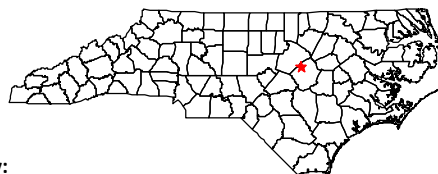


**North Carolina Healthcare-Associated Infections Report**  
**Data from January 1 – June 30 2016**  
**Johnston Health Clayton, Clayton, Johnston County**

**2015 Hospital Survey Information**

Hospital Type: Acute Care Hospital  
 Medical Affiliation: No  
 Admissions in 2015: 1,959  
 Patient Days in 2015: 6,773  
 Total Number of Beds: 50  
 Number of ICU Beds: 0  
 FTE\* Infection Preventionists: 0.45  
 Number of FTEs\* per 100 beds: 0.90

[\*FTE = Full-time equivalent]



**Commentary From Facility:**  
 No comments provided.

**Catheter-Associated Urinary Tract Infections (CAUTI)**

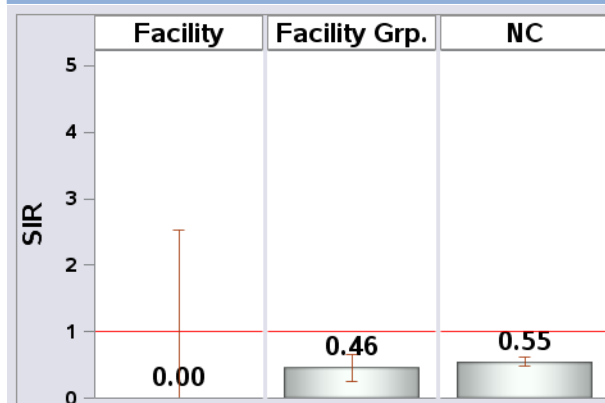


Figure 1: SIRs and 95% confidence intervals, Jan-Jun 2016.

Table 1. Number of Observed and Predicted Infections by ICU and Ward Type, Jan-Jun 2016.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
All reporting units	0	1.2	Same

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.

Note: SIR not calculated if <50 catheter days or <1 predicted infection.

Note: Red line represents the NHSN baseline experience, 2009.

**How Does This Facility Compare to the National Experience?**

= Same: About the same number of infections as predicted by the national baseline experience

**Methicillin-Resistant Staphylococcus aureus Laboratory-Identified Bacteremia (MRSA LabID)**

Note: LabID events are based on positive laboratory results only; not all LabID events represent true illnesses. Events reported here may be higher than events based on clinically-defined illness.

Table 2. Number of Observed and Predicted MRSA Events, Jan-Jun 2016

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	0	Less than 1.0	No Conclusion

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.

Note: Red line represents the NHSN baseline experience, 2010-2011.

**How Does This Facility Compare to the National Experience?**

No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

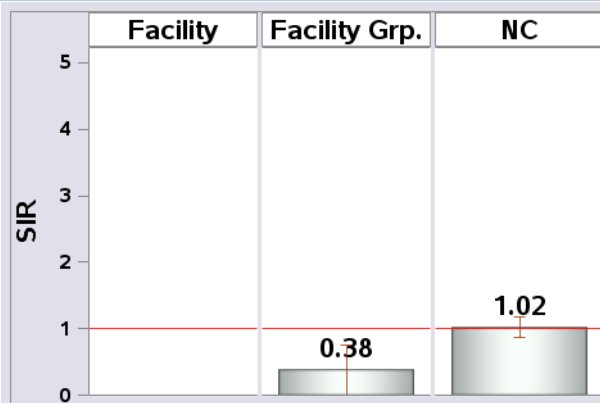


Figure 2: SIRs and 95% Confidence Intervals, Jan-Jun 2016.

**Clostridium difficile Laboratory-Identified Infections (CDI LabID)**

Note: LabID events are based on positive laboratory results only - not all LabID events represent true illnesses. Rates reported here may be higher than rates based on clinically-defined illness.

Table 3. Number of Observed and Predicted CDIs, Jan-Jun 2016

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	0	1.8	Same

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.

Note: Red line represents the NHSN baseline experience, 2010-2011.

