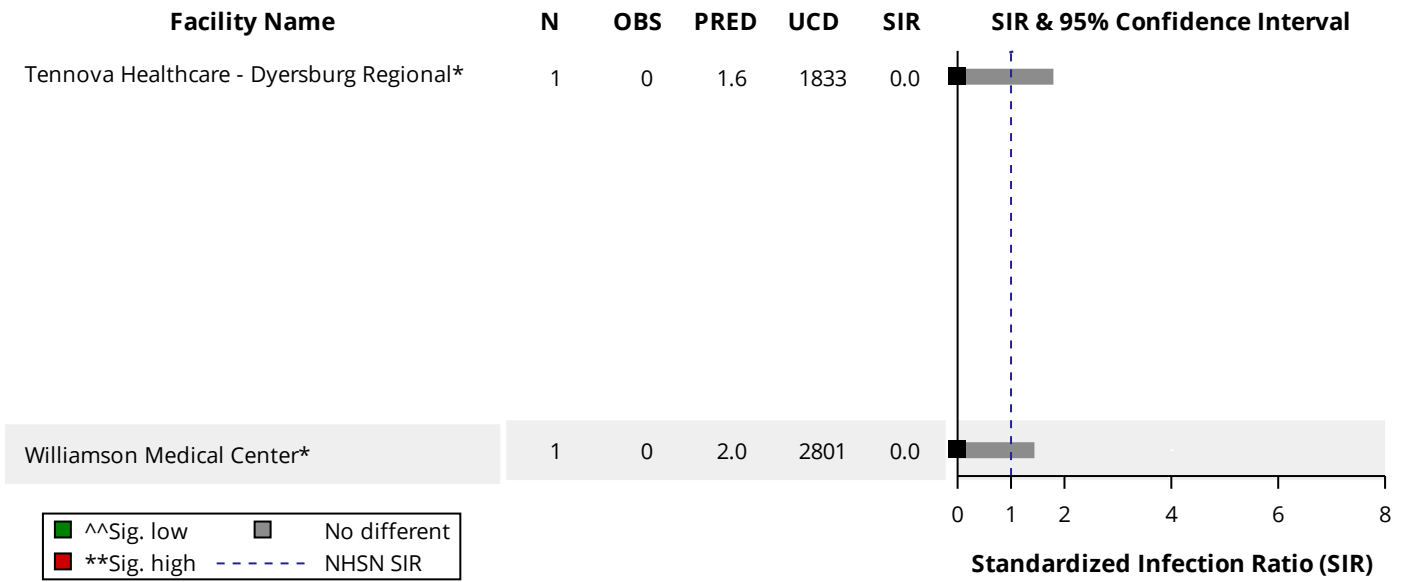
N/A = Data not shown for facilities with <50 urinary catheter days / SIR not calculated for facilities with <1 predicted infection

** Significantly higher than national baseline

^^ Significantly lower than national baseline

* Zero infections, but not statistically significant

Figure 34 (cont'd)



Data Reported as of June 01, 2021

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

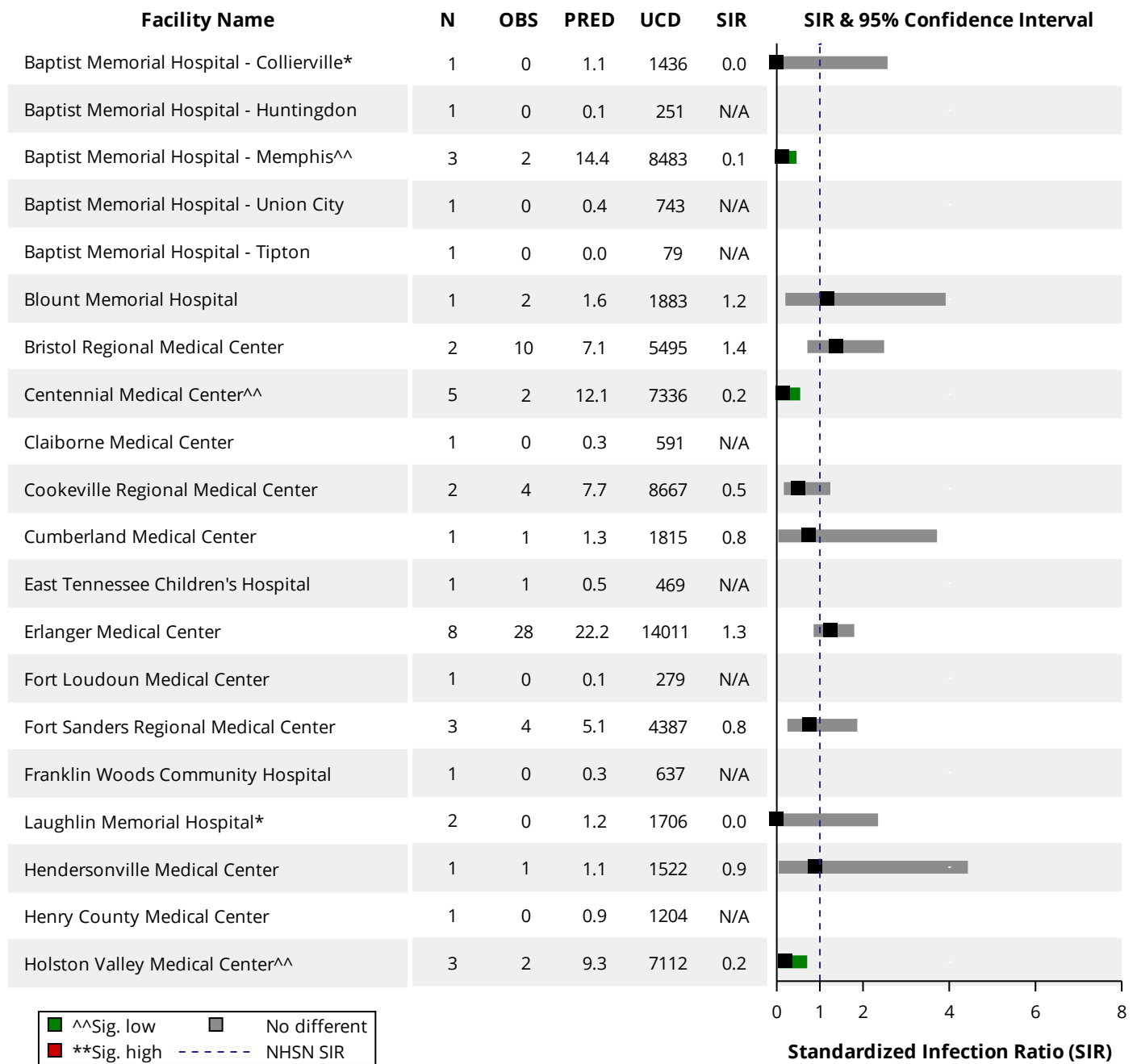
N/A = Data not shown for facilities with <50 urinary catheter days / SIR not calculated for facilities with <1 predicted infection

** Significantly higher than national baseline

^^ Significantly lower than national baseline

* Zero infections, but not statistically significant

Figure 35: CAUTI Standardized Infection Ratio (SIR) for Adult and Pediatric Intensive Care Units in Acute Care Hospitals, Tennessee, 01/01/2020 – 12/31/2020



Data Reported as of June 01, 2021

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

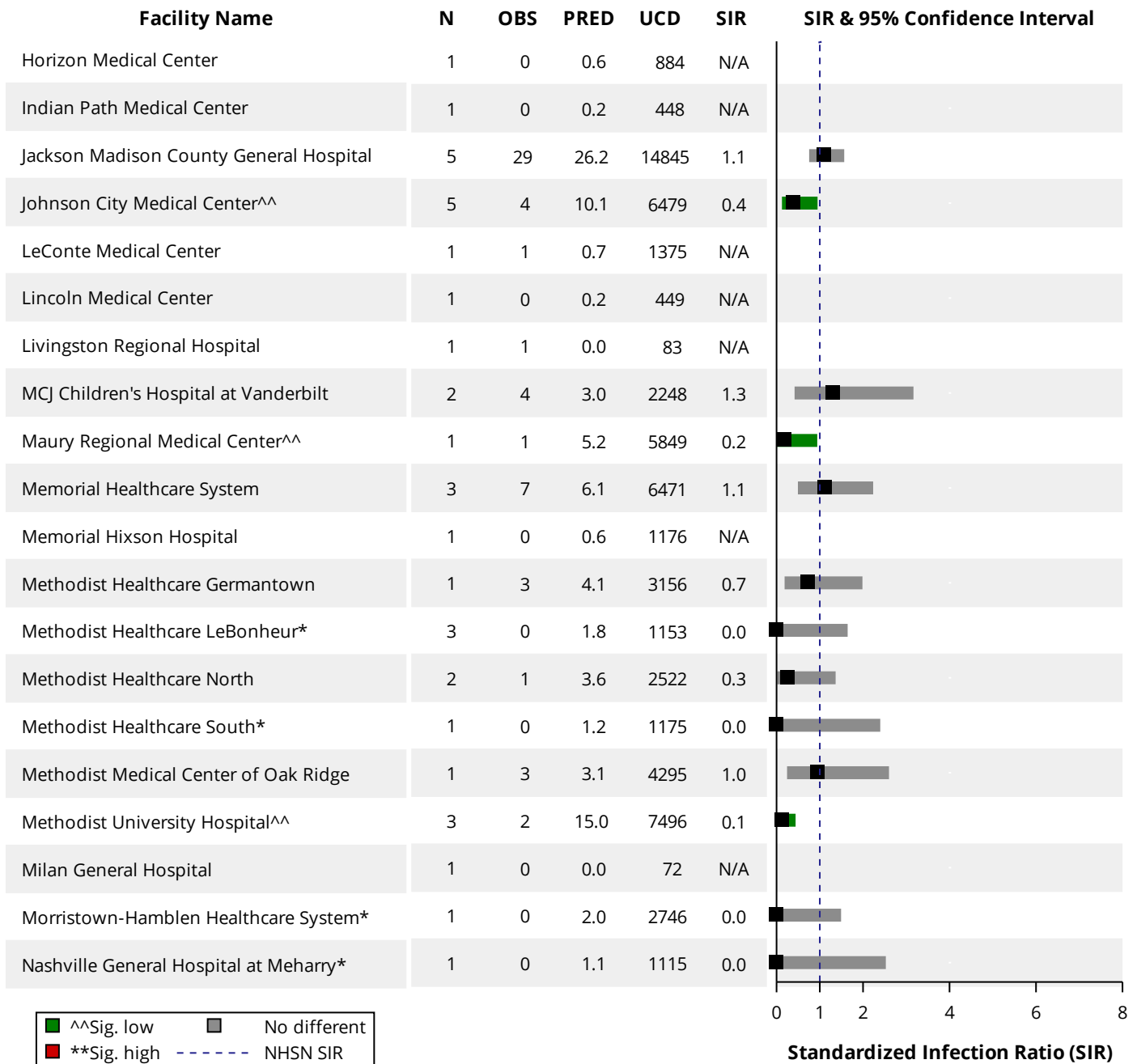
N/A = Data not shown for facilities with <50 urinary catheter days / SIR not calculated for facilities with <1 predicted infection

** Significantly higher than national baseline

^^ Significantly lower than national baseline

* Zero infections, but not statistically significant

Figure 35 (cont'd)



Data Reported as of June 01, 2021

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

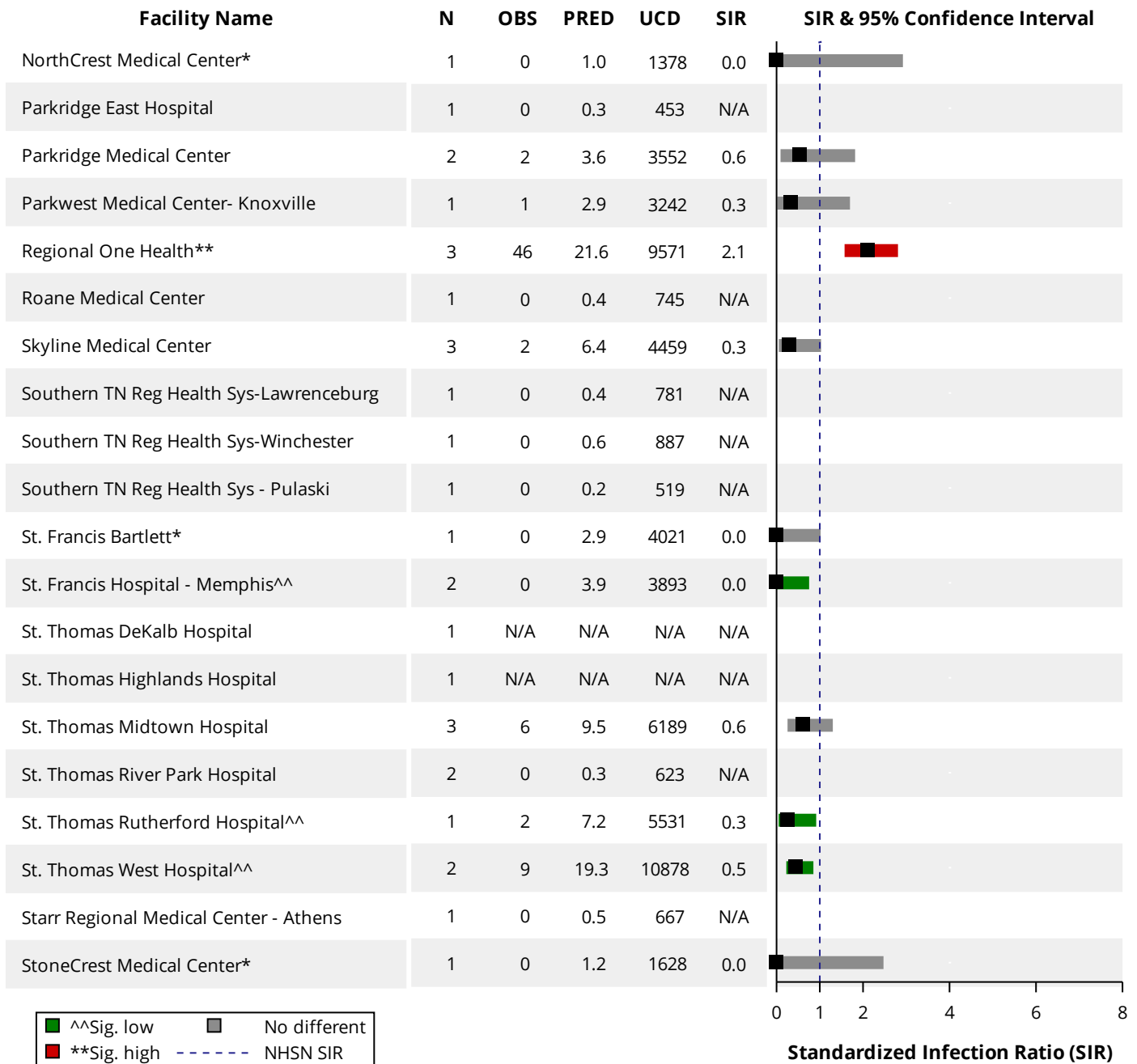
N/A = Data not shown for facilities with <50 urinary catheter days / SIR not calculated for facilities with <1 predicted infection

** Significantly higher than national baseline

^^ Significantly lower than national baseline

* Zero infections, but not statistically significant

Figure 35 (cont'd)



Data Reported as of June 01, 2021

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

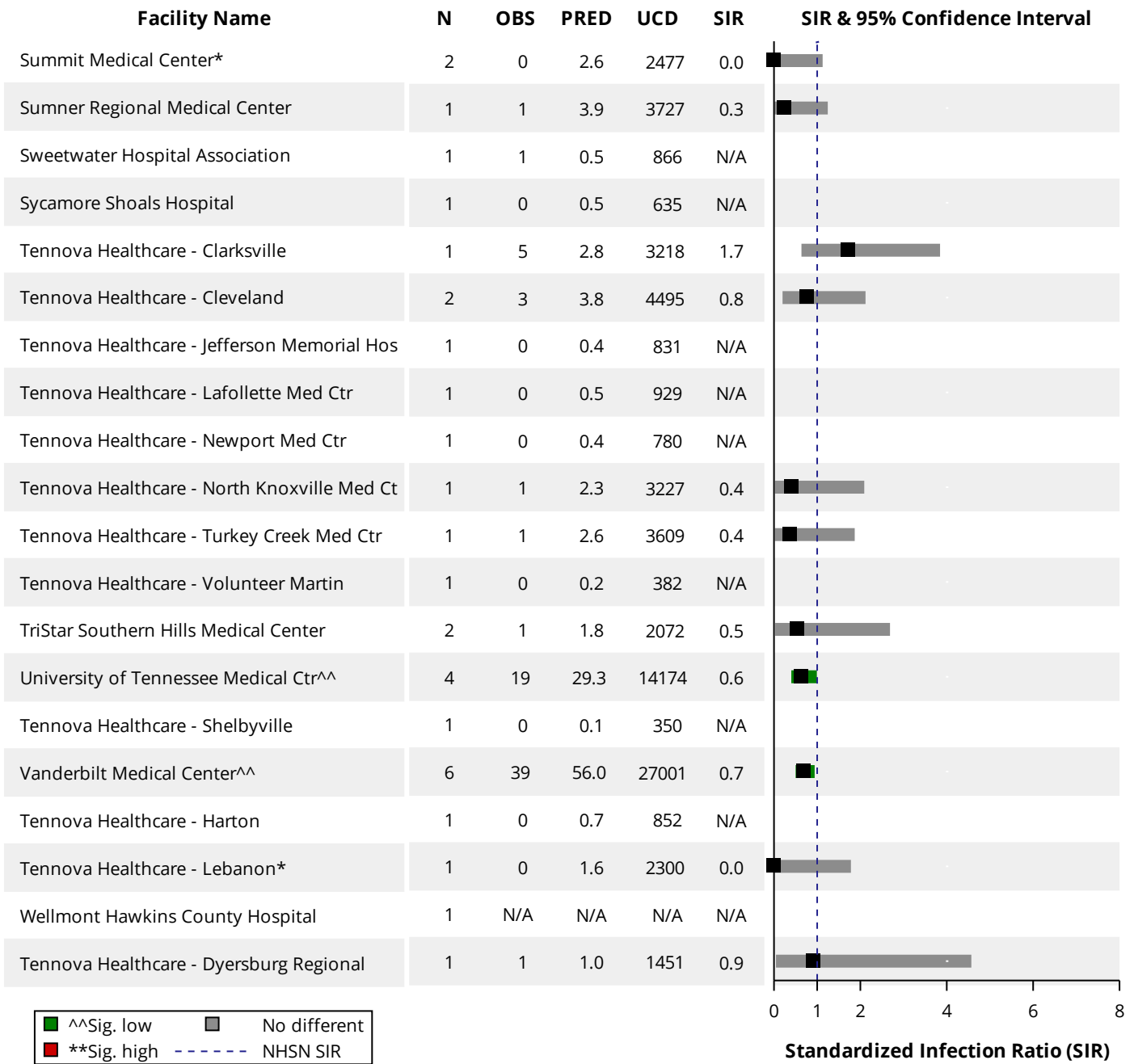
N/A = Data not shown for facilities with <50 urinary catheter days / SIR not calculated for facilities with <1 predicted infection

** Significantly higher than national baseline

^^ Significantly lower than national baseline

* Zero infections, but not statistically significant

Figure 35 (cont'd)



Data Reported as of June 01, 2021

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

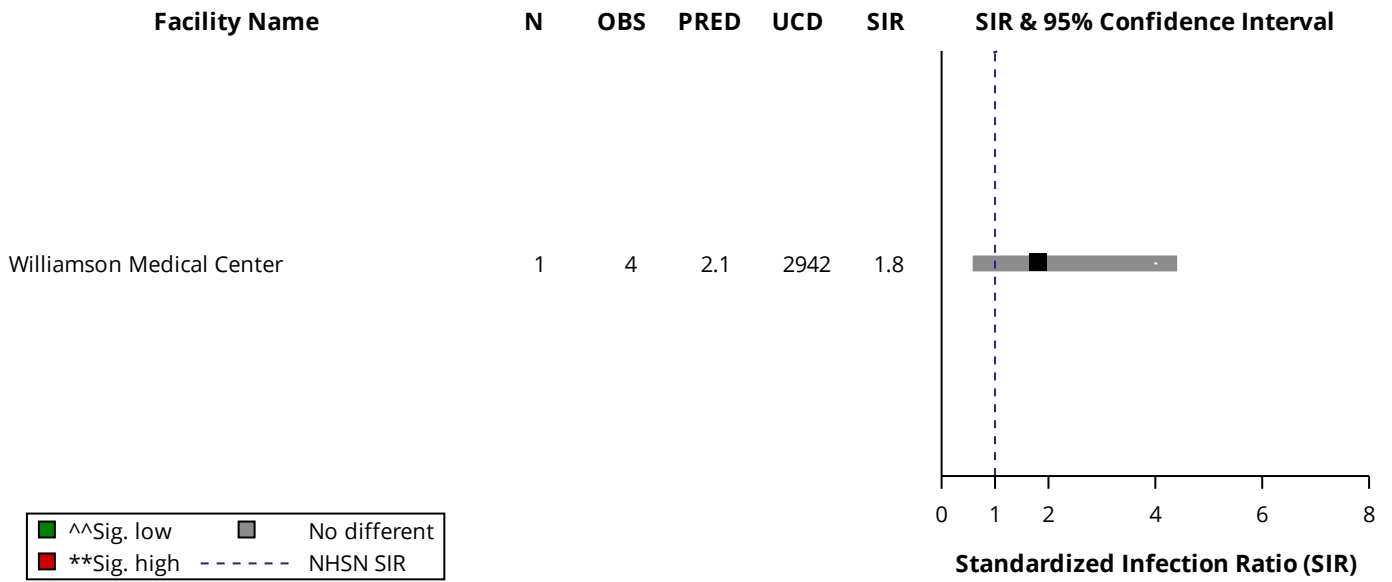
N/A = Data not shown for facilities with <50 urinary catheter days / SIR not calculated for facilities with <1 predicted infection

** Significantly higher than national baseline

^^ Significantly lower than national baseline

* Zero infections, but not statistically significant

Figure 35 (cont'd)



Data Reported as of June 01, 2021

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 2019: 98

Total number of hospitals reporting from January-December 2020: 96

SIRs by Quarter (Figure 36)

- From Q1-2019 through Q4-2019, the overall CAUTI SIR in Tennessee medical, surgical, and medical/surgical wards fluctuated from 1.0 to 0.57. Q1-2020 recorded a CAUTI SIR of 0.54 and following that remained steady through the final three quarters of the reporting period with a range of 0.70 – 0.77. Tennessee's wards were below predicted SIR in quarters 2 and 4 of 2019 and quarters 1, 3, and 4 of 2020. Tennessee's adult and pediatric medical, surgical, and medical/surgical wards did not achieve the U.S. Department of Health and Human Services' [National Action Plan to Prevent Healthcare-Associated Infections](#)¹⁵ 2020 prevention target of SIR = 0.75 in any quarter of 2019 or 2020.

SIR by Unit Type (Figure 37)

- In both 2019 and 2020, Tennessee CAUTI SIRs were significantly lower than the 2015 baseline SIR in adult medical and medical/surgical ward locations. In 2020, the SIR from adult surgical ward locations was also significantly lower than the national baseline.

Key Percentiles for Tennessee SIRs (Table 17, Table 18)

- The overall CAUTI SIR across all reporting adult and pediatric medical, surgical, and medical/surgical wards in Tennessee was statistically significantly lower than the national SIR of 1 in both 2019 and 2020. 2019 had an SIR of 0.78 (95% CI: 0.67, 0.91) while there was a CAUTI SIR of 0.68 (95% CI: 0.57,0.80) in 2020. This SIR indicates that the number of CAUTIs in adult and pediatric medical, surgical, and medical/surgical wards was 22% lower than predicted in 2019 and 32% lower in 2020 as compared to national 2015 baseline NHSN data.
- In 2019, the median (50th percentile) facility-specific SIR was 0.78, indicating that half of all reporting Tennessee hospitals with at least 1 predicted infection had an SIR at or below 0.78. In 2020, the median (50th percentile) facility-specific SIR was 0.54.

¹⁵ <http://www.hhs.gov/ash/initiatives/hai/actionplan/>

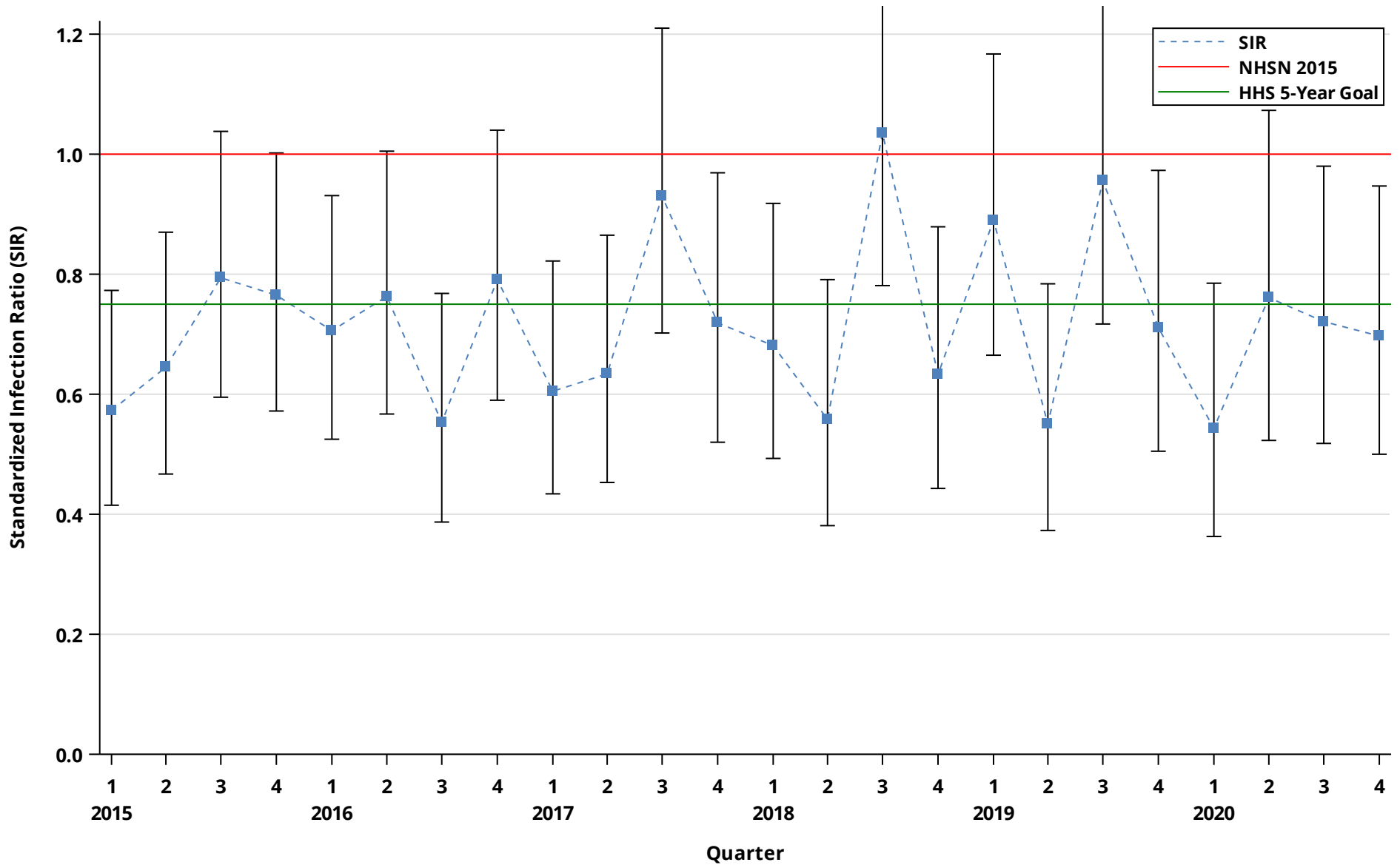
Microorganisms Associated with CAUTIs in Adult and Pediatric Medical, Surgical, and Medical/Surgical Wards (Figure 38, Figure 39)

- Among the 179 pathogens isolated from 161 CAUTIs in 2019, the most common pathogens were *Escherichia coli* (32%), *Pseudomonas aeruginosa* (18%), and *Enterococcus* and *Klebsiella* species (both 16%). Vancomycin-resistant *Enterococcus* (VRE) accounted for 4% and methicillin-resistant *S. aureus* (MRSA) and Carbapenem-resistant *Pseudomonas aeruginosa* each accounted for 2% of total positive isolates.
- Among the 141 pathogens isolated from 131 CAUTIs in 2020, the most common pathogens were *Escherichia coli* (28%), *Klebsiella* species (18%), and *Enterococcus* species and *Pseudomonas aeruginosa* (both 15%). Vancomycin-resistant *Enterococcus* (VRE) and methicillin-resistant *S. aureus* (MRSA) each accounted for 2 total positive isolates while there was a single isolated Carbapenem-resistant *Pseudomonas aeruginosa* isolate.

Facility-Specific SIRs (Figure 40, Figure 41)

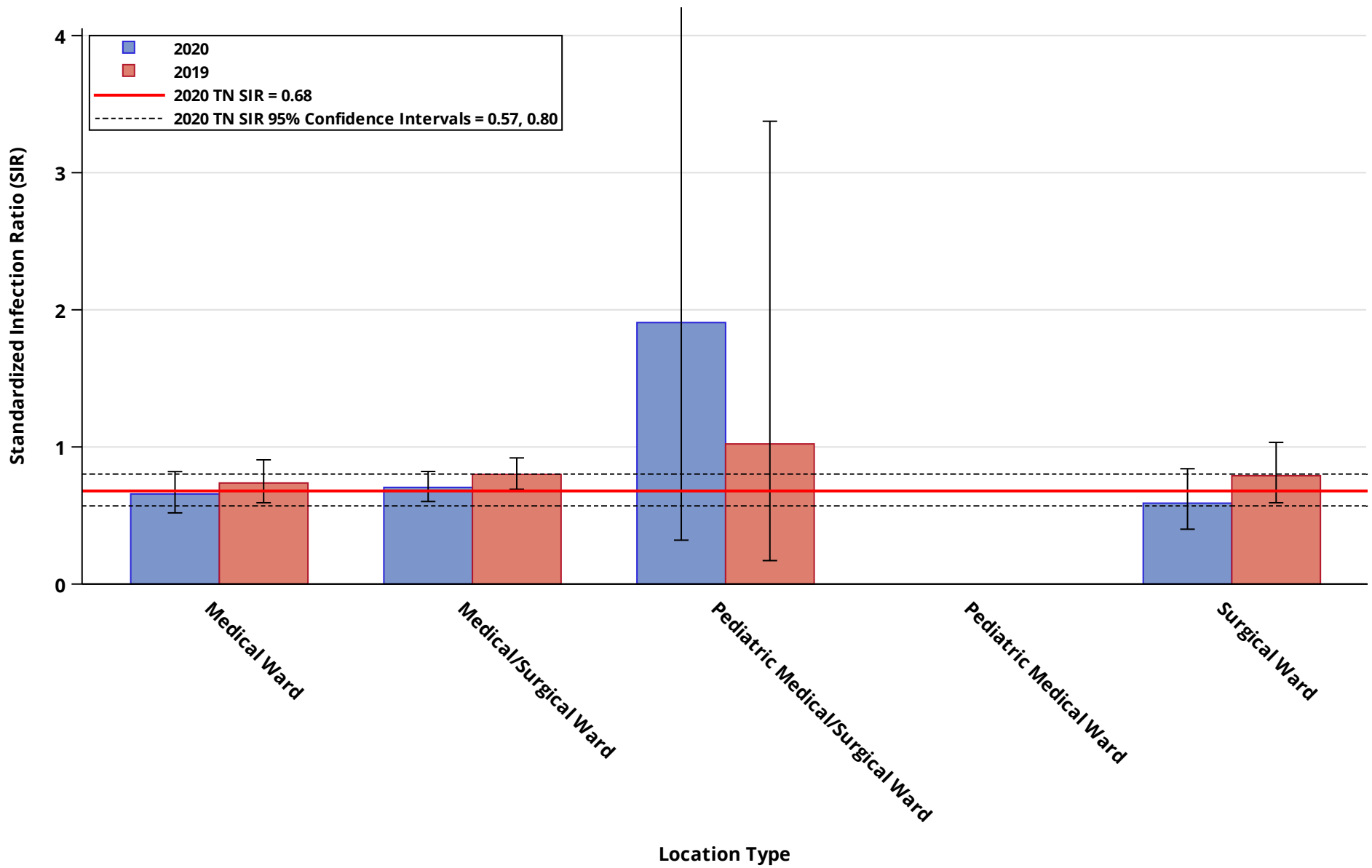
- A single CAUTI SIR that accounts for all reporting adult and pediatric medical, surgical, and medical/surgical ward locations in each facility is displayed in [Figure 40](#) and [Figure 41](#). The bar representing the confidence interval is green if the CAUTI SIR was significantly lower than the national 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 both 2019 and 2020, three Tennessee facilities had a CAUTI SIR statistically significantly lower than the 2015 national baseline SIR of 1. In 2019, three facilities had a CAUTI SIR statistically significantly higher than the baseline SIR while one facility had an SIR higher than the baseline SIR in 2020.

Figure 36: Standardized Infection Ratios (SIR) for Catheter-Associated Urinary Tract Infections (CAUTIs) for Adult and Pediatric Medical, Surgical, and Medical/Surgical Wards by Quarter, Tennessee, 01/01/2015–12/31/2020 [Reference standard: National Healthcare Safety Network (NHSN), 2015]



Data Reported as of August 16, 2021

Figure 37: Standardized Infection Ratios (SIRs) for Catheter-Associated Urinary Tract Infections (CAUTIs) by Ward Location Type, Tennessee, 2020
 [Reference standard: National Healthcare Safety Network (NHSN), 2015]



Data Reported as of August 16, 2021

Table 17: 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, 01/01/2019–12/31/2020

										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	2020	96	209,605	132	194.47	0.68	0.57	0.80	41	3	7%	1	2%	0.00	0.00	0.54	0.86	1.36	
	2019	98	227,071	163	208.93	0.78	0.67	0.91	43	3	7%	3	7%	0.00	0.41	0.78	1.08	1.77	

Data reported as of June 01, 2021

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 18: Key Percentiles for Unit-Specific Catheter-Associated Urinary Tract Infection (CAUTI) Standardized Infection Ratios (SIRs) by Type of Ward and Reporting Year, Tennessee, 01/01/2019–12/31/2020

				No. of INFECTIONS		SIR AND 95% CONFIDENCE INTERVAL			DISTRIBUTION OF FACILITY-SPECIFIC SIRs					
ICU TYPE	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	2020	42	112,042	74	112.71	0.66	0.52	0.82	15	0.00	0.00	0.00	0.70	1.06
	2019	42	114,770	86	116.68	0.74	0.59	0.91	18	0.00	0.14	0.63	0.89	2.83
Medical/Surgical Ward	2020	82	253,484	160	226.97	0.71	0.60	0.82	26	0.00	0.43	0.63	1.03	1.94
	2019	83	266,936	188	235.08	0.80	0.69	0.92	30	0.00	0.21	0.73	1.17	1.83
Pediatric Medical Ward	2020	6	924	0	0.74	.	.	.	.	N/A	N/A	N/A	N/A	N/A
	2019	6	1,060	0	0.87	.	.	.	.	N/A	N/A	N/A	N/A	N/A
Pediatric Medical/Surgical Ward	2020	9	1,398	2	1.05	1.91	0.32	6.30	.	N/A	N/A	N/A	N/A	N/A
	2019	10	2,520	2	1.96	1.02	0.17	3.38	.	N/A	N/A	N/A	N/A	N/A
Surgical Ward	2020	23	51,362	28	47.46	0.59	0.40	0.84	11	0.00	0.31	0.59	1.00	1.11
	2019	26	68,856	50	63.28	0.79	0.59	1.03	11	0.28	0.56	0.79	1.28	1.29

Data reported as of June 01, 2021

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

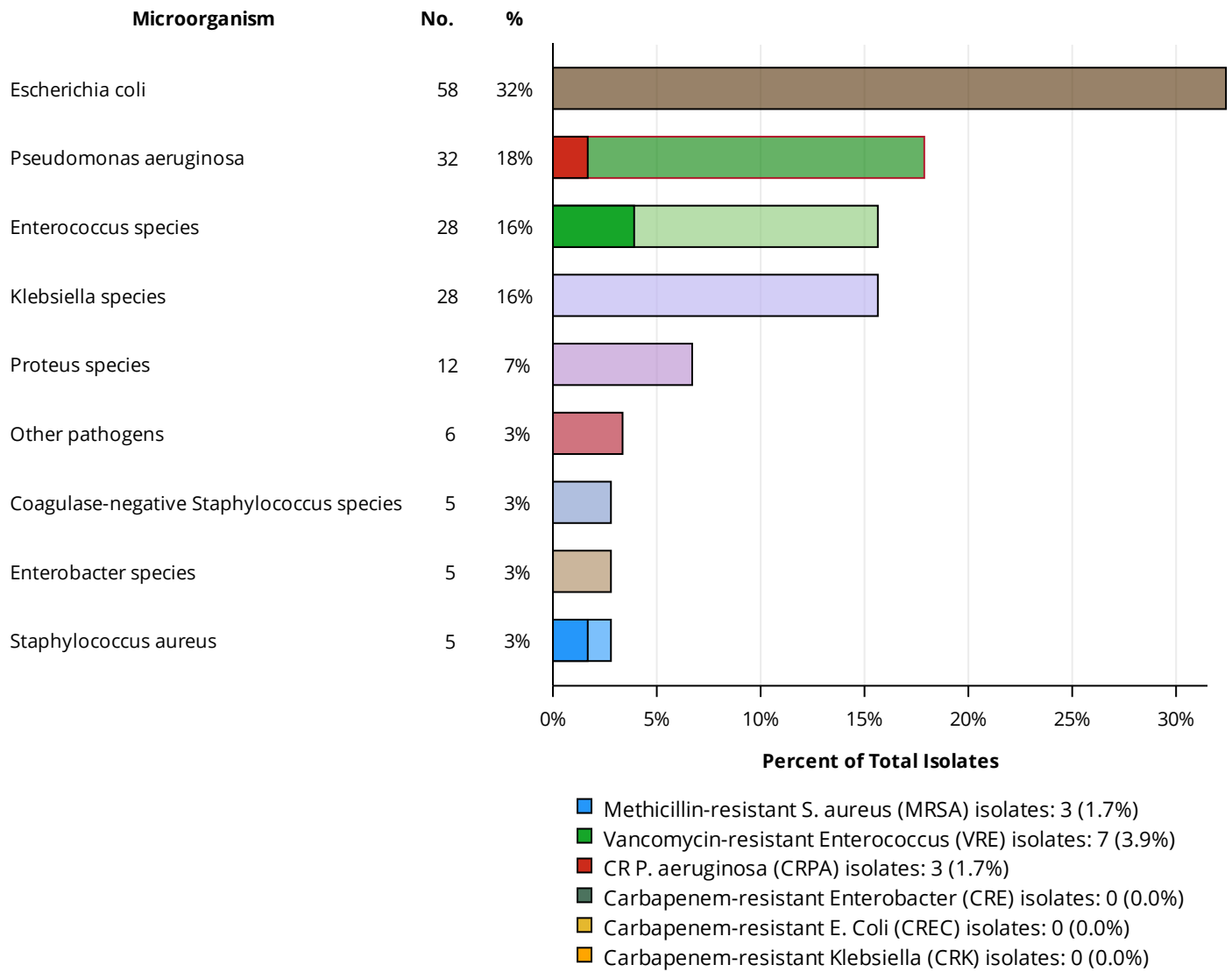
Key percentiles include units with at least one predicted infection

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

Figure 38: Microorganisms Identified in Catheter-Associated Urinary Tract (CAUTIs) in Adult and Pediatric Wards, Tennessee, 01/01/2019–12/31/2019

Number of isolates=179; Number of events=161

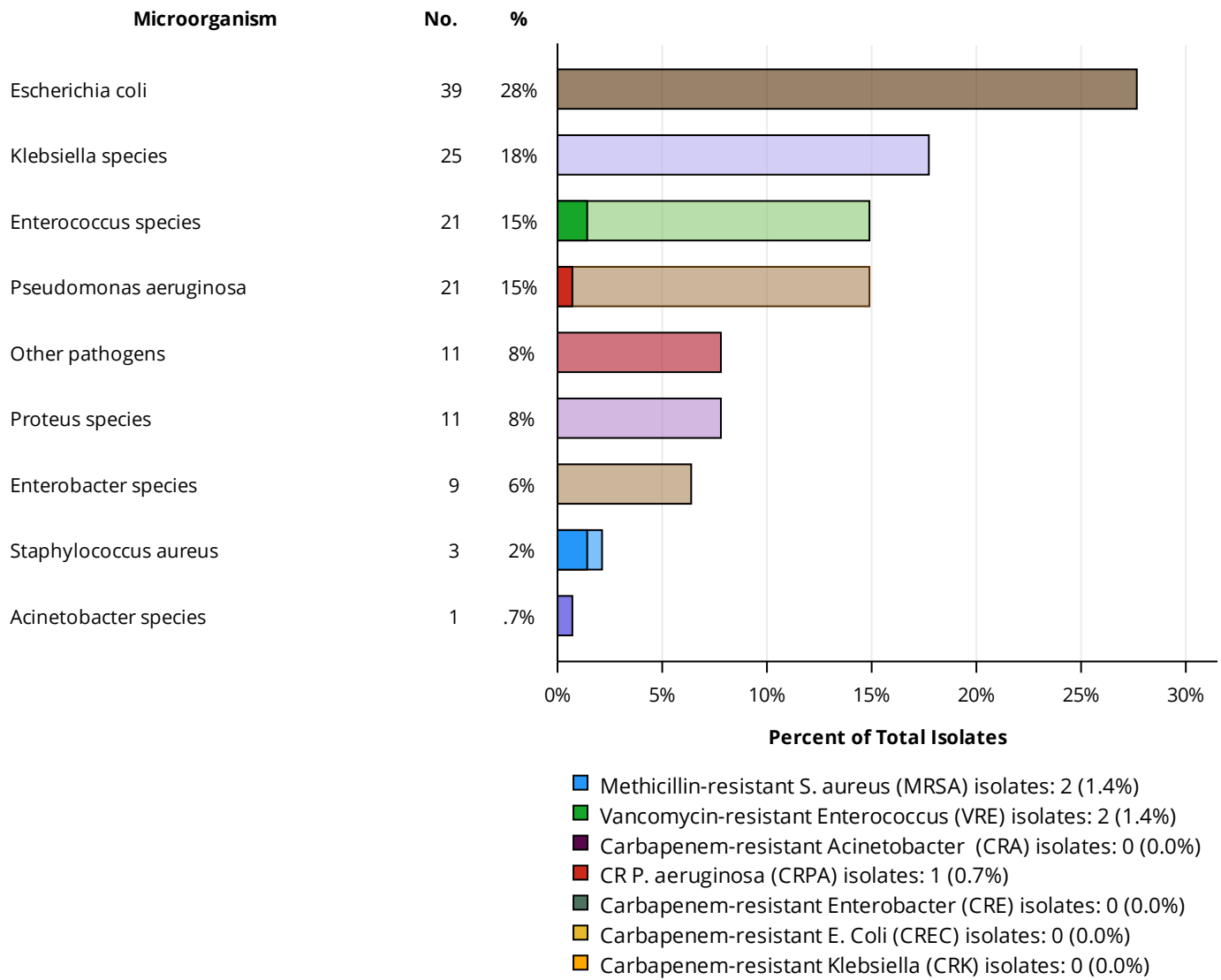


Data reported as of June 01, 2021

Other pathogens = Citrobacter spp., Escherichia spp., Serratia spp., Streptococcus spp.

Figure 39: Microorganisms Identified in Catheter-Associated Urinary Tract (CAUTIs) in Adult and Pediatric Wards, Tennessee, 01/01/2020–12/31/2020

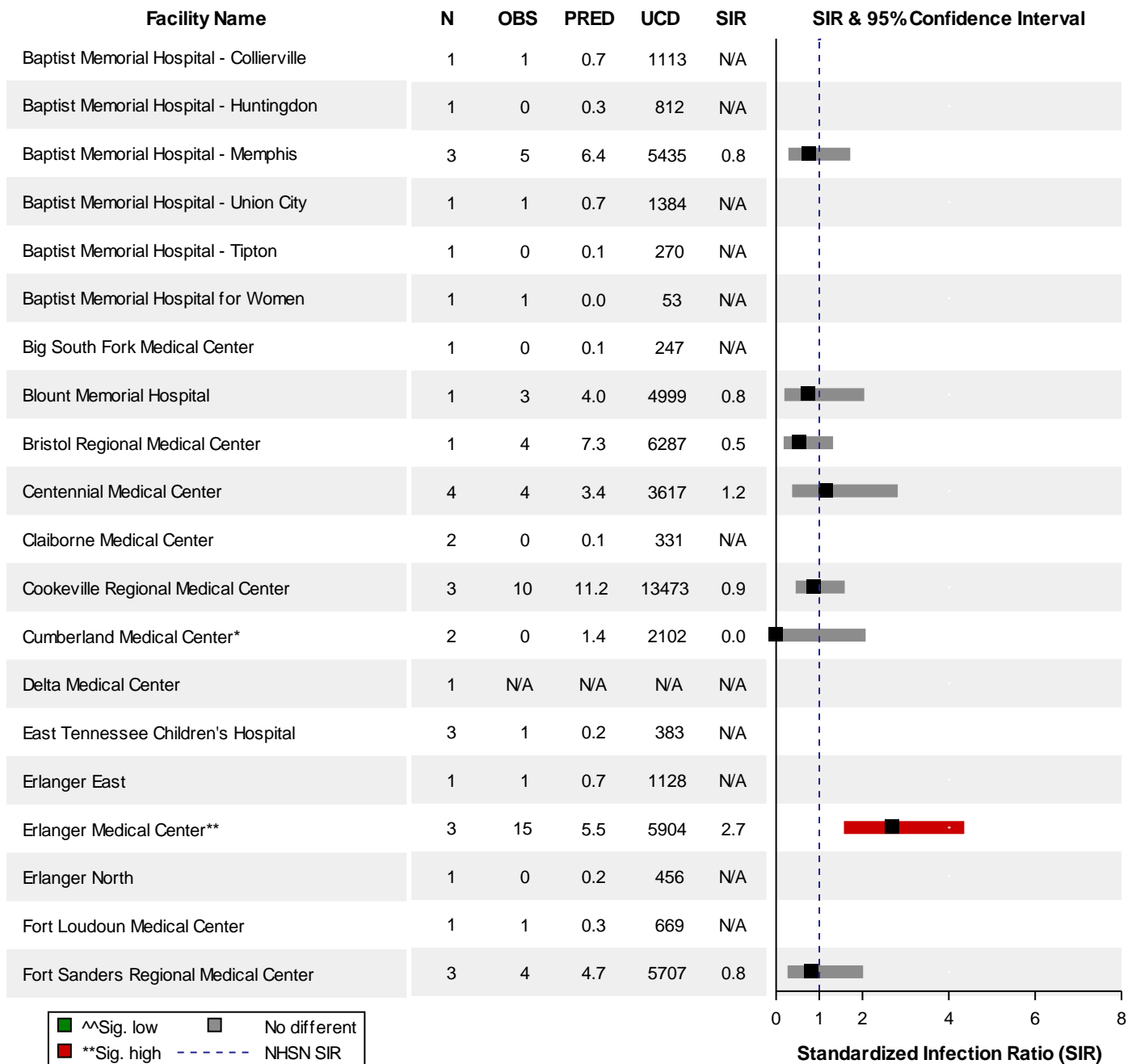
Number of isolates=141; Number of events=131



Data reported as of June 01, 2021

Other pathogens = Burkholderia spp., Citrobacter spp., Coagulase-negative spp., Gram-negative spp., Hafnia spp., Kluyvera spp., Providencia spp., Pseudomonas spp., Serratia spp., Stenotrophomonas spp.

Figure 40: CAUTI Standardized Infection Ratio (SIR) for Adult and Pediatric Wards in Acute Care Hospitals, Tennessee, 01/01/2019 – 12/31/2019



Data Reported as of June 01, 2021

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

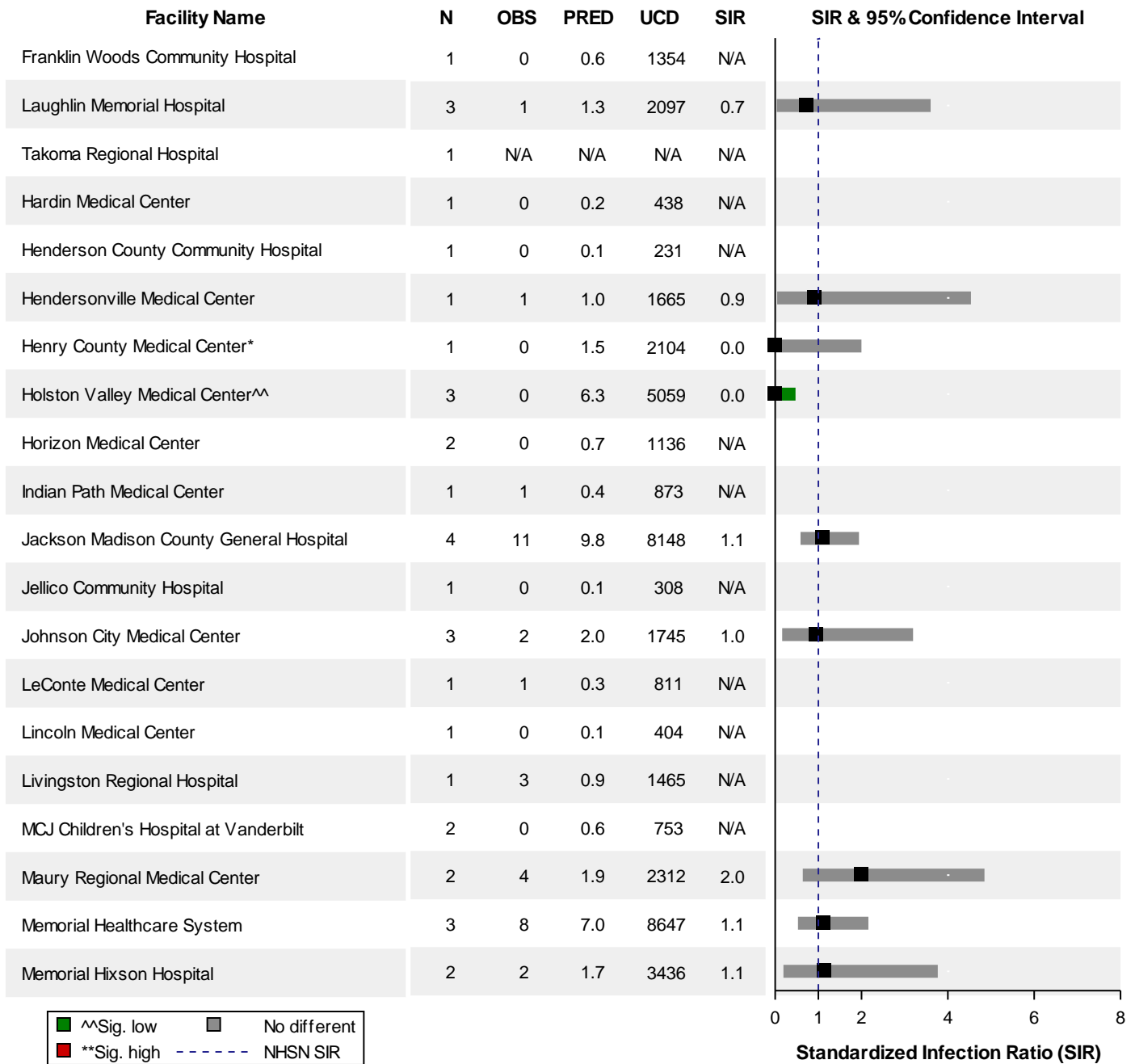
N/A = Data not shown for facilities with <50 urinary catheter days / SIR not calculated for facilities with ≤1.0 predicted infection

** Significantly higher than national baseline

^ Significantly lower than national baseline

* Zero infections, but not statistically significant

Figure 40 (cont'd)



Data Reported as of June 01, 2021

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

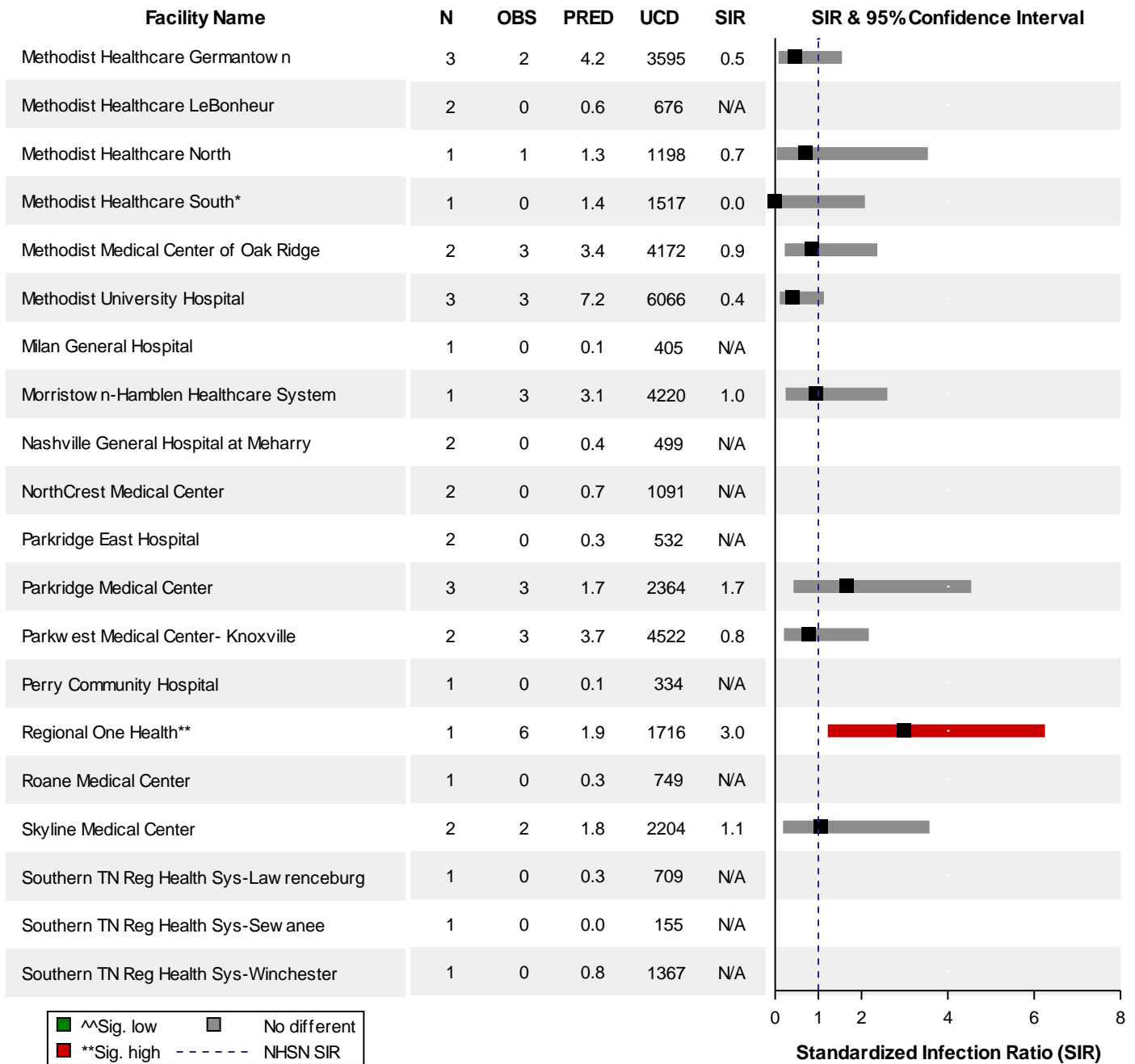
N/A = Data not shown for facilities with <50 urinary catheter days / SIR not calculated for facilities with ≤1.0 predicted infection

** Significantly higher than national baseline

^^ Significantly lower than national baseline

* Zero infections, but not statistically significant

Figure 40 (cont'd)



Data Reported as of June 01, 2021

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

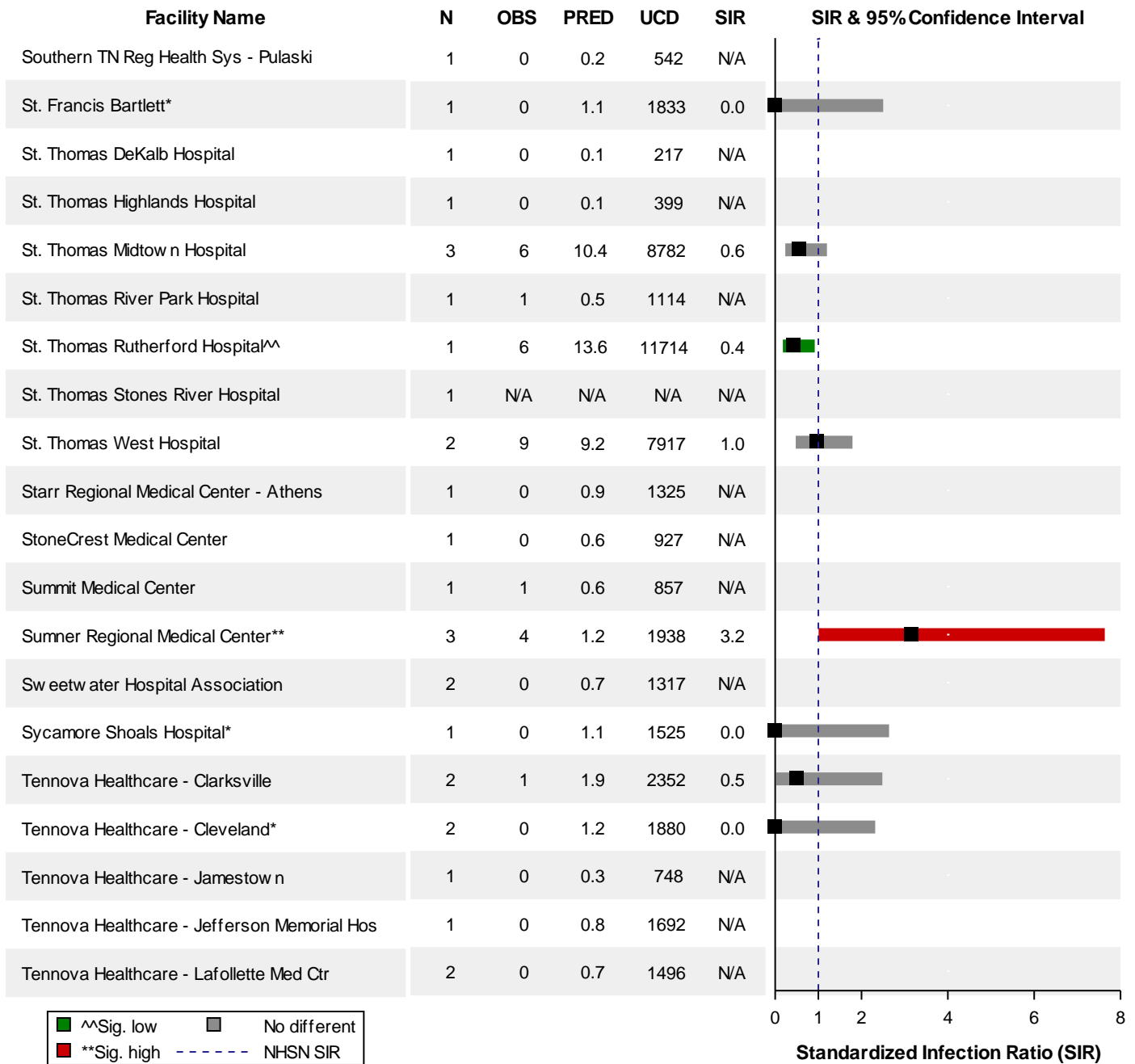
N/A = Data not shown for facilities with <50 urinary catheter days / SIR not calculated for facilities with ≤1.0 predicted infection

** Significantly higher than national baseline

^^ Significantly lower than national baseline

* Zero infections, but not statistically significant

Figure 40 (cont'd)



Data Reported as of June 01, 2021

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

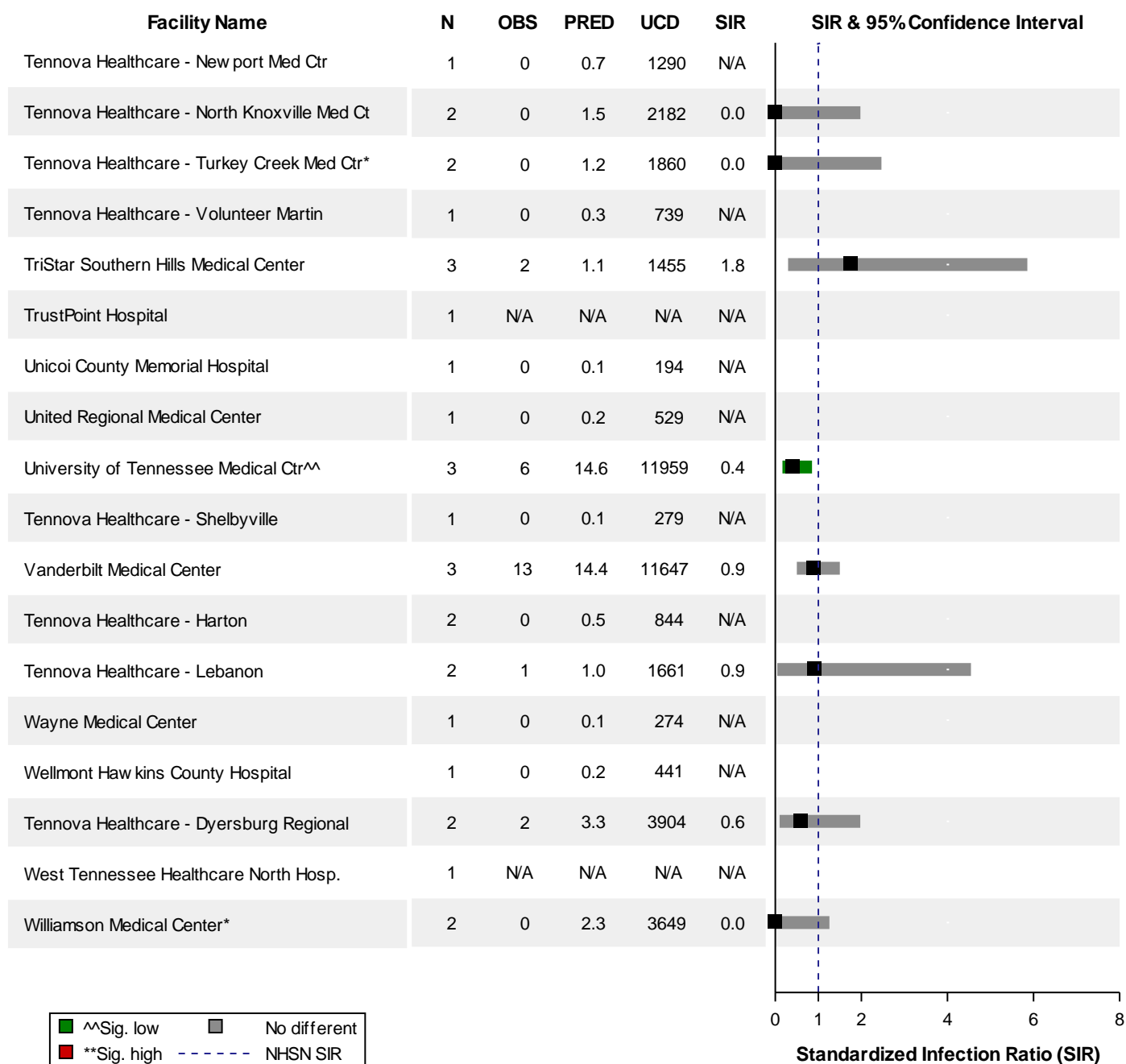
N/A = Data not shown for facilities with <50 urinary catheter days / SIR not calculated for facilities with ≤1.0 predicted infection

** Significantly higher than national baseline

^^ Significantly lower than national baseline

* Zero infections, but not statistically significant

Figure 40 (cont'd)



Data Reported as of June 01, 2021

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

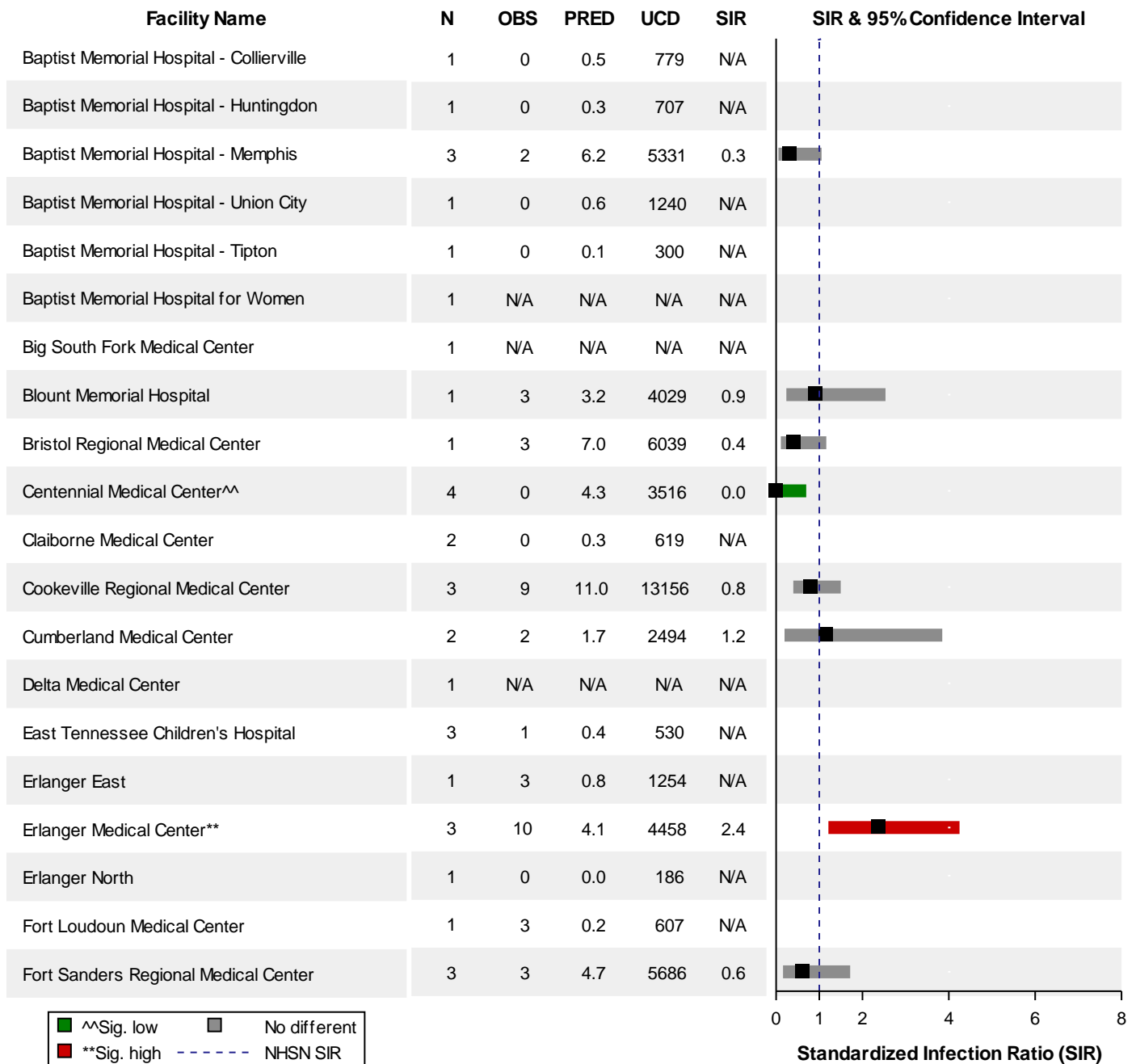
N/A = Data not shown for facilities with <50 urinary catheter days / SIR not calculated for facilities with ≤1.0 predicted infection

** Significantly higher than national baseline

^^ Significantly lower than national baseline

* Zero infections, but not statistically significant

Figure 41: CAUTI Standardized Infection Ratio (SIR) for Adult and Pediatric Wards in Acute Care Hospitals, Tennessee, 01/01/2020 – 12/31/2020



Data Reported as of June 01, 2021

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

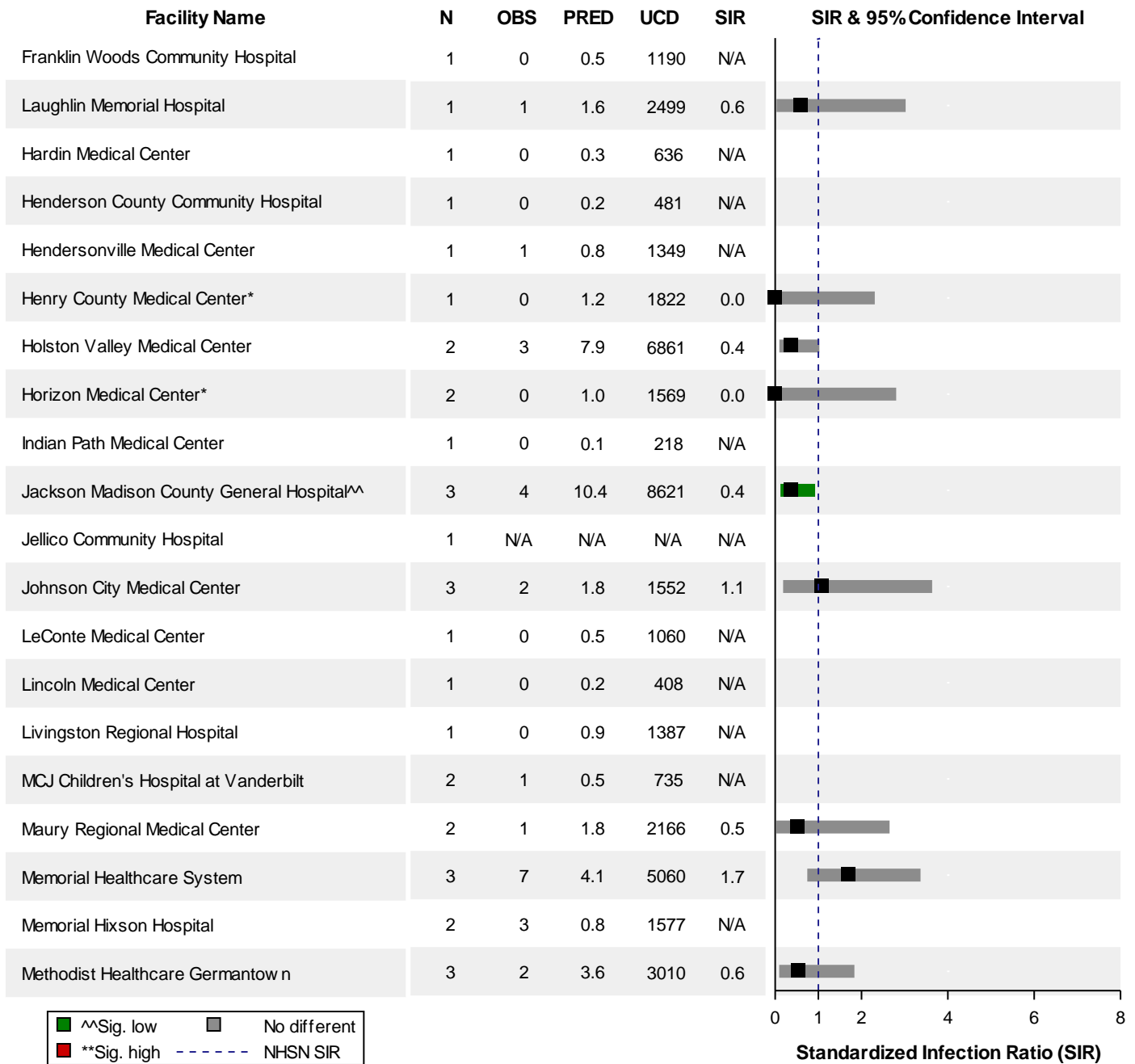
N/A = Data not shown for facilities with <50 urinary catheter days / SIR not calculated for facilities with ≤1.0 predicted infection

** Significantly higher than national baseline

^^ Significantly lower than national baseline

* Zero infections, but not statistically significant

Figure 41 (cont'd)



Data Reported as of June 01, 2021

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

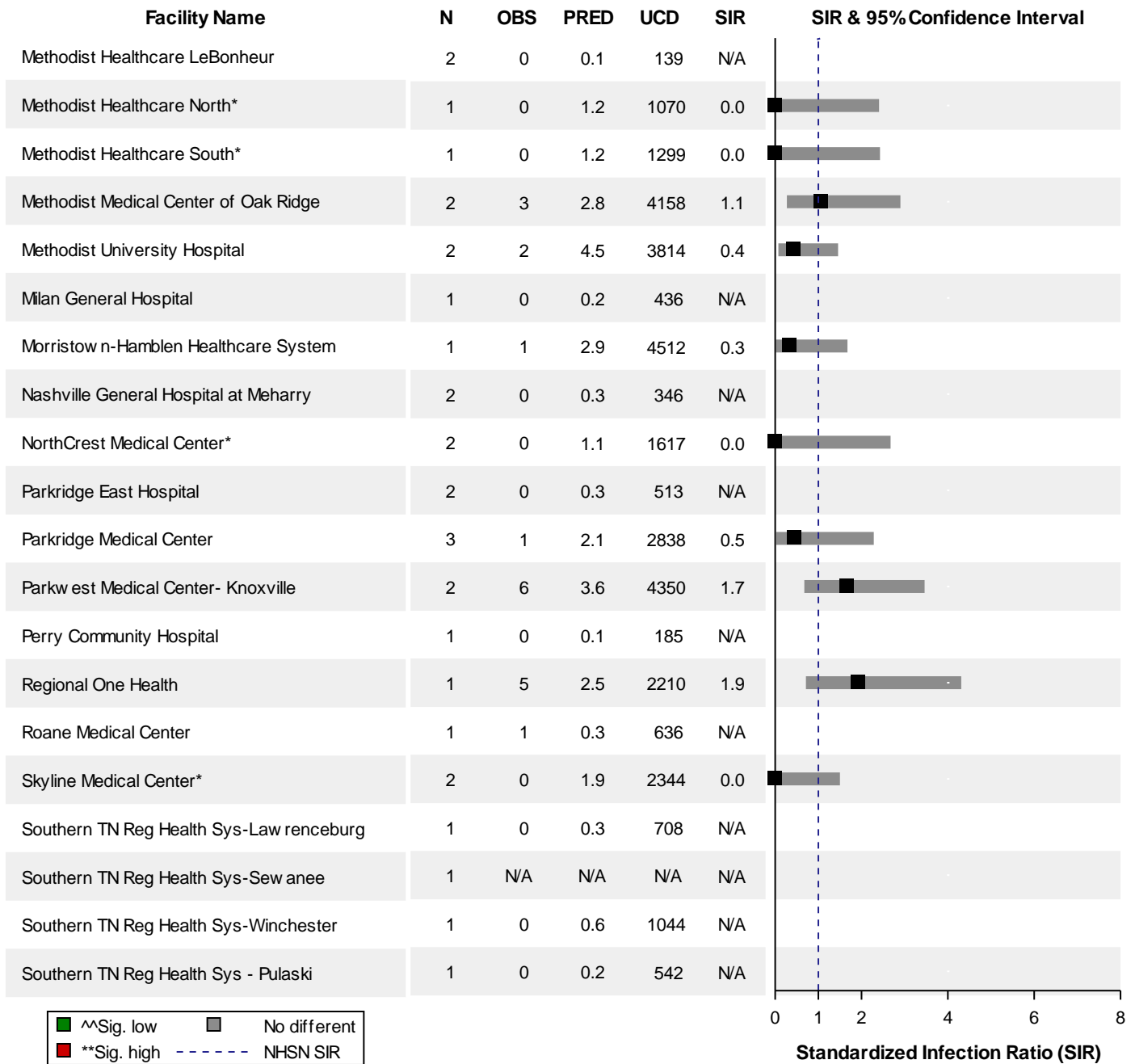
N/A = Data not shown for facilities with <50 urinary catheter days / SIR not calculated for facilities with ≤1.0 predicted infection

** Significantly higher than national baseline

^^ Significantly lower than national baseline

* Zero infections, but not statistically significant

Figure 41 (cont'd)



Data Reported as of June 01, 2021

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

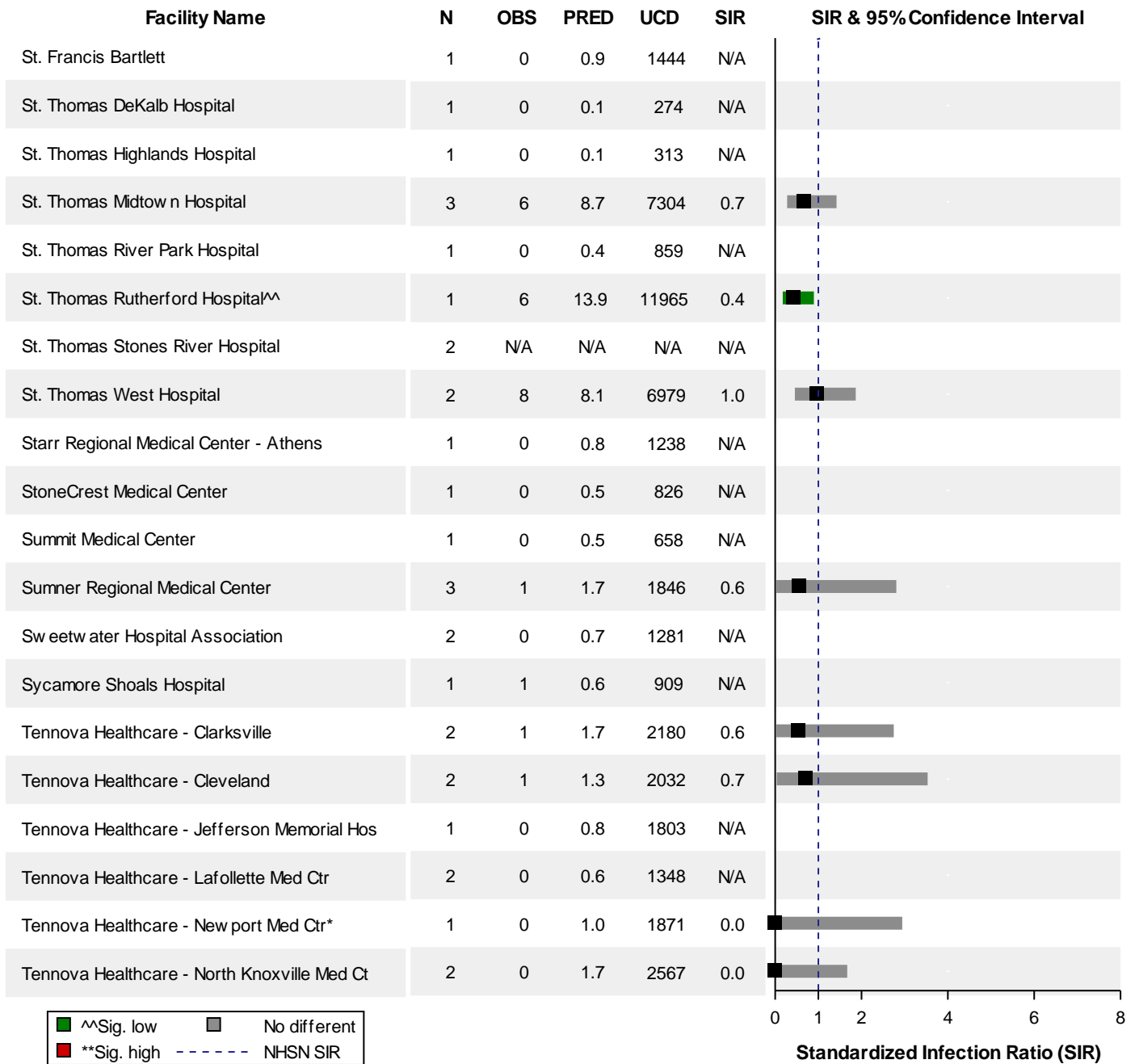
N/A = Data not shown for facilities with <50 urinary catheter days / SIR not calculated for facilities with ≤1.0 predicted infection

** Significantly higher than national baseline

^^ Significantly lower than national baseline

* Zero infections, but not statistically significant

Figure 41 (cont'd)



Data Reported as of June 01, 2021

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

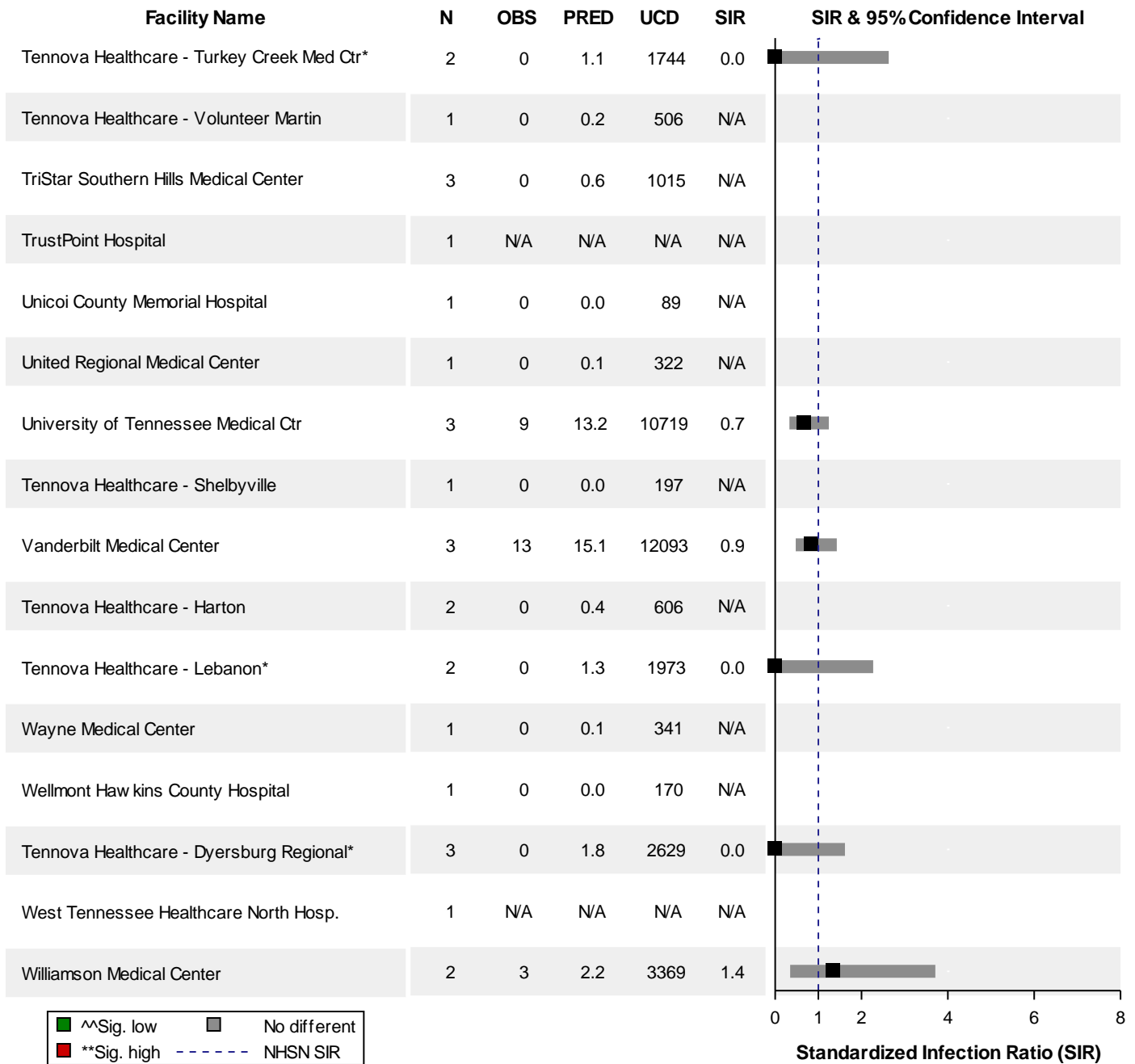
N/A = Data not shown for facilities with <50 urinary catheter days / SIR not calculated for facilities with ≤1.0 predicted infection

** Significantly higher than national baseline

^^ Significantly lower than national baseline

* Zero infections, but not statistically significant

Figure 41 (cont'd)



Data Reported as of June 01, 2021

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

Long-term Acute Care Hospitals

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

Total number of facilities reporting from January-December 2019: 9

Total number of facilities reporting from January-December 2020: 9

SIRs by Quarter (Figure 42, Figure 43)

- From Q1-2019 through Q2-2020, the overall CAUTI SIR for Tennessee LTACs remained relatively stable around an SIR of 0.80 except for Q4-2019 where a decreased SIR of 0.33 was observed. Q3 and Q4 of 2020 saw a drop in CAUTI SIR to 0.55 and 0.62 respectively from Q2-2020. In no quarter of the reporting period did the Tennessee LTACs achieve the U.S. Department of Health and Human Services' prevention target of SIR = 0.75.

Key Percentiles for Tennessee SIRs (Table 19, Table 20)

- The overall CAUTI SIR across all reporting LTACs in Tennessee was statistically significantly lower than the national SIR of 1 in both 2019 and 2020. 2019 had an SIR of 0.68 (95% CI: 0.48, 0.94) while there was a CAUTI SIR of 0.70 (95% CI: 0.50, 0.97) in 2020.
- In 2019, the median (50th percentile) facility-specific SIR was 0.59, indicating that half of all reporting Tennessee hospitals with at least 1 predicted infection had an SIR at or below 0.59. In 2020, the median (50th percentile) facility-specific SIR was 0.47.

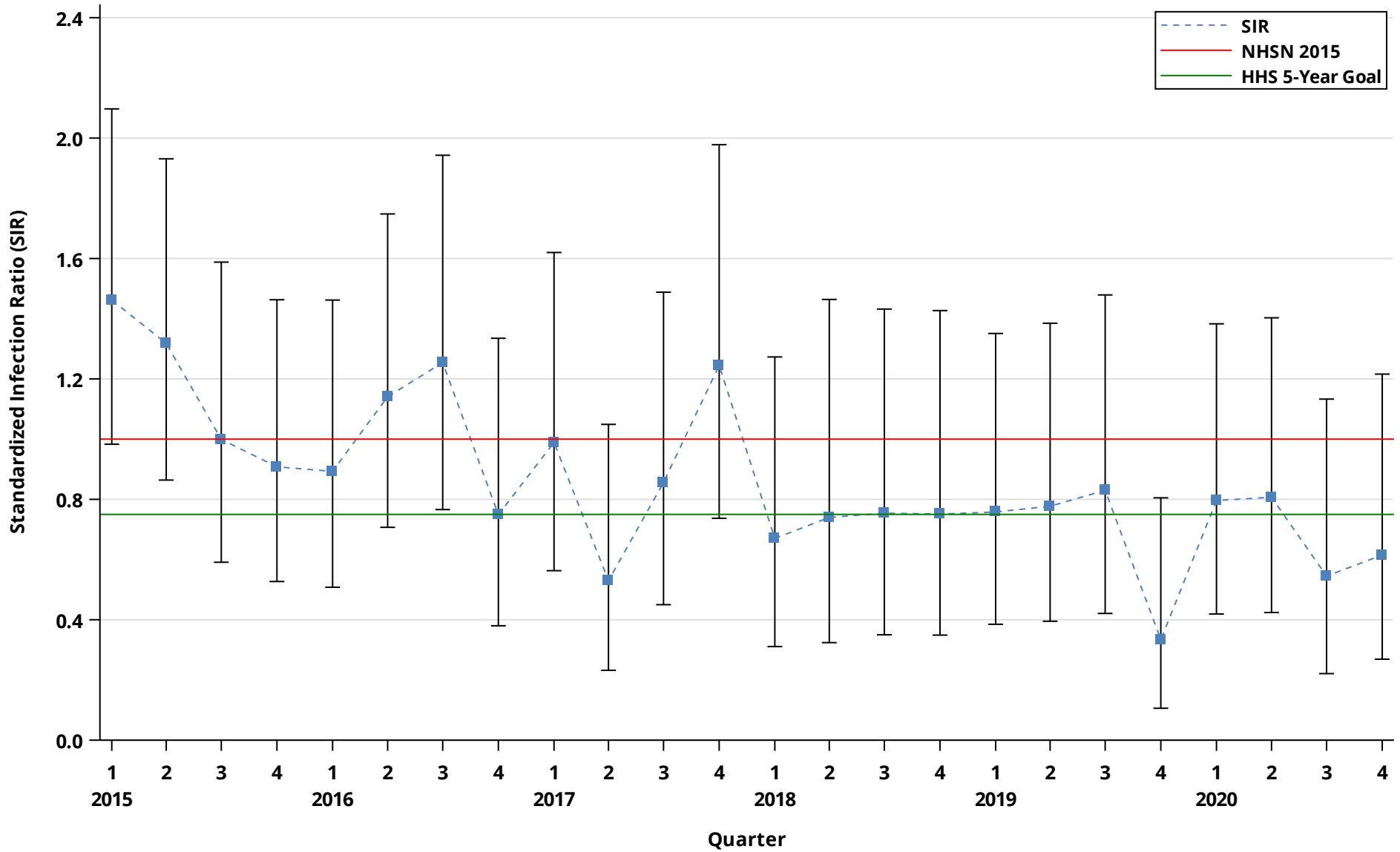
Microorganisms Associated with CAUTIs in LTACs (Figure 44, Figure 45)

- Among the 39 pathogens isolated from 34 LTAC CAUTIs in 2019, the most common pathogens were *Pseudomonas aeruginosa* (28%), *Escherichia coli* (18%), and *Enterococcus* species (15%). Vancomycin-resistant *Enterococcus* (VRE) and carbapenem-resistant *Pseudomonas aeruginosa* accounted for 5% of total positive isolates and there was a single positive methicillin-resistant *S. aureus* (MRSA) isolate.
- Among the 38 pathogens isolated from 35 LTAC CAUTIs in 2020, the most common pathogens were *Pseudomonas aeruginosa* (29%), *Klebsiella* species (16%), and *Escherichia coli* (13%). Vancomycin-resistant *Enterococcus* (VRE) and carbapenem-resistant *Pseudomonas aeruginosa* accounted for 5% of total positive isolates and there was a single positive methicillin-resistant *S. aureus* (MRSA) isolate.

Facility-Specific SIRs (Figure 46, Figure 47)

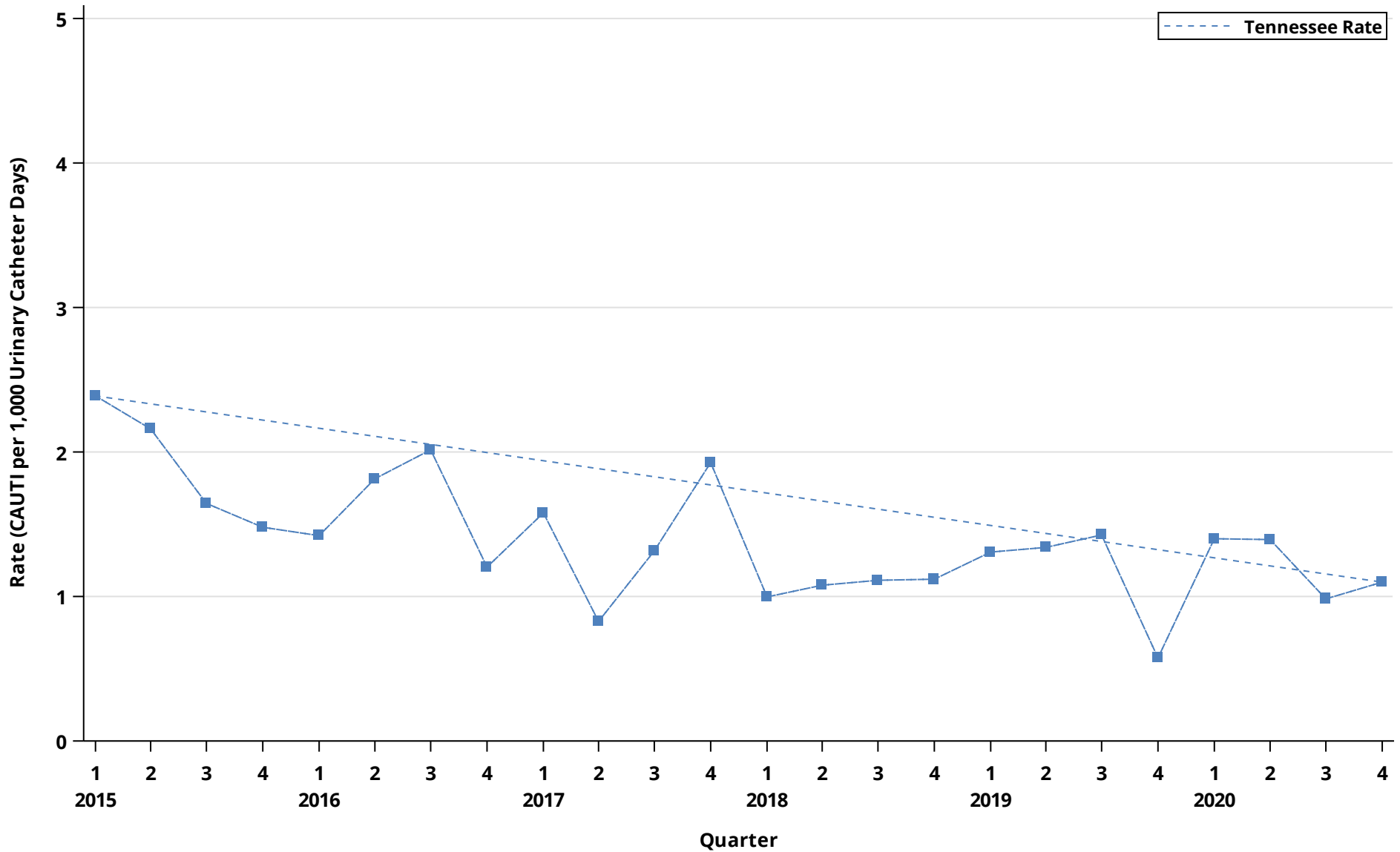
- A single CAUTI SIR that accounts for all reporting LTAC facilities is displayed in [Figure 46](#) and [Figure 47](#). The bar representing the confidence interval is green if the CAUTI SIR was significantly lower than the national SIR of 1 for 2015 and red if the CAUTI SIR was significantly higher 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 2020, one Tennessee facility 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 2019, no facilities had an SIR either significantly lower or higher than the baseline SIR.

Figure 42: Standardized Infection Ratios (SIR) for Catheter-Associated Urinary Tract Infections (CAUTIs) in Long-term Acute Care (LTAC) Facilities by Quarter, Tennessee, 01/01/2015–12/31/2020 [Reference standard: National Healthcare Safety Network (NHSN), 2015]



Data Reported as of June 01, 2021

Figure 43: Crude (Unadjusted) Rates of Catheter-Associated Urinary Tract Infections (CAUTIs) in Long-term Acute Care (LTAC) Facilities by Quarter, Tennessee, 01/01/2015–12/31/2020 [Reference standard: National Healthcare Safety Network (NHSN), 2015]



Data Reported as of June 01, 2021

Table 19: 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, 01/01/2019–12/31/2020

										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	2020	9	28,221	35	49.85	0.70	0.50	0.97	9	1	11%	1	11%	0.00	0.00	0.47	0.96	2.07		
	2019	9	29,087	34	50.10	0.68	0.48	0.94	9	0	0%	0	0%	0.23	0.37	0.59	0.91	1.23		

Data reported as of June 01, 2021

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 20: Crude (Unadjusted) Rate of Catheter-Associated Urinary Tract Infection (CAUTI) and Catheter Utilization Rates in Long-term Acute Care (LTAC) Facilities by Year, Tennessee, 01/01/2019–12/31/2020

STATE	YEAR	No.	CAUTI	UC Days	CAUTI Rate*	PATIENT DAYS	DU Ratio
Tennessee	2020	9	35	28,221	1.24	96,232	0.29
		9	35	28,221	1.24	96,232	0.29
	2019	9	34	29,087	1.17	94,549	0.31
		9	34	29,087	1.17	94,549	0.31

Data reported as of June 01, 2021

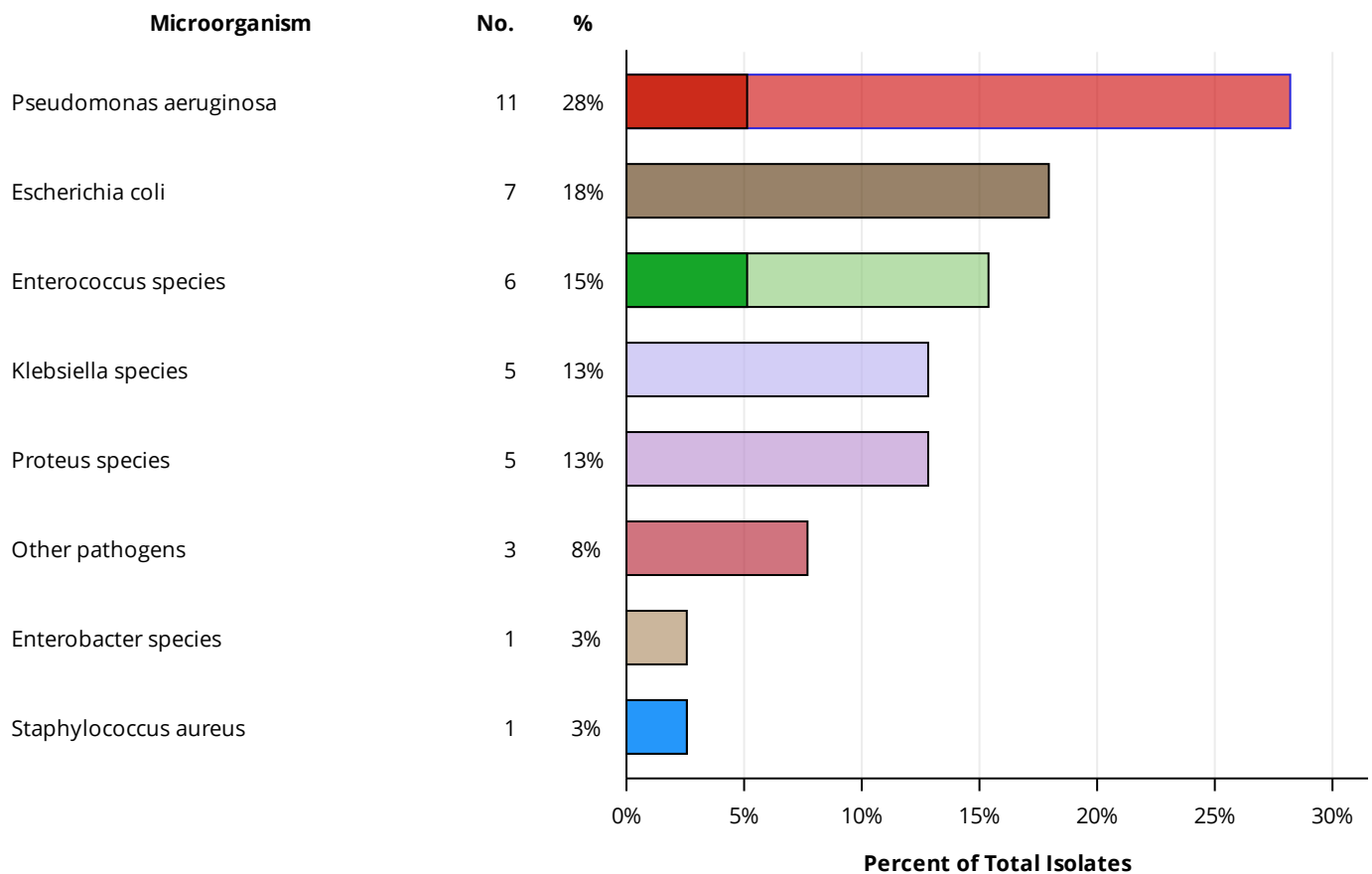
No. = number of facilities; CAUTI = observed number of CAUTI; UC DAYS = urinary catheter days

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

*Per 1,000 urinary catheter days

Figure 44: Microorganisms Identified in Catheter-Associated Urinary Tract (CAUTIs) in Long-term Acute Care (LTAC) Facilities, Tennessee, 01/01/2019–12/31/2019

Number of isolates=39; Number of events=34

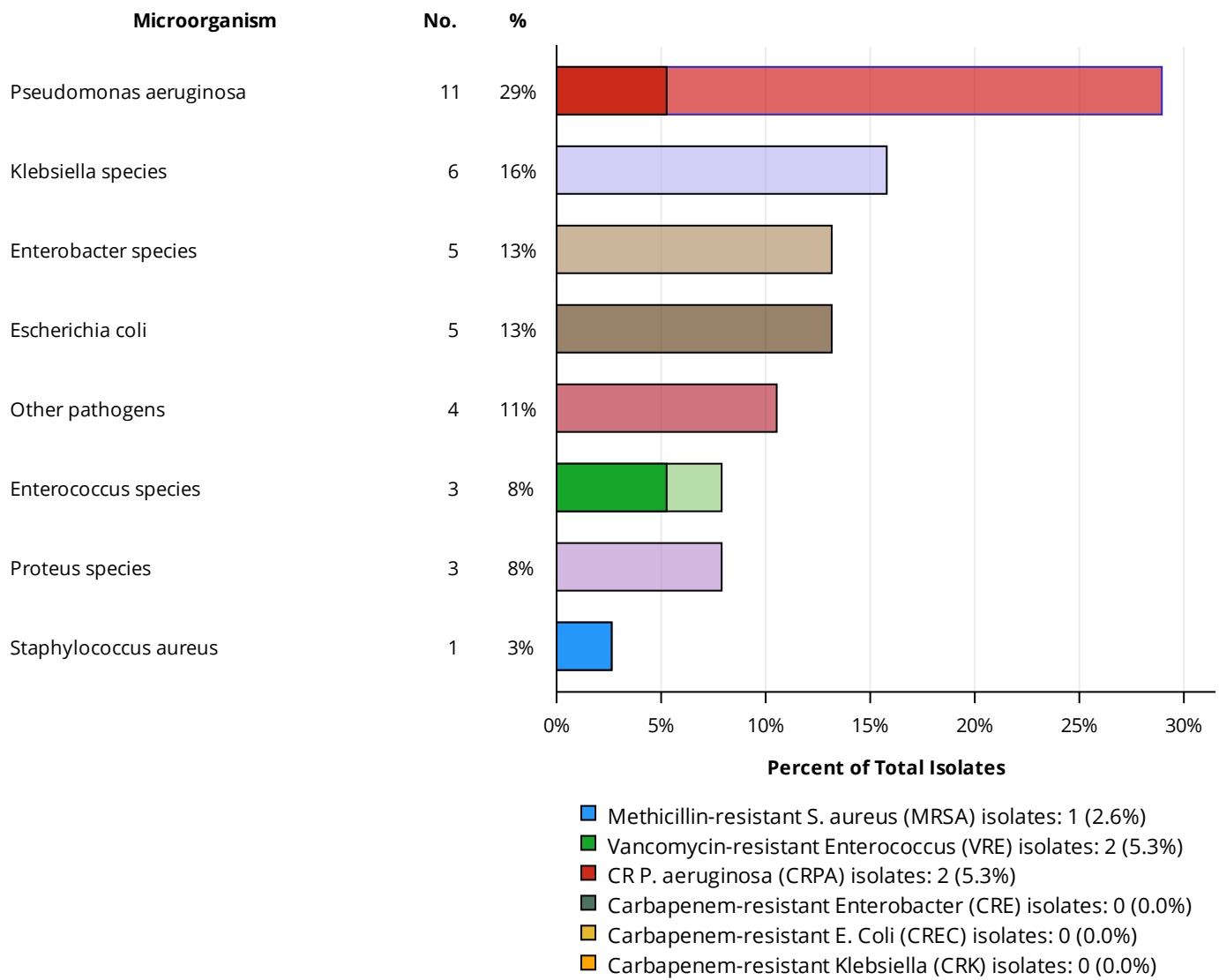


- Methicillin-resistant S. aureus (MRSA) isolates: 1 (2.6%)
- Vancomycin-resistant Enterococcus (VRE) isolates: 2 (5.1%)
- CR P. aeruginosa (CRPA) isolates: 2 (5.1%)
- Carbapenem-resistant Enterobacter (CRE) isolates: 0 (0.0%)
- Carbapenem-resistant E. Coli (CREC) isolates: 0 (0.0%)
- Carbapenem-resistant Klebsiella (CRK) isolates: 0 (0.0%)

Data reported as of June 01, 2021
 Other pathogens = Citrobacter spp., Serratia spp.

Figure 45: Microorganisms Identified in Catheter-Associated Urinary Tract (CAUTIs) in Long-term Acute Care (LTAC) Facilities, Tennessee, 01/01/2020–12/31/2020

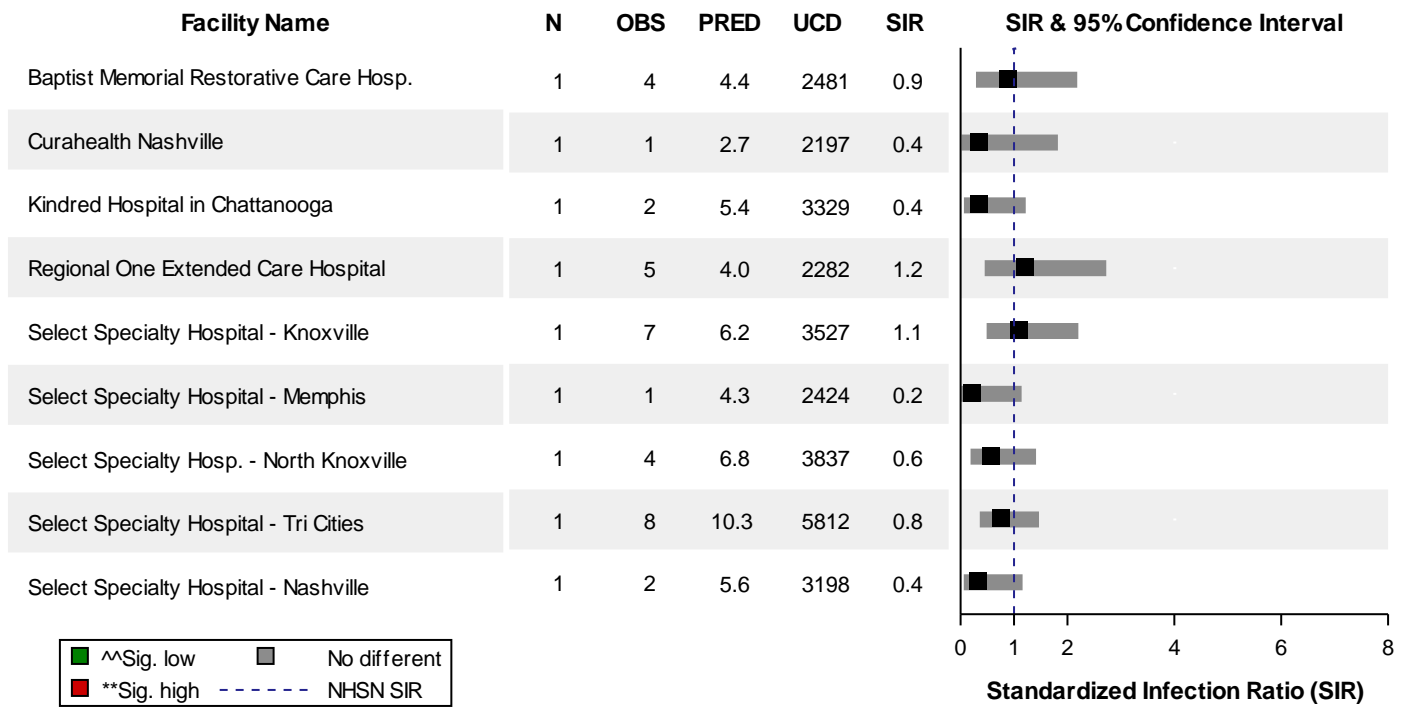
Number of isolates=38; Number of events=35



Data reported as of June 01, 2021

Other pathogens = Citrobacter spp., Providencia spp., Pseudomonas spp., Serratia spp.

Figure 46: CAUTI Standardized Infection Ratio (SIR) for Long-term Acute Care (LTAC) Facilities, Tennessee, 01/01/2019 – 12/31/2019



Data Reported as of June 01, 2021

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

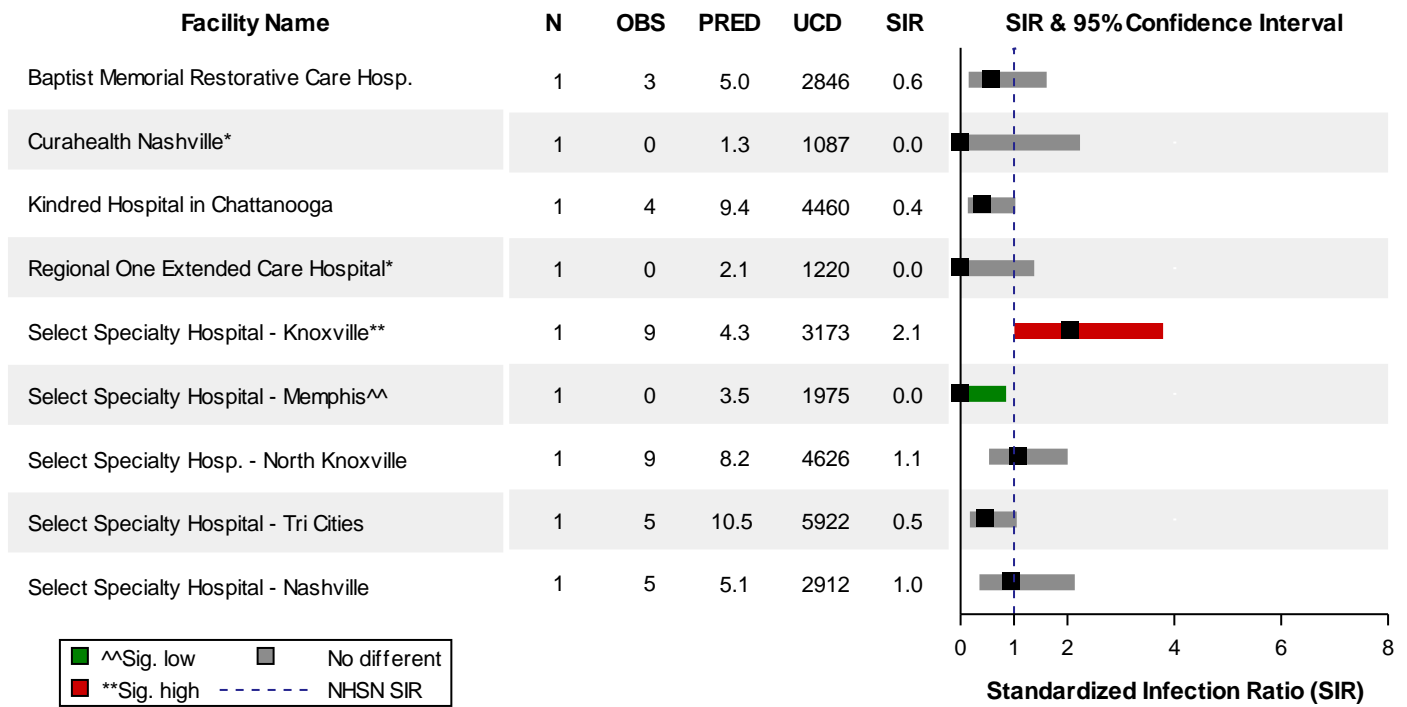
N/A = Data not shown for facilities with <50 urinary catheter days / SIR not calculated for facilities with ≤ 1.0 predicted infection

** Significantly higher than national baseline

^^ Significantly lower than national baseline

* Zero infections, but not statistically significant

Figure 47: CAUTI Standardized Infection Ratio (SIR) for Long-term Acute Care (LTAC) Facilities, Tennessee, 01/01/2020 – 12/31/2020



Data Reported as of June 01, 2021

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 2019: 28

Total number of facilities reporting from January-December 2020: 28

SIRs by Quarter ([Figure 48](#), [Figure 49](#))

- In Q3-2019, the overall CAUTI SIR for Tennessee inpatient rehabilitation facilities (IRFs) increased from 0.61 to 1.66, the largest increase in a single quarter since Q3 to Q4 in 2017. Tennessee's IRFs recording a decrease in SIR from Q3-2019 to Q1-2020 returning to an SIR of 0.62. In remaining three quarters of 2020, the IRF CAUTI SIR was between 0.90 and 1.12. No quarter in 2019 or 2020 achieved the U.S. Department of Health and Human Services [National Action Plan to Prevent Healthcare-Associated Infections](#)¹⁶ prevention target of SIR = 0.75.

Key Percentiles for Tennessee SIRs ([Table 21](#), [Table 22](#))

- The overall CAUTI SIR across all reporting IRFs in Tennessee for the 2019 year was not statistically significantly different than the 2015 national SIR of 1 (SIR=0.99; 95% CI: 0.63, 1.48). The overall CAUTI SIR across all reporting IRFs in Tennessee for 2020 was also not statistically significantly different than the 2015 national SIR of 1 (SIR=0.94; 95% CI: 0.61, 1.39).
- In 2019, the median facility-specific SIR was 1.20, indicating that half of all reporting Tennessee IRFs with at least 1 predicted infection had an SIR at or below 1.20. In 2019, the median facility-specific SIR was recorded as 0 which indicates that an SIR was not calculated in half for the Tennessee IRFs in 2020.

Microorganisms Associated with CAUTIs in IRFs ([Figure 50](#), [Figure 51](#))

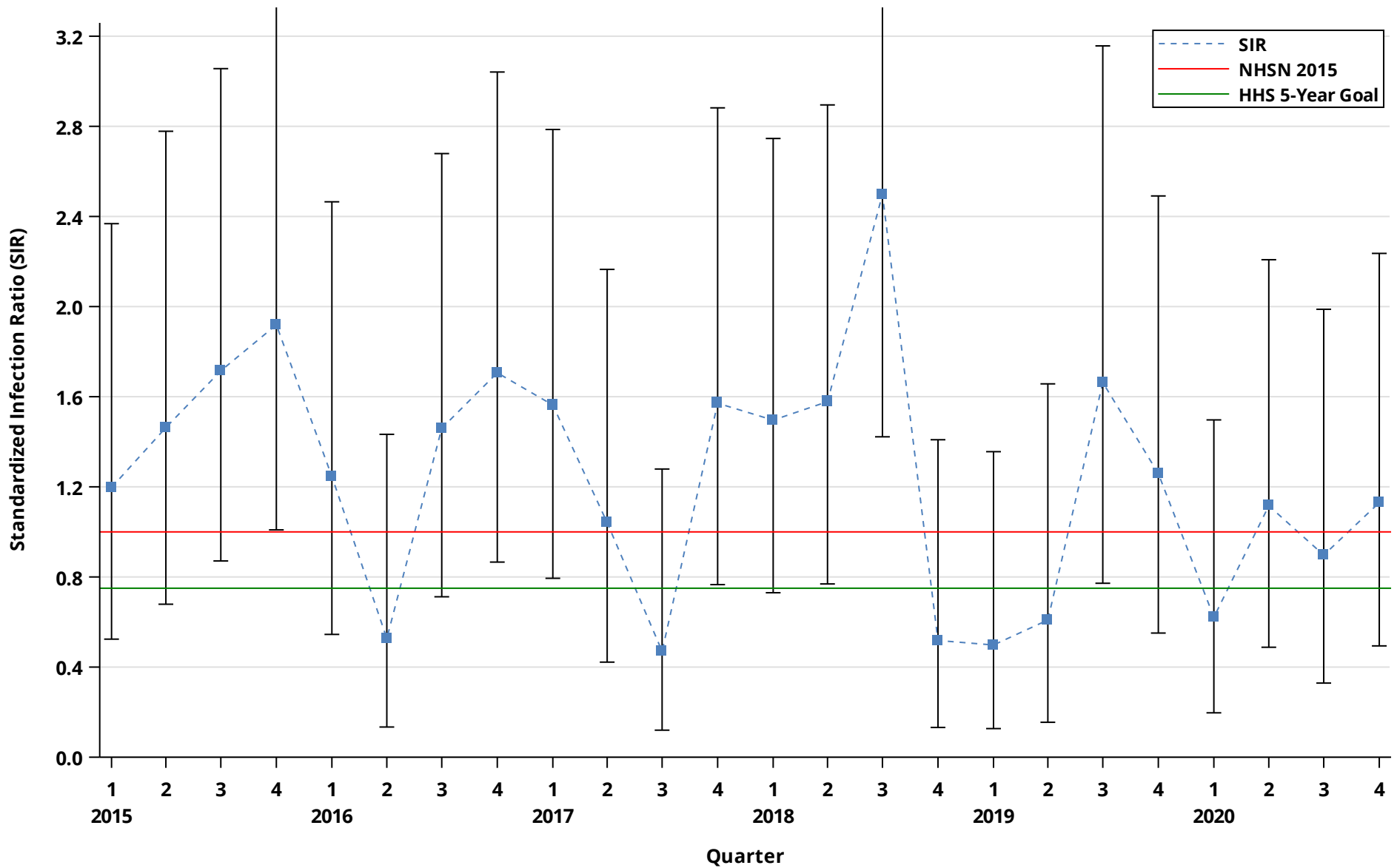
- Among the 22 pathogens isolated from 21 IRF CAUTIs in 2019, the most common pathogens were *Escherichia coli* (32%), *Klebsiella* species (27%), and *Pseudomonas aeruginosa* (23%). There was a single isolate of Methicillin-resistant *S. aureus* (MRSA) in 2020.
- Among the 27 pathogens isolated from 23 IRF CAUTIs in 2020, the most common pathogens were *Pseudomonas aeruginosa* (33%), *Escherichia coli* (22%), and *Enterobacter* species (15%). There was a single isolate of Carbapenem-resistant Acinetobacter (CRA) in 2020.

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

Facility-Specific SIRs (Figure 52, Figure 53)

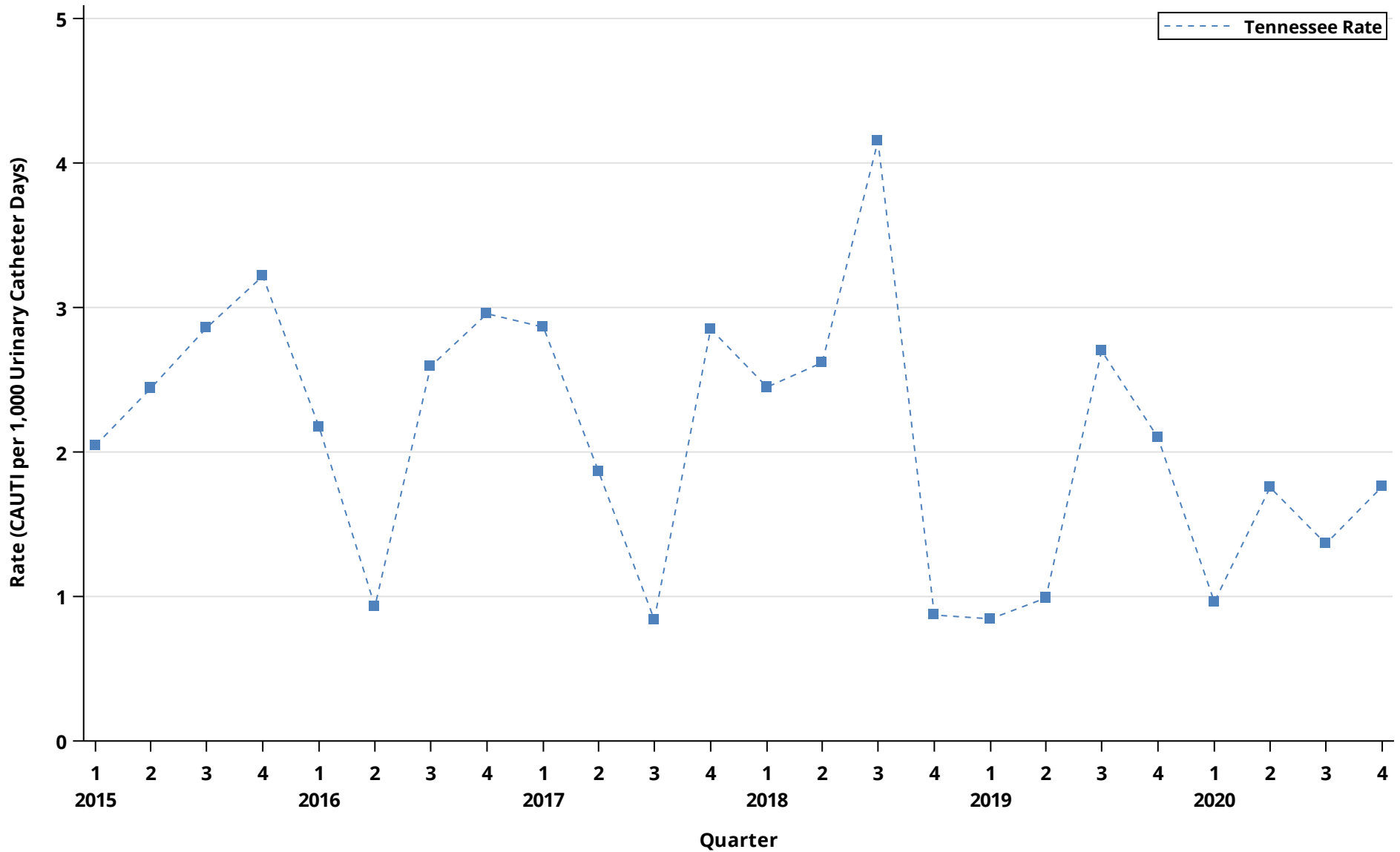
- A single CAUTI SIR that accounts for all reporting IRFs is displayed in [Figure 52](#) and [Figure 53](#). The bar representing the confidence interval is green if the CAUTI SIR was significantly lower than the national SIR of 1 for 2015 and red if the CAUTI SIR was significantly higher than 1. Some facilities 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 2019 and 2020, no Tennessee IRFs had a CAUTI SIR statistically significantly lower than the 2015 national baseline SIR of 1. In 2019 there was one facility that had a CAUTI SIR statistically significantly higher than the baseline SIR.

Figure 48: Standardized Infection Ratios (SIR) for Catheter-Associated Urinary Tract Infections (CAUTIs) in Inpatient Rehabilitation Facilities (IRF) by Quarter, Tennessee, 01/01/2015–12/31/2020 [Reference standard: National Healthcare Safety Network (NHSN), 2015]



Data Reported as of June 01, 2021

Figure 49: Crude (Unadjusted) Rates of Catheter-Associated Urinary Tract Infections (CAUTIs) in Inpatient Rehabilitation Facilities (IRF) by Quarter, Tennessee, 01/01/2015–12/31/2020 [Reference standard: National Healthcare Safety Network (NHSN), 2015]



Data Reported as of June 01, 2021

Table 21: Key Percentiles for Facility-Specific Catheter-Associated Urinary Tract Infection (CAUTI) Standardized Infection Ratios (SIRs) in Inpatient Rehabilitation Facilities (IRF) Facilities by Year, Tennessee, 01/01/2019–12/31/2020

										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	2020	28	15,786	23	24.48	0.94	0.61	1.39	10	0	0%	0	0%	0.00	0.00	0.00	1.37	1.50	
	2019	28	12,879	21	21.32	0.99	0.63	1.48	7	0	0%	1	14%	0.00	0.00	1.20	1.74	3.08	

Data reported as of June 01, 2021

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 22: Crude (Unadjusted) Rate of Catheter-Associated Urinary Tract Infection (CAUTI) and Catheter Utilization Rates in Inpatient Rehabilitation Facilities (IRF) by Year, Tennessee, 01/01/2019–12/31/2020

STATE	YEAR	No.	CAUTI	UC Days	CAUTI Rate*	PATIENT DAYS	DU Ratio
Tennessee	2020	57	46	31,572	1.46	466,402	0.07
	2019	57	42	25,758	1.63	459,776	0.06

Data reported as of June 01, 2021

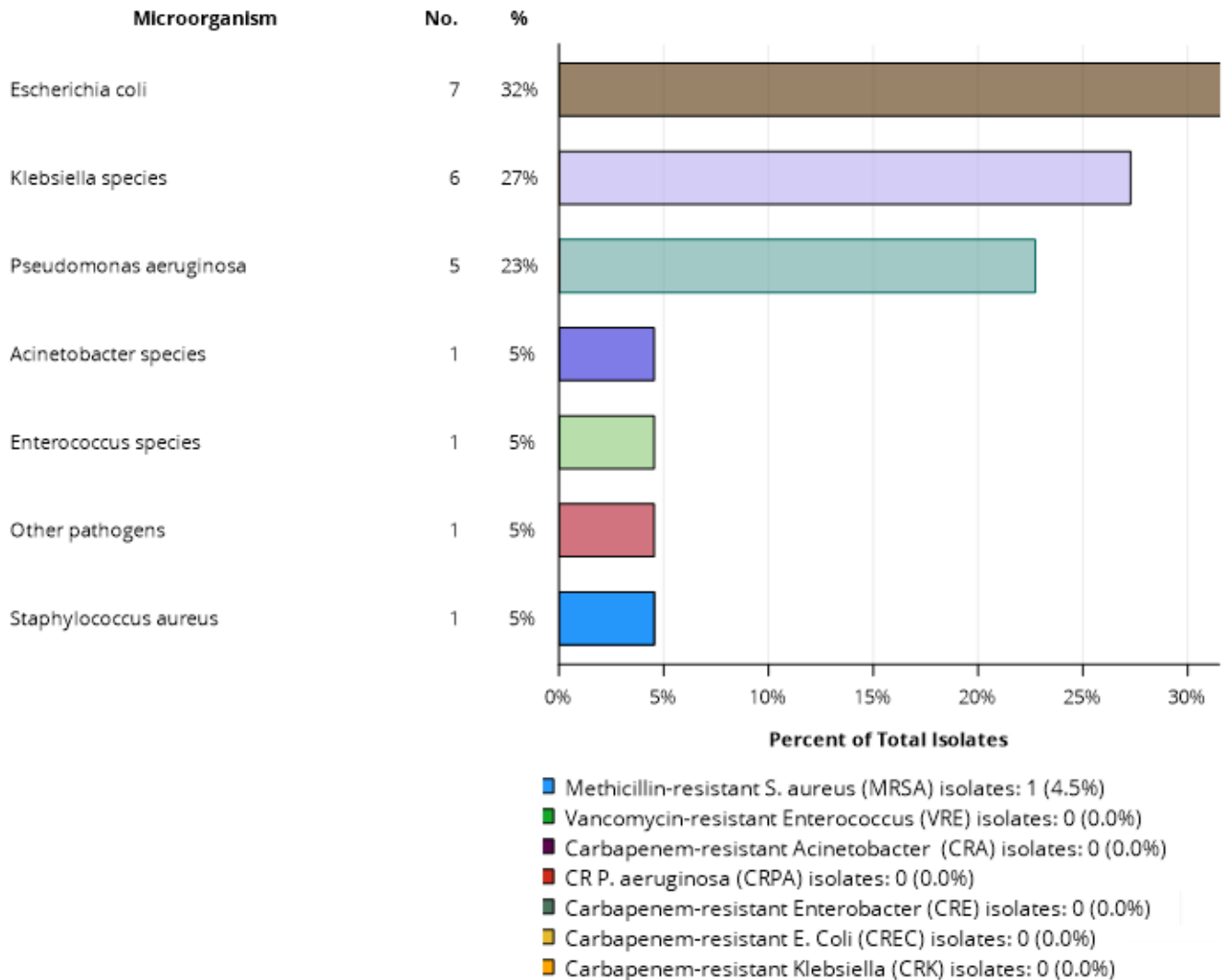
No. = number of facilities; CAUTI = observed number of CAUTI; UC DAYS = urinary catheter days

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

*Per 1,000 urinary catheter days

Figure 50: Microorganisms Identified in Catheter-Associated Urinary Tract (CAUTIs) in Inpatient Rehabilitation Facilities (IRF), Tennessee, 01/01/2019–12/31/2019

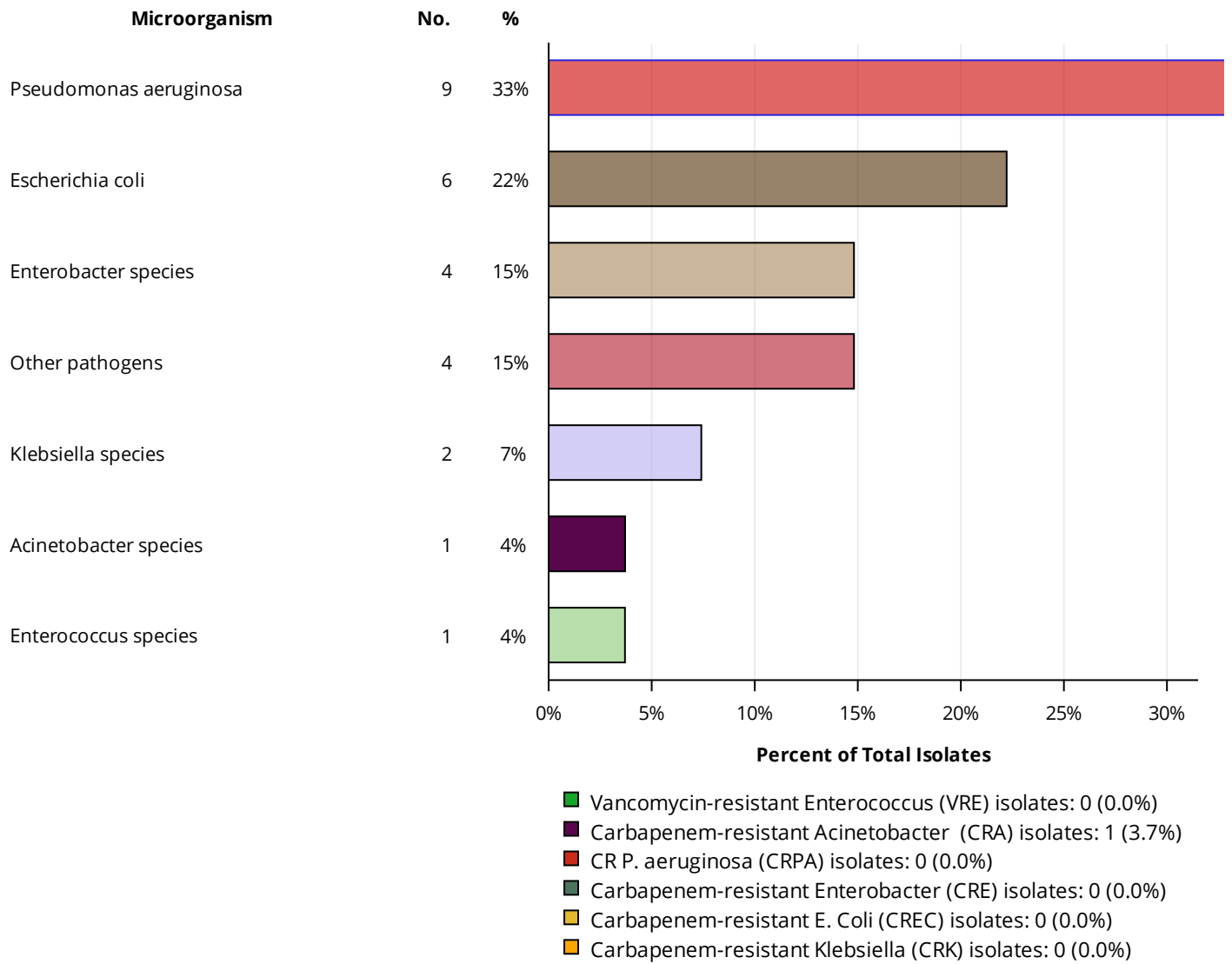
Number of isolates=22; Number of events=21



Data reported as of June 01, 2021
 Other pathogens = *Proteus* spp.

Figure 51: Microorganisms Identified in Catheter-Associated Urinary Tract (CAUTIs) in Inpatient Rehabilitation Facilities (IRF), Tennessee, 01/01/2020–12/31/2020

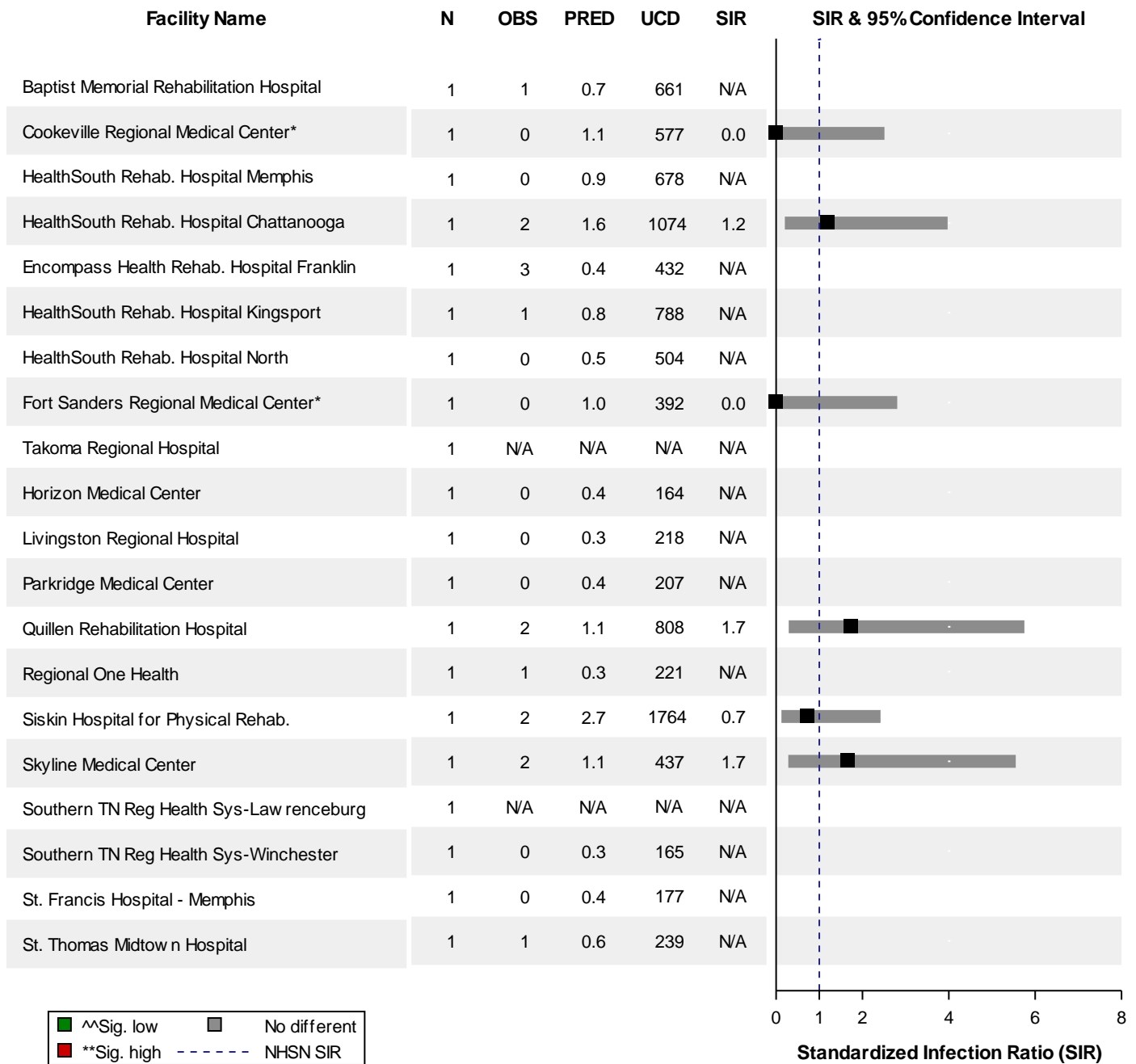
Number of isolates=27; Number of events=23



Data reported as of June 01, 2021

Other pathogens = Citrobacter spp., Proteus spp.

Figure 52: CAUTI Standardized Infection Ratio (SIR) for Inpatient Rehabilitation Facilities (IRF) with ≥ 1 Predicted CAUTI, Tennessee, 01/01/2019 – 12/31/2019



Data Reported as of June 01, 2021

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

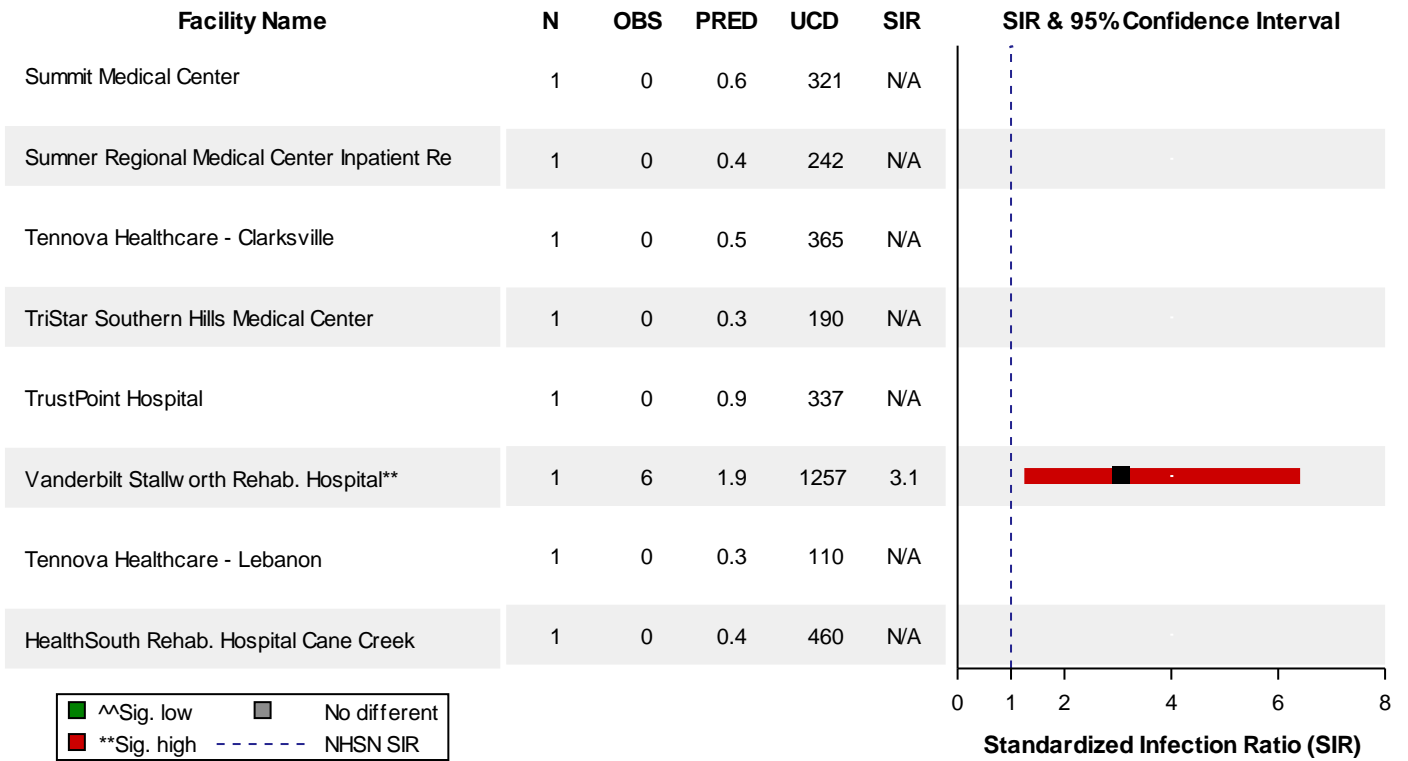
N/A = Data not shown for facilities with <50 urinary catheter days / SIR not calculated for facilities with ≤ 1.0 predicted infection

** Significantly higher than national baseline

^^ Significantly lower than national baseline

* Zero infections, but not statistically significant

Figure 52 (cont'd)



Data Reported as of June 01, 2021

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

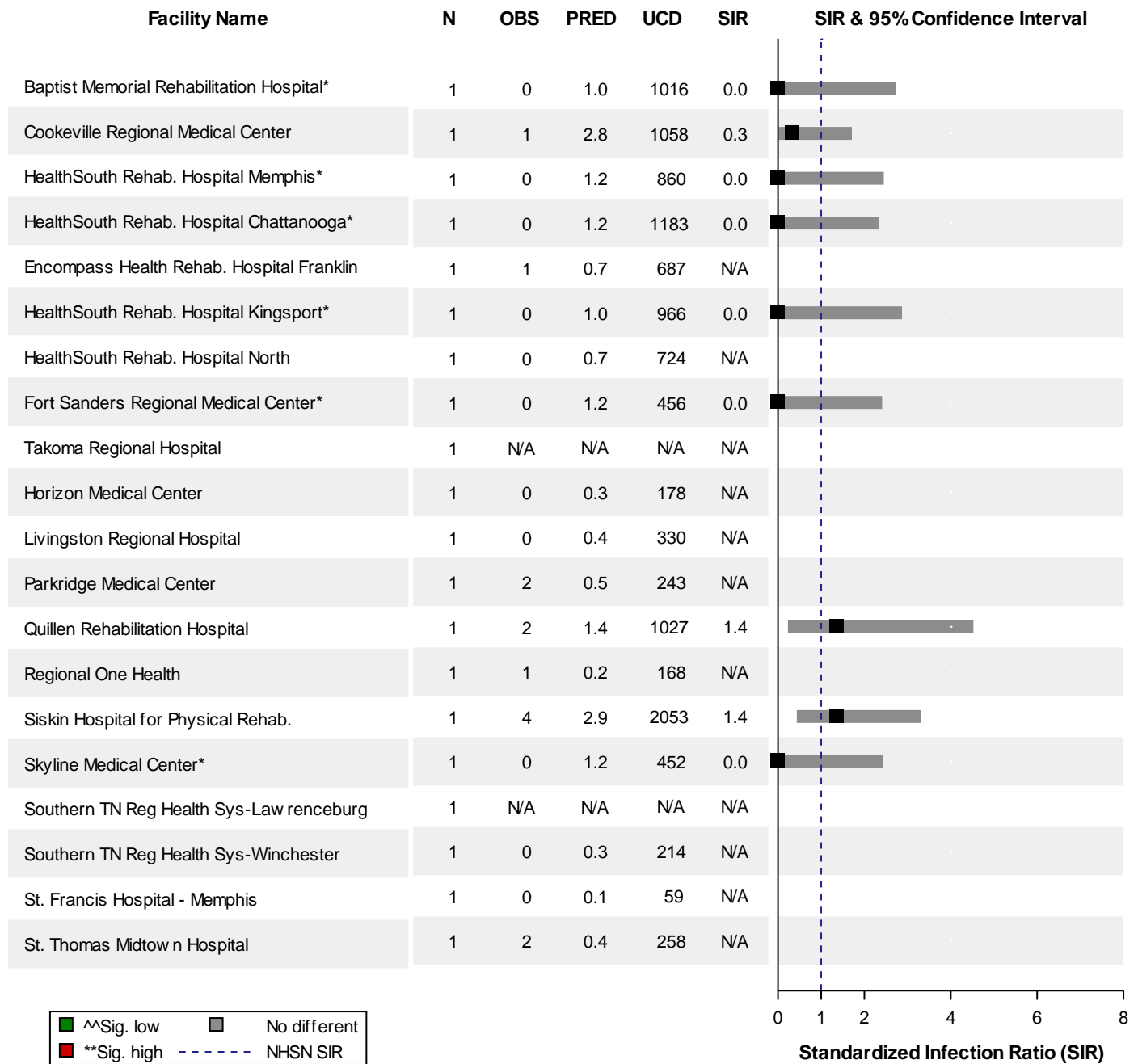
N/A = Data not shown for facilities with <50 urinary catheter days / SIR not calculated for facilities with ≤1.0 predicted infection

** Significantly higher than national baseline

^^ Significantly lower than national baseline

* Zero infections, but not statistically significant

Figure 53: CAUTI Standardized Infection Ratio (SIR) for Inpatient Rehabilitation Facilities (IRF) with ≥ 1 Predicted CAUTI, Tennessee, 01/01/2020 – 12/31/2020



Data Reported as of June 01, 2021

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

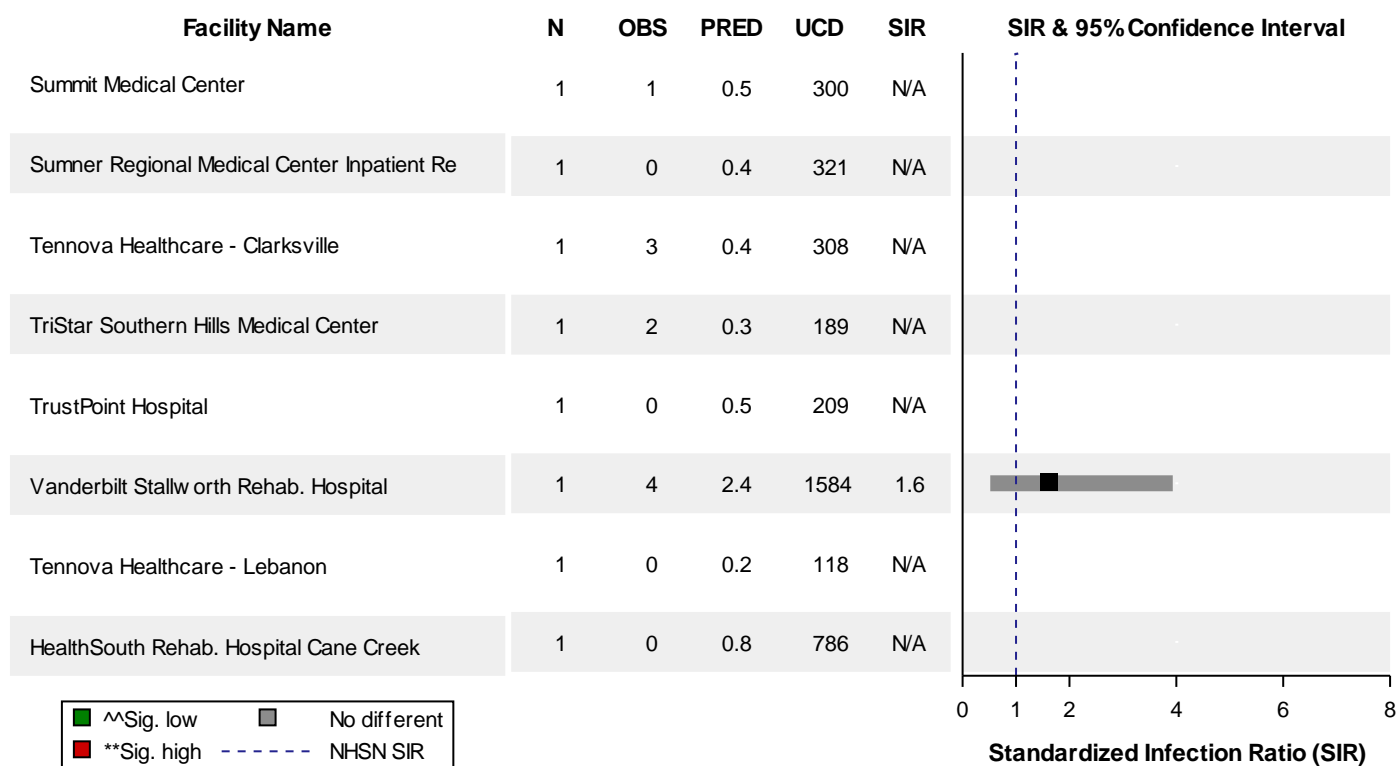
N/A = Data not shown for facilities with <50 urinary catheter days / SIR not calculated for facilities with ≤ 1.0 predicted infection

** Significantly higher than national baseline

^^ Significantly lower than national baseline

* Zero infections, but not statistically significant

Figure 53 (cont'd)



Data Reported as of June 01, 2021

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](#)¹⁷).

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 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](#)¹⁸, 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 an SSI following required procedures.

Changes to Surveillance Definitions

In January 2013, NHSN revised the definition of primary closure for NHSN operative procedures to include procedures where devices remain extruding through the incision at the end of surgery. For 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.

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.

¹⁷ http://www.cdc.gov/HAI/pdfs/ssi/SSI_tagged.pdf

¹⁸ <http://www.cdc.gov/nhsn/PDFs/pscManual/9pscSSIcurrent.pdf>

SSI Risk Adjustment

For individuals undergoing surgical procedures, risk adjustment is calculated through logistic regression models which use national [NHSN baseline data from 2015](#)¹⁹ to represent a standard population²⁰. 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:

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

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** is used for the annual CDC publication of national benchmarks and includes
 - Inpatient procedures
 - Deep incisional primary and organ/space SSIs
 - SSIs identified during admission or readmission to the reporting facility

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.

¹⁹ <https://www.cdc.gov/nhsn/2015rebaseline/index.html>

²⁰ 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.

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 β 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 SSI²¹.

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

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

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

²¹ 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>)

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 summed²².

²² 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 2019: 26

Total number of facilities reporting from January-December 2020: 24

SIRs by Quarter (Figure 54, Figure 55, Figure 56)

- In 2019, the All-CABG SSI SIR increased from 0.75 in Q1 to 1.15 in Q4. 2020 saw an initial decrease to an SIR of 0.61 in Q1 and then a rise through the rest of the year to an SIR of 0.87 in Q4-2020. The Complex Admission/Readmission SSI SIR fluctuated in 2019 from 0.62 in Q1 to a 2019 high of 1.08 in Q3. Fluctuating SIRs for Complex Admission/Readmission SSI in 2020 with a low of 0.34 in Q1-2020 and a high of 0.81 in Q4-2020. The U.S. Department of Health and Human Services' [National Action Plan to Prevent Healthcare-Associated Infections](#)²³ 2020 prevention target of SIR = 0.70 was not achieved in any quarter for either the all CABG SSI model or the Complex Admission/Readmission SSI model in 2019 or 2020.

Rates, Infection Sites, and Detection (Figure 57, Figure 58, Figure 59, Figure 60)

- In 2019, 125 SSIs were reported among 6,487 CBGB/C procedures in Tennessee, for a crude rate of 1.93 infections per 100 operations. Overall, SSIs related to CBGB/C procedures were most often superficial primary (38%) and deep primary infections (22%). SSIs related to CBGB/C procedures were most often identified upon readmission (72%).
- In 2020, 83 SSIs were reported among 5,497 CBGB/C procedures in Tennessee, for a crude rate of 1.51 infections per 100 operations. Overall, SSIs related to CBGB/C procedures were most often superficial primary (47%) and deep primary infections (22%). SSIs related to CBGB/C procedures continued to be most often identified upon readmission (63%).

²³ <http://www.hhs.gov/ash/initiatives/hai/actionplan/>

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

- The All-SSI SIR for SSIs related to CBGB/C procedures in Tennessee for 2019 was not statistically significantly different than the national SIR of 1 (SIR=1.00; 95% CI: 0.82, 1.21). The All-SSI SIR for CBGB/C for 2020 was statistically significantly lower than the SIR for 2015 with an SIR of 0.75 (95% CI: 0.59, 0.95).
- In 2019, the median All SSI SIR for CBGB/C procedures was 0.76, indicating that half of reporting facilities with at least 1 predicted infection had an All-SSI SIR at or below 0.76. In 2020, the median All SSI SIR for CBGB/C procedures was 0.82.
- The Complex A/R SIRs for SSIs related to CBGB/C procedures in Tennessee in 2019 was not significantly different from predicted (SIR=0.88, 95%CI: 0.65, 1.17). The Complex A/R SIRs for SSIs related to CBGB/C procedures in 2020 was statistically lower than the 2015 baseline with an SIR of 0.56 (95%CI: 0.38, 0.81).
- For 2019, the median Complex A/R SIR for CBGB/C procedures was 0.54, indicating that half of reporting facilities with at least 1 predicted infection had a Complex A/R SIR at or below 0.54. In 2020, the median Complex A/R SIR for CBGB/C procedures was 0.45.

Microorganisms associated with SSIs following CBGB/C Procedures (Figure 61, Figure 62)

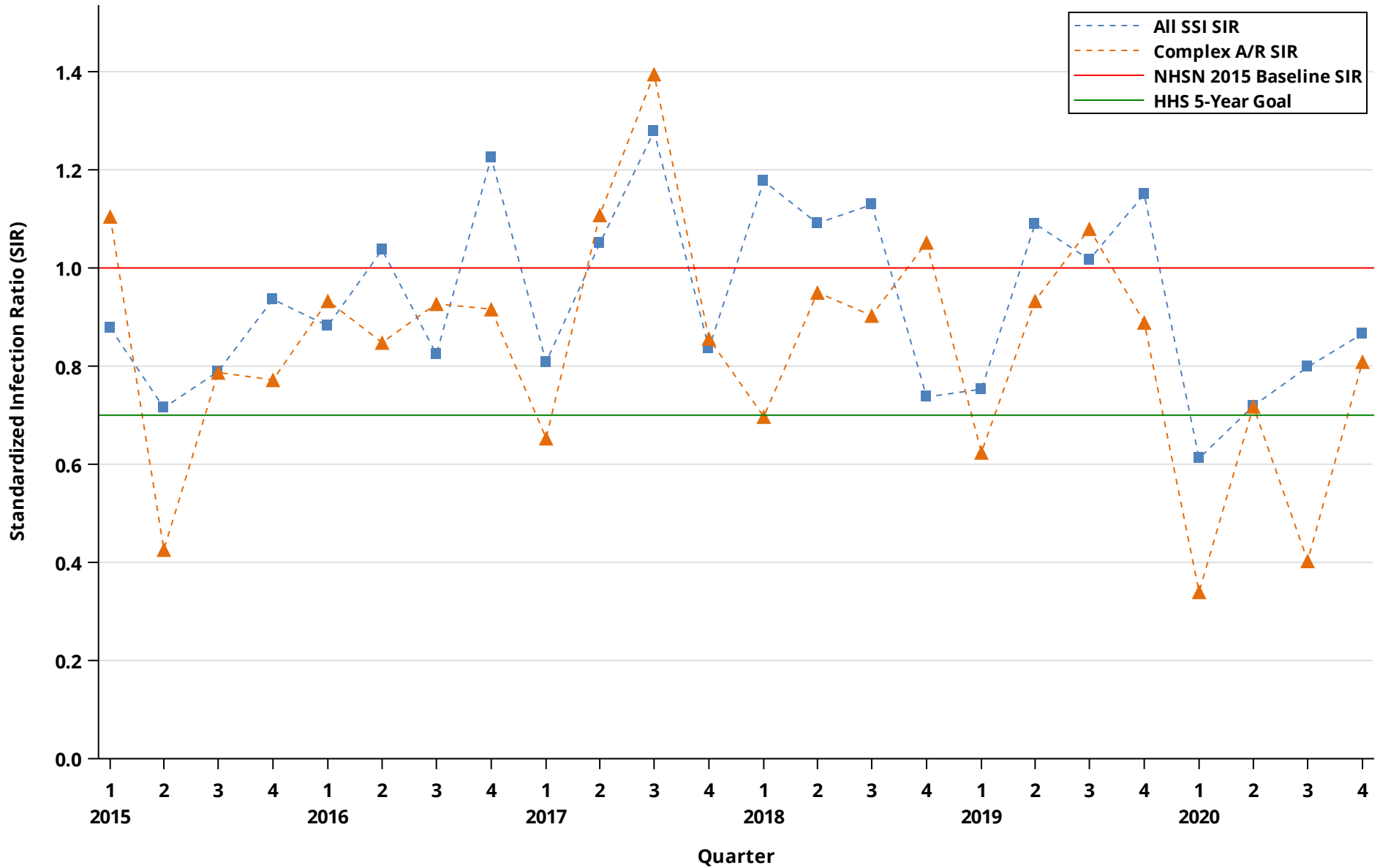
- Among the 120 pathogens isolated from 125 SSIs following CBGB/C procedures in 2019, the most common pathogens were *Staphylococcus aureus* (24%), coagulase-negative *Staphylococcus* species (14%), and Methicillin-resistant *Staphylococcus aureus* (MRSA) accounted for 10% of total positive isolates.
- Among the 81 pathogens isolated from 83 SSIs following CBGB/C procedures in 2020, the most common pathogens were *Staphylococcus aureus* (27%) and coagulase-negative *Staphylococcus* species (11%). *Serratia* species (11%). Methicillin-resistant *Staphylococcus aureus* (MRSA) accounted for 11% of total positive isolates.

Facility-Specific SIRs (Figure 63, Figure 64)

- The Complex A/R SIR for SSIs related to CABG procedures that accounts for all qualifying colon procedures performed at a given facility from in 2019 and 2020 are displayed in [Figure 63](#) and [Figure 64](#) respectively. The bar representing the confidence interval is green if the Complex A/R SIR for SSIs related to CABG 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.

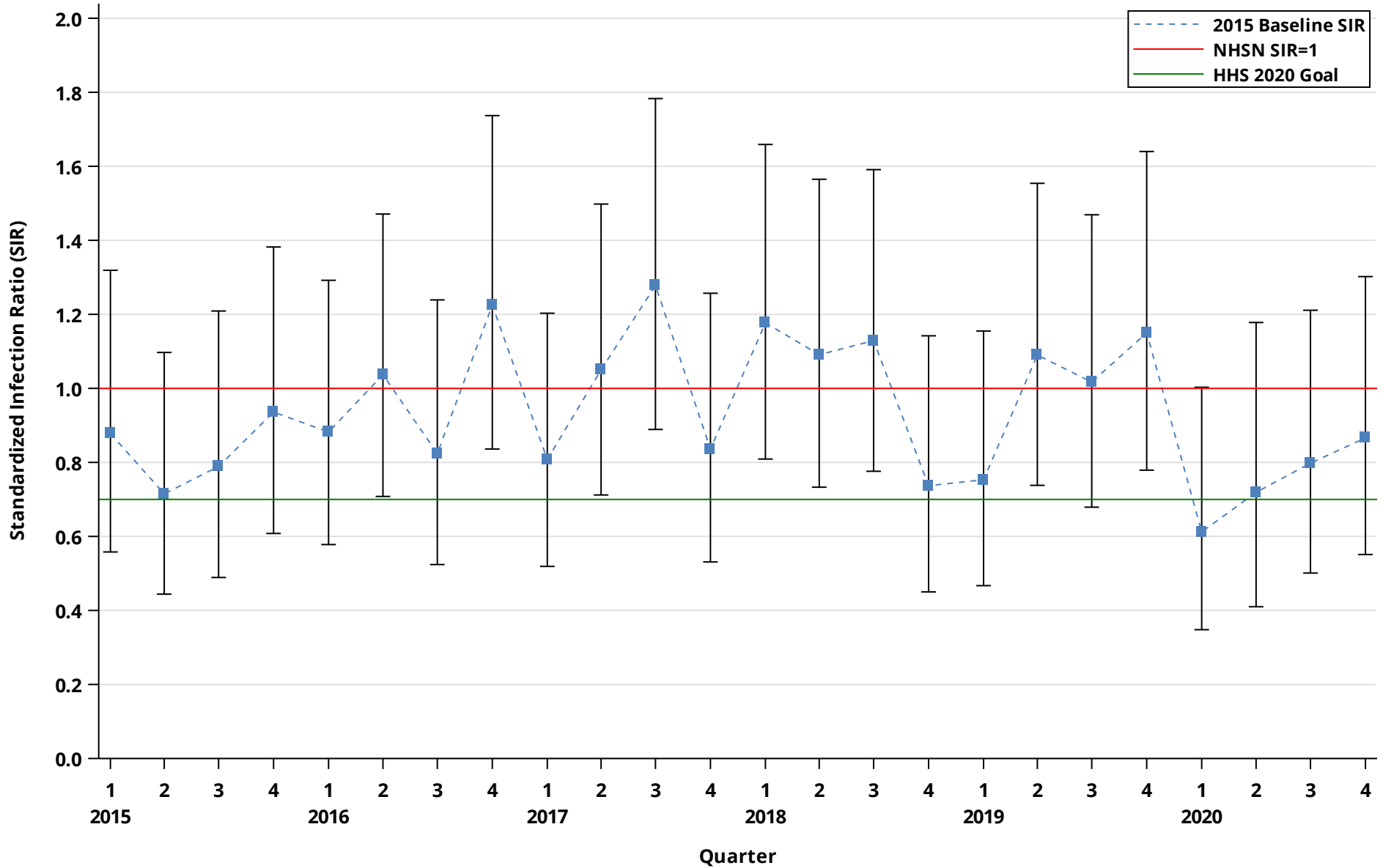
- In 2019, one facility had a Complex A/R SIR for SSIs related to coronary artery bypass graft procedures that was statistically significantly lower than the 2015 national baseline SIR of 1. In 2019, one facility also had a Complex A/R SIR that was statistically higher than the baseline SIR. In 2020, four facilities had a Complex A/R SIR for SSIs that was statistically significantly lower than the 2015 national baseline SIR of 1 while no facility had a Complex A/R SIR that was statistically higher than the baseline predicted SIR.

Figure 54: Coronary Artery Bypass Graft (CBGB/C) All and Complex Admission/Readmission Surgical Site Infection (SSI) Standardized Infection Ratios (SIRs) by Quarter, Tennessee, 01/01/2015–12/31/2020 [Reference standard: National Healthcare Safety Network (NHSN), 2015]



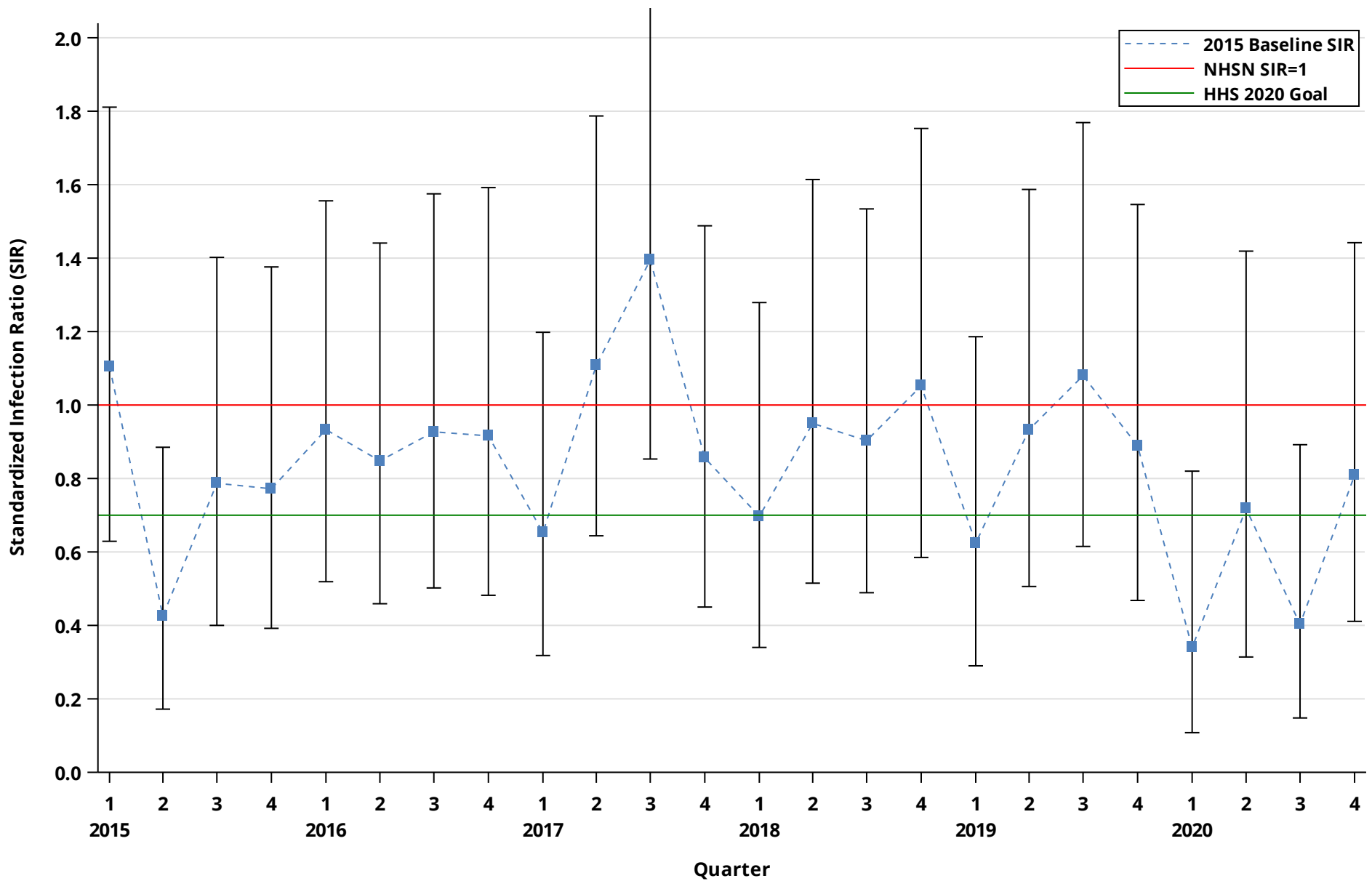
Data Reported as of June 01, 2021

Figure 55: Coronary Artery Bypass Graft (CBGB/C) All Surgical Site Infection (SSI) Standardized Infection Ratio (SIR) by Quarter, Tennessee, 01/01/2015–12/31/2020



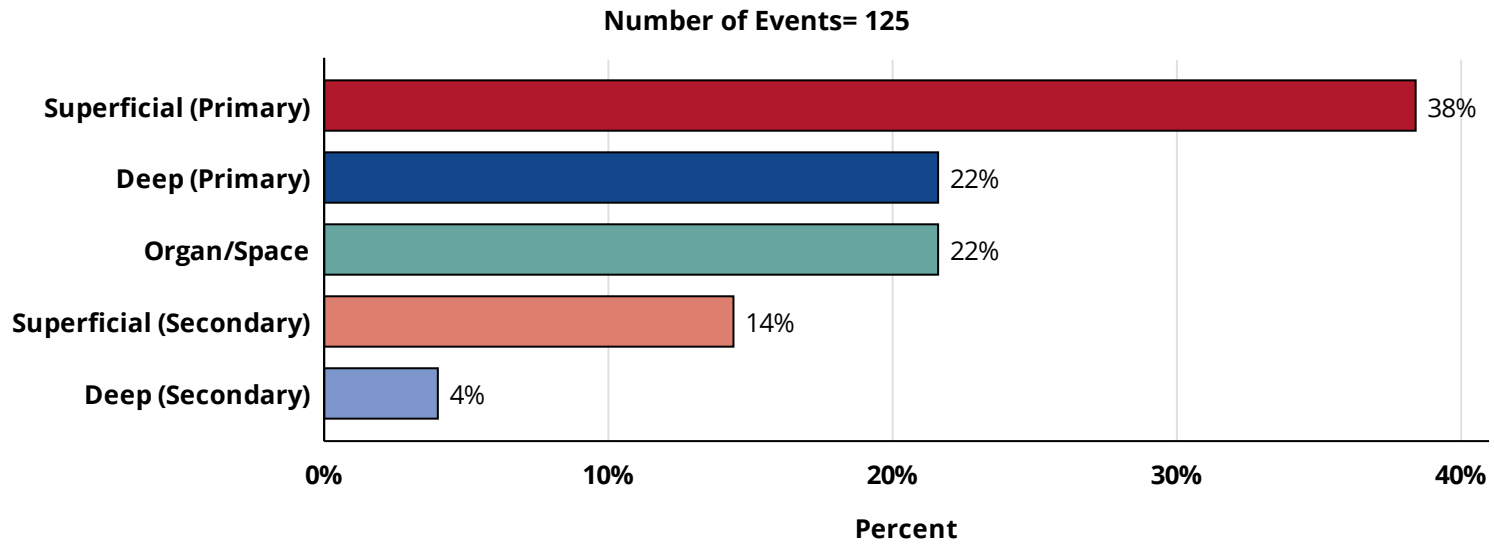
Data Reported as of June 01, 2021

Figure 56: Coronary Artery Bypass Graft (CBGB/C) Complex Admission/Readmission Surgical Site Infection (SSI) Standardized Infection Ratio (SIR) by Quarter, Tennessee, 01/01/2015–12/31/2020



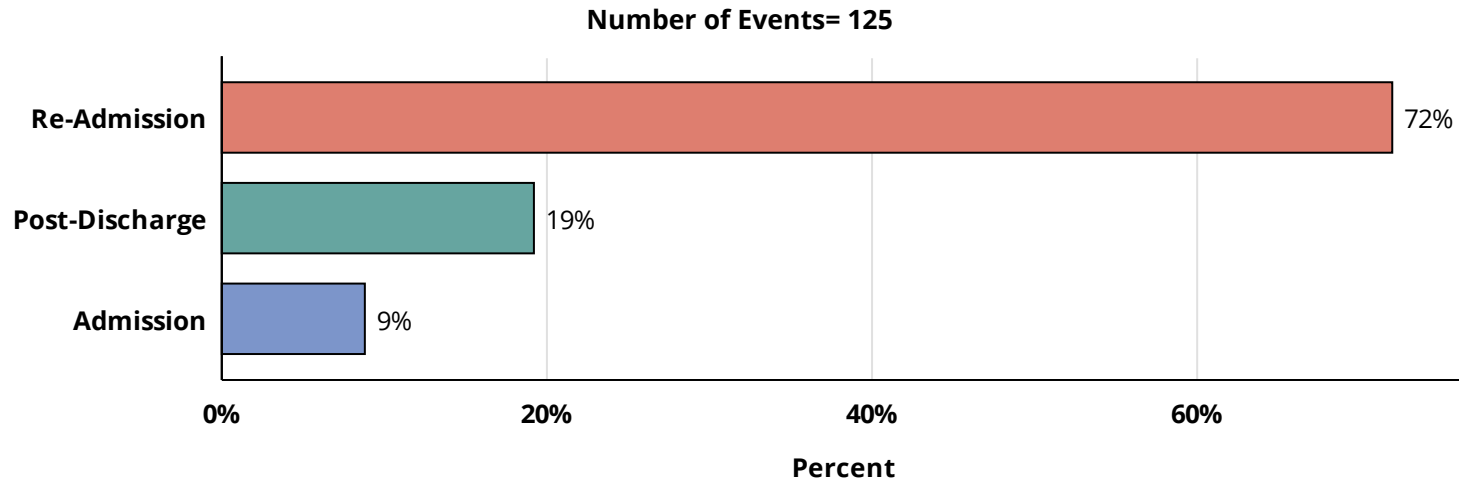
Data Reported as of June 01, 2021

Figure 57: Coronary Artery Bypass Graft (CBGB/C) Surgical Site Infections by Site, Tennessee, 01/01/2019–12/31/2019



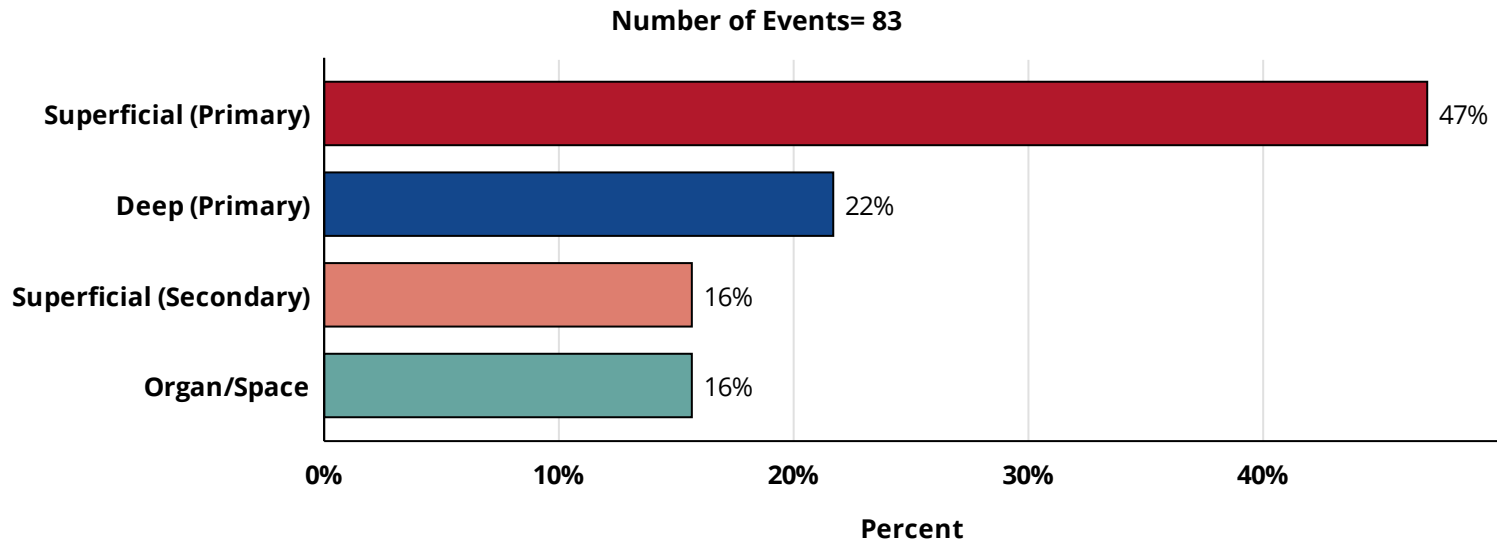
Data Reported as of June 01, 2021

Figure 58: Coronary Artery Bypass Graft (CBGB/C) Surgical Site Infections Detection, Tennessee, 01/01/2019–12/31/2019



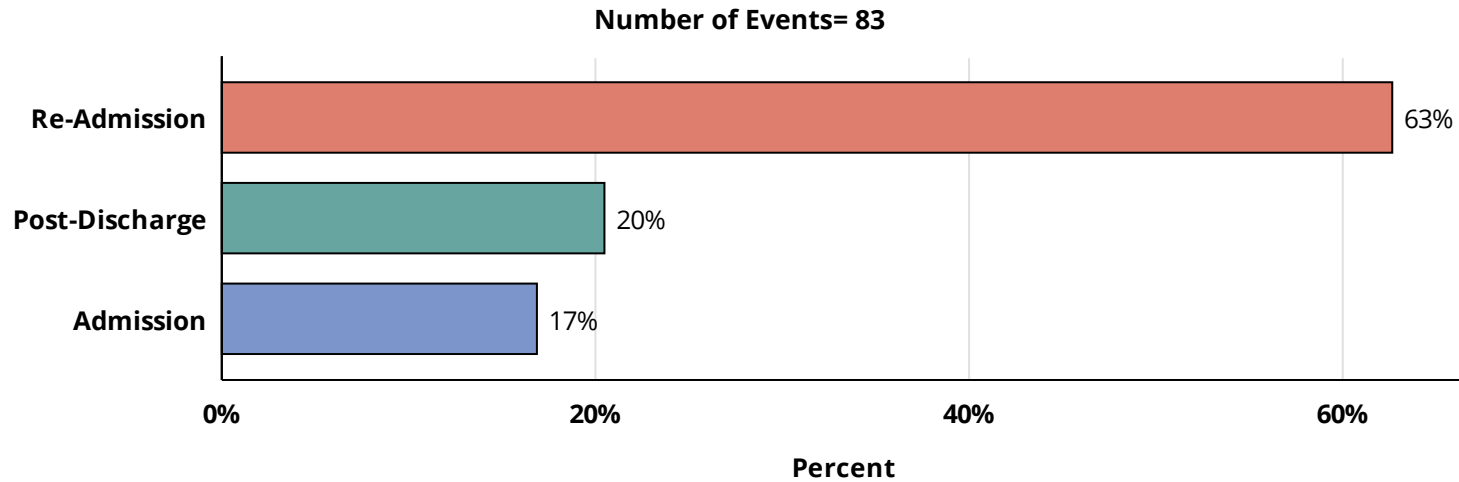
Data Reported as of June 01, 2021

Figure 59: Coronary Artery Bypass Graft (CBGB/C) Surgical Site Infections by Site, Tennessee, 01/01/2020–12/31/2020



Data Reported as of June 01, 2021

Figure 60: Coronary Artery Bypass Graft (CBGB/C) Surgical Site Infections Detection, Tennessee, 01/01/2020–12/31/2020



Data Reported as of June 01, 2021

Table 23: Coronary Artery Bypass Graft (CBGB/C) All and Complex Admission/Readmission (AR) Surgical Site Infection (SSI) Standardized Infection Ratios (SIRs) by Reporting Year, Tennessee, 01/01/2019–12/31/2020

											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	2020	24	5,487	69	91.64	0.75	0.59	0.95	19	4	21%	2	11%	0.00	0.28	0.82	1.20	2.90	
		2019	26	6,473	101	100.82	1.00	0.82	1.21	20	1	5%	1	5%	0.00	0.37	0.76	1.17	1.96	
	Complex A/R	2020	24	5,487	26	46.30	0.56	0.38	0.81	14	4	29%	0	0%	0.00	0.00	0.45	1.44	2.14	
		2019	26	6,473	45	51.00	0.88	0.65	1.17	17	1	6%	1	6%	0.00	0.00	0.54	1.22	2.01	

Data reported as of June 01, 2021

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 24: Crude (Unadjusted) Rate of Coronary Artery Bypass Graft (CBGB/C) Surgical Site Infection (SSI) by Year, Tennessee, 01/01/2019–12/31/2020

STATE	YEAR	No. of facilities	No. of procedures	No. of SSI	TN Rate*
Tennessee	2020	21	5,497	83	1.51
	2019	20	6,487	125	1.93

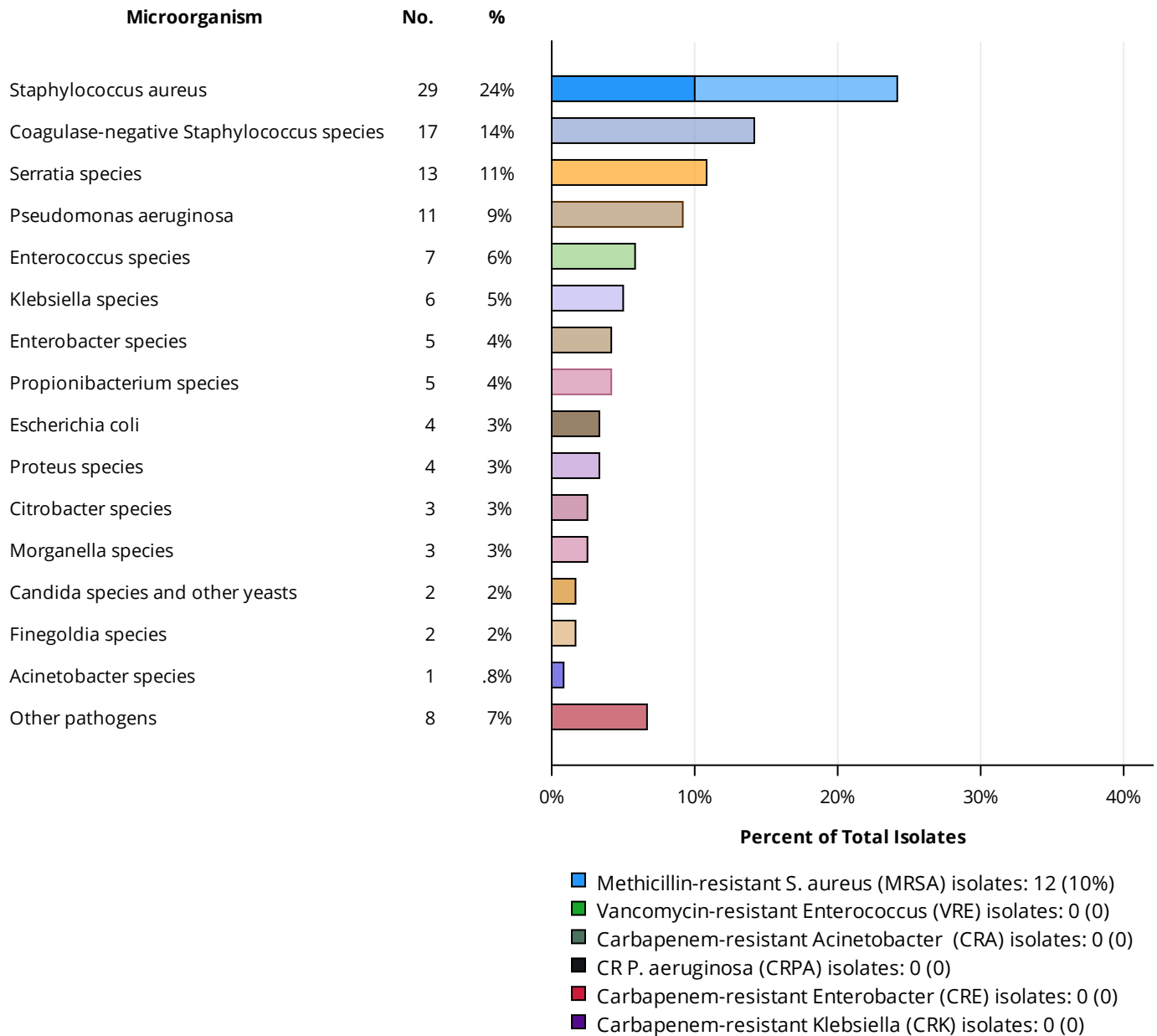
Data reported as of June 01, 2021

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

*per 100 procedures

Figure 61: Microorganisms Identified from Surgical Site Infections (SSI) following Coronary Artery Bypass Graft (CBGB/C) Procedures, Tennessee, 01/01/2019–12/31/2019

Number of isolates=120; Number of events=125

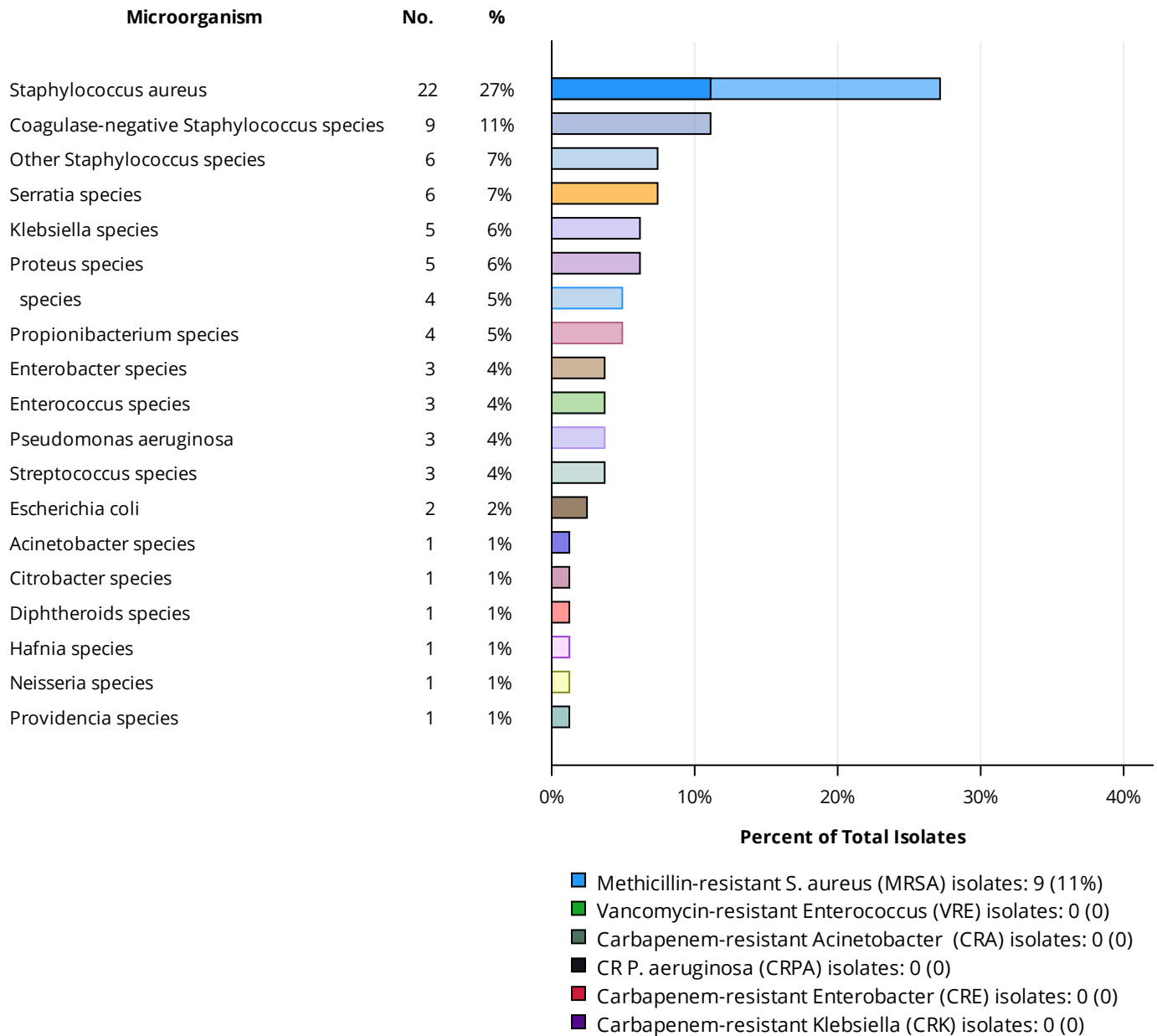


Data reported as of June 01, 2021

Other pathogens = Actinomyces spp., Anaerococcus spp., B19 spp., Haemophilus spp., Other Staphylococcus spp., Prevotella spp., Stenotrophomonas spp., Streptococcus spp.

