Healthcare-Associated Infections in North Carolina

Reporting Period: January 1 – December 31, 2014

Healthcare Provider Version

Product of:

N.C. Healthcare-Associated Infections Prevention Program

N.C. Communicable Disease Branch

N.C. Division of Public Health

N.C. Department of Health and Human Services



Introduction

The prevention of healthcare-associated infections is a public health priority in North Carolina and is a collaborative effort among the healthcare and public health communities. This April 2015 Healthcare-Associated Infections report is an important product of this collaboration. Included in this report is information about infections occurring in North Carolina short-term acute care hospitals, long-term acute care hospitals, and inpatient rehabilitation facilities from January 1 through December 31, 2014. Data included in this report are preliminary and subject to change.

This report focuses on five important types of healthcare-associated infections that may occur while patients are hospitalized: central line-associated bloodstream infections, catheter-associated urinary tract infections, and surgical site infections (specifically those following abdominal hysterectomies or colon surgeries), MRSA laboratory-identified infections (MRSA LabID), and *Clostridium difficile* laboratory-identified infections (*C. difficile* or CDI LabID). These infections account for a large proportion of infections and deaths attributed to healthcare, but they do not represent the full spectrum of healthcare-associated infections.

This report was prepared by the North Carolina Healthcare-Associated Infections Prevention Program located in the Communicable Disease Branch of the Epidemiology Section of the North Carolina Division of Public Health. The NC Healthcare-Associated Infections Prevention Program works to eliminate preventable infections in health care settings by:

- 1. Conducting statewide surveillance for selected HAIs;
- 2. Providing useful, unbiased information to health care providers and consumers;
- 3. Promoting and coordinating prevention efforts; and
- 4. Responding to outbreaks in health care settings.

We hope that the information in this report will be useful to providers. Data are intended to provide an understanding of the burden of healthcare-associated infections in North Carolina. Furthermore, providers can use these data to assess their hospital's healthcare-associated infections burden in conjunction with other healthcare facilities. This may help to identify potential resources and opportunities to strengthen their hospital's healthcare-associated infections prevention program. Prevention tips on healthcare-associated infections are also provided (Appendix C). A separate healthcare consumer version is also available at http://epi.publichealth.nc.gov/cd/diseases/hai.

We welcome your feedback to improve the usefulness of future reports (nchai@dhhs.nc.gov). For more information on Healthcare-Associated Infections and the NC Healthcare-Associated Infections Prevention Program, please visit http://epi.publichealth.nc.gov/cd/diseases/hai.

Acknowledgements

The North Carolina Healthcare-Associated Infection Prevention Program would like to acknowledge and thank hospital infection preventionists across the state who work tirelessly to protect patients from infection. These preventionists provided the data used to create this report and worked with their hospital colleagues to identify and reconcile any potential problems with the data. This acknowledgement and gratitude extends to the hospital. While reporting of healthcare-associated infections is required, their support for healthcare-associated infections reporting and efforts to assure accurate reporting of infections is appreciated. The recent successes in fighting healthcare-associated infections would not have been possible without the continuing efforts, dedication and collaboration of hospitals and hospital infection preventionists.

The Healthcare-Associated Infection Prevention Program would also like to recognize the contributions of the Healthcare-Associated Infections Advisory Group members listed in Appendix D. In particular, the program is grateful to the Subgroup on Reporting and Surveillance for their thoughtful feedback on the presentation and content of the Quarterly Reports.

Finally, the program would like to acknowledge our partners, who have been important leaders and strong supporters of surveillance and prevention programs for healthcare-associated infections in North Carolina. These include the North Carolina Hospital Association, the North Carolina Statewide Program for Infection Control and Epidemiology, the North Carolina Chapter of the Association for Professionals in Infection Control and Epidemiology, and the Adult Care Licensure and Nursing Home Licensure and Certification sections of the North Carolina Division of Health Service Regulation.

Table of Contents

Intr	oductionoduction	i
Ack	nowledgements	. ii
	Surveillance for Healthcare-Associated Infections in North Carolina	
II.	Hospital-Specific Summary Reports	. 3

APPENDICES:

APPENDIX A. Definitions APPENDIX B. Acronyms

APPENDIX C. Healthcare-Associated Infections Prevention Tips APPENDIX D. NC Healthcare-Associated Infections Advisory Group

APPENDIX E. Healthcare Facility Groupings, 2014 National Healthcare Safety Network Annual Hospital Survey

I. Surveillance for Healthcare-Associated Infections in North Carolina

Healthcare-associated infections (HAIs) are infections caused by a variety of organisms – including bacteria, viruses and fungi – while receiving medical care. As part of the concerted effort to reduce such types of infections, hospitals report specific types of HAIs to the N.C. Division of Public Health (DPH) as required by law (General Statute 130A-150). Since 2012, they have been reporting central line-associated bloodstream infections (CLABSI), catheter-associated urinary tract infections (CAUTI), and surgical site infections (SSI) occurring after inpatient abdominal hysterectomies or colon surgeries. Beginning in January 2013, short-term acute care hospitals began reporting of laboratory-confirmed (LabID) bloodstream infections caused by methicillin-resistant *Staphylococcus aureus* (MRSA) and infections caused by *Clostridium difficile* (*C. diff*).

By North Carolina law, hospital reporting requirements are based on the reporting requirements established by the Centers for Medicare and Medicaid Services (CMS).

HAI information is entered into the CDC web-based surveillance system called the National Healthcare Safety Network (NSHN). The N.C. HAI Program works with hospitals on a monthly basis to ensure their data are accurate and timely. All data in NHSN are entered and modified by hospitals; the N.C. HAI Program cannot enter or change data in NHSN.

To learn more about CLABSIs, CAUTIs, SSIs, MRSA, *Clostridium difficile* and other HAIs, please visit the N.C. Healthcare-Associated Infections website at http://epi.publichealth.nc.gov/cd/diseases/hai.html. In addition to information about specific infections, there is a link to the "Facts and Figures" webpage (http://epi.publichealth.nc.gov/cd/hai/figures.html), which includes current and previous reports. The Healthcare-Associated Infection in North Carolina - Reference Report issued in October 2012 and revised in July 2013 contains background information on HAIs, HAI surveillance in North Carolina, and detailed information on statistics commonly used to describe and summarize HAIs. Subsequent reports, published quarterly, cover timely state-level and facility-specific data on the incidence of healthcare associated infections in hospitals across the state, as well as information on the creation and progress of various initiatives to reduce HAIs.

According to NC Administrative Code rules (10A North Carolina Administrative Code 41A .0106), North Carolina hospitals are required to report the healthcare-associated infections listed in the CMS-IPPS Rule¹. A list of these conditions and the starting dates for reporting are included in Table 1. Requirements beginning January 2015 will be reflected in the upcoming July 2015 Quarterly Report which will publish Jan-Mar 2015 data.

Table 1: Requirements for Reporting of Healthcare-Associated Infections from N.C. Hospitals^{1,2}

HAI Event	Facility Type	Reporting Start Date
Central line-associated bloodstream infections (CLABSI)	Short-Term Acute Care Hospitals: Adult, Pediatric, and Neonatal ICUs	January 2011
Catheter-associated urinary tract infections (CAUTI)	Short-Term Acute Care Hospitals: Adult and Pediatric ICUs	January 2012
Surgical site infections (SSI)	Short-Term Acute Care Hospitals: Colon and abdominal hysterectomy procedures	January 2012
CLABSI	Long-Term Care Hospitals*	October 2012
CAUTI	Long-Term Care Hospitals*	October 2012
CAUTI	Inpatient Rehabilitation Facilities	October 2012
MRSA bacteremia LabID events (laboratory identified)	Short-Term Acute Care Hospitals including Specialty Hospitals (i.e., psychiatric)	January 2013
Clostridium difficile LabID events (laboratory identified)	Short-Term Acute Care Hospitals including Specialty Hospitals (i.e., psychiatric)	January 2013
CLABSI	Short-Term Acute Care Hospitals: Medical,	January 2015

¹ Centers for Medicare and Medicaid Services. Acute Inpatient Prospective Payment System. www.cms.gov/Newsroom/MediaReleaseDatabase/Fact-sheets/2014-Fact-sheets-items/2014-08-04-2.html. Accessed April 29, 2015.

_

² Centers for Disease Control and Prevention, Healthcare Facility Reporting Requirements to CMA via NHSN – Frequently Asked Questions, http://www.cdc.gov/nhsn/faqs/FAQ_CMS_HAI.html. Accessed April 29, 2014.

	Surgical, Medical/Surgical Wards (per NC mandate this includes Specialty Hospitals which have Medical wards)	
CAUTI	Short-Term Acute Care Hospitals: Medical, Surgical, Medical/Surgical Wards (per NC mandate this includes Specialty Hospitals which have Medical wards)	January 2015
MRSA LabID	Inpatient Rehabilitation Facilities (includes all CMS units within Short-term Acute Care Hospitals and free-standing IRFs) Long-Term Care Hospitals*	January 2015
Clostridium difficile LabID	Inpatient Rehabilitation Facilities (includes all CMS units within Short-term Acute Care Hospitals and free-standing IRFs) Long-Term Care Hospitals*	January 2015

^{*}Long-Term Care Hospitals are called Long-Term Acute Care Hospitals in the National Healthcare Safety Network.

Hospital-Specific Summary Reports II.

A. Explanation of the Hospital-Specific Summary Reports

Each hospital-specific summary report contains up to seven sections: 1) general hospital information, 2) central lineassociated bloodstream infections (CLABSI), 3) catheter associated urinary tract infections (CAUTI), 4) surgical site infections (SSI) after abdominal hysterectomies and colon surgeries, 5) MRSA laboratory-identified events (MRSA LabID), 6) C. difficile laboratory-identified events (CDI LabID), and 7) commentary from the hospital. These sections are described below.

These reports cover January 1, 2014 through December 31, 2014 and data were downloaded from NHSN on March 12, 2015; any changes made to the data after this date are not reflected in this report.

Before reviewing this report, a few clarifications about the data need to be made:

- 1. The data are preliminary. Although efforts were made by hospitals and the N.C. HAI Program to ensure that the data were accurate and complete, a formal validation of the data has not yet been performed. Until data validation is completed, data should be interpreted with caution.
- The data were self-reported. Although efforts were made through education and training to improve the standardization and understanding of NHSN surveillance guidelines, definitions, and criteria, there can be variability in interpretation and application, leading to differences in reporting practices among hospitals. This issue will be addressed by data validation.
- There may be variation between data published by the N.C. HAI Program and data published elsewhere (i.e., CMS, Centers for Medicare and Medicaid Services). This difference may occur as facilities have the ability to modify their data in NHSN at any time. Thus, data may appear to vary if different data collection periods or report cutoff dates are used.
- Be cautious when interpreting crude (or cumulative) rates. Some rates (unlike SIRs) presented in this report are NOT adjusted for all HAI risk factors. Such risk factors for which rates may not be adjusted include patient population, type of hospital (i.e., primary medical school affiliation), or testing mechanism (in the event of Clostridium difficile). Hospitals, locations, and individuals may have a higher risk for HAIs and as a result may have higher rates of infection, Although crude or cumulative CLABSI and CAUTI rates are provided for each hospital (as "YTD Total for Reporting ICUs" in the report), it is important to look closely at the location-specific rates as they reflect the different patient populations in each unit. Note that rates for SSI and LabID events are not risk-adjusted. More specifically, the *Clostridium difficile* testing method is not taken into account for rates (but is for SIRs).
- The rates of infections were not included for HAIs in a few facilities. Calculating rates with small numbers in the denominator will lead to an unstable estimate. Therefore the N.C. HAI Program chose not to present rates for units, procedures or hospitals that did not meet a minimum threshold value for the reporting period. The minimum threshold numbers are based on CDC recommendations for reporting healthcare-associated infection data:
 - Central line-associated bloodstream infections: 50 central line days;
 - Catheter-associated urinary tract infections: 50 catheter days; and
 - Surgical site infections: 20 surgeries.
- Standardized infection ratios (SIRs): SIRs allow facilities to see how the number of hospital-onset events reported to NHSN compares to the number that would be expected, based on data from other hospitals nationwide. This measure can be used to compare hospitals to each other and to a national baseline. These comparisons can drive prevention practices that will lead to improved outcomes, including the reduction of patient morbidity and mortality. It is important to note some caveats with respect to SIR data. First, the NHSN reference datasets used as the national baselines are somewhat outdated; some going as far back as 2006. Once these national baselines are updated or state-specific baselines are established, the SIRs will likely increase. Additionally, SIRs are a ratio; not a rate or an actual number of infections. The number or rate of infections cannot be determined by the SIR; these data are reported separately in this report.
- 7. **Laboratory-Identified Events (LabID):** Methicillin-resistant *Staphylococcus aureus* (MRSA) bacteremia (blood infection) LabID events and Clostridium difficile (CDI) LabID events rely on laboratory data without requiring clinical information about the patient. This allows for a much less labor-intensive means to track MRSA and CDI infections. The N.C. HAI Prevention Program would like to highlight certain caveats in using and interpreting LabID event data. For example, experience in other states has shown that CDI infection rates tend to be higher when using LabID event data compared to a clinical case definition. Reasons for this may include differences in how individual facilities define and classify clinical N.C. Division of Public Health, HAI Prevention Program N.C. HAI Quarterly Report (Provider Version) - April 2015

disease and variations in hospital laboratory testing methods and practices. LabID events should be considered a 'proxy' measure to estimate the number of MRSA and CDI infections actually occurring. Despite these caveats, there are benefits to using LabID data. LabID events do not depend on clinical interpretation by providers and thus offer a more standardized and consistent method of collecting and reporting MRSA and CDI surveillance data. Moreover, LabID events are currently being used by CMS for surveillance of MRSA and CDI. Improving prevention practices as described in existing clinical guidelines should result in a decrease in the number of observed MRSA and CDI LabID events as well as a decrease in the number of clinical infections.

8. Specific items to note:

- **a.** Four hospitals had not completed the 2014 NHSN Annual Hospital Survey at the time data were downloaded: These hospitals were grouped using information from the latest hospital survey available.
- **b.** Charlotte Orthopedic only reported Q1 data. Data for Q2-4 were included under Novant Health Presbyterian Medical Center, as they were incorporated under the license of that facility.
- **c.** Davie Medical Center is a new ACH added in 2014 with a special exemption and only reported LabID events.

B. 2014 Hospital Survey Information

This section contains general information about the hospital and includes a map of where the hospital (blue "H" icon) is located in North Carolina. Data in this section are from the NSHN 2014 Annual Hospital Survey unless otherwise specified.

C. HAI Information

All HAIs include reporting from short-term acute care hospitals (i.e., CLABSI, CAUTI, SSI, MRSA LabID, CDI LabID). Long-term acute care hospitals report CLABSI and CAUTI HAIs, while inpatient rehabilitation facilities report only CAUTIs. Specialty hospitals also report MRSA and CDI LabID events. A list of reporting hospitals by facility category can be found in Appendix E.

There may be more than one reporting unit for a given facility HAI (specifically for CLABSI and CAUTI), such as multiple intensive care units, but the hospital-specific report tables only summarize the year-to-date total across all reporting units in the hospital.

Standardized Infection Ratios (SIR): When presenting SIRs, the report data tables and figures show whether a hospital had more ("worse") HAIs, fewer ("better") HAIs, or about the same ("same") number of HAIs compared to the national average (i.e., national experience) based on previous years of reported data. The national baseline years differ for each HAI: CLABSIs and SSIs use data from 2006-2008; CAUTIs use data from 2009; MRSA and CDI LabID events use data from 2010-2011. The national average represents the number of infections predicted for each hospital/unit. Each SIR value has been statistically adjusted for a number of HAI risk factors; when the data are risk-adjusted, it makes it possible to fairly compare state and hospital performance. The SIR comparison of observed infections to predicted infections takes into account differences between hospitals such as types of patients and procedures, as well as other factors such as the hospital's size and whether it is affiliated with a medical school. HAI-specific adjustments are listed below.

CLABSI and CAUTI:

- Type of patient care location
- Hospital affiliation with a medical school
- Bed size of the patient care location

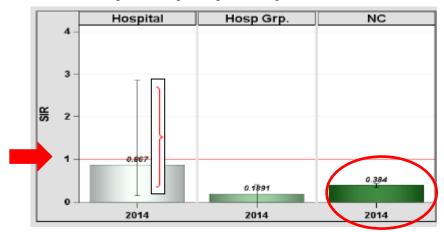
MRSA and CDI:

- Facility bed size
- Hospital affiliation with a medical school
- The number of patients admitted to the hospital who already have *C. difficile* or an MRSA bloodstream infection ("community-onset" cases)
- For hospital-onset *C. difficile*, the SIR also adjusts for the type of test the hospital laboratory uses to identify *C. difficile* from patient specimens.

SSI (abdominal hysterectomies and colon surgeries):

- Duration of surgery
- Surgical wound class
- Use of endoscopes
- Re-operation status
- Patient age
- Patient assessment at time of anesthesiology

Table 2. Example of Hospital-Specific Report Table



NOTE: Not all HAI ratios are provided in the report. If the hospital reports <50 central line days for CLABSI, <50 catheter days for CAUTI, or <20 procedures for SSI (abdominal hysterectomies or colon surgeries) then ratios and additional statistics were not calculated; the ratio is indicated as blank or "." in the HAI table, per Table 2b.

Below is an explanation of numbers and data calculations used in the figures:

- 1). SIR Represented by the colored bars in each figure.
 - SIR = number of observed infections / number of predicted infections based on the national baseline experience
 - SIR is calculated for each HAI
 - The SIR is considered a "best guess" or estimate of observed infections compared to those predicted during January 1, 2014 December 31, 2014

SIR Category	# Observed Infections	# Predicted Infections	SIR Calculation	SIR Value
SIR of 1.0	4	4	4/4	1.0
SIR less than 1.0	2	4	2/4	0.5
SIR greater than 1.0	6	4	6/4	1.5

2). 95% confidence intervals for the SIR – Represented by the skinny gray lines in each figure.

These gray lines represent a lower and a higher limit around the SIR; together these limits create an interval. It means we are 95% confident the SIR estimate falls within this interval. Wider bars indicate less confidence in the SIR estimate.

How to understand the 95% confidence intervals:

- If the value of <u>1.0</u> is included between the lower and upper limit, there is NO significant difference between the number of observed and predicted infections.
- If the value of <u>1.0</u> is <u>NOT</u> included between the lower and upper limit, there IS a significant difference between the number of observed and predicted infections.

SIR Category	# Observed Infections	# Predicted Infections	SIR Calculation	SIR Value	95% Confidence Interval: Lower Limit	95% Confidence Interval: Upper Limit
SIR of 1.0	4	4	4/4	1.0	(0.70	1.3)
SIR less than 1.0	2	4	2/4	0.5	(0.65	0.99)
SIR greater than 1.0	6	4	6/4	1.5	(1.09	1.48)

3). NHSN Baseline (i.e., national experience) - Represented by the solid red line in each figure.

- The NHSN baseline is the number of predicted infections based on the national experience
- The NHSN baseline year may be different for each HAI:
 - o The CLABSI and SSI baselines use data from 2006-2008

- The CAUTI baselines use data from 2009
- The MRSA and CDI LabID baselines use data from 2010-2011

4). How can I use the SIR, 95% Confidence Interval, and the NHSN Baseline to know how a hospital did compared to the national experience? - To understand each figure, you will need to look at all three of these numbers. You'll specifically need to know whether the SIR falls around 1.0, less than 1.0 or greater than 1.0 and whether the 95% Confidence Interval contains the value of 1.0.

SIR Category	# Observed Infections	# Predicted Infections	SIR Calc	SIR Value	95% Confidence Interval: Lower Limit	95% Confidence Interval: Upper Limit	How Does North Carolina Compare to the National Experience?
SIR of 1.0	4	4	4/4	1.0	(0.70	1.3)	= Same
SIR less than 1.0	2	4	2/4	0.5	(0.65	0.99)	★Better
SIR greater than 1.0	6	4	6/4	1.5	(1.12	1.48)	★ Worse
	2	0.9*	2/0.9	2.2	(1.8	2.3)	No Conclusion

^{*}Or any value <1.0.

• Central Line-Associated Bloodstream Infections (CLABSI)

Short-term acute care hospitals

CLABSIs are reported from hospitals with ICUs (adult, pediatric, and neonatal). This section of the report includes a table and figure about CLABSIs.

The CLABSI table below is an example of the data provided for each HAI, summarizing the type of unit, number of infections, central line/catheter/patient days, rate, predicted infections, standardized infection ratio (SIR) and corresponding confidence interval (CI) with a comparison to national baseline by type of unit. There may be more than one reporting unit for a given classification. At the bottom of table is the "YTD Total for Reporting ICUs" that summarizes the year-to-date total for the reporting units in the hospital.

Explanation of data in example CLABSI table:

			1	2	3	4	5
Type of Unit	# Obs	Line Days	Rate	Pred	SIR	95% CI	Compared to ntl baseline
Medical	5	2,452	2.04	4.66	1.073	0.393, 2.379	Same
Medical/surgical	2	1,163	1.72	1.74	1.146	0.192, 3.788	Same
Neonatal Level II/III	0	218	0	0.35			No Conclusion
YTD Total for Reporting Unit	s 7	3,833	1.83	6.75	1.036	0.453, 2.050	Same

- 1. The rate is the number of CLABSIs divided by the number of central line days, multiplied by 1,000 to get "per 1,000 central line days."
- 2. The predicted number of infections is calculated using CLABSI rates from a standard population during a baseline time period. For CLABSI, the predicted number of infections is based on 2006-2008 NSHN national data.
- 3. The SIR is calculated by dividing the observed number of infections by the predicted number of infections. If the number of predicted infections is less than 1, the SIR is not calculated. The CLABSI SIRs are adjusted by a variety of predictors of infection including central line utilization, type of patient care location, hospital affiliation with a medical school, and bed size of the patient care location.
- 4. The 95% CI corresponds to the SIR presented in the table. When the number of infections is 0, the lower bound of the 95% CI is not calculated.
- 5. The column "compared to nat'l baseline" provides an interpretation for the SIR, and can help you quickly understand and interpret the hospital's data. This is the "take-home message" about healthcare associated infections in this facility.
 - a. Same: about the same number of infections as were predicted (same as the national experience)
 - b. Worse: more infections than were predicted (worse than the national experience)
 - c. Better: fewer infections than were predicted (better than the national experience)

d. No Conclusion: reported data, but there was not enough information to make a reliable comparison to the national experience (# of predicted infections was less than 1).

Long-term acute care hospitals

CLABSIs are reported from adult and pediatric ICUs and wards. As with short-term acute care hospitals, this section includes a table and a figure about CLABSIs. The data included in the table are at the unit-level as well as a year-to-date summary for the hospital. Only the number of CLABSIs, central line days, and rate are included; no SIRs are presented because baseline data are unavailable for calculation. The figure in this section includes the hospital CLABSI rate in comparison to all other long-term acute care hospitals in NC.

• Catheter-Associated Urinary Tract Infections (CAUTI)

Short-term acute care hospitals

CAUTIS are reported from adult and pediatric ICUs and inpatient rehabilitation wards.

Long-term acute care hospitals

CAUTIs are reported from adult and pediatric ICUs and wards. The content of the CAUTI section for long-term acute care hospitals is similar to CLABSIs in long-term acute care hospitals.

Inpatient rehabilitation facilities

CAUTIs are reported from adult and pediatric rehabilitation wards. Hospital-specific summary reports are only generated for free-standing inpatient rehabilitation facilities; data from inpatient rehabilitation wards within short-term acute care hospitals are included in their respective hospital-specific summary reports.

Data in the tables are at the unit-level as well as a year-to-date summary for the facility. Only the number of CAUTIs, catheter days, and rate are included; no SIRs are presented because baseline data are unavailable for calculation. The figure includes the CAUTI rate for the facility in comparison to all other rehabilitation wards in NC, both free-standing and within short-term acute care hospitals.

The content for the CAUTI sections is similar to the CLABSI section, with the following exceptions:

- The rate is the number of CAUTIs divided by the number of catheter days, multiplied by 1,000 to get "per 1,000 catheter days."
- For CAUTI, the predicted number of infections is based on 2009 NSHN national data.
- The CAUTI SIRs are adjusted by a variety of predictors of infection including urinary catheter utilization, type of patient care location, hospital affiliation with a medical school, and bed size of the patient care location.

The SIR calculations, 95% CI, and interpretation for CAUTIs do not differ from CLABSIs.

• Surgical Site Infections (SSI) – Abdominal Hysterectomies and Colon Surgeries Abdominal Hysterectomies

Short-term acute care hospitals

SSIs are reported among female adults 18 years or older following inpatient abdominal hysterectomies. Only SSIs that occurred at the primary incision site within 30 days of the surgery are included in the report. Infections are not included if they occurred after 30 days post-operation or if they involved only the skin or subcutaneous tissues. Finally, if patient age or the American Society of Anesthesiologists (ASA) score was missing for a surgery, it was classified as an "incomplete procedure" and is not included in the final count of surgeries.

Colon Surgeries

Short-term acute care hospitals

SSIs are reported among adults 18 years or older following inpatient colon surgeries. Only SSIs that occurred at the primary incision site within 30 days of surgery are included in the report. Infections are not included if they occurred after 30 days post-operation or if they involved only the skin or subcutaneous tissues. Finally, if patient age or the American Society of Anesthesiologists (ASA) score was missing for a surgery, it was classified as an "incomplete procedure" and is not included in the final count of surgeries.

The content for these SSI sections is similar to the CLABSI section, with the following exceptions:

• The rate is the number of SSIs divided by the number of procedures, multiplied by 100 to get "per 100 inpatient surgeries."

• The SSI SIRs are adjusted by a variety of predictors of factors (e.g., duration of surgery, surgical wound class, use of endoscopes, status as re-operation, patient age, and patient assessment at time of anesthesiology [ASA score]) to provide the best possible adjustment for differences in patient-mix within each type of surgery.

The SIR baseline data, calculations, 95% CI, and interpretation for SSIs do not differ from CLABSIs and other HAIs.

• MRSA Bacteremia Laboratory-Identified Events (MRSA LabID)

Short-term acute care hospitals

MRSA LabID events only include non-duplicate MRSA-positive lab assays collected >3 days after admission to the facility. Duplicate results and active surveillance testing results are excluded from reports. Multiple categories of MRSA LabID events exist [healthcare facility-onset (HO) or community-onset (CO)]; however, only HO LabID events are published.

The content for the MRSA LabID section is similar to the CLABSI section, with the following exceptions:

- The rate is the number of MRSA LabID events (infections) divided by the number of patient days, multiplied by 1,000 to get "per 1,000 patient days".
- The predicted number of infections is calculated using MRSA LabID rates based on 2010-2011 NSHN national data.
- The MRSA LabID SIRs are adjusted by a variety of predictors of infection including hospital affiliation with a medical school, bed size of the patient care location, and facility prevalence rate.

The SIR calculations, 95% CI, and interpretation for MRSA LabID events do not differ from CLABSIs and other HAIs.

• Clostridium difficile Laboratory-Identified Events (CDI LabID)

Short-term acute care hospitals

CDI LabID events only include non-duplicate, non-recurrent CDI-positive lab assays collected >3 days after admission to the facility. CDI LabID events are included in the report only if three or more consecutive months of CDI LabID data are reported within a calendar year. NICUs and active surveillance testing are excluded from CDI reporting requirements. Multiple categories of CDI LabID events exist [healthcare facility-onset (HO), community-onset (CO), and community-onset healthcare facility associated (CO-HFA)]; however, only HO LabID events are published.

The content for the CDI LabID section is similar to the CLABSI section, with the following exceptions:

- The rate is the number of CDI LabID events (infections) divided by the number of patient days multiplied by 10,000 to get "per 10,000 patient days".
- The predicted number of infections is calculated using CDI LabID rates based on 2010-2011 NSHN national data.
- The CDI LabID SIRs are adjusted by a variety of predictors of infection including hospital affiliation with a medical school, bed size of the patient care location, facility prevalence rate, and CDI laboratory test type.

The SIR calculations, 95% CI, and interpretation for CDI LabID events do not differ from CLABSIs and other HAIs.

D. Commentary from Hospital

This section includes hospital comments on their HAI data and current infection control activities. Hospitals can provide a link to their hospital website to provide lengthier comments.

Statistics

For a detailed explanation of statistics included in the HAI reports, see the NC DHHS HAI in NC report issued October 2012 and revised July 2013 (http://epi.publichealth.nc.gov/cd/hai/figures/hai_jul2013 reference.pdf). Explanations on concepts such as statistical significance and computation of measures including rates and standardized infection ratios (SIRs) are provided.

For further explanation of the HAI tables and graphs presented for each hospital, consult Section V of the 2013 N.C. HAI Annual Report issued April 2014 for Healthcare Providers, pages 59-63 (http://epi.publichealth.nc.gov/cd/hai/figures.html).

Alamance Regional Medical Center, Burlington, Alamance County

2014 Hospital Survey Information

Hospital Type: Acute Care Hospital

Medical Affiliation:NoAdmissions in 2014:12,314Patient Days in 2014:49,344Total Number of Beds:218Number of ICU Beds:20FTE* Infection Preventionists:1.00Number of FTEs* per 100 beds:0.46



*FTE = Full-time equivalent

Central Line-Associated Bloodstream Infections (CLABSI)

Hospital Hosp Grp. NC

3

C 2

1

0.6397

0.384

0 2014

2014

2014

Table 1. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008. Compared to ntl baseline # Obs Line Days Rate # Pred SIR 95% CI 0.43 3.5 0.286 Medical/surgical 1 2,332 0.014, 1.410 Same Neonatal Level II/III 0 91 0 0.1 No Conclusion YTD Total for Reporting Units 0.278 2,423 0.41 3.6 0.014, 1.370 Same 1

Figure 1. Rates and 95% Confidence Intervals, Jan-Dec 2014.

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 central line days

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

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. Rates reported here may be higher than rates based on clinically-defined illness.

Table 2. Rate and SIR. Jan-Dec 2014 in Comparison to National Baseline Data from 2010-2011.

Location	# Obs	Pat Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Facility-wide inpatient	0	49,334	0	2.88	0	, 1.042	Same

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 patient days

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

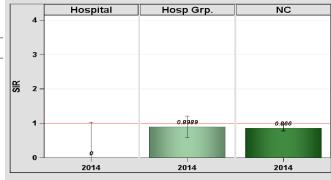


Figure 2. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

lostridium 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.

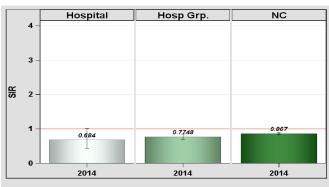


Figure 3. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Table 3. Rate and Sik, Jan-Dec 2014 in Comparison to National Baseline Data from 2010-2011.										
Location	# Obs	# Pat Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline			
Facility-wide inpatient	22	44.542	4.94	32.14	0.684	0.440, 1.019	Same			

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 10,000 patient days.

Alamance Regional Medical Center, Burlington, Alamance County

Catheter-Associated Urinary Tract Infections (CAUTI)

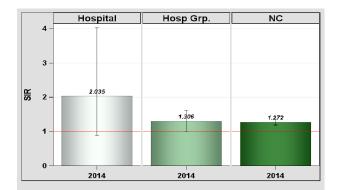


Table 4. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2009.

Type of Unit	# Obs	Cath Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline	
Medical/surgical	7	2,867	2.44	3.44	2.035	0.890, 4.025	Same	
YTD Total for Reporting Units	7	2,867	2.44	3.44	2.035	0.890, 4.025	Same	

Figure 4. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 catheter days.

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

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Abdominal hysterectomy	0	166	0	1.54	0	, 1.946	Same

Note: Infections from deep incisional and/or organ space

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

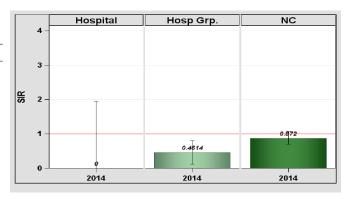


Figure 5. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Surgical Site Infections (SSI) after Colon Surgeries

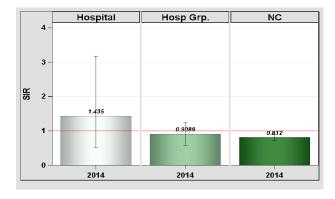


Table 6. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	ntl baseline
Colon surgery	5	110	4.55	3.49	1.435	0.526, 3.180	Same

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

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

Figure 6. SIRs and 95% Confidence Intervals for Colon Surgeries, Jan-Dec 2014.

Commentary from Hospitals:

Cone Health is committed to preventing Healthcare Associated Infections. We have dedicated teams of experts focused on process improvements to improve our patient outcomes. Please contact Cone Health Infection Prevention if you would like further information.

Refer to HAI in N.C. Reference Report - October 2012 (rev July 2013) for further explanation of presented statistics (epi.publichealth.nc.gov/cd/hai/figures/hai_jul2013_reference.pdf). Data as of March 12, 2015.

Sentara Albemarle Medical Center, Elizabeth City, Pasquotank County

2014 Hospital Survey Information

Hospital Type: Acute Care Hospital

Medical Affiliation: Nο 4,930 Admissions in 2014: Patient Days in 2014: 18,261 Total Number of Beds: 88 Number of ICU Beds: 10 FTF* Infection Preventionists: 1.00 Number of FTEs* per 100 beds: 1.14



*FTE = Full-time equivalent

Central Line-Associated Bloodstream Infections (CLABSI)

Hosp Grp. NC Hospital 뚮 0.3238 2014 2014 2014

Compared to ntl baseline # Obs Line Days Rate # Pred SIR 95% CI , 2.447 0 0 1.22 0 Medical/surgical 816 Same , 2.447 YTD Total for Reporting Units 0 816 0 1.22 0 Same

Table 1. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Figure 1. Rates and 95% Confidence Intervals, Jan-Dec 2014.

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1.000 central line days

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

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. Rates reported here may be higher than rates based on clinically-defined illness.

Table 2. Rate and SIR. Jan-Dec 2014 in Comparison to National Baseline Data from 2010-2011.

Location	# Obs	Pat Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline	
Facility-wide inpatient	1	22,164	0.05	5 1.4	0.713	0.036, 3.515	Same	

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 patient days

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

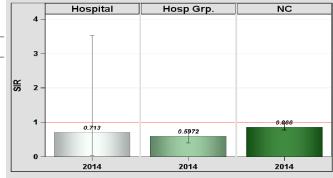


Figure 2. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

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.

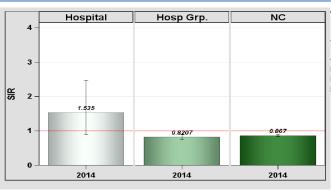


Figure 3. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

1	Table 3. Rate and SIR, Jan-Dec	2014 in	Comparison to	National	Baseline	Data fro	m 2010-2011.	
1	Location	# Obs	# Pat Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
l	Facility-wide inpatient	15	20,995	7.14	9.77	1.535	0.892, 2.475	Same

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 10,000 patient days.

Sentara Albemarle Medical Center, Elizabeth City, Pasquotank County

Catheter-Associated Urinary Tract Infections (CAUTI)

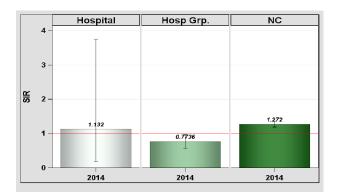


Table 4. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2009.

Type of Unit	# Obs	Cath Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline	
Medical/surgical	2	1,359	1.47	1.77	1.132	0.190, 3.740	Same	
YTD Total for Reporting Units	2	1,359	1.47	1.77	1.132	0.190, 3.740	Same	

Figure 4. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 catheter days.

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

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	ntl baseline
Abdominal hysterectomy	0	60	0	0.64			No Conclusion

Note: Infections from deep incisional and/or organ space

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

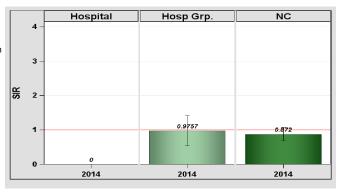


Figure 5. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Surgical Site Infections (SSI) after Colon Surgeries

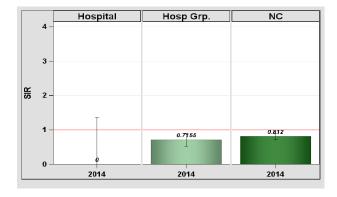


Table 6. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	ntl baseline
Colon surgery	0	66	0	2.19	0	, 1.368	Same

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

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

Figure 6. SIRs and 95% Confidence Intervals for Colon Surgeries, Jan-Dec 2014.

Commentary from Hospitals:

No comments provided.

Annie Penn Hospital, Reidsville, Rockingham County

2014 Hospital Survey Information

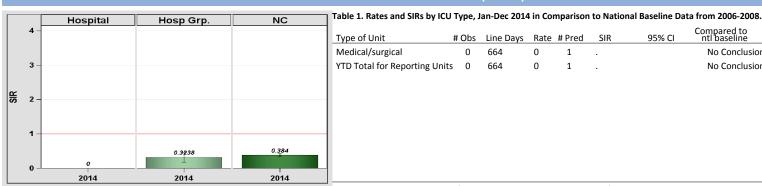
Hospital Type: **Acute Care Hospital**

Medical Affiliation: No 3,395 Admissions in 2014: Patient Days in 2014: 13,819 Total Number of Beds: 110 Number of ICU Beds: FTE* Infection Preventionists: 0.50 Number of FTEs* per 100 beds: 0.45



*FTE = Full-time equivalent

Central Line-Associated Bloodstream Infections (CLABSI)



Obs Line Days Rate # Pred SIR Medical/surgical O 664 n 1 No Conclusion YTD Total for Reporting Units 0 664 O No Conclusion 1

Figure 1. Rates and 95% Confidence Intervals, Jan-Dec 2014.

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1.000 central line days

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

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. Rates reported here may be higher than rates based on clinically-defined illness.

Table 2. Rate and SIR, Jan-Dec 2014 in Comparison to National Baseline Data from 2010-2011.

Location	# Obs	Pat Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Facility-wide inpatient	0	13,819	0	0.76			No Conclusion

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 patient days

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

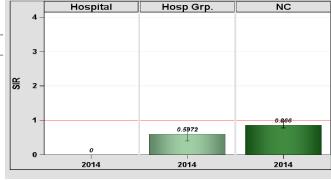


Figure 2. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

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.

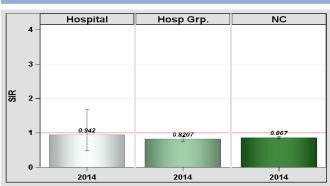


Table 3. Rate and SIR, Jan-Dec 2014 in Comparison to National Baseline Data from 2010-2011.

Location	# Obs	# Pat Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Facility-wide inpatient	10	13,819	7.24	10.61	0.942	0.479, 1.679	Same

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 10,000 patient days.

Figure 3. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Annie Penn Hospital, Reidsville, Rockingham County

Catheter-Associated Urinary Tract Infections (CAUTI)

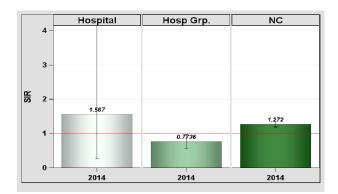


Table 4. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2009.

Type of Unit	# Obs	Cath Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Medical/surgical	2	982	2.04	1.28	1.567	0.263, 5.176	Same
YTD Total for Reporting Units	2	982	2.04	1.28	1.567	0.263, 5.176	Same

Figure 4. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 catheter days.

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

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	ntl baseline
Abdominal hysterectomy	0	18		0.16	•		No Conclusion

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

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

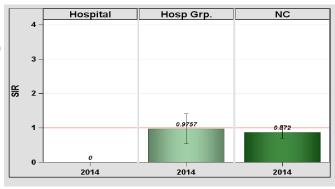


Figure 5. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Surgical Site Infections (SSI) after Colon Surgeries

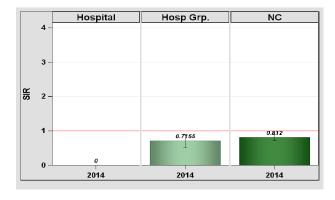


Table 6. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Colon surgery	0	26	0	0.82			No Conclusion

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

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

Figure 6. SIRs and 95% Confidence Intervals for Colon Surgeries, Jan-Dec 2014.

Commentary from Hospitals:

Cone Health is committed to preventing Healthcare Associated Infections. We have dedicated teams of experts focused on process improvements to improve our patient outcomes. Please contact Cone Health Infection Prevention if you would like further information.

Refer to HAI in N.C. Reference Report - October 2012 (rev July 2013) for further explanation of presented statistics (epi.publichealth.nc.gov/cd/hai/figures/hai_jul2013_reference.pdf). Data as of March 12, 2015.

Carolinas Healthcare System Anson, Wadesboro, Anson County

2014 Hospital Survey Information

Hospital Type: Acute Care Hospital

Medical Affiliation: No Admissions in 2014: 172 Patient Days in 2014: 539 Total Number of Beds: 30 Number of ICU Beds: 0 FTF* Infection Preventionists: 0.20 Number of FTEs* per 100 beds: 0.67



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. Rates reported here may be higher than rates based on clinically-defined illness.

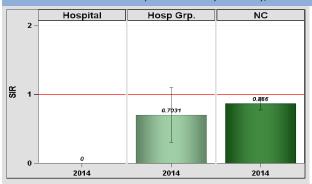


Table 1. Rate and SIR, Jan-Dec 2014 in Comparison to National Baseline Data from 2010-2011. Compared to ntl baseline Location # Obs Pat Days Rate # Pred SIR 95% CI Facility-wide inpatient No Conclusion

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 patient days.

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

Figure 1. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

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 2. Rate and SIR, Jan-Dec 2014 in Comparison to National Baseline Data from 2010-2011.

Location	# Obs	Pat Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Facility-wide inpatient	0	302	0	0.16			No Conclusion

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 10,000 patient days

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

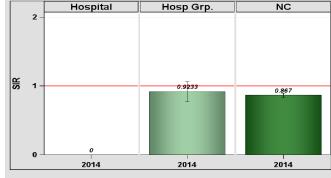


Figure 2. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Other Healthcare-Associated Infections (HAIs)

Anson recieved an exemption from CMS and therefore does not report CLABSIs, CAUTIs, or SSIs to the N.C. Division of Public Health.

Commentary from Hospitals:

No comments provided.

Refer to the HAI in N.C. Reference Report - October 2012 (rev June 2013) for further explanation of presented statistics (epi.publichealth.nc.gov/cd/hai/figures.html). Data as of March 12, 2015.

^{*}FTE = Full-time equivalent

ARHS-Watauga Medical Center, Boone, Watauga County

2014 Hospital Survey Information

Hospital Type: **Acute Care Hospital**

Medical Affiliation: Nο 5,478 Admissions in 2014: Patient Days in 2014: 19,162 Total Number of Beds: 117 Number of ICU Beds: 10 FTE* Infection Preventionists: 1.00 Number of FTEs* per 100 beds: 0.85



*FTE = Full-time equivalent

Central Line-Associated Bloodstream Infections (CLABSI)

Table 1. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008. Hosp Grp. NC Hospital 뚮 0.3238 2014 2014 2014

95% CI # Obs Line Days Rate # Pred SIR , 2.890 1.04 0 Medical/surgical O 691 0 Same , 2.890 YTD Total for Reporting Units 0 691 0 1.04 0 Same

Figure 1. Rates and 95% Confidence Intervals, Jan-Dec 2014.

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1.000 central line days

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

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. Rates reported here may be higher than rates based on clinically-defined illness.

Table 2. Rate and SIR, Jan-Dec 2014 in Comparison to National Baseline Data from 2010-2011.

Location	# Obs	Pat Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Facility-wide inpatient	0	20,073	0	0.72			No Conclusion

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 patient days

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

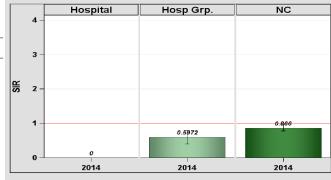


Figure 2. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

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.

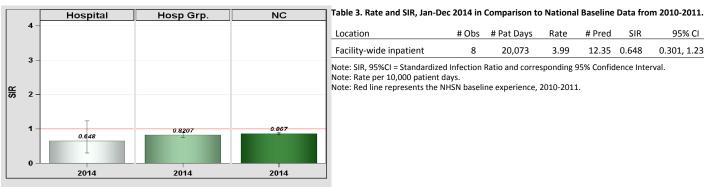


Figure 3. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Location		# Pat Days		# Pred	SIR	95% CI	Compared to ntl baseline
Facility-wide inpatient	8	20,073	3.99	12.35	0.648	0.301, 1.231	Same

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 10,000 patient days.

ARHS-Watauga Medical Center, Boone, Watauga County

Catheter-Associated Urinary Tract Infections (CAUTI)

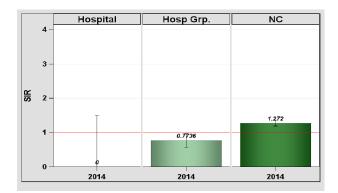


Table 4. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2009.

Type of Unit	# Obs	Cath Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Medical/surgical	0	1,541	0	2	0	, 1.495	Same
YTD Total for Reporting Units	0	1,541	0	2	0	, 1.495	Same

Figure 4. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 catheter days.

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

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	ntl baseline
Abdominal hysterectomy	0	8		0.05			No Conclusion

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

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

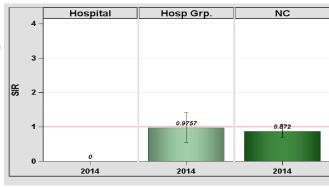


Figure 5. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Surgical Site Infections (SSI) after Colon Surgeries

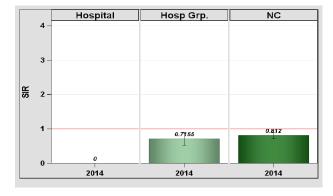


Table 6. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	ntl baseline
Colon surgery	1	28	3.57	0.78			No Conclusion

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

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

Figure 6. SIRs and 95% Confidence Intervals for Colon Surgeries, Jan-Dec 2014.

Commentary from Hospitals:

No comments provided.

Asheville Specialty Hospital, Asheville, Buncombe County

2014 Hospital Survey Information

Hospital Type: Long-term Acute Care Hospital

Admissions in 2014: 340 9,580 Patient Days in 2014: **Total Number of Beds:** 34 FTE* Infection Preventionists: 1.00 Number of FTEs* per 100 beds: 2.94



*FTE = Full-time equivalent

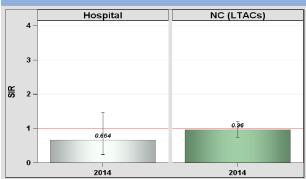


Table 1. Number of Observed and Predicted CLABSI Infections by Location, Jan-Dec 2014. Type of Unit # Obs Line Days Rate # Pred SIR 95% CI Compared to ntl baseline									
Type of Unit	# Obs	Line Days	Rate	# Pred '	SIR	95% CI Co	mpared to itl baseline		
Adult intensive care unit	2	1,919	1.04	2.49	0.802	0.134, 2.649	Same		
Adult ward	3	5,599	0.54	5.04	0.595	0.151, 1.620	Same		
YTD Total for Reporting Units	5	7,518	0.67	7.53	0.664	0.243, 1.471	Same		

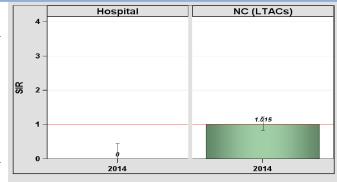
Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 central line days.
Note: Red line represents the NHSN baseline experience, 2006-2008.

Figure 1. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Catheter-Associated Urinary Tract Infections (CAUTI)

Table 2. Number of Observed and Predicted CAUTI Infections by Location, Jan-Dec 2014.										
Type of Unit	# Obs	Cath Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline			
Adult intensive care unit	0	1,604		4.01	0	, 0.747	Better			
Adult ward	0	1,324		2.65	0	, 1.131	Same			
YTD Total for Reporting Ur	its 0	2,928	•	6.66	0	, 0.450	Better			



Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 catheter days

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

Figure 2. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Other Healthcare-Associated Infections (HAIs)

Long-term acute care hospitals (LTACs) do not report LabID C. difficile, LabID MRSA Bacteremia or SSIs to the N.C. Division of Public Health.

Commentary from Hospitals:

No comments provided.

Refer to the HAI in N.C. Reference Report - October 2012 (rev June 2013) for further explanation of presented statistics (epi.publichealth.nc.gov/cd/hai/figures.html). Data as of March 12, 2015.

Betsy Johnson Regional, Dunn, Harnett County

2014 Hospital Survey Information

Hospital Type: **Acute Care Hospital**

Medical Affiliation: Nο 10,031 Admissions in 2014: Patient Days in 2014: 30,292 Total Number of Beds: 135 Number of ICU Beds: 6 FTE* Infection Preventionists: 1.00 Number of FTEs* per 100 beds: 0.74

Hospital



*FTE = Full-time equivalent

뚮

Central Line-Associated Bloodstream Infections (CLABSI)

Table 1. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008. Hosp Grp. NC

Obs Line Days Rate # Pred SIR Medical/surgical O 289 n 0.43 No Conclusion YTD Total for Reporting Units 0 289 0 0.43 No Conclusion

0.3238 2014 2014 2014

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1.000 central line days

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

Figure 1. Rates and 95% Confidence Intervals, Jan-Dec 2014.

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. Rates reported here may be higher than rates based on clinically-defined illness.

Table 2. Rate and SIR. Jan-Dec 2014 in Comparison to National Baseline Data from 2010-2011.

Location	# Obs	Pat Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline	
Facility-wide inpatient	2	30,292	0.07	1.7	1.18	0.198, 3.898	Same	

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 patient days

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

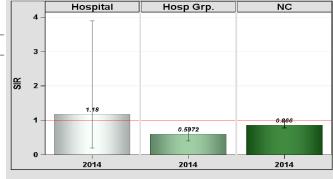
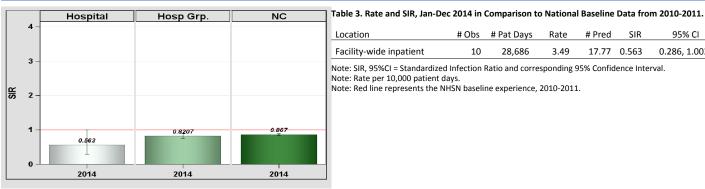


Figure 2. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

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.



Location	# Obs	# Pat Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Facility-wide inpatient	10	28,686	3.49	17.77	0.563	0.286, 1.003	Same

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 10,000 patient days.

Figure 3. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Betsy Johnson Regional, Dunn, Harnett County

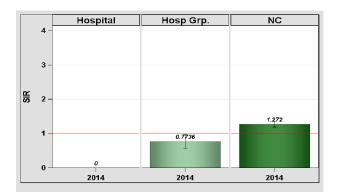


Table 4. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2009.

Type of Unit	# Obs	Cath Day	s Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Medical/surgical	0	751	0	0.98			No Conclusion
YTD Total for Reporting Units	0	751	0	0.98			No Conclusion

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval. Note: Rate per 1,000 catheter days.

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

Figure 4. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	ntl baseline
Abdominal hysterectomy	1	50	2	0.54			No Conclusion

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

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

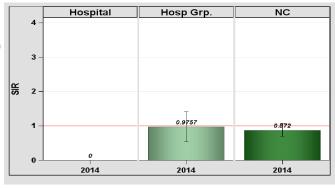


Figure 5. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Surgical Site Infections (SSI) after Colon Surgeries

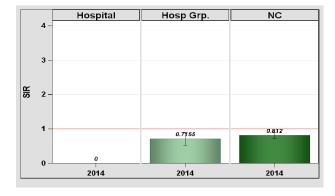


Table 6. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	ntl baseline
Colon surgery	0	18		0.57			No Conclusion

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

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

Figure 6. SIRs and 95% Confidence Intervals for Colon Surgeries, Jan-Dec 2014.

Commentary from Hospitals:

No comments provided.

Carolinas Healthcare System Blue Ridge, Morganton, Burke County

2014 Hospital Survey Information

Acute Care Hospital Hospital Type:

Graduate Medical Affiliation: Admissions in 2014: 6,849 Patient Days in 2014: 28,006 Total Number of Beds: 184 Number of ICU Beds: 10 FTE* Infection Preventionists: 1.00 Number of FTEs* per 100 beds: 0.54



*FTE = Full-time equivalent

Central Line-Associated Bloodstream Infections (CLABSI)

Hosp Grp. NC Hospital 똜 0.3238 2014 2014 2014

95% CI # Obs Line Days Rate # Pred SIR Medical 0 , 1.622 972 0 1.85 Same YTD Total for Reporting Units 0 972 0 1.85 0 , 1.622 Same

Table 1. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Figure 1. Rates and 95% Confidence Intervals, Jan-Dec 2014.

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1.000 central line days

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

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. Rates reported here may be higher than rates based on clinically-defined illness.

Table 2. Rate and SIR. Jan-Dec 2014 in Comparison to National Baseline Data from 2010-2011.

Location	# Obs	Pat Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Facility-wide inpatient	1	28,006	0.04	1.76	0.57	0.029, 2.810	Same

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 patient days

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

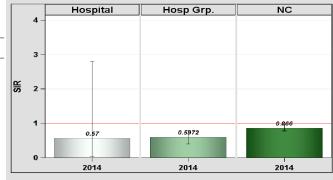
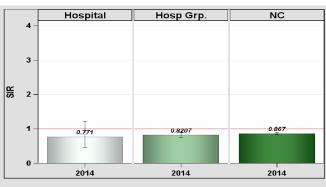


Figure 2. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

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.

F



Location	# Obs	# Pat Days	Rate	# Pred	SIR	95% CI	ntl baseline
Facility-wide inpatient	16	26,959	5.93	20.74	0.771	0.457, 1.226	Same

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Table 3. Rate and SIR, Jan-Dec 2014 in Comparison to National Baseline Data from 2010-2011.

Note: Rate per 10,000 patient days.

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

Figure 3. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Compared to

Carolinas Healthcare System Blue Ridge, Morganton, Burke County

Catheter-Associated Urinary Tract Infections (CAUTI)

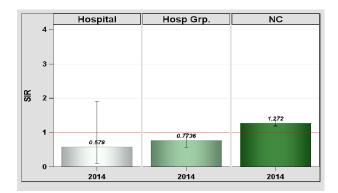


Table 4. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2009.

Type of Unit	# Obs	Cath Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Medical	2	1,730	1.16	3.46	0.578	0.097, 1.910	Same
YTD Total for Reporting Units	2	1,730	1.16	3.46	0.578	0.097, 1.910	Same

Figure 4. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 catheter days.

