

Oregon Public Health

>> Health Care-Associated Infections: 2014 Oregon Annual Report for Consumers



2014

Oregon
Health
Authority

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Executive summary: Health care-associated infections in Oregon hospitals — 2014

Health care-associated infections (HAIs) can have devastating consequences for patients. The summary below shows how 2014 data from 61 Oregon hospitals compares to: 1) recent HAI data for the U.S. as a whole; and 2) national HAI reduction targets set for 2013 by the U.S. Department of Health and Human Services (HHS).*

CLABSIs[†]

CENTRAL LINE-ASSOCIATED BLOODSTREAM INFECTIONS 35 INFECTIONS

A CLABSI occurs when germs enter the blood along a tube (central line) placed in a large vein.

Oregon hospitals } **✓** Performed statistically better than the U.S.
 } **✓** Exceeded national reduction target set by HHS

MRSA BLOODSTREAM INFECTIONS (MRSA BSIs)

HOSPITAL-ONSET MRSA BSI 61 LABORATORY-IDENTIFIED EVENTS

An MRSA BSI is a difficult to treat infection caused by germs that enter the body through wounds or medical devices.

Oregon hospitals } **✓** Performed statistically better than the U.S.
 } **✓** Exceeded national reduction target set by HHS

C. Difficile infections

HOSPITAL-ONSET C. DIFFICILE 732 LABORATORY-IDENTIFIED EVENTS

C. difficile spreads to patients from unclean hands and surfaces in hospitals, leading to colon infection and diarrhea.

Oregon hospitals } **✓** Performed statistically better than the U.S.
 } **✗** Did not meet national reduction target set by HHS

CAUTIs

CATHETER-ASSOCIATED URINARY TRACT INFECTIONS 182 INFECTIONS

CAUTIs occur when germs travel up a urinary catheter that was not put in correctly, not kept clean, or left in too long.

Oregon hospitals } **⚖** Performed statistically equal to the U.S.
 } **✗** Did not meet national reduction target set by HHS

SSIs

SURGICAL SITE INFECTIONS

An SSI occurs when germs enter a surgical wound during or after surgery. The data below are for deep incisional and organ space SSIs only.

Coronary artery bypass graft (heart surgery) 10 SSI

Oregon hospitals } **⚖** Performed statistically equal to the U.S.
 } **✓** Exceeded national reduction target set by HHS

Laminectomy (back surgery) 30 SSI

Oregon hospitals } **⚖** No recent national comparison available
 } **✓** Exceeded national reduction target set by HHS

Colon surgery 101 SSI

Oregon hospitals } **⚖** Performed statistically equal to the U.S.
 } **✗** Did not meet national reduction target set by HHS

Abdominal hysterectomy surgery 25 SSI

Oregon hospitals } **⚖** Performed statistically equal to the U.S.
 } **✗** Did not meet national reduction target set by HHS

Hip replacement surgery 56 SSI

Oregon hospitals } **⚖** Performed statistically equal to the U.S.
 } **✗** Did not meet national reduction target set by HHS

Knee replacement surgery 41 SSI

Oregon hospitals } **⚖** Performed statistically equal to the U.S.
 } **✓** Exceeded national reduction target set by HHS

THE TAKE AWAY

In 2014, Oregon hospitals exceeded national targets for reducing bloodstream infections and infections following heart, back and knee surgeries. More work is needed to prevent *C. difficile* infections, catheter-associated urinary tract infections and infections following colon, hysterectomy and hip surgeries.

* Statistical comparisons made using the Oregon 2014 standardized infection ratio (SIR) for each infection; see table.

† All CLABSIs combined for adult and neonatal ICUs; see table for separate data by ICU type

Executive summary: Health care-associated infections in Oregon hospitals — 2014

Health care-associated infection type	National baseline years	HHS reduction target*	# OR hospitals reporting†	2014 Oregon SIR‡	2014 SIR meets HHS reduction target?	2014 OR SIR vs. 2013 nat'l SIR	2014 OR SIR vs. 2013 OR SIR [§]
CLABSI in adult ICUs	2006–2008	50% (SIR=0.5)	41	0.24	✓ YES	✓ Statistically better	↓ 16%
CLABSI in NICUs	2006–2008	50% (SIR=0.5)	7	0.60	✗ NO	= Statistically equal	↑ 103%
CAUTI in ICUs	2009	25% (SIR=0.75)	42	1.11	✗ NO	= Statistically equal	⊘ N/A (no 2013 data)
<i>C. difficile</i> hospital-onset LabID events	2010–2011	30% (SIR=0.7)	61	0.73	✗ NO	✓ Statistically better	↓ 4%
MRSA BSI hospital-onset LabID events	2010–2011	25% (SIR=0.75)	61	0.65	✓ YES	✓ Statistically better	⊘ N/A (no 2013 data)
SSI: Heart (CBGB)	2006–2008	25% (SIR=0.75)	14	0.35	✓ YES	= Statistically equal	↓ 42%
SSI: Back (laminectomy)	2006–2008	25% (SIR=0.75)	22	0.53	✓ YES	⊘ No 2013 national data	↓ 38%
SSI: Colon	2006–2008	25% (SIR=0.75)	41	0.85	✗ NO	= Statistically equal	↑ 10%
SSI: Abdominal hysterectomy	2006–2008	25% (SIR=0.75)	35	0.91	✗ NO	= Statistically equal	↓ 20%
SSI: Hip replacement	2006–2008	25% (SIR=0.75)	42	0.83	✗ NO	= Statistically equal	↑ 14%
SSI: Knee replacement	2006–2008	25% (SIR=0.75)	43	0.65	✓ YES	= Statistically equal	↓ 6%

* The U.S. Department of Health and Human Services (HHS) determined target 5-year HAI reductions in 2009: www.health.gov/hcq/pdfs/HAI-Targets.pdf

† Hospitals are exempt from reporting CLABSIs if fewer than 50 central line days, CAUTIs if they have no ICUs and specific SSIs if fewer than 20 procedures performed annually

‡ Standardized Infection Ratio: (observed infections)/(expected # based on risk-adjusted national baseline rates)

^{||} No 2014 national data available at the time of report publication, so 2013 data were used, available here: www.cdc.gov/hai/progress-report/index.html

[§] None of the changes in state SIRs from 2013 to 2014 were statistically significant

Background

One in 25 hospitalized patients in the U.S. acquires a health care-associated infection (HAI) while receiving medical treatment. As a result, hundreds of thousands of patients per year experience an HAI.¹ Consequences of HAIs include medical complications, longer hospital stays, increased risk of death, and increased health care costs.

In 2007, the Oregon Legislative Assembly passed House Bill 2524, which created Oregon's HAI Reporting Program. The law requires health care facilities to report specific HAIs to the Oregon Health Authority (OHA).

In 2014, hospitals were required to report up to 10 HAIs as well as health care worker (HCW) influenza vaccination rates (Table 1). Since 2009, mandatory reporting requirements have been added for hospitals, dialysis facilities, ambulatory surgical centers (ASCs) and skilled nursing facilities.

Table 1. Required HAI reporting elements for Oregon, 2014

Health care-associated infection	Abbreviation	Locations specified
Central line-associated bloodstream infection	CLABSI	Hospitals <ul style="list-style-type: none"> • Adult medical and surgical intensive care units (ICUs) • Neonatal ICUs (NICUs) • >50 central line days
Catheter-associated urinary tract infection	CAUTI	Hospitals <ul style="list-style-type: none"> • All adult and pediatric ICUs • >50 catheter days
Laboratory-identified (LabID) hospital-onset (HO) <i>Clostridium difficile</i> infection	HO-CDI	Hospitals: <ul style="list-style-type: none"> • Facility-wide excluding neonatal, well-baby, and (babies in) post-partum units
LabID HO methicillin-resistant <i>Staphylococcus aureus</i> (MRSA) bloodstream infections	HO-MRSA BSI	Hospitals: <ul style="list-style-type: none"> • Facility-wide
Surgical site infections	SSI	Hospitals: <ul style="list-style-type: none"> • Inpatient procedures only • >20 procedures of any reportable surgery reported annually
Coronary artery bypass graft: chest and donor site incisions	CBGB	
Laminectomy	LAM	
Colon surgery	COLO	
Abdominal hysterectomy	HYST	
Hip prosthesis surgery	HPRO	
Knee prosthesis surgery	KPRO	
Dialysis events: bloodstream infections	BSI	Free-standing dialysis facilities <ul style="list-style-type: none"> • Facility-wide
Health care worker influenza vaccination	HCW influenza vaccination	<ul style="list-style-type: none"> • Hospitals • Ambulatory surgical centers • Skilled nursing facilities

Intended audience

This report is intended for health care consumers, including patients and families. The tables in this report summarize basic HAI data on facility performance submitted by facilities to OHA. Those interested in more technical detail and trends over time should access the [2014 Oregon HAI Report for Providers](#) posted on OHA's Healthcare-Associated Infections website. To examine HAI data by region, including trends over time for each facility, please see [Oregon's Clickable Oregon HAI map](#).

Data collection and exemptions

Facilities reported 2014 data to OHA through the National Healthcare Safety Network (NHSN), which is managed by the Centers for Disease Control and Prevention (CDC). See the [CDC's NHSN infection tracking page](#) for reporting details. Per Oregon Administrative Rule [333-018](#), facilities are required to submit required data elements to NHSN within 30 days of the end of each data collection month.

Hospitals are eligible for exemption from reporting specific HAIs if annual device use, patient volume or procedure volume is low. OHA grants exemptions from CLABSI reporting if hospitals report fewer than 50 central line days annually, from CAUTI reporting if they report fewer than 50 urinary catheter days annually, and from procedure-specific SSI reporting if they report performing fewer than 20 of a reportable surgical procedure. Some hospitals choose to report voluntarily despite meeting exemption criteria.

Data validation by OHA

Before publication, OHA staff reviewed all submitted data and notified facilities of the following data omissions or aberrations: missing months of data, surgical procedure times that are extremely short or long, and any other non-logical data element. Facilities were given two months to respond and correct any errors.

How to use this report

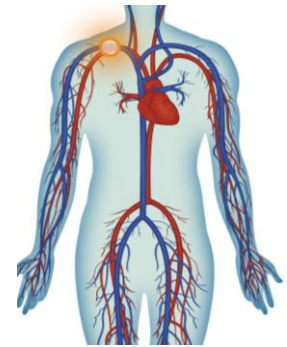
The executive summary provides a snapshot of HAIs in Oregon hospitals, and compares overall performance to national benchmarks. In the main body of the report, each type of infection is described briefly, and accompanied by a summary of what patients and families can do to prevent infections. For each infection type, facility-specific tables compare individual hospital performance to national HAI data.

Facility-specific table elements

- **Facility name.** Facilities are listed if they reported data to OHA without an exemption.
- **Total observed infections.** Total number of infections or meeting the NHSN criteria for reporting. For SSIs, only deep incisional and organ space infections are included due to inconsistency in surveillance for superficial infections.
- **Predicted infections.** A calculated value that reflects the number of infections (or events for LabID measures) "predicted" for 2014, based on risk-adjusted national baselines. Facilities with a higher volume of patients, more device days, and more underlying patient risk factors will have more predicted infections.
- **Better or worse than predicted based on national baselines:** For each facility, the number of observed infections is compared to the number predicted based on risk-adjusted national baselines. These calculations are not mathematically stable for facilities with low patient volumes (i.e., a predicted value less than 1). Having fewer infections than predicted is desirable.
- **Facility's percentile range relative to all facilities in the nation in 2013:** The ratio of observed infections in 2014 to the number predicted is compared to this same ratio for facilities across the nation in 2013 (the most recent national data available at the time of publication). Hospitals in the lower percentile ranges performed better than most hospitals in the nation.

Central line-associated bloodstream infections (CLABSI) in adult intensive care units (ICU)




A “central line” or a “central catheter” is a tube placed into a patient’s large vein, usually in the neck or chest, which is used to draw blood and give fluids and medications. It may be left in place for several weeks. A central line-associated bloodstream infection (CLABSI) can occur when germs travel down the central line and enter the blood. Great gains in prevention have been made over the past decade by following evidence-based recommendations for insertion and maintenance of central lines².










What can patients and families do to prevent CLABSI in adult ICUs?

