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State of Michigan
2015 Q1 Aggregate TAP Report

Michigan Department of Health and Human Services
Surveillance for Healthcare-Associated and Resistant Pathogens (SHARP) Unit



The Michigan Department of Health and Human Services (MDHHS) Surveillance for Healthcare-Associated and Resistant Pathogens (SHARP) Unit began including the new targeted assessment for prevention (TAP) reports in the 2014 annual statewide aggregate report. Beginning with this 2015 Quarter 1 report, individual TAP reports will be provided quarterly.

This report shows modules and locations where the State of Michigan either needs to focus additional prevention efforts or is excelling in infection prevention. The table presents a cumulative attributable difference (CAD) determined using the HHS target standardized infection ratios (SIRs) for each module. Numbers in red show how many infections the state needs to prevent quarterly in order to reach the HHS target SIR. Numbers in green show the number of infections prevented beyond what was expected for the state according to the HHS target SIR. Corresponding SIRs for each module and location type are provided as well.

2015 Q1 Targeted Assessment for Prevention Report					
NHSN Module	Location	SIR ¹	Significant (Y/N) ²	CAD ³	Prevented or Need to Prevent
CAUTI	All	0.6	Y	-52.7	Prevented
	ICU	0.6	----	-24.4	Prevented
	Ward	0.6	----	-28.3	Prevented
CLABSI	All	0.5	Y	-6.8	Prevented
	ICU	0.5	----	-7	Prevented
	Ward	0.5	----	4.4	Need to Prevent
	NICU	0.3	----	-4.2	Prevented
CDI	Facility-wide	0.89	Y	179.7	Need to Prevent
MRSA Bac	Facility-wide	0.92	N	14.1	Need to Prevent
SSI COLO	----	0.97		17.6	Need to Prevent
SSI HYST	----	0.86	N	2.5	Need to Prevent

¹SIR: Standardized Infection Ratio: Ratio of observed events compared to the number of predicted events, accounting for unit type or other variables. An SIR of 1 can be interpreted as having the same number of events as predicted. An SIR that is between 0 and 1 represents fewer events than predicted, while an SIR of greater than 1 represents more events than predicted.

²Significant (Y/N). A Y indicates that, based on the p-value and 95% Confidence Interval (CI), the SIR is statistically significantly different than 1. An N indicates that, based on the p-value and 95% CI, the SIR is not statistically significantly different than 1 (expected). Significance testing was only performed on overall SIRs, not location-specific.

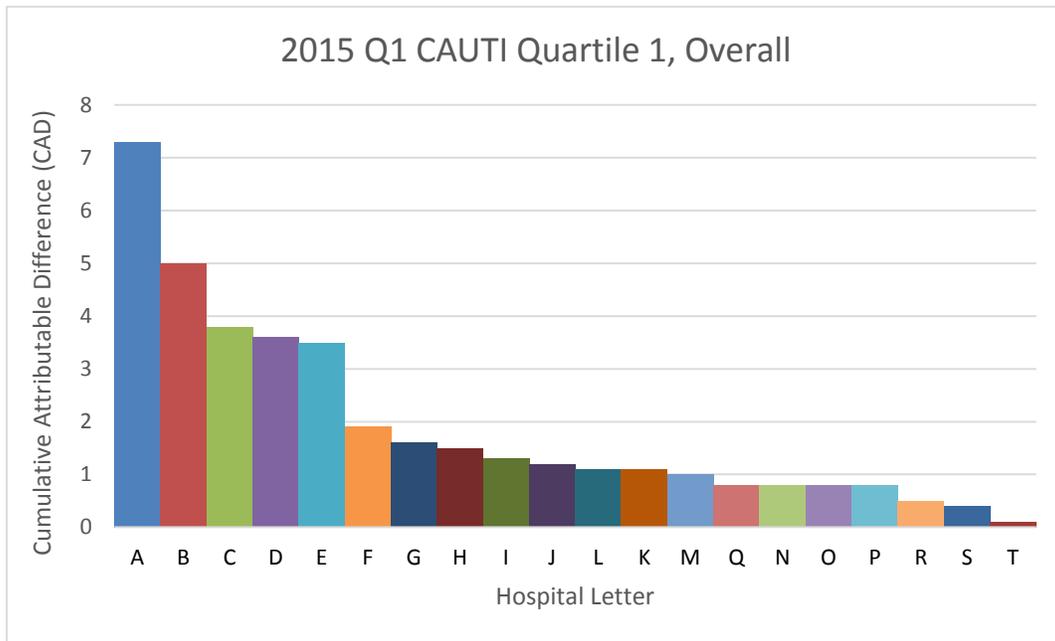
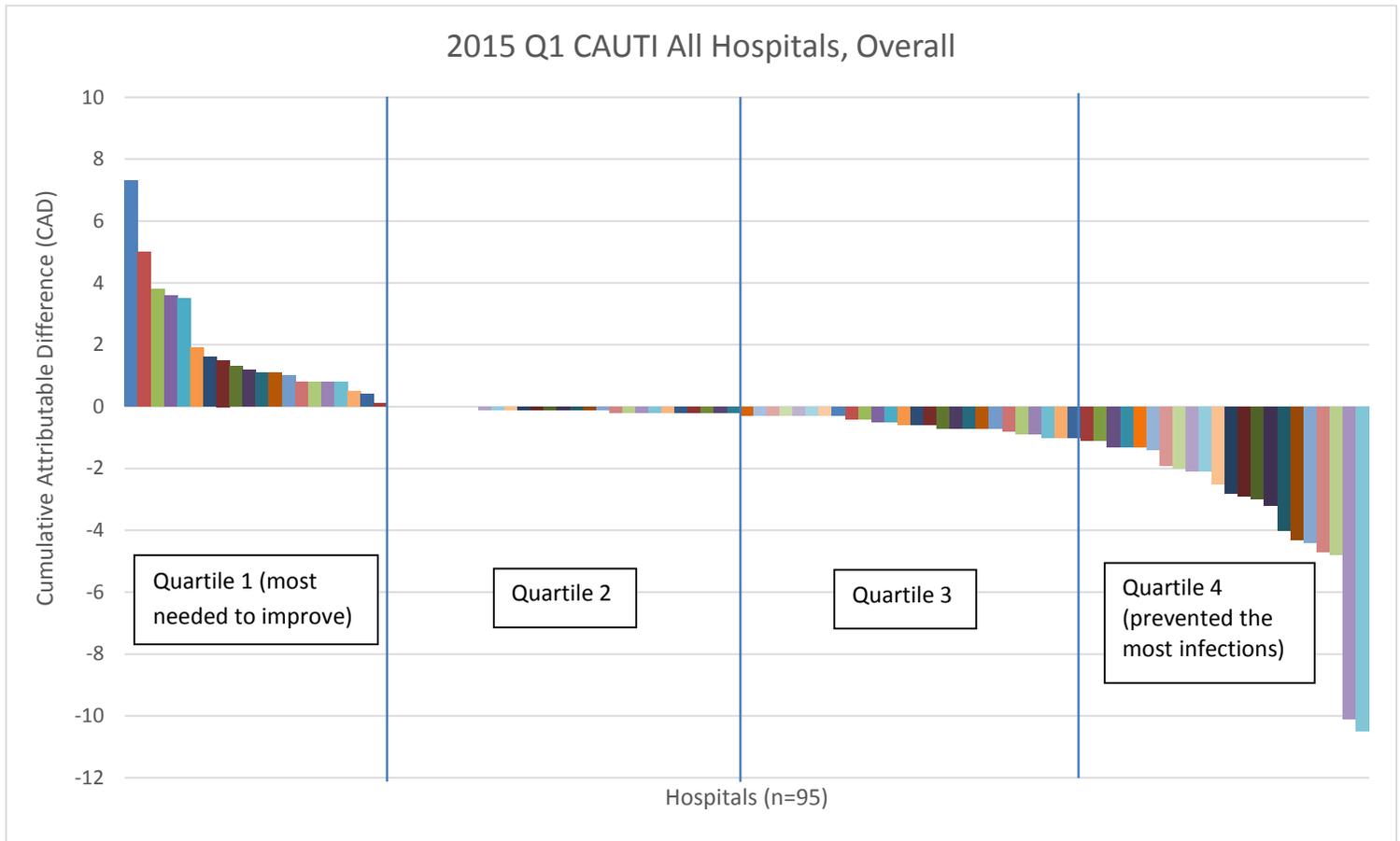
³CAD=Cumulative Attributable Difference. The number of infections that your hospital either needs to prevent to meet the HHS target or has prevented beyond the HHS target.

HHS CAUTI Target SIR = 0.75, HHS CLABSI Target SIR = 0.5, HHS CDI Target SIR = 0.7, HHS MRSA bacteremia Target SIR = 0.75, HHS SSI Target SIR = 0.75

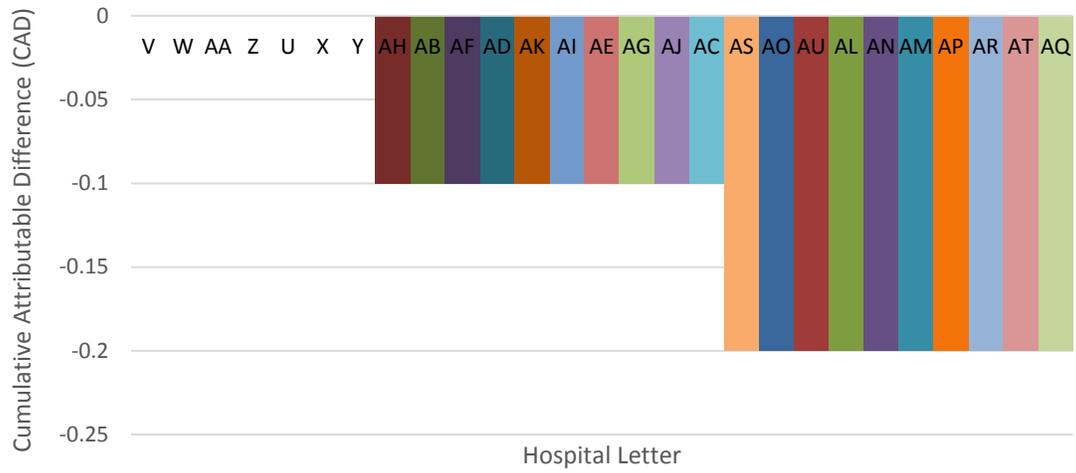
Bar graphs containing CAD values from all letter-coded SHARP-participating hospitals by module and location are available below. These graphs allow each facility to view their rank within each module and location compared to all other SHARP-participating facilities. Note: facilities in which an SIR could not be calculated with a CAD of 0 were excluded from the bar graphs. Each participating facility will receive an individual, password-protected TAP report containing their letter. Aggregate reports are also available for each emergency preparedness region below.

Please contact Allie Murad at murada@michigan.gov with questions, comments, or suggestions. All aggregate reports are posted at www.michigan.gov/hai.

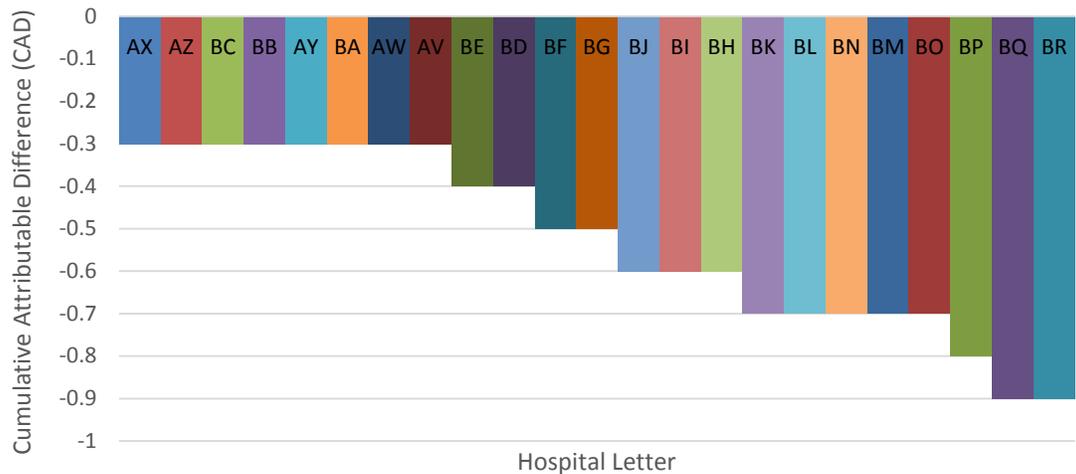
Bar Graphs



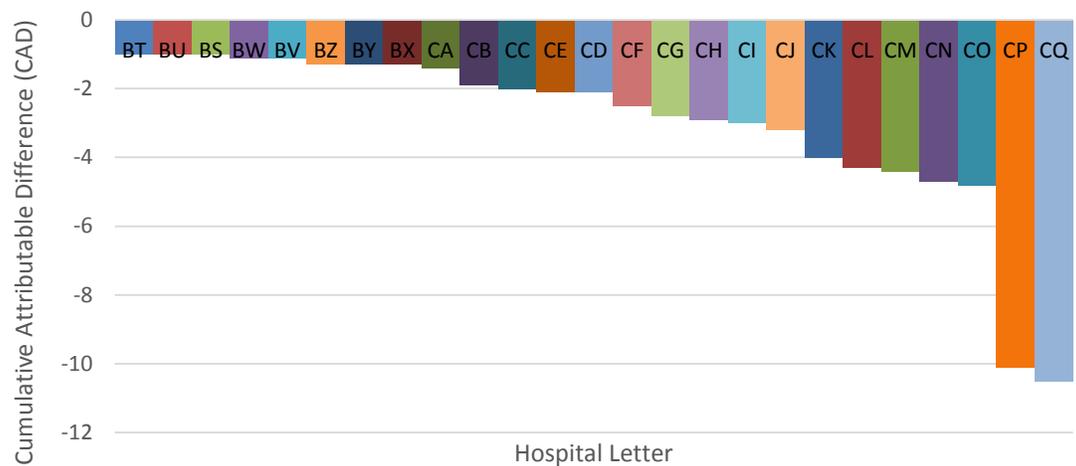
2015 Q1 CAUTI Quartile 2, Overall



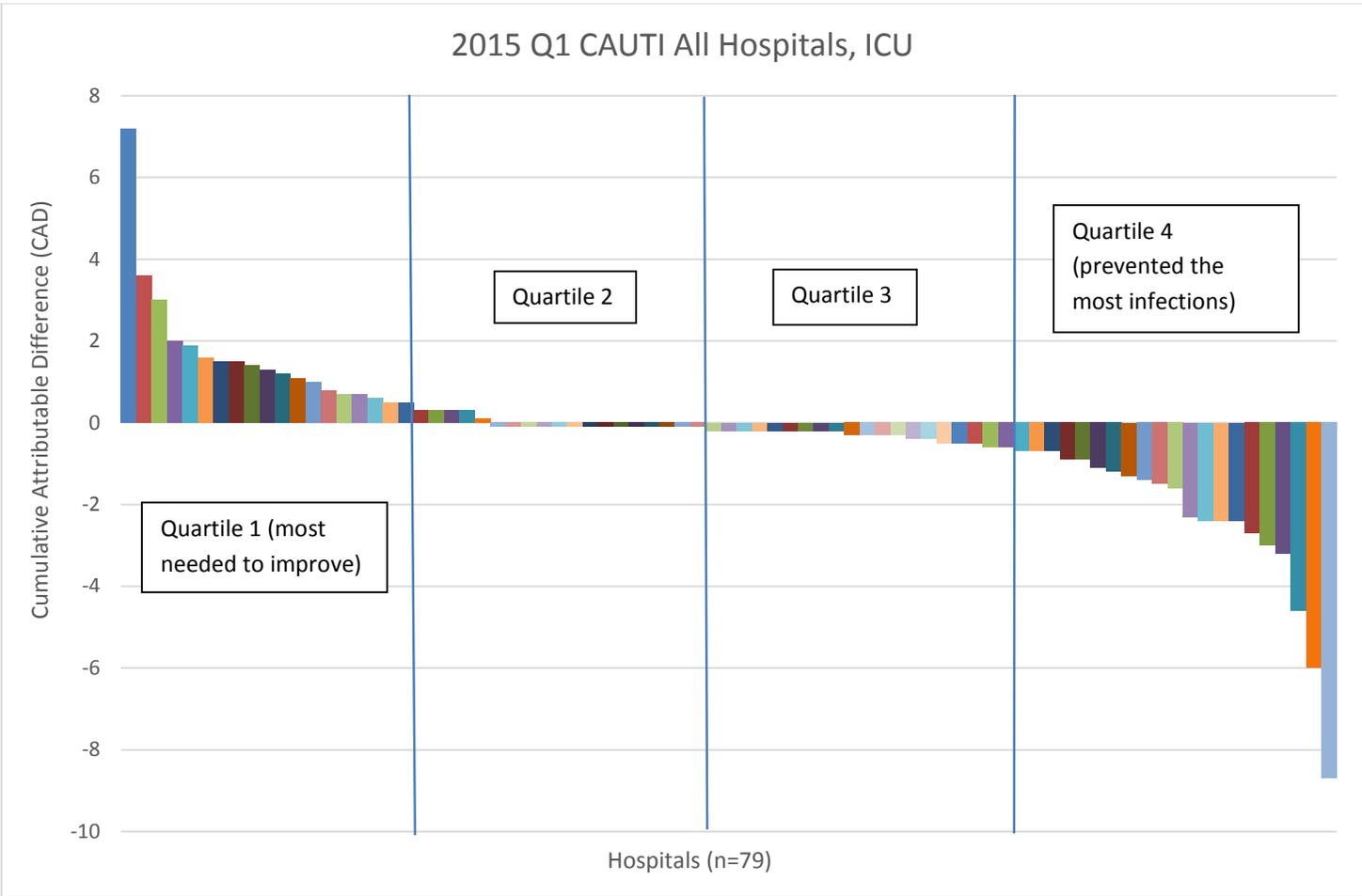
2015 Q1 CAUTI Quartile 3, Overall



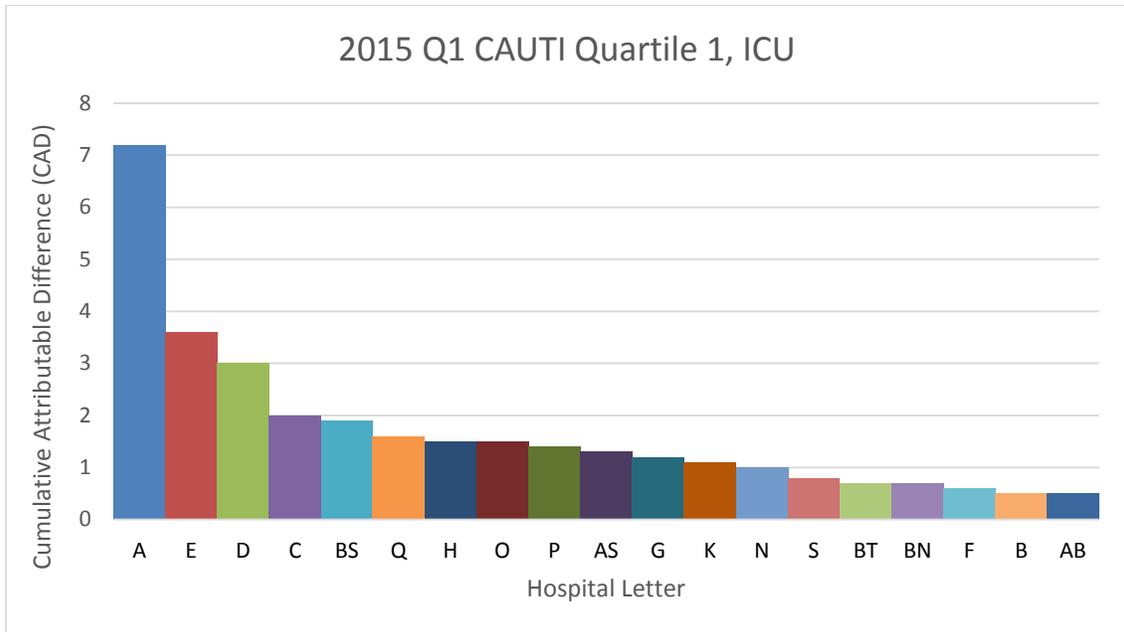
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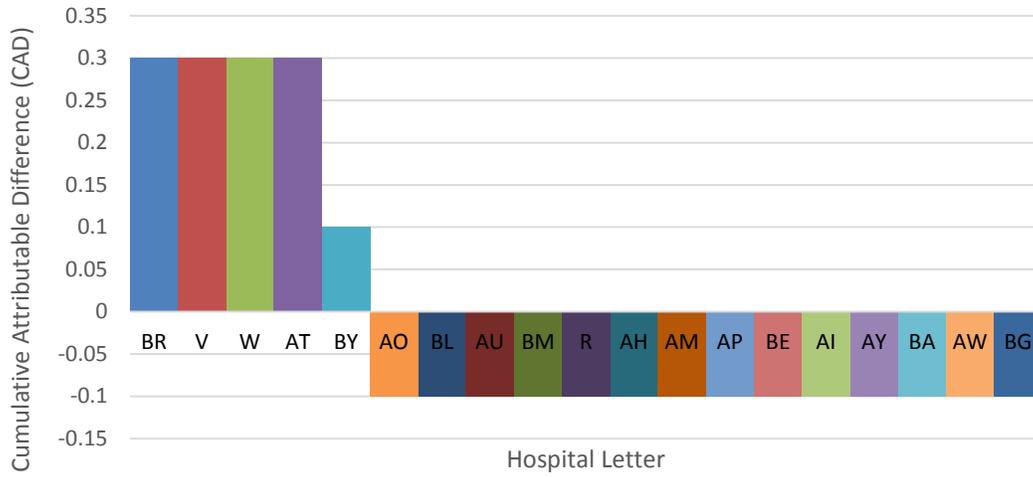
2015 Q1 CAUTI All Hospitals, ICU



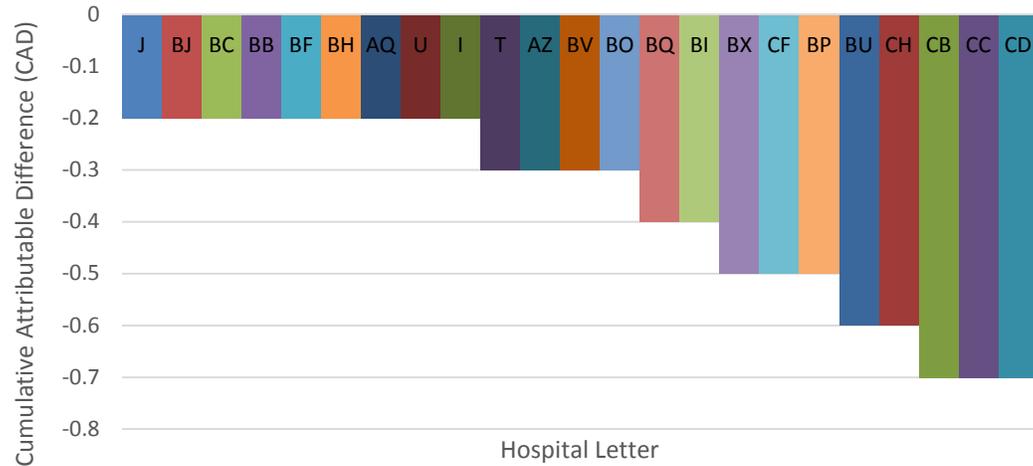
2015 Q1 CAUTI Quartile 1, ICU



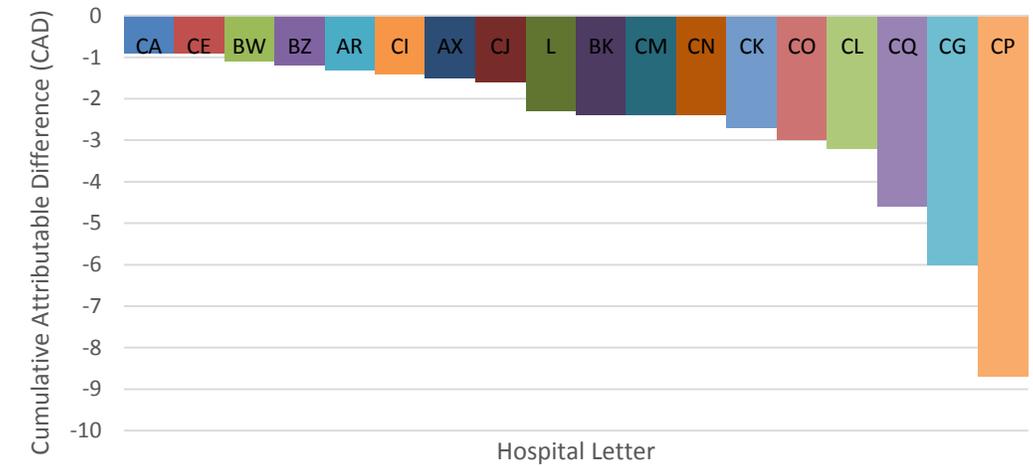
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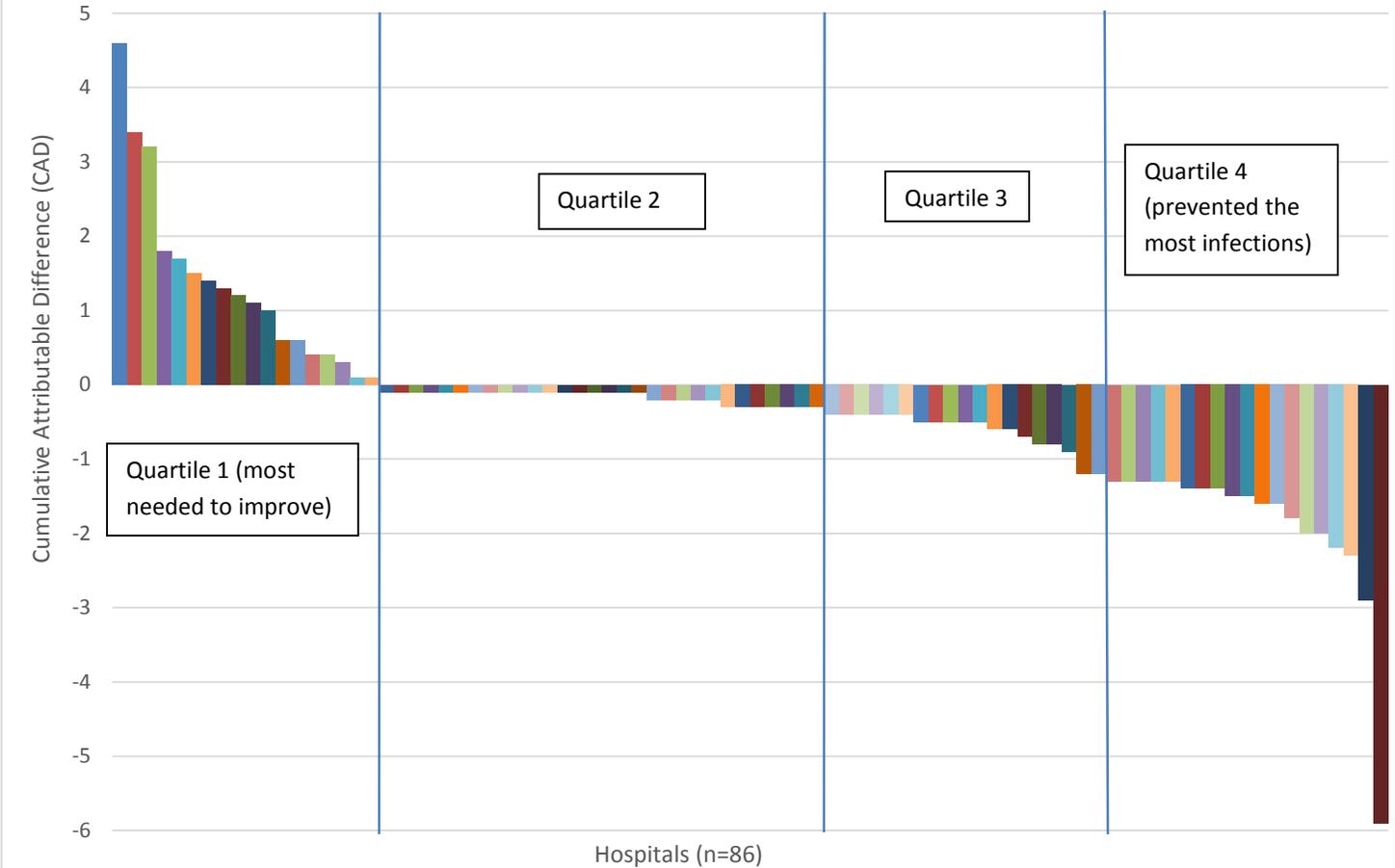
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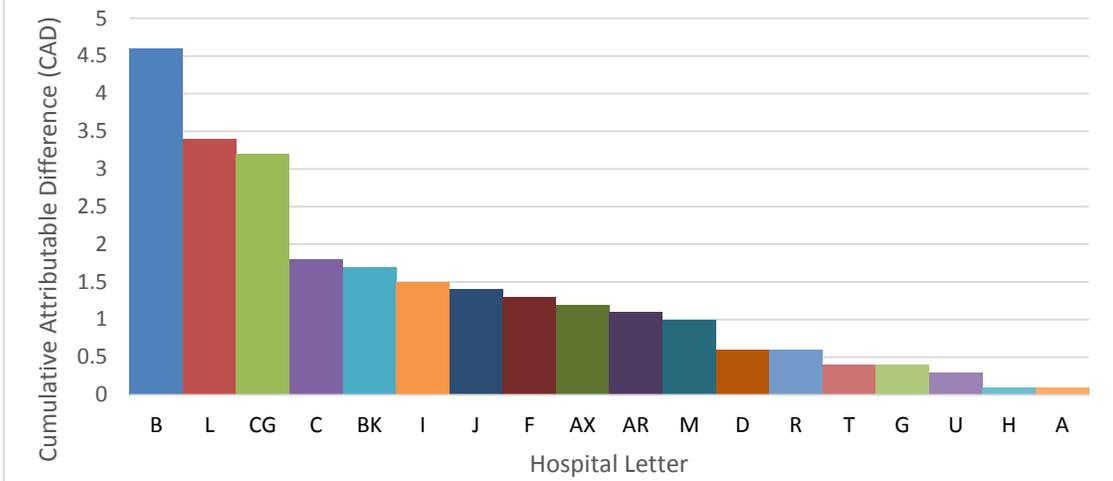
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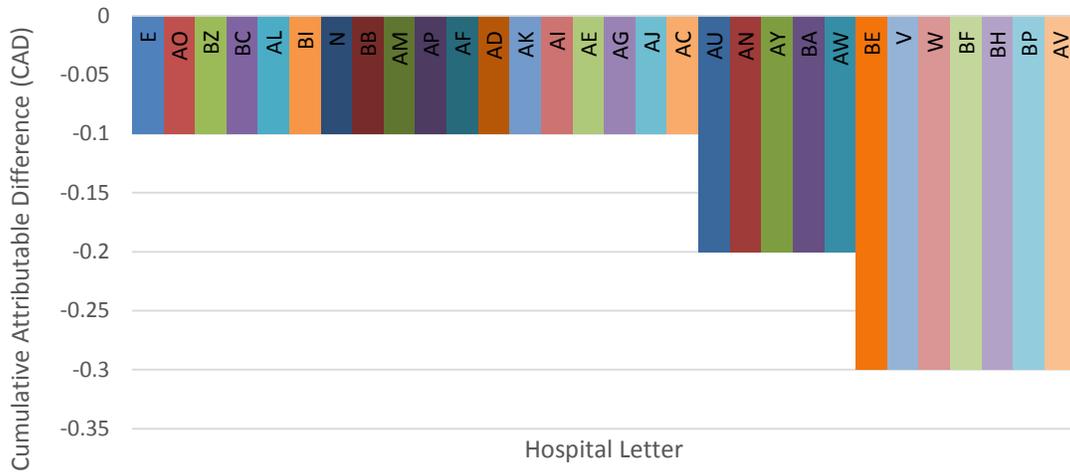
2015 Q1 CAUTI All Hospitals, Ward



