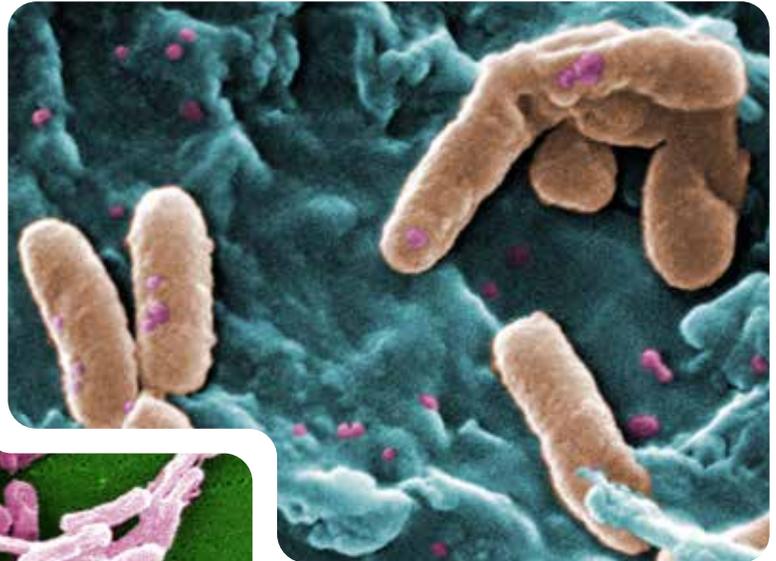
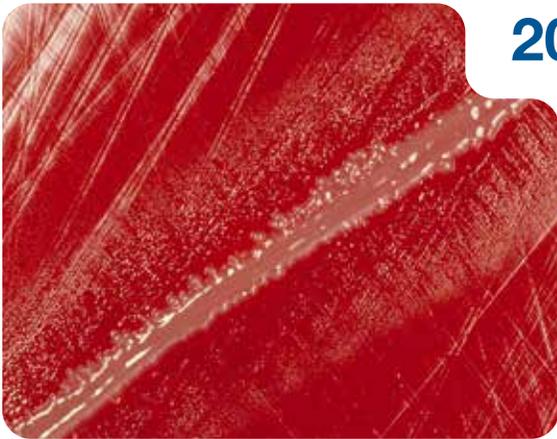


Healthcare Acquired Infections

2009–2012 Oregon Report



Oregon
Health
Authority

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Oregon Healthcare Acquired Infections

July, 2013

Prepared by: The Oregon Health Authority, Public Health Division

This report is available on our website:

<http://public.health.oregon.gov/DiseasesConditions/CommunicableDisease/HAI/Pages/OregonReporting.aspx>

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Executive Summary and Report Findings

This report provides an overview of healthcare acquired infections (HAI) that Oregon healthcare facilities were required to report between 2009 and 2012. HAIs are infections that occur during or after treatment for other medical conditions. These HAIs are potentially life-threatening and preventable. According to the U.S. Department of Health and Human Services (HHS), about one in every 20 patients in the hospital will develop a HAI. Billions of dollars are spent and tens of thousands of patients die each year due to these infections.¹ The HHS National Action Plan aims for a 50 percent reduction of central line-associated bloodstream infections (CLABSI) and a 25 percent reduction in admissions and readmissions for surgical-site infections (SSI) by 2013.²

The 2007 Oregon Legislative Assembly determined that Oregonians should be free from infections acquired during the administration of health care and passed House Bill 2524. It established a mandatory HAI Reporting Program to raise awareness of the problem, to promote a transparent means of informing consumers, and to aid hospitals in reducing and preventing HAIs. During the years 2009 to 2012, the HAI Reporting Program lay within the Office for Oregon Health Policy and Research (OHPR). In late 2012, HAI reporting was transferred to the HAI program in the Acute and Communicable Disease and Prevention Section of the Oregon Health Authority (OHA), Public Health Division.

With the guidance of an advisory committee, this is the fourth annual report on HAIs for the state of Oregon. Infections tracked by the program are as follows:

- Central line-associated bloodstream infections (CLABSIs) in
 - Adult intensive care units (ICUs)
 - Neonatal ICUs (NICUs)
- Surgical infections following
 - Abdominal hysterectomy (HYST)
 - Colon (COLO) surgery
 - Coronary artery bypass grafting (CBGB)
 - Hip replacement (HPRO)
 - Knee replacement (KPRO)
 - Laminectomy (LAM)

¹ U.S. Department of Health & Human Services, Healthcare-Associated Infection (HAI), 2013. www.hhs.gov/ash/initiatives/hai/index.html. Accessed May 14, 2013.

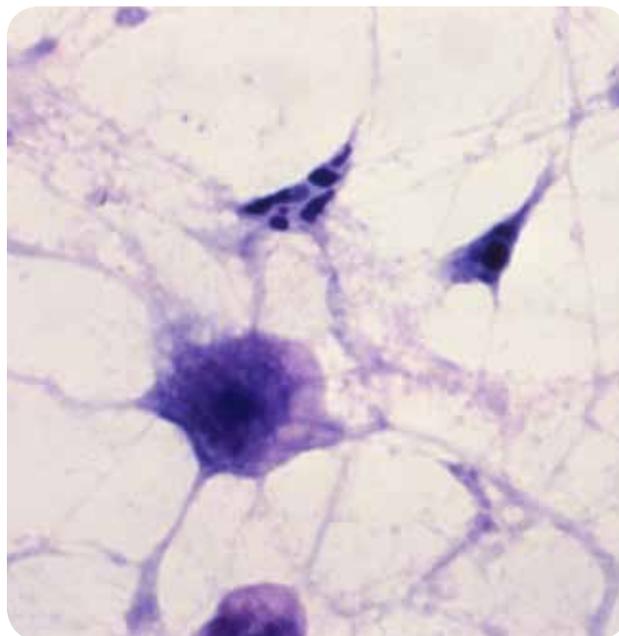
² U.S. Department of Health and Human Services. National action plan to reduce healthcare-associated infections, 2010. www.hhs.gov/ash/initiatives/hai/actionplan/index.html. Accessed May 15, 2013.

In 2012, one additional infection was added to Oregon's mandatory reporting requirements of hospitals: laboratory-identified *Clostridium difficile* infections (CDI). Like those listed above, CDIs are associated with increased length of hospital stay, costs, and mortality. While these infections are monitored facility-wide, no surveillance is conducted in NICUs; Specialty Care Nurseries (SCN); among babies in Labor, Delivery, Recovery, and Post-partum; well-baby nurseries; or well-baby clinics.

Another change in this year's annual report is the introduction of the Standardized Infection Ratio (SIR), a method developed by the Centers for Disease Control and Prevention (CDC) to adjust for underlying differences in patient risk to allow for better comparison among facilities. The three previous annual reports used crude infection rates as the basic measurement. These crude rates were presented as the number of infections per 1000 days and are still listed under the SIR graph for each type of infection. A more detailed discussion of the SIR is found later in the section headed "Standardized Infection Ratio."

CLABSIs in adult ICUs and infections related to CBGBs, KPROs, HPROs, and HYSTs have all decreased in frequency. LAM infections remained unchanged. CLABSIs in the NICU and COLO infections have increased. CDI is new this year so no prior data are available for comparison.

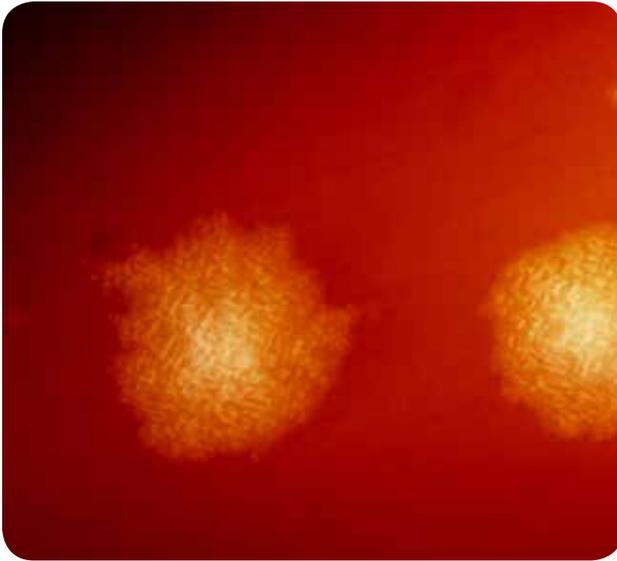
Of reportable NHSN infections in Oregon, CLABSIs in ICUs had the largest decrease between 2009 and 2012. While the number of central line days decreased by 1.9% (from 59,243 days in 2009 to 58,143 days in 2012), the number of infections per 1000 central line days plunged 59%, from 1.42 to 0.58 infections per 1000 central line days. In neonatal ICUs, the rate of infections from



The *Clostridium difficile* enterotoxin is the principal toxin involved in illness due to *C. difficile*.

CLABSIs increased from 0.91 per 1000 central line days in 2011 to 1.23 in 2012. Both of the Oregon CLABSI infection rates were well below the expected number of infections used in the SIR calculation.

The CBGB infection rate decreased 35% between 2009 and 2012. The rate of KPRO surgery infections decreased by 4.6%. The HPRO and HYST surgeries have had decreases in their rates of infections of 14.3% and 5.5%, respectively. There was no change in the rate of LAM surgery infections. The only infection rate increased was COLO, which rose 5.6% from 2011. Five of the six surgical HAI measures monitored in Oregon reported lower numbers of infections than expected. HPRO infections were the only ones reported at higher-than-expected rates (3.5% higher). CBGB and KPRO surgical infection rates have been reported since 2009. The data for the other four surgical procedures have been collected for only two years. It is difficult to determine whether changes represent significant trends.



Clostridium difficile colonies on a blood agar plate

The Oregon Health Authority and the Oregon HAI Reporting Program embrace the goals of better health, better healthcare, and lower costs. CLABSIs carry an approximate mortality of 15% to 25%.³ Moreover, each CLABSI accounts for an additional expense of \$7,288 to \$29,156.⁴ Decreases in the number of CLABSIs save both money and lives.

For surgical-site infections, a decline in the number of infections means a decline in the need and use of antibiotics for treatment.⁵ The excessive use of antibiotics increases the development of antibiotic-resistant organisms.⁶ Infections related to surgical procedures can prolong recovery time and can require readmission to the hospital.⁷ The cost of a surgical-site infection is estimated to vary between \$11,874 and \$34,670.⁸

The OHA, Public Health Division is currently collecting influenza vaccination data for healthcare workers in hospitals, long-term care facilities, and ambulatory surgical centers. The hospital data for the last three influenza seasons are included in this report. A more detailed report, including data collected from the long-term care facilities and the ambulatory surgical centers, will be issued in the fall of 2013.

The purposes of this report are to promote activities and interventions by healthcare facilities to target and improve their infection prevention efforts, and to enable consumers to make informed healthcare choices.

3 CDC. Vital Signs: Central-line associated bloodstream infections--United States, 2001, 2008, and 2009. MMWR 2001; 60:243-8.

4 2007 dollars, unadjusted. Source: Scott, R Douglas. The direct medical costs of healthcare-associated infections in US hospitals and the benefits of prevention. March 2009. www.cdc.gov/ncidod/dhqp/pdf/Scott_CostPaper.pdf. Accessed May 27, 2013.

5 Weinstein. R.A. (2001) Controlling antimicrobial resistance in hospitals: infection control and use of antibiotics. *Emerg Infect Dis* 2001 Mar-Apr;7(2): 188-192.

6 Weinstein. R.A. (2001) Source: *Ibid*, 5.

7 Emerson CB et al. Healthcare associated infections and hospital readmission. *Infect Control Hosp Epidemiol.* 2012 Jun;33(6):539-44. Epub 2012 Apr 16.

8 2007 dollars, unadjusted. Source: *Ibid*, 4.

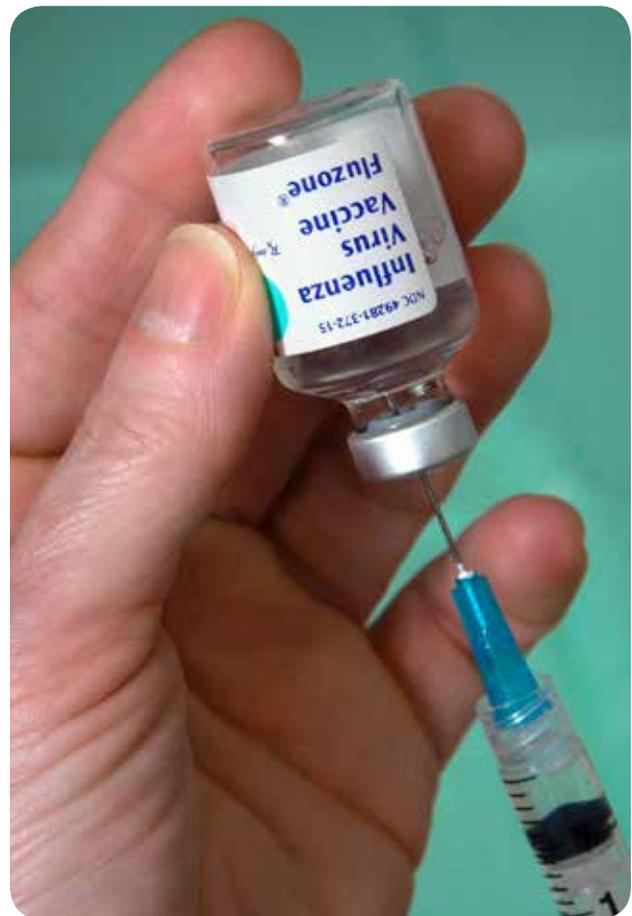
Methods

The National Healthcare Safety Network (NHSN) is used by more than 5,000 hospitals across the United States for reporting healthcare associated infections. NHSN is a HAI surveillance system developed by the Centers for Disease Control and Prevention (CDC). The system continues to be administered and maintained by CDC. Facilities across the nation use this free, secure system to monitor patient and healthcare personnel safety data. NHSN provides a means to enter, manage, and analyze data to track HAIs, pinpoint problem areas, and measure the progress of HAI prevention strategies. Oregon hospitals submit data to NHSN, which are then used to provide feedback to hospitals, to create reports, and to guide HAI prevention efforts.

The Centers for Medicare and Medicaid Services (CMS) established protocols to assist in stimulating and supporting improvements in the quality of care delivered by hospitals. The Surgical Care Improvement Project (SCIP) was the product of these protocols and is intended to help facilities improve their caliber of patient care by providing easily understandable, objective information on hospital performance from the consumer's perspective. Oregon's hospitals report these data to the CMS's Hospital Compare website.

Healthcare worker influenza vaccination data are collected using a survey based on the protocols provided by the Advisory Committee on Immunization Practices (ACIP) and CDC. Hospitals, ambulatory surgical centers, and long-term-care facilities receive the survey in October and are required to report in May, after the end of the influenza season.

Hospitals are required to report CLABSIs if they had more than 50 central line days and SSIs if they performed more than 20 procedures.



Standardized Infection Ratio

This report uses the standardized infection ratio (SIR), CDC's recommended method for determining how facilities compare to national norms and to prior years' data collection. The SIR is a standard measurement that allows comparison between number of **reported** infections and number of infections **expected** by national data. The SIR is considered by CDC to be the best measure to evaluate a facility's performance in relation to previous data for the same facility and to national norms.

The SIR incorporates information about appropriate risk factors to increase the validity of such comparisons. Adjustments are made to the predicted number of infections in order to account for differences between hospitals. Hospitals that provide

more complex care and have sicker patients will have higher risk factors for infection than hospitals that provide less complex care and have fewer patients. However, complexity of care is not a precise measure. Therefore, when looking at CLABSI infections, other factors such as the bed size of a hospital, geographic location, device utilization ratios (how often central lines are used in a facility), and medical school affiliation are also included in the calculation. For SSIs, adjustments include the duration of the surgical procedure, whether the operative site was "contaminated" or "clean," and the American Society of Anesthesiology (ASA) score (health level of the patient). All of these risk factors are incorporated in determining the expected number of infections.

Understanding and Interpreting the SIR

A SIR of 1.00 means the hospital reported exactly the same number of infections as would be expected by national data. A SIR **less** than 1.00 means the hospital reported **fewer** infections than predicted, and a SIR **greater** than 1.00 means the hospital reported **more** infections than predicted. The SIR cannot be calculated if the number of predicted infections is less than one.

The 95% confidence interval (CI) represents a measure of precision and is shown in the hospital HAI data sheets as a vertical line that runs through the SIR. The longer the

95% CI line, the less precise the estimate of the SIR. If the 95% CI crosses the 1.0 line (represented by a dotted line in the data sheets), the observed number of infections was not significantly different from the predicted number of infections. If the 95% CI **does not cross** the 1.0 line value, then there is most likely a statistically significant difference between the number of observed and predicted infections.

The Oregon Health Authority (OHA), Public Health Division and the Healthcare Associated Infections Advisory Committee

encourage care when examining reported HAI data. The likelihood of infection is influenced by a number of risk factors, including number of devices or procedures used and severity and types of illness

present. The NHSN system uses risk adjustment to accommodate these factors, but there may still be individual patient risks that are difficult to measure, perhaps particularly evident in severely ill patients.

Hospital Review

Data were extracted from NHSN and CMS Hospital Compare and sent to each Oregon hospital. The chief executive officer and the lead infection control professional at each hospital received detailed spreadsheets of their 2009 – 2012 data. Facilities were given 14 days to provide any needed corrections prior to publication. In addition, facilities were given the opportunity to submit written comments to be included in the annual report. The purpose of this

hospital review period was to verify that the extracted NHSN data were as accurate as possible.

During the review period, 40 Oregon hospitals either made corrections to data provided through NHSN or needed to complete missing data sets. After corrections were made, the new data set in NHSN was shared with facilities for confirmation of accuracy.



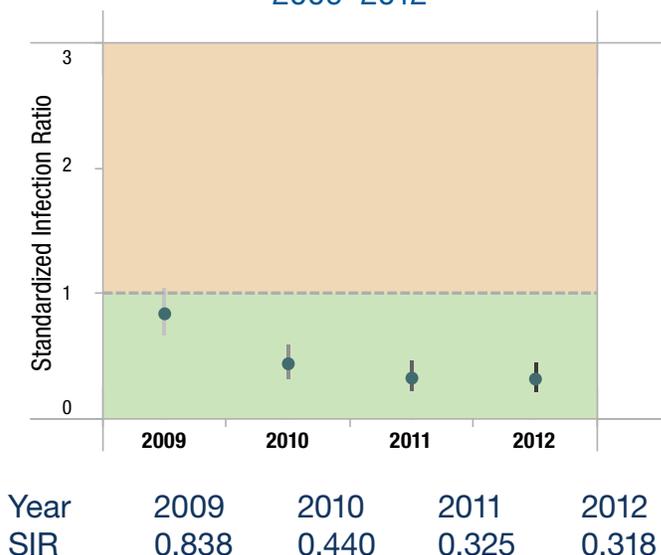
Central Line-Associated Bloodstream Infections Overview

A central line is used in intensive care units (ICUs) to provide life-saving medications and fluids, to monitor the patient's condition, and to draw blood for various tests. Unfortunately, if contaminated, the central line can let microorganisms into the bloodstream and result in serious infection. These infections are called central line-associated bloodstream infections (CLABSIs). In a CLABSI, microorganisms enter through or around the tubing or arrive in contaminated fluids. Though anyone with a central line has some risk of CLABSI, certain patients are at especially high risk, such as the elderly, neonates, and patients with weak immune systems.

Adult ICU CLABSI

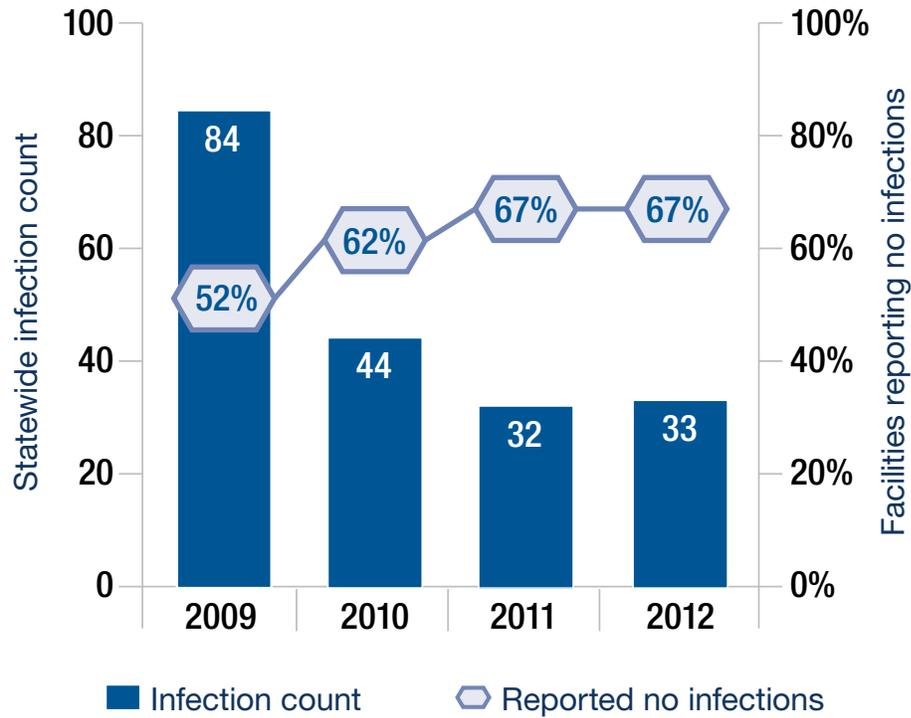
In 2009, Oregon's SIR for CLABSIs in adult ICUs was 0.838, and by 2012 the SIR had decreased 62% to 0.318. The total number of statewide adult CLABSIs reported in 2012 decreased 61% from 2009. The total number of CLABSI infections in 2012 reported in adult ICUs is 68% lower than expected in the SIR calculation.

Figure 1: CLABSIs in Adult ICUs
2009–2012



There was an increase in the number of facilities reporting no CLABSIs—from 52% in 2009 to 67% in 2012.

Figure 2: CLABSI Counts and Percent Reporting No Infections 2009–2012



2009	# of hospitals: 42	CLABSIs: 84	Rate per 1000 CL days: 1.42
2010	# of hospitals: 45	CLABSIs: 44	Rate per 1000 CL days: 0.76
2011	# of hospitals: 43	CLABSIs: 32	Rate per 1000 CL days: 0.57
2012	# of hospitals: 45	CLABSIs: 33	Rate per 1000 CL days: 0.57

CLABSI Neonatal ICUs

Seven hospitals in Oregon have Neonatal Intensive Care Units (NICUs), and they began reporting CLABSIs for their patients in 2011. A total of 11 infections were reported in 2012, an increase from the 9 reported in 2011. The SIR increased from 0.417 in 2011 to 0.586 in 2012. However, the expected number of CLABSIs for NICUs in 2012 is 19. Therefore, the reported total of 11 infections is still 42% lower than the expected number.

Four hospitals out of the seven reporting hospitals had no CLABSI infections during 2012. This is a 100% increase in the number of facilities reporting no CLABSIs in the NICU from two facilities in 2011.

Figure 3: CLABSIs in NICUs 2011 – 2012

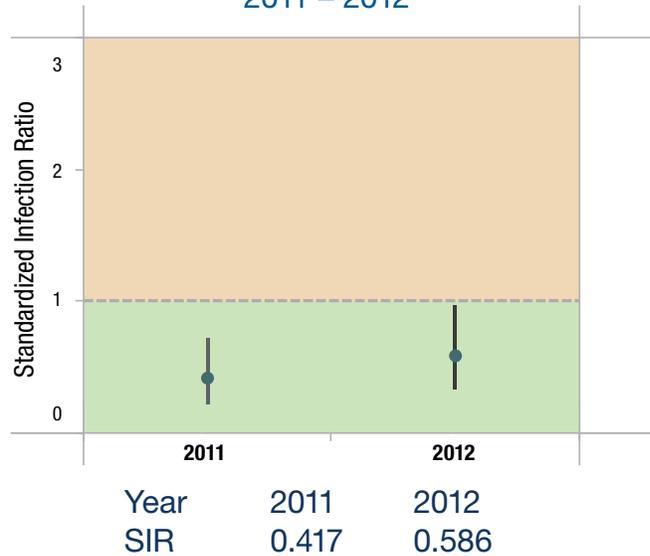
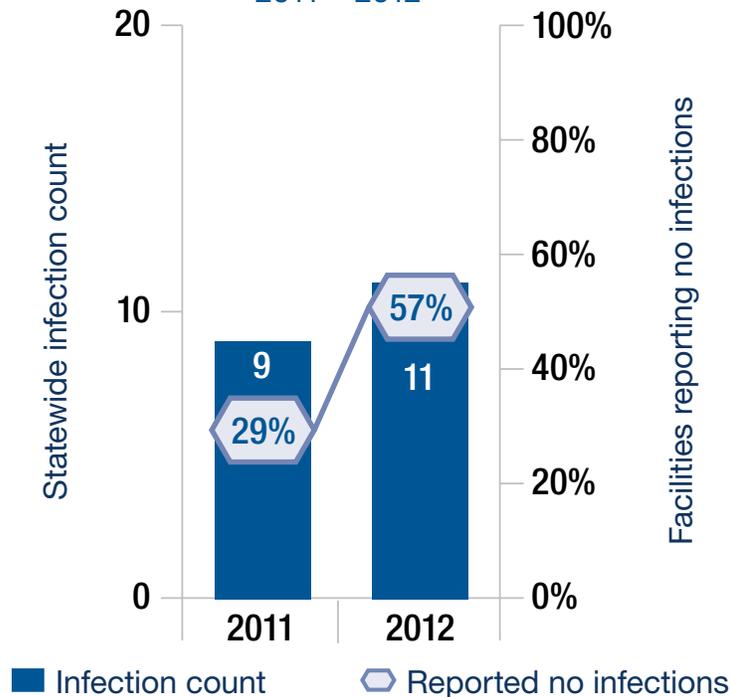


Figure 4: NICU CLABSI Counts and Percent Reporting No Infections 2011 – 2012



2011	# of hospitals: 7	CLABSIs: 9	Rate per 1000 CL days: 0.91
2012	# of hospitals: 7	CLABSIs: 11	Rate per 1000 CL days: 1.23

Surgical-Site Infections Overview

Infections at the site of a surgery are called surgical-site infections (SSIs). Facilities are required to use standardized methods to report several SSIs, which were selected for their frequency, typical severity, and volume of associated procedures performed by facilities. While surgeries may be performed as inpatient and outpatient procedures, current Oregon reporting requirements are only for inpatient procedures. An inpatient procedure is classified by NHSN as one whose date of admission and date of discharge from the hospital occur on different calendar days. NHSN defines reportable procedures for surveillance as those that occur during a single event in an operating room and where the incision was closed following the surgery.

To be reportable, a SSI must present within 30 days of the procedure or within one year if an implant was used (surgeries which use implants are the CBGBs, HPROs, and KPROs)⁹. Fever, pain, tenderness, incision site drainage, redness, and the development of an abscess are all common signs of an infection. Three individual SSI categories are described in NHSN. They are superficial incisional, deep incisional, and organ-space infections. These categories are based on the location of the infection. Superficial incisional infections involve only the top layers of the skin. Deep incisional infections involve deep soft tissues such as the fascia and muscle layers of the incision. Organ-space infections involve any part of the body that is manipulated or opened during the procedure, excluding those defined in the superficial and deep incisional infections. Superficial incisional infections are excluded from the calculation of standardized infection ratios (SIR).

⁹ Note that starting with 2013, implant status is no longer used in NHSN definitions. This report is based on data through 2012 when implants were still included in the definition.

Abdominal Hysterectomy Surgical-Site Infections

An abdominal hysterectomy is the removal of the uterus through an incision made in the abdominal wall and is typically performed by a gynecologist. Oregon hospitals began reporting surgical-site infections for abdominal hysterectomies in 2011.

The statewide abdominal hysterectomy infection SIR reported by Oregon hospitals decreased 4.5%, from 0.67 in 2011 to 0.64 in 2012. The total number of infections decreased 11% from 47 in 2011 to 42 in 2012.

Twenty-seven facilities performing abdominal hysterectomies in 2012 reported no infections, compared to 32 in 2011.

Figure 5: Abdominal Hysterectomy Surgical-Site Infections 2011 – 2012

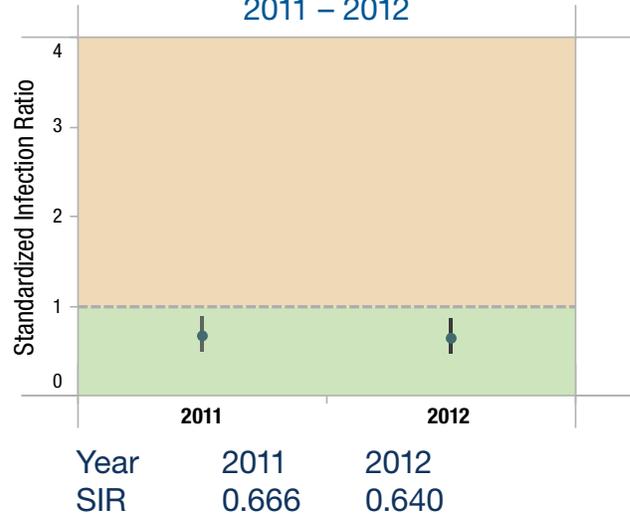


Figure 6: Abdominal Hysterectomy SSIs and Percent Reporting No Infections 2011 – 2012



2011	# of hospitals: 48	SSIs: 47	Procedures: 3694	Procedures with SSIs (%): 1.27
2012	# of hospitals: 46	SSIs: 42	Procedures: 3502	Procedures with SSIs (%): 1.20

Colon Surgical-Site Infections

The lower part of the digestive tract is called the large intestine or colon. A surgery performed in this part of the body is referred to as colon surgery. Oregon hospitals began reporting surgical-site infections for colon surgeries in 2011.

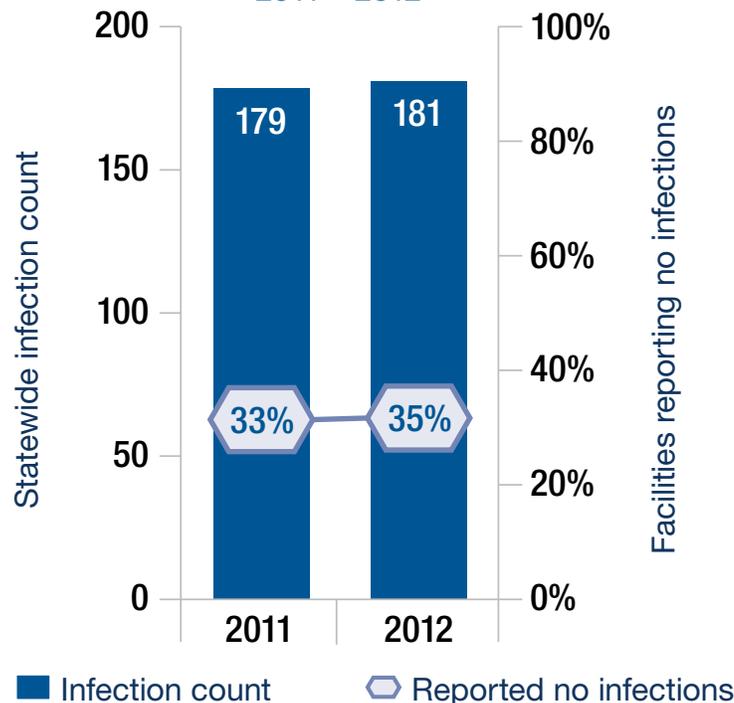
In 2011, the first year of reporting for colon surgery, 179 SSIs were reported (SIR=0.752), whereas in 2012, 181 infections (SIR=0.803) were reported. The incidence remained relatively stable with a 1% increase in the number of infections and a 6.8% increase in SIR since reporting began. In addition, based on the SIR calculation, the expected number of infections for 2012 was 225. Oregon reported 20% fewer colon surgical-site infections than were expected.

During 2011, 17 Oregon hospitals reported no infections associated with colon surgeries. This number remained stable in 2012. However, since there were fewer hospitals performing colon surgeries in 2012, the percentage of facilities reporting no infections increased.

Figure 7: Colon Surgery Surgical-Site Infections 2011 – 2012



Figure 8: Colon Surgery SSIs and Percent Reporting No Infections 2011 – 2012



2011	# of hospitals: 51	SSIs: 179	Procedures: 4009	Procedures with SSIs (%): 4.46
2012	# of hospitals: 48	SSIs: 181	Procedures: 3844	Procedures with SSIs (%): 4.71

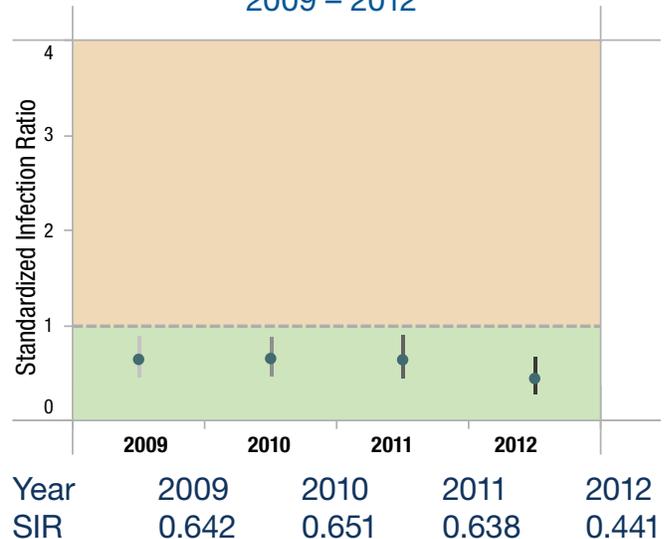
CBGB Surgical-Site Infections

Coronary artery bypass graft (CBGB) surgery involves taking a vein or artery from either the chest or another part of the body to bypass a blocked artery in the heart to create an alternate path for the blood to flow to the heart muscle.

A decrease of 47.5% in the total number of CBGB-associated infections was reported from all statewide Oregon facilities since reporting began in 2009. The SIR decreased from 0.642 to 0.441 (31%) between 2009 and 2012. The number of SSIs from CBGBs in Oregon in 2012 was 21. This is 56% lower than the expected number of CBGB-associated infections in 2012 of 48 per year.

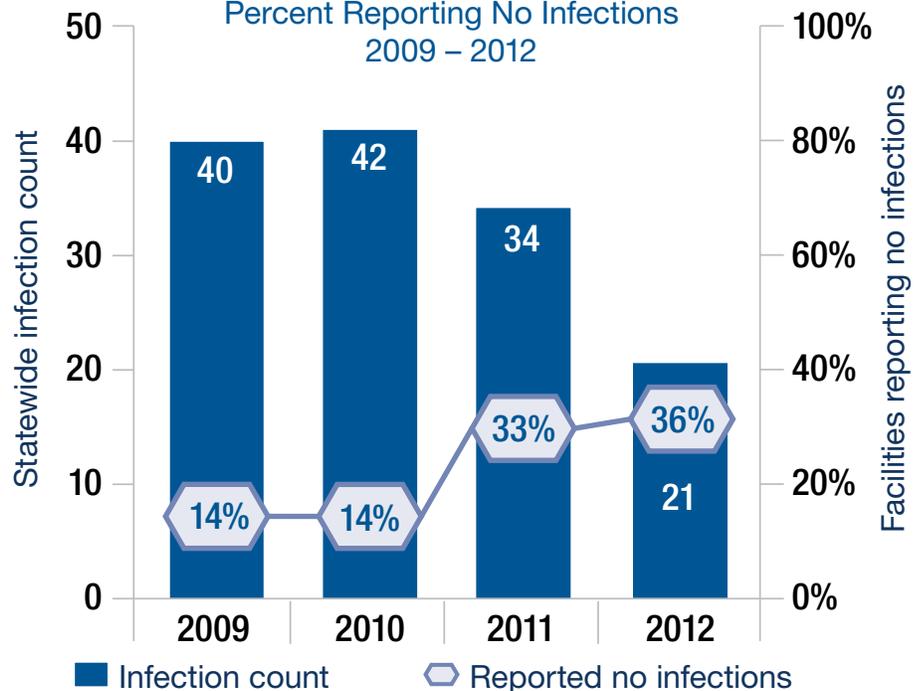
Infections from CBGBs may not be evident for up to one year after the surgery because the procedure requires the implantation of hardware such as sternal wires.¹⁰ The percentage of facilities reporting no CBBG SSI infections has more than doubled since mandatory reporting began, from 14% in 2009 to 36% in 2012.

Figure 9: Coronary Artery Bypass Graft (CBGB) Surgical-Site Infections 2009 – 2012



¹⁰ Note that starting with 2013, implant status is no longer used in NHSN definitions. This report is based on data through 2012 when implants were still included in the definition.

Figure 10: Coronary Artery Bypass Graft (CBGB) SSIs and Percent Reporting No Infections 2009 – 2012



2009	# of hospitals: 14	SSIs: 40	Procedures: 2935	Procedures with SSIs (%): 1.36
2010	# of hospitals: 14	SSIs: 42	Procedures: 3046	Procedures with SSIs (%): 1.38
2011	# of hospitals: 15	SSIs: 34	Procedures: 2529	Procedures with SSIs (%): 1.34
2012	# of hospitals: 14	SSIs: 21	Procedures: 2372	Procedures with SSIs (%): 0.89

Hip Replacement Surgical-Site Infections

Hip replacement or revision surgery (HPRO) refers to the removal and replacement of part or all of the damaged cartilage and bone from the hip joint. It also includes replacing or resurfacing the joint with new, man-made products. Oregon hospitals began reporting surgical-site infections for hip replacement surgeries in 2011.

There were 93 HPRO SSIs reported in 2012, compared with 103 in 2011. The corresponding SIR dropped from 1.15 to 1.04. This translates to a hip replacement SSI infection count that decreased from 2011 to 2012 by 10%, while the SIR decreased 9.5%. Although the SIR in 2012 was greater than 1.00, the rate of SSIs associated with HPROs in Oregon was not significantly higher than the national average.

Due to the implanted artificial hardware, infections from HPRO surgeries may arise for up to one year after the surgery. In 2011, fifteen hospitals (31%) reported no SSIs related to hip replacement surgeries. This improved to 35% in 2012 with sixteen hospitals reporting no HPRO-related SSIs.

Figure 11: Hip Replacement Surgical-Site Infections 2011 – 2012

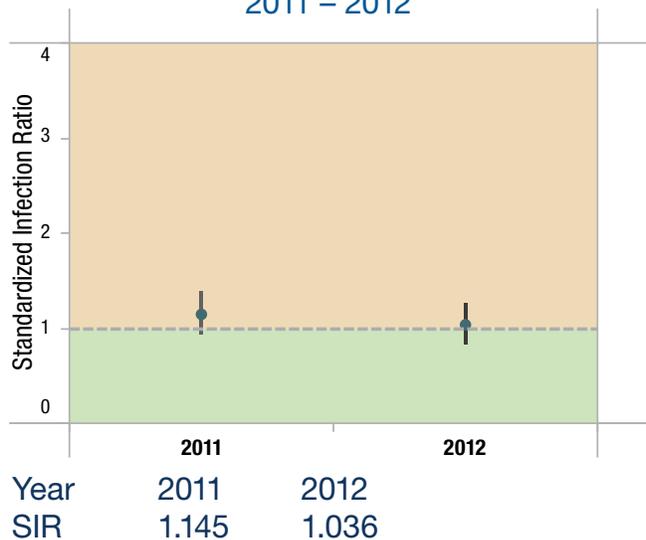
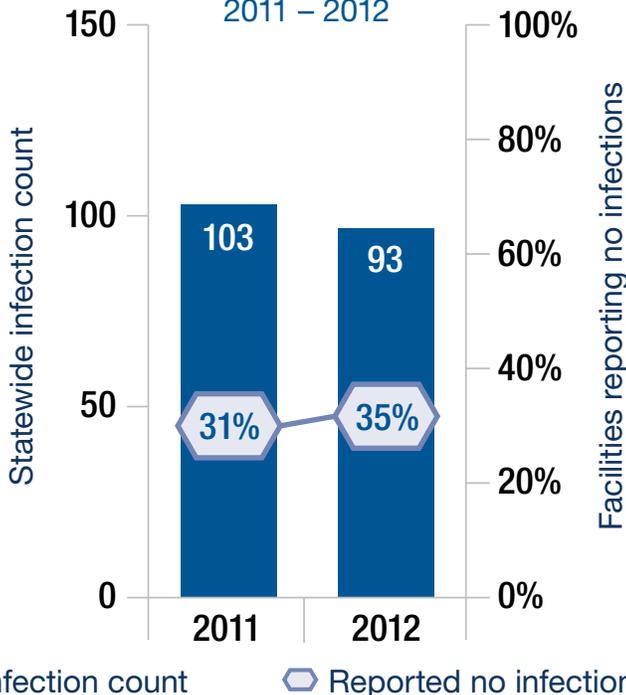


Figure 12: Hip Replacement SSIs and Percent Reporting No Infections 2011 – 2012



2011	# of hospitals: 48	SSIs: 103	Procedures: 6694	Procedures with SSIs (%): 1.54
2012	# of hospitals: 46	SSIs: 93	Procedures: 7019	Procedures with SSIs (%): 1.32

Knee Replacement Surgical-Site Infections

Knee replacement or revision surgery (KPRO) refers to the removal and replacement of part or the entire knee joint with artificial parts or revisions of currently existing artificial products.

Oregon's statewide reported knee replacement SSI rate decreased from 2009 to 2012 by 5%, while the SIR rose by less than 1%. The total number of SSIs related to knee replacement or revision surgeries was 76 in 2012. This number was 11% below the expected number.

Like CBGB and HPRO surgeries, infections from knee replacement procedures may arise up to one year after the surgery due to the implantation of artificial hardware. Facilities that reported no KPRO SSI infections during the annual period have decreased from 56% in 2009 to 51% in 2012.

Figure 13: Knee Replacement Surgical-Site Infections 2009 – 2012

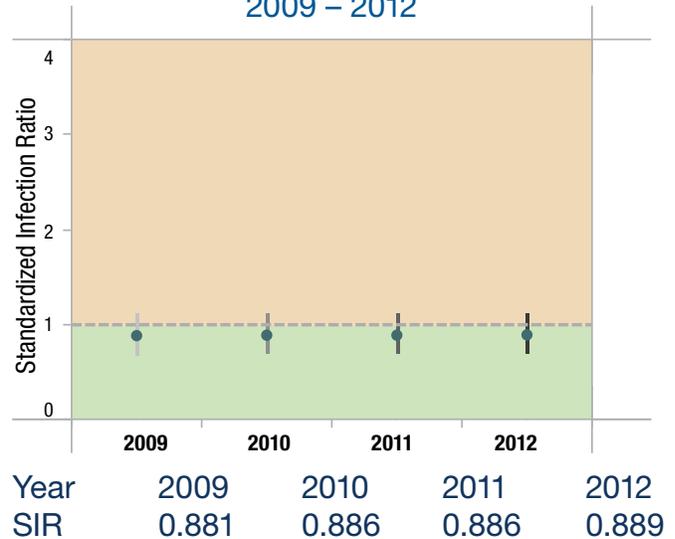
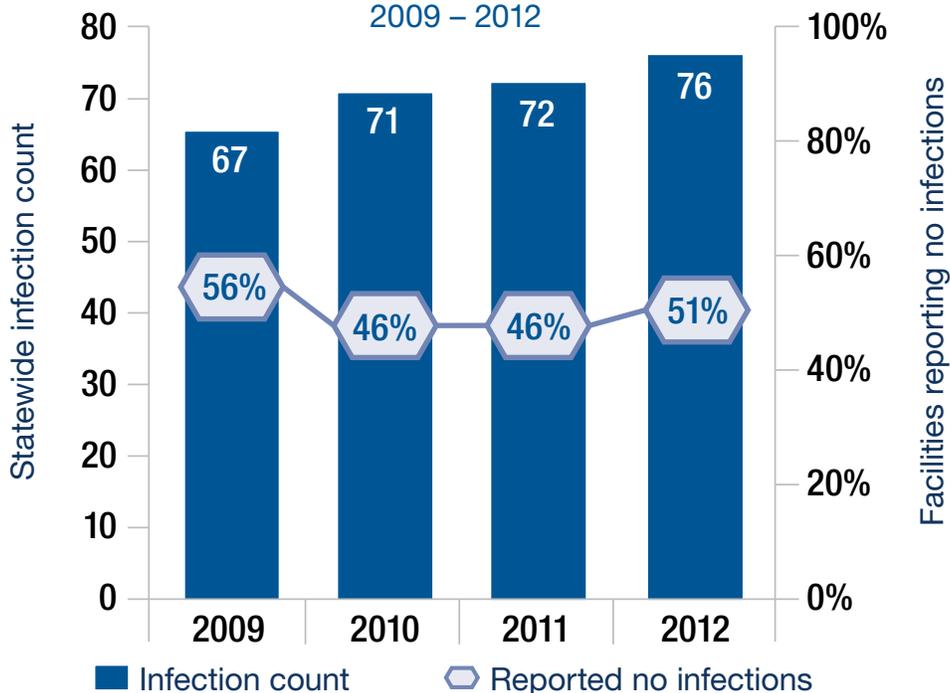


Figure 14: Knee Replacement SSIs and Percent Reporting No Infections 2009 – 2012



2009	# of hospitals: 48	SSIs: 67	Procedures: 7712	Procedures with SSIs (%): 0.87
2010	# of hospitals: 48	SSIs: 71	Procedures: 8192	Procedures with SSIs (%): 0.87
2011	# of hospitals: 48	SSIs: 72	Procedures: 8523	Procedures with SSIs (%): 0.84
2012	# of hospitals: 47	SSIs: 76	Procedures: 9149	Procedures with SSIs (%): 0.83

Laminectomy Surgical-Site Infections

A laminectomy (LAM) is a type of orthopedic spinal surgery in which a physician removes part or all of the vertebra called the lamina. This procedure relieves pressure on the spinal cord or nerves. Oregon hospitals began reporting surgical-site infections for laminectomy surgeries in 2011.

There were 67 SSIs associated with laminectomy procedures in 2011. There were 63 LAM infections in 2012. This is significantly lower than the expected number of 94 annual LAM infections. Oregon hospitals reported 33% fewer LAMs than expected in the SIR calculation. The SIR remained stable between 2011 and 2012 at 0.67.

In 2011, nine hospitals (36%) reported no infections related to laminectomy surgeries. This remained unchanged in 2012.

Figure 15: Laminectomy Surgical-Site Infections 2011 – 2012

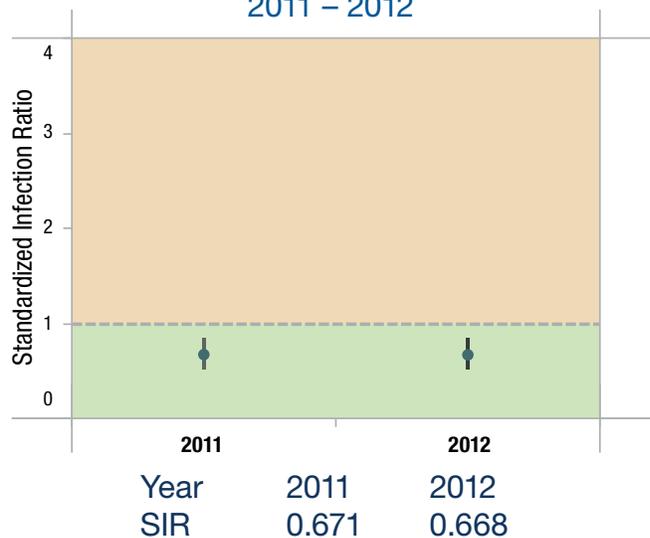
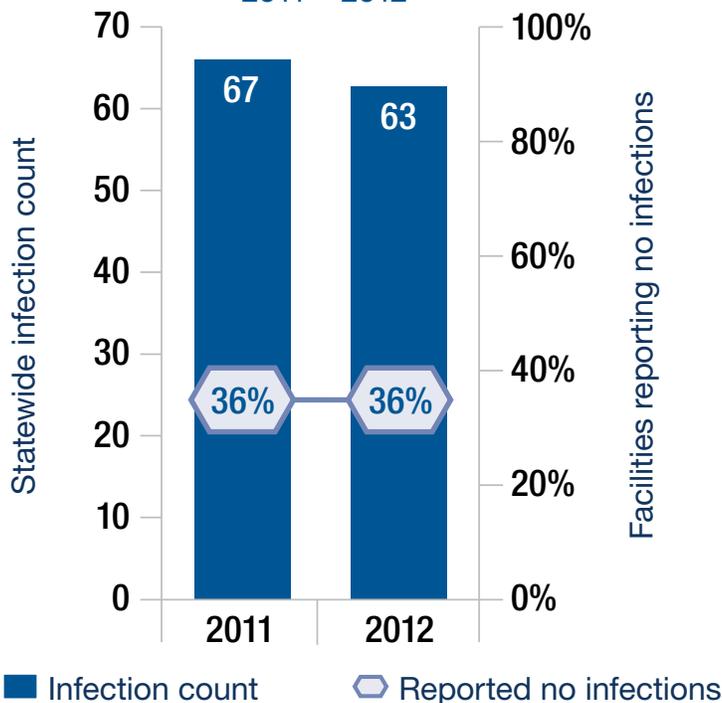


Figure 16: Laminectomy Counts and Percent Reporting No Infections 2011 – 2012



2011	# of hospitals: 25	SSIs: 67	Procedures: 9378	Procedures with SSIs (%): 0.71
2012	# of hospitals: 25	SSIs: 63	Procedures: 8832	Procedures with SSIs (%): 0.71

Clostridium difficile Infections Overview

The elderly and individuals who have recently taken antibiotics are prone to acquire *C. difficile* infections. These infections usually cause diarrhea. *C. difficile* infections are diagnosed by performing tests on the stool of infected individuals.

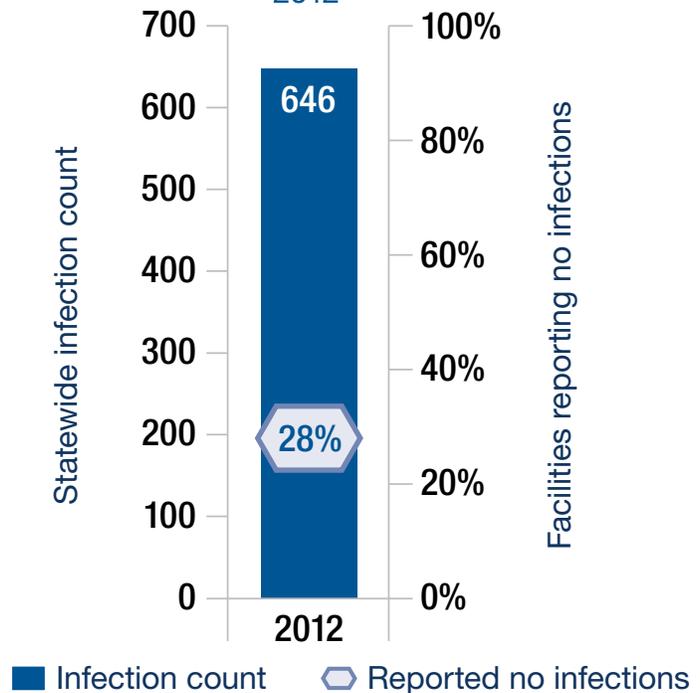
C. difficile infections are categorized into three different types. Community-onset, community-associated (CO-CA) refers to cases in which a positive stool sample is obtained during the first three days of a patient's admission to a hospital and more than 4 weeks after any previous discharge from a hospital. It is presumed that the patient's residence in the hospital is not related to the infection.

Healthcare facility-onset (HO) refers to cases in which a positive stool sample is obtained after the first three days of a patient's admission to the hospital. These are considered attributable to the hospital admission.

The third category is referred to as Community-onset, healthcare facility-associated (CO-HCFA). These are cases in which an individual was discharged from a hospital in the previous 4 weeks and was later readmitted to a hospital with a new *C. difficile* test in the three days after admission. In these situations, it is not possible to determine whether the infection was due to admission to the hospital or because of exposure outside of the facility.

Oregon state hospitals began reporting cases of laboratory-identified *C. difficile* infections in 2012. For purposes of the Oregon state annual report, only the HO and CO-HCFA *C. difficile* infections are reported. These are the cases that are attributed to the hospital admission.

Figure 17: CDI Counts and Percent Reporting No Infections 2012



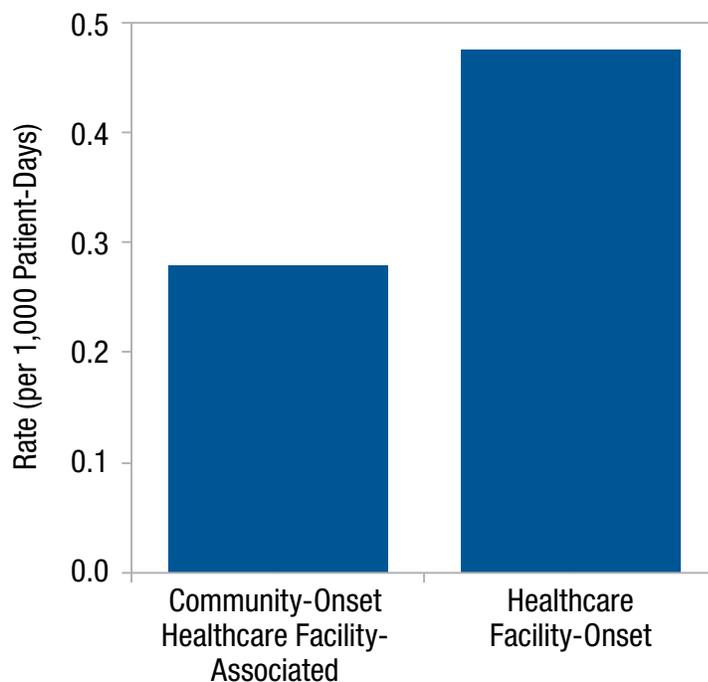
2012 # of hospitals: 57 HO infections: 646 Patient days: 1,335,248 Rate/1000 pt days: 0.48

In 2012, Oregon hospitals reported 646 cases of *C. difficile* infections. The SIR was 0.726. The expected number of cases was 890, so Oregon's HO *C. difficile* count was 27% lower than expected.

Sixteen Oregon hospitals reported zero hospital-onset *C. difficile* infections.

The graph below shows a comparison between the rates of healthcare facility-onset (HO) infections and community-onset healthcare facility-associated *C. difficile* infections (CO-HCFA) per 1,000 patient days. The number of patient days, rather than number of admissions is used as the denominator because the longer a patient stays in the hospital, the higher the risk of acquiring an infection. In 2012, there were 646 HO infections. Oregon hospital patients acquired *C. difficile* at a rate of 0.5 cases per 1,000 patient days. There were 379 CO-HCFA infections during 2012. This yields a CO-HCFA rate of 0.3 cases per 1,000 patient days.

Figure 18: *Clostridium difficile* Infections
2012



Surgical Care Improvement Project (SCIP) Measures

The Surgical Care Improvement Project (SCIP) measures included in this report were acquired from the Centers for Medicare & Medicaid Services (CMS) website called Hospital Compare. Hospital Compare helps consumers locate and compare data regarding the quality of care at Medicare-certified hospitals across the U.S. Hospital Compare provides information on how well hospitals take care of patients with certain surgical procedures or medical conditions. The results are comprised from surveying patients about the quality of care they received during a recent hospitalization. The premise behind reporting SCIP measures is that evidence-based practices should be used to reduce the occurrence of surgical-site infections. Oregon tracks these Surgical Care Improvement Project (SCIP) measures:

- SCIP-Inf-1: Percent of surgery patients who were given an antibiotic at the right time (within one hour) before surgery to prevent infection.
- SCIP-Inf-2: Percent of surgery patients who were given the right kind of antibiotic to help prevent infection.
- SCIP-Inf-3: Percent of surgery patients whose preventive antibiotics were stopped at the right time (within 24 hours after surgery; 48 hours after cardiac procedures).
- SCIP-Inf-4: Percent of surgery patients with controlled 6 a.m. postoperative serum glucose (blood sugar).
- SCIP-Inf-9: Percent of surgery patients with a urinary catheter removed on postoperative day 1 or postoperative day 2 (with day of surgery being day zero).
- SCIP-Inf-10: Percent of surgery patients with perioperative (the period of time extending from when the patient goes into the hospital for surgery until the time the patient is discharged) temperature management.

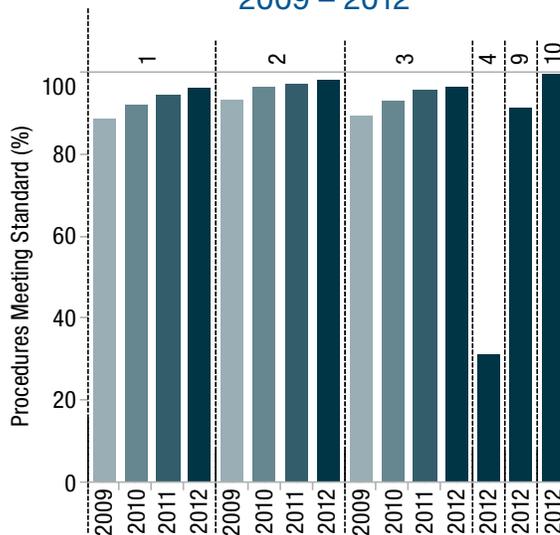
Oregon hospitals began reporting the SCIP-Inf-1, SCIP-Inf-2 and SCIP-Inf-3 process measures in 2009. The first year of reporting for SCIP-Inf-4, SCIP-Inf-9, and SCIP-Inf-10 process measures was 2012.

In previous Oregon annual reports, data were presented for SCIP-Inf-6, which measured the percent of surgery patients with appropriate hair removal. CMS dropped this reporting measure after December 30, 2011. CMS determined that this measure is no longer relevant because almost all of the reporting hospitals reported similarly high levels of performance and requiring this measure would not influence reports appreciably¹¹.

¹¹ Centers for Medicare & Medicaid Services, Frequently Asked Questions, Hospital Value-Based Purchasing Program, Last Updated March 9, 2012. www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/hospital-value-based-purchasing/Downloads/FY-2013-Program-Frequently-Asked-Questions-about-Hospital-VBP-3-9-12.pdf. Accessed May 16, 2013

The averages for the three SCIP measures SCIP-Inf-1, SCIP-Inf-2 and SCIP-Inf-3 all improved for the reporting period ending March 2012. These measures have been steadily improving over the last 4 years. SCIP-Inf-1 improved 8.5%, SCIP-Inf-2 improved 4.8%, and SCIP-Inf-3 improved 7.7% since reporting began in 2009. Of the new reporting measures, the SCIP-Inf-4 had the lowest rate at 30.9%. SCIP-Inf-9 was higher at 91.3%. The highest rated measure for this reporting period was the SCIP-Inf-10 measure at 99.4%.

Figure 19: Surgical Care Improvement Project (SCIP)
Process of Care Measures
2009 – 2012



Type	Year	Procedures Meeting Standard	Sample Procedure Count
1	2009	10,643	12,010
	2010	12,132	13,162
	2011	12,016	12,726
	2012	11,648	12,122
2	2009	11,148	11,923
	2010	12,724	13,218
	2011	12,506	12,849
	2012	11,906	12,149
3	2009	10,293	11,499
	2010	11,820	12,728
	2011	11,853	12,373
	2012	11,359	11,788
4	2012	593	1916
9	2012	8671	9495
10	2012	15,180	15,265

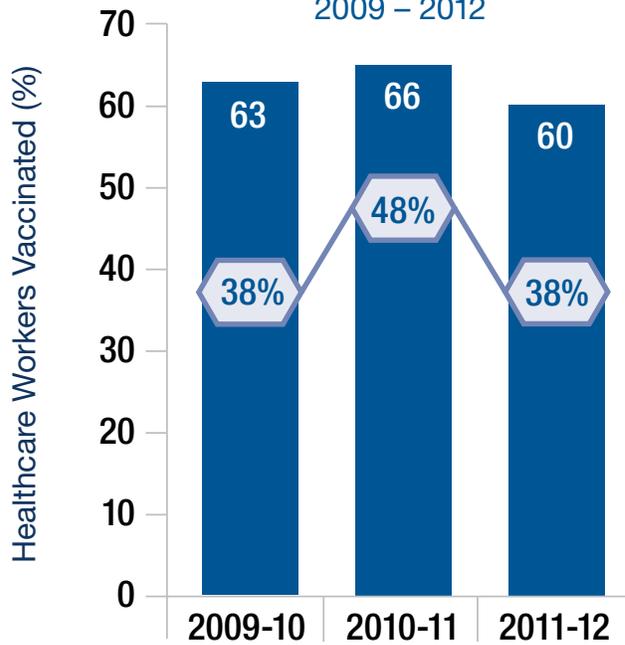
Healthcare Worker Influenza Vaccination Rates Overview

Healthy People is a program of the U.S. Department of Health and Human Services (HHS). The program set 10-year nationwide objectives for improving the health of all citizens. Vaccination of healthcare workers can decrease transmission of influenza to vulnerable Americans in hospital settings. A federal workgroup within the Healthy People program determined strategies and set goals to achieve the benchmark of a 90% healthcare worker influenza vaccination rate by 2020. Interim goals of 60% vaccination by 2010 and 70% by 2015 were also established.

The Oregon Health Authority (OHA), Public Health Division started collecting healthcare worker influenza vaccination rates during the 2009 – 2010 influenza season and found that Oregon hospital healthcare workers exceeded the 2010 goal with a 63% vaccination rate. Oregon’s healthcare worker vaccination rate in hospitals showed a small decrease to 59% between the 2009 – 2010 and the 2011 – 2012 influenza seasons.

Last year the percentage of Oregon hospitals meeting or exceeding the 2015 goal of 70% vaccinated set by the Healthy People program increased to 48%. This last season, the percentage returned to the 2009 – 2010 season rate of 38%.

Figure 20: Healthcare Worker Influenza Vaccination Rates 2009 – 2012



■ Percent vaccinated ◡ Percentage of Oregon hospitals meeting or exceeding the 70% goal

2009-2010	Vaccination Count: 45,723	Worker Count: 72,717
2010-2011	Vaccination Count: 46,677	Worker Count: 70,958
2011-2012	Vaccination Count: 58,523	Worker Count: 97,415

Limitations

There are two significant limitations of this report:

1. Each hospital's data is self-reported. The Oregon Health Authority (OHA) performed a validation study of the 2009 CLABSI data. Otherwise, the data has not been validated by any other outside entity.
2. A hospital's ability to detect HAI cases varies between hospitals. This can be due to the resources available for surveillance methods and for infection prevention methods and/or staff. Higher HAI rates may be attributed to superior detection of HAIs, rather than to an actual higher number of events.

Future Implications

The OHA, Public Health Division will continue to mandate the same HAI reporting measures in 2013 that were reported in 2012. However, the OHA staff, along with the guidance and input from the HAI Advisory Committee will continue to evaluate the need for additional reporting measures.

Hospital Data Sheets and Comments

The Oregon Health Authority (OHA), Public Health Division has prepared individual data sheets for the 59 acute-care hospitals and the one long-term acute-care hospital (LTACH) required to report by House Bill 2524. A LTACH is different from an acute care hospital in that it cares for a long period of time for medically complex patients who require intense, specialized treatment. Traditional hospitals often transfer these patients from their critical care units. LTACH patients present a unique challenge for infection control due to their typically higher multi-system complications and severity of illness.

The following pages detail the healthcare-associated infection summary reports for each Oregon hospital. The data for each hospital are spread over two pages and include the following twelve sections: 1) an Oregon map with an “H” to represent the location of the facility, 2) general hospital information, 3) Surgical Care Improvement Project (SCIP) Process of Care Measures, 4) healthcare worker influenza vaccination rates, 5) hospital-onset (HO, also called incident) *Clostridium difficile* infections, 6) central line-associated bloodstream infections (CLABSIs) in adult medical/surgical intensive care units (ICUs), 7) CLABSIs in neonatal intensive care units, 8) coronary artery bypass graft (CBGB) infections, 9) knee replacement (KPRO) infections, 10) hip replacement (HPRO) infections, 11) colon (COLO) infections, 12) abdominal hysterectomy (HYST) infections, and 13) laminectomy (LAM) infections.

Hospital Comments on HAI Data Sheets

During a 14-day review period, each Oregon hospital was given the opportunity to submit commentary on their healthcare acquired infection data. Seven hospitals submitted comments to be included in this annual report.

Adventist Medical Center

Our Infection Prevention Program is designed to detect, control and prevent infection of patients, staff and volunteers. Adventist Medical Center recognizes how important infection control is to ensuring our ability to provide safe quality health care. Our goal is to promote patient and healthcare worker safety by reducing the risk of acquiring and transmitting infections. It is our commitment to provide the right care for the right patient every time.

Prevention is the key to fighting infectious disease. Our focus is:

- Proper hand hygiene
- Environmental cleaning and disinfection
- Immunization of patients and staff against vaccine-preventable disease
- Safe work practices

- Monitoring and surveillance of communicable disease and infection in our community, our state, our country, and the world
- Educating healthcare workers, students, visitors, vendors, patients and their families about emerging infectious disease, technologies, antibiotic resistance and vaccines

Infection Prevention is a team process at Adventist Medical Center! We strive for excellence in care and as a core value believe that even one infection acquired here is one too many. Our target is ZERO infection.

Asante Three Rivers Medical Center

Asante Three Rivers Medical Center utilizes a broad evidence-based approach to prevent acquisition and transmission of all hospital-associated infections. All healthcare-associated infections are reviewed for opportunities to improve care. We have a hospital-wide focus on hand hygiene.

We have a multidisciplinary team, led by a physician champion, focused on preventing all complications related to surgical procedures. In 2012 we participated in the IHI Project Joint national collaborative to prevent infections in patients undergoing hip and knee replacement surgery by implementing additional evidence-based practices. Patients are tested pre-operatively for the presence of Staph bacteria (including MRSA) which are responsible for most surgical site infections. The small per cent who test positive receive treatment to eliminate the organism prior to surgery. Our Environmental Services Department and Infection Control program partnered in 2012 to standardize all operating room and patient room cleaning processes and audit the thoroughness of room cleaning according to national guidelines.

In 2012 we implemented new processes for cleaning patient rooms after a discharge of a patient infected with *C. difficile*. Our infection rate was zero for the last quarter.

Bay Area Hospital

Bay Area Hospital has been working with Healthcare Performance Improvement (HPI) to implement principles needed for all staff to adopt a Culture Of Safety. Some of these principles include:

- Cohesive teamwork
- Toolbox with system processes such as SBAR (situation, background, assessment, request), STAR (stop, think, act and review), validate and verify and Speak up for Safety.
- Ensuring checklists are used
- Simplifying policies

- Simulation drills for high risk events like neonatal resuscitation, postpartum hemorrhage, sepsis and stroke.
- Member of Partnership for Patients state wide group working with Institute for Health care Improvement, American Hospital Association and Health Research and Educational Trust.

CLABSI

Led by a Clinical Nurse Specialist; this team is comprised of members of anesthesia , nursing, radiology, certified infusion staff and physicians. They have focused on the following:

- Right line chosen
- Correct procedures followed for all disciplines
- Health- stream education to all staff
- Maintaining zero central line infections in the ICU.

SCIP measures

Interdisciplinary team has been focusing on the following this year:

- Bringing electronic medication system into the OR
- Working with pharmacy, physicians and information services to ensure correct ordering and stop orders of antibiotics occur.
- Implementing the Total Joint program and MRSA pre-screening
- Pre-op clinic initiated
- Patient hand sanitizer at bedside
- Orthopedic orders set with foley catheter removal on day 1.
- Employee influenza acceptance – continues to improve yearly.
- Education of staff
- Availability of immunizations

Good Samaritan Regional Medical Center

Good Samaritan Regional Medical Center, Corvallis, Oregon is committed to providing safe and evidence based care. Our participation in the federal Partnership for Patients initiatives promotes improvement in the prevention of healthcare acquired infections (HAI). Initiatives to prevent C-diff and Central Line Associated Blood Stream Infections (CLABSI) are

robust. Thorough investigation (root cause analysis) occurs for identified hospital acquired infections which provide potential opportunities in the prevention of HAIs, using newly identified improvement processes. One CLABSI related initiative included the consistent use of the Central Line Insertion and Maintenance Bundle by physicians, nurses and the IV team. As a result, our last CLABSI was in May 2012.

Through support from administration, physicians and staff, our Healthcare worker vaccination rates have improved. Our Hand Hygiene observation rates are sustained in the 90% range. These measures along with physician engagement help promote best practice and moves our SSI rates to below national standardized infection ratios (SIR) for all NHSN reported surgeries in 2012, except colon surgery. Our SSI prevention team is currently integrating best practices related to colon surgery. Our SCIP measures show steady improved progress in each of the process measures over the past four years. Our goal is to continually improve our processes that support quality care.

Kaiser Sunnyside Medical Center

Kaiser Permanente has a comprehensive surveillance program to determine when surgical site infections occur. Unlike most hospitals, this program includes 100% post discharge surveillance of surgical procedures to determine if an infection has occurred after the patient has been discharged from the hospital. This is possible due to our electronic medical record in both the inpatient and outpatient settings.

Robust and ongoing efforts are in place to reduce surgical site infections, including the use of our simulation lab to continually improve practices. We have experienced a sustained decrease in surgical site infections for the past several years.

Peace Harbor Hospital

Peace Harbor Hospital is committed to the highest quality patient care. Because of this increase in infections our clinical, surgical and nursing units have examined our practices to insure that the most current 'best practice' infection prevention processes are followed at each step of our patients' journey through our system.

Salem Hospital

Patient safety is our number 1 concern and we work diligently to make sure surgical site infections don't happen. To address the rare times they do occur, in 2012 we implemented a surgical-site infections communications pathway that focuses attention on the individual circumstance of the infection, and involves everyone including administrative and medical staff leadership to address the problems. As a result we have seen a decrease in surgical site infections in 2013.

Definitions

Abdominal Hysterectomy (HYST):

An abdominal hysterectomy is the removal of the uterus through an incision made in the abdominal wall and is typically performed by a gynecologist.

ASA Class:

Assessment of a patient's physical condition before a surgery. Usually performed by the anesthesiologist. The American Society of Anesthesiologists (ASA) uses the following scale and assigns one of the following:

1. Normally healthy patient
2. Patient with mild systemic disease
3. Patient with severe systemic disease that is not incapacitating
4. Patient with an incapacitating systemic disease, constant threat to life
5. Patient not expected to survive for 24 hours with or without the operation

Central line:

A flexible tube that is usually inserted in the chest, neck, arm, or groin. They are placed in a vein or artery that terminates near the heart. They are used for the administration of fluid, nutrients, or medications, and to monitor the patient's medical status.

Central line-associated bloodstream infection (CLABSI):

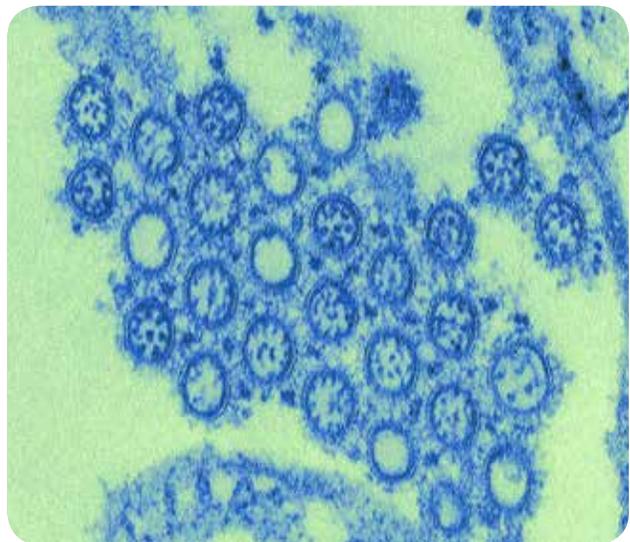
An infection that develops while a central line is in use, or within 48 hours of the removal of the central line.

Central line days:

The total number of days a central line is in place. Each patient with one or more central lines is counted at the same time each day.

CLABSI infection rate:

A percentage calculated by dividing the total number of central line-associated bloodstream infections by the number of central line days and then multiplying by 1,000.



Virions from a Novel Flu H1N1 isolate

Clostridium difficile:

A bacterium that can cause symptoms ranging from diarrhea to life-threatening inflammation of the colon.

Colon:

The lower part of the digestive tract; also called the large intestine.

Coronary Artery Bypass Graft (CBGB):

Coronary artery bypass graft surgery with both chest and donor site incisions. A surgery that involves harvesting a vein or artery from either the chest or another part of the body to bypass a blocked artery in the heart and create an alternate path for the blood to flow.

Healthcare-associated infection (HAI):

An infection that occurs during or after treatment for another separate medical infection.

Hip prosthesis (HPRO) Surgery:

The removal and replacement with artificial products of part or all of the damaged cartilage and bone from the hip joint.

Intensive care unit (ICU):

A hospital unit that provides intensive treatment and observation of patients with life-threatening conditions.

Knee prosthesis (KPRO) Surgery:

The removal and replacement with artificial products of part or all of the damaged cartilage and bone from the knee joint.

Laminectomy (LAM):

A type of orthopedic spinal surgery in which a physician removes part or all of the vertebra called the lamina. This procedure relieves pressure on the spinal cord or nerves.