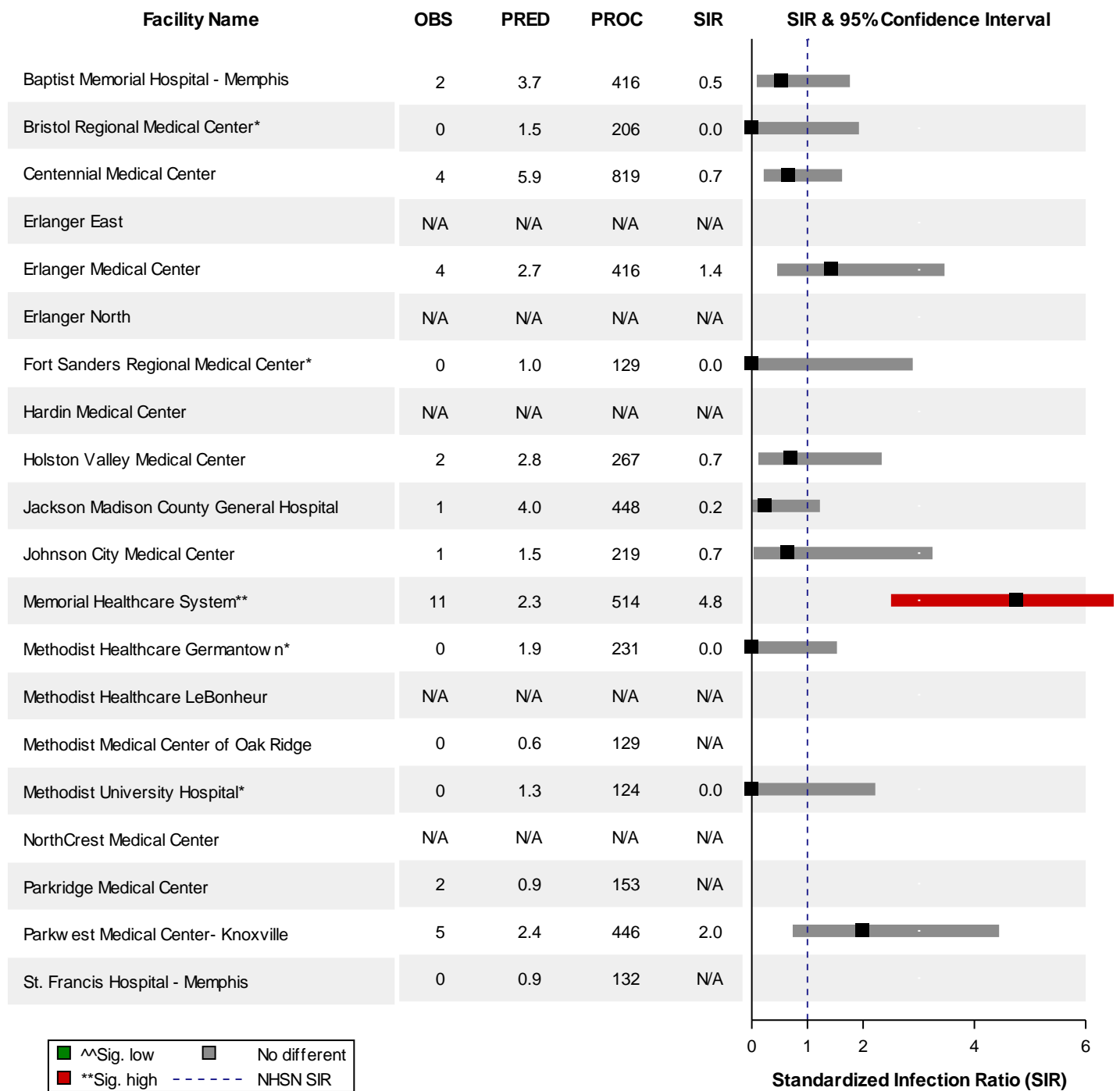
Figure 62: Microorganisms Identified from Surgical Site Infections (SSI) following Coronary Artery Bypass Graft (CBGB/C) Procedures, Tennessee, 01/01/2020–12/31/2020

Number of isolates=81; Number of events=83



Data reported as of June 01, 2021
Other pathogens =

Figure 63: Coronary Artery Bypass Graft (CBGB/C) Complex Admission/Readmission Surgical Site Infection (SSI) Standardized Infection Ratios (SIRs) in Acute Care Facilities, Tennessee, 01/01/2019 – 12/31/2019



Data Reported as of June 01, 2021

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

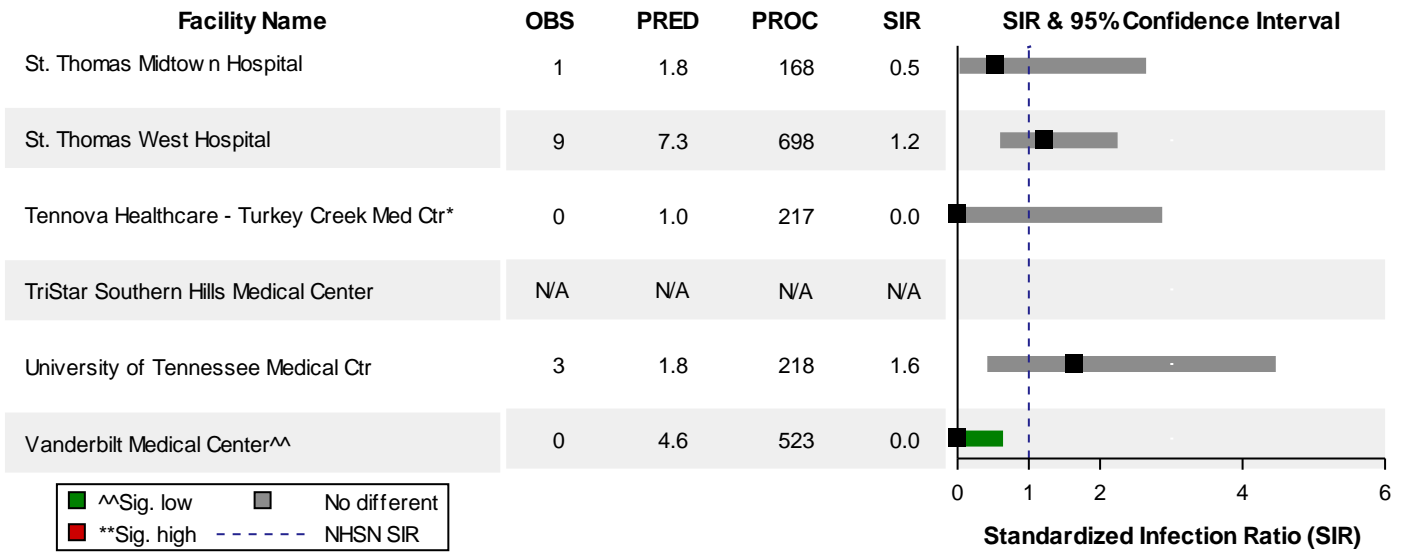
N/A = Data not shown for facilities with <20 procedures performed / SIR not calculated for facilities with <1 predicted infection

** Significantly higher than 2015 national baseline

^^ Significantly lower than 2015 national baseline

* Zero infections, but not statistically significant

Figure 63 (cont'd)



Data Reported as of June 01, 2021

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

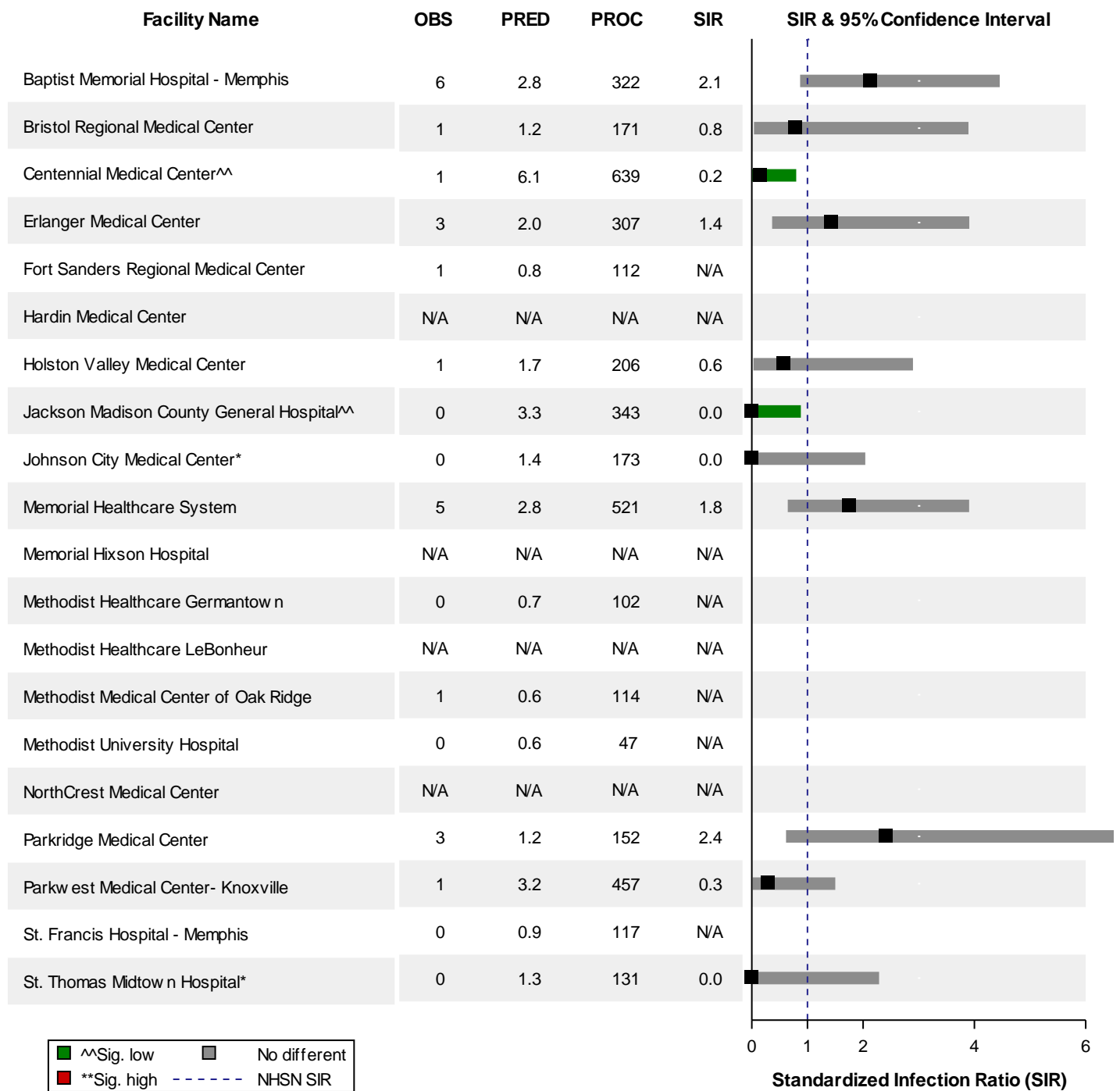
N/A = Data not shown for facilities with <20 procedures performed / SIR not calculated for facilities with <1 predicted infection

** Significantly higher than 2015 national baseline

^^ Significantly lower than 2015 national baseline

* Zero infections, but not statistically significant

Figure 64: Coronary Artery Bypass Graft (CBGB/C) Complex Admission/Readmission Surgical Site Infection (SSI) Standardized Infection Ratios (SIRs) in Acute Care Facilities, Tennessee, 01/01/2020 – 12/31/2020



Data Reported as of June 01, 2021

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

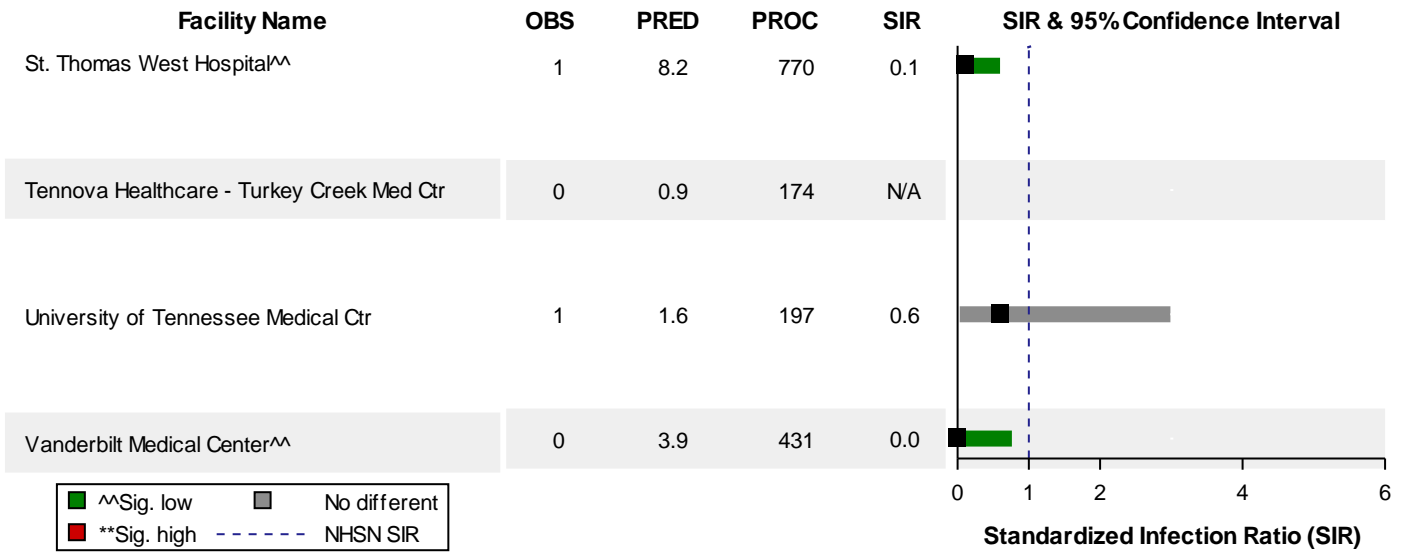
N/A = Data not shown for facilities with <20 procedures performed / SIR not calculated for facilities with <1 predicted infection

** Significantly higher than 2015 national baseline

^^ Significantly lower than 2015 national baseline

* Zero infections, but not statistically significant

Figure 64 (cont'd)



Data Reported as of June 01, 2021

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)

Colon Procedures

SSIs Related to Colon (COLO) Procedures:

Total number of facilities reporting from January-December 2019: 95

Total number of facilities reporting from January-December 2020: 89

SIRs by Quarter ([Figure 65](#), [Figure 66](#), [Figure 67](#))

- In 2019, the All-SSI COLO SIR was below the predicted SIR in two of the four quarters. The All-SSI COLO SIR ranged from 0.77 to 0.99. The Complex Admission/Readmission COLO SSI SIR in 2019 fluctuated from 0.72 to 1.26 and was variable throughout the year. The U.S. Department of Health and Human Services' [National Action Plan to Prevent Healthcare-Associated Infections](#)²⁴ 2020 prevention target of SIR = 0.70 was not achieved for either model in 2019.
- In 2020, the ALL COLO SSI SIR remained lower than predicted for all quarters with a low of 0.52 in Q1 to a high of 0.67 during the second quarter. The Complex Admission/Readmission COLO SSI SIR also remained lower than predicted for all quarters in 2020 a low of 0.63 in Q1, Q3, and Q4, and a high of 0.66 in Q2-2020. The only quarter lower than the U.S. Department of Health and Human Services' [National Action Plan to Prevent Healthcare-Associated Infections](#)²⁵ 2020 prevention target of SIR = 0.70 was in Q1-2020 with the ALL COLO SSI model.

Rates, Infection Sites, and Detection ([Figure 68](#), [Figure 69](#), [Figure 70](#), [Figure 71](#))

- In 2019, 485 SSIs were reported among 9,197 colon procedures in Tennessee, for a crude rate of 5.27 infections per 100 procedures. Overall, SSIs related to colon procedures were most often organ/space (56%), and superficial primary (35%). SSIs related to colon procedures were least often deep primary infections (8%). SSIs related to colon procedures were most often identified during the same hospital admission as the procedure (53%).
- In 2020, 318 SSIs were reported among 7,818 colon procedures in Tennessee, for a crude rate of 4.07 infections per 100 procedures. Overall, SSIs related to colon procedures were again most often organ/space (57%), and superficial primary (35%). SSIs were least often deep primary infections (8%). In 2020, SSIs related to colon procedures were most often identified during the same hospital admission as the procedure (55%).

²⁴ <http://www.hhs.gov/ash/initiatives/hai/actionplan/>

²⁵ <http://www.hhs.gov/ash/initiatives/hai/actionplan/>

Key percentiles for Tennessee SIRs ([Table 25](#), [Table 26](#))

- The All-SSI SIR for SSIs related to COLO procedures in Tennessee for 2019 and 2020 were statistically significantly lower than the 2015 national SIR of 1. 2019 reported an All-COLO SSI SIR of 0.86 (95% CI: 0.78, 0.94) while there was an All-COLO SIR of 0.60 (95% CI: 0.52, 0.68) in 2020.
- In 2019, the median All SSI SIR for COLO procedures was 0.74, indicating that half of reporting facilities with at least 1 predicted infection had an All-SSI SIR at or below 0.74. From January-December 2018, the median All SSI SIR for COLO procedures was 0.50.
- The Complex A/R SIR for SSIs related to COLO procedures in Tennessee in 2020 was statistically significantly lower than predicted from the 2015 national SIR of 1 (SIR=0.64; 95% CI: 0.53, 0.75). The Complex A/R SIR for SSIs related to COLO procedures in Tennessee in 2019 was not statistically significantly different from the 2015 national SIR of 1 (SIR=0.94; 95% CI: 0.82, 1.07).
- In 2019, the median Complex A/R SIR for COLO procedures was 0.74, indicating that half of reporting facilities with at least 1 predicted infection had a Complex A/R SIR at or below 0.74. In 2020, the median Complex A/R SIR for COLO procedures was 0.48.

Microorganisms associated with SSIs following Colon Procedures ([Figure 72](#), [Figure 73](#))

- Among the 633 pathogens isolated from 485 SSIs following colon procedures in 2019, the most common pathogens were *Escherichia coli* (23%), and Enterococcus species (17%). Methicillin-resistant *Staphylococcus aureus* (MRSA) accounted for 3% and vancomycin-resistant *Enterococcus* (VRE) for 2% of total isolates while there was a single isolated Carbapenem-resistant *P. aeruginosa* (CRPA) pathogen.
- Among the 382 pathogens isolated from 318 SSIs following colon procedures in 2020, the most common pathogens were again *Escherichia coli* (21%), and Enterococcus species (17%). Methicillin-resistant *Staphylococcus aureus* (MRSA) accounted for 3%, vancomycin-resistant *Enterococcus* (VRE) for 2%, and Carbapenem-resistant *P. aeruginosa* (CRPA) accounted for 1% of total isolates.

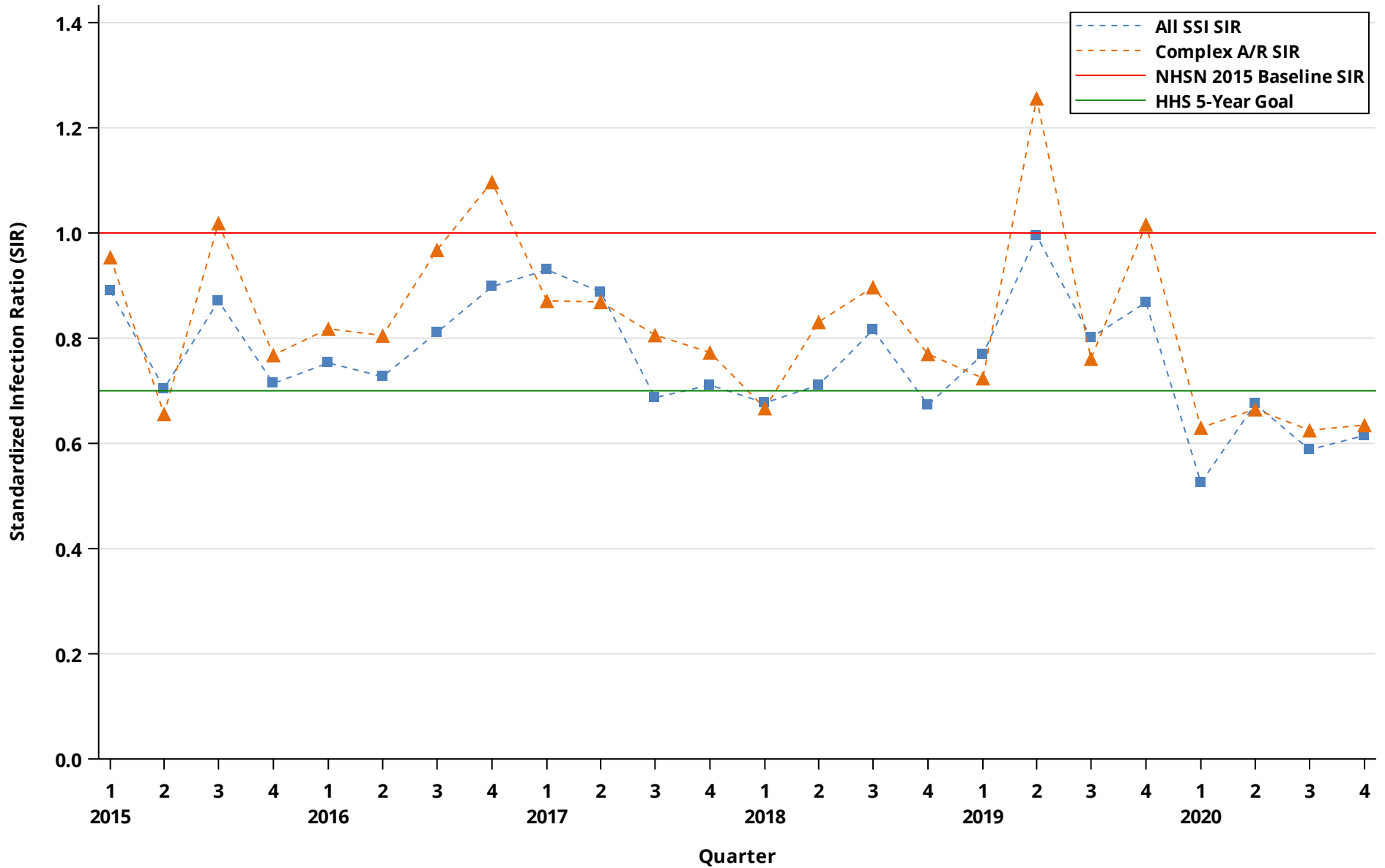
Facility-Specific SIRs ([Figure 74](#), [Figure 75](#))

- The Complex A/R SIR for SSIs related to COLO procedures that accounts for all qualifying colon procedures performed at a given facility from in 2019 and 2020 are displayed in [Figure 74](#) and [Figure 75](#). 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.

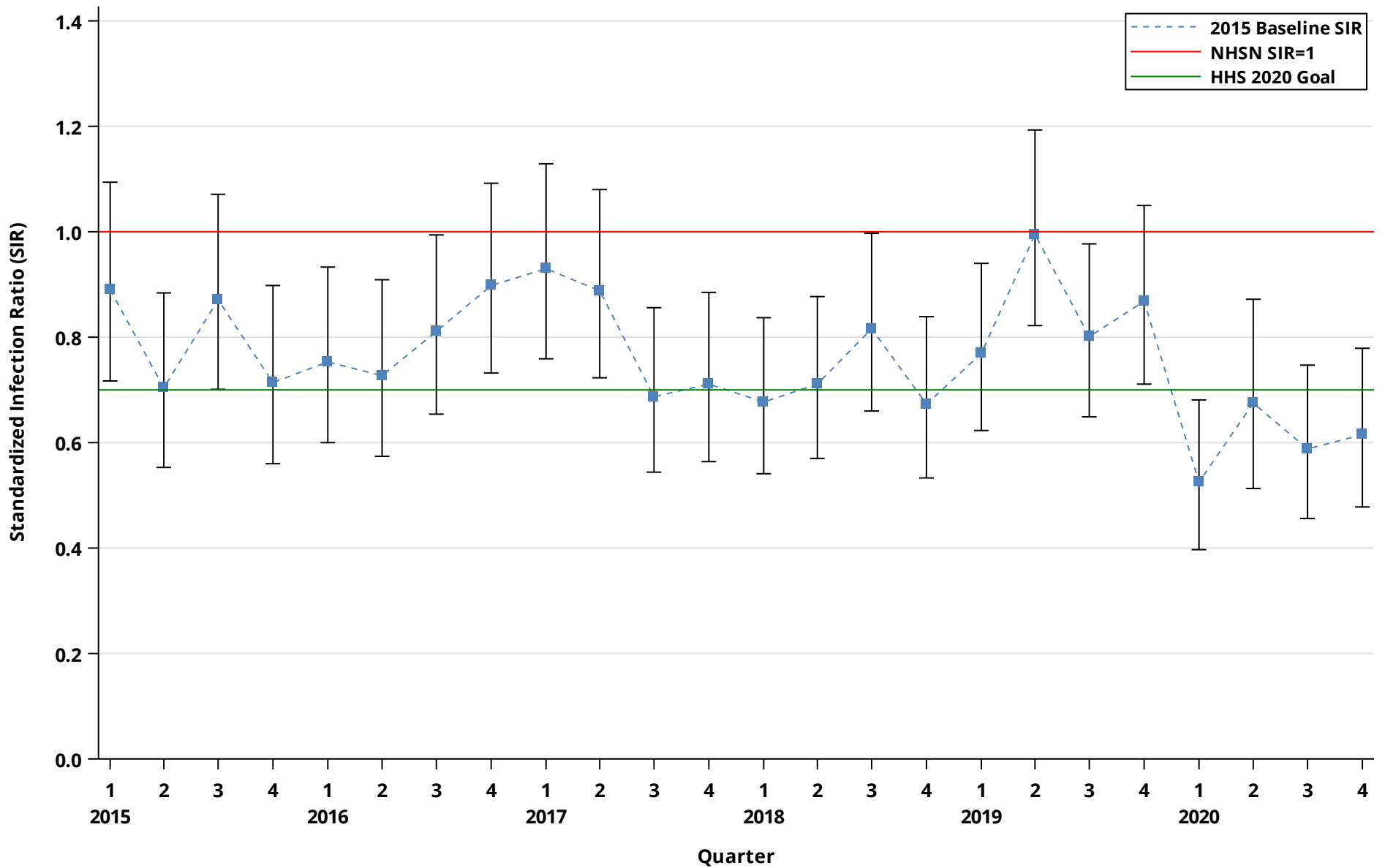
- In 2020, four facilities had a Complex A/R SIR for SSIs related to colon procedures that was statistically significantly lower than the 2015 national baseline SIR of 1. No facilities had a Complex A/R SIR that was statistically higher than the baseline SIR. In 2019, two facilities had a Complex A/R SIR for SSIs that was statistically significantly lower than the 2015 national baseline SIR of 1 while a single facility had a Complex A/R SIR that was statistically higher than the baseline SIR.

Figure 65: Colon Surgery (COLO) All and Complex Admission/Readmission Surgical Site Infection (SSI) Standardized Infection Ratios (SIRs) by Quarter, Tennessee, 01/01/2015–12/31/2020 [Reference standard: National Healthcare Safety Network (NHSN), 2015]



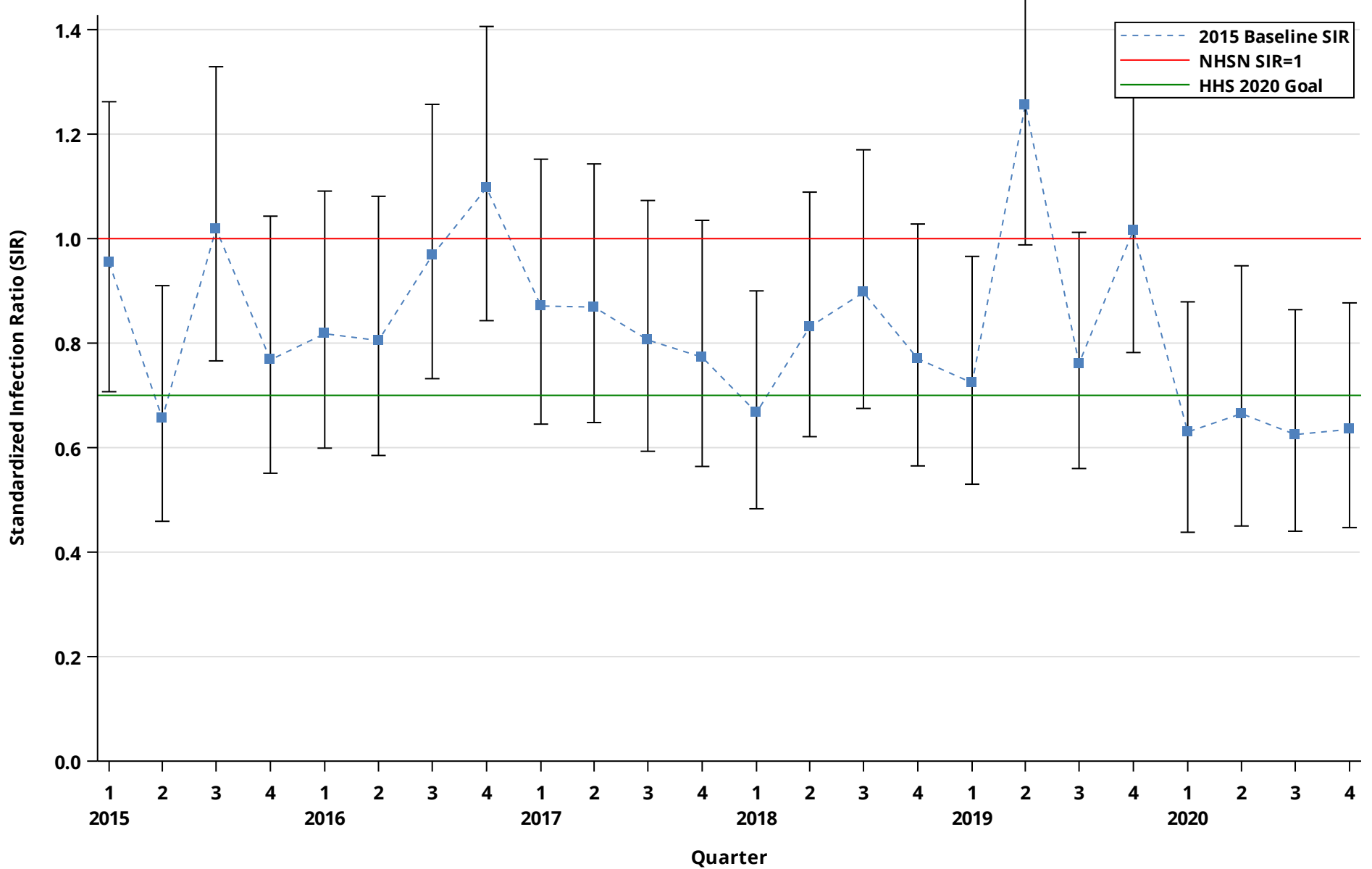
Data Reported as of June 01, 2021

Figure 66: Colon Surgery (COLO) All Surgical Site Infection (SSI) Standardized Infection Ratio (SIR) by Quarter, Tennessee, 01/01/2015–12/31/2020



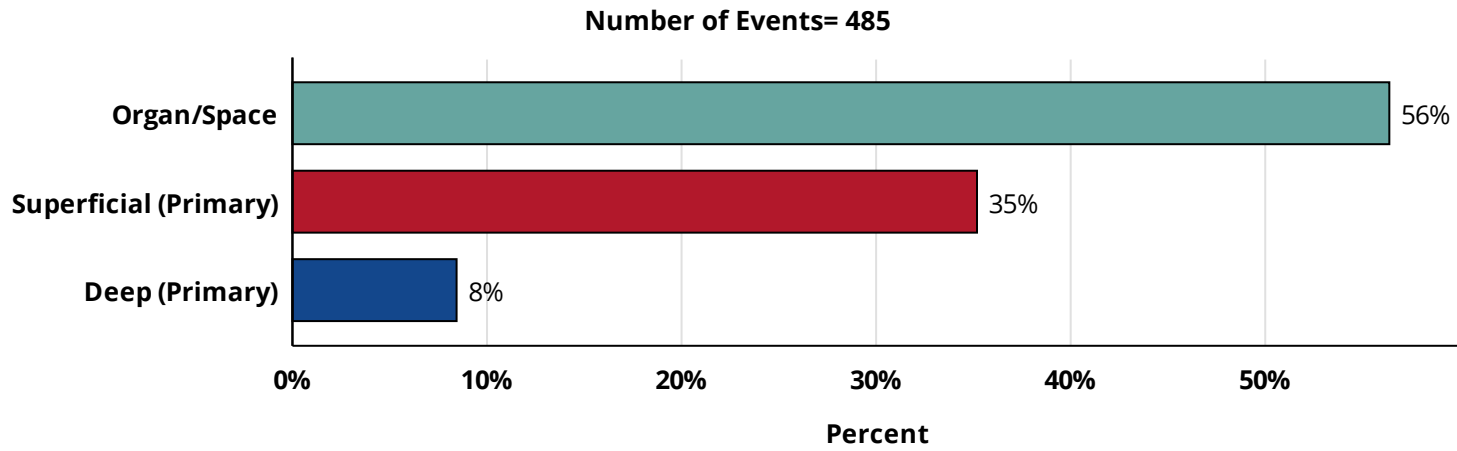
Data Reported as of June 01, 2021

Figure 67: Colon Surgery (COLO) Complex Admission/Readmission Surgical Site Infection (SSI) Standardized Infection Ratio (SIR) by Quarter, Tennessee, 01/01/2015–12/31/2020



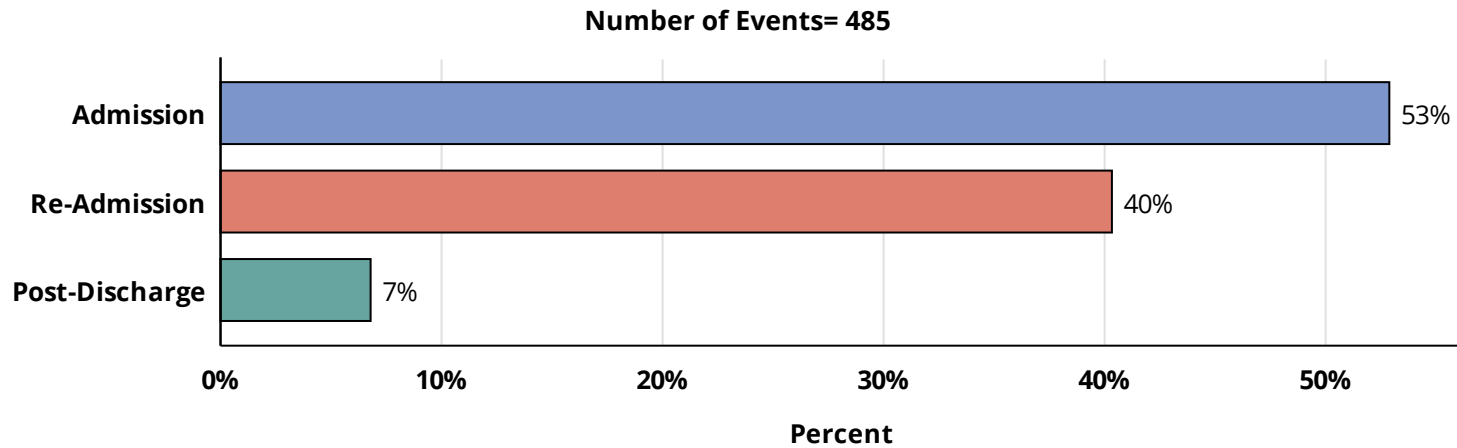
Data Reported as of June 01, 2021

Figure 68: Colon Surgery (COLO) Surgical Site Infections by Site, Tennessee, 01/01/2019–12/31/2019



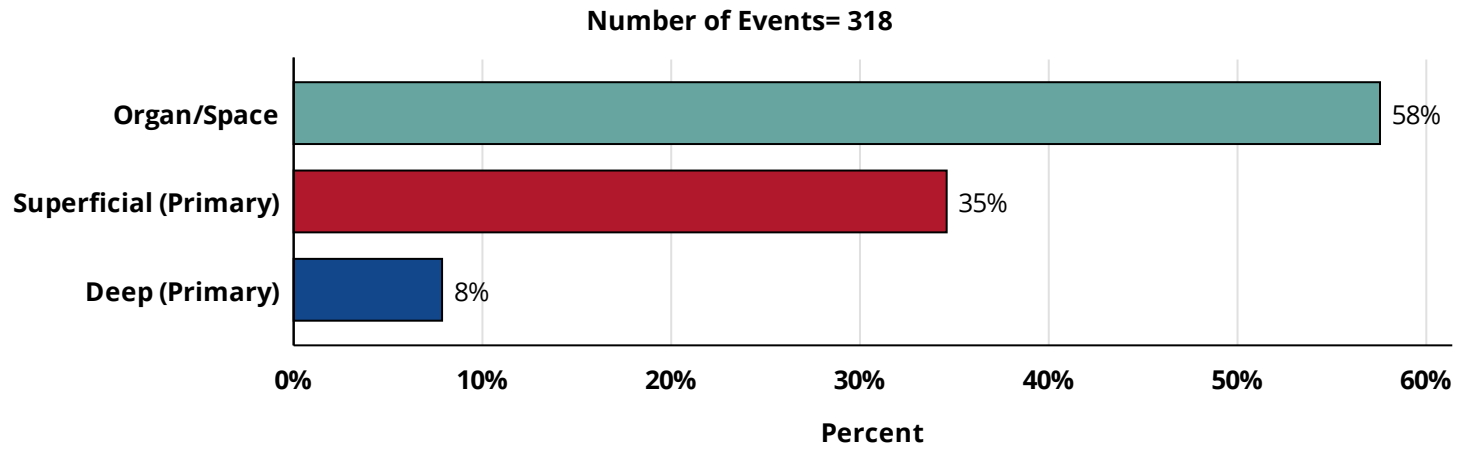
Data Reported as of June 01, 2021

Figure 69: Colon Surgery (COLO) Surgical Site Infections Detection, Tennessee, 01/01/2019–12/31/2019



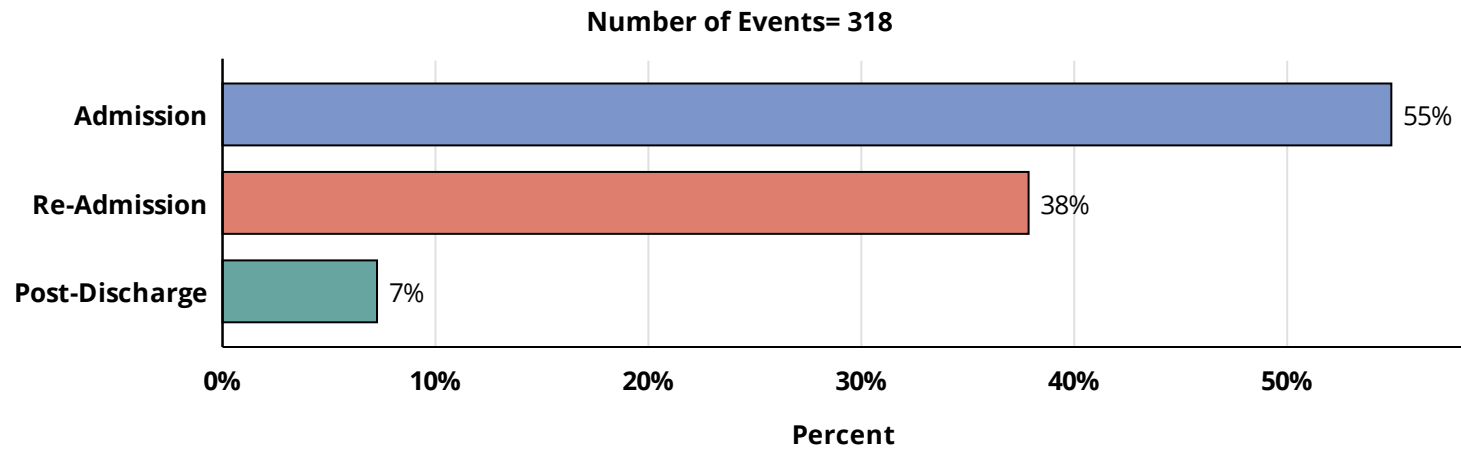
Data Reported as of June 01, 2021

Figure 70: Colon Surgery (COLO) Surgical Site Infections by Site, Tennessee, 01/01/2020–12/31/2020



Data Reported as of August 16, 2021

Figure 71: Colon Surgery (COLO) Surgical Site Infections Detection, Tennessee, 01/01/2020–12/31/2020



Data Reported as of June 01, 2021

Table 25: Colon Surgery (COLO) All and Complex Admission/Readmission (AR) Surgical Site Infection (SSI) Standardized Infection Ratios (SIRs) by Reporting Year, Tennessee, 01/01/2019–12/31/2020

										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	YEA R	N o.	PROCS	OBS	PRED	SIR	LOW ER LIMIT	UPP ER LIMIT	No. of FACS WITH ≥1 PRED INFECTION	N	%	N	%	10 %	25 %	50 %	75 %	90 %
Tennessee	All Procedures	2020	89	7,491	236	395.78	0.60	0.52	0.68	58	12	21%	1	2%	0.00	0.00	0.50	0.91	1.19
		2019	95	8,813	395	461.23	0.86	0.78	0.94	58	6	10%	3	5%	0.00	0.46	0.74	1.26	1.70
	Complex A/R	2020	89	7,491	128	201.08	0.64	0.53	0.75	37	4	11%	0	0%	0.00	0.00	0.48	0.96	1.43
		2019	95	8,813	218	232.84	0.94	0.82	1.07	45	2	4%	1	2%	0.00	0.33	0.74	1.48	1.83

Data reported as of June 01, 2021

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 26: Crude (Unadjusted) Rate of Colon Surgery (COLO) Surgical Site Infection (SSI) by Year, Tennessee, 01/01/2019–12/31/2020

STATE	YEAR	No. of facilities	No. of procedures	No. of SSI	TN Rate*
Tennessee	2020	82	7,818	318	4.07
	2019	85	9,197	486	5.27

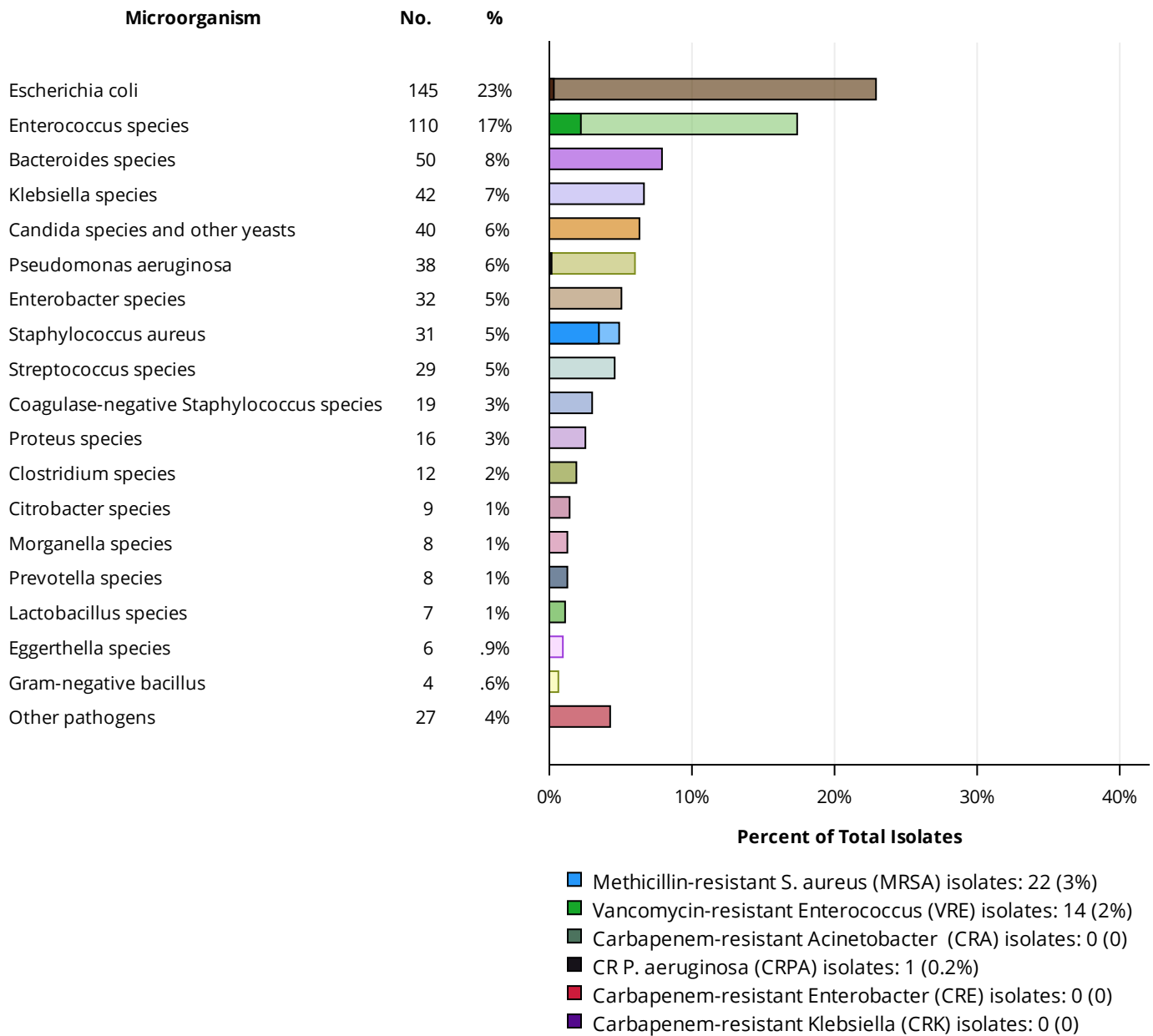
Data reported as of June 01, 2021

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

*per 100 procedures

Figure 72: Microorganisms Identified from Surgical Site Infections (SSI) following Colon (COLO) Procedures, Tennessee, 01/01/2019–12/31/2019

Number of isolates=633; Number of events=485

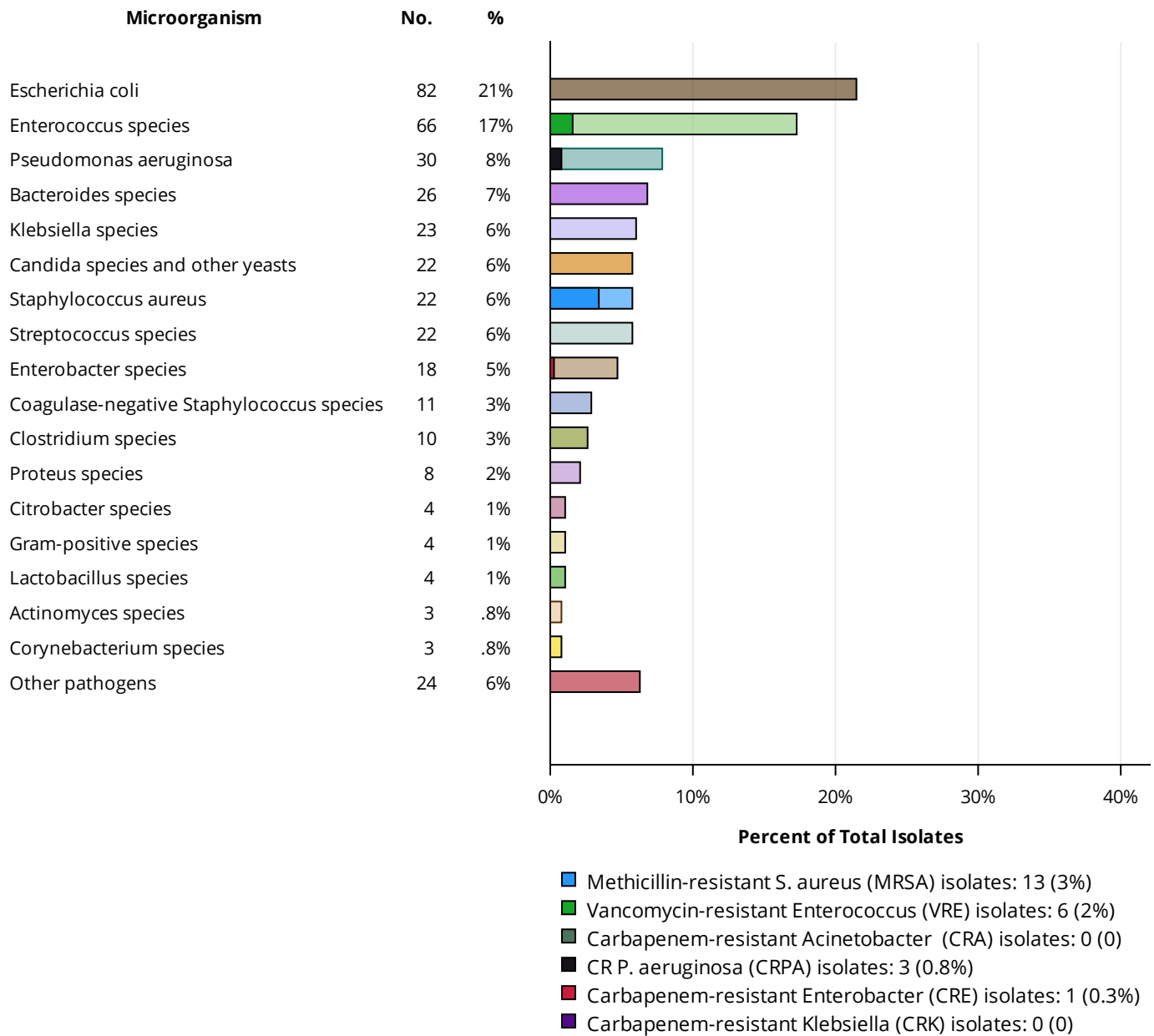


Data reported as of June 01, 2021

Other pathogens = Alpha-hemolytic spp., Anaerobic spp., Anaerococcus spp., Bacillus spp., Bifidobacterium spp., Corynebacterium spp., Escherichia spp., Fungus spp., Gemella spp., Gram-positive spp., Haemophilus spp., Hafnia spp., Lactococcus spp., Ochrobactrum spp., Other Staphylococcus spp., Parabacteroides spp., Peptostreptococcus spp., Providencia spp.

Figure 73: Microorganisms Identified from Surgical Site Infections (SSI) following Colon (COLO) Procedures, Tennessee, 01/01/2020–12/31/2020

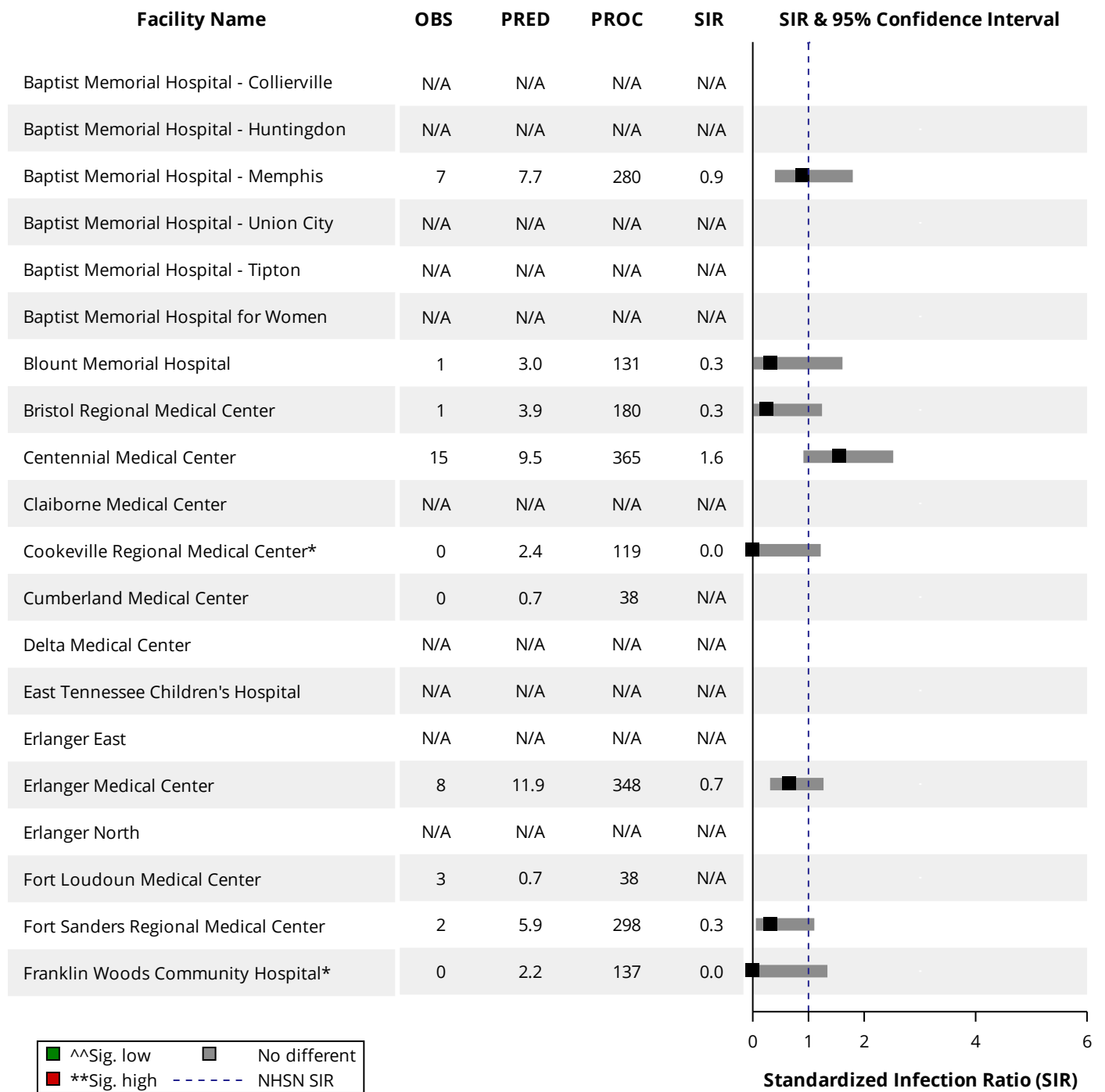
Number of isolates=382; Number of events=318



Data reported as of June 01, 2021

Other pathogens = Bacillus spp., Beta-hemolytic spp., Cronobacter spp., Escherichia spp., Fusobacterium spp., Gram-negative spp., Gram-positive spp., Haemophilus spp., Hafnia spp., Lactococcus spp., Morganella spp., Other Staphylococcus spp., Pantoea spp., Parvimonas spp., Small-colony-forming spp., Stenotrophomonas spp.

Figure 74: Colon Surgery (COLO) Complex Admission/Readmission Surgical Site Infection (SSI) Standardized Infection Ratios (SIRs) in Acute Care Facilities, Tennessee, 01/01/2019 – 12/31/2019



Data Reported as of June 01, 2021

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

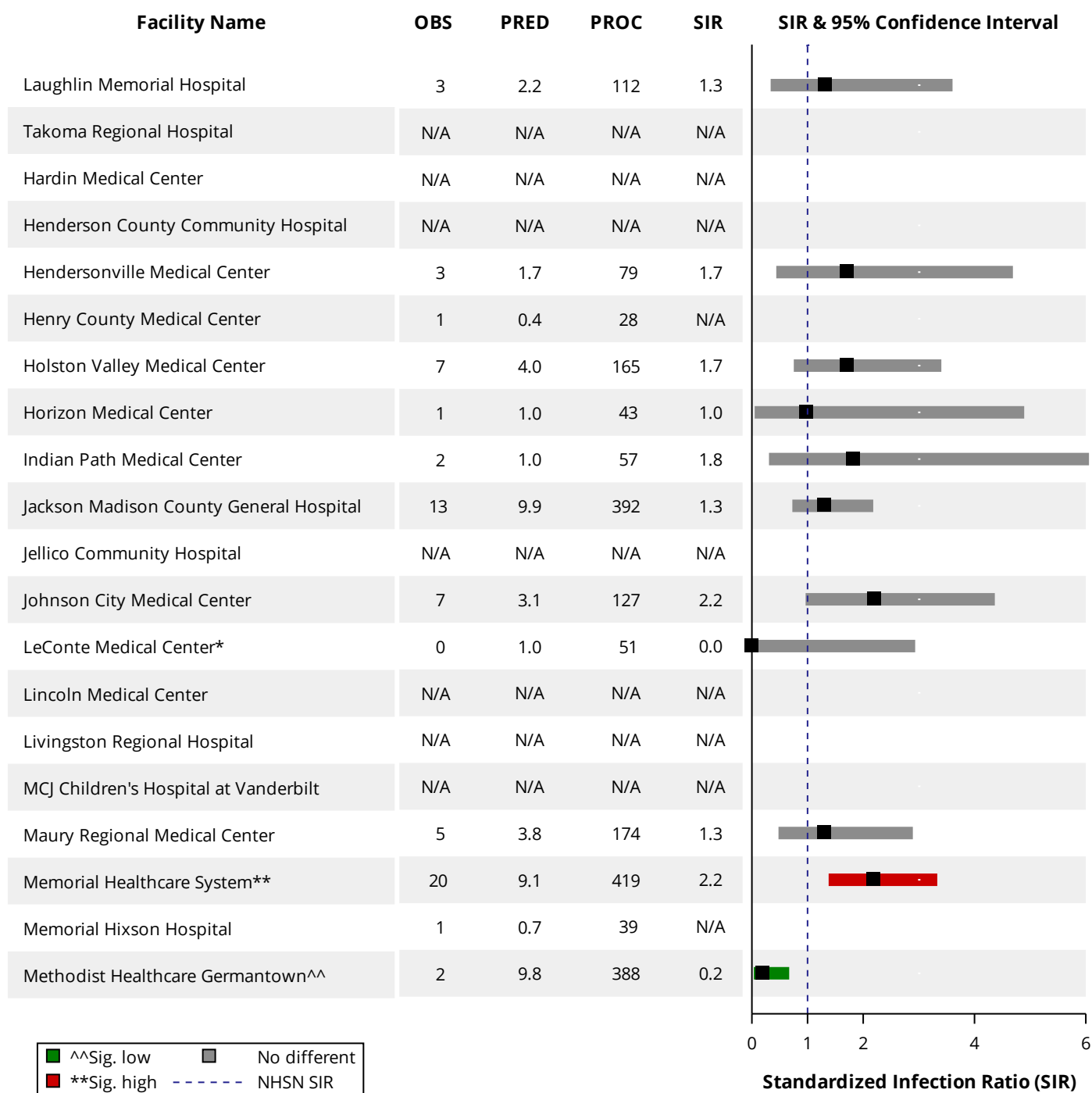
N/A = Data not shown for facilities with <20 procedures performed / SIR not calculated for facilities with <1 predicted infection

** Significantly higher than 2015 national baseline

^^ Significantly lower than 2015 national baseline

* Zero infections, but not statistically significant

Figure 74 (cont'd)



Data Reported as of June 01, 2021

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

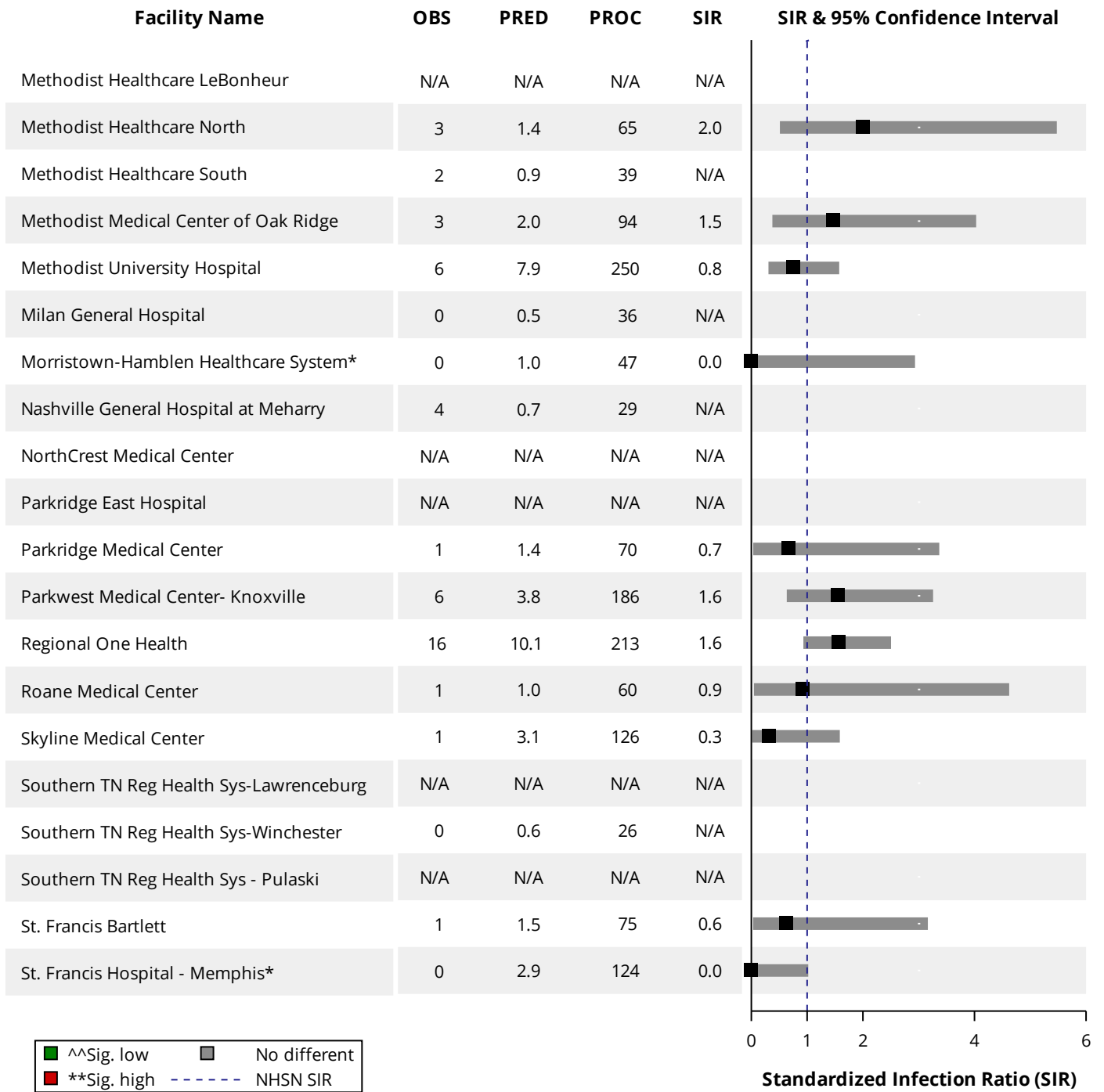
N/A = Data not shown for facilities with <20 procedures performed / SIR not calculated for facilities with <1 predicted infection

** Significantly higher than 2015 national baseline

^^ Significantly lower than 2015 national baseline

* Zero infections, but not statistically significant

Figure 74 (cont'd)



Data Reported as of June 01, 2021

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

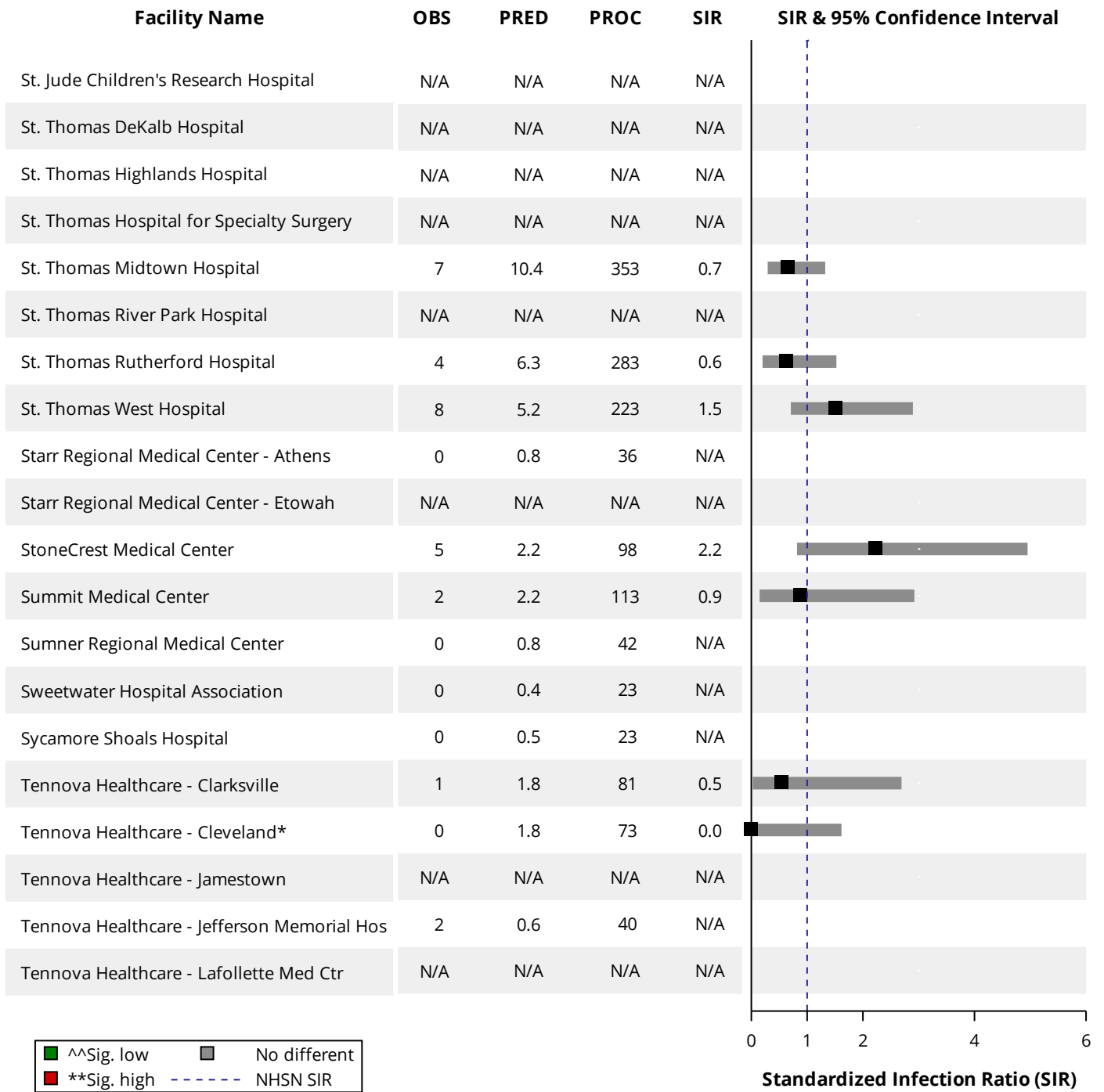
N/A = Data not shown for facilities with <20 procedures performed / SIR not calculated for facilities with <1 predicted infection

** Significantly higher than 2015 national baseline

^^ Significantly lower than 2015 national baseline

* Zero infections, but not statistically significant

Figure 74 (cont'd)



Data Reported as of June 01, 2021

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

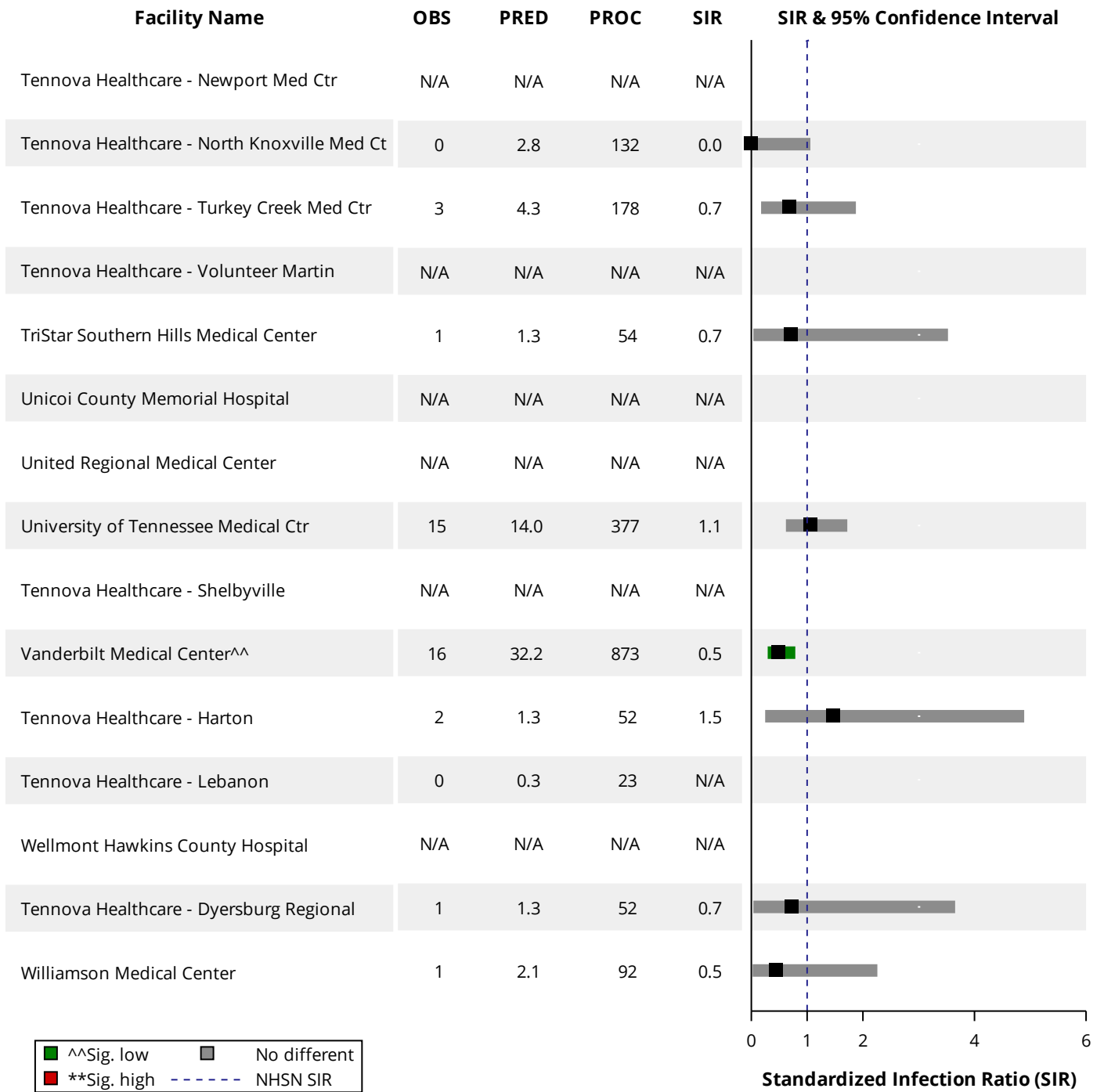
N/A = Data not shown for facilities with <20 procedures performed / SIR not calculated for facilities with <1 predicted infection

** Significantly higher than 2015 national baseline

^^ Significantly lower than 2015 national baseline

* Zero infections, but not statistically significant

Figure 74 (cont'd)



Data Reported as of June 01, 2021

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

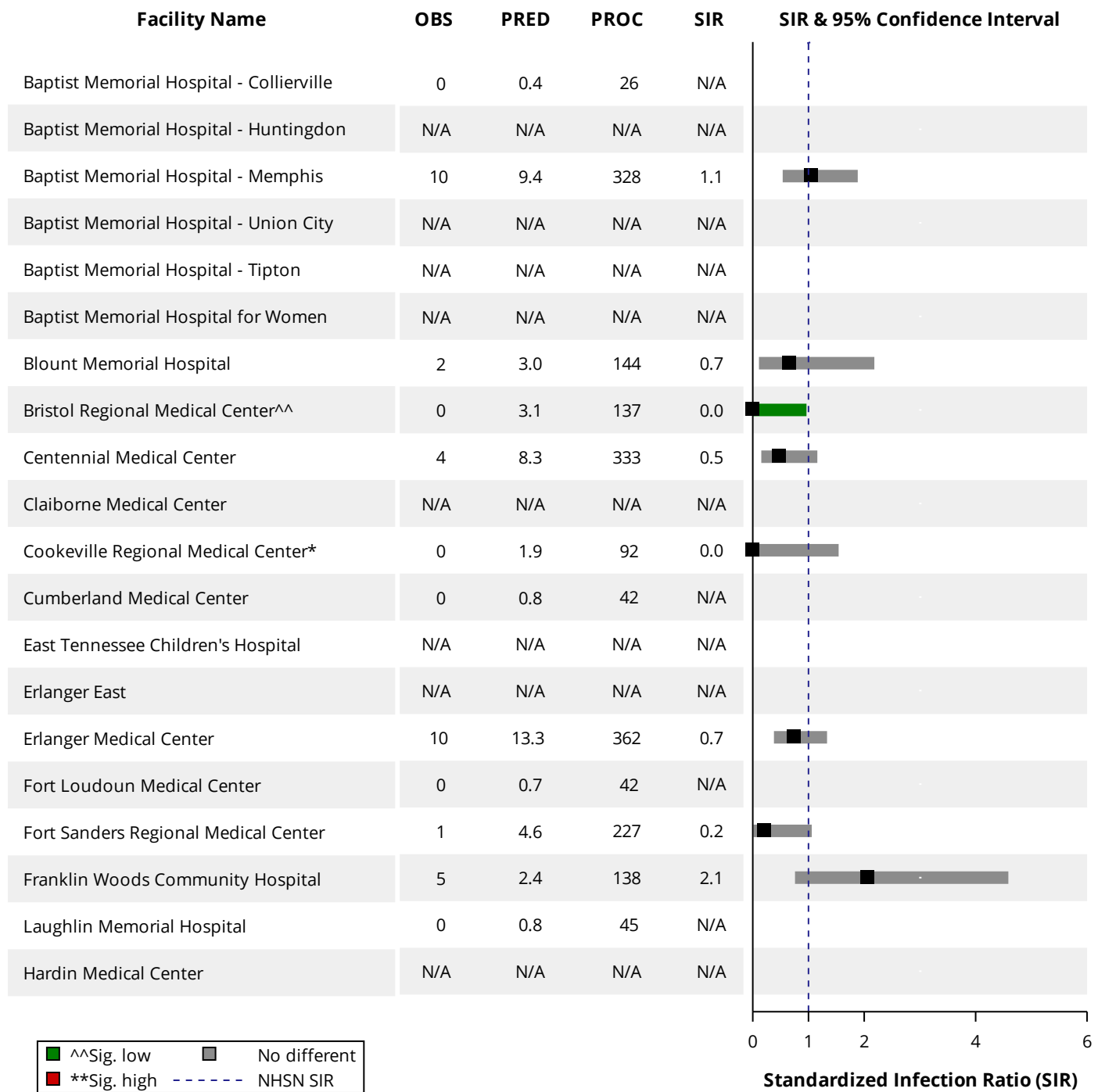
N/A = Data not shown for facilities with <20 procedures performed / SIR not calculated for facilities with <1 predicted infection

** Significantly higher than 2015 national baseline

^^ Significantly lower than 2015 national baseline

* Zero infections, but not statistically significant

Figure 75: Colon Surgery (COLO) Complex Admission/Readmission Surgical Site Infection (SSI) Standardized Infection Ratios (SIRs) in Acute Care Facilities, Tennessee, 01/01/2020 – 12/31/2020



Data Reported as of June 01, 2021

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

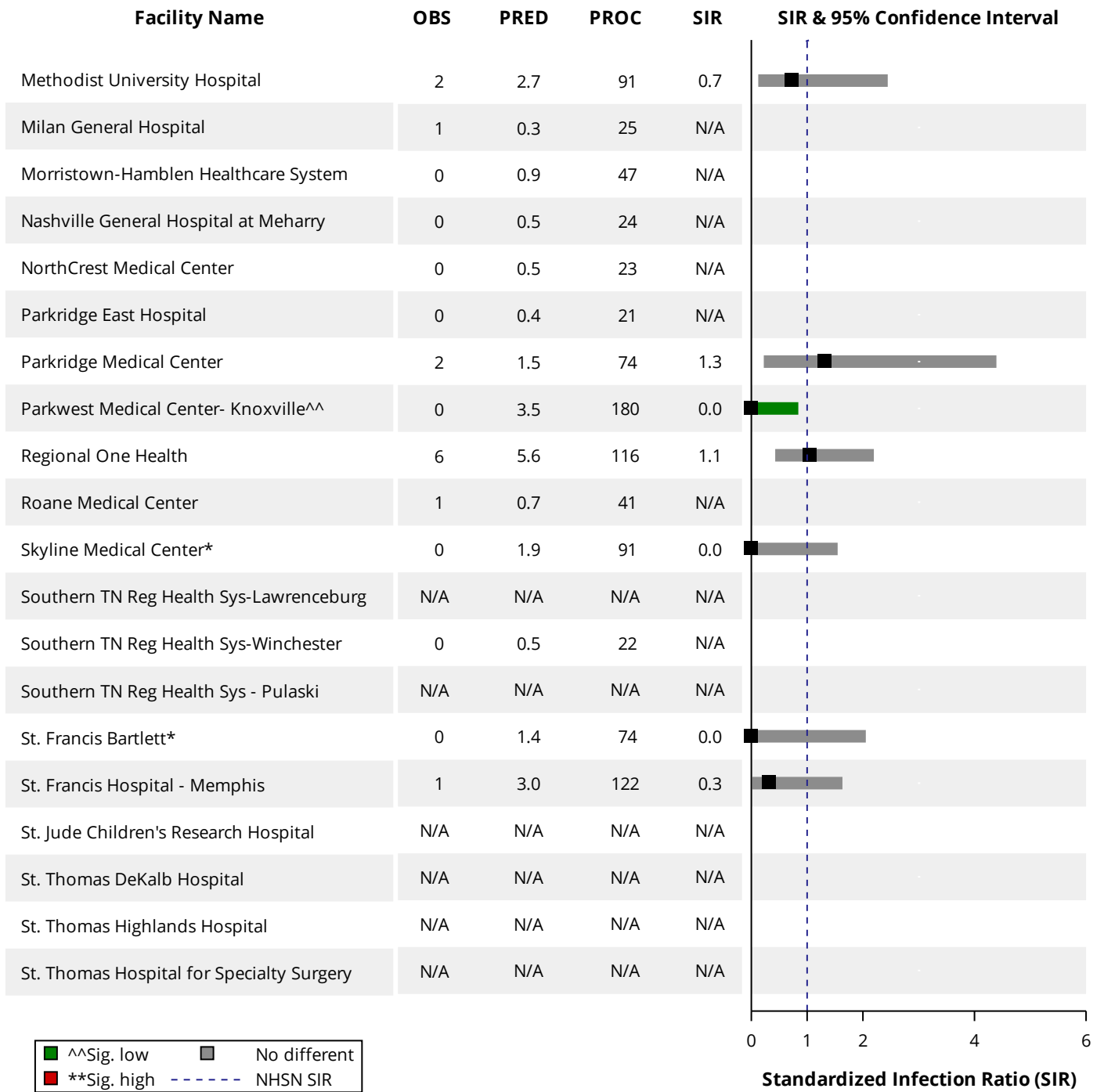
Figure 75 (cont'd)



Data Reported as of June 01, 2021

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 75 (cont'd)



Data Reported as of June 01, 2021

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

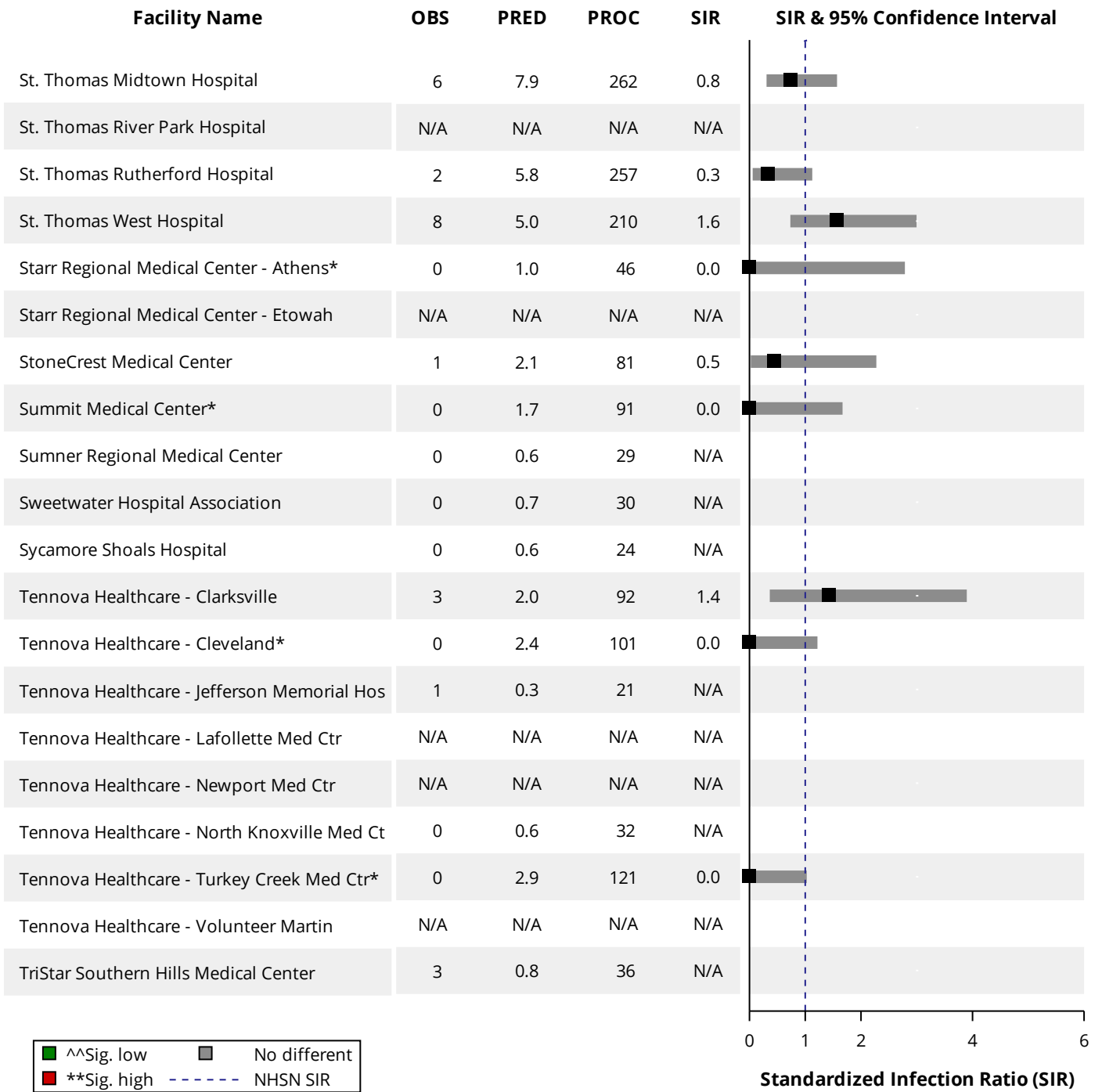
N/A = Data not shown for facilities with <20 procedures performed / SIR not calculated for facilities with <1 predicted infection

** Significantly higher than 2015 national baseline

^^ Significantly lower than 2015 national baseline

* Zero infections, but not statistically significant

Figure 75 (cont'd)



Data Reported as of June 01, 2021

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

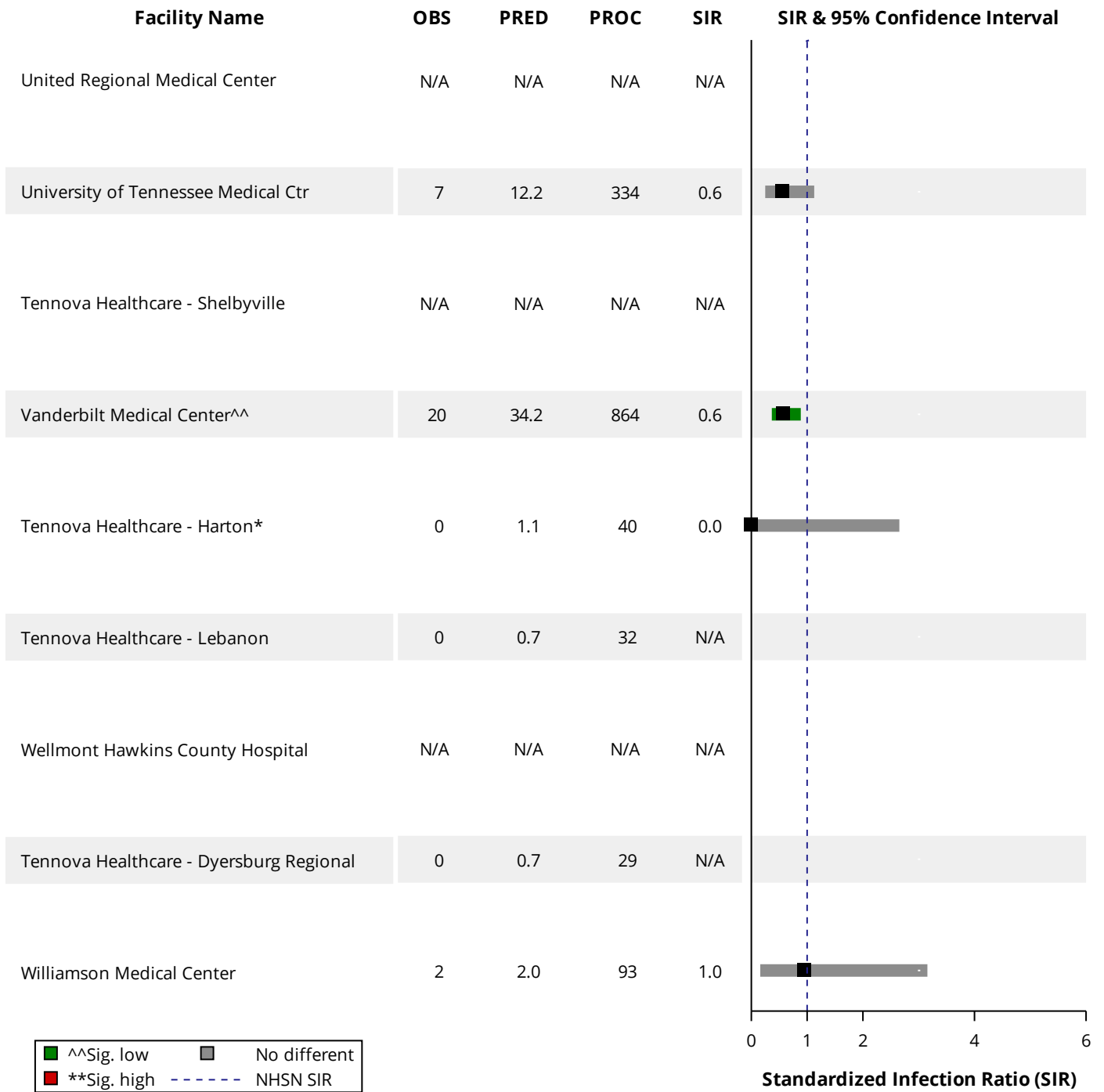
N/A = Data not shown for facilities with <20 procedures performed / SIR not calculated for facilities with <1 predicted infection

** Significantly higher than 2015 national baseline

^^ Significantly lower than 2015 national baseline

* Zero infections, but not statistically significant

Figure 75 (cont'd)



Data Reported as of June 01, 2021

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 2019: 95

Total number of facilities reporting from January-December 2020: 89

SIRs by Quarter (Figure 76, Figure 77, Figure 78)

- In 2019, the combined All SSI SIR fluctuated with a high of 0.81 in Q4 to a low of 0.57 in Q3. In Q2-Q3 2019, the ALL SSI SIR was statistically below the predicted SIR based on the 2015 baseline. The Complex A/R SIR also fluctuated in 2019 from an SIR of 0.96 in Q1 to 0.69 in Q2. In 2019, the U.S. Department of Health and Human Services' [National Action Plan to Prevent Healthcare-Associated Infections](#)²⁶ five-year target of SIR = 0.70 was not statistically achieved in any quarter in either model.
- In 2020, the combined All SSI SIR decreased from 0.79 in Q2 to 0.61 in Q4. The Complex A/R SIR model experienced greater fluctuation in 2020 with a high of 1.33 in Q2-2020. Only Q4-2020 was statistically significantly lower than predicted based on the 2015 baseline while no quarter in 2020 in either model achieved the HHS target SIR of 0.70.

Rates, Infection Sites, and Detection (Figure 79, Figure 80, Figure 81, Figure 82)

- In 2019, 94 SSIs were reported among 9,348 abdominal hysterectomies in Tennessee, for a crude rate of 1.01 infections per 100 procedures. Overall, SSIs related to abdominal hysterectomies were most often organ/space (57%) and superficial primary (39%). SSIs related to abdominal hysterectomies were most often identified upon readmission (69%) and post-discharge surveillance (24%).
- In 2020, 73 SSIs were reported among 6,729 abdominal hysterectomies in Tennessee, for a crude rate of 1.08 infections per 100 procedures. Overall, SSIs related to abdominal hysterectomies were again most often organ/space (75%) and superficial primary (15%). SSIs related to abdominal hysterectomies were most often identified upon readmission (73%) and post-discharge surveillance (22%).

Key percentiles for Tennessee SIRs (Table 27, Table 28)

- The All-SSI SIR for SSIs related to HYST procedures in Tennessee 2019 and 2020 was statistically significantly lower than the national SIR of 1 with an SIR of 0.71 in both years (2019 95% CI: 0.57, 0.86 and 2020 95% CI: 0.56, 0.89).

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

- The Complex A/R SIR for SSIs related to HYST procedures in Tennessee was not significantly different from the 2015 national SIR of 1 in either 2019 or 2020. The Complex A/R SIR for SSIs related to HYST procedures in 2019 was 0.80 (95% CI: 0.59, 1.05) and in 2020 was 1.01 (95% CI: 0.74, 1.34).
- In 2019, the median All SSI SIR for HYST procedures was 0.62, indicating that half of reporting facilities with at least 1 predicted infection had an All-SSI SIR at or below 0.62. In 2020, the median All SSI SIR for HYST procedures was 0.87.
- In 2019, the median Complex A/R SIR for HYST procedures was 1.06, indicating that half of reporting facilities with at least 1 predicted infection had a Complex A/R SIR at or below 1.06. In 2020, the median Complex A/R SIR for HYST procedures was 0.89.

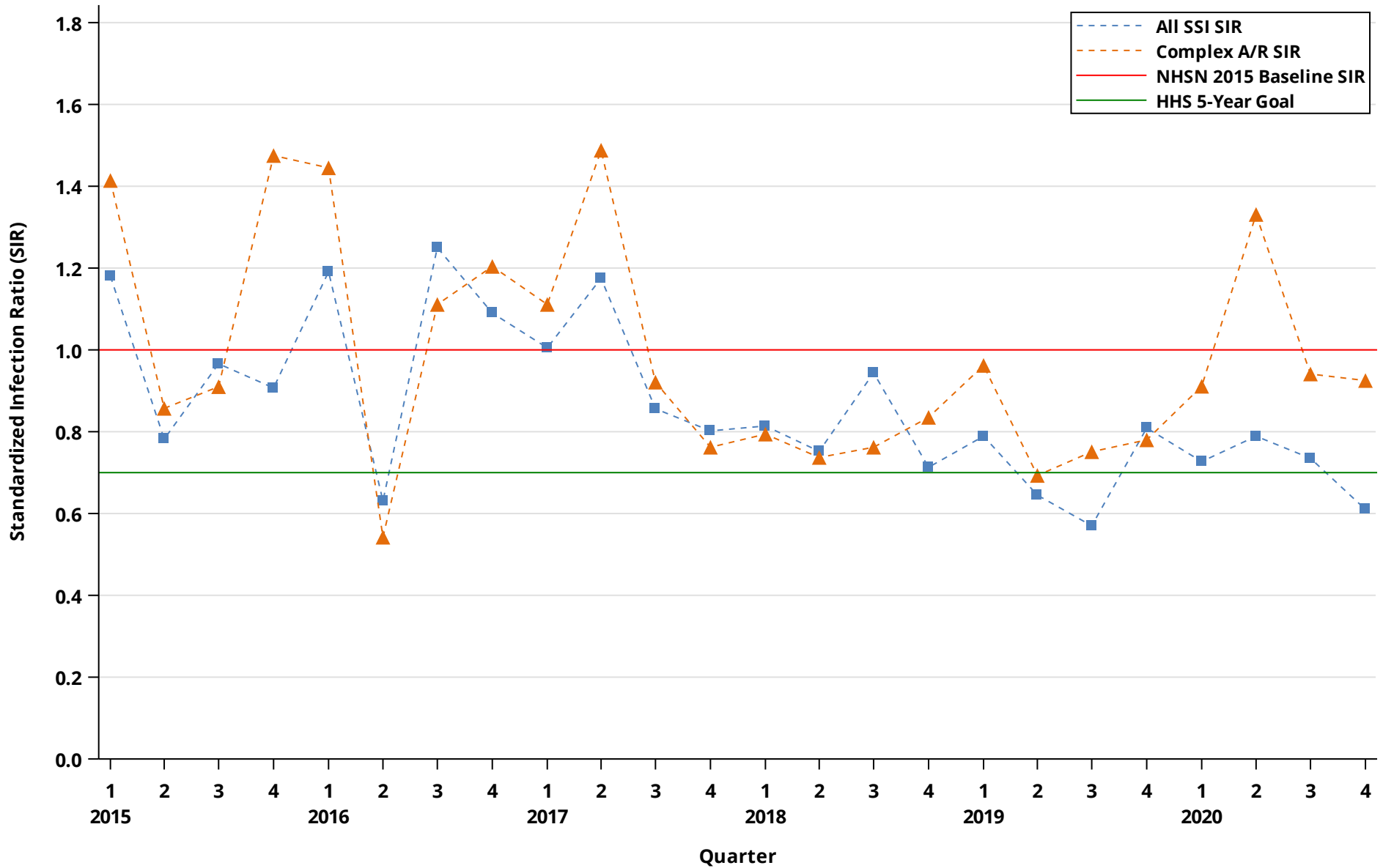
Microorganisms associated with SSIs following Abdominal Hysterectomy Procedures (Figure 83, Figure 84)

- Among the 87 pathogens isolated from 94 SSIs following abdominal hysterectomies in 2019, the most common pathogens were *Staphylococcus aureus* (14%) and *Streptococcus* species (11%). Methicillin-resistant *Staphylococcus aureus* (MRSA) accounted for 9% of total isolates, and vancomycin-resistant *Enterococcus* (VRE) and Carbapenem-resistant *P. aeruginosa* (CRPA) each had a single isolate identified.
- Among the 82 pathogens isolated from 73 SSIs following abdominal hysterectomies in 2020, the most common pathogens were *Escherichia coli* (17%), *Enterococcus* species (13%), and *Streptococcus* species (13%). Methicillin-resistant *Staphylococcus aureus* (MRSA) accounted for 5% of total isolates, and vancomycin-resistant *Enterococcus* (VRE) had a single isolate.

Facility-Specific SIRs (Figure 85, Figure 86)

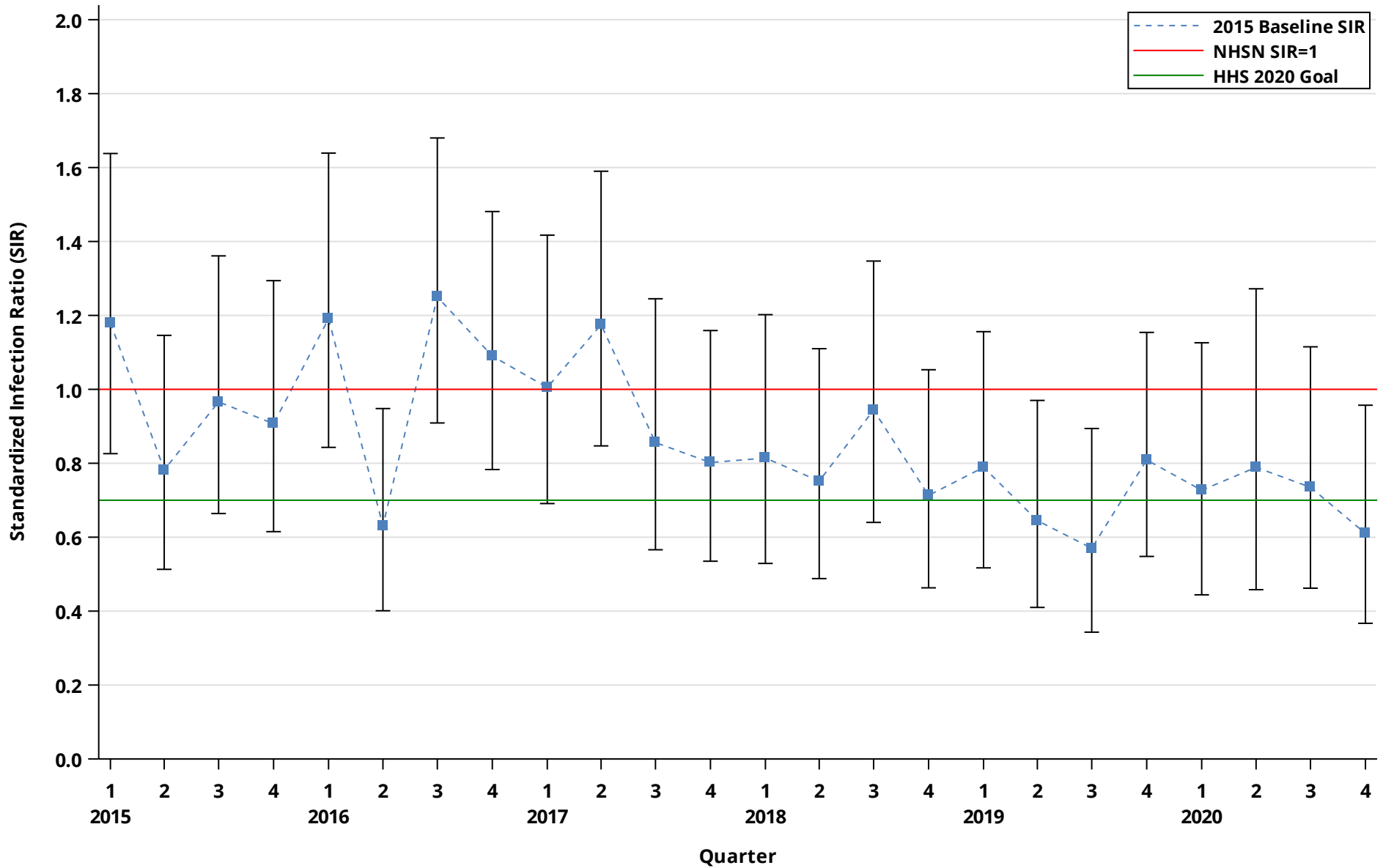
- The Complex A/R SIR for SSIs related to HYST procedures that accounts for all qualifying abdominal hysterectomies performed at a given facility in 2019 and 2020 is displayed in [Figure 85](#) and [Figure 86](#). The bar representing the confidence interval is green if the Complex A/R SIR for SSIs related 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 both 2019 and 2020, no facilities had a Complex A/R SIR that was statistically significantly different than predicted from the baseline SIR.

Figure 76: Abdominal Hysterectomy (HYST) All and Complex Admission/Readmission Surgical Site Infection (SSI) Standardized Infection Ratios (SIRs) by Quarter, Tennessee, 01/01/2015–12/31/2020 [Reference standard: National Healthcare Safety Network (NHSN), 2015]



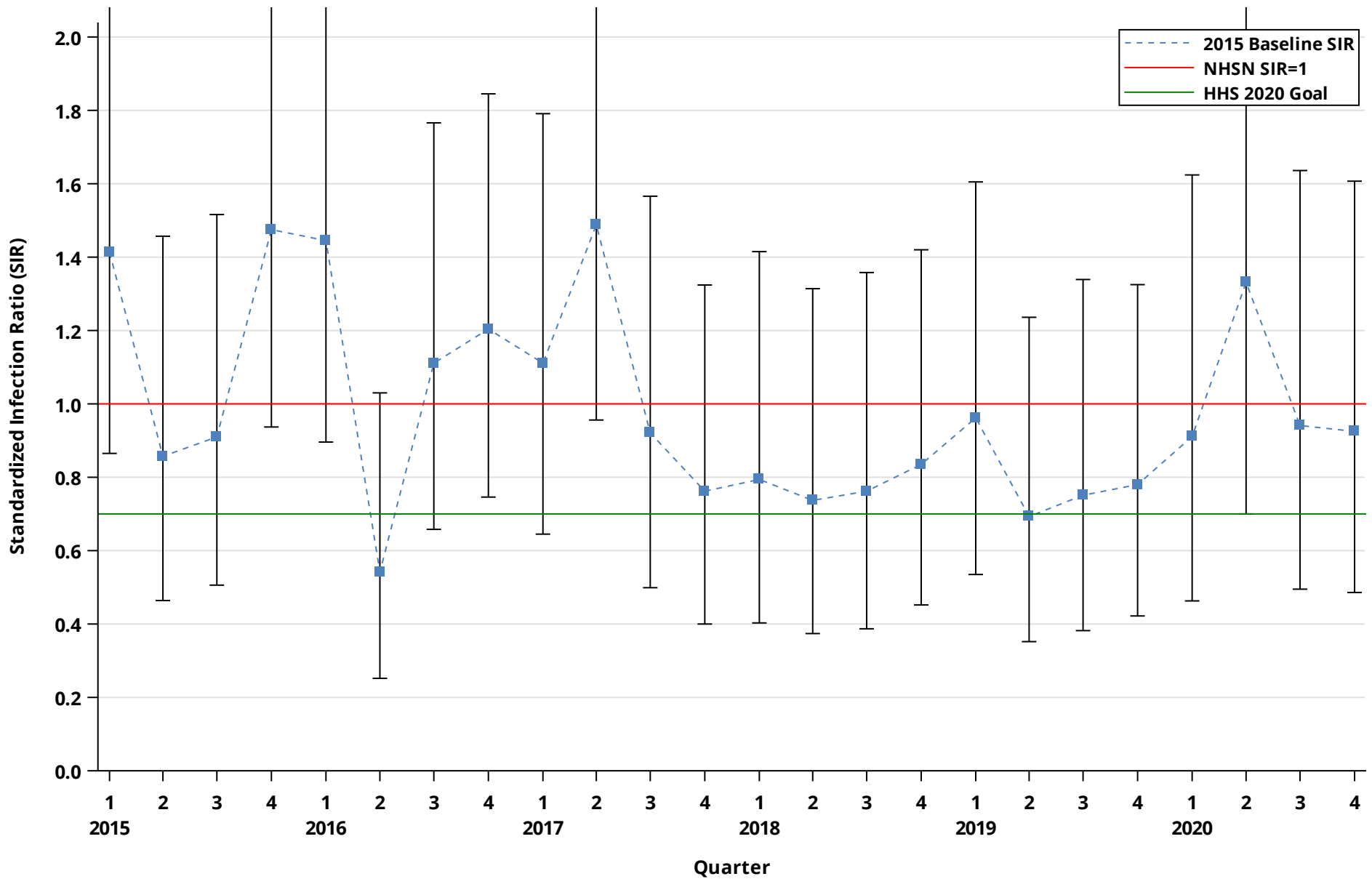
Data Reported as of June 01, 2021

Figure 77: Abdominal Hysterectomy (HYST) All Surgical Site Infection (SSI) Standardized Infection Ratio (SIR) by Quarter, Tennessee, 01/01/2015-12/31/2020



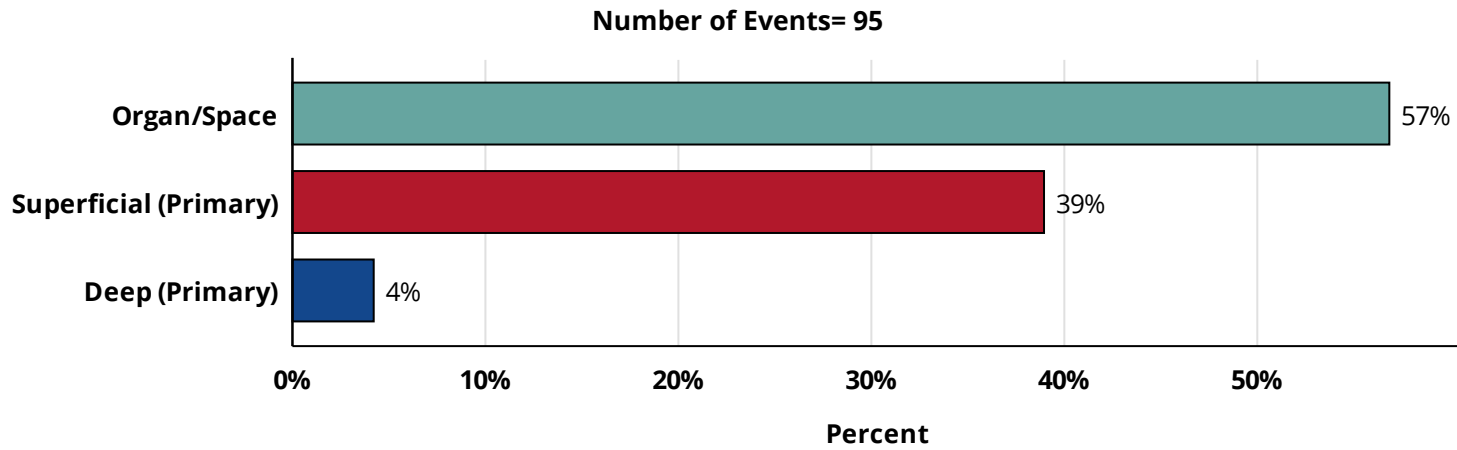
Data Reported as of June 01, 2021

Figure 78: Abdominal Hysterectomy (HYST) Complex Admission/Readmission Surgical Site Infection (SSI) Standardized Infection Ratio (SIR) by Quarter, Tennessee, 01/01/2015–12/31/2020



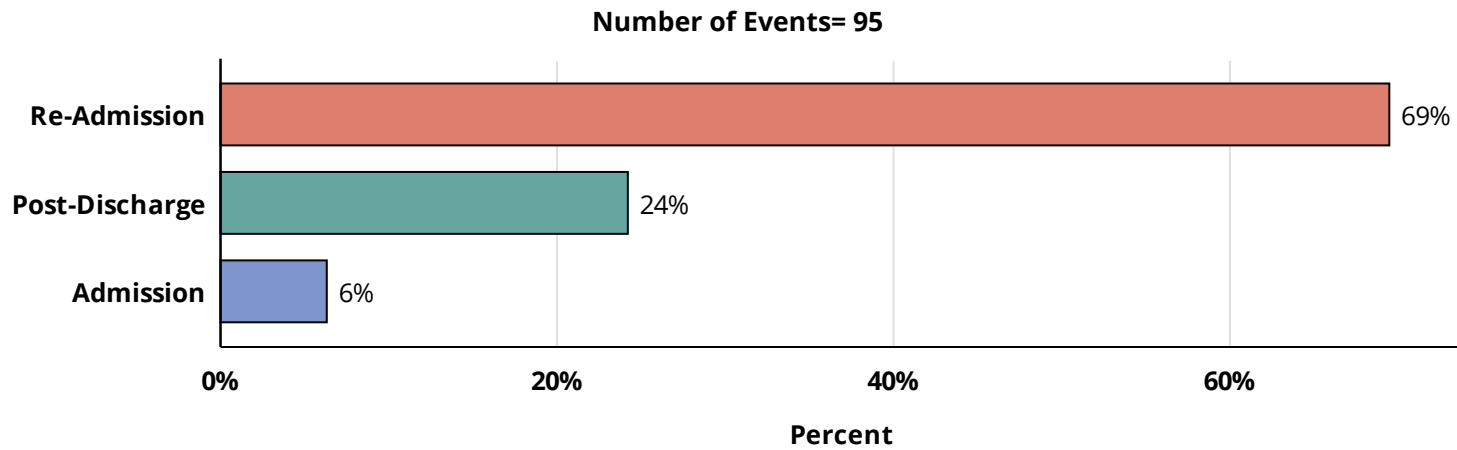
Data Reported as of June 01, 2021

Figure 79: Abdominal Hysterectomy (HYST) Surgical Site Infections by Site, Tennessee, 01/01/2019–12/31/2019



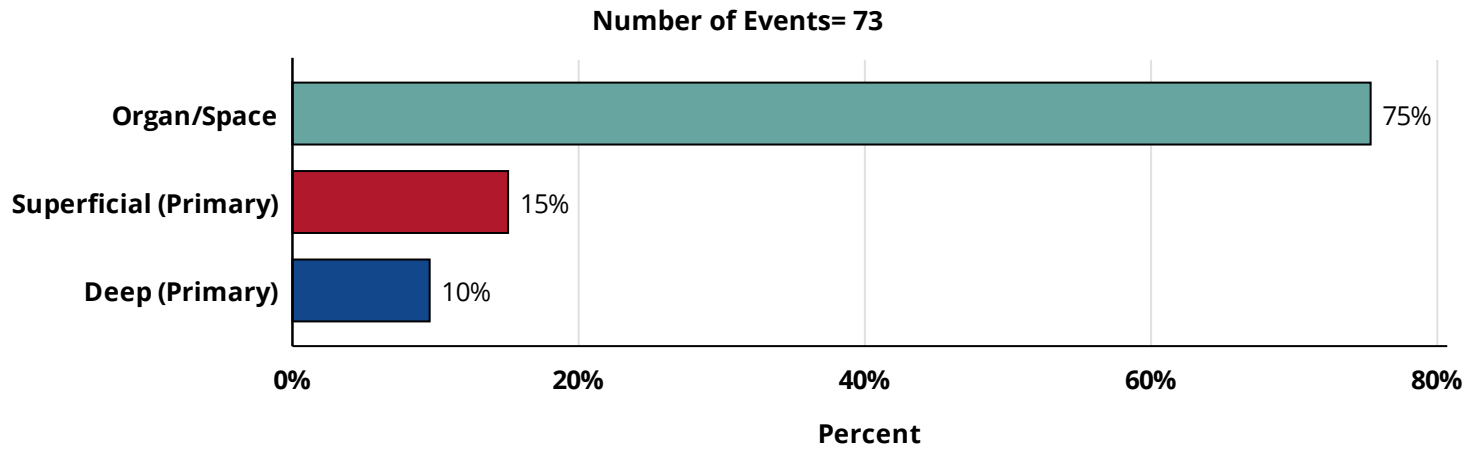
Data Reported as of June 01, 2021

Figure 80: Abdominal Hysterectomy (HYST) Surgical Site Infections Detection, Tennessee, 01/01/2019–12/31/2019



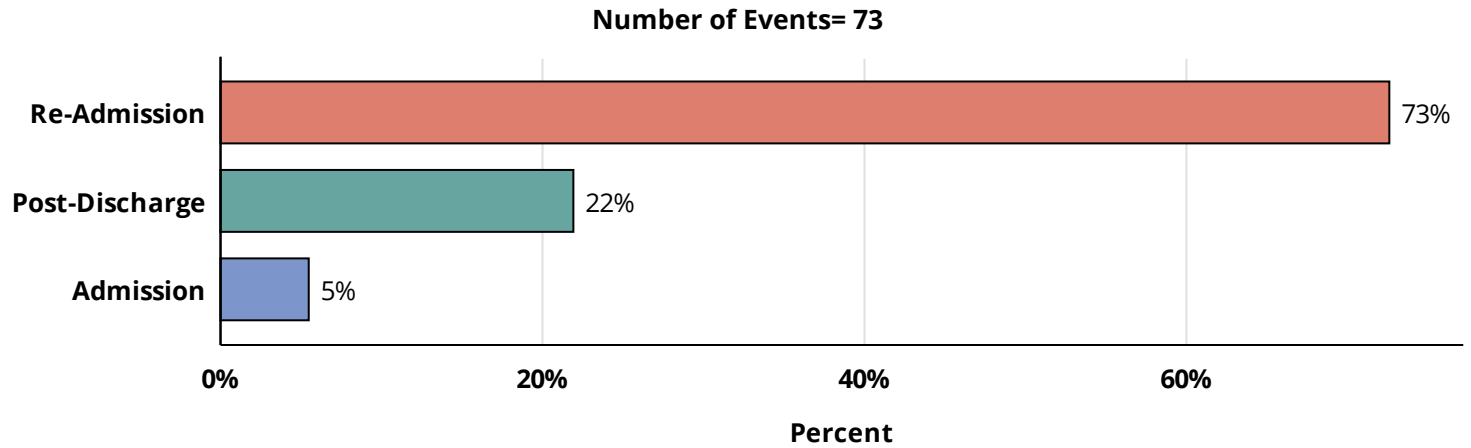
Data Reported as of June 01, 2021

Figure 81: Abdominal Hysterectomy (HYST) Surgical Site Infections by Site, Tennessee, 01/01/2020–12/31/2020



Data Reported as of June 01, 2021

Figure 82: Abdominal Hysterectomy (HYST) Surgical Site Infections Detection, Tennessee, 01/01/2020–12/31/2020



Data Reported as of June 01, 2021

Table 27: Abdominal Hysterectomy (HYST) All and Complex Admission/Readmission (AR) Surgical Site Infection (SSI) Standardized Infection Ratios (SIRs) by Reporting Year, Tennessee, 01/01/2019–12/31/2020

										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					10 %	25 %	50 %	75 %	90 %
Tennessee	All Procedures	2020	89	6,665	70	98.78	0.71	0.56	0.89	23	2	9%	0	0%	0.00	0.00	0.87	1.23	1.75
		2019	95	9,251	90	127.39	0.71	0.57	0.86	32	2	6%	0	0%	0.00	0.00	0.62	1.14	1.46
	Complex A/R	2020	89	6,665	43	42.79	1.00	0.74	1.34	14	0	0%	0	0%	0.00	0.54	0.89	1.51	1.91
		2019	95	9,251	45	56.63	0.80	0.59	1.05	14	0	0%	0	0%	0.23	0.57	1.06	1.26	1.59

Data reported as of June 01, 2021

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 28: Crude (Unadjusted) Rate of Abdominal Hysterectomy (HYST) Surgical Site Infection (SSI) by Year, Tennessee, 01/01/2019–12/31/2020

STATE	YEAR	No. of facilities	No. of procedures	No. of SSI	TN Rate*
Tennessee	2020	69	6,729	73	1.08
	2019	73	9,348	94	1.01

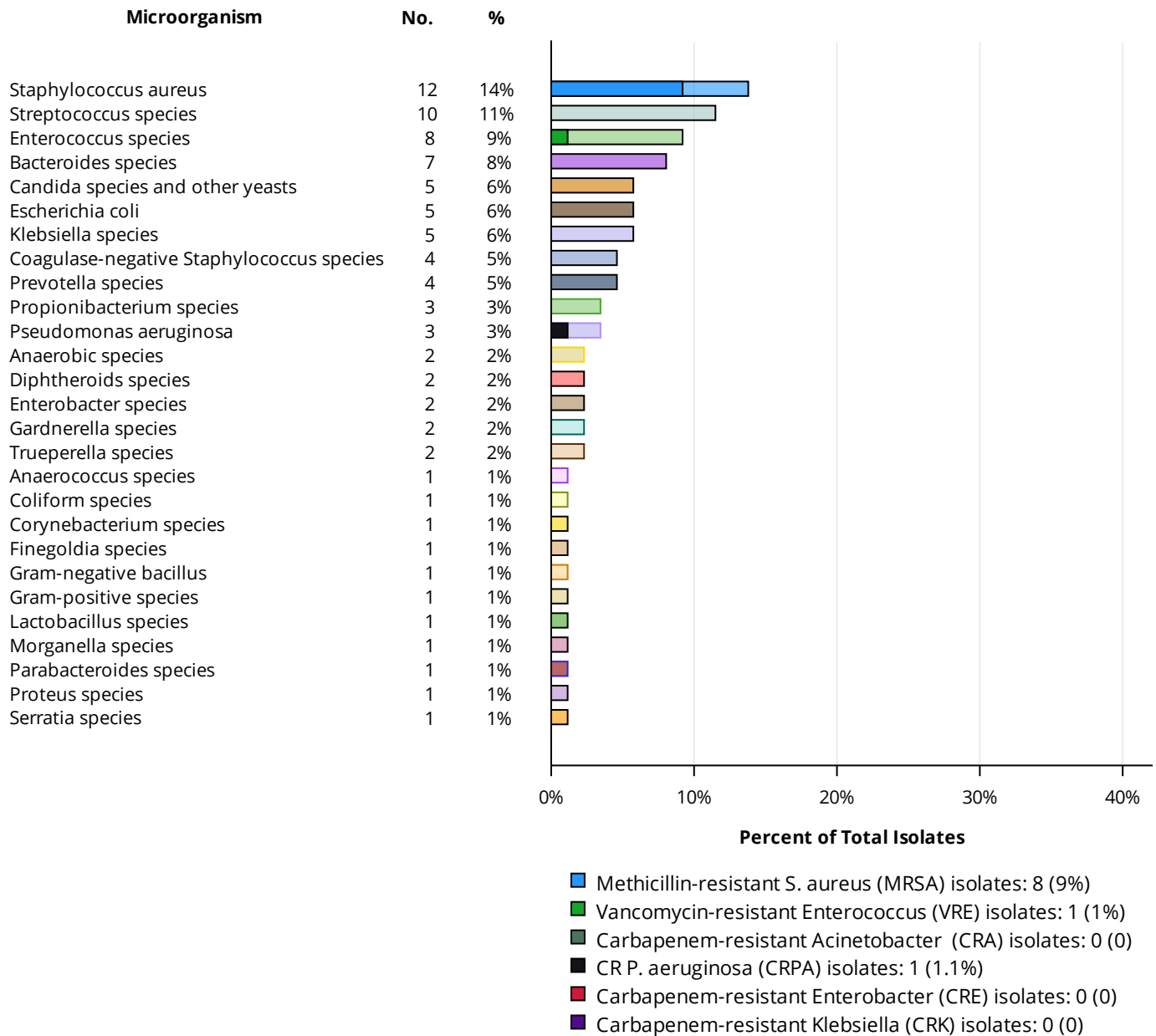
Data reported as of June 01, 2021

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

*per 100 procedures

Figure 83: Microorganisms Identified from Surgical Site Infections (SSI) following Abdominal Hysterectomy (HYST) Procedures, Tennessee, 01/01/2019–12/31/2019

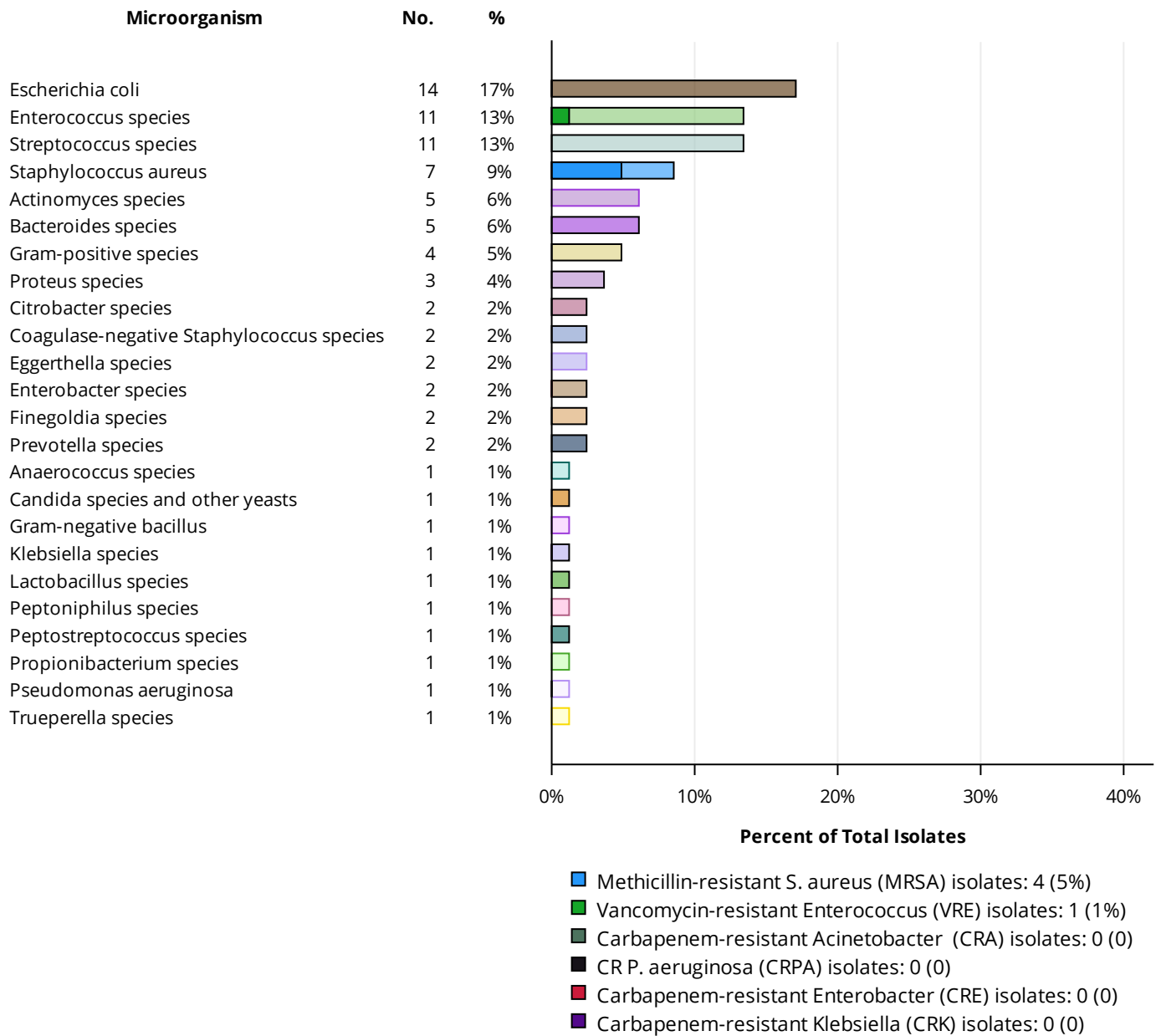
Number of isolates=87; Number of events=94



Data reported as of June 01, 2021
Other pathogens =

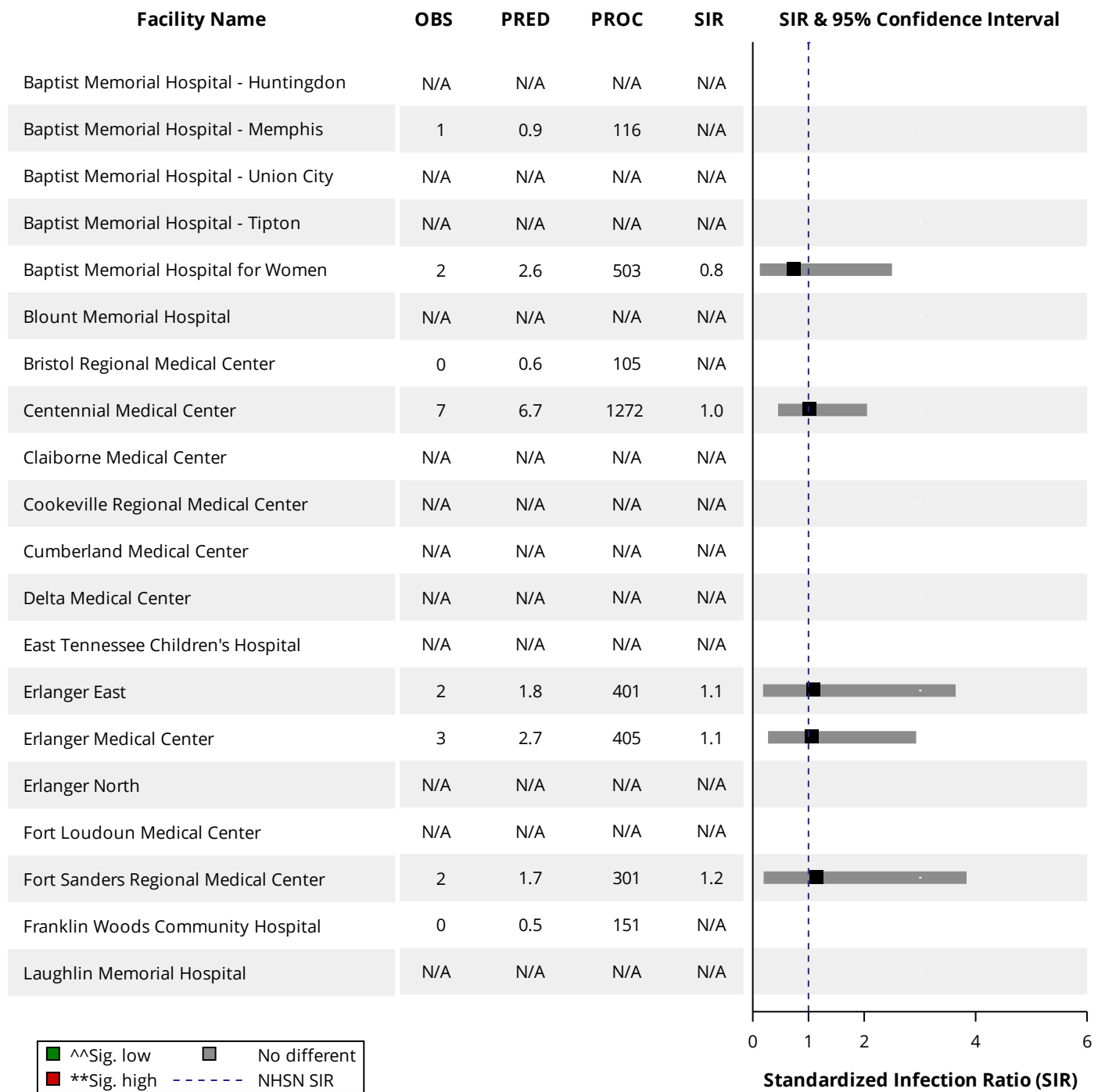
Figure 84: Microorganisms Identified from Surgical Site Infections (SSI) following Abdominal Hysterectomy (HYST) Procedures, Tennessee, 01/01/2020–12/31/2020

Number of isolates=82; Number of events=73



Data reported as of June 01, 2021
Other pathogens =

Figure 85: Abdominal Hysterectomy (HYST) Complex Admission/Readmission Surgical Site Infection (SSI) Standardized Infection Ratios (SIRs) in Acute Care Facilities, Tennessee, 01/01/2019 – 12/31/2019



Data Reported as of June 01, 2021

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

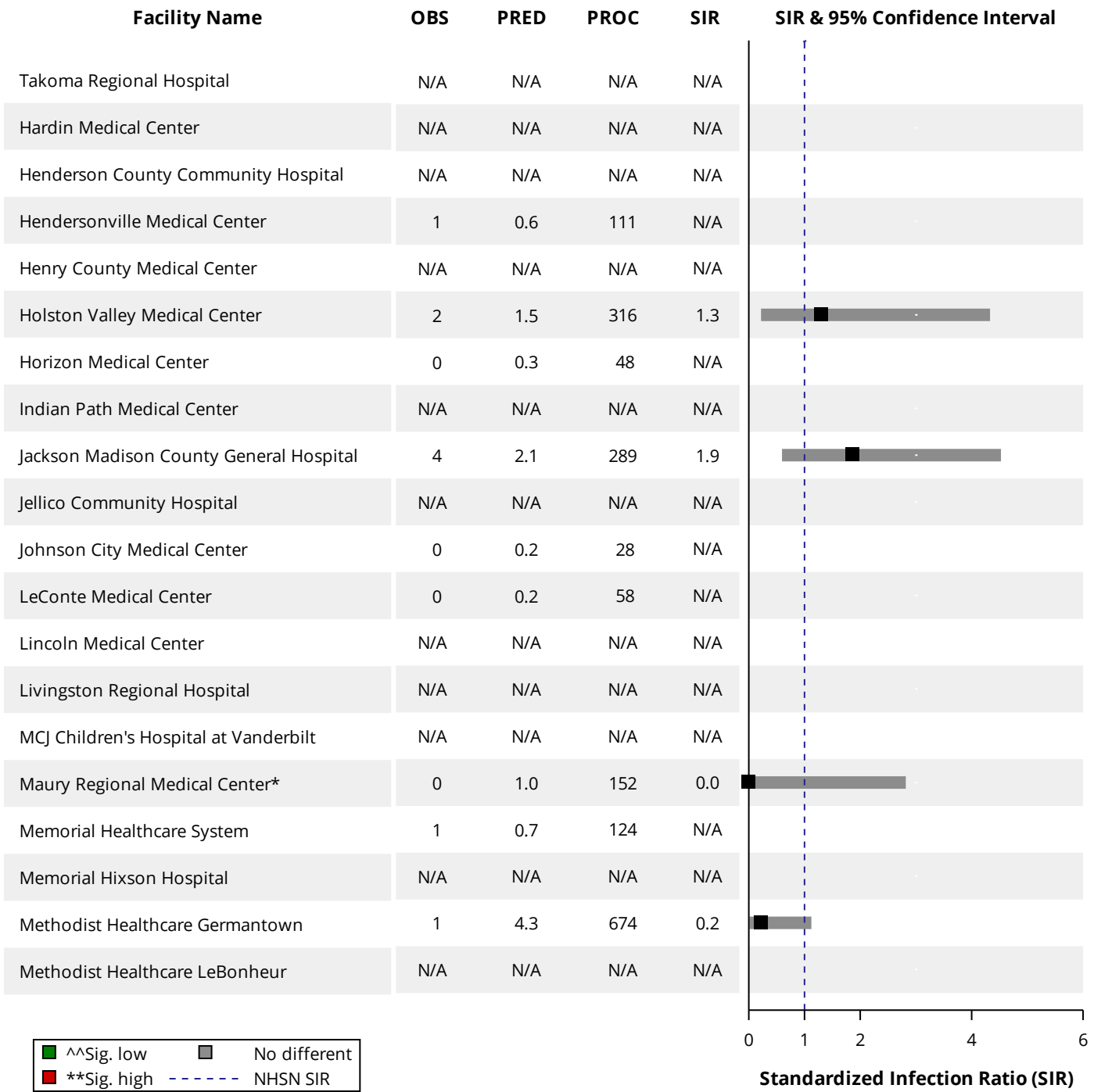
N/A = Data not shown for facilities with <20 procedures performed / SIR not calculated for facilities with <1 predicted infection

** Significantly higher than 2015 national baseline

^^ Significantly lower than 2015 national baseline

* Zero infections, but not statistically significant

Figure 85 (cont'd)



Data Reported as of June 01, 2021

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

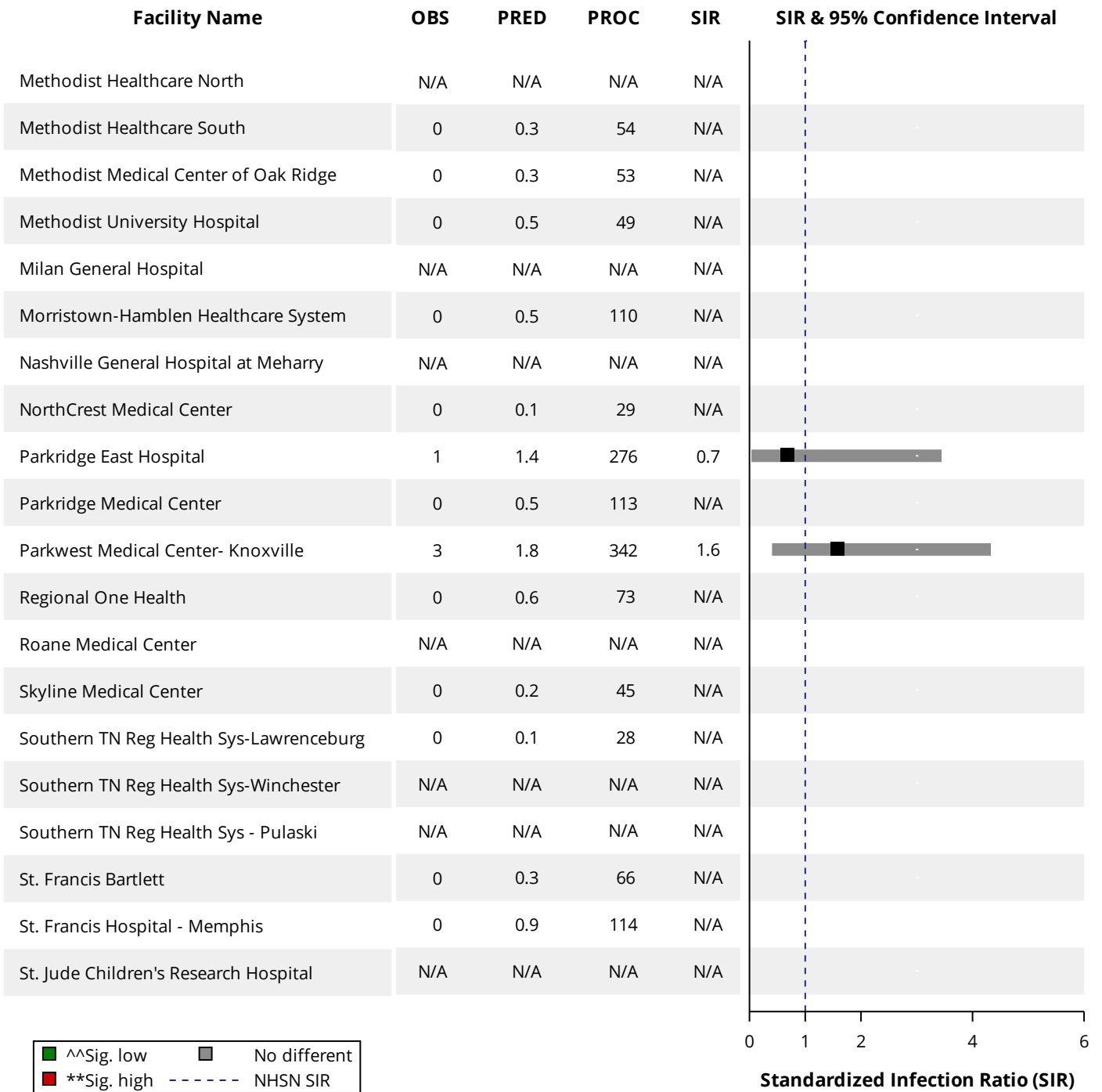
N/A = Data not shown for facilities with <20 procedures performed / SIR not calculated for facilities with <1 predicted infection

** Significantly higher than 2015 national baseline

^^ Significantly lower than 2015 national baseline

* Zero infections, but not statistically significant

Figure 85 (cont'd)



Data Reported as of June 01, 2021

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 85 (cont'd)



Data Reported as of June 01, 2021

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

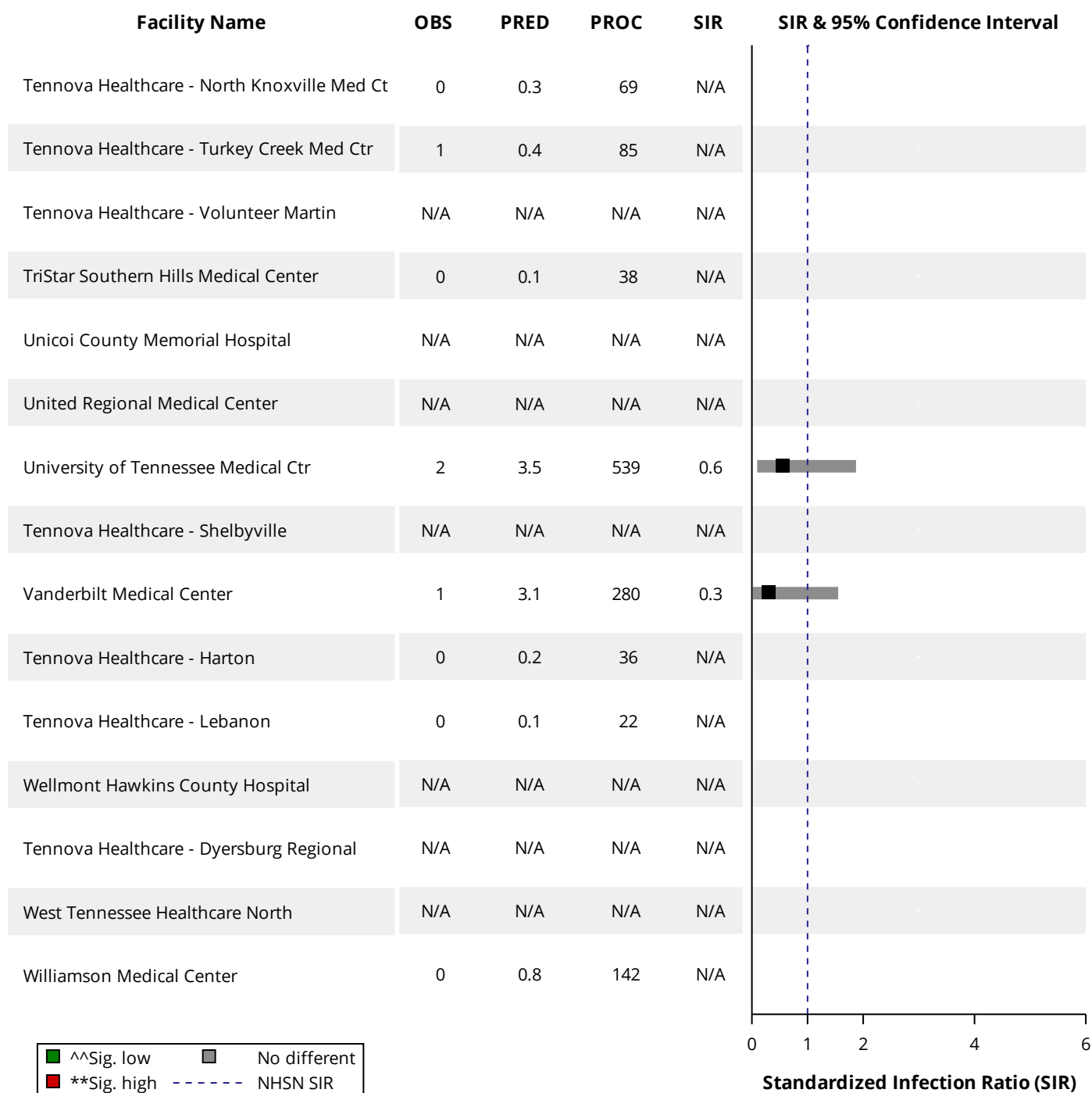
N/A = Data not shown for facilities with <20 procedures performed / SIR not calculated for facilities with <1 predicted infection

** Significantly higher than 2015 national baseline

^^ Significantly lower than 2015 national baseline

* Zero infections, but not statistically significant

Figure 85 (cont'd)



Data Reported as of June 01, 2021

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

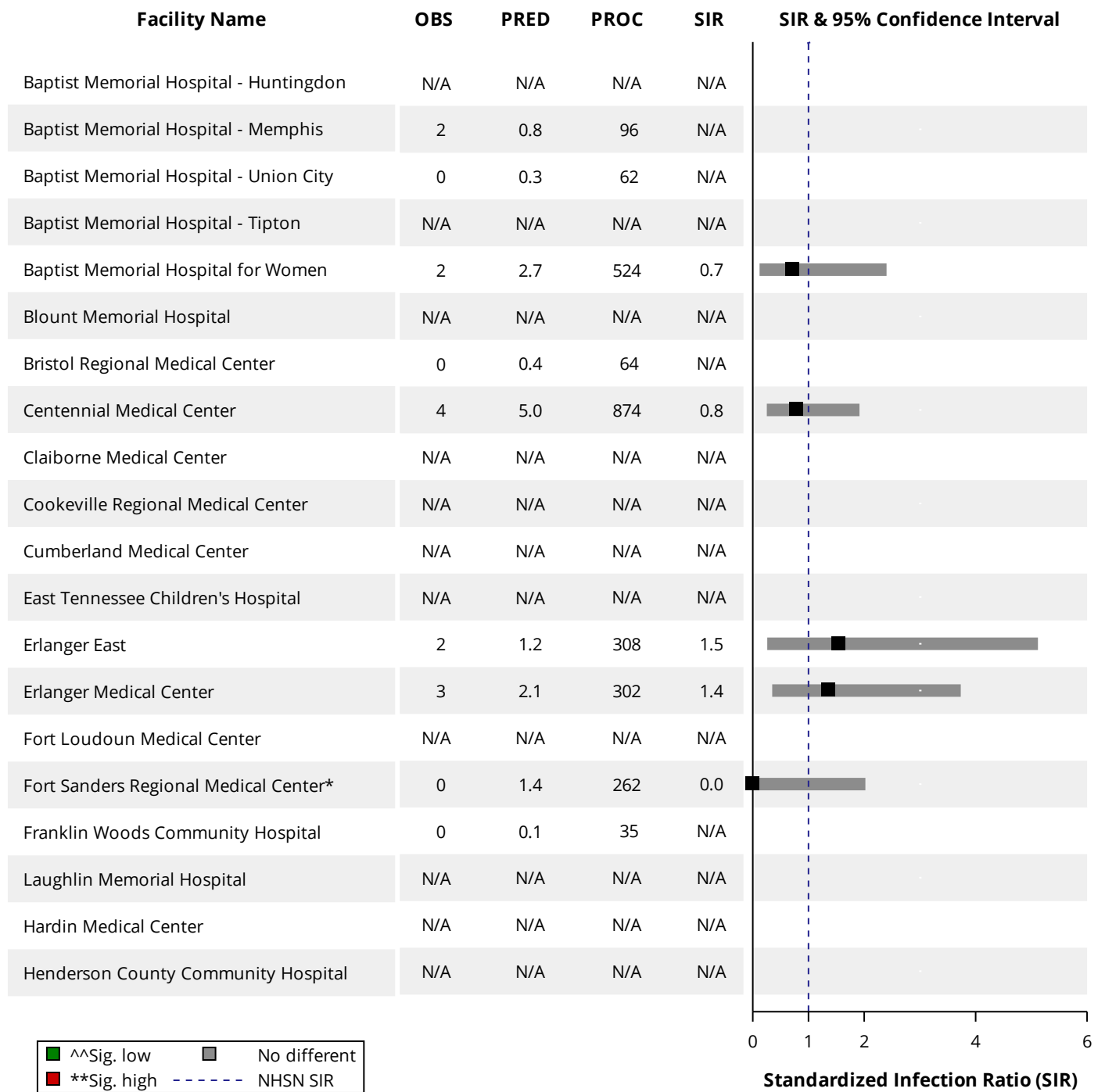
N/A = Data not shown for facilities with <20 procedures performed / SIR not calculated for facilities with <1 predicted infection

** Significantly higher than 2015 national baseline

^^ Significantly lower than 2015 national baseline

* Zero infections, but not statistically significant

Figure 86: Abdominal Hysterectomy (HYST) Complex Admission/Readmission Surgical Site Infection (SSI) Standardized Infection Ratios (SIRs) in Acute Care Facilities, Tennessee, 01/01/2020 – 12/31/2020



Data Reported as of June 01, 2021

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 86 (cont'd)



Data Reported as of June 01, 2021

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

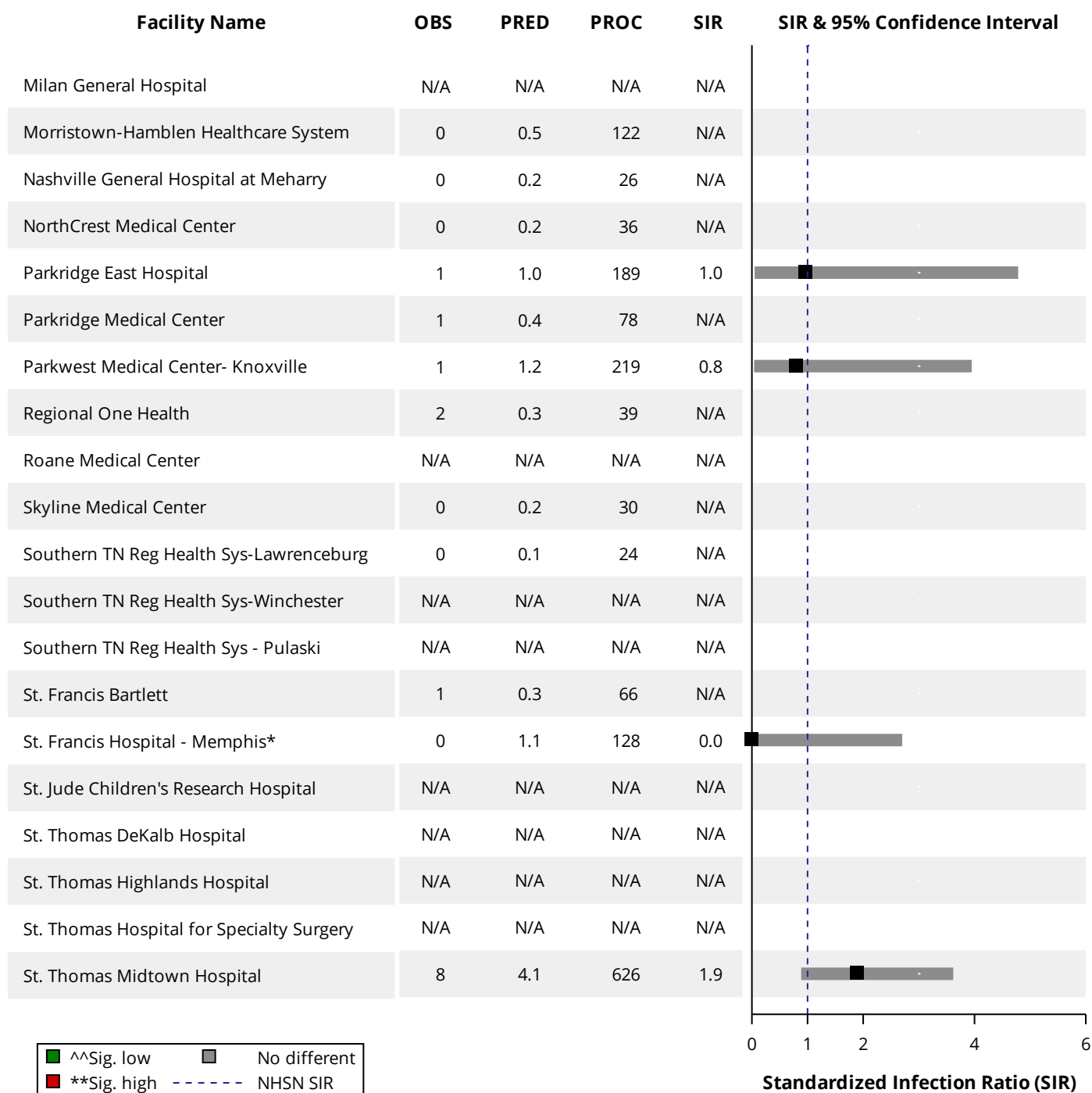
N/A = Data not shown for facilities with <20 procedures performed / SIR not calculated for facilities with <1 predicted infection

** Significantly higher than 2015 national baseline

^^ Significantly lower than 2015 national baseline

* Zero infections, but not statistically significant

Figure 86 (cont'd)



Data Reported as of June 01, 2021

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

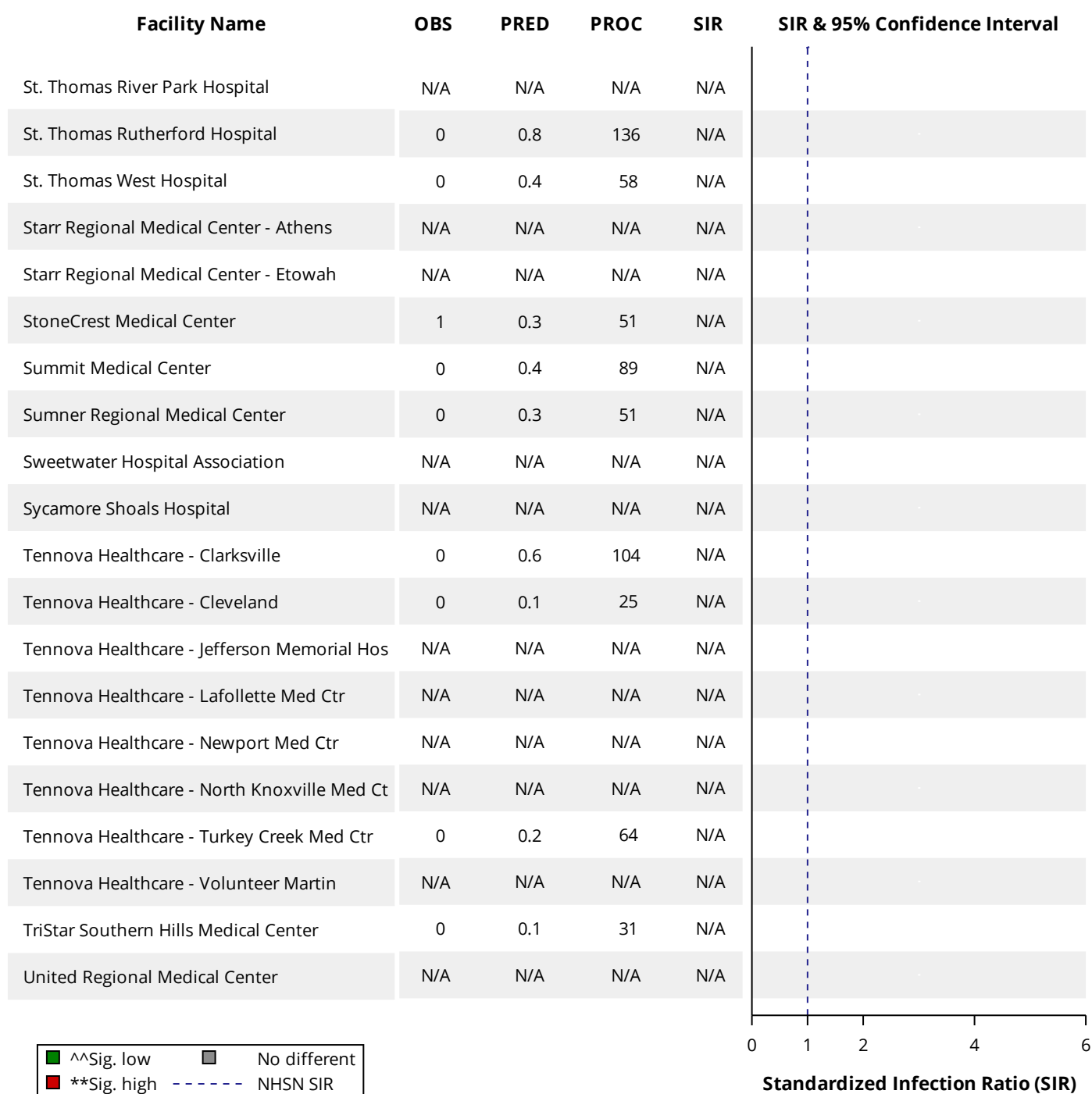
N/A = Data not shown for facilities with <20 procedures performed / SIR not calculated for facilities with <1 predicted infection

** Significantly higher than 2015 national baseline

^^ Significantly lower than 2015 national baseline

* Zero infections, but not statistically significant

Figure 86 (cont'd)



Data Reported as of June 01, 2021

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

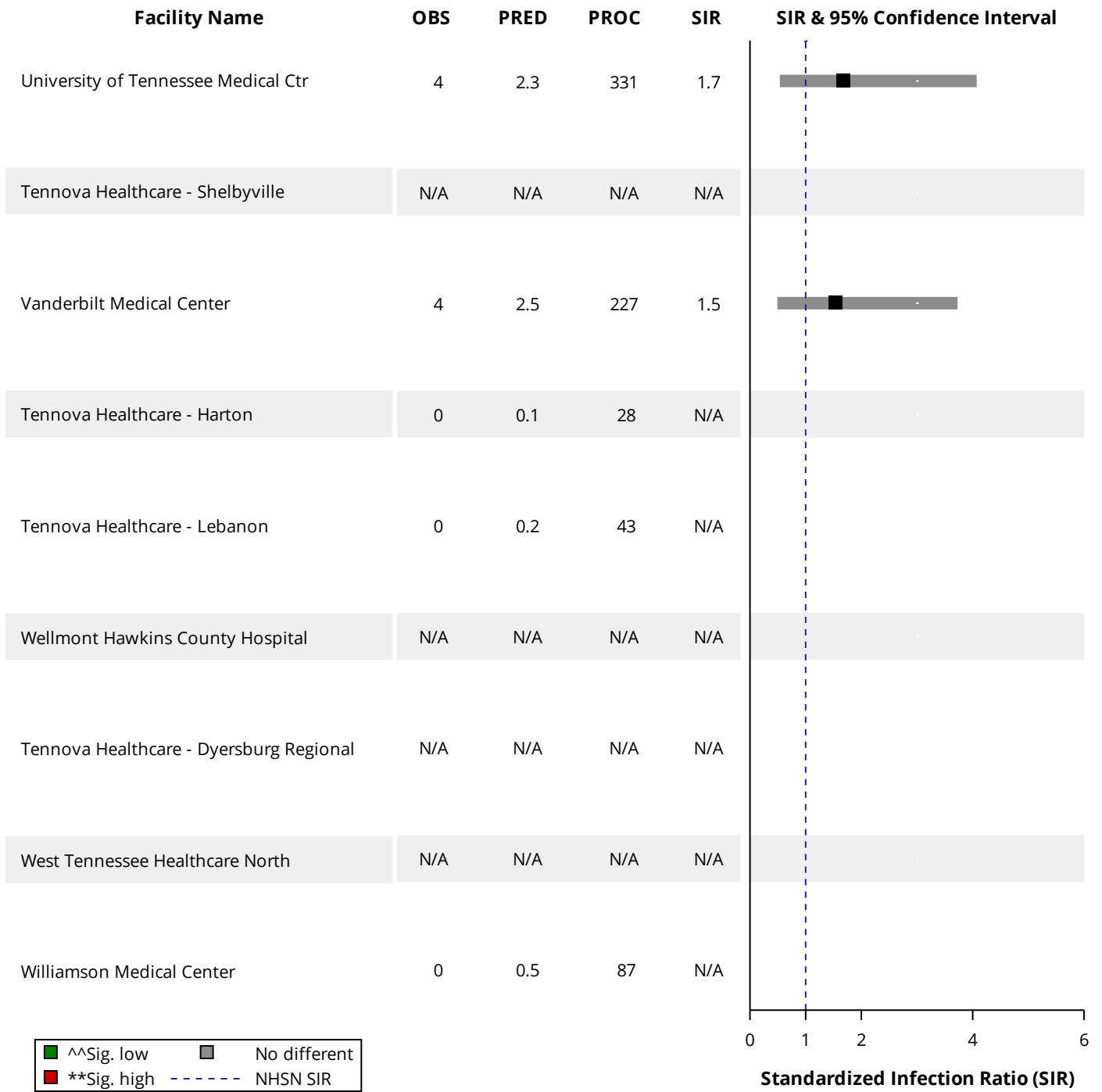
N/A = Data not shown for facilities with <20 procedures performed / SIR not calculated for facilities with <1 predicted infection

** Significantly higher than 2015 national baseline

^^ Significantly lower than 2015 national baseline

* Zero infections, but not statistically significant

Figure 86 (cont'd)



Data Reported as of June 01, 2021

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](#)²⁷).

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, 24-hour Observations and emergency departments), and long-term acute care hospitals (facility-wide inpatient locations). 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](#)²⁸, 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 /24-hour Observation locations 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 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.

²⁷ http://www.cdc.gov/mrsa/pdf/SHEA-mrsa_tagged.pdf

²⁸ 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

CDC used 2015 HAI data to create the 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 period used to establish the baseline, or reference points, varied among the different HAI measures. Thus, in TN HAI reports before 2015, the number of predicted infections was estimated based on those original baselines. Therefore, the data in this report are not comparable with HAI reports before 2015. Further details can be seen in the [NHSN Guide to the SIR](#).²⁹

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, Medical school affiliation, facility type, ICU bed size, and outpatient community-onset prevalence rate. The negative binomial regression model is based on national NHSN data from 2015. Note that IRFs and LTACs utilize an intercept only model for MRSA risk adjustment.

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:

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

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

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

²⁹ <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 2019: 102

Total number of facilities reporting from January-December 2020: 100

SIRs by Quarter (Figure 87)

- The overall healthcare-onset (HO) MRSA bacteremia LabID SIR in acute care hospitals saw a continued small increase from Q1-2019 through Q4-2020 beginning at 1.12 in Q1-2019 and concluding the reporting period at 1.42 in Q4-2020. Q1-2020 in Tennessee ACHs had the lowest HO MRSA SIR which was outside the overall trend with an SIR of 0.80 (95% CI: 0.60, 1.03). In four of the 8 quarters through 2019 and 2020 Tennessee's ACHs had statistically higher than predicted SIRs as modeled from the 2015 baseline. These were Q3 and Q4 in 2019, and Q3 – Q4 2020.
- The U.S. Department of Health and Human Services' [National Action Plan to Prevent Healthcare-Associated Infections](#)³⁰ prevention target for healthcare-onset MRSA bacteremia LabID is an SIR = 0.50. In 2019 and 2020, the MRSA LabID SIR remained above the 2020 HHS prevention target of 0.50 in each quarter.

Healthcare Facility-Onset and Community-Onset MRSA LabID Rates (Figure 88)

- The healthcare facility-onset MRSA LABID incidence rate was 0.84 in 2019 and 0.93 in 2020 per 10,000 patient days.
- The prevalence of community-onset MRSA bacteremia LabID events for 2019 was 0.82 per 1,000 admissions; the prevalence of community-onset MRSA increased in 2020 with a pooled mean rate of 0.87 per 1,000 admissions. Both 2019 and 2020 community-onset MRSA prevalence pooled mean rate was lower than 2017-2018.

Key percentiles for Tennessee SIRs (Table 29, Table 30)

- The overall healthcare-onset MRSA bacteremia LabID SIR for acute care hospitals in Tennessee in both 2019 and 2020 was statistically significantly higher than the 2015 national SIR of 1. In 2019 there was an SIR of 1.19 (95% CI: 1.07, 1.33) and in 2020 the HO MRSA SIR in acute care hospitals was 1.23 (95% CI: 1.10, 1.37)

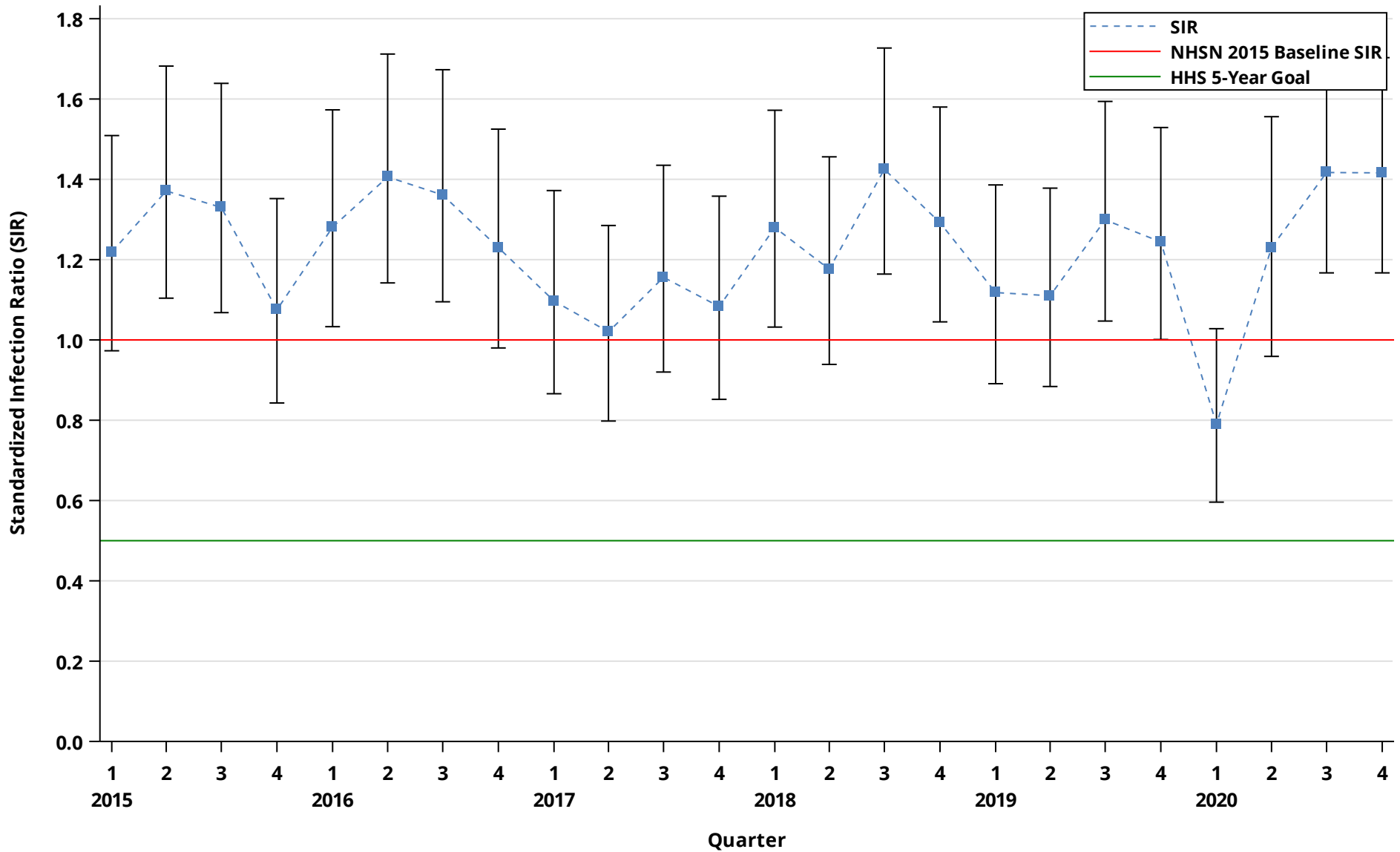
³⁰ http://www.health.gov/hai/prevent_hai.asp

- In 2019 and 2020, the median healthcare-onset MRSA bacteremia LabID SIR for acute care hospitals was 1.01 indicating that half of reporting facilities with at least 1 predicted infection had a healthcare-onset MRSA LabID SIR at or below 1.01.

Facility-Specific SIRs (Figure 89, Figure 90)

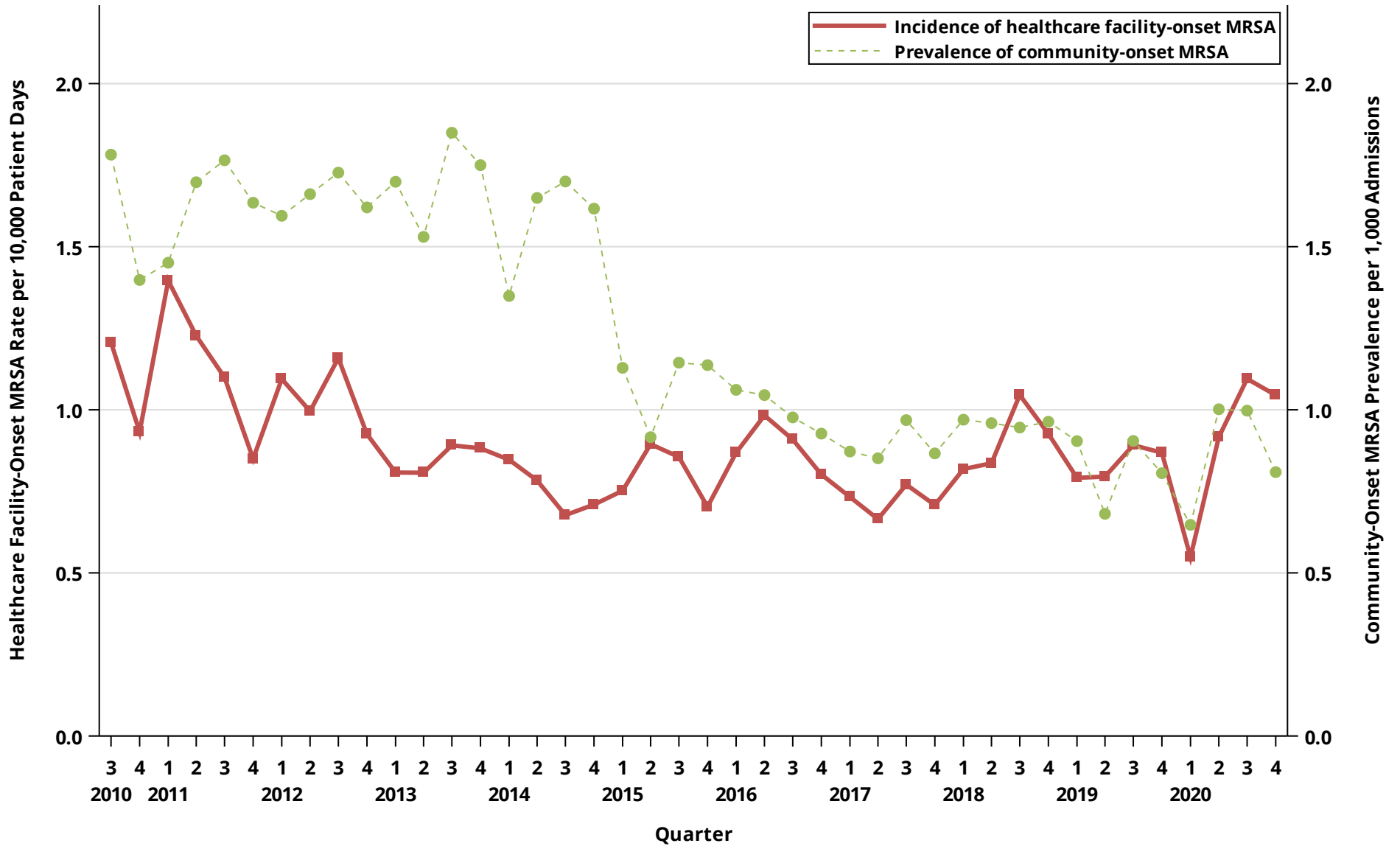
- The healthcare facility-onset MRSA bacteremia LabID event SIR for January-December 2019 and 2020 for each acute care facility is displayed in [Figure 89](#) and [Figure 90](#). The bar representing the confidence interval is green if the was significantly lower than the 2015 national SIR of 1 and red 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 2019, seven facilities had a healthcare facility-onset MRSA bacteremia LabID event SIR that was statistically significantly higher than the 2015 national baseline SIR of 1. One facility had an MRSA bacteremia LabID event SIR that was statistically significantly lower in 2019. In 2020, six facilities had a healthcare facility-onset MRSA bacteremia LabID event SIR that was statistically significantly higher than the 2015 national baseline SIR of 1 while two facilities had a lower HO MRSA SIR in 2020.

