West Virginia Health Care Authority

Healthcare-Associated Infection Public Reporting Program

2015

Patient Safety Graphs
Calendar Year - 2013

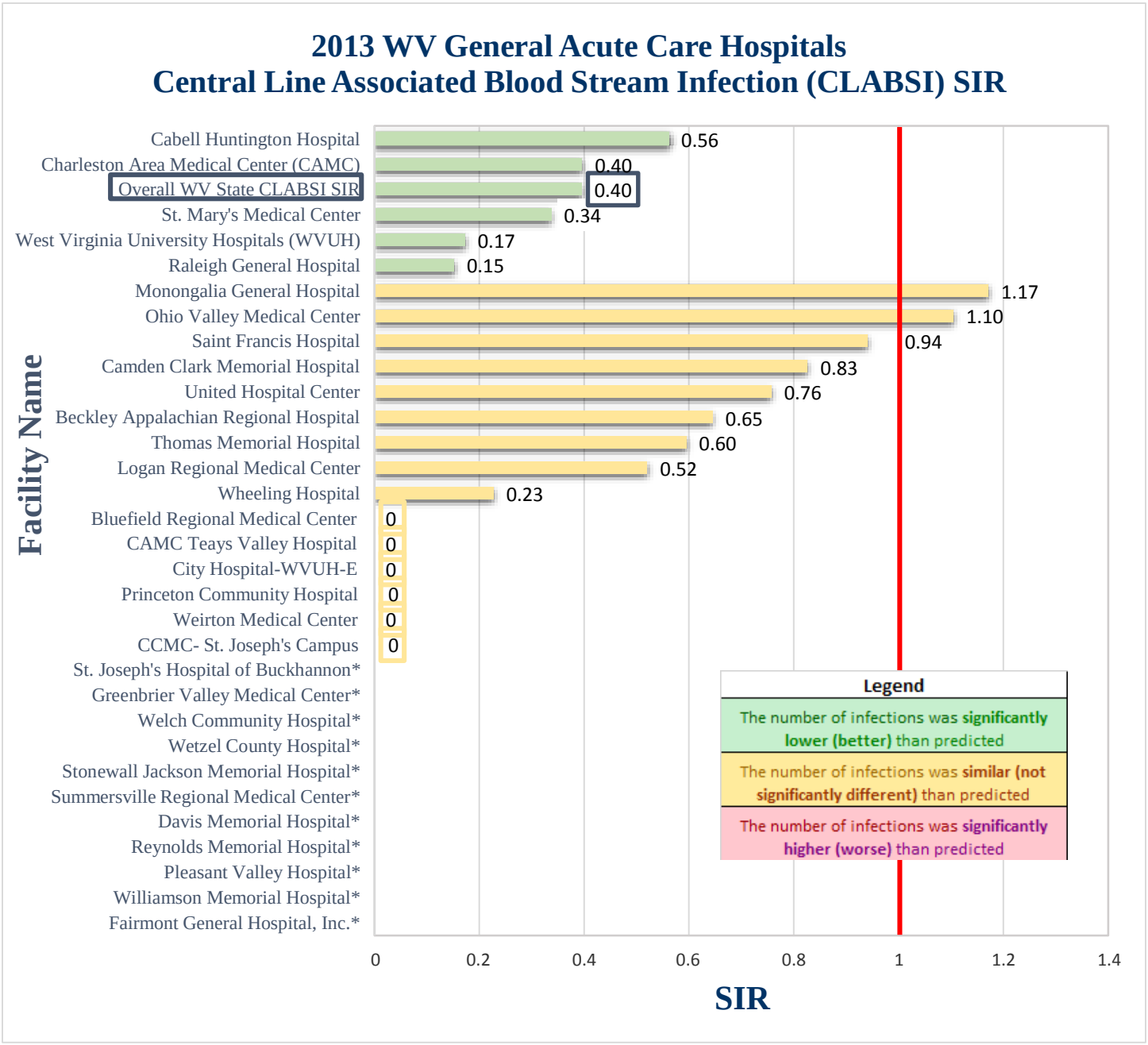
Earl Ray Tomblin
Governor

James L. Pitrolo, Board Chair
West Virginia Health Care Authority

West Virginia Health Care Authority
Healthcare-Associated Infection Public Reporting Program

2015 Patient Safety Graphs

Central Line Associated Bloodstream Infection (CLABSI)
Standardized Infection Ratio (SIR)
2013 Calendar Year



**Hospitals with a small number of predicted infections (too small to calculate SIR)*

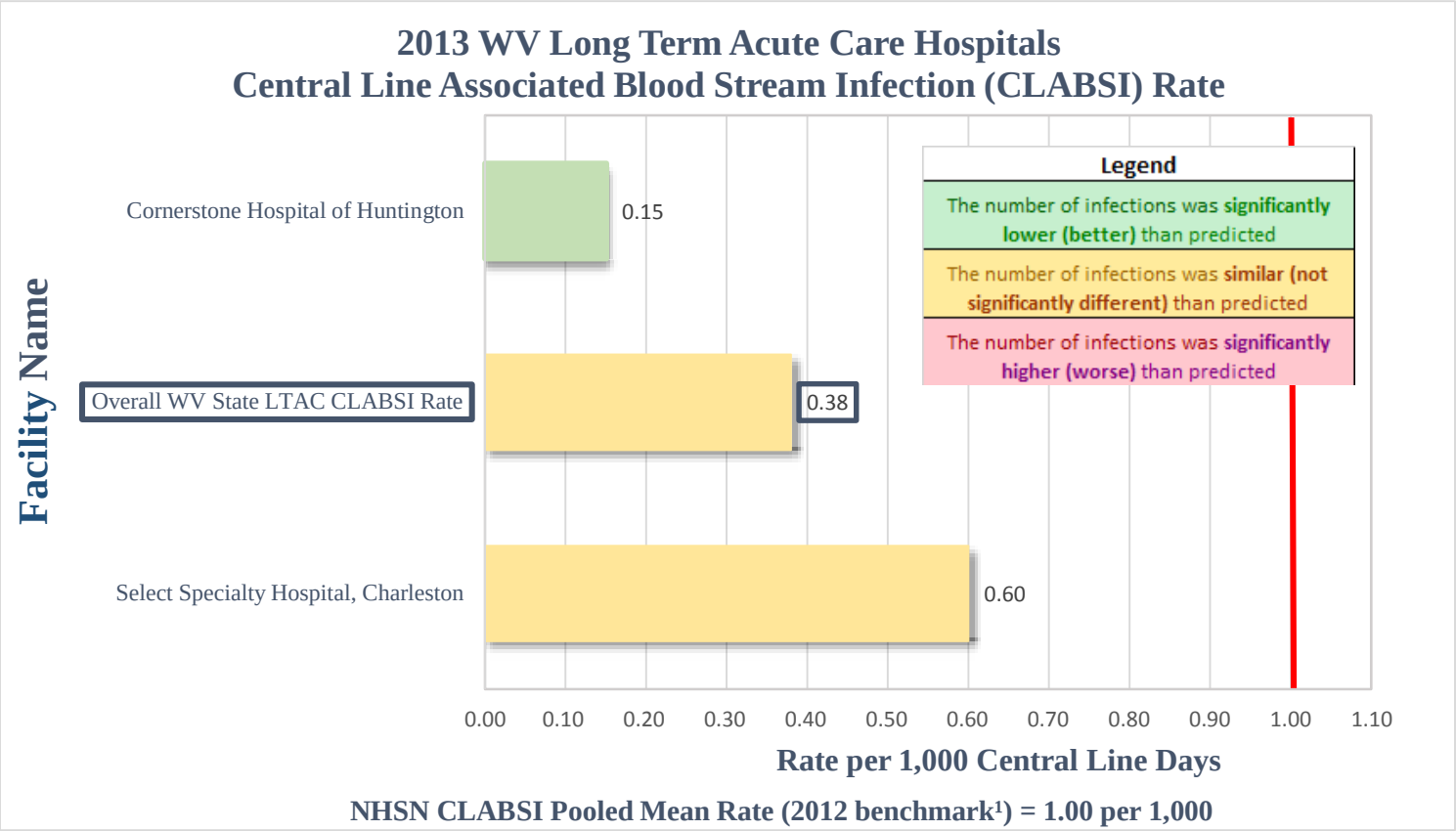
Note: The SIR is a summary measure that compares the actual number of CLABSI reported by the hospital to the number of CLABSI that were expected to occur, based on NHSN aggregate data for 2006-2008 and adjusted for several risk factors associated with HAI incidence. A SIR greater than 1.0 indicates that more HAIs were observed than expected, accounting for difference in the types of patients; a SIR less than 1.0 indicates that fewer HAIs were observed than expected. For example, a SIR of 1.20 indicates that the hospital had 20% more CLABSIs than expected; a SIR of 0.80 indicates that the hospital had 20% fewer CLABSIs than expected. The SIR is only calculated if the number of expected CLABSIs is ≥1. When the number expected is <1, the number of procedures performed is too low to calculate a precise SIR and comparative statistics.

