

West Virginia Health Care Authority

Healthcare-Associated Infection Public Reporting Program 2015

Patient Safety Graphs
Calendar Year - 2013

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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

West Virginia Health Care Authority Board

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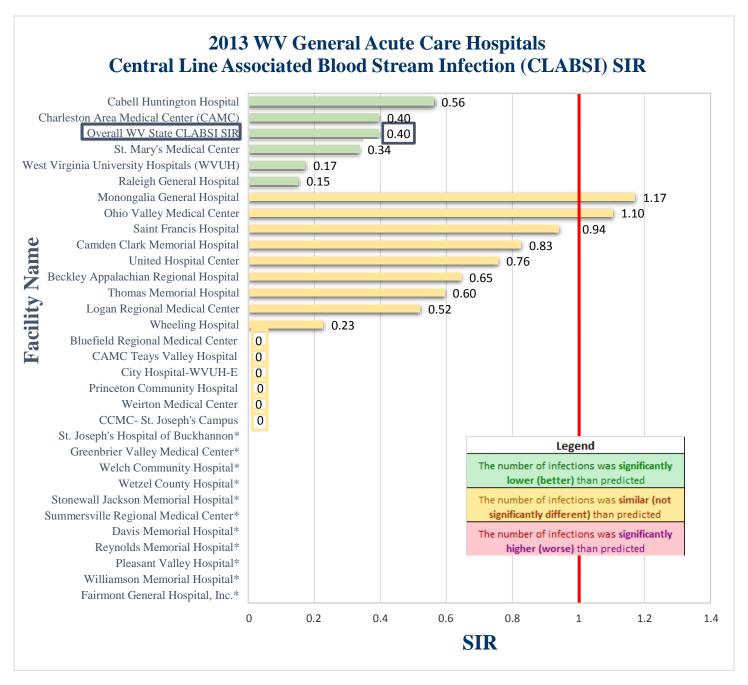
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Central Line Associated Bloodstream Infection (CLABSI) Standardized Infection Ratio (SIR) 2013 Calendar Year



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

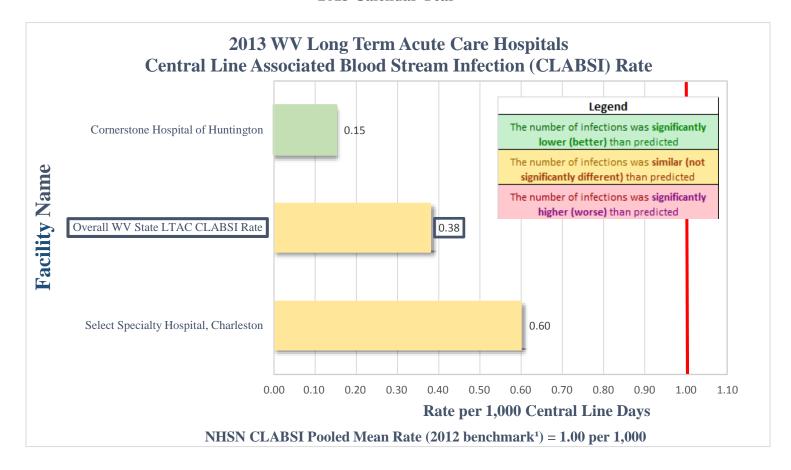
Note: The SIR is a summary measure that compares the actual number of CLABSI reported by the hospital to the number of CLABSI that were expected to occur, based on NHSN aggregate data for 2006-2008 and adjusted for several risk factors associated with HAI incidence. A SIR greater than 1.0 indicates that more HAIs were observed than expected, accounting for difference in the types 11of 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

