

NHSN Users Group Meeting

June 25th, 2025



Welcome!

The HAI Epidemiology Unit

- Elli Stier – Unit Manager
- Anne Haddad – AMS Coordinator
- Sarmed Rezzo – LTC Epidemiologist
- Susan Catlin – HAI Epidemiologist
- Brooke Heidenga – HAI Epidemiologist
- Shruthi Degala – HAI Epidemiologist
- Niki Mach – MDRO Epidemiologist
- Allison Pall – iEC Surveillance Coordinator (EIP)
- Kyle Muchez – NHSN Epidemiologist

Agenda

- Welcome & Introductions
- NHSN 2022 Rebaselining Updates
- NHSN HAI Data
- State HAI Reduction Initiative: Device Reprocessing
- *Candida auris* Surveillance Report
- Questions/Discussion

Rebaseline 2022

It's here!



Rebaselining

Why is it important to Rebaseline?

- As a nation, we are getting better at surveillance and prevention of HAIs, and creating a new baseline, also called rebaseline, is a way to incorporate changes in detection practices and establish an updated national standard to continue prevention and reduction of HAIs.

What is Rebaselining?

- The process of updating the national incidence data that are best captured in an array of models. These models allow [efficient estimation of predicted events](#) that are required as the denominator and used to calculate NHSN's SIR and SUR metrics. This next rebaseline will enable facility HAI and device utilization incidence data to be compared to [2022 NHSN data](#) as the newest baseline year.

Standardized Infection Ratio (SIR)

Just a quick refresher!

- $SIR = \text{Observed Infections} / \text{Predicted Infections}$
- If $SIR = 1.0 \rightarrow$ Observed infections match national expectations
- If $SIR > 1.0 \rightarrow$ More infections than predicted
- If $SIR < 1.0 \rightarrow$ Fewer infections than predicted
- Predicted infections depend on national data from the baseline year

What Changed?

- Broader national data: more hospitals (including smaller and critical access) reporting to NHSN
- Enhanced risk adjustment: bed size, ICU type, teaching status, and location-specific factors now included
- Improved electronic surveillance means more complete reporting
- Definition changes: e.g., CAUTI and C. diff criteria updated

<https://www.cdc.gov/nhsn/pdfs/rebaseline/22-Rebaseline-FAQs-Final-Version.pdf>

How This Affects Michigan Hospitals

- Michigan hospitals likely to see changes to SIR, infection counts will remain stable
- Smaller and community hospitals may see larger shifts due to model changes
- Consider focusing on **SIR trends** when reviewing data from both baselines, not single-year SIR comparisons

Why SIRs Are Changing

- Observed infections may stay the same
- Predicted infections drop due to national prevention success and lower device use
- This leads to a what appears to be a higher SIR, when compared to 2015 benchmarks, even if performance didn't decline
- Example:
 - Observed = 6, Predicted (2015) = 10 → SIR = 0.60
 - Observed = 6, Predicted (2022) = 4.5 → SIR = 1.33
- Hospitals with strong data submission may see larger shifts in SIRs due to stronger benchmarks
- Small rural/critical access hospitals may be affected by new model stratifications

Analyzing SIRs from different baselines

- Your facility may want to look at SIRs under both baselines side-by-side
 - Do not plot them together, as SIRs from different baselines **are not comparable**
- The SIRs from the 2022 baseline must be interpreted under different context
 - Clearly label SIRs with the baseline year
 - No statistical testing between SIRs from different baselines should be conducted

Tips for communicating changes to hospital leadership

- A new National baseline using data from 2022 has been added for NHSN SIR calculations to provide a more recent comparison benchmark
 - “The SIR is a risk-adjusted summary measure that compares our hospital to the 2022 national experience. This measure allows us to monitor progress over time.”
- SIRs created using the 2022 baseline may be higher than those created using the 2015 baseline because the SIRs have been recalibrated
 - All facilities were subject to the same recalibration
 - SIRs from the 2022 baseline should not be compared to those from the 2015 baseline
 - SIRs under either baseline should be analyzed and assessed independently of the other baseline

Next Steps for Your Facility

- Review your data using the 2022 baseline
- Review infection counts and device utilization rates regularly
- Ensure surveillance definitions and mapping are up to date
- Use NHSN tools for SIR trends, DUR/SUR, and peer comparison
- Connect with HAI Epidemiology Unit for regional insights and recalibrated goals

NHSN Rebaseline Progress



SIR/SUR Reports (2022 Baseline) Available in NHSN

- MRSA Blood LabID
- SSI – Complex 30-day
- CLABSI in ACHs and CAHs
- CAUTI in ACHs and CAHs
- CDI LabID in ACHs and CAHs

SIR/SUR Reports (2022 Baseline) Under Development in NHSN

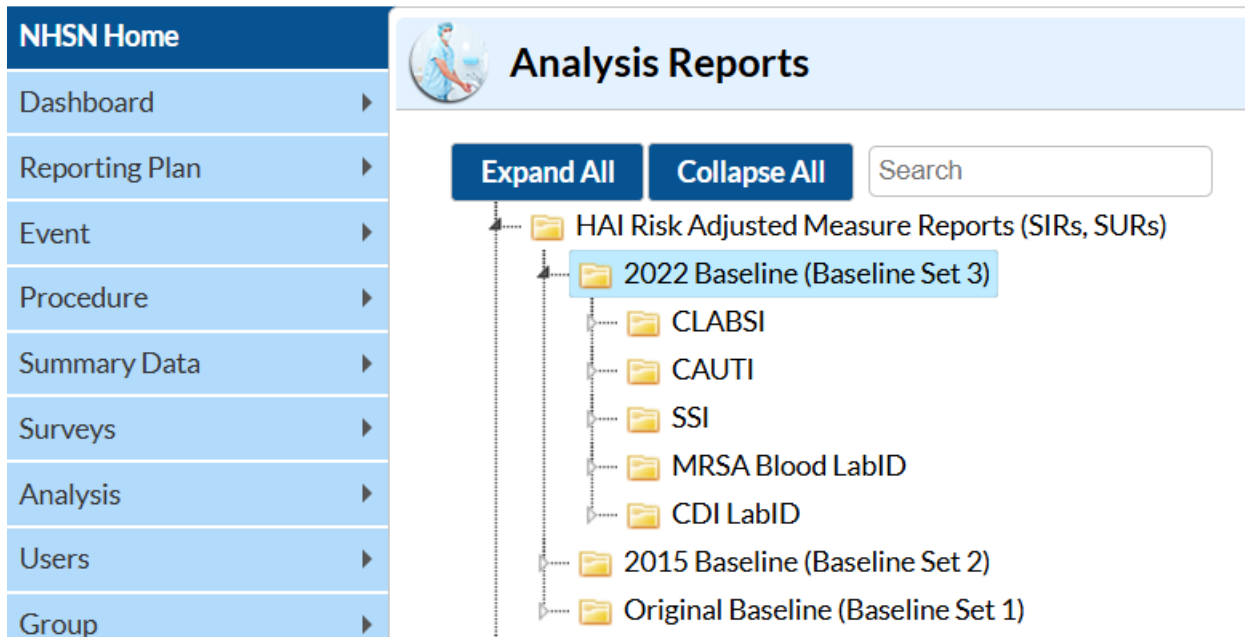
- CLABSI in LTACHs and IRFs
- CAUTI in LTACHs and IRFs
- CDI LabID in LTACHs and IRFs
- MBI-LCBI
- VAE and pedVAE
- SSI – Complex Admission/Readmission
- SSI – All SSI
- SUR Models

NHSN is adding rebaseline models to the application in a phased approach

- Follow the [NHSN Rebaseline Tracker](#) to stay up to date

Rebaselining

NHSN - National Healthcare Safety Network



The screenshot shows the NHSN web application interface. On the left is a vertical navigation menu with the following items: NHSN Home, Dashboard, Reporting Plan, Event, Procedure, Summary Data, Surveys, Analysis, Users, and Group. The main content area is titled 'Analysis Reports' and features a user profile icon, two buttons labeled 'Expand All' and 'Collapse All', and a search input field. Below these controls is a hierarchical tree structure of folders. The top-level folder is 'HAI Risk Adjusted Measure Reports (SIRs, SURs)'. It contains three sub-folders: '2022 Baseline (Baseline Set 3)', '2015 Baseline (Baseline Set 2)', and 'Original Baseline (Baseline Set 1)'. The '2022 Baseline (Baseline Set 3)' folder is highlighted in blue and contains five sub-folders: 'CLABSI', 'CAUTI', 'SSI', 'MRSA Blood LabID', and 'CDI LabID'.

