



Indiana State
Department of Health

Indiana Healthcare Associated Infection Initiative

10/14/2011

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Objectives

- History of the Indiana Healthcare Associated Infection (HAI) Initiative
- Data from long term care facilities
- Data from acute care facilities
- Conclusions
- Achievements

History of HAI Initiative

- State collaborative effort to prevent healthcare associated infections
- Funded by the American Recovery and Reinvestment Act of 2009 (ARRA).
 - Strengthen the Nation's healthcare infrastructure and reduce healthcare costs
 - Support states in the prevention and reduction of HAIs
 - Administered by HHS, CMS and CDC

Goals of the Initiative

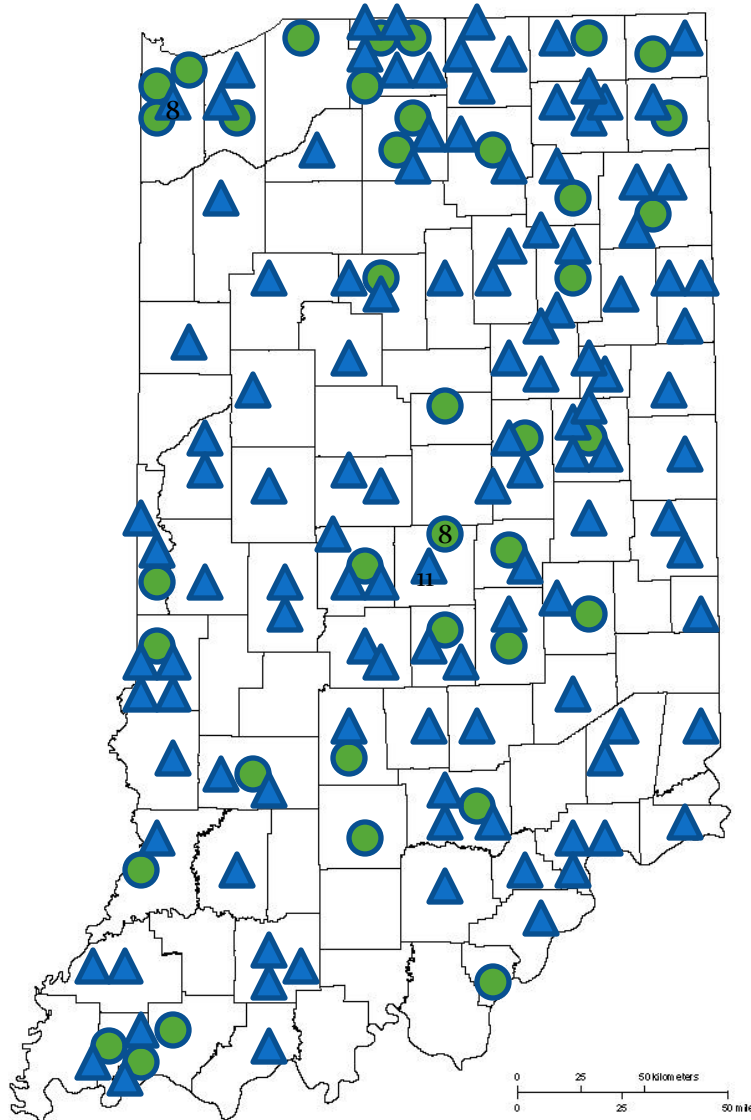
- Increase awareness of HAIs
- Improve the identification of HAIs by healthcare providers
- Reduce the number of HAIs
- Develop/implement HAI surveillance and reporting system
- Create a State Plan for HAI prevention

Start of the Initiative

- HAIs to focus on
 - *Clostridium difficile* infections (*C. diff* or CDI)
 - Catheter Associated Urinary Tract Infections (CAUTI)
- Acute care hospitals and long term care facilities (LTC)
 - Hospitals reported data through NHSN
 - LTC facilities reported through Survey Monkey
- Training sessions
- Data collection began August 2010

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- 45 Hospitals
- ▲ 136 Long term care