- Ask a health care provider why the central line is necessary, and how long it will be in place.
- Ask staff if they use a central line insertion checklist and how they safely access and maintain the central line.
- Follow staff instructions on how to keep your central line clean and dry.
- Remind all visitors, family and health care workers to wash their hands — before and after they visit or provide care.
- Avoid touching the catheter and tubing, as much as possible. Do not let any visitors touch the catheter or tubing.
- Pay attention to the bandage and the area around the central line. Tell a health care worker right away if:
 - The bandage comes off or gets wet or dirty
 - The area around the catheter is sore or red
 - The patient has a fever or chills.
- Speak up about any concerns so health care personnel are reminded to follow the best infection prevention practices.
- For more information, see: www.cdc.gov/HAI/bsi/CLABSI-resources.html

Table 2. Facility-specific 2014 annual CLABSI data for adult ICUs (n=41)

Hospital name*	Central line days	Observed infections (Obs.)	Predicted infections [†] (Pred.)	Better or worse than predicted based on national baselines (2006–2008)	Facility’s percentile range relative to all facilities in the nation in 2013 [‡]
All Oregon	55,064	23	96.1	▼ Better (fewer infections) Statistically significant	See executive summary
Adventist Medical Center	1,700	1	2.6	▼ Better (fewer infections)	26–50th 
Asante Rogue Regional Medical Center	2,573	3	3.9	▼ Better (fewer infections)	76–90th 
Asante Three Rivers Medical Center	774	0	1.2	▼ Better (fewer infections)	0–10th 
Ashland Community Hospital	70	0	0.1	§	§

Hospital name*	Central line days	Observed infections (Obs.)	Predicted infections† (Pred.)	Better or worse than predicted based on national baselines (2006–2008)	Facility's percentile range relative to all facilities in the nation in 2013‡
Bay Area Hospital	716	0	1.1	▼ Better (fewer infections)	0–10th 
Columbia Memorial Hospital	40	0	0.06	§	§
Good Samaritan Regional Medical Center	1,925	1	2.9	▼ Better (fewer infections)	26–50th 
Good Shepherd Medical Center	43	0	0.06	§	§
Grande Ronde Hospital	96	0	0.1	§	§
Kaiser Permanente Sunnyside Medical Center	1,558	2	2.3	▼ Better (fewer infections)	76–90th 
Legacy Emanuel Medical Center	4,204	3	8.8	▼ Better (fewer infections) Statistically significant	26–50th 
Legacy Good Samaritan Medical Center	2,740	1	4.1	▼ Better (fewer infections)	26–50th 
Legacy Meridian Park Medical Center	1,017	1	1.5	▼ Better (fewer infections)	51–75th 
Legacy Mount Hood Medical Center	1,029	0	1.5	▼ Better (fewer infections)	0–10th 
McKenzie-Willamette Medical Center	996	2	1.5	▲ Worse (more infections)	91–100th 
Mercy Medical Center	1,316	0	2.0	▼ Better (fewer infections)	0–10th 
Mid-Columbia Medical Center	116	0	0.2	§	§
Oregon Health & Science University	6,800	3	16.6	▼ Better (fewer infections) Statistically significant	26–50th 
Peace Harbor Hospital	97	0	0.2	§	§
Providence Hood River Memorial Hospital	35	0	0.05	§	§
Providence Medford Medical Center	2,339	0	3.5	▼ Better (fewer infections) Statistically significant	0–10th 
Providence Milwaukie Hospital	322	0	0.5	§	§
Providence Newberg Medical Center	416	0	0.6	§	§
Providence Portland Medical Center	4,318	2	6.5	▼ Better (fewer infections)	26–50th 
Providence Seaside Hospital	33	0	0.06	§	§
Providence St. Vincent Medical Center	1,590	0	2.4	▼ Better (fewer infections)	0–10th 

Hospital name*	Central line days	Observed infections (Obs.)	Predicted infections† (Pred.)	Better or worse than predicted based on national baselines (2006–2008)	Facility's percentile range relative to all facilities in the nation in 2013‡
Providence Willamette Falls Medical Center	436	0	0.7	§	§
Sacred Heart Medical Center - Riverbend	6,338	2	13.7	▼ Better (fewer infections) Statistically significant	26–50th 
Salem Hospital	4,196	1	6.3	▼ Better (fewer infections) Statistically significant	26–50th 
Samaritan Albany General Hospital	478	0	0.7	§	§
Samaritan Lebanon Community Hospital	282	0	0.4	§	§
Samaritan Pacific Communities Hospital	272	0	0.4	§	§
Silverton Hospital	55	0	0.08	§	§
Sky Lakes Medical Center	1,204	0	1.8	▼ Better (fewer infections)	0–10th 
St. Alphonsus Medical Center - Ontario	117	0	0.2	§	§
St. Anthony Hospital	432	0	0.7	§	§
St. Charles Medical Center - Bend	2,626	1	3.9	▼ Better (fewer infections)	26–50th 
St. Charles Medical Center - Redmond	262	0	0.4	§	§
Tillamook County Hospital	26	0	0.04	§	§
Tuality Community Hospital	693	0	1.0	▼ Better (fewer infections)	0–10th 
Willamette Valley Medical Center	714	0	1.5	▼ Better (fewer infections)	0–10th 

* 41 hospitals reported adult ICU CLABSIs to OHA; 20 hospitals with no ICUs or fewer than 50 central line days annually applied for exemption from reporting

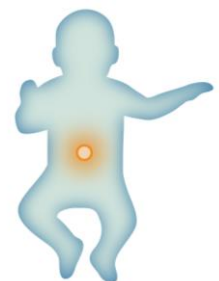
† Predicted number of infections based on national CLABSI data from 2006–2008, adjusted for central line days and other risk factors

‡ No 2014 national data available at the time of report publication, so 2013 data were used and are available here: www.cdc.gov/hai/progress-report/index.html

§ If the predicted number of infections is <1, then no comparison to national data can be made due to statistical instability

Central line-associated bloodstream infections (CLABSI) in neonatal intensive care units (NICUs)





Central line-associated bloodstream infections (CLABSI) are caused by germs entering the bloodstream through catheters inserted into large veins for medication delivery and monitoring. Immature immune systems and compromised skin make newborns, particularly preterm infants, vulnerable to infection. NICU CLABSIs can be prevented through proper line maintenance, removal of lines when appropriate, and good communication between medical providers and families.³



What can patients and families do to prevent CLABSI in neonatal ICUs?

- Ask a health care provider why the central line is necessary, and how long it will be in place.
- Ask staff if they use a central line insertion checklist and how they safely access and maintain the central line.
- Remind all visitors, family and health care workers to wash their hands — before and after they visit or provide care.
- Avoid touching the catheter and tubing, as much as possible. Do not let any visitors touch the catheter or tubing.
- Pay attention to the bandage and the area around the central line. Tell a health care worker right away if:
 - The bandage comes off or gets wet or dirty
 - The area around the catheter is sore or red
- The patient has a fever or chills
- Maintain active lines of communication with health care workers. Speak up about any concerns so health care workers are reminded to follow the best infection prevention practices.
- For more information, see: www.cdc.gov/HAI/bsi/CLABSI-resources.html

Table 3. Facility-specific 2014 annual CLABSI data for NICUs (n=7)

Hospital name*	Central line days	Observed infections (Obs.)	Predicted infections† (Pred.)	Better or worse than predicted based on national baselines (2006–2008)	Facility's percentile range relative to all facilities in the nation in 2013‡
All Oregon	9,334	12	20.0	▼ Better (fewer infections)	See executive summary
Asante Rogue Regional Medical Center	483	0	0.9	§	§
Legacy Emanuel Medical Center	2,076	4	3.7	▲ Worse (more infections)	76–90th 
Oregon Health & Science University	3,917	3	8.8	▼ Better (fewer infections) Statistically significant	26–50th 
Providence St. Vincent Medical Center	1,813	3	4.6	▼ Better (fewer infections)	51–75th 
Sacred Heart Medical Center - Riverbend	609	1	1.1	▼ Better (fewer infections)	76–90th 
Salem Hospital	198	1	0.4	§	§
St. Charles Medical Center - Bend	238	0	0.5	§	§

* 7 hospitals reported NICU CLABSIs to OHA; 54 hospitals were exempt from reporting because they did not have a NICU

† Predicted number of infections based on national CLABSI data from 2006-2008, adjusted for central line days and other risk factors

‡ No 2014 national data available at the time of report publication, so 2013 data were used and are

available here: www.cdc.gov/hai/progress-report/index.html

§ If the predicted number of infections is <1, then no comparison to national data can be made due to statistical instability

Catheter-associated urinary tract infections (CAUTI) in adult and pediatric intensive care units (ICUs)

Catheter-associated urinary tract infections (CAUTI) are caused by germs traveling up urinary catheters, then infecting the bladder and kidneys. The risk for CAUTI increases with the amount of time the catheter is used. Use of urinary catheters is common in ICUs, so it is particularly important to follow appropriate insertion and maintenance practices.⁴



What can patients and families do to prevent CAUTI in ICUs?

- Ask health care workers to clean their hands before inserting or accessing a catheter.
- Ask whether health care workers follow sterile (“clean”) technique for catheter insertion.
- Follow healthcare worker instructions to keep your urinary catheter clean and prevent infection:
 - Avoid twisting or kinking the catheter.
 - Ensure the bag is lower than the bladder to prevent backflow and that the catheter is secured to the leg to prevent pulling on the catheter.
- If catheter will remain in place after discharge, ask health care workers to explain everything you need to know about taking care of a catheter. Be sure you know who to contact if you have questions or problems after you get home.
- If you get bladder pain, fever or chills, tell your health care provider right away.
- For additional CDC resources, see: www.cdc.gov/hai/pdfs/uti/CA-UTI_tagged.pdf

Table 4. Facility-specific 2014 annual CAUTI data for adult ICUs (n=42)

Hospital name*	Urinary cath. days	Observed infections (Obs.)	Predicted infections† (Pred.)	Better or worse than predicted based on national baselines (2006–2008)	Facility’s percentile range relative to all facilities in the nation in 2013‡
All Oregon	88,974	182	164.1	▲ Worse (more infections)	See executive summary
Adventist Medical Center	1,802	2	2.3	▼ Better (fewer infections)	26–50th
Asante Rogue Regional Medical Center	6,653	10	9.6	▲ Worse (more infections)	51–75th
Asante Three Rivers Medical Center	1,585	1	2.1	▼ Better (fewer infections)	26–50th
Ashland Community Hospital	107	0	0.1	§	§
Bay Area Hospital	1,244	0	1.6	▼ Better (fewer infections)	0–10th
Columbia Memorial Hospital	157	1	0.2	§	§
Good Samaritan Regional Medical Center	2,426	6	3.2	▲ Worse (more infections)	76–90th
Grande Ronde Hospital	253	0	0.3	§	§

Hospital name*	Urinary cath. days	Observed infections (Obs.)	Predicted infections† (Pred.)	Better or worse than predicted based on national baselines (2006–2008)	Facility's percentile range relative to all facilities in the nation in 2013‡
Kaiser Permanente Sunnyside Medical Center	3,492	4	4.9	▼ Better (fewer infections)	26–50th
Legacy Emanuel Medical Center	9,378	42	27.0	▲ Worse (more infections) Statistically significant	76–90th
Legacy Good Samaritan Medical Center	2,867	3	3.4	▼ Better (fewer infections)	26–50th
Legacy Meridian Park Medical Center	1,086	3	1.3	▲ Worse (more infections)	91–100th
Legacy Mount Hood Medical Center	1,173	2	1.5	▲ Worse (more infections)	51–75th
McKenzie-Willamette Medical Center	2,154	2	2.8	▼ Better (fewer infections)	26–50th
Mercy Medical Center	2,525	1	3.0	▼ Better (fewer infections)	11–25th
Mid-Columbia Medical Center	293	0	0.4	§	§
Oregon Health & Science University	14,619	60	42.7	▲ Worse (more infections) Statistically significant	51–75th
Peace Harbor Hospital	239	0	0.3	§	§
Pioneer Memorial Hospital (St. Charles – Prineville)	57	0	0.1	§	§
Providence Hood River Memorial Hospital	86	0	0.1	§	§
Providence Medford Medical Center	2,404	2	3.1	▼ Better (fewer infections)	26–50th
Providence Milwaukie Hospital	473	0	0.6	§	§
Providence Newberg Medical Center	587	2	0.8	§	§
Providence Portland Medical Center	4,712	9	5.7	▲ Worse (more infections)	76–90th
Providence Seaside Hospital	116	0	0.2	§	§
Providence St. Vincent Medical Center	4,339	10	7.5	▲ Worse (more infections)	51–75th
Providence Willamette Falls Medical Center	624	1	0.8	§	§
Sacred Heart Medical Center - Riverbend	7,186	5	17.2	▼ Better (fewer infections) Statistically significant	11–25th
Salem Hospital	5,580	4	6.7	▼ Better (fewer infections)	26–50th
Samaritan Albany General Hospital	798	2	1.0	▲ Worse (more infections)	76–90th

