



NEWS RELEASE

from Halton Healthcare Services

Immediate Release

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Halton Healthcare Services posts Patient Safety Data

The Ministry of Health and Long-Term Care has released the most recent rates for seven hospital patient safety indicators today. These indicators include the quarterly rates for Central Line Infection Associated Bloodstream Infections, Ventilator-Associated Pneumonia, Surgical Site Infections, along with bloodstream infection rates for Methicillin-resistant *Staphylococcus aureus* (MRSA) and Vancomycin Resistant Enterococcus (VRE). The monthly rates for *C.difficile* as well the annually reported Hand Hygiene Compliance rates were also posted.

“The indicators for hospital-associated infections and hand hygiene provide us with valuable insights which will help us enhance and focus our patient safety and infection prevention and control initiatives,” notes Mr. John Oliver, HHS President and CEO. “We support both transparency and accountability within the healthcare system. Public reporting of patient safety data allows us to track our progress over time.”

“With some hospital-associated infections, such as *C. difficile*, we typically see a seasonal increase in late Winter and early Spring due to a higher use of antibiotics and an increase in the number of patients presenting with pneumonia and respiratory infections,” explains Shirley Lanza, HHS Manager of Infection Prevention and Control Services.

As posted today on the HHS website, HHS observed increased rates of *C.difficile* infections in March 2010, as compared with usual baseline rates. Six cases of *C.difficile* at OTMH results in a rate of 0.61, while one case at MDH resulted in an increased rate of .56.

Also noted was the detection of three cases of MRSA blood stream infections at OTMH in the past quarter (as compared with the usual rate of one per quarter). This increase has prompted an internal review of practices by the infection prevention and control service. Dr. Neil Rau, HHS Infectious Disease Specialist and Medical Microbiologist, noted that common factors seen in this group of patients included extensive antibiotic use, in addition to complex and chronic medical conditions which can increase their risk and vulnerability to infection.

“In general, we continue to report positive results in the remaining indicators, which attests to our commitment to infection prevention and control at HHS,” notes Dr. Rau. “However, like many of our peer hospitals, we still

continue to be challenged with an increasing burden of MRSA bloodstream infections and the fluctuating incidence of *C.difficile* infections. We have an active antibiotic stewardship program to help reduce the risk for both, we strongly advocate for improved hand hygiene, and we continue rigorous environmental cleaning of our healthcare environment.”

“Our overall Hand Hygiene Compliance rates have improved during the past year. But we strive to be better, as we saw a decrease in compliance at one of our hospitals, and our overall rates remain slightly below the provincial average,” explains Ms. Lanza. “Our goal is to see an upward sustainable improvement in our compliance rates - and achieving this will take time and a focused effort on all fronts. We will continue to use the audit information to identify areas of improvement and develop strategies to improve compliance throughout our hospitals. In addition, we will continue our educational programs as well as our audits to reinforce the importance of good hand hygiene practices.”

“We know that effective hand hygiene reduces the risk of all healthcare associated infections. It is fundamental to all our patient safety initiatives and a cornerstone of our infection control and prevention efforts,” notes Dr. Rau.

HHS reported hand hygiene compliance on two indicators – before patient or patient environment contact and after patient environment contact. These rates were based on 2,854 observations of physicians and staff over a 16 day period in March 2010.

Hand hygiene compliance rates vary from week to week and unit by unit. We maintain a strong focus on proper hand hygiene practices at HHS,” continues Ms. Lanza, “We promote the Ministry of Health’s *Just Clean Your Hands* education program and, in fact, have recently improved access to this program by providing it through an online e-learning module that is available to all staff on a 24/7 basis. We are also engaging our patient safety champions and involving our unit staff in the auditing process. This reinforces the concept that everyone is responsible for hand hygiene.”

The patient safety indicator data is available on Halton Healthcare Services’ website and on the Ministry of Health and Long-Term Care’s website at www.haltonhealthcare.on.ca or www.ontario.ca/patientsafety.

January – March 2010 Indicators

Rates of Ventilator Associated Pneumonia

Georgetown Hospital	Cases: 0
Milton Hospital	Cases: 0
Oakville Hospital	Cases: 0

Rates of Central-Line Infections

Georgetown Hospital	Cases: 0
Milton Hospital	Cases: 0
Oakville Hospital	Cases: 0

Rates of New Hospital Acquired VRE Infections

Georgetown Hospital	Cases: 0
Milton Hospital	Cases: 0
Oakville Hospital	Cases: 0

Rates of New Hospital Acquired MRSA Bloodstream Infections

Georgetown Hospital	Cases: 0
Milton Hospital	Cases: 0
Oakville Hospital	Cases: 3
	Rate: .10

SSI Prevention Indicator (Antibiotic Timing) Rates

The percentage of time our health care team at HHS gave patients the antibiotics within the appropriate time period before hip or knee joint replacement surgery. Only patients, 18 years or older, who are about to undergo primary hip or knee joint replacement surgery are included. At HHS, hip and knee total joint replacement surgeries are only performed at the Oakville Hospital.

Oakville Hospital: 99.15%

Monthly Indicator

Rates of Hospital Acquired *C. difficile* Infections at HHS for March 2010

Georgetown Hospital	Cases: 0
Milton Hospital	Cases: 1
	Rate: .56
Oakville Hospital	Cases: 6
	Rate: .61

Annual Indicator

Annual Hand Hygiene Compliance Rates

Hospitals across Ontario are required to audit and report their hand hygiene compliance rates annually on two indicators, the *Before Initial Patient or Patient Environment Contact*, and, *After Patient or Patient Environment Contact*.

	BEFORE initial patient or patient environment contact	AFTER initial patient or patient environment contact
	2010	2010
GH	39.91%	70.83%
MDH	46.93%	71.39%
OTMH	51.32%	75.46%
Prov. Avg.	65.41%	78.49%