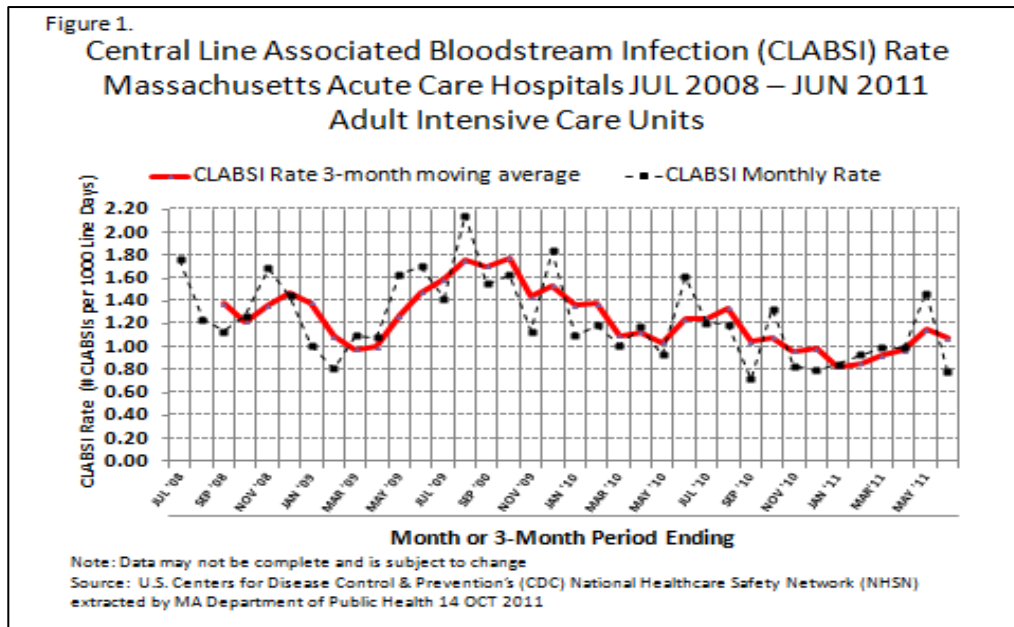
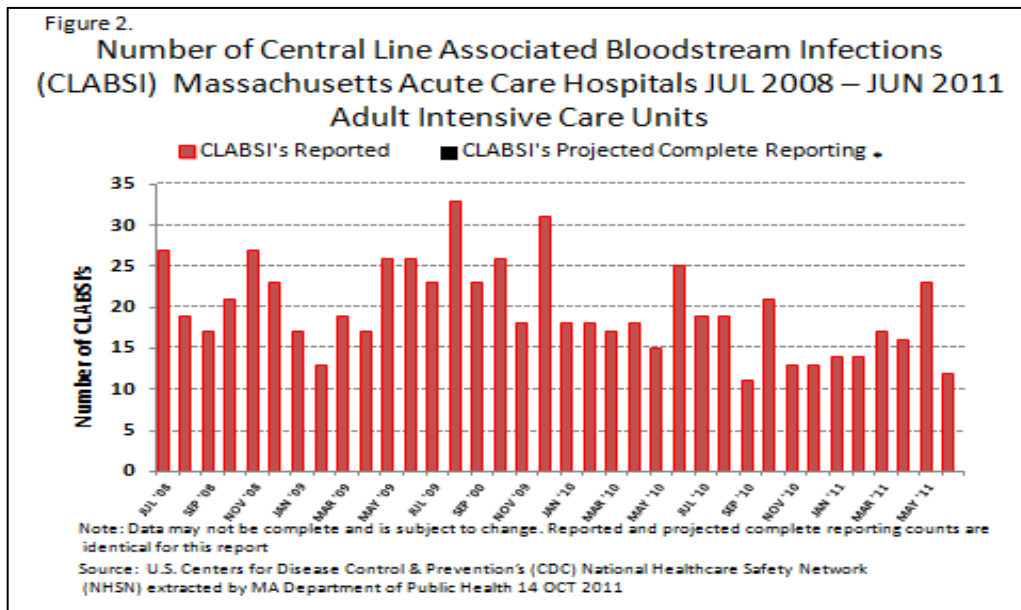


