New Mexico Healthcare-associated Infections Annual Report for 2019

Facility-specific Addendum

The information presented here supplements the New Mexico Healthcare-associated Infections Annual Report prepared by the New Mexico Healthcare-associated Infections Advisory Committee and released July 2019. The report is available at http://nmhealth.org/go/hai.

Facility-specific healthcare-associated infection data can be used in your conversations with your healthcare providers to discuss what is being done to protect your health and what prevention steps you can also take.

The National Healthcare Safety Network (NHSN)—the Centers for Disease Control and Prevention (CDC) national healthcare-associated infections (HAI) electronic tracking system—reset the national baseline in 2015, meaning that the target standardized infection ratio (SIR) was changed using updated infection data and risk adjustment methodology. Previously calculated SIRs had different baseline years for each infection and facility type; therefore, the SIRs from previous years cannot be directly compared to the SIRs calculated using the updated baseline. Because the risk adjustment models used to calculate SIRs with 2015 baseline data differ for acute care hospitals and critical access hopitals, and are reported separately by NHSN, the data are presented here in separate tables.

The 2018 data in all tables reflect a snapshot of data available in NHSN as of May 29, 2019.

Facility-specific central line-associated bloodstream infection data

Table 1: Acute care hospital adult and/or pediatric intensive care unit (ICU) central line-associated bloodstream infection (CLABSI) reporting, with or without standardized infection ratios (SIRs)

Table 1a: Critical access hospital adult and/or pediatric intensive care unit (ICU) central lineassociated bloodstream infection (CLABSI) reporting, with or without standardized infection ratios (SIRs)

Table 2: Neonatal intensive care unit (NICU) central line-associated bloodstream infection (CLABSI) facility-specific reporting, with or without standardized infection ratios (SIRs)

Table 3: Acute care hospital non-intensive care unit (non-ICU) wards central line-associated bloodstream infection (CLABSI) facility-specific reporting, with or without standardized infection ratios (SIRs)

Table 3a: Critical access hospital non-intensive care unit (non-ICU) wards central line-associated bloodstream infection (CLABSI) facility-specific reporting, with or without standardized infection ratios (SIRs)

Released: 10/31/2017

Facility-specific laboratory-identified *Clostridium* difficile infection and methicillin-resistant Staphylococcus aureus bacteremia infection data

Table 4: Acute care hospital facility-wide inpatient laboratory-identified *Clostridium difficile* infections (CDI)

Table 4a: Critical access hospital facility-wide inpatient laboratory-identified *Clostridium difficile* infections (CDI)

Table 5: Acute care hospital facility-wide inpatient laboratory-identified methicillin-resistant Staphylococcus aureus (MRSA) infections

Table 5a: Critical access hospital facility-wide inpatient laboratory-identified methicillin-resistant Staphylococcus aureus (MRSA) infections

Facility-specific catheter-associated urinary tract infection data

Table 6: Acute care hospital facility catheter-associated urinary tract infection (CAUTI) facility-specific reporting, with or without standardized infection ratios (SIRs)

Table 6a: Critical access hospital facility catheter-associated urinary tract infection (CAUTI) facility-specific reporting, with or without standardized infection ratios (SIRs)

Facility-specific healthcare personnel influenza vaccination rates for influenza seasons 2018-2019, 2017-2018, 2016-2017, and 2015-2016

Table 7: Healthcare personnel (HCP) influenza vaccination rates for facilities participating in voluntary NM HCP influenza vaccination data submission for the 2015-2016 through 2018-2019 seasons, current NM statewide aggregate rate for this group, and national goals

Table 1: Acute care hospital adult and/or pediatric intensive care unit (ICU) central line-associated bloodstream infection (CLABSI) reporting, with or without standardized infection ratios (SIRs) This table shows the observed and predicted CLABSIs for all acute care hospitals which reported ICU data for January through December 2018. Where NHSN predicted less than one CLABSI, a SIR is not calculated.

Acute Care Hospital	Number of units in SIR calculation	of CLABSIs	Number of CLABSIs predicted by NHSN calculation*	Facility ICU- only SIR [†]	95% confidence interval [‡]	Comparison between facility ICU SIR and NHSN SIR (1.0)§
Alta Vista Regional H	lospital					
2018	1	0	0.04	NC	Not applicable	Not applicable
2017	1	0	0.06	NC	Not applicable	Not applicable
2016	1	0	0.05	NC	Not applicable	Not applicable
Carlsbad Medical Ce	nter					
2018	1	0	0.14	NC	Not applicable	Not applicable
2017	1	0	0.07	NC	Not applicable	Not applicable
2016	1	0	0.17	NC	Not applicable	Not applicable

Acute Care Hospital	Number of units in SIR calculation	Number of CLABSIs observed by the facility	Number of CLABSIs predicted by NHSN calculation*	Facility ICU- only SIR [†]	95% confidence interval [‡]		Comparison between facility ICU SIR and NHSN SIR (1.0)§
CHRISTUS St. Vince	nt Regional M	ledical Cente			ı		
2018	1	0	1.13	0.00	NC	2.63	No different
2017	1	4	1.34	2.97	0.94	7.16	No different
2016	1	7	1.65	4.24	1.85	8.39	Worse
Eastern New Mexico	Medical Cent		0.60	NC	Not on	liooblo	Not applicable
2018 2017	1	1 0	0.69 0.43	NC	Not app		Not applicable Not applicable
2016	1	0	0.43	NC	Not app		Not applicable
Gerald Champion Re	gional Medica		0.1.2		[ттот арриоальто
2018	1	1	0.77	NC	Not app	olicable	Not applicable
2017	1	0	0.57	NC	Not app	olicable	Not applicable
2016	1	1	0.58	NC	Not app	olicable	Not applicable
Gila Regional Medica	l Center						, ,
2018	1	0	0.21	NC	Not app	olicable	Not applicable
2017	1	0	0.11	NC	Not applicable		Not applicable
2016	1	0	0.05	NC	Not applicable		Not applicable
Heart Hospital of New Mexico at Lovelace Medical Center							
2018	1	2	2.08	0.96	0.15	3.17	No different
2017	1	0	1.86	0.0	NC	1.60	No different
2016	1	2	1.97	1.01	0.17	3.35	No different
Lea Regional Medica	l Center						
2018	1	0	0.24	NC	Not app	olicable	Not applicable
2017	1	0	0.16	NC	Not app	olicable	Not applicable
2016	1	0	0.09	NC	Not app	olicable	Not applicable
Los Alamos Medical (Center						
2018	1	0	0.02	NC	Not app	olicable	Not applicable
2017	1	0	0.03	NC	Not app	olicable	Not applicable
2016	1	0	0.01	NC	Not app	olicable	Not applicable
Lovelace Regional Ho	ospital - Rosw	/ell					
2018	1	0	0.05	NC	Not app	olicable	Not applicable
2017	1	0	0.04	NC	Not app	olicable	Not applicable
2016	1	0	0.2	NC	Not app	olicable	Not applicable
Lovelace Medical Cer	nter						
2018	1	0	3.51	0.00	NC	0.85	★Better
2017	1	2	3.00	0.66	0.11	2.19	No different
2016	1	6	4.15	1.44	0.58	3.00	No different