Hospital name*	Urinary cath. days	Observed infections (Obs.)	Predicted infections† (Pred.)	Better or worse than predicted based on national baselines (2006–2008)	Facility's percentile range relative to all facilities in the nation in 2013‡
Samaritan Lebanon Community Hospital	550	0	0.7	§	§
Samaritan North Lincoln Hospital	195	0	0.3	§	§
Samaritan Pacific Communities Hospital	445	0	0.6	§	§
Santiam Memorial Hospital	165	0	0.2	§	§
Silverton Hospital	321	1	0.4	§	§
Sky Lakes Medical Center	2,354	0	3.1	▼ Better (fewer infections) Statistically significant	0–10th 0% 100%
St. Alphonsus Medical Center - Ontario	505	0	0.7	§	§
St. Charles Medical Center - Bend	3,486	8	4.2	▲ Worse (more infections)	76–90th 0% 100%
St. Charles Medical Center - Redmond	262	0	0.3	§	§
Tillamook County Hospital	45	0	0.06	§	§
Tuality Community Hospital	796	0	1.0	▼ Better (fewer infections)	0–10th 0% 100%
Willamette Valley Medical Center	825	1	1.9	▼ Better (fewer infections)	26–50th 0% 100%

* 42 hospitals reported adult ICU CAUTI to OHA; 19 hospitals with no ICUs or fewer than 50 urinary catheter days annually applied for exemption from reporting

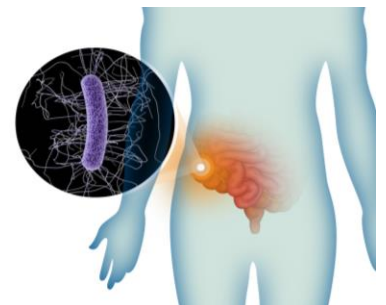
† Predicted number of infections based on national CAUTI data from 2009, adjusted for urinary catheter days and other risk factors

‡ No 2014 national data available at the time of report publication, so 2013 data were used and are available here: www.cdc.gov/hai/progress-report/index.html

§ If the predicted number of infections is <1, then no comparison to national data can be made due to statistical instability

***Clostridium difficile* (C. difficile) infection**

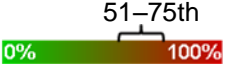
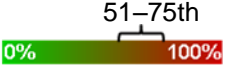



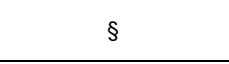

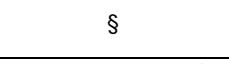
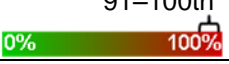
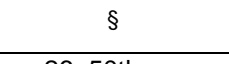
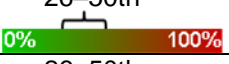
C. difficile is a spore-forming bacteria that causes severe diarrhea, colon infection, and sometimes even sepsis and death. *C. difficile* caused almost half a million infections in the United States in 2011; 29,000 people infected died within 30 days of the initial diagnosis.⁵ Those most at risk are people, especially older adults, who take antibiotics and get medical care.⁶

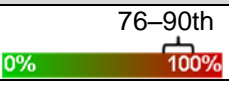
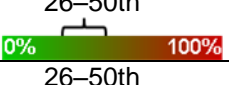
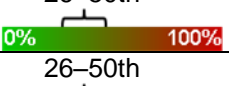
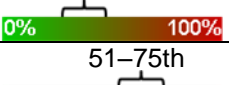

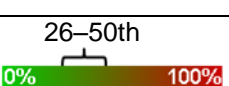

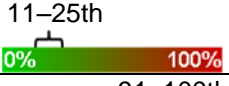
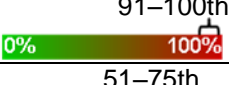
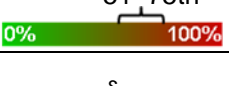
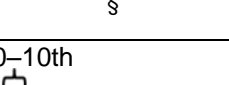




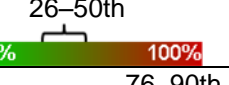
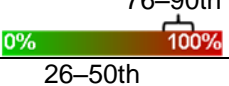
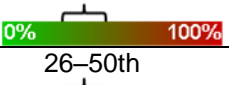
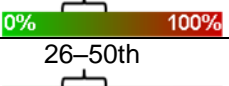



What can patients and families do to prevent *C. difficile* infection and transmission?


- Take antibiotics exactly as prescribed by your doctor.
- Tell your doctor if you get diarrhea after taking antibiotics.
- Wash your hands with soap and water after using the bathroom.
- Try to use a separate bathroom if you have diarrhea and be sure the bathroom is well cleaned if someone with diarrhea has used it.
- Disinfect your bathroom and soiled surfaces with bleach.
- For additional CDC resources, see: www.cdc.gov/vitalsigns/HAI/StoppingCdifficile/index.html

Table 5. Facility-specific 2014 annual hospital-onset Incident *Clostridium difficile* LabID Event data for Oregon hospitals (n=61)

Hospital name*	Patient days	Observed infections (Obs.)	Predicted infections† (Pred.)	Better or worse than predicted based on national baselines (2006–2008)	Facility's percentile range relative to all facilities in the nation in 2013‡
All Oregon	1,389,712	710	978.9	▼ Better (fewer infections) Statistically significant	See executive summary
Adventist Medical Center	46,010	16	20.2	▼ Better (fewer infections)	51–75th 
Asante Rogue Regional Medical Center	70,188	42	54.8	▼ Better (fewer infections)	51–75th 
Asante Three Rivers Medical Center	25,596	5	18.9	▼ Better (fewer infections) Statistically significant	11–25th 
Ashland Community Hospital	4,440	4	2.9	▲ Worse (more infections)	76–90th 
Bay Area Hospital	24,716	15	14.6	▲ Worse (more infections)	51–75th 
Blue Mountain Hospital	596	0	0.3	§	§
Columbia Memorial Hospital	3,048	0	1.6	▼ Better (fewer infections)	0–10th 
Coquille Valley Hospital District	1,904	2	‡‡	‡‡	§
Cottage Grove Community Hospital	1,553	4	1.0	▲ Worse (more infections) Statistically significant	91–100th 
Curry General Hospital	407	0	0.2	§	§
Good Samaritan Regional Medical Center	35,807	14	24.2	▼ Better (fewer infections) Statistically significant	26–50th 
Good Shepherd Medical Center	4,807	2	3.0	▼ Better (fewer infections)	26–50th 
Grande Ronde Hospital	4,926	1	2.4	▼ Better (fewer infections)	26–50th 
Harney District Hospital	1,409	1	0.7	§	§
Kaiser Permanente Sunnyside Medical Center	53,930	49	43.2	▲ Worse (more infections)	76–90th 

Hospital name*	Patient days	Observed infections (Obs.)	Predicted infections† (Pred.)	Better or worse than predicted based on national baselines (2006–2008)	Facility's percentile range relative to all facilities in the nation in 2013‡
Kaiser Permanente Westside Medical Center	17,921	17	14.8	▲ Worse (more infections)	76–90th 
Lake District Hospital	2,458	0	0.99	§	§
Legacy Emanuel Medical Center	91,394	42	62.3	▼ Better (fewer infections) Statistically significant	26–50th 
Legacy Good Samaritan Medical Center	51,413	22	41.0	▼ Better (fewer infections) Statistically significant	26–50th 
Legacy Meridian Park Medical Center	29,697	8	19.7	▼ Better (fewer infections) Statistically significant	26–50th 
Legacy Mount Hood Medical Center	22,053	10	13.1	▼ Better (fewer infections)	51–75th 
Lower Umpqua Hospital District	650	0	0.4	§	§
McKenzie-Willamette Medical Center	20,686	7	13.1	▼ Better (fewer infections)	26–50th 
Mercy Medical Center	25,477	7	16.1	▼ Better (fewer infections) Statistically significant	26–50th 
Mid-Columbia Medical Center	6,543	1	3.1	▼ Better (fewer infections)	11–25th 
Oregon Health & Science University	149,617	155	107.4	▲ Worse (more infections) Statistically significant	91–100th 
Peace Harbor Hospital	4,321	2	2.5	▼ Better (fewer infections)	51–75th 
Pioneer Memorial Hospital - Heppner	756	0	0.3	§	§
Pioneer Memorial Hospital (St. Charles – Prineville)	2,185	0	1.3	▼ Better (fewer infections)	0–10th 
Providence Hood River Memorial	4,352	0	2.7	▼ Better (fewer infections)	0–10th 
Providence Medford Medical Center	29,404	13	20.8	▼ Better (fewer infections)	26–50th 
Providence Milwaukie Hospital	9,202	4	6.1	▼ Better (fewer infections)	26–50th 
Providence Newberg Medical Center	9,408	0	5.9	▼ Better (fewer infections) Statistically significant	0–10th 
Providence Portland Medical Center	101,550	37	83.4	▼ Better (fewer infections) Statistically significant	26–50th 
Providence Seaside Hospital	3,566	3	2.2	▲ Worse (more infections)	76–90th 
Providence St. Vincent Medical Center	114,517	42	91.9	▼ Better (fewer infections) Statistically significant	26–50th 
Providence Willamette Falls Medical Center	18,358	7	10.7	▼ Better (fewer infections)	26–50th 
Sacred Heart Medical Center - Riverbend	106,027	42	69.8	▼ Better (fewer infections) Statistically significant	26–50th 

Hospital name*	Patient days	Observed infections (Obs.)	Predicted infections† (Pred.)	Better or worse than predicted based on national baselines (2006–2008)	Facility's percentile range relative to all facilities in the nation in 2013‡
Sacred Heart University District	22,266	5	14.1	▼ Better (fewer infections) Statistically significant	11–25th
Salem Hospital	93,213	52	69.2	▼ Better (fewer infections) Statistically significant	51–75th
Samaritan Albany General Hospital	9,900	2	4.8	▼ Better (fewer infections)	26–50th
Samaritan Lebanon Community Hospital	5,462	1	3.9	▼ Better (fewer infections)	11–25th
Samaritan North Lincoln Hospital	3,349	0	1.9	▼ Better (fewer infections)	0–10th
Samaritan Pacific Communities Hospital	4,801	7	2.9	▲ Worse (more infections) Statistically significant	91–100th
Santiam Memorial Hospital	1,638	7	1.1	▲ Worse (more infections) Statistically significant	91–100th
Shriner's	2,348	2	1.2	▲ Worse (more infections)	91–100th
Silverton Hospital	8,682	0	3.9	▼ Better (fewer infections) Statistically significant	0–10th
Sky Lakes Medical Center	19,440	16	14.5	▲ Worse (more infections)	76–90th
Southern Coos Hospital and Health Center	1,541	0	‡	‡	§
St. Alphonsus Medical Center - Baker City	1,947	1	‡	‡	§
St. Alphonsus Medical Center - Ontario	7,076	1	3.3	▼ Better (fewer infections)	11–25th
St. Anthony Hospital	4,359	0	1.8	▼ Better (fewer infections)	0–10th
St. Charles Medical Center - Bend	58,248	29	50.0	▼ Better (fewer infections) Statistically significant	26–50th
St. Charles Medical Center - Madras	2,567	3	1.5	▲ Worse (more infections)	91–100th
St. Charles Medical Center - Redmond	6,572	2	3.9	▼ Better (fewer infections)	26–50th
Tillamook County Hospital	3,942	1	1.7	▼ Better (fewer infections)	26–50th
Tuality Community Hospital	19,829	6	10.9	▼ Better (fewer infections)	26–50th
Vibra Specialty Hospital of Portland	17,522	19	**	**	**
Wallowa Memorial Hospital	2,633	3	1.4	▲ Worse (more infections)	91–100th
West Valley Hospital	457	0	0.3	§	§