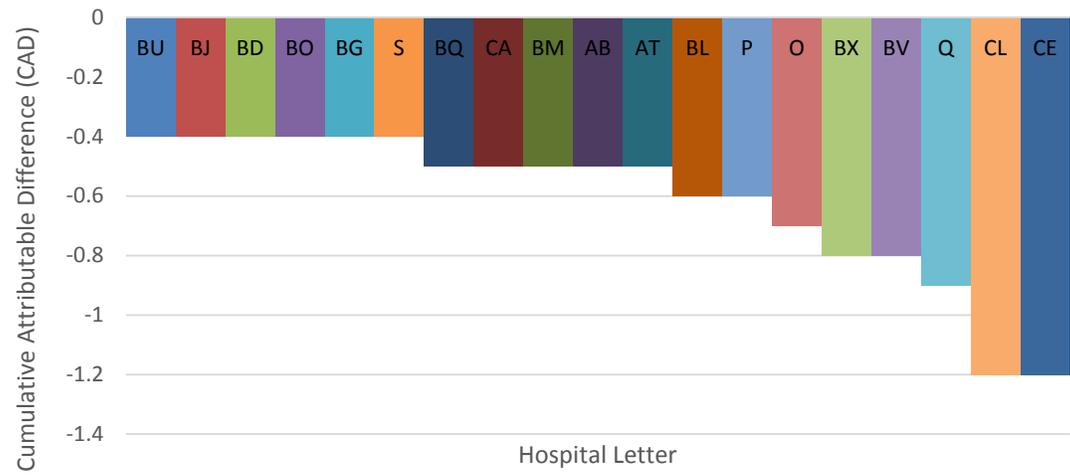
2015 Q1 CAUTI Quartile 1, Ward



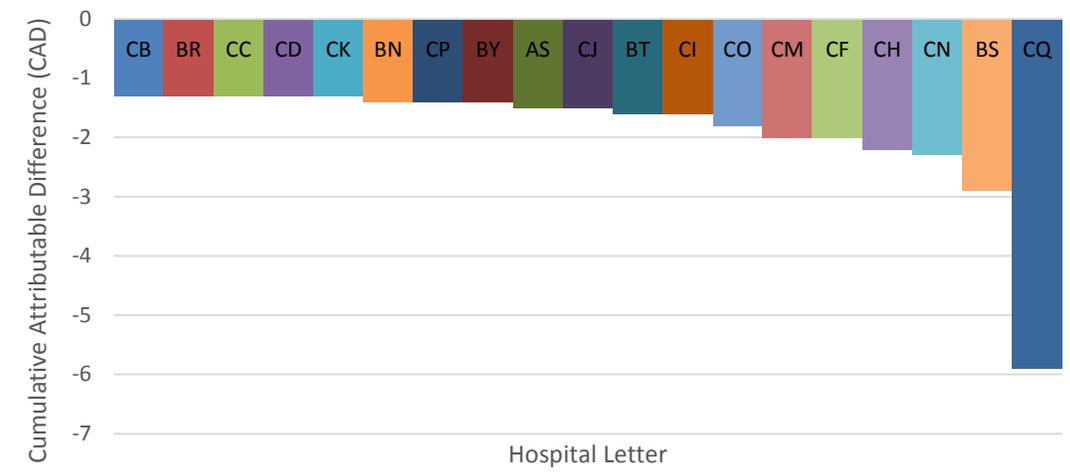
2015 Q1 CAUTI Quartile 2, Ward



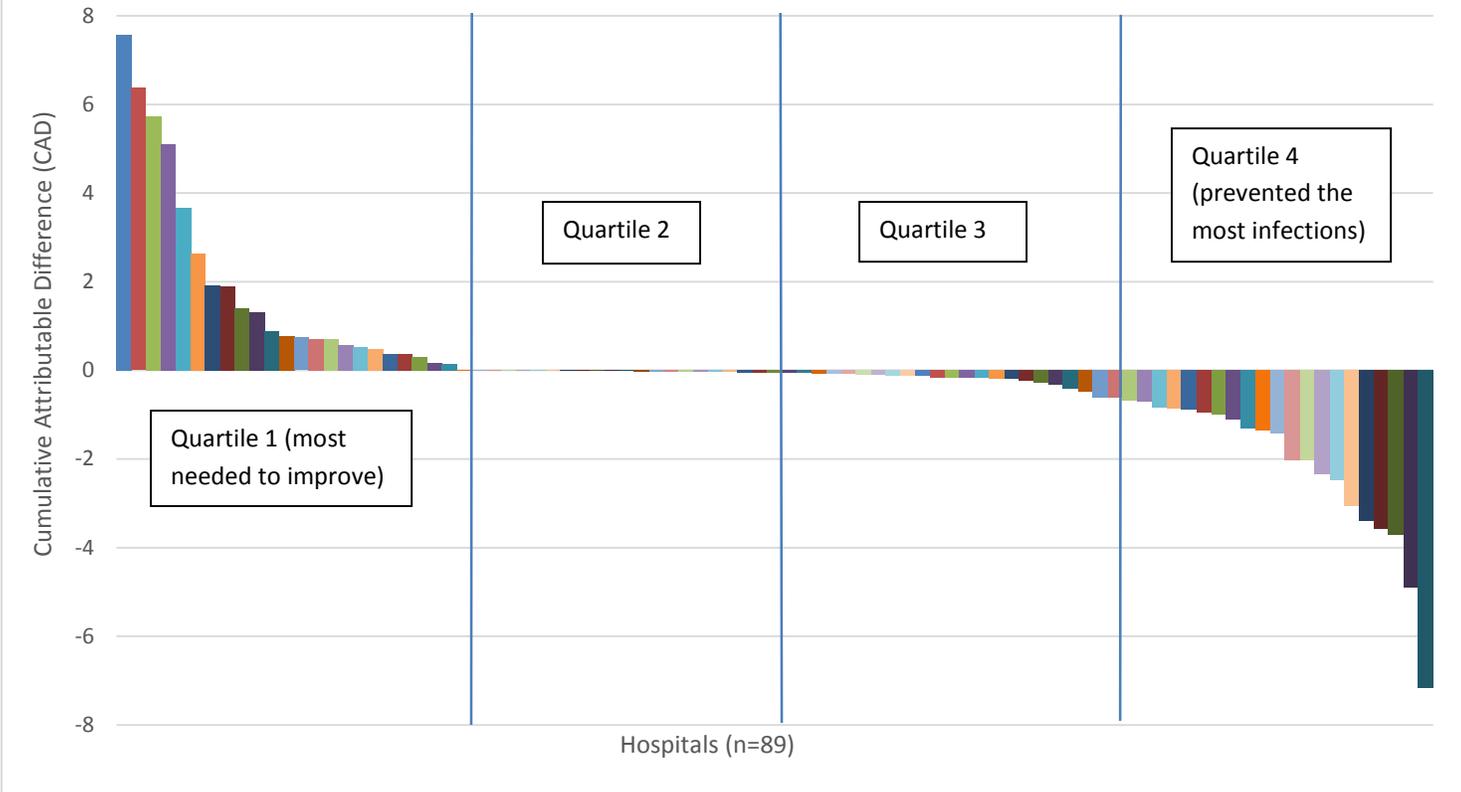
2015 Q1 CAUTI Quartile 3, Ward



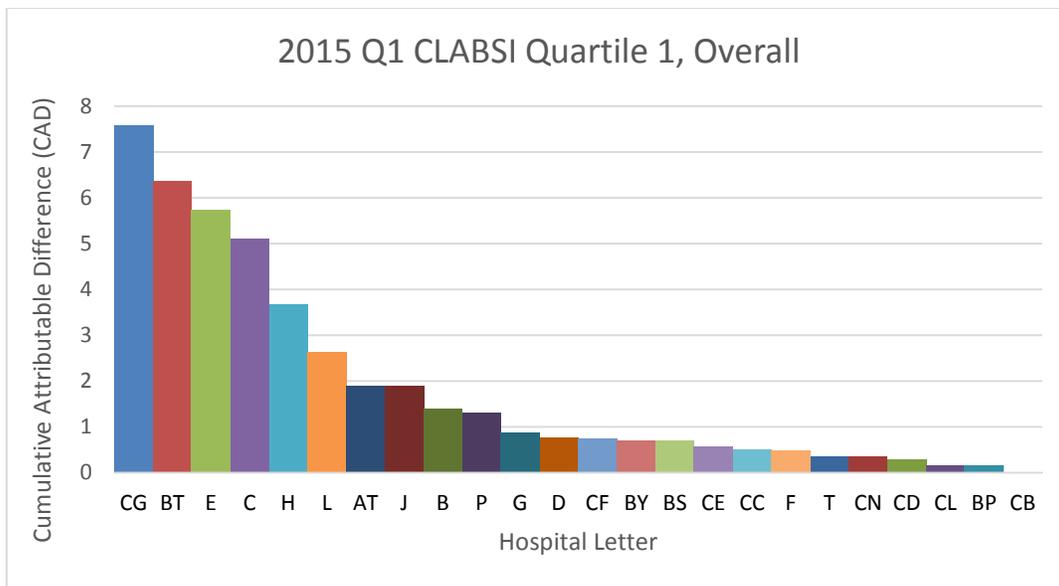
2015 Q1 CAUTI Quartile 4, Ward



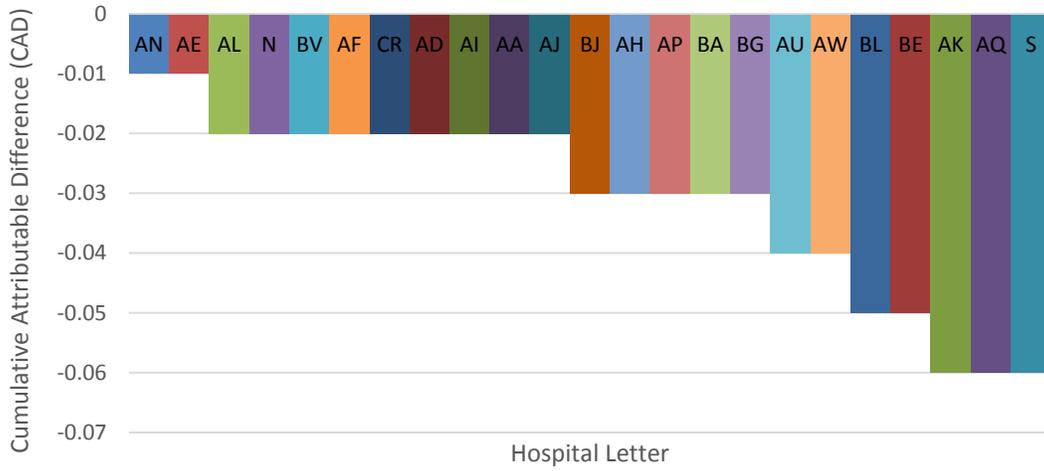
2015 Q1 CLABSI All Hospitals, Overall



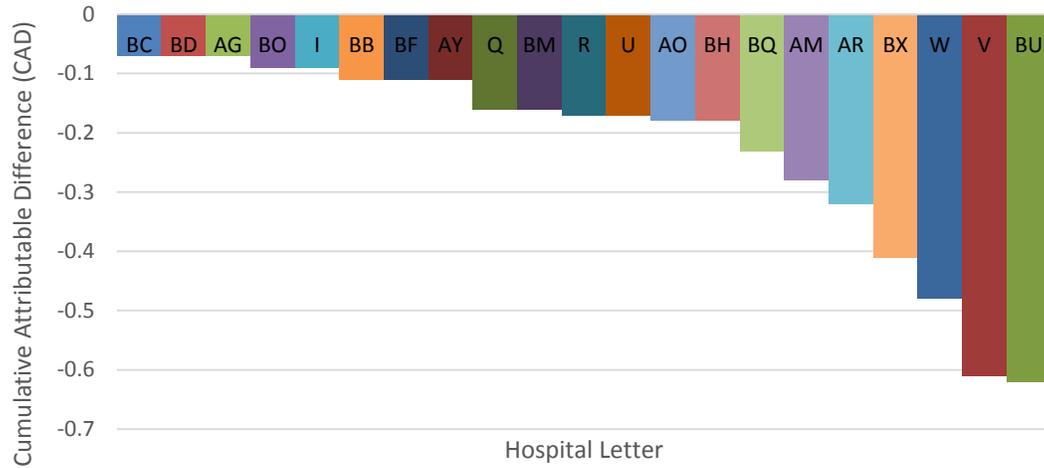
2015 Q1 CLABSI Quartile 1, Overall



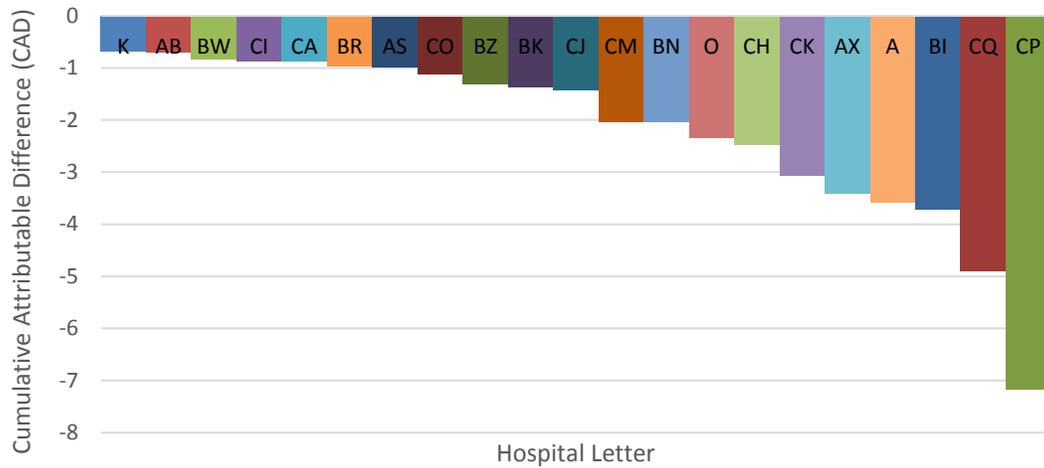
2015 Q1 CLABSI Quartile 2, Overall



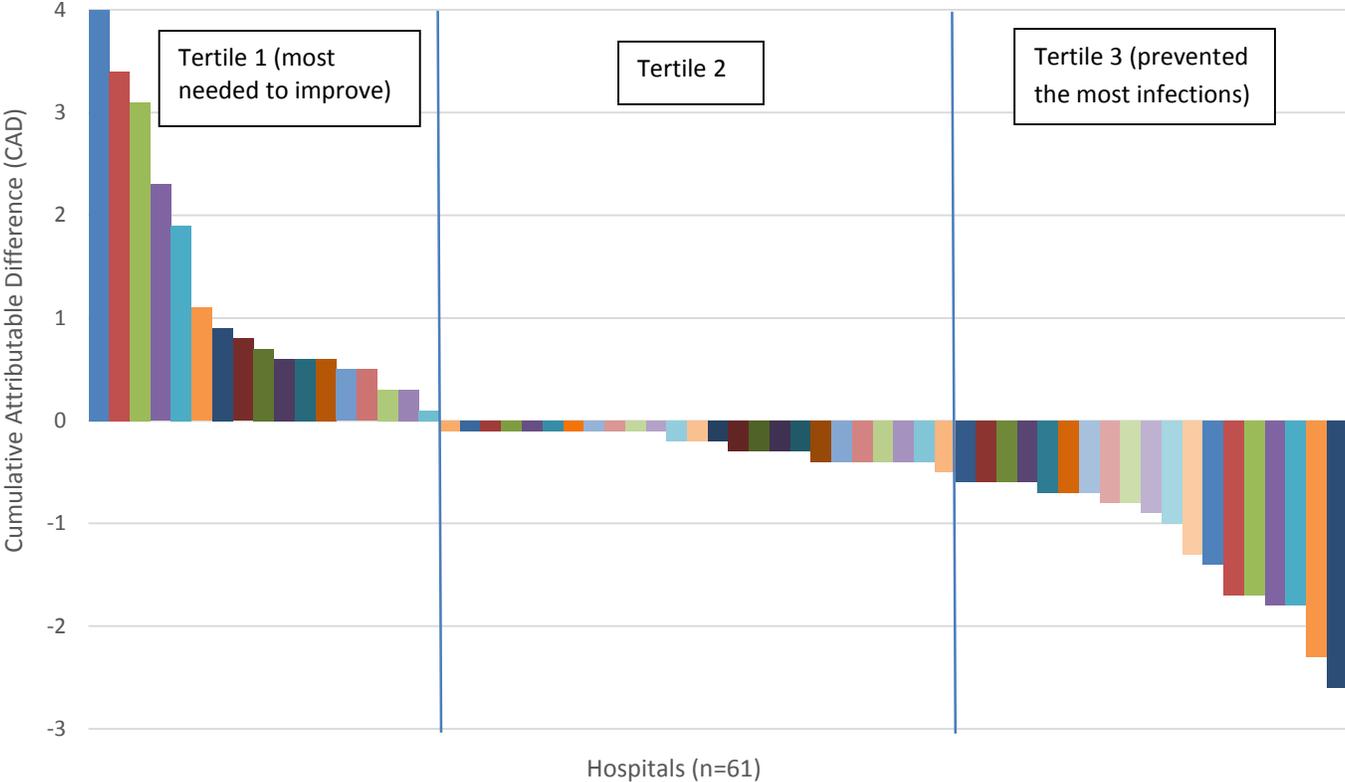
2015 Q1 CLABSI Quartile 3, Overall



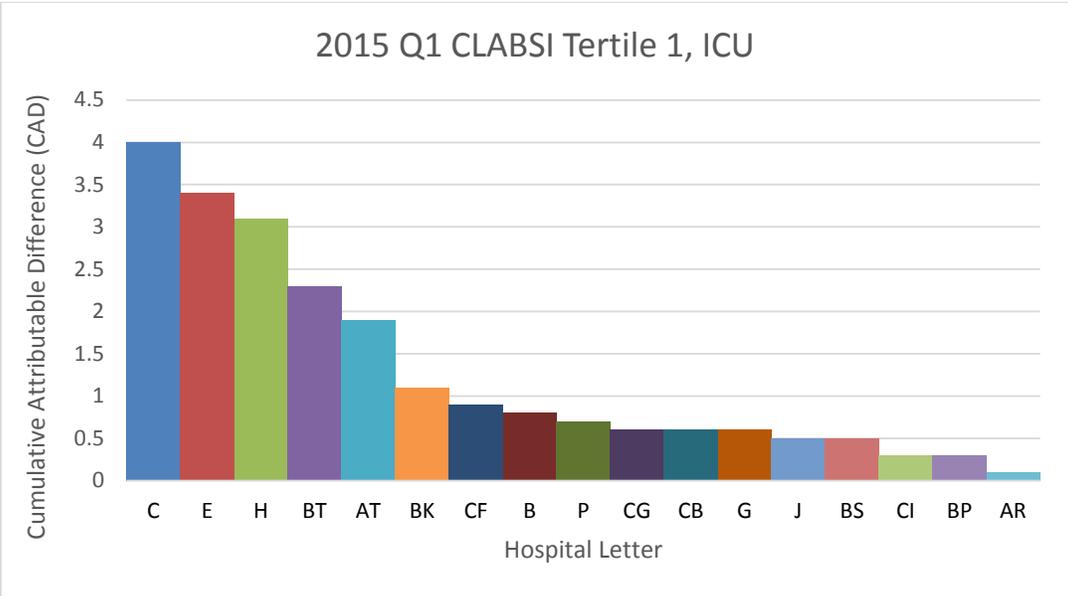
2015 Q1 CLABSI Quartile 4, Overall



2015 Q1 CLABSI All Hospitals, ICU



2015 Q1 CLABSI Tertile 1, ICU



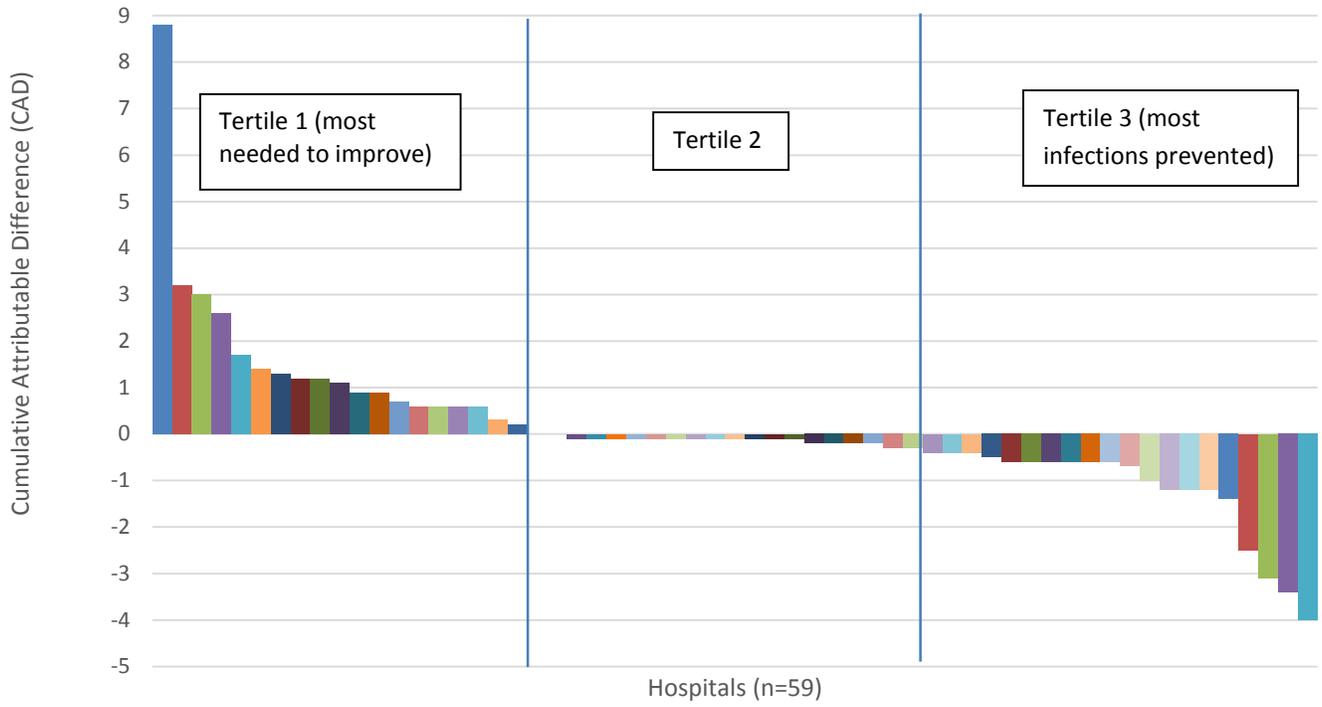
2015 Q1 CLABSI Tertile 2, ICU



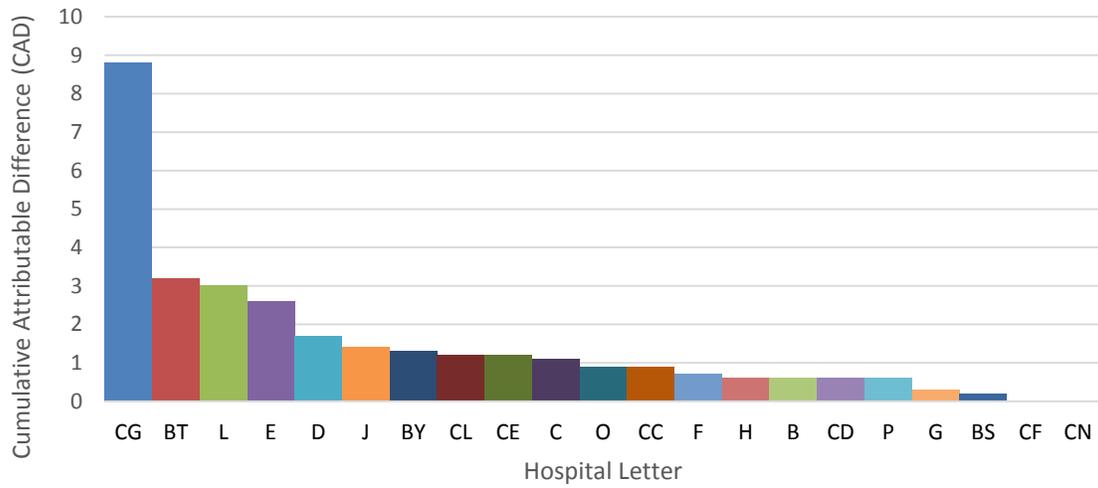
2015 Q1 CLABSI Tertile 3, ICU



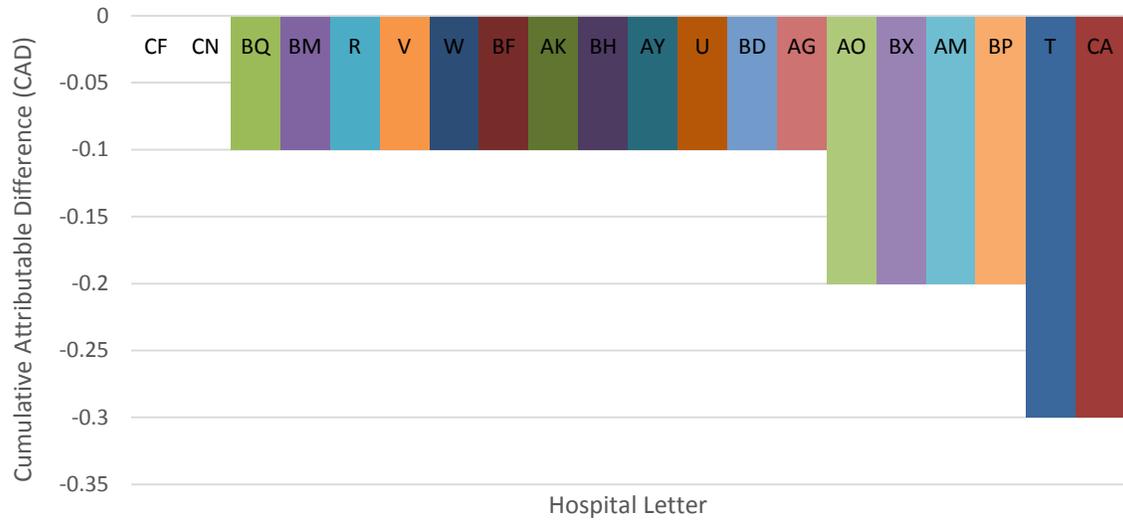
2015 Q1 CLABSI All Hospitals, Ward



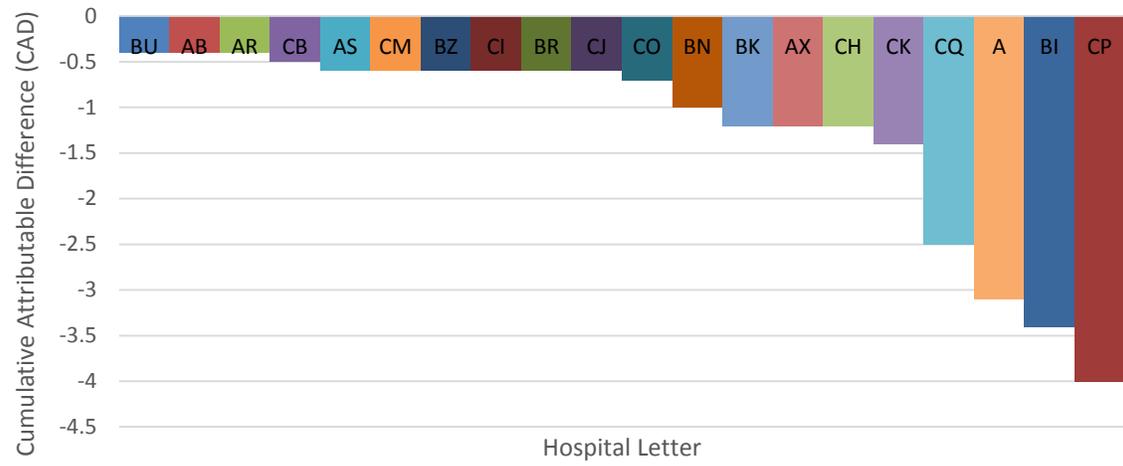
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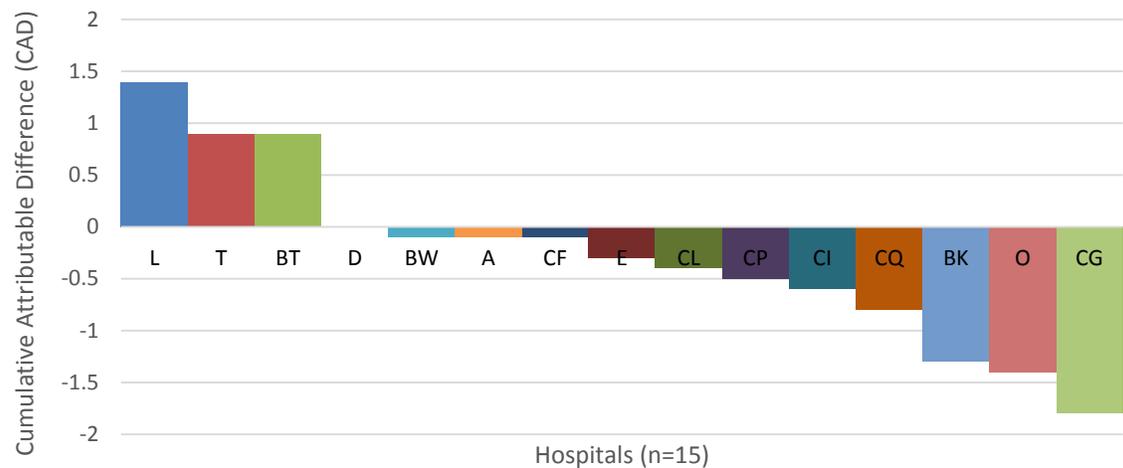
2015 Q1 CLABSI Tertile 2, Ward