Hospital SIR CLABSIS CLABSIS CLABSIS CLABSIS Calculation CLABSIS predicted by http: calculation by the facility calculation by http: calculation by http: calculation by http: calculation calculation	Acute Care	Number of	Number	Number of	Facility	95	5%	Comparison		
Lovelace Westside Hospital 2018								between facility		
Lovelace Westside Hospital 2018						inte	rval [‡]			
Lovelace Westside Hospital 2018		calculation			SIRT			NHSN SIR (1.0) ⁸		
2018				Calculation		lower	upper			
2017	Lovelace Westside H	lospital								
2016	2018	1	0	0.22	NC	Not ap	plicable	Not applicable		
Description Company Company	2017	1	0	0.24	NC	Not ap	plicable	Not applicable		
2018	2016	1	0	0.15	NC	Not applicable		Not applicable		
2017	Lovelace Women's H	lospital								
Memorial Medical Center 2018	2018	1	0	0.48	NC	Not ap	plicable	Not applicable		
Memorial Medical Center 2018	2017	1	1	0.43	NC	Not ap	plicable	Not applicable		
2018	2016	1	1	0.53	NC	Not ap	plicable	Not applicable		
2017	Memorial Medical Ce	nter								
Mountain View Regional Medical Center	2018	1	1	3.33	0.30	0.01	1.47	No different		
Mountain View Regional Medical Center 2018	2017	1	0	2.92	0.0	NC	1.02	No different		
2018	2016	1	0	3.09	0.00	0.04	0.96	★Better		
2017 1 2 3.26 0.61 0.10 2.02 No different 2016 1 5 2.92 1.70 0.62 3.78 No different Northern Navajo Medical Center 2018 1 0 0.14 NC Not applicable Not applicable 2017 1 0 0.09 NC Not applicable Not applicable 2016 1 0 0.04 NC Not applicable Not applicable Plains Regional Medical Center 2018 1 0 0.23 NC Not applicable Not applicable 2017 1 1 0.13 NC Not applicable Not applicable 2016 1 0 0.11 NC Not applicable Not applicable 2016 1 0 0.11 NC Not applicable Not applicable 2016 1 0 0.11 NC Not applicable Not applicable 2016 1 0 0.24 NC Not applicable Not applicable 2018 1 0 0.24 NC Not applicable Not applicable 2017 1 1 0.36 NC Not applicable Not applicable 2018 1 0 0.42 NC Not applicable Not applicable 2016 1 0 0.42 NC Not applicable Not applicable 2016 1 0 0.42 NC Not applicable Not applicable 2016 1 0 0.42 NC Not applicable Not applicable 2016 1 0 0.42 NC Not applicable Not applicable 2016 1 0 0.42 NC Not applicable Not applicable 2016 1 0 0.42 NC Not applicable Not applicable 2018 3 5 9.75 0.51 0.18 1.13 No different 2017 3 15 8.02 1.87 1.08 3.01 No different 2018 3 16 9.73 1.64 0.97 2.61 No different 2018 1 0 1.01 0.00 NC 2.95 No different	Mountain View Region	nal Medical C	enter				l			
Northern Navajo Medical Center	2018	1	1	3.38	0.29	0.01	1.45	No different		
Northern Navajo Medical Center 2018	2017	1	2	3.26	0.61	0.10	2.02	No different		
2018 1 0 0.14 NC Not applicable Not applicable 2017 1 0 0.09 NC Not applicable Not applicable 2016 1 0 0.04 NC Not applicable Not applicable Plains Regional Medical Center 2018 1 0 0.23 NC Not applicable Not applicable 2017 1 1 0.13 NC Not applicable Not applicable 2016 1 0 0.11 NC Not applicable Not applicable Presbyterian Espanola Hospital 2018 1 0 0.24 NC Not applicable Not applicable 2017 1 1 0.36 NC Not applicable Not applicable 2016 1 0 0.42 NC Not applicable Not applicable Presbyterian Healthcare Services 2018 3 5 9.75 0.51 0.18	2016	1	5	2.92	1.70	0.62	3.78	No different		
2017 1 0 0.09 NC Not applicable Not applicable 2016 1 0 0.04 NC Not applicable Not applicable Plains Regional Medical Center 2018 1 0 0.23 NC Not applicable Not applicable 2017 1 1 0.13 NC Not applicable Not applicable 2016 1 0 0.11 NC Not applicable Not applicable Presbyterian Espanola Hospital 2018 1 0 0.24 NC Not applicable Not applicable 2017 1 1 0.36 NC Not applicable Not applicable 2016 1 0 0.42 NC Not applicable Not applicable Presbyterian Healthcare Services 2018 3 5 9.75 0.51 0.18 1.13 No different 2016 3 15 8.02 1.87 1	Northern Navajo Med	dical Center								
Plains Regional Medical Center	2018	1	0	0.14	NC	Not app	olicable	Not applicable		
Plains Regional Medical Center	2017	1	0	0.09	NC	Not app	olicable	Not applicable		
2018 1 0 0.23 NC Not applicable Not applicable 2017 1 1 0.13 NC Not applicable Not applicable 2016 1 0 0.11 NC Not applicable Not applicable Presbyterian Espanola Hospital 2018 1 0 0.24 NC Not applicable Not applicable 2017 1 1 0.36 NC Not applicable Not applicable 2016 1 0 0.42 NC Not applicable Not applicable Presbyterian Healthcare Services 2018 3 5 9.75 0.51 0.18 1.13 No different 2017 3 15 8.02 1.87 1.08 3.01 Worse 2016 3 16 9.73 1.64 0.97 2.61 No different Presbyterian Rust Medical Center 2018 1 0 1.01 0.0	2016	1	0	0.04	NC	Not app	olicable	Not applicable		
2018 1 0 0.23 NC Not applicable Not applicable 2017 1 1 0.13 NC Not applicable Not applicable 2016 1 0 0.11 NC Not applicable Not applicable Presbyterian Espanola Hospital 2018 1 0 0.24 NC Not applicable Not applicable 2017 1 1 0.36 NC Not applicable Not applicable 2016 1 0 0.42 NC Not applicable Not applicable Presbyterian Healthcare Services 2018 3 5 9.75 0.51 0.18 1.13 No different 2017 3 15 8.02 1.87 1.08 3.01 Worse 2016 3 16 9.73 1.64 0.97 2.61 No different Presbyterian Rust Medical Center 2018 1 0 1.01 0.0										
2017 1 1 0.13 NC Not applicable Not applicable 2016 1 0 0.11 NC Not applicable Not applicable Presbyterian Espanola Hospital 2018 1 0 0.24 NC Not applicable Not applicable 2017 1 1 0.36 NC Not applicable Not applicable 2016 1 0 0.42 NC Not applicable Not applicable Presbyterian Healthcare Services 2018 3 5 9.75 0.51 0.18 1.13 No different 2017 3 15 8.02 1.87 1.08 3.01 Worse 2016 3 16 9.73 1.64 0.97 2.61 No different Presbyterian Rust Medical Center 2018 1 0 1.01 0.00 NC 2.95 No different	Plains Regional Medi	ical Center								
2016 1	2018	1	0	0.23	NC	Not app	olicable	Not applicable		
Presbyterian Espanola Hospital 2018 1 0 0.24 NC Not applicable Not applicable 2017 1 1 0.36 NC Not applicable Not applicable 2016 1 0 0.42 NC Not applicable Not applicable Presbyterian Healthcare Services 2018 3 5 9.75 0.51 0.18 1.13 No different 2017 3 15 8.02 1.87 1.08 3.01 Worse 2016 3 16 9.73 1.64 0.97 2.61 No different Presbyterian Rust Medical Center 2018 1 0 1.01 0.00 NC 2.95 No different	2017	1	1	0.13	NC	Not app	olicable	Not applicable		
2018 1 0 0.24 NC Not applicable Not applicable 2017 1 1 0.36 NC Not applicable Not applicable 2016 1 0 0.42 NC Not applicable Not applicable Presbyterian Healthcare Services 2018 3 5 9.75 0.51 0.18 1.13 No different 2017 3 15 8.02 1.87 1.08 3.01 Worse 2016 3 16 9.73 1.64 0.97 2.61 No different Presbyterian Rust Medical Center 2018 1 0 1.01 0.00 NC 2.95 No different	2016	1	0	0.11	NC	Not app	olicable	Not applicable		
2017 1 1 0.36 NC Not applicable Not applicable 2016 1 0 0.42 NC Not applicable Not applicable Presbyterian Healthcare Services 2018 3 5 9.75 0.51 0.18 1.13 No different 2017 3 15 8.02 1.87 1.08 3.01 Worse 2016 3 16 9.73 1.64 0.97 2.61 No different Presbyterian Rust Medical Center 2018 1 0 1.01 0.00 NC 2.95 No different	Presbyterian Espano	la Hospital								
2016 1 0 0.42 NC Not applicable Not applicable Presbyterian Healthcare Services 2018 3 5 9.75 0.51 0.18 1.13 No different 2017 3 15 8.02 1.87 1.08 3.01 Worse 2016 3 16 9.73 1.64 0.97 2.61 No different Presbyterian Rust Medical Center 2018 1 0 1.01 0.00 NC 2.95 No different	2018	1	0	0.24	NC	Not ap	plicable	Not applicable		
Presbyterian Healthcare Services 2018 3 5 9.75 0.51 0.18 1.13 No different 2017 3 15 8.02 1.87 1.08 3.01 Worse 2016 3 16 9.73 1.64 0.97 2.61 No different Presbyterian Rust Medical Center 2018 1 0 1.01 0.00 NC 2.95 No different	2017	1	1	0.36	NC		•	Not applicable		
2018 3 5 9.75 0.51 0.18 1.13 No different 2017 3 15 8.02 1.87 1.08 3.01 Worse 2016 3 16 9.73 1.64 0.97 2.61 No different Presbyterian Rust Medical Center 2018 1 0 1.01 0.00 NC 2.95 No different	2016	1	0	0.42	NC	Not ap	plicable	Not applicable		
2017 3 15 8.02 1.87 1.08 3.01 Worse 2016 3 16 9.73 1.64 0.97 2.61 No different Presbyterian Rust Medical Center 2018 1 0 1.01 0.00 NC 2.95 No different							1			
2016 3 16 9.73 1.64 0.97 2.61 No different Presbyterian Rust Medical Center 2018 1 0 1.01 0.00 NC 2.95 No different							1			
Presbyterian Rust Medical Center 2018 1 0 1.01 0.00 NC 2.95 No different								_		
2018 1 0 1.01 0.00 NC 2.95 No different			16	9.73	1.64	0.97 2.61 No different				
	•	1	0	1.01	0.00	NC	2.05	No different		
2017 1 1.10 0.30 0.04 4.40 a lto different										
2016 1 3 1.05 2.84 0.72 7.74 No different										