Figure 87: Standardized Infection Ratio (SIR) for Healthcare-Onset Methicillin-resistant Staphylococcus aureus (MRSA) Bacteremia Laboratory-Identified (LabID) Events for Acute Care Hospitals by Quarter, Tennessee, 01/01/2015–12/31/2020 [Reference standard: National Healthcare Safety Network (NHSN), 2015]



Data Reported as of June 01, 2021

Figure 88: Methicillin-resistant Staphylococcus aureus (MRSA) Bacteremia Laboratory-Identified (LabID) Events Pooled Mean Incidence and Prevalence Rates in Acute Care Hospitals by Quarter, Tennessee, 07/01/2010-12/31/2020



Data Reported as of June 01, 2021

Table 29: Healthcare-Onset Methicillin-resistant Staphylococcus aureus (MRSA) Laboratory-Identified (LabID) Events Standardized Infection Ratio (SIR) in Acute Care Hospitals by Reporting Year, Tennessee, 01/01/2019–12/31/2020

									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	YEA R	No .	PAT DAYS	OBS	PRED	SIR	LOWE R LIMIT	UPPE R LIMIT	No. of FACS WITH ≥1 PRED INFECTION	N	%	N	%	10 %	25 %	50 %	75 %	90 %
Tennessee	2020	100	3,679,574	333	271.22	1.23	1.10	1.37	46	2	4%	6	13%	0.00	0.77	1.01	1.48	2.77
	2019	102	3,945,208	330	277.02	1.19	1.07	1.33	44	1	2%	7	16%	0.40	0.71	1.01	1.68	2.55

Data reported as of June 01, 2021

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

Table 30: Methicillin-resistant Staphylococcus aureus (MRSA) Laboratory-Identified (LabID) Events Pooled Mean Incidence and Prevalence Rates in Acute Care Hospitals by Year, Tennessee, 01/01/2019–12/31/2020

			Healthcare Facility-Onset Incidence ¹	Community-Onset Prevalence ²
STATE	YEAR	No.	POOLED MEAN	POOLED MEAN
Tennessee	2020	101	0.93	0.87
	2019	103	0.84	0.82

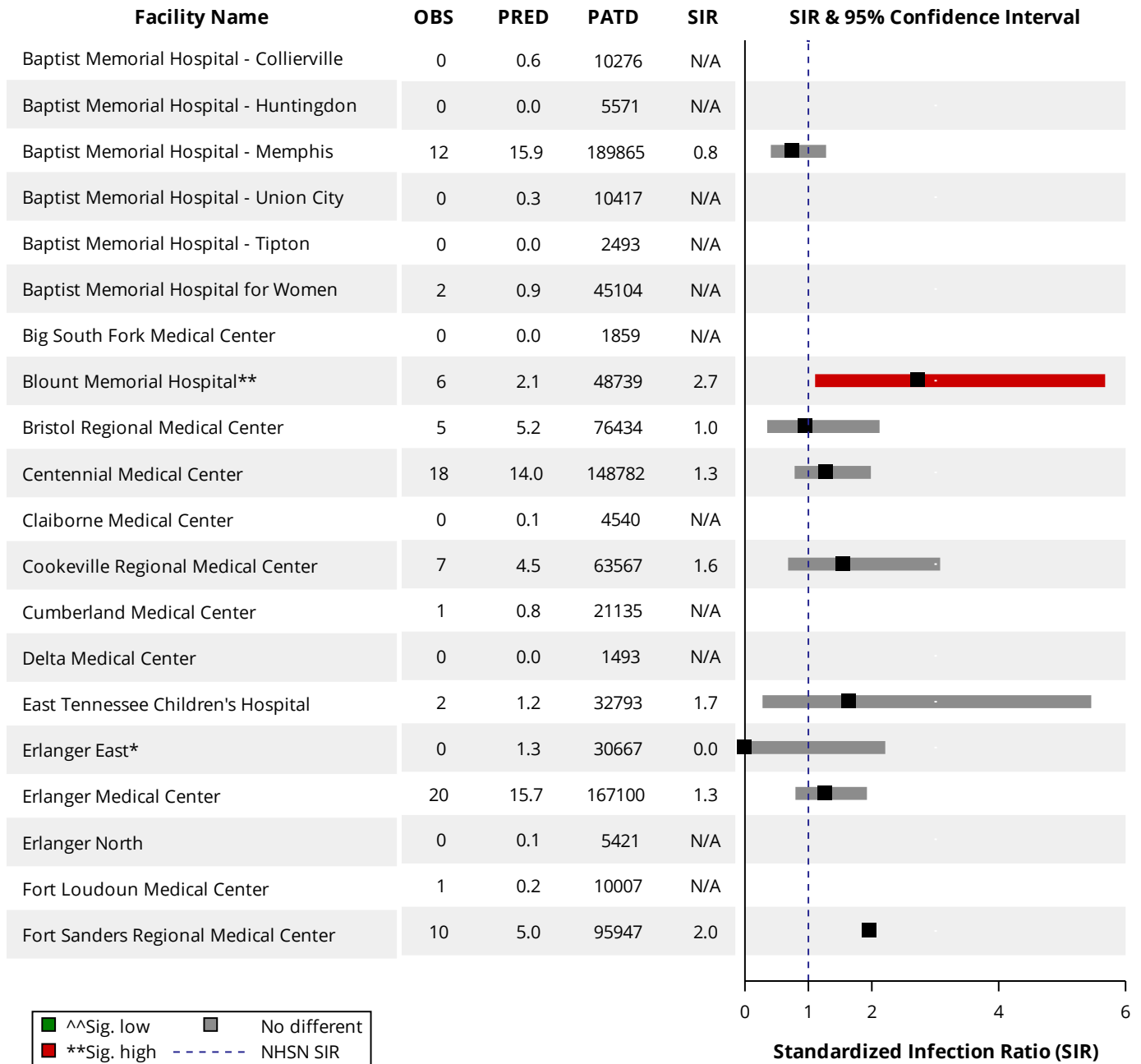
Data reported as of June 01, 2021

No. of facilities reporting

¹Events per 10,000 patient days

²Events per 1,000 admissions

Figure 89: Healthcare Facility-Onset Methicillin-resistant Staphylococcus aureus (MRSA) Laboratory-Identified (LabID) Event Standardized Infection Ratios (SIRs) in Acute Care Facilities, Tennessee, 01/01/2019 – 12/31/2019



Data Reported as of June 01, 2021

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

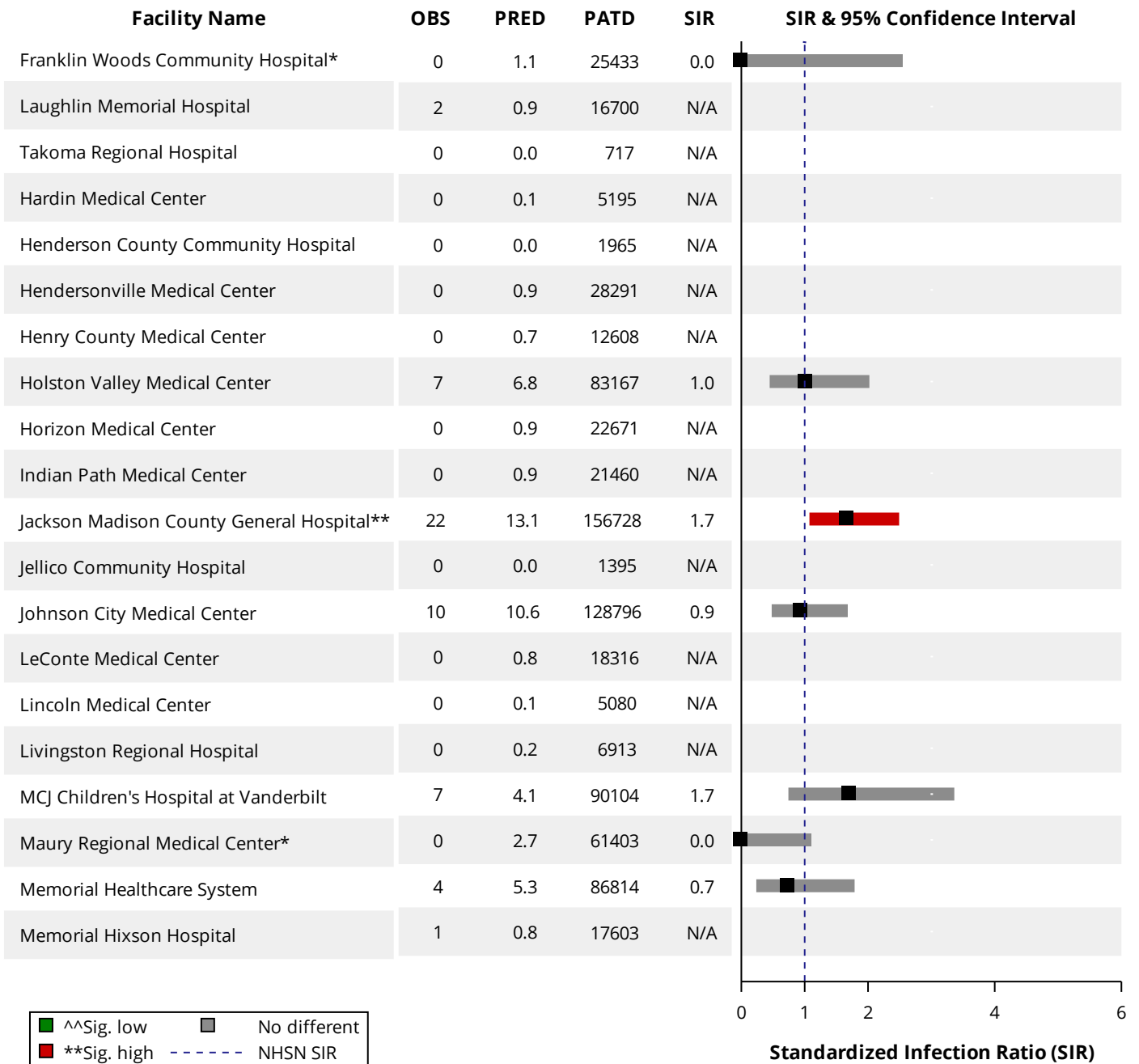
N/A = SIR not calculated for facilities with <1 predicted infection

** Significantly higher than national baseline

^^ Significantly lower than national baseline

* Zero events, but not statistically significant

Figure 89 (cont'd)



Data Reported as of June 01, 2021

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

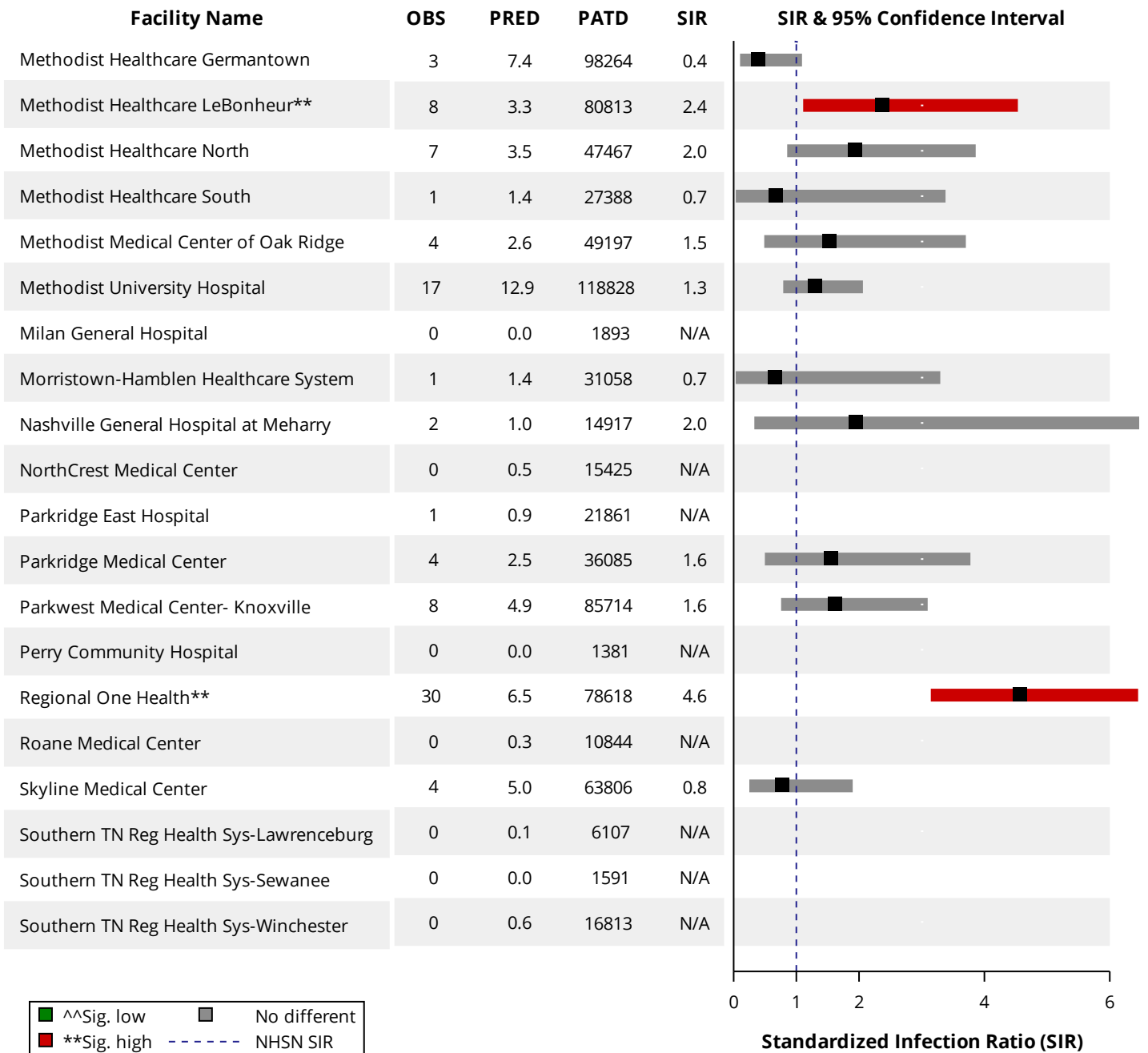
N/A = SIR not calculated for facilities with <1 predicted infection

** Significantly higher than national baseline

^^ Significantly lower than national baseline

* Zero events, but not statistically significant

Figure 89 (cont'd)



Data Reported as of June 01, 2021

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

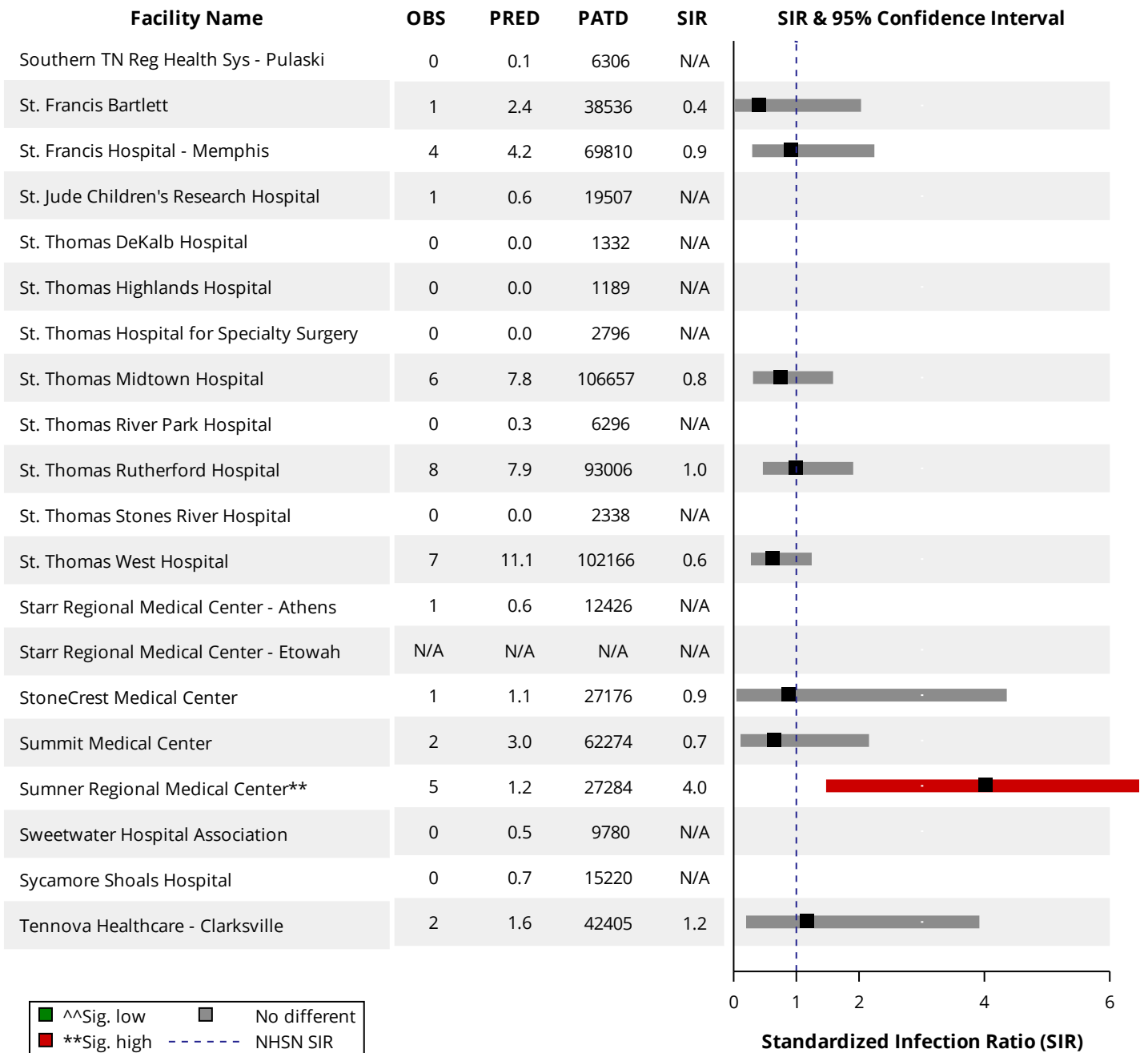
N/A = SIR not calculated for facilities with <1 predicted infection

** Significantly higher than national baseline

^^ Significantly lower than national baseline

* Zero events, but not statistically significant

Figure 89 (cont'd)



Data Reported as of June 01, 2021

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

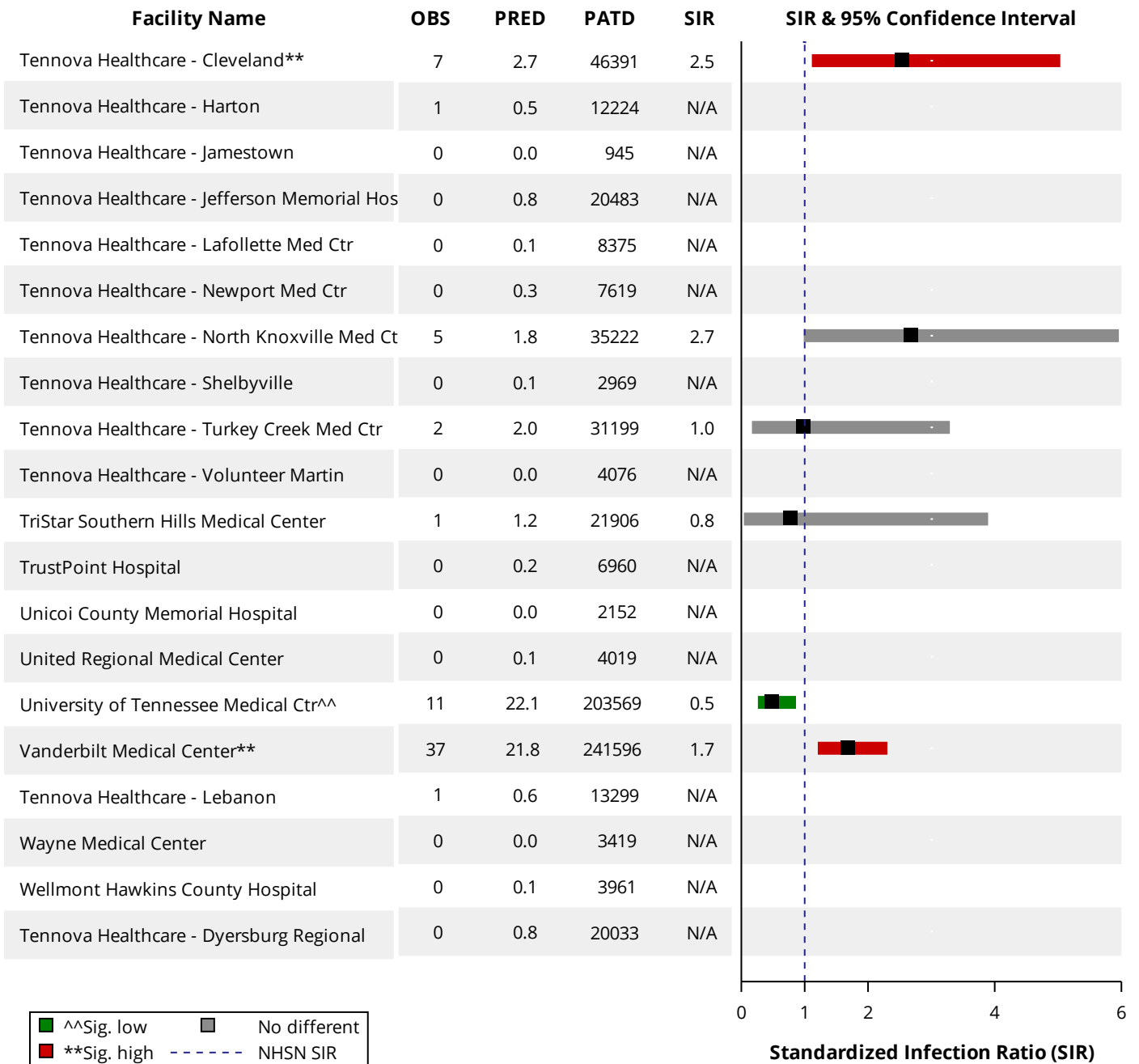
N/A = SIR not calculated for facilities with <1 predicted infection

** Significantly higher than national baseline

^^ Significantly lower than national baseline

* Zero events, but not statistically significant

Figure 89 (cont'd)



Data Reported as of June 01, 2021

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

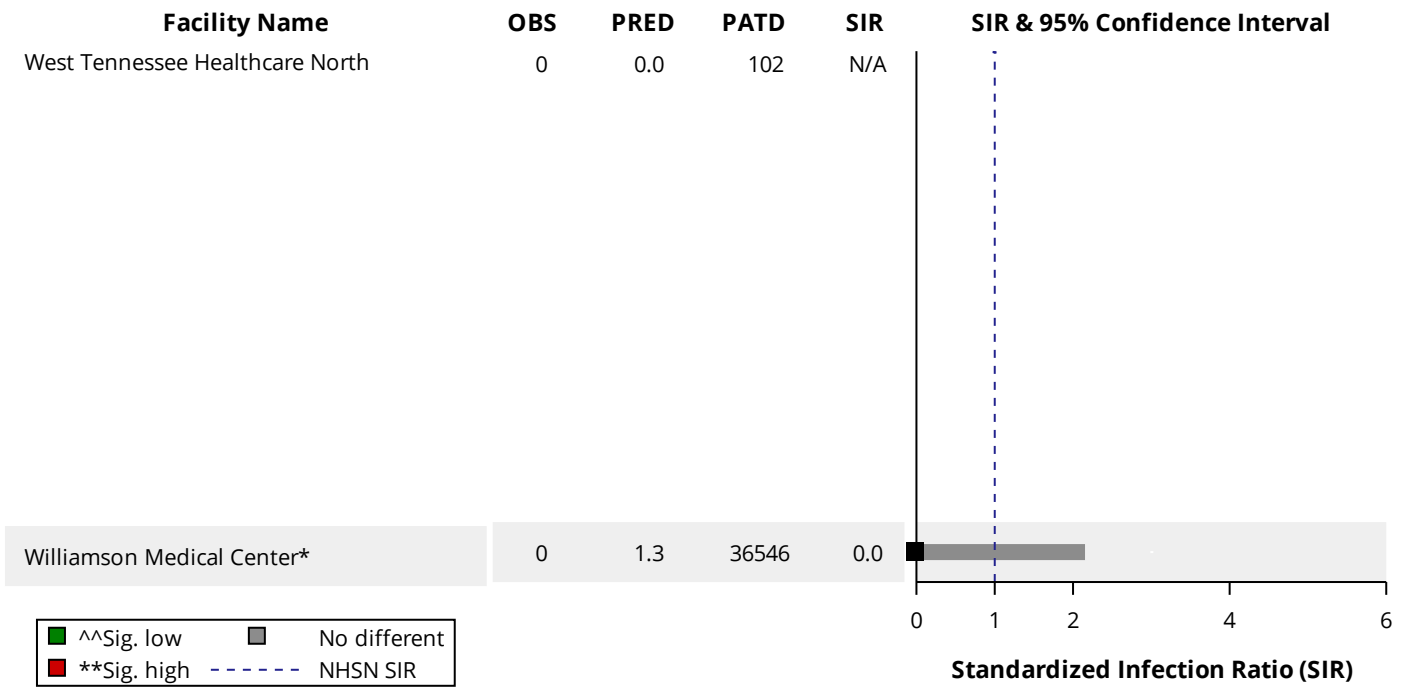
N/A = SIR not calculated for facilities with <1 predicted infection

** Significantly higher than national baseline

^^ Significantly lower than national baseline

* Zero events, but not statistically significant

Figure 89 (cont'd)



Data Reported as of June 01, 2021

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

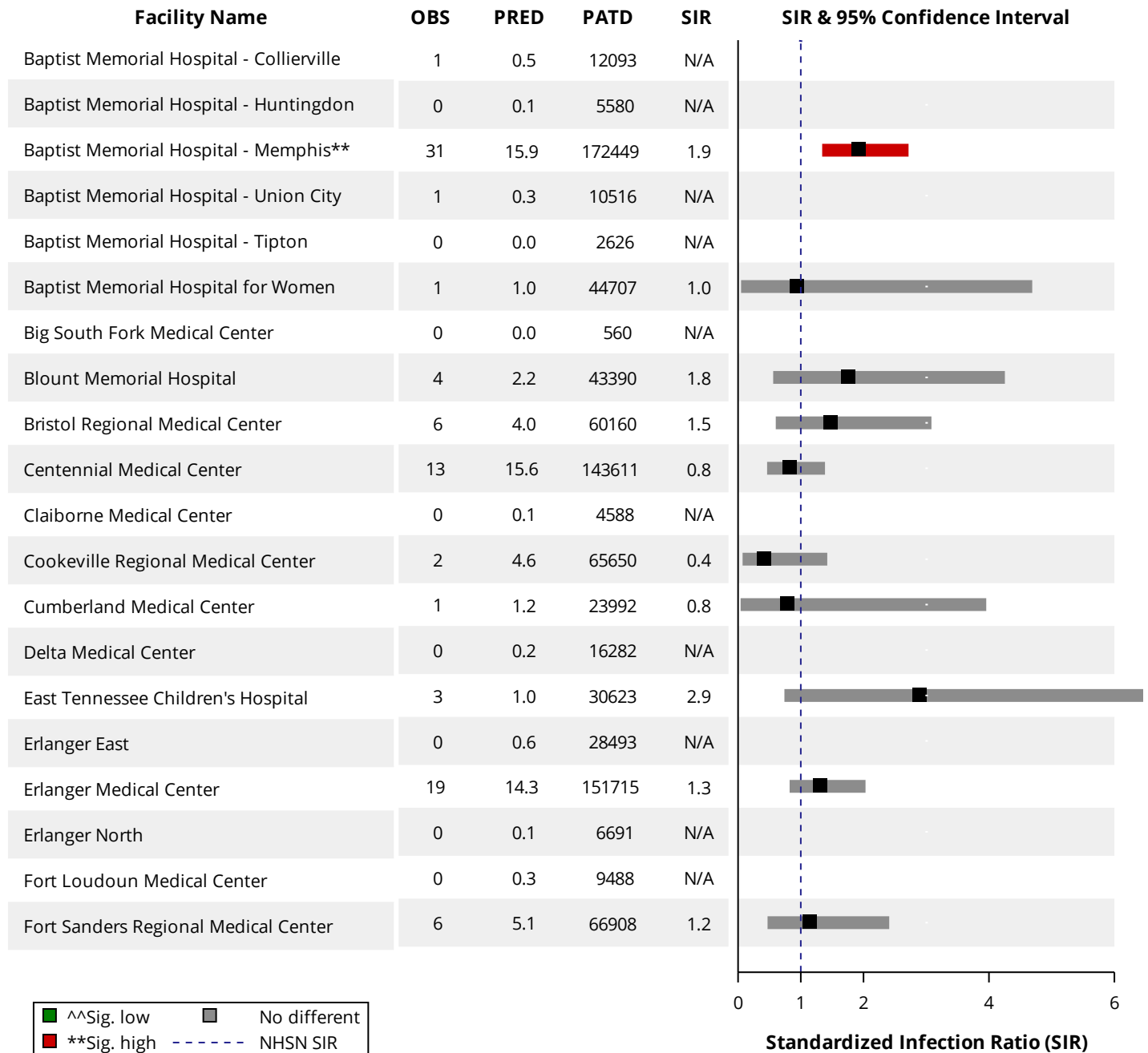
N/A = SIR not calculated for facilities with <1 predicted infection

** Significantly higher than national baseline

^^ Significantly lower than national baseline

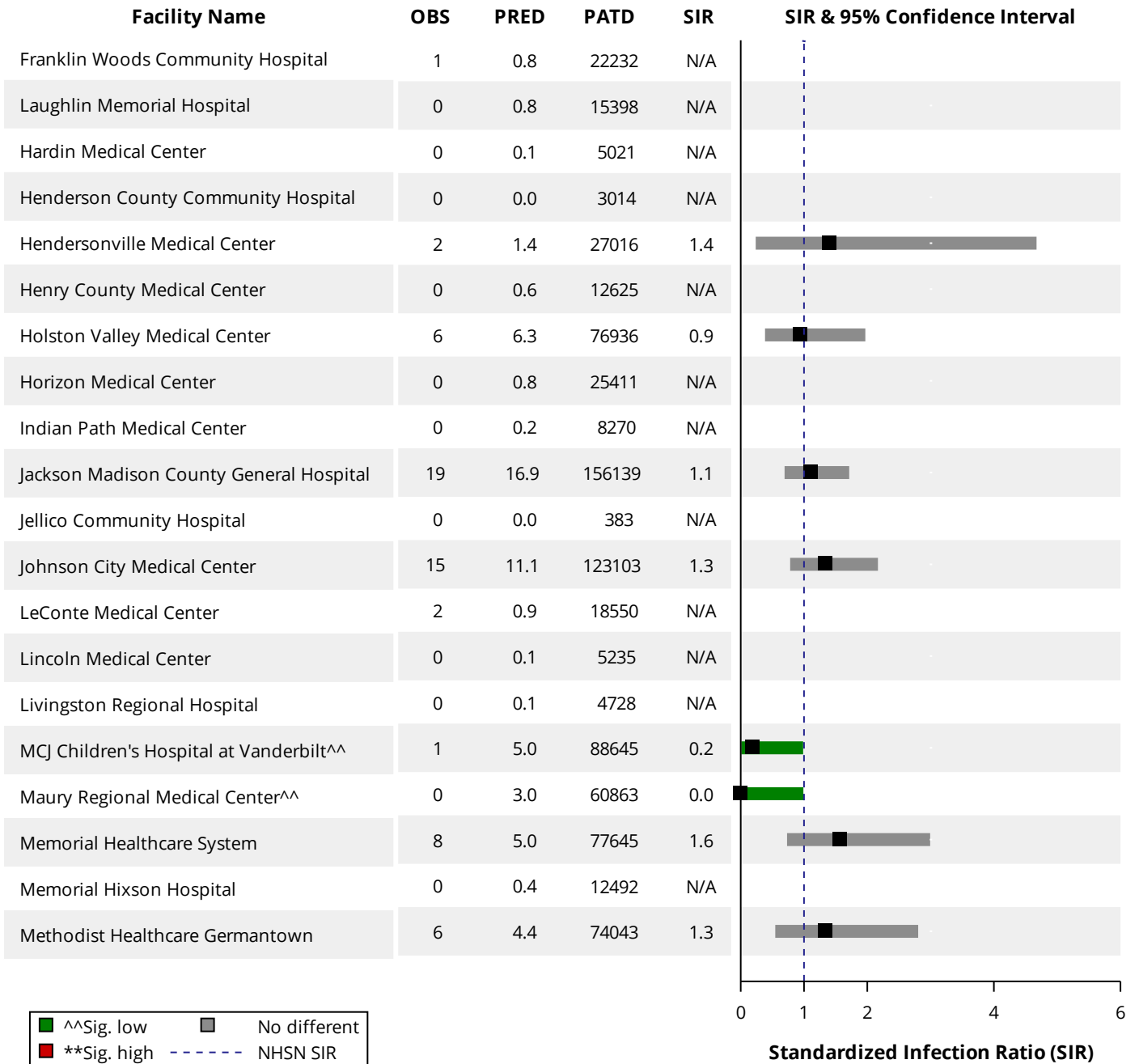
* Zero events, but not statistically significant

Figure 90: Healthcare Facility-Onset Methicillin-resistant Staphylococcus aureus (MRSA) Laboratory-Identified (LabID) Event Standardized Infection Ratios (SIRs) in Acute Care Facilities, Tennessee, 01/01/2020 – 12/31/2020



Data Reported as of June 01, 2021
 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 90 (cont'd)



Data Reported as of June 01, 2021

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

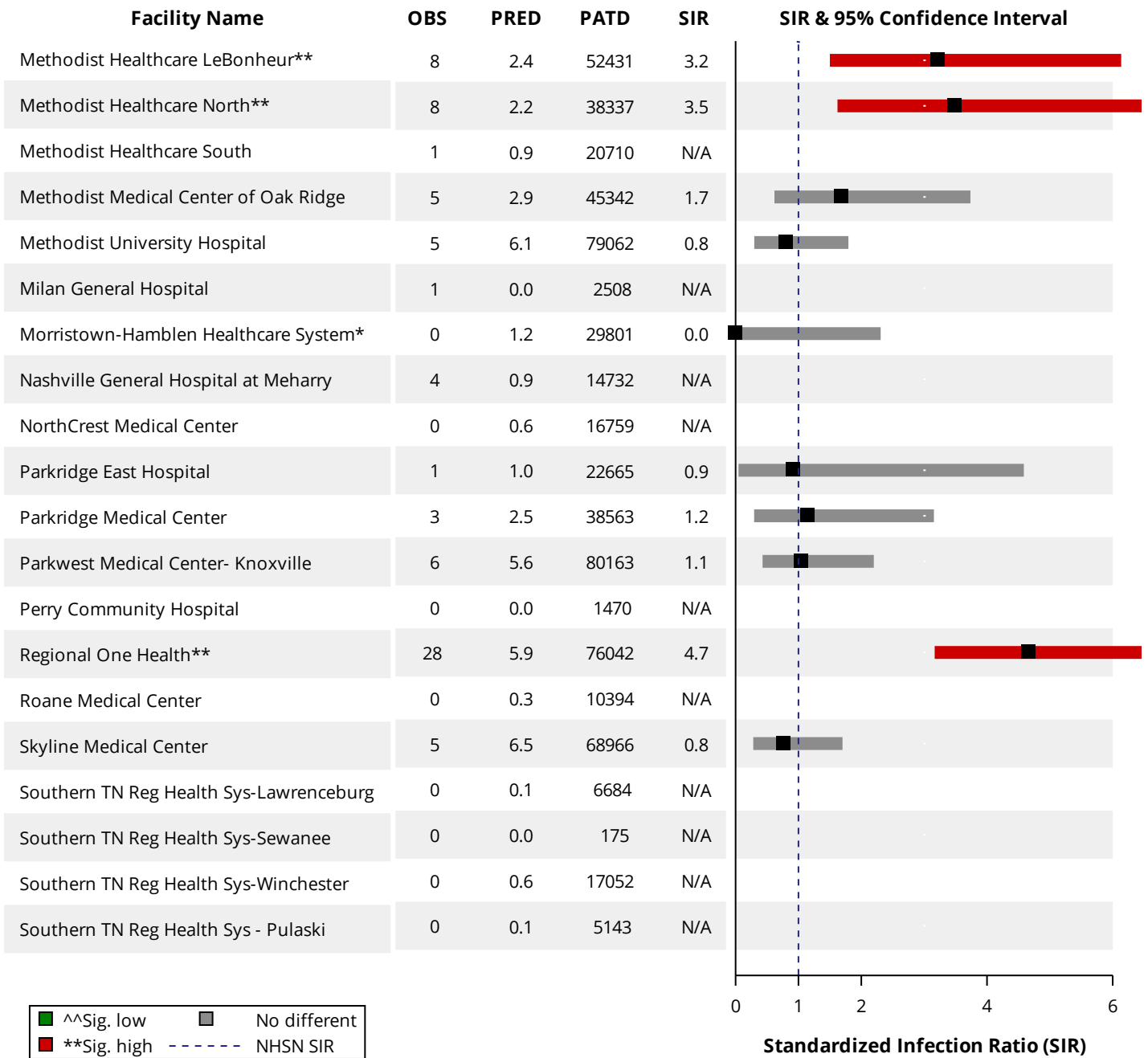
N/A = SIR not calculated for facilities with <1 predicted infection

** Significantly higher than national baseline

^^ Significantly lower than national baseline

* Zero events, but not statistically significant

Figure 90 (cont'd)



Data Reported as of June 01, 2021

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

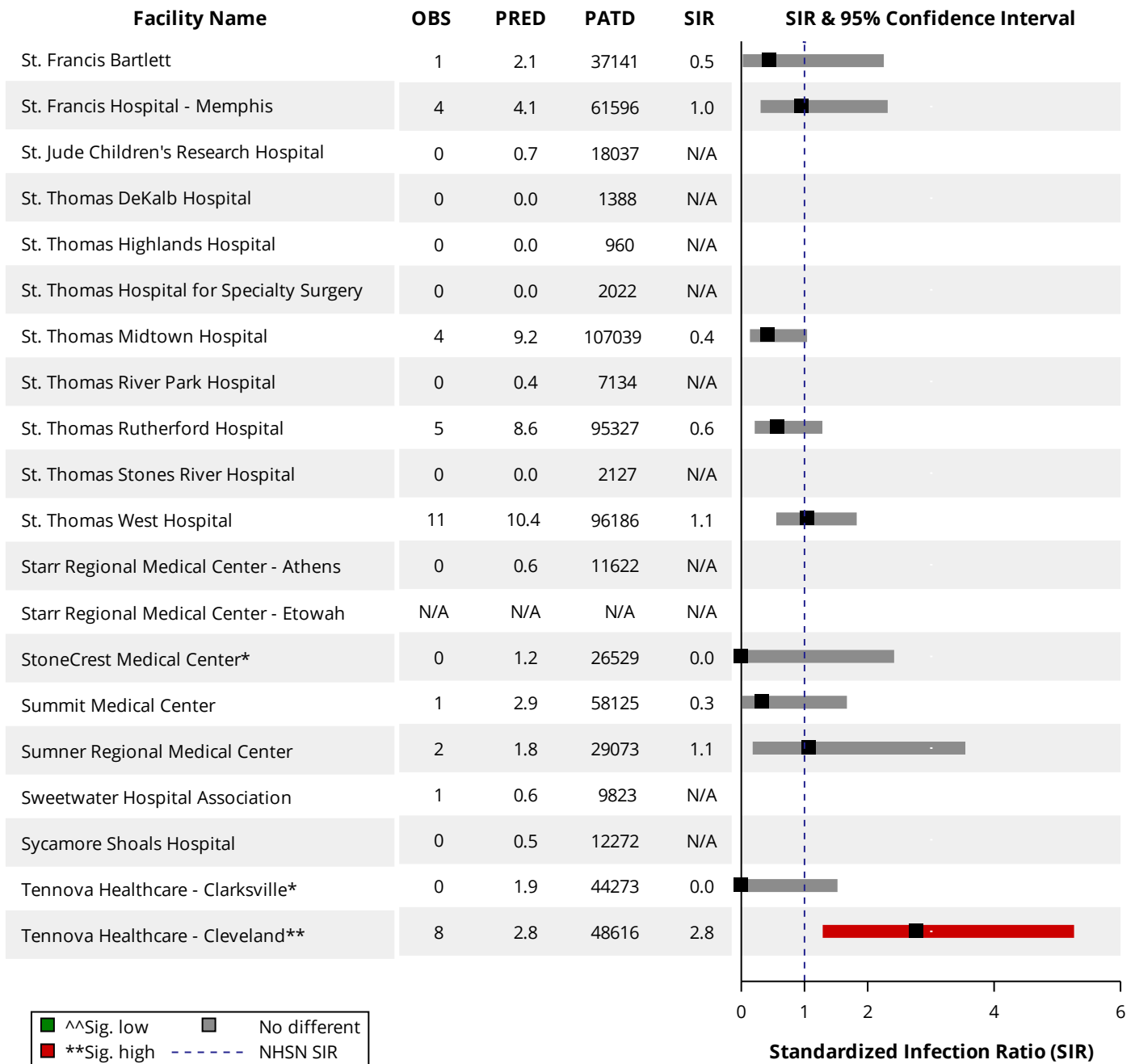
N/A = SIR not calculated for facilities with <1 predicted infection

** Significantly higher than national baseline

^^ Significantly lower than national baseline

* Zero events, but not statistically significant

Figure 90 (cont'd)



Data Reported as of June 01, 2021

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

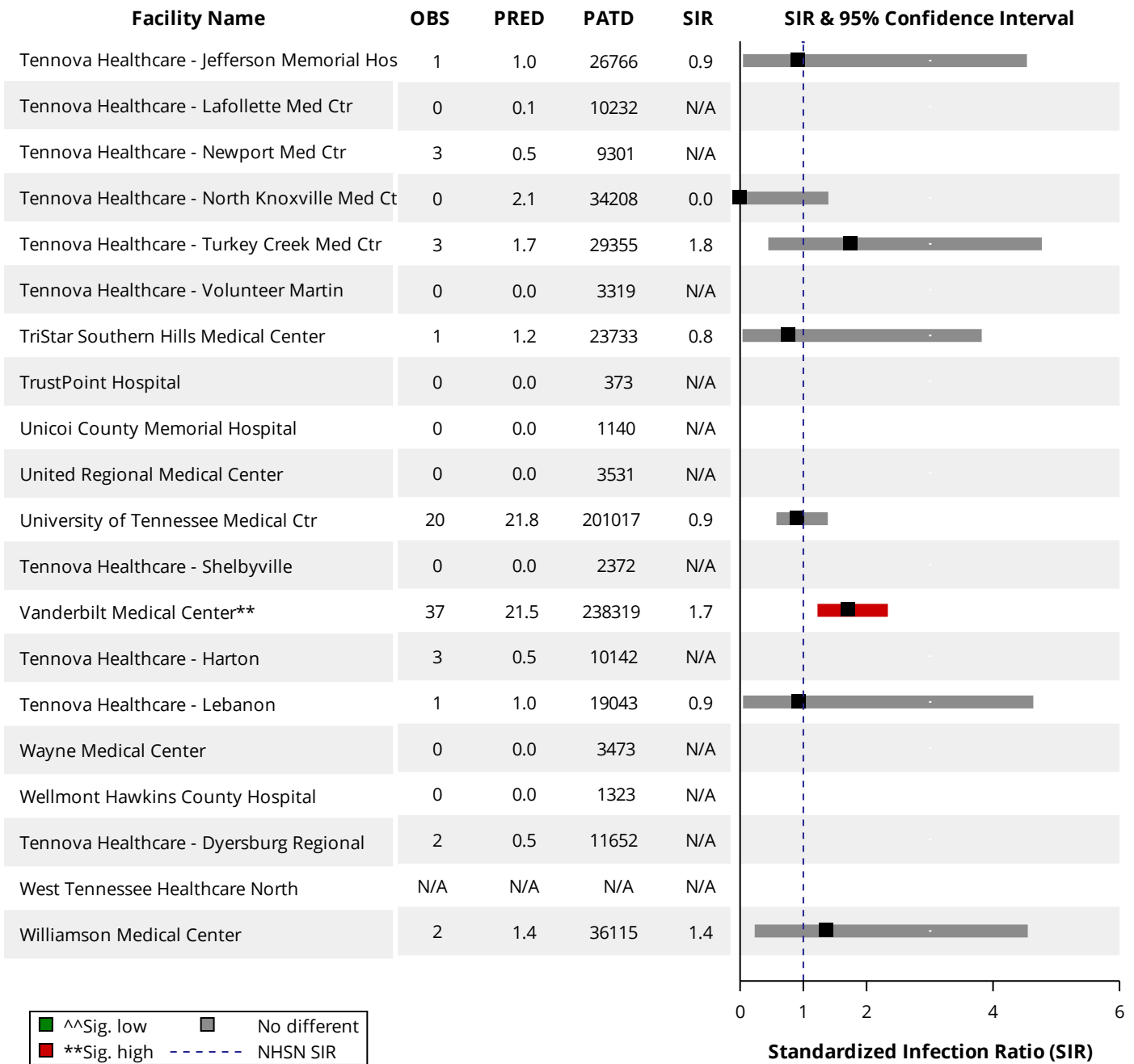
N/A = SIR not calculated for facilities with <1 predicted infection

** Significantly higher than national baseline

^^ Significantly lower than national baseline

* Zero events, but not statistically significant

Figure 90 (cont'd)



Data Reported as of June 01, 2021

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 2019: 9

Total number of facilities reporting from January-December 2020: 9

SIRs by Quarter ([Figure 91](#))

- In 2019, the overall healthcare-onset MRSA bacteremia LabID SIR in long-term acute care hospitals increased from a low SIR of 0.47 in Q1-2019 to a peak SIR of 2.50 in Q1-2020. The Q1-2020 was the highest reported figure since the 2015 re-baselining. The LTAC HO MRSA SIR fluctuated in Q2-Q4 2020 with a low of 0.41 and a high of 1.84. In no quarter of 2019-2020 did Tennessee LTACs statistically achieve the HHS 2020 goal of an SIR of 0.50. The only quarter that had a statistically higher than predicted HO MRSA SIR was Q1-2020.

Healthcare Facility-Onset and Community-Onset MRSA LabID Rates ([Figure 92](#))

- The incidence of healthcare facility-onset MRSA bacteremia LabID events was 3.05 events per 10,000 patient-days in 2020, higher than the incidence of 1.49 events per 10,000 patient-day events in 2019. The prevalence of community-onset MRSA bacteremia LabID events was the same in 2019 and 2020 (0.32 events per 1,000 admissions).

Key percentiles for Tennessee SIRs ([Table 31](#), [Table 32](#))

- The overall healthcare-onset MRSA bacteremia LabID SIR for long-term acute care hospitals in Tennessee in 2019 was not statistically significantly different than the 2015 national SIR of 1 (SIR=0.85; 95% CI: 0.49, 1.40). The 2020 SIR was statistically significantly higher than the 2015 national SIR of 1 (SIR=1.50; 95% CI: 1.02, 2.12).
- In 2019, the median healthcare-onset MRSA bacteremia LabID SIR for long-term acute care hospitals was 0.48 indicating that half of reporting facilities with at least 1 predicted infection had a healthcare-onset MRSA LabID SIR at or below 0.48. From January-December 2020, the median healthcare-onset MRSA bacteremia LabID SIR for long-term acute care hospitals was 1.15.

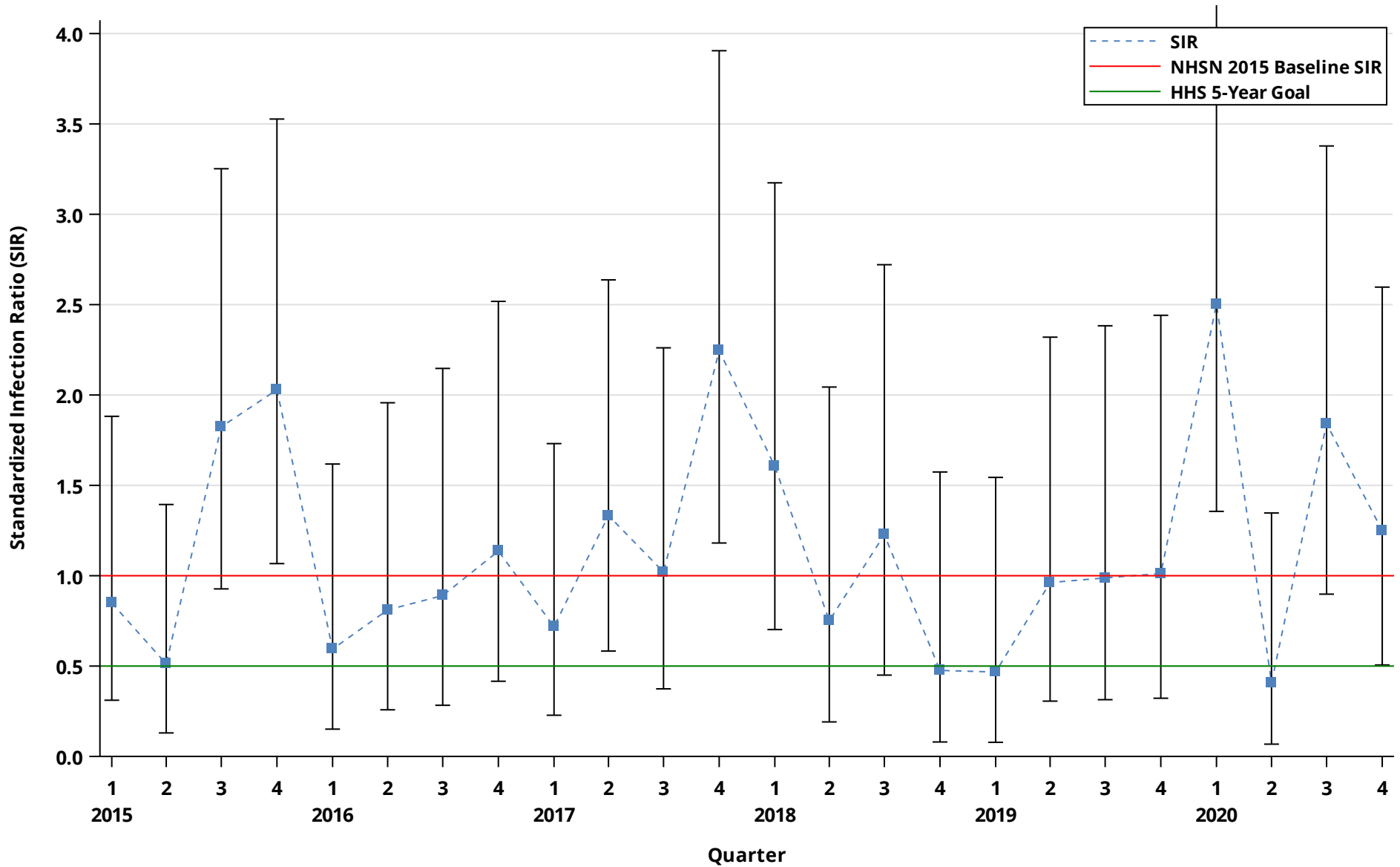
Facility-Specific SIRs ([Figure 93](#), [Figure 94](#))

- The healthcare facility-onset MRSA bacteremia LabID event SIR for each acute care facility in 2019 and 2020 is displayed in [Figure 93](#) and [Figure 94](#). 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.

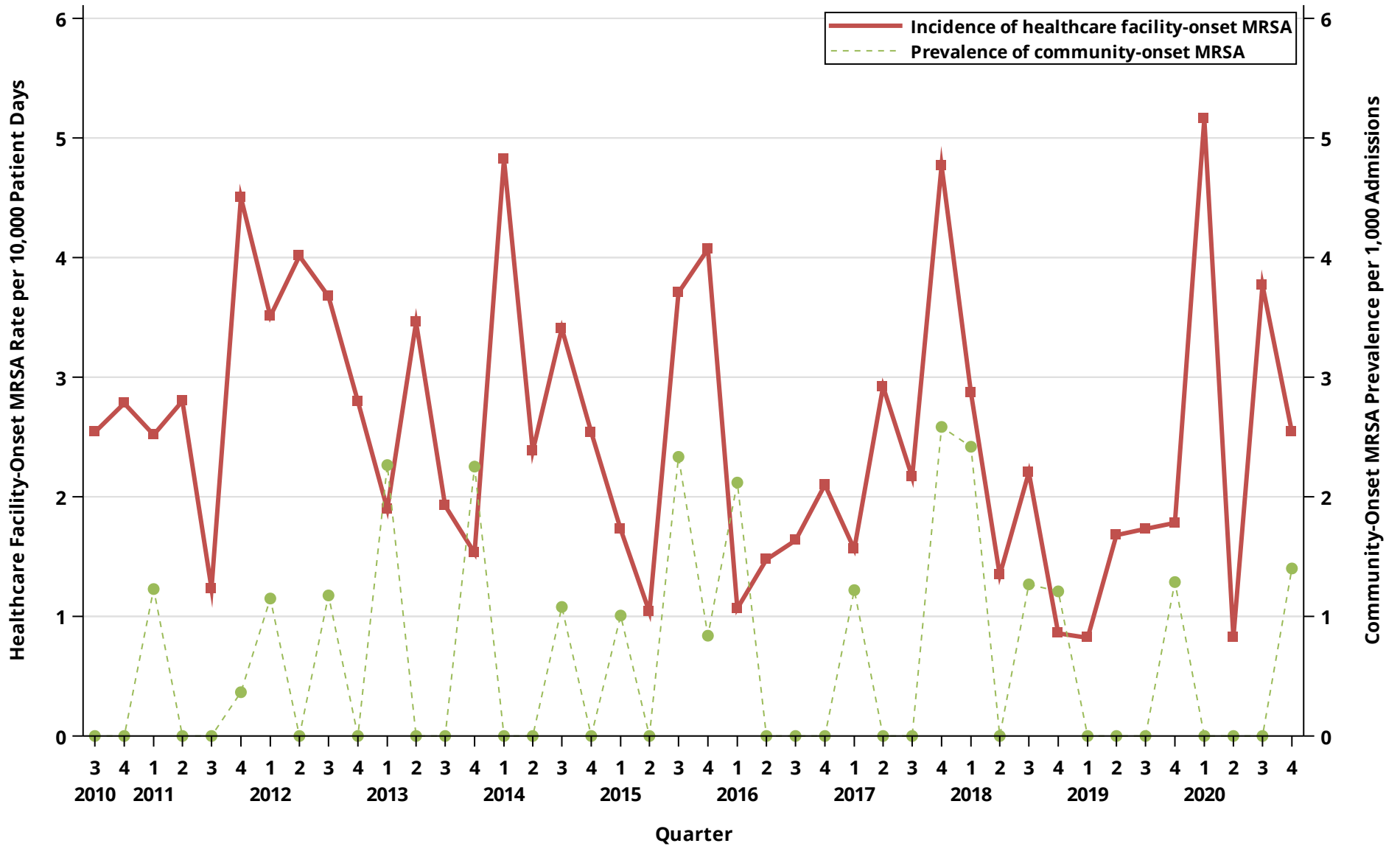
- In 2020, one facility had a healthcare facility-onset MRSA bacteremia LabID event SIR that was statistically significantly higher than the 2015 national baseline SIR of 1 while no facilities had a statistically significantly lower SIR than the 2015 national baseline SIR of 1. In 2019, no facilities had a healthcare facility-onset MRSA bacteremia LabID event SIR that was statistically significantly different than the 2015 national baseline SIR of 1.

Figure 91: 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, 01/01/2015–12/31/2020 [Reference standard: National Healthcare Safety Network (NHSN), 2015]



Data Reported as of June 01, 2021

Figure 92: 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, 07/01/2010-12/31/2020



Data Reported as of June 01, 2021

Table 31: 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, 01/01/2019–12/31/2020

										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	YEA R	No .	PAT DAYS	OBS	PRED	SIR	LOWE R LIMIT	UPPE R LIMIT	No. of FACS WITH ≥1 PRED INFECTION	N	%	N	%	10 %	25 %	50 %	75 %	90 %	
Tennessee	2020	9	94,989	29	19.39	1.50	1.02	2.12	7	0	0%	1	14%	0.49	0.94	1.15	1.80	4.27	
	2019	9	93,734	14	16.44	0.85	0.49	1.40	7	0	0%	0	0%	0.00	0.00	0.48	1.96	2.26	

Data reported as of June 01, 2021

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

Table 32: 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, 01/01/2019–12/31/2020

			Healthcare Facility-Onset Incidence ¹	Community-Onset Prevalence ²
STATE	YEAR	No.	POOLED MEAN	POOLED MEAN
Tennessee	2020	10	3.05	0.32
	2019	10	1.49	0.32

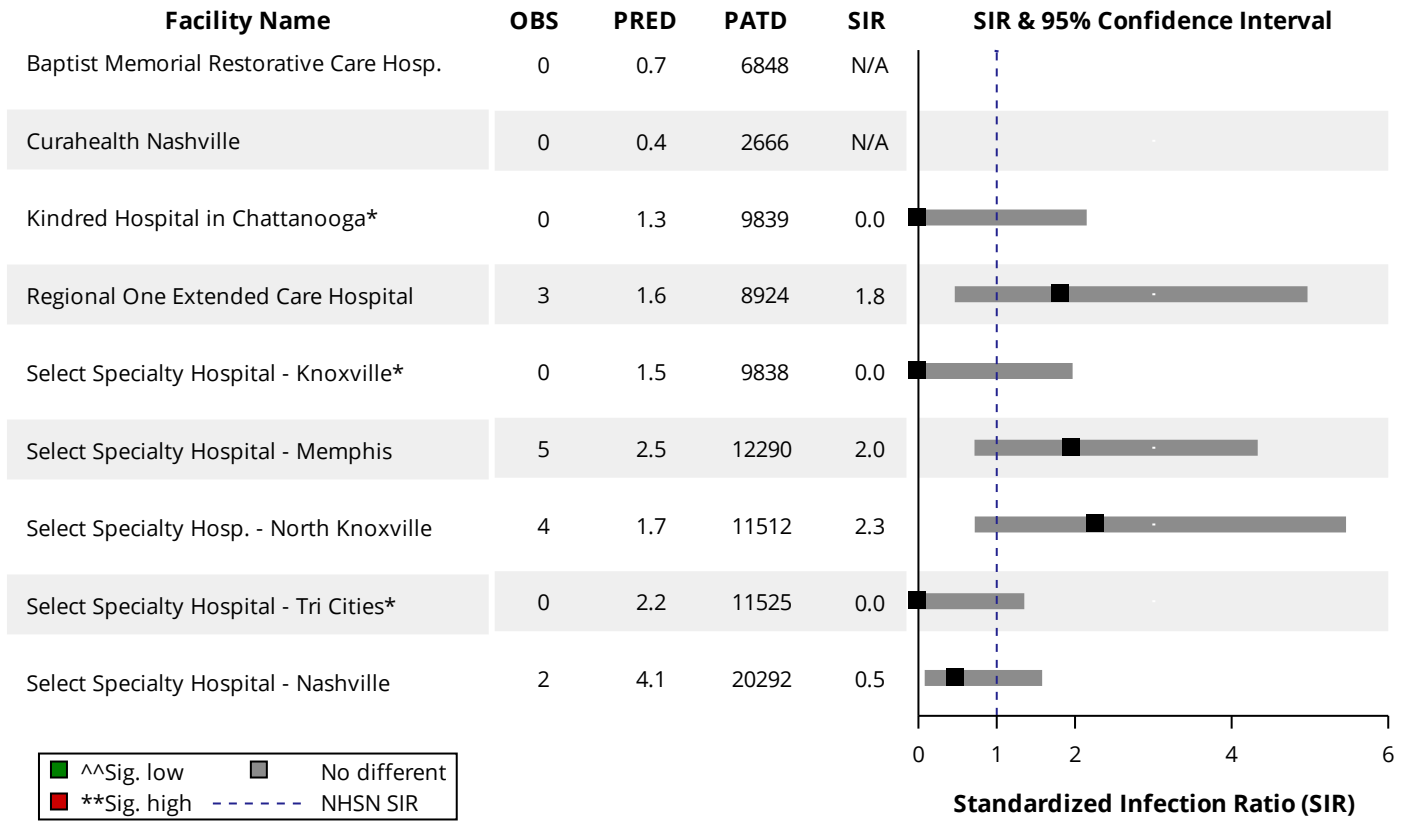
Data reported as of June 01, 2021

No. of facilities reporting

¹Events per 10,000 patient days

²Events per 1,000 admissions

Figure 93: Healthcare Facility-Onset Methicillin-resistant Staphylococcus aureus (MRSA) Laboratory-Identified (LabID) Event Standardized Infection Ratios (SIRs) in Long-Term Acute Care (LTAC) Facilities, Tennessee, 01/01/2019 – 12/31/2019



Data Reported as of June 01, 2021

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

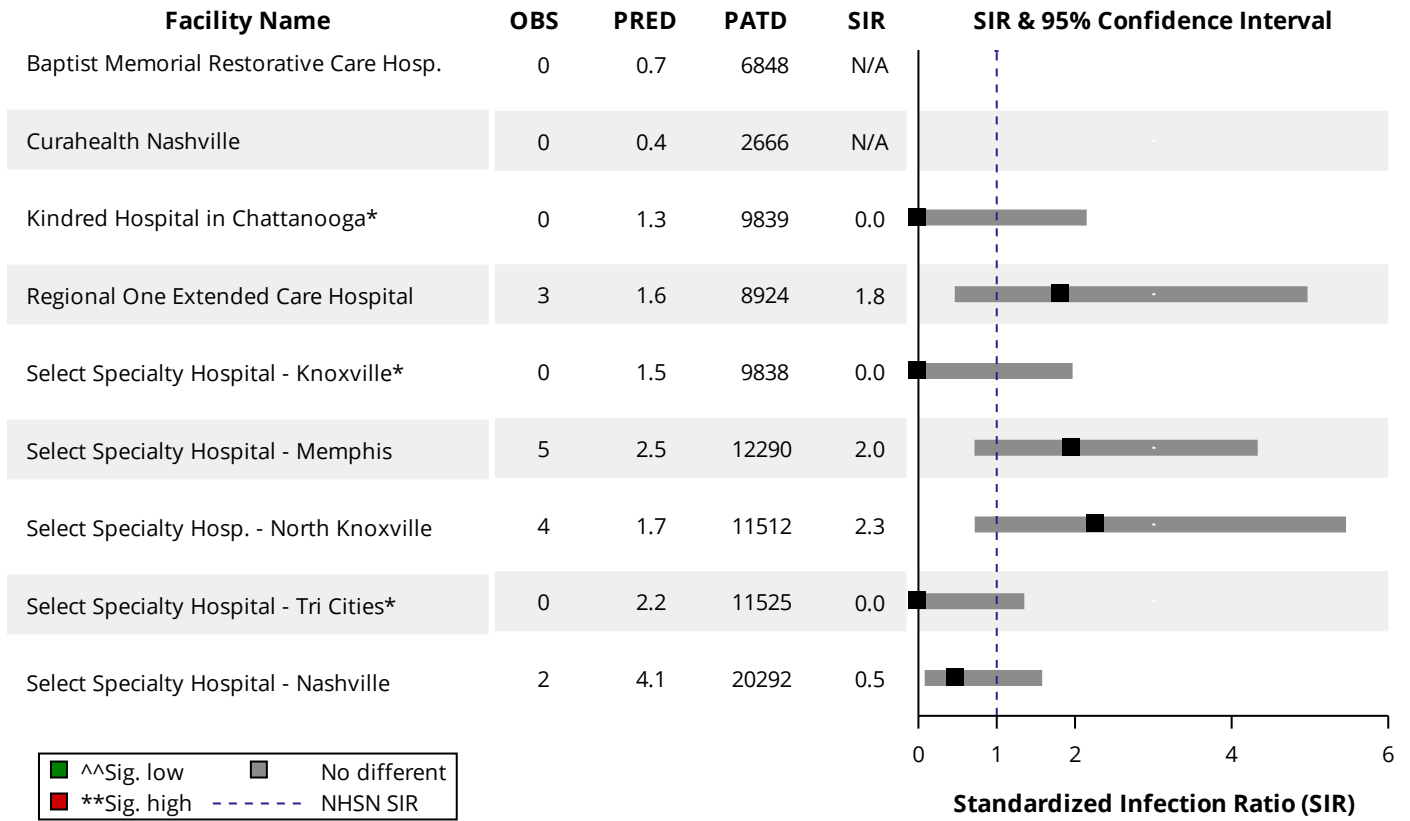
N/A = SIR not calculated for facilities with <1 predicted infection

** Significantly higher than national baseline

^^ Significantly lower than national baseline

* Zero events, but not statistically significant

Figure 94: Healthcare Facility-Onset Methicillin-resistant Staphylococcus aureus (MRSA) Laboratory-Identified (LabID) Event Standardized Infection Ratios (SIRs) in Long-Term Acute Care (LTAC) Facilities, Tennessee, 01/01/2020 – 12/31/2020



Data Reported as of June 01, 2021

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 2019: 27

Total number of facilities reporting from January-December 2020: 27

SIRs by Quarter ([Figure 95](#))

- From Q2-2019 to Q1-2020, the overall healthcare-onset MRSA bacteremia LabID SIR in inpatient rehabilitation facilities remained stable between 0.82 and 0.94. There was an increase to an SIR of 2.83 in Q2-2020 in the HO MRSA IRF SIR. There were no observed HO MRSA infections in IRFs in Q1-2019 and Q3 and Q4 2020 indicating that no SIR was calculated for these quarters. The HHS 2020 prevention goal of an SIR of 0.50 was not statistically achieved in any quarter in 2019 – 2020. No quarter was statistically significantly different than predicted in 2019–2020.

Healthcare Facility-Onset and Community-Onset MRSA LabID Rates ([Figure 96](#))

- The incidence of healthcare facility-onset MRSA bacteremia LabID events was 0.12 events per 10,000 patient-days in 2019, lower than the incidence of 0.17 events per 10,000 patient-day events in 2020. The prevalence of community-onset MRSA bacteremia LabID events was higher in 2020 (0.11 events per 1,000 admissions) than in 2019 (0.05 events per 1,000 admissions).

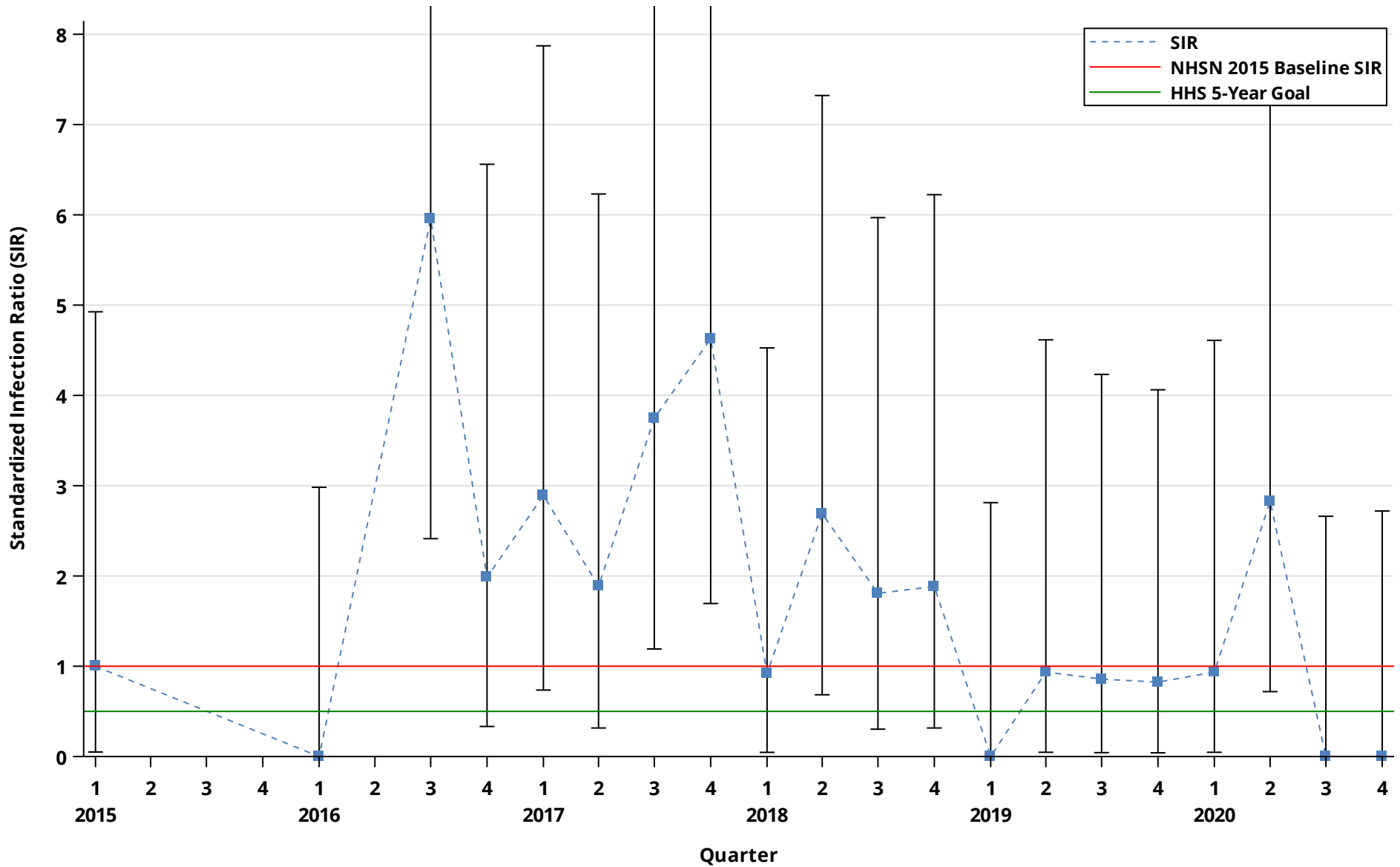
Key percentiles for Tennessee SIRs ([Table 33](#), [Table 34](#))

- The overall healthcare-onset MRSA bacteremia LabID SIR for IRFs in Tennessee in both 2019 and 2020 were not statistically significantly different than the 2015 national SIR of 1. The 2019 HO MRSA SIR was 0.67 (95% CI: 0.17, 1.81) while the SIR was 0.92 (95% CI: 0.29, 2.21).

Facility-Specific SIRs ([Figure 97](#), [Figure 98](#))

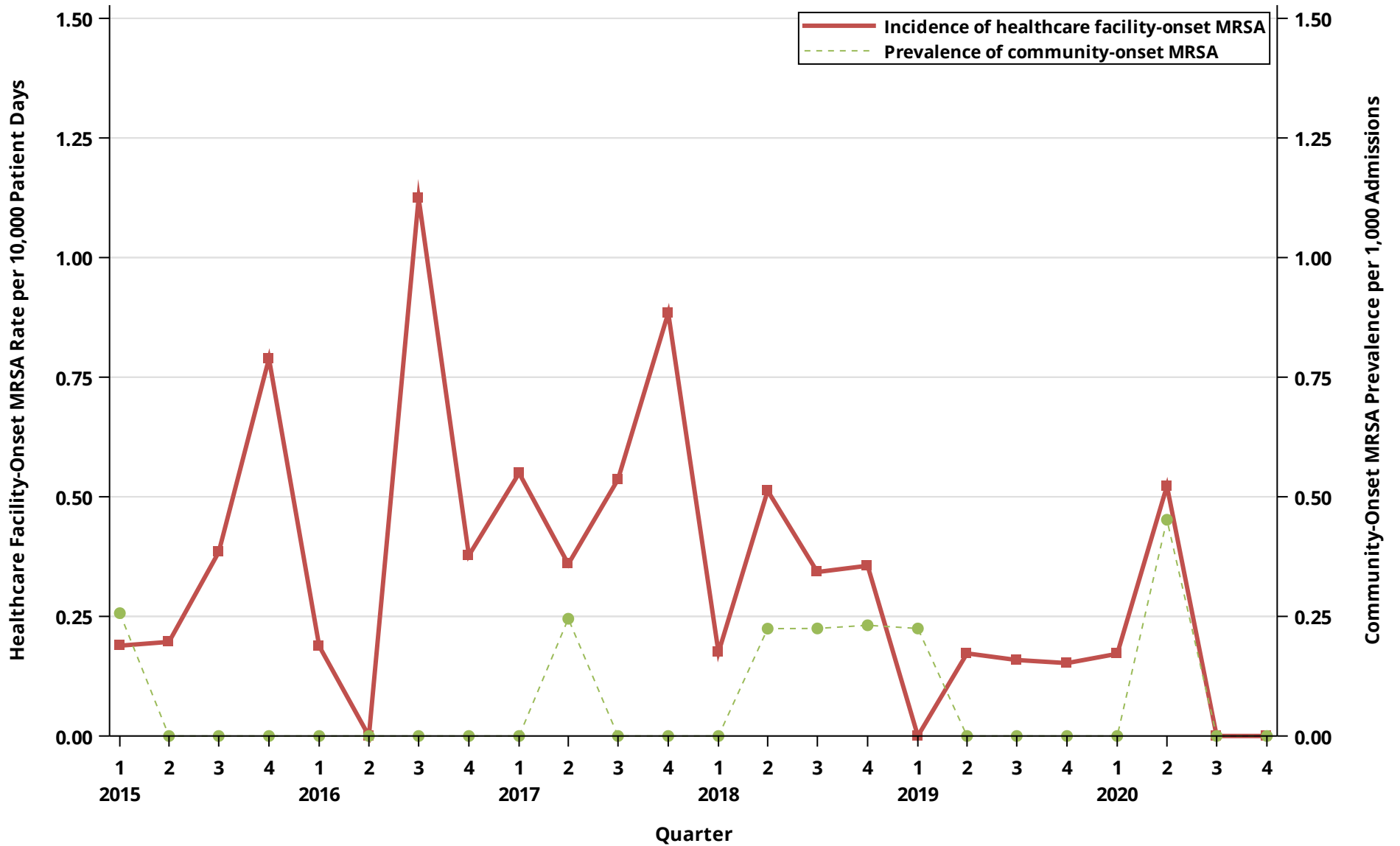
- The healthcare facility-onset MRSA bacteremia LabID event SIR for 2019 and 2020 for each IRF is displayed in [Figure 97](#) and [Figure 98](#). The bar representing the confidence interval is green if the was significantly lower than the 2015 national SIR of 1 and red if the SIR was significantly higher 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 2019 and 2020, no facility had a healthcare facility-onset MRSA bacteremia LabID event SIR that was statistically significantly different than the 2015 national baseline.

Figure 95: 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, 01/01/2015–12/31/2020 [Reference standard: National Healthcare Safety Network (NHSN), 2015]



Data Reported as of June 01, 2021

Figure 96: Methicillin-resistant Staphylococcus aureus (MRSA) Bacteremia Laboratory-Identified (LabID) Events Pooled Mean Incidence and Prevalence Rates in Inpatient Rehabilitation Facilities (IRF) by Quarter, Tennessee, 01/01/2015-12/31/2020



Data Reported as of June 01, 2021

Table 33: Healthcare-Onset Methicillin-resistant Staphylococcus aureus (MRSA) Laboratory-Identified (LabID)Events Standardized Infection Ratio (SIR) in Inpatient Rehabilitation Facilities (IRF) by Reporting Year, Tennessee, 01/01/2019–12/31/2020

										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	YEA R	No .	PAT DAYS	OBS	PRED	SIR	LOWE R LIMIT	UPPE R LIMIT	No. of FACS WITH ≥1 PRED INFECTION		N	%	N	%	10 %	25 %	50 %	75 %	90 %
Tennessee	2020	27	229,182	4	4.36	0.92	0.29	2.21	0	0%	0	0%	N/A	N/A	N/A	N/A	N/A	N/A	N/A
	2019	27	237,353	3	4.51	0.67	0.17	1.81	0	0%	0	0%	N/A	N/A	N/A	N/A	N/A	N/A	N/A

Data reported as of June 01, 2021

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

Table 34: Methicillin-resistant Staphylococcus aureus (MRSA) Laboratory-Identified (LabID) Events Pooled Mean Incidence and Prevalence Rates in Inpatient Rehabilitation Facilities (IRF) by Year, Tennessee, 01/01/2015–12/31/2020

			Healthcare Facility-Onset Incidence ¹	Community-Onset Prevalence ²
STATE	YEAR	No.	POOLED MEAN	POOLED MEAN
Tennessee	2020	28	0.17	0.11
	2019	29	0.12	0.05

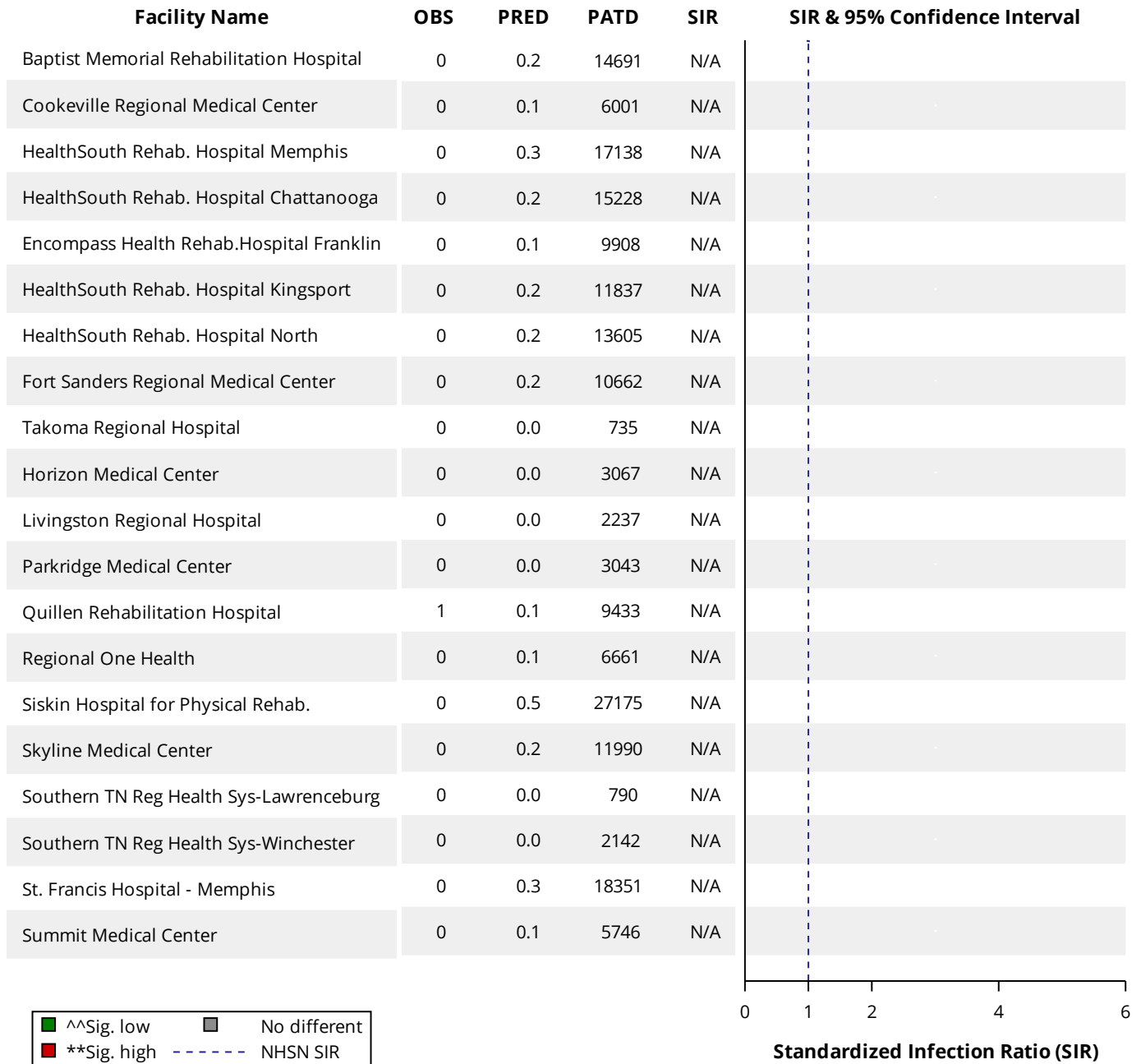
Data reported as of June 01, 2021

No. of facilities reporting

¹Events per 10,000 patient days

²Events per 1,000 admissions

Figure 97: Healthcare Facility-Onset Methicillin-resistant Staphylococcus aureus (MRSA) Laboratory-Identified (LabID) Event Standardized Infection Ratios (SIRs) in Inpatient Rehabilitation Facilities (IRF), Tennessee, 01/01/2019 – 12/31/2019



Data Reported as of June 01, 2021

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

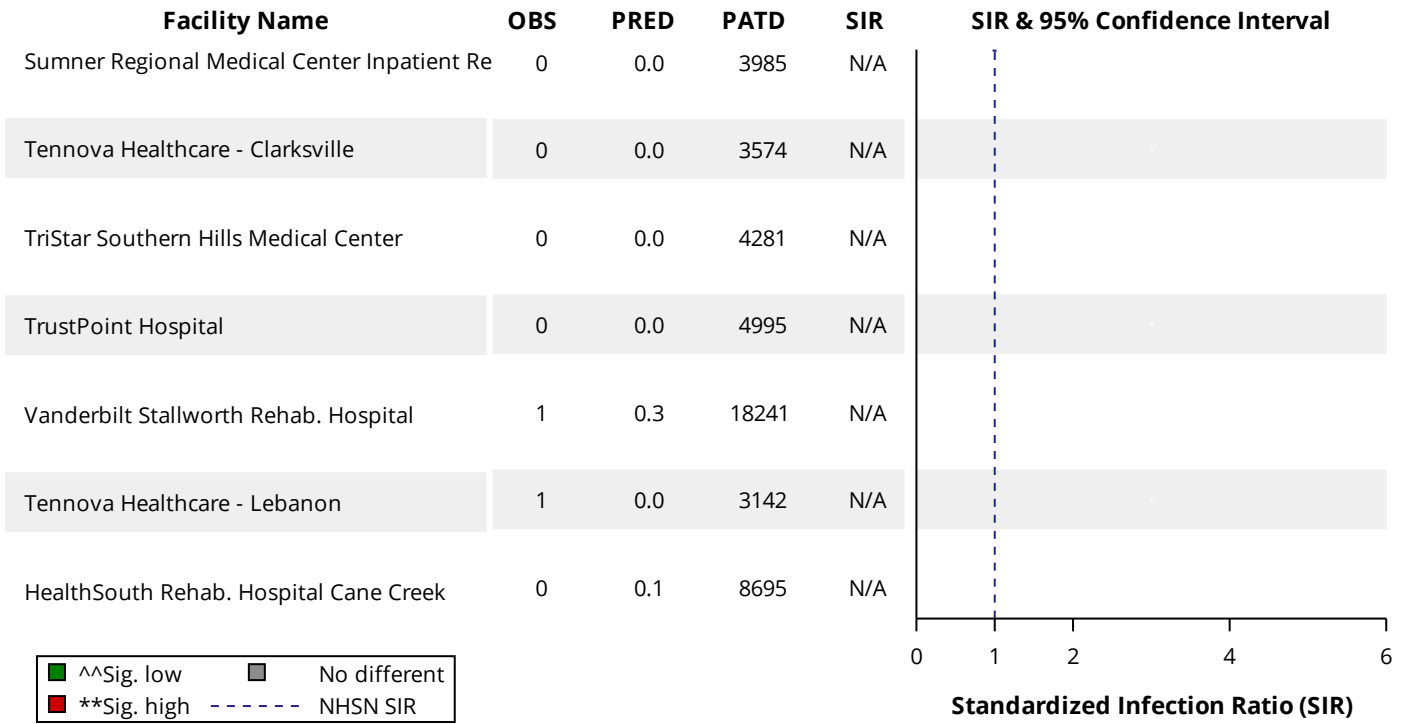
N/A = SIR not calculated for facilities with <1 predicted infection

** Significantly higher than national baseline

^^ Significantly lower than national baseline

* Zero events, but not statistically significant

Figure 97 (cont'd)



Data Reported as of June 01, 2021

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

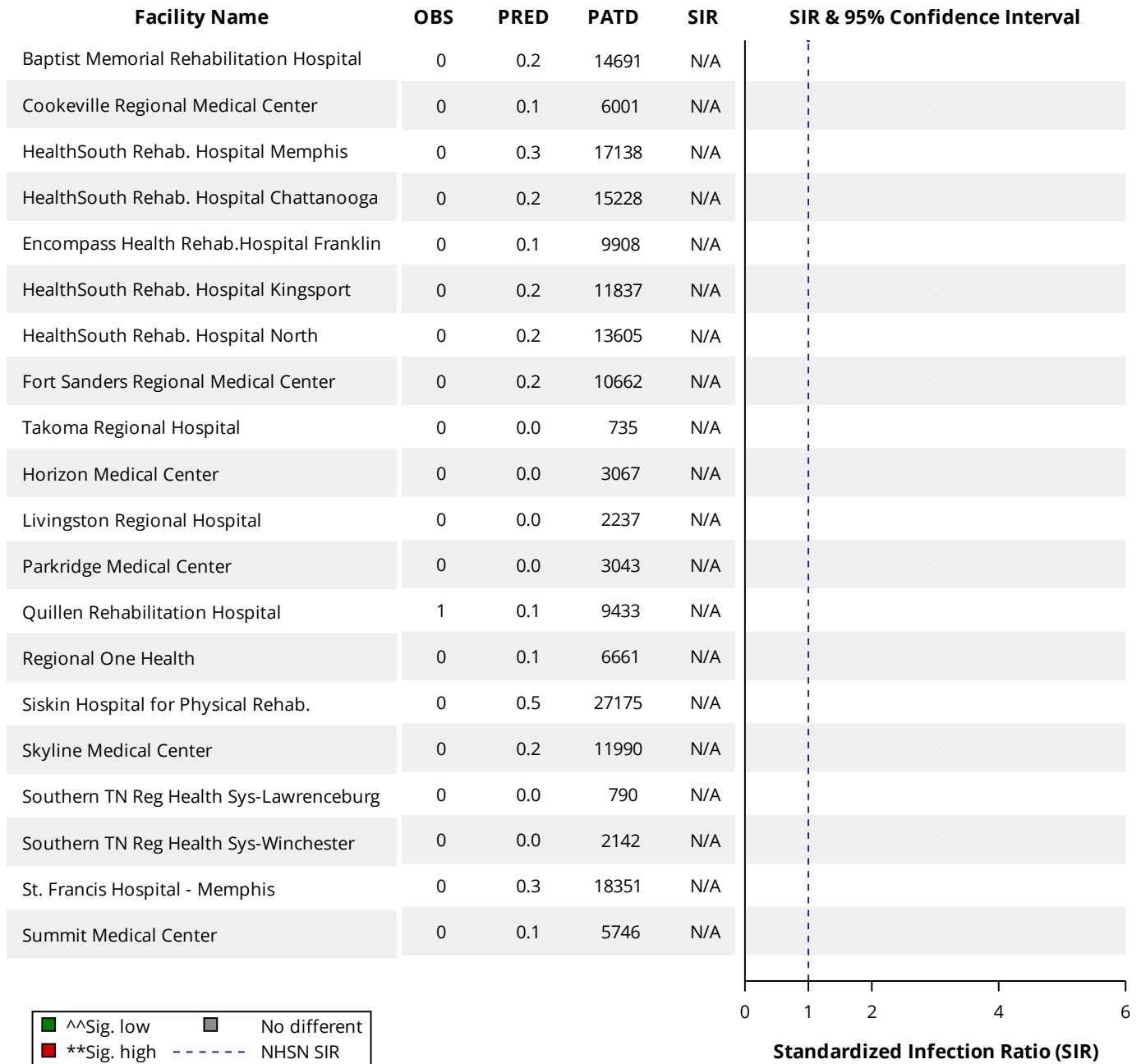
N/A = SIR not calculated for facilities with <1 predicted infection

** Significantly higher than national baseline

^^ Significantly lower than national baseline

* Zero events, but not statistically significant

Figure 98: Healthcare Facility-Onset Methicillin-resistant Staphylococcus aureus (MRSA) Laboratory-Identified (LabID) Event Standardized Infection Ratios (SIRs) in Inpatient Rehabilitation Facilities (IRF), Tennessee, 01/01/2020 – 12/31/2020



Data Reported as of June 01, 2021

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

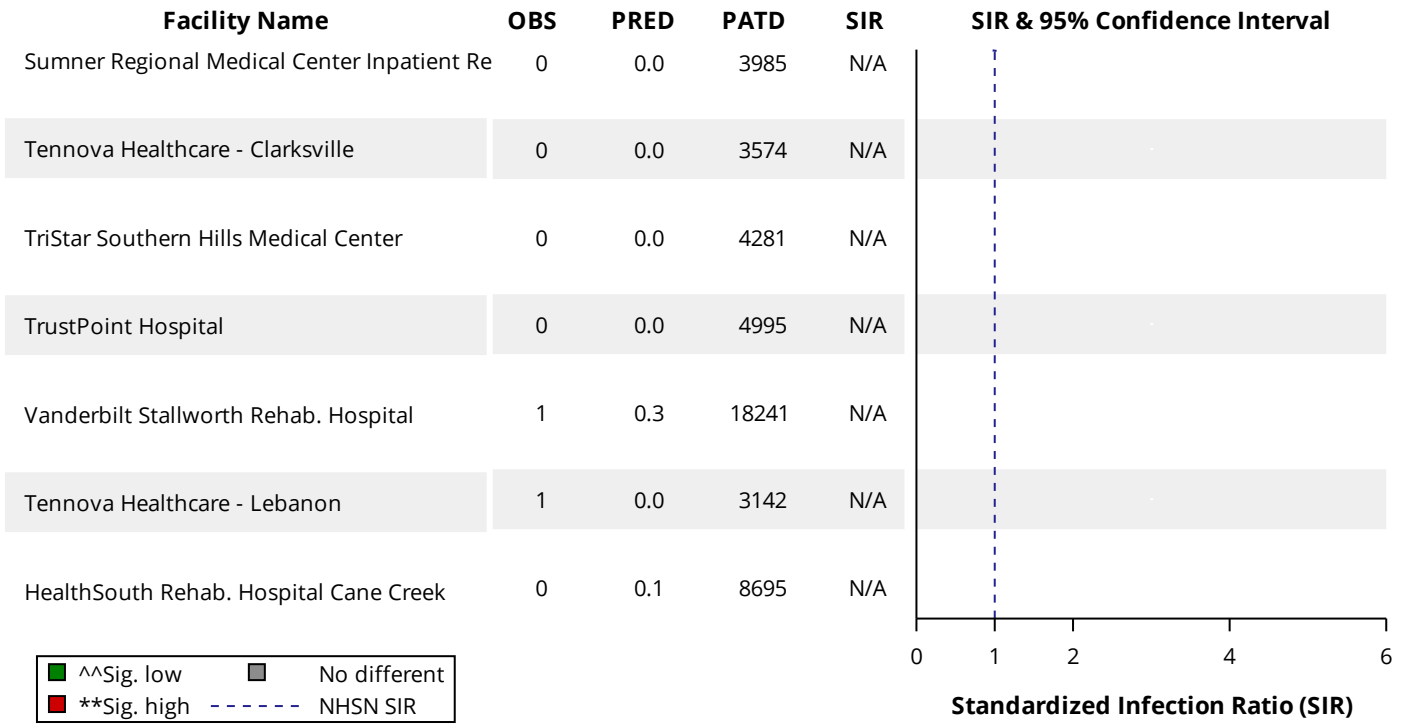
N/A = SIR not calculated for facilities with <1 predicted infection

** Significantly higher than national baseline

^^ Significantly lower than national baseline

* Zero events, but not statistically significant

Figure 98 (cont'd)



Data Reported as of June 01, 2021

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](#)³¹).

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/24-hour observation locations) 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 & *Clostridioides difficile* Infection LabID Event Surveillance protocol](#)³², 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/24 Hour observation locations 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

³¹ https://www.cdc.gov/hai/pdfs/cdiff/Cdiff_tagged-BW.pdf

³² http://www.cdc.gov/nhsn/PDFs/pscManual/12pscMDRO_CDADcurrent.pdf

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.

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. For all facility types, the CDI LabID SIR can only be calculated at the quarter-level or higher. Monthly SIRs cannot be calculated due to certain risk factors used in each of the models that require complete data entry for a quarter.

CDI LabID Events Risk Adjustment

CDC used 2015 HAI data to create the 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 period used to establish the baseline, or reference points, varied among the different HAI measures. Thus, in TN HAI reports before 2015, the number of predicted infections was estimated based on those original baselines. Therefore, the data in this report are not comparable with HAI reports before 2015. Further details can be seen in the [NHSN Guide to the SIR](#).³³

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.

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

³³ <https://www.cdc.gov/nhsn/pdfs/ps-analysis-resources/nhsn-sir-guide.pdf>

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

Community-onset (CO) and community-onset healthcare facility-associated (COHFA) prevalence rates are calculated as follows:

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

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 2019: 102

Total number of facilities reporting from January-December 2020: 100

SIRs by Quarter (Figure 99)

- Through 2019 and 2020, the overall healthcare facility-onset CDI LabID SIR in acute care hospitals in Tennessee continued to sustained decline observed since late 2016. Q1-2019 reported the highest HO CDI SIR for the reporting period of 0.47 with the lowest being recorded in Q3-2020 with an SIR of 0.32. In all quarters of 2019 and 2020, acute care hospitals achieved the U.S. Department of Health and Human Services' [National Action Plan to Prevent Healthcare-Associated Infections](#)³⁴ prevention target of SIR = 0.70.

Healthcare Facility-Onset and Community-Onset CDI LabID Rates (Figure 100)

- The healthcare facility-onset CDI LabID incidence rate was 2.70 per 10,000 patient days in 2019 and decreased to an incidence rate of 1.94 per 10,000 patient days in 2020. Both years reported lower SIRs than in previous HAI reports.
- The prevalence of community-onset CDI LabID events for 2019 was 1.90 per 1,000 admissions; the prevalence of community-onset CDI decreased in 2020 with a prevalence rate of 1.42 per 1,000 admissions. The community-onset healthcare facility associated prevalence rate was 0.65 per 1,000 admissions in 2019 and 0.43 per 1,000 admissions in 2020.

Key percentiles for Tennessee SIRs (Table 35, Table 36)

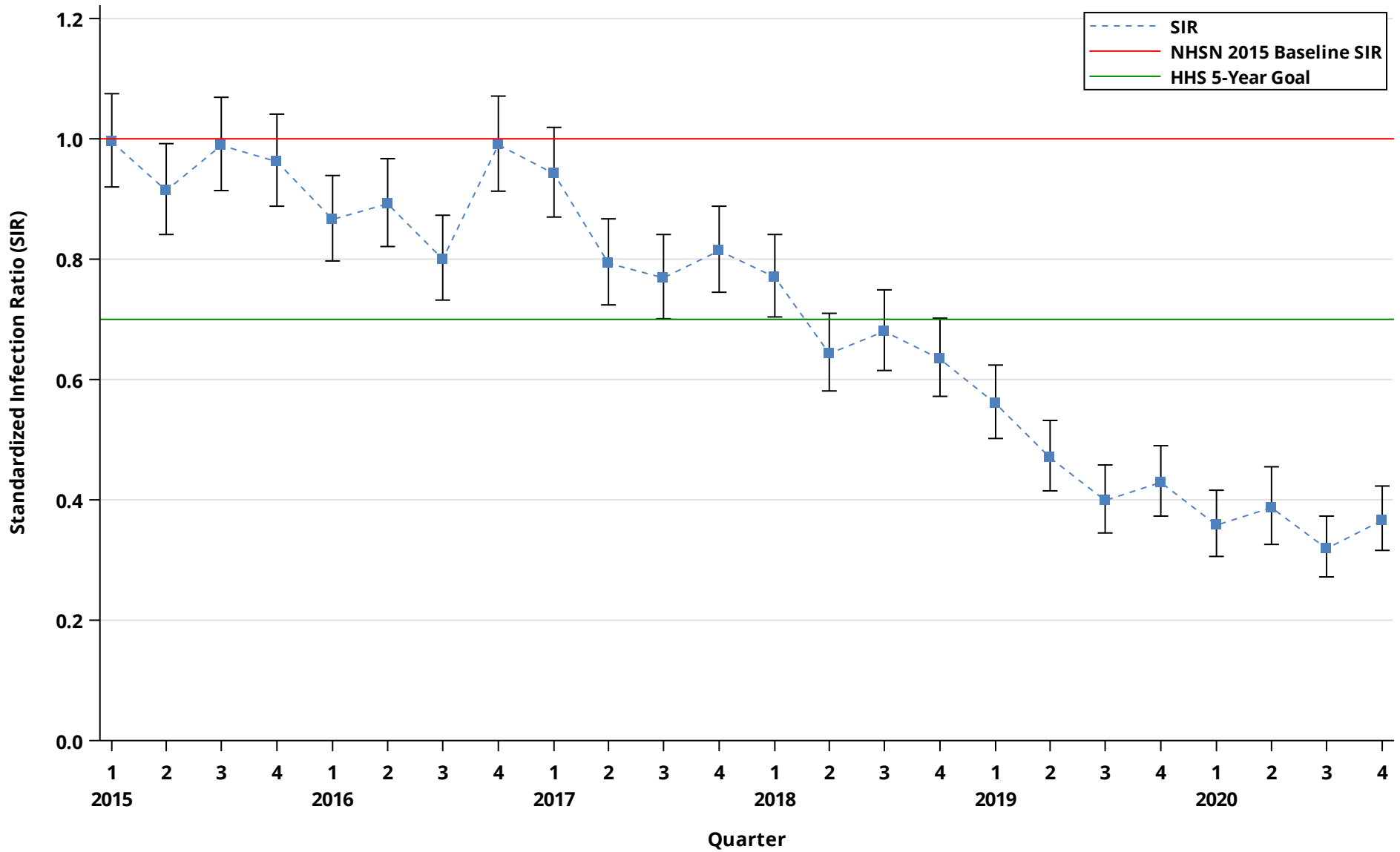
- The overall healthcare facility-onset CDI LabID SIR for acute care hospitals in Tennessee in 2019 and 2020 was statistically significantly lower than the national SIR of 1. 2019 recorded an overall SIR of 0.47 (95% CI: 0.44, 0.50) while in 2020 acute care hospitals reported an overall SIR of 0.36 (95% CI: 0.33, 0.38).
- In 2019, the median healthcare facility-onset CDI LabID SIR for acute care hospitals was 0.36, indicating that half of reporting facilities with at least 1 predicted infection had a healthcare facility-onset CDI LabID SIR at or below 0.36. For 2020, the median healthcare facility-onset CDI LabID SIR for acute care hospitals was 0.29.

³⁴ http://www.health.gov/hai/prevent_hai.asp

Facility-Specific SIRs (Figure 101, Figure 102)

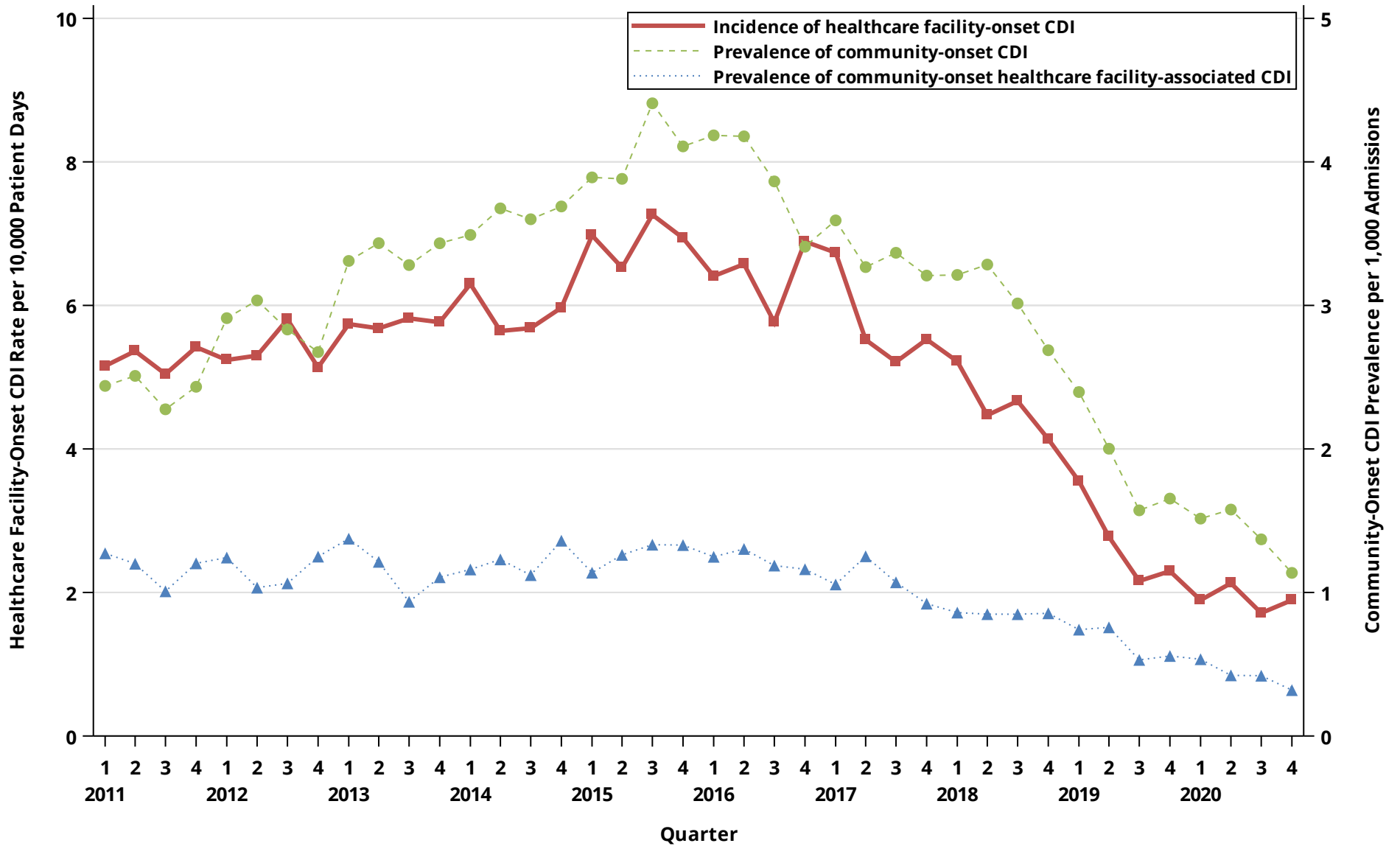
- The healthcare facility-onset CDI LabID event SIR for 2019 and 2020 for each acute care facility is displayed in [Figure 101](#) and [Figure 102](#). The bar representing the confidence interval is green if the was significantly lower than the 2015 national SIR of 1 and red if the SIR was significantly 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 2019, 50 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 an SIR that was statistically significantly higher than the baseline SIR. In 2020, 55 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 an SIR that was statistically significantly higher than the baseline SIR.

Figure 99: Standardized Infection Ratio (SIR) for Healthcare-Onset *C. difficile* Infection (CDI) Laboratory-Identified (LabID) Events for Acute Care Hospitals by Quarter, Tennessee, 01/01/2015–12/31/2020 [Reference standard: National Healthcare Safety Network (NHSN), 2015]



Data Reported as of June 01, 2021

Figure 100: C. difficile Infection (CDI) Laboratory-Identified (LabID) Events Pooled Mean Incidence and Prevalence Rates in Acute Care Hospitals by Quarter, Tennessee, 01/01/2011-12/31/2020



Data Reported as of June 01, 2021

Table 35: Healthcare-Onset C. difficile Infection (CDI) Laboratory-Identified (LabID) Events Standardized Infection Ratio (SIR) in Acute Care Hospitals by Reporting Year, Tennessee, 01/01/2019–12/31/2020

									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	YEA R	No .	PAT DAYS	OBS	PRED	SIR	LOWE R LIMIT	UPPE R LIMIT	N	%	N	%	10 %	25 %	50 %	75 %	90 %	
Tennessee	2020	100	3,368,843	637	1,792.37	0.36	0.33	0.38	80	55%	1	1%	0.00	0.05	0.29	0.47	0.85	
	2019	102	3,609,751	975	2,077.90	0.47	0.44	0.50	82	50%	1	1%	0.00	0.15	0.36	0.62	0.77	

Data reported as of June 01, 2021

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

Table 36: C. difficile Infection (CDI) Laboratory-Identified (LabID) Events Pooled Mean Incidence and Prevalence Rates in Acute Care Hospitals by Year, Tennessee, 01/01/2019–12/31/2020

			Healthcare Facility-Onset Incidence Rate ¹	Community-Onset Prevalence Rate ²	
STATE	YEAR	No.	POOLED MEAN	CO POOLED MEAN	CO-HCFA POOLED MEAN
Tennessee	2020	101	1.94	1.42	0.43
	2019	103	2.70	1.90	0.65

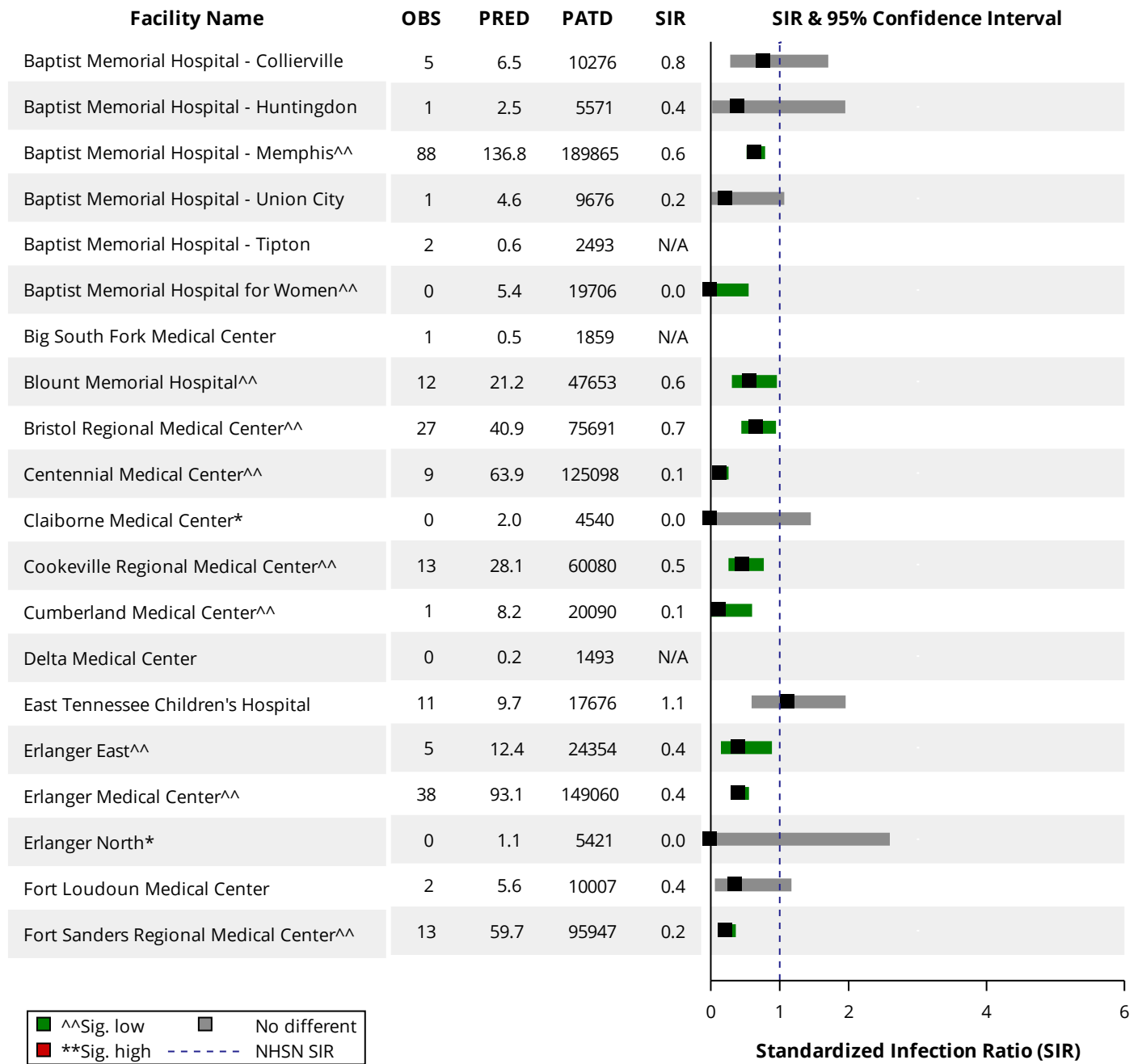
Data reported as of June 01, 2021

No. = number of facilities reporting; CO = community-onset; CO-HCFA = community-onset healthcare facility-associated

¹Events per 10,000 patient days

²Events per 1,000 admissions

Figure 101: Healthcare Facility-Onset C. difficile Infection (CDI) Laboratory-Identified (LabID) Event Standardized Infection Ratios (SIRs) in Acute Care Facilities, Tennessee, 01/01/2019 – 12/31/2019



Data Reported as of June 01, 2021

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

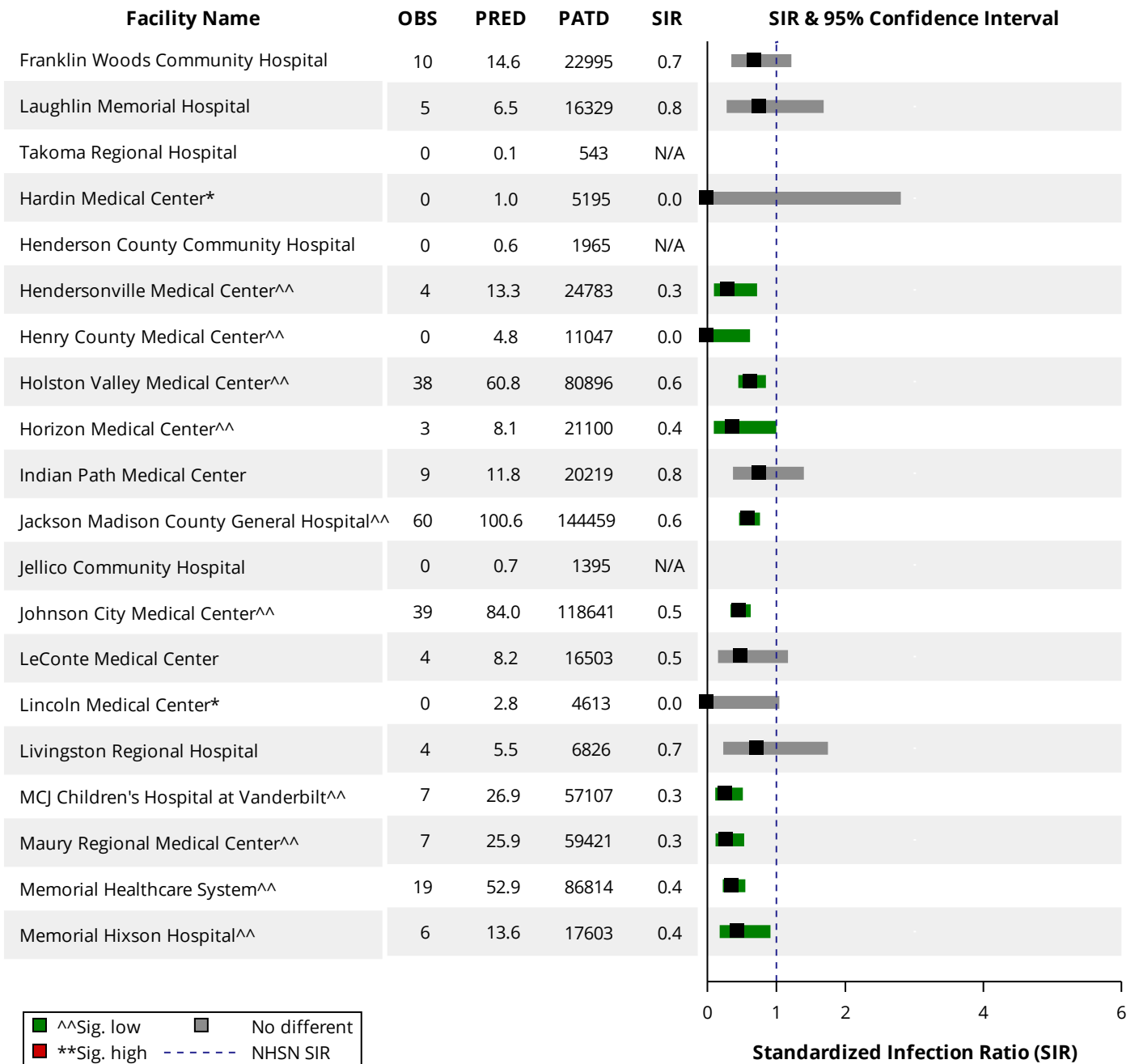
N/A = SIR not calculated for facilities with <1 predicted infection

** Significantly higher than national baseline

^^ Significantly lower than national baseline

* Zero events, but not statistically significant

Figure 101 (cont'd)



Data Reported as of June 01, 2021

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

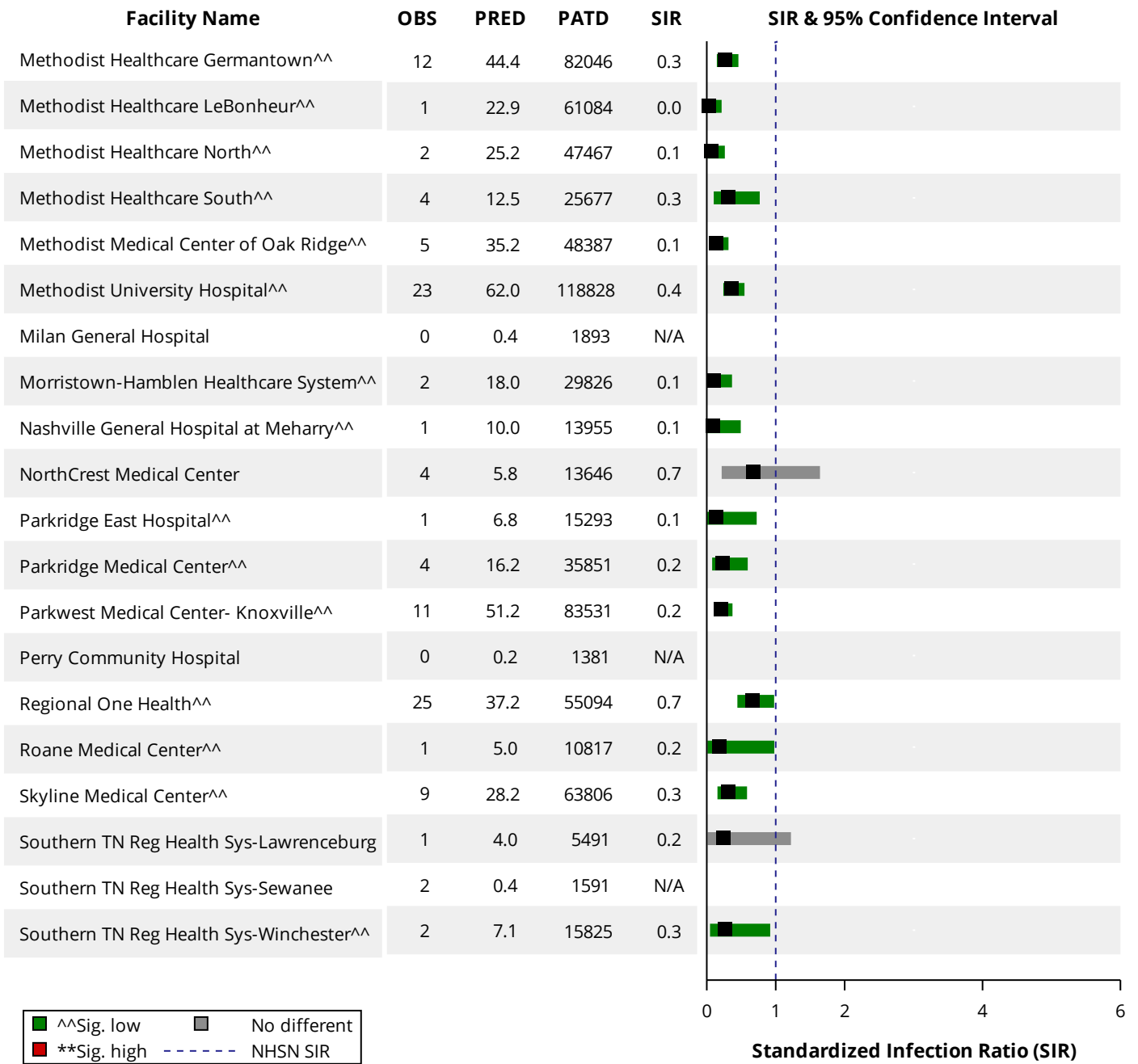
N/A = SIR not calculated for facilities with <1 predicted infection

** Significantly higher than national baseline

^^ Significantly lower than national baseline

* Zero events, but not statistically significant

Figure 101 (cont'd)



Data Reported as of June 01, 2021

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

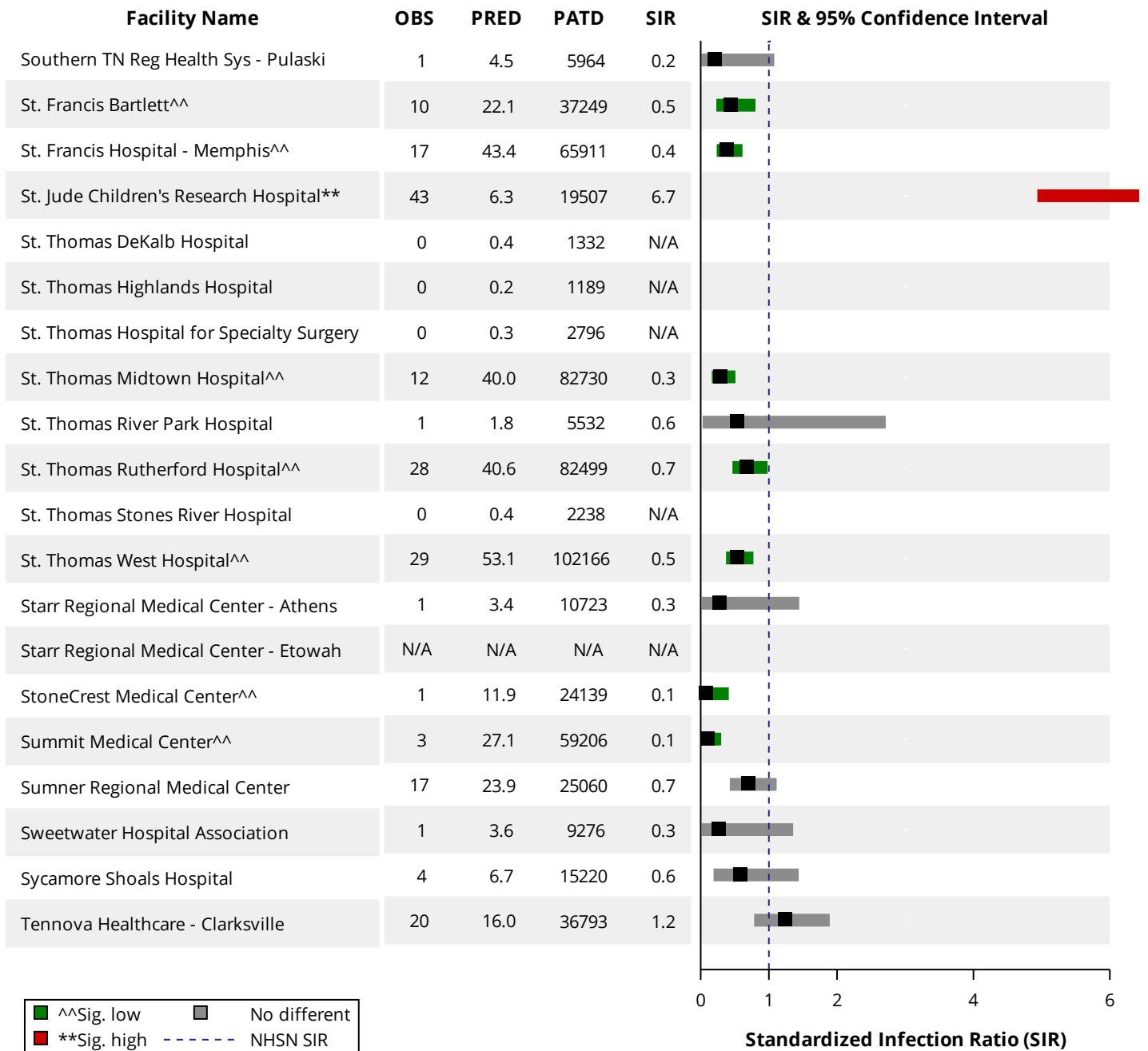
N/A = SIR not calculated for facilities with <1 predicted infection

** Significantly higher than national baseline

^^ Significantly lower than national baseline

* Zero events, but not statistically significant

Figure 101 (cont'd)



Data Reported as of June 01, 2021

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

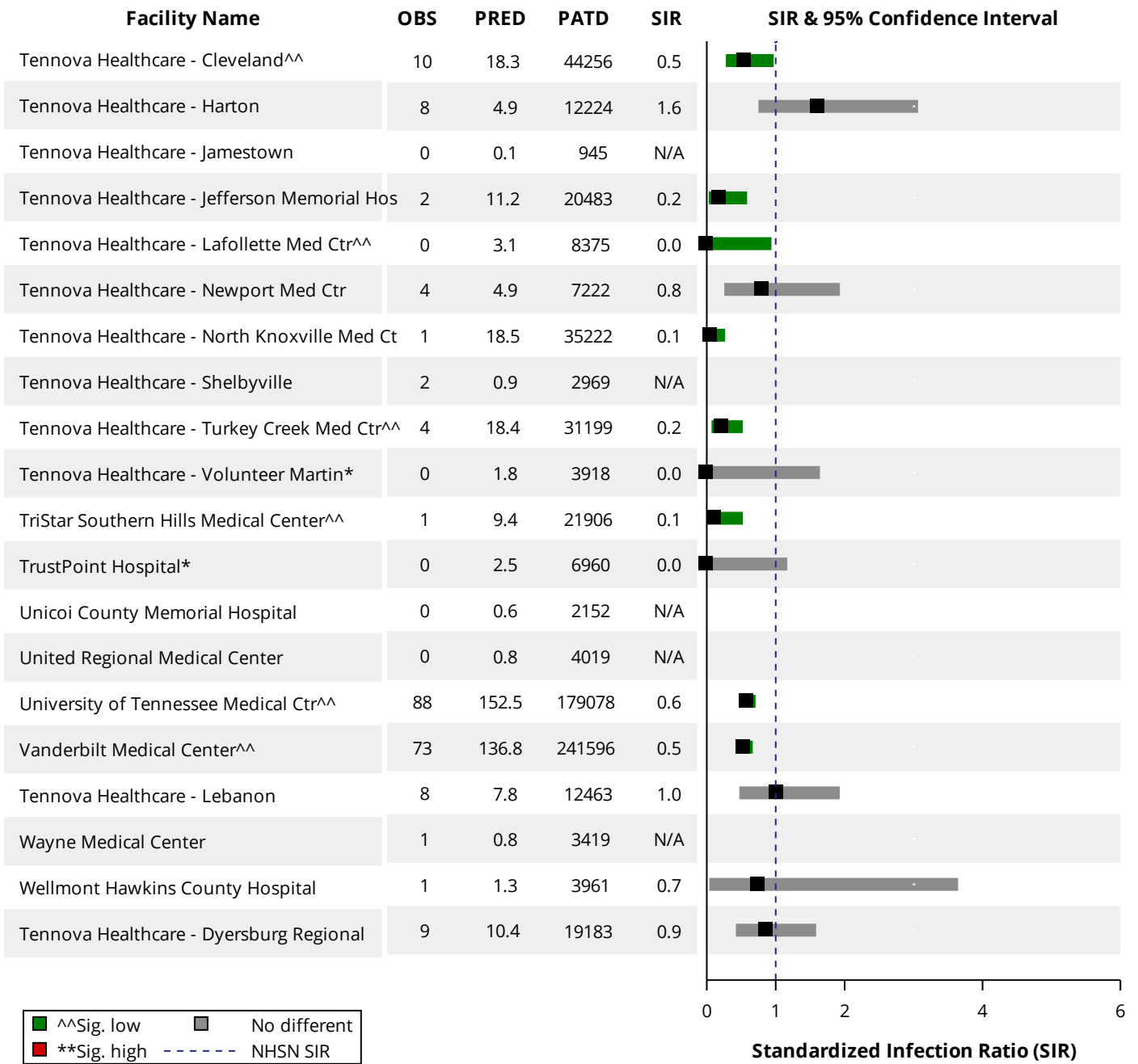
N/A = SIR not calculated for facilities with <1 predicted infection

** Significantly higher than national baseline

^^ Significantly lower than national baseline

* Zero events, but not statistically significant

Figure 101 (cont'd)



Data Reported as of June 01, 2021

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

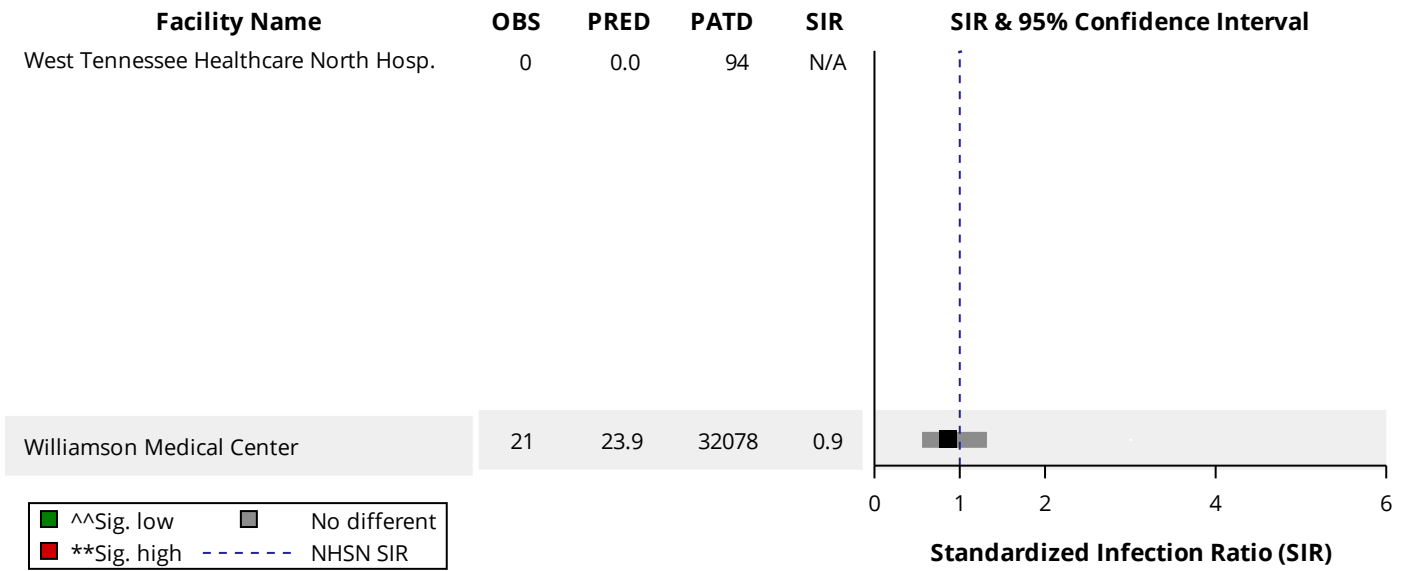
N/A = SIR not calculated for facilities with <1 predicted infection

** Significantly higher than national baseline

^^ Significantly lower than national baseline

* Zero events, but not statistically significant

Figure 101 (cont'd)



Data Reported as of June 01, 2021

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

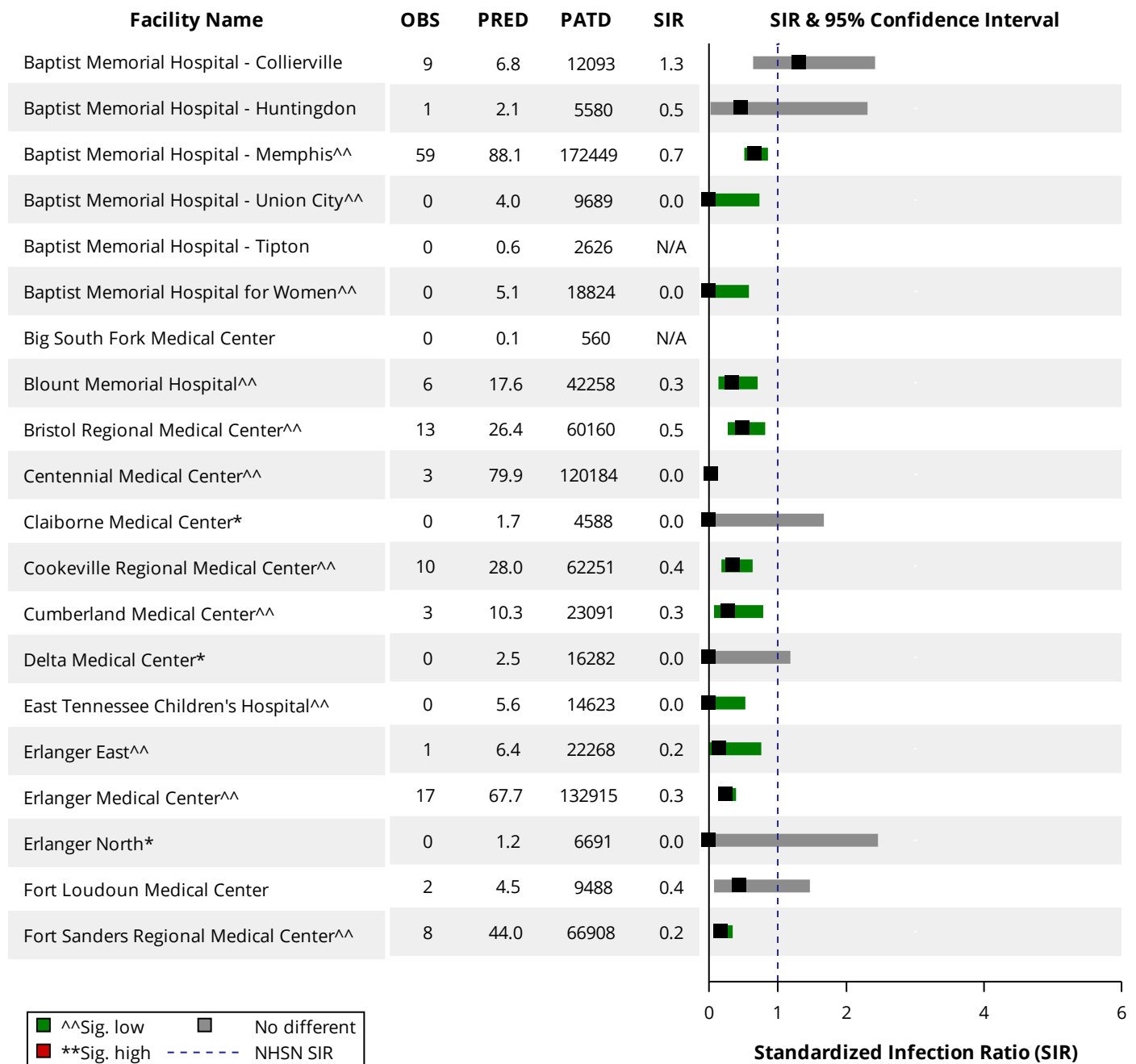
N/A = SIR not calculated for facilities with <1 predicted infection

** Significantly higher than national baseline

^^ Significantly lower than national baseline

* Zero events, but not statistically significant

Figure 102: Healthcare Facility-Onset C. difficile Infection (CDI) Laboratory-Identified (LabID) Event Standardized Infection Ratios (SIRs) in Acute Care Facilities, Tennessee, 01/01/2020 – 12/31/2020



Data Reported as of June 01, 2021

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

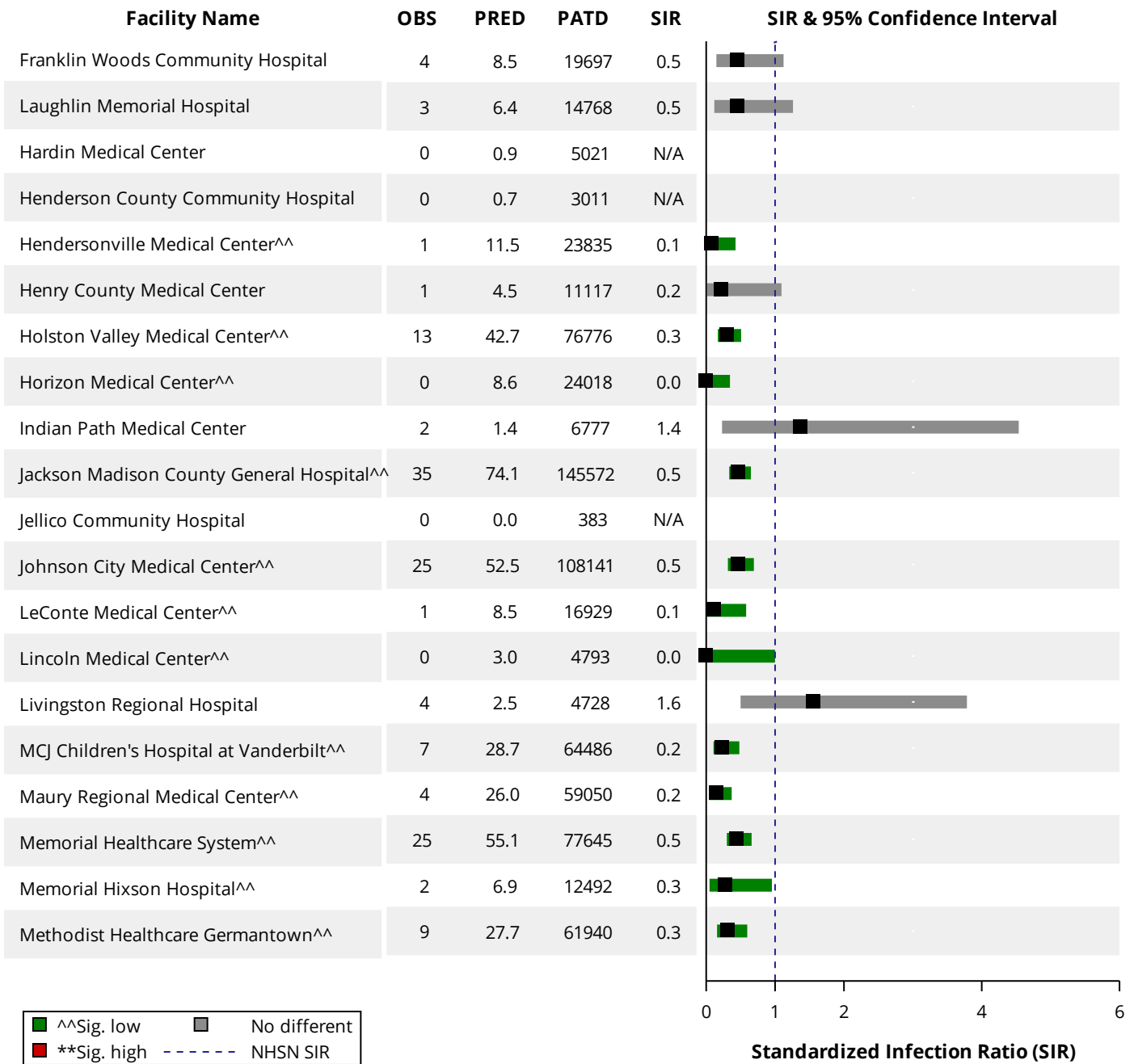
N/A = SIR not calculated for facilities with <1 predicted infection

** Significantly higher than national baseline

^^ Significantly lower than national baseline

* Zero events, but not statistically significant

Figure 102 (cont'd)



Data Reported as of June 01, 2021

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

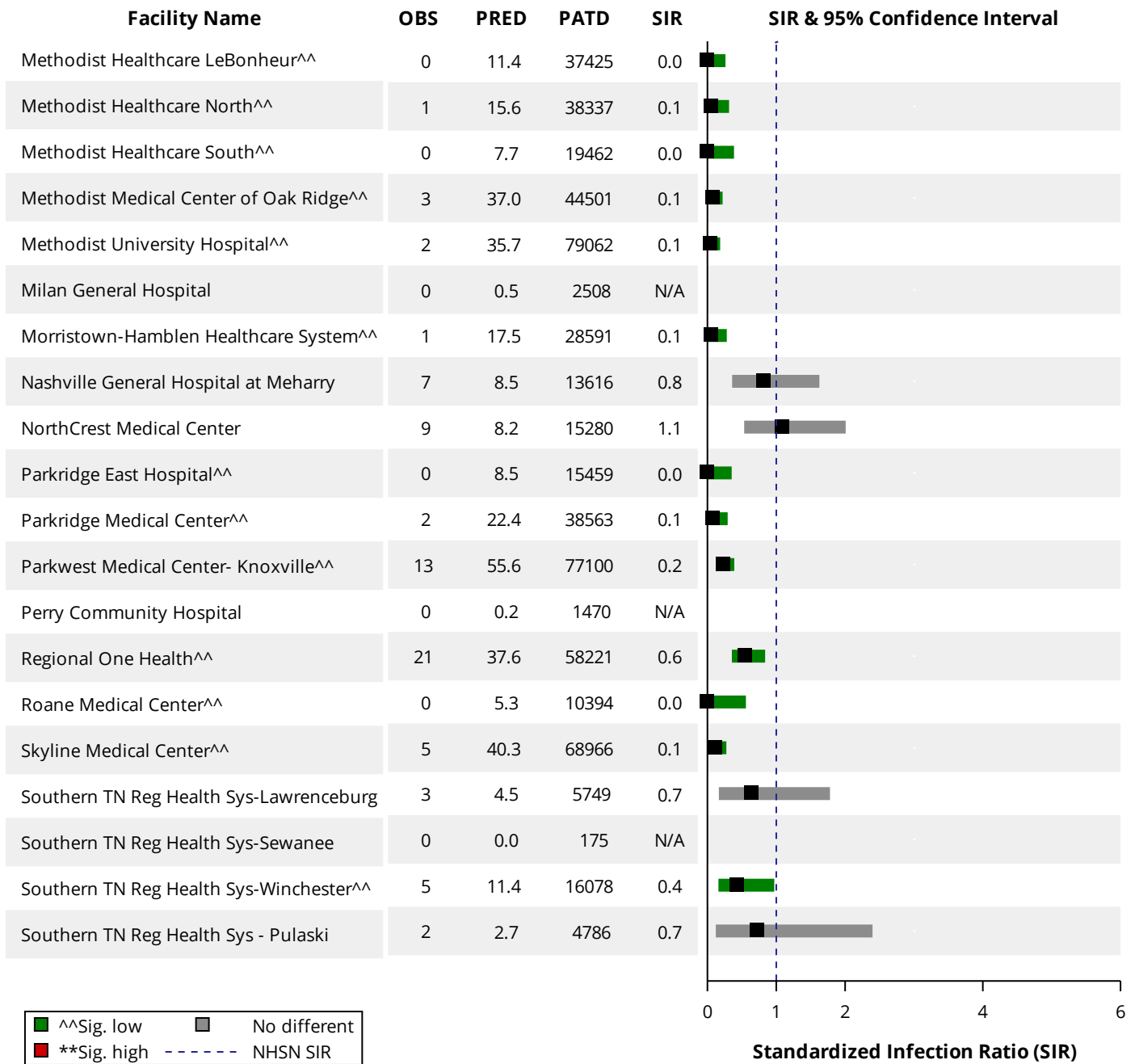
N/A = SIR not calculated for facilities with <1 predicted infection

** Significantly higher than national baseline

^^ Significantly lower than national baseline

* Zero events, but not statistically significant

Figure 102 (cont'd)



Data Reported as of June 01, 2021

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

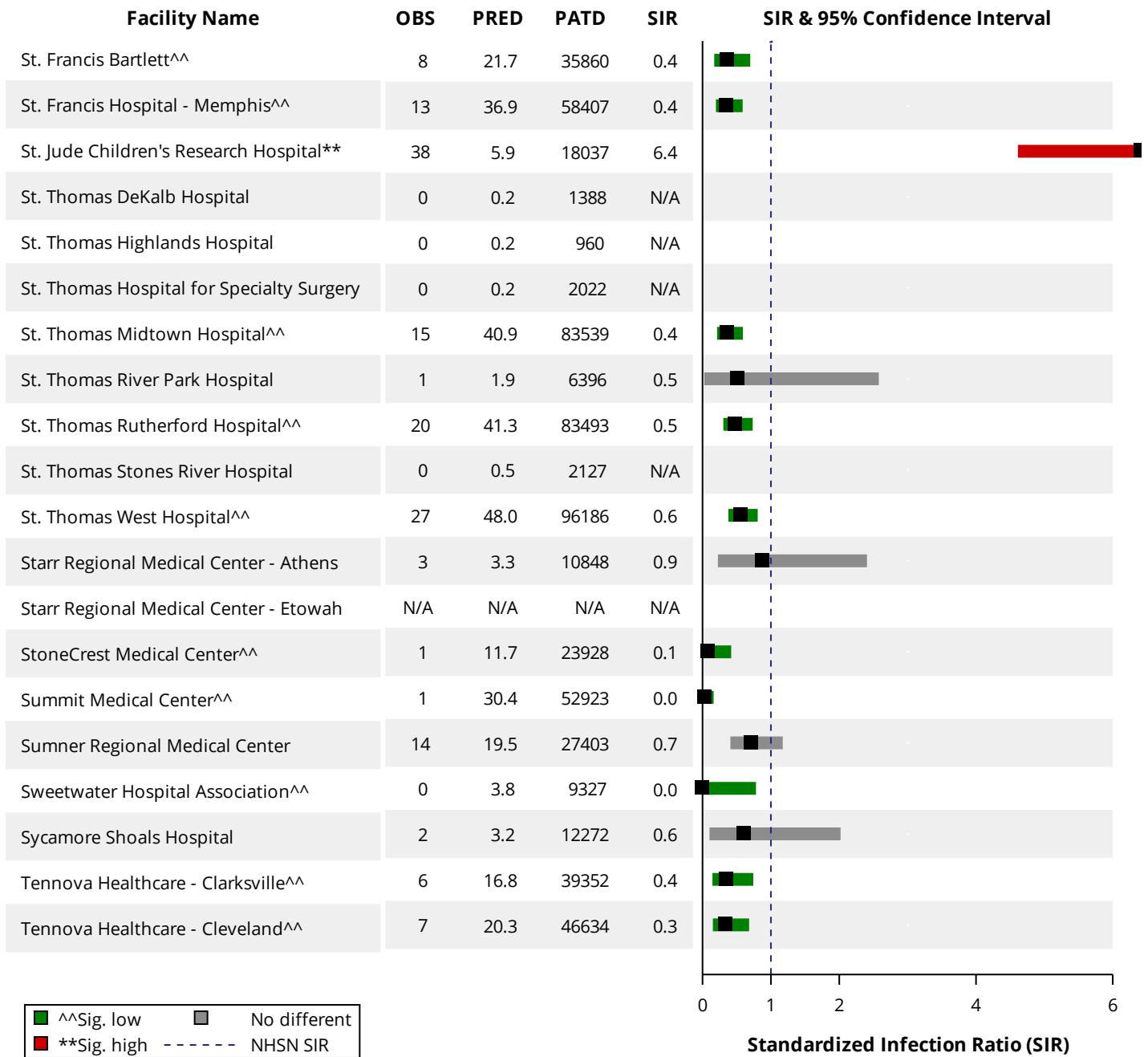
N/A = SIR not calculated for facilities with <1 predicted infection

** Significantly higher than national baseline

^^ Significantly lower than national baseline

* Zero events, but not statistically significant

Figure 102 (cont'd)



Data Reported as of June 01, 2021

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

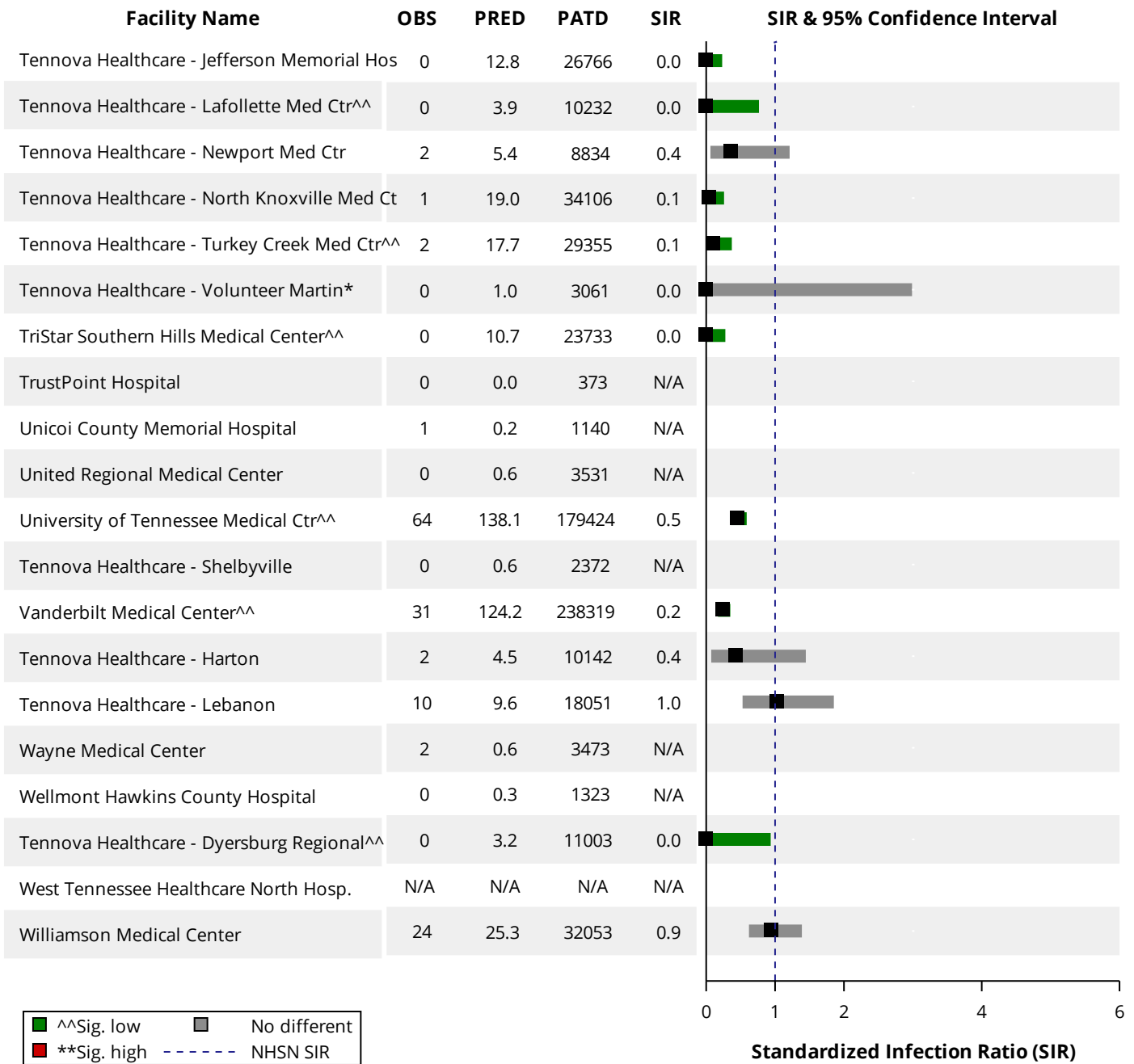
N/A = SIR not calculated for facilities with <1 predicted infection

** Significantly higher than national baseline

^^ Significantly lower than national baseline

* Zero events, but not statistically significant

Figure 102 (cont'd)



Data Reported as of June 01, 2021

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 2019: 9

Total number of facilities reporting from January-December 2020: 9

SIRs by Quarter (Figure 103)

- In 2019, the overall healthcare facility-onset CDI LabID SIR in long-term acute care hospitals in Tennessee fluctuated from a high in Q1 of 0.55 to a low in Q3 of 0.12. In 2020, the CDI SIR remained relatively stable with the SIR ranging from 0.23 to 0.44. All quarters in 2019 and 2020 were statistically significantly below the 2015 baseline SIR of 1. The CDI SIR remained below the U.S. Department of Health and Human Services' [National Action Plan to Prevent Healthcare-Associated Infections](#)³⁵ prevention target of SIR = 0.70 throughout the entirety of 2019 and 2020 except for quarters 1 of 2019 and 2 of 2020.

Healthcare Facility-Onset and Community-Onset CDI LabID Rates (Figure 104)

- The healthcare facility-onset CDI LabID incidence rate was 3.09 per 10,000 patient days in 2019 and recorded a slight increased incidence rate of 3.26 per 10,000 patient days in 2020. These figures are under half those reported in the period 2015-2017.
- The prevalence of community-onset CDI LabID events for 2019 was 2.55 per 1,000 admissions; the prevalence of community-onset CDI was similar in 2020 with a prevalence rate of 2.59 per 1,000 admissions. The community-onset healthcare facility associated prevalence rate was 0.32 per 1,000 admissions in 2019; there were not any community-onset healthcare-facility-associated CDI events in 2020.

Key percentiles for Tennessee SIRs (Table 37, Table 38)

- The overall healthcare facility-onset CDI LabID SIR for long-term acute care hospitals in Tennessee in 2019 was statistically significantly lower than the national SIR of 1 (SIR=0.29; 95% CI: 0.20, 0.42). The overall healthcare facility-onset CDI LabID SIR for long-term acute care hospitals in Tennessee in 2020 was also statistically significantly lower than the national SIR of 1 (SIR=0.31; 95% CI: 0.21, 0.43).
- In 2019, the median healthcare facility-onset CDI LabID SIR for long-term acute care hospitals was 0.28, indicating that half of reporting facilities with at least 1 predicted

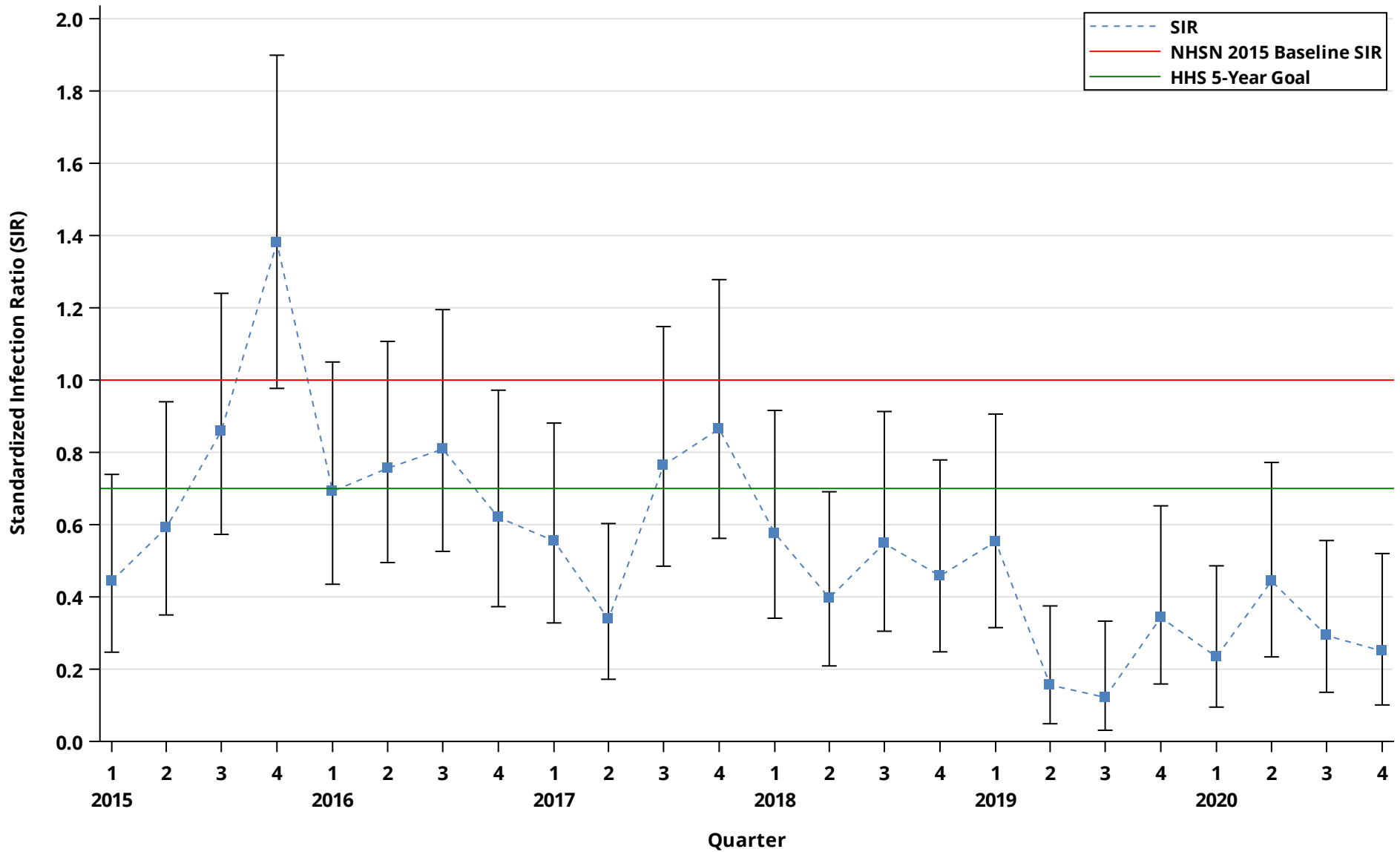
³⁵ http://www.health.gov/hai/prevent_hai.asp

infection had a healthcare facility-onset CDI LabID SIR at or below 0.28. In 2020, the median healthcare facility-onset CDI LabID SIR for long-term acute care hospitals was 0.21.

Facility-Specific SIRs (Figure 105, Figure 106)

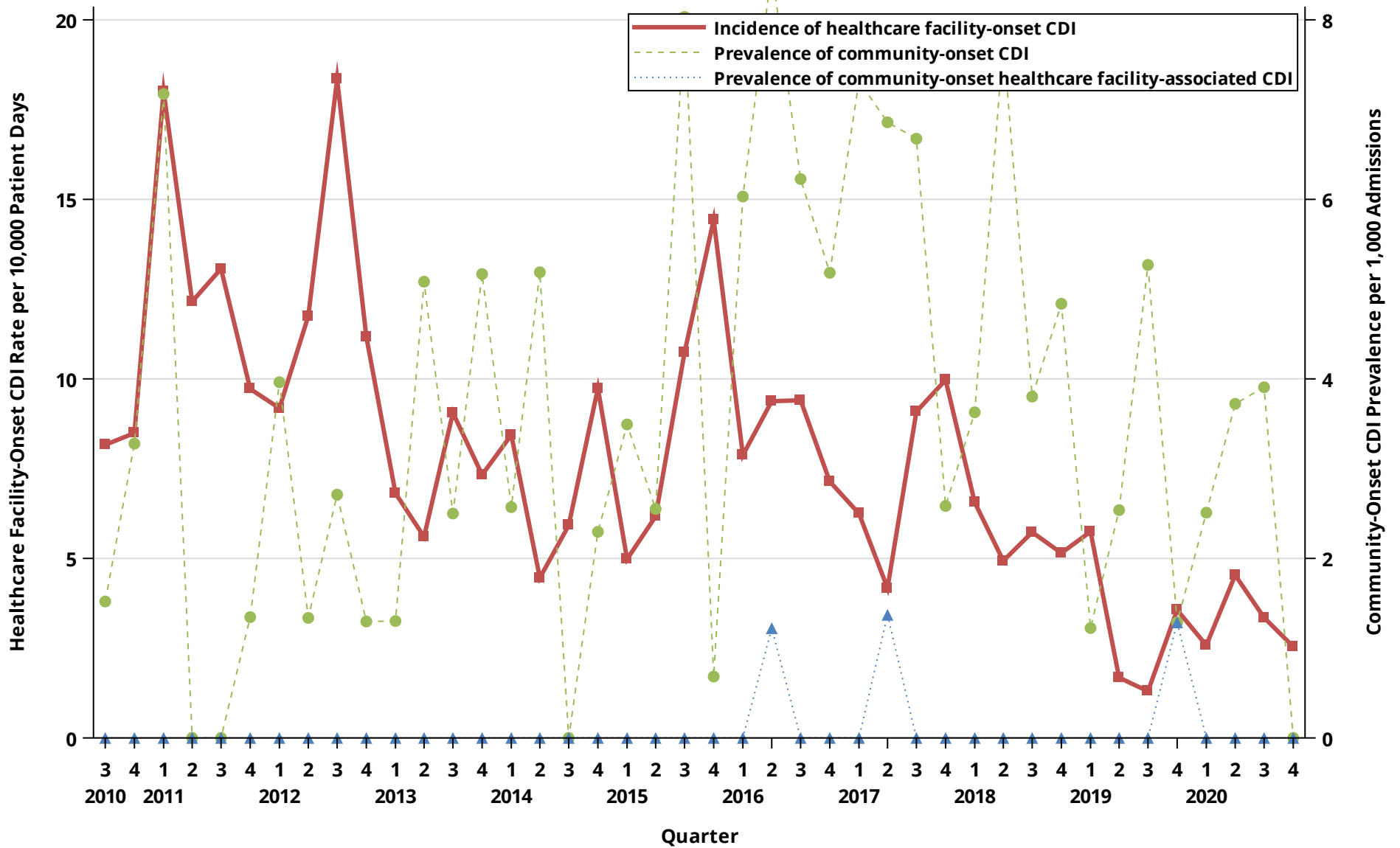
- The healthcare facility-onset CDI LabID event SIR for 2019 and 2020 for each long-term acute care facility is displayed in [Figure 105](#) and [Figure 106](#). The bar representing the confidence interval is green if the was significantly lower than the 2015 national SIR of 1 and red if the SIR was 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 2019 and 2020 there were 5 facilities in each year had an SIR that was statistically significantly lower than the national baseline SIR of 1. No long-term acute care facilities in 2019 or 2020 reported an SIR that was statistically significantly higher than the national baseline.

Figure 103: 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, 01/01/2015–12/31/2020 [Reference standard: National Healthcare Safety Network (NHSN), 2015]



Data Reported as of June 01, 2021

Figure 104: C. difficile Infection (CDI) Laboratory-Identified (LabID) Events Pooled Mean Incidence and Prevalence Rates in Long-term Acute Care (LTAC) Facilities by Quarter, Tennessee, 07/01/2010-12/31/2020



Data Reported as of June 01, 2021

Table 37: 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, 01/01/2019–12/31/2020

									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.	PAT DAYS	OBS	PRED	SIR	LOWER LIMIT	UPPER LIMIT	No. of FACs WITH ≥1 PRED INFECTION	N	%	N	%	10%	25%	50%	75%	90%
Tennessee	2020	9	94,989	31	101.75	0.31	0.21	0.43	8	5	63%	0	0%	0.09	0.14	0.21	0.54	0.66
	2019	9	93,734	29	98.84	0.29	0.20	0.42	9	5	56%	0	0%	0.10	0.21	0.28	0.52	0.55

Data reported as of June 01, 2021

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

Table 38: C. difficile Infection (CDI) Laboratory-Identified (LabID) Events Pooled Mean Incidence and Prevalence Rates in Long-term Acute Care (LTAC) Facilities by Year, Tennessee, 01/01/2019–12/31/2020

			Healthcare Facility-Onset Incidence Rate ¹	Community-Onset Prevalence Rate ²	
STATE	YEAR	No.	POOLED MEAN	CO POOLED MEAN	CO-HCFA POOLED MEAN
Tennessee	2020	10	3.26	2.59	0.00
	2019	10	3.09	2.55	0.32

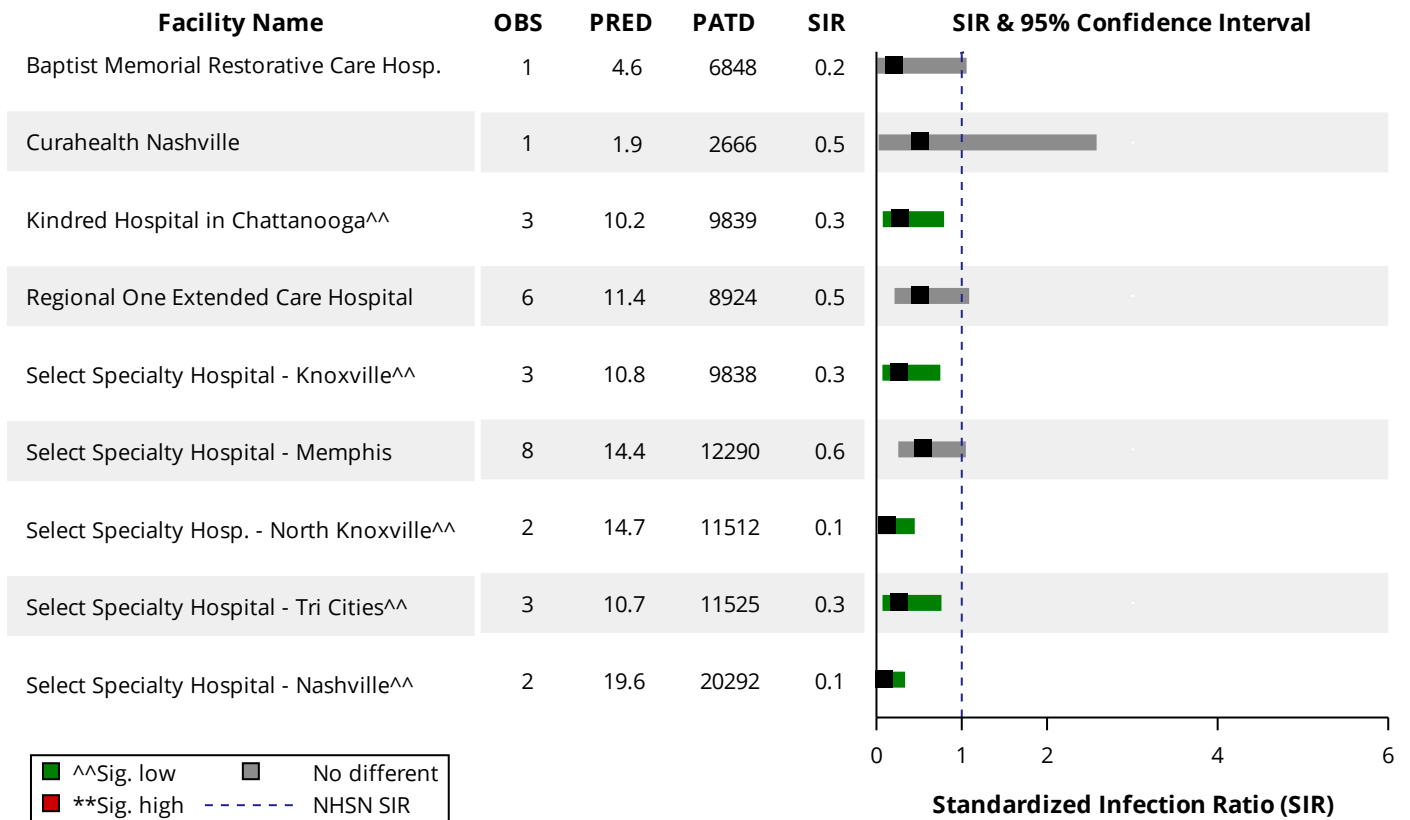
Data reported as of June 01, 2021

No. = number of facilities reporting; CO = community-onset; CO-HCFA = community-onset healthcare facility-associated

¹Events per 10,000 patient days

²Events per 1,000 admissions

Figure 105: Healthcare Facility-Onset C. difficile Infection (CDI) Laboratory-Identified (LabID) Event Standardized Infection Ratios (SIRs) in Long-term Acute Care Facilities, Tennessee, 01/01/2019 – 12/31/2019



Data Reported as of June 01, 2021

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

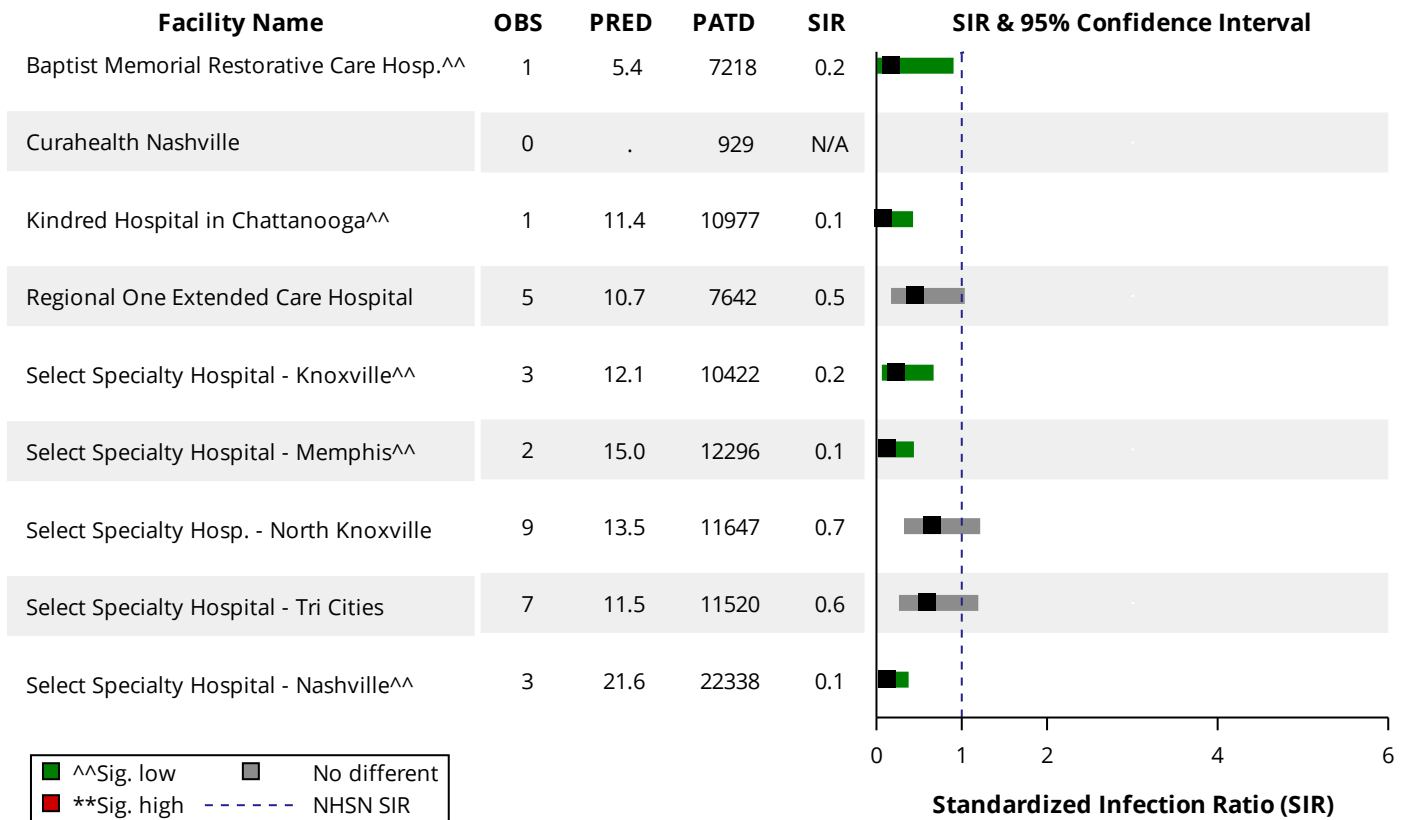
N/A = SIR not calculated for facilities with <1 predicted infection

** Significantly higher than national baseline

^^ Significantly lower than national baseline

* Zero events, but not statistically significant

Figure 106: Healthcare Facility-Onset C. difficile Infection (CDI) Laboratory-Identified (LabID) Event Standardized Infection Ratios (SIRs) in Long-term Acute Care Facilities, Tennessee, 01/01/2020 – 12/31/2020



Data Reported as of June 01, 2021

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 2019: 27

Total number of facilities reporting from January-December 2020: 27

SIRs by Quarter (Figure 107)

- In 2019, the overall healthcare facility-onset CDI LabID SIR in inpatient rehabilitation facilities in Tennessee was variable and increased from 0.42 in Q1 to 0.57 in Q4. In 2020 there was an observable reverse trend with the overall healthcare facility-onset CDI LabID SIR in inpatient rehabilitation facilities decreasing from 0.56 in Q1 to 0.35 in Q4. Every quarter in 2019 and 2020 recorded SIRs statistically below the predicted SIR from the 2015 baseline. Q2-2019 and Q4-2020 recorded SIRs below the U.S. Department of Health and Human Services' [National Action Plan to Prevent Healthcare-Associated Infections](#)³⁶ prevention target of SIR = 0.70.

Healthcare Facility-Onset and Community-Onset CDI LabID Rates (Figure 108)

- The healthcare facility-onset CDI LabID incidence rate was 1.80 per 10,000 patient days in 2019 and remained similar in 2020 with an incidence rate of 1.98 per 10,000 patient days in 2020. As a correction to our previous report, the healthcare facility-onset CDI LabID incidence rate in inpatient rehabilitation facilities in 2017 was 3.23 per 10,000 patient days rather than the published 3.14.
- The prevalence of community-onset CDI LabID events for 2019 was 0.25 per 1,000 admissions; the prevalence of community-onset CDI in 2020 was similar with a prevalence rate of 0.28 per 1,000 admissions. The community-onset healthcare facility associated prevalence rate was 0.05 per 1,000 admissions in 2019 and 0.06 per 1,000 admissions in 2020.

Key percentiles for Tennessee SIRs (Table 39, Table 40)

- The overall healthcare facility-onset CDI LabID SIR for IRFs in Tennessee for both 2019 and 2020 were statistically significantly lower than the national SIR of 1. In 2019 the SIR was 0.44 (95% CI: 0.32, 0.58) while it was 0.47 (95% CI: 0.34, 0.62) in 2020.
- In 2019, the median healthcare facility-onset CDI LabID SIR for IRFs was 0.41, indicating that half of reporting facilities with at least 1 predicted infection had a healthcare facility-onset

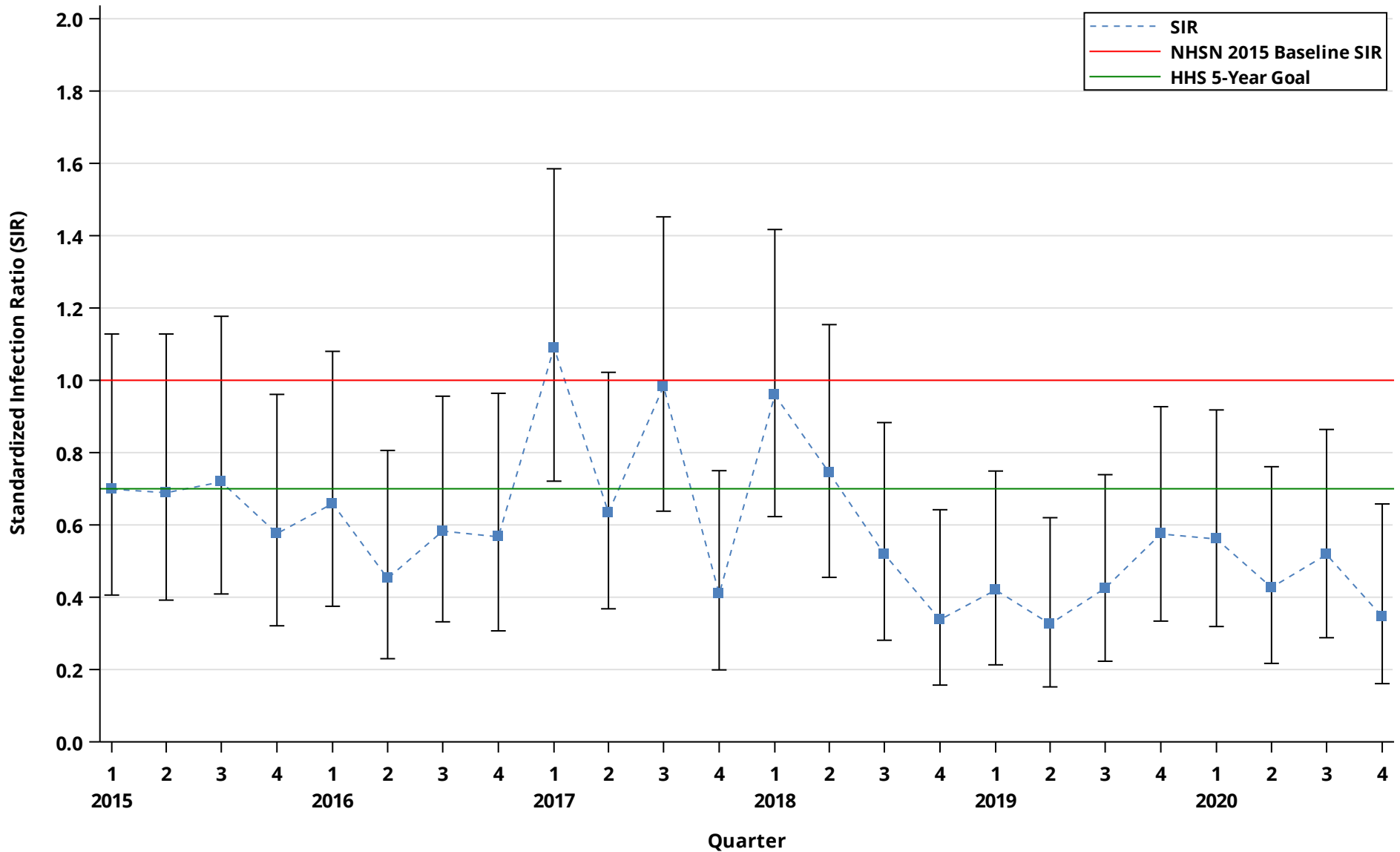
³⁶ http://www.health.gov/hai/prevent_hai.asp

CDI LabID SIR at or below 0.41. From January-December 2020, the median healthcare facility-onset CDI LabID SIR for IRFs was 0.31.

Facility-Specific SIRs (Figure 109, Figure 110)

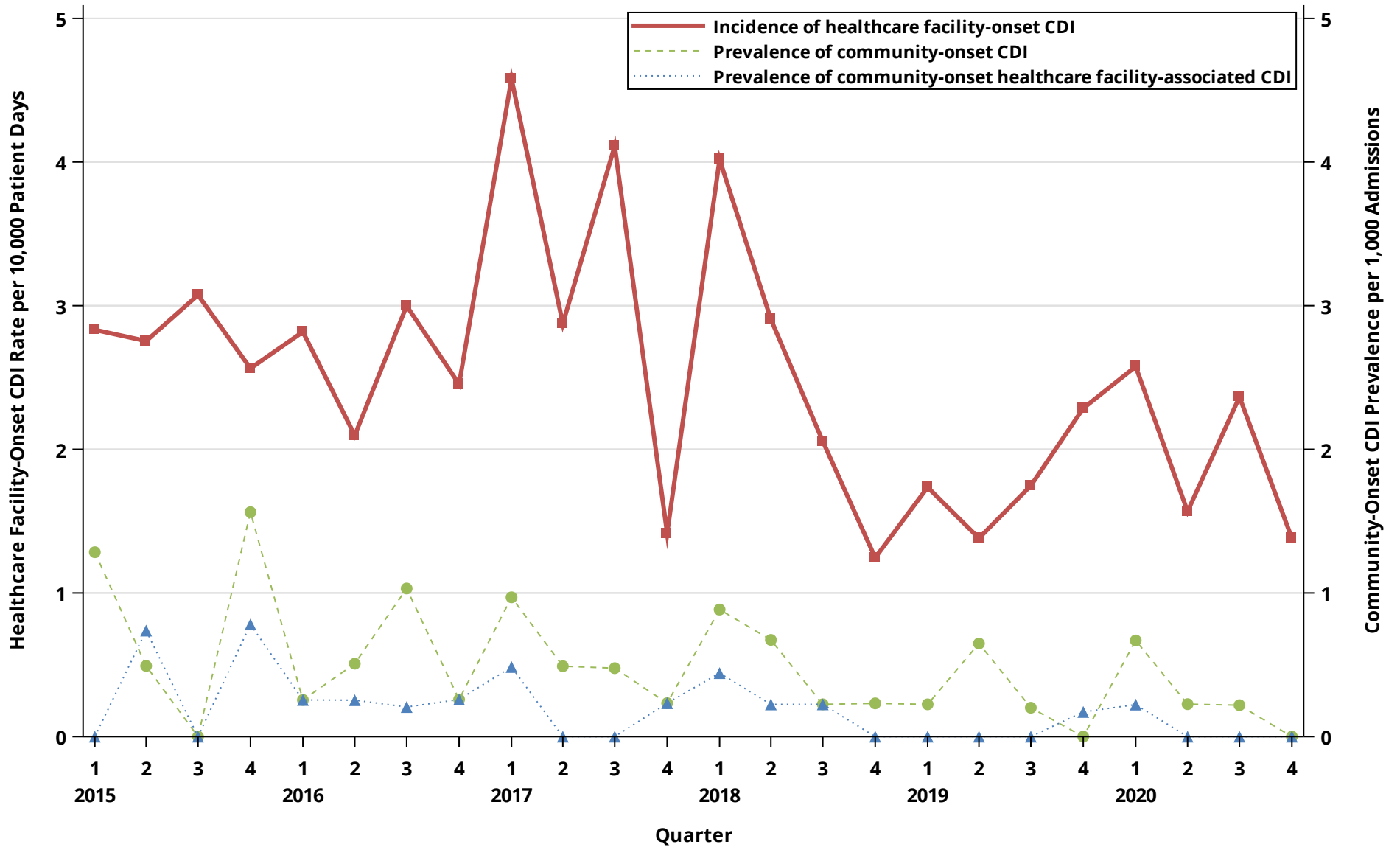
- The healthcare facility-onset CDI LabID event SIR for 2019 and 2020 for each inpatient rehabilitation facility is displayed in [Figure 109](#) and [Figure 110](#). The bar representing the confidence interval is green if the was significantly lower than the 2015 national SIR of 1 and red if the SIR 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 2019, 6 facilities had a healthcare facility-onset CDI LabID event SIR that was statistically significantly lower than the 2015 national baseline SIR of 1 while four facilities had an SIR that was statistically significantly lower than the baseline in 2020. No facilities in 2019 or 2020 had an SIR that was statistically significantly higher than the national baseline SIR of 1.