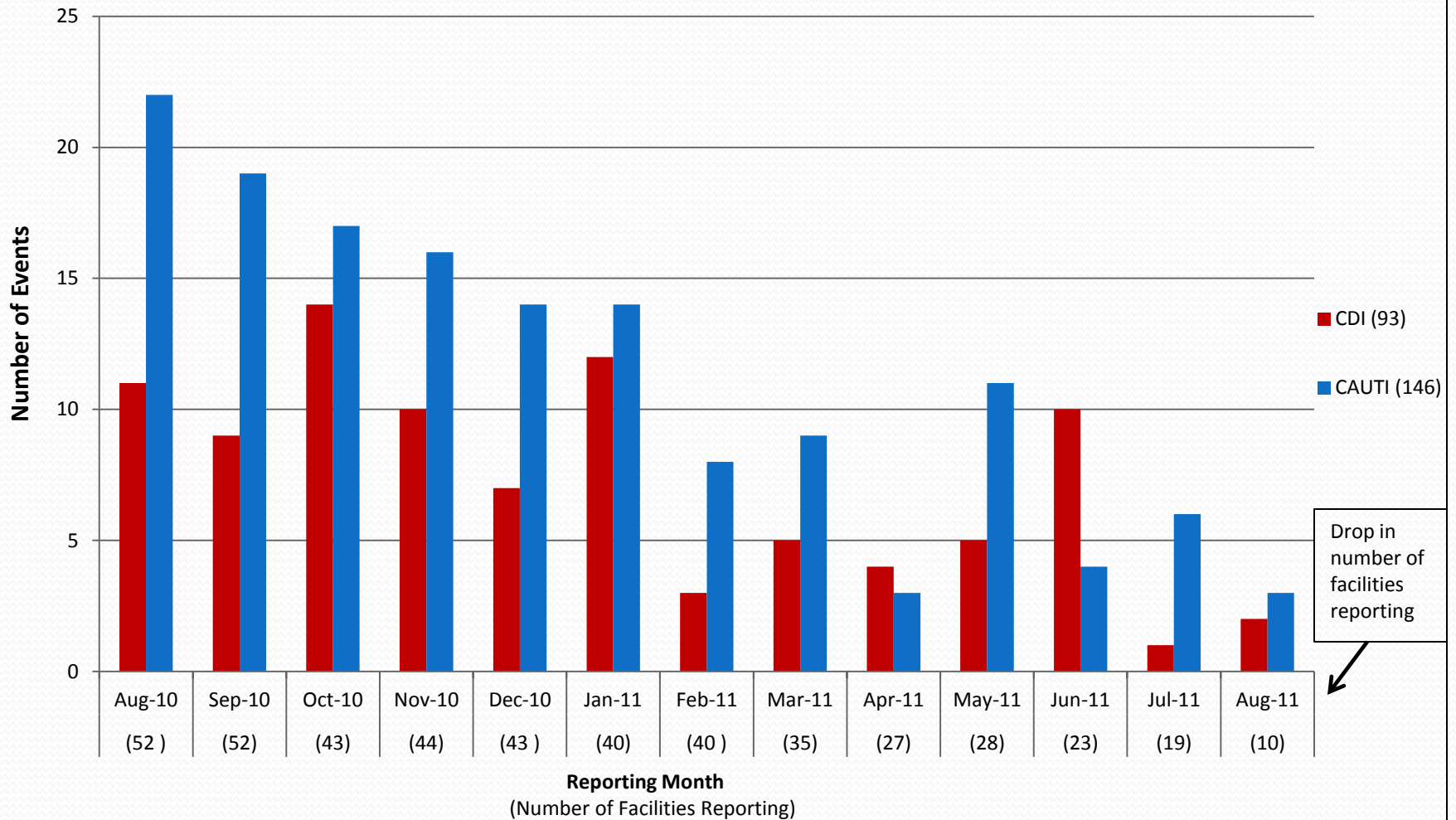


Map by University of Indianapolis, Center for Aging and Community

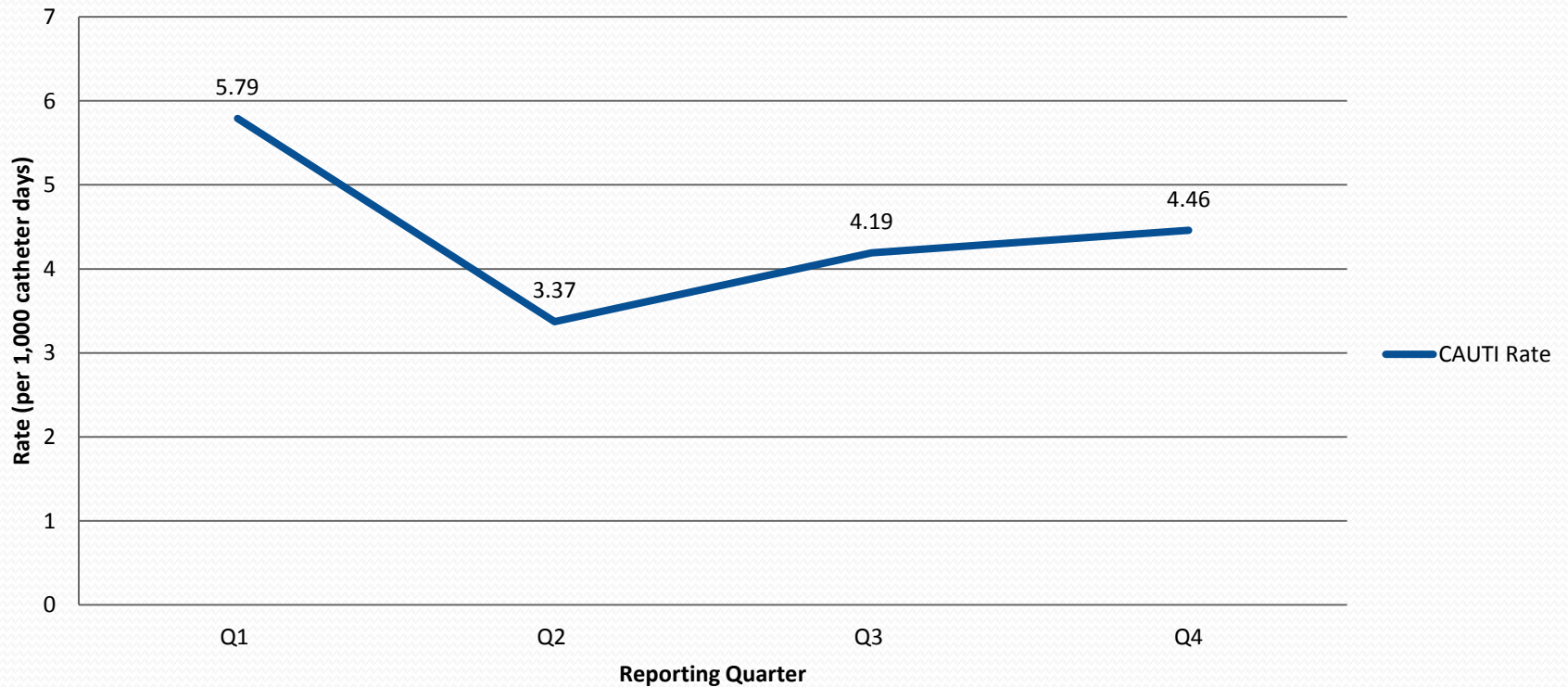
Long Term Care Facilities

Duplicate events	34
Not a CAUTI event	20
Not a CDI event	5
No event details	12
No denominator data	151
Total Excluded	222
Facilities reporting complete data	64
CAUTI events	146
CDI events	93
Total HAI events reported	239