Acute Care Hospital	Number of units in SIR calculation	Number of CLABSIs observed by the facility	Number of CLABSIs predicted by NHSN calculation*	Facility ICU- only SIR [†]	95% confidence interval [‡]		Comparison between facility ICU SIR and NHSN SIR (1.0)§
Rehoboth McKinley (Christian Heal	th Care Servi	ices				
2018	1	0	0.07	NC	Not app	olicable	Not applicable
2017	1	0	0.07	NC	Not app	olicable	Not applicable
2016	1	0	0.09	NC	Not app	olicable	Not applicable
Roosevelt General H	ospital						
2018	1	0	0.00	NC	Not app	olicable	Not applicable
2017	1	0	0.00	NC	Not app	olicable	Not applicable
2016	1	0	0.00	NC	Not app	olicable	Not applicable
San Juan Regional M	ledical Center	ſ					
2018	1	0	1.19	0.00	NC	2.50	No different
2017	1	1	1.21	0.82	0.04	4.07	No different
2016	1	0	1.44	0.00	NC	2.07	No different
University of New Me	xico Hospital						
2018	4	5	14.41	0.34	0.12	0.76	★Better
2017	4	10	14.37	0.69	0.35	1.24	No different
2016	4	13	16.19	0.80	0.44	1.33	No different
University of New Me	xico Sandova	ıl Regional M	edical Center				
2018	1	0	0.53	NC	Not ap	plicable	Not applicable
2017	1	1	0.51	NC	Not ap	plicable	Not applicable
2016	1	0	0.62	NC	Not ap	plicable	Not applicable
New Mexico Acute (Care Hospita	Statewide A	Aggregate			1	
2018	30	16	43.96	0.36	0.21	0.57	★Better
2017	30	40	41.89	0.95	0.69	1.28	No different
2016	30	55	45.49	1.20	0.92	1.56	No different

Table 1a: Critical access hospital adult and/or pediatric intensive care unit (ICU) central line-associated bloodstream infection (CLABSI) reporting, with or without standardized infection ratios (SIRs) This table shows the observed and predicted CLABSIs for all critical access hospitals which reported ICU data for January through December 2018. Where NHSN predicted less than one CLABSI, a SIR is not calculated.

Critical Access Hospital	Number of units in SIR calculation	Number of CLABSIs observed by the facility	Number of CLABSIs predicted by NHSN calculation	Facility ICU- only SIR [†]	95% confidence interval [‡]	Comparison between facility ICU SIR and NHSN SIR (1.0)§	
Cibola General Hospi	tal						
2018	1	0	0.00	NC	Not applicable	Not applicable	
2017	1	0	0.00	NC	Not applicable	Not applicable	
2016	1	0	0.13	NC	Not applicable	Not applicable	
Holy Cross Hospital			ı				
2018	1	0	0.04	NC	Not applicable	Not applicable	
2017	1	0	0.01	NC	Not applicable	Not applicable	
2016	1	1	0.13	NC	Not applicable	Not applicable	
Lincoln County Medic	cal Center						
2018	1	0	0.02	NC	Not applicable	Not applicable	
2017	1	0	0.01	NC	Not applicable	Not applicable	
2016	1	0	0.00	NC	Not applicable	Not applicable	
Mimbres Memorial Ho	ospital						
2018	1	0	0.01	NC	Not applicable	Not applicable	
2017	1	0	0.02	NC	Not applicable	Not applicable	
2016	1	0	0.00	NC	Not applicable	Not applicable	
Miners' Colfax Medica	al Center						
2018	1	0	0.00	NC	Not applicable	Not applicable	
2017	1	0	0.00	NC	Not applicable	Not applicable	
2016	1	0	0.00	NC	Not applicable	Not applicable	
New Mexico Critical		pital Aggrega					
2018	5	0	0.08	NC	Not applicable	Not applicable	
2017	5	0	0.09	NC	Not applicable	Not applicable	
2016	3	1	0.12	NC	Not applicable	Not applicable	

CLABSI = central line-associated bloodstream infection NHSN = National Healthcare Safety Network

ICU = intensive care unit SIR = standardized infection ratio

NC = Not calculated. In alignment with reporting standards followed by NHSN and CDC, facilities with less than one predicted infection does not have an SIR calculated (NC) due to reduced reliability of data. The lower bound of the 95% confidence interval is not calculated (NC) when the observed infections equal zero.

^{*} Calculated from 2015 baseline CLABSI data for corresponding location type and central line days.

[†]The SIR is a summary statistic used to compare the healthcare-associated infection (HAI) experience of a particular group to a reference population (i.e., NHSN 2015 baseline). The SIR calculation is based on dividing the total number of observed CLABSI events by a "predicted" number of events using the CLABSI rates from the reference population.

[‡] The confidence interval indicates that 95% of the time, the true value of the SIR lies somewhere between the upper and lower limits of this range. When the SIR is near zero or equal to zero, the lower bound of the 95% confidence interval is not calculated, therefore shown as "NC."

[§]Comparison to the NHSN SIR (i.e., the national reference population) is based on a 95% confidence interval. When the confidence interval includes 1.0 it is not considered statistically significant, therefore categorized as "no different" and indicated by a green

square. When the confidence interval does not include 1.0 it is considered statistically significant. When the confidence interval is less than 1.0 the categorization is "better" than the national reference population, indicated by a blue star, and when the confidence interval is greater than 1.0 the categorization is "worse," indicated by an orange circle

Table 2: Neonatal intensive care unit (NICU) central line-associated bloodstream infection (CLABSI) facility-specific reporting, with or without standardized infection ratios (SIRs)

This table shows the observed and predicted CLABSIs for all facilities which submitted NICU CLABSI data for January through December 2018. For facilities where NHSN predicted less than one CLABSI, a SIR is not calculated.

Facility	Number of units in SIR calculation	Number of CLABSIs observed by the facility	Number of CLABSIs predicted by NHSN calculation	Facility NICU- only SIR [†]	95% confidence interval [‡]		Comparison between facility NICU SIR and NHSN SIR (1.0)§
Carlsbad Medical Ce	enter						
2018	1	0	0.00	NC	Not app	olicable	Not applicable
2017	1	0	0.00	NC	Not app	olicable	Not applicable
2016	1	0	0.00	NC	Not app	olicable	Not applicable
Lovelace Women's I	Hospital						
2018	1	0	0.48	NC		plicable	Not applicable
2017	1	1	1.45	0.68	0.34	3.39	No different
2016	1	0	1.88	0.00	0.15	1.59	No different
Memorial Medical Co	enter						
2018	1	0	0.25	NC	Not app	olicable	Not applicable
2017	1	0	0.38	NC		olicable	Not applicable
2016	1	0	0.43	NC	Not app	olicable	Not applicable
Presbyterian Healtho	care Services						
2018	1	2	3.29	0.60	0.10	2.00	No different
2017	1	2	3.69	0.54	0.09	1.78	No different
2016	1	3	3.62	0.82	0.21	2.25	No different
University of New Mo	exico Hospital						
2018	1	2	2.48	0.80	0.13	2.65	No different
2017	1	3	2.64	1.13	0.28	3.09	No different
2016	1	3	3.69	0.81	0.20	2.20	No different
New Mexico Acute	Care Hospita	I Aggregate					_
2018	5	4	7.28	0.54	0.17	1.32	No different
2017	6	6	8.18	0.73	0.29	1.52	No different
2016	6	6	9.64	0.62	0.25	1.29	No different

CLABSI = central line-associated bloodstream infection NHSN = National Healthcare Safety Network

NICU = neonatal intensive care unit SIR = standardized infection ratio

NC = Not calculated. In alignment with reporting standards followed by NHSN and CDC, facilities with less than one predicted infection do not have an SIR calculated (NC) due to reduced reliability of data. The lower bound of the 95% confidence interval is not calculated (NC) when the observed infections equal zero.

§Comparison to the NHSN SIR (i.e., the national reference population) is based on a 95% confidence interval. When the confidence interval includes 1.0 it is not considered statistically significant, therefore categorized as "no different" and indicated by a green square. When the confidence interval does not include 1.0 it is considered statistically significant. When the confidence interval is less than 1.0 the categorization is "better" than the national reference population, indicated by a blue star, and when the confidence interval is greater than 1.0 the categorization is "worse," indicated by an orange circle.

^{*}Calculated from 2015 NHSN baseline CLABSI data for corresponding location type and central line days.

[†]The SIR is a summary statistic used to compare the healthcare-associated infection (HAI) experience of a particular group to a reference population (i.e., NHSN 2015 baseline). The SIR calculation is based on dividing the total number of observed CLABSI events by a "predicted" number of events using the CLABSI rates from the reference population.

[‡] The confidence interval indicates that 95% of the time, the true value of the SIR lies somewhere between the upper and lower limits of this range. When the SIR is near zero or equal to zero, the lower bound of the 95% confidence interval is not calculated, therefore shown as "NC."

Table 3: Acute care hospital non-intensive care unit (non-ICU) ward central line-associated bloodstream infection (CLABSI) facility-specific reporting, with or without standardized infection ratios (SIRs)

This table shows the observed and predicted CLABSIs for acute care hospitals which reported non-ICU CLABSI data for January through December 2018. For facilities where NHSN predicted less than one CLABSI, a SIR is not calculated.