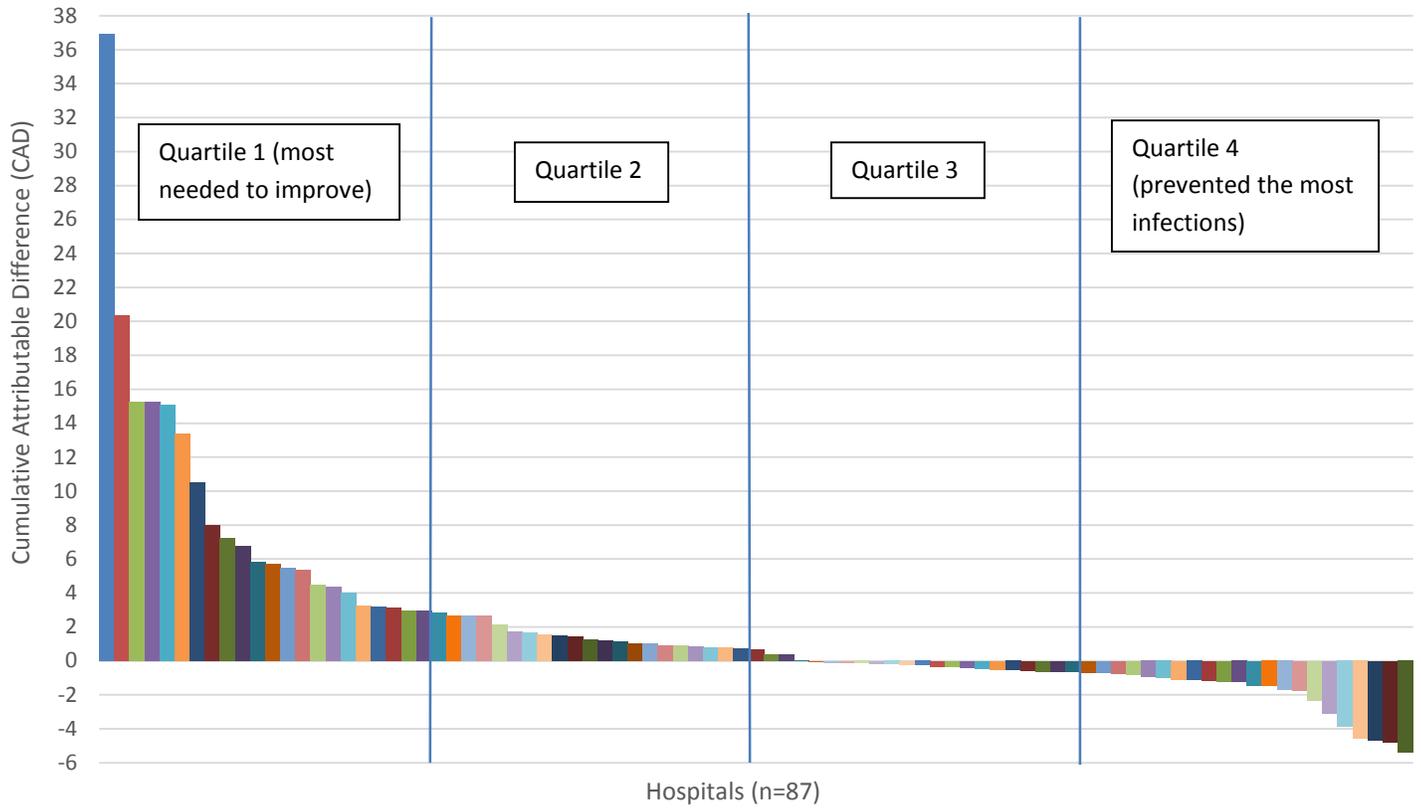
2015 Q1 CLABSI Tertile 3, Ward



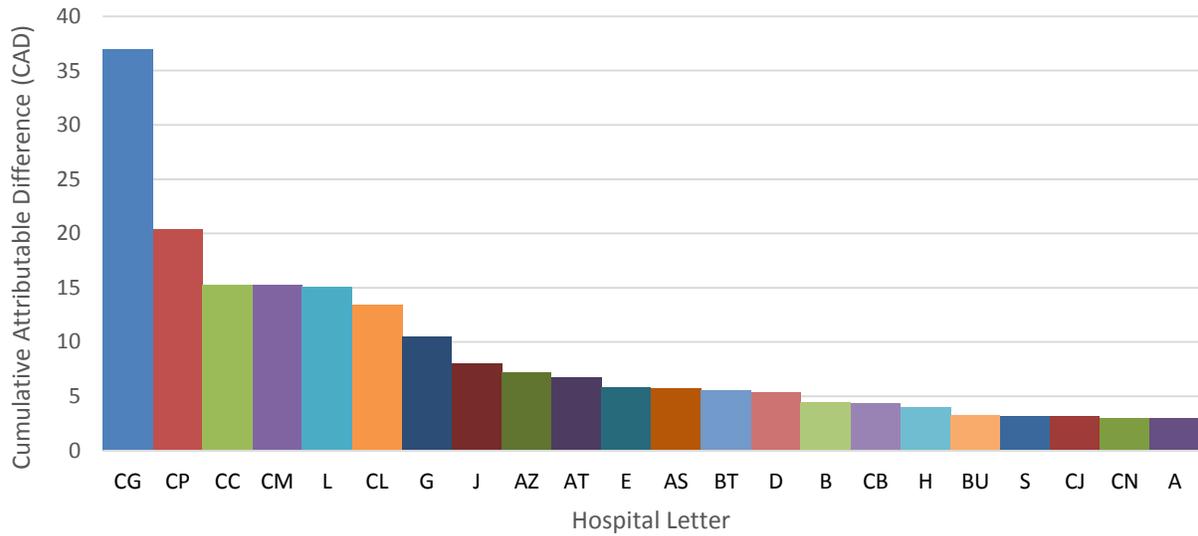
2015 Q1 CLABSI All Hospitals, NICU



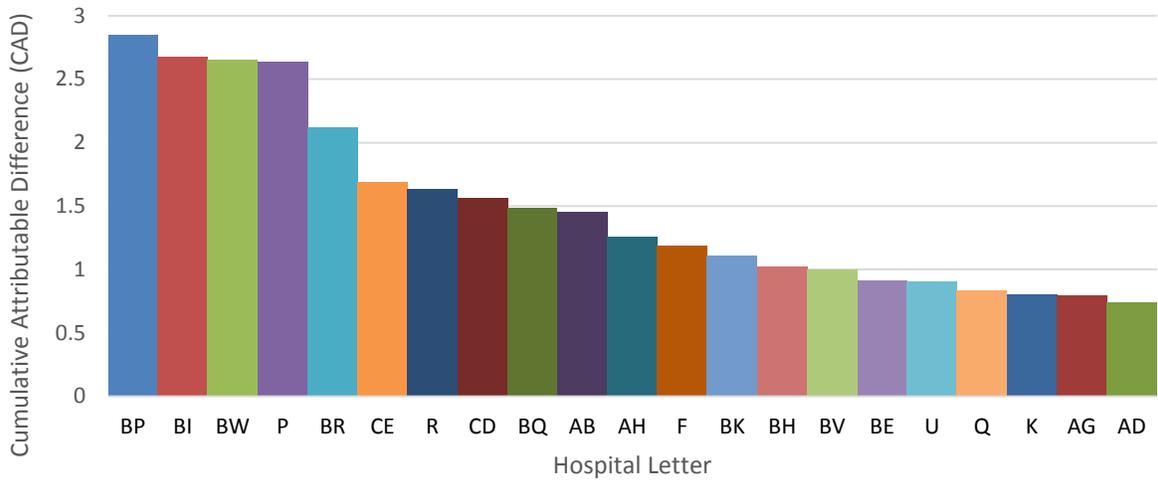
2015 Q1 C.diff LabID All Hospitals, Facility-Wide Inpatient



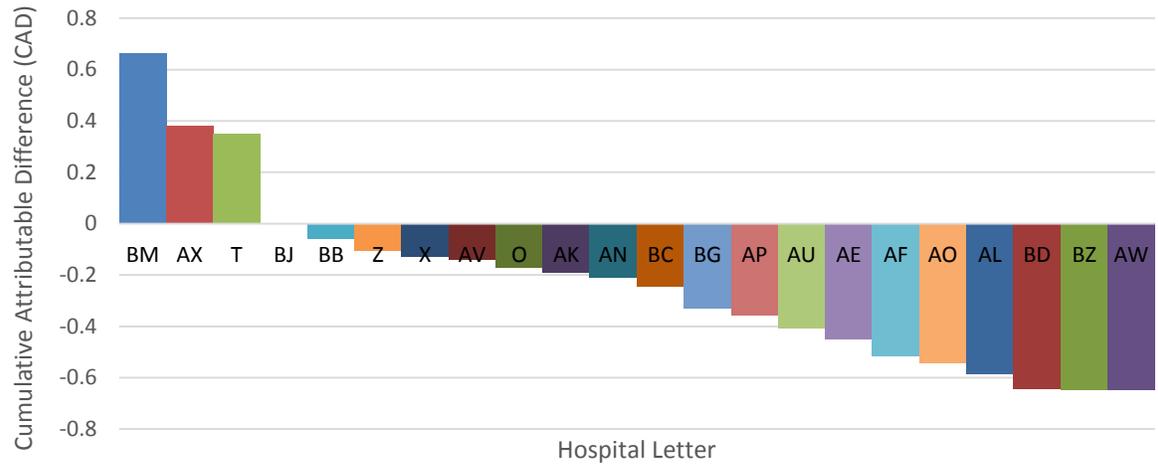
2015 Q1 C.diff LabID Quartile 1, Facility-Wide Inpatient



2015 Q1 C.diff LabID Quartile 2, Facility-Wide Inpatient



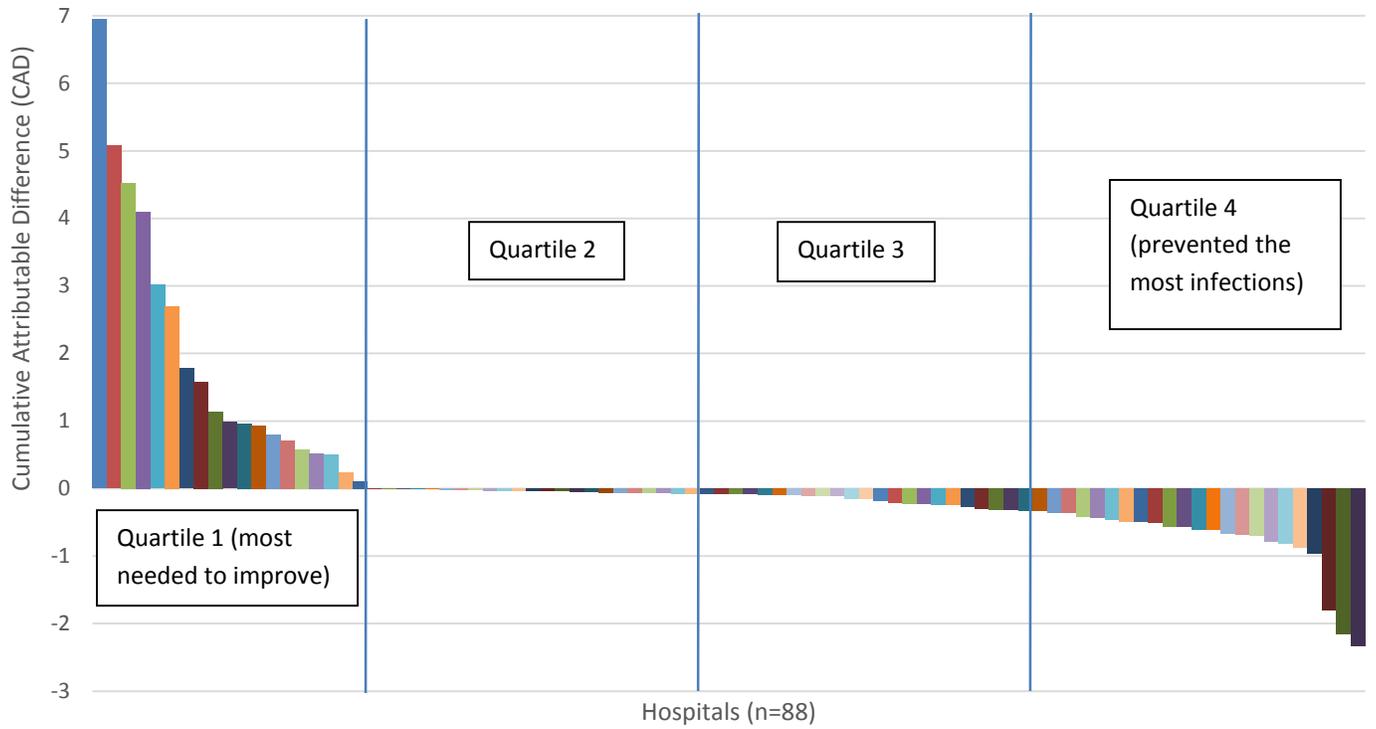
2015 Q1 C.diff LabID Quartile 3, Facility-Wide Inpatient



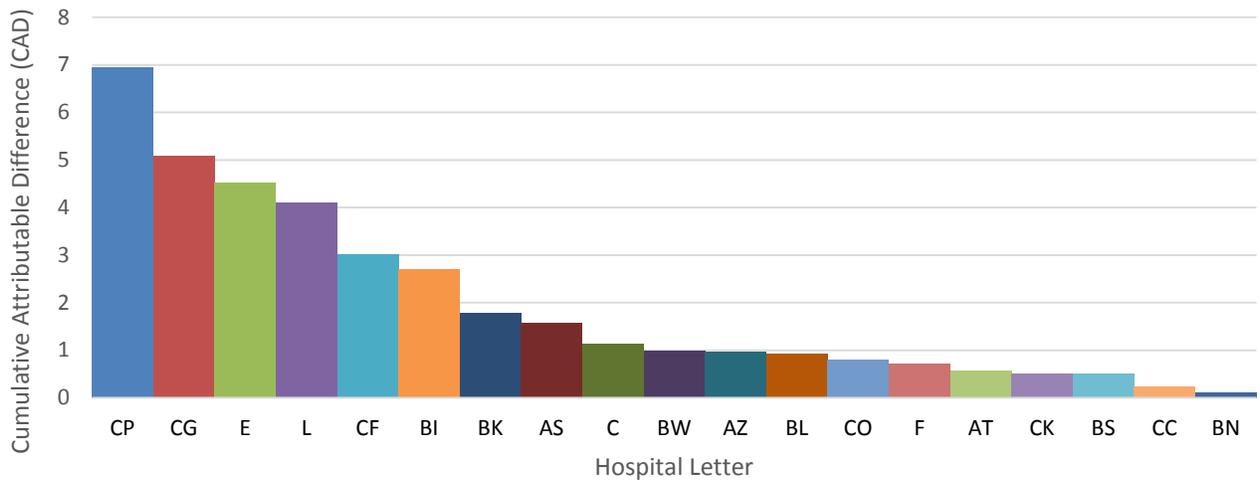
2015 Q1 C.diff LabID Quartile 4, Facility-Wide Inpatient



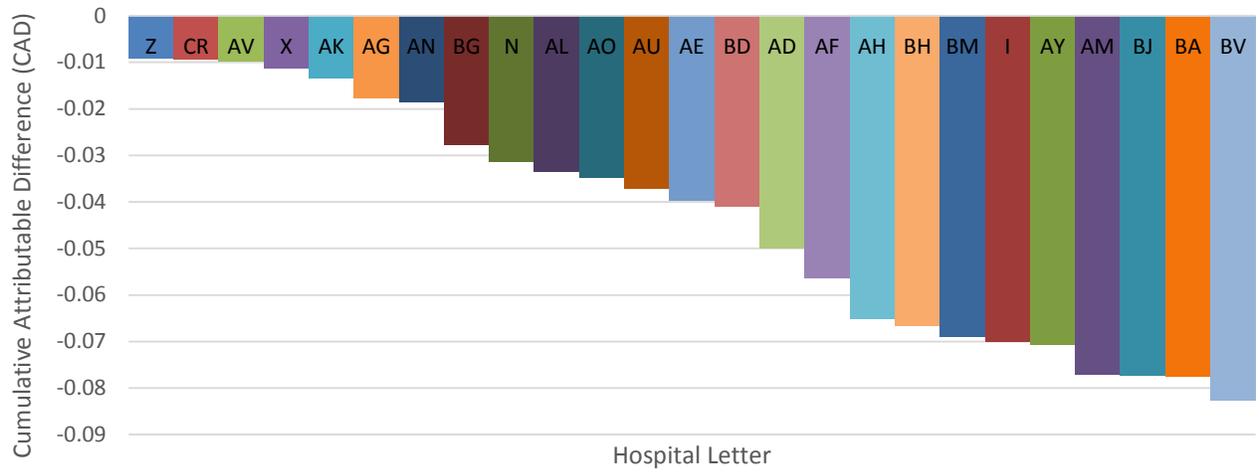
2015 Q1 MRSA bacteremia LabID All Hospitals, Facility-Wide Inpatient



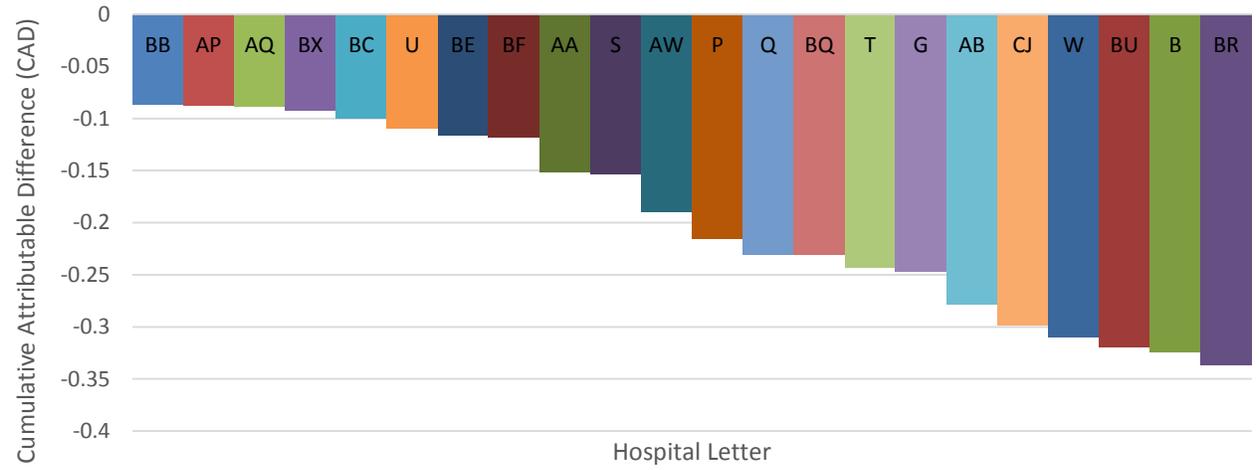
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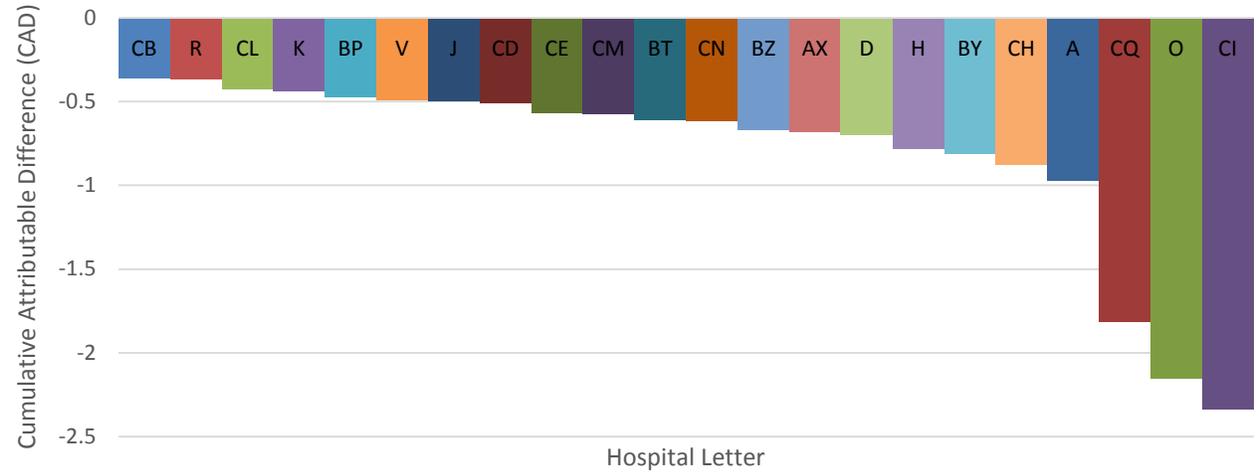
2015 Q1 MRSA bacteremia LabID Quartile 2, Facility-Wide Inpatient



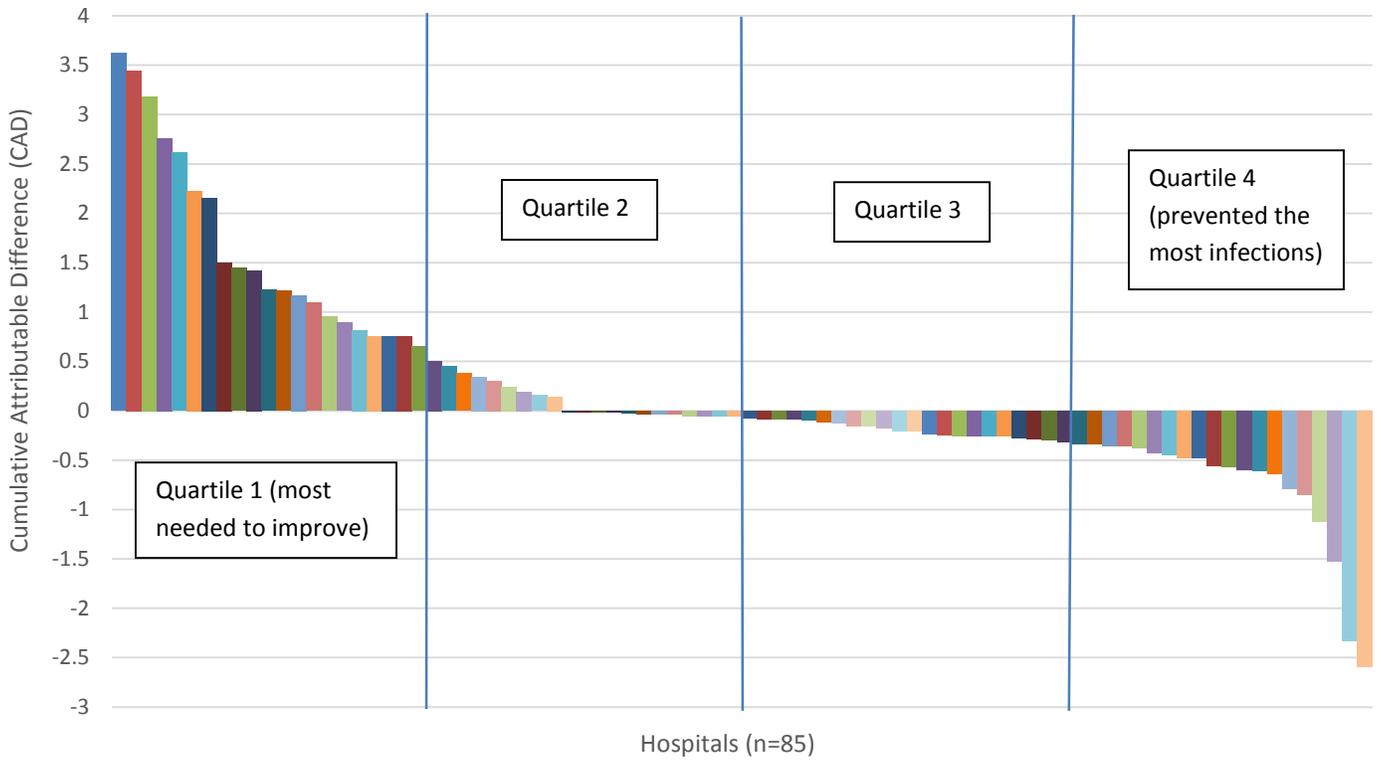
2015 Q1 MRSA bacteremia LabID Quartile 3, Facility-Wide Inpatient



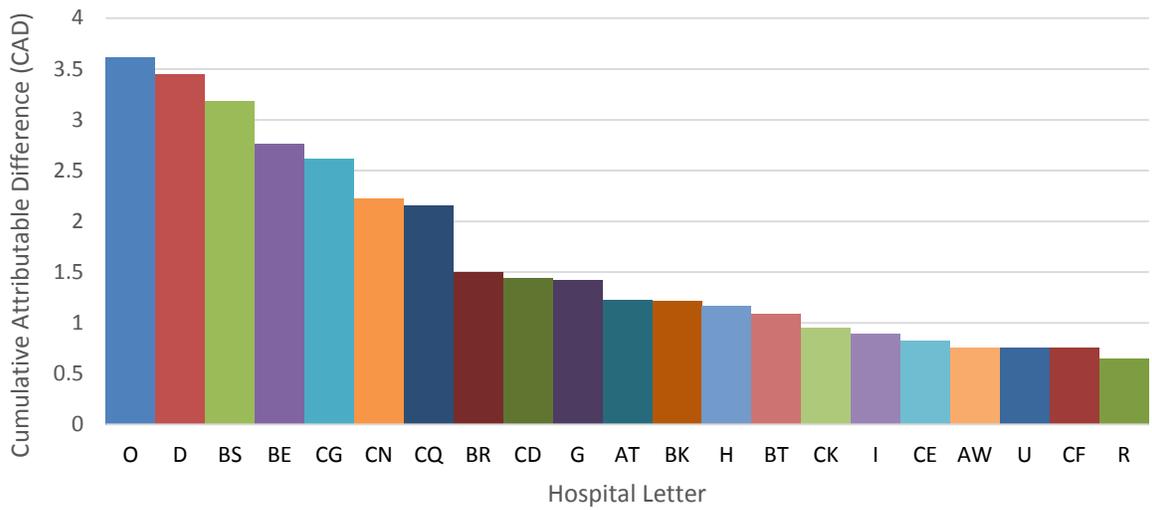
2015 Q1 MRSA bacteremia LabID Quartile 4, Facility-Wide Inpatient