Central Line Associated Blood Stream Infections (CLABSI) in General Acute Care Hospitals, All ICUs, 2013

Hospital	Hospital Performance Compared to NHSN National Baseline	Number of Infections	Number of Predicted Infections	Number of Central Line Days	Standardized Infection Ratio (SIR)	95% Confidence Interval for SIR
Cabell Huntington Hospital	✓	14	24.94	8888	0.56	0.32, 0.92
Charleston Area Medical Center (CAMC)	✓	24	60.54	25457	0.40	0.26, 0.58
St. Mary's Medical Center	✓	6	17.79	6697	0.34	0.14, 0.70
West Virginia University Hospitals (WVUH)	✓	5	28.91	11622	0.17	0.06, 0.38
Raleigh General Hospital	✓	1	6.57	3137	0.15	0.01, 0.75
Monongalia General Hospital	=	4	3.42	2322	1.17	0.37, 2.82
Ohio Valley Medical Center	=	3	2.72	1294	1.10	0.28, 3.00
Saint Francis Hospital	=	1	1.06	707	0.94	0.05, 4.65
Camden Clark Memorial Hospital	=	2	2.42	1614	0.83	0.14, 2.73
United Hospital Center	=	3	3.96	2643	0.76	0.19, 2.06
Beckley Appalachian Regional Hospital	=	1	1.55	1033	0.65	0.03, 3.18
Thomas Memorial Hospital	=	2	3.36	2253	0.60	0.10, 1.97
Logan Regional Medical Center	=	1	1.92	1281	0.52	0.03, 2.57
Wheeling Hospital	=	1	4.41	2937	0.23	0.01, 1.12
Bluefield Regional Medical Center	=	0	2.58	1229	0	0, 1.16
CCMC- St. Joseph's Campus	=	0	1.60	1131	0	0, 1.88
CAMC Teays Valley Hospital	=	0	1.29	863	0	0, 2.31
City Hospital-WVUH-E	=	0	2.53	1207	0	0, 1.18
Princeton Community Hospital	=	0	1.34	789	0	0, 2.24
Weirton Medical Center	=	0	1.45	965	0	0, 2.07
Davis Memorial Hospital	N/R	0	0.47	316	Too Small to Calculate	
Fairmont General Hospital, Inc.	N/R	0	0.66	437	Too Small to Calculate	
Greenbrier Valley Medical Center	N/R	0	0.94	629	Too Small to Calculate	
Pleasant Valley Hospital	N/R	0	0.33	221	Too Small to Calculate	
Reynolds Memorial Hospital	N/R	1	0.38	255	Too Small to Calculate	
St. Joseph's Hospital of Buckhannon	N/R	0	0.21	137	Too Small to Calculate	
Stonewall Jackson Memorial Hospital	N/R	2	0.33	218	Too Small to Calculate	
Summersville Regional Medical Center	N/R	0	0.24	161	Too Small to Calculate	
Welch Community Hospital	N/R	0	0.27	177	Too Small to Calculate	
Wetzel County Hospital	N/R	0	0.02	12	Too Small to Calculate	
Williamson Memorial Hospital	N/R	0	0.23	119	Too Small to Calculate	
West Virginia Total	✓	**71**	**178.86**	**81028**	**0.40**	**0.31, 0.50**

Legend:	
✓	The number of infections was **significantly lower (better)** than predicted
=	The number of infections was **similar (not significantly different)** than predicted
▽	The number of infections was **significantly higher (worse)** than predicted
Not reportable (N/R)	General Acute Care ICU patients had too few central line days to calculate a reliable SIR. When SIR cannot be calculated, a comparison to national data is not possible.
Too Small to Calculate	The expected number of infections was below 1

Central Line Associated Bloodstream Infection (CLABSI) Rate
Long Term Acute Care Hospitals
2013 Calendar Year



[1]NHSN Report, data summary for 2012, Device-associated Module. Am J Infect Control 2013;41:1148-66

Central Line Associated Bloodstream Infections (CLABSI) for Long Term Acute Care Hospitals, 2013

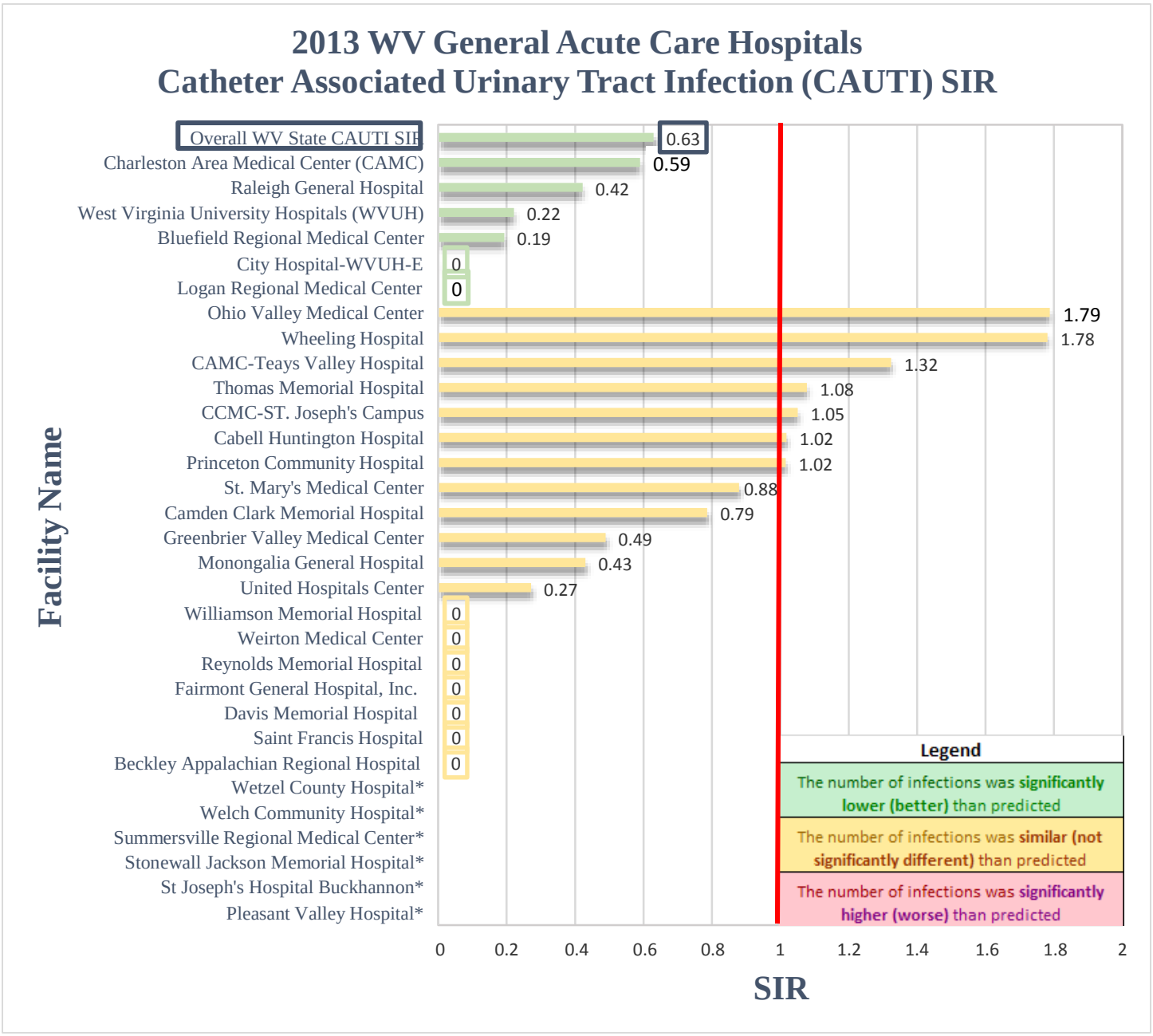
Hospital	Hospital Performance Compared to the National Mean Rate[1]	Number of Infections	Number of Central Line Days	Rate of Central Line Associated Bloodstream Infections*	NHSN Pooled Mean Rate[1]
Cornerstone Hospital of Huntington	✓	1	6637	0.15	1.00
Select Specialty Hospital, Charleston	=	4	6662	0.60	1.00
West Virginia Total	=	**5**	**13299**	**0.38**	**1.00**

*Rate per 1,000 Central Line days

Legend:	
✓	The rate of infections was **significantly lower (better)** than the national NHSN pooled mean for 2012
=	The rate of infections was **similar (not significantly different)** than the national NHSN pooled mean for 2012
▽	The rate of infections was **significantly higher (worse)** than the national NHSN pooled mean for 2012
Not reportable (N/R)	Long Term Acute Care patients had too few central line days to calculate a reliable SIR. When SIR cannot be calculated, a comparison to national data is not possible.
Too Small to Calculate	The expected number of infections was below 1

[1]NHSN Report, data summary for 2012, Device-associated Module. Am J Infect Control 2013;41:1148-66

Catheter Associated Urinary Tract Infection (CAUTI)
Standardized Infection Ratio (SIR)
2013 Calendar Year