Central Line Associated Blood Str	eam Infections (CLAE	BSI) in Ge	neral Acut	e Care Hosp	oitals, All ICU	s, 2013
Hospital	Hospital Performance Compared to NHSN National Baseline	Number of Infections	Number of Predicted Infections	Number of Central Line Days		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	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 Ca	lculate
Fairmont General Hospital, Inc.	N/R	0	0.66	437	Too Small to Ca	lculate
Greenbrier Valley Medical Center	N/R	0	0.94	629	Too Small to Ca	lculate
Pleasant Valley Hospital	N/R	0	0.33	221	Too Small to Ca	lculate
Reynolds Memorial Hospital	N/R	1	0.38	255	Too Small to Ca	lculate
St. Joseph's Hospital of Buckhannon	N/R	0	0.21	137	Too Small to Ca	lculate
Stonewall Jackson Memorial Hospital	N/R	2	0.33	218	Too Small to Ca	Iculate
Summersville Regional Medical Center	N/R	0	0.24	161	Too Small to Ca	
Welch Community Hospital	N/R	0	0.27	177	Too Small to Ca	
Wetzel County Hospital	N/R	0	0.02	12	Too Small to Ca	
Williamson Memorial Hospital	N/R	0	0.23	119	Too Small to Ca	
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
lacksquare	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



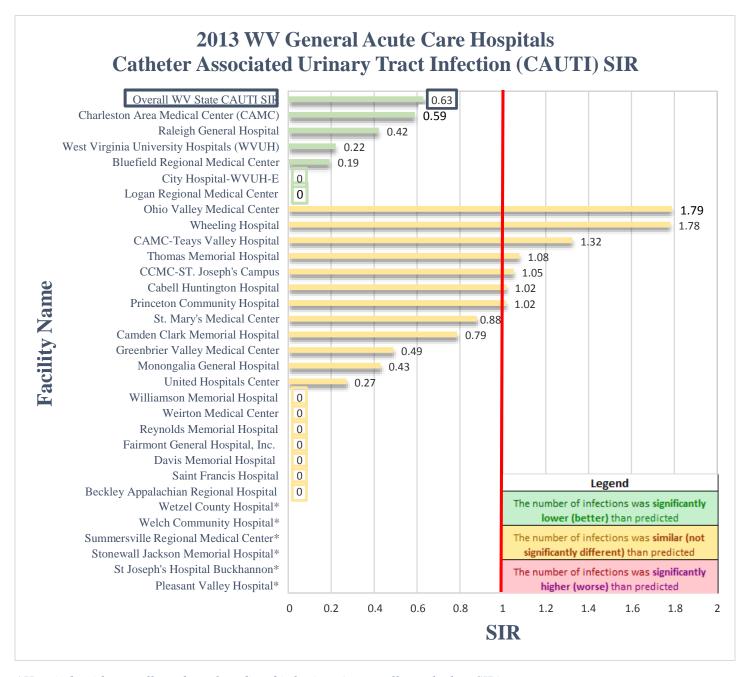
Central Line Associated Bloodstream Infections (CLABSI) for Long Term Acute Care Hospitals, 2013

			-, 0 -		,
Hospital	Hospital	Number of	Number of Central	Rate of Central Line	NHSN Pooled Mean
	Performance	Infections	Line Days	Associated	Rate ¹
	Compared to the			Bloodstream	
	National Mean			Infections*	
	Rate ¹				
Cornerstone Hospital of Hunti	ngton	1	6637	0.15	1.00
Select Specialty Hospital, Char	leston	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
lacksquare	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

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



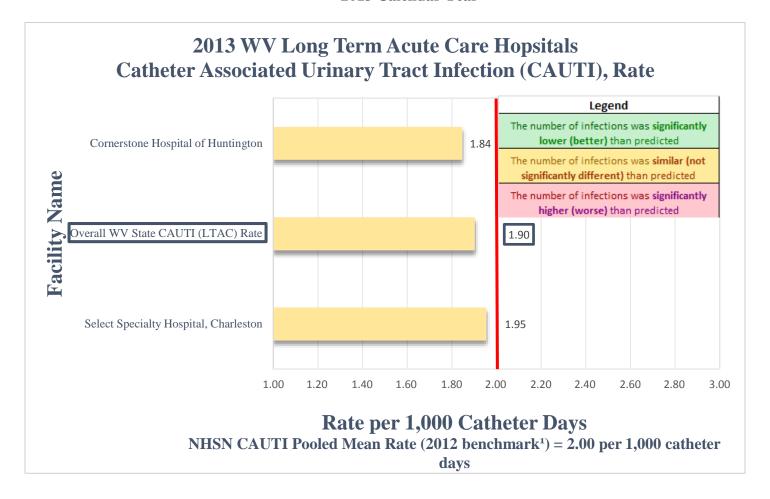
^{*}Hospitals with a small number of predicted infections (too small to calculate SIR)