Acute Care Hospital	Number of units in SIR	Number of CLABSIs observed	Number of CLABSIs predicted	Facility non- ICU	95% confidence interval [‡]	Comparison between facility non-ICU
	calculation	by the	by NHSN	SIR [†]	interval	SIR and NHSN
		facility	calculation		lower upper	SIR (1.0)§
Alta Vista			^		lower upper	
2018	1 1	0	0.03	NC	Not applicable	Not applicable
2017	1	0	0.05	NC	Not applicable	Not applicable
2016	1	0	0.03	NC	Not applicable	Not applicable
Artesia General				•		
2018	1	0	0.14	NC	Not applicable	Not applicable
2017	2	0	0.10	NC	Not applicable	Not applicable
2016	1	0	0.06	NC	Not applicable	Not applicable
Carlsbad Medical Ce	enter					
2018	1	0	0.11	NC	Not applicable	Not applicable
2017	1	0	0.13	NC	Not applicable	Not applicable
2016	1	0	0.14	NC	Not applicable	Not applicable
CHRISTUS St. Vinc	ent Regional I	Medical Cente	er			•
2018	15	1	0.80	NC	Not applicable	Not applicable
2017	6	1	1.00	0.99	0.05 4.92	No different
2016	7	1	0.36	NC	Not applicable	Not applicable
Eastern New Mexico	Medical Cer	iter				·
2018	1	1	0.45	NC	Not applicable	Not applicable
2017	1	0	0.31	NC	Not applicable	Not applicable
2016	1	0	0.09	NC	Not applicable	Not applicable
Gerald Champion R	egional Medic	al Center				
2018	2	1	0.61	NC	Not applicable	Not applicable
2017	2	0	0.47	NC	Not applicable	Not applicable
2016	2	0	0.51	NC	Not applicable	Not applicable
Guadalupe County H	lospital				•	•
2018	1	0	0.00	NC	Not applicable	Not applicable
2017	1	0	0.00	NC	Not applicable	Not applicable
2016	1	0	0.00	NC	Not applicable	Not applicable
Heart Hospital of Ne	w Mexico at L	ovelace Med	ical Center			
2018	1	0	0.95	NC	Not applicable	Not applicable
2017	1	0	0.95	NC	Not applicable	Not applicable
2016	1	0	0.61	NC	Not applicable	Not applicable
Lea Regional Medic	· -					
2018	1	0	0.13	NC	Not applicable	Not applicable
2017	1	0	0.16	NC	Not applicable	Not applicable
2016	1	0	0.09	NC	Not applicable	Not applicable

Acute Care Hospital	Number of units in SIR calculation	CLABSIs observed	Number of CLABSIs predicted by NHSN calculation	Facility non- ICU SIR†	confidence interval [‡]		Comparison between facility non-ICU SIR and NHSN SIR (1.0)§
			*		lower	upper	
Lovelace Regional F 2018					Notono	liaabla	Not oppliedble
2016	2	0	0.09	NC NC	Not app		Not applicable Not applicable
2017	2 2	0	0.11 0.12	NC NC	Not app		Not applicable
Lovelace Medical Ce		U	0.12	NC	ινοι αρρ	licable	Not applicable
2018	5	0	4.82	0.00	NC	0.62	★Better
2017	5	0	3.71	0.00	NC	0.80	A
							Better
2016	5	5	4.97	1.00	0.36	2.22	No different
Lovelace Westside F 2018		0	0.29	NC	Not app	licable	Not applicable
2017	4	0	0.29	NC NC	Not app		Not applicable
2016	3	0	0.22	NC NC	Not app		Not applicable
2010	3	U	0.21	NC	ινοι αρρ	ilicable	Not applicable
Lovelace Women's I	L Hospital						
2018	1	0	0.38	NC	Not app	licable	Not applicable
2017	1	0	0.38	NC	Not app		Not applicable
2016	1	0	0.48	NC	Not app		Not applicable
Memorial Medical Co	1		0.10				
2018	3	0	2.03	0.00	NC	1.47	No different
2017	2	2	2.11	0.94	0.15	3.13	No different
2016	2	0	1.67	0.00	0.18	1.78	No different
Mountain View Regi	onal Medical	Center					
2018	3	0	1.77	0.00	NC	1.69	No different
2017	3	2	1.50	1.32	0.22	4.38	No different
2016	2	3	1.33	2.24	0.57	6.12	No different
Northern Navajo Me							
2018	2	0	0.29	NC	Not app	olicable	Not applicable
2017	2	0	0.28	NC	Not app		Not applicable
2016	3	0	0.24	NC	Not app		Not applicable
Plains Regional Med		_	-				
2018	5	1	0.44	NC	Not app	olicable	Not applicable
2017	5	1	0.27	NC	Not app		Not applicable
2016	5	0	0.30	NC	Not app		Not applicable
Presbyterian Espand		•	00		, «P		366300.0
2018	2	0	0.26	NC	Not apr	olicable	Not applicable
2017	1	0	0.38	NC	Not applicable Not applicable		Not applicable
2016	1	0	0.52	NC	Not app		Not applicable
Presbyterian Health	_		0.02	110	ι τοι αργ	moubic	110ι αρρίιοασίο
2018	13	1	2.63	0.37	0.01	1.86	No different
2017	9	3	3.27	0.91	0.01	2.49	No different
	+						_
2016	9	13	9.48	1.37	0.76	2.28	No different

Acute Care Hospital	Number of units in SIR calculation	CLABSIs observed	CLABSIs	Facility non- ICU SIR [†]	con	95% fidence erval [‡]	Comparison between facility non-ICU SIR and NHSN SIR (1.0)§
Presbyterian Rust M		1				T	
2018	2	0	0	NC	Not app	olicable	Not applicable
2017	2	0	0	NC	Not app	olicable	Not applicable
2016	2	0	0	NC	Not app	olicable	Not applicable
Rehoboth McKinley	Christian Hea	alth Care Se				T	
2018	1	0	0.24	NC	Not app	olicable	Not applicable
2017	1	0	0.30	NC	Not app	olicable	Not applicable
2016	1	0	0.30	NC	Not app	olicable	Not applicable
Roosevelt General H	lospital						
2018	1	0	0.00	NC	Not app	olicable	Not applicable
2017	1	0	0.00	NC	Not app	olicable	Not applicable
2016	1	0	0.00	NC	Not app	olicable	Not applicable
San Juan Regional I	Medical Cente	er				1	
2018	1	0	1.31	0.00	NC	2.27	No different
2017	1	0	1.31	0.00	NC	2.28	No different
2016	1	1	1.47	0.67	0.03	3.34	No different
University of New M	exico Hospita					1	
2018	3	2	3.021	0.66	0.11	2.18	No different
2017	7	8	14.10	0.56	0.26	1.07	No different
2016	11	14	14.68	0.95	0.54	1.56	No different
University of New Me	exico Sandov	al Regional	Medical Center				
2018	2	0	1.35	0.00	NC	2.21	No different
2017	1	0	0.81	NC	Not app	licable	Not applicable
2016	2	0	0.64	NC	Not app	licable	Not applicable
New Mexico Acute	Care Hopita	l Aggregate)				
2018	74	7	22.22	0.31	0.13	0.62	★Better
2017	55	17	34.37	0.49	0.29	0.77	★Better
2016	66	37	39.29	0.94	0.673	1.28	No different

Table 3a: Critical access hospital non-intensive care unit (non-ICU) central line-associated bloodstream infection (CLABSI) facility-specific reporting, with or without standardized infection ratios (SIRs)This table shows the observed and predicted CLABSIs for critical access hospitals which reported non-ICU CLABSI data for January through December 2018. For facilities where NHSN predicted less than one CLABSI, a SIR is not calculated.