Long-term acute-care facility (LATCH):

A facility that cares for medically complex patients who require intense, specialized treatment for a long period of time.



Influenza virion's ultrastructure

National Healthcare Safety Network (NHSN):

A computerized system developed by the Centers for Disease Control and Prevention (CDC) that provides a free, secure system for hospitals to monitor their patient and healthcare personnel safety data.

Standardized infection ratio (SIR):

The SIR provides a standard measurement to allow comparison between the number of reported infections to the number of infections expected by national data. A SIR of 1.00 means the hospital reported exactly the same number of infections as would be expected by national data. A SIR less than 1.00 means the hospital reported fewer infections than predicted, and a SIR greater than 1.00 means the hospital reported more infections than predicted. The SIR can only be calculated if the expected number of infections is ≥ 1 .

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Adventist Medical Center

Location:	Portland	
Ownership:	Non Profit	
Medical School Affiliation:	None	
ICU Beds:	16	
Total Staffed Beds:	223	
2012 Admissions:	12,757	
2012 Patient Days:	45,549	
ICP FTE:	1	

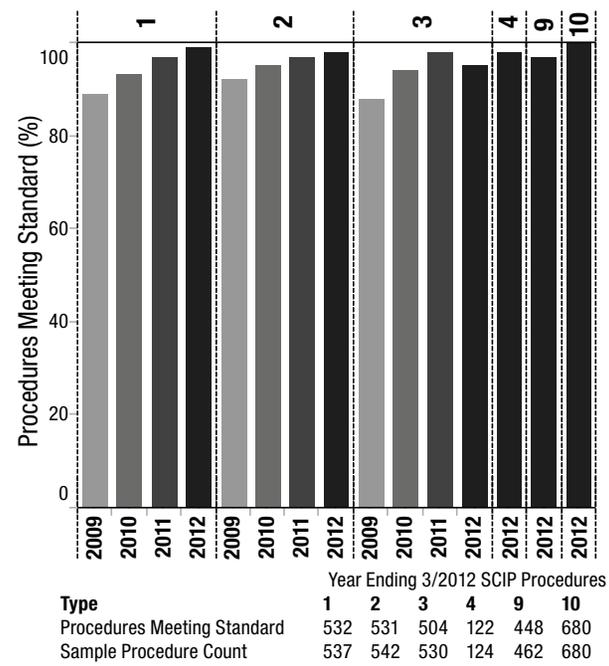
2009
 2010
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 2012

If the vertical measurement line crosses 1.0 (is in both colors) then the infection rate is not significantly different than expected.

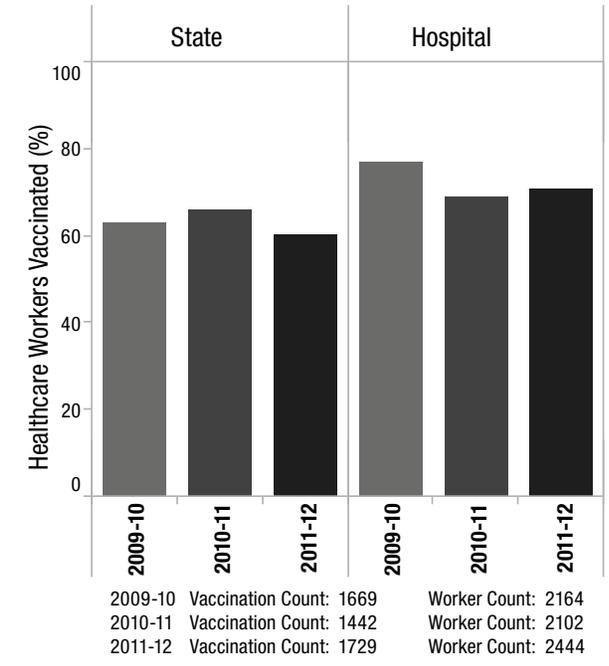
If the line is entirely in the color:

- More infections were observed than expected
- Fewer infections were observed than expected

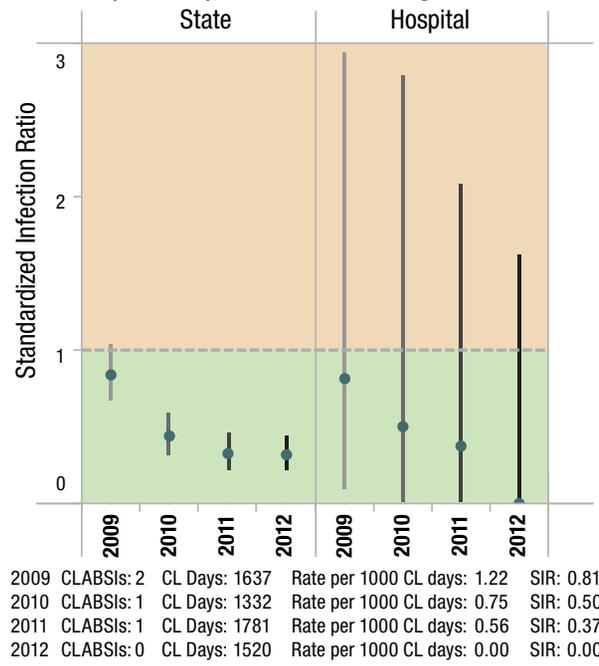
Surgical Care Improvement Project (SCIP) Process of Care Measures



Healthcare Worker Influenza Vaccination



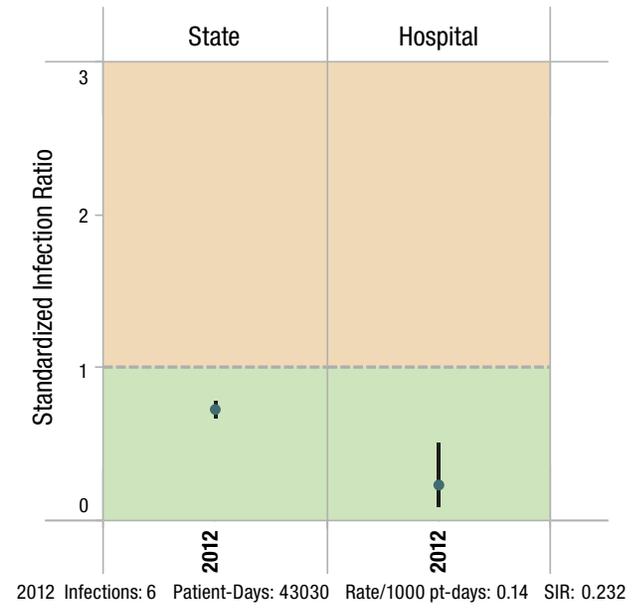
Central Line Associated Bloodstream Infections (CLABSIs), Adult Medical/Surgical ICUs



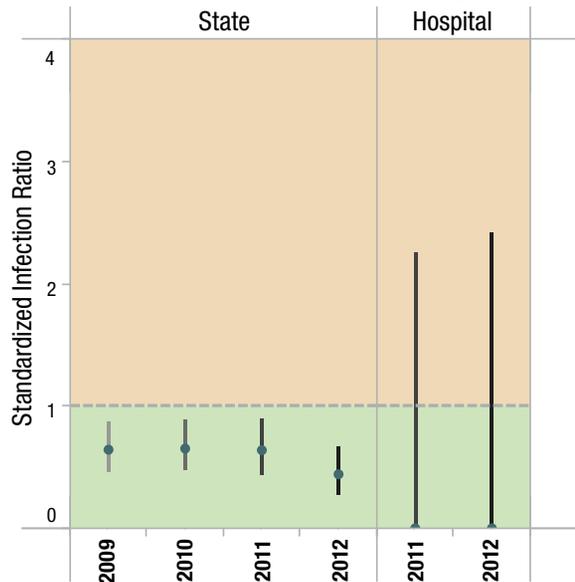
Central Line Associated Bloodstream Infections (CLABSIs), Neonatal ICUs

Hospital does not have a NICU

Incident Clostridium difficile Infections

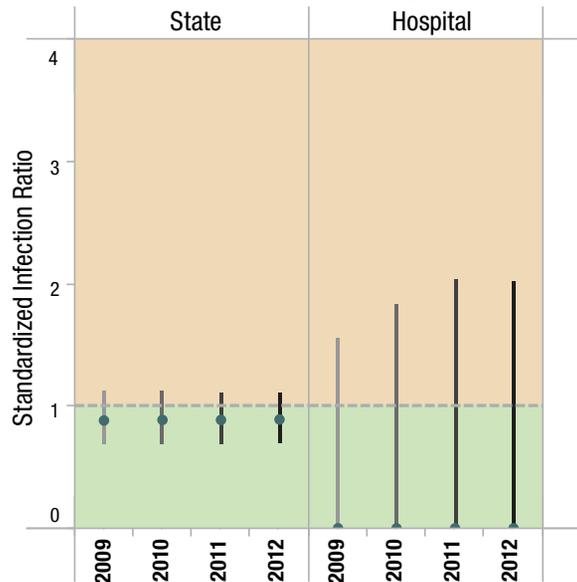


Coronary Artery Bypass Graft Surgery



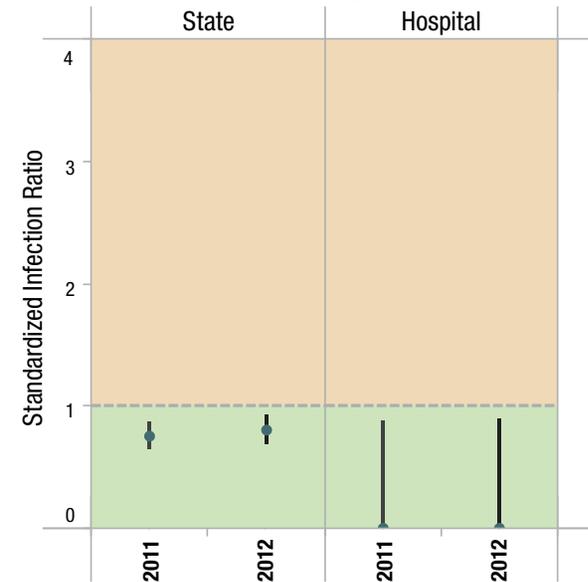
2011 SSIs: 0	Procedures: 74	Procedures with SSI (%): 0.00	SIR: 0.000
2012 SSIs: 0	Procedures: 82	Procedures with SSI (%): 0.00	SIR: 0.000

Knee Replacement Surgery



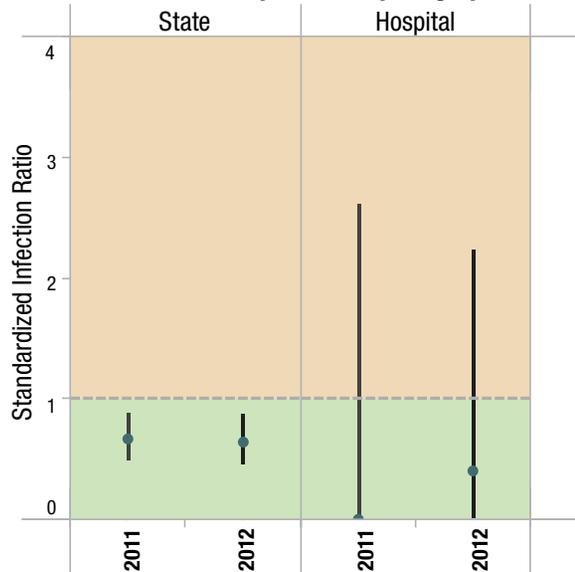
2009 SSIs: 0	Procedures: 196	Procedures with SSI (%): 0.00	SIR: 0.000
2010 SSIs: 0	Procedures: 178	Procedures with SSI (%): 0.00	SIR: 0.000
2011 SSIs: 0	Procedures: 161	Procedures with SSI (%): 0.00	SIR: 0.000
2012 SSIs: 0	Procedures: 162	Procedures with SSI (%): 0.00	SIR: 0.000

Colon Surgery



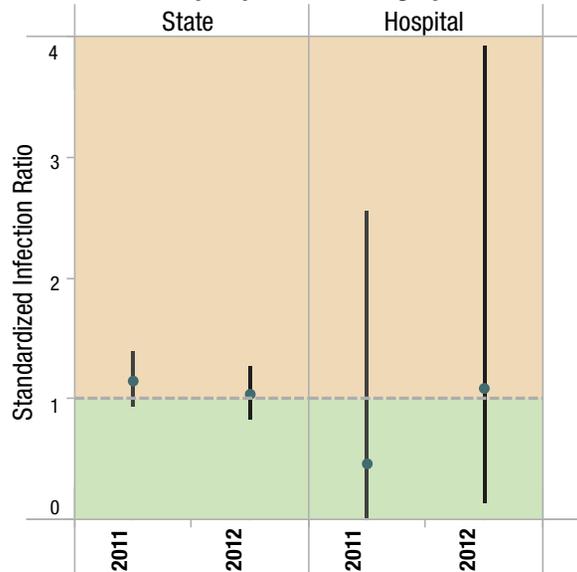
2011 SSIs: 0	Procedures: 86	Procedures with SSI (%): 0.00	SIR: 0.000
2012 SSIs: 0	Procedures: 80	Procedures with SSI (%): 0.00	SIR: 0.000

Abdominal Hysterectomy Surgery



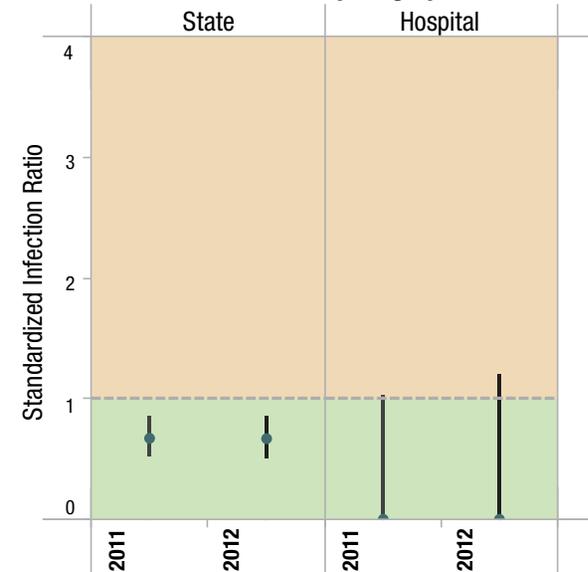
2011 SSIs: 0	Procedures: 65	Procedures with SSI (%): 0.00	SIR: 0.000
2012 SSIs: 1	Procedures: 162	Procedures with SSI (%): 0.62	SIR: 0.401

Hip Replacement Surgery



2011 SSIs: 1	Procedures: 133	Procedures with SSI (%): 0.75	SIR: 0.460
2012 SSIs: 2	Procedures: 113	Procedures with SSI (%): 1.77	SIR: 1.084

Laminectomy Surgery



2011 SSIs: 0	Procedures: 392	Procedures with SSI (%): 0.00	SIR: 0.000
2012 SSIs: 0	Procedures: 367	Procedures with SSI (%): 0.00	SIR: 0.000

Asante Rogue Regional Medical Center

Location: Medford
 Ownership: Non Profit
 Med. School Affiliation: None
 ICU Beds: 52
 Total Staffed Beds: 378
 2012 Admissions: 14,562
 2012 Patient Days: 67,906
 ICP FTE: 3

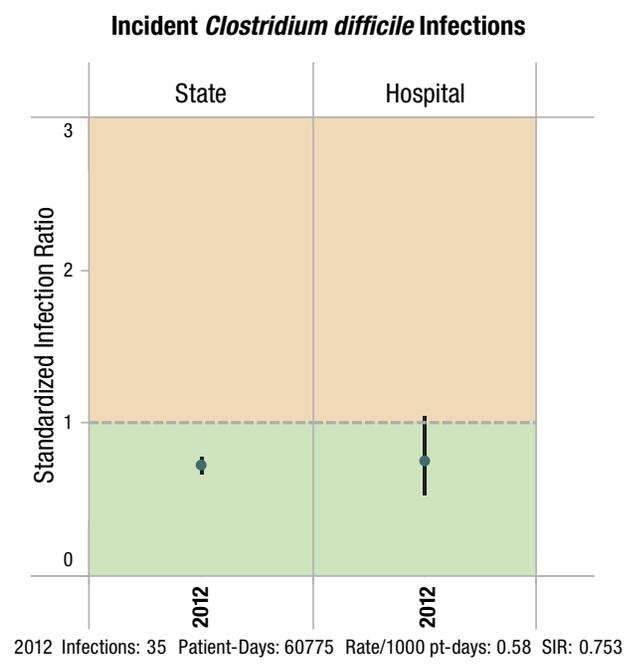
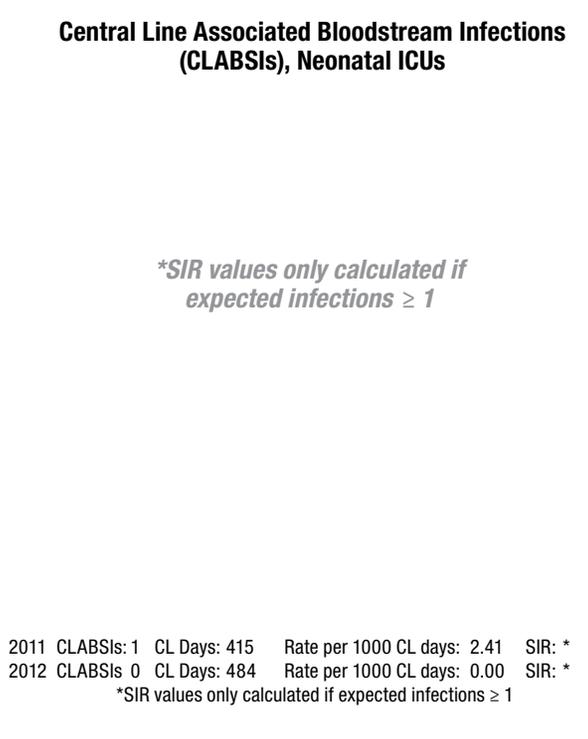
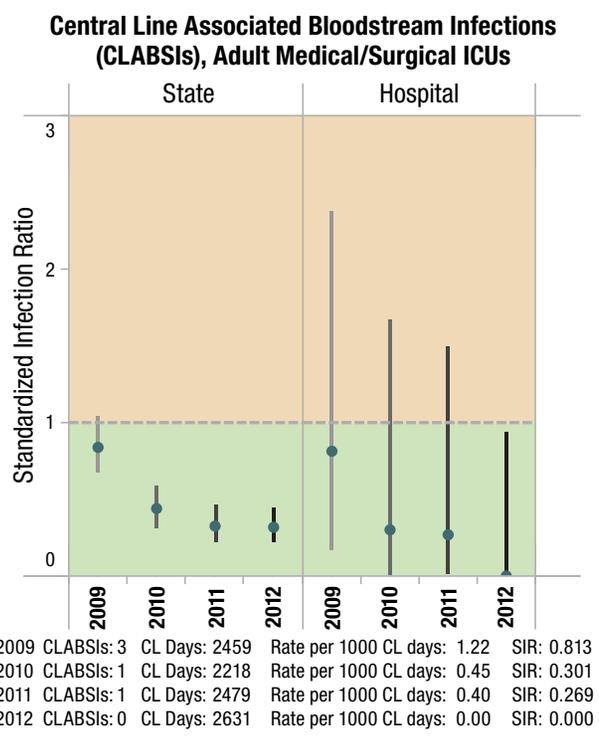
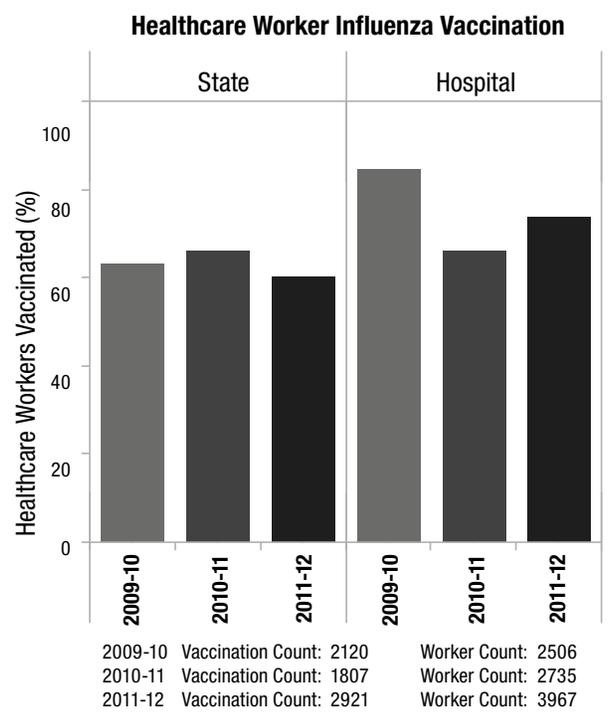
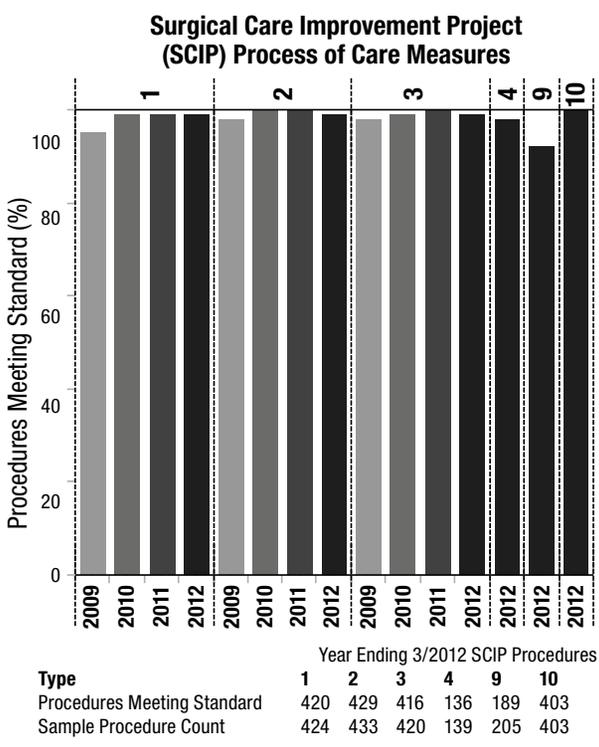


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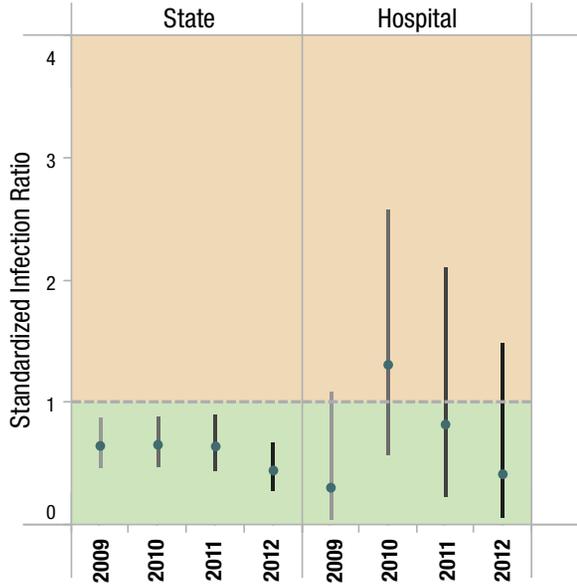
If the vertical measurement line crosses 1.0 (is in both colors) then the infection rate is not significantly different than expected.

If the line is entirely in the color:

- More infections were observed than expected
- Fewer infections were observed than expected

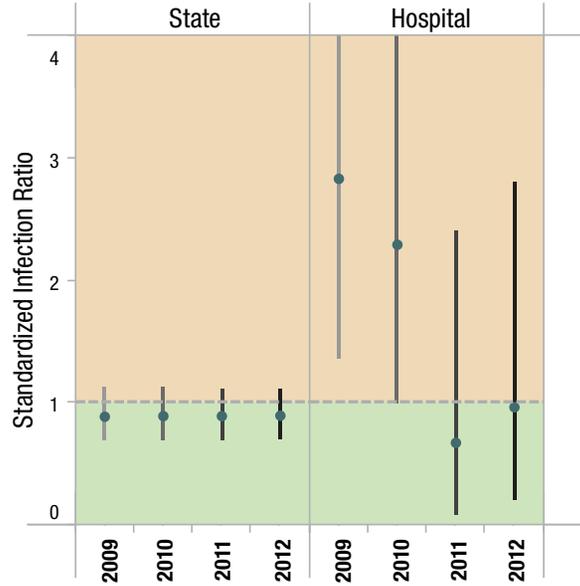


Coronary Artery Bypass Graft Surgery



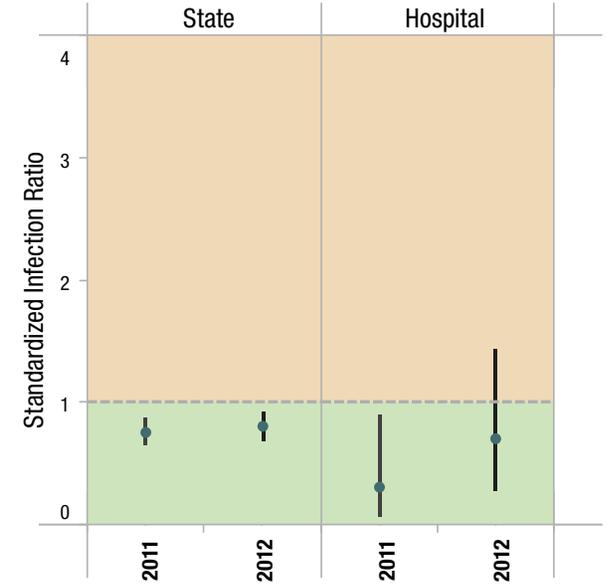
2009 SSIs: 2 Procedures: 409 Procedures with SSI (%): 0.49 SIR: 0.301
 2010 SSIs: 8 Procedures: 392 Procedures with SSI (%): 2.04 SIR: 1.305
 2011 SSIs: 4 Procedures: 311 Procedures with SSI (%): 1.29 SIR: 0.817
 2012 SSIs: 2 Procedures: 309 Procedures with SSI (%): 0.65 SIR: 0.411

Knee Replacement Surgery



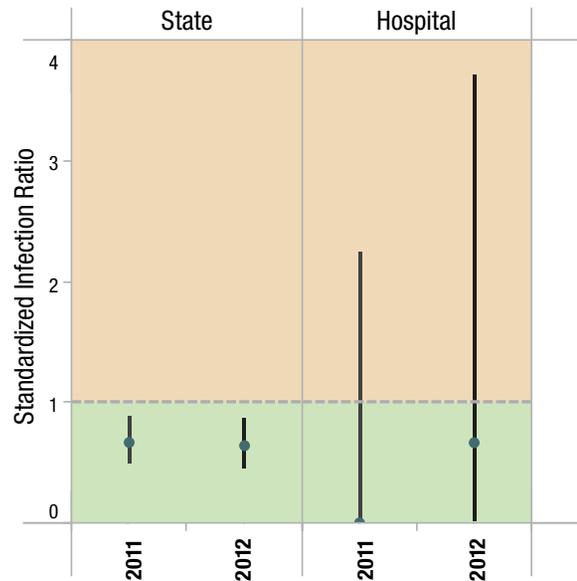
2009 SSIs: 10 Procedures: 428 Procedures with SSI (%): 2.34 SIR: 2.825
 2010 SSIs: 8 Procedures: 428 Procedures with SSI (%): 1.87 SIR: 2.286
 2011 SSIs: 2 Procedures: 376 Procedures with SSI (%): 0.53 SIR: 0.667
 2012 SSIs: 3 Procedures: 384 Procedures with SSI (%): 0.78 SIR: 0.958

Colon Surgery



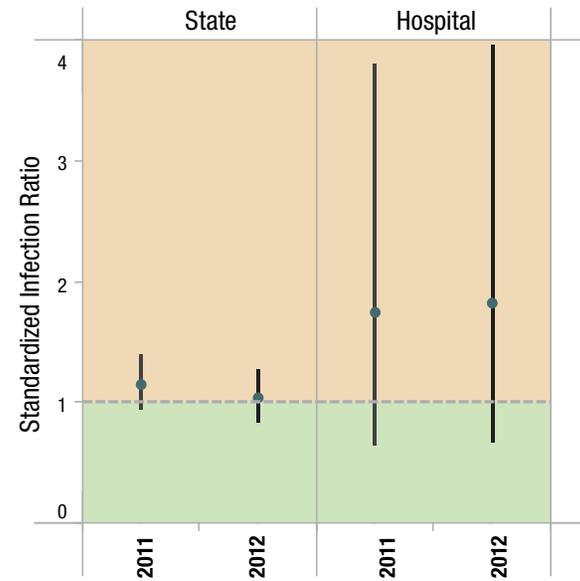
2011 SSIs: 3 Procedures: 182 Procedures with SSI (%): 1.65 SIR: 0.305
 2012 SSIs: 7 Procedures: 191 Procedures with SSI (%): 3.66 SIR: 0.701

Abdominal Hysterectomy Surgery



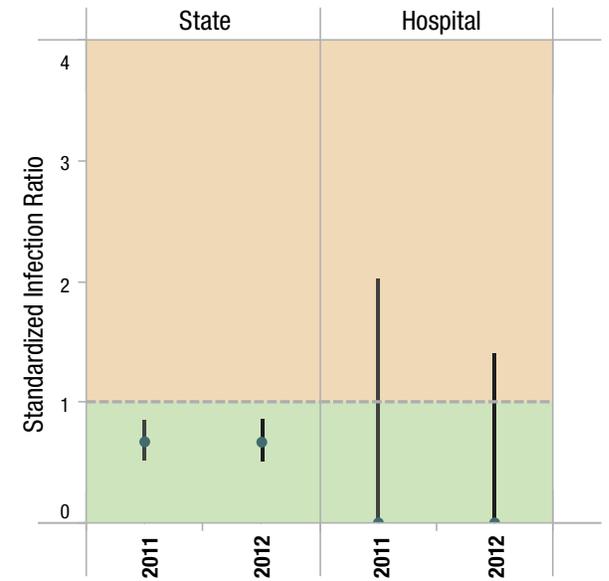
2011 SSIs: 0 Procedures: 94 Procedures with SSI (%): 0.00 SIR: 0.000
 2012 SSIs: 1 Procedures: 109 Procedures with SSI (%): 0.92 SIR: 0.664

Hip Replacement Surgery



2011 SSIs: 6 Procedures: 324 Procedures with SSI (%): 1.85 SIR: 1.743
 2012 SSIs: 6 Procedures: 279 Procedures with SSI (%): 2.15 SIR: 1.820

Laminectomy Surgery



2011 SSIs: 0 Procedures: 176 Procedures with SSI (%): 0.00 SIR: 0.000
 2012 SSIs: 0 Procedures: 250 Procedures with SSI (%): 0.00 SIR: 0.000

Asante Three Rivers Community Hospital and Health Center

Location: Grants Pass
 Ownership: Non Profit
 Med. School Affiliation: Graduate
 ICU Beds: 12
 Total Staffed Beds: 111
 2012 Admissions: 7,633
 2012 Patient Days: 22,496
 ICP FTE: 1



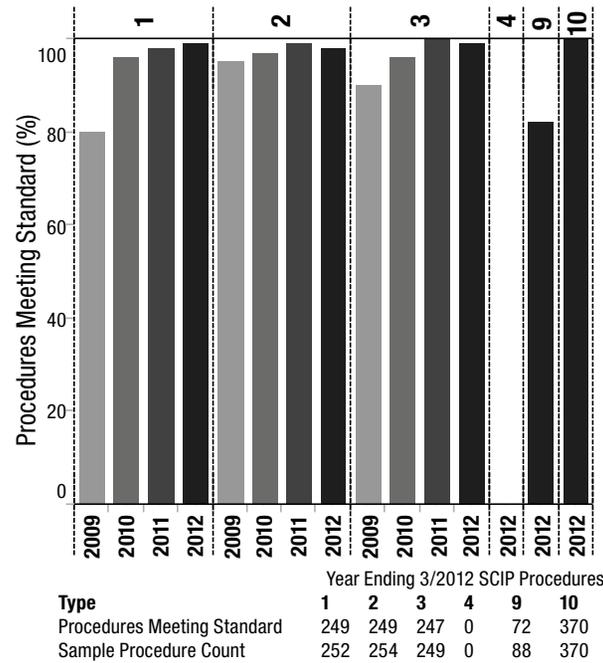
2009
 2010
 2011
 2012

If the vertical measurement line crosses 1.0 (is in both colors) then the infection rate is not significantly different than expected.

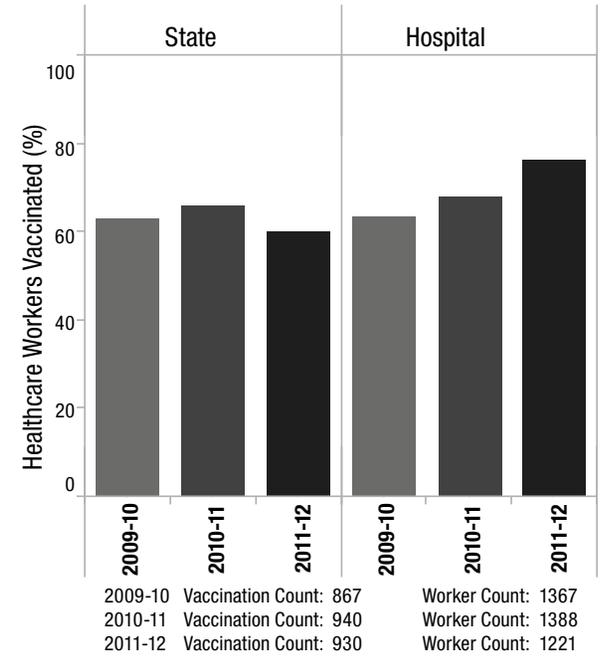
If the line is entirely in the color:

- More infections were observed than expected
- Fewer infections were observed than expected

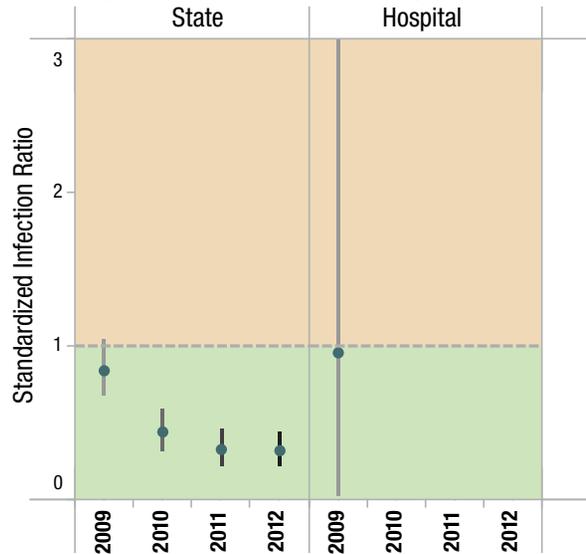
Surgical Care Improvement Project (SCIP) Process of Care Measures



Healthcare Worker Influenza Vaccination



Central Line Associated Bloodstream Infections (CLABSIs), Adult Medical/Surgical ICUs



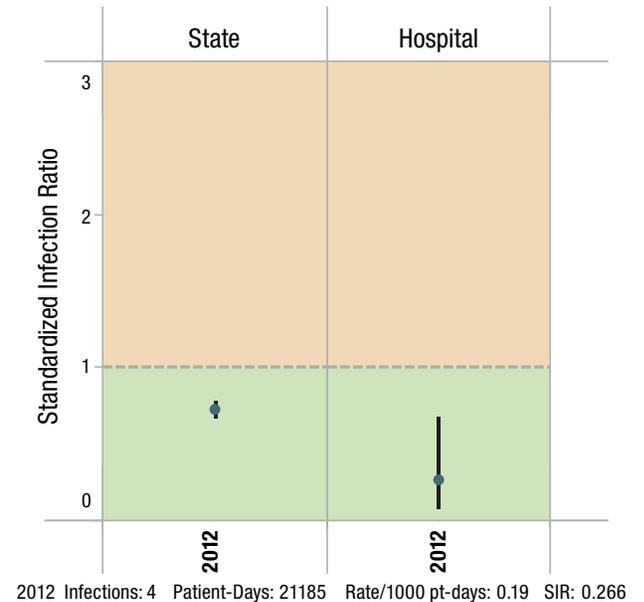
2009 CLABSIs: 1 CL Days: 698 Rate per 1000 CL days: 1.43 SIR: 0.955
 2010 CLABSIs: 0 CL Days: 652 Rate per 1000 CL days: 0.00 SIR: *
 2011 CLABSIs: 0 CL Days: 626 Rate per 1000 CL days: 0.00 SIR: *
 2012 CLABSIs: 1 CL Days: 557 Rate per 1000 CL days: 1.80 SIR: *

*SIR values only calculated if expected infections ≥ 1

Central Line Associated Bloodstream Infections (CLABSIs), Neonatal ICUs

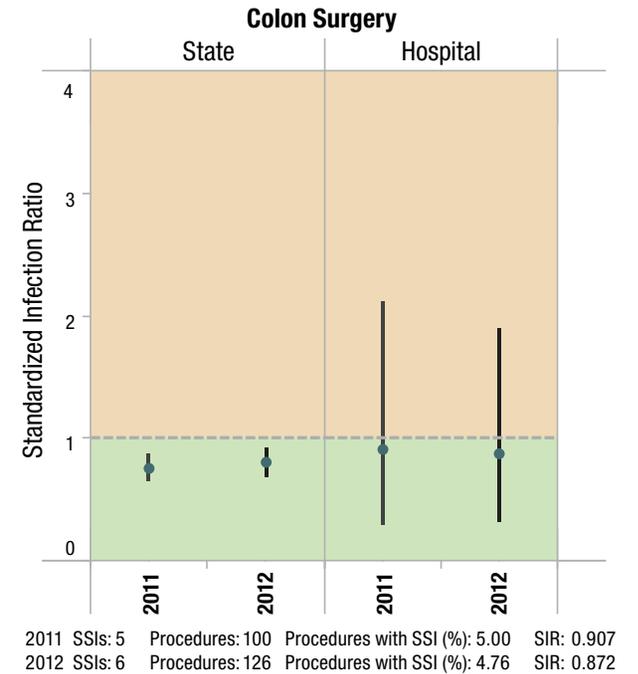
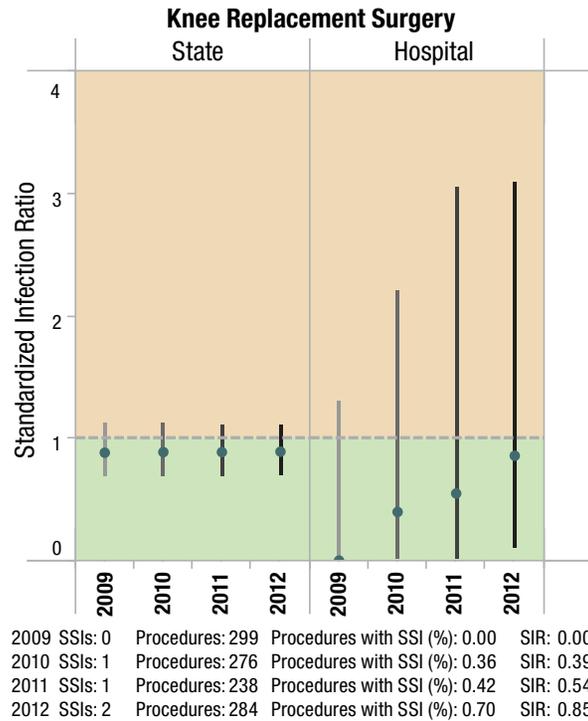
Hospital does not have a NICU

Incident Clostridium difficile Infections



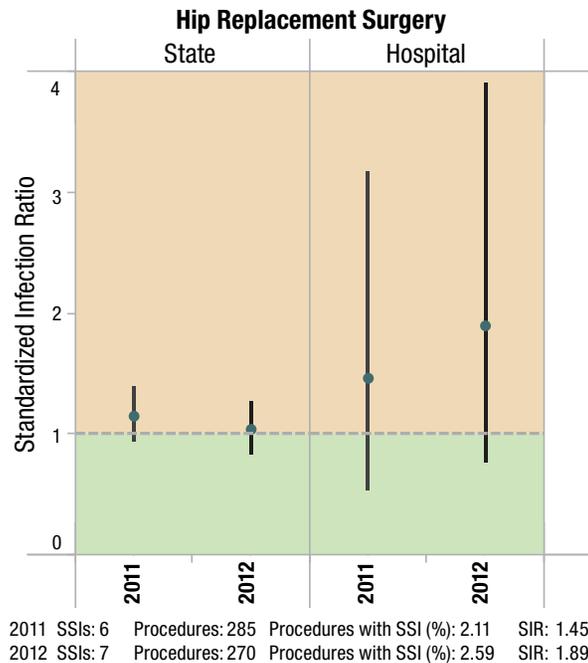
Coronary Artery Bypass Graft Surgery

Hospital does not perform this procedure



Abdominal Hysterectomy Surgery

Too few procedures to report



Laminectomy Surgery

**SIR values only calculated if expected infections ≥ 1*

2011	SSIs: 0	Procedures: 33	Procedures with SSI (%): 0.00	SIR: *
2012	SSIs: 0	Procedures: 11	Procedures with SSI (%): 0.00	SIR: *

Ashland Community Hospital

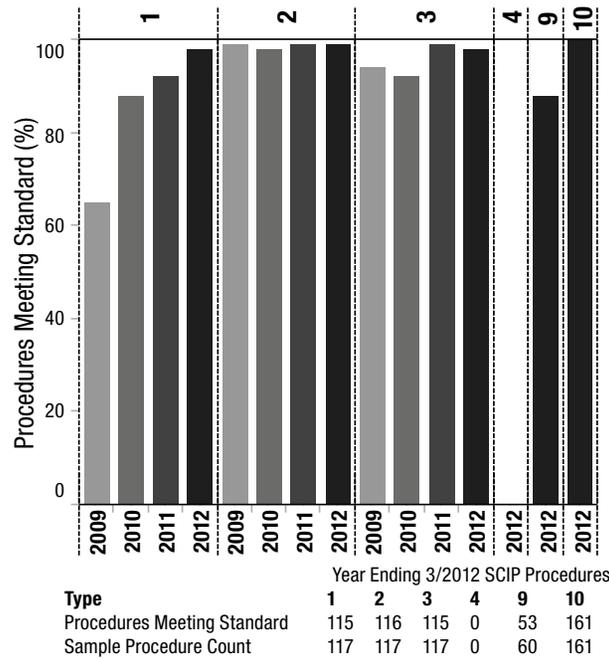
Location:	Ashland
Ownership:	Non Profit
Medical School Affiliation:	None
ICU Beds:	4
Total Staffed Beds:	49
2012 Admissions:	1,544
2012 Patient Days:	4,895
ICP FTE:	1



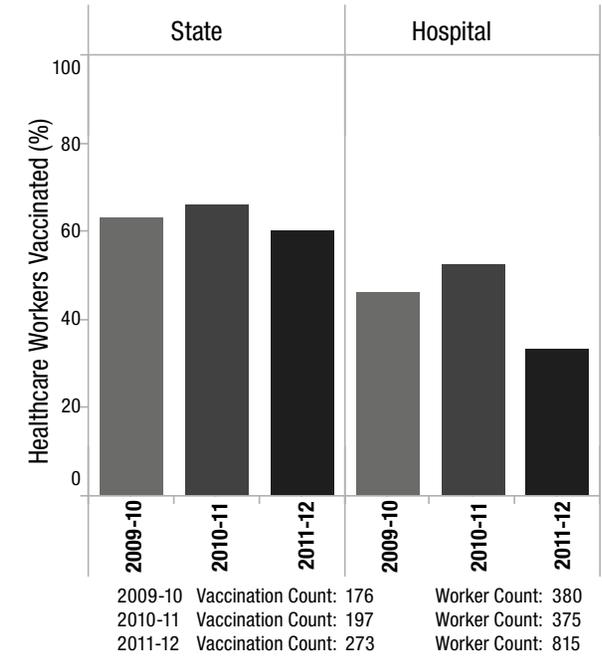
2009
 2010
 2011
 2012

If the vertical measurement line crosses 1.0 (is in both colors) then the infection rate is not significantly different than expected.
 If the line is entirely in the color:
 More infections were observed than expected
 Fewer infections were observed than expected

Surgical Care Improvement Project (SCIP) Process of Care Measures



Healthcare Worker Influenza Vaccination



Central Line Associated Bloodstream Infections (CLABSIs), Adult Medical/Surgical ICUs

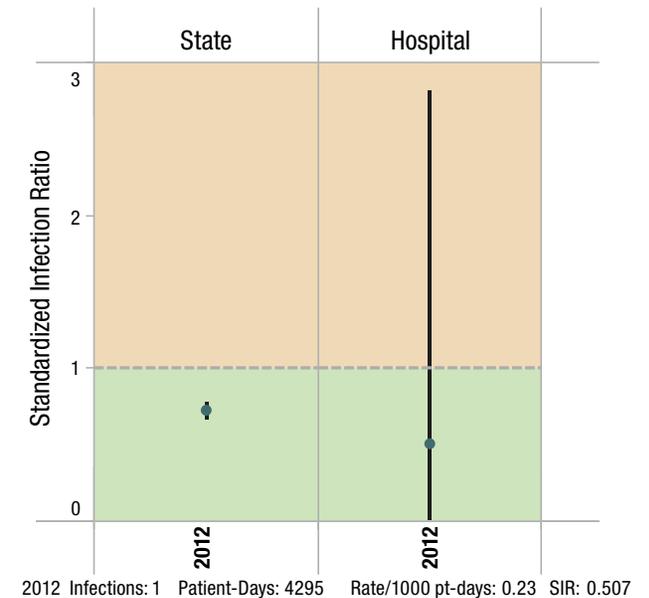
**SIR values only calculated if expected infections ≥ 1*

CLABSIs: 0	CL Days: 77	Rate per 1000 CL days: 0.00	SIR: *
CLABSIs: 0	CL Days: 65	Rate per 1000 CL days: 0.00	SIR: *
CLABSIs: 0	CL Days: 132	Rate per 1000 CL days: 0.00	SIR: *
CLABSIs: 1	CL Days: 121	Rate per 1000 CL days: 8.26	SIR: *

Central Line Associated Bloodstream Infections (CLABSIs), Neonatal ICUs

Hospital does not have a NICU

Incident Clostridium difficile Infections



Coronary Artery Bypass Graft Surgery

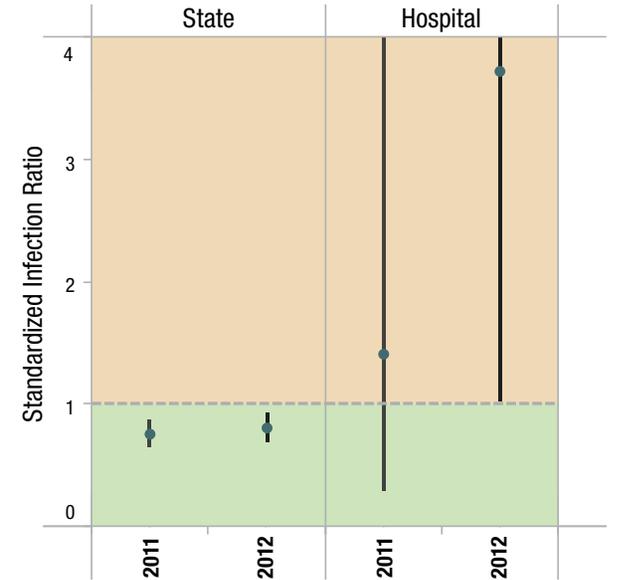
Hospital does not perform this procedure

Knee Replacement Surgery

**SIR values only calculated if expected infections ≥ 1*

2009 SSIs: 0	Procedures: 73	Procedures with SSI (%): 0.00	SIR: *
2010 SSIs: 1	Procedures: 98	Procedures with SSI (%): 1.02	SIR: *
2011 SSIs: 0	Procedures: 86	Procedures with SSI (%): 0.00	SIR: *
2012 SSIs: 1	Procedures: 89	Procedures with SSI (%): 1.12	SIR: *

Colon Surgery



2011 SSIs: 3	Procedures: 36	Procedures with SSI (%): 8.33	SIR: 1.406
2012 SSIs: 4	Procedures: 17	Procedures with SSI (%): 23.53	SIR: 3.717

Abdominal Hysterectomy Surgery

Too few procedures to report

Hip Replacement Surgery

**SIR values only calculated if expected infections ≥ 1*

2011 SSIs: 0	Procedures: 36	Procedures with SSI (%): 0.00	SIR: *
2012 SSIs: 0	Procedures: 41	Procedures with SSI (%): 0.00	SIR: *

Laminectomy Surgery

Too few procedures to report

Bay Area Hospital

Location: Coos Bay
 Ownership: Non Profit
 Med. School Affiliation: Undergraduate
 ICU Beds: 10
 Total Staffed Beds: 129
 2012 Admissions: 6,295
 2012 Patient Days: 21,615
 ICP FTE: 2.0



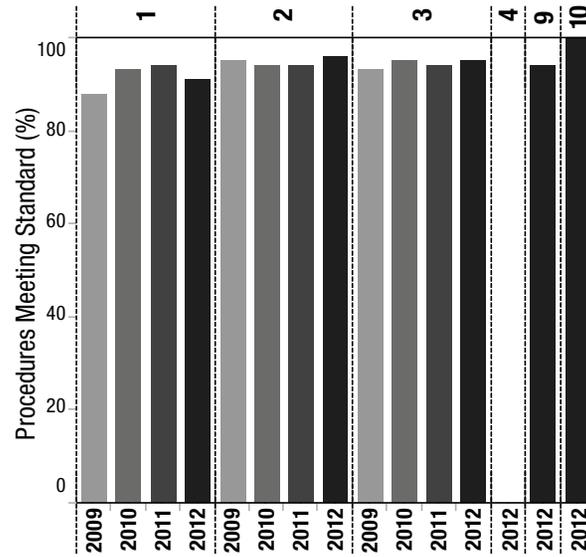
2009 2010 2011 2012

If the vertical measurement line crosses 1.0 (is in both colors) then the infection rate is not significantly different than expected.

If the line is entirely in the color:

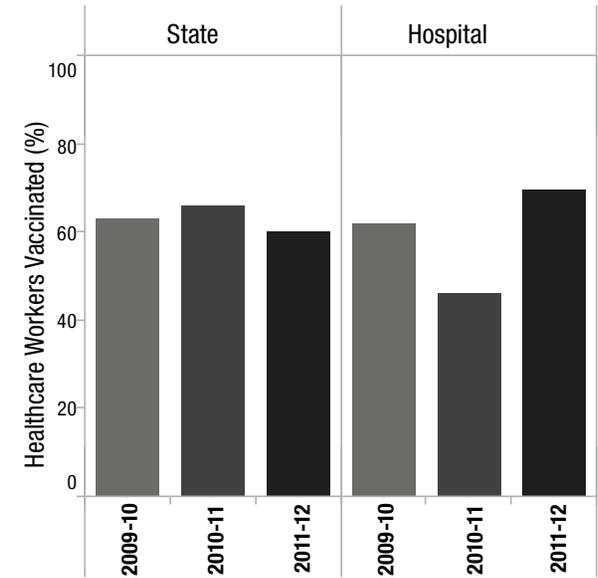
- More infections were observed than expected
- Fewer infections were observed than expected

Surgical Care Improvement Project (SCIP) Process of Care Measures



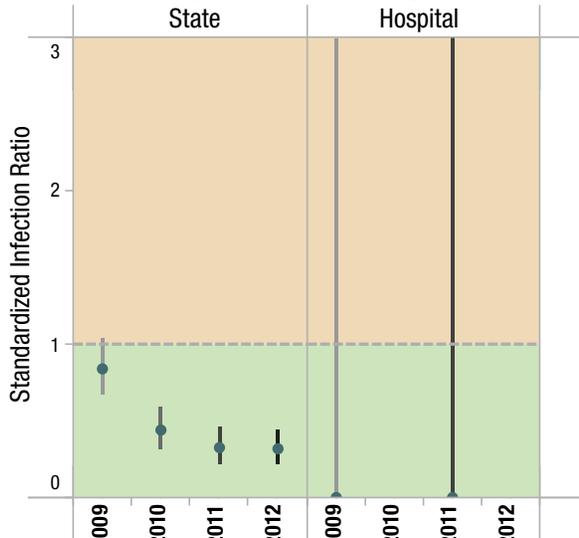
Type	Year Ending 3/2012 SCIP Procedures									
	1	2	3	4	9	10				
Procedures Meeting Standard	363	373	364	0	348	546				
Sample Procedure Count	399	389	383	0	370	546				

Healthcare Worker Influenza Vaccination



Year	Vaccination Count	Worker Count
2009-10	655	1055
2010-11	465	1008
2011-12	847	1220

Central Line Associated Bloodstream Infections (CLABSIs), Adult Medical/Surgical ICUs



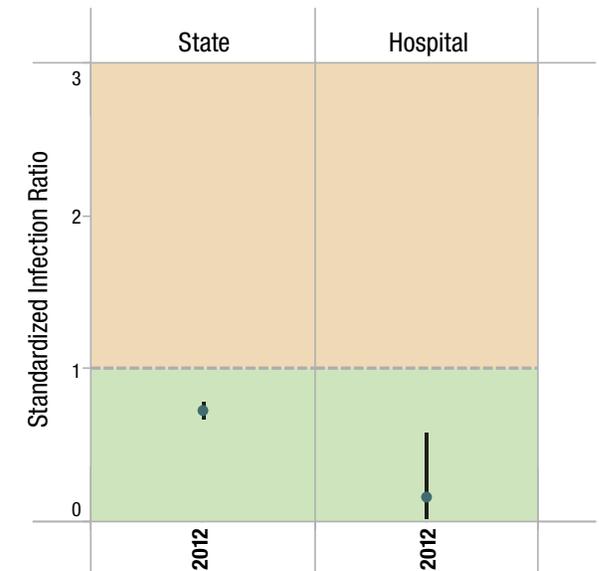
Year	CLABSIs	CL Days	Rate per 1000 CL days	SIR
2009	0	824	0.00	0.000
2010	0	651	0.00	*
2011	0	722	0.00	0.000
2012	0	543	0.00	*

*SIR values only calculated if expected infections ≥ 1

Central Line Associated Bloodstream Infections (CLABSIs), Neonatal ICUs

Hospital does not have a NICU

Incident Clostridium difficile Infections

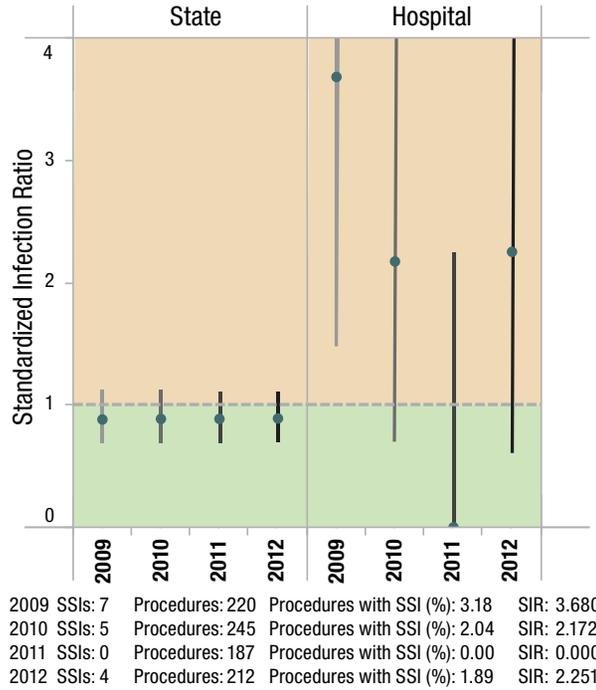


Year	Infections	Patient-Days	Rate/1000 pt-days	SIR
2012	2	24820	0.08	0.160

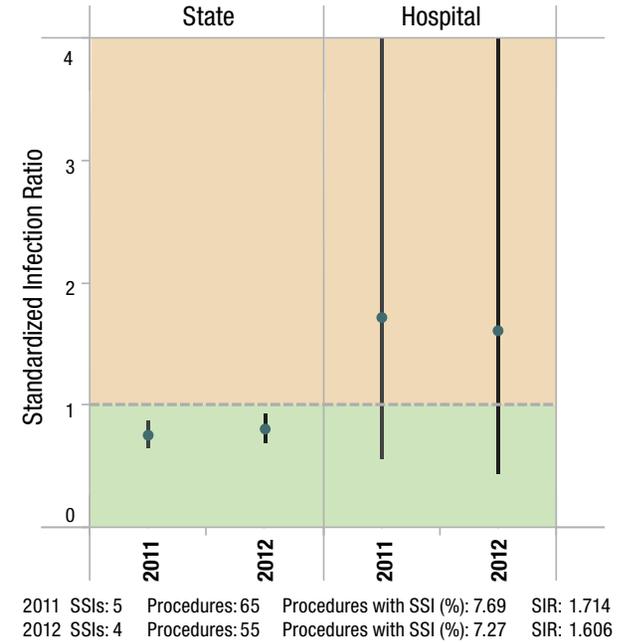
Coronary Artery Bypass Graft Surgery

Hospital does not perform this procedure

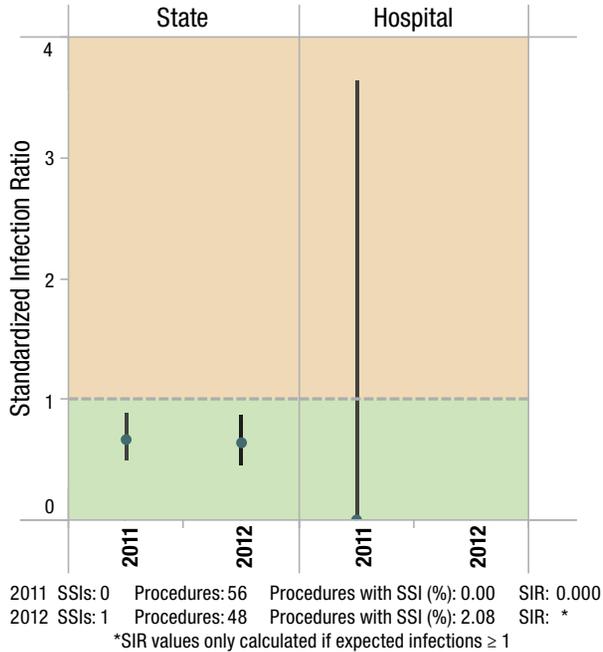
Knee Replacement Surgery



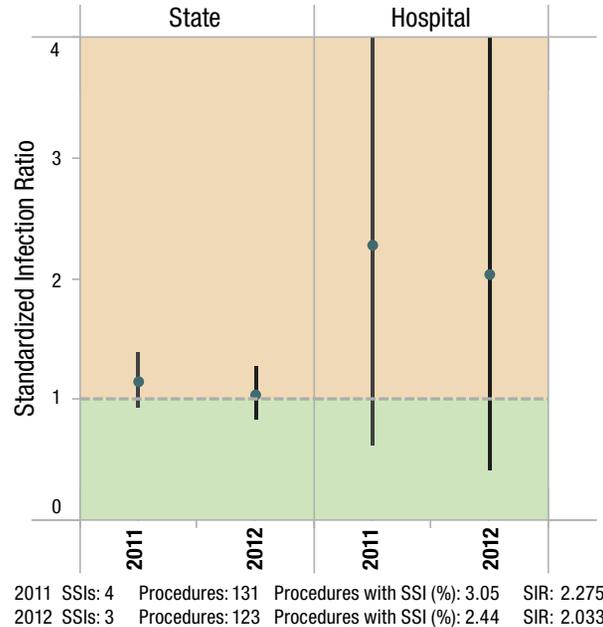
Colon Surgery



Abdominal Hysterectomy Surgery



Hip Replacement Surgery



Laminectomy Surgery

**SIR values only calculated if expected infections ≥ 1*

2011	SSIs: 1	Procedures: 83	Procedures with SSI (%): 1.20	SIR: *
2012	SSIs: 2	Procedures: 86	Procedures with SSI (%): 2.33	SIR: *

Blue Mountain Hospital

Location:	John Day
Ownership:	Non Profit
Med. School Affiliation:	Undergraduate
ICU Beds:	4
Total Staffed Beds:	16
2012 Admissions:	312
2012 Patient Days:	894
ICP FTE:	1



2009
 2010
 2011
 2012

If the vertical measurement line crosses 1.0 (is in both colors) then the infection rate is not significantly different than expected.

If the line is entirely in the color:

- More infections were observed than expected
- Fewer infections were observed than expected

Central Line Associated Bloodstream Infections (CLABSIs), Adult Medical/Surgical ICUs

Too few procedures to report

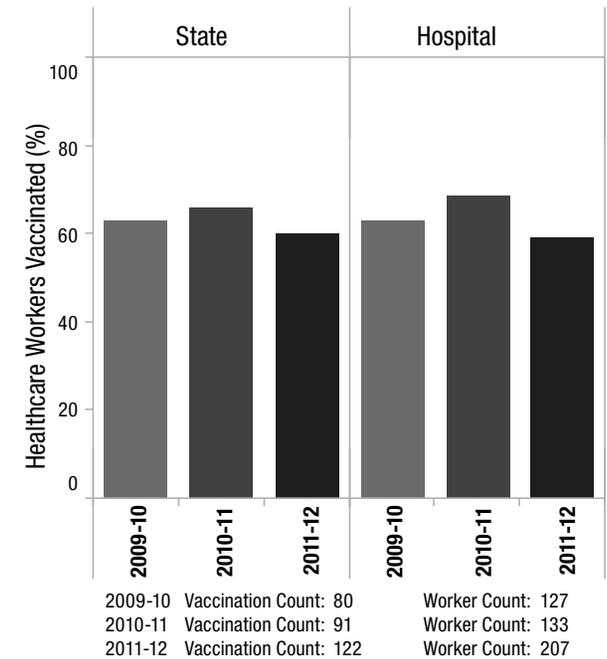
Surgical Care Improvement Project (SCIP) Process of Care Measures

Too few procedures to report

Central Line Associated Bloodstream Infections (CLABSIs), Neonatal ICUs

Hospital does not have a NICU

Healthcare Worker Influenza Vaccination



Incident *Clostridium difficile* Infections

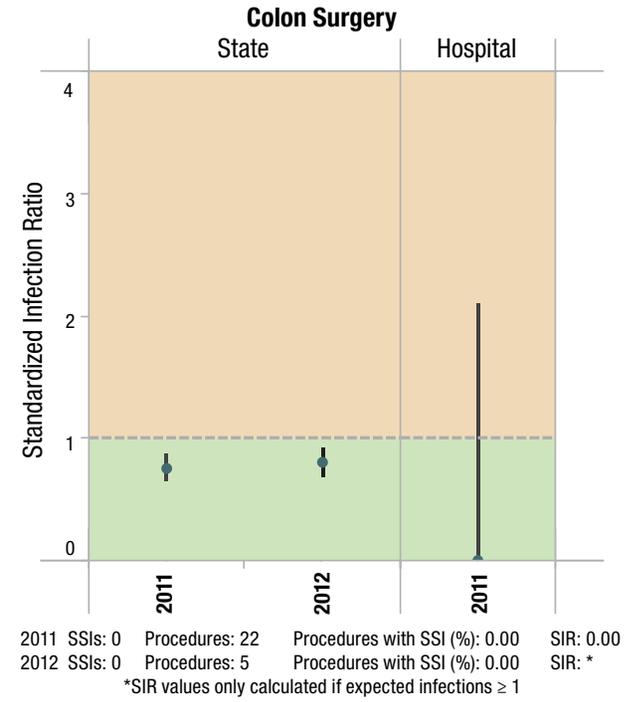
**SIR values only calculated if expected infections ≥ 1*

Coronary Artery Bypass Graft Surgery

Hospital does not perform this procedure

Knee Replacement Surgery

Hospital does not perform this procedure



Abdominal Hysterectomy Surgery

Too few procedures to report

Hip Replacement Surgery

Hospital does not perform this procedure

Laminectomy Surgery

Hospital does not perform this procedure

Columbia Memorial Hospital

Location:	Astoria	
Ownership:	Non Profit	
Med. School Affiliation:	None	
ICU Beds:	5	
Total Staffed Beds:	25	
2012 Admissions:	1,498	
2012 Patient Days:	4,221	
ICP FTE:	1	

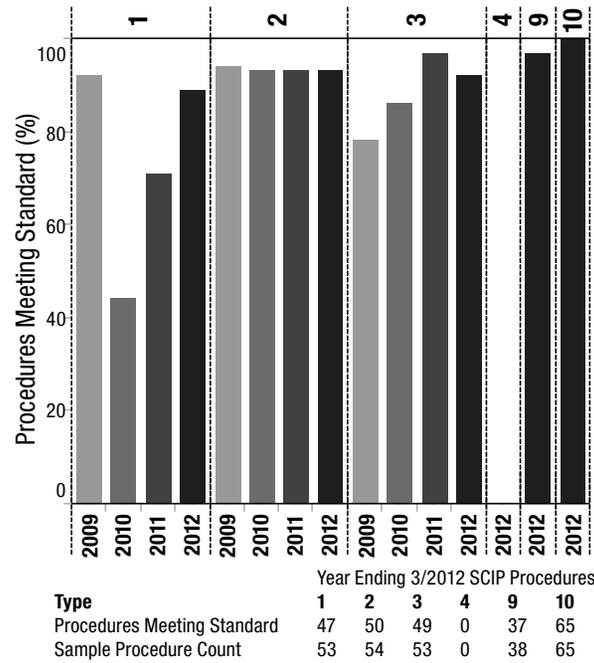
2009
 2010
 2011
 2012

If the vertical measurement line crosses 1.0 (is in both colors) then the infection rate is not significantly different than expected.

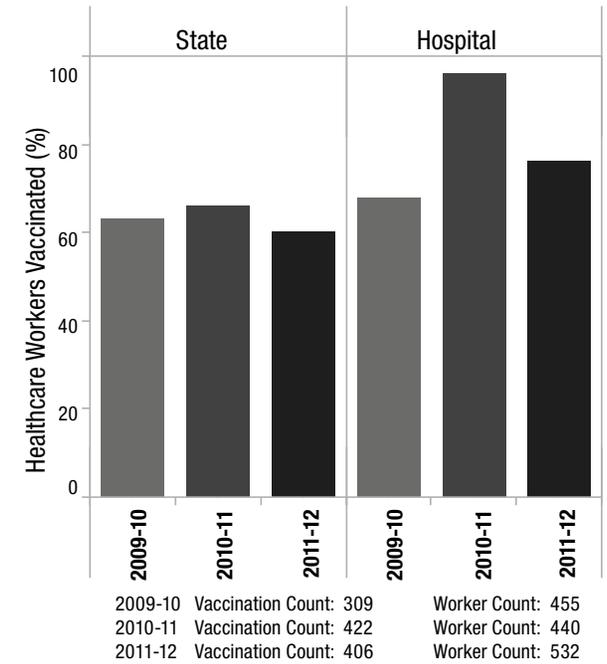
If the line is entirely in the color:

- More infections were observed than expected
- Fewer infections were observed than expected

Surgical Care Improvement Project (SCIP) Process of Care Measures



Healthcare Worker Influenza Vaccination



Central Line Associated Bloodstream Infections (CLABSIs), Adult Medical/Surgical ICUs

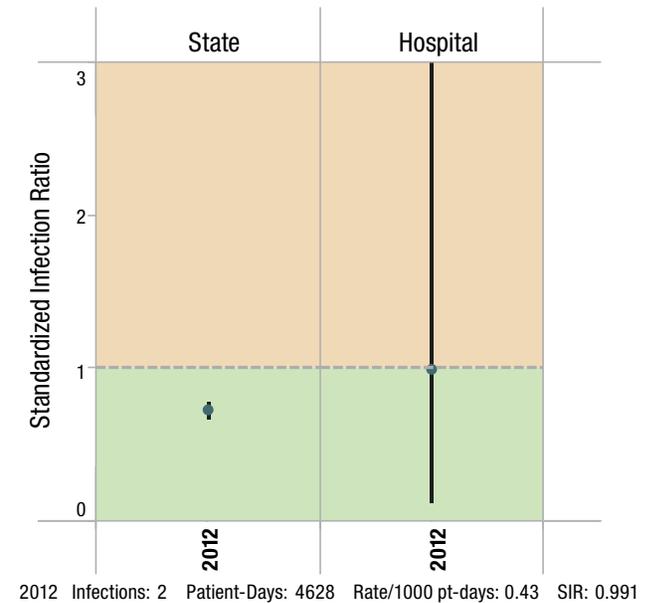
**SIR values only calculated if expected infections ≥ 1*

2009	CLABSIs: 0	CL Days: 69	Rate per 1000 CL days: 0.00	SIR: *
2010	CLABSIs: 0	CL Days: 77	Rate per 1000 CL days: 0.00	SIR: *
2011	CLABSIs: 0	CL Days: 33	Rate per 1000 CL days: 0.00	SIR: *
2012	CLABSIs: 0	CL Days: 57	Rate per 1000 CL days: 0.00	SIR: *

Central Line Associated Bloodstream Infections (CLABSIs), Neonatal ICUs

Hospital does not have a NICU

Incident *Clostridium difficile* Infections



Coronary Artery Bypass Graft Surgery

Knee Replacement Surgery

Colon Surgery

Hospital does not perform this procedure

**SIR values only calculated if expected infections ≥ 1*

Too few procedures to report

2009 SSIs: 0	Procedures: 13	Procedures with SSI (%): 0.00	SIR: *
2010 SSIs: 0	Procedures: 27	Procedures with SSI (%): 0.00	SIR: *
2011 SSIs: 0	Procedures: 16	Procedures with SSI (%): 0.00	SIR: *
2012 SSIs: 0	Procedures: 33	Procedures with SSI (%): 0.00	SIR: *

Abdominal Hysterectomy Surgery

Hip Replacement Surgery

Laminectomy Surgery

**SIR values only calculated if expected infections ≥ 1*

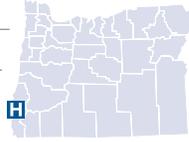
Too few procedures to report

Hospital does not perform this procedure

2011 SSIs: 0	Procedures: 35	Procedures with SSI (%): 0.00	SIR: *
2012 SSIs: 1	Procedures: 15	Procedures with SSI (%): 6.67	SIR: *

Coquille Valley Hospital

Location:	Coquille
Ownership:	Non Profit
Med. School Affiliation:	None
ICU Beds:	4
Total Staffed Beds:	25
2012 Admissions:	539
2012 Patient Days:	1,944
ICP FTE:	1



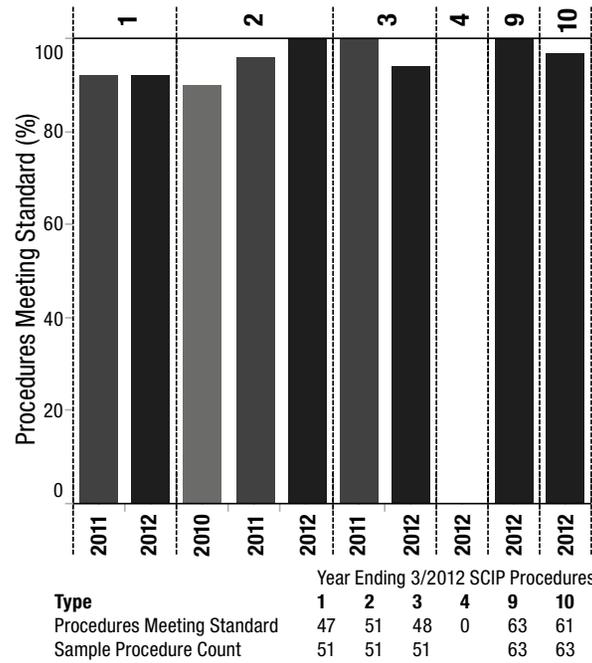
2009
 2010
 2011
 2012

If the vertical measurement line crosses 1.0 (is in both colors) then the infection rate is not significantly different than expected.

If the line is entirely in the color:

- More infections were observed than expected
- Fewer infections were observed than expected

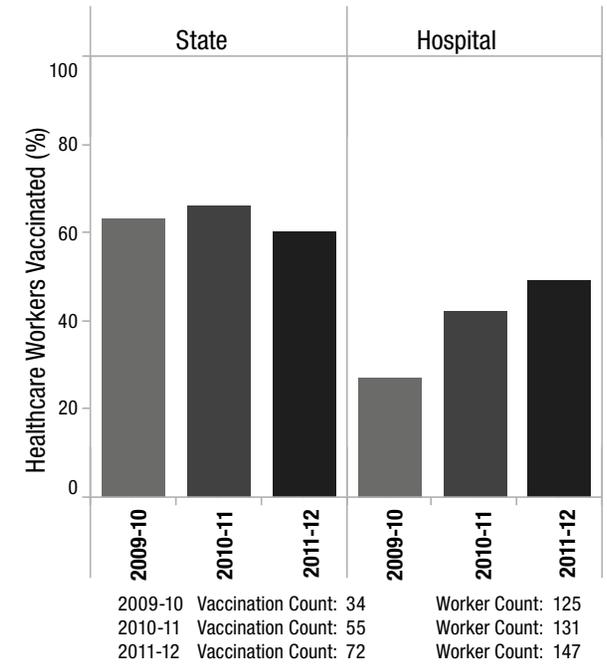
Surgical Care Improvement Project (SCIP) Process of Care Measures



Central Line Associated Bloodstream Infections (CLABSIs), Neonatal ICUs

Hospital does not have a NICU

Healthcare Worker Influenza Vaccination



Incident *Clostridium difficile* Infections

**SIR values only calculated if expected infections ≥ 1*

Central Line Associated Bloodstream Infections (CLABSIs), Adult Medical/Surgical ICUs

Too few procedures to report

Coronary Artery Bypass Graft Surgery

Knee Replacement Surgery

Colon Surgery

Hospital does not perform this procedure

**SIR values only calculated if
expected infections ≥ 1*

Too few procedures to report

2009 SSIs: 0	Procedures: 16	Procedures with SSI (%): 0.00	SIR: *
2010 SSIs: 0	Procedures: 17	Procedures with SSI (%): 0.00	SIR: *
2011 SSIs: 0	Procedures: 39	Procedures with SSI (%): 0.00	SIR: *
2012 SSIs: 0	Procedures: 45	Procedures with SSI (%): 0.00	SIR: *

Abdominal Hysterectomy Surgery

Hip Replacement Surgery

Laminectomy Surgery

Hospital does not perform this procedure

Too few procedures to report

Hospital does not perform this procedure

Cottage Grove Community Hospital

Location:	Cottage Grove
Ownership:	Non Profit
Med. School Affiliation:	None
ICU Beds:	0
Total Staffed Beds:	12
2012 Admissions:	301
2012 Patient Days:	1,001
ICP FTE:	1



2009
 2010
 2011
 2012

If the vertical measurement line crosses 1.0 (is in both colors) then the infection rate is not significantly different than expected.