CDI & CAUTI Event Totals for LTC Facilities

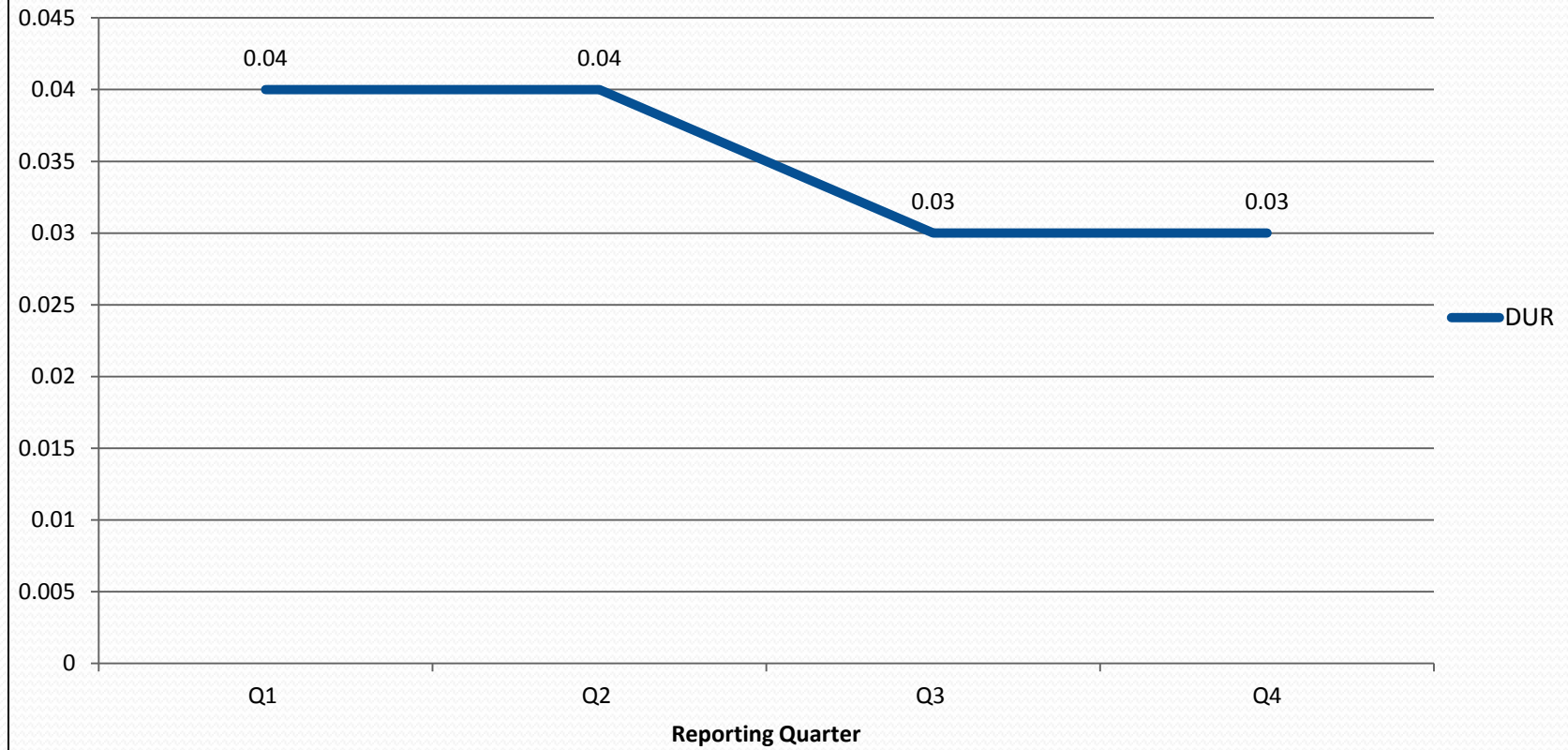


CAUTI Rate in LTC Facilities September 2010- August 2011



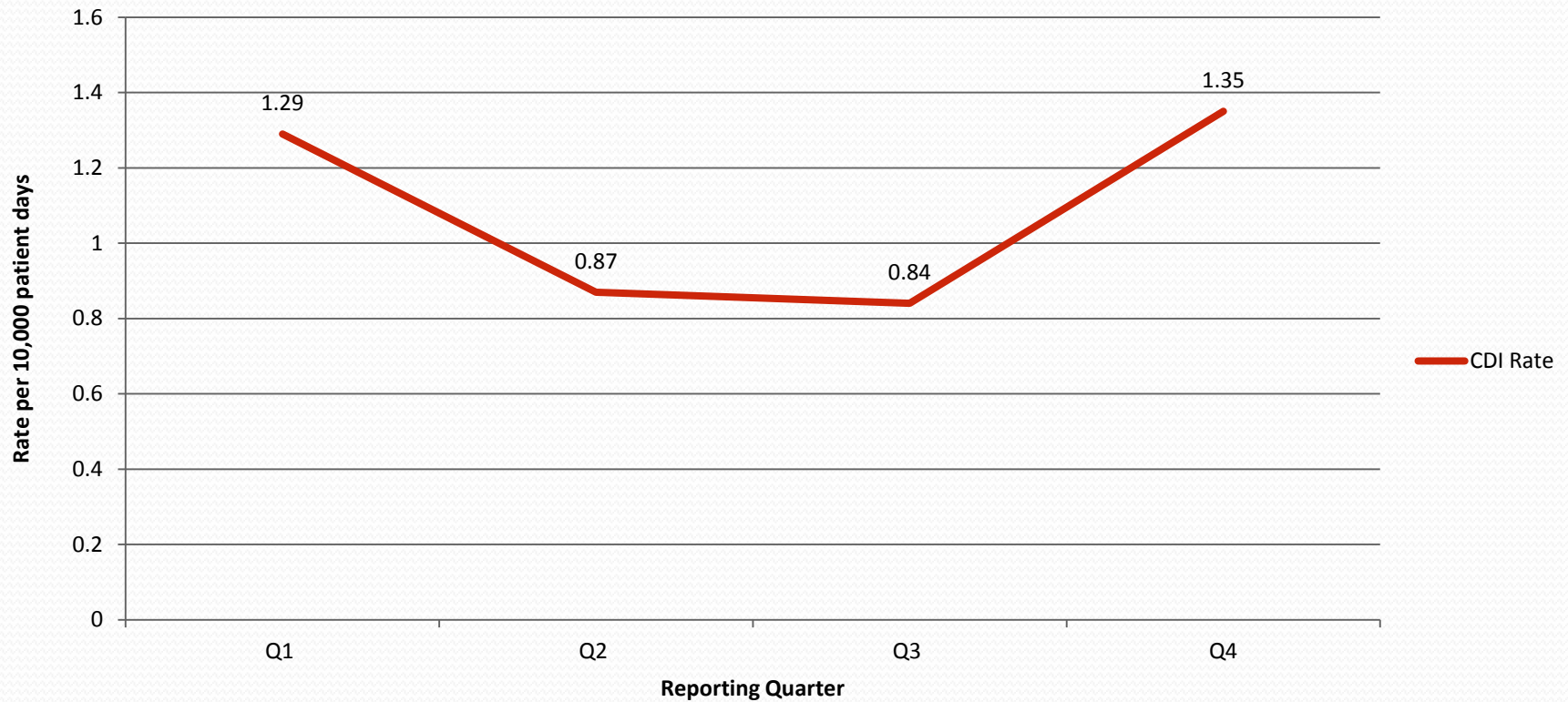
CAUTI Rate= $\frac{\# \text{ CAUTI events}}{\# \text{ Catheter days}} \times 1000$

