2021 National and State HAI Pro Report

Long-Term Acute Care Hospitals

Introduction:

Welcome to the 2021 National and State HAI Progress Report using the 2015 baseline and risk adjustment calculations. Standardiz are used to describe different HAI types by comparing the number of observed infections to the number of predicted infections. The This report is created by CDC staff within the National Healthcare Safety Network (NHSN).

This workbook includes national and state-specific SIR data for long-term acute care hospitals (LTACHs).

Scope of report:

HAI Type	LT	ACH
	National	State
Central line-associated bloodstream infections (CLABSI) by locations	V	
Catheter-associated urinary tract infections (CAUTI) by locations	✓	$\overline{\checkmark}$
Ventilator-associated events (VAE) by locations		$\overline{\checkmark}$
Hospital-onset methicillin-resistant Staphylococcus aureus (MRSA) bacteremia by facility-wide reporting		$\overline{\checkmark}$
Hospital-onset Clostridioides difficile (CDI) by facility-wide reporting		$\overline{\checkmark}$

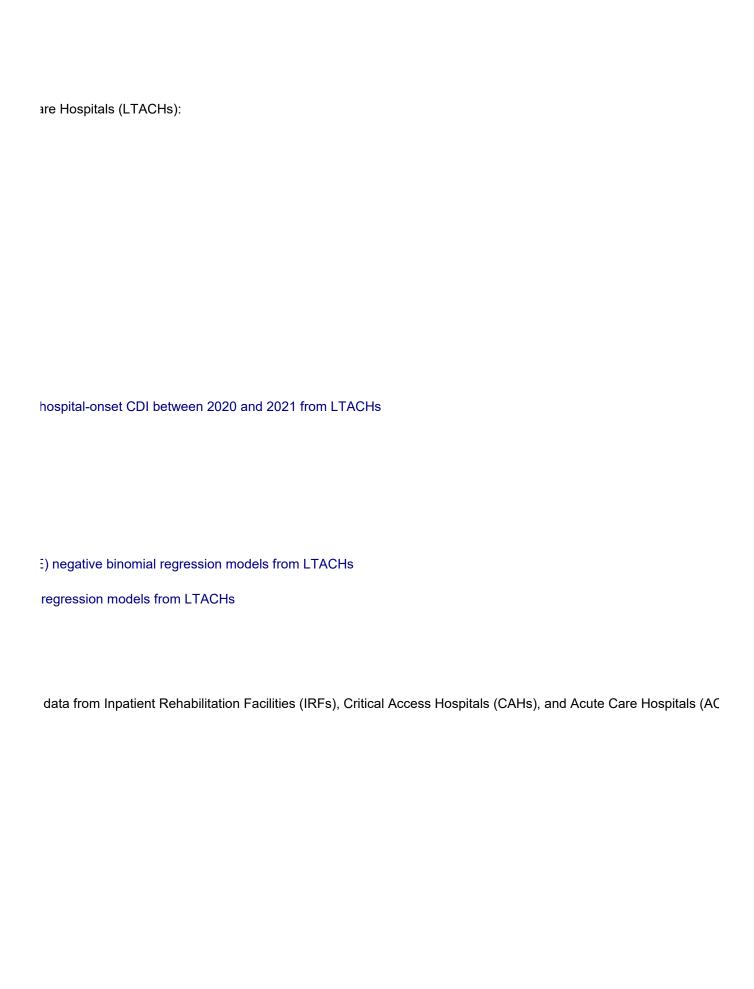
gress

zed infection ratios (SIRs)

2021 SIRs are compared to previous year's SIRs.

2021 Annual National and State HAI Progress Report <u>Long-term Acute Care Hospitals</u>: Full series of tables for all national and state-specific data

Table 1 National standardized infection ratios (SIRs) for the following HAIs from Long-term Acute Ca 1a. Central line-associated bloodstream infections (CLABSI) 1a. Catheter-associated urinary tract infections (CAUTI) 1a. Ventilator-associated events (VAE) 1b. Hospital-onset methicillin-resistant Staphylococcus aureus (MRSA) bacteremia 1b. Hospital-onset Clostridioides difficile (CDI) Table 2 State-specific SIRs for CLABSI from LTACHs for all locations combined Table 3 State-specific SIRs for CAUTI from LTACHs for all locations combined Table 4 State-specific SIRs for VAE from LTACHs Table 5 State-specific SIRs for hospital-onset MRSA bacteremia from LTACHs Table 6 State-specific SIRs for hospital-onset CDI from LTACHs Table 7 Changes in national SIRs for CLABSI, CAUTI, VAE, hospital-onset MRSA bacteremia, and I Table 8 Changes in state-specific SIRs between 2020 and 2021 from LTACHs 8a. CLABSI, all locations combined 8b. CAUTI, all locations combined 8c. VAE, all locations combined 8d. Hospital-onset MRSA bacteremia 8e. Hospital-onset CDI Appendix A Factors used in NHSN risk adjustment of the device-associated HAIs (CLABSI, CAUTI, VAE Appendix B Factors used in NHSN risk adjustment of the MRSA Bacteremia and CDI negative binomial Additional Resources SIR Guide **Technical Appendix** HAI Progress Report Home Page NOTE: Tables contain data from Long-term Acute Care Hospitals (LTACHs); as such, they exclude



HAI and Patient Population	<u>R</u>	eporting Hospital	<u> s</u>		<u>Standardize</u>
	No. of Long Term Acute Care Hospitals Reporting ¹	Total Patient Days	Total Device Days	Observed Events	Predicted Events
CLABSI, all ⁴	390	4,672,028	3 1,661,511	1,524	2,051.130
ICUs⁵	68	280,877	7 113,257	205	266.580
Wards ⁶	385	4,391,151	1,548,254	1,319	1,784.550
CAUTI, all ⁷	390	4,646,693	3 1,464,668	1,884	2,515.280
	68	280,513	104,196	121	247.260
	385	4,366,180	1,360,472	1,763	2,268.010
VAE, all ⁷	168	1,964,535	616,827	658	1,174.361
,	39	122,956	•	153	151.680
	164	1,841,579	•	505	1,022.681

- 1. The number of reporting facilities included in the SIR calculation.
- 2. Percent of facilities with at least one predicted infection (event) that had an SIR significantly greater than or less than the nominal value of the nation
- 3. Facility-specific percentiles are only calculated if at least 20 facilities had ≥1.0 predicted HAI in 2021. If a facility's predicted number of HAIs was <
- 4. Data from all ICUs and wards
- 5. Data from all ICUs; excludes wards. For VAE, pediatric locations are excluded from SIR since pediatric and neonatal locations are excluded from
- 6. Data from all wards. For VAE, pediatric locations are excluded from SIR since pediatric and neonatal locations are excluded from VAE surveillanc
- 7. Data from all ICUs and wards. For VAE, pediatric locations are excluded from SIR since pediatric and neonatal locations are excluded from VAE s IVAC-plus includes those events identified as infection-related ventilator-associated condition (IVAC) and possible ventilator-associated pneumonic

NOTE: Risk factors used in the calculation of the number of predicted device-associated infections are listed in Appendix A.

Table 1a. National standardized infection ratios (SIRs) and facility-specific summary SIRs using HAI data reported to NHSN during 2021 by Central line-associated bloodstream infections (CLABSIs), catheter-associated urinary tract infections (CAUTIs) and ventilate

d Infection	Ratio Data			Facility SIRs Compared to National SIR						
SIR	Lower 95% Confidence Interval	Upper 95% Confidence Interval	No. Facilities with ≥1 Predicted No. Facilities with SIR No. Facilities with SIR Infection (Event) Significantly > National SIR Significantly < National SIR							
				N	% ²	N		5%	10%	
0.743	0.706	0.781	374	46	12%	56	15%	0.000	0.000	
0.769	0.669	0.880	60	9	15%	2	3%	0.000	0.000	
0.739	0.700	0.780	367	44	12%	49	13%	0.000	0.000	
0.749	0.716	0.783	381	44	12%	55	14%	0.000	0.000	
0.489	0.408	0.583	62	5	8%	0	0%	0.000	0.000	
0.777	0.742	0.814	374	41	11%	58	16%	0.000	0.000	
0.560	0.519	0.604	138	19	14%	32	23%	0.000	0.000	
1.009	0.858	1.178	34	6	18%	8	24%	0.000	0.000	
0.494	0.452	0.538	130	17	13%	26	20%	0.000	0.000	

onal SIR for the given HAI type. This is only calculated if at least 10 facilities had ≥ 1.0 predicted HAI in 2021.