**Hospitals with a small number of predicted infections (too small to calculate SIR)*

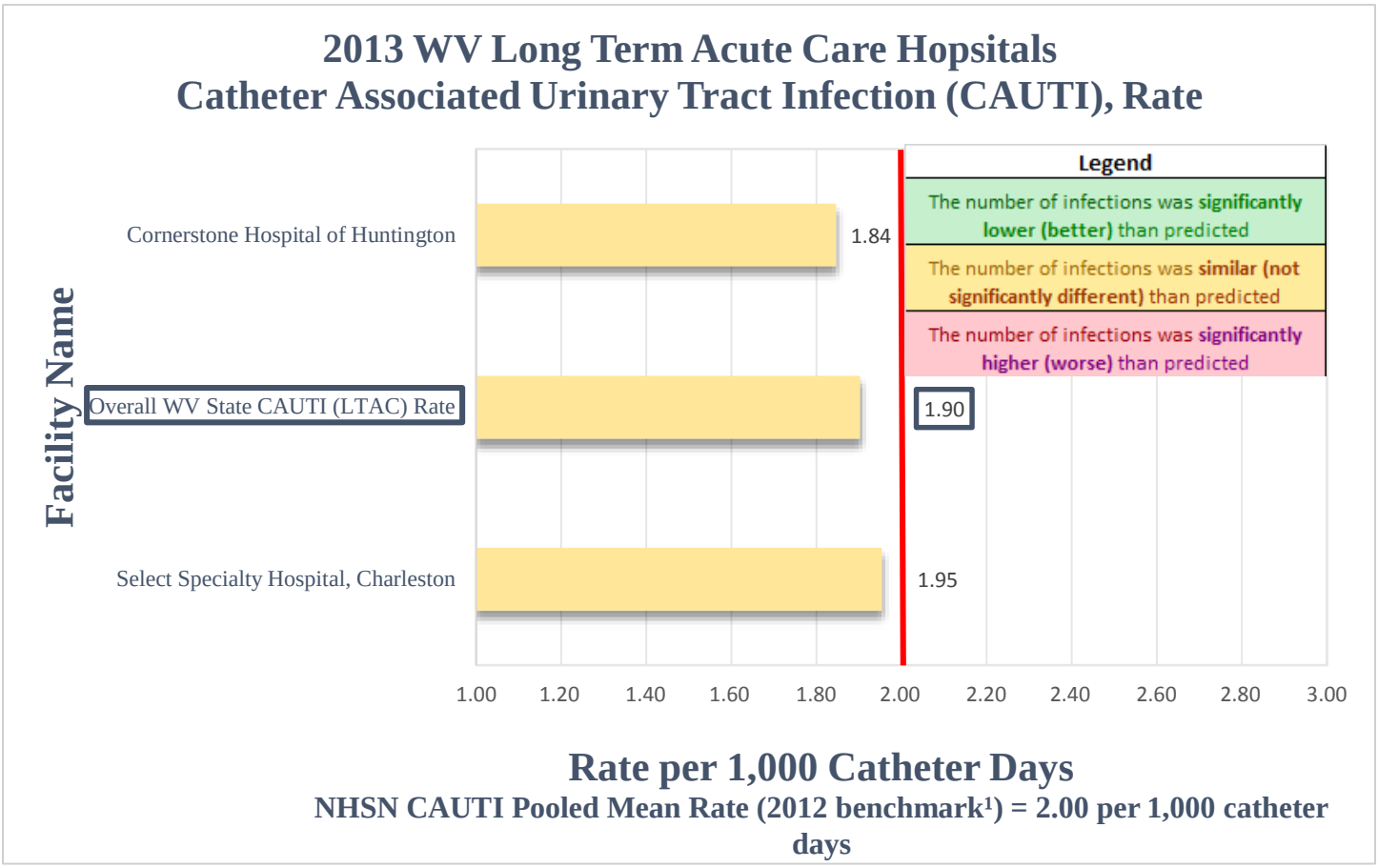
Note: The SIR is a summary measure that compares the actual number of CAUTI reported by the hospital to the number of CAUTI that were expected to occur, based on NHSN aggregate data for 2006-2008 and adjusted for several risk factors associated with HAI incidence. A SIR greater than 1.0 indicates that more HAIs were observed than expected, accounting for difference in the types of patients; a SIR less than 1.0 indicates that fewer HAIs were observed than expected. For example, a SIR of 1.20 indicates that the hospital had 20% more CAUTIs than expected; a SIR of 0.80 indicates that the hospital had 20% fewer CAUTIs than expected. The SIR is only calculated if the number of expected CAUTIs is ≥1. When the number expected is <1, the number of procedures performed is too low to calculate a precise SIR and comparative statistics.

Catheter Associated Urinary Tract Infections (CAUTI) in General Acute Care Hospitals, All ICUs, 2013

Hospital	Hospital Performance Compared to NHSN National Baseline	Number of Infections	Number of Predicted Infections	Number of Urinary Catheter Days	Standardized Infection Ratio (SIR)	95% Confidence Interval for SIR
Charleston Area Medical Center (CAMC)	✓	39	66.97	25536	0.59	0.42, 0.79
Raleigh General Hospital		5	11.85	5142	0.42	0.16, 0.94
West Virginia University Hospitals (WVUH)	✓	6	27.10	11704	0.22	0.90, 0.46
Bluefield Regional Medical Center		1	5.19	2257	0.19	0.01, 0.95
City Hospital-WVUH-E	✓	0	5.43	2360	0	0, 0.55
Logan Regional Medical Center		0	4.21	2991	0	0, 0.71
Ohio Valley Medical Center	=	8	4.47	1945	1.79	0.83, 3.40
Wheeling Hospital		10	5.62	4680	1.78	0.90, 3.17
CAMC-Teays Valley Hospital	=	2	1.52	1162	1.32	0.22, 4.37
Thomas Memorial Hospital		4	3.71	2853	1.08	0.34, 2.60
CCMC-St. Joseph's Campus	=	2	1.90	1179	1.05	0.17, 3.47
Cabell Huntington Hospital		26	25.53	9893	1.02	0.68, 1.47
Princeton Community Hospital	=	4	3.94	2539	1.02	0.32, 2.45
St. Mary's Medical Center		19	21.63	8431	0.88	0.55, 1.35
Camden Clark Memorial Hospital	=	3	3.82	3182	0.79	0.20, 2.14
Greenbrier Valley Medical Center		1	2.04	1573	0.49	0.02, 2.41
Monongalia General Hospital	=	2	4.65	3528	0.43	0.07, 1.42
United Hospitals Center	=	1	3.69	3079	0.27	0.01, 1.33
Fairmont General Hospital, Inc.	=	0	1.05	808	0	0, 2.85
Williamson Memorial Hospital		0	1.06	530	0	0, 2.83
Reynolds Memorial Hospital	=	0	1.13	868	0	0, 2.66
Davis Memorial Hospital		0	1.05	805	0	0, 2.86
Weirton Medical Center	=	0	1.54	1185	0	0, 1.95
Saint Francis Hospital		0	1.77	1362	0	0, 1.70
Pleasant Valley Hospital	N/R	1	0.64	495	Too Small to Calculate	
Summersville Regional Medical Center	N/R	0	0.57	435	Too Small to Calculate	
Stonewall Jackson Memorial Hospital	N/R	1	0.75	578	Too Small to Calculate	
Wetzel County Hospital	N/R	0	0.13	65	Too Small to Calculate	
Welch Community Hospital	N/R	0	0.56	433	Too Small to Calculate	
St. Joseph's Hospital of Buckhannon	N/R	0	0.34	262	Too Small to Calculate	
West Virginia Total		**135**	**214.78**	**103282**	**0.63**	**0.53, 0.74**

Legend:	
✓	The number of infections was **significantly lower (better)** than predicted
=	The number of infections was **similar (not significantly different)** than predicted
▽	The number of infections was **significantly higher (worse)** than predicted
Not reportable (N/R)	General Acute Care ICU patients had too few urinary catheter days to calculate a reliable SIR. When SIR cannot be calculated, a comparison to national data is not possible.
Too Small to Calculate	The expected number of infections was below 1

Catheter Associated Urinary Tract Infection (CAUTI) Rate
Long Term Acute Care Hospitals
2013 Calendar Year



[1]NHSN Report, data summary for 2012, Device-associated Module. Am J Infect Control 2013;41:1148-66

Catheter Associated Urinary Tract Infections (CAUTI) for Long Term Acute Care Hospitals, 2013

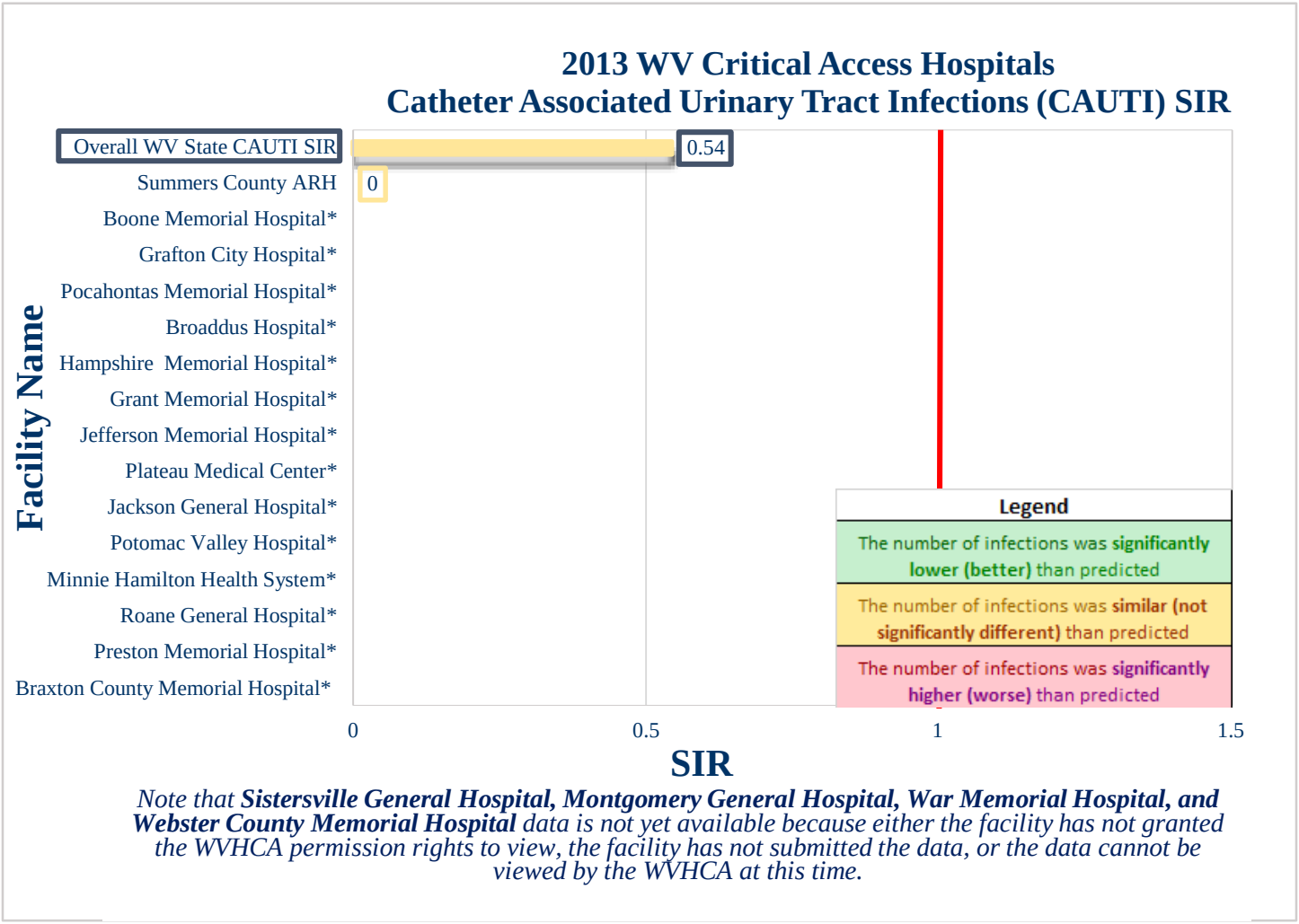
Hospital	Hospital Performance Compared to the National Mean Rate[1]	Number of Infections	Number of Urinary Catheter Days	Rate of Urinary Catheter Infections*	NHSN Pooled Mean Rate[1]
Select Specialty Hospital, Charleston		12	6152	1.95	2.00
Cornerstone Hospital of Huntington		12	6507	1.84	2.00
West Virginia Total		**24**	**12659**	**1.90**	**2.00**