Catheter Device Utilization Ratio September 2010-August 2011



DUR= $\frac{\# \text{ Catheter Days}}{\# \text{ Patient Days}}$

CDI Rate in LTC Facilities September 2010- August 2011

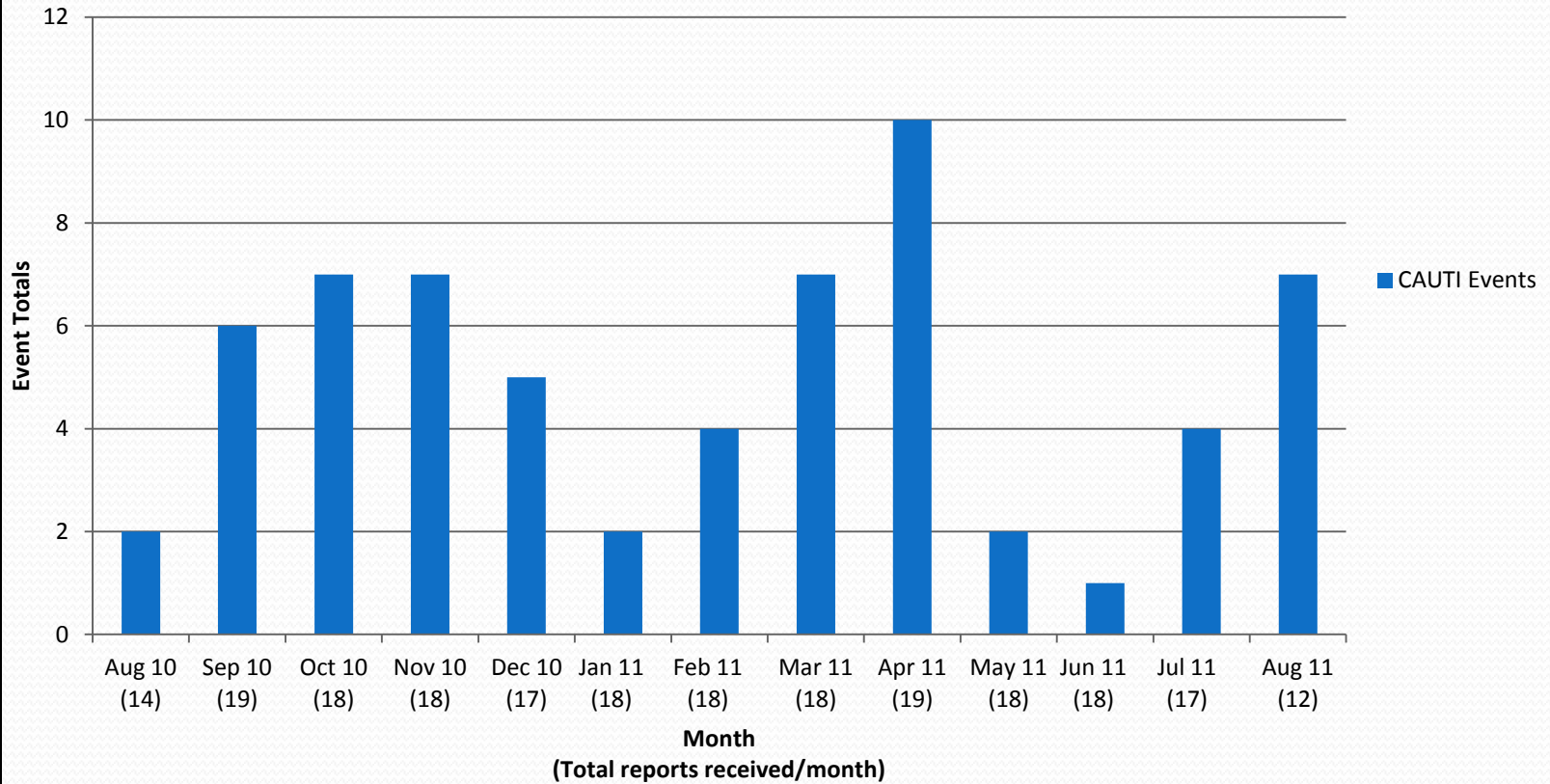


CDI Rate= $\frac{\# \text{CDI Events}}{\# \text{Patient Days}} \times 10,000$

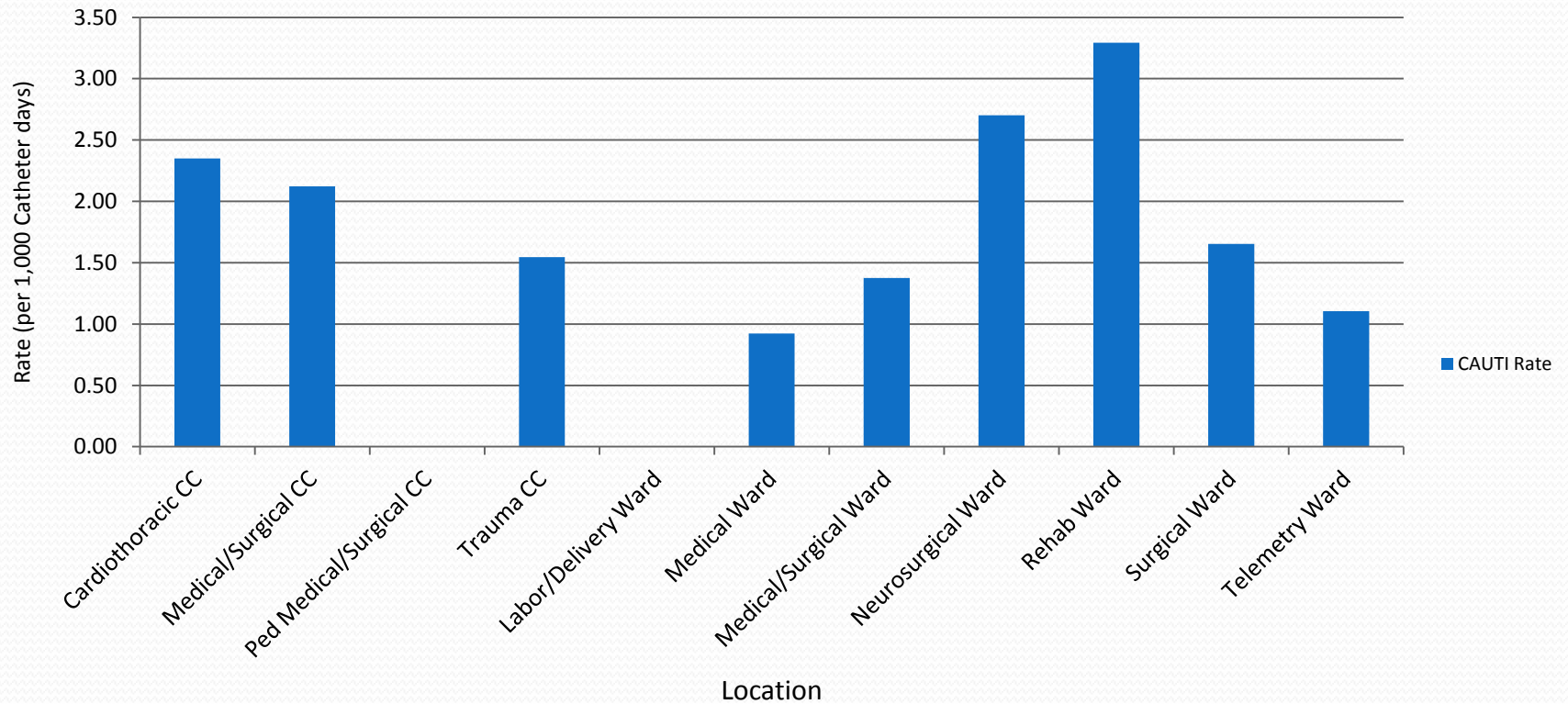
