OREGON PUBLIC HEALTH DIVISION REPORTING FOR HEALTHCARE-ASSOCIATED INFECTIONS

Local health department information

For a list of local health department phone numbers go to www.healthoregon.org/diseasereporting.

ouse Bill 2524 established a mandatory Healthcare-Associated Infections (HAI) Reporting Program. The program was created to raise awareness of HAIs, to promote a transparent means of informing consumers, and to aid healthcare facilities in preventing HAIs (healthcregon.org/hai). The following table compares the Oregon HAI reporting requirements and the Centers for Medicare & Medicaid Services (CMS) Prospective Payment System requirements.

HAI MEASUREMENT TYPE	HOSPITALS AND LONG-TERM ACUTE CARE HOSPITALS ¹					
	CMS	OREGON				
	Requirements (date requirement enacted) ²	Requirements (date requirement enacted) ^{3,4}				
NHSN ANNUAL SURVEY	NHSN Annual Survey (2010)	NHSN Annual Survey (2008)				
CLABSI	Hospitals: All adult, pediatric and neonatal ICUs (2011)	Adult medical, surgical and medical/surgical ICUs (2009)				
	Adult and pediatric medical, surgical and medical/surgical wards (2015)	Neonatal ICUs (2011)				
	LTACH: All adult and pediatric ICUs and wards (Oct. 2012)	All adult, pediatric and neonatal ICUs and adult and pediatric medical, surgical and medical/surgical wards (2015)				
SSI	Colon surgery, inpatient (2012)	Colon surgery, inpatient (2011)				
	Abdominal hysterectomy, inpatient (2012)	Abdominal hysterectomy, inpatient (2011)				
		Coronary artery bypass graft surgery, inpatient (2009)/CBGB only (as of 2011)				
		Knee prosthesis procedure, inpatient (2009)				
		Hip prosthesis procedure, inpatient (2011)				
		Laminectomy, inpatient (2011)				
CAUTI	Hospitals: All adult and pediatric ICUs (2012)	All adult and pediatric ICUs (2012)				
	Adult and pediatric medical, surgical, medical/surgical, and inpatient rehabilitation wards (2015)	Adult and pediatric medical, surgical, medical/surgical, and inpatient rehabilitation wards ⁵ (2015)				
	LTACH: Adult and pediatric ICUs and wards (Oct. 2012)					
C. DIFFICILE LAB ID EVENT	Hospitals: Facility-wide, inpatient (2013) — excluding neonatal and well-baby	Facility-wide, inpatient (2012) – excluding neonatal and well-baby				
	LTACH: Facility-wide, inpatient (2015)					
MRSA BACTEREMIA LAB	Hospitals: Facility-wide, inpatient, (2013)	Facility-wide, inpatient (2013)				
ID EVENT	LTACH: Facility-wide, inpatient (2015)					
SCIP	SCIP-Inf-10 (2011) ⁶	SCIP-Inf-10 (2011) ⁶				
	(No longer reportable: SCIP-Inf-1, 2, 3, 4, 6, and 9)	(No longer reportable: SCIP-Inf-1, 2, 3, 4, 6, and 9)				
HEALTHCARE WORKER	Hospitals: Inpatient (2013) and outpatient (2014)	Hospitals: Inpatient (2009) and outpatient (2014)				
INFLUENZA VACCINATION	LTACH: Inpatient (2015)	Inpatient Psychiatric facilities (2015)				
	Inpatient Psychiatric Facilities (2015)					