* Rate per 1,000 Catheter days

Legend:	
	The rate of infections was **significantly lower (better)** than the national NHSN pooled mean for 2012
	The rate of infections was **similar (not significantly different)** than the national NHSN pooled mean for 2012
	The rate of infections was **significantly higher (worse)** than the national NHSN pooled mean for 2012
Not reportable (N/R)	Long Term Acute Care patients had too few urinary catheter days to calculate a reliable SIR. When SIR cannot be calculated, a comparison to national data is not possible.
Too Small to Calculate	The expected number of infections was below 1

[1]NHSN Report, data summary for 2012, Device-associated Module. Am J Infect Control 2013;41:1148-66

Catheter Associated Urinary Tract Infection (CAUTI)
Standard Infection Ratio (SIR)
2013 Calendar Year



*Note that **Sistersville General Hospital, Montgomery General Hospital, War Memorial Hospital, and Webster County Memorial Hospital** data is not yet available because either the facility has not granted the WVHCA permission rights to view, the facility has not submitted the data, or the data cannot be viewed by the WVHCA at this time.*

**Hospitals with a small number of predicted infections (too small to calculate SIR)*

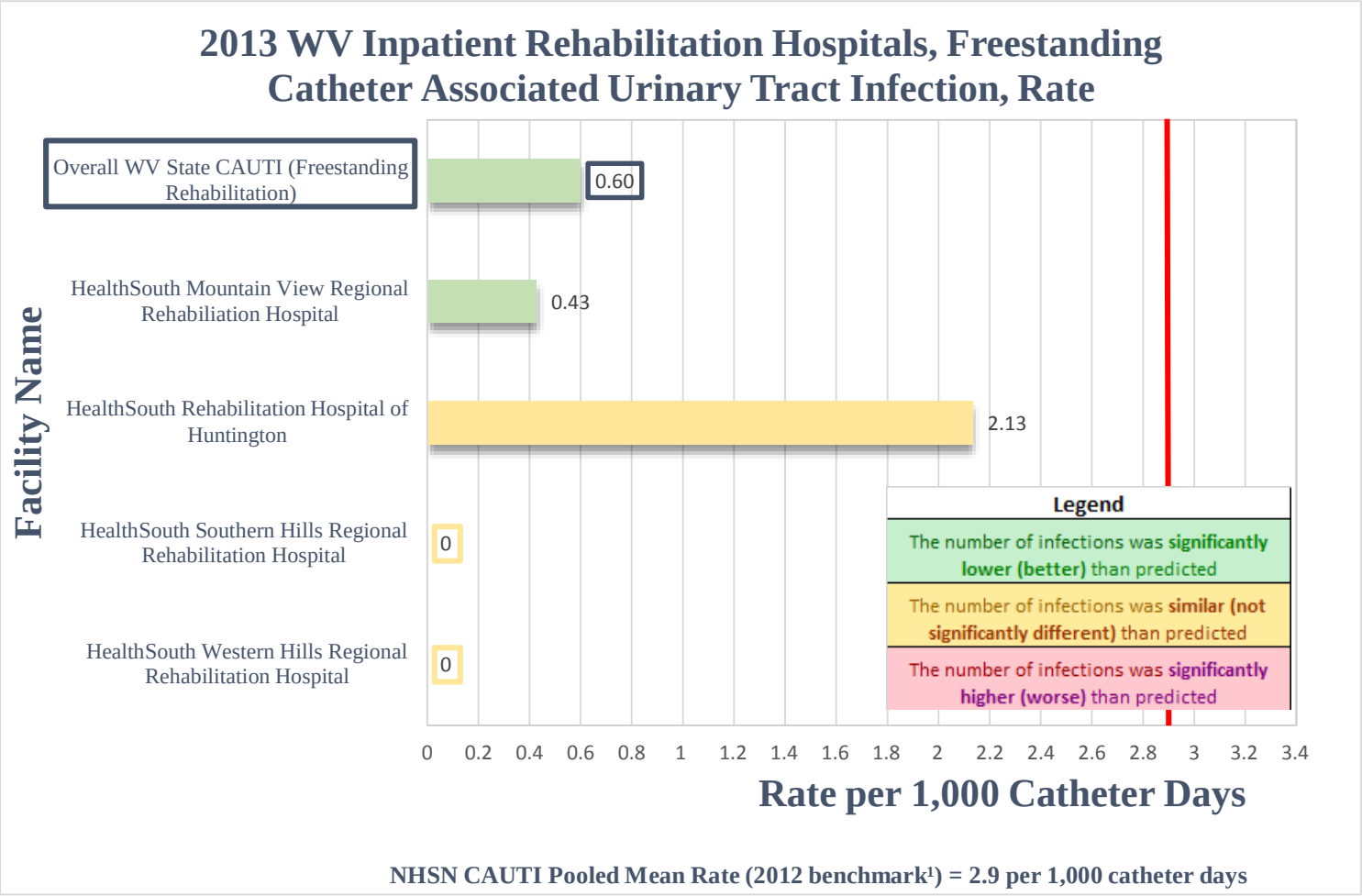
Note: The SIR is a summary measure that compares the actual number of CAUTI reported by the hospital to the number of CAUTI that were expected to occur, based on NHSN aggregate data for 2006-2008 and adjusted for several risk factors associated with HAI incidence. A SIR greater than 1.0 indicates that more HAIs were observed than expected, accounting for difference in the types of patients; a SIR less than 1.0 indicates that fewer HAIs were observed than expected. For example, a SIR of 1.20 indicates that the hospital had 20% more CAUTIs than expected; a SIR of 0.80 indicates that the hospital had 20% fewer CAUTIs than expected. The SIR is only calculated if the number of expected CAUTIs is ≥1. When the number expected is <1, the number of procedures performed is too low to calculate a precise SIR and comparative statistics.

Catheter Associated Urinary Tract Infections, Critical Access Hospitals, 2013						
Hospital	Hospital Performance Compared to NHSN National Baseline	Number of Infections	Number of Urinary Catheter Days	Number of Predicted Infections	Standardized Infection Ratio (SIR)	95% Confidence Interval for SIR
Summers County ARH		0	654	1.24	0	0, 2.41
Braxton County Memorial Hospital	N/R	0	266	0.43	Too Small To Calculate	
Preston Memorial Hospital	N/R	0	45	0.06	Too Small To Calculate	
Roane General Hospital	N/R	1	47	0.08	Too Small To Calculate	
Minnie Hamilton Health System	N/R	0	214	0.34	Too Small To Calculate	
Potomac Valley Hospital	N/R	0	125	0.25	Too Small To Calculate	
Jackson General Hospital	N/R	0	190	0.25	Too Small To Calculate	
Plateau Medical Center	N/R	0	283	0.37	Too Small To Calculate	
Jefferson Memorial Hospital	N/R	1	197	0.26	Too Small To Calculate	
Grant Memorial Hospital	N/R	0	290	0.38	Too Small To Calculate	
Hampshire Memorial Hospital	N/R	1	328	0.62	Too Small To Calculate	
Pocahontas Memorial Hospital	N/R	0	126	0.20	Too Small To Calculate	
Grafton City Hospital	N/R	0	62	0.11	Too Small To Calculate	
Boone Memorial Hospital	N/R	0	211	0.34	Too Small To Calculate	
Broaddus Hospital	N/R	0	251	0.48	Too Small To Calculate	
Sistersville General Hospital	~	~	~	~	~	~
Montgomery General Hospital	~	~	~	~	~	~
War Memorial Hospital	~	~	~	~	~	~
Webster County Memorial Hospital	~	~	~	~	~	~

Legend:	
	The number of infections was **significantly lower (better)** than predicted
	The number of infections was **similar (not significantly different)** than predicted
	The number of infections was **significantly higher (worse)** than predicted
Not reportable (N/R)	Critical Access patients had too few urinary catheter days to calculate a reliable SIR. When SIR cannot be calculated, a comparison to national data is not possible.
Too Small to Calculate	The expected number of infections was below 1

Note that Sistersville General Hospital, Montgomery General Hospital, War Memorial Hospital, and Webster County Memorial Hospital data is not yet available because either the facility has not granted the WVHCA permission rights to view, the facility has not submitted the data, or the data cannot be viewed by the WVHCA at this time.