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 Associate	ed Urinary Tract Infection	ons (CAUTI) in	General Acute C	are Hospitals, Al	l 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
Brincoton Community Hospital		1	2 UA	2520	1 02	022 245
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 60	2070	n 27	0 01 1 22
Fairmont General Hospital. Inc.		0	1.05	808	0	0. 2.85
Williamson Memorial Hospital		0	1.06	530	0	0, 2.83
Downalde Mamarial Hassital		^	1 12	0.50	^	0.266
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
w to the second	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



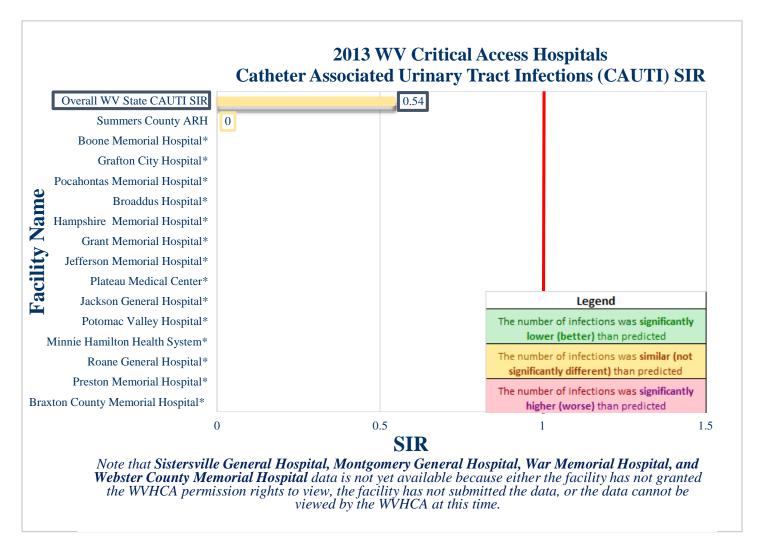
Catheter Associated Urinary Tract Infections (CAUTI) for Long Term Acute Care Hospitals, 2013

	•				
Hospital	Hospital Performance	Number of	Number of Urinary	Rate of Urinary	NHSN Pooled Mean
	Compared to the National Mean	Infections	Catheter Days	Catheter	Rate ¹
	Rate ¹			Infections*	
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
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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
lacksquare	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

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



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

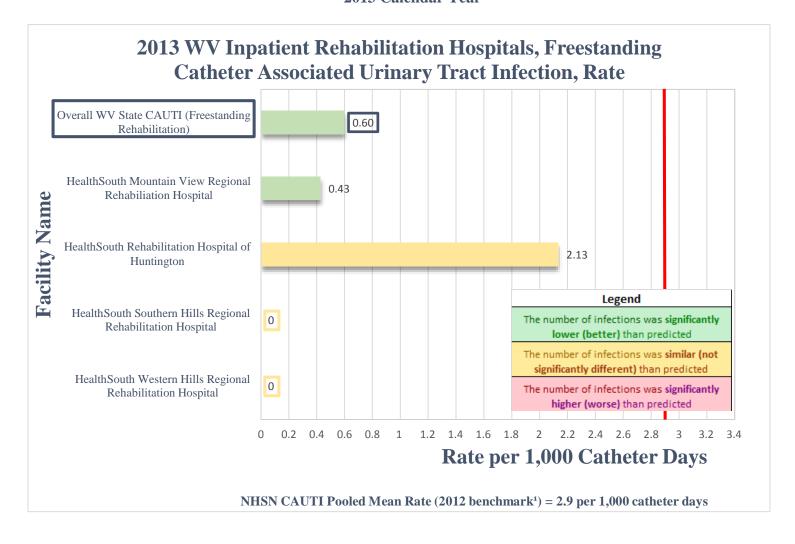
Note: The SIR is a summary measure that compares the actual number of CAUTI reported by the hospital to the number of CAUTI that were expected to occur, based on NHSN aggregate data for 2006-2008 and adjusted for several risk factors associated with HAI incidence. A SIR greater than 1.0 indicates that 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 Urina	ry Tract Infecti	ions, Critical Acce	ss Hospitals, 2013	3	
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	o Calculate
Preston Memorial Hospital	N/R	0	45	0.06	Too Small To	o Calculate
Roane General Hospital	N/R	1	47	0.08	Too Small To	o Calculate
Minnie Hamilton Health System	N/R	0	214	0.34	Too Small To	o Calculate
Potomac Valley Hospital	N/R	0	125	0.25	Too Small To	o Calculate
ackson General Hospital	N/R	0	190	0.25	Too Small To	o Calculate
Plateau Medical Center	N/R	0	283	0.37	Too Small To	o Calculate
efferson Memorial Hospital	N/R	1	197	0.26	Too Small To	o Calculate
Grant Memorial Hospital	N/R	0	290	0.38	Too Small To	o Calculate
Hampshire Memorial Hospital	N/R	1	328	0.62	Too Small To	o Calculate
Pocahontas Memorial Hospital	N/R	0	126	0.20	Too Small To	o Calculate
Grafton City Hospital	N/R	0	62	0.11	Too Small To	o Calculate
Boone Memorial Hospital	N/R	0	211	0.34	Too Small To	o Calculate
Broaddus Hospital	N/R	0	251	0.48	Too Small To	o 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
lacksquare	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