VAE surveillance.

e

urveillance. Total VAE includes IVAC-plus events.

a (pVAP). IVAC-plus events are a subset of the total VAE, meaning the IVAC-plus events are included in the total VAE SIR as well.

^{:1.0,} a facility-specific SIR was neither calculated nor included in the distribution of facility-specific SIRs.

facility type, HAI, and patient population: pr-associated events (VAEs)

Percentile Distribution of Facility-specific SIRs³

								Median					
	15%	20%	25%	30%	35%	40%	45%	50%	55%	60%	65%	70%	75%
_	0.000	0.000	0.000	0.146	0.236	0.313	0.378	0.451	0.531	0.648	0.777	0.914	1.075
	0.000	0.000	0.000	0.000	0.227	0.273	0.314	0.364	0.426	0.525	0.638	0.992	1.249
	0.000	0.000	0.000	0.130	0.216	0.299	0.373	0.437	0.523	0.647	0.788	0.915	1.074
	0.000	0.132	0.221	0.291	0.357	0.406	0.477	0.550	0.671	0.769	0.875	1.019	1.108
	0.000	0.000	0.000	0.000	0.000	0.000	0.207	0.294	0.304	0.460	0.543	0.718	0.869
	0.000	0.114	0.209	0.287	0.354	0.405	0.476	0.587	0.651	0.772	0.888	1.025	1.137
	0.000	0.000	0.000	0.000	0.000	0.000	0.100	0.162	0.323	0.377	0.522	0.596	0.759
	0.000	0.000	0.000	0.000	0.000	0.336	0.392	0.593	0.759	0.923	1.209	1.318	1.436
	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.125	0.249	0.329	0.378	0.558	0.679

80%	85%	90%	95%
1.274	1.508	1.832	2.598
1.417	1.681	2.194	2.647
1.293	1.497	1.843	2.614
1.288	1.449	1.720	2.301
0.955	1.024	1.720	1.348
			2.360
1.321	1.491	1.805	2.300
0.957	1.353	2.250	3.520
1.832	2.422	3.281	4.787
0.870	1.130	2.103	3.407

HAI and Patient Population		Reporting l	<u> Iospitals</u>		
		Total Admissions ²	Total Patient Days ³	Community-onset events	Observed Hospital- onset Events⁴
MRSA bacteremia, facility-wide⁴	194	74,439	2,527,622	32	264
Hospital-onset <i>C. difficile,</i> facility-wide⁴	391	156,978	4,810,872	202	1,683

- 1. The number of reporting facilities included in the SIR calculation.
- 2. Total inpatient admissions reported from all inpatient locations.
- 3. Total patient days reported from all inpatient units.
- 4. Hospital-onset events are defined as those that were identified in an inpatient location on the 4th day (or later) after admission to the facility.
- 5. Calculated from a negative binomial regression model. Risk factors used in the calculation of the number of predicted events are listed in Appendix B.
- 6. Percent of facilities with at least one predicted event that had an SIR significantly greater than or less than the nominal value of the national SIR for the
- 7. Percentile distribution of facility-specific SIRs. This is only calculated if at least 20 facilities had ≥1.0 predicted HAI in 2021. If a facility's predicted num

Table 1b. National standardized infection ratios (SIRs) and facility-specific summary SIRs using HAI data reported to NHSN during 2021 be hospital-onset methicillin-resistant *Staphylococcus aureus* (MRSA) bacteremia and hospital-onset *Clostridioic*

Standardized Infection Ratio Data					Facility SIRs Compared to National SIR					
Predicted Hospital- onset Events⁵	SIR	Lower 95% Confidence Interval	Upper 95% Confidence Interval	No. Facilities with ≥1 Predicted Event	No. Facilitie Significantly >		No. Facilitie Significantly <			
					N	% ⁶	N		5%	
395.315	0.668	0.591	0.752	142	16	11%	4	3%	0.000	
4,718.571	0.357	0.340	0.374	388	51	13%	35	9%	0.000	

e given HAI type. This is only calculated if at least 10 facilities had ≥ 1.0 predicted HAI in 2021.

nber of events was <1.0, a facility-specific SIR was neither calculated nor included in the distribution of facility-specific SIRs.

by facility type, HAI, and patient population: des difficile (CDI)

Percentile Distribution of Facility-specific SIRs⁷

		Median										
10%	15%	20%	25%	30%	35%	40%	45%	50%	55%	60%	65%	70%
0.000	0.000	0.000	0.000	0.000	0.000	0.081	0.287	0.395	0.513	0.633	0.755	0.944
0.000	0.000	0.055	0.104	0.134	0.159	0.205	0.236	0.287	0.323	0.356	0.403	0.447

75%	80%	85%	90%	95%
1.055	1.257	1.752	2.047	2.445
0.502	0.581	0.718	0.862	1.100

Table 2. State-specific standardized infection rat NHSN Long-Term Acute Care Ho

Central line-associated bloodstream in

				No. of In	<u>fections</u>		<u>95% CI</u>
State	State NHSN Mandate ²	Any Validation ³	No. of LTACHs Reporting⁴	Observed	Prodicted	SIR	Lower
Alabama	No	No	Reporting 8			0.576	0.312
Alaska	Yes	No	1	'2	20.042	0.570	0.512
Arizona	163	NO	6	5	24.015	0.208	0.076
Arkansas			8			0.558	0.302
California			22			1.265	1.133
Colorado	Yes	No	6			0.251	0.102
Connecticut	Yes	No	2		20.020	0.201	0.102
D.C.	Yes	No	2		•	•	•
Delaware		140	1		•	•	•
Florida	No	Yes	27		172.488	0.597	0.490
Georgia		103	12			0.627	0.458
Guam			0		00.550	0.027	0.430
Hawaii	No	No	0		•	•	•
Idaho	No	No	2		•	•	
Illinois	No	No	9		73.382	0.995	0.785
Indiana	Yes	No	9			0.483	0.703
lowa	No	No			33.002	0.400	0.322
Kansas		NO	2		•	•	
Kentucky			9		37.567	0.506	0.314
Louisiana			28			0.615	0.466
Maine	No	No	0		00.120	0.013	0.400
Maryland	No	No	2		•	•	
Massachusetts	Yes	No	11		54.401	1.158	0.897
Michigan	No	No	17			1.237	0.957
Minnesota	No	No			30.104	1.207	0.937
Mississippi	Yes	No	2 7	43	26.450	1.626	1.191
Missouri	No	No	10			0.827	0.579
Montana	No	No	10		00.000	0.027	0.073
Nebraska	No	No	4		•	•	
Nevada		140	8		52.668	0.247	0.137
New Hampshire	No	No	0		32.000	0.247	0.107
New Jersey	No	No	12		48.483	0.866	0.632
New Mexico		140	3		40.400	0.000	0.002
New York			1		•	•	•
North Carolina	Yes	No	8		43.298	0.393	0.236
North Dakota	No	No	2		∓U.∠UU	0.000	0.200
Ohio	No	No	25		120.458	0.365	0.269
Oklahoma		NO	10			0.363	0.209
Oregon	Yes	No	10		JU.Z 1 1	0.201	0.133
Pennsylvania		140	17		62.993	0.571	0.406
Puerto Rico	No	No	0		02.000	0.07 1	0.400
Rhode Island	No	No	0		•	•	
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All US			390	1,524	2,051.130	0.743	0.706
Wyoming			0				
Wisconsin	No	Yes	4				
West Virginia	Yes	No	5	31	19.077	1.625	1.124
Washington	Yes	No	1				
Virginia	Yes	No	6	25	24.561	1.018	0.673
Virgin Islands			0				
Vermont			0				
Utah	Yes	No	3				
Texas			58	235	377.510	0.623	0.547
Tennessee	Yes	Yes	8	30	30.246	0.992	0.681
South Dakota	No	No	1				•
South Carolina	Yes	Yes	6	22	27.314	0.805	0.518