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

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	ntl baseline
Abdominal hysterectomy	0	20	0	0.18			No Conclusion

Note: Infections from deep incisional and/or organ space

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

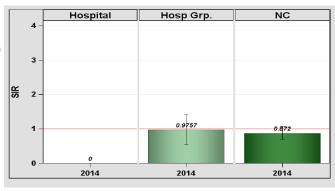


Figure 5. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Surgical Site Infections (SSI) after Colon Surgeries

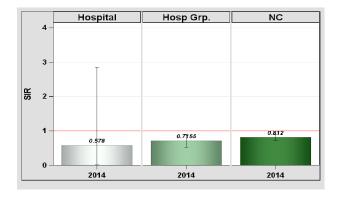


Table 6. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Colon surgery	1	55	1.82	1.73	0.578	0.029, 2.849	Same

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

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

Figure 6. SIRs and 95% Confidence Intervals for Colon Surgeries, Jan-Dec 2014.

Commentary from Hospitals:

The prevention and reduction of healthcare associated infections is a top priority at Blue Ridge Healthcare Hospitals Morganton. To accomplish this, infection prevention strategies are continually assessed and measures implemented to decrease the risk for infection. These measures are based on evidence based practices and clinical guidelines. A comprehensive program is provided that encompasses patient care and patient safety.

Refer to HAI in N.C. Reference Report - October 2012 (rev July 2013) for further explanation of presented statistics (epi.publichealth.nc.gov/cd/hai/figures/hai_jul2013_reference.pdf). Data as of March 12, 2015.

Blue Ridge Healthcare Hospitals-Valdese, Valdese, Burke County

2014 Hospital Survey Information

Acute Care Hospital Hospital Type:

Graduate Medical Affiliation: Admissions in 2014: 1,605 Patient Days in 2014: 5,983 Total Number of Beds: 131 Number of ICU Beds: 10 FTE* Infection Preventionists: 1.00 Number of FTEs* per 100 beds: 0.76



*FTE = Full-time equivalent

뚮

Central Line-Associated Bloodstream Infections (CLABSI)

Table 1. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008. Hosp Grp. NC Hospital

0.3238

2014

Obs Line Days Rate # Pred SIR Medical O 158 n 0.3 No Conclusion YTD Total for Reporting Units 0 158 0 0.3 No Conclusion

Figure 1. Rates and 95% Confidence Intervals, Jan-Dec 2014.

2014

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1.000 central line days

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

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. Rates reported here may be higher than rates based on clinically-defined illness.

Table 2. Rate and SIR. Jan-Dec 2014 in Comparison to National Baseline Data from 2010-2011.

Location	# Obs	Pat Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Facility-wide inpatient	0	5,304	0	0.27			No Conclusion

2014

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 patient days

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

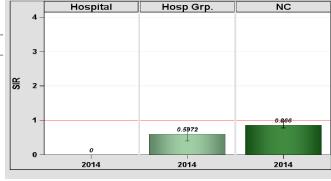


Figure 2. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

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.

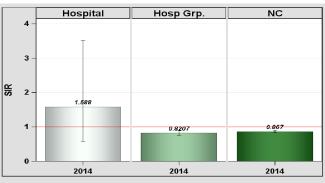


Table 3. Rate and SIR, Jan-Dec 2014 in Comparison to National Baseline Data from 2010-2011.

Location	# Obs	# Pat Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Facility-wide inpatient	5	3,889	12.86	3.15	1.588	0.582, 3.520	Same

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 10,000 patient days.

Figure 3. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Blue Ridge Healthcare Hospitals-Valdese, Valdese, Burke County

Catheter-Associated Urinary Tract Infections (CAUTI)

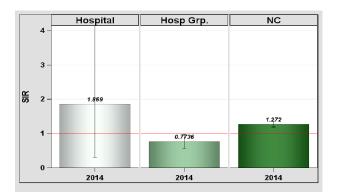


Table 4. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2009.

Type of Unit	# Obs	Cath Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Medical	2	535	3.74	1.07	1.869	0.313, 6.175	Same
YTD Total for Reporting Units	2	535	3.74	1.07	1.869	0.313, 6.175	Same

Figure 4. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 catheter days.

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

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	ntl baseline
Abdominal hysterectomy	0	0		0			No Conclusion

Note: Infections from deep incisional and/or organ space

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

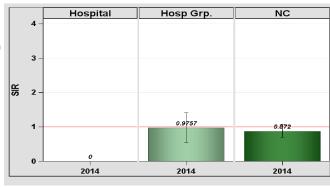


Figure 5. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Surgical Site Infections (SSI) after Colon Surgeries

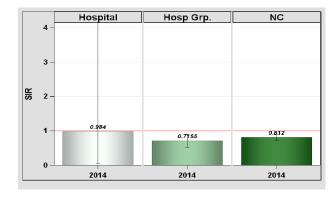


Table 6. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	ntl baseline
Colon surgery	1	30	3.33	1.02	0.984	0.049, 4.852	Same

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

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

Figure 6. SIRs and 95% Confidence Intervals for Colon Surgeries, Jan-Dec 2014.

Commentary from Hospitals:

The prevention and reduction of healthcare associated infections is a top priority at Blue Ridge Healthcare Hospitals Valdese. To accomplish this, infection prevention strategies are continually assessed and measures implemented to decrease the risk for infection. These measures are based on evidence based practices and clinical guidelines. A comprehensive program is provided that encompasses patient care and patient safety.

Blue Ridge Regional Hospital, Spruce Pine, Mitchell County

2014 Hospital Survey Information

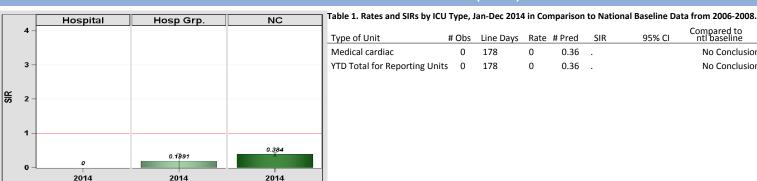
Hospital Type: Medical Affiliation:

Nο 2,013 Admissions in 2014: Patient Days in 2014: 5,264 Total Number of Beds: 25 Number of ICU Beds: 8 FTE* Infection Preventionists: 0.63



Number of FTEs* per 100 beds:

Central Line-Associated Bloodstream Infections (CLABSI)



2.50

95% CI # Obs Line Days Rate # Pred SIR Medical cardiac n 178 0 0.36 No Conclusion YTD Total for Reporting Units 0 178 0 0.36 No Conclusion

Figure 1. Rates and 95% Confidence Intervals, Jan-Dec 2014.

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1.000 central line days

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

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. Rates reported here may be higher than rates based on clinically-defined illness.

Table 2. Rate and SIR, Jan-Dec 2014 in Comparison to National Baseline Data from 2010-2011.

Location	# Obs	Pat Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Facility-wide inpatient	1	5,264	0.19	0.4			No Conclusion

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 patient days

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

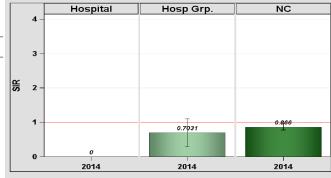


Figure 2. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

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.

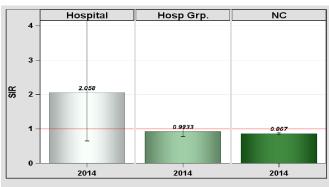


Figure 3. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Location		# Pat Days				95% CI	Compared to ntl baseline
Facility-wide inpatient	4	4,279	9.35	1.94	2.058	0.654, 4.965	Same

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Table 3. Rate and SIR, Jan-Dec 2014 in Comparison to National Baseline Data from 2010-2011.

Note: Rate per 10,000 patient days.

^{*}FTE = Full-time equivalent

Blue Ridge Regional Hospital, Spruce Pine, Mitchell County

Catheter-Associated Urinary Tract Infections (CAUTI)

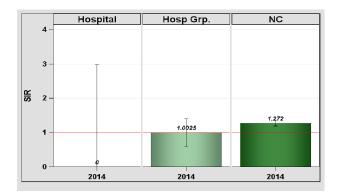


Table 4. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2009.

Type of Unit	# Obs	Cath Day	s Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Medical cardiac	0	503	0	1.01	0	, 2.978	Same
YTD Total for Reporting Units	0	503	0	1.01	0	, 2.978	Same

Figure 4. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 catheter days.

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

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	ntl baseline
Abdominal hysterectomy	0	3		0.03			No Conclusion

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

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

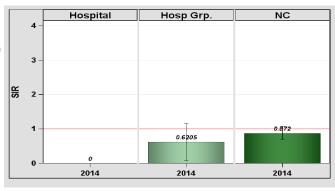


Figure 5. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Surgical Site Infections (SSI) after Colon Surgeries

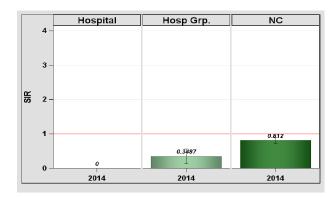


Table 6. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	ntl baseline
Colon surgery	0	16		0.56			No Conclusion

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

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

Figure 6. SIRs and 95% Confidence Intervals for Colon Surgeries, Jan-Dec 2014.

Commentary from Hospitals:

No comments provided.

Refer to HAI in N.C. Reference Report - October 2012 (rev July 2013) for further explanation of presented statistics (epi.publichealth.nc.gov/cd/hai/figures/hai_jul2013_reference.pdf). Data as of March 12, 2015.

Broughton Hospital, Morganton, Burke County

2014 Hospital Survey Information

Hospital Type: Specialty Acute Care Hospital

Admissions in 2014: 638 Patient Days in 2014: 97,048 Total Number of Beds: 297 FTE* Infection Preventionists: 2.00 Number of FTEs* per 100 beds: 0.67



*FTE = Full-time equivalent

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

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.

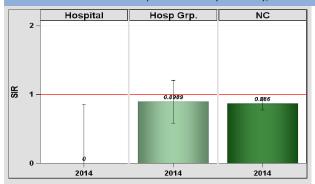


Table 1. Rate and SIR, Jan-Dec 2014 in Comparison to National Baseline Data from 2010-2011. Compared to ntl baseline Location # Obs Pat Days Rate # Pred SIR 95% CI Facility-wide inpatient 97,046 , 0.862 Better

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 patient days.

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

Figure 1. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

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 2. Rate and SIR, Jan-Dec 2014 in Comparison to National Baseline Data from 2010-2011.

Location	# Obs	Pat Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Facility-wide inpatient	0	97,046	0	60.81	0	, 0.049	Better

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 10,000 patient days

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

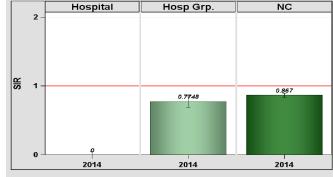


Figure 2. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Other Healthcare-Associated Infections (HAIs)

Specialty acute care hospitals do not report CLABSIs, CAUTIS, or SSIs to the N.C. Division of Public Health.

Commentary from Hospitals:

No comments provided.

Refer to the HAI in N.C. Reference Report - October 2012 (rev June 2013) for further explanation of presented statistics (epi.publichealth.nc.gov/cd/hai/figures.html). Data as of March 12, 2015.

Novant Health Brunswick Medical Center, Bolivia, Brunswick County

2014 Hospital Survey Information

Hospital Type: **Acute Care Hospital**

Medical Affiliation: Nο 4,407 Admissions in 2014: Patient Days in 2014: 17,465 Total Number of Beds: 74 Number of ICU Beds: FTE* Infection Preventionists: 0.60 Number of FTEs* per 100 beds: 0.81



*FTE = Full-time equivalent

Central Line-Associated Bloodstream Infections (CLABSI)

Table 1. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008. Hosp Grp. NC Hospital 똜 0.384 0.1891 2014 2014

Obs Line Days Rate # Pred SIR Medical/surgical n 286 n 0.43 No Conclusion YTD Total for Reporting Units 286 0 0.43 No Conclusion 0

Figure 1. Rates and 95% Confidence Intervals, Jan-Dec 2014.

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1.000 central line days

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

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. Rates reported here may be higher than rates based on clinically-defined illness.

Table 2. Rate and SIR. Jan-Dec 2014 in Comparison to National Baseline Data from 2010-2011.

2014

Location	# Obs	Pat Days	Rate	# Pred	SIR	95% CI	ntl baseline			
Facility-wide inpatient	0	15,602	0	1.01	0	, 2.980	Same			
Note: SIP_05%CI - Standardized Infection Patio and corresponding 05% Confidence Interval										

Note: Rate per 1,000 patient days

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

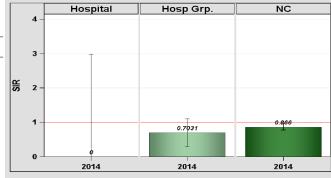


Figure 2. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

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.

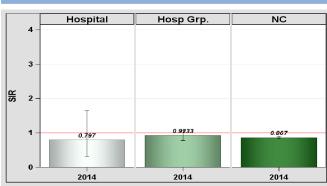


Table 3. Rate and SIR, Jan-Dec 2014 in Comparison to National Baseline Data from 2010-2011.

Location	# Obs	# Pat Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Facility-wide inpatient	6	15,602	3.85	7.52	0.797	0.323, 1.659	Same

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 10,000 patient days.

Figure 3. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Novant Health Brunswick Medical Center, Bolivia, Brunswick County

Catheter-Associated Urinary Tract Infections (CAUTI)

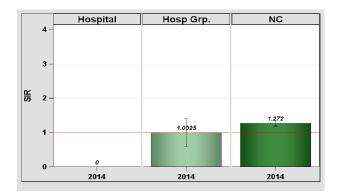


Table 4. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2009.

Type of Unit	# Obs	Cath Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Medical/surgical	0	620	0	0.81			No Conclusion
YTD Total for Reporting Units	0	620	0	0.81			No Conclusion

Figure 4. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 catheter days.

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

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	ntl baseline
Abdominal hysterectomy	0	19		0.23			No Conclusion

Note: Infections from deep incisional and/or organ space

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

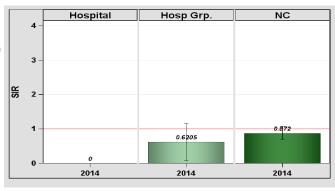


Figure 5. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Surgical Site Infections (SSI) after Colon Surgeries

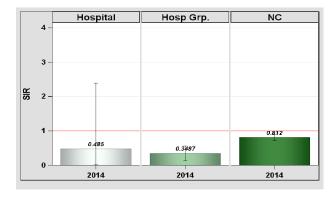


Table 6. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	ntl baseline
Colon surgery	1	63	1.59	2.06	0.485	0.024, 2.391	Same

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

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

Figure 6. SIRs and 95% Confidence Intervals for Colon Surgeries, Jan-Dec 2014.

Commentary from Hospitals:

At Novant Health, the safety of our patients comes first. Our goal is to have the lowest possible infection rates and we continually monitor infection prevention tactics for improvement opportunities. We support transparency in reporting infection rates and make common infection data available on our website. More information can be found under "quality" on NovantHealth.org.

Refer to HAI in N.C. Reference Report - October 2012 (rev July 2013) for further explanation of presented statistics (epi.publichealth.nc.gov/cd/hai/figures/hai_jul2013_reference.pdf). Data as of March 12, 2015.

Caldwell Memorial Hospital, Lenoir, Caldwell County

2014 Hospital Survey Information

Hospital Type: Acute Care Hospital Undergraduate Medical Affiliation: 5,884 Admissions in 2014:

Patient Days in 2014: 20,814 Total Number of Beds: 85 Number of ICU Beds: 12 FTE* Infection Preventionists: 1.00 Number of FTEs* per 100 beds: 1.18

Hospital

2014



똜

Central Line-Associated Bloodstream Infections (CLABSI)

Table 1. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008. Hosp Grp. NC

0.384

2014

95% CI # Obs Line Days Rate # Pred SIR 0 Medical/surgical n 1,393 0 2.09 , 1.434 Same , 1.434 YTD Total for Reporting Units 0 1,393 0 2.09 0 Same

Figure 1. Rates and 95% Confidence Intervals, Jan-Dec 2014.

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1.000 central line days

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

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. Rates reported here may be higher than rates based on clinically-defined illness.

Table 2. Rate and SIR, Jan-Dec 2014 in Comparison to National Baseline Data from 2010-2011.

0.1891

2014

Location	# Obs	Pat Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Facility-wide inpatient	0	20,839	0	0.88			No Conclusion

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 patient days

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

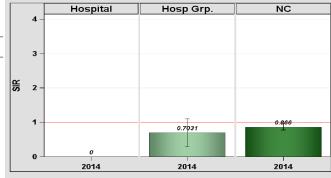


Figure 2. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

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.

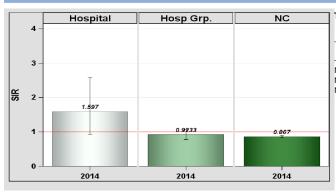


Figure 3. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

1	Table 3. Rate and SIR, Jan-Dec 2014 in Comparison to National Baseline Data from 2010-2011.										
1	Location	# Obs	# Pat Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline			
	Facility-wide inpatient	15	20,021	7.49	9.39	1.597	0.928, 2.575	Same			

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 10,000 patient days.

^{*}FTE = Full-time equivalent

Caldwell Memorial Hospital, Lenoir, Caldwell County

Catheter-Associated Urinary Tract Infections (CAUTI)

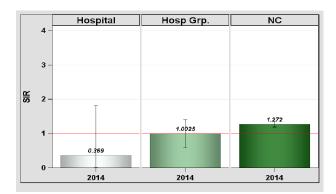


Table 4. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2009.

Type of Unit	# Obs	Cath Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Medical/surgical	1	2,087	0.48	2.71	0.369	0.018, 1.818	Same
YTD Total for Reporting Units	1	2,087	0.48	2.71	0.369	0.018, 1.818	Same

Figure 4. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 catheter days.

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

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	ntl baseline
Abdominal hysterectomy	0	23	0	0.2			No Conclusion

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

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

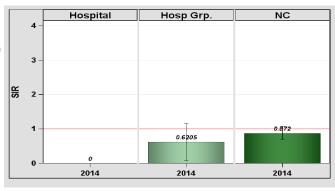


Figure 5. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Surgical Site Infections (SSI) after Colon Surgeries

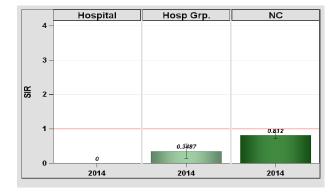


Table 6. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Colon surgery	1	18		0.56			No Conclusion

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

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

Figure 6. SIRs and 95% Confidence Intervals for Colon Surgeries, Jan-Dec 2014.

Commentary from Hospitals:

No comments provided.

Cape Fear Valley Health System, Fayetteville, Cumberland County

2014 Hospital Survey Information

Hospital Type: **Acute Care Hospital**

Medical Affiliation: Nο 32,081 Admissions in 2014: Patient Days in 2014: 174,314 Total Number of Beds: 602 Number of ICU Beds: 90 FTE* Infection Preventionists: 3.25 Number of FTEs* per 100 beds: 0.54



*FTE = Full-time equivalent

Central Line-Associated Bloodstream Infections (CLABSI)

Table 1. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008. NC Hosp Grp. Hospital 뚮 0.3748 2014 2014 2014

95% CI # Obs Line Days Rate # Pred SIR 0.037, 0.720 Medical/surgical 0.218 2 6,120 0.339.18 Better Neonatal Level II/III 0.886 0.149, 2.928 2 593 3.37 2.26 Same Pediatric medical/surgical O 0.46 No Conclusion 153 0 Surgical cardiothoracic 0 O 2.87 0 , 1.044 Same 2.050 YTD Total for Reporting Units 4 0.086, 0.653 8.916 0.4514.77 0.271 Retter

Figure 1. Rates and 95% Confidence Intervals, Jan-Dec 2014.

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1.000 central line days

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

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. Rates reported here may be higher than rates based on clinically-defined illness.

Table 2. Rate and SIR. Jan-Dec 2014 in Comparison to National Baseline Data from 2010-2011.

Location	# Obs	Pat Days	Rate	# Pred	SIR	95% CI	ntl baseline	
Facility-wide inpatient	16	151,274	0.11	13.86	1.155	0.683, 1.835	Same	
Note: SIR QEVCI - Standardized Infection Patie and corresponding QEV Confidence Interval								

Note: Rate per 1.000 patient days.

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

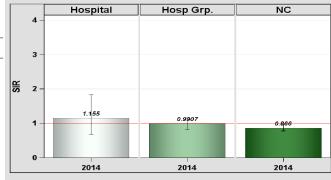


Figure 2. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

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.

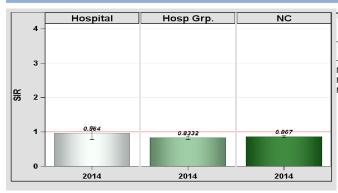


Figure 3. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Table 3. Rate and SIK, Jan-Dec 2014 in Comparison to National Baseline Data from 2010-2011.										
Location	# Obs	# Pat Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline			
Facility-wide inpatient	97	129,224	7.51	100.65	0.964	0.786, 1.170	Same			

Note: SIR. 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 10,000 patient days.

Cape Fear Valley Health System, Fayetteville, Cumberland County

Catheter-Associated Urinary Tract Infections (CAUTI)

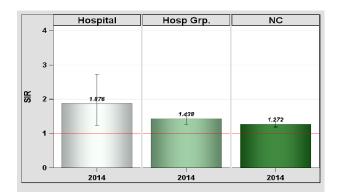


Table 4. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2009.

Type of Unit	# Obs	Cath Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Medical/surgical	20	6,949	2.88	9.03	2.214	1.390, 3.359	Worse
Pediatric medical/surgical	1	184	5.43	0.52			No Conclusion
Surgical cardiothoracic	4	2,222	1.8	3.78	1.059	0.336, 2.554	Same
YTD Total for Reporting Units	25	9,355	2.67	13.33	1.876	1.241, 2.729	Worse

Figure 4. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 catheter days.

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

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Abdominal hysterectomy	3	287	1.05	3.54	0.848	0.216, 2.309	Same

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

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

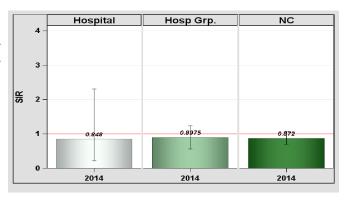


Figure 5. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Surgical Site Infections (SSI) after Colon Surgeries

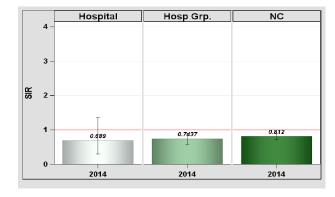


Table 6. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	ntl baseline
Colon surgery	7	293	2.39	10.15	0.689	0.302, 1.364	Same

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

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

Figure 6. SIRs and 95% Confidence Intervals for Colon Surgeries, Jan-Dec 2014.

Commentary from Hospitals:

No comments provided.

CarePartners Health Services, Asheville, Buncombe County

2014 Hospital Survey Information

Hospital Type: Inpatient Rehabilitation Facility

Admissions in 2014: 1,366
Patient Days in 2014: 17,951
Total Number of Beds: 80
FTE* Infection Preventionists: 1.00
Number of FTEs* per 100 beds: 1.25



*FTE = Full-time equivalent

Catheter-Associated Urinary Tract Infections (CAUTI)

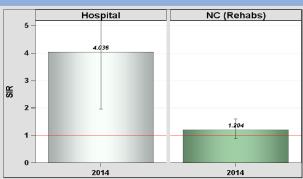


Table 1. Number of Observed and Predicted CAUTI Infections by Location, Jan-Dec 2014											
Type of Unit	# Obs	Cath Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline				
Adult rehabilitation ward	9	1,062	8.47	2.23	4.036	1.968, 7.406	Worse				
YTD Total for Reporting Units	s 9	1,062	8.47	2.23	4.036	1.968, 7.406	Worse				

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 catheter days.

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

Figure 1. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Other Healthcare-Associated Infections (HAIs

Inpatient rehabilitation facilities (IRFs) do not report CLABSIs, C. difficile LabID, MRSA Bacteremia LabID, or SSIs to the N.C. Division of Public Health.

Commentary from Hospitals:

No comments provided.

CarolinaEast Medical Center, New Bern, Craven County

2014 Hospital Survey Information

Hospital Type: **Acute Care Hospital**

Medical Affiliation: Nο Admissions in 2014: 13,437 Patient Days in 2014: 61,577 Total Number of Beds: 350 Number of ICU Beds: 33 FTE* Infection Preventionists: 3.00 Number of FTEs* per 100 beds: 0.86



*FTE = Full-time equivalent

Central Line-Associated Bloodstream Infections (CLABSI)

Hosp Grp. NC Hospital 똜 0.6397 2014 2014

95% CI # Obs Line Days Rate # Pred SIR 0 Medical/surgical n 1,819 0 2.73 , 1.098 Same 473 Surgical cardiothoracic O 0 No Conclusion 0.66 , 0.884 YTD Total for Reporting Units 0 0 3.39 0 Retter 2,292

Table 1. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Figure 1. Rates and 95% Confidence Intervals, Jan-Dec 2014.

2014

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1.000 central line days

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

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. Rates reported here may be higher than rates based on clinically-defined illness.

Table 2. Rate and SIR, Jan-Dec 2014 in Comparison to National Baseline Data from 2010-2011.

Location	# Obs	Pat Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline	
Facility-wide inpatient	2	60,566	0.03	3	0.666	0.112, 2.201	Same	

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 patient days

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

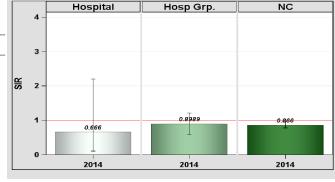


Figure 2. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

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.

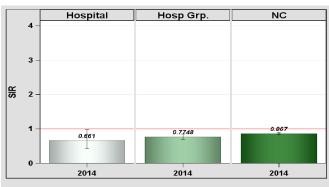


Figure 3. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Location		# Pat Days		# Pred		95% CI	Compared to ntl baseline
Facility-wide inpatient	22	58,158	3.78	33.27	0.661	0.425, 0.985	Better

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Table 3. Rate and SIR, Jan-Dec 2014 in Comparison to National Baseline Data from 2010-2011.

Note: Rate per 10,000 patient days.

CarolinaEast Medical Center, New Bern, Craven County

Catheter-Associated Urinary Tract Infections (CAUTI)

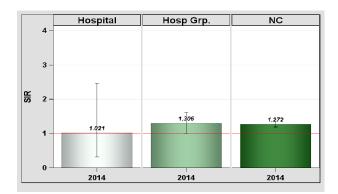


Table 4. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2009.

Type of Unit	# Obs	Cath Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Medical/surgical	3	2,582	1.16	3.1	0.968	0.246, 2.635	Same
Surgical cardiothoracic	1	482	2.07	0.82			No Conclusion
YTD Total for Reporting Units	4	3,064	1.31	3.92	1.021	0.324, 2.463	Same

Figure 4. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 catheter days.

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

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Abdominal hysterectomy	1	175	0.57	1.76	0.567	0.028, 2.797	Same

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

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

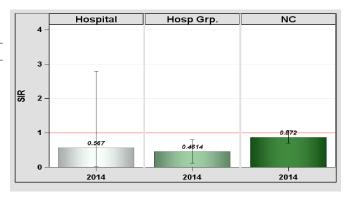


Figure 5. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Surgical Site Infections (SSI) after Colon Surgeries

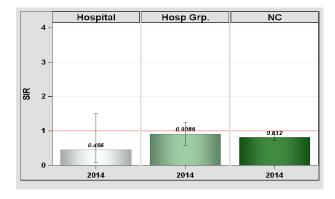


Table 6. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	ntl baseline
Colon surgery	2	142	1.41	4.38	0.456	0.077, 1.508	Same

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

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

Figure 6. SIRs and 95% Confidence Intervals for Colon Surgeries, Jan-Dec 2014.

Commentary from Hospitals:

No comments provided.

Carolinas Medical Center-Lincoln, Lincolnton, Lincoln County

2014 Hospital Survey Information

Hospital Type: **Acute Care Hospital**

Medical Affiliation: Nο 2.446 Admissions in 2014: Patient Days in 2014: 16,081 Total Number of Beds: 101 Number of ICU Beds: 10 FTE* Infection Preventionists: 0.50 Number of FTEs* per 100 beds: 0.50



*FTE = Full-time equivalent

Central Line-Associated Bloodstream Infections (CLABSI)

Table 1. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008. NC Hosp Grp. Hospital 뚮 0.3238

95% CI # Obs Line Days Rate # Pred SIR 0 Medical/surgical O 1,233 0 1.85 , 1.620 Same YTD Total for Reporting Units 0 1,233 1.85 0 , 1.620 Same 0

Figure 1. Rates and 95% Confidence Intervals, Jan-Dec 2014.

2014

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1.000 central line days

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

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. Rates reported here may be higher than rates based on clinically-defined illness.

Table 2. Rate and SIR. Jan-Dec 2014 in Comparison to National Baseline Data from 2010-2011.

2014

Location	# Obs	Pat Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline	
Facility-wide inpatient	0	18,188	0	1.79	0	, 1.669	Same	

2014

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 patient days

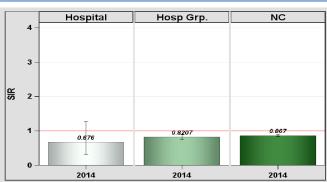
Note: Red line represents the NHSN baseline experience, 2010-2011.



Figure 2. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

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.



Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Location # Obs # Pat Days Rate # Pred 0.314, 1.283 Facility-wide inpatient 17,291 4.63 11.84 0.676 Same

Table 3. Rate and SIR, Jan-Dec 2014 in Comparison to National Baseline Data from 2010-2011.

Note: Rate per 10,000 patient days

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

Figure 3. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Compared to ntl baseline

95% CI

Carolinas Medical Center-Lincoln, Lincolnton, Lincoln County

Catheter-Associated Urinary Tract Infections (CAUTI)

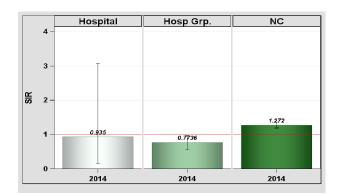


Table 4. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2009.

Type of Unit	# Obs	Cath Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Medical/surgical	2	1,646	1.22	2.14	0.935	0.157, 3.088	Same
YTD Total for Reporting Units	2	1,646	1.22	2.14	0.935	0.157, 3.088	Same

Figure 4. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 catheter days.

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

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	ntl baseline
Abdominal hysterectomy	0	19		0.2			No Conclusion

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

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

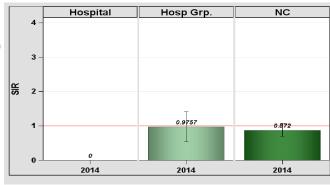


Figure 5. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Surgical Site Infections (SSI) after Colon Surgeries

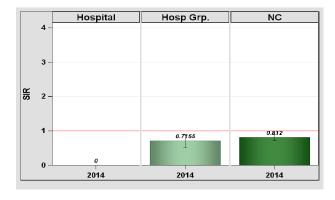


Table 6. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	ntl baseline
Colon surgery	0	25	0	0.82			No Conclusion

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

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

Figure 6. SIRs and 95% Confidence Intervals for Colon Surgeries, Jan-Dec 2014.

Commentary from Hospitals:

The prevention and reduction of healthcare associated infections is a top priority at Carolinas Healthcare System hospitals. To accomplish this, infection prevention strategies are continually assessed and measures implemented to decrease the risk for infection. These measures are based on evidence based practices and clinical guidelines. A comprehensive program is provided that encompasses patient care and patient safety.

Carolinas Medical Center, Charlotte, Mecklenburg County

2014 Hospital Survey Information

Hospital Type: **Acute Care Hospital**

Medical Affiliation: Major Admissions in 2014: 50,676 Patient Days in 2014: 265,711 Total Number of Beds: 880 Number of ICU Beds: 219 FTE* Infection Preventionists: 8.00 Number of FTEs* per 100 beds: 0.91



*FTE = Full-time equivalent

Central Line-Associated Bloodstream Infections (CLABSI)

Table 1. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008. NC

Trauma

Hosp Grp. Hospital 뚮 0.3798 0.384 2014 2014 2014

95% CI # Obs Line Days Rate # Pred SIR Medical 12.55 0 0 4,826 0 , 0.239Better Medical cardiac 4.53 0.221 0.011. 1.088 1 2,267 0.44Same Neonatal Level III 18.85 0.212 0.067, 0.512 8,102 0.49Retter Neurosurgical 2,079 0.589, 2.664 3.37 5.2 1.347 Same Pediatric medical/surgical 3,415 1.46 10.25 0.488 0.179. 1.082 Same Surgical cardiothoracic 1 2,076 0.48 2.91 0.344 0.017, 1.697 Same

0.61

0.76

17.83 0.168

72.11 0.291

0.043, 0.458

0.185. 0.438

Better

Better

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1.000 central line days

YTD Total for Reporting Units 21

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

3

4,952

27,717

Figure 1. Rates and 95% Confidence Intervals, Jan-Dec 2014.

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. Rates reported here may be higher than rates based on clinically-defined illness.

Table 2. Rate and SIR. Jan-Dec 2014 in Comparison to National Baseline Data from 2010-2011.

Location	# Obs	Pat Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Facility-wide inpatient	28	264,635	0.11	28.35	0.988	0.669, 1.408	Same

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 patient days

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

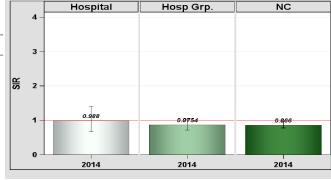


Figure 2. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

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.

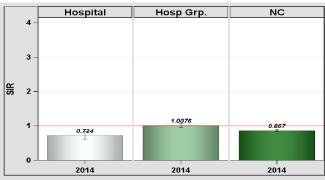


Table 3. Rate and SIR, Jan-Dec 2014 in Comparison to National Baseline Data from 2010-2011.

Location	# Obs	# Pat Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Facility-wide inpatient	166	239,456	6.93	229.18	0.724	0.620, 0.841	Better

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 10,000 patient days.

Figure 3. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Carolinas Medical Center, Charlotte, Mecklenburg County

Catheter-Associated Urinary Tract Infections (CAUTI)

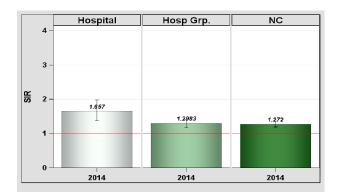


Table 4. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2009.

Type of Unit	# Obs	Cath Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Medical	30	6,006	5	13.81	2.172	1.492, 3.061	Worse
Medical cardiac	10	2,901	3.45	5.8	1.724	0.875, 3.072	Same
Neurosurgical	22	3,779	5.82	16.63	1.323	0.850, 1.970	Same
Pediatric medical/surgical	4	1,165	3.43	3.26	1.226	0.390, 2.958	Same
Surgical cardiothoracic	3	1,989	1.51	3.38	0.887	0.226, 2.415	Same
Trauma	43	7,264	5.92	24.7	1.741	1.276, 2.324	Worse
YTD Total for Reporting Units	112	23,104	4.85	67.58	1.657	1.371, 1.986	Worse

Figure 4. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 catheter days.

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

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Abdominal hysterectomy	11	643	1.71	6.37	1.726	0.908, 3.000	Same

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

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

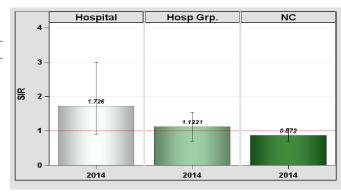


Figure 5. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Surgical Site Infections (SSI) after Colon Surgeries

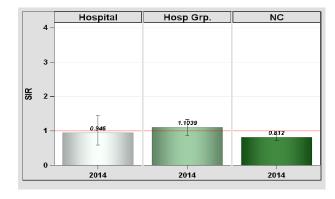


Table 6. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Colon surgery	19	559	3.4	20.08	0.946	0.587, 1.450	Same

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

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

Figure 6. SIRs and 95% Confidence Intervals for Colon Surgeries, Jan-Dec 2014.

Commentary from Hospitals:

The prevention and reduction of healthcare associated infections is a top priority at Carolinas Healthcare System hospitals. To accomplish this, infection prevention strategies are continually assessed and measures implemented to decrease the risk for infection. These measures are based on evidence based practices and clinical guidelines. A comprehensive program is provided that encompasses patient care and patient safety.

Carolinas Medical Center-Mercy, Charlotte, Mecklenburg County

2014 Hospital Survey Information

Acute Care Hospital Hospital Type:

Medical Affiliation: Graduate Admissions in 2014: 9.233 Patient Days in 2014: 34,088 Total Number of Beds: 160 Number of ICU Beds: 20 FTE* Infection Preventionists: 1.00 Number of FTEs* per 100 beds: 0.63



*FTE = Full-time equivalent

Central Line-Associated Bloodstream Infections (CLABSI)

Table 1. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008. Hosp Grp. NC Hospital 뚮

95% CI # Obs Line Days Rate # Pred SIR 0.929 Medical 3 1,699 1.77 3.23 0.236, 2.529 Same YTD Total for Reporting Units 3 3.23 0.929 0.236, 2.529 1,699 1.77 Same

Figure 1. Rates and 95% Confidence Intervals, Jan-Dec 2014.

2014

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1.000 central line days.

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

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. Rates reported here may be higher than rates based on clinically-defined illness.

Table 2. Rate and SIR. Jan-Dec 2014 in Comparison to National Baseline Data from 2010-2011.

2014

Facility-wide inpatient 3 34,018 0.09 2.63 1.143 0.291, 3.110 Same	Location	# Obs	Pat Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline	
	Facility-wide inpatient	3	34,018	0.09	2.63	1.143	0.291, 3.110	Same	

2014

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 patient days

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

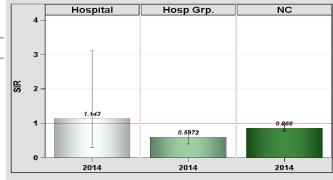
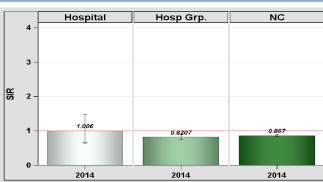


Figure 2. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

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.



Location	# Obs	# Pat Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Facility-wide inpatient	23	34,018	6.76	22.87	1.006	0.653, 1.485	Same

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Table 3. Rate and SIR, Jan-Dec 2014 in Comparison to National Baseline Data from 2010-2011.

Note: Rate per 10,000 patient days.

Figure 3. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Carolinas Medical Center-Mercy, Charlotte, Mecklenburg County

Catheter-Associated Urinary Tract Infections (CAUTI)

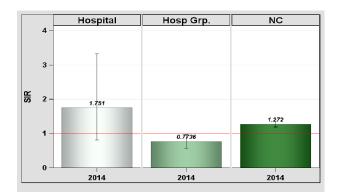


Table 4. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2009.

Type of Unit	# Obs	Cath Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Medical	8	2,285	3.5	4.57	1.751	0.813, 3.324	Same
YTD Total for Reporting Units	8	2,285	3.5	4.57	1.751	0.813, 3.324	Same

Figure 4. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 catheter days.

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

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	ntl baseline
Abdominal hysterectomy	0	96	0	0.8			No Conclusion

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

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

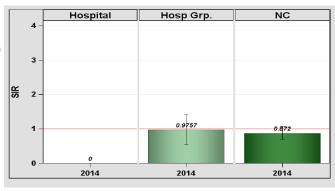


Figure 5. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Surgical Site Infections (SSI) after Colon Surgeries

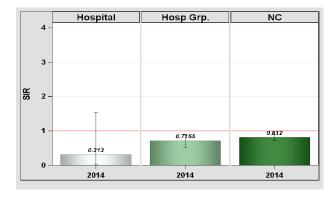


Table 6. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Colon surgery	1	96	1.04	3.2	0.313	0.016, 1.544	Same

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

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

Figure 6. SIRs and 95% Confidence Intervals for Colon Surgeries, Jan-Dec 2014.

Commentary from Hospitals:

The prevention and reduction of healthcare associated infections is a top priority at Carolinas Healthcare System hospitals. To accomplish this, infection prevention strategies are continually assessed and measures implemented to decrease the risk for infection. These measures are based on evidence based practices and clinical guidelines. A comprehensive program is provided that encompasses patient care and patient safety.

Carolinas Medical Center- Northeast, Concord, Cabarrus County

2014 Hospital Survey Information

Hospital Type: Acute Care Hospital

 Medical Affiliation:
 No

 Admissions in 2014:
 34,705

 Patient Days in 2014:
 107,841

 Total Number of Beds:
 457

 Number of ICU Beds:
 52

 FTE* Infection Preventionists:
 3.00

 Number of FTEs* per 100 beds:
 0.66



*FTE = Full-time equivalent

뚮

Central Line-Associated Bloodstream Infections (CLABSI)

Hospital Hosp Grp. NC

0.3748

2014

95% CI # Obs Line Days Rate # Pred SIR 0.165, 1.766 Medical/surgical 3 3,083 0.97 4.62 0.649 Same Neonatal Level III 1.88 0.315, 6.213 2 409 4.89 1.06 Same Pediatric medical/surgical O 120 0 No Conclusion 0.36 Surgical O 0 0.45 No Conclusion 194 Surgical cardiothoracic , 1.974 0 1.084 0 1.52 0 Same YTD Total for Reporting Units 5 4,890 1.02 8.01 0.624 0.229, 1.383 Same

Table 1. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Figure 1. Rates and 95% Confidence Intervals, Jan-Dec 2014.

2014

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 central line days

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

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. Rates reported here may be higher than rates based on clinically-defined illness.

Table 2. Rate and SIR. Jan-Dec 2014 in Comparison to National Baseline Data from 2010-2011.

Location	# Obs	Pat Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Facility-wide inpatient	7	110,417	0.06	7.38	0.949	0.415, 1.877	Same

0.384

2014

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 patient days

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

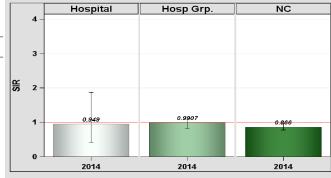


Figure 2. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

lostridium 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.

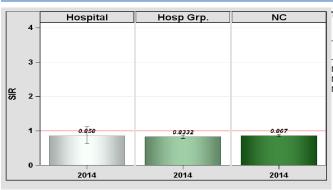


Figure 3. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Table 3. Rate and Sik, Jan-Dec 2014 in Comparison to National Baseline Data from 2010-2011.											
Location	# Obs	# Pat Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline				
Facility-wide inpatient	51	100,556	5.07	59.41	0.858	0.646, 1.120	Same				

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 10,000 patient days.

Carolinas Medical Center- Northeast, Concord, Cabarrus County

Catheter-Associated Urinary Tract Infections (CAUTI)

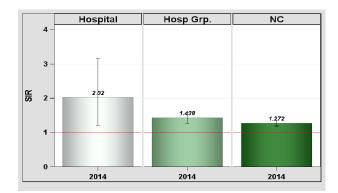


Table 4. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2009.

Type of Unit	# Obs	Cath Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Medical/surgical	17	3,730	4.56	4.85	3.506	2.110, 5.499	Worse
Pediatric medical/surgical	0	61	0	0.17			No Conclusion
Surgical	0	205	0	0.53			No Conclusion
Surgical cardiothoracic	0	1,685	0	2.86	0	, 1.046	Same
YTD Total for Reporting Units	17	5,681	2.99	8.42	2.02	1.216, 3.168	Worse

Figure 4. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 catheter days.

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

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Abdominal hysterectomy	1	332	0.3	3.17	0.316	0.016, 1.557	Same

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

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

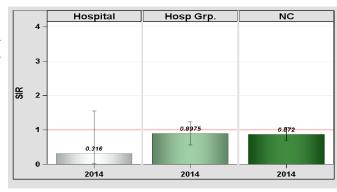


Figure 5. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Surgical Site Infections (SSI) after Colon Surgeries

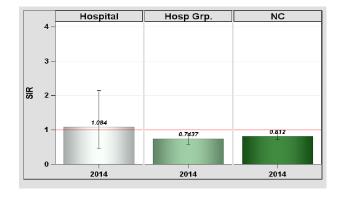


Table 6. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	ntl baseline
Colon surgery	7	206	3.4	6.46	1.084	0.474, 2.144	Same

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

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

Figure 6. SIRs and 95% Confidence Intervals for Colon Surgeries, Jan-Dec 2014.

Commentary from Hospitals:

The prevention and reduction of healthcare associated infections is a top priority at Carolinas Healthcare System hospitals. To accomplish this, infection prevention strategies are continually assessed and measures implemented to decrease the risk for infection. These measures are based on evidence based practices and clinical guidelines. A comprehensive program is provided that encompasses patient care and patient safety.

Carolinas Medical Center-Pineville, Charlotte, Mecklenburg County

2014 Hospital Survey Information

Hospital Type: **Acute Care Hospital**

Medical Affiliation: Nο Admissions in 2014: 21,689 Patient Days in 2014: 69,317 Total Number of Beds: 206 Number of ICU Beds: 40 FTE* Infection Preventionists: 2.00 Number of FTEs* per 100 beds: 0.97



*FTE = Full-time equivalent

Central Line-Associated Bloodstream Infections (CLABSI)

Hosp Grp. NC Hospital 뚮 0.6397 2014 2014 2014

95% CI # Obs Line Days Rate # Pred SIR Medical 5 2,452 2.04 4.66 1.073 0.393, 2.379 Same Medical/surgical 2 0.192, 3.788 1,163 1.72 1.74 1.146 Same Neonatal Level II/III O 0 0.35 No Conclusion 218 YTD Total for Reporting Units 7 3,833 6.75 1.036 0.453, 2.050 Same 1.83

Table 1. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Figure 1. Rates and 95% Confidence Intervals, Jan-Dec 2014.

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1.000 central line days

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

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. Rates reported here may be higher than rates based on clinically-defined illness.

Table 2. Rate and SIR. Jan-Dec 2014 in Comparison to National Baseline Data from 2010-2011.

Loc	ation	# Obs	Pat Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline	
Fac	ility-wide inpatient	3	68,912	0.04	3.36	0.893	0.227, 2.431	Same	

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 patient days

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

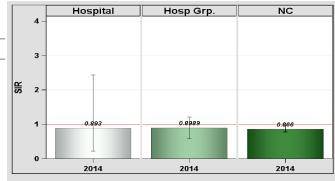


Figure 2. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

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.

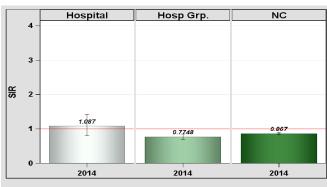


Figure 3. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

1	Table 3. Rate and SIR, Jan-Dec 2014 in Comparison to National Baseline Data from 2010-2011.											
1	Location	# Obs	# Pat Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline				
	Facility-wide inpatient	46	62,282	7.39	42.32	1.087	0.805, 1.437	Same				

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 10,000 patient days.

Carolinas Medical Center-Pineville, Charlotte, Mecklenburg County

Catheter-Associated Urinary Tract Infections (CAUTI)

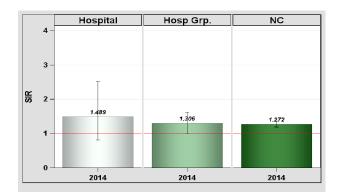


Table 4. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2009.

Type of Unit	# Obs	Cath Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Medical	9	3,159	2.85	6.32	1.425	0.695, 2.614	Same
Medical/surgical	3	1,340	2.24	1.74	1.722	0.438, 4.687	Same
YTD Total for Reporting Units	12	4,499	2.67	8.06	1.489	0.807, 2.531	Same

Figure 4. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 catheter days.

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

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Abdominal hysterectomy	0	238	0	2.14	0	, 1.399	Same

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

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

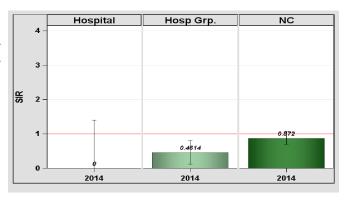


Figure 5. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Surgical Site Infections (SSI) after Colon Surgeries

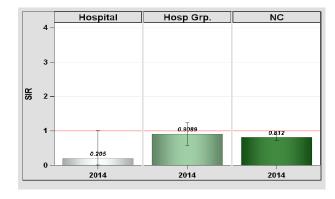


Table 6. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	ntl baseline	
Colon surgery	1	152	0.66	4.87	0.205	0.010, 1.012	Same	

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

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

Figure 6. SIRs and 95% Confidence Intervals for Colon Surgeries, Jan-Dec 2014.

Commentary from Hospitals:

The prevention and reduction of healthcare associated infections is a top priority at Carolinas Healthcare System hospitals. To accomplish this, infection prevention strategies are continually assessed and measures implemented to decrease the risk for infection. These measures are based on evidence based practices and clinical guidelines. A comprehensive program is provided that encompasses patient care and patient safety.

Carolinas Medical Center-Union, Monroe, Union County

2014 Hospital Survey Information

Hospital Type: **Acute Care Hospital**

Medical Affiliation: No 6,417 Admissions in 2014: Patient Days in 2014: 31,181 Total Number of Beds: 182 Number of ICU Beds: 14 FTE* Infection Preventionists: 1.00 Number of FTEs* per 100 beds: 0.55



*FTE = Full-time equivalent

Central Line-Associated Bloodstream Infections (CLABSI)

Table 1. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008. Hosp Grp. NC Hospital 똜 0.384 0.1891 2014 2014 2014

Type of Unit	# Obs	Line Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline	
Medical/surgical	2	1,538	1.3	2.31	0.867	0.145, 2.864	Same	
YTD Total for Reporting Unit	s 2	1,538	1.3	2.31	0.867	0.145, 2.864	Same	

Figure 1. Rates and 95% Confidence Intervals, Jan-Dec 2014.

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1.000 central line days

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

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. Rates reported here may be higher than rates based on clinically-defined illness.

Table 2. Rate and SIR, Jan-Dec 2014 in Comparison to National Baseline Data from 2010-2011.

Location	# Obs	Pat Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline	
Facility-wide inpatient	1	30,742	0.03	2.29	0.436	0.022, 2.152	Same	

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 patient days

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

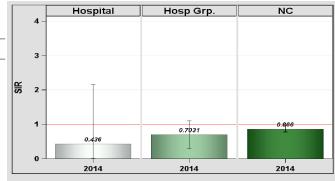


Figure 2. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

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.

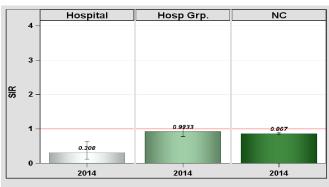


Figure 3. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Location		# Pat Days				95% CI	Compared to ntl baseline
Facility-wide inpatient	6	27,325	2.2	19.46	0.308	0.125, 0.641	Better

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Table 3. Rate and SIR, Jan-Dec 2014 in Comparison to National Baseline Data from 2010-2011.

Note: Rate per 10,000 patient days.

Carolinas Medical Center-Union, Monroe, Union County

Catheter-Associated Urinary Tract Infections (CAUTI)

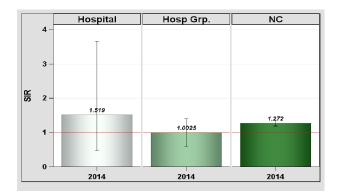


Table 4. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2009.

Type of Unit	# Obs	Cath Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Medical/surgical	4	2,026	1.97	2.63	1.519	0.483, 3.663	Same
YTD Total for Reporting Units	4	2,026	1.97	2.63	1.519	0.483, 3.663	Same

Figure 4. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 catheter days.

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

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	ntl baseline
Abdominal hysterectomy	0	69	0	0.66			No Conclusion

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

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

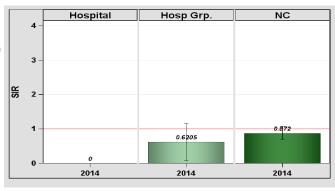


Figure 5. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Surgical Site Infections (SSI) after Colon Surgeries

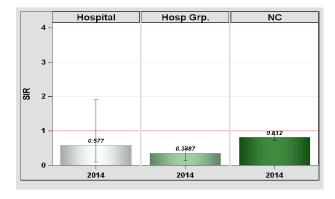


Table 6. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	ntl baseline
Colon surgery	2	101	1.98	3.47	0.577	0.097, 1.905	Same

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

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

Figure 6. SIRs and 95% Confidence Intervals for Colon Surgeries, Jan-Dec 2014.

Commentary from Hospitals:

The prevention and reduction of healthcare associated infections is a top priority at Carolinas Healthcare System hospitals. To accomplish this, infection prevention strategies are continually assessed and measures implemented to decrease the risk for infection. These measures are based on evidence based practices and clinical guidelines. A comprehensive program is provided that encompasses patient care and patient safety.

Carolinas Medical Center-University, Charlotte, Mecklenburg County

2014 Hospital Survey Information

Hospital Type: **Acute Care Hospital**

Medical Affiliation: No 6,568 Admissions in 2014: Patient Days in 2014: 23,911 Total Number of Beds: 94 Number of ICU Beds: 15 FTE* Infection Preventionists: 1.00 Number of FTEs* per 100 beds: 1.06

Hospital



*FTE = Full-time equivalent

Central Line-Associated Bloodstream Infections (CLABSI)

Table 1. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008. NC Hosp Grp.

95% CI # Obs Line Days Rate # Pred SIR 1.28 Medical/surgical 2 1,042 1.92 1.56 0.215, 4.228 Same Neonatal Level II/III 0 25 0.05 No Conclusion YTD Total for Reporting Units 0.208. 4.094 2 1,067 1.87 1.61 1.239 Same

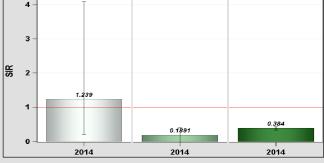


Figure 1. Rates and 95% Confidence Intervals, Jan-Dec 2014.

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1.000 central line days

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

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. Rates reported here may be higher than rates based on clinically-defined illness.

Table 2. Rate and SIR. Jan-Dec 2014 in Comparison to National Baseline Data from 2010-2011.

Location	# Obs Pat Day	s Rate # Pred	SIR 95% CI	Compared to ntl baseline
Facility-wide inpatient	1 24,84	0.04 1.11	0.902 0.045, 4.449	Same

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 patient days

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



Figure 2. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

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.