If the line is entirely in the color:

- More infections were observed than expected
- Fewer infections were observed than expected

Central Line Associated Bloodstream Infections (CLABSIs), Adult Medical/Surgical ICUs

Hospital does not have an ICU

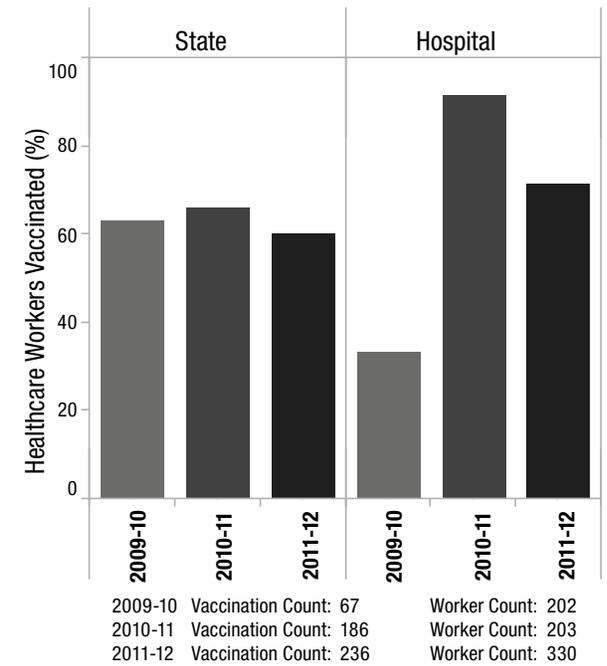
Surgical Care Improvement Project (SCIP) Process of Care Measures

Hospital does not perform these procedures

Central Line Associated Bloodstream Infections (CLABSIs), Neonatal ICUs

Hospital does not have a NICU

Healthcare Worker Influenza Vaccination



Incident *Clostridium difficile* Infections

**SIR values only calculated if expected infections ≥ 1*

Coronary Artery Bypass Graft Surgery

*Hospital does not perform
this procedure*

Knee Replacement Surgery

*Hospital does not perform
this procedure*

Colon Surgery

*Hospital does not perform
this procedure*

Abdominal Hysterectomy Surgery

*Hospital does not perform
this procedure*

Hip Replacement Surgery

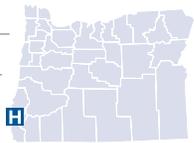
*Hospital does not perform
this procedure*

Laminectomy Surgery

*Hospital does not perform
this procedure*

Curry General Hospital

Location:	Gold Beach
Ownership:	Non Profit
Med. School Affiliation:	Graduate
ICU Beds:	3
Total Staffed Beds:	24
2012 Admissions:	611
2012 Patient Days:	2,095
ICP FTE:	1



2009
 2010
 2011
 2012

If the vertical measurement line crosses 1.0 (is in both colors) then the infection rate is not significantly different than expected.

If the line is entirely in the color:

- More infections were observed than expected
- Fewer infections were observed than expected

Central Line Associated Bloodstream Infections (CLABSIs), Adult Medical/Surgical ICUs

Hospital does not perform this procedure

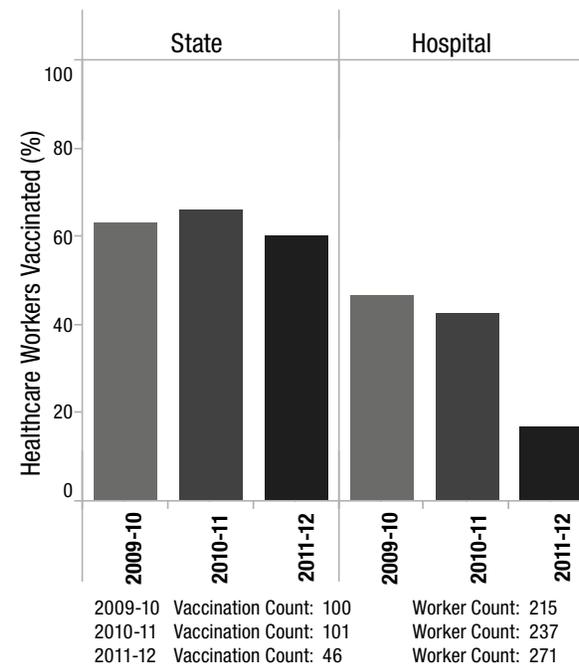
Surgical Care Improvement Project (SCIP) Process of Care Measures

Too few procedures to report

Central Line Associated Bloodstream Infections (CLABSIs), Neonatal ICUs

Hospital does not have a NICU

Healthcare Worker Influenza Vaccination



Incident *Clostridium difficile* Infections

**SIR values only calculated if expected infections ≥ 1*

Coronary Artery Bypass Graft Surgery

*Hospital does not perform
this procedure*

Knee Replacement Surgery

Too few procedures to report

Colon Surgery

Too few procedures to report

Abdominal Hysterectomy Surgery

Too few procedures to report

Hip Replacement Surgery

Too few procedures to report

Laminectomy Surgery

*Hospital does not perform
this procedure*

Good Samaritan Regional Medical Center

Location: Corvallis
 Ownership: Non Profit
 Med. School Affiliation: Major
 ICU Beds: 15
 Total Staffed Beds: 163
 2012 Admissions: 7,030
 2012 Patient Days: 36,623
 ICP FTE: 1.8



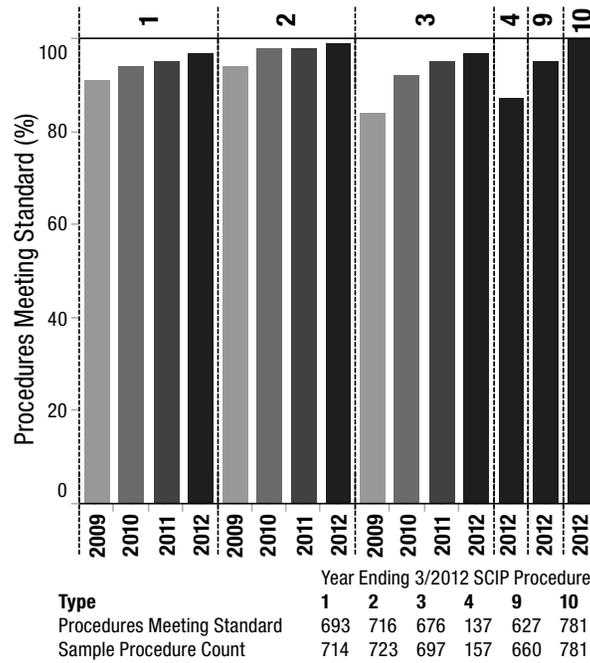
■ 2009 ■ 2010 ■ 2011 ■ 2012

If the vertical measurement line crosses 1.0 (is in both colors) then the infection rate is not significantly different than expected.

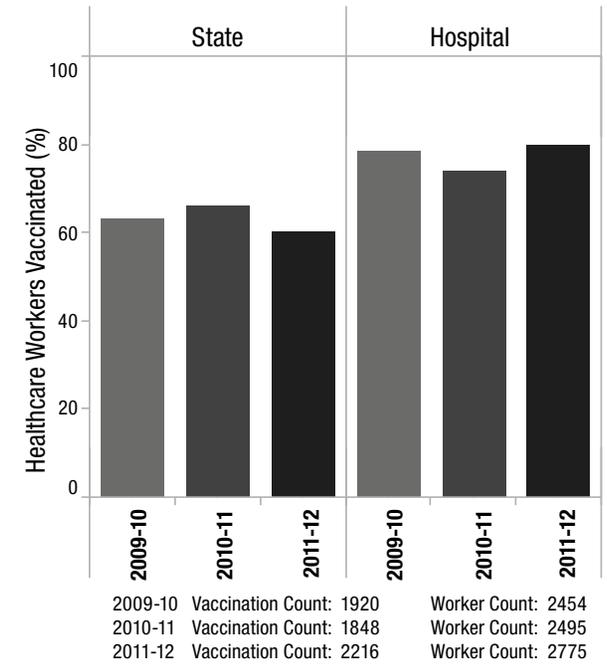
If the line is entirely in the color:

- More infections were observed than expected
- Fewer infections were observed than expected

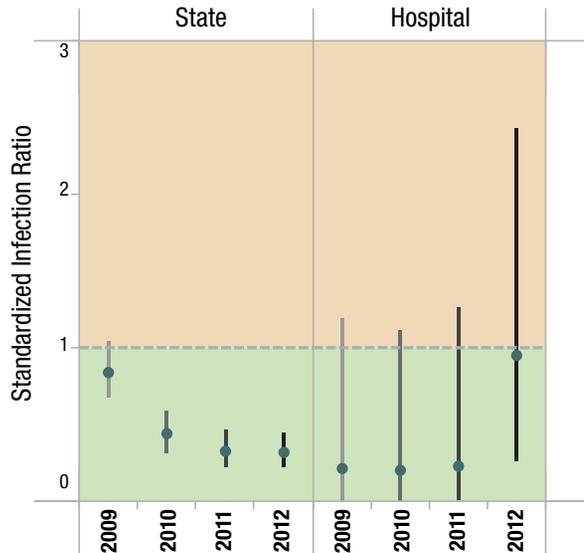
Surgical Care Improvement Project (SCIP) Process of Care Measures



Healthcare Worker Influenza Vaccination



Central Line Associated Bloodstream Infections (CLABSIs), Adult Medical/Surgical ICUs

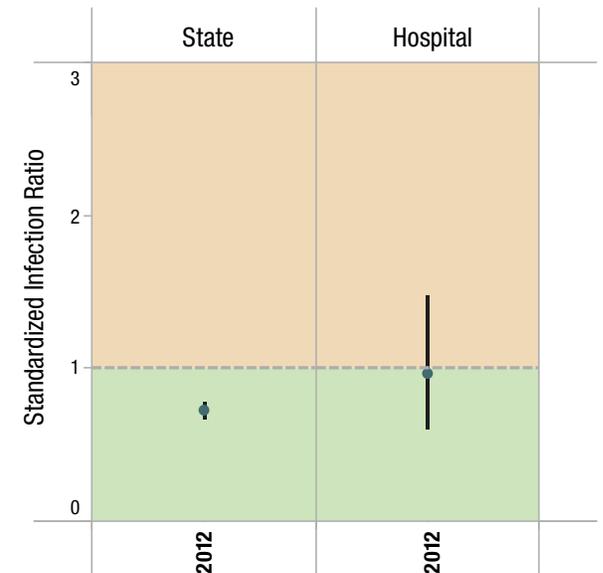


2009	CLABSIs: 1	CL Days: 2239	Rate per 1000 CL days: 0.45	SIR: 0.213
2010	CLABSIs: 1	CL Days: 2368	Rate per 1000 CL days: 0.42	SIR: 0.201
2011	CLABSIs: 1	CL Days: 2093	Rate per 1000 CL days: 0.48	SIR: 0.228
2012	CLABSIs: 4	CL Days: 2007	Rate per 1000 CL days: 1.99	SIR: 0.949

Central Line Associated Bloodstream Infections (CLABSIs), Neonatal ICUs

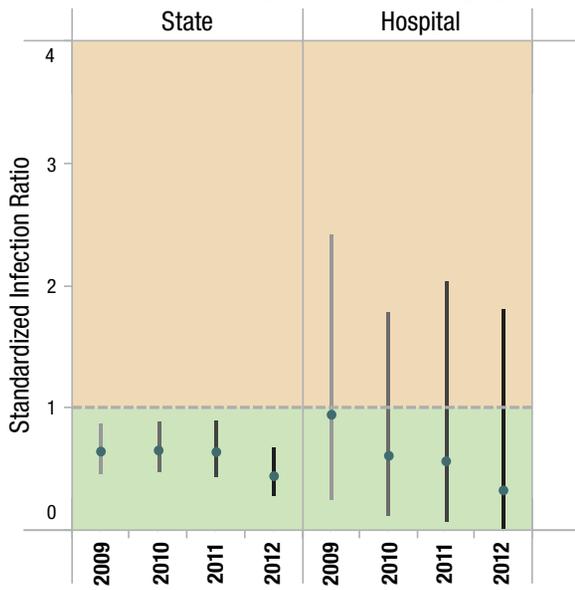
Hospital does not have a NICU

Incident Clostridium difficile Infections



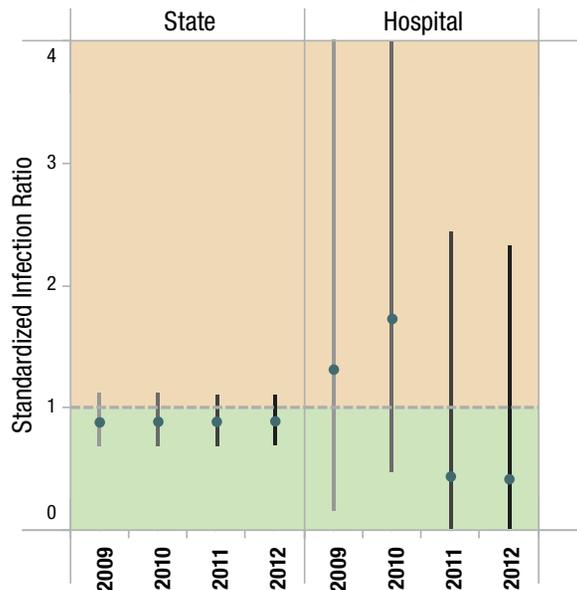
2012 Infections: 21 Patient-Days: 32196 Rate/1000 pt-days: 0.65 SIR: 0.966

Coronary Artery Bypass Graft Surgery



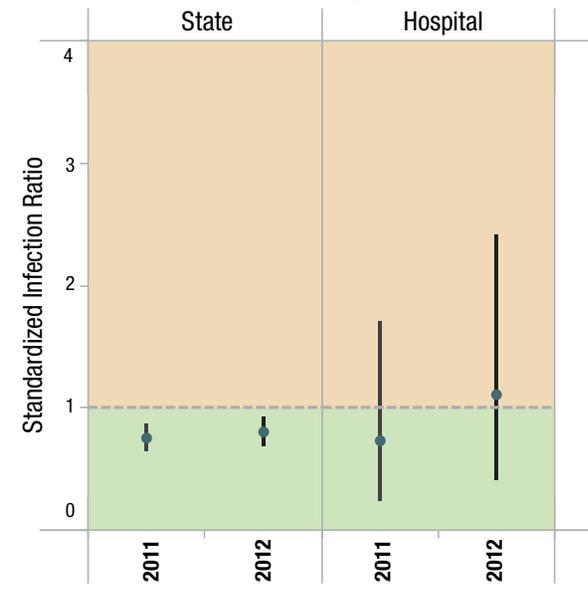
2009 SSIs: 4	Procedures: 198	Procedures with SSI (%): 2.02	SIR: 0.943
2010 SSIs: 3	Procedures: 200	Procedures with SSI (%): 1.50	SIR: 0.608
2011 SSIs: 2	Procedures: 158	Procedures with SSI (%): 1.27	SIR: 0.563
2012 SSIs: 1	Procedures: 139	Procedures with SSI (%): 0.72	SIR: 0.325

Knee Replacement Surgery



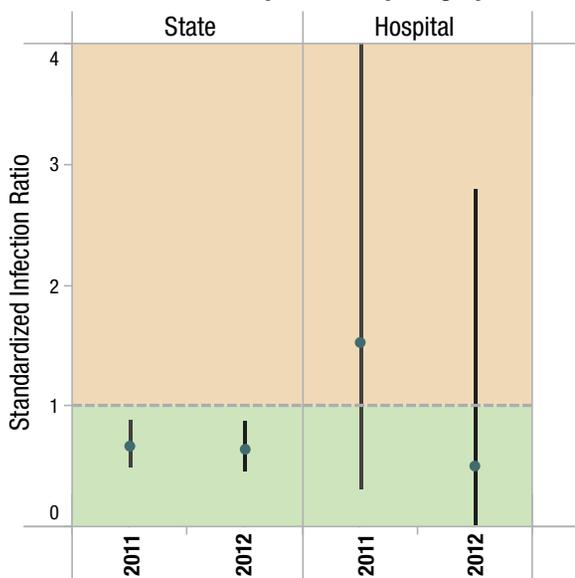
2009 SSIs: 2	Procedures: 175	Procedures with SSI (%): 1.14	SIR: 1.312
2010 SSIs: 4	Procedures: 261	Procedures with SSI (%): 1.53	SIR: 1.726
2011 SSIs: 1	Procedures: 240	Procedures with SSI (%): 0.42	SIR: 0.438
2012 SSIs: 1	Procedures: 252	Procedures with SSI (%): 0.40	SIR: 0.416

Colon Surgery



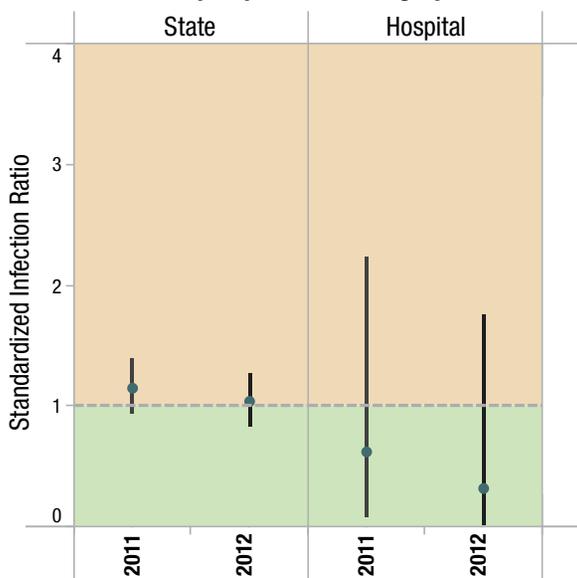
2011 SSIs: 5	Procedures: 126	Procedures with SSI (%): 3.97	SIR: 0.731
2012 SSIs: 6	Procedures: 99	Procedures with SSI (%): 6.06	SIR: 1.107

Abdominal Hysterectomy Surgery



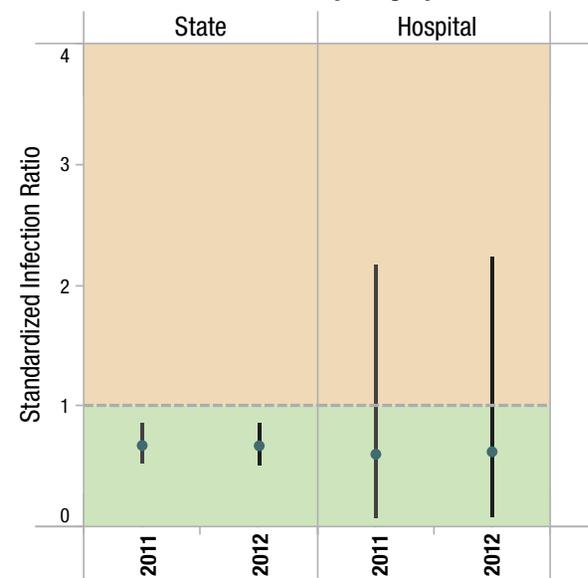
2011 SSIs: 3	Procedures: 102	Procedures with SSI (%): 2.94	SIR: 1.524
2012 SSIs: 1	Procedures: 104	Procedures with SSI (%): 0.96	SIR: 0.501

Hip Replacement Surgery



2011 SSIs: 2	Procedures: 215	Procedures with SSI (%): 0.93	SIR: 0.618
2012 SSIs: 1	Procedures: 222	Procedures with SSI (%): 0.45	SIR: 0.315

Laminectomy Surgery



2011 SSIs: 2	Procedures: 313	Procedures with SSI (%): 0.64	SIR: 0.599
2012 SSIs: 2	Procedures: 278	Procedures with SSI (%): 0.72	SIR: 0.619

Good Shepherd Medical Center

Location: Hermiston
 Ownership: Non Profit
 Med. School Affiliation: No
 ICU Beds: 4
 Total Staffed Beds: 25
 2012 Admissions: 1,767
 2012 Patient Days: 4,762
 ICP FTE: 1



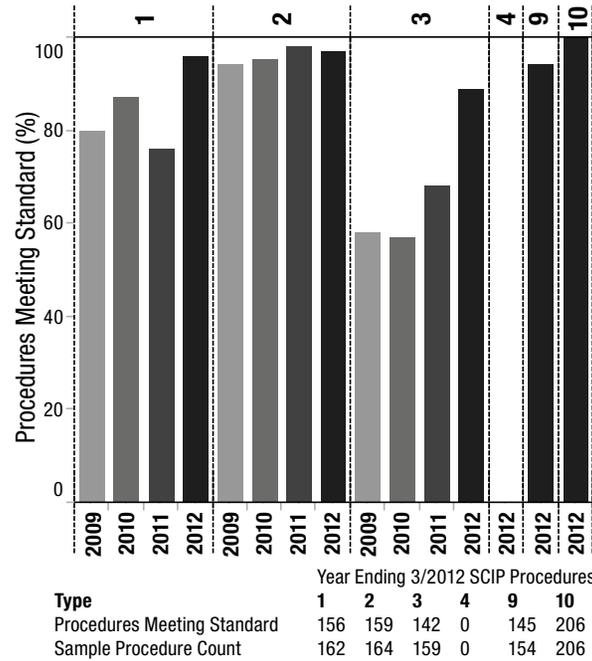
2009 2010 2011 2012

If the vertical measurement line crosses 1.0 (is in both colors) then the infection rate is not significantly different than expected.

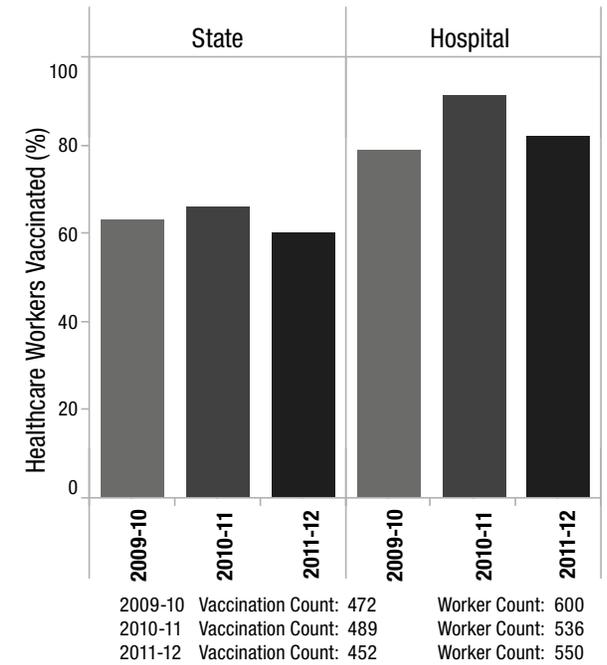
If the line is entirely in the color:

More infections were observed than expected
 Fewer infections were observed than expected

Surgical Care Improvement Project (SCIP) Process of Care Measures



Healthcare Worker Influenza Vaccination



Central Line Associated Bloodstream Infections (CLABSIs), Adult Medical/Surgical ICUs

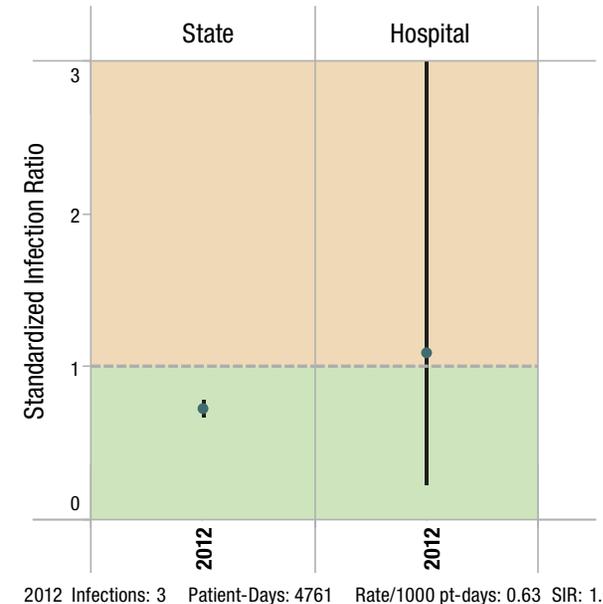
**SIR values only calculated if expected infections ≥ 1*

2009 CLABSIs: 0 CL Days: 104 Rate per 1000 CL days: 0.00 SIR: *
 2010 CLABSIs: 0 CL Days: 95 Rate per 1000 CL days: 0.00 SIR: *
 2011 CLABSIs: 0 CL Days: 85 Rate per 1000 CL days: 0.00 SIR: *
 2012 CLABSIs: 0 CL Days: 72 Rate per 1000 CL days: 0.00 SIR: *

Central Line Associated Bloodstream Infections (CLABSIs), Neonatal ICUs

Hospital does not have a NICU

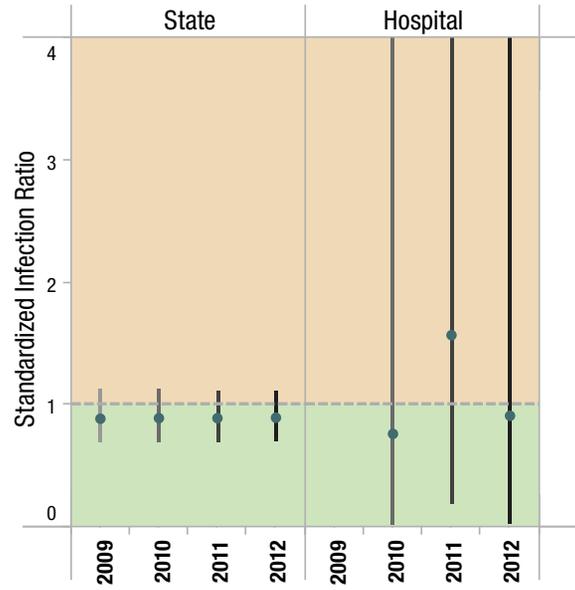
Incident Clostridium difficile Infections



Coronary Artery Bypass Graft Surgery

Hospital does not perform this procedure

Knee Replacement Surgery



2009 SSIs: 3 Procedures: 93 Procedures with SSI (%): 3.23 SIR: *
 2010 SSIs: 1 Procedures: 132 Procedures with SSI (%): 0.76 SIR: 0.757
 2011 SSIs: 2 Procedures: 127 Procedures with SSI (%): 1.57 SIR: 1.564
 2012 SSIs: 1 Procedures: 100 Procedures with SSI (%): 1.00 SIR: 0.905
 *SIR values only calculated if expected infections ≥ 1

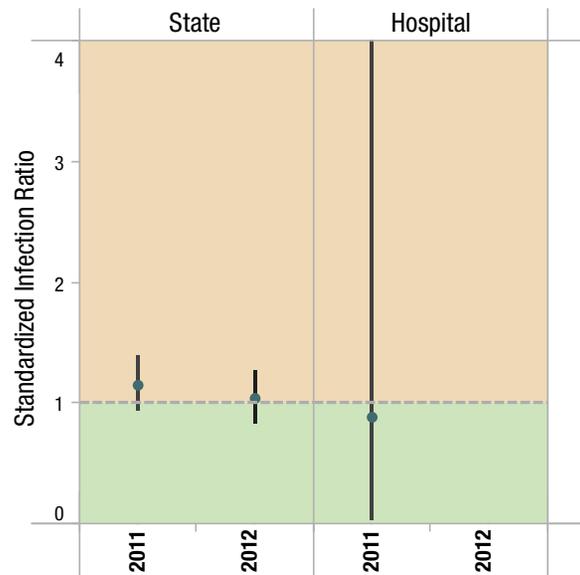
Colon Surgery

Too few procedures to report

Abdominal Hysterectomy Surgery

Too few procedures to report

Hip Replacement Surgery



2011 SSIs: 1 Procedures: 62 Procedures with SSI (%): 1.61 SIR: 0.880
 2012 SSIs: 2 Procedures: 61 Procedures with SSI (%): 3.28 SIR: *
 *SIR values only calculated if expected infections ≥ 1

Laminectomy Surgery

Hospital does not perform this procedure

Grande Ronde Hospital

Location: La Grande
 Ownership: Non profit
 Med. School Affiliation: None
 ICU Beds: 6
 Total Staffed Beds: 25
 2012 Admissions: 2,340
 2012 Patient Days: 6,331
 ICP FTE: 1



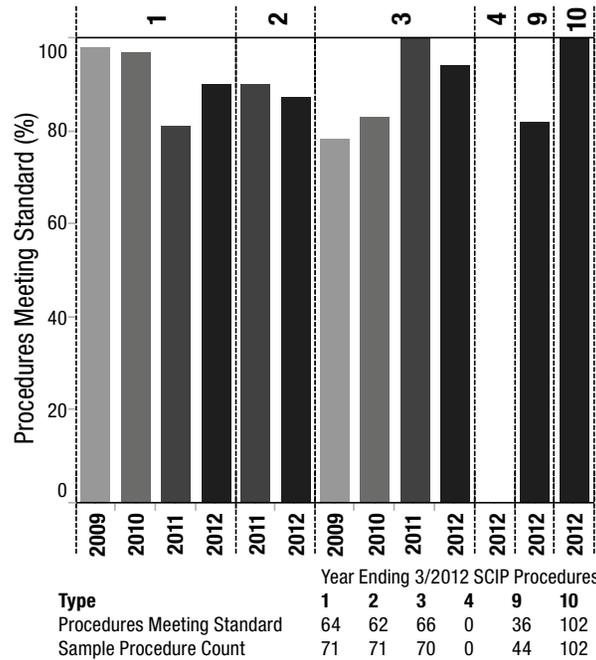
2009 2010 2011 2012

If the vertical measurement line crosses 1.0 (is in both colors) then the infection rate is not significantly different than expected.

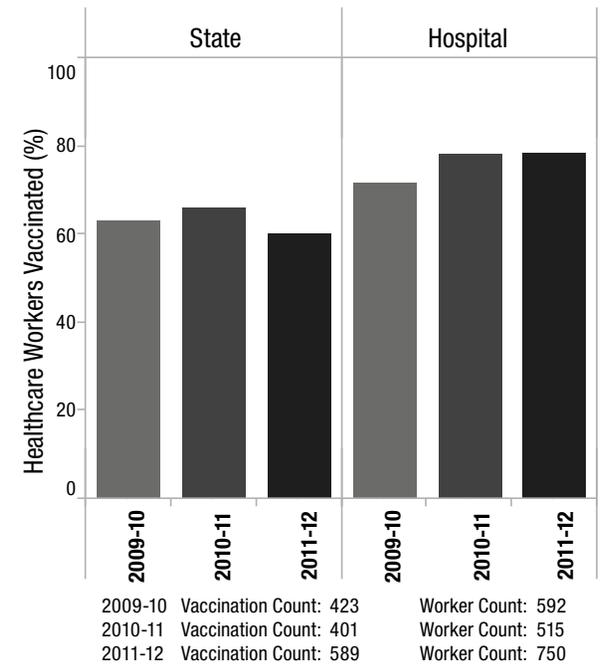
If the line is entirely in the color:

More infections were observed than expected
 Fewer infections were observed than expected

Surgical Care Improvement Project (SCIP) Process of Care Measures



Healthcare Worker Influenza Vaccination



Central Line Associated Bloodstream Infections (CLABSIs), Adult Medical/Surgical ICUs

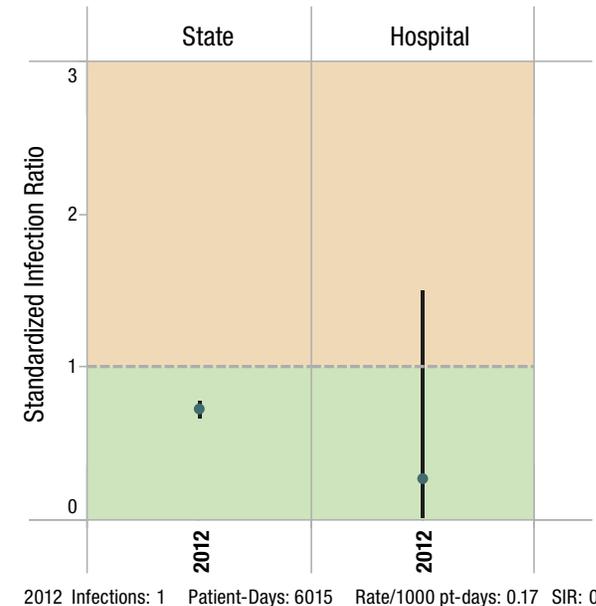
**SIR values only calculated if expected infections ≥ 1*

2009 CLABSIs: 0 CL Days: 201 Rate per 1000 CL days: 0.00 SIR: *
 2010 CLABSIs: 0 CL Days: 114 Rate per 1000 CL days: 0.00 SIR: *
 2011 CLABSIs: 0 CL Days: 159 Rate per 1000 CL days: 0.00 SIR: *
 2012 CLABSIs: 0 CL Days: 196 Rate per 1000 CL days: 0.00 SIR: *

Central Line Associated Bloodstream Infections (CLABSIs), Neonatal ICUs

Hospital does not have a NICU

Incident Clostridium difficile Infections



Coronary Artery Bypass Graft Surgery

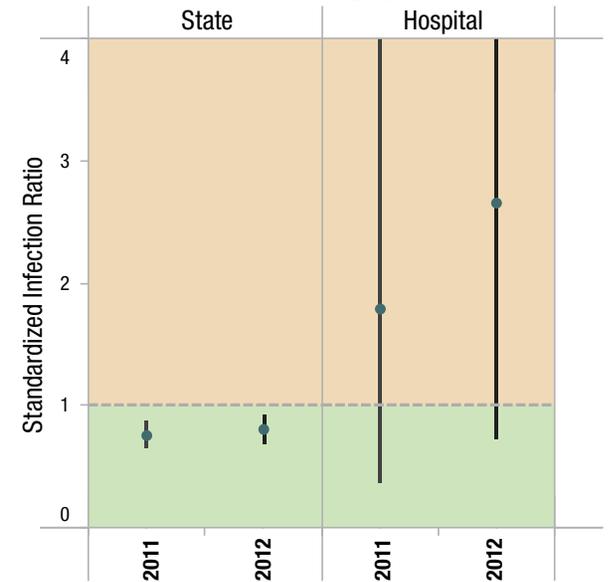
Hospital does not perform this procedure

Knee Replacement Surgery

**SIR values only calculated if expected infections ≥ 1*

2009 SSIs: 0	Procedures: 25	Procedures with SSI (%): 0.00	SIR: *
2010 SSIs: 0	Procedures: 20	Procedures with SSI (%): 0.00	SIR: *
2011 SSIs: 0	Procedures: 26	Procedures with SSI (%): 0.00	SIR: *
2012 SSIs: 0	Procedures: 27	Procedures with SSI (%): 0.00	SIR: *

Colon Surgery



2011 SSIs: 3	Procedures: 33	Procedures with SSI (%): 9.09	SIR: 1.787
2012 SSIs: 4	Procedures: 29	Procedures with SSI (%): 13.79	SIR: 2.653

Abdominal Hysterectomy Surgery

**SIR values only calculated if expected infections ≥ 1*

Hip Replacement Surgery

Too few procedures to report

Laminectomy Surgery

Hospital does not perform this procedure

2011 SSIs: 0	Procedures: 24	Procedures with SSI (%): 0.00	SIR: *
2012 SSIs: 0	Procedures: 10	Procedures with SSI (%): 0.00	SIR: *

Harney District Hospital

Location:	Burns
Ownership:	Non Profit
Med. School Affiliation:	None
ICU Beds:	2
Total Staffed Beds:	25
2012 Admissions:	501
2012 Patient Days:	1,805
ICP FTE:	1



2009
 2010
 2011
 2012

If the vertical measurement line crosses 1.0 (is in both colors) then the infection rate is not significantly different than expected.

If the line is entirely in the color:

- More infections were observed than expected
- Fewer infections were observed than expected

Central Line Associated Bloodstream Infections (CLABSIs), Adult Medical/Surgical ICUs

Hospital does not perform this procedure

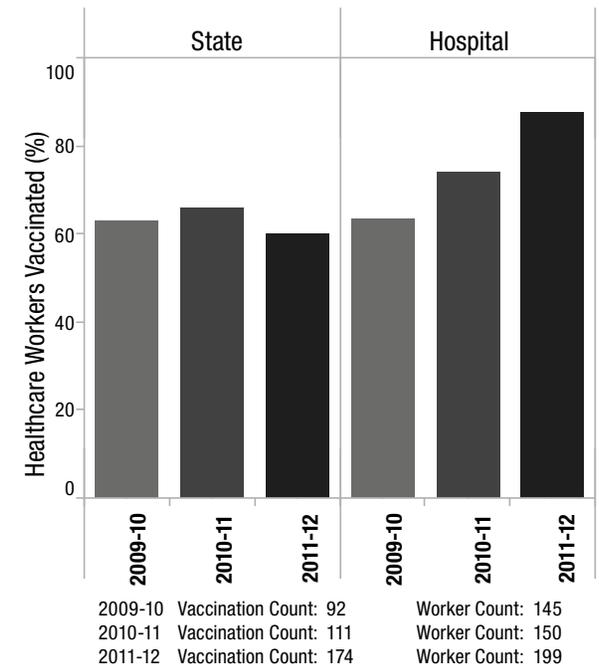
Surgical Care Improvement Project (SCIP) Process of Care Measures

Too few procedures to report

Central Line Associated Bloodstream Infections (CLABSIs), Neonatal ICUs

Hospital does not have a NICU

Healthcare Worker Influenza Vaccination



Incident *Clostridium difficile* Infections

**SIR values only calculated if expected infections ≥ 1*

2012 Infections: 0 Patient-Days: 1829 Rate/1000 pt-days: 0.00 SIR: *

Coronary Artery Bypass Graft Surgery

*Hospital does not perform
this procedure*

Knee Replacement Surgery

*Hospital does not perform
this procedure*

Colon Surgery

Too few procedures to report

Abdominal Hysterectomy Surgery

*Hospital does not perform
this procedure*

Hip Replacement Surgery

*Hospital does not perform
this procedure*

Laminectomy Surgery

*Hospital does not perform
this procedure*

Kaiser Sunnyside Medical Center

Location: Clackamas
 Ownership: Non Profit
 Med. School Affiliation: Graduate
 ICU Beds: 40
 Total Staffed Beds: 329
 2012 Admissions: 19,405
 2012 Patient Days: 65,093
 ICP FTE: 2



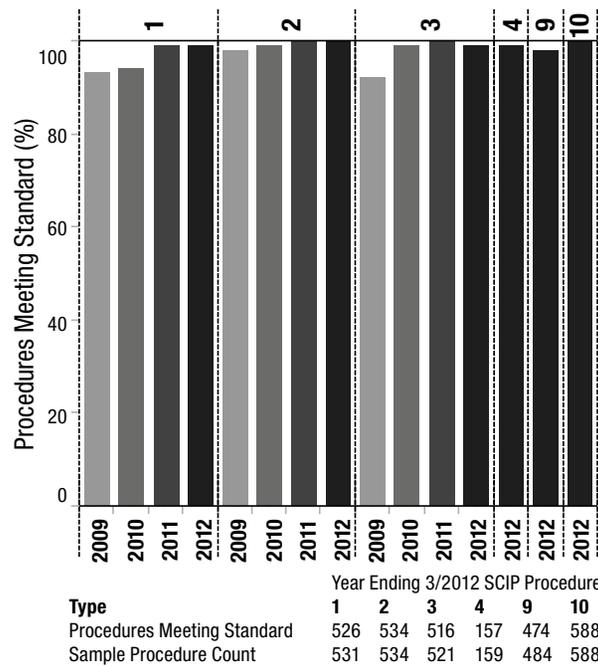
■ 2009 ■ 2010 ■ 2011 ■ 2012

If the vertical measurement line crosses 1.0 (is in both colors) then the infection rate is not significantly different than expected.

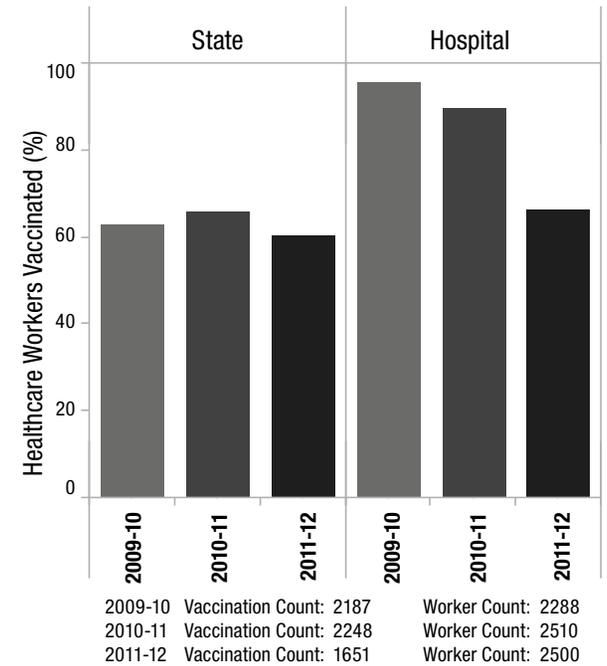
If the line is entirely in the color:

- More infections were observed than expected
- Fewer infections were observed than expected

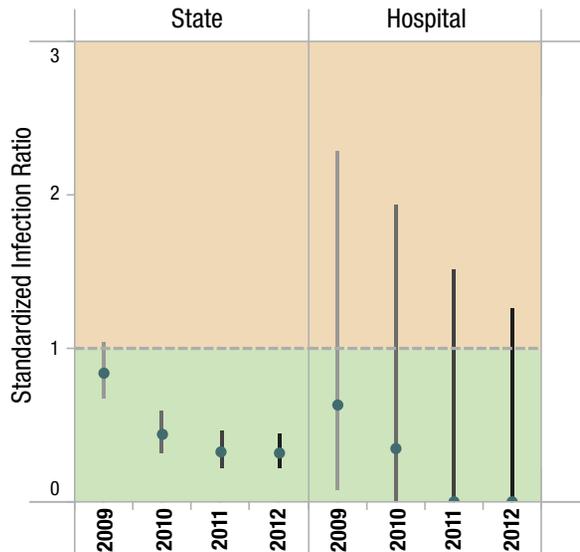
Surgical Care Improvement Project (SCIP) Process of Care Measures



Healthcare Worker Influenza Vaccination



Central Line Associated Bloodstream Infections (CLABSIs), Adult Medical/Surgical ICUs

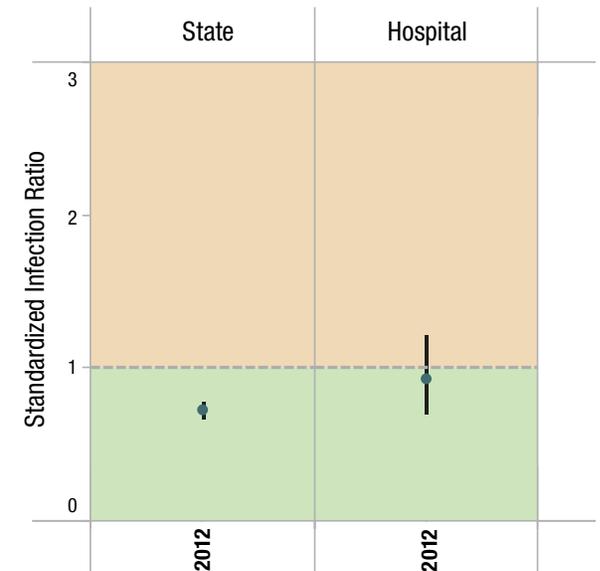


2009	CLABSIs: 2	CL Days: 2112	Rate per 1000 CL days: 0.95	SIR: 0.631
2010	CLABSIs: 1	CL Days: 1921	Rate per 1000 CL days: 0.52	SIR: 0.347
2011	CLABSIs: 0	CL Days: 1627	Rate per 1000 CL days: 0.00	SIR: 0.000
2012	CLABSIs: 0	CL Days: 1947	Rate per 1000 CL days: 0.00	SIR: 0.000

Central Line Associated Bloodstream Infections (CLABSIs), Neonatal ICUs

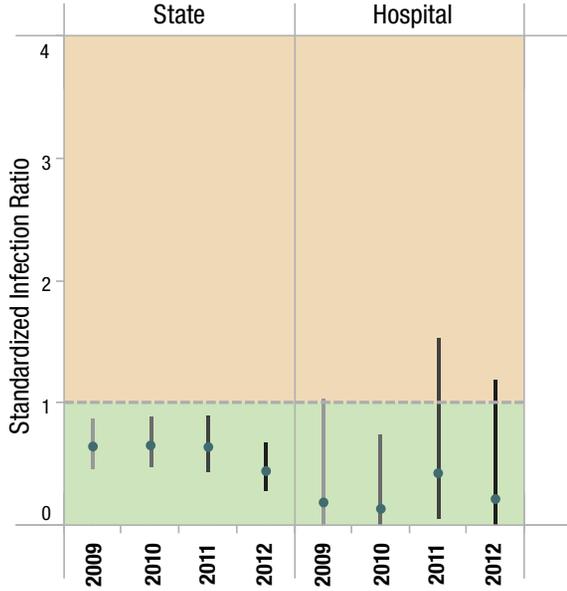
Hospital does not have a NICU

Incident *Clostridium difficile* Infections



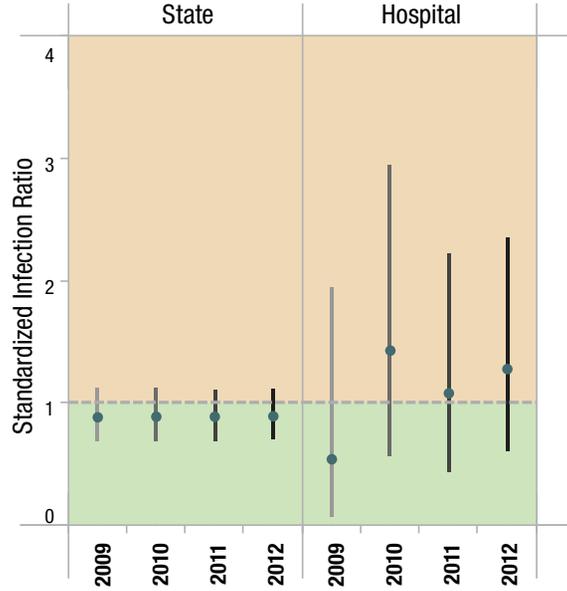
2012 Infections: 52 Patient-Days: 64695 Rate/1000 pt-days: 0.80 SIR: 0.929

Coronary Artery Bypass Graft Surgery



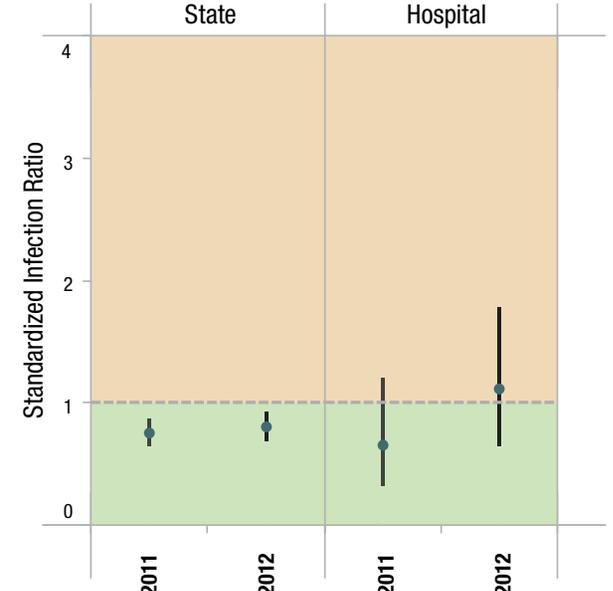
Year	SSIs	Procedures	Procedures with SSI (%)	SIR
2009	1	243	0.41	0.185
2010	1	343	0.29	0.133
2011	2	211	0.95	0.424
2012	1	229	0.44	0.213

Knee Replacement Surgery



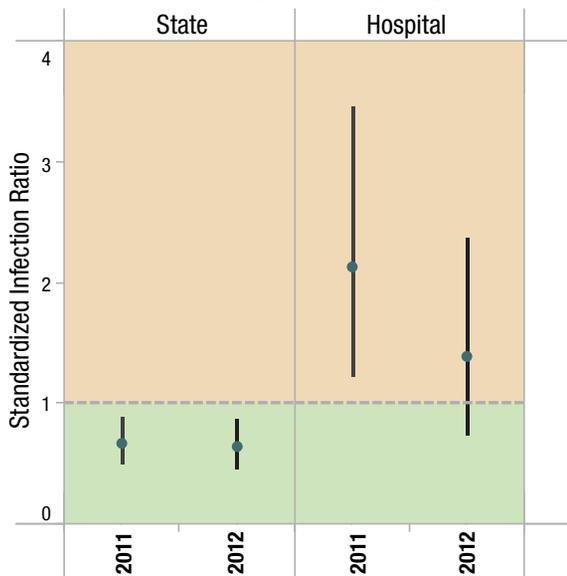
Year	SSIs	Procedures	Procedures with SSI (%)	SIR
2009	2	375	0.53	0.538
2010	7	490	1.43	1.426
2011	7	676	1.04	1.077
2012	10	848	1.18	1.275

Colon Surgery



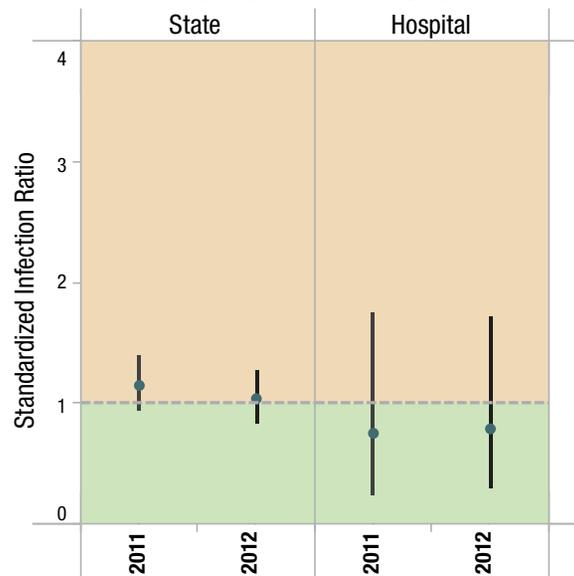
Year	SSIs	Procedures	Procedures with SSI (%)	SIR
2011	10	289	3.46	0.653
2012	17	297	5.72	1.113

Abdominal Hysterectomy Surgery



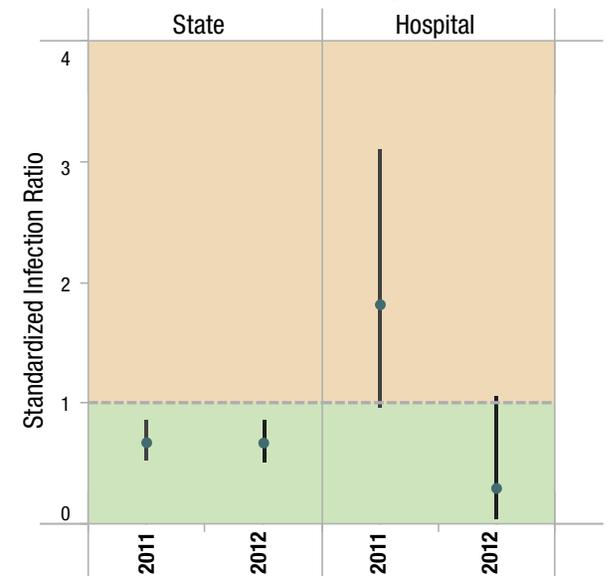
Year	SSIs	Procedures	Procedures with SSI (%)	SIR
2011	16	455	3.52	2.127
2012	13	565	2.30	1.386

Hip Replacement Surgery



Year	SSIs	Procedures	Procedures with SSI (%)	SIR
2011	5	557	0.90	0.749
2012	6	689	0.87	0.786

Laminectomy Surgery



Year	SSIs	Procedures	Procedures with SSI (%)	SIR
2011	13	801	1.62	1.814
2012	2	747	0.27	0.293

Lake District Hospital

Location: Lakeview

Ownership: Government

Medical School Affiliation: None

ICU Beds: 0

Total Staffed Beds: 24

2012 Admissions: 437

2012 Patient Days: 1,368

ICP FTE: 2



2009
 2010
 2011
 2012

If the vertical measurement line crosses 1.0 (is in both colors) then the infection rate is not significantly different than expected.

If the line is entirely in the color:

- More infections were observed than expected
- Fewer infections were observed than expected

Central Line Associated Bloodstream Infections (CLABSIs), Adult Medical/Surgical ICUs

Hospital does not have an ICU

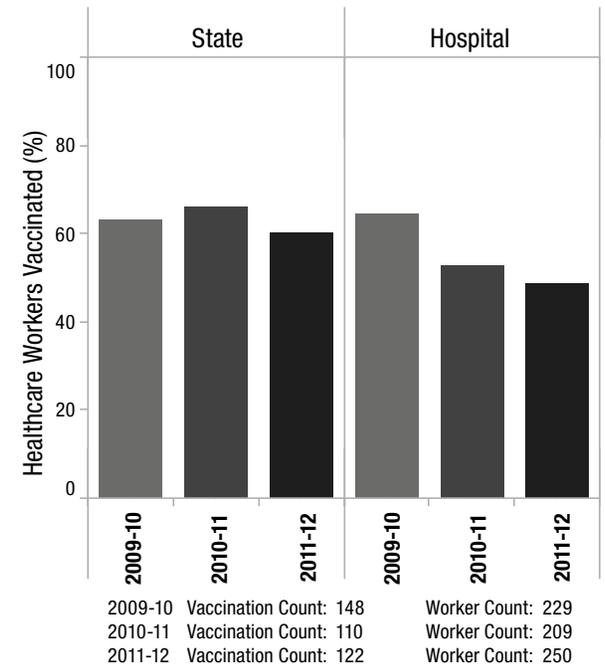
Surgical Care Improvement Project (SCIP) Process of Care Measures

Hospital does not perform these procedures

Central Line Associated Bloodstream Infections (CLABSIs), Neonatal ICUs

Hospital does not have a NICU

Healthcare Worker Influenza Vaccination



Incident *Clostridium difficile* Infections

**SIR values only calculated if expected infections ≥ 1*

Coronary Artery Bypass Graft Surgery

*Hospital does not perform
this procedure*

Knee Replacement Surgery

*Hospital does not perform
this procedure*

Colon Surgery

*Hospital does not perform
this procedure*

Abdominal Hysterectomy Surgery

*Hospital does not perform
this procedure*

Hip Replacement Surgery

*Hospital does not perform
this procedure*

Laminectomy Surgery

*Hospital does not perform
this procedure*

Legacy Emanuel Hospital

Location: Portland
 Ownership: Non Profit
 Med. School Affiliation: Major
 ICU Beds: 117
 Total Staffed Beds: 415
 2012 Admissions: 18,869
 2012 Patient Days: 102,543
 ICP FTE: 3



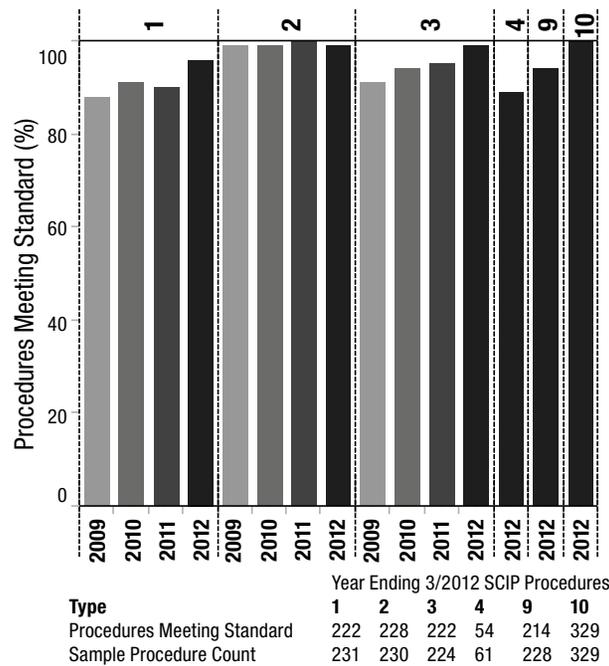
2009
 2010
 2011
 2012

If the vertical measurement line crosses 1.0 (is in both colors) then the infection rate is not significantly different than expected.

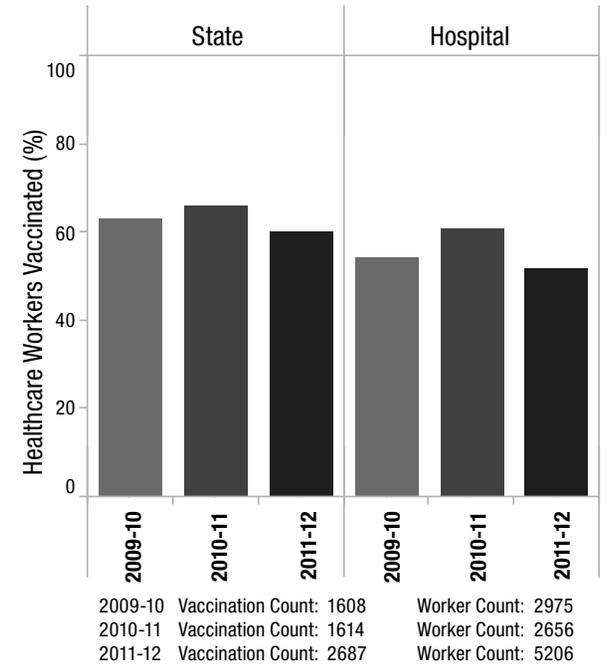
If the line is entirely in the color:

- More infections were observed than expected
- Fewer infections were observed than expected

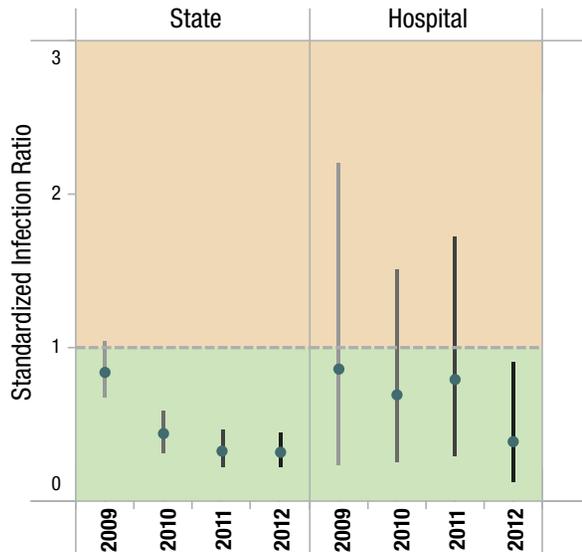
Surgical Care Improvement Project (SCIP) Process of Care Measures



Healthcare Worker Influenza Vaccination

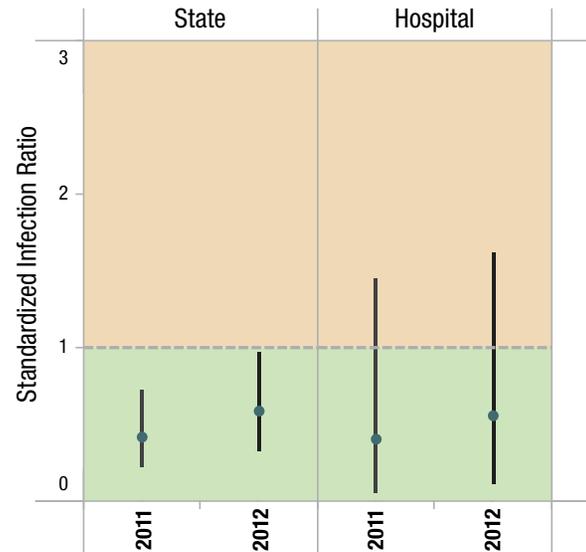


Central Line Associated Bloodstream Infections (CLABSIs), Adult Medical/Surgical ICUs



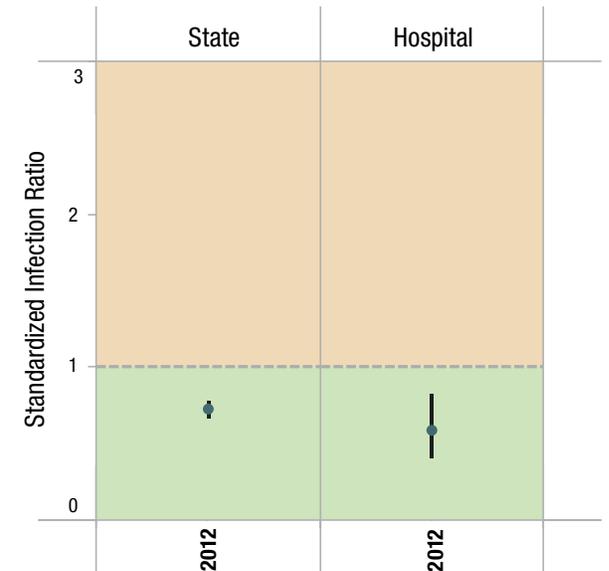
2009	CLABSIs: 4	CL Days: 2023	Rate per 1000 CL days: 1.98	SIR: 0.860
2010	CLABSIs: 6	CL Days: 3552	Rate per 1000 CL days: 1.69	SIR: 0.692
2011	CLABSIs: 6	CL Days: 3114	Rate per 1000 CL days: 1.93	SIR: 0.792
2012	CLABSIs: 5	CL Days: 5648	Rate per 1000 CL days: 0.89	SIR: 0.387

Central Line Associated Bloodstream Infections (CLABSIs), Neonatal ICUs



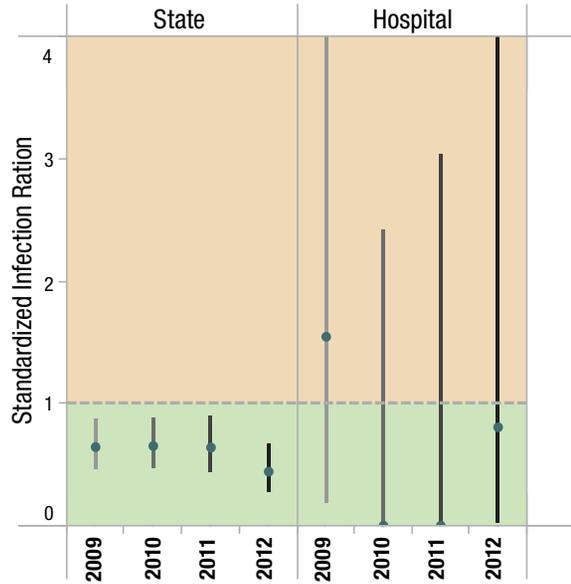
2011	CLABSIs: 2	CL Days: 2273	Rate per 1000 CL days: 0.88	SIR: 0.403
2012	CLABSIs: 3	CL Days: 2446	Rate per 1000 CL days: 1.23	SIR: 0.556

Incident Clostridium difficile Infections



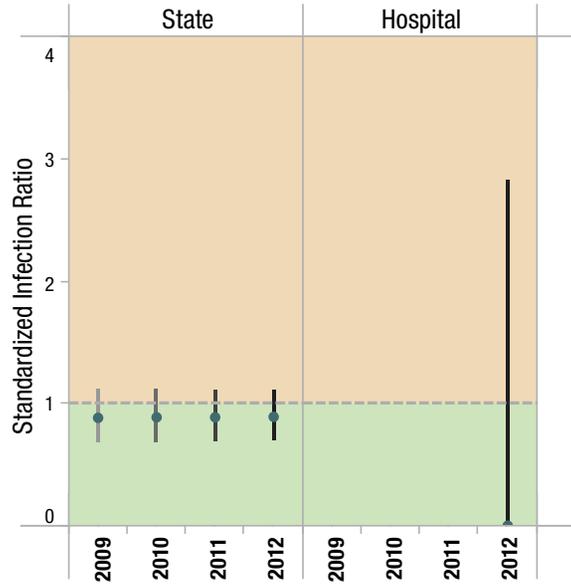
2012	Infections: 34	Patient-Days: 86376	Rate/1000 pt-days: 0.39	SIR: 0.587
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Coronary Artery Bypass Graft Surgery



2009 SSIs: 2	Procedures: 53	Procedures with SSI (%): 3.77	SIR: 1.544
2010 SSIs: 0	Procedures: 71	Procedures with SSI (%): 0.00	SIR: 0.000
2011 SSIs: 0	Procedures: 62	Procedures with SSI (%): 0.00	SIR: 0.000
2012 SSIs: 1	Procedures: 51	Procedures with SSI (%): 1.96	SIR: 0.804

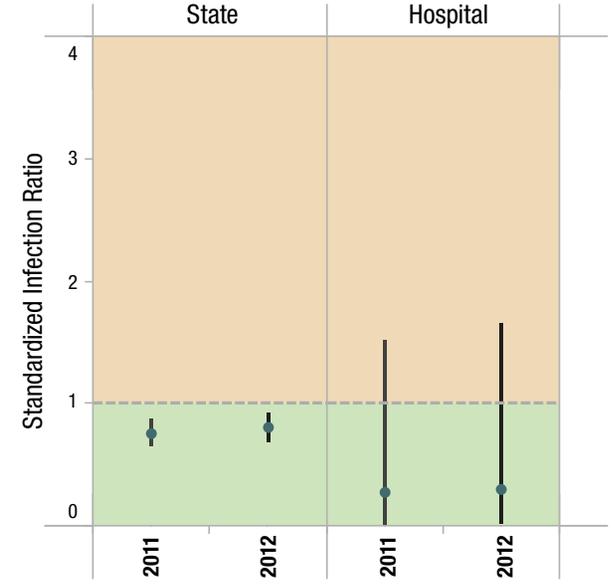
Knee Replacement Surgery



2009 SSIs: 0	Procedures: 38	Procedures with SSI (%): 0.00	SIR: *
2010 SSIs: 0	Procedures: 41	Procedures with SSI (%): 0.00	SIR: *
2011 SSIs: 2	Procedures: 43	Procedures with SSI (%): 4.65	SIR: *
2012 SSIs: 0	Procedures: 87	Procedures with SSI (%): 0.00	SIR: 0.000

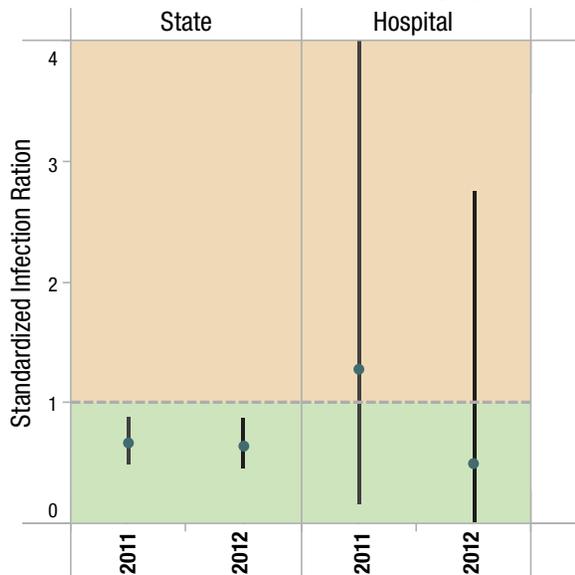
*SIR values only calculated if expected infections ≥ 1

Colon Surgery



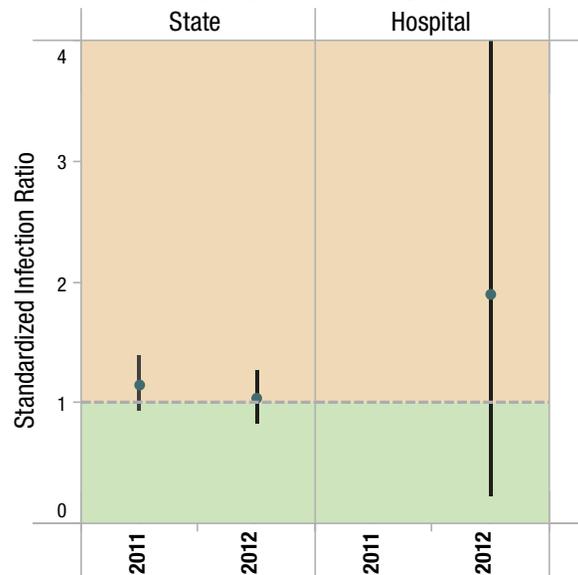
2011 SSIs: 1	Procedures: 65	Procedures with SSI (%): 1.54	SIR: 0.272
2012 SSIs: 1	Procedures: 54	Procedures with SSI (%): 1.85	SIR: 0.296

Abdominal Hysterectomy Surgery



2011 SSIs: 2	Procedures: 84	Procedures with SSI (%): 2.38	SIR: 1.276
2012 SSIs: 1	Procedures: 87	Procedures with SSI (%): 1.15	SIR: 0.495

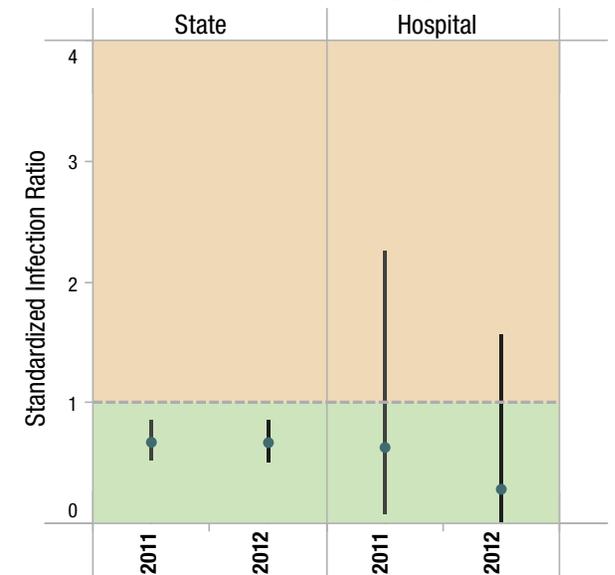
Hip Replacement Surgery



2011 SSIs: 3	Procedures: 53	Procedures with SSI (%): 5.66	SIR: *
2012 SSIs: 2	Procedures: 59	Procedures with SSI (%): 3.39	SIR: 1.896

*SIR values only calculated if expected infections ≥ 1

Laminectomy Surgery



2011 SSIs: 2	Procedures: 332	Procedures with SSI (%): 0.60	SIR: 0.628
2012 SSIs: 1	Procedures: 271	Procedures with SSI (%): 0.37	SIR: 0.282

Legacy Good Samaritan Hospital and Medical Center

Location: Portland
 Ownership: Non Profit
 Med. School Affiliation: Graduate
 ICU Beds: 28
 Total Staffed Beds: 251
 2012 Admissions: 13,047
 2012 Patient Days: 53,298
 ICP FTE: 2



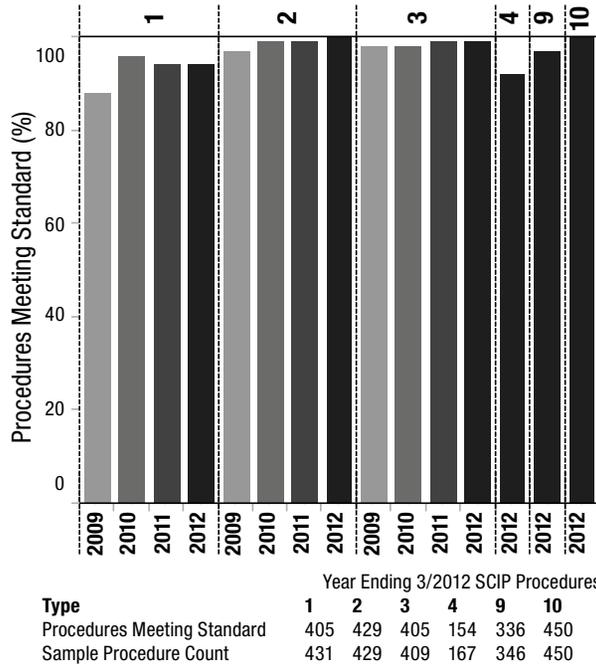
2009
 2010
 2011
 2012

If the vertical measurement line crosses 1.0 (is in both colors) then the infection rate is not significantly different than expected.