Hospital name*	Patient days	Observed infections (Obs.)	Predicted infections† (Pred.)	Better or worse than predicted based on national baselines (2006–2008)	Facility's percentile range relative to all facilities in the nation in 2013‡
Willamette Valley Medical Center	13,432	1	9.3	▼ Better (fewer infections) Statistically significant	11–25th 

* All 61 Oregon hospitals reported CDI LabID data

† Predicted number of infections based on national rates of hospital-onset CDI LabID events from 2010–2011, adjusted for admission prevalence, testing methods and other factors

‡ No 2014 national data available at the time of report publication, so 2013 data were used and are available here: www.cdc.gov/hai/progress-report/index.html

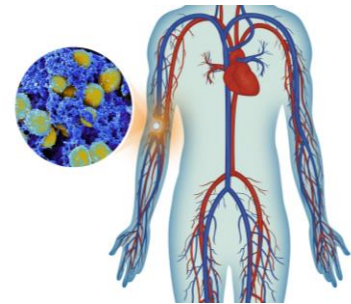
§ If the predicted number of infections is <1, then no comparison to national data can be made due to statistical instability

¶ Hospital did not submit data through NHSN (submitted manually to OHA), so metrics could not be calculated

** No predicted value calculated because this facility is a long-term acute care facility with different risk adjustment factors so not directly comparable to other acute care facilities per NHSN protocols

Methicillin-resistant *Staphylococcus aureus* bloodstream infection (MRSA BSI)


A hospital-onset MRSA BSI occurs when antibiotic-resistant bacteria enter the bloodstream through wounds or medical devices during the course of medical treatment. These bacteria are resistant to many common antibiotics. MRSA can spread in hospitals through contaminated hands and surfaces.




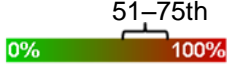
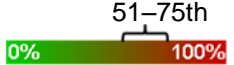








What can patients and families do to prevent MRSA infection and transmission?



- Make sure all health care workers clean their hands before and after caring for you.
- Clean your hands often, especially before and after changing a wound dressing or bandage.
- Keep wounds clean and covered; change bandages as instructed by a health care provider until healed.
- Avoid sharing personal items such as towels or razors.
- Take antibiotics exactly as prescribed by your doctor.
- Tell health care providers, including home health aides and therapists, you have MRSA.
- For more information, see: www.cdc.gov/mrsa/pdf/SHEA-mrsa_tagged.pdf

Table 6. Facility-specific 2014 annual hospital-onset MSRA BSI (n=61)

Hospital name*	Patient days	Observed infections (Obs.)	Predicted infections† (Pred.)	Statistical comparison to national baseline (2010–2011)	Facility's percentile range relative to all facilities in the nation in 2013‡
All Oregon	1,518,974	58	89.7	▼ Better (fewer infections) Statistically significant	See executive summary
Adventist Medical Center	48,606	0	2.4	▼ Better (fewer infections)	0–10th 

Hospital name*	Patient days	Observed infections (Obs.)	Predicted infections† (Pred.)	Statistical comparison to national baseline (2010–2011)	Facility's percentile range relative to all facilities in the nation in 2013‡
Asante Rogue Regional Medical Center	79,236	2	3.6	▼ Better (fewer infections)	26–50th 
Asante Three Rivers Medical Center	26,982	3	1.2	▲ Worse (more infections)	91–100th 
Ashland Community Hospital	4,966	0	0.2	§	§
Bay Area Hospital	26,362	0	1.1	▼ Better (fewer infections)	0–10th 
Blue Mountain Hospital	639	0	0.02	§	§
Columbia Memorial Hospital	910	0	0.03	§	§
Coquille Valley Hospital District	1,904	0	‡	‡	§
Cottage Grove Community Hospital	1,553	0	0.1	§	§
Curry General Hospital	253	0	0.01	§	§
Good Samaritan Regional Medical Center	37,746	2	1.6	▲ Worse (more infections)	51–75th 
Good Shepherd Medical Center	5,530	0	0.2	§	§
Grande Ronde Hospital	5,435	0	0.3	§	§
Harney District Hospital	1,455	0	0.05	§	§
Kaiser Permanente Sunnyside Medical Center	61,437	3	2.8	▲ Worse (more infections)	51–75th 
Kaiser Permanente Westside Medical Center	22,779	0	1.0	▼ Better (fewer infections)	0–10th 
Lake District Hospital	2,545	0	0.09	§	§
Legacy Emanuel Medical Center	104,708	5	9.0	▼ Better (fewer infections)	26–50th 
Legacy Good Samaritan Medical Center	51,413	1	2.1	▼ Better (fewer infections)	26–50th 
Legacy Meridian Park Medical Center	29,697	0	1.2	▼ Better (fewer infections)	0–10th 
Legacy Mount Hood Medical Center	22,519	1	1.3	▼ Better (fewer infections)	26–50th 
Lower Umpqua Hospital District	721	0	0.03	§	§
McKenzie-Willamette Medical Center	20,686	1	1.4	▼ Better (fewer infections)	26–50th 

Hospital name*	Patient days	Observed infections (Obs.)	Predicted infections† (Pred.)	Statistical comparison to national baseline (2010–2011)	Facility's percentile range relative to all facilities in the nation in 2013‡
Mercy Medical Center	27,168	2	1.4	▲ Worse (more infections)	76–90th
Mid-Columbia Medical Center	7,114	1	0.3	§	§
Oregon Health & Science University	162,276	12	15.9	▼ Better (fewer infections)	26–50th
Peace Harbor Hospital	4,349	0	0.2	§	§
Pioneer Memorial Hospital - Heppner	756	0	0.04	§	§
Pioneer Memorial Hospital (St. Charles – Prineville)	2,185	0	0.1	§	§
Providence Hood River Memorial Hospital	5,160	0	0.2	§	§
Providence Medford Medical Center	30,399	3	1.5	▲ Worse (more infections)	91–100th
Providence Milwaukie Hospital	9,202	1	0.4	§	§
Providence Newberg Medical Center	10,565	0	0.4	§	§
Providence Portland Medical Center	107,548	0	7.3	▼ Better (fewer infections) Statistically significant	0–10th
Providence Seaside Hospital	3,781	0	0.2	§	§
Providence St. Vincent Medical Center	135,049	4	8.4	▼ Better (fewer infections)	26–50th
Providence Willamette Falls Medical Center	20,524	0	0.8	§	§
Sacred Heart Medical Center - Riverbend	119,610	5	5.5	▼ Better (fewer infections)	51–75th
Sacred Heart University District	22,266	0	1.2	▼ Better (fewer infections)	0–10th
Salem Hospital	103,342	6	7.7	▼ Better (fewer infections)	26–50th
Samaritan Albany General Hospital	10,137	0	0.5	§	§
Samaritan Lebanon Community Hospital	5,974	1	0.3	§	§
Samaritan North Lincoln Hospital	3,359	0	0.1	§	§
Samaritan Pacific Communities Hospital	5,265	0	0.3	§	§
Santiam Memorial Hospital	3,574	1	0.1	§	§

Hospital name*	Patient days	Observed infections (Obs.)	Predicted infections† (Pred.)	Statistical comparison to national baseline (2010–2011)	Facility's percentile range relative to all facilities in the nation in 2013‡
Shriner's	2,348	0	0.1	§	§
Silverton Hospital	8,682	0	0.4	§	§
Sky Lakes Medical Center	20,904	2	0.8	§	§
Southern Coos Hospital and Health Center	1,541	0	¶	¶	§
St. Alphonsus Medical Center - Baker City	1,947	0	¶	¶	§
St. Alphonsus Medical Center - Ontario	8,008	0	0.3	§	§
St. Anthony Hospital	4,979	1	0.2	§	§
St. Charles Medical Center - Bend	63,680	0	2.6	▼ Better (fewer infections)	0–10th 
St. Charles Medical Center - Madras	2,882	0	0.1	§	§
St. Charles Medical Center - Redmond	7,301	0	0.3	§	§
Tillamook County Hospital	4,296	0	0.2	§	§
Tuality Community Hospital	19,829	0	1.1	▼ Better (fewer infections)	0–10th 
Vibra Specialty Hospital of Portland	17,522	3	**	**	§
Wallowa Memorial Hospital	2,723	0	0.1	§	§
West Valley Hospital	359	0	0.01	§	§
Willamette Valley Medical Center	14,400	1	0.9	§	§

* All 61 Oregon hospitals reported MRSA bacteremia LabID data to NHSN

† Predicted number of infections based on national MRSA bacteremia LabID data from 2010–2011, adjusted for admission prevalence, testing methods, and other factors

‡ No 2014 national data available at the time of report publication, so 2013 data were used and are available here: www.cdc.gov/hai/progress-report/index.html

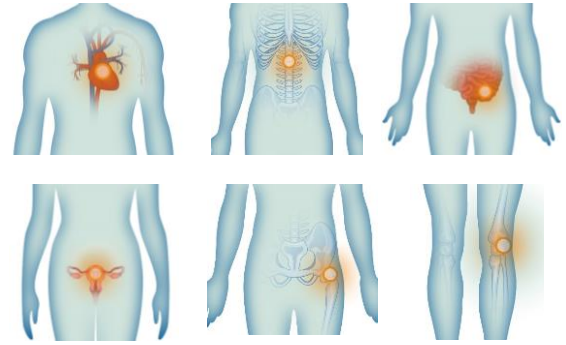
§ If the predicted number of infections is <1, then no comparison to national data can be made due to statistical instability

¶ Hospital did not submit data through NHSN (submitted manually to OHA), so metrics could not be calculated

**No predicted value calculated because this facility is a long-term acute care facility with different risk adjustment factors so not directly comparable to other acute care facilities per NHSN protocols

Surgical site infection (SSI) following select surgeries

Surgical site infections (SSIs), which are found in 2–5% of patients undergoing inpatient surgery, can lead to serious complications and hospitalization.¹⁰ These infections can spread in superficial skin and tissue layers as well as deep-incisional and organ space areas. The data displayed on this page and comparisons to national baselines are based on deep-incisional and organ space SSIs due to inconsistency in reporting superficial SSIs.











What can patients and families do to prevent surgical site infections?