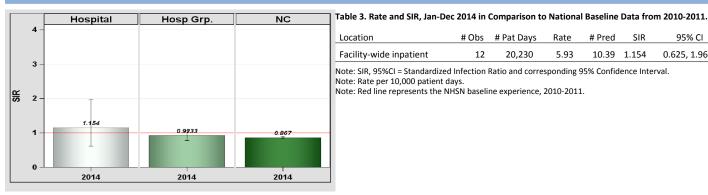


Figure 3. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Location		# Pat Days		# Pred	SIR	95% CI	Compared to ntl baseline
Facility-wide inpatient	12	20,230	5.93	10.39	1.154	0.625, 1.963	Same

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 10,000 patient days.

Carolinas Medical Center-University, Charlotte, Mecklenburg County

Catheter-Associated Urinary Tract Infections (CAUTI)

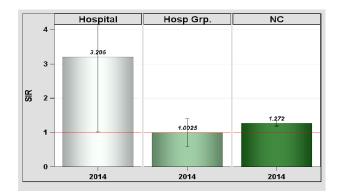


Table 4. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2009.

Type of Unit	# Obs	Cath Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Medical/surgical	4	960	4.17	1.25	3.205	1.018, 7.731	Worse
YTD Total for Reporting Units	4	960	4.17	1.25	3.205	1.018, 7.731	Worse

Figure 4. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 catheter days.

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

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Abdominal hysterectomy	2	175	1.14	1.56	1.281	0.215, 4.232	Same

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

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

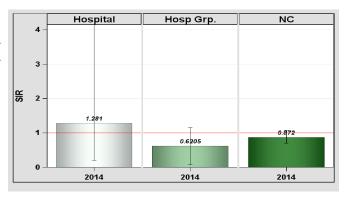


Figure 5. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Surgical Site Infections (SSI) after Colon Surgeries

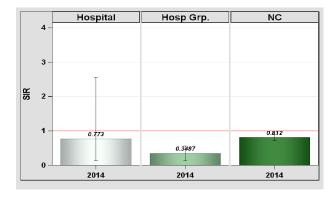


Table 6. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	ntl baseline
Colon surgery	2	83	2.41	2.59	0.773	0.130, 2.555	Same

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

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

Figure 6. SIRs and 95% Confidence Intervals for Colon Surgeries, Jan-Dec 2014.

Commentary from Hospitals:

The prevention and reduction of healthcare associated infections is a top priority at Carolinas Healthcare System hospitals. To accomplish this, infection prevention strategies are continually assessed and measures implemented to decrease the risk for infection. These measures are based on evidence based practices and clinical guidelines. A comprehensive program is provided that encompasses patient care and patient safety.

Carolinas Rehabilitation, Charlotte, Mecklenburg County

2014 Hospital Survey Information

Hospital Type: Inpatient Rehabilitation Facility

Admissions in 2014: 2,632
Patient Days in 2014: 44,344
Total Number of Beds: 150
FTE* Infection Preventionists: 1.00
Number of FTEs* per 100 beds: 0.67



*FTE = Full-time equivalent

Catheter-Associated Urinary Tract Infections (CAUTI

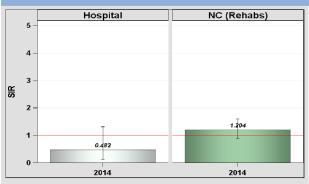


Table 1. Number of Observed and Predicted CAUTI Infections by Location, Jan-Dec 2014Type of Unit# ObsCath DaysRate# PredSIR95% CIonth baseline											
Type of Unit	# Obs	Cath Days	Rate	# Pred	SIR	95% CI	ntl baseline				
Adult rehabilitation ward		1,658			0.482	0.123, 1.311					
YTD Total for Reporting Units	3	1,658	1.81	6.23	0.482	0.123, 1.311	Same				

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 catheter days.

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

Figure 1. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Other Healthcare-Associated Infections (HAIs)

Inpatient rehabilitation facilities (IRFs) do not report CLABSIs, C. difficile LabID, MRSA Bacteremia LabID, or SSIs to the N.C. Division of Public Health.

Commentary from Hospitals:

The prevention and reduction of healthcare associated infections is a top priority at Carolinas Healthcare System hospitals. To accomplish this, infection prevention strategies are continually assessed and measures implemented to decrease the risk for infection. These measures are based on evidence based practices and clinical guidelines. A comprehensive program is provided that encompasses patient care and patient safety.

Refer to the HAI in N.C. Reference Report - October 2012 (rev June 2013) for further explanation of presented statistics (epi.publichealth.nc.gov/cd/hai/figures.html). Data as of March 12, 2015.

Carolinas Specialty Hospital, Charlotte, Mecklenburg County

2014 Hospital Survey Information

Hospital Type: Long-term Acute Care Hospital

Admissions in 2014: 501
Patient Days in 2014: 12,376
Total Number of Beds: 40
FTE* Infection Preventionists: 1.25
Number of FTEs* per 100 beds: 3.13



*FTE = Full-time equivalent

Central Line-Associated Bloodstream Infections (CLABSI)

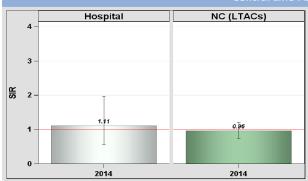


 Table 1. Number of Observed and Predicted CLABSI Infections by Location, Jan-Dec 2014. Compared to Type of Unit # Obs Line Days Rate # Pred SIR 95% CI ntl baseline Adult ward 10 10,009 1 9.01 1.11 0.564, 1.979 Same

 YTD Total for Reporting Units
 10 10,009 1 9.01 1.11 0.564, 1.979 Same

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

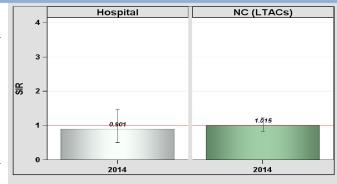
Note: Rate per 1,000 central line days.

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

Figure 1. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Catheter-Associated Urinary Tract Infections (CAUTI)

Table 2. Number of Observe Type of Unit		redicted CA Cath Days		,	n, Jan-Dec 2014 95% Cl	Compared to ntl baseline
Adult ward		7,765			0.513, 1.477	
YTD Total for Reporting Ur	nits 14	7,765	15.53	0.901	0.513, 1.477	Same



Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 catheter days

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

Figure 2. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Other Healthcare-Associated Infections (HAIs)

Long-term acute care hospitals (LTACs) do not report LabID C. difficile, LabID MRSA Bacteremia or SSIs to the N.C. Division of Public Health.

Commentary from Hospitals:

No comments provided.

Refer to the HAI in N.C. Reference Report - October 2012 (rev June 2013) for further explanation of presented statistics (epi.publichealth.nc.gov/cd/hai/figures.html). Data as of March 12, 2015.

Carteret General Hospital, Morehead City, Carteret County

2014 Hospital Survey Information

Hospital Type: **Acute Care Hospital**

Medical Affiliation: Nο 6,453 Admissions in 2014: Patient Days in 2014: 25,510 Total Number of Beds: 135 Number of ICU Beds: 8 FTE* Infection Preventionists: 1.50 Number of FTEs* per 100 beds: 1.11

Hospital

2014



*FTE = Full-time equivalent

뚮

Central Line-Associated Bloodstream Infections (CLABSI)

Table 1. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008. Hosp Grp. NC

2014

Obs Line Days Rate # Pred SIR 0.63 Medical/surgical n 423 0 No Conclusion YTD Total for Reporting Units 0 423 0 0.63 No Conclusion

Figure 1. Rates and 95% Confidence Intervals, Jan-Dec 2014.

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1.000 central line days

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

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. Rates reported here may be higher than rates based on clinically-defined illness.

Table 2. Rate and SIR, Jan-Dec 2014 in Comparison to National Baseline Data from 2010-2011.

0.3238

2014

Location	# Obs	Pat Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Facility-wide inpatient	1	19,104	0.05	0.75			No Conclusion

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 patient days

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

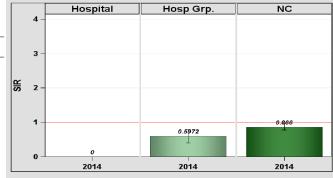


Figure 2. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

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.

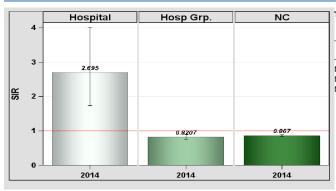


Figure 3. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

1	Table 3. Rate and SIR, Jan-Dec 2014 in Comparison to National Baseline Data from 2010-2011.												
1	Location	# Obs	# Pat Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline					
	Facility-wide inpatient	22	18,032	12.2	8.16	2.695	1.732, 4.013	Worse					

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 10,000 patient days.

Carteret General Hospital, Morehead City, Carteret County

Catheter-Associated Urinary Tract Infections (CAUTI)

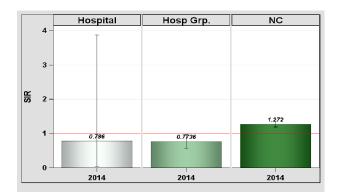


Table 4. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2009.

Type of Unit	# Obs	Cath Day	s Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Medical/surgical	1	979	1.02	1.27	0.786	0.039, 3.875	Same
YTD Total for Reporting Units	1	979	1.02	1.27	0.786	0.039, 3.875	Same

Figure 4. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 catheter days.

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

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	ntl baseline
Abdominal hysterectomy	0	28	0	0.25			No Conclusion

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

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

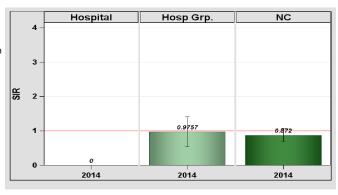


Figure 5. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Surgical Site Infections (SSI) after Colon Surgeries

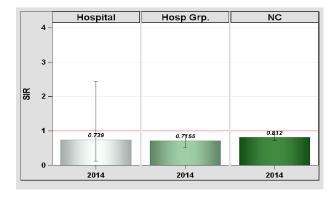


Table 6. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Colon surgery	2	85	2.35	2.71	0.739	0.124, 2.443	Same

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

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

Figure 6. SIRs and 95% Confidence Intervals for Colon Surgeries, Jan-Dec 2014.

Commentary from Hospitals:

No comments provided.

Catawba Valley Medical Center, Hickory, Catawba County

2014 Hospital Survey Information

Hospital Type: **Acute Care Hospital**

Medical Affiliation: Nο 11,991 Admissions in 2014: Patient Days in 2014: 50,439 Total Number of Beds: 190 Number of ICU Beds: 32 FTE* Infection Preventionists: 1.75 Number of FTEs* per 100 beds: 0.92



*FTE = Full-time equivalent

Central Line-Associated Bloodstream Infections (CLABSI)

Hosp Grp. NC Hospital 뚮 0.3238 2014 2014 2014

95% CI # Obs Line Days Rate # Pred SIR 0.435 Medical/surgical 1 1,531 0.65 2.3 0.022, 2.148 Same , 1.586 Neonatal Level II/III 0 748 0 Ω 1.89 Same YTD Total for Reporting Units 0.239 0.012. 1.179 1 2.279 0.444.18 Same

Table 1. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Figure 1. Rates and 95% Confidence Intervals, Jan-Dec 2014.

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1.000 central line days

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

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. Rates reported here may be higher than rates based on clinically-defined illness.

Table 2. Rate and SIR, Jan-Dec 2014 in Comparison to National Baseline Data from 2010-2011.

Facility-wide inpatient 0 50,439 0 2.46 0 , 1.216 Same	Location	# Obs	Pat Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
	Facility-wide inpatient	0	50,439	0	2.46	0	, 1.216	Same

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 patient days

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

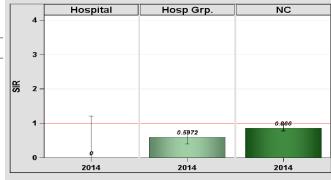


Figure 2. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

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.

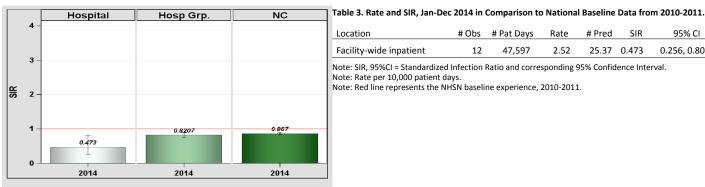


Figure 3. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Location		# Pat Days		# Pred		95% CI	Compared to ntl baseline
Facility-wide inpatient	12	47,597	2.52	25.37	0.473	0.256, 0.804	Better

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 10,000 patient days.

Catawba Valley Medical Center, Hickory, Catawba County

Catheter-Associated Urinary Tract Infections (CAUTI)

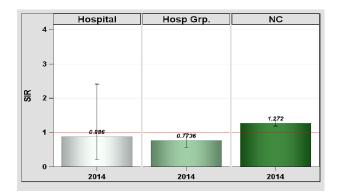


Table 4. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2009.

Type of Unit	# Obs	Cath Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Medical/surgical	3	2,822	1.06	3.39	0.886	0.225, 2.411	Same
YTD Total for Reporting Units	3	2,822	1.06	3.39	0.886	0.225, 2.411	Same

Figure 4. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 catheter days.

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

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	ntl baseline
Abdominal hysterectomy	0	95	0	0.88			No Conclusion

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

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

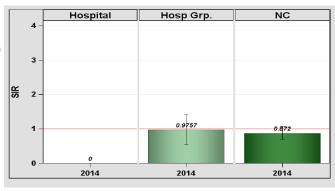


Figure 5. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Surgical Site Infections (SSI) after Colon Surgeries

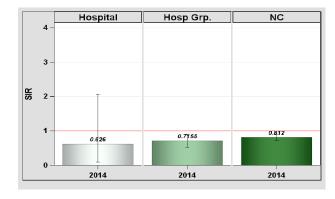


Table 6. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Colon surgery	2	100	2	3.2	0.626	0.105, 2.068	Same

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

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

Figure 6. SIRs and 95% Confidence Intervals for Colon Surgeries, Jan-Dec 2014.

Commentary from Hospitals:

No comments provided.

Central Carolina Hospital, Sanford, Lee County

2014 Hospital Survey Information

Hospital Type: **Acute Care Hospital**

Medical Affiliation: Nο 5,062 Admissions in 2014: Patient Days in 2014: 17,530 Total Number of Beds: 116 Number of ICU Beds: FTE* Infection Preventionists: 0.50 Number of FTEs* per 100 beds: 0.43



*FTE = Full-time equivalent

Central Line-Associated Bloodstream Infections (CLABSI)

Table 1. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008. NC Hosp Grp. Hospital 뚮 0.3238 2014 2014 2014

Obs Line Days Rate # Pred SIR 95% CI 0.729 Medical/surgical 1 914 1.09 1.37 0.036, 3.597 Same YTD Total for Reporting Units 914 0.729 0.036, 3.597 1 1.09 1.37 Same

Figure 1. Rates and 95% Confidence Intervals, Jan-Dec 2014.

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1.000 central line days

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

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. Rates reported here may be higher than rates based on clinically-defined illness.

Table 2. Rate and SIR, Jan-Dec 2014 in Comparison to National Baseline Data from 2010-2011.

Location	# Obs	Pat Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Facility-wide inpatient	1	17,892	0.06	0.97			No Conclusion

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 patient days

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

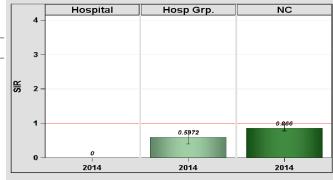
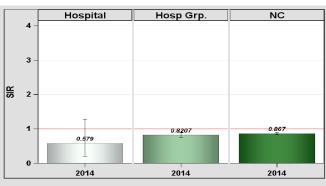


Figure 2. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

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.



Note: Rate per 10,000 patient days

Compared to ntl baseline Location # Obs # Pat Days Rate # Pred 95% CI 0.579 Facility-wide inpatient 16,236 3.08 8.64 0.212, 1.283 Same

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Table 3. Rate and SIR, Jan-Dec 2014 in Comparison to National Baseline Data from 2010-2011.

Figure 3. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Central Carolina Hospital, Sanford, Lee County

Catheter-Associated Urinary Tract Infections (CAUTI)

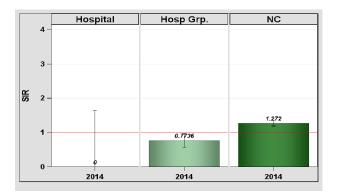


Table 4. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2009.

Type of Unit	# Obs	Cath Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Medical/surgical	0	1,395	0	1.81	0	, 1.652	Same
YTD Total for Reporting Units	0	1,395	0	1.81	0	, 1.652	Same

Figure 4. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 catheter days.

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

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	ntl baseline
Abdominal hysterectomy	0	38	0	0.34			No Conclusion

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

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

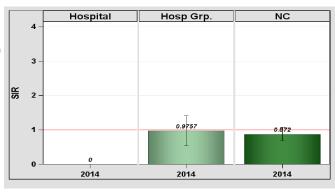


Figure 5. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Surgical Site Infections (SSI) after Colon Surgeries



Table 6. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	ntl baseline
Colon surgery	1	59	1.69	1.84	0.543	0.027, 2.680	Same

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

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

Figure 6. SIRs and 95% Confidence Intervals for Colon Surgeries, Jan-Dec 2014.

Commentary from Hospitals:

No comments provided.

Central Regional Hospital, Butner, Granville County

2014 Hospital Survey Information

Hospital Type: Specialty Acute Care Hospital

Admissions in 2014: 1,200 Patient Days in 2014: 132,977 Total Number of Beds: 405 FTE* Infection Preventionists: 2.00 Number of FTEs* per 100 beds: 0.49



*FTE = Full-time equivalent

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

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.

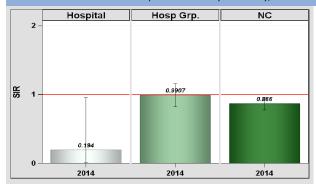


Table 1. Rate and SIR, Jan-Dec 2014 in Comparison to National Baseline Data from 2010-2011. Compared to ntl baseline Location # Obs Pat Days Rate # Pred SIR 95% CI Facility-wide inpatient 0.01 5.15 0.194 0.010, 0.958 Better 99,485

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 patient days.

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

Figure 1. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

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 2. Rate and SIR, Jan-Dec 2014 in Comparison to National Baseline Data from 2010-2011.

Location	# Obs	Pat Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Facility-wide inpatient	1	99,485	0.1	73.9	0.014	0.001, 0.067	' Better

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 10,000 patient days

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

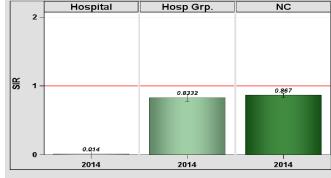


Figure 2. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Other Healthcare-Associated Infections (HAIs)

Specialty acute care hospitals do not report CLABSIs, CAUTIS, or SSIs to the N.C. Division of Public Health.

Commentary from Hospitals:

No comments provided.

Refer to the HAI in N.C. Reference Report - October 2012 (rev June 2013) for further explanation of presented statistics (epi.publichealth.nc.gov/cd/hai/figures.html). Data as of March 12, 2015.

Cherry Hospital, Goldsboro, Wayne County

2014 Hospital Survey Information

Hospital Type: Specialty Acute Care Hospital

Admissions in 2014: 745 Patient Days in 2014: 63.440 Total Number of Beds: 197 FTE* Infection Preventionists: 1.00 Number of FTEs* per 100 beds: 0.51



*FTE = Full-time equivalent

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

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.

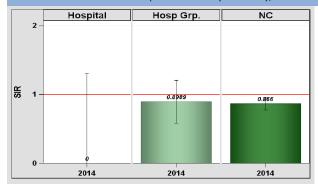


Table 1. Rate and SIR, Jan-Dec 2014 in Comparison to National Baseline Data from 2010-2011. Compared to ntl baseline Location # Obs Pat Days Rate # Pred SIR 95% CI Same Facility-wide inpatient , 1.309 63,886

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 patient days.

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

Figure 1. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

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 2. Rate and SIR, Jan-Dec 2014 in Comparison to National Baseline Data from 2010-2011.

Location	# Obs	Pat Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Facility-wide inpatient	0	63,886	0	30.59	0	, 0.098	Better

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 10,000 patient days

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

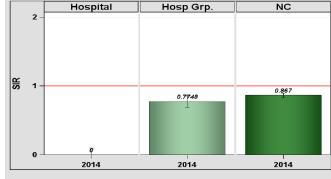


Figure 2. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Other Healthcare-Associated Infections (HAIs)

Specialty acute care hospitals do not report CLABSIs, CAUTIS, or SSIs to the N.C. Division of Public Health.

Commentary from Hospitals:

No comments provided.

Refer to the HAI in N.C. Reference Report - October 2012 (rev June 2013) for further explanation of presented statistics (epi.publichealth.nc.gov/cd/hai/figures.html). Data as of March 12, 2015.

Carolinas Healthcare System Cleveland, Shelby, Cleveland County

2014 Hospital Survey Information

Hospital Type: **Acute Care Hospital**

Medical Affiliation: Nο 9,100 Admissions in 2014: Patient Days in 2014: 37,438 Total Number of Beds: 241 Number of ICU Beds: 18 FTE* Infection Preventionists: 1.50 Number of FTEs* per 100 beds: 0.62



*FTE = Full-time equivalent

Central Line-Associated Bloodstream Infections (CLABSI)

Hosp Grp. NC Hospital 뚮 0.6397 2014 2014 2014

Obs Line Days Rate # Pred SIR 95% CI 0.547 Medical/surgical 2,437 0.82 3.66 0.092, 1.808 Same 2,437 YTD Total for Reporting Units 2 0.82 3.66 0.547 0.092, 1.808 Same

Table 1. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Figure 1. Rates and 95% Confidence Intervals, Jan-Dec 2014.

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1.000 central line days

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

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. Rates reported here may be higher than rates based on clinically-defined illness.

Table 2. Rate and SIR, Jan-Dec 2014 in Comparison to National Baseline Data from 2010-2011.

Location	# Obs	Pat Days	Rate	# Pred	SIR	95% CI	ntl baseline				
Facility-wide inpatient	5	36,780	0.14	4 1.67	2.991	1.096, 6.630	Worse				
Note: SIR 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval											

Note: Rate per 1,000 patient days

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

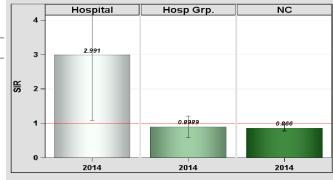


Figure 2. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

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.

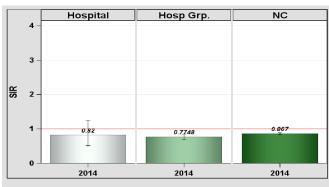


Figure 3. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Location		# Pat Days		# Pred	SIR	95% CI	Compared to ntl baseline
Facility-wide inpatient	20	34,511	5.8	24.39	0.82	0.515, 1.244	Same

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Table 3. Rate and SIR, Jan-Dec 2014 in Comparison to National Baseline Data from 2010-2011.

Note: Rate per 10,000 patient days.

Carolinas Healthcare System Cleveland, Shelby, Cleveland County

Catheter-Associated Urinary Tract Infections (CAUTI)

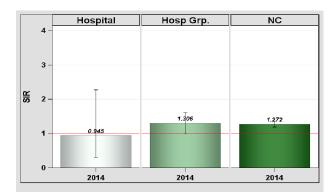


Table 4. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2009.

Type of Unit	# Obs	Cath Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Medical/surgical	4	3,528	1.13	4.23	0.945	0.300, 2.279	Same
YTD Total for Reporting Units	4	3,528	1.13	4.23	0.945	0.300, 2.279	Same

Figure 4. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 catheter days.

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

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Abdominal hysterectomy	3	130	2.31	1.44	2.09	0.532, 5.689	Same

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

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

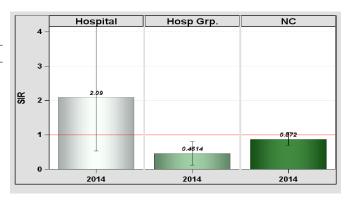


Figure 5. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Surgical Site Infections (SSI) after Colon Surgeries

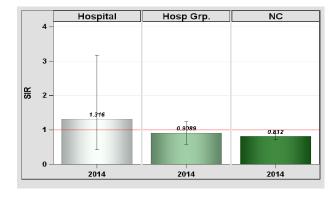


Table 6. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	ntl baseline
Colon surgery	4	90	4.44	3.04	1.316	0.418, 3.174	Same

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

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

Figure 6. SIRs and 95% Confidence Intervals for Colon Surgeries, Jan-Dec 2014.

Commentary from Hospitals:

The prevention and reduction of healthcare associated infections is a top priority at Cleveland County Healthcare System hospitals. To accomplish this, infection prevention strategies are continually assessed and measures implemented to decrease the risk for infection. These measures are based on evidence based practices and clinical guidelines. A comprehensive program is provided that encompasses patient care and patient safety.

Refer to HAI in N.C. Reference Report - October 2012 (rev July 2013) for further explanation of presented statistics (epi.publichealth.nc.gov/cd/hai/figures/hai_jul2013_reference.pdf). Data as of March 12, 2015.

Columbus Regional Healthcare System, Whiteville, Columbus County

2014 Hospital Survey Information

Hospital Type: **Acute Care Hospital**

Medical Affiliation: Nο 4,858 Admissions in 2014: Patient Days in 2014: 19,841 Total Number of Beds: 81 Number of ICU Beds: 9 FTE* Infection Preventionists: 0 90 Number of FTEs* per 100 beds: 1.11



*FTE = Full-time equivalent

Central Line-Associated Bloodstream Infections (CLABSI)

Table 1. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008. Hosp Grp. NC Hospital 똜 0.384 0.1891 2014 2014 2014

95% CI # Obs Line Days Rate # Pred SIR , 1.809 0 Medical/surgical n 1,104 0 1.66 Same YTD Total for Reporting Units 1,104 0 0 1.66 0 , 1.809 Same

Figure 1. Rates and 95% Confidence Intervals, Jan-Dec 2014.

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1.000 central line days

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

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. Rates reported here may be higher than rates based on clinically-defined illness.

Table 2. Rate and SIR. Jan-Dec 2014 in Comparison to National Baseline Data from 2010-2011.

Location	# Obs	Pat Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline	
Facility-wide inpatient	4	19,992	0.2	1.12	3.586	1.139, 8.649	Worse	

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 patient days

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

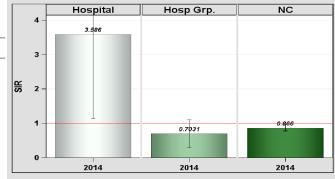


Figure 2. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

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.

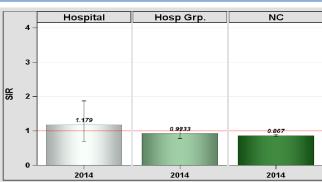


Figure 3. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

1	Table 3. Rate and SIR, Jan-De	2014 in (Comparison to	Nationa (l Baseline	Data fro	m 2010-2011.	
1	Location	# Obs	# Pat Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
	Facility-wide inpatient	16	19,267	8.3	13.57	1.179	0.698, 1.873	Same

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 10,000 patient days.

Columbus Regional Healthcare System, Whiteville, Columbus County

Catheter-Associated Urinary Tract Infections (CAUTI)

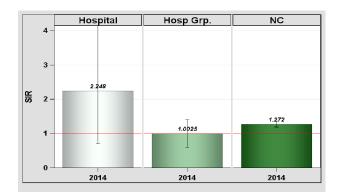


Table 4. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2009.

Type of Unit	# Obs	Cath Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Medical/surgical	4	1,369	2.92	1.78	2.248	0.714, 5.421	Same
YTD Total for Reporting Units	4	1,369	2.92	1.78	2.248	0.714, 5.421	Same

Figure 4. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 catheter days.

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

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Abdominal hysterectomy	0	83	0	1.05	0	, 2.848	Same

Note: Infections from deep incisional and/or organ space

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

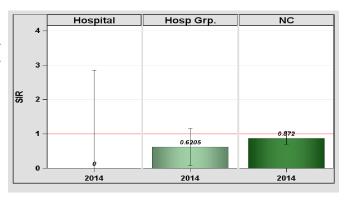


Figure 5. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Surgical Site Infections (SSI) after Colon Surgeries

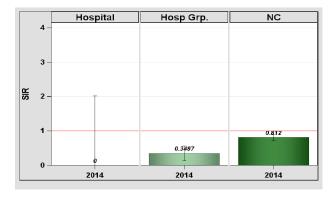


Table 6. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	ntl baseline
Colon surgery	0	44	0	1.49	0	, 2.010	Same

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

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

Figure 6. SIRs and 95% Confidence Intervals for Colon Surgeries, Jan-Dec 2014.

Commentary from Hospitals:

The prevention and reduction of healthcare associated infections is a top priority at Columbus Regional Healthcare System. To accomplish this, infection prevention strategies are continually assessed and measures implemented to decrease the risk for infection. These measures are based on evidence based practices and clinical guidelines. A comprehensive program is provided that encompasses patient care and patient safety.

Refer to HAI in N.C. Reference Report - October 2012 (rev July 2013) for further explanation of presented statistics (epi.publichealth.nc.gov/cd/hai/figures/hai_jul2013_reference.pdf). Data as of March 12, 2015.

Crawley Memorial Hospital, Kings Mountain, Cleveland County

2014 Hospital Survey Information

Hospital Type: Long-term Acute Care Hospital

Admissions in 2014: 181 Patient Days in 2014: 5,561 **Total Number of Beds:** 28 FTE* Infection Preventionists: 0.23 Number of FTEs* per 100 beds: 0.80



*FTE = Full-time equivalent

Central Line-Associated Bloodstream Infections (CLABSI)

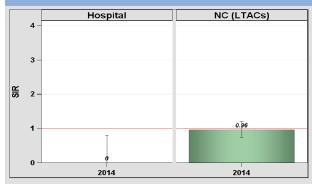


Table 1. Number of Observed and Predicted CLABSI Infections by Location, Jan-Dec 2014. Type of Unit # Obs Line Days Rate # Pred SIR 95% CI Compared to ntl baseline								
Type of Unit	# Obs	Line Days	Rate	# Pred *	SIR	95% CI	ntl baseline	
Adult ward	0	4,177	0	3.76	0	, 0.797	Better	
YTD Total for Reporting Units	s 0	4,177	0	3.76	0	, 0.797	Better	

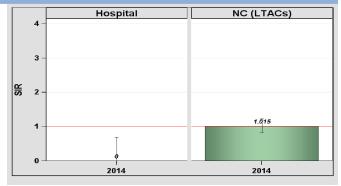
Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 central line days. Note: Red line represents the NHSN baseline experience, 2006-2008.

Figure 1. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Catheter-Associated Urinary Tract Infections (CAUTI)

Table 2. Number of Observed and Predicted CAUTI Infections by Location, Jan-Dec 2014.										
Type of Unit	# Obs	Cath Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline			
Adult ward	0	2,175		4.35	0	, 0.689	Better	_		
YTD Total for Reporting U	nits 0	2,175		4.35	0	, 0.689	Better			



Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 catheter days

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

Figure 2. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Other Healthcare-Associated Infections (HAIs)

Long-term acute care hospitals (LTACs) do not report LabID C. difficile, LabID MRSA Bacteremia or SSIs to the N.C. Division of Public Health.

Commentary from Hospitals:

No comments provided.

Refer to the HAI in N.C. Reference Report - October 2012 (rev June 2013) for further explanation of presented statistics (epi.publichealth.nc.gov/cd/hai/figures.html). Data as of March 12, 2015.

Davis Regional Medical Center, Statesville, Iredell County

2014 Hospital Survey Information

Hospital Type: **Acute Care Hospital**

Medical Affiliation: No 3,573 Admissions in 2014: Patient Days in 2014: 16,831 Total Number of Beds: 130 Number of ICU Beds: FTE* Infection Preventionists: 0.50 Number of FTEs* per 100 beds: 0.38



*FTE = Full-time equivalent

뚮

Central Line-Associated Bloodstream Infections (CLABSI)

Table 1. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008. NC Hosp Grp. Hospital

Obs Line Days Rate # Pred SIR Medical cardiac O 345 n 0.69 No Conclusion YTD Total for Reporting Units 0 0.69 No Conclusion 0 345

Figure 1. Rates and 95% Confidence Intervals, Jan-Dec 2014.

2014

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1.000 central line days

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

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. Rates reported here may be higher than rates based on clinically-defined illness.

Table 2. Rate and SIR, Jan-Dec 2014 in Comparison to National Baseline Data from 2010-2011.

0.3238

2014

Location	# Obs	Pat Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Facility-wide inpatient	0	16,818	0	0.75			No Conclusion

2014

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 patient days

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

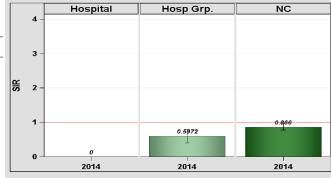
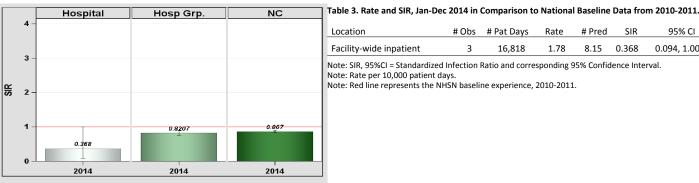


Figure 2. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

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.



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

Compared to ntl baseline Location # Obs # Pat Days Rate # Pred 0.094, 1.002 Facility-wide inpatient 16,818 1.78 8.15 0.368 Same

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 10,000 patient days

Figure 3. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Davis Regional Medical Center, Statesville, Iredell County

Catheter-Associated Urinary Tract Infections (CAUTI)

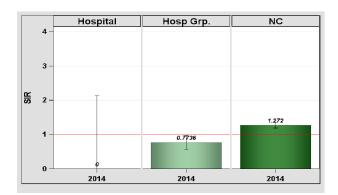


Table 4. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2009.

Type of Unit	# Obs	Cath Day	s Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Medical cardiac	0	700	0	1.4	0	, 2.140	Same
YTD Total for Reporting Units	0	700	0	1.4	0	, 2.140	Same

Figure 4. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 catheter days.

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

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	ntl baseline
Abdominal hysterectomy	0	15		0.12			No Conclusion

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

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

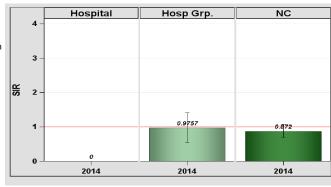


Figure 5. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Surgical Site Infections (SSI) after Colon Surgeries

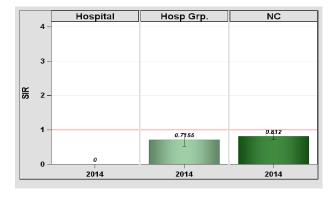


Table 6. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	ntl baseline
Colon surgery	1	11		0.34			No Conclusion

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

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

Figure 6. SIRs and 95% Confidence Intervals for Colon Surgeries, Jan-Dec 2014.

Commentary from Hospitals:

No comments provided.

Duke Raleigh Hospital, Raleigh, Wake County

2014 Hospital Survey Information

Hospital Type: **Acute Care Hospital**

Medical Affiliation: No 7,896 Admissions in 2014: Patient Days in 2014: 38,871 Total Number of Beds: 148 Number of ICU Beds: 15 FTE* Infection Preventionists: 2.00 Number of FTEs* per 100 beds: 1.35



*FTE = Full-time equivalent

Central Line-Associated Bloodstream Infections (CLABSI)

Table 1. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008. NC Hosp Grp. Hospital 뚮 0.3238 2014 2014 2014

95% CI # Obs Line Days Rate # Pred SIR , 1.746 Ω Medical/surgical n 1,144 n 1.72 Same , 1.746 YTD Total for Reporting Units 0 1.72 0 Same 1,144 0

Figure 1. Rates and 95% Confidence Intervals, Jan-Dec 2014.

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1.000 central line days

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

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. Rates reported here may be higher than rates based on clinically-defined illness.

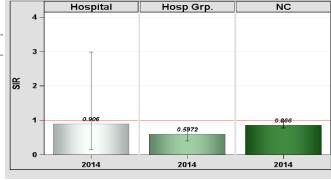
Table 2. Rate and SIR. Jan-Dec 2014 in Comparison to National Baseline Data from 2010-2011.

Location	# Obs	Pat Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Facility-wide inpatient	2	38,871	0.05	5 2.21	0.906	0.152, 2.992	Same

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 patient days

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



Pred

27.7

1.191

Figure 2. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

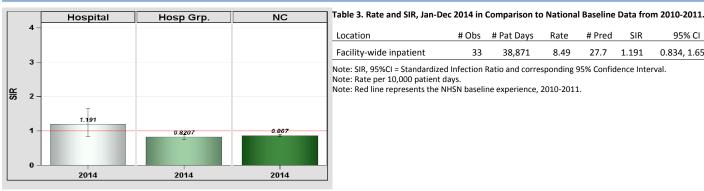
Rate

8.49

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.

Location



33

Obs

Facility-wide inpatient 38,871 0.834, 1.654 Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Pat Days

Note: Rate per 10,000 patient days

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

Figure 3. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Compared to ntl baseline

Same

95% CI

Duke Raleigh Hospital, Raleigh, Wake County

Catheter-Associated Urinary Tract Infections (CAUTI)

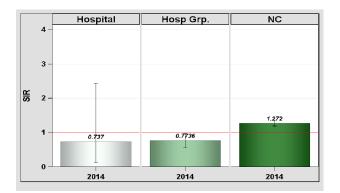


Table 4. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2009.

Type of Unit	# Obs	Cath Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Medical/surgical	2	2,087	0.96	2.71	0.737	0.124, 2.435	Same
YTD Total for Reporting Units	2	2,087	0.96	2.71	0.737	0.124, 2.435	Same

Figure 4. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 catheter days.

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

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	ntl baseline
Abdominal hysterectomy	1	77	1.3	0.76			No Conclusion

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

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

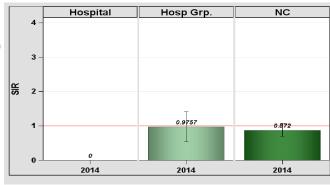


Figure 5. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Surgical Site Infections (SSI) after Colon Surgeries

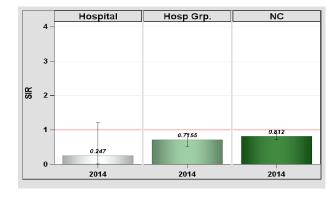


Table 6. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	ntl baseline
Colon surgery	1	119	0.84	4.05	0.247	0.012, 1.217	Same

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

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

Figure 6. SIRs and 95% Confidence Intervals for Colon Surgeries, Jan-Dec 2014.

Commentary from Hospitals:

Duke Regional Hospital, Durham, Durham County

2014 Hospital Survey Information

Hospital Type: **Acute Care Hospital**

Medical Affiliation: Major Admissions in 2014: 17,551 Patient Days in 2014: 80,986 Total Number of Beds: 219 Number of ICU Beds: 17 FTE* Infection Preventionists: 2.50 Number of FTEs* per 100 beds: 1.14



*FTE = Full-time equivalent

Central Line-Associated Bloodstream Infections (CLABSI)

Table 1. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008. Hosp Grp. NC Hospital 뚮 0.6397

Obs Line Days Rate # Pred SIR 95% CI 0.508 Medical/surgical 2,810 1.07 5.9 0.129, 1.384 Same YTD Total for Reporting Units 3 2,810 0.508 0.129, 1.384 1.07 5.9 Same

Figure 1. Rates and 95% Confidence Intervals, Jan-Dec 2014.

2014

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1.000 central line days

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

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. Rates reported here may be higher than rates based on clinically-defined illness.

Table 2. Rate and SIR, Jan-Dec 2014 in Comparison to National Baseline Data from 2010-2011.

2014

Facility-wide inpatient 3 70,044 0.04 5.16 0.582 0.148, 1.583 Same	Location	# Obs Pat Days	Rate # Pred SIR	Compared to 95% CI ntl baseline	
	Facility-wide inpatient	3 70,044	0.04 5.16 0.582	0.148, 1.583 Same	

2014

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 patient days

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

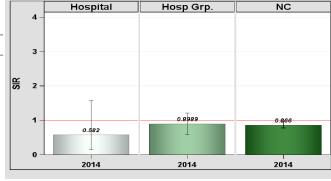


Figure 2. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

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.

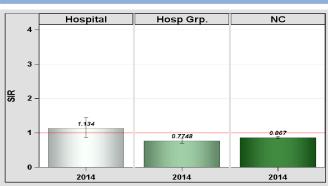


Table 3. Rate and SIR, Jan-Dec 2014 in Comparison to National Baseline Data from 2010-2011.

Location	# Obs	# Pat Days	Rate	# Pred	SIR	95% CI	ntl baseline
Facility-wide inpatient	59	65,217	9.05	52.03	1.134	0.871, 1.452	Same

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 10,000 patient days.

Figure 3. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Duke Regional Hospital, Durham, Durham County

Catheter-Associated Urinary Tract Infections (CAUTI)

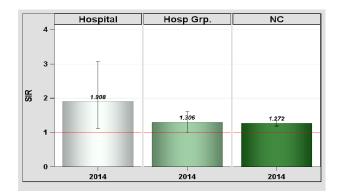


Table 4. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2009.

Type of Unit	# Obs	Cath Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline	
Medical/surgical	15	3,418	4.39	7.86	1.908	1.109, 3.076	Worse	
YTD Total for Reporting Units	15	3,418	4.39	7.86	1.908	1.109, 3.076	Worse	

Figure 4. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 catheter days.

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

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Abdominal hysterectomy	2	317	0.63	2.76	0.725	0.122, 2.395	Same

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

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

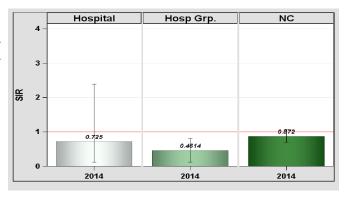


Figure 5. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Surgical Site Infections (SSI) after Colon Surgeries

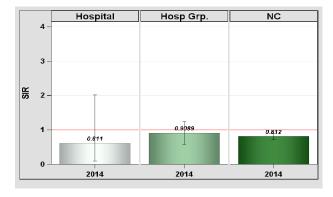


Table 6. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	ntl baseline
Colon surgery	2	105	1.9	3.27	0.611	0.102, 2.019	Same

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

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

Figure 6. SIRs and 95% Confidence Intervals for Colon Surgeries, Jan-Dec 2014.

Commentary from Hospitals:

Duke University Hospital, Durham, Durham County

2014 Hospital Survey Information

Hospital Type: **Acute Care Hospital**

Medical Affiliation: Major Admissions in 2014: 32,524 Patient Days in 2014: 269,913 Total Number of Beds: 850 Number of ICU Beds: 128 FTE* Infection Preventionists: 4.50 Number of FTEs* per 100 beds: 0.53



*FTE = Full-time equivalent

Central Line-Associated Bloodstream Infections (CLABSI)

NC Hosp Grp. Hospital 뚮 0.3798 0.384 2014 2014 2014

Table 1. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008. # Obs Line Days Rate # Pred SIR 95% CI Medical 15.14 0.462 5,822 1.2 0.202, 0.915 Better 2,851 0.321, 1.944 Medical cardiac 0.877 5 1.75 5.7 Same Neonatal Level III 14.83 0.202 0.051. 0.550 3 6,388 0.47Retter Neurologic 2.380 0.6 0.101. 1.983 2 0.843.33 Same Pediatric cardiothoracic , 0.301 O 3,019 n 9.96 0 Retter Pediatric medical/surgical 0 2,715 0 8.15 0 , 0.368 Better Surgical 6 3,369 1.78 7.75 0.774 0.314, 1.611 Same Surgical cardiothoracic 9 5,198 1.73 7.28 1.237 0.603. 2.270 Same YTD Total for Reporting Units 32 31,742 1.01 72.14 0.444 0.309, 0.619 Better

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1.000 central line days

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

Figure 1. Rates and 95% Confidence Intervals, Jan-Dec 2014.

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. Rates reported here may be higher than rates based on clinically-defined illness.

Table 2. Rate and SIR, Jan-Dec 2014 in Comparison to National Baseline Data from 2010-2011.

Location	# Obs Pat D	ays Rate # Pred	SIR	95% CI	Compared to ntl baseline
Facility-wide inpatient	27 290	711 0.09 28.93	0.933	0.628, 1.339	Same

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 patient days

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

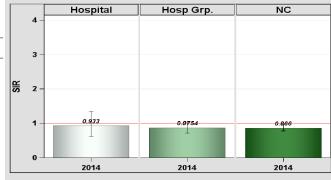


Figure 2. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

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.

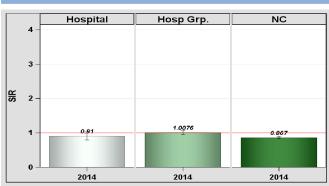


Table 3. Rate and SIR, Jan-Dec 2014 in Comparison to National Baseline Data from 2010-2011.

Location	# Obs	# Pat Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Facility-wide inpatient	220	271,524	8.1	241.68	0.91	0.796, 1.037	Same

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 10,000 patient days.

Figure 3. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Duke University Hospital, Durham, Durham County

Catheter-Associated Urinary Tract Infections (CAUTI)

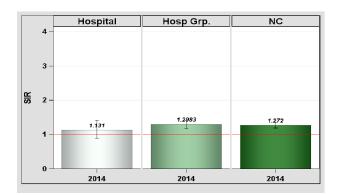


Table 4. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2009.

Type of Unit	# Obs	Cath Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Medical	17	4,959	3.43	11.41	1.49	0.897, 2.338	Same
Medical cardiac	7	2,451	2.86	4.9	1.428	0.625, 2.825	Same
Neurologic	27	4,627	5.84	17.58	1.536	1.033, 2.203	Worse
Pediatric cardiothoracic	1	855	1.17	2.31	0.433	0.022, 2.136	Same
Pediatric medical/surgical	4	1,490	2.68	4.17	0.959	0.305, 2.313	Same
Surgical	12	4,205	2.85	10.93	1.098	0.595, 1.866	Same
Surgical cardiothoracic	3	6,740	0.45	11.46	0.262	0.067, 0.713	Better
YTD Total for Reporting Units	71	25,327	2.8	62.76	1.131	0.890, 1.419	Same

Figure 4. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 catheter days.

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

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Abdominal hysterectomy	1	393	0.25	3.95	0.253	0.013, 1.250	Same

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

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

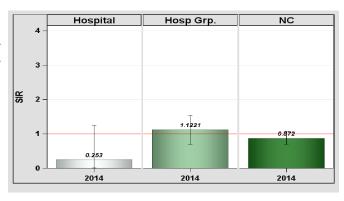


Figure 5. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Surgical Site Infections (SSI) after Colon Surgeries

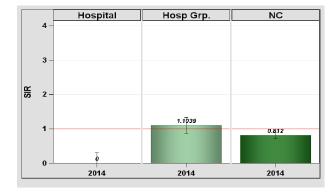


Table 6. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Colon surgery	0	284	0	9.73	0	, 0.308	Better

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

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

Figure 6. SIRs and 95% Confidence Intervals for Colon Surgeries, Jan-Dec 2014.

Commentary from Hospitals:

FirstHealth Moore Regional Hospital, Pinehurst, Moore County

2014 Hospital Survey Information

Hospital Type: **Acute Care Hospital**

Medical Affiliation: No 26,551 Admissions in 2014: Patient Days in 2014: 107,863 Total Number of Beds: 457 Number of ICU Beds: 75 FTE* Infection Preventionists: 4.00 Number of FTEs* per 100 beds: 0.88



*FTE = Full-time equivalent

Central Line-Associated Bloodstream Infections (CLABSI)

Table 1. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008. NC Hosp Grp. Hospital 뚮 0.3748 2014 2014 2014

95% CI # Obs Line Days Rate # Pred SIR , 1.045 0 Medical cardiac 0 1,433 0 2.87 Same , 0.802 Medical/surgical O 0 Better 2.489 0 3.73 Neonatal Level III O 140 No Conclusion 0 0.26 Surgical cardiothoracic O 1.292 0 1.81 0 , 1.656 Same YTD Total for Reporting Units 0 5.354 8.67 0 . 0.345 Retter

Figure 1. Rates and 95% Confidence Intervals, Jan-Dec 2014.

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1.000 central line days

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

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. Rates reported here may be higher than rates based on clinically-defined illness.

Table 2. Rate and SIR, Jan-Dec 2014 in Comparison to National Baseline Data from 2010-2011.

	at Days 1	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Facility-wide inpatient 8	107,742	0.07	6.34	1.261	0.586, 2.395	Same

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 patient days

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

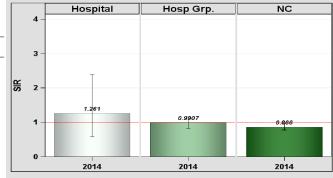


Figure 2. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

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.

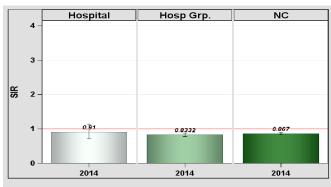


Figure 3. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Location		# Pat Days		# Pred	SIR	95% CI	Compared to ntl baseline
Facility-wide inpatient	71	102,264	6.94	78.02	0.91	0.716, 1.141	Same

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Table 3. Rate and SIR, Jan-Dec 2014 in Comparison to National Baseline Data from 2010-2011.

Note: Rate per 10,000 patient days.

FirstHealth Moore Regional Hospital, Pinehurst, Moore County

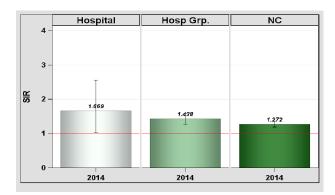


Table 4. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2009.

Type of Unit	# Obs	Cath Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Medical cardiac	6	2,072	2.9	4.14	1.448	0.587, 3.011	Same
Medical/surgical	10	3,777	2.65	4.57	2.189	1.112, 3.902	Worse
Surgical cardiothoracic	3	1,573	1.91	2.67	1.122	0.285, 3.053	Same
YTD Total for Reporting Units	19	7,422	2.56	11.39	1.669	1.034, 2.558	Worse

Figure 4. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 catheter days.

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

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	ntl baseline
Abdominal hysterectomy	2	82	2.44	0.77			No Conclusion

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

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

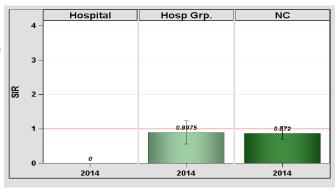


Figure 5. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Surgical Site Infections (SSI) after Colon Surgeries

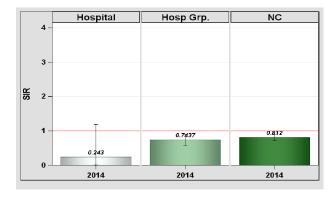


Table 6. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	ntl baseline
Colon surgery	1	138	0.72	4.12	0.243	0.012, 1.197	Same

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

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

Figure 6. SIRs and 95% Confidence Intervals for Colon Surgeries, Jan-Dec 2014.

Commentary from Hospitals:

Over the past year, FirstHealth has strived to continue to reduce our infections by continuing to educate staff on infection prevention, emphasizing hand hygiene, and following all evidence based practices to reduce infections. We have worked to decrease use of urinary catheters and worked with our operating room to assure all measures are taken to prevent surgical site infections such as appropriate use of antibiotics. We are also participating in the Partnership for Patients Collaborative with the North Carolina Quality Center.

Refer to HAI in N.C. Reference Report - October 2012 (rev July 2013) for further explanation of presented statistics (epi.publichealth.nc.gov/cd/hai/figures/hai_jul2013_reference.pdf). Data as of March 12, 2015.

Novant Health Forsyth Medical Center, Winston Salem, Forsyth County

2014 Hospital Survey Information

Hospital Type: **Acute Care Hospital**

Medical Affiliation: No 42.917 Admissions in 2014: Patient Days in 2014: 235,858 Total Number of Beds: 972 Number of ICU Beds: 132 FTE* Infection Preventionists: 6.25 Number of FTEs* per 100 beds: 0.64



*FTE = Full-time equivalent

Central Line-Associated Bloodstream Infections (CLABSI)

NC Hosp Grp. Hospital 뚮 0.3748 0.384 2014 2014 2014

95% CI # Obs Line Days Rate # Pred SIR Medical 0 284 0 0.54 No Conclusion 0.187, 1.420 Medical cardiac 0.589 4 3,398 1.18 6.8 Same Medical/surgical 11.06 0.271 0.069, 0.739 Retter 3 7,370 0.41Neonatal Level II/III 2 0.82 0.283 0.047, 0.935 Retter 2.438 7.06 , 0.956 Neurosurgical O 1.253 n 3.13 0 Retter Surgical cardiothoracic 1 1,644 0.61 2.3 0.434 0.022, 2.143 Same YTD Total for Reporting Units 10 16,387 0.61 30.89 0.324 0.164, 0.577 Better

Table 1. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Figure 1. Rates and 95% Confidence Intervals, Jan-Dec 2014.

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1.000 central line days

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

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. Rates reported here may be higher than rates based on clinically-defined illness.

Table 2. Rate and SIR, Jan-Dec 2014 in Comparison to National Baseline Data from 2010-2011.

Location	# Obs	Pat Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline	
Facility-wide inpatient	25	235,858	0.11	18.7	1.337	0.885, 1.945	Same	

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 patient days

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

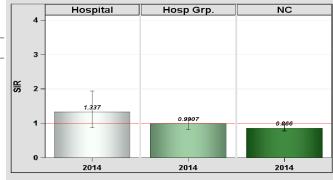
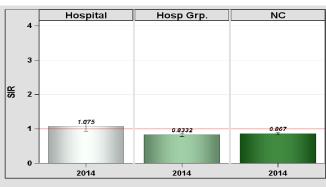


Figure 2. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

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.



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

Table 3. Rate and SIR, Jan-Dec 2014 in Comparison to National Baseline Data from 2010-2011.

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Location	# Obs	# Pat Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Facility-wide inpatient	186	219,684	8.47	173.07	1.075	0.928, 1.238	Same

Note: Rate per 10,000 patient days.

Figure 3. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Novant Health Forsyth Medical Center, Winston Salem, Forsyth County

Catheter-Associated Urinary Tract Infections (CAUTI)

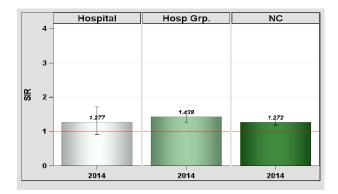


Table 4. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2009.

Type of Unit	# Obs	Cath Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Medical	0	484	0	0.97			No Conclusion
Medical cardiac	12	3,920	3.06	7.84	1.531	0.829, 2.602	Same
Medical/surgical	15	8,087	1.85	9.7	1.546	0.898, 2.492	Same
Neurosurgical	10	2,069	4.83	9.1	1.098	0.558, 1.958	Same
Surgical cardiothoracic	2	1,720	1.16	2.92	0.684	0.115, 2.260	Same
YTD Total for Reporting Units	39	16,280	2.4	30.54	1.277	0.921, 1.728	Same

Figure 4. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 catheter days.