Figure 107: Standardized Infection Ratio (SIR) for Healthcare-Onset *C. difficile* Infection (CDI) Laboratory-Identified (LabID) Events for Inpatient Rehabilitation Facilities (IRF) by Quarter, Tennessee, 01/01/2015–12/31/2020 [Reference standard: National Healthcare Safety Network (NHSN), 2015]



Data Reported as of June 01, 2021

Figure 108: C. difficile Infection (CDI) Laboratory-Identified (LabID) Events Pooled Mean Incidence and Prevalence Rates in Inpatient Rehabilitation Facilities (IRF) by Quarter, Tennessee, 01/01/2015-12/31/2020



Data Reported as of June 01, 2021

Table 39: Healthcare-Onset C. difficile Infection (CDI) Laboratory-Identified (LabID) Events Standardized Infection Ratio (SIR) in Inpatient Rehabilitation Facilities (IRF) by Reporting Year, Tennessee, 01/01/2019–12/31/2020

									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.	PAT DAYS	OBS	PRED	SIR	LOWER LIMIT	UPPER LIMIT	No. of FACS WITH ≥1 PRED INFECTION		N	%	N	%	10%	25%	50%	75%	90%
Tennessee	2020	27	229,182	45	96.55	0.47	0.34	0.62	24	4	17%	0	0%	0.00	0.00	0.31	0.59	0.99	
	2019	27	237,353	44	100.29	0.44	0.32	0.58	23	6	26%	0	0%	0.00	0.00	0.41	0.73	0.87	

Data reported as of June 01, 2021

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

Table 40: C. difficile Infection (CDI) Laboratory-Identified (LabID) Events Pooled Mean Incidence and Prevalence Rates in Inpatient Rehabilitation Facilities (IRF) by Year, Tennessee, 01/01/2019–12/31/2020

			Healthcare Facility-Onset Incidence Rate ¹	Community-Onset Prevalence Rate ²	
STATE	YEAR	No.	POOLED MEAN	CO POOLED MEAN	CO-HCFA POOLED MEAN
Tennessee	2020	28	1.98	0.28	0.06
	2019	29	1.80	0.25	0.05

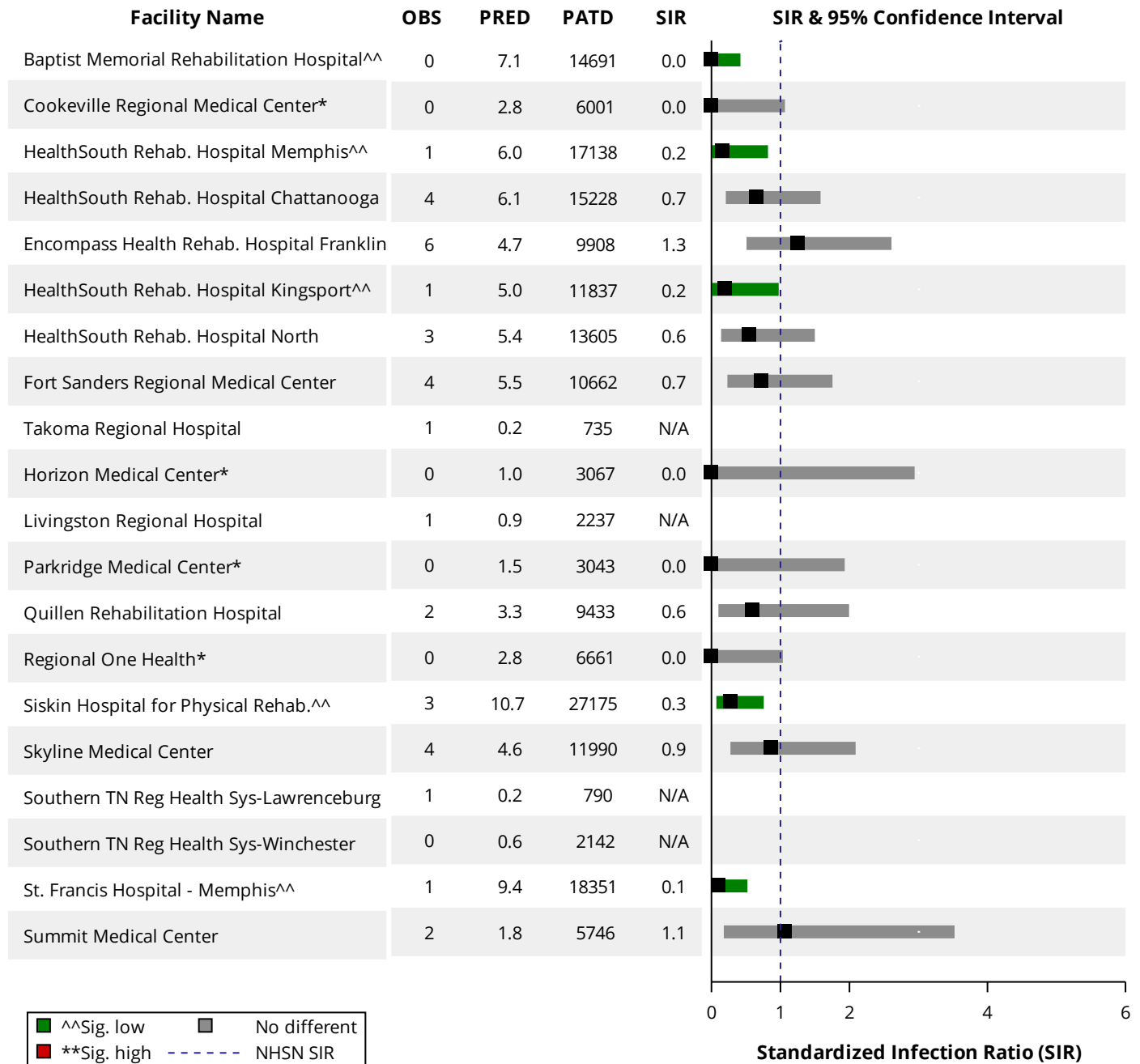
Data reported as of June 01, 2021

No. = number of facilities reporting; CO = community-onset; CO-HCFA = community-onset healthcare facility-associated

¹Events per 10,000 patient days

²Events per 1,000 admissions

Figure 109: Healthcare Facility-Onset C. difficile Infection (CDI) Laboratory-Identified (LabID) Event Standardized Infection Ratios (SIRs) in Inpatient Rehabilitation Facilities, Tennessee, 01/01/2019 – 12/31/2019



Data Reported as of June 01, 2021

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

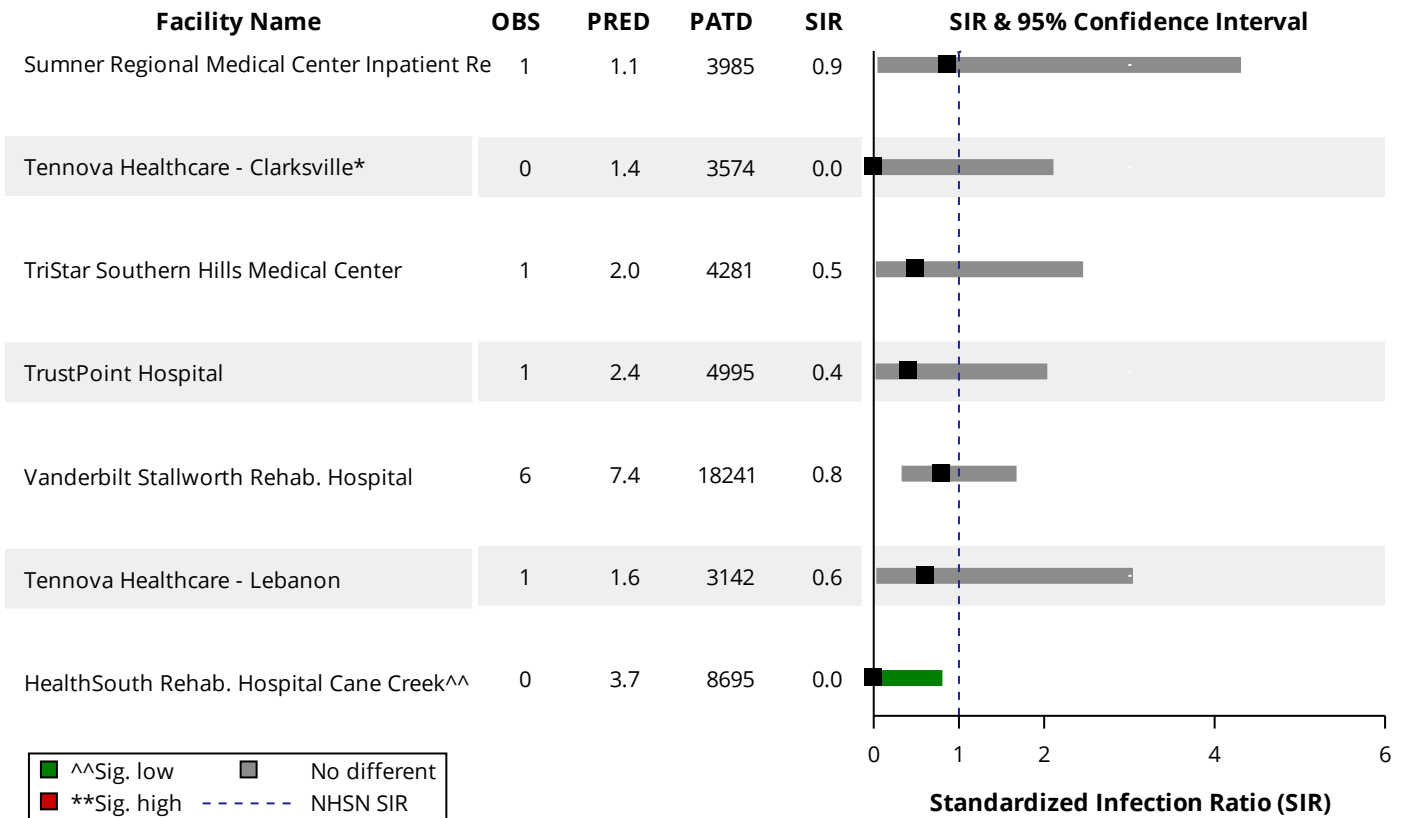
N/A = SIR not calculated for facilities with <1 predicted infection

** Significantly higher than national baseline

^^ Significantly lower than national baseline

* Zero events, but not statistically significant

Figure 109 (cont'd)



Data Reported as of June 01, 2021

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

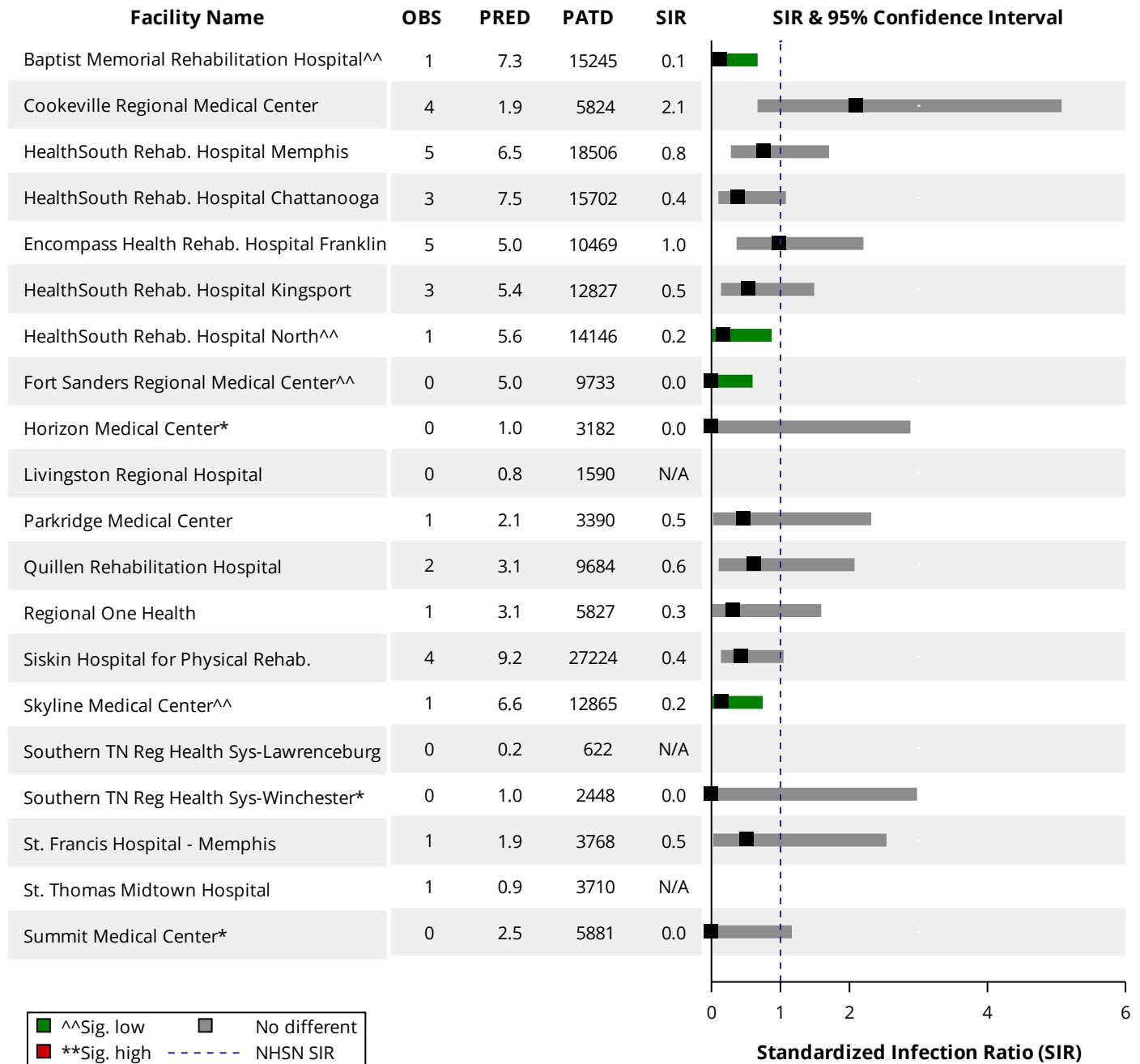
N/A = SIR not calculated for facilities with <1 predicted infection

** Significantly higher than national baseline

^^ Significantly lower than national baseline

* Zero events, but not statistically significant

Figure 110: Healthcare Facility-Onset C. difficile Infection (CDI) Laboratory-Identified (LabID) Event Standardized Infection Ratios (SIRs) in Inpatient Rehabilitation Facilities, Tennessee, 01/01/2020 – 12/31/2020



Data Reported as of June 01, 2021

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

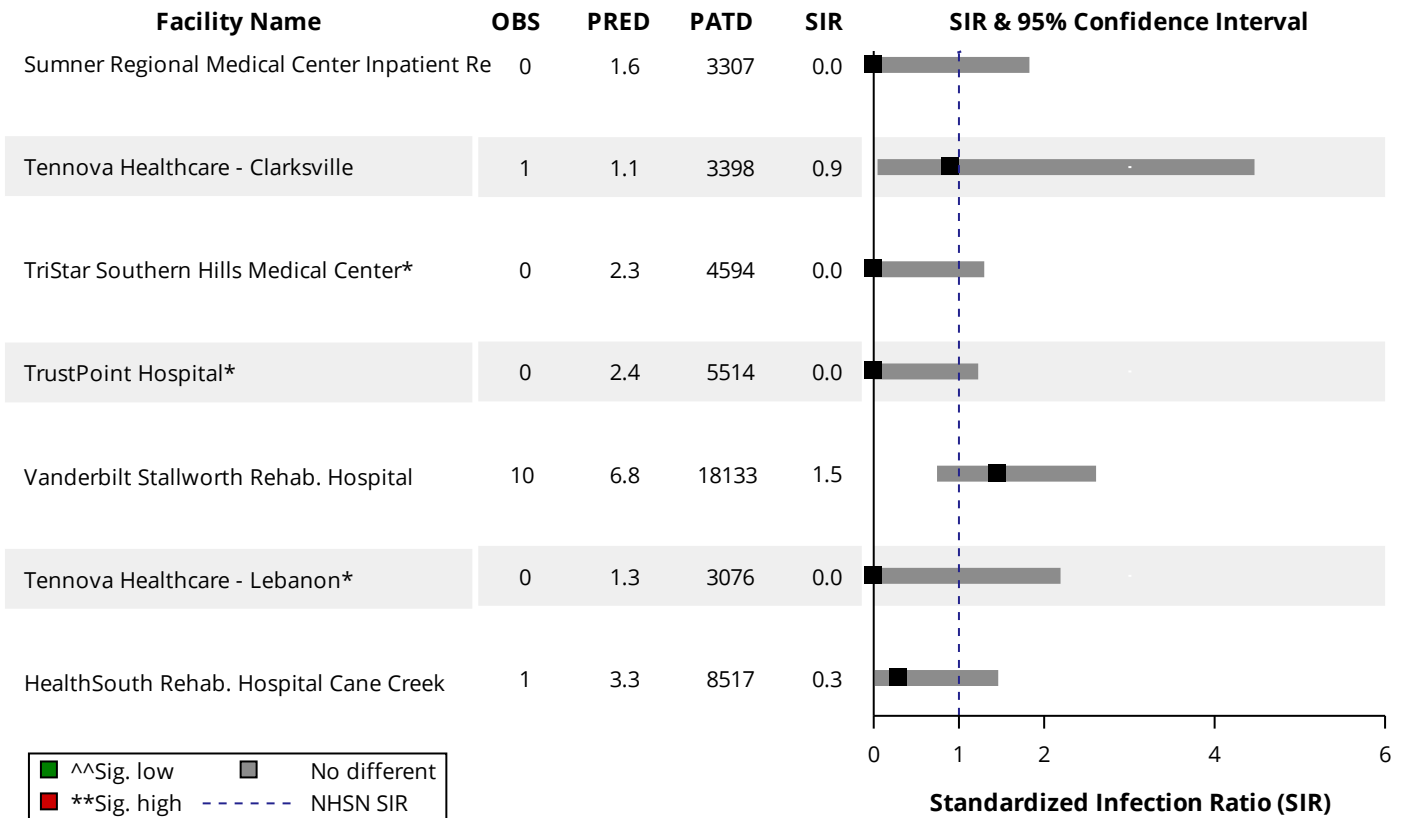
N/A = SIR not calculated for facilities with <1 predicted infection

** Significantly higher than national baseline

^^ Significantly lower than national baseline

* Zero events, but not statistically significant

Figure 110 (cont'd)



Data Reported as of June 01, 2021

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](#))³⁷.

Reporting Requirements

Healthcare personnel influenza summary data have been reportable to TDH from acute care hospitals beginning with 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. Outpatient hemodialysis facilities and inpatient psychiatric facilities are required to report healthcare worker influenza vaccination data beginning with the 2015/2016 influenza season.

To comply with these reporting requirements, facilities are required to follow the [NHSN Healthcare Personnel Vaccination Module: Influenza Vaccination Summary Protocol](#)³⁸, 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

³⁷ <http://www.cdc.gov/flu/healthcareworkers.htm>

³⁸ <http://www.cdc.gov/nhsn/PDFs/HPS-manual/vaccination/HPS-flu-vaccine-protocol.pdf>

- Had an unknown vaccination status or did not otherwise meet any of the definitions of the above-mentioned numerator categories

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 2019 – March 2020: 76

Total number of facilities reporting from October 2020– March 2021: 99

Healthcare Personnel Influenza Vaccination Rates (Table 41)

- The mean facility-specific overall healthcare personnel vaccination rate at Tennessee acute care hospitals was 90.8% for the 2019/2020 influenza season (October 2019-March 2020), which is above the [HHS Healthy People](#)³⁹ 2020 Goal of 90% vaccination. The mean facility-specific overall healthcare personnel vaccination rate at Tennessee acute care hospitals was 84.7% for the 2020/2021 influenza season (October 2020-March 2021), which was below the [HHS Healthy People](#)⁴⁰ 2020 Goal of 90% vaccination.
- The median facility-specific overall healthcare personnel vaccination rate was 92.8%, indicating that half of all Tennessee acute care hospitals documented at least 92.8% of their healthcare personnel received influenza vaccination for the 2019/2020 influenza season. The median facility-specific overall healthcare personnel vaccination rate was 87.1% for the 2020/2021 influenza season, indicating that half of all Tennessee acute care hospitals documented at least 87.1% of their healthcare personnel received influenza vaccination.
- The Tennessee 2019/2020 mean facility-specific influenza vaccination rates were the lowest for licensed independent practitioners (84.6%) and the highest for students/trainees/volunteers (94.3%). The Tennessee 2020/2021 mean facility-specific influenza vaccination rates were similar to the 2019/2020 figures with the lowest for licensed independent practitioners (80.7%) and the highest for students/trainees/volunteers (94.7%).

Facility-Specific Healthcare Personnel Influenza Vaccination Rates (Figure 111, Figure 112)

- The overall percent of healthcare personnel with documented influenza vaccination for each facility for the 2019/2020 and 2020/2021 influenza seasons are displayed in [Figure 111](#) and [Figure 112](#).

³⁹ <http://www.healthypeople.gov/>

⁴⁰ <http://www.healthypeople.gov/>

Table 41: Healthcare Personnel Influenza Vaccination Rate and Key Percentiles by Healthcare Personnel Category by Influenza Season in Acute Care Facilities, Tennessee, 10/01/2019–03/31/2021

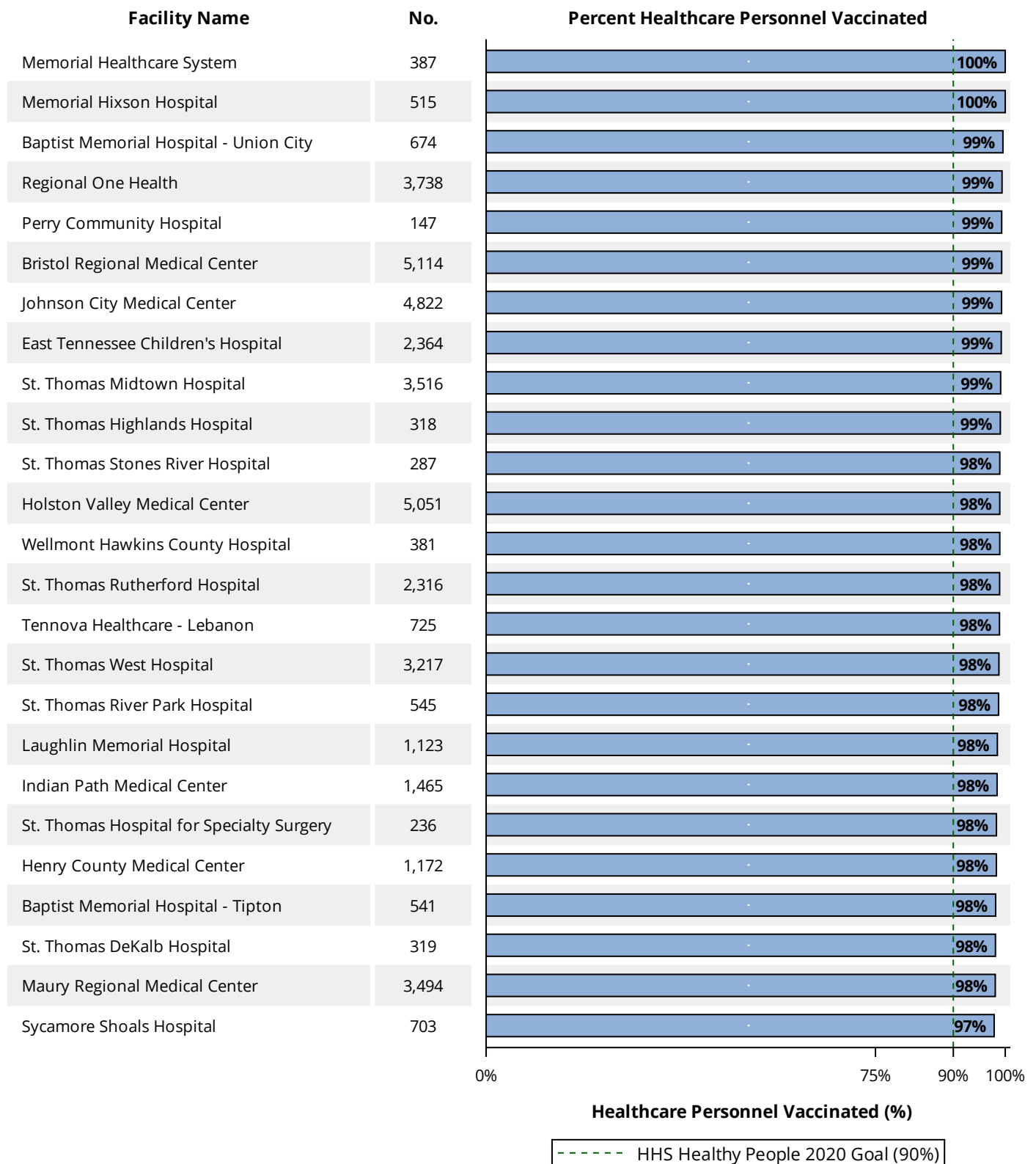
STATE	FLU SEASON	HEALTHCARE PERSONNEL CATEGORY	No.	MEAN HCP VACCINATION RATE	DISTRIBUTION OF HCP VACCINATION RATE				
					10%	25%	50%	75%	90%
Tennessee	2020/2021	Employees	99	84.4%	64.3%	76.8%	85.3%	96.8%	99.0%
		Licensed Independent Practitioners	99	80.7%	50.0%	63.2%	89.2%	98.0%	100%
		Students/Trainees/Volunteers	99	94.7%	87.1%	97.4%	99.9%	100%	100%
		Overall	99	84.7%	65.5%	78.5%	87.1%	96.4%	98.5%
	2019/2020	Employees	76	91.4%	81.2%	85.8%	94.6%	98.4%	99.5%
		Licensed Independent Practitioners	76	84.6%	50.0%	73.5%	95.4%	99.4%	100%
		Students/Trainees/Volunteers	76	94.3%	86.4%	94.2%	100%	100%	100%
		Overall	76	90.8%	78.7%	84.9%	92.8%	98.4%	99.2%

Data reported as of June 01, 2021

No. = number of facilities reporting

HCP = Healthcare Personnel

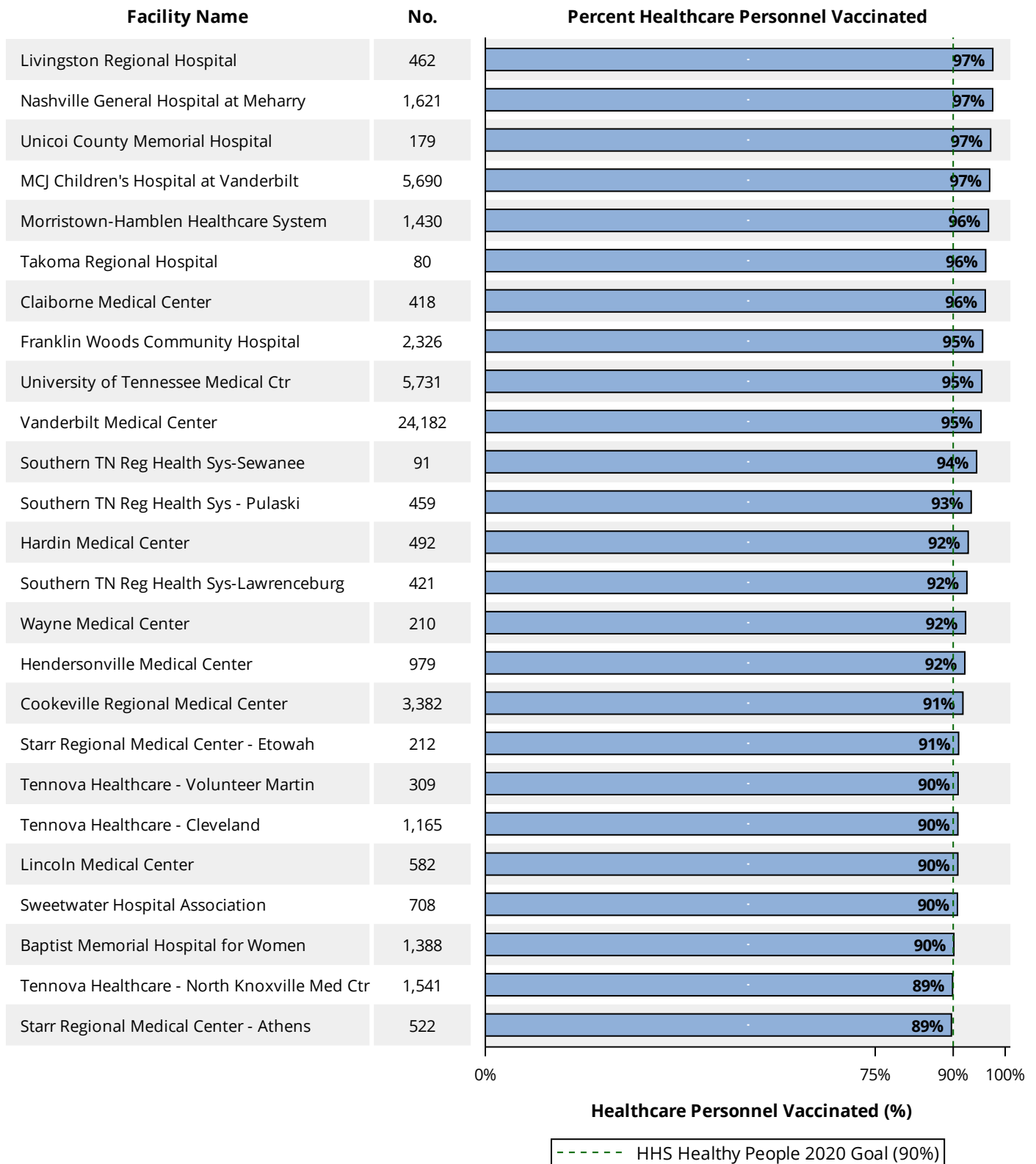
Figure 111: Healthcare Personnel Influenza Vaccination in Acute Care Facilities, Tennessee, 2019/2020 Influenza Season (10/01/2019–03/31/2020)



Data Reported as of June 01, 2021

No. = total number of healthcare personnel who worked at least one day between October 1, 2019 and March 31, 2020

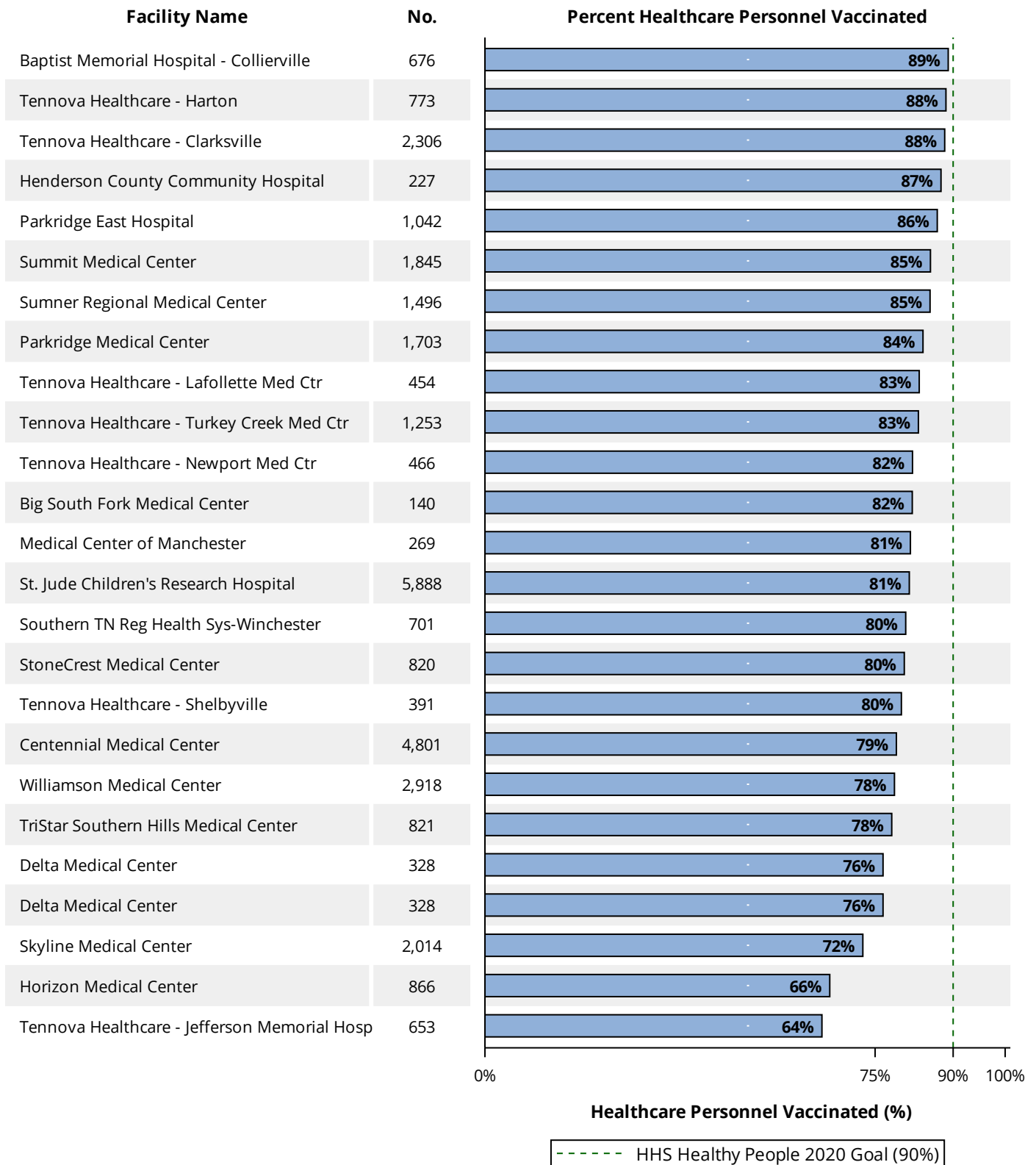
Figure 111 (cont'd)



Data Reported as of June 01, 2021

No. = total number of healthcare personnel who worked at least one day between October 1, 2019 and March 31, 2020

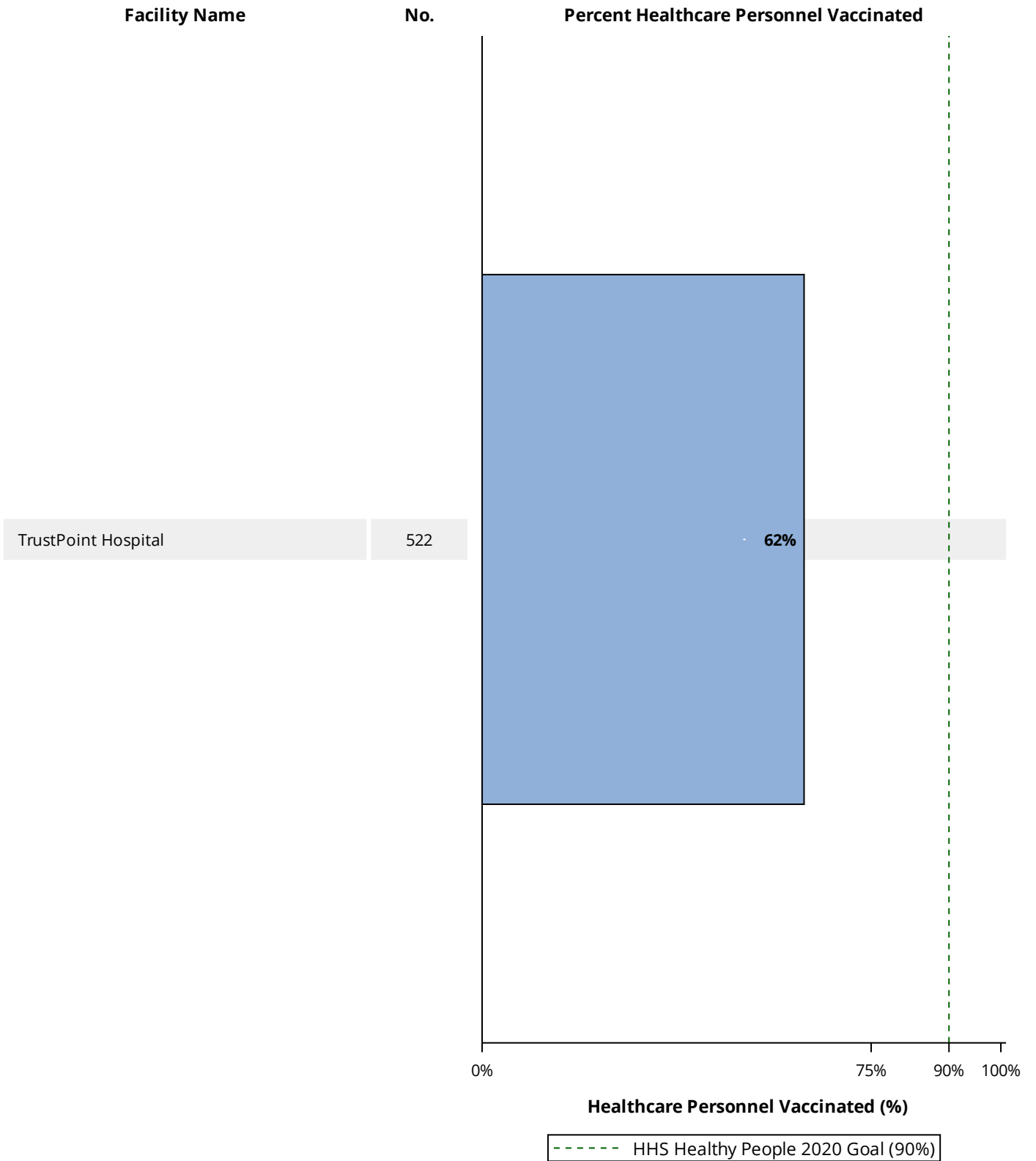
Figure 111 (cont'd)



Data Reported as of June 01, 2021

No. = total number of healthcare personnel who worked at least one day between October 1, 2019 and March 31, 2020

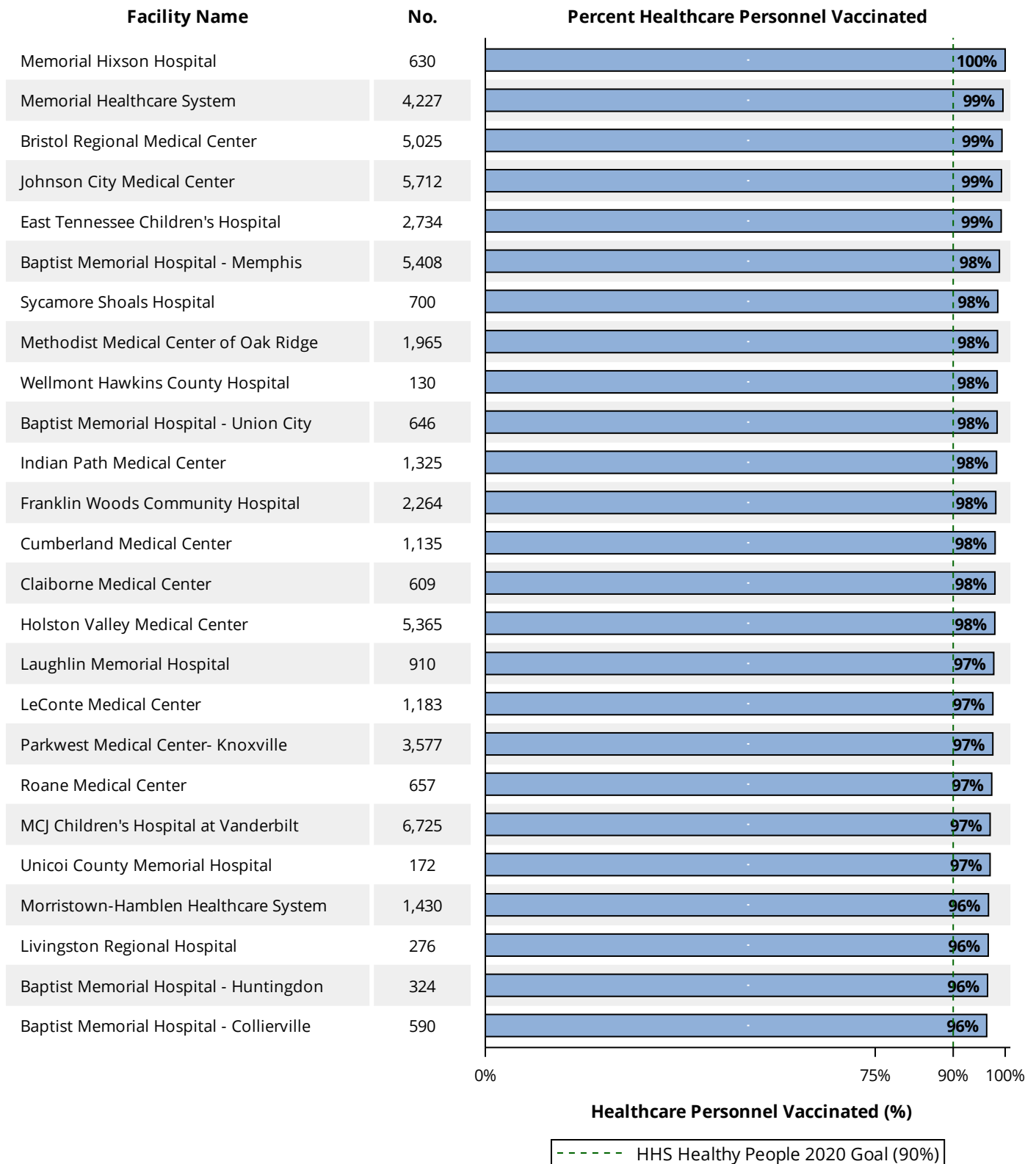
Figure 111 (cont'd)



Data Reported as of June 01, 2021

No. = total number of healthcare personnel who worked at least one day between October 1, 2019 and March 31, 2020

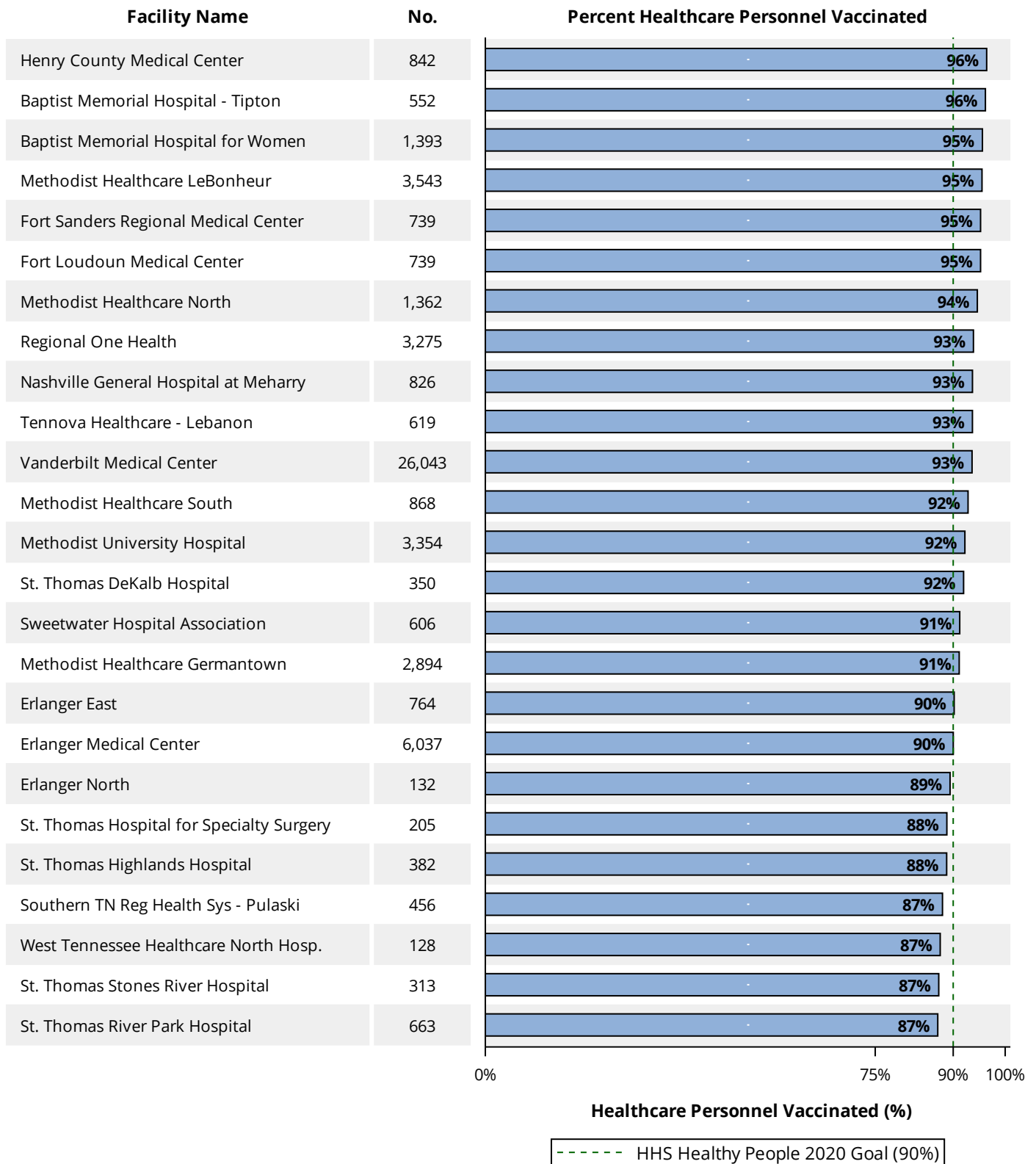
Figure 112: Healthcare Personnel Influenza Vaccination in Acute Care Facilities, Tennessee, 2020/2021 Influenza Season (10/01/2020–03/31/2021)



Data Reported as of June 01, 2021

No. = total number of healthcare personnel who worked at least one day between October 1, 2020 and March 31, 2021

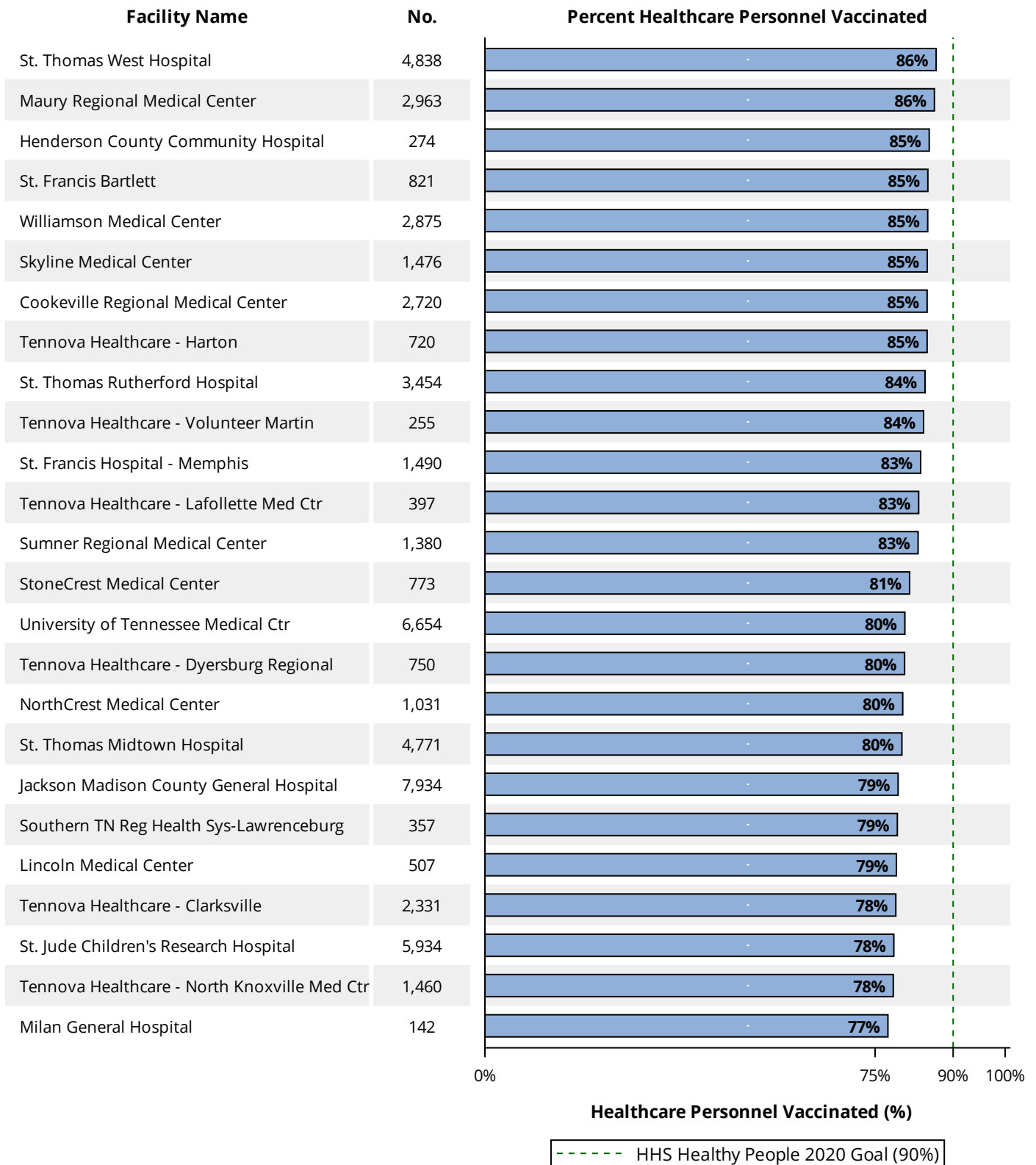
Figure 112 (cont'd)



Data Reported as of June 01, 2021

No. = total number of healthcare personnel who worked at least one day between October 1, 2020 and March 31, 2021

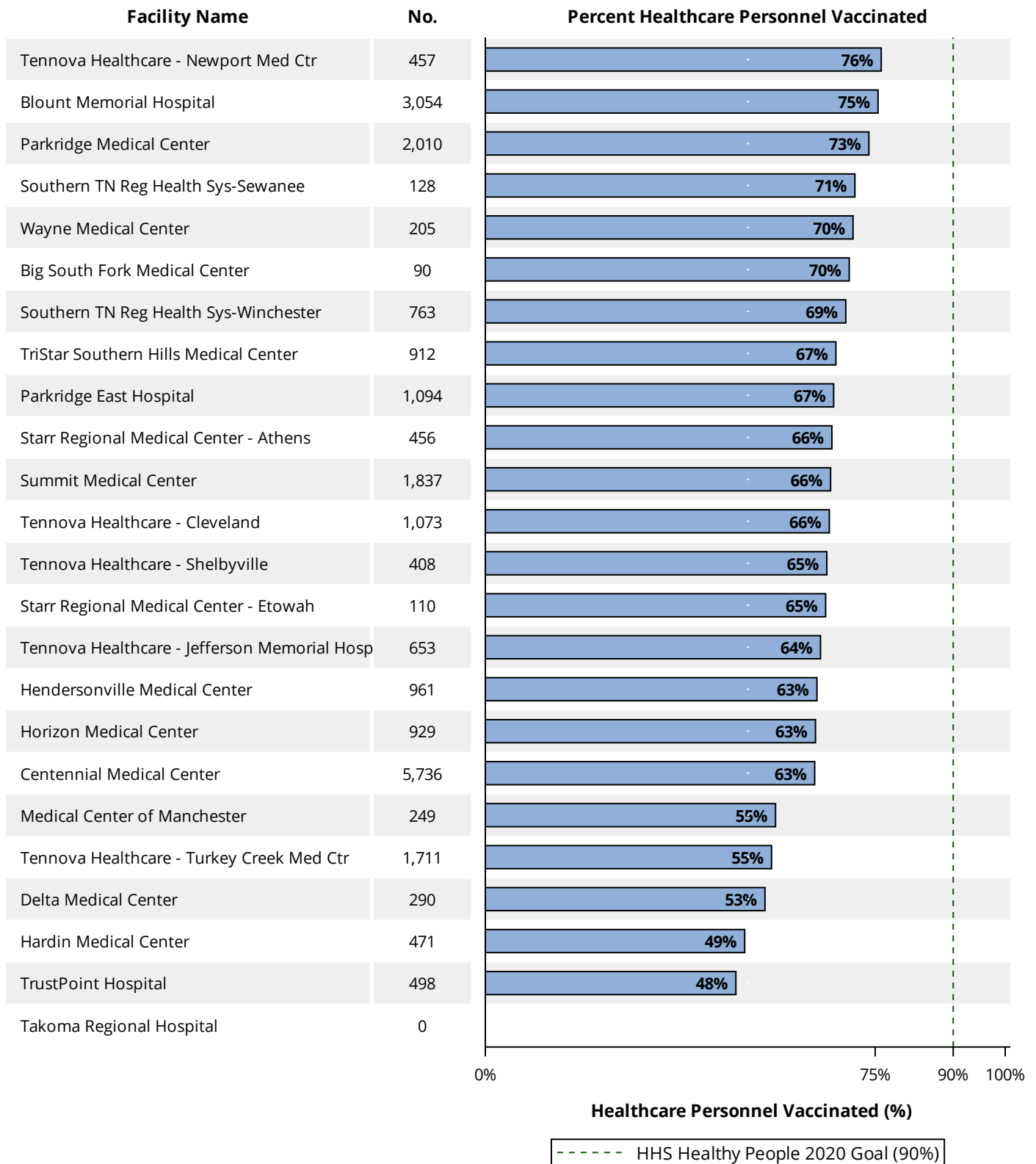
Figure 112 (cont'd)



Data Reported as of June 01, 2021

No. = total number of healthcare personnel who worked at least one day between October 1, 2020 and March 31, 2021

Figure 112 (cont'd)



Data Reported as of June 01, 2021

No. = total number of healthcare personnel who worked at least one day between October 1, 2020 and March 31, 2021

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 2019 – March 2020: 7

Total number of facilities reporting from October 2020 – March 2021: 8

Healthcare Personnel Influenza Vaccination Rates ([Table 42](#))

- The mean facility-specific overall healthcare personnel vaccination rate in Tennessee long-term acute care hospitals was 89.8% for the 2019/2020 influenza season (October 2019-March 2020), below the [HHS Healthy People](#)⁴¹ 2020 Goal of 90%. The mean facility-specific overall healthcare personnel vaccination rate in Tennessee long-term acute care hospitals was 84.2% for the 2020/2021 influenza season (October 2020-March 2021), also below the [HHS Healthy People](#)⁴² 2020 Goal of 90%.
- The median facility-specific overall healthcare personnel vaccination rate was 93.1%, indicating that half of all Tennessee long-term acute care hospitals documented at least 93.1% of their healthcare personnel received influenza vaccination for the 2019/2020 influenza season. The median facility-specific overall healthcare personnel vaccination rate was 88.3% for the 2020/2021 influenza season.
- The Tennessee 2019/2020 mean facility-specific influenza vaccination rates were the lowest for employees (88.8%) and the highest for students/trainees/volunteers (100.0%). The Tennessee 2020/2021 mean facility-specific influenza vaccination rates were again the lowest for employees (82.3%) and the highest for students/trainees/volunteers (98.1%).

Facility-Specific Healthcare Personnel Influenza Vaccination Rates ([Figure 113](#), [Figure 114](#))

- The overall percent of healthcare personnel with documented influenza vaccination for each facility for the 2019/2020 and 2020/2021 influenza seasons are displayed in [Figure 113](#) and [Figure 114](#).

⁴¹ <http://www.healthypeople.gov/>

⁴² <http://www.healthypeople.gov/>

Table 42: Healthcare Personnel Influenza Vaccination Rate and Key Percentiles by Healthcare Personnel Category by Influenza Season in Long-Term Acute Care (LTAC) Facilities, Tennessee, 10/01/2019–03/31/2021

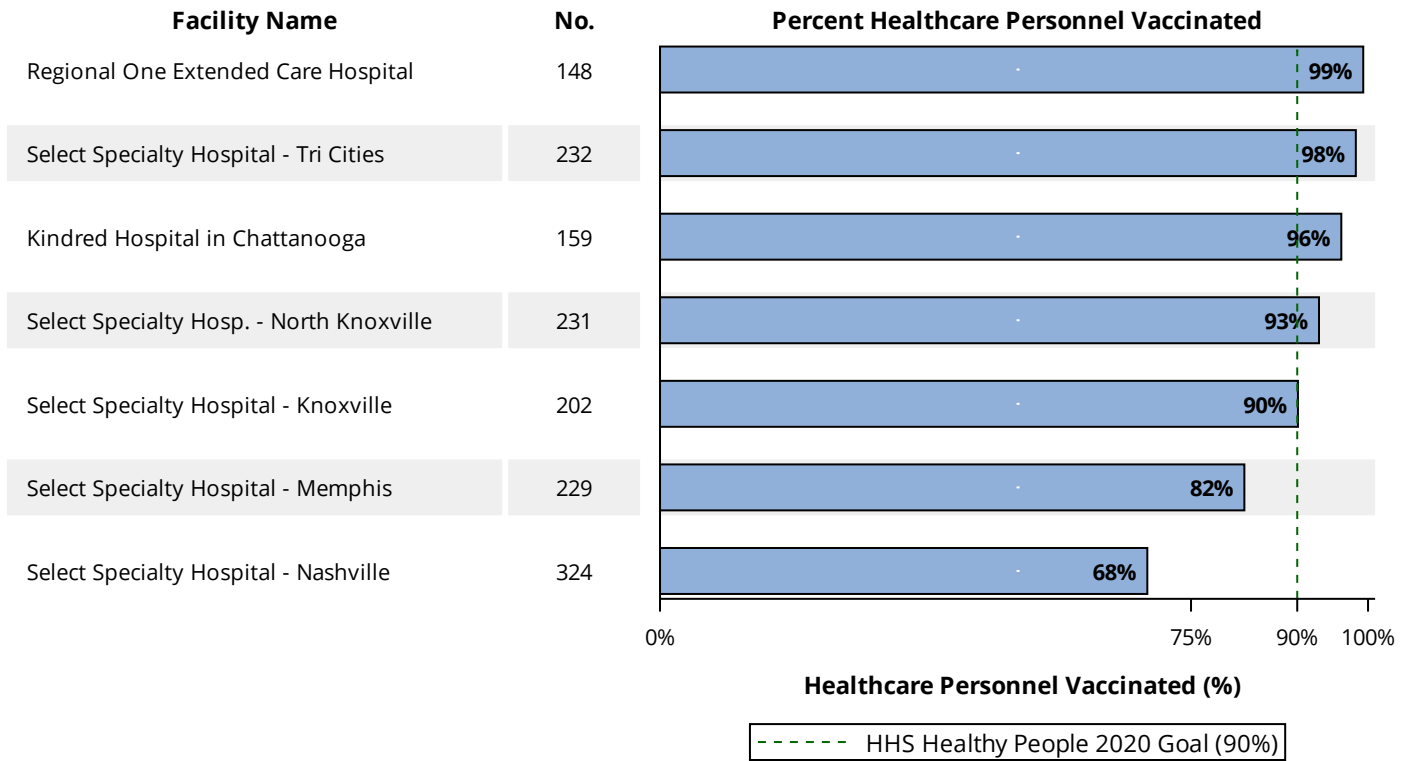
					DISTRIBUTION OF HCP VACCINATION RATE				
STATE	FLU SEASON	HEALTHCARE PERSONNEL CATEGORY	No.	MEAN HCP VACCINATION RATE	10%	25%	50%	75%	90%
Tennessee	2020/2021	Employees	8	82.3%	50.3%	71.2%	84.9%	97.8%	100%
		Licensed Independent Practitioners	8	88.6%	45.5%	89.6%	95.6%	98.8%	100%
		Students/Trainees/Volunteers	8	98.1%	94.3%	94.3%	100%	100%	100%
		Overall	8	84.2%	49.2%	76.1%	88.3%	97.7%	100%
	2019/2020	Employees	7	88.8%	65.5%	85.1%	90.9%	98.0%	99.3%
		Licensed Independent Practitioners	7	91.7%	67.2%	90.7%	96.6%	98.8%	100%
		Students/Trainees/Volunteers	7	100%	100%	100%	100%	100%	100%
		Overall	7	89.8%	68.8%	82.5%	93.1%	98.3%	99.3%

Data reported as of June 01, 2021

No. = number of facilities reporting

HCP = Healthcare Personnel

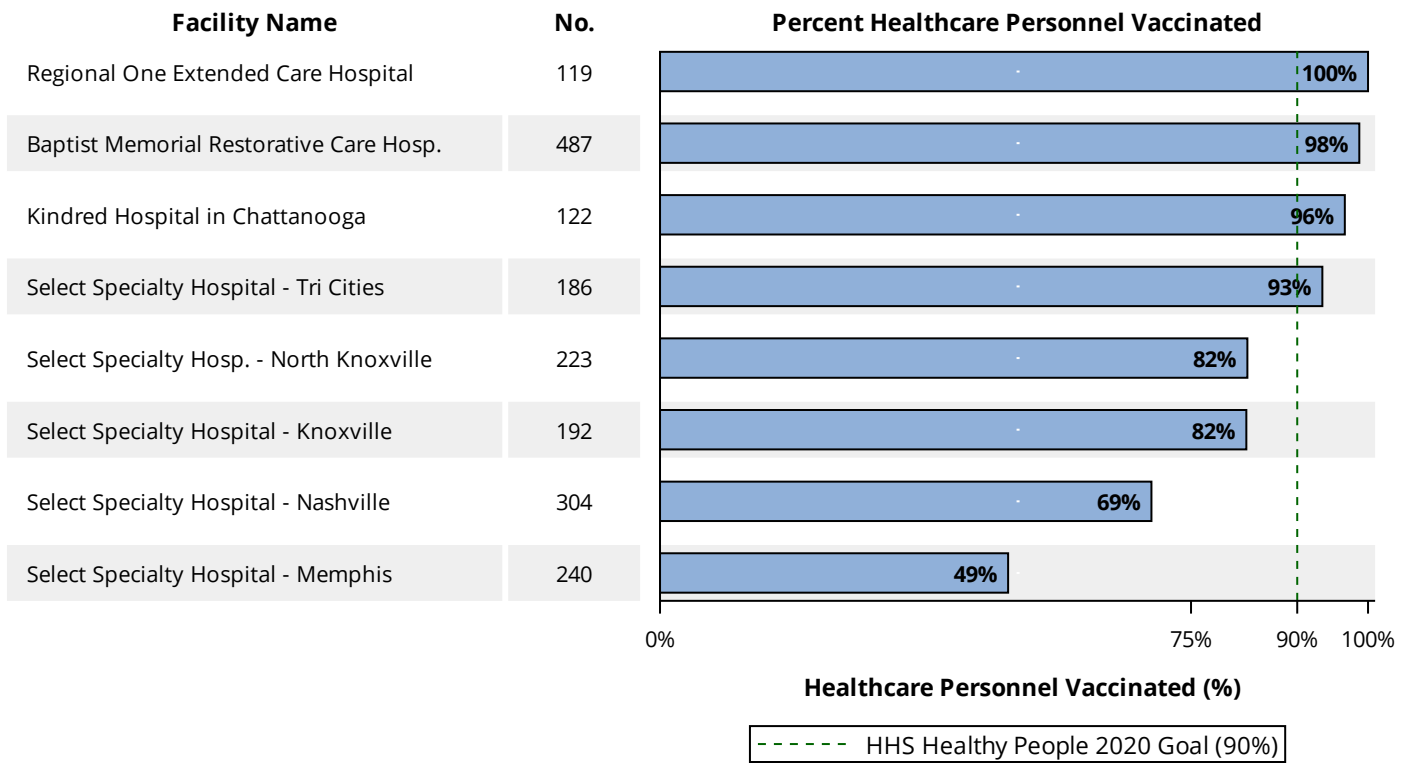
Figure 113: Healthcare Personnel Influenza Vaccination in Long-Term Acute Care (LTAC) Facilities, Tennessee, 2019/2020 Influenza Season (10/01/2019–03/31/2020)



Data Reported as of June 01, 2021

No. = total number of healthcare personnel who worked at least one day between October 1, 2019 and March 31, 2020

Figure 114: Healthcare Personnel Influenza Vaccination in Long-Term Acute Care (LTAC) Facilities, Tennessee, 2020/2021 Influenza Season (10/01/2020–03/31/2021)



Data Reported as of June 01, 2021

No. = total number of healthcare personnel who worked at least one day between October 1, 2020 and March 31, 2021

Healthcare Personnel Influenza Vaccination

Inpatient Rehabilitation Facilities

Healthcare Personnel Influenza Vaccination in Inpatient Rehabilitation Facilities (IRF):

Total number of facilities reporting from October 2019 – March 2020: 23

Total number of facilities reporting from October 2020 – March 2021: 26

Healthcare Personnel Influenza Vaccination Rates ([Table 43](#))

- The mean facility-specific overall healthcare personnel vaccination rate in Tennessee inpatient rehabilitation facilities was 91.3% for the 2019/2020 influenza season (October 2019-March 2020), above the [HHS Healthy People](#)⁴³ 2020 Goal of 90%. The mean facility-specific overall healthcare personnel vaccination rate in Tennessee inpatient rehabilitation facilities was 86.6% for the 2020/2021 influenza season (October 2020-March 2021), below the [HHS Healthy People](#)⁴⁴ 2020 Goal of 90%.
- The median facility-specific overall healthcare personnel vaccination rate was 92.9%, indicating that half of all Tennessee inpatient rehabilitation facilities documented at least 92.9% of their healthcare personnel received influenza vaccination for the 2019/2020 influenza season. The median facility-specific overall healthcare personnel vaccination rate was 88.1%, for the 2020/2021 influenza season.
- Tennessee 2019/2020 mean facility-specific influenza vaccination rates were the lowest for licensed independent practitioners (88.0%) and highest for adult students/trainees/volunteers (98.7%). Tennessee's 2020/2021 mean facility-specific influenza vaccination rates were also lowest for employees (85.8%) and again highest for adult students/trainees/volunteers (92.4%).

Facility-Specific Healthcare Personnel Influenza Vaccination Rates ([Figure 115](#), [Figure 116](#))

- The overall percent of healthcare personnel with documented influenza vaccination for each facility for the 2019/2020 and 2020/2021 influenza seasons are displayed in [Figure 115](#) and [Figure 116](#).

⁴³ <http://www.healthypeople.gov/>

⁴⁴ <http://www.healthypeople.gov/>

Table 43: Healthcare Personnel Influenza Vaccination Rate and Key Percentiles by Healthcare Personnel Category by Influenza Season in Inpatient Rehabilitation Facilities, Tennessee, 10/01/2019–03/31/2021

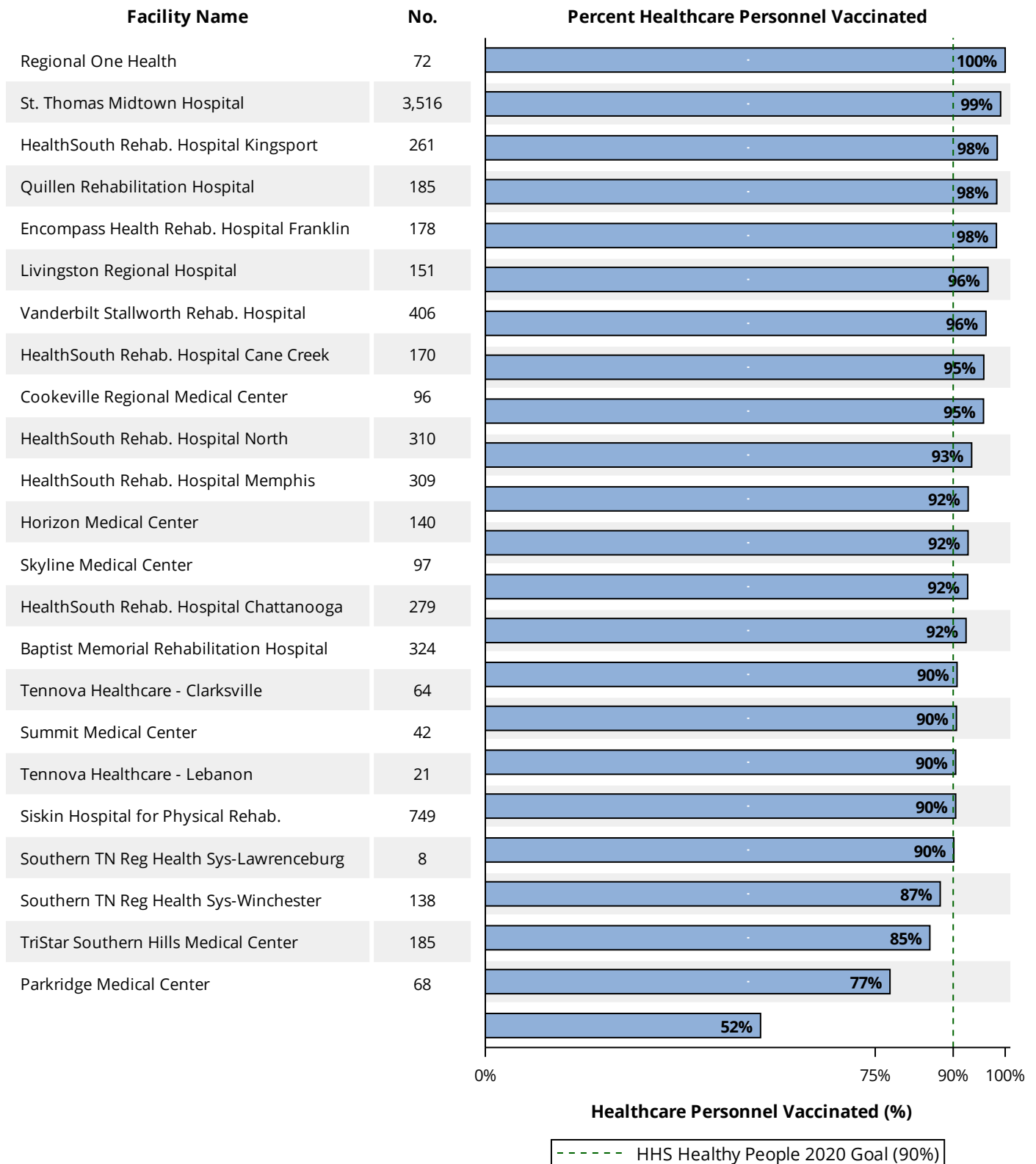
					DISTRIBUTION OF HCP VACCINATION RATE				
STATE	FLU SEASON	HEALTHCARE PERSONNEL CATEGORY	No.	MEAN HCP VACCINATION RATE	10%	25%	50%	75%	90%
Tennessee	2020/2021	Employees	26	85.8%	71.2%	81.6%	85.9%	94.1%	98.8%
		Licensed Independent Practitioners	26	90.5%	75.0%	93.8%	100%	100%	100%
		Students/Trainees/Volunteers	26	92.4%	94.7%	100%	100%	100%	100%
		Overall	26	86.6%	72.0%	81.7%	88.1%	94.1%	98.4%
	2019/2020	Employees	23	89.6%	83.3%	88.0%	92.3%	96.3%	98.7%
		Licensed Independent Practitioners	23	88.0%	75.0%	85.7%	100%	100%	100%
		Students/Trainees/Volunteers	23	98.7%	95.6%	98.7%	100%	100%	100%
		Overall	23	91.3%	85.5%	90.5%	92.9%	96.7%	98.5%

Data reported as of June 01, 2021

No. = number of facilities reporting

HCP = Healthcare Personnel

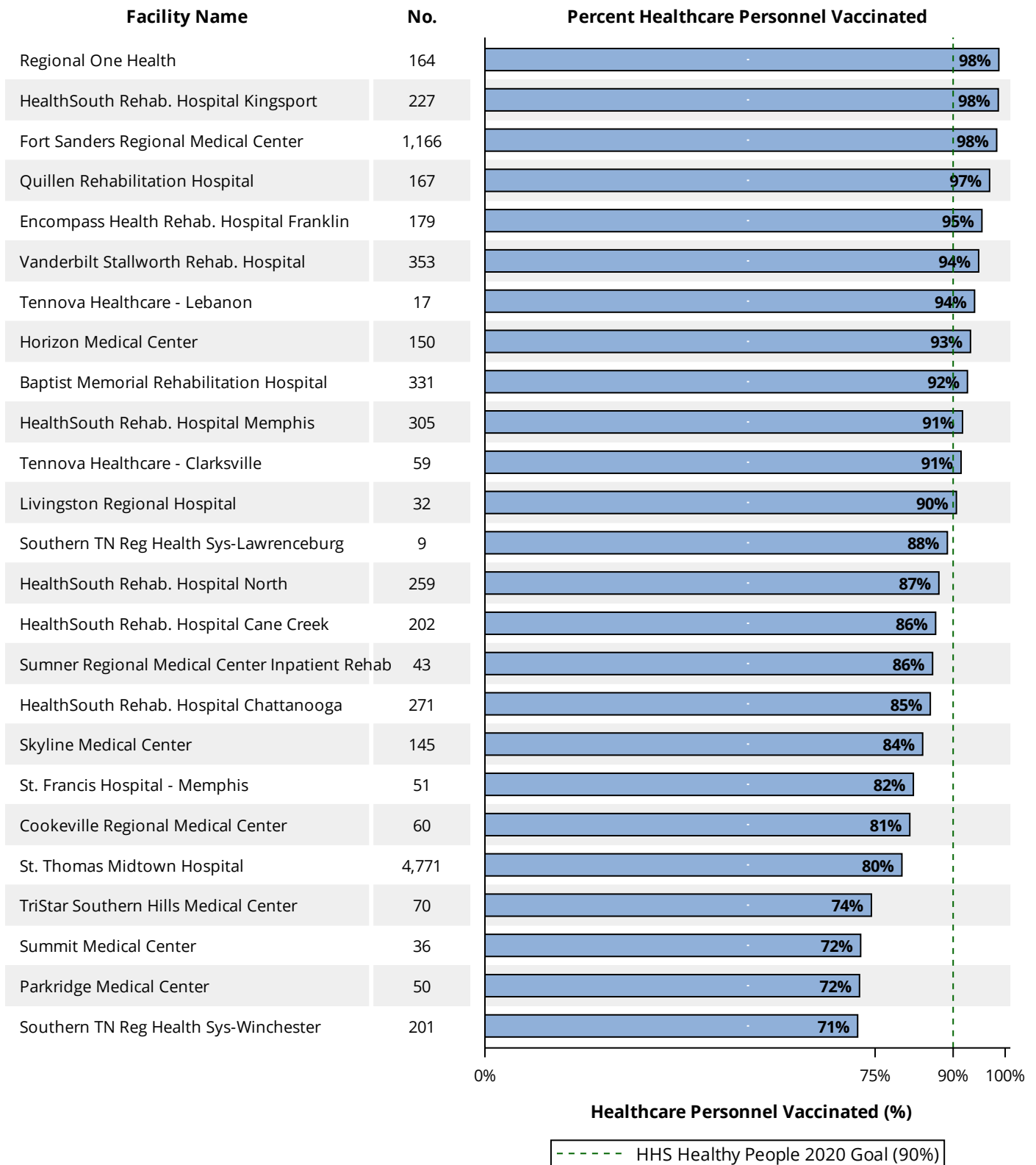
Figure 115: Healthcare Personnel Influenza Vaccination in Inpatient Rehabilitation Facilities (IRF), Tennessee, 2019/2020 Influenza Season (10/01/2019–03/31/2020)



Data Reported as of June 01, 2021

No. = total number of healthcare personnel who worked at least one day between October 1, 2019 and March 31, 2020

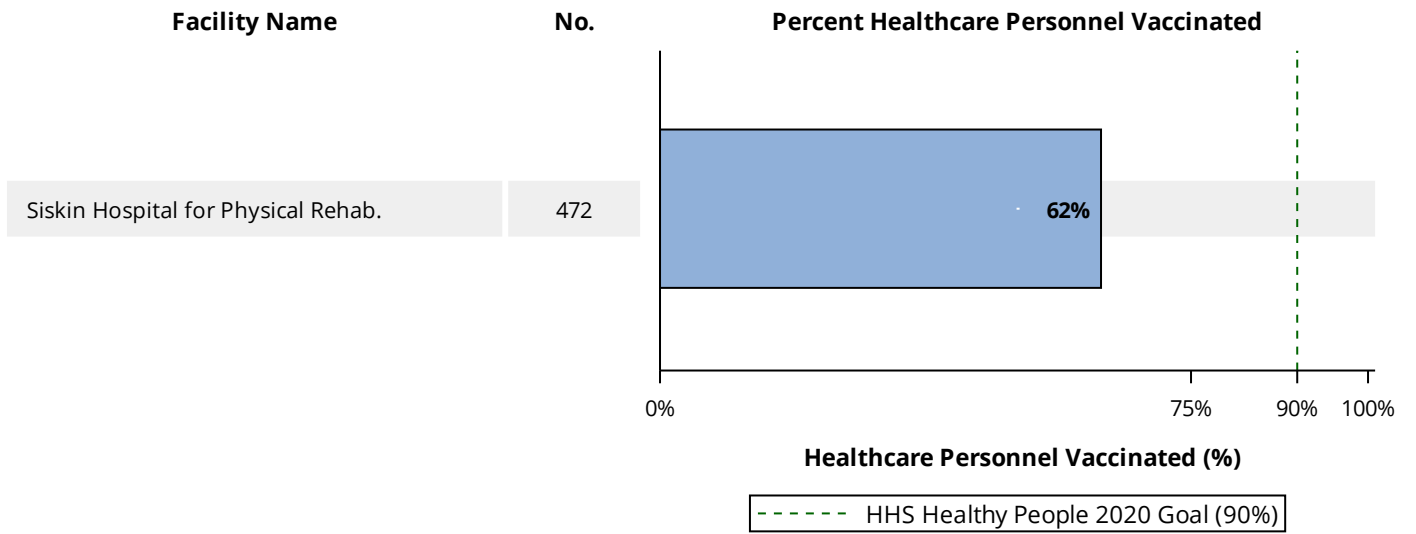
Figure 115 (cont'd)



Data Reported as of June 01, 2021

No. = total number of healthcare personnel who worked at least one day between October 1, 2020 and March 31, 2021

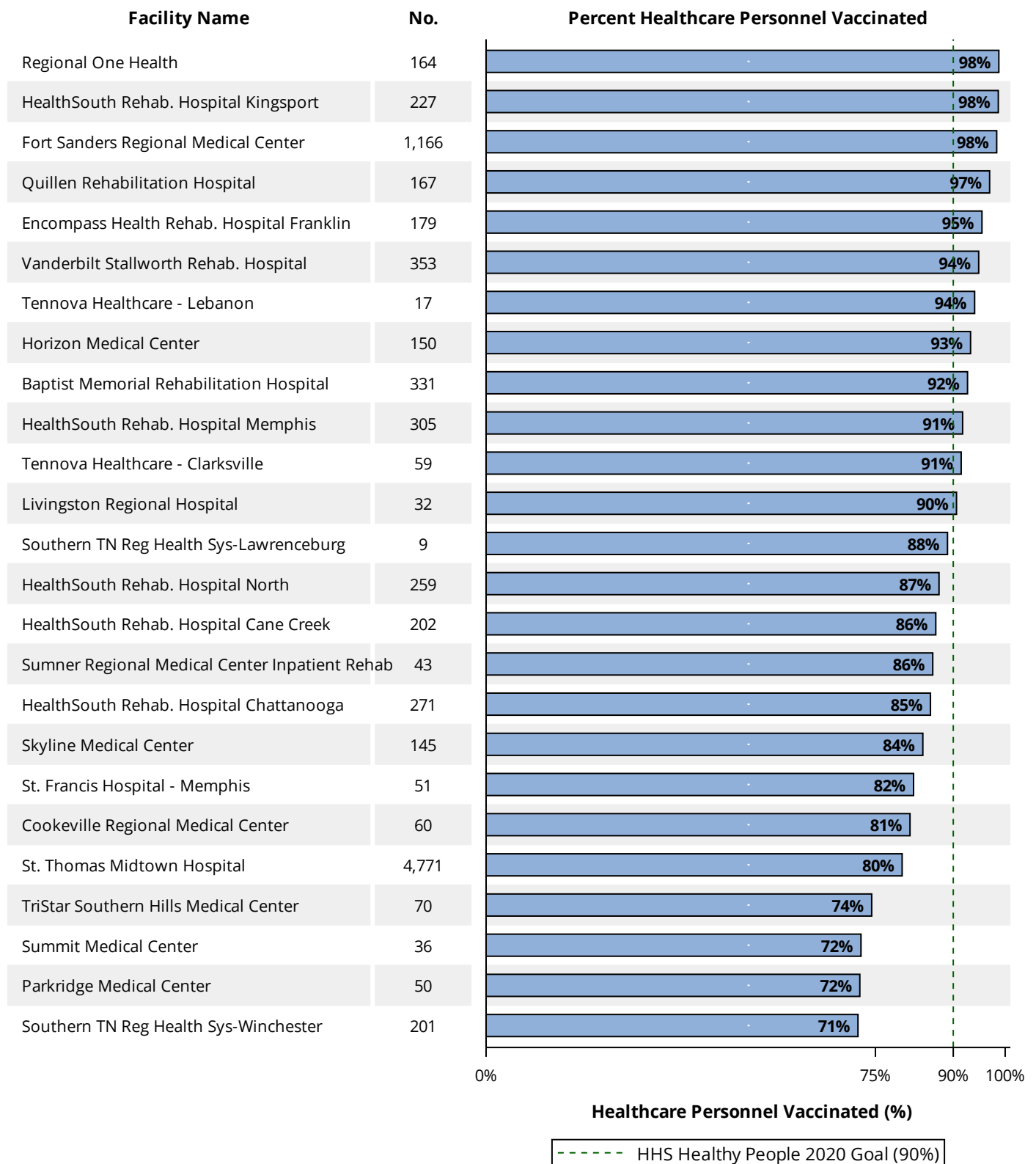
Figure 115 (cont'd)



Data Reported as of June 01, 2021

No. = total number of healthcare personnel who worked at least one day between October 1, 2020 and March 31, 2021

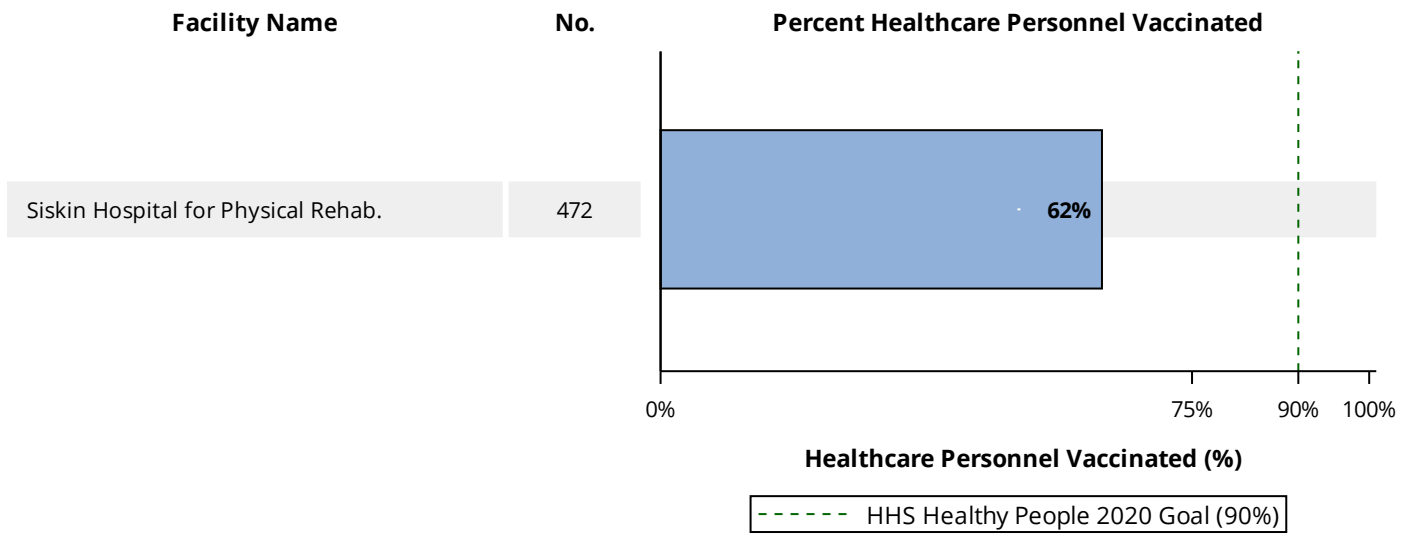
Figure 116: Healthcare Personnel Influenza Vaccination in Inpatient Rehabilitation Facilities (IRF), Tennessee, 2020/2021 Influenza Season (10/01/2020 - 03/31/2021)



Data Reported as of June 01, 2021

No. = total number of healthcare personnel who worked at least one day between October 1, 2020 and March 31, 2021

Figure 116 (cont'd)



Data Reported as of June 01, 2021

No. = total number of healthcare personnel who worked at least one day between October 1, 2020 and March 31, 2021

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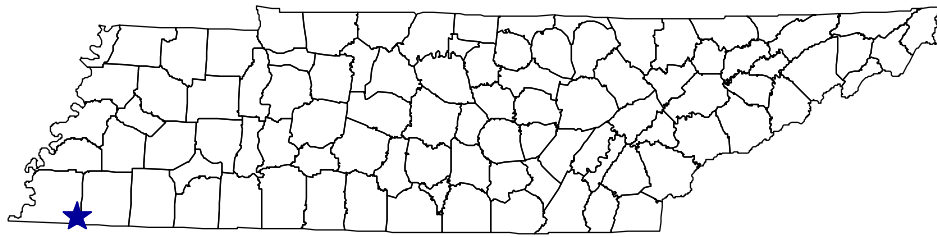
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Baptist Memorial Hospital - Collierville, Collierville, Shelby County

Medical School Affiliation: Major teaching

Bed Size Category: 50-99 beds



Healthcare-Associated Infections (HAI) Summary

Standardized Infection Ratio (SIR) by Infection Type, 01/01/2019-12/31/2019

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	586	N/A	N/A	0.72
	Adult/Pediatric Ward	0	0.8	1134	N/A	N/A	0.52
CAUTI	Adult/Pediatric ICU	0	0.7	944	N/A	N/A	0.74
	Adult/Pediatric Ward	1	0.7	1113	N/A	N/A	0.78
SSI	Colon surgery	N/A	N/A	N/A	N/A	N/A	0.94
LabID	MRSA bacteremia	0	0.6	10276	N/A	N/A	1.19
	C. difficile infection	5	6.5	10276	0.77	(0.28, 1.70)	0.47

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

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

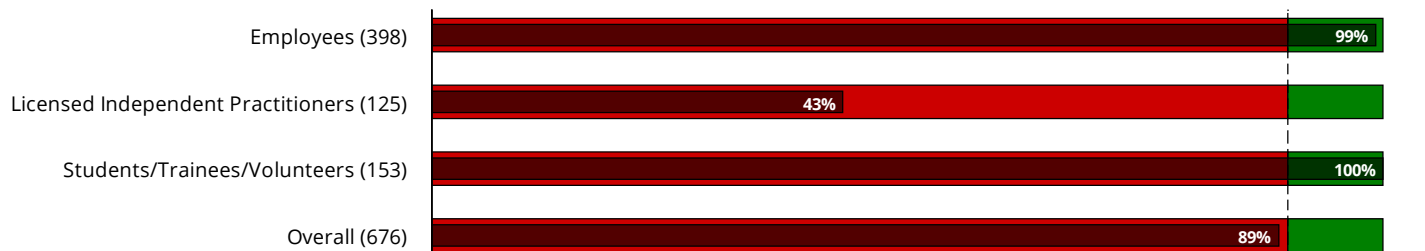
N/A: Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

*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 - '2019/2020' Influenza Season

Healthcare Personnel Category (Total)



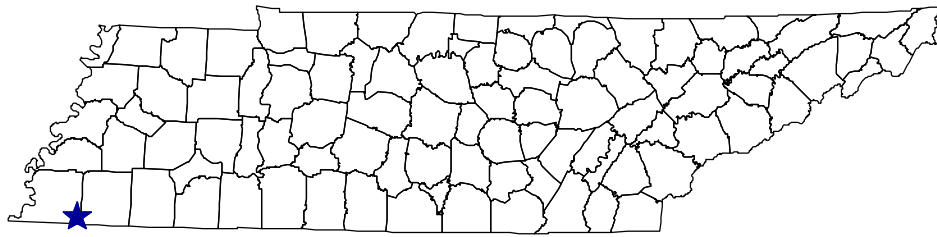
Healthcare Personnel Vaccinated (%)

■ 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, 01/01/2020-12/31/2020

HAI	Type/Unit	Infections			Standardized Infection Ratio (SIR)		
		Observed	Predicted	Device Days/Procedures Performed/Patient Days	SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	4	0.9	1136	N/A	N/A	0.91
	Adult/Pediatric Ward	0	0.6	854	N/A	N/A	0.65
CAUTI	Adult/Pediatric ICU	0	1.1	1436	0.00	(0.00, 2.57)	0.69
	Adult/Pediatric Ward	0	0.5	779	N/A	N/A	0.68
SSI	Colon surgery	0	0.4	26	N/A	N/A	0.64
LabID	MRSA bacteremia	1	0.5	12093	N/A	N/A	1.23
	C. difficile infection	9	6.8	12093	1.32	(0.64, 2.42)	0.36

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 - '2020/2021' 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
2020	1	4	0.9	1136	N/A
2019	1	0	0.5	586	N/A
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
2020	1	0	0.6	854	N/A
2019	1	0	0.8	1134	N/A
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	SIR & 95% CI
2020	1	0	1.1	1436	0.0	
2019	1	0	0.7	944	N/A	
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	

CAUTI - Adult/Pediatric Wards

YR	N	OBS	PRE	UCD	SIR
2020	1	0	0.5	779	N/A
2019	1	1	0.7	1113	N/A
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
2020	0	0.4	26	N/A
2019	N/A	N/A	N/A	N/A
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	SIR & 95% CI
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	

Healthcare Facility-Onset Laboratory Identified (LabID) Events

LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia

YR	OBS	PRE	PATD	SIR
2020	1	0.5	12093	N/A
2019	0	0.6	10276	N/A
2018	0	0.4	9232	N/A
2017	0	0.3	7342	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
2020	9	6.8	12093	1.3	
2019	5	6.5	10276	0.8	
2018	8	7.0	9232	1.1	
2017	7	5.3	7342	1.3	

Data reported as of June 30, 2021

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;

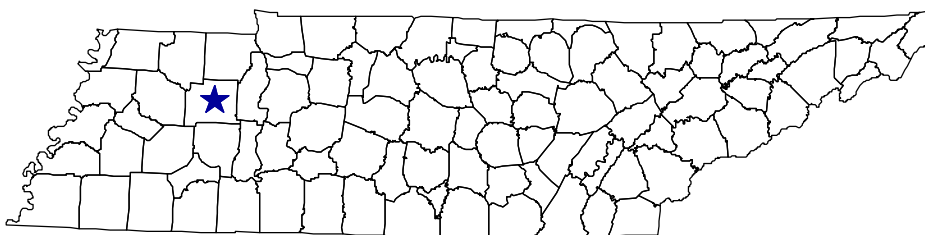
N/A = data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

- Significantly lower than NHSN SIR of 1
- Not significantly different from NHSN SIR of 1
- Significantly higher than NHSN SIR of 1
- - - 2020 TN SIR
- - - NHSN SIR=1

Baptist Memorial Hospital - Huntingdon, Huntingdon, Carroll County

Medical School Affiliation: None

Bed Size Category: <50 beds



Healthcare-Associated Infections (HAI) Summary

Standardized Infection Ratio (SIR) by Infection Type, 01/01/2019-12/31/2019

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	0.72
	Adult/Pediatric Ward	0	0.1	274	N/A	N/A	0.52
CAUTI	Adult/Pediatric ICU	0	0.0	77	N/A	N/A	0.74
	Adult/Pediatric Ward	0	0.3	812	N/A	N/A	0.78
SSI	Colon surgery	N/A	N/A	N/A	N/A	N/A	0.94
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	0.80
LabID	MRSA bacteremia	0	0.0	5571	N/A	N/A	1.19
	C. difficile infection	1	2.5	5571	0.40	(0.02, 1.95)	0.47

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 - Huntingdon

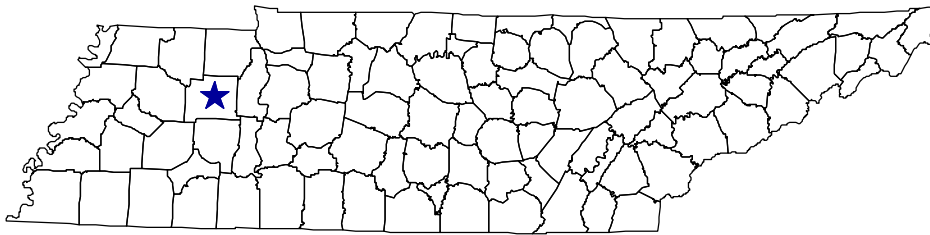
Healthcare Personnel Influenza Vaccination - '2019/2020' Influenza Season

This facility utilized the COVID-19 related CMS reporting exemption for the '2019/2020' influenza season. See the CMS website for more information.

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, 01/01/2020-12/31/2020

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	0.91
	Adult/Pediatric Ward	0	0.1	215	N/A	N/A	0.65
CAUTI	Adult/Pediatric ICU	0	0.1	251	N/A	N/A	0.69
	Adult/Pediatric Ward	0	0.3	707	N/A	N/A	0.68
SSI	Colon surgery	N/A	N/A	N/A	N/A	N/A	0.64
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	1.01
LabID	MRSA bacteremia	0	0.1	5580	N/A	N/A	1.23
	C. difficile infection	1	2.1	5580	0.47	(0.02, 2.31)	0.36

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

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

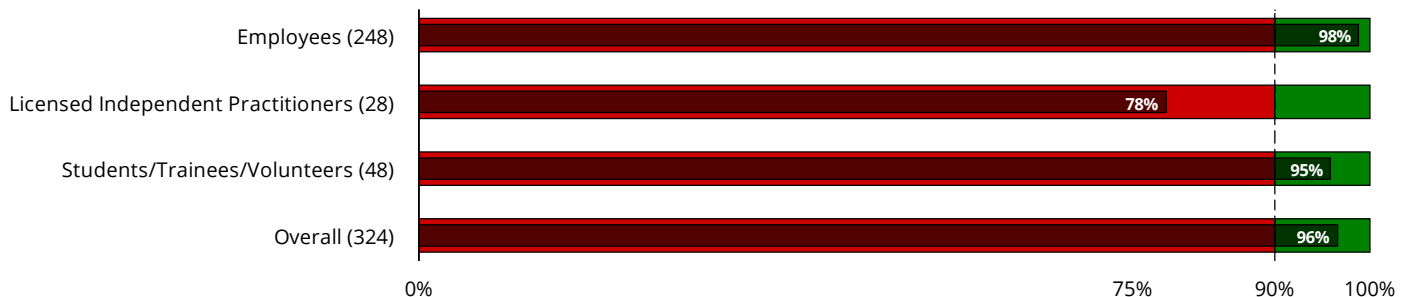
N/A: Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

*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 - '2020/2021' 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
2020	1	0	0.0	131	N/A
2019	1	N/A	N/A	N/A	N/A
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
2020	1	0	0.1	215	N/A
2019	1	0	0.1	274	N/A
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
2020	1	0	0.1	251	N/A
2019	1	0	0.0	77	N/A
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
2020	1	0	0.3	707	N/A
2019	1	0	0.3	812	N/A
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
2020	N/A	N/A	N/A	N/A
2019	N/A	N/A	N/A	N/A
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
2020	N/A	N/A	N/A	N/A
2019	N/A	N/A	N/A	N/A
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

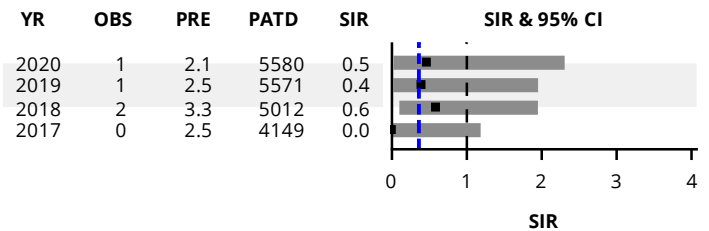
Healthcare Facility-Onset Laboratory Identified (LabID) Events

LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia

YR	OBS	PRE	PATD	SIR
2020	0	0.1	5580	N/A
2019	0	0.0	5571	N/A
2018	0	0.1	5012	N/A
2017	0	0.0	4149	N/A

N/A: Number of predicted infections <1; no SIR calculated

LabID - *C. difficile* Infection (CDI)



Data reported as of June 30, 2021

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;

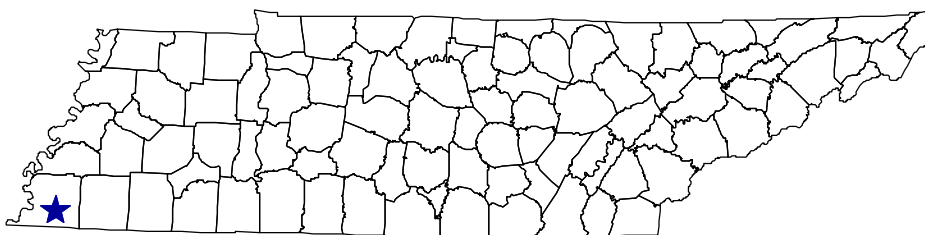
N/A = data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

- Significantly lower than NHSN SIR of 1
- Not significantly different from NHSN SIR of 1
- Significantly higher than NHSN SIR of 1
- 2020 TN SIR
- NHSN SIR=1

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, 01/01/2019-12/31/2019

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	8	12.1	10804	0.66	(0.31, 1.25)	0.72
	Adult/Pediatric Ward	2	12.2	12557	0.16	(0.03, 0.54)	0.52
CAUTI	Adult/Pediatric ICU	4	12.1	7055	0.33	(0.10, 0.79)	0.74
	Adult/Pediatric Ward	5	6.4	5435	0.78	(0.28, 1.72)	0.78
SSI	Colon surgery	7	7.7	280	0.91	(0.40, 1.80)	0.94
	Abdominal hysterectomy	1	0.9	116	N/A	N/A	0.80
LabID	MRSA bacteremia	12	15.9	189865	0.75	(0.41, 1.28)	1.19
	C. difficile infection	88	136.8	189865	0.64	(0.52, 0.79)	0.47

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

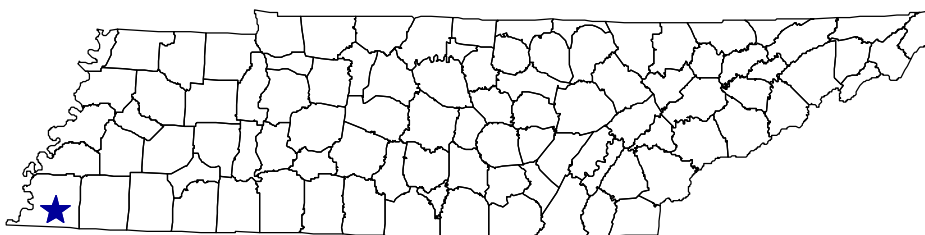
Healthcare Personnel Influenza Vaccination - '2019/2020' Influenza Season

This facility utilized the COVID-19 related CMS reporting exemption for the '2019/2020' influenza season. See the CMS website for more information.

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, 01/01/2020-12/31/2020

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	15	14.4	12782	1.04	(0.60, 1.68)	0.91
	Adult/Pediatric Ward	3	11.6	11924	0.26	(0.07, 0.70)	0.65
CAUTI	Adult/Pediatric ICU	2	14.4	8483	0.14	(0.02, 0.46)	0.69
	Adult/Pediatric Ward	2	6.2	5331	0.32	(0.05, 1.05)	0.68
SSI	Colon surgery	10	9.4	328	1.06	(0.54, 1.88)	0.64
	Abdominal hysterectomy	2	0.8	96	N/A	N/A	1.01
LabID	MRSA bacteremia	31	15.9	172449	1.94	(1.34, 2.72)	1.23
	C. difficile infection	59	88.1	172449	0.67	(0.51, 0.86)	0.36

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

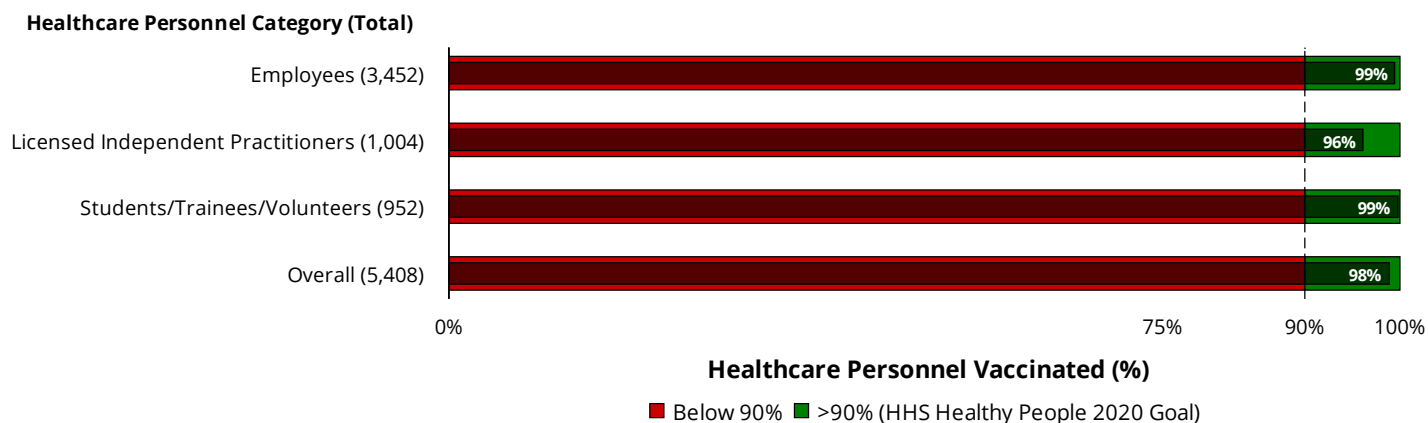
Red highlighting indicates an SIR significantly **HIGHER** than the 2015 national baseline

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)

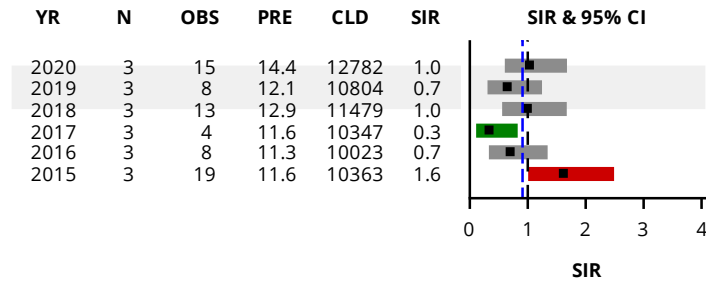
See page 3 for more detailed information about HAIs at Baptist Memorial Hospital - Memphis

Healthcare Personnel Influenza Vaccination - '2020/2021' Influenza Season

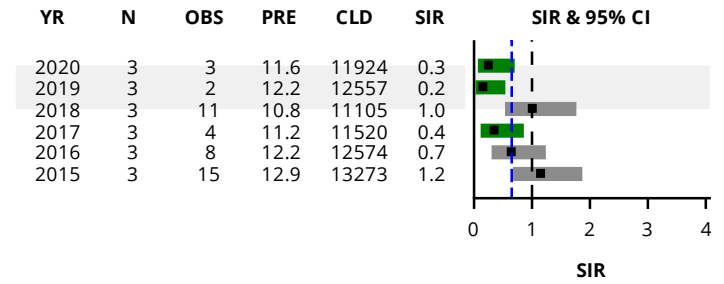


Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric ICUs

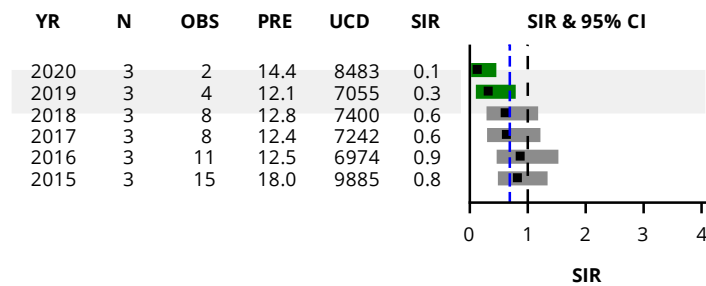


CLABSI - Adult/Pediatric Wards

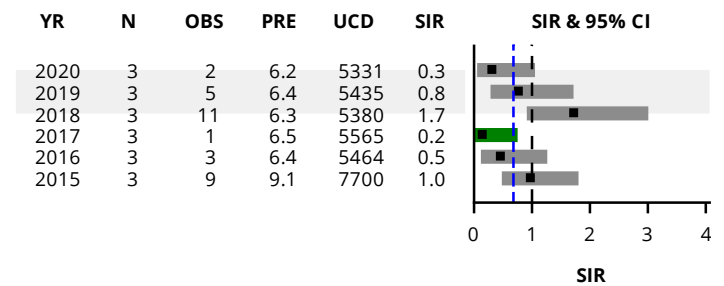


Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICUs

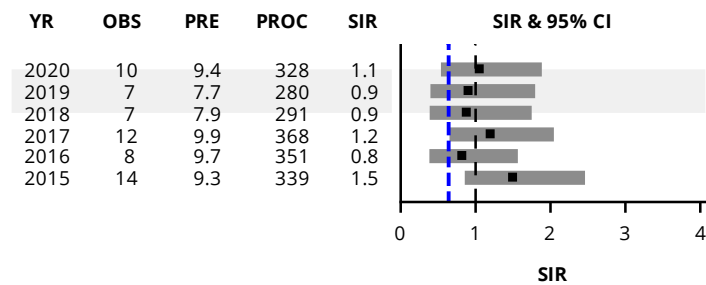


CAUTI - Adult/Pediatric Wards

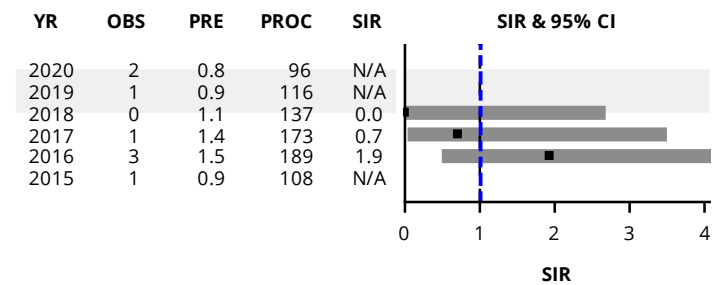


Surgical Site Infections (SSI)

SSI - Colon Surgery

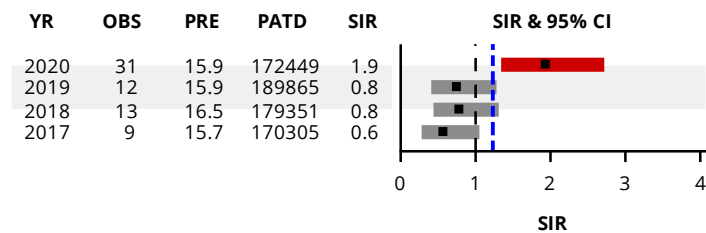


SSI - Abdominal Hysterectomy

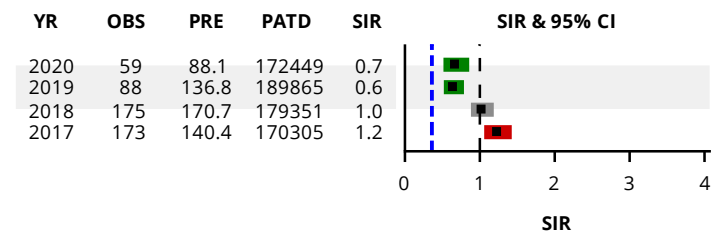


Healthcare Facility-Onset Laboratory Identified (LabID) Events

LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia



LabID - *C. difficile* Infection (CDI)



Data reported as of June 30, 2021

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

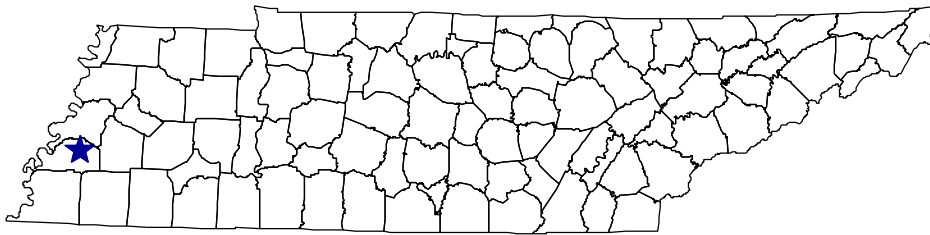
--- 2020 TN SIR

--- 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, 01/01/2019-12/31/2019

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	0.72
	Adult/Pediatric Ward	0	0.0	160	N/A	N/A	0.52
CAUTI	Adult/Pediatric ICU	N/A	N/A	N/A	N/A	N/A	0.74
	Adult/Pediatric Ward	0	0.1	270	N/A	N/A	0.78
SSI	Colon surgery	N/A	N/A	N/A	N/A	N/A	0.94
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	0.80
LabID	MRSA bacteremia	0	0.0	2493	N/A	N/A	1.19
	C. difficile infection	2	0.6	2493	N/A	N/A	0.47

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 - '2019/2020' Influenza Season

Healthcare Personnel Category (Total)



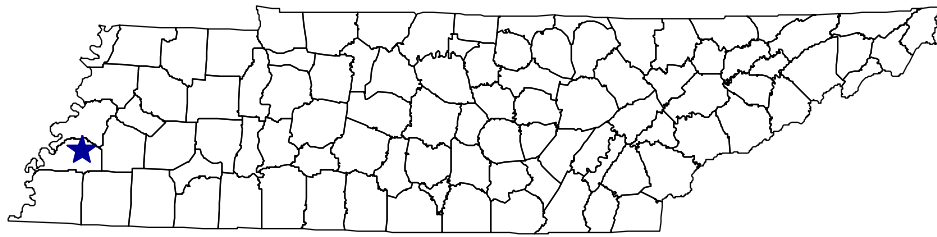
Healthcare Personnel Vaccinated (%)

■ 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, 01/01/2020-12/31/2020

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	61	N/A	N/A	0.91
	Adult/Pediatric Ward	0	0.0	102	N/A	N/A	0.65
CAUTI	Adult/Pediatric ICU	0	0.0	79	N/A	N/A	0.69
	Adult/Pediatric Ward	0	0.1	300	N/A	N/A	0.68
SSI	Colon surgery	N/A	N/A	N/A	N/A	N/A	0.64
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	1.01
LabID	MRSA bacteremia	0	0.0	2626	N/A	N/A	1.23
	C. difficile infection	0	0.6	2626	N/A	N/A	0.36

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

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

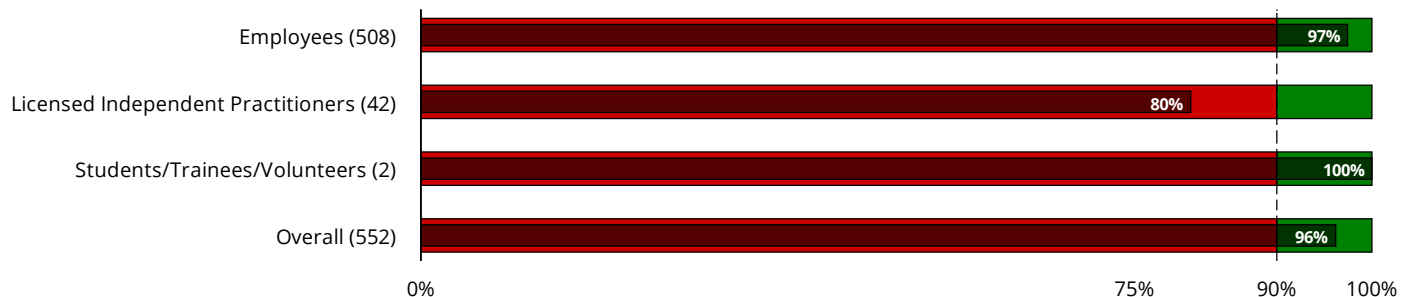
N/A: Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

*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 - '2020/2021' 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
2020	1	0	0.0	61	N/A
2019	1	N/A	N/A	N/A	N/A
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
2020	1	0	0.0	102	N/A
2019	1	0	0.0	160	N/A
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
2020	1	0	0.0	79	N/A
2019	1	N/A	N/A	N/A	N/A
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
2020	1	0	0.1	300	N/A
2019	1	0	0.1	270	N/A
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
2020	N/A	N/A	N/A	N/A
2019	N/A	N/A	N/A	N/A
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
2020	N/A	N/A	N/A	N/A
2019	N/A	N/A	N/A	N/A
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
2020	0	0.0	2626	N/A
2019	0	0.0	2493	N/A
2018	1	0.0	2701	N/A
2017	0	0.0	2928	N/A

N/A: Number of predicted infections <1; no SIR calculated

LabID - *C. difficile* Infection (CDI)

YR	OBS	PRE	PATD	SIR
2020	0	0.6	2626	N/A
2019	2	0.6	2493	N/A
2018	1	0.9	2701	N/A
2017	0	0.7	2928	N/A

N/A: Number of predicted infections <1; no SIR calculated

Data reported as of June 30, 2021

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

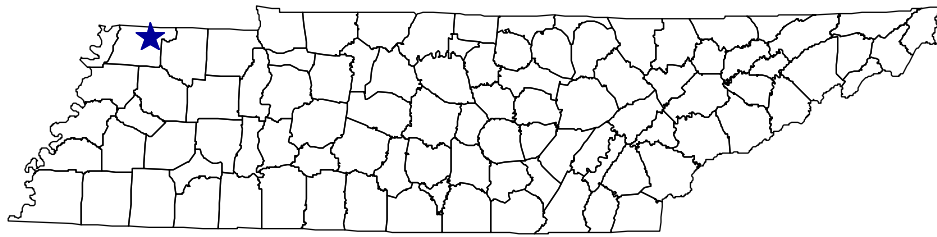
--- 2020 TN SIR

--- 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, 01/01/2019-12/31/2019

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	278	N/A	N/A	0.72
	Adult/Pediatric Ward	0	0.2	422	N/A	N/A	0.52
CAUTI	Adult/Pediatric ICU	1	0.4	796	N/A	N/A	0.74
	Adult/Pediatric Ward	1	0.7	1384	N/A	N/A	0.78
SSI	Colon surgery	N/A	N/A	N/A	N/A	N/A	0.94
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	0.80
LabID	MRSA bacteremia	0	0.3	10417	N/A	N/A	1.19
	C. difficile infection	1	4.6	9676	0.22	(0.01, 1.07)	0.47

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

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

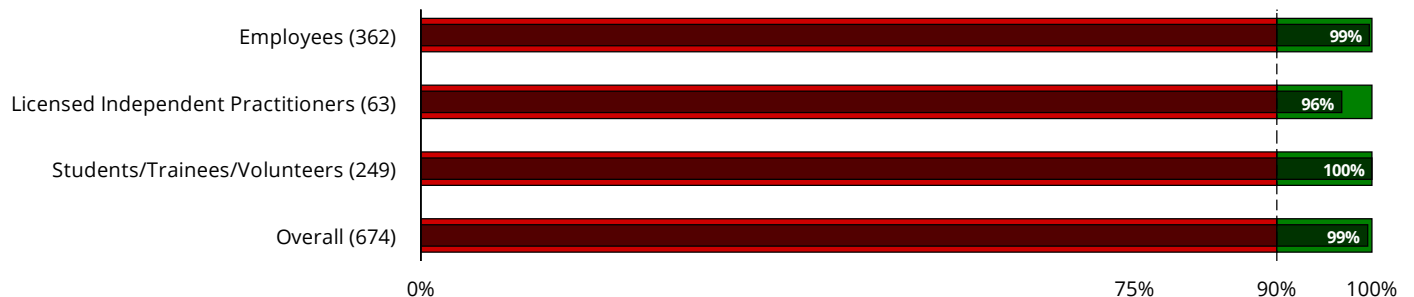
N/A: Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

*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 - '2019/2020' Influenza Season

Healthcare Personnel Category (Total)



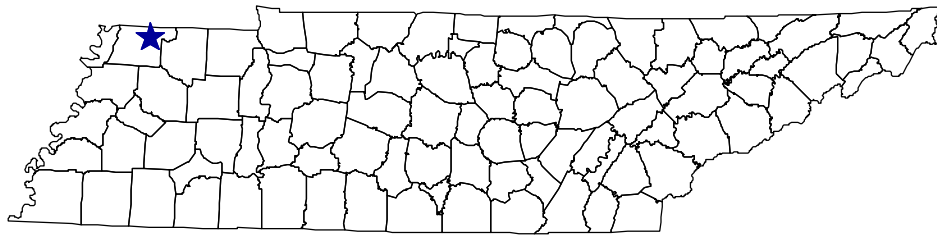
Healthcare Personnel Vaccinated (%)

■ 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, 01/01/2020-12/31/2020

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	293	N/A	N/A	0.91
	Adult/Pediatric Ward	0	0.2	396	N/A	N/A	0.65
CAUTI	Adult/Pediatric ICU	0	0.4	743	N/A	N/A	0.69
	Adult/Pediatric Ward	0	0.6	1240	N/A	N/A	0.68
SSI	Colon surgery	N/A	N/A	N/A	N/A	N/A	0.64
	Abdominal hysterectomy	0	0.3	62	N/A	N/A	1.01
LabID	MRSA bacteremia	1	0.3	10516	N/A	N/A	1.23
	C. difficile infection	0	4.0	9689	0.00	(0.00, 0.73)	0.36

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 - '2020/2021' 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
2020	1	1	0.1	293	N/A
2019	1	0	0.1	278	N/A
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	182	N/A

N/A: Number of predicted infections <1; no SIR calculated

CLABSI - Adult/Pediatric Wards

YR	N	OBS	PRE	CLD	SIR
2020	1	0	0.2	396	N/A
2019	1	0	0.2	422	N/A
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
2020	1	0	0.4	743	N/A
2019	1	1	0.4	796	N/A
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
2020	1	0	0.6	1240	N/A
2019	1	1	0.7	1384	N/A
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
2020	N/A	N/A	N/A	N/A
2019	N/A	N/A	N/A	N/A
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
2020	0	0.3	62	N/A
2019	N/A	N/A	N/A	N/A
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
2020	1	0.3	10516	N/A
2019	0	0.3	10417	N/A
2018	0	0.3	9845	N/A
2017	0	0.3	10015	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
2020	0	4.0	9689	0.0	
2019	1	4.6	9676	0.2	
2018	2	6.2	9275	0.3	
2017	1	5.4	9421	0.2	

Data reported as of June 30, 2021

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;

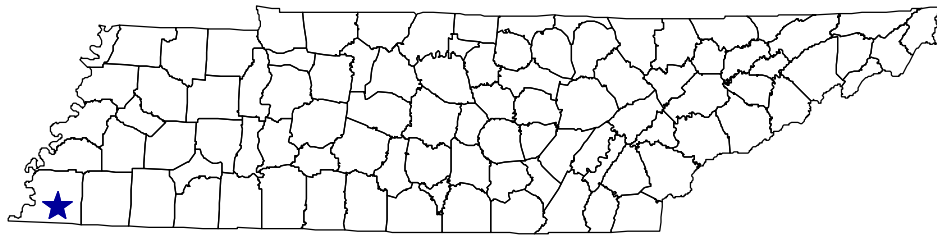
N/A = data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

- Significantly lower than NHSN SIR of 1
- Not significantly different from NHSN SIR of 1
- Significantly higher than NHSN SIR of 1
- - - 2020 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, 01/01/2019-12/31/2019

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		TN SIR
		Observed	Predicted		SIR*	95% CI	
CLABSI	Neonatal ICU	6	5.5	3710	1.09	(0.44, 2.26)	0.44
	Adult/Pediatric Ward	0	0.2	261	N/A	N/A	0.52
CAUTI	Adult/Pediatric Ward	1	0.0	53	N/A	N/A	0.78
SSI	Colon surgery	N/A	N/A	N/A	N/A	N/A	0.94
	Abdominal hysterectomy	2	2.6	503	0.76	(0.13, 2.50)	0.80
LabID	MRSA bacteremia	2	0.9	45104	N/A	N/A	1.19
	C. difficile infection	0	5.4	19706	0.00	(0.00, 0.55)	0.47

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 - '2019/2020' Influenza Season

Healthcare Personnel Category (Total)



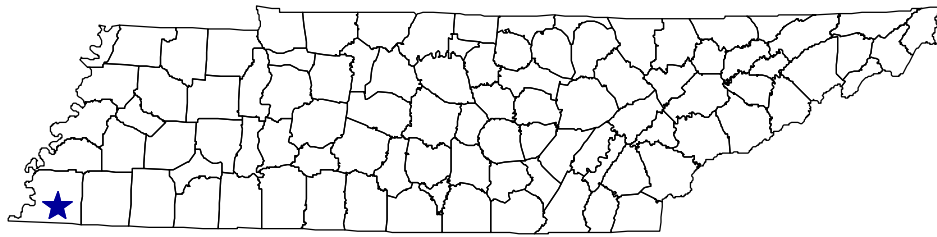
Healthcare Personnel Vaccinated (%)

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

Baptist Memorial Hospital for Women, Memphis, Shelby County

Medical School Affiliation: Major teaching

Bed Size Category: 100-399 beds



Healthcare-Associated Infections (HAI) Summary

Standardized Infection Ratio (SIR) by Infection Type, 01/01/2020-12/31/2020

HAI	Type/Unit	Infections		Device Days/Procedures Performed/Patient Days	Standardized Infection Ratio (SIR)		TN SIR
		Observed	Predicted		SIR*	95% CI	
CLABSI	Neonatal ICU	9	5.8	3966	1.54	(0.75, 2.83)	0.62
	Adult/Pediatric Ward	0	0.3	364	N/A	N/A	0.65
CAUTI	Adult/Pediatric Ward	N/A	N/A	N/A	N/A	N/A	0.68
SSI	Colon surgery	N/A	N/A	N/A	N/A	N/A	0.64
	Abdominal hysterectomy	2	2.7	524	0.73	(0.12, 2.40)	1.01
LabID	MRSA bacteremia	1	1.0	44707	0.95	(0.05, 4.69)	1.23
	C. difficile infection	0	5.1	18824	0.00	(0.00, 0.58)	0.36

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 - '2020/2021' Influenza Season

Healthcare Personnel Category (Total)

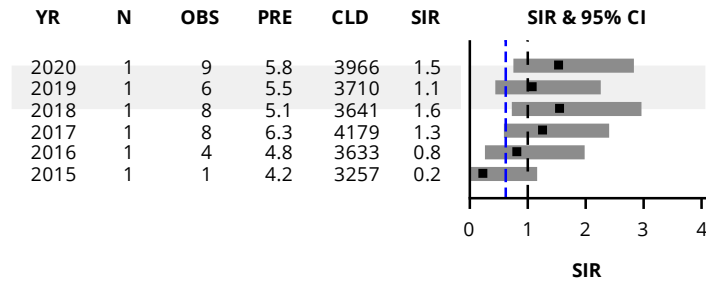


Healthcare Personnel Vaccinated (%)

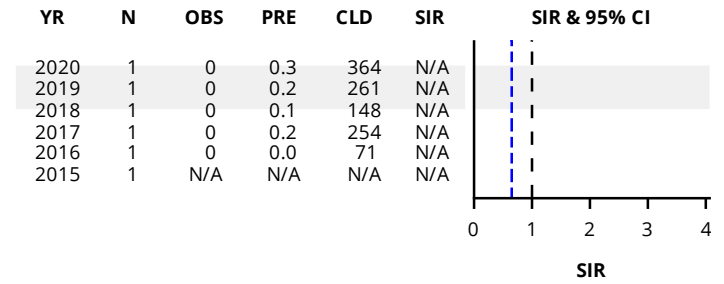
■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

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
2020	1	N/A	N/A	N/A	N/A
2019	1	1	0.0	53	N/A
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

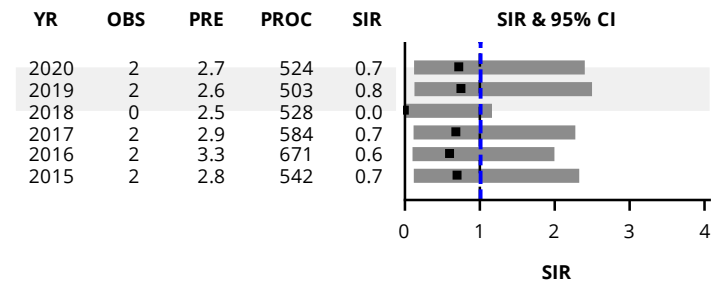
N/A: Number of predicted infections <1; no SIR calculated

Surgical Site Infections (SSI)

SSI - Colon Surgery

YR	OBS	PRE	PROC	SIR
2020	N/A	N/A	N/A	N/A
2019	N/A	N/A	N/A	N/A
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

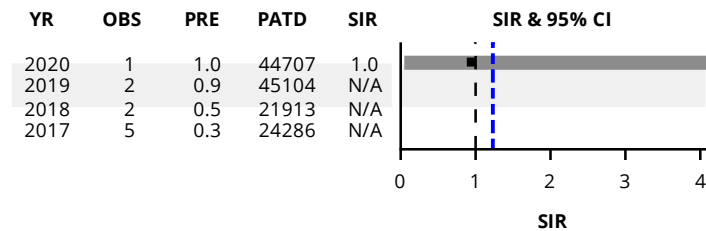
SSI - Abdominal Hysterectomy



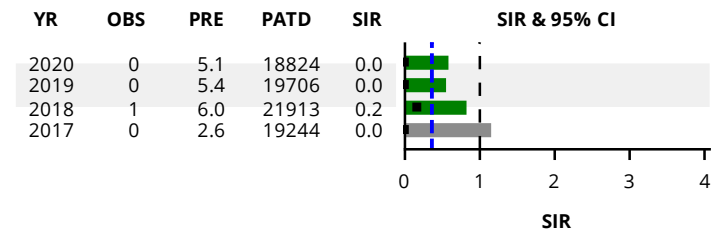
N/A: Number of predicted infections <1; no SIR calculated

Healthcare Facility-Onset Laboratory Identified (LabID) Events

LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia



LabID - *C. difficile* Infection (CDI)



Data reported as of June 30, 2021

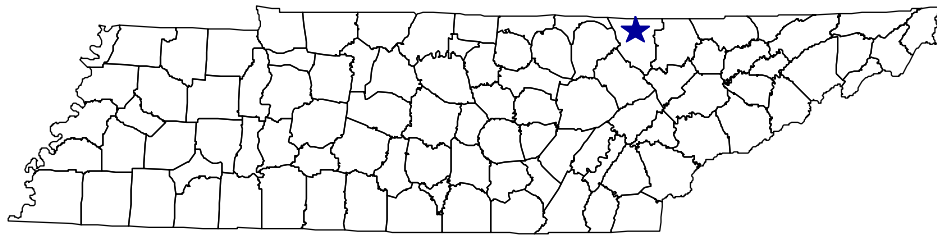
YR = reporting year; N = number of units reporting (CLABSI/CAUTI); OBS = observed number of infections
 PRE = statistically 'predicted' number of infections, based on NHSN national baseline data
 SIR = standardized infection ratio (observed/predicted number of infections)
 CLD = central line days; UCD = 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
 - - - 2020 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, 01/01/2019-12/31/2019

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	0.52
CAUTI	Adult/Pediatric Ward	0	0.1	247	N/A	N/A	0.78
LabID	MRSA bacteremia	0	0.0	1859	N/A	N/A	1.19
	C. difficile infection	1	0.5	1859	N/A	N/A	0.47

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

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

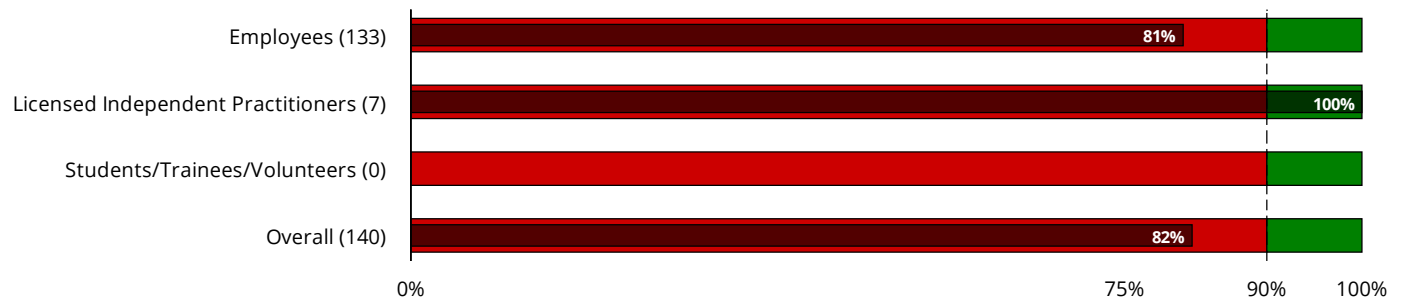
N/A: Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

*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 - '2019/2020' Influenza Season

Healthcare Personnel Category (Total)



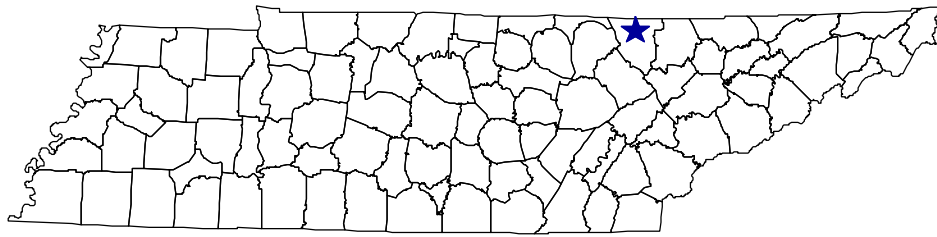
Healthcare Personnel Vaccinated (%)

■ 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, 01/01/2020-12/31/2020

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	0.65
CAUTI	Adult/Pediatric Ward	N/A	N/A	N/A	N/A	N/A	0.68
LabID	MRSA bacteremia	0	0.0	560	N/A	N/A	1.23
	C. difficile infection	0	0.1	560	N/A	N/A	0.36

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

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

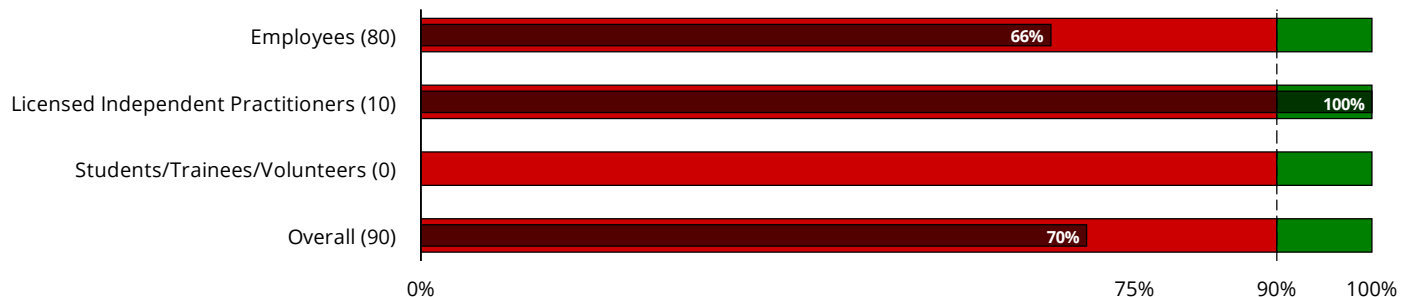
N/A: Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

*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 - '2020/2021' 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
2020	1	N/A	N/A	N/A	N/A
2019	1	N/A	N/A	N/A	N/A
2018	1	0	0.0	118	N/A
2017	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
2020	1	N/A	N/A	N/A	N/A
2019	1	0	0.1	247	N/A
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
2020	0	0.0	560	N/A
2019	0	0.0	1859	N/A
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
2020	0	0.1	560	N/A
2019	1	0.5	1859	N/A
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 June 30, 2021

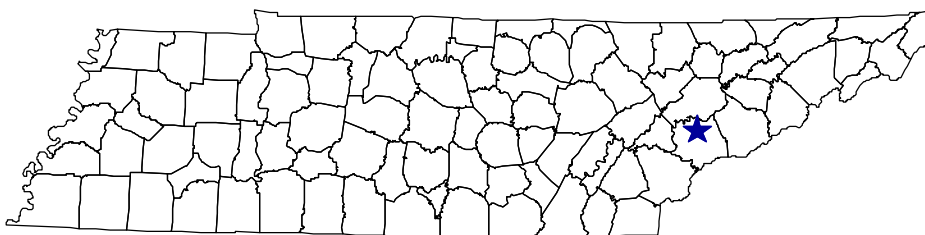
YR = reporting year; **N** = number of units reporting (CLABSI/CAUTI); **OBS** = observed number of infections
PRE = statistically 'predicted' number of infections, based on NHSN national baseline data
SIR = standardized infection ratio (observed/predicted number of infections)
CLD = central line days; **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
- 2020 TN SIR
- NHSN SIR=1

Blount Memorial Hospital, Maryville, Blount County

Medical School Affiliation: Undergraduate teaching

Bed Size Category: 100-399 beds



Healthcare-Associated Infections (HAI) Summary

Standardized Infection Ratio (SIR) by Infection Type, 01/01/2019-12/31/2019

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	1.5	2020	0.00	(0.00, 1.97)	0.72
	Adult/Pediatric Ward	4	3.7	5810	1.06	(0.34, 2.55)	0.52
CAUTI	Adult/Pediatric ICU	0	2.2	2478	0.00	(0.00, 1.35)	0.74
	Adult/Pediatric Ward	3	4.0	4999	0.75	(0.19, 2.04)	0.78
SSI	Colon surgery	1	3.0	131	0.33	(0.02, 1.61)	0.94
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	0.80
LabID	MRSA bacteremia	6	2.1	48739	2.73	(1.11, 5.68)	1.19
	C. difficile infection	12	21.2	47653	0.56	(0.31, 0.96)	0.47

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

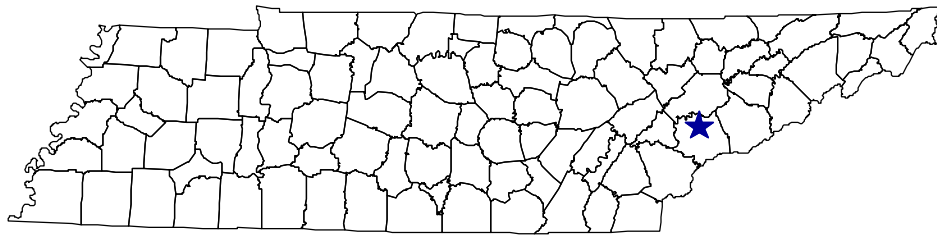
Healthcare Personnel Influenza Vaccination - '2019/2020' Influenza Season

This facility utilized the COVID-19 related CMS reporting exemption for the '2019/2020' influenza season. See the CMS website for more information.

Blount Memorial Hospital, Maryville, Blount County

Medical School Affiliation: Undergraduate teaching

Bed Size Category: 100-399 beds



Healthcare-Associated Infections (HAI) Summary

Standardized Infection Ratio (SIR) by Infection Type, 01/01/2020-12/31/2020

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	1665	0.00	(0.00, 2.39)	0.91
	Adult/Pediatric Ward	3	3.1	4854	0.95	(0.24, 2.58)	0.65
CAUTI	Adult/Pediatric ICU	2	1.6	1883	1.19	(0.20, 3.92)	0.69
	Adult/Pediatric Ward	3	3.2	4029	0.93	(0.24, 2.53)	0.68
SSI	Colon surgery	2	3.0	144	0.66	(0.11, 2.18)	0.64
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	1.01
LabID	MRSA bacteremia	4	2.2	43390	1.76	(0.56, 4.25)	1.23
	C. difficile infection	6	17.6	42258	0.34	(0.14, 0.71)	0.36

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

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

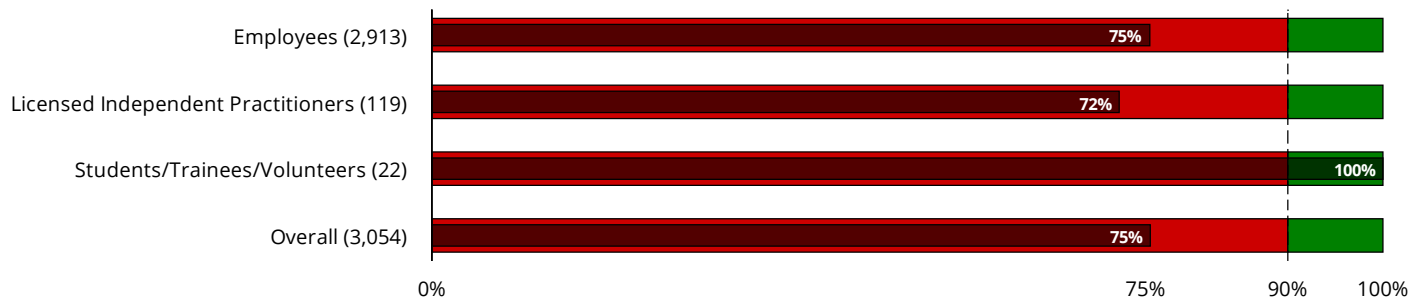
N/A: Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

*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 - '2020/2021' Influenza Season

Healthcare Personnel Category (Total)

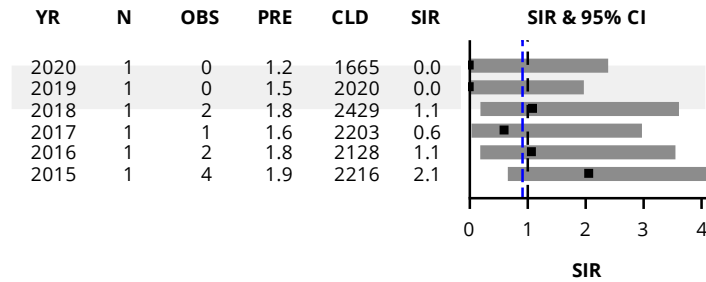


Healthcare Personnel Vaccinated (%)

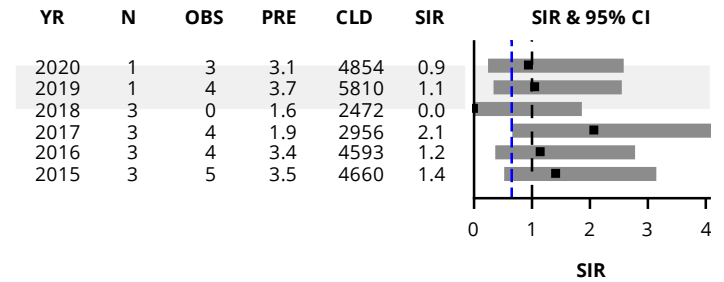
Below 90% >90% (HHS Healthy People 2020 Goal)

Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric ICUs

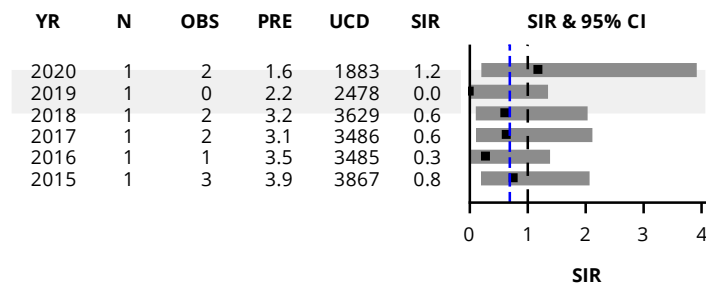


CLABSI - Adult/Pediatric Wards

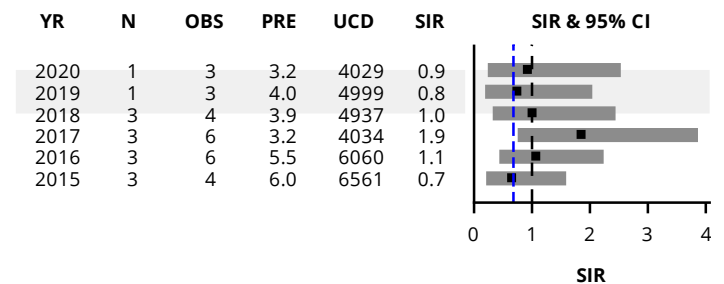


Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICUs

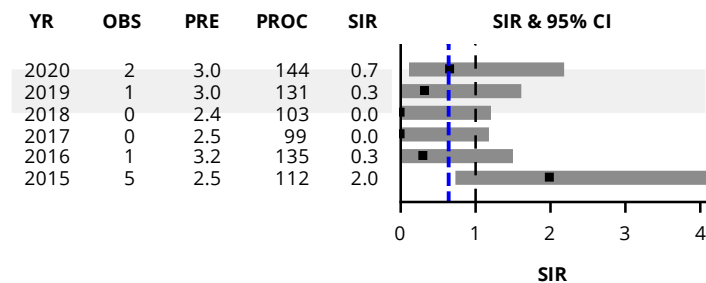


CAUTI - Adult/Pediatric Wards

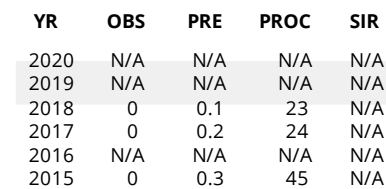


Surgical Site Infections (SSI)

SSI - Colon Surgery



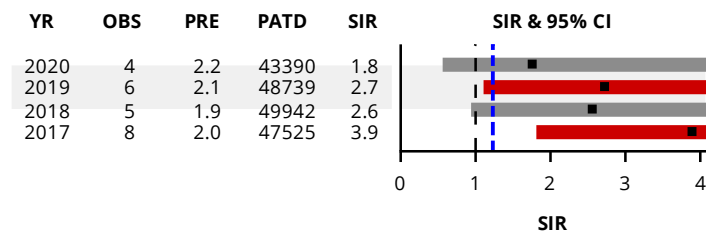
SSI - Abdominal Hysterectomy



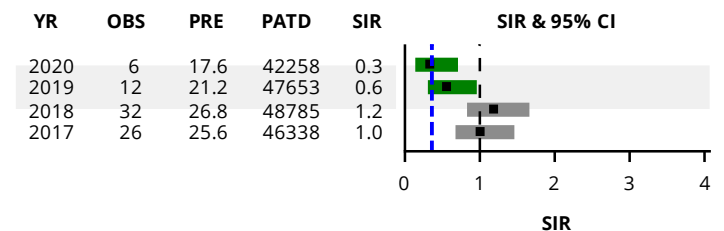
N/A: Number of predicted infections <1; no SIR calculated

Healthcare Facility-Onset Laboratory Identified (LabID) Events

LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia



LabID - *C. difficile* Infection (CDI)



Data reported as of June 30, 2021

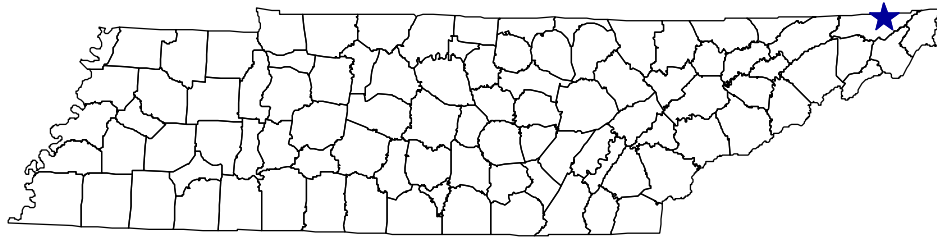
YR = reporting year; N = number of units reporting (CLABSI/CAUTI); OBS = observed number of infections
 PRE = statistically 'predicted' number of infections, based on NHSN national baseline data
 SIR = standardized infection ratio (observed/predicted number of infections)
 CLD = central line days; UCD = 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
 - - - 2020 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, 01/01/2019-12/31/2019

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	4.3	3822	0.46	(0.08, 1.53)	0.72
	Adult/Pediatric Ward	2	5.8	6016	0.34	(0.06, 1.13)	0.52
CAUTI	Adult/Pediatric ICU	9	8.2	6301	1.10	(0.54, 2.01)	0.74
	Adult/Pediatric Ward	4	7.3	6287	0.55	(0.17, 1.32)	0.78
SSI	Colon surgery	1	3.9	180	0.25	(0.01, 1.24)	0.94
	Abdominal hysterectomy	0	0.6	105	N/A	N/A	0.80
LabID	MRSA bacteremia	5	5.2	76434	0.96	(0.35, 2.12)	1.19
	C. difficile infection	27	40.9	75691	0.66	(0.44, 0.95)	0.47

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

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

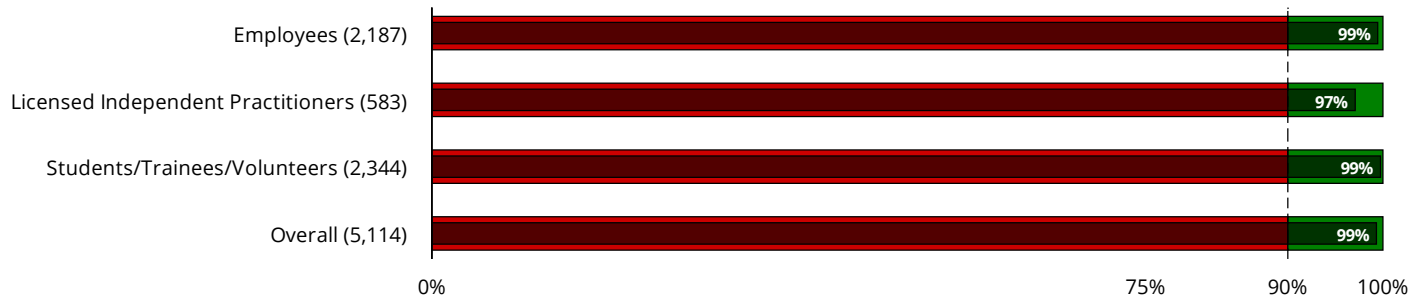
N/A: Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

*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 - '2019/2020' Influenza Season

Healthcare Personnel Category (Total)



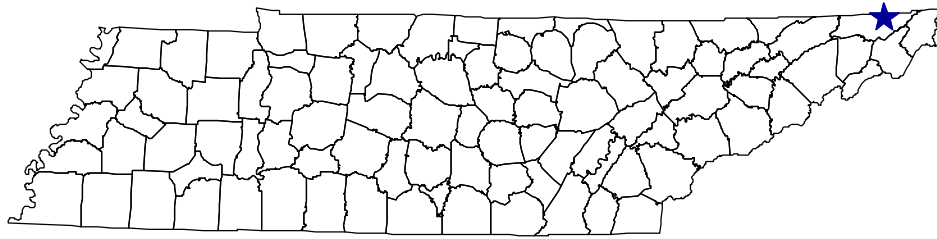
Healthcare Personnel Vaccinated (%)

■ 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, 01/01/2020-12/31/2020

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	3.7	3297	1.61	(0.65, 3.36)	0.91
	Adult/Pediatric Ward	2	3.9	4063	0.51	(0.09, 1.67)	0.65
CAUTI	Adult/Pediatric ICU	10	7.1	5495	1.40	(0.71, 2.49)	0.69
	Adult/Pediatric Ward	3	7.0	6039	0.43	(0.11, 1.16)	0.68
SSI	Colon surgery	0	3.1	137	0.00	(0.00, 0.96)	0.64
	Abdominal hysterectomy	0	0.4	64	N/A	N/A	1.01
LabID	MRSA bacteremia	6	4.0	60160	1.48	(0.60, 3.08)	1.23
	C. difficile infection	13	26.4	60160	0.49	(0.27, 0.82)	0.36

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

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

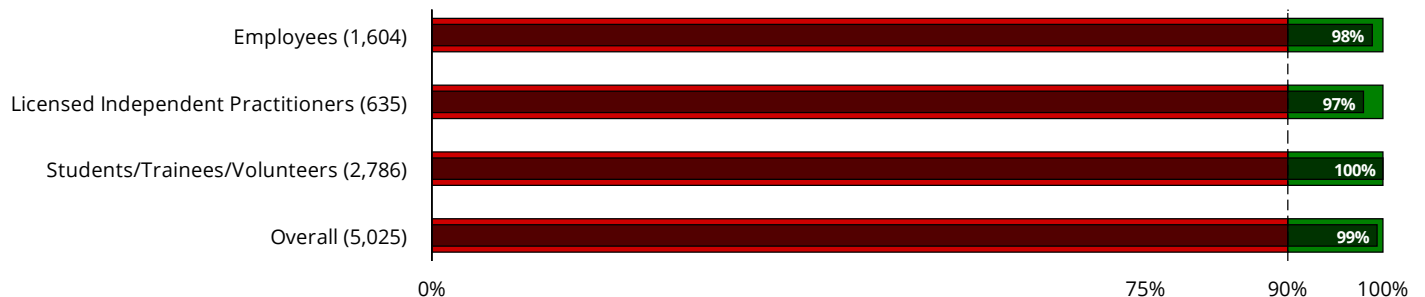
N/A: Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

*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 - '2020/2021' Influenza Season

Healthcare Personnel Category (Total)

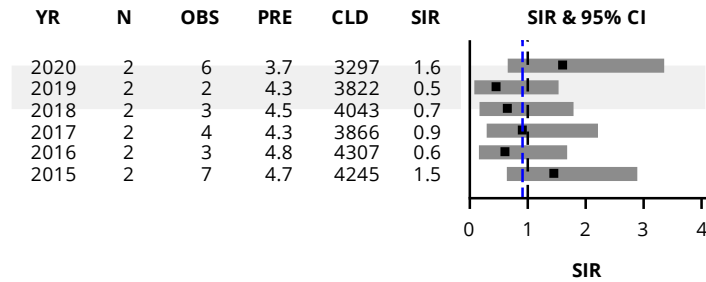


Healthcare Personnel Vaccinated (%)

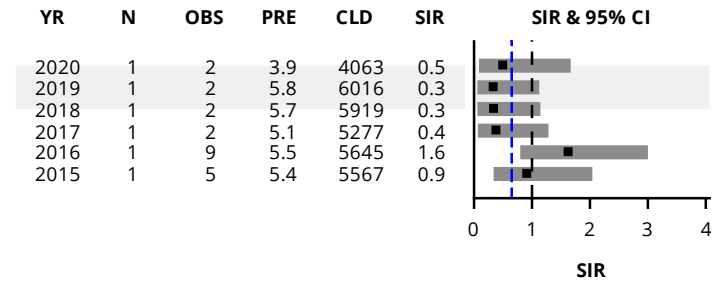
Below 90% >90% (HHS Healthy People 2020 Goal)

Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric ICUs

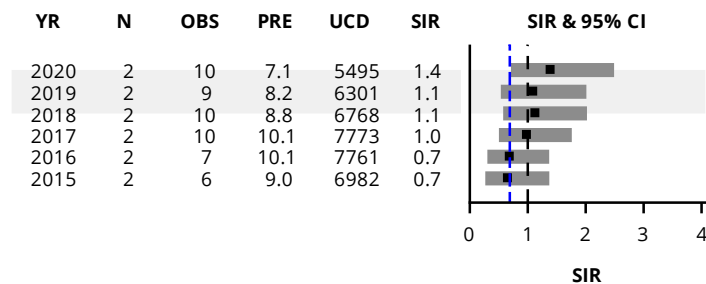


CLABSI - Adult/Pediatric Wards

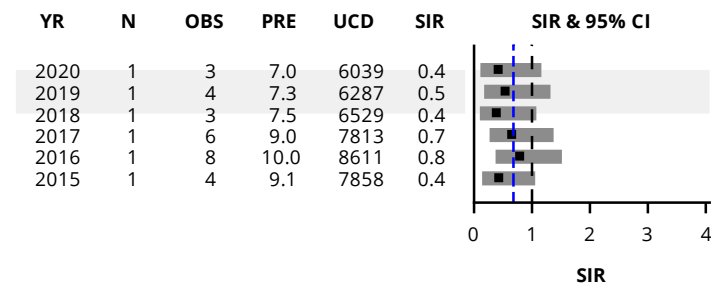


Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICUs

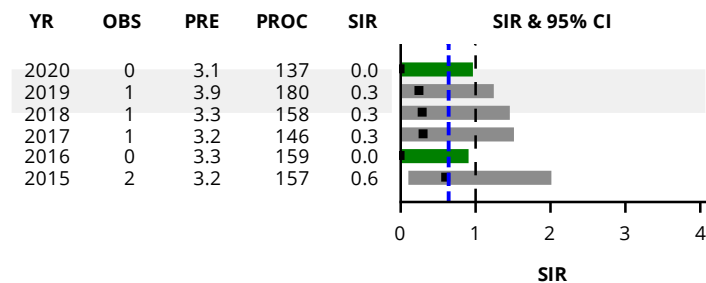


CAUTI - Adult/Pediatric Wards

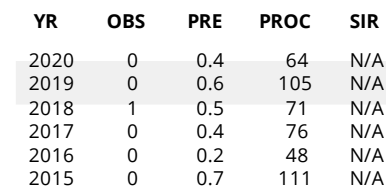


Surgical Site Infections (SSI)

SSI - Colon Surgery



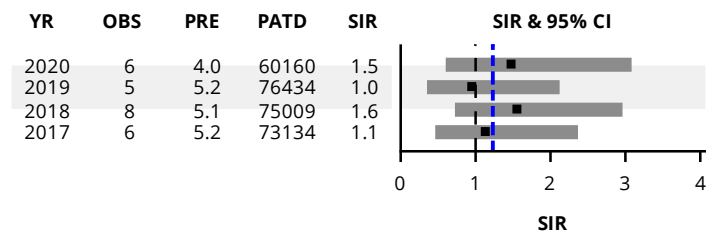
SSI - Abdominal Hysterectomy



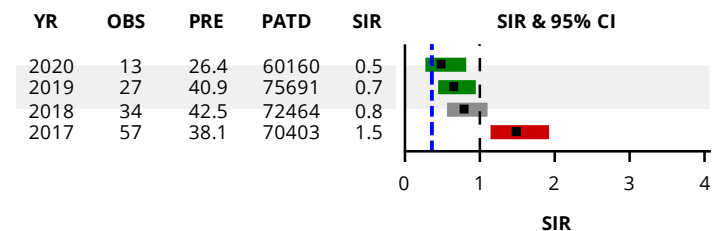
N/A: Number of predicted infections <1; no SIR calculated

Healthcare Facility-Onset Laboratory Identified (LabID) Events

LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia



LabID - *C. difficile* Infection (CDI)



Data reported as of June 30, 2021

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;

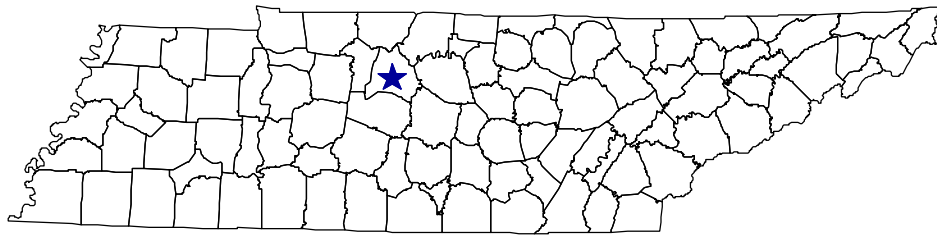
N/A = data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

- Significantly lower than NHSN SIR of 1
- Not significantly different from NHSN SIR of 1
- Significantly higher than NHSN SIR of 1
- - - 2020 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, 01/01/2019-12/31/2019

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	8	10.8	10652	0.74	(0.34, 1.41)	0.72
	Neonatal ICU	1	5.1	3690	0.20	(0.01, 0.97)	0.44
	Adult/Pediatric Ward	3	4.2	4928	0.70	(0.18, 1.90)	0.52
CAUTI	Adult/Pediatric ICU	6	11.1	8686	0.54	(0.22, 1.12)	0.74
	Adult/Pediatric Ward	4	3.4	3617	1.17	(0.37, 2.82)	0.78
SSI	Colon surgery	15	9.5	365	1.56	(0.91, 2.52)	0.94
	Abdominal hysterectomy	7	6.7	1272	1.04	(0.45, 2.05)	0.80
LabID	MRSA bacteremia	18	14.0	148782	1.28	(0.78, 1.99)	1.19
	C. difficile infection	9	63.9	125098	0.14	(0.07, 0.26)	0.47

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

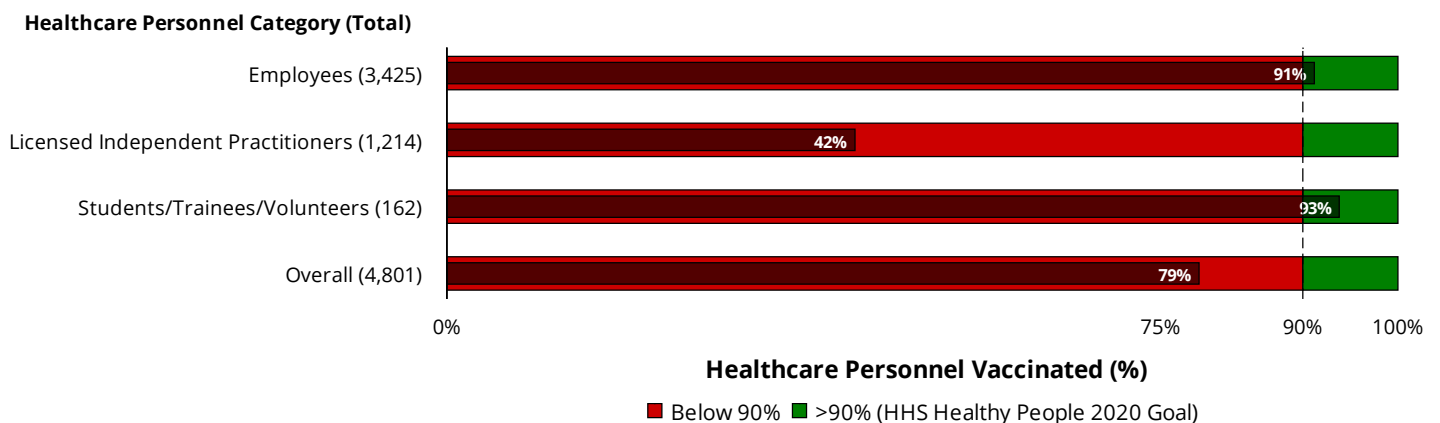
Red highlighting indicates an SIR significantly **HIGHER** than the 2015 national baseline

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

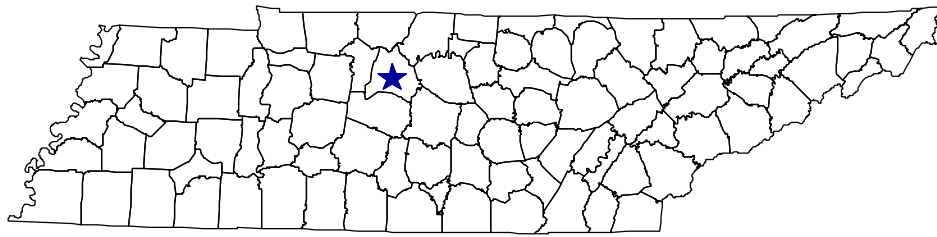
Healthcare Personnel Influenza Vaccination - '2019/2020' Influenza Season



Centennial 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, 01/01/2020-12/31/2020

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	11.3	9981	0.62	(0.27, 1.22)	0.91
	Neonatal ICU	1	4.5	3303	0.22	(0.01, 1.08)	0.62
	Adult/Pediatric Ward	9	7.7	7924	1.16	(0.57, 2.14)	0.65
CAUTI	Adult/Pediatric ICU	2	12.1	7336	0.16	(0.03, 0.54)	0.69
	Adult/Pediatric Ward	0	4.3	3516	0.00	(0.00, 0.70)	0.68
SSI	Colon surgery	4	8.3	333	0.48	(0.15, 1.16)	0.64
	Abdominal hysterectomy	4	5.0	874	0.79	(0.25, 1.92)	1.01
LabID	MRSA bacteremia	13	15.6	143611	0.83	(0.46, 1.39)	1.23
	C. difficile infection	3	79.9	120184	0.04	(0.01, 0.10)	0.36

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

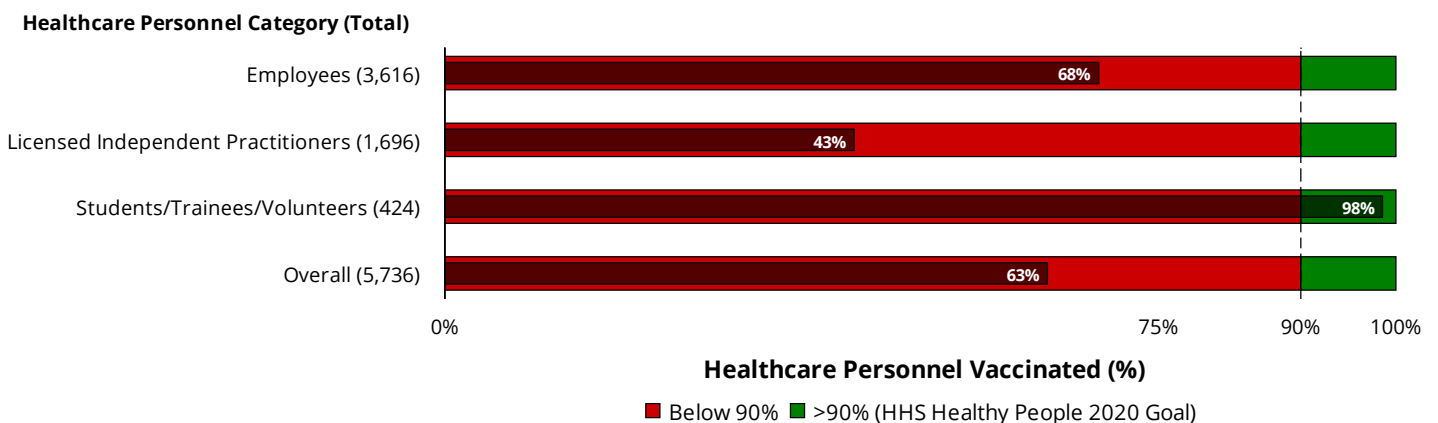
Red highlighting indicates an SIR significantly **HIGHER** than the 2015 national baseline

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)

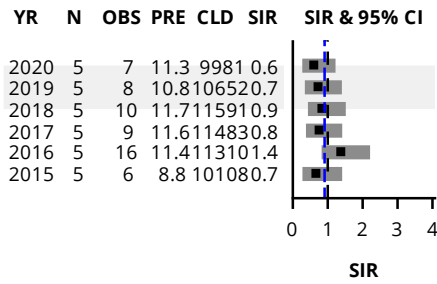
See page 3 for more detailed information about HAIs at Centennial Medical Center

Healthcare Personnel Influenza Vaccination - '2020/2021' Influenza Season

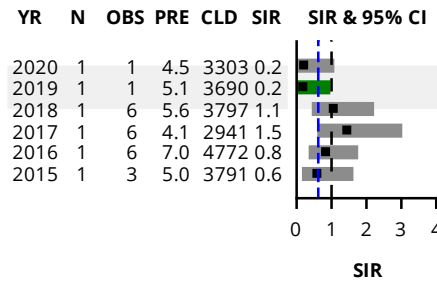


Central Line-Associated Bloodstream Infections (CLABSI)

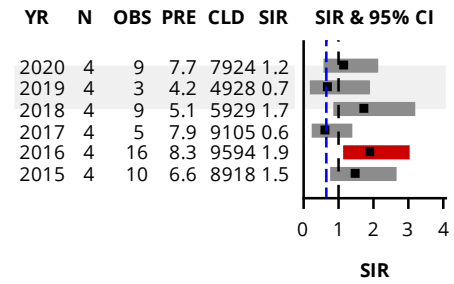
CLABSI - Adult/Pediatric ICUs



CLABSI - Neonatal ICUs

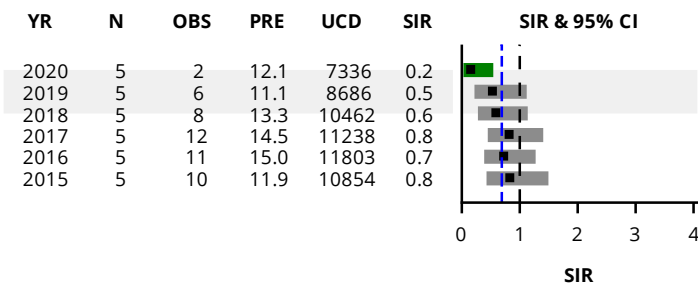


CLABSI - Adult/Pediatric Wards

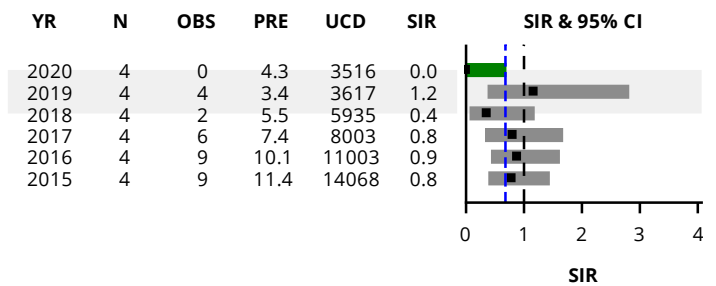


Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICUs

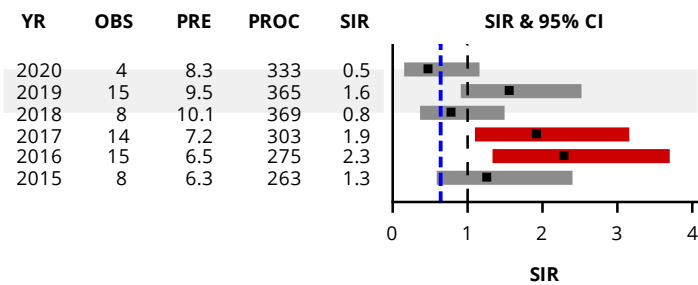


CAUTI - Adult/Pediatric Wards

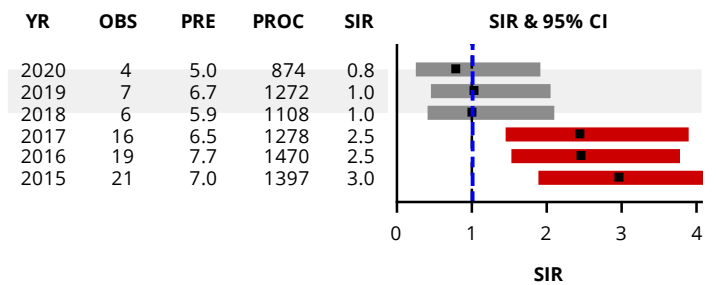


Surgical Site Infections (SSI)

SSI - Colon Surgery

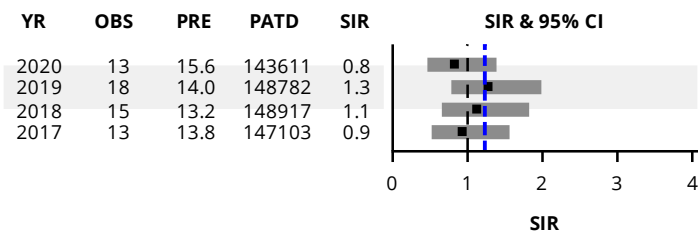


SSI - Abdominal Hysterectomy

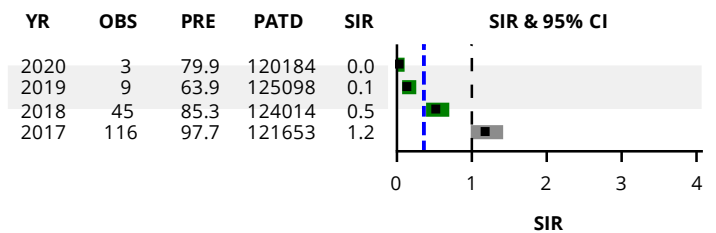


Healthcare Facility-Onset Laboratory Identified (LabID) Events

LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia



LabID - *C. difficile* Infection (CDI)



Data reported as of June 30, 2021

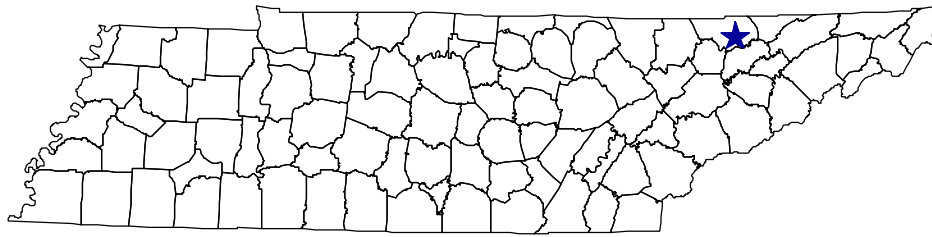
YR = reporting year; **N** = number of units reporting (CLABSI/CAUTI); **OBS** = observed number of infections
PRE = statistically 'predicted' number of infections, based on NHSN national baseline data
SIR = standardized infection ratio (observed/predicted number of infections)
CLD = central line days; **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
 - - - 2020 TN SIR
 - - - NHSN SIR=1

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, 01/01/2019-12/31/2019

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	0.72
	Adult/Pediatric Ward	0	0.1	272	N/A	N/A	0.52
CAUTI	Adult/Pediatric ICU	0	0.1	302	N/A	N/A	0.74
	Adult/Pediatric Ward	0	0.1	331	N/A	N/A	0.78
SSI	Colon surgery	N/A	N/A	N/A	N/A	N/A	0.94
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	0.80
LabID	MRSA bacteremia	0	0.1	4540	N/A	N/A	1.19
	C. difficile infection	0	2.0	4540	0.00	(0.00, 1.45)	0.47

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

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

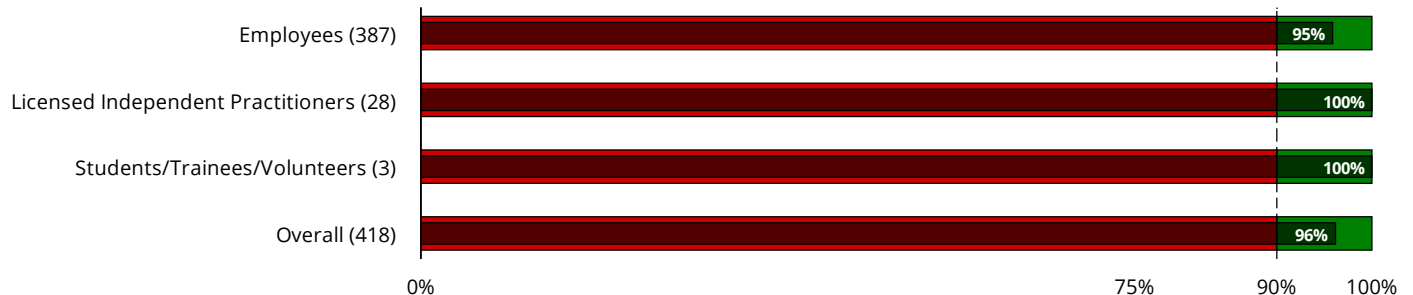
N/A: Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

*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 - '2019/2020' Influenza Season

Healthcare Personnel Category (Total)



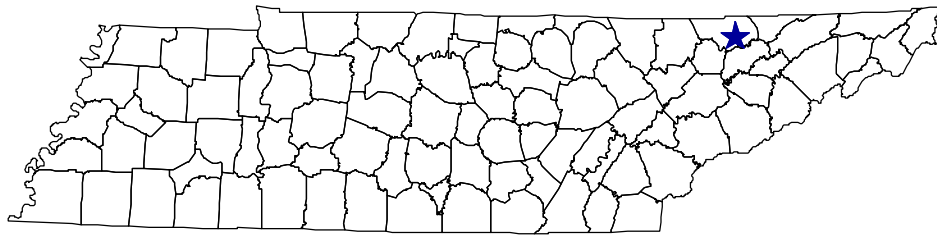
Healthcare Personnel Vaccinated (%)

Below 90% >90% (HHS Healthy People 2020 Goal)

Claiborne Medical Center, Tazewell, Claiborne County

Medical School Affiliation: Undergraduate teaching

Bed Size Category: <50 beds



Healthcare-Associated Infections (HAI) Summary

Standardized Infection Ratio (SIR) by Infection Type, 01/01/2020-12/31/2020

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	97	N/A	N/A	0.91
	Adult/Pediatric Ward	0	0.0	157	N/A	N/A	0.65
CAUTI	Adult/Pediatric ICU	0	0.3	591	N/A	N/A	0.69
	Adult/Pediatric Ward	0	0.3	619	N/A	N/A	0.68
SSI	Colon surgery	N/A	N/A	N/A	N/A	N/A	0.64
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	1.01
LabID	MRSA bacteremia	0	0.1	4588	N/A	N/A	1.23
	C. difficile infection	0	1.7	4588	0.00	(0.00, 1.67)	0.36

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

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

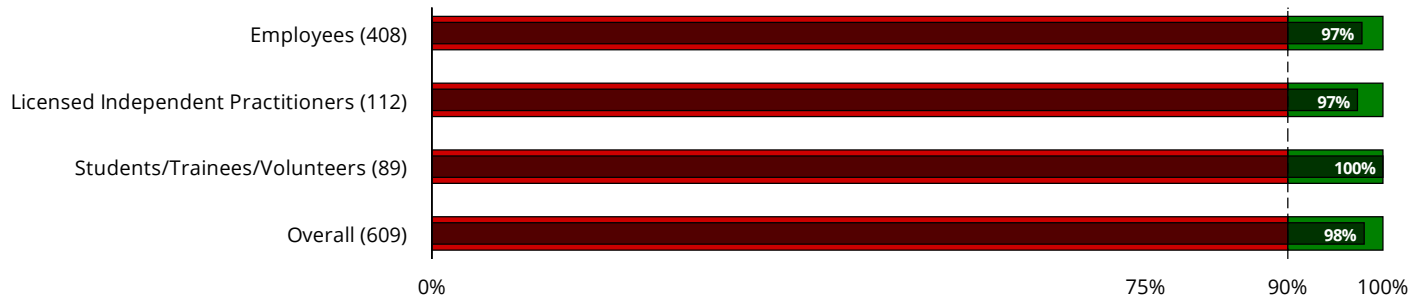
N/A: Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

*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 - '2020/2021' 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
2020	1	0	0.0	97	N/A
2019	1	0	0.0	131	N/A
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
2020	2	0	0.0	157	N/A
2019	2	0	0.1	272	N/A
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
2020	1	0	0.3	591	N/A
2019	1	0	0.1	302	N/A
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
2020	2	0	0.3	619	N/A
2019	2	0	0.1	331	N/A
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
2020	N/A	N/A	N/A	N/A
2019	N/A	N/A	N/A	N/A
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
2020	N/A	N/A	N/A	N/A
2019	N/A	N/A	N/A	N/A
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

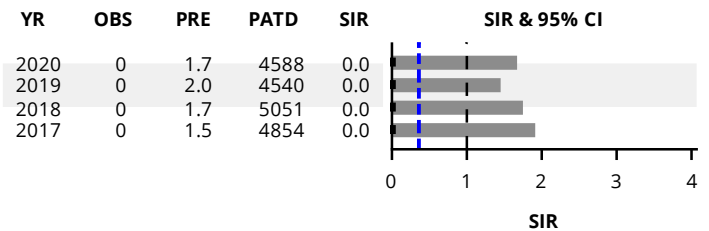
Healthcare Facility-Onset Laboratory Identified (LabID) Events

LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia

YR	OBS	PRE	PATD	SIR
2020	0	0.1	4588	N/A
2019	0	0.1	4540	N/A
2018	0	0.1	5051	N/A
2017	0	0.1	4854	N/A

N/A: Number of predicted infections <1; no SIR calculated

LabID - *C. difficile* Infection (CDI)



Data reported as of June 30, 2021

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;

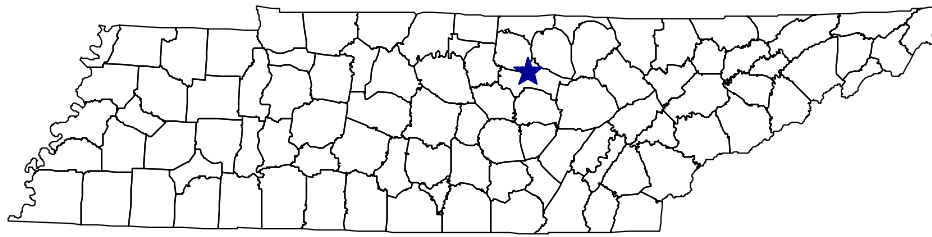
N/A = data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

- Significantly lower than NHSN SIR of 1
- Not significantly different from NHSN SIR of 1
- Significantly higher than NHSN SIR of 1
- - - 2020 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, 01/01/2019-12/31/2019

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	3.8	4431	0.78	(0.20, 2.12)	0.72
	Adult/Pediatric Ward	0	3.9	5291	0.00	(0.00, 0.76)	0.52
CAUTI	Adult/Pediatric ICU	5	6.9	7769	0.72	(0.26, 1.59)	0.74
	Adult/Pediatric Ward	10	11.2	13473	0.89	(0.45, 1.59)	0.78
SSI	Colon surgery	0	2.4	119	0.00	(0.00, 1.22)	0.94
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	0.80
LabID	MRSA bacteremia	7	4.5	63567	1.56	(0.68, 3.08)	1.19
	C. difficile infection	13	28.1	60080	0.46	(0.26, 0.77)	0.47

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 - '2019/2020' Influenza Season

Healthcare Personnel Category (Total)



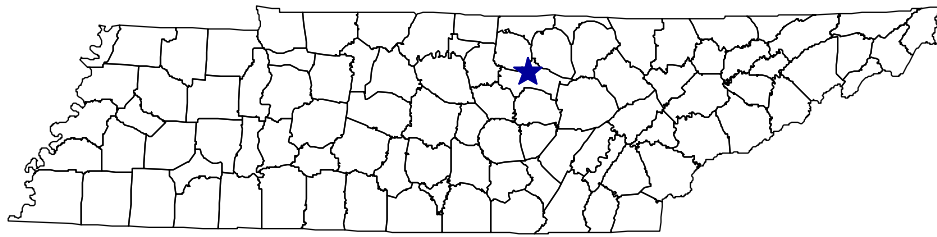
Healthcare Personnel Vaccinated (%)

■ 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, 01/01/2020-12/31/2020

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	4.1	4727	0.49	(0.08, 1.61)	0.91
	Adult/Pediatric Ward	3	3.4	4622	0.87	(0.22, 2.36)	0.65
CAUTI	Adult/Pediatric ICU	4	7.7	8667	0.52	(0.16, 1.24)	0.69
	Adult/Pediatric Ward	9	11.0	13156	0.82	(0.40, 1.50)	0.68
SSI	Colon surgery	0	1.9	92	0.00	(0.00, 1.54)	0.64
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	1.01
LabID	MRSA bacteremia	2	4.6	65650	0.43	(0.07, 1.42)	1.23
	C. difficile infection	10	28.0	62251	0.36	(0.18, 0.64)	0.36

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

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

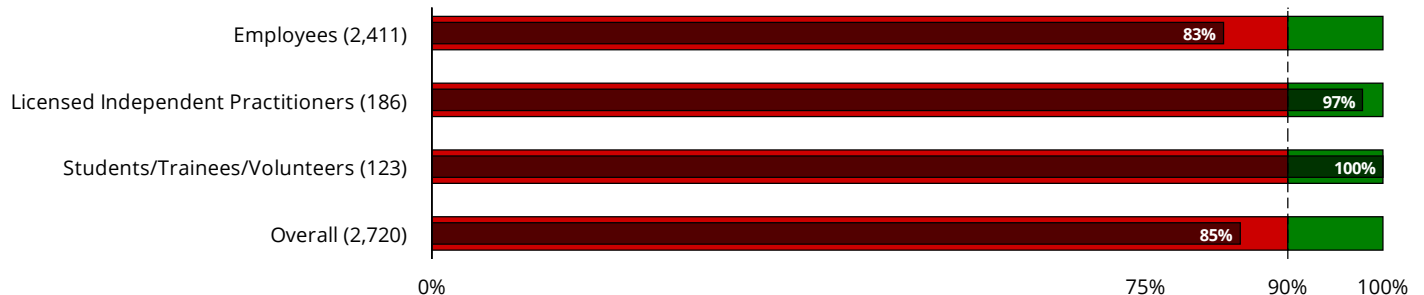
N/A: Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

*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 - '2020/2021' Influenza Season

Healthcare Personnel Category (Total)

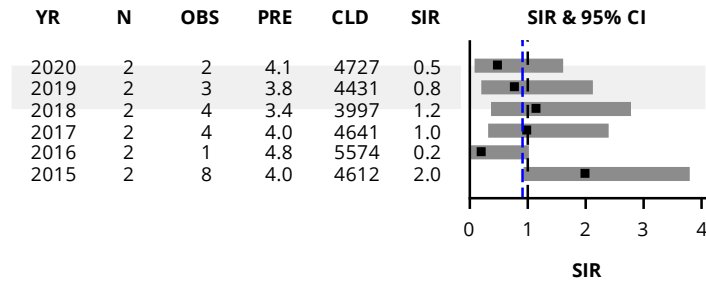


Healthcare Personnel Vaccinated (%)

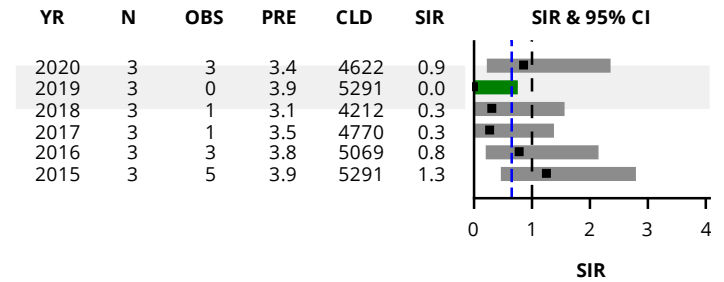
■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric ICUs

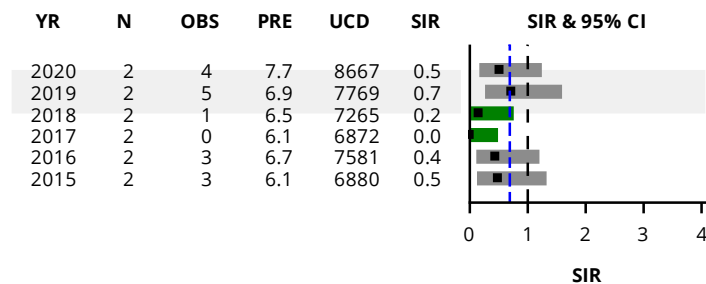


CLABSI - Adult/Pediatric Wards

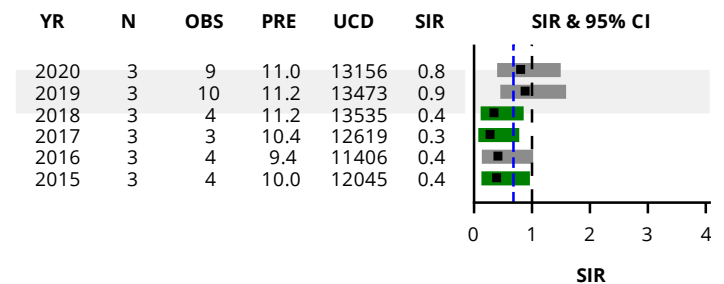


Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICUs

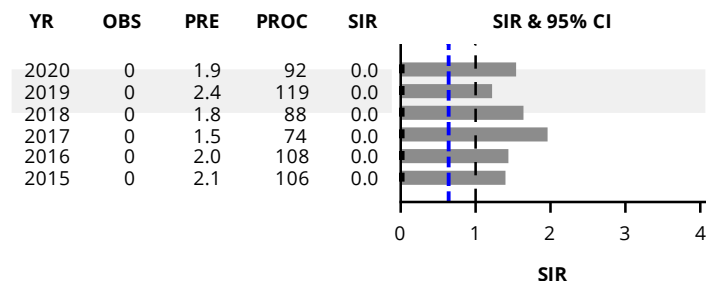


CAUTI - Adult/Pediatric Wards



Surgical Site Infections (SSI)

SSI - Colon Surgery



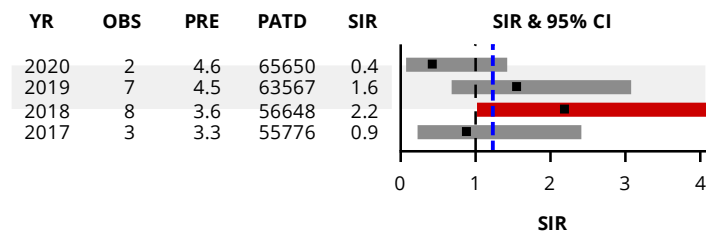
SSI - Abdominal Hysterectomy

YR	OBS	PRE	PROC	SIR
2020	N/A	N/A	N/A	N/A
2019	N/A	N/A	N/A	N/A
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

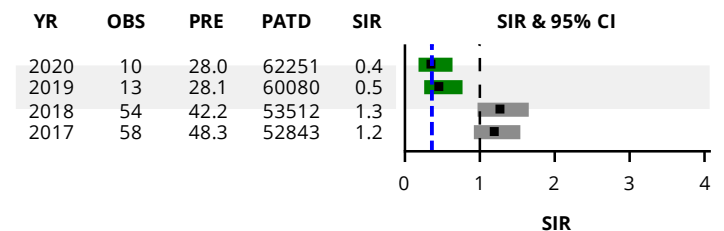
N/A: Number of predicted infections <1; no SIR calculated

Healthcare Facility-Onset Laboratory Identified (LabID) Events

LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia



LabID - *C. difficile* Infection (CDI)



Data reported as of June 30, 2021

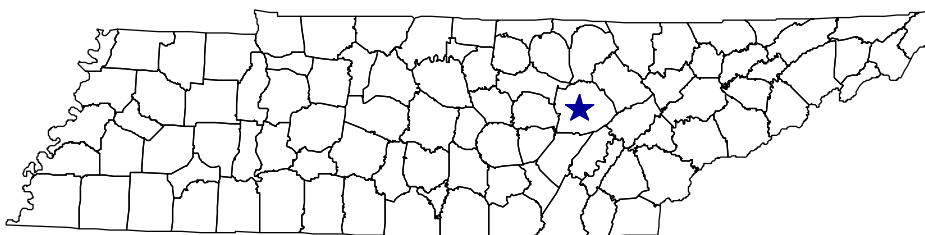
YR = reporting year; **N** = number of units reporting (CLABSI/CAUTI); **OBS** = observed number of infections
PRE = statistically 'predicted' number of infections, based on NHSN national baseline data
SIR = standardized infection ratio (observed/predicted number of infections)
CLD = central line days; **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
 - - - 2020 TN SIR
 - - - NHSN SIR=1

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, 01/01/2019-12/31/2019

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	1083	N/A	N/A	0.72
	Adult/Pediatric Ward	0	0.7	1251	N/A	N/A	0.52
CAUTI	Adult/Pediatric ICU	0	1.1	1543	0.00	(0.00, 2.66)	0.74
	Adult/Pediatric Ward	0	1.4	2102	0.00	(0.00, 2.07)	0.78
SSI	Colon surgery	0	0.7	38	N/A	N/A	0.94
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	0.80
LabID	MRSA bacteremia	1	0.8	21135	N/A	N/A	1.19
	C. difficile infection	1	8.2	20090	0.12	(0.01, 0.60)	0.47

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

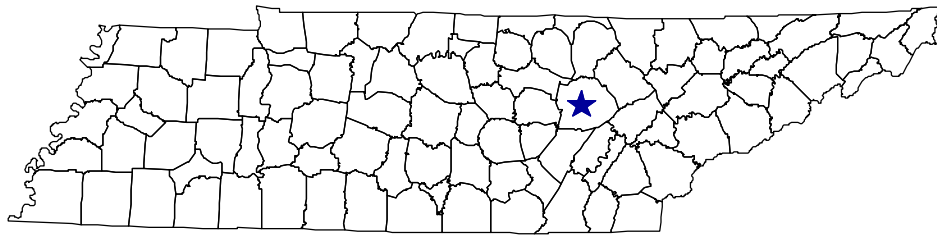
Healthcare Personnel Influenza Vaccination - '2019/2020' Influenza Season

This facility utilized the COVID-19 related CMS reporting exemption for the '2019/2020' influenza season. See the CMS website for more information.