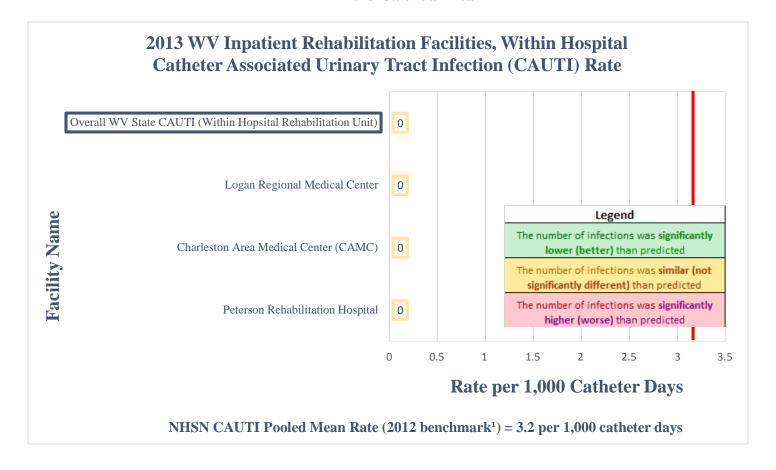
Catheter Associated Urinary Tract Infections (CAUTI) for Rehabilitation Hospitals-Freestanding, 2013

Catheter Associated Officery fract		TO INCHABIL	tation nospitals	ricestantani	5, 2013
Hospital	Hospital	Number of	Number of	Rate of Urinary	NHSN Pooled
	Performance	Infections	Urinary Catheter	Catheter	Mean Rate ¹
	Compared to the		Days	Infections*	
	National 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
lacksquare	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

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



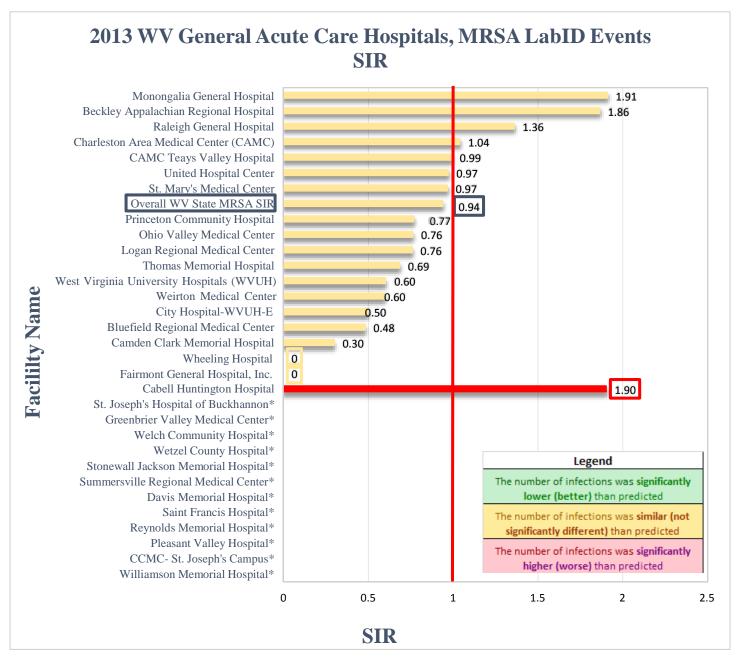
Catheter Associated Urinary Tract Infections (CAUTI) for Rehabilitation Hospitals- Within Hospitals, 2013