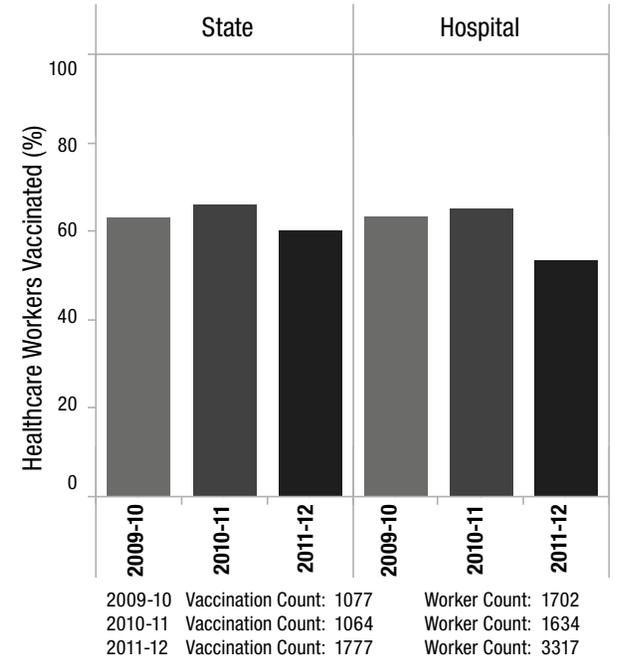
If the line is entirely in the color:

- More infections were observed than expected
- Fewer infections were observed than expected

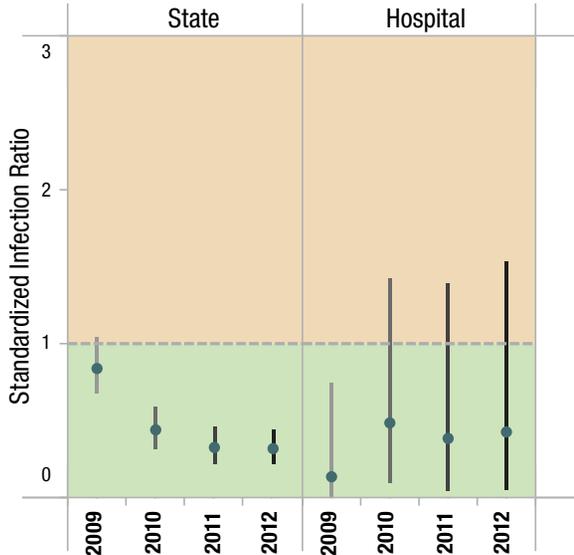
Surgical Care Improvement Project (SCIP) Process of Care Measures



Healthcare Worker Influenza Vaccination



Central Line Associated Bloodstream Infections (CLABSIs), Adult Medical/Surgical ICUs

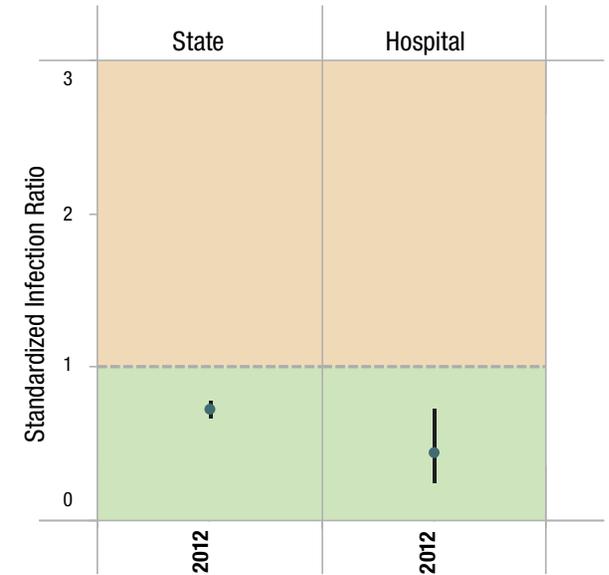


2009 CLABSIs: 1 CL Days: 4956 Rate per 1000 CL days: 0.20 SIR: 0.135
 2010 CLABSIs: 3 CL Days: 4121 Rate per 1000 CL days: 0.73 SIR: 0.485
 2011 CLABSIs: 2 CL Days: 3474 Rate per 1000 CL days: 0.58 SIR: 0.384
 2012 CLABSIs: 2 CL Days: 3130 Rate per 1000 CL days: 0.64 SIR: 0.426

Central Line Associated Bloodstream Infections (CLABSIs), Neonatal ICUs

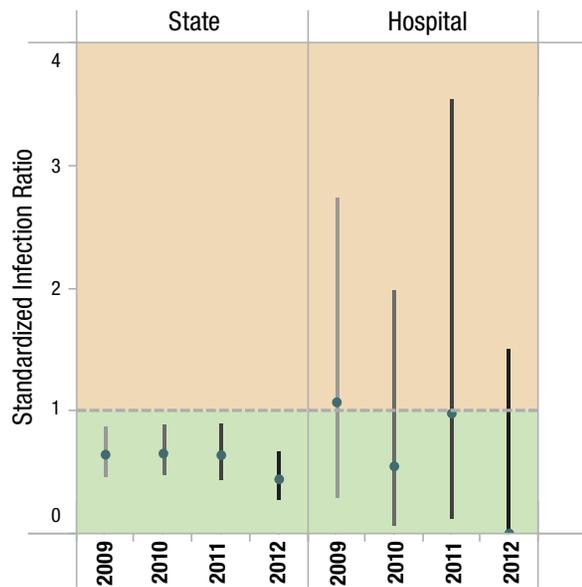
Hospital does not have a NICU

Incident Clostridium difficile Infections



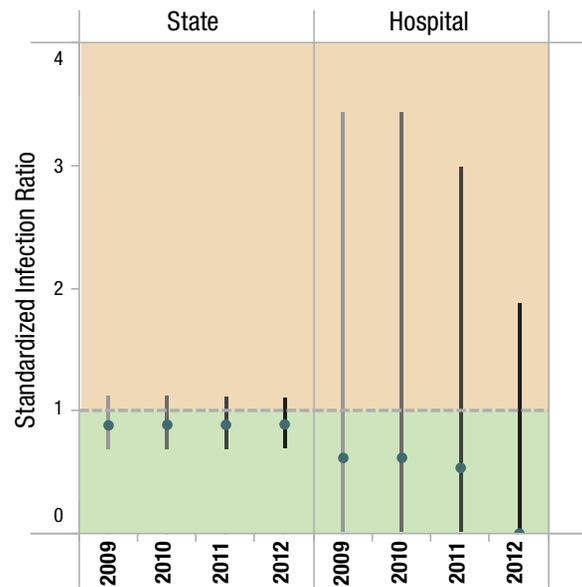
2012 Infections: 15 Patient-Days: 52964 Rate/1000 pt-days: 0.28 SIR: 0.443

Coronary Artery Bypass Graft Surgery



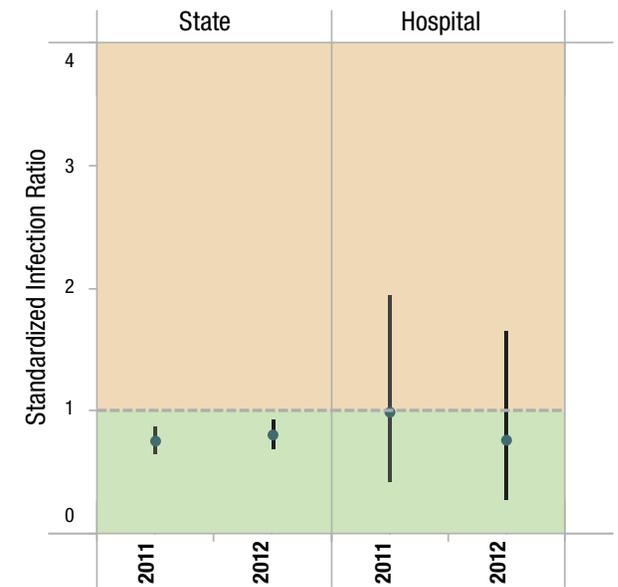
Year	SSIs	Procedures	Procedures with SSI (%)	SIR
2009	4	197	2.03	1.069
2010	2	190	1.05	0.547
2011	2	110	1.82	0.978
2012	0	129	0.00	0.000

Knee Replacement Surgery



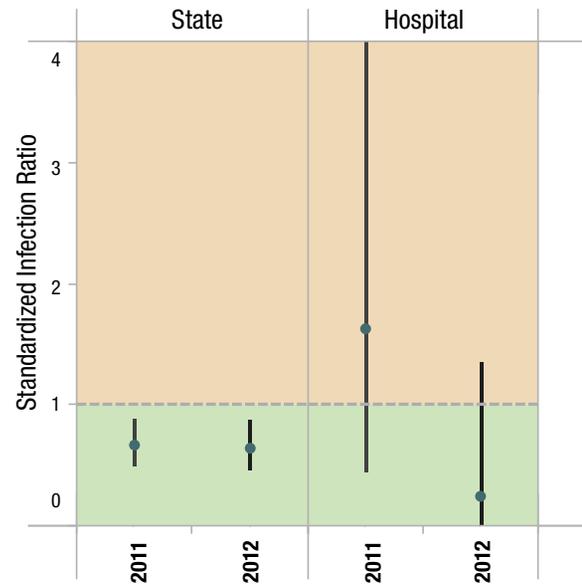
Year	SSIs	Procedures	Procedures with SSI (%)	SIR
2009	1	143	0.70	0.616
2010	1	160	0.63	0.617
2011	1	165	0.61	0.535
2012	0	169	0.00	0.000

Colon Surgery



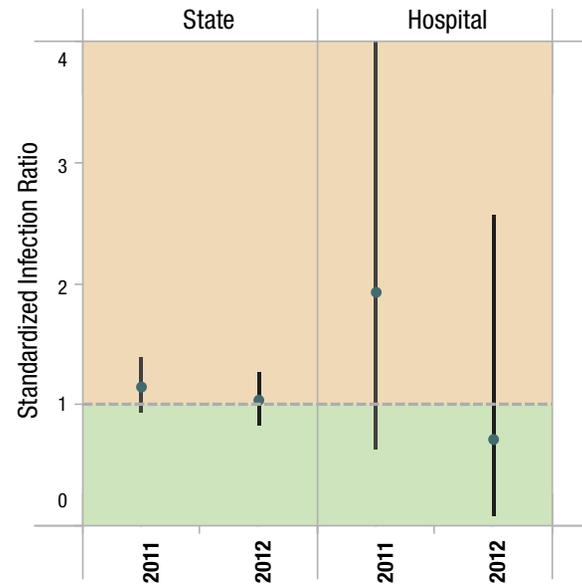
Year	SSIs	Procedures	Procedures with SSI (%)	SIR
2011	8	156	5.13	0.988
2012	6	144	4.17	0.760

Abdominal Hysterectomy Surgery



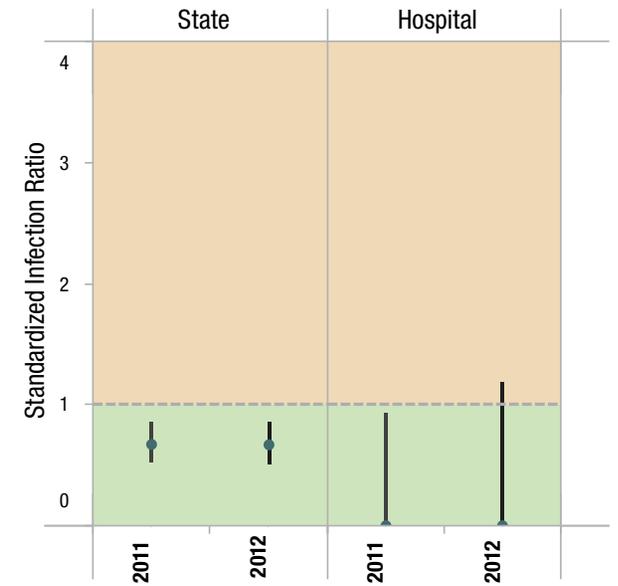
Year	SSIs	Procedures	Procedures with SSI (%)	SIR
2011	4	139	2.88	1.626
2012	1	220	0.45	0.243

Hip Replacement Surgery



Year	SSIs	Procedures	Procedures with SSI (%)	SIR
2011	5	163	3.07	1.927
2012	2	162	1.23	0.712

Laminectomy Surgery



Year	SSIs	Procedures	Procedures with SSI (%)	SIR
2011	0	324	0.00	0.000
2012	0	336	0.00	0.000

Legacy Meridian Park

Location: Tualatin
 Ownership: Non Profit
 Med. School Affiliation: No
 ICU Beds: 16
 Total Staffed Beds: 128
 2012 Admissions: 7,917
 2012 Patient Days: 27,000
 ICP FTE: 1



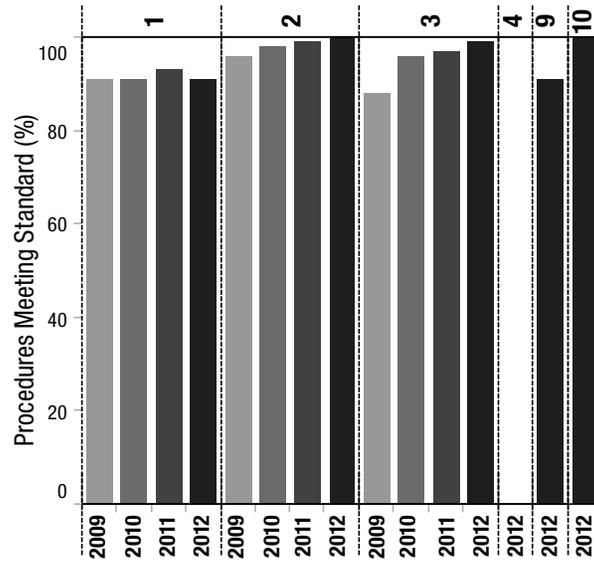
2009 2010 2011 2012

If the vertical measurement line crosses 1.0 (is in both colors) then the infection rate is not significantly different than expected.

If the line is entirely in the color:

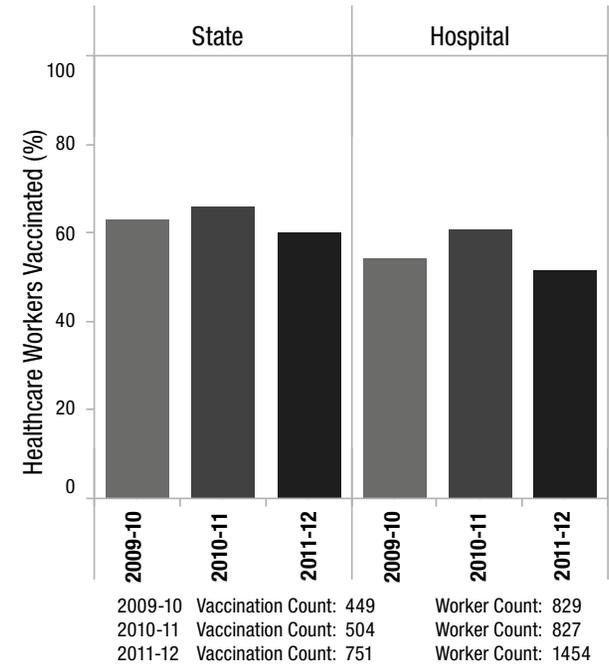
- More infections were observed than expected
- Fewer infections were observed than expected

Surgical Care Improvement Project (SCIP) Process of Care Measures

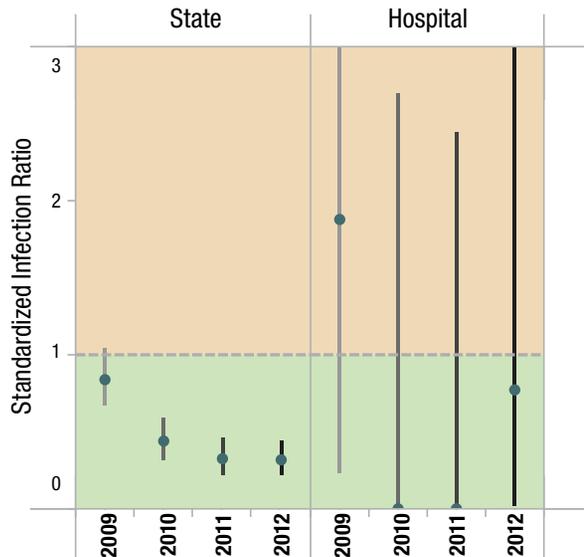


Type	Year Ending 3/2012 SCIP Procedures					
	1	2	3	4	9	10
Procedures Meeting Standard	226	244	238	0	187	367
Sample Procedure Count	248	244	240	0	205	367

Healthcare Worker Influenza Vaccination



Central Line Associated Bloodstream Infections (CLABSIs), Adult Medical/Surgical ICUs

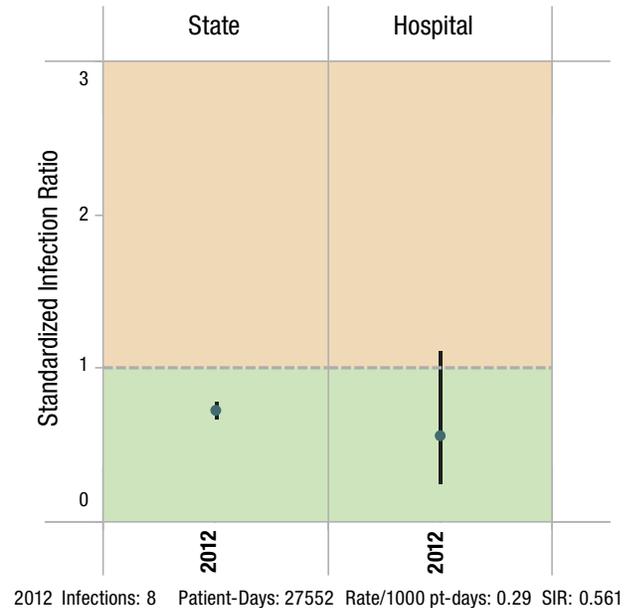


2009	CLABSIs: 2	CL Days: 710	Rate per 1000 CL days: 2.82	SIR: 1.878
2010	CLABSIs: 0	CL Days: 911	Rate per 1000 CL days: 0.00	SIR: 0.000
2011	CLABSIs: 0	CL Days: 1008	Rate per 1000 CL days: 0.00	SIR: 0.000
2012	CLABSIs: 1	CL Days: 864	Rate per 1000 CL days: 1.16	SIR: 0.772

Central Line Associated Bloodstream Infections (CLABSIs), Neonatal ICUs

Hospital does not have a NICU

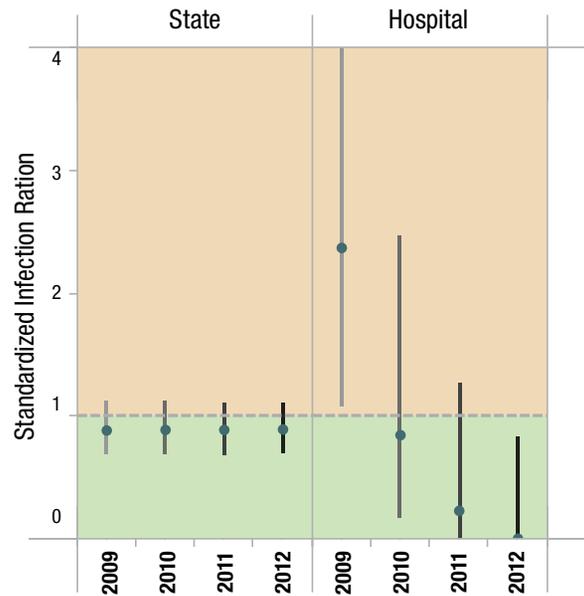
Incident Clostridium difficile Infections



Coronary Artery Bypass Graft Surgery

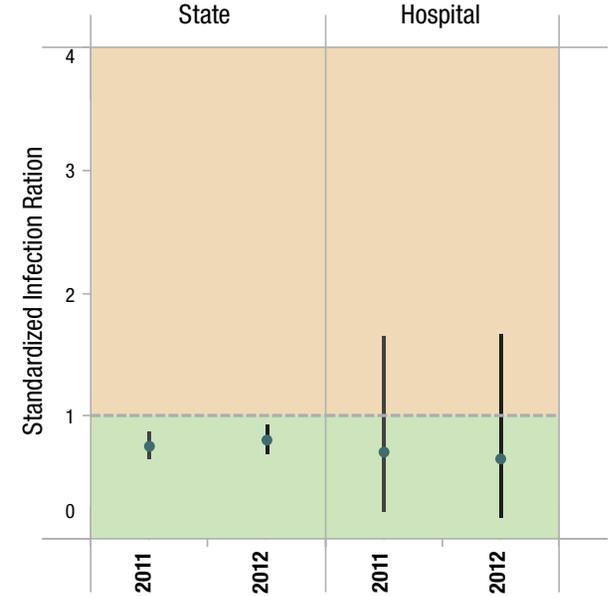
Hospital does not perform this procedure

Knee Replacement Surgery



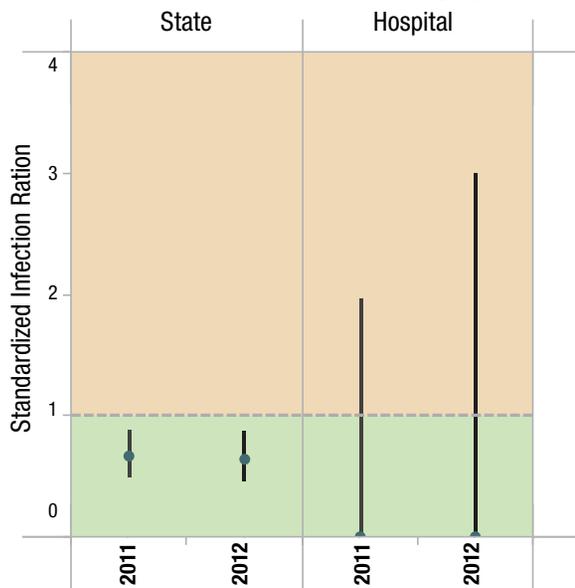
2009 SSIs: 9 Procedures: 412 Procedures with SSI (%): 2.18 SIR: 2.367
 2010 SSIs: 3 Procedures: 377 Procedures with SSI (%): 0.80 SIR: 0.843
 2011 SSIs: 1 Procedures: 481 Procedures with SSI (%): 0.21 SIR: 0.227
 2012 SSIs: 0 Procedures: 519 Procedures with SSI (%): 0.00 SIR: 0.000

Colon Surgery



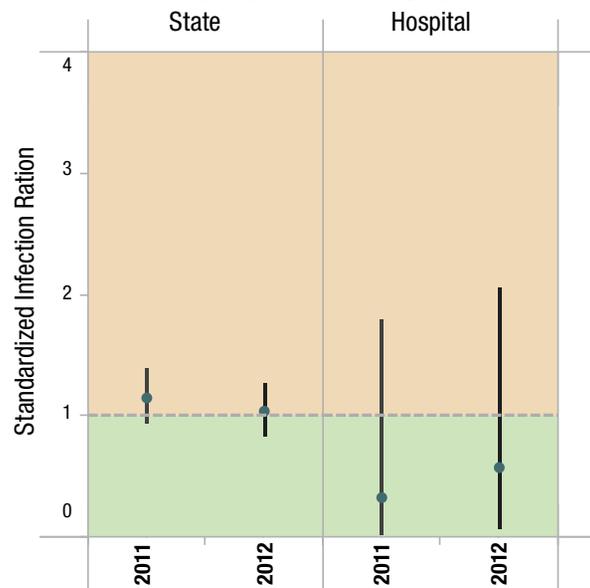
2011 SSIs: 5 Procedures: 132 Procedures with SSI (%): 3.79 SIR: 0.705
 2012 SSIs: 4 Procedures: 113 Procedures with SSI (%): 3.54 SIR: 0.650

Abdominal Hysterectomy Surgery



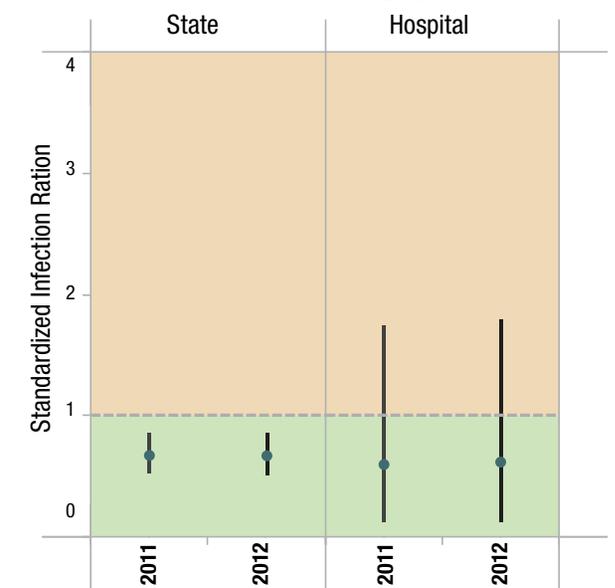
2011 SSIs: 0 Procedures: 100 Procedures with SSI (%): 0.00 SIR: 0.000
 2012 SSIs: 0 Procedures: 73 Procedures with SSI (%): 0.00 SIR: 0.000

Hip Replacement Surgery



2011 SSIs: 1 Procedures: 270 Procedures with SSI (%): 0.37 SIR: 0.323
 2012 SSIs: 2 Procedures: 335 Procedures with SSI (%): 0.60 SIR: 0.571

Laminectomy Surgery



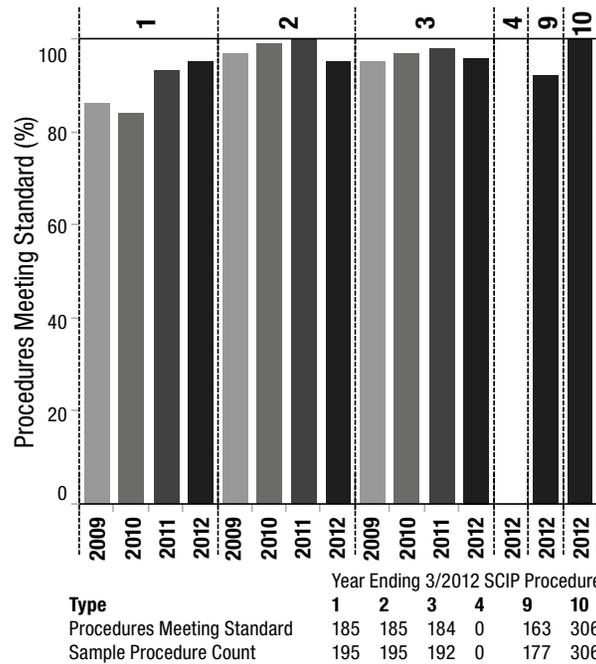
2011 SSIs: 3 Procedures: 553 Procedures with SSI (%): 0.54 SIR: 0.596
 2012 SSIs: 3 Procedures: 555 Procedures with SSI (%): 0.54 SIR: 0.616

Legacy Mt. Hood Medical Center

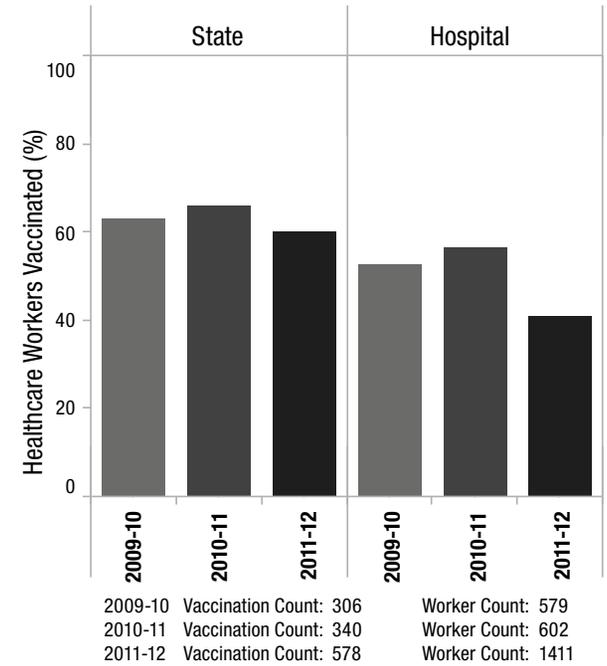
Location: Gresham
 Ownership: Non Profit
 Med. School Affiliation: None
 ICU Beds: 10
 Total Staffed Beds: 101
 2012 Admissions: 5,936
 2012 Patient Days: 17,238
 ICP FTE: 1



Surgical Care Improvement Project (SCIP) Process of Care Measures

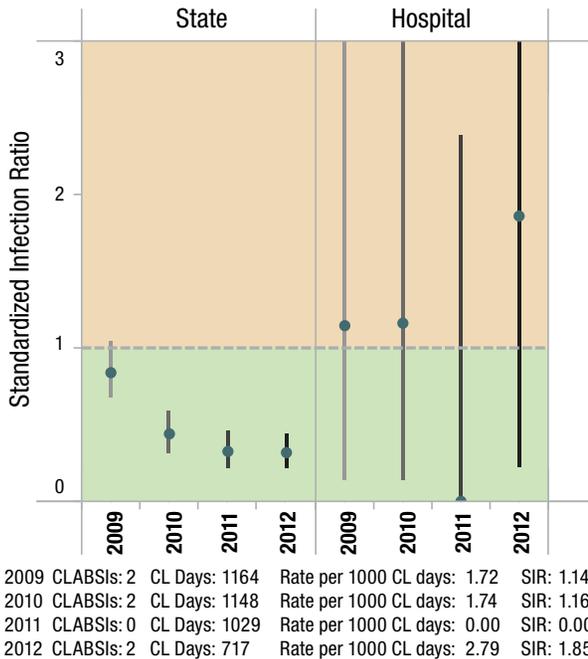


Healthcare Worker Influenza Vaccination



If the vertical measurement line crosses 1.0 (is in both colors) then the infection rate is not significantly different than expected.
 If the line is entirely in the color:
 More infections were observed than expected
 Fewer infections were observed than expected

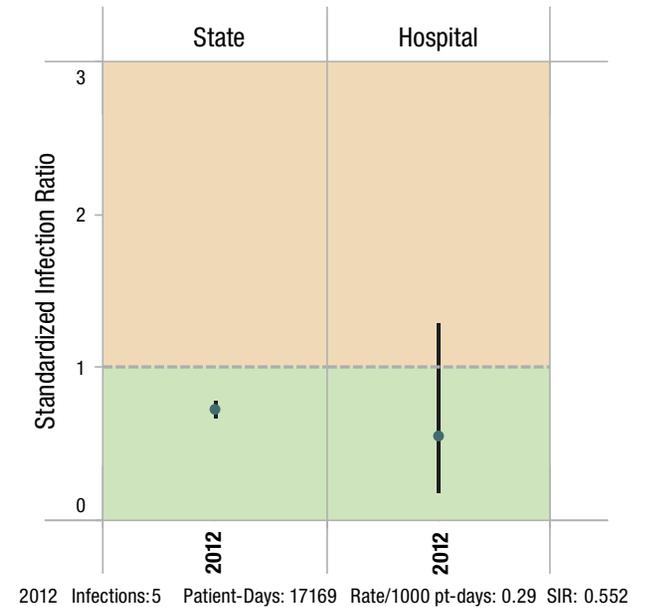
Central Line Associated Bloodstream Infections (CLABSIs), Adult Medical/Surgical ICUs



Central Line Associated Bloodstream Infections (CLABSIs), Neonatal ICUs

Hospital does not have a NICU

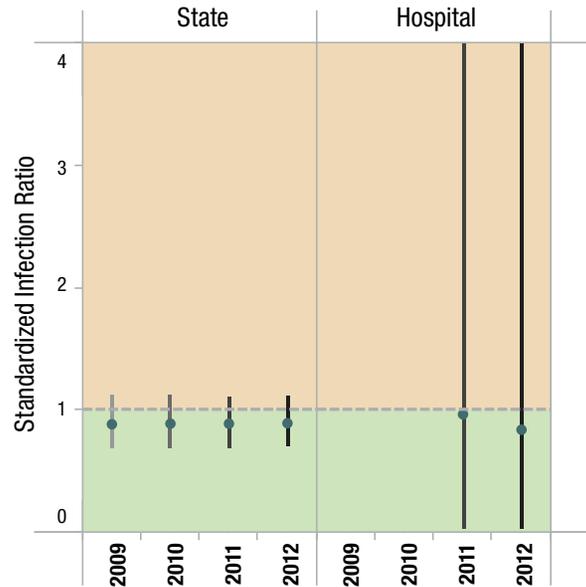
Incident Clostridium difficile Infections



Coronary Artery Bypass Graft Surgery

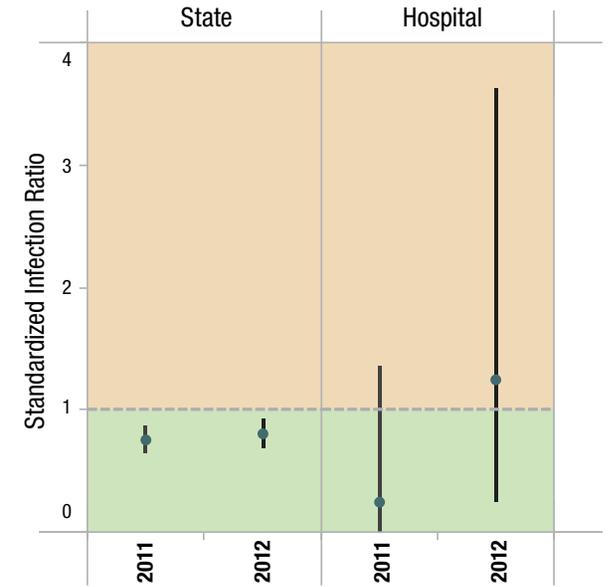
Hospital does not perform this procedure

Knee Replacement Surgery



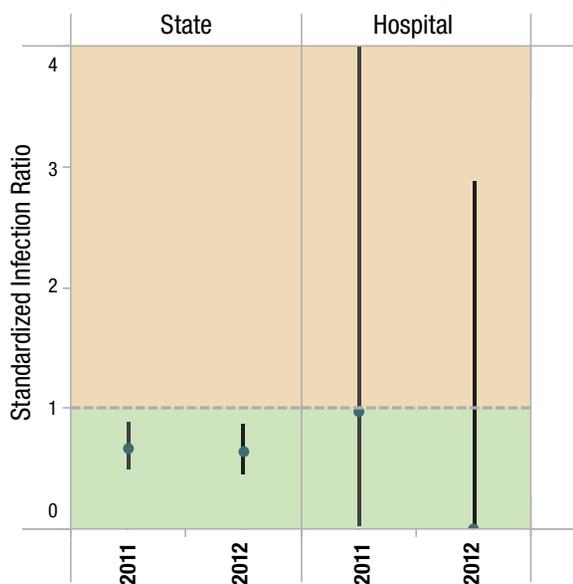
2009 SSIs: 1 Procedures: 92 Procedures with SSI (%): 1.09 SIR: *
 2010 SSIs: 1 Procedures: 87 Procedures with SSI (%): 1.15 SIR: *
 2011 SSIs: 1 Procedures: 107 Procedures with SSI (%): 0.93 SIR: 0.962
 2012 SSIs: 1 Procedures: 134 Procedures with SSI (%): 0.75 SIR: 0.836
 *SIR values only calculated if expected infections ≥ 1

Colon Surgery



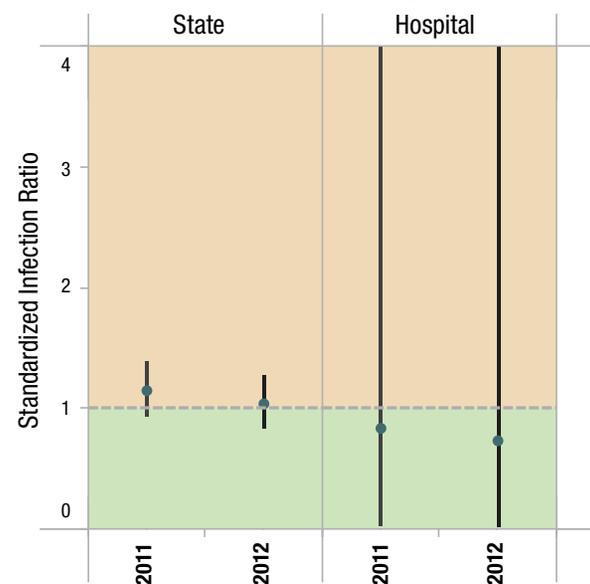
2011 SSIs: 1 Procedures: 58 Procedures with SSI (%): 1.72 SIR: 0.244
 2012 SSIs: 3 Procedures: 35 Procedures with SSI (%): 8.57 SIR: 1.244

Abdominal Hysterectomy Surgery



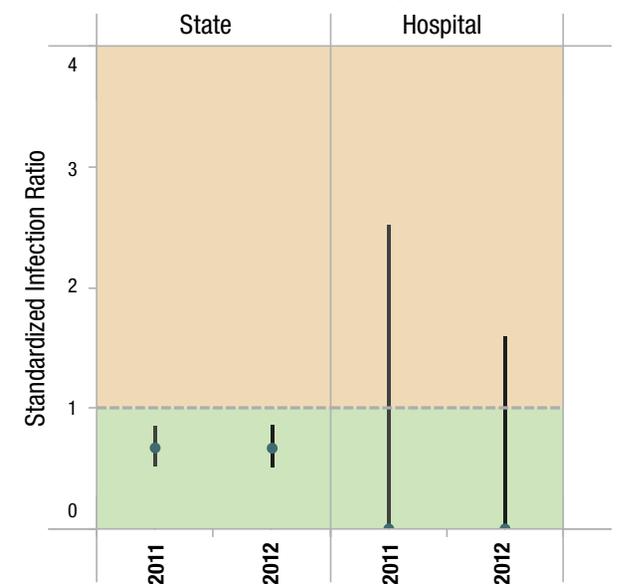
2011 SSIs: 1 Procedures: 58 Procedures with SSI (%): 1.72 SIR: 0.971
 2012 SSIs: 0 Procedures: 61 Procedures with SSI (%): 0.00 SIR: 0.000

Hip Replacement Surgery



2011 SSIs: 1 Procedures: 86 Procedures with SSI (%): 1.16 SIR: 0.833
 2012 SSIs: 1 Procedures: 98 Procedures with SSI (%): 1.02 SIR: 0.730

Laminectomy Surgery



2011 SSIs: 0 Procedures: 128 Procedures with SSI (%): 0.00 SIR: 0.000
 2012 SSIs: 0 Procedures: 208 Procedures with SSI (%): 0.00 SIR: 0.000

Lower Umpqua Hospital

Location:	Reedsport	
Ownership:	Non Profit	
Med. School Affiliation:	Undergraduate	
ICU Beds:	2	
Total Staffed Beds:	18	
2012 Admissions:	553	
2012 Patient Days:	1,434	
ICP FTE:	1	

2009
 2010
 2011
 2012

If the vertical measurement line crosses 1.0 (is in both colors) then the infection rate is not significantly different than expected.

If the line is entirely in the color:

- More infections were observed than expected
- Fewer infections were observed than expected

Central Line Associated Bloodstream Infections (CLABSIs), Adult Medical/Surgical ICUs

Hospital does not perform this procedure

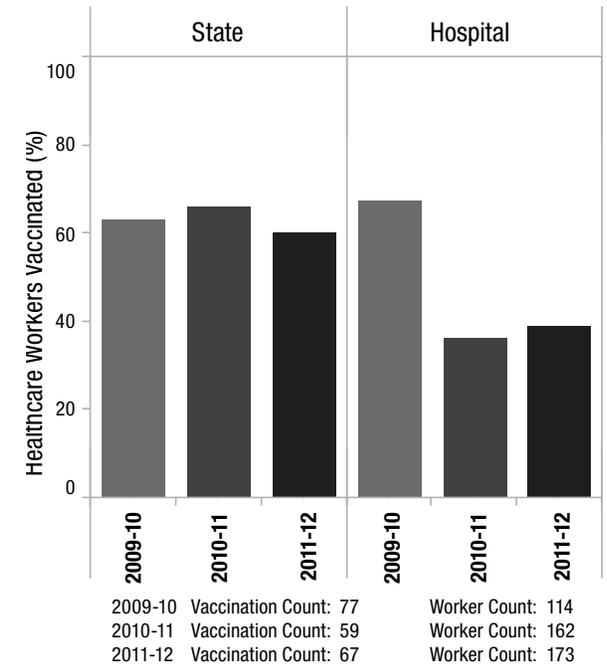
Surgical Care Improvement Project (SCIP) Process of Care Measures

Too few procedures to report

Central Line Associated Bloodstream Infections (CLABSIs), Neonatal ICUs

Hospital does not have a NICU

Healthcare Worker Influenza Vaccination



Incident *Clostridium difficile* Infections

**SIR values only calculated if expected infections ≥ 1*

Coronary Artery Bypass Graft Surgery

Hospital does not perform this procedure

Knee Replacement Surgery

**SIR values only calculated if expected infections ≥ 1*

Colon Surgery

Too few procedures to report

2009 SSIs: 0	Procedures: 7	Procedures with SSIs (%): 0.00	SIR: *
2010 SSIs: 0	Procedures: 14	Procedures with SSIs (%): 0.00	SIR: *
2011 SSIs: 0	Procedures: 24	Procedures with SSIs (%): 0.00	SIR: *
2012 SSIs: 0	Procedures: 9	Procedures with SSIs (%): 0.00	SIR: *

Abdominal Hysterectomy Surgery

Too few procedures to report

Hip Replacement Surgery

Too few procedures to report

Laminectomy Surgery

Hospital does not perform this procedure

McKenzie-Willamette Medical Center

Location: Springfield
 Ownership: For Profit
 Med. School Affiliation: No
 ICU Beds: 22
 Total Staffed Beds: 113
 2012 Admissions: 6,930
 2012 Patient Days: 22,247
 ICP FTE: 1



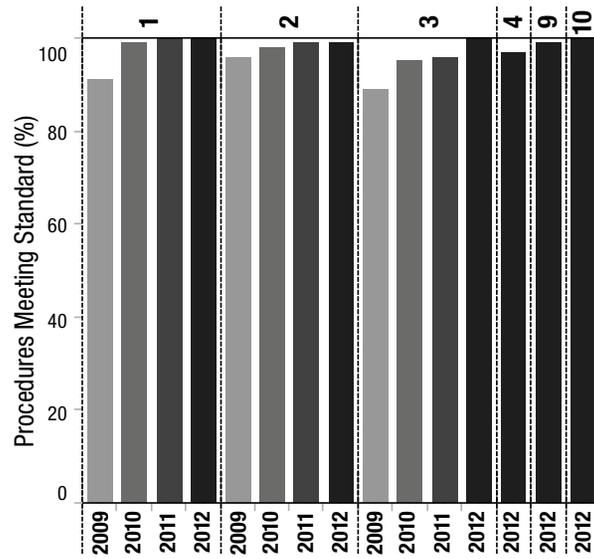
■ 2009 ■ 2010 ■ 2011 ■ 2012

If the vertical measurement line crosses 1.0 (is in both colors) then the infection rate is not significantly different than expected.

If the line is entirely in the color:

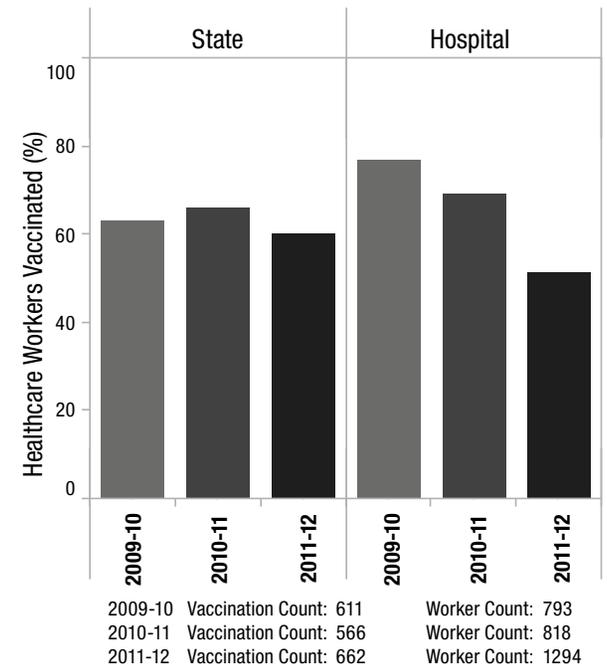
■ More infections were observed than expected
 ■ Fewer infections were observed than expected

Surgical Care Improvement Project (SCIP) Process of Care Measures

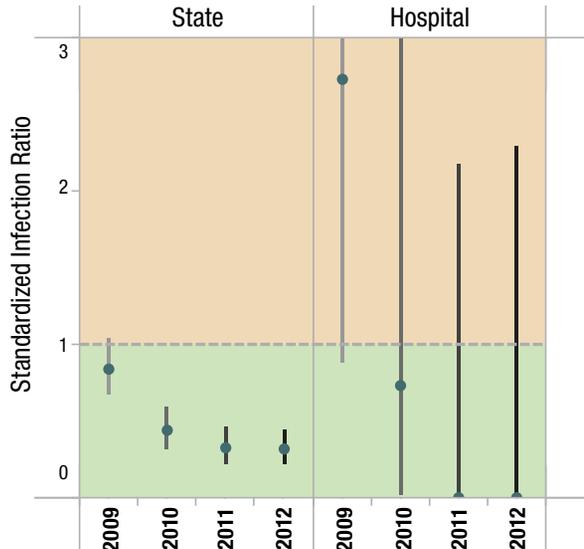


Type	Year Ending 3/2012 SCIP Procedures					
	1	2	3	4	9	10
Procedures Meeting Standard	573	569	547	101	474	736
Sample Procedure Count	573	575	547	104	479	736

Healthcare Worker Influenza Vaccination



Central Line Associated Bloodstream Infections (CLABSIs), Adult Medical/Surgical ICUs

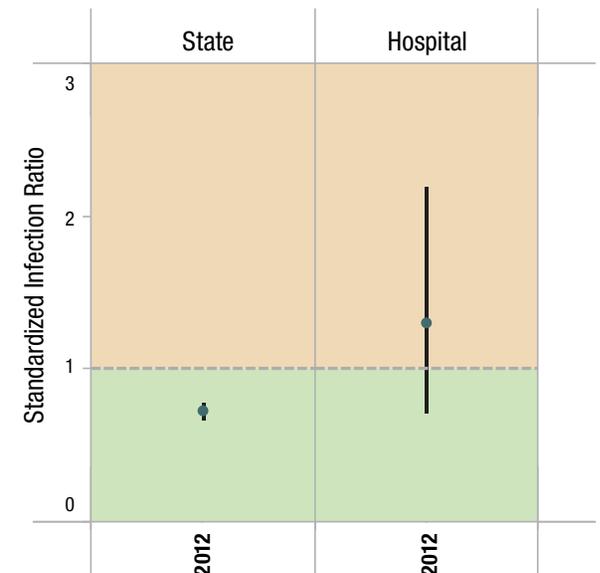


2009	CLABSIs: 5	CL Days: 1222	Rate per 1000 CL days: 4.09	SIR: 2.728
2010	CLABSIs: 1	CL Days: 912	Rate per 1000 CL days: 1.10	SIR: 0.731
2011	CLABSIs: 0	CL Days: 1129	Rate per 1000 CL days: 0.00	SIR: 0.000
2012	CLABSIs: 0	CL Days: 1070	Rate per 1000 CL days: 0.00	SIR: 0.000

Central Line Associated Bloodstream Infections (CLABSIs), Neonatal ICUs

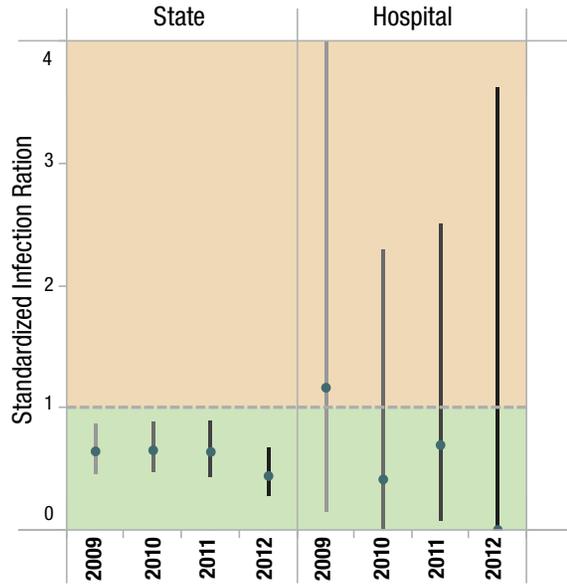
Hospital does not have a NICU

Incident Clostridium difficile Infections



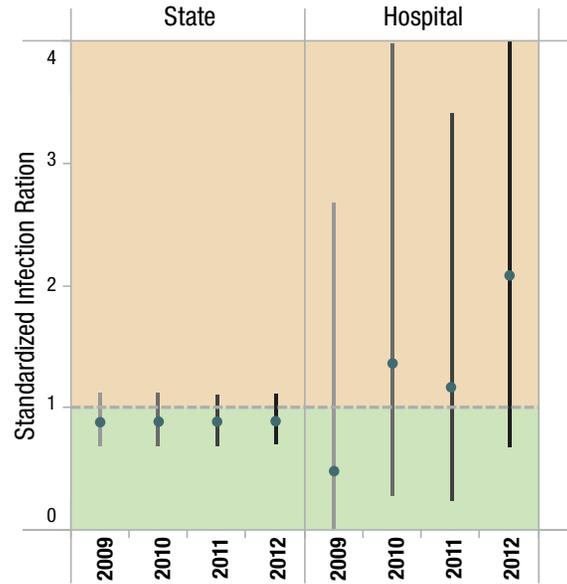
2012 Infections: 14 Patient-Days: 20862 Rate/1000 pt-days: 0.67 SIR: 1.301

Coronary Artery Bypass Graft Surgery



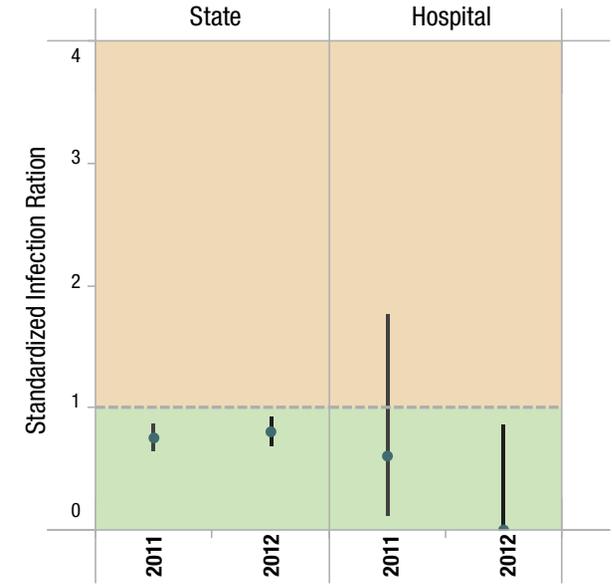
Year	SSIs	Procedures	Procedures with SSI (%)	SIR
2009	2	60	3.33	1.163
2010	1	80	1.25	0.413
2011	2	98	2.04	0.694
2012	0	41	0.00	0.000

Knee Replacement Surgery



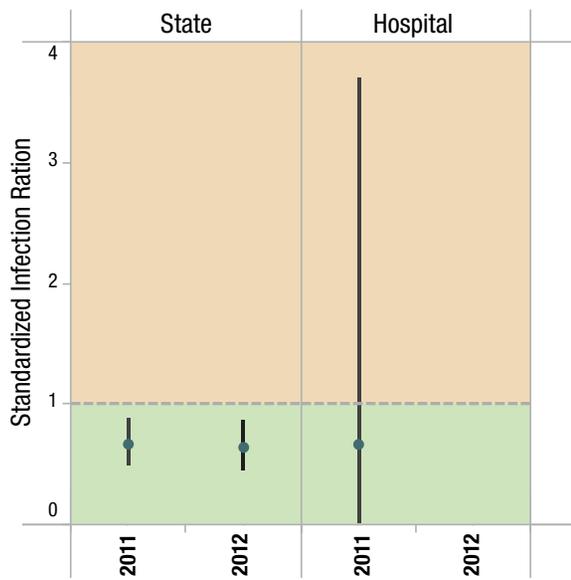
Year	SSIs	Procedures	Procedures with SSI (%)	SIR
2009	1	231	0.43	0.481
2010	3	238	1.26	1.362
2011	3	286	1.05	1.167
2012	5	260	1.92	2.081

Colon Surgery



Year	SSIs	Procedures	Procedures with SSI (%)	SIR
2011	3	85	3.53	0.604
2012	0	71	0.00	0.000

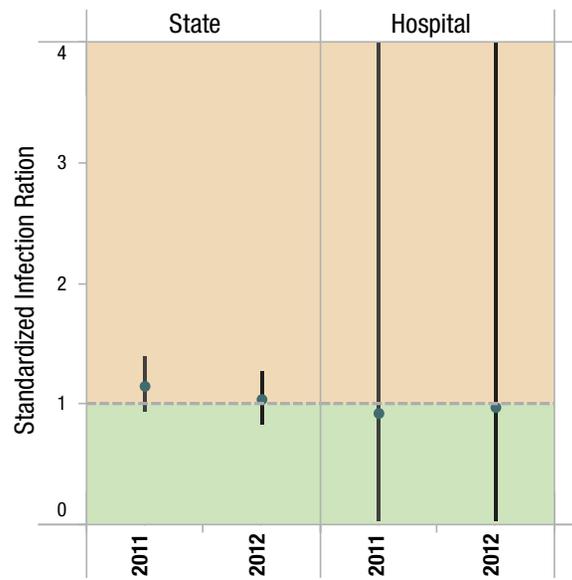
Abdominal Hysterectomy Surgery



Year	SSIs	Procedures	Procedures with SSI (%)	SIR
2011	1	77	1.30	0.664
2012	1	53	1.89	*

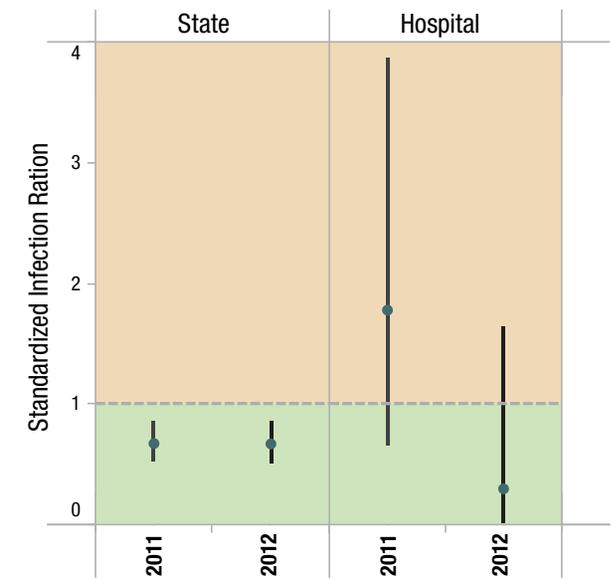
*SIR values only calculated if expected infections ≥ 1

Hip Replacement Surgery



Year	SSIs	Procedures	Procedures with SSI (%)	SIR
2011	1	84	1.19	0.921
2012	1	82	1.22	0.970

Laminectomy Surgery



Year	SSIs	Procedures	Procedures with SSI (%)	SIR
2011	6	301	1.99	1.777
2012	1	300	0.33	0.296

Mercy Medical Center

Location: Roseburg
 Ownership: Non Profit
 Med. School Affiliation: No
 ICU Beds: 16
 Total Staffed Beds: 174
 2012 Admissions: 8,131
 2012 Patient Days: 28,014
 ICP FTE: 1



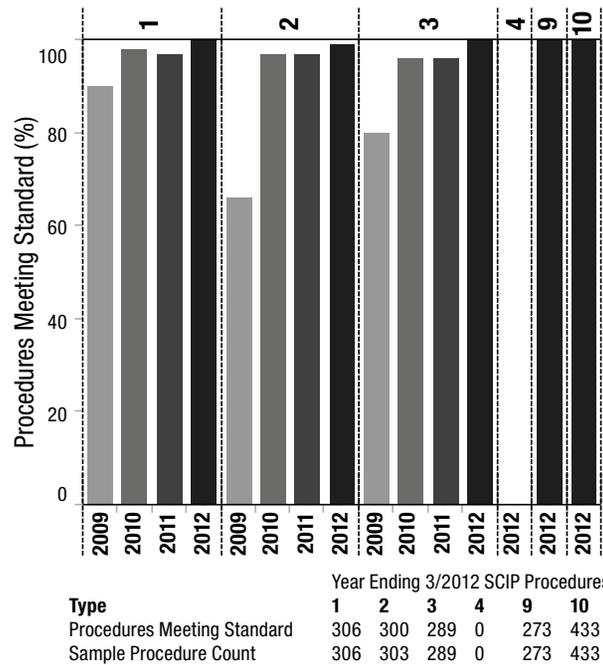
2009
 2010
 2011
 2012

If the vertical measurement line crosses 1.0 (is in both colors) then the infection rate is not significantly different than expected.

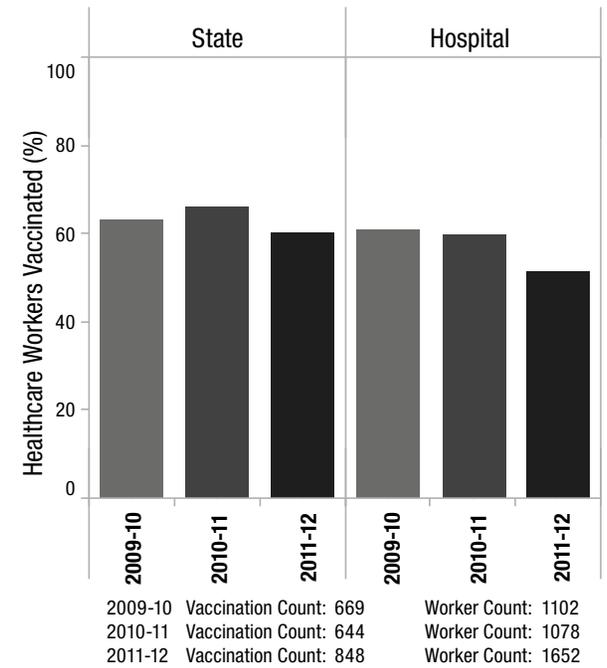
If the line is entirely in the color:

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- Fewer infections were observed than expected

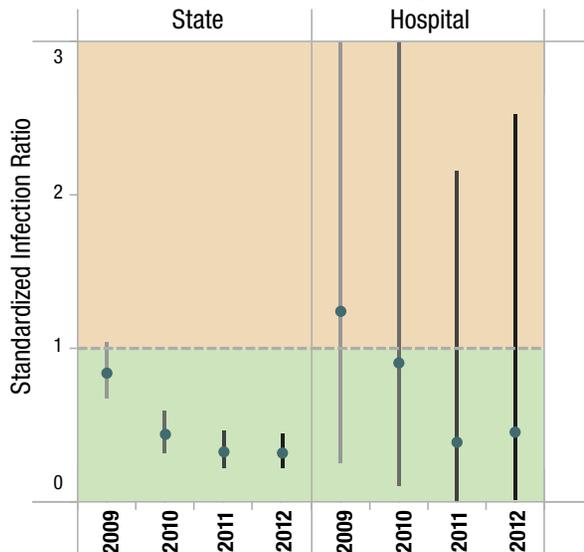
Surgical Care Improvement Project (SCIP) Process of Care Measures



Healthcare Worker Influenza Vaccination



Central Line Associated Bloodstream Infections (CLABSIs), Adult Medical/Surgical ICUs

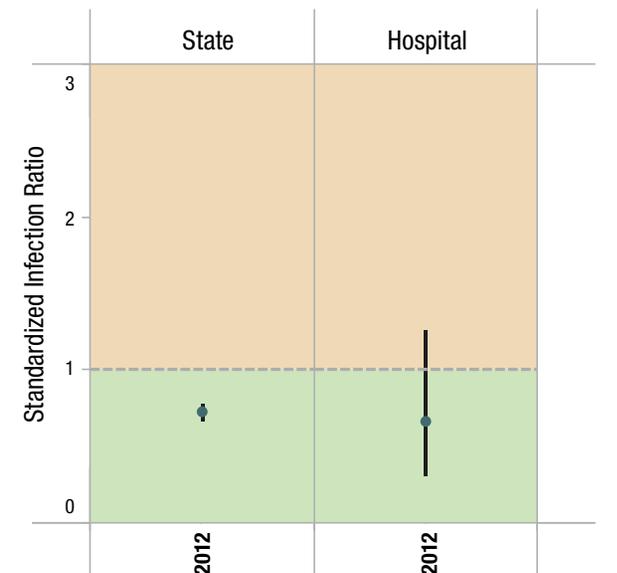


2009	CLABSIs: 3	CL Days: 1612	Rate per 1000 CL days: 1.86	SIR: 1.241
2010	CLABSIs: 2	CL Days: 1474	Rate per 1000 CL days: 1.36	SIR: 0.905
2011	CLABSIs: 1	CL Days: 1718	Rate per 1000 CL days: 0.58	SIR: 0.388
2012	CLABSIs: 1	CL Days: 1470	Rate per 1000 CL days: 0.68	SIR: 0.454

Central Line Associated Bloodstream Infections (CLABSIs), Neonatal ICUs

Hospital does not have a NICU

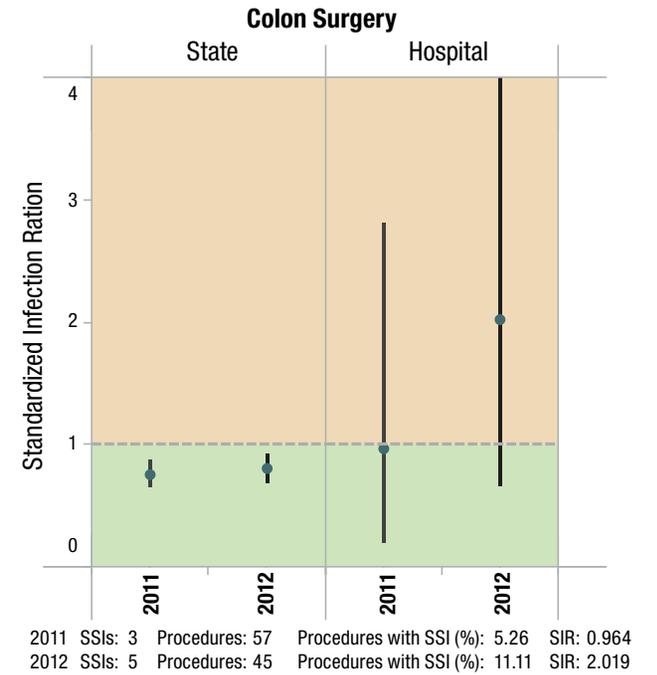
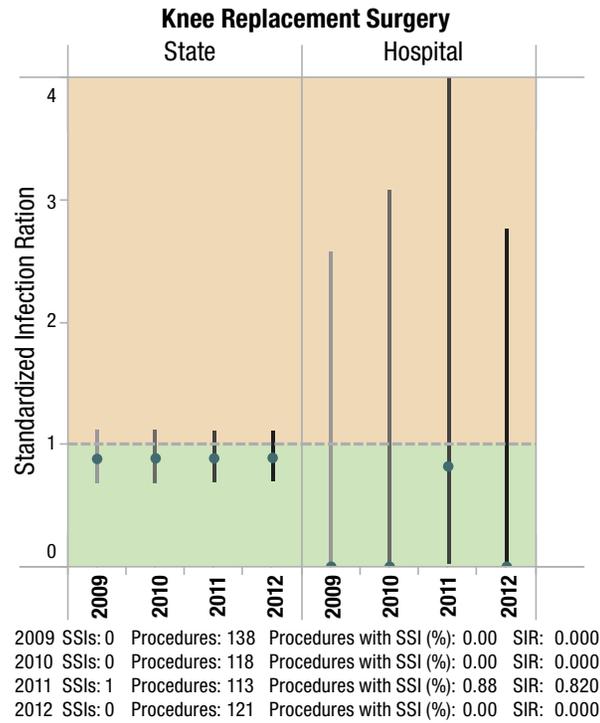
Incident *Clostridium difficile* Infections



2012 Infections: 9 Patient-Days: 26309 Rate/1000 pt-days: 0.34 SIR: 0.663

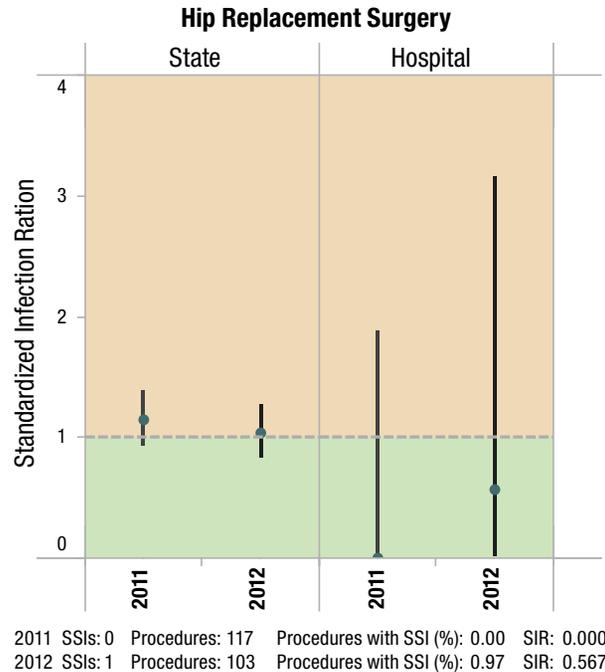
Coronary Artery Bypass Graft Surgery

Hospital does not perform this procedure



Abdominal Hysterectomy Surgery

**SIR values only calculated if expected infections ≥ 1*



Laminectomy Surgery

**SIR values only calculated if expected infections ≥ 1*

Year	SSIs	Procedures	Procedures with SSI (%)	SIR
2011	0	29	0.00	*
2012	0	29	0.00	*

Year	SSIs	Procedures	Procedures with SSI (%)	SIR
2011	0	50	0.00	*
2012	0	41	0.00	*

Mid-Columbia Medical Center

Location: The Dalles
 Ownership: Non Profit
 Med. School Affiliation: No
 ICU Beds: 6
 Total Staffed Beds: 49
 2012 Admissions: 2,425
 2012 Patient Days: 7,091
 ICP FTE: 1



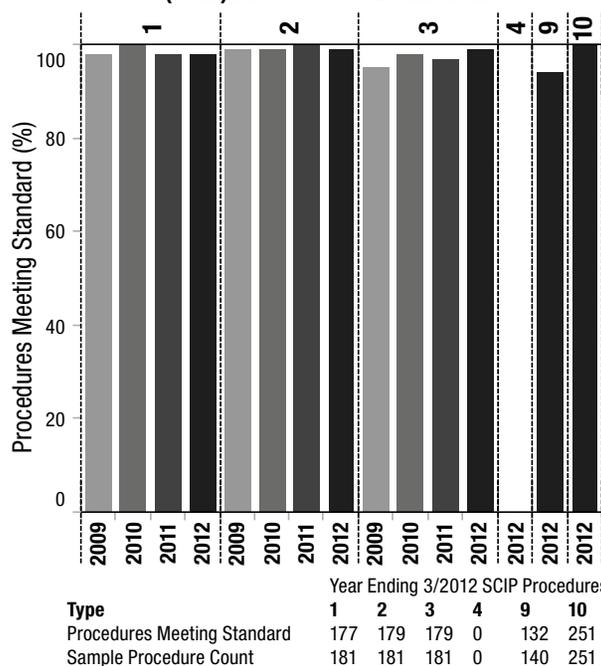
2009 2010 2011 2012

If the vertical measurement line crosses 1.0 (is in both colors) then the infection rate is not significantly different than expected.

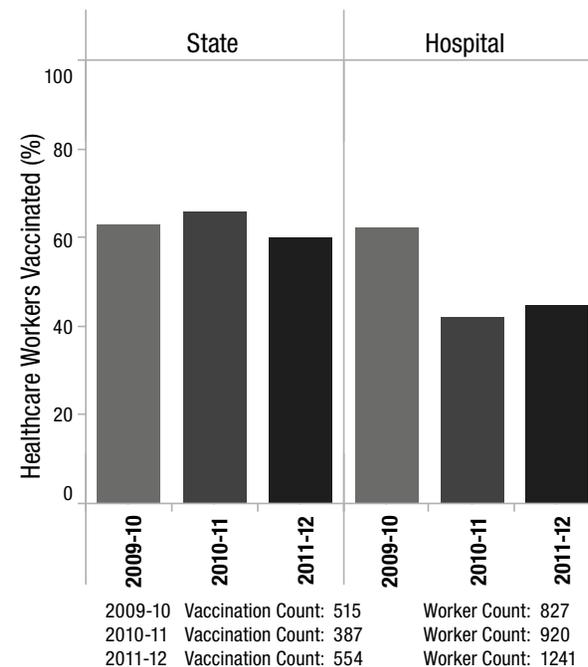
If the line is entirely in the color:

- More infections were observed than expected
- Fewer infections were observed than expected

Surgical Care Improvement Project (SCIP) Process of Care Measures



Healthcare Worker Influenza Vaccination



Central Line Associated Bloodstream Infections (CLABSIs), Adult Medical/Surgical ICUs

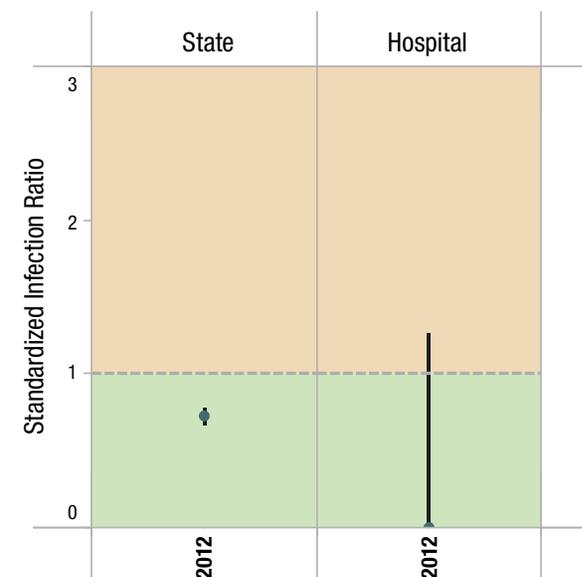
**SIR values only calculated if expected infections ≥ 1*

2009 CLABSIs: 0 CL Days: 288 Rate per 1000 CL days: 0.00 SIR: *
 2010 CLABSIs: 0 CL Days: 222 Rate per 1000 CL days: 0.00 SIR: *
 2011 CLABSIs: 0 CL Days: 312 Rate per 1000 CL days: 0.00 SIR: *
 2012 CLABSIs: 0 CL Days: 173 Rate per 1000 CL days: 0.00 SIR: *

Central Line Associated Bloodstream Infections (CLABSIs), Neonatal ICUs

Hospital does not have a NICU

Incident Clostridium difficile Infections



2012 Infections: 0 Patient-Days: 6473 Rate/1000 pt-days: 0.00 SIR: 0.000

Coronary Artery Bypass Graft Surgery

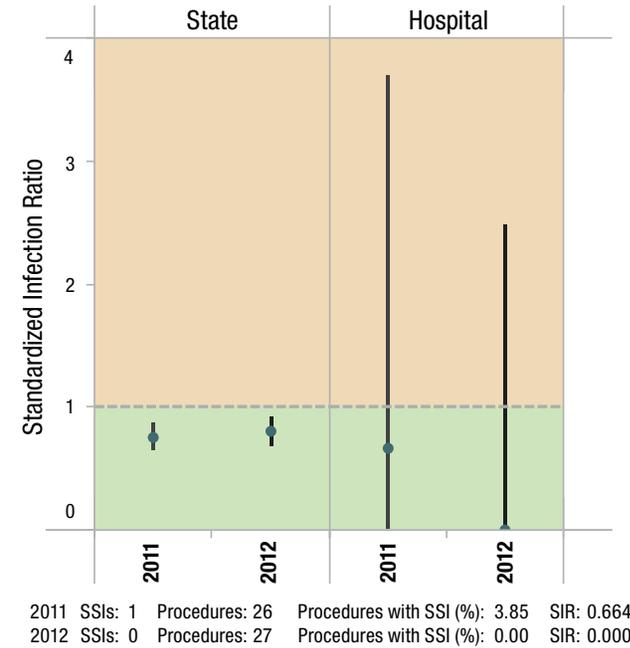
Hospital does not perform this procedure

Knee Replacement Surgery

**SIR values only calculated if expected infections ≥ 1*

2009 SSIs: 3	Procedures: 56	Procedures with SSI (%): 5.36	SIR: *
2010 SSIs: 1	Procedures: 68	Procedures with SSI (%): 1.47	SIR: *
2011 SSIs: 0	Procedures: 87	Procedures with SSI (%): 0.00	SIR: *
2012 SSIs: 1	Procedures: 83	Procedures with SSI (%): 1.20	SIR: *

Colon Surgery



Abdominal Hysterectomy Surgery

**SIR values only calculated if expected infections ≥ 1*

Hip Replacement Surgery

**SIR values only calculated if expected infections ≥ 1*

2011 SSIs: 0	Procedures: 19	Procedures with SSI (%): 0.00	SIR: *
2012 SSIs: 2	Procedures: 31	Procedures with SSI (%): 6.45	SIR: *

Laminectomy Surgery

Too few procedures to report

2011 SSIs: 0	Procedures: 44	Procedures with SSI (%): 0.00	SIR: *
2012 SSIs: 2	Procedures: 35	Procedures with SSI (%): 5.71	SIR: *

Oregon Health & Science University Hospital

Location: Portland
 Ownership: Non Profit
 Med. School Affiliation: Major
 ICU Beds: 146
 Total Staffed Beds: 544
 2012 Admissions: 30,070
 2012 Patient Days: 159,306
 ICP FTE: 4



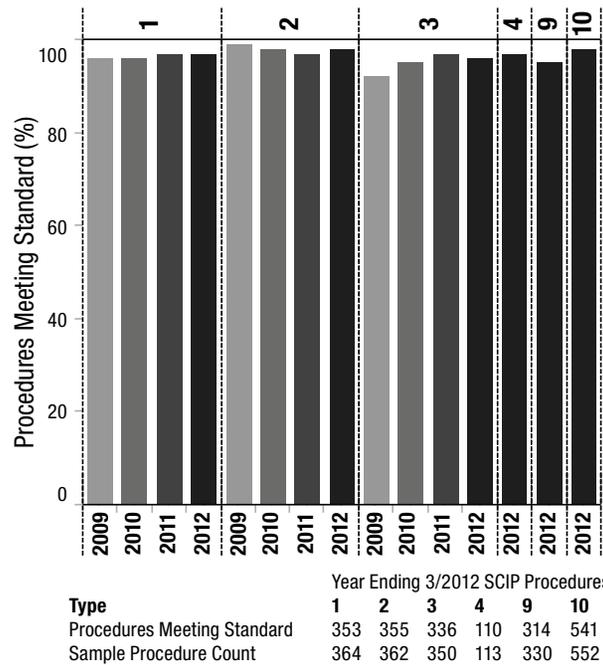
2009
 2010
 2011
 2012

If the vertical measurement line crosses 1.0 (is in both colors) then the infection rate is not significantly different than expected.