Cumberland Medical Center, Crossville, Cumberland County

Medical School Affiliation: Undergraduate teaching

Bed Size Category: 100-399 beds



Healthcare-Associated Infections (HAI) Summary

Standardized Infection Ratio (SIR) by Infection Type, 01/01/2020-12/31/2020

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	1379	0.00	(0.00, 2.88)	0.91
	Adult/Pediatric Ward	0	1.0	1579	0.00	(0.00, 2.91)	0.65
CAUTI	Adult/Pediatric ICU	1	1.3	1815	0.75	(0.04, 3.72)	0.69
	Adult/Pediatric Ward	2	1.7	2494	1.17	(0.20, 3.85)	0.68
SSI	Colon surgery	0	0.8	42	N/A	N/A	0.64
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	1.01
LabID	MRSA bacteremia	1	1.2	23992	0.80	(0.04, 3.96)	1.23
	C. difficile infection	3	10.3	23091	0.29	(0.07, 0.79)	0.36

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 - '2020/2021' Influenza Season

Healthcare Personnel Category (Total)

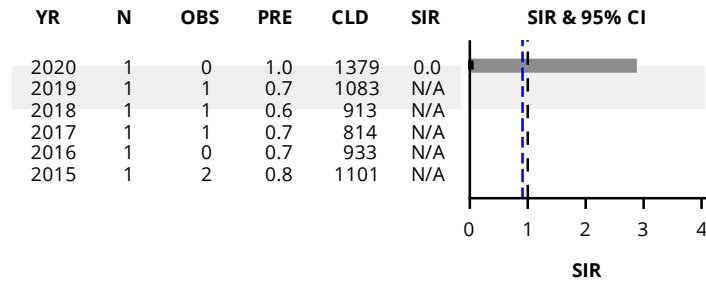


Healthcare Personnel Vaccinated (%)

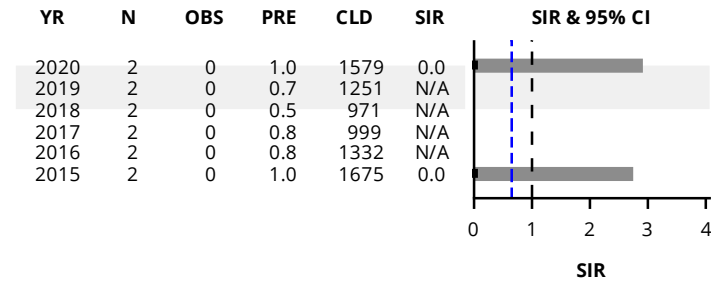
■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric ICUs

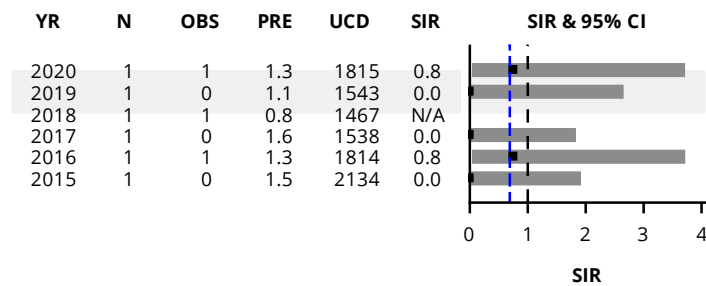


CLABSI - Adult/Pediatric Wards

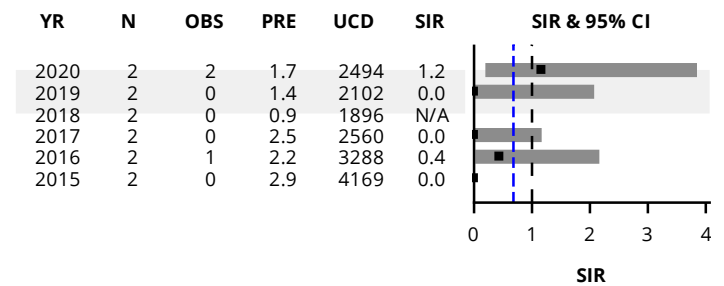


Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICUs



CAUTI - Adult/Pediatric Wards



Surgical Site Infections (SSI)

SSI - Colon Surgery

YR	OBS	PRE	PROC	SIR
2020	0	0.8	42	N/A
2019	0	0.7	38	N/A
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

SSI - Abdominal Hysterectomy

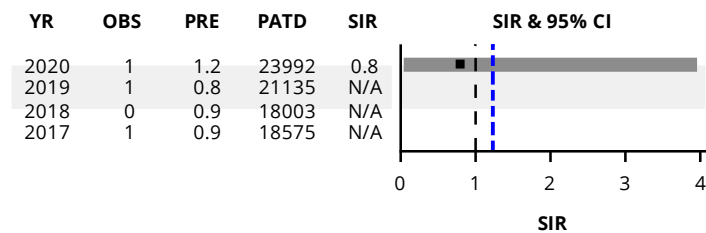
YR	OBS	PRE	PROC	SIR
2020	N/A	N/A	N/A	N/A
2019	N/A	N/A	N/A	N/A
2018	N/A	N/A	N/A	N/A
2017	N/A	N/A	N/A	N/A
2016	N/A	N/A	N/A	N/A
2015	N/A	N/A	N/A	N/A

N/A: Number of predicted infections <1; no SIR calculated

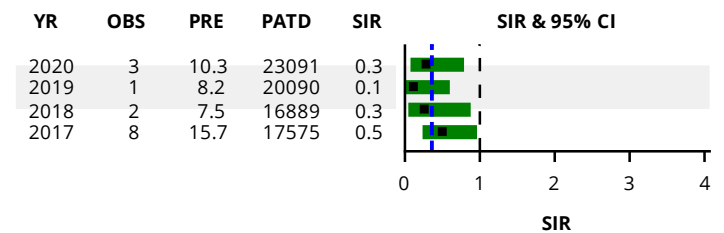
N/A: Number of predicted infections <1; no SIR calculated

Healthcare Facility-Onset Laboratory Identified (LabID) Events

LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia



LabID - *C. difficile* Infection (CDI)



Data reported as of June 30, 2021

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

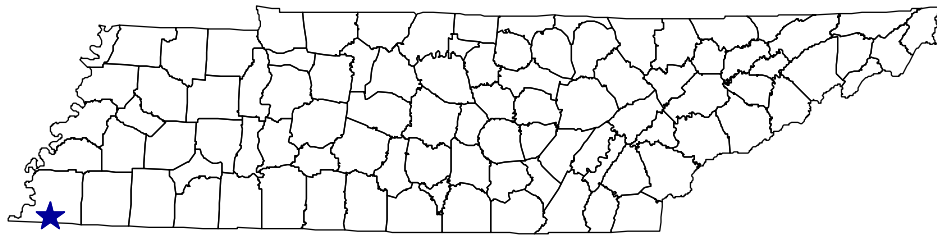
--- 2020 TN SIR

--- NHSN SIR=1

Delta Specialty Hospital, 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, 01/01/2019-12/31/2019

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	172	N/A	N/A	0.52
CAUTI	Adult/Pediatric Ward	N/A	N/A	N/A	N/A	N/A	0.78
SSI	Colon surgery	N/A	N/A	N/A	N/A	N/A	0.94
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	0.80
LabID	MRSA bacteremia	0	0.0	1493	N/A	N/A	1.19
	C. difficile infection	0	0.2	1493	N/A	N/A	0.47

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

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

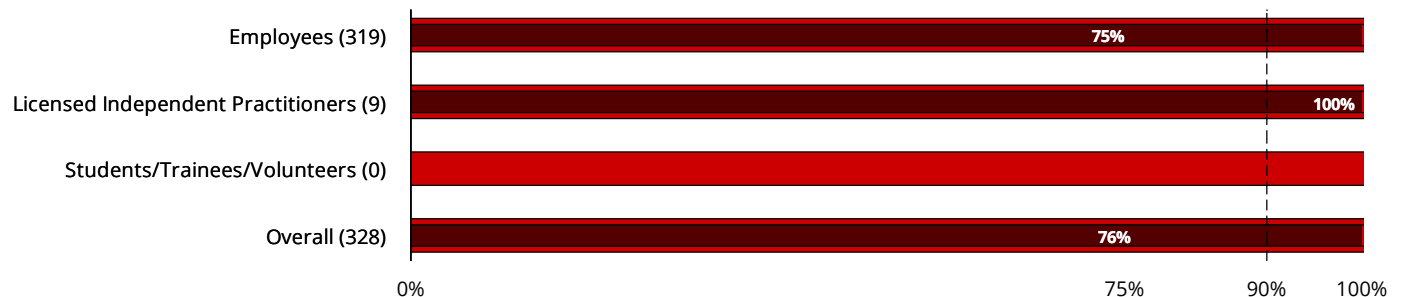
N/A: Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

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

See page 3 for more detailed information about HAIs at Delta Specialty Hospital

Healthcare Personnel Influenza Vaccination - '2019/2020' Influenza Season

Healthcare Personnel Category (Total)



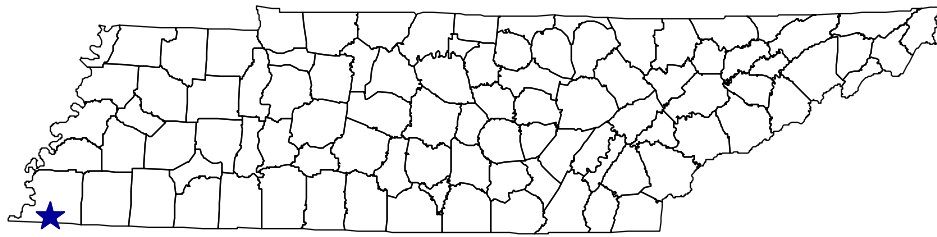
Healthcare Personnel Vaccinated (%)

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

Delta Specialty Hospital, 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, 01/01/2020-12/31/2020

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	77	N/A	N/A	0.65
CAUTI	Adult/Pediatric Ward	N/A	N/A	N/A	N/A	N/A	0.68
LabID	MRSA bacteremia	0	0.2	16282	N/A	N/A	1.23
	C. difficile infection	0	2.5	16282	0.00	(0.00, 1.18)	0.36

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

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

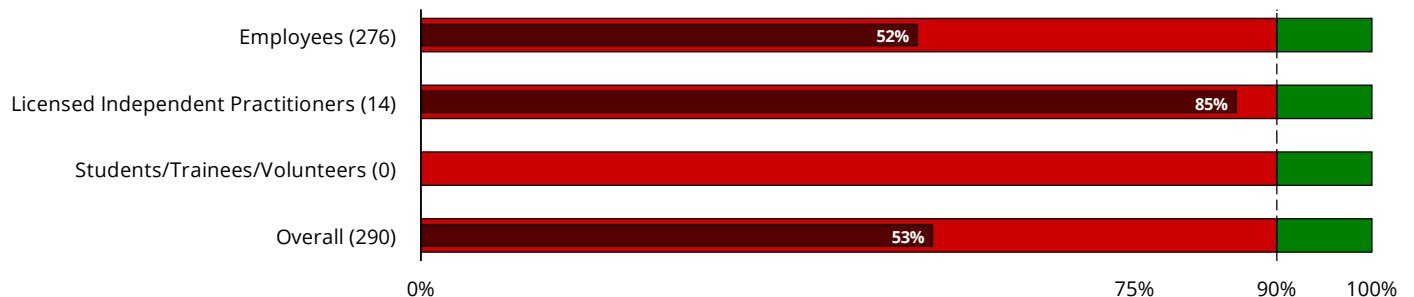
N/A: Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

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

See page 3 for more detailed information about HAIs at Delta Specialty Hospital

Healthcare Personnel Influenza Vaccination - '2020/2021' 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
2020	1	0	0.0	77	N/A
2019	1	0	0.1	172	N/A
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
2020	1	N/A	N/A	N/A	N/A
2019	1	N/A	N/A	N/A	N/A
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

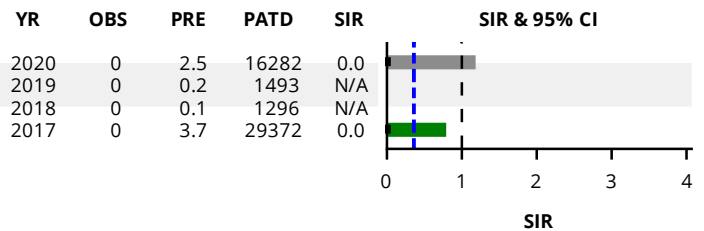
N/A: Number of predicted infections <1; no SIR calculated

Healthcare Facility-Onset Laboratory Identified (LabID) Events

LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia

YR	OBS	PRE	PATD	SIR
2020	0	0.2	16282	N/A
2019	0	0.0	1493	N/A
2018	0	0.0	1296	N/A
2017	0	0.4	29372	N/A

LabID - *C. difficile* Infection (CDI)



N/A: Number of predicted infections <1; no SIR calculated

Data reported as of June 30, 2021

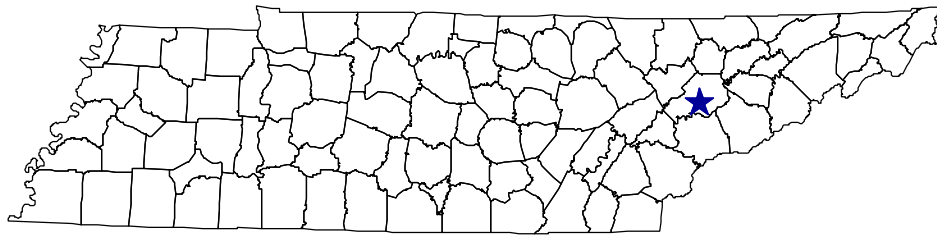
YR = reporting year; **N** = number of units reporting (CLABSI/CAUTI); **OBS** = observed number of infections
PRE = statistically 'predicted' number of infections, based on NHSN national baseline data
SIR = standardized infection ratio (observed/predicted number of infections)
CLD = central line days; **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
 - - - 2020 TN SIR
 - - - NHSN SIR=1

East Tennessee Children's Hospital, Knoxville, Knox County

Medical School Affiliation: Undergraduate teaching

Bed Size Category: 100-399 beds



Healthcare-Associated Infections (HAI) Summary

Standardized Infection Ratio (SIR) by Infection Type, 01/01/2019-12/31/2019

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	1.5	1427	1.26	(0.21, 4.18)	0.72
	Neonatal ICU	0	2.2	2004	0.00	(0.00, 1.32)	0.44
	Adult/Pediatric Ward	2	3.2	4273	0.62	(0.10, 2.05)	0.52
CAUTI	Adult/Pediatric ICU	4	0.6	584	N/A	N/A	0.74
	Adult/Pediatric Ward	1	0.2	383	N/A	N/A	0.78
SSI	Colon surgery	N/A	N/A	N/A	N/A	N/A	0.94
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	0.80
LabID	MRSA bacteremia	2	1.2	32793	1.65	(0.28, 5.46)	1.19
	C. difficile infection	11	9.7	17676	1.13	(0.59, 1.96)	0.47

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 - '2019/2020' Influenza Season

Healthcare Personnel Category (Total)



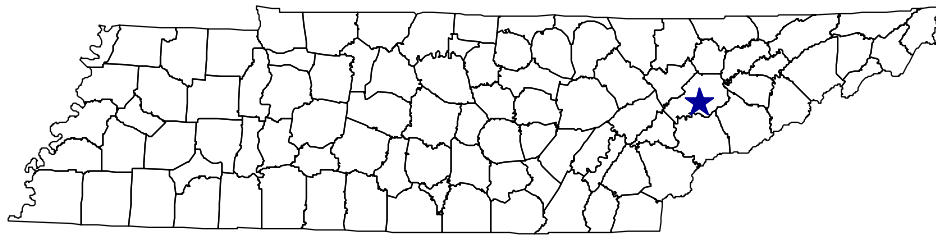
Healthcare Personnel Vaccinated (%)

■ 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, 01/01/2020-12/31/2020

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	1.8	1404	2.21	(0.70, 5.34)	0.91
	Neonatal ICU	2	2.4	1953	0.83	(0.14, 2.74)	0.62
	Adult/Pediatric Ward	4	3.0	3443	1.33	(0.42, 3.20)	0.65
CAUTI	Adult/Pediatric ICU	1	0.5	469	N/A	N/A	0.69
	Adult/Pediatric Ward	1	0.4	530	N/A	N/A	0.68
SSI	Colon surgery	N/A	N/A	N/A	N/A	N/A	0.64
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	1.01
LabID	MRSA bacteremia	3	1.0	30623	2.91	(0.74, 7.91)	1.23
	C. difficile infection	0	5.6	14623	0.00	(0.00, 0.53)	0.36

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

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

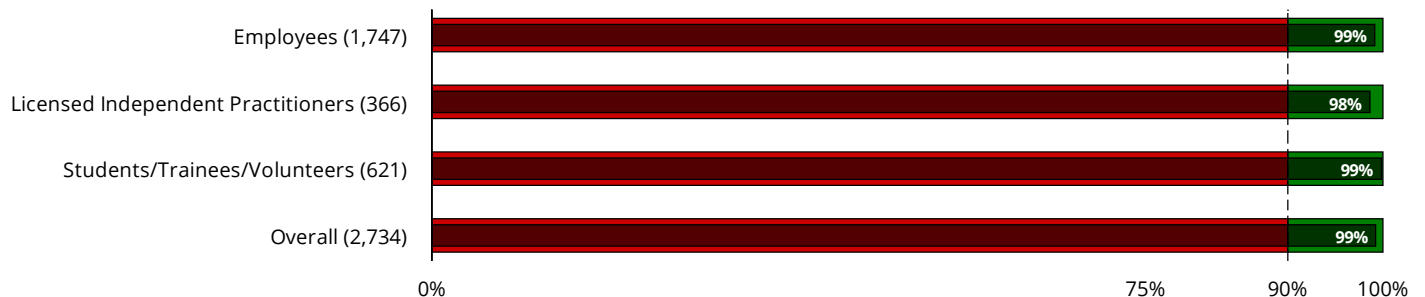
N/A: Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

*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 - '2020/2021' Influenza Season

Healthcare Personnel Category (Total)

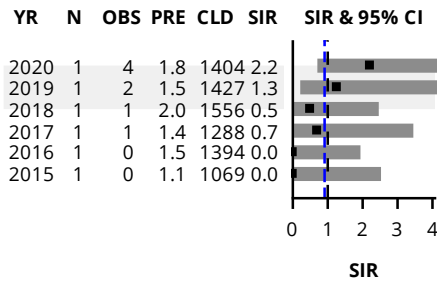


Healthcare Personnel Vaccinated (%)

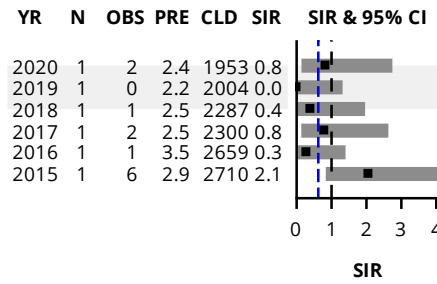
■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

Central Line-Associated Bloodstream Infections (CLABSI)

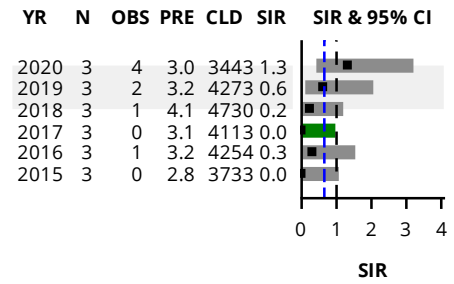
CLABSI - Adult/Pediatric ICUs



CLABSI - Neonatal ICUs



CLABSI - Adult/Pediatric Wards



Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICUs

YR	N	OBS	PRE	UCD	SIR
2020	1	1	0.5	469	N/A
2019	1	4	0.6	584	N/A
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
2020	3	1	0.4	530	N/A
2019	3	1	0.2	383	N/A
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
2020	N/A	N/A	N/A	N/A
2019	N/A	N/A	N/A	N/A
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

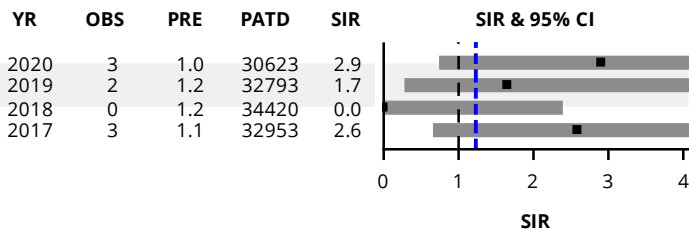
YR	OBS	PRE	PROC	SIR
2020	N/A	N/A	N/A	N/A
2019	N/A	N/A	N/A	N/A
2018	N/A	N/A	N/A	N/A
2017	N/A	N/A	N/A	N/A
2016	N/A	N/A	N/A	N/A
2015	N/A	N/A	N/A	N/A

N/A: Number of predicted infections <1; no SIR calculated

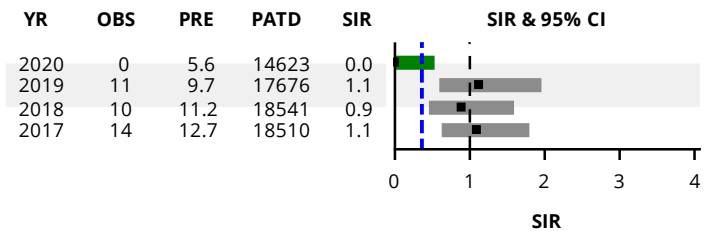
N/A: Number of predicted infections <1; no SIR calculated

Healthcare Facility-Onset Laboratory Identified (LabID) Events

LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia



LabID - *C. difficile* Infection (CDI)



Data reported as of June 30, 2021

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

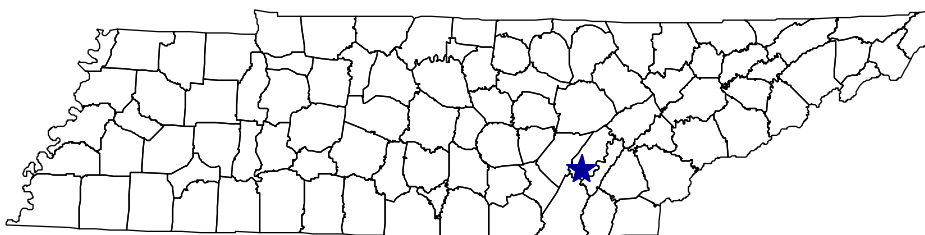
--- 2020 TN SIR

--- 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, 01/01/2019-12/31/2019

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	0.5	951	N/A	N/A	0.52
CAUTI	Adult/Pediatric Ward	1	0.7	1128	N/A	N/A	0.78
SSI	Colon surgery	N/A	N/A	N/A	N/A	N/A	0.94
	Abdominal hysterectomy	2	1.8	401	1.10	(0.19, 3.64)	0.80
LabID	MRSA bacteremia	0	1.3	30667	0.00	(0.00, 2.21)	1.19
	C. difficile infection	5	12.4	24354	0.40	(0.15, 0.89)	0.47

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

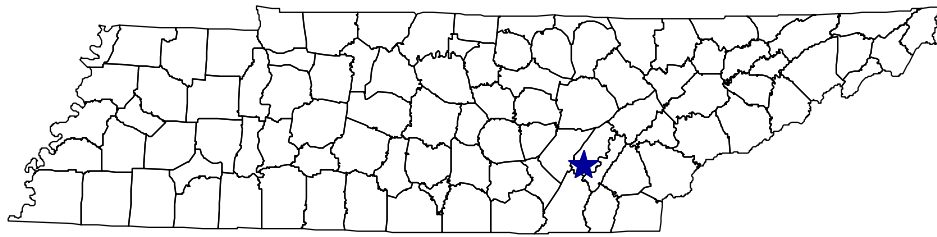
Healthcare Personnel Influenza Vaccination - '2019/2020' Influenza Season

This facility utilized the COVID-19 related CMS reporting exemption for the '2019/2020' influenza season. See the CMS website for more information.

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, 01/01/2020-12/31/2020

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	2	0.3	648	N/A	N/A	0.65
CAUTI	Adult/Pediatric Ward	3	0.8	1254	N/A	N/A	0.68
SSI	Colon surgery	N/A	N/A	N/A	N/A	N/A	0.64
	Abdominal hysterectomy	2	1.2	308	1.55	(0.26, 5.12)	1.01
LabID	MRSA bacteremia	0	0.6	28493	N/A	N/A	1.23
	C. difficile infection	1	6.4	22268	0.15	(0.01, 0.76)	0.36

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

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

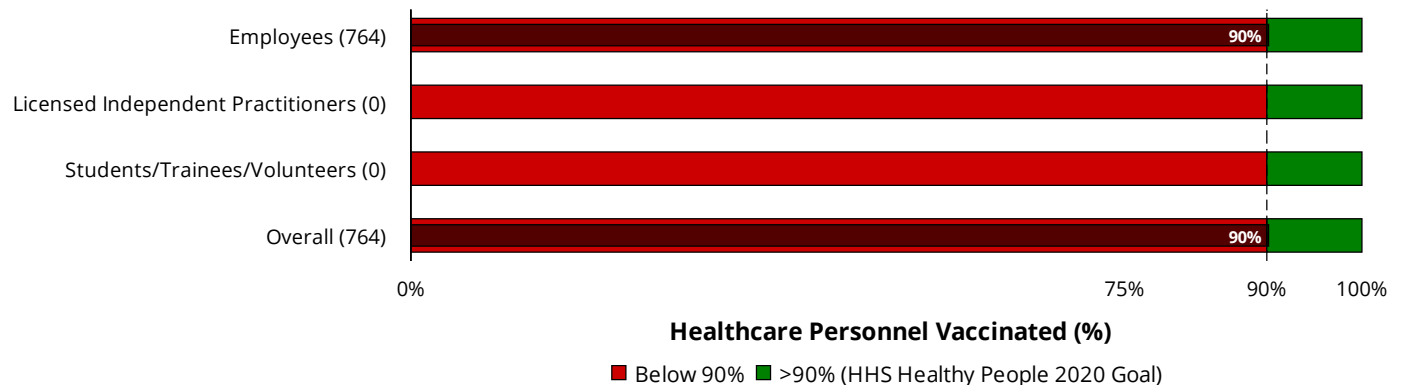
N/A: Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

*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 - '2020/2021' Influenza Season

Healthcare Personnel Category (Total)



Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric Wards

YR	N	OBS	PRE	CLD	SIR
2020	1	2	0.3	648	N/A
2019	1	1	0.5	951	N/A
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
2020	1	3	0.8	1254	N/A
2019	1	1	0.7	1128	N/A
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

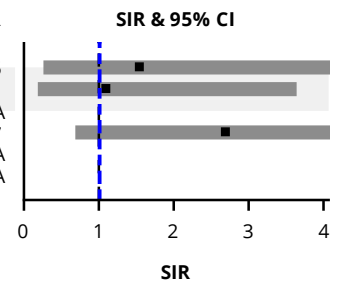
Surgical Site Infections (SSI)

SSI - Colon Surgery

YR	OBS	PRE	PROC	SIR
2020	N/A	N/A	N/A	N/A
2019	N/A	N/A	N/A	N/A
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

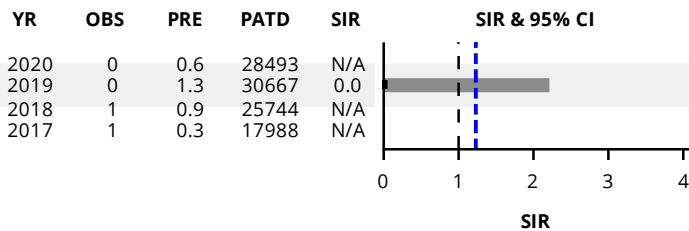
YR	OBS	PRE	PROC	SIR
2020	2	1.2	308	1.5
2019	2	1.8	401	1.1
2018	3	0.8	200	N/A
2017	3	1.1	249	2.7
2016	0	0.9	233	N/A
2015	1	0.7	172	N/A



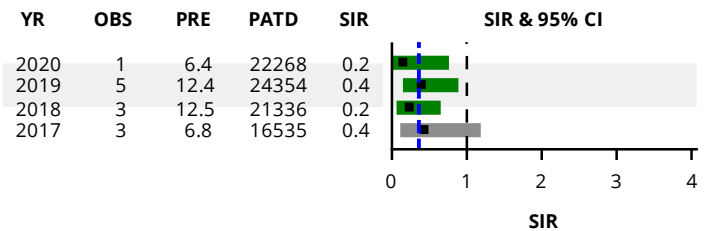
N/A: Number of predicted infections <1; no SIR calculated

Healthcare Facility-Onset Laboratory Identified (LabID) Events

LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia



LabID - *C. difficile* Infection (CDI)



Data reported as of June 30, 2021

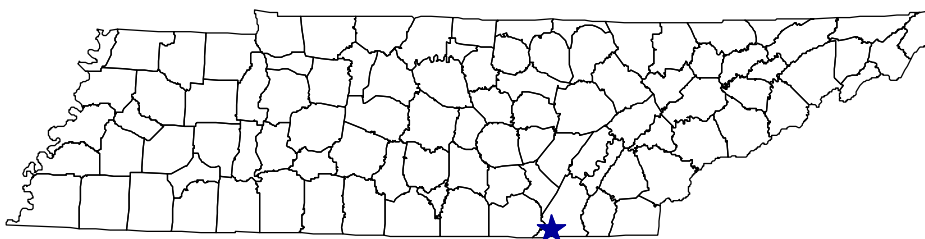
YR = reporting year; **N** = number of units reporting (CLABSI/CAUTI); **OBS** = observed number of infections
PRE = statistically 'predicted' number of infections, based on NHSN national baseline data
SIR = standardized infection ratio (observed/predicted number of infections)
CLD = central line days; **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
 - - - 2020 TN SIR
 - - - NHSN SIR=1

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, 01/01/2019-12/31/2019

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	14.2	13788	0.63	(0.31, 1.16)	0.72
	Neonatal ICU	1	5.0	3276	0.20	(0.01, 0.98)	0.44
	Adult/Pediatric Ward	5	9.4	10788	0.53	(0.20, 1.18)	0.52
CAUTI	Adult/Pediatric ICU	30	22.8	15215	1.31	(0.90, 1.85)	0.74
	Adult/Pediatric Ward	15	5.5	5904	2.70	(1.57, 4.36)	0.78
SSI	Colon surgery	8	11.9	348	0.67	(0.31, 1.27)	0.94
	Abdominal hysterectomy	3	2.7	405	1.08	(0.27, 2.93)	0.80
LabID	MRSA bacteremia	20	15.7	167100	1.27	(0.80, 1.92)	1.19
	C. difficile infection	38	93.1	149060	0.41	(0.29, 0.55)	0.47

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

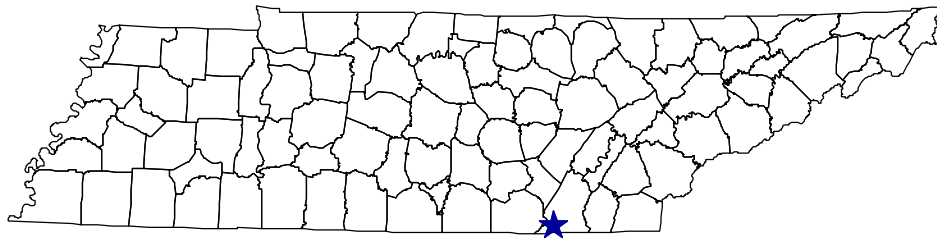
Healthcare Personnel Influenza Vaccination - '2019/2020' Influenza Season

This facility utilized the COVID-19 related CMS reporting exemption for the '2019/2020' influenza season. See the CMS website for more information.

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, 01/01/2020-12/31/2020

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	11.5	11110	1.21	(0.69, 1.99)	0.91
	Neonatal ICU	0	5.3	3672	0.00	(0.00, 0.56)	0.62
	Adult/Pediatric Ward	5	6.2	7198	0.80	(0.29, 1.76)	0.65
CAUTI	Adult/Pediatric ICU	28	22.2	14011	1.26	(0.85, 1.80)	0.69
	Adult/Pediatric Ward	10	4.1	4458	2.38	(1.21, 4.25)	0.68
SSI	Colon surgery	10	13.3	362	0.75	(0.38, 1.33)	0.64
	Abdominal hysterectomy	3	2.1	302	1.37	(0.35, 3.73)	1.01
LabID	MRSA bacteremia	19	14.3	151715	1.33	(0.82, 2.03)	1.23
	C. difficile infection	17	67.7	132915	0.25	(0.15, 0.39)	0.36

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

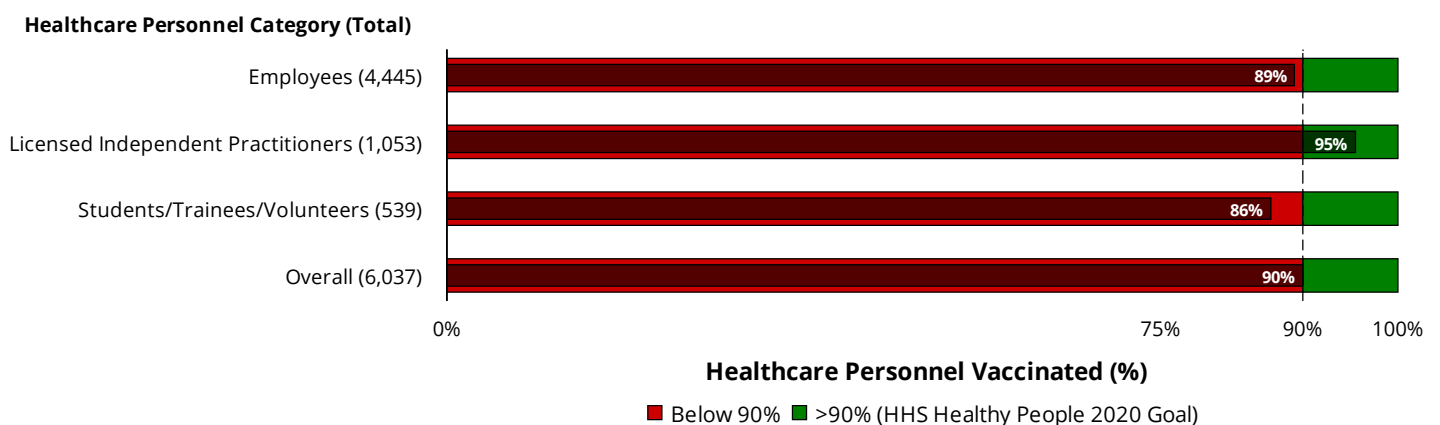
Red highlighting indicates an SIR significantly **HIGHER** than the 2015 national baseline

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)

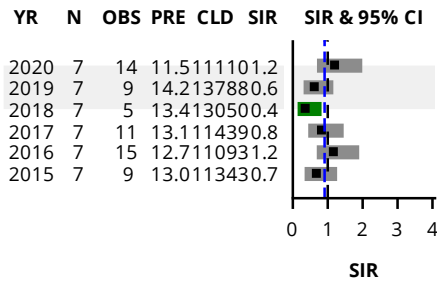
See page 3 for more detailed information about HAIs at Erlanger Medical Center

Healthcare Personnel Influenza Vaccination - '2020/2021' Influenza Season

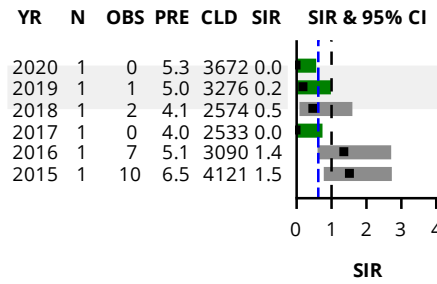


Central Line-Associated Bloodstream Infections (CLABSI)

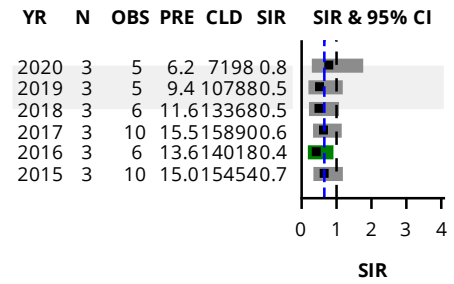
CLABSI - Adult/Pediatric ICUs



CLABSI - Neonatal ICUs

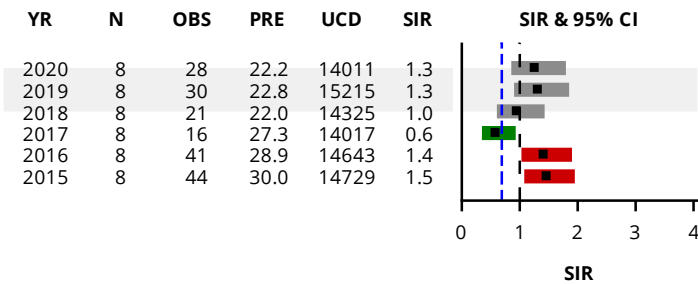


CLABSI - Adult/Pediatric Wards

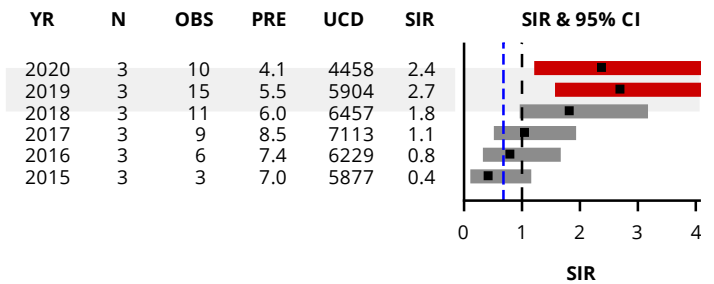


Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICUs

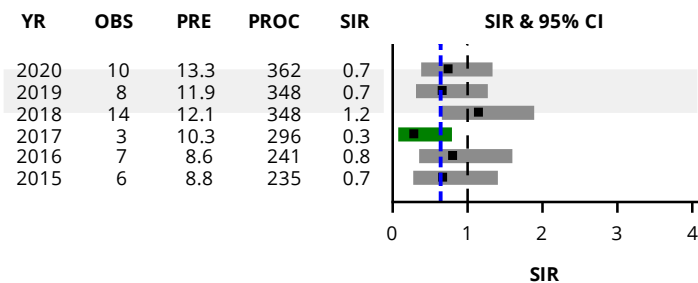


CAUTI - Adult/Pediatric Wards

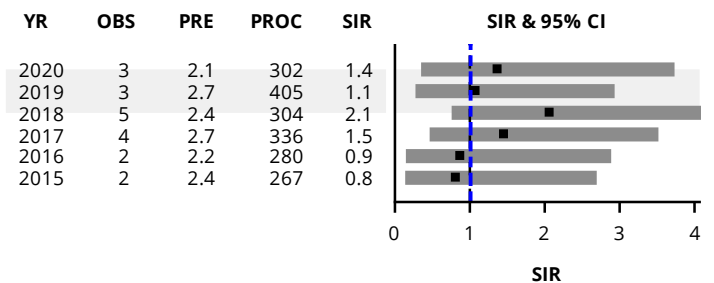


Surgical Site Infections (SSI)

SSI - Colon Surgery

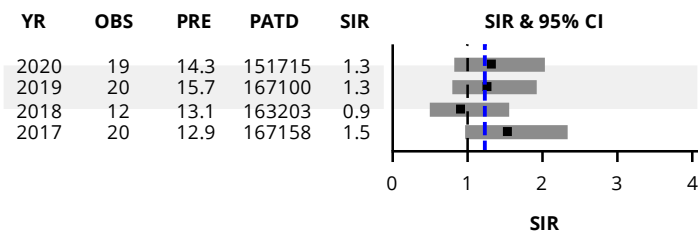


SSI - Abdominal Hysterectomy

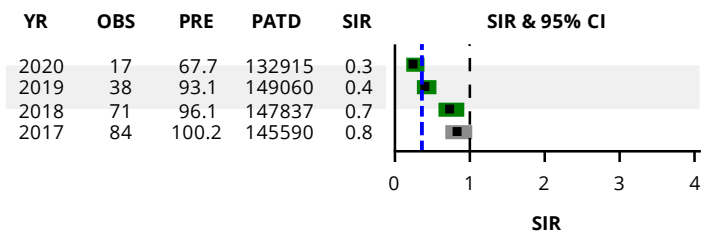


Healthcare Facility-Onset Laboratory Identified (LabID) Events

LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia



LabID - *C. difficile* Infection (CDI)



Data reported as of June 30, 2021

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

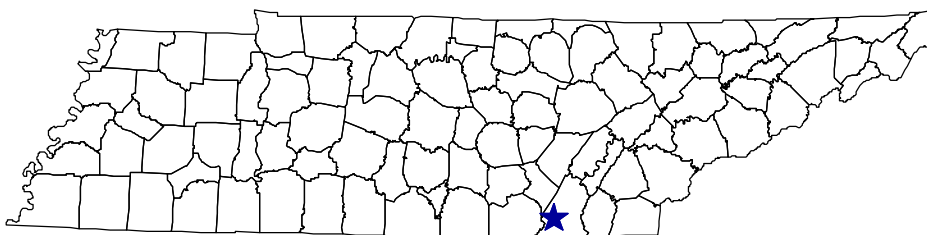
- - - 2020 TN SIR

- - - 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, 01/01/2019-12/31/2019

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	682	N/A	N/A	0.52
CAUTI	Adult/Pediatric Ward	0	0.2	456	N/A	N/A	0.78
SSI	Colon surgery	N/A	N/A	N/A	N/A	N/A	0.94
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	0.80
LabID	MRSA bacteremia	0	0.1	5421	N/A	N/A	1.19
	C. difficile infection	0	1.1	5421	0.00	(0.00, 2.60)	0.47

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

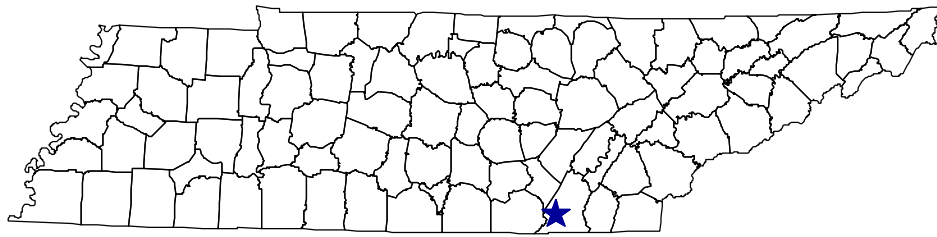
Healthcare Personnel Influenza Vaccination - '2019/2020' Influenza Season

This facility utilized the COVID-19 related CMS reporting exemption for the '2019/2020' influenza season. See the CMS website for more information.

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, 01/01/2020-12/31/2020

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	0.1	176	N/A	N/A	0.65
CAUTI	Adult/Pediatric Ward	0	0.0	186	N/A	N/A	0.68
LabID	MRSA bacteremia	0	0.1	6691	N/A	N/A	1.23
	C. difficile infection	0	1.2	6691	0.00	(0.00, 2.46)	0.36

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

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

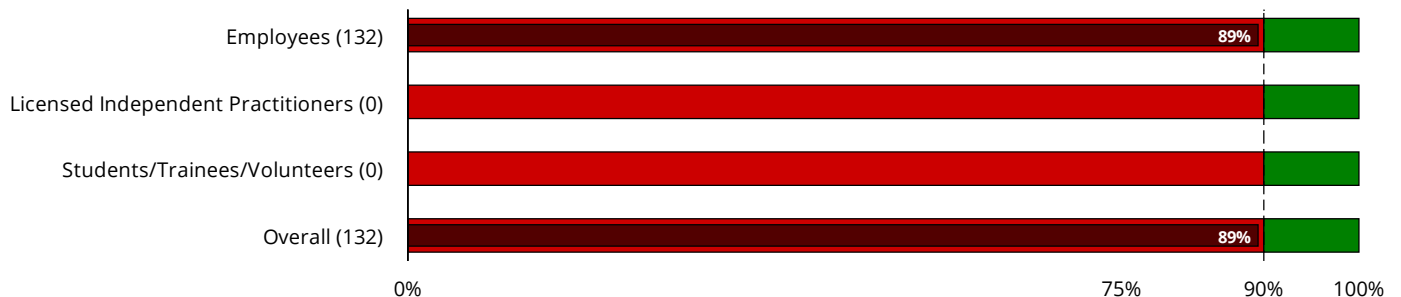
N/A: Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

*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 - '2020/2021' 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
2020	1	1	0.1	176	N/A
2019	1	1	0.3	682	N/A
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
2020	1	0	0.0	186	N/A
2019	1	0	0.2	456	N/A
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

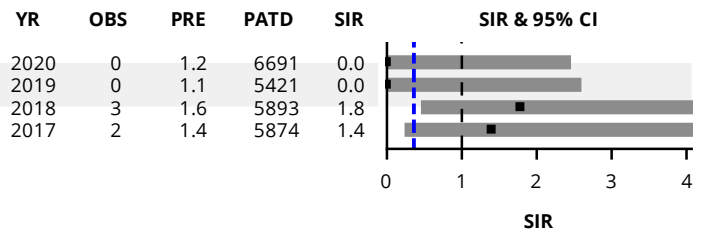
N/A: Number of predicted infections <1; no SIR calculated

Healthcare Facility-Onset Laboratory Identified (LabID) Events

LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia

YR	OBS	PRE	PATD	SIR
2020	0	0.1	6691	N/A
2019	0	0.1	5421	N/A
2018	0	0.1	5893	N/A
2017	0	0.1	5874	N/A

LabID - *C. difficile* Infection (CDI)



N/A: Number of predicted infections <1; no SIR calculated

Data reported as of June 30, 2021

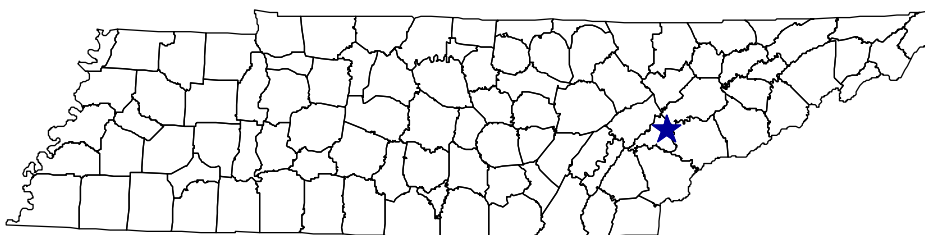
YR = reporting year; **N** = number of units reporting (CLABSI/CAUTI); **OBS** = observed number of infections
PRE = statistically 'predicted' number of infections, based on NHSN national baseline data
SIR = standardized infection ratio (observed/predicted number of infections)
CLD = central line days; **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
- - - 2020 TN SIR
- - - NHSN SIR=1

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, 01/01/2019-12/31/2019

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	0.72
	Adult/Pediatric Ward	0	0.4	754	N/A	N/A	0.52
CAUTI	Adult/Pediatric ICU	0	0.1	330	N/A	N/A	0.74
	Adult/Pediatric Ward	1	0.3	669	N/A	N/A	0.78
SSI	Colon surgery	3	0.7	38	N/A	N/A	0.94
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	0.80
LabID	MRSA bacteremia	1	0.2	10007	N/A	N/A	1.19
	C. difficile infection	2	5.6	10007	0.35	(0.06, 1.17)	0.47

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

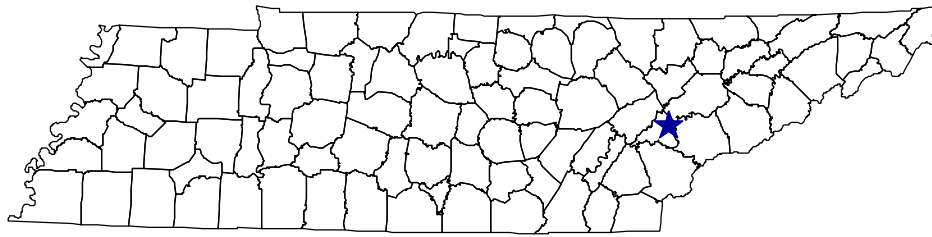
Healthcare Personnel Influenza Vaccination - '2019/2020' Influenza Season

This facility utilized the COVID-19 related CMS reporting exemption for the '2019/2020' influenza season. See the CMS website for more information.

Fort Loudoun Medical Center, Lenoir City, Loudon County

Medical School Affiliation: Undergraduate teaching

Bed Size Category: <50 beds



Healthcare-Associated Infections (HAI) Summary

Standardized Infection Ratio (SIR) by Infection Type, 01/01/2020-12/31/2020

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	315	N/A	N/A	0.91
	Adult/Pediatric Ward	1	0.4	784	N/A	N/A	0.65
CAUTI	Adult/Pediatric ICU	0	0.1	279	N/A	N/A	0.69
	Adult/Pediatric Ward	3	0.2	607	N/A	N/A	0.68
SSI	Colon surgery	0	0.7	42	N/A	N/A	0.64
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	1.01
LabID	MRSA bacteremia	0	0.3	9488	N/A	N/A	1.23
	C. difficile infection	2	4.5	9488	0.44	(0.07, 1.47)	0.36

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

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

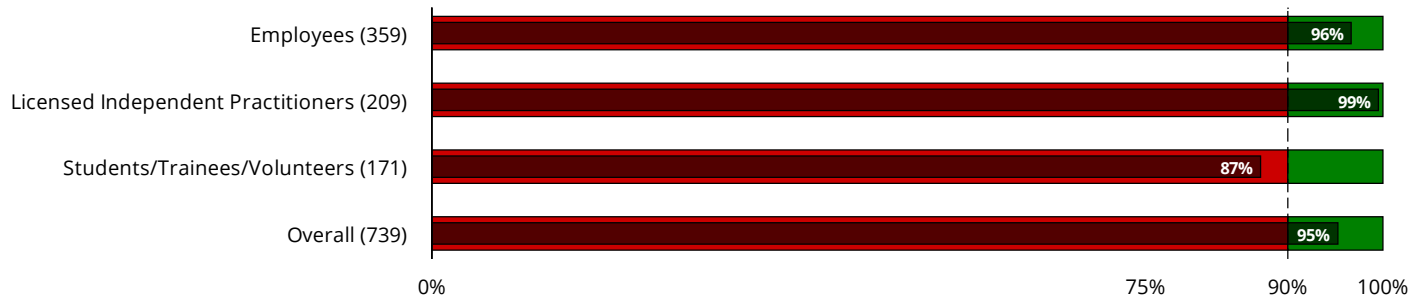
N/A: Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

*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 - '2020/2021' 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
2020	1	0	0.2	315	N/A
2019	1	0	0.2	304	N/A
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
2020	1	1	0.4	784	N/A
2019	1	0	0.4	754	N/A
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
2020	1	0	0.1	279	N/A
2019	1	0	0.1	330	N/A
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
2020	1	3	0.2	607	N/A
2019	1	1	0.3	669	N/A
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
2020	0	0.7	42	N/A
2019	3	0.7	38	N/A
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
2020	N/A	N/A	N/A	N/A
2019	N/A	N/A	N/A	N/A
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

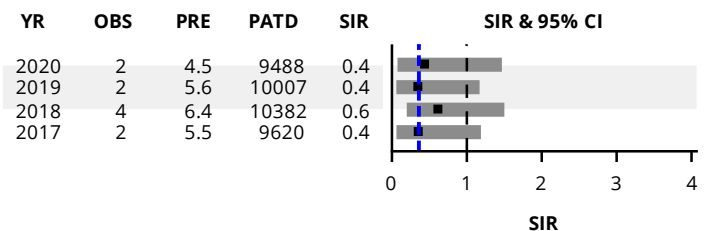
Healthcare Facility-Onset Laboratory Identified (LabID) Events

LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia

YR	OBS	PRE	PATD	SIR
2020	0	0.3	9488	N/A
2019	1	0.2	10007	N/A
2018	0	0.2	10382	N/A
2017	0	0.2	9620	N/A

N/A: Number of predicted infections <1; no SIR calculated

LabID - *C. difficile* Infection (CDI)



Data reported as of June 30, 2021

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;

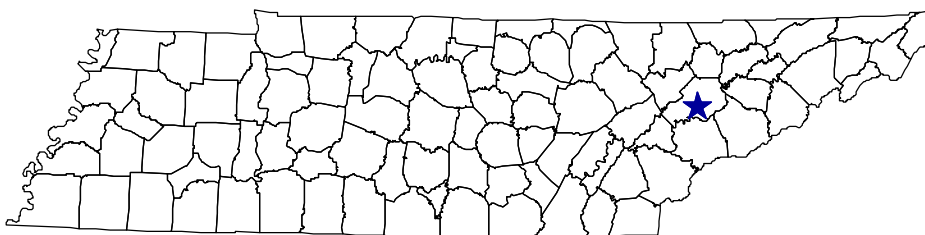
N/A = data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

- Significantly lower than NHSN SIR of 1
- Not significantly different from NHSN SIR of 1
- Significantly higher than NHSN SIR of 1
- - - 2020 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, 01/01/2019-12/31/2019

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	3.0	3505	1.64	(0.60, 3.64)	0.72
	Adult/Pediatric Ward	2	3.7	4962	0.54	(0.09, 1.78)	0.52
CAUTI	Adult/Pediatric ICU	5	5.5	4315	0.90	(0.33, 2.00)	0.74
	Adult/Pediatric Ward	4	4.7	5707	0.84	(0.27, 2.02)	0.78
SSI	Colon surgery	2	5.9	298	0.33	(0.06, 1.11)	0.94
	Abdominal hysterectomy	2	1.7	301	1.16	(0.20, 3.84)	0.80
LabID	MRSA bacteremia	10	5.0	95947	1.97	(1.00, 3.51)	1.19
	C. difficile infection	13	59.7	95947	0.22	(0.12, 0.36)	0.47

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

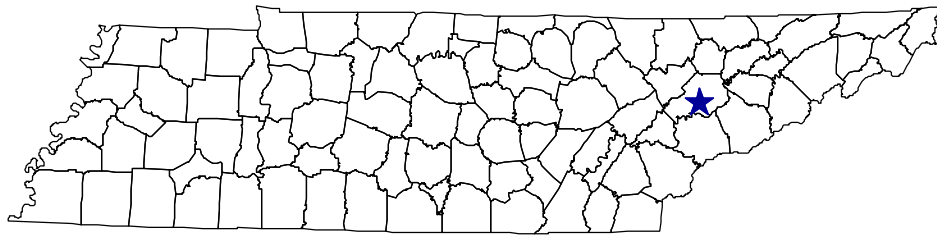
Healthcare Personnel Influenza Vaccination - '2019/2020' Influenza Season

This facility utilized the COVID-19 related CMS reporting exemption for the '2019/2020' influenza season. See the CMS website for more information.

Fort Sanders Regional Medical Center, Knoxville, Knox County

Medical School Affiliation: Undergraduate teaching

Bed Size Category: 100-399 beds



Healthcare-Associated Infections (HAI) Summary

Standardized Infection Ratio (SIR) by Infection Type, 01/01/2020-12/31/2020

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	2.8	3332	2.42	(1.06, 4.79)	0.91
	Adult/Pediatric Ward	6	3.8	5133	1.56	(0.63, 3.24)	0.65
CAUTI	Adult/Pediatric ICU	4	5.1	4387	0.77	(0.25, 1.87)	0.69
	Adult/Pediatric Ward	3	4.7	5686	0.63	(0.16, 1.72)	0.68
SSI	Colon surgery	1	4.6	227	0.21	(0.01, 1.06)	0.64
	Abdominal hysterectomy	0	1.4	262	0.00	(0.00, 2.02)	1.01
LabID	MRSA bacteremia	6	5.1	66908	1.16	(0.47, 2.41)	1.23
	C. difficile infection	8	44.0	66908	0.18	(0.08, 0.35)	0.36

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

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

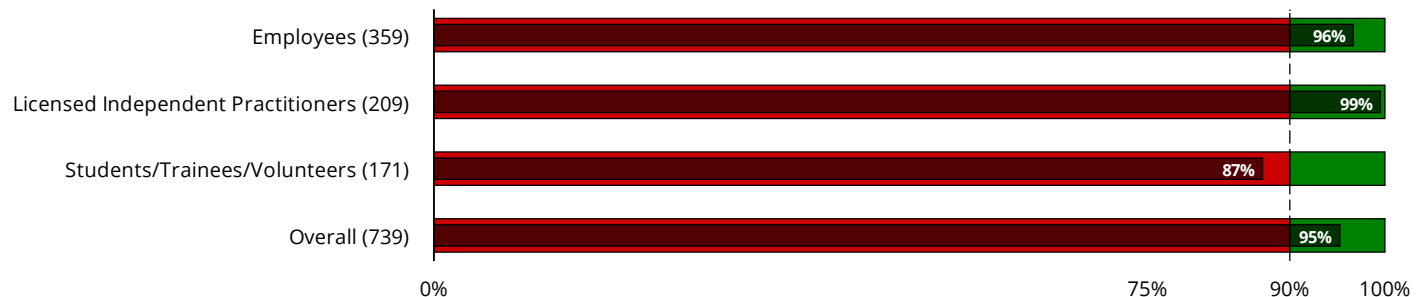
N/A: Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

*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 - '2020/2021' Influenza Season

Healthcare Personnel Category (Total)

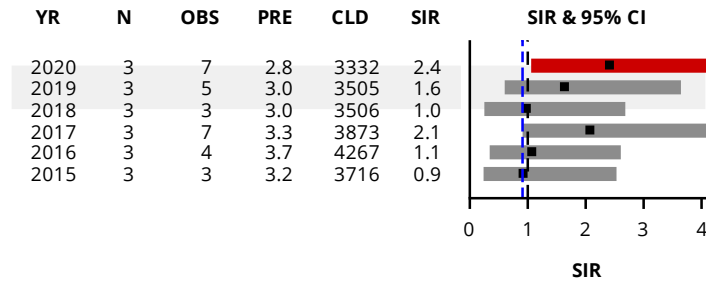


Healthcare Personnel Vaccinated (%)

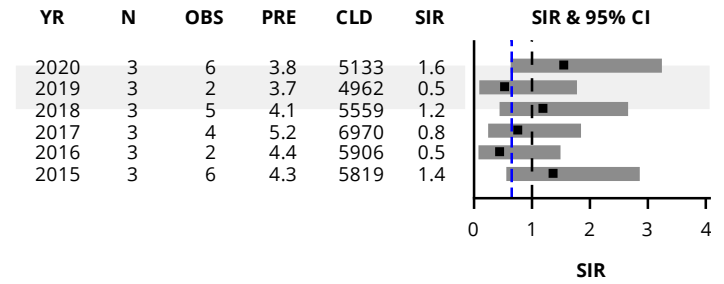
■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric ICUs

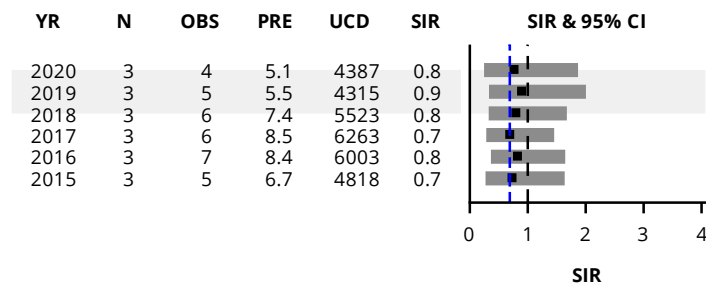


CLABSI - Adult/Pediatric Wards

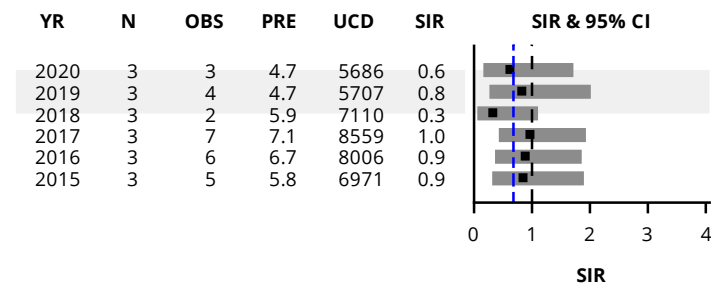


Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICUs

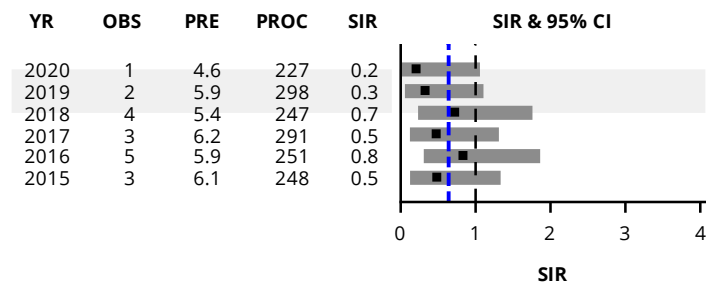


CAUTI - Adult/Pediatric Wards

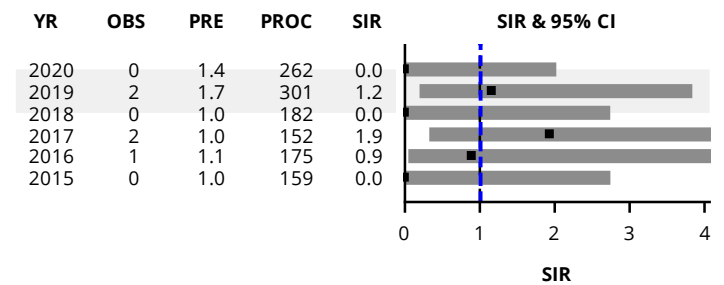


Surgical Site Infections (SSI)

SSI - Colon Surgery

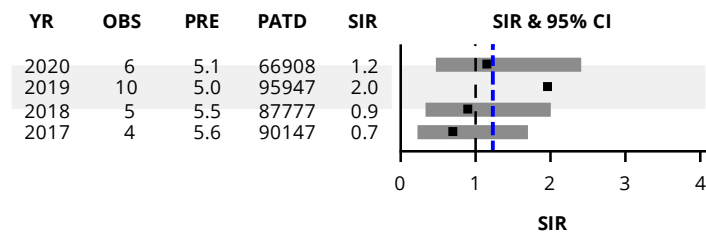


SSI - Abdominal Hysterectomy

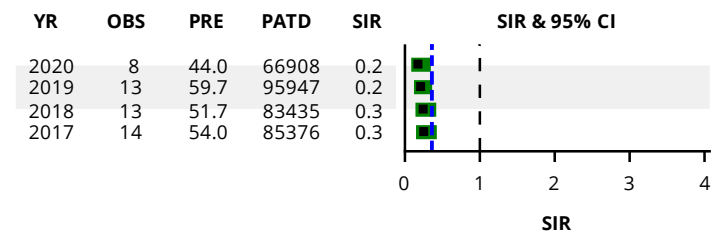


Healthcare Facility-Onset Laboratory Identified (LabID) Events

LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia



LabID - *C. difficile* Infection (CDI)



Data reported as of June 30, 2021

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;

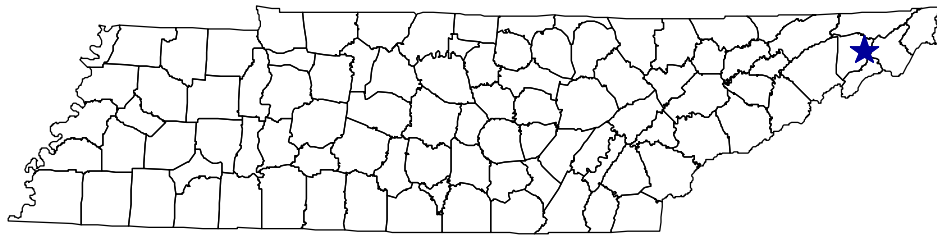
N/A = data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

- Significantly lower than NHSN SIR of 1
- Not significantly different from NHSN SIR of 1
- Significantly higher than NHSN SIR of 1
- - - 2020 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, 01/01/2019-12/31/2019

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	301	N/A	N/A	0.72
	Adult/Pediatric Ward	0	0.2	445	N/A	N/A	0.52
CAUTI	Adult/Pediatric ICU	0	0.3	700	N/A	N/A	0.74
	Adult/Pediatric Ward	0	0.6	1354	N/A	N/A	0.78
SSI	Colon surgery	0	2.2	137	0.00	(0.00, 1.34)	0.94
	Abdominal hysterectomy	0	0.5	151	N/A	N/A	0.80
LabID	MRSA bacteremia	0	1.1	25433	0.00	(0.00, 2.55)	1.19
	C. difficile infection	10	14.6	22995	0.68	(0.35, 1.22)	0.47

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 - '2019/2020' Influenza Season

Healthcare Personnel Category (Total)



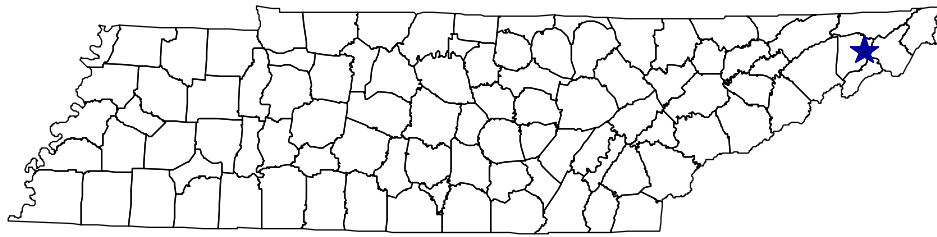
Healthcare Personnel Vaccinated (%)

■ 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, 01/01/2020-12/31/2020

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	233	N/A	N/A	0.91
	Adult/Pediatric Ward	0	0.2	382	N/A	N/A	0.65
CAUTI	Adult/Pediatric ICU	0	0.3	637	N/A	N/A	0.69
	Adult/Pediatric Ward	0	0.5	1190	N/A	N/A	0.68
SSI	Colon surgery	5	2.4	138	2.07	(0.76, 4.59)	0.64
	Abdominal hysterectomy	0	0.1	35	N/A	N/A	1.01
LabID	MRSA bacteremia	1	0.8	22232	N/A	N/A	1.23
	C. difficile infection	4	8.5	19697	0.47	(0.15, 1.12)	0.36

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 - '2020/2021' 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
2020	1	0	0.1	233	N/A
2019	1	0	0.2	301	N/A
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
2020	1	0	0.2	382	N/A
2019	1	0	0.2	445	N/A
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
2020	1	0	0.3	637	N/A
2019	1	0	0.3	700	N/A
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

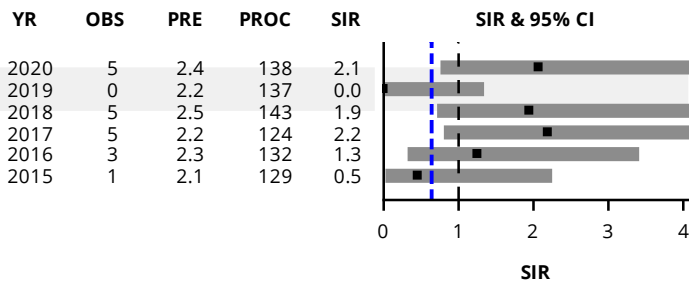
CAUTI - Adult/Pediatric Wards

YR	N	OBS	PRE	UCD	SIR
2020	1	0	0.5	1190	N/A
2019	1	0	0.6	1354	N/A
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



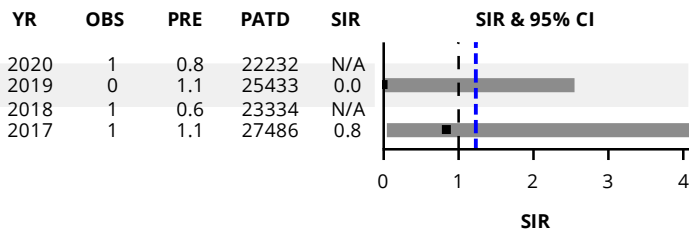
SSI - Abdominal Hysterectomy

YR	OBS	PRE	PROC	SIR
2020	0	0.1	35	N/A
2019	0	0.5	151	N/A
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

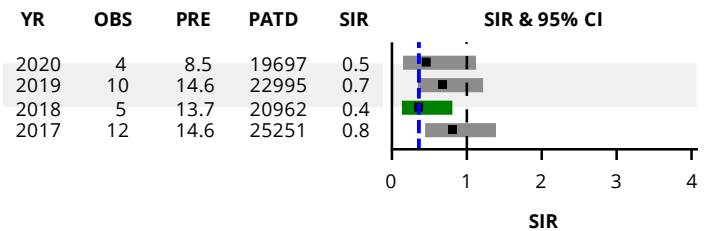
N/A: Number of predicted infections <1; no SIR calculated

Healthcare Facility-Onset Laboratory Identified (LabID) Events

LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia



LabID - *C. difficile* Infection (CDI)



Data reported as of June 30, 2021

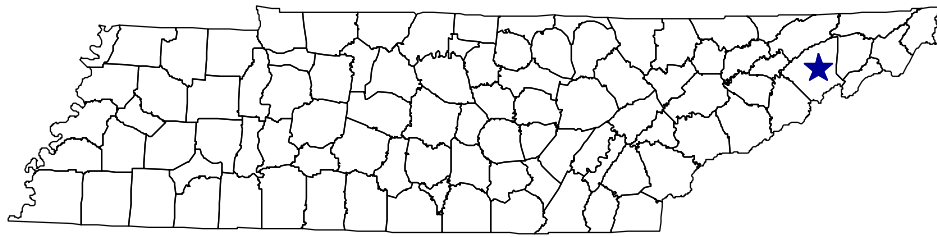
YR = reporting year; N = number of units reporting (CLABSI/CAUTI); OBS = observed number of infections
 PRE = statistically 'predicted' number of infections, based on NHSN national baseline data
 SIR = standardized infection ratio (observed/predicted number of infections)
 CLD = central line days; UCD = 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
 - - - 2020 TN SIR
 - - - NHSN SIR=1

Greenville Community Hospital East (Laughlin Memorial Hospital), Greenville, Greene County

Medical School Affiliation: Undergraduate teaching

Bed Size Category: 100-399 beds



Healthcare-Associated Infections (HAI) Summary

Standardized Infection Ratio (SIR) by Infection Type, 01/01/2019-12/31/2019

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	190	N/A	N/A	0.72
	Neonatal ICU	N/A	N/A	N/A	N/A	N/A	0.44
	Adult/Pediatric Ward	1	0.3	547	N/A	N/A	0.52
CAUTI	Adult/Pediatric ICU	0	1.3	1528	0.00	(0.00, 2.29)	0.74
	Adult/Pediatric Ward	1	1.3	2097	0.73	(0.04, 3.60)	0.78
SSI	Colon surgery	3	2.2	112	1.33	(0.34, 3.61)	0.94
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	0.80
LabID	MRSA bacteremia	2	0.9	16700	N/A	N/A	1.19
	C. difficile infection	5	6.5	16329	0.76	(0.28, 1.69)	0.47

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

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

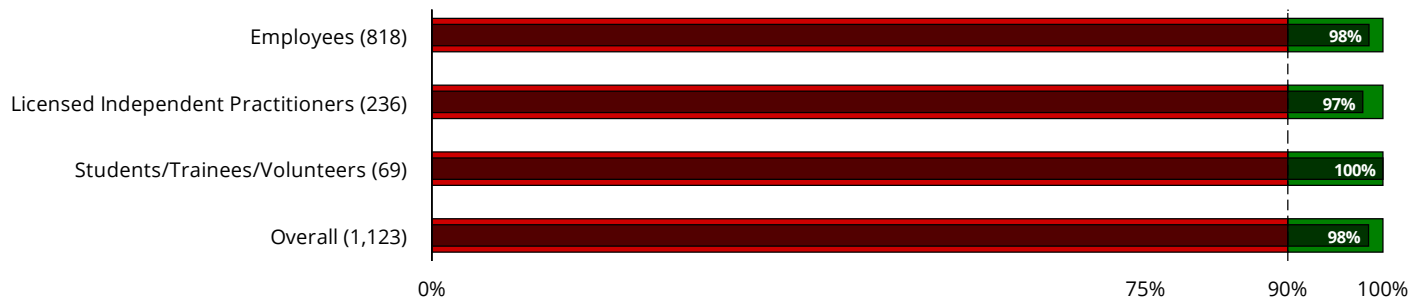
N/A: Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

*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 - '2019/2020' Influenza Season

Healthcare Personnel Category (Total)



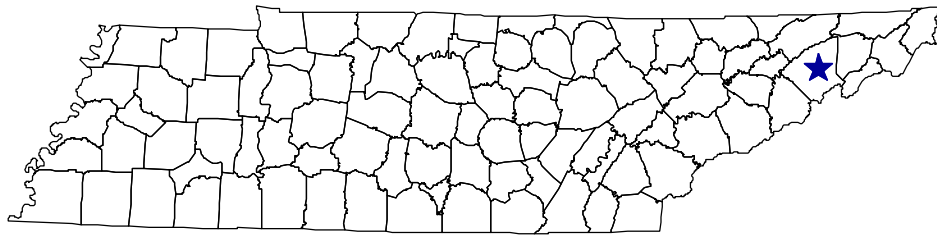
Healthcare Personnel Vaccinated (%)

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

Greenville Community Hospital East (Laughlin Memorial Hospital), Greenville, Greene County

Medical School Affiliation: Undergraduate teaching

Bed Size Category: 100-399 beds



Healthcare-Associated Infections (HAI) Summary

Standardized Infection Ratio (SIR) by Infection Type, 01/01/2020-12/31/2020

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	798	N/A	N/A	0.91
	Adult/Pediatric Ward	0	0.4	691	N/A	N/A	0.65
CAUTI	Adult/Pediatric ICU	0	1.2	1706	0.00	(0.00, 2.35)	0.69
	Adult/Pediatric Ward	1	1.6	2499	0.61	(0.03, 3.02)	0.68
SSI	Colon surgery	0	0.8	45	N/A	N/A	0.64
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	1.01
LabID	MRSA bacteremia	0	0.8	15398	N/A	N/A	1.23
	C. difficile infection	3	6.4	14768	0.46	(0.12, 1.26)	0.36

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

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

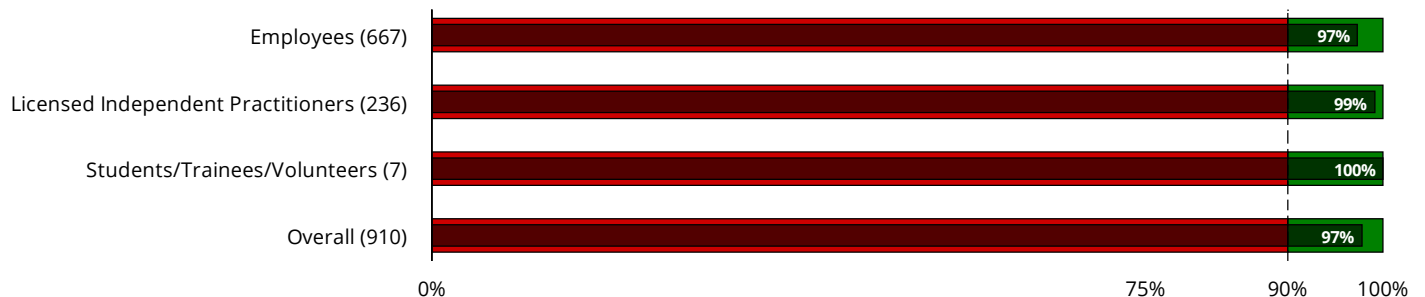
N/A: Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

*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 - '2020/2021' 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
2020	1	0	0.6	798	N/A
2019	1	0	0.1	190	N/A
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

N/A: Number of predicted infections <1; no SIR calculated

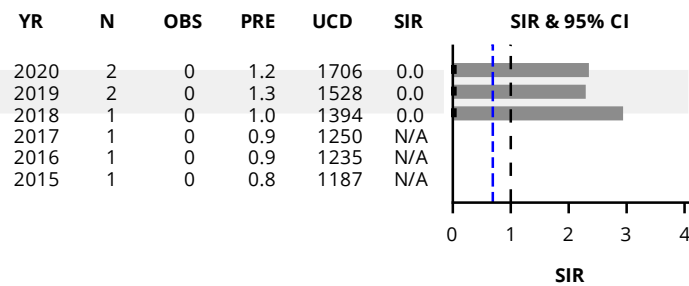
CLABSI - Adult/Pediatric Wards

YR	N	OBS	PRE	CLD	SIR
2020	1	0	0.4	691	N/A
2019	3	1	0.3	547	N/A
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

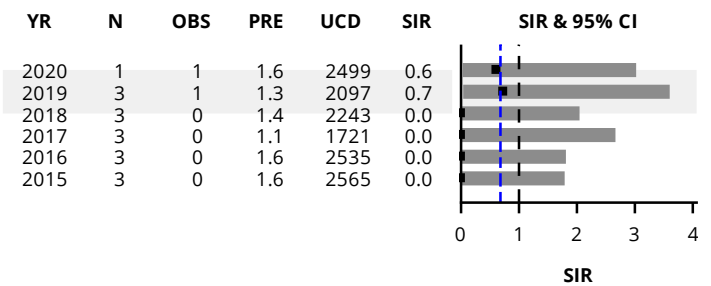
N/A: Number of predicted infections <1; no SIR calculated

Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICUs

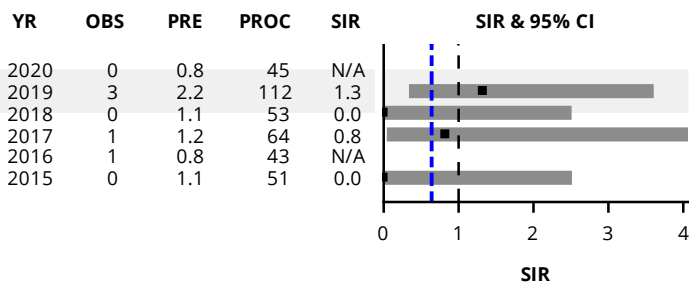


CAUTI - Adult/Pediatric Wards



Surgical Site Infections (SSI)

SSI - Colon Surgery



SSI - Abdominal Hysterectomy

YR	OBS	PRE	PROC	SIR
2020	N/A	N/A	N/A	N/A
2019	N/A	N/A	N/A	N/A
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

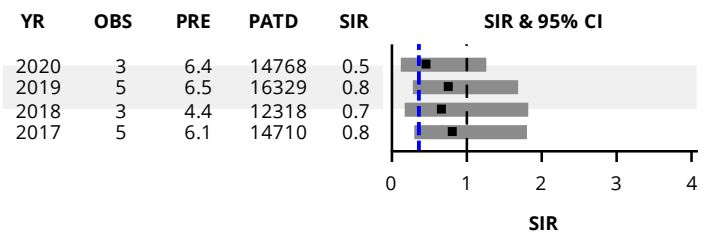
Healthcare Facility-Onset Laboratory Identified (LabID) Events

LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia

YR	OBS	PRE	PATD	SIR
2020	0	0.8	15398	N/A
2019	2	0.9	16700	N/A
2018	0	0.6	12628	N/A
2017	2	0.5	15428	N/A

N/A: Number of predicted infections <1; no SIR calculated

LabID - *C. difficile* Infection (CDI)



Data reported as of June 30, 2021

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;

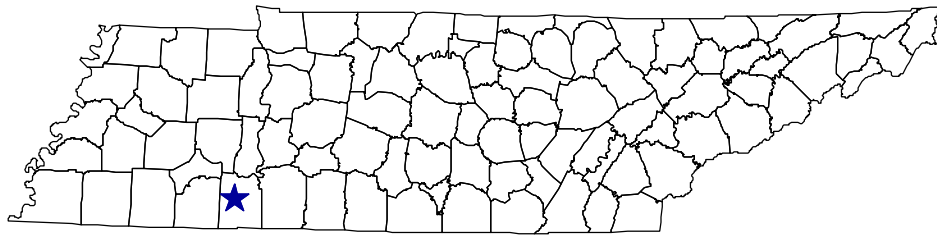
N/A = data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

- Significantly lower than NHSN SIR of 1
- Not significantly different from NHSN SIR of 1
- Significantly higher than NHSN SIR of 1
- 2020 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, 01/01/2019-12/31/2019

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	58	N/A	N/A	0.52
CAUTI	Adult/Pediatric Ward	0	0.2	438	N/A	N/A	0.78
SSI	Colon surgery	N/A	N/A	N/A	N/A	N/A	0.94
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	0.80
LabID	MRSA bacteremia	0	0.1	5195	N/A	N/A	1.19
	C. difficile infection	0	1.0	5195	0.00	(0.00, 2.80)	0.47

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

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

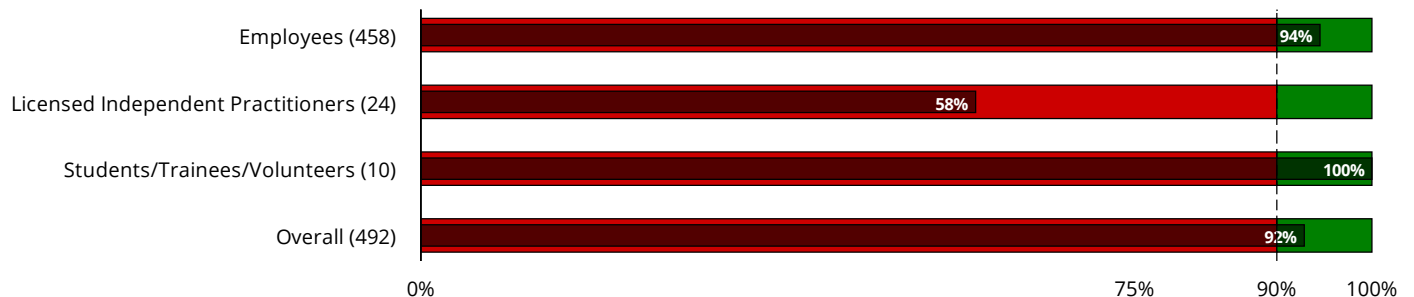
N/A: Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

*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 - '2019/2020' Influenza Season

Healthcare Personnel Category (Total)



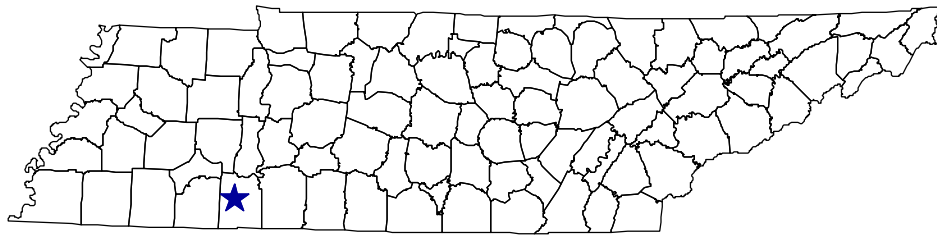
Healthcare Personnel Vaccinated (%)

■ 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, 01/01/2020-12/31/2020

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	0.65
CAUTI	Adult/Pediatric Ward	0	0.3	636	N/A	N/A	0.68
SSI	Colon surgery	N/A	N/A	N/A	N/A	N/A	0.64
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	1.01
LabID	MRSA bacteremia	0	0.1	5021	N/A	N/A	1.23
	C. difficile infection	0	0.9	5021	N/A	N/A	0.36

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

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

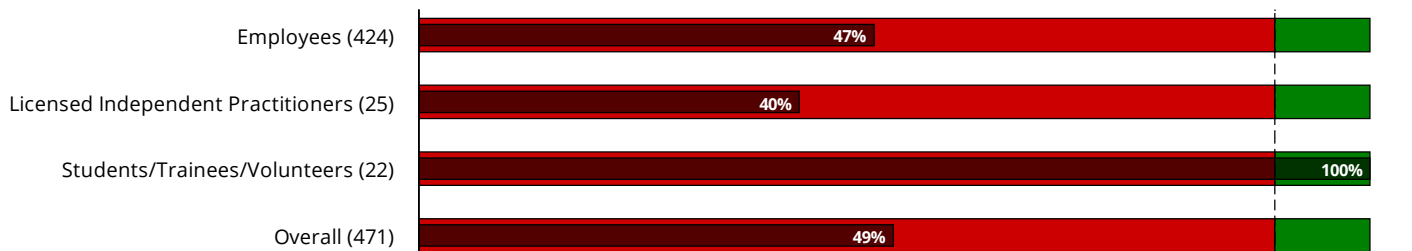
N/A: Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

*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 - '2020/2021' 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
2020	1	N/A	N/A	N/A	N/A
2019	1	0	0.0	58	N/A
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
2020	1	0	0.3	636	N/A
2019	1	0	0.2	438	N/A
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
2020	N/A	N/A	N/A	N/A
2019	N/A	N/A	N/A	N/A
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
2020	N/A	N/A	N/A	N/A
2019	N/A	N/A	N/A	N/A
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

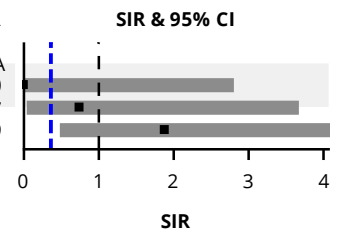
LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia

YR	OBS	PRE	PATD	SIR
2020	0	0.1	5021	N/A
2019	0	0.1	5195	N/A
2018	0	0.2	6491	N/A
2017	0	0.2	7720	N/A

N/A: Number of predicted infections <1; no SIR calculated

LabID - *C. difficile* Infection (CDI)

YR	OBS	PRE	PATD	SIR
2020	0	0.9	5021	N/A
2019	0	1.0	5195	0.0
2018	1	1.3	6491	0.7
2017	3	1.5	7720	1.9



- Significantly lower than NHSN SIR of 1
- Not significantly different from NHSN SIR of 1
- Significantly higher than NHSN SIR of 1
- - - 2020 TN SIR
- - - NHSN SIR=1

Data reported as of June 30, 2021

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)

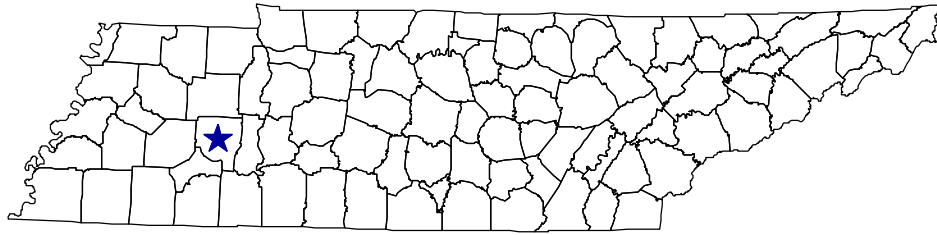
CLD = central line days; UCD = urinary catheter days; PROC = procedures performed; PATD = patient days;

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

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, 01/01/2019-12/31/2019

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	57	N/A	N/A	0.52
CAUTI	Adult/Pediatric Ward	0	0.1	231	N/A	N/A	0.78
SSI	Colon surgery	N/A	N/A	N/A	N/A	N/A	0.94
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	0.80
LabID	MRSA bacteremia	0	0.0	1965	N/A	N/A	1.19
	C. difficile infection	0	0.6	1965	N/A	N/A	0.47

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

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

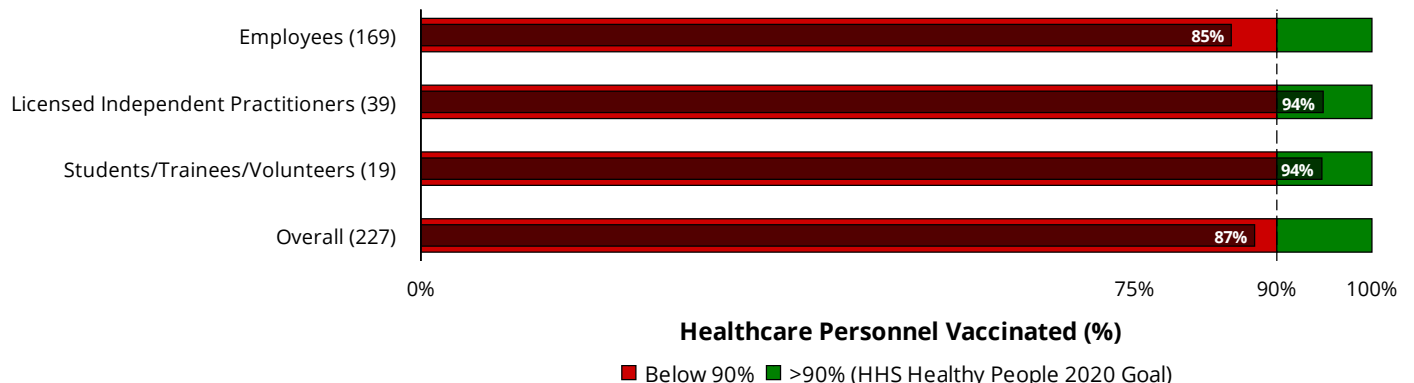
N/A: Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

*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 - '2019/2020' Influenza Season

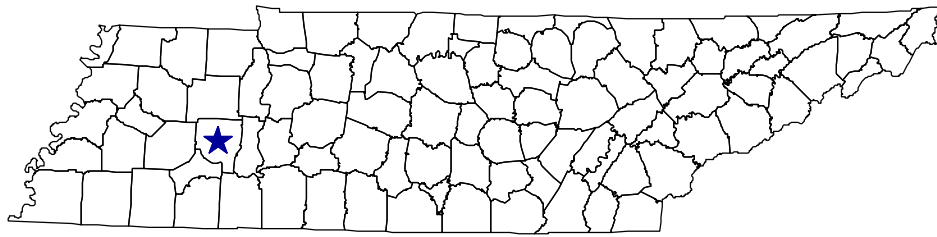
Healthcare Personnel Category (Total)



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, 01/01/2020-12/31/2020

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	0.65
CAUTI	Adult/Pediatric Ward	0	0.2	481	N/A	N/A	0.68
SSI	Colon surgery	N/A	N/A	N/A	N/A	N/A	0.64
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	1.01
LabID	MRSA bacteremia	0	0.0	3014	N/A	N/A	1.23
	C. difficile infection	0	0.7	3011	N/A	N/A	0.36

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

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

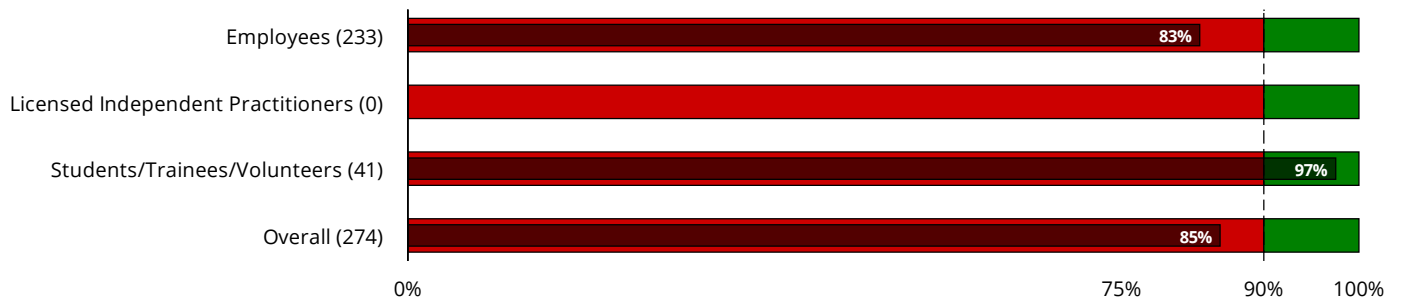
N/A: Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

*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 - '2020/2021' 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
2020	1	0	0.0	55	N/A
2019	1	0	0.0	57	N/A
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
2020	1	0	0.2	481	N/A
2019	1	0	0.1	231	N/A
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
2020	N/A	N/A	N/A	N/A
2019	N/A	N/A	N/A	N/A
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
2020	N/A	N/A	N/A	N/A
2019	N/A	N/A	N/A	N/A
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
2020	0	0.0	3014	N/A
2019	0	0.0	1965	N/A
2018	0	0.0	2014	N/A
2017	0	0.0	1425	N/A

N/A: Number of predicted infections <1; no SIR calculated

LabID - *C. difficile* Infection (CDI)

YR	OBS	PRE	PATD	SIR
2020	0	0.7	3011	N/A
2019	0	0.6	1965	N/A
2018	0	0.6	2014	N/A
2017	1	0.5	1425	N/A

N/A: Number of predicted infections <1; no SIR calculated

Data reported as of June 30, 2021

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

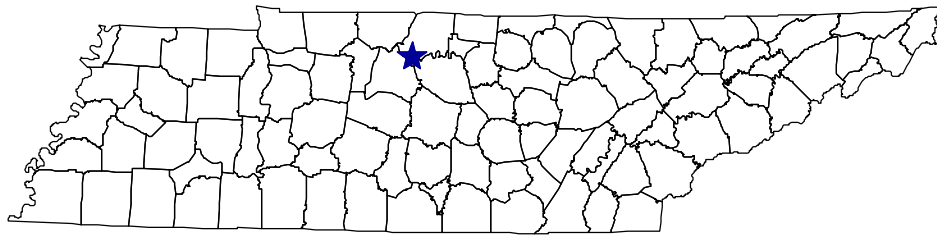
--- 2020 TN SIR

--- 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, 01/01/2019-12/31/2019

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	1054	N/A	N/A	0.72
	Adult/Pediatric Ward	0	1.2	1870	0.00	(0.00, 2.46)	0.52
CAUTI	Adult/Pediatric ICU	0	0.8	1106	N/A	N/A	0.74
	Adult/Pediatric Ward	1	1.0	1665	0.92	(0.05, 4.54)	0.78
SSI	Colon surgery	3	1.7	79	1.72	(0.44, 4.69)	0.94
	Abdominal hysterectomy	1	0.6	111	N/A	N/A	0.80
LabID	MRSA bacteremia	0	0.9	28291	N/A	N/A	1.19
	C. difficile infection	4	13.3	24783	0.30	(0.10, 0.72)	0.47

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 - '2019/2020' Influenza Season

Healthcare Personnel Category (Total)



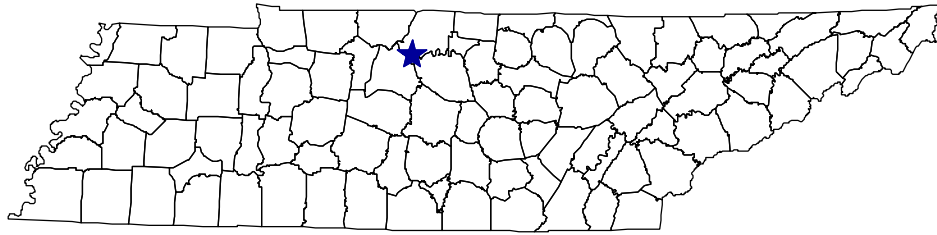
Healthcare Personnel Vaccinated (%)

■ 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, 01/01/2020-12/31/2020

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	1331	0.00	(0.00, 2.99)	0.91
	Adult/Pediatric Ward	0	0.8	1381	N/A	N/A	0.65
CAUTI	Adult/Pediatric ICU	1	1.1	1522	0.90	(0.05, 4.43)	0.69
	Adult/Pediatric Ward	1	0.8	1349	N/A	N/A	0.68
SSI	Colon surgery	0	2.1	98	0.00	(0.00, 1.36)	0.64
	Abdominal hysterectomy	2	0.6	98	N/A	N/A	1.01
LabID	MRSA bacteremia	2	1.4	27016	1.42	(0.24, 4.67)	1.23
	C. difficile infection	1	11.5	23835	0.09	(0.00, 0.43)	0.36

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

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

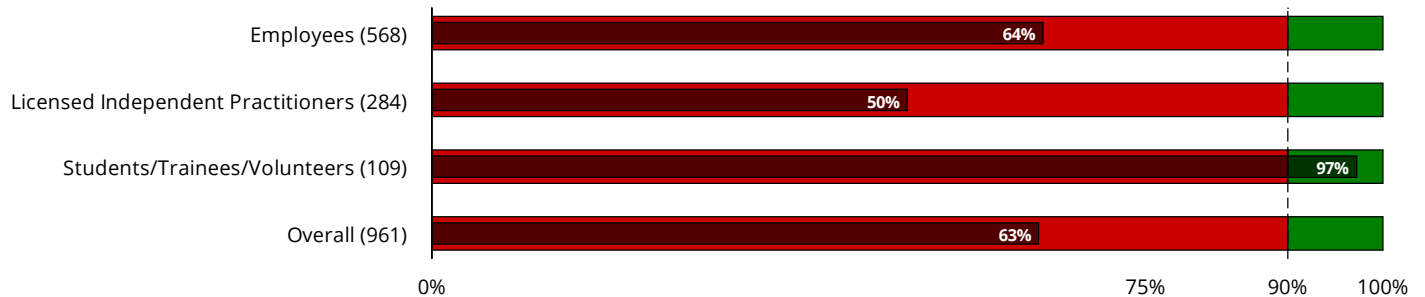
N/A: Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

*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 - '2020/2021' Influenza Season

Healthcare Personnel Category (Total)

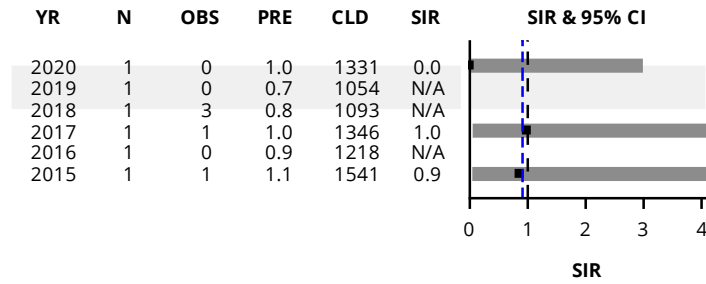


Healthcare Personnel Vaccinated (%)

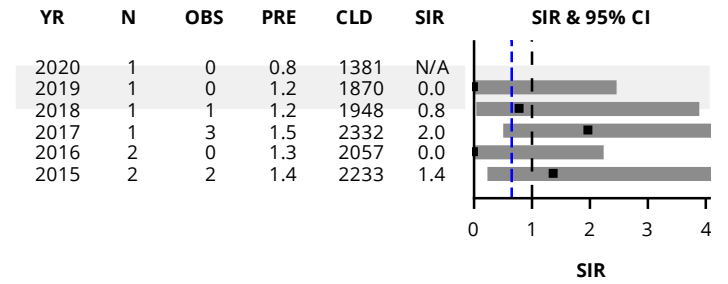
■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric ICUs

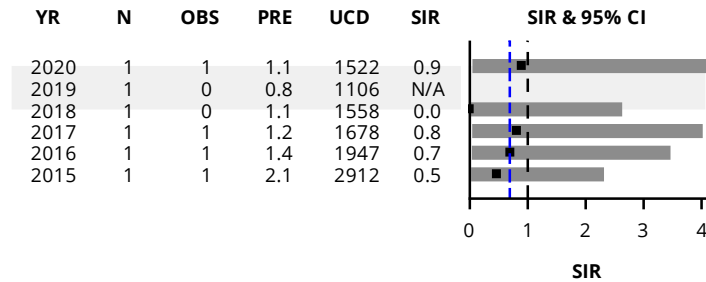


CLABSI - Adult/Pediatric Wards

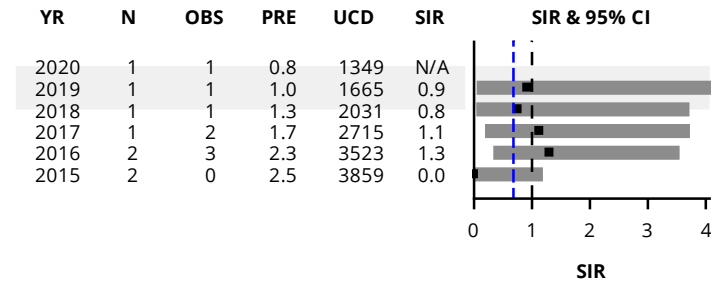


Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICUs

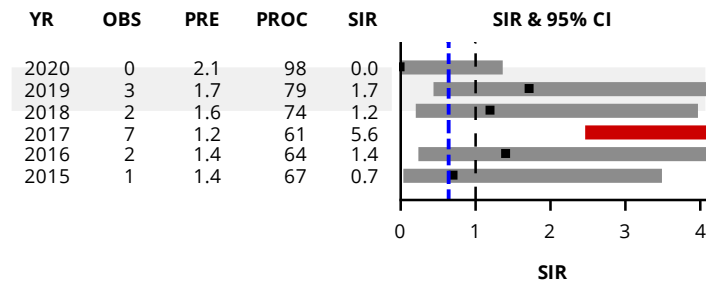


CAUTI - Adult/Pediatric Wards

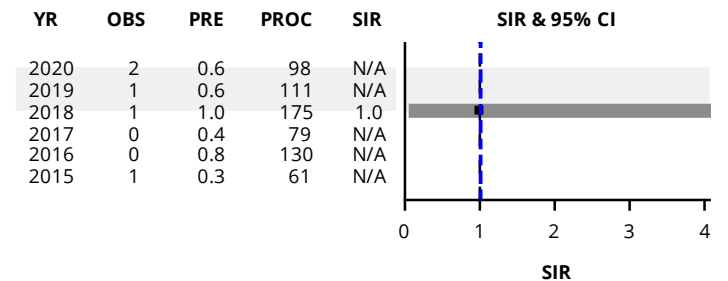


Surgical Site Infections (SSI)

SSI - Colon Surgery

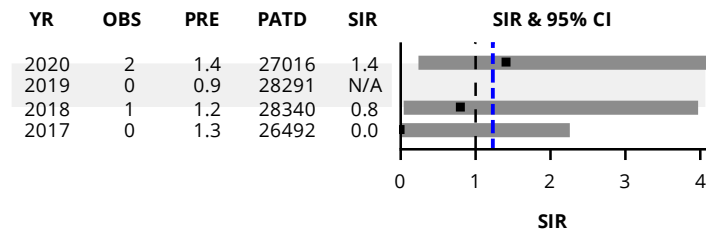


SSI - Abdominal Hysterectomy

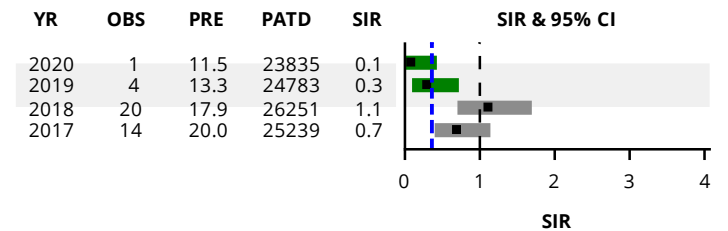


Healthcare Facility-Onset Laboratory Identified (LabID) Events

LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia



LabID - *C. difficile* Infection (CDI)



Data reported as of June 30, 2021

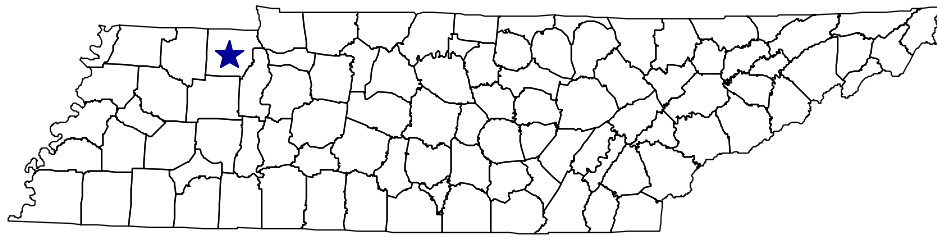
YR = reporting year; N = number of units reporting (CLABSI/CAUTI); OBS = observed number of infections
 PRE = statistically 'predicted' number of infections, based on NHSN national baseline data
 SIR = standardized infection ratio (observed/predicted number of infections)
 CLD = central line days; UCD = 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
 - - - 2020 TN SIR
 - - - NHSN SIR=1

Henry County Medical Center, Paris, Henry County

Medical School Affiliation: Major teaching

Bed Size Category: 50-99 beds



Healthcare-Associated Infections (HAI) Summary

Standardized Infection Ratio (SIR) by Infection Type, 01/01/2019-12/31/2019

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	300	N/A	N/A	0.72
	Adult/Pediatric Ward	0	0.7	975	N/A	N/A	0.52
CAUTI	Adult/Pediatric ICU	1	0.7	891	N/A	N/A	0.74
	Adult/Pediatric Ward	0	1.5	2104	0.00	(0.00, 2.00)	0.78
SSI	Colon surgery	1	0.4	28	N/A	N/A	0.94
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	0.80
LabID	MRSA bacteremia	0	0.7	12608	N/A	N/A	1.19
	C. difficile infection	0	4.8	11047	0.00	(0.00, 0.62)	0.47

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

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

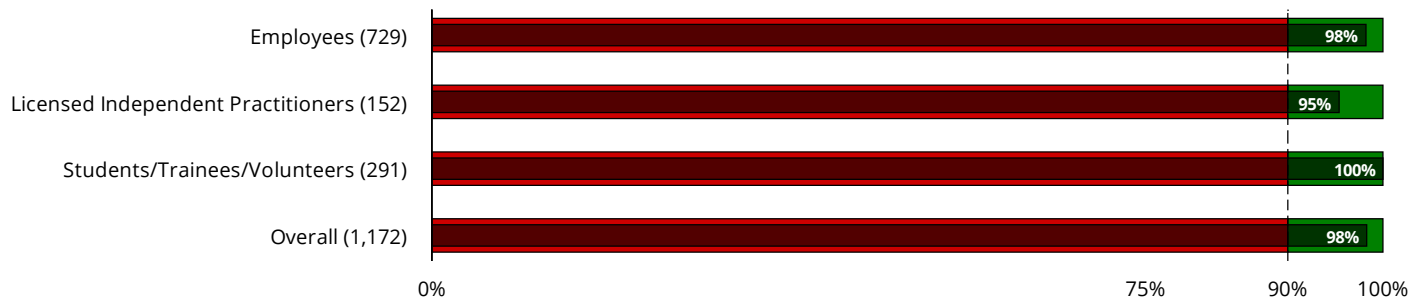
N/A: Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

*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 - '2019/2020' Influenza Season

Healthcare Personnel Category (Total)



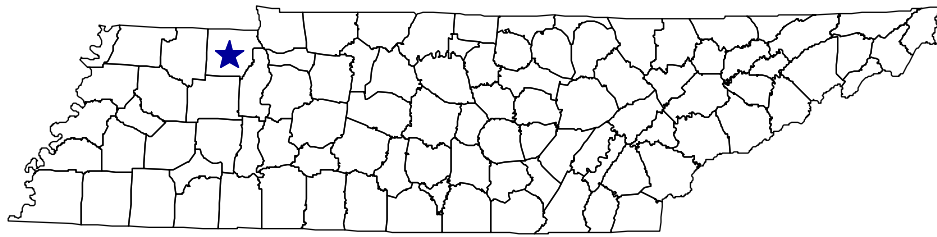
Healthcare Personnel Vaccinated (%)

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

Henry County Medical Center, Paris, Henry County

Medical School Affiliation: Major teaching

Bed Size Category: 50-99 beds



Healthcare-Associated Infections (HAI) Summary

Standardized Infection Ratio (SIR) by Infection Type, 01/01/2020-12/31/2020

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	455	N/A	N/A	0.91
	Adult/Pediatric Ward	0	0.4	642	N/A	N/A	0.65
CAUTI	Adult/Pediatric ICU	0	0.9	1204	N/A	N/A	0.69
	Adult/Pediatric Ward	0	1.2	1822	0.00	(0.00, 2.31)	0.68
SSI	Colon surgery	0	0.3	22	N/A	N/A	0.64
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	1.01
LabID	MRSA bacteremia	0	0.6	12625	N/A	N/A	1.23
	C. difficile infection	1	4.5	11117	0.22	(0.01, 1.09)	0.36

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 - '2020/2021' 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
2020	1	0	0.3	455	N/A
2019	1	0	0.2	300	N/A
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
2020	1	0	0.4	642	N/A
2019	1	0	0.7	975	N/A
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	0.3	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
2020	1	0	0.9	1204	N/A
2019	1	1	0.7	891	N/A
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

YR	N	OBS	PRE	UCD	SIR	SIR & 95% CI
2020	1	0	1.2	1822	0.0	
2019	1	0	1.5	2104	0.0	
2018	1	0	0.9	1991	N/A	
2017	1	0	1.2	1976	0.0	
2016	1	2	1.3	2023	1.5	
2015	1	1	1.1	1792	0.9	

Surgical Site Infections (SSI)

SSI - Colon Surgery

YR	OBS	PRE	PROC	SIR
2020	0	0.3	22	N/A
2019	1	0.4	28	N/A
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
2020	N/A	N/A	N/A	N/A
2019	N/A	N/A	N/A	N/A
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
2020	0	0.6	12625	N/A
2019	0	0.7	12608	N/A
2018	0	0.4	11131	N/A
2017	0	0.3	11385	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
2020	1	4.5	11117	0.2	
2019	0	4.8	11047	0.0	
2018	3	3.5	10362	0.8	
2017	1	4.7	10748	0.2	

Data reported as of June 30, 2021

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;

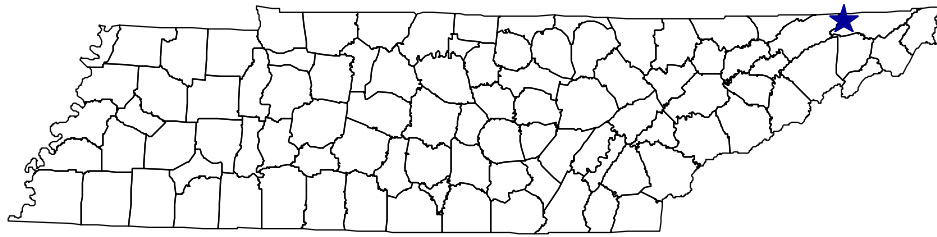
N/A = data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

- Significantly lower than NHSN SIR of 1
- Not significantly different from NHSN SIR of 1
- Significantly higher than NHSN SIR of 1
- 2020 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, 01/01/2019-12/31/2019

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	5.3	4734	1.12	(0.46, 2.34)	0.72
	Neonatal ICU	0	0.6	583	N/A	N/A	0.44
	Adult/Pediatric Ward	2	4.3	4432	0.46	(0.08, 1.53)	0.52
CAUTI	Adult/Pediatric ICU	6	12.7	7995	0.47	(0.19, 0.98)	0.74
	Adult/Pediatric Ward	0	6.3	5059	0.00	(0.00, 0.47)	0.78
SSI	Colon surgery	7	4.0	165	1.72	(0.75, 3.40)	0.94
	Abdominal hysterectomy	2	1.5	316	1.31	(0.22, 4.33)	0.80
LabID	MRSA bacteremia	7	6.8	83167	1.02	(0.45, 2.02)	1.19
	C. difficile infection	38	60.8	80896	0.62	(0.45, 0.85)	0.47

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 - '2019/2020' Influenza Season

Healthcare Personnel Category (Total)



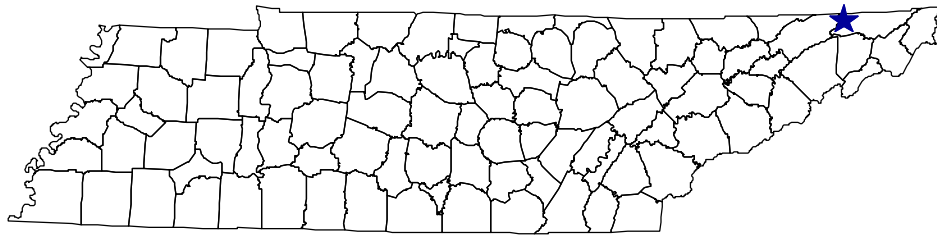
Healthcare Personnel Vaccinated (%)

■ 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, 01/01/2020-12/31/2020

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	4084	0.22	(0.01, 1.07)	0.91
	Adult/Pediatric Ward	3	5.0	5179	0.59	(0.15, 1.62)	0.65
CAUTI	Adult/Pediatric ICU	2	9.3	7112	0.21	(0.04, 0.71)	0.69
	Adult/Pediatric Ward	3	7.9	6861	0.38	(0.10, 1.02)	0.68
SSI	Colon surgery	3	4.4	189	0.67	(0.17, 1.84)	0.64
	Abdominal hysterectomy	3	1.3	257	2.30	(0.58, 6.25)	1.01
LabID	MRSA bacteremia	6	6.3	76936	0.95	(0.38, 1.97)	1.23
	C. difficile infection	13	42.7	76776	0.30	(0.17, 0.51)	0.36

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 - '2020/2021' Influenza Season

Healthcare Personnel Category (Total)

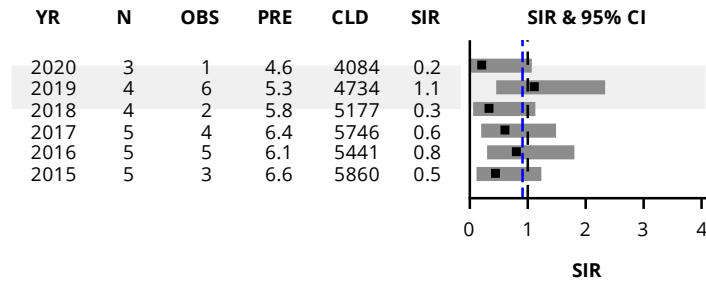


Healthcare Personnel Vaccinated (%)

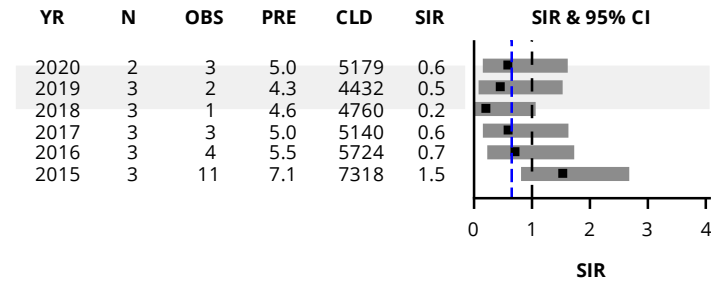
■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric ICUs

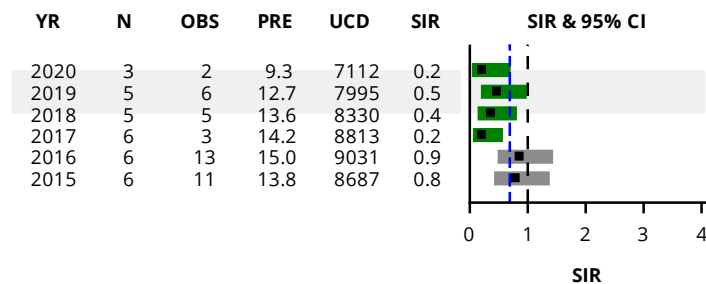


CLABSI - Adult/Pediatric Wards

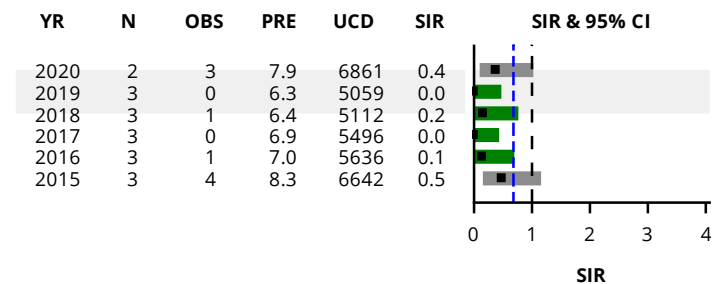


Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICUs

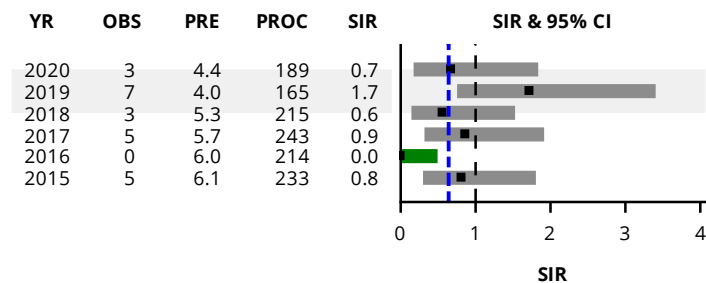


CAUTI - Adult/Pediatric Wards

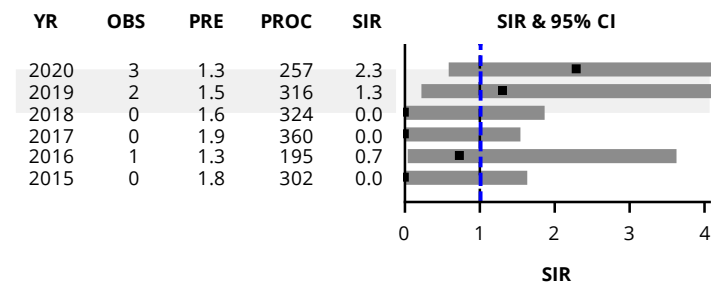


Surgical Site Infections (SSI)

SSI - Colon Surgery

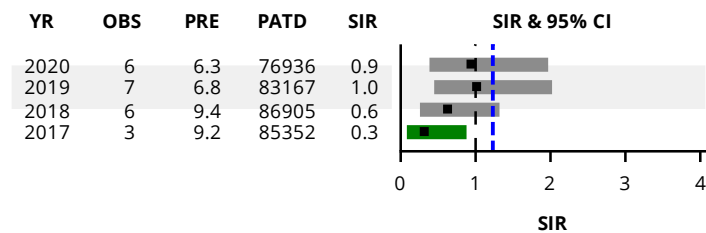


SSI - Abdominal Hysterectomy

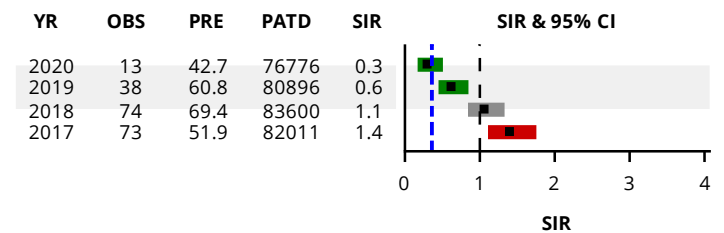


Healthcare Facility-Onset Laboratory Identified (LabID) Events

LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia



LabID - *C. difficile* Infection (CDI)



Data reported as of June 30, 2021

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

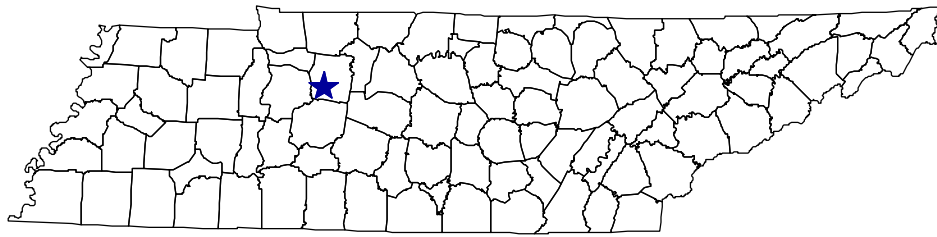
--- 2020 TN SIR

--- NHSN SIR=1

Horizon Medical Center, Dickson, Dickson County

Medical School Affiliation: Undergraduate teaching

Bed Size Category: 100-399 beds



Healthcare-Associated Infections (HAI) Summary

Standardized Infection Ratio (SIR) by Infection Type, 01/01/2019-12/31/2019

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	362	N/A	N/A	0.72
	Adult/Pediatric Ward	0	0.4	764	N/A	N/A	0.52
CAUTI	Adult/Pediatric ICU	0	0.6	828	N/A	N/A	0.74
	Adult/Pediatric Ward	0	0.7	1136	N/A	N/A	0.78
SSI	Colon surgery	1	1.0	43	0.99	(0.05, 4.89)	0.94
	Abdominal hysterectomy	0	0.3	48	N/A	N/A	0.80
LabID	MRSA bacteremia	0	0.9	22671	N/A	N/A	1.19
	C. difficile infection	3	8.1	21100	0.37	(0.09, 1.00)	0.47

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

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

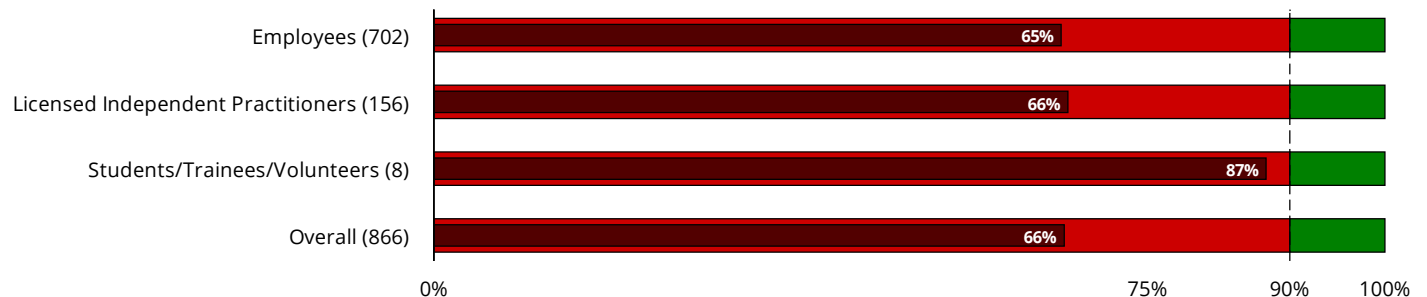
N/A: Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

*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 - '2019/2020' Influenza Season

Healthcare Personnel Category (Total)

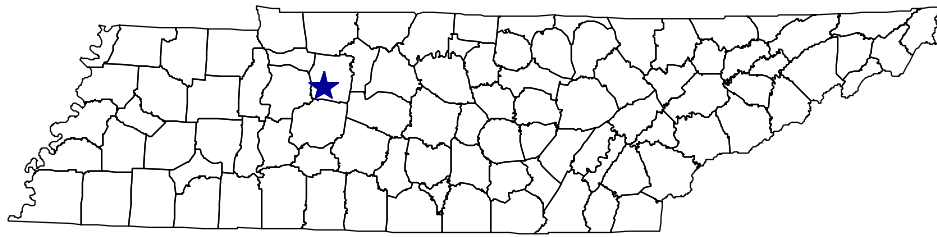


■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

Horizon Medical Center, Dickson, Dickson County

Medical School Affiliation: Undergraduate teaching

Bed Size Category: 100-399 beds



Healthcare-Associated Infections (HAI) Summary

Standardized Infection Ratio (SIR) by Infection Type, 01/01/2020-12/31/2020

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	583	N/A	N/A	0.91
	Adult/Pediatric Ward	0	0.5	795	N/A	N/A	0.65
CAUTI	Adult/Pediatric ICU	0	0.6	884	N/A	N/A	0.69
	Adult/Pediatric Ward	0	1.0	1569	0.00	(0.00, 2.80)	0.68
SSI	Colon surgery	0	1.0	43	0.00	(0.00, 2.84)	0.64
	Abdominal hysterectomy	0	0.3	52	N/A	N/A	1.01
LabID	MRSA bacteremia	0	0.8	25411	N/A	N/A	1.23
	C. difficile infection	0	8.6	24018	0.00	(0.00, 0.35)	0.36

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

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

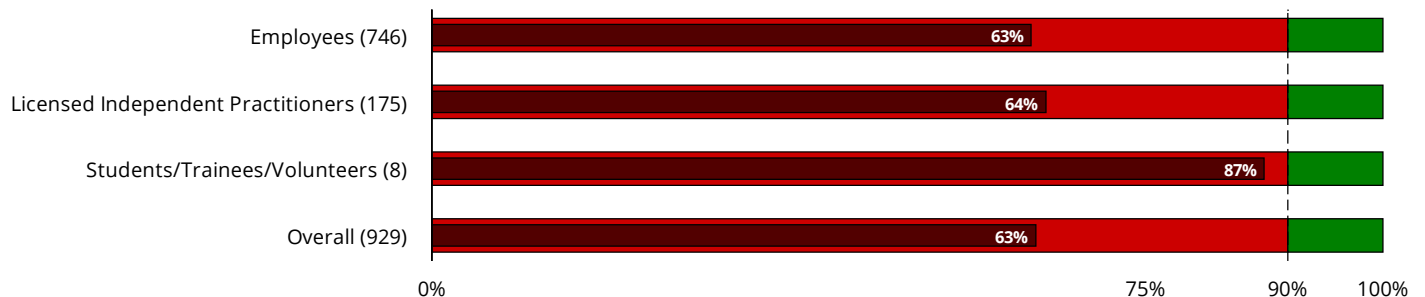
N/A: Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

*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 - '2020/2021' 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
2020	1	0	0.4	583	N/A
2019	1	0	0.2	362	N/A
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
2020	2	0	0.5	795	N/A
2019	2	0	0.4	764	N/A
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
2020	1	0	0.6	884	N/A
2019	1	0	0.6	828	N/A
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
2020	2	0	1.0	1569	0.0	
2019	2	0	0.7	1136	N/A	
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	

Surgical Site Infections (SSI)

SSI - Colon Surgery

YR	OBS	PRE	PROC	SIR	SIR & 95% CI
2020	0	1.0	43	0.0	
2019	1	1.0	43	1.0	
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	

SSI - Abdominal Hysterectomy

YR	OBS	PRE	PROC	SIR
2020	0	0.3	52	N/A
2019	0	0.3	48	N/A
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
2020	0	0.8	25411	N/A
2019	0	0.9	22671	N/A
2018	2	0.8	20500	N/A
2017	0	0.7	19828	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
2020	0	8.6	24018	0.0	
2019	3	8.1	21100	0.4	
2018	6	11.6	19252	0.5	
2017	7	12.8	18888	0.5	

Data reported as of June 30, 2021

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;

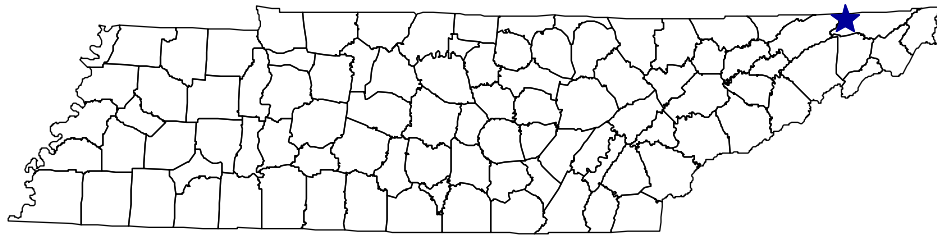
N/A = data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

- Significantly lower than NHSN SIR of 1
- Not significantly different from NHSN SIR of 1
- Significantly higher than NHSN SIR of 1
- - - 2020 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, 01/01/2019-12/31/2019

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	574	N/A	N/A	0.72
	Adult/Pediatric Ward	0	0.4	607	N/A	N/A	0.52
CAUTI	Adult/Pediatric ICU	1	0.8	1323	N/A	N/A	0.74
	Adult/Pediatric Ward	1	0.4	873	N/A	N/A	0.78
SSI	Colon surgery	2	1.0	57	1.83	(0.31, 6.06)	0.94
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	0.80
LabID	MRSA bacteremia	0	0.9	21460	N/A	N/A	1.19
	C. difficile infection	9	11.8	20219	0.76	(0.37, 1.40)	0.47

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

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

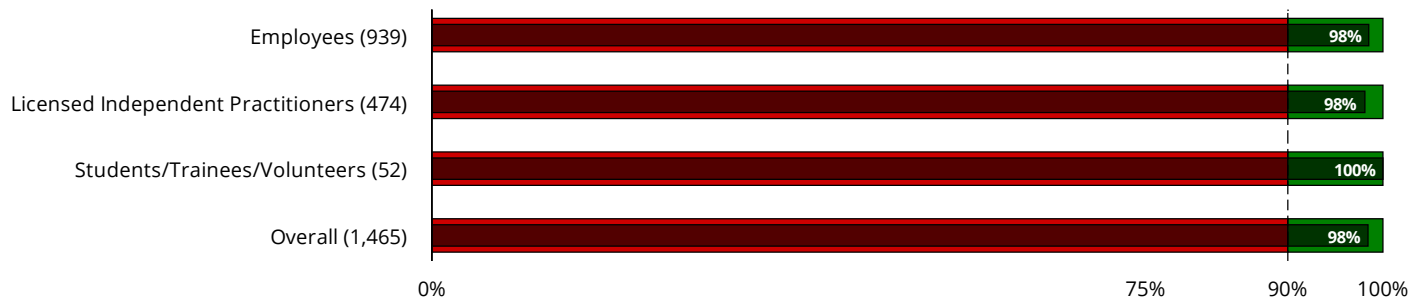
N/A: Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

*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 - '2019/2020' Influenza Season

Healthcare Personnel Category (Total)



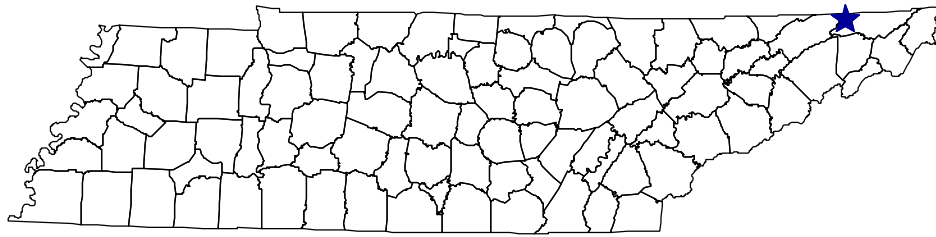
Healthcare Personnel Vaccinated (%)

■ 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, 01/01/2020-12/31/2020

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	157	N/A	N/A	0.91
	Adult/Pediatric Ward	0	0.0	103	N/A	N/A	0.65
CAUTI	Adult/Pediatric ICU	0	0.2	448	N/A	N/A	0.69
	Adult/Pediatric Ward	0	0.1	218	N/A	N/A	0.68
SSI	Colon surgery	2	0.7	40	N/A	N/A	0.64
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	1.01
LabID	MRSA bacteremia	0	0.2	8270	N/A	N/A	1.23
	C. difficile infection	2	1.4	6777	1.37	(0.23, 4.54)	0.36

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 - '2020/2021' 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
2020	1	0	0.1	157	N/A
2019	1	0	0.4	574	N/A
2018	1	0	0.6	802	N/A
2017	1	0	0.7	950	N/A
2016	1	1	1.2	1234	0.8
2015	1	2	1.4	1412	1.4

N/A: Number of predicted infections <1; no SIR calculated

CLABSI - Adult/Pediatric Wards

YR	N	OBS	PRE	CLD	SIR
2020	1	0	0.0	103	N/A
2019	1	0	0.4	607	N/A
2018	2	0	0.3	481	N/A
2017	2	0	0.4	711	N/A
2016	2	0	0.8	965	N/A
2015	2	0	1.5	1798	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
2020	1	0	0.2	448	N/A
2019	1	1	0.8	1323	N/A
2018	1	0	0.7	1208	N/A
2017	1	0	1.3	1584	0.0
2016	1	1	1.7	1713	0.6
2015	1	0	2.0	1975	0.0

N/A: Number of predicted infections <1; no SIR calculated

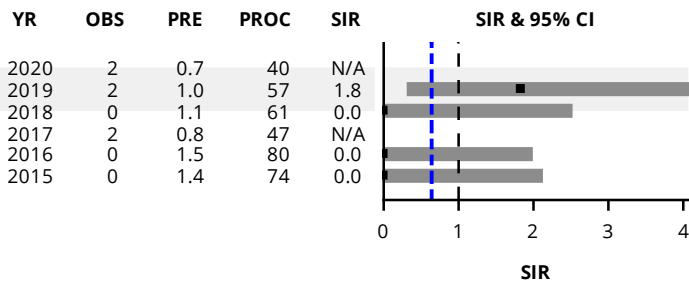
CAUTI - Adult/Pediatric Wards

YR	N	OBS	PRE	UCD	SIR
2020	1	0	0.1	218	N/A
2019	1	1	0.4	873	N/A
2018	2	0	0.5	1014	N/A
2017	2	1	1.1	1479	0.9
2016	2	0	1.4	1591	0.0
2015	2	1	2.0	2296	0.5

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
2020	N/A	N/A	N/A	N/A
2019	N/A	N/A	N/A	N/A
2018	0	0.1	31	N/A
2017	0	0.0	21	N/A
2016	1	0.2	29	N/A
2015	0	0.1	21	N/A

N/A: Number of predicted infections <1; no SIR calculated

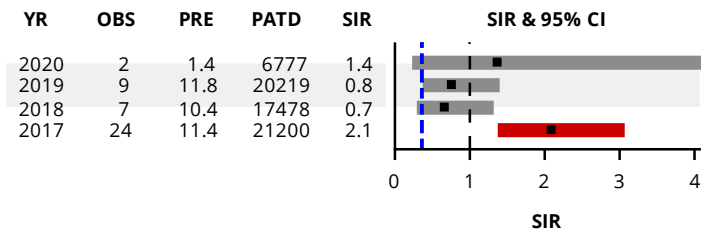
Healthcare Facility-Onset Laboratory Identified (LabID) Events

LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia

YR	OBS	PRE	PATD	SIR
2020	0	0.2	8270	N/A
2019	0	0.9	21460	N/A
2018	1	0.8	18756	N/A
2017	0	1.1	22641	0.0

N/A: Number of predicted infections <1; no SIR calculated

LabID - *C. difficile* Infection (CDI)



Data reported as of June 30, 2021

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

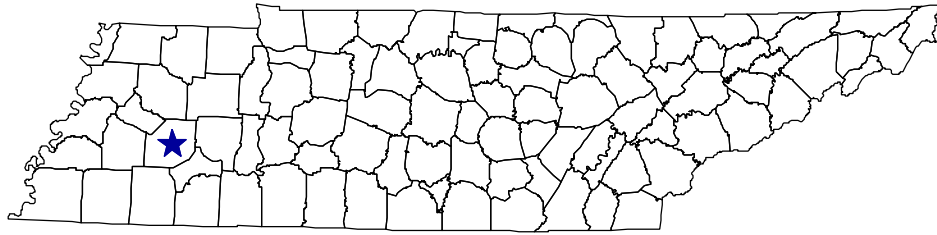
--- 2020 TN SIR

--- NHSN SIR=1

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, 01/01/2019-12/31/2019

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	14	10.9	9713	1.28	(0.73, 2.09)	0.72
	Neonatal ICU	3	0.9	510	N/A	N/A	0.44
	Adult/Pediatric Ward	9	10.2	10495	0.88	(0.43, 1.61)	0.52
CAUTI	Adult/Pediatric ICU	23	21.1	12050	1.09	(0.71, 1.61)	0.74
	Adult/Pediatric Ward	11	9.8	8148	1.12	(0.59, 1.94)	0.78
SSI	Colon surgery	13	9.9	392	1.31	(0.73, 2.18)	0.94
	Abdominal hysterectomy	4	2.1	289	1.88	(0.60, 4.53)	0.80
LabID	MRSA bacteremia	22	13.1	156728	1.67	(1.08, 2.49)	1.19
	C. difficile infection	60	100.6	144459	0.60	(0.46, 0.76)	0.47

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.

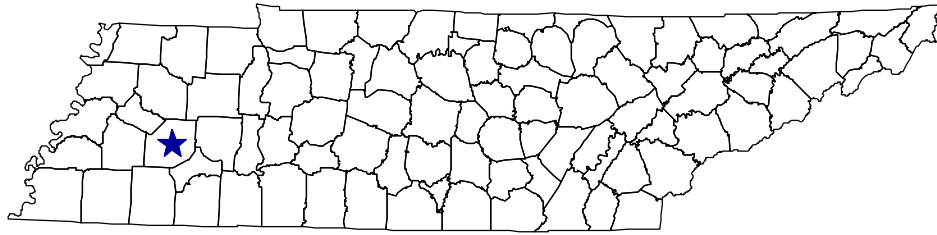
Healthcare Personnel Influenza Vaccination - '2019/2020' Influenza Season

This facility utilized the COVID-19 related CMS reporting exemption for the '2019/2020' influenza season. See the CMS website for more information.

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, 01/01/2020-12/31/2020

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	14.0	12432	0.86	(0.46, 1.45)	0.91
	Neonatal ICU	0	0.5	312	N/A	N/A	0.62
	Adult/Pediatric Ward	4	9.7	10035	0.41	(0.13, 0.99)	0.65
CAUTI	Adult/Pediatric ICU	29	26.2	14845	1.10	(0.75, 1.57)	0.69
	Adult/Pediatric Ward	4	10.4	8621	0.38	(0.12, 0.93)	0.68
SSI	Colon surgery	13	8.1	317	1.59	(0.89, 2.66)	0.64
	Abdominal hysterectomy	0	1.2	147	0.00	(0.00, 2.39)	1.01
LabID	MRSA bacteremia	19	16.9	156139	1.12	(0.69, 1.71)	1.23
	C. difficile infection	35	74.1	145572	0.47	(0.33, 0.65)	0.36

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 - '2020/2021' Influenza Season

Healthcare Personnel Category (Total)

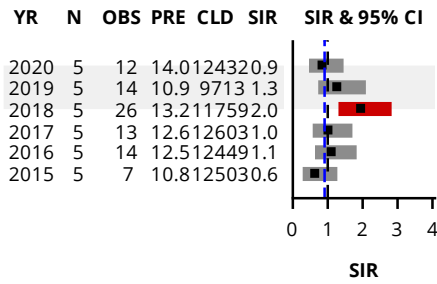


Healthcare Personnel Vaccinated (%)

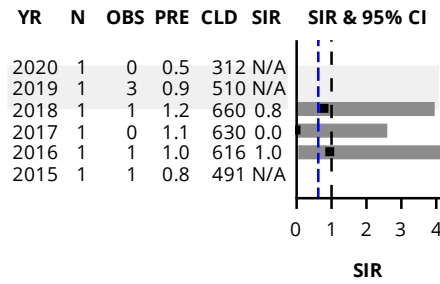
■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

Central Line-Associated Bloodstream Infections (CLABSI)

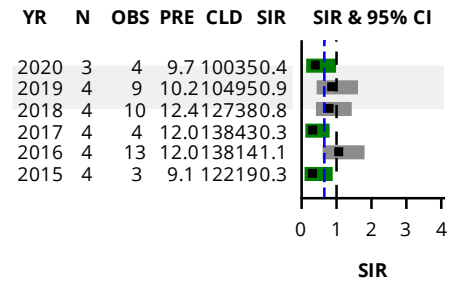
CLABSI - Adult/Pediatric ICUs



CLABSI - Neonatal ICUs

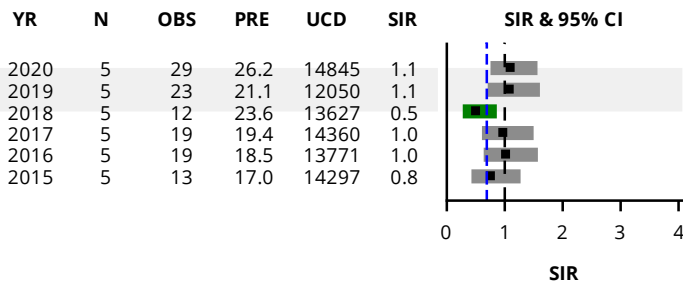


CLABSI - Adult/Pediatric Wards

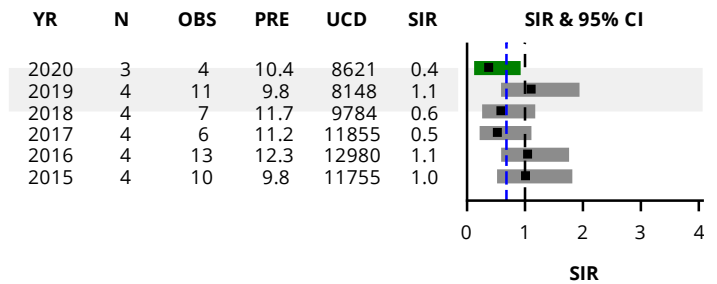


Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICUs

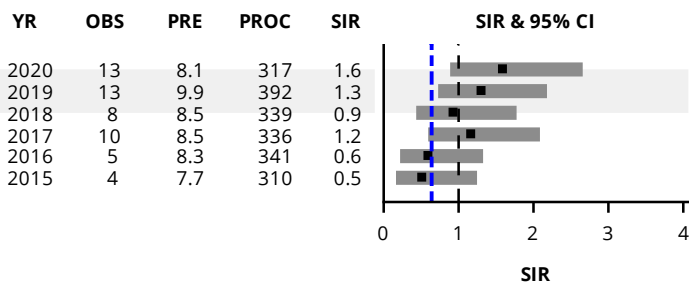


CAUTI - Adult/Pediatric Wards

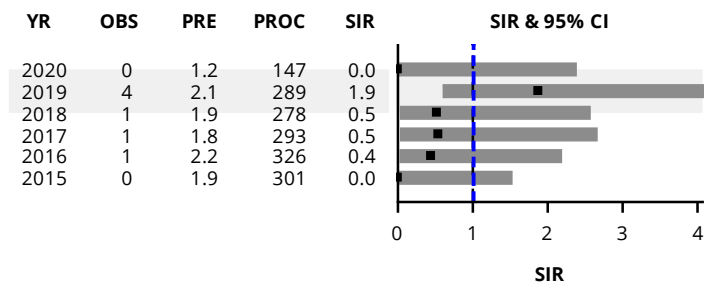


Surgical Site Infections (SSI)

SSI - Colon Surgery

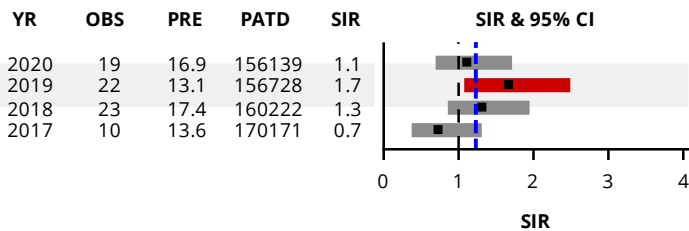


SSI - Abdominal Hysterectomy

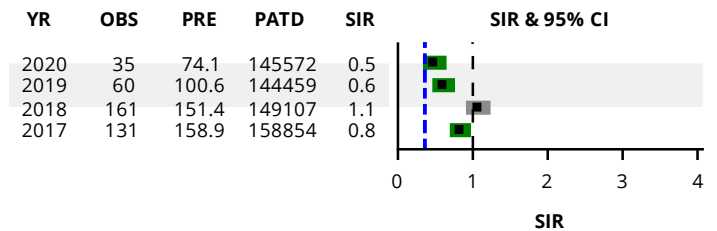


Healthcare Facility-Onset Laboratory Identified (LabID) Events

LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia



LabID - *C. difficile* Infection (CDI)



Data reported as of June 30, 2021

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

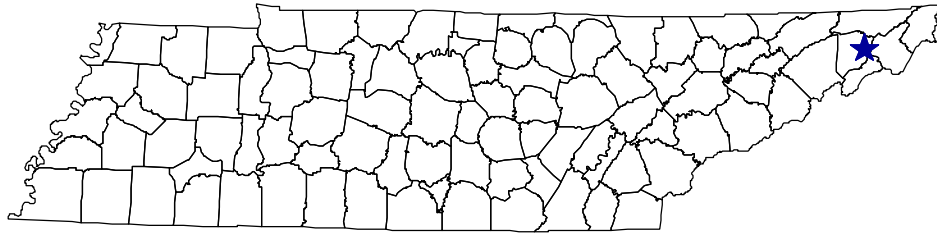
--- 2020 TN SIR

--- 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, 01/01/2019-12/31/2019

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	6.8	5964	0.73	(0.27, 1.62)	0.72
	Neonatal ICU	1	1.5	1084	0.65	(0.03, 3.21)	0.44
	Adult/Pediatric Ward	2	1.9	1987	1.03	(0.17, 3.41)	0.52
CAUTI	Adult/Pediatric ICU	11	10.1	6199	1.09	(0.57, 1.89)	0.74
	Adult/Pediatric Ward	2	2.0	1745	0.97	(0.16, 3.19)	0.78
SSI	Colon surgery	7	3.1	127	2.21	(0.97, 4.37)	0.94
	Abdominal hysterectomy	0	0.2	28	N/A	N/A	0.80
LabID	MRSA bacteremia	10	10.6	128796	0.94	(0.48, 1.68)	1.19
	C. difficile infection	39	84.0	118641	0.46	(0.33, 0.63)	0.47

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

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

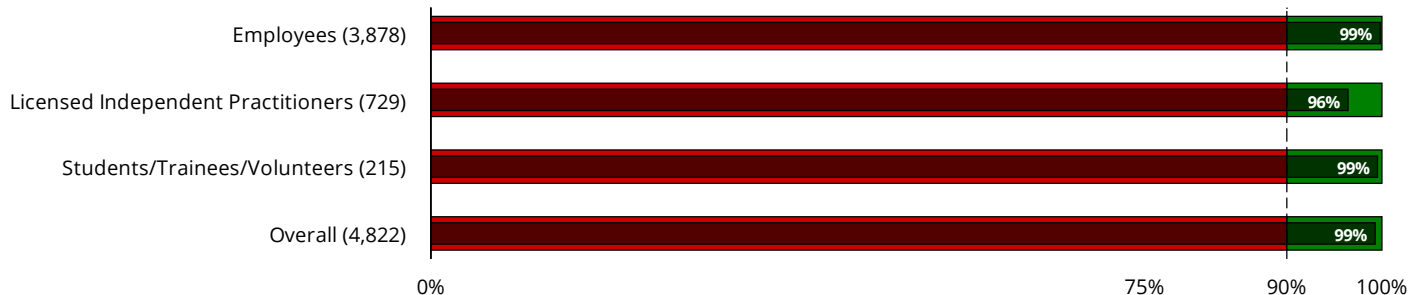
N/A: Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

*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 - '2019/2020' Influenza Season

Healthcare Personnel Category (Total)



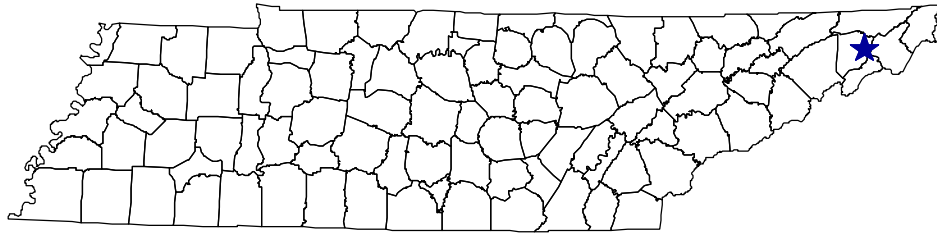
Healthcare Personnel Vaccinated (%)

■ 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, 01/01/2020-12/31/2020

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	5.9	5171	1.19	(0.52, 2.35)	0.91
	Neonatal ICU	6	1.6	1428	3.63	(1.47, 7.55)	0.62
	Adult/Pediatric Ward	1	1.3	1352	0.76	(0.04, 3.74)	0.65
CAUTI	Adult/Pediatric ICU	4	10.1	6479	0.39	(0.13, 0.95)	0.69
	Adult/Pediatric Ward	2	1.8	1552	1.10	(0.18, 3.64)	0.68
SSI	Colon surgery	3	2.4	93	1.24	(0.32, 3.38)	0.64
	Abdominal hysterectomy	0	0.1	20	N/A	N/A	1.01
LabID	MRSA bacteremia	15	11.1	123103	1.35	(0.78, 2.17)	1.23
	C. difficile infection	25	52.5	108141	0.48	(0.32, 0.69)	0.36

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 - '2020/2021' Influenza Season

Healthcare Personnel Category (Total)

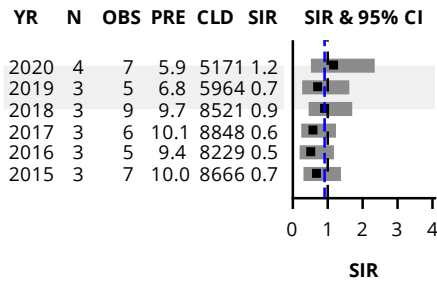


Healthcare Personnel Vaccinated (%)

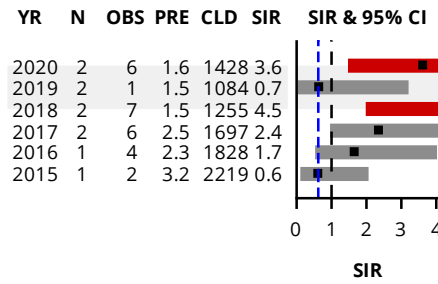
■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

Central Line-Associated Bloodstream Infections (CLABSI)

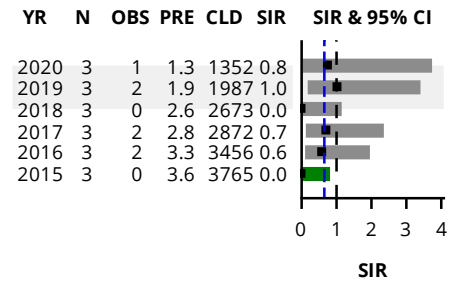
CLABSI - Adult/Pediatric ICUs



CLABSI - Neonatal ICUs

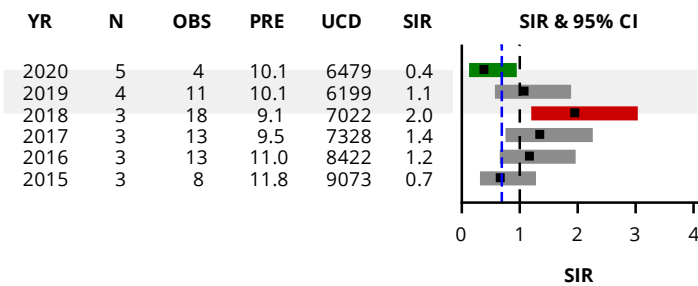


CLABSI - Adult/Pediatric Wards

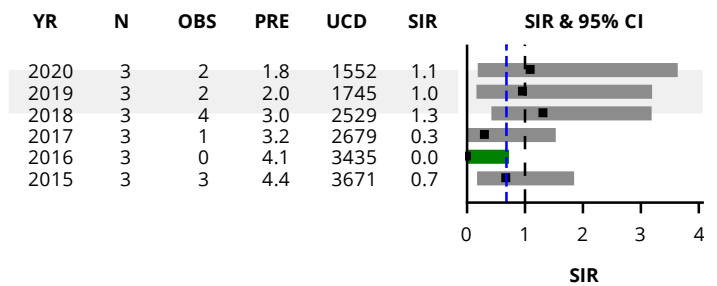


Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICUs

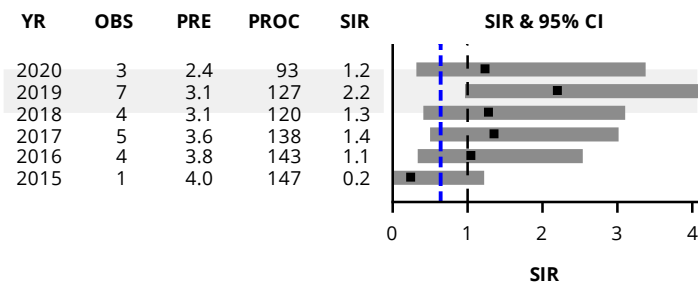


CAUTI - Adult/Pediatric Wards

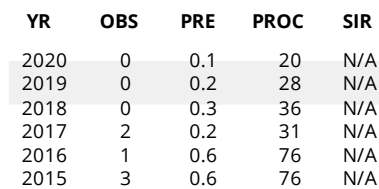


Surgical Site Infections (SSI)

SSI - Colon Surgery



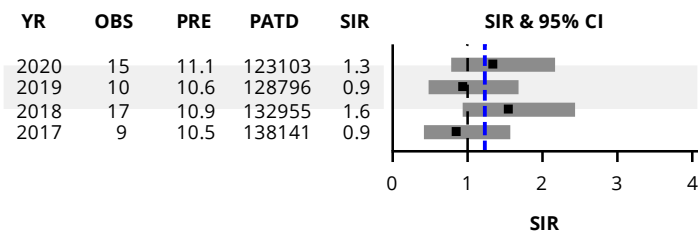
SSI - Abdominal Hysterectomy



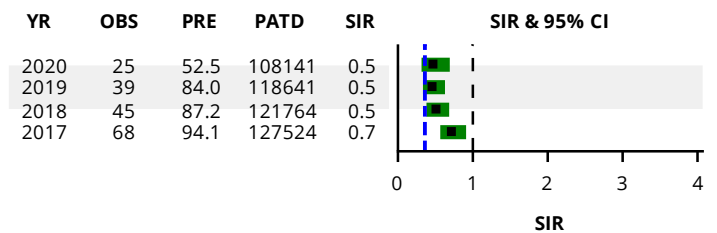
N/A: Number of predicted infections <1; no SIR calculated

Healthcare Facility-Onset Laboratory Identified (LabID) Events

LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia



LabID - *C. difficile* Infection (CDI)



Data reported as of June 30, 2021

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

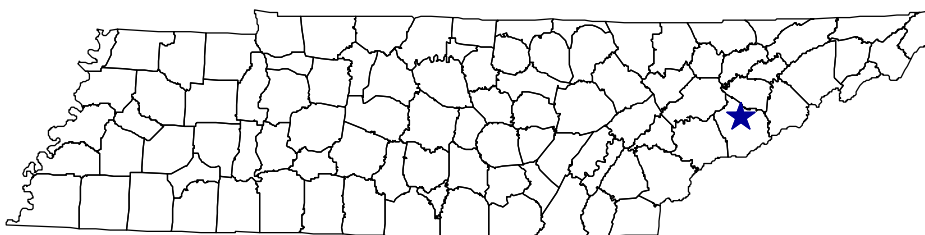
--- 2020 TN SIR

--- 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, 01/01/2019-12/31/2019

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	599	N/A	N/A	0.72
	Adult/Pediatric Ward	0	0.3	646	N/A	N/A	0.52
CAUTI	Adult/Pediatric ICU	1	0.4	872	N/A	N/A	0.74
	Adult/Pediatric Ward	1	0.3	811	N/A	N/A	0.78
SSI	Colon surgery	0	1.0	51	0.00	(0.00, 2.93)	0.94
	Abdominal hysterectomy	0	0.2	58	N/A	N/A	0.80
LabID	MRSA bacteremia	0	0.8	18316	N/A	N/A	1.19
	C. difficile infection	4	8.2	16503	0.48	(0.15, 1.17)	0.47

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

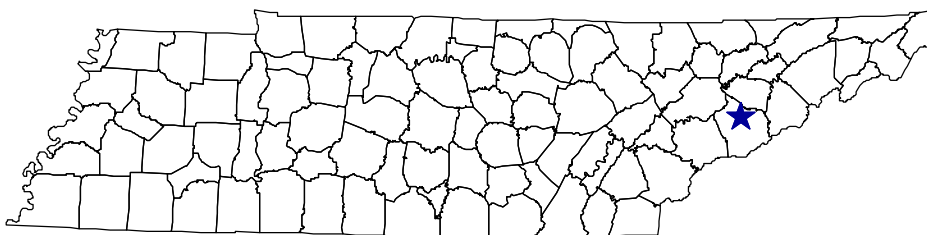
Healthcare Personnel Influenza Vaccination - '2019/2020' Influenza Season

This facility utilized the COVID-19 related CMS reporting exemption for the '2019/2020' influenza season. See the CMS website for more information.

