

March 7, 2005

S 391. HOSPITAL-ACQUIRED INFECTION RATES. TO REQUIRE HOSPITALS TO REPORT HOSPITAL-ACQUIRED INFECTION INCIDENT RATES. Requires hospitals and freestanding ambulatory surgical facilities to report regarding hospital-acquired infections, defined in new GS 131E-214.1(4) as localized or systemic condition that results from adverse reaction to presence of infection agent or its toxins and that was not present or incubating at time of admission to the facility. Amends GS 131E-214.2 to require hospitals and freestanding ambulatory surgical facilities to collect and submit to statewide data processor under GS 131E-214.4 data on hospital-acquired infection incidence rates for specific clinical procedures under following categories: (1) Class I surgical site infections; (2) ventilator-associated pneumonia; (3) central line-related bloodstream infections; and (4) urinary tract infections. Data processor is required to publish monthly reports on the incidence rates for each facility. Requires Sec'y of Health and Human Services to appoint advisory committee to makes findings and recommendations on submission, collection, analysis, and dissemination of data on hospital-acquired infection incidence rates. States that information and data on rates shall not be made available to general public unless information and data have been reviewed, adjusted, and validated according to process specified in bill. Effective October 1, 2005.

Intro. by Lucas.

Ref. to Health Care

GS 131E, 143B