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

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Abdominal hysterectomy	4	153	2.61	1.53	2.615	0.831, 6.308	Same

Note: Infections from deep incisional and/or organ space

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

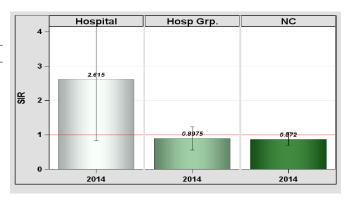


Figure 5. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Surgical Site Infections (SSI) after Colon Surgeries

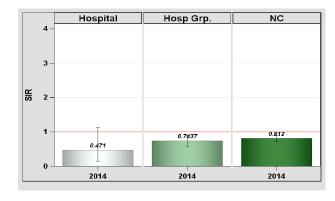


Table 6. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Colon surgery	4	269	1.49	8.5	0.471	0.150, 1.135	Same

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

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

Figure 6. SIRs and 95% Confidence Intervals for Colon Surgeries, Jan-Dec 2014.

Commentary from Hospitals:

At Novant Health, the safety of our patients comes first. Our goal is to have the lowest possible infection rates and we continually monitor infection prevention tactics for improvement opportunities. We support transparency in reporting infection rates and make common infection data available on our website. More information can be found under "quality" on NovantHealth.org.

Refer to HAI in N.C. Reference Report - October 2012 (rev July 2013) for further explanation of presented statistics (epi.publichealth.nc.gov/cd/hai/figures/hai_jul2013_reference.pdf). Data as of March 12, 2015.

Novant Health Franklin Medical Center, Louisburg, Franklin County

2014 Hospital Survey Information

Hospital Type: **Acute Care Hospital**

Medical Affiliation: Nο 1,089 Admissions in 2014: Patient Days in 2014: 5,293 Total Number of Beds: 64 Number of ICU Beds: 0 FTE* Infection Preventionists: 0.60 Number of FTEs* per 100 beds: 0.94



*FTE = Full-time equivalent

Central Line-Associated Bloodstream Infections (CLABSI)

Hosp Grp. NC Hospital 뚮 0.384 0.1891 2014 2014 2014

95% CI # Obs Line Days Rate # Pred SIR Medical O 139 0 0.26 No Conclusion YTD Total for Reporting Units 0 0 0.26 No Conclusion 139

Table 1. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Figure 1. Rates and 95% Confidence Intervals, Jan-Dec 2014.

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1.000 central line days

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

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. Rates reported here may be higher than rates based on clinically-defined illness.

Table 2. Rate and SIR, Jan-Dec 2014 in Comparison to National Baseline Data from 2010-2011.

Location	# Obs	Pat Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Facility-wide inpatient	0	4,831	0	0.24			No Conclusion

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 patient days

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

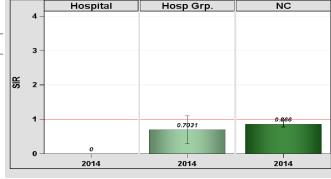


Figure 2. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

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.

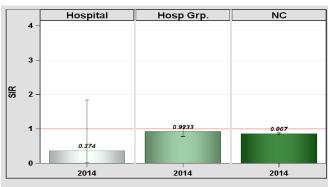


Figure 3. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

1	Table 3. Rate and SIR, Jan-Dec 2014 in Comparison to National Baseline Data from 2010-2011.											
1	Location	# Obs	# Pat Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline				
	Facility-wide inpatient	1	4,831	2.07	2.67	0.374	0.019, 1.847	Same				

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 10,000 patient days.

Novant Health Franklin Medical Center, Louisburg, Franklin County

Catheter-Associated Urinary Tract Infections (CAUTI)

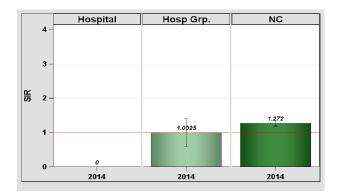


Table 4. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2009.

Type of Unit	# Obs	Cath Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Medical	0	268	0	0.54			No Conclusion
YTD Total for Reporting Units	0	268	0	0.54			No Conclusion

Figure 4. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 catheter days.

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

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	ntl baseline
Abdominal hysterectomy	0	0		0			No Conclusion

Note: Infections from deep incisional and/or organ space

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

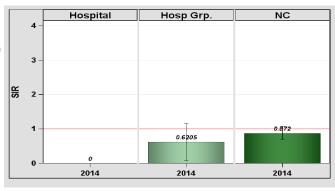


Figure 5. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Surgical Site Infections (SSI) after Colon Surgeries

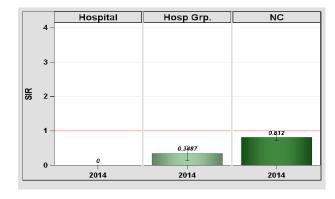


Table 6. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	ntl baseline
Colon surgery	0	1		0.02			No Conclusion

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

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

Figure 6. SIRs and 95% Confidence Intervals for Colon Surgeries, Jan-Dec 2014.

Commentary from Hospitals:

At Novant Health, the safety of our patients comes first. Our goal is to have the lowest possible infection rates and we continually monitor infection prevention tactics for improvement opportunities. We support transparency in reporting infection rates and make common infection data available on our website. More information can be found under "quality" on NovantHealth.org.

Refer to HAI in N.C. Reference Report - October 2012 (rev July 2013) for further explanation of presented statistics (epi.publichealth.nc.gov/cd/hai/figures/hai_jul2013_reference.pdf). Data as of March 12, 2015.

Frye Regional Medical Center, Hickory, Catawba County

2014 Hospital Survey Information

Hospital Type: **Acute Care Hospital**

Medical Affiliation: Nο 8,404 Admissions in 2014: Patient Days in 2014: 36,848 Total Number of Beds: 170 Number of ICU Beds: 32 FTE* Infection Preventionists: 1 50 Number of FTEs* per 100 beds: 0.88



*FTE = Full-time equivalent

Central Line-Associated Bloodstream Infections (CLABSI)

Hosp Grp. NC Hospital 뚮 0.6397 2014 2014 2014

Table 1. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008. 95% CI # Obs Line Days Rate # Pred SIR Medical cardiac 0.601 1 832 1.2 1.66 0.030, 2.964 Same Neurologic O 0 No Conclusion 527 0.74, 1.773 Surgical cardiothoracic 0 0 1.69 0 Same 1,207 YTD Total for Reporting Units 1 2.566 4.09 0.244 0.012, 1.205 Same 0.39

Figure 1. Rates and 95% Confidence Intervals, Jan-Dec 2014.

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1.000 central line days

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

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. Rates reported here may be higher than rates based on clinically-defined illness.

Table 2. Rate and SIR, Jan-Dec 2014 in Comparison to National Baseline Data from 2010-2011.

Location	# Obs	Pat Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Facility-wide inpatient	0	36,848	0	2.24	0	, 1.340	Same

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 patient days

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

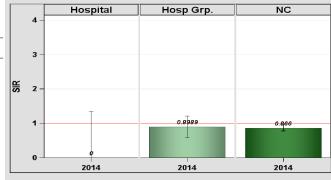


Figure 2. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

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.

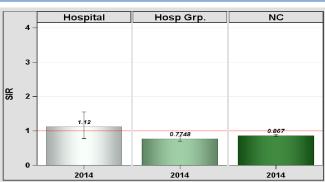


Table 3. Rate and SIR, Jan-Dec 2014 in Comparison to National Baseline Data from 2010-2011.

Location	# Obs	# Pat Days	Rate	# Pred	SIR	95% CI	ntl baseline
Facility-wide inpatient	33	36,088	9.14	29.46	1.12	0.784, 1.555	Same

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 10,000 patient days.

Figure 3. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Frye Regional Medical Center, Hickory, Catawba County

Catheter-Associated Urinary Tract Infections (CAUTI)

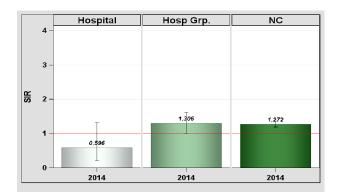


Table 4. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2009.

Type of Unit	# Obs	Cath Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Medical cardiac	0	1,351	0	2.7	0	, 1.109	Same
Neurologic	1	764	1.31	2.9	0.344	0.017, 1.699	Same
Surgical cardiothoracic	4	1,639	2.44	2.79	1.436	0.456, 3.463	Same
YTD Total for Reporting Units	5	3,754	1.33	8.39	0.596	0.218, 1.321	Same

Figure 4. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 catheter days.

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

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	ntl baseline
Abdominal hysterectomy	0	84	0	0.68			No Conclusion

Note: Infections from deep incisional and/or organ space

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

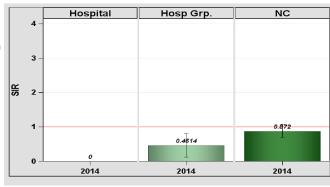


Figure 5. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Surgical Site Infections (SSI) after Colon Surgeries

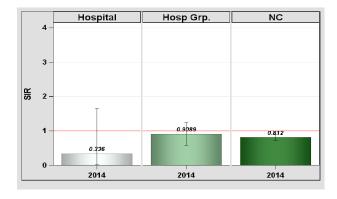


Table 6. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	ntl baseline
Colon surgery	1	98	1.02	2.98	0.336	0.017, 1.657	Same

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

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

Figure 6. SIRs and 95% Confidence Intervals for Colon Surgeries, Jan-Dec 2014.

Commentary from Hospitals:

FRMC has zero central line blood stream infections. We implemented an alcohol impregnated port protector that guards against infection by keeping the needleless valves of central lines protected and clean. Foley catheter related urinary tract infection is a challenge and we continue to work on removing the catheter when not necessary. Our commitment to the prevention of infections is a goal we take very seriously. Our commitment to our community to make certain our processes and policies are in line with achieving zero infections.

Refer to HAI in N.C. Reference Report - October 2012 (rev July 2013) for further explanation of presented statistics (epi.publichealth.nc.gov/cd/hai/figures/hai_jul2013_reference.pdf). Data as of March 12, 2015.

Gaston Memorial Hospital, Gastonia, Gaston County

2014 Hospital Survey Information

Hospital Type: **Acute Care Hospital**

Medical Affiliation: Nο Admissions in 2014: 20,495 Patient Days in 2014: 99,918 Total Number of Beds: 402 Number of ICU Beds: 44 FTE* Infection Preventionists: 4.00 Number of FTEs* per 100 beds: 1.00



*FTE = Full-time equivalent

Central Line-Associated Bloodstream Infections (CLABSI)

NC Hosp Grp. Hospital 뚮 0.69 0.3748 0.384 2014 2014 2014

95% CI # Obs Line Days Rate # Pred SIR 0.096, 1.894 Medical 0.573 2 1,836 1.09 3.49 Same Medical cardiac 0.312, 3.335 3 1,224 2.45 2.45 1.225 Same Neonatal Level II/III O 380 0.53 No Conclusion n Surgical 2.6 0.77 0.129. 2.545 1.129 1.77 Same Surgical cardiothoracic , 2.783 0 769 O 1.08 0 Same YTD Total for Reporting Units 5,338 1.31 10.14 0.69 0.302, 1.365 Same

Table 1. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Figure 1. Rates and 95% Confidence Intervals, Jan-Dec 2014.

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1.000 central line days

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

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. Rates reported here may be higher than rates based on clinically-defined illness.

Table 2. Rate and SIR, Jan-Dec 2014 in Comparison to National Baseline Data from 2010-2011.

Location	# Obs	Pat Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Facility-wide inpatient	6	91,146	0.07	7 5.23	1.147	0.465, 2.385	Same

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 patient days

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

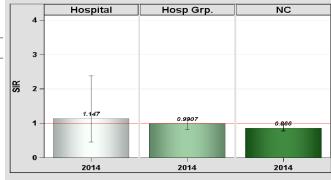


Figure 2. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

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.

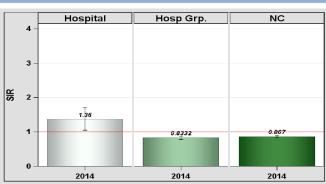


Table 3. Rate and SIR, Jan-Dec 2014 in Comparison to National Baseline Data from 2010-2011.

Location	# Obs	# Pat Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Facility-wide inpatient	63	82,655	7.62	46.31	1.36	1.054, 1.729	Worse

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 10,000 patient days.

Figure 3. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Gaston Memorial Hospital, Gastonia, Gaston County

Catheter-Associated Urinary Tract Infections (CAUTI)

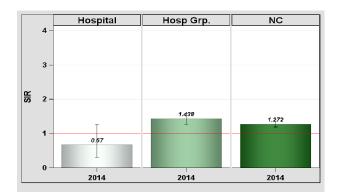


Table 4. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2009.

Type of Unit	# Obs	Cath Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Medical	4	2,025	1.98	4.05	0.988	0.314, 2.382	Same
Medical cardiac	3	1,439	2.08	2.88	1.042	0.265, 2.837	Same
Surgical	1	1,350	0.74	3.51	0.285	0.014, 1.405	Same
Surgical cardiothoracic	0	881	0	1.5	0	, 2.000	Same
YTD Total for Reporting Units	8	5,695	1.4	11.94	0.67	0.311, 1.273	Same

Figure 4. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 catheter days.

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

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Abdominal hysterectomy	0	148	0	1.57	0	, 1.912	Same

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

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

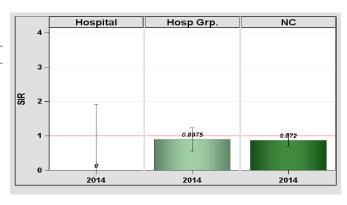


Figure 5. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Surgical Site Infections (SSI) after Colon Surgeries

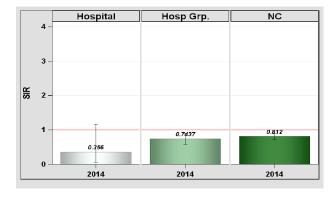


Table 6. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	ntl baseline
Colon surgery	2	172	1.16	5.62	0.356	0.060, 1.177	Same

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

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

Figure 6. SIRs and 95% Confidence Intervals for Colon Surgeries, Jan-Dec 2014.

Commentary from Hospitals:

Granville Medical Center, Oxford, Granville County

2014 Hospital Survey Information

Hospital Type: **Acute Care Hospital**

Medical Affiliation: No Admissions in 2014: 2.611 Patient Days in 2014: 8,974 Total Number of Beds: 62 Number of ICU Beds: 6 FTE* Infection Preventionists: 0.50 Number of FTEs* per 100 beds: 0.81

Hospital



Central Line-Associated Bloodstream Infections (CLABSI)

Table 1. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008. NC Hosp Grp.

Obs Line Days Rate # Pred SIR Medical/surgical n 638 n 0.96 No Conclusion YTD Total for Reporting Units 0 638 0 0.96 No Conclusion

뚮 0.384 0.1891 2014 2014 2014

Figure 1. Rates and 95% Confidence Intervals, Jan-Dec 2014.

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1.000 central line days

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

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. Rates reported here may be higher than rates based on clinically-defined illness.

Table 2. Rate and SIR, Jan-Dec 2014 in Comparison to National Baseline Data from 2010-2011.

Location	# Obs	Pat Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Facility-wide inpatient	0	8,954	0	0.38			No Conclusion

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 patient days

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

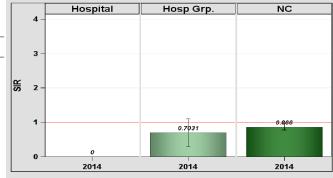


Figure 2. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

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.

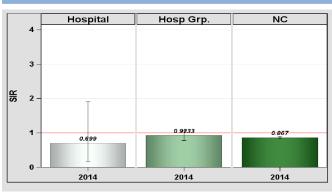


Figure 3. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Table 5. Rate and 5ik, Jan-Dec 2014 in Comparison to National Baseline Data from 2010-2011.										
Location	# Obs	# Pat Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline			
Facility-wide inpatient	3	8,311	3.61	4.29	0.699	0.178, 1.902	Same			

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 10,000 patient days.

^{*}FTE = Full-time equivalent

Granville Medical Center, Oxford, Granville County

Catheter-Associated Urinary Tract Infections (CAUTI)

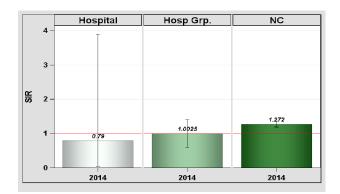


Table 4. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2009.

Type of Unit	# Obs	Cath Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Medical/surgical	1	974	1.03	1.27	0.79	0.040, 3.895	Same
YTD Total for Reporting Units	1	974	1.03	1.27	0.79	0.040, 3.895	Same

Figure 4. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 catheter days.

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

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	ntl baseline
Abdominal hysterectomy	0	18		0.16			No Conclusion

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

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

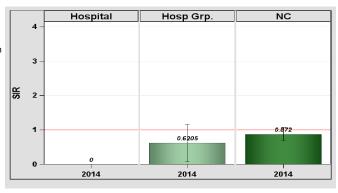


Figure 5. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Surgical Site Infections (SSI) after Colon Surgeries

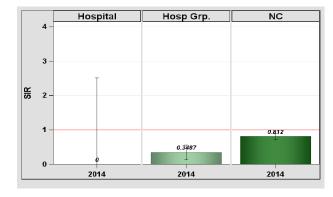


Table 6. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Colon surgery	0	35	0	1.19	0	, 2.517	Same

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

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

Figure 6. SIRs and 95% Confidence Intervals for Colon Surgeries, Jan-Dec 2014.

Commentary from Hospitals:

Halifax Regional Medical Center, Roanoke Rapids, Halifax County

2014 Hospital Survey Information

Hospital Type: **Acute Care Hospital**

Medical Affiliation: No 5,342 Admissions in 2014: Patient Days in 2014: 18,328 Total Number of Beds: 101 Number of ICU Beds: 8 FTE* Infection Preventionists: 1 00 Number of FTEs* per 100 beds: 0.99



*FTE = Full-time equivalent

Central Line-Associated Bloodstream Infections (CLABSI)

Hosp Grp. NC Hospital 뚮 0.3238

Obs Line Days Rate # Pred SIR Medical/surgical 1 418 2.39 0.63 No Conclusion YTD Total for Reporting Units 418 2.39 0.63 No Conclusion 1

Table 1. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Figure 1. Rates and 95% Confidence Intervals, Jan-Dec 2014.

2014

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1.000 central line days

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

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. Rates reported here may be higher than rates based on clinically-defined illness.

Table 2. Rate and SIR, Jan-Dec 2014 in Comparison to National Baseline Data from 2010-2011.

2014

Location	# Obs	Pat Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline	
Facility-wide inpatient	0	20,472	0	1.24	0	, 2.415	Same	

2014

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 patient days

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

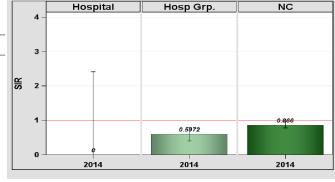


Figure 2. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

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.

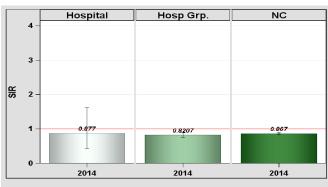


Figure 3. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

1	Table 3. Rate and SIR, Jan-Dec 2014 in Comparison to National Baseline Data from 2010-2011.										
1	Location	# Obs	# Pat Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline			
	Facility-wide inpatient	9	19,406	4.64	10.26	0.877	0.428, 1.609	Same			

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 10,000 patient days.

Halifax Regional Medical Center, Roanoke Rapids, Halifax County

Catheter-Associated Urinary Tract Infections (CAUTI)

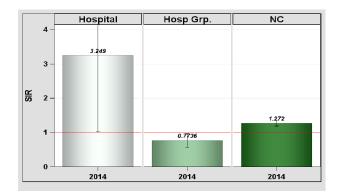


Table 4. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2009.

Type of Unit	# Obs	Cath Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Medical/surgical	4	947	4.22	1.23	3.249	1.032, 7.837	Worse
YTD Total for Reporting Units	4	947	4.22	1.23	3.249	1.032, 7.837	Worse

Figure 4. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 catheter days.

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

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	ntl baseline
Abdominal hysterectomy	1	53	1.89	0.5			No Conclusion

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

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

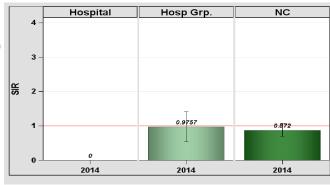


Figure 5. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Surgical Site Infections (SSI) after Colon Surgeries

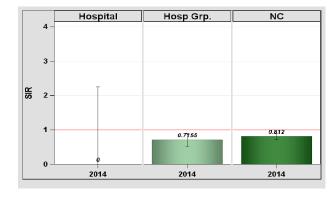


Table 6. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	ntl baseline
Colon surgery	0	43	0	1.33	0	, 2.260	Same

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

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

Figure 6. SIRs and 95% Confidence Intervals for Colon Surgeries, Jan-Dec 2014.

Commentary from Hospitals:

Haywood Regional Medical Center, Clyde, Haywood County

2014 Hospital Survey Information

Hospital Type: **Acute Care Hospital**

Medical Affiliation: No 5,285 Admissions in 2014: Patient Days in 2014: 19,362 Total Number of Beds: 100 Number of ICU Beds: 12 FTE* Infection Preventionists: 1.00 Number of FTEs* per 100 beds: 1.00

Hospital

2014



*FTE = Full-time equivalent

뚮

Central Line-Associated Bloodstream Infections (CLABSI)

Table 1. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008. Hosp Grp. NC

2014

Obs Line Days Rate # Pred SIR 0.56 Medical/surgical n 373 n No Conclusion YTD Total for Reporting Units 0 373 0 0.56 No Conclusion

Figure 1. Rates and 95% Confidence Intervals, Jan-Dec 2014.

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1.000 central line days

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

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. Rates reported here may be higher than rates based on clinically-defined illness.

Table 2. Rate and SIR, Jan-Dec 2014 in Comparison to National Baseline Data from 2010-2011.

0.3238

2014

Location	# Obs	Pat Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Facility-wide inpatient	1	20,782	0.05	5 0.78			No Conclusion

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 patient days

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

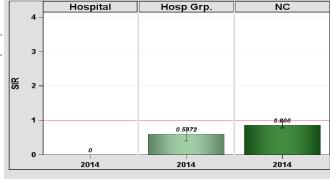


Figure 2. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

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.

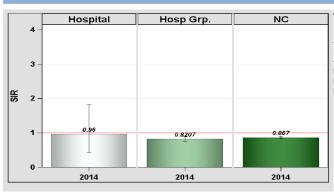


Figure 3. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Table 3. Rate and SIR, Jan-Dec	2014 In	Comparison to	Nationa	i Baseiine	Data fro	m 2010-2011.	
Location	# Obs	# Pat Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Facility-wide inpatient	8	20,255	3.95	8.33	0.96	0.446, 1.824	Same

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 10,000 patient days.

Haywood Regional Medical Center, Clyde, Haywood County

Catheter-Associated Urinary Tract Infections (CAUTI)

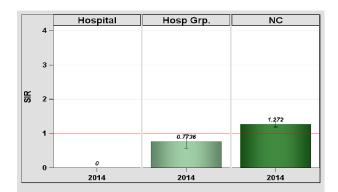


Table 4. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2009.

Type of Unit	# Obs	Cath Day	s Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Medical/surgical	0	767	0	1			No Conclusion
YTD Total for Reporting Units	0	767	0	1			No Conclusion

Figure 4. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 catheter days.

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

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	ntl baseline
Abdominal hysterectomy	1	20	5	0.19			No Conclusion

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

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

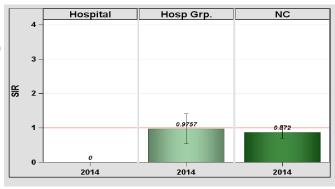


Figure 5. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Surgical Site Infections (SSI) after Colon Surgeries

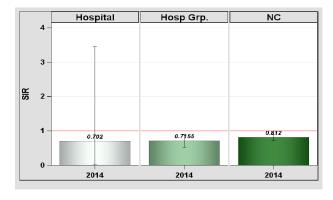


Table 6. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	Compared to ntl baseline	
Colon surgery	1	47	2.13	1.43	0.702	0.035, 3.462	Same	

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

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

Figure 6. SIRs and 95% Confidence Intervals for Colon Surgeries, Jan-Dec 2014.

Commentary from Hospitals:

The prevention and reduction of healthcare associated infections is a top priority at Haywood Regional Medical Center. To accomplish this, infection prevention strategies are continually ass and measures implemented to decrease the risk for infection. These measures are based on evidence based practices and clinical guidelines. A comprehensive program is provided that encompasses patient care and patient safety.

Refer to HAI in N.C. Reference Report - October 2012 (rev July 2013) for further explanation of presented statistics (epi.publichealth.nc.gov/cd/hai/figures/hai_jul2013_reference.pdf). Data as of March 12, 2015.

High Point Regional Health System, High Point, Guilford County

2014 Hospital Survey Information

Hospital Type: **Acute Care Hospital**

Medical Affiliation: Nο 17,470 Admissions in 2014: Patient Days in 2014: 79,798 Total Number of Beds: 348 Number of ICU Beds: 20 FTE* Infection Preventionists: 2.00 Number of FTEs* per 100 beds: 0.57



*FTE = Full-time equivalent

Central Line-Associated Bloodstream Infections (CLABSI)

Hosp Grp. NC Hospital 뚮 0.6397 2014 2014 2014

95% CI # Obs Line Days Rate # Pred SIR Medical cardiac 3 815 3.68 1.63 1.84 0.468, 5.009 Same Medical/surgical 3 1,450 2.07 2.18 1.379 0.351, 3.754 Same 0 Surgical cardiothoracic O 0 No Conclusion YTD Total for Reporting Units 6 0.639.3.280 Same 2.265 2.65 3.81 1.577

Table 1. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Figure 1. Rates and 95% Confidence Intervals, Jan-Dec 2014.

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1.000 central line days

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

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. Rates reported here may be higher than rates based on clinically-defined illness.

Table 2. Rate and SIR, Jan-Dec 2014 in Comparison to National Baseline Data from 2010-2011.

Facility-wide inpatient 4 75,065 0.05 4.23 0.946 0.301, 2.283 Same	Location	# Obs Pa	at Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline	
	Facility-wide inpatient	4	75,065	0.05	4.23	0.946	0.301, 2.283	Same	

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 patient days

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

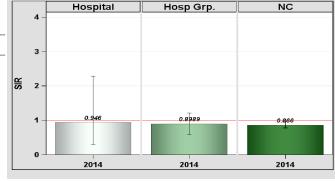


Figure 2. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

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.

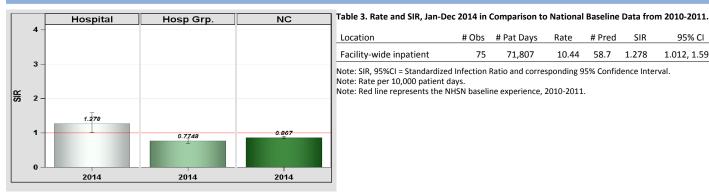


Figure 3. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Location		# Pat Days				95% CI	Compared to ntl baseline
Facility-wide inpatient	75	71,807	10.44	58.7	1.278	1.012, 1.593	Worse

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 10,000 patient days.

High Point Regional Health System, High Point, Guilford County

Catheter-Associated Urinary Tract Infections (CAUTI)

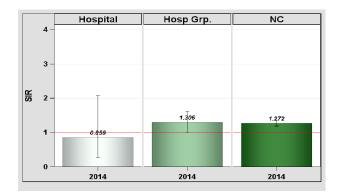


Table 4. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2009.

Type of Unit	# Obs	Cath Days	Rate	# Pred	SIR	95% CI	ntl baseline
Medical cardiac	1	1,046	0.96	2.09	0.478	0.024, 2.358	Same
Medical/surgical	3	1,968	1.52	2.56	1.173	0.298, 3.191	Same
Surgical cardiothoracic	0	4		0.01			No Conclusion
YTD Total for Reporting Units	4	3,018	1.33	4.66	0.859	0.273, 2.072	Same

Figure 4. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 catheter days.

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

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Abdominal hysterectomy	0	177	0	1.98	0	, 1.515	Same

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

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

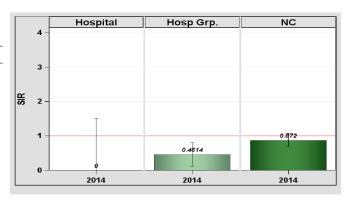


Figure 5. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Surgical Site Infections (SSI) after Colon Surgeries

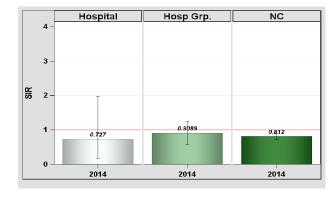


Table 6. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	ntl baseline
Colon surgery	3	124	2.42	4.13	0.727	0.185, 1.978	Same

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

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

Figure 6. SIRs and 95% Confidence Intervals for Colon Surgeries, Jan-Dec 2014.

Commentary from Hospitals:

Highsmith Rainey Specialty Hospital, Fayetteville, Cumberland County

2014 Hospital Survey Information

Hospital Type: Long-term Acute Care Hospital

Admissions in 2014: 318 Patient Days in 2014: 18,410 **Total Number of Beds:** 66 0.50 FTE* Infection Preventionists: Number of FTEs* per 100 beds: 0.76



*FTE = Full-time equivalent

Central Line-Associated Bloodstream Infections (CLABSI)

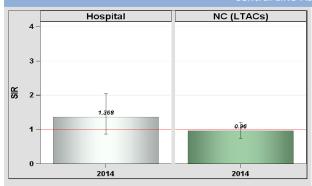


Table 1. Number of Observed a	nd Pre	dicted CLAB	SI Infe	tions by	Location	Jan-Dec 2014.	
Table 1. Number of Observed a Type of Unit	# Obs	Line Days	Rate	# Pred *	SIR	95% CI	compared to ntl baseline
Adult intensive care unit	0	2,112	0	2.75	0	, 1.091	Same
Adult ward	21	14,006	1.5	12.61	1.666	1.059, 2.503	Worse
YTD Total for Reporting Units	21	16,118	1.3	15.35	1.368	0.869, 2.055	Same

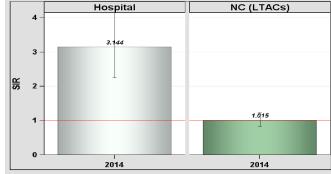
Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 central line days.
Note: Red line represents the NHSN baseline experience, 2006-2008.

Figure 1. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Catheter-Associated Urinary Tract Infections (CAUTI)

Table 2. Number of Observ	ed and F	Predicted CA	AUTI In	fections b	y Locatio	n, Jan-Dec 2014		
Type of Unit	# Obs	Cath Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline	
Adult intensive care unit	8	1,638		4.1	1.954	0.907, 3.710	Same	_
Adult ward	30	3,996		7.99	3.754	2.579, 5.291	Worse	
YTD Total for Reporting U	nits 38	5,634		12.09	3.144	2.257, 4.271	Worse	



Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 catheter days

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

Figure 2. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Other Healthcare-Associated Infections (HAIs)

Long-term acute care hospitals (LTACs) do not report LabID C. difficile, LabID MRSA Bacteremia or SSIs to the N.C. Division of Public Health.

Commentary from Hospitals:

No comments provided.

Refer to the HAI in N.C. Reference Report - October 2012 (rev June 2013) for further explanation of presented statistics (epi.publichealth.nc.gov/cd/hai/figures.html). Data as of March 12, 2015.

Hugh Chatham Memorial Hospital, Elkin, Surry County

2014 Hospital Survey Information

Hospital Type: **Acute Care Hospital**

Medical Affiliation: No 4,689 Admissions in 2014: Patient Days in 2014: 14,544 Total Number of Beds: 81 Number of ICU Beds: 8 FTE* Infection Preventionists: 0.50 Number of FTEs* per 100 beds: 0.62



*FTE = Full-time equivalent

Central Line-Associated Bloodstream Infections (CLABSI)

Table 1. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008. NC Hosp Grp. Hospital 뚮 0.384 0.1891

Obs Line Days Rate # Pred SIR Medical/surgical O 279 n 0.42 No Conclusion YTD Total for Reporting Units 0 0.42 No Conclusion 0 279

Figure 1. Rates and 95% Confidence Intervals, Jan-Dec 2014.

2014

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1.000 central line days

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

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. Rates reported here may be higher than rates based on clinically-defined illness.

Table 2. Rate and SIR, Jan-Dec 2014 in Comparison to National Baseline Data from 2010-2011.

2014

Location	# Obs	Pat Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Facility-wide inpatient	0	15,229	0	0.55			No Conclusion

2014

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 patient days

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

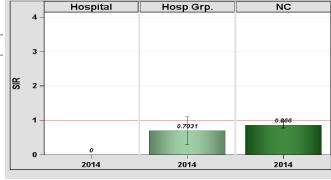
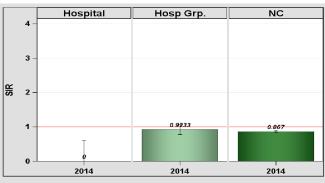


Figure 2. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

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.



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

Compared to ntl baseline Location # Obs # Pat Days Rate # Pred , 0.616 Facility-wide inpatient 13,086 4.86 0 Better

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Table 3. Rate and SIR, Jan-Dec 2014 in Comparison to National Baseline Data from 2010-2011.

Note: Rate per 10,000 patient days

Figure 3. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Hugh Chatham Memorial Hospital, Elkin, Surry County

Catheter-Associated Urinary Tract Infections (CAUTI)

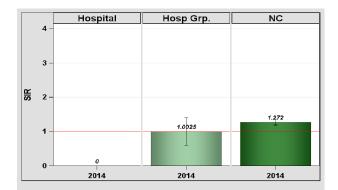


Table 4. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2009.

Type of Unit	# Obs	Cath Days I	Rate	# Pred	SIR	95% CI	ntl baseline
Medical/surgical	0	678	0	0.88			No Conclusion
YTD Total for Reporting Units	0	678	0	0.88			No Conclusion

Figure 4. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 catheter days.

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

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	ntl baseline
Abdominal hysterectomy	0	59	0	0.6			No Conclusion

Note: Infections from deep incisional and/or organ space

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

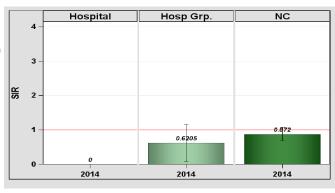


Figure 5. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Surgical Site Infections (SSI) after Colon Surgeries

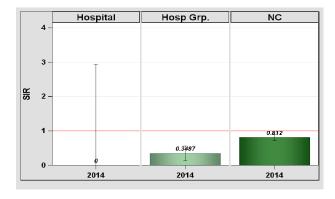


Table 6. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	ntl baseline
Colon surgery	0	34	0	1.02	0	, 2.942	Same

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

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

Figure 6. SIRs and 95% Confidence Intervals for Colon Surgeries, Jan-Dec 2014.

Commentary from Hospitals:

Iredell Memorial Hospital, Statesville, Iredell County

2014 Hospital Survey Information

Hospital Type: **Acute Care Hospital**

Medical Affiliation: Nο Admissions in 2014: 10,733 Patient Days in 2014: 39,893 Total Number of Beds: 199 Number of ICU Beds: 16 FTE* Infection Preventionists: 1.00 Number of FTEs* per 100 beds: 0.50



*FTE = Full-time equivalent

Central Line-Associated Bloodstream Infections (CLABSI)

Table 1. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008. Hosp Grp. NC Hospital 똜 0.3238 2014 2014 2014

95% CI # Obs Line Days Rate # Pred SIR 0 , 1.561 Medical/surgical n 1,279 0 1.92 Same YTD Total for Reporting Units 0 1,279 0 1.92 0 , 1.561 Same

Figure 1. Rates and 95% Confidence Intervals, Jan-Dec 2014.

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1.000 central line days

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

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. Rates reported here may be higher than rates based on clinically-defined illness.

Table 2. Rate and SIR, Jan-Dec 2014 in Comparison to National Baseline Data from 2010-2011.

Location	# Obs	Pat Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline	
Facility-wide inpatient	0	39,893	0	1.97	0	, 1.524	Same	

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 patient days

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

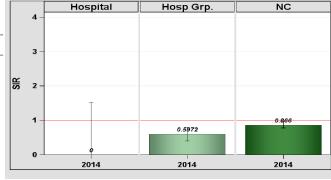


Figure 2. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

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.



Figure 3. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

1	Table 3. Rate and SIR, Jan-Dec	2014 in	Comparison to	Nationa	l Baseline	Data fro	m 2010-2011.	
1	Location	# Obs	# Pat Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
	Facility-wide inpatient	9	37,954	2.37	19.11	0.471	0.230, 0.864	Better

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 10,000 patient days.

Iredell Memorial Hospital, Statesville, Iredell County

Catheter-Associated Urinary Tract Infections (CAUTI)

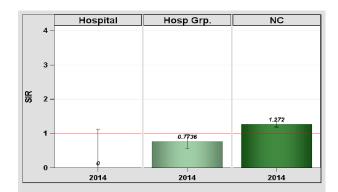


Table 4. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2009.

Type of Unit	# Obs	Cath Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Medical/surgical	0	2,208	0	2.65	0	, 1.131	Same
YTD Total for Reporting Units	0	2,208	0	2.65	0	, 1.131	Same

Figure 4. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 catheter days.

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

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Abdominal hysterectomy	0	102	0	1.11	0	, 2.694	Same

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

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

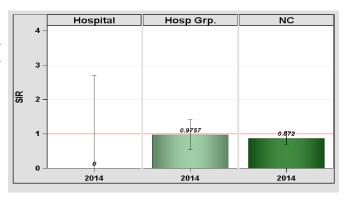


Figure 5. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Surgical Site Infections (SSI) after Colon Surgeries

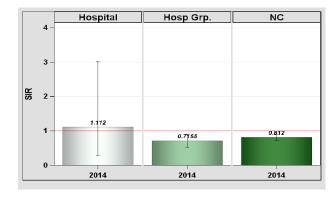


Table 6. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	ntl baseline
Colon surgery	3	81	3.7	2.7	1.112	0.283, 3.026	Same

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

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

Figure 6. SIRs and 95% Confidence Intervals for Colon Surgeries, Jan-Dec 2014.

Commentary from Hospitals:

Johnston Health, Smithfield, Johnston County

2014 Hospital Survey Information

Hospital Type: **Acute Care Hospital**

Medical Affiliation: Nο Admissions in 2014: 10,392 Patient Days in 2014: 40,717 Total Number of Beds: 199 Number of ICU Beds: 16 FTE* Infection Preventionists: 1.00 Number of FTEs* per 100 beds: 0.50



*FTE = Full-time equivalent

Central Line-Associated Bloodstream Infections (CLABSI)

Table 1. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008. Hosp Grp. NC Hospital 뚮 0.3238 2014 2014 2014

Obs Line Days Rate # Pred SIR 95% CI 0.98 Medical 1,611 1.86 3.06 0.249, 2.667 Same YTD Total for Reporting Units 3 1,611 3.06 0.98 0.249, 2.667 1.86 Same

Figure 1. Rates and 95% Confidence Intervals, Jan-Dec 2014.

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1.000 central line days

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

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. Rates reported here may be higher than rates based on clinically-defined illness.

Table 2. Rate and SIR, Jan-Dec 2014 in Comparison to National Baseline Data from 2010-2011.

Location	# Obs	Pat Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Facility-wide inpatient	2	39,978	0.05	5 2.24	0.894	0.150, 2.954	Same

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 patient days

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

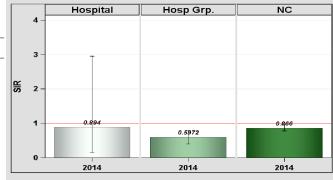
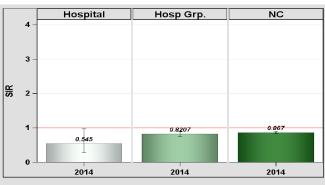


Figure 2. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

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.



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

Table 3. Rate and SIR, Jan-Dec 2014 in Comparison to National Baseline Data from 2010-2011.

Location	# Obs	# Pat Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Facility-wide inpatient	10	37,002	2.7	18.34	0.545	0.277, 0.972	Better

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval. Note: Rate per 10,000 patient days.

Figure 3. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Johnston Health, Smithfield, Johnston County

Catheter-Associated Urinary Tract Infections (CAUTI)

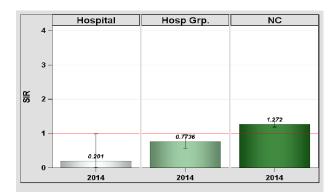


Table 4. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2009.

Type of Unit	# Obs	Cath Days Rate		# Pred	SIR	95% CI	Compared to ntl baseline	
Medical	1	2,483	0.4	4.97	0.201	0.010, 0.993	Better	
YTD Total for Reporting Units	1	2,483	0.4	4.97	0.201	0.010, 0.993	Better	

Figure 4. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 catheter days.

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

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	ntl baseline
Abdominal hysterectomy	2	77	2.6	0.59			No Conclusion

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

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

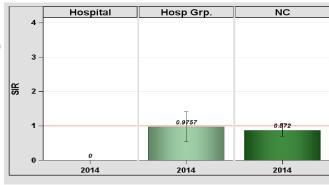


Figure 5. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Surgical Site Infections (SSI) after Colon Surgeries

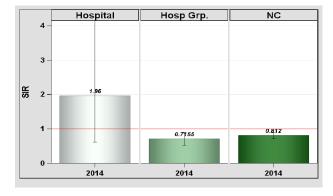


Table 6. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Colon surgery	4	83	4.82	2.04	1.96	0.623, 4.728	Same

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

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

Figure 6. SIRs and 95% Confidence Intervals for Colon Surgeries, Jan-Dec 2014.

Commentary from Hospitals:

Kindred Hospital-Greensboro, Greensboro, Guilford County

2014 Hospital Survey Information

Hospital Type: Long-term Acute Care Hospital

Admissions in 2014: 635
Patient Days in 2014: 19,107
Total Number of Beds: 101
FTE* Infection Preventionists: 1.00
Number of FTEs* per 100 beds: 0.99



*FTE = Full-time equivalent

Central Line-Associated Bloodstream Infections (CLABSI)

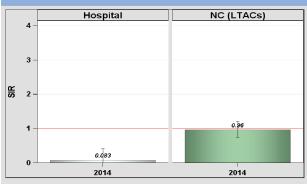


 Table 1. Number of Observed and Predicted CLABSI Infections by Location, Jan-Dec 2014.

 Type of Unit
 # Obs
 Line Days
 Rate
 # Pred
 SIR
 95% CI
 Compared to ntl baseline

 Adult ward
 1
 13,318
 0.08
 11.99
 0.083
 0.004, 0.411
 Better

 YTD Total for Reporting Units
 1
 13,318
 0.08
 11.99
 0.083
 0.004, 0.411
 Better

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

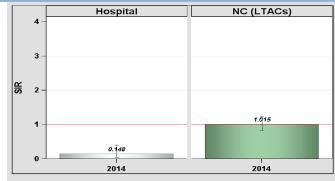
Note: Rate per 1,000 central line days.

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

Figure 1. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Catheter-Associated Urinary Tract Infections (CAUTI)

Table 2. Number of Observed and Predicted CAUTI Infections by Location, Jan-Dec 2014.												
Type of Unit	# Obs	Cath Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline					
Adult ward	3	10,148		20.3	0.148	0.038, 0.402	Better					
YTD Total for Reporting U	nits 3	10,148		20.3	0.148	0.038, 0.402	Better					



Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 catheter days

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

Figure 2. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Other Healthcare-Associated Infections (HAIs)

Long-term acute care hospitals (LTACs) do not report LabID C. difficile, LabID MRSA Bacteremia or SSIs to the N.C. Division of Public Health.

Commentary from Hospitals:

No comments provided.

Refer to the HAI in N.C. Reference Report - October 2012 (rev June 2013) for further explanation of presented statistics (epi.publichealth.nc.gov/cd/hai/figures.html). Data as of March 12, 2015.

Kings Mountain Hospital, Kings Mountain, Cleveland County

2014 Hospital Survey Information

Hospital Type: **Acute Care Hospital**

Medical Affiliation: No 2,536 Admissions in 2014: Patient Days in 2014: 13,324 Total Number of Beds: 59 Number of ICU Beds: 6 FTE* Infection Preventionists: 0.50 Number of FTEs* per 100 beds: 0.85



*FTE = Full-time equivalent

Central Line-Associated Bloodstream Infections (CLABSI)

Table 1. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008. NC Hosp Grp. Hospital 뚮 0.384 0.1891 2014 2014 2014

Obs Line Days Rate # Pred SIR Medical O 212 n 0.4No Conclusion YTD Total for Reporting Units 0 212 0 0.4 No Conclusion

Figure 1. Rates and 95% Confidence Intervals, Jan-Dec 2014.

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1.000 central line days

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

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. Rates reported here may be higher than rates based on clinically-defined illness.

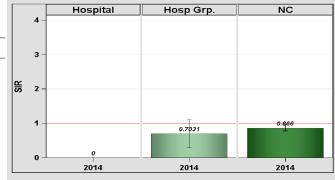
Table 2. Rate and SIR, Jan-Dec 2014 in Comparison to National Baseline Data from 2010-2011.

Location	# Obs	Pat Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Facility-wide inpatient	0	13,324	0	0.58			No Conclusion

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 patient days

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



Pred

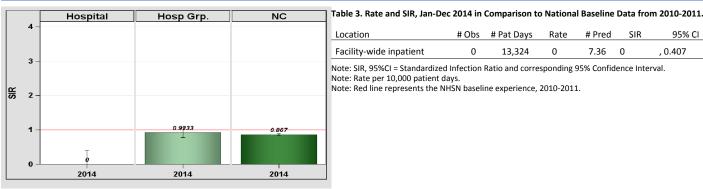
Figure 2. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Rate

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.

Location



Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

, 0.407 Facility-wide inpatient 13,324 7.36 0 Better

Note: Rate per 10,000 patient days

Pat Days

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

Obs

Figure 3. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Compared to ntl baseline

Kings Mountain Hospital, Kings Mountain, Cleveland County

Catheter-Associated Urinary Tract Infections (CAUTI)

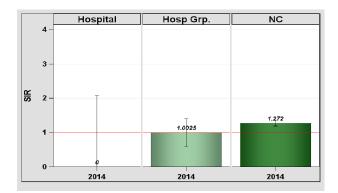


Table 4. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2009.

Type of Unit	# Obs	Cath Day	s Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Medical	0	723	0	1.45	0	, 2.072	Same
YTD Total for Reporting Units	0	723	0	1.45	0	, 2.072	Same

Figure 4. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 catheter days.

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

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	ntl baseline
Abdominal hysterectomy	0	0		0			No Conclusion

Note: Infections from deep incisional and/or organ space

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

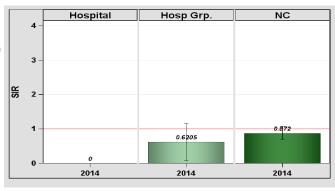


Figure 5. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Surgical Site Infections (SSI) after Colon Surgeries

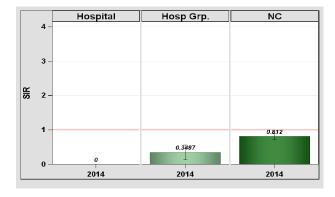


Table 6. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	ntl baseline
Colon surgery	1	25	4	0.77			No Conclusion

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

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

Figure 6. SIRs and 95% Confidence Intervals for Colon Surgeries, Jan-Dec 2014.

Commentary from Hospitals:

The prevention and reduction of healthcare associated infections is a top priority at Cleveland County Healthcare System hospitals. To accomplish this, infection prevention strategies are continually assessed and measures implemented to decrease the risk for infection. These measures are based on evidence based practices and clinical guidelines. A comprehensive program is provided that encompasses patient care and patient safety.

Refer to HAI in N.C. Reference Report - October 2012 (rev July 2013) for further explanation of presented statistics (epi.publichealth.nc.gov/cd/hai/figures/hai_jul2013_reference.pdf). Data as of March 12, 2015.

Lake Norman Regional Medical Center, Mooresville, Iredell County

2014 Hospital Survey Information

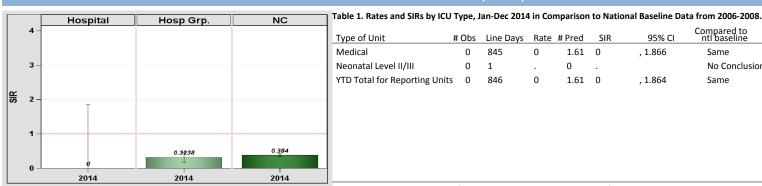
Hospital Type: **Acute Care Hospital**

Medical Affiliation: No 4,620 Admissions in 2014: Patient Days in 2014: 16,435 Total Number of Beds: 123 Number of ICU Beds: 12 FTE* Infection Preventionists: 1.00 Number of FTEs* per 100 beds: 0.81



*FTE = Full-time equivalent

Central Line-Associated Bloodstream Infections (CLABSI)



95% CI # Obs Line Days Rate # Pred SIR Medical 0 n 845 0 1.61 , 1.866 Same Neonatal Level II/III 0 O No Conclusion 1 YTD Total for Reporting Units 0 O 1.61 0 846 , 1.864 Same

Figure 1. Rates and 95% Confidence Intervals, Jan-Dec 2014.

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1.000 central line days

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

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. Rates reported here may be higher than rates based on clinically-defined illness.

Table 2. Rate and SIR, Jan-Dec 2014 in Comparison to National Baseline Data from 2010-2011.

Location	# Obs	Pat Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Facility-wide inpatient	0	18,207	0	0.95			No Conclusion

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 patient days

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

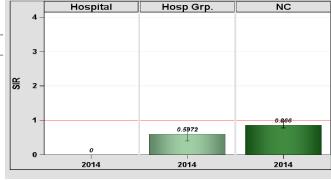


Figure 2. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

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.

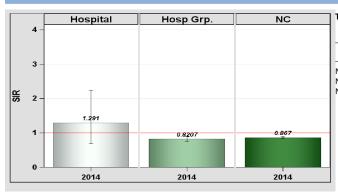


Figure 3. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

1	Table 3. Rate and SIR, Jan-Dec 2014 in Comparison to National Baseline Data from 2010-2011.										
1	Location	# Obs	# Pat Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline			
	Facility-wide inpatient	11	15,808	6.96	8.52	1.291	0.679, 2.244	Same			

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 10,000 patient days.

Lake Norman Regional Medical Center, Mooresville, Iredell County

Catheter-Associated Urinary Tract Infections (CAUTI)

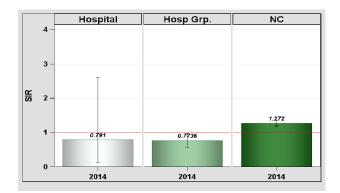


Table 4. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2009.

Type of Unit	# Obs	Cath Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline	
Medical	2	1,264	1.58	2.53	0.791	0.133, 2.614	Same	
YTD Total for Reporting Units	2	1,264	1.58	2.53	0.791	0.133, 2.614	Same	

Figure 4. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 catheter days.

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

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	ntl baseline
Abdominal hysterectomy	0	112	0	0.88			No Conclusion

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

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

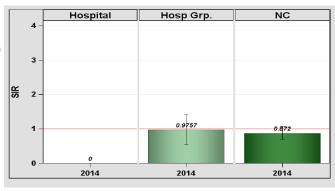


Figure 5. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Surgical Site Infections (SSI) after Colon Surgeries

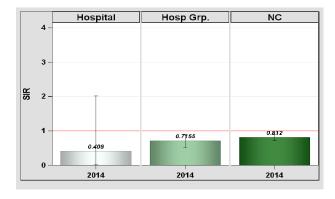


Table 6. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	ntl baseline
Colon surgery	1	80	1.25	2.45	0.409	0.020, 2.016	Same

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

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

Figure 6. SIRs and 95% Confidence Intervals for Colon Surgeries, Jan-Dec 2014.

Commentary from Hospitals:

Lenoir Memorial Hospital, Kinston, Lenoir County

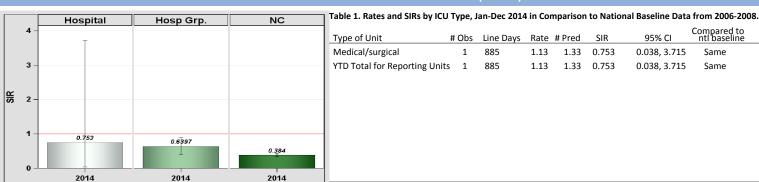
2014 Hospital Survey Information

Hospital Type: **Acute Care Hospital**

Medical Affiliation: No 5,476 Admissions in 2014: Patient Days in 2014: 24,863 Total Number of Beds: 167 Number of ICU Beds: 14 FTE* Infection Preventionists: 1.00 Number of FTEs* per 100 beds: 0.60



Central Line-Associated Bloodstream Infections (CLABSI)



Obs Line Days Rate # Pred SIR 95% CI 0.753 Medical/surgical 885 1.13 1.33 0.038, 3.715 Same YTD Total for Reporting Units 885 0.753 0.038, 3.715 1 1.13 1.33 Same

Figure 1. Rates and 95% Confidence Intervals, Jan-Dec 2014.

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1.000 central line days

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

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. Rates reported here may be higher than rates based on clinically-defined illness.

Table 2. Rate and SIR, Jan-Dec 2014 in Comparison to National Baseline Data from 2010-2011.

Location	# Obs	Pat Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline	
Facility-wide inpatient	3	27,636	0.11	2.26	1.325	0.337, 3.607	Same	

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 patient days

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

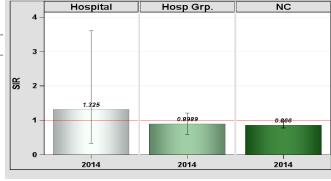


Figure 2. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

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.

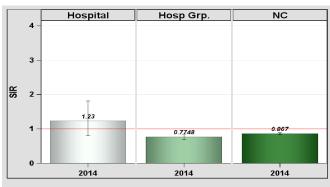


Figure 3. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Table 3. Rate and SIR, Jan-Dec 2014 in Comparison to National Baseline Data from 2010-2011.												
Location	# Obs	# Pat Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline					
Facility-wide innatient	23	26.622	8.64	18.7	1.23	0.799.1.817	Same					

Note: SIR. 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 10,000 patient days.