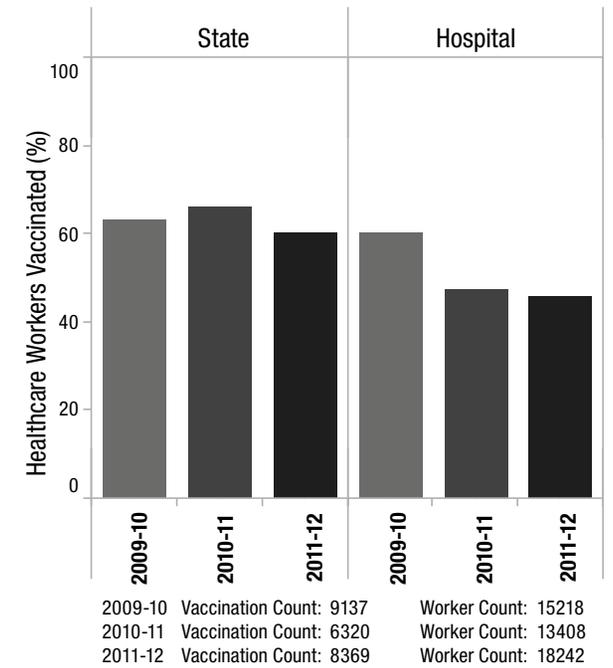
If the line is entirely in the color:

- More infections were observed than expected
- Fewer infections were observed than expected

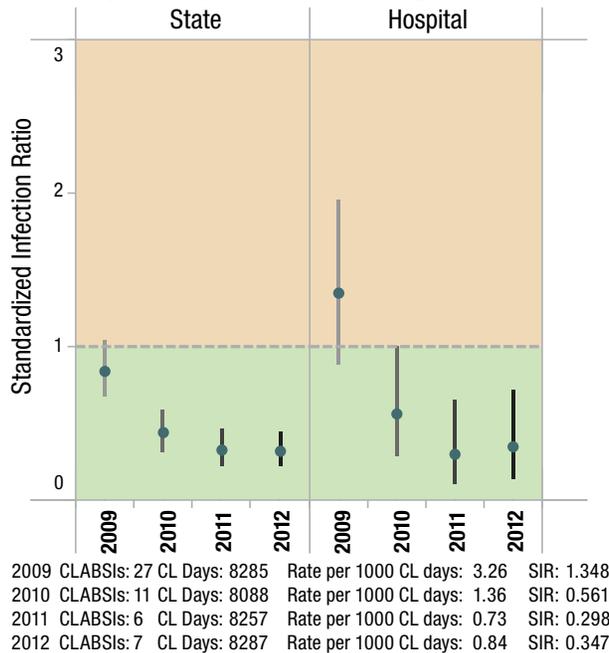
Surgical Care Improvement Project (SCIP) Process of Care Measures



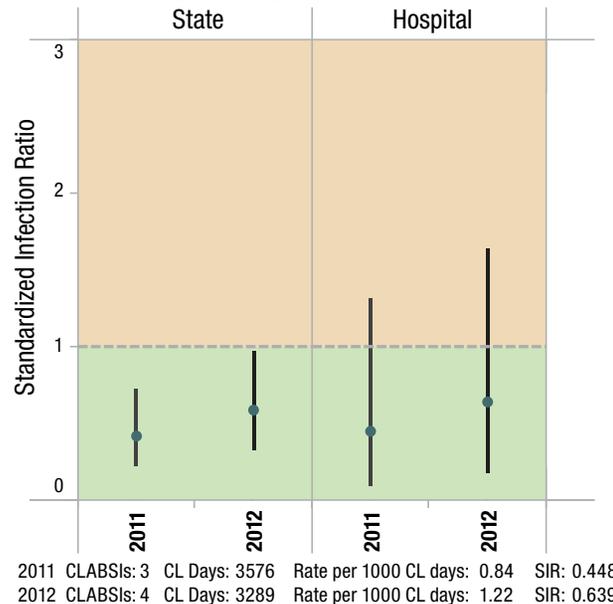
Healthcare Worker Influenza Vaccination



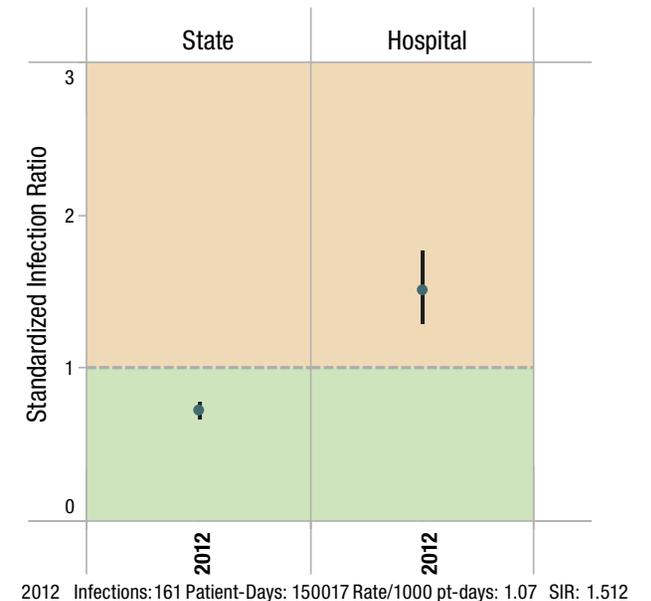
Central Line Associated Bloodstream Infections (CLABSIs), Adult Medical/Surgical ICUs



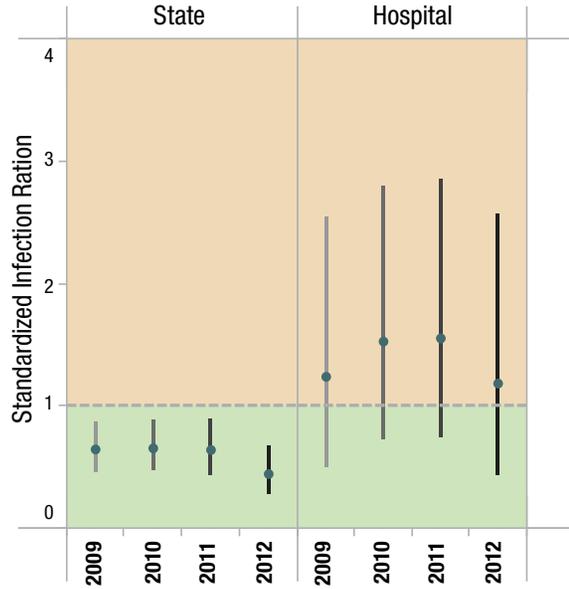
Central Line Associated Bloodstream Infections (CLABSIs), Neonatal ICUs



Incident Clostridium difficile Infections

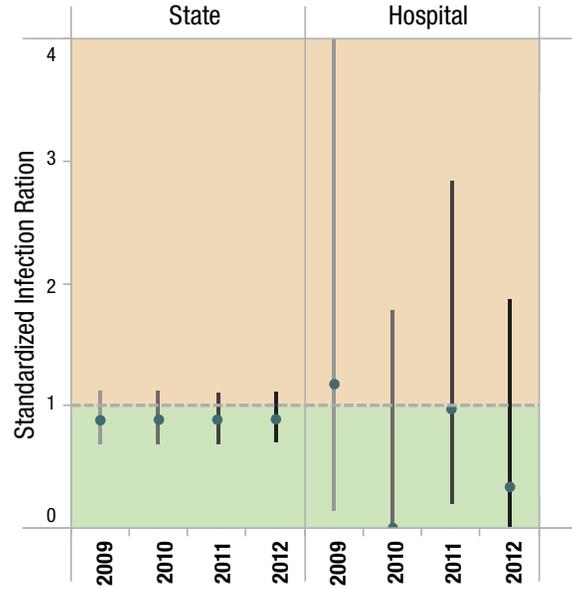


Coronary Artery Bypass Graft Surgery



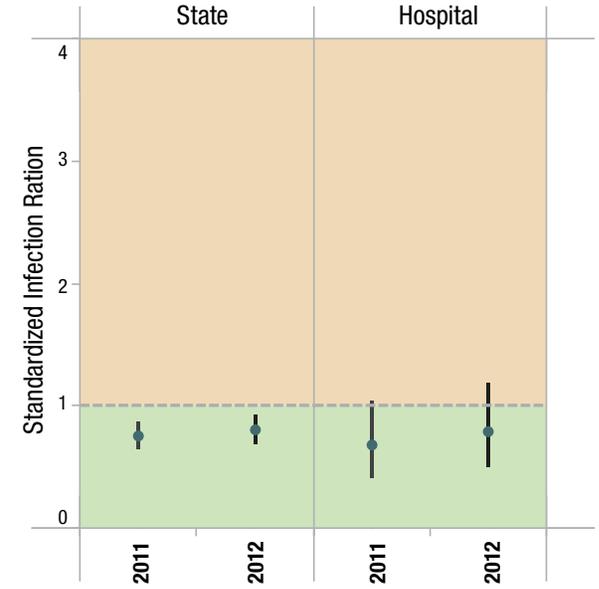
2009 SSIs: 7	Procedures: 243	Procedures with SSI (%): 2.88	SIR: 1.236
2010 SSIs: 10	Procedures: 268	Procedures with SSI (%): 3.73	SIR: 1.524
2011 SSIs: 10	Procedures: 269	Procedures with SSI (%): 3.72	SIR: 1.550
2012 SSIs: 6	Procedures: 228	Procedures with SSI (%): 2.63	SIR: 1.181

Knee Replacement Surgery



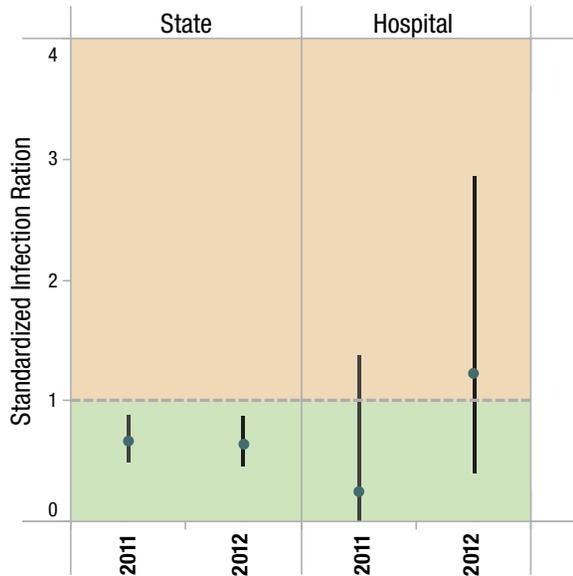
2009 SSIs: 2	Procedures: 136	Procedures with SSI (%): 1.47	SIR: 1.176
2010 SSIs: 0	Procedures: 173	Procedures with SSI (%): 0.00	SIR: 0.000
2011 SSIs: 3	Procedures: 248	Procedures with SSI (%): 1.21	SIR: 0.972
2012 SSIs: 1	Procedures: 283	Procedures with SSI (%): 0.35	SIR: 0.336

Colon Surgery



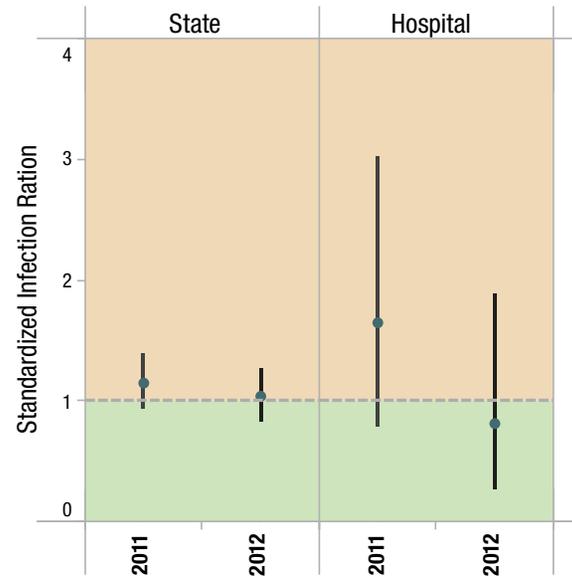
2011 SSIs: 20	Procedures: 358	Procedures with SSI (%): 5.59	SIR: 0.679
2012 SSIs: 23	Procedures: 394	Procedures with SSI (%): 5.84	SIR: 0.788

Abdominal Hysterectomy Surgery



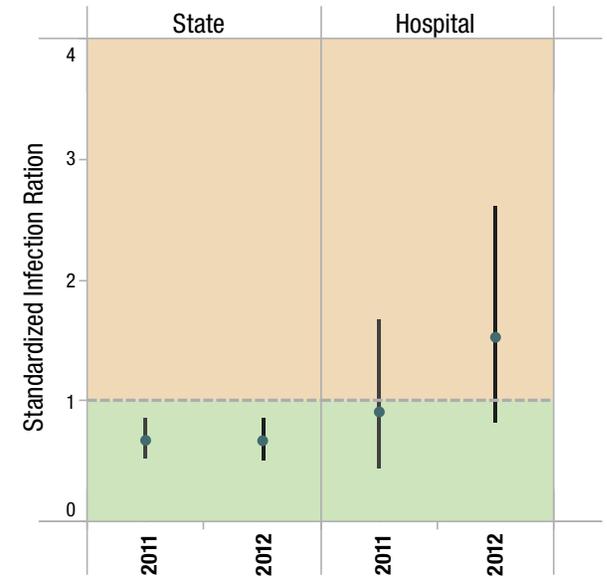
2011 SSIs: 1	Procedures: 143	Procedures with SSI (%): 0.70	SIR: 0.247
2012 SSIs: 5	Procedures: 196	Procedures with SSI (%): 2.55	SIR: 1.226

Hip Replacement Surgery



2011 SSIs: 10	Procedures: 331	Procedures with SSI (%): 3.02	SIR: 1.645
2012 SSIs: 5	Procedures: 368	Procedures with SSI (%): 1.36	SIR: 0.810

Laminectomy Surgery



2011 SSIs: 10	Procedures: 993	Procedures with SSI (%): 1.01	SIR: 0.907
2012 SSIs: 13	Procedures: 754	Procedures with SSI (%): 1.72	SIR: 1.525

Peace Harbor Hospital

Location: Florence
 Ownership: Non Profit
 Med. School Affiliation: None
 ICU Beds: 4
 Total Staffed Beds: 21
 2012 Admissions: 754
 2012 Patient Days: 4,186
 ICP FTE: 1



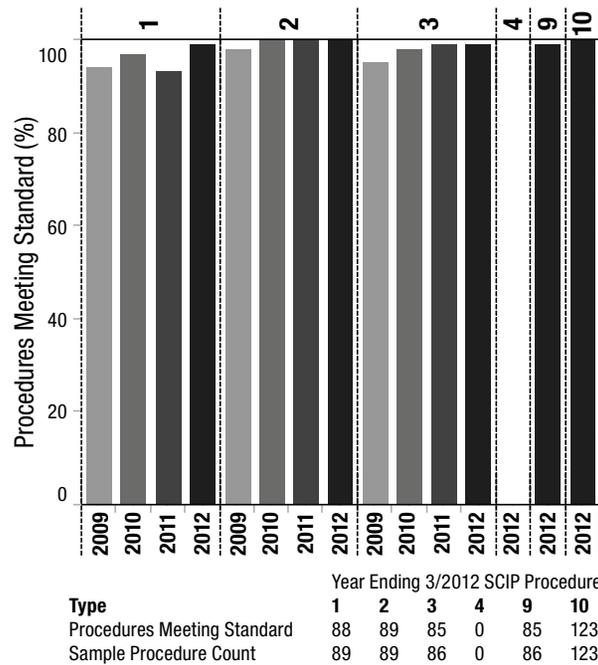
2009 2010 2011 2012

If the vertical measurement line crosses 1.0 (is in both colors) then the infection rate is not significantly different than expected.

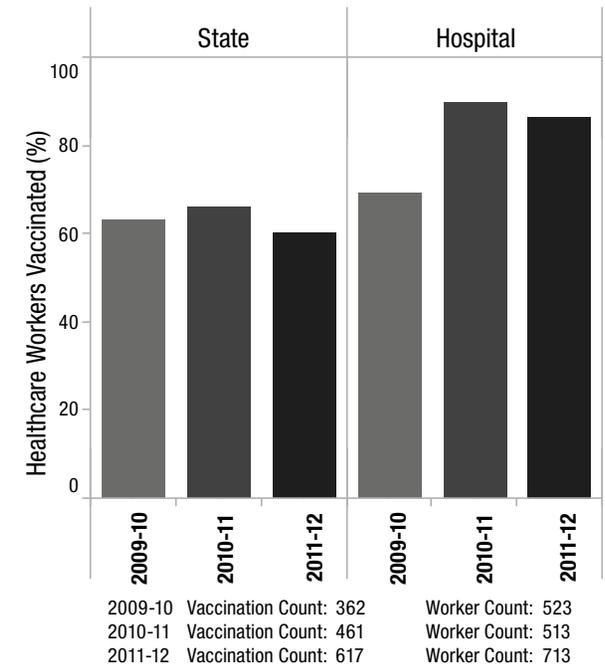
If the line is entirely in the color:

More infections were observed than expected
 Fewer infections were observed than expected

Surgical Care Improvement Project (SCIP) Process of Care Measures



Healthcare Worker Influenza Vaccination



Central Line Associated Bloodstream Infections (CLABSIs), Adult Medical/Surgical ICUs

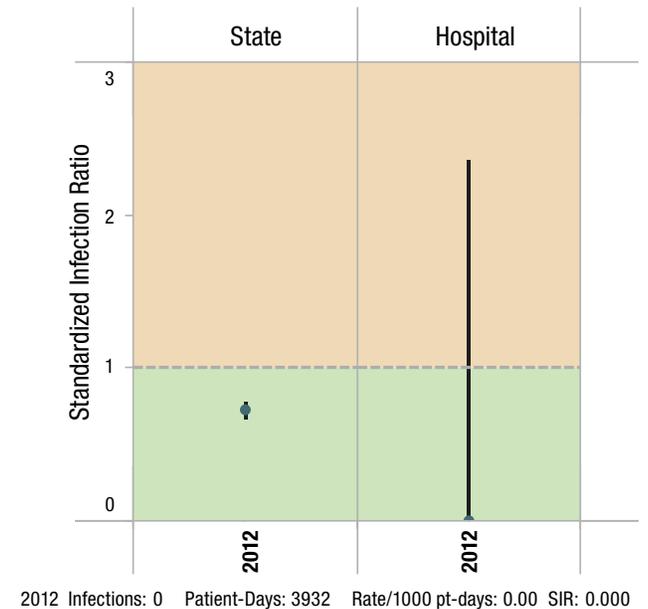
**SIR values only calculated if expected infections ≥ 1*

2009 CLABSIs: 1 CL Days: 161 Rate per 1000 CL days: 6.21 SIR: *
 2010 CLABSIs: 0 CL Days: 142 Rate per 1000 CL days: 0.00 SIR: *
 2011 CLABSIs: 0 CL Days: 152 Rate per 1000 CL days: 0.00 SIR: *
 2012 CLABSIs: 0 CL Days: 171 Rate per 1000 CL days: 0.00 SIR: *

Central Line Associated Bloodstream Infections (CLABSIs), Neonatal ICUs

Hospital does not have a NICU

Incident Clostridium difficile Infections



Coronary Artery Bypass Graft Surgery

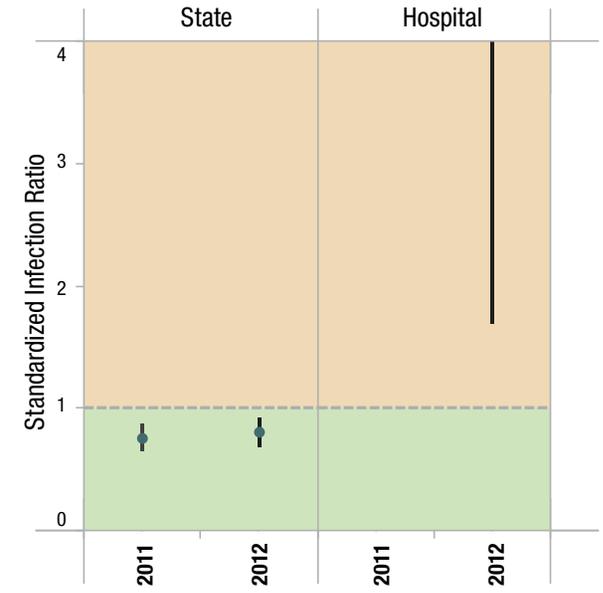
Hospital does not perform this procedure

Knee Replacement Surgery

**SIR values only calculated if expected infections ≥ 1*

2009 SSIs: 0	Procedures: 31	Procedures with SSI (%): 0.00	SIR: *
2010 SSIs: 0	Procedures: 30	Procedures with SSI (%): 0.00	SIR: *
2011 SSIs: 0	Procedures: 48	Procedures with SSI (%): 0.00	SIR: *
2012 SSIs: 0	Procedures: 39	Procedures with SSI (%): 0.00	SIR: *

Colon Surgery



2011 SSIs: 3	Procedures: 17	Procedures with SSI (%): 17.65	SIR: *
2012 SSIs: 6	Procedures: 22	Procedures with SSI (%): 27.27	SIR: 4.612

**SIR values only calculated if expected infections ≥ 1*

Abdominal Hysterectomy Surgery

Too few procedures to report

Hip Replacement Surgery

**SIR values only calculated if expected infections ≥ 1*

2011 SSIs: 1	Procedures: 33	Procedures with SSI (%): 3.03	SIR: *
2012 SSIs: 0	Procedures: 27	Procedures with SSI (%): 0.00	SIR: *

Laminectomy Surgery

Hospital does not perform this procedure

Pioneer Memorial Hospital (Heppner)

Location:	Heppner
Ownership:	Government
Med. School Affiliation:	None
ICU Beds:	1
Total Staffed Beds:	21
2012 Admissions:	42
2012 Patient Days:	116
ICP FTE:	0.25



2009
 2010
 2011
 2012

If the vertical measurement line crosses 1.0 (is in both colors) then the infection rate is not significantly different than expected.

If the line is entirely in the color:

- More infections were observed than expected
- Fewer infections were observed than expected

Central Line Associated Bloodstream Infections (CLABSIs), Adult Medical/Surgical ICUs

Hospital does not perform these procedures

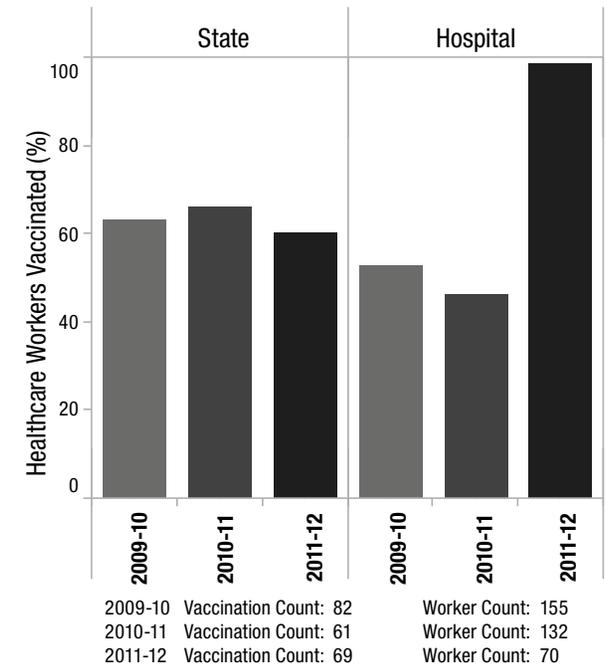
Surgical Care Improvement Project (SCIP) Process of Care Measures

Hospital does not perform these procedures

Central Line Associated Bloodstream Infections (CLABSIs), Neonatal ICUs

Hospital does not have a NICU

Healthcare Worker Influenza Vaccination



Incident *Clostridium difficile* Infections

**SIR values only calculated if expected infections ≥ 1*

Coronary Artery Bypass Graft Surgery

*Hospital does not perform
this procedure*

Knee Replacement Surgery

*Hospital does not perform
this procedure*

Colon Surgery

*Hospital does not perform
this procedure*

Abdominal Hysterectomy Surgery

*Hospital does not perform
this procedure*

Hip Replacement Surgery

*Hospital does not perform
this procedure*

Laminectomy Surgery

*Hospital does not perform
this procedure*

Pioneer Memorial Hospital (Prineville)

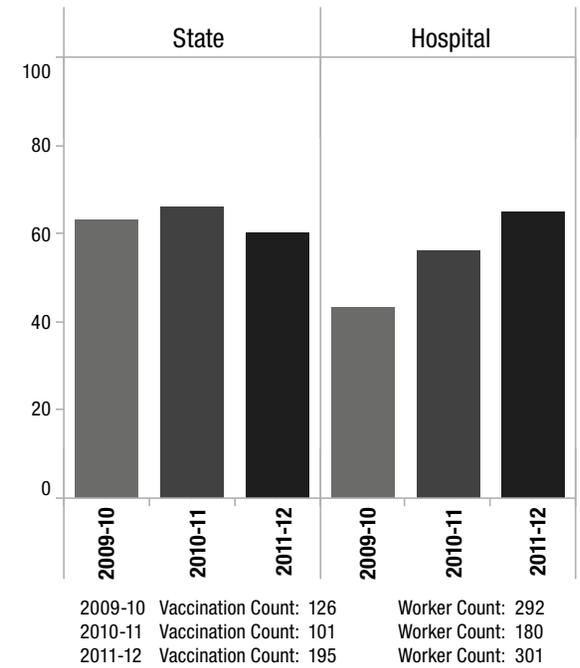
Location:	Prineville
Ownership:	Non Profit
Med. School Affiliation:	None
ICU Beds:	2
Total Staffed Beds:	25
2012 Admissions:	700
2012 Patient Days:	2,267
ICP FTE:	2



Surgical Care Improvement Project (SCIP) Process of Care Measures

Too few procedures to report

Healthcare Worker Influenza Vaccination



2009 2010 2011 2012

If the vertical measurement line crosses 1.0 (is in both colors) then the infection rate is not significantly different than expected.

If the line is entirely in the color:

- More infections were observed than expected
- Fewer infections were observed than expected

Central Line Associated Bloodstream Infections (CLABSIs), Adult Medical/Surgical ICUs

Central Line Associated Bloodstream Infections (CLABSIs), Neonatal ICUs

Incident *Clostridium difficile* Infections

**SIR values only calculated if expected infections ≥ 1*

Hospital does not have a NICU

**SIR values only calculated if expected infections ≥ 1*

2009 CLABSIs: 0	CL Days: 90	Rate per 1000 CL days: 0.00	SIR: *
2010 CLABSIs: 0	CL Days: 90	Rate per 1000 CL days: 0.00	SIR: *
2011 CLABSIs: 0	CL Days: 80	Rate per 1000 CL days: 0.00	SIR: *
2012 CLABSIs: 0	CL Days: 36	Rate per 1000 CL days: 0.00	SIR: *

2012 Infections: 0 Patient-Days: 2267 Rate/1000 pt-days: 0.00 SIR: *

Coronary Artery Bypass Graft Surgery

*Hospital does not perform
this procedure*

Knee Replacement Surgery

*Hospital does not perform
this procedure*

Colon Surgery

Too few procedures to report

Abdominal Hysterectomy Surgery

Too few procedures to report

Hip Replacement Surgery

*Hospital does not perform
this procedure*

Laminectomy Surgery

*Hospital does not perform
this procedure*

Providence Hood River Memorial Hospital

Location: Hood River
 Ownership: Non Profit
 Med. School Affiliation: None
 ICU Beds: 4
 Total Staffed Beds: 25
 2012 Admissions: 1,922
 2012 Patient Days: 4,505
 ICP FTE: 1



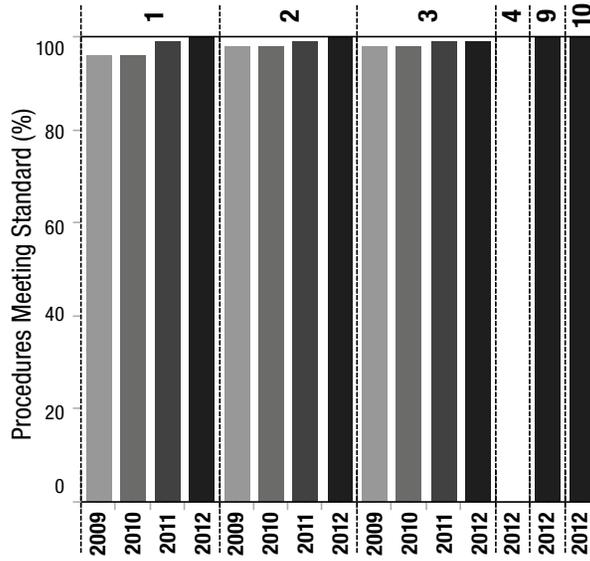
2009 2010 2011 2012

If the vertical measurement line crosses 1.0 (is in both colors) then the infection rate is not significantly different than expected.

If the line is entirely in the color:

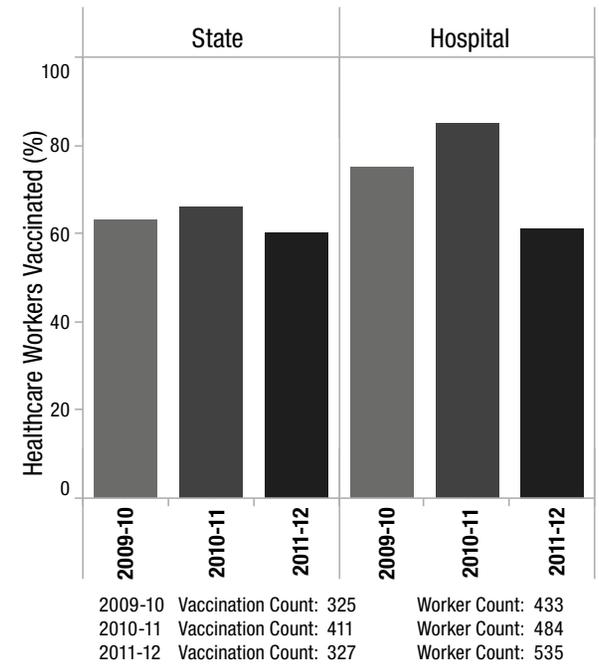
- More infections were observed than expected
- Fewer infections were observed than expected

Surgical Care Improvement Project (SCIP) Process of Care Measures



Type	1		2	3	4	9	10
Procedures Meeting Standard	119	119	116	0	29	157	
Sample Procedure Count	119	119	117	0	29	157	

Healthcare Worker Influenza Vaccination



2009-10 Vaccination Count: 325	Worker Count: 433
2010-11 Vaccination Count: 411	Worker Count: 484
2011-12 Vaccination Count: 327	Worker Count: 535

Central Line Associated Bloodstream Infections (CLABSIs), Adult Medical/Surgical ICUs

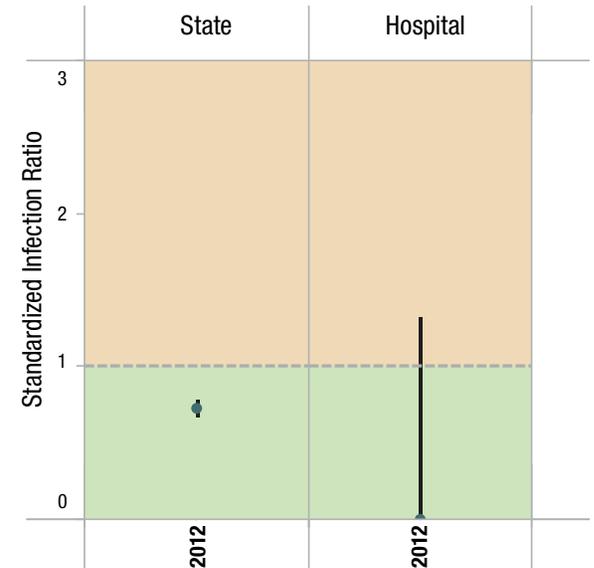
**SIR values only calculated if expected infections ≥ 1*

2009 CLABSIs: 0	CL Days: 89	Rate per 1000 CL days: 0.00	SIR: *
2010 CLABSIs: 1	CL Days: 31	Rate per 1000 CL days: 32.26	SIR: *
2011 CLABSIs: 0	CL Days: 19	Rate per 1000 CL days: 0.00	SIR: *
2012 CLABSIs: 0	CL Days: 80	Rate per 1000 CL days: 0.00	SIR: *

Central Line Associated Bloodstream Infections (CLABSIs), Neonatal ICUs

Hospital does not have a NICU

Incident Clostridium difficile Infections



2012 Infections: 0 Patient-Days: 4964 Rate/1000 pt-days: 0.00 SIR: 0.000

Coronary Artery Bypass Graft Surgery

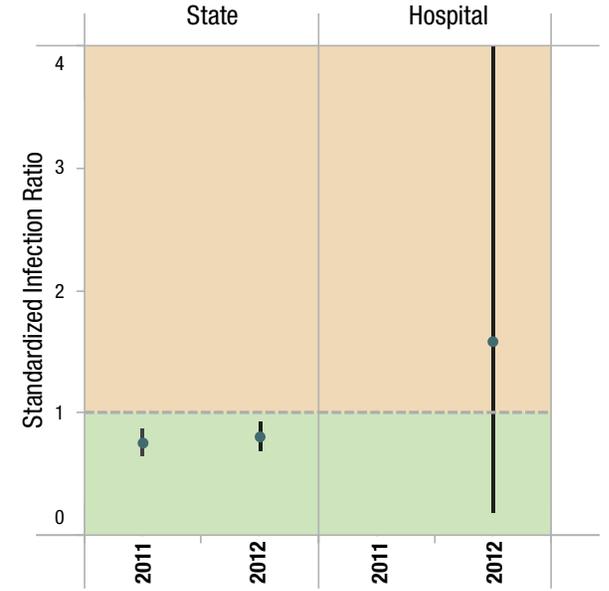
Hospital does not perform this procedure

Knee Replacement Surgery

**SIR values only calculated if expected infections ≥ 1*

2009 SSIs: 1	Procedures: 61	Procedures with SSI (%): 1.64	SIR: *
2010 SSIs: 0	Procedures: 83	Procedures with SSI (%): 0.00	SIR: *
2011 SSIs: 1	Procedures: 73	Procedures with SSI (%): 1.37	SIR: *
2012 SSIs: 0	Procedures: 55	Procedures with SSI (%): 0.00	SIR: *

Colon Surgery



2011 SSIs: 2	Procedures: 13	Procedures with SSI (%): 15.38	SIR: *
2012 SSIs: 2	Procedures: 24	Procedures with SSI (%): 8.33	SIR: 1.581

**SIR values only calculated if expected infections ≥ 1*

Abdominal Hysterectomy Surgery

Too few procedures to report

Hip Replacement Surgery

**SIR values only calculated if expected infections ≥ 1*

2011 SSIs: 3	Procedures: 38	Procedures with SSI (%): 7.89	SIR: *
2012 SSIs: 0	Procedures: 52	Procedures with SSI (%): 0	SIR: *

Laminectomy Surgery

Hospital does not perform this procedure

Providence Medford Medical Center

Location: Medford
 Ownership: Non Profit
 Med. School Affiliation: None
 ICU Beds: 15
 Total Staffed Beds: 125
 2012 Admissions: 7,792
 2012 Patient Days: 27,451
 ICP FTE: 1



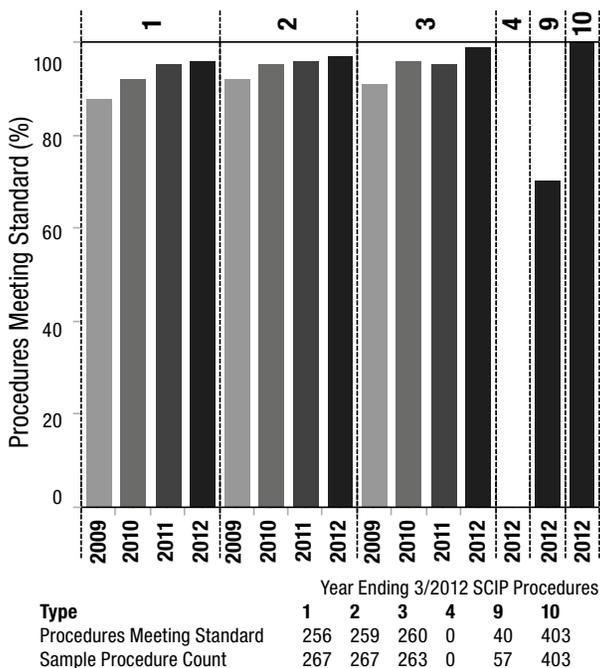
2009
 2010
 2011
 2012

If the vertical measurement line crosses 1.0 (is in both colors) then the infection rate is not significantly different than expected.

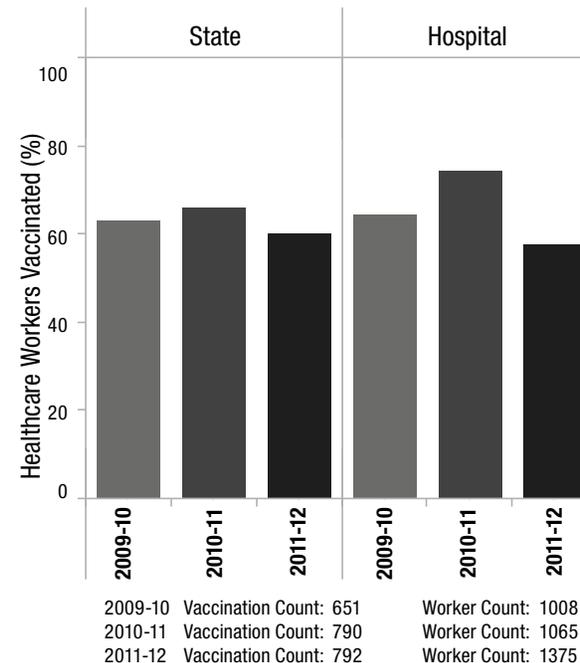
If the line is entirely in the color:

- More infections were observed than expected
- Fewer infections were observed than expected

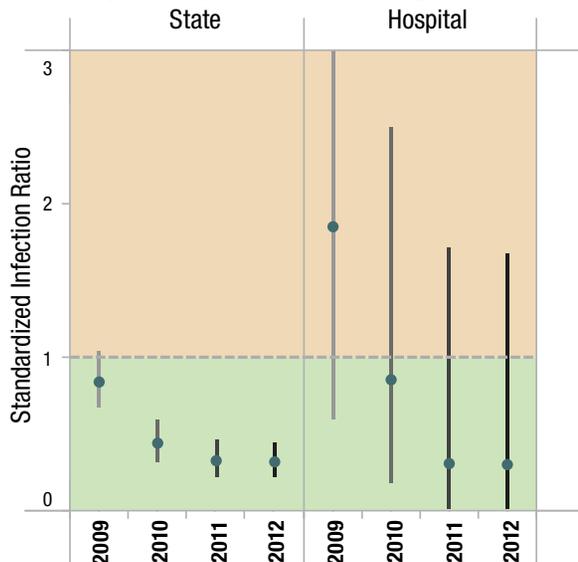
Surgical Care Improvement Project (SCIP) Process of Care Measures



Healthcare Worker Influenza Vaccination



Central Line Associated Bloodstream Infections (CLABSIs), Adult Medical/Surgical ICUs

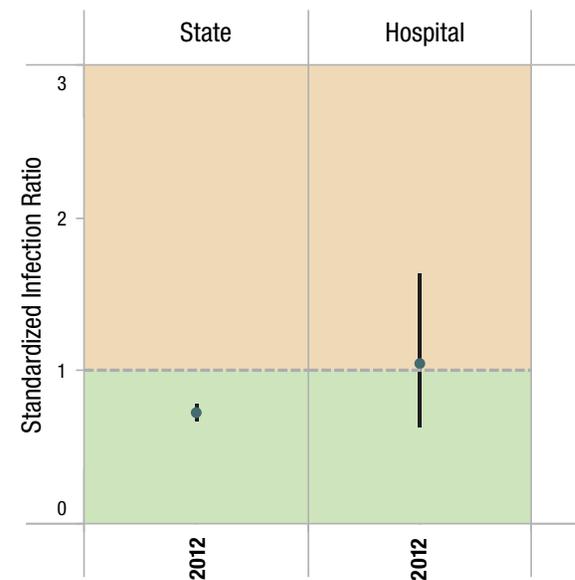


2009	CLABSIs: 5	CL Days: 1802	Rate per 1000 CL days: 2.77	SIR: 1.850
2010	CLABSIs: 3	CL Days: 2344	Rate per 1000 CL days: 1.28	SIR: 0.853
2011	CLABSIs: 1	CL Days: 2170	Rate per 1000 CL days: 0.46	SIR: 0.307
2012	CLABSIs: 1	CL Days: 2219	Rate per 1000 CL days: 0.45	SIR: 0.300

Central Line Associated Bloodstream Infections (CLABSIs), Neonatal ICUs

Hospital does not have a NICU

Incident Clostridium difficile Infections



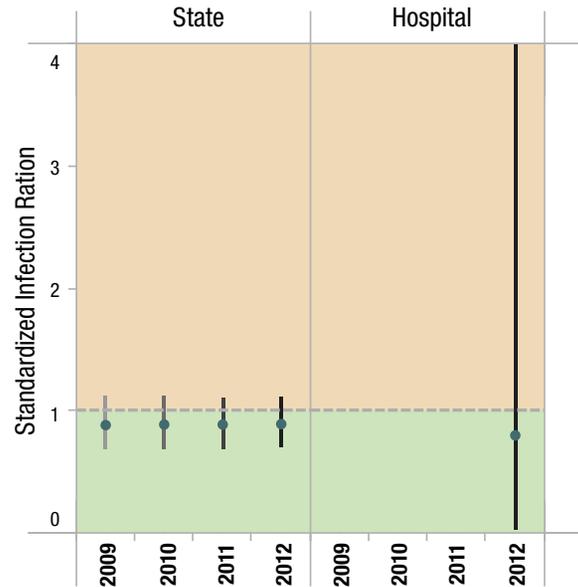
2012 Infections: 19 Patient-Days: 27431 Rate/1000 pt-days: 0.69 SIR: 1.047

Coronary Artery Bypass Graft Surgery

**SIR values only calculated if expected infections ≥ 1*

2009 SSIs: 0	Procedures: 19	Procedures with SSI (%): 0.00	SIR: *
2010 SSIs: 1	Procedures: 37	Procedures with SSI (%): 2.70	SIR: *
2011 SSIs: 0	Procedures: 18	Procedures with SSI (%): 0.00	SIR: *
2012	Hospital did not perform this procedure in 2012		

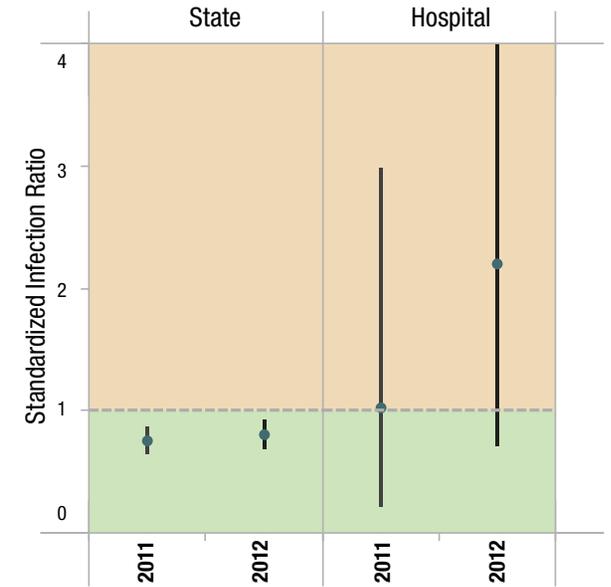
Knee Replacement Surgery



2009 SSIs: 0	Procedures: 29	Procedures with SSI (%): 0.00	SIR: *
2010 SSIs: 1	Procedures: 30	Procedures with SSI (%): 3.33	SIR: *
2011 SSIs: 0	Procedures: 123	Procedures with SSI (%): 0.00	SIR: *
2012 SSIs: 1	Procedures: 159	Procedures with SSI (%): 0.63	SIR: 0.797

**SIR values only calculated if expected infections ≥ 1*

Colon Surgery



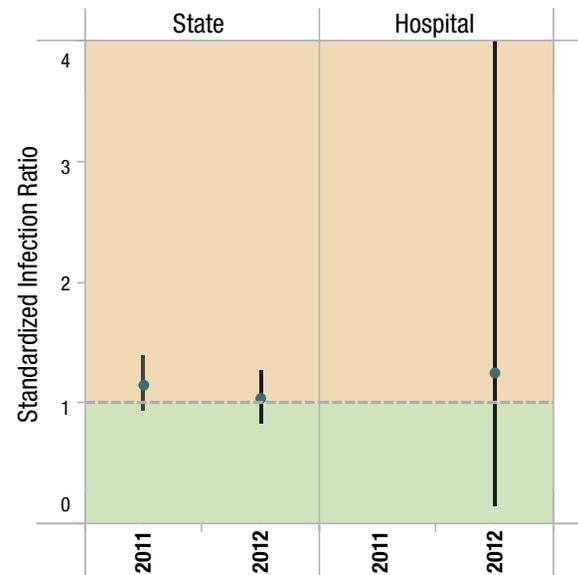
2011 SSIs: 3	Procedures: 52	Procedures with SSI (%): 5.77	SIR: 1.022
2012 SSIs: 5	Procedures: 43	Procedures with SSI (%): 11.63	SIR: 2.198

Abdominal Hysterectomy Surgery

**SIR values only calculated if expected infections ≥ 1*

2011 SSIs: 2	Procedures: 62	Procedures with SSI (%): 3.23	SIR: *
2012 SSIs: 0	Procedures: 32	Procedures with SSI (%): 0.00	SIR: *

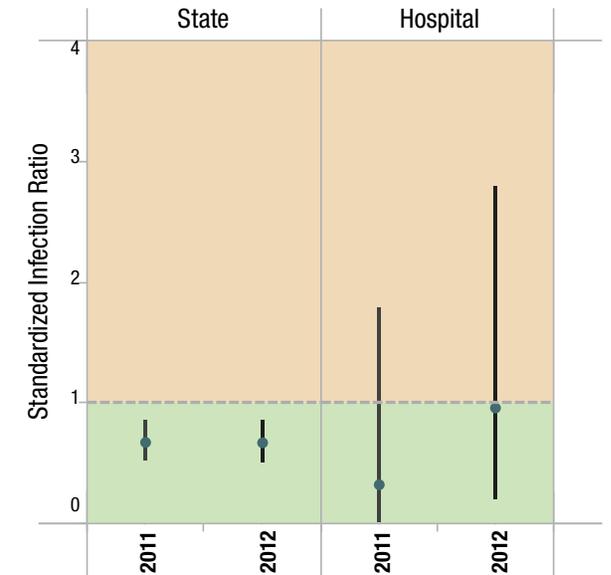
Hip Replacement Surgery



2011 SSIs: 2	Procedures: 81	Procedures with SSI (%): 2.47	SIR: *
2012 SSIs: 2	Procedures: 169	Procedures with SSI (%): 1.18	SIR: 1.247

**SIR values only calculated if expected infections ≥ 1*

Laminectomy Surgery



2011 SSIs: 1	Procedures: 302	Procedures with SSI (%): 0.33	SIR: 0.321
2012 SSIs: 3	Procedures: 291	Procedures with SSI (%): 1.03	SIR: 0.957

Providence Milwaukie Hospital

Location:	Milwaukie
Ownership:	Non Profit
Med. School Affiliation:	Graduate
ICU Beds:	6
Total Staffed Beds:	77
2012 Admissions:	3,111
2012 Patient Days:	10,644
ICP FTE:	0.5



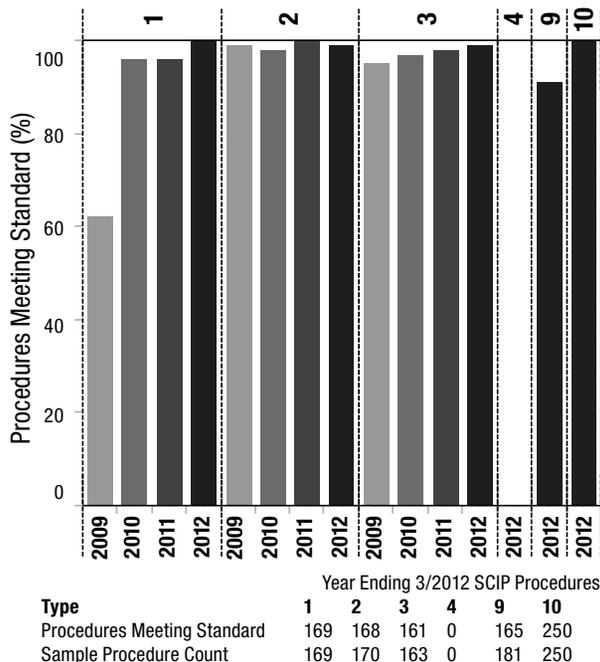
2009
 2010
 2011
 2012

If the vertical measurement line crosses 1.0 (is in both colors) then the infection rate is not significantly different than expected.

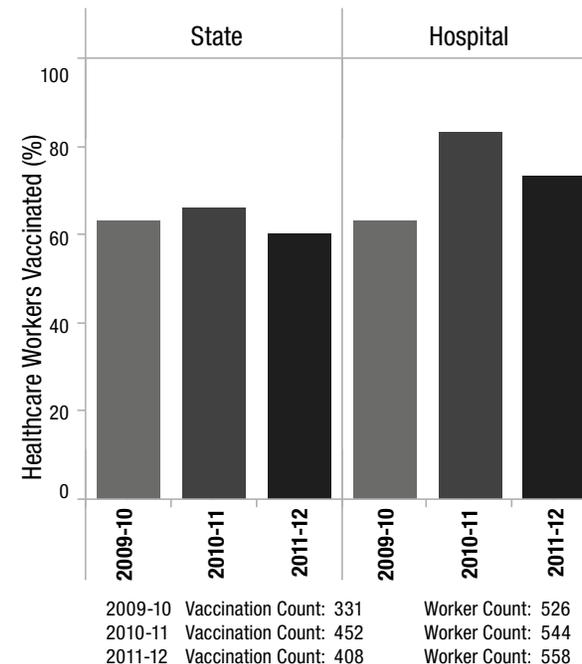
If the line is entirely in the color:

- More infections were observed than expected
- Fewer infections were observed than expected

Surgical Care Improvement Project (SCIP) Process of Care Measures



Healthcare Worker Influenza Vaccination



Central Line Associated Bloodstream Infections (CLABSIs), Adult Medical/Surgical ICUs

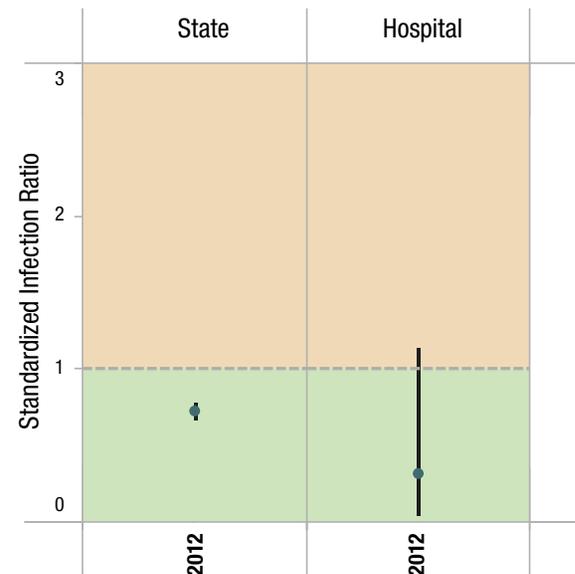
**SIR values only calculated if expected infections ≥ 1*

2009 CLABSIs: 0	CL Days: 335	Rate per 1000 CL days: 0.00	SIR: *
2010 CLABSIs: 0	CL Days: 435	Rate per 1000 CL days: 0.00	SIR: *
2011 CLABSIs: 0	CL Days: 428	Rate per 1000 CL days: 0.00	SIR: *
2012 CLABSIs: 0	CL Days: 247	Rate per 1000 CL days: 0.00	SIR: *

Central Line Associated Bloodstream Infections (CLABSIs), Neonatal ICUs

Hospital does not have a NICU

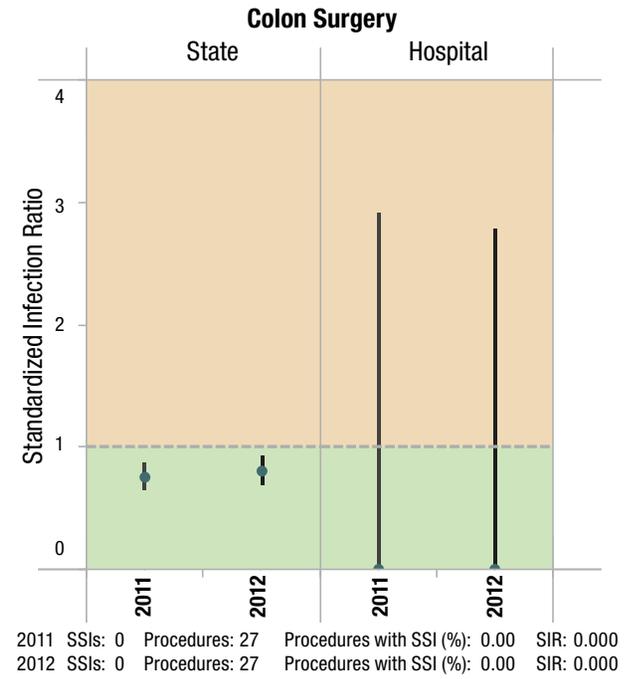
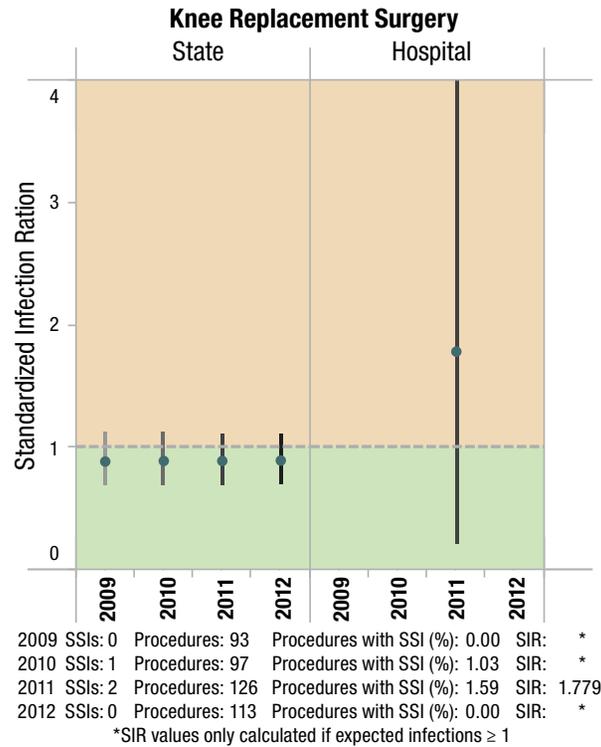
Incident *Clostridium difficile* Infections



2012 Infections: 2 Patient-Days: 10172 Rate/1000 pt-days: 0.20 SIR: 0.317

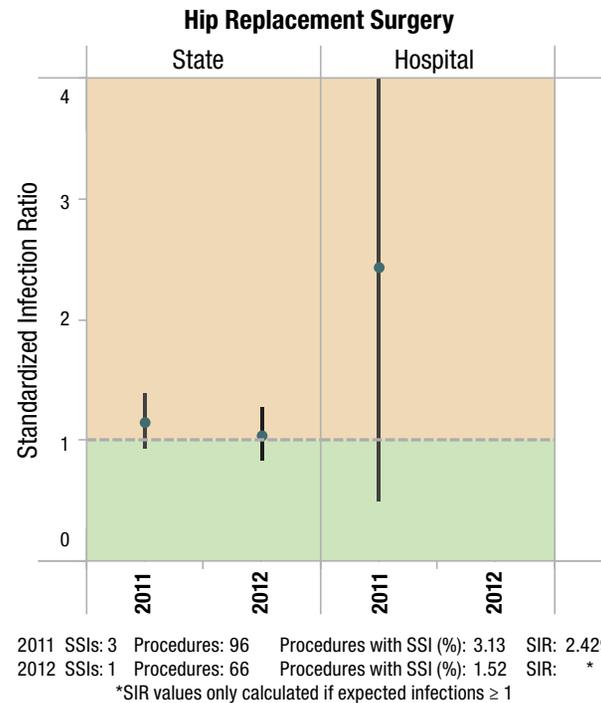
Coronary Artery Bypass Graft Surgery

Hospital does not perform this procedure



Abdominal Hysterectomy Surgery

Too few procedures to report



Laminectomy Surgery

Hospital does not perform this procedure

Providence Newberg Medical Center

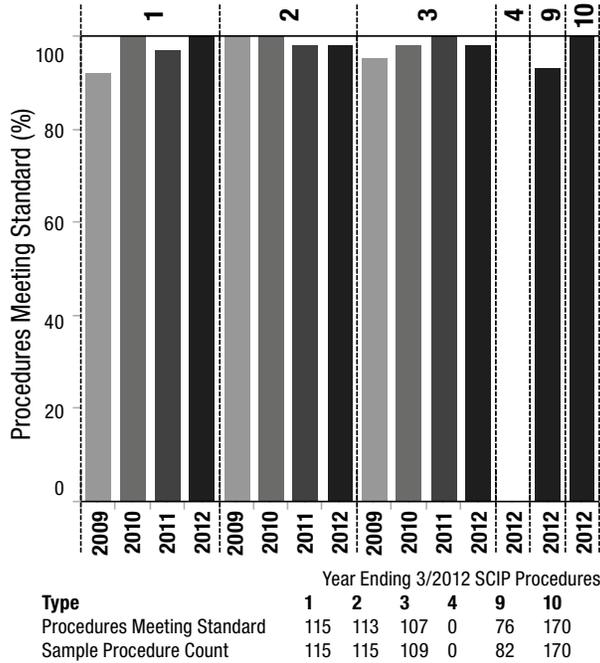
Location:	Newberg
Ownership:	Non Profit
Med. School Affiliation:	None
ICU Beds:	4
Total Staffed Beds:	40
2012 Admissions:	2,954
2012 Patient Days:	8,120
ICP FTE:	1



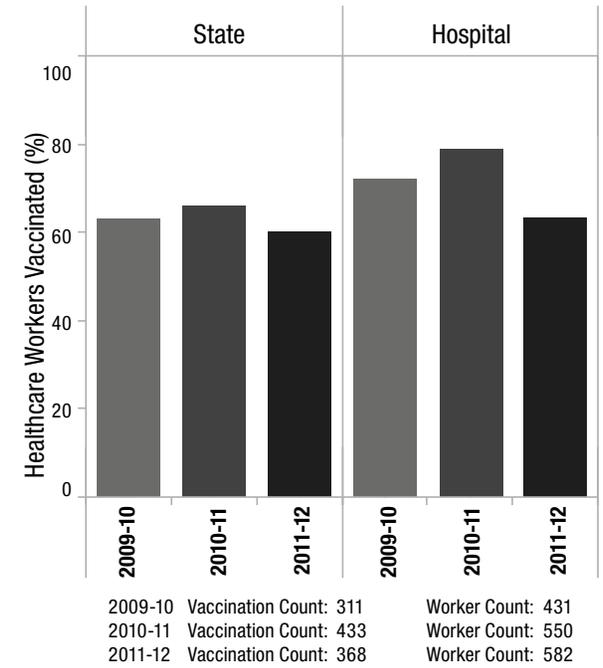
2009
 2010
 2011
 2012

If the vertical measurement line crosses 1.0 (is in both colors) then the infection rate is not significantly different than expected.
 If the line is entirely in the color:
 More infections were observed than expected
 Fewer infections were observed than expected

Surgical Care Improvement Project (SCIP) Process of Care Measures



Healthcare Worker Influenza Vaccination



Central Line Associated Bloodstream Infections (CLABSIs), Adult Medical/Surgical ICUs

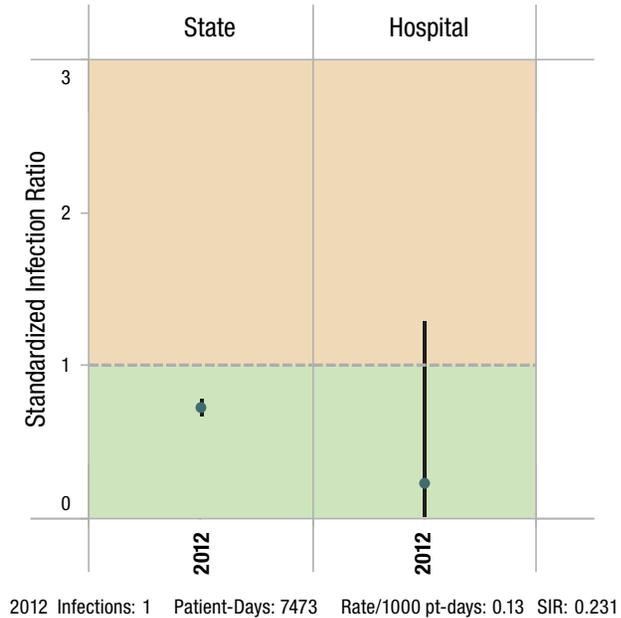
**SIR values only calculated if expected infections ≥ 1*

2009 CLABSIs: 1	CL Days: 254	Rate per 1000 CL days: 3.94	SIR: *
2010 CLABSIs: 0	CL Days: 291	Rate per 1000 CL days: 0.00	SIR: *
2011 CLABSIs: 0	CL Days: 323	Rate per 1000 CL days: 0.00	SIR: *
2012 CLABSIs: 0	CL Days: 287	Rate per 1000 CL days: 0.00	SIR: *

Central Line Associated Bloodstream Infections (CLABSIs), Neonatal ICUs

Hospital does not have a NICU

Incident *Clostridium difficile* Infections



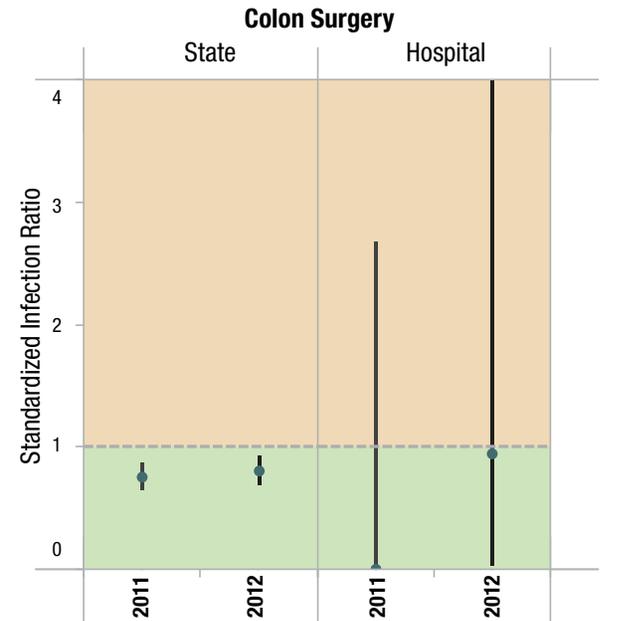
Coronary Artery Bypass Graft Surgery

Hospital does not perform this procedure

Knee Replacement Surgery

**SIR values only calculated if expected infections ≥ 1*

2009 SSIs: 0	Procedures: 32	Procedures with SSI (%): 0.00	SIR: *
2010 SSIs: 0	Procedures: 55	Procedures with SSI (%): 0.00	SIR: *
2011 SSIs: 0	Procedures: 49	Procedures with SSI (%): 0.00	SIR: *
2012 SSIs: 0	Procedures: 48	Procedures with SSI (%): 0.00	SIR: *



2011 SSIs: 0	Procedures: 25	Procedures with SSI (%): 0.00	SIR: 0.000
2012 SSIs: 1	Procedures: 22	Procedures with SSI (%): 4.55	SIR: 0.943

Abdominal Hysterectomy Surgery

**SIR values only calculated if expected infections ≥ 1*

Hip Replacement Surgery

**SIR values only calculated if expected infections ≥ 1*

2011 SSIs: 0	Procedures: 53	Procedures with SSI (%): 0.00	SIR: *
2012 SSIs: 0	Procedures: 36	Procedures with SSI (%): 0.00	SIR: *

2011 SSIs: 1	Procedures: 36	Procedures with SSI (%): 2.78	SIR: *
2012 SSIs: 0	Procedures: 31	Procedures with SSI (%): 0.00	SIR: *

Laminectomy Surgery

Hospital does not perform this procedure

Providence Portland Medical Center

Location: Portland
 Ownership: Non Profit
 Med. School Affiliation: None
 ICU Beds: 36
 Total Staffed Beds: 304
 2012 Admissions: 22,989
 2012 Patient Days: 109,329
 ICP FTE: 2



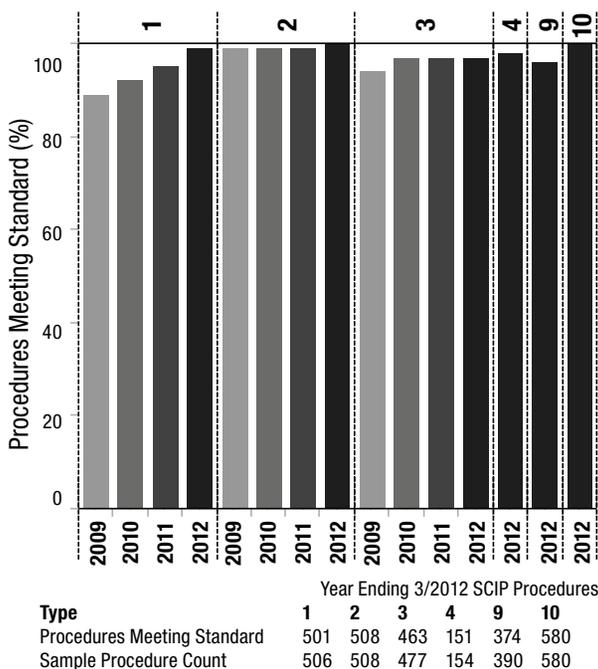
2009
 2010
 2011
 2012

If the vertical measurement line crosses 1.0 (is in both colors) then the infection rate is not significantly different than expected.