- Before surgery:
 - If you smoke, talk to your doctor about how you can quit. Smokers get more infections.
 - If you are overweight, check with your doctor on whether you should lose weight before your surgery. Patients who are overweight get more infections.
 - If you are diabetic, talk to your doctor about stabilizing your diabetes before surgery.
 - Ask if you should shower or bathe with an antibacterial cleanser before surgery.
 - Do not shave before surgery since shaving irritates your skin, making it more likely to be infected.
- At the time of surgery:
 - If a health care worker tries to shave your skin, ask why you need to be shaved.
 - Talk to your surgeon or anesthesiologist if you have any concerns.
- After surgery:
 - Ask your providers, family or friends to clean their hands before visiting you.
 - Ask how to care for your wound before leaving the hospital, and who to contact with questions.
 - Clean your hands before and after caring for your wound.
 - If you experience pain, redness, wound drainage, fever or chills, call your doctor immediately.
- For more information, see: www.cdc.gov/HAI/ssi/faq_ssi.html#a4

Table 7. Facility-specific 2014 annual SSI data for coronary artery bypass graft with both chest and donor site incisions (CBGB)

Hospital name*	Total procedures	Observed infections (Obs.) [†]	Predicted infections (Pred.)	Statistical comparison to national baseline (2006–2008)	Facility's percentile range relative to all facilities in the nation in 2013 [‡]
All Oregon	2,413	10	28.4	▼ Better (fewer infections) Statistically significant	See executive summary
Adventist Medical Center	73	0	1.0	▼ Better (fewer infections)	0-25th 0% 100%
Asante Rogue Regional Medical Center	381	2	3.2	▼ Better (fewer infections)	51-75th 0% 100%
Good Samaritan Regional Medical Center	133	0	1.8	▼ Better (fewer infections)	0-25th 0% 100%

Hospital name*	Total procedures	Observed infections (Obs.) [¶]	Predicted infections (Pred.) [†]	Statistical comparison to national baseline (2006–2008)	Facility's percentile range relative to all facilities in the nation in 2013 [‡]
Kaiser Permanente Sunnyside Medical Center	229	1	3.3	▼ Better (fewer infections)	26–50th 
Legacy Emanuel Medical Center	59	0	0.8	§	§
Legacy Good Samaritan Medical Center	124	0	1.7	▼ Better (fewer infections)	0-25th 
McKenzie-Willamette Medical Center	71	0	0.9	§	§
Oregon Health & Science University	235	3	2.8	▲ Worse (more infections)	76–90th 
Providence Portland Medical Center	141	1	1.7	▼ Better (fewer infections)	51–75th 
Providence St. Vincent Medical Center	311	2	4.0	▼ Better (fewer infections)	51–75th 
Sacred Heart Medical Center - Riverbend	247	0	2.6	▼ Better (fewer infections)	0-25th 
Salem Hospital	245	1	2.8	▼ Better (fewer infections)	26–50th 
St. Charles Medical Center - Bend	133	0	1.5	▼ Better (fewer infections)	0-25th 
Tuality Community Hospital	31	0	0.4	§	§

* 14 hospitals reported CBGB infections in 2014; 47 hospitals performing <20 procedures annually applied for exemption from reporting

¶ Observed infections column includes deep incisional/organ space infections only (superficial excluded)

† Predicted number of infections was calculated based on deep incisional/organ space infections only, and was based on national CBGB SSI data from 2006–2008, adjusted for individual patient risk factors

‡ No 2014 national data available at the time of report publication, so 2013 data were used, and are available here: www.cdc.gov/hai/progress-report/index.html

§ If the predicted number of infections is <1, then no comparison to national data can be made due to statistical instability

Table 8. Facility-specific 2014 annual SSI data laminectomy (LAM)[‡]

Hospital name*	Total procedures	Observed infections (Obs.) [¶]	Predicted infections (Pred.) [†]	Statistical comparison to national baseline (2006–2008)
All Oregon	9,120	29	55.1	See executive summary
Adventist Medical Center	434	0	1.2	▼ Better (fewer infections)
Asante Rogue Regional Medical Center	359	0	2.5	▼ Better (fewer infections)
Ashland Community Hospital	40	0	0.2	§
Bay Area Hospital	54	0	0.2	§
Good Samaritan Regional Medical Center	222	1	0.8	§

Hospital name*	Total procedures	Observed infections (Obs.) [¶]	Predicted infections [†] (Pred.)	Statistical comparison to national baseline (2006–2008)
Kaiser Permanente Sunnyside Medical Center	797	4	2.3	▲ Worse (more infections)
Legacy Emanuel Medical Center	270	1	1.4	▼ Better (fewer infections)
Legacy Good Samaritan Medical Center	307	1	0.9	§
Legacy Meridian Park Medical Center	470	3	2.7	▲ Worse (more infections)
Legacy Mount Hood Medical Center	207	0	1.8	▼ Better (fewer infections)
McKenzie-Willamette Medical Center	293	1	2.6	▼ Better (fewer infections)
Mercy Medical Center	25	1	0.3	§
Oregon Health & Science University	799	1	6.5	▼ Better (fewer infections) Statistically significant
Providence Medford Medical Center	318	1	2.3	▼ Better (fewer infections)
Providence Portland Medical Center	733	2	5.3	▼ Better (fewer infections)
Providence St. Vincent Medical Center	684	3	5.4	▼ Better (fewer infections)
Providence Willamette Falls Medical Center	116	0	0.8	§
Sacred Heart Medical Center - Riverbend	1,206	5	9.3	▼ Better (fewer infections)
Salem Hospital	388	0	3.6	▼ Better (fewer infections) Statistically significant
Sky Lakes Medical Center	164	1	0.5	§
St. Charles Medical Center - Bend	1,061	5	3.2	▲ Worse (more infections)
Tuality Community Hospital	168	0	1.3	▼ Better (fewer infections)

* 22 hospitals listed for SSIs following LAM in 2014 listed; 39 hospitals performing <20 LAM procedures annually applied for exemption from reporting




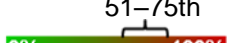


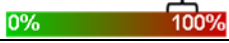



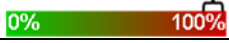



¶ Observed infections column includes deep incisional/organ space infections only (superficial excluded)

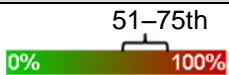
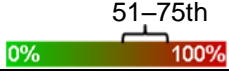
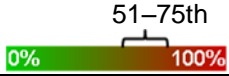

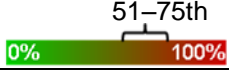
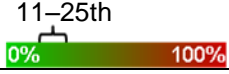
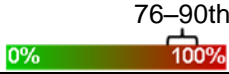

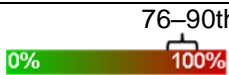
† Predicted number of infections was calculated based on deep incisional/organ space infections only, and was based on national LAM SSI data from 2006–2008, adjusted for individual patient risk factors

‡ No laminectomy data published with facility-specific distributions by CDC

§ If the predicted number of infections is <1, then no comparison to national data can be made due to statistical instability

Table 9. Facility-specific 2014 annual colon surgeries (COLO)

Hospital name*	Total procedures	Observed infections (Obs.) [¶]	Predicted infections [†] (Pred.)	Statistical comparison to national baseline (2006–2008)	Facility's percentile range relative to all facilities in the nation in 2013 [‡]
All Oregon	3886	101	118.3	▼ Better (fewer infections)	See executive summary
Adventist Medical Center	106	0	2.5	▼ Better (fewer infections)	0–10th 
Asante Rogue Regional Medical Center	208	4	6.0	▼ Better (fewer infections)	26–50th 
Asante Three Rivers Medical Center	128	4	3.2	▲ Worse (more infections)	51–75th 
Ashland Community Hospital	22	2	0.6	§	§
Bay Area Hospital	57	1	1.2	▼ Better (fewer infections)	51–75th 
Good Samaritan Regional Medical Center	108	2	2.8	▼ Better (fewer infections)	26–50th 
Good Shepherd Medical Center	11	0	0.3	§	§
Grande Ronde Hospital	15	0	0.3	§	§
Kaiser Permanente Sunnyside Medical Center	252	6	7.1	▼ Better (fewer infections)	51–75th 
Kaiser Permanente Westside Medical Center	75	3	2.0	▲ Worse (more infections)	76–90th 
Legacy Emanuel Medical Center	79	5	2.9	▲ Worse (more infections)	76–90th 
Legacy Good Samaritan Medical Center	154	6	5.6	▲ Worse (more infections)	51–75th 
Legacy Meridian Park Medical Center	110	2	2.8	▼ Better (fewer infections)	26–50th 
Legacy Mount Hood Medical Center	79	6	2.3	▲ Worse (more infections) Statistically significant	91–100th 
McKenzie-Willamette Medical Center	106	1	3.3	▼ Better (fewer infections)	11–25th 
Mercy Medical Center	57	1	1.5	▼ Better (fewer infections)	26–50th 
Mid-Columbia Medical Center	35	0	0.96	§	§
Oregon Health & Science University	335	12	12.6	▼ Better (fewer infections)	51–75th 
Peace Harbor Hospital	10	0	0.3	§	§
Providence Hood River Memorial	21	0	0.5	§	§

Hospital name*	Total procedures	Observed infections (Obs.) [¶]	Predicted infections [†] (Pred.)	Statistical comparison to national baseline (2006–2008)	Facility's percentile range relative to all facilities in the nation in 2013 [‡]
Providence Medford Medical Center	57	2	1.7	▲ Worse (more infections)	51–75th 
Providence Milwaukie Hospital	33	0	0.8	§	§
Providence Newberg Medical Center	46	1	1.3	▼ Better (fewer infections)	51–75th 
Providence Portland Medical Center	342	11	11.0	▼ Better (fewer infections)	51–75th 
Providence St. Vincent Medical Center	335	6	9.4	▼ Better (fewer infections)	26–50th 
Providence Willamette Falls Medical Center	34	0	0.9	§	§
Sacred Heart Medical Center - Riverbend	319	10	11.1	▼ Better (fewer infections)	51–75th 
Salem Hospital	220	1	9.3	▼ Better (fewer infections) Statistically significant	11–25th 
Samaritan Albany General Hospital	35	2	0.97	§	§
Samaritan Lebanon Community	14	0	0.4	§	§
Samaritan Pacific Communities	22	0	0.6	§	§
Santiam Memorial Hospital	12	0	0.4	§	§
Silverton Hospital	32	1	0.8	§	§
Sky Lakes Medical Center	27	1	0.7	§	§
St. Alphonsus Medical Center - Ontario	32	0	0.8	§	§
St. Anthony Hospital	27	0	0.9	§	§
St. Charles Medical Center - Bend	155	6	4.2	▲ Worse (more infections)	76–90th 
St. Charles Medical Center - Redmond	52	0	1.3	▼ Better (fewer infections)	0–10th 
Tillamook County Hospital	14	0	0.4	§	§
Tuality Community Hospital	33	2	0.8	§	§
Willamette Valley Medical Center	50	2	1.2	▲ Worse (more infections)	76–90th 

* 41 hospitals reported COLO infections in 2014; 20 hospitals performing <20 procedures annually applied for exemption from reporting





¶ Observed infections column includes deep incisional/organ space infections only (superficial excluded)





† Predicted number of infections was calculated based on deep incisional/organ space infections only, and was based on national COLO SSI data from 2006–2008, adjusted for individual patient risk factors

‡ No 2014 national data available at the time of report publication, so 2013 data were used, and are available here: www.cdc.gov/hai/progress-report/index.html

§ If the predicted number of infections is <1, then no comparison to national data can be made due to statistical instability

Table 10. Facility-specific 2014 annual SSI data for abdominal hysterectomy (HYST)

Hospital name*	Total procedures	Observed infections (Obs.) [†]	Predicted infections (Pred.) [†]	Statistical comparison to national baseline (2006–2008)	Facility's percentile range relative to all facilities in the nation in 2013 [‡]
All Oregon	3,329	25	27.6	▼ Better (fewer infections)	See executive summary
Adventist Medical Center	126	1	0.97	§	§
Asante Rogue Regional Medical Center	96	0	0.6	§	§
Asante Three Rivers Medical Center	9	1	0.06	§	§
Bay Area Hospital	29	0	0.2	§	§
Columbia Memorial Hospital	17	0	0.1	§	§
Good Samaritan Regional Medical Center	79	0	0.7	§	§
Grande Ronde Hospital	15	0	0.1	§	§
Kaiser Permanente Sunnyside Medical Center	367	7	3.3	▲ Worse (more infections)	91– 
Kaiser Permanente Westside Medical Center	146	1	1.2	▼ Better (fewer infections)	51–75th 
Legacy Emanuel Medical Center	85	1	0.9	§	§
Legacy Good Samaritan Medical Center	210	1	1.9	▼ Better (fewer infections)	26–50th 
Legacy Meridian Park Medical Center	66	1	0.5	§	§
Legacy Mount Hood Medical Center	54	0	0.7	§	§
McKenzie-Willamette Medical Center	32	0	0.3	§	§
Mercy Medical Center	25	0	0.2	§	§
Oregon Health & Science University	207	4	1.8	▲ Worse (more infections)	91–100th 
Providence Hood River Memorial	10	0	0.09	§	§
Providence Medford Medical Center	73	1	0.6	§	§

Hospital name*	Total procedures	Observed infections (Obs.) [¶]	Predicted infections (Pred.) [†]	Statistical comparison to national baseline (2006–2008)	Facility's percentile range relative to all facilities in the nation in 2013 [‡]
Providence Milwaukie Hospital	7	0	0.04	§	§
Providence Newberg Medical Center	19	0	0.1	§	§
Providence Portland Medical Center	274	3	1.8	▲ Worse (more infections)	76–90th 
Providence St. Vincent Medical Center	341	1	2.4	▼ Better (fewer infections)	26–50th 
Providence Willamette Falls Medical Center	26	0	0.2	§	§
Sacred Heart Medical Center - Riverbend	431	3	4.1	▼ Better (fewer infections)	51–75th 
Salem Hospital	70	0	0.7	§	§
Samaritan Albany General Hospital	7	0	0.05	§	§
Samaritan Lebanon Community Hospital	21	0	0.2	§	§
Samaritan Pacific Communities Hospital	6	0	0.06	§	§
Silverton Hospital	37	0	0.3	§	§
Sky Lakes Medical Center	87	0	0.7	§	§
St. Alphonsus Medical Center - Ontario	84	0	0.7	§	§
St. Charles Medical Center - Bend	164	0	1.1	▼ Better (fewer infections)	0–25th 
St. Charles Medical Center - Redmond	43	0	0.4	§	§
Tillamook County Hospital	3	0	0.03	§	§
Tuality Community Hospital	20	0	0.2	§	§