LeConte Medical Center, Sevierville, Sevier County

Medical School Affiliation: Undergraduate teaching

Bed Size Category: 50-99 beds



Healthcare-Associated Infections (HAI) Summary

Standardized Infection Ratio (SIR) by Infection Type, 01/01/2020-12/31/2020

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	0.6	986	N/A	N/A	0.91
	Adult/Pediatric Ward	0	0.4	726	N/A	N/A	0.65
CAUTI	Adult/Pediatric ICU	1	0.7	1375	N/A	N/A	0.69
	Adult/Pediatric Ward	0	0.5	1060	N/A	N/A	0.68
SSI	Colon surgery	0	0.4	22	N/A	N/A	0.64
	Abdominal hysterectomy	0	0.2	41	N/A	N/A	1.01
LabID	MRSA bacteremia	2	0.9	18550	N/A	N/A	1.23
	C. difficile infection	1	8.5	16929	0.12	(0.01, 0.58)	0.36

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

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

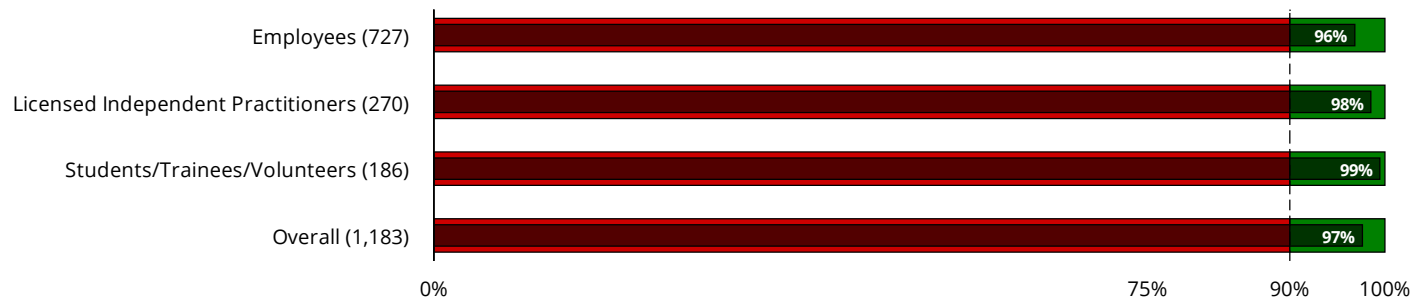
N/A: Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

*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 - '2020/2021' 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
2020	1	2	0.6	986	N/A
2019	1	0	0.4	599	N/A
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
2020	1	0	0.4	726	N/A
2019	1	0	0.3	646	N/A
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
2020	1	1	0.7	1375	N/A
2019	1	1	0.4	872	N/A
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

N/A: Number of predicted infections <1; no SIR calculated

CAUTI - Adult/Pediatric Wards

YR	N	OBS	PRE	UCD	SIR
2020	1	0	0.5	1060	N/A
2019	1	1	0.3	811	N/A
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
2020	0	0.4	22	N/A
2019	0	1.0	51	0.0
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

SSI - Abdominal Hysterectomy

YR	OBS	PRE	PROC	SIR
2020	0	0.2	41	N/A
2019	0	0.2	58	N/A
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
2020	2	0.9	18550	N/A
2019	0	0.8	18316	N/A
2018	0	0.7	18180	N/A
2017	2	0.8	22215	N/A

N/A: Number of predicted infections <1; no SIR calculated

LabID - *C. difficile* Infection (CDI)

YR	OBS	PRE	PATD	SIR
2020	1	8.5	16929	0.1
2019	4	8.2	16503	0.5
2018	4	7.5	16486	0.5
2017	10	10.9	20402	0.9

Data reported as of June 30, 2021

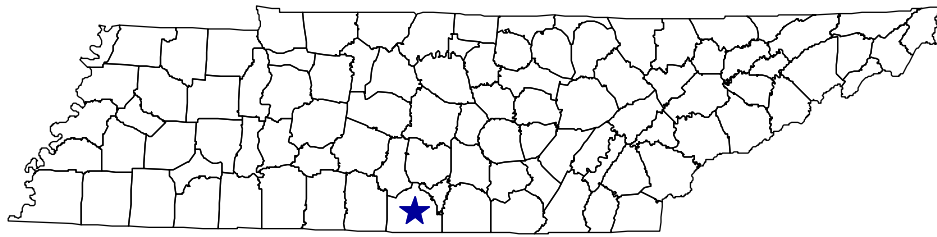
YR = reporting year; N = number of units reporting (CLABSI/CAUTI); OBS = observed number of infections
 PRE = statistically 'predicted' number of infections, based on NHSN national baseline data
 SIR = standardized infection ratio (observed/predicted number of infections)
 CLD = central line days; UCD = 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
 - - - NHSN SIR=1
 - - - 2020 TN SIR

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, 01/01/2019-12/31/2019

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	148	N/A	N/A	0.72
	Adult/Pediatric Ward	0	0.0	141	N/A	N/A	0.52
CAUTI	Adult/Pediatric ICU	0	0.1	348	N/A	N/A	0.74
	Adult/Pediatric Ward	0	0.1	404	N/A	N/A	0.78
SSI	Colon surgery	N/A	N/A	N/A	N/A	N/A	0.94
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	0.80
LabID	MRSA bacteremia	0	0.1	5080	N/A	N/A	1.19
	C. difficile infection	0	2.8	4613	0.00	(0.00, 1.04)	0.47

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

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

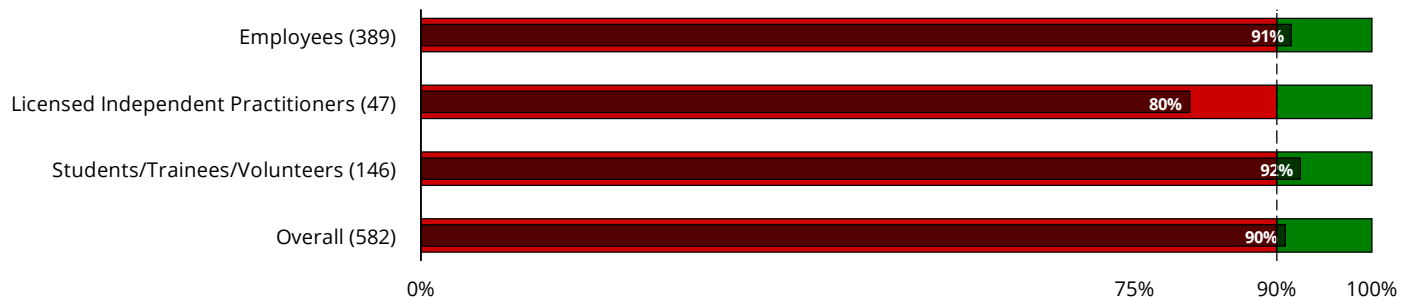
N/A: Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

*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 - '2019/2020' Influenza Season

Healthcare Personnel Category (Total)



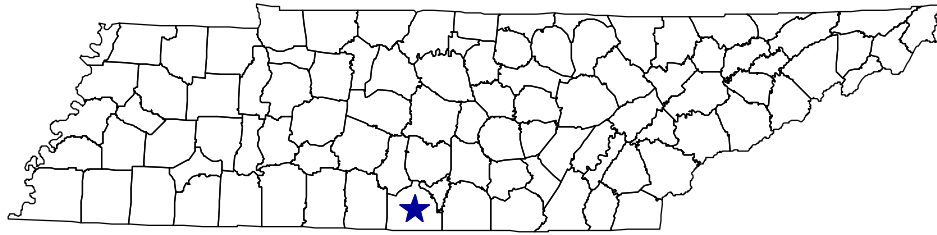
Healthcare Personnel Vaccinated (%)

■ 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, 01/01/2020-12/31/2020

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	286	N/A	N/A	0.91
	Adult/Pediatric Ward	0	0.1	197	N/A	N/A	0.65
CAUTI	Adult/Pediatric ICU	0	0.2	449	N/A	N/A	0.69
	Adult/Pediatric Ward	0	0.2	408	N/A	N/A	0.68
SSI	Colon surgery	N/A	N/A	N/A	N/A	N/A	0.64
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	1.01
LabID	MRSA bacteremia	0	0.1	5235	N/A	N/A	1.23
	C. difficile infection	0	3.0	4793	0.00	(0.00, 1.00)	0.36

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

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

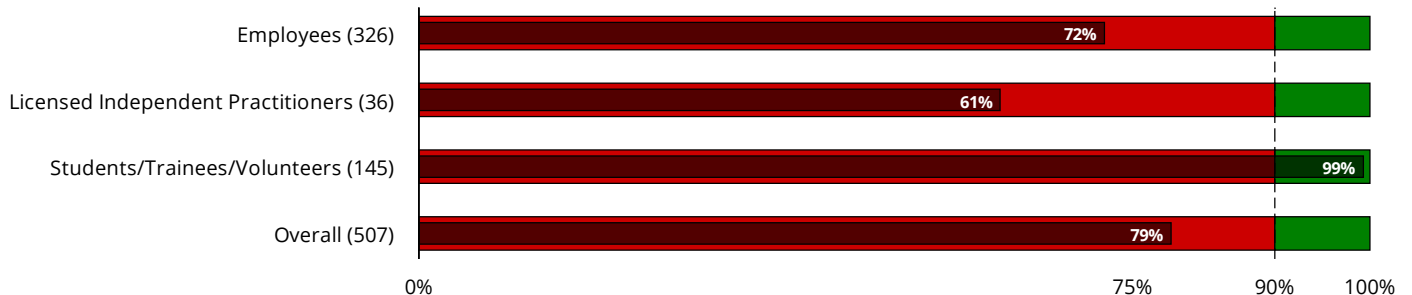
N/A: Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

*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 - '2020/2021' 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
2020	1	0	0.1	286	N/A
2019	1	0	0.0	148	N/A
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
2020	1	0	0.1	197	N/A
2019	1	0	0.0	141	N/A
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
2020	1	0	0.2	449	N/A
2019	1	0	0.1	348	N/A
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
2020	1	0	0.2	408	N/A
2019	1	0	0.1	404	N/A
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
2020	N/A	N/A	N/A	N/A
2019	N/A	N/A	N/A	N/A
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
2020	N/A	N/A	N/A	N/A
2019	N/A	N/A	N/A	N/A
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

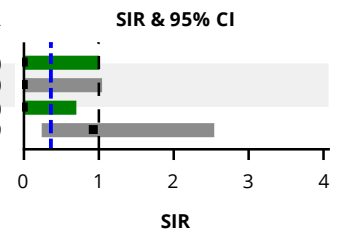
LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia

YR	OBS	PRE	PATD	SIR
2020	0	0.1	5235	N/A
2019	0	0.1	5080	N/A
2018	0	0.0	4800	N/A
2017	0	0.1	5928	N/A

N/A: Number of predicted infections <1; no SIR calculated

LabID - *C. difficile* Infection (CDI)

YR	OBS	PRE	PATD	SIR
2020	0	3.0	4793	0.0
2019	0	2.8	4613	0.0
2018	0	4.2	4274	0.0
2017	3	3.2	5885	0.9



Data reported as of June 30, 2021

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;

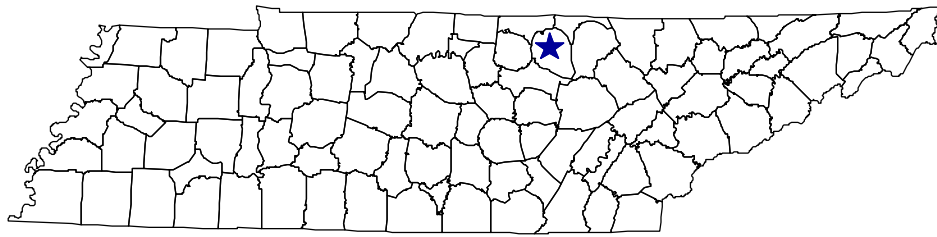
N/A = data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

- Significantly lower than NHSN SIR of 1
- Not significantly different from NHSN SIR of 1
- Significantly higher than NHSN SIR of 1
- - - 2020 TN SIR
- - - NHSN SIR=1

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, 01/01/2019-12/31/2019

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	0.72
	Adult/Pediatric Ward	0	0.0	163	N/A	N/A	0.52
CAUTI	Adult/Pediatric ICU	1	0.0	86	N/A	N/A	0.74
	Adult/Pediatric Ward	3	0.9	1465	N/A	N/A	0.78
SSI	Colon surgery	N/A	N/A	N/A	N/A	N/A	0.94
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	0.80
LabID	MRSA bacteremia	0	0.2	6913	N/A	N/A	1.19
	C. difficile infection	4	5.5	6826	0.72	(0.23, 1.75)	0.47

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 - '2019/2020' Influenza Season

Healthcare Personnel Category (Total)



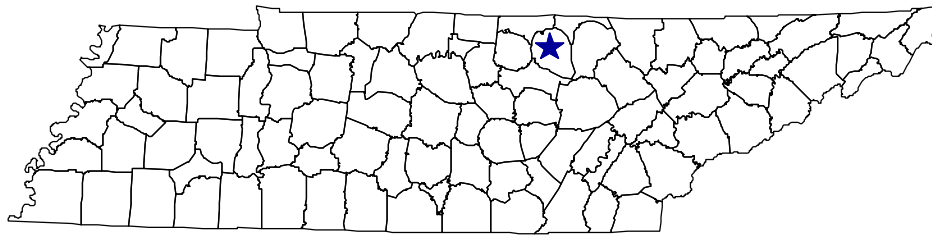
Healthcare Personnel Vaccinated (%)

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

Livingston Regional Hospital, Livingston, Overton County

Medical School Affiliation: Undergraduate teaching

Bed Size Category: 100-399 beds



Healthcare-Associated Infections (HAI) Summary

Standardized Infection Ratio (SIR) by Infection Type, 01/01/2020-12/31/2020

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	0.91
	Adult/Pediatric Ward	0	0.0	83	N/A	N/A	0.65
CAUTI	Adult/Pediatric ICU	1	0.0	83	N/A	N/A	0.69
	Adult/Pediatric Ward	0	0.9	1387	N/A	N/A	0.68
SSI	Colon surgery	N/A	N/A	N/A	N/A	N/A	0.64
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	1.01
LabID	MRSA bacteremia	0	0.1	4728	N/A	N/A	1.23
	C. difficile infection	4	2.5	4728	1.57	(0.50, 3.79)	0.36

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 - '2020/2021' 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
2020	1	N/A	N/A	N/A	N/A
2019	1	N/A	N/A	N/A	N/A
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
2020	1	0	0.0	83	N/A
2019	1	0	0.0	163	N/A
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
2020	1	1	0.0	83	N/A
2019	1	1	0.0	86	N/A
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
2020	1	0	0.9	1387	N/A
2019	1	3	0.9	1465	N/A
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

N/A: Number of predicted infections <1; no SIR calculated

Surgical Site Infections (SSI)

SSI - Colon Surgery

YR	OBS	PRE	PROC	SIR
2020	N/A	N/A	N/A	N/A
2019	N/A	N/A	N/A	N/A
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
2020	N/A	N/A	N/A	N/A
2019	N/A	N/A	N/A	N/A
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

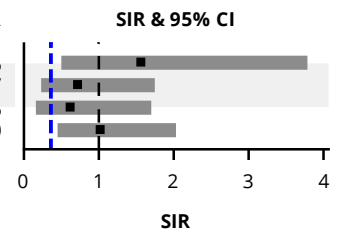
LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia

YR	OBS	PRE	PATD	SIR
2020	0	0.1	4728	N/A
2019	0	0.2	6913	N/A
2018	0	0.1	7026	N/A
2017	0	0.1	8578	N/A

N/A: Number of predicted infections <1; no SIR calculated

LabID - *C. difficile* Infection (CDI)

YR	OBS	PRE	PATD	SIR
2020	4	2.5	4728	1.6
2019	4	5.5	6826	0.7
2018	3	4.8	7026	0.6
2017	7	6.8	8532	1.0



Data reported as of June 30, 2021

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;

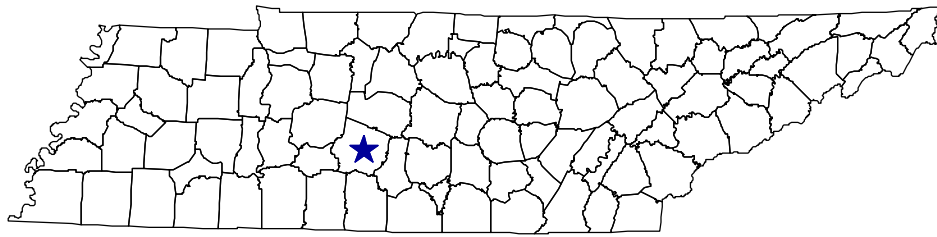
N/A = data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

- Significantly lower than NHSN SIR of 1
- Not significantly different from NHSN SIR of 1
- Significantly higher than NHSN SIR of 1
- - - 2020 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, 01/01/2019-12/31/2019

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	2.7	3162	0.73	(0.12, 2.41)	0.72
	Neonatal ICU	0	0.0	101	N/A	N/A	0.44
	Adult/Pediatric Ward	1	1.3	1773	0.75	(0.04, 3.71)	0.52
CAUTI	Adult/Pediatric ICU	2	4.3	4863	0.46	(0.08, 1.52)	0.74
	Adult/Pediatric Ward	4	1.9	2312	2.01	(0.64, 4.85)	0.78
SSI	Colon surgery	5	3.8	174	1.31	(0.48, 2.89)	0.94
	Abdominal hysterectomy	0	1.0	152	0.00	(0.00, 2.82)	0.80
LabID	MRSA bacteremia	0	2.7	61403	0.00	(0.00, 1.11)	1.19
	C. difficile infection	7	25.9	59421	0.27	(0.12, 0.53)	0.47

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 - '2019/2020' Influenza Season

Healthcare Personnel Category (Total)



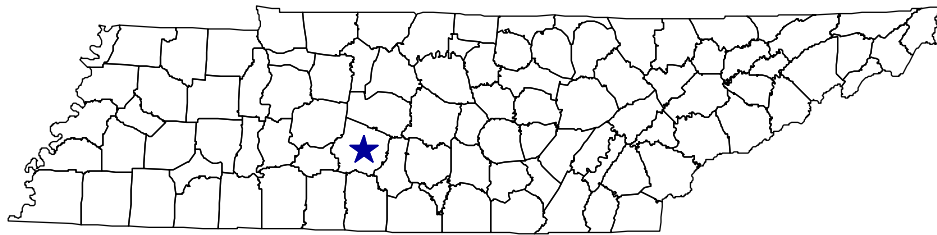
Healthcare Personnel Vaccinated (%)

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

Maury Regional Medical Center, Columbia, Maury County

Medical School Affiliation: Undergraduate teaching

Bed Size Category: 100-399 beds



Healthcare-Associated Infections (HAI) Summary

Standardized Infection Ratio (SIR) by Infection Type, 01/01/2020-12/31/2020

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	3.8	4471	1.29	(0.47, 2.86)	0.91
	Neonatal ICU	N/A	N/A	N/A	N/A	N/A	0.62
	Adult/Pediatric Ward	0	1.2	1710	0.00	(0.00, 2.34)	0.65
CAUTI	Adult/Pediatric ICU	1	5.2	5849	0.19	(0.01, 0.94)	0.69
	Adult/Pediatric Ward	1	1.8	2166	0.54	(0.03, 2.65)	0.68
SSI	Colon surgery	0	4.1	190	0.00	(0.00, 0.72)	0.64
	Abdominal hysterectomy	0	0.8	114	N/A	N/A	1.01
LabID	MRSA bacteremia	0	3.0	60863	0.00	(0.00, 0.99)	1.23
	C. difficile infection	4	26.0	59050	0.15	(0.05, 0.37)	0.36

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

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

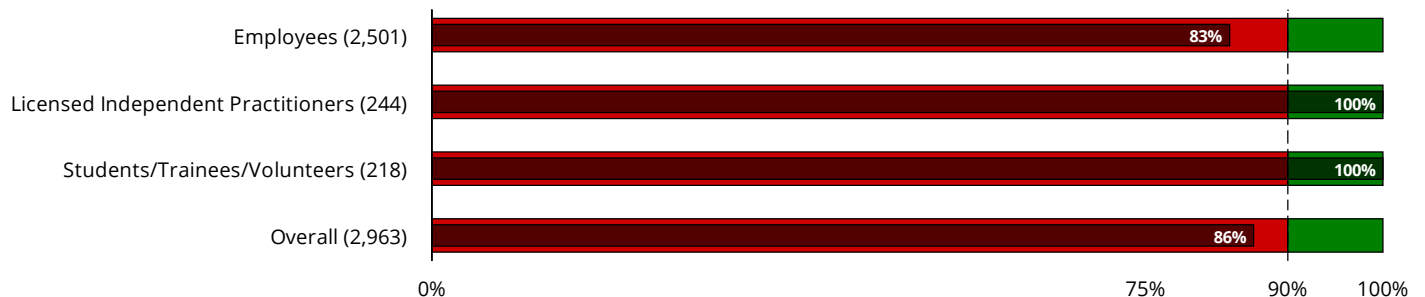
N/A: Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

*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 - '2020/2021' Influenza Season

Healthcare Personnel Category (Total)

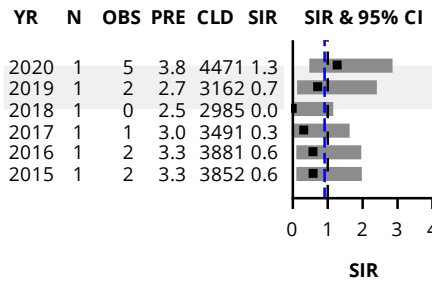


Healthcare Personnel Vaccinated (%)

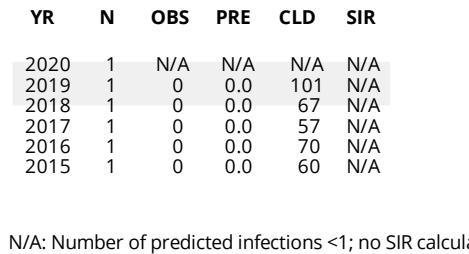
■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

Central Line-Associated Bloodstream Infections (CLABSI)

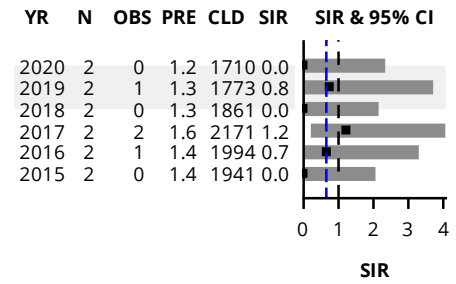
CLABSI - Adult/Pediatric ICUs



CLABSI - Neonatal ICUs

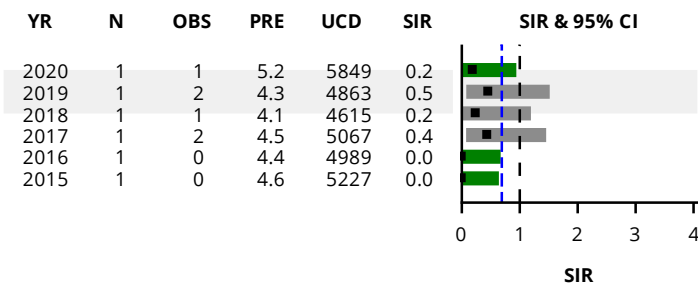


CLABSI - Adult/Pediatric Wards

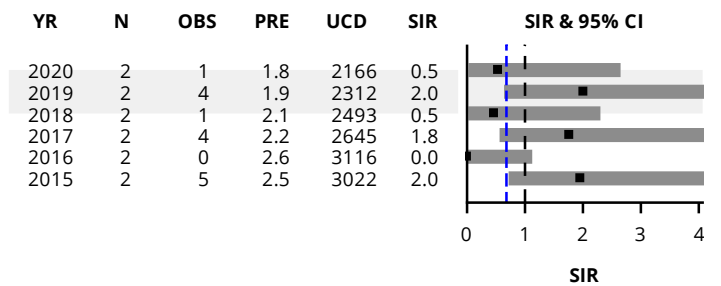


Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICUs

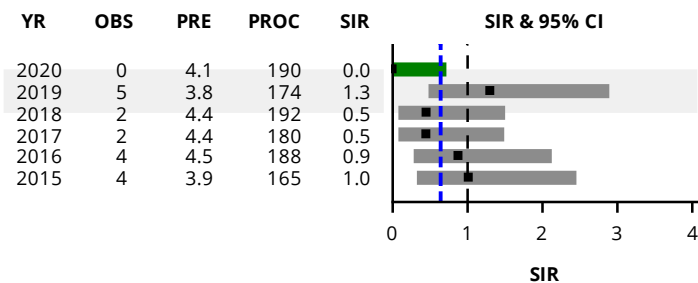


CAUTI - Adult/Pediatric Wards

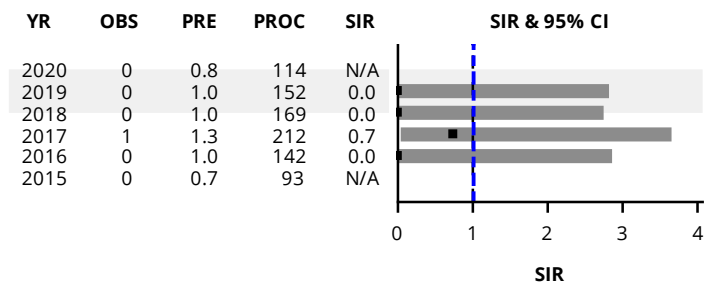


Surgical Site Infections (SSI)

SSI - Colon Surgery

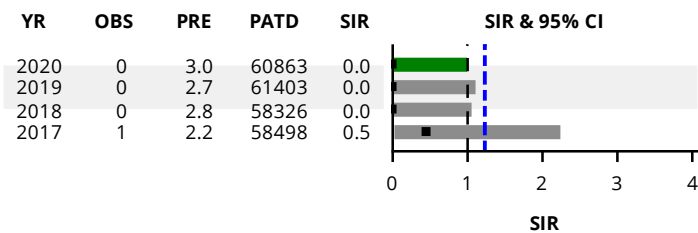


SSI - Abdominal Hysterectomy

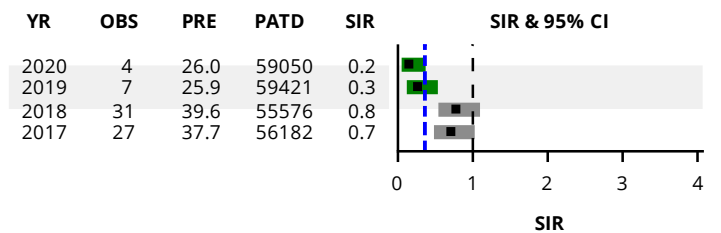


Healthcare Facility-Onset Laboratory Identified (LabID) Events

LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia



LabID - *C. difficile* Infection (CDI)



Data reported as of June 30, 2021

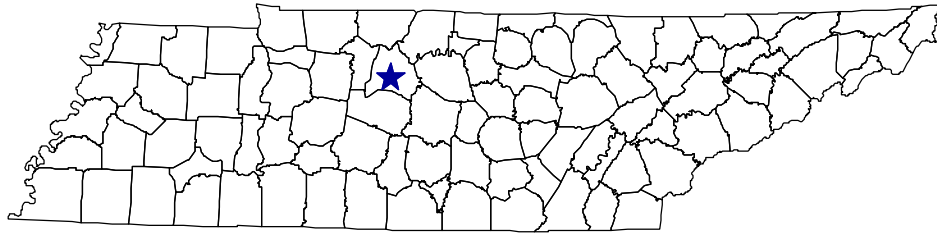
YR = reporting year; N = number of units reporting (CLABSI/CAUTI); OBS = observed number of infections
 PRE = statistically 'predicted' number of infections, based on NHSN national baseline data
 SIR = standardized infection ratio (observed/predicted number of infections)
 CLD = central line days; UCD = 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
 - - - 2020 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, 01/01/2019-12/31/2019

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	11.4	7937	0.88	(0.44, 1.56)	0.72
	Neonatal ICU	4	11.8	9191	0.34	(0.11, 0.82)	0.44
	Adult/Pediatric Ward	16	9.6	9760	1.66	(0.98, 2.64)	0.52
CAUTI	Adult/Pediatric ICU	5	2.9	2173	1.72	(0.63, 3.81)	0.74
	Adult/Pediatric Ward	0	0.6	753	N/A	N/A	0.78
SSI	Colon surgery	N/A	N/A	N/A	N/A	N/A	0.94
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	0.80
LabID	MRSA bacteremia	7	4.1	90104	1.70	(0.74, 3.36)	1.19
	C. difficile infection	7	26.9	57107	0.26	(0.11, 0.51)	0.47

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 - '2019/2020' Influenza Season

Healthcare Personnel Category (Total)



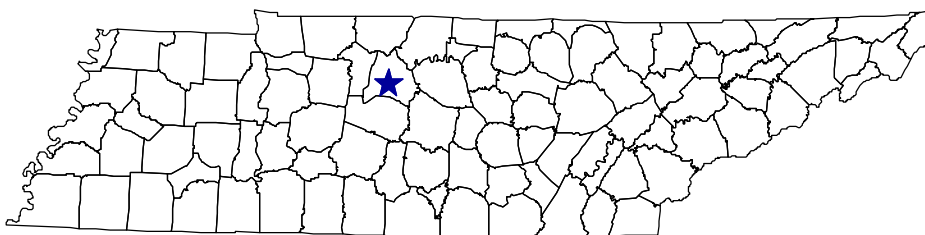
Healthcare Personnel Vaccinated (%)

■ 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, 01/01/2020-12/31/2020

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	12.9	8971	0.77	(0.39, 1.38)	0.91
	Neonatal ICU	0	5.5	3664	0.00	(0.00, 0.54)	0.62
	Adult/Pediatric Ward	12	7.2	7343	1.66	(0.90, 2.82)	0.65
CAUTI	Adult/Pediatric ICU	4	3.0	2248	1.31	(0.42, 3.17)	0.69
	Adult/Pediatric Ward	1	0.5	735	N/A	N/A	0.68
SSI	Colon surgery	N/A	N/A	N/A	N/A	N/A	0.64
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	1.01
LabID	MRSA bacteremia	1	5.0	88645	0.20	(0.01, 0.99)	1.23
	C. difficile infection	7	28.7	64486	0.24	(0.11, 0.48)	0.36

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

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

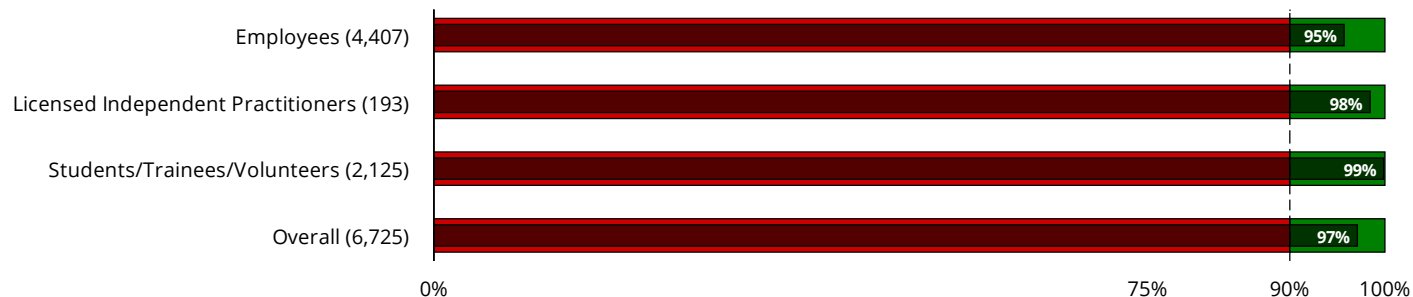
N/A: Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

*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 - '2020/2021' Influenza Season

Healthcare Personnel Category (Total)

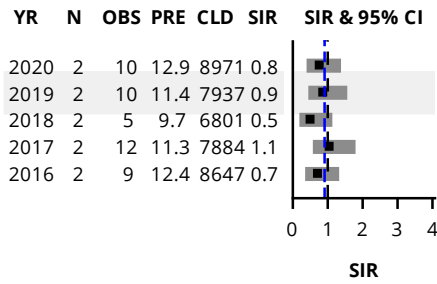


Healthcare Personnel Vaccinated (%)

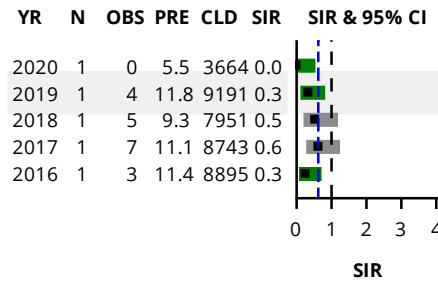
■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

Central Line-Associated Bloodstream Infections (CLABSI)

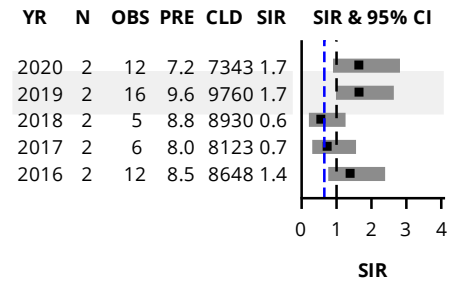
CLABSI - Adult/Pediatric ICUs



CLABSI - Neonatal ICUs

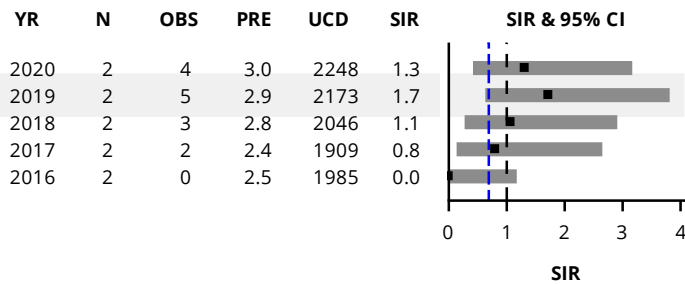


CLABSI - Adult/Pediatric Wards



Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICUs



CAUTI - Adult/Pediatric Wards

YR	N	OBS	PRE	UCD	SIR
2020	2	1	0.5	735	N/A
2019	2	0	0.6	753	N/A
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
2020	N/A	N/A	N/A	N/A
2019	N/A	N/A	N/A	N/A
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

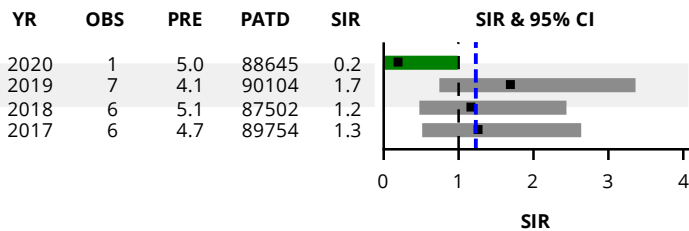
SSI - Abdominal Hysterectomy

YR	OBS	PRE	PROC	SIR
2020	N/A	N/A	N/A	N/A
2019	N/A	N/A	N/A	N/A
2018	N/A	N/A	N/A	N/A
2017	N/A	N/A	N/A	N/A

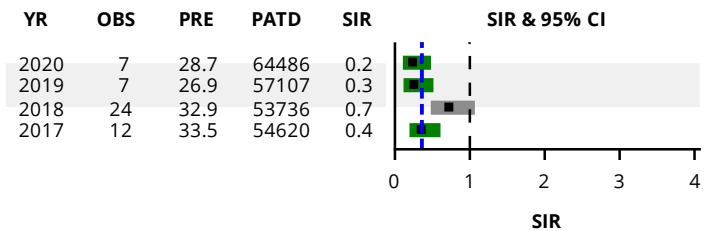
N/A: Number of predicted infections <1; no SIR calculated

Healthcare Facility-Onset Laboratory Identified (LabID) Events

LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia



LabID - *C. difficile* Infection (CDI)



Data reported as of June 30, 2021

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

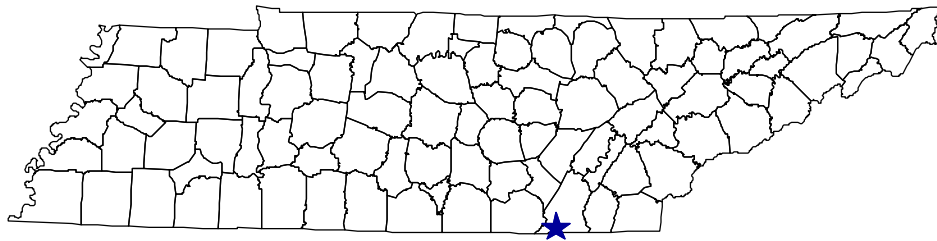
--- 2020 TN SIR

--- 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, 01/01/2019-12/31/2019

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	7.3	8447	0.96	(0.42, 1.89)	0.72
	Adult/Pediatric Ward	1	4.9	6574	0.20	(0.01, 1.00)	0.52
CAUTI	Adult/Pediatric ICU	1	6.9	7251	0.14	(0.01, 0.71)	0.74
	Adult/Pediatric Ward	8	7.0	8647	1.14	(0.53, 2.16)	0.78
SSI	Colon surgery	20	9.1	419	2.20	(1.38, 3.33)	0.94
	Abdominal hysterectomy	1	0.7	124	N/A	N/A	0.80
LabID	MRSA bacteremia	4	5.3	86814	0.74	(0.24, 1.79)	1.19
	C. difficile infection	19	52.9	86814	0.36	(0.22, 0.55)	0.47

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 - '2019/2020' Influenza Season

Healthcare Personnel Category (Total)



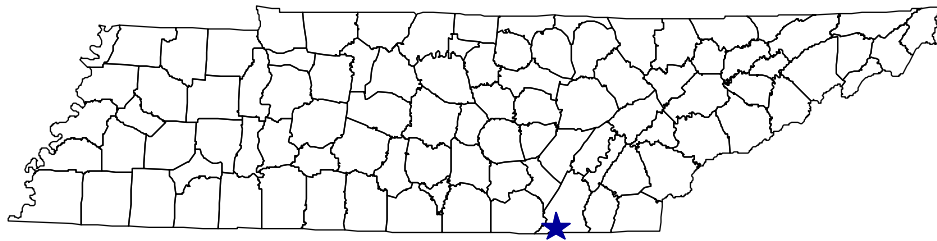
Healthcare Personnel Vaccinated (%)

■ 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, 01/01/2020-12/31/2020

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	9	6.9	8039	1.29	(0.63, 2.37)	0.91
	Adult/Pediatric Ward	6	3.0	4051	1.98	(0.80, 4.11)	0.65
CAUTI	Adult/Pediatric ICU	7	6.1	6471	1.13	(0.49, 2.23)	0.69
	Adult/Pediatric Ward	7	4.1	5060	1.70	(0.74, 3.37)	0.68
SSI	Colon surgery	6	7.2	347	0.83	(0.33, 1.72)	0.64
	Abdominal hysterectomy	0	0.3	36	N/A	N/A	1.01
LabID	MRSA bacteremia	8	5.0	77645	1.58	(0.73, 2.99)	1.23
	C. difficile infection	25	55.1	77645	0.45	(0.30, 0.66)	0.36

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

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

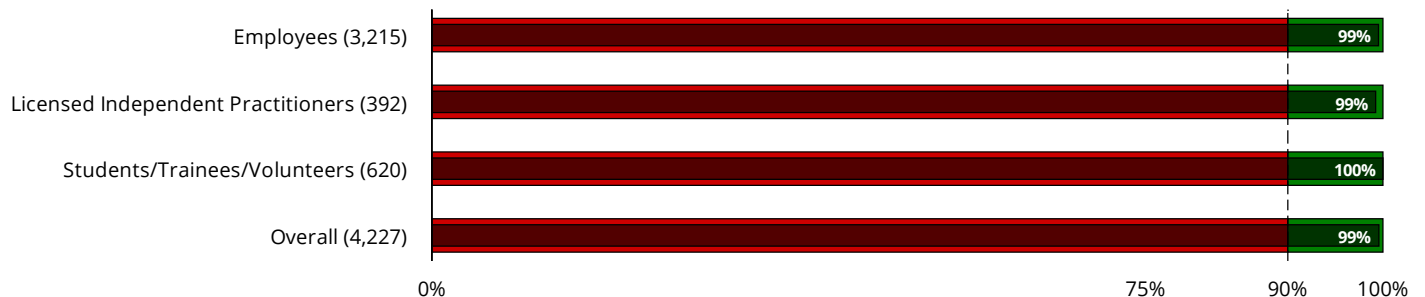
N/A: Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

*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 - '2020/2021' Influenza Season

Healthcare Personnel Category (Total)

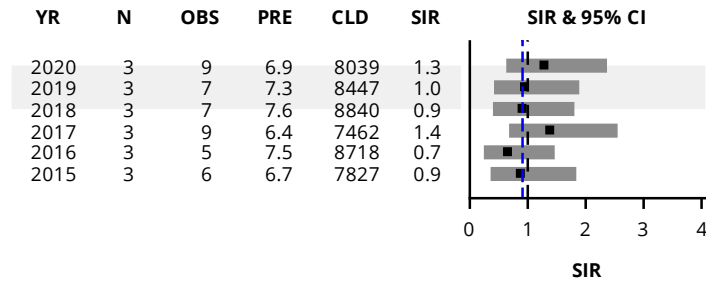


Healthcare Personnel Vaccinated (%)

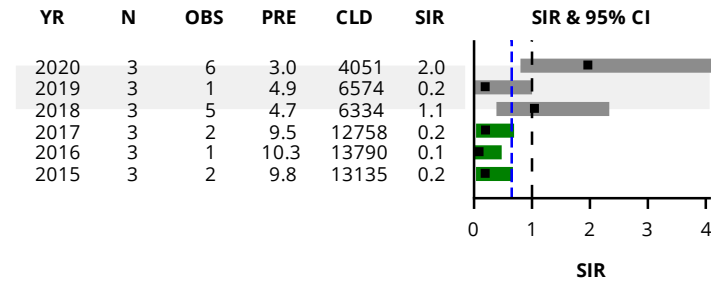
■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric ICUs

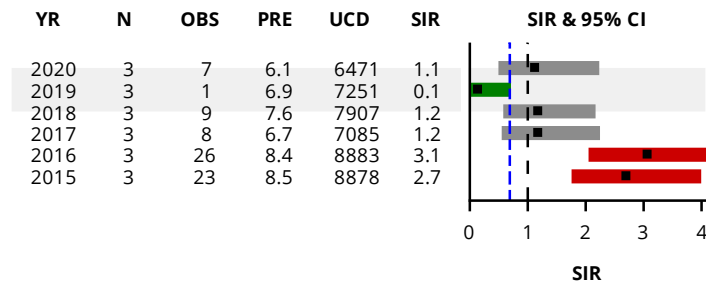


CLABSI - Adult/Pediatric Wards

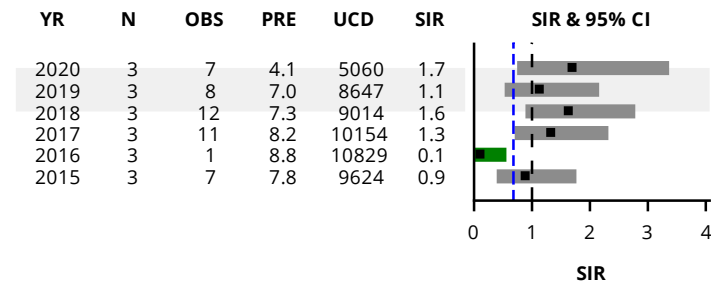


Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICUs

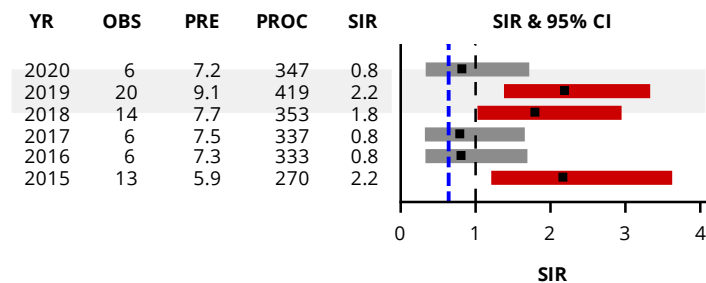


CAUTI - Adult/Pediatric Wards

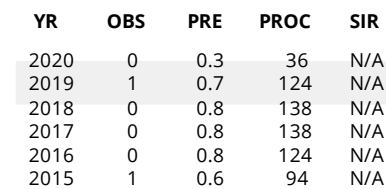


Surgical Site Infections (SSI)

SSI - Colon Surgery



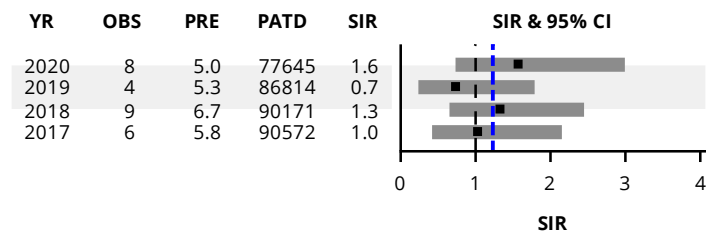
SSI - Abdominal Hysterectomy



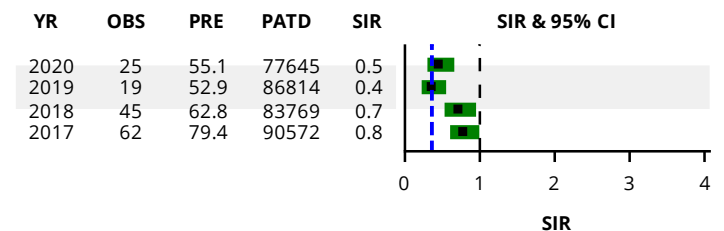
N/A: Number of predicted infections <1; no SIR calculated

Healthcare Facility-Onset Laboratory Identified (LabID) Events

LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia



LabID - *C. difficile* Infection (CDI)



Data reported as of June 30, 2021

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;

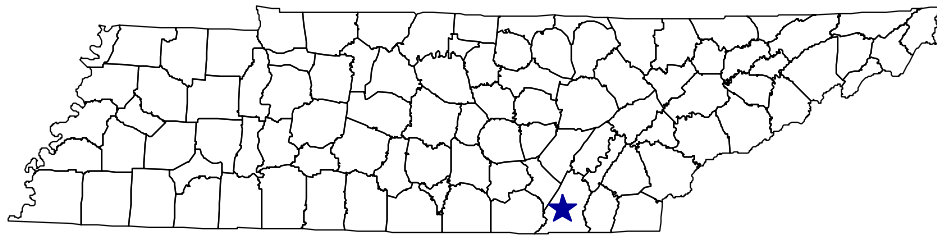
N/A = data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

- Significantly lower than NHSN SIR of 1
- Not significantly different from NHSN SIR of 1
- Significantly higher than NHSN SIR of 1
- - - 2020 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, 01/01/2019-12/31/2019

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	0.8	1262	N/A	N/A	0.72
	Adult/Pediatric Ward	0	0.9	1624	N/A	N/A	0.52
CAUTI	Adult/Pediatric ICU	3	0.9	1653	N/A	N/A	0.74
	Adult/Pediatric Ward	2	1.7	3436	1.14	(0.19, 3.77)	0.78
SSI	Colon surgery	1	0.7	39	N/A	N/A	0.94
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	0.80
LabID	MRSA bacteremia	1	0.8	17603	N/A	N/A	1.19
	C. difficile infection	6	13.6	17603	0.44	(0.18, 0.91)	0.47

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 - '2019/2020' Influenza Season

Healthcare Personnel Category (Total)



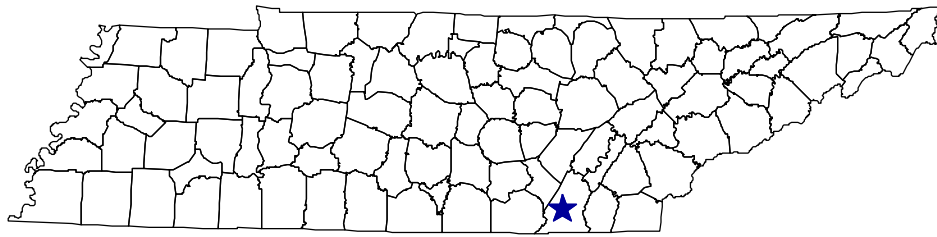
Healthcare Personnel Vaccinated (%)

■ 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, 01/01/2020-12/31/2020

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	708	N/A	N/A	0.91
	Adult/Pediatric Ward	0	0.2	486	N/A	N/A	0.65
CAUTI	Adult/Pediatric ICU	0	0.6	1176	N/A	N/A	0.69
	Adult/Pediatric Ward	3	0.8	1577	N/A	N/A	0.68
SSI	Colon surgery	0	0.7	41	N/A	N/A	0.64
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	1.01
LabID	MRSA bacteremia	0	0.4	12492	N/A	N/A	1.23
	C. difficile infection	2	6.9	12492	0.29	(0.05, 0.95)	0.36

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

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

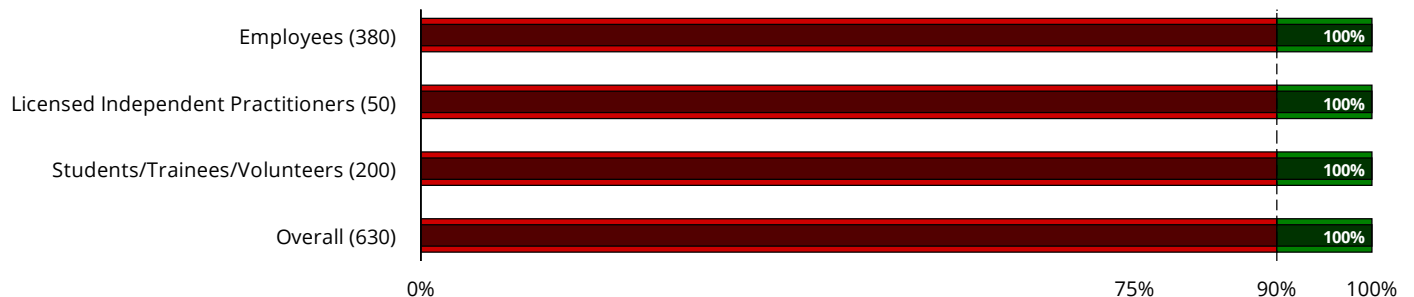
N/A: Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

*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 - '2020/2021' 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
2020	1	0	0.4	708	N/A
2019	1	2	0.8	1262	N/A
2018	1	1	0.8	1317	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

N/A: Number of predicted infections <1; no SIR calculated

CLABSI - Adult/Pediatric Wards

YR	N	OBS	PRE	CLD	SIR
2020	2	0	0.2	486	N/A
2019	2	0	0.9	1624	N/A
2018	2	0	0.8	1448	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
2020	1	0	0.6	1176	N/A
2019	1	3	0.9	1653	N/A
2018	1	1	0.9	1778	N/A
2017	1	0	0.9	1712	N/A
2016	1	0	0.5	1053	N/A
2015	1	1	0.6	1243	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
2020	2	3	0.8	1577	N/A	
2019	2	2	1.7	3436	1.1	
2018	2	0	1.9	3855	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
2020	0	0.7	41	N/A
2019	1	0.7	39	N/A
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

N/A: Number of predicted infections <1; no SIR calculated

SSI - Abdominal Hysterectomy

YR	OBS	PRE	PROC	SIR
2020	N/A	N/A	N/A	N/A
2019	N/A	N/A	N/A	N/A
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
2020	0	0.4	12492	N/A
2019	1	0.8	17603	N/A
2018	0	0.9	18472	N/A
2017	1	0.7	19279	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
2020	2	6.9	12492	0.3	
2019	6	13.6	17603	0.4	
2018	9	12.1	18472	0.7	
2017	6	19.1	19279	0.3	

Data reported as of June 30, 2021

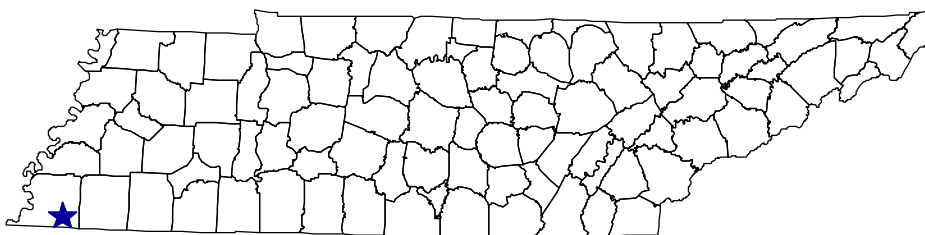
YR = reporting year; N = number of units reporting (CLABSI/CAUTI); OBS = observed number of infections
 PRE = statistically 'predicted' number of infections, based on NHSN national baseline data
 SIR = standardized infection ratio (observed/predicted number of infections)
 CLD = central line days; UCD = 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
 - - - 2020 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, 01/01/2019-12/31/2019

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	5.9	5268	0.17	(0.01, 0.83)	0.72
	Neonatal ICU	0	1.8	1118	0.00	(0.00, 1.65)	0.44
	Adult/Pediatric Ward	3	5.8	6026	0.51	(0.13, 1.39)	0.52
CAUTI	Adult/Pediatric ICU	2	4.9	3831	0.40	(0.07, 1.32)	0.74
	Adult/Pediatric Ward	2	4.2	3595	0.47	(0.08, 1.55)	0.78
SSI	Colon surgery	2	9.8	388	0.20	(0.03, 0.67)	0.94
	Abdominal hysterectomy	1	4.3	674	0.23	(0.01, 1.12)	0.80
LabID	MRSA bacteremia	3	7.4	98264	0.40	(0.10, 1.09)	1.19
	C. difficile infection	12	44.4	82046	0.27	(0.15, 0.46)	0.47

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

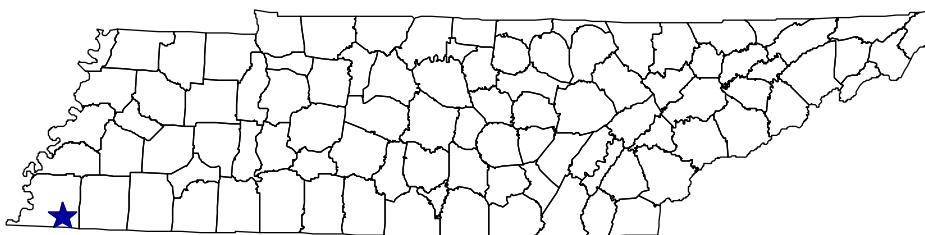
Healthcare Personnel Influenza Vaccination - '2019/2020' Influenza Season

This facility utilized the COVID-19 related CMS reporting exemption for the '2019/2020' influenza season. See the CMS website for more information.

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, 01/01/2020-12/31/2020

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	3.7	3259	0	(0, 0.82)	0.91
	Neonatal ICU	0	0.6	432	N/A	N/A	0.62
	Adult/Pediatric Ward	3	2.5	2663	1.16	(0.29, 3.14)	0.65
CAUTI	Adult/Pediatric ICU	3	3.5	2666	0.86	(0.22, 2.34)	0.69
	Adult/Pediatric Ward	2	2	1650	1.02	(0.17, 3.38)	0.68
SSI	Colon surgery	1	4.7	191	0.21	(0.01, 1.04)	0.64
	Abdominal hysterectomy	1	1.8	258	0.54	(0.03, 2.65)	1.01
LabID	MRSA bacteremia	6	3.5	50168	1.72	(0.7, 3.58)	1.23
	C. difficile infection	9	19.1	42133	0.47	(0.23, 0.86)	0.36

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 - '2020/2021' Influenza Season

Healthcare Personnel Category (Total)

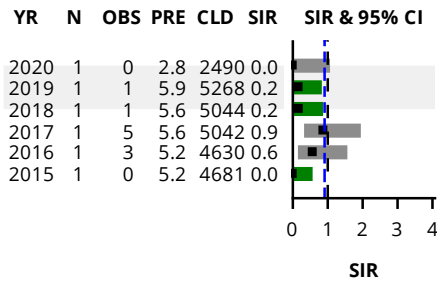


Healthcare Personnel Vaccinated (%)

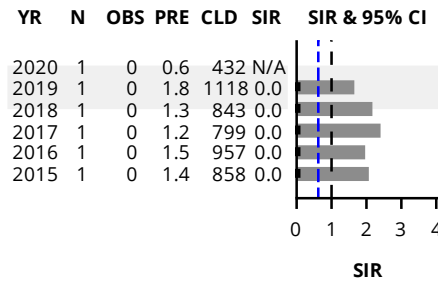
■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

Central Line-Associated Bloodstream Infections (CLABSI)

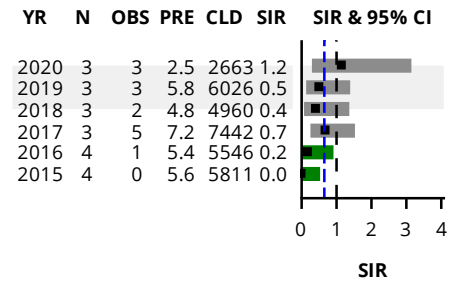
CLABSI - Adult/Pediatric ICUs



CLABSI - Neonatal ICUs

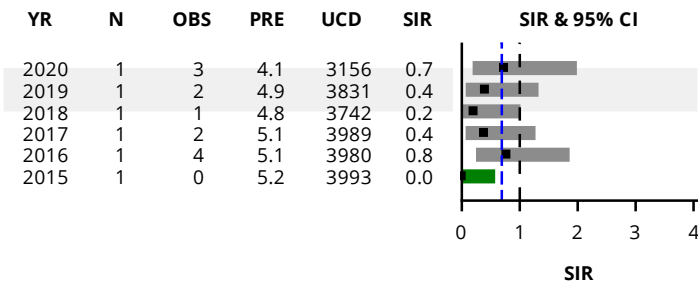


CLABSI - Adult/Pediatric Wards

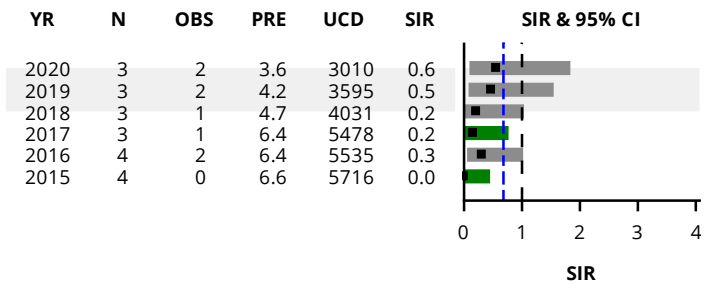


Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICUs

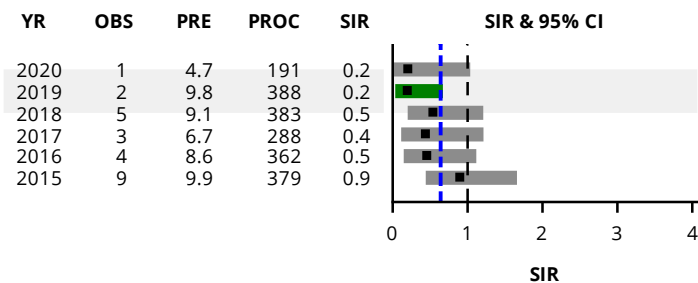


CAUTI - Adult/Pediatric Wards

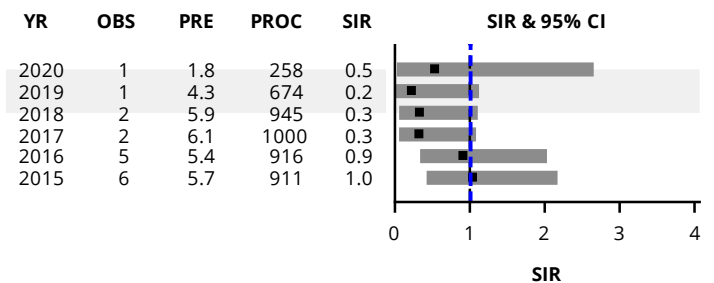


Surgical Site Infections (SSI)

SSI - Colon Surgery

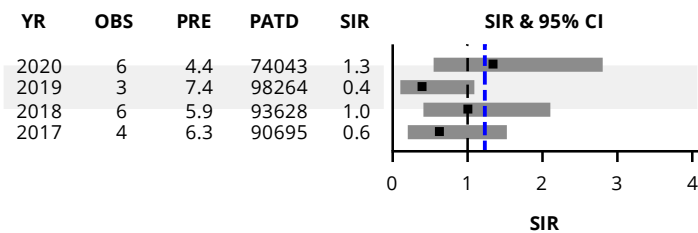


SSI - Abdominal Hysterectomy

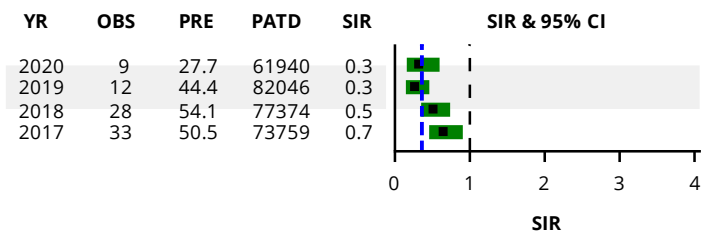


Healthcare Facility-Onset Laboratory Identified (LabID) Events

LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia



LabID - *C. difficile* Infection (CDI)



Data reported as of June 30, 2021

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

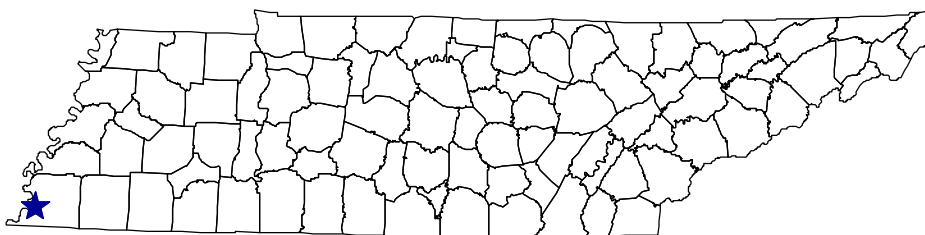
--- 2020 TN SIR

--- 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, 01/01/2019-12/31/2019

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	8	8.4	5090	0.95	(0.44, 1.80)	0.72
	Neonatal ICU	5	10.8	7088	0.46	(0.17, 1.02)	0.44
	Adult/Pediatric Ward	2	4.1	3650	0.48	(0.08, 1.59)	0.52
CAUTI	Adult/Pediatric ICU	2	2.6	1661	0.76	(0.13, 2.49)	0.74
	Adult/Pediatric Ward	0	0.6	676	N/A	N/A	0.78
SSI	Colon surgery	N/A	N/A	N/A	N/A	N/A	0.94
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	0.80
LabID	MRSA bacteremia	8	3.3	80813	2.39	(1.11, 4.53)	1.19
	C. difficile infection	1	22.9	61084	0.04	(0.00, 0.22)	0.47

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

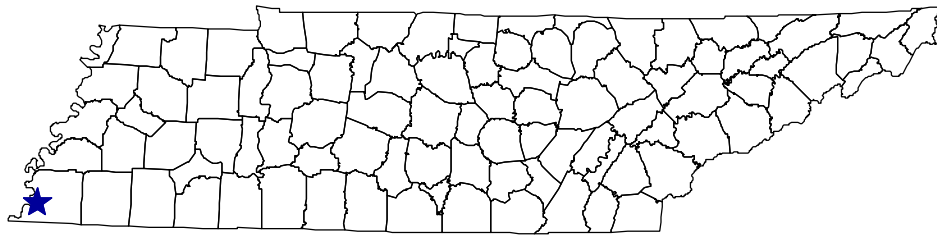
Healthcare Personnel Influenza Vaccination - '2019/2020' Influenza Season

This facility utilized the COVID-19 related CMS reporting exemption for the '2019/2020' influenza season. See the CMS website for more information.

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, 01/01/2020-12/31/2020

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	3.8	2328	0.78	(0.20, 2.11)	0.91
	Neonatal ICU	0	4.3	3256	0	(0, 0.7)	0.62
	Adult/Pediatric Ward	1	1.1	1005	0.87	(0.04, 4.31)	0.65
CAUTI	Adult/Pediatric ICU	0	1.2	748	0	(0, 2.53)	0.69
	Adult/Pediatric Ward	0	0.1	82	N/A	N/A	0.68
SSI	Colon surgery	N/A	N/A	N/A	N/A	N/A	0.64
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	1.01
LabID	MRSA bacteremia	8	1.8	32157	4.5	(2.09, 8.55)	1.23
	C. difficile infection	0	7	22328	0	(0, 0.43)	0.36

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

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

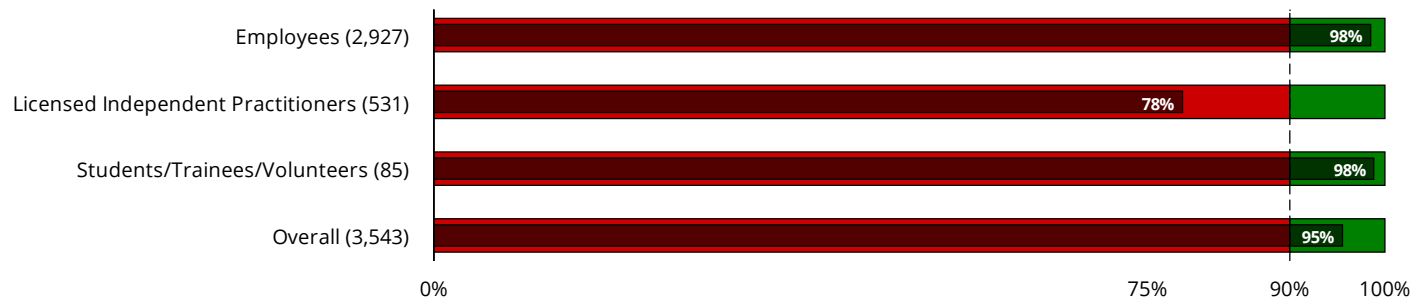
N/A: Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

*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 - '2020/2021' Influenza Season

Healthcare Personnel Category (Total)

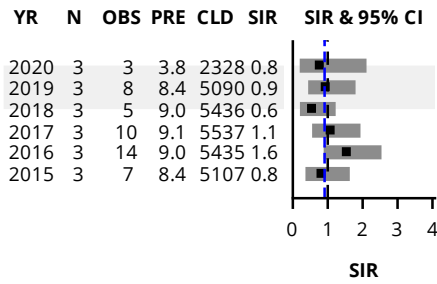


Healthcare Personnel Vaccinated (%)

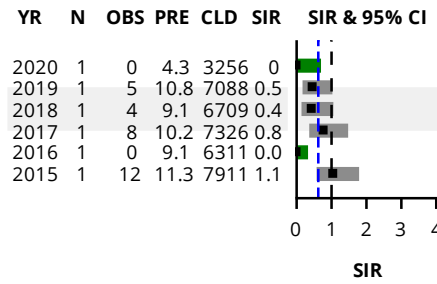
■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

Central Line-Associated Bloodstream Infections (CLABSI)

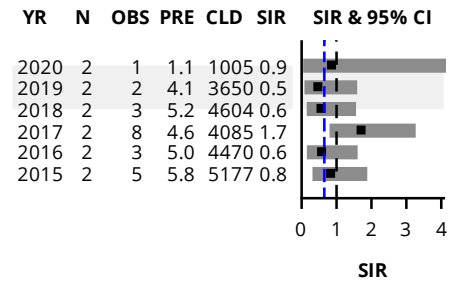
CLABSI - Adult/Pediatric ICUs



CLABSI - Neonatal ICUs

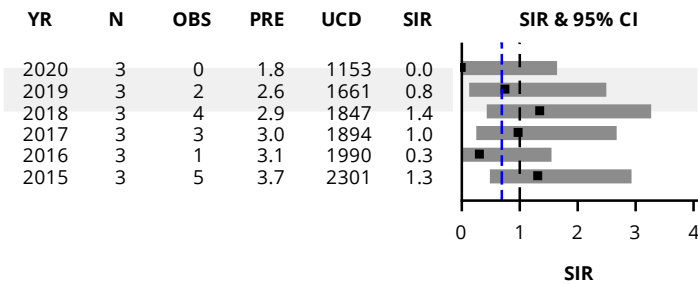


CLABSI - Adult/Pediatric Wards



Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICUs



CAUTI - Adult/Pediatric Wards

YR	N	OBS	PRE	UCD	SIR
2020	2	0	0.1	139	N/A
2019	2	0	0.6	676	N/A
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
2020	N/A	N/A	N/A	N/A
2019	N/A	N/A	N/A	N/A
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

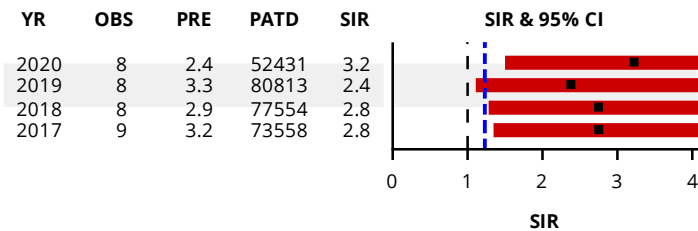
SSI - Abdominal Hysterectomy

YR	OBS	PRE	PROC	SIR
2020	N/A	N/A	N/A	N/A
2019	N/A	N/A	N/A	N/A
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

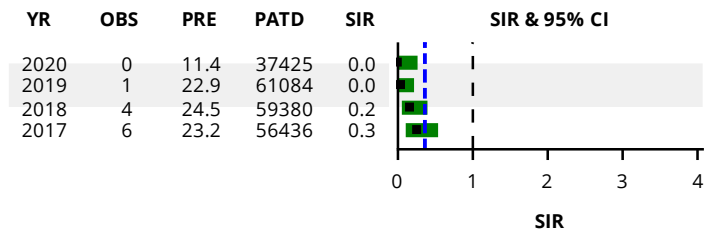
N/A: Number of predicted infections <1; no SIR calculated

Healthcare Facility-Onset Laboratory Identified (LabID) Events

LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia



LabID - *C. difficile* Infection (CDI)



Data reported as of June 30, 2021

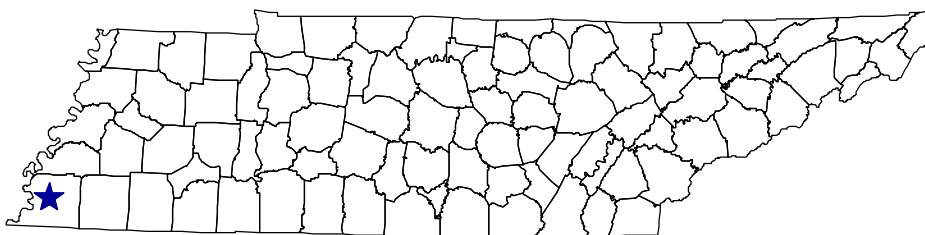
YR = reporting year; N = number of units reporting (CLABSI/CAUTI); OBS = observed number of infections
 PRE = statistically 'predicted' number of infections, based on NHSN national baseline data
 SIR = standardized infection ratio (observed/predicted number of infections)
 CLD = central line days; UCD = urinary catheter days; PROC = procedures performed; PATD = patient days;
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■ Significantly lower than NHSN SIR of 1
 ■ Not significantly different from NHSN SIR of 1
 ■ Significantly higher than NHSN SIR of 1
 - - - 2020 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, 01/01/2019-12/31/2019

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	3353	0.79	(0.20, 2.16)	0.72
	Adult/Pediatric Ward	0	2.5	2632	0.00	(0.00, 1.17)	0.52
CAUTI	Adult/Pediatric ICU	0	3.3	2363	0.00	(0.00, 0.90)	0.74
	Adult/Pediatric Ward	1	1.3	1198	0.72	(0.04, 3.54)	0.78
SSI	Colon surgery	3	1.4	65	2.01	(0.51, 5.48)	0.94
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	0.80
LabID	MRSA bacteremia	7	3.5	47467	1.95	(0.85, 3.86)	1.19
	C. difficile infection	2	25.2	47467	0.08	(0.01, 0.26)	0.47

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

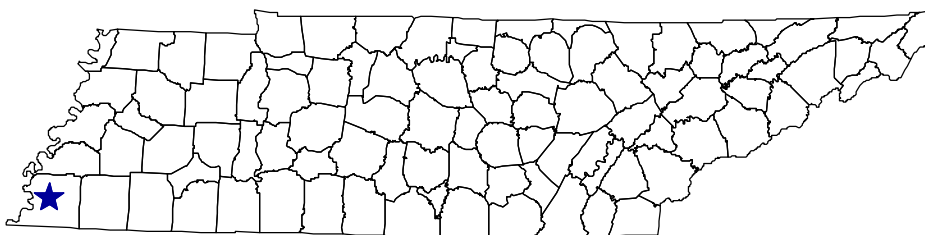
Healthcare Personnel Influenza Vaccination - '2019/2020' Influenza Season

This facility utilized the COVID-19 related CMS reporting exemption for the '2019/2020' influenza season. See the CMS website for more information.

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, 01/01/2020-12/31/2020

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	2.4	2159	0.82	(0.14, 2.71)	0.91
	Adult/Pediatric Ward	1	1.1	1170	0.88	(0.04, 4.32)	0.65
CAUTI	Adult/Pediatric ICU	1	2.8	1978	0.36	(0.02, 1.75)	0.69
	Adult/Pediatric Ward	0	0.8	690	N/A	N/A	0.68
SSI	Colon surgery	0	0.4	20	N/A	N/A	0.64
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	1.01
LabID	MRSA bacteremia	8	1.8	26511	4.4	(2.04, 8.35)	1.23
	C. difficile infection	1	10.9	26511	0.09	(0.01, 0.46)	0.36

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

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

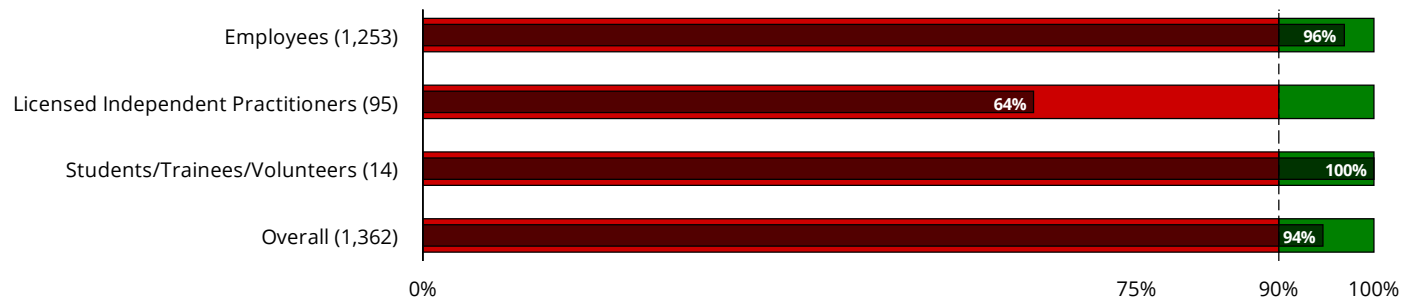
N/A: Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

*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 - '2020/2021' Influenza Season

Healthcare Personnel Category (Total)

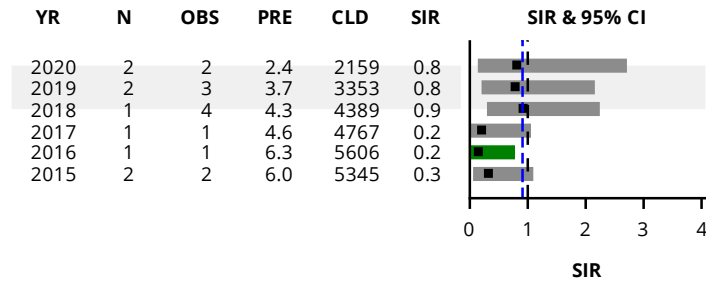


Healthcare Personnel Vaccinated (%)

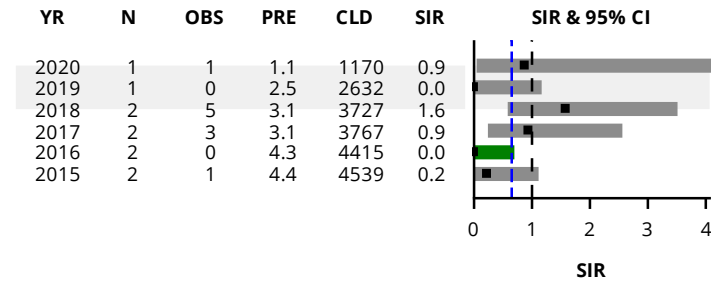
Below 90% >90% (HHS Healthy People 2020 Goal)

Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric ICUs

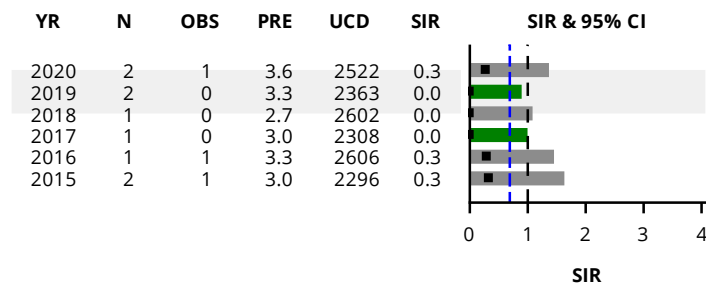


CLABSI - Adult/Pediatric Wards

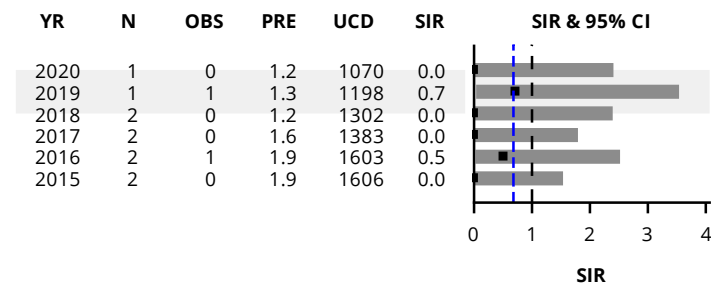


Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICUs

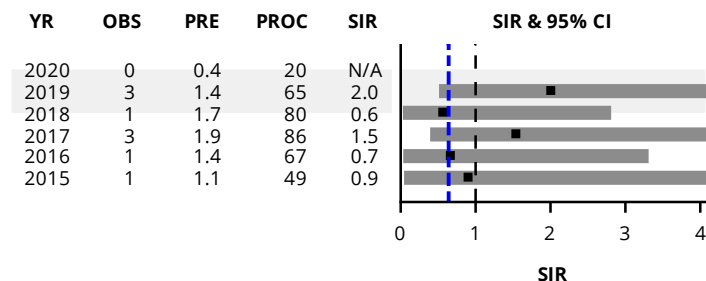


CAUTI - Adult/Pediatric Wards

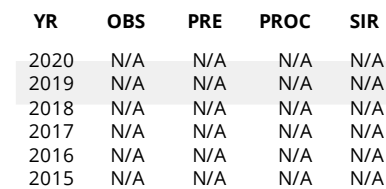


Surgical Site Infections (SSI)

SSI - Colon Surgery



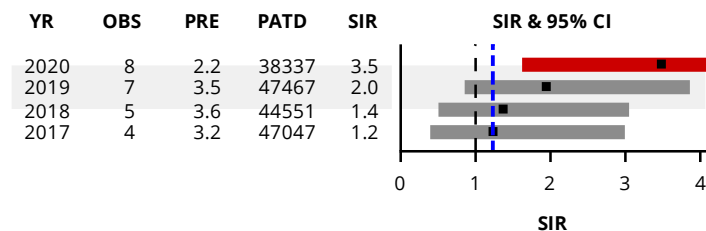
SSI - Abdominal Hysterectomy



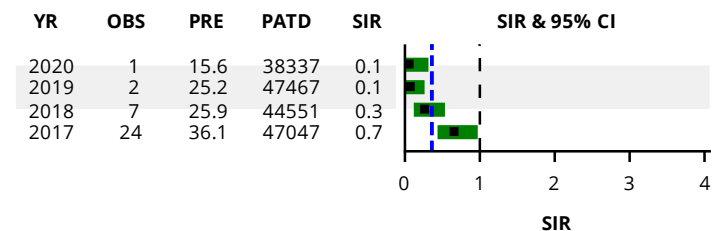
N/A: Number of predicted infections <1; no SIR calculated

Healthcare Facility-Onset Laboratory Identified (LabID) Events

LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia



LabID - *C. difficile* Infection (CDI)



Data reported as of June 30, 2021

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;

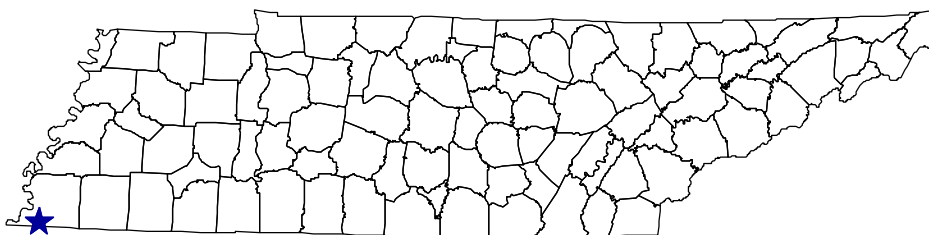
N/A = data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

- Significantly lower than NHSN SIR of 1
- Not significantly different from NHSN SIR of 1
- Significantly higher than NHSN SIR of 1
- - - 2020 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, 01/01/2019-12/31/2019

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	1127	0.00	(0.00, 2.71)	0.72
	Neonatal ICU	N/A	N/A	N/A	N/A	N/A	0.44
	Adult/Pediatric Ward	3	1.9	2272	1.56	(0.40, 4.24)	0.52
CAUTI	Adult/Pediatric ICU	0	1.2	1192	0.00	(0.00, 2.36)	0.74
	Adult/Pediatric Ward	0	1.4	1517	0.00	(0.00, 2.08)	0.78
SSI	Colon surgery	2	0.9	39	N/A	N/A	0.94
	Abdominal hysterectomy	0	0.3	54	N/A	N/A	0.80
LabID	MRSA bacteremia	1	1.4	27388	0.69	(0.03, 3.38)	1.19
	C. difficile infection	4	12.5	25677	0.32	(0.10, 0.77)	0.47

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

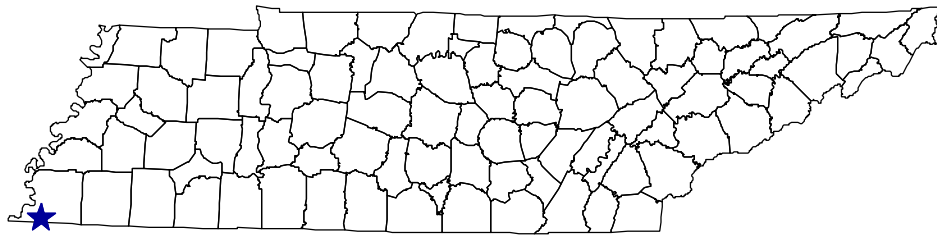
Healthcare Personnel Influenza Vaccination - '2019/2020' Influenza Season

This facility utilized the COVID-19 related CMS reporting exemption for the '2019/2020' influenza season. See the CMS website for more information.

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, 01/01/2020-12/31/2020

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	774	N/A	N/A	0.91
	Neonatal ICU	N/A	N/A	N/A	N/A	N/A	0.62
	Adult/Pediatric Ward	0	1.1	1314	0.00	(0.00, 2.69)	0.65
CAUTI	Adult/Pediatric ICU	0	0.8	717	N/A	N/A	0.69
	Adult/Pediatric Ward	0	0.8	825	N/A	N/A	0.68
SSI	Colon surgery	N/A	N/A	N/A	N/A	N/A	0.64
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	1.01
LabID	MRSA bacteremia	1	0.7	13748	N/A	N/A	1.23
	C. difficile infection	0	5.1	12864	0	(0.01, 0.58)	0.36

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

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

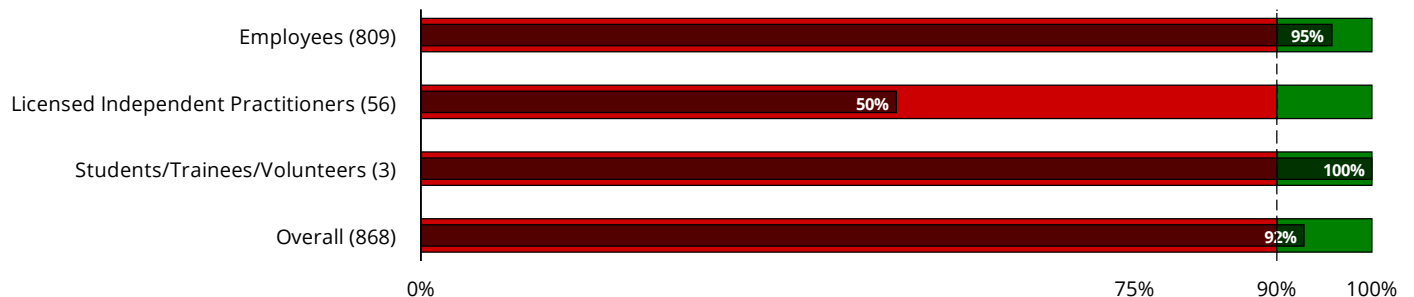
N/A: Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

*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 - '2020/2021' Influenza Season

Healthcare Personnel Category (Total)

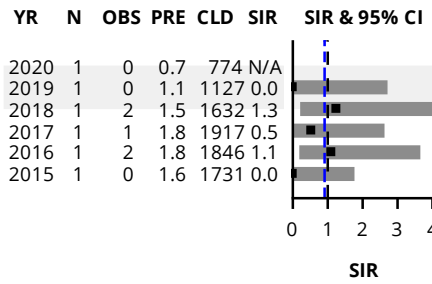


Healthcare Personnel Vaccinated (%)

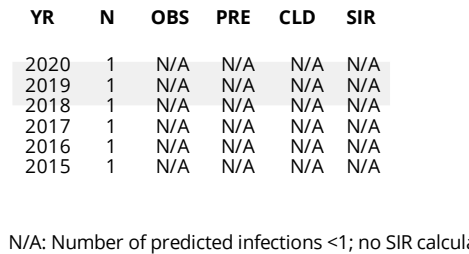
■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

Central Line-Associated Bloodstream Infections (CLABSI)

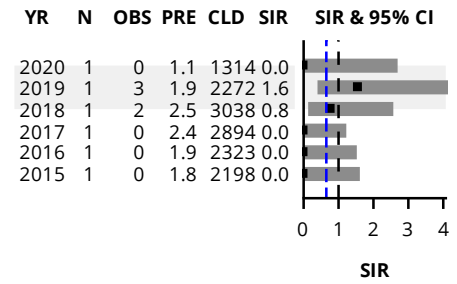
CLABSI - Adult/Pediatric ICUs



CLABSI - Neonatal ICUs

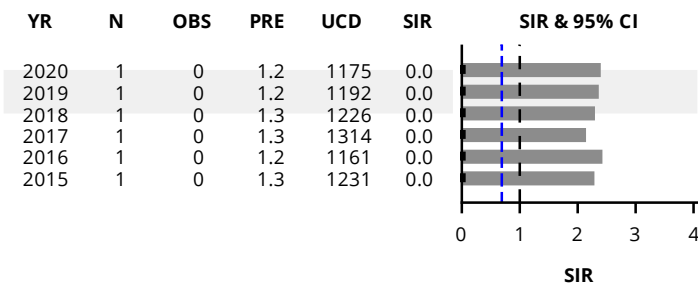


CLABSI - Adult/Pediatric Wards

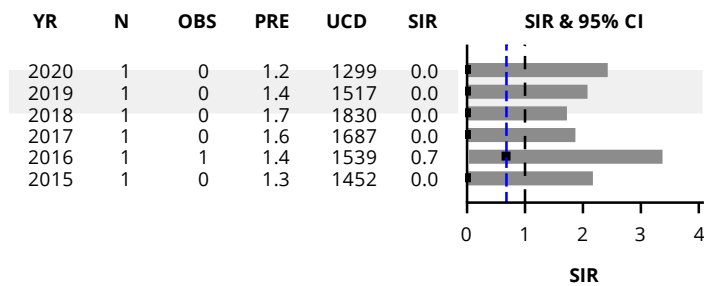


Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICUs



CAUTI - Adult/Pediatric Wards



Surgical Site Infections (SSI)

SSI - Colon Surgery

YR	OBS	PRE	PROC	SIR
2020	N/A	N/A	N/A	N/A
2019	2	0.9	39	N/A
2018	1	0.9	41	N/A
2017	0	0.7	33	N/A
2016	1	1.2	53	0.8
2015	1	1.2	56	0.8

SSI - Abdominal Hysterectomy

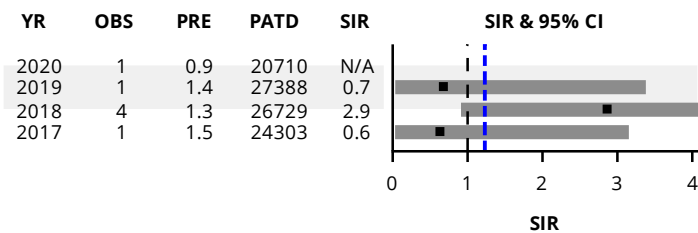
YR	OBS	PRE	PROC	SIR
2020	N/A	N/A	N/A	N/A
2019	0	0.3	54	N/A
2018	0	0.3	43	N/A
2017	0	0.3	59	N/A
2016	0	0.5	83	N/A
2015	0	0.3	64	N/A

N/A: Number of predicted infections <1; no SIR calculated

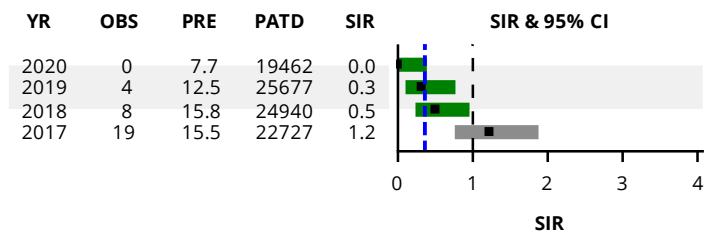
N/A: Number of predicted infections <1; no SIR calculated

Healthcare Facility-Onset Laboratory Identified (LabID) Events

LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia



LabID - *C. difficile* Infection (CDI)



Data reported as of June 30, 2021

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;

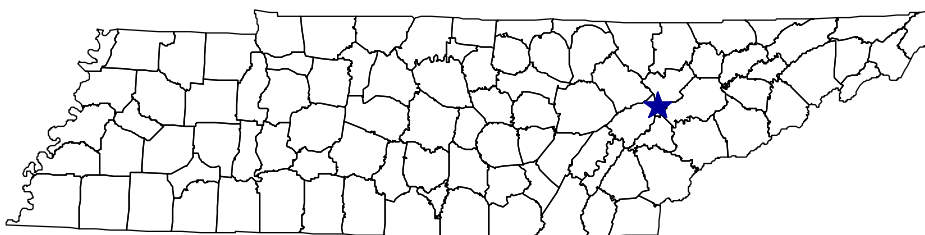
N/A = data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

- Significantly lower than NHSN SIR of 1
- Not significantly different from NHSN SIR of 1
- Significantly higher than NHSN SIR of 1
- - - 2020 TN SIR
- - - NHSN SIR=1

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, 01/01/2019-12/31/2019

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	2672	0.43	(0.02, 2.13)	0.72
	Adult/Pediatric Ward	0	2.3	3118	0.00	(0.00, 1.28)	0.52
CAUTI	Adult/Pediatric ICU	3	4.1	4611	0.73	(0.19, 1.98)	0.74
	Adult/Pediatric Ward	3	3.4	4172	0.87	(0.22, 2.37)	0.78
SSI	Colon surgery	3	2.0	94	1.48	(0.38, 4.03)	0.94
	Abdominal hysterectomy	0	0.3	53	N/A	N/A	0.80
LabID	MRSA bacteremia	4	2.6	49197	1.54	(0.49, 3.70)	1.19
	C. difficile infection	5	35.2	48387	0.14	(0.05, 0.32)	0.47

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

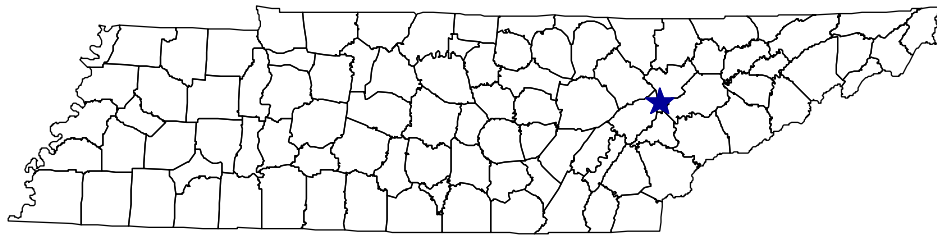
Healthcare Personnel Influenza Vaccination - '2019/2020' Influenza Season

This facility utilized the COVID-19 related CMS reporting exemption for the '2019/2020' influenza season. See the CMS website for more information.

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, 01/01/2020-12/31/2020

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	2.1	2788	0.95	(0.16, 3.15)	0.91
	Adult/Pediatric Ward	0	1.7	2730	0.00	(0.00, 1.69)	0.65
CAUTI	Adult/Pediatric ICU	3	3.1	4295	0.96	(0.24, 2.60)	0.69
	Adult/Pediatric Ward	3	2.8	4158	1.07	(0.27, 2.90)	0.68
SSI	Colon surgery	2	2.0	87	0.98	(0.16, 3.23)	0.64
	Abdominal hysterectomy	0	0.2	40	N/A	N/A	1.01
LabID	MRSA bacteremia	5	2.9	45342	1.69	(0.62, 3.74)	1.23
	C. difficile infection	3	37.0	44501	0.08	(0.02, 0.22)	0.36

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 - '2020/2021' Influenza Season

Healthcare Personnel Category (Total)

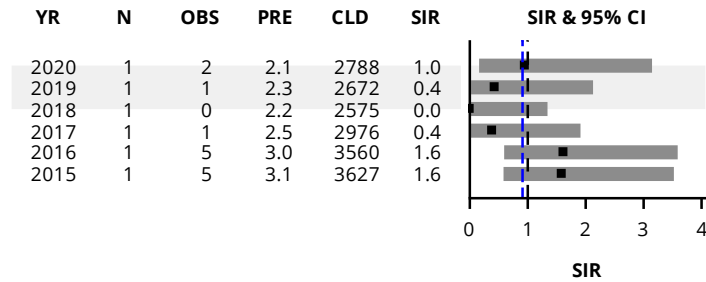


Healthcare Personnel Vaccinated (%)

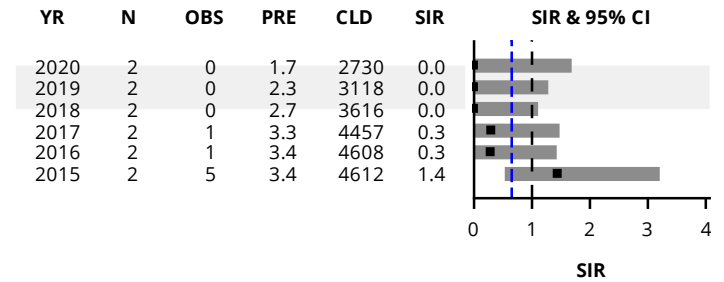
Below 90% >90% (HHS Healthy People 2020 Goal)

Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric ICUs

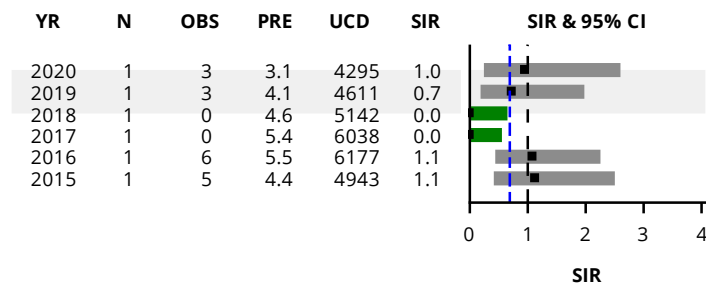


CLABSI - Adult/Pediatric Wards

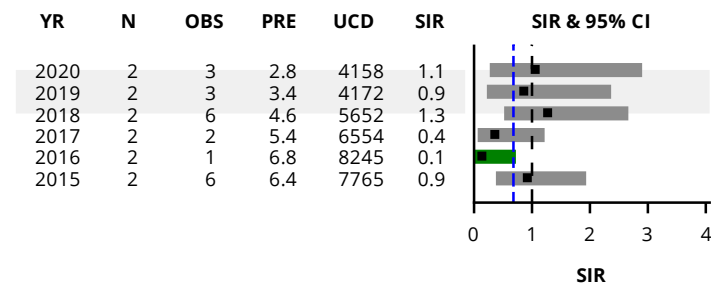


Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICUs

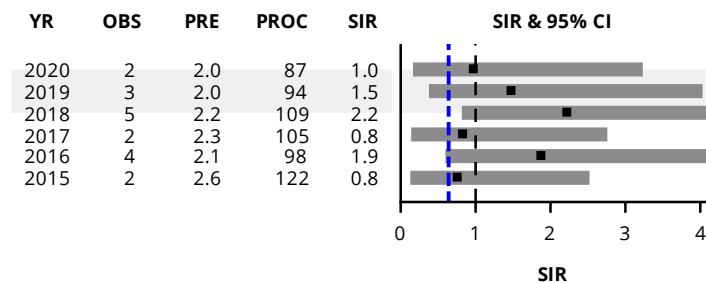


CAUTI - Adult/Pediatric Wards

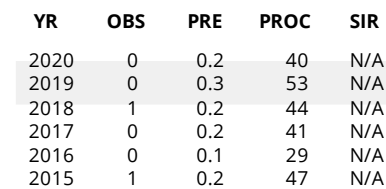


Surgical Site Infections (SSI)

SSI - Colon Surgery



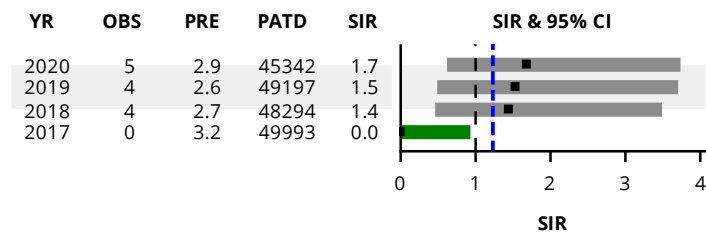
SSI - Abdominal Hysterectomy



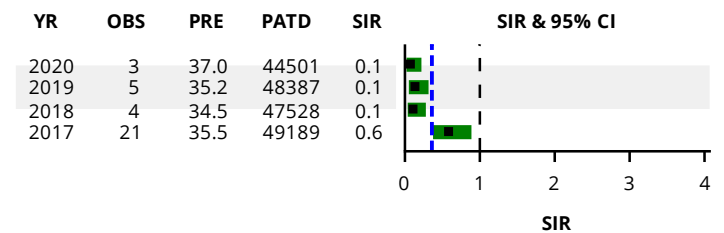
N/A: Number of predicted infections <1; no SIR calculated

Healthcare Facility-Onset Laboratory Identified (LabID) Events

LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia



LabID - *C. difficile* Infection (CDI)



Data reported as of June 30, 2021

YR = reporting year; N = number of units reporting (CLABSI/CAUTI); OBS = observed number of infections

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

CLD = central line days; UCD = urinary catheter days; PROC = procedures performed; PATD = patient days;

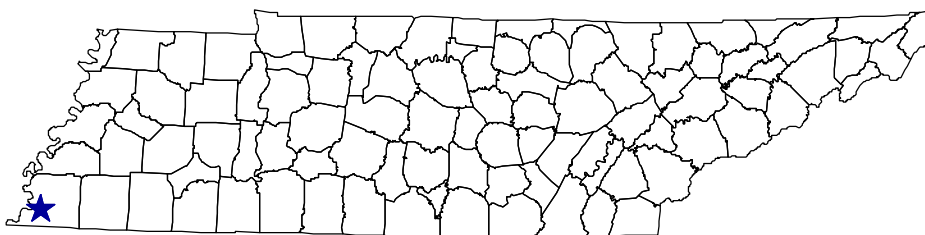
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- Significantly lower than NHSN SIR of 1
- Not significantly different from NHSN SIR of 1
- Significantly higher than NHSN SIR of 1
- - - 2020 TN SIR
- - - NHSN SIR=1

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, 01/01/2019-12/31/2019

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	11.5	10224	0.09	(0.00, 0.43)	0.72
	Adult/Pediatric Ward	2	11.6	11986	0.17	(0.03, 0.57)	0.52
CAUTI	Adult/Pediatric ICU	3	19.2	9462	0.16	(0.04, 0.43)	0.74
	Adult/Pediatric Ward	3	7.2	6066	0.42	(0.11, 1.13)	0.78
SSI	Colon surgery	6	7.9	250	0.76	(0.31, 1.58)	0.94
	Abdominal hysterectomy	0	0.5	49	N/A	N/A	0.80
LabID	MRSA bacteremia	17	12.9	118828	1.31	(0.79, 2.06)	1.19
	C. difficile infection	23	62.0	118828	0.37	(0.24, 0.55)	0.47

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

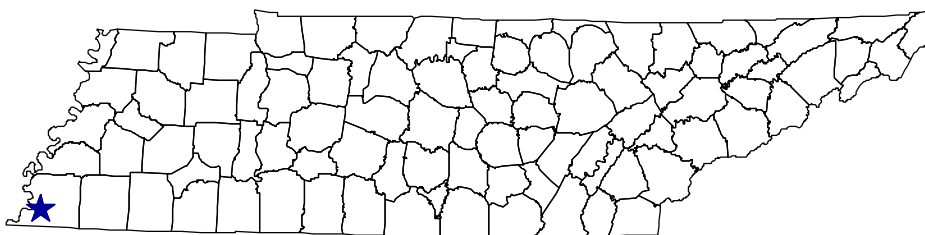
Healthcare Personnel Influenza Vaccination - '2019/2020' Influenza Season

This facility utilized the COVID-19 related CMS reporting exemption for the '2019/2020' influenza season. See the CMS website for more information.

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, 01/01/2020-12/31/2020

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	6.5	5791	0.46	(0.12, 1.25)	0.91
	Adult/Pediatric Ward	1	4.1	4216	0.24	(0.01, 1.20)	0.65
CAUTI	Adult/Pediatric ICU	2	9.1	4513	0.22	(0.04, 0.73)	0.69
	Adult/Pediatric Ward	2	2.5	2097	0.8	(0.14, 2.65)	0.68
SSI	Colon surgery	2	2.7	91	0.74	(0.12, 2.45)	0.64
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	1.01
LabID	MRSA bacteremia	5	4.6	49213	1.09	(0.4, 2.42)	1.23
	C. difficile infection	2	22.4	49213	0.09	(0.02, 0.3)	0.36

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

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

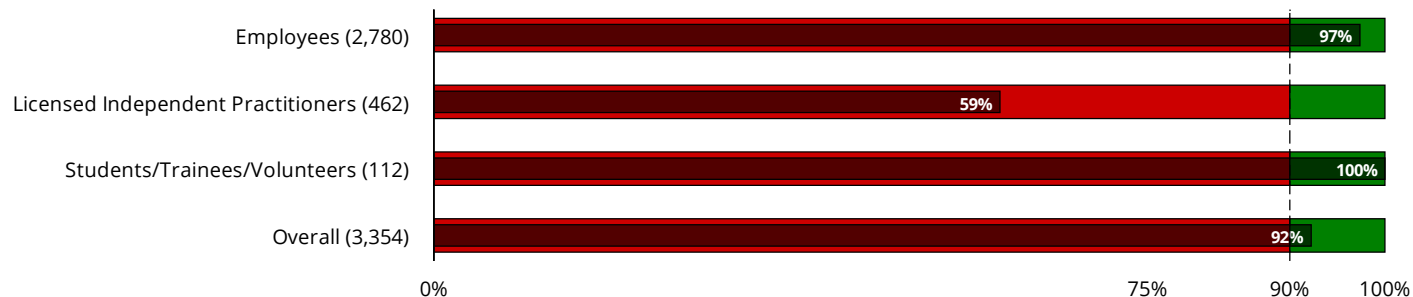
N/A: Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

*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 - '2020/2021' Influenza Season

Healthcare Personnel Category (Total)

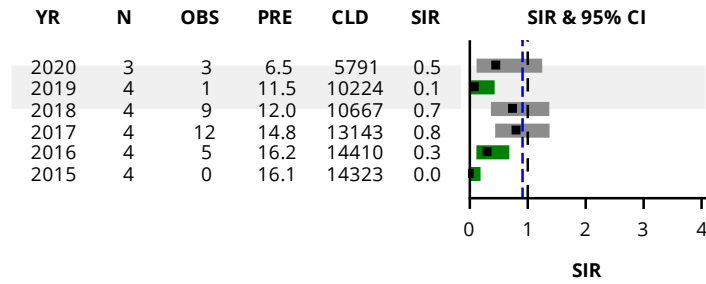


Healthcare Personnel Vaccinated (%)

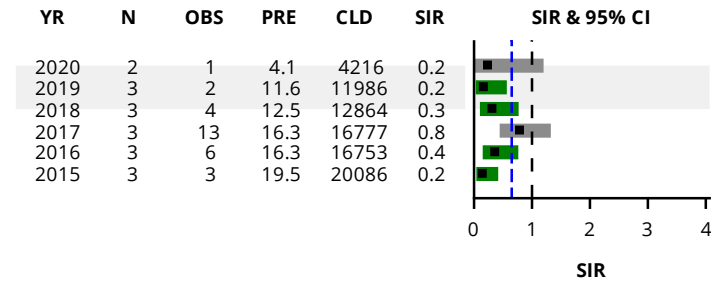
■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric ICUs

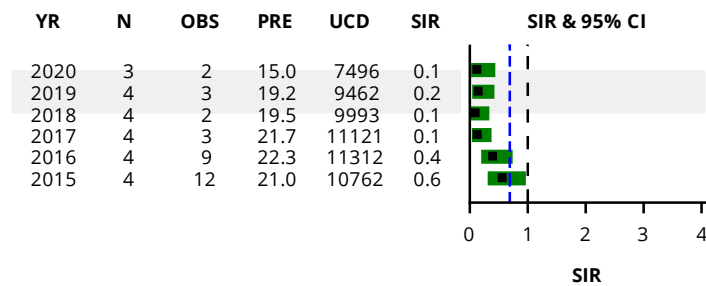


CLABSI - Adult/Pediatric Wards

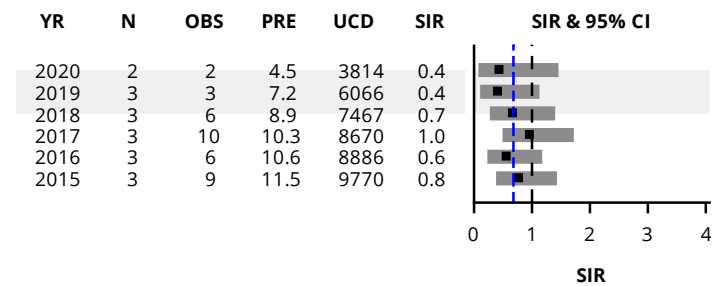


Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICUs

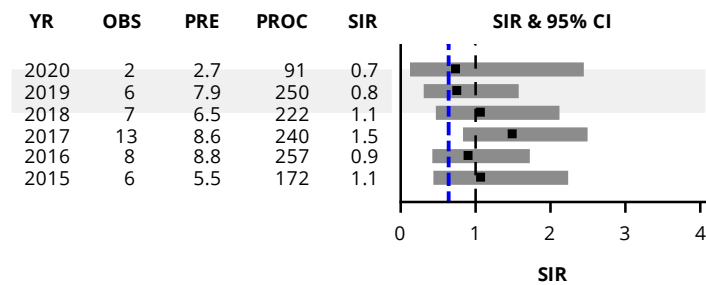


CAUTI - Adult/Pediatric Wards

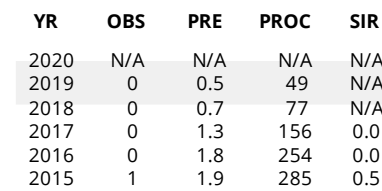


Surgical Site Infections (SSI)

SSI - Colon Surgery



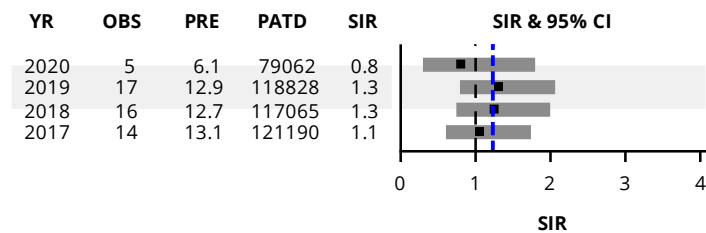
SSI - Abdominal Hysterectomy



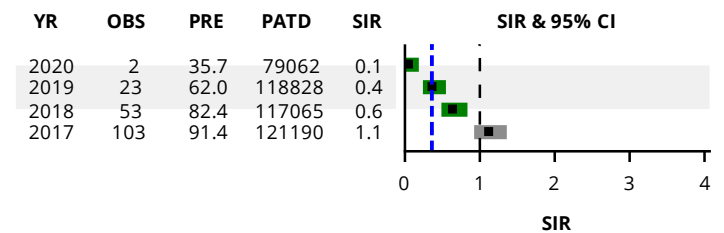
N/A: Number of predicted infections <1; no SIR calculated

Healthcare Facility-Onset Laboratory Identified (LabID) Events

LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia



LabID - *C. difficile* Infection (CDI)



Data reported as of June 30, 2021

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

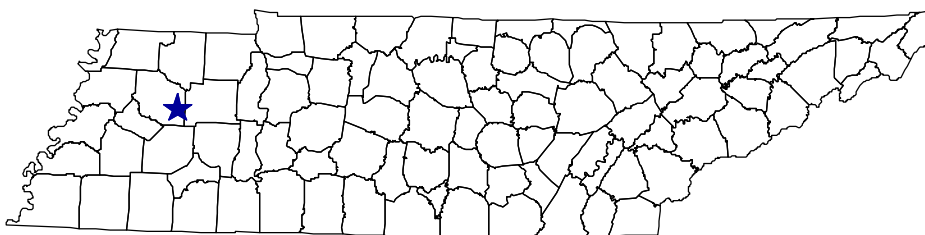
--- 2020 TN SIR

--- 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, 01/01/2019-12/31/2019

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	0.72
	Adult/Pediatric Ward	0	0.1	202	N/A	N/A	0.52
CAUTI	Adult/Pediatric ICU	0	0.0	83	N/A	N/A	0.74
	Adult/Pediatric Ward	0	0.1	405	N/A	N/A	0.78
SSI	Colon surgery	0	0.5	36	N/A	N/A	0.94
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	0.80
LabID	MRSA bacteremia	0	0.0	1893	N/A	N/A	1.19
	C. difficile infection	0	0.4	1893	N/A	N/A	0.47

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

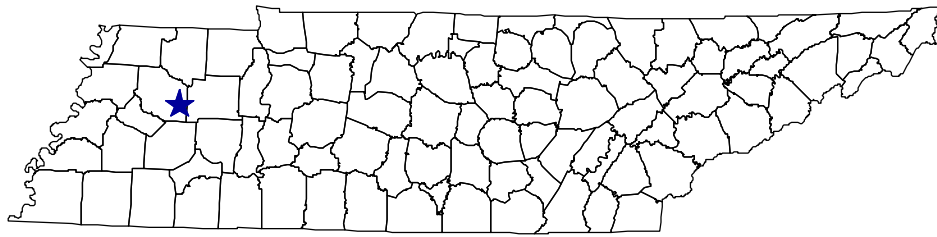
Healthcare Personnel Influenza Vaccination - '2019/2020' Influenza Season

This facility utilized the COVID-19 related CMS reporting exemption for the '2019/2020' influenza season. See the CMS website for more information.

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, 01/01/2020-12/31/2020

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	0.91
	Adult/Pediatric Ward	0	0.1	227	N/A	N/A	0.65
CAUTI	Adult/Pediatric ICU	0	0.0	72	N/A	N/A	0.69
	Adult/Pediatric Ward	0	0.2	436	N/A	N/A	0.68
SSI	Colon surgery	1	0.3	25	N/A	N/A	0.64
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	1.01
LabID	MRSA bacteremia	1	0.0	2508	N/A	N/A	1.23
	C. difficile infection	0	0.5	2508	N/A	N/A	0.36

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

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

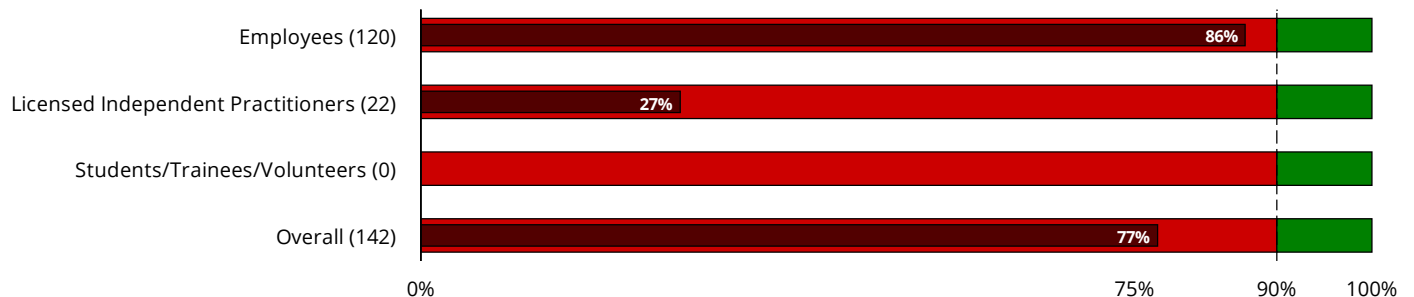
N/A: Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

*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 - '2020/2021' 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
2020	1	N/A	N/A	N/A	N/A
2019	1	N/A	N/A	N/A	N/A
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
2020	1	0	0.1	227	N/A
2019	1	0	0.1	202	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
2020	1	0	0.0	72	N/A
2019	1	0	0.0	83	N/A
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
2020	1	0	0.2	436	N/A
2019	1	0	0.1	405	N/A
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
2020	1	0.3	25	N/A
2019	0	0.5	36	N/A
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
2020	N/A	N/A	N/A	N/A
2019	N/A	N/A	N/A	N/A
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
2020	1	0.0	2508	N/A
2019	0	0.0	1893	N/A
2018	0	0.0	1740	N/A
2017	0	0.0	1575	N/A

N/A: Number of predicted infections <1; no SIR calculated

LabID - *C. difficile* Infection (CDI)

YR	OBS	PRE	PATD	SIR
2020	0	0.5	2508	N/A
2019	0	0.4	1893	N/A
2018	0	0.4	1740	N/A
2017	0	0.4	1575	N/A

N/A: Number of predicted infections <1; no SIR calculated

Data reported as of June 30, 2021

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

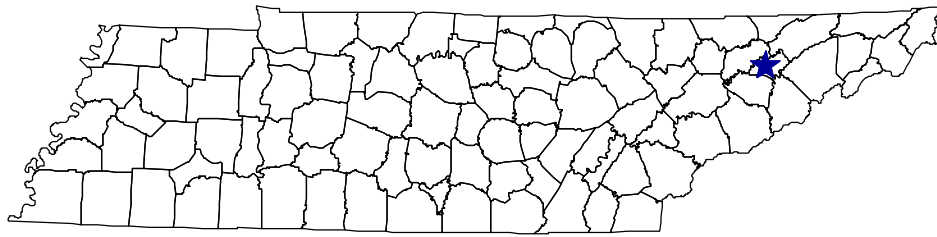
--- 2020 TN SIR

--- 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, 01/01/2019-12/31/2019

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	0.9	1086	N/A	N/A	0.72
	Adult/Pediatric Ward	0	1.5	2010	0.00	(0.00, 1.97)	0.52
CAUTI	Adult/Pediatric ICU	0	2.1	2540	0.00	(0.00, 1.41)	0.74
	Adult/Pediatric Ward	3	3.1	4220	0.95	(0.24, 2.60)	0.78
SSI	Colon surgery	0	1.0	47	0.00	(0.00, 2.93)	0.94
	Abdominal hysterectomy	0	0.5	110	N/A	N/A	0.80
LabID	MRSA bacteremia	1	1.4	31058	0.67	(0.03, 3.30)	1.19
	C. difficile infection	2	18.0	29826	0.11	(0.02, 0.37)	0.47

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

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

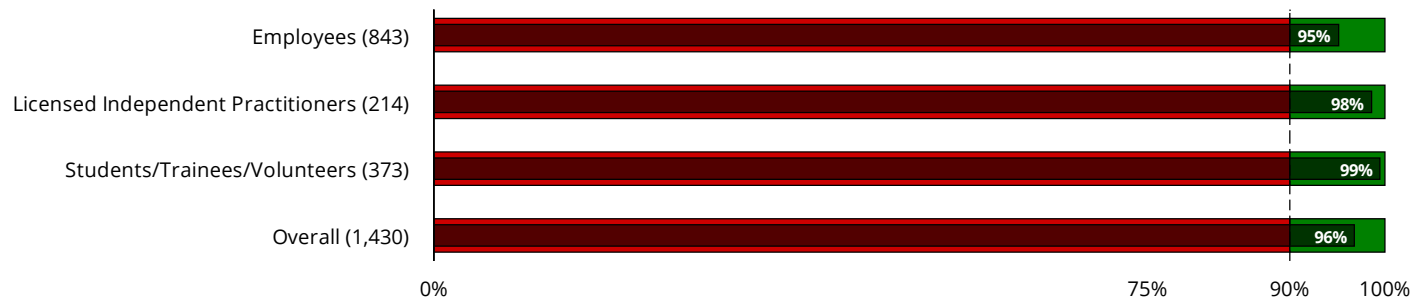
N/A: Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

*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 - '2019/2020' Influenza Season

Healthcare Personnel Category (Total)



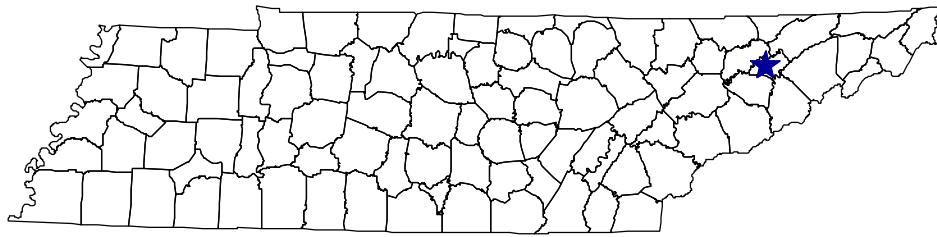
Healthcare Personnel Vaccinated (%)

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

Morristown-Hamblen Healthcare System, Morristown, Hamblen County

Medical School Affiliation: Undergraduate teaching

Bed Size Category: 100-399 beds



Healthcare-Associated Infections (HAI) Summary

Standardized Infection Ratio (SIR) by Infection Type, 01/01/2020-12/31/2020

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	0.9	1206	N/A	N/A	0.91
	Adult/Pediatric Ward	0	1.1	1842	0.00	(0.00, 2.50)	0.65
CAUTI	Adult/Pediatric ICU	0	2.0	2746	0.00	(0.00, 1.49)	0.69
	Adult/Pediatric Ward	1	2.9	4512	0.34	(0.02, 1.67)	0.68
SSI	Colon surgery	0	0.9	47	N/A	N/A	0.64
	Abdominal hysterectomy	0	0.5	122	N/A	N/A	1.01
LabID	MRSA bacteremia	0	1.2	29801	0.00	(0.00, 2.31)	1.23
	C. difficile infection	1	17.5	28591	0.06	(0.00, 0.28)	0.36

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

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

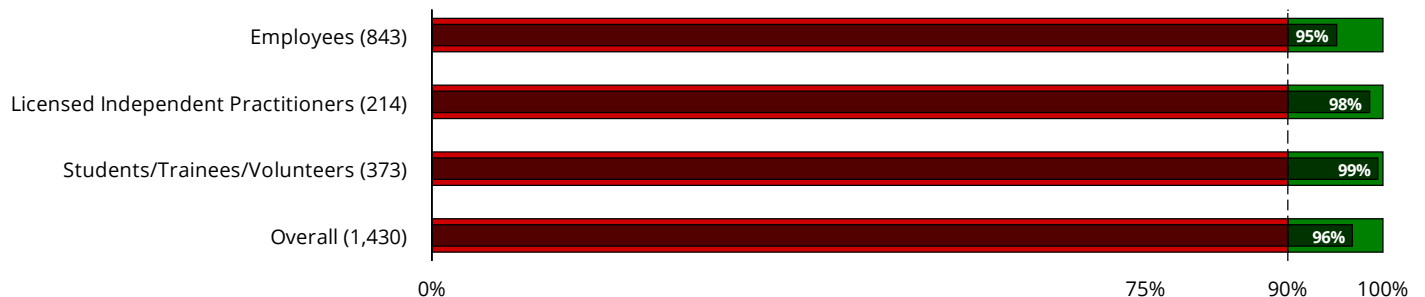
N/A: Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

*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 - '2020/2021' Influenza Season

Healthcare Personnel Category (Total)

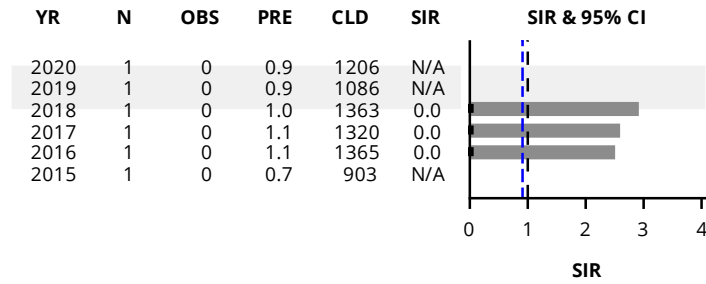


Healthcare Personnel Vaccinated (%)

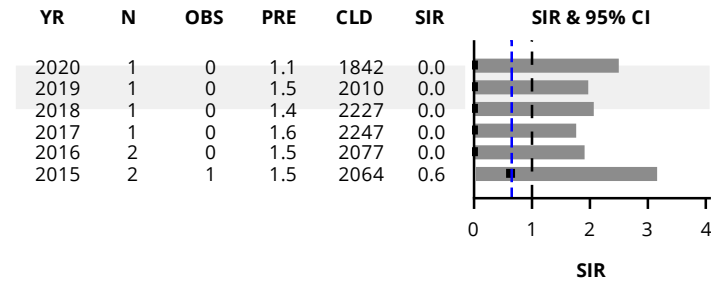
■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric ICUs

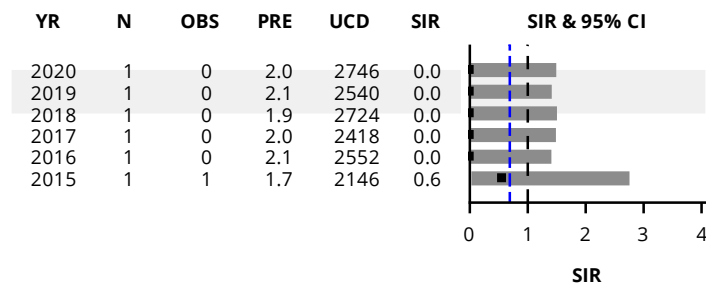


CLABSI - Adult/Pediatric Wards

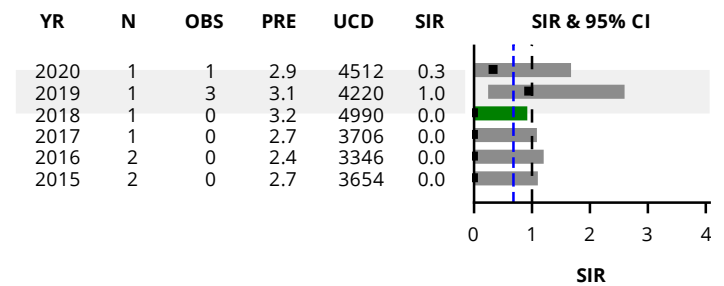


Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICUs

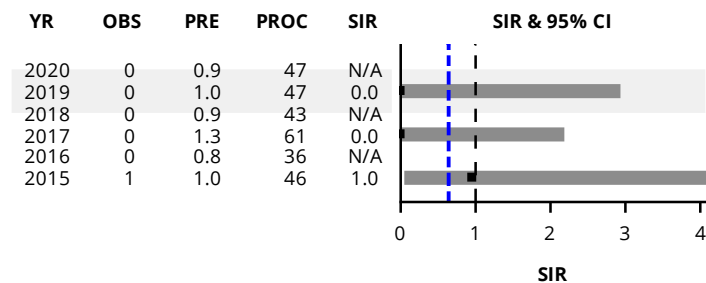


CAUTI - Adult/Pediatric Wards

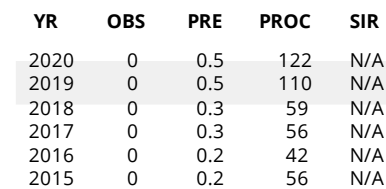


Surgical Site Infections (SSI)

SSI - Colon Surgery



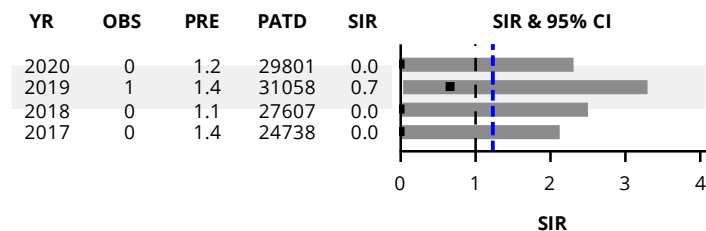
SSI - Abdominal Hysterectomy



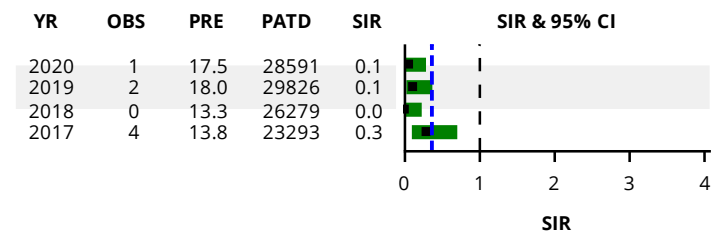
N/A: Number of predicted infections <1; no SIR calculated

Healthcare Facility-Onset Laboratory Identified (LabID) Events

LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia



LabID - *C. difficile* Infection (CDI)



Data reported as of June 30, 2021

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;

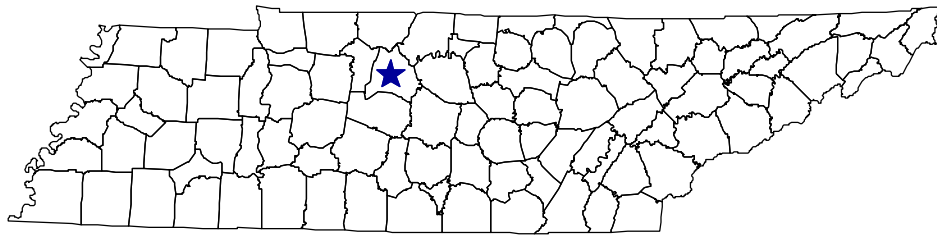
N/A = data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

- Significantly lower than NHSN SIR of 1
- Not significantly different from NHSN SIR of 1
- Significantly higher than NHSN SIR of 1
- - - 2020 TN SIR
- - - NHSN SIR=1

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, 01/01/2019-12/31/2019

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	0.5	521	N/A	N/A	0.72
	Neonatal ICU	N/A	N/A	N/A	N/A	N/A	0.44
	Adult/Pediatric Ward	1	0.7	923	N/A	N/A	0.52
CAUTI	Adult/Pediatric ICU	1	0.8	780	N/A	N/A	0.74
	Adult/Pediatric Ward	0	0.4	499	N/A	N/A	0.78
SSI	Colon surgery	4	0.7	29	N/A	N/A	0.94
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	0.80
LabID	MRSA bacteremia	2	1.0	14917	1.97	(0.33, 6.50)	1.19
	C. difficile infection	1	10.0	13955	0.10	(0.01, 0.49)	0.47

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 - '2019/2020' Influenza Season

Healthcare Personnel Category (Total)



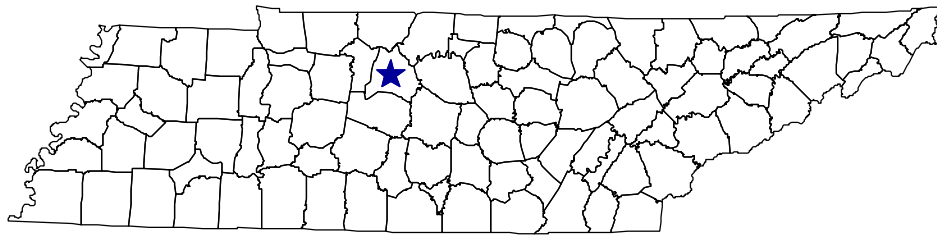
Healthcare Personnel Vaccinated (%)

■ 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, 01/01/2020-12/31/2020

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	1.0	1036	6.90	(3.02, 13.64)	0.91
	Neonatal ICU	N/A	N/A	N/A	N/A	N/A	0.62
	Adult/Pediatric Ward	1	0.5	607	N/A	N/A	0.65
CAUTI	Adult/Pediatric ICU	0	1.1	1115	0.00	(0.00, 2.53)	0.69
	Adult/Pediatric Ward	0	0.3	346	N/A	N/A	0.68
SSI	Colon surgery	0	0.5	24	N/A	N/A	0.64
	Abdominal hysterectomy	0	0.2	26	N/A	N/A	1.01
LabID	MRSA bacteremia	4	0.9	14732	N/A	N/A	1.23
	C. difficile infection	7	8.5	13616	0.82	(0.36, 1.63)	0.36

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

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

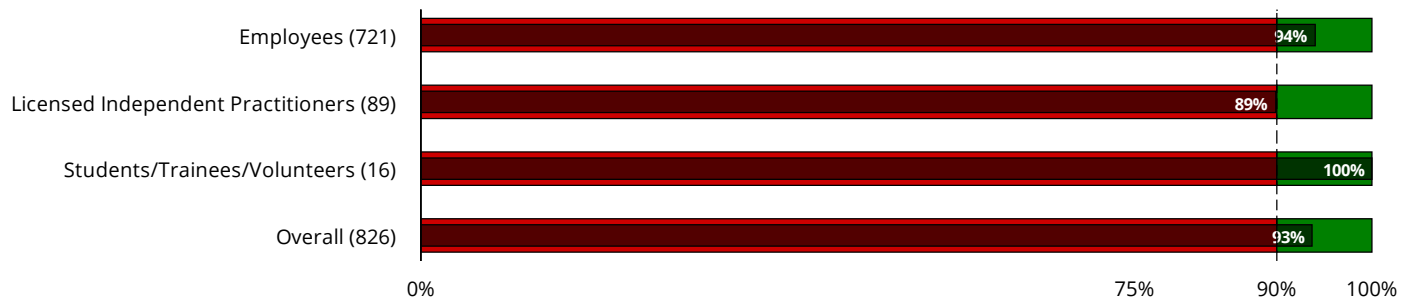
N/A: Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

*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 - '2020/2021' Influenza Season

Healthcare Personnel Category (Total)

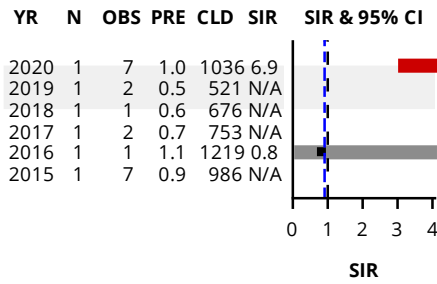


Healthcare Personnel Vaccinated (%)

■ 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	CLD	SIR
2020	1	N/A	N/A	N/A	N/A
2019	1	N/A	N/A	N/A	N/A
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

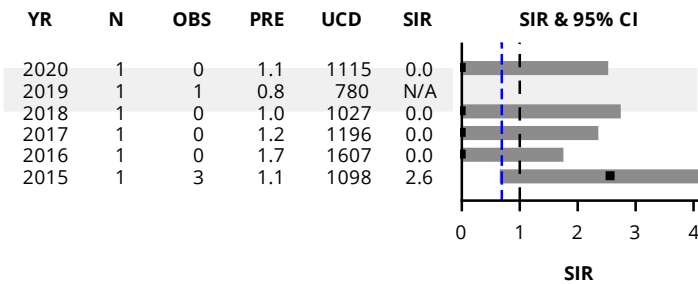
CLABSI - Adult/Pediatric Wards

YR	N	OBS	PRE	CLD	SIR
2020	2	1	0.5	607	N/A
2019	2	1	0.7	923	N/A
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

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
2020	2	0	0.3	346	N/A
2019	2	0	0.4	499	N/A
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

YR	OBS	PRE	PROC	SIR
2020	0	0.5	24	N/A
2019	4	0.7	29	N/A
2018	4	0.9	33	N/A
2017	1	1.2	37	0.8
2016	1	1.7	53	0.6
2015	2	1.5	43	1.3

N/A: Number of predicted infections <1; no SIR calculated

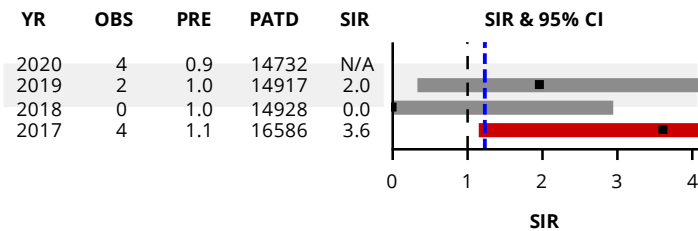
SSI - Abdominal Hysterectomy

YR	OBS	PRE	PROC	SIR
2020	0	0.2	26	N/A
2019	N/A	N/A	N/A	N/A
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

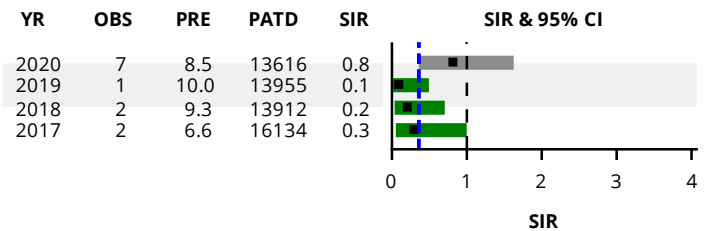
N/A: Number of predicted infections <1; no SIR calculated

Healthcare Facility-Onset Laboratory Identified (LabID) Events

LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia



LabID - *C. difficile* Infection (CDI)



Data reported as of June 30, 2021

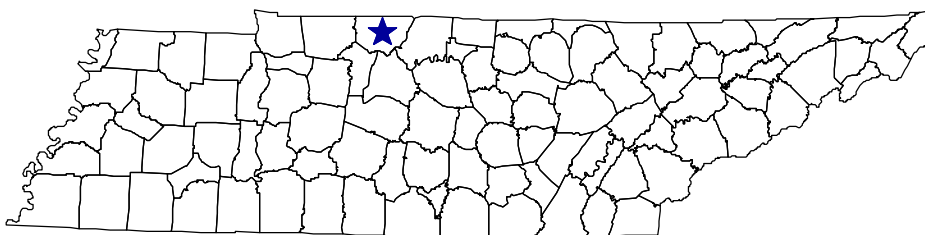
YR = reporting year; N = number of units reporting (CLABSI/CAUTI); OBS = observed number of infections
 PRE = statistically 'predicted' number of infections, based on NHSN national baseline data
 SIR = standardized infection ratio (observed/predicted number of infections)
 CLD = central line days; UCD = 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
 - - - 2020 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, 01/01/2019-12/31/2019

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	333	N/A	N/A	0.72
	Adult/Pediatric Ward	1	0.3	550	N/A	N/A	0.52
CAUTI	Adult/Pediatric ICU	0	0.7	1050	N/A	N/A	0.74
	Adult/Pediatric Ward	0	0.7	1091	N/A	N/A	0.78
SSI	Colon surgery	N/A	N/A	N/A	N/A	N/A	0.94
	Abdominal hysterectomy	0	0.1	29	N/A	N/A	0.80
LabID	MRSA bacteremia	0	0.5	15425	N/A	N/A	1.19
	C. difficile infection	4	5.8	13646	0.68	(0.22, 1.64)	0.47

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

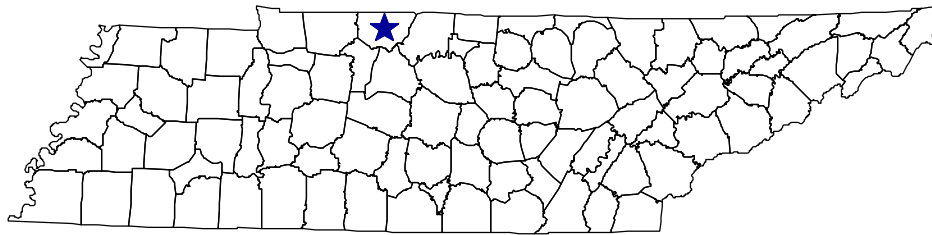
Healthcare Personnel Influenza Vaccination - '2019/2020' Influenza Season

This facility utilized the COVID-19 related CMS reporting exemption for the '2019/2020' influenza season. See the CMS website for more information.

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, 01/01/2020-12/31/2020

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	588	N/A	N/A	0.91
	Adult/Pediatric Ward	1	0.5	869	N/A	N/A	0.65
CAUTI	Adult/Pediatric ICU	0	1.0	1378	0.00	(0.00, 2.92)	0.69
	Adult/Pediatric Ward	0	1.1	1617	0.00	(0.00, 2.67)	0.68
SSI	Colon surgery	0	0.5	23	N/A	N/A	0.64
	Abdominal hysterectomy	0	0.2	36	N/A	N/A	1.01
LabID	MRSA bacteremia	0	0.6	16759	N/A	N/A	1.23
	C. difficile infection	9	8.2	15280	1.09	(0.53, 2.01)	0.36

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 - '2020/2021' 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
2020	1	1	0.4	588	N/A
2019	1	0	0.2	333	N/A
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

CLABSI - Adult/Pediatric Wards

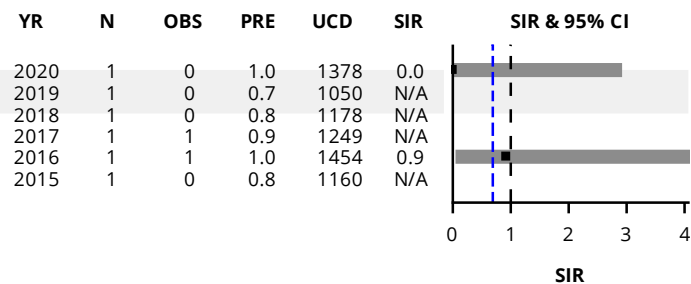
YR	N	OBS	PRE	CLD	SIR
2020	2	1	0.5	869	N/A
2019	2	1	0.3	550	N/A
2018	2	1	0.4	680	N/A
2017	2	1	0.6	1068	N/A
2016	2	0	0.8	1376	N/A
2015	2	0	0.8	1256	N/A

N/A: Number of predicted infections <1; no SIR calculated

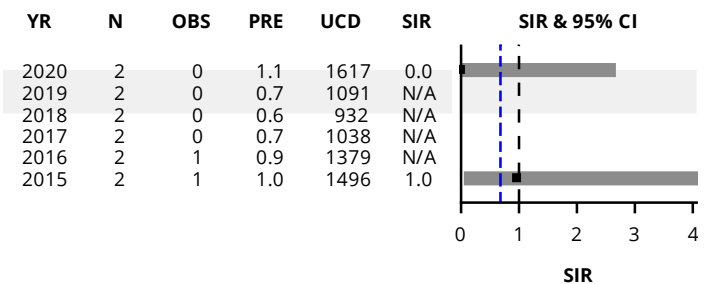
N/A: Number of predicted infections <1; no SIR calculated

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
2020	0	0.5	23	N/A
2019	N/A	N/A	N/A	N/A
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

SSI - Abdominal Hysterectomy

YR	OBS	PRE	PROC	SIR
2020	0	0.2	36	N/A
2019	0	0.1	29	N/A
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

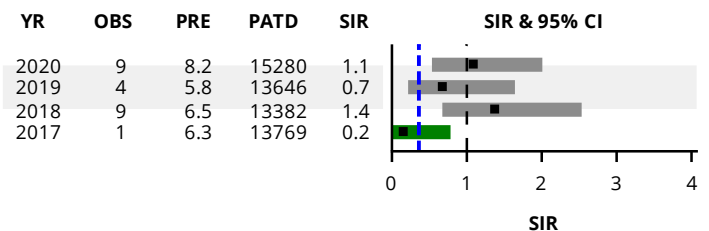
N/A: Number of predicted infections <1; no SIR calculated

Healthcare Facility-Onset Laboratory Identified (LabID) Events

LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia

YR	OBS	PRE	PATD	SIR
2020	0	0.6	16759	N/A
2019	0	0.5	15425	N/A
2018	1	0.5	15141	N/A
2017	1	0.5	15012	N/A

LabID - *C. difficile* Infection (CDI)



N/A: Number of predicted infections <1; no SIR calculated

Data reported as of June 30, 2021

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;

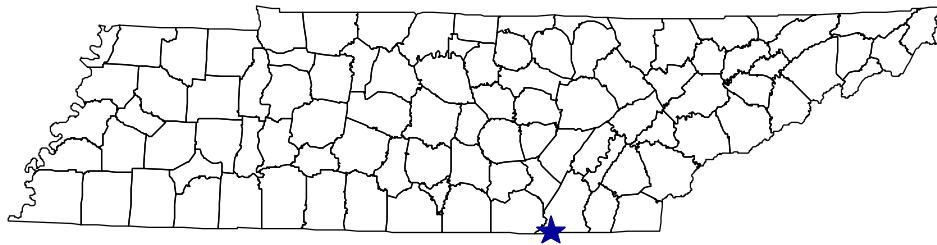
N/A = data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

- Significantly lower than NHSN SIR of 1
- Not significantly different from NHSN SIR of 1
- Significantly higher than NHSN SIR of 1
- - - 2020 TN SIR
- - - NHSN SIR=1

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, 01/01/2019-12/31/2019

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	262	N/A	N/A	0.72
	Neonatal ICU	0	0.1	186	N/A	N/A	0.44
	Adult/Pediatric Ward	0	0.2	295	N/A	N/A	0.52
CAUTI	Adult/Pediatric ICU	1	0.2	248	N/A	N/A	0.74
	Adult/Pediatric Ward	0	0.3	532	N/A	N/A	0.78
SSI	Colon surgery	N/A	N/A	N/A	N/A	N/A	0.94
	Abdominal hysterectomy	1	1.4	276	0.70	(0.04, 3.44)	0.80
LabID	MRSA bacteremia	1	0.9	21861	N/A	N/A	1.19
	C. difficile infection	1	6.8	15293	0.15	(0.01, 0.72)	0.47

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

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

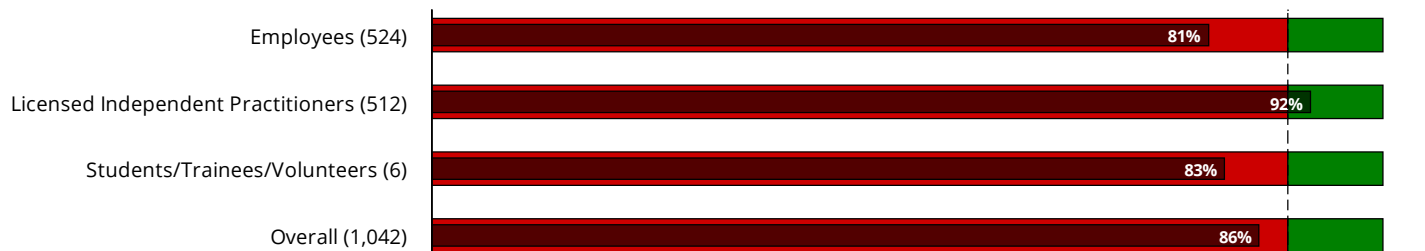
N/A: Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

*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 - '2019/2020' Influenza Season

Healthcare Personnel Category (Total)



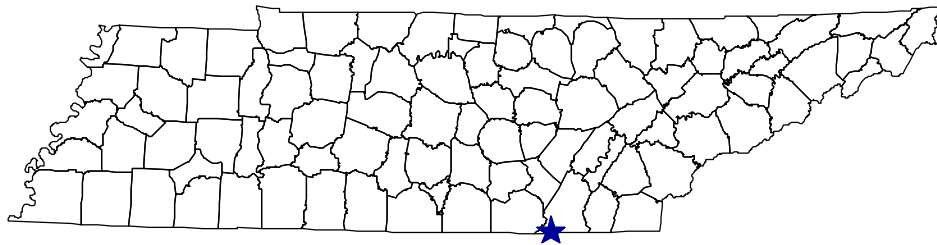
Healthcare Personnel Vaccinated (%)

■ 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, 01/01/2020-12/31/2020

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	351	N/A	N/A	0.91
	Neonatal ICU	0	0.4	337	N/A	N/A	0.62
	Adult/Pediatric Ward	0	0.2	269	N/A	N/A	0.65
CAUTI	Adult/Pediatric ICU	0	0.3	453	N/A	N/A	0.69
	Adult/Pediatric Ward	0	0.3	513	N/A	N/A	0.68
SSI	Colon surgery	0	0.4	21	N/A	N/A	0.64
	Abdominal hysterectomy	1	1.0	189	0.97	(0.05, 4.78)	1.01
LabID	MRSA bacteremia	1	1.0	22665	0.93	(0.05, 4.59)	1.23
	C. difficile infection	0	8.5	15459	0.00	(0.00, 0.35)	0.36

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 - '2020/2021' 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
2020	1	0	0.3	351	N/A
2019	1	0	0.2	262	N/A
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	CLD	SIR
2020	1	0	0.4	337	N/A
2019	1	0	0.1	186	N/A
2018	1	0	0.6	403	N/A
2017	1	1	0.3	172	N/A
2016	1	0	0.3	204	N/A
2015	1	1	0.3	238	N/A

CLABSI - Adult/Pediatric Wards

YR	N	OBS	PRE	CLD	SIR
2020	2	0	0.2	269	N/A
2019	2	0	0.2	295	N/A
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 calculiN/A: Number of predicted infections 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
2020	1	0	0.3	453	N/A
2019	1	1	0.2	248	N/A
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
2020	2	0	0.3	513	N/A
2019	2	0	0.3	532	N/A
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

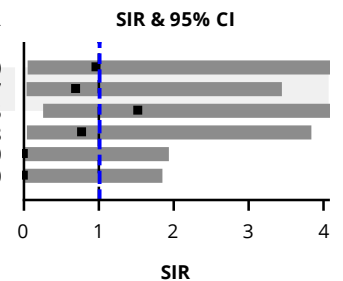
Surgical Site Infections (SSI)

SSI - Colon Surgery

YR	OBS	PRE	PROC	SIR
2020	0	0.4	21	N/A
2019	N/A	N/A	N/A	N/A
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
2020	1	1.0	189	1.0
2019	1	1.4	276	0.7
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

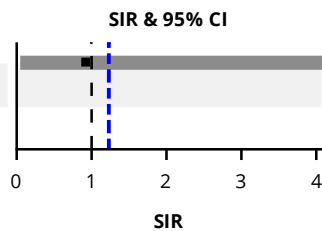


N/A: Number of predicted infections <1; no SIR calculated

Healthcare Facility-Onset Laboratory Identified (LabID) Events

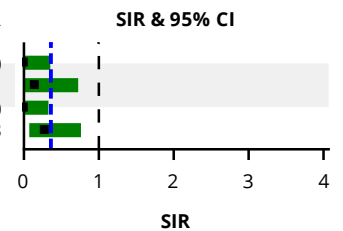
LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia

YR	OBS	PRE	PATD	SIR
2020	1	1.0	22665	0.9
2019	1	0.9	21861	N/A
2018	1	0.9	22531	N/A
2017	2	0.7	22719	N/A



LabID - *C. difficile* Infection (CDI)

YR	OBS	PRE	PATD	SIR
2020	0	8.5	15459	0.0
2019	1	6.8	15293	0.1
2018	0	9.1	15490	0.0
2017	3	10.7	16451	0.3



Data reported as of June 30, 2021

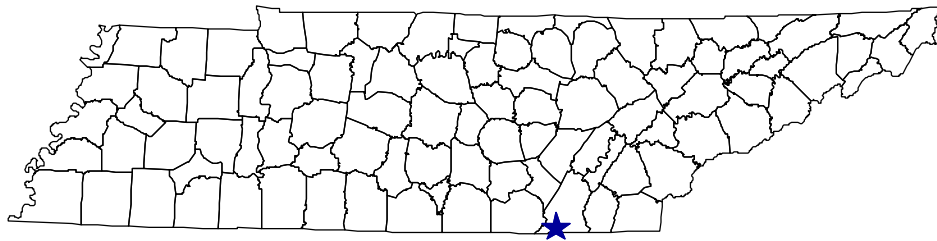
YR = reporting year; N = number of units reporting (CLABSI/CAUTI); OBS = observed number of infections
 PRE = statistically 'predicted' number of infections, based on NHSN national baseline data
 SIR = standardized infection ratio (observed/predicted number of infections)
 CLD = central line days; UCD = 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
 - - - 2020 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, 01/01/2019-12/31/2019

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	1.9	2197	0.00	(0.00, 1.56)	0.72
	Adult/Pediatric Ward	1	1.2	1660	0.80	(0.04, 3.93)	0.52
CAUTI	Adult/Pediatric ICU	2	2.8	2699	0.71	(0.12, 2.36)	0.74
	Adult/Pediatric Ward	3	1.7	2364	1.67	(0.42, 4.54)	0.78
SSI	Colon surgery	1	1.4	70	0.68	(0.03, 3.37)	0.94
	Abdominal hysterectomy	0	0.5	113	N/A	N/A	0.80
LabID	MRSA bacteremia	4	2.5	36085	1.57	(0.50, 3.78)	1.19
	C. difficile infection	4	16.2	35851	0.25	(0.08, 0.59)	0.47

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

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

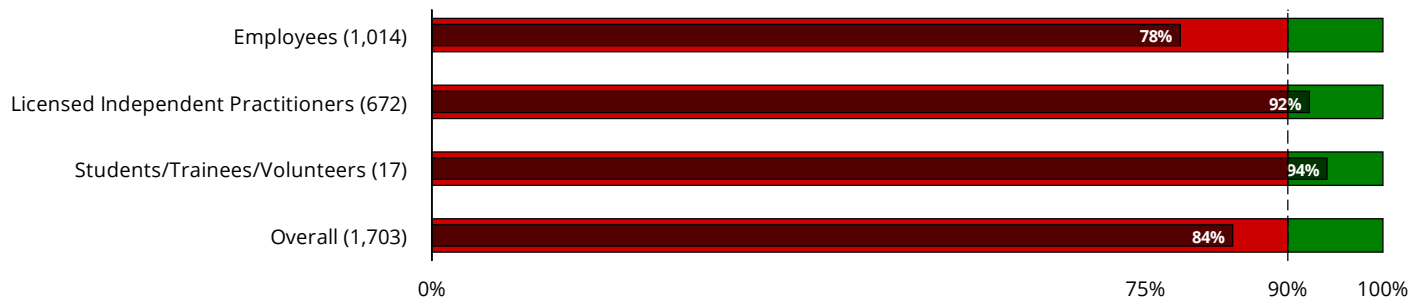
N/A: Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

*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 - '2019/2020' Influenza Season

Healthcare Personnel Category (Total)



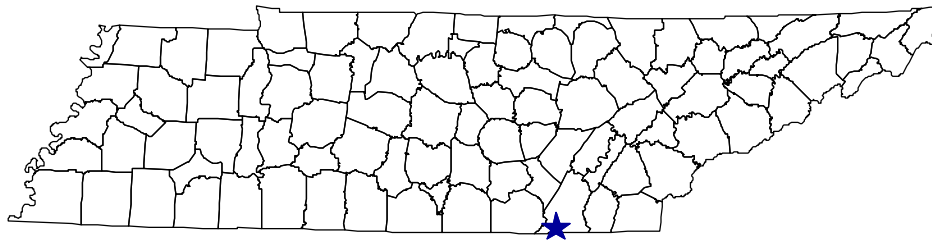
Healthcare Personnel Vaccinated (%)

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

Parkridge Medical Center, Chattanooga, Hamilton County

Medical School Affiliation: Graduate teaching

Bed Size Category: 100-399 beds



Healthcare-Associated Infections (HAI) Summary

Standardized Infection Ratio (SIR) by Infection Type, 01/01/2020-12/31/2020

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	2.7	3135	0.37	(0.02, 1.80)	0.91
	Adult/Pediatric Ward	1	1.2	1589	0.83	(0.04, 4.11)	0.65
CAUTI	Adult/Pediatric ICU	2	3.6	3552	0.55	(0.09, 1.82)	0.69
	Adult/Pediatric Ward	1	2.1	2838	0.46	(0.02, 2.28)	0.68
SSI	Colon surgery	2	1.5	74	1.33	(0.22, 4.39)	0.64
	Abdominal hysterectomy	1	0.4	78	N/A	N/A	1.01
LabID	MRSA bacteremia	3	2.5	38563	1.16	(0.30, 3.16)	1.23
	C. difficile infection	2	22.4	38563	0.09	(0.02, 0.29)	0.36

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 - '2020/2021' Influenza Season

Healthcare Personnel Category (Total)

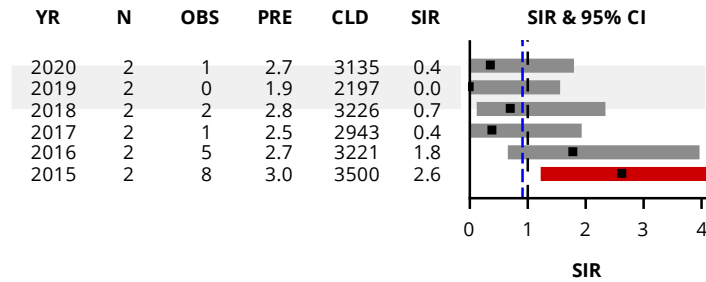


Healthcare Personnel Vaccinated (%)

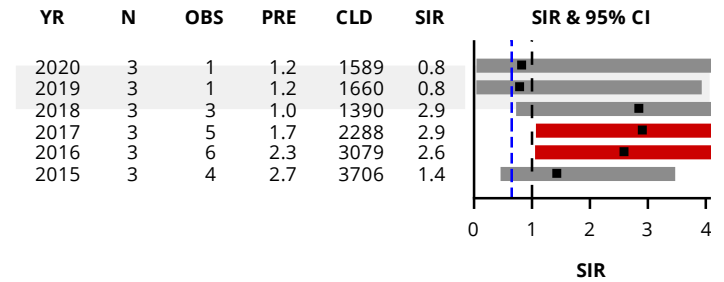
Below 90% >90% (HHS Healthy People 2020 Goal)

Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric ICUs

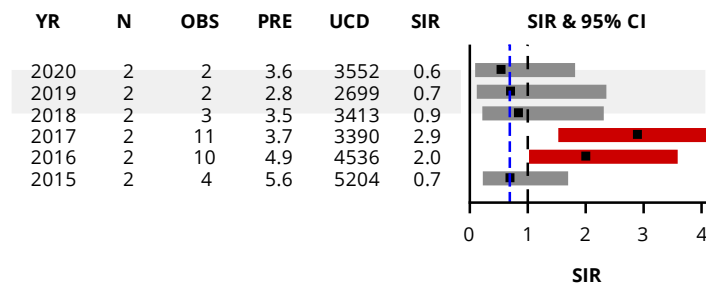


CLABSI - Adult/Pediatric Wards

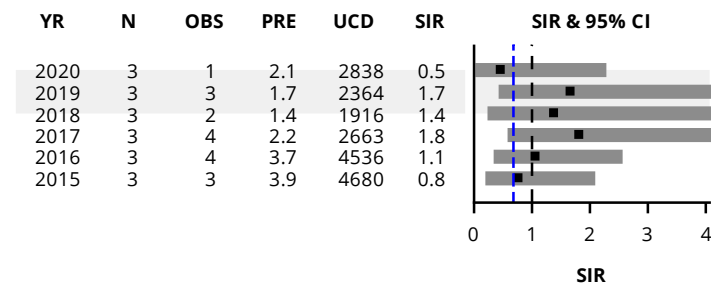


Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICUs

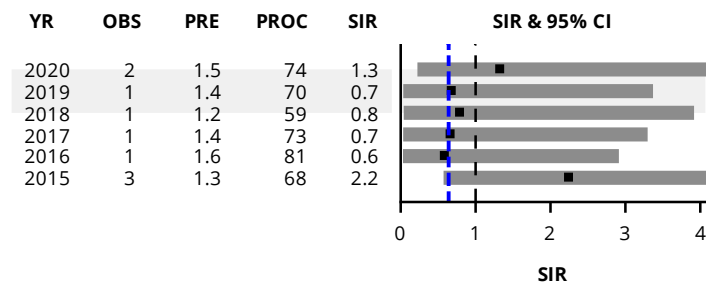


CAUTI - Adult/Pediatric Wards

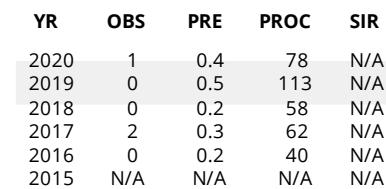


Surgical Site Infections (SSI)

SSI - Colon Surgery



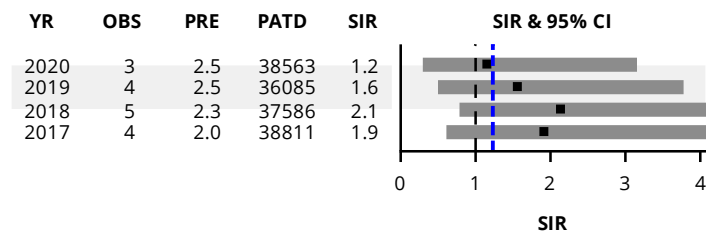
SSI - Abdominal Hysterectomy



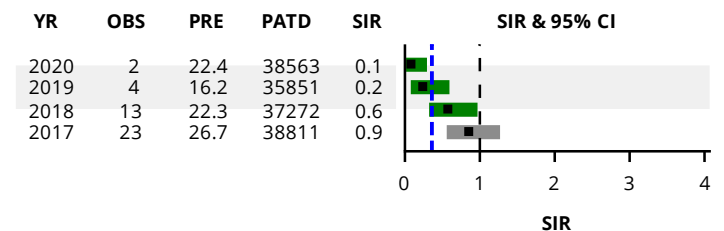
N/A: Number of predicted infections <1; no SIR calculated

Healthcare Facility-Onset Laboratory Identified (LabID) Events

LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia



LabID - *C. difficile* Infection (CDI)



Data reported as of June 30, 2021

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

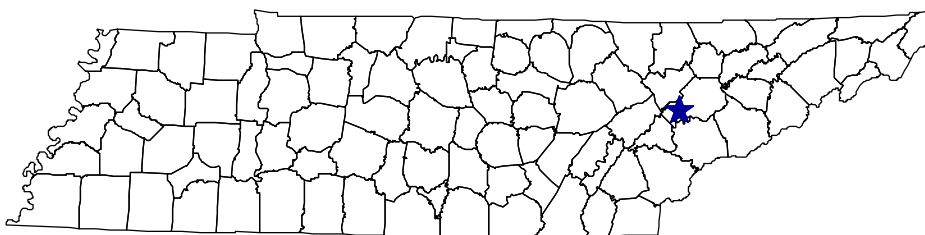
--- 2020 TN SIR

--- 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, 01/01/2019-12/31/2019

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	3.4	3965	1.45	(0.53, 3.22)	0.72
	Adult/Pediatric Ward	7	4.6	6192	1.51	(0.66, 2.98)	0.52
CAUTI	Adult/Pediatric ICU	6	3.4	3850	1.74	(0.71, 3.62)	0.74
	Adult/Pediatric Ward	3	3.7	4522	0.80	(0.20, 2.17)	0.78
SSI	Colon surgery	6	3.8	186	1.57	(0.64, 3.26)	0.94
	Abdominal hysterectomy	3	1.8	342	1.59	(0.41, 4.33)	0.80
LabID	MRSA bacteremia	8	4.9	85714	1.63	(0.76, 3.10)	1.19
	C. difficile infection	11	51.2	83531	0.22	(0.11, 0.37)	0.47

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

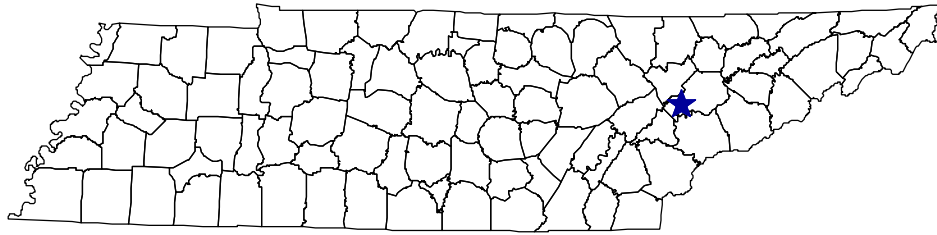
Healthcare Personnel Influenza Vaccination - '2019/2020' Influenza Season

This facility utilized the COVID-19 related CMS reporting exemption for the '2019/2020' influenza season. See the CMS website for more information.

Parkwest Medical Center- Knoxville, Knoxville, Knox County

Medical School Affiliation: Undergraduate teaching

Bed Size Category: 400+ beds



Healthcare-Associated Infections (HAI) Summary

Standardized Infection Ratio (SIR) by Infection Type, 01/01/2020-12/31/2020

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	3.2	3752	0.61	(0.10, 2.03)	0.91
	Adult/Pediatric Ward	2	4.0	5416	0.49	(0.08, 1.63)	0.65
CAUTI	Adult/Pediatric ICU	1	2.9	3242	0.34	(0.02, 1.70)	0.69
	Adult/Pediatric Ward	6	3.6	4350	1.66	(0.68, 3.46)	0.68
SSI	Colon surgery	0	3.5	180	0.00	(0.00, 0.84)	0.64
	Abdominal hysterectomy	1	1.2	219	0.80	(0.04, 3.95)	1.01
LabID	MRSA bacteremia	6	5.6	80163	1.06	(0.43, 2.20)	1.23
	C. difficile infection	13	55.6	77100	0.23	(0.13, 0.39)	0.36

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 - '2020/2021' Influenza Season

Healthcare Personnel Category (Total)

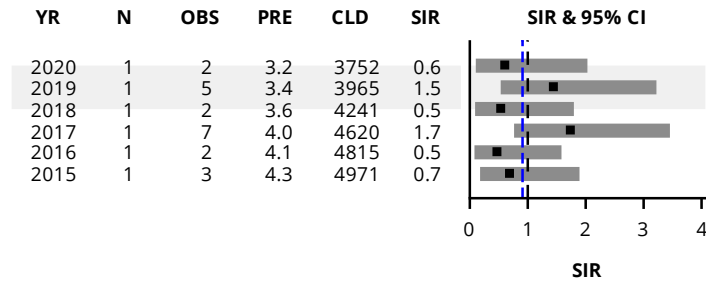


Healthcare Personnel Vaccinated (%)

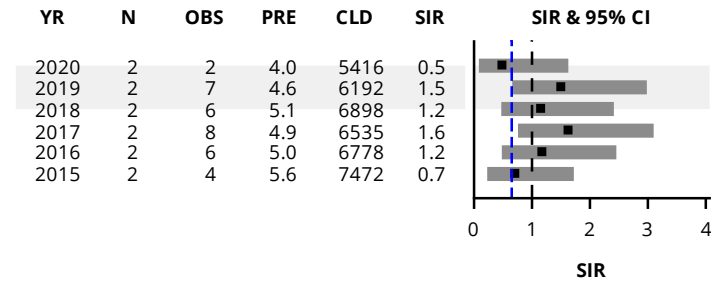
■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric ICUs

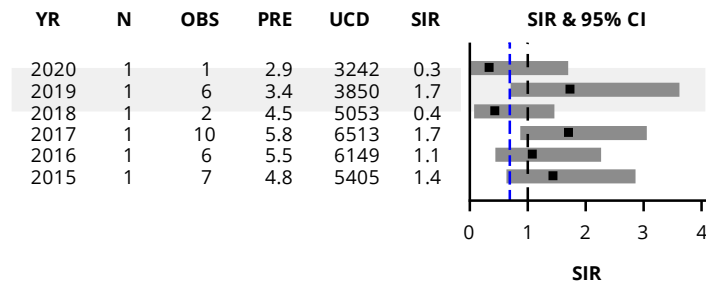


CLABSI - Adult/Pediatric Wards

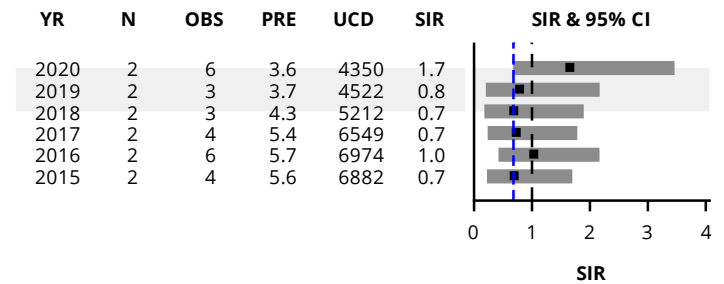


Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICUs

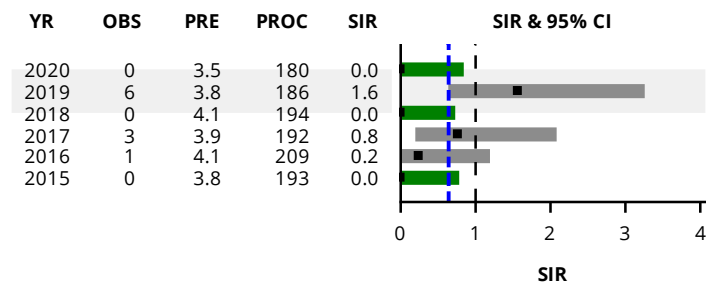


CAUTI - Adult/Pediatric Wards

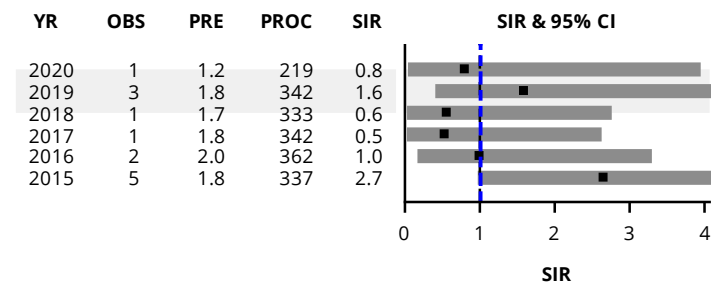


Surgical Site Infections (SSI)

SSI - Colon Surgery

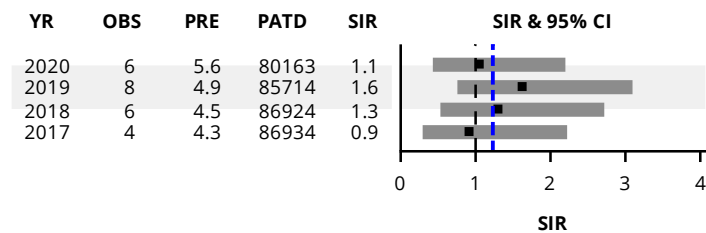


SSI - Abdominal Hysterectomy

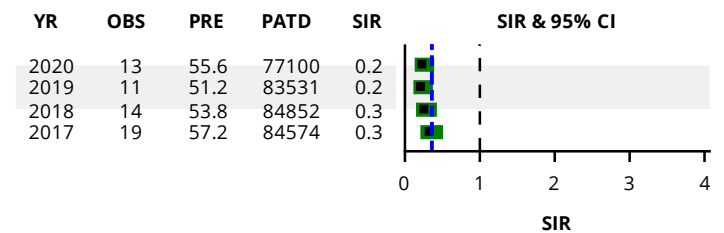


Healthcare Facility-Onset Laboratory Identified (LabID) Events

LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia



LabID - *C. difficile* Infection (CDI)



Data reported as of June 30, 2021

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

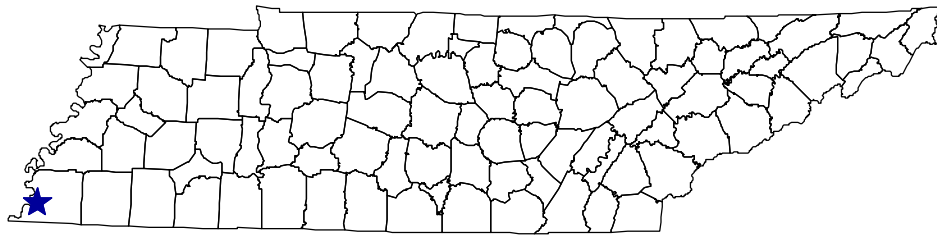
--- 2020 TN SIR

--- NHSN SIR=1

Regional One Health (Reg. Med.Ctr 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, 01/01/2019-12/31/2019

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	3.1	2791	0.00	(0.00, 0.95)	0.72
	Neonatal ICU	0	3.3	1964	0.00	(0.00, 0.89)	0.44
	Adult/Pediatric Ward	3	3.2	3315	0.93	(0.24, 2.53)	0.52
CAUTI	Adult/Pediatric ICU	35	25.6	10313	1.37	(0.97, 1.88)	0.74
	Adult/Pediatric Ward	6	1.9	1716	3.01	(1.22, 6.25)	0.78
SSI	Colon surgery	16	10.1	213	1.58	(0.93, 2.50)	0.94
	Abdominal hysterectomy	0	0.6	73	N/A	N/A	0.80
LabID	MRSA bacteremia	30	6.5	78618	4.58	(3.15, 6.45)	1.19
	C. difficile infection	25	37.2	55094	0.67	(0.44, 0.98)	0.47

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

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

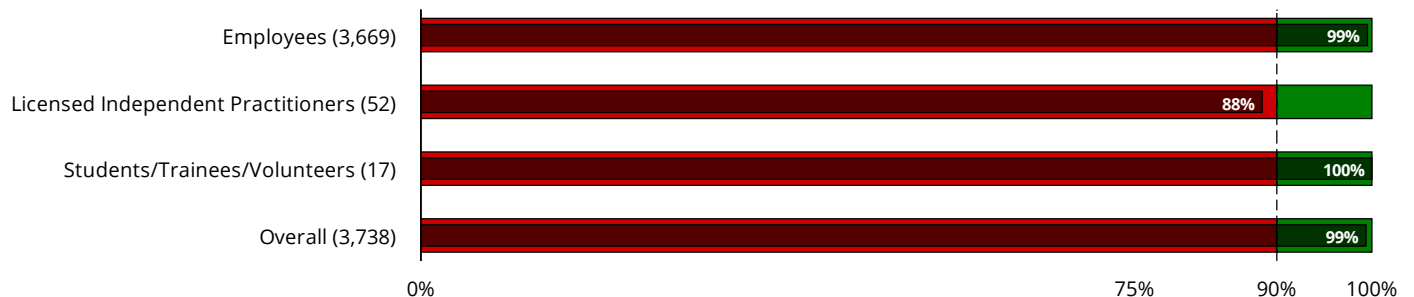
N/A: Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

*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 - '2019/2020' Influenza Season

Healthcare Personnel Category (Total)



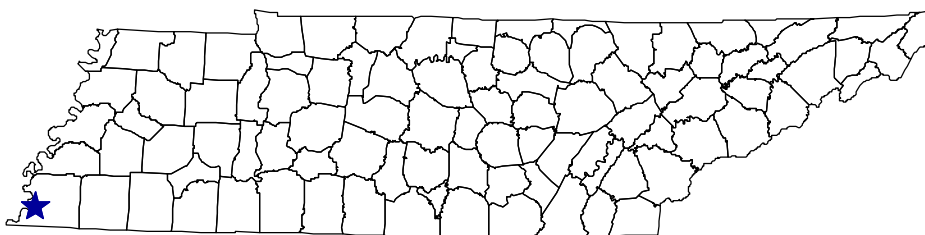
Healthcare Personnel Vaccinated (%)

■ 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: 400+ beds



Healthcare-Associated Infections (HAI) Summary

Standardized Infection Ratio (SIR) by Infection Type, 01/01/2020-12/31/2020

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	3.7	3346	1.59	(0.64, 3.31)	0.91
	Neonatal ICU	2	3.4	2026	0.59	(0.10, 1.93)	0.62
	Adult/Pediatric Ward	1	2.2	2294	0.45	(0.02, 2.21)	0.65
CAUTI	Adult/Pediatric ICU	46	21.6	9571	2.12	(1.57, 2.81)	0.69
	Adult/Pediatric Ward	5	2.5	2210	1.94	(0.71, 4.31)	0.68
SSI	Colon surgery	6	5.6	116	1.06	(0.43, 2.20)	0.64
	Abdominal hysterectomy	2	0.3	39	N/A	N/A	1.01
LabID	MRSA bacteremia	28	5.9	76042	4.67	(3.17, 6.66)	1.23
	C. difficile infection	21	37.6	58221	0.56	(0.36, 0.84)	0.36

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 - '2020/2021' Influenza Season

Healthcare Personnel Category (Total)

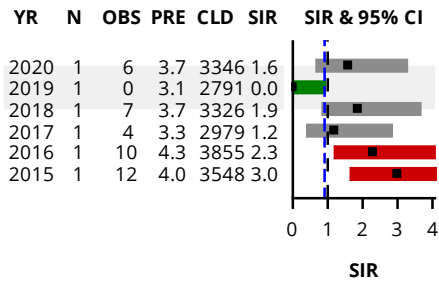


Healthcare Personnel Vaccinated (%)

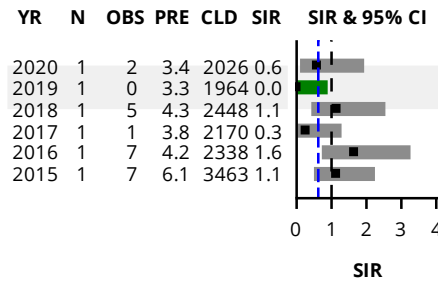
■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

Central Line-Associated Bloodstream Infections (CLABSI)

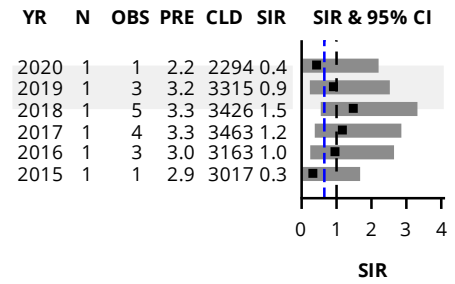
CLABSI - Adult/Pediatric ICUs



CLABSI - Neonatal ICUs

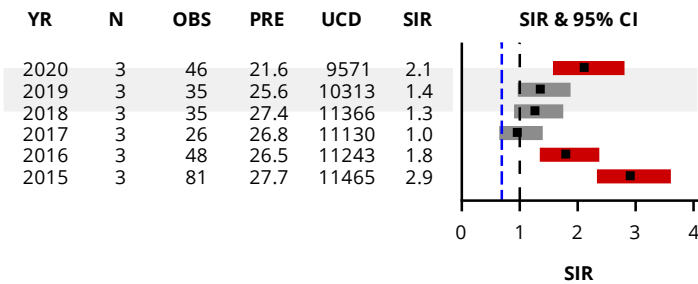


CLABSI - Adult/Pediatric Wards

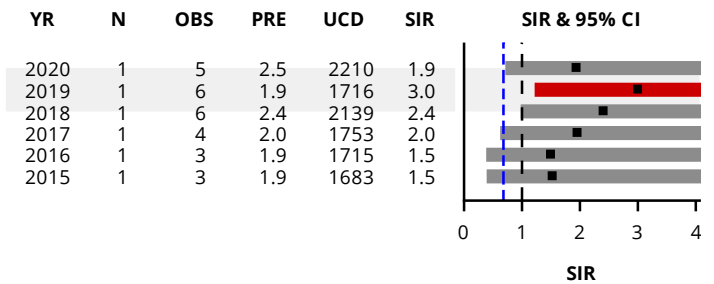


Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICUs

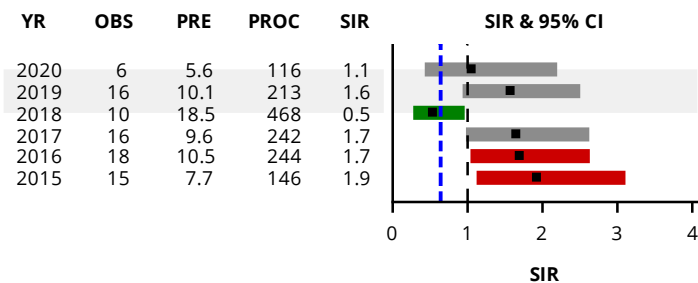


CAUTI - Adult/Pediatric Wards

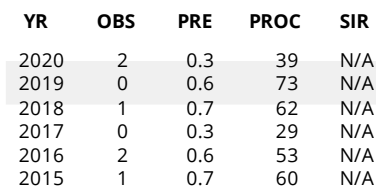


Surgical Site Infections (SSI)

SSI - Colon Surgery



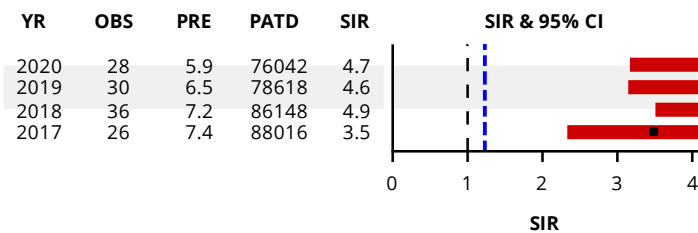
SSI - Abdominal Hysterectomy



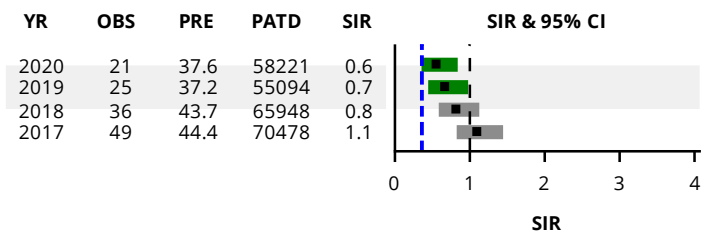
N/A: Number of predicted infections <1; no SIR calculated

Healthcare Facility-Onset Laboratory Identified (LabID) Events

LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia



LabID - *C. difficile* Infection (CDI)



Data reported as of June 30, 2021

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

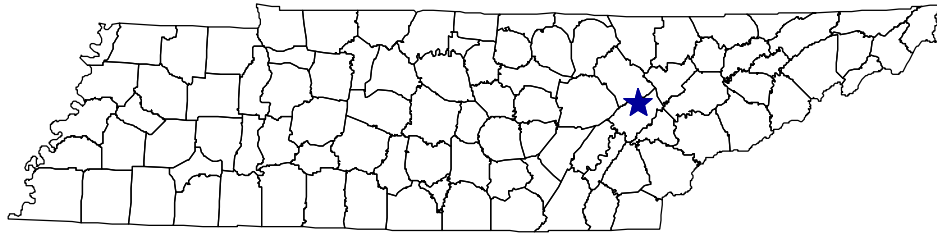
--- 2020 TN SIR

--- 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, 01/01/2019-12/31/2019

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	545	N/A	N/A	0.72
	Adult/Pediatric Ward	1	0.2	515	N/A	N/A	0.52
CAUTI	Adult/Pediatric ICU	0	0.4	780	N/A	N/A	0.74
	Adult/Pediatric Ward	0	0.3	749	N/A	N/A	0.78
SSI	Colon surgery	1	1.0	60	0.94	(0.05, 4.62)	0.94
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	0.80
LabID	MRSA bacteremia	0	0.3	10844	N/A	N/A	1.19
	C. difficile infection	1	5.0	10817	0.20	(0.01, 0.98)	0.47

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

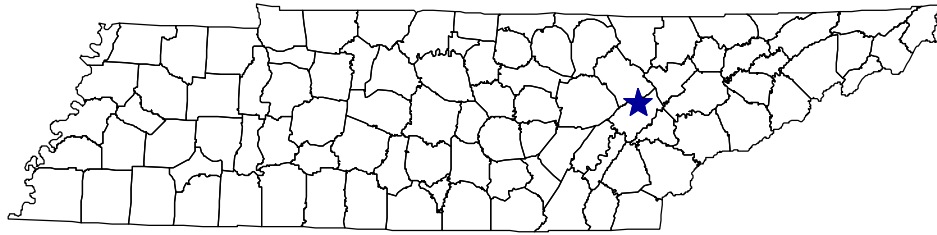
Healthcare Personnel Influenza Vaccination - '2019/2020' Influenza Season

This facility utilized the COVID-19 related CMS reporting exemption for the '2019/2020' influenza season. See the CMS website for more information.