			p		,
Hospital	Hospital	Number of	Number of	Rate of Urinary	NHSN Pooled
	Performance	Infections	Urinary	Catheter	Mean Rate ¹
	Compared to the		Catheter Days	Infections*	
	National 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
-00					<u> </u>
West Virginia Total, Rehabilitation Unit Within Hospital		0	899	0	3.2
west virginia rotal, kenabilitation onit within nospital	· · · · · · · · · · · · · · · · · · ·	U	033	U	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
V .	2012
Not reportable (N/R)	Rehabilitation patients had too few urinary catheter days to calculate a reliable SIR. When SIR
Not reportable (N/N)	cannot be calculated, a comparison to national data is not possible.
Too Small to Calculate	The expected number of infections was below 1

MDRO/CDI Module LABID Event Reporting



^{*}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.

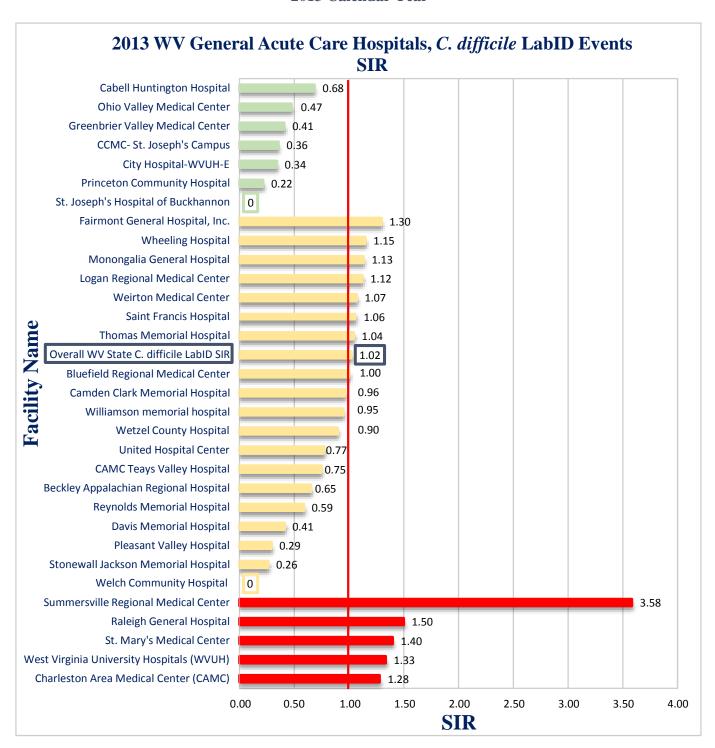
MDRO/CDI Module LABID Event Reporting

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

Methicillin-res	istant Staphylococcus	aureus (MRSA) I	nfections in General	Acute Care Hospit	als, 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
Becklev 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)		71	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
Dhio Valley Medical Center		2	2.62	38599	0.76	0.13, 2.52
ogan Regional Medical Center		2	2.63	25642	0.76	0.13. 2.51
homas Memorial Hospital		2	2.92	49696	0.69	0.12, 2.27
Vest Virginia University Hospitals (WVUH)		7	11.64	143740	0.60	0.26, 1.19
Veirton 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
airmont General Hospital, Inc.		0	1.08	27428	0	0, 2.78
	▼					
Cabell Huntington Hospital		12	6.31	94917	1.90	1.03, 3.23
Villiamson 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
leynolds Memorial Hospital	N/R	0	0.44	10848	Too Small	To Calculate
aint 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
ummersville Regional Medical Center	N/R	1	0.43	8352	Too Small	To Calculate
tonewall Jackson Memorial Hospital	N/R	1	0.44	8497	Too Small	To Calculate
Vetzel County Hospital	N/R	0	0.14	3807		To Calculate
Welch Community Hospital	N/R	0	0.15	1961		To Calculate
		0				
Greenbrier Valley Medical Center	N/R		0.93	16665		To Calculate
it. 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
$\overline{\nabla}$	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	ditticile Ir	ntections	in General	Acute Care	e Hospitals.	2013