^{*}FTE = Full-time equivalent

Lenoir Memorial Hospital, Kinston, Lenoir County

Catheter-Associated Urinary Tract Infections (CAUTI)

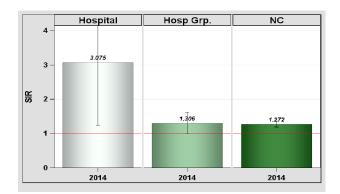


Table 4. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2009.

Type of Unit	# Obs	Cath Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Medical/surgical	6	1,501	4	1.95	3.075	1.246, 6.395	Worse
YTD Total for Reporting Units	6	1,501	4	1.95	3.075	1.246, 6.395	Worse

Figure 4. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 catheter days.

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

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Р	rocedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	ntl baseline
A	bdominal hysterectomy	0	28	0	0.36			No Conclusion

Note: Infections from deep incisional and/or organ space

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

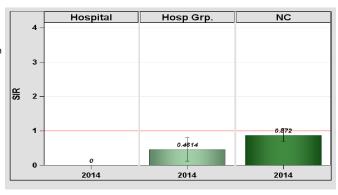


Figure 5. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Surgical Site Infections (SSI) after Colon Surgeries

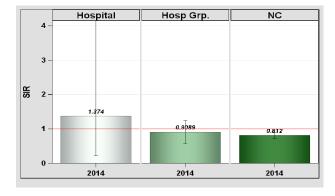


Table 6. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Colon surgery	2	46	4.35	1.46	1.374	0.230, 4.540	Same

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

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

Figure 6. SIRs and 95% Confidence Intervals for Colon Surgeries, Jan-Dec 2014.

Commentary from Hospitals:

Lifecare Hospitals Of North Carolina, Rocky Mount, Nash County

2014 Hospital Survey Information

Hospital Type: Long-term Acute Care Hospital

Admissions in 2014: 513
Patient Days in 2014: 14,742
Total Number of Beds: 50
FTE* Infection Preventionists: 1.00
Number of FTEs* per 100 beds: 2.00



*FTE = Full-time equivalent

Central Line-Associated Bloodstream Infections (CLABSI)

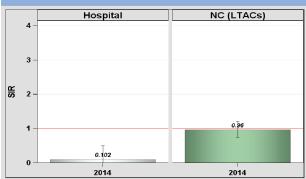


 Table 1. Number of Observed and Predicted CLABSI Infections by Location, Jan-Dec 2014.

 Type of Unit
 # Obs
 Line Days
 Rate
 # Pred
 SIR
 95% CI
 Compared to ntl baseline

 Adult ward
 1
 10,843
 0.09
 9.76
 0.102
 0.005, 0.505
 Better

 YTD Total for Reporting Units
 1
 10,843
 0.09
 9.76
 0.102
 0.005, 0.505
 Better

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

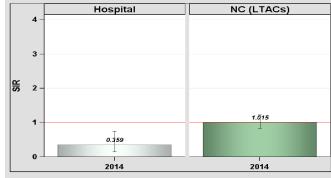
Note: Rate per 1,000 central line days.

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

Figure 1. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Catheter-Associated Urinary Tract Infections (CAUTI)

Table 2. Number of Observe	ed and I	Predicted CA	UTI Inf	ections b	y Locatio	n, Jan-Dec 2014		
Type of Unit	# Obs	Cath Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline	
Adult ward	6	8,352		16.7	0.359	0.146, 0.747	Better	
YTD Total for Reporting Ur	nits 6	8,352		16.7	0.359	0.146, 0.747	Better	



Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 catheter days.

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

Figure 2. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Other Healthcare-Associated Infections (HAIs)

Long-term acute care hospitals (LTACs) do not report LabID C. difficile, LabID MRSA Bacteremia or SSIs to the N.C. Division of Public Health.

Commentary from Hospitals:

No comments provided.

Refer to the HAI in N.C. Reference Report - October 2012 (rev June 2013) for further explanation of presented statistics (epi.publichealth.nc.gov/cd/hai/figures.html). Data as of March 12, 2015.

Maria Parham Medical Center, Henderson, Vance County

2014 Hospital Survey Information

Hospital Type: **Acute Care Hospital**

Medical Affiliation: No 5,839 Admissions in 2014: Patient Days in 2014: 24,552 Total Number of Beds: 102 Number of ICU Beds: 8 FTE* Infection Preventionists: 1 00 Number of FTEs* per 100 beds: 0.98



Central Line-Associated Bloodstream Infections (CLABSI)

Table 1. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008. Hosp Grp. NC Hospital 뚮 0.3238

95% CI # Obs Line Days Rate # Pred SIR , 1.273 0 Medical/surgical n 1,569 0 2.35 Same , 1.273 YTD Total for Reporting Units 0 1,569 0 2.35 0 Same

Figure 1. Rates and 95% Confidence Intervals, Jan-Dec 2014.

2014

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1.000 central line days

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

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. Rates reported here may be higher than rates based on clinically-defined illness.

Table 2. Rate and SIR. Jan-Dec 2014 in Comparison to National Baseline Data from 2010-2011.

2014

Location	# Obs	Pat Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline	
Facility-wide inpatient	1	23,928	0.04	1.16	0.865	0.043, 4.268	Same	

2014

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 patient days

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



Figure 2. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

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.

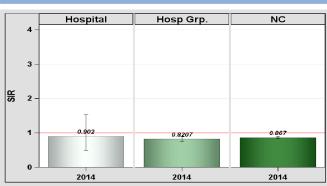


Table 3. Rate and SIR, Jan-Dec 2014 in Comparison to National Baseline Data from 2010-2011.

Location	# Obs	# Pat Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Facility-wide inpatient	12	22,873	5.25	13.3	0.902	0.489, 1.534	Same

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 10,000 patient days.

Figure 3. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

^{*}FTE = Full-time equivalent

Maria Parham Medical Center, Henderson, Vance County

Catheter-Associated Urinary Tract Infections (CAUTI)

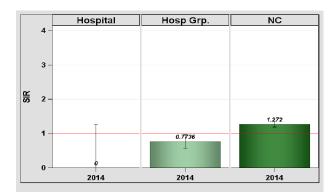


Table 4. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2009.

Type of Unit	# Obs	Cath Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Medical/surgical	0	1,812	0	2.36	0	, 1.272	Same
YTD Total for Reporting Units	0	1,812	0	2.36	0	, 1.272	Same

Figure 4. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 catheter days.

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

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	ntl baseline
Abdominal hysterectomy	0	28	0	0.32			No Conclusion

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

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

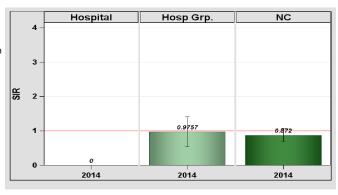


Figure 5. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Surgical Site Infections (SSI) after Colon Surgeries

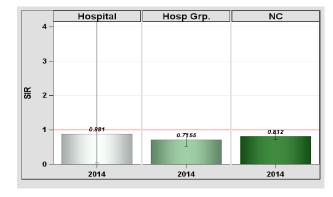


Table 6. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	ntl baseline
Colon surgery	1	32	3.13	1.14	0.881	0.044, 4.346	Same

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

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

Figure 6. SIRs and 95% Confidence Intervals for Colon Surgeries, Jan-Dec 2014.

Commentary from Hospitals:

Martin General Hospital, Williamston, Martin County

2014 Hospital Survey Information

Hospital Type: **Acute Care Hospital**

Medical Affiliation: Nο 1,464 Admissions in 2014: Patient Days in 2014: 4,700 Total Number of Beds: 50 Number of ICU Beds: 6 FTE* Infection Preventionists: 1 00 Number of FTEs* per 100 beds: 2.00



Central Line-Associated Bloodstream Infections (CLABSI)

Table 1. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008. NC Hosp Grp. Hospital 뚮 0.384 0.1891

Obs Line Days Rate # Pred SIR Medical/surgical O 114 n 0.17 No Conclusion YTD Total for Reporting Units 0 0 0.17 No Conclusion 114

Figure 1. Rates and 95% Confidence Intervals, Jan-Dec 2014.

2014

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1.000 central line days

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

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. Rates reported here may be higher than rates based on clinically-defined illness.

Table 2. Rate and SIR, Jan-Dec 2014 in Comparison to National Baseline Data from 2010-2011.

2014

Location	# Obs	Pat Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Facility-wide inpatient	0	7,900	0	0.35			No Conclusion

2014

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 patient days

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

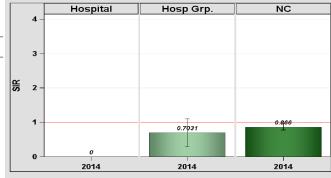
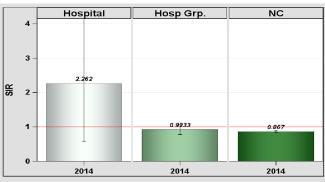


Figure 2. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

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.



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

Compared to ntl baseline Location # Obs # Pat Days Rate # Pred 95% CI 0.575, 6.155 Facility-wide inpatient 2,820 10.64 1.33 2.262 Same

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Table 3. Rate and SIR, Jan-Dec 2014 in Comparison to National Baseline Data from 2010-2011.

Note: Rate per 10,000 patient days

Figure 3. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

^{*}FTE = Full-time equivalent

Martin General Hospital, Williamston, Martin County

Catheter-Associated Urinary Tract Infections (CAUTI)

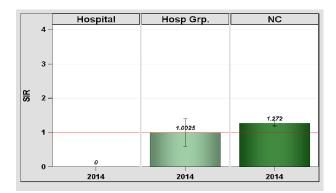


Table 4. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2009.

Type of Unit	# Obs	Cath Days	Rate	# Pred	SIR	95% CI	ntl baseline
Medical/surgical	0	396	0	0.51			No Conclusion
YTD Total for Reporting Units	0	396	0	0.51			No Conclusion

Figure 4. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 catheter days.

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

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	ntl baseline
Abdominal hysterectomy	0	3		0.02			No Conclusion

Note: Infections from deep incisional and/or organ space

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

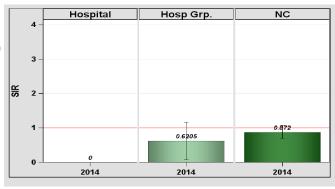


Figure 5. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Surgical Site Infections (SSI) after Colon Surgeries

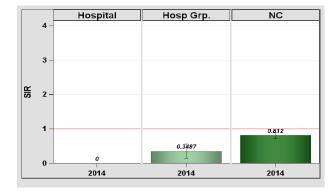


Table 6. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	ntl baseline
Colon surgery	0	3		0.09			No Conclusion

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

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

Figure 6. SIRs and 95% Confidence Intervals for Colon Surgeries, Jan-Dec 2014.

Commentary from Hospitals:

Mcdowell Hospital, Marion, McDowell County

2014 Hospital Survey Information

Hospital Type: **Acute Care Hospital**

Medical Affiliation: No 2,521 Admissions in 2014: Patient Days in 2014: 7,451 Total Number of Beds: 45 Number of ICU Beds: 9 FTE* Infection Preventionists: 0.63 Number of FTEs* per 100 beds: 1.39



*FTE = Full-time equivalent

Central Line-Associated Bloodstream Infections (CLABSI)

Hosp Grp. NC Hospital 뚮 0.384 0.1891 2014 2014 2014

Obs Line Days Rate # Pred SIR Medical/surgical O 243 0 0.36 No Conclusion YTD Total for Reporting Units 0 0 0.36 No Conclusion 243

Table 1. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Figure 1. Rates and 95% Confidence Intervals, Jan-Dec 2014.

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1.000 central line days

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

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. Rates reported here may be higher than rates based on clinically-defined illness.

Table 2. Rate and SIR, Jan-Dec 2014 in Comparison to National Baseline Data from 2010-2011.

Location	# Obs	Pat Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Facility-wide inpatient	0	7,451	0	0.38			No Conclusion

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 patient days

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

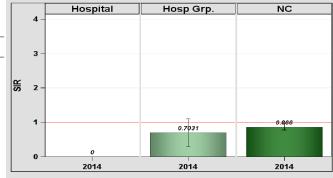
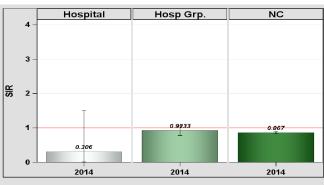


Figure 2. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

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.



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

Table 3. Rate and SIR, Jan-Dec 2014 in Comparison to National Baseline Data from 2010-2011.

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Location	# Obs	# Pat Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Facility-wide inpatient	1	7,369	1.36	3.27	0.306	0.015, 1.507	Same

Note: Rate per 10,000 patient days.

Figure 3. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Mcdowell Hospital, Marion, McDowell County

Catheter-Associated Urinary Tract Infections (CAUTI)

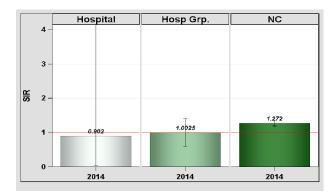


Table 4. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2009.

Type of Unit	# Obs	Cath Day	s Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Medical/surgical	1	853	1.17	1.11	0.902	0.045, 4.448	Same
YTD Total for Reporting Units	1	853	1.17	1.11	0.902	0.045, 4.448	Same

Figure 4. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 catheter days.

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

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	ntl baseline
Abdominal hysterectomy	0	18		0.16			No Conclusion

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

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

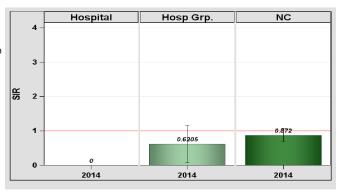


Figure 5. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Surgical Site Infections (SSI) after Colon Surgeries

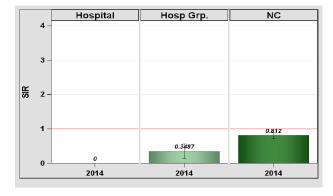


Table 6. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Colon surgery	0	12		0.37			No Conclusion

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

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

Figure 6. SIRs and 95% Confidence Intervals for Colon Surgeries, Jan-Dec 2014.

Commentary from Hospitals:

Novant Health Medical Park Hospital, Winston Salem, Forsyth County

2014 Hospital Survey Information

Hospital Type: Acute Care Hospital

Medical Affiliation: No 865 Admissions in 2014: Patient Days in 2014: 2,741 Total Number of Beds: 22 Number of ICU Beds: 0 FTE* Infection Preventionists: 0.63 Number of FTEs* per 100 beds: 2.84



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. Rates reported here may be higher than rates based on clinically-defined illness.

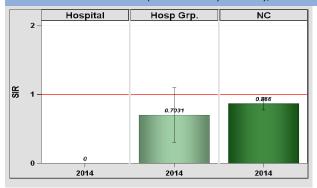


Table 1. Rate and SIR, Jan-Dec 2014 in Comparison to National Baseline Data from 2010-2011.

Location	# Obs	Pat Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Facility-wide inpatient	0	2,741	0	0.1			No Conclusion

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 patient days.

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

Figure 1. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

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 2. Rate and SIR, Jan-Dec 2014 in Comparison to National Baseline Data from 2010-2011.

Location	# Obs	Pat Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Facility-wide inpatient	0	2,741	0	1.5	0	, 2.003	Same

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 10,000 patient days

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

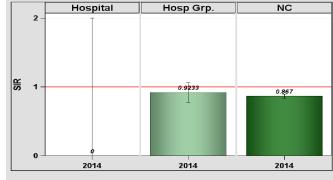


Figure 2. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Hospital NC Hosp Grp 뜴 2014 2014

Figure 3. Rates and 95% Confidence Intervals for Abdominal Hysterectomies, Jan-Dec 2014.

Table 3. Rates and SIRs by Surgery, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Surgical Site Infections (SSI)

Procedure	Abdominal hysterectomy	Colon surgery
# Observed	1	0
# Procedures	80	220
Rate	12.5	0
# Predicted	0.68	6.70
SIR	•	0
95% CI		, 0.447
Compared to ntl b	aseline No Conclusion	Better

Note: SIR. 95%CI = Standardized Infection Ratio, corresponding 95% Confidence Interval.

Note: Red line represents the NHSN baseline experience, 2010-2011. Note: Rate per 100 inpatient surgeries. Rate not calculated if less than 20 inpatient surgeries were performed

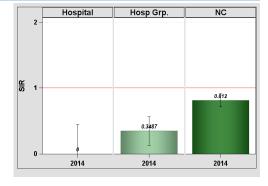


Figure 4. Rates and 95% Confidence Intervals for Colon Surgeries, Jan-Dec 2014.

At Novant Health, the safety of our patients comes first. Our goal is to have the lowest possible infection rates and we continually monitor infection prevention tactics for improvement opportunities. We support transparency in reporting infection rates and make common infection data available on our website. More information can be found under "quality" on NovantHealth.org.

Refer to the HAI in N.C. Reference Report - October 2012 (rev June 2013) for further explanation of presented statistics (epi.publichealth.nc.gov/cd/hai/figures.html). Data as of March 12, 2015

^{*}FTE = Full-time equivalent

Dlp - Harris Regional Hospital, Sylva, Jackson County

2014 Hospital Survey Information

Hospital Type: **Acute Care Hospital**

Medical Affiliation: No 4,125 Admissions in 2014: Patient Days in 2014: 14,688 Total Number of Beds: 86 Number of ICU Beds: 9 FTE* Infection Preventionists: 1.00 Number of FTEs* per 100 beds: 1.16



*FTE = Full-time equivalent

Central Line-Associated Bloodstream Infections (CLABSI)

Hosp Grp. NC Hospital 똜 0.384 0.1891 2014 2014 2014

95% CI # Obs Line Days Rate # Pred SIR , 2.985 O Medical/surgical O 669 0 1 Same , 2.985 YTD Total for Reporting Units 0 669 O O Same 1

Table 1. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Figure 1. Rates and 95% Confidence Intervals, Jan-Dec 2014.

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1.000 central line days

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

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. Rates reported here may be higher than rates based on clinically-defined illness.

Table 2. Rate and SIR, Jan-Dec 2014 in Comparison to National Baseline Data from 2010-2011.

Location	# Obs	Pat Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Facility-wide inpatient	1	14,688	0.07	7 0.93			No Conclusion

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 patient days

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

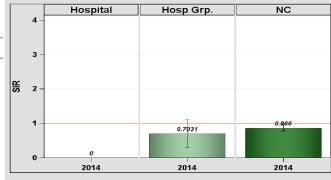


Figure 2. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

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.

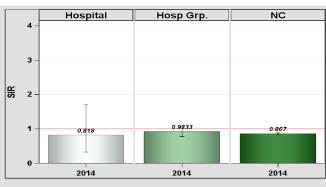


Figure 3. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

1	Table 3. Rate and SIR, Jan-Dec 2014 in Comparison to National Baseline Data from 2010-2011.											
1	Location	# Obs	# Pat Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline				
	Facility-wide inpatient	6	14,642	4.1	7.34	0.818	0.331, 1.701	Same				

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 10,000 patient days.

Dlp - Harris Regional Hospital, Sylva, Jackson County

Catheter-Associated Urinary Tract Infections (CAUTI)

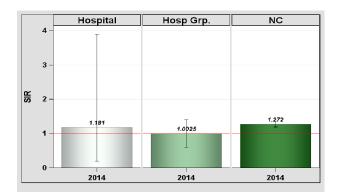


Table 4. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2009.

Type of Unit	# Obs	Cath Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Medical/surgical	2	1,303	1.53	1.69	1.181	0.198, 3.901	Same
YTD Total for Reporting Units	2	1,303	1.53	1.69	1.181	0.198, 3.901	Same

Figure 4. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 catheter days.

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

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	ntl baseline
Abdominal hysterectomy	2	15		0.21			No Conclusion

Note: Infections from deep incisional and/or organ space

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

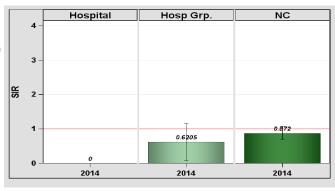


Figure 5. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Surgical Site Infections (SSI) after Colon Surgeries

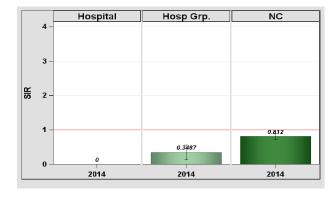


Table 6. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Colon surgery	0	26	0	0.84			No Conclusion

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

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

Figure 6. SIRs and 95% Confidence Intervals for Colon Surgeries, Jan-Dec 2014.

Commentary from Hospitals:

Mission Hospital, Asheville, Buncombe County

2014 Hospital Survey Information

Acute Care Hospital Hospital Type:

Medical Affiliation: Graduate Admissions in 2014: 30.507 Patient Days in 2014: 205,611 Total Number of Beds: 716 Number of ICU Beds: 133 FTE* Infection Preventionists: 7 75 Number of FTEs* per 100 beds: 1.08



*FTE = Full-time equivalent

Central Line-Associated Bloodstream Infections (CLABSI)

NC Hosp Grp. Hospital 뚮 0.3748 0.384

95% CI # Obs Line Days Rate # Pred SIR 0 Medical cardiac 0 1,122 0 2.24 , 1.335 Same Medical/surgical 0.373, 1.687 7 5,471 1.28 8.21 0.853 Same Neonatal Level II/III 2,526 0.486 0.124, 1.322 3 1.19 6.17 Same Neurosurgical O 2.771 0 , 0.432 n 6.93 Retter Pediatric medical/surgical 752 1.33 2.26 0.443 0.022, 2.186 Same Surgical cardiothoracic 0 2,705 0 3.79 0 , 0.791 Better YTD Total for Reporting Units 11 15,347 0.72 29.6 0.372 0.195, 0.646 Better

Table 1. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Figure 1. Rates and 95% Confidence Intervals, Jan-Dec 2014.

2014

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1.000 central line days

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

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. Rates reported here may be higher than rates based on clinically-defined illness.

Table 2. Rate and SIR. Jan-Dec 2014 in Comparison to National Baseline Data from 2010-2011.

2014

Facility-wide inpatient 11 205,611 0.05 17.44 0.631 0.332, 1.096 Same	Location	# Obs	Pat Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
	Facility-wide inpatient	11	205,611	0.05	17.44	0.631	0.332, 1.096	Same

2014

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 patient days

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

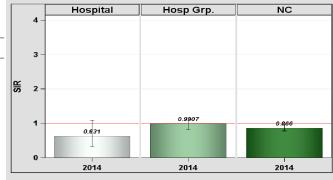
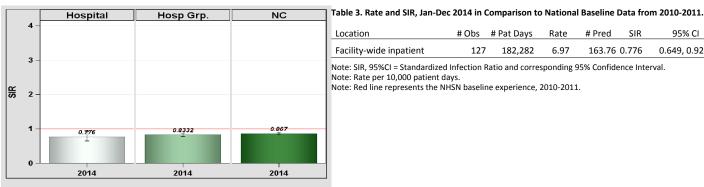


Figure 2. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

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.



Location	# Obs	# Pat Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Facility-wide inpatient	127	182,282	6.97	163.76	0.776	0.649, 0.920	Better

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 10,000 patient days.

Figure 3. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Mission Hospital, Asheville, Buncombe County

Catheter-Associated Urinary Tract Infections (CAUTI)

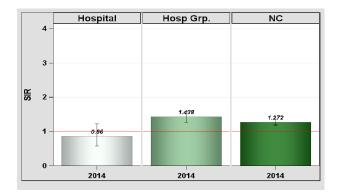


Table 4. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2009.

Type of Unit	# Obs	Cath Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Medical cardiac	3	1,269	2.36	2.54	1.182	0.301, 3.217	Same
Medical/surgical	14	6,389	2.19	8.31	1.686	0.959, 2.761	Same
Neurosurgical	10	3,768	2.65	16.58	0.603	0.306, 1.075	Same
Pediatric medical/surgical	0	148	0	0.41			No Conclusion
Surgical cardiothoracic	1	2,782	0.36	4.73	0.211	0.011, 1.043	Same
YTD Total for Reporting Units	28	14,356	1.95	32.57	0.86	0.583, 1.226	Same

Figure 4. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 catheter days.

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

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Abdominal hysterectomy	3	428	0.7	4.18	0.718	0.183, 1.953	Same

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

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

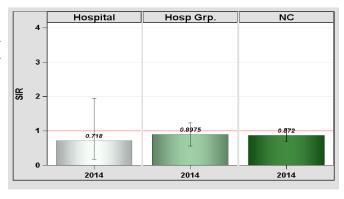


Figure 5. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Surgical Site Infections (SSI) after Colon Surgeries

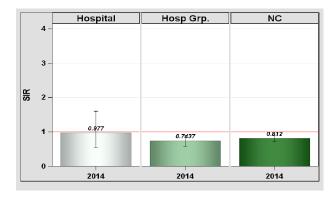


Table 6. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Colon surgery	14	440	3.18	14.33	0.977	0.556, 1.600	Same

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

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

Figure 6. SIRs and 95% Confidence Intervals for Colon Surgeries, Jan-Dec 2014.

Commentary from Hospitals:

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.

Refer to HAI in N.C. Reference Report - October 2012 (rev July 2013) for further explanation of presented statistics (epi.publichealth.nc.gov/cd/hai/figures/hai_jul2013_reference.pdf). Data as of March 12, 2015.

Morehead Memorial Hospital, Eden, Rockingham County

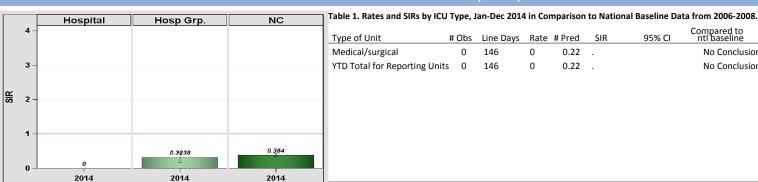
2014 Hospital Survey Information

Hospital Type: **Acute Care Hospital**

Medical Affiliation: No 3,777 Admissions in 2014: Patient Days in 2014: 16,827 Total Number of Beds: 108 Number of ICU Beds: FTE* Infection Preventionists: 1 00 Number of FTEs* per 100 beds: 0.93



Central Line-Associated Bloodstream Infections (CLABSI)



Obs Line Days Rate # Pred SIR Medical/surgical O 146 n 0.22 No Conclusion YTD Total for Reporting Units 0 146 0 0.22 No Conclusion

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1.000 central line days

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

Figure 1. Rates and 95% Confidence Intervals, Jan-Dec 2014.

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. Rates reported here may be higher than rates based on clinically-defined illness.

Table 2. Rate and SIR, Jan-Dec 2014 in Comparison to National Baseline Data from 2010-2011.

Location	# Obs	Pat Days	Rate	# Pred	SIR	95% CI	ntl baseline			
Facility-wide inpatient	0	16,827	0	1.58	0	, 1.894	Same			
Note: SIR 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval										

Note: Rate per 1,000 patient days

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

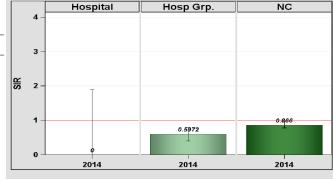


Figure 2. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

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.

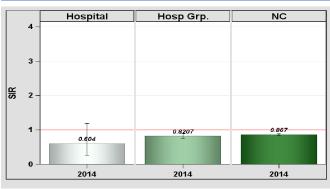


Table 3. Rate and SIR, Jan-Dec 2014 in Comparison to National Baseline Data from 2010-2011.

Location	# Obs	# Pat Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Facility-wide inpatient	7	15,834	4.42	11.59	0.604	0.264, 1.195	Same

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 10,000 patient days.

Figure 3. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

^{*}FTE = Full-time equivalent

Morehead Memorial Hospital, Eden, Rockingham County

Catheter-Associated Urinary Tract Infections (CAUTI)

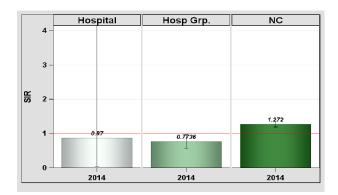


Table 4. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2009.

Type of Unit	# Obs	Cath Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Medical/surgical	1	884	1.13	1.15	0.87	0.044, 4.292	Same
YTD Total for Reporting Units	1	884	1.13	1.15	0.87	0.044, 4.292	Same

Figure 4. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 catheter days.

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

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedure	s Rate	# Pred	SIR	95% CI	ntl baseline
Abdominal hysterectomy	0	19		0.19			No Conclusion

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

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

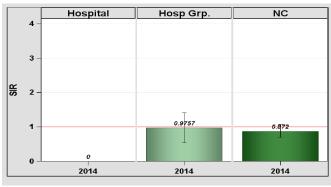


Figure 5. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Surgical Site Infections (SSI) after Colon Surgeries

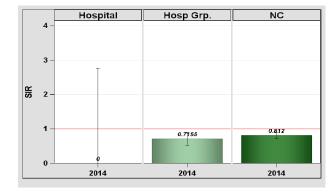


Table 6. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Colon surgery	0	33	0	1.08	0	, 2.767	Same

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

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

Figure 6. SIRs and 95% Confidence Intervals for Colon Surgeries, Jan-Dec 2014.

Commentary from Hospitals:

Moses Cone Hospital, Greensboro, Guilford County

2014 Hospital Survey Information

Hospital Type: **Acute Care Hospital**

Medical Affiliation: Nο 25,081 Admissions in 2014: Patient Days in 2014: 121,636 Total Number of Beds: 536 Number of ICU Beds: 66 FTE* Infection Preventionists: 2.50 Number of FTEs* per 100 beds: 0.47



*FTE = Full-time equivalent

Central Line-Associated Bloodstream Infections (CLABSI)

Hosp Grp. NC Hospital 뚮 0.3748 0.384

95% CI # Obs Line Days Rate # Pred SIR , 0.575 0 Medical cardiac 0 2,605 0 5.21 Better Medical/surgical 0.248 0.012, 1.221 1 2,693 0.37 4.04 Same 2 Neurosurgical 0.626 0.105, 2.068 1,278 1.56 3.2 Same Pediatric medical/surgical O No Conclusion 69 0 0.21 Surgical cardiothoracic 3.64 0 0.824 0 2.598 O Retter YTD Total for Reporting Units 3 9,243 0.32 16.29 0.184 0.047, 0.501 Better

Table 1. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Figure 1. Rates and 95% Confidence Intervals, Jan-Dec 2014.

2014

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1.000 central line days

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

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. Rates reported here may be higher than rates based on clinically-defined illness.

Table 2. Rate and SIR, Jan-Dec 2014 in Comparison to National Baseline Data from 2010-2011.

2014

Location	# Obs	Pat Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Facility-wide inpatient	2	121,609	0.02	8.9	0.225	0.038, 0.743	Better

2014

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 patient days

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

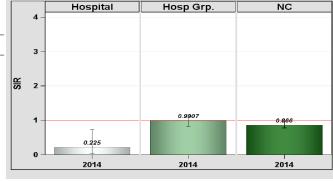


Figure 2. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

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.



Location	# Obs	# Pat Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Facility-wide inpatient	68	121.609	5.59	94.76	0.718	0.562. 0.904	Better

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Table 3. Rate and SIR, Jan-Dec 2014 in Comparison to National Baseline Data from 2010-2011.

Note: Rate per 10,000 patient days.

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

Refer to HAI in N.C. Reference Report - October 2012 (rev July 2013) for further explanation of presented statistics (epi.publichealth.nc.gov/cd/hai/figures/hai jul2013 reference.pdf). Data as of March 12, 2015.

Figure 3. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Moses Cone Hospital, Greensboro, Guilford County

Catheter-Associated Urinary Tract Infections (CAUTI)

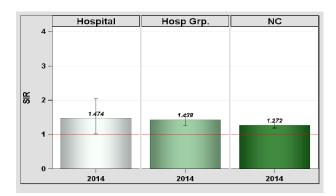


Table 4. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2009.

Type of Unit	# Obs	Cath Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Medical cardiac	11	2,245	4.9	4.49	2.45	1.288, 4.258	Worse
Medical/surgical	6	2,691	2.23	3.23	1.858	0.753, 3.865	Same
Neurosurgical	12	2,106	5.7	9.27	1.295	0.702, 2.202	Same
Pediatric medical/surgical	0	45		0.13			No Conclusion
Surgical cardiothoracic	3	2,704	1.11	4.6	0.653	0.166, 1.776	Same
YTD Total for Reporting Units	32	9,791	3.27	21.71	1.474	1.026, 2.056	Worse

Figure 4. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 catheter days.

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

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	ntl baseline
Abdominal hysterectomy	0	2		0.02			No Conclusion

Note: Infections from deep incisional and/or organ space

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

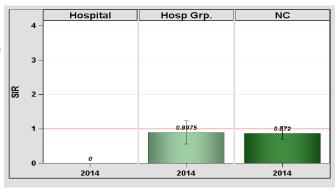


Figure 5. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Surgical Site Infections (SSI) after Colon Surgeries

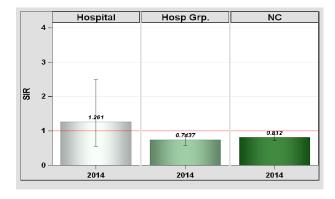


Table 6. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Colon surgery	7	163	4.29	5.55	1.261	0.552, 2.495	Same

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

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

Figure 6. SIRs and 95% Confidence Intervals for Colon Surgeries, Jan-Dec 2014.

Commentary from Hospitals:

Cone Health is committed to preventing Healthcare Associated Infections. We have dedicated teams of experts focused on process improvements to improve our patient outcomes. Please contact Cone Health Infection Prevention if you would like further information.

Refer to HAI in N.C. Reference Report - October 2012 (rev July 2013) for further explanation of presented statistics (epi.publichealth.nc.gov/cd/hai/figures/hai_jul2013_reference.pdf). Data as of March 12, 2015.

Murphy Medical Center, Murphy, Cherokee County

2014 Hospital Survey Information

Hospital Type: **Acute Care Hospital**

Medical Affiliation: Nο 1,985 Admissions in 2014: Patient Days in 2014: 6,326 Total Number of Beds: 63 Number of ICU Beds: 6 FTE* Infection Preventionists: 1.00 Number of FTEs* per 100 beds: 1.59



*FTE = Full-time equivalent

Central Line-Associated Bloodstream Infections (CLABSI)

Table 1. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008. Hosp Grp. NC Hospital 똜 0.384 0.1891 2014 2014 2014

Obs Line Days Rate # Pred SIR Medical/surgical O 144 n 0.22 No Conclusion YTD Total for Reporting Units 0 0.22 No Conclusion 0 144

Figure 1. Rates and 95% Confidence Intervals, Jan-Dec 2014.

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1.000 central line days

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

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. Rates reported here may be higher than rates based on clinically-defined illness.

Table 2. Rate and SIR, Jan-Dec 2014 in Comparison to National Baseline Data from 2010-2011.

Location	# Obs	Pat Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Facility-wide inpatient	0	6,713	0	0.24			No Conclusion

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 patient days

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

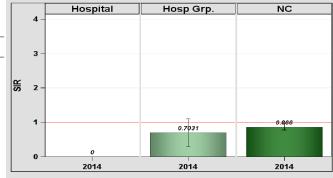
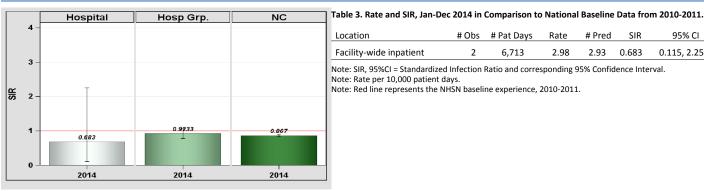


Figure 2. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

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.



Location	# Obs	# Pat Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Facility-wide inpatient	2	6,713	2.98	2.93	0.683	0.115, 2.257	Same

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 10,000 patient days.

Figure 3. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Murphy Medical Center, Murphy, Cherokee County

Catheter-Associated Urinary Tract Infections (CAUTI)

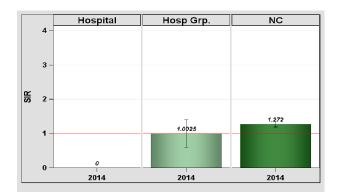


Table 4. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2009.

Type of Unit	# Obs	Cath Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Medical/surgical	0	513	0	0.67			No Conclusion
YTD Total for Reporting Units	0	513	0	0.67			No Conclusion

Figure 4. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 catheter days.

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

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	ntl baseline
Abdominal hysterectomy	0	16		0.18			No Conclusion

Note: Infections from deep incisional and/or organ space

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

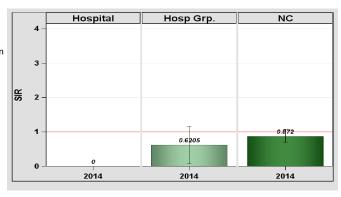


Figure 5. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Surgical Site Infections (SSI) after Colon Surgeries

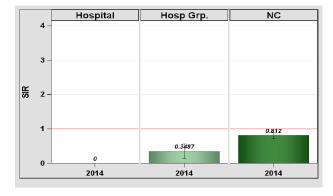


Table 6. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	ntl baseline
Colon surgery	1	11		0.35			No Conclusion

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

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

Figure 6. SIRs and 95% Confidence Intervals for Colon Surgeries, Jan-Dec 2014.

Commentary from Hospitals:

Nash Health Care Systems, Rocky Mount, Nash County

2014 Hospital Survey Information

Hospital Type: **Acute Care Hospital**

Medical Affiliation: No Admissions in 2014: 11,413 Patient Days in 2014: 51,043 Total Number of Beds: 177 Number of ICU Beds: 27 FTE* Infection Preventionists: 2.00 Number of FTEs* per 100 beds: 1.13

Hospital

2014



*FTE = Full-time equivalent

뚮

Central Line-Associated Bloodstream Infections (CLABSI)

Table 1. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008. Hosp Grp. NC

2014

95% CI # Obs Line Days Rate # Pred SIR 0.274 Medical/surgical 1 2,436 0.41 3.65 0.014, 1.350 Same 9 Neonatal Level II/III 0 0.01 No Conclusion YTD Total for Reporting Units 3.66 0.273 1 2,445 0.41 0.014, 1.346 Same

Figure 1. Rates and 95% Confidence Intervals, Jan-Dec 2014.

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1.000 central line days

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

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. Rates reported here may be higher than rates based on clinically-defined illness.

Table 2. Rate and SIR, Jan-Dec 2014 in Comparison to National Baseline Data from 2010-2011.

0.6397

2014

Facility-wide inpatient 2 50,729 0.04 3.29 0.607 0.102, 2.006 Same	Location	# Obs	Pat Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
	Facility-wide inpatient	2	50,729	0.04	1 3.29	0.607	0.102, 2.006	Same

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 patient days

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

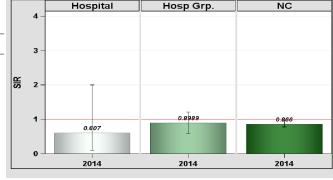


Figure 2. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

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.

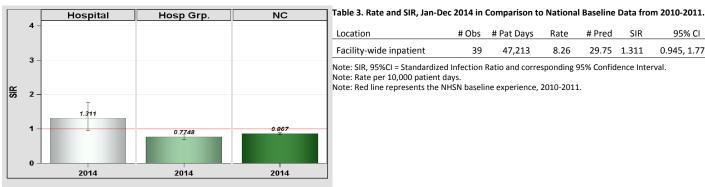


Figure 3. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Location		# Pat Days			SIR	95% CI	Compared to ntl baseline
Facility-wide inpatient	39	47,213	8.26	29.75	1.311	0.945, 1.774	Same

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 10,000 patient days.

Nash Health Care Systems, Rocky Mount, Nash County

Catheter-Associated Urinary Tract Infections (CAUTI)

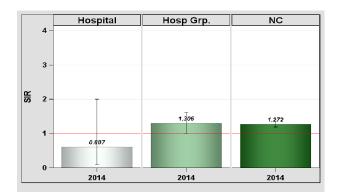


Table 4. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2009.

Type of Unit	# Obs	Cath Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline	
Medical/surgical	2	2,745	0.73	3.29	0.607	0.102, 2.006	Same	
YTD Total for Reporting Units	2	2,745	0.73	3.29	0.607	0.102, 2.006	Same	

Figure 4. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 catheter days.

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

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Abdominal hysterectomy	3	138	2.17	1.36	2.201	0.560, 5.990	Same

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

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

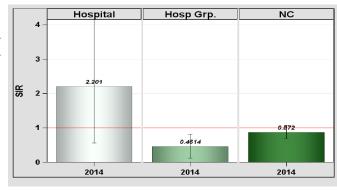


Figure 5. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Surgical Site Infections (SSI) after Colon Surgeries

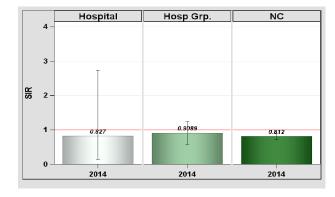


Table 6. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	ntl baseline
Colon surgery	2	72	2.78	2.42	0.827	0.139, 2.732	Same

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

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

Figure 6. SIRs and 95% Confidence Intervals for Colon Surgeries, Jan-Dec 2014.

Commentary from Hospitals:

New Hanover Regional Medical Center, Wilmington, New Hanover County

2014 Hospital Survey Information

Hospital Type: **Acute Care Hospital**

Medical Affiliation: Major Admissions in 2014: 38,597 Patient Days in 2014: 189,422 Total Number of Beds: 652 Number of ICU Beds: 112 FTE* Infection Preventionists: 4.00 Number of FTEs* per 100 beds: 0.61



*FTE = Full-time equivalent

Central Line-Associated Bloodstream Infections (CLABSI)

NC Hospital Hosp Grp. 뚮 0.3748 0.384

95% CI # Obs Line Days Rate # Pred SIR , 0.605 Medical O 0 1,905 n 4.95 Better Medical cardiac 0.065, 1.277 2 2.587 0.77 5.17 0.387 Same Medical/surgical O 0.29 No Conclusion 138 n Neonatal Level II/III 0.188 0.009. 0.928 Retter 1 2.259 0.445.32 Pediatric medical/surgical O 174 n 0.52 No Conclusion 2,659 1.13 6.12 0.491 0.125, 1.335 Same Surgical cardiothoracic 1 1,831 0.55 2.56 0.39 0.020, 1.924 Same YTD Total for Reporting Units 7 11.553 0.61 24.94 0.281 0.123. 0.555 Better

Table 1. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Figure 1. Rates and 95% Confidence Intervals, Jan-Dec 2014.

2014

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1.000 central line days

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

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. Rates reported here may be higher than rates based on clinically-defined illness.

Table 2. Rate and SIR, Jan-Dec 2014 in Comparison to National Baseline Data from 2010-2011.

2014

Location	# Obs	Pat Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline	
Facility-wide inpatient	14	177,058	0.08	20.32	0.689	0.392, 1.129	Same	

2014

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1.000 patient days

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

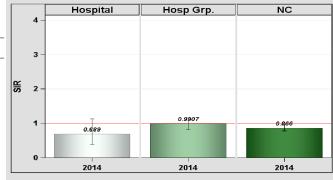


Figure 2. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

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.

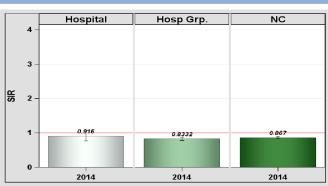


Table 3. Rate and SIR, Jan-Dec 2014 in Comparison to National Baseline Data from 2010-2011.

Location	# Obs	# Pat Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Facility-wide inpatient	136	155,795	8.73	148.45	0.916	0.772, 1.080	Same

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 10,000 patient days.

Figure 3. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

New Hanover Regional Medical Center, Wilmington, New Hanover County

Catheter-Associated Urinary Tract Infections (CAUTI)

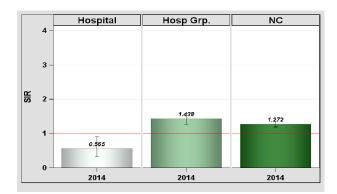


Table 4. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2009.

Type of Unit	# Obs	Cath Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Medical	3	2,233	1.34	5.14	0.584	0.149, 1.590	Same
Medical cardiac	8	3,583	2.23	7.17	1.116	0.518, 2.120	Same
Medical/surgical	0	275	0	0.63			No Conclusion
Pediatric medical/surgical	0	61	0	0.17			No Conclusion
Surgical	4	4,059	0.99	10.55	0.379	0.120, 0.914	Better
Surgical cardiothoracic	0	1,698	0	2.89	0	, 1.038	Same
YTD Total for Reporting Units	15	11,909	1.26	26.55	0.565	0.328, 0.911	Better

Figure 4. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 catheter days.

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

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Rates and SIRs. Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Abdominal hysterectomy	2	517	0.39	4.98	0.401	0.067, 1.326	Same

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

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

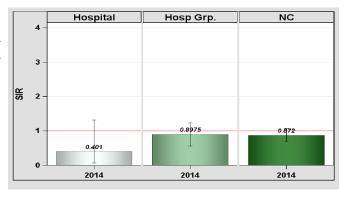


Figure 5. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Surgical Site Infections (SSI) after Colon Surgeries



Table 6. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	ntl baseline
Colon surgery	2	433	0.46	13.98	0.143	0.024, 0.473	Better

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

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

Figure 6. SIRs and 95% Confidence Intervals for Colon Surgeries, Jan-Dec 2014.

Commentary from Hospitals:

At New Hanover Regional Medical Center we take patient safety and quality care extremely seriously. We implement the latest science-based protocols to prevent hospital-acquired infection. We study and adopt best practices, evidence-based medicine and recommendations from national agencies to deliver the best possible outcomes for our patients. We encourage patients and their families to take an active role in helping prevent infections. Our team of infection preventionists works with all staff to ensure they are focused on delivering the highest quality of care possible. We are proud of our success and our ongoing quest to keep preventable infections to an absolute minimum.

Refer to HAI in N.C. Reference Report - October 2012 (rev July 2013) for further explanation of presented statistics (epi.publichealth.nc.gov/cd/hai/figures/hai_jul2013_reference.pdf). Data as of March 12, 2015.

North Carolina Specialty Hospital, Durham, Durham County

2013 Hospital Survey Information

Hospital Type: Acute Care Hospital

Admissions in 2013: 2,041 Patient Days in 2013: 3,573 Total Number of Beds: 18 FTE* Infection Preventionists: 0.70 Number of FTEs* per 100 beds: 3.89



*FTE = Full-time equivalent

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

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.

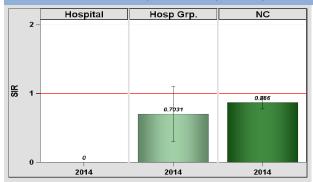


Table 1. Rate and SIR, Jan-Dec 2014 in Comparison to National Baseline Data from 2010-2011. Compared to ntl baseline # Obs Pat Days Rate # Pred SIR Facility-wide inpatient No Conclusion 4,557 0.16

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 patient days.

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

Figure 1. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

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 2. Rate and SIR, Jan-Dec 2014 in Comparison to National Baseline Data from 2010-2011.

Location	# Obs	Pat Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Facility-wide inpatient	1	4,557	2.19	1.99	0.503	30.025, 2.48	2 Same

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 10,000 patient days

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

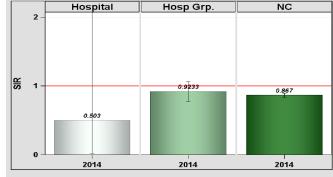


Figure 2. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Other Healthcare-Associated Infections (HAIs)

Specialty acute care hospitals do not report CLABSIs, CAUTIS, or SSIs to the N.C. Division of Public Health.

Commentary from Hospitals:

No comments provided.

Refer to the HAI in N.C. Reference Report - October 2012 (rev June 2013) for further explanation of presented statistics (epi.publichealth.nc.gov/cd/hai/figures.html). Data as of March 12, 2015.

Northern Hospital Of Surry County, Mount Airy, Surry County

2014 Hospital Survey Information

Hospital Type: **Acute Care Hospital**

Medical Affiliation: No 4,221 Admissions in 2014: Patient Days in 2014: 13,583 Total Number of Beds: 100 Number of ICU Beds: 10 FTE* Infection Preventionists: 1.00 Number of FTEs* per 100 beds: 1.00



*FTE = Full-time equivalent

Central Line-Associated Bloodstream Infections (CLABSI)

Table 1. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008. Hosp Grp. NC Hospital 뚮 0.3238 2014 2014 2014

Obs Line Days Rate # Pred SIR 0.54 Medical/surgical O 358 n No Conclusion YTD Total for Reporting Units 0 358 O 0.54 No Conclusion

Figure 1. Rates and 95% Confidence Intervals, Jan-Dec 2014.

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1.000 central line days

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

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. Rates reported here may be higher than rates based on clinically-defined illness.

Table 2. Rate and SIR, Jan-Dec 2014 in Comparison to National Baseline Data from 2010-2011.

Location	# Obs	Pat Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Facility-wide inpatient	0	15,723	0	0.86			No Conclusion

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 patient days

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

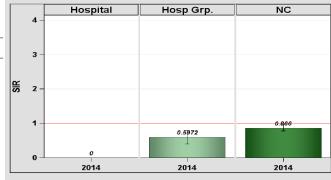


Figure 2. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

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.

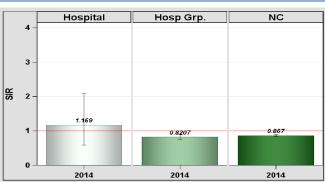


Table 3. Rate and SIR, Jan-Dec 2014 in Comparison to National Baseline Data from 2010-2011.

Location	# Obs	# Pat Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Facility-wide inpatient	10	15,070	6.64	8.55	1.169	0.594, 2.084	Same

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 10,000 patient days.

Figure 3. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Northern Hospital Of Surry County, Mount Airy, Surry County

Catheter-Associated Urinary Tract Infections (CAUTI)

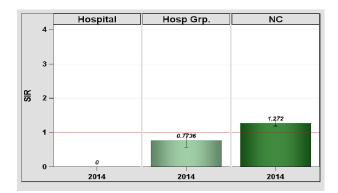


Table 4. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2009.

Type of Unit	# Obs	Cath Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Medical/surgical	0	763	0	0.99			No Conclusion
YTD Total for Reporting Units	0	763	0	0.99			No Conclusion

Figure 4. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 catheter days.

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

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Abdominal hysterectomy	1	67	1.49	0.63			No Conclusion

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

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

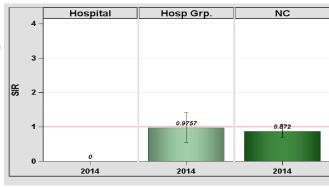


Figure 5. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Surgical Site Infections (SSI) after Colon Surgeries

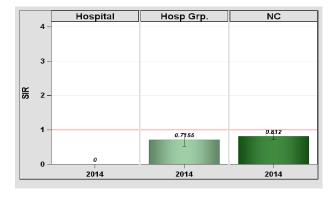


Table 6. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	ntl baseline
Colon surgery	2	33	6.06	0.98			No Conclusion

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

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

Figure 6. SIRs and 95% Confidence Intervals for Colon Surgeries, Jan-Dec 2014.

Commentary from Hospitals:

Novant Health Charlotte Orthopedic Hospital, Charlotte, Mecklenburg County

2014 Hospital Survey Information

Hospital Type: Specialty Acute Care Hospital

Admissions in 2014: 822 Patient Davs in 2014: 3.028 Total Number of Beds: 80 FTE* Infection Preventionists: 1.00 Number of FTEs* per 100 beds: 1.25



*FTE = Full-time equivalent

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

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.

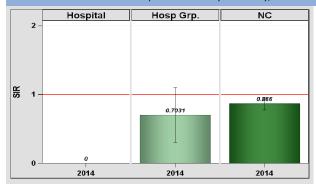


Table 1. Rate and SIR, Jan-Dec 2014 in Comparison to National Baseline Data from 2010-2011. Compared to ntl baseline # Obs Pat Days Rate # Pred SIR Facility-wide inpatient 3,028 No Conclusion 0.11

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 patient days.

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

Figure 1. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

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 2. Rate and SIR, Jan-Dec 2014 in Comparison to National Baseline Data from 2010-2011.

Location	# Obs	Pat Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Facility-wide inpatient	0	3,028	0	1.65	0	, 1.813	Same

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 10,000 patient days

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

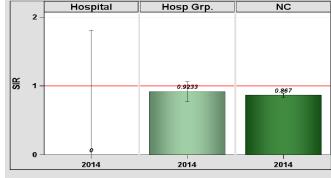


Figure 2. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Other Healthcare-Associated Infections (HAIs)

Specialty acute care hospitals do not report CLABSIs, CAUTIS, or SSIs to the N.C. Division of Public Health.

Commentary from Hospitals:

No comments provided.

Refer to the HAI in N.C. Reference Report - October 2012 (rev June 2013) for further explanation of presented statistics (epi.publichealth.nc.gov/cd/hai/figures.html). Data as of March 12, 2015.

Novant Health Huntersville Medical Center, Huntersville, Mecklenburg County

2014 Hospital Survey Information

Hospital Type: **Acute Care Hospital**

Medical Affiliation: No 6,314 Admissions in 2014: Patient Days in 2014: 23,115 Total Number of Beds: 73 Number of ICU Beds: 6 FTE* Infection Preventionists: 0 80 Number of FTEs* per 100 beds: 1.10



*FTE = Full-time equivalent

Central Line-Associated Bloodstream Infections (CLABSI)

NC Hosp Grp. Hospital 뚮 0.384 0.1891 2014 2014 2014

95% CI # Obs Line Days Rate # Pred SIR 0.951 Medical/surgical 1 701 1.43 1.05 0.048, 4.690 Same 9 Neonatal Level II/III O 0.01 No Conclusion YTD Total for Reporting Units 710 1.07 0.938 0.047, 4.627 1 1.41 Same

Table 1. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Figure 1. Rates and 95% Confidence Intervals, Jan-Dec 2014.

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1.000 central line days

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

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. Rates reported here may be higher than rates based on clinically-defined illness.

Table 2. Rate and SIR, Jan-Dec 2014 in Comparison to National Baseline Data from 2010-2011.

Location	# Obs	Pat Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Facility-wide inpatient	0	23,115	0	1.07	0	, 2.803	Same

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 patient days

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

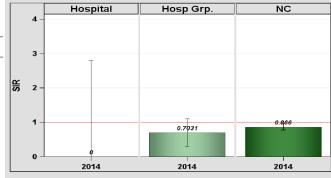


Figure 2. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

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.

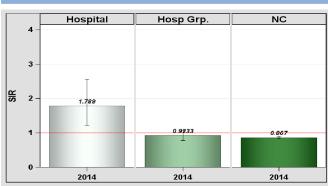


Table 3. Rate and SIR, Jan-Dec 2014 in Comparison to National Baseline Data from 2010-2011.

Location	# Obs	# Pat Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Facility-wide inpatient	28	22,204	12.61	15.65	1.789	1.212, 2.552	Worse

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 10,000 patient days.