Massachusetts Hospitals Strategic Performance Improvement Agenda Report

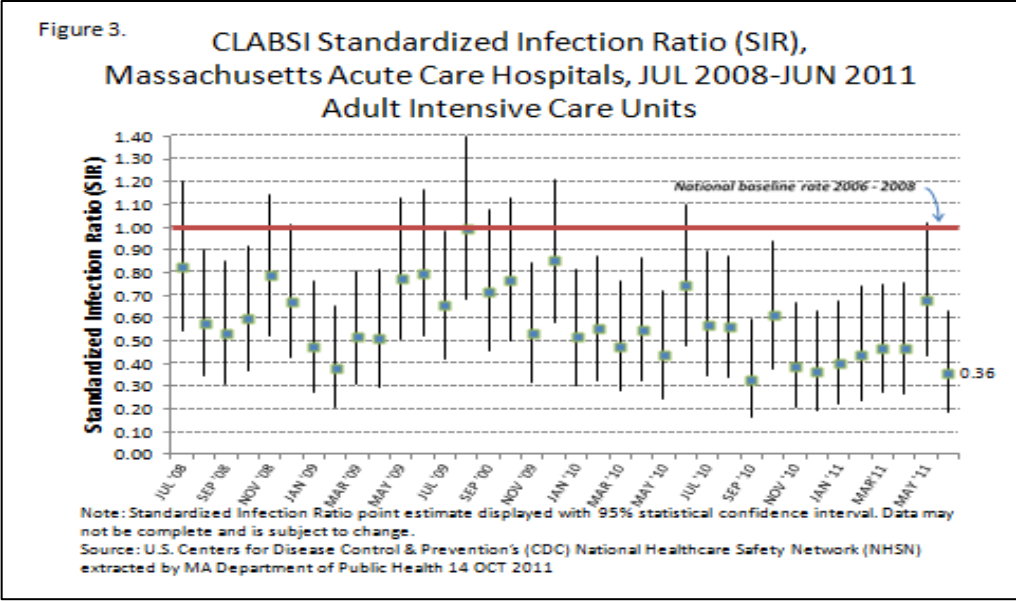
Safety Commitment: Reduce Central Line Associated Bloodstream Infections



The **rate of Central Line Associated Bloodstream Infections (CLABSI)** in Massachusetts acute care hospital adult intensive care units in **June 2011** was **0.78 infections per 1,000 line days** (Fig.1). The rate is based on data submitted from 97 percent of planned reporting units as of October 14. The **3-month moving average rate for the 3-months ending in June** was **1.08**, up from the rate of 0.92 (revised) in the 3-month period that ended in March 2011, the last period previously reported.

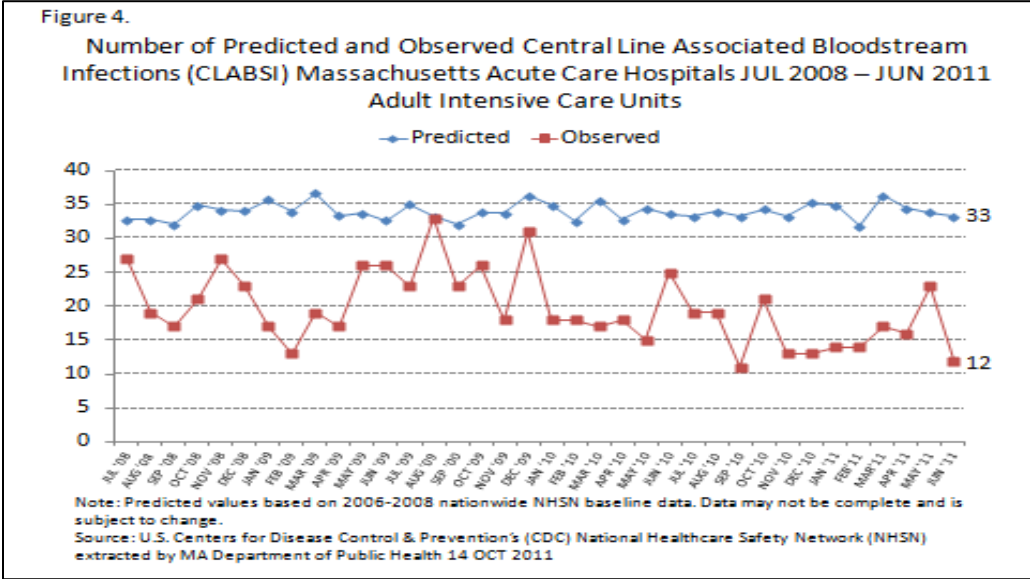


There were **12 reported CLABSI in June 2011**. Because all reporting periods include at least 97 percent of reporting units, the actual and projected complete counts are identical.



The **Standardized Infection Ratio (SIR)** compares CLABSI incidence in relation to a national reference standard or baseline covering the period 2006 - 2008. The SIR adjusts for differences in the mix and size of hospital unit types reported on by hospitals, as well as the number of hospitals/units with medical school affiliations. Using the record of hospitals across the nation in the period January 2006 through December 2008, CDC/MDPH calculate a predicted (expected) number of CLABSI in each state based on the number of patients and the unit types in which they were hospitalized. The observed (actual) number of CLABSI reported by hospitals in the state are then compared to the number of predicted CLABSI in an observed-to-predicted ratio to arrive at the SIR.

The SIR for Massachusetts hospitals (Fig. 3) in June 2011 was 0.36, meaning the observed number of CLABSI (12) was 64 percent fewer ($1.00 \text{ minus } 0.36 = 0.64$) than predicted (33) had Massachusetts hospitals performed at the level of hospitals across the nation from 2006 through 2008. The SIR includes a confidence interval around the 0.36 point estimate; this interval indicates that the "true" SIR in Massachusetts is between 0.19 and 0.63 with a 95 percent certainty.



The component parts of the SIR, the predicted number of CLABSI and the observed number of CLABSI in Massachusetts acute care hospitals in each month from July 2008 through June 2011, are displayed in Figure 4. Note that the June 2011 counts are based on data from 97 percent of planned reporting units.

The Massachusetts Hospital Association will update this report on a quarterly basis when new CLABSI data are reported to us by the Massachusetts Department of Public Health (MDPH). We appreciate the cooperation of MDPH in supplying this data.