You can find all updated SIR/SUR 2022 rebaseline reports once you login under 'Analysis Reports'

Resources

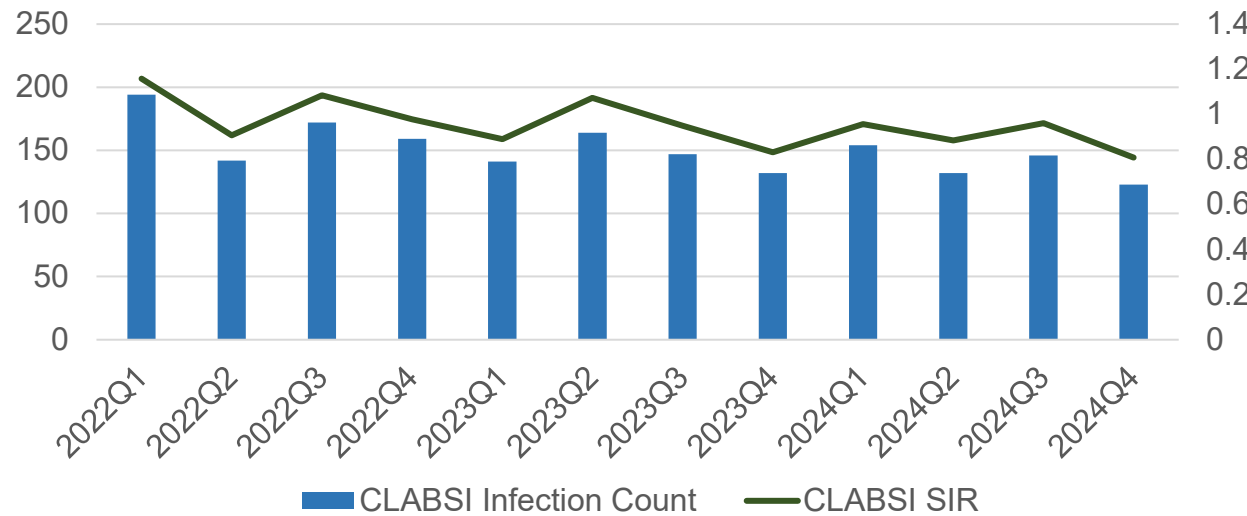
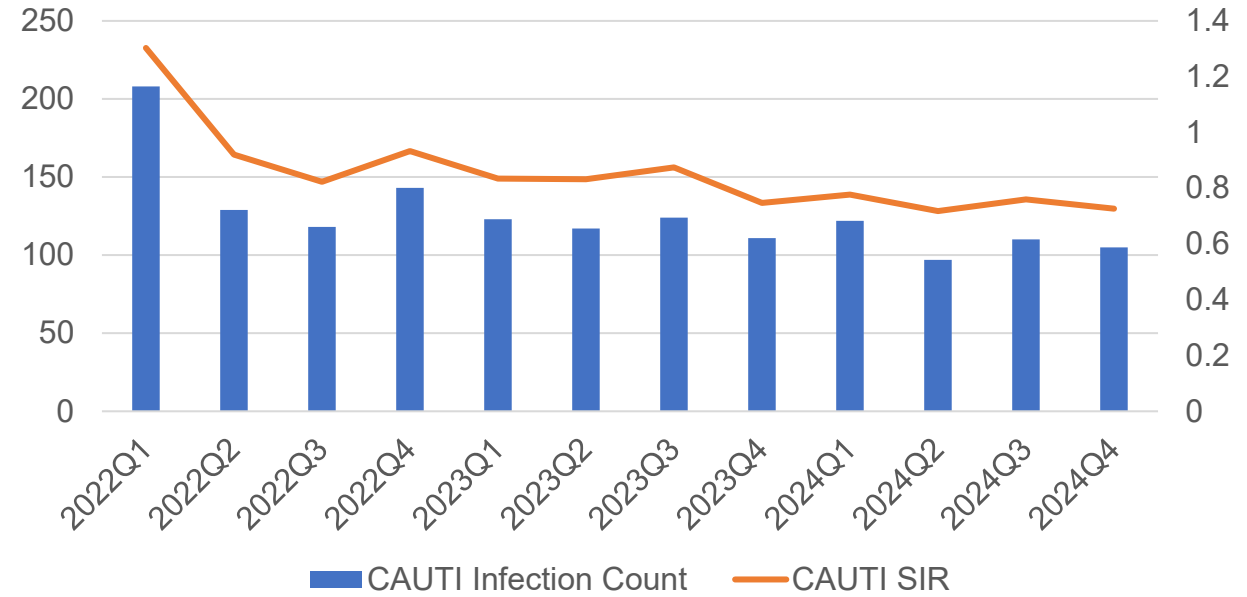
- [2022 NHSN Rebaseline webpage and resources](#)
- The 2022 NHSN Rebaseline page has links to several resources including
 - [Rebaseline FAQs](#)
 - [All previous Rebaseline communications & newsletter articles](#)
 - [Rebaseline education and training resources](#)
- Patient Safety Component: <https://www.cdc.gov/nhsn/pdfs/pscmanual/2025-psc-summary-508.pdf>
- Outpatient Procedure Component: <https://www.cdc.gov/nhsn/pdfs/opc/2025-opc-summary-508.pdf>
- Neonatal Component: <https://www.cdc.gov/nhsn/pdfs/neonatal/losmen/2025-losmen-summary-508.pdf>

NHSN HAI Data

2022 Baseline

NHSN Surveillance Data: Device-Associated Events

summaryYQ	CAUTI Infection Count	CAUTI SIR	CLABSI Infection Count	CLABSI SIR
2022Q1	208	1.303	194	1.158
2022Q2	129	0.921	142	0.906
2022Q3	118	0.823	172	1.084
2022Q4	143	0.933	159	0.977
2023Q1	123	0.834	141	0.889
2023Q2	117	0.832	164	1.073
2023Q3	124	0.875	147	0.949
2023Q4	111	0.747	132	0.832
2024Q1	122	0.777	154	0.957
2024Q2	97	0.718	132	0.884
2024Q3	110	0.760	146	0.960
2024Q4	105	0.727	123	0.808

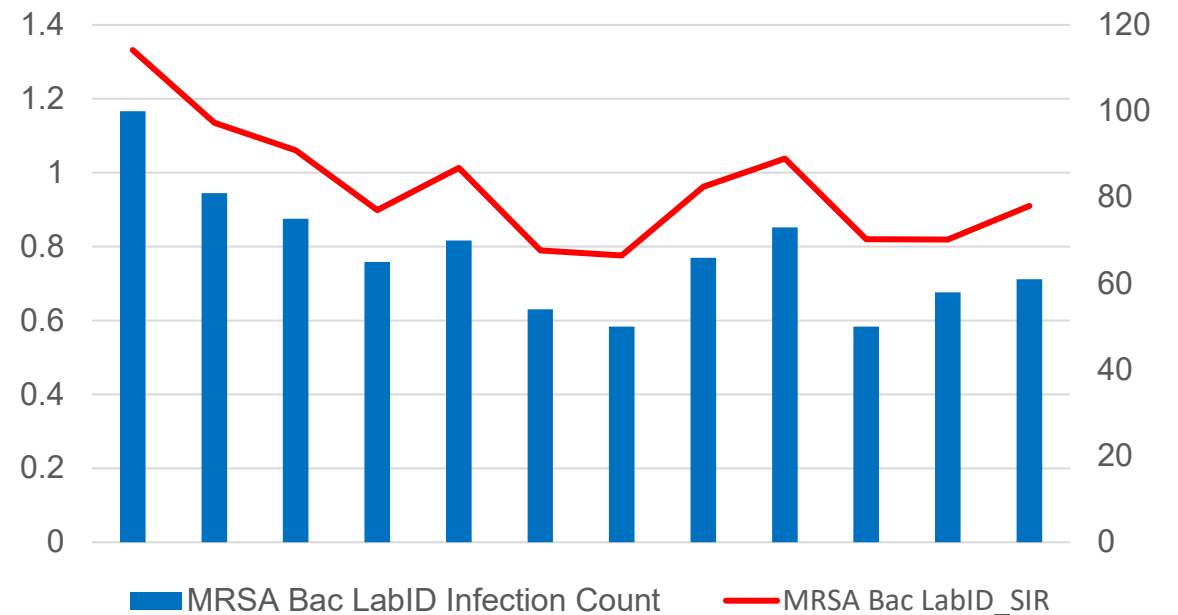
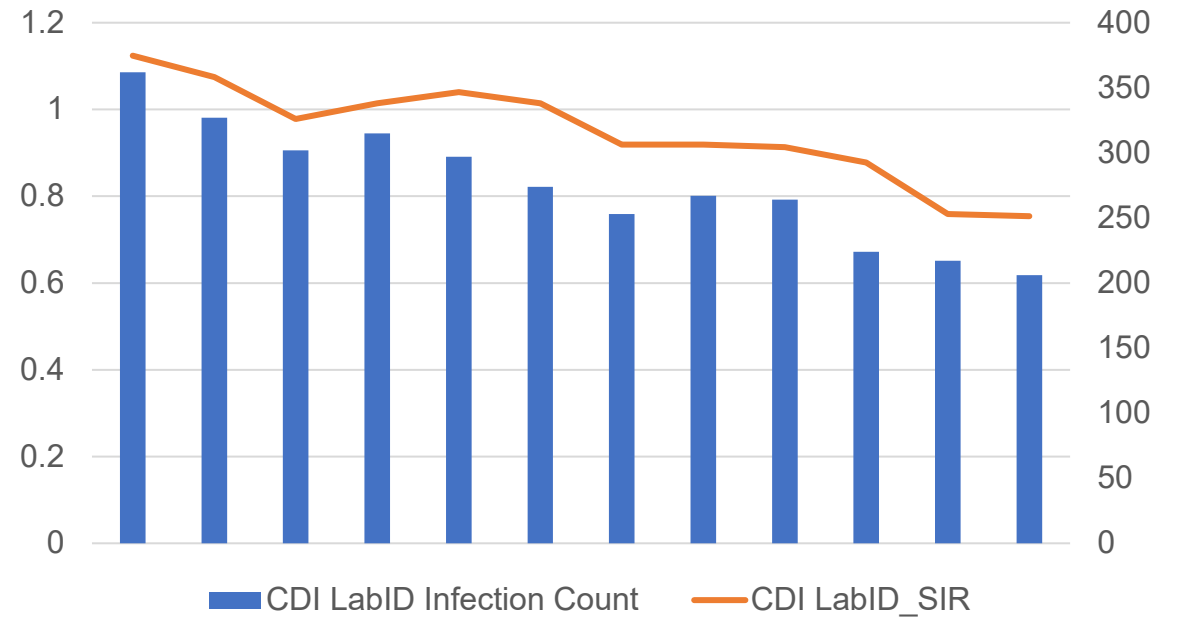