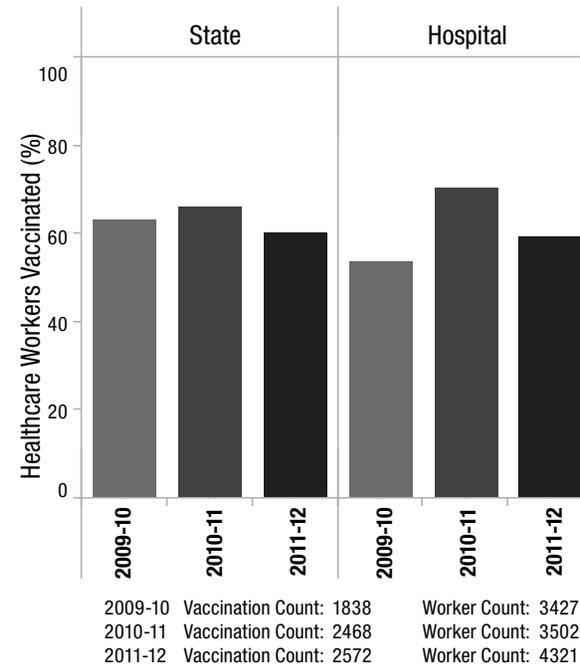
If the line is entirely in the color:

- More infections were observed than expected
- Fewer infections were observed than expected

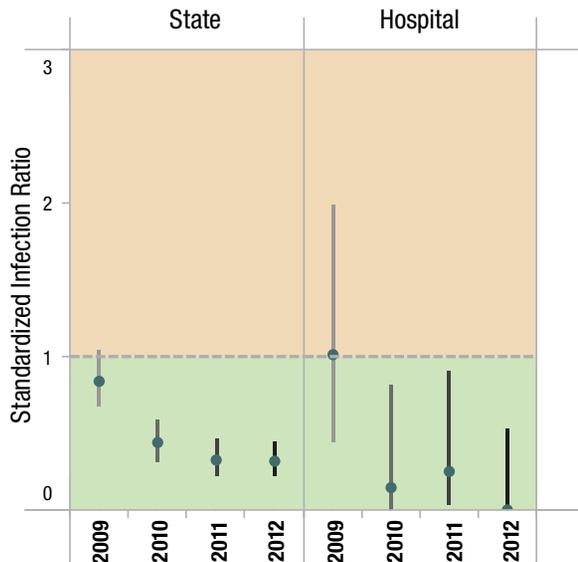
Surgical Care Improvement Project (SCIP) Process of Care Measures



Healthcare Worker Influenza Vaccination



Central Line Associated Bloodstream Infections (CLABSIs), Adult Medical/Surgical ICUs

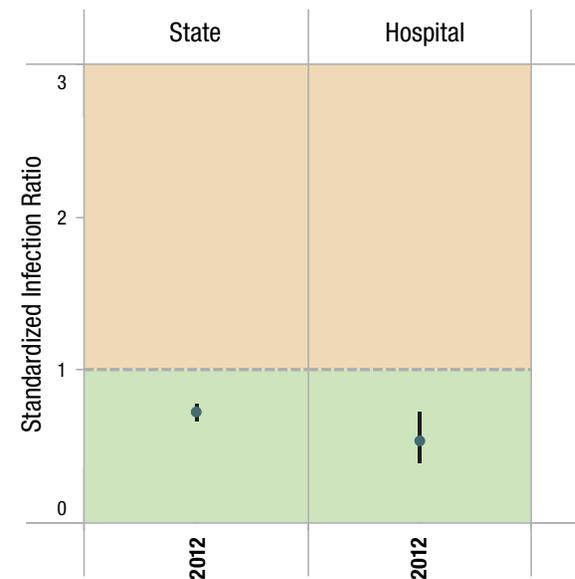


2009	CLABSIs: 8	CL Days: 5271	Rate per 1000 CL days: 1.52	SIR: 1.012
2010	CLABSIs: 1	CL Days: 4563	Rate per 1000 CL days: 0.22	SIR: 0.146
2011	CLABSIs: 2	CL Days: 5309	Rate per 1000 CL days: 0.38	SIR: 0.251
2012	CLABSIs: 0	CL Days: 4710	Rate per 1000 CL days: 0.00	SIR: 0.000

Central Line Associated Bloodstream Infections (CLABSIs), Neonatal ICUs

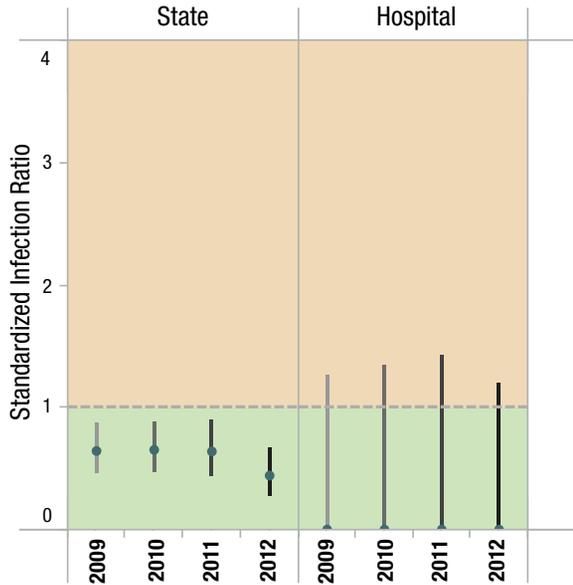
Hospital does not have a NICU

Incident Clostridium difficile Infections



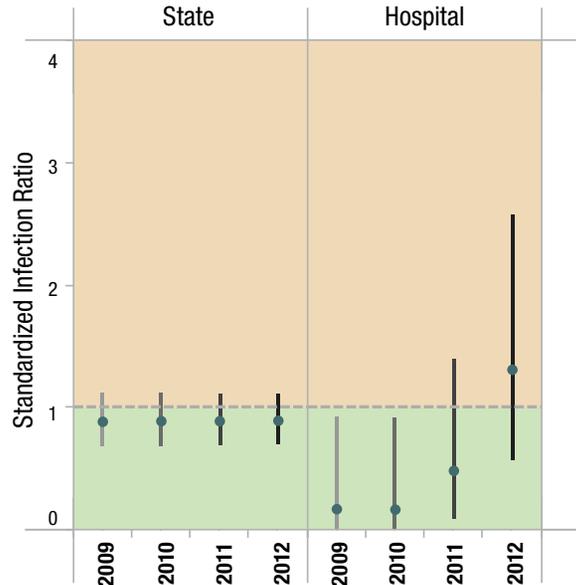
2012 Infections: 43 Patient-Days: 109329 Rate/1000 pt-days: 0.39 SIR: 0.537

Coronary Artery Bypass Graft Surgery



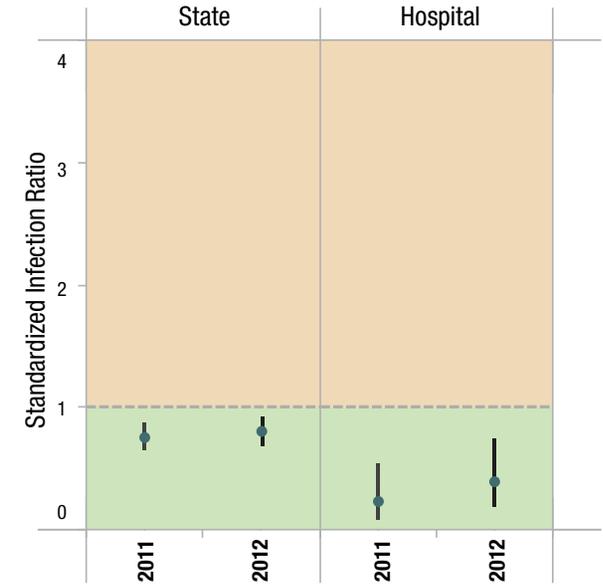
Year	SSIs	Procedures	Procedures with SSI (%)	SIR
2009	0	156	0.00	0.000
2010	0	137	0.00	0.000
2011	0	130	0.00	0.000
2012	0	146	0.00	0.000

Knee Replacement Surgery



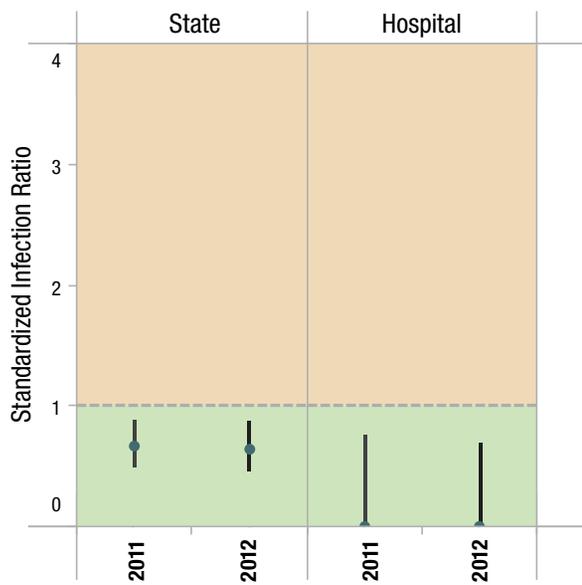
Year	SSIs	Procedures	Procedures with SSI (%)	SIR
2009	1	623	0.16	0.167
2010	1	632	0.16	0.163
2011	3	640	0.47	0.480
2012	8	632	1.27	1.306

Colon Surgery



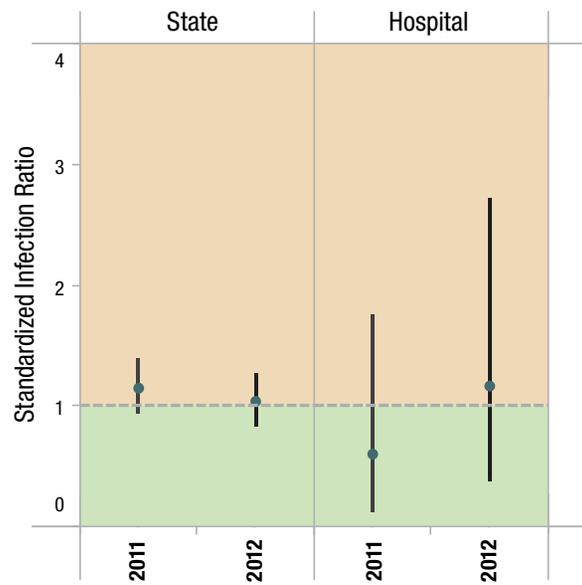
Year	SSIs	Procedures	Procedures with SSI (%)	SIR
2011	5	371	1.35	0.230
2012	9	390	2.31	0.391

Abdominal Hysterectomy Surgery



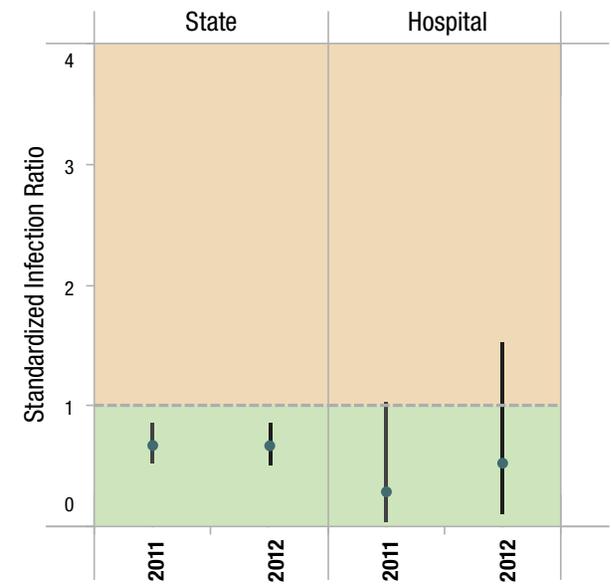
Year	SSIs	Procedures	Procedures with SSI (%)	SIR
2011	0	254	0.00	0.000
2012	0	288	0.00	0.000

Hip Replacement Surgery



Year	SSIs	Procedures	Procedures with SSI (%)	SIR
2011	3	431	0.70	0.599
2012	5	374	1.34	1.163

Laminectomy Surgery



Year	SSIs	Procedures	Procedures with SSI (%)	SIR
2011	2	648	0.31	0.287
2012	3	504	0.60	0.524

Providence Seaside Hospital

Location: Seaside 

Ownership: Non Profit

Med. School Affiliation: None

ICU Beds: 4

Total Staffed Beds: 25

2012 Admissions: 1,296

2012 Patient Days: 3,914

ICP FTE: 1

2009
 2010
 2011
 2012

If the vertical measurement line crosses 1.0 (is in both colors) then the infection rate is not significantly different than expected.

If the line is entirely in the color:

- More infections were observed than expected
- Fewer infections were observed than expected

Central Line Associated Bloodstream Infections (CLABSIs), Adult Medical/Surgical ICUs

Too few procedures to report

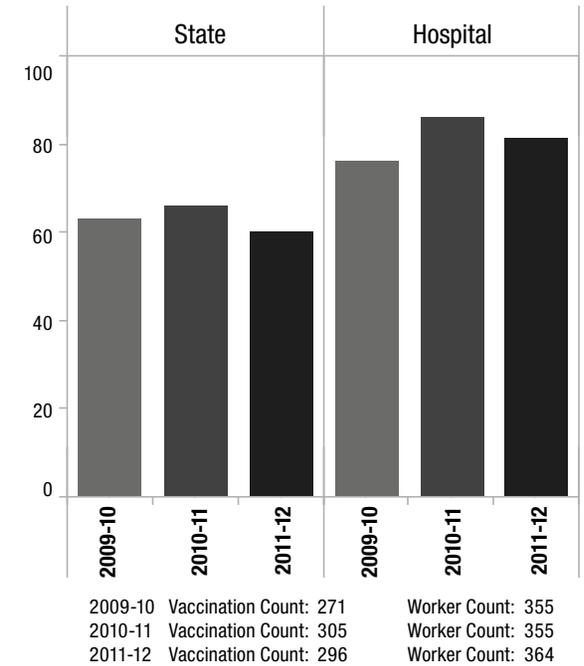
Central Line Associated Bloodstream Infections (CLABSIs), Neonatal ICUs

Hospital does not have a NICU

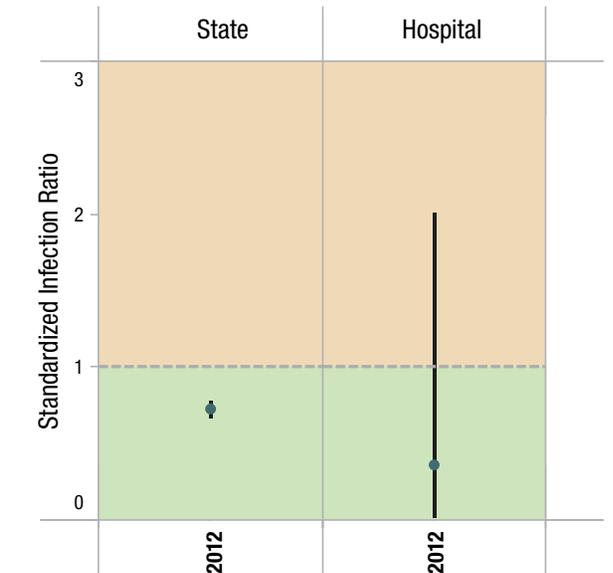
Surgical Care Improvement Project (SCIP) Process of Care Measures

Too few procedures to report

Healthcare Worker Influenza Vaccination



Incident *Clostridium difficile* Infections



2012 Infections: 1 Patient-Days: 3943 Rate/1000 pt-days: 0.25 SIR: 0.360

Coronary Artery Bypass Graft Surgery

*Hospital does not perform
this procedure*

Knee Replacement Surgery

Too few procedures to report

Colon Surgery

Too few procedures to report

Abdominal Hysterectomy Surgery

Too few procedures to report

Hip Replacement Surgery

Too few procedures to report

Laminectomy Surgery

*Hospital does not perform
this procedure*

Providence St. Vincent Medical Center

Location: Portland
 Ownership: Non Profit
 Med. School Affiliation: Graduate
 ICU Beds: 84
 Total Staffed Beds: 529
 2012 Admissions: 32,243
 2012 Patient Days: 131,650
 ICP FTE: 1.5



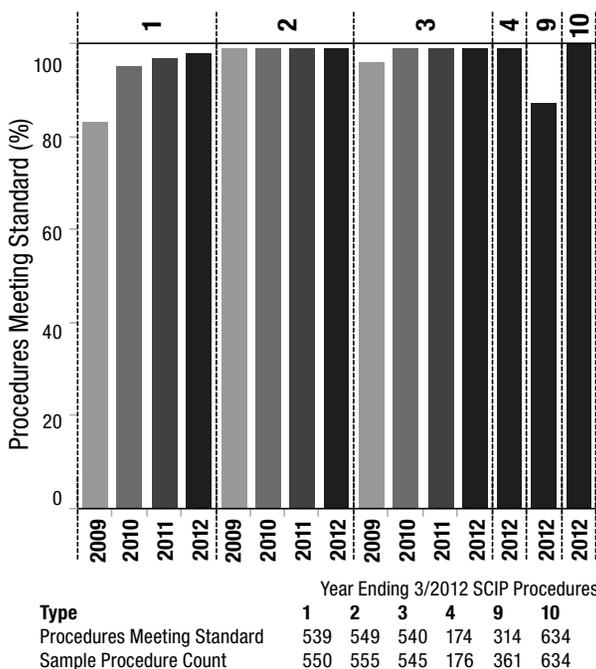
2009
 2010
 2011
 2012

If the vertical measurement line crosses 1.0 (is in both colors) then the infection rate is not significantly different than expected.

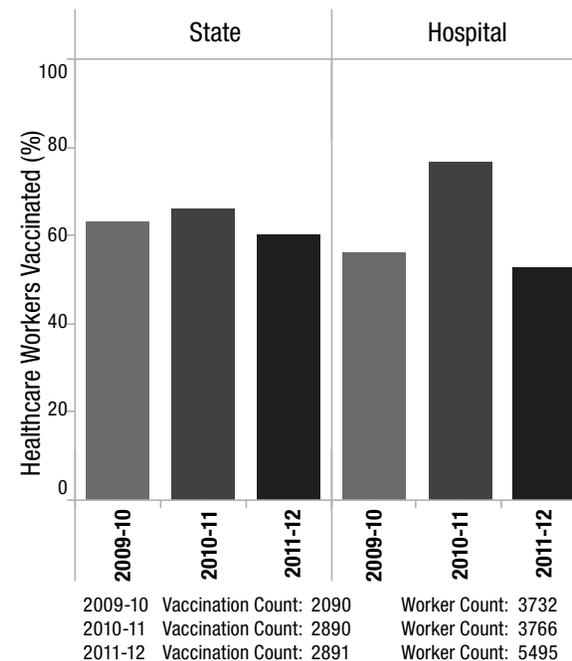
If the line is entirely in the color:

- More infections were observed than expected
- Fewer infections were observed than expected

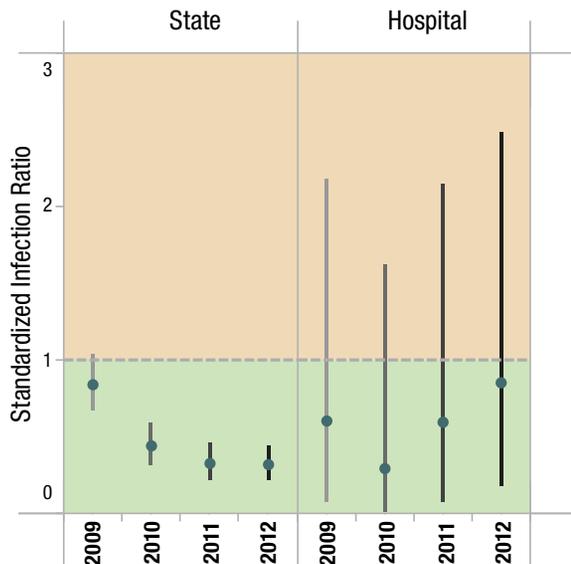
Surgical Care Improvement Project (SCIP) Process of Care Measures



Healthcare Worker Influenza Vaccination

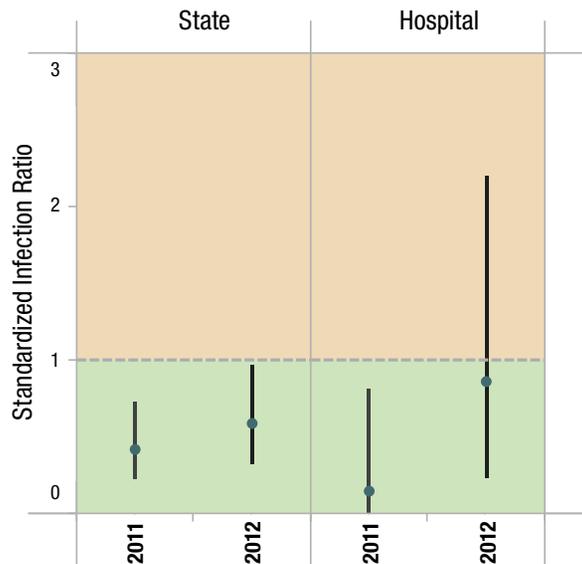


Central Line Associated Bloodstream Infections (CLABSIs), Adult Medical/Surgical ICUs



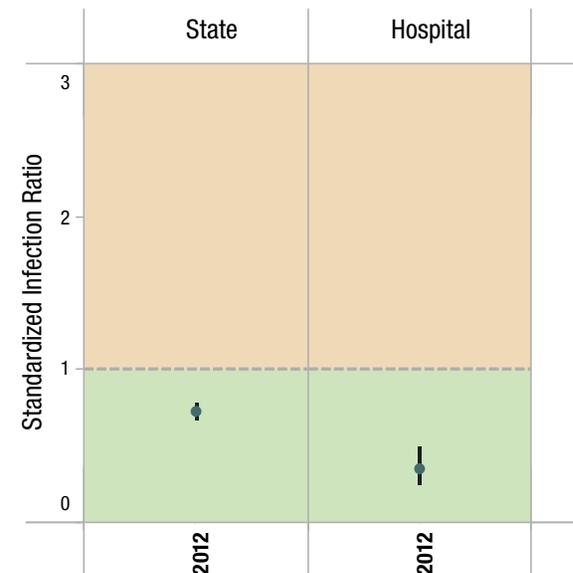
2009	CLABSIs: 2	CL Days: 2215	Rate per 1000 CL days: 0.90	SIR: 0.602
2010	CLABSIs: 1	CL Days: 2284	Rate per 1000 CL days: 0.44	SIR: 0.292
2011	CLABSIs: 2	CL Days: 2244	Rate per 1000 CL days: 0.89	SIR: 0.594
2012	CLABSIs: 3	CL Days: 2351	Rate per 1000 CL days: 1.28	SIR: 0.851

Central Line Associated Bloodstream Infections (CLABSIs), Neonatal ICUs



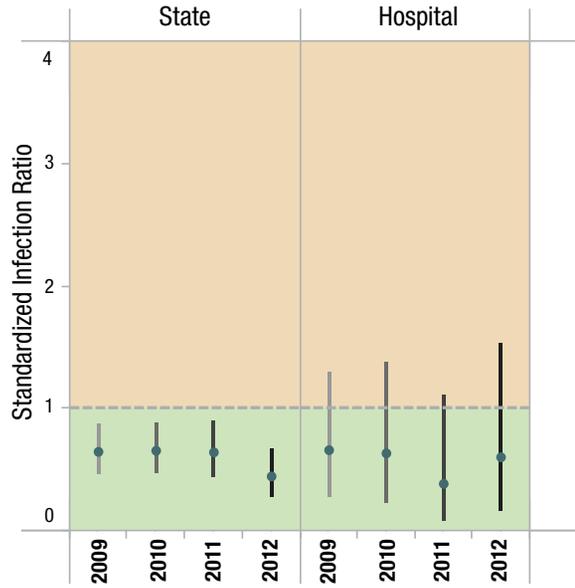
2011	CLABSIs: 1	CL Days: 2657	Rate per 1000 CL days: 0.38	SIR: 0.145
2012	CLABSIs: 4	CL Days: 2072	Rate per 1000 CL days: 1.93	SIR: 0.859

Incident Clostridium difficile Infections



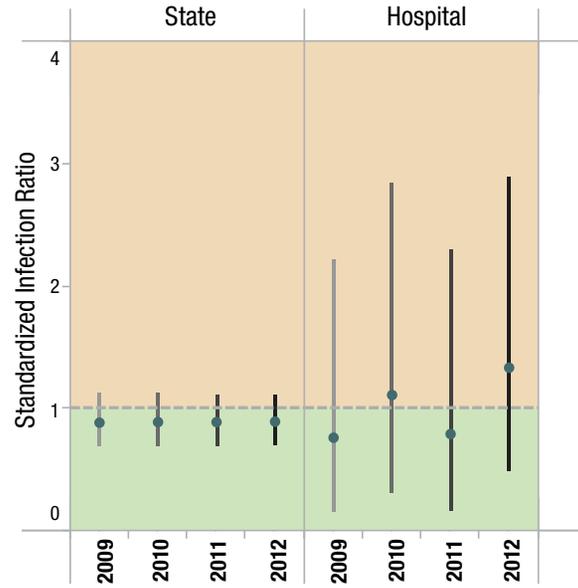
2012	Infections: 32	Patient-Days: 117151	Rate/1000 pt-days: 0.27	SIR: 0.351
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Coronary Artery Bypass Graft Surgery



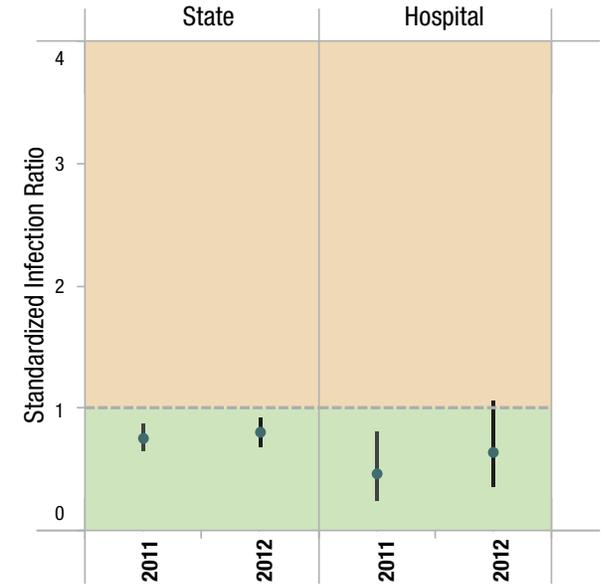
Year	SSIs	Procedures	Procedures with SSI (%)	SIR
2009	8	545	1.47	0.656
2010	6	424	1.42	0.630
2011	3	340	0.88	0.381
2012	4	300	1.33	0.598

Knee Replacement Surgery



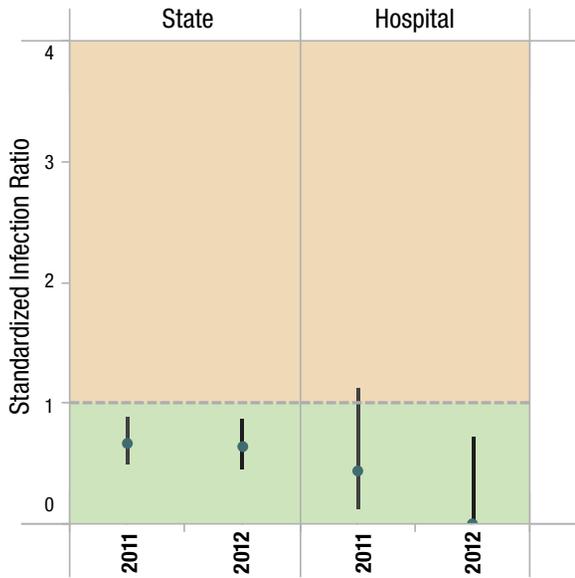
Year	SSIs	Procedures	Procedures with SSI (%)	SIR
2009	3	404	0.74	0.758
2010	4	351	1.14	1.107
2011	3	358	0.84	0.788
2012	6	433	1.39	1.330

Colon Surgery



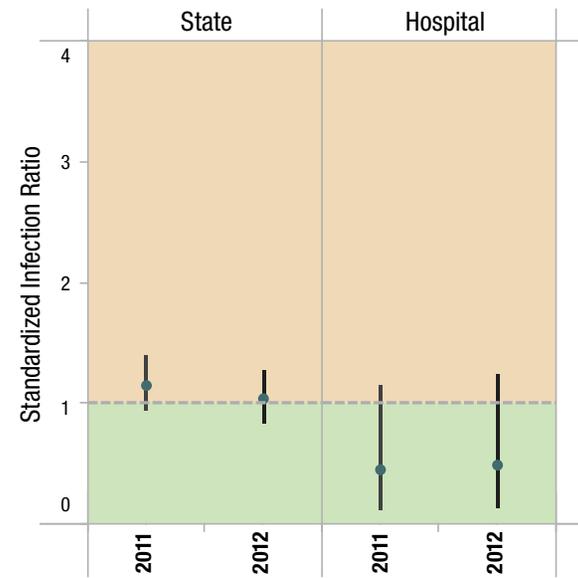
Year	SSIs	Procedures	Procedures with SSI (%)	SIR
2011	12	412	2.91	0.463
2012	15	396	3.79	0.638

Abdominal Hysterectomy Surgery



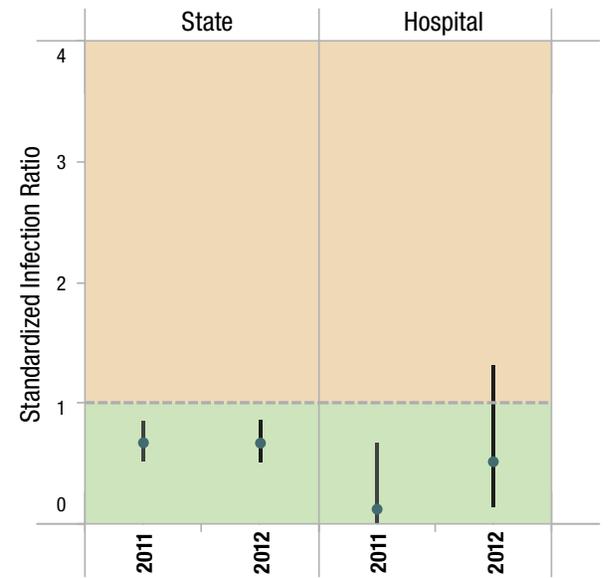
Year	SSIs	Procedures	Procedures with SSI (%)	SIR
2011	4	583	0.69	0.438
2012	0	308	0.00	0.000

Hip Replacement Surgery



Year	SSIs	Procedures	Procedures with SSI (%)	SIR
2011	4	653	0.61	0.448
2012	4	640	0.63	0.486

Laminectomy Surgery



Year	SSIs	Procedures	Procedures with SSI (%)	SIR
2011	1	671	0.15	0.121
2012	4	699	0.57	0.514

Providence Willamette Falls Medical Center

Location: Oregon City
 Ownership: Non Profit
 Med.School Affiliation: None
 ICU Beds: 8
 Total Staffed Beds: 91
 2012 Admissions: 4,328
 2012 Patient Days: 12,805
 ICP FTE: 0.5



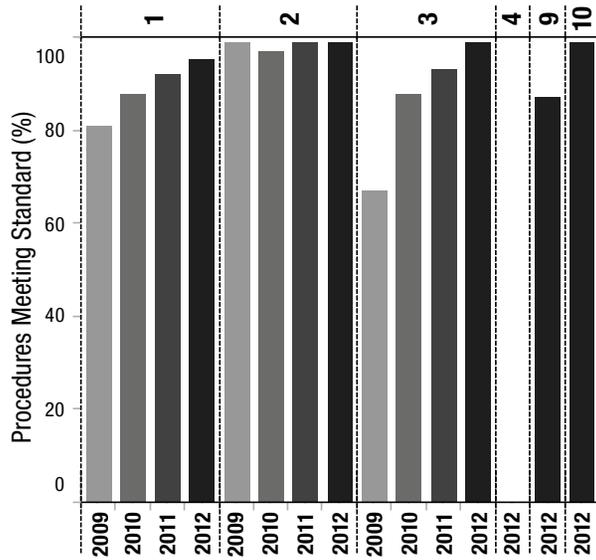
2009 2010 2011 2012

If the vertical measurement line crosses 1.0 (is in both colors) then the infection rate is not significantly different than expected.

If the line is entirely in the color:

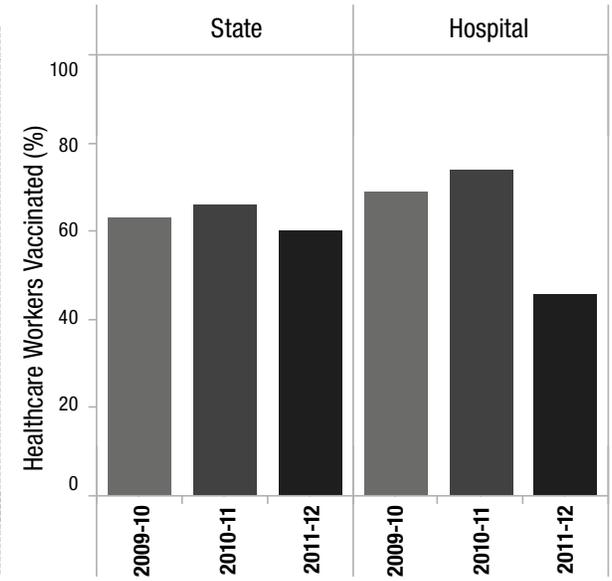
- More infections were observed than expected
- Fewer infections were observed than expected

Surgical Care Improvement Project (SCIP) Process of Care Measures



Type	Year Ending 3/2012 SCIP Procedures					
	1	2	3	4	9	10
Procedures Meeting Standard	268	279	275	0	141	385
Sample Procedure Count	282	282	278	0	162	389

Healthcare Worker Influenza Vaccination



2009-10	Vaccination Count: 560	Worker Count: 814
2010-11	Vaccination Count: 561	Worker Count: 759
2011-12	Vaccination Count: 424	Worker Count: 925

Central Line Associated Bloodstream Infections (CLABSIs), Adult Medical/Surgical ICUs

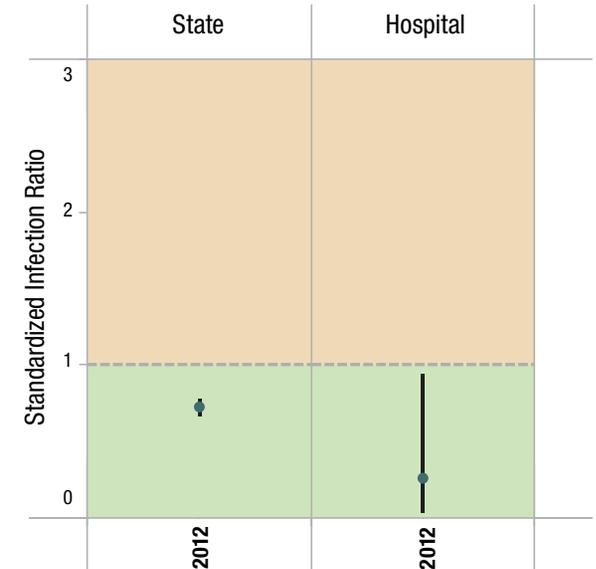
**SIR values only calculated if expected infections ≥ 1*

2009 SSIs: 0	Procedures: 573	Procedures with SSI (%): 0.00	SIR: *
2010 SSIs: 0	Procedures: 439	Procedures with SSI (%): 0.00	SIR: *
2011 SSIs: 0	Procedures: 349	Procedures with SSI (%): 0.00	SIR: *
2012 SSIs: 1	Procedures: 372	Procedures with SSI (%): 2.69	SIR: *

Central Line Associated Bloodstream Infections (CLABSIs), Neonatal ICUs

Hospital does not have a NICU

Incident Clostridium difficile Infections

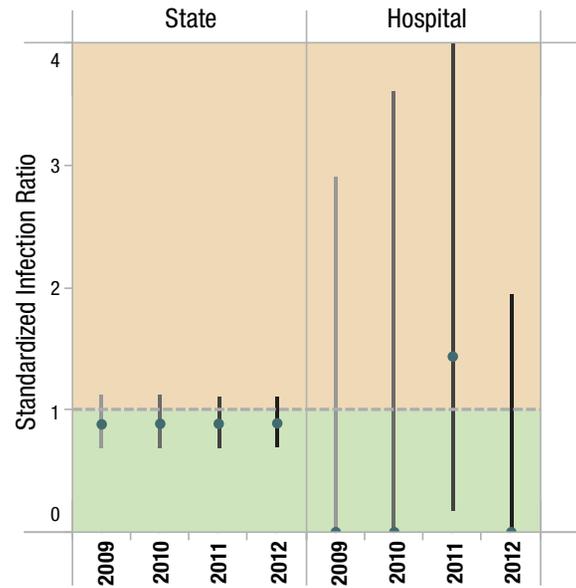


012 Infections: 2 Patient-Days: 12804 Rate/1000 pt-days: 0.16 SIR: 0.260

Coronary Artery Bypass Graft Surgery

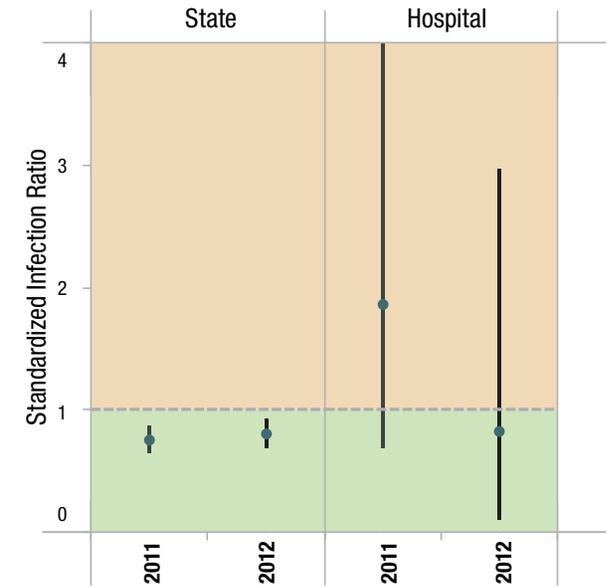
Hospital does not perform this procedure

Knee Replacement Surgery



2009 SSIs: 0	Procedures: 131	Procedures with SSI (%): 0.00	SIR: 0.000
2010 SSIs: 0	Procedures: 115	Procedures with SSI (%): 0.00	SIR: 0.000
2011 SSIs: 2	Procedures: 151	Procedures with SSI (%): 1.32	SIR: 1.435
2012 SSIs: 0	Procedures: 202	Procedures with SSI (%): 0.00	SIR: 0.000

Colon Surgery

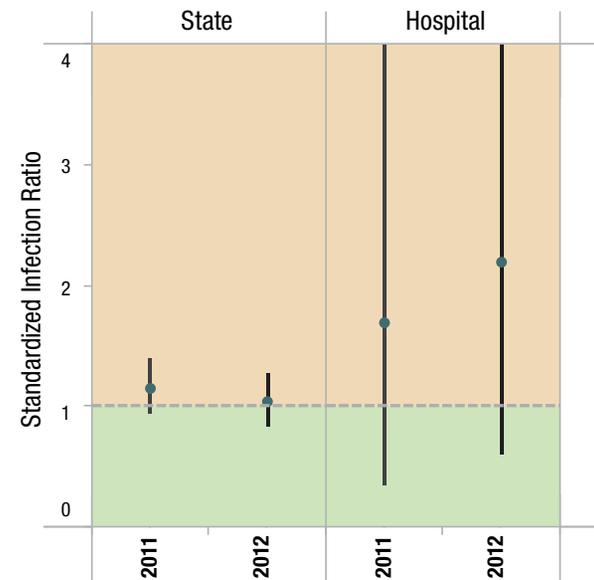


2011 SSIs: 6	Procedures: 59	Procedures with SSI (%): 10.17	SIR: 1.860
2012 SSIs: 2	Procedures: 41	Procedures with SSI (%): 4.88	SIR: 0.823

Abdominal Hysterectomy Surgery

**SIR values only calculated if expected infections ≥ 1*

Hip Replacement Surgery



2011 SSIs: 0	Procedures: 38	Procedures with SSI (%): 0.00	SIR: *
2012 SSIs: 0	Procedures: 22	Procedures with SSI (%): 0.00	SIR: *

2011 SSIs: 3	Procedures: 131	Procedures with SSI (%): 2.29	SIR: 1.689
2012 SSIs: 4	Procedures: 145	Procedures with SSI (%): 2.76	SIR: 2.191

Laminectomy Surgery

**SIR values only calculated if expected infections ≥ 1*

2011 SSIs: 0	Procedures: 24	Procedures with SSI (%): 0.00	SIR: *
2012 SSIs: 0	Procedures: 21	Procedures with SSI (%): 0.00	SIR: *

Sacred Heart Medical Center at RiverBend

Location: Springfield
 Ownership: Non Profit
 Med. School Affiliation: None
 ICU Beds: 78
 Total Staffed Beds: 395
 2012 Admissions: 26,025
 2012 Patient Days: 101,425
 ICP FTE: 3

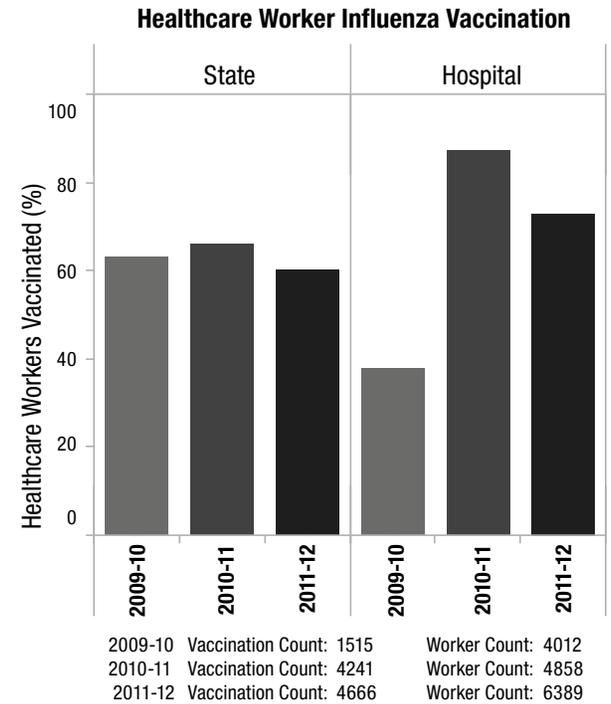
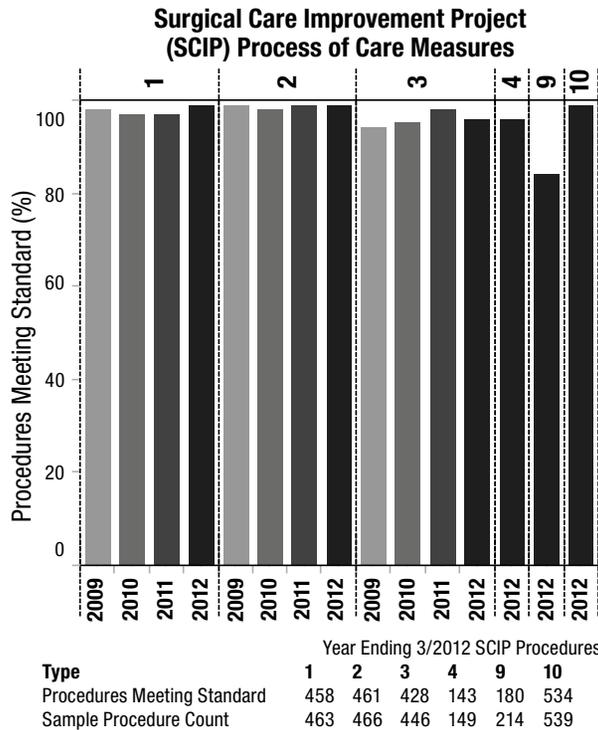


2009
 2010
 2011
 2012

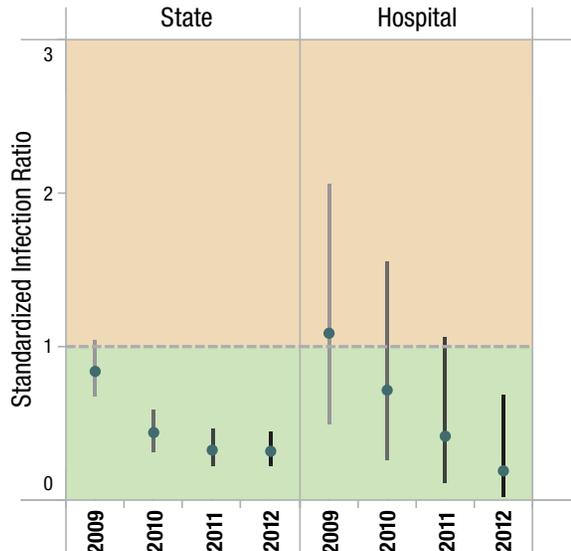
If the vertical measurement line crosses 1.0 (is in both colors) then the infection rate is not significantly different than expected.

If the line is entirely in the color:

- More infections were observed than expected
- Fewer infections were observed than expected



Central Line Associated Bloodstream Infections (CLABSIs), Adult Medical/Surgical ICUs



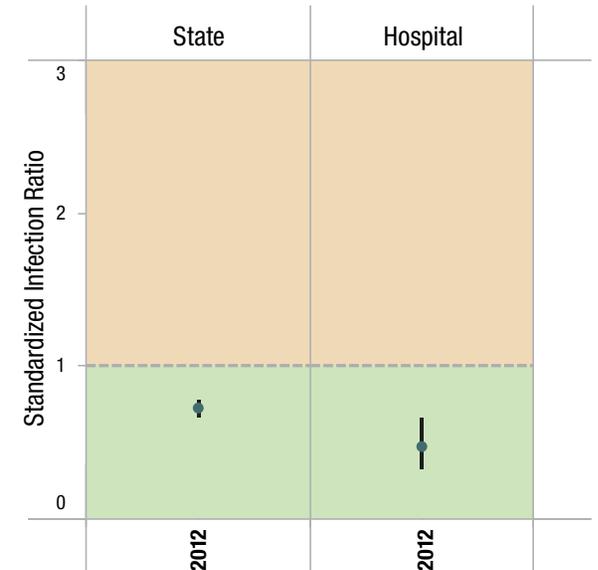
2009	CLABSIs: 9	CL Days: 5031	Rate per 1000 CL days: 1.79	SIR: 1.087
2010	CLABSIs: 6	CL Days: 5149	Rate per 1000 CL days: 1.17	SIR: 0.716
2011	CLABSIs: 4	CL Days: 5414	Rate per 1000 CL days: 0.74	SIR: 0.416
2012	CLABSIs: 2	CL Days: 4864	Rate per 1000 CL days: 0.41	SIR: 0.190

Central Line Associated Bloodstream Infections (CLABSIs), Neonatal ICUs

**SIR values only calculated if expected infections ≥ 1*

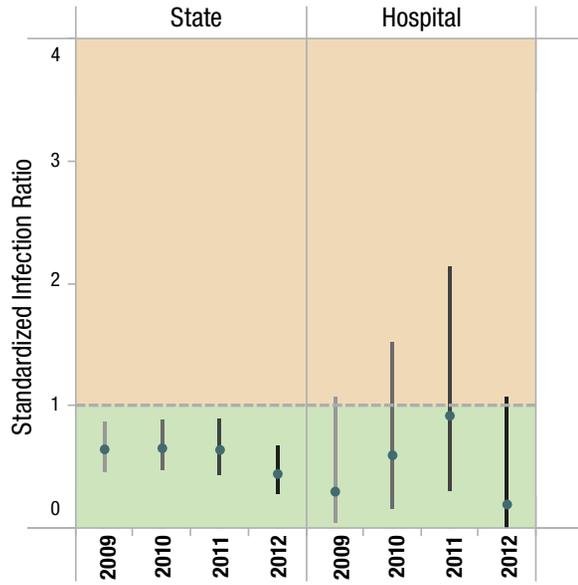
2011	CLABSIs: 2	CL Days: 353	Rate per 1000 CL days: 5.67	SIR: *
2012	CLABSIs: 0	CL Days: 240	Rate per 1000 CL days: 0.00	SIR: *

Incident Clostridium difficile Infections



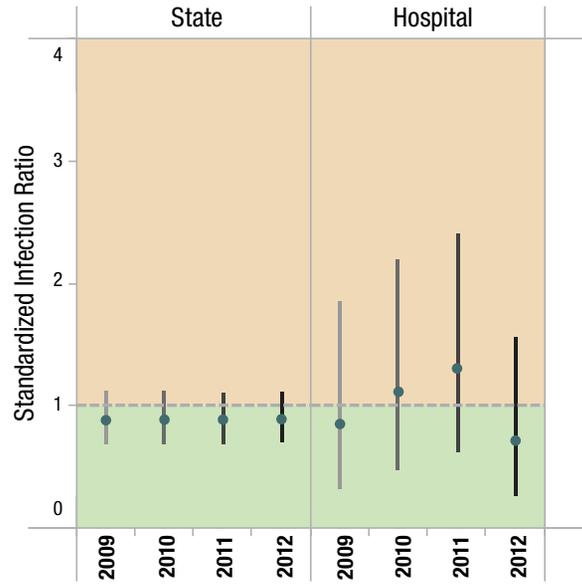
2012	Infections: 32	Patient-Days: 95126	Rate/1000 pt-days: 0.34	SIR: 0.474
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Coronary Artery Bypass Graft Surgery



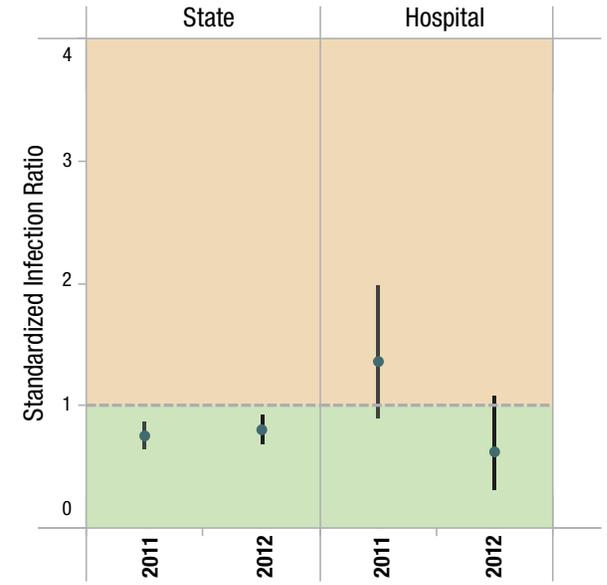
2009 SSIs: 2	Procedures: 313	Procedures with SSI (%): 0.64	SIR: 0.297
2010 SSIs: 4	Procedures: 312	Procedures with SSI (%): 1.28	SIR: 0.594
2011 SSIs: 5	Procedures: 266	Procedures with SSI (%): 1.88	SIR: 0.917
2012 SSIs: 1	Procedures: 260	Procedures with SSI (%): 0.38	SIR: 0.192

Knee Replacement Surgery



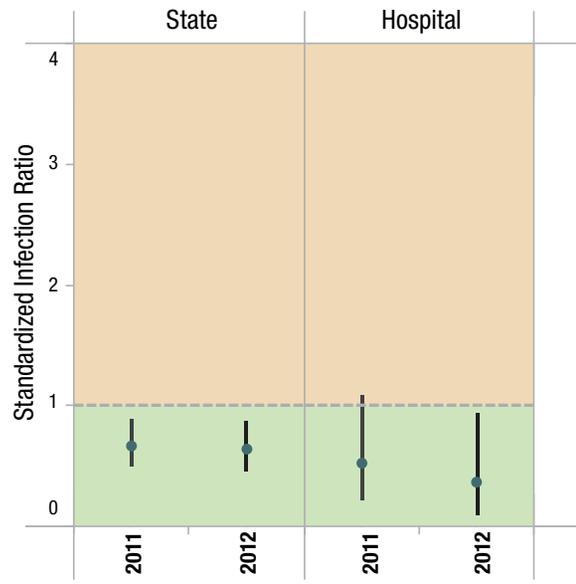
2009 SSIs: 6	Procedures: 709	Procedures with SSI (%): 0.85	SIR: 0.850
2010 SSIs: 8	Procedures: 728	Procedures with SSI (%): 1.10	SIR: 1.113
2011 SSIs: 10	Procedures: 767	Procedures with SSI (%): 1.30	SIR: 1.304
2012 SSIs: 6	Procedures: 813	Procedures with SSI (%): 0.74	SIR: 0.714

Colon Surgery



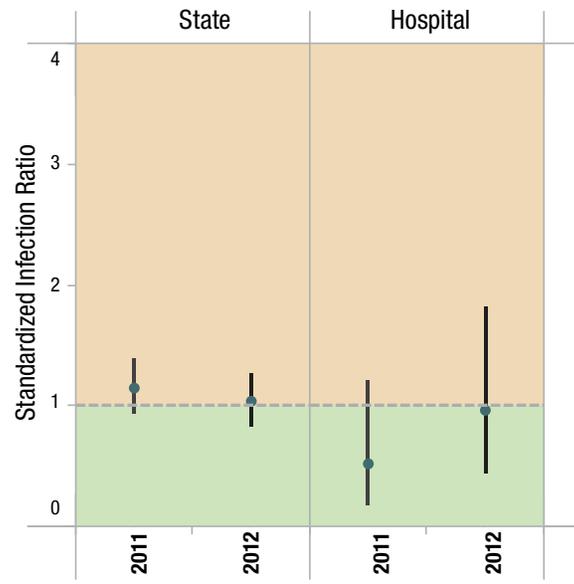
2011 SSIs: 27	Procedures: 332	Procedures with SSI (%): 8.13	SIR: 1.360
2012 SSIs: 12	Procedures: 315	Procedures with SSI (%): 3.81	SIR: 0.622

Abdominal Hysterectomy Surgery



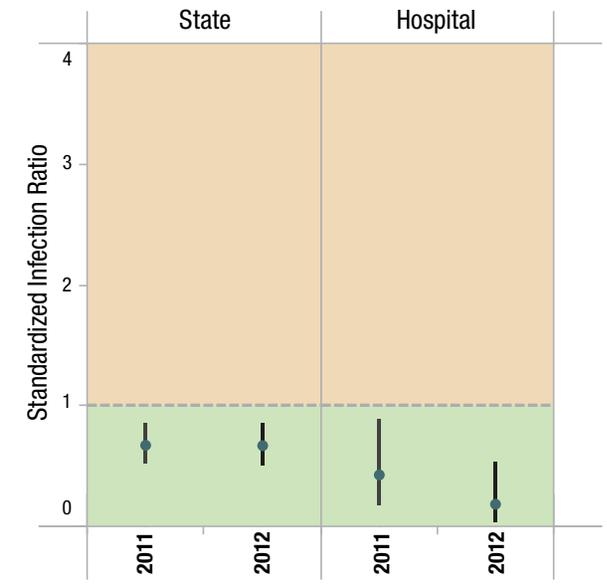
2011 SSIs: 7	Procedures: 520	Procedures with SSI (%): 1.35	SIR: 0.523
2012 SSIs: 4	Procedures: 453	Procedures with SSI (%): 0.88	SIR: 0.366

Hip Replacement Surgery



2011 SSIs: 5	Procedures: 676	Procedures with SSI (%): 0.74	SIR: 0.518
2012 SSIs: 9	Procedures: 682	Procedures with SSI (%): 1.32	SIR: 0.961

Laminectomy Surgery



2011 SSIs: 7	Procedures: 1405	Procedures with SSI (%): 0.50	SIR: 0.426
2012 SSIs: 3	Procedures: 1378	Procedures with SSI (%): 0.22	SIR: 0.183

Sacred Heart Medical Center at University

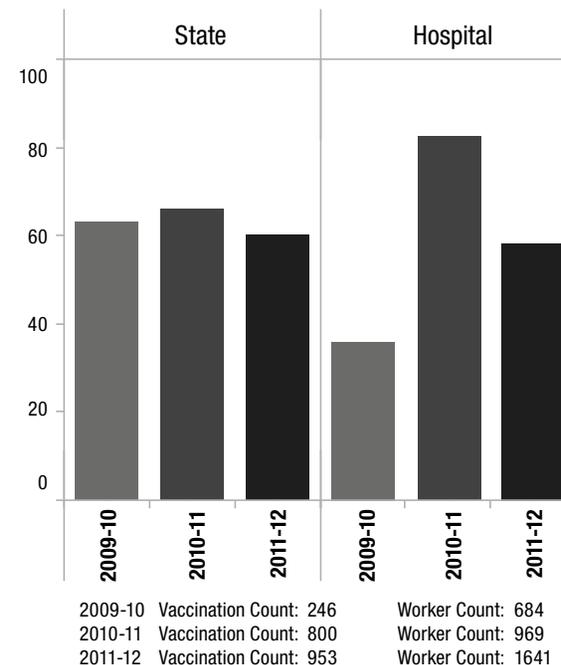
Location:	Eugene
Ownership:	Non Profit
Med. School Affiliation:	None
ICU Beds:	0
Total Staffed Beds:	104
2012 Admissions:	2,524
2012 Patient Days:	19,575
ICP FTE:	1



Surgical Care Improvement Project (SCIP) Process of Care Measures

Hospital does not perform these procedures

Healthcare Worker Influenza Vaccination



2009
 2010
 2011
 2012

If the vertical measurement line crosses 1.0 (is in both colors) then the infection rate is not significantly different than expected.

If the line is entirely in the color:

- More infections were observed than expected
- Fewer infections were observed than expected

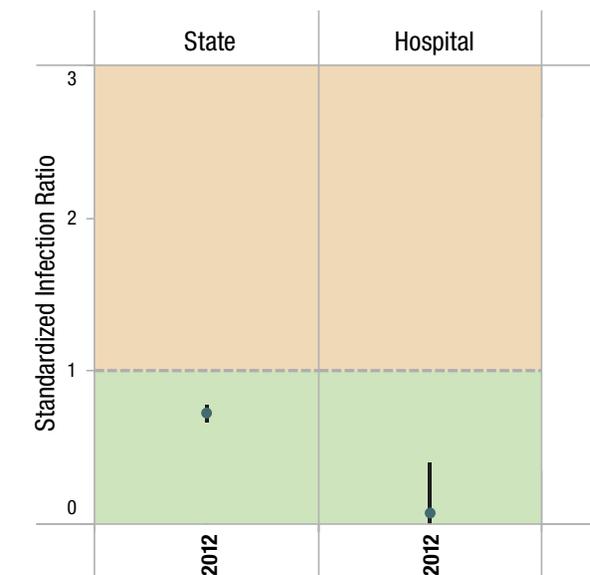
Central Line Associated Bloodstream Infections (CLABSIs), Adult Medical/Surgical ICUs

Hospital does not have an ICU

Central Line Associated Bloodstream Infections (CLABSIs), Neonatal ICUs

Hospital does not have a NICU

Incident *Clostridium difficile* Infections



2012 Infections: 1 Patient-Days: 21653 Rate/1000 pt-days: 0.05 SIR: 0.072

Coronary Artery Bypass Graft Surgery

*Hospital does not perform
this procedure*

Knee Replacement Surgery

*Hospital does not perform
this procedure*

Colon Surgery

*Hospital does not perform
this procedure*

Abdominal Hysterectomy Surgery

*Hospital does not perform
this procedure*

Hip Replacement Surgery

*Hospital does not perform
this procedure*

Laminectomy Surgery

*Hospital does not perform
this procedure*

Salem Hospital

Location: Salem
 Ownership: Non Profit
 Med. School Affiliation: None
 ICU Beds: 75
 Total Staffed Beds: 454
 2012 Admissions: 20,719
 2012 Patient Days: 93,523
 ICP FTE: 2.5



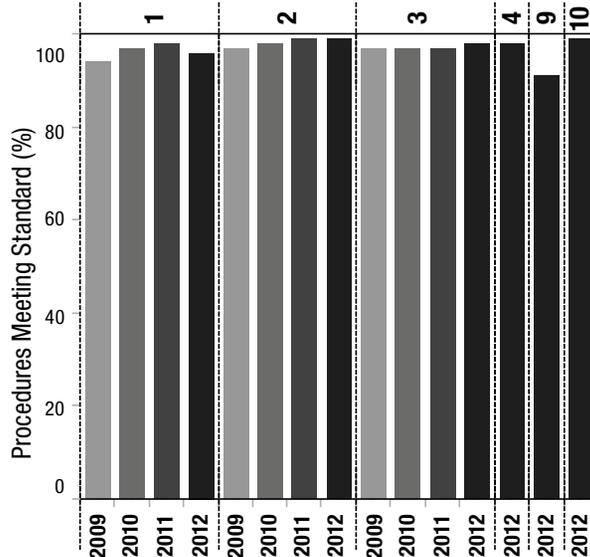
■ 2009 ■ 2010 ■ 2011 ■ 2012

If the vertical measurement line crosses 1.0 (is in both colors) then the infection rate is not significantly different than expected.

If the line is entirely in the color:

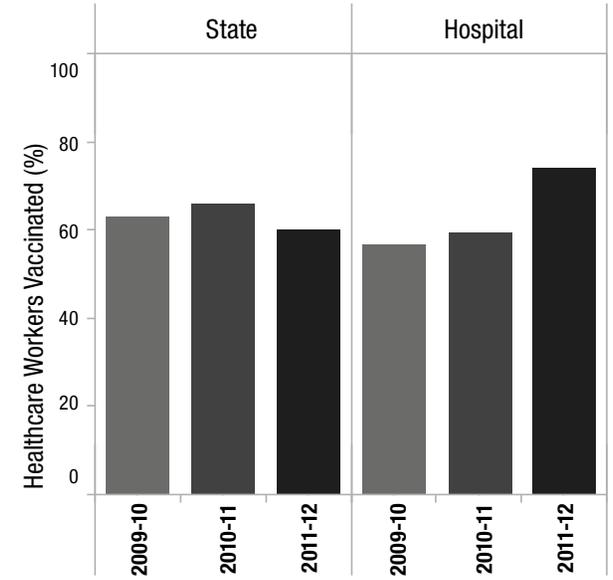
■ More infections were observed than expected
 ■ Fewer infections were observed than expected

Surgical Care Improvement Project (SCIP) Process of Care Measures



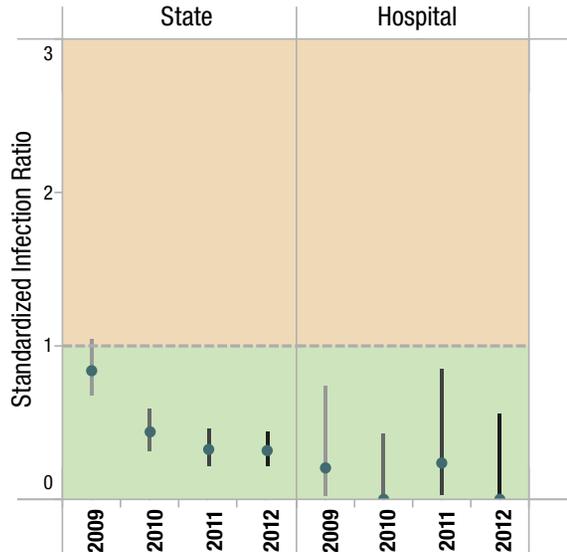
Type	1	2	3	4	9	10
Procedures Meeting Standard	491	511	486	171	401	505
Sample Procedure Count	511	516	496	174	441	510

Healthcare Worker Influenza Vaccination



Year	Vaccination Count	Worker Count
2009-10	2829	4993
2010-11	2378	4006
2011-12	3606	4866

Central Line Associated Bloodstream Infections (CLABSIs), Adult Medical/Surgical ICUs



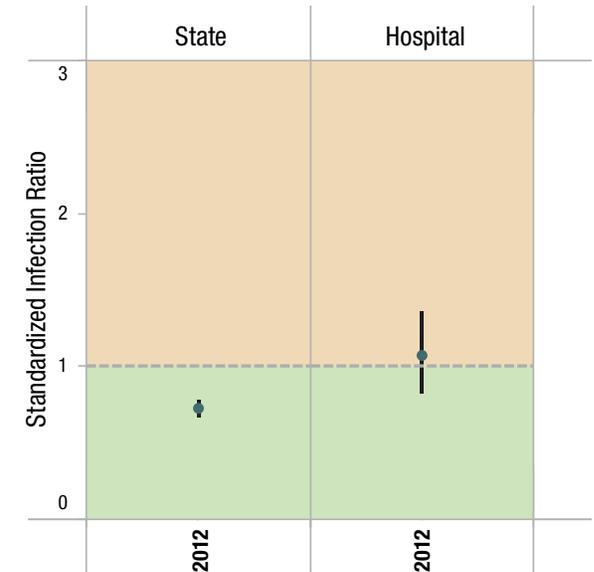
2009	CLABSIs: 2	CL Days: 6513	Rate per 1000 CL days: 0.31	SIR: 0.205
2010	CLABSIs: 0	CL Days: 5686	Rate per 1000 CL days: 0.00	SIR: 0.000
2011	CLABSIs: 2	CL Days: 5617	Rate per 1000 CL days: 0.36	SIR: 0.237
2012	CLABSIs: 0	CL Days: 4387	Rate per 1000 CL days: 0.00	SIR: 0.000

Central Line Associated Bloodstream Infections (CLABSIs), Neonatal ICUs

**SIR values only calculated if expected infections ≥ 1*

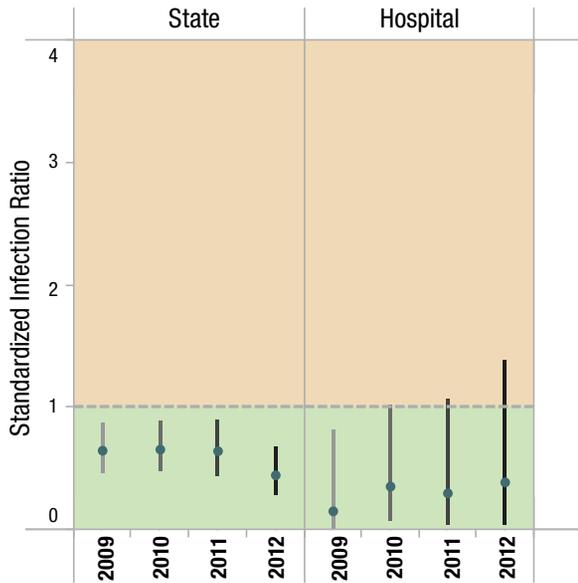
2011	CLABSIs: 0	CL Days: 155	Rate per 1000 CL days: 0.00	SIR: *
2012	CLABSIs: 0	CL Days: 147	Rate per 1000 CL days: 0.00	SIR: *

Incident Clostridium difficile Infections



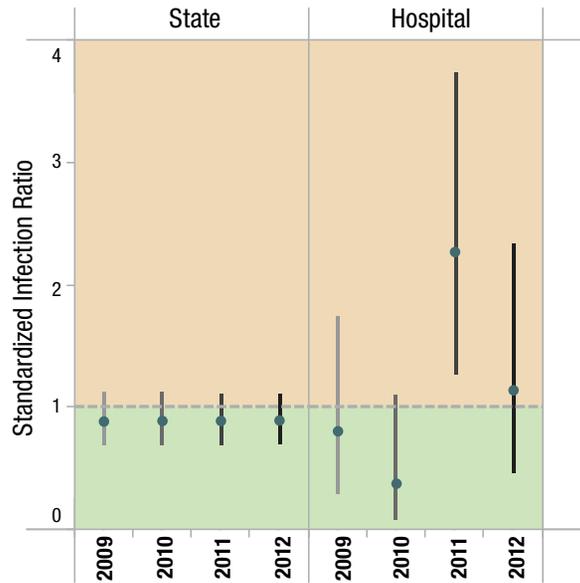
2012	Infections: 66	Patient-Days: 77343	Rate/1000 pt-days: 0.85	SIR: 1.072
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Coronary Artery Bypass Graft Surgery



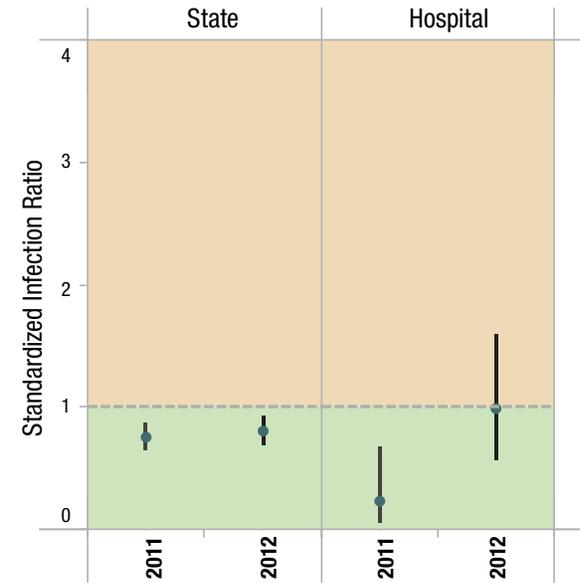
2009 SSIs: 1	Procedures: 300	Procedures with SSI (%): 0.33	SIR: 0.147
2010 SSIs: 3	Procedures: 434	Procedures with SSI (%): 0.69	SIR: 0.349
2011 SSIs: 2	Procedures: 339	Procedures with SSI (%): 0.59	SIR: 0.294
2012 SSIs: 2	Procedures: 288	Procedures with SSI (%): 0.69	SIR: 0.383

Knee Replacement Surgery



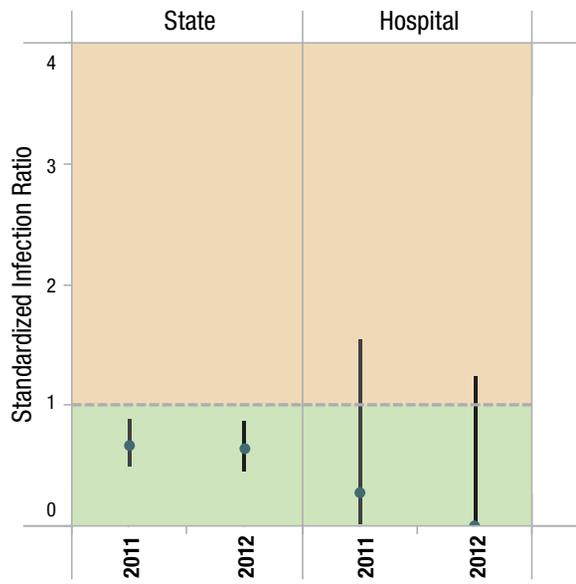
2009 SSIs: 6	Procedures: 648	Procedures with SSI (%): 0.93	SIR: 0.801
2010 SSIs: 3	Procedures: 715	Procedures with SSI (%): 0.42	SIR: 0.373
2011 SSIs: 15	Procedures: 673	Procedures with SSI (%): 2.23	SIR: 2.266
2012 SSIs: 7	Procedures: 757	Procedures with SSI (%): 0.92	SIR: 1.136

Colon Surgery



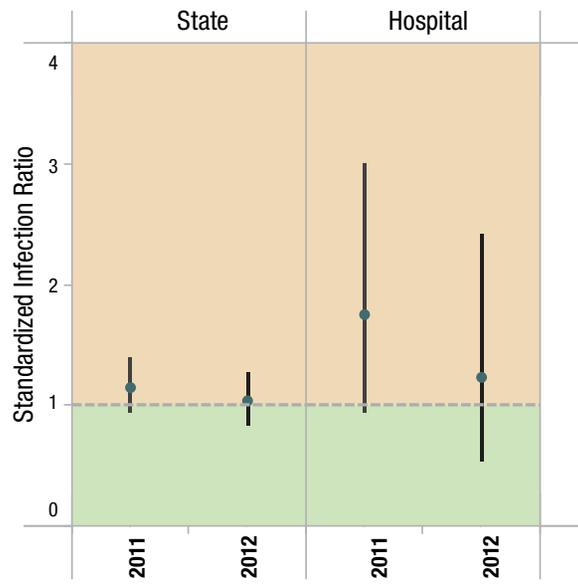
2011 SSIs: 3	Procedures: 181	Procedures with SSI (%): 1.66	SIR: 0.230
2012 SSIs: 16	Procedures: 255	Procedures with SSI (%): 6.27	SIR: 0.987

Abdominal Hysterectomy Surgery



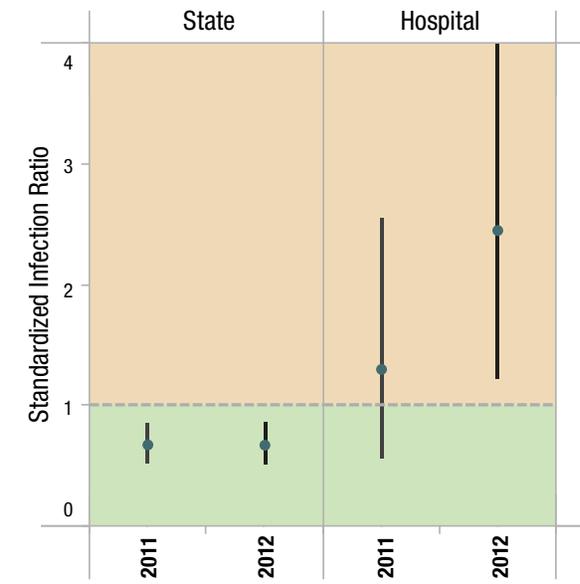
2011 SSIs: 1	Procedures: 109	Procedures with SSI (%): 0.92	SIR: 0.275
2012 SSIs: 0	Procedures: 105	Procedures with SSI (%): 0.00	SIR: 0.000

Hip Replacement Surgery



2011 SSIs: 13	Procedures: 566	Procedures with SSI (%): 2.30	SIR: 1.750
2012 SSIs: 8	Procedures: 558	Procedures with SSI (%): 1.43	SIR: 1.230

Laminectomy Surgery



2011 SSIs: 8	Procedures: 462	Procedures with SSI (%): 1.73	SIR: 1.296
2012 SSIs: 11	Procedures: 359	Procedures with SSI (%): 3.06	SIR: 2.446

Samaritan Albany General Hospital

Location:	Albany
Ownership:	Non Profit
Med. School Affiliation:	Undergraduate
ICU Beds:	9
Total Staffed Beds:	79
2012 Admissions:	3,951
2012 Patient Days:	11,269
ICP FTE:	1.3



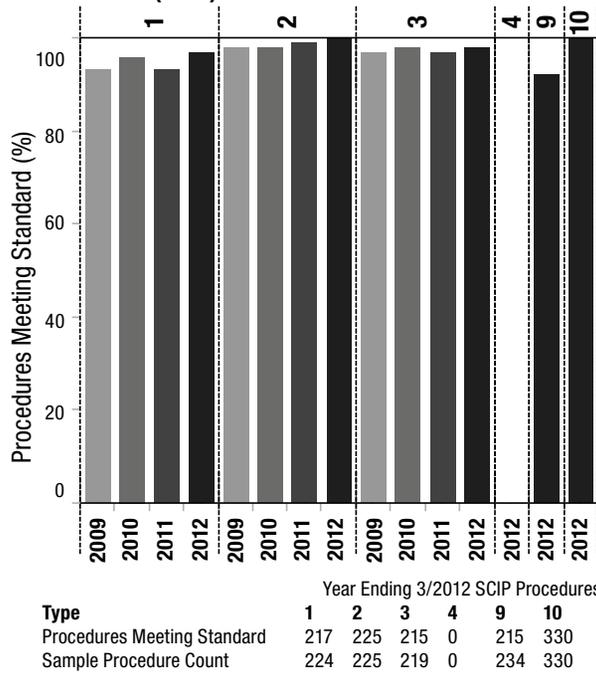
2009
 2010
 2011
 2012

If the vertical measurement line crosses 1.0 (is in both colors) then the infection rate is not significantly different than expected.