Critical Acess Hospital	Number of units in SIR calculation	of CLABSIs	Number of CLABSIs predicted by NHSN calculation	Facility non- ICU SIR [†]	95% confidence interval [‡]	Comparison between facility non-ICU SIR and NHSN SIR (1.0) [§]
Cibola General Hosp	oital					
2018	1	0	0.07	NC	Not applicable	Not applicable
2017	1	0	0.03	NC	Not applicable	Not applicable
Dr. Dan C. Trigg Mei	morial Hospit	al				_
2018	1	0	0.01	NC	Not applicable	Not applicable
2017	1	0	0.02	NC	Not applicable	Not applicable
2016	1	0	0.02	NC	Not applicable	Not applicable
Holy Cross Hospital						
2018	1	0	0.04	NC	Not applicable	Not applicable
2017	1	0	0.01	NC	Not applicable	Not applicable
Miners Colfax						
2018	2	0	0.00	NC	Not applicable	Not applicable
2017	2	0	0.00	NC	Not applicable	Not applicable
2016	1	0	0.00	NC	Not applicable	Not applicable
Nor-Lea General Hos 2018	•		0.00	NO	Not applicable	Not applicable
	1	0	0.02	NC	Not applicable	Not applicable
2017	1	0	0.04	NC	Not applicable	Not applicable
2016	1	0	0.03	NC	Not applicable	Not applicable
Sierra Vista Hospital						
2018	1	0	0.01	NC	Not applicable	Not applicable
2017	1	0	0.00	NC	Not applicable	Not applicable
2016	1	0	0.00	NC	Not applicable	Not applicable
Socorro General Hos	spital					
2018	2	0	0.12	NC	Not applicable	Not applicable
2017	1	1	0.12	NC	Not applicable	Not applicable
2016	1	0	0.04	NC	Not applicable	Not applicable
New Mexico Critica	I Access Ho	spital Aggre	gate			
2018	9	0	0.29	NC	Not applicable	Not applicable
2017	9	1	0.30	NC	Not applicable	Not applicable
2016	5	0	0.12	NC	Not applicable	Not applicable

CLABSI = central line-associated bloodstream infection NHSN = National Healthcare Safety Network

ICU = intensive care unit SIR = standardized infection ratio

NC = Not calculated. In alignment with reporting standards followed by NHSN and CDC, facilities with less than one predicted infection do not have an SIR calculated (NC) due to reduced reliability of data. The lower bound of the 95% confidence interval is not calculated (NC) when the observed infections equal zero.

^{*}Calculated from 2015 baseline NHSN CLABSI data for corresponding location type and central line days.

[†]The SIR is a summary statistic used to compare the healthcare-associated infection (HAI) experience of a particular group to a reference population (i.e., NHSN 2015 data). The SIR calculation is based on dividing the total number of observed CLABSI events by a "predicted" number of events using the CLABSI rates from the reference population.

[‡] The confidence interval indicates that 95% of the time, the true value of the SIR lies somewhere between the upper and lower limits of this range. When the SIR is near zero or equal to zero, the lower bound of the 95% confidence interval is not calculated, therefore shown as "NC."

[§]Comparison to the NHSN SIR (i.e., the national reference population) is based on a 95% confidence interval. When the confidence interval includes 1.0 it is not considered statistically significant, therefore categorized as "no different" and indicated by a green square. When the confidence interval does not include 1.0 it is considered statistically significant. When the confidence interval is less than 1.0 the categorization is "better" than the national reference population, indicated by a blue star, and when the confidence interval is greater than 1.0 the categorization is "worse," indicated by an orange circle.

Table 4: Acute care hospital facility-wide inpatient laboratory-identified *Clostridium difficile* infections (CDI)

This table shows the number of infections identified through positive laboratory tests of inpatients with healthcare facility-onset (HO) infections (i.e., positive tests on specimens collected more than three days after admission) for January through December 2018.

Acute Care Hospital	Number of hospital- onset CDI events observed	Number of events predicted by NHSN calculation	Facility SIR [†]	95% confidence interval [‡]		Comparison between facility SIR and NHSN SIR (1.0) [§]		
Alto Visto Degional Heavital	by facility	*		lower	upper			
Alta Vista Regional Hospital	_	1	0.00	0.44	0.00			
2018	2	2.25	0.88	0.14	2.93 2.41	No different		
2016	1	2.03	0.49 0.86	0.02	2.41	No different		
Artesia General Hospital	2	2.31	0.00	0.14	2.00	No different		
·								
2017	0	0.51	NC	Not applicable		Not applicable		
2016	0	0.51	NC		plicable	Not applicable		
	1	0.70	NC	иот ар	plicable	Not applicable		
Carlsbad Medical Center	4	0.57	0.07	0.04	4.07	N I I'CC		
2018	1	3.57	0.27	0.01	1.37	No different		
2017	2	3.39	0.58	0.09	1.94	No different		
2016	6	4.89	1.22	0.49	2.54	No different		
CHRISTUS St. Vincent Regional N								
2018	16	24.70	0.64	0.38	1.02	No different		
2017	17	27.13	0.62	0.37	0.98	★Better		
2016	29	28.90	0.96	0.68	1.42	No different		
Eastern New Mexico Medical Cent	ter							
2018	6	9.71	0.61	0.25	1.28	No different		
2017	6	12.21	0.49	0.19	1.02	No different		
2016	10	13.80	0.30	0.36	1.29	No different		
Gerald Champion Regional Medica	al Center							
2018	13	8.61	1.50	0.83	2.51	No different		
2017	17	8.96	1.89	1.14	2.97	Worse		
2016	13	7.91	1.62	0.91	2.73	No different		
Gila Regional Medical Center								
2018	6	3.80	1.57	0.63	3.27	No different		
2017	7	2.60	2.69	1.17	5.32	Worse		
2016	0	3.69	0	NC	0.81	★Better		
Guadalupe County Hospital								
2018	0	0.11	NC	Not a	pplicable	Not applicable		
2017	0	0.14	NC	Not a	pplicable	Not applicable		
2016	1	0.11	NC	Not a	pplicable	Not applicable		

Acute Care Hospital	Number of hospital- onset CDI events observed	Number of events predicted by NHSN calculation	Facility SIR [†]	95% confidence interval [‡] lower upper		Comparison between facility SIR and NHSN SIR (1.0) [§]
Heart Hospital of NM at Lovelace I	by facility	*		lower	upper	
2018	9	8.14	1.10	0.53	2.02	No different
2017	11	6.57	1.67	0.88	2.90	No different
2016	8	7.08	1.12	0.52	2.14	No different
Lea Regional Medical Center	0	7.00	1.12	0.02	2.17	- No different
2018	0	2.24	0.00	NC	1.33	No different
2017	0	2.36	0	NC	1.2	No different
2016	0	2.46	0	NC	1.21	No different
Los Alamos Medical Center	,		<u> </u>			
2018	0	1.42	0.0	NC	2.10	No different
2017	2	0.86	NC		pplicable	Not applicable
2016	4	1.20	3.327	1.05	8.02	Worse
Lovelace Medical Center		-				
2018	24	36.35	0.66	0.43	0.96	★Better
2017	33	31.22	1.05	0.74	1.46	No different
2016	56	38.63	1.44	1.10	1.18	Worse
Lovelace Regional Hospital- Rosv	vell					
2018	1	1.32	0.75	0.03	3.73	No different
2017	1	1.39	0.71	0.03	3.54	No different
2016	0	1.28	0	NC	2.32	No different
Lovelace Westside Hospital						
2018	2	5.24	0.38	0.06	1.26	No different
2017	2	5.12	0.39	0.06	1.29	No different
2016	6	7.46	0.80	0.326	1.67	No different
Lovelace Women's Hospital						
2018	4	12.44	0.32	0.10	0.77	★Better
2017	11	12.48	0.88	0.46	1.53	No different
2016	6	11.56	0.51	0.21	1.07	No different
Memorial Medical Center						
2018	8	18.14	0.44	0.20	0.83	★Better
2017	27	29.37	0.91	0.61	1.31	No different
2016	18	26.36	0.68	0.41	1.05	No different
Mountain View Regional Medical C	Center					
2018	24	31.78	0.75	0.49	1.10	No different
2017	34	37.13	0.91	0.64	1.26	No different
2016	37	36.20	1.02	0.73	1.39	No different

Acute Care Hospital	Number of hospital- onset CDI events observed	Number of events predicted by NHSN calculation	Facility SIR [†]	95% confidence interval [‡]		Comparison between facility SIR and NHSN SIR (1.0) §
North or Noveia Madical Contar	by facility	*		lower	upper	
Northern Navajo Medical Center	0	2.04	0.00	0.44	0.40	N. USS
2018	2	3.01	0.66	0.11	2.19	No different
2017	2	4.38	0.45	0.76	1.50	No different
2016	3	3.42	0.87	0.22	2.38	No different
Plains Regional Medical Center	Г	C 45	0.04	0.00	4.00	N. Piec
2018	5	6.15	0.81	0.29	1.80	No different
2017	3	5.83	0.51	0.13	1.39	No different
2016	6	6.33	0.94	0.38	1.96	No different
Presbyterian Espanola Hospital	0	4.00	4.40	0.50	0.05	
2018	6	4.09	1.46	0.59	3.05	No different
2017	5	4.05	1.23	0.45	2.73	No different
2016	2	3.67	0.54	0.09	1.80	No different
Presbyterian Healthcare Services						
2018	96	87.31	1.10	0.89	1.33	No different
2017	74	84.32	0.87	0.69	1.09	No different
2016	110	95.65	1.15	0.95	1.38	No different
Presbyterian Rust Medical Center						
2018	22	32.12	0.68	0.44	1.02	No different
2017	30	23.43	1.28	0.87	1.8	No different
2016	14	23.62	0.53	0.33	0.97	★Better
Rehoboth McKinley Christian Heal	th Care Servi					
2018	0	2.62	0	NC	1.14	No different
2017	3	5.15	0.58	0.14	1.58	No different
2016	0	4.86	0	NC	0.61	★Better
Roosevelt General Hospital						
2018	0	0.62	NC		plicable	Not applicable
2017	0	0.42	NC	Not ap	plicable	Not applicable
2016	0	0.09	NC	Not ap	plicable	Not applicable
San Juan Regional Medical Cente	r					
2018	20	26.32	0.76	0.47	1.15	No different
2017	32	31.31	1.02	0.71	1.42	No different
2016	51	40.60	1.25	0.94	1.63	No different
University of New Mexico Hospital						
2018	133	86.92	1.53	1.28	1.80	Worse
2017	109	97.29	1.12	0.92	1.34	No different
2016	109	77.15	1.41	1.16	1.69	Worse
UNM Sandoval Regional Medical (Center					
2018	7	11.41	0.61	0.26	1.21	No different
2017	1	7.50	0.13	0.00	0.65	★Better