Figure 3. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Novant Health Huntersville Medical Center, Huntersville, Mecklenburg County

Catheter-Associated Urinary Tract Infections (CAUTI)

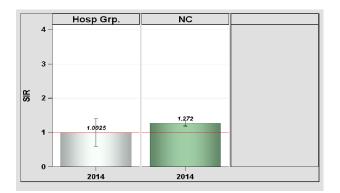


Table 4. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2009.

Type of Unit	# Obs	Cath Days Rate	# Pred	SIR	95% CI	ntl baseline
--------------	-------	----------------	--------	-----	--------	--------------

Figure 4. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 catheter days.

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

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	ntl baseline
Abdominal hysterectomy	0	40	0	0.34			No Conclusion

Note: Infections from deep incisional and/or organ space

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

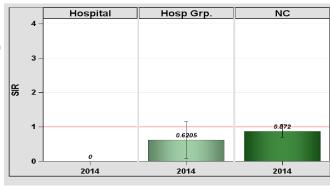


Figure 5. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Surgical Site Infections (SSI) after Colon Surgeries

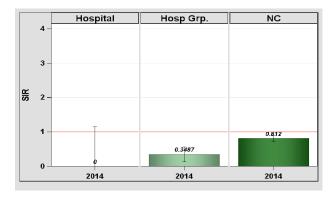


Table 6. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Colon surgery	0	82	0	2.6	0	, 1.153	Same

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

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

Figure 6. SIRs and 95% Confidence Intervals for Colon Surgeries, Jan-Dec 2014.

Commentary from Hospitals:

At Novant Health, the safety of our patients comes first. Our goal is to have the lowest possible infection rates and we continually monitor infection prevention tactics for improvement opportunities. We support transparency in reporting infection rates and make common infection data available on our website. More information can be found under "quality" on NovantHealth.org.

Refer to HAI in N.C. Reference Report - October 2012 (rev July 2013) for further explanation of presented statistics (epi.publichealth.nc.gov/cd/hai/figures/hai_jul2013_reference.pdf). Data as of March 12, 2015.

Novant Health Matthews Medical Center, Matthews, Mecklenburg County

2014 Hospital Survey Information

Hospital Type: **Acute Care Hospital**

Medical Affiliation: No 8,708 Admissions in 2014: Patient Days in 2014: 32,402 Total Number of Beds: 137 Number of ICU Beds: 18 FTE* Infection Preventionists: 1.00 Number of FTEs* per 100 beds: 0.73



*FTE = Full-time equivalent

Central Line-Associated Bloodstream Infections (CLABSI)

NC Hosp Grp. Hospital 뚮 0.3238 2014 2014 2014

95% CI # Obs Line Days Rate # Pred SIR 1.64 0 Medical/surgical n 1,093 n , 1.827 Same Neonatal Level II/III O 0 0.06 No Conclusion 54 YTD Total for Reporting Units 0 0 1.7 0 1,147 , 1.762 Same

Table 1. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Figure 1. Rates and 95% Confidence Intervals, Jan-Dec 2014.

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1.000 central line days

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

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. Rates reported here may be higher than rates based on clinically-defined illness.

Table 2. Rate and SIR, Jan-Dec 2014 in Comparison to National Baseline Data from 2010-2011.

Location	# Obs	Pat Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline	
Facility-wide inpatient	2	33,650	0.06	1.98	1.008	0.169, 3.331	Same	

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 patient days

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

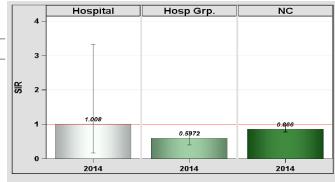
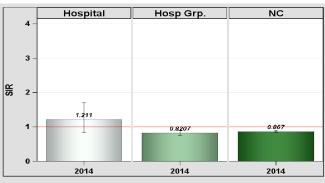


Figure 2. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

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.



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

Compared to ntl baseline Location # Obs # Pat Days Rate # Pred 95% CI 0.832, 1.707 Facility-wide inpatient 30 32,402 9.26 24.77 1.211 Same

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Table 3. Rate and SIR, Jan-Dec 2014 in Comparison to National Baseline Data from 2010-2011.

Note: Rate per 10,000 patient days

Figure 3. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Novant Health Matthews Medical Center, Matthews, Mecklenburg County

Catheter-Associated Urinary Tract Infections (CAUTI)

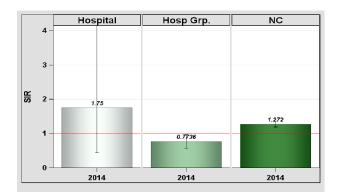


Table 4. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2009.

Type of Unit	# Obs	Cath Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Medical/surgical	3	1,319	2.27	1.71	1.75	0.445, 4.762	Same
YTD Total for Reporting Units	3	1,319	2.27	1.71	1.75	0.445, 4.762	Same

Figure 4. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 catheter days.

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

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	ntl baseline
Abdominal hysterectomy	1	51	1.96	0.47			No Conclusion

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

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

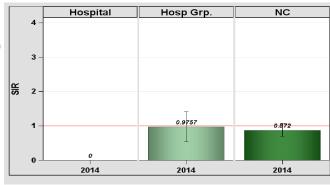


Figure 5. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Surgical Site Infections (SSI) after Colon Surgeries

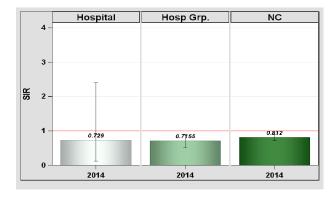


Table 6. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Colon surgery	2	87	2.3	2.74	0.729	0.122, 2.409	Same

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

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

Figure 6. SIRs and 95% Confidence Intervals for Colon Surgeries, Jan-Dec 2014.

Commentary from Hospitals:

At Novant Health, the safety of our patients comes first. Our goal is to have the lowest possible infection rates and we continually monitor infection prevention tactics for improvement opportunities. We support transparency in reporting infection rates and make common infection data available on our website. More information can be found under "quality" on NovantHealth.org.

Refer to HAI in N.C. Reference Report - October 2012 (rev July 2013) for further explanation of presented statistics (epi.publichealth.nc.gov/cd/hai/figures/hai_jul2013_reference.pdf). Data as of March 12, 2015.

Novant Health Presbyterian Medical Center, Charlotte, Mecklenburg County

2014 Hospital Survey Information

Hospital Type: **Acute Care Hospital**

Medical Affiliation: No 31,185 Admissions in 2014: Patient Days in 2014: 150,627 Total Number of Beds: 702 Number of ICU Beds: 86 FTE* Infection Preventionists: 4.00 Number of FTEs* per 100 beds: 0.57



*FTE = Full-time equivalent

Central Line-Associated Bloodstream Infections (CLABSI)

NC Hosp Grp. Hospital 뚮 0.3748 0.384 2014 2014 2014

95% CI # Obs Line Days Rate # Pred SIR Medical cardiac 3 2,306 1.3 4.61 0.65 0.165, 1.770 Same 1.285 Medical/surgical 0.521, 2.673 6 3,113 1.93 4.67 Same Neonatal Level III 7 6.01 1.164 0.509, 2.303 2.470 2.83 Same Neurosurgical O 427 1.07 0 . 2.806 n Same Pediatric medical/surgical O 301 O 0.9 No Conclusion Surgical cardiothoracic 0 536 0 0.75 No Conclusion YTD Total for Reporting Units 16 9,153 1.75 18.01 0.888 0.526, 1.412 Same

Table 1. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Figure 1. Rates and 95% Confidence Intervals, Jan-Dec 2014.

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1.000 central line days

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

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. Rates reported here may be higher than rates based on clinically-defined illness.

Table 2. Rate and SIR, Jan-Dec 2014 in Comparison to National Baseline Data from 2010-2011.

Location	# Obs	Pat Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Facility-wide inpatient	22	147,737	0.15	11.35	1.938	1.245, 2.886	Worse

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 patient days

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

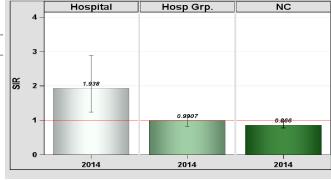


Figure 2. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

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.

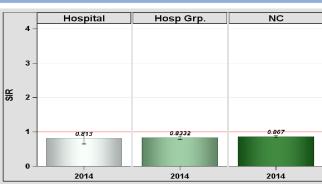


Table 3. Rate and SIR, Jan-Dec 2014 in Comparison to National Baseline Data from 2010-2011.

Location	# Obs	# Pat Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Facility-wide inpatient	80	135,598	5.9	98.4	0.813	0.649, 1.007	Same

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 10,000 patient days.

Figure 3. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Novant Health Presbyterian Medical Center, Charlotte, Mecklenburg County

Catheter-Associated Urinary Tract Infections (CAUTI)

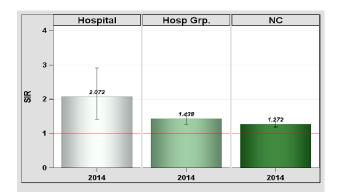


Table 4. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2009.

Type of Unit	# Obs	Cath Days	Rate	# Pred	SIR	95% CI	ntl baseline
Medical cardiac	10	2,426	4.12	4.85	2.061	1.047, 3.674	Worse
Medical/surgical	16	3,481	4.6	4.53	3.536	2.093, 5.619	Worse
Neurosurgical	3	774	3.88	3.41	0.881	0.224, 2.397	Same
Pediatric medical/surgical	0	181	0	0.51			No Conclusion
Surgical cardiothoracic	1	701	1.43	1.19	0.839	0.042, 4.139	Same
YTD Total for Reporting Units	30	7,563	3.97	14.48	2.072	1.423, 2.920	Worse

Figure 4. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 catheter days.

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

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Abdominal hysterectomy	7	350	2	3.43	2.042	0.893, 4.039	Same

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

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

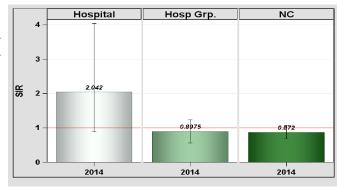


Figure 5. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Surgical Site Infections (SSI) after Colon Surgeries



Table 6. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	ntl baseline
Colon surgery	6	295	2.03	9.52	0.63	0.255, 1.310	Same

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

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

Figure 6. SIRs and 95% Confidence Intervals for Colon Surgeries, Jan-Dec 2014.

Commentary from Hospitals:

At Novant Health, the safety of our patients comes first. Our goal is to have the lowest possible infection rates and we continually monitor infection prevention tactics for improvement opportunities. We support transparency in reporting infection rates and make common infection data available on our website. More information can be found under "quality" on NovantHealth.org.

Refer to HAI in N.C. Reference Report - October 2012 (rev July 2013) for further explanation of presented statistics (epi.publichealth.nc.gov/cd/hai/figures/hai_jul2013_reference.pdf). Data as of March 12, 2015.

Onslow Memorial Hospital, Jacksonville, Onslow County

2014 Hospital Survey Information

Hospital Type: **Acute Care Hospital**

Medical Affiliation: Nο 8,912 Admissions in 2014: Patient Days in 2014: 33,107 Total Number of Beds: 162 Number of ICU Beds: 30 FTE* Infection Preventionists: 1 50 Number of FTEs* per 100 beds: 0.93



*FTE = Full-time equivalent

Central Line-Associated Bloodstream Infections (CLABSI)

NC Hosp Grp. Hospital 뚮 0.3238 2014 2014 2014

95% CI # Obs Line Days Rate # Pred SIR O 0 Medical/surgical 1,105 1.66 , 1.807 Same Neonatal Level III O 0 O No Conclusion YTD Total for Reporting Units 0 1.66 0 1,105 , 1.807 Same

Table 1. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Figure 1. Rates and 95% Confidence Intervals, Jan-Dec 2014.

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1.000 central line days

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

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

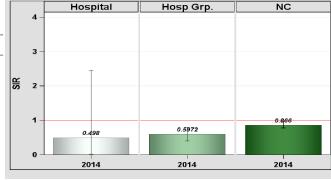
Note: LabID events are based on positive laboratory results only; not all LabID events represent true illnesses. Rates reported here may be higher than rates based on clinically-defined illness.

Table 2. Rate and SIR, Jan-Dec 2014 in Comparison to National Baseline Data from 2010-2011.

Location	# Obs	Pat Days	Rate	# Pred	SIR	95% CI	ntl baseline				
Facility-wide inpatient	1	33,107	0.03	3 2.01	0.498	0.025, 2.458	Same				
Note: SIP_05%CI - Standardized Infection Patio and corresponding 05% Confidence Interval											

Note: Rate per 1.000 patient days.

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



22.61 1.15

0.767, 1.661

Same

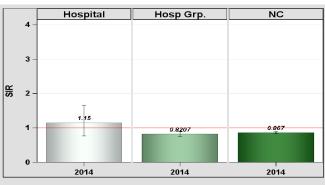
Figure 2. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

9.47

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.

Facility-wide inpatient



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

26

Compared to ntl baseline Location # Obs # Pat Days Rate # Pred 95% CI

Table 3. Rate and SIR, Jan-Dec 2014 in Comparison to National Baseline Data from 2010-2011.

27,466

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 10,000 patient days

Figure 3. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Onslow Memorial Hospital, Jacksonville, Onslow County

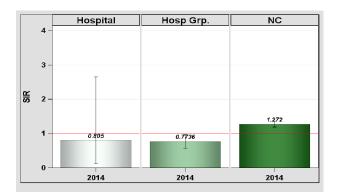


Table 4. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2009.

Type of Unit	# Obs	Cath Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Medical/surgical	2	1,910	1.05	2.48	0.805	0.135, 2.661	Same
YTD Total for Reporting Units	2	1,910	1.05	2.48	0.805	0.135, 2.661	Same

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval. Note: Rate per 1,000 catheter days.

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

Figure 4. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Abdominal hysterectomy	0	15		0.13			No Conclusion

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

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

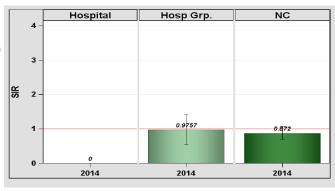


Figure 5. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Surgical Site Infections (SSI) after Colon Surgeries

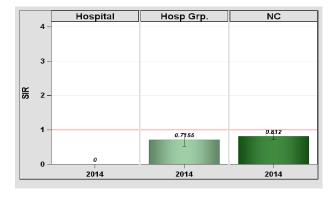


Table 6. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Colon surgery	0	18		0.56			No Conclusion

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

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

Figure 6. SIRs and 95% Confidence Intervals for Colon Surgeries, Jan-Dec 2014.

Commentary from Hospitals:

Pardee Hospital, Hendersonville, Henderson County

2014 Hospital Survey Information

Hospital Type: **Acute Care Hospital**

Medical Affiliation: Nο 6,966 Admissions in 2014: Patient Days in 2014: 33,844 Total Number of Beds: 138 Number of ICU Beds: 8 FTE* Infection Preventionists: 1.00 Number of FTEs* per 100 beds: 0.72



*FTE = Full-time equivalent

뚮

Central Line-Associated Bloodstream Infections (CLABSI)

Table 1. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008. Hosp Grp. NC Hospital 0.3238

95% CI # Obs Line Days Rate # Pred SIR Medical/surgical 1 233 4.29 0.35 No Conclusion YTD Total for Reporting Units 1 233 0.35 No Conclusion 4.29

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1.000 central line days

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

Figure 1. Rates and 95% Confidence Intervals, Jan-Dec 2014.

2014

2014

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. Rates reported here may be higher than rates based on clinically-defined illness.

Table 2. Rate and SIR, Jan-Dec 2014 in Comparison to National Baseline Data from 2010-2011.

2014

Location	# Obs	Pat Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline	
Facility-wide inpatient	0	28,132	0	1.35	0	, 2.211	Same	

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 patient days

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

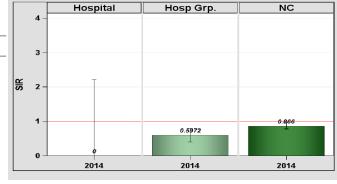


Figure 2. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

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.

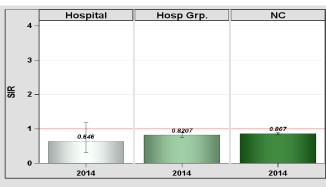


Figure 3. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

1	Table 3. Rate and SIR, Jan-Dec 2014 in Comparison to National Baseline Data from 2010-2011.												
1	Location	# Obs	# Pat Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline					
	Facility-wide inpatient	9	28,132	3.2	13.93	0.646	0.315, 1.185	Same					

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 10,000 patient days.

Pardee Hospital, Hendersonville, Henderson County

Catheter-Associated Urinary Tract Infections (CAUTI)

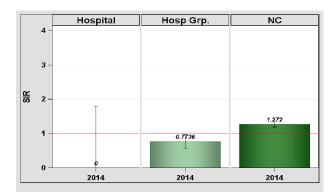


Table 4. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2009.

Type of Unit	# Obs	Cath Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Medical/surgical	0	1,281	0	1.67	0	, 1.799	Same
YTD Total for Reporting Units	0	1,281	0	1.67	0	, 1.799	Same

Figure 4. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 catheter days.

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

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	ntl baseline
Abdominal hysterectomy	0	37	0	0.43			No Conclusion

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

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

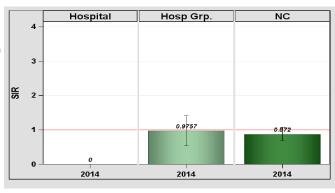


Figure 5. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Surgical Site Infections (SSI) after Colon Surgeries

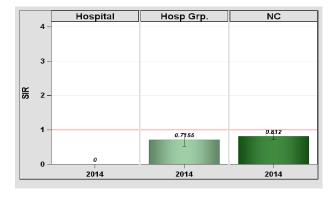


Table 6. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	ntl baseline
Colon surgery	0	9		0.3			No Conclusion

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

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

Figure 6. SIRs and 95% Confidence Intervals for Colon Surgeries, Jan-Dec 2014.

Commentary from Hospitals:

Park Ridge Health, Hendersonville, Henderson County

2014 Hospital Survey Information

Hospital Type: **Acute Care Hospital**

Medical Affiliation: Nο 7,990 Admissions in 2014: Patient Days in 2014: 21,352 Total Number of Beds: 98 Number of ICU Beds: 6 FTE* Infection Preventionists: 1.00 Number of FTEs* per 100 beds: 1.02



*FTE = Full-time equivalent

Central Line-Associated Bloodstream Infections (CLABSI)

Table 1. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008. Hosp Grp. NC Hospital 뚮 0.3238 2014 2014 2014

95% CI # Obs Line Days Rate # Pred SIR Medical 0 415 0 0.79No Conclusion 0.79 YTD Total for Reporting Units 0 415 0 No Conclusion

Figure 1. Rates and 95% Confidence Intervals, Jan-Dec 2014.

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1.000 central line days

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

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. Rates reported here may be higher than rates based on clinically-defined illness.

Table 2. Rate and SIR, Jan-Dec 2014 in Comparison to National Baseline Data from 2010-2011.

Location	# Obs	Pat Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Facility-wide inpatient	0	21,359	0	0.86			No Conclusion

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 patient days

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

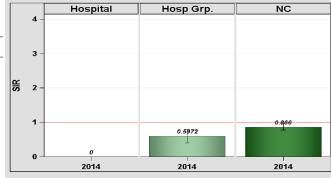


Figure 2. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

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.

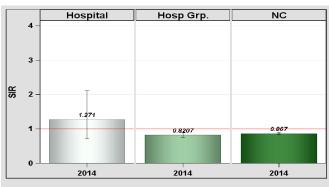


Figure 3. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

1	Table 3. Rate and SIR, Jan-Dec 2014 in Comparison to National Baseline Data from 2010-2011.										
1	Location	# Obs	# Pat Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline			
	Facility-wide inpatient	13	21,359	6.09	10.23	1.271	0.707, 2.118	Same			

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 10,000 patient days.

Park Ridge Health, Hendersonville, Henderson County

Catheter-Associated Urinary Tract Infections (CAUTI)

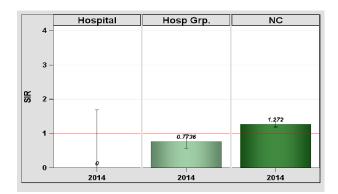


Table 4. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2009.

Type of Unit	# Obs	Cath Day	s Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Medical	0	883	0	1.77	0	, 1.696	Same
YTD Total for Reporting Units	0	883	0	1.77	0	, 1.696	Same

Figure 4. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 catheter days.

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

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	ntl baseline
Abdominal hysterectomy	0	81	0	0.86			No Conclusion

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

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

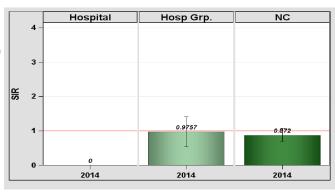


Figure 5. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Surgical Site Infections (SSI) after Colon Surgeries

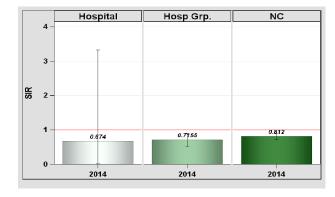


Table 6. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	ntl baseline
Colon surgery	1	43	2.33	1.48	0.674	0.034, 3.326	Same

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

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

Figure 6. SIRs and 95% Confidence Intervals for Colon Surgeries, Jan-Dec 2014.

Commentary from Hospitals:

Person Memorial Hospital, Roxboro, Person County

2014 Hospital Survey Information

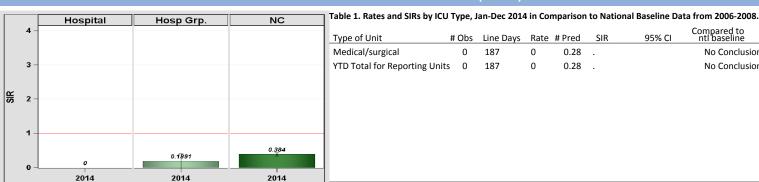
Hospital Type: **Acute Care Hospital**

Medical Affiliation: No 1,525 Admissions in 2014: Patient Days in 2014: 5,482 Total Number of Beds: 38 Number of ICU Beds: 6 FTE* Infection Preventionists: 0.40 Number of FTEs* per 100 beds: 1.05



*FTE = Full-time equivalent

Central Line-Associated Bloodstream Infections (CLABSI)



Obs Line Days Rate # Pred SIR Medical/surgical 0 187 0 0.28 No Conclusion YTD Total for Reporting Units 0 0 0.28 No Conclusion 187

Figure 1. Rates and 95% Confidence Intervals, Jan-Dec 2014.

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1.000 central line days

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

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. Rates reported here may be higher than rates based on clinically-defined illness.

Table 2. Rate and SIR, Jan-Dec 2014 in Comparison to National Baseline Data from 2010-2011.

Location	# Obs	Pat Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Facility-wide inpatient	0	5,403	0	0.36			No Conclusion

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 patient days

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

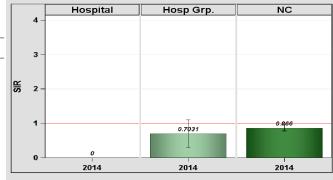
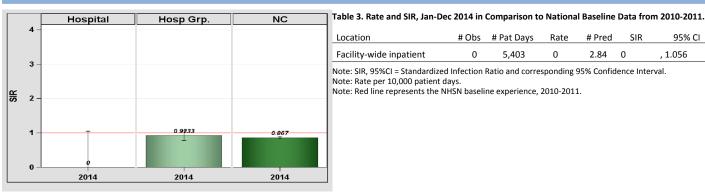


Figure 2. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

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.



Location	# Obs	# Pat Days	Rate	# Pred	SIR	95% CI	ntl baseline
Facility-wide inpatient	0	5,403	0	2.84	0	, 1.056	Same

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 10,000 patient days.

Figure 3. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Person Memorial Hospital, Roxboro, Person County

Catheter-Associated Urinary Tract Infections (CAUTI)

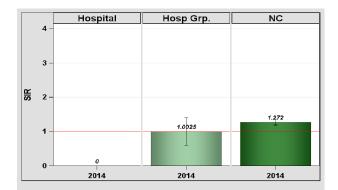


Table 4. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2009.

Type of Unit	# Obs	Cath Days	Rate	# Pred	SIR	95% CI	ntl baseline
Medical/surgical	0	573	0	0.74			No Conclusion
YTD Total for Reporting Units	0	573	0	0.74			No Conclusion

Figure 4. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 catheter days.

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

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	ntl baseline
Abdominal hysterectomy	0	0		0			No Conclusion

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

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

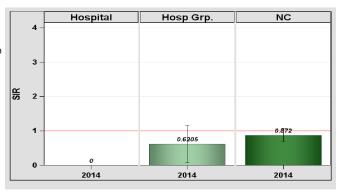


Figure 5. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Surgical Site Infections (SSI) after Colon Surgeries

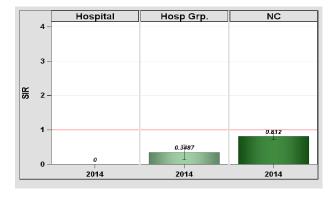


Table 6. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	ntl baseline
Colon surgery	1	21	4.76	0.72			No Conclusion

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

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

Figure 6. SIRs and 95% Confidence Intervals for Colon Surgeries, Jan-Dec 2014.

Commentary from Hospitals:

Randolph Hospital, Asheboro, Randolph County

2014 Hospital Survey Information

Hospital Type: **Acute Care Hospital**

Medical Affiliation: No 5,237 Admissions in 2014: Patient Days in 2014: 20,258 Total Number of Beds: 102 Number of ICU Beds: 9 FTE* Infection Preventionists: 1 00 Number of FTEs* per 100 beds: 0.98



*FTE = Full-time equivalent

Central Line-Associated Bloodstream Infections (CLABSI)

Hosp Grp. NC Hospital 뚮 0.687 0.3238 2014 2014 2014

Obs Line Days Rate # Pred SIR 95% CI 0.687 Medical/surgical 1 970 1.03 1.46 0.034, 3.390 Same YTD Total for Reporting Units 1 970 1.03 0.687 0.034, 3.390 1.46 Same

Table 1. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Figure 1. Rates and 95% Confidence Intervals, Jan-Dec 2014.

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1.000 central line days

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

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. Rates reported here may be higher than rates based on clinically-defined illness.

Table 2. Rate and SIR, Jan-Dec 2014 in Comparison to National Baseline Data from 2010-2011.

Location	# Obs	Pat Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Facility-wide inpatient	0	20,238	0	1.49	0	, 2.016	Same

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 patient days

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

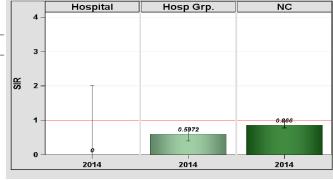


Figure 2. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

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.

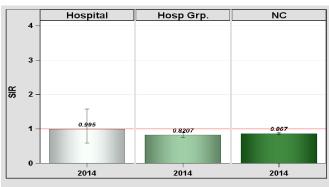


Figure 3. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Location		# Pat Days		# Pred	SIR	95% CI	Compared to ntl baseline
Facility-wide inpatient	16	20,238	7.91	16.08	0.995	0.589, 1.582	Same

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Table 3. Rate and SIR, Jan-Dec 2014 in Comparison to National Baseline Data from 2010-2011.

Note: Rate per 10,000 patient days.

Randolph Hospital, Asheboro, Randolph County

Catheter-Associated Urinary Tract Infections (CAUTI)

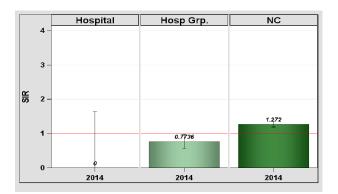


Table 4. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2009.

Type of Unit	# Obs	Cath Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Medical/surgical	0	1,410	0	1.83	0	, 1.634	Same
YTD Total for Reporting Units	0	1,410	0	1.83	0	, 1.634	Same

Figure 4. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 catheter days.

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

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	ntl baseline
Abdominal hysterectomy	2	75	2.67	0.88			No Conclusion

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

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

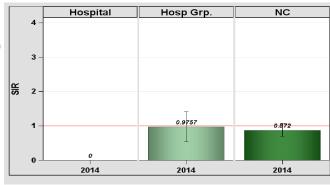


Figure 5. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Surgical Site Infections (SSI) after Colon Surgeries

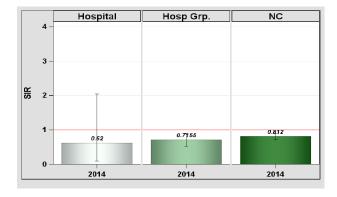


Table 6. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	ntl baseline
Colon surgery	2	98	2.04	3.23	0.62	0.104, 2.048	Same

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

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

Figure 6. SIRs and 95% Confidence Intervals for Colon Surgeries, Jan-Dec 2014.

Commentary from Hospitals:

Rex Healthcare, Raleigh, Wake County

2014 Hospital Survey Information

Hospital Type: **Acute Care Hospital**

Medical Affiliation: No 36,562 Admissions in 2014: Patient Days in 2014: 120,667 Total Number of Beds: 660 Number of ICU Beds: 38 FTE* Infection Preventionists: 4.00 Number of FTEs* per 100 beds: 0.61



*FTE = Full-time equivalent

Central Line-Associated Bloodstream Infections (CLABSI)

NC Hosp Grp. Hospital 뚮 0.3748 2014 2014 2014

Table 1. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008. 95% CI # Obs Line Days Rate # Pred SIR , 1.567 0 Medical cardiac n 956 n 1.91 Same , 0.676 Medical/surgical O 4.43 O Better 2.956 0 , 1.642 Surgical cardiothoracic 0 1,303 1.82 0 Same 0 YTD Total for Reporting Units 0 5,215 8.17 0 . 0.367 Retter

Figure 1. Rates and 95% Confidence Intervals, Jan-Dec 2014.

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1.000 central line days

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

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. Rates reported here may be higher than rates based on clinically-defined illness.

Table 2. Rate and SIR. Jan-Dec 2014 in Comparison to National Baseline Data from 2010-2011.

Location	# Obs	Pat Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Facility-wide inpatient	6	120,667	0.05	8.09	0.741	0.301, 1.542	Same

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 patient days

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

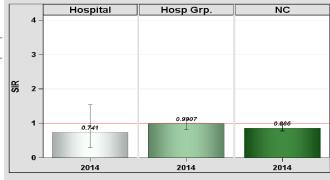
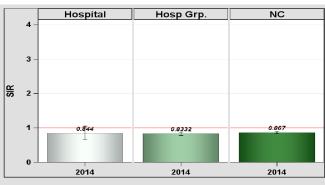


Figure 2. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

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.



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

Compared to ntl baseline Location # Obs # Pat Days Rate # Pred 95% CI 0.666, 1.055 Facility-wide inpatient 73 107,124 6.81 86.49 0.844 Same

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Table 3. Rate and SIR, Jan-Dec 2014 in Comparison to National Baseline Data from 2010-2011.

Note: Rate per 10,000 patient days

Figure 3. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Rex Healthcare, Raleigh, Wake County

Catheter-Associated Urinary Tract Infections (CAUTI)

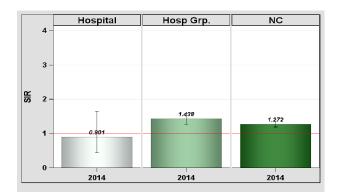


Table 4. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2009.

Type of Unit	# Obs	Cath Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Medical cardiac	2	1,425	1.4	2.85	0.702	0.118, 2.319	Same
Medical/surgical	5	3,794	1.32	4.55	1.098	0.402, 2.434	Same
Surgical cardiothoracic	2	1,524	1.31	2.59	0.772	0.129, 2.550	Same
YTD Total for Reporting Units	9	6,743	1.33	9.99	0.901	0.439, 1.653	Same

Figure 4. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 catheter days.

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

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Abdominal hysterectomy	3	439	0.68	4.2	0.715	0.182, 1.946	Same

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

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

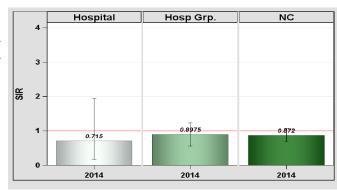


Figure 5. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Surgical Site Infections (SSI) after Colon Surgeries



Table 6. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	ntl baseline
Colon surgery	20	516	3.88	16.81	1.19	0.747, 1.805	Same

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

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

Figure 6. SIRs and 95% Confidence Intervals for Colon Surgeries, Jan-Dec 2014.

Commentary from Hospitals:

Novant Health Rowan Medical Center, Salisbury, Rowan County

2014 Hospital Survey Information

Hospital Type: **Acute Care Hospital**

Medical Affiliation: Nο 9,836 Admissions in 2014: Patient Days in 2014: 49,080 Total Number of Beds: 268 Number of ICU Beds: 12 FTE* Infection Preventionists: 0.75 Number of FTEs* per 100 beds: 0.28



*FTE = Full-time equivalent

Central Line-Associated Bloodstream Infections (CLABSI)

Table 1. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008. Hosp Grp. NC Hospital 뚮 0.6397 2014 2014 2014

Obs Line Days Rate # Pred SIR 95% CI 0.598 Medical/surgical 2 2,229 0.9 3.34 0.100, 1.976 Same YTD Total for Reporting Units 2 2,229 0.598 0.100, 1.976 0.9 3.34 Same

Figure 1. Rates and 95% Confidence Intervals, Jan-Dec 2014.

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1.000 central line days

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

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. Rates reported here may be higher than rates based on clinically-defined illness.

Table 2. Rate and SIR. Jan-Dec 2014 in Comparison to National Baseline Data from 2010-2011.

Location	# Obs	Pat Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline	
Facility-wide inpatient	4	49,080	0.08	3 2.8	1.428	0.454, 3.445	Same	

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 patient days

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

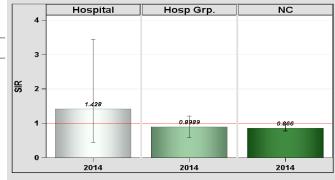


Figure 2. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

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.

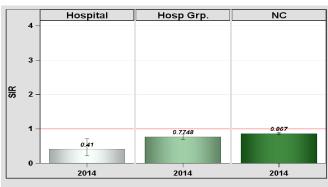


Figure 3. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

1	Table 3. Rate and SIR, Jan-Dec 2014 in Comparison to National Baseline Data from 2010-2011.											
1	Location	# Obs	# Pat Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline				
	Facility-wide inpatient	11	49,080	2.24	26.81	0.41	0.216, 0.713	Better				

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 10,000 patient days.

Novant Health Rowan Medical Center, Salisbury, Rowan County

Catheter-Associated Urinary Tract Infections (CAUTI)

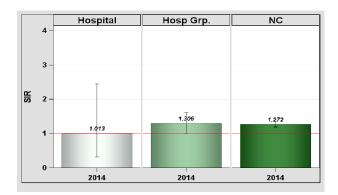


Table 4. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2009.

Type of Unit	# Obs	Cath Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Medical/surgical	4	3,038	1.32	3.95	1.013	0.322, 2.443	Same
YTD Total for Reporting Units	4	3,038	1.32	3.95	1.013	0.322, 2.443	Same

Figure 4. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 catheter days.

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

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	ntl baseline
Abdominal hysterectomy	1	14		0.15			No Conclusion

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

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

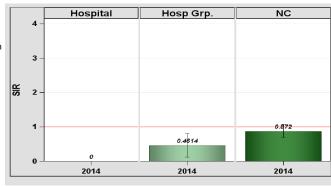


Figure 5. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Surgical Site Infections (SSI) after Colon Surgeries

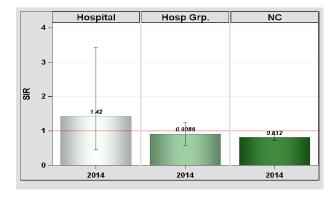


Table 6. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Colon surgery	4	85	4.71	2.82	1.42	0.451, 3.425	Same

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

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

Figure 6. SIRs and 95% Confidence Intervals for Colon Surgeries, Jan-Dec 2014.

Commentary from Hospitals:

At Novant Health, the safety of our patients comes first. Our goal is to have the lowest possible infection rates and we continually monitor infection prevention tactics for improvement opportunities. We support transparency in reporting infection rates and make common infection data available on our website. More information can be found under "quality" on NovantHealth.org.

Refer to HAI in N.C. Reference Report - October 2012 (rev July 2013) for further explanation of presented statistics (epi.publichealth.nc.gov/cd/hai/figures/hai_jul2013_reference.pdf). Data as of March 12, 2015.

Rutherford Regional Medical Center, Rutherfordton, Rutherford County

2014 Hospital Survey Information

Hospital Type: **Acute Care Hospital**

Medical Affiliation: No Admissions in 2014: 5,111 Patient Days in 2014: 20,054 Total Number of Beds: 120 Number of ICU Beds: 10 FTE* Infection Preventionists: 1.00 Number of FTEs* per 100 beds: 0.83



*FTE = Full-time equivalent

Central Line-Associated Bloodstream Infections (CLABSI)

Table 1. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008. Hosp Grp. NC Hospital 뚮 0.3238

Obs Line Days Rate # Pred SIR Medical/surgical 0 212 n 0.32 No Conclusion YTD Total for Reporting Units 0 212 0 0.32 No Conclusion

Figure 1. Rates and 95% Confidence Intervals, Jan-Dec 2014.

2014

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1.000 central line days

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

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. Rates reported here may be higher than rates based on clinically-defined illness.

Table 2. Rate and SIR. Jan-Dec 2014 in Comparison to National Baseline Data from 2010-2011.

2014

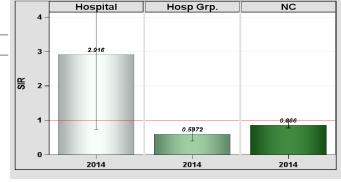
Location	# Obs	Pat Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline	
Facility-wide inpatient	3	18,049	0.17	1.03	2.916	0.742, 7.936	Same	

2014

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 patient days

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



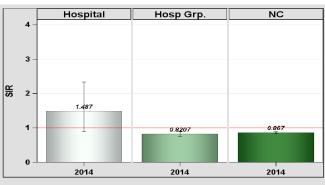
11.44 1.487

Figure 2. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

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.

Facility-wide inpatient



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

Table 3. Rate and SIR, Jan-Dec 2014 in Comparison to National Baseline Data from 2010-2011. Compared to ntl baseline Location # Obs # Pat Days Rate # Pred

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

17,178

17

Note: Rate per 10,000 patient days

Figure 3. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

0.895, 2.332

Same

Rutherford Regional Medical Center, Rutherfordton, Rutherford County

Catheter-Associated Urinary Tract Infections (CAUTI)

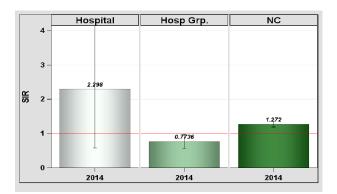


Table 4. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2009.

Type of Unit	# Obs	Cath Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Medical/surgical	3	1,004	2.99	1.31	2.298	0.585, 6.256	Same
YTD Total for Reporting Units	3	1,004	2.99	1.31	2.298	0.585, 6.256	Same

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 catheter days.

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

Figure 4. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	ntl baseline
Abdominal hysterectomy	2	45	4.44	0.41			No Conclusion

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

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

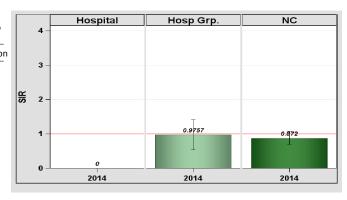


Figure 5. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Surgical Site Infections (SSI) after Colon Surgeries

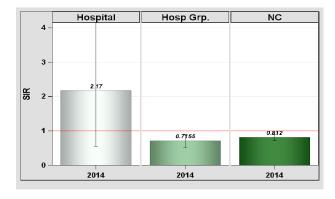


Table 6. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Colon surgery	3	44	6.82	1.38	2.17	0.552, 5.905	Same

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

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

Figure 6. SIRs and 95% Confidence Intervals for Colon Surgeries, Jan-Dec 2014.

Commentary from Hospitals:

Sampson Regional Medical Center, Clinton, Sampson County

2014 Hospital Survey Information

Hospital Type: **Acute Care Hospital**

Medical Affiliation: Nο 4,408 Admissions in 2014: Patient Days in 2014: 16,074 Total Number of Beds: 116 Number of ICU Beds: FTE* Infection Preventionists: 1 00 Number of FTEs* per 100 beds: 0.86



*FTE = Full-time equivalent

Central Line-Associated Bloodstream Infections (CLABSI)

Table 1. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008. Hosp Grp. NC Hospital 뚮 0.3238 2014 2014 2014

Obs Line Days Rate # Pred SIR Medical/surgical 0 154 n 0.23 No Conclusion YTD Total for Reporting Units 0 0.23 No Conclusion 0 154

Figure 1. Rates and 95% Confidence Intervals, Jan-Dec 2014.

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1.000 central line days

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

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. Rates reported here may be higher than rates based on clinically-defined illness.

Table 2. Rate and SIR, Jan-Dec 2014 in Comparison to National Baseline Data from 2010-2011.

Location	# Obs	Pat Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Facility-wide inpatient	2	14,371	0.14	1 0.93			No Conclusion

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 patient days

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

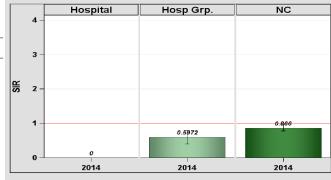
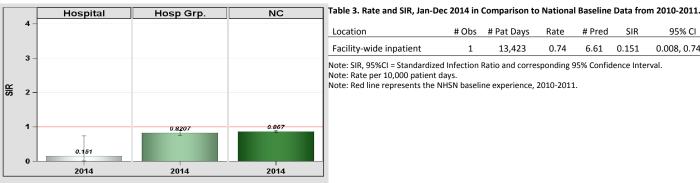


Figure 2. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

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.



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

Compared to ntl baseline Location # Obs # Pat Days Rate # Pred 0.008, 0.746 Facility-wide inpatient 13,423 0.74 6.61 0.151 Better

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 10,000 patient days

Figure 3. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Sampson Regional Medical Center, Clinton, Sampson County

Catheter-Associated Urinary Tract Infections (CAUTI)

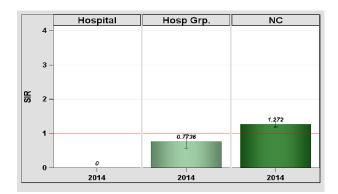


Table 4. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2009.

Type of Unit	# Obs	Cath Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Medical/surgical	0	761	0	0.99			No Conclusion
YTD Total for Reporting Units	0	761	0	0.99			No Conclusion

Figure 4. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 catheter days.

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

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	ntl baseline
Abdominal hysterectomy	0	9		0.1			No Conclusion

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

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

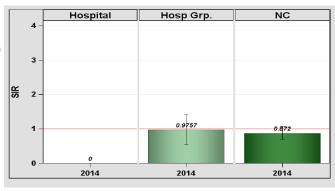


Figure 5. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Surgical Site Infections (SSI) after Colon Surgeries

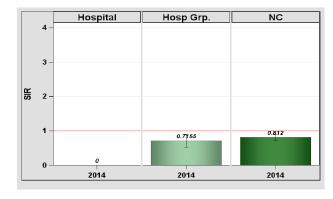


Table 6. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	ntl baseline
Colon surgery	0	13		0.41			No Conclusion

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

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

Figure 6. SIRs and 95% Confidence Intervals for Colon Surgeries, Jan-Dec 2014.

Commentary from Hospitals:

Sandhills Regional Medical Center, Hamlet, Richmond County

2014 Hospital Survey Information

Hospital Type: **Acute Care Hospital**

Medical Affiliation: Nο 1,988 Admissions in 2014: Patient Days in 2014: 8,602 Total Number of Beds: 64 Number of ICU Beds: 6 FTE* Infection Preventionists: 0.75 Number of FTEs* per 100 beds: 1.17



*FTE = Full-time equivalent

Central Line-Associated Bloodstream Infections (CLABSI)

Table 1. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008. Hosp Grp. NC Hospital 뚮 0.384 0.1891

Obs Line Days Rate # Pred SIR Medical 0 193 0 0.37 No Conclusion YTD Total for Reporting Units 0 0 0.37 No Conclusion 193

Figure 1. Rates and 95% Confidence Intervals, Jan-Dec 2014.

2014

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1.000 central line days

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

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. Rates reported here may be higher than rates based on clinically-defined illness.

Table 2. Rate and SIR, Jan-Dec 2014 in Comparison to National Baseline Data from 2010-2011.

2014

Location	# Obs	Pat Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Facility-wide inpatient	0	8,602	0	0.35			No Conclusion

2014

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 patient days

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

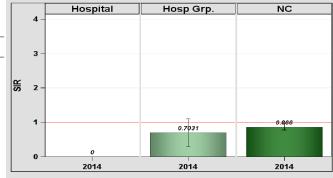


Figure 2. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

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.

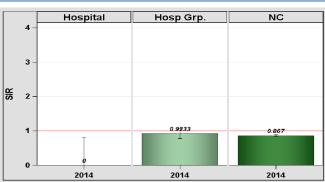


Table 3. Rate and SIR, Jan-Dec 2014 in Comparison to National Baseline Data from 2010-2011.

Location	# Obs	# Pat Days	Rate	# Pred	SIR	95% CI	ntl baseline
Facility-wide inpatient	0	8,602	0	3.75	0	, 0.799	Better

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 10,000 patient days.

Figure 3. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Sandhills Regional Medical Center, Hamlet, Richmond County

Catheter-Associated Urinary Tract Infections (CAUTI)

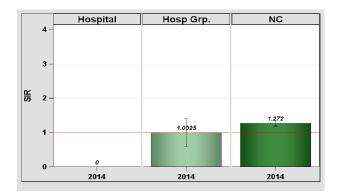


Table 4. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2009.

Type of Unit	# Obs	Cath Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Medical	0	482	0	0.96			No Conclusion
YTD Total for Reporting Units	0	482	0	0.96			No Conclusion

Figure 4. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 catheter days.

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

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	ntl baseline
Abdominal hysterectomy	0	22	0	0.2			No Conclusion

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

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

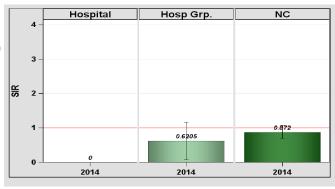


Figure 5. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Surgical Site Infections (SSI) after Colon Surgeries

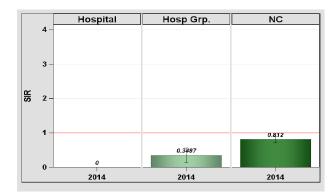


Table 6. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	ntl baseline
Colon surgery	0	1		0.02			No Conclusion

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

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

Figure 6. SIRs and 95% Confidence Intervals for Colon Surgeries, Jan-Dec 2014.

Commentary from Hospitals:

Scotland Memorial Hospital, Laurinburg, Scotland County

2014 Hospital Survey Information

Hospital Type: **Acute Care Hospital**

Medical Affiliation: No 5,613 Admissions in 2014: Patient Days in 2014: 20,143 Total Number of Beds: 104 Number of ICU Beds: 0 FTE* Infection Preventionists: 0 90 Number of FTEs* per 100 beds: 0.87





Central Line-Associated Bloodstream Infections (CLABSI)

As of January 2014, Scotland Memorial no longer had an ICU unit. As a result, there was no CLABSI reporting from this facility during 2014.

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. Rates reported here may be higher than rates based on clinically-defined illness.

Table 2. Rate and SIR, Jan-Dec 2014 in Comparison to National Baseline Data from 2010-2011.

Location	# Obs	Pat Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline	
Facility-wide inpatient	0	20,143	0	1.33	0	, 2.253	Same	
Note: SIR. 95%CI = Standardi	ized Infec	tion Ratio an	d corres	ponding 9	5% Confid	lence Interval		_

Note: Rate per 1.000 patient days.

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

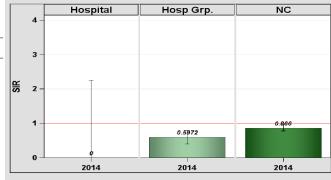


Figure 2. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

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.

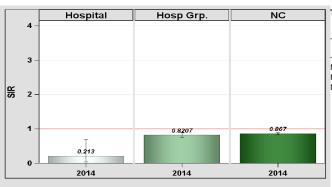


Figure 3. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

1	Table 3. Rate and SIR, Jan-Dec	2014 in	Comparison to	National	Baseline	Data fro	m 2010-2011.	
	Location	# Obs	# Pat Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
	Facility-wide inpatient	2	18,623	1.07	9.41	0.213	0.036, 0.702	Better

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 10,000 patient days.

Scotland Memorial Hospital, Laurinburg, Scotland County

Catheter-Associated Urinary Tract Infections (CAUTI)

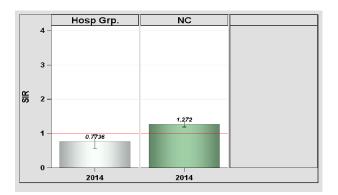


Table 4. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2009.

Type of Unit	# Obs Cath Days Rate	# Pred	SIR	95% CI	ntl baseline	
--------------	----------------------	--------	-----	--------	--------------	--

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 catheter days.

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

Figure 4. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	ntl baseline
Abdominal hysterectomy	0	44	0	0.42	•		No Conclusion

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

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

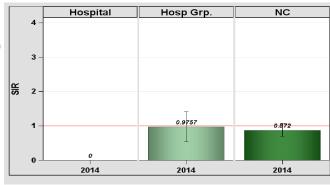


Figure 5. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Surgical Site Infections (SSI) after Colon Surgeries

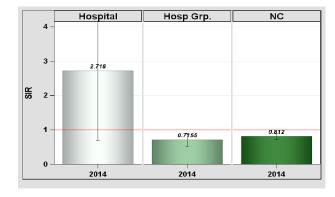


Table 6. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	ntl baseline
Colon surgery	3	36	8.33	1.1	2.718	0.691, 7.397	Same

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

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

Figure 6. SIRs and 95% Confidence Intervals for Colon Surgeries, Jan-Dec 2014.

Commentary from Hospitals:

Select Specialty Hospital-Durham, Durham, Durham County

2014 Hospital Survey Information

Hospital Type: Long-term Acute Care Hospital

Admissions in 2014: 305 Patient Days in 2014: 9,296 **Total Number of Beds:** 30 FTE* Infection Preventionists: 0.35 Number of FTEs* per 100 beds: 1.17



*FTE = Full-time equivalent

Central Line-Associated Bloodstream Infections (CLABSI)

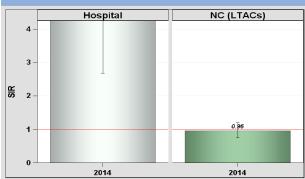


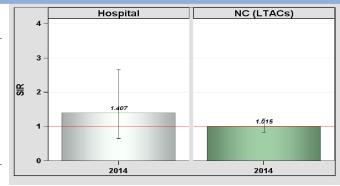
Table 1. Number of Observed and Predicted CLABSI Infections by Location, Jan-Dec 2014. Type of Unit # Obs Line Days Rate # Pred SIR 95% CI Compared to nti Daseline									
Type of Unit	# Obs	Line Days	Rate	# Pred [*]	SIR	95% CI	ompared to ntl baseline		
Adult ward	18	4,548	3.96	4.09	4.398	2.688, 6.815	Worse		
YTD Total for Reporting Units	18	4,548	3.96	4.09	4.398	2.688, 6.815	Worse		

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 central line days. Note: Red line represents the NHSN baseline experience, 2006-2008.

Figure 1. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Table 2. Number of Observ Type of Unit		Predicted CA Cath Days		y Locatio SIR	n, Jan-Dec 2014 95% CI	Compared to ntl baseline
Adult ward	8	2,843	5.69	1.407	0.653, 2.672	Same
YTD Total for Reporting U	nits 8	2,843	5.69	1.407	0.653, 2.672	Same



Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 catheter days

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

Figure 2. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Other Healthcare-Associated Infections (HAIs)

Long-term acute care hospitals (LTACs) do not report LabID C. difficile, LabID MRSA Bacteremia or SSIs to the N.C. Division of Public Health.

Commentary from Hospitals:

No comments provided.

Refer to the HAI in N.C. Reference Report - October 2012 (rev June 2013) for further explanation of presented statistics (epi.publichealth.nc.gov/cd/hai/figures.html). Data as of March 12, 2015.

Select Specialty Hospital-Greensboro, Greensboro, Guilford County

2014 Hospital Survey Information

Hospital Type: Long-term Acute Care Hospital

Admissions in 2014: 353 Patient Days in 2014: 9,347 **Total Number of Beds:** 30 0.45 FTE* Infection Preventionists: Number of FTEs* per 100 beds: 1.50



*FTE = Full-time equivalent

Central Line-Associated Bloodstream Infections (CLABSI)

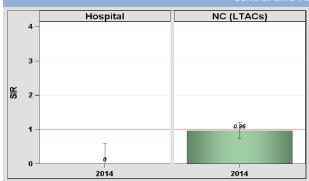


Table 1. Number of Observed and Predicted CLABSI Infections by Location, Jan-Dec 2014. Type of Unit # Obs Line Days Rate # Pred SIR 95% CI Compared to ntt baseline										
Type of Unit	# Obs	Line Days	Rate	# Pred [*]	SIR	95% CI	ntl baseline			
Adult ward	0	5,606	0	5.05	0	, 0.594	Better			
YTD Total for Reporting Units	s 0	5,606	0	5.05	0	, 0.594	Better			

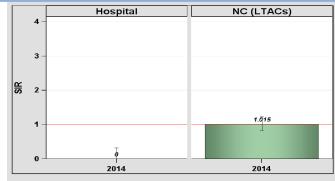
Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 central line days. Note: Red line represents the NHSN baseline experience, 2006-2008.

Figure 1. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Catheter-Associated Urinary Tract Infections (CAUTI)

Table 2. Number of Observ	ed and I	Predicted CA	UTI In	fections b	y Locati	ion, Jan-Dec 201		
Type of Unit	# Obs	Cath Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline	
Adult ward	0	4,660		9.32	0	, 0.321	Better	_
YTD Total for Reporting U	nits 0	4,660		9.32	0	, 0.321	Better	



Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 catheter days

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

Figure 2. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Other Healthcare-Associated Infections (HAIs)

Long-term acute care hospitals (LTACs) do not report LabID C. difficile, LabID MRSA Bacteremia or SSIs to the N.C. Division of Public Health.

Commentary from Hospitals:

No comments provided.

Refer to the HAI in N.C. Reference Report - October 2012 (rev June 2013) for further explanation of presented statistics (epi.publichealth.nc.gov/cd/hai/figures.html). Data as of March 12, 2015.

