

More health facilities meet or exceed infection rate standard

Written by Holyoke Enterprise

Colorado Department of Public Health and Environment's annual Health Facility-Acquired Infections report shows more health facilities in the state met or exceeded (better than) the national standard for infection rates in 2012.

There were 528 facilities that met or exceeded the standard in 2012, compared to 509 in 2011.

The report compares the incidence of health care associated infections at Colorado facilities to the national mean and shows whether each facility was the "same," "better" or "worse" than the national standard. In 2012, 24 health facility reports scored "worse" than the national mean, compared to 39 in 2011.

As part of a comprehensive reform to address health care associated infections, 34 states, including Colorado and the District of Columbia, have mandated public health care associated infection reporting to create greater transparency between health care facilities and the public while supporting greater accountability.

Colorado's legislatively mandated report contains data for surgical site infections in cardiac, orthopedic and abdominal operative procedures; central line-associated bloodstream infections in adult and neonatal critical care units and long-term acute care hospitals; and dialysis related infections in outpatient dialysis treatment centers. Data provided in the report are self-reported by each facility.

Dr. Chris Urbina, the department's executive director and chief medical officer, said, "Since the Health Facility-Acquired Infections Disclosure Act was passed in 2006, the number of reports has increased as new surgical procedures (breast and colon procedures) and new facilities (rehabilitation hospitals) have been added to the report. This increased surveillance of health facility-acquired infections helps to focus efforts on reducing the number of infections at these facilities."

In reviewing facility infection rates, readers must consider that infection rates can be influenced by factors such as better surveillance and reporting compliance, and less healthy populations, rather than poor infection control practices.

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To assess the validity of reported data, the department's Patient Safety Program has conducted three validation studies to date on central line-associated bloodstream infections, hernia surgical site infections and dialysis infections. All three validation studies provided the opportunity to identify areas of misunderstanding about infection surveillance and reporting and provide focused education to health facility staff about surveillance definitions, rules and practices. A fourth validation study for hip/knee procedures is currently under way.

Urbina said, "We hope health care facilities will use the data in this report to target and improve infection prevention efforts and that consumers will use the data to make better informed health care choices."

For more information about this report or patient safety initiatives under way at the Colorado Department of Public Health and Environment, contact the Health Facilities and Emergency Medical Services Division at 303-692-2800 or visit www.colorado.gov/cs/Satellite/CBON/1251590876310

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