Acute Care Hospital	Number of hospital- onset CDI events observed by facility	events predicted by NHSN calculation	Facility SIR [†]	95% confidence interval [‡] lower upper		Comparison between facility SIR and NHSN SIR (1.0) §
2016	12	6.50	1.84	1.0	3.13	No different
New Mexico Acute Care Hospita	I Aggregate					
2018	407	430.99	0.94	0.85	1.03	No different
2017	430	447.28	0.96	0.87	1.05	No different
2016	505	460.86	1.09	1.00	1.19	Worse

Table 4a: Critical access hospital facility-wide inpatient laboratory-identified *Clostridium difficile* infections (CDI)

This table shows the number of infections identified through positive laboratory tests of inpatients with healthcare facility-onset (HO) infections (i.e., positive tests on specimens collected more than three days after admission) for January through December 2018.

Critical Access Hospital	Number of hospital- onset CDI events observed by facility	Number of events predicted by NHSN calculation	Facility SIR [†]	conf	5% idence erval [‡] upper	Comparison between facility SIR and NHSN SIR (1.0) [§]				
Cibola General Hospital										
2018	1	0.97	NC	Not ap	plicable	Not applicable				
2017	1	0.98	NC	Not ap	plicable	Not applicable				
2016	0	1.06	0	NC	2.80	No different				
Dr. Dan C. Trigg Memorial Hospita	ıl									
2018	0	0.35	NC	Not a	pplicable	Not applicable				
2017	0	0.26	NC	Not a	pplicable	Not applicable				
2016	1	0.23	NC	Not a	pplicable	Not applicable				
Holy Cross Hospital	Holy Cross Hospital									
2018	1	1.69	0.59	0.03	2.91	No different				
2017	0	0.56	NC	Not ap	plicable	Not applicable				
2016	1	1.36	0.73	0.03	3.60	No different				
Lincoln County Medical Center										
2018	0	1.51	0.00	NC	1.97	No different				
2017	1	1.49	0.66	0.33	3.28	No different				
2016	1	1.60	0.62	0.03	3.06	No different				
Mimbres Memorial Hospital										
2018	1	1.14	0.87	0.04	4.30	No different				
2017	3	1.73	1.72	0.43	4.69	No different				
2016	0	1.45	0	0	2.06	No different				
Miners Colfax Medical Center										
2018	0	1.00	NC	Not ap	plicable	Not applicable				
2017	3	1.32	2.26	0.57	6.15	No different				

Critical Access Hospital	Number of hospital- onset CDI events observed by facility	Number of events predicted by NHSN calculation	Facility SIR [†]	95% confidence interval [‡] lower upper		Comparison between facility SIR and NHSN SIR (1.0) [§]			
2016	2	1.16	1.71	0.28	5.65	No different			
Nor Lea General Hospital									
2018	0	0.60	NC	Not ap	plicable	Not applicable			
2017	0	0.78	NC	Not ap	plicable	Not applicable			
2016	4	0.87	NC	Not ap	plicable	Not applicable			
Sierra Vista Hospital									
2018	0	0.43	NC	Not ap	plicable	Not applicable			
2017	2	0.64	NC	Not ap	plicable	Not applicable			
2016	2	0.886	NC	Not ap	plicable	Not applicable			
Socorro General Hospital									
2018	0	0.54	NC	Not ap	plicable	Not applicable			
2017	3	0.99	NC	Not ap	plicable	Not applicable			
2016	0	0.37	NC	Not ap	plicable	Not applicable			
New Mexico Critical Access Hos	pital Aggreg	ate							
2018	3	8.26	0.36	0.09	0.98	★Better			
2017	14	9.58	1.46	0.83	2.39	No different			
2016	10	6.59	1.51	0.77	2.70	No different			

NHSN = National Healthcare Safety Network

SIR = standardized infection ratio

NC = Not calculated. In alignment with reporting standards followed by NHSN and CDC, facilities with less than one predicted infection do not have an SIR calculated (NC) due to reduced reliability of data. The lower bound of the 95% confidence interval is not calculated (NC) when the observed infections equal zero.

§Comparison to the NHSN SIR (i.e., the national reference population) is based on a 95% confidence interval. When the confidence interval includes 1.0 it is not considered statistically significant, therefore categorized as "no different" and indicated by a green square. When the confidence interval does not include 1.0 it is considered statistically significant. When the confidence interval is less than 1.0 the categorization is "better" than the national reference population, indicated by a blue star, and when the confidence interval is greater than 1.0 the categorization is "worse," indicated by an orange circle.

^{*}Calculated from 2015 NHSN CDI LabID data.

[†]The SIR is a summary statistic used to compare the healthcare-associated infection (HAI) experience of a particular group to a reference population (i.e., NHSN 2015 baseline data). The SIR calculation is based on dividing the total number of observed events by a "predicted" number of events using the rates from the reference population.

[‡] The confidence interval indicates that 95% of the time, the true value of the SIR lies somewhere between the upper and lower limits of this range. When the SIR is near zero or equal to zero, the lower bound of the 95% confidence interval is not calculated, therefore shown as "NC."

Table 5: Acute care hospital facility-wide inpatient laboratory-identified methicillin-resistant *Staphylococcus aureus* (MRSA) infections

This table shows the number of MRSA infections identified through positive laboratory tests of inpatients with healthcare facility-onset (HO) infections (i.e., positive tests on specimens collected more than three days after admission) for January through December 2018.

Acute Care Hospital	Number of hospital- onset MRSA events observed by facility	Number of events predicted by NHSN calculation	Facility SIR [†]		nfidence rval [‡] upper	Comparison between facility SIR and NHSN SIR (1.0) §			
Carlsbad Medical Center	r								
2018	0	0.21	NC	Not ap	plicable	Not applicable			
2017	0	0.22	NC	Not ap	plicable	Not applicable			
2016	0	0.2	NC	Not ap	plicable	Not applicable			
CHRISTUS St. Vincent Re	gional Medica	l Center			-				
2018	0	1.63	0	NC	1.83	No different			
2017	2	1.74	1.14	0.19	3.79	No different			
2016	4	2.23	1.78	0.56	4.30	No different			
Gerald Champion Regional Medical Center									
2018	0	0.43	NC	Not ap	plicable	Not applicable			
2017	1	0.59	NC	Not ap	plicable	Not applicable			
2016	0	0.7	NC	Not ap	plicable	Not applicable			
Guadalupe County Hosp	ital								
2018	0	0.01	NC	Not ap	plicable	Not applicable			
2017	0	0.01	NC	Not ap	plicable	Not applicable			
2016	0	0.01	NC	Not ap	plicable	Not applicable			
Heart Hospital of NM at	Lovelace Med	ical Center							
2018	0	0.60	NC	Not ap	plicable	Not applicable			
2017	0	0.34	NC	Not ap	plicable	Not applicable			
2016	1	0.5	NC	Not ap	plicable	Not applicable			
Lovelace Medical Cente	r		i e		i				
2018	1	3.52	0.28	0.01	1.40	No different			
2017	0	2.47	0	NC	1.21	No different			
2016	3	2.6	1.11	0.28	3.04	No different			
Lovelace Regional Hospi		I	I	T					
2018	0	0.09	NC		plicable	Not applicable			
2017	0	0.11	NC	<u> </u>	plicable	Not applicable			
2016	0	0.12	NC	Not ap	plicable	Not applicable			
Lovelace Westside Hosp		_		_					
2018	0	0.30	NC		plicable	Not applicable			
2017	0	0.28	NC		plicable	Not applicable			
2016	0	0.25	NC	Not ap	plicable	Not applicable			