Data for Acute Care Hospitals only. Data are subject to change. Data current as of June 5, 2025.

NHSN Surveillance Data: MRSA Bacteremia and CDI LabID Events

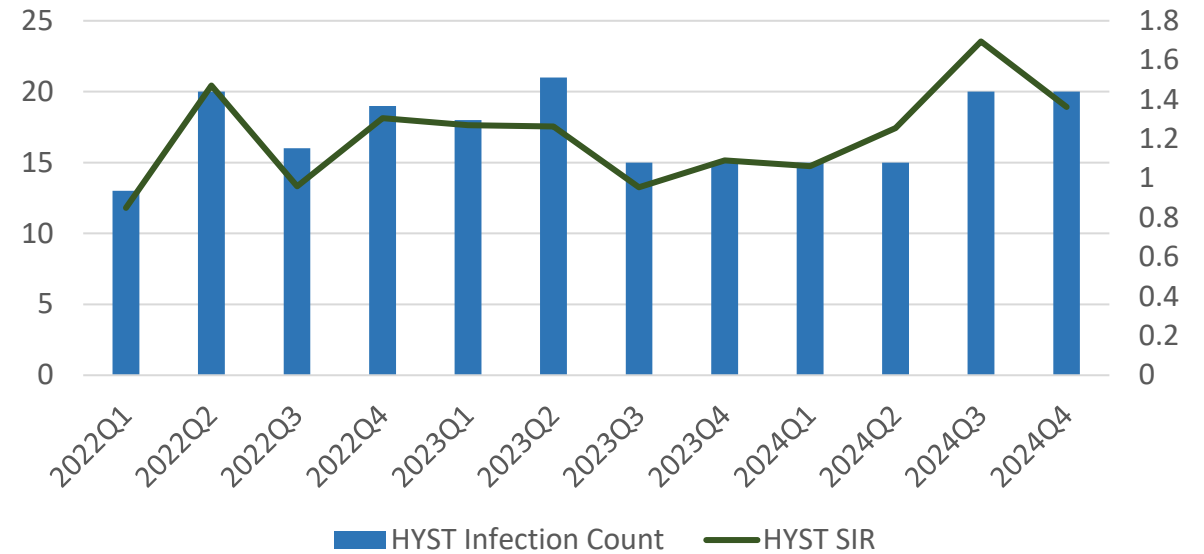
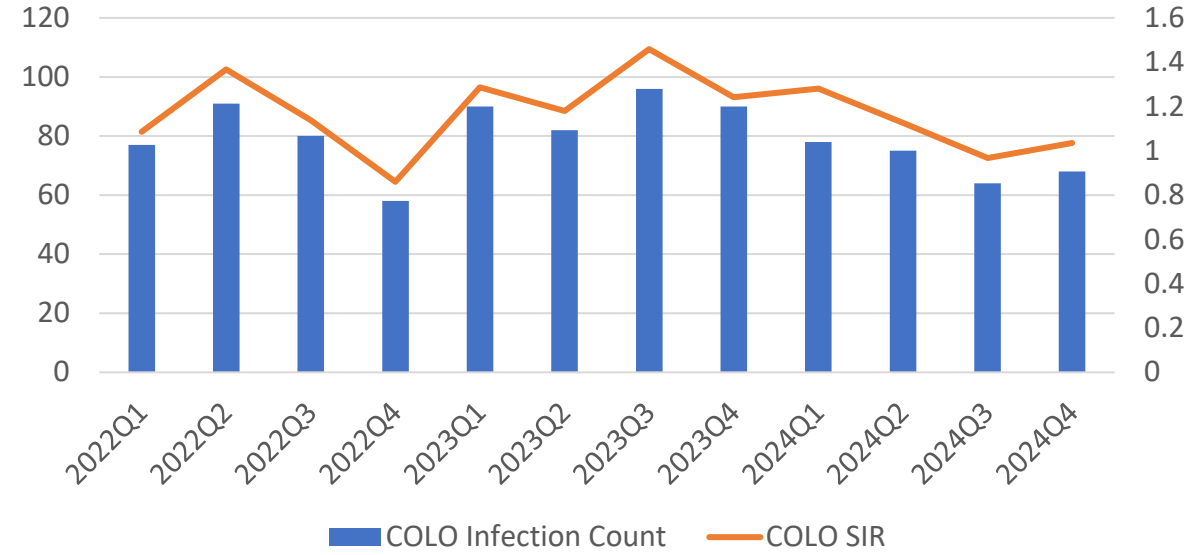
summaryYQ	CDI LabID Infection Count	CDI LabID_SIR	MRSA Bac LabID Infection Count	MRSA Bac LabID_SIR
2022Q1	362	1.124	100	1.332
2022Q2	327	1.075	81	1.135
2022Q3	302	0.978	75	1.061
2022Q4	315	1.014	65	0.899
2023Q1	297	1.040	70	1.013
2023Q2	274	1.014	54	0.790
2023Q3	253	0.919	50	0.776
2023Q4	267	0.919	66	0.962
2024Q1	264	0.913	73	1.038
2024Q2	224	0.878	50	0.820
2024Q3	217	0.759	58	0.819
2024Q4	206	0.754	61	0.910

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NHSN Surveillance Data: Procedure-Associated Events

summaryYQ	COLO Infection Count	COLO SIR	HYST Infection Count	HYST SIR
2022Q1	77	1.086	13	0.85
2022Q2	91	1.367	20	1.472
2022Q3	80	1.138	16	0.959
2022Q4	58	0.860	19	1.305
2023Q1	90	1.287	18	1.270
2023Q2	82	1.179	21	1.264
2023Q3	96	1.459	15	0.954
2023Q4	90	1.242	15	1.091
2024Q1	78	1.281	15	1.061
2024Q2	75	1.126	15	1.255
2024Q3	64	0.968	20	1.695
2024Q4	68	1.035	20	1.363