	Clostridium difficile	Infections in Gen	eral Acute Care Hosp	oitals, 2013		
Hospital	Hospital Performance Compared to NHSN National Baseline	Number of <i>C. difficile</i> Infections	Number of Predicted <i>C.</i> 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
CANAC Tonic Wellow Henrital		A	F 36	0755	0 7F	0.24 4.00
Reynolds Memorial Hospital		4	6.81	10620	0.59	0.19, 1.42
Davic Mamorial Hospital		9	7 21	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	V	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	lacksquare	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

The number of infections was significantly lower (better) than predicted

The number of infections was similar (not significantly different) than predicted

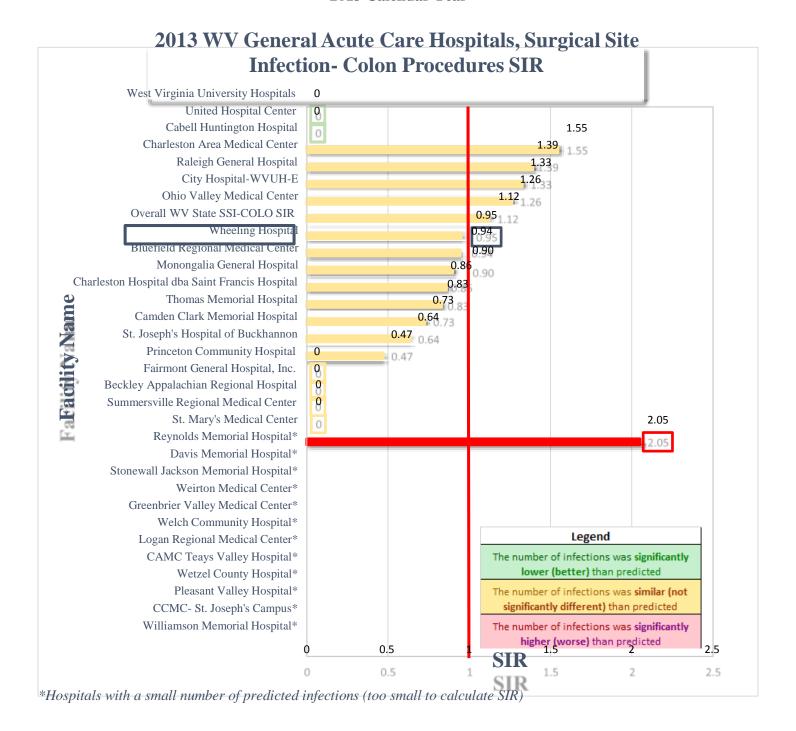
The number of infections was significantly higher (worse) than predicted

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) Surgical Site Infections (SSI) for Inpatient Colon Procedures in General Acute Care Hospitals, 2013 Hospital Performance Number of Colon Standardized Compared To NHSN 95% Confidence Number of Number of Procedures Infection Ratio Hospital National Baseline Infections Predicted Infections Performed (SIR) Interval for SIR West Virginia University Hospital (WVUH) 0, 0.55 0 5.49 150 0 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) 0.84, 2.18 12.22 344 1.39 17 Raleigh General Hospital 4 3.01 87 1.33 0.42, 3.20 City Hospital-WVUH-E 0.21, 4.17 1.59 47 1.26 Ohio Valley Medical Center 2 0.19, 3.71 1.78 54 1.12 Wheeling Hospital 3.18 97 0.94 0.24, 2.57 Bluefield Regional Medical Center 1.11 33 0.90 0.05, 4.43 Monongalia General Hospital 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 4.13 119 0.73 0.19, 1.98 Camden Clark Memorial Hosnital 3 15 102 n 64 0 11 2 10 St Insenh's Hosnital of Ruckhannon 2 12 62 ∩ 47 0.02 2.32 0, 2.33 Beckley Appalachian Regional Hospital 0 1.28 35 0 0 0, 1.55 Princeton Community Hospital 0 1.93 60 9 4.39 144 2.05 1.00, 3.76 St. Mary's Medical Center Williamson Memorial Hospital N/R 0.12 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 Too Small to Calculate N/R 2 0.93 29 Stonewall Jackson Memorial Hospital N/R 2 0.70 21 Too Small to Calculate Weirton Medical Center 0.62 17 Too Small to Calculate N/R

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 aggressive 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 , then the number expected is <1, the number of procedures performed is too low to calculate a precise SIR and comparative statistics.