HAI MEASUREMENT TYPE	LONG-TERM CARE FACILITIES		AMBULATORY SURGERY CENTERS		DIALYSIS FACILITIES	
	CMS REQUIREMENTS ²	OREGON REQUIREMENTS ³	CMS REQUIREMENTS ²	OREGON REQUIREMENTS ³	CMS REQUIREMENTS ²	OREGON REQUIREMENTS ³
ANNUAL SURVEY	N/A	Evidence-based elements of patient safety performance annual survey (2015)	N/A	Evidence-based elements of patient safety performance annual survey (2009)	N/A	N/A
HEALTHCARE WORKER INFLUENZA VACCINATION	N/A	Healthcare Worker Influenza Vaccination Survey (2010)	Healthcare Worker Influenza Vaccination Survey (Oct. 2014)	Healthcare Worker Influenza Vaccination Survey (2011)	Healthcare Worker Influenza Vaccination Survey (Oct. 2015)	Healthcare Worker Influenza Vaccination Survey (Oct. 2015)
DIALYSIS EVENT	N/A	N/A	N/A	N/A	Dialysis event (2012)	Dialysis event (2013)
OTHER	All minimum data set (MDS) elements required by the Skilled Nursing Facility Prospective Payment System	All minimum data set (MDS) elements including urinary tract infection in the last 30 days (2012)	N/A	N/A	N/A	N/A

HAI – Healthcare-associated infection NHSN – National Healthcare Safety Network CLABSI – Central line-associated bloodstream infection SSI – Surgical site infection CAUTI – Catheter-associated urinary tract infection MRSA – Methicillin-resistant *Staphylococcus aureus* SCIP – Surgical Care Improvement Project

ADDITIONAL MANDATORY REPORTING

Communication of Multidrug-resistant Organisms during Patient Transfer:

When a referring healthcare facility transfers or discharges a patient who is infected or colonized with a multidrug-resistant organism (MDRO) or pathogen requiring Transmission-based Precautions, transfer documentation must include written notification of the infection or colonization to the receiving facility.⁷

Mandatory outbreak reporting: Healthcare facilities and providers are required to report outbreaks of HAIs including MDROs of public health significance and common source outbreaks.⁸

Multidrug-resistant organism (MDRO): an organism that causes human disease that has acquired antibiotic resistance, as listed and defined in the *Centers for Disease Control and Prevention's Antibiotic Resistance Threats in the United States, 2013.* MDROs include but are not limited to:

- a) Methicillin-resistant Staphylococcus aureus (MRSA)
- b) Vancomycin-resistant *Enterococcus* (VRE)
- c) Carbapenem-resistant *Enterobacteriaceae* (CRE)
- d) Multidrug-resistant Acinetobacter baumannii
- e) Multidrug-resistant *Pseudomonas aeruginosa*
- f) Drug-resistant *Streptococcus pneumoniae*
- g) Other Gram-negative bacteria producing extended-spectrum beta-lactamases (ESBL),
- h) Toxin-producing *Clostridium difficile*

PUBLIC HEALTH DIVISION Center for Public Health Practice

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FOOTNOTES

- 1. Long-term acute care hospitals are licensed as acute care hospitals in Oregon and therefore are subject to the same reporting
- 2. CMS HAI reporting requirements are for prospective Payment System hospitals, not critical access hospitals or children's hospitals.
- 3. OHA has retroactive access to any HAI data made reportable to CMS prior to the Oregon requirement.
- 4. Oregon HAI reporting requirements apply to all Oregon hospitals except for those with waiver from HAI Reporting Program. (Waivers are granted for CLABSI when facilities have fewer than 50 central line days and for SSI Reporting when facilities perform fewer than 20 mandatory procedures annually.)
- 5. Inpatient rehabilitation wards are recognized and licensed as acute care facilities in the state of Oregon.
- 6. Rationale for removal of SCIP measures: http://www.jointcommission.org/specifications manual for national hospital inpatient quality measures.aspx.
- Interfacility Transfer Rule (OAR 333-019-0052): http://public.health.oregon.gov/DiseasesConditions/CommunicableDisease/HAI/Prevention/Pages/Interfacility-Communication.aspx.
- 8. Guidelines for outbreak reporting (OARs 333-018-000, 333-018-0095): http://public.health.oregon.gov/DiseasesConditions/CommunicableDisease/HAI/Reporting/Pages/MDRO-Investigative-Guidelines.aspx.