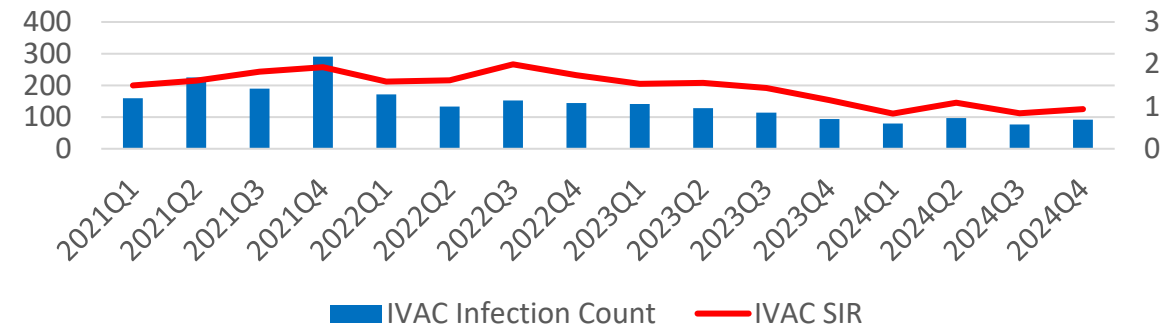
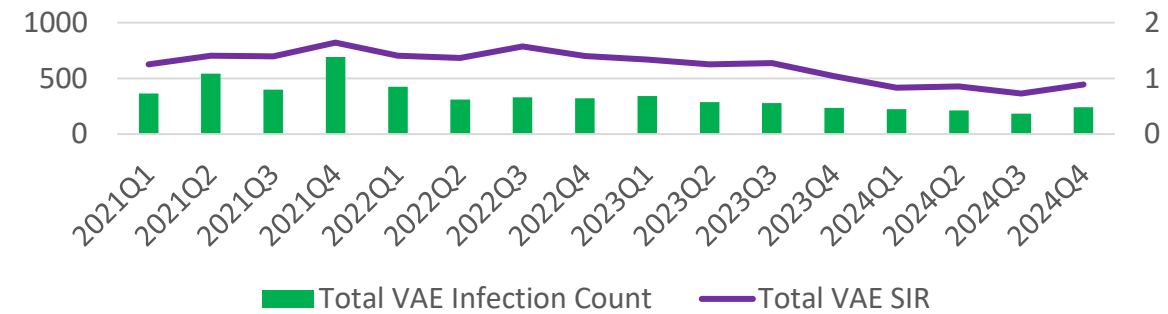
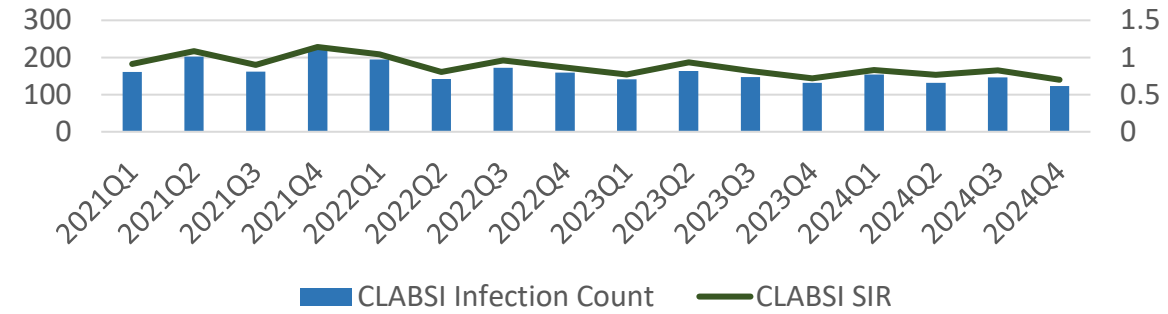
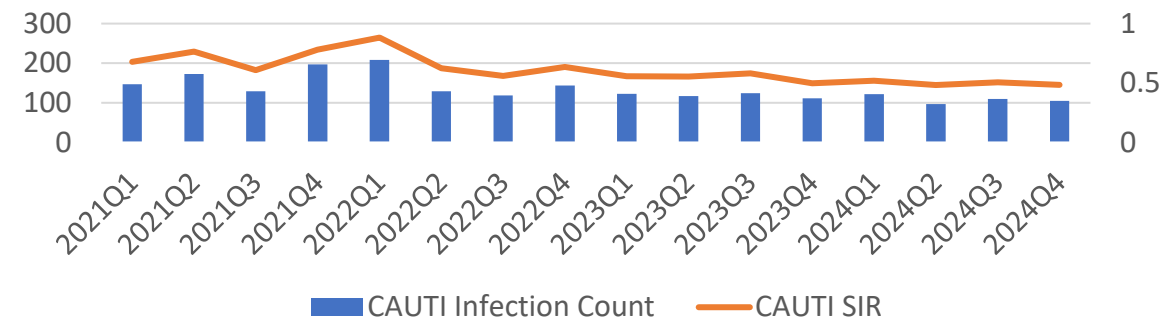


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2015 Baseline

NHSN Surveillance Data: Device-Associated Events

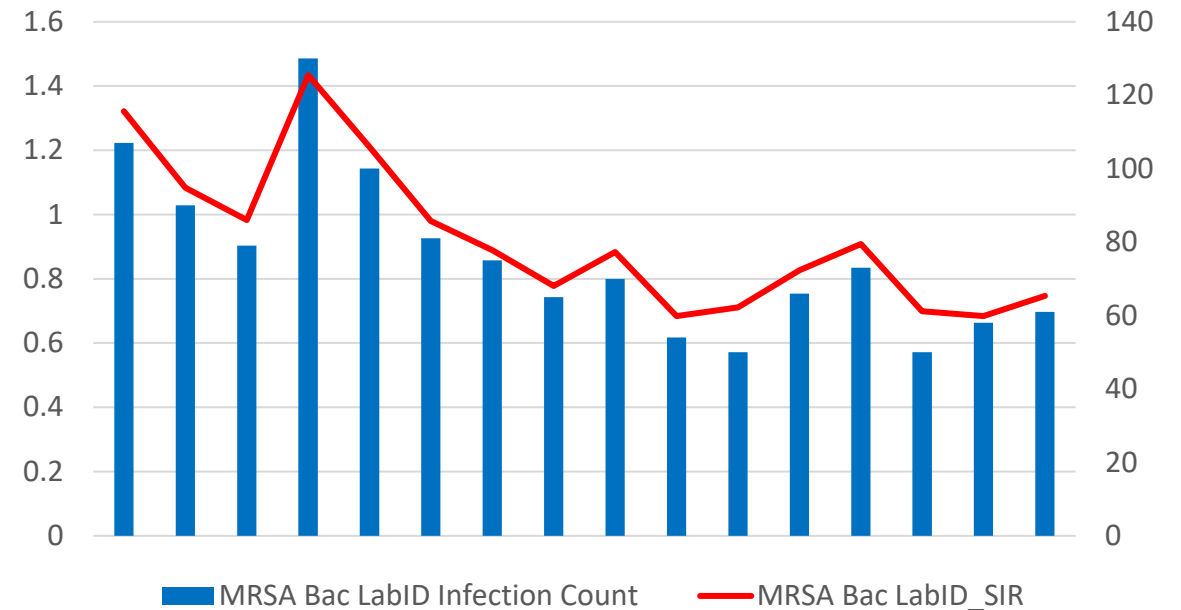
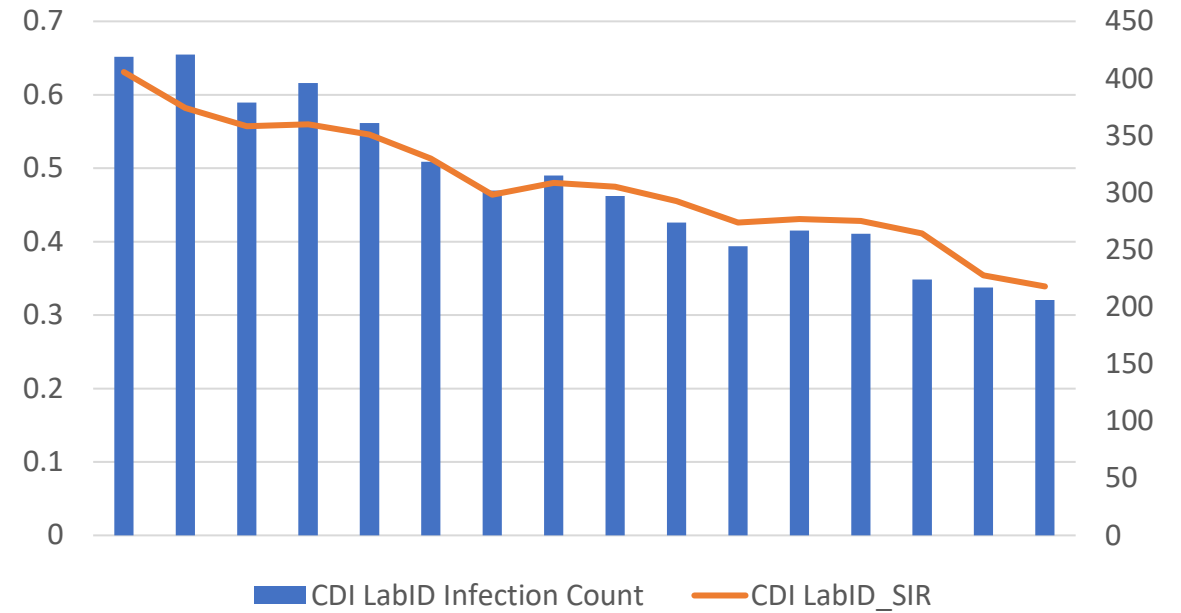
summary YQ	CAUTI Infection Count	CAUTI SIR	CLABSI Infection Count	CLABSI SIR	Total VAE Infection Count	Total VAE SIR	IVAC Plus Infection Count	IVAC Plus SIR
2021Q1	147	0.677	161	0.913	365	1.249	159	1.5
2021Q2	173	0.765	202	1.086	542	1.404	225	1.611
2021Q3	129	0.607	162	0.899	399	1.396	190	1.824
2021Q4	197	0.781	227	1.141	693	1.642	291	1.928
2022Q1	208	0.882	195	1.041	425	1.406	172	1.593
2022Q2	129	0.623	142	0.804	310	1.367	133	1.623
2022Q3	119	0.559	172	0.959	331	1.573	152	1.998
2022Q4	144	0.635	159	0.866	322	1.399	144	1.742
2023Q1	123	0.556	141	0.772	342	1.336	141	1.535
2023Q2	117	0.555	164	0.933	286	1.25	128	1.559
2023Q3	124	0.581	147	0.820	279	1.273	114	1.44
2023Q4	111	0.497	132	0.721	235	1.039	94	1.154
2024Q1	122	0.518	154	0.830	223	0.832	80	0.832
2024Q2	97	0.483	132	0.768	212	0.856	97	1.091
2024Q3	110	0.506	146	0.827	184	0.728	77	0.843
2024Q4	105	0.484	123	0.700	241	0.889	92	0.938