Select Specialty Hospital-Winston Salem, Winston Salem, Forsyth County

2014 Hospital Survey Information

Hospital Type: Long-term Acute Care Hospital

Admissions in 2014: 387 11,462 Patient Days in 2014: **Total Number of Beds:** 42 FTE* Infection Preventionists: 0.35 Number of FTEs* per 100 beds: 0.83



*FTE = Full-time equivalent

Central Line-Associated Bloodstream Infections (CLABSI)

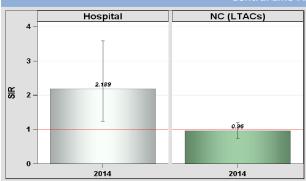


Table 1. Number of Observed	and Pre	dicted CLAB	SI Infe	ctions by	Location	, Jan-Dec 2014.	
Table 1. Number of Observed Type of Unit	# Obs	Line Days	Rate	# Pred	SIR	95% CI Compared to ntl baseline	
Adult ward	14	7,105	1.97	6.39	2.189	1.246, 3.586 Worse	
YTD Total for Reporting Units	14	7,105	1.97	6.39	2.189	1.246, 3.586 Worse	

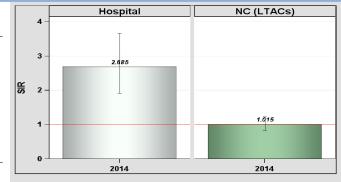
Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 central line days. Note: Red line represents the NHSN baseline experience, 2006-2008.

Figure 1. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Catheter-Associated Urinary Tract Infections (CAUTI)

Table 2. Number of Observ	ed and F	Predicted CA	\UTI In	fections b	y Locatio	n, Jan-Dec 2014	
Type of Unit	# Obs	Cath Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Adult ward	37	6,889		13.78	2.685	1.919, 3.663	Worse
YTD Total for Reporting U	Inits 37	6,889		13.78	2.685	1.919, 3.663	Worse



Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 catheter days

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

Figure 2. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Other Healthcare-Associated Infections (HAIs)

Long-term acute care hospitals (LTACs) do not report LabID C. difficile, LabID MRSA Bacteremia or SSIs to the N.C. Division of Public Health.

Commentary from Hospitals:

No comments provided.

Refer to the HAI in N.C. Reference Report - October 2012 (rev June 2013) for further explanation of presented statistics (epi.publichealth.nc.gov/cd/hai/figures.html). Data as of March 12, 2015.

Southeastern Regional Medical Center, Lumberton, Robeson County

2014 Hospital Survey Information

Hospital Type: **Acute Care Hospital**

Medical Affiliation: Nο 16,793 Admissions in 2014: Patient Days in 2014: 77,437 Total Number of Beds: 319 Number of ICU Beds: 18 FTE* Infection Preventionists: 2.00 Number of FTEs* per 100 beds: 0.63



*FTE = Full-time equivalent

Central Line-Associated Bloodstream Infections (CLABSI)

NC Hosp Grp. Hospital 뚮 0.6397 2014 2014 2014

95% CI # Obs Line Days Rate # Pred SIR 0.979 Medical/surgical 3 2,042 1.47 3.06 0.249, 2.666 Same Surgical cardiothoracic 0 126 0 0.18 No Conclusion YTD Total for Reporting Units 0.926 3 2.168 1.38 3.24 0.236, 2.520 Same

Table 1. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Figure 1. Rates and 95% Confidence Intervals, Jan-Dec 2014.

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1.000 central line days

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

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. Rates reported here may be higher than rates based on clinically-defined illness.

Table 2. Rate and SIR. Jan-Dec 2014 in Comparison to National Baseline Data from 2010-2011.

Facility-wide inpatient 6 71,096 0.08 3.44 1.745 0.707, 3.630 Same	Location	# Obs	Pat Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline	
	Facility-wide inpatient	6	71,096	0.08	3.44	1.745	0.707, 3.630	Same	

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 patient days

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

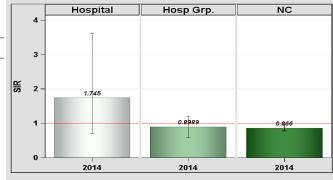
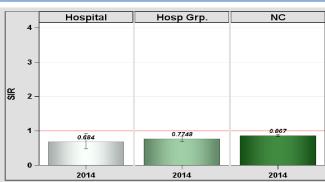


Figure 2. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

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.



Note: Rate per 10,000 patient days

Location # Obs # Pat Days Rate # Pred 95% CI 0.486, 0.936 Facility-wide inpatient 36 67,508 5.33 52.67 0.684

Table 3. Rate and SIR, Jan-Dec 2014 in Comparison to National Baseline Data from 2010-2011.

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

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

Figure 3. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Compared to ntl baseline

Better

Southeastern Regional Medical Center, Lumberton, Robeson County

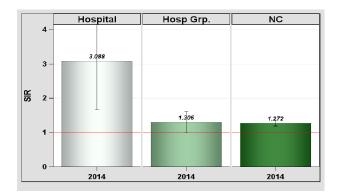


Table 4. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2009.

Type of Unit	# Obs	Cath Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Medical/surgical	12	2,641	4.54	3.43	3.495	1.894, 5.942	Worse
Surgical cardiothoracic	0	266	0	0.45			No Conclusion
YTD Total for Reporting Units	12	2,907	4.13	3.89	3.088	1.673, 5.250	Worse

Figure 4. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 catheter days.

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

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Abdominal hysterectomy	0	140	0	1.61	0	, 1.865	Same

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

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

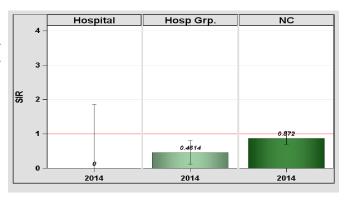


Figure 5. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Surgical Site Infections (SSI) after Colon Surgeries

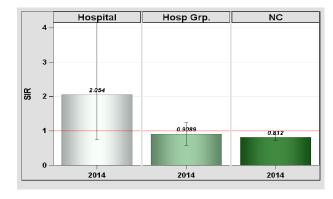


Table 6. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	ntl baseline
Colon surgery	5	70	7.14	2.43	2.054	0.753, 4.553	Same

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

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

Figure 6. SIRs and 95% Confidence Intervals for Colon Surgeries, Jan-Dec 2014.

Commentary from Hospitals:

Stanly Regional Medical Center, Albemarle, Stanly County

2014 Hospital Survey Information

Hospital Type: **Acute Care Hospital**

Medical Affiliation: Nο 5,032 Admissions in 2014: Patient Days in 2014: 16,778 Total Number of Beds: 109 Number of ICU Beds: 10 FTE* Infection Preventionists: 0.75 Number of FTEs* per 100 beds: 0.69



Central Line-Associated Bloodstream Infections (CLABSI)

Table 1. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008. Hosp Grp. NC Hospital 뚮 0.3238 2014 2014 2014

95% CI # Obs Line Days Rate # Pred SIR , 2.180 0 Medical cardiac 0 687 0 1.37 Same , 2.180 YTD Total for Reporting Units 0 687 0 1.37 0 Same

Figure 1. Rates and 95% Confidence Intervals, Jan-Dec 2014.

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1.000 central line days

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

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. Rates reported here may be higher than rates based on clinically-defined illness.

Table 2. Rate and SIR, Jan-Dec 2014 in Comparison to National Baseline Data from 2010-2011.

Location	# Obs	Pat Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Facility-wide inpatient	0	15,161	0	0.64	•		No Conclusion

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 patient days

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

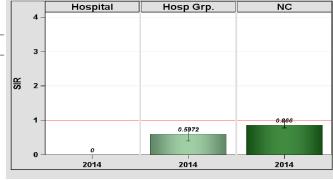


Figure 2. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

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.

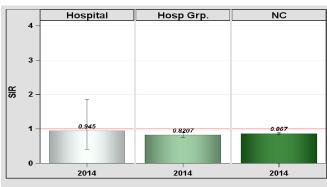


Figure 3. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

1	Table 3. Rate and SIR, Jan-Dec	2014 in	Comparison to	National	l Baseline	Data fro	m 2010-2011.	
	Location	# Obs	# Pat Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
	Facility-wide inpatient	7	13,770	5.08	7.41	0.945	0.413, 1.869	Same

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 10,000 patient days.

^{*}FTE = Full-time equivalent

Stanly Regional Medical Center, Albemarle, Stanly County

Catheter-Associated Urinary Tract Infections (CAUTI)

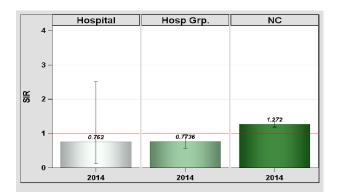


Table 4. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2009.

Type of Unit	# Obs	Cath Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Medical cardiac	2	1,312	1.52	2.62	0.762	0.128, 2.518	Same
YTD Total for Reporting Units	2	1,312	1.52	2.62	0.762	0.128, 2.518	Same

Figure 4. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 catheter days.

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

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	ntl baseline
Abdominal hysterectomy	0	25	0	0.2			No Conclusion

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

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

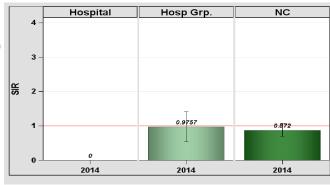


Figure 5. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Surgical Site Infections (SSI) after Colon Surgeries

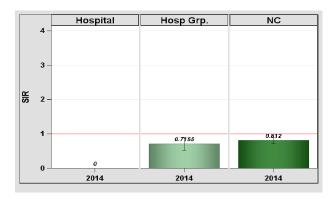


Table 6. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	ntl baseline
Colon surgery	1	16		0.46			No Conclusion

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

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

Figure 6. SIRs and 95% Confidence Intervals for Colon Surgeries, Jan-Dec 2014.

Commentary from Hospitals:

Novant Health Thomasville Medical Center, Thomasville, Davidson County

2014 Hospital Survey Information

Hospital Type: **Acute Care Hospital**

Medical Affiliation: No 3,826 Admissions in 2014: Patient Days in 2014: 25,093 Total Number of Beds: 149 Number of ICU Beds: 11 FTE* Infection Preventionists: 0.50Number of FTEs* per 100 beds: 0.34



*FTE = Full-time equivalent

Central Line-Associated Bloodstream Infections (CLABSI)

Hosp Grp. NC Hospital 똜 0.3238 2014 2014 2014

Obs Line Days Rate # Pred SIR Medical/surgical 0 273 n 0.41 No Conclusion 273 YTD Total for Reporting Units 0 0 0.41 No Conclusion

Table 1. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Figure 1. Rates and 95% Confidence Intervals, Jan-Dec 2014.

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1.000 central line days

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

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. Rates reported here may be higher than rates based on clinically-defined illness.

Table 2. Rate and SIR. Jan-Dec 2014 in Comparison to National Baseline Data from 2010-2011.

Location	# Obs	Pat Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline	
Facility-wide inpatient	3	25,093	0.12	1.56	1.922	0.489, 5.232	Same	

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 patient days

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

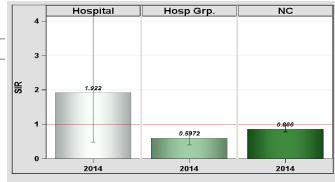


Figure 2. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

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.

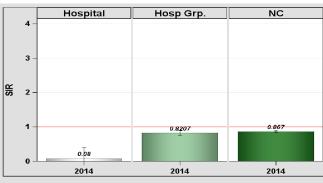


Table 3. Rate and SIR, Jan-Dec 2014 in Comparison to National Baseline Data from 2010-2011.

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Location	# Obs	# Pat Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Facility-wide inpatient	1	25,093	0.4	12.45	0.08	0.004, 0.396	Better

Note: Rate per 10,000 patient days. Note: Red line represents the NHSN baseline experience, 2010-2011.

Figure 3. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Novant Health Thomasville Medical Center, Thomasville, Davidson County

Catheter-Associated Urinary Tract Infections (CAUTI)

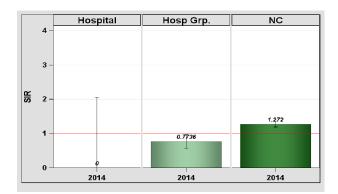


Table 4. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2009.

Type of Unit	# Obs	Cath Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Medical/surgical	0	1,124	0	1.46	0	, 2.050	Same
YTD Total for Reporting Units	0	1,124	0	1.46	0	, 2.050	Same

Figure 4. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 catheter days.

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

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	ntl baseline
Abdominal hysterectomy	0	15		0.1	•		No Conclusion

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

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

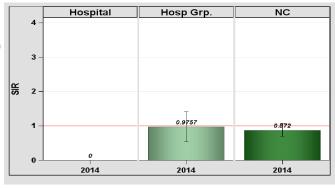


Figure 5. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Surgical Site Infections (SSI) after Colon Surgeries

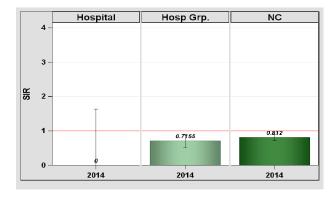


Table 6. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Colon surgery	0	61	0	1.84	0	, 1.630	Same

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

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

Figure 6. SIRs and 95% Confidence Intervals for Colon Surgeries, Jan-Dec 2014.

Commentary from Hospitals:

At Novant Health, the safety of our patients comes first. Our goal is to have the lowest possible infection rates and we continually monitor infection prevention tactics for improvement opportunities. We support transparency in reporting infection rates and make common infection data available on our website. More information can be found under "quality" on NovantHealth.org.

Refer to HAI in N.C. Reference Report - October 2012 (rev July 2013) for further explanation of presented statistics (epi.publichealth.nc.gov/cd/hai/figures/hai_jul2013_reference.pdf). Data as of March 12, 2015.

UNC Health Care, Chapel Hill, Orange County

2014 Hospital Survey Information

Hospital Type: **Acute Care Hospital**

Medical Affiliation: Major Admissions in 2014: 41,667 Patient Days in 2014: 269,713 Total Number of Beds: 860 Number of ICU Beds: 171 FTE* Infection Preventionists: 5.50 Number of FTEs* per 100 beds: 0.64



*FTE = Full-time equivalent

Central Line-Associated Bloodstream Infections (CLABSI)

NC Hosp Grp. Hospital 뚮 0.3798 0.384 2014 2014 2014

Obs Line Days Rate # Pred SIR 95% CI 16.08 0.311 Burn 5 2,923 1.71 0.114, 0.689 Better 5,054 Medical 13.14 0.837 0.440, 1.455 11 2.18 Same Medical cardiac 0.929 0.376. 1.931 6 3,231 1.86 6.46 Same Neonatal Level III 0.028. 0.543 2 4.968 0.412.16 0.164 Retter Neurosurgical 2 3.402 0.59 8.51 0.235 0.039, 0.777 Retter Pediatric medical/surgical 6 3,059 1.96 9.18 0.654 0.265, 1.360 Same Surgical 6 3,566 1.68 8.2 0.732 0.297, 1.522 Same Surgical cardiothoracic 1 2.895 0.35 4.05 0.247 0.012, 1.217 Same YTD Total for Reporting Units 39 29.098 1.34 77.78 0.501 0.362, 0.679 Better

Table 1. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1.000 central line days

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

Figure 1. Rates and 95% Confidence Intervals, Jan-Dec 2014.

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. Rates reported here may be higher than rates based on clinically-defined illness.

Table 2. Rate and SIR. Jan-Dec 2014 in Comparison to National Baseline Data from 2010-2011.

Location	# Obs	Pat Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline	
Facility-wide inpatient	28	269,713	0.1	26.29	1.065	0.722, 1.519	Same	

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 patient days

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

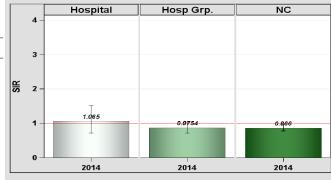
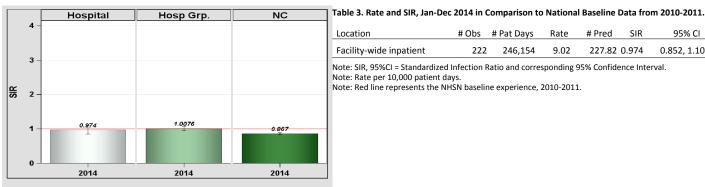


Figure 2. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

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.



Location	# Obs	# Pat Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Facility-wide inpatient	222	246,154	9.02	227.82	0.974	0.852, 1.109	Same

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 10,000 patient days.

Figure 3. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

UNC Health Care, Chapel Hill, Orange County

Catheter-Associated Urinary Tract Infections (CAUTI)

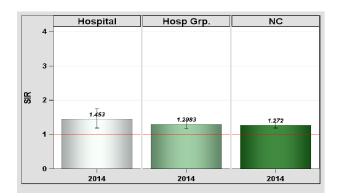


Table 4. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2009.

Type of Unit	# Obs	Cath Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Burn	22	4,205	5.23	18.5	1.189	0.764, 1.771	Same
Medical	18	4,606	3.91	10.59	1.699	1.039, 2.633	Worse
Medical cardiac	9	2,256	3.99	4.51	1.995	0.973, 3.660	Same
Neurosurgical	32	4,020	7.96	17.69	1.809	1.259, 2.523	Worse
Pediatric medical/surgical	3	1,283	2.34	3.59	0.835	0.212, 2.273	Same
Surgical	12	4,309	2.78	11.2	1.071	0.580, 1.821	Same
Surgical cardiothoracic	7	2,807	2.49	4.77	1.467	0.642, 2.902	Same
YTD Total for Reporting Units	103	23,486	4.39	70.86	1.453	1.192, 1.755	Worse

Figure 4. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 catheter days.

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

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Abdominal hysterectomy	10	724	1.38	8.34	1.199	0.609, 2.137	Same

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

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

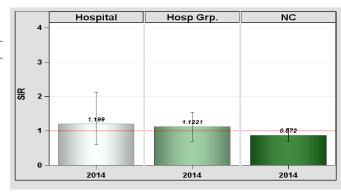


Figure 5. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Surgical Site Infections (SSI) after Colon Surgeries

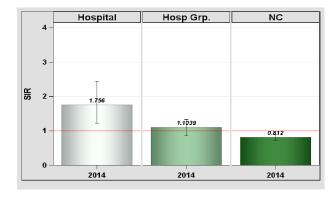


Table 6. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	ntl baseline
Colon surgery	32	494	6.48	18.22	1.756	1.222, 2.450	Worse

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

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

Figure 6. SIRs and 95% Confidence Intervals for Colon Surgeries, Jan-Dec 2014.

Commentary from Hospitals:

UNC Health Care is pleased that our rates of all reported healthcare-associated infections are statistically similar to similarly-sized hospitals despite care in a tertiary referral hospital for highly vulnerable populations (e.g., organ transplant, HIV infected, cancer, severely burned, and very premature infants). NC residents should be aware that the reported information is NOT corrected for the severity of illness of the hospital's patients. UNC Health Care supports the need for the data presented in this report to be validated (i.e., demonstration by independent monitors that the submitted data is correct).

Refer to HAI in N.C. Reference Report - October 2012 (rev July 2013) for further explanation of presented statistics (epi.publichealth.nc.gov/cd/hai/figures/hai_jul2013_reference.pdf). Data as of March 12, 2015.

Vidant Beaufort Hospital, Washington, Beaufort County

2014 Hospital Survey Information

Hospital Type: **Acute Care Hospital**

Medical Affiliation: No 3,185 Admissions in 2014: Patient Days in 2014: 16,662 Total Number of Beds: 83 Number of ICU Beds: 8 FTE* Infection Preventionists: 1.00 Number of FTEs* per 100 beds: 1.20



*FTE = Full-time equivalent

뚮

Central Line-Associated Bloodstream Infections (CLABSI)

Hosp Grp. NC Hospital 0.384

0.1891

2014

Obs Line Days Rate # Pred SIR Medical/surgical 0 302 n 0.45 No Conclusion YTD Total for Reporting Units 0 302 0 0.45 No Conclusion

Table 1. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Figure 1. Rates and 95% Confidence Intervals, Jan-Dec 2014.

2014

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1.000 central line days

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

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. Rates reported here may be higher than rates based on clinically-defined illness.

Table 2. Rate and SIR, Jan-Dec 2014 in Comparison to National Baseline Data from 2010-2011.

Location	# Obs	Pat Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Facility-wide inpatient	2	15,284	0.13	3 0.99			No Conclusion

2014

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 patient days

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

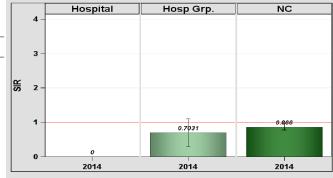
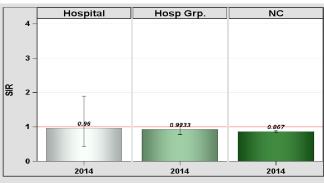


Figure 2. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

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.



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

Table 3. Rate and SIR, Jan-Dec 2014 in Comparison to National Baseline Data from 2010-2011.

Location	# Obs	# Pat Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Facility-wide inpatient	7	15,250	4.59	7.29	0.96	0.420, 1.899	Same

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 10,000 patient days.

Figure 3. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Vidant Beaufort Hospital, Washington, Beaufort County

Catheter-Associated Urinary Tract Infections (CAUTI)

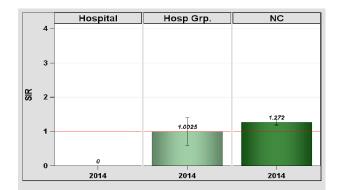


Table 4. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2009.

Type of Unit	# Obs	Cath Day	s Rate	# Pred	SIR	95% CI	ntl baseline
Medical/surgical	1	373	2.68	0.48			No Conclusion
YTD Total for Reporting Units	1	373	2.68	0.48			No Conclusion

Figure 4. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 catheter days.

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

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	ntl baseline
Abdominal hysterectomy	0	24	0	0.38			No Conclusion

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

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

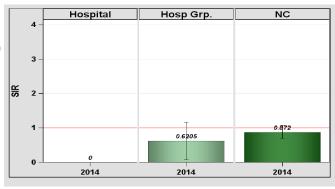


Figure 5. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Surgical Site Infections (SSI) after Colon Surgeries

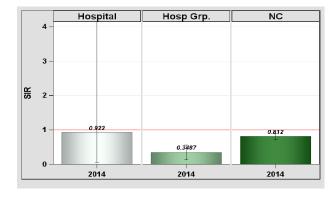


Table 6. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	ntl baseline
Colon surgery	1	34	2.94	1.08	0.922	0.046, 4.548	Same

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

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

Figure 6. SIRs and 95% Confidence Intervals for Colon Surgeries, Jan-Dec 2014.

Commentary from Hospitals:

Vidant Duplin Hospital, Kenansville, Duplin County

2014 Hospital Survey Information

Hospital Type: **Acute Care Hospital**

Medical Affiliation: No 4,550 Admissions in 2014: Patient Days in 2014: 17,822 Total Number of Beds: 72 Number of ICU Beds: 9 FTE* Infection Preventionists: 1.00 Number of FTEs* per 100 beds: 1.39



*FTE = Full-time equivalent

Central Line-Associated Bloodstream Infections (CLABSI)

Hosp Grp. NC Hospital 뚮 0.384 0.1891 2014 2014 2014

95% CI # Obs Line Days Rate # Pred SIR Medical/surgical n 313 0 0.47No Conclusion YTD Total for Reporting Units 0 313 0 0.47 No Conclusion

Table 1. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Figure 1. Rates and 95% Confidence Intervals, Jan-Dec 2014.

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1.000 central line days

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

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. Rates reported here may be higher than rates based on clinically-defined illness.

Table 2. Rate and SIR, Jan-Dec 2014 in Comparison to National Baseline Data from 2010-2011.

Location	# Obs	Pat Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Facility-wide inpatient	0	18,370	0	0.87			No Conclusion

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 patient days

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

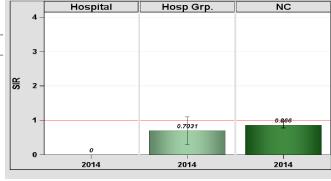


Figure 2. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

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.

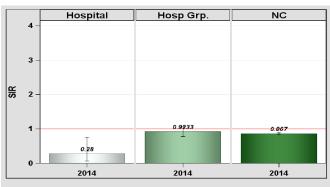


Figure 3. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

1	Table 3. Rate and SIR, Jan-Dec 2014 in Comparison to National Baseline Data from 2010-2011.										
1	Location	# Obs	# Pat Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline			
	Facility-wide inpatient	3	17,669	1.7	10.71	0.28	0.071, 0.762	Better			

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 10,000 patient days.

Vidant Duplin Hospital, Kenansville, Duplin County

Catheter-Associated Urinary Tract Infections (CAUTI)

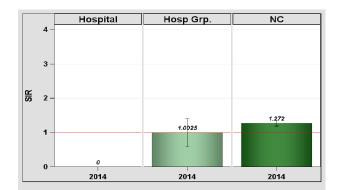


Table 4. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2009.

Type of Unit	# Obs	Cath Day	s Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Medical/surgical	2	384	5.21	0.5			No Conclusion
YTD Total for Reporting Units	2	384	5.21	0.5			No Conclusion

Figure 4. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 catheter days.

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

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	ntl baseline
Abdominal hysterectomy	0	13		0.13			No Conclusion

Note: Infections from deep incisional and/or organ space

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

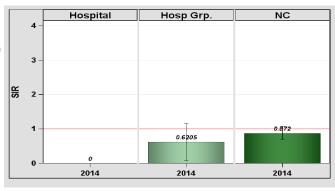


Figure 5. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Surgical Site Infections (SSI) after Colon Surgeries

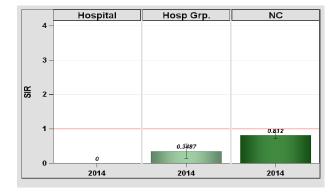


Table 6. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	ntl baseline
Colon surgery	0	3		0.11			No Conclusion

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

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

Figure 6. SIRs and 95% Confidence Intervals for Colon Surgeries, Jan-Dec 2014.

Commentary from Hospitals:

Vidant Edgecombe Hospital, Tarboro, Edgecombe County

2014 Hospital Survey Information

Hospital Type: **Acute Care Hospital**

Medical Affiliation: Maior Admissions in 2014: 4.101 Patient Days in 2014: 16,575 Total Number of Beds: 117 Number of ICU Beds: 8 FTE* Infection Preventionists: 1 00 Number of FTEs* per 100 beds: 0.85



Central Line-Associated Bloodstream Infections (CLABSI)

Table 1. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008. Hosp Grp. NC Hospital 똜 0.3238

95% CI # Obs Line Days Rate # Pred SIR 2.57 0 Medical/surgical n 1,226 0 , 1.164 Same YTD Total for Reporting Units 0 1,226 0 2.57 0 , 1.164 Same

Figure 1. Rates and 95% Confidence Intervals, Jan-Dec 2014.

2014

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1.000 central line days

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

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. Rates reported here may be higher than rates based on clinically-defined illness.

Table 2. Rate and SIR. Jan-Dec 2014 in Comparison to National Baseline Data from 2010-2011.

2014

Location	# Obs	Pat Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Facility-wide inpatient	1	16,575	0.06	5 1.24	0.805	0.040, 3.971	Same

2014

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 patient days

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

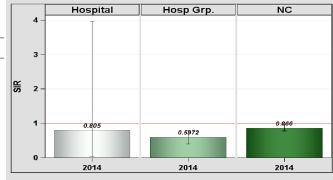


Figure 2. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

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.

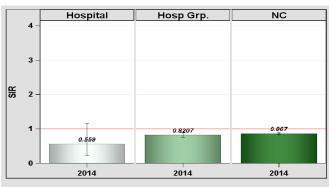


Figure 3. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

1	Table 3. Rate and SIR, Jan-Dec 2014 in Comparison to National Baseline Data from 2010-2011.										
1	Location	# Obs	# Pat Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline			
	Facility-wide inpatient	6	15,151	3.96	10.73	0.559	0.227, 1.164	Same			

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 10,000 patient days.

^{*}FTE = Full-time equivalent

Vidant Edgecombe Hospital, Tarboro, Edgecombe County

Catheter-Associated Urinary Tract Infections (CAUTI)

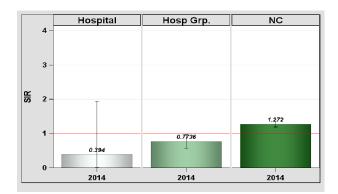


Table 4. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2009.

Type of Unit	# Obs	Cath Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Medical/surgical	1	1,104	0.91	2.54	0.394	0.020, 1.942	Same
YTD Total for Reporting Units	1	1,104	0.91	2.54	0.394	0.020, 1.942	Same

Figure 4. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 catheter days.

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

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	ntl baseline
Abdominal hysterectomy	0	27	0	0.3			No Conclusion

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

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

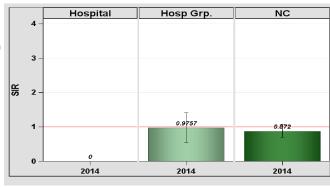


Figure 5. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Surgical Site Infections (SSI) after Colon Surgeries

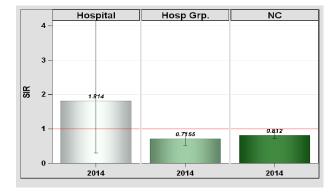


Table 6. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	ntl baseline
Colon surgery	2	35	5.71	1.1	1.814	0.304, 5.994	Same

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

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

Figure 6. SIRs and 95% Confidence Intervals for Colon Surgeries, Jan-Dec 2014.

Commentary from Hospitals:

Vidant Medical Center, Greenville, Pitt County

2014 Hospital Survey Information

Hospital Type: **Acute Care Hospital**

Medical Affiliation: Major Admissions in 2014: 42,399 Patient Days in 2014: 258,875 Total Number of Beds: 909 Number of ICU Beds: 164 FTE* Infection Preventionists: 5.00 Number of FTEs* per 100 beds: 0.55



*FTE = Full-time equivalent

Central Line-Associated Bloodstream Infections (CLABSI)

NC Hosp Grp. Hospital 뚮

0.3798

2014

95% CI # Obs Line Days Rate # Pred SIR Medical 11.67 0.086 1 4,490 0.22 0.004, 0.422 Better Medical cardiac 0.057. 1.125 2 2,938 0.68 5.88 0.34 Same Neonatal Level III 2 0.297 0.050. 0.981 2,614 0.77 6.74 Retter Neurosurgical O 0 , 1.964 610 n 1.53 Same Pediatric medical/surgical 1.596 2.51 4.79 0.835 0.265, 2.015 Same 7 Surgical 3,044 0.33 0.143 0.007, 0.704 Better 0 Surgical cardiothoracic 4,842 0 6.78 0 , 0.442 Better YTD Total for Reporting Units 10 20,134 0.5 44.38 0.225 0.114, 0.402 Retter

Table 1. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Figure 1. Rates and 95% Confidence Intervals, Jan-Dec 2014.

2014

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1.000 central line days

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

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. Rates reported here may be higher than rates based on clinically-defined illness.

Table 2. Rate and SIR, Jan-Dec 2014 in Comparison to National Baseline Data from 2010-2011.

Location	# Obs Pat [Days Rate #F	red SIR	95% CI	Compared to ntl baseline
Facility-wide inpatient	15 25	7,078 0.06 25	.59 0.586	0.341, 0.945	Better

0.384

2014

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 patient days

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

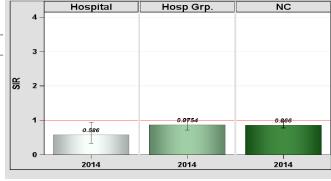


Figure 2. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

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.

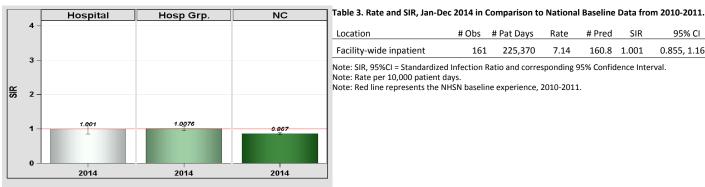


Figure 3. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Location		# Pat Days		# Pred		95% CI	Compared to ntl baseline
Facility-wide inpatient	161	225,370	7.14	160.8	1.001	0.855, 1.165	Same

Note: SIR. 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 10,000 patient days.

Vidant Medical Center, Greenville, Pitt County

Catheter-Associated Urinary Tract Infections (CAUTI)

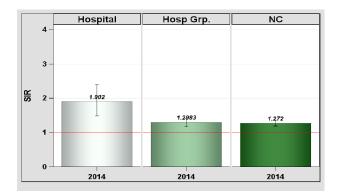


Table 4. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2009.

Type of Unit	# Obs	Cath Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Medical	26	4,474	5.81	10.29	2.527	1.686, 3.649	Worse
Medical cardiac	9	3,085	2.92	6.17	1.459	0.711, 2.677	Same
Neurosurgical	11	751	14.65	3.3	3.329	1.750, 5.786	Worse
Pediatric medical/surgical	1	655	1.53	1.83	0.545	0.027, 2.689	Same
Surgical	16	3,320	4.82	8.63	1.854	1.097, 2.946	Worse
Surgical cardiothoracic	3	2,628	1.14	4.47	0.672	0.171, 1.828	Same
YTD Total for Reporting Units	66	14,913	4.43	34.7	1.902	1.483, 2.405	Worse

Figure 4. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 catheter days.

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

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Abdominal hysterectomy	3	285	1.05	2.92	1.029	0.262, 2.800	Same

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

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

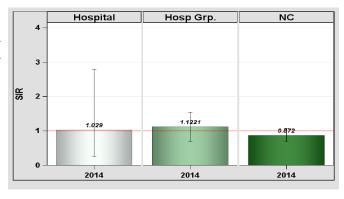


Figure 5. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Surgical Site Infections (SSI) after Colon Surgeries

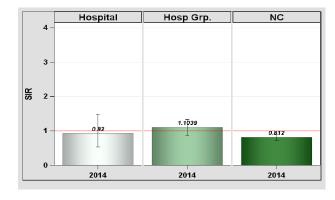


Table 6. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	ntl baseline
Colon surgery	15	491	3.05	16.3	0.92	0.535, 1.484	Same

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

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

Figure 6. SIRs and 95% Confidence Intervals for Colon Surgeries, Jan-Dec 2014.

Commentary from Hospitals:

The infection rates above reflect our initiatives to make patient care at Vidant Medical Center safe for all of our patients, and those efforts are ongoing.

Refer to HAI in N.C. Reference Report - October 2012 (rev July 2013) for further explanation of presented statistics (epi.publichealth.nc.gov/cd/hai/figures/hai_jul2013_reference.pdf). Data as of March 12, 2015.

Vidant Roanoke Chowan Hospital, Ahoskie, Hertford County

2014 Hospital Survey Information

Hospital Type: **Acute Care Hospital**

Medical Affiliation: No 4,264 Admissions in 2014: Patient Days in 2014: 20,681 Total Number of Beds: 90 Number of ICU Beds: 10 FTE* Infection Preventionists: 1.00 Number of FTEs* per 100 beds: 1.11



*FTE = Full-time equivalent

Central Line-Associated Bloodstream Infections (CLABSI)

Table 1. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008. Hosp Grp. NC Hospital 뚮 0.3238

Obs Line Days Rate # Pred SIR 0.74 Medical/surgical n 496 n No Conclusion YTD Total for Reporting Units 0 496 0 0.74 No Conclusion

Figure 1. Rates and 95% Confidence Intervals, Jan-Dec 2014.

2014

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1.000 central line days

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

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. Rates reported here may be higher than rates based on clinically-defined illness.

Table 2. Rate and SIR, Jan-Dec 2014 in Comparison to National Baseline Data from 2010-2011.

2014

Facility-wide inpatient 1 19,105 0.05 1 0.995 0.050, 4.909 Same	Location	# Obs	Pat Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline	
	Facility-wide inpatient	1	19,105	0.05	5 1	0.995	0.050, 4.909	Same	

2014

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 patient days

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

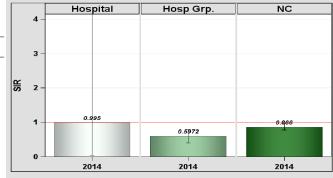


Figure 2. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

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.

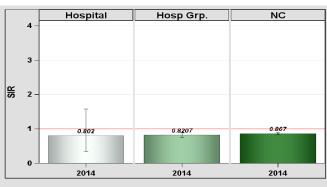


Figure 3. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

1	Table 3. Rate and SIR, Jan-Dec 2014 in Comparison to National Baseline Data from 2010-2011.											
1	Location	# Obs	# Pat Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline				
	Facility-wide inpatient	7	18,324	3.82	8.72	0.802	0.351, 1.587	Same				

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 10,000 patient days.

Vidant Roanoke Chowan Hospital, Ahoskie, Hertford County

Catheter-Associated Urinary Tract Infections (CAUTI)

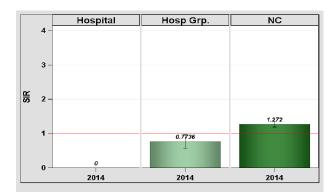


Table 4. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2009.

Type of Unit	# Obs	Cath Day	s Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Medical/surgical	4	763	5.24	0.99			No Conclusion
YTD Total for Reporting Units	4	763	5.24	0.99			No Conclusion

Figure 4. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 catheter days.

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

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	ntl baseline
Abdominal hysterectomy	0	27	0	0.28			No Conclusion

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

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

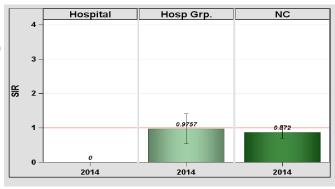


Figure 5. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Surgical Site Infections (SSI) after Colon Surgeries

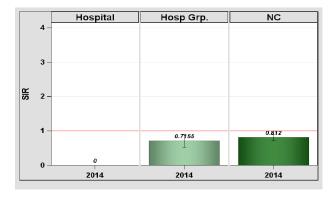


Table 6. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	ntl baseline
Colon surgery	1	27	3.7	0.82			No Conclusion

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

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

Figure 6. SIRs and 95% Confidence Intervals for Colon Surgeries, Jan-Dec 2014.

Commentary from Hospitals:

No comments provided.

Wake Forest Baptist Health-Davie Medical Center, Mocksville, Davie County

2014 Hospital Survey Information

Hospital Type: Acute Care Hospital

Medical Affiliation: Nο 178 Admissions in 2014: Patient Days in 2014: 4,361 Total Number of Beds: 20 Number of ICU Beds: 0 FTF* Infection Preventionists: 0.40 Number of FTEs* per 100 beds: 2.00



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

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.

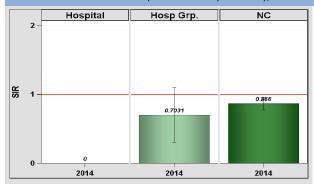


Table 1. Rate and SIR, Jan-Dec 2014 in Comparison to National Baseline Data from 2010-2011. Compared to ntl baseline # Obs Pat Days Rate # Pred SIR Facility-wide inpatient No Conclusion 2,509 0.09

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 patient days.

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

Figure 1. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

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 2. Rate and SIR, Jan-Dec 2014 in Comparison to National Baseline Data from 2010-2011.

Location	# Obs	Pat Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Facility-wide inpatient	0	2,509	0	1.37	0	, 2.188	Same

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 10,000 patient days

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

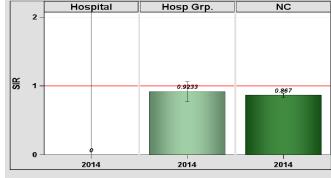


Figure 2. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Other Healthcare-Associated Infections (HAIs)

Davie Medical Center does not report CLABSIs, CAUTIs, or SSIs to the N.C. Division of Public Health.

Commentary from Hospitals:

No comments provided.

^{*}FTE = Full-time equivalent

Wake Forest Baptist Health-Lexington Medical Center, Lexington, Davidson County

2014 Hospital Survey Information

Hospital Type: **Acute Care Hospital**

Medical Affiliation: Nο 3,802 Admissions in 2014: Patient Days in 2014: 10,688 Total Number of Beds: 85 Number of ICU Beds: 21 FTE* Infection Preventionists: 0.60 Number of FTEs* per 100 beds: 0.71



*FTE = Full-time equivalent

Central Line-Associated Bloodstream Infections (CLABSI)

Table 1. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008. Hosp Grp. NC Hospital 뚮 0.384 0.1891 2014 2014 2014

Obs Line Days Rate # Pred SIR 0.53 Medical/surgical O 352 n No Conclusion YTD Total for Reporting Units 0 352 0 0.53 No Conclusion

Figure 1. Rates and 95% Confidence Intervals, Jan-Dec 2014.

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1.000 central line days

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

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. Rates reported here may be higher than rates based on clinically-defined illness.

Table 2. Rate and SIR, Jan-Dec 2014 in Comparison to National Baseline Data from 2010-2011.

Location	# Obs	Pat Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Facility-wide inpatient	1	10,089	0.1	0.52			No Conclusion

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 patient days

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

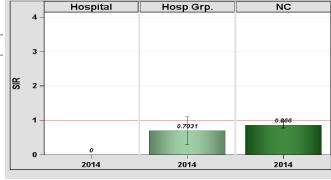
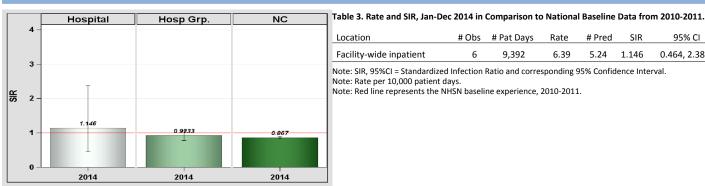


Figure 2. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

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.



Location	# Obs	# Pat Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Facility-wide inpatient	6	9,392	6.39	5.24	1.146	0.464, 2.383	Same

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 10,000 patient days.

Figure 3. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Wake Forest Baptist Health-Lexington Medical Center, Lexington, Davidson County

Catheter-Associated Urinary Tract Infections (CAUTI)

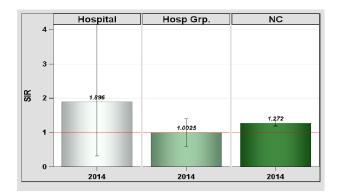


Table 4. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2009.

Type of Unit	# Obs	Cath Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline	
Medical/surgical	2	879	2.28	1.05	1.896	0.318, 6.264	Same	
YTD Total for Reporting Units	2	879	2.28	1.05	1.896	0.318, 6.264	Same	

Figure 4. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 catheter days.

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

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	ntl baseline
Abdominal hysterectomy	0	18		0.15			No Conclusion

Note: Infections from deep incisional and/or organ space

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

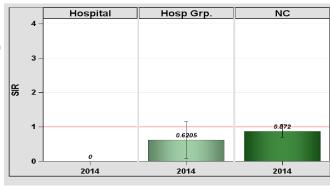


Figure 5. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Surgical Site Infections (SSI) after Colon Surgeries

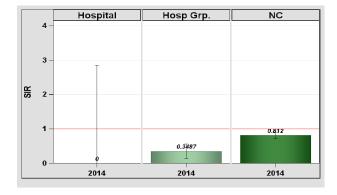


Table 6. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	ntl baseline
Colon surgery	0	34	0	1.05	0	, 2.846	Same

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

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

Figure 6. SIRs and 95% Confidence Intervals for Colon Surgeries, Jan-Dec 2014.

Commentary from Hospitals:

No comments provided.

Wake Forest University Baptist Medical Center, Winston-Salem, Forsyth County

2014 Hospital Survey Information

Acute Care Hospital Hospital Type:

Medical Affiliation: Major Admissions in 2014: 36,363 Patient Days in 2014: 228,293 Total Number of Beds: 885 Number of ICU Beds: 176 FTE* Infection Preventionists: 5.00 Number of FTEs* per 100 beds: 0.56



*FTE = Full-time equivalent

Central Line-Associated Bloodstream Infections (CLABSI)

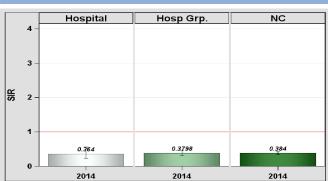


Table 1. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Type of Unit	# Obs	Line Days	Rate	# Pred	SIR	95% CI	ntl baseline
Burn	3	663	4.52	3.65	0.823	0.209, 2.239	Same
Medical	2	5,216	0.38	13.56	0.147	0.025, 0.487	Better
Medical cardiac	3	1,739	1.73	3.48	0.863	0.219, 2.348	Same
Medical/surgical	2	1,360	1.47	2.86	0.7	0.117, 2.314	Same
Neonatal Level II/III	1	4,311	0.23	11.79	0.085	0.004, 0.418	Better
Neurosurgical	0	1,382	0	3.46	0	, 0.867	Better
Pediatric medical/surgical	1	1,197	0.84	3.59	0.278	0.014, 1.373	Same
Surgical	2	1,098	1.82	2.53	0.792	0.133, 2.617	Same
Surgical cardiothoracic	1	2,651	0.38	3.71	0.269	0.013, 1.329	Same
Trauma	4	988	4.05	3.56	1.125	0.357, 2.713	Same

Note: ትៃ ትៃ አስተመመር ነው። በተመቀመር ነው። Note: Ratio and corresponding 95% Confidence Interval. 0.558 Note: Rate per 1,000 central line days.

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

Figure 1. Rates and 95% Confidence Intervals, Jan-Dec 2014.

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. Rates reported here may be higher than rates based on clinically-defined illness.

Table 2. Rate and SIR, Jan-Dec 2014 in Comparison to National Baseline Data from 2010-2011.

Location	# Obs Pat Days	Rate # Pred	SIR 95% CI	Compared to ntl baseline
Facility-wide inpatient	25 210,52	0.12 31.35	0.797 0.528, 1.160	Same

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 patient days

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

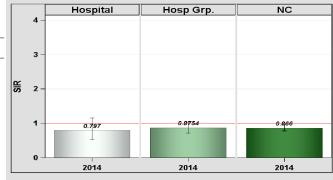
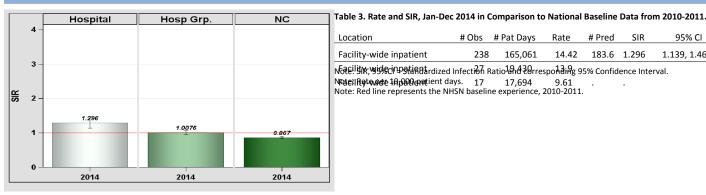


Figure 2. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

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.



Compared to ntl baseline Location # Obs # Pat Days Rate # Pred Facility-wide inpatient 238 165,061 14.42 183.6 1.296 1.139, 1.469 Worse

Note: Rate vote 10,000 evatient days. 17 17.694 Note: Red line represents the NHSN baseline

No Conclusion No Conclusion

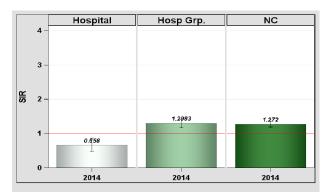
Better

Figure 3. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Wake Forest University Baptist Medical Center, Winston-Salem, Forsyth County

Catheter-Associated Urinary Tract Infections (CAUTI)

Type of Unit



Type of offic	# 003	Cath Days	nate	# FIEU	SIN	33/0 CI	iiti baseiiile	
Burn	1	1,111	0.9	4.89	0.205	0.010, 1.009	Same	
Medical	7	9,007	0.78	20.72	0.338	0.148, 0.668	Better	
Medical cardiac	7	1,896	3.69	3.79	1.846	0.807, 3.652	Same	
Medical/surgical	0	1,954	0	4.49	0	, 0.667	Better	
Neurosurgical	17	3,268	5.2	14.38	1.182	0.712, 1.854	Same	
Pediatric medical/surgical	7	717	9.76	2.01	3.487	1.525, 6.897	Worse	
Surgical	0	2,293	0	5.96	0	, 0.502	Better	
Surgical cardiothoracic	6	2,678	2.24	4.55	1.318	0.534, 2.741	Same	
Trauma	2	3,122	0.64	10.61	0.188	0.032, 0.623	Better	
YTD Total for Reporting Units	47	26,046	1.8	71.41	0.658	0.489, 0.868	Better	

Table 4. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2009.

Drad

Ohe Cath Dave Rate

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 catheter days.

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

Figure 4. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

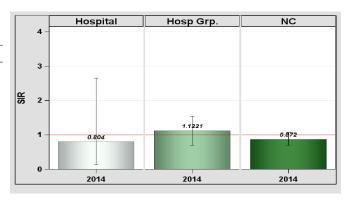
Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	ntl baseline
Abdominal hysterectomy	2	210	0.95	2.49	0.804	0.135, 2.656	Same

Note: Infections from deep incisional and/or organ space

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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



Compared to

Figure 5. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Surgical Site Infections (SSI) after Colon Surgeries



Table 6. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Colon surgery	20	373	5.36	13.58	1.473	0.925, 2.235	Same

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

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

Figure 6. SIRs and 95% Confidence Intervals for Colon Surgeries, Jan-Dec 2014.

Commentary from Hospitals:

Wake Forest Baptist Health continually strives to provide a safe environment for patients, their families and our community. In response to the C. difficile rate (CDI LabID), Wake Forest Baptist Health is reinforcing appropriate infection prevention measures (e.g., proper hand hygiene, environmental cleaning, and appropriate isolation of patients), and has launched several comprehensive pilot programs in high risk patients (e.g. medical ICU) to address this issue.

WakeMed Cary Hospital, Cary, Wake County

2014 Hospital Survey Information

Hospital Type: **Acute Care Hospital**

Medical Affiliation: No 12,150 Admissions in 2014: Patient Days in 2014: 46,024 Total Number of Beds: 176 Number of ICU Beds: 12 FTE* Infection Preventionists: 1.00 Number of FTEs* per 100 beds: 0.57

Hospital

1.302

2014



*FTE = Full-time equivalent

똜

Central Line-Associated Bloodstream Infections (CLABSI)

Table 1. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008. Hosp Grp. NC

2014

Obs Line Days Rate # Pred SIR 95% CI 1.302 0.218, 4.302 Medical/surgical 2 1,024 1.95 1.54 Same 1.95 YTD Total for Reporting Units 2 1,024 1.302 0.218, 4.302 1.54 Same

Figure 1. Rates and 95% Confidence Intervals, Jan-Dec 2014.

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1.000 central line days

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

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. Rates reported here may be higher than rates based on clinically-defined illness.

Table 2. Rate and SIR, Jan-Dec 2014 in Comparison to National Baseline Data from 2010-2011.

0.3238

2014

Facility-wide inpatient 1 44,480 0.02 2.18 0.458 0.023, 2.259 Same	Location	# Obs Pat Days	# Obs Pat Days Rate # Pred SIR	Compared to 95% CI ntl baseline	
	Facility-wide inpatient	1 44,480	le inpatient 1 44,480 0.02 2.18 0.458	0.023, 2.259 Same	

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 patient days

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



Figure 2. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

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.

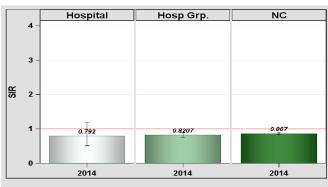


Figure 3. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

1	Table 3. Rate and SIR, Jan-Dec	2014 in	Comparison to	Nationa	l Baseline	Data fro	m 2010-2011.	
1	Location	# Obs	# Pat Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
	Facility-wide inpatient	22	38,112	5.77	27.77	0.792	0.509, 1.180	Same

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 10,000 patient days.

WakeMed Cary Hospital, Cary, Wake County

Catheter-Associated Urinary Tract Infections (CAUTI)

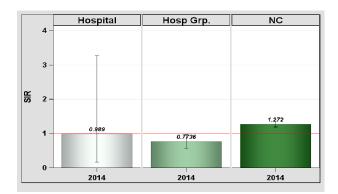


Table 4. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2009.

Type of Unit	# Obs	Cath Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Medical/surgical	2	1,556	1.29	2.02	0.989	0.166, 3.267	Same
YTD Total for Reporting Units	2	1,556	1.29	2.02	0.989	0.166, 3.267	Same

Figure 4. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 catheter days.

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

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Abdominal hysterectomy	0	126	0	1.23	0	, 2.433	Same

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

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

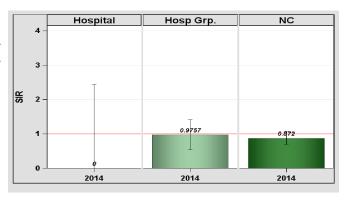


Figure 5. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Surgical Site Infections (SSI) after Colon Surgeries

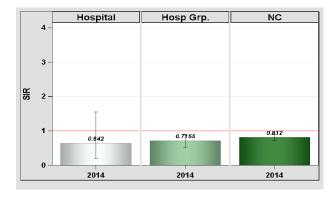


Table 6. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Colon surgery	4	198	2.02	6.23	0.642	0.204, 1.549	Same

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

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

Figure 6. SIRs and 95% Confidence Intervals for Colon Surgeries, Jan-Dec 2014.

Commentary from Hospitals:

No comments provided.

WakeMed, Raleigh, Wake County

2014 Hospital Survey Information

Acute Care Hospital Hospital Type:

Medical Affiliation: Graduate Admissions in 2014: 36,001 Patient Days in 2014: 167,356 Total Number of Beds: 626 Number of ICU Beds: 134 FTE* Infection Preventionists: 7 00 Number of FTEs* per 100 beds: 1.12



*FTE = Full-time equivalent

Central Line-Associated Bloodstream Infections (CLABSI)

NC Hosp Grp. Hospital 뚮 0.3748 0.384 2014 2014 2014

Obs Line Days Rate # Pred SIR 95% CI Medical 2 1,925 1.04 3.66 0.547 0.092. 1.807 Same Medical cardiac 0.183, 1.109 5 4.997 1 9.99 0.5 Same Neonatal Level II/III 0.184. 1.399 4 3,062 1.31 6.9 0.58 Same Pediatric medical/surgical 2 1.055 0.177.3.485 632 3.16 1.9 Same Surgical cardiothoracic 1 2.165 0.463.03 0.33 0.017. 1.627 Same 1 3,659 0.27 13.17 0.076 0.004, 0.374 Better YTD Total for Reporting Units 15 16,440 0.91 38.65 0.388 0.226, 0.626 Better

Table 1. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Figure 1. Rates and 95% Confidence Intervals, Jan-Dec 2014.

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1.000 central line days

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

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. Rates reported here may be higher than rates based on clinically-defined illness.

Table 2. Rate and SIR, Jan-Dec 2014 in Comparison to National Baseline Data from 2010-2011.