Acute Care Facilities

Hospitals reporting data	13
CAUTI Events	64
CDI Events	16
Total events reported	80

CAUTI Event Totals in Acute Care Facilities



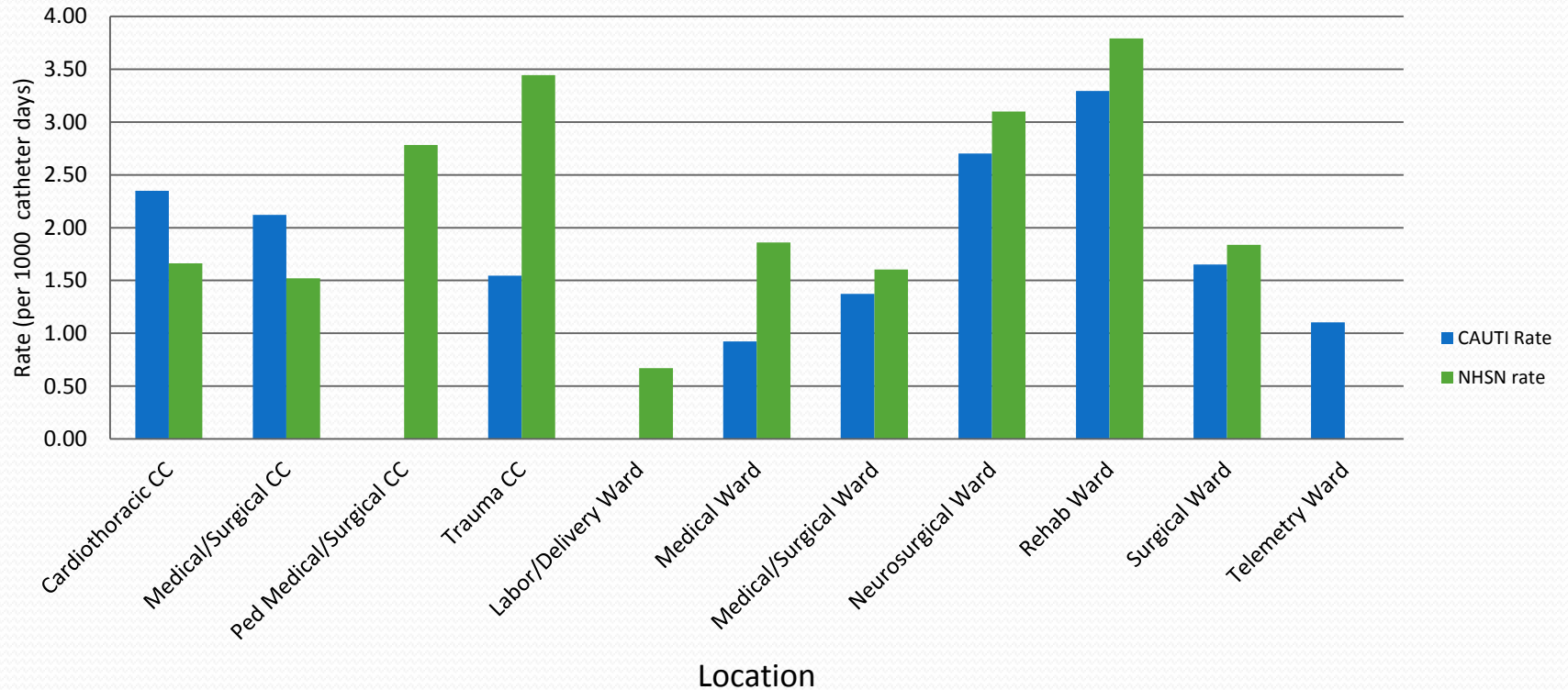
CAUTI Rate by hospital location September 2010- August 2011



CAUTI Rate= $\frac{\# \text{ CAUTI events}}{\# \text{ Catheter days}} \times 1000$