**How Does This Facility Compare to the National Experience?**

= Same: About the same number of infections as predicted by the national baseline experience

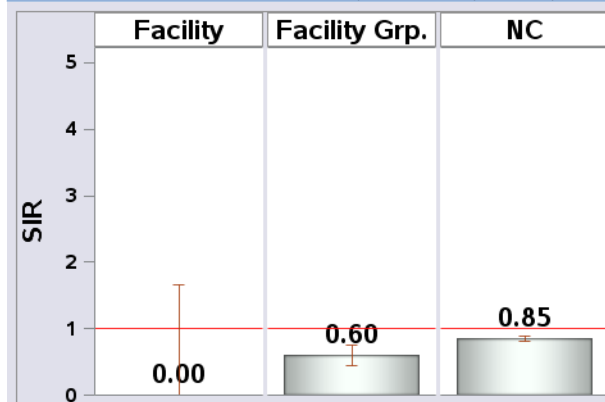


Figure 3: SIRs and 95% Confidence Intervals, Jan-Jun 2016.

**North Carolina Healthcare-Associated Infections Report**  
**Data from January 1 – June 30 2016**  
**Johnston Health Clayton, Clayton, Johnston County**

**Central Line-Associated Bloodstream Infections (CLABSI)**

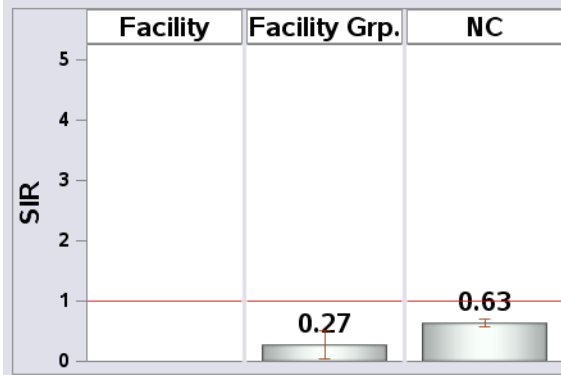


Figure 4: SIRs and 95% confidence intervals, Jan-Jun 2016.

Table 4. Number of Observed and Predicted CLABSI Infections by ICU and Ward Type, Jan-Jun 2016

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped Units	0	Less than 1.0	No Conclusion
All reporting units	0	Less than 1.0	No Conclusion

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.

Note: SIR not calculated if <50 central line days or <1 predicted infection.

Note: Red line represents the NHSN baseline experience, 2006-2008.

**How Does This Facility Compare to the National Experience?**

No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

**Surgical Site Infections (SSI) after Abdominal Hysterectomies**

Table 5. Number of Observed and Predicted SSI Infections (abdominal hysterectomies), Jan-Jun 2016.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	0	Less than 1.0	No Conclusion

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.

Note: Infections from deep incisional and/or organ space.

Note: Red line represents the NHSN baseline experience, 2006-2008.

**How Does This Facility Compare to the National Experience?**

No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

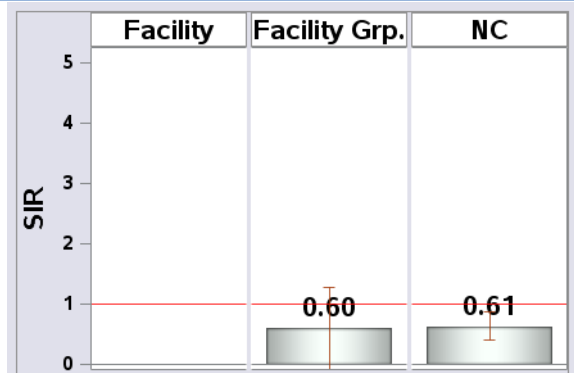


Figure 5: SIRs and 95% Confidence Intervals, Jan-Jun 2016.

**Surgical Site Infections (SSI) after Colon Surgeries**

Table 6. Number of Observed and Predicted SSI Infections (colon surgeries), Jan-Jun 2016.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	0	Less than 1.0	No Conclusion

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.

Note: Infections from deep incisional and/or organ space.

Note: Red line represents the NHSN baseline experience, 2006-2008.

**How Does This Facility Compare to the National Experience?**

No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

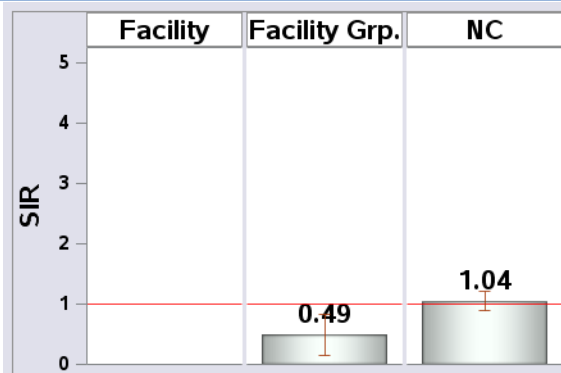


Figure 6: SIRs and 95% Confidence Intervals, Jan-Jun 2016.

**Ventilator-Associated Events (VAE)**

Note from N.C. Division of Public Health: VAE are not reportable at this facility type