- 1. Includes data reported from all locations (i.e., adult and pediatric critical care units and wards) within LTACHs.
- 2. Yes indicates the presence of a state mandate to report CLABSI data from any location to NHSN at the beginning No indicates that a state mandate did not exist during 2021.
- 3. Yes indicates that the state health department reported the completion of all of the following validation activities: assessment of missing or implausible values on at least six months of 2021 NHSN data prior to June 1, 2022, a Yes indicates that the state also conducted an audit of facility medical or laboratory records prior to June 1, 2022 varies by state). Information on validation efforts was requested from all states, regardless of the presence of a reporting of a given HAI to the state health department have performed validation on NHSN data that is voluntar
- 4. The number of LTACHs that reported 2021 CLABSI data and are included in the SIR calculation. SIRs and acc from at least one location in 2021.
- 5. Percent of facilities with ≥1.0 predicted CLABSI that had an SIR significantly greater or less than the nominal val ≥ 1.0 predicted CLABSI in 2021.
- 6. Facility-specific key percentiles were only calculated if at least 20 facilities had ≥1.0 predicted CLABSI in 2021. nor included in the distribution of facility-specific SIRs.

ios (SIRs) and facility-specific SIR summary measures, spitals (LTACHs) reporting during 2021

nfections (CLABSIs) in LTACHs, all locations¹

for SIR	Fac	cility-specific SIF	<u>Rs</u>	<u>Facilit</u>	y-specific	SIRs at Ke	y Percen
Upper	No. of facs with at least 1 predicted CLABSI	% of facs with SIR sig higher than national SIR⁵	% of facs with SIR sig lower than national SIR⁵	10%	25%	Median (50%)	75%
0.979							
				-			
0.461	5			-			
0.949							
1.408		32%	14%	0.150	0.622	0.949	1.551
0.522	5	•	•	Ē	•	•	•
•	•	•	•	•			
•	•	•		•	•	•	•
0.721	26	8%	23%	0.000	0.143	0.431	0.830
0.839		8%	17%	_			
				-			
				-			
1.244	9						
0.697	9	•					
•		•		-			•
0.775	9	•	•	-	•	•	
0.799		15%	12%	0.000	0.000	0.000	1.167
				_			
1.472	9			-			
1.576	15	27%	0%				
				•			
2.170				-			
1.148	10	29%	14%	-			•
•	•	•	•	-		•	•
0.411	8	•	•	•		•	
1.160	11	0%	0%	_			
				-			
0.616	8			•			
0.486	25	0%	12%	0.000	0.016	0.348	0.657
0.430	9		•	-	٠	•	•
0.783	17	12%	18%	-		•	•
0.700		1270	1070		•		•
				ı			

0.781	374	12%	15%	0.000	0.000	0.451	1.075
							<u>.</u>
2.278	5						
1.480	5						
0.706	57	11%	19%	0.000	0.000	0.316	0.746
1.398	8			-			•
1.199	6						

ng of 2021. M indicates midyear implementation of a mandate.

lue of the 2021 national LTACH CLABSI SIR of 0.743. This is only calculated if at least 10 facilities had

If a facility's predicted number of CLABSI was <1.0, a facility-specific SIR was neither calculated

state health department had access to 2021 NHSN data, state health department performed an nd state health department contacted identified facilities.

² to confirm proper case ascertainment (although intensity of auditing activities legislative mandate for the particular HAI type. Some states without mandatory ily shared with them by facilities in their jurisdiction. ompanying statistics are only calculated for states in which at least 5 LTACHs reported CLABSI data

tiles⁶

90%

3.094

1.295

2.406

1.495

Table 3. State-specific standardized infection rat NHSN Long-Term Acute Care Ho

Catheter-associated urinary tract in

						Socialeu ui	inary tract in	
				No. of In	<u>rections</u>		<u>95% CI</u>	
State				Observed	Predicted	SIR	Lower	
Alabama	No	No	8		34.277	0.613	0.389	
Alaska	Yes	No	1		01.277	0.010	0.000	
Arizona	100	110	6	17	23.970	0.709	0.427	
Arkansas			8		36.301	0.551	0.346	
California			22	303	350.139	0.865	0.772	
Colorado	Yes	No	6		49.166	1.200	0.922	
Connecticut	Yes	No	2		40.100	1.200	0.022	
D.C.	Yes	No	2			-	•	
Delaware	163	110	1			-		
Florida	No	Yes	27	117	207.114	0.565	0.469	
Georgia	INO	165	12		95.112	0.999	0.409	
Guam			0		93.112	0.999	0.013	
Hawaii	No	No.						
Idaho	No No	No	0		-	-		
		No			. 02.562	. 0.000	0.647	
Illinois	No	No	9		83.563	0.826	0.647	
Indiana	Yes	No	9		51.151	0.782	0.566	
lowa	No	No	2		-	-		
Kansas			3					
Kentucky			9		38.634	1.061	0.772	
Louisiana			28		123.893	0.484	0.373	
Maine	No	No	0			-		
Maryland	No	No	2		-	-		
Massachusetts	Yes	No	11		65.972	1.334	1.076	
Michigan	No	No	17		72.401	0.939	0.735	
Minnesota	No	No	2 7					
Mississippi	Yes	No			35.256	0.908	0.631	
Missouri	No	No	10	48	53.742	0.893	0.666	
Montana	No	No	1					
Nebraska	No	No	4					
Nevada			8	46	50.763	0.906	0.671	
New Hampshire	No	No	0					
New Jersey	No	No	12	32	60.409	0.530	0.369	
New Mexico			3					
New York			1					
North Carolina	Yes	No	8	23	51.817	0.444	0.288	
North Dakota	No	No	2					
Ohio	No	No	25	97	121.759	0.797	0.650	
Oklahoma			10	29	63.449	0.457	0.312	
Oregon	Yes	No	1					
Pennsylvania			17	54	69.507	0.777	0.589	
Puerto Rico	Yes	No	0					
Rhode Island	No	No	0				_	

All US			390	1,884	2,515.280	0.749	0.716
Wyoming			0				
Wisconsin	No	Yes	4				
West Virginia	Yes	No	5	25	36.242	0.690	0.456
Washington	No	No	1				
Virginia	Yes	No	6	32	39.940	0.801	0.557
Virgin Islands			0				
Vermont			0				
Utah	Yes	No	3				
Texas			58	225	418.029	0.538	0.471
Tennessee	Yes	Yes	8	25	47.298	0.529	0.350
South Dakota	No	No	1				
South Carolina	No	No	6	36	25.850	1.393	0.990

- 1. Includes data reported from all locations (i.e., adult and pediatric critical care units and wards) within LTACHs.
- 2. Yes indicates the presence of a state mandate to report CAUTI data from any location to NHSN at the beginning No indicates that a state mandate did not exist during 2021.
- 3. Yes indicates that the state health department reported the completion of all of the following validation activities: assessment of missing or implausible values on at least six months of 2021 NHSN data prior to June 1, 2022, a Yes indicates that the state also conducted an audit of facility medical or laboratory records prior to June 1, 2022 varies by state). Information on validation efforts was requested from all states, regardless of the presence of a reporting of a given HAI to the state health department have performed validation on NHSN data that is voluntar
- 4. The number of LTACHs that reported 2021 CAUTI data and are included in the SIR calculation. SIRs and accofrom at least one location in 2021.
- 5. Percent of facilities with ≥1.0 predicted CAUTI that had an SIR significantly greater or less than the nominal valu ≥ 1.0 predicted CAUTI in 2021.
- 6. Facility-specific key percentiles were only calculated if at least 20 facilities had ≥1.0 predicted CAUTI in 2021. If nor included in the distribution of facility-specific SIRs.

