

**HB 1015-S - DIGEST**

(SUBSTITUTED FOR - SEE 2ND SUB)

Finds that hospitals should be implementing evidence-based measures to reduce hospital-acquired infections. The legislature further finds the public should have access to data on outcome measures regarding hospital-acquired infections. Data reporting should be consistent with national hospital reporting standards.

Provides that the department shall adopt guidelines and rules for the identification, tracking, reporting, and release of information related to outcome measures as related to health care-associated infections acquired in hospitals.

Requires the guidelines and rules to consider outcome measures, for an entire hospital or specified units, in the following categories: (1) Surgical site infections for selected procedures;

(2) Surgical antimicrobial prophylaxis;

(3) Outcome measures on ventilator-associated pneumonia;

(4) Central line-associated, laboratory-confirmed bloodstream infections in the intensive care unit; and

(5) Other categories for which there are established measures and the department determines are necessary to protect public health and safety as provided in this act.

Requires the department to publish an annual report on the department's web site that compares the hospital-acquired infection outcomes described in this act at each individual hospital in the state. Comparisons among hospitals shall be adjusted to consider patient mix and other relevant risk factors and control for provider peer groups, when appropriate. The annual report shall disclose data in a format so that no health information about any individual patient is released. The department may respond to requests for data and other information, at the requestor's expense, for special studies and analysis consistent with requirements for confidentiality of patient records and quality improvement information.

Requires the department to establish an advisory committee to make recommendations to the department in the development of guidelines and rules for the collection, reporting, and release of information related to hospital-acquired infections and to provide advice and recommendations to the department regarding the report in this act to expand the program to ambulatory surgical centers and outpatient surgical centers.

Directs the advisory committee to meet as often as necessary to complete its duties, but not less than three times per year and report to the legislature in November 2008 regarding the activities of United States centers for disease

control, centers for medicare and medicaid services, joint commission for the accreditation of health care organizations, and the institute for health care improvement related to reporting hospital-acquired infections.

Requires the department, with the advice and recommendations of the advisory committee created in this act, to issue a report by December 1, 2006, that establishes a plan and timetable for expanding the health care-associated infection identification, tracking, reporting, and analysis program established under this act to include ambulatory surgical centers and outpatient surgical centers.

Provides that neither the reports submitted by hospitals, ambulatory surgical centers, or outpatient surgical centers to the department under this subsection, nor any of the data contained in them are subject to discovery by subpoena or admissible as evidence in a civil proceeding.