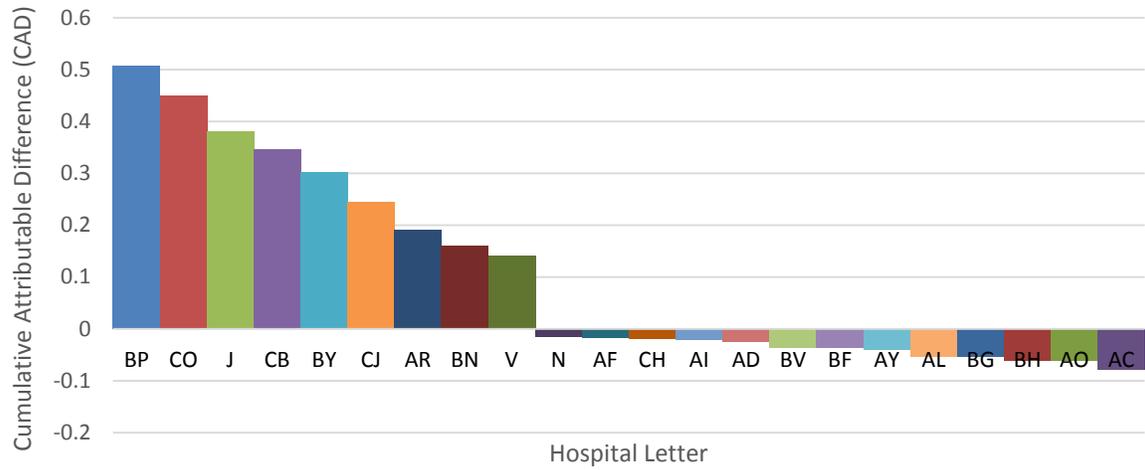
2015 Q1 SSI COLO All Hospitals



2015 Q1 SSI COLO Quartile 1



2015 Q1 SSI COLO Quartile 2



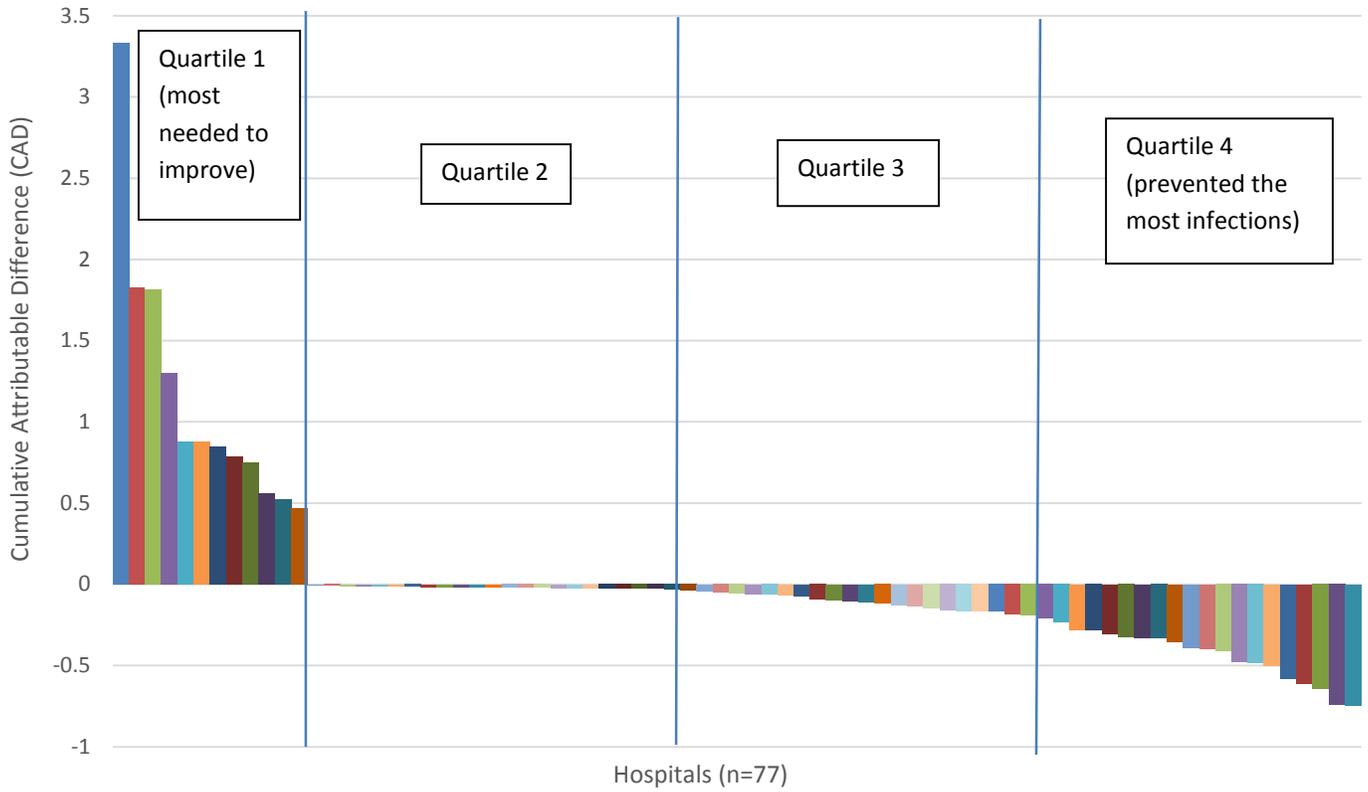
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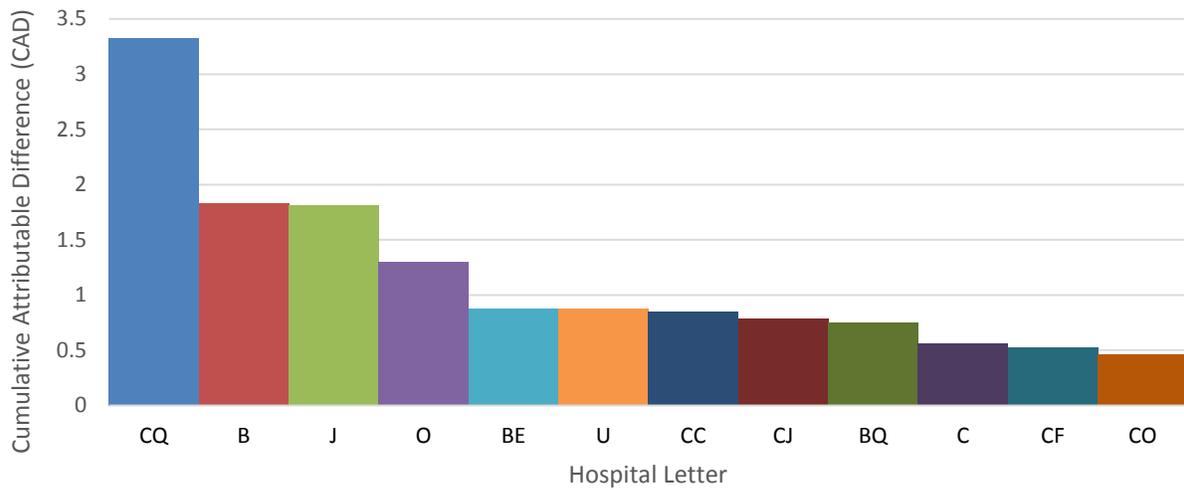
2015 Q1 SSI COLO Quartile 4



2015 Q1 SSI HYST All Hospitals



2015 Q1 SSI HYST Quartile 1



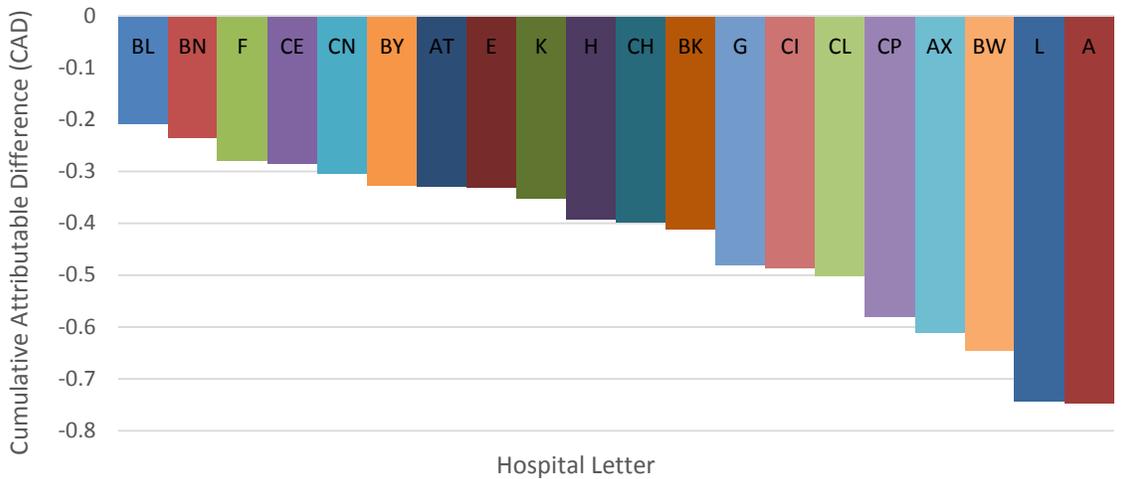
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2015 Q1 SSI HYST Quartile 3



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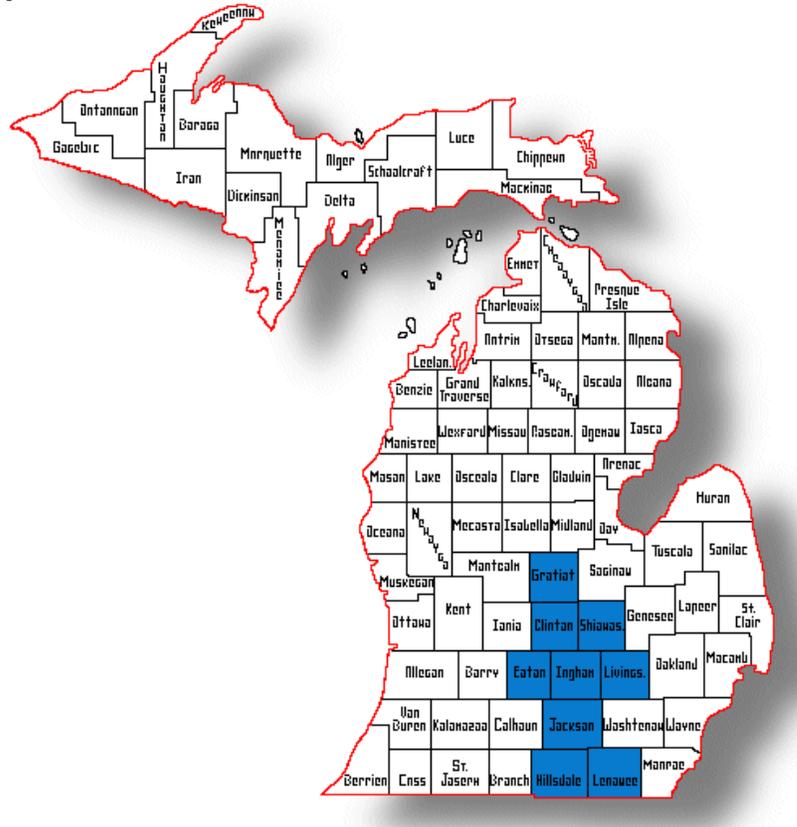


Michigan Region 1
2015 Q1 Aggregate TAP Report

Michigan Department of Health and Human Services
 Surveillance for Healthcare-Associated and Resistant Pathogens (SHARP) Unit



● - Region 1



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Bar graphs containing CAD values from all letter-coded SHARP-participating hospitals in the region by module and location are available below. These graphs allow each facility in the region to view their rank within each module and location compared to other nearby facilities. Hospital letters are provided in password-protected individual TAP reports. A CAD greater than zero indicates the number of infections a facility needs to prevent to achieve the HHS Target SIR for that module. A number less than zero indicates the number of infections a facility prevented beyond what was expected based on the HHS Target SIR.

2015 Q1 Targeted Assessment for Prevention Report

NHSN Module	Number of Facilities	Location	SIR ¹	Significant (Y/N) ²	CAD ³	Prevented or Need to Prevent
CAUTI	11	All	0.3	Y	-9.7	Prevented
	9	ICU	0.4	----	-3.6	Prevented
	11	Ward	0.2	----	-6.1	Prevented
CLABSI	10	All	0.4	Y	-0.8	Prevented
	7	ICU	0.3	----	-1.5	Prevented
	7	Ward	0.7	----	1.2	Need to Prevent
	<5	NICU	----	----	----	----
CDI	9	Facility-wide	0.57	Y	-9.44	Prevented
MRSA Bac	9	Facility-wide	0.00	Y	-4.18	Prevented
SSI COLO	10	----	0.78	N	0.2	Need to Prevent
SSI HYST	9	----	0.51	N	-0.46	Prevented

¹SIR: Standardized Infection Ratio: Ratio of observed events compared to the number of predicted events, accounting for unit type or other variables. An SIR of 1 can be interpreted as having the same number of events as predicted. An SIR that is between 0 and 1 represents fewer events than predicted, while an SIR of greater than 1 represents more events than predicted.

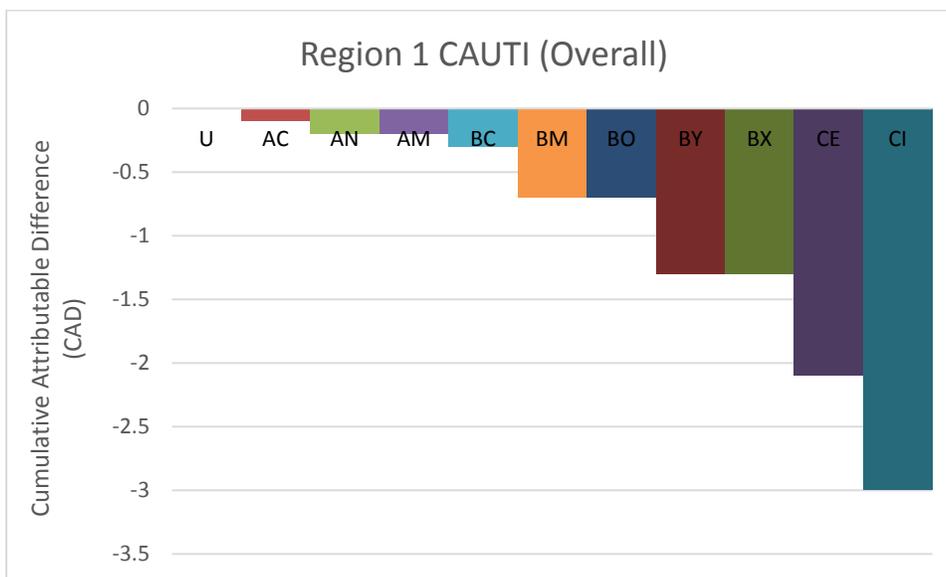
²Significant (Y/N). A Y indicates that, based on the p-value and 95% Confidence Interval (CI), the SIR is statistically significantly different than 1. An N indicates that, based on the p-value and 95% CI, the SIR is not statistically significantly different than 1 (expected). Significance testing was only performed on overall SIRs, not location-specific.

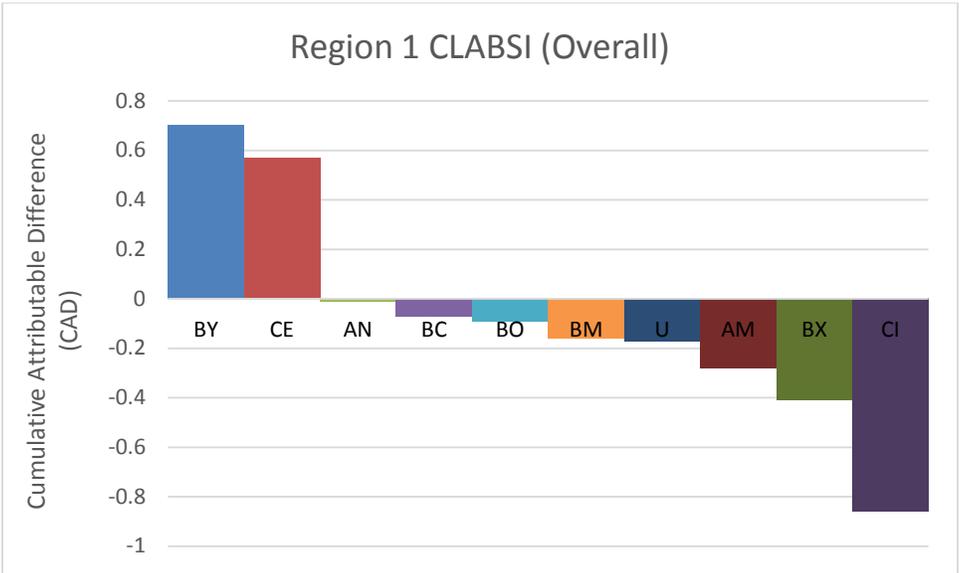
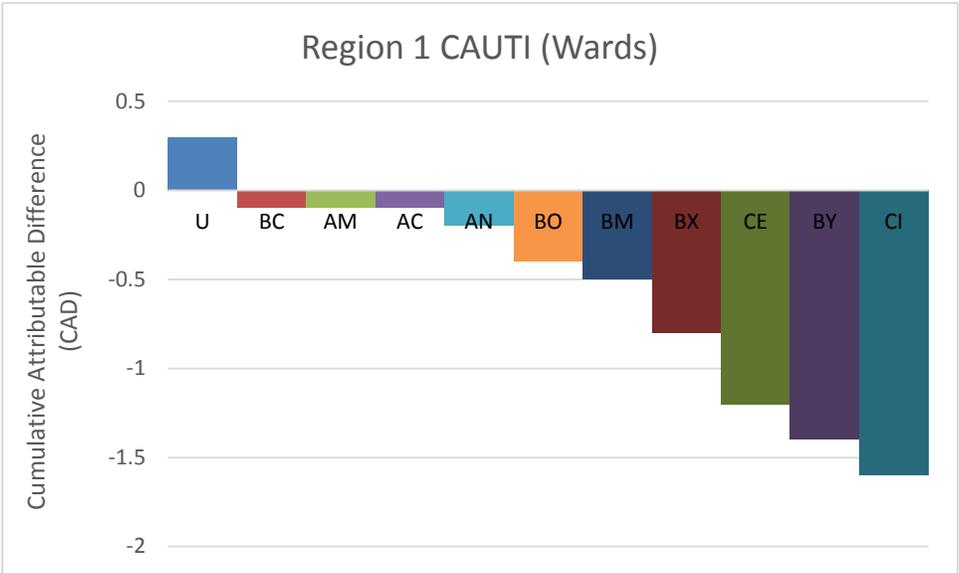
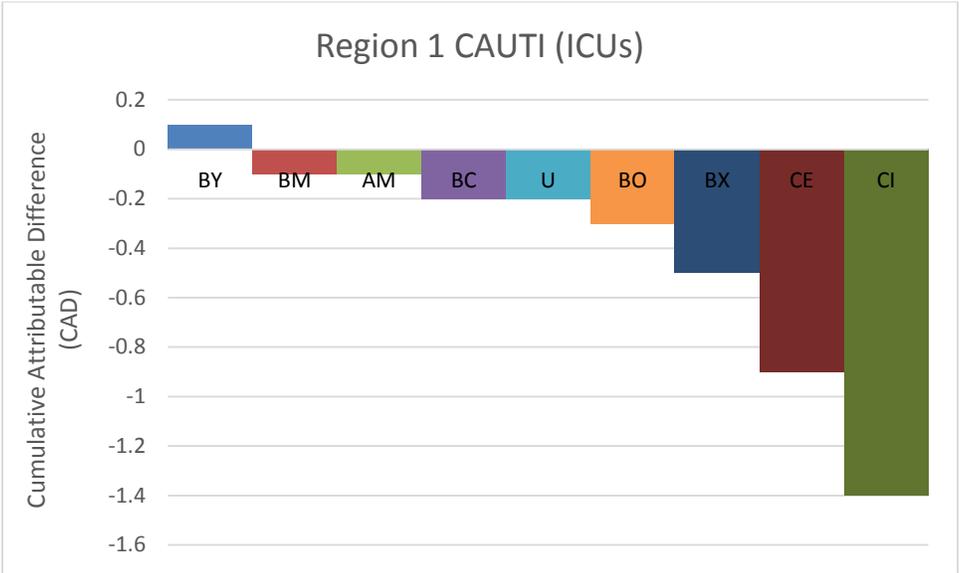
³CAD=Cumulative Attributable Difference. The number of infections that the region either needs to prevent to meet the HHS target or has prevented beyond the HHS target.

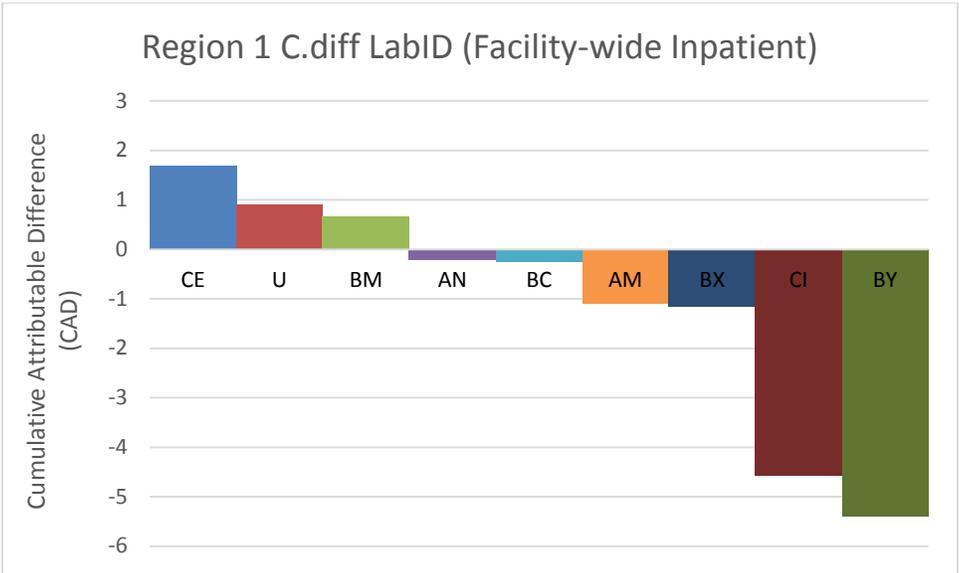
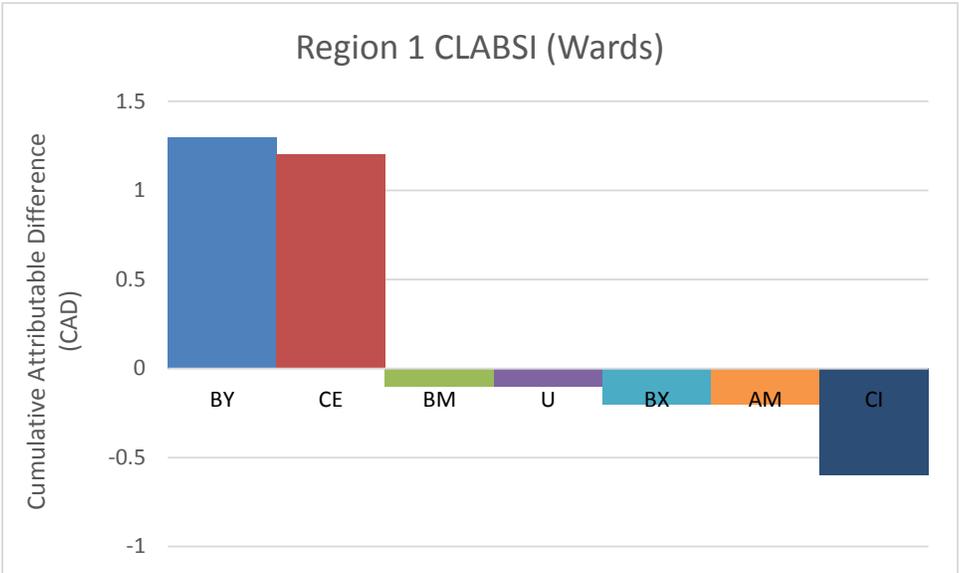
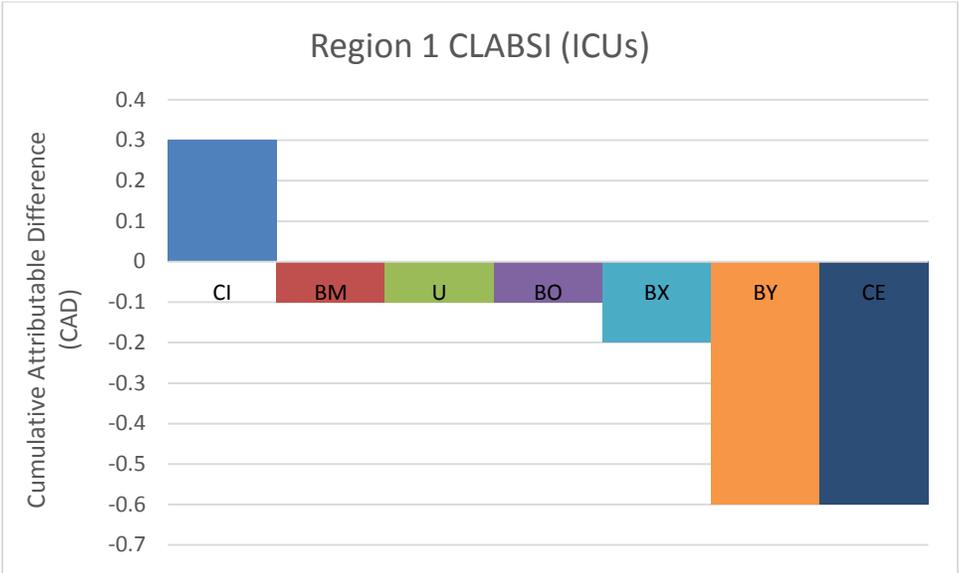
HHS CAUTI Target SIR = 0.75, HHS CLABSI Target SIR = 0.5, HHS CDI Target SIR = 0.7, HHS MRSA bacteremia Target SIR = 0.75, HHS SSI Target SIR = 0.75

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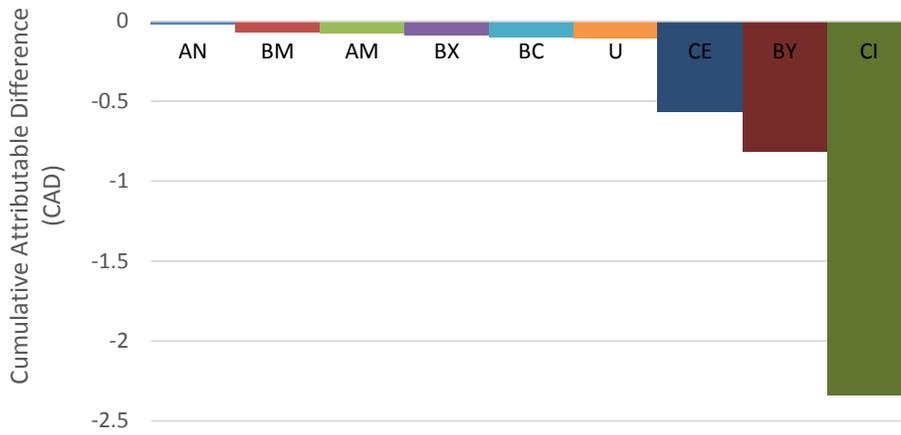
Bar Graphs



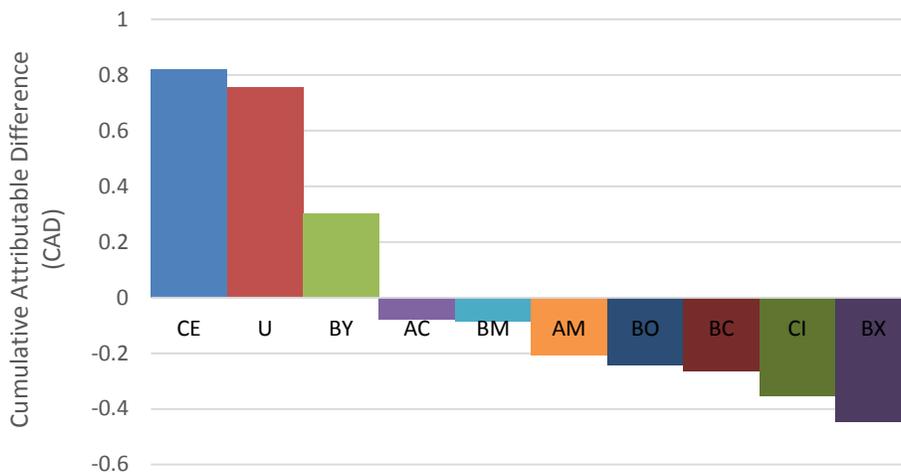




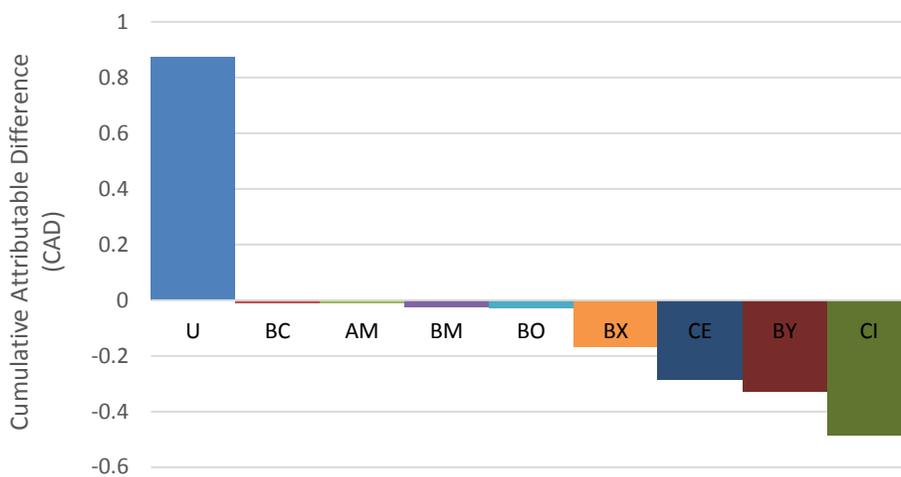
Region 1 MRSA bacteremia LabID (Facility-wide Inpatient)



Region 1 SSI Colon Surgeries



Region 1 SSI Abdominal Hysterectomies

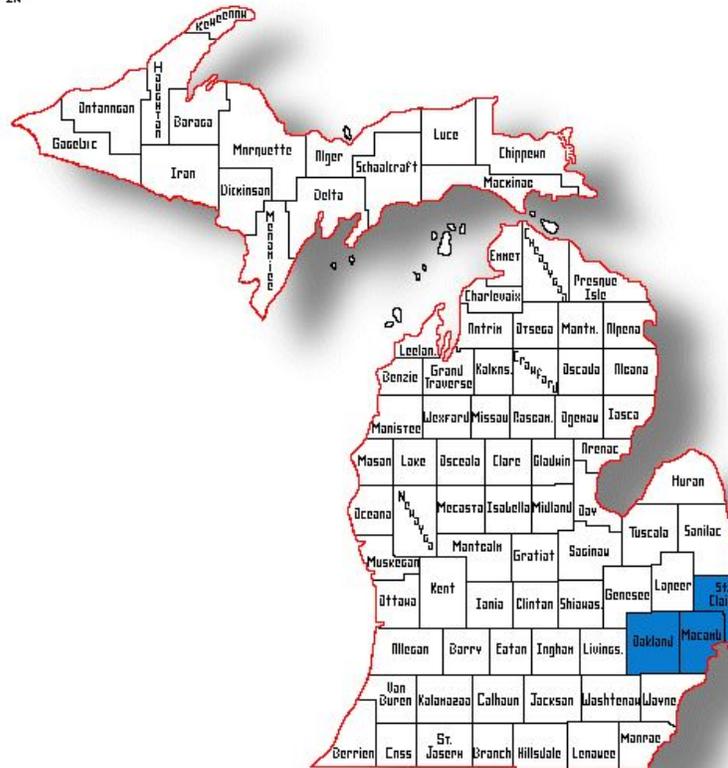


Michigan Region 2N
2015 Q1 Aggregate TAP Report

Michigan Department of Health and Human Services
 Surveillance for Healthcare-Associated and Resistant Pathogens (SHARP) Unit



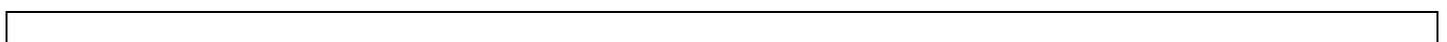
● - Region 2N



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2015 Q1 Targeted Assessment for Prevention Report

NHSN Module	Number of Facilities	Location	SIR ¹	Significant (Y/N) ²	CAD ³	Prevented or Need to Prevent
CAUTI	14	All	0.4	Y	-27.1	Prevented
	14	ICU	0.5	----	-13.9	Prevented
	12	Ward	0.4	----	-13.1	Prevented
CLABSI	14	All	2.0	Y	-14.8	Prevented
	13	ICU	0.3	----	-7.6	Prevented
	11	Ward	0.2	----	-6.4	Prevented
	<5	NICU	----	----	----	----
CDI	14	Facility-wide	0.88	N	48.43	Need to Prevent
MRSA Bac	14	Facility-wide	1.19	N	10.36	Need to Prevent
SSI COLO	14	----	0.75	N	0.04	Need to Prevent
SSI HYST	13	----	0.38	N	-1.98	Prevented

¹SIR: Standardized Infection Ratio: Ratio of observed events compared to the number of predicted events, accounting for unit type or other variables. An SIR of 1 can be interpreted as having the same number of events as predicted. An SIR that is between 0 and 1 represents fewer events than predicted, while an SIR of greater than 1 represents more events than predicted.