ios (SIRs) and facility-specific SIR summary measures, spitals (LTACHs) reporting during 2021

fections (CAUTIs) in LTACHs, all locations¹

r SIR	<u>Facility-</u>	specific SIRs					
Upper	No. of facs with at least 1 predicted CAUTI			10%	25%		75%
0.921	8						
1.112	6						
0.836							
0.967		18%	27%	0.088	0.247	0.468	0.848
1.537	6						
0.675	27	15%	30%	0.000	0.151	0.382	0.974
1.216		25%	0%	0.000	0	0.002	0.0.
1.2.10		2070	0,70	•	•	•	
		-		•	•	•	
			•	•	•	•	
1.039	. 8	· ·	•	•		•	
1.054			•	•	•	•	
1.00-1		•	•	•		•	
		-	-	•		•	
1.426	9	•	•	•	•	•	
0.619		8%	25%	0.000	0.000	0.249	0.722
0.013	25	070	25 /0	0.000	0.000	0.243	0.7 22
		· ·	•	•	•	•	
1.635	10	30%	10%	•	•	•	
1.183		12%	0%	•	•	•	
1.100	17	12 /0	0 70	•	•	•	
1.266	7		•	•	•	•	
1.174	10	10%	10%	•	•	•	
1.174	10	10 /6	10 76	•	•	•	
			•	•	•	•	
1.198	8		•	•	•	•	
1.190	O	•	•	•	•	•	
0.739	11	9%	45%	•			
0.739	11	9 70	4576	•		•	
	•	•	-	•		•	
0.655		•	-	•			
0.655	8	•	-	•	•	•	
0.000							4 4 4 4
0.968		8%	0%	0.000	0.283	0.601	1.113
0.648	9	· ·					
				•		•	
1.006	17	6%	12%	•	•	•	
			·		•		

0.783	381	12%	14%	0.000	0.221	0.550	1.108
1.003	5						
1.118	6						
0.612	58	12%	24%	0.000	0.000	0.250	0.740
0.769	8						
1.907	6						

g of 2021. M indicates midyear implementation of a mandate.

state health department had access to 2021 NHSN data, state health department performed an nd state health department contacted identified facilities.

2 to confirm proper case ascertainment (although intensity of auditing activities legislative mandate for the particular HAI type. Some states without mandatory ily shared with them by facilities in their jurisdiction.

mpanying statistics are only calculated for states in which at least 5 LTACHs reported CAUTI data

ue of the 2021 national LTACH CAUTI SIR of 0.749. This is only calculated if at least 10 facilities had

¹ a facility's predicted number of CAUTI was <1.0, a facility-specific SIR was neither calculated

90%

1.162

1.646

1.286

Table 4. State-specific standardize
NHSN Long-Term
Ventilator-ass

				No. of	<u>Events</u>	
State				Observed	Predicted	SIR
Alabama	No	No	6	0	14.373	0.000
Alaska	Yes	No	0	J	11.070	0.000
Arizona	100	110	1	•	•	•
Arkansas			2		•	
California			- 17	118	276.193	0.427
Colorado	No	No	2	110	270.100	0.121
Connecticut	No	No	0	•	•	•
D.C.	No	No	2	•	•	•
Delaware	110	110	0	•	•	•
Florida	No	Yes	11	48	89.658	0.535
Georgia	110	100	6		30.500	0.459
Guam			0		00.000	0.400
Hawaii	No	No	0	-	•	•
Idaho	No	No	0	-	•	•
Illinois	No	No	8	78	77.405	1.008
Indiana	No	No	3	, ,	77.400	1.000
lowa	No	No	0	-	•	•
Kansas	140	110	0	-	•	•
Kentucky			5	38	22.656	1.677
Louisiana			4	30	22.000	1.077
Maine	No	No	0	-	•	•
Maryland	No	No	1	-	•	•
Massachusetts	No	No	6	15	56.359	0.266
Michigan	No	No	4		30.339	0.200
Minnesota	No	No	0	-	•	•
Mississippi	No	No	2	-	•	•
Missouri	No	No	7	51	22.842	2.233
Montana	No	No	0		22.042	2.233
Nebraska	No	No	0	-	•	•
Nevada	INO	NO	4	-	•	•
New Hampshire	No	No	0	•	•	•
-	No	No	9	6	51.916	0.116
New Jersey New Mexico	INO	NO	9	0	51.910	0.110
New York			1	-	•	•
North Carolina	No	No	1	-	•	•
	No No	No	3	-	•	•
North Dakota	No No	No No	0	•	•	•
Ohio Oklahama	No	No	3		•	•
Oklahoma	N.I.	N. 1 -	1		•	
Oregon	No	No	0		. 70 504	
Pennsylvania	N.I.	N. 1 -	16		76.534	0.614
Puerto Rico	No	No	0		•	
Rhode Island	No	No	0			

South Carolina	Yes	Yes	6	17	24.444	0.695
South Dakota	No	No	0			
Tennessee	Yes	Yes	8	24	55.139	0.435
Texas			23	96	87.590	1.096
Utah	No	No	1			
Vermont			0			
Virgin Islands			0			
Virginia	No	No	1			
Washington	No	No	1			
West Virginia	Yes	No	3			
Wisconsin	No	Yes	0			
Wyoming			0			<u>.</u>
All US			168	658	1,174.361	0.560

- 1. Includes data reported from all locations (i.e., adult critical care units and wards) within LTACHs.
- 2. Yes indicates the presence of a state mandate to report VAE data from any location to NHSN at the No indicates that a state mandate did not exist during 2021.
- 3. Yes indicates that the state health department reported the completion of all of the following validal assessment of missing or implausible values on at least six months of 2021 NHSN data prior to Ju Yes indicates that the state also conducted an audit of facility medical or laboratory records prior to varies by state). Information on validation efforts was requested from all states, regardless of the reporting of a given HAI to the state health department have performed validation on NHSN data.
- 4. The number of LTACHs that reported 2021 VAE data and are included in the SIR calculation. SIF from at least one location in 2021.
- 5. Percent of facilities with ≥1.0 predicted VAE that had an SIR significantly greater or less than the ≥ 1.0 predicted VAE in 2021.
- 6. Facility-specific key percentiles were only calculated if at least 20 facilities had ≥1.0 predicted VAI nor included in the distribution of facility-specific SIRs.

d infection ratios (SIRs) and facility-specific SIR summary measures, Acute Care Hospitals (LTACHs) reporting during 2021

sociated events (VAEs) in LTACHs, all locations¹

95% CI fo	or SIR		specific SIRs			
Lawan	Umman	No. of facs with at least 1 predicted			400/	250/
Lower	Upper 0.208	VAE 4			10%	25%
•	0.208	4	•	1	•	•
•]		
0.355	0.510	17	12%	41%		
•			•	•		-
•			•	1	•	
]		
0.399	0.704	10	10%	50%		
0.261	0.752	6				-
			•			
•			•	1	•	
0.802	1.251	8	•	1	•	
0.002	1.201]		
						-
1.204	2.278	5	•			
•			•	1	•	
•		•	•	1	•	
0.155	0.429	4]		
1.680	2.912	6	•	1	•	
•	•	•	•]		•
•]		
			•			
0.047	0.240	9	•			-
•			•			-
•			•	1	•	
·]		
				.].		
0.456	0.810	14	14%	7%	•	
•		•	•	1	•	
•	•1	•	•	-1	•	•

0.519	0.604	138	14%	23%	0.000	0.000
					-	-
				-		
		•				
	•					
	•		•	•		•
0.893	1.332	16	19%	13%		
			400/	400/		•
0.285	0.638	8	•	•		
0.110	1.001	· ·	·	•		-
0.419	1.091	6				

he beginning of 2021. M indicates midyear implementation of a mandate.

ation activities: state health department had access to 2021 NHSN data, state health department perform une 1, 2022, and state health department contacted identified facilities.

to June 1, 2022 to confirm proper case ascertainment (although intensity of auditing activities presence of a legislative mandate for the particular HAI type. Some states without mandatory that is voluntarily shared with them by facilities in their jurisdiction.