Comparison of CAUTI Rates by Hospital Location

September 2010-August 2011

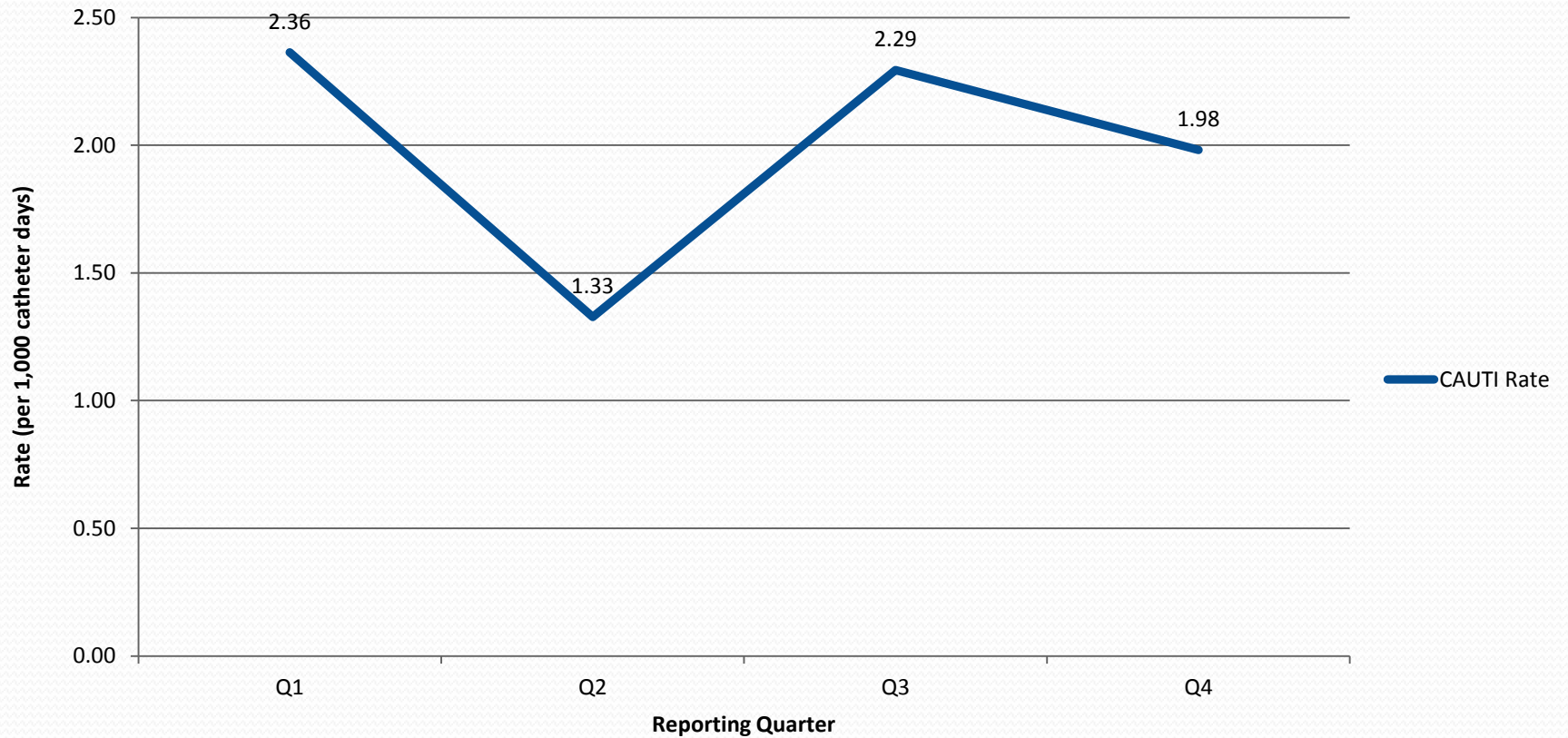


*Trauma Unit: p=.022

**NHSN Data not reported for Telemetry Ward

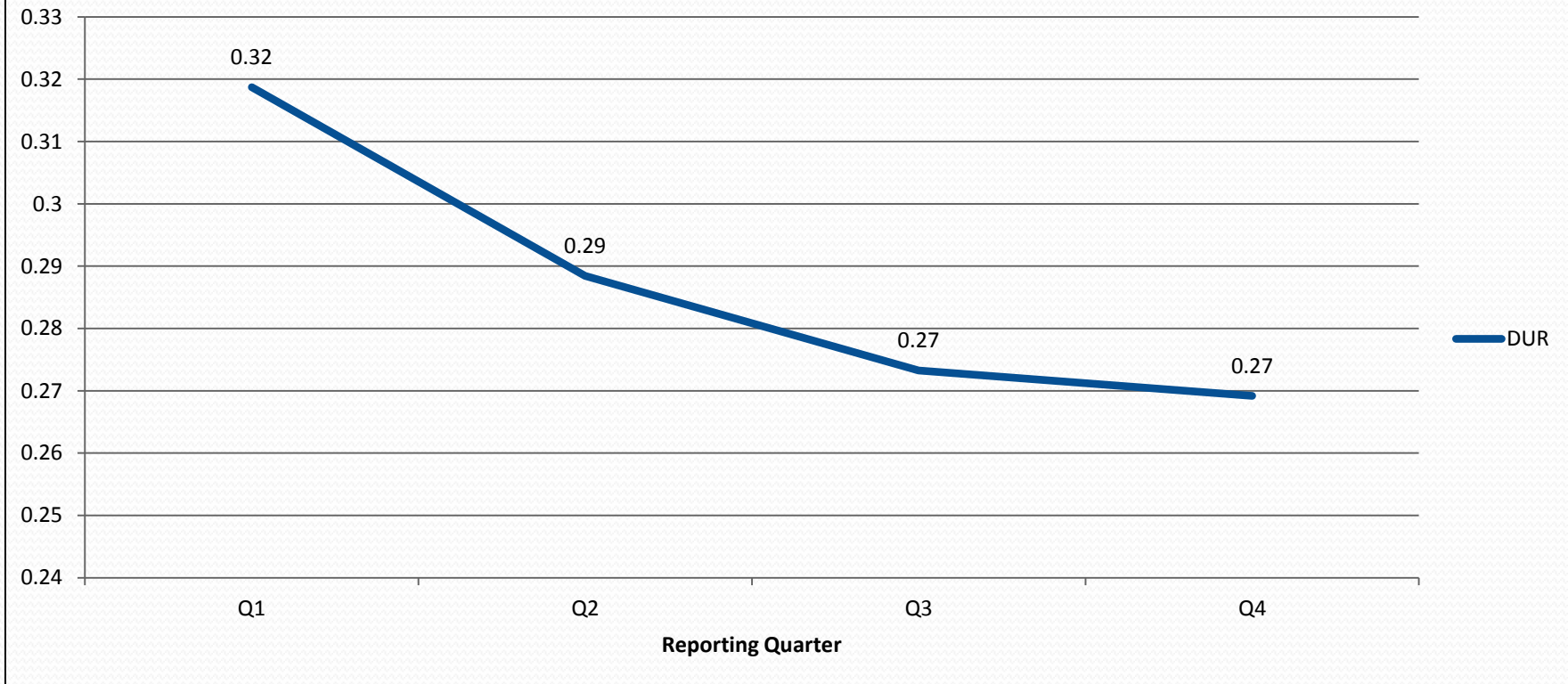
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CAUTI Rate in Acute Care Hospitals September 2010- August 2011