Roane Medical Center, Harriman, Roane County

Medical School Affiliation: Undergraduate teaching

Bed Size Category: 50-99 beds



Healthcare-Associated Infections (HAI) Summary

Standardized Infection Ratio (SIR) by Infection Type, 01/01/2020-12/31/2020

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	415	N/A	N/A	0.91
	Adult/Pediatric Ward	0	0.2	424	N/A	N/A	0.65
CAUTI	Adult/Pediatric ICU	0	0.4	745	N/A	N/A	0.69
	Adult/Pediatric Ward	1	0.3	636	N/A	N/A	0.68
SSI	Colon surgery	1	0.7	41	N/A	N/A	0.64
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	1.01
LabID	MRSA bacteremia	0	0.3	10394	N/A	N/A	1.23
	C. difficile infection	0	5.3	10394	0.00	(0.00, 0.56)	0.36

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

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

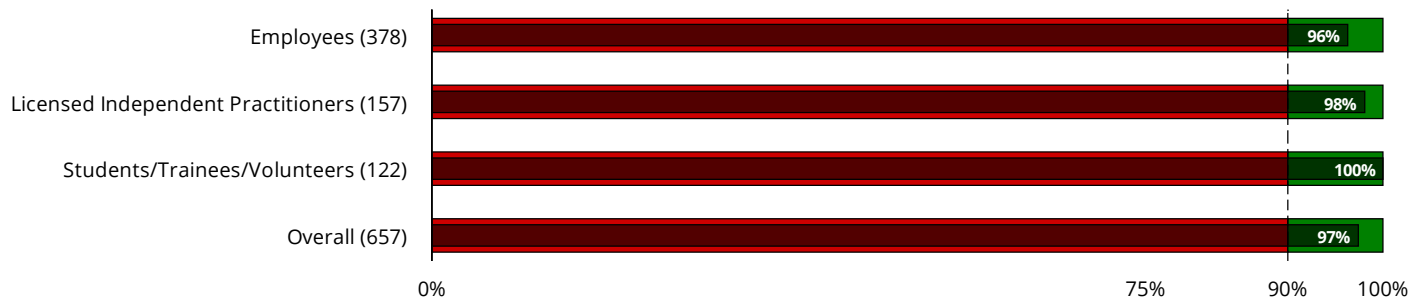
N/A: Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

*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 - '2020/2021' 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
2020	1	0	0.2	415	N/A
2019	1	0	0.3	545	N/A
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
2020	1	0	0.2	424	N/A
2019	1	1	0.2	515	N/A
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
2020	1	0	0.4	745	N/A
2019	1	0	0.4	780	N/A
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

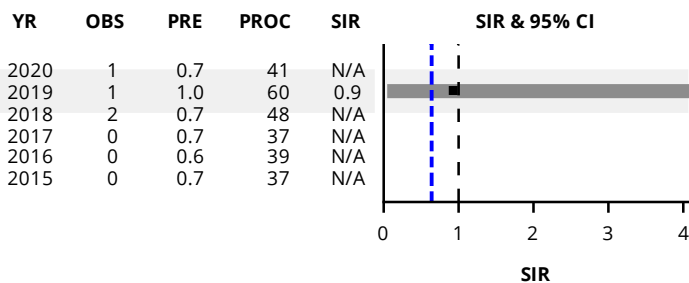
CAUTI - Adult/Pediatric Wards

YR	N	OBS	PRE	UCD	SIR
2020	1	1	0.3	636	N/A
2019	1	0	0.3	749	N/A
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



SSI - Abdominal Hysterectomy

YR	OBS	PRE	PROC	SIR
2020	N/A	N/A	N/A	N/A
2019	N/A	N/A	N/A	N/A
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

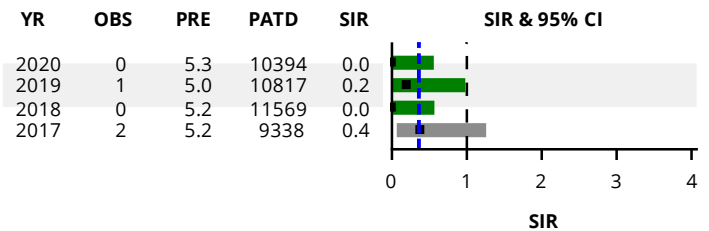
Healthcare Facility-Onset Laboratory Identified (LabID) Events

LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia

YR	OBS	PRE	PATD	SIR
2020	0	0.3	10394	N/A
2019	0	0.3	10844	N/A
2018	0	0.3	11569	N/A
2017	0	0.3	9338	N/A

N/A: Number of predicted infections <1; no SIR calculated

LabID - *C. difficile* Infection (CDI)



Data reported as of June 30, 2021

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

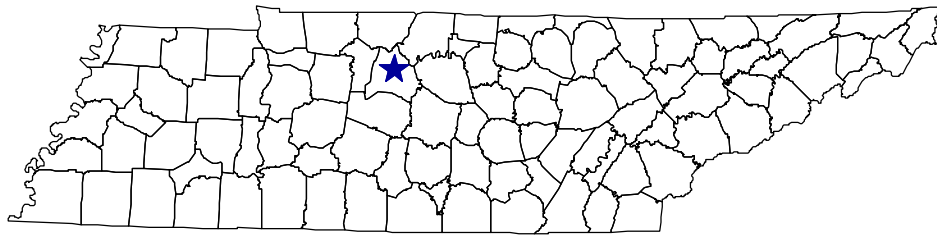
--- 2020 TN SIR

--- 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, 01/01/2019-12/31/2019

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	3.1	3651	1.26	(0.40, 3.05)	0.72
	Adult/Pediatric Ward	1	2.3	3200	0.42	(0.02, 2.06)	0.52
CAUTI	Adult/Pediatric ICU	2	5.2	3373	0.38	(0.06, 1.27)	0.74
	Adult/Pediatric Ward	2	1.8	2204	1.08	(0.18, 3.58)	0.78
SSI	Colon surgery	1	3.1	126	0.32	(0.02, 1.59)	0.94
	Abdominal hysterectomy	0	0.2	45	N/A	N/A	0.80
LabID	MRSA bacteremia	4	5.0	63806	0.79	(0.25, 1.90)	1.19
	C. difficile infection	9	28.2	63806	0.32	(0.16, 0.58)	0.47

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

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

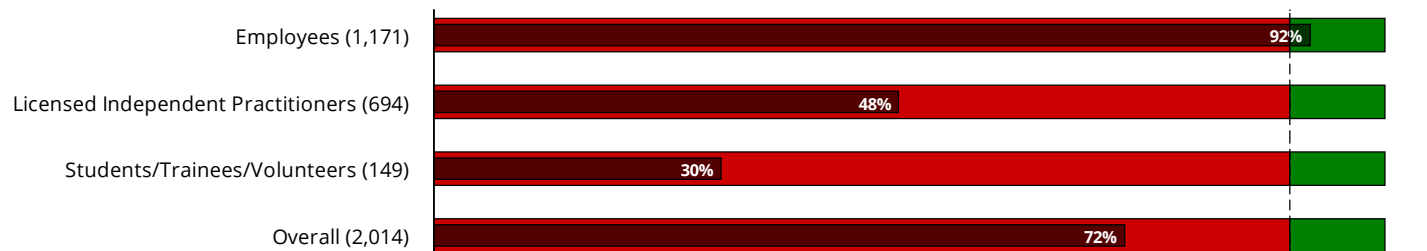
N/A: Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

*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 - '2019/2020' Influenza Season

Healthcare Personnel Category (Total)



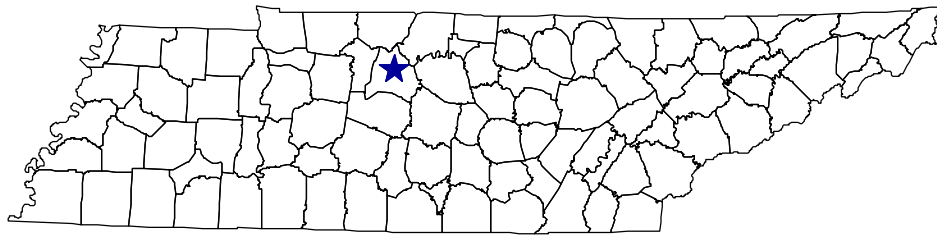
Healthcare Personnel Vaccinated (%)

■ 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, 01/01/2020-12/31/2020

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	4.1	4828	0.24	(0.01, 1.18)	0.91
	Adult/Pediatric Ward	1	2.5	3435	0.39	(0.02, 1.92)	0.65
CAUTI	Adult/Pediatric ICU	2	6.4	4459	0.31	(0.05, 1.03)	0.69
	Adult/Pediatric Ward	0	1.9	2344	0.00	(0.00, 1.50)	0.68
SSI	Colon surgery	0	1.9	91	0.00	(0.00, 1.55)	0.64
	Abdominal hysterectomy	0	0.2	30	N/A	N/A	1.01
LabID	MRSA bacteremia	5	6.5	68966	0.77	(0.28, 1.70)	1.23
	C. difficile infection	5	40.3	68966	0.12	(0.05, 0.28)	0.36

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

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

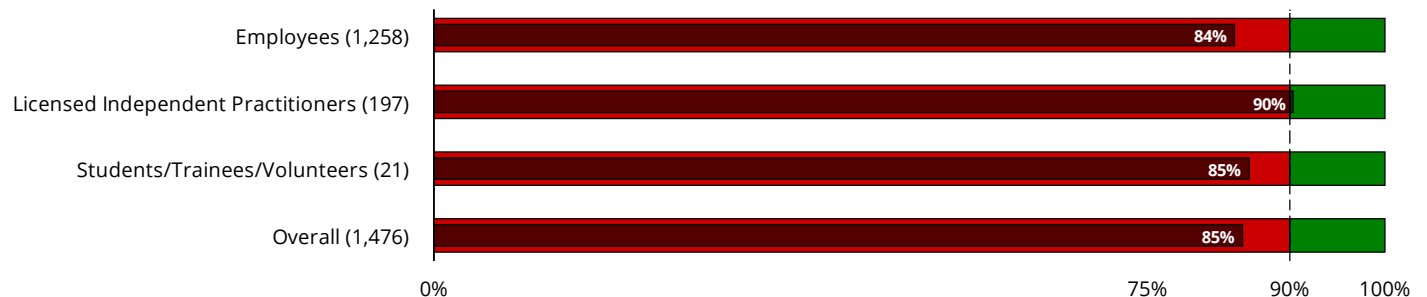
N/A: Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

*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 - '2020/2021' Influenza Season

Healthcare Personnel Category (Total)

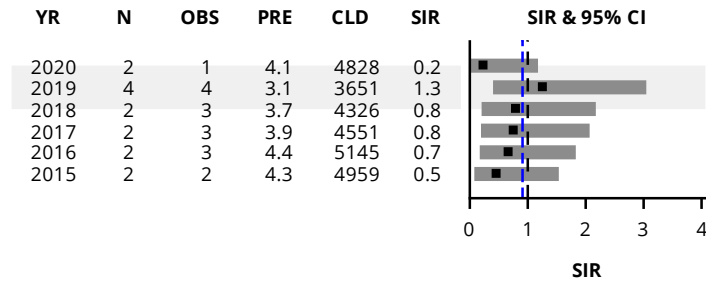


Healthcare Personnel Vaccinated (%)

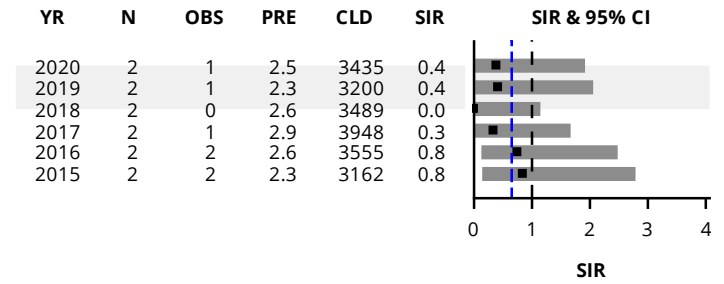
■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric ICUs

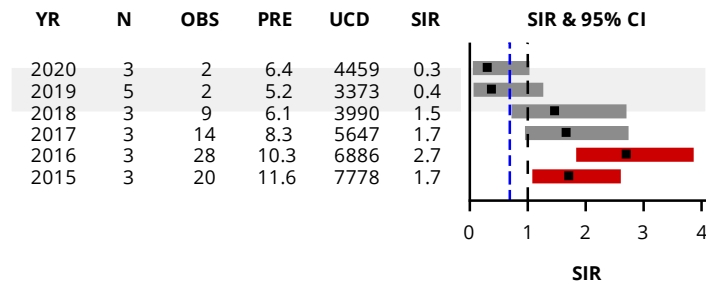


CLABSI - Adult/Pediatric Wards

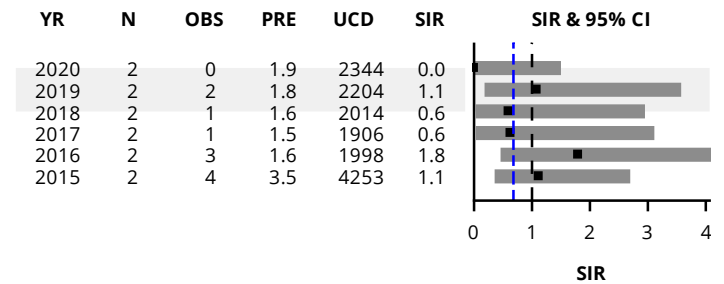


Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICUs

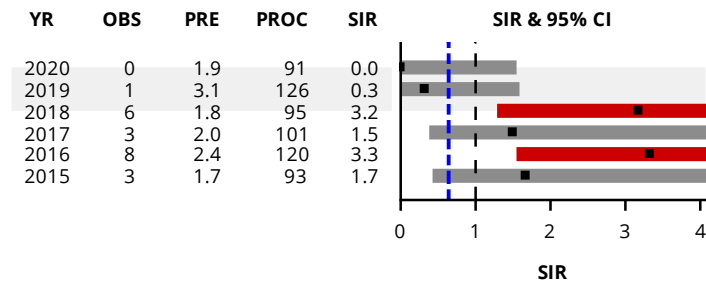


CAUTI - Adult/Pediatric Wards

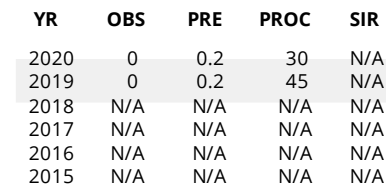


Surgical Site Infections (SSI)

SSI - Colon Surgery



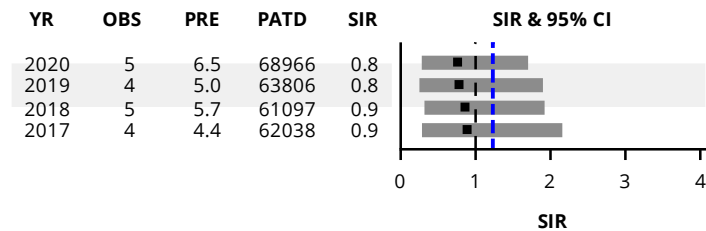
SSI - Abdominal Hysterectomy



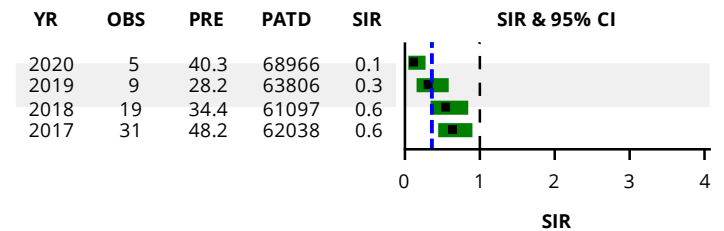
N/A: Number of predicted infections <1; no SIR calculated

Healthcare Facility-Onset Laboratory Identified (LabID) Events

LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia



LabID - *C. difficile* Infection (CDI)



Data reported as of June 30, 2021

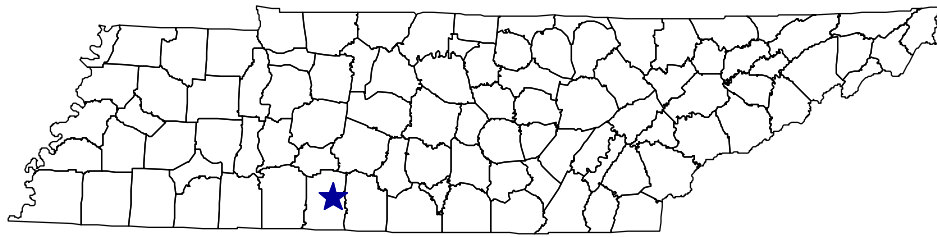
YR = reporting year; N = number of units reporting (CLABSI/CAUTI); OBS = observed number of infections
 PRE = statistically 'predicted' number of infections, based on NHSN national baseline data
 SIR = standardized infection ratio (observed/predicted number of infections)
 CLD = central line days; UCD = 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
 - - - 2020 TN SIR
 - - - NHSN SIR=1

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, 01/01/2019-12/31/2019

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	134	N/A	N/A	0.72
	Adult/Pediatric Ward	0	0.2	464	N/A	N/A	0.52
CAUTI	Adult/Pediatric ICU	0	0.2	532	N/A	N/A	0.74
	Adult/Pediatric Ward	0	0.3	709	N/A	N/A	0.78
SSI	Colon surgery	N/A	N/A	N/A	N/A	N/A	0.94
	Abdominal hysterectomy	0	0.1	28	N/A	N/A	0.80
LabID	MRSA bacteremia	0	0.1	6107	N/A	N/A	1.19
	C. difficile infection	1	4.0	5491	0.25	(0.01, 1.22)	0.47

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

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

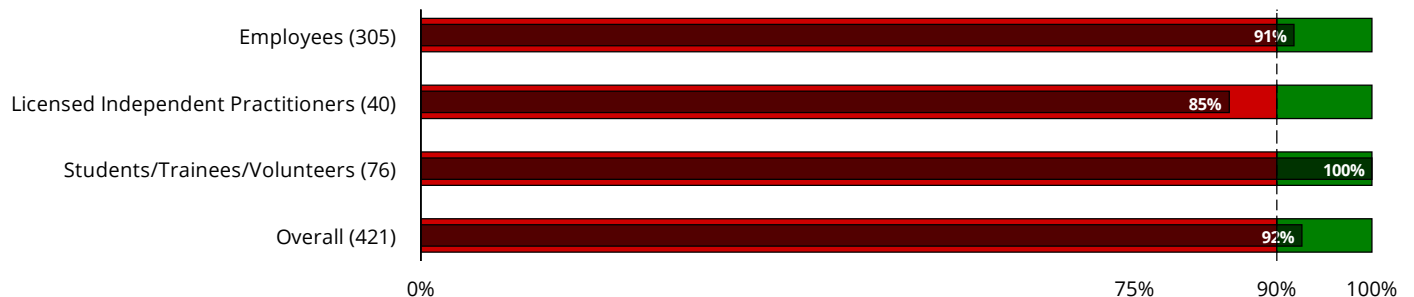
N/A: Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

*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 - '2019/2020' Influenza Season

Healthcare Personnel Category (Total)



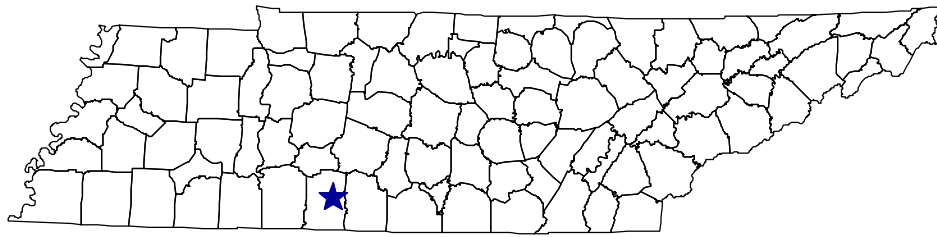
Healthcare Personnel Vaccinated (%)

■ 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, 01/01/2020-12/31/2020

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	173	N/A	N/A	0.91
	Adult/Pediatric Ward	0	0.2	390	N/A	N/A	0.65
CAUTI	Adult/Pediatric ICU	0	0.4	781	N/A	N/A	0.69
	Adult/Pediatric Ward	0	0.3	708	N/A	N/A	0.68
SSI	Colon surgery	N/A	N/A	N/A	N/A	N/A	0.64
	Abdominal hysterectomy	0	0.1	24	N/A	N/A	1.01
LabID	MRSA bacteremia	0	0.1	6684	N/A	N/A	1.23
	C. difficile infection	3	4.5	5749	0.65	(0.17, 1.78)	0.36

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

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

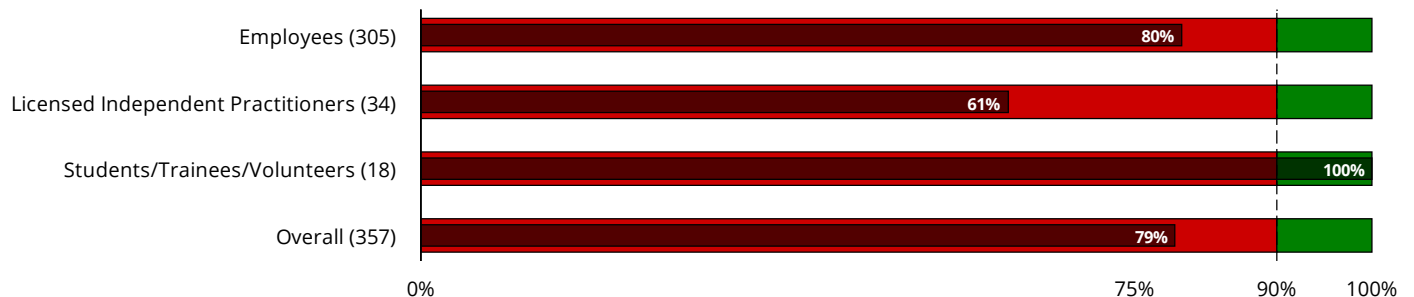
N/A: Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

*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 - '2020/2021' 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
2020	1	0	0.1	173	N/A
2019	1	0	0.0	134	N/A
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
2020	1	0	0.2	390	N/A
2019	1	0	0.2	464	N/A
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
2020	1	0	0.4	781	N/A
2019	1	0	0.2	532	N/A
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
2020	1	0	0.3	708	N/A
2019	1	0	0.3	709	N/A
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
2020	N/A	N/A	N/A	N/A
2019	N/A	N/A	N/A	N/A
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
2020	0	0.1	24	N/A
2019	0	0.1	28	N/A
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

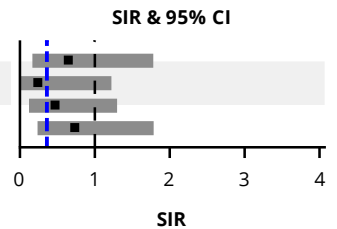
LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia

YR	OBS	PRE	PATD	SIR
2020	0	0.1	6684	N/A
2019	0	0.1	6107	N/A
2018	0	0.1	7306	N/A
2017	0	0.2	8363	N/A

N/A: Number of predicted infections <1; no SIR calculated

LabID - *C. difficile* Infection (CDI)

YR	OBS	PRE	PATD	SIR
2020	3	4.5	5749	0.7
2019	1	4.0	5491	0.2
2018	3	6.2	7306	0.5
2017	4	5.4	8363	0.7



Data reported as of June 30, 2021

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;

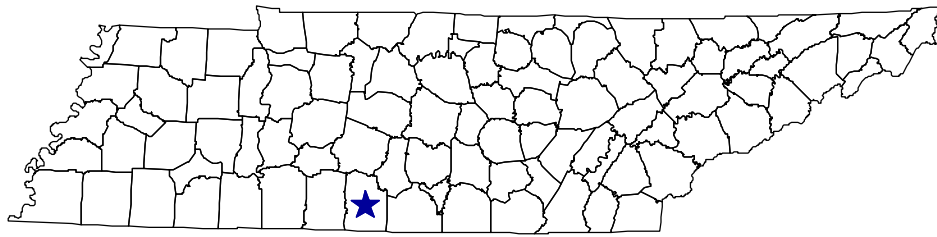
N/A = data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

- Significantly lower than NHSN SIR of 1
- Not significantly different from NHSN SIR of 1
- Significantly higher than NHSN SIR of 1
- - - 2020 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, 01/01/2019-12/31/2019

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	162	N/A	N/A	0.72
	Adult/Pediatric Ward	0	0.1	274	N/A	N/A	0.52
CAUTI	Adult/Pediatric ICU	0	0.3	554	N/A	N/A	0.74
	Adult/Pediatric Ward	0	0.2	542	N/A	N/A	0.78
SSI	Colon surgery	N/A	N/A	N/A	N/A	N/A	0.94
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	0.80
LabID	MRSA bacteremia	0	0.1	6306	N/A	N/A	1.19
	C. difficile infection	1	4.5	5964	0.22	(0.01, 1.08)	0.47

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 - '2019/2020' Influenza Season

Healthcare Personnel Category (Total)



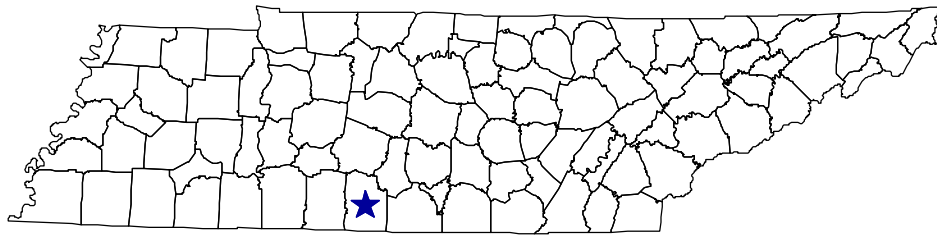
Healthcare Personnel Vaccinated (%)

■ 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, 01/01/2020-12/31/2020

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	186	N/A	N/A	0.91
	Adult/Pediatric Ward	0	0.1	229	N/A	N/A	0.65
CAUTI	Adult/Pediatric ICU	0	0.2	519	N/A	N/A	0.69
	Adult/Pediatric Ward	0	0.2	542	N/A	N/A	0.68
SSI	Colon surgery	N/A	N/A	N/A	N/A	N/A	0.64
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	1.01
LabID	MRSA bacteremia	0	0.1	5143	N/A	N/A	1.23
	C. difficile infection	2	2.7	4786	0.73	(0.12, 2.40)	0.36

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

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

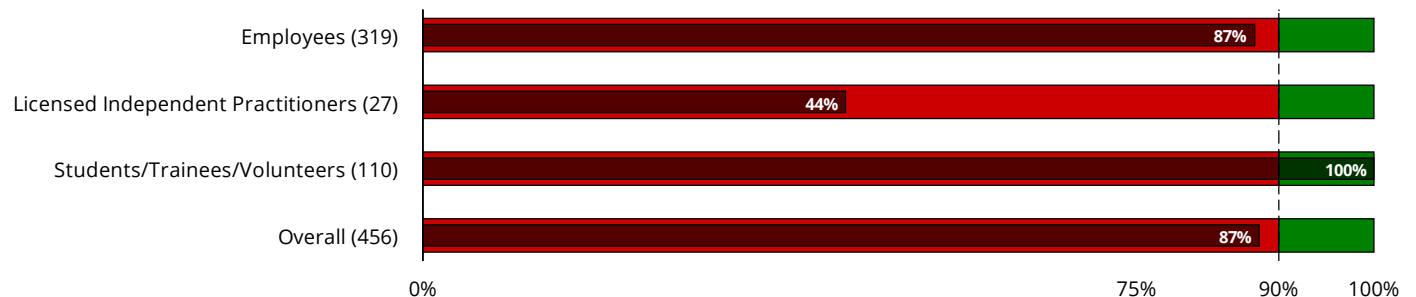
N/A: Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

*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 - '2020/2021' 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
2020	1	0	0.1	186	N/A
2019	1	0	0.1	162	N/A
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
2020	1	0	0.1	229	N/A
2019	1	0	0.1	274	N/A
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
2020	1	0	0.2	519	N/A
2019	1	0	0.3	554	N/A
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
2020	1	0	0.2	542	N/A
2019	1	0	0.2	542	N/A
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
2020	N/A	N/A	N/A	N/A
2019	N/A	N/A	N/A	N/A
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
2020	N/A	N/A	N/A	N/A
2019	N/A	N/A	N/A	N/A
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

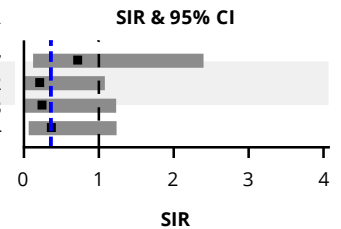
LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia

YR	OBS	PRE	PATD	SIR
2020	0	0.1	5143	N/A
2019	0	0.1	6306	N/A
2018	0	0.1	6460	N/A
2017	0	0.1	6155	N/A

N/A: Number of predicted infections <1; no SIR calculated

LabID - *C. difficile* Infection (CDI)

YR	OBS	PRE	PATD	SIR
2020	2	2.7	4786	0.7
2019	1	4.5	5964	0.2
2018	1	4.0	6133	0.3
2017	2	5.3	5873	0.4



Data reported as of June 30, 2021

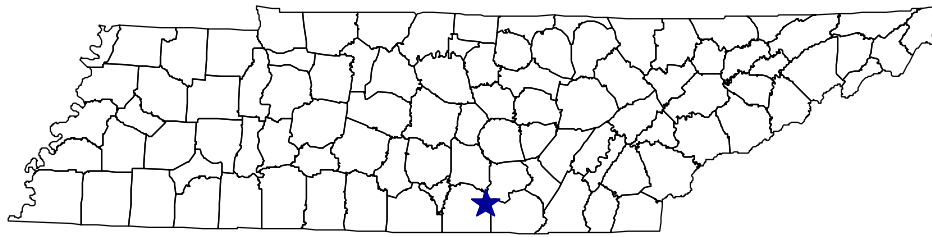
YR = reporting year; N = number of units reporting (CLABSI/CAUTI); OBS = observed number of infections
 PRE = statistically 'predicted' number of infections, based on NHSN national baseline data
 SIR = standardized infection ratio (observed/predicted number of infections)
 CLD = central line days; UCD = 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
 - - - 2020 TN SIR
 - - - NHSN SIR=1

Southern TN Reg. Health System - Sewanee (Emerald-Hodgson Hosp), Sewanee, Franklin County

Medical School Affiliation: Undergraduate teaching

Bed Size Category: <50 beds



Healthcare-Associated Infections (HAI) Summary

Standardized Infection Ratio (SIR) by Infection Type, 01/01/2019-12/31/2019

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	0.52
CAUTI	Adult/Pediatric Ward	0	0.0	155	N/A	N/A	0.78
LabID	MRSA bacteremia	0	0.0	1591	N/A	N/A	1.19
	C. difficile infection	2	0.4	1591	N/A	N/A	0.47

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 - '2019/2020' Influenza Season

Healthcare Personnel Category (Total)



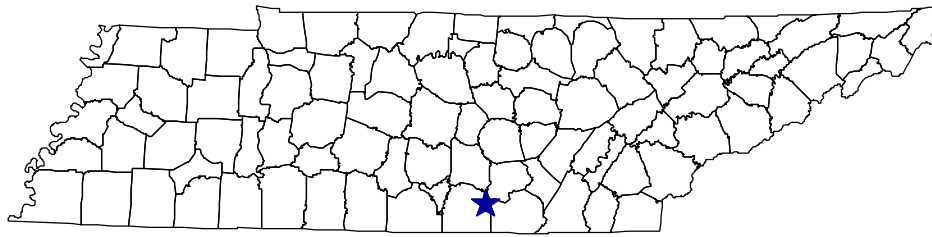
Healthcare Personnel Vaccinated (%)

■ 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, 01/01/2020-12/31/2020

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	0.65
CAUTI	Adult/Pediatric Ward	N/A	N/A	N/A	N/A	N/A	0.68
LabID	MRSA bacteremia	0	0.0	175	N/A	N/A	1.23
	C. difficile infection	0	0.0	175	N/A	N/A	0.36

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 - '2020/2021' 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
2020	1	N/A	N/A	N/A	N/A
2019	1	N/A	N/A	N/A	N/A
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
2020	1	N/A	N/A	N/A	N/A
2019	1	0	0.0	155	N/A
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
2020	0	0.0	175	N/A
2019	0	0.0	1591	N/A
2018	0	0.0	1633	N/A
2017	0	0.0	1874	N/A

N/A: Number of predicted infections <1; no SIR calculated

LabID - *C. difficile* Infection (CDI)

YR	OBS	PRE	PATD	SIR
2020	0	0.0	175	N/A
2019	2	0.4	1591	N/A
2018	0	1.0	1633	0.0
2017	0	1.2	1874	0.0

N/A: Number of predicted infections <1; no SIR calculated

Data reported as of June 30, 2021

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;

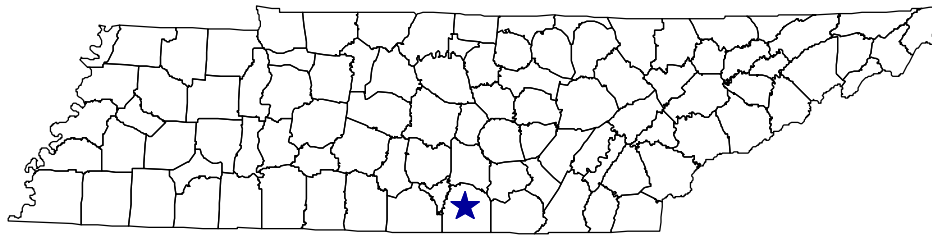
N/A = data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

- Significantly lower than NHSN SIR of 1
- Not significantly different from NHSN SIR of 1
- Significantly higher than NHSN SIR of 1
- 2020 TN SIR
- NHSN SIR=1

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, 01/01/2019-12/31/2019

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	187	N/A	N/A	0.72
	Adult/Pediatric Ward	0	0.1	227	N/A	N/A	0.52
CAUTI	Adult/Pediatric ICU	0	0.3	504	N/A	N/A	0.74
	Adult/Pediatric Ward	0	0.8	1367	N/A	N/A	0.78
SSI	Colon surgery	0	0.6	26	N/A	N/A	0.94
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	0.80
LabID	MRSA bacteremia	0	0.6	16813	N/A	N/A	1.19
	C. difficile infection	2	7.1	15825	0.28	(0.05, 0.92)	0.47

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

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

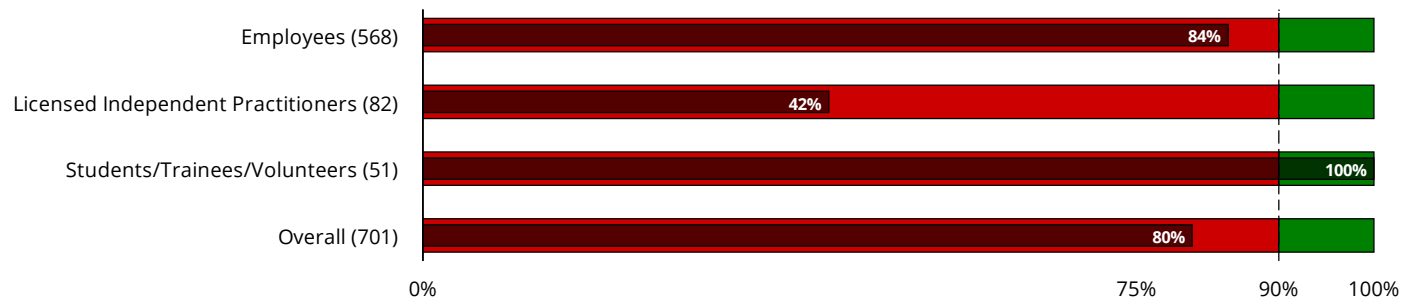
N/A: Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

*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 - '2019/2020' Influenza Season

Healthcare Personnel Category (Total)



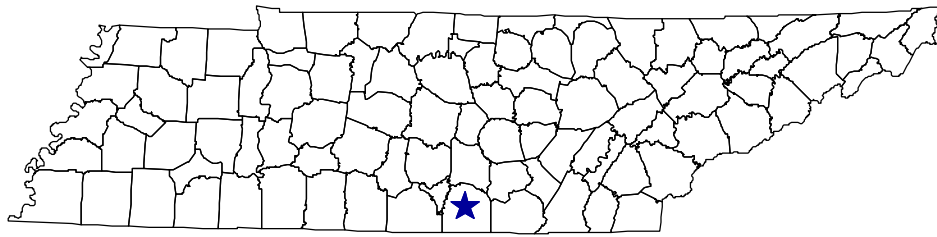
Healthcare Personnel Vaccinated (%)

■ 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, 01/01/2020-12/31/2020

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	0.2	293	N/A	N/A	0.91
	Adult/Pediatric Ward	0	0.1	299	N/A	N/A	0.65
CAUTI	Adult/Pediatric ICU	0	0.6	887	N/A	N/A	0.69
	Adult/Pediatric Ward	0	0.6	1044	N/A	N/A	0.68
SSI	Colon surgery	0	0.5	22	N/A	N/A	0.64
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	1.01
LabID	MRSA bacteremia	0	0.6	17052	N/A	N/A	1.23
	C. difficile infection	5	11.4	16078	0.44	(0.16, 0.97)	0.36

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

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

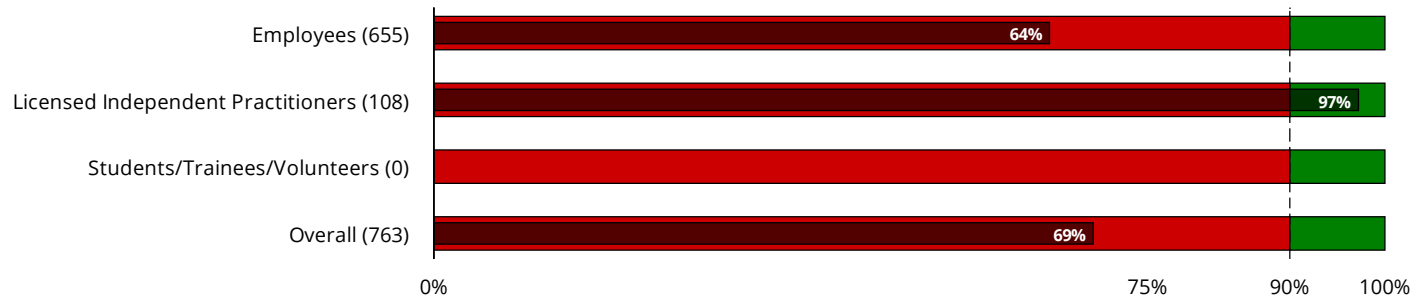
N/A: Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

*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 - '2020/2021' 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
2020	1	0	0.2	293	N/A
2019	1	0	0.1	187	N/A
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
2020	1	0	0.1	299	N/A
2019	1	0	0.1	227	N/A
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
2020	1	0	0.6	887	N/A
2019	1	0	0.3	504	N/A
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
2020	1	0	0.6	1044	N/A
2019	1	0	0.8	1367	N/A
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

YR	OBS	PRE	PROC	SIR
2020	0	0.5	22	N/A
2019	0	0.6	26	N/A
2018	N/A	N/A	N/A	N/A
2017	0	1.0	38	0.0
2016	0	0.7	31	N/A
2015	0	1.3	44	0.0

N/A: Number of predicted infections <1; no SIR calculated

SSI - Abdominal Hysterectomy

YR	OBS	PRE	PROC	SIR
2020	N/A	N/A	N/A	N/A
2019	N/A	N/A	N/A	N/A
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
2020	0	0.6	17052	N/A
2019	0	0.6	16813	N/A
2018	0	1.0	17793	0.0
2017	0	0.9	19685	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
2020	5	11.4	16078	0.4	
2019	2	7.1	15825	0.3	
2018	6	7.7	17038	0.8	
2017	4	8.2	18643	0.5	

Data reported as of June 30, 2021

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

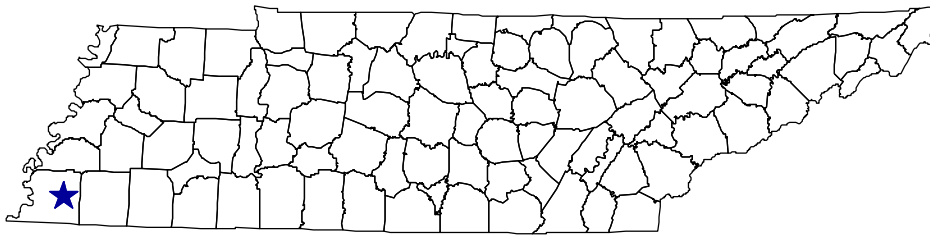
--- 2020 TN SIR

--- 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, 01/01/2019-12/31/2019

HAI	Type/Unit	Infections			Standardized Infection Ratio (SIR)		
		Observed	Predicted	Device Days/Procedures Performed/Patient Days	SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	0	1.7	2293	0.00	(0.00, 1.73)	0.72
	Neonatal ICU	N/A	N/A	N/A	N/A	N/A	0.44
	Adult/Pediatric Ward	1	1.3	2064	0.74	(0.04, 3.67)	0.52
CAUTI	Adult/Pediatric ICU	0	2.3	3190	0.00	(0.00, 1.28)	0.74
	Adult/Pediatric Ward	0	1.1	1833	0.00	(0.00, 2.50)	0.78
SSI	Colon surgery	1	1.5	75	0.64	(0.03, 3.16)	0.94
	Abdominal hysterectomy	0	0.3	66	N/A	N/A	0.80
LabID	MRSA bacteremia	1	2.4	38536	0.41	(0.02, 2.03)	1.19
	C. difficile infection	10	22.1	37249	0.45	(0.23, 0.80)	0.47

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

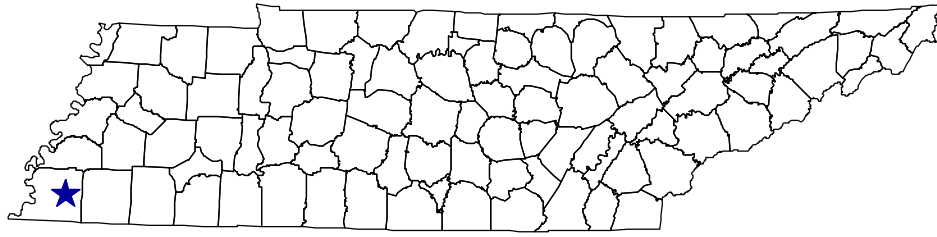
Healthcare Personnel Influenza Vaccination - '2019/2020' Influenza Season

This facility utilized the COVID-19 related CMS reporting exemption for the '2019/2020' influenza season. See the CMS website for more information.

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, 01/01/2020-12/31/2020

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	2.8	3750	0.00	(0.00, 1.06)	0.91
	Neonatal ICU	N/A	N/A	N/A	N/A	N/A	0.62
	Adult/Pediatric Ward	0	1.5	2359	0.00	(0.00, 1.95)	0.65
CAUTI	Adult/Pediatric ICU	0	2.9	4021	0.00	(0.00, 1.02)	0.69
	Adult/Pediatric Ward	0	0.9	1444	N/A	N/A	0.68
SSI	Colon surgery	0	1.4	74	0.00	(0.00, 2.05)	0.64
	Abdominal hysterectomy	1	0.3	66	N/A	N/A	1.01
LabID	MRSA bacteremia	1	2.1	37141	0.46	(0.02, 2.26)	1.23
	C. difficile infection	8	21.7	35860	0.37	(0.17, 0.70)	0.36

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

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

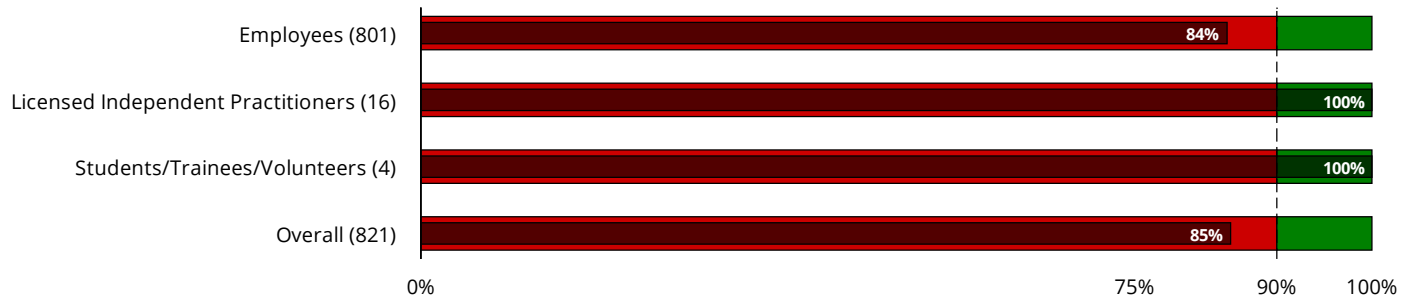
N/A: Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

*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 - '2020/2021' Influenza Season

Healthcare Personnel Category (Total)

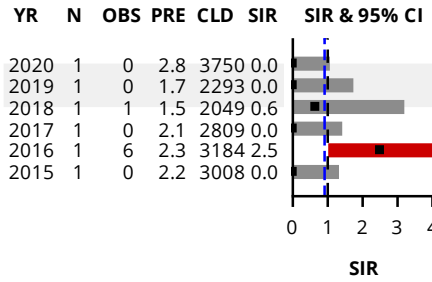


Healthcare Personnel Vaccinated (%)

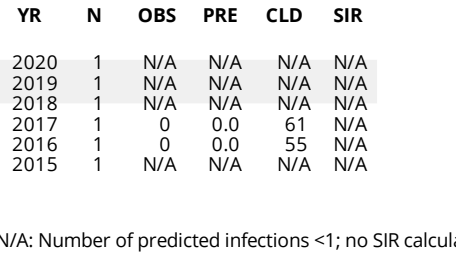
■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

Central Line-Associated Bloodstream Infections (CLABSI)

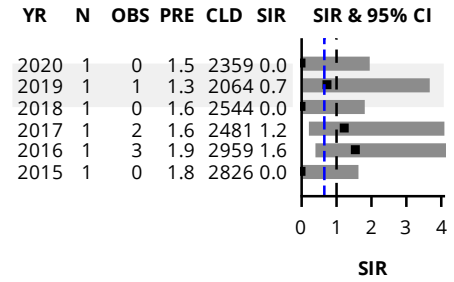
CLABSI - Adult/Pediatric ICUs



CLABSI - Neonatal ICUs

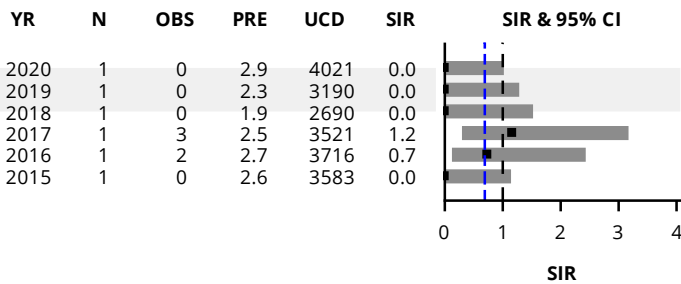


CLABSI - Adult/Pediatric Wards

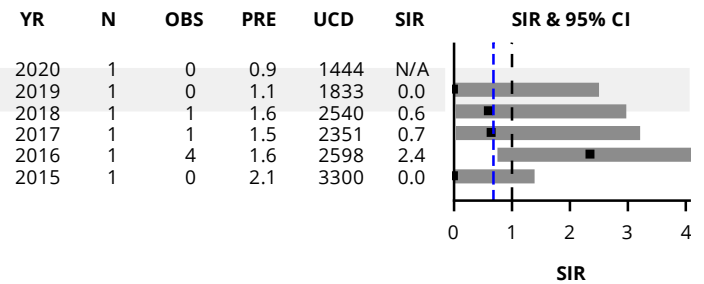


Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICUs

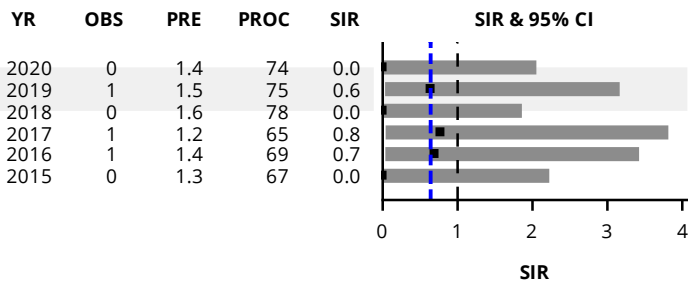


CAUTI - Adult/Pediatric Wards

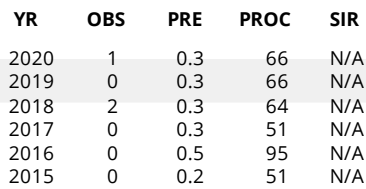


Surgical Site Infections (SSI)

SSI - Colon Surgery



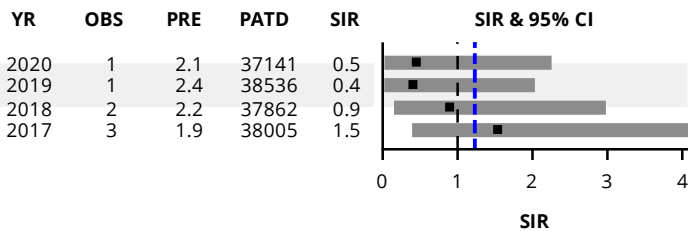
SSI - Abdominal Hysterectomy



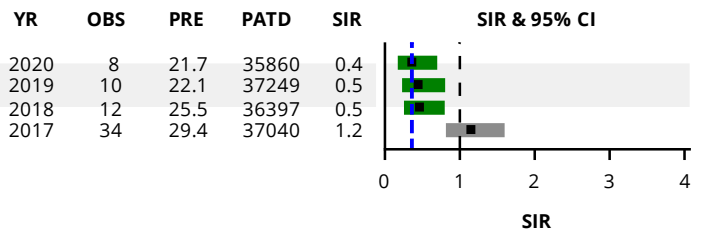
N/A: Number of predicted infections <1; no SIR calculated

Healthcare Facility-Onset Laboratory Identified (LabID) Events

LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia



LabID - *C. difficile* Infection (CDI)



Data reported as of June 30, 2021

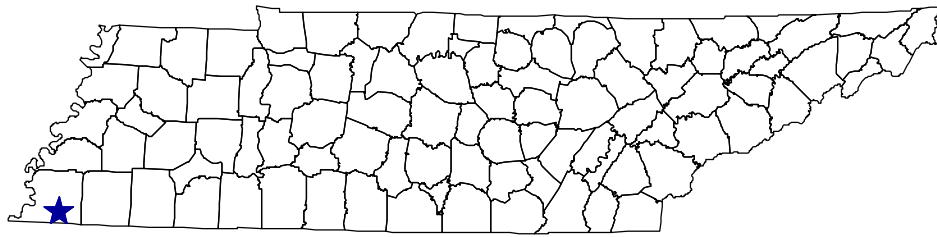
YR = reporting year; N = number of units reporting (CLABSI/CAUTI); OBS = observed number of infections
 PRE = statistically 'predicted' number of infections, based on NHSN national baseline data
 SIR = standardized infection ratio (observed/predicted number of infections)
 CLD = central line days; UCD = 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
 - - - 2020 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, 01/01/2019-12/31/2019

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	4.1	4086	0.00	(0.00, 0.73)	0.72
	Neonatal ICU	N/A	N/A	N/A	N/A	N/A	0.44
CAUTI	Adult/Pediatric ICU	1	3.8	3808	0.26	(0.01, 1.27)	0.74
SSI	Colon surgery	0	2.9	124	0.00	(0.00, 1.02)	0.94
	Abdominal hysterectomy	0	0.9	114	N/A	N/A	0.80
LabID	MRSA bacteremia	4	4.2	69810	0.93	(0.30, 2.25)	1.19
	C. difficile infection	17	43.4	65911	0.39	(0.24, 0.61)	0.47

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

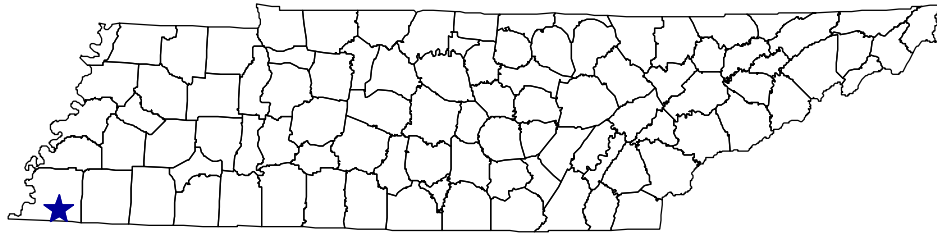
Healthcare Personnel Influenza Vaccination - '2019/2020' Influenza Season

This facility utilized the COVID-19 related CMS reporting exemption for the '2019/2020' influenza season. See the CMS website for more information.

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, 01/01/2020-12/31/2020

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	4.3	4291	0.00	(0.00, 0.69)	0.91
	Neonatal ICU	0	0.1	128	N/A	N/A	0.62
CAUTI	Adult/Pediatric ICU	0	3.9	3893	0.00	(0.00, 0.75)	0.69
SSI	Colon surgery	1	3.0	122	0.33	(0.02, 1.63)	0.64
	Abdominal hysterectomy	0	1.1	128	0.00	(0.00, 2.70)	1.01
LabID	MRSA bacteremia	4	4.1	61596	0.96	(0.31, 2.32)	1.23
	C. difficile infection	13	36.9	58407	0.35	(0.20, 0.59)	0.36

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

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

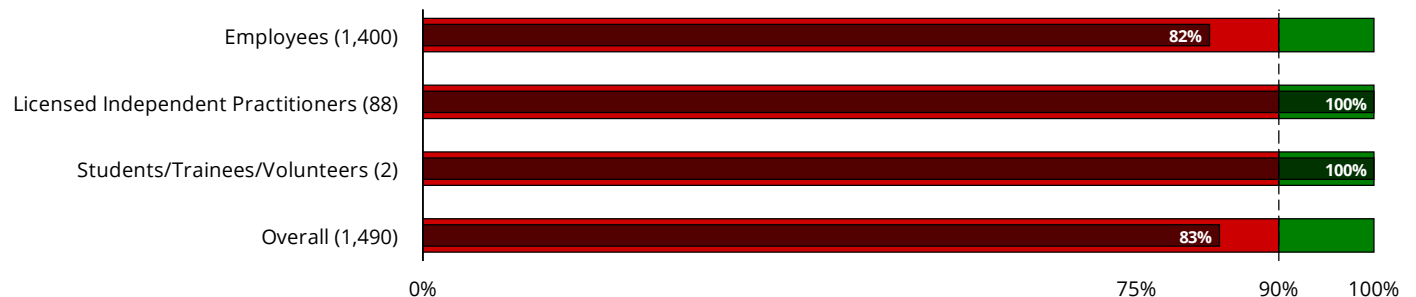
N/A: Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

*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 - '2020/2021' Influenza Season

Healthcare Personnel Category (Total)

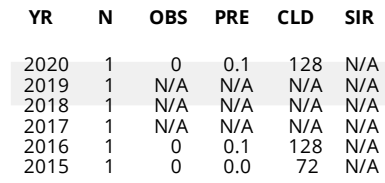
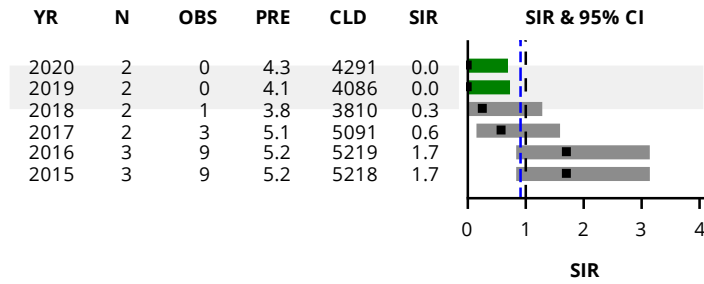


Healthcare Personnel Vaccinated (%)
■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric ICUs, excluding burn and trauma units

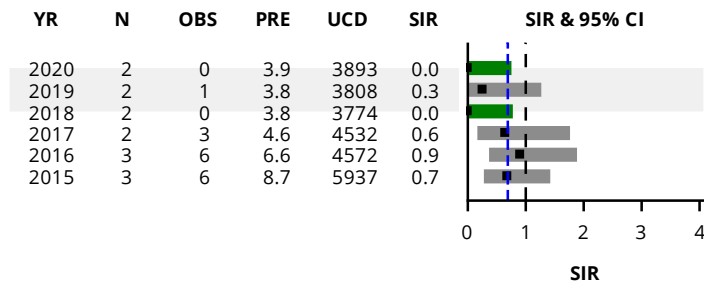
CLABSI - Neonatal ICUs



N/A: Number of predicted infections <1; no SIR calculated

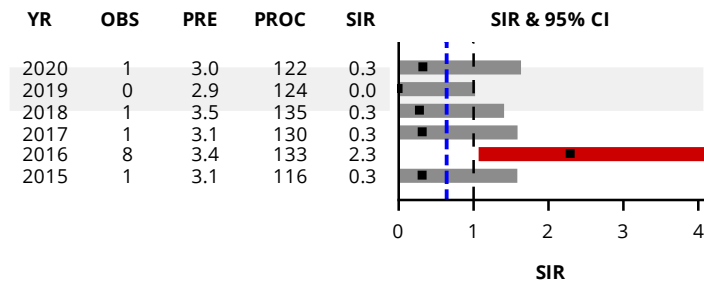
Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICUs

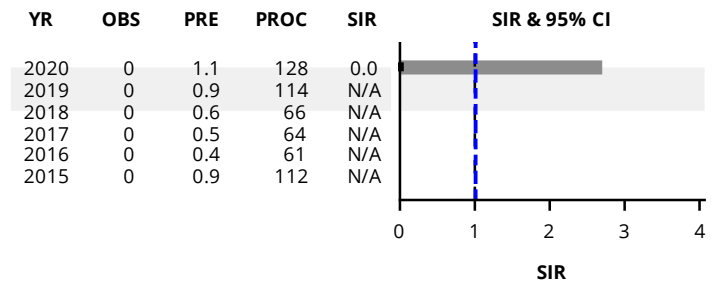


Surgical Site Infections (SSI)

SSI - Colon Surgery

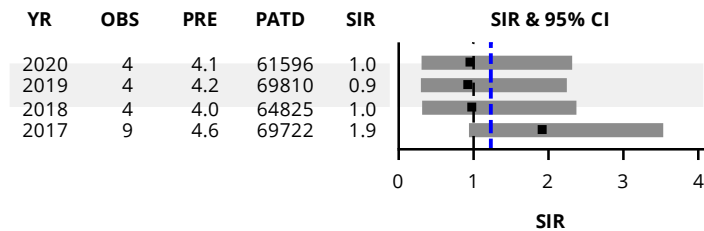


SSI - Abdominal Hysterectomy

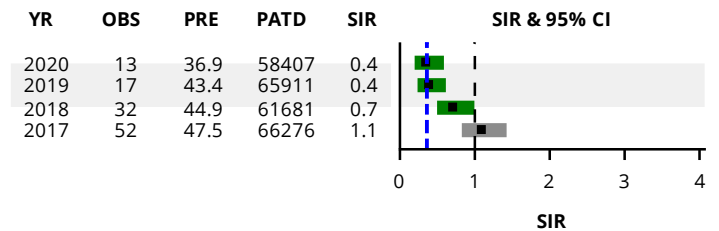


Healthcare Facility-Onset Laboratory Identified (LabID) Events

LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia



LabID - *C. difficile* Infection (CDI)



Data reported as of June 30, 2021

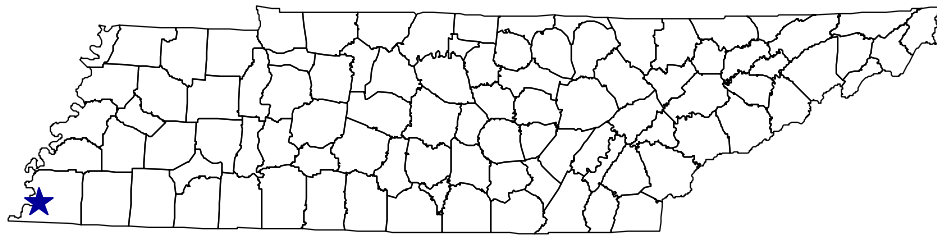
YR = reporting year; N = number of units reporting (CLABSI/CAUTI); OBS = observed number of infections
 PRE = statistically 'predicted' number of infections, based on NHSN national baseline data
 SIR = standardized infection ratio (observed/predicted number of infections)
 CLD = central line days; UCD = 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
 - - - 2020 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, 01/01/2019-12/31/2019

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	0.94
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	0.80
LabID	MRSA bacteremia	1	0.6	19507	N/A	N/A	1.19
	C. difficile infection	43	6.3	19507	6.74	(4.94, 8.99)	0.47

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

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

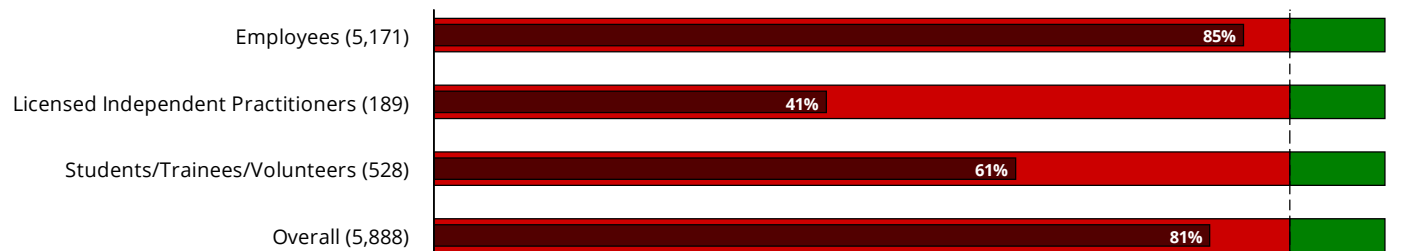
N/A: Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

*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 - '2019/2020' Influenza Season

Healthcare Personnel Category (Total)



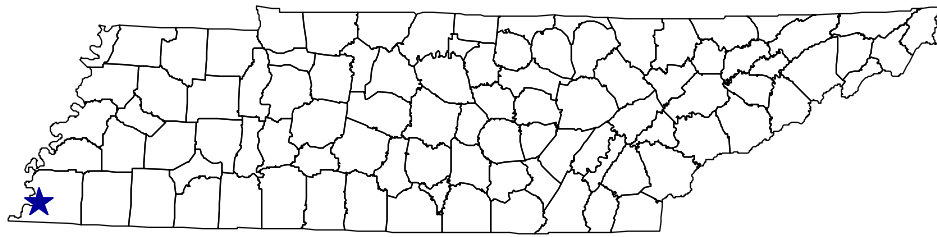
Healthcare Personnel Vaccinated (%)

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

St. Jude Children's Research Hospital, Memphis, Shelby County

Medical School Affiliation: Graduate teaching

Bed Size Category: 50-99 beds



Healthcare-Associated Infections (HAI) Summary

Standardized Infection Ratio (SIR) by Infection Type, 01/01/2020-12/31/2020

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	0.64
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	1.01
LabID	MRSA bacteremia	0	0.7	18037	N/A	N/A	1.23
	C. difficile infection	38	5.9	18037	6.43	(4.61, 8.73)	0.36

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 - '2020/2021' 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
2020	N/A	N/A	N/A	N/A
2019	N/A	N/A	N/A	N/A
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
2020	N/A	N/A	N/A	N/A
2019	N/A	N/A	N/A	N/A
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

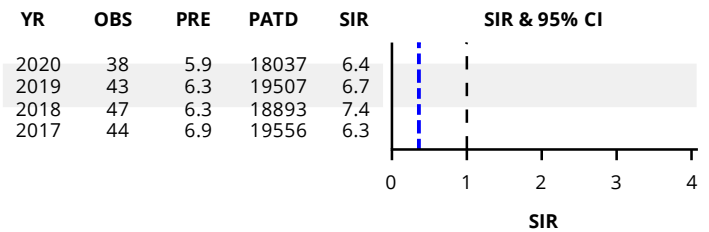
Healthcare Facility-Onset Laboratory Identified (LabID) Events

LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia

YR	OBS	PRE	PATD	SIR
2020	0	0.7	18037	N/A
2019	1	0.6	19507	N/A
2018	2	0.8	18893	N/A
2017	1	0.6	19556	N/A

N/A: Number of predicted infections <1; no SIR calculated

LabID - *C. difficile* Infection (CDI)



Data reported as of June 30, 2021

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;

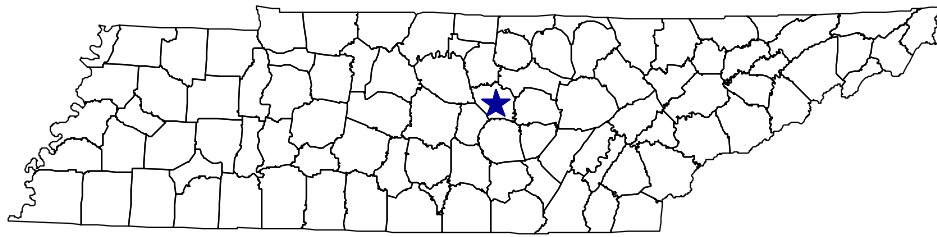
N/A = data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

- Significantly lower than NHSN SIR of 1
- Not significantly different from NHSN SIR of 1
- Significantly higher than NHSN SIR of 1
- - - 2020 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, 01/01/2019-12/31/2019

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	0.72
	Adult/Pediatric Ward	0	0.0	87	N/A	N/A	0.52
CAUTI	Adult/Pediatric ICU	N/A	N/A	N/A	N/A	N/A	0.74
	Adult/Pediatric Ward	0	0.1	217	N/A	N/A	0.78
SSI	Colon surgery	N/A	N/A	N/A	N/A	N/A	0.94
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	0.80
LabID	MRSA bacteremia	0	0.0	1332	N/A	N/A	1.19
	C. difficile infection	0	0.4	1332	N/A	N/A	0.47

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

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

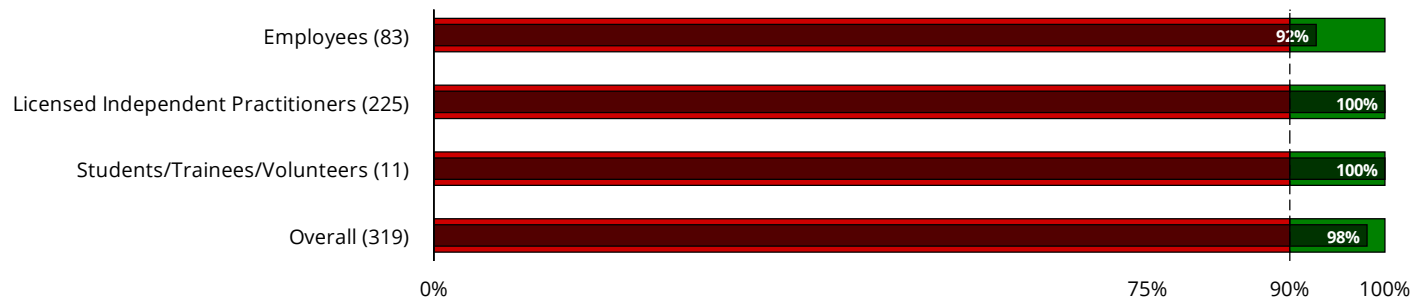
N/A: Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

*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 - '2019/2020' Influenza Season

Healthcare Personnel Category (Total)



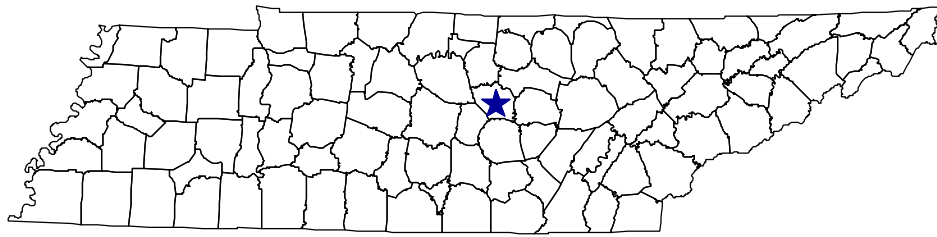
Healthcare Personnel Vaccinated (%)

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

St. Thomas DeKalb Hospital, Smithville, Dekalb County

Medical School Affiliation: Undergraduate teaching

Bed Size Category: 50-99 beds



Healthcare-Associated Infections (HAI) Summary

Standardized Infection Ratio (SIR) by Infection Type, 01/01/2020-12/31/2020

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	0.91
	Adult/Pediatric Ward	0	0.0	99	N/A	N/A	0.65
CAUTI	Adult/Pediatric ICU	N/A	N/A	N/A	N/A	N/A	0.69
	Adult/Pediatric Ward	0	0.1	274	N/A	N/A	0.68
SSI	Colon surgery	N/A	N/A	N/A	N/A	N/A	0.64
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	1.01
LabID	MRSA bacteremia	0	0.0	1388	N/A	N/A	1.23
	C. difficile infection	0	0.2	1388	N/A	N/A	0.36

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 - '2020/2021' 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
2020	1	N/A	N/A	N/A	N/A
2019	1	N/A	N/A	N/A	N/A
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
2020	1	0	0.0	99	N/A
2019	1	0	0.0	87	N/A
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	191	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
2020	1	N/A	N/A	N/A	N/A
2019	1	N/A	N/A	N/A	N/A
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
2020	1	0	0.1	274	N/A
2019	1	0	0.1	217	N/A
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
2020	N/A	N/A	N/A	N/A
2019	N/A	N/A	N/A	N/A
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
2020	N/A	N/A	N/A	N/A
2019	N/A	N/A	N/A	N/A
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
2020	0	0.0	1388	N/A
2019	0	0.0	1332	N/A
2018	0	0.0	1432	N/A
2017	0	0.0	1526	N/A

N/A: Number of predicted infections <1; no SIR calculated

LabID - *C. difficile* Infection (CDI)

YR	OBS	PRE	PATD	SIR
2020	0	0.2	1388	N/A
2019	0	0.4	1332	N/A
2018	0	0.3	1432	N/A
2017	0	0.5	1526	N/A

N/A: Number of predicted infections <1; no SIR calculated

Data reported as of June 30, 2021

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

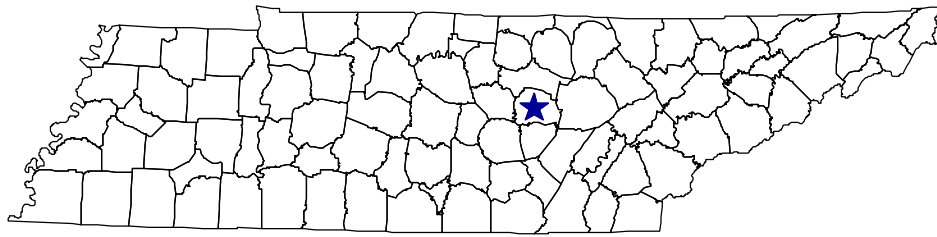
--- 2020 TN SIR

--- NHSN SIR=1

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, 01/01/2019-12/31/2019

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	0.72
	Adult/Pediatric Ward	0	0.0	58	N/A	N/A	0.52
CAUTI	Adult/Pediatric ICU	N/A	N/A	N/A	N/A	N/A	0.74
	Adult/Pediatric Ward	0	0.1	399	N/A	N/A	0.78
SSI	Colon surgery	N/A	N/A	N/A	N/A	N/A	0.94
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	0.80
LabID	MRSA bacteremia	0	0.0	1189	N/A	N/A	1.19
	C. difficile infection	0	0.2	1189	N/A	N/A	0.47

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 - '2019/2020' Influenza Season

Healthcare Personnel Category (Total)



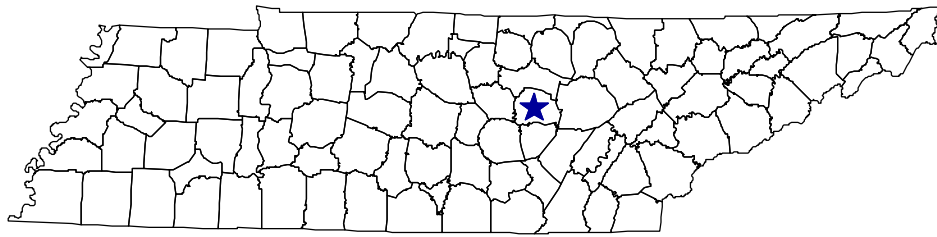
Healthcare Personnel Vaccinated (%)

■ 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, 01/01/2020-12/31/2020

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	0.91
	Adult/Pediatric Ward	0	0.0	63	N/A	N/A	0.65
CAUTI	Adult/Pediatric ICU	N/A	N/A	N/A	N/A	N/A	0.69
	Adult/Pediatric Ward	0	0.1	313	N/A	N/A	0.68
SSI	Colon surgery	N/A	N/A	N/A	N/A	N/A	0.64
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	1.01
LabID	MRSA bacteremia	0	0.0	960	N/A	N/A	1.23
	C. difficile infection	0	0.2	960	N/A	N/A	0.36

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 - '2020/2021' 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
2020	1	N/A	N/A	N/A	N/A
2019	1	N/A	N/A	N/A	N/A
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
2020	1	0	0.0	63	N/A
2019	1	0	0.0	58	N/A
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
2020	1	N/A	N/A	N/A	N/A
2019	1	N/A	N/A	N/A	N/A
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
2020	1	0	0.1	313	N/A
2019	1	0	0.1	399	N/A
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
2020	N/A	N/A	N/A	N/A
2019	N/A	N/A	N/A	N/A
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
2020	N/A	N/A	N/A	N/A
2019	N/A	N/A	N/A	N/A
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
2020	0	0.0	960	N/A
2019	0	0.0	1189	N/A
2018	0	0.0	1547	N/A
2017	0	0.0	1571	N/A

N/A: Number of predicted infections <1; no SIR calculated

LabID - *C. difficile* Infection (CDI)

YR	OBS	PRE	PATD	SIR
2020	0	0.2	960	N/A
2019	0	0.2	1189	N/A
2018	0	0.3	1547	N/A
2017	0	0.3	1571	N/A

N/A: Number of predicted infections <1; no SIR calculated

Data reported as of June 30, 2021

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

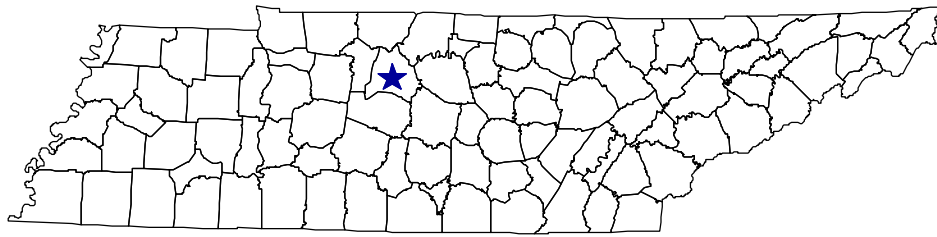
--- 2020 TN SIR

--- 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, 01/01/2019-12/31/2019

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	0.94
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	0.80
LabID	MRSA bacteremia	0	0.0	2796	N/A	N/A	1.19
	C. difficile infection	0	0.3	2796	N/A	N/A	0.47

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 - '2019/2020' Influenza Season

Healthcare Personnel Category (Total)



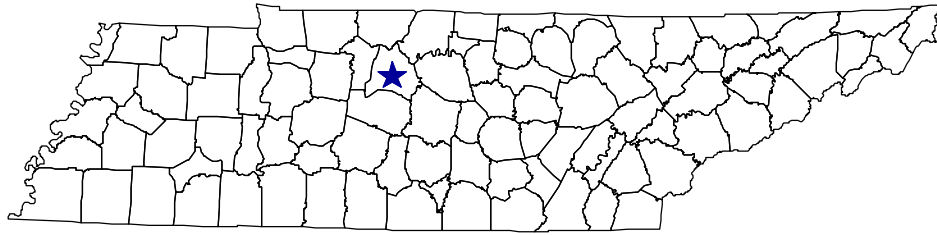
Healthcare Personnel Vaccinated (%)

■ 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, 01/01/2020-12/31/2020

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	0.64
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	1.01
LabID	MRSA bacteremia	0	0.0	2022	N/A	N/A	1.23
	C. difficile infection	0	0.2	2022	N/A	N/A	0.36

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

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

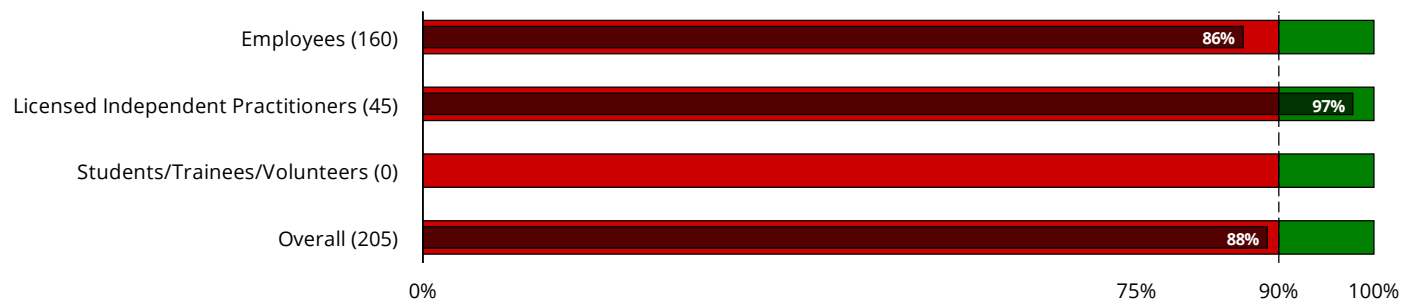
N/A: Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

*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 - '2020/2021' 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
2020	N/A	N/A	N/A	N/A
2019	N/A	N/A	N/A	N/A
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
2020	N/A	N/A	N/A	N/A
2019	N/A	N/A	N/A	N/A
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
2020	0	0.0	2022	N/A
2019	0	0.0	2796	N/A
2018	0	0.0	2766	N/A
2017	0	0.0	2690	N/A

N/A: Number of predicted infections <1; no SIR calculated

LabID - *C. difficile* Infection (CDI)

YR	OBS	PRE	PATD	SIR
2020	0	0.2	2022	N/A
2019	0	0.3	2796	N/A
2018	0	0.3	2766	N/A
2017	0	0.4	2690	N/A

N/A: Number of predicted infections <1; no SIR calculated

Data reported as of June 30, 2021

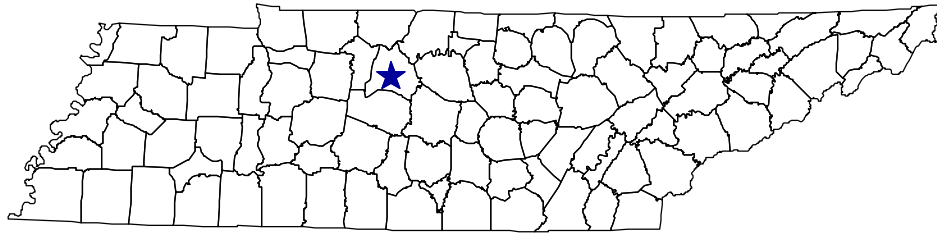
YR = reporting year; **N** = number of units reporting (CLABSI/CAUTI); **OBS** = observed number of infections
PRE = statistically 'predicted' number of infections, based on NHSN national baseline data
SIR = standardized infection ratio (observed/predicted number of infections)
CLD = central line days; **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
- 2020 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, 01/01/2019-12/31/2019

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	5.7	5128	0.69	(0.22, 1.67)	0.72
	Neonatal ICU	2	1.8	1344	1.06	(0.18, 3.52)	0.44
	Adult/Pediatric Ward	4	7.7	7971	0.52	(0.16, 1.24)	0.52
CAUTI	Adult/Pediatric ICU	2	9.2	6055	0.22	(0.04, 0.72)	0.74
	Adult/Pediatric Ward	6	10.4	8782	0.58	(0.23, 1.20)	0.78
SSI	Colon surgery	7	10.4	353	0.67	(0.29, 1.32)	0.94
	Abdominal hysterectomy	6	4.7	737	1.26	(0.51, 2.63)	0.80
LabID	MRSA bacteremia	6	7.8	106657	0.76	(0.31, 1.59)	1.19
	C. difficile infection	12	40.0	82730	0.30	(0.16, 0.51)	0.47

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

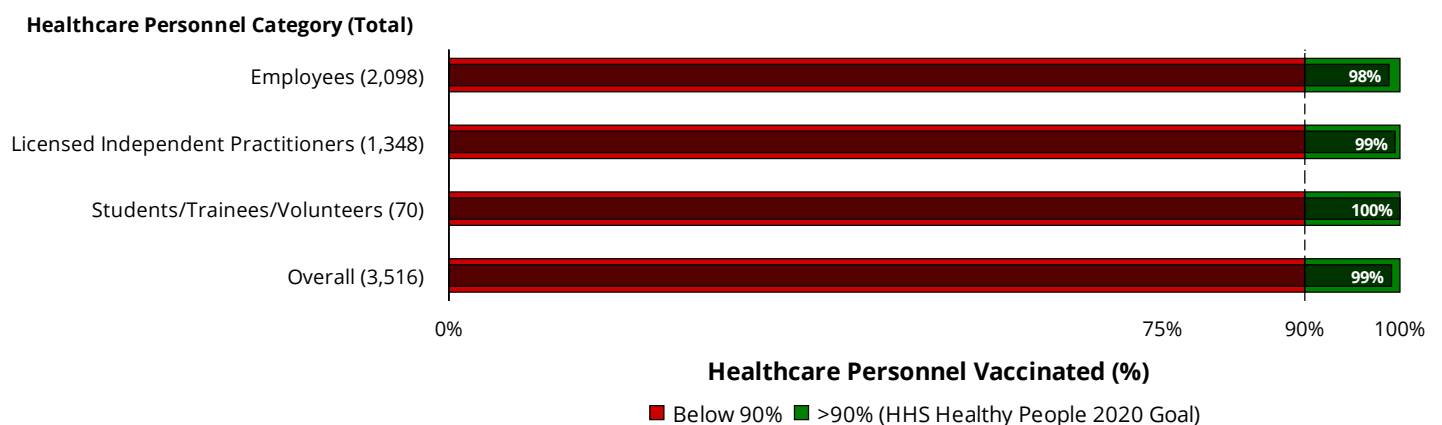
Red highlighting indicates an SIR significantly **HIGHER** than the 2015 national baseline

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)

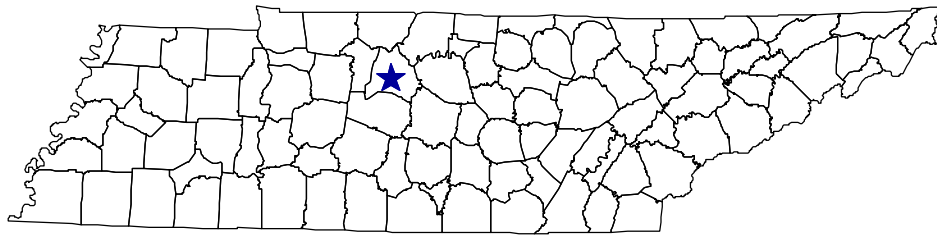
Healthcare Personnel Influenza Vaccination - '2019/2020' Influenza Season



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, 01/01/2020-12/31/2020

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	6.0	5346	0.83	(0.30, 1.84)	0.91
	Neonatal ICU	0	2.7	1678	0.00	(0.00, 1.07)	0.62
	Adult/Pediatric Ward	4	7.4	7652	0.54	(0.17, 1.29)	0.65
CAUTI	Adult/Pediatric ICU	6	9.5	6189	0.63	(0.25, 1.30)	0.69
	Adult/Pediatric Ward	6	8.7	7304	0.68	(0.28, 1.42)	0.68
SSI	Colon surgery	6	7.9	262	0.76	(0.31, 1.57)	0.64
	Abdominal hysterectomy	8	4.1	626	1.91	(0.89, 3.62)	1.01
LabID	MRSA bacteremia	4	9.2	107039	0.43	(0.14, 1.04)	1.23
	C. difficile infection	15	40.9	83539	0.37	(0.21, 0.59)	0.36

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

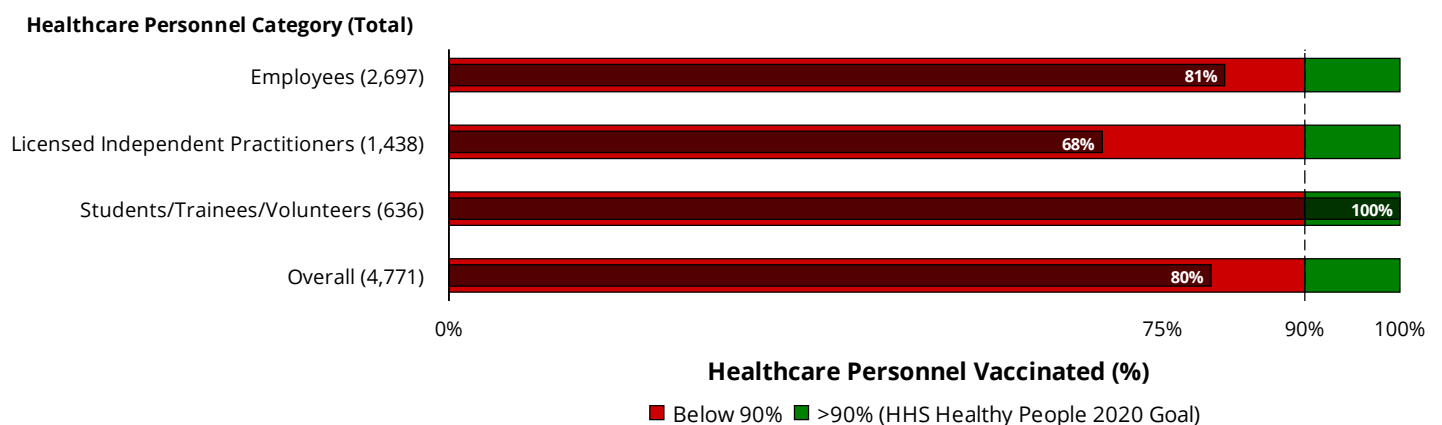
Red highlighting indicates an SIR significantly **HIGHER** than the 2015 national baseline

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)

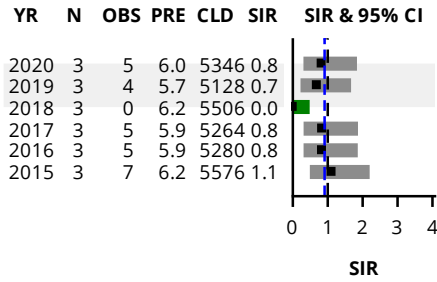
See page 3 for more detailed information about HAIs at St. Thomas Midtown (Baptist Hospital- Nashville)

Healthcare Personnel Influenza Vaccination - '2020/2021' Influenza Season

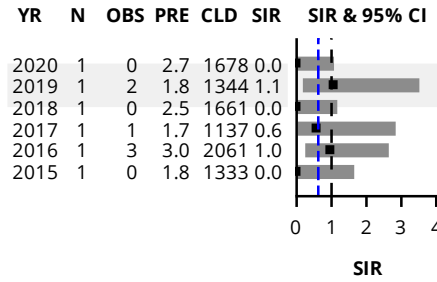


Central Line-Associated Bloodstream Infections (CLABSI)

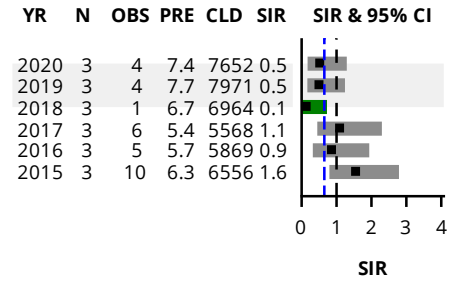
CLABSI - Adult/Pediatric ICUs



CLABSI - Neonatal ICUs

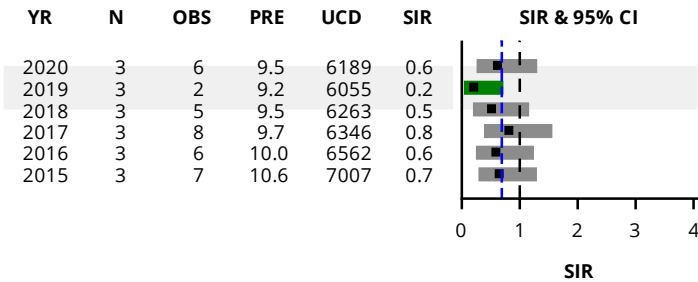


CLABSI - Adult/Pediatric Wards

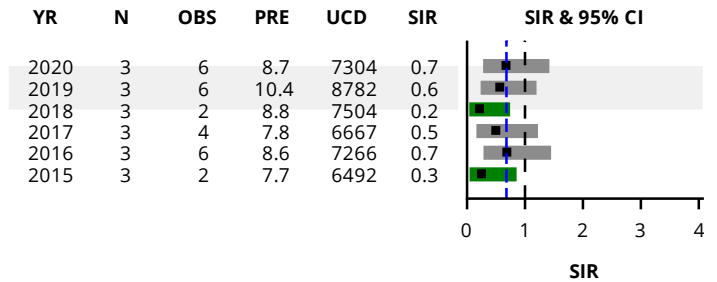


Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICUs

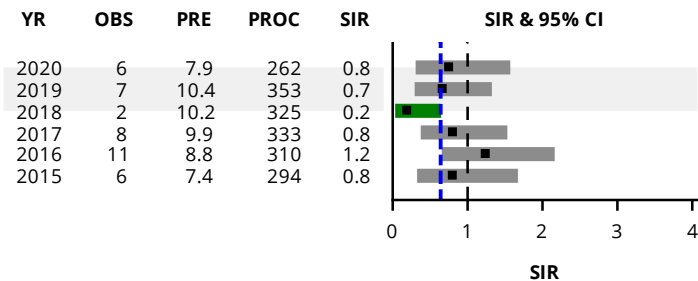


CAUTI - Adult/Pediatric Wards

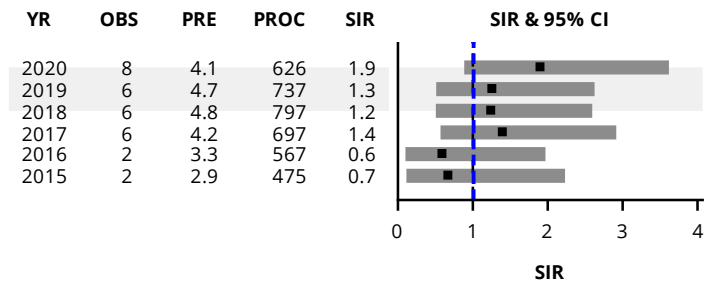


Surgical Site Infections (SSI)

SSI - Colon Surgery

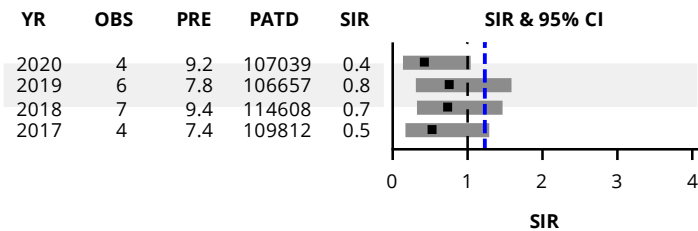


SSI - Abdominal Hysterectomy

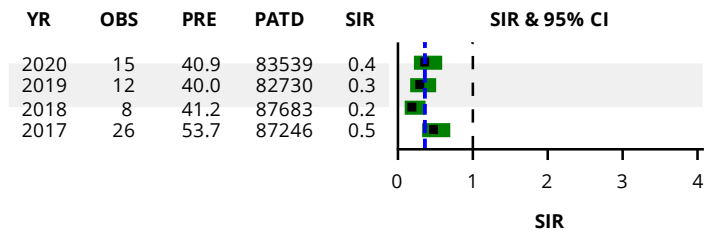


Healthcare Facility-Onset Laboratory Identified (LabID) Events

LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia



LabID - *C. difficile* Infection (CDI)



Data reported as of June 30, 2021

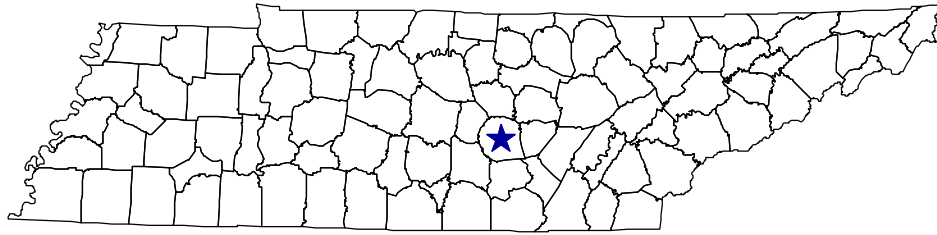
YR = reporting year; N = number of units reporting (CLABSI/CAUTI); OBS = observed number of infections
 PRE = statistically 'predicted' number of infections, based on NHSN national baseline data
 SIR = standardized infection ratio (observed/predicted number of infections)
 CLD = central line days; UCD = 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
 - - - 2020 TN SIR
 - - - NHSN SIR=1

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, 01/01/2019-12/31/2019

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	348	N/A	N/A	0.72
	Adult/Pediatric Ward	0	0.1	299	N/A	N/A	0.52
CAUTI	Adult/Pediatric ICU	0	0.4	742	N/A	N/A	0.74
	Adult/Pediatric Ward	1	0.5	1114	N/A	N/A	0.78
SSI	Colon surgery	N/A	N/A	N/A	N/A	N/A	0.94
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	0.80
LabID	MRSA bacteremia	0	0.3	6296	N/A	N/A	1.19
	C. difficile infection	1	1.8	5532	0.55	(0.03, 2.71)	0.47

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 - '2019/2020' Influenza Season

Healthcare Personnel Category (Total)



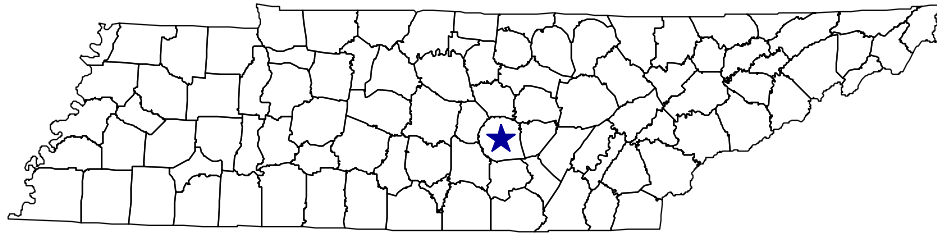
Healthcare Personnel Vaccinated (%)

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, 01/01/2020-12/31/2020

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	223	N/A	N/A	0.91
	Adult/Pediatric Ward	0	0.1	269	N/A	N/A	0.65
CAUTI	Adult/Pediatric ICU	0	0.3	623	N/A	N/A	0.69
	Adult/Pediatric Ward	0	0.4	859	N/A	N/A	0.68
SSI	Colon surgery	N/A	N/A	N/A	N/A	N/A	0.64
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	1.01
LabID	MRSA bacteremia	0	0.4	7134	N/A	N/A	1.23
	C. difficile infection	1	1.9	6396	0.52	(0.03, 2.58)	0.36

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

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

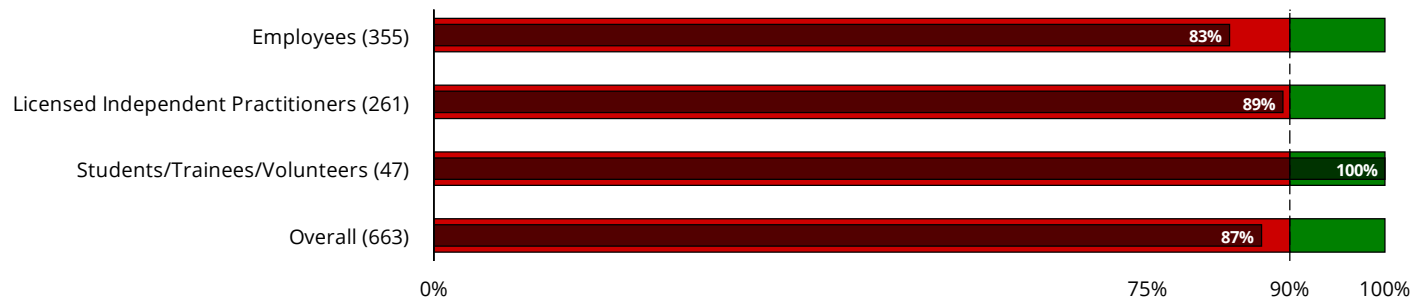
N/A: Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

*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 - '2020/2021' 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
2020	2	0	0.1	223	N/A
2019	1	0	0.2	348	N/A
2018	1	0	0.1	178	N/A
2017	1	0	0.1	150	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
2020	1	0	0.1	269	N/A
2019	1	0	0.1	299	N/A
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
2020	2	0	0.3	623	N/A
2019	1	0	0.4	742	N/A
2018	1	0	0.4	818	N/A
2017	1	0	0.3	656	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
2020	1	0	0.4	859	N/A
2019	1	1	0.5	1114	N/A
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
2020	N/A	N/A	N/A	N/A
2019	N/A	N/A	N/A	N/A
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
2020	N/A	N/A	N/A	N/A
2019	N/A	N/A	N/A	N/A
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

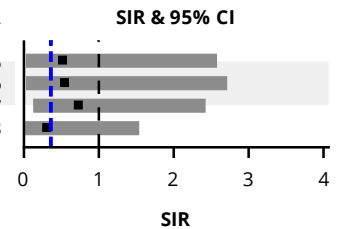
LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia

YR	OBS	PRE	PATD	SIR
2020	0	0.4	7134	N/A
2019	0	0.3	6296	N/A
2018	1	0.3	7199	N/A
2017	1	0.4	8250	N/A

N/A: Number of predicted infections <1; no SIR calculated

LabID - *C. difficile* Infection (CDI)

YR	OBS	PRE	PATD	SIR
2020	1	1.9	6396	0.5
2019	1	1.8	5532	0.6
2018	2	2.7	6842	0.7
2017	1	3.2	8048	0.3



Data reported as of June 30, 2021

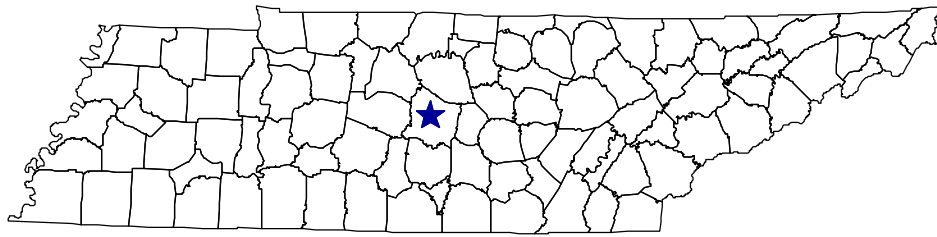
YR = reporting year; N = number of units reporting (CLABSI/CAUTI); OBS = observed number of infections
 PRE = statistically 'predicted' number of infections, based on NHSN national baseline data
 SIR = standardized infection ratio (observed/predicted number of infections)
 CLD = central line days; UCD = 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
 - - - 2020 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, 01/01/2019-12/31/2019

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	3.9	3468	0.51	(0.09, 1.69)	0.72
	Neonatal ICU	0	0.1	186	N/A	N/A	0.44
	Adult/Pediatric Ward	2	8.0	8279	0.25	(0.04, 0.82)	0.52
CAUTI	Adult/Pediatric ICU	4	6.7	5219	0.59	(0.19, 1.42)	0.74
	Adult/Pediatric Ward	6	13.6	11714	0.44	(0.18, 0.92)	0.78
SSI	Colon surgery	4	6.3	283	0.63	(0.20, 1.53)	0.94
	Abdominal hysterectomy	3	0.9	157	N/A	N/A	0.80
LabID	MRSA bacteremia	8	7.9	93006	1.00	(0.47, 1.91)	1.19
	C. difficile infection	28	40.6	82499	0.69	(0.47, 0.98)	0.47

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

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

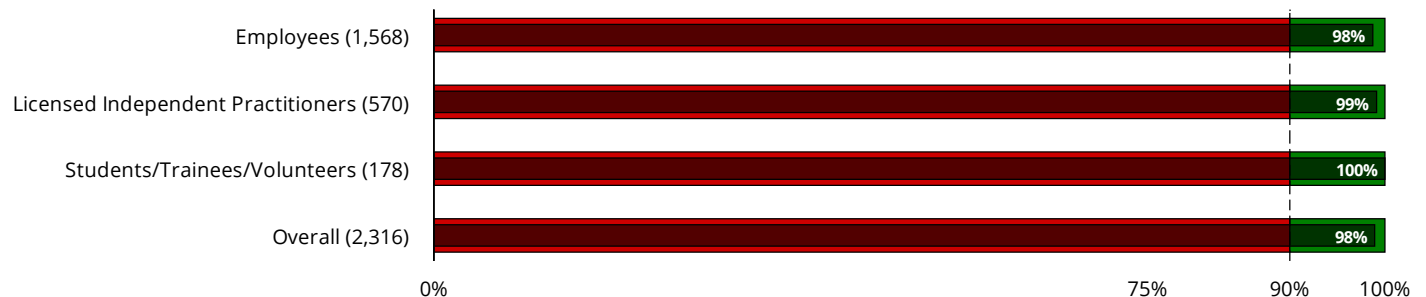
N/A: Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

*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 - '2019/2020' Influenza Season

Healthcare Personnel Category (Total)



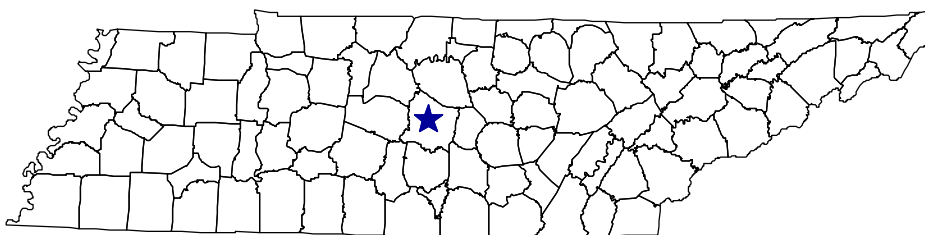
Healthcare Personnel Vaccinated (%)

■ 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: 400+ beds



Healthcare-Associated Infections (HAI) Summary

Standardized Infection Ratio (SIR) by Infection Type, 01/01/2020-12/31/2020

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	4.1	3635	0.73	(0.19, 1.99)	0.91
	Neonatal ICU	0	0.1	113	N/A	N/A	0.62
	Adult/Pediatric Ward	3	7.9	8162	0.38	(0.10, 1.03)	0.65
CAUTI	Adult/Pediatric ICU	2	7.2	5531	0.28	(0.05, 0.92)	0.69
	Adult/Pediatric Ward	6	13.9	11965	0.43	(0.18, 0.90)	0.68
SSI	Colon surgery	2	5.8	257	0.34	(0.06, 1.13)	0.64
	Abdominal hysterectomy	0	0.8	136	N/A	N/A	1.01
LabID	MRSA bacteremia	5	8.6	95327	0.58	(0.21, 1.28)	1.23
	C. difficile infection	20	41.3	83493	0.48	(0.30, 0.73)	0.36

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

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

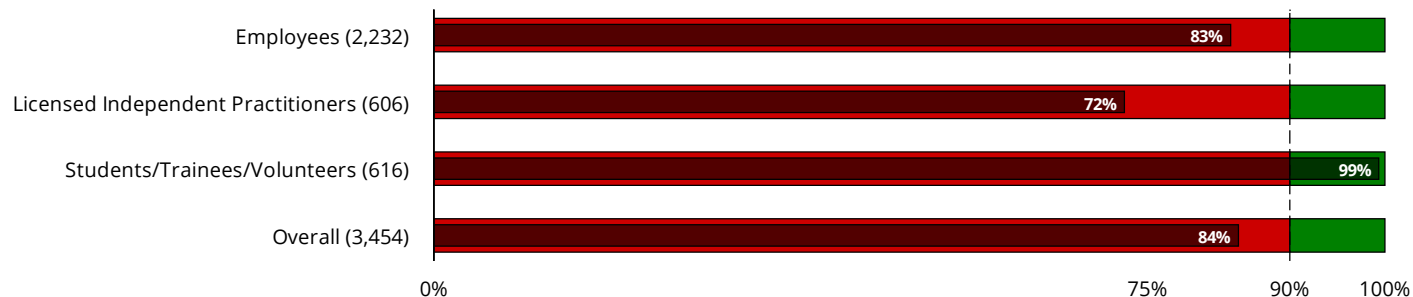
N/A: Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

*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 - '2020/2021' Influenza Season

Healthcare Personnel Category (Total)

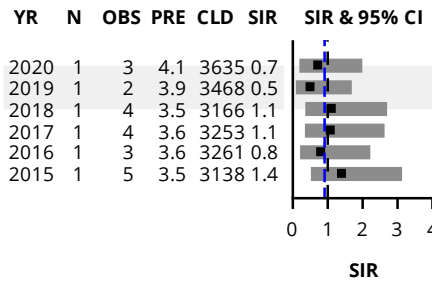


Healthcare Personnel Vaccinated (%)

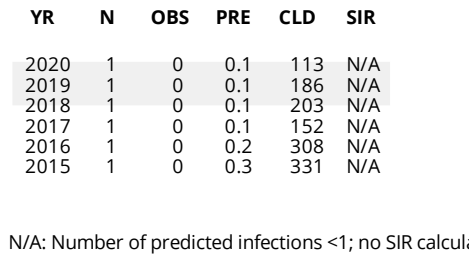
■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

Central Line-Associated Bloodstream Infections (CLABSI)

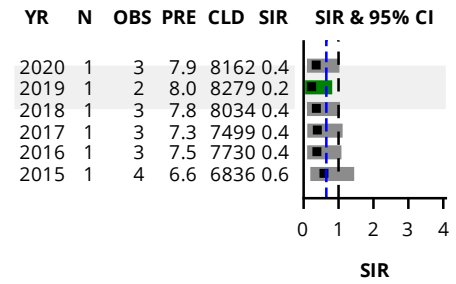
CLABSI - Adult/Pediatric ICUs



CLABSI - Neonatal ICUs

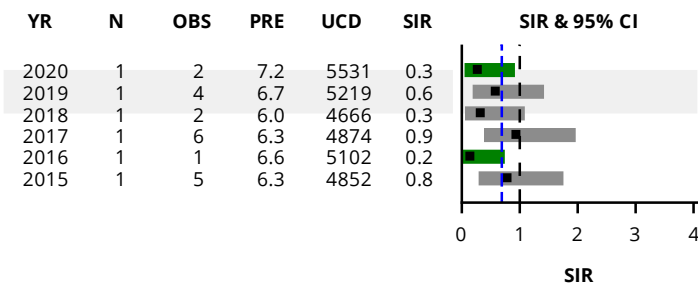


CLABSI - Adult/Pediatric Wards

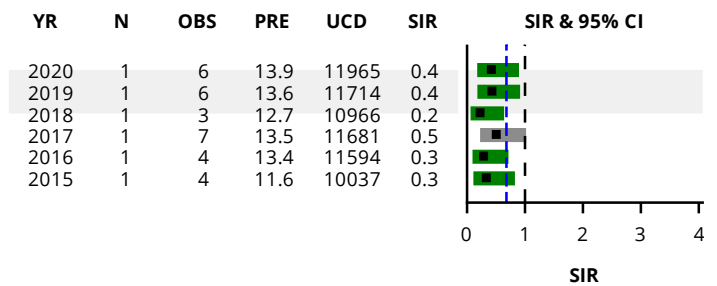


Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICUs

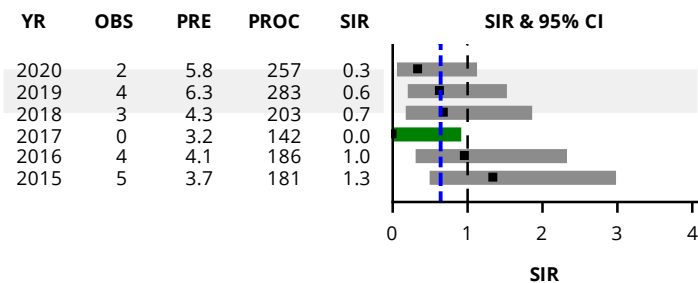


CAUTI - Adult/Pediatric Wards

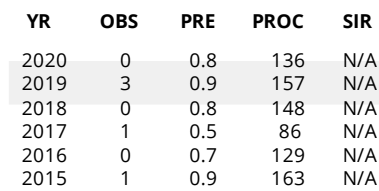


Surgical Site Infections (SSI)

SSI - Colon Surgery



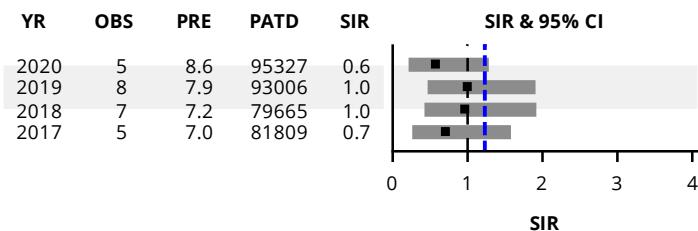
SSI - Abdominal Hysterectomy



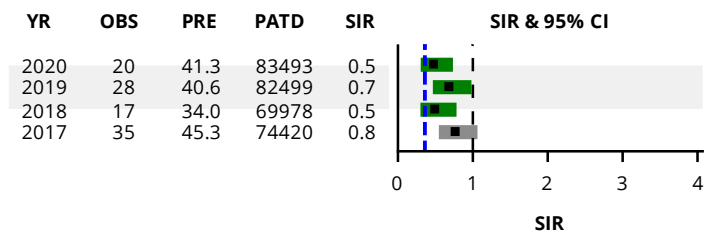
N/A: Number of predicted infections <1; no SIR calculated

Healthcare Facility-Onset Laboratory Identified (LabID) Events

LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia



LabID - *C. difficile* Infection (CDI)



Data reported as of June 30, 2021

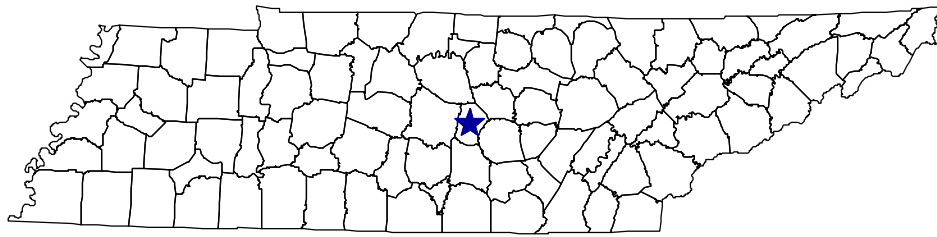
YR = reporting year; N = number of units reporting (CLABSI/CAUTI); OBS = observed number of infections
 PRE = statistically 'predicted' number of infections, based on NHSN national baseline data
 SIR = standardized infection ratio (observed/predicted number of infections)
 CLD = central line days; UCD = 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
 - - - 2020 TN SIR
 - - - NHSN SIR=1

St. Thomas Stones River Hospital, Woodbury, Cannon County

Medical School Affiliation: None

Bed Size Category: 50-99 beds



Healthcare-Associated Infections (HAI) Summary

Standardized Infection Ratio (SIR) by Infection Type, 01/01/2019-12/31/2019

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	0.52
CAUTI	Adult/Pediatric Ward	N/A	N/A	N/A	N/A	N/A	0.78
LabID	MRSA bacteremia	0	0.0	2338	N/A	N/A	1.19
	C. difficile infection	0	0.4	2238	N/A	N/A	0.47

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 - '2019/2020' Influenza Season

Healthcare Personnel Category (Total)



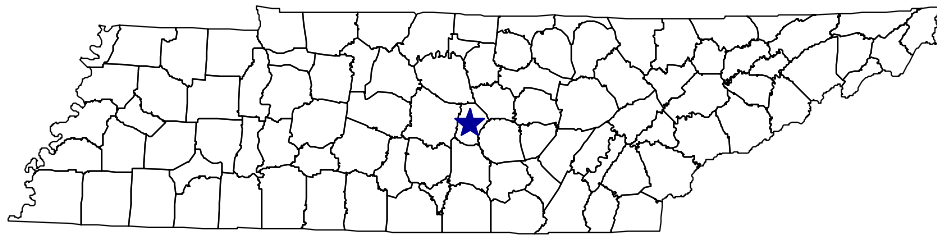
Healthcare Personnel Vaccinated (%)

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

St. Thomas Stones River Hospital, Woodbury, Cannon County

Medical School Affiliation: None

Bed Size Category: 50-99 beds



Healthcare-Associated Infections (HAI) Summary

Standardized Infection Ratio (SIR) by Infection Type, 01/01/2020-12/31/2020

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	0.65
CAUTI	Adult/Pediatric Ward	N/A	N/A	N/A	N/A	N/A	0.68
LabID	MRSA bacteremia	0	0.0	2127	N/A	N/A	1.23
	C. difficile infection	0	0.5	2127	N/A	N/A	0.36

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

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

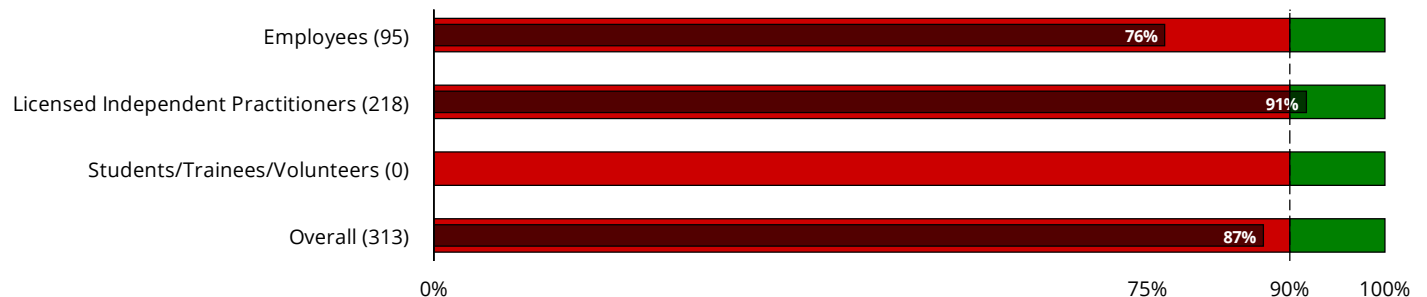
N/A: Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

*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 - '2020/2021' 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
2020	2	N/A	N/A	N/A	N/A
2019	1	N/A	N/A	N/A	N/A
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	208	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
2020	2	N/A	N/A	N/A	N/A
2019	1	N/A	N/A	N/A	N/A
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
2020	0	0.0	2127	N/A
2019	0	0.0	2338	N/A
2018	0	0.0	1865	N/A
2017	0	0.0	1106	N/A

N/A: Number of predicted infections <1; no SIR calculated

LabID - *C. difficile* Infection (CDI)

YR	OBS	PRE	PATD	SIR
2020	0	0.5	2127	N/A
2019	0	0.4	2238	N/A
2018	0	0.4	1865	N/A
2017	1	0.2	1106	N/A

N/A: Number of predicted infections <1; no SIR calculated

Data reported as of June 30, 2021

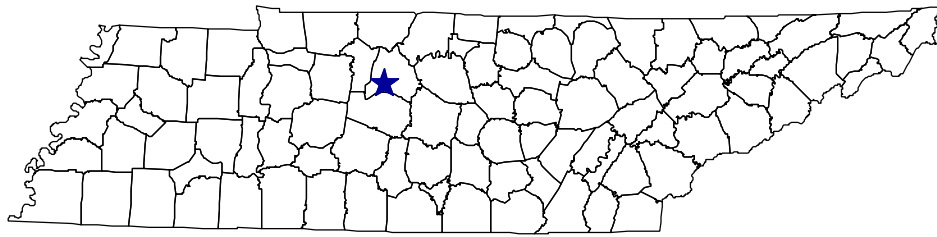
YR = reporting year; **N** = number of units reporting (CLABSI/CAUTI); **OBS** = observed number of infections
PRE = statistically 'predicted' number of infections, based on NHSN national baseline data
SIR = standardized infection ratio (observed/predicted number of infections)
CLD = central line days; **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
- 2020 TN SIR
- NHSN SIR=1

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, 01/01/2019-12/31/2019

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	14	11.4	10112	1.23	(0.70, 2.01)	0.72
	Adult/Pediatric Ward	10	15.1	15511	0.66	(0.34, 1.18)	0.52
CAUTI	Adult/Pediatric ICU	15	18.0	10124	0.83	(0.48, 1.34)	0.74
	Adult/Pediatric Ward	9	9.2	7917	0.98	(0.48, 1.79)	0.78
SSI	Colon surgery	8	5.2	223	1.53	(0.71, 2.90)	0.94
	Abdominal hysterectomy	0	0.4	77	N/A	N/A	0.80
LabID	MRSA bacteremia	7	11.1	102166	0.63	(0.28, 1.25)	1.19
	C. difficile infection	29	53.1	102166	0.55	(0.37, 0.77)	0.47

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

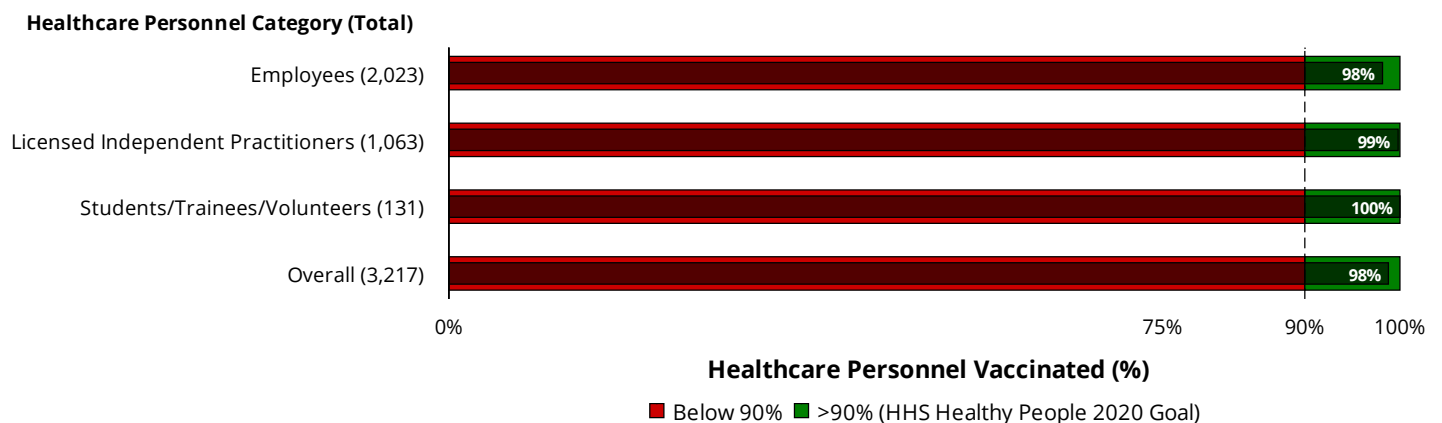
Red highlighting indicates an SIR significantly **HIGHER** than the 2015 national baseline

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

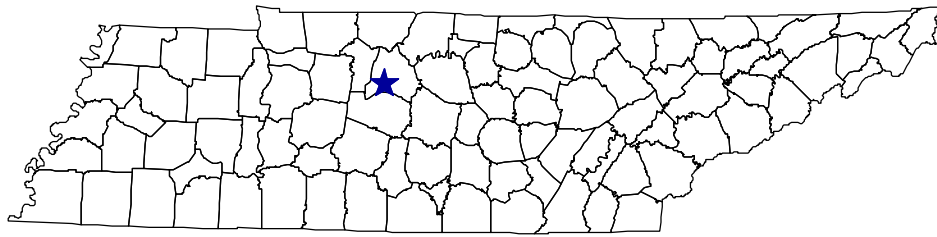
Healthcare Personnel Influenza Vaccination - '2019/2020' Influenza Season



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, 01/01/2020-12/31/2020

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	8	12.2	10891	0.65	(0.30, 1.24)	0.91
	Adult/Pediatric Ward	5	14.5	14937	0.34	(0.13, 0.76)	0.65
CAUTI	Adult/Pediatric ICU	9	19.3	10878	0.46	(0.23, 0.85)	0.69
	Adult/Pediatric Ward	8	8.1	6979	0.98	(0.46, 1.87)	0.68
SSI	Colon surgery	8	5.0	210	1.58	(0.73, 3.00)	0.64
	Abdominal hysterectomy	0	0.4	58	N/A	N/A	1.01
LabID	MRSA bacteremia	11	10.4	96186	1.05	(0.55, 1.83)	1.23
	C. difficile infection	27	48.0	96186	0.56	(0.38, 0.81)	0.36

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

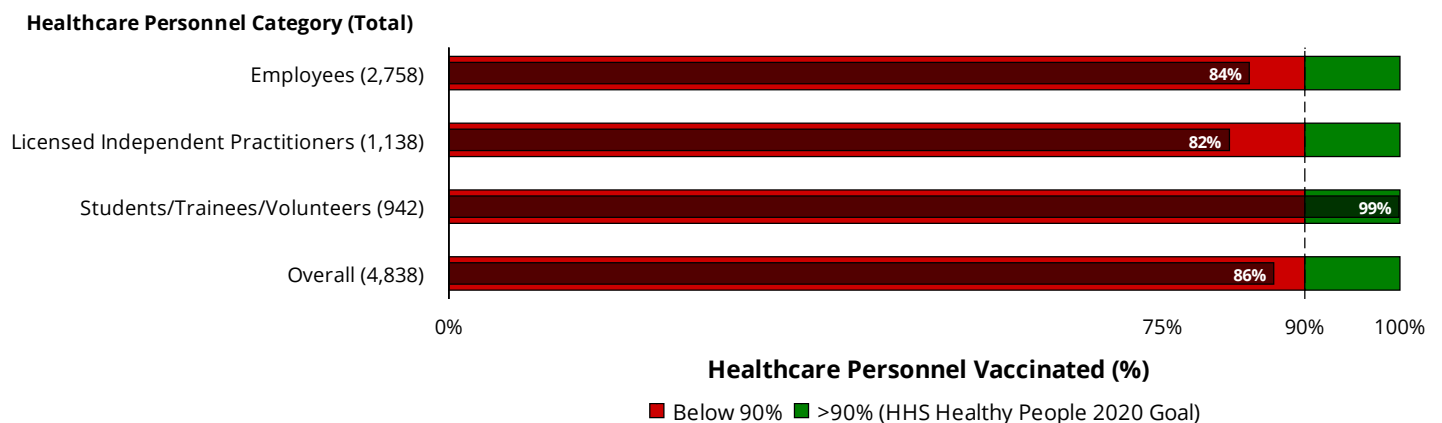
Red highlighting indicates an SIR significantly **HIGHER** than the 2015 national baseline

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)

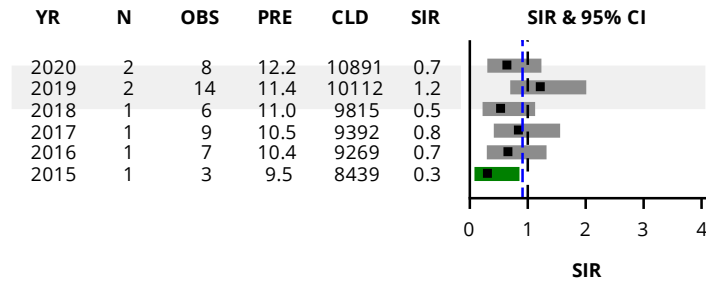
See page 3 for more detailed information about HAIs at St. Thomas West Hospital

Healthcare Personnel Influenza Vaccination - '2020/2021' Influenza Season

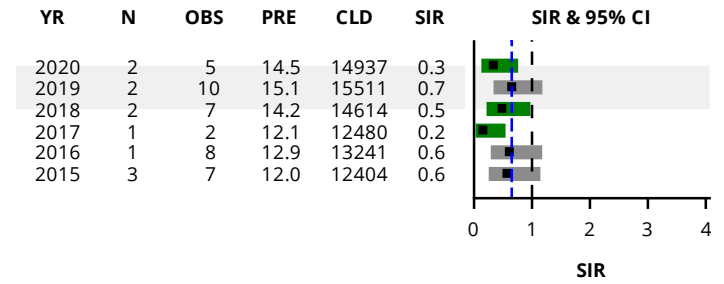


Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric ICUs

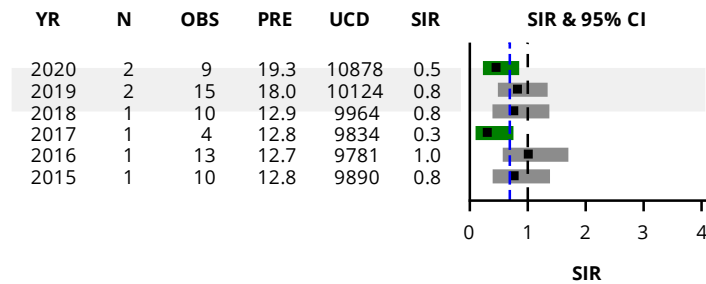


CLABSI - Adult/Pediatric Wards

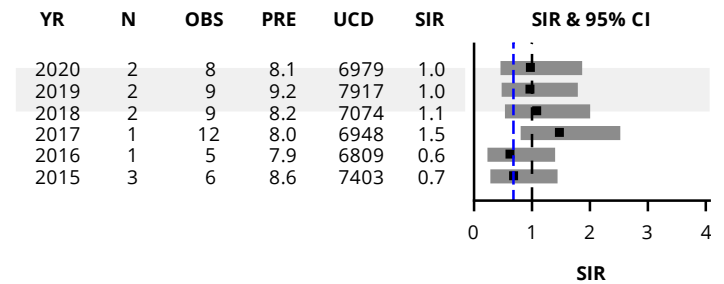


Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICUs

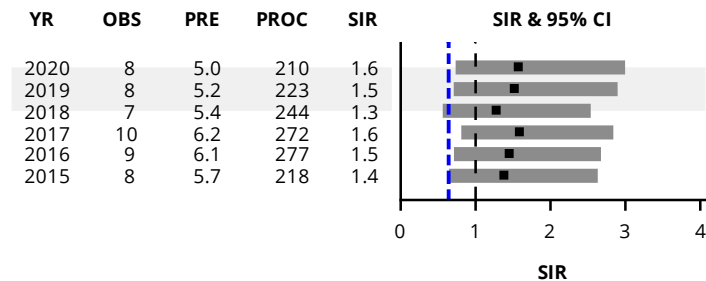


CAUTI - Adult/Pediatric Wards

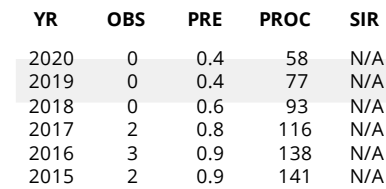


Surgical Site Infections (SSI)

SSI - Colon Surgery



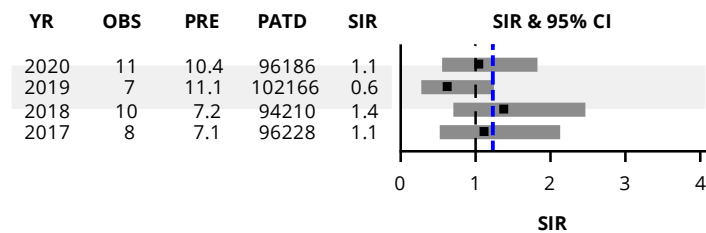
SSI - Abdominal Hysterectomy



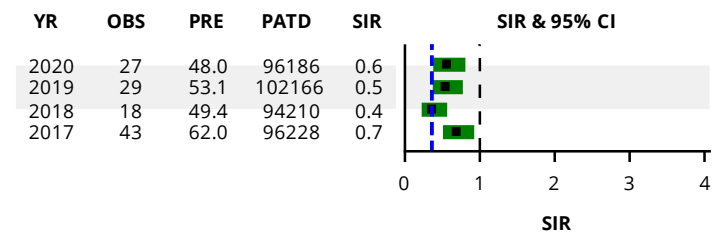
N/A: Number of predicted infections <1; no SIR calculated

Healthcare Facility-Onset Laboratory Identified (LabID) Events

LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia



LabID - *C. difficile* Infection (CDI)



Data reported as of June 30, 2021

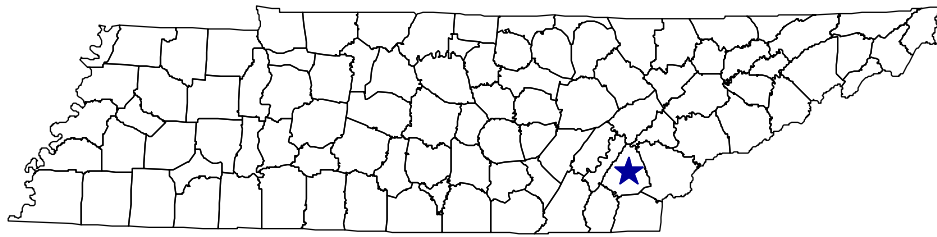
YR = reporting year; N = number of units reporting (CLABSI/CAUTI); OBS = observed number of infections
 PRE = statistically 'predicted' number of infections, based on NHSN national baseline data
 SIR = standardized infection ratio (observed/predicted number of infections)
 CLD = central line days; UCD = urinary catheter days; PROC = procedures performed; PATD = patient days;
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■ Significantly lower than NHSN SIR of 1
 ■ Not significantly different from NHSN SIR of 1
 ■ Significantly higher than NHSN SIR of 1
 - - - 2020 TN SIR
 - - - NHSN SIR=1

Starr Regional Med. Center-Athens (Athens Reg. Med. Ctr.), Athens, McMinn County

Medical School Affiliation: Major teaching

Bed Size Category: 50-99 beds



Healthcare-Associated Infections (HAI) Summary

Standardized Infection Ratio (SIR) by Infection Type, 01/01/2019-12/31/2019

		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	193	N/A	N/A	0.72
	Adult/Pediatric Ward	0	0.2	371	N/A	N/A	0.52
CAUTI	Adult/Pediatric ICU	0	0.5	704	N/A	N/A	0.74
	Adult/Pediatric Ward	0	0.9	1325	N/A	N/A	0.78
SSI	Colon surgery	0	0.8	36	N/A	N/A	0.94
	Abdominal hysterectomy	0	0.1	20	N/A	N/A	0.80
LabID	MRSA bacteremia	1	0.6	12426	N/A	N/A	1.19
	C. difficile infection	1	3.4	10723	0.29	(0.02, 1.45)	0.47

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 - '2019/2020' Influenza Season

Healthcare Personnel Category (Total)



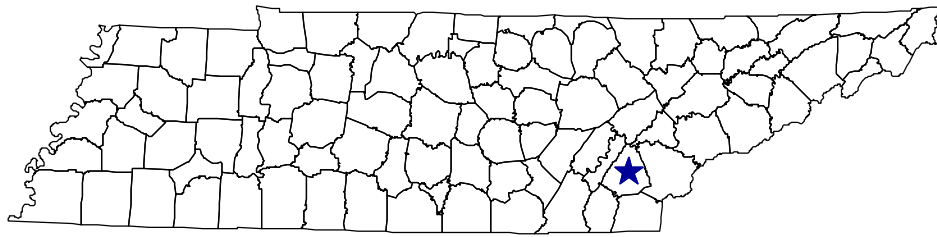
Healthcare Personnel Vaccinated (%)

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

Starr Regional Med. Center-Athens (Athens Reg. Med. Ctr.), Athens, McMinn County

Medical School Affiliation: Major teaching

Bed Size Category: 50-99 beds



Healthcare-Associated Infections (HAI) Summary

Standardized Infection Ratio (SIR) by Infection Type, 01/01/2020-12/31/2020

		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	0.2	258	N/A	N/A	0.91
	Adult/Pediatric Ward	0	0.2	340	N/A	N/A	0.65
CAUTI	Adult/Pediatric ICU	0	0.5	667	N/A	N/A	0.69
	Adult/Pediatric Ward	0	0.8	1238	N/A	N/A	0.68
SSI	Colon surgery	0	1.0	46	0.00	(0.00, 2.79)	0.64
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	1.01
LabID	MRSA bacteremia	0	0.6	11622	N/A	N/A	1.23
	C. difficile infection	3	3.3	10848	0.88	(0.23, 2.41)	0.36

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

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

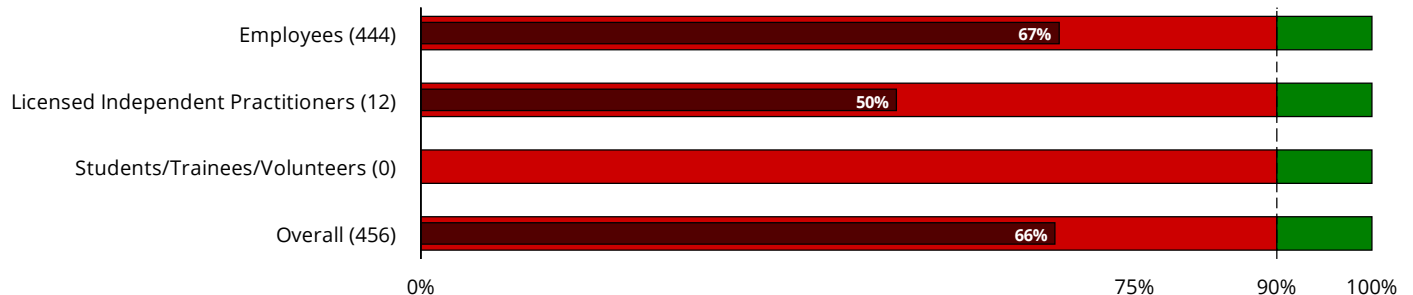
N/A: Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

*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 - '2020/2021' 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
2020	1	0	0.2	258	N/A
2019	1	0	0.1	193	N/A
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
2020	1	0	0.2	340	N/A
2019	1	0	0.2	371	N/A
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
2020	1	0	0.5	667	N/A
2019	1	0	0.5	704	N/A
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

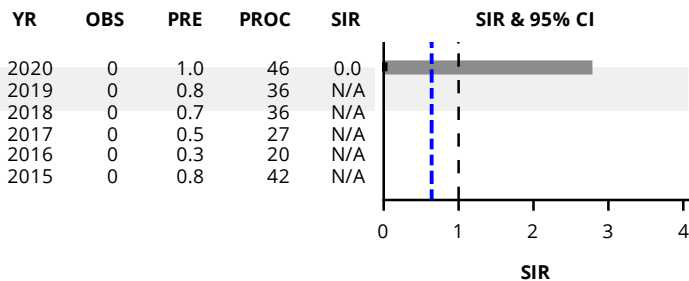
CAUTI - Adult/Pediatric Wards

YR	N	OBS	PRE	UCD	SIR
2020	1	0	0.8	1238	N/A
2019	1	0	0.9	1325	N/A
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



SSI - Abdominal Hysterectomy

YR	OBS	PRE	PROC	SIR
2020	N/A	N/A	N/A	N/A
2019	0	0.1	20	N/A
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

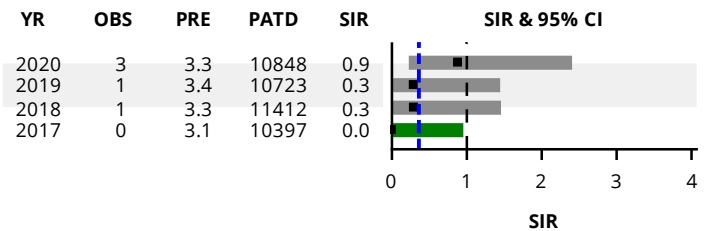
Healthcare Facility-Onset Laboratory Identified (LabID) Events

LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia

YR	OBS	PRE	PATD	SIR
2020	0	0.6	11622	N/A
2019	1	0.6	12426	N/A
2018	1	0.4	12345	N/A
2017	0	0.4	11427	N/A

N/A: Number of predicted infections <1; no SIR calculated

LabID - *C. difficile* Infection (CDI)



Data reported as of June 30, 2021

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

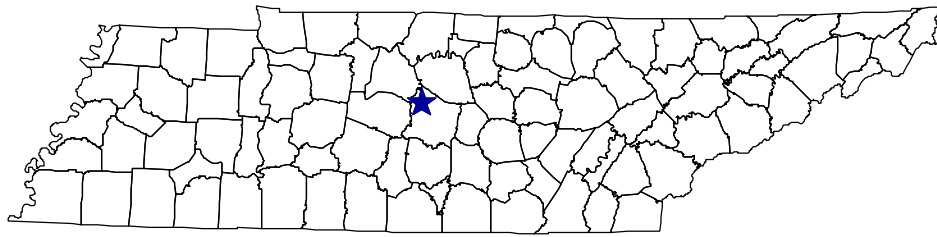
--- 2020 TN SIR

--- 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, 01/01/2019-12/31/2019

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	1103	N/A	N/A	0.72
	Adult/Pediatric Ward	0	0.9	1509	N/A	N/A	0.52
CAUTI	Adult/Pediatric ICU	0	0.8	1126	N/A	N/A	0.74
	Adult/Pediatric Ward	0	0.6	927	N/A	N/A	0.78
SSI	Colon surgery	5	2.2	98	2.23	(0.82, 4.95)	0.94
	Abdominal hysterectomy	0	0.5	94	N/A	N/A	0.80
LabID	MRSA bacteremia	1	1.1	27176	0.88	(0.04, 4.36)	1.19
	C. difficile infection	1	11.9	24139	0.08	(0.00, 0.41)	0.47

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

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

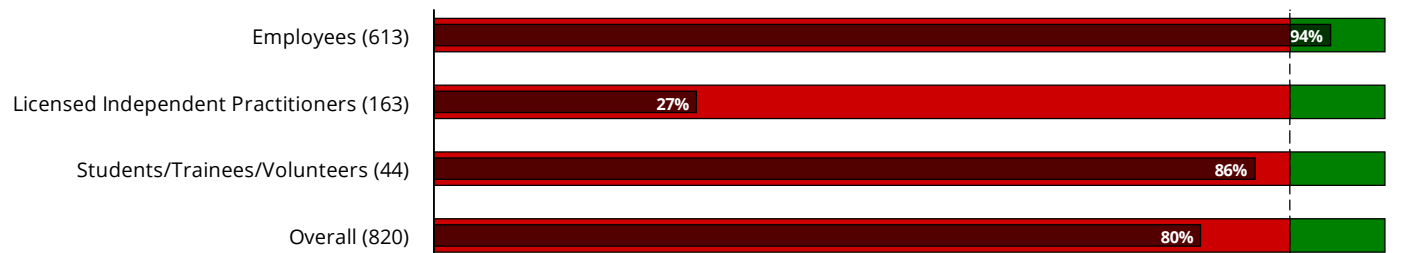
N/A: Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

*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 - '2019/2020' Influenza Season

Healthcare Personnel Category (Total)



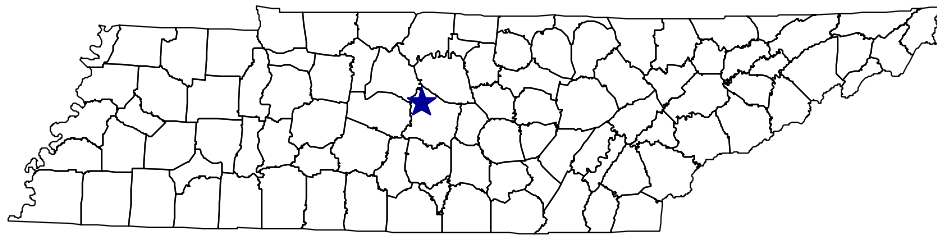
Healthcare Personnel Vaccinated (%)

■ 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, 01/01/2020-12/31/2020

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	1358	0.98	(0.05, 4.82)	0.91
	Adult/Pediatric Ward	0	0.9	1473	N/A	N/A	0.65
CAUTI	Adult/Pediatric ICU	0	1.2	1628	0.00	(0.00, 2.47)	0.69
	Adult/Pediatric Ward	0	0.5	826	N/A	N/A	0.68
SSI	Colon surgery	1	2.1	81	0.46	(0.02, 2.28)	0.64
	Abdominal hysterectomy	1	0.3	51	N/A	N/A	1.01
LabID	MRSA bacteremia	0	1.2	26529	0.00	(0.00, 2.42)	1.23
	C. difficile infection	1	11.7	23928	0.09	(0.00, 0.42)	0.36

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 - '2020/2021' Influenza Season

Healthcare Personnel Category (Total)

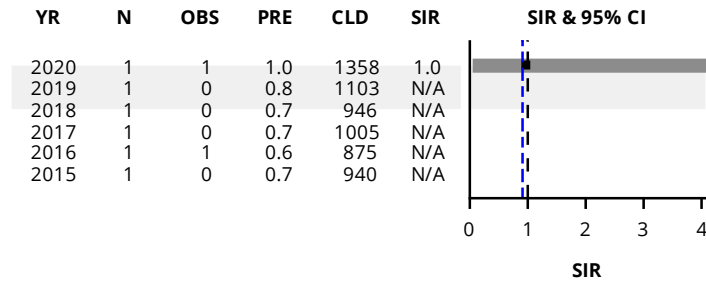


Healthcare Personnel Vaccinated (%)

Below 90% >90% (HHS Healthy People 2020 Goal)

Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric ICUs



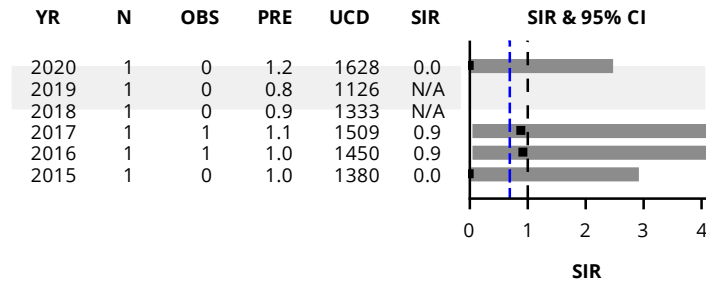
CLABSI - Adult/Pediatric Wards

YR	N	OBS	PRE	CLD	SIR
2020	1	0	0.9	1473	N/A
2019	1	0	0.9	1509	N/A
2018	1	0	0.9	1457	N/A
2017	1	1	0.9	1503	N/A
2016	1	1	1.1	1836	0.8
2015	1	3	1.2	1849	2.5

N/A: Number of predicted infections <1; no SIR calculated

Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICUs



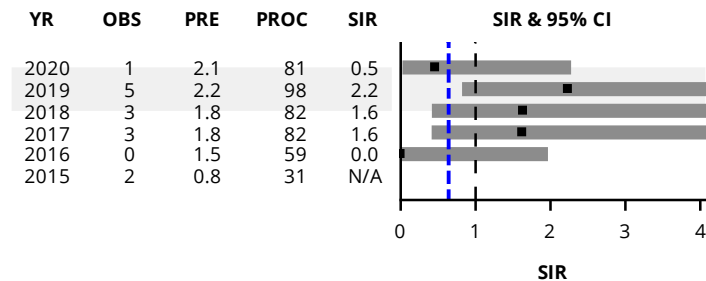
CAUTI - Adult/Pediatric Wards

YR	N	OBS	PRE	UCD	SIR
2020	1	0	0.5	826	N/A
2019	1	0	0.6	927	N/A
2018	1	1	0.5	875	N/A
2017	1	0	1.0	1550	0.0
2016	1	3	1.3	2112	2.2
2015	1	1	1.5	2301	0.7

N/A: Number of predicted infections <1; no SIR calculated

Surgical Site Infections (SSI)

SSI - Colon Surgery



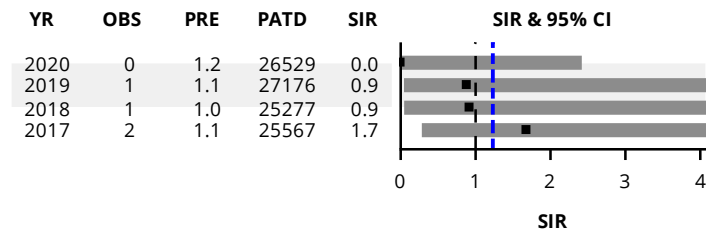
SSI - Abdominal Hysterectomy

YR	OBS	PRE	PROC	SIR
2020	1	0.3	51	N/A
2019	0	0.5	94	N/A
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

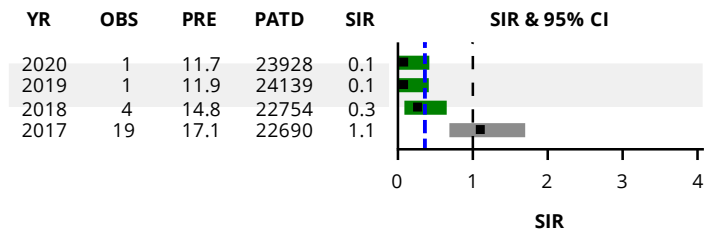
N/A: Number of predicted infections <1; no SIR calculated

Healthcare Facility-Onset Laboratory Identified (LabID) Events

LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia



LabID - *C. difficile* Infection (CDI)



Data reported as of June 30, 2021

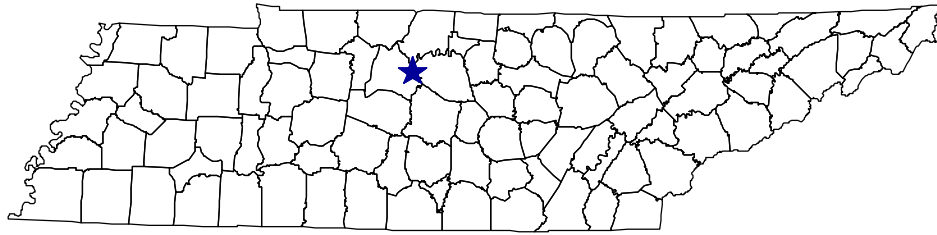
YR = reporting year; N = number of units reporting (CLABSI/CAUTI); OBS = observed number of infections
 PRE = statistically 'predicted' number of infections, based on NHSN national baseline data
 SIR = standardized infection ratio (observed/predicted number of infections)
 CLD = central line days; UCD = 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
 - - - 2020 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, 01/01/2019-12/31/2019

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	2.2	2614	0.00	(0.00, 1.32)	0.72
	Neonatal ICU	0	0.1	178	N/A	N/A	0.44
	Adult/Pediatric Ward	0	0.6	911	N/A	N/A	0.52
CAUTI	Adult/Pediatric ICU	0	2.7	2526	0.00	(0.00, 1.08)	0.74
	Adult/Pediatric Ward	1	0.6	857	N/A	N/A	0.78
SSI	Colon surgery	2	2.2	113	0.89	(0.15, 2.92)	0.94
	Abdominal hysterectomy	1	0.7	130	N/A	N/A	0.80
LabID	MRSA bacteremia	2	3.0	62274	0.65	(0.11, 2.16)	1.19
	C. difficile infection	3	27.1	59206	0.11	(0.03, 0.30)	0.47

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

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

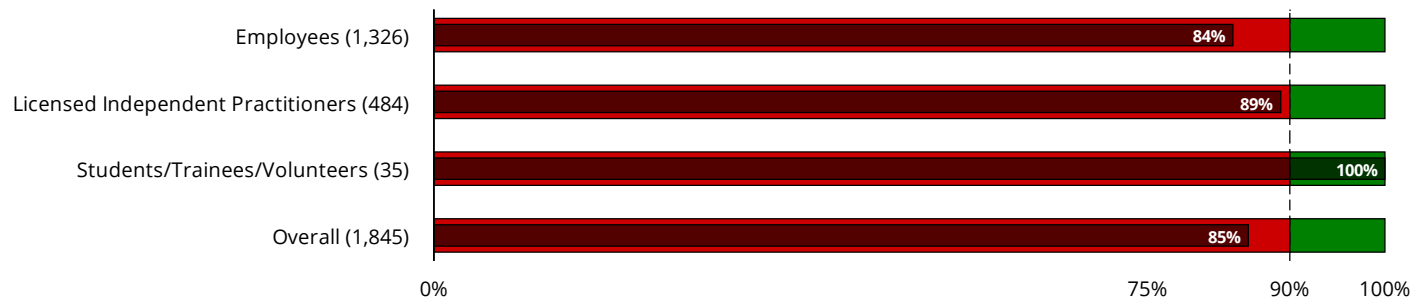
N/A: Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

*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 - '2019/2020' Influenza Season

Healthcare Personnel Category (Total)



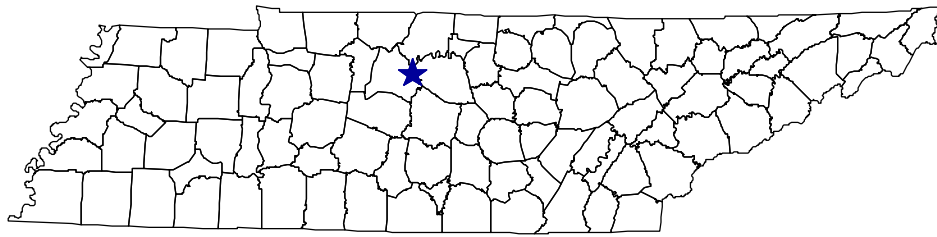
Healthcare Personnel Vaccinated (%)

■ 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, 01/01/2020-12/31/2020

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	2.4	2838	1.62	(0.52, 3.92)	0.91
	Neonatal ICU	0	0.0	110	N/A	N/A	0.62
	Adult/Pediatric Ward	1	0.6	824	N/A	N/A	0.65
CAUTI	Adult/Pediatric ICU	0	2.6	2477	0.00	(0.00, 1.13)	0.69
	Adult/Pediatric Ward	0	0.5	658	N/A	N/A	0.68
SSI	Colon surgery	0	1.7	91	0.00	(0.00, 1.67)	0.64
	Abdominal hysterectomy	0	0.4	89	N/A	N/A	1.01
LabID	MRSA bacteremia	1	2.9	58125	0.34	(0.02, 1.67)	1.23
	C. difficile infection	1	30.4	52923	0.03	(0.00, 0.16)	0.36

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

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

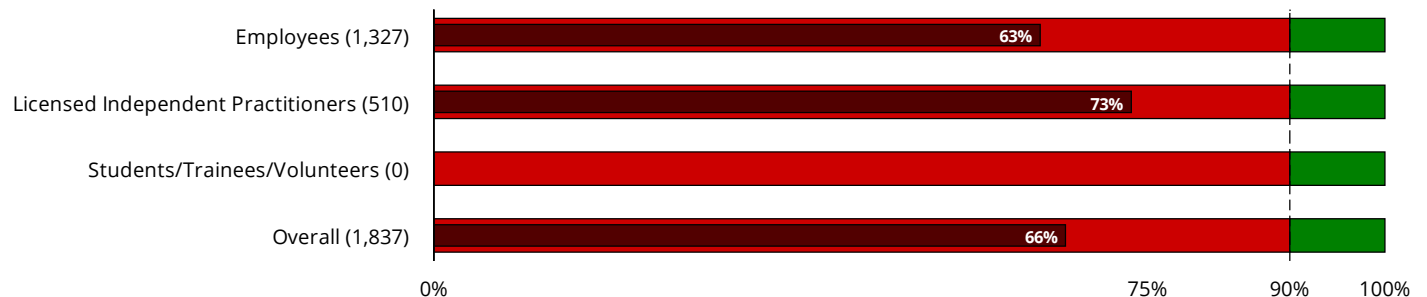
N/A: Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

*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 - '2020/2021' Influenza Season

Healthcare Personnel Category (Total)

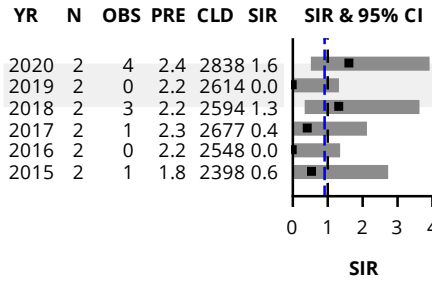


Healthcare Personnel Vaccinated (%)

■ 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	CLD	SIR
2020	1	0	0.0	110	N/A
2019	1	0	0.1	178	N/A
2018	1	0	0.0	113	N/A
2017	1	0	0.1	223	N/A
2016	1	0	0.1	183	N/A
2015	1	0	0.1	177	N/A

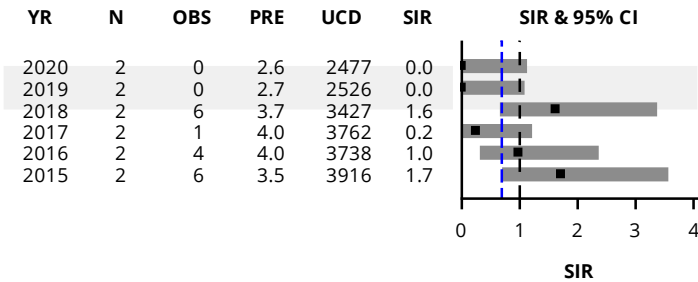
N/A: Number of predicted infections <1; no SIR calculated

CLABSI - Adult/Pediatric Wards

YR	N	OBS	PRE	CLD	SIR
2020	1	1	0.6	824	N/A
2019	1	0	0.6	911	N/A
2018	1	1	0.8	1153	N/A
2017	1	2	1.1	1521	1.8
2016	1	0	2.0	2761	0.0
2015	1	3	2.0	3185	1.4

Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICUs



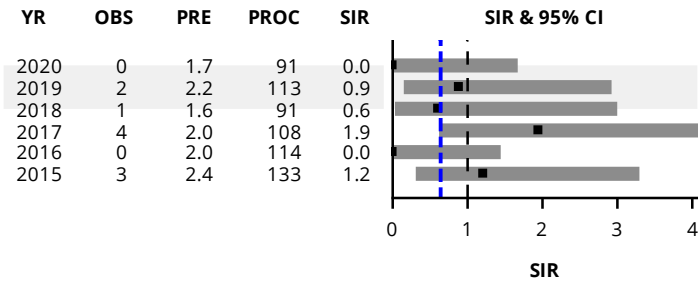
CAUTI - Adult/Pediatric Wards

YR	N	OBS	PRE	UCD	SIR
2020	1	0	0.5	658	N/A
2019	1	1	0.6	857	N/A
2018	1	0	0.9	1129	N/A
2017	1	2	1.1	1411	1.8
2016	1	1	2.7	3415	0.4
2015	1	1	3.3	5073	0.3

N/A: Number of predicted infections <1; no SIR calculated

Surgical Site Infections (SSI)

SSI - Colon Surgery



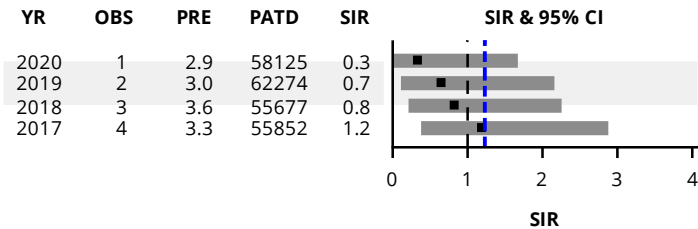
SSI - Abdominal Hysterectomy

YR	OBS	PRE	PROC	SIR
2020	0	0.4	89	N/A
2019	1	0.7	130	N/A
2018	0	0.3	63	N/A
2017	0	0.4	75	N/A
2016	2	0.5	92	N/A
2015	2	0.3	70	N/A

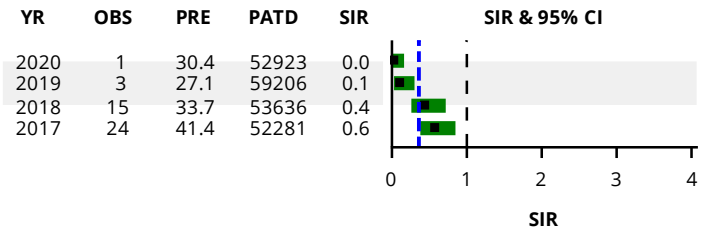
N/A: Number of predicted infections <1; no SIR calculated

Healthcare Facility-Onset Laboratory Identified (LabID) Events

LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia



LabID - *C. difficile* Infection (CDI)



Data reported as of June 30, 2021

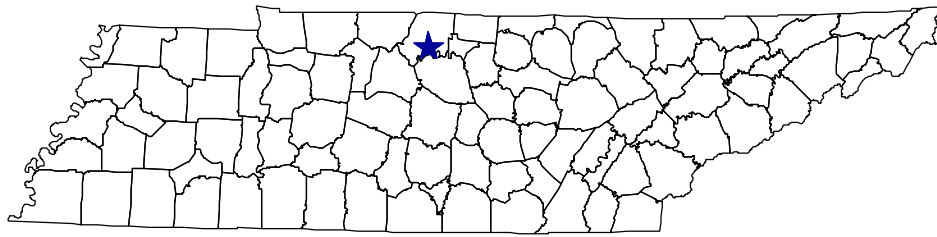
YR = reporting year; N = number of units reporting (CLABSI/CAUTI); OBS = observed number of infections
 PRE = statistically 'predicted' number of infections, based on NHSN national baseline data
 SIR = standardized infection ratio (observed/predicted number of infections)
 CLD = central line days; UCD = 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
 - - - 2020 TN SIR
 - - - NHSN SIR=1

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, 01/01/2019-12/31/2019

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	1390	0.96	(0.05, 4.71)	0.72
	Adult/Pediatric Ward	0	0.9	1525	N/A	N/A	0.52
CAUTI	Adult/Pediatric ICU	2	1.9	2638	1.04	(0.17, 3.43)	0.74
	Adult/Pediatric Ward	4	1.2	1938	3.17	(1.01, 7.64)	0.78
SSI	Colon surgery	0	0.8	42	N/A	N/A	0.94
	Abdominal hysterectomy	0	0.2	44	N/A	N/A	0.80
LabID	MRSA bacteremia	5	1.2	27284	4.03	(1.48, 8.93)	1.19
	C. difficile infection	17	23.9	25060	0.71	(0.43, 1.11)	0.47

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 - '2019/2020' Influenza Season

Healthcare Personnel Category (Total)



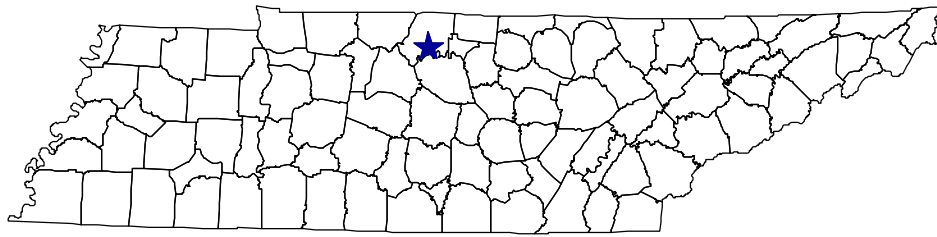
Healthcare Personnel Vaccinated (%)

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

Sumner Regional Medical Center, Gallatin, Sumner County

Medical School Affiliation: Major teaching

Bed Size Category: 100-399 beds



Healthcare-Associated Infections (HAI) Summary

Standardized Infection Ratio (SIR) by Infection Type, 01/01/2020-12/31/2020

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	1.6	1699	1.80	(0.46, 4.90)	0.91
	Adult/Pediatric Ward	0	1.0	1199	0.00	(0.00, 2.95)	0.65
CAUTI	Adult/Pediatric ICU	1	3.9	3727	0.25	(0.01, 1.25)	0.69
	Adult/Pediatric Ward	1	1.7	1846	0.57	(0.03, 2.81)	0.68
SSI	Colon surgery	0	0.6	29	N/A	N/A	0.64
	Abdominal hysterectomy	0	0.3	51	N/A	N/A	1.01
LabID	MRSA bacteremia	2	1.8	29073	1.07	(0.18, 3.55)	1.23
	C. difficile infection	14	19.5	27403	0.72	(0.41, 1.17)	0.36

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

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

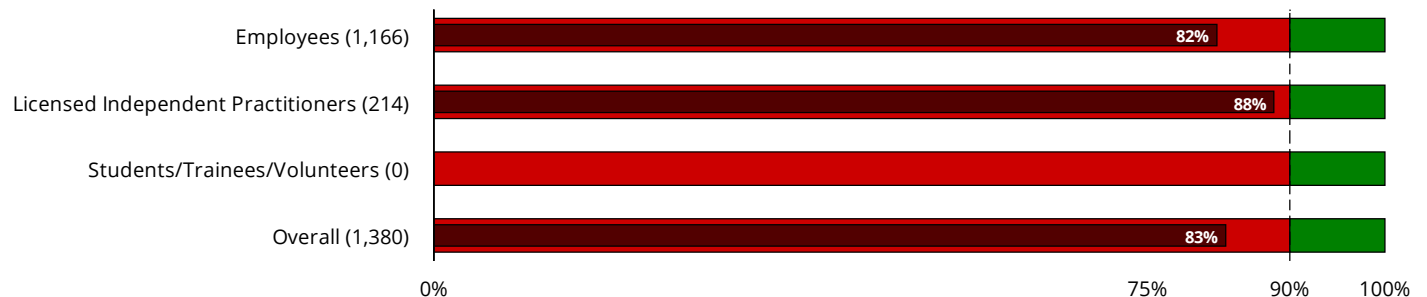
N/A: Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

*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 - '2020/2021' Influenza Season

Healthcare Personnel Category (Total)

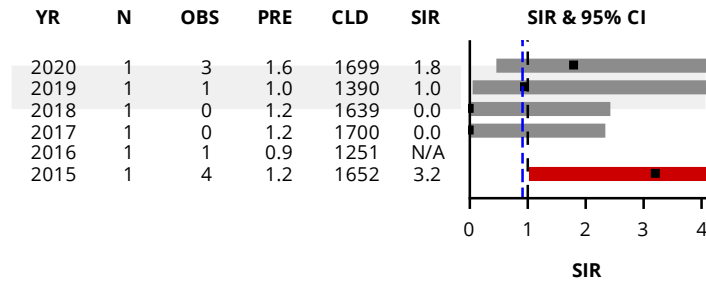


Healthcare Personnel Vaccinated (%)

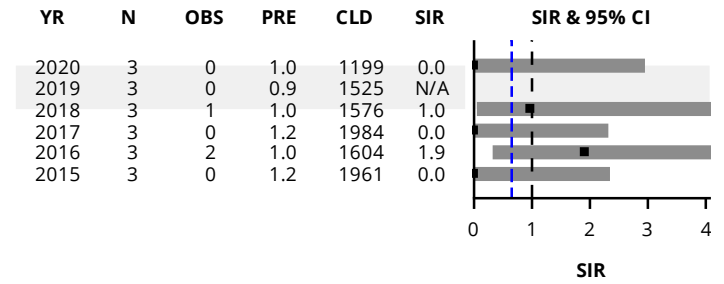
■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric ICUs

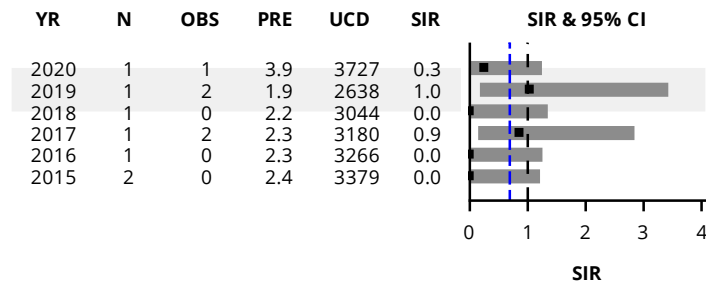


CLABSI - Adult/Pediatric Wards

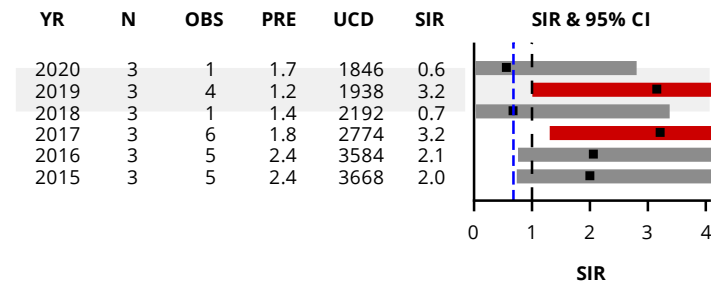


Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICUs



CAUTI - Adult/Pediatric Wards



Surgical Site Infections (SSI)

SSI - Colon Surgery

YR	OBS	PRE	PROC	SIR
2020	0	0.6	29	N/A
2019	0	0.8	42	N/A
2018	0	0.6	31	N/A
2017	1	1.0	54	0.9
2016	1	1.1	58	0.9
2015	2	0.9	47	N/A

SSI - Abdominal Hysterectomy

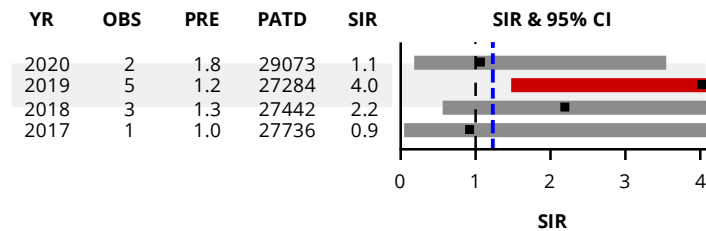
YR	OBS	PRE	PROC	SIR
2020	0	0.3	51	N/A
2019	0	0.2	44	N/A
2018	0	0.2	50	N/A
2017	1	0.2	53	N/A
2016	0	0.2	51	N/A
2015	0	0.3	58	N/A

N/A: Number of predicted infections <1; no SIR calculated

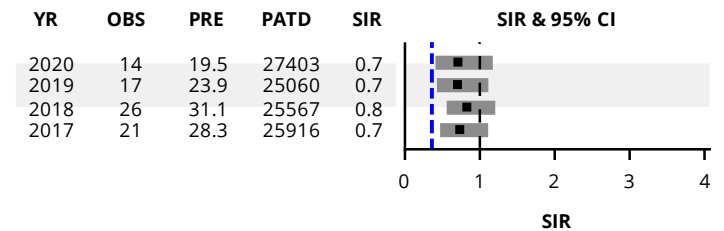
N/A: Number of predicted infections <1; no SIR calculated

Healthcare Facility-Onset Laboratory Identified (LabID) Events

LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia



LabID - *C. difficile* Infection (CDI)



Data reported as of June 30, 2021

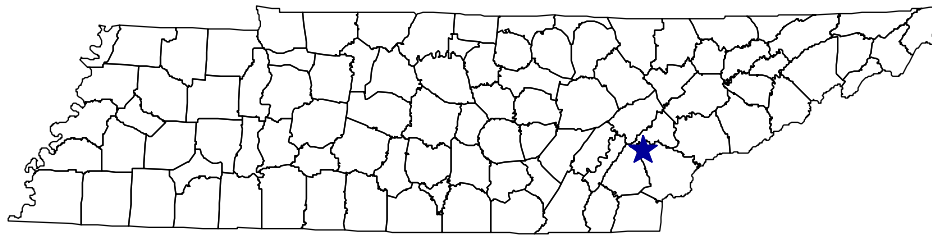
YR = reporting year; N = number of units reporting (CLABSI/CAUTI); OBS = observed number of infections
 PRE = statistically 'predicted' number of infections, based on NHSN national baseline data
 SIR = standardized infection ratio (observed/predicted number of infections)
 CLD = central line days; UCD = 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
 - - - 2020 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, 01/01/2019-12/31/2019

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	186	N/A	N/A	0.72
	Adult/Pediatric Ward	0	0.0	133	N/A	N/A	0.52
CAUTI	Adult/Pediatric ICU	0	0.5	841	N/A	N/A	0.74
	Adult/Pediatric Ward	0	0.7	1317	N/A	N/A	0.78
SSI	Colon surgery	0	0.4	23	N/A	N/A	0.94
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	0.80
LabID	MRSA bacteremia	0	0.5	9780	N/A	N/A	1.19
	C. difficile infection	1	3.6	9276	0.28	(0.01, 1.36)	0.47

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

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

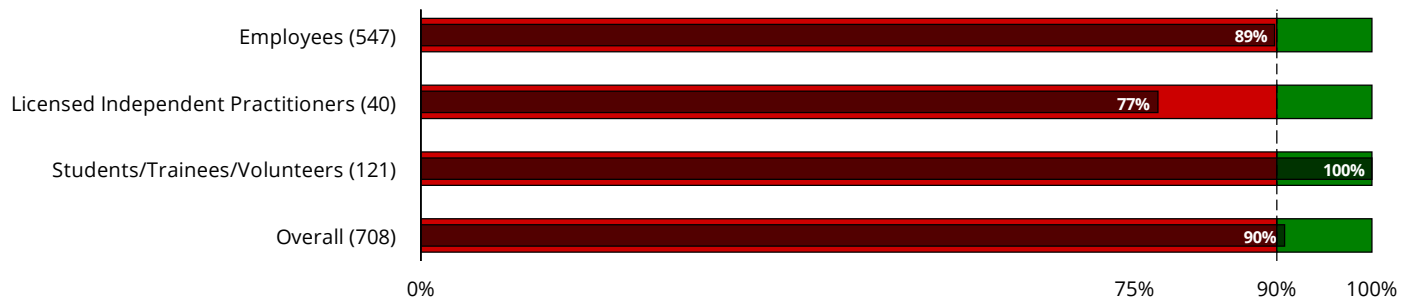
N/A: Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

*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 - '2019/2020' Influenza Season

Healthcare Personnel Category (Total)



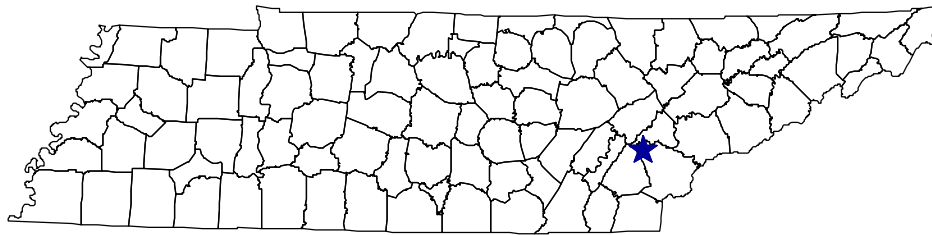
Healthcare Personnel Vaccinated (%)

■ 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, 01/01/2020-12/31/2020

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	209	N/A	N/A	0.91
	Adult/Pediatric Ward	0	0.0	115	N/A	N/A	0.65
CAUTI	Adult/Pediatric ICU	1	0.5	866	N/A	N/A	0.69
	Adult/Pediatric Ward	0	0.7	1281	N/A	N/A	0.68
SSI	Colon surgery	0	0.7	30	N/A	N/A	0.64
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	1.01
LabID	MRSA bacteremia	1	0.6	9823	N/A	N/A	1.23
	C. difficile infection	0	3.8	9327	0.00	(0.00, 0.78)	0.36

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 - '2020/2021' 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
2020	1	0	0.1	209	N/A
2019	1	0	0.1	186	N/A
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
2020	2	0	0.0	115	N/A
2019	2	0	0.0	133	N/A
2018	2	0	0.1	289	N/A
2017	2	0	0.2	379	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
2020	1	1	0.5	866	N/A
2019	1	0	0.5	841	N/A
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
2020	2	0	0.7	1281	N/A
2019	2	0	0.7	1317	N/A
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
2020	0	0.7	30	N/A
2019	0	0.4	23	N/A
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
2020	N/A	N/A	N/A	N/A
2019	N/A	N/A	N/A	N/A
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

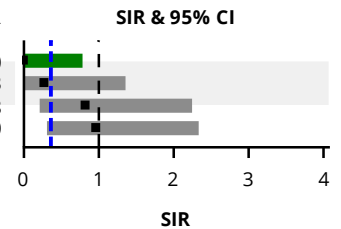
LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia

YR	OBS	PRE	PATD	SIR
2020	1	0.6	9823	N/A
2019	0	0.5	9780	N/A
2018	0	0.5	9544	N/A
2017	0	0.5	8963	N/A

N/A: Number of predicted infections <1; no SIR calculated

LabID - *C. difficile* Infection (CDI)

YR	OBS	PRE	PATD	SIR
2020	0	3.8	9327	0.0
2019	1	3.6	9276	0.3
2018	3	3.6	9123	0.8
2017	4	4.1	8604	1.0



Data reported as of June 30, 2021

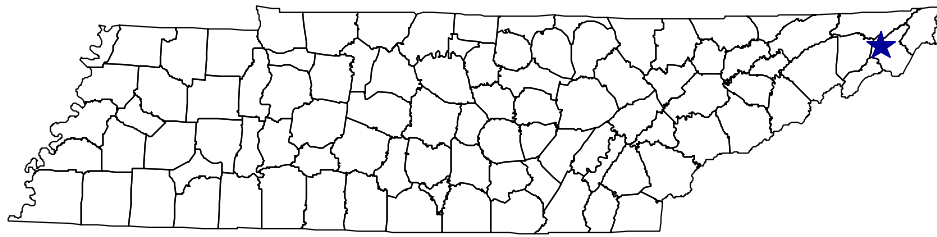
YR = reporting year; N = number of units reporting (CLABSI/CAUTI); OBS = observed number of infections
 PRE = statistically 'predicted' number of infections, based on NHSN national baseline data
 SIR = standardized infection ratio (observed/predicted number of infections)
 CLD = central line days; UCD = 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
 - - - 2020 TN SIR
 - - - NHSN SIR=1

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, 01/01/2019-12/31/2019

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	325	N/A	N/A	0.72
	Adult/Pediatric Ward	0	0.2	371	N/A	N/A	0.52
CAUTI	Adult/Pediatric ICU	0	0.8	1014	N/A	N/A	0.74
	Adult/Pediatric Ward	0	1.1	1525	0.00	(0.00, 2.64)	0.78
SSI	Colon surgery	0	0.5	23	N/A	N/A	0.94
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	0.80
LabID	MRSA bacteremia	0	0.7	15220	N/A	N/A	1.19
	C. difficile infection	4	6.7	15220	0.60	(0.19, 1.44)	0.47

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 - '2019/2020' Influenza Season

Healthcare Personnel Category (Total)

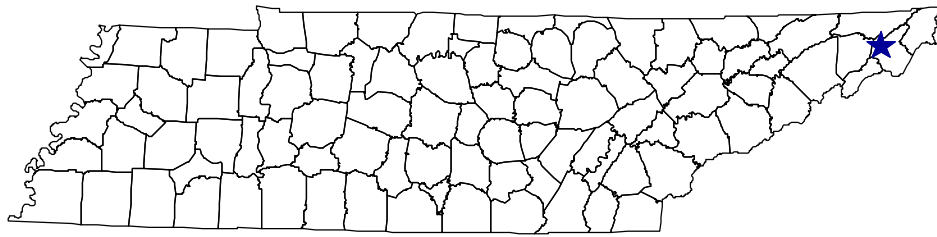


■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

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, 01/01/2020-12/31/2020

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	167	N/A	N/A	0.91
	Adult/Pediatric Ward	0	0.1	150	N/A	N/A	0.65
CAUTI	Adult/Pediatric ICU	0	0.5	635	N/A	N/A	0.69
	Adult/Pediatric Ward	1	0.6	909	N/A	N/A	0.68
SSI	Colon surgery	0	0.6	24	N/A	N/A	0.64
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	1.01
LabID	MRSA bacteremia	0	0.5	12272	N/A	N/A	1.23
	C. difficile infection	2	3.2	12272	0.61	(0.10, 2.02)	0.36

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 - '2020/2021' 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
2020	1	0	0.1	167	N/A
2019	1	0	0.2	325	N/A
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

CLABSI - Adult/Pediatric Wards

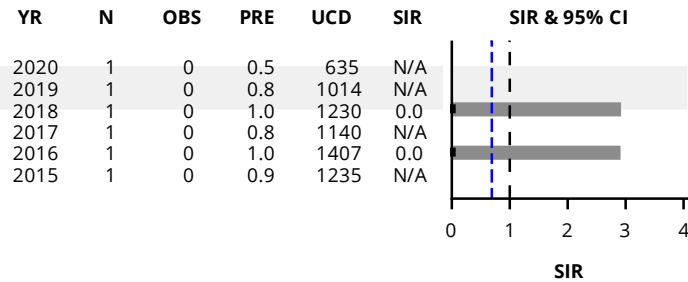
YR	N	OBS	PRE	CLD	SIR
2020	1	0	0.1	150	N/A
2019	1	0	0.2	371	N/A
2018	1	0	0.2	374	N/A
2017	1	0	0.2	324	N/A
2016	1	0	0.2	330	N/A
2015	1	0	0.2	436	N/A

N/A: Number of predicted infections <1; no SIR calculated

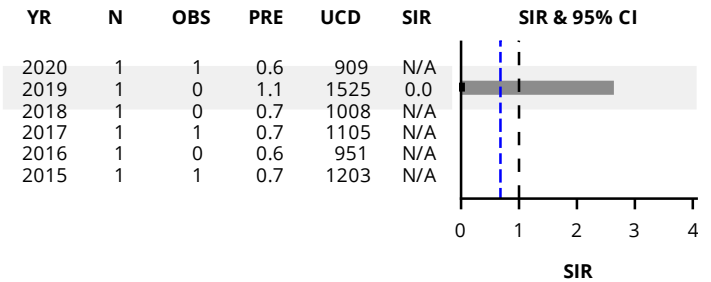
N/A: Number of predicted infections <1; no SIR calculated

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
2020	0	0.6	24	N/A
2019	0	0.5	23	N/A
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

SSI - Abdominal Hysterectomy

YR	OBS	PRE	PROC	SIR
2020	N/A	N/A	N/A	N/A
2019	N/A	N/A	N/A	N/A
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

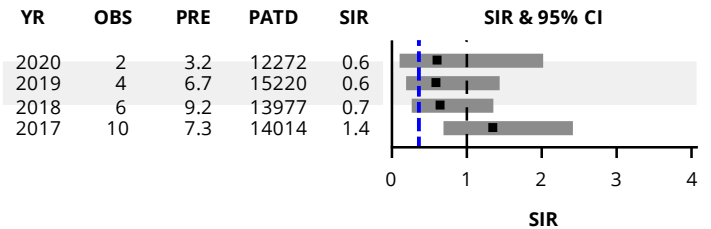
N/A: Number of predicted infections <1; no SIR calculated

Healthcare Facility-Onset Laboratory Identified (LabID) Events

LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia

YR	OBS	PRE	PATD	SIR
2020	0	0.5	12272	N/A
2019	0	0.7	15220	N/A
2018	3	0.6	13977	N/A
2017	0	0.5	14014	N/A

LabID - *C. difficile* Infection (CDI)



N/A: Number of predicted infections <1; no SIR calculated

Data reported as of June 30, 2021

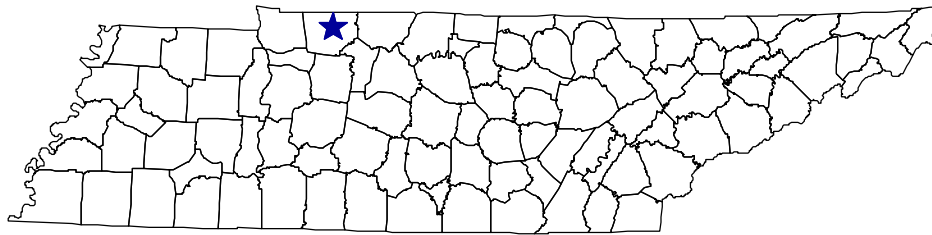
YR = reporting year; N = number of units reporting (CLABSI/CAUTI); OBS = observed number of infections
 PRE = statistically 'predicted' number of infections, based on NHSN national baseline data
 SIR = standardized infection ratio (observed/predicted number of infections)
 CLD = central line days; UCD = 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
 - - - 2020 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, 01/01/2019-12/31/2019

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	1.1	1315	2.63	(0.67, 7.16)	0.72
	Neonatal ICU	N/A	N/A	N/A	N/A	N/A	0.44
	Adult/Pediatric Ward	1	0.8	1102	N/A	N/A	0.52
CAUTI	Adult/Pediatric ICU	0	2.2	2484	0.00	(0.00, 1.35)	0.74
	Adult/Pediatric Ward	1	1.9	2352	0.50	(0.03, 2.48)	0.78
SSI	Colon surgery	1	1.8	81	0.55	(0.03, 2.69)	0.94
	Abdominal hysterectomy	1	0.7	131	N/A	N/A	0.80
LabID	MRSA bacteremia	2	1.6	42405	1.19	(0.20, 3.92)	1.19
	C. difficile infection	20	16.0	36793	1.25	(0.78, 1.89)	0.47

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

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

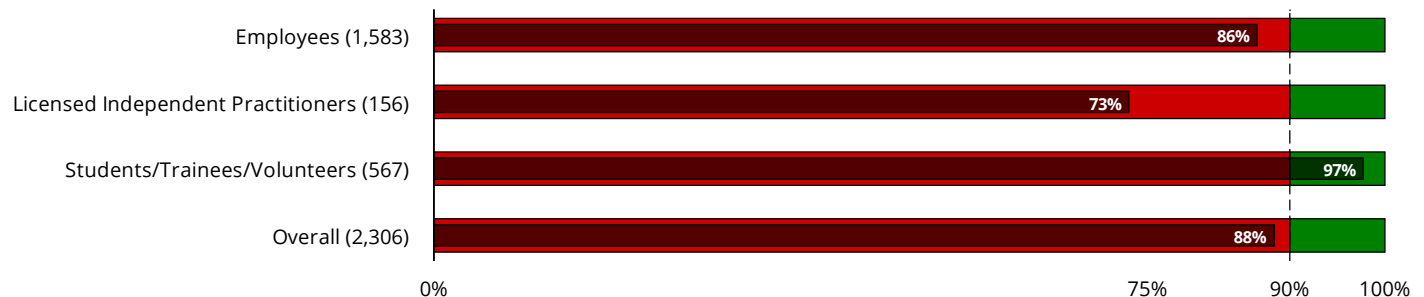
N/A: Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

*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 - '2019/2020' Influenza Season

Healthcare Personnel Category (Total)



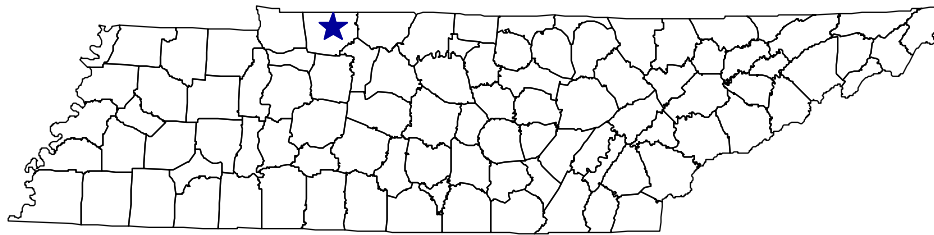
Healthcare Personnel Vaccinated (%)

■ 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, 01/01/2020-12/31/2020

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	2.1	2445	1.41	(0.36, 3.85)	0.91
	Neonatal ICU	N/A	N/A	N/A	N/A	N/A	0.62
	Adult/Pediatric Ward	2	0.7	999	N/A	N/A	0.65
CAUTI	Adult/Pediatric ICU	5	2.8	3218	1.74	(0.64, 3.85)	0.69
	Adult/Pediatric Ward	1	1.7	2180	0.56	(0.03, 2.75)	0.68
SSI	Colon surgery	3	2.0	92	1.43	(0.36, 3.90)	0.64
	Abdominal hysterectomy	0	0.6	104	N/A	N/A	1.01
LabID	MRSA bacteremia	0	1.9	44273	0.00	(0.00, 1.52)	1.23
	C. difficile infection	6	16.8	39352	0.36	(0.15, 0.74)	0.36