Rs and accompanying statistics are only calculated for states in which at least 5 LTACHs reported VAE day

nominal value of the 2021 national LTACH VAE SIR of 0.560. This is only calculated if at least 10 facilitie

Ξ in 2021. If a facility's predicted number of VAE was <1.0, a facility-specific SIR was neither calculated

	75%	90%
	-	
•	٠	•
•	•	
•	•	•
	-	
•	•	•
	-	
•		
		-
•		-
	-	-
		-

•	•	-
		-
•	•	•
•	•	-
	_	_
•	•	-
		-
•	•	•
		_
•	•	•
		_
0.400	0.750	2.250
0.162	0.759	2.250

ed an

ata

s had

Table 5. State-specific standardized infection rat NHSN Long-Term Acute Care Ho

Hospital-onset methicillin-resistant Staphy

				<u>Events</u>		95% CI
State			Observed	Predicted	SIR	Lower
Alabama	No	No 6	7	8.556	0.818	0.358
Alaska	Yes	No 0				
Arizona		1				
Arkansas		2				
California		22	80	74.304	1.077	0.859
Colorado	No	No4		•		
Connecticut	No	No 0				
D.C.	Yes	No 0				
Delaware		1				
Florida	No	Yes 11			1.002	0.651
Georgia		6		14.811	0.675	0.343
Guam	NI-	0		•	•	
Hawaii	No	No 1		•	•	
Idaho	No Yes	No 1 No 9	16	25.226	0.624	0.375
Illinois Indiana	Yes No		4	6.672	0.634 0.899	0.375
lowa	No	No 5 No 0		0.072	0.099	0.304
Kansas	NO	0		•	•	•
Kentucky		6		8.834	0.792	0.347
Louisiana		5		6.381	0.000	0.017
Maine	No	No 0				
Maryland	No	No 2				
Massachusetts	Yes	No 8		32.866	0.243	0.113
Michigan	No	No 4				
Minnesota	No	No 1	1.			
Mississippi	No	No 2				
Missouri	No	No 7	2	9.404	0.213	0.036
Montana	No	No 0				
Nebraska	No	No 2				
Nevada		5	1	5.576	0.179	0.009
New Hampshire	No	No 0				
New Jersey	No	No 6	9	14.283	0.630	0.307
New Mexico		1				
New York		1				
North Carolina	No	No3		•		
North Dakota	No	No 2		•		
Ohio	No	No 5		6.956	1.438	0.730
Oklahoma		2				
Oregon	Yes	No 1				
Pennsylvania		16	-	25.048	0.399	0.203
Puerto Rico	Yes	No 0			•	
Rhode Island	No	No 0				

All US			194	264	395.315	0.668	0.591
Wyoming			0				
Wisconsin	No	Yes	1				
West Virginia	Yes	No	2				
Washington	No	No	1				
Virginia	No	No	2				
Virgin Islands			0				
Vermont			0				
Utah	Yes	No	1				
Texas			25	30	39.807	0.754	0.518
Tennessee	Yes	Yes	8	14	19.841	0.706	0.402
South Dakota	No	No	0	•			
South Carolina	Yes	Yes	6	6	12.270	0.489	0.198

- 1. Includes data reported from all locations (i.e., adult and pediatric critical care units and wards) within LTACHs.
- 2. Yes indicates the presence of a state mandate to report MRSA bacteremia data from any location to NHSN at the No indicates that a state mandate did not exist during 2021.
- 3. Yes indicates that the state health department reported the completion of all of the following validation activities: assessment of missing or implausible values on at least six months of 2021 NHSN data prior to June 1, 2022, a Yes indicates that the state also conducted an audit of facility medical or laboratory records prior to June 1, 2022 varies by state). Information on validation efforts was requested from all states, regardless of the presence of a reporting of a given HAI to the state health department have performed validation on NHSN data that is voluntar
- 4. The number of LTACHs that reported 2021 MRSA bacteremia data and are included in the SIR calculation. SIF MRSA bacteremia data from at least one location in 2021.
- 5. Percent of facilities with ≥1.0 predicted MRSA bacteremia that had an SIR significantly greater or less than the r ≥ 1.0 predicted MRSA bacteremia in 2021.
- 6. Facility-specific key percentiles were only calculated if at least 20 facilities had ≥1.0 predicted MRSA bacteremia was neither calculated nor included in the distribution of facility-specific SIRs.

ios (SIRs) and facility-specific SIR summary measures, spitals (LTACHs) reporting during 2021

lococcus aureus (MRSA) bacteremia, facility-wide¹

<u>SIR</u>	Facility-						
Upper	No. of facs with at least 1 predicted MRSA			10%	25%		75%
1.618	5						
•		•		٠			
		•	•	٠	•	•	
1.333	21	38%	5%	0.019	0.257	0.908	1.993
		•				•	
-	•	•	1	•	•	•	
1.480	8	•]				
1.203							
		•					
1.008	8	•	1				
1.870		•	1	•	•	•	
1.070							
1.567		•					
0.469	1	•					
		•		٠	•		
0.462	6	•	1	•	•	•	
0.402	0	•	1	٠	•	•	
		•]				
0.703	5			•			
		•		•			
0.004		•		•		•	
0.884	2	•	1	•		•	
1.156	6]				
		•					
2.563	3	•	1	•	•	•	
	•	•	1	•	•	•	
0.712	12	0%	0%				
V., 12				•		•	

1.017	5						
1.156	7						
1.062	20	10%	0%	0.000	0.000	0.525	1.086
					-		
		•					
					•		•
					•		
0.752	142	11%	3%	0.000	0.000	0.395	1.055

ne beginning of 2021. M indicates midyear implementation of a mandate.

\u20e3s and accompanying statistics are only calculated for states in which at least 5 LTACHs reported

nominal value of the 2021 national LTACH MRSA SIR of 0.668. This is only calculated if at least 10 facilities hat in 2021. If a facility's predicted number of MRSA bacteremia was <1.0, a facility-specific SIR

state health department had access to 2021 NHSN data, state health department performed an nd state health department contacted identified facilities.

² to confirm proper case ascertainment (although intensity of auditing activities legislative mandate for the particular HAI type. Some states without mandatory ily shared with them by facilities in their jurisdiction.

90%

Table 6. State-specific standardized infection rat
NHSN Long-Term Acute Care Ho

Hospital-onset Clostridio

				No. of Events			95% CI
State				Observed	Predicted	SIR	Lower
Alabama	No	No	8	22	52.062	0.423	0.272
Alaska	Yes	No	1		-		
Arizona			6	39	61.737	0.632	0.455
Arkansas			8	21	51.500	0.408	0.259
California			22		486.381	0.547	0.484
Colorado	Yes	No	6	51	94.008	0.543	0.408
Connecticut	Yes	No	2		-		
D.C.	Yes	No	2		-		
Delaware			1				
Florida	No	Yes	27	140	415.071	0.337	0.285
Georgia			12		153.072	0.196	0.135
Guam			0				
Hawaii	No	No	1				
Idaho	No	No	2		-		
Illinois	Yes	No	9	58	169.023	0.343	0.263
Indiana	Yes	No	9	28	85.474	0.328	0.222
Iowa	No	No	2		-		
Kansas			3		-		
Kentucky			9	32	77.967	0.410	0.286
Louisiana			27	52	199.530	0.261	0.197
Maine	No	No	0		-		
Maryland	No	No	2		-		
Massachusetts	Yes	No	11	95	311.139	0.305	0.248
Michigan	No	No	17	55	149.525	0.368	0.280
Minnesota	No	No	2		-		
Mississippi	Yes	No	7	10	72.660	0.138	0.070
Missouri	No	No	10	19	91.152	0.208	0.129
Montana	No	No	1		-		
Nebraska	No	No	4		-		
Nevada			8	36	90.699	0.397	0.282
New Hampshire	No	No	0				
New Jersey	No	No	12	36	137.065	0.263	0.187
New Mexico			3				
New York							
North Carolina	Yes	No	2 8	35	92.210	0.380	0.269
North Dakota	No	No	2				
Ohio	No	No	25		251.913	0.353	0.285
Oklahoma			10		96.091	0.291	0.197
Oregon	Yes	No	1				
Pennsylvania			17	58	145.284	0.399	0.306
Puerto Rico	Yes	No	0				
Rhode Island	No	No	0		-		

All US			391	1,683	4,718.571	0.357	0.340
Wyoming			0				
Wisconsin	No	Yes	4				
West Virginia	Yes	No	5	32	34.630	0.924	0.643
Washington	No	No	1				
Virginia	Yes	No	6	18	84.856	0.212	0.130
Virgin Islands			0				
Vermont			0				
Utah	Yes	No	3				
Texas			58	213	573.332	0.372	0.324
Tennessee	Yes	Yes	8	25	90.551	0.276	0.183
South Dakota	No	No	1				
South Carolina	Yes	Yes	6	27	61.084	0.442	0.297