* 35 hospitals reported SSIs following HYST in 2014; 26 hospitals performing <20 procedures annually applied for exemption from reporting



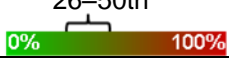
¶ Observed infections column includes deep incisional/organ space infections only (superficial excluded)





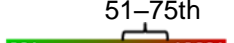
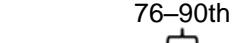
† Predicted number of infections was calculated based on deep incisional/organ space infections only, and was based on national HYST SSI data from 2006–2008, adjusted for individual patient risk factors

‡ No 2014 national data available at the time of report publication, so 2013 data were used and are available here: www.cdc.gov/hai/progress-report/index.html

§ If the predicted number of infections is <1, then no comparison to national data can be made due to statistical instability

Table 11. Facility-specific 2014 annual SSI data for hip prostheses (HPRO)

Hospital name*	Total procedures	Observed infections (Obs.) [†]	Predicted infections (Pred.) [‡]	Statistical comparison to national baseline (2006–2008)	Facility's percentile range relative to all facilities in the nation in 2013 [‡]
All Oregon	8,273	56	67.7	▼ Better (fewer infections)	See executive summary
Adventist Medical Center	290	3	3.9	▼ Better (fewer infections)	51–75th 
Asante Rogue Regional Medical Center	351	4	2.7	▲ Worse (more infections)	76–90th 
Asante Three Rivers Medical Center	264	6	1.6	▲ Worse (more infections) Statistically significant	91–100th 
Ashland Community Hospital	56	0	0.3	§	§
Bay Area Hospital	148	0	1.1	▼ Better (fewer infections)	0–25th 
Columbia Memorial Hospital	21	0	0.2	§	§
Good Samaritan Regional Medical Center	257	1	2.3	▼ Better (fewer infections)	26–50th 
Good Shepherd Medical Center	59	0	0.5	§	§
Grande Ronde Hospital	27	0	0.2	§	§
Kaiser Permanente Westside Medical Center	757	6	4.2	▲ Worse (more infections)	76–90th 
Legacy Emanuel Medical Center	33	1	0.6	§	§
Legacy Good Samaritan Medical Center	214	1	2.9	▼ Better (fewer infections)	26–50th 
Legacy Meridian Park Medical Center	446	1	2.2	▼ Better (fewer infections)	26–50th 
Legacy Mount Hood Medical Center	67	0	0.5	§	§
McKenzie-Willamette Medical Center	142	0	0.9	§	§
Mercy Medical Center	118	1	0.9	§	§
Mid-Columbia Medical Center	60	0	0.4	§	§
Oregon Health & Science University	419	3	5.0	▼ Better (fewer infections)	51–75th 
Peace Harbor Hospital	47	0	0.2	§	§
Providence Hood River Memorial	57	1	0.3	§	§
Providence Medford Medical Center	194	0	0.9	§	§

Hospital name*	Total procedures	Observed infections (Obs.) [¶]	Predicted infections (Pred.) [†]	Statistical comparison to national baseline (2006–2008)	Facility's percentile range relative to all facilities in the nation in 2013 [‡]
Providence Milwaukie Hospital	95	1	0.6	§	§
Providence Newberg Medical Center	40	0	0.2	§	§
Providence Portland Medical Center	447	6	4.4	▲ Worse (more infections)	76–90th 
Providence Seaside Hospital	10	0	0.07	§	§
Providence St. Vincent Medical Center	747	6	6.7	▼ Better (fewer infections)	51–75th 
Providence Willamette Falls Medical Center	176	1	1.1	▼ Better (fewer infections)	51–75th 
Sacred Heart Medical Center - Riverbend	752	3	6.8	▼ Better (fewer infections)	26–50th 
Salem Hospital	747	4	7.2	▼ Better (fewer infections)	26–50th 
Samaritan Albany General Hospital	74	0	0.6	§	§
Samaritan Pacific Communities Hospital	8	0	0.07	§	§
Santiam Memorial Hospital	15	0	0.07	§	§
Silverton Hospital	90	0	0.4	§	§
Sky Lakes Medical Center	143	1	1.1	▼ Better (fewer infections)	51–75th 
St. Alphonsus Medical Center - Baker City	29	0	0.1	§	§
St. Alphonsus Medical Center - Ontario	64	0	0.5	§	§
St. Anthony Hospital	23	0	0.1	§	§
St. Charles Medical Center - Bend	560	5	4.5	▲ Worse (more infections)	76–90th 
St. Charles Medical Center - Redmond	49	0	0.3	§	§
Tillamook County Hospital	11	0	0.06	§	§
Tuality Community Hospital	70	0	0.5	§	§
Willamette Valley Medical Center	80	1	0.6	§	§

* 42 hospitals reported SSIs following HPRO surgeries in 2014; 19 hospitals performing <20 procedures annually applied for exemption from reporting

¶ Observed infections column includes deep incisional/organ space infections only (superficial excluded)









† Predicted number of infections was calculated based on deep incisional/organ space infections only, and was based on national HPRO SSI data from 2006–2008, adjusted for individual patient risk factors

‡ No 2014 national data available at the time of report publication, so 2013 data were used and are available here: www.cdc.gov/hai/progress-report/index.html

§ If the predicted number of infections is <1, then no comparison to national data can be made due to statistical instability

Table 12. Facility-specific 2014 annual SSI data for knee prostheses (KPRO)

Hospital name*	Total procedures	Observed infections (Obs.) [†]	Predicted infections [†] (Pred.)	Statistical comparison to national baseline (2006–2008)	Facility's percentile range relative to all facilities in the nation in 2013 [‡]
All Oregon	10,586	41	63.6	▼ Better (fewer infections) Statistically significant	See executive summary
Adventist Medical Center	361	3	3.0	▼ Better (fewer infections)	76–90th
Asante Rogue Regional Medical Center	476	2	2.3	▼ Better (fewer infections)	51–75th
Asante Three Rivers Medical Center	334	2	1.8	▲ Worse (more infections)	76–90th
Ashland Community Hospital	93	0	0.4	§	§
Bay Area Hospital	229	2	1.4	▲ Worse (more infections)	76–90th
Columbia Memorial Hospital	30	0	0.2	§	§
Good Samaritan Regional Medical Center	255	0	1.7	▼ Better (fewer infections)	0-25th
Good Shepherd Medical Center	115	0	0.9	§	§
Grande Ronde Hospital	31	0	0.1	§	§
Kaiser Permanente Westside Medical Center	1,242	6	6.6	▼ Better (fewer infections)	76–90th
Legacy Emanuel Medical Center	3	0	0.03	§	§
Legacy Good Samaritan Medical Center	227	2	1.8	▲ Worse (more infections)	76–90th
Legacy Meridian Park Medical Center	653	3	2.9	▲ Worse (more infections)	76–90th
Legacy Mount Hood Medical Center	121	0	0.6	§	§
McKenzie-Willamette Medical Center	363	0	1.9	▼ Better (fewer infections)	0-25th
Mercy Medical Center	88	0	0.5	§	§
Mid-Columbia Medical Center	77	0	0.3	§	§
Oregon Health & Science University	341	3	2.8	▲ Worse (more infections)	76–90th

Hospital name*	Total procedures	Observed infections (Obs.) [†]	Predicted infections (Pred.)	Statistical comparison to national baseline (2006–2008)	Facility's percentile range relative to all facilities in the nation in 2013 [‡]
Peace Harbor Hospital	40	0	0.2	§	§
Providence Hood River Memorial	84	0	0.5	§	§
Providence Medford Medical Center	154	2	0.7	§	§
Providence Milwaukie Hospital	159	2	0.9	§	§
Providence Newberg Medical Center	101	0	0.4	§	§
Providence Portland Medical Center	585	3	4.0	▼ Better (fewer infections)	51–75th 
Providence Seaside Hospital	14	0	0.09	§	§
Providence St. Vincent Medical Center	535	3	4.3	▼ Better (fewer infections)	51–75th 
Providence Willamette Falls Medical Center	213	1	1.1	▼ Better (fewer infections)	51–75th 
Sacred Heart Medical Center - Riverbend	901	0	5.7	▼ Better (fewer infections) Statistically significant	0-25th 
Salem Hospital	817	0	5.0	▼ Better (fewer infections) Statistically significant	0-25th 
Samaritan Albany General Hospital	146	0	1.1	▼ Better (fewer infections)	0-25th 
Samaritan North Lincoln Hospital	22	0	0.1	§	§
Samaritan Pacific Communities Hospital	3	0	0.03	§	§
Santiam Memorial Hospital	17	0	0.07	§	§
Silverton Hospital	149	2	0.6	§	§
Sky Lakes Medical Center	242	2	1.5	▲ Worse (more infections)	76–90th 
St. Alphonsus Medical Center - Baker City	40	0	0.2	§	§
St. Alphonsus Medical Center - Ontario	107	0	0.6	§	§
St. Anthony Hospital	74	0	0.4	§	§
St. Charles Medical Center - Bend	819	3	5.3	▼ Better (fewer infections)	51–75th 
St. Charles Medical Center - Redmond	41	0	0.2	§	§
Tillamook County Hospital	21	0	0.07	§	§

Hospital name*	Total procedures	Observed infections (Obs.) [¶]	Predicted infections [†] (Pred.)	Statistical comparison to national baseline (2006–2008)	Facility's percentile range relative to all facilities in the nation in 2013 [‡]
Tuality Community Hospital	148	0	0.8	§	§
Willamette Valley Medical Center	104	0	0.7	§	§

* 43 hospitals reporting SSIs following KPRO in 2014 listed; 18 hospitals performing <20 procedures annually applied for exemption from reporting

¶ Observed infections column includes deep incisional/organ space infections only (superficial excluded)

† Predicted number of infections was calculated based on deep incisional/organ space infections only, and was based on national KPRO SSI data from 2006–2008, adjusted for individual patient risk factors

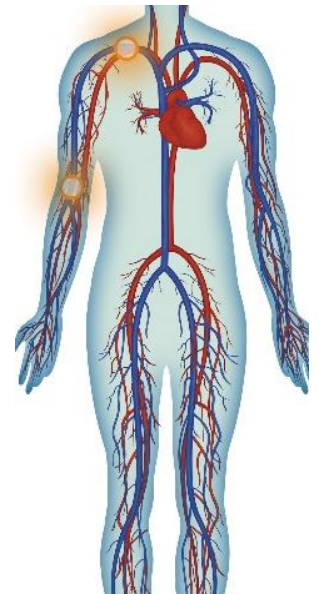
‡ No 2014 national data available at the time of report publication, so 2013 data were used and are available here: www.cdc.gov/hai/progress-report/index.html

§ If the predicted number of infections is <1, then no comparison to national data can be made due to statistical instability

Bloodstream infections in freestanding outpatient dialysis facilities

Dialysis patients are at risk of getting bloodstream infections that can be spread from surfaces and hands to a patient's bloodstream through dialysis access points. Of particular concern, hepatitis B and C viruses can live on surfaces such as dialysis chairs and machines, and be spread even with no visible blood. Nationwide, about 370,000 people with end stage renal disease rely on hemodialysis. CDC estimates around 37,000 dialysis patients contracted a bloodstream infection in 2008.¹¹ Oregon dialysis facilities have reported dialysis events since January 2013.

Patients can receive hemodialysis through different access types: fistula, graft and central venous catheters (CVC, tunneled or non-tunneled). These access types are associated with differing underlying risks of infection (fistula is the lowest and CVCs the highest). The tables below list access type and compare each access type to the national mean. Oregon dialysis facilities had 65% fewer bloodstream infections than the nation as a whole.