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

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

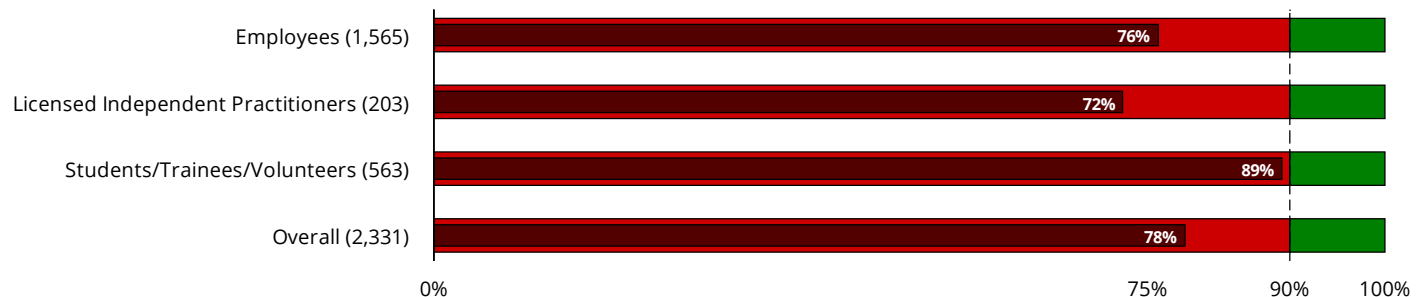
N/A: Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

*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 - '2020/2021' Influenza Season

Healthcare Personnel Category (Total)

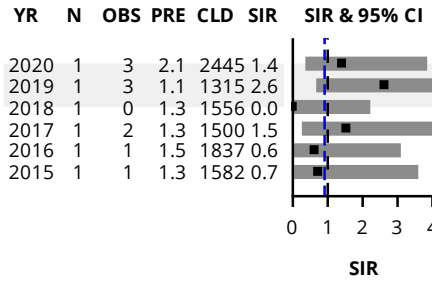


Healthcare Personnel Vaccinated (%)

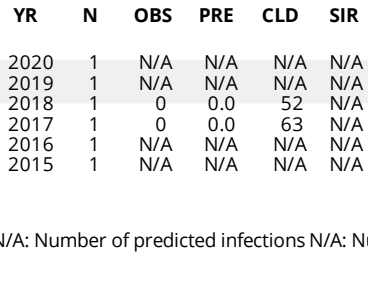
■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

Central Line-Associated Bloodstream Infections (CLABSI)

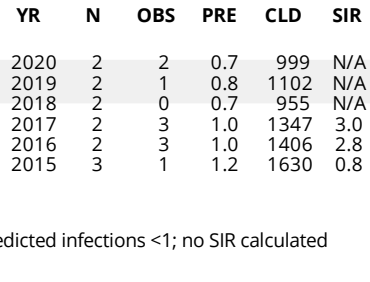
CLABSI - Adult/Pediatric ICUs



CLABSI - Neonatal ICUs

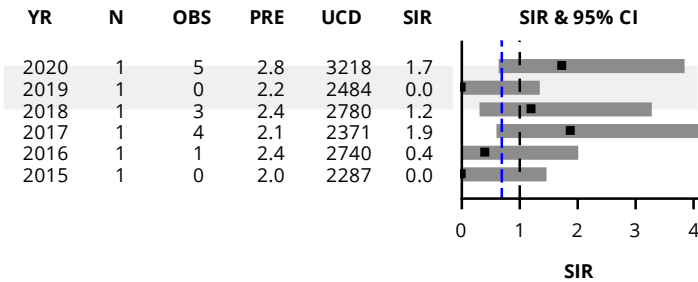


CLABSI - Adult/Pediatric Wards

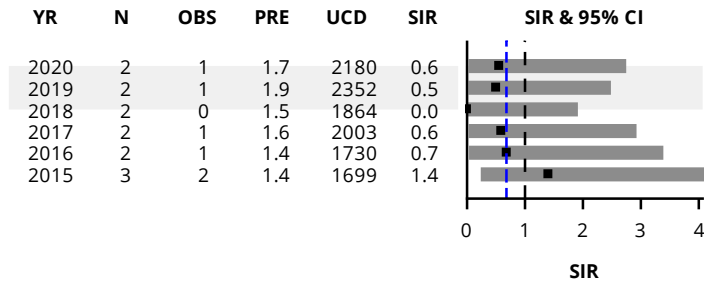


Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICUs

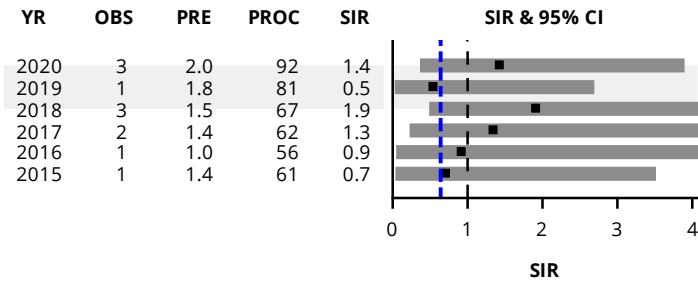


CAUTI - Adult/Pediatric Wards

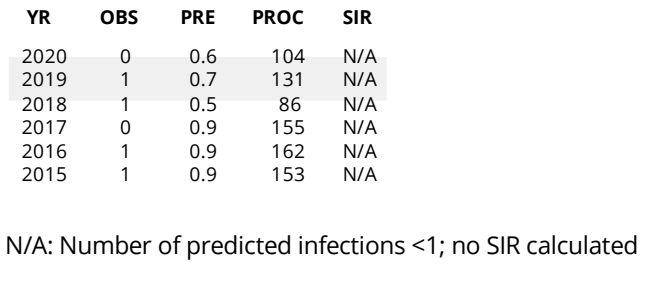


Surgical Site Infections (SSI)

SSI - Colon Surgery

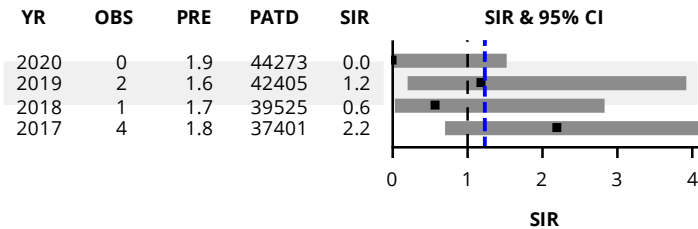


SSI - Abdominal Hysterectomy

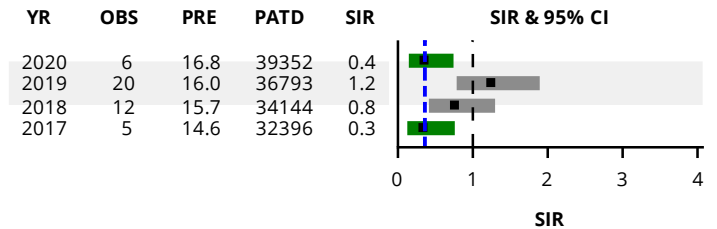


Healthcare Facility-Onset Laboratory Identified (LabID) Events

LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia



LabID - *C. difficile* Infection (CDI)



Data reported as of June 30, 2021

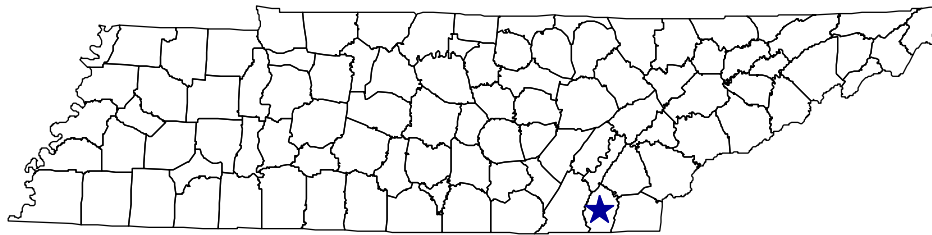
YR = reporting year; N = number of units reporting (CLABSI/CAUTI); OBS = observed number of infections
 PRE = statistically 'predicted' number of infections, based on NHSN national baseline data
 SIR = standardized infection ratio (observed/predicted number of infections)
 CLD = central line days; UCD = 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
 - - - 2020 TN SIR
 - - - NHSN SIR=1

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, 01/01/2019-12/31/2019

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	0.8	1105	N/A	N/A	0.72
	Adult/Pediatric Ward	0	0.5	814	N/A	N/A	0.52
CAUTI	Adult/Pediatric ICU	2	2.8	3286	0.71	(0.12, 2.33)	0.74
	Adult/Pediatric Ward	0	1.2	1880	0.00	(0.00, 2.32)	0.78
SSI	Colon surgery	0	1.8	73	0.00	(0.00, 1.62)	0.94
	Abdominal hysterectomy	0	0.3	55	N/A	N/A	0.80
LabID	MRSA bacteremia	7	2.7	46391	2.55	(1.11, 5.04)	1.19
	C. difficile infection	10	18.3	44256	0.55	(0.28, 0.97)	0.47

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

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

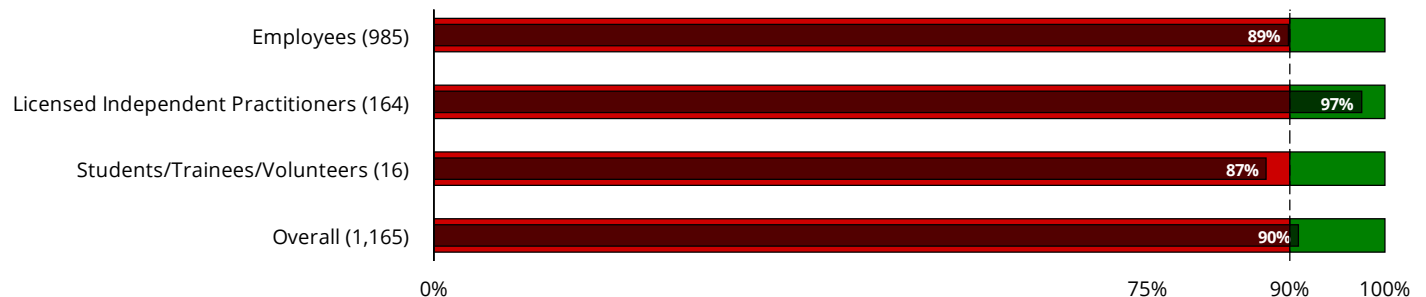
N/A: Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

*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 - '2019/2020' Influenza Season

Healthcare Personnel Category (Total)



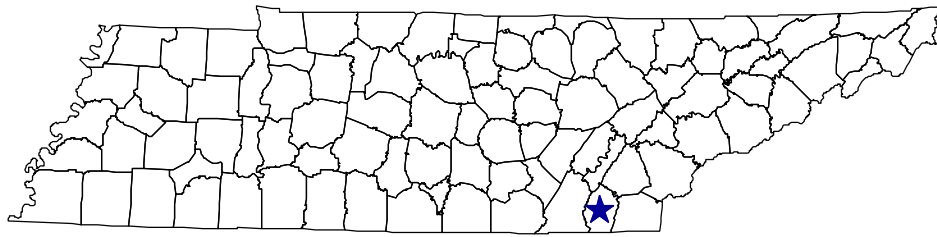
Healthcare Personnel Vaccinated (%)

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, 01/01/2020-12/31/2020

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	0.8	1185	N/A	N/A	0.91
	Adult/Pediatric Ward	0	0.2	388	N/A	N/A	0.65
CAUTI	Adult/Pediatric ICU	3	3.8	4495	0.78	(0.20, 2.12)	0.69
	Adult/Pediatric Ward	1	1.3	2032	0.72	(0.04, 3.53)	0.68
SSI	Colon surgery	0	2.4	101	0.00	(0.00, 1.22)	0.64
	Abdominal hysterectomy	0	0.1	25	N/A	N/A	1.01
LabID	MRSA bacteremia	8	2.8	48616	2.77	(1.29, 5.27)	1.23
	C. difficile infection	7	20.3	46634	0.34	(0.15, 0.68)	0.36

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

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

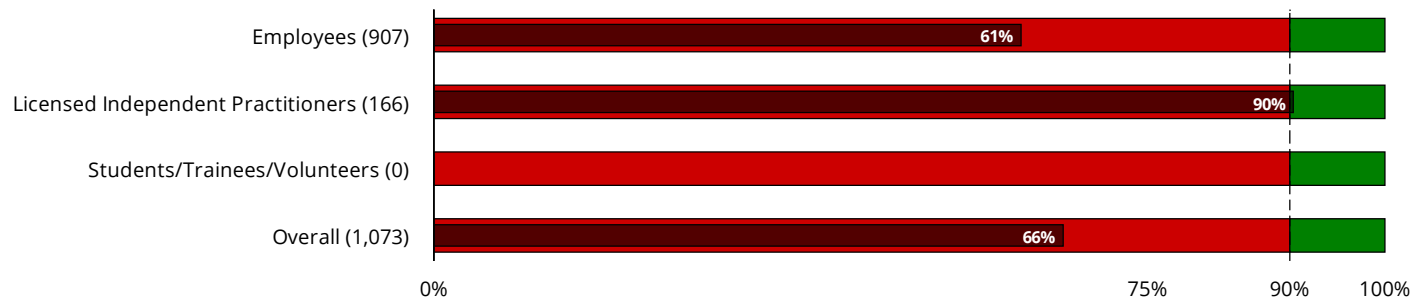
N/A: Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

*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 - '2020/2021' 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
2020	2	2	0.8	1185	N/A
2019	2	0	0.8	1105	N/A
2018	2	0	0.8	1139	N/A
2017	2	4	0.8	1184	N/A
2016	2	4	1.3	1759	3.0
2015	2	2	2.1	2447	0.9

CLABSI - Adult/Pediatric Wards

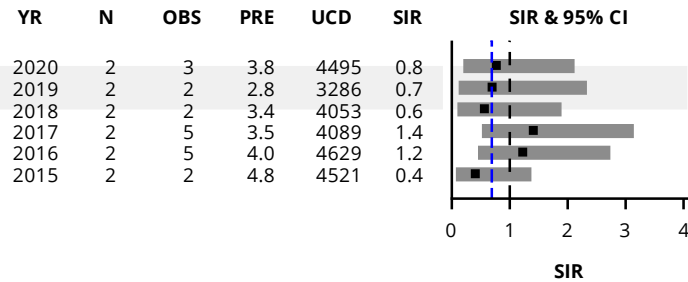
YR	N	OBS	PRE	CLD	SIR
2020	2	0	0.2	388	N/A
2019	2	0	0.5	814	N/A
2018	2	1	0.6	1049	N/A
2017	2	2	0.6	926	N/A
2016	2	2	1.0	1601	1.9
2015	2	1	1.1	1570	0.8

N/A: Number of predicted infections <1; no SIR calculated

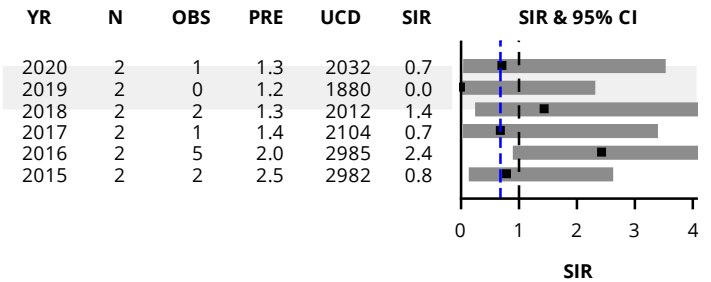
N/A: Number of predicted infections <1; no SIR calculated

Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICUs

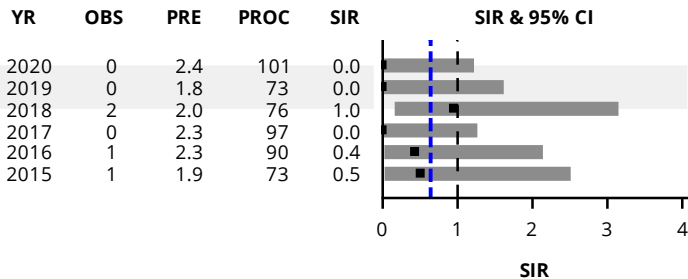


CAUTI - Adult/Pediatric Wards



Surgical Site Infections (SSI)

SSI - Colon Surgery



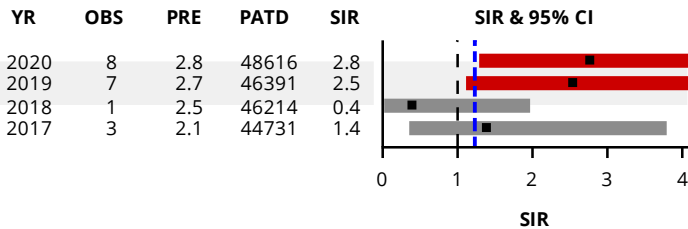
SSI - Abdominal Hysterectomy

YR	OBS	PRE	PROC	SIR
2020	0	0.1	25	N/A
2019	0	0.3	55	N/A
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

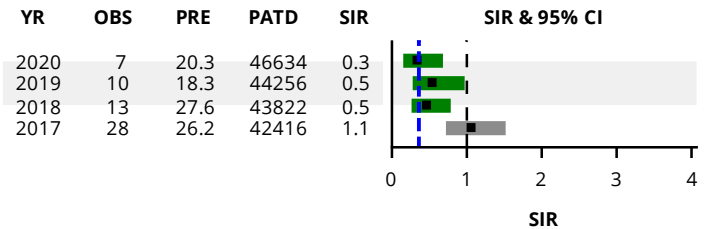
N/A: Number of predicted infections <1; no SIR calculated

Healthcare Facility-Onset Laboratory Identified (LabID) Events

LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia



LabID - *C. difficile* Infection (CDI)



Data reported as of June 30, 2021

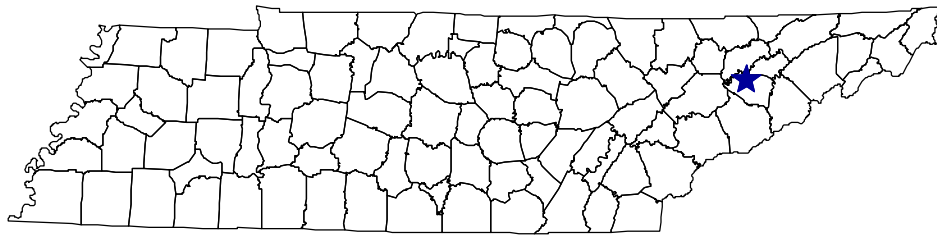
YR = reporting year; N = number of units reporting (CLABSI/CAUTI); OBS = observed number of infections
 PRE = statistically 'predicted' number of infections, based on NHSN national baseline data
 SIR = standardized infection ratio (observed/predicted number of infections)
 CLD = central line days; UCD = 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
 - - - 2020 TN SIR
 - - - NHSN SIR=1

Tennova Healthcare - Jefferson Memorial Hospital, Jefferson City, Jefferson County

Medical School Affiliation: Undergraduate teaching

Bed Size Category: 50-99 beds



Healthcare-Associated Infections (HAI) Summary

Standardized Infection Ratio (SIR) by Infection Type, 01/01/2019-12/31/2019

		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	0.2	322	N/A	N/A	0.72
	Adult/Pediatric Ward	0	0.3	567	N/A	N/A	0.52
CAUTI	Adult/Pediatric ICU	0	0.4	869	N/A	N/A	0.74
	Adult/Pediatric Ward	0	0.8	1692	N/A	N/A	0.78
SSI	Colon surgery	2	0.6	40	N/A	N/A	0.94
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	0.80
LabID	MRSA bacteremia	0	0.8	20483	N/A	N/A	1.19
	C. difficile infection	2	11.2	20483	0.18	(0.03, 0.59)	0.47

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

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

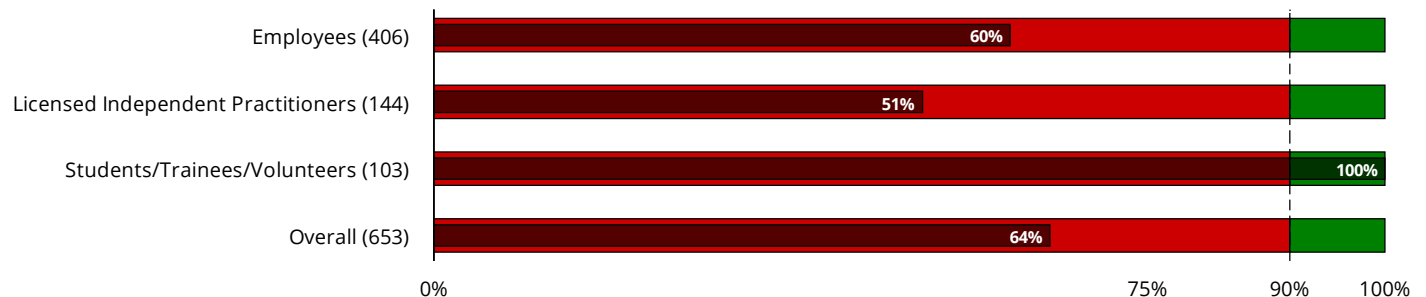
N/A: Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

*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 - '2019/2020' Influenza Season

Healthcare Personnel Category (Total)



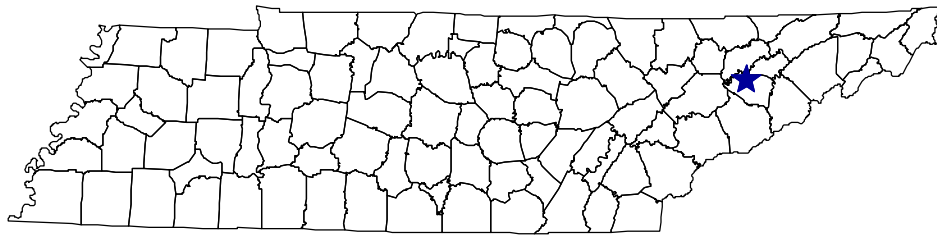
Healthcare Personnel Vaccinated (%)

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

Tennova Healthcare - Jefferson Memorial Hospital, Jefferson City, Jefferson County

Medical School Affiliation: Undergraduate teaching

Bed Size Category: 50-99 beds



Healthcare-Associated Infections (HAI) Summary

Standardized Infection Ratio (SIR) by Infection Type, 01/01/2020-12/31/2020

		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	282	N/A	N/A	0.91
	Adult/Pediatric Ward	0	0.2	416	N/A	N/A	0.65
CAUTI	Adult/Pediatric ICU	0	0.4	831	N/A	N/A	0.69
	Adult/Pediatric Ward	0	0.8	1803	N/A	N/A	0.68
SSI	Colon surgery	1	0.3	21	N/A	N/A	0.64
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	1.01
LabID	MRSA bacteremia	1	1.0	26766	0.92	(0.05, 4.54)	1.23
	C. difficile infection	0	12.8	26766	0.00	(0.00, 0.23)	0.36

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

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

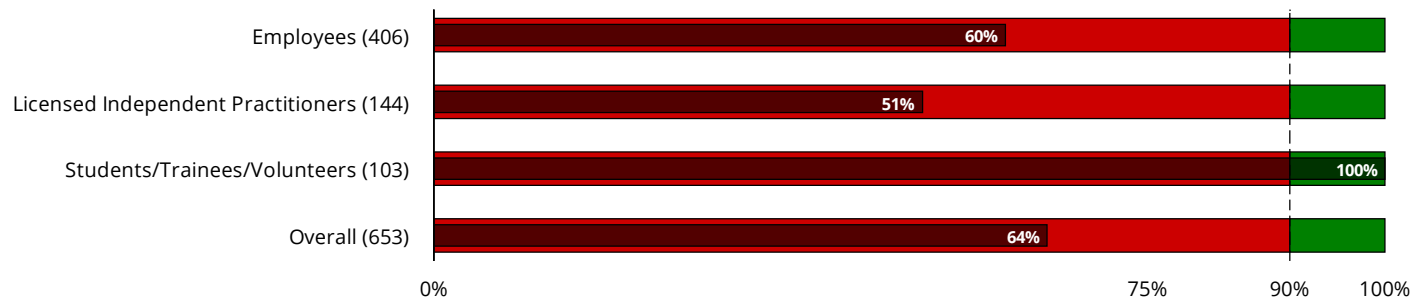
N/A: Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

*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 - '2020/2021' 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
2020	1	0	0.1	282	N/A
2019	1	0	0.2	322	N/A
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
2020	1	0	0.2	416	N/A
2019	1	0	0.3	567	N/A
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
2020	1	0	0.4	831	N/A
2019	1	0	0.4	869	N/A
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
2020	1	0	0.8	1803	N/A
2019	1	0	0.8	1692	N/A
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
2020	1	0.3	21	N/A
2019	2	0.6	40	N/A
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

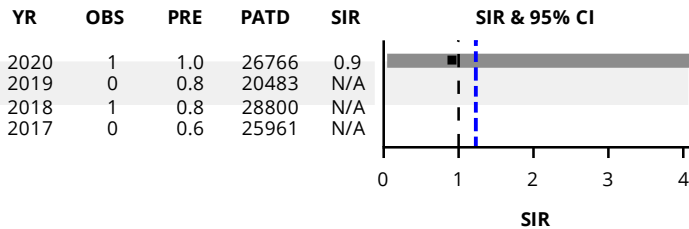
SSI - Abdominal Hysterectomy

YR	OBS	PRE	PROC	SIR
2020	N/A	N/A	N/A	N/A
2019	N/A	N/A	N/A	N/A
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

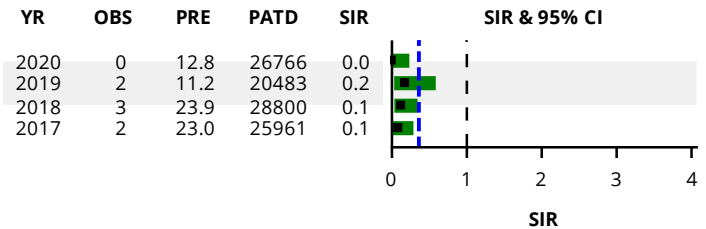
N/A: Number of predicted infections <1; no SIR calculated

Healthcare Facility-Onset Laboratory Identified (LabID) Events

LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia



LabID - *C. difficile* Infection (CDI)



Data reported as of June 30, 2021

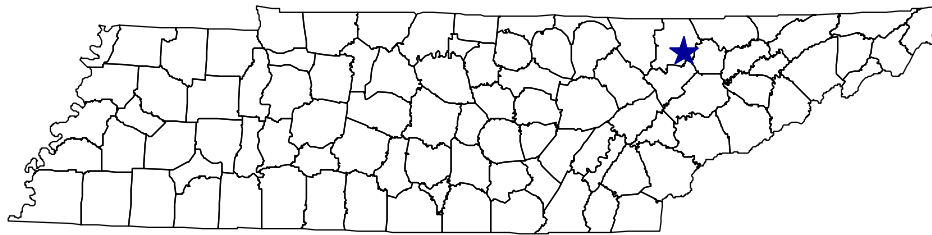
YR = reporting year; N = number of units reporting (CLABSI/CAUTI); OBS = observed number of infections
 PRE = statistically 'predicted' number of infections, based on NHSN national baseline data
 SIR = standardized infection ratio (observed/predicted number of infections)
 CLD = central line days; UCD = 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
 - - - 2020 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, 01/01/2019-12/31/2019

		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	N/A	N/A	N/A	N/A	N/A	0.72
	Adult/Pediatric Ward	N/A	N/A	N/A	N/A	N/A	0.52
CAUTI	Adult/Pediatric ICU	0	0.5	977	N/A	N/A	0.74
	Adult/Pediatric Ward	0	0.7	1496	N/A	N/A	0.78
SSI	Colon surgery	N/A	N/A	N/A	N/A	N/A	0.94
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	0.80
LabID	MRSA bacteremia	0	0.1	8375	N/A	N/A	1.19
	C. difficile infection	0	3.1	8375	0.00	(0.00, 0.94)	0.47

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 - '2019/2020' Influenza Season

Healthcare Personnel Category (Total)



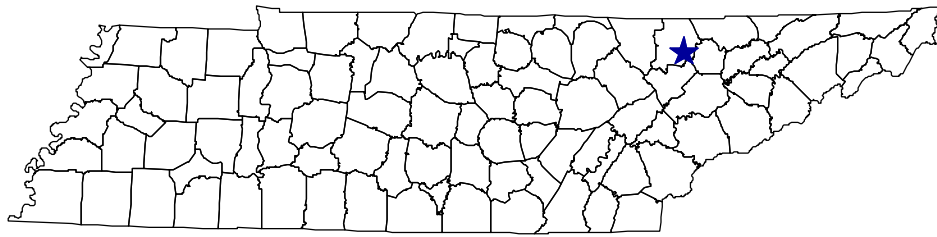
Healthcare Personnel Vaccinated (%)

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, 01/01/2020-12/31/2020

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	76	N/A	N/A	0.91
	Adult/Pediatric Ward	N/A	N/A	N/A	N/A	N/A	0.65
CAUTI	Adult/Pediatric ICU	0	0.5	929	N/A	N/A	0.69
	Adult/Pediatric Ward	0	0.6	1348	N/A	N/A	0.68
SSI	Colon surgery	N/A	N/A	N/A	N/A	N/A	0.64
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	1.01
LabID	MRSA bacteremia	0	0.1	10232	N/A	N/A	1.23
	C. difficile infection	0	3.9	10232	0.00	(0.00, 0.77)	0.36

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

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

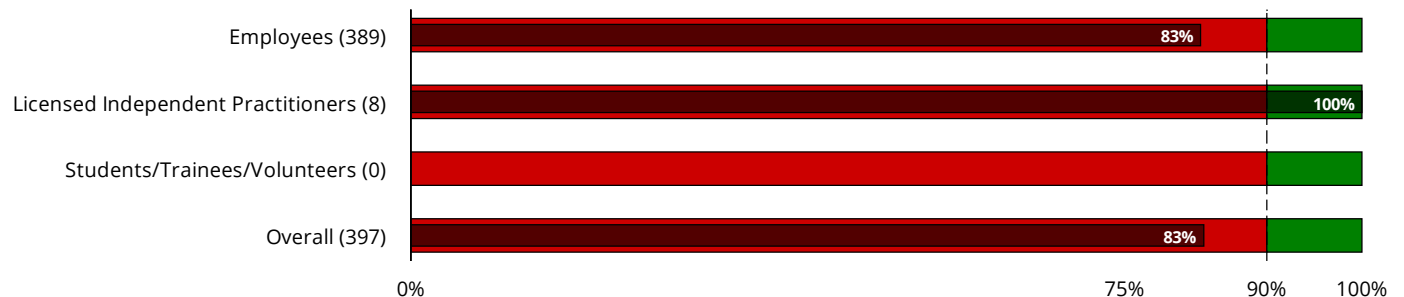
N/A: Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

*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 - '2020/2021' 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
2020	1	0	0.0	76	N/A
2019	1	N/A	N/A	N/A	N/A
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
2020	2	N/A	N/A	N/A	N/A
2019	2	N/A	N/A	N/A	N/A
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
2020	1	0	0.5	929	N/A
2019	1	0	0.5	977	N/A
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

YR	N	OBS	PRE	UCD	SIR
2020	2	0	0.6	1348	N/A
2019	2	0	0.7	1496	N/A
2018	2	0	0.8	1605	N/A
2017	2	0	0.9	1796	N/A
2016	2	0	1.2	2135	0.0
2015	2	0	1.0	1978	0.0

N/A: Number of predicted infections <1; no SIR calculated

Surgical Site Infections (SSI)

SSI - Colon Surgery

YR	OBS	PRE	PROC	SIR
2020	N/A	N/A	N/A	N/A
2019	N/A	N/A	N/A	N/A
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
2020	N/A	N/A	N/A	N/A
2019	N/A	N/A	N/A	N/A
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
2020	0	0.1	10232	N/A
2019	0	0.1	8375	N/A
2018	0	0.2	9232	N/A
2017	0	0.1	10269	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
2020	0	3.9	10232	0.0	
2019	0	3.1	8375	0.0	
2018	0	3.5	9232	0.0	
2017	0	3.9	10269	0.0	

Data reported as of June 30, 2021

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

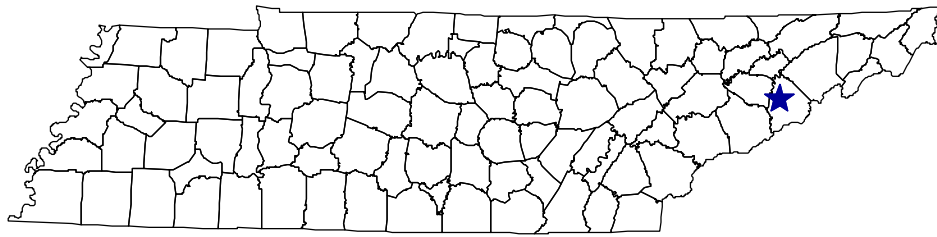
--- 2020 TN SIR

--- 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, 01/01/2019-12/31/2019

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	362	N/A	N/A	0.72
	Adult/Pediatric Ward	0	0.5	994	N/A	N/A	0.52
CAUTI	Adult/Pediatric ICU	0	0.4	802	N/A	N/A	0.74
	Adult/Pediatric Ward	0	0.7	1290	N/A	N/A	0.78
SSI	Colon surgery	N/A	N/A	N/A	N/A	N/A	0.94
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	0.80
LabID	MRSA bacteremia	0	0.3	7619	N/A	N/A	1.19
	C. difficile infection	4	4.9	7222	0.80	(0.25, 1.93)	0.47

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

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

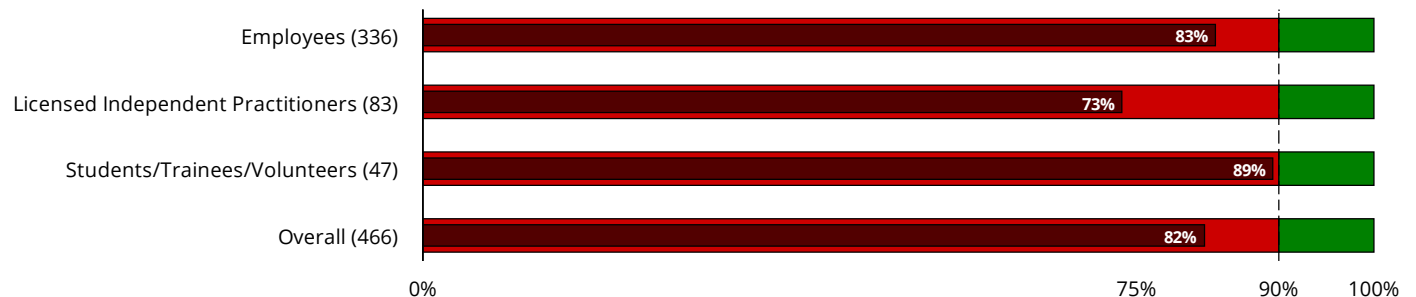
N/A: Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

*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 - '2019/2020' Influenza Season

Healthcare Personnel Category (Total)



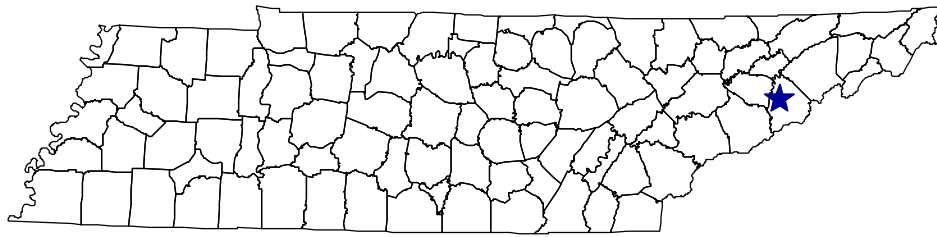
Healthcare Personnel Vaccinated (%)

■ 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, 01/01/2020-12/31/2020

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	530	N/A	N/A	0.91
	Adult/Pediatric Ward	0	0.7	1250	N/A	N/A	0.65
CAUTI	Adult/Pediatric ICU	0	0.4	780	N/A	N/A	0.69
	Adult/Pediatric Ward	0	1.0	1871	0.00	(0.00, 2.94)	0.68
SSI	Colon surgery	N/A	N/A	N/A	N/A	N/A	0.64
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	1.01
LabID	MRSA bacteremia	3	0.5	9301	N/A	N/A	1.23
	C. difficile infection	2	5.4	8834	0.37	(0.06, 1.21)	0.36

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

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

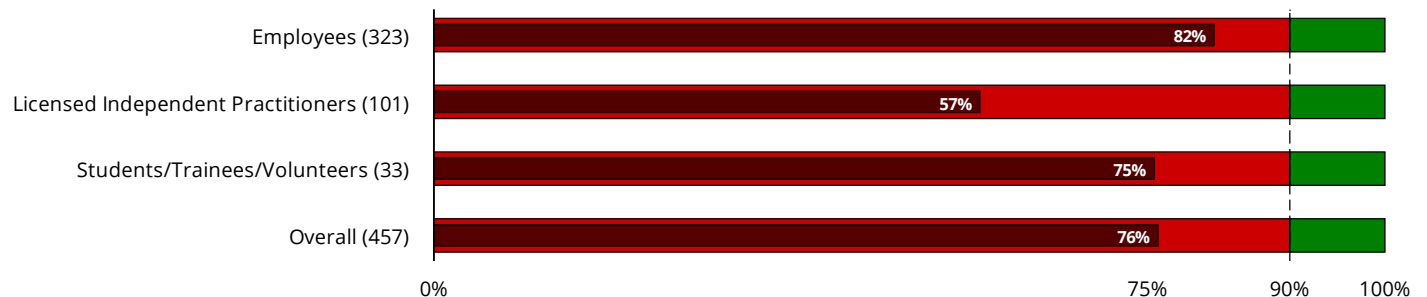
N/A: Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

*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 - '2020/2021' 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
2020	1	0	0.3	530	N/A
2019	1	0	0.2	362	N/A
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
2020	1	0	0.7	1250	N/A
2019	1	0	0.5	994	N/A
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
2020	1	0	0.4	780	N/A
2019	1	0	0.4	802	N/A
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	SIR & 95% CI
2020	1	0	1.0	1871	0.0	
2019	1	0	0.7	1290	N/A	
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
2020	N/A	N/A	N/A	N/A
2019	N/A	N/A	N/A	N/A
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
2020	N/A	N/A	N/A	N/A
2019	N/A	N/A	N/A	N/A
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
2020	3	0.5	9301	N/A
2019	0	0.3	7619	N/A
2018	0	0.1	6241	N/A
2017	0	0.1	5724	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
2020	2	5.4	8834	0.4	
2019	4	4.9	7222	0.8	
2018	4	4.4	5944	0.9	
2017	1	3.3	5427	0.3	

N/A: Number of predicted infections <1; no SIR calculated

Data reported as of June 30, 2021

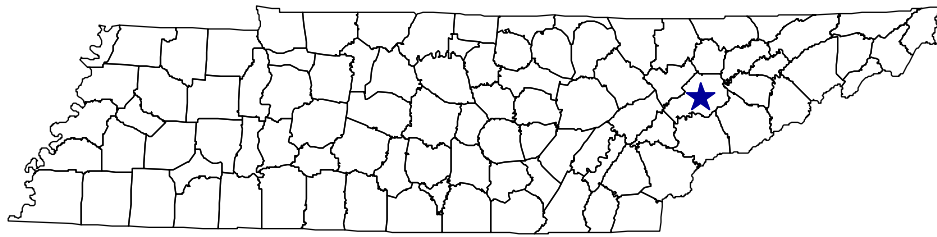
YR = reporting year; N = number of units reporting (CLABSI/CAUTI); OBS = observed number of infections
 PRE = statistically 'predicted' number of infections, based on NHSN national baseline data
 SIR = standardized infection ratio (observed/predicted number of infections)
 CLD = central line days; UCD = 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
 - - - 2020 TN SIR
 - - - NHSN SIR=1

Tennova Healthcare - North Knoxville Medical Center, Knoxville, Knox County

Medical School Affiliation: Undergraduate teaching

Bed Size Category: 100-399 beds



Healthcare-Associated Infections (HAI) Summary

Standardized Infection Ratio (SIR) by Infection Type, 01/01/2019-12/31/2019

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	1.7	2375	1.68	(0.43, 4.56)	0.72
	Adult/Pediatric Ward	0	1.6	2495	0.00	(0.00, 1.84)	0.52
CAUTI	Adult/Pediatric ICU	2	1.8	2579	1.06	(0.18, 3.50)	0.74
	Adult/Pediatric Ward	0	1.5	2182	0.00	(0.00, 1.98)	0.78
SSI	Colon surgery	0	2.8	132	0.00	(0.00, 1.06)	0.94
	Abdominal hysterectomy	0	0.3	69	N/A	N/A	0.80
LabID	MRSA bacteremia	5	1.8	35222	2.69	(0.99, 5.96)	1.19
	C. difficile infection	1	18.5	35222	0.05	(0.00, 0.27)	0.47

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

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

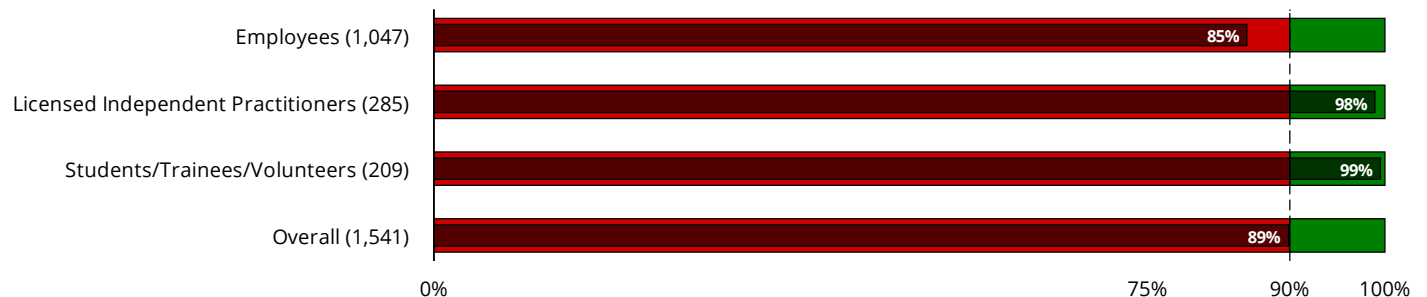
N/A: Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

*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 - '2019/2020' Influenza Season

Healthcare Personnel Category (Total)



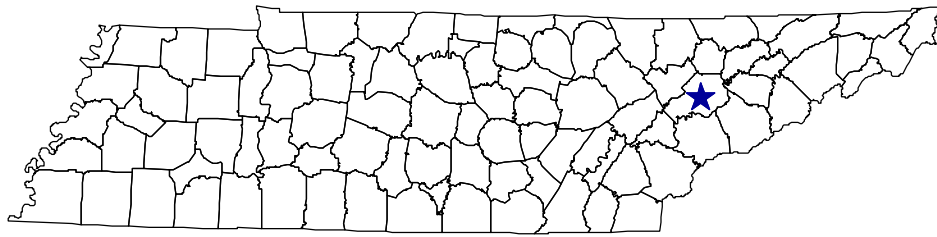
Healthcare Personnel Vaccinated (%)

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

Tennova Healthcare - North Knoxville Medical Center, Knoxville, Knox County

Medical School Affiliation: Undergraduate teaching

Bed Size Category: 100-399 beds



Healthcare-Associated Infections (HAI) Summary

Standardized Infection Ratio (SIR) by Infection Type, 01/01/2020-12/31/2020

		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	2.0	2755	0.00	(0.00, 1.44)	0.91
	Adult/Pediatric Ward	0	1.4	2296	0.00	(0.00, 2.00)	0.65
CAUTI	Adult/Pediatric ICU	1	2.3	3225	0.42	(0.02, 2.09)	0.69
	Adult/Pediatric Ward	0	1.7	2567	0.00	(0.00, 1.67)	0.68
SSI	Colon surgery	0	0.6	32	N/A	N/A	0.64
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	1.01
LabID	MRSA bacteremia	0	2.1	34208	0.00	(0.00, 1.40)	1.23
	C. difficile infection	1	19.0	34106	0.05	(0.00, 0.26)	0.36

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

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

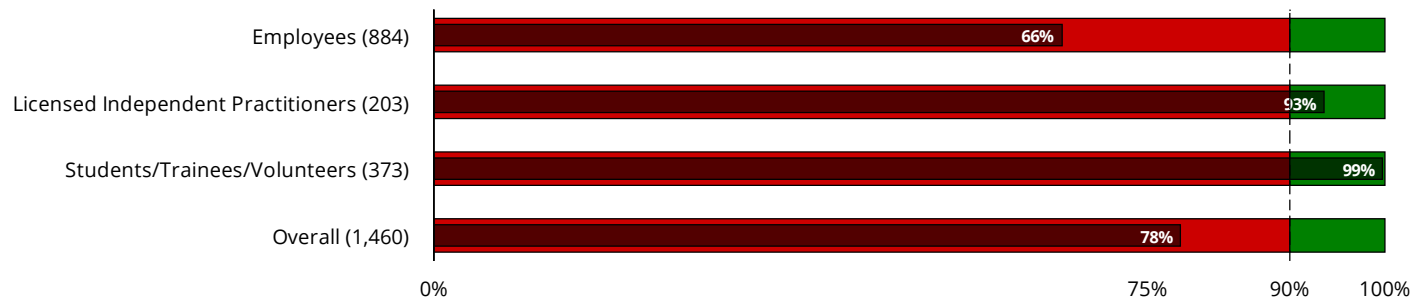
N/A: Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

*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 - '2020/2021' Influenza Season

Healthcare Personnel Category (Total)

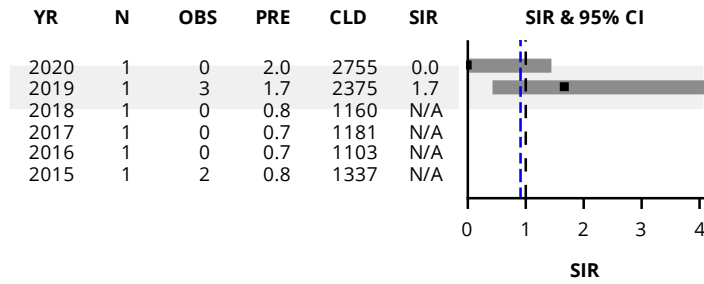


Healthcare Personnel Vaccinated (%)

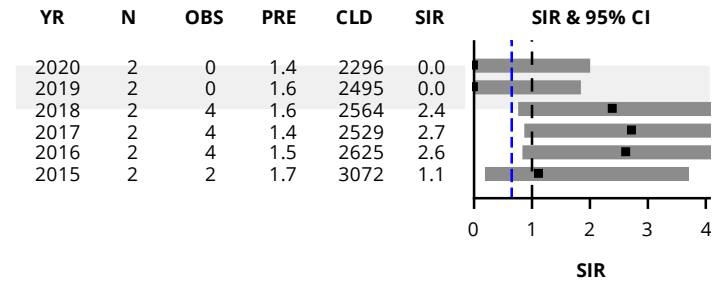
■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric ICUs

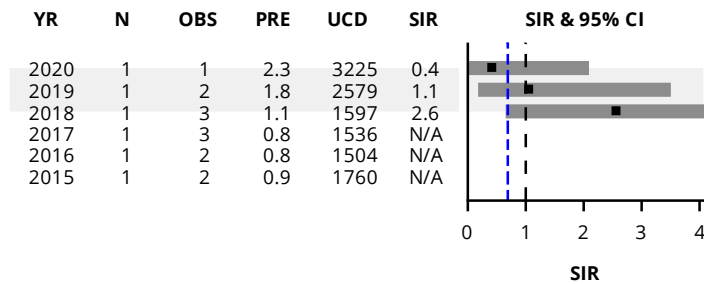


CLABSI - Adult/Pediatric Wards

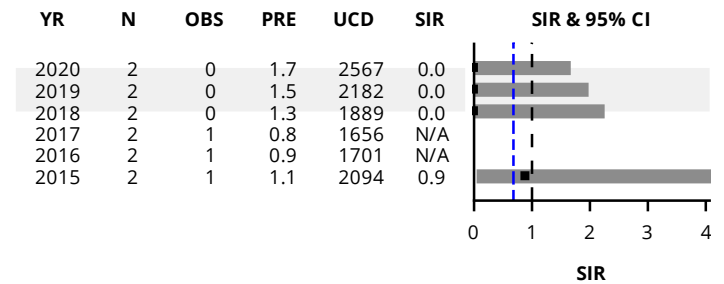


Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICUs

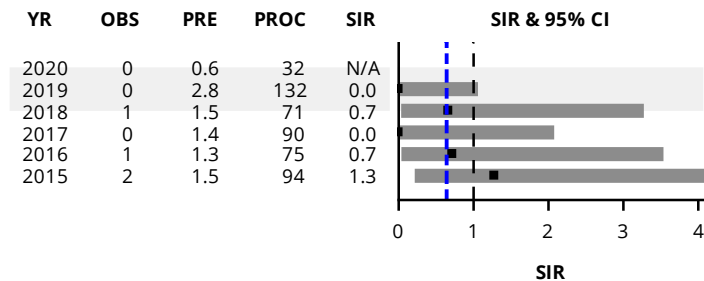


CAUTI - Adult/Pediatric Wards

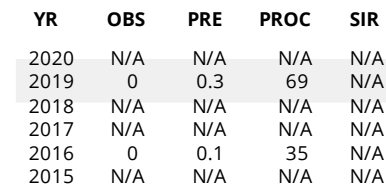


Surgical Site Infections (SSI)

SSI - Colon Surgery



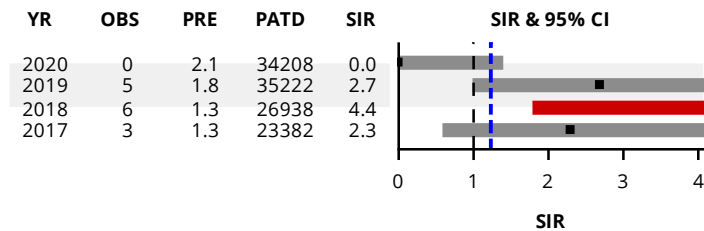
SSI - Abdominal Hysterectomy



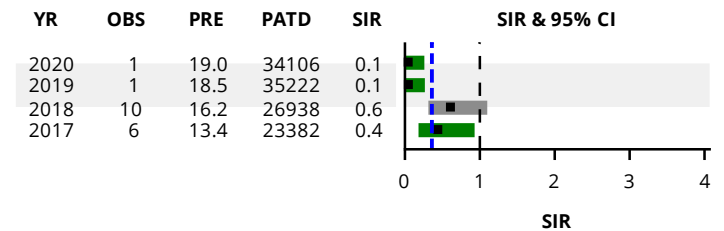
N/A: Number of predicted infections <1; no SIR calculated

Healthcare Facility-Onset Laboratory Identified (LabID) Events

LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia



LabID - *C. difficile* Infection (CDI)



Data reported as of June 30, 2021

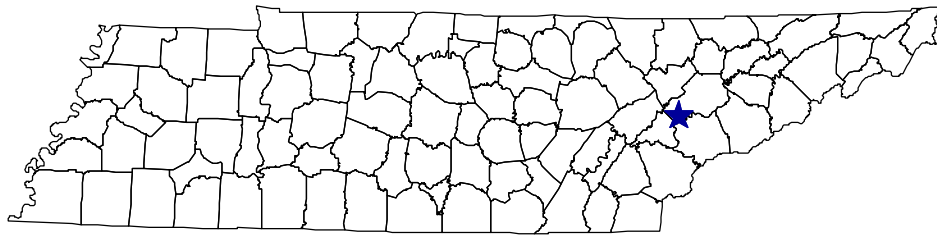
YR = reporting year; N = number of units reporting (CLABSI/CAUTI); OBS = observed number of infections
 PRE = statistically 'predicted' number of infections, based on NHSN national baseline data
 SIR = standardized infection ratio (observed/predicted number of infections)
 CLD = central line days; UCD = 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
 - - - 2020 TN SIR
 - - - NHSN SIR=1

Tennova Healthcare - Turkey Creek Medical Center, Knoxville, Knox County

Medical School Affiliation: Undergraduate teaching

Bed Size Category: 100-399 beds



Healthcare-Associated Infections (HAI) Summary

Standardized Infection Ratio (SIR) by Infection Type, 01/01/2019-12/31/2019

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	1.7	2313	0.57	(0.03, 2.83)	0.72
	Adult/Pediatric Ward	0	1.2	1923	0.00	(0.00, 2.39)	0.52
CAUTI	Adult/Pediatric ICU	1	2.1	2868	0.48	(0.02, 2.35)	0.74
	Adult/Pediatric Ward	0	1.2	1860	0.00	(0.00, 2.47)	0.78
SSI	Colon surgery	3	4.3	178	0.69	(0.18, 1.87)	0.94
	Abdominal hysterectomy	1	0.4	85	N/A	N/A	0.80
LabID	MRSA bacteremia	2	2.0	31199	1.00	(0.17, 3.29)	1.19
	C. difficile infection	4	18.4	31199	0.22	(0.07, 0.52)	0.47

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

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

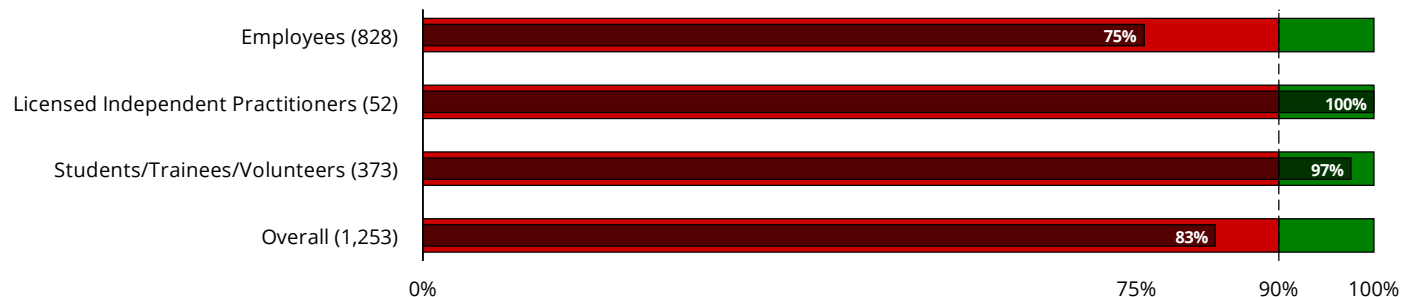
N/A: Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

*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 - '2019/2020' Influenza Season

Healthcare Personnel Category (Total)



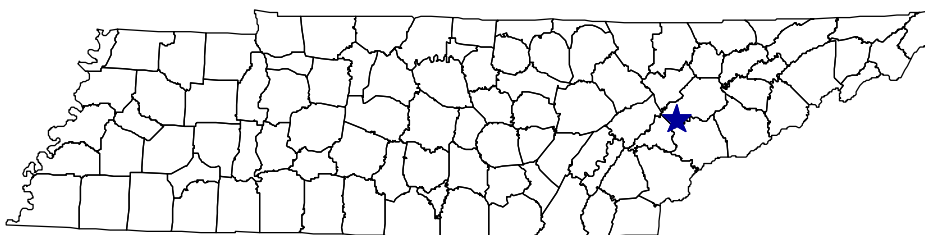
Healthcare Personnel Vaccinated (%)

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

Tennova Healthcare - Turkey Creek Medical Center, Knoxville, Knox County

Medical School Affiliation: Undergraduate teaching

Bed Size Category: 100-399 beds



Healthcare-Associated Infections (HAI) Summary

Standardized Infection Ratio (SIR) by Infection Type, 01/01/2020-12/31/2020

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	2.1	2826	0.94	(0.16, 3.10)	0.91
	Adult/Pediatric Ward	0	0.9	1502	N/A	N/A	0.65
CAUTI	Adult/Pediatric ICU	1	2.6	3609	0.38	(0.02, 1.87)	0.69
	Adult/Pediatric Ward	0	1.1	1744	0.00	(0.00, 2.63)	0.68
SSI	Colon surgery	0	2.9	121	0.00	(0.00, 1.03)	0.64
	Abdominal hysterectomy	0	0.2	64	N/A	N/A	1.01
LabID	MRSA bacteremia	3	1.7	29355	1.75	(0.45, 4.77)	1.23
	C. difficile infection	2	17.7	29355	0.11	(0.02, 0.37)	0.36

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

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

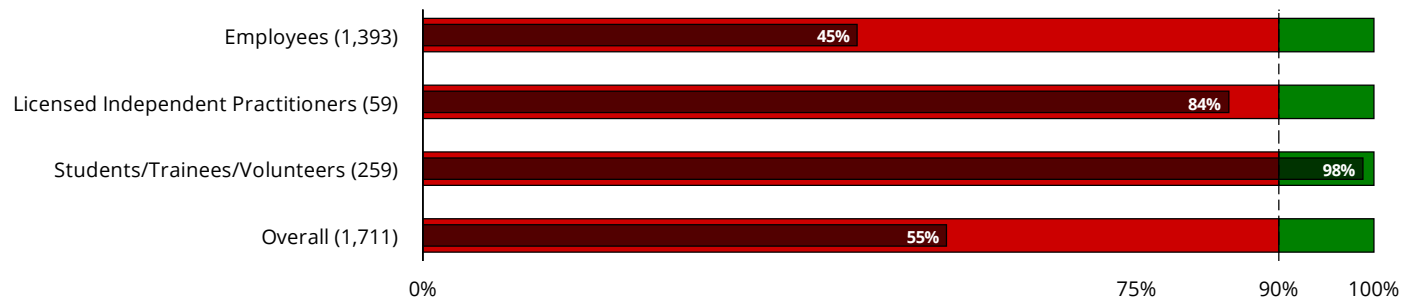
N/A: Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

*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 - '2020/2021' Influenza Season

Healthcare Personnel Category (Total)

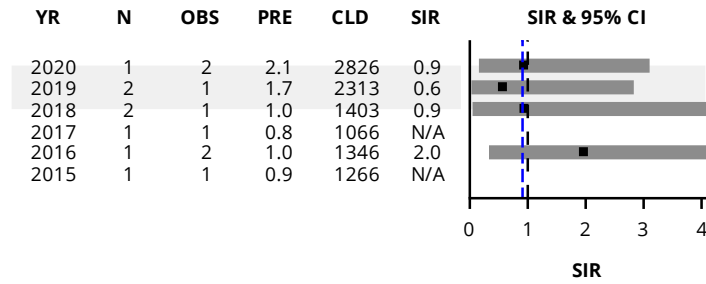


Healthcare Personnel Vaccinated (%)

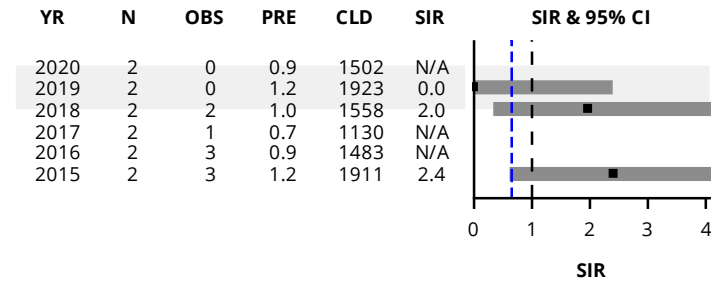
Below 90% >90% (HHS Healthy People 2020 Goal)

Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric ICUs

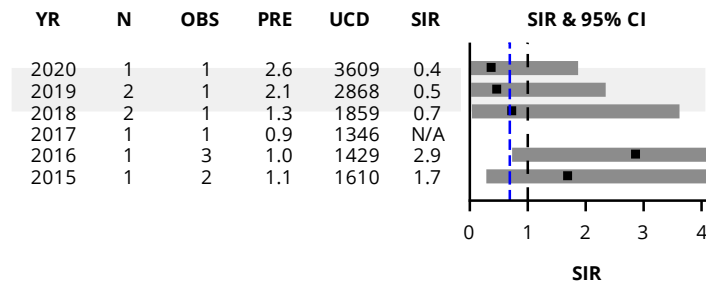


CLABSI - Adult/Pediatric Wards

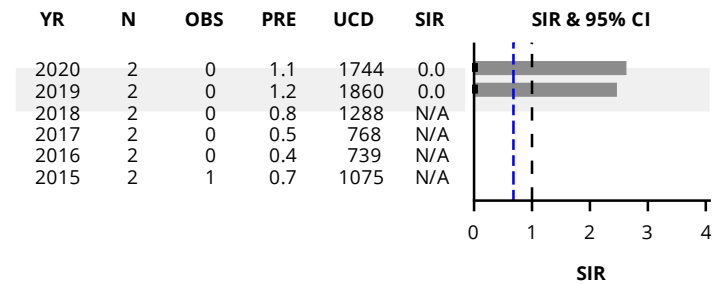


Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICUs

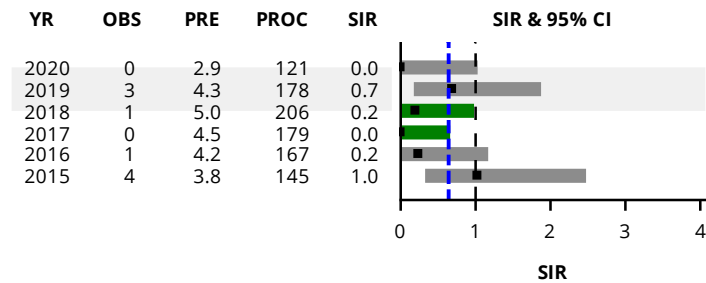


CAUTI - Adult/Pediatric Wards

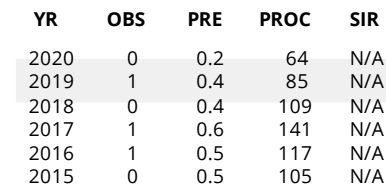


Surgical Site Infections (SSI)

SSI - Colon Surgery



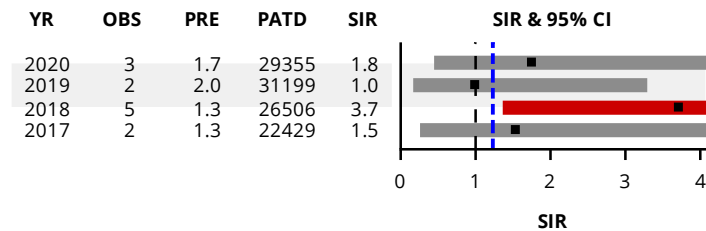
SSI - Abdominal Hysterectomy



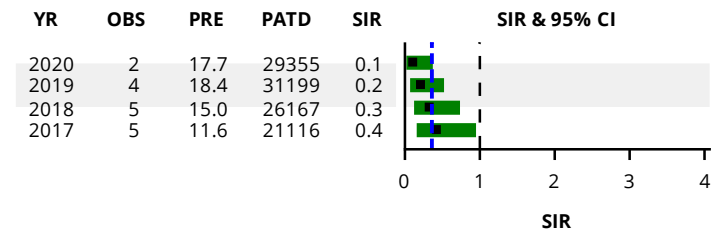
N/A: Number of predicted infections <1; no SIR calculated

Healthcare Facility-Onset Laboratory Identified (LabID) Events

LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia



LabID - *C. difficile* Infection (CDI)



Data reported as of June 30, 2021

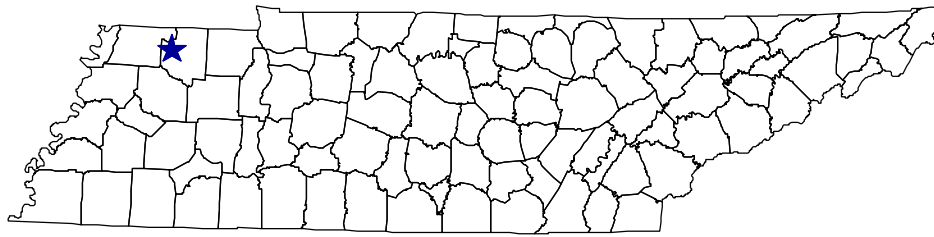
YR = reporting year; N = number of units reporting (CLABSI/CAUTI); OBS = observed number of infections
 PRE = statistically 'predicted' number of infections, based on NHSN national baseline data
 SIR = standardized infection ratio (observed/predicted number of infections)
 CLD = central line days; UCD = 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
 - - - 2020 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, 01/01/2019-12/31/2019

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	99	N/A	N/A	0.72
	Adult/Pediatric Ward	0	0.0	130	N/A	N/A	0.52
CAUTI	Adult/Pediatric ICU	0	0.2	422	N/A	N/A	0.74
	Adult/Pediatric Ward	0	0.3	739	N/A	N/A	0.78
SSI	Colon surgery	N/A	N/A	N/A	N/A	N/A	0.94
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	0.80
LabID	MRSA bacteremia	0	0.0	4076	N/A	N/A	1.19
	C. difficile infection	0	1.8	3918	0.00	(0.00, 1.64)	0.47

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

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

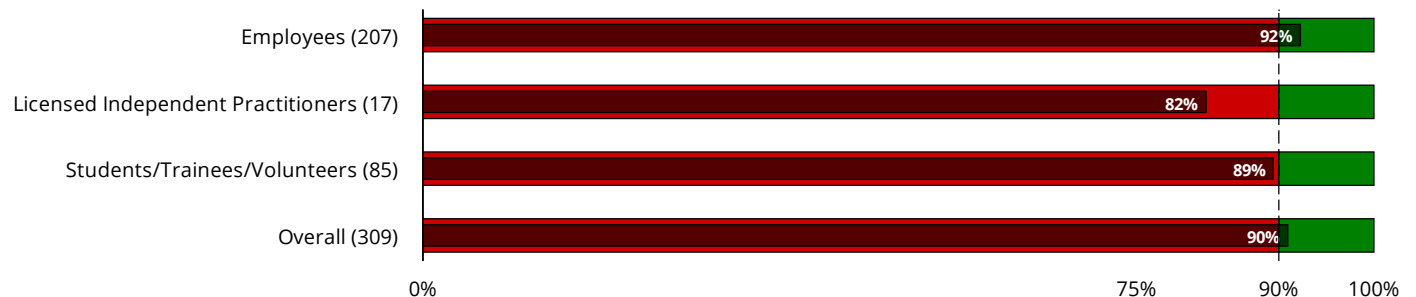
N/A: Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

*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 - '2019/2020' Influenza Season

Healthcare Personnel Category (Total)



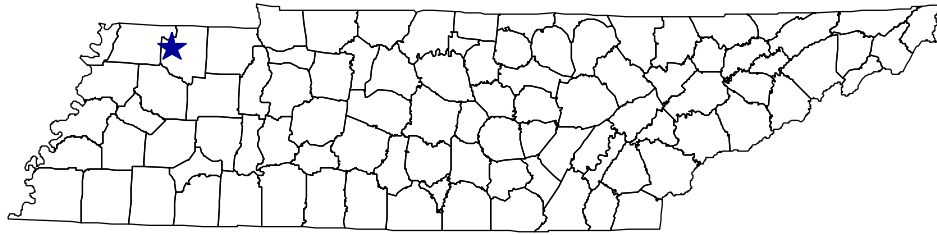
Healthcare Personnel Vaccinated (%)

■ 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, 01/01/2020-12/31/2020

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	110	N/A	N/A	0.91
	Adult/Pediatric Ward	0	0.0	131	N/A	N/A	0.65
CAUTI	Adult/Pediatric ICU	0	0.2	382	N/A	N/A	0.69
	Adult/Pediatric Ward	0	0.2	506	N/A	N/A	0.68
SSI	Colon surgery	N/A	N/A	N/A	N/A	N/A	0.64
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	1.01
LabID	MRSA bacteremia	0	0.0	3319	N/A	N/A	1.23
	C. difficile infection	0	1.0	3061	0.00	(0.00, 2.99)	0.36

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

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

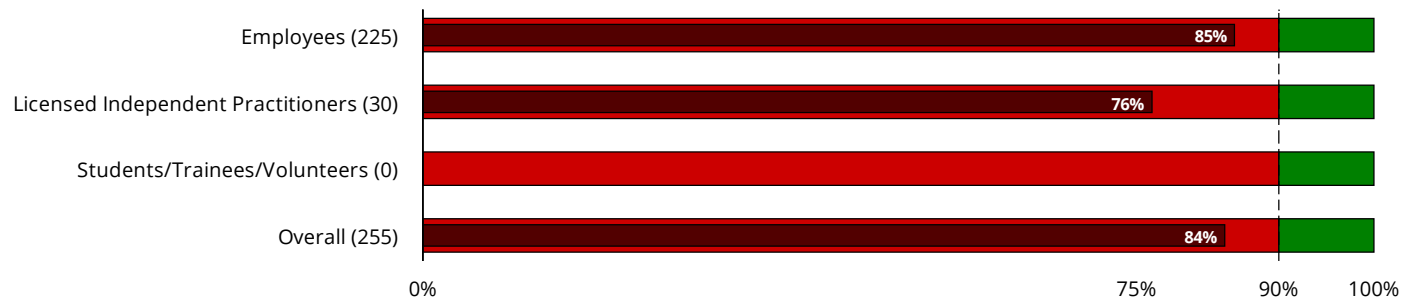
N/A: Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

*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 - '2020/2021' 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
2020	1	0	0.0	110	N/A
2019	1	0	0.0	99	N/A
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
2020	1	0	0.0	131	N/A
2019	1	0	0.0	130	N/A
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
2020	1	0	0.2	382	N/A
2019	1	0	0.2	422	N/A
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
2020	1	0	0.2	506	N/A
2019	1	0	0.3	739	N/A
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
2020	N/A	N/A	N/A	N/A
2019	N/A	N/A	N/A	N/A
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
2020	N/A	N/A	N/A	N/A
2019	N/A	N/A	N/A	N/A
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

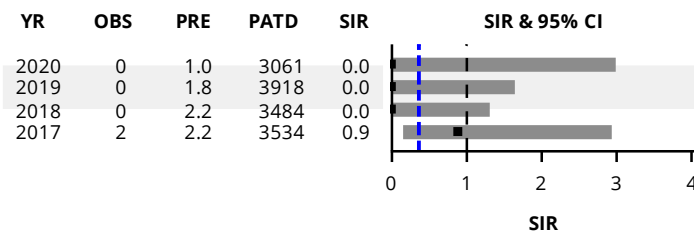
Healthcare Facility-Onset Laboratory Identified (LabID) Events

LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia

YR	OBS	PRE	PATD	SIR
2020	0	0.0	3319	N/A
2019	0	0.0	4076	N/A
2018	0	0.0	3484	N/A
2017	0	0.0	3534	N/A

N/A: Number of predicted infections <1; no SIR calculated

LabID - *C. difficile* Infection (CDI)



Data reported as of June 30, 2021

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

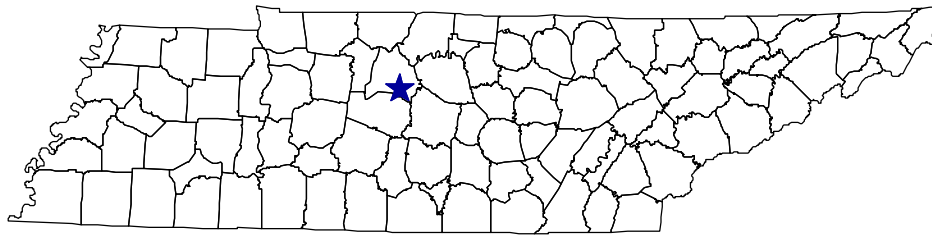
--- 2020 TN SIR

--- NHSN SIR=1

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, 01/01/2019-12/31/2019

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	1.0	1188	0.00	(0.00, 2.88)	0.72
	Adult/Pediatric Ward	1	0.9	1229	N/A	N/A	0.52
CAUTI	Adult/Pediatric ICU	1	1.8	1730	0.55	(0.03, 2.72)	0.74
	Adult/Pediatric Ward	2	1.1	1455	1.77	(0.30, 5.86)	0.78
SSI	Colon surgery	1	1.3	54	0.72	(0.04, 3.53)	0.94
	Abdominal hysterectomy	0	0.1	38	N/A	N/A	0.80
LabID	MRSA bacteremia	1	1.2	21906	0.79	(0.04, 3.90)	1.19
	C. difficile infection	1	9.4	21906	0.11	(0.01, 0.52)	0.47

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

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

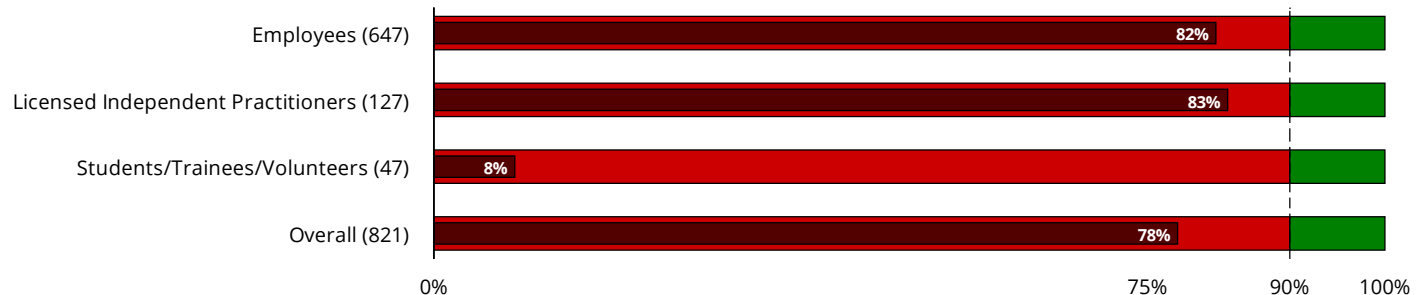
N/A: Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

*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 - '2019/2020' Influenza Season

Healthcare Personnel Category (Total)



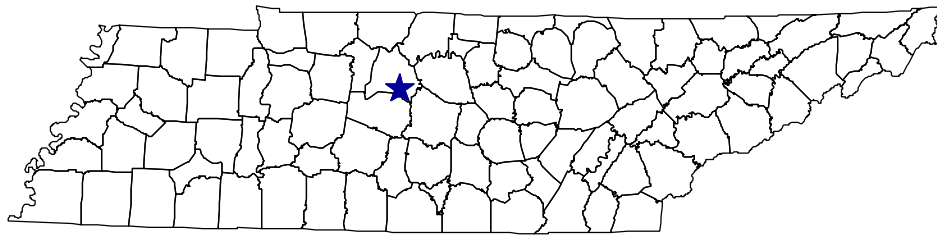
Healthcare Personnel Vaccinated (%)

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

TriStar Southern Hills Medical Center, Nashville, Davidson County

Medical School Affiliation: Undergraduate teaching

Bed Size Category: 100-399 beds



Healthcare-Associated Infections (HAI) Summary

Standardized Infection Ratio (SIR) by Infection Type, 01/01/2020-12/31/2020

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	1890	0.70	(0.04, 3.46)	0.91
	Adult/Pediatric Ward	0	0.6	1055	N/A	N/A	0.65
CAUTI	Adult/Pediatric ICU	1	1.8	2072	0.55	(0.03, 2.69)	0.69
	Adult/Pediatric Ward	0	0.6	1015	N/A	N/A	0.68
SSI	Colon surgery	3	0.8	36	N/A	N/A	0.64
	Abdominal hysterectomy	0	0.1	31	N/A	N/A	1.01
LabID	MRSA bacteremia	1	1.2	23733	0.78	(0.04, 3.82)	1.23
	C. difficile infection	0	10.7	23733	0.00	(0.00, 0.28)	0.36

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

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

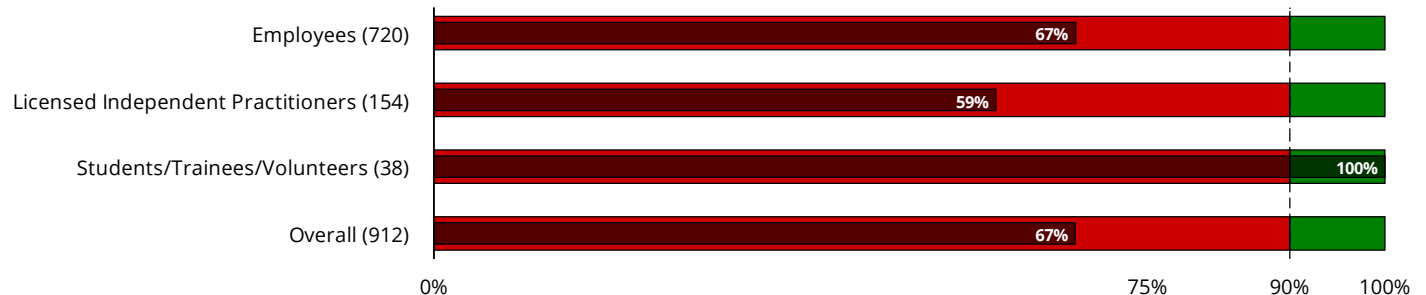
N/A: Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

*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 - '2020/2021' Influenza Season

Healthcare Personnel Category (Total)

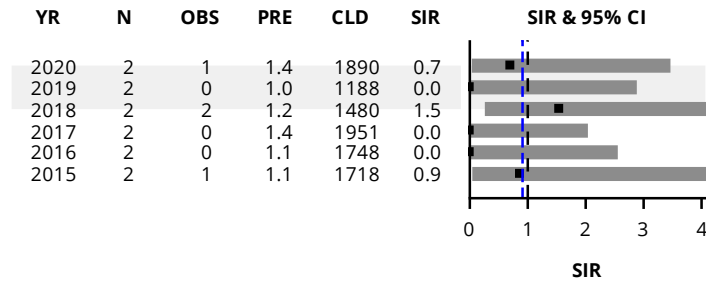


Healthcare Personnel Vaccinated (%)

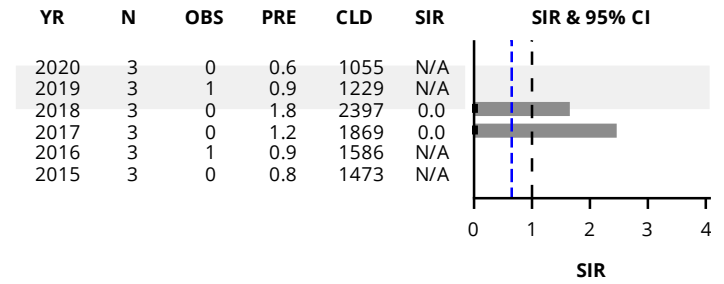
Below 90% >90% (HHS Healthy People 2020 Goal)

Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric ICUs

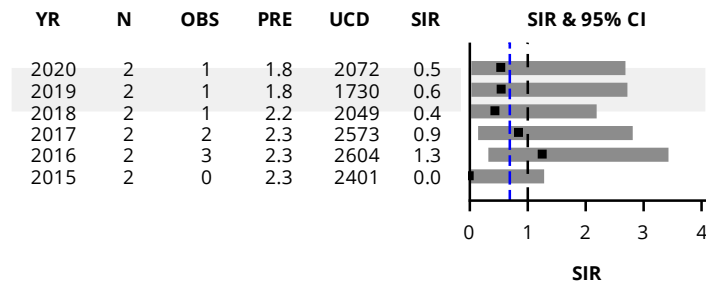


CLABSI - Adult/Pediatric Wards

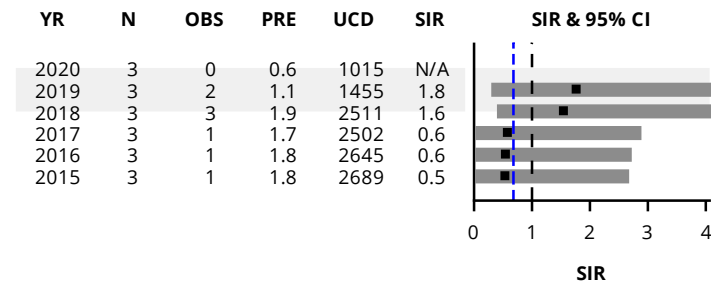


Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICUs

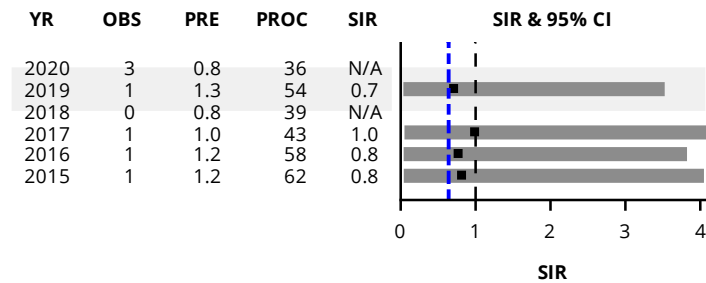


CAUTI - Adult/Pediatric Wards

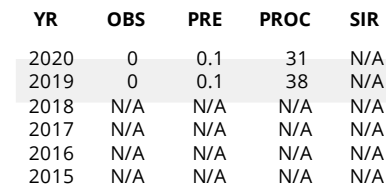


Surgical Site Infections (SSI)

SSI - Colon Surgery



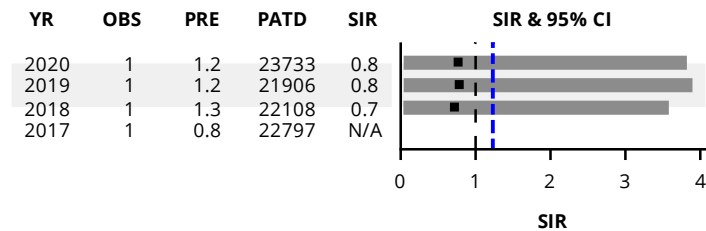
SSI - Abdominal Hysterectomy



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 June 30, 2021

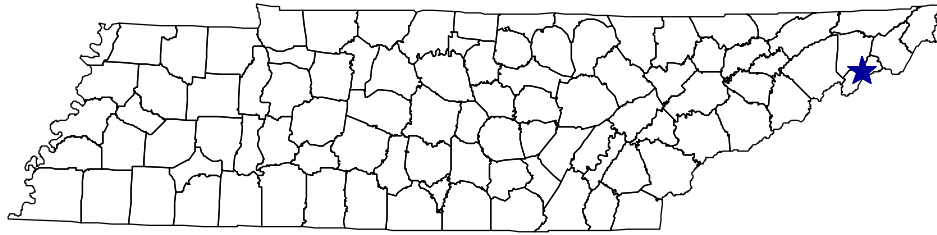
YR = reporting year; **N** = number of units reporting (CLABSI/CAUTI); **OBS** = observed number of infections
PRE = statistically 'predicted' number of infections, based on NHSN national baseline data
SIR = standardized infection ratio (observed/predicted number of infections)
CLD = central line days; **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
 - - - 2020 TN SIR
 - - - NHSN SIR=1

Unicoi County Memorial Hospital, Erwin, Unicoi County

Medical School Affiliation: Graduate teaching

Bed Size Category: <50 beds



Healthcare-Associated Infections (HAI) Summary

Standardized Infection Ratio (SIR) by Infection Type, 01/01/2019-12/31/2019

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	0.52
CAUTI	Adult/Pediatric Ward	0	0.1	194	N/A	N/A	0.78
SSI	Colon surgery	N/A	N/A	N/A	N/A	N/A	0.94
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	0.80
LabID	MRSA bacteremia	0	0.0	2152	N/A	N/A	1.19
	C. difficile infection	0	0.6	2152	N/A	N/A	0.47

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 - '2019/2020' Influenza Season

Healthcare Personnel Category (Total)



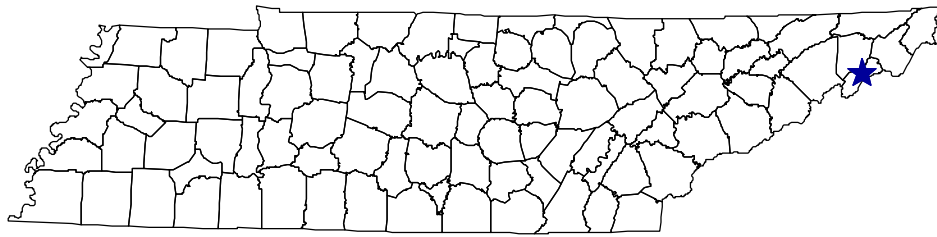
Healthcare Personnel Vaccinated (%)

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

Unicoi County Memorial Hospital, Erwin, Unicoi County

Medical School Affiliation: Graduate teaching

Bed Size Category: <50 beds



Healthcare-Associated Infections (HAI) Summary

Standardized Infection Ratio (SIR) by Infection Type, 01/01/2020-12/31/2020

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	0.65
CAUTI	Adult/Pediatric Ward	0	0.0	89	N/A	N/A	0.68
LabID	MRSA bacteremia	0	0.0	1140	N/A	N/A	1.23
	C. difficile infection	1	0.2	1140	N/A	N/A	0.36

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 - '2020/2021' 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
2020	1	N/A	N/A	N/A	N/A
2019	1	N/A	N/A	N/A	N/A
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
2020	1	0	0.0	89	N/A
2019	1	0	0.1	194	N/A
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

Healthcare Facility-Onset Laboratory Identified (LabID) Events

LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia

YR	OBS	PRE	PATD	SIR
2020	0	0.0	1140	N/A
2019	0	0.0	2152	N/A
2018	0	0.0	1659	N/A
2017	0	0.0	1713	N/A

N/A: Number of predicted infections <1; no SIR calculated

LabID - *C. difficile* Infection (CDI)

YR	OBS	PRE	PATD	SIR
2020	1	0.2	1140	N/A
2019	0	0.6	2152	N/A
2018	0	0.8	1659	N/A
2017	0	0.5	1713	N/A

N/A: Number of predicted infections <1; no SIR calculated

Data reported as of June 30, 2021

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;

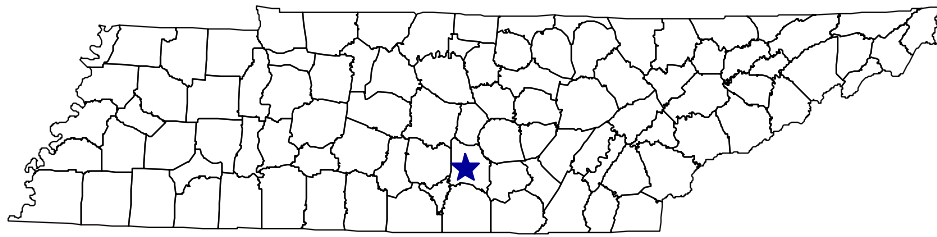
N/A = data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

- Significantly lower than NHSN SIR of 1
- Not significantly different from NHSN SIR of 1
- Significantly higher than NHSN SIR of 1
- 2020 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, 01/01/2019-12/31/2019

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	196	N/A	N/A	0.52
CAUTI	Adult/Pediatric Ward	0	0.2	529	N/A	N/A	0.78
SSI	Colon surgery	N/A	N/A	N/A	N/A	N/A	0.94
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	0.80
LabID	MRSA bacteremia	0	0.1	4019	N/A	N/A	1.19
	C. difficile infection	0	0.8	4019	N/A	N/A	0.47

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

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

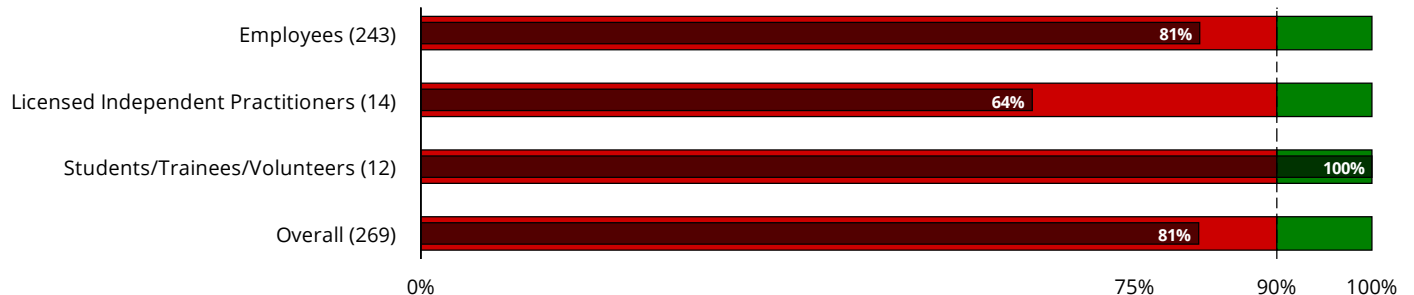
N/A: Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

*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 - '2019/2020' Influenza Season

Healthcare Personnel Category (Total)



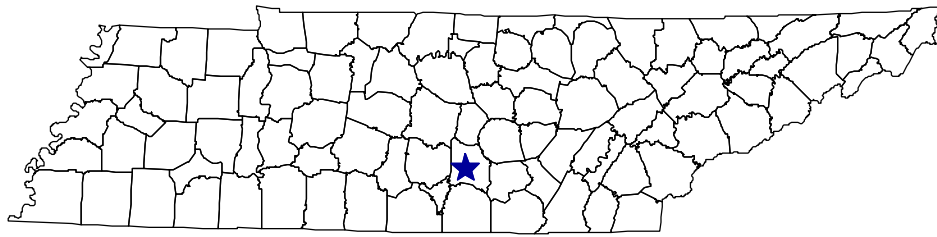
Healthcare Personnel Vaccinated (%)

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

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, 01/01/2020-12/31/2020

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	151	N/A	N/A	0.65
CAUTI	Adult/Pediatric Ward	0	0.1	322	N/A	N/A	0.68
SSI	Colon surgery	N/A	N/A	N/A	N/A	N/A	0.64
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	1.01
LabID	MRSA bacteremia	0	0.0	3531	N/A	N/A	1.23
	C. difficile infection	0	0.6	3531	N/A	N/A	0.36

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 - '2020/2021' 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
2020	1	0	0.0	151	N/A
2019	1	0	0.1	196	N/A
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
2020	1	0	0.1	322	N/A
2019	1	0	0.2	529	N/A
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
2020	N/A	N/A	N/A	N/A
2019	N/A	N/A	N/A	N/A
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
2020	N/A	N/A	N/A	N/A
2019	N/A	N/A	N/A	N/A
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
2020	0	0.0	3531	N/A
2019	0	0.1	4019	N/A
2018	0	0.1	4263	N/A
2017	0	0.1	4994	N/A

N/A: Number of predicted infections <1; no SIR calculated

LabID - *C. difficile* Infection (CDI)

YR	OBS	PRE	PATD	SIR
2020	0	0.6	3531	N/A
2019	0	0.8	4019	N/A
2018	3	0.9	4263	N/A
2017	2	1.2	4994	1.6

N/A: Number of predicted infections <1; no SIR calculated

Data reported as of June 30, 2021

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

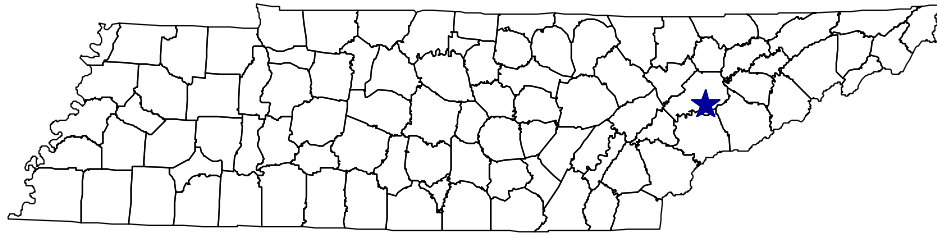
--- 2020 TN SIR

--- NHSN SIR=1

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, 01/01/2019-12/31/2019

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	10.5	9335	0.57	(0.23, 1.19)	0.72
	Neonatal ICU	1	3.3	2630	0.30	(0.02, 1.49)	0.44
	Adult/Pediatric Ward	4	16.0	16409	0.25	(0.08, 0.60)	0.52
CAUTI	Adult/Pediatric ICU	18	23.4	13311	0.77	(0.47, 1.19)	0.74
	Adult/Pediatric Ward	6	14.6	11959	0.41	(0.17, 0.85)	0.78
SSI	Colon surgery	15	14.0	377	1.07	(0.62, 1.72)	0.94
	Abdominal hysterectomy	2	3.5	539	0.57	(0.10, 1.87)	0.80
LabID	MRSA bacteremia	11	22.1	203569	0.50	(0.26, 0.86)	1.19
	C. difficile infection	88	152.5	179078	0.58	(0.47, 0.71)	0.47

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 - '2019/2020' Influenza Season

Healthcare Personnel Category (Total)



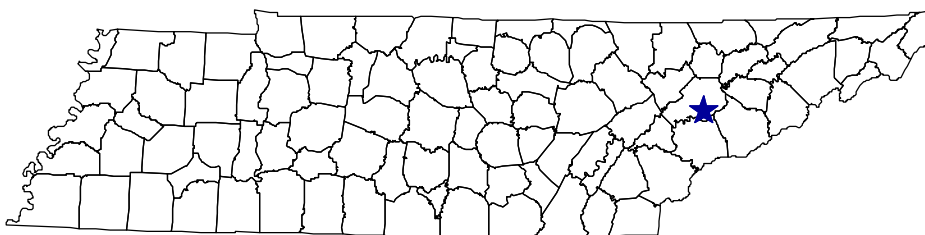
Healthcare Personnel Vaccinated (%)

■ 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, 01/01/2020-12/31/2020

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	8	7.6	6784	1.05	(0.49, 1.99)	0.91
	Neonatal ICU	3	3.3	2503	0.90	(0.23, 2.45)	0.62
	Adult/Pediatric Ward	5	12.9	13324	0.39	(0.14, 0.85)	0.65
CAUTI	Adult/Pediatric ICU	19	29.3	14174	0.65	(0.40, 0.99)	0.69
	Adult/Pediatric Ward	9	13.2	10719	0.68	(0.33, 1.24)	0.68
SSI	Colon surgery	7	12.2	334	0.57	(0.25, 1.13)	0.64
	Abdominal hysterectomy	4	2.3	331	1.69	(0.54, 4.07)	1.01
LabID	MRSA bacteremia	20	21.8	201017	0.91	(0.57, 1.39)	1.23
	C. difficile infection	64	138.1	179424	0.46	(0.36, 0.59)	0.36

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

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

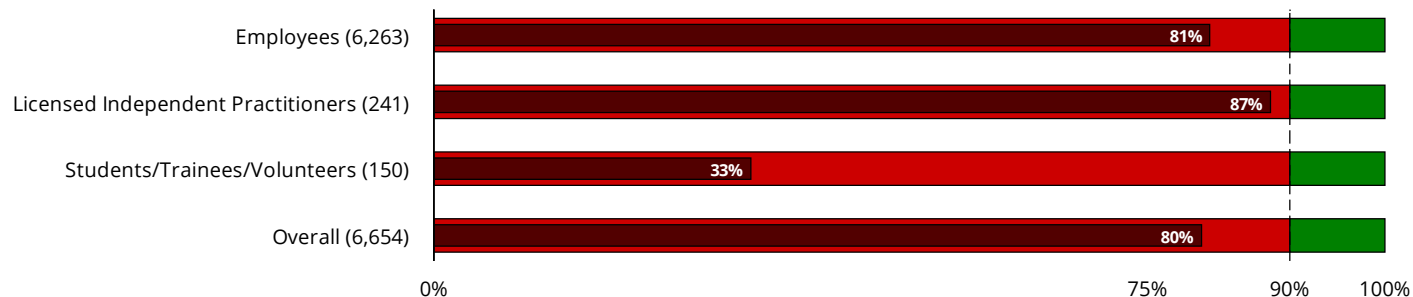
N/A: Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

*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 - '2020/2021' Influenza Season

Healthcare Personnel Category (Total)

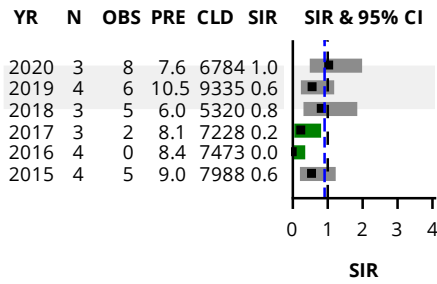


Healthcare Personnel Vaccinated (%)

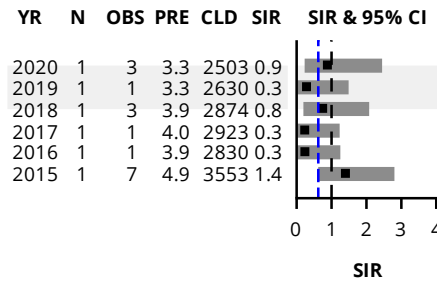
■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

Central Line-Associated Bloodstream Infections (CLABSI)

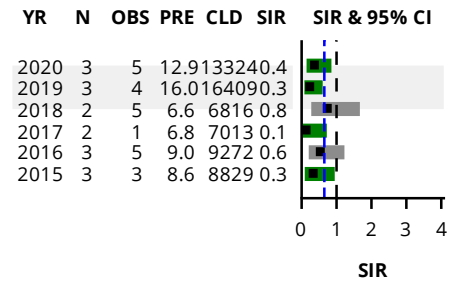
CLABSI - Adult/Pediatric ICUs



CLABSI - Neonatal ICUs

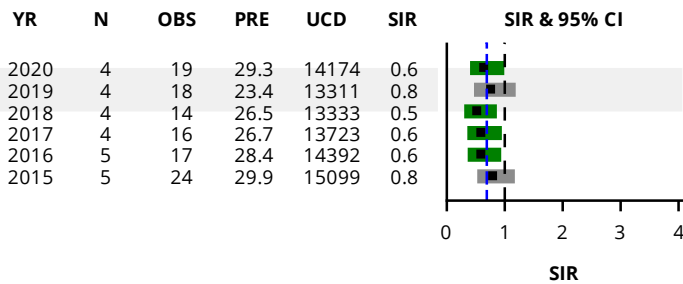


CLABSI - Adult/Pediatric Wards

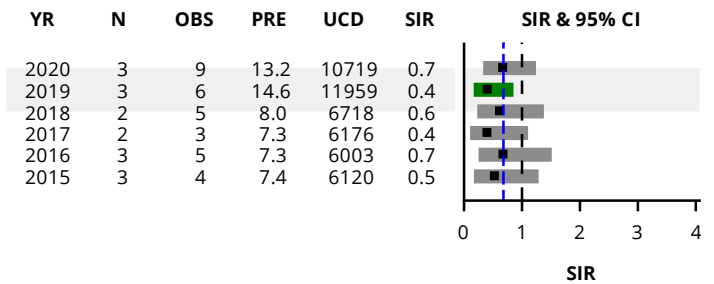


Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICUs

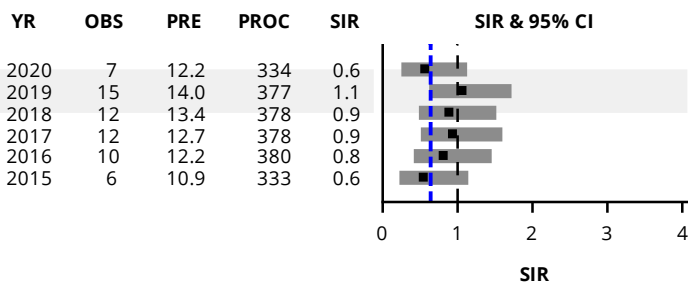


CAUTI - Adult/Pediatric Wards

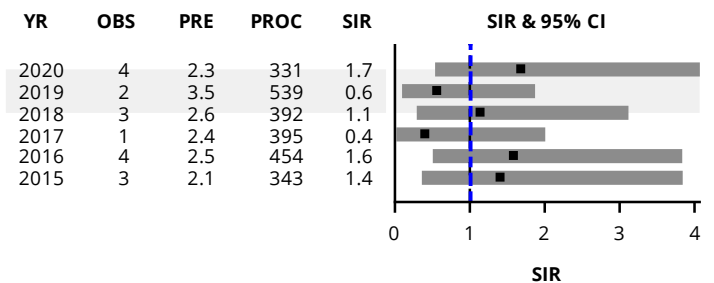


Surgical Site Infections (SSI)

SSI - Colon Surgery

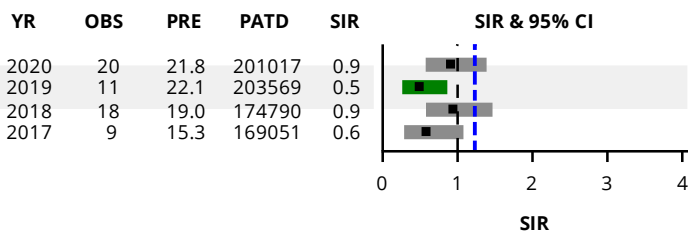


SSI - Abdominal Hysterectomy

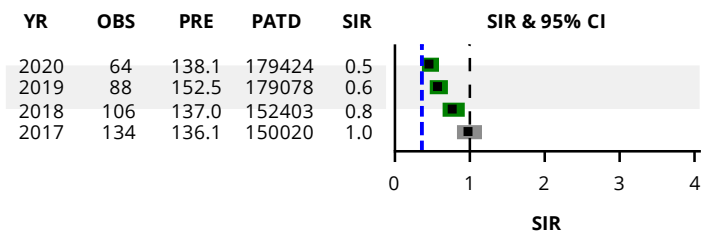


Healthcare Facility-Onset Laboratory Identified (LabID) Events

LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia



LabID - *C. difficile* Infection (CDI)



Data reported as of June 30, 2021

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

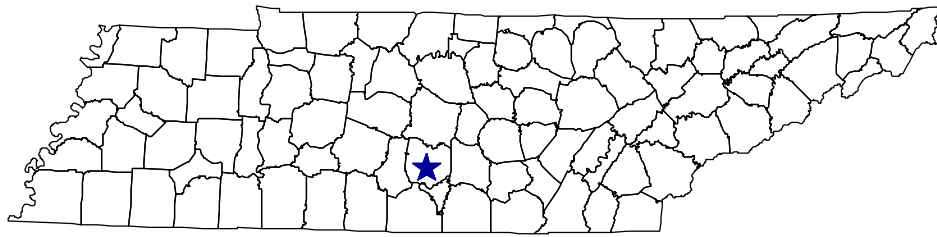
--- 2020 TN SIR

--- NHSN SIR=1

Vanderbilt Bedford Hospital (Tennova Healthcare - Shelbyville), 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, 01/01/2019-12/31/2019

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	289	N/A	N/A	0.72
	Adult/Pediatric Ward	0	0.1	196	N/A	N/A	0.52
CAUTI	Adult/Pediatric ICU	0	0.2	481	N/A	N/A	0.74
	Adult/Pediatric Ward	0	0.1	279	N/A	N/A	0.78
SSI	Colon surgery	N/A	N/A	N/A	N/A	N/A	0.94
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	0.80
LabID	MRSA bacteremia	0	0.1	2969	N/A	N/A	1.19
	C. difficile infection	2	0.9	2969	N/A	N/A	0.47

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 Bedford Hospital (Tennova Healthcare - Shelbyville)

Healthcare Personnel Influenza Vaccination - '2019/2020' Influenza Season

Healthcare Personnel Category (Total)



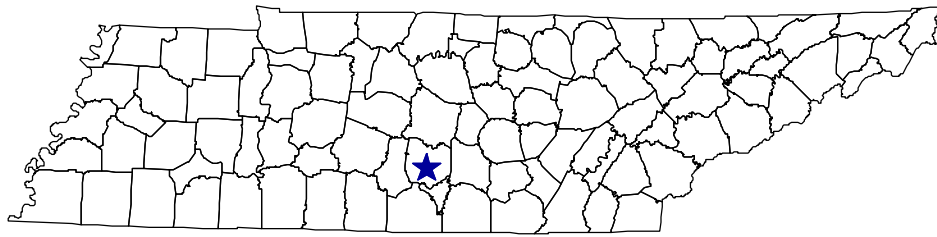
Healthcare Personnel Vaccinated (%)

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

Vanderbilt Bedford Hospital (Tennova Healthcare - Shelbyville), Shelbyville, Bedford County

Medical School Affiliation: None

Bed Size Category: <50 beds



Healthcare-Associated Infections (HAI) Summary

Standardized Infection Ratio (SIR) by Infection Type, 01/01/2020-12/31/2020

HAI	Type/Unit	Infections			Standardized Infection Ratio (SIR)		
		Observed	Predicted	Device Days/Procedures Performed/Patient Days	SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	0	0.1	245	N/A	N/A	0.91
	Adult/Pediatric Ward	0	0.0	106	N/A	N/A	0.65
CAUTI	Adult/Pediatric ICU	0	0.1	350	N/A	N/A	0.69
	Adult/Pediatric Ward	0	0.0	197	N/A	N/A	0.68
SSI	Colon surgery	N/A	N/A	N/A	N/A	N/A	0.64
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	1.01
LabID	MRSA bacteremia	0	0.0	2372	N/A	N/A	1.23
	C. difficile infection	0	0.6	2372	N/A	N/A	0.36

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

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

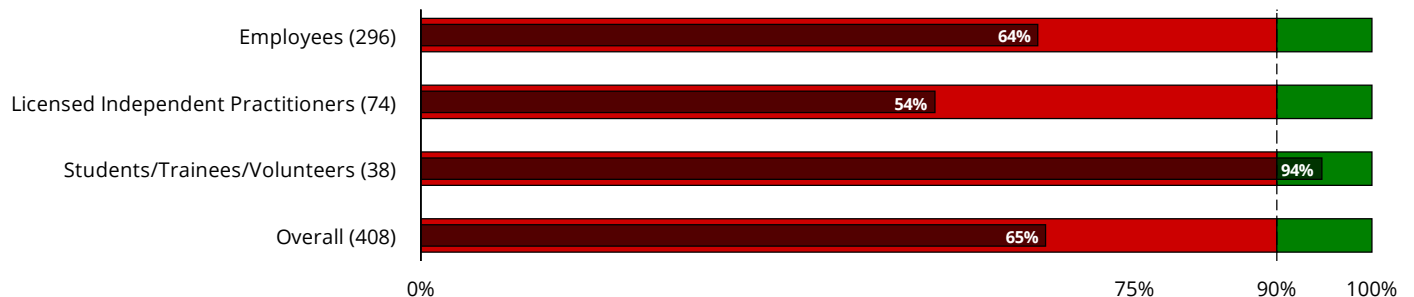
N/A: Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

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

See page 3 for more detailed information about HAIs at Vanderbilt Bedford Hospital (Tennova Healthcare - Shelbyville)

Healthcare Personnel Influenza Vaccination - '2020/2021' 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
2020	1	0	0.1	245	N/A
2019	1	0	0.1	289	N/A
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
2020	1	0	0.0	106	N/A
2019	1	0	0.1	196	N/A
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
2020	1	0	0.1	350	N/A
2019	1	0	0.2	481	N/A
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
2020	1	0	0.0	197	N/A
2019	1	0	0.1	279	N/A
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
2020	N/A	N/A	N/A	N/A
2019	N/A	N/A	N/A	N/A
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
2020	N/A	N/A	N/A	N/A
2019	N/A	N/A	N/A	N/A
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
2020	0	0.0	2372	N/A
2019	0	0.1	2969	N/A
2018	0	0.1	3907	N/A
2017	0	0.2	4638	N/A

N/A: Number of predicted infections <1; no SIR calculated

LabID - *C. difficile* Infection (CDI)

YR	OBS	PRE	PATD	SIR
2020	0	0.6	2372	N/A
2019	2	0.9	2969	N/A
2018	0	1.4	3907	0.0
2017	3	1.6	4638	1.9

N/A: Number of predicted infections <1; no SIR calculated

Data reported as of June 30, 2021

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

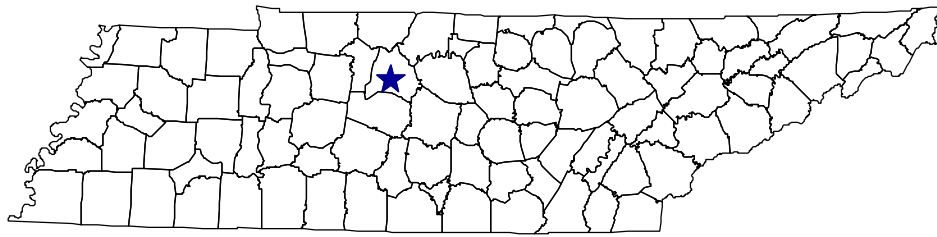
--- 2020 TN SIR

--- 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, 01/01/2019-12/31/2019

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	20.0	17753	0.70	(0.40, 1.15)	0.72
	Adult/Pediatric Ward	6	16.6	17112	0.36	(0.15, 0.75)	0.52
CAUTI	Adult/Pediatric ICU	38	51.0	25098	0.75	(0.53, 1.01)	0.74
	Adult/Pediatric Ward	13	14.4	11647	0.90	(0.50, 1.50)	0.78
SSI	Colon surgery	16	32.2	873	0.50	(0.29, 0.79)	0.94
	Abdominal hysterectomy	1	3.1	280	0.31	(0.02, 1.55)	0.80
LabID	MRSA bacteremia	37	21.8	241596	1.69	(1.21, 2.31)	1.19
	C. difficile infection	73	136.8	241596	0.53	(0.42, 0.67)	0.47

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

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

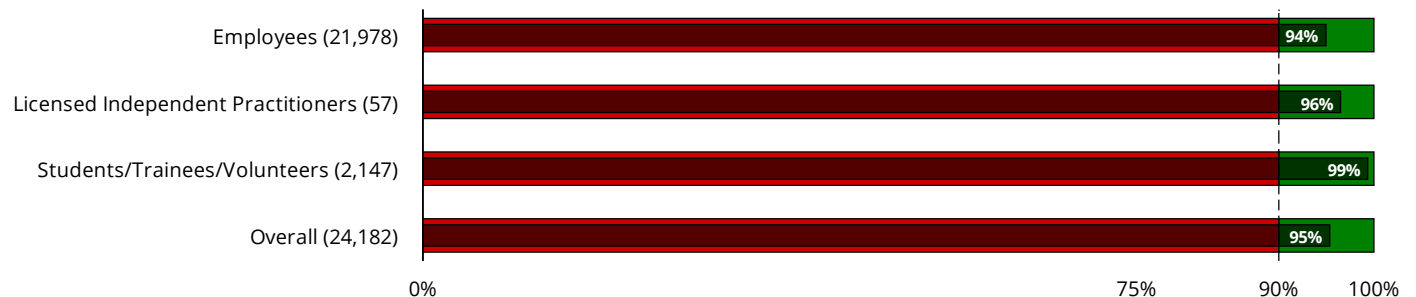
N/A: Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

*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 - '2019/2020' Influenza Season

Healthcare Personnel Category (Total)



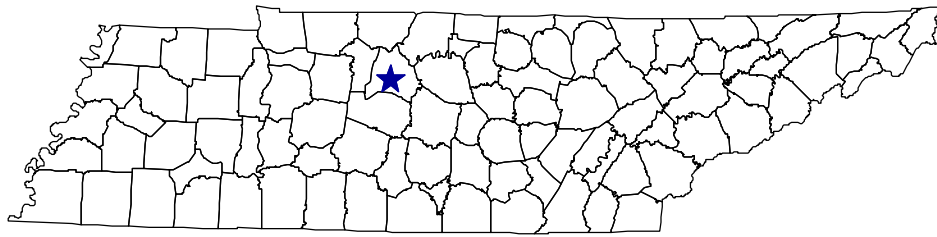
Healthcare Personnel Vaccinated (%)

■ 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, 01/01/2020-12/31/2020

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	20	20.5	18218	0.97	(0.61, 1.48)	0.91
	Adult/Pediatric Ward	11	15.4	15847	0.71	(0.37, 1.24)	0.65
CAUTI	Adult/Pediatric ICU	39	56.0	27001	0.70	(0.50, 0.94)	0.69
	Adult/Pediatric Ward	13	15.1	12093	0.86	(0.48, 1.43)	0.68
SSI	Colon surgery	20	34.2	864	0.58	(0.37, 0.89)	0.64
	Abdominal hysterectomy	4	2.5	227	1.55	(0.49, 3.73)	1.01
LabID	MRSA bacteremia	37	21.5	238319	1.71	(1.22, 2.34)	1.23
	C. difficile infection	31	124.2	238319	0.25	(0.17, 0.35)	0.36

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

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

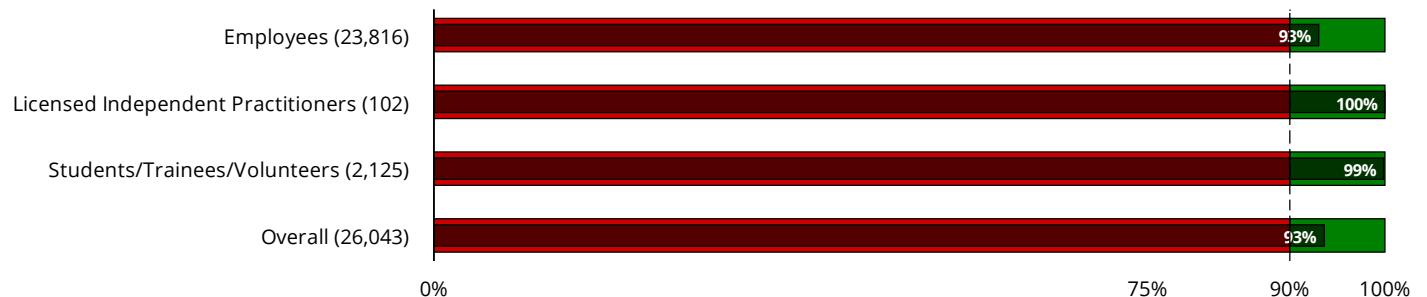
N/A: Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

*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 - '2020/2021' Influenza Season

Healthcare Personnel Category (Total)

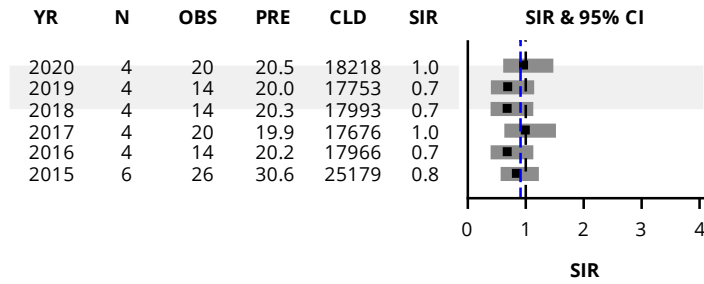


Healthcare Personnel Vaccinated (%)

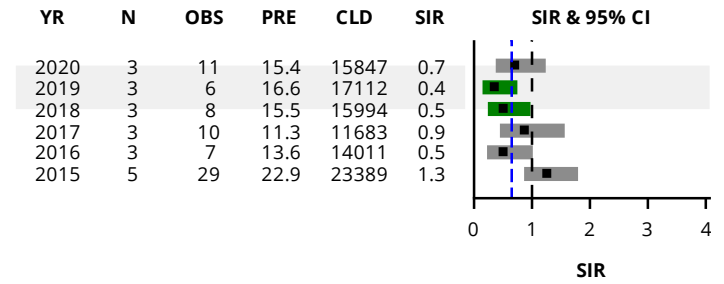
■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric ICUs

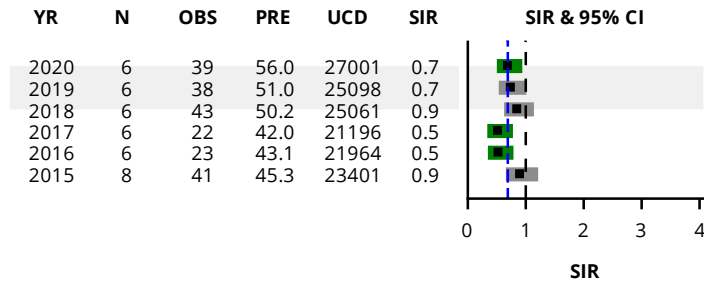


CLABSI - Adult/Pediatric Wards

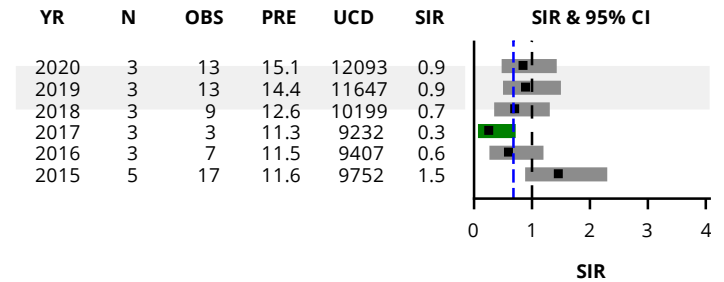


Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICUs

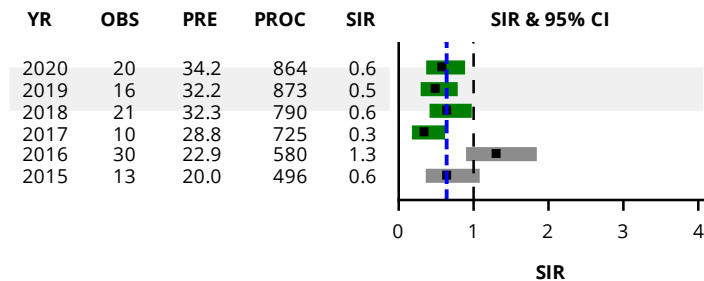


CAUTI - Adult/Pediatric Wards

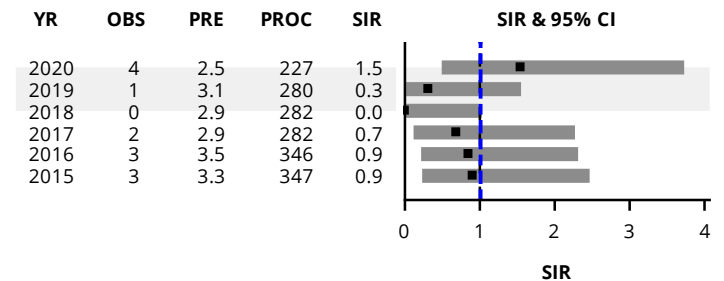


Surgical Site Infections (SSI)

SSI - Colon Surgery

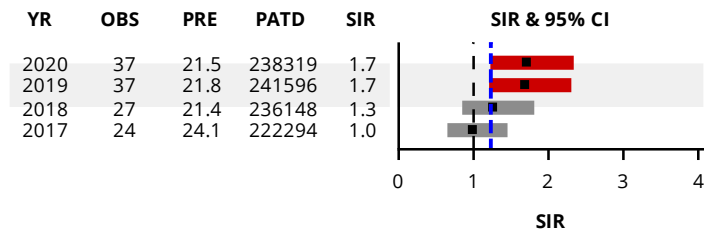


SSI - Abdominal Hysterectomy

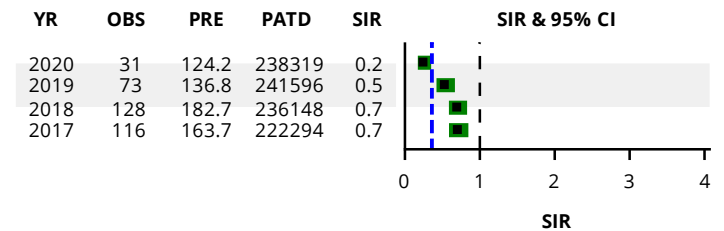


Healthcare Facility-Onset Laboratory Identified (LabID) Events

LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia



LabID - *C. difficile* Infection (CDI)



Data reported as of June 30, 2021

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

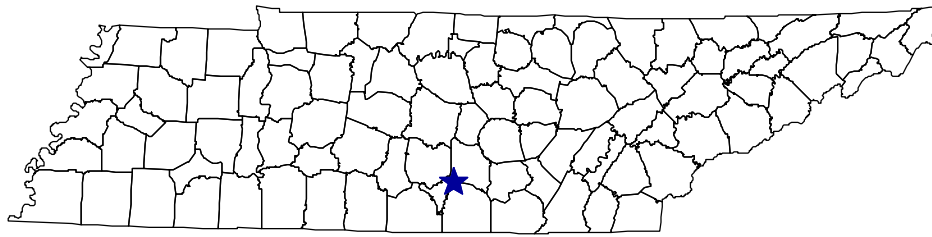
--- 2020 TN SIR

--- NHSN SIR=1

Vanderbilt Tullahoma Harton Hospital (Tennova Healthcare - Harton), 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, 01/01/2019-12/31/2019

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	0.6	823	N/A	N/A	0.72
	Adult/Pediatric Ward	1	0.3	542	N/A	N/A	0.52
CAUTI	Adult/Pediatric ICU	0	0.7	986	N/A	N/A	0.74
	Adult/Pediatric Ward	0	0.5	844	N/A	N/A	0.78
SSI	Colon surgery	2	1.3	52	1.48	(0.25, 4.89)	0.94
	Abdominal hysterectomy	0	0.2	36	N/A	N/A	0.80
LabID	MRSA bacteremia	1	0.5	12224	N/A	N/A	1.19
	C. difficile infection	8	4.9	12224	1.61	(0.75, 3.07)	0.47

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

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

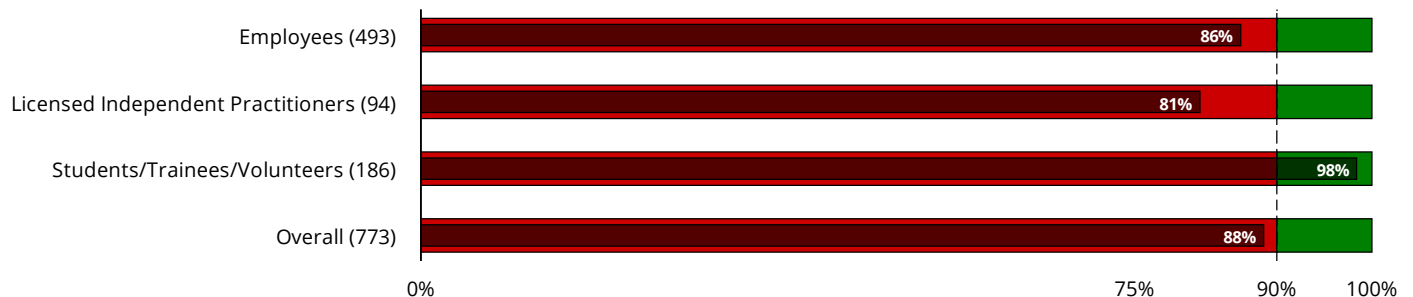
N/A: Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

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

See page 3 for more detailed information about HAIs at Vanderbilt Tullahoma Harton Hospital (Tennova Healthcare - Harton)

Healthcare Personnel Influenza Vaccination - '2019/2020' Influenza Season

Healthcare Personnel Category (Total)



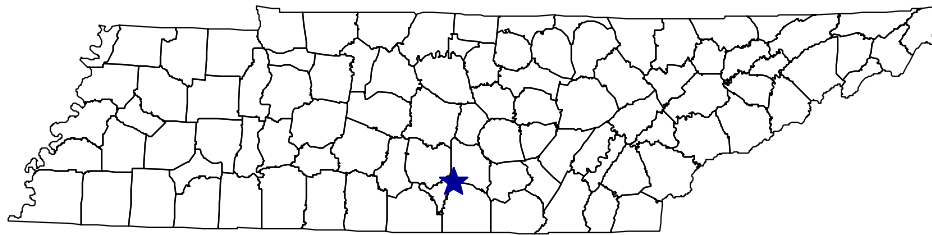
Healthcare Personnel Vaccinated (%)

Below 90% >90% (HHS Healthy People 2020 Goal)

Vanderbilt Tullahoma Harton Hospital (Tennova Healthcare - Harton), Tullahoma, Coffee County

Medical School Affiliation: Graduate teaching

Bed Size Category: 100-399 beds



Healthcare-Associated Infections (HAI) Summary

Standardized Infection Ratio (SIR) by Infection Type, 01/01/2020-12/31/2020

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	660	N/A	N/A	0.91
	Adult/Pediatric Ward	0	0.3	495	N/A	N/A	0.65
CAUTI	Adult/Pediatric ICU	0	0.7	852	N/A	N/A	0.69
	Adult/Pediatric Ward	0	0.4	606	N/A	N/A	0.68
SSI	Colon surgery	0	1.1	40	0.00	(0.00, 2.65)	0.64
	Abdominal hysterectomy	0	0.1	28	N/A	N/A	1.01
LabID	MRSA bacteremia	3	0.5	10142	N/A	N/A	1.23
	C. difficile infection	2	4.5	10142	0.44	(0.07, 1.45)	0.36

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

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

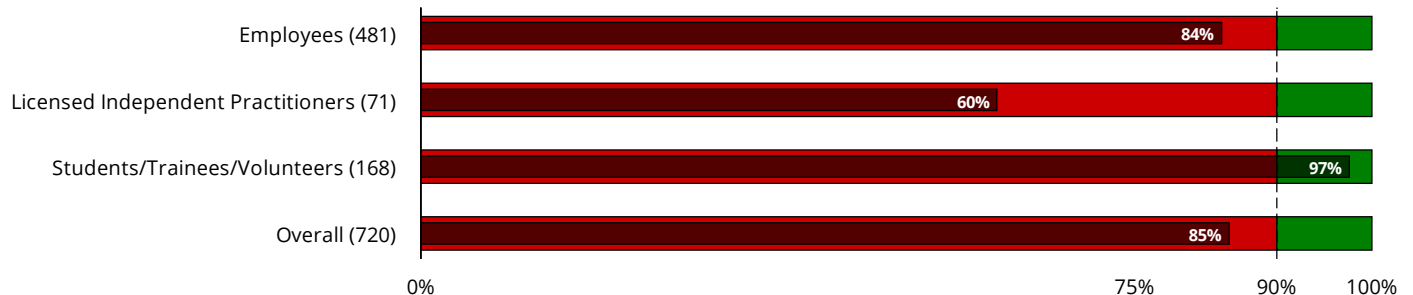
N/A: Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

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

See page 3 for more detailed information about HAIs at Vanderbilt Tullahoma Harton Hospital (Tennova Healthcare - Harton)

Healthcare Personnel Influenza Vaccination - '2020/2021' 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
2020	1	0	0.5	660	N/A
2019	1	1	0.6	823	N/A
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

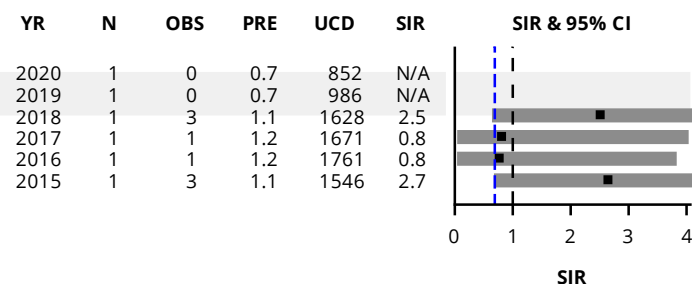
CLABSI - Adult/Pediatric Wards

YR	N	OBS	PRE	CLD	SIR
2020	2	0	0.3	495	N/A
2019	2	1	0.3	542	N/A
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



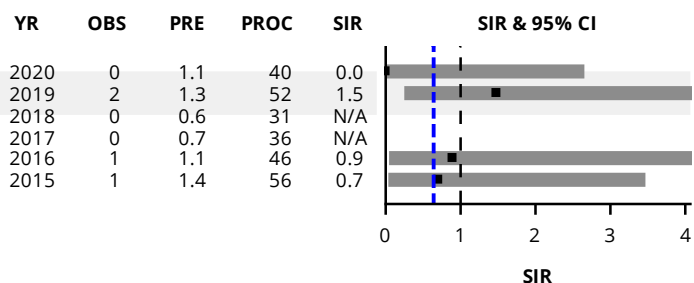
CAUTI - Adult/Pediatric Wards

YR	N	OBS	PRE	UCD	SIR
2020	2	0	0.4	606	N/A
2019	2	0	0.5	844	N/A
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
2020	0	0.1	28	N/A
2019	0	0.2	36	N/A
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

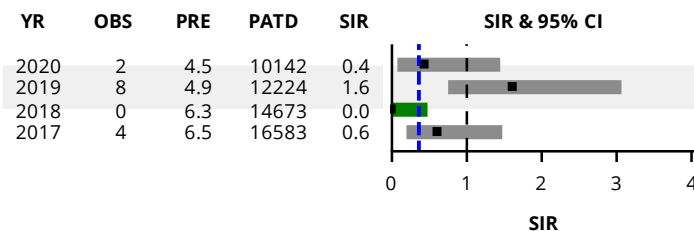
Healthcare Facility-Onset Laboratory Identified (LabID) Events

LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia

YR	OBS	PRE	PATD	SIR
2020	3	0.5	10142	N/A
2019	1	0.5	12224	N/A
2018	5	0.6	14673	N/A
2017	0	0.6	16583	N/A

N/A: Number of predicted infections <1; no SIR calculated

LabID - *C. difficile* Infection (CDI)



Data reported as of June 30, 2021

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

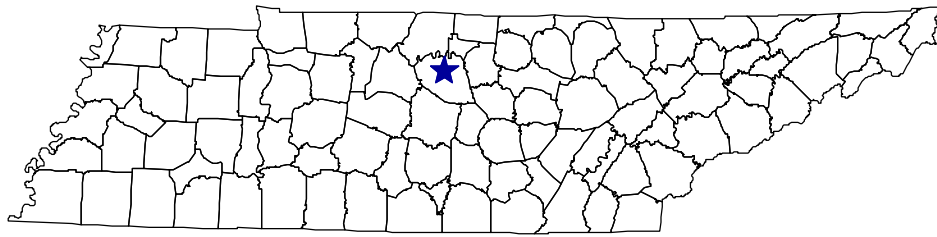
--- 2020 TN SIR

--- NHSN SIR=1

Vanderbilt Wilson County Hospital (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, 01/01/2019-12/31/2019

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	754	N/A	N/A	0.72
	Adult/Pediatric Ward	0	0.3	564	N/A	N/A	0.52
CAUTI	Adult/Pediatric ICU	0	1.3	1826	0.00	(0.00, 2.24)	0.74
	Adult/Pediatric Ward	1	1.0	1661	0.92	(0.05, 4.55)	0.78
SSI	Colon surgery	0	0.3	23	N/A	N/A	0.94
	Abdominal hysterectomy	0	0.1	22	N/A	N/A	0.80
LabID	MRSA bacteremia	1	0.6	13299	N/A	N/A	1.19
	C. difficile infection	8	7.8	12463	1.02	(0.47, 1.93)	0.47

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 Wilson County Hospital (University Med Ctr- Lebanon)

Healthcare Personnel Influenza Vaccination - '2019/2020' Influenza Season

Healthcare Personnel Category (Total)



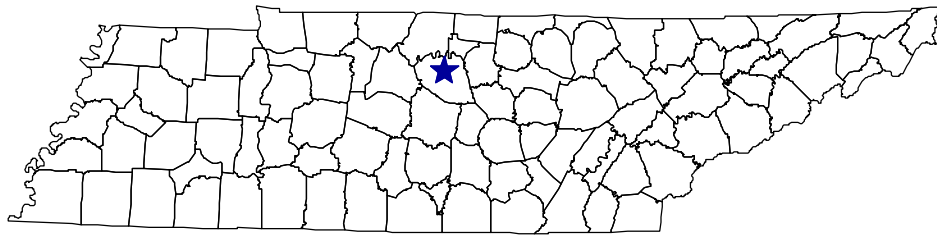
Healthcare Personnel Vaccinated (%)

■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

Vanderbilt Wilson County Hospital (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, 01/01/2020-12/31/2020

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	1.2	1671	0.79	(0.04, 3.92)	0.91
	Adult/Pediatric Ward	1	0.7	1164	N/A	N/A	0.65
CAUTI	Adult/Pediatric ICU	0	1.6	2300	0.00	(0.00, 1.78)	0.69
	Adult/Pediatric Ward	0	1.3	1973	0.00	(0.00, 2.27)	0.68
SSI	Colon surgery	0	0.7	32	N/A	N/A	0.64
	Abdominal hysterectomy	0	0.2	43	N/A	N/A	1.01
LabID	MRSA bacteremia	1	1.0	19043	0.94	(0.05, 4.64)	1.23
	C. difficile infection	10	9.6	18051	1.04	(0.53, 1.85)	0.36

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 Wilson County Hospital (University Med Ctr- Lebanon)

Healthcare Personnel Influenza Vaccination - '2020/2021' Influenza Season

Healthcare Personnel Category (Total)

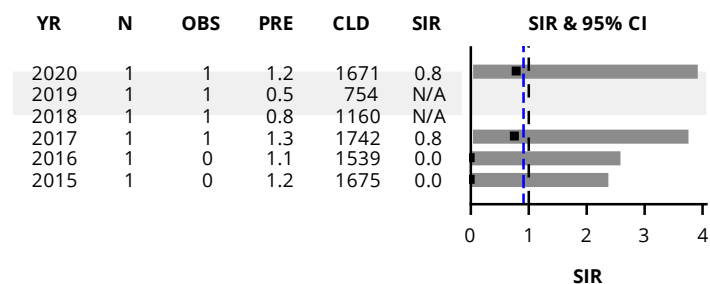


Healthcare Personnel Vaccinated (%)

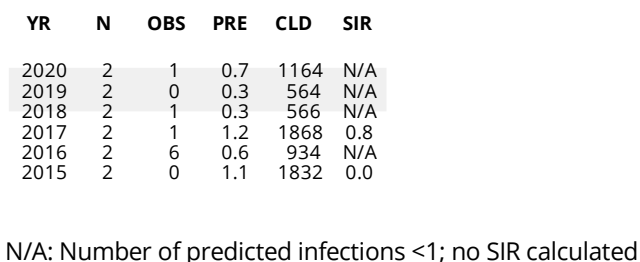
■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric ICUs

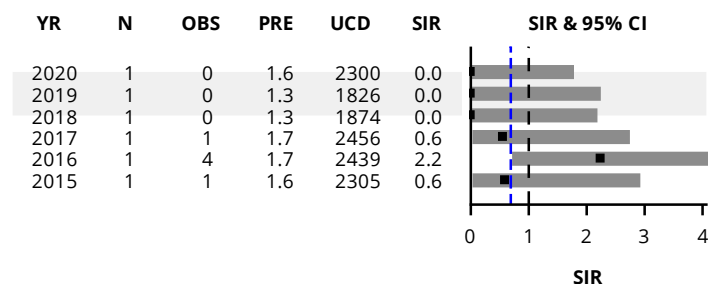


CLABSI - Adult/Pediatric Wards

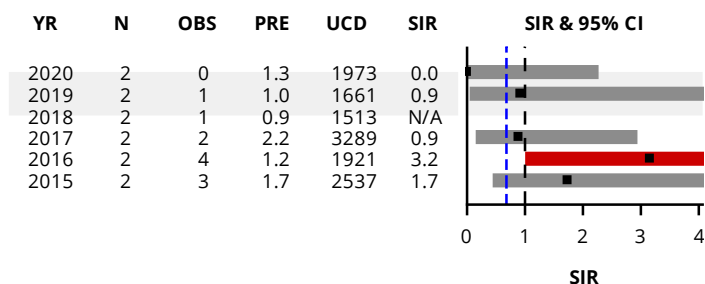


Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICUs



CAUTI - Adult/Pediatric Wards



Surgical Site Infections (SSI)

SSI - Colon Surgery

YR	OBS	PRE	PROC	SIR
2020	0	0.7	32	N/A
2019	0	0.3	23	N/A
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

N/A: Number of predicted infections <1; no SIR calculated

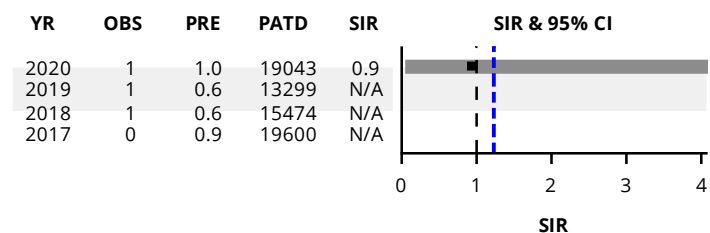
SSI - Abdominal Hysterectomy

YR	OBS	PRE	PROC	SIR
2020	0	0.2	43	N/A
2019	0	0.1	22	N/A
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

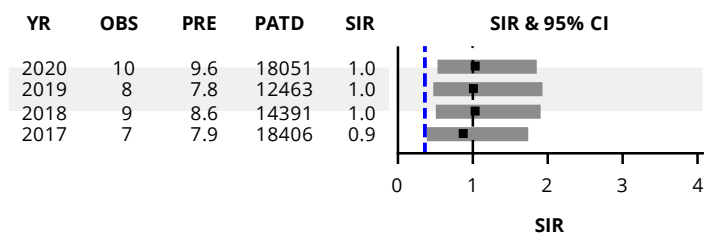
N/A: Number of predicted infections <1; no SIR calculated

Healthcare Facility-Onset Laboratory Identified (LabID) Events

LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia



LabID - *C. difficile* Infection (CDI)



Data reported as of June 30, 2021

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

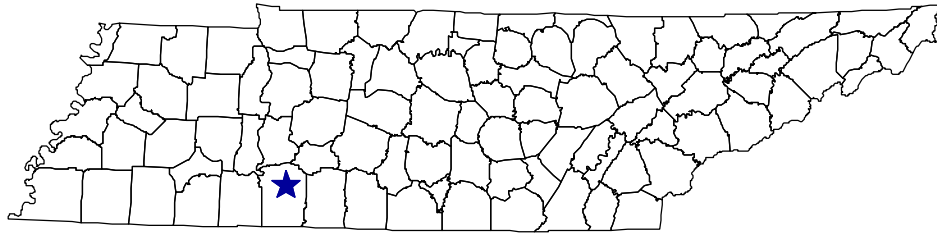
--- 2020 TN SIR

--- 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, 01/01/2019-12/31/2019

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	137	N/A	N/A	0.52
CAUTI	Adult/Pediatric Ward	0	0.1	274	N/A	N/A	0.78
LabID	MRSA bacteremia	0	0.0	3419	N/A	N/A	1.19
	C. difficile infection	1	0.8	3419	N/A	N/A	0.47

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

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

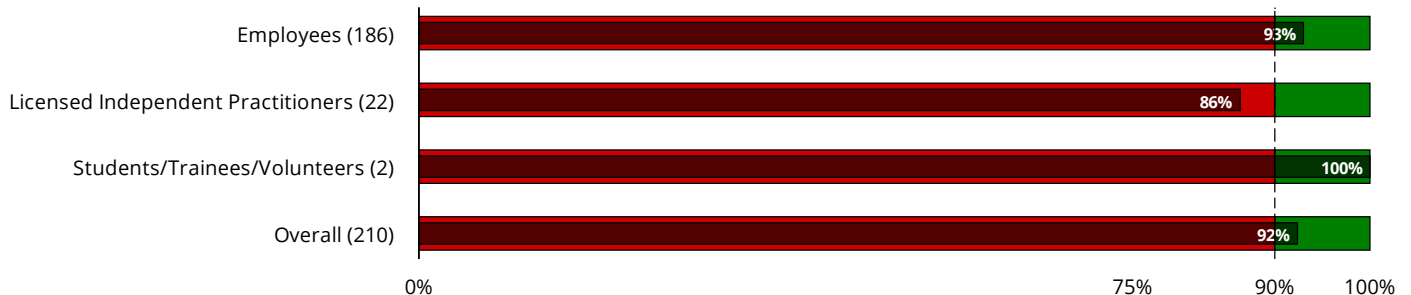
N/A: Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

*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 - '2019/2020' Influenza Season

Healthcare Personnel Category (Total)



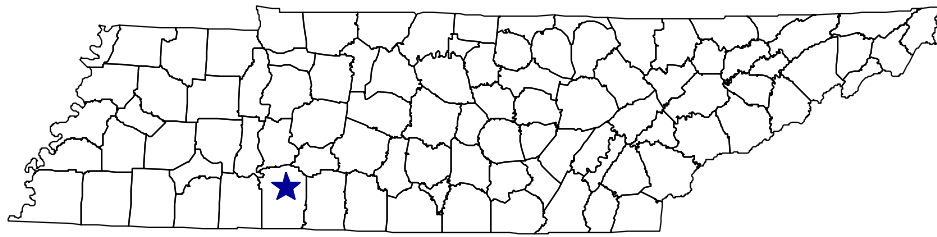
Healthcare Personnel Vaccinated (%)

■ 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, 01/01/2020-12/31/2020

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	272	N/A	N/A	0.65
CAUTI	Adult/Pediatric Ward	0	0.1	341	N/A	N/A	0.68
LabID	MRSA bacteremia	0	0.0	3473	N/A	N/A	1.23
	C. difficile infection	2	0.6	3473	N/A	N/A	0.36

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

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

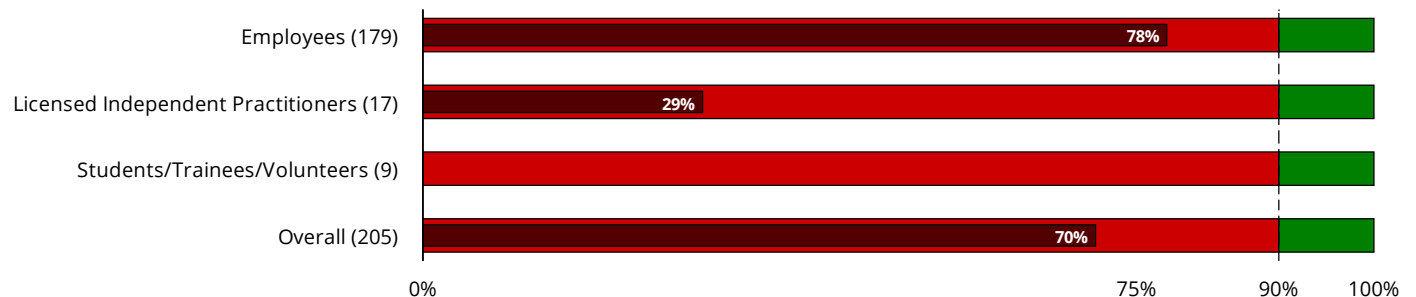
N/A: Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

*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 - '2020/2021' 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
2020	1	0	0.1	272	N/A
2019	1	0	0.0	137	N/A
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
2020	1	0	0.1	341	N/A
2019	1	0	0.1	274	N/A
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
2020	0	0.0	3473	N/A
2019	0	0.0	3419	N/A
2018	1	0.0	3388	N/A
2017	0	0.0	3098	N/A

N/A: Number of predicted infections <1; no SIR calculated

LabID - *C. difficile* Infection (CDI)

YR	OBS	PRE	PATD	SIR
2020	2	0.6	3473	N/A
2019	1	0.8	3419	N/A
2018	1	1.2	3388	0.8
2017	1	1.6	3098	0.6

N/A: Number of predicted infections <1; no SIR calculated

Data reported as of June 30, 2021

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

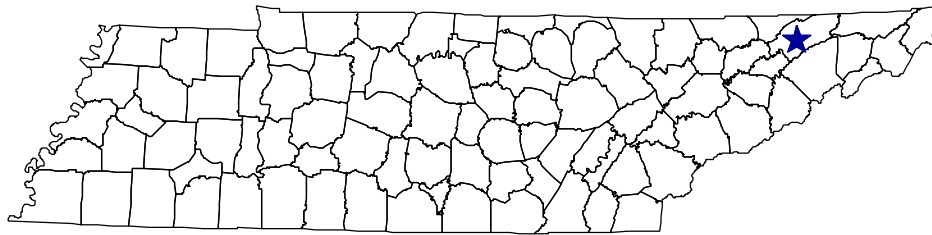
--- 2020 TN SIR

--- 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, 01/01/2019-12/31/2019

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	61	N/A	N/A	0.72
	Adult/Pediatric Ward	0	0.2	363	N/A	N/A	0.52
CAUTI	Adult/Pediatric ICU	0	0.0	173	N/A	N/A	0.74
	Adult/Pediatric Ward	0	0.2	441	N/A	N/A	0.78
SSI	Colon surgery	N/A	N/A	N/A	N/A	N/A	0.94
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	0.80
LabID	MRSA bacteremia	0	0.1	3961	N/A	N/A	1.19
	C. difficile infection	1	1.3	3961	0.74	(0.04, 3.65)	0.47

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

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

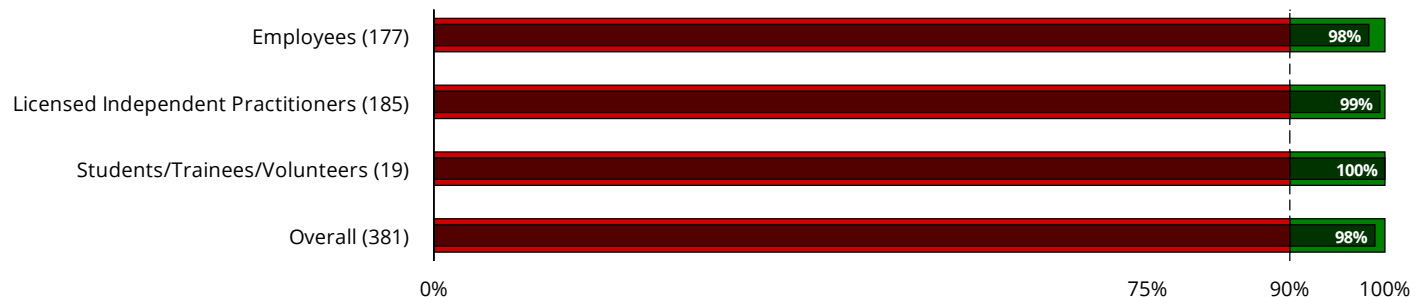
N/A: Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

*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 - '2019/2020' Influenza Season

Healthcare Personnel Category (Total)



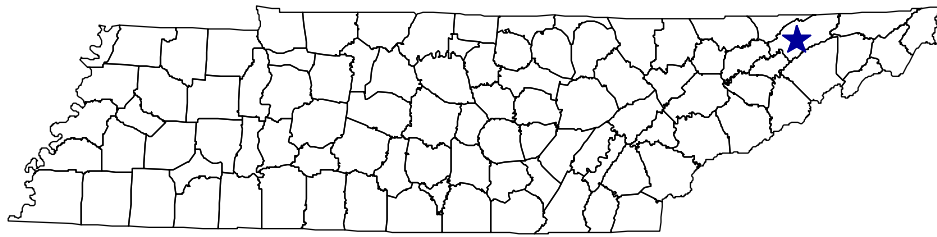
Healthcare Personnel Vaccinated (%)

■ 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, 01/01/2020-12/31/2020

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	0.91
	Adult/Pediatric Ward	0	0.0	55	N/A	N/A	0.65
CAUTI	Adult/Pediatric ICU	N/A	N/A	N/A	N/A	N/A	0.69
	Adult/Pediatric Ward	0	0.0	170	N/A	N/A	0.68
SSI	Colon surgery	N/A	N/A	N/A	N/A	N/A	0.64
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	1.01
LabID	MRSA bacteremia	0	0.0	1323	N/A	N/A	1.23
	C. difficile infection	0	0.3	1323	N/A	N/A	0.36

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

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

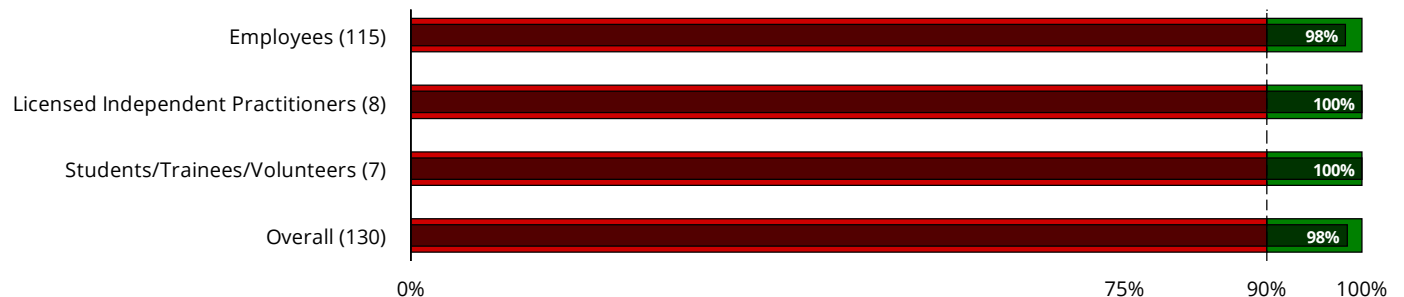
N/A: Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

*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 - '2020/2021' 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
2020	1	N/A	N/A	N/A	N/A
2019	1	0	0.0	61	N/A
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
2020	1	0	0.0	55	N/A
2019	1	0	0.2	363	N/A
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
2020	1	N/A	N/A	N/A	N/A
2019	1	0	0.0	173	N/A
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
2020	1	0	0.0	170	N/A
2019	1	0	0.2	441	N/A
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
2020	N/A	N/A	N/A	N/A
2019	N/A	N/A	N/A	N/A
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
2020	N/A	N/A	N/A	N/A
2019	N/A	N/A	N/A	N/A
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

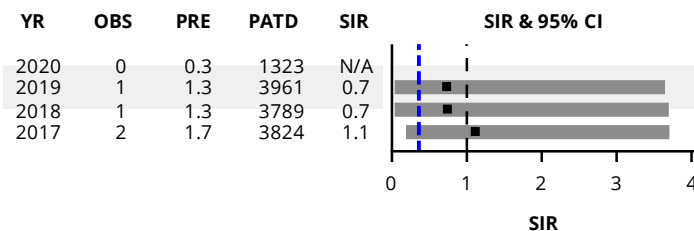
Healthcare Facility-Onset Laboratory Identified (LabID) Events

LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia

YR	OBS	PRE	PATD	SIR
2020	0	0.0	1323	N/A
2019	0	0.1	3961	N/A
2018	0	0.1	3789	N/A
2017	0	0.0	3824	N/A

N/A: Number of predicted infections <1; no SIR calculated

LabID - *C. difficile* Infection (CDI)



- Significantly lower than NHSN SIR of 1
- Not significantly different from NHSN SIR of 1
- Significantly higher than NHSN SIR of 1
- - - 2020 TN SIR
- - - NHSN SIR=1

Data reported as of June 30, 2021

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)

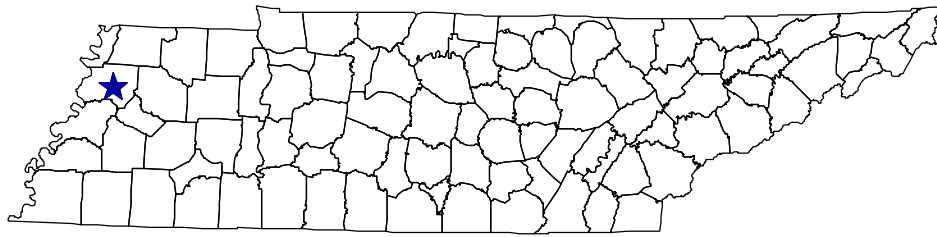
CLD = central line days; UCD = urinary catheter days; PROC = procedures performed; PATD = patient days;

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

West Tennessee Healthcare Dyersburg Hospital (Tennova- 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, 01/01/2019-12/31/2019

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	902	N/A	N/A	0.72
	Adult/Pediatric Ward	0	0.7	1007	N/A	N/A	0.52
CAUTI	Adult/Pediatric ICU	0	1.6	1833	0.00	(0.00, 1.79)	0.74
	Adult/Pediatric Ward	2	3.3	3904	0.60	(0.10, 1.97)	0.78
SSI	Colon surgery	1	1.3	52	0.74	(0.04, 3.65)	0.94
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	0.80
LabID	MRSA bacteremia	0	0.8	20033	N/A	N/A	1.19
	C. difficile infection	9	10.4	19183	0.86	(0.42, 1.59)	0.47

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 Dyersburg Hospital (Tennova- Dyersburg Regional)

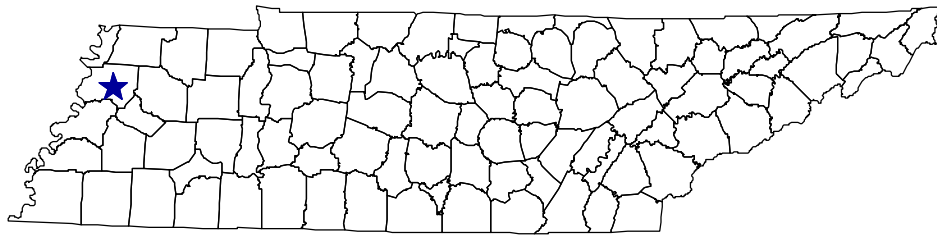
Healthcare Personnel Influenza Vaccination - '2019/2020' Influenza Season

This facility utilized the COVID-19 related CMS reporting exemption for the '2019/2020' influenza season. See the CMS website for more information.

West Tennessee Healthcare Dyersburg Hospital (Tennova- 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, 01/01/2020-12/31/2020

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	0.5	729	N/A	N/A	0.91
	Adult/Pediatric Ward	1	0.4	733	N/A	N/A	0.65
CAUTI	Adult/Pediatric ICU	1	1.0	1451	0.93	(0.05, 4.57)	0.69
	Adult/Pediatric Ward	0	1.8	2629	0.00	(0.00, 1.62)	0.68
SSI	Colon surgery	0	0.7	29	N/A	N/A	0.64
	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	1.01
LabID	MRSA bacteremia	2	0.5	11652	N/A	N/A	1.23
	C. difficile infection	0	3.2	11003	0.00	(0.00, 0.94)	0.36

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

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

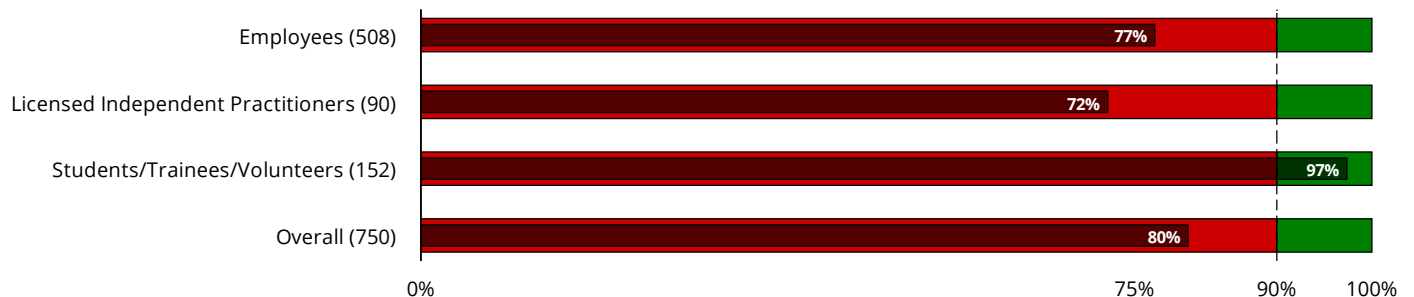
N/A: Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

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

See page 3 for more detailed information about HAIs at West Tennessee Healthcare Dyersburg Hospital (Tennova- Dyersburg Regional)

Healthcare Personnel Influenza Vaccination - '2020/2021' 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
2020	1	1	0.5	729	N/A
2019	1	0	0.7	902	N/A
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

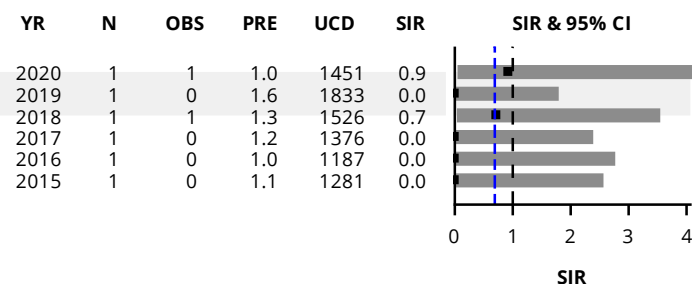
CLABSI - Adult/Pediatric Wards

YR	N	OBS	PRE	CLD	SIR
2020	3	1	0.4	733	N/A
2019	2	0	0.7	1007	N/A
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

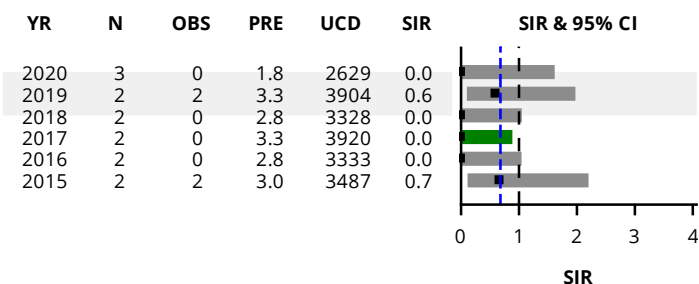
N/A: Number of predicted infections <1; no SIR calculated

Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICUs

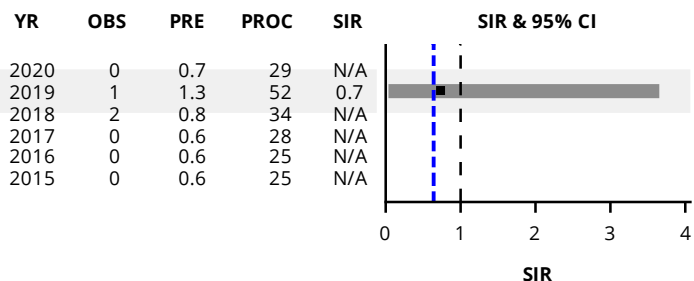


CAUTI - Adult/Pediatric Wards



Surgical Site Infections (SSI)

SSI - Colon Surgery



SSI - Abdominal Hysterectomy

YR	OBS	PRE	PROC	SIR
2020	N/A	N/A	N/A	N/A
2019	N/A	N/A	N/A	N/A
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

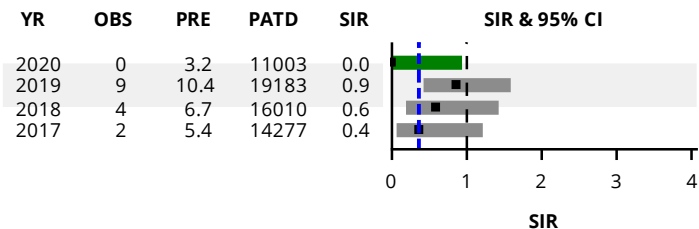
Healthcare Facility-Onset Laboratory Identified (LabID) Events

LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia

YR	OBS	PRE	PATD	SIR
2020	2	0.5	11652	N/A
2019	0	0.8	20033	N/A
2018	1	0.6	16897	N/A
2017	0	0.6	15215	N/A

N/A: Number of predicted infections <1; no SIR calculated

LabID - *C. difficile* Infection (CDI)



Data reported as of June 30, 2021

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

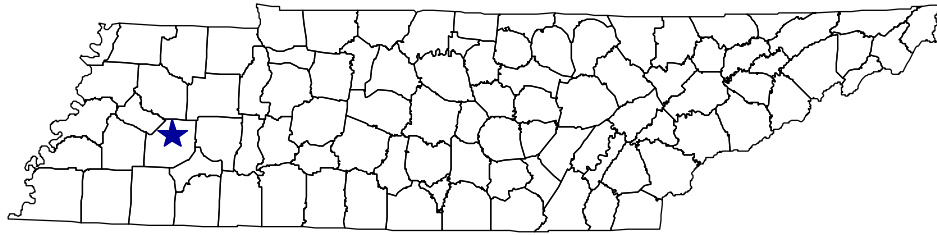
--- 2020 TN SIR

--- 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, 01/01/2019-12/31/2019

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	0.52
CAUTI	Adult/Pediatric Ward	N/A	N/A	N/A	N/A	N/A	0.78
SSI	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	0.80
LabID	MRSA bacteremia	0	0.0	102	N/A	N/A	1.19
	C. difficile infection	0	0.0	94	N/A	N/A	0.47

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

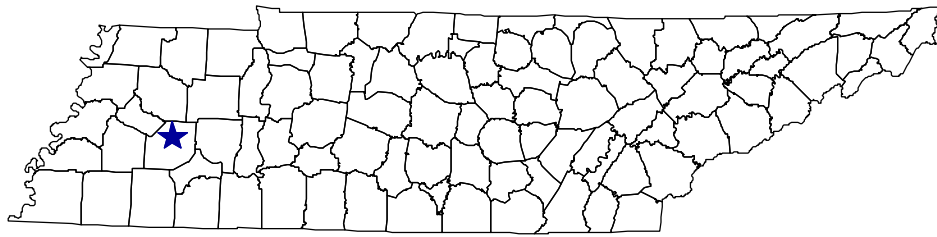
Healthcare Personnel Influenza Vaccination - '2019/2020' Influenza Season

This facility utilized the COVID-19 related CMS reporting exemption for the '2019/2020' influenza season. See the CMS website for more information.

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, 01/01/2020-12/31/2020

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	0.65
CAUTI	Adult/Pediatric Ward	N/A	N/A	N/A	N/A	N/A	0.68
SSI	Abdominal hysterectomy	N/A	N/A	N/A	N/A	N/A	1.01
LabID	MRSA bacteremia	N/A	N/A	N/A	N/A	N/A	1.23
	C. difficile infection	N/A	N/A	N/A	N/A	N/A	0.36

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

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

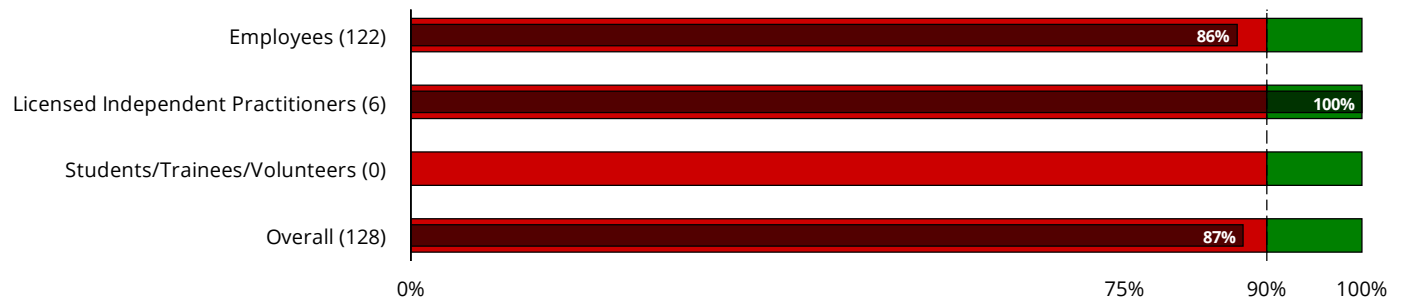
N/A: Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

*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 - '2020/2021' 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
2020	1	N/A	N/A	N/A	N/A
2019	1	N/A	N/A	N/A	N/A
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 Wards

YR	N	OBS	PRE	UCD	SIR
2020	1	N/A	N/A	N/A	N/A
2019	1	N/A	N/A	N/A	N/A
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
2020	N/A	N/A	N/A	N/A
2019	N/A	N/A	N/A	N/A
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
2020	N/A	N/A	N/A	N/A
2019	0	0.0	102	N/A
2018	0	0.0	1249	N/A

YR	OBS	PRE	PATD	SIR
2020	N/A	N/A	N/A	N/A
2019	0	0.0	94	N/A
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 June 30, 2021

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

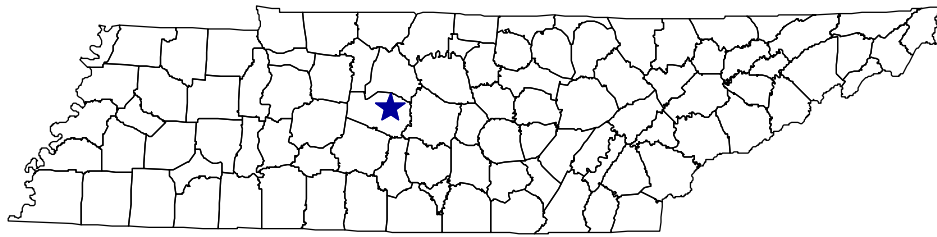
--- 2020 TN SIR

--- 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, 01/01/2019-12/31/2019

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	1513	0.00	(0.00, 2.63)	0.72
	Neonatal ICU	0	0.1	182	N/A	N/A	0.44
	Adult/Pediatric Ward	1	1.1	1728	0.89	(0.04, 4.38)	0.52
CAUTI	Adult/Pediatric ICU	0	2.0	2801	0.00	(0.00, 1.44)	0.74
	Adult/Pediatric Ward	0	2.3	3649	0.00	(0.00, 1.26)	0.78
SSI	Colon surgery	1	2.1	92	0.46	(0.02, 2.26)	0.94
	Abdominal hysterectomy	0	0.8	142	N/A	N/A	0.80
LabID	MRSA bacteremia	0	1.3	36546	0.00	(0.00, 2.15)	1.19
	C. difficile infection	21	23.9	32078	0.88	(0.56, 1.32)	0.47

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 - '2019/2020' Influenza Season

Healthcare Personnel Category (Total)



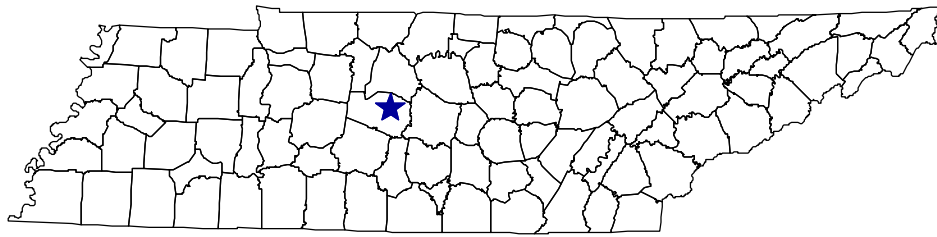
Healthcare Personnel Vaccinated (%)

■ 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, 01/01/2020-12/31/2020

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	1.4	1895	2.10	(0.53, 5.72)	0.91
	Neonatal ICU	0	0.0	130	N/A	N/A	0.62
	Adult/Pediatric Ward	2	1.2	1858	1.65	(0.28, 5.46)	0.65
CAUTI	Adult/Pediatric ICU	4	2.1	2942	1.83	(0.58, 4.41)	0.69
	Adult/Pediatric Ward	3	2.2	3369	1.36	(0.35, 3.71)	0.68
SSI	Colon surgery	2	2.0	93	0.96	(0.16, 3.16)	0.64
	Abdominal hysterectomy	0	0.5	87	N/A	N/A	1.01
LabID	MRSA bacteremia	2	1.4	36115	1.38	(0.23, 4.55)	1.23
	C. difficile infection	24	25.3	32053	0.95	(0.62, 1.39)	0.36

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

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

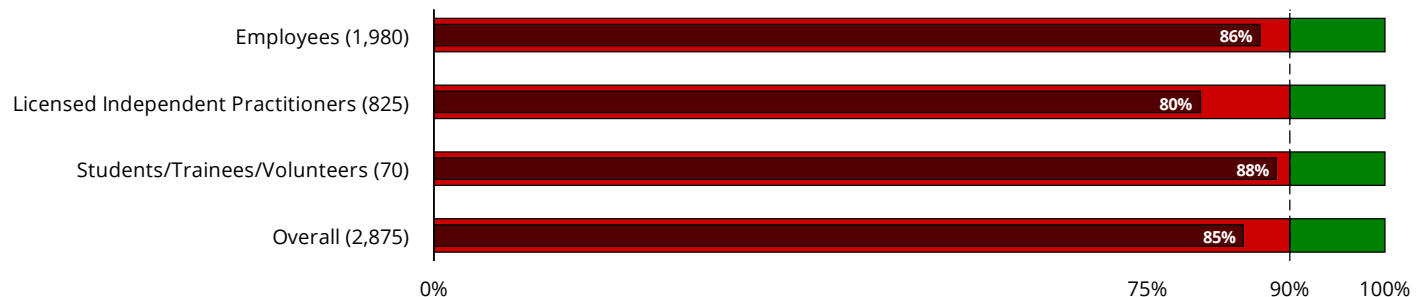
N/A: Data not shown for <50 device days or <20 procedures / SIR not calculated when <1 infection predicted

*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 - '2020/2021' Influenza Season

Healthcare Personnel Category (Total)

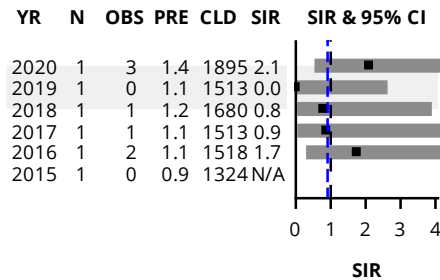


Healthcare Personnel Vaccinated (%)

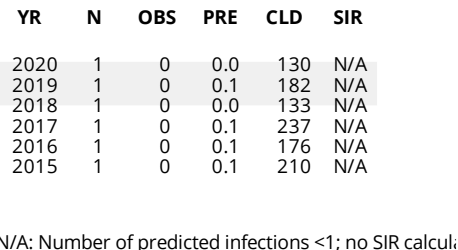
■ Below 90% ■ >90% (HHS Healthy People 2020 Goal)

Central Line-Associated Bloodstream Infections (CLABSI)

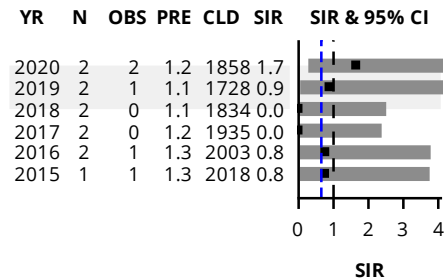
CLABSI - Adult/Pediatric ICUs



CLABSI - Neonatal ICUs

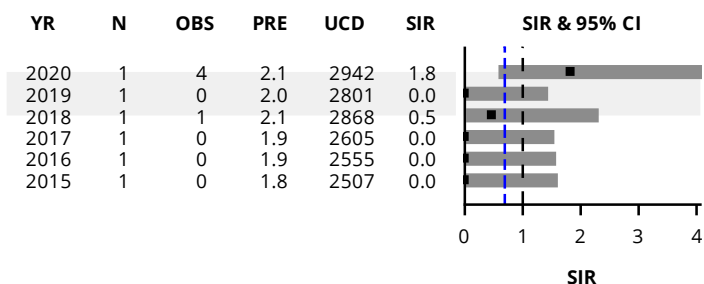


CLABSI - Adult/Pediatric Wards

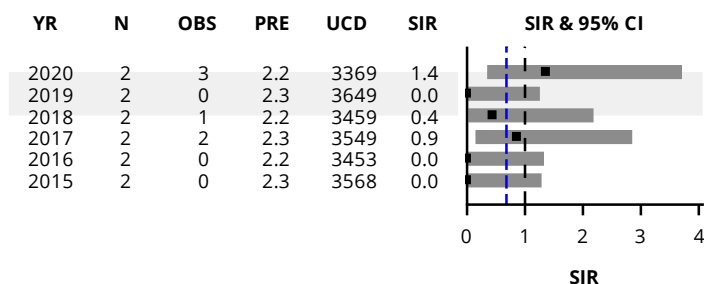


Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICUs

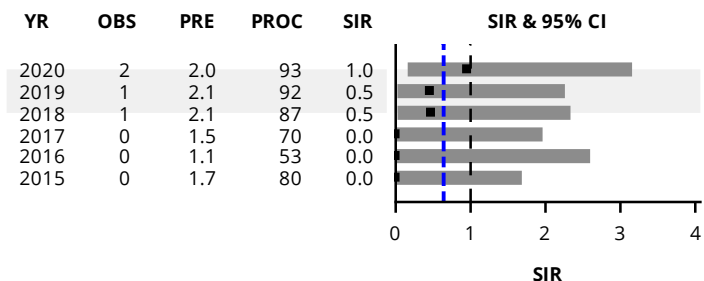


CAUTI - Adult/Pediatric Wards

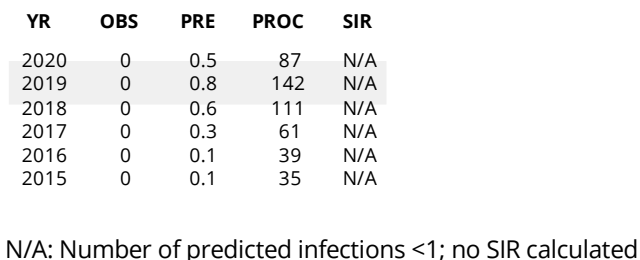


Surgical Site Infections (SSI)

SSI - Colon Surgery

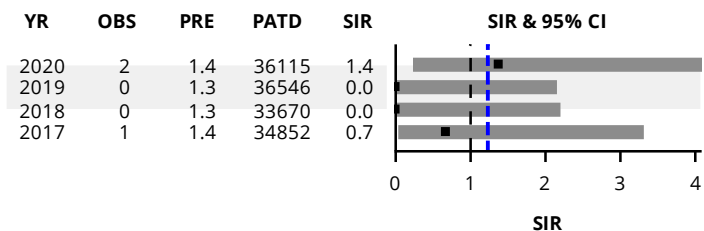


SSI - Abdominal Hysterectomy

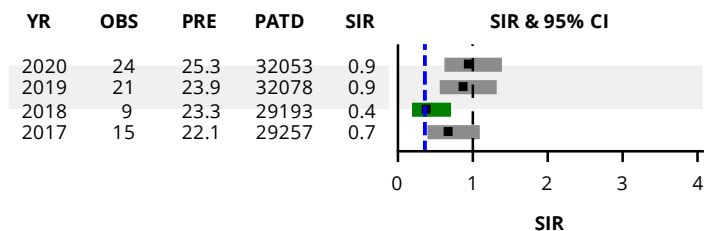


Healthcare Facility-Onset Laboratory Identified (LabID) Events

LabID - Methicillin-resistant *S. aureus* (MRSA) Bacteremia



LabID - *C. difficile* Infection (CDI)



Data reported as of June 30, 2021

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
 - - - 2020 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 for more than 2 days consecutive dates on the date of event and was either: present for any portion of the calendar day on the date of event or removed the day before the event. the infection is considered a CAUTI (see [Patient Guide to CAUTI](#)⁴⁵).

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 intravascular catheter that is inserted in a patient's blood vessel and terminates at or close to the heart or in one of the great vessels. 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](#)⁴⁶). 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 for greater than two consecutive days following the first access of the central line, in an inpatient location and remain eligible for CLABSI events until the day

⁴⁵ http://www.cdc.gov/hai/pdfs/uti/CA-UTI_tagged.pdf

⁴⁶ http://www.cdc.gov/hai/pdfs/bsi/BSI_tagged.pdf

after removal from the body or patient discharge, whichever comes first. the infection is considered a CLABSI (see [Patient Guide to CLABSI](#)⁴⁷).

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 ([Patient Guide to CDiff](#)⁴⁸)

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 less than or equal to 3 days after admission to the facility (i.e., days 1, 2, or 3 of admission).

Community-onset healthcare facility-associated (CO-HCFA): Community-onset (CO) LabID event specimen collected from an inpatient or an outpatient location from a patient who was discharged from the facility less than or equal to 28 days prior to the current date of stool specimen collection (*Clostridium difficile* infection LabID events only). The previous discharge must have been from an inpatient location within the same facility (in other words, an outpatient visit does not qualify as “admitted”, and therefore is not used to set the timeline for CO-HCFA).

Complex Admission/Readmission Standardized Infection Ratio (Complex A/R SIR): (See Standardized Infection Ratio) A standardized infection ratio calculated by NHSN for surgical site

⁴⁷ http://www.cdc.gov/hai/pdfs/bsi/BSI_tagged.pdf

⁴⁸ https://www.cdc.gov/hai/pdfs/cdiff/Cdiff_tagged-BW.pdf

infections, which only includes inpatient procedures, 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.

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 has a high degree of confidence 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 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.

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. A 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) for LabID events: LabID event specimen collected more than 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.

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 hygiene.

- Use of personal protective equipment such as gloves, gowns, eye protection 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 preventionists (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](#)⁴⁹.

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](#)⁵⁰).

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.

⁴⁹ http://www.cdc.gov/nhsn/PDFs/pscManual/12pscMDRO_CDADcurrent.pdf

⁵⁰ http://www.cdc.gov/mrsa/pdf/SHEA-mrsa_tagged.pdf

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](#)⁵¹ are available online.

NHSN operative procedure: A procedure that:

- 1) Is performed in any inpatient facility and/or outpatient procedure department (HOPD) where the selected NHSN operative procedure (s) are performed.
- 2) Takes place during an operation where at least one incision (including laparoscopic approach and cranial Burr holes) is made through the skin or mucous, or reoperation via an incision that was left open during a prior operative procedure
- 3) That is included in the [ICD-10-PCS](#) and/or [CPT](#) NHSN operative procedure code mapping

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 cranial Burr holes, incision may be closed by primary or non-primary closure before the patient leaves the OR.

Organ/space SSI: A surgical site infection that involves any part of the body, deeper than fascial/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).

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](#)⁵²).

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

⁵¹ <http://www.cdc.gov/nhsn/acute-care-hospital/index.html>

⁵² http://www.cdc.gov/HAI/pdfs/ssi/SSI_tagged.pdf

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 ([here](#)⁵³).

- Post-discharge surveillance: This is the process facilities 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 (including leg bags).

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

⁵³ https://www.cdc.gov/nhsn/pdfs/pscmanual/pcsmanual_current.pdf

Appendix B. Acronyms

A/R – admission/readmission
ASA – American Society of Anesthesiologists
CAUTI – catheter-associated urinary tract infection
CABG – coronary artery bypass graft surgery, includes both CBGB and CBGB
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
UCD – Urinary catheter days
VRE – vancomycin-resistant *Enterococcus*