July 14, 2015

Hospital Administrator

Name of Hospital

Address

Dear:

As the Division of Public Health (DPH) reviews progress toward reducing healthcare-associated infections (HAIs), we extend our appreciation to you and your staff for your efforts to deliver the safest health care to Wisconsin patients. Significant progress toward reduction of selected HAIs has occurred during the past five years, thanks to healthcare facilities such as yours.

The success of Wisconsin healthcare organizations is exemplified by reductions in central line-associated bloodstream infections (CLABSI), with Wisconsin occurrence more than 50% below the national benchmark. This means we have exceeded the 2013 national goal set under the Department of Health and Human Services National HAI Action Plan. Statewide occurrence of methicillin-resistant *Staphylococcus aureus* (MRSA)bacteremia is also well below the national goal of a 25% reduction. Wisconsin hospitals have experienced a 44% reduction in MRSA bacteremia compared to the national benchmark.

However, despite great strides, challenges to HAI reduction remain. National goals toward reducing catheter-associated urinary tract infections (CAUTI) and *Clostridium difficile* infections (CDI) have not been met among Wisconsin hospitals. Furthermore, several individual facilities continue to experience CLABSI occurrence above the national goal.

You are receiving this letter because 2014 HAI data indicate your facility has not met the 2013 national HAI reduction goals for at least one of three targeted HAIs—CLABSI, CAUTI or CDI. The table below indicates the HAIs for which your facility has an occurrence above the national goals set by the Department of Health and Human Services in the National HAI Action Plan. The cumulative attributable difference (CAD) is the number of infections that must be prevented within your facility to achieve the national standardized infection ratio (SIR) goal.

MetaStar, Inc. and the Wisconsin Hospital Association (WHA) provide HAI reduction consultative services, including education and peer networking, to Wisconsin healthcare facilities at no cost. The tradition of collaboration among Wisconsin hospitals is a proven method for improving healthcare quality, and DPH strongly encourages your facility to participate in one of the collaborative HAI reduction groups led by these organizations. We also encourage you to take advantage of their numerous training and educational opportunities. Participation in these activities will assist your healthcare quality teams in achieving the best patient outcomes possible. The attached brochure provides contact information for MetaStar and WHA.

Again, thank you for your contributions to statewide HAI reduction efforts. We look forward to even greater achievements as we continue our work together.

Sincerely,

Jeffrey P. Davis, MD

Chief Medical Officer and State Epidemiologist

for Communicable Diseases

Cc: Chief Nursing Officers

 Infection Preventionists

 Quality Resources Directors

Hospital A

2014 NHSN Data as of July 9, 2015

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **HAI** | **Number of Observed Events** | **Number of Predicted Events** | **2014 SIR** | **2013 National SIR Goal**  | **CAD\*** |
| CDI (healthcare onset) | 23 | 26 | 0.9 | 0.70 | 5 |
| CAUTI (all locations) |  5 |  4 | 1.3 | 0.75 | 2 |
| CLABSI (all locations) |  3 |  2 | 1.1 | 0.50 | 2 |

\* CAD is calculated by subtracting the designated prevention target from an observed number of HAIs, and is the number of infections your facility needs to prevent to achieve the national goal during 2015, assuming no changes in the population at risk since 2014. The formula is:

Number of observed events–(Number of predicted events X national target SIR)