0.07

0.43

0.51

2

13

15

Too Small to Calculate

Too Small to Calculate

Too Small to Calculate

0



N/R

N/R

N/R

Wetzel County Hospital

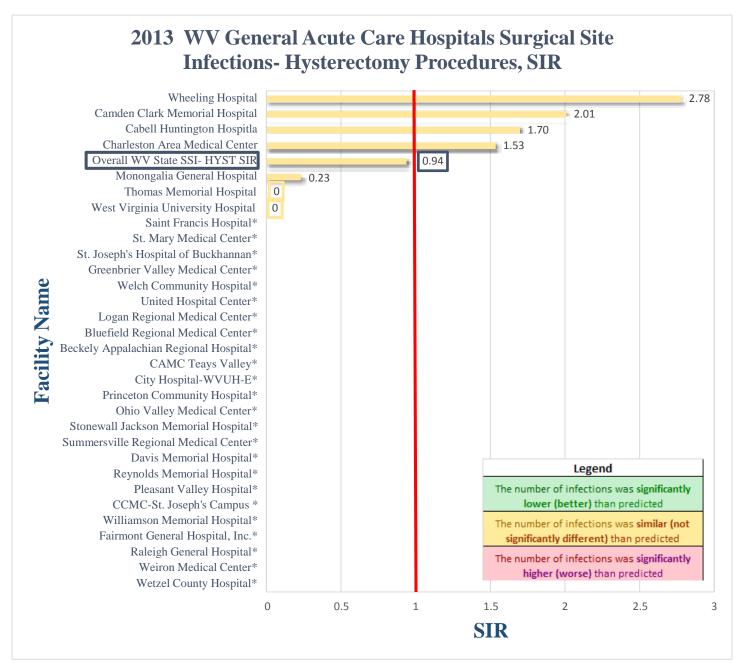
CAMC Teays Valley Hospital

Logan Regional Medical Center

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.

Hospital	Hospital	Number of	Number of	Number of	Standardized	95% Confidence
.,	Performance Compared to NHSN National Baseline	Infections	Predicted Infections	Hysterectomy Procedures Performed	Infection Ratio (SIR)	Interval for SIR
Vheeling 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
ahell Huntington Hospital		8	4 77	393	1 70	0.79 3.77
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
homas Memorial Hospital	_	0	2.27	182	0	0, 1.32
taleigh General Hospital	N/R	0	0.20	16	Too Small to) Calculate
airmont General Hospital, Inc.	N/R	1	0.07	6	Too Small to	Calculate
Villiamson 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
leasant Valley Hospital	N/R	0	0.08	5	Too Small to	Calculate
eynolds Memorial Hospital	N/R	0	0.30	27	Too Small to	Calculate
Pavis Memorial Hospital	N/R	0	0.50	48	Too Small to	Calculate
ummersville Regional Medical Center	N/R	0	0.09	9	Too Small to	Calculate
tonewall 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
Veirton 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
Vetzel County Hospital	N/R	0	0.00	0	Too Small to	Calculate
ity Hospital-WVUH-E	N/R	0	0.36	32	Too Small to	Calculate
AMC- Teays Valley Hospital	N/R	0	0.05	4	Too Small to	Calculate
eckley 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
ogan Regional Medical Cneter	N/R	0	0.05	4	Too Small to	Calculate
Inited Hospital Center	N/R	0	0.27	32	Too Small to	Calculate
Velch Community Hospital	N/R	0	0.20	15	Too Small to	Calculate
reenbrier Valley Medical Center	N/R	0	0.11	12	Too Small to	Calculate
t. Mary's Medical Center	N/R	0	0.27	28	Too Small to	Calculate
t. 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 significan	itly lower (better) than pr	redicted			
	The number of infections was similar (not significantly different) than predicted						
	The number of infections	_					
Not reportable (N/R)	General Acute Care hospit calculated, a comparison t	als had too fe o national da	ew inpatient hysterectometa is not possible.	y procedures to cal	culate a reliable SIR. When SIR cannot be		
Too Small to Calculate	The expected number of i	nfections 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.