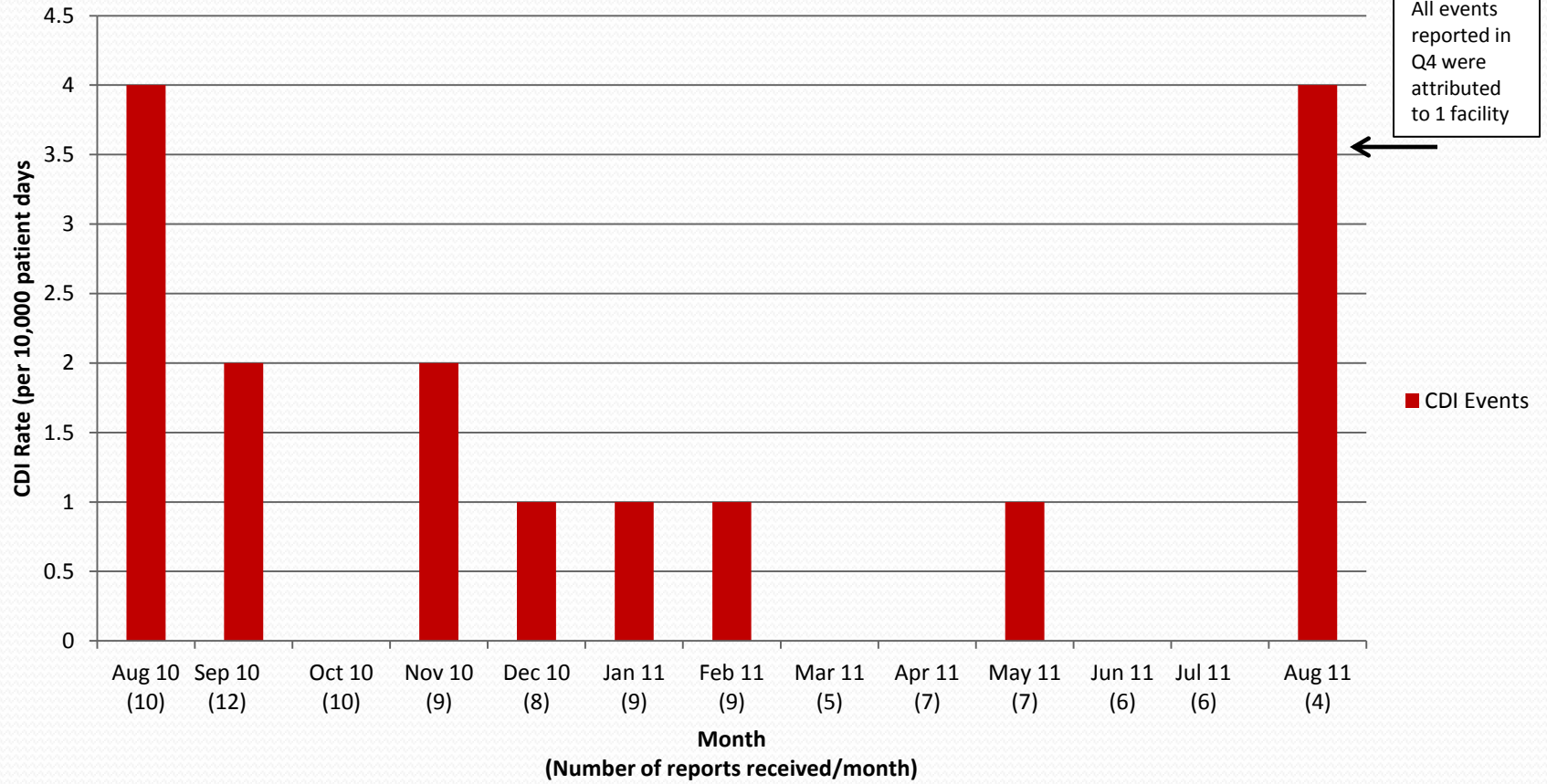
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Catheter Device Utilization Ratio September 2010- August 2011