- 1. Includes data reported from all locations (i.e., adult and pediatric critical care units and wards) within LTACHs.
- 2. Yes indicates the presence of a state mandate to report CDI data from any location to NHSN at the beginning of No indicates that a state mandate did not exist during 2021.
- 3. Yes indicates that the state health department reported the completion of all of the following validation activities: assessment of missing or implausible values on at least six months of 2021 NHSN data prior to June 1, 2022, a Yes indicates that the state also conducted an audit of facility medical or laboratory records prior to June 1, 2022 varies by state). Information on validation efforts was requested from all states, regardless of the presence of a reporting of a given HAI to the state health department have performed validation on NHSN data that is voluntar
- 4. The number of LTACHs that reported 2021 CDI data and are included in the SIR calculation. SIRs and accomp from at least one location in 2021.
- 5. Percent of facilities with ≥1.0 predicted CDI that had an SIR significantly greater or less than the nominal value c ≥ 1.0 predicted CDI in 2021.
- 6. Facility-specific key percentiles were only calculated if at least 20 facilities had ≥1.0 predicted CDI in 2021. If a to nor included in the distribution of facility-specific SIRs.

ios (SIRs) and facility-specific SIR summary measures, spitals (LTACHs) reporting during 2021

ides difficile (CDI), facility-wide¹

for SIR	Facility	-specific SIRs					
Upper	No. of facs with at least 1 predicted CDI			10%	25%		75%
0.629	8			10 /0	25 /0		73/0
0.629	0	•	1	•	•	•	
0.855	6	•	1		•		
0.613		•	1	•	•	•	•
0.616		50%	18%	0.078	0.194	0.542	0.805
0.708		30 70	10 70	0.070	0.134	0.542	0.003
0.700	Ŭ	•	1	•	•	•	•
·		•]	•		•	
		·]				
0.397	27	7%	11%	0.056	0.154	0.293	0.510
0.276		8%	33%				
				•			
0.440	9						
0.467	9						
	•	•		•			
	•	•					
0.572							
0.339	27	15%	11%	0.000	0.000	0.142	0.293
	•	•	·	•		•	
0.372	10	40%	40%	•	•	•	
0.372		0%	0%		•		
0.473		0 70	0 70	•	•	٠	•
0.245	7	•	1	•	•	•	
0.319		0%	0%	•	•	•	•
]				
0.544	8						
0.360	12	0%	8%				
				•			
0.522	8	•					
	•	•					
0.433		8%	0%	0.000	0.094	0.282	0.470
0.416	10	0%	0%				
0.540				•	•	•	
0.512	17	12%	0%			•	
		•	•	•	•	•	•
	•	•		•	•	•	•

0.634	6			-			
0.402	8						
0.424	58	12%	9%	0.000	0.041	0.232	0.466
				•			
0.329	6						
1.289	5						
0.374	388	13%	9%	0.000	0.104	0.287	0.502

f 2021. M indicates midyear implementation of a mandate.

state health department had access to 2021 NHSN data, state health department performed an notated health department contacted identified facilities.

2 to confirm proper case ascertainment (although intensity of auditing activities

legislative mandate for the particular HAI type. Some states without mandatory ily shared with them by facilities in their jurisdiction.

anying statistics are only calculated for states in which at least 5 LTACHs reported CDI data

of the 2021 national LTACH CDI SIR of 0.357. This is only calculated if at least 10 facilities had

facility's predicted number of CDI was <1.0, a facility-specific SIR was neither calculated

90%

1.080

0.748

0.917

0.656

0.850

Table 7. Changes in national standardized infection ratios (SIRs) using HAI data reported from all NHSN Long-Term

Central line-associated bloodstream infections (CLABSIs), catheter-associated urinary tra

methicillin-resistant Staphylococcus aureus (MRSA) bacteremia and Clostridic

HAI and Patient Population	2020 SIR	2021 SIR	Percent Change	Direction of Change, Based on Statistical Significance	p-value
CLABSI, all locations ¹	0.707	0.743	5%	No change	0.1714
CAUTI, all locations¹	0.738	0.749	1%	No change	0.6550
VAE, all locations	0.548	0.560	2%	No change	0.7017
Hospital-onset MRSA bacteremia, facility-wide ²	0.844	0.668	21%	Decrease	0.0046
Hospital-onset <i>C. difficile</i> infections, facility-wide ²	0.398	0.357	10%	Decrease	0.0011

^{*} Statistically significant, p < 0.0500

^{1.} Data from all ICUs and wards.

^{2.} Hospital-onset is defined as an event detected on the 4th day (or later) after admission to an inpatient location within the facility.

Acute Care Hospitals (LTACHs) reporting during 2021 by HAI and patient population: ct infections (CAUTIs), ventilator-associated events (VAEs), pides difficile infections, 2020 compared to 2021

Table 8. Changes in state-specific standardized infection ratios (SIRs) between 2020 and 2021 from NHSN Long-Term Acute Care Hospitals

8a. Central line-associated bloodstream infections (CLABSI), all locations¹

	All Long-Term Acute Care Hospitals Reporting to NHSN					
State ²	2020 SIR	2021 SIR	Percent Change ³	Direction of Change, Based on Statistical Significance	p-value	
Alabama	0.361	0.576	60%	No change	0.2818	
Alaska		0.0.0		. to snange	0.20.0	
Arizona	0.521	0.208	60%	No change	0.0676	
Arkansas	1.015	0.558	45%	No change	0.1011	
California	0.926	1.265	37%	Increase	0.0002	
Colorado	0.630	0.251	60%	Decrease	0.0431	
Connecticut						
D.C.						
Delaware						
Florida	0.391	0.597	53%	Increase	0.0054	
Georgia	0.559	0.627	12%	No change	0.5984	
Guam						
Hawaii						
Idaho						
Illinois	1.016	0.995	2%	No change	0.8952	
Indiana	0.865	0.483	44%	Decrease	0.0139	
lowa						
Kansas						
Kentucky	0.951	0.506	47%	Decrease	0.0259	
Louisiana	0.827	0.615	26%	No change	0.1036	
Maine						
Maryland						
Massachusetts	0.864	1.158	34%	No change	0.1051	
Michigan	1.133	1.237	9%	No change	0.6278	
Minnesota						
Mississippi	0.820	1.626	98%	Increase	0.0071	
Missouri	0.883	0.827	6%	No change	0.7871	
Montana						
Nebraska					-	
Nevada	0.428	0.247	42%	No change	0.1059	
New Hampshire		-				
New Jersey	0.721	0.866	20%	No change	0.4028	
New Mexico		-				
New York						
North Carolina	0.576	0.393	32%	No change	0.2078	
North Dakota				No. decem		
Ohio	0.414	0.365	12%	No change	0.5503	
Oklahoma	0.409	0.267	35%	No change	0.2045	
Oregon			0.40/	Na ahanna	. 0.0454	
Pennsylvania	0.750	0.571	24%	No change	0.2151	
Puerto Rico		•		•		
Rhode Island		0.005	220/	Na alaanaa	0.4004	
South Carolina	1.198	0.805	33%	No change	0.1264	
South Dakota	0.500		000/	Increase	0.0206	
Tennessee Texas	0.528	0.992 0.623	88% 6%	No change	0.0306 0.5503	
l exas Utah	0.589	0.023	6%	No change	0.5503	
Vermont	,	•		•	•	
Vermont Virgin Islands			•	•		
Virginia	0.834	1.018	22%	No change	0.4737	
Washington	0.034	1.010	2270	No change	0.4737	
West Virginia	0.713	1.625	128%	Increase	0.0122	
Wisconsin	0.713	1.023	12070	morease	0.0122	
Wyoming		1		•		
All US	0.707	0.743	5%	No change	0.1714	
<u> </u>	1 0.707	0.743	J /0	No change	0.1714	

^{*} Statistically significant, p < 0.0500

^{1.} Data from all ICUs, wards (and other non-critical care locations).