If the line is entirely in the color:

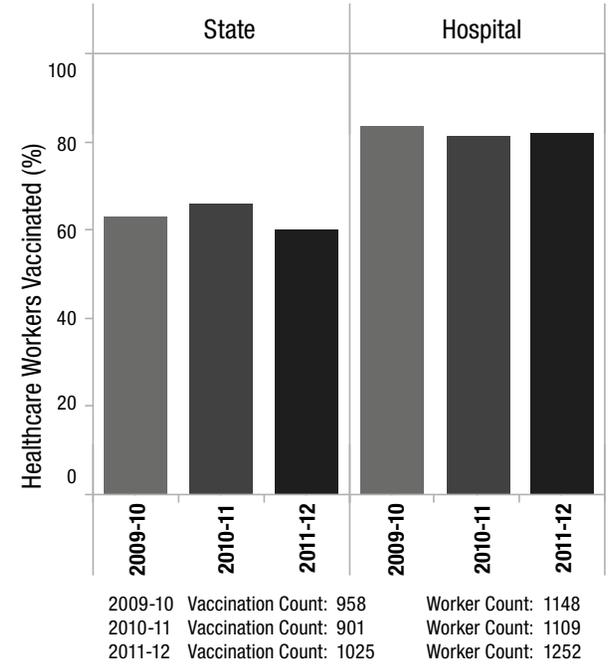
- More infections were observed than expected
- Fewer infections were observed than expected

Surgical Care Improvement Project (SCIP) Process of Care Measures



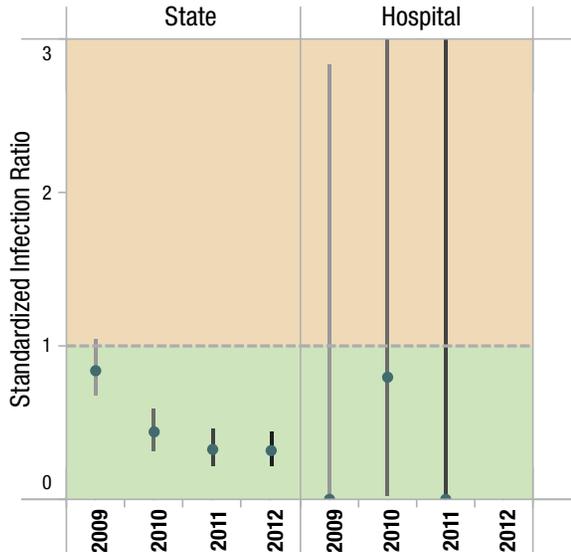
Type	1	2	3	4	9	10
Procedures Meeting Standard	217	225	215	0	215	330
Sample Procedure Count	224	225	219	0	234	330

Healthcare Worker Influenza Vaccination



Year	Vaccination Count	Worker Count
2009-10	958	1148
2010-11	901	1109
2011-12	1025	1252

Central Line Associated Bloodstream Infections (CLABSIs), Adult Medical/Surgical ICUs



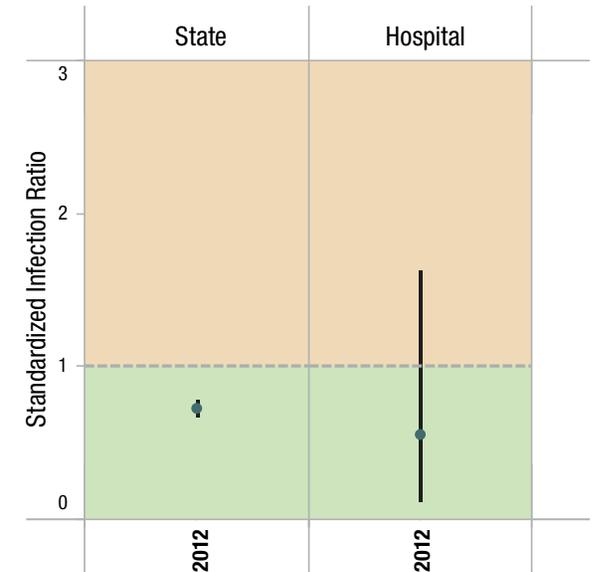
Year	CLABSIs	CL Days	Rate per 1000 CL days	SIR
2009	0	868	0.00	0.000
2010	1	837	1.19	0.796
2011	0	774	0.00	0.000
2012	1	655	1.53	*

*SIR values only calculated if expected infections ≥ 1

Central Line Associated Bloodstream Infections (CLABSIs), Neonatal ICUs

Hospital does not have a NICU

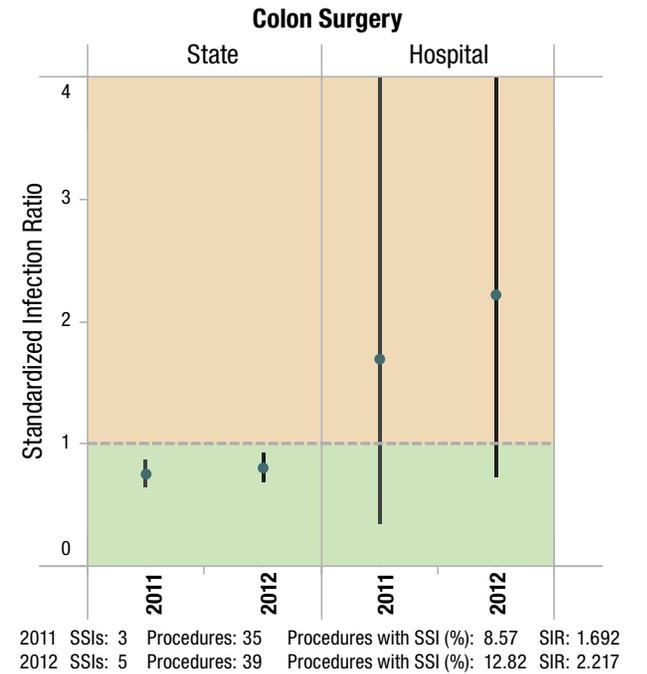
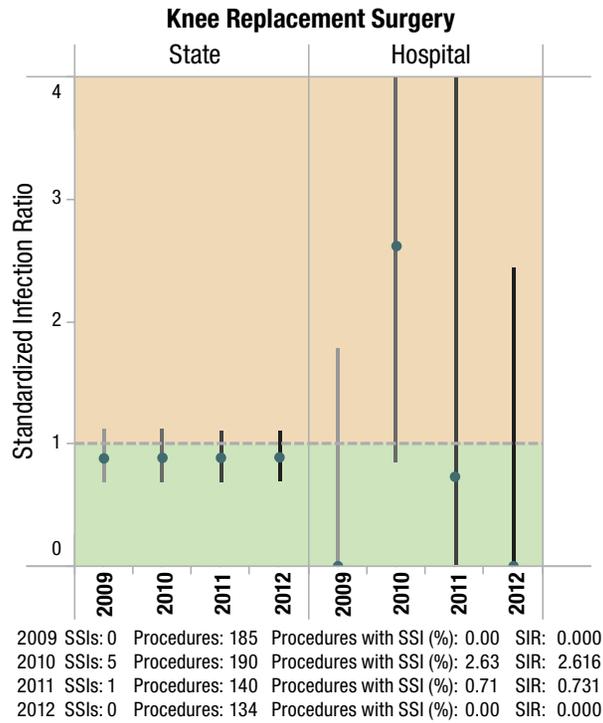
Incident Clostridium difficile Infections



Year	Infections	Patient-Days	Rate/1000 pt-days	SIR
2012	3	11066	0.27	0.555

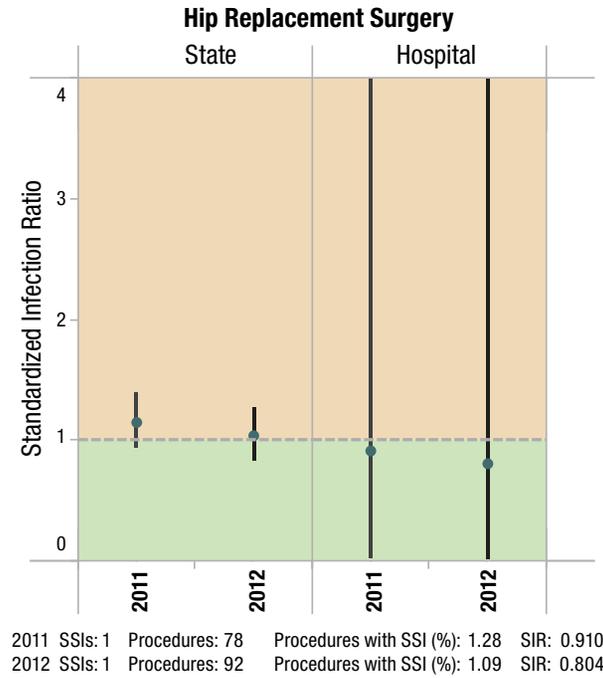
Coronary Artery Bypass Graft Surgery

Hospital does not perform this procedure



Abdominal Hysterectomy Surgery

**SIR values only calculated if expected infections ≥1*



Laminectomy Surgery

Hospital does not perform this procedure

2011 SSIs: 0 Procedures: 35 Procedures with SSI (%): 0.00 SIR: *
 2012 SSIs: 2 Procedures: 41 Procedures with SSI (%): 4.88 SIR: *

Samaritan Lebanon Community Hospital

Location: Lebanon
 Ownership: Non Profit
 Med. School Affiliation: Graduate
 ICU Beds: 6
 Total Staffed Beds: 25
 2012 Admissions: 1,786
 2012 Patient Days: 5,224
 ICP FTE: 1



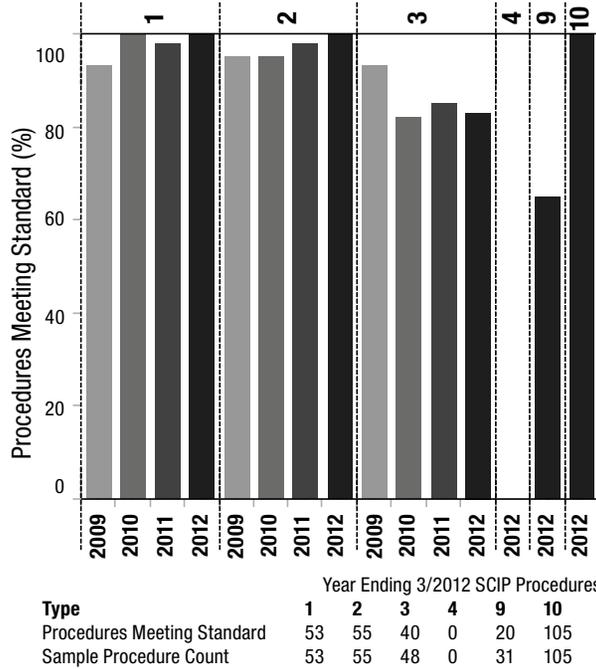
2009 2010 2011 2012

If the vertical measurement line crosses 1.0 (is in both colors) then the infection rate is not significantly different than expected.

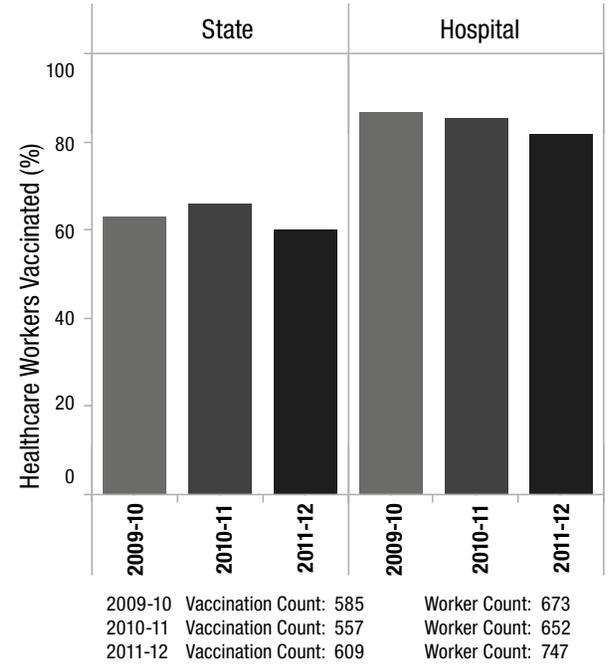
If the line is entirely in the color:

- More infections were observed than expected
- Fewer infections were observed than expected

Surgical Care Improvement Project (SCIP) Process of Care Measures



Healthcare Worker Influenza Vaccination



Central Line Associated Bloodstream Infections (CLABSIs), Adult Medical/Surgical ICUs

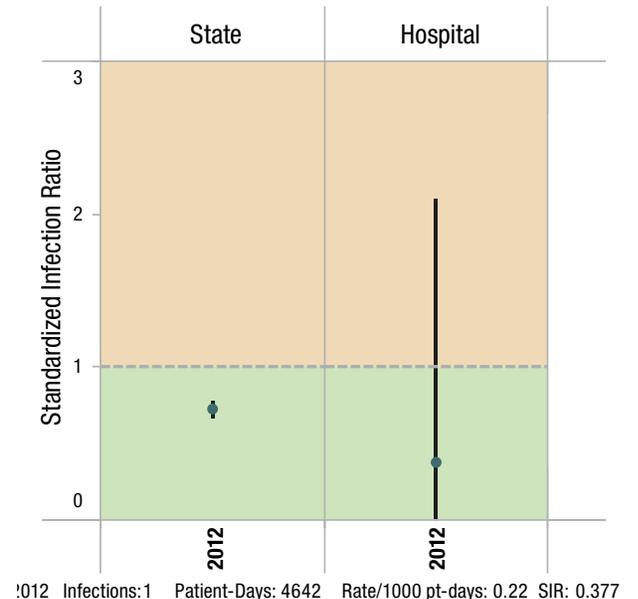
**SIR values only calculated if expected infections ≥ 1*

2009 CLABSIs: 0	CL Days: 325	Rate per 1000 CL days: 0.00	SIR: *
2010 CLABSIs: 0	CL Days: 338	Rate per 1000 CL days: 0.00	SIR: *
2011 CLABSIs: 0	CL Days: 297	Rate per 1000 CL days: 0.00	SIR: *
2012 CLABSIs: 0	CL Days: 318	Rate per 1000 CL days: 0.00	SIR: *

Central Line Associated Bloodstream Infections (CLABSIs), Neonatal ICUs

Hospital does not have a NICU

Incident *Clostridium difficile* Infections

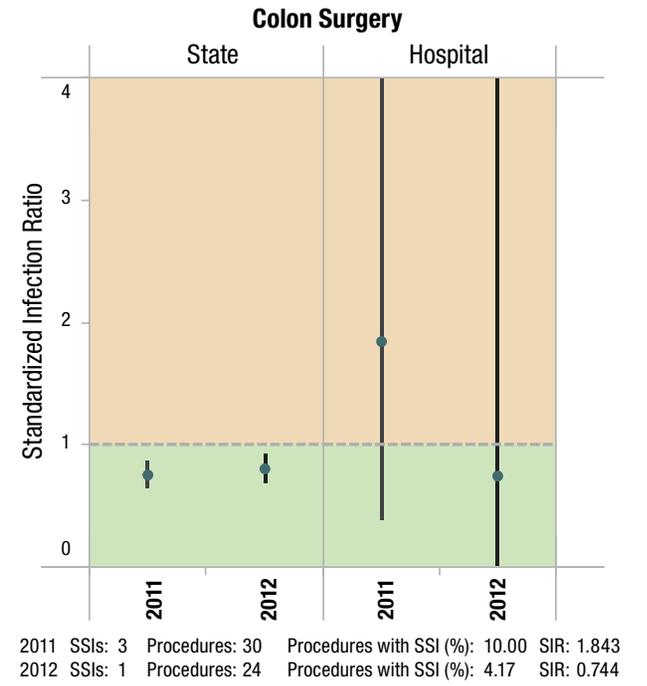


Coronary Artery Bypass Graft Surgery

Hospital does not perform this procedure

Knee Replacement Surgery

Too few procedures to report



Abdominal Hysterectomy Surgery

Too few procedures to report

Hip Replacement Surgery

Too few procedures to report

Laminectomy Surgery

Hospital does not perform this procedure

Samaritan North Lincoln Hospital

Location: Lincoln City
 Ownership: Non Profit
 Med. School Affiliation: Major
 ICU Beds: 4
 Total Staffed Beds: 25
 2012 Admissions: 1,061
 2012 Patient Days: 2,759
 ICP FTE: 1



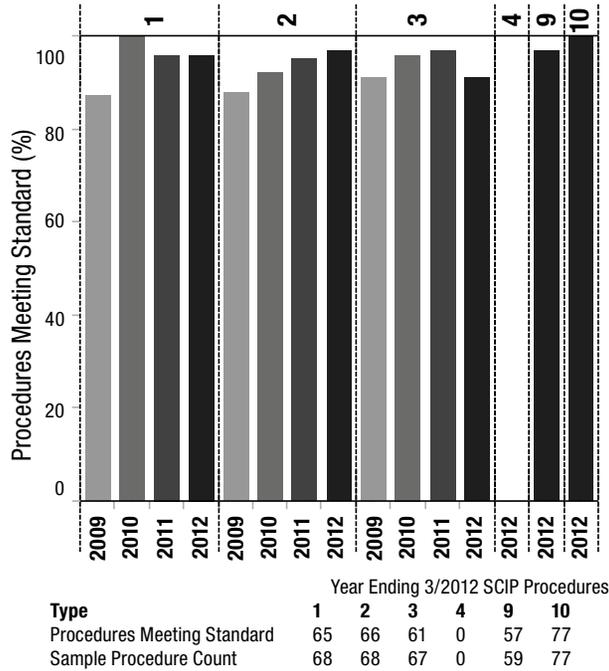
2009 2010 2011 2012

If the vertical measurement line crosses 1.0 (is in both colors) then the infection rate is not significantly different than expected.

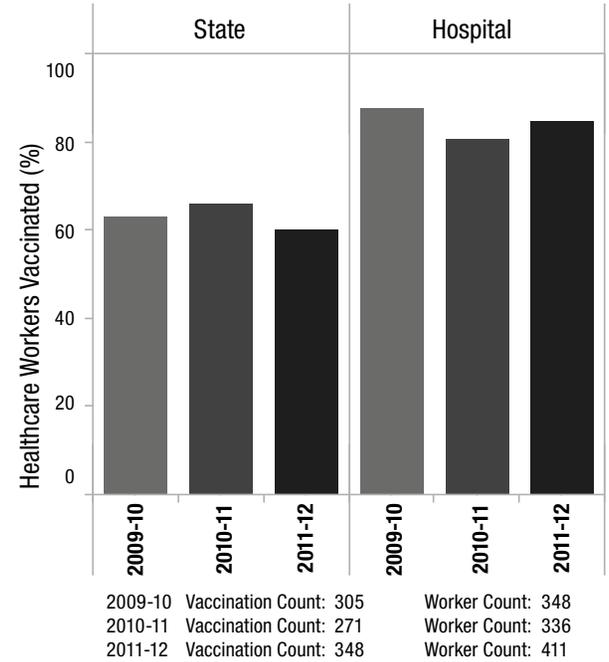
If the line is entirely in the color:

- More infections were observed than expected
- Fewer infections were observed than expected

Surgical Care Improvement Project (SCIP) Process of Care Measures



Healthcare Worker Influenza Vaccination



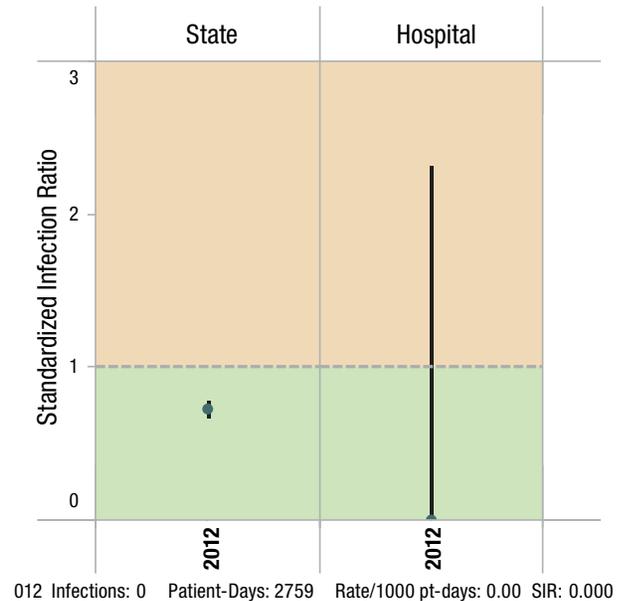
Central Line Associated Bloodstream Infections (CLABSIs), Adult Medical/Surgical ICUs

Too few procedures to report

Central Line Associated Bloodstream Infections (CLABSIs), Neonatal ICUs

Hospital does not have a NICU

Incident *Clostridium difficile* Infections



Coronary Artery Bypass Graft Surgery

Hospital does not perform this procedure

Knee Replacement Surgery

**SIR values only calculated if expected infections ≥ 1*

Colon Surgery

Too few procedures to report

2009 SSIs: 1	Procedures: 33	Procedures with SSI (%): 3.03	SIR: *
2010 SSIs: 0	Procedures: 56	Procedures with SSI (%): 0.00	SIR: *
2011 SSIs: 0	Procedures: 34	Procedures with SSI (%): 0.00	SIR: *
2012 SSIs: 0	Procedures: 47	Procedures with SSI (%): 0.00	SIR: *

Abdominal Hysterectomy Surgery

Too few procedures to report

Hip Replacement Surgery

Too few procedures to report

Laminectomy Surgery

Hospital does not perform this procedure

Samaritan Pacific Communities Hospital

Location: Newport
 Ownership: Non Profit
 Med. School Affiliation: None
 ICU Beds: 5
 Total Staffed Beds: 25
 2012 Admissions: 1,374
 2012 Patient Days: 4,094
 ICP FTE: 1



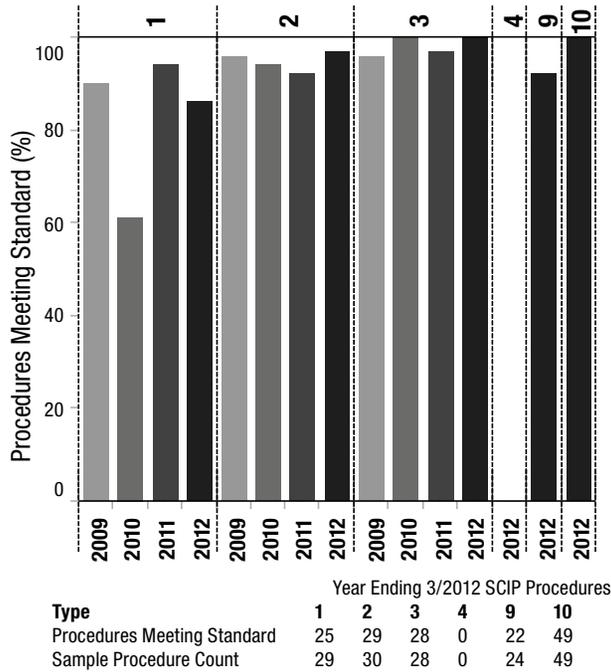
2009 2010 2011 2012

If the vertical measurement line crosses 1.0 (is in both colors) then the infection rate is not significantly different than expected.

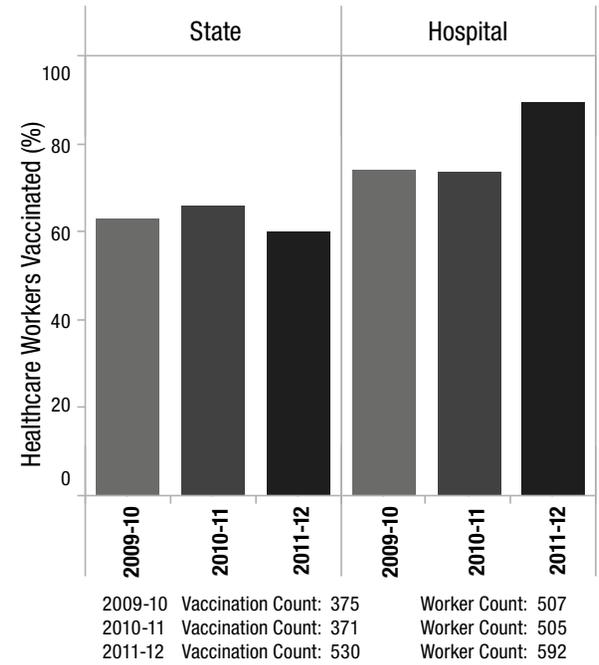
If the line is entirely in the color:

- More infections were observed than expected
- Fewer infections were observed than expected

Surgical Care Improvement Project (SCIP) Process of Care Measures



Healthcare Worker Influenza Vaccination



Central Line Associated Bloodstream Infections (CLABSIs), Adult Medical/Surgical ICUs

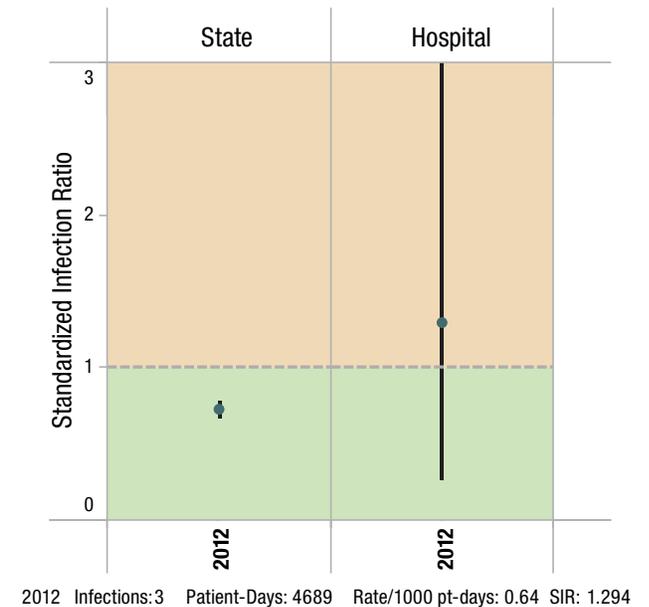
**SIR values only calculated if expected infections ≥ 1*

2009	CLABSIs: 0	CL Days: 149	Rate per 1000 CL days: 0.00	SIR: *
2010	CLABSIs: 0	CL Days: 186	Rate per 1000 CL days: 0.00	SIR: *
2011	CLABSIs: 0	CL Days: 212	Rate per 1000 CL days: 0.00	SIR: *
2012	CLABSIs: 0	CL Days: 236	Rate per 1000 CL days: 0.00	SIR: *

Central Line Associated Bloodstream Infections (CLABSIs), Neonatal ICUs

Hospital does not have a NICU

Incident Clostridium difficile Infections



Coronary Artery Bypass Graft Surgery

*Hospital does not perform
this procedure*

Knee Replacement Surgery

Too few procedures to report

Colon Surgery

Too few procedures to report

Abdominal Hysterectomy Surgery

Too few procedures to report

Hip Replacement Surgery

Too few procedures to report

Laminectomy Surgery

*Hospital does not perform
this procedure*

Santiam Memorial Hospital

Location: Stayton
 Ownership: Non Profit
 Med. School Affiliation: None
 ICU Beds: 0
 Total Staffed Beds: 40
 2012 Admissions: 1,043
 2012 Patient Days: 2,972
 ICP FTE: 1



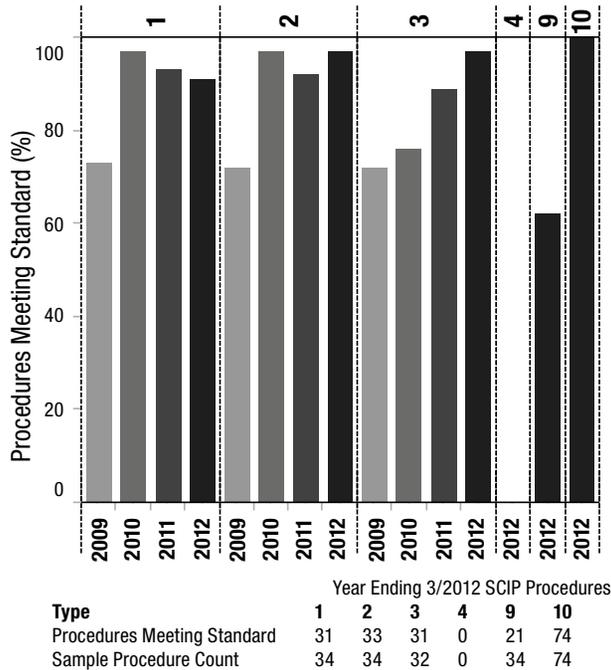
2009 2010 2011 2012

If the vertical measurement line crosses 1.0 (is in both colors) then the infection rate is not significantly different than expected.

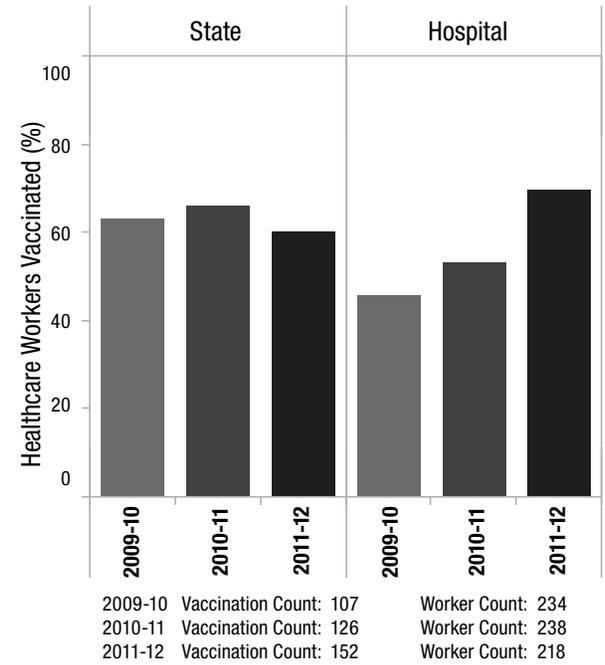
If the line is entirely in the color:

- More infections were observed than expected
- Fewer infections were observed than expected

Surgical Care Improvement Project (SCIP) Process of Care Measures



Healthcare Worker Influenza Vaccination



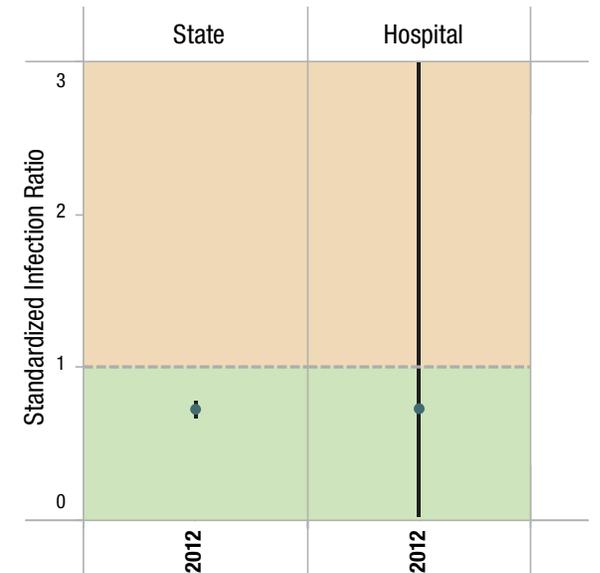
Central Line Associated Bloodstream Infections (CLABSIs), Adult Medical/Surgical ICUs

Hospital does not have an ICU

Central Line Associated Bloodstream Infections (CLABSIs), Neonatal ICUs

Hospital does not have a NICU

Incident *Clostridium difficile* Infections



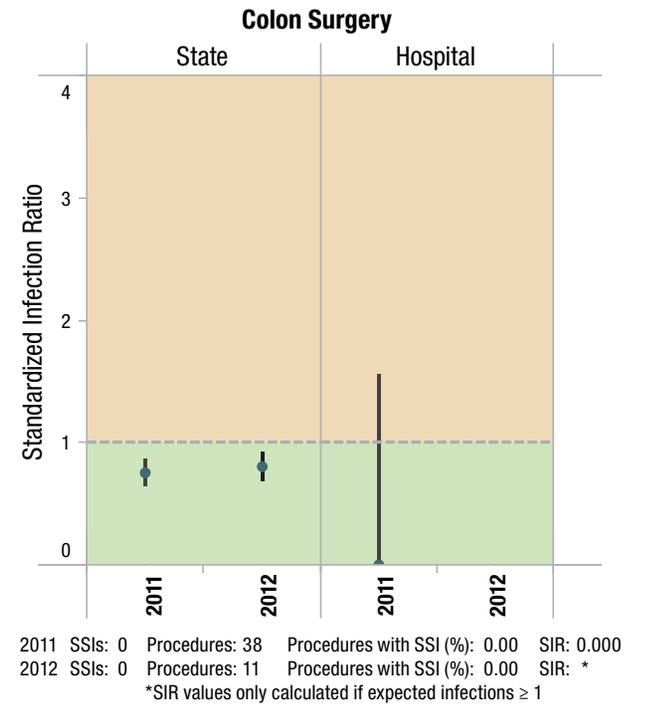
2012 Infections: 1 Patient-Days: 2516 Rate/1000 pt-days: 0.40 SIR: 0.730

Coronary Artery Bypass Graft Surgery

Hospital does not perform this procedure

Knee Replacement Surgery

Too few procedures to report



Abdominal Hysterectomy Surgery

Too few procedures to report

Hip Replacement Surgery

Too few procedures to report

Laminectomy Surgery

Hospital does not perform this procedure

Shriner's Hospital for Children

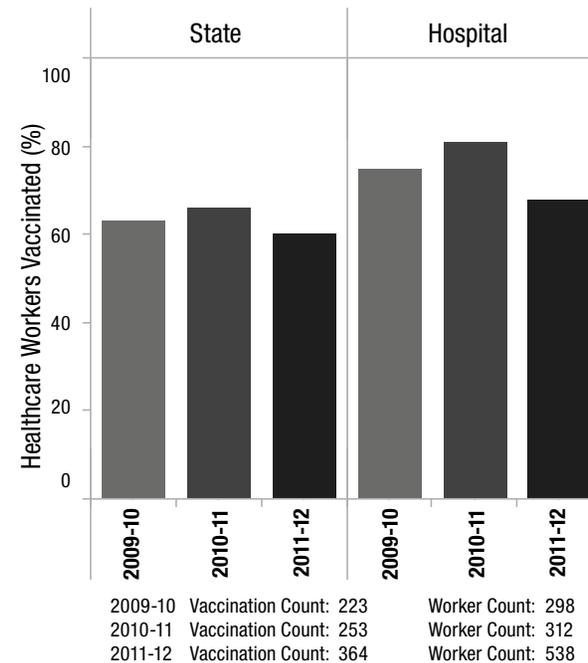
Location:	Portland
Ownership:	Non Profit
Med. School Affiliation:	Major
ICU Beds:	0
Total Staffed Beds:	18
2012 Admissions:	520
2012 Patient Days:	2,088
ICP FTE:	1



Surgical Care Improvement Project (SCIP) Process of Care Measures

Hospital does not perform these procedures

Healthcare Worker Influenza Vaccination



2009
 2010
 2011
 2012

If the vertical measurement line crosses 1.0 (is in both colors) then the infection rate is not significantly different than expected.

If the line is entirely in the color:

- More infections were observed than expected
- Fewer infections were observed than expected

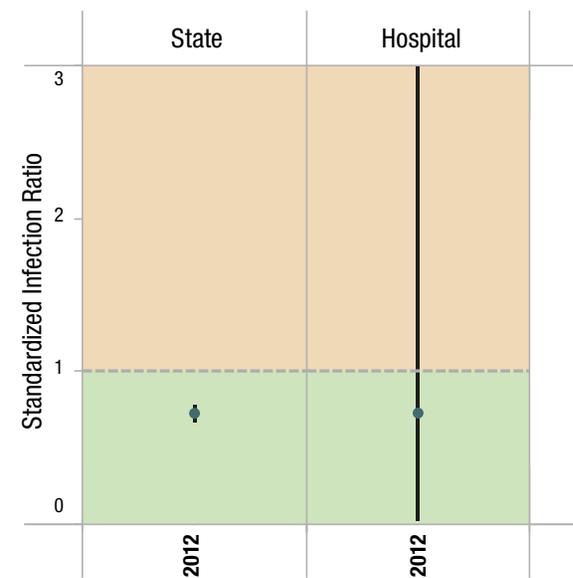
Central Line Associated Bloodstream Infections (CLABSIs), Adult Medical/Surgical ICUs

Hospital does not have an ICU

Central Line Associated Bloodstream Infections (CLABSIs), Neonatal ICUs

Hospital does not have a NICU

Incident *Clostridium difficile* Infections



2012 Infections:1 Patient-Days: 2088 Rate/1000 pt-days: 0.48 SIR: 0.728

Coronary Artery Bypass Graft Surgery

*Hospital does not perform
this procedure*

Knee Replacement Surgery

*Hospital does not perform
this procedure*

Colon Surgery

*Hospital does not perform
this procedure*

Abdominal Hysterectomy Surgery

*Hospital does not perform
this procedure*

Hip Replacement Surgery

*Hospital does not perform
this procedure*

Laminectomy Surgery

*Hospital does not perform
this procedure*

Silverton Hospital

Location: Silverton
 Ownership: Non Profit
 Med. School Affiliation: None
 ICU Beds: 6
 Total Staffed Beds: 48
 2012 Admissions: 3,347
 2012 Patient Days: 9,214
 ICP FTE: 0.8



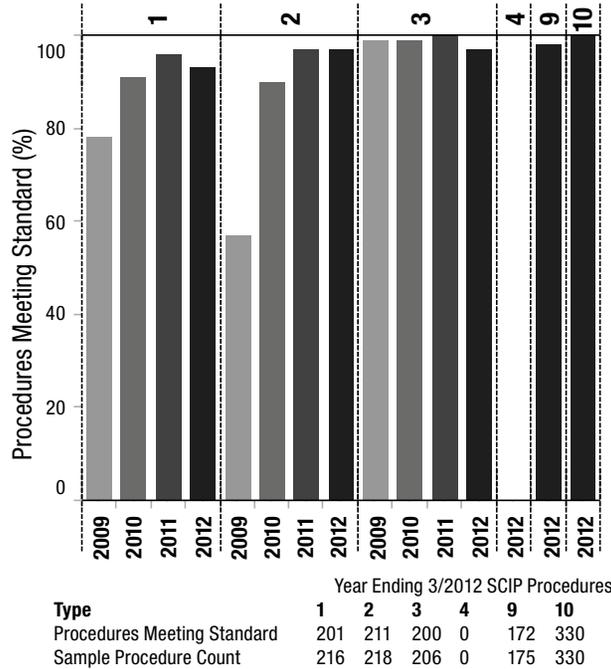
Legend: 2009 (lightest gray), 2010 (medium-light gray), 2011 (medium-dark gray), 2012 (darkest gray)

If the vertical measurement line crosses 1.0 (is in both colors) then the infection rate is not significantly different than expected.

If the line is entirely in the color:

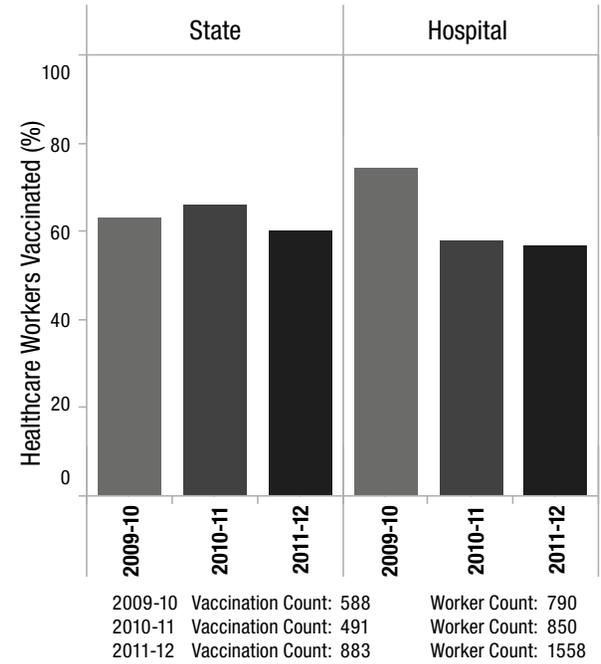
More infections were observed than expected (orange)
 Fewer infections were observed than expected (green)

Surgical Care Improvement Project (SCIP) Process of Care Measures



Type	Year Ending 3/2012	SCIP Procedures
Procedures Meeting Standard	1	201
Sample Procedure Count	1	216
Procedures Meeting Standard	2	211
Sample Procedure Count	2	218
Procedures Meeting Standard	3	200
Sample Procedure Count	3	206
Procedures Meeting Standard	4	0
Sample Procedure Count	4	0
Procedures Meeting Standard	9	172
Sample Procedure Count	9	175
Procedures Meeting Standard	10	330
Sample Procedure Count	10	330

Healthcare Worker Influenza Vaccination



Central Line Associated Bloodstream Infections (CLABSIs), Adult Medical/Surgical ICUs

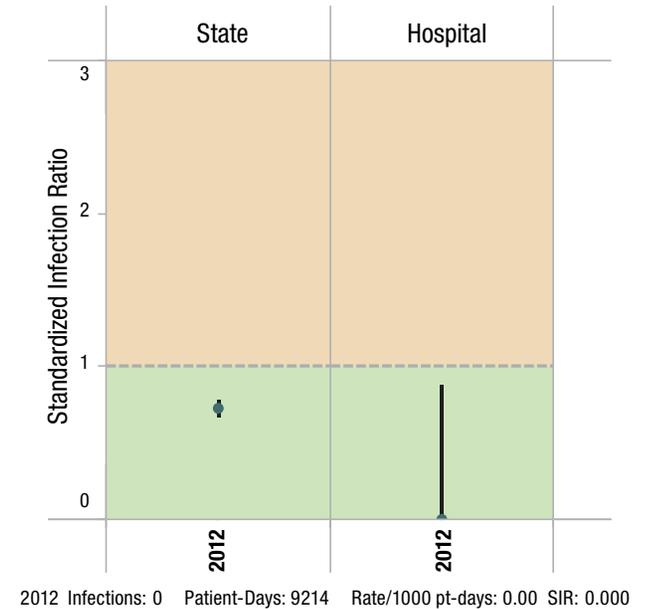
*SIR values only calculated if expected infections ≥ 1

2010 CLABSIs: 0	CL Days: 154	Rate per 1000 CL days: 0.00	SIR: *
2011 CLABSIs: 0	CL Days: 152	Rate per 1000 CL days: 0.00	SIR: *
2012 CLABSIs: 0	CL Days: 141	Rate per 1000 CL days: 0.00	SIR: *

Central Line Associated Bloodstream Infections (CLABSIs), Neonatal ICUs

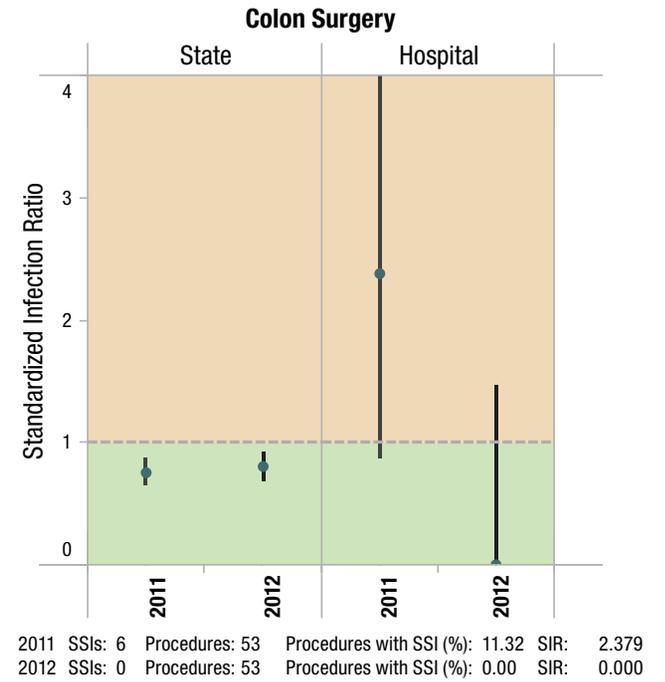
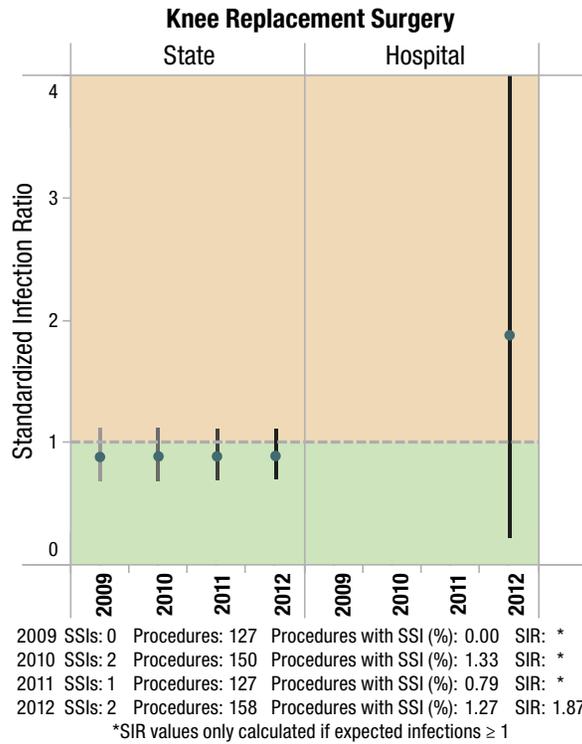
Hospital does not have a NICU

Incident Clostridium difficile Infections



Coronary Artery Bypass Graft Surgery

Hospital does not perform this procedure



Abdominal Hysterectomy Surgery

**SIR values only calculated if expected infections ≥ 1*

Hip Replacement Surgery

**SIR values only calculated if expected infections ≥ 1*

Laminectomy Surgery

Hospital does not perform this procedure

2011 SSIs: 0 Procedures: 29 Procedures with SSI (%): 0.00 SIR: *
 2012 SSIs: 1 Procedures: 33 Procedures with SSI (%): 3.03 SIR: *

2011 SSIs: 1 Procedures: 51 Procedures with SSI (%): 1.96 SIR: *
 2012 SSIs: 1 Procedures: 75 Procedures with SSI (%): 1.33 SIR: *

Sky Lakes Medical Center

Location: Klamath Falls
 Ownership: Non Profit
 Med. School Affiliation: None
 ICU Beds: 10
 Total Staffed Beds: 115
 2012 Admissions: 5,439
 2012 Patient Days: 20,290
 ICP FTE: 1

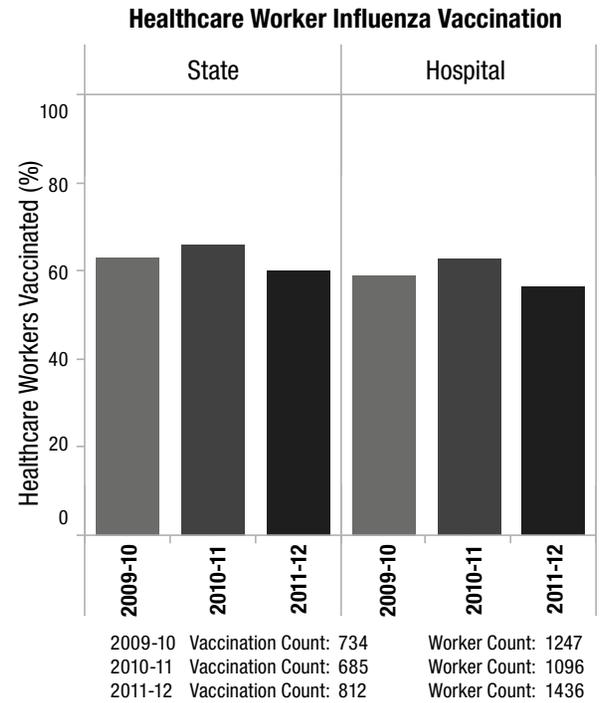
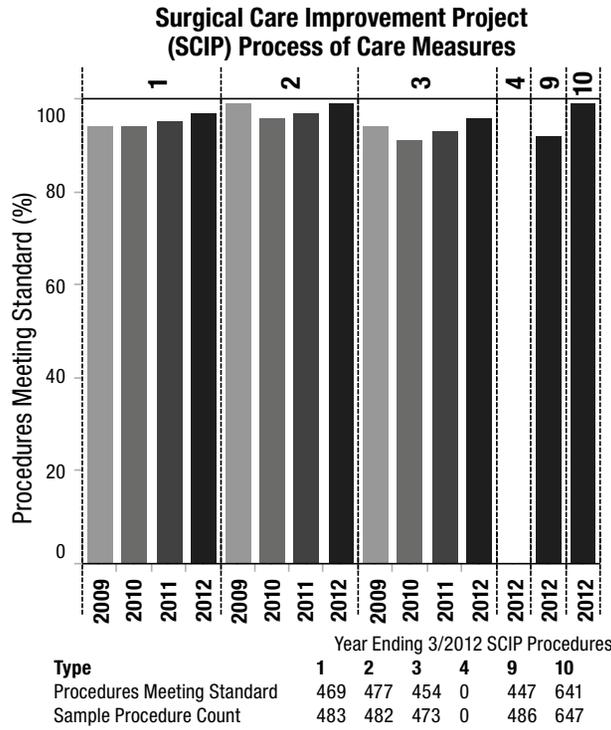


2009
 2010
 2011
 2012

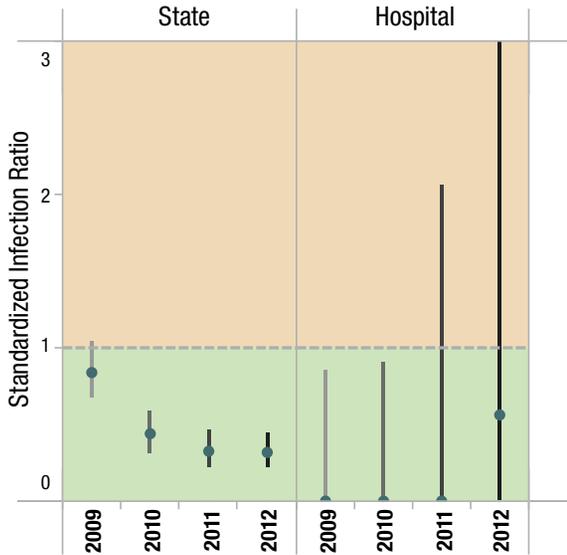
If the vertical measurement line crosses 1.0 (is in both colors) then the infection rate is not significantly different than expected.

If the line is entirely in the color:

- More infections were observed than expected
- Fewer infections were observed than expected



Central Line Associated Bloodstream Infections (CLABSIs), Adult Medical/Surgical ICUs

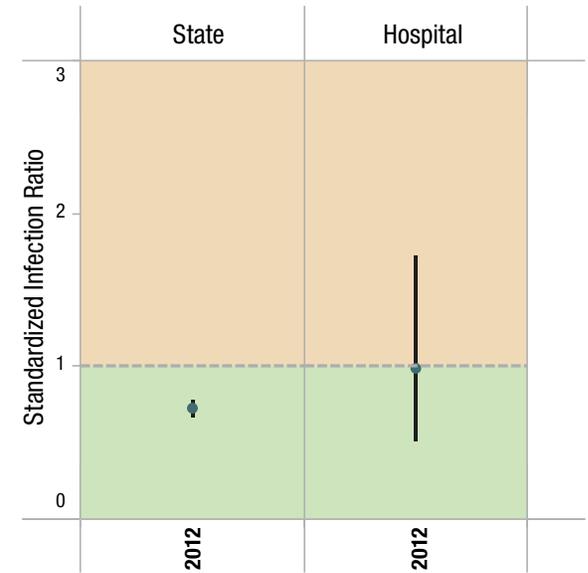


2009	CLABSIs: 0	CL Days: 2875	Rate per 1000 CL days: 0.00	SIR: 0.000
2010	CLABSIs: 0	CL Days: 2703	Rate per 1000 CL days: 0.00	SIR: 0.000
2011	CLABSIs: 0	CL Days: 1192	Rate per 1000 CL days: 0.00	SIR: 0.000
2012	CLABSIs: 1	CL Days: 1185	Rate per 1000 CL days: 0.84	SIR: 0.562

Central Line Associated Bloodstream Infections (CLABSIs), Neonatal ICUs

Hospital does not have a NICU

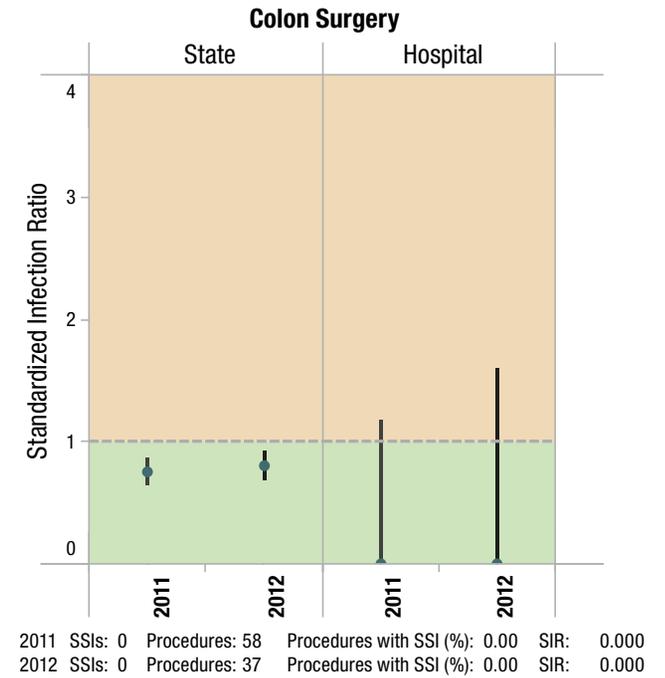
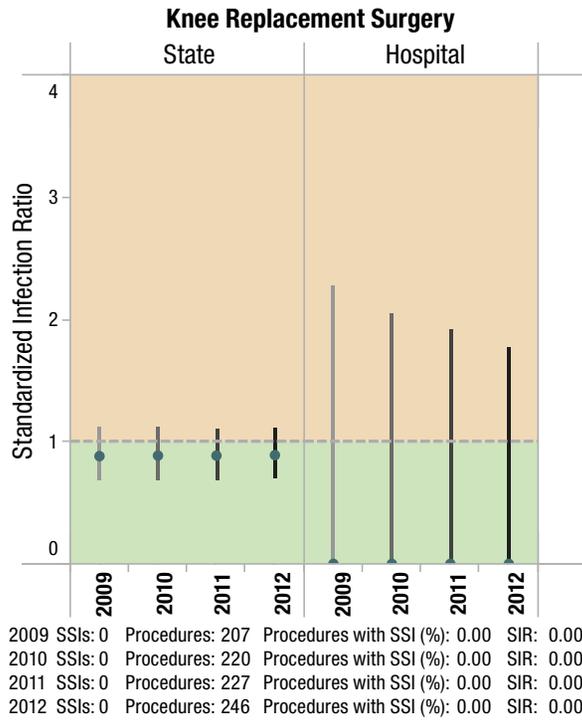
Incident Clostridium difficile Infections



2012 Infections: 12 Patient-Days: 20036 Rate/1000 pt-days: 0.60 SIR: 0.987

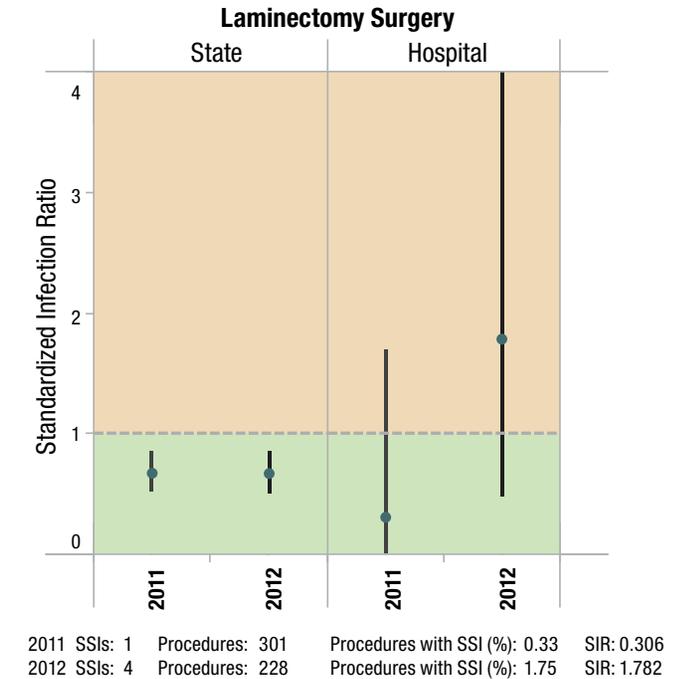
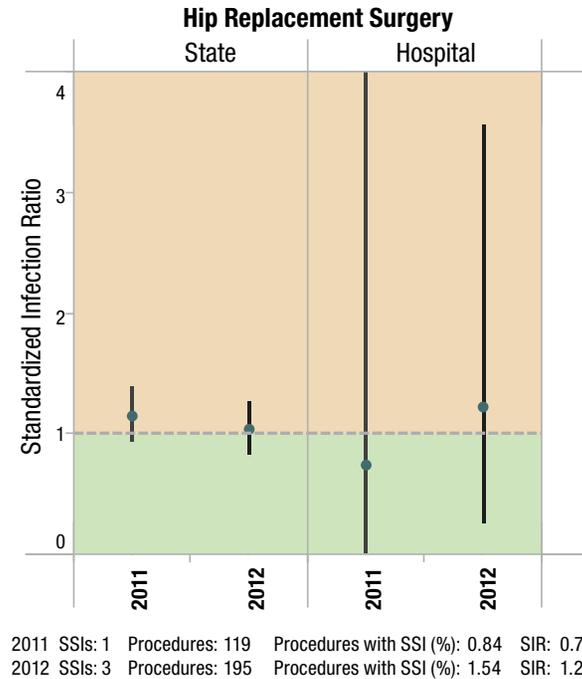
Coronary Artery Bypass Graft Surgery

Hospital does not perform this procedure



Abdominal Hysterectomy Surgery

**SIR values only calculated if expected infections ≥ 1*



Southern Coos Hospital and Health Center

Location:	Bandon
Ownership:	Government
Med. School Affiliation:	None
ICU Beds:	0
Total Staffed Beds:	19
2012 Admissions:	385
2012 Patient Days:	1,532
ICP FTE:	0.5



2009
 2010
 2011
 2012

If the vertical measurement line crosses 1.0 (is in both colors) then the infection rate is not significantly different than expected.

If the line is entirely in the color:

- More infections were observed than expected
- Fewer infections were observed than expected

Central Line Associated Bloodstream Infections (CLABSIs), Adult Medical/Surgical ICUs

Hospital does not have an ICU

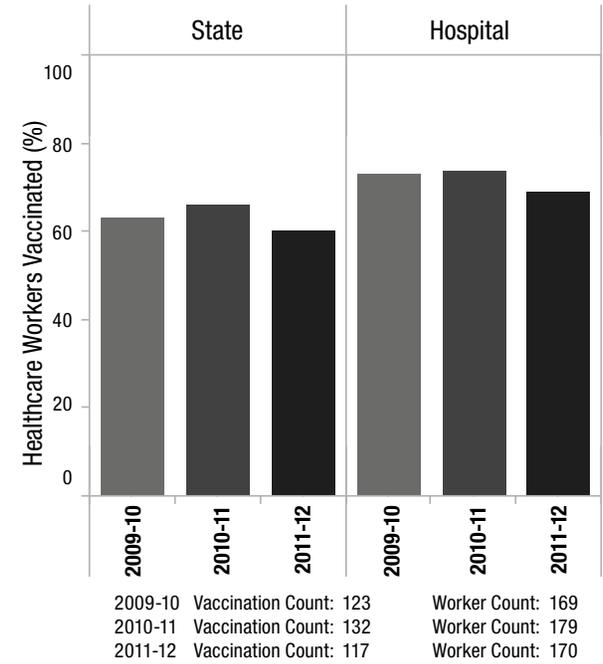
Surgical Care Improvement Project (SCIP) Process of Care Measures

Too few procedures to report

Central Line Associated Bloodstream Infections (CLABSIs), Neonatal ICUs

Hospital does not have a NICU

Healthcare Worker Influenza Vaccination



Incident *Clostridium difficile* Infections

**SIR values only calculated if expected infections ≥1*

Coronary Artery Bypass Graft Surgery

*Hospital does not perform
this procedure*

Knee Replacement Surgery

Too few procedures to report

Colon Surgery

*Hospital does not perform
this procedure*

Abdominal Hysterectomy Surgery

*Hospital does not perform
this procedure*

Hip Replacement Surgery

Too few procedures to report

Laminectomy Surgery

*Hospital does not perform
this procedure*

St. Alphonsus Medical Center - Baker

Location:	Baker City
Ownership:	For Profit
Med. School Affiliation:	None
ICU Beds:	2
Total Staffed Beds:	25
2012 Admissions:	1,211
2012 Patient Days:	3,752
ICP FTE:	1



	2009		2010		2011		2012
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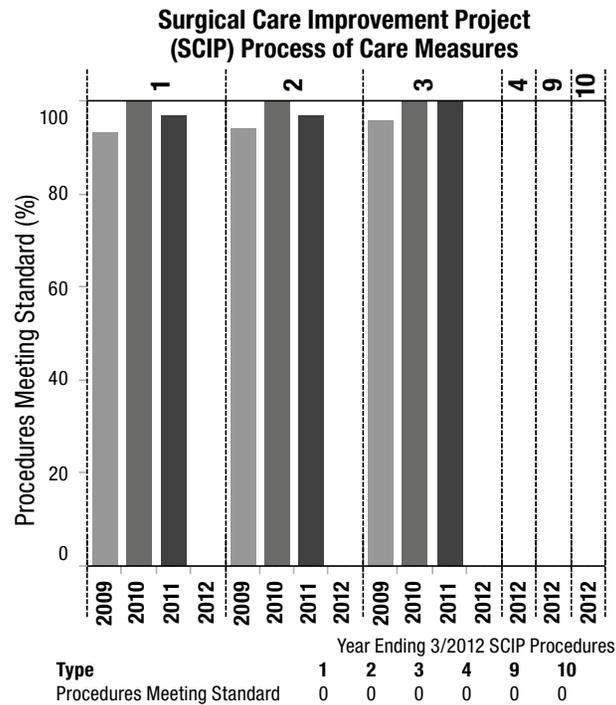
If the vertical measurement line crosses 1.0 (is in both colors) then the infection rate is not significantly different than expected.

If the line is entirely in the color:

	More infections were observed than expected
	Fewer infections were observed than expected

Central Line Associated Bloodstream Infections (CLABSIs), Adult Medical/Surgical ICUs

Too few procedures to report

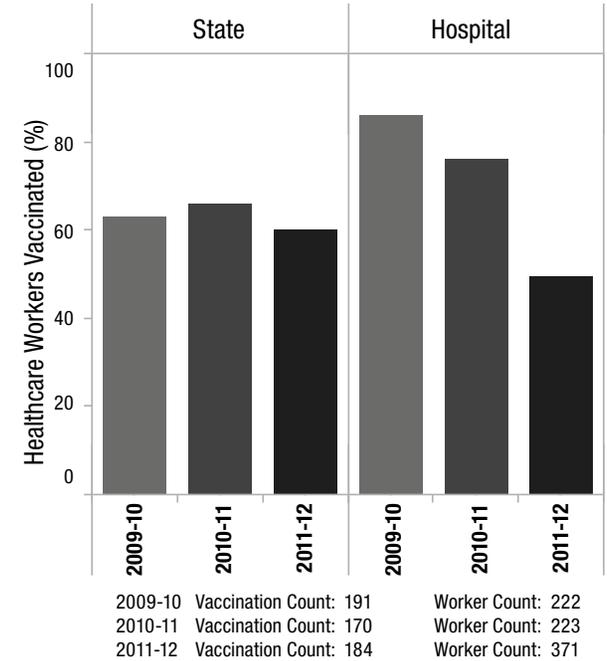


At the time of publication, St. Alphonsus Medical Center – Baker had not submitted data for the period ending 3/2012 for these measures. The information will be included in future reports after complete data has been submitted in accordance with Oregon Administrative Rules 409-023-0010.

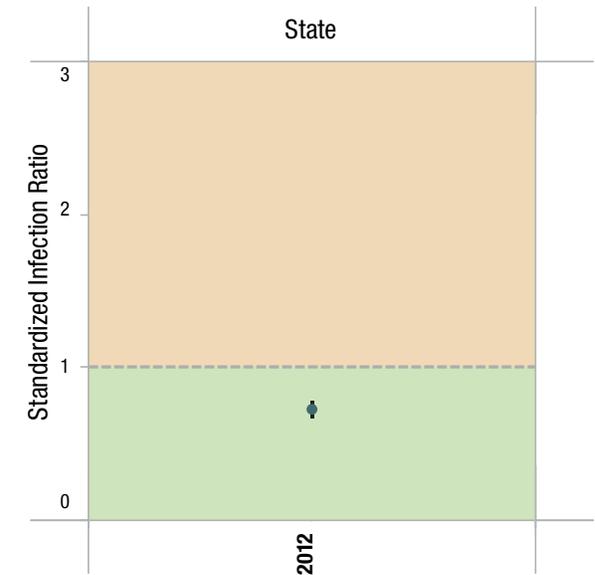
Central Line Associated Bloodstream Infections (CLABSIs), Neonatal ICUs

Hospital does not have a NICU

Healthcare Worker Influenza Vaccination



Incident *Clostridium difficile* Infections



2012 Infections: 0 Patient-Days: 3658 Rate/1000 pt-days: 0.00 SIR: 0.000

Coronary Artery Bypass Graft Surgery

Hospital does not perform this procedure

Knee Replacement Surgery

**SIR values only calculated if expected infections ≥ 1*

Colon Surgery

Too few procedures to report

2010 SSIs: 0	Procedures: 78	Procedures with SSI (%): 0.00	SIR: *
2011 SSIs: 1	Procedures: 56	Procedures with SSI (%): 1.79	SIR: *
2012 SSIs: 1	Procedures: 37	Procedures with SSI (%): 2.70	SIR: *

Abdominal Hysterectomy Surgery

Hospital does not perform this procedure

Hip Replacement Surgery

**SIR values only calculated if expected infections ≥ 1*

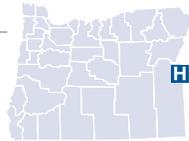
Laminectomy Surgery

Hospital does not perform this procedure

2011 SSIs: 0	Procedures: 39	Procedures with SSI (%): 0.00	SIR: *
2012 SSIs: 0	Procedures: 26	Procedures with SSI (%): 0.00	SIR: *

St. Alphonsus Medical Center - Ontario

Location: Ontario
 Ownership: Non Profit
 Med. School Affiliation: None
 ICU Beds: 8
 Total Staffed Beds: 49
 2012 Admissions: 3,121
 2012 Patient Days: 8,526
 ICP FTE: 0.6

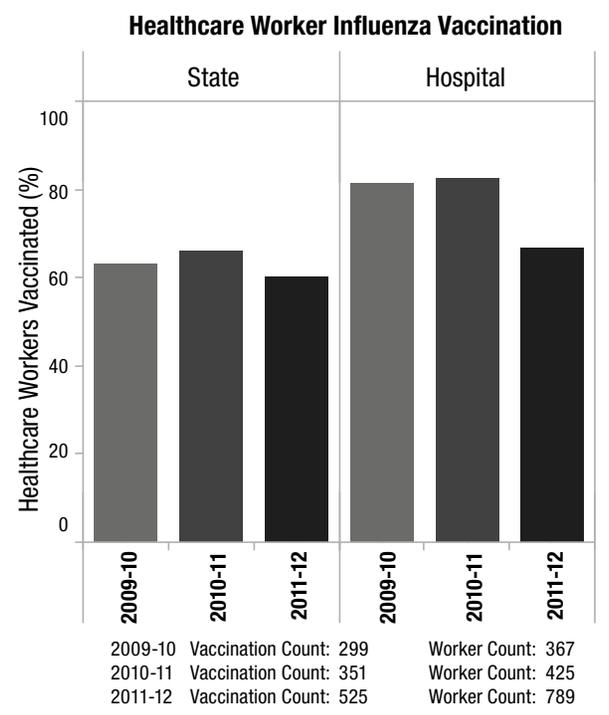
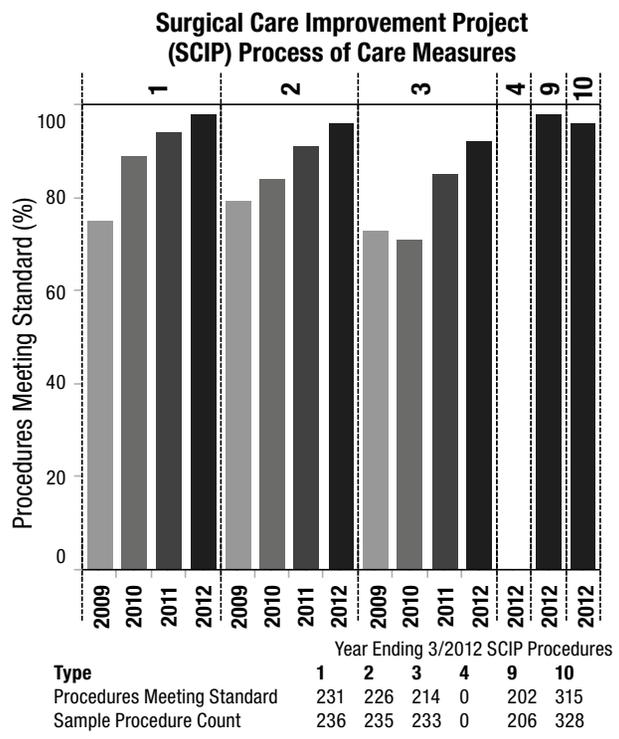


2009
 2010
 2011
 2012

If the vertical measurement line crosses 1.0 (is in both colors) then the infection rate is not significantly different than expected.

If the line is entirely in the color:

- More infections were observed than expected
- Fewer infections were observed than expected



Central Line Associated Bloodstream Infections (CLABSIs), Adult Medical/Surgical ICUs

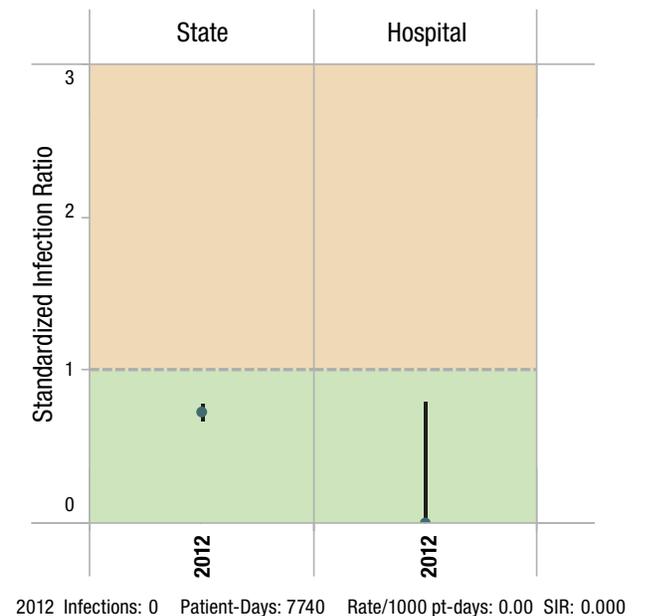
**SIR values only calculated if expected infections ≥ 1*

2010 CLABSIs: 0 CL Days: 649 Rate per 1000 CL days: 0.00 SIR: *
 2011 CLABSIs: 0 CL Days: 429 Rate per 1000 CL days: 0.00 SIR: *
 2012 CLABSIs: 0 CL Days: 293 Rate per 1000 CL days: 0.00 SIR: *

Central Line Associated Bloodstream Infections (CLABSIs), Neonatal ICUs

Hospital does not have a NICU

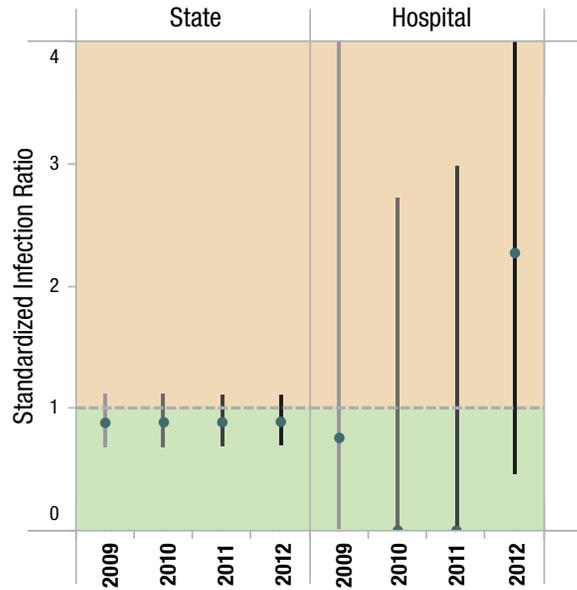
Incident Clostridium difficile Infections



Coronary Artery Bypass Graft Surgery

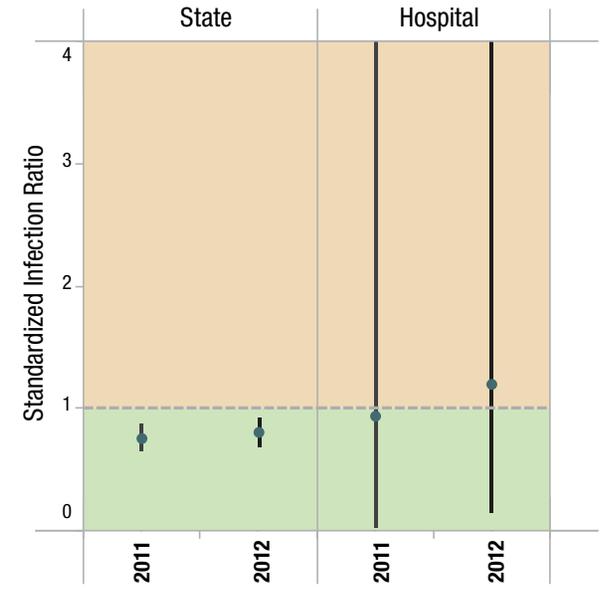
Hospital does not perform this procedure

Knee Replacement Surgery



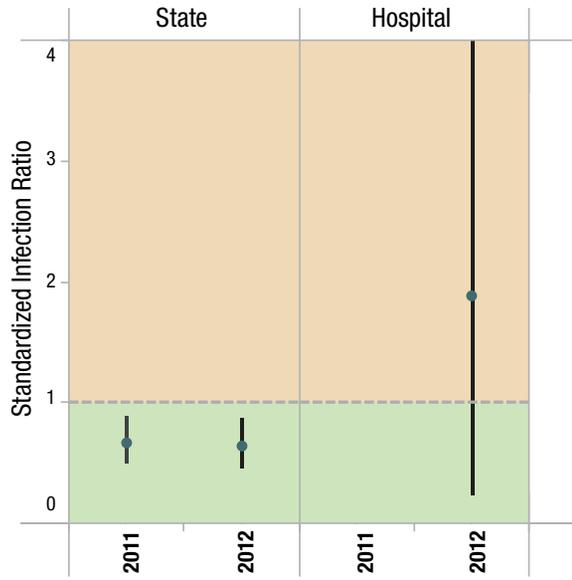
2009 SSIs: 1 Procedures: 129 Procedures with SSI (%): 0.78 SIR: 0.758
 2010 SSIs: 0 Procedures: 138 Procedures with SSI (%): 0.00 SIR: 0.000
 2011 SSIs: 0 Procedures: 131 Procedures with SSI (%): 0.00 SIR: 0.000
 2012 SSIs: 3 Procedures: 137 Procedures with SSI (%): 2.19 SIR: 2.269

Colon Surgery



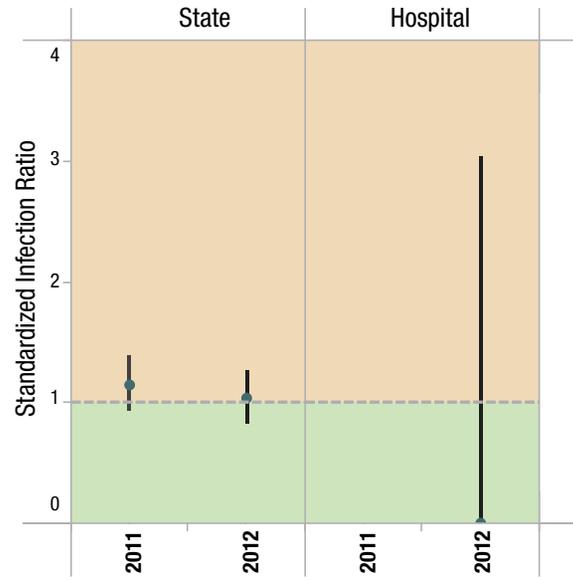
2011 SSIs: 1 Procedures: 17 Procedures with SSI (%): 5.88 SIR: 0.935
 2012 SSIs: 2 Procedures: 29 Procedures with SSI (%): 6.90 SIR: 1.195

Abdominal Hysterectomy Surgery



2011 SSIs: 0 Procedures: 51 Procedures with SSI (%): 0.00 SIR: *
 2012 SSIs: 2 Procedures: 66 Procedures with SSI (%): 3.03 SIR: 1.883
 *SIR values only calculated if expected infections ≥ 1

Hip Replacement Surgery



2011 SSIs: 1 Procedures: 50 Procedures with SSI (%): 2.00 SIR: *
 2012 SSIs: 0 Procedures: 73 Procedures with SSI (%): 0.00 SIR: 0.000
 *SIR values only calculated if expected infections ≥ 1

Laminectomy Surgery

Hospital does not perform this procedure

St. Anthony Hospital

Location: Pendleton
 Ownership: Non Profit
 Med. School Affiliation: None
 ICU Beds: 4
 Total Staffed Beds: 25
 2012 Admissions: 1,961
 2012 Patient Days: 5,514
 ICP FTE: 0.5



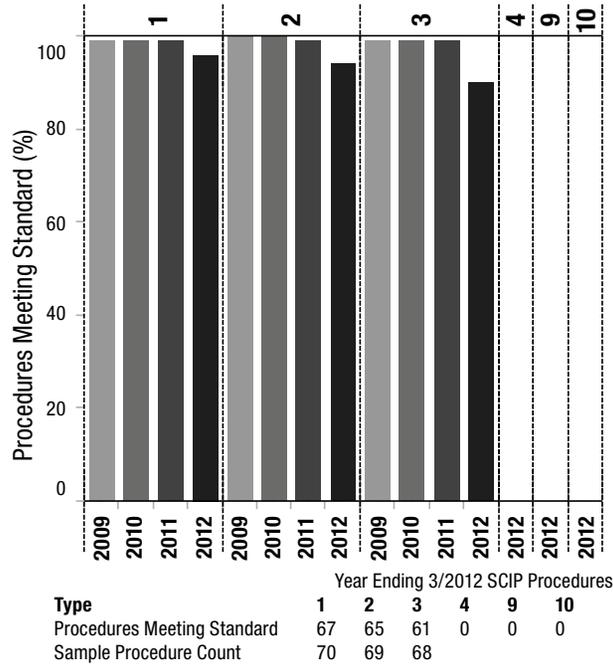
2009 2010 2011 2012

If the vertical measurement line crosses 1.0 (is in both colors) then the infection rate is not significantly different than expected.