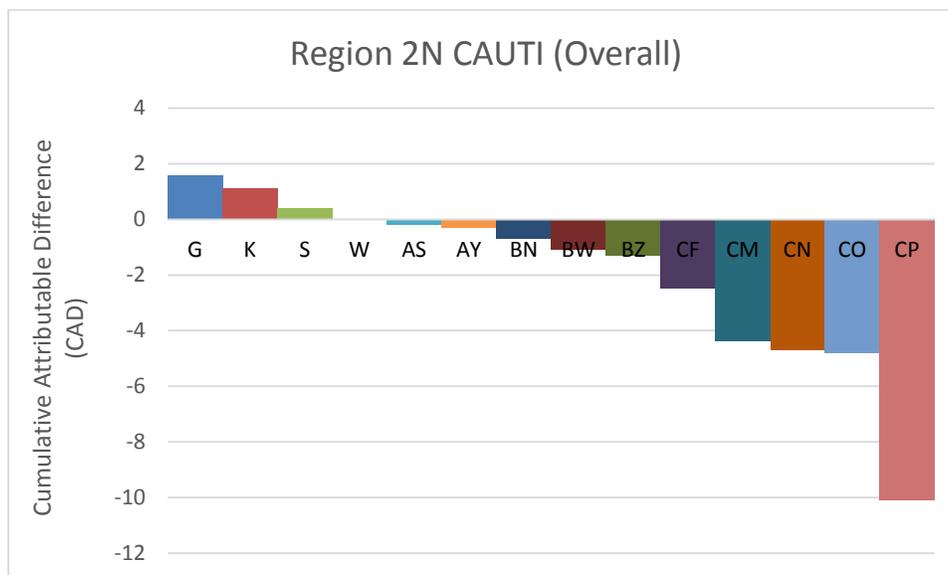
²Significant (Y/N). A Y indicates that, based on the p-value and 95% Confidence Interval (CI), the SIR is statistically significantly different than 1. An N indicates that, based on the p-value and 95% CI, the SIR is not statistically significantly different than 1 (expected). Significance testing was only performed on overall SIRs, not location-specific.

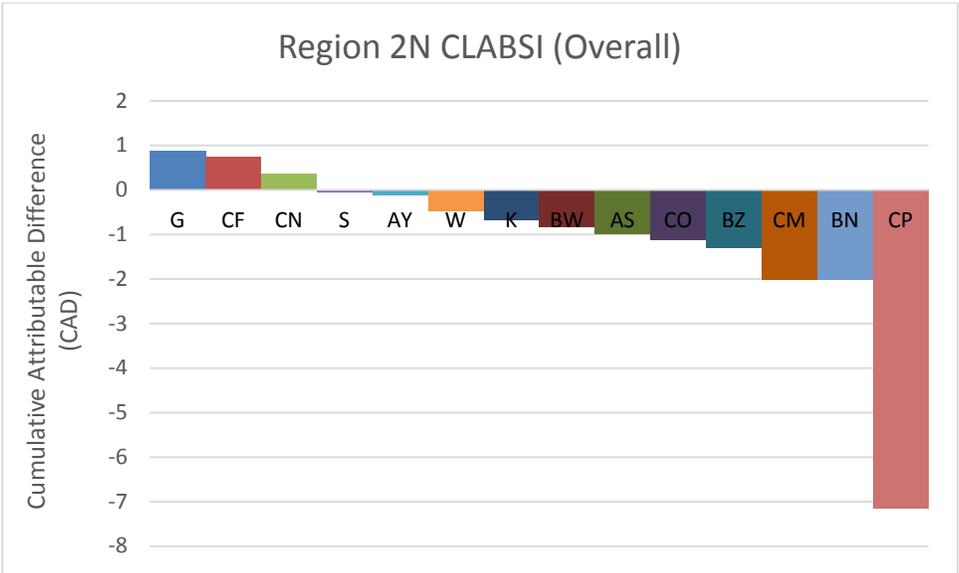
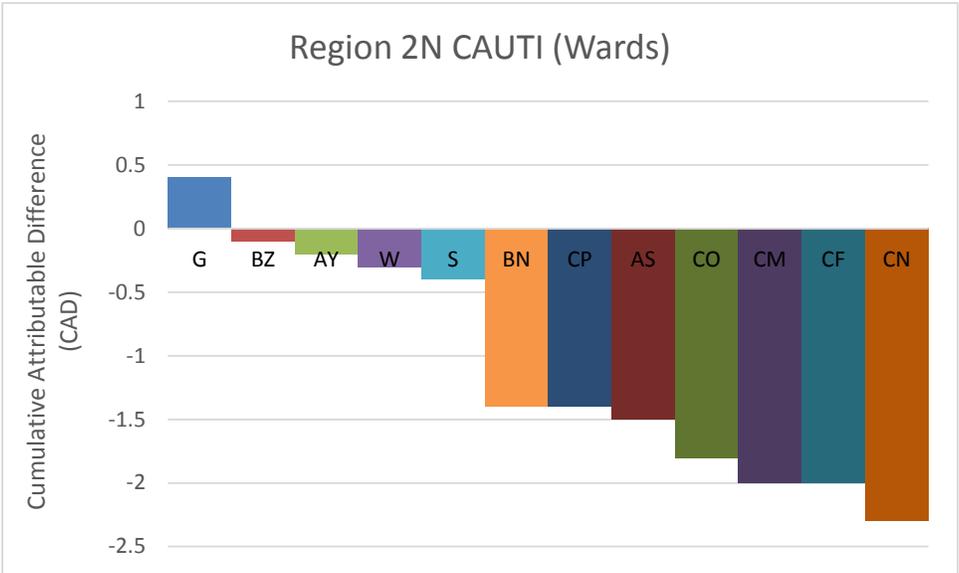
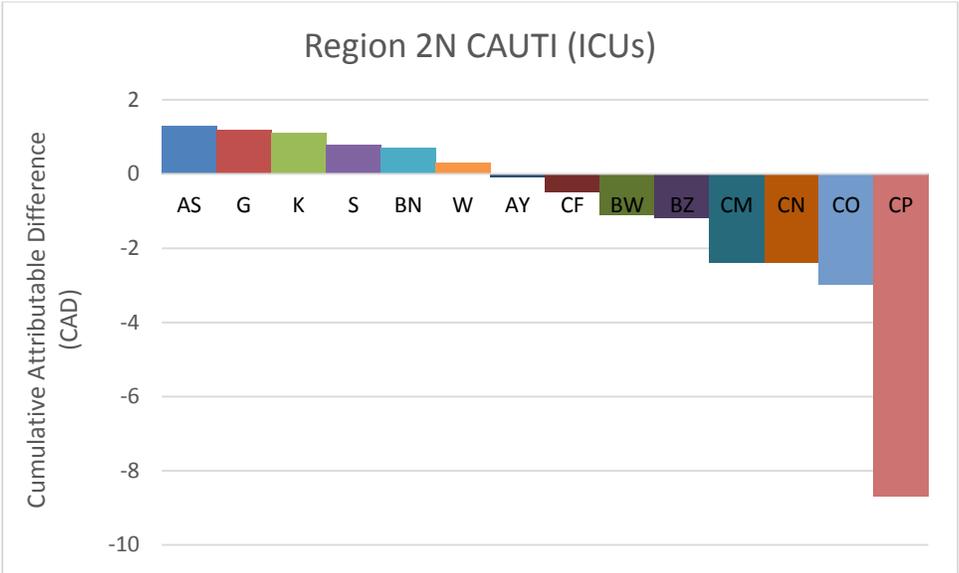
³CAD=Cumulative Attributable Difference. The number of infections that the region either needs to prevent to meet the HHS target or has prevented beyond the HHS target.

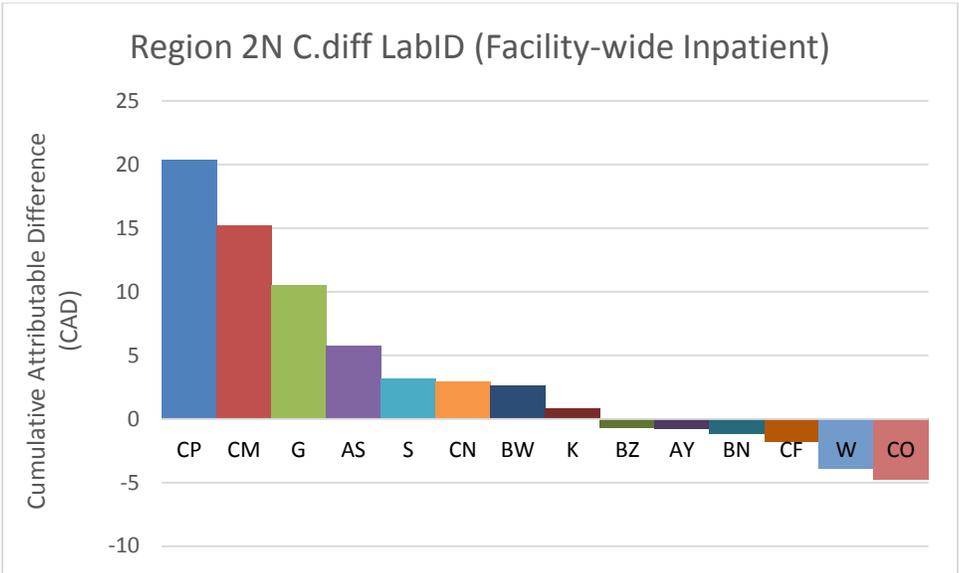
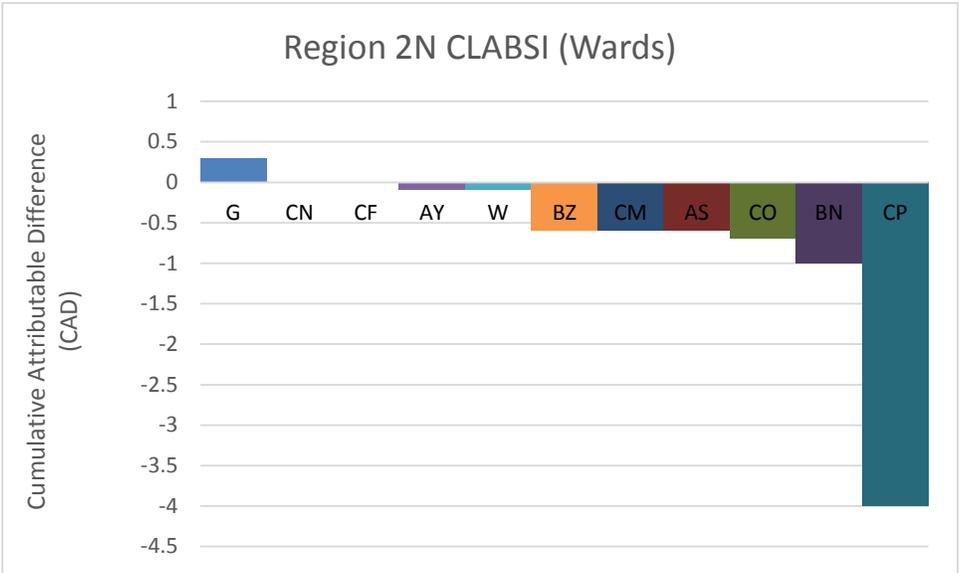
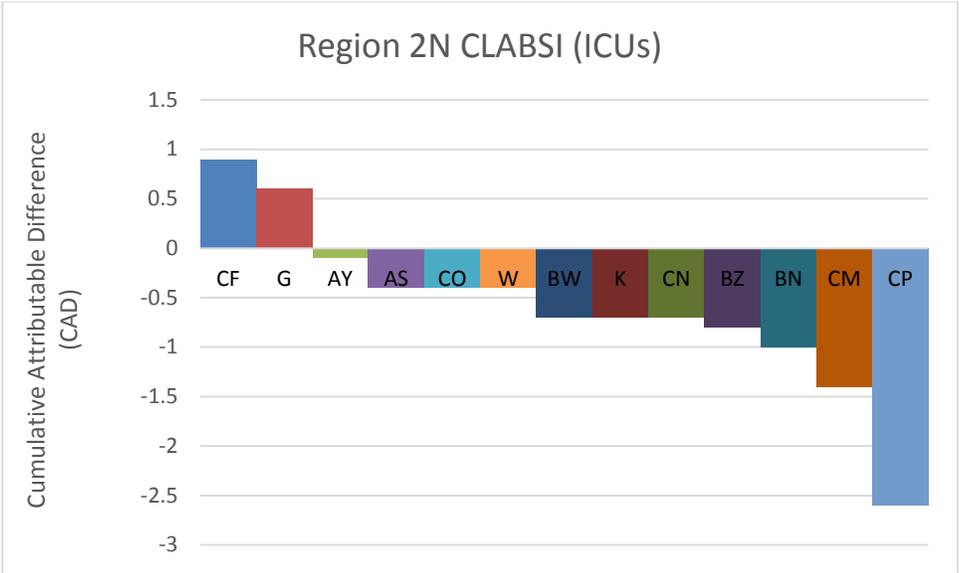
HHS CAUTI Target SIR = 0.75, HHS CLABSI Target SIR = 0.5, HHS CDI Target SIR = 0.7, HHS MRSA bacteremia Target SIR = 0.75, HHS SSI Target SIR = 0.75

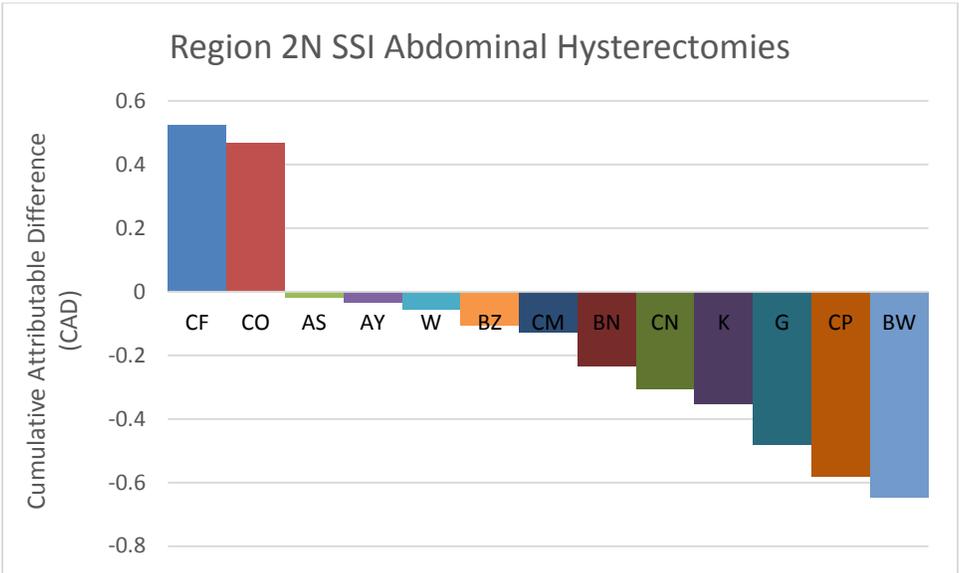
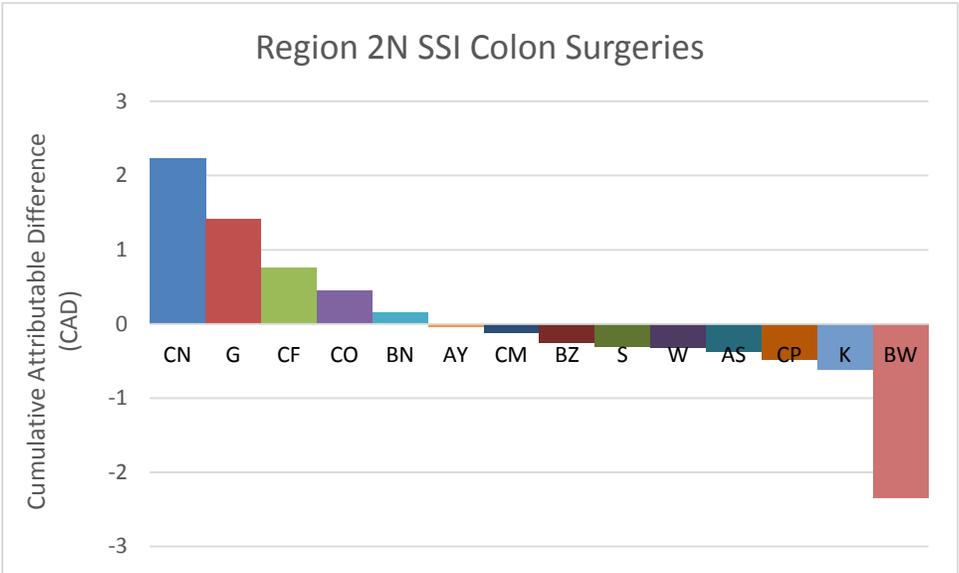
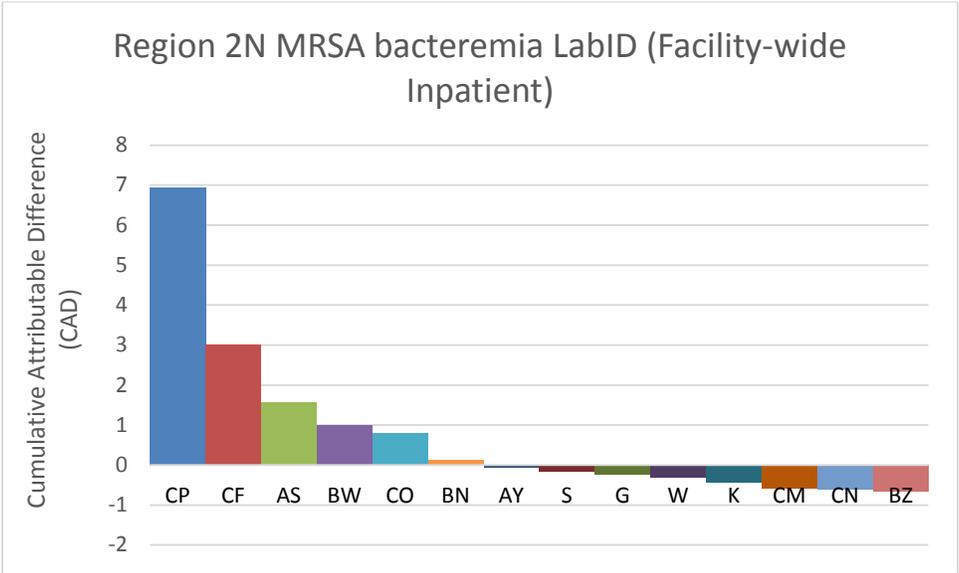
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Bar Graphs



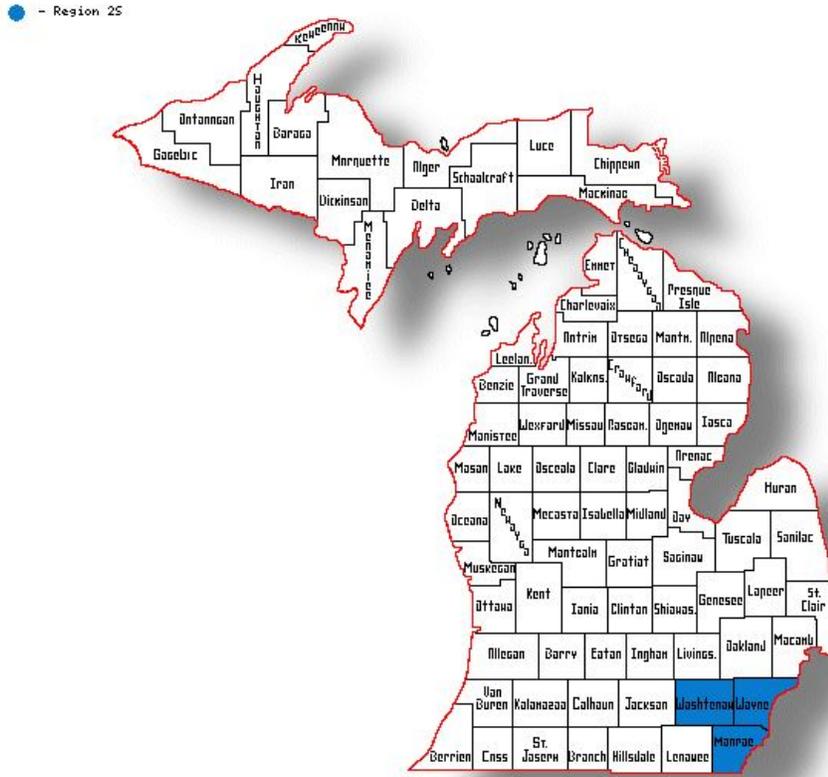






Michigan Region 2S
2015 Q1 Aggregate TAP Report

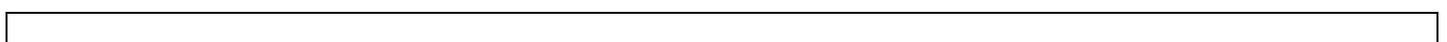
Michigan Department of Health and Human Services
 Surveillance for Healthcare-Associated and Resistant Pathogens (SHARP) Unit



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2015 Q1 Targeted Assessment for Prevention Report

NHSN Module	Number of Facilities	Location	SIR ¹	Significant (Y/N) ²	CAD ³	Prevented or Need to Prevent
CAUTI	16	All	0.8	Y	2.9	Need to Prevent
	16	ICU	0.6	----	-6.7	Prevented
	15	Ward	1	----	9.6	Need to Prevent
CLABSI	15	All	0.6	Y	9.7	Need to Prevent
	14	ICU	0.5	----	1.8	Need to Prevent
	13	Ward	0.7	----	10	Need to Prevent
	5	NICU	0.3	----	-2.1	Prevented
CDI	16	Facility-wide	1.11	N	120.80	Need to Prevent
MRSA Bac	16	Facility-wide	1.25	N	15.03	Need to Prevent
SSI COLO	14	----	0.82	N	1.38	Need to Prevent
SSI HYST	13	----	0.91	N	1.03	Need to Prevent

¹SIR: Standardized Infection Ratio: Ratio of observed events compared to the number of predicted events, accounting for unit type or other variables. An SIR of 1 can be interpreted as having the same number of events as predicted. An SIR that is between 0 and 1 represents fewer events than predicted, while an SIR of greater than 1 represents more events than predicted.

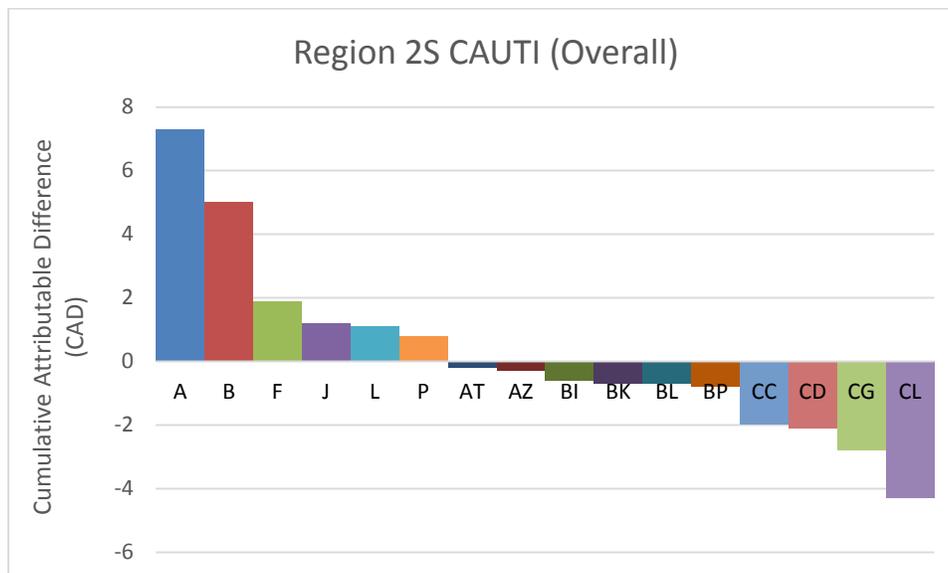
²Significant (Y/N). A Y indicates that, based on the p-value and 95% Confidence Interval (CI), the SIR is statistically significantly different than 1. An N indicates that, based on the p-value and 95% CI, the SIR is not statistically significantly different than 1 (expected). Significance testing was only performed on overall SIRs, not location-specific.

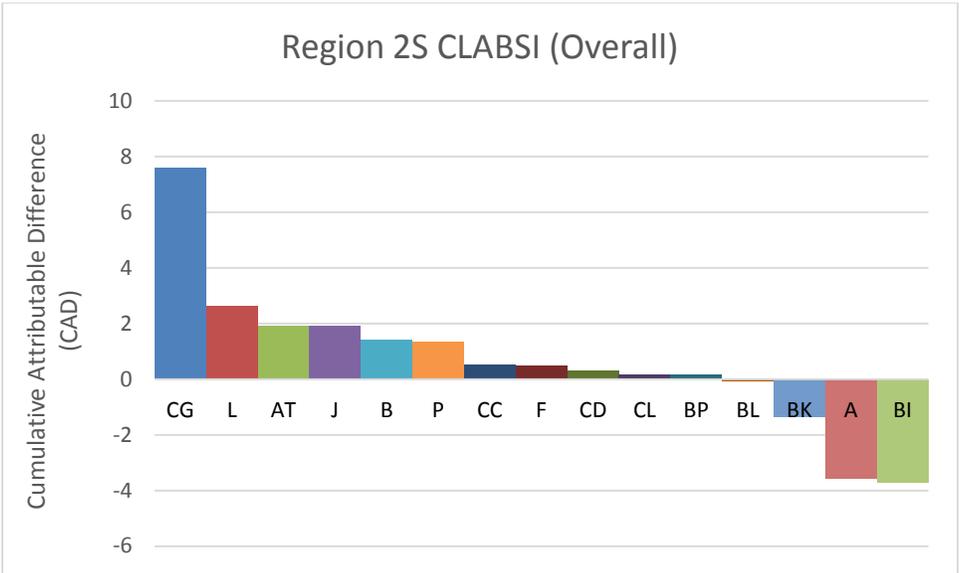
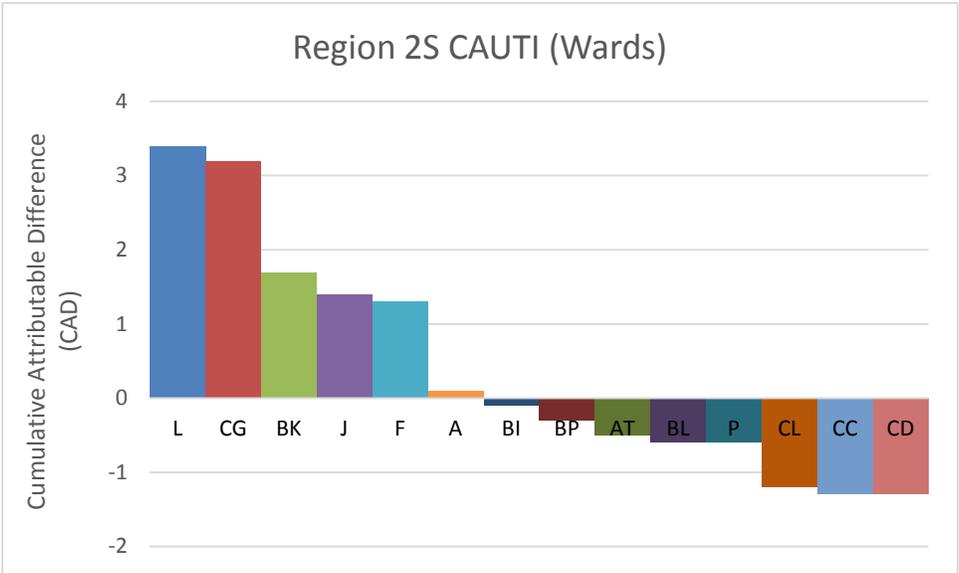
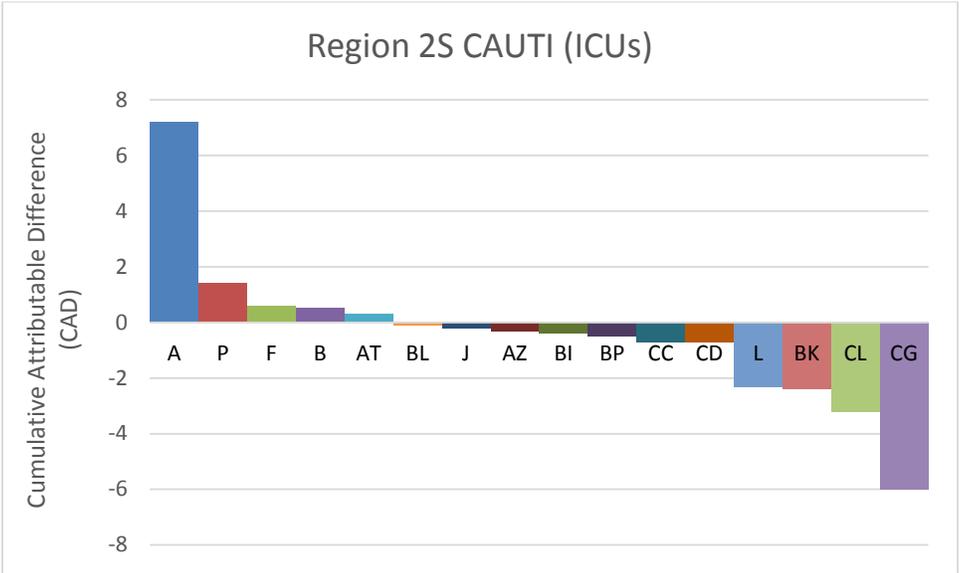
³CAD=Cumulative Attributable Difference. The number of infections that the region either needs to prevent to meet the HHS target or has prevented beyond the HHS target.

