

**North Carolina Healthcare-Associated Infections Report**  
**Data from January 1 – September 30, 2020**  
**Mission Hospital, Asheville, Buncombe County**

**2019 Hospital Survey Information**

Hospital Type:	Acute Care Hospital
Medical Affiliation:	Major
Admissions in 2019	55,139
Patient Days in 2019	246,506
Total Number of Beds:	818
Number of ICU Beds:	135
FTE* Infection Preventionists:	7.25
Number of FTEs* per 100 beds:	0.89

(\*FTE = Full-time equivalent)



**Commentary From Facility:**

Mission Health strives to improve the quality and safety of the care we give our patients each and every day. The prevention of infections is one of our highest priorities. By continuously and thoughtfully reviewing processes, procedures and events, we identify opportunities for improvement and address them immediately and appropriately, and share that knowledge internally to avert further issues.

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

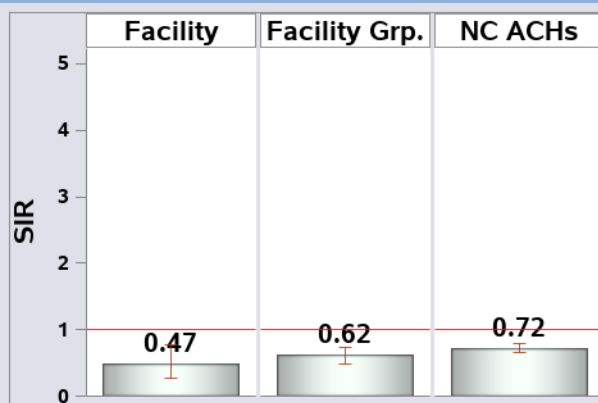


Figure 1: SIRs and 95% confidence intervals, Jan-Sep 2020.

Table 1. Number of Observed and Predicted Infections by ICU and Ward Type, Jan-Sep 2020.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped ICUs	12	21	Better
Adult/Ped Wards	2	8.3	Better
All reporting units	14	30	Better

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, 2015.

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

★ Better: Fewer infections than 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-Sep 2020

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	8	14	Same

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

Note: Red line represents the NHSN baseline experience, 2015.

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

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

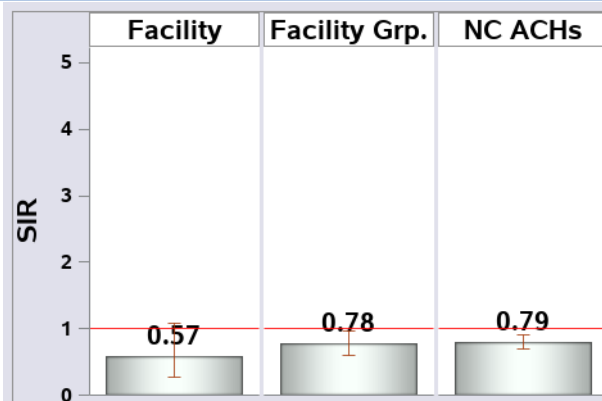


Figure 2: SIRs and 95% Confidence Intervals, Jan-Sep 2020.

**Clostridioides 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-Sep 2020

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	72	79	Same

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

Note: Red line represents the NHSN baseline experience, 2015.

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

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

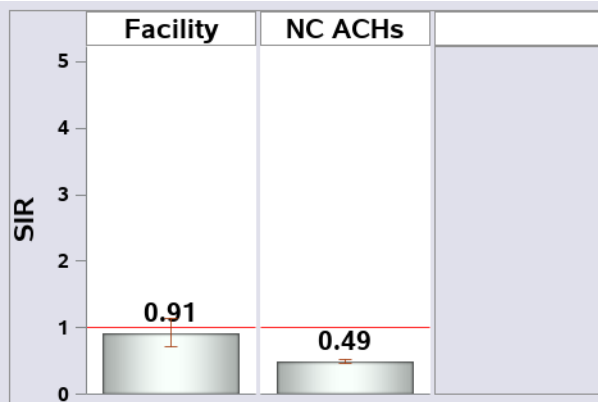


Figure 3: SIRs and 95% Confidence Intervals, Jan-Sep 2020.

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

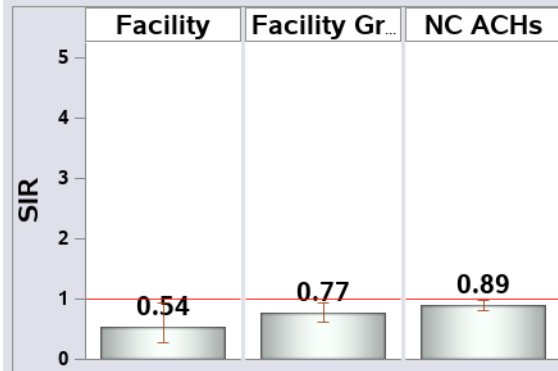


Figure 4: SIRs and 95% confidence intervals, Jan-Sep 2020.

Table 4. Number of Observed and Predicted CLABSI Infections by ICU and Ward Type, Jan-Sep 2020

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped ICUs	9	9.9	Same
Adult/Ped Wards	2	8.5	Better
Neonatal Units	0	1.8	Same
<b>All reporting units</b>	<b>11</b>	<b>20</b>	<b>Better</b>

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, 2015.

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

★ **Better:** Fewer infections than predicted by the national baseline experience

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

Table 5. Number of Observed and Predicted SSI Infections (abdominal hysterectomies), Jan-Sep 2020.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
<b>Facility-wide inpatient</b>	<b>8</b>	<b>3.8</b>	<b>Same</b>

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, 2015.

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

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

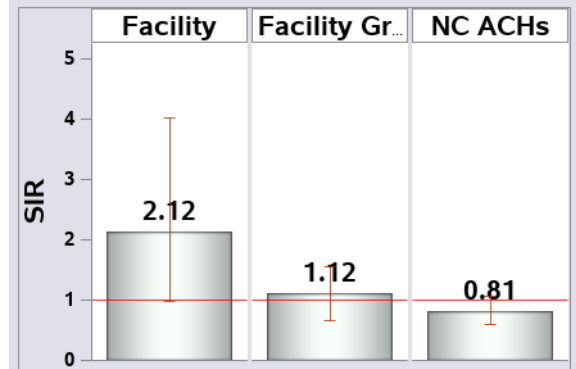


Figure 5: SIRs and 95% Confidence Intervals, Jan-Sep 2020.

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

Table 6. Number of Observed and Predicted SSI Infections (colon surgeries), Jan-Sep 2020.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
<b>Facility-wide inpatient</b>	<b>10</b>	<b>10</b>	<b>Same</b>

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, 2015.

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

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

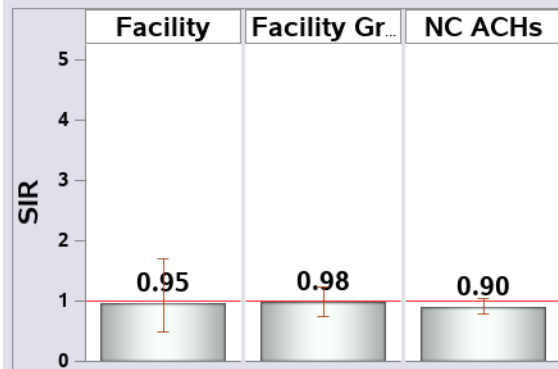


Figure 6: SIRs and 95% Confidence Intervals, Jan-Sep 2020.

**Ventilator-Associated Events (VAE)**

Note from N.C. Division of Public Health: VAEs are not reportable at this facility type after 2018Q3