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NHSN Surveillance Data: MRSA Bacteremia and CDI LabID Events

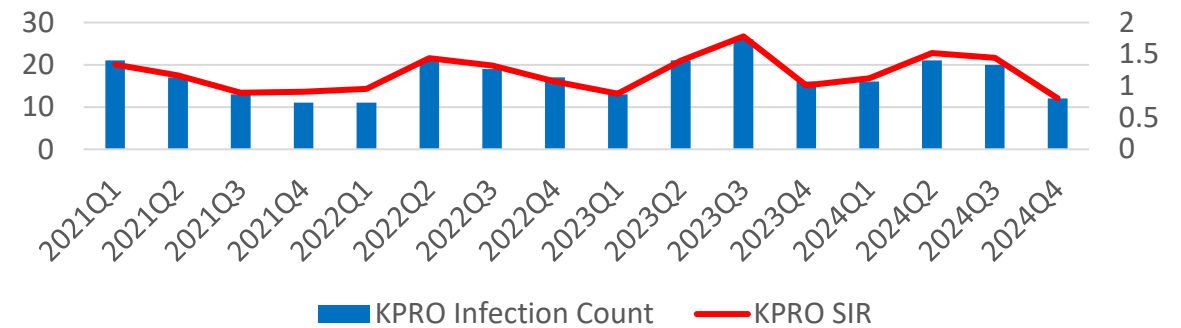
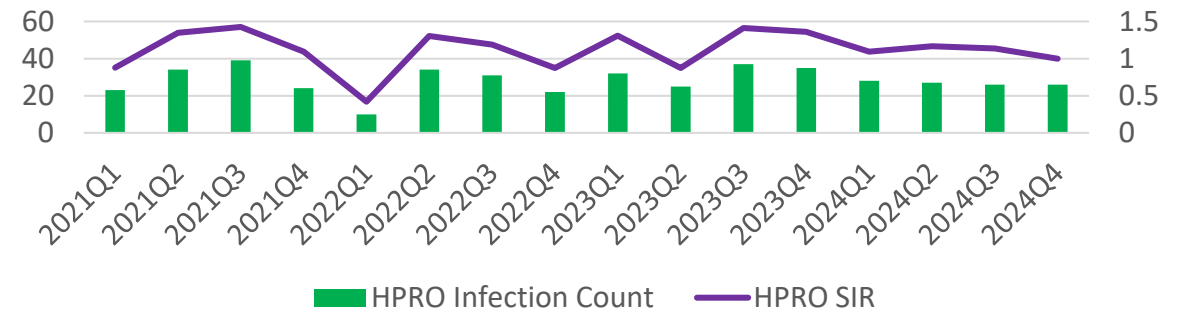
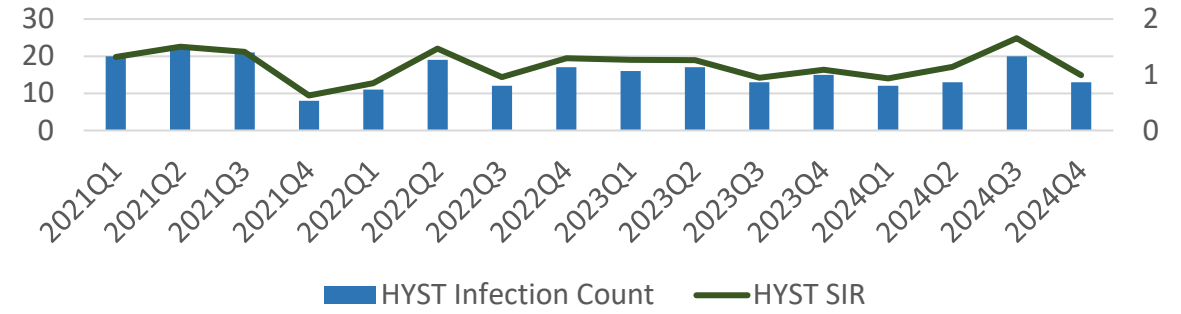
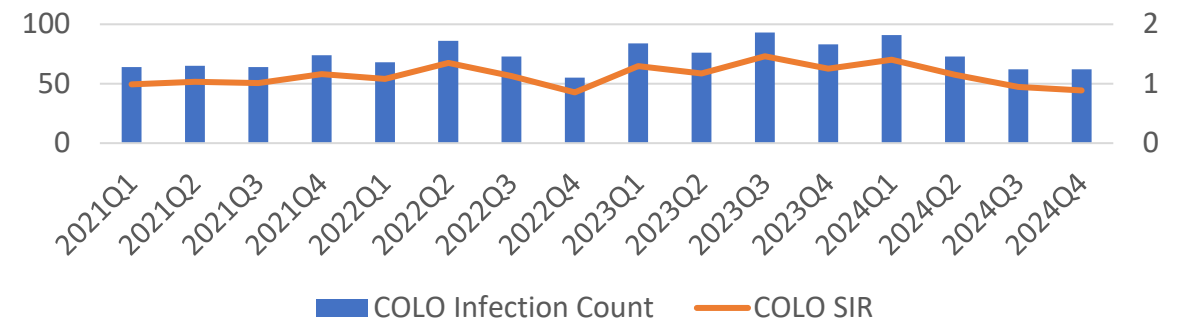
summaryYQ	CDI LabID Infection Count	CDI LabID_SIR	MRSA Bac LabID Infection Count	MRSA Bac LabID_SIR
2021Q1	419	0.631	107	1.322
2021Q2	421	0.582	90	1.084
2021Q3	379	0.557	79	0.983
2021Q4	396	0.56	130	1.434
2022Q1	361	0.546	100	1.211
2022Q2	327	0.513	81	0.98
2022Q3	302	0.464	75	0.889
2022Q4	315	0.48	65	0.778
2023Q1	297	0.475	70	0.883
2023Q2	274	0.455	54	0.684
2023Q3	253	0.426	50	0.711
2023Q4	267	0.431	66	0.827
2024Q1	264	0.428	73	0.908
2024Q2	224	0.411	50	0.699
2024Q3	217	0.354	58	0.684
2024Q4	206	0.339	61	0.747



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NHSN Surveillance Data: Procedure-Associated Events

summary YQ	COLO Infection Count	COLO SIR	HYST Infection Count	HYST SIR	HPRO Infection Count	HPRO SIR	KPRO Infection Count	KPRO SIR
2021Q1	64	0.988	20	1.32	23	0.878	21	1.338
2021Q2	65	1.031	22	1.504	34	1.346	17	1.166
2021Q3	64	1.013	21	1.411	39	1.426	13	0.893
2021Q4	74	1.161	8	0.628	24	1.092	11	0.907
2022Q1	68	1.08	11	0.848	10	0.42	11	0.953
2022Q2	86	1.351	19	1.468	34	1.304	21	1.436
2022Q3	73	1.131	12	0.957	31	1.186	19	1.321
2022Q4	55	0.854	17	1.298	22	0.874	17	1.071
2023Q1	84	1.295	16	1.267	32	1.307	13	0.875
2023Q2	76	1.173	17	1.263	25	0.875	21	1.397
2023Q3	93	1.462	13	0.949	37	1.414	26	1.781
2023Q4	83	1.253	15	1.087	35	1.362	16	1.006
2024Q1	91	1.402	12	0.935	28	1.094	16	1.12
2024Q2	73	1.152	13	1.139	27	1.168	21	1.517
2024Q3	62	0.946	20	1.656	26	1.136	20	1.445
2024Q4	62	0.885	13	0.991	26	0.997	12	0.804



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State HAI Reduction Initiative: Device Reprocessing