Catheter Associated Urinary Tract Infection (CAUTI) Rate
Inpatient Rehabilitation Facilities, Freestanding
2013 Calendar Year



NHSN CAUTI Pooled Mean Rate (2012 benchmark[1]) = 2.9 per 1,000 catheter days

[1]NHSN Report, data summary for 2012, Device-associated Module. Am J Infect Control 2013;41:1148-66

Catheter Associated Urinary Tract Infections (CAUTI) for Rehabilitation Hospitals- Freestanding, 2013

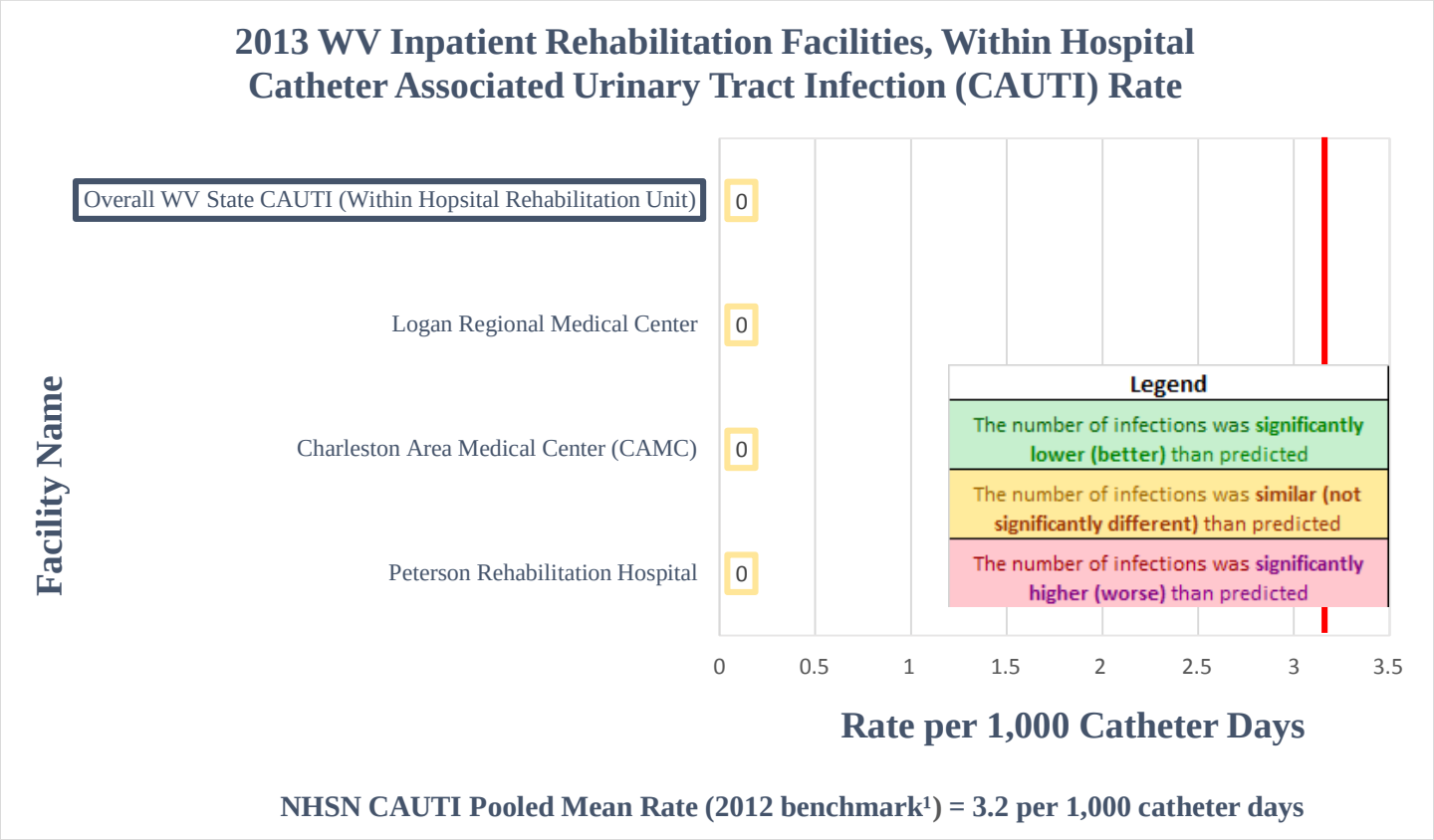
Hospital	Hospital Performance Compared to the National Mean Rate[1]	Number of Infections	Number of Urinary Catheter Days	Rate of Urinary Catheter Infections*	NHSN Pooled Mean Rate[1]
HealthSouth Mountain View Regional Rehabiliation Hospital		1	2340	0.43	2.9
HealthSouth Rehabilitation Hospital of Huntington		2	937	2.13	2.9
HealthSouth Western Hills Regional Rehabilitation Hospital		0	938	0	2.9
HealthSouth Southern Hills Regional Rehabilitation Hospital		0	749	0	2.9
West Virginia Total, Freestanding Adult Rehab Facilities		**3**	**4964**	**0.60**	**2.9**

* Rate per 1,000 Catheter days

Legend:	
	The rate of infections was **significantly lower (better)** than the national NHSN pooled mean for 2012
	The rate of infections was **similar (not significantly different)** than the national NHSN pooled mean for 2012
	The rate of infections was **significantly higher (worse)** than the national NHSN pooled mean for 2012
Not reportable (N/R)	Rehabilitation patients had too few urinary catheter days to calculate a reliable SIR. When SIR cannot be calculated, a comparison to national data is not possible.
Too Small to Calculate	The expected number of infections was below 1

[1]NHSN Report, data summary for 2012, Device-associated Module. Am J Infect Control 2013;41:1148-66

Catheter Associated Urinary Tract Infection (CAUTI) Rate
Inpatient Rehabilitation Facilities, Within Hospital
2013 Calendar Year



NHSN CAUTI Pooled Mean Rate (2012 benchmark[1]) = 3.2 per 1,000 catheter days

[1]NHSN Report, data summary for 2012, Device-associated Module. Am J Infect Control 2013;41:1148-66

Catheter Associated Urinary Tract Infections (CAUTI) for Rehabilitation Hospitals- Within Hospitals, 2013

Hospital	Hospital Performance Compared to the National Mean Rate[1]	Number of Infections	Number of Urinary Catheter Days	Rate of Urinary Catheter Infections*	NHSN Pooled Mean Rate[1]
Peterson Rehabilitation Hospital	=	0	405	0	3.2
Charleston Area Medical Center (CAMC)	=	0	353	0	3.2
Logan Regional Medical Center	=	0	141	0	3.2
West Virginia Total, Rehabilitation Unit Within Hospital	✓	**0**	**899**	**0**	**3.2**

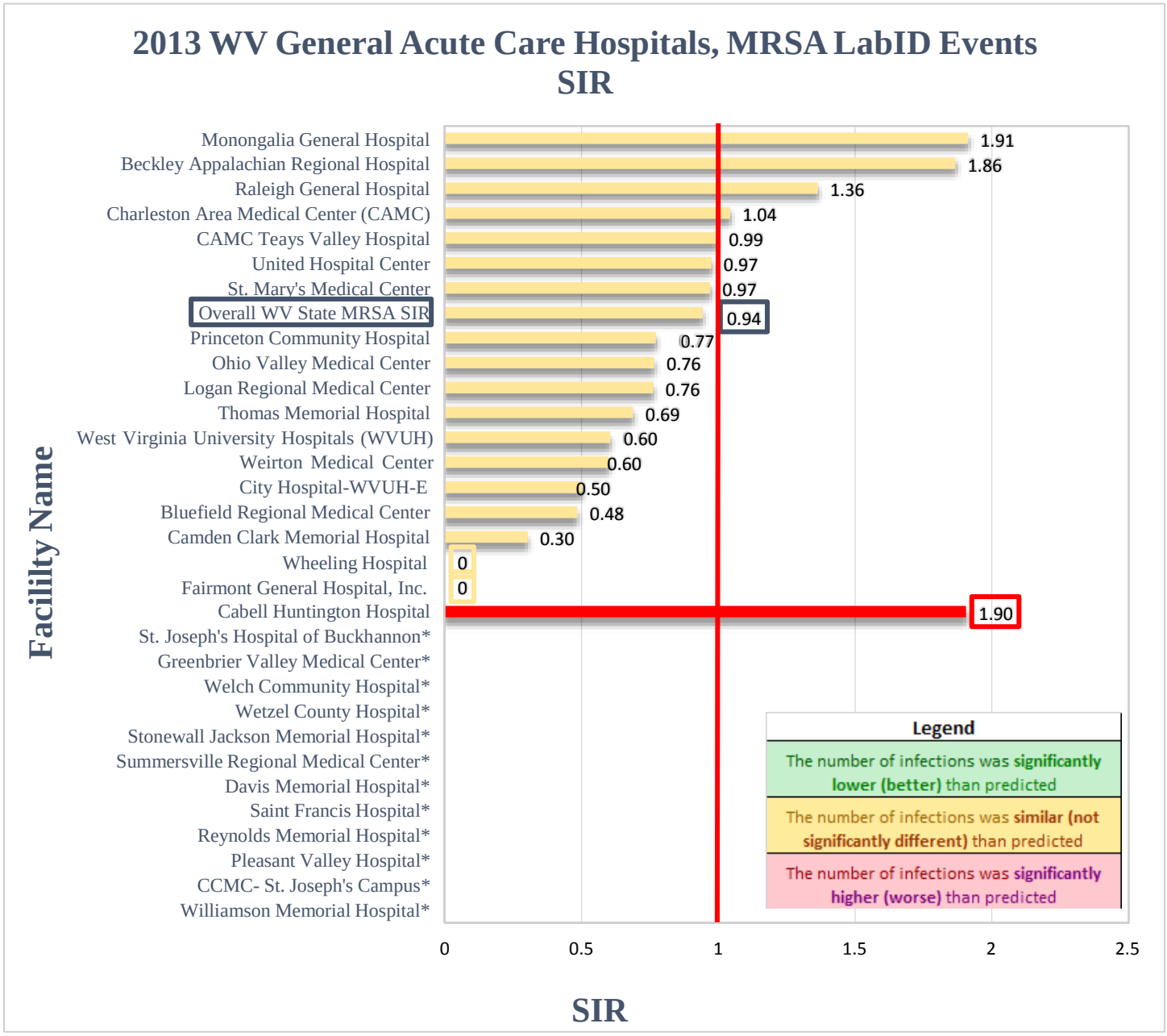
* Rate per 1,000 Catheter days

Legend:	
✓	The rate of infections was **significantly lower (better)** than the national NHSN pooled mean for 2012
=	The rate of infections was **similar (not significantly different)** than the national NHSN pooled mean for 2012
▽	The rate of infections was **significantly higher (worse)** than the national NHSN pooled mean for 2012
Not reportable (N/R)	Rehabilitation patients had too few urinary catheter days to calculate a reliable SIR. When SIR cannot be calculated, a comparison to national data is not possible.
Too Small to Calculate	The expected number of infections was below 1

[1]NHSN Report, data summary for 2012, Device-associated Module. Am J Infect Control 2013;41:1148-66

MDRO/CDI Module LABID Event Reporting

2013 Calendar Year



**Hospitals with a small number of predicted infections (too small to calculate SIR)*

Note: The SIR is a summary measure that compares the actual number of MRSA Bacteremia LabID reported by the hospital to the number of MRSA Bacteremia LabID that were expected to occur, based on NHSN aggregate data for 2006-2008 and adjusted for several risk factors associated with HAI incidence. A SIR greater than 1.0 indicates that more HAIs were observed than expected, accounting for difference in the types of patients; a SIR less than 1.0 indicates that fewer HAIs were observed than expected. For example, a SIR of 1.20 indicates that the hospital had 20% more MRSA Bacteremia LabIDs than expected; a SIR of 0.80 indicates that the hospital had 20% fewer MRSA Bacteremia LabIDs than expected. The SIR is only calculated if the number of expected MRSA Bacteremia LabIDs is ≥1. When the number expected is <1, the number of procedures performed is too low to calculate a precise SIR and comparative statistics.

