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#### **Presentation Overview**

- Intro to Health Care Associated Infection (HAI)
  Reporting into National Healthcare Safety
  Network (NHSN)
- Explain what data are provided by health care facilities
- Define relationship with Regional HAI Epidemiologists
- Describe flagged Notifiable pathogen data
- Describe Pathogen Distribution



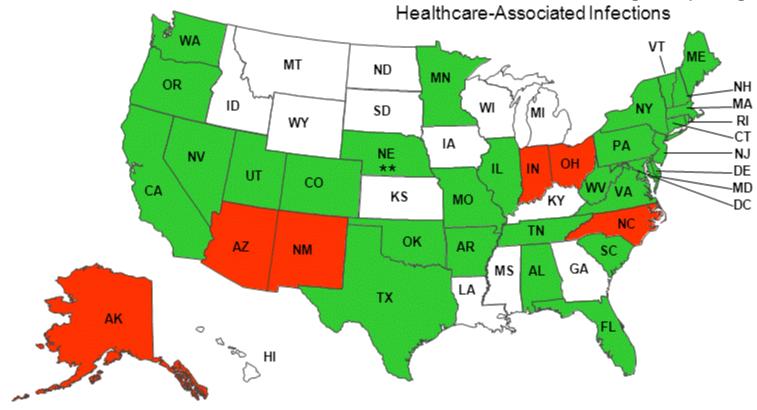
# What are Health care Associated Infections?

- Infections caused by pathogens that a patient is exposed to while receiving medical care at a health care facility.
  - CLABSI: Central Line Associated Bloodstream Infections
  - SI: Surgical Site Infections

See <a href="https://www.CDC.gov/nhsn">www.CDC.gov/nhsn</a> for surveillance definitions

#### **HAI Reporting Laws and Regulations**

States That Have Enacted Laws Relating to Reporting of Healthcare-Associated Infections



- States with study laws
- Mandates public reporting of infection rates
- \*\* Voluntary



#### Reporting Requirements

- Who is required to report?
  - State-Operated/Maintained hospitals that provide surgical or obstetrical services
  - Ambulatory Surgical Centers
  - General Hospitals
    - INCLUDES <u>SOME</u> Long Term Acute Care hospitals and Critical Access Hospitals with ICU/CCU/NICU



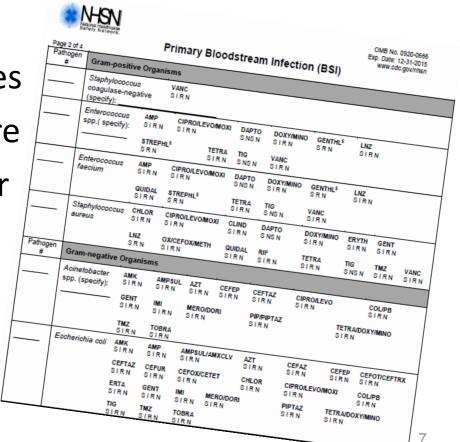
### Reporting Requirements

- Reportable healthcare-associated infections
  - Central line-associated bloodstream infections in the following special care settings: adult, pediatric and/or adolescent ICUs/CCUs, NICUs (Level II/III & Level III Nurseries)
  - Surgical site infections
    - <u>PEDS/ADOLESCENT HOSPITALS:</u> Cardiac procedures, spinal surgery with instrumentation, and ventriculoperitoneal shunt procedures
    - <u>ALL OTHER HOSPITALS</u>: Colon surgeries, hip & knee arthroplasties, abdominal & vaginal hysterectomies, vascular procedures, and coronary artery bypass grafts



# NHSN – Pathogen Data

- NHSN Events (Infections)
  - Pathogen Name
  - Antibiotic susceptibilities
  - Date & Source of Culture
  - Patient DOB and gender
  - Facility Name
  - Signs/Symptoms
  - HAI Risk factors





### **HAI Pathogen Data Flow**



CLABSI and SSI Pathogen Reports







Regional/Central Office HAI Epidemiologists



# Flagged HAI Pathogen Data

Central Office EAIBD Staff: Notifiable pathogens

- Central Office/Regional HAI Epidemiologist:
  - GAS in wound
  - Escalated Enforcement Facilities
  - ≥ 2 of same organism in same NICU per month
  - ≥ 3 of same organism in same facility in rolling 3 months