Infection Prevention Unit
Healthcare-Associated Infections (HAI) Section



Statewide HAI Reduction Initiative

LabID

- *Clostridioides difficile*

Device Associated Infections

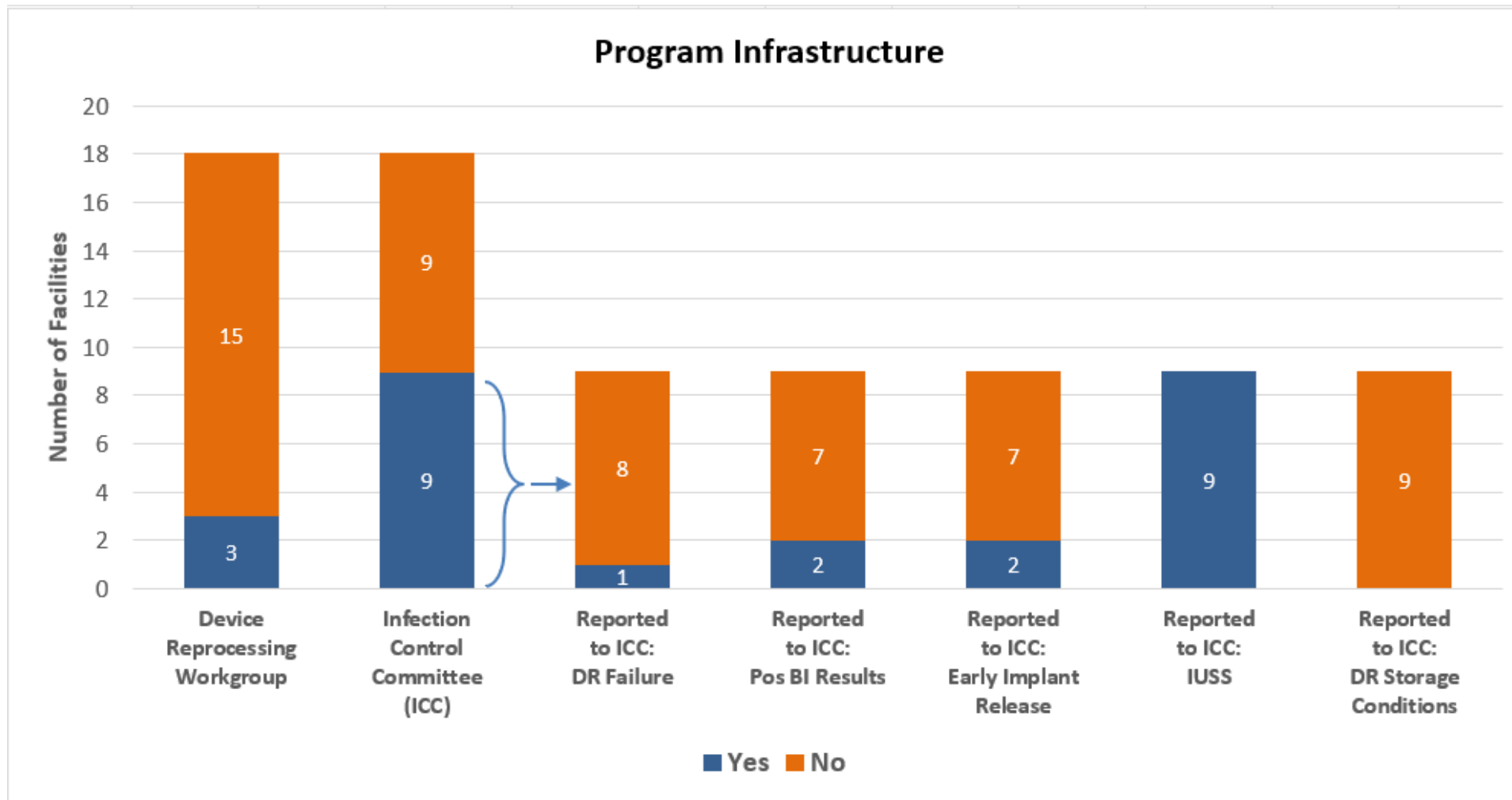
- Central line-associated blood stream infections (CLABSI)
- Catheter-associated urinary tract infections (CAUTI)

Device Reprocessing

- Critical
- Semi-critical

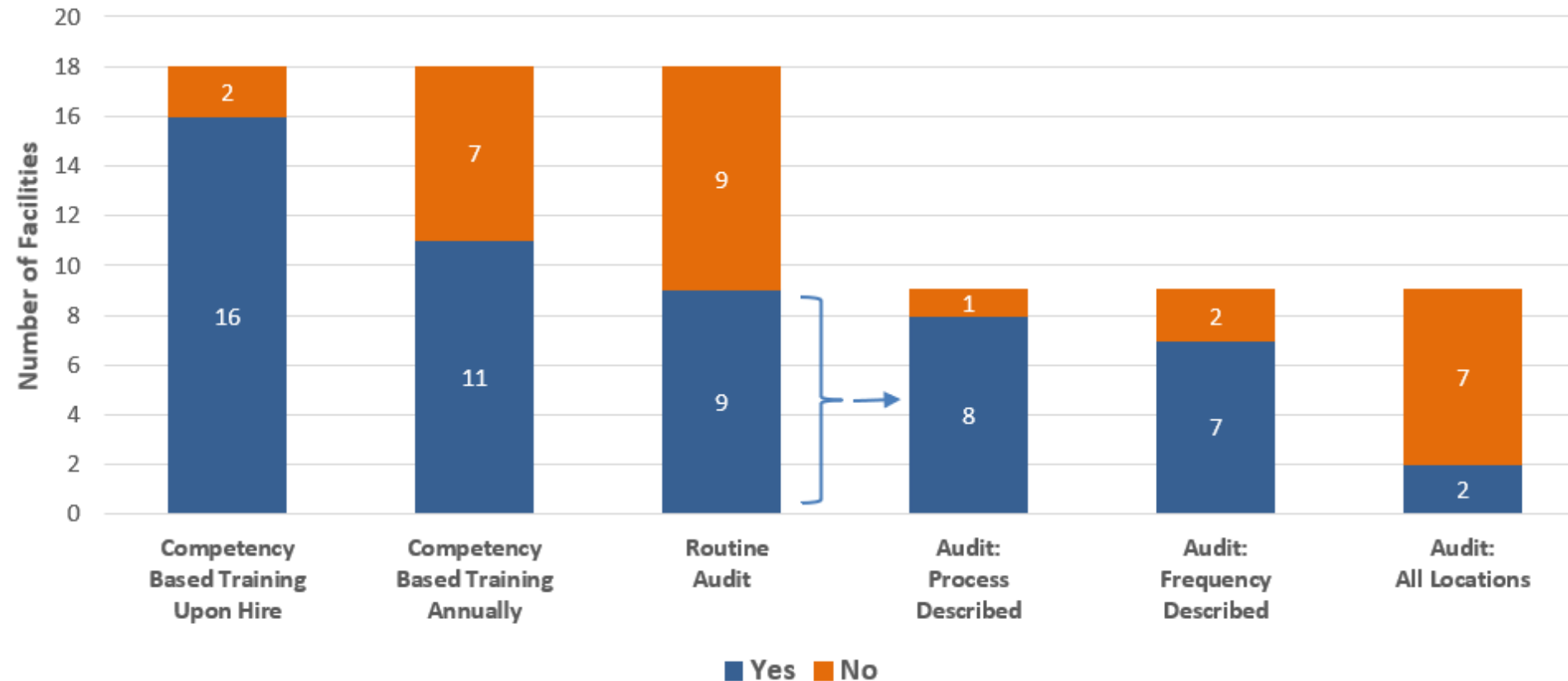
Trends & Observations

Common Findings: Program Infrastructure



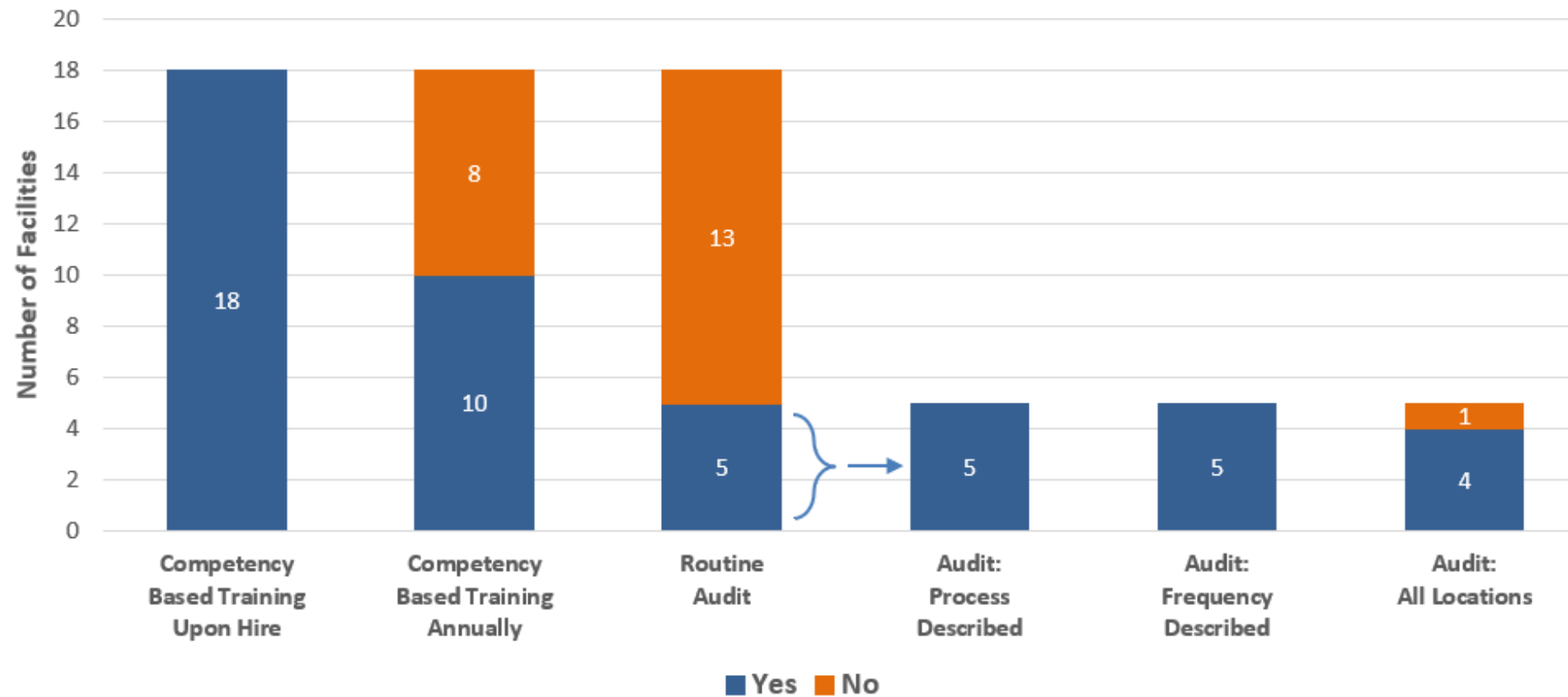
Common Findings: Training, Competency, & Policy for Critical Devices