What can dialysis patients and families do to prevent bloodstream infections?

(from: [www.cdc.gov/dialysis/PDFs/Dialysis-PocketGuide.pdf](http://www.cdc.gov/dialysis/PDFs/Dialysis-Patient-PocketGuide.pdf))

- Catheters have a higher risk of infection. Ask your doctor about getting a fistula or graft instead.
- Take care of your access site at home. If you have a catheter, do not get it wet; if you have a fistula or graft, avoid scratching or picking at the site.
- Wash your hands often, especially before dialysis treatment. If you have a fistula or graft, wash or cleanse the access site before treatment.
- Know the steps your health care providers should take when accessing your dialysis access site.
- Know the signs and symptoms of infection at your access site.
- Know what to do if you have any problem with your dialysis access site.
- For more information, see: <http://www.cdc.gov/dialysis/patient/index.html>

Table 13. Facility-specific 2014 annual data for Oregon dialysis facilities (N=59)

Dialysis facility name	Access type	Patient-months	Number BSI	Rate: BSI/100 patient-months	Comparison to national pooled mean
Blue Mountain Kidney Center	All	247	1	0.41	▼ Better
Coos Bay	All	926	5	0.54	▲ Statistically better
Eastern Oregon	All	203	2	0.99	▼ Better
Eugene Dialysis Services	All	1427	5	0.35	▲ Statistically better
FMC-Corvallis	All	426	5	1.17	▼ Better
FMC-Florence Dialysis	All	230	1	0.44	▼ Better

Dialysis facility name	Access type	Patient-months	Number BSI	Rate: BSI/100 patient-months	Comparison to national pooled mean
FMC-Mt. Hood	All	870	2	0.23	▼ Statistically better
FMC-Maywood Park Dialysis	All	712	2	0.28	▼ Statistically better
FMC-Milton Freewater	All	181	1	0.55	▼ Better
FMC-Noble Woods	All	377	1	0.27	▼ Better
FMC Sandy	All	138	0	0.00	▼ Better
FMC-Scholls Ferry	All	253	2	0.79	▼ Better
FMC-Hilltop Dialysis	All	179	0	0.00	▼ Better
Four Rivers Dialysis Center	All	586	1	0.17	▼ Statistically better
Grants Pass II Dialysis	All	623	2	0.32	▼ Statistically better
Gresham Dialysis Center	All	961	6	0.62	▼ Better
Hermiston Community Dialysis Center	All	410	2	0.49	▼ Better
Hillsboro Dialysis Center	All	134	0	0.00	▼ Better
Klamath Falls Dialysis	All	653	3	0.46	▼ Statistically better
Lake Road Dialysis	All	1144	3	0.26	▼ Statistically better
Lebanon Dialysis	All	637	7	1.10	▼ Better
McMinnville Dialysis	All	482	2	0.42	▼ Better
Meridian Park	All	620	2	0.32	▼ Statistically better
Newport Oregon	All	474	1	0.21	▼ Statistically better
Northeast Portland Renal Center	All	1041	5	0.48	▼ Statistically better
Northeast Salem Dialysis	All	272	1	0.37	▼ Better
Oregon Kidney Center	All	989	2	0.20	▼ Statistically better
PNRS Columbia River The Dalles	All	250	2	0.80	▼ Better
Pacific Northwest Renal Services- Astoria	All	432	1	0.23	▼ Statistically better
Pacific Northwest Renal Services- Beaverton	All	1422	2	0.14	▼ Statistically better
Pacific Northwest Renal Services - Hollywood	All	1260	1	0.08	▼ Statistically better
Pacific Northwest Renal Services - St. Helens	All	332	3	0.90	▼ Better
Pacific Northwest Renal Services - Clackamas	All	1011	3	0.30	▼ Statistically better
Pacific Northwest Renal Services - Emanuel Pediatrics	All	79	3	3.80	▲ Worse
Pacific Northwest Renal Services - Evergreen	All	436	4	0.92	▼ Better
Pacific Northwest Renal Services - Newberg	All	269	0	0.00	▼ Statistically better
Pacific Northwest Renal Services- Twin Oaks	All	780	4	0.51	▼ Statistically better
Pacific Northwest Renal Services - Tualatin	All	892	2	0.22	▼ Statistically better
Portland Dialysis Center	All	719	5	0.70	▼ Better
QCI Bend	All	809	5	0.62	▼ Better
Qualicenters Salem, LLC	All	1480	12	0.81	▼ Better
Qualicenters-Albany	All	649	1	0.15	▼ Statistically better
Ray Yasui Dialysis Center	All	388	3	0.77	▼ Better
Redmond Dialysis	All	862	6	0.70	▼ Better
Redwood Dialysis	All	338	2	0.59	▼ Better
Rogue Valley Dialysis	All	2125	3	0.14	▼ Statistically better
Rose Quarter Dialysis	All	1411	9	0.64	▼ Statistically better
Roseburg-Mercy Dialysis	All	947	3	0.32	▼ Statistically better
Salem Dialysis	All	923	10	1.08	▼ Better
Salem North Dialysis	All	611	8	1.31	▲ Worse
Sherwood	All	292	3	1.03	▼ Better

Dialysis facility name	Access type	Patient-months	Number BSI	Rate: BSI/100 patient-months	Comparison to national pooled mean
Springfield Oregon Dialysis	All	1423	3	0.21	▼ Statistically better
THC/PNRS LLC - Raines	All	622	5	0.80	▼ Better
Tillamook Dialysis Center	All	183	1	0.55	▼ Better
Walker Road Dialysis	All	511	1	0.20	▼ Statistically better
West Linn Dialysis Center	All	175	0	0.00	▼ Better
West Salem	All	481	1	0.21	▼ Statistically better
Willamette Valley Renal Center	All	453	1	0.22	▼ Statistically better
Woodburn	All	759	2	0.26	▼ Statistically better

Health care worker influenza vaccination

Immunization of health care workers (HCW) is a critical weapon in the fight against influenza virus infection, which causes thousands of hospitalizations and deaths annually, especially in vulnerable populations.⁸ Infected HCW can inadvertently transmit influenza virus. Oregon requires hospitals, ambulatory surgical centers, and skilled nursing facilities to report influenza vaccination rates for all HCWs, including employees, licensed independent practitioners, other contractors, students, and volunteers.



The U.S. Office of Disease Prevention and Health Promotion has set a series of [Healthy People \(HP\) goals for 2015](#), which includes target rates of HCW vaccination. Tables 14–16 show facility-specific vaccination for all HCW combined. Additionally, there is one column that shows if the facility met or did not meet the Healthy People 2015 (HP2015) goal of 75% for HCW vaccination.

What can patients and families do to not get influenza?

- Ask for influenza vaccination from your health care provider for you and your family every October.
- Clean your hands often, especially after blowing your nose or coughing.
- Cover your face when you sneeze and cough, then clean your hands.
- Avoid going to work or school when sick.
- Ask your health care provider if they got the influenza vaccination this year.

Table 14. Health care worker (HCW) influenza vaccination rates for the 2014–2015 influenza season: hospitals (n=62)

Facility name	# HCW eligible for influenza vaccine*	Rate of influenza vaccination for eligible HCW†	Met HP2015 target (75%)
Adventist Medical Center	2,480	84%	✓
Asante Rogue Regional Medical Center	3,801	69%	✗
Asante Three Rivers Medical Center	1,343	78%	✓
Ashland Community Hospital	516	58%	✗
Bay Area Hospital	1,219	78%	✓
Blue Mountain Hospital	224	53%	✗
Cedar Hills Hospital	349	58%	✗
Columbia Memorial Hospital	577	83%	✓
Coquille Valley Hospital District	258	51%	✗
Cottage Grove Community Hospital	231	82%	✓
Curry General Hospital	308	83%	✓
Good Samaritan Regional Medical Center	2,928	75%	✓
Good Shepherd Medical Center	804	87%	✓
Grande Ronde Hospital	742	76%	✓
Harney District Hospital	241	91%	✓
Kaiser Permanente Sunnyside Medical Center	2,317	72%	✗

Facility name	# HCW eligible for influenza vaccine*	Rate of influenza vaccination for eligible HCW†	Met HP2015 target (75%)
Kaiser Permanente Westside Medical Center	1013	78%	✓
Lake District Hospital	328	43%	✗
Legacy Emanuel Medical Center	5,585	83%	✓
Legacy Good Samaritan Medical Center	3,186	82%	✓
Legacy Meridian Park Medical Center	1,876	84%	✓
Legacy Mount Hood Medical Center	1,308	81%	✓
Lower Umpqua Hospital District	244	71%	✗
McKenzie-Willamette Medical Center	1,093	65%	✗
Mercy Medical Center	1,650	70%	✗
Mid-Columbia Medical Center	648	71%	✗
Oregon Health & Science University	12,858	88%	✓
Peace Harbor Hospital	335	93%	✓
Pioneer Memorial Hospital - Heppner	65	95%	✓
Pioneer Memorial (St. Charles – Prineville)	253	77%	✓
Providence Hood River Memorial Hospital	586	70%	✗
Providence Medford Medical Center	1,513	63%	✗
Providence Milwaukie Hospital	673	73%	✗
Providence Newberg Medical Center	708	79%	✓
Providence Portland Medical Center	4,362	74%	✗
Providence Seaside Hospital	449	84%	✓
Providence St. Vincent Medical Center	4,781	76%	✓
Providence Willamette Falls Medical Center	964	74%	✗
Sacred Heart Medical Center - Riverbend	5,106	80%	✓
Sacred Heart University District	1,045	67%	✗
Salem Hospital	5,857	84%	✓
Samaritan Albany General Hospital	1,455	75%	✓
Samaritan Lebanon Community Hospital	1,048	86%	✓
Samaritan North Lincoln Hospital	701	86%	✓
Samaritan Pacific Communities Hospital	792	88%	✓
Santiam Memorial Hospital	362	96%	✓
Shriner's	475	68%	✗
Silverton Hospital	1,182	82%	✓
Sky Lakes Medical Center	1,398	75%	✓
Southern Coos Hospital and Health Center	175	55%	✗
St. Alphonsus Medical Center - Baker City	253	83%	✓
St. Alphonsus Medical Center - Ontario	664	80%	✓
St. Anthony Hospital	519	97%	✓
St. Charles Medical Center - Bend	3,752	77%	✓
St. Charles Medical Center - Madras	253	74%	✗
St. Charles Medical Center - Redmond	654	78%	✓
Tillamook County Hospital	645	64%	✗
Tuality Community Hospital	1,959	67%	✗
Vibra Specialty Hospital of Portland	258	96%	✓
Wallowa Memorial Hospital	177	91%	✓
West Valley Hospital	238	94%	✓
Willamette Valley Medical Center	864	83%	✓

* Includes total number of health care worker (HCW), including employees, licensed independent practitioners, other contractors, students and volunteers without documented medical contraindication for influenza vaccination

† Calculated as: (total number of HCW vaccinated at the facility + total number of HCW vaccinated elsewhere) / (total number of HCW eligible for influenza vaccination)

Table 15. Health care worker (HCW) influenza vaccination rates for the 2014–2015 influenza season: Oregon ambulatory surgical centers (n=85)