^{2.} States without SIR either in 2020 and/or 2021 and therefore subsequent data not calculated

^{3.}For states with >>100% value in the percent change field, the p-value cannot be estimated due to sparse data reported within the facility type. The p-value is indicated as inestimable when the numerator and/or denominator of percent change = 0.

Table 8. Changes in state-specific standardized infection ratios (SIRs) between 2020 and 2021 from NHSN Long-Term Acute Care Hospitals

8b. Catheter-associated urinary tract infections (CAUTI), all locations¹

	All Long-Term Acute Care Hospitals Reporting to NHSN				
	2020 SIR	2021 SIR		Direction of Change, Based on Statistical Significance	p-value
Alabama	0.285	0.613	115%	Increase	0.0371
Alaska	0.200	0.010	11070	morease	0.007 1
Arizona	0.625	0.709	13%	No change	0.7020
Arkansas	0.743	0.551	26%	No change	0.3370
California	0.571	0.865	51%	Increase	<0.0071
Colorado	1.117	1.200	7%	No change	0.6955
Connecticut	1.117	1.200	1 70	140 onange	0.0000
D.C.	•	·		•	1
Delaware	•	·		•	1
Florida	0.521	0.565	8%	No change	0.5386
Georgia	1.271	0.999	21%	No change	0.0906
Guam	1.271	0.555	2170	140 change	0.0900
Hawaii	•	·		•	1
Idaho	•	·		•	1
Illinois	0.684	0.826	21%	No change	0.2707
Indiana	0.646	0.782	21%	No change	0.4127
lowa	0.040	0.702	2170	No change	0.4127
Kansas	•	•			1
Kentucky	1.359	1.061	22%	No change	0.2317
Louisiana	0.657	0.484	26%	No change	0.0819
Maine	0.037	0.404	2070	No change	0.0019
Maryland	•	•			1
Massachusetts	1.258	1.334	6%	No change	0.6966
Michigan	1.191	0.939	21%	No change	0.1404
Minnesota	1.191	0.939	2170	No change	0.1404
Mississippi	0.767	0.908	18%	No change	0.5073
Missouri	0.564	0.893	58%	No change	0.0565
Montana	0.504	0.093	30 /0	No change	0.0303
Nebraska	•	•		•	1
Nevada	0.745	0.906	22%	No change	0.3565
New Hampshire	0.743	0.900	22 /0	No change	0.5505
New Jersey	0.636	0.530	17%	No change	0.4252
New Mexico	0.030	0.550	17 70	No change	0.4232
New York	•	·		•	1
North Carolina	0.306	0.444	45%	No change	0.2500
North Dakota	0.500	0.444	4370	140 change	0.2300
Ohio	0.899	0.797	11%	No change	0.3873
Oklahoma	0.686	0.457	33%	No change	0.0854
Oregon	0.000	0.437	3370	140 change	0.0054
Pennsylvania	0.848	0.777	8%	No change	0.6391
Puerto Rico	0.040	0.777	070	No change	0.0391
Rhode Island	•	•			1
South Carolina	1.173	1.393	19%	No change	0.4591
South Dakota	1.173	1.595	1970	No change	0.4391
Tennessee	0.702	0.529	25%	No change	0.2805
Texas	0.577	0.529	7%	No change	0.2603
1	0.577	0.556	1 70	No change	0.4073
Utah Vermont	•	•		•	1
Virgin Islands	•	-		•	1
1 ° 1	. 0.740	0.004	. 00/	No change	0.7600
Virginia Washington	0.743	0.801	8%	ivo change	0.7636
Washington				N	0.0070
West Virginia	0.931	0.690	26%	No change	0.2970
Wisconsin				•	-
Wyoming			. 401	NII	
All US	0.738	0.749	1%	No change	0.6550

^{*} Statistically significant, p < 0.0500

^{1.} Data from all ICUs and wards (and other non-critical care locations).

^{2.} States without SIR either in 2020 and/or 2021 and therefore subsequent data not calculated

^{3.}For states with >>100% value in the percent change field, the p-value cannot be estimated due to sparse data reported within the facility type. The p-value is indicated as inestimable when the numerator and/or denominator of percent change = 0.

Table 8. Changes in state-specific standardized infection ratios (SIRs) between 2020 and 2021 from NHSN Long-Term Acute Care Hospitals

8c. Ventilator-associated events (VAE), all locations¹

	Al	I Long-Term A	cute Care Hos	pitals Reporting to NHS	N
	2020 SIR	2021 SIR		Direction of Change, Based on Statistical Significance	p-value
Alabama	0.000	0.000	0%	<u>-</u>	Inestimable
Alaska					
Arizona					
Arkansas					
California	0.384	0.427	11%	No change	0.4474
Colorado					
Connecticut		-			
D.C.		-			
Delaware		-			
Florida	0.547	0.535	2%	No change	0.9169
Georgia	0.640	0.459	28%	No change	0.3413
Guam					
Hawaii					
Idaho					
Illinois	0.626	1.008	61%	Increase	0.0072
Indiana					
Iowa					
Kansas					
Kentucky	1.798	1.677	7%	No change	0.7581
Louisiana					
Maine					
Maryland					
Massachusetts	0.000	0.266	>>100%		Inestimable
Michigan	0.537				
Minnesota			_		
Mississippi					
Missouri	1.631	2.233	37%	No change	0.2037
Montana					
Nebraska					
Nevada					
New Hampshire					
New Jersey	0.167	0.116	31%	No change	0.4796
New Mexico				9-	
New York					
North Carolina]			
North Dakota					
Ohio	0.450	Ī		•	
Oklahoma	0.000	•	•	•	•
Oregon	0.000	·	•	•	•
Pennsylvania	0.648	0.614	5%	No change	0.7932
Puerto Rico	0.040	0.014	370	140 change	0.7332
Rhode Island	·	•		•	
South Carolina	1.432	0.695	51%	Decrease	0.0090
South Dakota	1.432	0.093	5170	Decidase	0.0090
Tennessee	0.555	0.435	22%	No change	0.3859
Texas	0.515	1.096	113%	Increase	<0.0001
Utah	0.515	1.090	11370	morease	\0.0001
Vermont		1		•	-
Virgin Islands		•	•	•	•
_	,	•	•	•	•
Virginia Washington	,	•	•	•	•
Washington West Virginia				•	
-				•	
Wisconsin		-		•	
Wyoming	0.540			Na alaan na	
All US	0.548	0.560	2%	No change	0.7017

^{*} Statistically significant, p < 0.0500

The p-value is indicated as inestimable when the numerator and/or denominator of percent change = 0.

^{1.} Data from all ICUs and wards (and other non-critical care locations).

^{2.} States without SIR either in 2020 and/or 2021 and therefore subsequent data not calculated

 $^{3.} For states with >> 100\% \ value \ in \ the \ percent \ change \ field, \ the \ p-value \ cannot \ be \ estimated \ due \ to \ sparse \ data \ reported \ within \ the \ facility \ type.$

Table 8. Changes in state-specific standardized infection ratios (SIRs) between 2020 and 2021 from NHSN Long-Term Acute Care Hospitals

8d. Hospital-onset methicillin-resistant Staphylococcus aureus (MRSA) bacteremia, facility-wide¹