Acute Care Hospital	Number of hospital- onset MRSA events observed by facility	Number of events predicted by NHSN calculation *	Facility SIR [†]		onfidence terval [‡] upper	Comparison between facility SIR and NHSN SIR (1.0) §			
Lovelace Wo	men's Hospital		l l						
2018	1	1.33	0.75	0.03	3.70	No different			
2017	1	1.10	0.90	0.04	4.46	No different			
2016	0	0.90	NC	Not a	pplicable	Not applicable			
Memorial Me	edical Center								
2018	1.	1.91	0.52	0.02	2.57	No different			
2017	2	2.03	0.98	0.16	3.25	No different			
2016	1	1.85	0.53	0.02	2.65	No different			
Plains Regional Medical Center									
2018	0	0.60	NC	Not a	pplicable	Not applicable			
2017	0	0.57	NC	Not a	pplicable	Not applicable			
2016	0	0.52	NC	Not a	pplicable	Not applicable			
Presbyterian Espanola Hospital									
2018	1	0.20	NC	Not a	pplicable	Not applicable			
2017	0	0.38	NC		pplicable	Not applicable			
2016	0	0.41	NC	Not a	pplicable	Not applicable			
Presbyterian	Healthcare Service	S							
2018	2	6.92	0.28	0.04	0.95	★Better			
2017	6	6.49	0.92	0.37	1.92	No different			
2016	6	8.01	0.74	0.30	1.55	No different			
	Rust Medical Cente								
2018	0	2.30	0	NC	1.30	No different			
2017	0	1.75	0.0	NC	1.70	No different			
2016	2	1.4	1.42	0.23	4.71	No different			
Rehoboth Mo	cKinley Christian He	alth Care Services	'			·			
2018	0	0.27	NC	Not a	pplicable	Not applicable			
2017	0	0.53	NC		pplicable	Not applicable			
2016	0	0.63	NC		pplicable	Not applicable			
	eneral Hospital								
2018	0	0.04	NC	Not a	pplicable	Not applicable			
2017	0	0.04	NC		pplicable	Not applicable			
2016	0	0.04	NC		pplicable	Not applicable			
	ional Medical Cent								
2018	0	1.79	0.0	NC	1.66	No different			
2017	0	1.38	0.0	NC	2.15	No different			
2016	1	1.51	0.66	0.03	3.26	No different			

Acute Care Hospital	Number of hospital- onset MRSA events observed by facility	Number of events predicted by NHSN calculation *	Facility SI	Facility SIR [†]		nfidence erval [‡] upper	Comparison between facility SIR and NHSN SIR (1.0) §
University	of New Mex	kico Hospital					
2018	11	9.85	1	.11	0.58	1.94	No different
2017	3	10.59	0	.28	0.07	0.77	★Better
2016	6	10.32	0	.58	0.23	1.20	No different
UNM Sand	doval Region	al Medical Cent	er				
2018	0	0.51	1	NC	Not applicable		Not applicable
2017	0	0.45	1	NC	Not ap	plicable	Not applicable
2016	1	0.45	1	NC	Not ap	plicable	Not applicable
New Mex	ico Acute Ca	re Hospital Agg	regate				
2018	17	32.59	0	.52	0.31	0.81	★Better
2017	15	31.15	0	.48	0.28	0.77	★Better
2016	25	33.18	0	.75	0.49	1.09	No different

Table 5a: Critical access hospital facility-wide inpatient laboratory-identified methicillin-resistant *Staphylococcus aureus* (MRSA) infections

This table shows the number of MRSA infections identified through positive laboratory tests of inpatients with healthcare facility-onset (HO) infections (i.e., positive tests on specimens collected more than three days after admission) for January through December 2018.

Critical Access Hospital	Number of hospital-onset MRSA events observed by facility	Number of events predicted by NHSN calculation *	Facility SIR [†]	95% confidence interval [‡] lower upper	Comparison between facility SIR and NHSN SIR (1.0) §
Cibola General Hospital					
2018	0	0.06	NC	Not applicable	Not applicable
2017	0	0.05	NC	Not applicable	Not applicable
2016	0	0.06	NC	Not applicable	Not applicable

Critical Access Hospital	Number of hospital- onset MRSA events observed by facility	Number of events predicted by NHSN calculation *	Facility SIR [†]	95% confidence interval [‡] lower upper	Comparison between facility SIR and NHSN SIR (1.0) §				
Dr. Dan C. Trigg Memorial Hospital									
2018	0	0.02	NC	Not applicable	Not applicable				
2017	0	0.02	NC	Not applicable	Not applicable				
2016	0	0.02	NC	Not applicable	Not applicable				
Holy Cross Hospital									
2018	0	0.11	NC	Not applicable	Not applicable				
2017	0	0.02	NC	Not applicable	Not applicable				
2016	0	0.08	NC	Not applicable	Not applicable				
Lincoln County Medical	Center								
2018	0	0.10	NC	Not applicable	Not applicable				
2017	0	0.10	NC	Not applicable	Not applicable				
2016	0	0.2	NC	Not applicable	Not applicable				
Miners Colfax Medical C	Center								
2018	0	0.06	NC	Not applicable	Not applicable				
2017	0	0.07	NC	Not applicable	Not applicable				
2016	0	0.64	NC	Not applicable	Not applicable				
Nor Lea General Hospita	al								
2018	0	0.05	NC	Not applicable	Not applicable				
2017	0	0.06	NC	Not applicable	Not applicable				
2016	0	0.47	NC	Not applicable	Not applicable				
New Mexico Critical Aco	cess Hospital A	Aggregate							
2018	0	0.42	NC	Not applicable	Not applicable				
2017	0	0.42	NC	Not applicable	Not applicable				
2016	0	0.22	NC	Not applicable	Not applicable				

NHSN = National Healthcare Safety Network

SIR = standardized infection ratio

NC = Not calculated. In alignment with reporting standards followed by NHSN and CDC, facilities with less than one predicted infection do not have an SIR calculated (NC) due to reduced reliability of data. The lower bound of the 95% confidence interval is not calculated (NC) when the observed infections equal zero.

§Comparison to the NHSN SIR (i.e., the national reference population) is based on a 95% confidence interval. When the confidence interval includes 1.0 it is not considered statistically significant, therefore categorized as "no different" and indicated by a green square. When the confidence interval does not include 1.0 it is considered statistically significant. When the confidence interval is less than 1.0 the categorization is "better" than the national reference population, indicated by a blue star, and when the confidence interval is greater than 1.0 the categorization is "worse," indicated by an orange circle

^{*}Calculated from 2015 NHSN CDI LabID data.

[†]The SIR is a summary statistic used to compare the healthcare-associated infection (HAI) experience of a particular group to a reference population (i.e., NHSN 2015 baseline data). The SIR calculation is based on dividing the total number of observed events by a "predicted" number of events using the rates from the reference population.

[‡] The confidence interval indicates that 95% of the time, the true value of the SIR lies somewhere between the upper and lower limits of this range. When the SIR is near zero or equal to zero, the lower bound of the 95% confidence interval is not calculated, therefore shown as "NC."

Table: Acute care hospital adult catheter associated urinary tract infection (CAUTI) reporting, with or without standardized infection ratios (SIRs)
This table shows the observed and predicted CAUTIs for all acute care hospitals which reported data for

January through December 2018. Where NHSN predicted less than one CAUTI, a SIR is not calculated.

Facility	Number of	Number	Number of	Facility	Q.F	5%	Comparison			
1 active	units in SIR	of CAUTIS	CAUTIS	SIR [†]		dence	between			
	calculation		predicted	O \		rval [‡]	facility SIR			
		by the	by NHSN				and NHSN			
		facility	calculation				SIR (1.0)§			
			*		lower	upper				
Carlsbad Medical Ce	enter									
2018	3	2	1.13	1.75	0.29	5.80	No different			
2017	3	0	0.84	NC	Not app	olicable	Not applicable			
2016	3	2	0.99	NC	Not app	olicable	Not applicable			
Christus St Vincent F	Regional Medi									
2018	10	13	6.45	2.014	1.12	3.35	Worse			
2017	3	8	6.98	1.14	0.53	2.17	No different			
2016	3	7	7.10	0.98	0.43	1.90	No different			
Espanola Hospital			1		Т		T			
2018	2	0	0.78	NC	Not app		Not applicable			
2017	2	0	0.77	NC	Not app		Not applicable			
2016	2	0	0.80	NC	Not app	olicable	Not applicable			
Gerald Champion Re		al Center	4.70	0.55	0.02	2.75	N. 1100			
2018	2	1	1.78	0.55			No different			
2017	2	3	1.41	2.12	0.54	5.78	No different			
2016	2	7	1.60	4.36	1.90	8.63	Worse			
2018	Guadalupe County Hospital									
	1	0	0.05	NC	Not applicable Not applicable		Not applicable			
2017	1	0	0.53	NC			Not applicable			
2016 Heart Hospital of NM	1	0	0.03	NC	Not ap	plicable	Not applicable			
2018	2	2	2.37	0.84	0.14	2.77	No different			
2017	2	4	1.81	2.20	0.70	5.32				
2017	2	4	1.88	2.20	0.70	5.32	No different No different			
Lovelace Medical Ce		4	1.00	2.12	0.07	3.11	No dillerent			
2018	3	2	7.70	0.25	0.04	0.85	★Better			
2017	2	3	5.77	0.52	0.13	1.41	No different			
2016	2	5	10.58	0.47	0.17	1.04	No different			
Lovelace Westside H			10.00	0.17	0.17	1.04	- No different			
2018	3	0	0.67	NC	Not app	olicable	Not applicable			
2017	2	0	0.80	NC	Not app		Not applicable			
2016	2	0	0.50	NC	Not app		Not applicable			
Lovelace Womens H	lospital									
2018	2	0	2.22	0.0	NC	1.34	No different			
2017	2	1	2.23	0.44	0.02	2.20	No different			
2016	2	5	2.16	2.31	0.84	5.12	No different			
Memorial Medical Ce										
2018	3	3	6.33	0.47	0.12	1.28	No different			
2017	2	4	5.50	0.72	0.23	1.75	No different			
2016	2	10	4.93	2.02	1.02	3.60	Worse			