Facility name	# HCW eligible for influenza vaccine*	Rate of influenza vaccination for eligible HCW†	Met HP2015 target (75%)
Aesthetic Breast and Cosmetic Surgery Center	14	79%	✓
Aesthetic Surgery Center of Eugene	24	67%	✗
Alberty Surgery Center	84	71%	✗
Ambulatory Surgery Center at Tanasbourne	37	54%	✗
Ashland Surgery Center	35	80%	✓
Beaver Sports Medicine ASC	28	82%	✓
Bend Surgery Center	192	89%	✓
Capitol Surgery Center	14	93%	✓
Cascade Endoscopy Center	24	96%	✓
Cascade Spine Center	29	48%	✗
Cascade Surgery Center, LLC - Manzanita Ave	24	71%	✗
Cascade Surgicenter, LLC	119	78%	✓
Cataract and Laser Institute of Southern Oregon	56	63%	✗
Cedar Hills Surgery Center	8	38%	✗
Center for Cosmetic & Plastic Surgery	14	86%	✓
Center for Specialty Surgery	99	65%	✗
Columbia Gorge Surgery Center	16	13%	✗
Columbia River Surgery Center	57	93%	✓
Cornell Surgery Center	48	69%	✗
Croisan Ridge Surgery Center	30	33%	✗
Doctors Park Surgery Center	55	82%	✓
East Oregon Surgery Center	19	58%	✗
East Portland Surgery Center	78	58%	✗
Eastern Oregon Regional Surgery Center	10	60%	✗
Eye Surgery Center - Albany	15	87%	✓
Eye Surgery Institute	41	24%	✗
EyeHealth Eastside Surgery Center	60	80%	✓
Futures Outpatient Surgical Center	43	84%	✓
Grants Pass Surgery Center, LLC	75	67%	✗
Kaiser Permanente South Interstate	240	70%	✗
Kaiser Permanente Skyline	303	79%	✓
Kaiser Permanente Sunnybrook	454	71%	✗
Klamath Surgery Center	38	50%	✗
Lane Surgery Center	32	75%	✓
Laser & Surgical Eye Center, LLC	42	45%	✗
Lovejoy Surgicenter	27	30%	✗
McKenzie Surgery Center	102	73%	✗
Meridian Center for Surgical Excellence	20	100%	✓
Middle Fork Surgery Center	20	65%	✗
Mt. Scott Surgery Center	108	52%	✗
North Bend Medical Center	59	85%	✓
Northbank Surgical Center	153	55%	✗
Northwest Ambulatory Surgery Center	95	74%	✗
Northwest Center for Plastic Surgery, LLC	21	76%	✓
Northwest Gastroenterology Clinic	44	86%	✓

Facility name	# HCW eligible for influenza vaccine*	Rate of influenza vaccination for eligible HCW†	Met HP2015 target (75%)
Northwest Spine and Laser Surgery Center	37	84%	✓
Ontario Surgery Center	21	67%	✗
Oregon Ear, Nose and Throat Surgery Center, LLC	40	45%	✗
Oregon Endoscopy Center, LLC	40	93%	✓
Oregon Eye Surgery Center, Inc.	49	61%	✗
Oregon Outpatient Surgery Center	101	73%	✗
Oregon Surgicenter	35	86%	✓
Pacific Cataract & Laser Institute	10	90%	✓
Pacific Cataract and Laser Institute	12	75%	✓
Pacific Digestive Endoscopy Center	8	38%	✗
Pacific Surgery Center	24	75%	✓
Pearl SurgiCenter	30	80%	✓
Petroff Center	17	41%	✗
Redmond Surgery Center LLC	36	56%	✗
River Road Surgery Center	39	74%	✗
RiverBend Ambulatory Surgery Center	174	56%	✗
Rogue Valley Surgery Center, LLC	9	33%	✗
Rush Surgery Center	13	62%	✗
Salem Endoscopy Center	83	95%	✓
Salem Laser and Surgery Center	26	92%	✓
Samaritan Endoscopy Center	27	81%	✓
Slocum Surgery center	73	42%	✗
South Coast Surgery	30	50%	✗
South Portland Surgical Center, LLC	61	52%	✗
Spine Surgery Center of Eugene	39	90%	✓
Surgery Center of Southern Oregon	175	63%	✗
The Corvallis Clinic Day Surgery Center	14	93%	✓
The Corvallis Clinic Surgery Center	95	88%	✓
The Oregon Clinic Gastroenterology East	73	64%	✗
The Oregon Clinic Gastroenterology South	129	67%	✗
The Oregon Clinic Gastroenterology West	75	79%	✓
The Portland Clinic Surgery Centers	46	61%	✗
Two Rivers Surgical Center	44	77%	✓
Valley Plastic Surgery	11	64%	✗
Vision Surgery and Laser Center	33	55%	✗
Westside Surgery Center	35	63%	✗
Willamette Surgery Center	83	93%	✓
Willamette Valley Eye SurgiCenter	22	45%	✗
Wilshire Surgery Center	52	83%	✓
Yamhill Valley Endoscopy	11	100%	✓

* Includes total number of health care worker (HCW), including employees, licensed independent practitioners, other contractors, students and volunteers without documented medical contraindication for influenza vaccination

† Calculated as: (total number of HCW vaccinated at the facility + total number of HCW vaccinated elsewhere) / (total number of HCW eligible for influenza vaccination)

Table 16. Health care worker (HCW) influenza vaccination rates for the 2014–2015 influenza season: Oregon skilled nursing facilities (n=137)

Facility name	# HCW eligible for influenza vaccine*	Rate of influenza vaccination for eligible HCW†	Met HP2015 target (75%)
Aidan Senior Living at Reedsport	41	71%	X
Avamere Court at Keizer	140	61%	X
Avamere Crestview of Portland	125	33%	X
Avamere Health Services of Rogue Valley	92	46%	X
Avamere Medford at Three Fountains	56	82%	✓
Avamere Rehabilitation of Beaverton	110	39%	X
Avamere Rehabilitation of Clackamas	62	74%	X
Avamere Rehabilitation of Coos Bay	68	78%	✓
Avamere Rehabilitation of Eugene	98	18%	X
Avamere Rehabilitation of Hillsboro	105	52%	X
Avamere Rehabilitation of King City	109	37%	X
Avamere Rehabilitation of Lebanon	100	26%	X
Avamere Rehabilitation of Oregon City	92	21%	X
Avamere Riverpark Of Eugene	178	44%	X
Avamere Transitional Care at Sunnyside	95	33%	X
Avamere Twin Oaks of Sweet Home	68	24%	X
Avamere of Junction City	54	70%	X
Avamere of Newport Rehabilitation and Specialty Care	56	41%	X
Baycrest Village	231	94%	✓
Bend Transitional Care	71	61%	X
Blue Mountain Care Center	38	89%	✓
Care Center East	89	73%	X
Cascade Manor	57	82%	✓
Cascade Terrace	136	53%	X
Cascade View Nursing and Alzheimer's	66	27%	X
Chehalem Health and Rehabilitation	73	66%	X
Clatsop Care Center	100	79%	✓
Coast Fork Nursing Center	65	74%	X
Columbia Basin Care Facility	123	52%	X
Columbia Care Center	57	61%	X
Cornerstone Care Option	82	72%	X
Corvallis Manor Nursing and Rehabilitation Center	147	62%	X
Creswell Health and Rehabilitation Center	63	68%	X
Dallas Retirement Village	338	31%	X
East Cascade Retirement Community	4	50%	X
Empres Hillsboro	131	15%	X
Fair View Transitional Health Center	86	59%	X
Fernhill Estates	29	72%	X
Forest Grove Rehabilitation and Care Center	85	49%	X
French Prairie Nursing and Rehab Center	95	81%	✓
Friendsview Manor	175	49%	X
GSS Fairlawn Village	179	35%	X
Gateway Care & Retirement	87	77%	✓

Facility name	# HCW eligible for influenza vaccine*	Rate of influenza vaccination for eligible HCW†	Met HP2015 target (75%)
Glisan Care Center	85	93%	✓
Good Samaritan Curry Village	90	73%	✗
Good Samaritan Society Eugene Village	70	60%	✗
Gracelen Terrace	124	100%	✓
Green Valley Nursing and Rehabilitation Center	135	90%	✓
Health Care at Foster Creek	188	90%	✓
Hearthstone Nursing & Rehabilitation Center	118	72%	✗
Highland House Nursing and Rehabilitation Center	154	57%	✗
Hillside Heights	132	23%	✗
Holgate Community	146	38%	✗
Holladay Park Plaza	216	52%	✗
Hood River Care Center	91	48%	✗
Independence Health and Rehab	84	20%	✗
La Grande Post Acute Rehab	68	56%	✗
Lakeview Gardens	33	79%	✓
Laurel Hill Nursing and Rehab Center	21	43%	✗
Laurelhurst Village	220	35%	✗
Lawrence Convalescent Center	14	64%	✗
Lifecare Center McMinnville	108	77%	✓
Lifecare Center of Coos Bay	98	59%	✗
Linda Vista Nursing & Rehabilitation	108	33%	✗
Marian Estates	138	61%	✗
Marquis Autumn Hills	111	73%	✗
Marquis Centennial	195	95%	✓
Marquis Forest Grove	71	79%	✓
Marquis Mt Tabor	192	55%	✗
Marquis Newberg	90	87%	✓
Marquis Oregon City Post Acute Rehab	96	67%	✗
Marquis Piedmont	129	75%	✓
Marquis Plum Ridge	128	48%	✗
Marquis Post Acute Rehab at Mill Park	78	62%	✗
Marquis Post Acute Rehabilitation at Hope Village	118	56%	✗
Marquis Silver Gardens	38	100%	✓
Marquis Springfield	217	80%	✓
Marquis Vermont Hills	98	95%	✓
Marquis Wilsonville	123	85%	✓
Mary's Woods at Marylhurst	383	44%	✗
Maryville Nursing Home	275	48%	✗
Meadow Park	68	72%	✗
Mennonite Home	215	63%	✗
Milton Freewater Health and Rehabilitation Center	64	64%	✗
Milwaukie Convalescent Center	131	28%	✗
Mirabella Portland	249	43%	✗
Molalla Manor Care Center	73	95%	✓
Myrtle Point Care Center	59	56%	✗
Nehalem Valley Care Center	50	92%	✓

Facility name	# HCW eligible for influenza vaccine*	Rate of influenza vaccination for eligible HCW†	Met HP2015 target (75%)
Ochoco Care Center	52	81%	✓
Oregon City Health Care Center	53	62%	✗
Oregon Veterans' Home	272	63%	✗
Pacific Health & Rehabilitation	75	69%	✗
Park Forest Care Center	65	49%	✗
Pilot Butte Rehab	50	60%	✗
Pioneer Nursing Home	60	0%	✗
Porthaven Care Center	112	93%	✓
Portland Health and Rehab	76	74%	✗
Presbyterian Community Care Center	137	47%	✗
Prestige Care & Rehab of Menlo Park	100	47%	✗
Prestige Care and Rehab of Reedwood	66	83%	✓
Prestige Oakwood	60	43%	✗
Prestige Post Acute Care & Rehabilitation Center -	69	81%	✓
Providence Benedictine	326	75%	✓
Providence Child Center	256	77%	✓
Redmond Health Care Center	61	41%	✗
Regency Albany	109	39%	✗
Regency Florence	79	68%	✗
Regency Gresham Nursing and Rehabilitation Center	155	58%	✗
Regency Hermiston	100	77%	✓
Robison Jewish Health Center	435	44%	✗
Rogue Valley Manor	88	25%	✗
Rose City Nursing Home	39	82%	✓
Rose Haven Nursing Center	100	81%	✓
Rose Linn Care Center	95	26%	✗
Rose Schnitzer Manor	363	23%	✗
Rose Villa Senior Living	180	62%	✗
Royale Gardens Health and Rehabilitation Center	195	62%	✗
Salem Transitional Care	80	89%	✓
Sheridan Care Center	92	51%	✗
Sherwood Park Nursing & Rehab Center	123	33%	✗
South Hills Rehabilitation Center	117	97%	✓
The Dalles Health and Rehabilitation	56	63%	✗
The Pearl	148	28%	✗
The Village at Hillside	159	0%	✗
Tierra Rose Care Center	145	69%	✗
Timberview Care Center	97	98%	✓
Town Center Village Rehab	49	76%	✓
Trinity Mission Health & Rehab of Portland, LLC	39	46%	✗
Umpqua Valley Nursing and Rehabilitation Center	121	64%	✗
Valley West Health Care Center	150	75%	✓
Village Health Care	110	47%	✗
Village Manor	63	84%	✓
West Hills Health and Rehab	181	47%	✗
Willamette View Health Center	110	45%	✗
Willowbrook Terrace	72	92%	✓

Facility name	# HCW eligible for influenza vaccine*	Rate of influenza vaccination for eligible HCW†	Met HP2015 target (75%)
Windsor Health and Rehabilitation	61	80%	✓

* Includes total number of health care worker (HCW), including employees, licensed independent practitioners, other contractors, students and volunteers without documented medical contraindication for influenza vaccination

† Calculated as: (total number of HCW vaccinated at the facility + total number of HCW vaccinated elsewhere) / (total number of HCW eligible for influenza vaccination)

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