Training, Competency, Policies, Procedures: Critical Devices



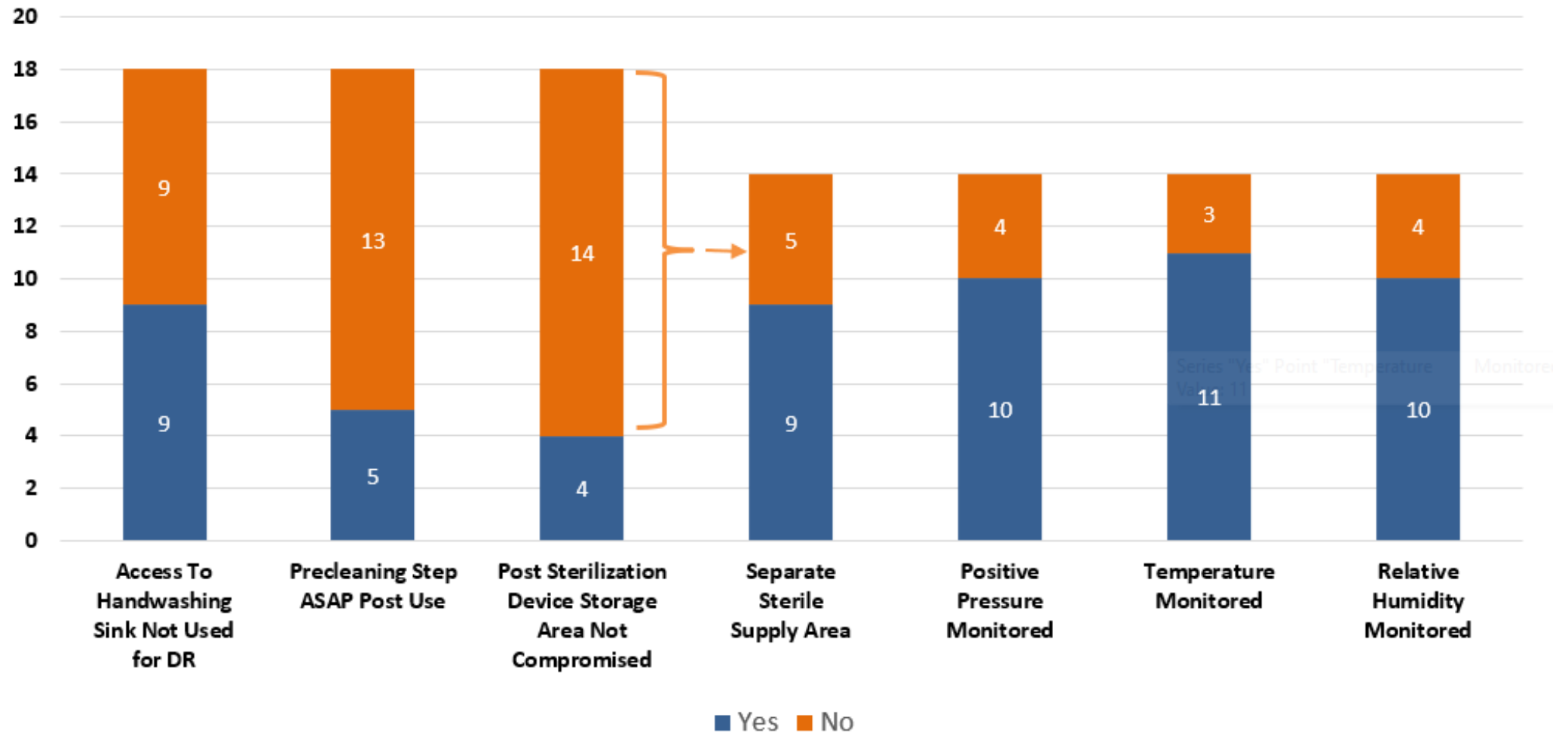
Common Findings: Training, Competency, & Policy for Semi-Critical

Training, Competency, Policies, Procedures: Semi-Critical Devices

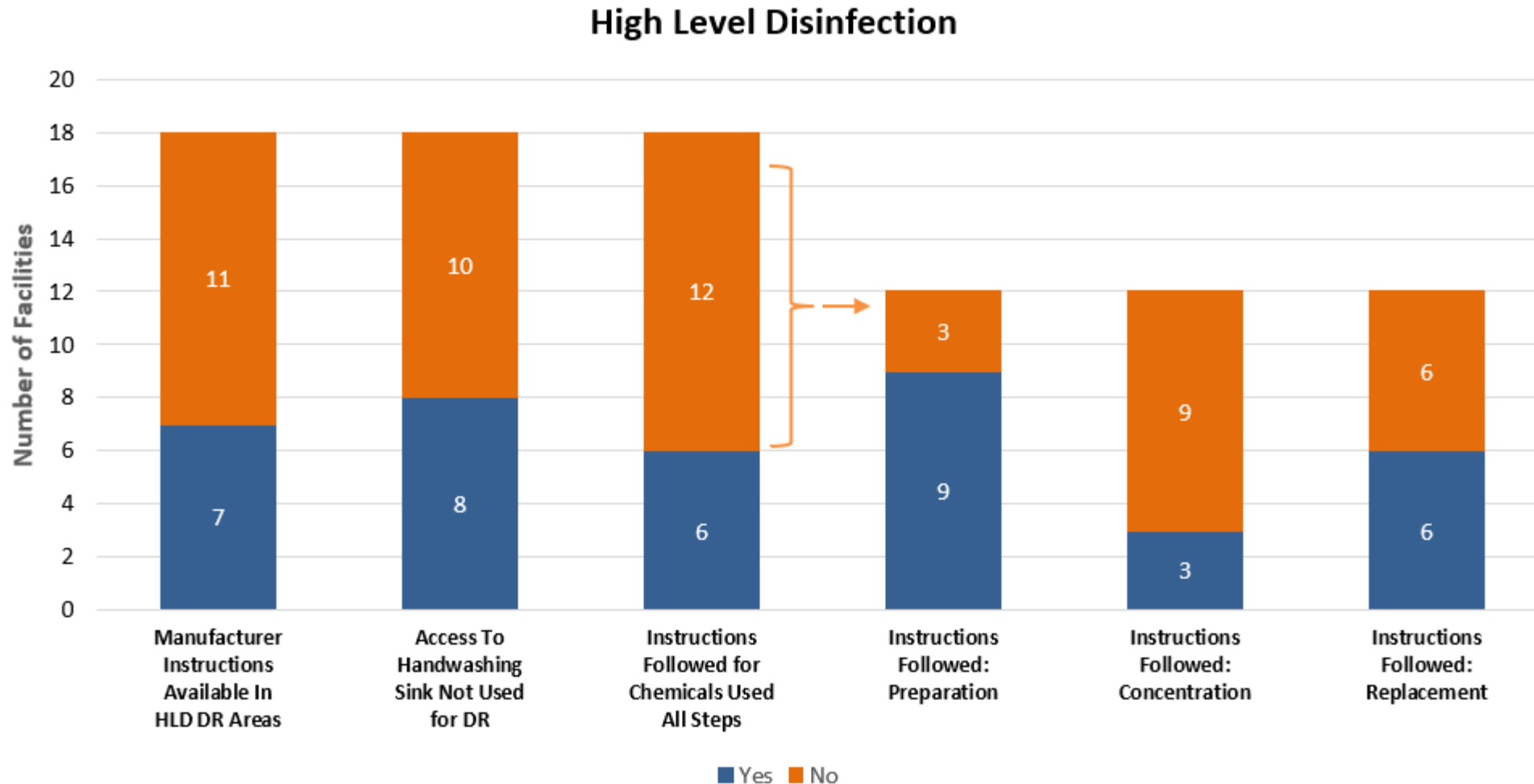


Common Findings: Sterilization Procedures

Sterilization Procedures



Common Findings: High Level Disinfection (HLD)