Location	# Obs	Pat Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline	
Facility-wide inpatient	14	167,357	0.08	3 10.49	1.335	0.760, 2.187	Same	

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1.000 patient days

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

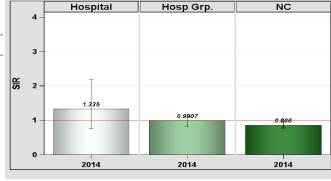
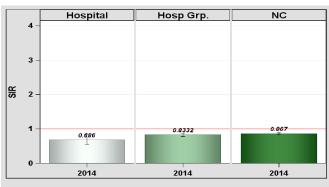


Figure 2. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

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.



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

Compared to ntl baseline Location # Obs # Pat Days # Pred 95% CI Rate 0.548, 0.850 Facility-wide inpatient 80 144,013 5.56 116.54 0.686 Better

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Table 3. Rate and SIR, Jan-Dec 2014 in Comparison to National Baseline Data from 2010-2011.

Note: Rate per 10,000 patient days

Figure 3. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

WakeMed, Raleigh, Wake County

Catheter-Associated Urinary Tract Infections (CAUTI)

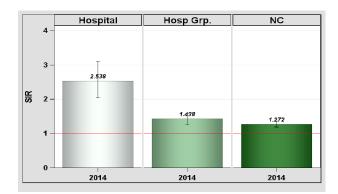


Table 4. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2009.

Type of Unit	# Obs	Cath Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Medical	10	2,102	4.76	4.2	2.379	1.208, 4.240	Worse
Medical cardiac	45	5,887	7.64	11.77	3.822	2.821, 5.069	Worse
Pediatric medical/surgical	0	477	0	1.34	0	, 2.243	Same
Surgical cardiothoracic	5	2,285	2.19	3.88	1.287	0.472, 2.853	Same
Trauma	28	3,964	7.06	13.48	2.078	1.408, 2.962	Worse
YTD Total for Reporting Units	88	14,715	5.98	34.68	2.538	2.048, 3.112	Worse

Figure 4. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 catheter days.

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

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Abdominal hysterectomy	2	268	0.75	2.71	0.738	0.124, 2.437	Same

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

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

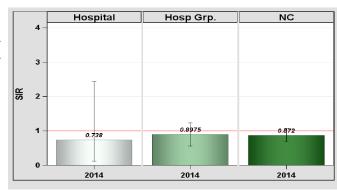


Figure 5. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Surgical Site Infections (SSI) after Colon Surgeries

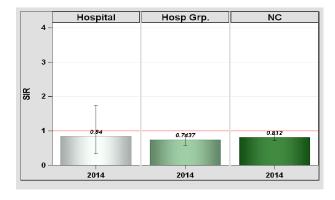


Table 6. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	ntl baseline
Colon surgery	6	202	2.97	7.15	0.84	0.340, 1.747	Same

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

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

Figure 6. SIRs and 95% Confidence Intervals for Colon Surgeries, Jan-Dec 2014.

Commentary from Hospitals:

No comments provided.

Wayne Memorial Hospital, Goldsboro, Wayne County

2014 Hospital Survey Information

Hospital Type: **Acute Care Hospital**

Medical Affiliation: Nο Admissions in 2014: 12,016 Patient Days in 2014: 52,285 Total Number of Beds: 284 Number of ICU Beds: 16 FTE* Infection Preventionists: 2.13 Number of FTEs* per 100 beds: 0.75



*FTE = Full-time equivalent

Central Line-Associated Bloodstream Infections (CLABSI)

Table 1. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008. Hosp Grp. NC Hospital 뚮 0.6397 2014 2014 2014

Obs Line Days Rate # Pred SIR 95% CI 0.185 Medical/surgical 1 3,597 0.28 5.4 0.009, 0.914 Better YTD Total for Reporting Units 1 3,597 0.185 0.009, 0.914 Better 0.28 5.4

Figure 1. Rates and 95% Confidence Intervals, Jan-Dec 2014.

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1.000 central line days

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

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. Rates reported here may be higher than rates based on clinically-defined illness.

Table 2. Rate and SIR, Jan-Dec 2014 in Comparison to National Baseline Data from 2010-2011.

Location	# Obs	Pat Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline	
Facility-wide inpatient	5	52,285	0.1	3.36	1.49	0.546, 3.302	Same	

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 patient days

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

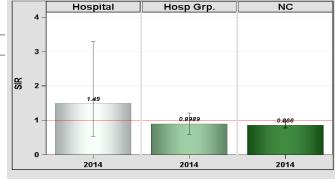


Figure 2. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

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.

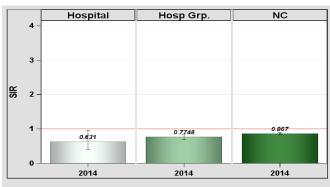


Figure 3. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

1	Table 3. Rate and SIR, Jan-Dec	2014 in (Comparison to	Nationa	l Baseline	Data fro	m 2010-2011.	
1	Location	# Obs	# Pat Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
	Facility-wide inpatient	19	49,110	3.87	30.12	0.631	0.391, 0.967	Better

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 10,000 patient days.

Wayne Memorial Hospital, Goldsboro, Wayne County

Catheter-Associated Urinary Tract Infections (CAUTI)

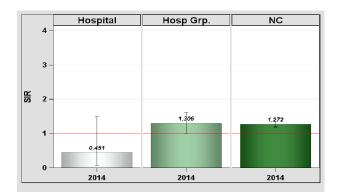


Table 4. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2009.

Type of Unit	# Obs	Cath Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline	
Medical/surgical	2	3,696	0.54	4.44	0.451	0.076, 1.490	Same	
YTD Total for Reporting Units	2	3,696	0.54	4.44	0.451	0.076, 1.490	Same	

Figure 4. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 catheter days.

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

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Abdominal hysterectomy	0	171	0	1.8	0	, 1.662	Same

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

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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



Figure 5. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Surgical Site Infections (SSI) after Colon Surgeries

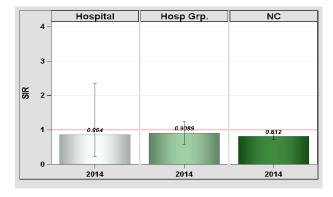


Table 6. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	ntl baseline
Colon surgery	3	105	2.86	3.47	0.864	0.220, 2.350	Same

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

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

Figure 6. SIRs and 95% Confidence Intervals for Colon Surgeries, Jan-Dec 2014.

Commentary from Hospitals:

No comments provided.

Wesley Long Hospital, Greensboro, Guilford County

2014 Hospital Survey Information

Hospital Type: **Acute Care Hospital**

Medical Affiliation: No 9,563 Admissions in 2014: Patient Days in 2014: 40,786 Total Number of Beds: 175 Number of ICU Beds: 20 FTE* Infection Preventionists: 1.00 Number of FTEs* per 100 beds: 0.57



*FTE = Full-time equivalent

Central Line-Associated Bloodstream Infections (CLABSI)

Hosp Grp. NC Hospital 뚮 0.3238

95% CI # Obs Line Days Rate # Pred SIR 2.55 0 Medical/surgical n 1,699 0 , 1.175 Same 1,699 YTD Total for Reporting Units 0 0 2.55 0 , 1.175 Same

Table 1. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Figure 1. Rates and 95% Confidence Intervals, Jan-Dec 2014.

2014

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1.000 central line days

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

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. Rates reported here may be higher than rates based on clinically-defined illness.

Table 2. Rate and SIR, Jan-Dec 2014 in Comparison to National Baseline Data from 2010-2011.

2014

Location	# Obs	Pat Days	Rate	# Pred	SIR	95% CI	ntl baseline
Facility-wide inpatient	1	38,668	0.03	3 2.14	0.468	0.023, 2.307	Same
Note: SIR 95%CI - Standard	izad Infac	tion Ratio ar	nd corres	nonding Q	5% Confid	lence Interval	

2014

Note: Rate per 1,000 patient days

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

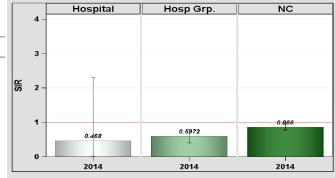


Figure 2. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

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.

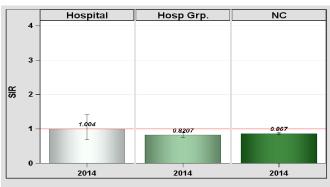


Figure 3. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

1	Table 3. Rate and SIR, Jan-Dec	2014 in (Comparison to	Nationa	l Baseline	Data fro	m 2010-2011.	
1	Location	# Obs	# Pat Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
	Facility-wide inpatient	29	38,668	7.5	28.88	1.004	0.685, 1.423	Same

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 10,000 patient days.

Wesley Long Hospital, Greensboro, Guilford County

Catheter-Associated Urinary Tract Infections (CAUTI)

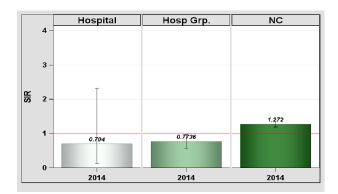


Table 4. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2009.

Type of Unit	# Obs	Cath Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Medical/surgical	2	2,369	0.84	2.84	0.704	0.118, 2.324	Same
YTD Total for Reporting Units	2	2,369	0.84	2.84	0.704	0.118, 2.324	Same

Figure 4. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 catheter days.

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

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	ntl baseline
Abdominal hysterectomy	1	59	1.69	0.54			No Conclusion

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

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

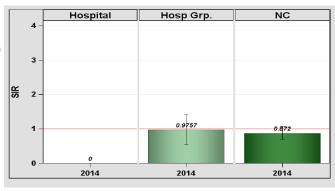


Figure 5. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Surgical Site Infections (SSI) after Colon Surgeries



Table 6. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	ntl baseline
Colon surgery	1	188	0.53	5.71	0.175	0.009, 0.864	Better

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

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

Figure 6. SIRs and 95% Confidence Intervals for Colon Surgeries, Jan-Dec 2014.

Commentary from Hospitals:

Cone Health is committed to preventing Healthcare Associated Infections. We have dedicated teams of experts focused on process improvements to improve our patient outcomes. Please contact Cone Health Infection Prevention if you would like further information.

Refer to HAI in N.C. Reference Report - October 2012 (rev July 2013) for further explanation of presented statistics (epi.publichealth.nc.gov/cd/hai/figures/hai_jul2013_reference.pdf). Data as of March 12, 2015.

Wilkes Regional Medical Center, North Wilkesboro, Wilkes County

2014 Hospital Survey Information

Hospital Type: **Acute Care Hospital**

Medical Affiliation: No 5,617 Admissions in 2014: Patient Days in 2014: 20,327 Total Number of Beds: 130 Number of ICU Beds: FTE* Infection Preventionists: 0.38 Number of FTEs* per 100 beds: 0.29



*FTE = Full-time equivalent

뚮

Central Line-Associated Bloodstream Infections (CLABSI)

Table 1. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008. Hosp Grp. NC Hospital

0.3238

2014

Obs Line Days Rate # Pred SIR 0.55 Medical/surgical O 364 n No Conclusion YTD Total for Reporting Units 0 364 0 0.55 No Conclusion

Figure 1. Rates and 95% Confidence Intervals, Jan-Dec 2014.

2014

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1.000 central line days

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

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. Rates reported here may be higher than rates based on clinically-defined illness.

Table 2. Rate and SIR, Jan-Dec 2014 in Comparison to National Baseline Data from 2010-2011.

Location	# Obs	Pat Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline	
Facility-wide inpatient	1	20,442	0.05	1.16	0.861	0.043, 4.248	Same	

2014

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 patient days

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



Figure 2. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

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.

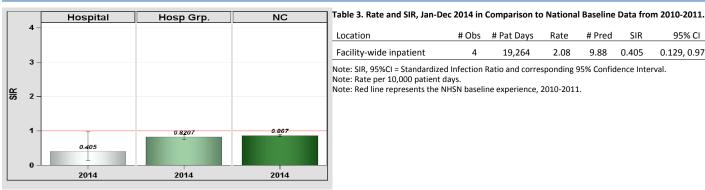


Figure 3. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Location		# Pat Days				95% CI	Compared to ntl baseline
Facility-wide inpatient	4	19,264	2.08	9.88	0.405	0.129, 0.976	Better

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 10,000 patient days.

Wilkes Regional Medical Center, North Wilkesboro, Wilkes County

Catheter-Associated Urinary Tract Infections (CAUTI)

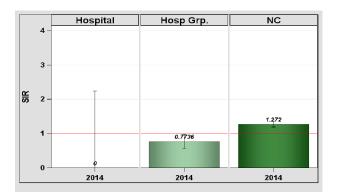


Table 4. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2009.

Type of Unit	# Obs	Cath Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Medical/surgical	0	1,026	0	1.33	0	, 2.246	Same
YTD Total for Reporting Units	0	1,026	0	1.33	0	, 2.246	Same

Figure 4. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 catheter days.

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

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	ntl baseline
Abdominal hysterectomy	0	0		0			No Conclusion

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

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

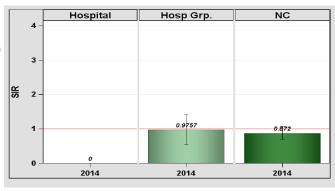


Figure 5. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Surgical Site Infections (SSI) after Colon Surgeries

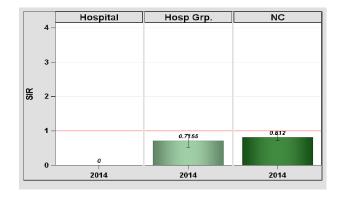


Table 6. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	ntl baseline
Colon surgery	0	13		0.41			No Conclusion

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

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

Figure 6. SIRs and 95% Confidence Intervals for Colon Surgeries, Jan-Dec 2014.

Commentary from Hospitals:

The prevention and reduction of healthcare associated infections is a top priority at Wilkes Regional Medical Center. To accomplish this, infection prevention strategies are continually assessed and measures implemented to decrease the risk for infection. These measures are based on evidence based practices and clinical guidelines. A comprehensive program is provided that encompasses patient care and patient safety.

Refer to HAI in N.C. Reference Report - October 2012 (rev July 2013) for further explanation of presented statistics (epi.publichealth.nc.gov/cd/hai/figures/hai_jul2013_reference.pdf). Data as of March 12, 2015.

Wilson Medical Center, Wilson, Wilson County

2014 Hospital Survey Information

Hospital Type: **Acute Care Hospital**

Medical Affiliation: No 6,572 Admissions in 2014: Patient Days in 2014: 27,460 Total Number of Beds: 145 Number of ICU Beds: 14 FTE* Infection Preventionists: 1.50 Number of FTEs* per 100 beds: 1.03



*FTE = Full-time equivalent

Central Line-Associated Bloodstream Infections (CLABSI)

Hosp Grp. NC Hospital 뚮 0.3238

Obs Line Days Rate # Pred SIR 95% CI 0.829 Medical/surgical 2 1,609 1.24 2.41 0.139, 2.738 Same YTD Total for Reporting Units 2 1,609 2.41 0.829 0.139, 2.738 1.24 Same

Table 1. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Figure 1. Rates and 95% Confidence Intervals, Jan-Dec 2014.

2014

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1.000 central line days

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

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. Rates reported here may be higher than rates based on clinically-defined illness.

Table 2. Rate and SIR, Jan-Dec 2014 in Comparison to National Baseline Data from 2010-2011.

2014

Location	# Obs	Pat Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline	
Facility-wide inpatient	1	33,190	0.03	3 2	0.5	0.025, 2.467	Same	

2014

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 patient days

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

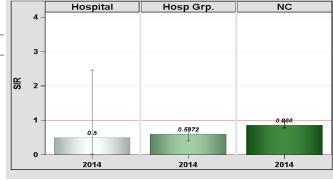


Figure 2. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

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.

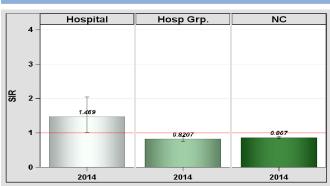


Table 3. Rate and SIR, Jan-Dec 2014 in Comparison to National Baseline Data from 2010-2011.

Location	# Obs	# Pat Days	Rate	# Pred	SIR	95% CI	ntl baseline
Facility-wide inpatient	32	31,246	10.24	21.78	1.469	1.022, 2.049	Worse

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 10,000 patient days.

Figure 3. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Wilson Medical Center, Wilson, Wilson County

Catheter-Associated Urinary Tract Infections (CAUTI)

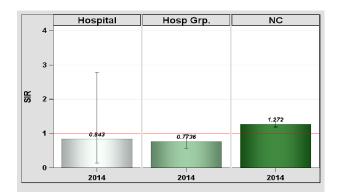


Table 4. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2009.

Type of Unit	# Obs	Cath Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Medical/surgical	2	1,825	1.1	2.37	0.843	0.141, 2.785	Same
YTD Total for Reporting Units	2	1,825	1.1	2.37	0.843	0.141, 2.785	Same

Figure 4. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 catheter days.

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

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	ntl baseline
Abdominal hysterectomy	1	106	0.94	0.87			No Conclusion

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

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

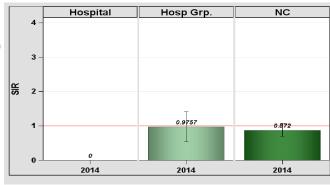


Figure 5. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Surgical Site Infections (SSI) after Colon Surgeries

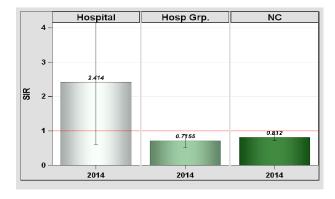


Table 6. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	Compared to ntl baseline	
Colon surgery	3	41	7.32	1.24	2.414	0.614, 6.570	Same	

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

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

Figure 6. SIRs and 95% Confidence Intervals for Colon Surgeries, Jan-Dec 2014.

Commentary from Hospitals:

In 2013, Wilson Medical Center changed the laboratory method for testing C. difficile to a more sensitive molecular test. As expected, the increase in sensitivity of this test resulted in more positive C. difficile reported in 2013. Not all hospitals have converted to this advanced testing method.

Refer to HAI in N.C. Reference Report - October 2012 (rev July 2013) for further explanation of presented statistics (epi.publichealth.nc.gov/cd/hai/figures/hai_jul2013_reference.pdf). Data as of March 12, 2015.

Women's Hospital, Greensboro, Guilford County

2014 Hospital Survey Information

Hospital Type: Acute Care Hospital - Women's

Medical Affiliation: Nο Admissions in 2014: 11,809 Patient Days in 2014: 44,011 Total Number of Beds: 134 Number of ICU Beds: 40 FTE* Infection Preventionists: 1.00 Number of FTEs* per 100 beds: 0.75



*FTE = Full-time equivalent

Central Line-Associated Bloodstream Infections (CLABSI)

Hosp Grp. NC Hospital 똜 0.3238 2014 2014 2014

95% CI # Obs Line Days Rate # Pred Medical/surgical n 8 0.01 No Conclusion , 0.734 Neonatal Level II/III O 4.08 0 Retter 1,752 0 YTD Total for Reporting Units , 0.731 0 0 Retter 0 1,760 4.1

Table 1. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Figure 1. Rates and 95% Confidence Intervals, Jan-Dec 2014.

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1.000 central line days

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

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. Rates reported here may be higher than rates based on clinically-defined illness.

Table 2. Rate and SIR, Jan-Dec 2014 in Comparison to National Baseline Data from 2010-2011.

Location	# Obs	Pat Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Facility-wide inpatient	0	43,562	0	1.56	0	, 1.919	Same

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 patient days

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

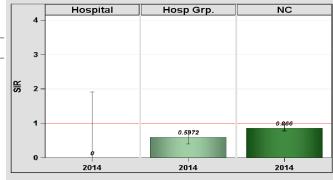
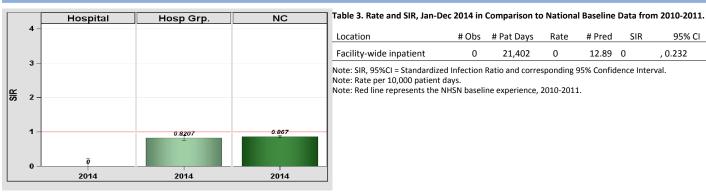


Figure 2. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

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.



Location	# Obs	# Pat Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Facility-wide inpatient	0	21,402	0	12.89	0	, 0.232	Better

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 10,000 patient days.

Figure 3. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Women's Hospital, Greensboro, Guilford County

Catheter-Associated Urinary Tract Infections (CAUTI)

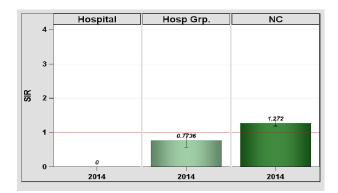


Table 4. Rates and SIRs by ICU Type, Jan-Dec 2014 in Comparison to National Baseline Data from 2009.

Type of Unit	# Obs	Cath Days	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Medical/surgical	0	196	0	0.25			No Conclusion
YTD Total for Reporting Units	0	196	0	0.25			No Conclusion

Figure 4. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 1,000 catheter days.

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

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	Compared to ntl baseline
Abdominal hysterectomy	2	147	1.36	1.65	1.213	0.203, 4.006	Same

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

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

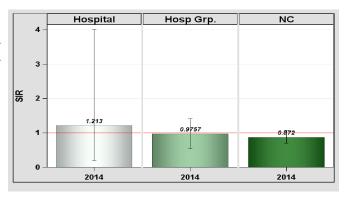


Figure 5. SIRs and 95% Confidence Intervals, Jan-Dec 2014.

Surgical Site Infections (SSI) after Colon Surgeries

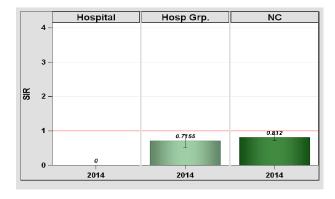


Table 6. Rates and SIRs, Jan-Dec 2014 in Comparison to National Baseline Data from 2006-2008.

Procedure Type	# Obs	Procedures	Rate	# Pred	SIR	95% CI	ntl baseline
Colon surgery	0	1		0.05			No Conclusion

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

Note: SIR, 95%CI = Standardized Infection Ratio and corresponding 95% Confidence Interval.

Note: Rate per 100 inpatient surgeries.

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

Figure 6. SIRs and 95% Confidence Intervals for Colon Surgeries, Jan-Dec 2014.

Commentary from Hospitals:

Cone Health is committed to preventing Healthcare Associated Infections. We have dedicated teams of experts focused on process improvements to improve our patient outcomes. Please contact Cone Health Infection Prevention if you would like further information.

Refer to HAI in N.C. Reference Report - October 2012 (rev July 2013) for further explanation of presented statistics (epi.publichealth.nc.gov/cd/hai/figures/hai_jul2013_reference.pdf). Data as of March 12, 2015.

APPENDICES

APPENDIX A. Definitions

N.C. Division of Public Health, HAI Prevention Program

<u>Term</u>	<u>Definition</u>
Acute care hospital	A hospital that provides acute medical care due to illness, injury or following surgery to patients hospitalized for a brief period of time.
ASA Class	Anesthesiologist's pre-operative assessment of the patient's physical condition, using the American Society of Anesthesiologists' (ASA) Classification of Physical Status. 1. Normally healthy patient 2. Patient with mild systemic disease 3. Patient with severe systemic disease that is not incapacitating 4. Patient with an incapacitating systemic disease, constant threat to life 5. Patient not expected to survive for 24 hours with or without the operation
Bacteremia	Bloodstream infection (BSI).
Beds	The number of staffed beds in a facility or patient care location. This may be different from licensed beds.
Catheter days	A daily count of the number of patients with an indwelling urinary catheter. For example, one patient with an indwelling catheter in place for two days or two patients with indwelling catheters in place for one day each would both result in two catheter days. This number is used when presenting rates of catheter-associated urinary tract infections.
Catheter-associated urinary tract infection	Urinary tract infection (UTI) that occurs in a patient who had an indwelling urinary catheter in place within the 48-hour period before the onset of the UTI.
Central line	A catheter (tube) that doctors place in a large vein in the neck, chest, or groin that ends near the heart. It is used to give medication or fluids or to collect blood for medical tests. Also known as a central venous catheter.
Central line-associated bloodstream infection	A bloodstream infection (BSI) that occurs in a patient who had a central line within the 48-hour period before the onset of the BSI and is not related to an infection at another site.
Central line days	A daily count of the number of patients with a central line. For example, one patient with a central line in place for two days or two patients with central lines in place for one day each would both result in two central line days. This number is used when presenting rates of central line-associated bloodstream infections.
Device days	A daily count of the number of patients with a specific device (e.g., central line, umbilical catheter, ventilator, or urinary catheter) in the patient care location. For example, one patient with a device in place for two days or two patients with devices in place for one day each would both result in two device days. This number is used when presenting rates of infections associated with devices.
Full-time equivalent	The equivalent of one person working full time for one year: 8 hour per day at 5 days per week for 52 weeks per year = 2080 hours per year
Hand hygiene	A general term that applies to routine hand washing, antiseptic hand wash, antiseptic hand rub, or surgical hand antisepsis.
	Routine hand washing is the use of clean water and non-antimicrobial soap to remove germs, soil and other debris from the hands.
	Antiseptic hand washing is the use of water and antimicrobial soap to remove or kill germs on the hands.
Hand hygiene (cont)	Antiseptic hand rub is the use of alcohol-based hand rubs to remove or destroy susceptible

N.C. HAI Quarterly Report - October 2014

<u>Term</u>	<u>Definition</u>
	germs from the hands. Antiseptic hand rubs are less effective when hands are visibly dirty and against some viruses.
	<i>Surgical hand antisepsis</i> is the use of water, antimicrobial soap, and a brush to remove or kill germs and takes 2-6 minutes to complete as both hands and forearms are cleaned. Water and non-antimicrobial soap can also be used but must be followed with an alcohol-based surgical hand scrub.
Healthcare-associated infections	Healthcare-associated infections (HAI) are infections caused by a wide variety of common and unusual bacteria, fungi, and viruses that occur during the course of receiving medical care.
Inpatient rehabilitation facility	A facility that provides rehabilitation services after injury, illness, or surgery. These may be free-standing facilities or specialized units within a hospital.
Intensive care unit	A nursing care area that provides intensive observation, diagnosis, and therapeutic procedures for adults and/or children who are critically ill. Also referred to as critical care unit.
Laboratory-identified Clostridium difficile	A positive laboratory test result for <i>Clostridium difficile</i> .
Laboratory-identified Methicillin-resistant Staphylococcus aureus (MRSA) bacteremia	<i>Staphylococcus aureus</i> cultured from blood specimens that is oxacillin-resistant, cefoxitin-resistant, or methicillin-resistant by standard susceptibility testing methods, or by a laboratory test that is FDA-approved for MRSA detection from isolated colonies.
Long term acute care hospital	A hospital that provides acute medical care due to illness, injury or following surgery but the average length of patient stay is greater than 25 days.
Medical affiliation	Affiliation with a medical school. There are four categories:
	Major - Facility has a program for medical students and post-graduate medical training.
	<i>Graduate</i> - Facility has a program for post-graduate medical training (i.e., residency and/or fellowships).
	Undergraduate - Facility has a program for medical students only.
	No – Hospital not affiliated with a medical school.
Patient days	A daily count of the number of patients in the patient care location during a specified time period.
Rate	Describes the speed with which disease or events occur. The number of diseases or events per unit of time.
Standardized infection ratio	A ratio of observed to expected (or predicted) numbers of events that is adjusted for selected risk factors.
Surgical site infection	Infection that occurs after surgery, in the part of the body where the surgery took place.
Umbilical catheter	Long, thin plastic tubes that travel from the stump of a newborn baby's umbilical cord into the large vessels near the heart.
Urinary catheter	A drainage tube that is inserted into the urinary bladder through the urethra, is left in place, and is connected to a closed collection system.
Validity (data)	The extent to which reported cases of a disease or event correspond accurately to cases of a disease or event that actually occurred.

APPENDIX B. Acronyms

ACH Acute care hospital (short-term)

ASA American Society of Anesthesiologists

CAUTI Catheter-associated urinary tract infection
CCME Carolinas Center for Medical Excellence

CCU Critical care unit

CDB Communicable Disease Branch

CDC Centers for Disease Control and Prevention

CDI, *C. diff*Clostridium difficile
CI
Confidence interval

CMS Centers for Medicare and Medicaid Services
CLABSI Central line-associated bloodstream infection
CRE Carbapenem-resistant Enterobacteriaceae
DHHS Department of Health and Human Services

DPH Division of Public Health

HAI Healthcare-associated Infections

ICU Intensive care unit

IPs Infection preventionists

IRF Inpatient rehabilitation facility
LTAC Long-term acute care hospital

MRSA Methicillin resistant *Staphylococcus aureus*

NCHA North Carolina Hospital Association

NHSN National Healthcare Safety Network

NICU Neonatal intensive (critical) care unit

SIR Standardized infection ratio

SSI Surgical site infection

VRE Vancomycin-resistant Enterococcus

APPENDIX C. Healthcare-Associated Infections Prevention Tips

Appendix C1. Catheter (Central Line)-Associated Bloodstream Infections

Appendix C2. Catheter-Associated Urinary Tract Infections

Appendix C3. Surgical Site Infections

Appendix C4. Methicillin Resistant Staphylococcus aureus

Appendix C5. Clostridium difficile



about

"Catheter-Associated Bloodstream Infections"

(also known as "Central Line-Associated Bloodstream Infections")

What is a catheter-associated bloodstream infection?

A "central line" or "central catheter" is a tube that is placed into a patient's large vein, usually in the neck, chest, arm, or groin. The catheter is often used to draw blood, or give fluids or medications. It may be left in place for several weeks. A bloodstream infection can occur when bacteria or other germs travel down a "central line" and enter the blood. If you develop a catheter-associated bloodstream infection you may become ill with fevers and chills or the skin around the catheter may become sore and red.

Can a catheter-related bloodstream infection be treated?

A catheter-associated bloodstream infection is serious, but often can be successfully treated with antibiotics. The catheter might need to be removed if you develop an infection.

What are some of the things that hospitals are doing to prevent catheter-associated bloodstream infections?

To prevent catheter-associated bloodstream infections doctors and nurses will:

- Choose a vein where the catheter can be safely inserted and where the risk for infection is small.
- Clean their hands with soap and water or an alcohol-based hand rub before putting in the catheter.
- Wear a mask, cap, sterile gown, and sterile gloves when putting in the catheter to keep it sterile. The patient will be covered with a sterile sheet
- Clean the patient's skin with an antiseptic cleanser before putting in the catheter.
- Clean their hands, wear gloves, and clean the catheter opening
 with an antiseptic solution before using the catheter to draw
 blood or give medications. Healthcare providers also clean their
 hands and wear gloves when changing the bandage that covers
 the area where the catheter enters the skin.
- Decide every day if the patient still needs to have the catheter.
 The catheter will be removed as soon as it is no longer needed.
- Carefully handle medications and fluids that are given through the catheter.

What can I do to help prevent a catheter-associated bloodstream infection?

• Ask your doctors and nurses to explain why you need the catheter and how long you will have it.

- Ask your doctors and nurses if they will be using all of the prevention methods discussed above.
- Make sure that all doctors and nurses caring for you clean their hands with soap and water or an alcohol-based hand rub before and after caring for you.

If you do not see your providers clean their hands, please ask them to do so.

- If the bandage comes off or becomes wet or dirty, tell your nurse or doctor immediately.
- Inform your nurse or doctor if the area around your catheter is sore or red.
- Do not let family and friends who visit touch the catheter or the tubing.
- Make sure family and friends clean their hands with soap and water or an alcohol-based hand rub before and after visiting you.

What do I need to do when I go home from the hospital?

Some patients are sent home from the hospital with a catheter in order to continue their treatment. If you go home with a catheter, your doctors and nurses will explain everything you need to know about taking care of your catheter.

- Make sure you understand how to care for the catheter before leaving the hospital. For example, ask for instructions on showering or bathing with the catheter and how to change the catheter dressing.
- Make sure you know who to contact if you have questions or problems after you get home.
- Make sure you wash your hands with soap and water or an alcohol-based hand rub before handling your catheter.
- Watch for the signs and symptoms of catheter-associated bloodstream infection, such as soreness or redness at the catheter site or fever, and call your healthcare provider immediately if any occur.

If you have additional questions, please ask your doctor or nurse.

Co-sponsored by:















"Catheter-Associated Urinary Tract Infection"

What is "catheter-associated urinary tract infection"?

A urinary tract infection (also called "UTI") is an infection in the urinary system, which includes the bladder (which stores the urine) and the kidneys (which filter the blood to make urine). Germs (for example, bacteria or yeasts) do not normally live in these areas; but if germs are introduced, an infection can occur.

If you have a urinary catheter, germs can travel along the catheter and cause an infection in your bladder or your kidney; in that case it is called a catheter-associated urinary tract infection (or "CA-UTI").

What is a urinary catheter?

A urinary catheter is a thin tube placed in the bladder to drain urine. Urine drains through the tube into a bag that collects the urine. A urinary catheter may be used:

- If you are not able to urinate on your own
- To measure the amount of urine that you make, for example, during intensive care
- During and after some types of surgery
- During some tests of the kidneys and bladder

People with urinary catheters have a much higher chance of getting a urinary tract infection than people who don't have a catheter.

How do I get a catheter-associated urinary tract infection (CA-UTI)?

If germs enter the urinary tract, they may cause an infection. Many of the germs that cause a catheter-associated urinary tract infection are common germs found in your intestines that do not usually cause an infection there. Germs can enter the urinary tract when the catheter is being put in or while the catheter remains in the bladder.

What are the symptoms of a urinary tract infection?

Some of the common symptoms of a urinary tract infection are:

- Burning or pain in the lower abdomen (that is, below the stomach)
- Fever
- Bloody urine may be a sign of infection, but is also caused by other problems
- Burning during urination or an increase in the frequency of urination after the catheter is removed.

Sometimes people with catheter-associated urinary tract infections do not have these symptoms of infection.

Can catheter-associated urinary tract infections be treated?

Yes, most catheter-associated urinary tract infections can be treated with antibiotics and removal or change of the catheter. Your doctor will determine which antibiotic is best for you.

What are some of the things that hospitals are doing to prevent catheterassociated urinary tract infections?

To prevent urinary tract infections, doctors and nurses take the following actions.

Catheter insertion

- Catheters are put in only when necessary and they are removed as soon as possible.
- Only properly trained persons insert catheters using sterile ("clean") technique.
- o The skin in the area where the catheter will be inserted is cleaned before inserting the catheter.
- o Other methods to drain the urine are sometimes used, such as
- External catheters in men (these look like condoms and are placed over the penis rather than into the penis)
- Putting a temporary catheter in to drain the urine and removing it right away. This is called intermittent urethral catheterization.

Catheter care

 Healthcare providers clean their hands by washing them with soap and water or using an alcohol-based hand rub before and after touching your catheter.

If you do not see your providers clean their hands, please ask them to do so.

- o Avoid disconnecting the catheter and drain tube. This helps to prevent germs from getting into the catheter tube.
- o The catheter is secured to the leg to prevent pulling on the catheter.
- o Avoid twisting or kinking the catheter.
- Keep the bag lower than the bladder to prevent urine from backflowing to the bladder.
- o Empty the bag regularly. The drainage spout should not touch anything while emptying the bag.

What can I do to help prevent catheter-associated urinary tract infections if I have a catheter?

- Always clean your hands before and after doing catheter care.
- Always keep your urine bag below the level of your bladder.
- . Do not tug or pull on the tubing.
- Do not twist or kink the catheter tubing.
- Ask your healthcare provider each day if you still need the catheter.

What do I need to do when I go home from the hospital?

- If you will be going home with a catheter, your doctor or nurse should explain everything you need to know about taking care of the catheter. Make sure you understand how to care for it before you leave the hospital.
- If you develop any of the symptoms of a urinary tract infection, such as burning or pain in the lower abdomen, fever, or an increase in the frequency of urination, contact your doctor or nurse immediately.
- Before you go home, make sure you know who to contact if you have questions or problems after you get home.

If you have questions, please ask your doctor or nurse.

















"Surgical Site Infections"

What is a Surgical Site Infection (SSI)?

A surgical site infection is an infection that occurs after surgery in the part of the body where the surgery took place. Most patients who have surgery do not develop an infection. However, infections develop in about 1 to 3 out of every 100 patients who have surgery.

Some of the common symptoms of a surgical site infection are:

- Redness and pain around the area where you had surgery
- Drainage of cloudy fluid from your surgical wound
- Fever

Can SSIs be treated?

Yes. Most surgical site infections can be treated with antibiotics. The antibiotic given to you depends on the bacteria (germs) causing the infection. Sometimes patients with SSIs also need another surgery to treat the infection.

What are some of the things that hospitals are doing to prevent SSIs?

To prevent SSIs, doctors, nurses, and other healthcare providers:

- Clean their hands and arms up to their elbows with an antiseptic agent just before the surgery.
- Clean their hands with soap and water or an alcohol-based hand rub before and after caring for each patient.
- May remove some of your hair immediately before your surgery using electric clippers if the hair is in the same area where the procedure will occur. They should not shave you with a razor.
- Wear special hair covers, masks, gowns, and gloves during surgery to keep the surgery area clean.
- Give you antibiotics before your surgery starts. In most cases, you should get antibiotics within 60 minutes before the surgery starts and the antibiotics should be stopped within 24 hours after surgery.
- Clean the skin at the site of your surgery with a special soap that kills germs.

What can I do to help prevent SSIs?

Before your surgery:

• Tell your doctor about other medical problems you may have. Health problems such as allergies, diabetes, and obesity could affect your surgery and your treatment.

- Quit smoking. Patients who smoke get more infections. Talk to your doctor about how you can quit before your surgery.
- Do not shave near where you will have surgery. Shaving with a razor can irritate your skin and make it easier to develop an infection.

At the time of your surgery:

- Speak up if someone tries to shave you with a razor before surgery.
 Ask why you need to be shaved and talk with your surgeon if you have any concerns.
- · Ask if you will get antibiotics before surgery.

After your surgery:

 Make sure that your healthcare providers clean their hands before examining you, either with soap and water or an alcohol-based hand rub.

If you do not see your providers clean their hands, please ask them to do so.

- Family and friends who visit you should not touch the surgical wound or dressings.
- Family and friends should clean their hands with soap and water or an alcohol-based hand rub before and after visiting you. If you do not see them clean their hands, ask them to clean their hands.

What do I need to do when I go home from the hospital?

- Before you go home, your doctor or nurse should explain everything you need to know about taking care of your wound. Make sure you understand how to care for your wound before you leave the hospital.
- Always clean your hands before and after caring for your wound.
- Before you go home, make sure you know who to contact if you have questions or problems after you get home.
- If you have any symptoms of an infection, such as redness and pain at the surgery site, drainage, or fever, call your doctor immediately.

If you have additional questions, please ask your doctor or nurse.

Co-sponsored by:

















(Methicillin-Resistant Staphylococcus aureus)

What is MRSA?

Staphylococcus aureus (pronounced staff-ill-oh-KOK-us AW-ree-us), or "Staph" is a very common germ that about 1 out of every 3 people have on their skin or in their nose. This germ does not cause any problems for most people who have it on their skin. But sometimes it can cause serious infections such as skin or wound infections, pneumonia, or infections of the blood.

Antibiotics are given to kill Staph germs when they cause infections. Some *Staph* are resistant, meaning they cannot be killed by some antibiotics. "Methicillin-resistant Staphylococcus aureus" or "MRSA" is a type of Staph that is resistant to some of the antibiotics that are often used to treat *Staph* infections.

Who is most likely to get an MRSA infection?

In the hospital, people who are more likely to get an MRSA infection are people who:

- have other health conditions making them sick
- · have been in the hospital or a nursing home
- · have been treated with antibiotics.

People who are healthy and who have not been in the hospital or a nursing home can also get MRSA infections. These infections usually involve the skin. More information about this type of MRSA infection, known as "community-associated MRSA" infection, is available from the Centers for Disease Control and Prevention (CDC). http://www.cdc.gov/mrsa

How do I get an MRSA infection?

People who have MRSA germs on their skin or who are infected with MRSA may be able to spread the germ to other people. MRSA can be passed on to bed linens, bed rails, bathroom fixtures, and medical equipment. It can spread to other people on contaminated equipment and on the hands of doctors, nurses, other healthcare providers and visitors.

Can MRSA infections be treated?

Yes, there are antibiotics that can kill MRSA germs. Some patients with MRSA abscesses may need surgery to drain the infection. Your healthcare provider will determine which treatments are best for you.

What are some of the things that hospitals are doing to prevent MRSA infections?

To prevent MRSA infections, doctors, nurses, and other healthcare providers:

- Clean their hands with soap and water or an alcohol-based hand rub before and after caring for every patient.
- Carefully clean hospital rooms and medical equipment.
- Use Contact Precautions when caring for patients with MRSA. Contact Precautions mean:
 - o Whenever possible, patients with MRSA will have a single room or will share a room only with someone else who also has MRSA.
 - o Healthcare providers will put on gloves and wear a gown over their clothing while taking care of patients with MRSA.

- o Visitors may also be asked to wear a gown and gloves.
- When leaving the room, hospital providers and visitors remove their gown and gloves and clean their hands.
- Patients on Contact Precautions are asked to stay in their hospital rooms as much as possible. They should not go to common areas, such as the gift shop or cafeteria. They may go to other areas of the hospital for treatments and tests.
- May test some patients to see if they have MRSA on their skin. This test involves rubbing a cotton-tipped swab in the patient's nostrils or on the skin

What can I do to help prevent MRSA infections?

In the hospital

 Make sure that all doctors, nurses, and other healthcare providers clean their hands with soap and water or an alcohol-based hand rub before and after caring for you.

If you do not see your providers clean their hands, please ask them to do so.

When you go home

• If you have wounds or an intravascular device (such as a catheter or dialysis port) make sure that you know how to take care of them.

Can my friends and family get MRSA when they visit me?

The chance of getting MRSA while visiting a person who has MRSA is very low. To decrease the chance of getting MRSA your family and friends should:

- Clean their hands before they enter your room and when they leave.
- Ask a healthcare provider if they need to wear protective gowns and gloves when they visit you.

What do I need to do when I go home from the hospital?

To prevent another MRSA infection and to prevent spreading MRSA to others:

- Keep taking any antibiotics prescribed by your doctor. Don't take half-doses or stop before you complete your prescribed course.
- Clean your hands often, especially before and after changing your wound dressing or bandage.
- People who live with you should clean their hands often as well.
- Keep any wounds clean and change bandages as instructed until healed.
- Avoid sharing personal items such as towels or razors.
- Wash and dry your clothes and bed linens in the warmest temperatures recommended on the labels.
- Tell your healthcare providers that you have MRSA. This includes home health nurses and aides, therapists, and personnel in doctors' offices.
- Your doctor may have more instructions for you.

If you have guestions, please ask your doctor or nurse.

















about

"Clostridium Difficile"

What is Clostridium difficile infection?

Clostridium difficile [pronounced Klo-STRID-ee-um dif-uh-SEEL], also known as "C. diff" [See-dif], is a germ that can cause diarrhea. Most cases of C. diff infection occur in patients taking antibiotics. The most common symptoms of a C. diff infection include:

Watery diarrhea Fever Loss of appetite Nausea Belly pain and tenderness

Who is most likely to get C. diff infection?

The elderly and people with certain medical problems have the greatest chance of getting *C. diff. C. diff* spores can live outside the human body for a very long time and may be found on things in the environment such as bed linens, bed rails, bathroom fixtures, and medical equipment. *C. diff* infection can spread from person-toperson on contaminated equipment and on the hands of doctors, nurses, other healthcare providers and visitors.

Can C. diff infection be treated?

Yes, there are antibiotics that can be used to treat *C. diff.* In some severe cases, a person might have to have surgery to remove the infected part of the intestines. This surgery is needed in only 1 or 2 out of every 100 persons with *C. diff.*

What are some of the things that hospitals are doing to prevent *C. diff infections?*

To prevent *C. diff.* infections, doctors, nurses, and other healthcare providers:

- Clean their hands with soap and water or an alcohol-based hand rub before and after caring for every patient. This can prevent *C. diff* and other germs from being passed from one patient to another on their hands.
- Carefully clean hospital rooms and medical equipment that have been used for patients with *C. diff*.
- Use Contact Precautions to prevent *C. diff* from spreading to other patients. Contact Precautions mean:
 - o Whenever possible, patients with *C. diff* will have a single room or share a room only with someone else who also has *C. diff*.
 - o Healthcare providers will put on gloves and wear a gown over their clothing while taking care of patients with *C. diff*.
 - o Visitors may also be asked to wear a gown and gloves.
 - o When leaving the room, hospital providers and visitors remove their gown and gloves and clean their hands.

- o Patients on Contact Precautions are asked to stay in their hospital rooms as much as possible. They should not go to common areas, such as the gift shop or cafeteria. They can go to other areas of the hospital for treatments and tests.
- Only give patients antibiotics when it is necessary.

What can I do to help prevent C. diff infections?

Make sure that all doctors, nurses, and other healthcare providers clean their hands with soap and water or an alcohol-based hand rub before and after caring for you.

If you do not see your providers clean their hands, please ask them to do so.

- Only take antibiotics as prescribed by your doctor.
- Be sure to clean your own hands often, especially after using the bathroom and before eating.

Can my friends and family get C. diff when they visit me?

C. diff infection usually does not occur in persons who are not taking antibiotics. Visitors are not likely to get *C. diff*. Still, to make it safer for visitors, they should:

- Clean their hands before they enter your room and as they leave your room
- Ask the nurse if they need to wear protective gowns and gloves when they visit you.

What do I need to do when I go home from the hospital?

Once you are back at home, you can return to your normal routine. Often, the diarrhea will be better or completely gone before you go home. This makes giving *C. diff* to other people much less likely. There are a few things you should do, however, to lower the chances of developing *C. diff* infection again or of spreading it to others.

- If you are given a prescription to treat *C. diff,* take the medicine exactly as prescribed by your doctor and pharmacist. Do not take half-doses or stop before you run out.
- Wash your hands often, especially after going to the bathroom and before preparing food.
- People who live with you should wash their hands often as well.
- If you develop more diarrhea after you get home, tell your doctor immediately.
- Your doctor may give you additional instructions.

If you have questions, please ask your doctor or nurse.















APPENDIX D. Healthcare-Associated Infections (HAI) Advisory Group, January 2015

Deverick Anderson, MD, MPH

Duke Infection Control Outreach Network Duke University Medical Center

Margaret A. Comin, RN, BSN, MPA

Division of Medical Assistance

Evelyn Cook, RN, CIC

APIC - N.C.

Duke Infection Control Outreach Network

Megan Davies, MD (Chair)

N.C. Division of Public Health

Chris DeRienzo, MD, MPP

Duke University Medical Center

Durham-Orange County Medical Society

Heather Dubendris

N.C. Division of Public Health

Evelyn Foust, MPH, CPM

N.C. Division of Public Health

Robert M. Gabel, MD, MSc, FACOEM

Womack Army Medical Center

Teresa M. Gilbert, MT (AMT), CIC

Womack Army Medical Center

Dorothea Handron, APRN, EdD

Consumer/patient advocate

Millie R. Harding, CPA

North Carolina Hospital Association

Debbie S. Holloman, CSSBB

Consumer/patient advocate

G. Mark Holmes, PhD

UNC Gillings School of Global Public Health

Kirk Huslage, RN, BSN, MSPH, CIC

N.C. Statewide Program for Infection Control and Epidemiology

Representative Verla Insko (Orange County)

N.C. House of Representatives

Carol Koeble, MD, MS, CPE

N.C. Center for Hospital Quality and Patient Safety

James Lederer, MD

Novant Health Systems

Jennifer MacFarquhar, RN, MPH, CIC

N.C. Division of Public Health

Jean-Marie Maillard, MD, MSc

N.C. Division of Public Health

MI McCaffrey, MD, CAPT USN (Ret)

Perinatal Quality Collaborative of North Carolina

UNC School of Medicine

Tresor Medju

N.C. Division of Public Health

Catherine Moore, RN, MSN

North Carolina Nurses Association

Zack Moore, MD, MPH

N.C. Division of Public Health

Tammra Morrison, RN BSN

N.C. Division of Public Health

John Morrow, MD

N.C. Association of Local Health Directors

Pitt County Health Department

Vivek Nanda

Blue Cross and Blue Shield of North Carolina

Katie Passaretti, MD

Carolinas Metro Facilities

Sylvia I. Pegg, RN, BSN, CIC

Wake Forest Baptist Health

Charles Riddick, CEO

The Carolinas Center for Medical Excellence

William A. Rutala, PhD, MPH

N.C. Statewide Program in Infection Control and Epidemiology

UNC Health Care System

Megan Sanza, MPH

N.C. Division of Public Health

Robert L. Sautter, PhD, HCLD (ABB)

N.C. Laboratory Response Forum

Carolinas Pathology Group

Daniel J. Sexton, MD

Duke Infection Control Outreach Network

Duke University Health System

Michael E. Toedt, MD, FAAFP

Cherokee Indian Hospital

Christopher W. Woods, MD, MPH

Duke University Health System

Durham VAMC

APPENDIX E. Healthcare Facility Groupings, 2014 National Healthcare Safety Network Annual Hospital Survey Appendix E1. Healthcare Facility Group: Short-term Acute Care Hospitals

Hospital Groups	Hospital Name	Number of Beds
1-99 beds	Angel Medical Center	25
	Angel Medical Center	25
	Angel Medical Center	25
	Blue Ridge Regional Hospital	25
	Caldwell Memorial Hospital	85
	Carolinas Healthcare System Anson	30
	Carolinas Medical Center-University	94
	Cherokee Indian Hospital	18
	Columbus Regional Healthcare System	81
	Dlp - Harris Regional Hospital	86
	Dlp - Swain County Hospital	25
	Dosher Memorial Hospital	25
	Granville Medical Center	62
	Highlands Cashiers Hospital	24
	Hugh Chatham Memorial Hospital	81
	Kings Mountain Hospital	59
	Martin General Hospital	50
	Mcdowell Hospital	45
	Murphy Medical Center	43
	North Carolina Specialty Hospital	18
	Novant Health Brunswick Medical Center	74
	Novant Health Charlotte Orthopedic Hospital	80
	Novant Health Franklin Medical Center	64
	Novant Health Huntersville Medical Center	73
	Novant Health Medical Park Hospital	22
	Park Ridge Health	98
	Person Memorial Hospital	38
	Sandhills Regional Medical Center	64
	Sentara Albemarle Medical Center	88
	St Lukes Hospital	35
	The Outer Banks Hospital	21
	Transylvania Regional Hospital	38
	Vidant Beaufort Hospital	83
	Vidant Bertie Hospital	6
	Vidant Chowan Hospital	25
	Vidant Chowan Hospital	25
	Vidant Duplin Hospital	72
	Vidant Roanoke Chowan Hospital	90
	Wake Forest Baptist Health-Davie Medical Center	20
	Wake Forest Baptist Health-Lexington Medical Center	85
100-199 beds	ARHS-Watauga Medical Center	117
	Annie Penn Hospital	110
	Betsy Johnson Regional	135
	Blue Ridge Healthcare Hospitals-Valdese	131
	Carolinas Healthcare System Blue Ridge	184

APPENDIX E. Healthcare Facility Groupings, 2014 National Healthcare Safety Network Annual Hospital Survey Appendix E1. Healthcare Facility Group: Short-term Acute Care Hospitals

Hospital Groups	Hospital Name	Number of Beds
	Carolinas Medical Center-Lincoln	101
	Carolinas Medical Center-Mercy	160
	Carolinas Medical Center-Union	182
	Carteret General Hospital	135
	Catawba Valley Medical Center	190
	Central Carolina Hospital	116
	Cherry Hospital	197
	Davis Regional Medical Center	130
	Duke Raleigh Hospital	148
	Halifax Regional Medical Center	114
	Haywood Regional Medical Center	100
	Iredell Memorial Hospital	199
	Johnston Health	199
	Lake Norman Regional Medical Center	123
	Lenoir Memorial Hospital	167
	Maria Parham Medical Center	102
	Morehead Memorial Hospital	108
	Nash Health Care Systems	177
	Northern Hospital Of Surry County	100
	Novant Health Matthews Medical Center	137
	Novant Health Thomasville Medical Center	149
	Onslow Memorial Hospital	162
	Pardee Hospital	138
	Randolph Hospital	102
	Rutherford Regional Medical Center	120
	Sampson Regional Medical Center	116
	Scotland Memorial Hospital	104
	Stanly Regional Medical Center	109
	Vidant Edgecombe Hospital	117
	WakeMed Cary Hospital	176
	Wesley Long Hospital	175
	Wilkes Regional Medical Center	130
	Wilson Medical Center	145
	Women's Hospital	134
200-399 beds	Alamance Regional Medical Center	238
	Broughton Hospital	297
	CarolinaEast Medical Center	350
	Carolinas Healthcare System Cleveland	241
	Carolinas Medical Center-Pineville	206
	Duke Regional Hospital	219
	Frye Regional Medical Center	355
	High Point Regional Health System	348
	Novant Health Rowan Medical Center	268
	Southeastern Regional Medical Center	319
	Wayne Memorial Hospital	284
400+ beds	Cape Fear Valley Health System	602

APPENDIX E. Healthcare Facility Groupings, 2014 National Healthcare Safety Network Annual Hospital Survey Appendix E1. Healthcare Facility Group: Short-term Acute Care Hospitals

Hospital Groups	Hospital Name	Number of Beds
	Carolinas Medical Center- Northeast	457
	Central Regional Hospital	405
	FirstHealth Moore Regional Hospital	457
	Gaston Memorial Hospital	402
	Mission Hospital	716
	Moses Cone Hospital	536
	New Hanover Regional Medical Center	652
	Novant Health Forsyth Medical Center	972
	Novant Health Presbyterian Medical Center	702
	Rex Healthcare	660
	WakeMed	626
Primary Medical School Affiliation	Carolinas Medical Center	880
	Duke University Hospital	850
	UNC Health Care	860
	Vidant Medical Center	909
	Wake Forest University Baptist Medical Center	885
	Wake Forest University Baptist Medical Center	885
	Wake Forest University Baptist Medical Center	885

APPENDIX E. Healthcare Facility Groupings, 2014 National Healthcare Safety Network Annual Hospital Survey Appendix E2. Healthcare Facility Group: Long-term Acute Care Hospitals

Hospital Name

Asheville Specialty Hospital
Carolinas Specialty Hospital
Crawley Memorial Hospital
Highsmith Rainey Specialty Hospital
Kindred Hospital-Greensboro
Lifecare Hospitals Of North Carolina
Select Specialty Hospital-Durham
Select Specialty Hospital-Greensboro
Select Specialty Hospital-Winston Salem