Plains Regional Med	lical Center								
2018	2	2	1.46	1.36	0.22	4.52	No different		
2017	2	2	1.32	1.50	0.25	4.98	No different		
2016	2	1	1.41	0.70	0.03	3.47	No different		
Presbyterian Healtho	care Services				<u> </u>				
2018	14	33	16.85	1.95	1.37	2.71	Worse		
2017	3	21	18.29	1.14	0.72	1.72	No different		
2016	3	29	19.00	1.52	1.04	2.16	No different		
Presbyterian Rust M	edical Center								
2018	1	2	1.38	1.44	0.24	4.76	No different		
2017	1	1	1.44	0.69	0.03	3.40	No different		
2016	1	0	1.18	0.00	NC	2.53	No different		
Rehoboth McKinley	Healthcare								
2018	2	0	0.50	NC	Not ap	plicable	Not applicable		
2017	2	0	0.60	NC	Not ap	plicable	Not applicable		
2016	2	0	0.56	NC	Not ap	plicable	Not applicable		
Roosevelt General Hospital									
2018	2	0	0.07	NC	Not app	plicable	Not applicable		
2017	2	0	0.10	NC		plicable	Not applicable		
2016	2	0	0.14	NC		plicable	Not applicable		
Roswell Regional Ho	Roswell Regional Hospital								
2018	2	1	0.75	NC	Not app	plicable	Not applicable		
2017	2	0	0.95	NC	Not app	plicable	Not applicable		
2016	2	2	0.77	NC	Not app	plicable	Not applicable		
Sandoval Regional N	Medical Cente								
2018	3	2	1.85	1.07	0.18	3.55	No different		
2017	2	0	1.42	0.00	NC	2.09	No different		
2016	2	2	1.74	1.14	0.19	3.78	No different		
San Juan Regional M	Medical Cente								
2018	4	6	3.18	1.88	0.76	3.91	No different		
2017	3	6	3.63	1.65	0.66	3.43	No different		
2016	2	5	4.13	1.20	0.44	2.68	No different		
University of NM Hos	spital				_				
2018	2	5	8.48	0.59	0.21	1.30	No different		
2017	3	14	14.69	0.95	0.54	1.56	No different		
2016	3	17	15.80	1.07	0.64	1.68	No different		
New Mexico Acute		l Aggregate							
2018	63	74	64.10	1.15	0.91	1.44	No different		
2017	41	67	68.69	0.97	0.76	1.23	No different		
2016	40	96	75.38	1.27	1.03	1.54	No different		
CALITI authorar accorded			ICII		aait				

CAUTI = catheter-associated urinary tract infection NHSN = National Healthcare Safety Network

ICU = intensive care unit SIR = standardized infection ratio

NC = Not calculated. In alignment with reporting standards followed by NHSN and CDC, facilities with less than one predicted infection does not have an SIR calculated (NC) due to reduced reliability of data. The lower bound of the 95% confidence interval is not calculated (NC) when the observed infections equal zero.

^{*} Calculated from 2015 baseline CAUTI data for corresponding location type and central line days.

The SIR is a summary statistic used to compare the healthcare-associated infection (HAI) experience of a particular group to a reference population (i.e., NHSN 2015 baseline). The SIR calculation is based on dividing the total number of observed CAUTI events by a "predicted" number of events using the CAUTI rates from the reference population.

[‡] The confidence interval indicates that 95% of the time, the true value of the SIR lies somewhere between the upper and lower limits of this range. When the SIR is near zero or equal to zero, the lower bound of the 95% confidence interval is not calculated, therefore shown as "NC."

Table: Critical access hospital adult catheter associated urinary tract infection (CAUTI) reporting, with or without standardized infection ratios (SIRs)

This table shows the observed and predicted CAUTIs for all acute care hospitals which reported data for January through December 2018. Where NHSN predicted less than one CAUTI, a SIR is not calculated.

Facility	Number of units in SIR calculation	Number of CAUTIs observed by the facility	Number of CAUTIS predicted by NHSN calculation	Facility SIR [†]	95% confidence interval [‡]	Comparison between facility SIR and NHSN SIR (1.0)§
					lower upper	
Cibola General Hosp						
2018	2	2	0.38	NC	Not applicable	Not applicable
2017	2	0	0.29	NC	Not applicable	Not applicable
2016	2	0	0.39	NC	Not applicable	Not applicable
Dan C Trigg Memoria	al Hospital					
2018	1	0	0.05	NC	Not applicable	Not applicable
2017	1	0	0.08	NC	Not applicable	Not applicable
2016	1	0	0.88	NC	Not applicable	Not applicable
Holy Cross Medical						
2018	2	1	0.40	NC	Not applicable	Not applicable
2017	2	0	0.41	NC	Not applicable	Not applicalbe
2016	2	1	0.47	NC	Not applicable	Not applicable
Lincoln County Medi	cal Center					
2018	2	1	0.64	NC	Not applicable	Not applicable
2017	2	1	2.56	0.39	0.02 1.9	No different
2016	1	0	0.14	NC	Not applicable	Not applicable
Miners Colfax Medic						
2018	2	0	1.04	0.0	NC 2.85	No different
2017	1	1	0.23	NC	Not applicable	Not applicable
2016	1	1	0.21	NC	Not applicable	Not applicable
Nor Lea General Hos	spital					
2018	1	0	0.19	NC	Not applicable	Not applicable
2017	1	0	0.22	NC	Not applicable	Not applicable
2016	1	0	0.23	NC	Not applicable	Not applicable
						applicable
Now Movice Critical	Assass Hear	tal Aggregat	•			
New Mexico Critical				1 17	0.46 3.54	NI
2018	10	4	2.72	1.47	0.46 3.54	No different
2017	10	0	0.08	NC	Not applicable	Not applicable
2016		0	0.08	NC	Not applicable	Not applicable

CAUTI = catheter-associated urinary tract infection NHSN = National Healthcare Safety Network

ICU = intensive care unit SIR = standardized infection ratio

NC = Not calculated. In alignment with reporting standards followed by NHSN and CDC, facilities with less than one predicted infection does not have an SIR calculated (NC) due to reduced reliability of data. The lower bound of the 95% confidence interval is not calculated (NC) when the observed infections equal zero.

^{*} Calculated from 2015 baseline CAUTI data for corresponding location type and central line days.

[†]The SIR is a summary statistic used to compare the healthcare-associated infection (HAI) experience of a particular group to a reference population (i.e., NHSN 2015 baseline). The SIR calculation is based on dividing the total number of observed CAUTI events by a "predicted" number of events using the CAUTI rates from the reference population.

[‡] The confidence interval indicates that 95% of the time, the true value of the SIR lies somewhere between the upper and lower limits of this range. When the SIR is near zero or equal to zero, the lower bound of the 95% confidence interval is not calculated, therefore shown as "NC."

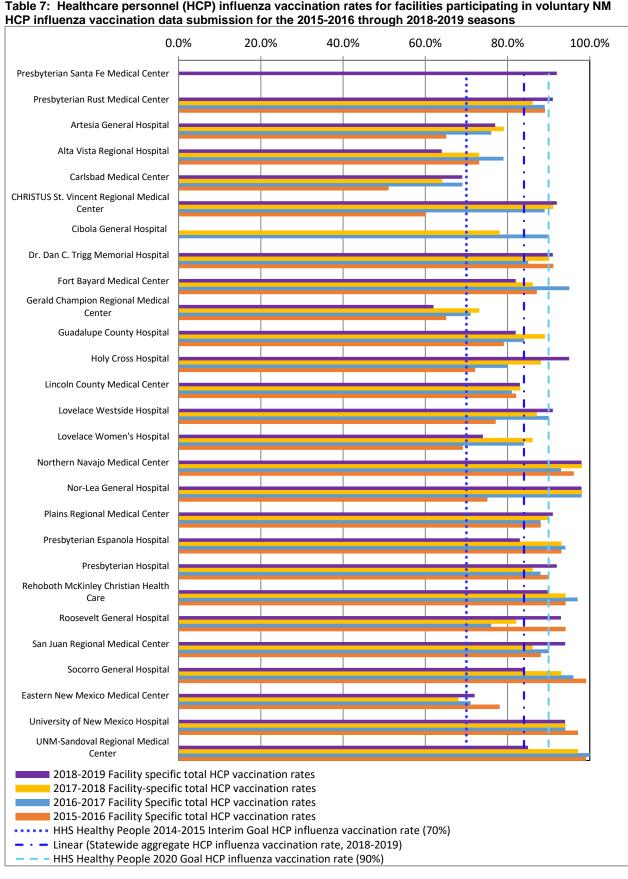


Table 7: Healthcare personnel (HCP) influenza vaccination rates for facilities participating in voluntary NM