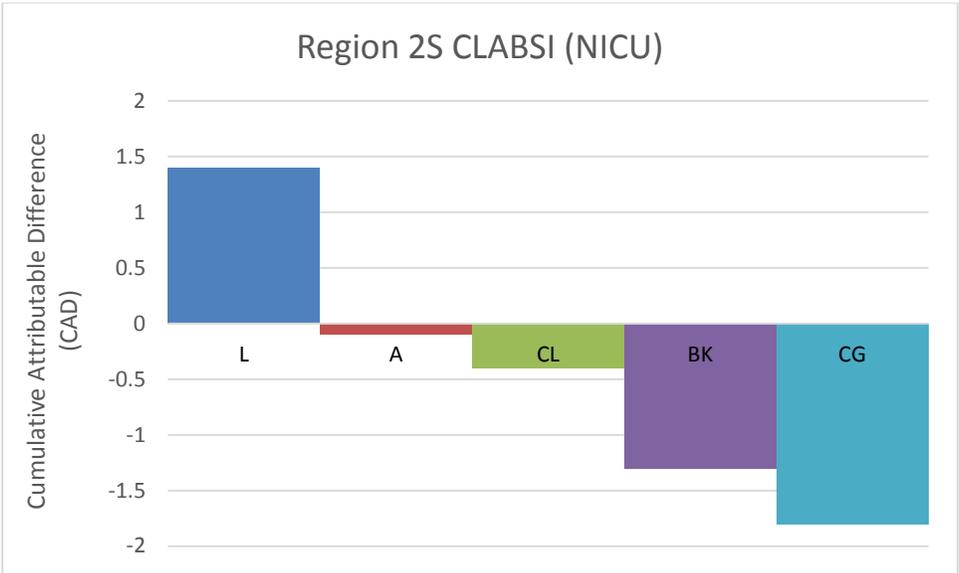
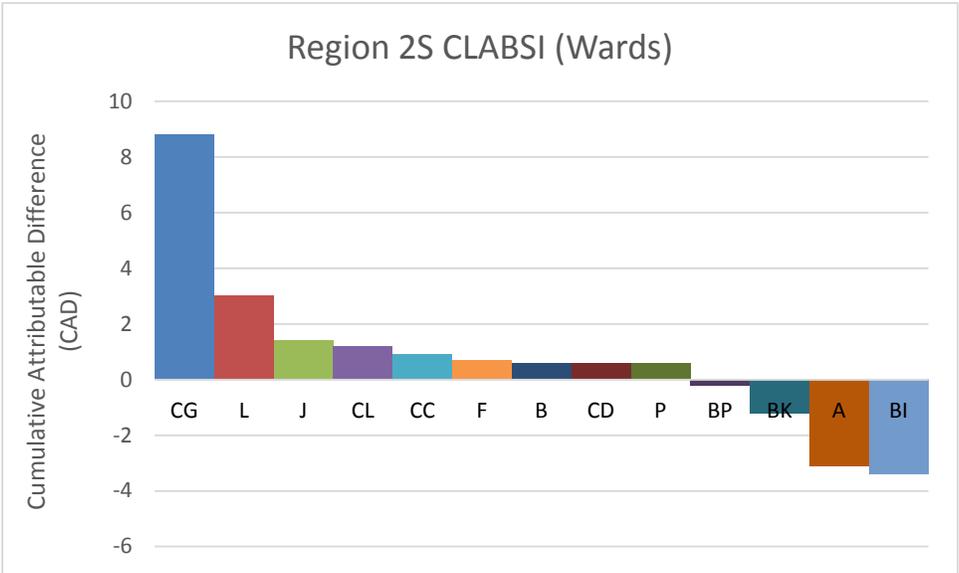
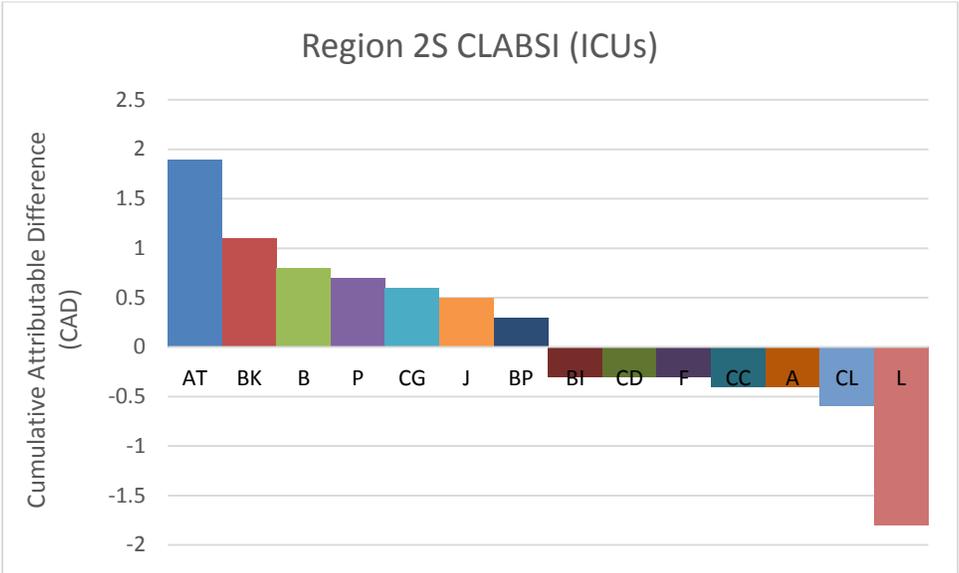
HHS CAUTI Target SIR = 0.75, HHS CLABSI Target SIR = 0.5, HHS CDI Target SIR = 0.7, HHS MRSA bacteremia Target SIR = 0.75, HHS SSI Target SIR = 0.75

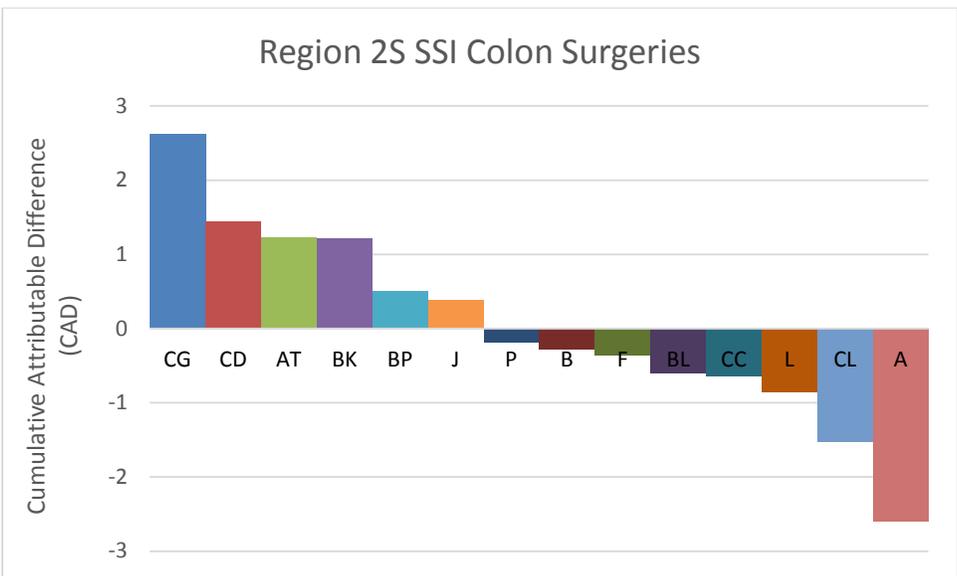
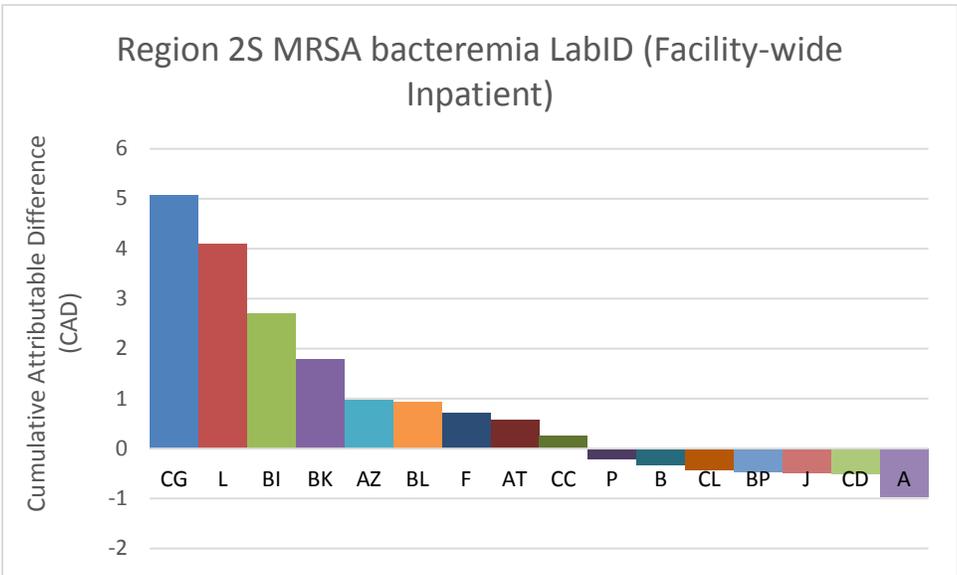
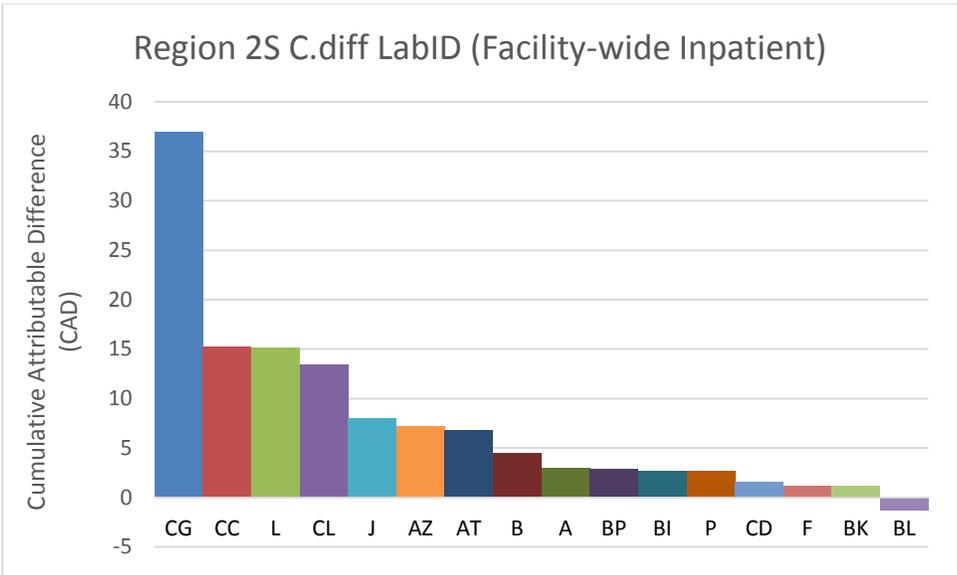
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Bar Graphs

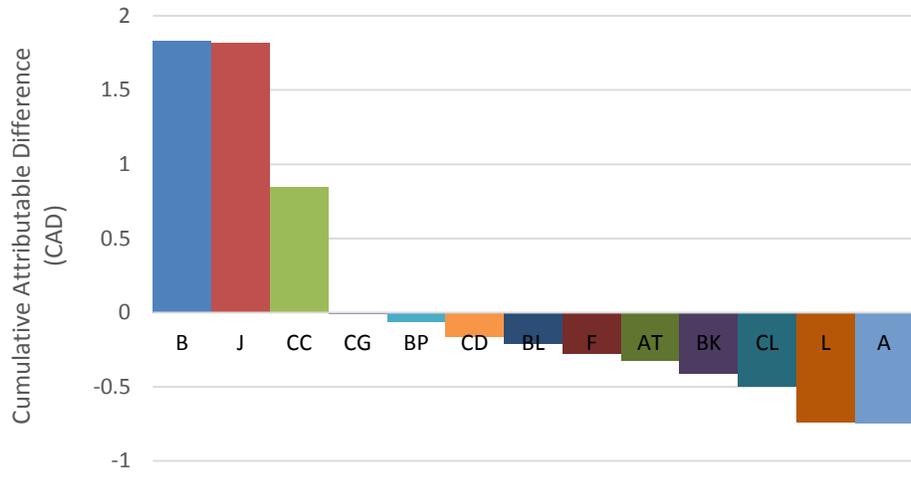








Region 2S SSI Abdominal Hysterectomies

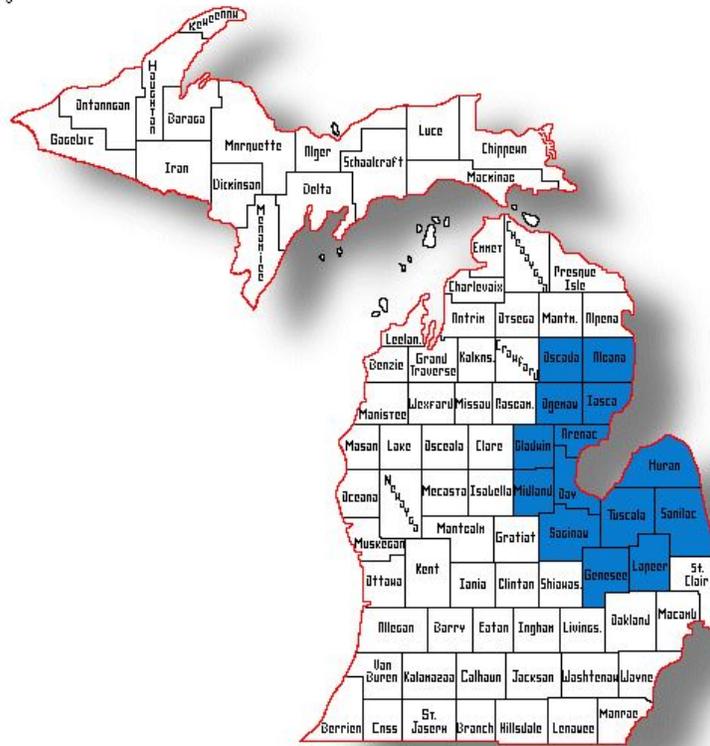


Michigan Region 3
2015 Q1 Aggregate TAP Report

Michigan Department of Health and Human Services
 Surveillance for Healthcare-Associated and Resistant Pathogens (SHARP) Unit



● - Region 3



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2015 Q1 Targeted Assessment for Prevention Report

NHSN Module	Number of Facilities	Location	SIR ¹	Significant (Y/N) ²	CAD ³	Prevented or Need to Prevent
CAUTI	13	All	0.6	Y	-10.1	Prevented
	12	ICU	0.6	----	-5.7	Prevented
	13	Ward	0.6	----	-4.5	Prevented
CLABSI	13	All	0.4	Y	-3.8	Prevented
	9	ICU	0.5	----	0.4	Need to Prevent
	10	Ward	0.3	----	-3.1	Prevented
	<5	NICU	----	----	----	----
CDI	13	Facility-wide	0.78	Y	8.46	Need to Prevent
MRSA Bac	13	Facility-wide	0.95	N	2.06	Need to Prevent
SSI COLO	12	----	0.9	N	1.70	Need to Prevent
SSI HYST	11	----	1.69	N	3.33	Need to Prevent

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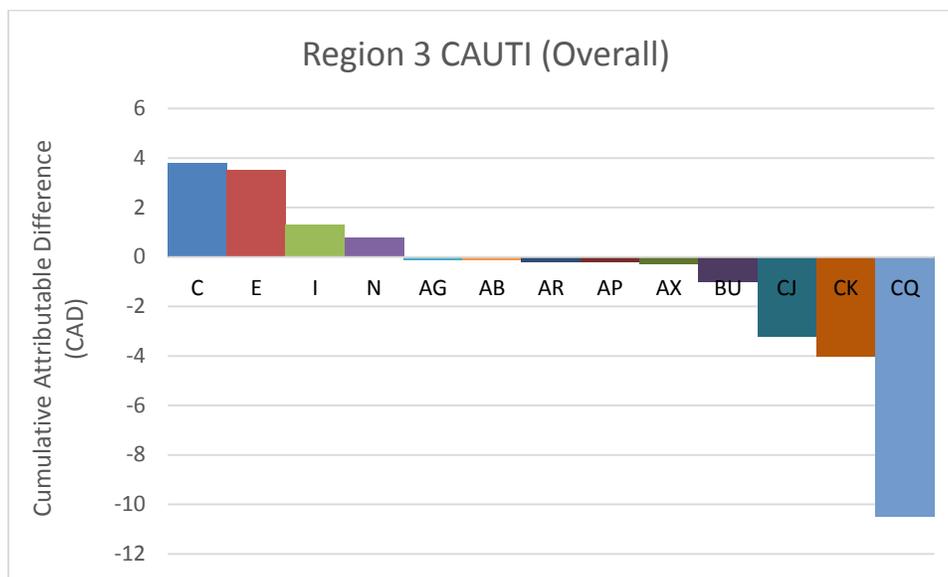
²Significant (Y/N). A Y indicates that, based on the p-value and 95% Confidence Interval (CI), the SIR is statistically significantly different than 1. An N indicates that, based on the p-value and 95% CI, the SIR is not statistically significantly different than 1 (expected). Significance testing was only performed on overall SIRs, not location-specific.

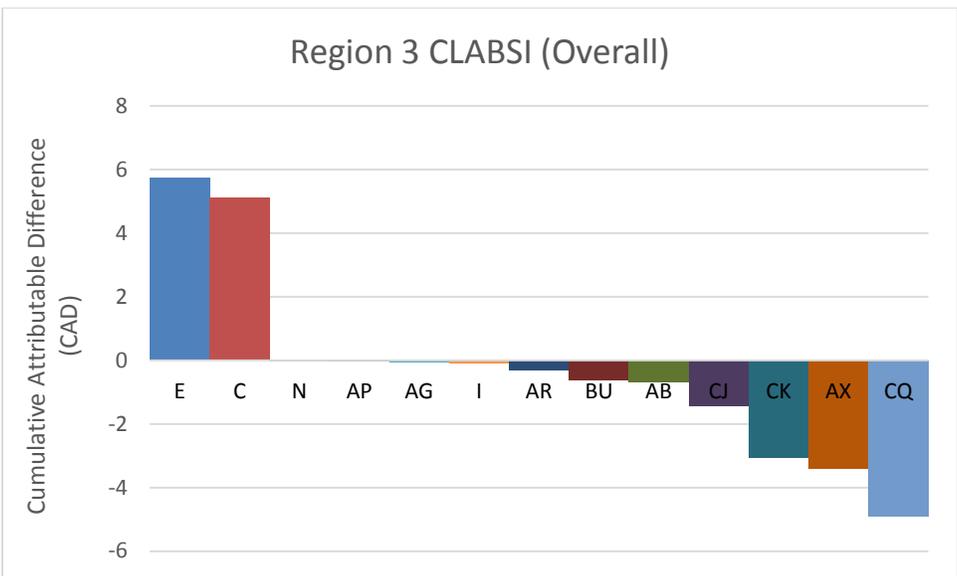
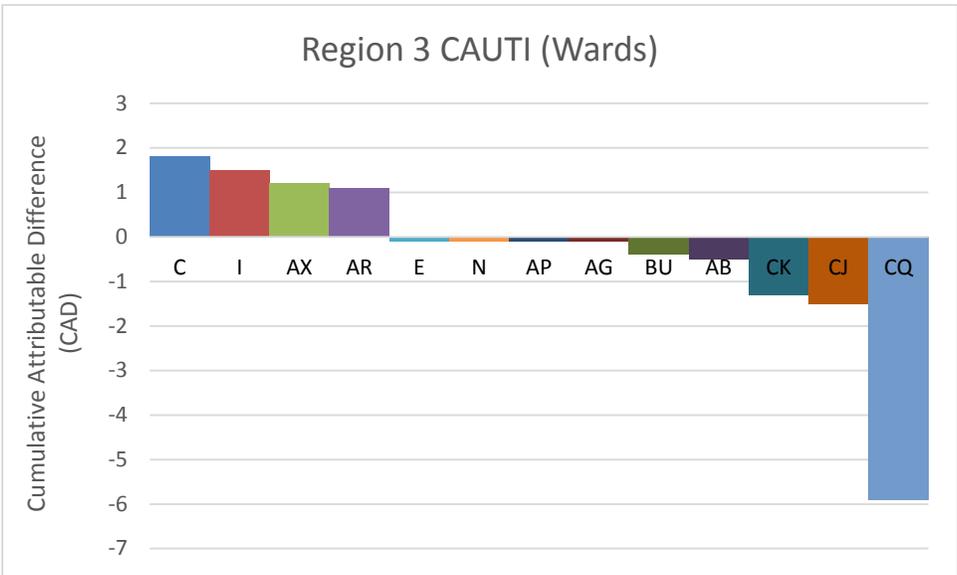
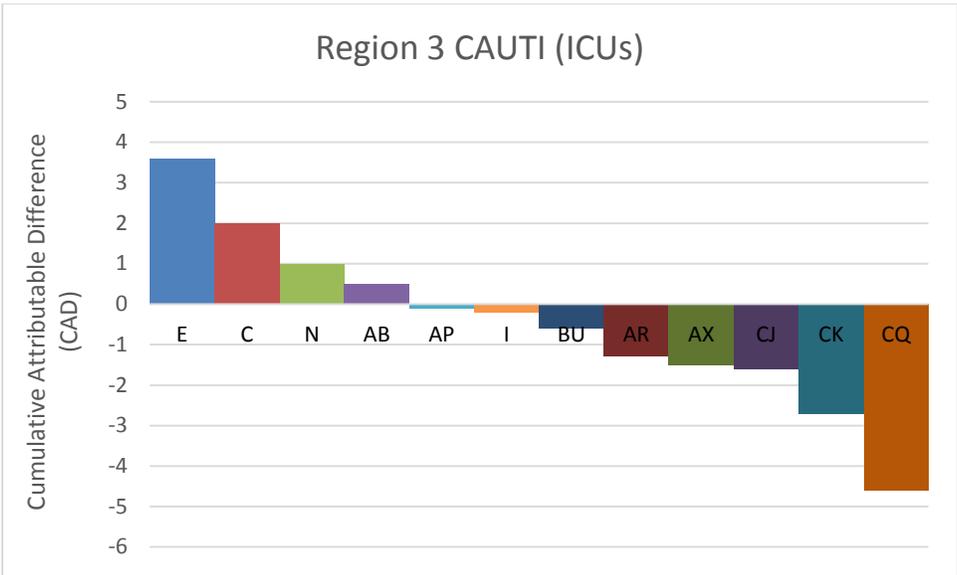
³CAD=Cumulative Attributable Difference. The number of infections that the region either needs to prevent to meet the HHS target or has prevented beyond the HHS target.

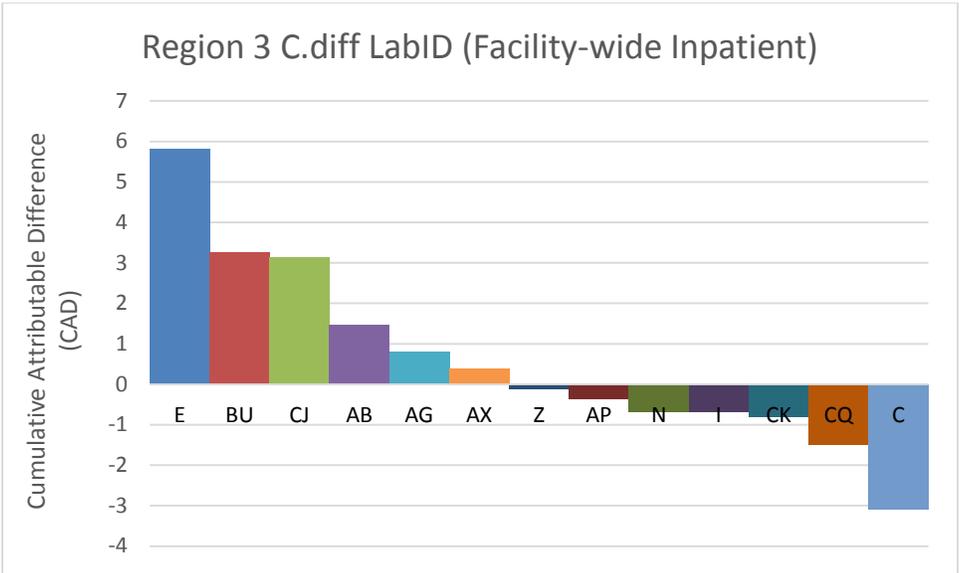
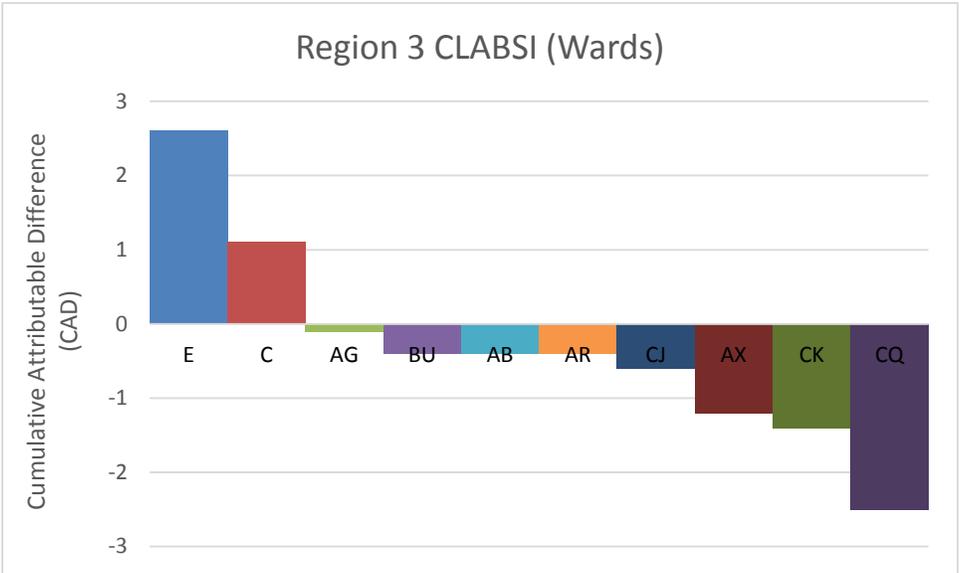
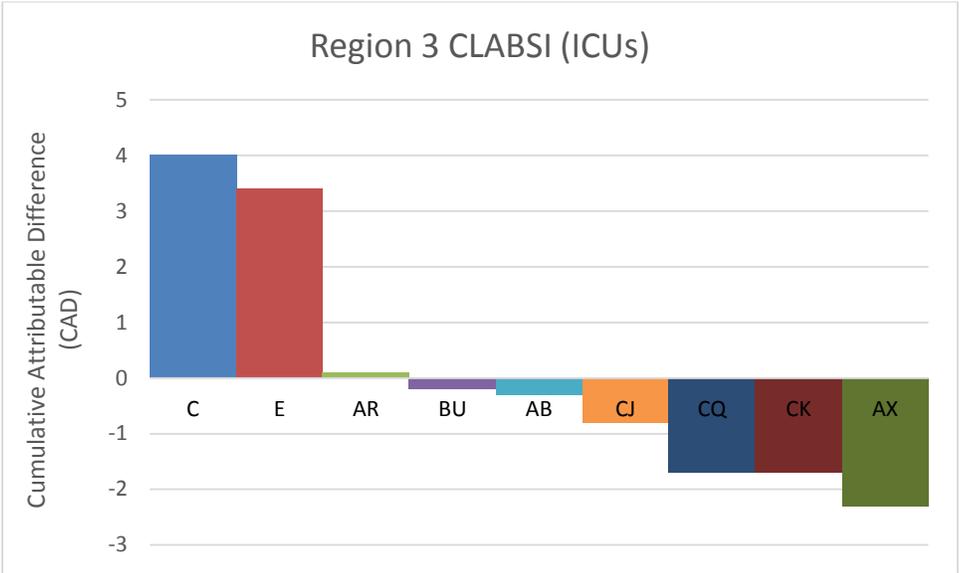
HHS CAUTI Target SIR = 0.75, HHS CLABSI Target SIR = 0.5, HHS CDI Target SIR = 0.7, HHS MRSA bacteremia Target SIR = 0.75, HHS SSI Target SIR = 0.75

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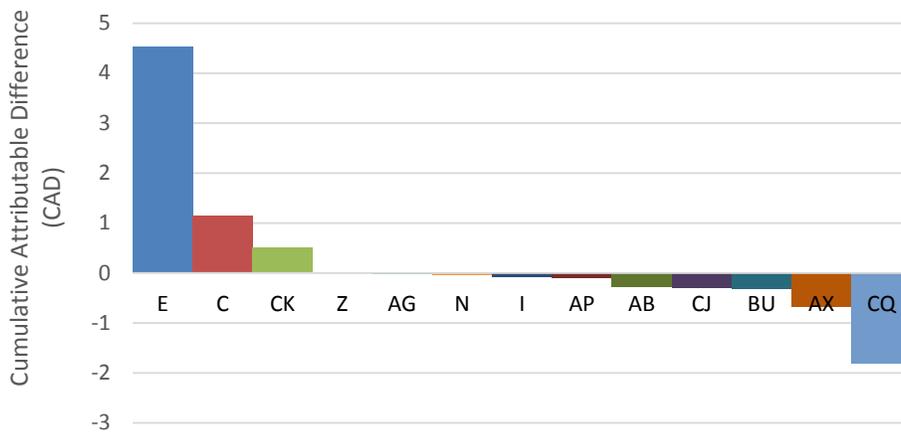
Bar Graphs



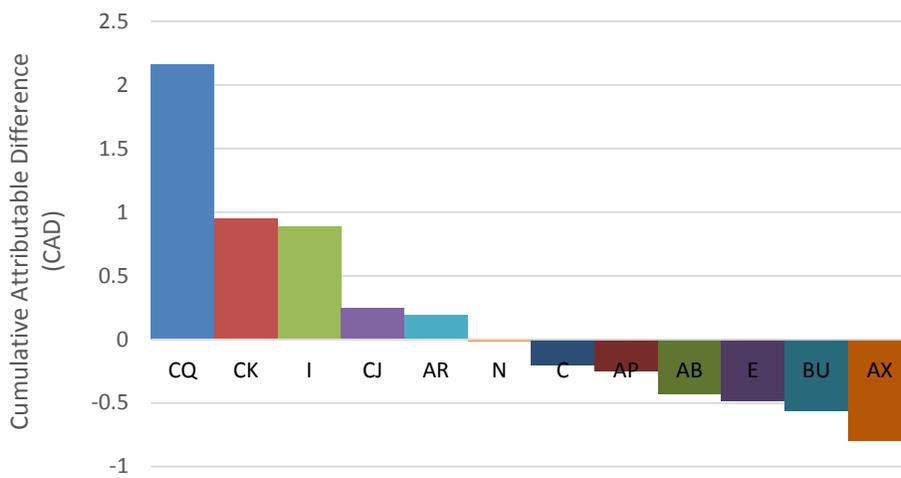




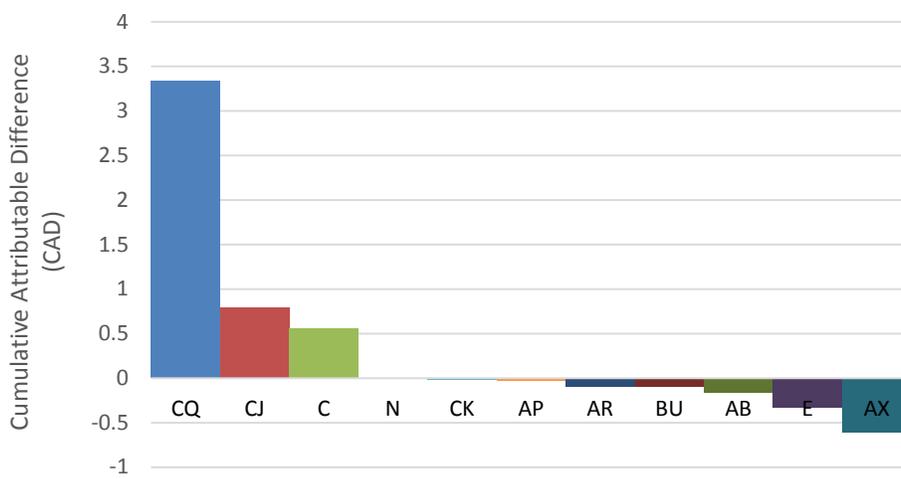
Region 3 MRSA bacteremia LabID (Facility-wide Inpatient)