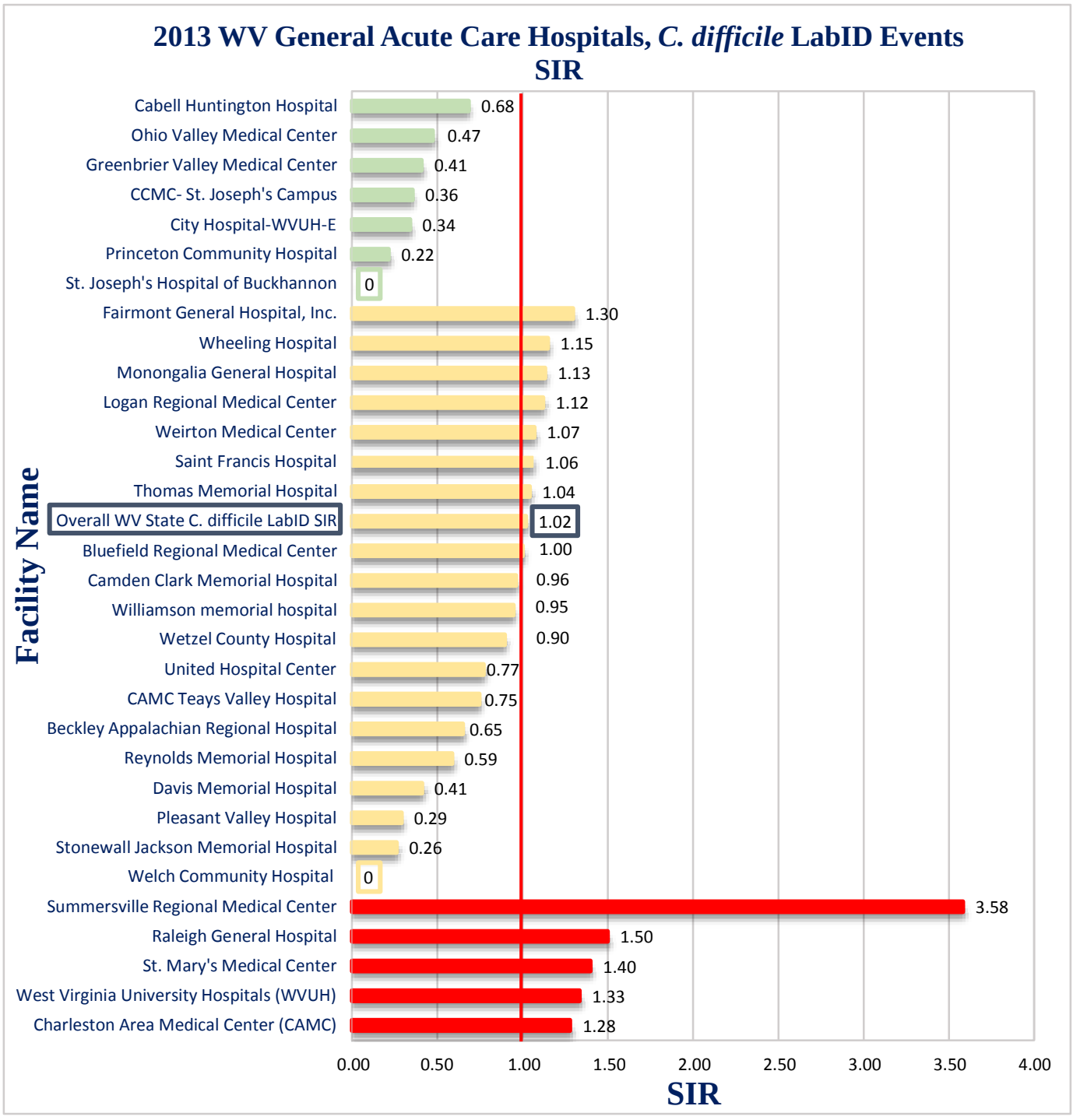
MDRO/CDI Module LABID Event Reporting

Methicillin-resistant *Staphylococcus aureus* (MRSA) Infections in General Acute Care Hospitals, 2013

Hospital	Hospital Performance Compared To NHSN National Baseline	Number of MRSA Infections	Number of Predicted MRSA Infections	Number of Patient Days	Standardized Infection Ratio (SIR)	95% Confidence Interval for SIR
Monongalia General Hospital		3	1.57	33808	1.91	0.49, 5.20
Beckley Appalachian Regional Hospital		4	2.15	26089	1.86	0.59, 4.49
Raleigh General Hospital		5	3.67	55432	1.36	0.50, 3.02
Charleston Area Medical Center (CAMC)		21	20.20	200018	1.04	0.66, 1.56
CAMC Teays Valley Hospital		1	1.01	8165	0.99	0.05, 4.89
United Hospital Center		3	3.09	57071	0.97	0.25, 2.64
St. Mary's Medical Center		8	8.27	100499	0.97	0.45, 1.84
Princeton Community Hospital		2	2.60	45519	0.77	0.13, 2.54
Ohio Valley Medical Center		2	2.62	38599	0.76	0.13, 2.52
Logan Regional Medical Center		2	2.63	25642	0.76	0.13, 2.51
Thomas Memorial Hospital		2	2.92	49696	0.69	0.12, 2.27
West Virginia University Hospitals (WVUH)		7	11.64	143740	0.60	0.26, 1.19
Weirton Medical Center		1	1.67	29063	0.60	0.03, 2.95
City Hospital-WVUH-E		1	2.01	40524	0.50	0.03, 2.46
Bluefield Regional Medical Center		1	2.07	17952	0.48	0.02, 2.38
Camden Clark Memorial Hospital		1	3.32	80352	0.30	0.02, 1.49
Fairmont General Hospital, Inc.		0	1.08	27428	0	0, 2.78
Cabell Huntington Hospital		12	6.31	94917	1.90	1.03, 3.23
Williamson Memorial hospital	N/R	0	0.40	7362	Too Small To Calculate	
CCMC- St. Joseph's Campus	N/R	1	0.68	18986	Too Small To Calculate	
Pleasant Valley Hospital	N/R	0	0.44	6743	Too Small To Calculate	
Reynolds Memorial Hospital	N/R	0	0.44	10848	Too Small To Calculate	
Saint Francis Hospital	N/R	0	0.86	18495	Too Small To Calculate	
Davis Memorial Hospital	N/R	1	0.65	15065	Too Small To Calculate	
Summersville Regional Medical Center	N/R	1	0.43	8352	Too Small To Calculate	
Stonewall Jackson Memorial Hospital	N/R	1	0.44	8497	Too Small To Calculate	
Wetzel County Hospital	N/R	0	0.14	3807	Too Small To Calculate	
Welch Community Hospital	N/R	0	0.15	1961	Too Small To Calculate	
Greenbrier Valley Medical Center	N/R	0	0.93	16665	Too Small To Calculate	
St. Joseph's Hospital of Buckhannon	N/R	1	0.22	5233	Too Small To Calculate	

Legend:	
	The number of infections was **significantly lower (better)** than predicted
	The number of infections was **similar (not significantly different)** than predicted
	The number of infections was **significantly higher (worse)** than predicted
Not reportable (N/R)	General Acute Care Hospital inpatients had too few patient days to calculate a reliable SIR. When SIR cannot be calculated, a comparison to national data is not possible.
Too Small to Calculate	The expected number of infections was below 1

2013 WV General Acute Hospitals MDRO CDI C. *difficile* LabID SIR
2013 Calendar Year



Note: The SIR is a summary measure that compares the actual number of MDRO CDI C.Diff LabID reported by the hospital to the number of MDRO CDI C.Diff LabID that were expected to occur, based on NHSN aggregate data for 2006-2008 and adjusted for several risk factors associated with HAI incidence. A SIR greater than 1.0 indicates that more HAIs were observed than expected, accounting for difference in the types of patients; a SIR less than 1.0 indicates that fewer HAIs were observed than expected. For example, a SIR of 1.20 indicates that the hospital had 20% more MDRO CDI C.Diff LabIDs than expected; a SIR of 0.80 indicates that the hospital had 20% fewer MDRO CDI C.Diff LabIDs than expected. The SIR is only calculated if the number of expected MDRO CDI C.Diff LabIDs is ≥1. When the number expected is <1, the number of procedures performed is too low to calculate a precise SIR and comparative statistics.