- Carrio opinario in Carrio	All Long-Term Acute Care Hospitals Reporting to NHSN					
				Direction of Change, Based on Statistical		
Alabama	2020 SIR 2.284	2021 SIR 0.818	64%	Significance Decrease	p-value 0.0138	
Alaska	2.204	0.010	04 /0	Deciease	0.0130	
Arizona		-	•		·	
Arkansas		-				
California	0.975	1.077	10%	No change	0.5481	
Colorado	0.570	1.077	1070	140 onlange	0.0401	
Connecticut		•	•	•	•	
D.C.		•	•	•	·	
Delaware			•	,		
Florida	1.582	1.002	37%	No change	0.0794	
Georgia	0.153	0.675	341%	Increase	0.0378	
Guam						
Hawaii						
Idaho						
Illinois	0.848	0.634	25%	No change	0.3697	
Indiana	0.382	0.899	135%	No change	0.2364	
Iowa						
Kansas						
Kentucky	1.515	0.792	48%	No change	0.1763	
Louisiana		0.000		ŭ		
Maine						
Maryland						
Massachusetts	0.307	0.243	21%	No change	0.6351	
Michigan	0.206					
Minnesota						
Mississippi						
Missouri	1.088	0.213	80%	Decrease	0.0203	
Montana						
Nebraska						
Nevada	0.122	0.179	47%	No change	0.8094	
New Hampshire						
New Jersey	0.851	0.63	26%	No change	0.4980	
New Mexico						
New York						
North Carolina						
North Dakota						
Ohio	1.192	1.438	21%	No change	0.6902	
Oklahoma	0.000	-				
Oregon		-				
Pennsylvania	0.680	0.399	41%	No change	0.1890	
Puerto Rico						
Rhode Island		-				
South Carolina	1.313	0.489	63%	Decrease	0.0421	
South Dakota		-				
Tennessee	1.508	0.706	53%	Decrease	0.0173	
Texas	0.575	0.754	31%	No change	0.3214	
Utah		.]				
Vermont		.]				
Virgin Islands	• _	.]				
Virginia		.]				
Washington						
West Virginia		.]				
Wisconsin		.]				
Wyoming						
All US	0.844	0.668	21%	Decrease	0.0046	

^{*} Statistically significant, p < 0.0500

^{1.} Hospital-onset is defined as event detected on the 4th day (or later) after admission to an inpatient location within the facility.

^{2.} States without SIR either in 2020 and/or 2021 and therefore subsequent data not calculated

^{3.}For states with >>100% value in the percent change field, the p-value cannot be estimated due to sparse data reported within the facility type. The p-value is indicated as inestimable when the numerator and/or denominator of percent change = 0.

Table 8. Changes in state-specific standardized infection ratios (SIRs) between 2020 and 2021 from NHSN Long Term Acute Care Hospitals
8e. Hospital-onset *Clostridioides difficile* infection (CDI), facility-wide¹

Alabama Alaska	2020 SIR 0.353	2024 217		Direction of Change,	
				Based on Statistical	_
l I	0.353	2021 SIR	200/	Significance	p-value
Alaska		0.423	20%	No change	0.5595
Arizona	0.385	0.632	64%	No change	0.0616
Arkansas	0.399	0.032	2%	No change	0.9449
California	0.475	0.547	15%	No change	0.1067
Colorado	0.456	0.543	19%	No change	0.4195
Connecticut		0.0.0		. To onango	
D.C.					
Delaware	•	-			-
Florida	0.439	0.337	23%	Decrease	0.0191
Georgia	0.156	0.196	26%	No change	0.4145
Guam	000	0.100	2070	. to onango	0
Hawaii	•		•	•	•
Idaho	·		·	·	
Illinois	0.267	0.343	28%	No change	0.1969
Indiana	0.498	0.328	34%	No change	0.0806
lowa	0.400	0.020	O-7 70	140 onange	0.0000
Kansas	•	1	•	•	-
Kentucky	0.607	0.410	32%	No change	0.0820
Louisiana	0.263	0.261	1%	No change	0.9636
Maine	0.200	0.201	170	140 Ghange	0.5000
Maryland	•	-	•	•	•
Massachusetts	0.267	0.305	14%	No change	0.3768
Michigan	0.452	0.368	19%	No change	0.2673
Minnesota	0.402	0.000	1370	140 onlinge	0.2010
Mississippi	0.173	0.138	20%	No change	0.5977
Missouri	0.342	0.130	39%	No change	0.0863
Montana	0.542	0.200	3970	140 change	0.0003
Nebraska	•	-	•	•	•
Nevada	0.353	0.397	12%	No change	0.6349
New Hampshire	0.555	0.597	12 /0	No change	0.0349
New Jersey	0.454	0.263	42%	Decrease	0.0072
New Mexico	0.434	0.203	42 /0	Decrease	0.0072
New York	•	-	•	•	•
North Carolina	0.458	0.380	17%	No change	0.4136
North Dakota	0.430	0.360	17 70	No change	0.4130
Ohio	0.511	0.353	31%	Decrease	0.0074
I -	0.395	0.333	26%	No change	0.0074
Oklahoma	0.595	0.291	20 /0	No change	0.2300
Oregon Pennsylvania	0.485	0.399	18%	No change	0.2758
	0.465	0.399	1070	No change	0.2756
Puerto Rico	•	•	•	•	•
Rhode Island South Carolina	0.460	0.442		No choses	೧ 0677
I	0.462	0.442	4%	No change	0.8677
South Dakota	0.205	. 0.770	400/	No change	. 0.7405
Tennessee	0.305	0.276	10%	•	0.7185
Texas	0.442	0.372	16%	No change	0.0641
Utah	•	.	•	•	
Vermont	•	.	•	•	
Virgin Islands				D	
Virginia Washington	0.468	0.212	55%	Decrease	0.0069
West Virginia	0.962	0.924	4%	No change	0.8731
	0.902	0.924	4 70	ino change	0.0731
Wisconsin	•	.	•	•	
Wyoming All US	0.398	0.357	10%	Decrease	0.0011

^{*} Statistically significant, p < 0.0500

^{1.} Hospital-onset is defined as event detected on the 4th day (or later) after admission to an inpatient location within the facility.

^{2.} States without SIR either in 2020 and/or 2021 and therefore subsequent data not calculated

^{3.} For states with >>100% value in the percent change field, the p-value cannot be estimated due to sparse data reported within the facility type. The p-value is indicated as inestimable when the numerator and/or denominator of percent change = 0.

Appendix A. Factors used in NHSN risk adjustment of the device-associated HAIs (CLABSI, CAUTI, VAE) negative binomial regression models¹ from Long-Term Acute Care Hospitals

HAI Type	Validated Parameters for Risk Model
CLABSI	Intercept Location Type Facility Bed Size* Average Length of Stay**
CAUTI	Intercept Average Length of Stay** Setting [†] Location Type
VAE	Intercept Facility bed size* Proportion of admissions on hemodialysis*** Location Type Average Length of Stay**

^{1.} SIR Guide: https://www.cdc.gov/nhsn/pdfs/ps-analysis-resources/nhsn-sir-guide.pdf

^{*} Facility bed size is taken from the Annual LTACH Survey.

^{**} Average length of stay is taken from the Annual LTACH Survey. It is calculated as: total # of annual patient da

^{***} Proportion of annual admissions on a ventilator (or hemodialysis) is taken from the Annual LTACH Survey. It is calculated as: number of admissions on a ventilator (or hemodialysis) / total # of annual admissions. † LTACH Setting (free-standing vs. within a hospital) is taken from the Annual LTACH Survey.



Appendix B. Factors used in NHSN risk adjustment of the MRSA Bacteremia and *C. difficile* negative binomial regression models¹ from Long-Term Acute Care Hospitals

HAI Type	Validated Parameters for Risk Model
MRSA bacteremia	Intercept, Percent of admissions on ventilator*
C. difficile infections	Intercept, Inpatient CO prevalence rate** Percent of admissions on ventilator* CDI test type^ Percent of single occupancy rooms [‡]

^{*} Percent of annual admissions on a ventilator is taken from the Annual LTACH Survey. It is calculate ventilator / total # annual admissions) x 100

^{**} Inpatient community-onset prevalence is calculated as: (# of inpatient community-onset CDI events The prevalence rate for each quarter is used in the risk adjustment.

[^] CDI test type is reported on the FacWideIN MDRO denominator form on the 3rd month of each quart

[‡] Percent of beds located in single occupancy rooms is taken from the Annual LTACH Survey. It is ca rooms / total number of beds x 100.

ed as: (# admissions on a

/ total # admissions) x 100.

ter.

alculated as: # of single occupancy

Additional Resources

SIR Guide: https://www.cdc.gov/nhsn/pdfs/ps-analysis-resources/nhsn-sir-guide.pdf

Technical Appendix (2021 Report): http://www.cdc.gov/hai/progress-report/index.html Explains the methodology used to produce the HAI Report.

HAI Data Report Home Page: http://www.cdc.gov/hai/progress-report/index.html
The complete HAI Report, including the Executive Summary and previous reports, can be found at the above

website.