Region 3 SSI Colon Surgeries

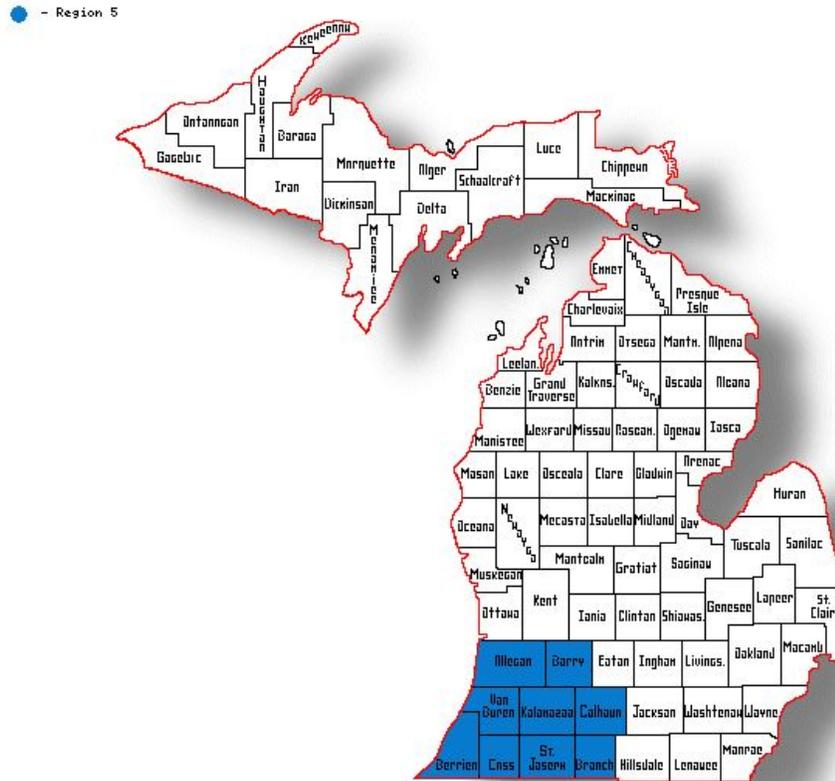


Region 3 SSI Abdominal Hysterectomies



Michigan Region 5
2015 Q1 Aggregate TAP Report

Michigan Department of Health and Human Services
 Surveillance for Healthcare-Associated and Resistant Pathogens (SHARP) Unit



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2015 Q1 Targeted Assessment for Prevention Report

NHSN Module	Number of Facilities	Location	SIR ¹	Significant (Y/N) ²	CAD ³	Prevented or Need to Prevent
CAUTI	9	All	0.7	N	-2.1	Prevented
	8	ICU	1	----	2.6	Need to Prevent
	9	Ward	0.4	----	-4.7	Prevented
CLABSI	9	All	0.3	Y	-3.5	Prevented
	5	ICU	0.1	----	-3.2	Prevented
	5	Ward	0.5	----	-0.3	Prevented
	<5	NICU	----	----	----	----
CDI	10	Facility-wide	0.7	Y	-0.017	Prevented
MRSA Bac	11	Facility-wide	0.201	Y	-2.731	Prevented
SSI COLO	8	----	2.051	Y	7.612	Need to Prevent
SSI HYST	8	----	0.693	N	-0.08	Prevented

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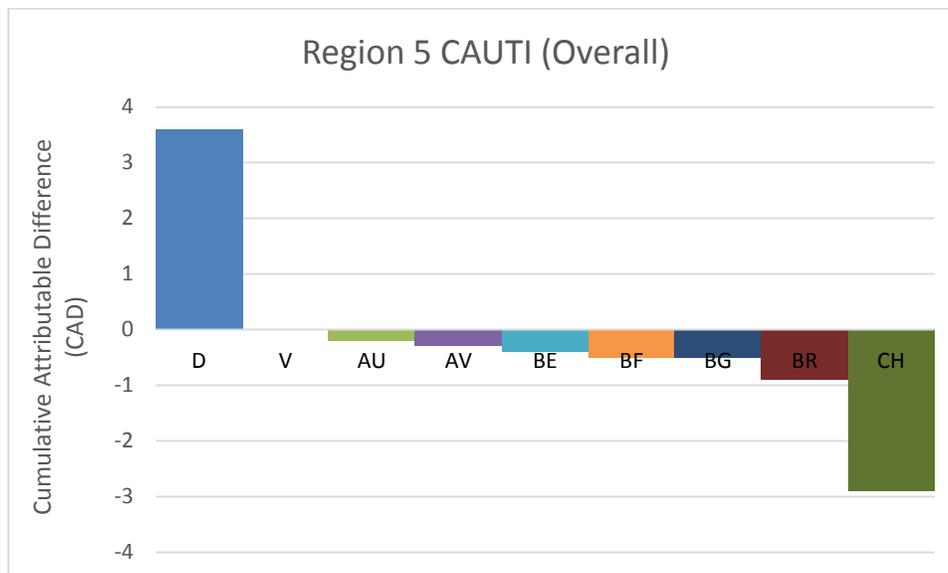
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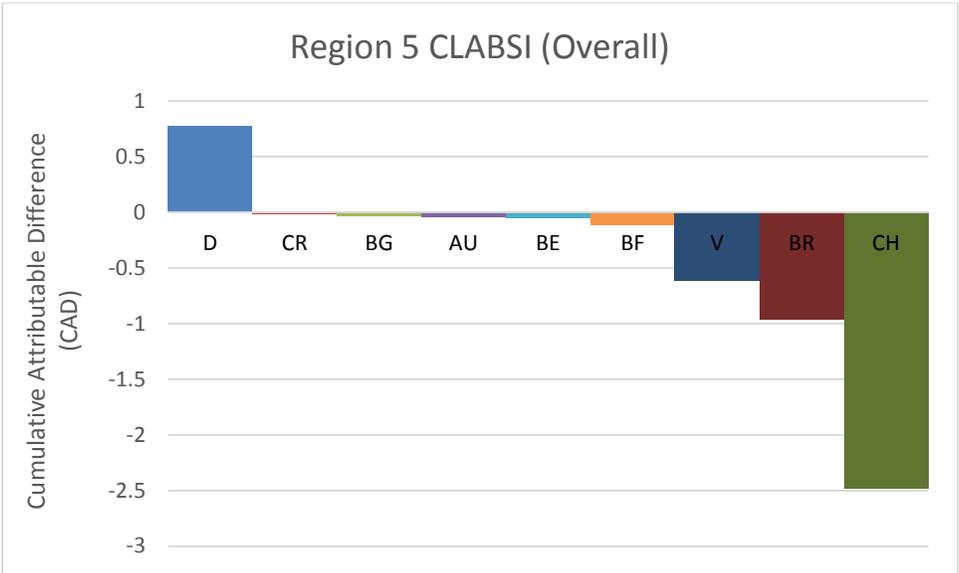
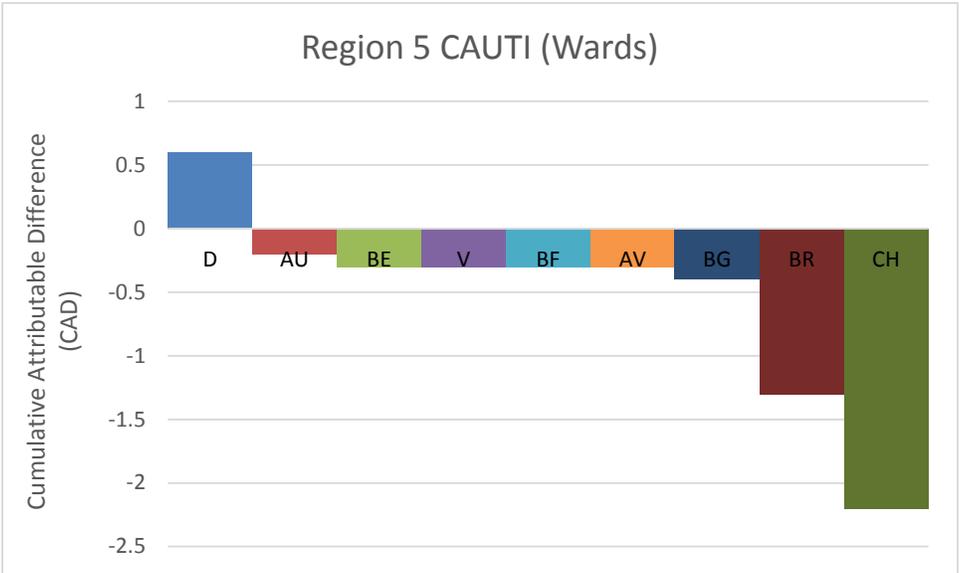
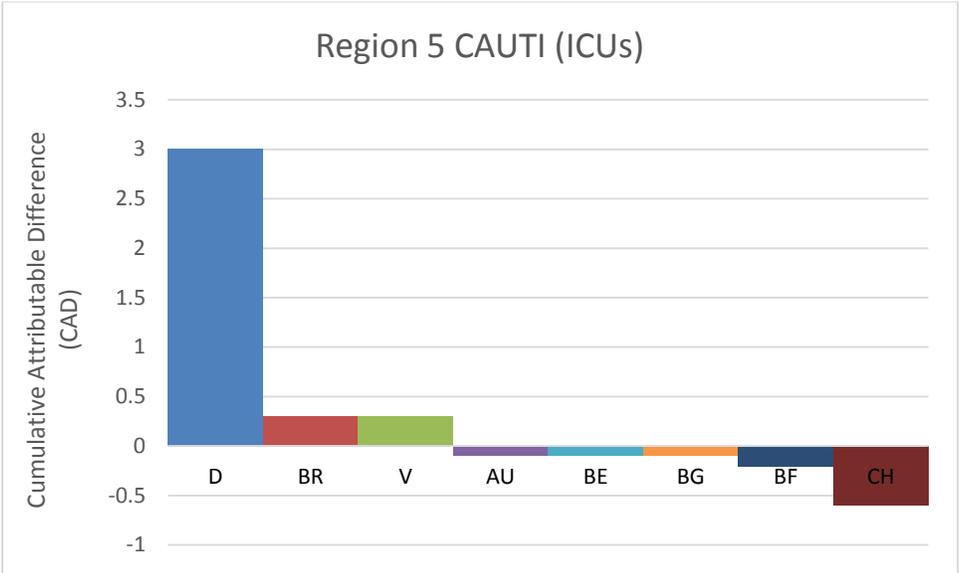
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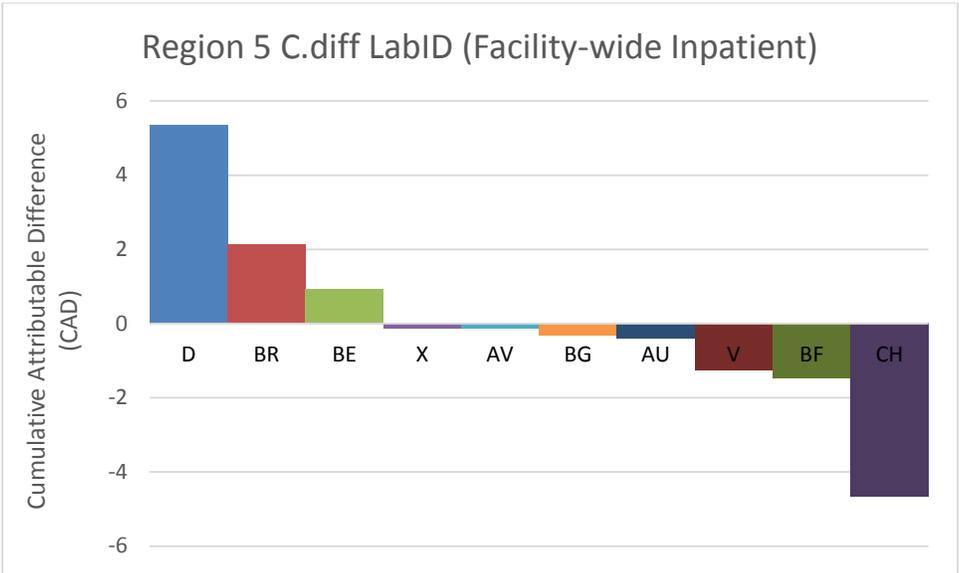
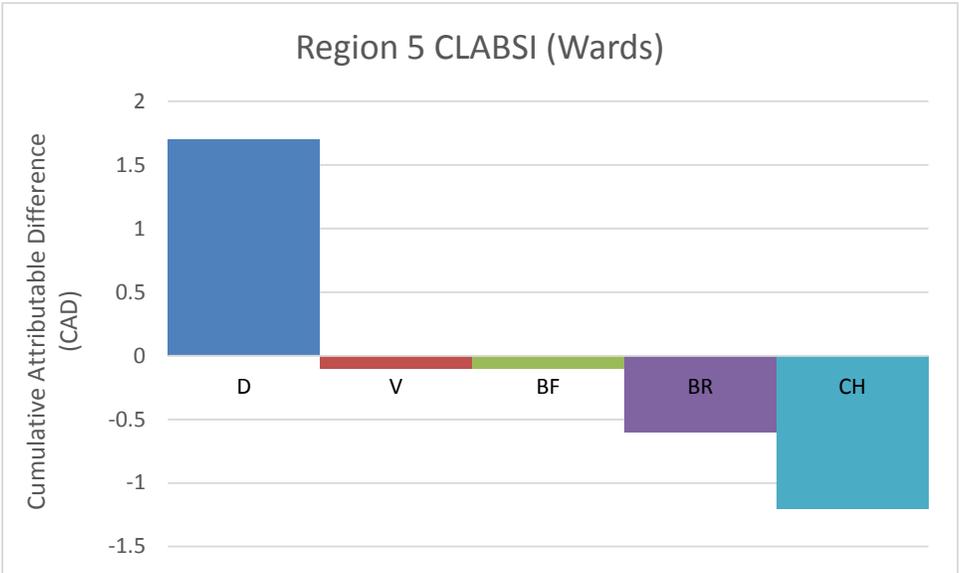
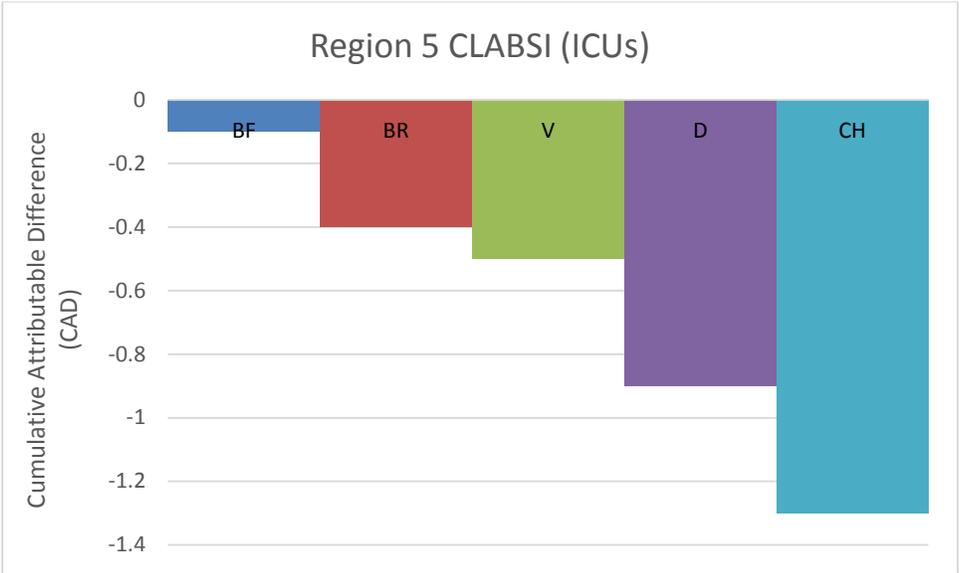
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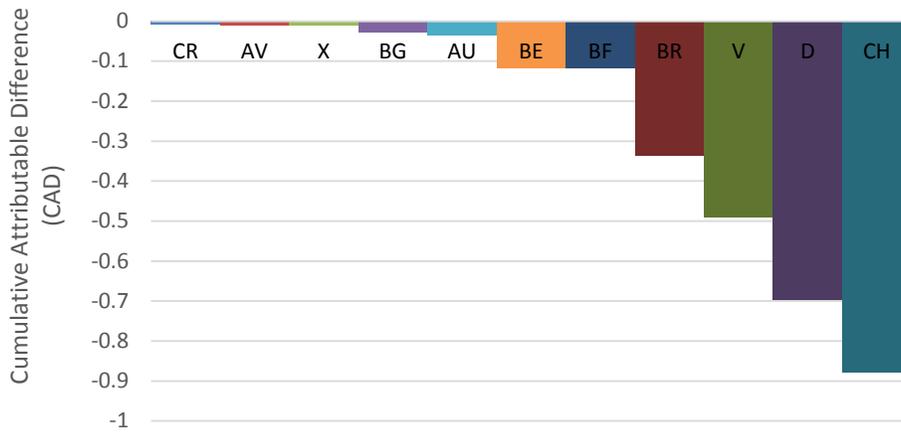
Bar Graphs



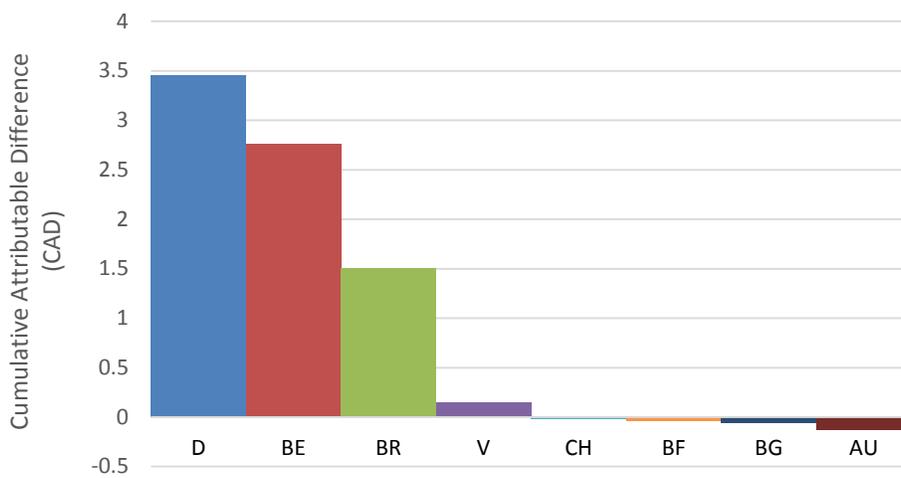




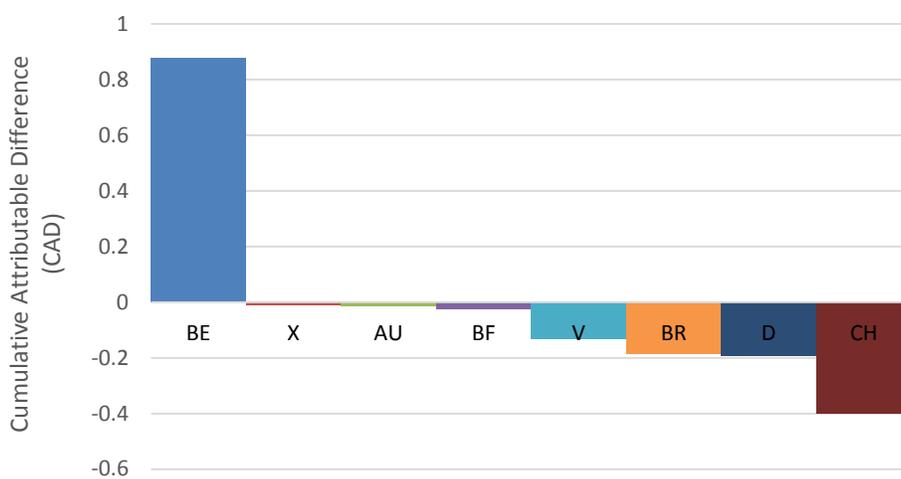
Region 5 MRSA bacteremia LabID (Facility-wide Inpatient)



Region 5 SSI Colon Surgeries



Region 5 SSI Abdominal Hysterectomies



2015 Q1 Targeted Assessment for Prevention Report

NHSN Module	Number of Facilities	Location	SIR ¹	Significant (Y/N) ²	CAD ³	Prevented or Need to Prevent
CAUTI	15	All	0.7	N	-2.1	Prevented
	10	ICU	0.9	----	2.8	Need to Prevent
	13	Ward	0.2	----	-4.9	Prevented
CLABSI	16	All	0.6	Y	3.5	Need to Prevent
	8	ICU	0.5	----	0	
	8	Ward	1	----	4.1	Need to Prevent
	<5	NICU	----	----	----	----
CDI	14	Facility-wide	0.748	Y	4.679	Need to Prevent
MRSA Bac	14	Facility-wide	0.351	Y	-3.410	Prevented
SSI COLO	14	----	1.426	N	7.112	Need to Prevent
SSI HYST	12	----	1.452	N	1.450	Need to Prevent

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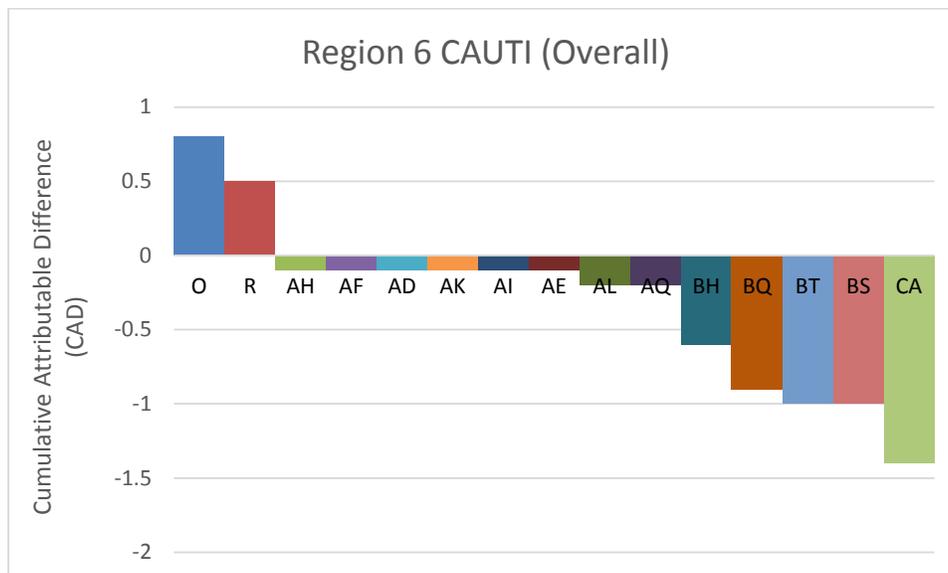
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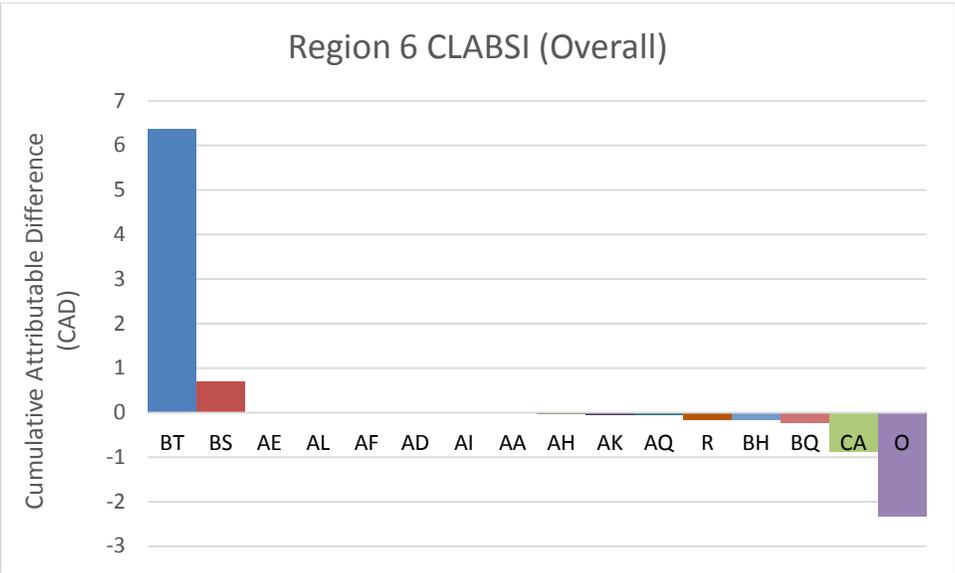
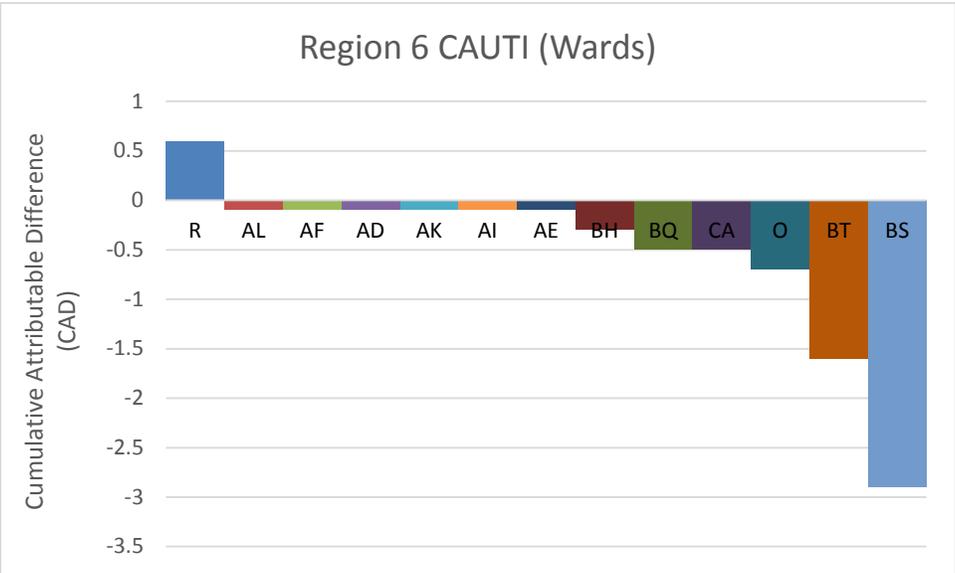
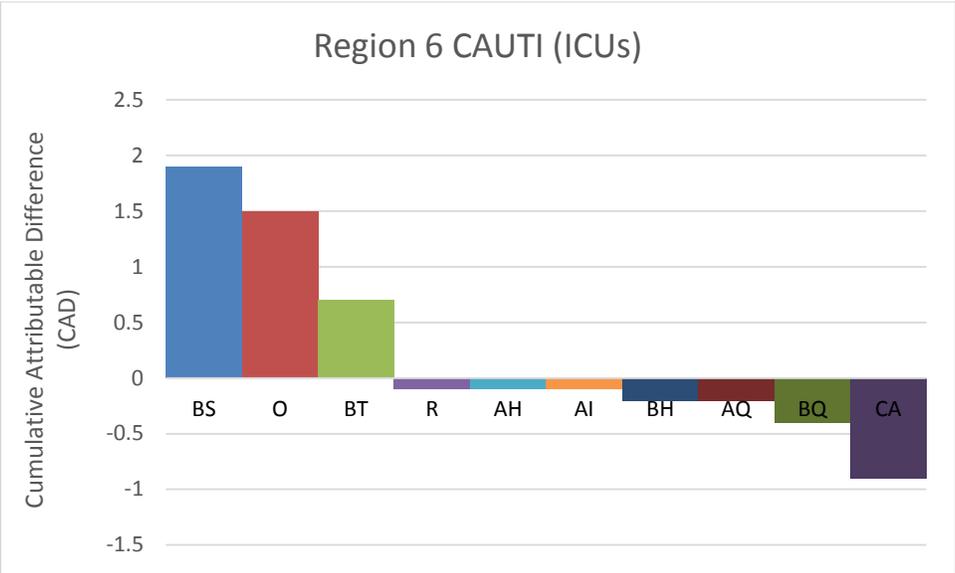
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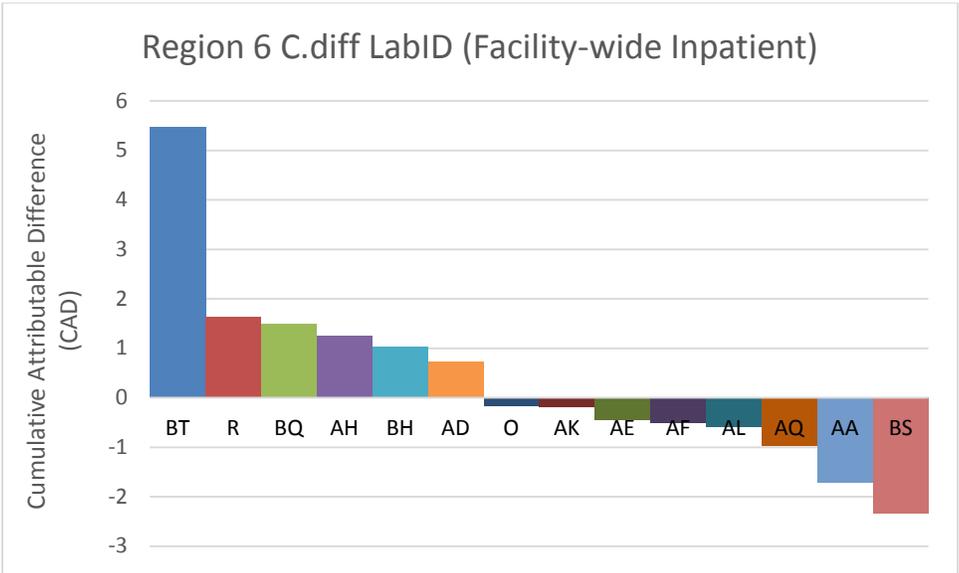
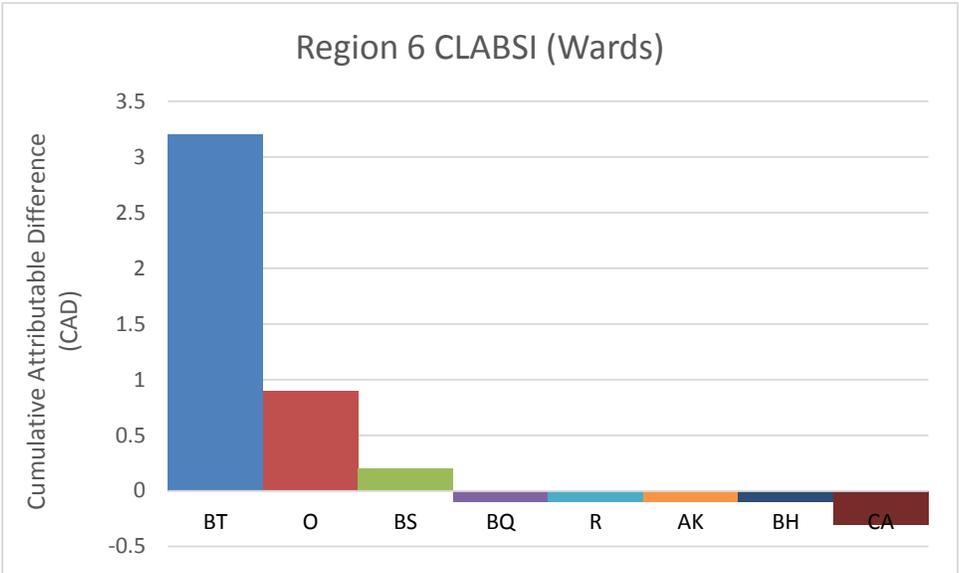
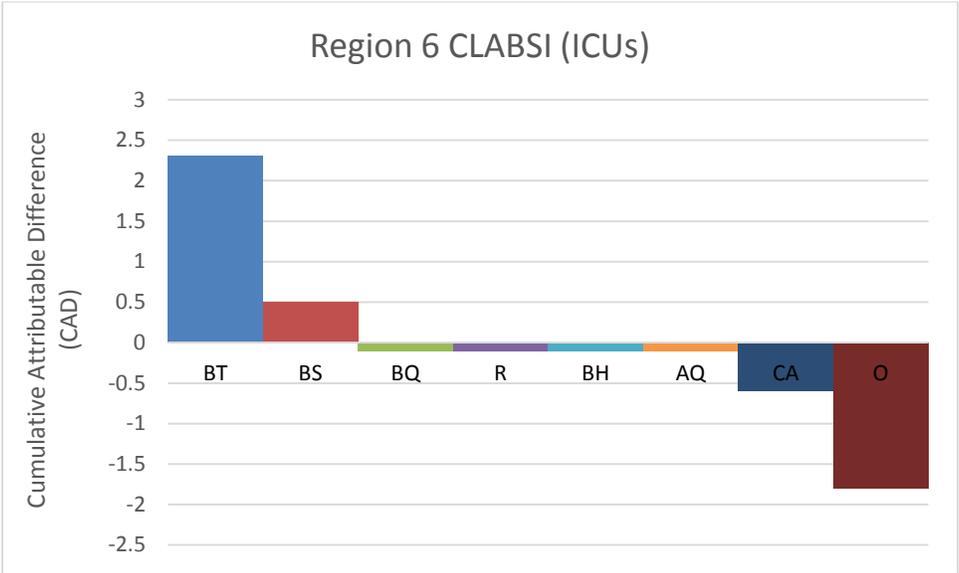
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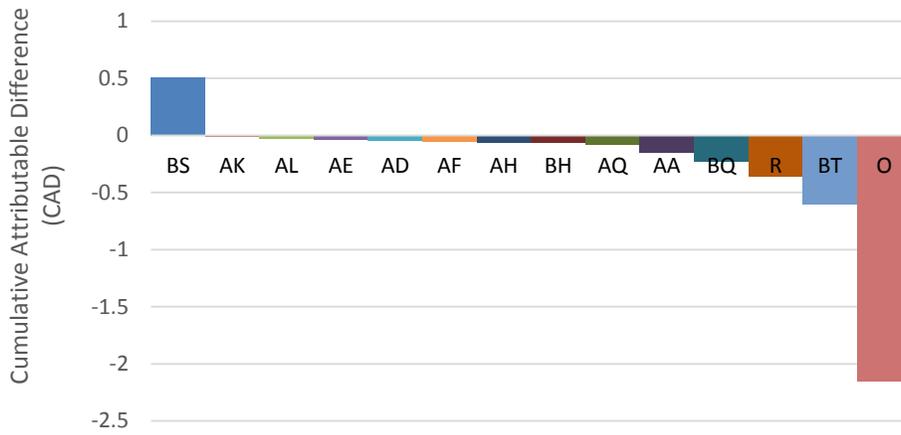
Bar Graphs