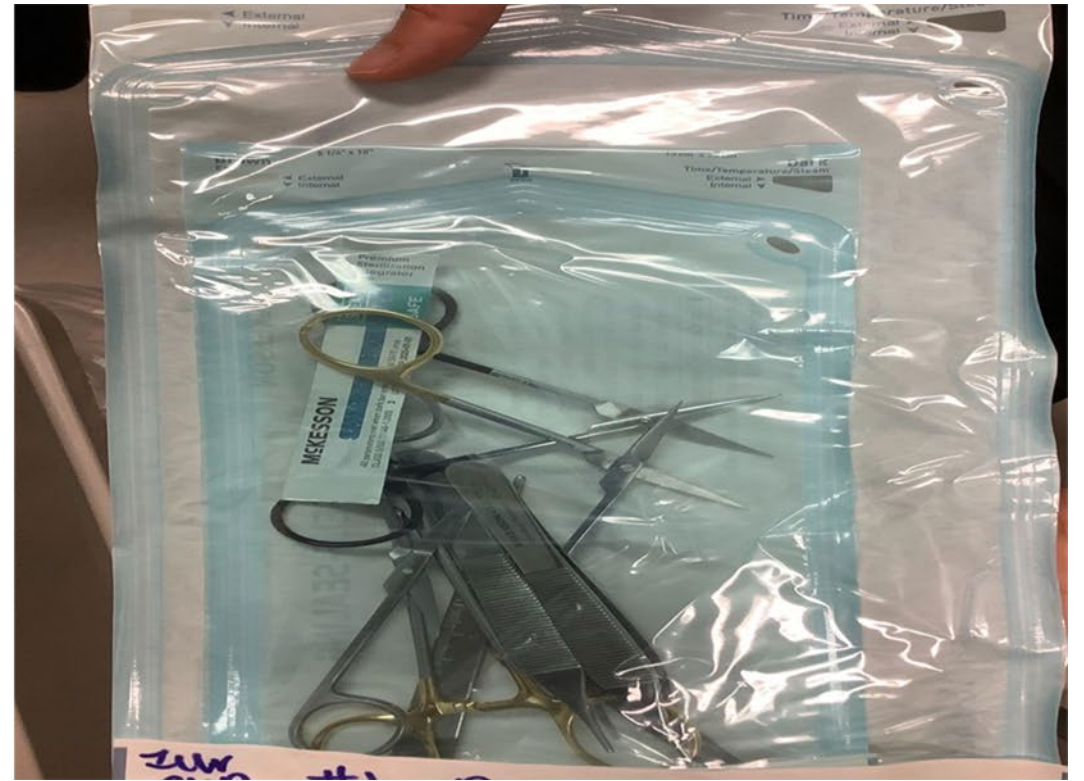
Point of use pre-cleaning



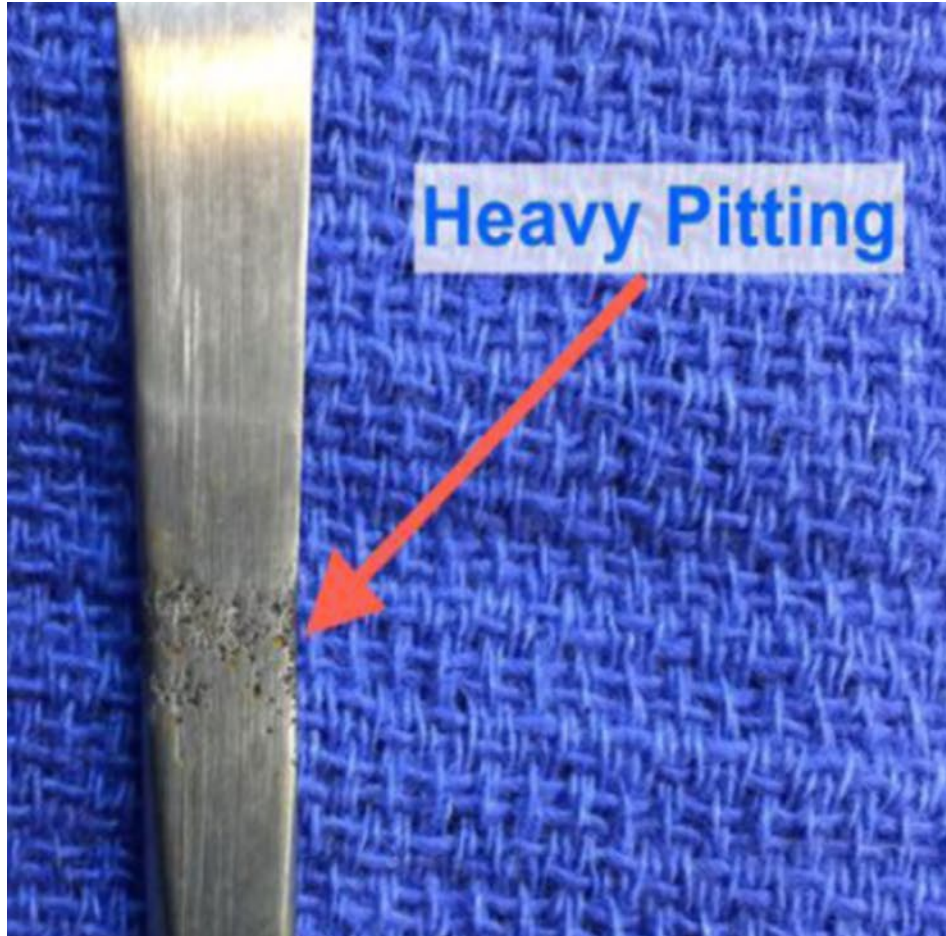
Can the device be reprocessed?



Preparation and Packaging



Pitting and Rusting



Taping and Etching



Storage



Storage



Notes from the Field...

- If you don't already have communication channels with your sterile processing department – identify a contact at your facility
 - IP and sterile processing is a collaboration
- If you or a member of your team is new to IP - reach out to your SPD experts and spend time in the sterile process department observing practices
- When was the last time you rounded in SPD?
 - Work with your SPD team to identify barriers to implementing best practices and collaborate together to identify solutions

New to sterile processing?

- Project Firstline & University of Nebraska Medical Center “Behind the Mask Webinar Series” - [Webinars | innovateIPC.org](https://www.innovateIPC.org)
 - Fundamentals of Semi-Critical Device Reprocessing – Now available
 - Fundamentals of Critical Device Reprocessing – 7/17/2025
- Centers for Disease Control and Prevention, Healthcare Infection Control Practices Advisory Committee (HICPAC) “Guidelines for Disinfection and Sterilization in Healthcare Facilities, 2008” - [Disinfection and Sterilization Guideline | Infection Control | CDC](https://www.cdc.gov/infectioncontrol/guidelines/disinfection-sterilization/)
- SHEA with representatives from: ASGE, APIC, AORN, HSPA, IDSA, SGNA, The Joint Commission “Multisociety Guidance for Sterilization and High-level Disinfection” - [Multisociety guidance for sterilization and high-level disinfection | Infection Control & Hospital Epidemiology | Cambridge Core](https://www.jointcommission.org/resources/standards-support-for/infection-control/multisociety-guidance-for-sterilization-and-high-level-disinfection/)
- APIC “Infection Preventionist’s Guide to the OR” - [Implementation Guides - APIC](https://www.apic.org/resources/publications/guide-to-the-OR/)
- Check out APIC, SHEA, AORN, AAMI....!

Questions?

If you have questions regarding device reprocessing, contact the IP
Unit at MDHHS-HAI@michigan.gov

Candida auris Update

Upcoming Trainings/Webinars

- NHSN Patient Safety Component Annual Training
 - PSC Annual Training began on June 10th and 12th, 2025
 - Second Week of training June 24th and June 26th
 - Sign up for [NHSN email updates](#) if not on listserv already
 - Links have been sent out for the current week's training
 - **Access to Training Sessions:** No need to register! Just click the link next to the date at the start time of each session. **Please note that recordings/replays will not be available, so be sure to join live!**

Tuesday July 8, 2025, 12 at Noon Eastern

AT - BSI Bootcamp "Bring Your A Game"

AT - BSI - Have You Found Your Secondary Wind?

AT - BSI Case Study (Primary + Secondary)

AT - Rebaseline CLABSI

Thursday July 10, 2025, at 12 Noon Eastern

AT- OPC Outpatient Procedure Component (User Interface (UI))

AT - UTI - Urinary Tract Infection Surveillance

AT - Rebaseline CAUTI

Tuesday July 15, 2025, at 12 Noon Eastern

AT - VAE - Ventilator-Associated Events (VAE)

AT - VAE - Ventilator-Associated Events (VAE): Case Studies 2025

AT - PNEU - Pneumonia (PNEU) Events: Case Studies

Thursday July 17, 2025, at 12 Noon Eastern

AT - NHSN Hospital Respiratory Data (HRD): Analysis Reports and Data Quality Considerations

AT - NHSN Connectivity Initiative: Hospital Bed Capacity Project

AT - Nurse Staffing Hours

AT - NHSN Hot Topics

Questions & Discussion

Click the link or scan the
QR code to participate!

- [EasyRetro Group Discussion](#)
- Password
 - **51ac54**



Thank you!