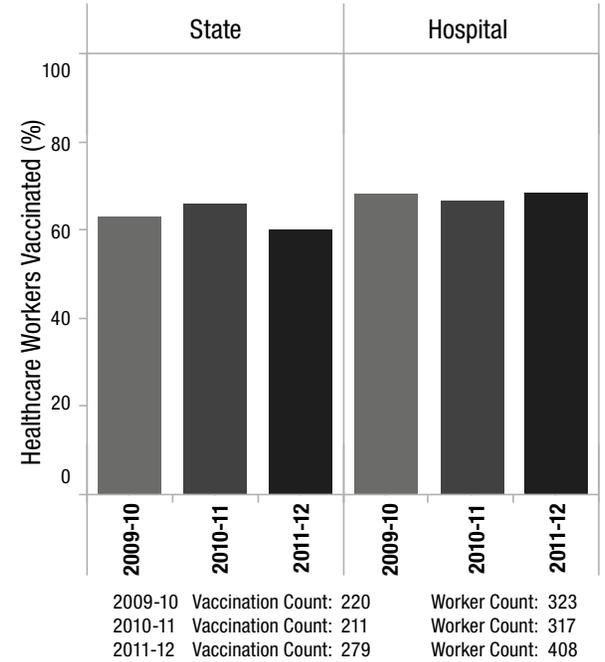
If the line is entirely in the color:

- More infections were observed than expected
- Fewer infections were observed than expected

Surgical Care Improvement Project (SCIP) Process of Care Measures



Healthcare Worker Influenza Vaccination



Central Line Associated Bloodstream Infections (CLABSIs), Adult Medical/Surgical ICUs

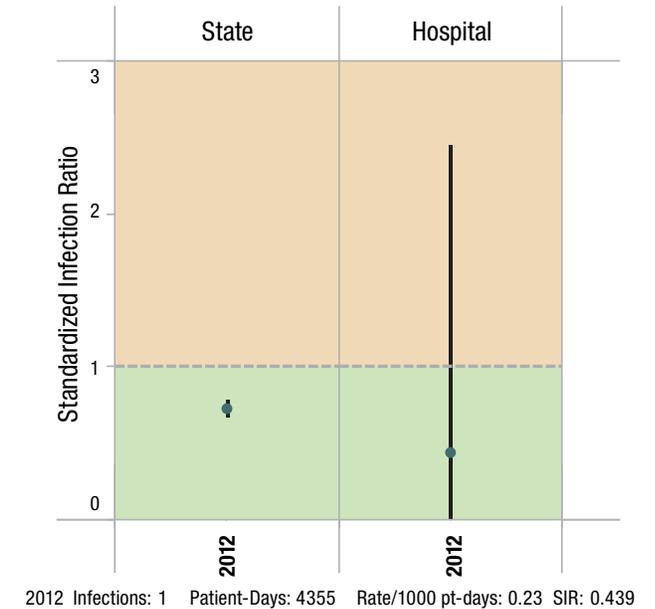
**SIR values only calculated if expected infections ≥ 1*

2009 CLABSIs: 0 CL Days: 120 Rate per 1000 CL days: 0.00 SIR: *
 2010 CLABSIs: 0 CL Days: 80 Rate per 1000 CL days: 0.00 SIR: *
 2011 CLABSIs: 0 CL Days: 197 Rate per 1000 CL days: 0.00 SIR: *
 2012 CLABSIs: 0 CL Days: 179 Rate per 1000 CL days: 0.00 SIR: *

Central Line Associated Bloodstream Infections (CLABSIs), Neonatal ICUs

Hospital does not have a NICU

Incident Clostridium difficile Infections



Coronary Artery Bypass Graft Surgery

Hospital does not perform this procedure

Knee Replacement Surgery

**SIR values only calculated if expected infections ≥ 1*

2009	SSIs: 0	Procedures: 58	Procedures with SSI (%): 0.00	SIR: *
2010	SSIs: 0	Procedures: 51	Procedures with SSI (%): 0.00	SIR: *
2011	SSIs: 1	Procedures: 37	Procedures with SSI (%): 2.70	SIR: *
2012	SSIs: 0	Procedures: 50	Procedures with SSI (%): 0.00	SIR: *

Abdominal Hysterectomy Surgery

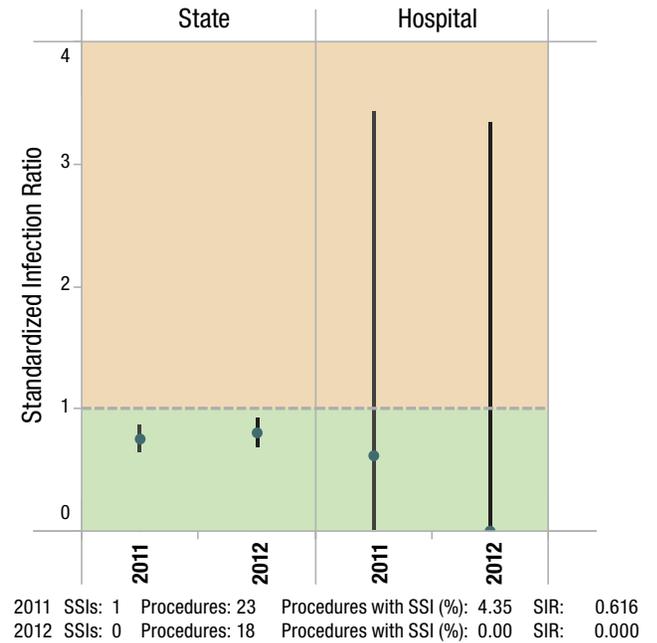
Too few procedures to report

Hip Replacement Surgery

**SIR values only calculated if expected infections ≥ 1*

2011	SSIs: 0	Procedures: 27	Procedures with SSI (%): 0.00	SIR: *
2012	SSIs: 0	Procedures: 21	Procedures with SSI (%): 0.00	SIR: *

Colon Surgery



Laminectomy Surgery

Hospital does not perform this procedure

St. Charles Medical Center (Bend)

Location:	Bend
Ownership:	Non Profit
Med. School Affiliation:	None
ICU Beds:	42
Total Staffed Beds:	261
2012 Admissions:	15,068
2012 Patient Days:	72,030
ICP FTE:	2



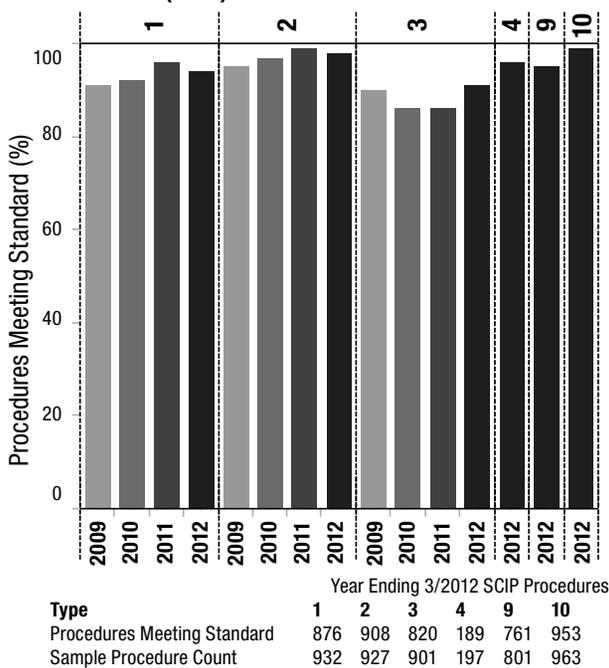
2009
 2010
 2011
 2012

If the vertical measurement line crosses 1.0 (is in both colors) then the infection rate is not significantly different than expected.

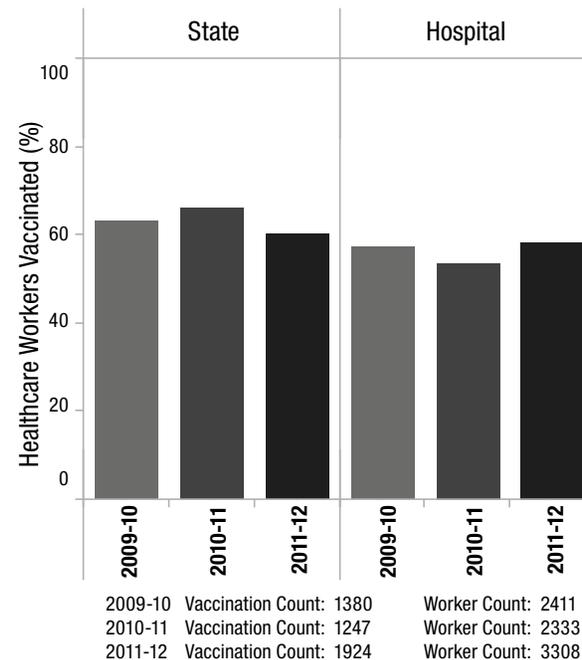
If the line is entirely in the color:

- More infections were observed than expected
- Fewer infections were observed than expected

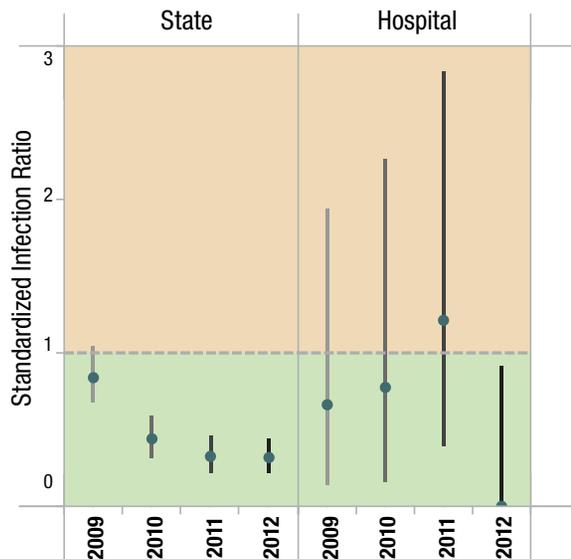
Surgical Care Improvement Project (SCIP) Process of Care Measures



Healthcare Worker Influenza Vaccination



Central Line Associated Bloodstream Infections (CLABSIs), Adult Medical/Surgical ICUs



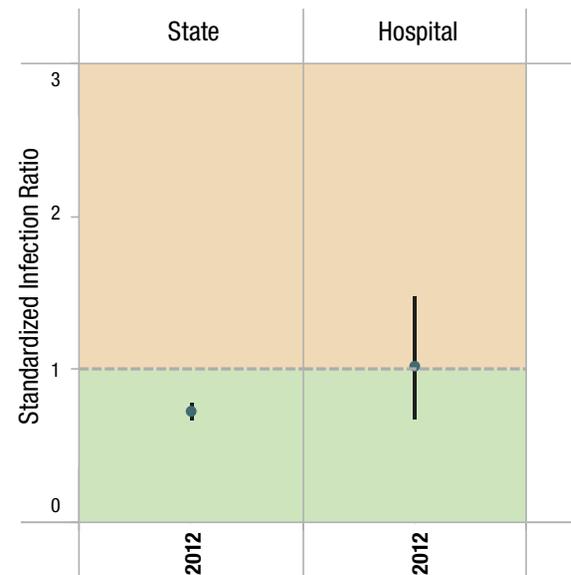
Year	CLABSIs	CL Days	Rate per 1000 CL days	SIR
2009	3	3021	0.99	0.662
2010	3	2579	1.16	0.775
2011	5	2749	1.82	1.212
2012	0	2669	0.00	0.000

Central Line Associated Bloodstream Infections (CLABSIs), Neonatal ICUs

**SIR values only calculated if expected infections ≥ 1*

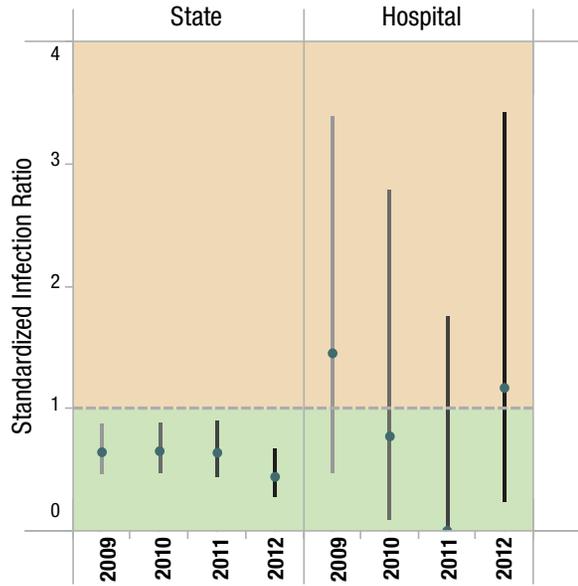
2011	CLABSIs: 0	CL Days: 447	Rate per 1000 CL days: 0.00	SIR: *
2012	CLABSIs: 0	CL Days: 279	Rate per 1000 CL days: 0.00	SIR: *

Incident Clostridium difficile Infections



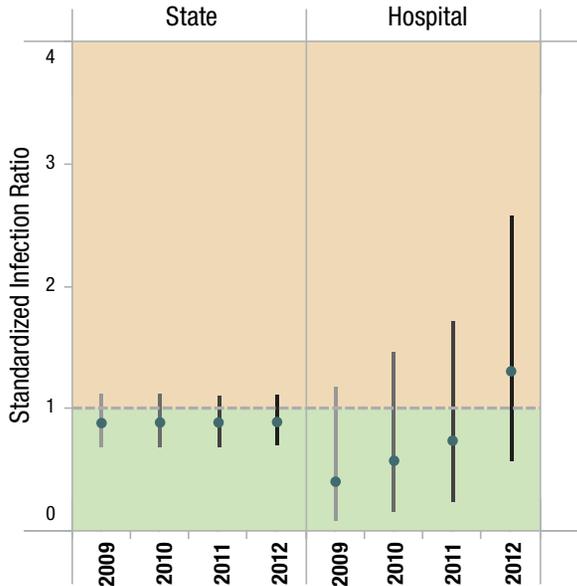
2012	Infections: 28	Patient-Days: 55790	Rate/1000 pt-days: 0.50	SIR: 1.021
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Coronary Artery Bypass Graft Surgery



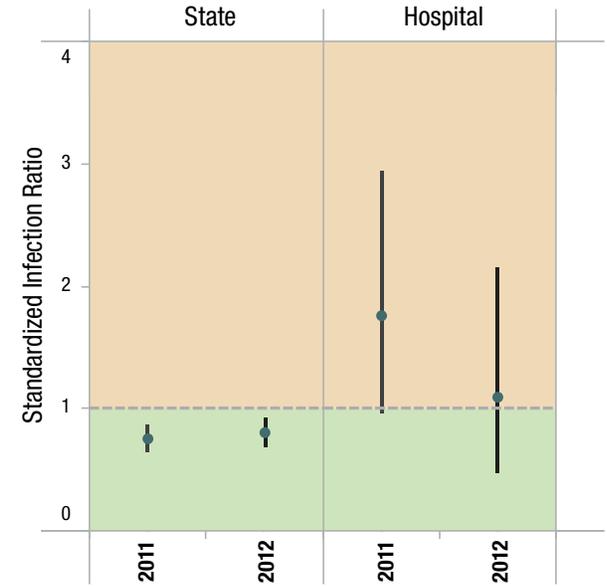
2009 SSIs: 5	Procedures: 156	Procedures with SSI (%): 3.21	SIR: 1.451
2010 SSIs: 2	Procedures: 129	Procedures with SSI (%): 1.55	SIR: 0.772
2011 SSIs: 0	Procedures: 110	Procedures with SSI (%): 0.00	SIR: 0.000
2012 SSIs: 3	Procedures: 134	Procedures with SSI (%): 2.24	SIR: 1.168

Knee Replacement Surgery



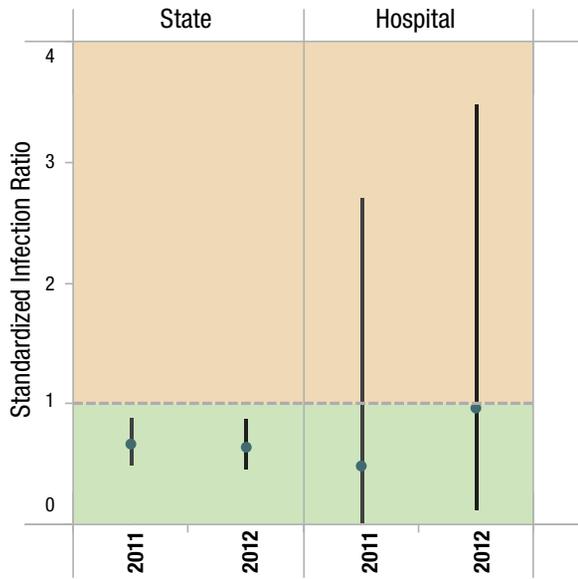
2009 SSIs: 3	Procedures: 609	Procedures with SSI (%): 0.49	SIR: 0.402
2010 SSIs: 4	Procedures: 583	Procedures with SSI (%): 0.69	SIR: 0.573
2011 SSIs: 5	Procedures: 660	Procedures with SSI (%): 0.76	SIR: 0.737
2012 SSIs: 8	Procedures: 610	Procedures with SSI (%): 1.31	SIR: 1.304

Colon Surgery



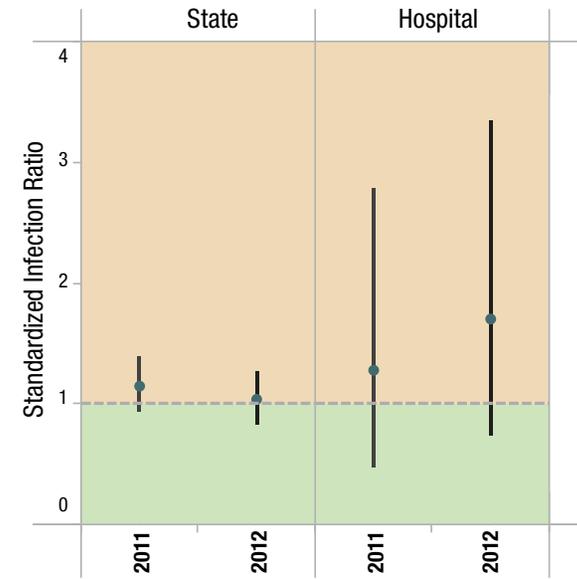
2011 SSIs: 14	Procedures: 155	Procedures with SSI (%): 9.03	SIR: 1.758
2012 SSIs: 8	Procedures: 132	Procedures with SSI (%): 6.06	SIR: 1.092

Abdominal Hysterectomy Surgery



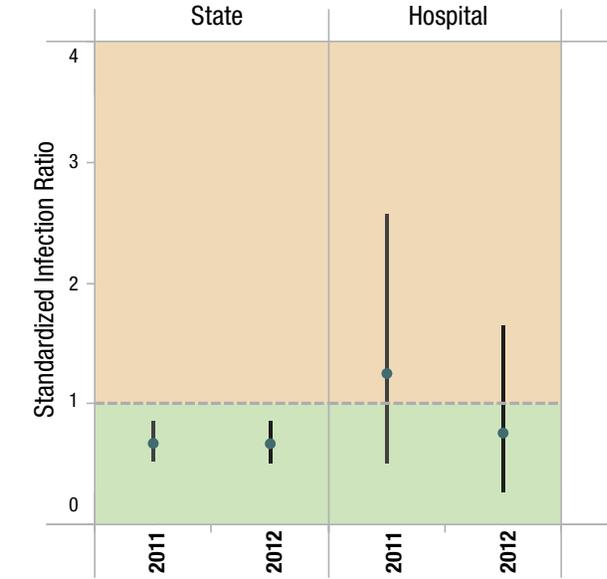
2011 SSIs: 1	Procedures: 154	Procedures with SSI (%): 0.65	SIR: 0.484
2012 SSIs: 2	Procedures: 123	Procedures with SSI (%): 1.63	SIR: 0.964

Hip Replacement Surgery



2011 SSIs: 6	Procedures: 385	Procedures with SSI (%): 1.56	SIR: 1.277
2012 SSIs: 8	Procedures: 416	Procedures with SSI (%): 1.92	SIR: 1.701

Laminectomy Surgery



2011 SSIs: 7	Procedures: 736	Procedures with SSI (%): 0.95	SIR: 1.250
2012 SSIs: 6	Procedures: 838	Procedures with SSI (%): 0.72	SIR: 0.757

St. Charles Medical Center (Madras)

Location:	Madras
Ownership:	Non Profit
Med. School Affiliation:	No
ICU Beds:	2
Total Staffed Beds:	25
2012 Admissions:	1,068
2012 Patient Days:	3,873
ICP FTE:	1



2009
 2010
 2011
 2012

If the vertical measurement line crosses 1.0 (is in both colors) then the infection rate is not significantly different than expected.

If the line is entirely in the color:

- More infections were observed than expected
- Fewer infections were observed than expected

Central Line Associated Bloodstream Infections (CLABSIs), Adult Medical/Surgical ICUs

Too few procedures to report

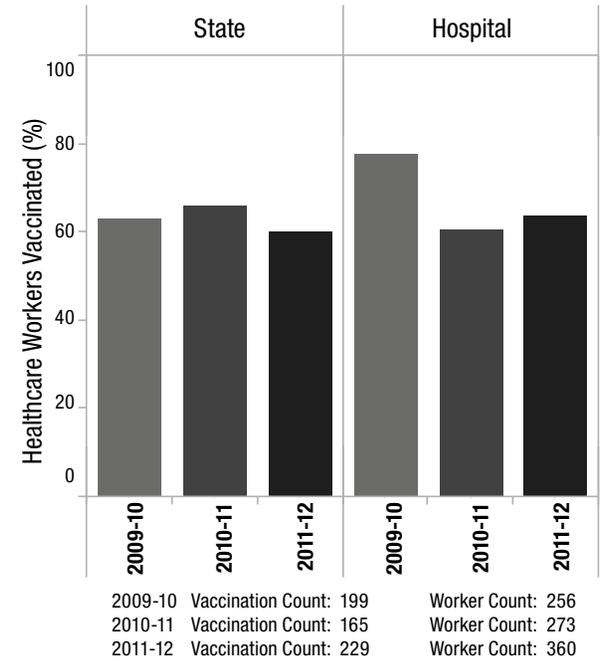
Central Line Associated Bloodstream Infections (CLABSIs), Neonatal ICUs

Hospital does not have a NICU

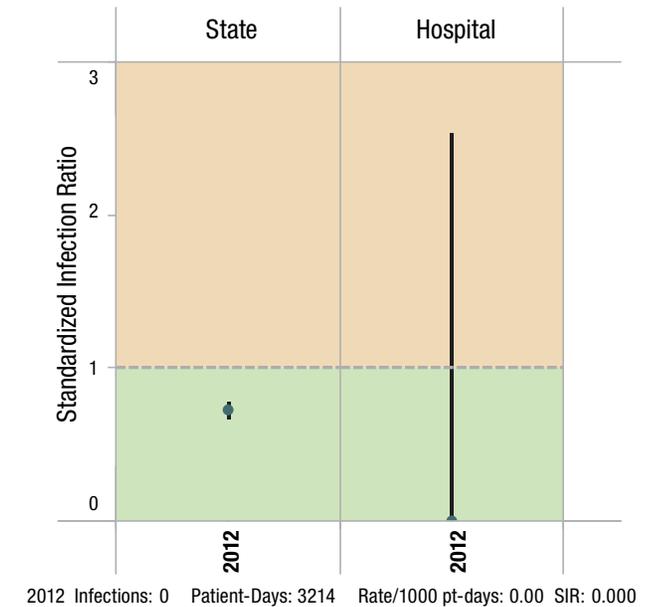
Surgical Care Improvement Project (SCIP) Process of Care Measures

Too few procedures to report

Healthcare Worker Influenza Vaccination



Incident *Clostridium difficile* Infections



Coronary Artery Bypass Graft Surgery

*Hospital does not perform
this procedure*

Knee Replacement Surgery

*Too few procedures
to report*

Colon Surgery

*Too few procedures
to report*

Abdominal Hysterectomy Surgery

*Too few procedures
to report*

Hip Replacement Surgery

*Too few procedures
to report*

Laminectomy Surgery

*Hospital does not perform
this procedure*

St. Charles Medical Center (Redmond)

Location: Redmond
 Ownership: Non Profit
 Med. School Affiliation: None
 ICU Beds: 6
 Total Staffed Beds: 48
 2012 Admissions: 2,110
 2012 Patient Days: 6,094
 ICP FTE: 2



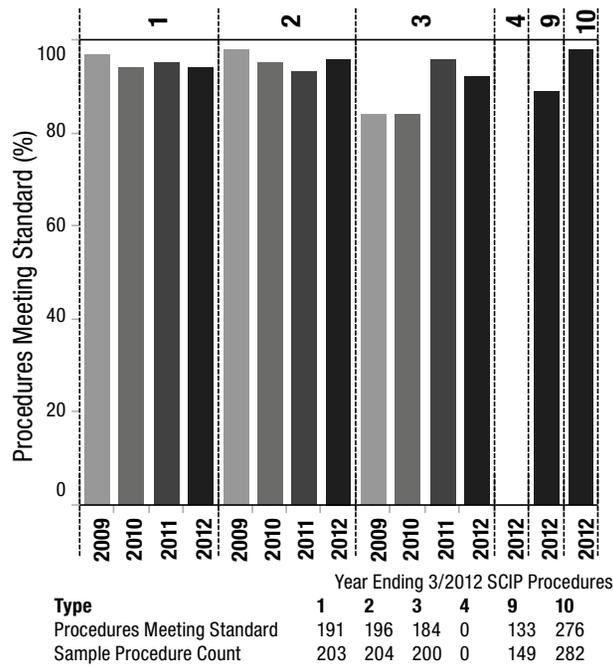
2009 2010 2011 2012

If the vertical measurement line crosses 1.0 (is in both colors) then the infection rate is not significantly different than expected.

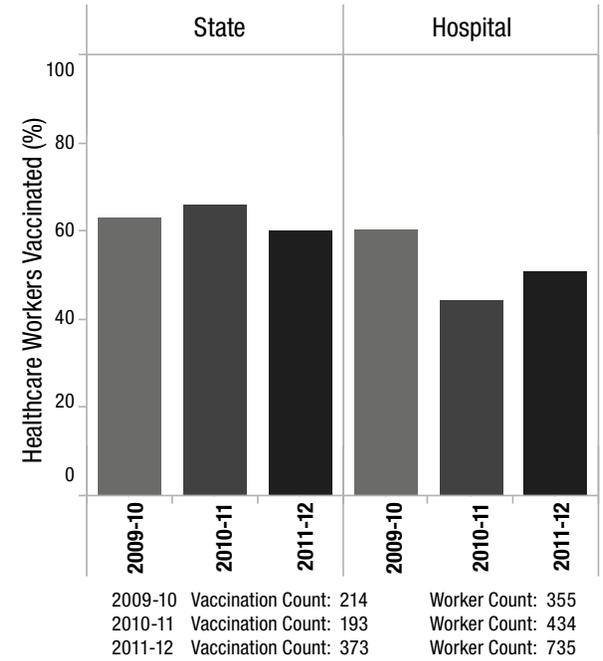
If the line is entirely in the color:

- More infections were observed than expected
- Fewer infections were observed than expected

Surgical Care Improvement Project (SCIP) Process of Care Measures



Healthcare Worker Influenza Vaccination



Central Line Associated Bloodstream Infections (CLABSIs), Adult Medical/Surgical ICUs

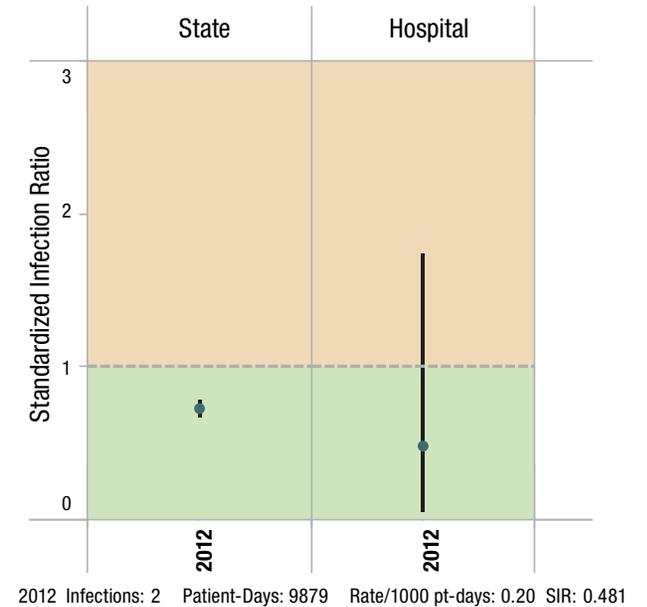
**SIR values only calculated if expected infections ≥ 1*

2009 CLABSIs: 0 CL Days: 276 Rate per 1000 CL days: 0.00 SIR: *
 2010 CLABSIs: 0 CL Days: 277 Rate per 1000 CL days: 0.00 SIR: *
 2011 CLABSIs: 0 CL Days: 312 Rate per 1000 CL days: 0.00 SIR: *
 2012 CLABSIs: 0 CL Days: 282 Rate per 1000 CL days: 0.00 SIR: *

Central Line Associated Bloodstream Infections (CLABSIs), Neonatal ICUs

Hospital does not have a NICU

Incident Clostridium difficile Infections



Coronary Artery Bypass Graft Surgery

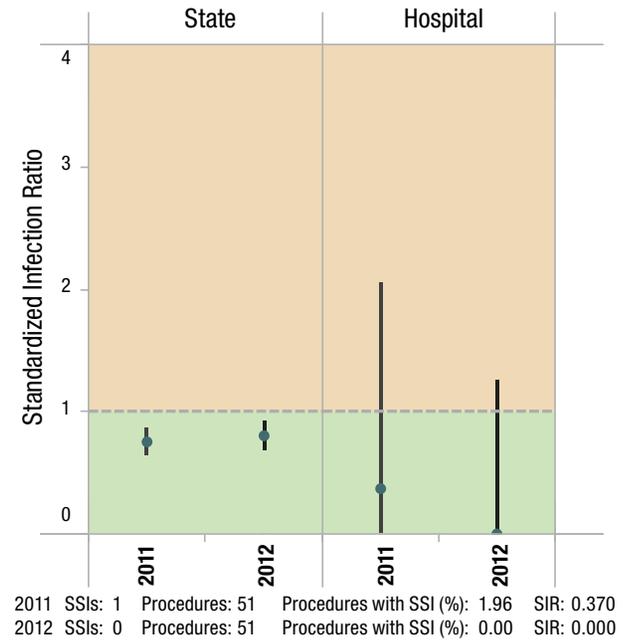
Hospital does not perform this procedure

Knee Replacement Surgery

**SIR values only calculated if expected infections ≥ 1*

2009	SSIs: 0	Procedures: 67	Procedures with SSI (%): 0.00	SIR: *
2010	SSIs: 0	Procedures: 40	Procedures with SSI (%): 0.00	SIR: *
2011	SSIs: 1	Procedures: 38	Procedures with SSI (%): 2.63	SIR: *
2012	SSIs: 0	Procedures: 54	Procedures with SSI (%): 0.00	SIR: *

Colon Surgery



Abdominal Hysterectomy Surgery

Too few procedures to report

Hip Replacement Surgery

**SIR values only calculated if expected infections ≥ 1*

2011	SSIs: 1	Procedures: 48	Procedures with SSI (%): 2.08	SIR: *
2012	SSIs: 0	Procedures: 39	Procedures with SSI (%): 0.00	SIR: *

Laminectomy Surgery

Hospital does not perform this procedure

Tillamook County General Hospital

Location: Tillamook
 Ownership: Non Profit
 Med. School Affiliation: None
 ICU Beds: 4
 Total Staffed Beds: 25
 2012 Admissions: 1,219
 2012 Patient Days: 3,290
 ICP FTE: 1



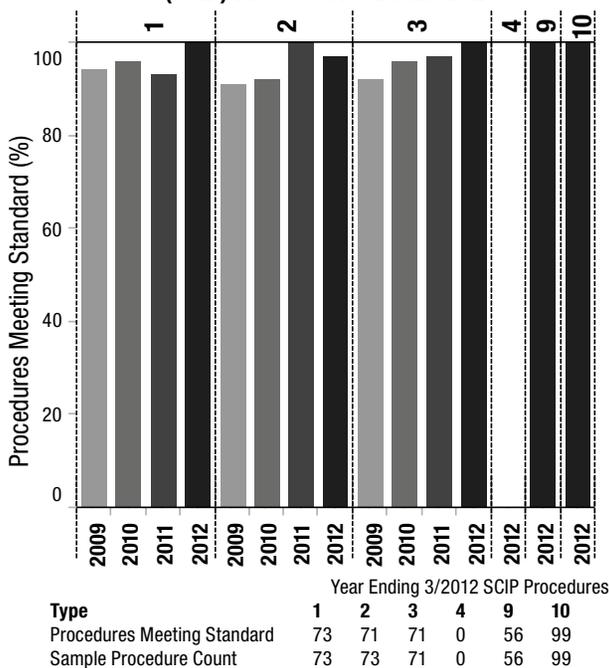
Legend: 2009 (lightest gray), 2010 (medium-light gray), 2011 (medium-dark gray), 2012 (darkest gray)

If the vertical measurement line crosses 1.0 (is in both colors) then the infection rate is not significantly different than expected.

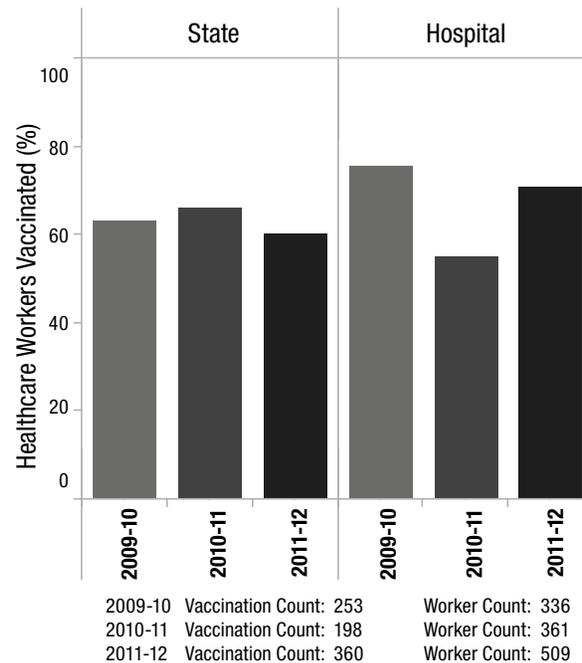
If the line is entirely in the color:

More infections were observed than expected (orange)
 Fewer infections were observed than expected (green)

Surgical Care Improvement Project (SCIP) Process of Care Measures



Healthcare Worker Influenza Vaccination



Central Line Associated Bloodstream Infections (CLABSIs), Adult Medical/Surgical ICUs

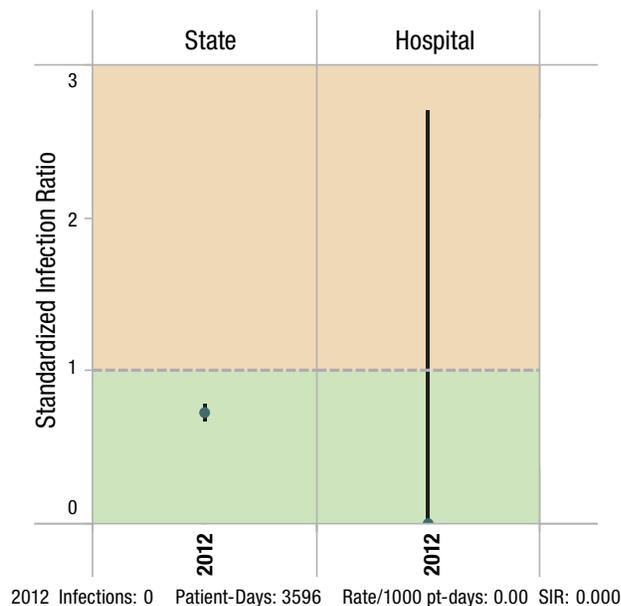
**SIR values only calculated if expected infections ≥ 1*

2009 CLABSIs: 0	CL Days: 67	Rate per 1000 CL days: 0.00	SIR: *
2010 CLABSIs: 0	CL Days: 75	Rate per 1000 CL days: 0.00	SIR: *
2011 CLABSIs: 0	CL Days: 53	Rate per 1000 CL days: 0.00	SIR: *
2012 CLABSIs: 0	CL Days: 41	Rate per 1000 CL days: 0.00	SIR: *

Central Line Associated Bloodstream Infections (CLABSIs), Neonatal ICUs

Hospital does not have a NICU

Incident Clostridium difficile Infections



Coronary Artery Bypass Graft Surgery

Hospital does not perform this procedure

Knee Replacement Surgery

**SIR values only calculated if expected infections ≥ 1*

Colon Surgery

Too few procedures to report

2009	SSIs: 0	Procedures: 27	Procedures with SSI (%): 0.00	SIR: *
2010	SSIs: 1	Procedures: 18	Procedures with SSI (%): 5.56	SIR: *
2011	SSIs: 0	Procedures: 26	Procedures with SSI (%): 0.00	SIR: *
2012	SSIs: 0	Procedures: 23	Procedures with SSI (%): 0.00	SIR: *

Abdominal Hysterectomy Surgery

Too few procedures to report

Hip Replacement Surgery

Too few procedures to report

Laminectomy Surgery

Hospital does not perform this procedure

Tuality Healthcare

Location: Hillsboro
 Ownership: Non Profit
 Med. School Affiliation: None
 ICU Beds: 10
 Total Staffed Beds: 110
 2012 Admissions: 4,700
 2012 Patient Days: 21,595
 ICP FTE: 1.3



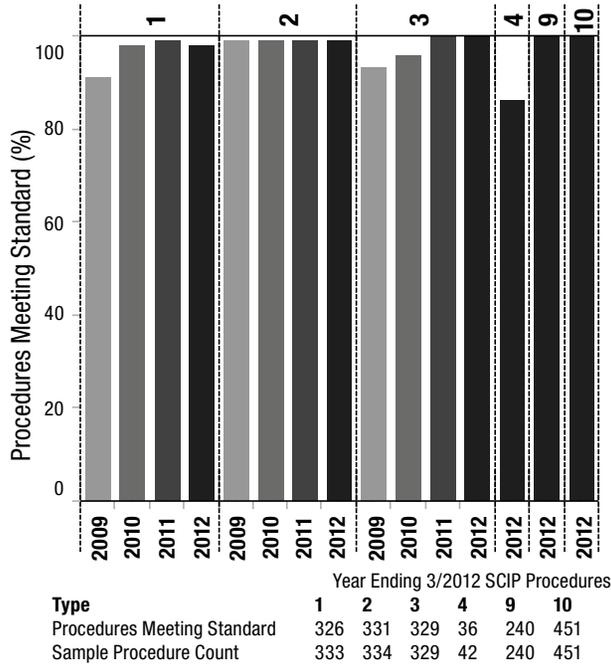
2009
 2010
 2011
 2012

If the vertical measurement line crosses 1.0 (is in both colors) then the infection rate is not significantly different than expected.

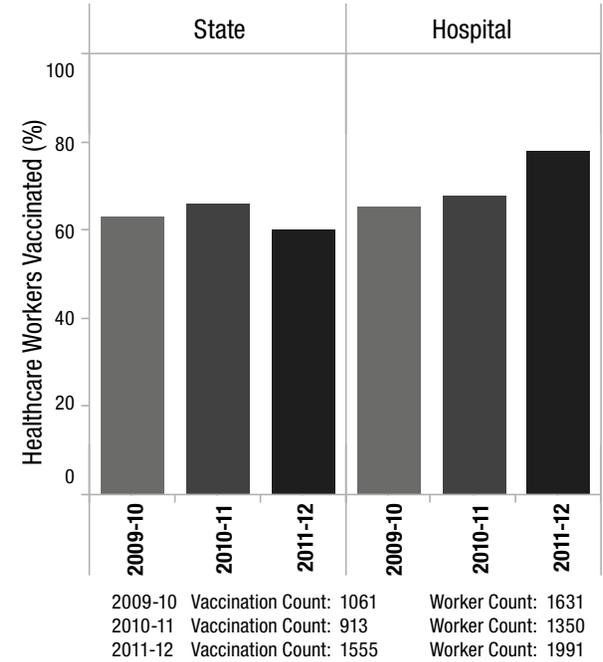
If the line is entirely in the color:

- More infections were observed than expected
- Fewer infections were observed than expected

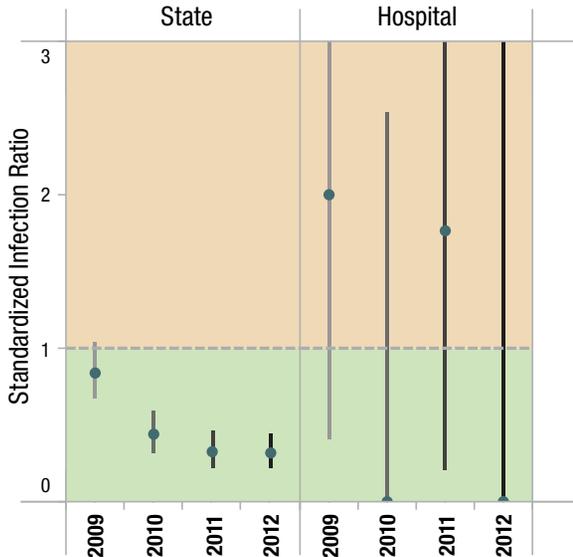
Surgical Care Improvement Project (SCIP) Process of Care Measures



Healthcare Worker Influenza Vaccination



Central Line Associated Bloodstream Infections (CLABSIs), Adult Medical/Surgical ICUs

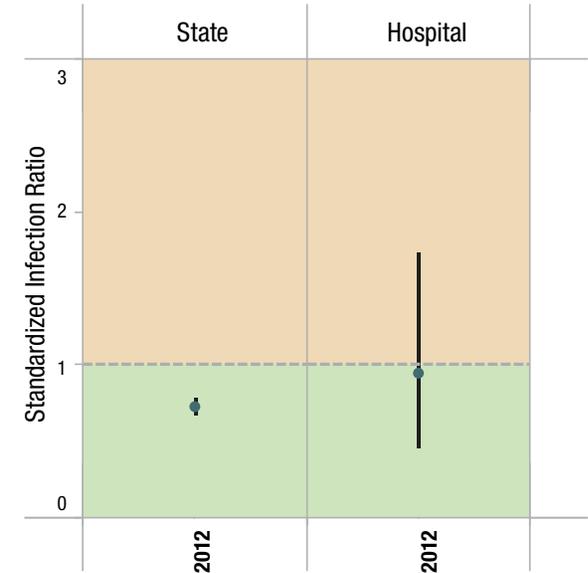


2009	CLABSIs: 3	CL Days: 1000	Rate per 1000 CL days: 3.00	SIR: 2.000
2010	CLABSIs: 0	CL Days: 971	Rate per 1000 CL days: 0.00	SIR: 0.000
2011	CLABSIs: 2	CL Days: 755	Rate per 1000 CL days: 2.65	SIR: 1.765
2012	CLABSIs: 0	CL Days: 772	Rate per 1000 CL days: 0.00	SIR: 0.000

Central Line Associated Bloodstream Infections (CLABSIs), Neonatal ICUs

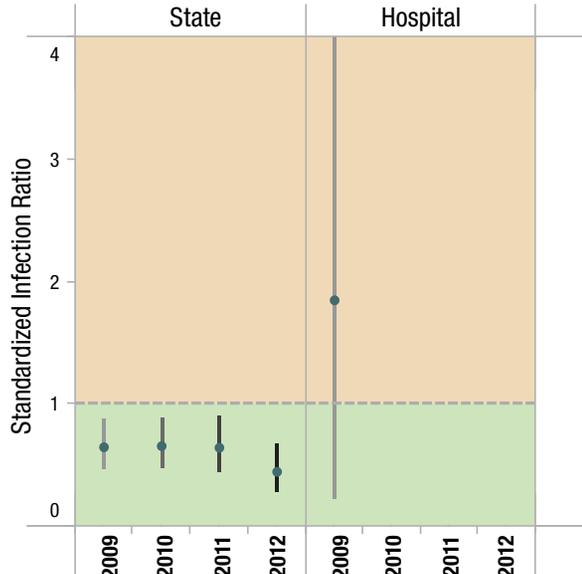
Hospital does not have a NICU

Incident Clostridium difficile Infections



2012 Infections: 10 Patient-Days: 20604 Rate/1000 pt-days: 0.49 SIR: 0.945

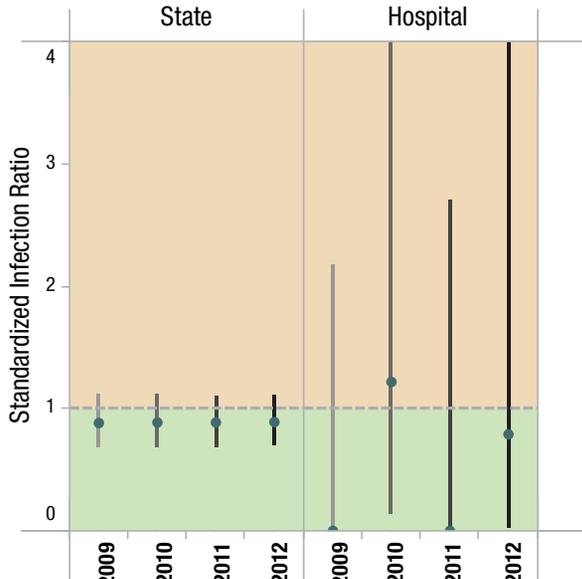
Coronary Artery Bypass Graft Surgery



Year	SSIs	Procedures	Procedures with SSI (%)	SIR
2009	2	43	4.65	1.843
2010	1	29	3.45	*
2011	2	33	6.06	*
2012	0	36	0.00	*

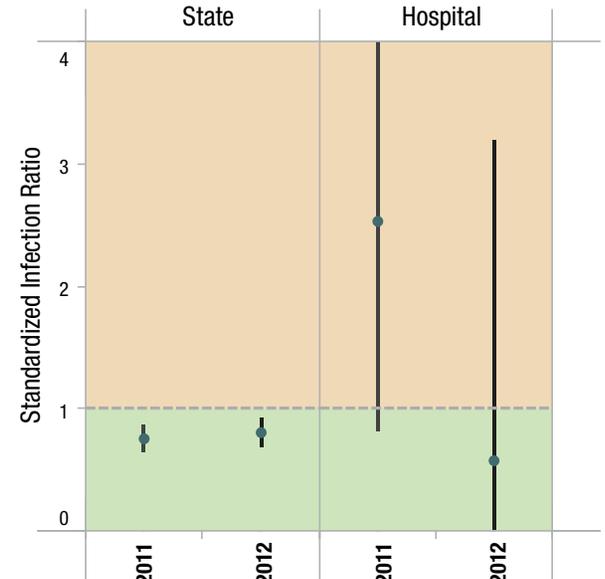
*SIR values only calculated if expected infections ≥ 1

Knee Replacement Surgery



Year	SSIs	Procedures	Procedures with SSI (%)	SIR
2009	0	208	0.00	0.000
2010	2	215	0.93	1.217
2011	0	173	0.00	0.000
2012	1	157	0.64	0.789

Colon Surgery

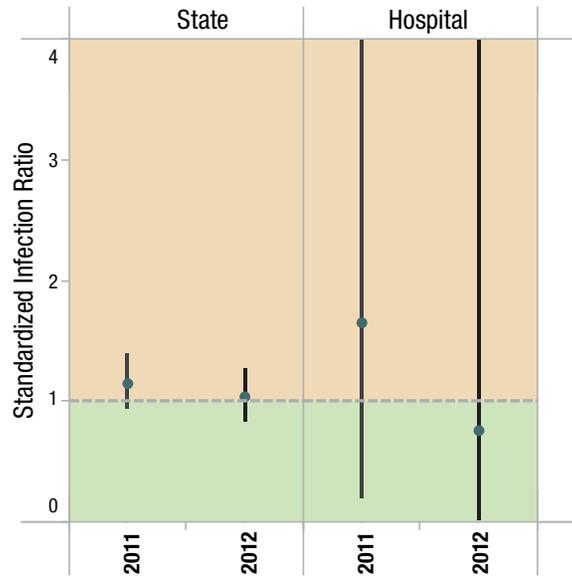


Year	SSIs	Procedures	Procedures with SSI (%)	SIR
2011	5	39	12.82	2.529
2012	1	36	2.78	0.573

Abdominal Hysterectomy Surgery

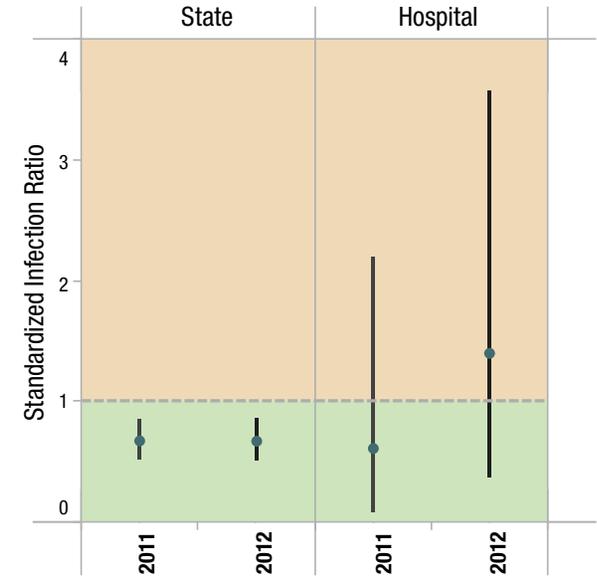
**SIR values only calculated if expected infections ≥ 1*

Hip Replacement Surgery



Year	SSIs	Procedures	Procedures with SSI (%)	SIR
2011	2	32	6.25	*
2012	0	30	0.00	*

Laminectomy Surgery



Year	SSIs	Procedures	Procedures with SSI (%)	SIR
2011	2	78	2.56	1.649
2012	1	102	0.98	0.756

Year	SSIs	Procedures	Procedures with SSI (%)	SIR
2011	2	288	0.69	0.608
2012	4	255	1.57	1.396

Vibra Specialty Hospital

Location:	Portland
Ownership:	Non Profit
Med. School Affiliation:	None
High Observation Beds:	6
Total Staffed Beds:	73
2012 Admissions:	536
2012 Patient Days:	16,204
ICP FTE:	0.625



2009
 2010
 2011
 2012

If the vertical measurement line crosses 1.0 (is in both colors) then the infection rate is not significantly different than expected.

If the line is entirely in the color:

- More infections were observed than expected
- Fewer infections were observed than expected

Central Line Associated Bloodstream Infections (CLABSIs), Adult Medical/Surgical ICUs

Hospital does not have an ICU

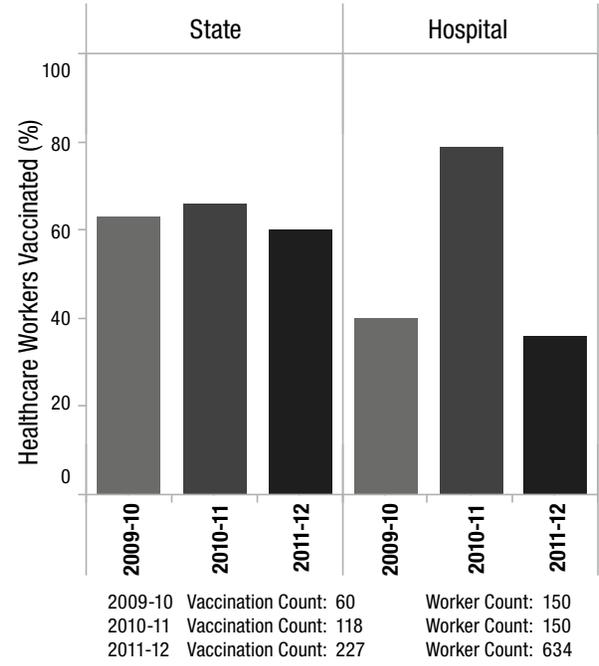
Surgical Care Improvement Project (SCIP) Process of Care Measures

Hospital does not perform these procedures

Central Line Associated Bloodstream Infections (CLABSIs), Neonatal ICUs

Hospital does not have a NICU

Healthcare Worker Influenza Vaccination



Incident *Clostridium difficile* Infections

**SIR values only calculated if expected infections ≥ 1*

2012 Infections: 22 Patient-Days: 16204 Rate/1000 pt-days: 13.577 SIR: *
 *NHSN does not calculate SIRs for long-term acute care facilities at this time

Coronary Artery Bypass Graft Surgery

*Hospital does not perform
this procedure*

Knee Replacement Surgery

*Hospital does not perform
this procedure*

Colon Surgery

*Hospital does not perform
this procedure*

Abdominal Hysterectomy Surgery

*Hospital does not perform
this procedure*

Hip Replacement Surgery

*Hospital does not perform
this procedure*

Laminectomy Surgery

*Hospital does not perform
this procedure*

Wallowa Memorial Hospital

Location:	Enterprise	
Ownership:	Government	
Med. School Affiliation:	None	
ICU Beds:	0	
Total Staffed Beds:	25	
2012 Admissions:	871	
2012 Patient Days:	2,751	
ICP FTE:	0	

2009
 2010
 2011
 2012

If the vertical measurement line crosses 1.0 (is in both colors) then the infection rate is not significantly different than expected.

If the line is entirely in the color:

- More infections were observed than expected
- Fewer infections were observed than expected

Central Line Associated Bloodstream Infections (CLABSIs), Adult Medical/Surgical ICUs

Hospital does not have an ICU

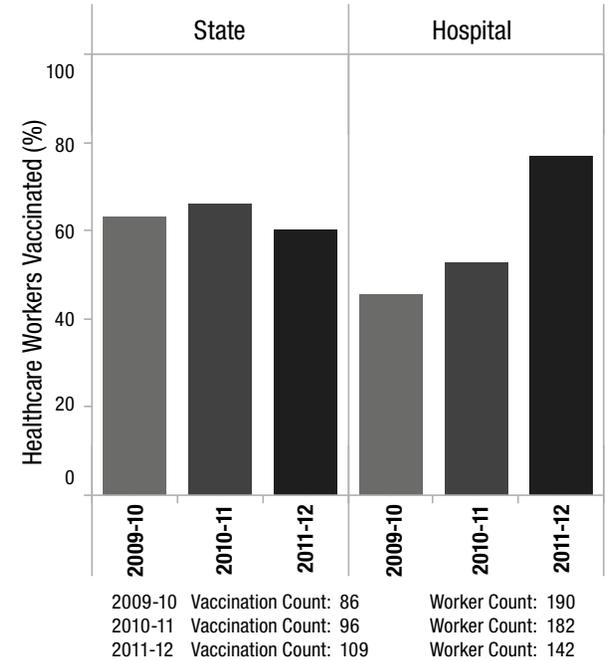
Central Line Associated Bloodstream Infections (CLABSIs), Neonatal ICUs

Hospital does not have a NICU

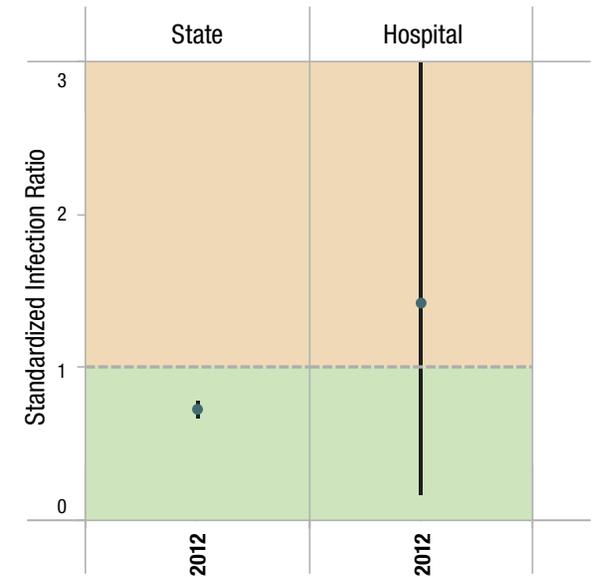
Surgical Care Improvement Project (SCIP) Process of Care Measures

Too few procedures to report

Healthcare Worker Influenza Vaccination



Incident *Clostridium difficile* Infections



2012 Infections: 2 Patient-Days: 2987 Rate/1000 pt-days: 0.67 SIR: 1.421

Coronary Artery Bypass Graft Surgery

*Hospital does not perform
this procedure*

Knee Replacement Surgery

*Hospital does not perform
this procedure*

Colon Surgery

Too few procedures to report

Abdominal Hysterectomy Surgery

Too few procedures to report

Hip Replacement Surgery

*Hospital does not perform
this procedure*

Laminectomy Surgery

*Hospital does not perform
this procedure*

West Valley Community Hospital

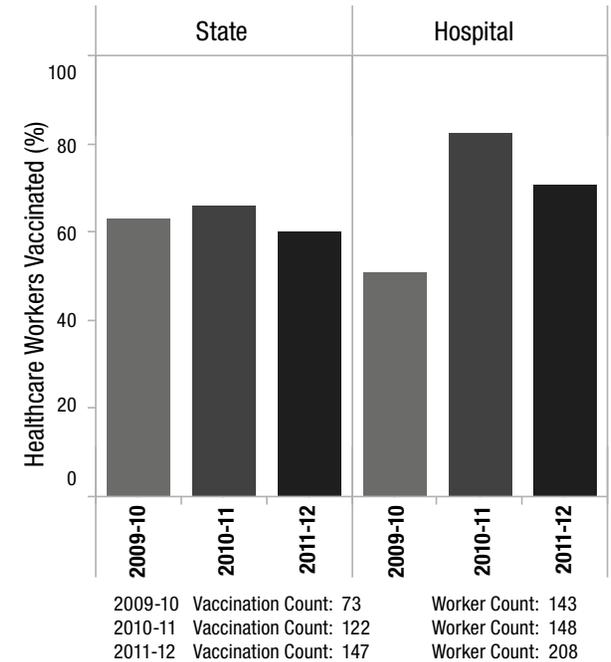
Location: Dallas
 Ownership: Non Profit
 Med. School Affiliation: None
 ICU Beds: 0
 Total Staffed Beds: 6
 2012 Admissions: 147
 2012 Patient Days: 531
 ICP FTE: 1



Surgical Care Improvement Project (SCIP) Process of Care Measures

Hospital does not perform these procedures

Healthcare Worker Influenza Vaccination



2009
 2010
 2011
 2012

If the vertical measurement line crosses 1.0 (is in both colors) then the infection rate is not significantly different than expected.

If the line is entirely in the color:

- More infections were observed than expected
- Fewer infections were observed than expected

Central Line Associated Bloodstream Infections (CLABSIs), Adult Medical/Surgical ICUs

Hospital does not have an ICU

Central Line Associated Bloodstream Infections (CLABSIs), Neonatal ICUs

Hospital does not have a NICU

Incident *Clostridium difficile* Infections

**SIR values only calculated if expected infections ≥ 1*

Coronary Artery Bypass Graft Surgery

*Hospital does not perform
this procedure*

Knee Replacement Surgery

*Hospital does not perform
this procedure*

Colon Surgery

*Hospital does not perform
this procedure*

Abdominal Hysterectomy Surgery

*Hospital does not perform
this procedure*

Hip Replacement Surgery

*Hospital does not perform
this procedure*

Laminectomy Surgery

*Hospital does not perform
this procedure*

Willamette Valley Medical Center

Location: McMinnville
 Ownership: For Profit
 Med. School Affiliation: Graduate
 ICU Beds: 11
 Total Staffed Beds: 86
 2012 Admissions: 4,025
 2012 Patient Days: 12,823
 ICP FTE: 1



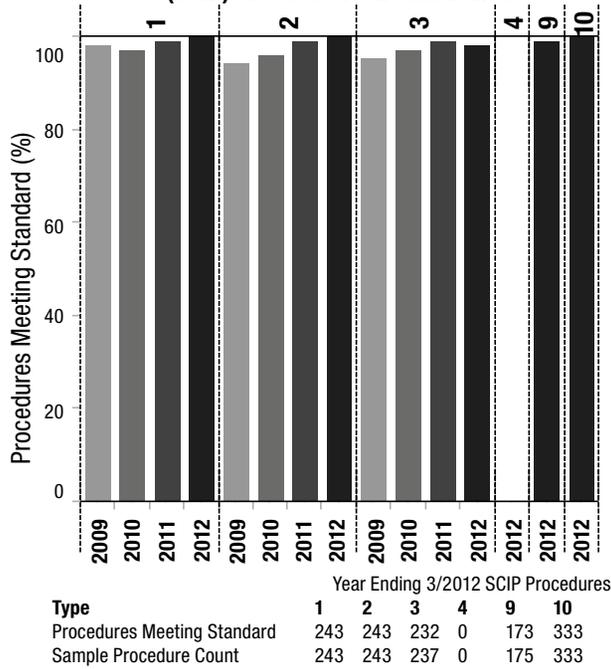
2009 2010 2011 2012

If the vertical measurement line crosses 1.0 (is in both colors) then the infection rate is not significantly different than expected.

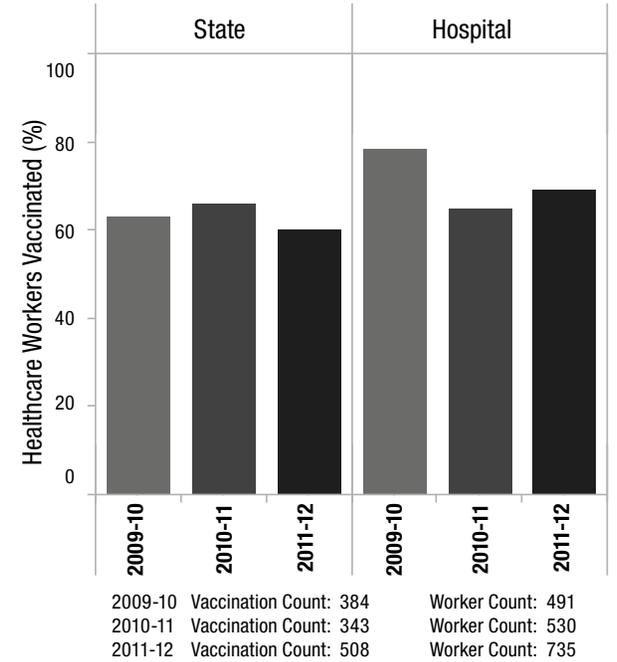
If the line is entirely in the color:

- More infections were observed than expected
- Fewer infections were observed than expected

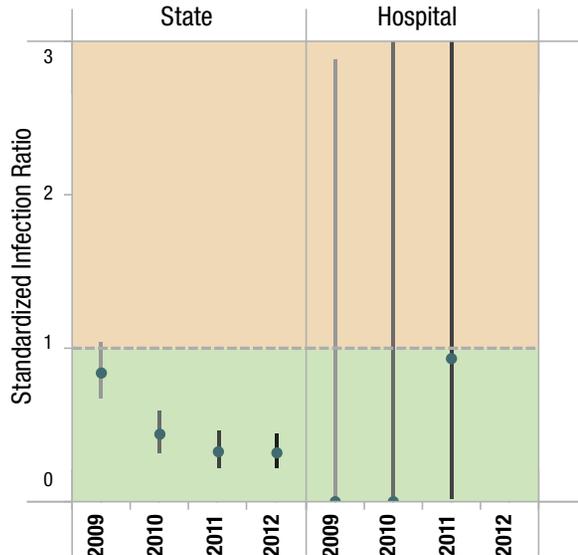
Surgical Care Improvement Project (SCIP) Process of Care Measures



Healthcare Worker Influenza Vaccination



Central Line Associated Bloodstream Infections (CLABSIs), Adult Medical/Surgical ICUs



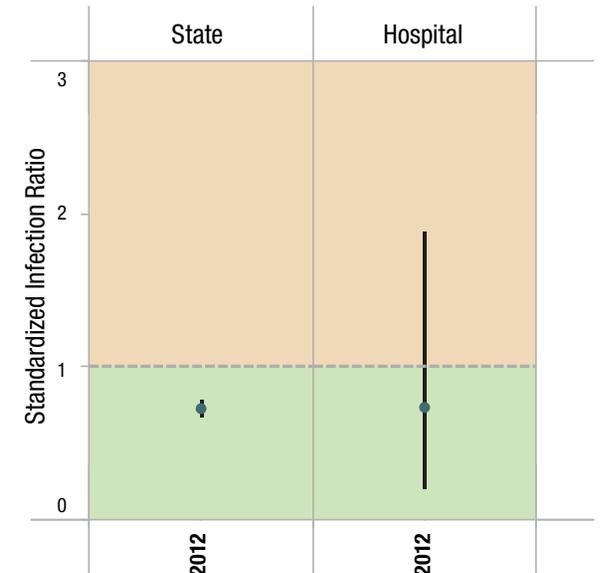
2009	CLABSIs: 0	CL Days: 852	Rate per 1000 CL days: 0.00	SIR: 0.000
2010	CLABSIs: 0	CL Days: 730	Rate per 1000 CL days: 0.00	SIR: 0.000
2011	CLABSIs: 1	CL Days: 715	Rate per 1000 CL days: 1.40	SIR: 0.932
2012	CLABSIs: 0	CL Days: 588	Rate per 1000 CL days: 0.00	SIR: *

*SIR values only calculated if expected infections ≥ 1

Central Line Associated Bloodstream Infections (CLABSIs), Neonatal ICUs

Hospital does not have a NICU

Incident Clostridium difficile Infections



2012 Infections: 4 Patient-Days: 12253 Rate/1000 pt-days: 0.33 SIR: 0.734

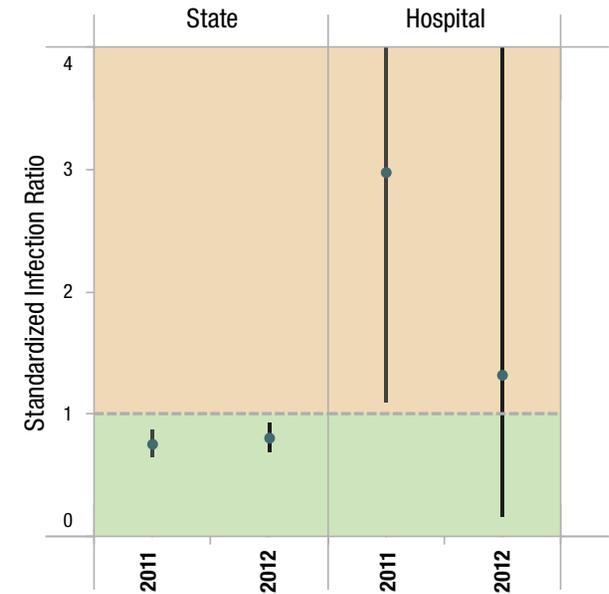
Coronary Artery Bypass Graft Surgery

Hospital does not perform this procedure

Knee Replacement Surgery

**SIR values only calculated if expected infections ≥ 1*

Colon Surgery



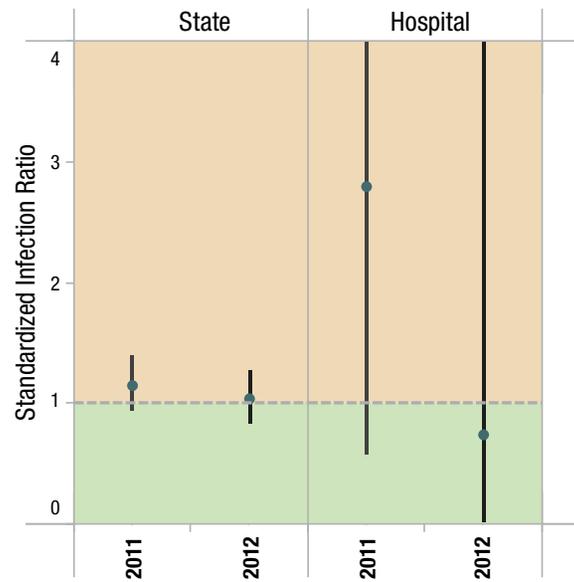
2011 SSIs: 6	Procedures: 39	Procedures with SSI (%): 15.38	SIR: 2.973
2012 SSIs: 2	Procedures: 31	Procedures with SSI (%): 6.45	SIR: 1.317

2009 SSIs: 3	Procedures: 83	Procedures with SSI (%): 3.61	SIR: *
2010 SSIs: 0	Procedures: 108	Procedures with SSI (%): 0.00	SIR: *
2011 SSIs: 1	Procedures: 89	Procedures with SSI (%): 1.12	SIR: *
2012 SSIs: 1	Procedures: 94	Procedures with SSI (%): 1.06	SIR: *

Abdominal Hysterectomy Surgery

**SIR values only calculated if expected infections ≥ 1*

Hip Replacement Surgery



2011 SSIs: 1	Procedures: 60	Procedures with SSI (%): 1.67	SIR: *
2012 SSIs: 1	Procedures: 48	Procedures with SSI (%): 2.08	SIR: *

2011 SSIs: 0	Procedures: 31	Procedures with SSI (%): 0.00	SIR: *
2012 SSIs: 0	Procedures: 17	Procedures with SSI (%): 0.00	SIR: *

2011 SSIs: 3	Procedures: 81	Procedures with SSI (%): 3.70	SIR: 2.793
2012 SSIs: 1	Procedures: 111	Procedures with SSI (%): 0.90	SIR: 0.738

Laminectomy Surgery

**SIR values only calculated if expected infections ≥ 1*



CENTER FOR PUBLIC HEALTH PRACTICE
Acute and Communicable Disease
Prevention Section
Healthcare Associated Infections Program

Phone: 971-673-1111

Fax: 971-673-1100

[http://public.health.oregon.gov/
DiseasesConditions/CommunicableDisease/
HAI/Pages/index.aspx](http://public.health.oregon.gov/DiseasesConditions/CommunicableDisease/HAI/Pages/index.aspx)

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