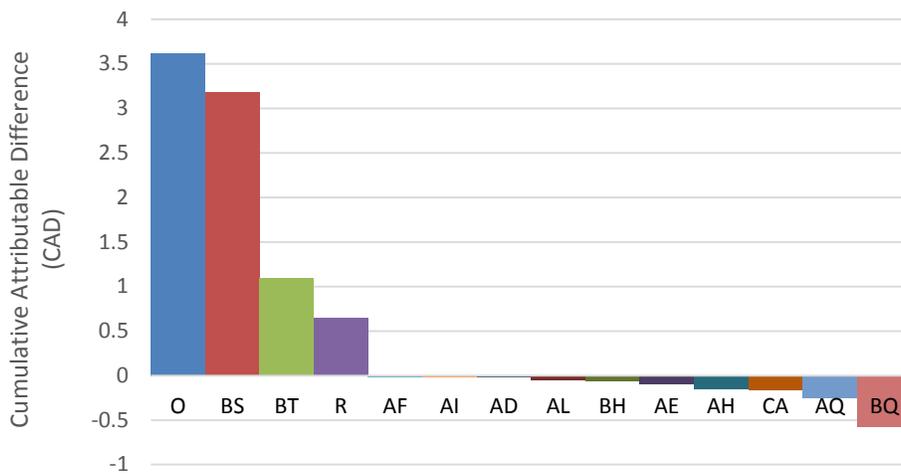




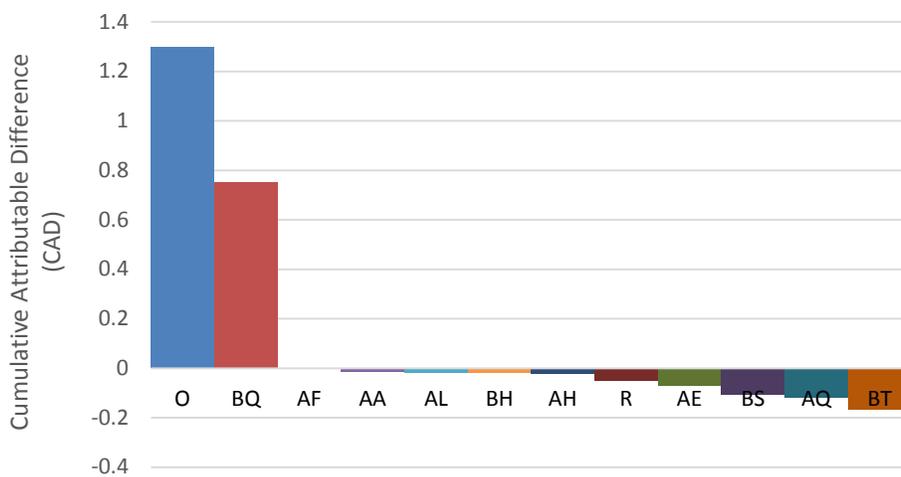
Region 6 MRSA bacteremia LabID (Facility-wide Inpatient)



Region 6 SSI Colon Surgeries



Region 6 SSI Abdominal Hysterectomies

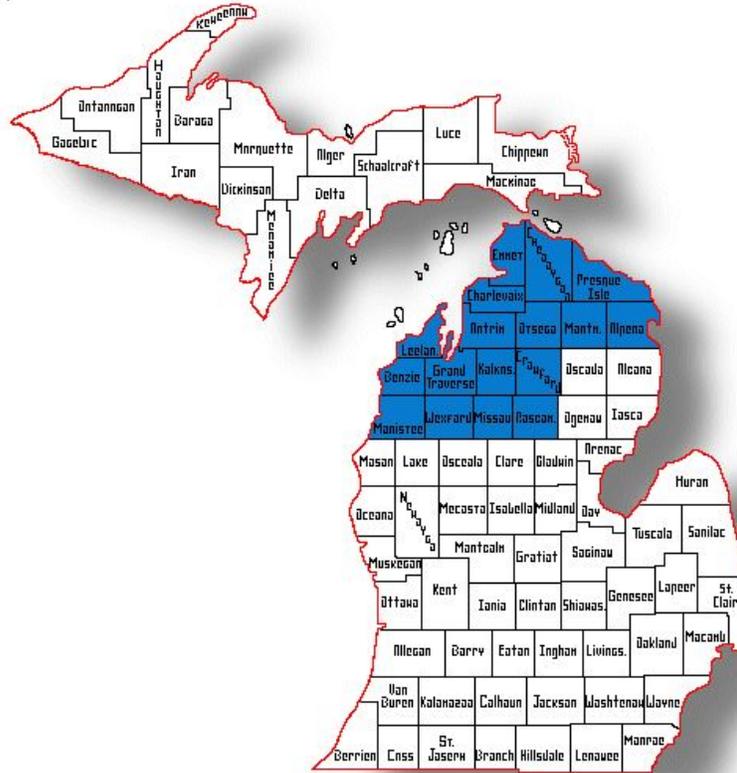


Michigan Region 7
2015 Q1 Aggregate TAP Report

Michigan Department of Health and Human Services
 Surveillance for Healthcare-Associated and Resistant Pathogens (SHARP) Unit



● - Region 7



The Michigan Department of Health and Human Services (MDHHS) Surveillance for Healthcare-Associated and Resistant Pathogens (SHARP) Unit began including the new targeted assessment for prevention (TAP) reports in the 2014 annual statewide aggregate report. Beginning with this 2015 Quarter 1 report, individual, regional, and statewide TAP reports will be provided quarterly.

This report shows modules and locations where the specified region either needs to focus additional prevention efforts, or is excelling in infection prevention. The table presents a cumulative attributable difference (CAD) determined using the HHS target standardized infection ratios (SIRs) for each module. Numbers in red show how many infections the region needs to prevent quarterly in order to reach the HHS target SIR. Numbers in green show the number of infections prevented beyond what was expected for the region according to the HHS target SIR. A corresponding SIR for each module and location are provided as well.

Bar graphs containing CAD values from all letter-coded SHARP-participating hospitals in the region by module and location are available below. These graphs allow each facility in the region to view their rank within each module and location compared to other nearby facilities. Hospital letters are provided in password-protected individual TAP reports. A CAD greater than zero indicates the number of infections a facility needs to prevent to achieve the HHS Target SIR for that module. A number less than zero indicates the number of infections a facility prevented beyond what was expected based on the HHS Target SIR.



2015 Q1 Targeted Assessment for Prevention Report

NHSN Module	Number of Facilities	Location	SIR ¹	Significant (Y/N) ²	CAD ³	Prevented or Need to Prevent
CAUTI	7	All	0.7	N	-1.2	Prevented
	6	ICU	1.3	----	2	Need to Prevent
	7	Ward	0.4	----	-3.2	Prevented
CLABSI	7	All	0.9	N	3.3	Need to Prevent
	<5	ICU	----	----	----	----
	<5	Ward	----	----	----	----
	<5	NICU	----	----	----	----
CDI	7	Facility-wide	0.937	N	7.848	Need to Prevent
MRSA Bac	7	Facility-wide	0	N	-1.765	Prevented
SSI COLO	7	----	0.982	N	1.181	Need to Prevent
SSI HYST	7	----	.	N	0.295	Need to Prevent

¹SIR: Standardized Infection Ratio: Ratio of observed events compared to the number of predicted events, accounting for unit type or other variables. An SIR of 1 can be interpreted as having the same number of events as predicted. An SIR that is between 0 and 1 represents fewer events than predicted, while an SIR of greater than 1 represents more events than predicted.

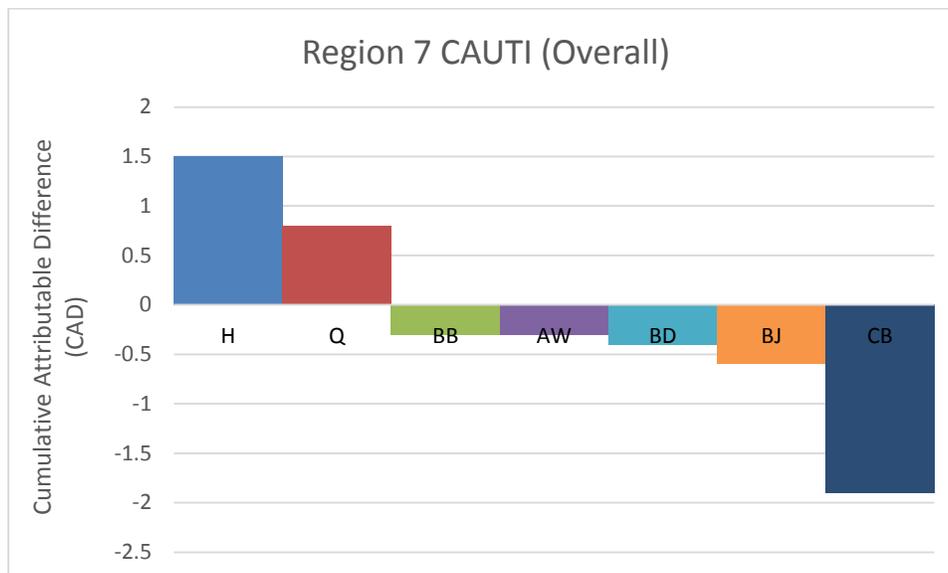
²Significant (Y/N). A Y indicates that, based on the p-value and 95% Confidence Interval (CI), the SIR is statistically significantly different than 1. An N indicates that, based on the p-value and 95% CI, the SIR is not statistically significantly different than 1 (expected). Significance testing was only performed on overall SIRs, not location-specific.

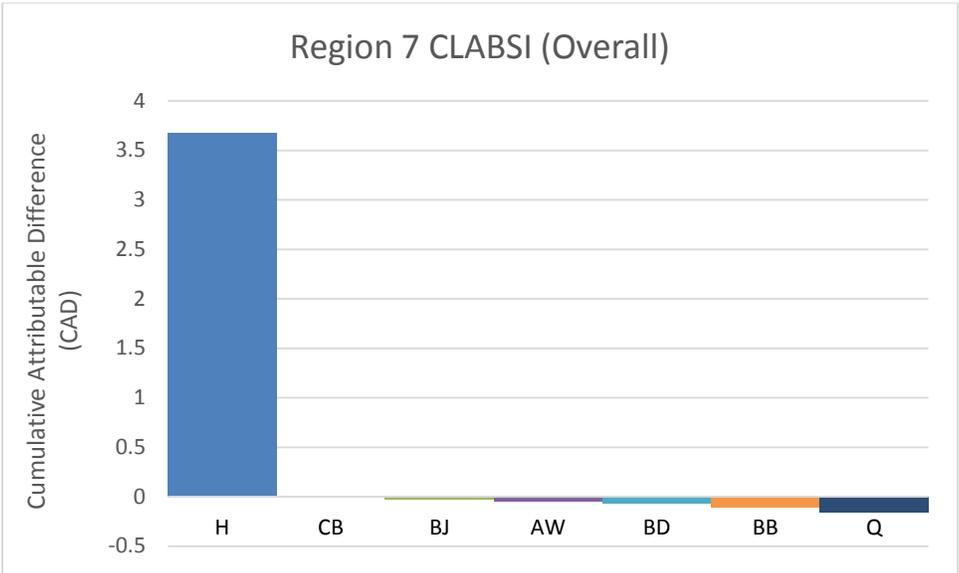
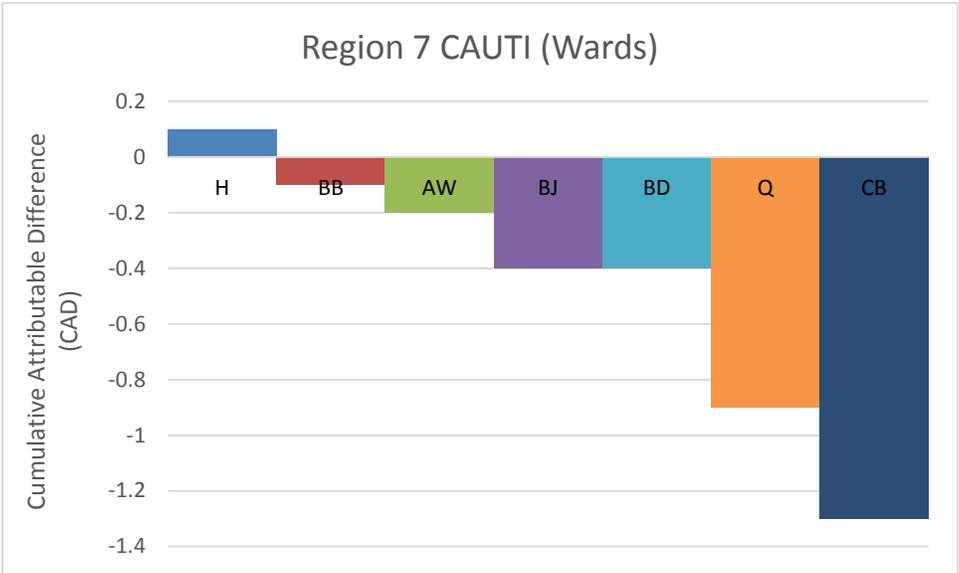
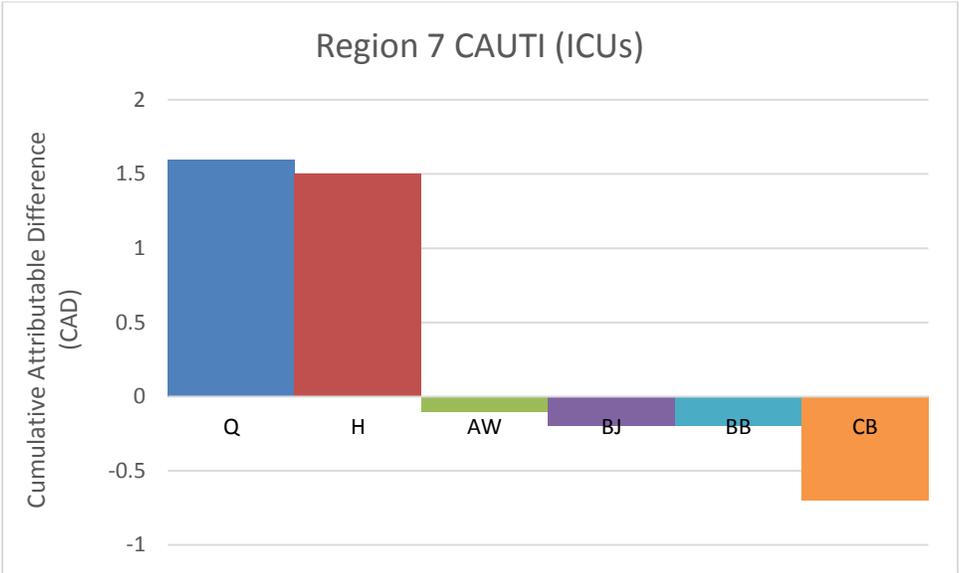
³CAD=Cumulative Attributable Difference. The number of infections that the region either needs to prevent to meet the HHS target or has prevented beyond the HHS target.

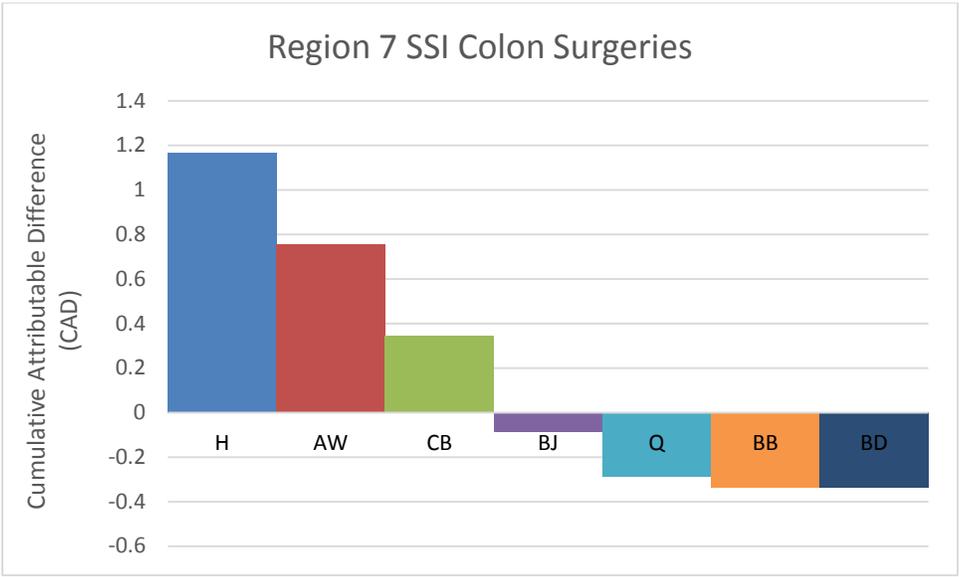
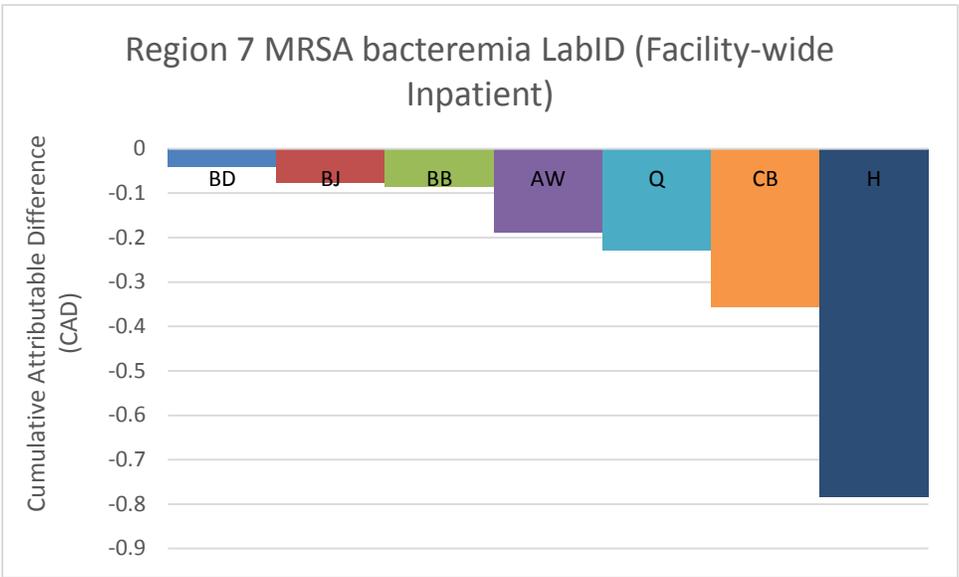
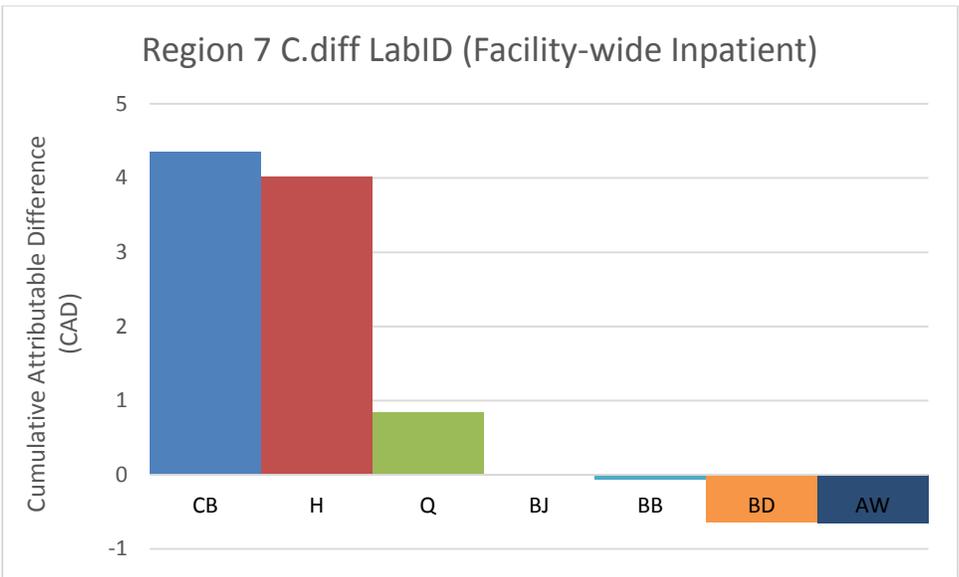
HHS CAUTI Target SIR = 0.75, HHS CLABSI Target SIR = 0.5, HHS CDI Target SIR = 0.7, HHS MRSA bacteremia Target SIR = 0.75, HHS SSI Target SIR = 0.75

Please contact Allie Murad at murada@michigan.gov with questions, comments, or suggestions. All aggregate reports are posted at www.michigan.gov/hai.

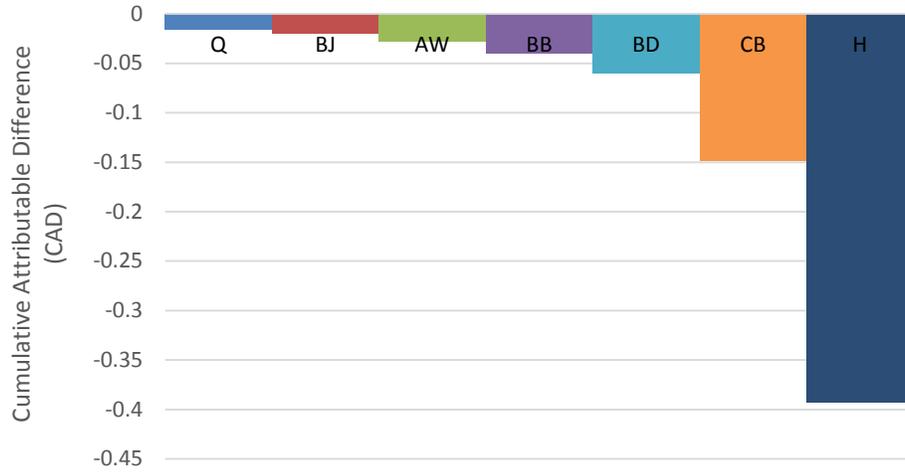
Bar Graphs





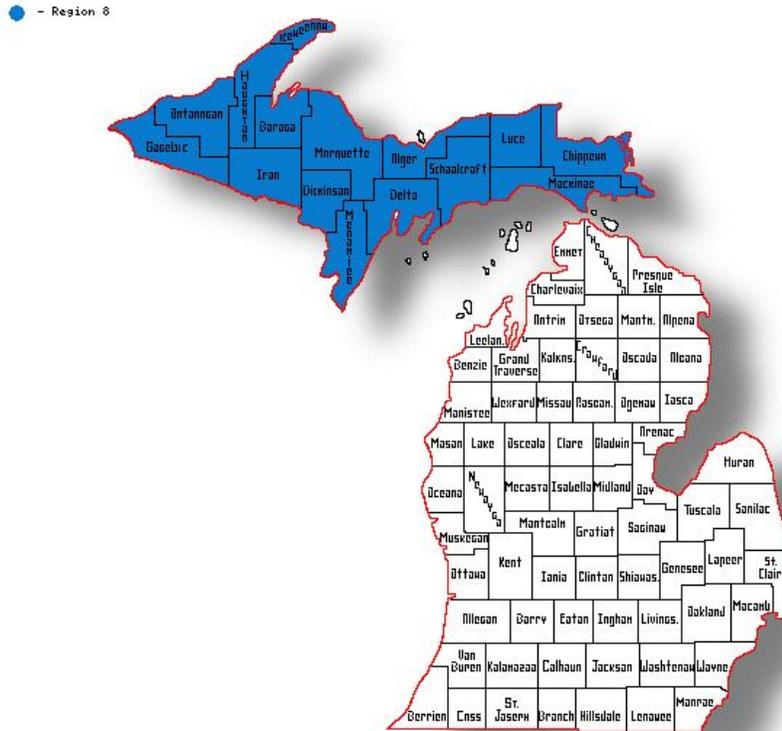


Region 7 SSI Abdominal Hysterectomies



Michigan Region 8
2015 Q1 Aggregate TAP Report

Michigan Department of Health and Human Services
 Surveillance for Healthcare-Associated and Resistant Pathogens (SHARP) Unit



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2015 Q1 Targeted Assessment for Prevention Report

NHSN Module	Number of Facilities	Location	SIR ¹	Significant (Y/N) ²	CAD ³	Prevented or Need to Prevent
CAUTI	6	All	0.6	N	-0.6	Prevented
	<5	ICU	----	----	----	----
	6	Ward	0.8	----	0.1	Need to Prevent
CLABSI	5	All	0.5	N	0.1	Need to Prevent
	<5	ICU	----	----	----	----
	<5	Ward	----	----	----	----
	<5	NICU	----	----	----	----
CDI	<5	Facility-wide	----	----	----	----
MRSA Bac	<5	Facility-wide	----	----	----	----
SSI COLO	5	----	0	----	-1.571	Prevented
SSI HYST	<5	----	----	----	----	----

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²Significant (Y/N). A Y indicates that, based on the p-value and 95% Confidence Interval (CI), the SIR is statistically significantly different than 1. An N indicates that, based on the p-value and 95% CI, the SIR is not statistically significantly different than 1 (expected). Significance testing was only performed on overall SIRs, not location-specific.

³CAD=Cumulative Attributable Difference. The number of infections that the region either needs to prevent to meet the HHS target or has prevented beyond the HHS target.

HHS CAUTI Target SIR = 0.75, HHS CLABSI Target SIR = 0.5, HHS CDI Target SIR = 0.7, HHS MRSA bacteremia Target SIR = 0.75, HHS SSI Target SIR = 0.75

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Bar Graphs