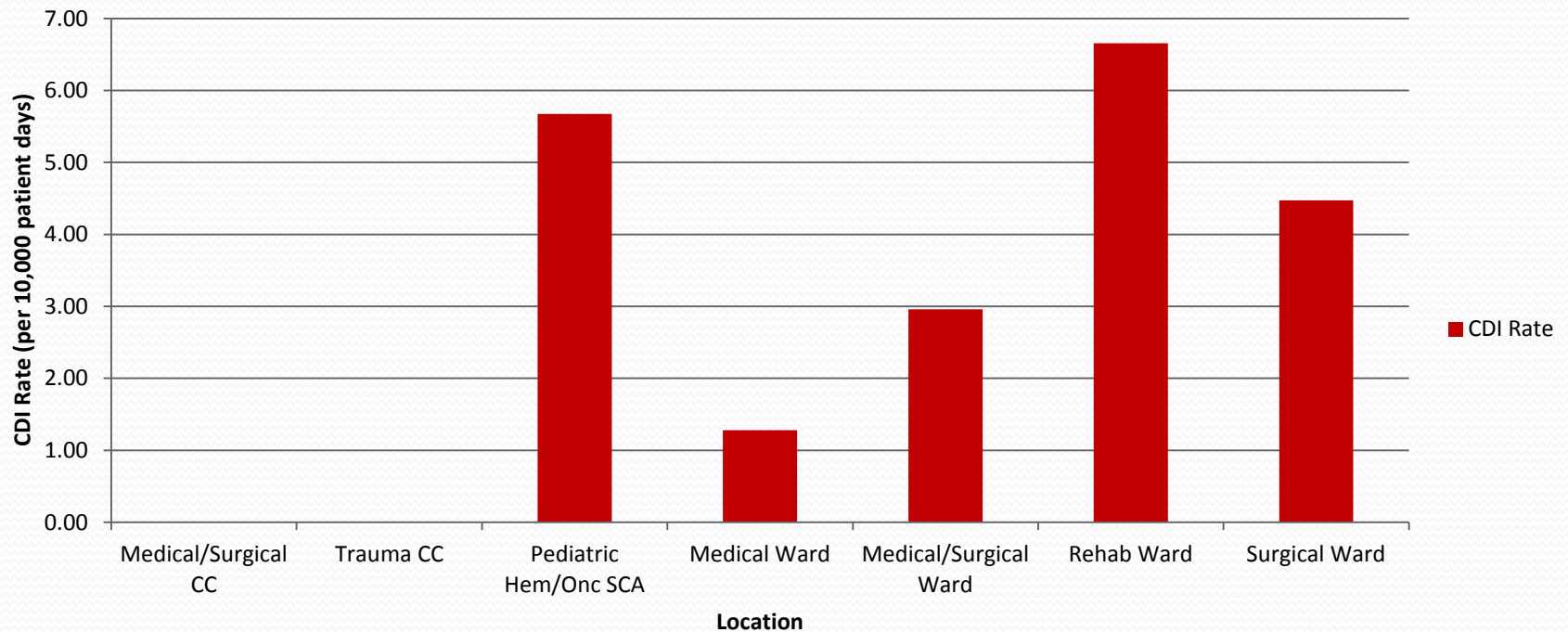


DUR= $\frac{\# \text{ Catheter Days}}{\# \text{ Patient Days}}$

CDI Event Totals in Acute Care Facilities

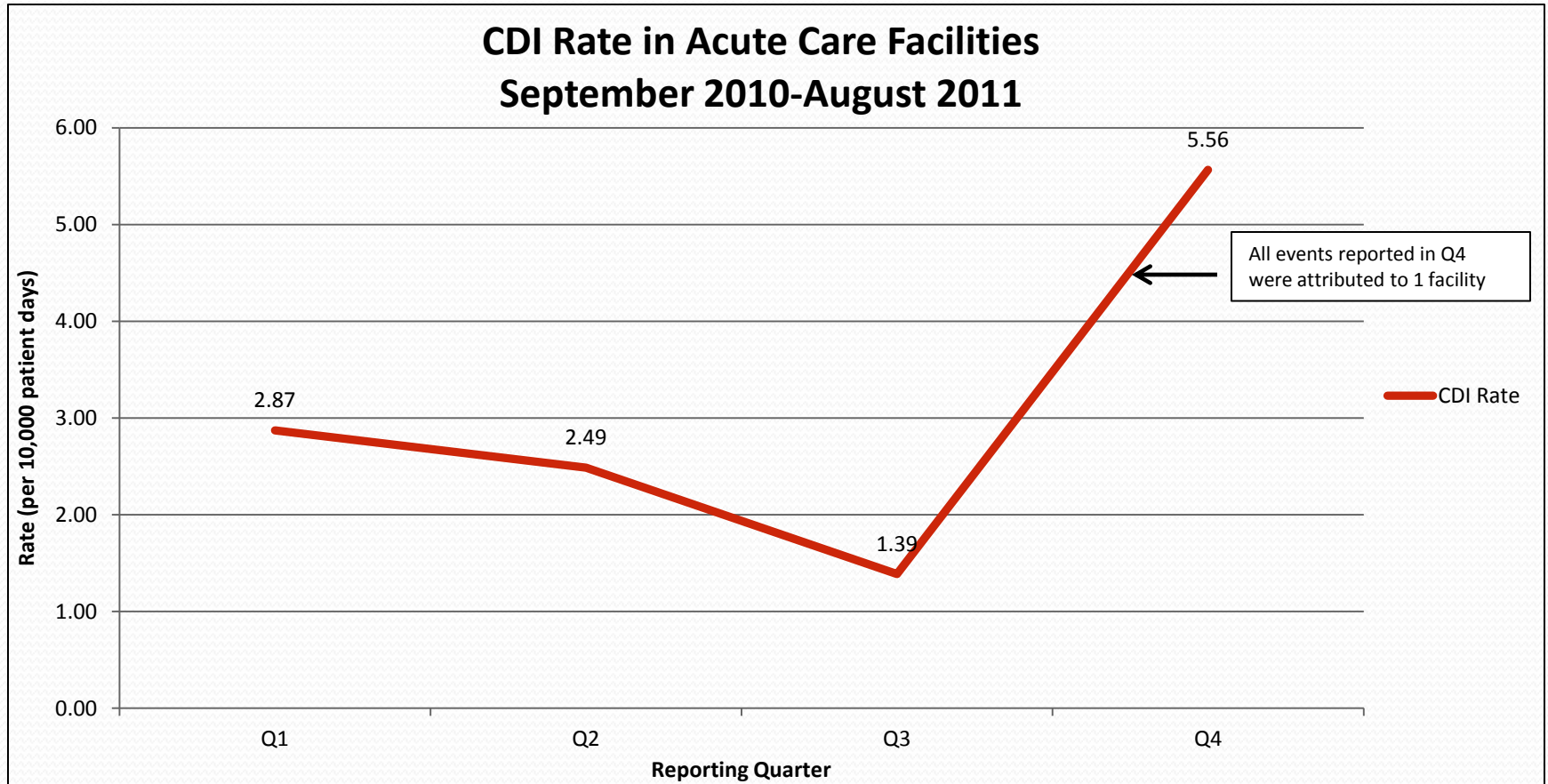


CDI Rate by Hospital Location September 2010- August 2011



$$\text{CDI Rate} = \frac{\text{\#CDI Events}}{\text{\# Patient Days}} \times 10,000$$

CDI Rate in Acute Care Facilities September 2010-August 2011



$$\text{CDI Rate} = \frac{\# \text{CDI Events}}{\# \text{Patient Days}} \times 10,000$$

Summary

- CAUTI Rates
 - Rates decreased in Q1 and Q2 in acute care and LTC
 - Both increased going into Q3 and Q4
- CDI Rates
 - Decreased through Q3 in both acute and LTC
 - Increase during Q4
- Limitations
 - Decrease in facilities reporting
 - Different reporting methods
 - NHSN vs. Survey Monkey
 - Baseline data lacking

Successes

- Established benchmark measurements
- Increased HAI awareness
- Provided tools, education, learning sessions
- NHSN training
- Enhanced communication between acute care hospitals and LTC facilities
- Developed the HAI Resource Center website
 - <http://www.in.gov/isdh/24769.htm>
- Developed a State Plan
- Created HAI epidemiologist position

Thank you!



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