MDRO/CDI Module LABID Event Reporting

Clostridium difficile Infections in General Acute Care Hospitals, 2013

Hospital	Hospital Performance Compared to NHSN National Baseline	Number of *C. difficile* Infections	Number of Predicted *C. difficile* Infections	Number of Patient Days	Standardized Infection Ratio (SIR)	95% Confidence Interval for SIR
Cabell Huntington Hospital		46	67.28	77412	0.68	0.51, 0.90
Ohio Valley Medical Center		14	29.51	37827	0.47	0.27, 0.78
Greenbrier Valley Medical Center		4	9.80	15256	0.41	0.13, 0.99
CCMC- St. Joseph's Campus		3	8.46	18986	0.36	0.09, 0.97
City Hospital-WVUH-E		12	35.15	40524	0.34	0.19, 0.58
Princeton Community Hospital		8	37.21	48889	0.22	0.10, 0.41
St. Joseph's Hospital of Buckhannon		0	3.02	5233	0	0, 0.99
Fairmont General Hospital, Inc.		22	16.98	26568	1.30	0.83, 1.93
Wheeling Hospital		44	38.30	45237	1.15	0.85, 1.53
Logan Regional Medical Center		15	13.38	25165	1.12	0.65, 1.81
Weirton Medical Center		16	14.97	29015	1.07	0.63, 1.70
Saint Francis Hospital		11	10.36	18495	1.06	0.56, 1.85
Thomas Memorial Hospital		24	23.02	44782	1.04	0.68, 1.53
Bluefield Regional Medical Center		9	8.99	17914	1.00	0.49, 1.84
Camden Clark Memorial Hospital		36	37.41	74889	0.96	0.68, 1.32
Williamson Memorial Hospital		3	3.17	7266	0.95	0.24, 2.58
Wetzel County Hospital		2	2.23	3807	0.90	0.15, 2.96
Beckley Appalachian Regional Hospital		11	16.93	26089	0.65	0.34, 1.13
United Hospital Center		39	50.52	57071	0.77	0.56, 1.05
CAMC Teays Valley Hospital		4	5.26	8255	0.75	0.21, 1.89
Reynolds Memorial Hospital		4	6.81	10620	0.59	0.19, 1.42
Davis Memorial Hospital		3	7.31	15065	0.41	0.10, 1.12
Pleasant Valley Hospital		1	3.43	6492	0.29	0.02, 1.44
Stonewall Jackson Memorial Hospital		1	3.82	8497	0.26	0.01, 1.29
Summersville Regional Medical Center		14	3.91	7287	3.58	2.04, 5.87
Raleigh General Hospital		58	38.69	52752	1.50	1.15, 1.92
St. Mary's Medical Center		107	76.54	99547	1.40	1.15, 1.68
West Virginia University Hospitals (WVUH)		159	119.21	126464	1.33	1.14, 1.55
Charleston Area Medical Center (CAMC)		177	138.41	186244	1.28	1.10, 1.48

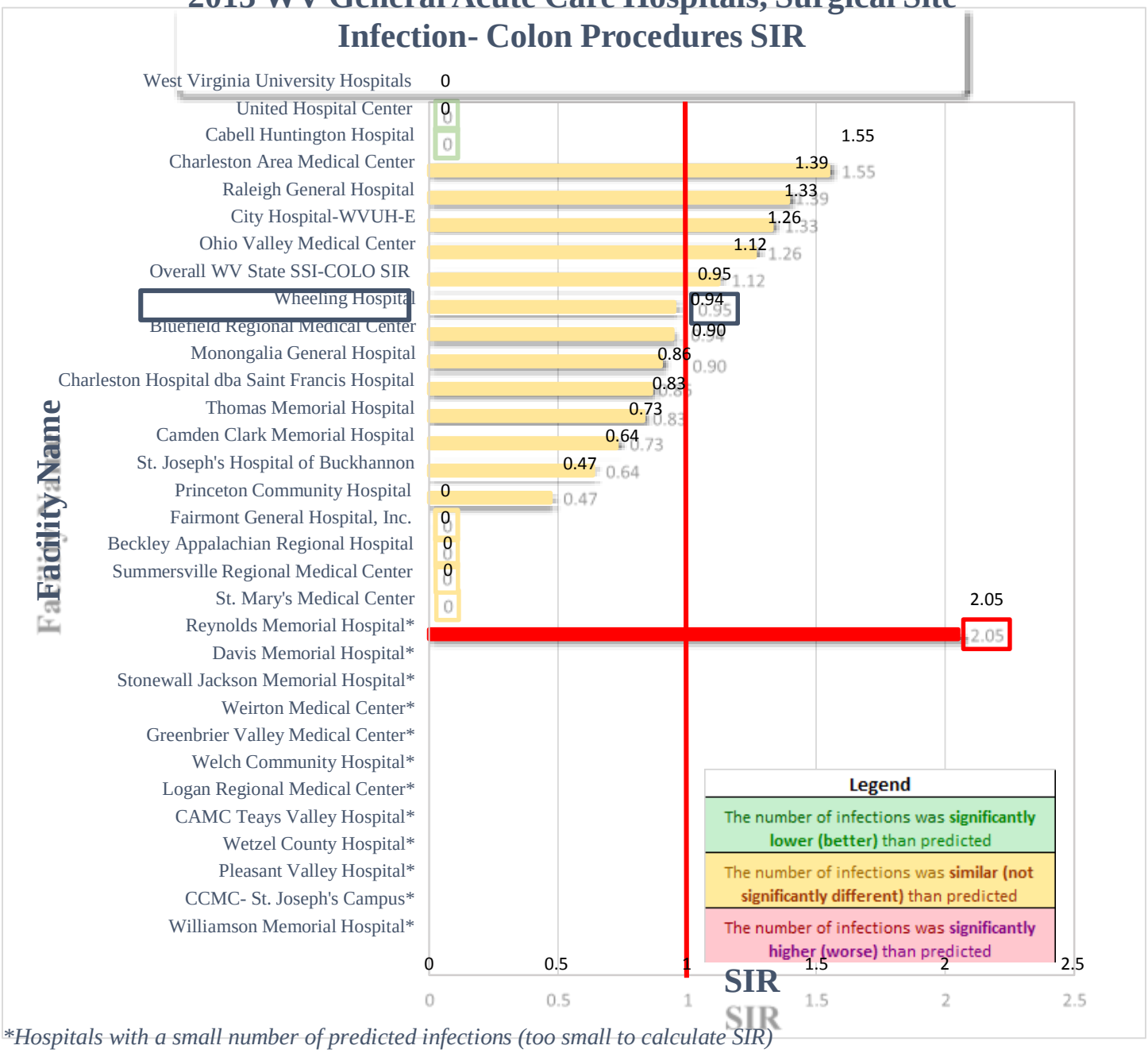
Legend:	
	The number of infections was **significantly lower (better)** than predicted
	The number of infections was **similar (not significantly different)** than predicted
	The number of infections was **significantly higher (worse)** than predicted
Not reportable (N/R)	General Acute Care Hospital inpatients had too few patient days to calculate a reliable SIR. When SIR cannot be calculated, a comparison to national data is not possible.

Too Small to Calculate	The expected number of infections was below 1

Procedure-Associated Surgical Site Infection (SSI)
Colon Procedures, Standard Infection Ratio (SIR)

Note: The SIR is a summary measure that compares the actual number of SSI reported by the hospital to the number of SSI that were expected to occur, based on NHSN aggregate data for 2006-2008 and adjusted for several risk factors associated with HAI incidence. A SIR greater than 1.0 indicates that more HAIs were observed than expected, accounting for difference in the types of patients; a SIR less than 1.0 indicates that fewer HAIs were observed than expected. For example, a SIR of 1.20 indicates that the hospital had 20% more SSIs than expected; a SIR of 0.80 indicates that the hospital had 20% fewer SSIs than expected. The SIR is only calculated if the number of expected SSIs is ≥1. When the number expected is <1, the number of procedures performed is too low to calculate a precise SIR and comparative statistics.

2013 Calendar Year



**Hospitals with a small number of predicted infections (too small to calculate SIR)*

Procedure-Associated Surgical Site Infection (SSI)

Surgical Site Infections (SSI) for Inpatient Colon Procedures in General Acute Care Hospitals, 2013