#### 2012 HAI Pathogen Data

- As of January 3, 2013 for Q3 2012
  - 2,056 Isolates
  - 1 VRSA, 1 VISA, 1 Salmonella, 4 Invasive Strep

Notifiable HAIs for 2012	1	2/3	4	6/5	7	8	9/10	Total	
BSI Isolates									
Salmonella enterica			1					1	
Group B Streptococcus	1	1						2	
Streptococcus pneumoniae				1	1			2	
VRSA*				2				2	
SSI Isolates	•						•		
VISA**		1						1	
Total	1	2	1	2	1			7	

<sup>\*</sup> Not true cases

<sup>\*\*</sup> Still under investigation



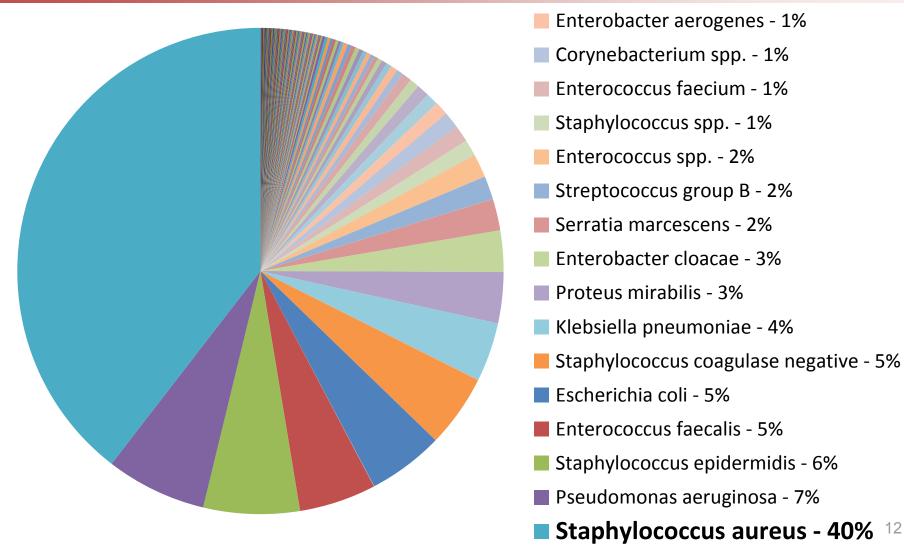
# 2012 HAI Epidemiologist Flags

- As of January 3, 2013... for Q3 2012
  - 46 facilities with pathogen clusters (either NICU, facility-wide or both)

HAI Clusters for Q3 2012	1	2/3	4	5	6	7	8	9/10	11	Total
Facilities with ≥ 2 of same pathogen in NICU in one month	1	2			1			1	1	6
Facilities with ≥ 3 of same pathogen in facility in rolling 3 months	3	10	5	1	8	6	5	2	4	45

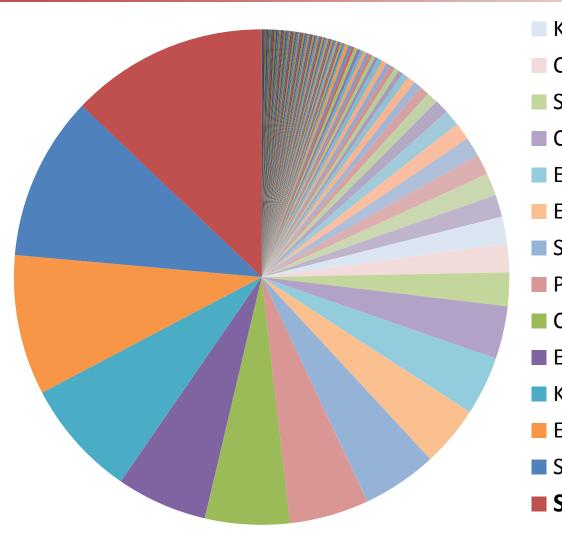


# Texas SSI Pathogens





# Texas BSI Pathogens



- Klebsiella oxytoca 2%
- Candida parapsilosis 2%
- Serratia marcescens 2%
- Candida glabrata 3%
- Enterococcus faecium 4%
- Enterobacter cloacae 4%
- Staphylococcus coagulase negative 5%
- Pseudomonas aeruginosa 5%
- Candida albicans 6%
- Escherichia coli 6%
- Klebsiella pneumoniae 8%
- Enterococcus faecalis 9%
- Staphylococcus aureus 11%
- Staphylococcus epidermidis 13%



#### Thanks!

#### Questions?

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