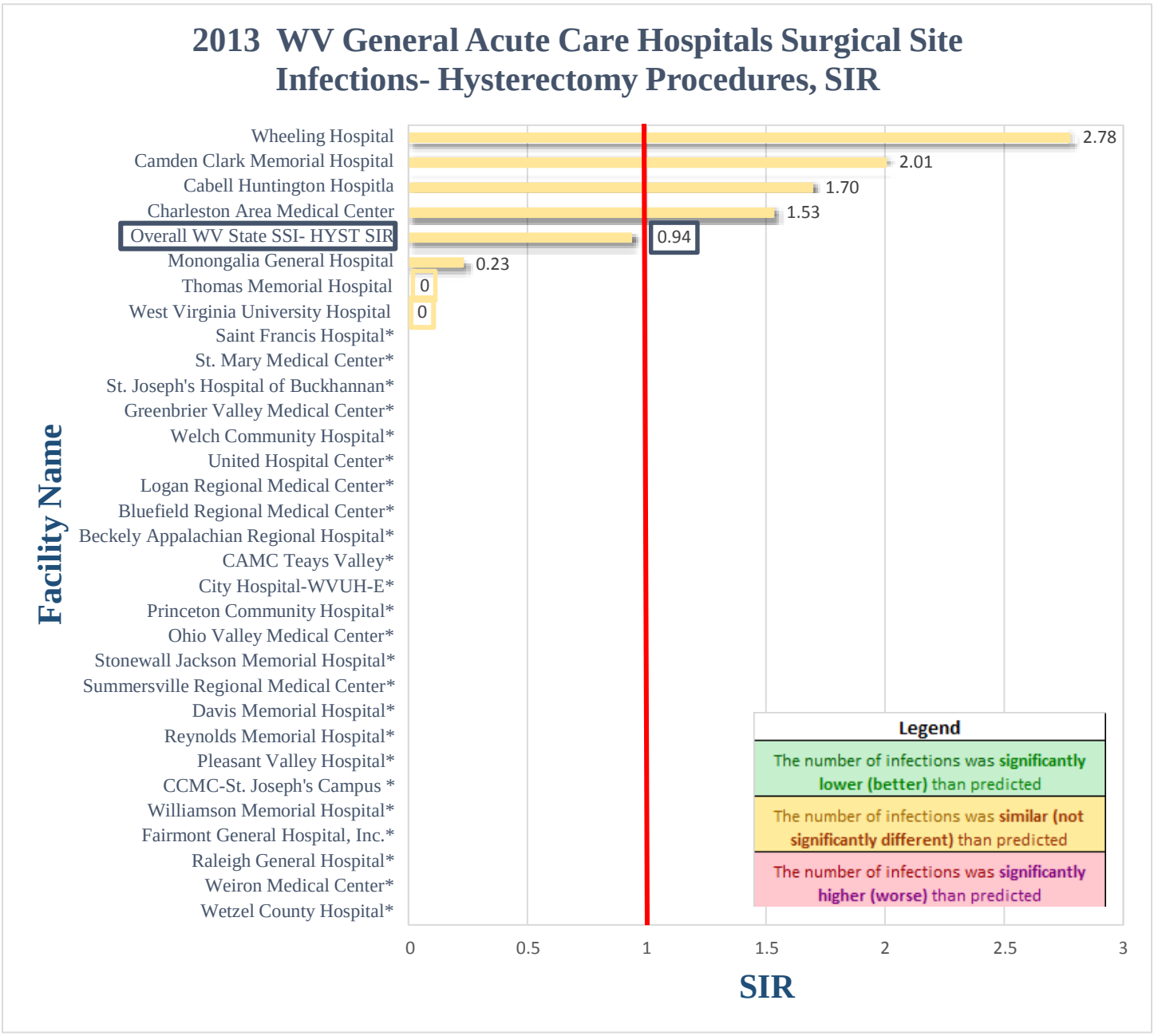
Hospital	Hospital Performance Compared To NHSN National Baseline	Number of Infections	Number of Predicted Infections	Number of Colon Procedures Performed	Standardized Infection Ratio (SIR)	95% Confidence Interval for SIR
West Virginia University Hospital (WVUH)		0	5.49	150	0	0, 0.55
United Hospital Center		0	2.98	94	0	0, 1.00
Cabell Huntington Hospital		8	5.17	144	1.55	0.72, 2.94
Charleston Area Medical Center (CAMC)		17	12.22	344	1.39	0.84, 2.18
Raleigh General Hospital		4	3.01	87	1.33	0.42, 3.20
City Hospital-WVUH-E		2	1.59	47	1.26	0.21, 4.17
Ohio Valley Medical Center		2	1.78	54	1.12	0.19, 3.71
Wheeling Hospital		3	3.18	97	0.94	0.24, 2.57
Bluefield Regional Medical Center		1	1.11	33	0.90	0.05, 4.43
Monongalia General Hospital		5	5.81	185	0.86	0.32, 1.91
Saint Francis Hospital		1	1.21	36	0.83	0.04, 4.07
Thomas Memorial Hospital		3	4.13	119	0.73	0.19, 1.98
Camden Clark Memorial Hospital		2	3.15	102	0.64	0.11, 2.10
St. Joseph's Hospital of Buckhannon		1	2.13	62	0.47	0.02, 2.32
Beckley Appalachian Regional Hospital		0	1.28	35	0	0, 2.33
Princeton Community Hospital		0	1.93	60	0	0, 1.55
[illegible]						
St. Mary's Medical Center		9	4.39	144	2.05	1.00, 3.76
Williamson Memorial Hospital	N/R	0	0.12	3	Too Small to Calculate	
CCMC- St. Joseph's Campus	N/R	0	0.51	17	Too Small to Calculate	
Pleasant Valley Hospital	N/R	0	0.36	11	Too Small to Calculate	
Reynolds Memorial Hospital	N/R	1	0.56	18	Too Small to Calculate	
Davis Memorial Hospital	N/R	2	0.93	29	Too Small to Calculate	
Stonewall Jackson Memorial Hospital	N/R	2	0.70	21	Too Small to Calculate	
Weirton Medical Center	N/R	1	0.62	17	Too Small to Calculate	
Wetzel County Hospital	N/R	0	0.07	2	Too Small to Calculate	
CAMC Teays Valley Hospital	N/R	0	0.43	13	Too Small to Calculate	
Logan Regional Medical Center	N/R	0	0.51	15	Too Small to Calculate	

Note: The SIR is a summary measure that compares the actual number of SSI reported by the hospital to the number of SSI that were expected to occur, based on NHSN aggregate data for 2006-2008 and adjusted for several risk factors associated with HAI incidence. A SIR greater than 1.0 indicates that more HAIs were observed than expected, accounting for difference in the types of patients; a SIR less than 1.0 indicates that fewer HAIs were observed than expected. For example, a SIR of 1.20 indicates that the hospital had 20% more SSIs than expected; a SIR of 0.80 indicates that the hospital had 20% fewer SSIs than expected. The SIR is only calculated if the number of expected SSIs is ≥1. When the number expected is <1, the number of procedures performed is too low to calculate a precise SIR and comparative statistics.

Welch Community Hospital	N/R	0	0.15	4	Too Small to Calculate
Greenbrier Valley Medical Center	N/R	1	0.50	15	Too Small to Calculate

Legend:	
	The number of infections was **significantly lower (better)** than predicted
	The number of infections was **similar (not significantly different)** than predicted
	The number of infections was **significantly higher (worse)** than predicted
Not reportable (N/R)	General Acute Care hospitals had too few inpatient colon procedures to calculate a reliable SIR. When SIR cannot be calculated, a comparison to national data is not possible.
Too Small to Calculate	The expected number of infections was below 1

Procedure-Associated Surgical Site Infection (SSI)
HYST-Procedure Standard Infection Ratio (SIR)
2013 Calendar Year



**Hospitals with a small number of predicted infections (too small to calculate SIR)*

Note: The SIR is a summary measure that compares the actual number of SSI reported by the hospital to the number of SSI that were expected to occur, based on NHSN aggregate data for 2006-2008 and adjusted for several risk factors associated with HAI incidence. A SIR greater than 1.0 indicates that more HAIs were observed than expected, accounting for difference in the types of patients; a SIR less than 1.0 indicates that fewer HAIs were observed than expected. For example, a SIR of 1.20 indicates that the hospital had 20% more SSIs than expected; a SIR of 0.80 indicates that the hospital had 20% fewer SSIs than expected. The SIR is only calculated if the number of expected SSIs is ≥1. When the number expected is <1, the number of procedures performed is too low to calculate a precise SIR and comparative statistics.

Surgical Site Infections (SSI) for Inpatient Hysterectomy Procedures in General Acute Care Hospitals, 2013

Hospital	Hospital Performance Compared to NHSN National Baseline	Number of Infections	Number of Predicted Infections	Number of Hysterectomy Procedures Performed	Standardized Infection Ratio (SIR)	95% Confidence Interval for SIR
Wheeling Hospital		3	1.08	108	2.78	0.71, 7.55
Camden Clark Memorial Hospital		3	1.50	162	2.01	0.51, 5.46
Cabell Huntington Hospital		8	4.72	393	1.70	0.79, 3.22
Charleston Area Medical Center (CAMC)		5	3.26	317	1.53	0.56, 3.40
Monongalia General Hospital		1	4.35	444	0.23	0.01, 1.13
Thomas Memorial Hospital		0	2.27	182	0	0, 1.32
Raleigh General Hospital	N/R	0	0.20	16	Too Small to Calculate	
Fairmont General Hospital, Inc.	N/R	1	0.07	6	Too Small to Calculate	
Williamson Memorial Hospital	N/R	0	0.23	22	Too Small to Calculate	
CCMC-St. Joseph's Campus	N/R	0	0.01	1	Too Small to Calculate	
Pleasant Valley Hospital	N/R	0	0.08	5	Too Small to Calculate	
Reynolds Memorial Hospital	N/R	0	0.30	27	Too Small to Calculate	
Davis Memorial Hospital	N/R	0	0.50	48	Too Small to Calculate	
Summersville Regional Medical Center	N/R	0	0.09	9	Too Small to Calculate	
Stonewall Jackson Memorial Hospital	N/R	0	0.07	6	Too Small to Calculate	
Ohio Valley Medical Center	N/R	0	0.28	28	Too Small to Calculate	
Weirton Medical Center	N/R	1	0.56	61	Too Small to Calculate	
Princeton Community Hospital	N/R	0	0.31	32	Too Small to Calculate	
Wetzel County Hospital	N/R	0	0.00	0	Too Small to Calculate	
City Hospital-WVUH-E	N/R	0	0.36	32	Too Small to Calculate	
CAMC- Teays Valley Hospital	N/R	0	0.05	4	Too Small to Calculate	
Beckley Appalachian Regional Hospital	N/R	0	0.17	14	Too Small to Calculate	
Bluefield Regional Medical Center	N/R	0	0.28	22	Too Small to Calculate	
Logan Regional Medical Cneter	N/R	0	0.05	4	Too Small to Calculate	
United Hospital Center	N/R	0	0.27	32	Too Small to Calculate	
Welch Community Hospital	N/R	0	0.20	15	Too Small to Calculate	
Greenbrier Valley Medical Center	N/R	0	0.11	12	Too Small to Calculate	
St. Mary's Medical Center	N/R	0	0.27	28	Too Small to Calculate	
St. Joseph's Hospital of Buckhannon	N/R	0	0.37	29	Too Small to Calculate	

Procedure-Associated Surgical Site Infection (SSI)

Saint Francis Hospital	N/R	0	0.01	1	Too Small to Calculate

Legend:	
	The number of infections was **significantly lower (better)** than predicted
	The number of infections was **similar (not significantly different)** than predicted
	The number of infections was **significantly higher (worse)** than predicted
Not reportable (N/R)	General Acute Care hospitals had too few inpatient hysterectomy procedures to calculate a reliable SIR. When SIR cannot be calculated, a comparison to national data is not possible.
Too Small to Calculate	The expected number of infections was below 1

Note: The SIR is a summary measure that compares the actual number of SSI reported by the hospital to the number of SSI that were expected to occur, based on NHSN aggregate data for 2006-2008 and adjusted for several risk factors associated with HAI incidence. A SIR greater than 1.0 indicates that more HAIs were observed than expected, accounting for difference in the types of patients; a SIR less than 1.0 indicates that fewer HAIs were observed than expected. For example, a SIR of 1.20 indicates that the hospital had 20% more SSIs than expected; a SIR of 0.80 indicates that the hospital had 20% fewer SSIs than expected. The SIR is only calculated if the number of expected SSIs is ≥1. When the number expected is <1, the number of procedures performed is too low to calculate a precise SIR and comparative statistics.