

Ministry of Health
and Long-Term Care

Ministère de la Santé
et Soins de longue durée



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January 22, 2009

Dear Colleagues:

**NEW INFORMATION FOR INDICATORS REPORTED FOR THE FIRST TIME ON
APRIL 30, 2009**

Hand Hygiene compliance reporting will occur on an annual basis, starting April 30, 2009. Hospitals are required to submit data to the ministry on all four moments, but the ministry will report publicly on only two. Hospitals are expected to use the audit tool and processes from the provincial *Just Clean Your Hands Program* as the basis for reporting their data for the hand hygiene indicator.

The Critical Care Secretariat, Safer Healthcare Now! (Ontario only), and the ministry will use the same definitions for the following indicators to first be reported on April 30, 2009: Central Line-Associated Primary Bloodstream Infection (CLI) in the ICU and Ventilator Associated Pneumonia Infection Rate (VAP) in the ICU. These indicators will be reported on a quarterly basis.

Safer Healthcare Now! and the ministry will use the same definition for Surgical Site Infection Prevention (SSI) for total hip/knee surgical patients indicator. Reporting for this indicator will start on April 30, 2009 and continue on a quarterly basis.

A letter from John McKinley, ADM, Health System Information Management and Investment Division (HSIMI), detailing the data definitions and collections processes for the April 30, 2009 publicly reported indicators is attached.

Hand Hygiene Reporting

Hand hygiene compliance rate reporting will occur by hospital site on an annual basis; all hospitals are expected to submit data.

Hospitals will be required to submit observation data for hand hygiene compliance rates for the four moments as set out in the *Just Clean Your Hands Observation Tool and Training*

Program: 1) before initial patient/patient environment contact, 2) before aseptic procedure, 3) after body fluid exposure risk, and 4) after patient/patient environment contact. Data submission will be by combined health care provider type.

The ministry will only publicly report moments 1 and 4.

Hand Hygiene Management Resources

I would like to remind hospital CEOs, Chairs and Infection Control Practitioners of the following resources for information related to hand hygiene improvement.

1. Best Practices Hand Hygiene in all Health Care Settings. May 2008. Ministry of Health and Long-term Care/Provincial Infectious Diseases Advisory Committee (PIDAC), Toronto, Canada.
2. *Just Clean Your Hands* Program which provides tools to assist in understanding how to implement best practice recommendations. Program documents are available for download at www.justcleanyourhands.ca

Hospitals may also contact their Regional Infection Control Network (RICN) for further information.

CLI, VAP and SSI

Safer Healthcare Now!, the Critical Care Secretariat, and the ministry have agreed to use common definitions for CLI in the ICU and VAP in the ICU. Safer Healthcare Now! and the ministry will also use the same definition for SSI for total primary hip/knee surgical patients. This will help to streamline the data collection and reporting processes for Ontario hospitals participating in patient safety and quality care initiatives.

Reporting for CLI, VAP and SSI will occur on a quarterly basis.

For the first reporting period – April 30, 2009 - data for CLI and VAP will be required for January, February and March.

However, data for SSI will be required for February and March only. For future reporting, data for 3 months will be required for this indicator as well.

The ministry will utilize data submitted through the ministry's Critical Care Information System for the CLI and VAP indicators; hospitals are not required to submit data for these indicators through the ministry WERS system.

New WERS forms for reporting SSI and hand hygiene will be available in April 2009. The SSI WERS forms will include monthly forms (for February and March) and a summary form.

CLI, VAP and SSI Management Resources

The OHA, the Critical Care Secretariat, Safer Healthcare Now! and the ministry will collaborate to produce resources for hospital use.

The OHA will continue to be a resource for hospitals and provide materials (communication materials, educational sessions, Qs&As) for its members to meet reporting requirements and management of the indicators.

Hospitals with questions related to CLI and VAP management and reporting should contact the Critical Care Secretariat:

Julie Trpkovski
Manager
Critical Care Secretariat
Health System Accountability and Performance Division
416-399-1173
www.health.gov.on.ca/criticalcare

Hospitals that have questions specifically related to SSI continuing improvement should contact:

Cynthia Majewski
Executive Director, Quality Healthcare Network (QHN)
Ontario Node, Safer Healthcare Now!
416.351-3761
cynthia.majewski@qhn.ca

OHA Educational Sessions

The following videoconferences and live webcasts will be held on these indicators:

Update on Public Reporting: Hand Hygiene Compliance

Date: January 30th, 2009

Time: 1:00pm - 3:00pm

Update on Public Reporting: CLI, VAP, and SSI

Date: February 3rd, 2009

Time: 1:00pm - 3:00pm

Confirmation of Data

As occurs with other patient safety indicators, the confidential listing of this data (i.e.: hand hygiene, CLI, VAP, and SSI) by hospital will be forwarded through the OHA to the hospitals during the third week of April for vetting. The ministry will post this data on its web site on April 30th.

Public Reporting

As well as with past reporting, the ministry will use <5 for hospital case counts between 1 and 4.

Hospitals are encouraged to consult with their privacy advisors regarding the disclosure of numbers between 1 and 4, and to report this data if confidentiality is not an issue.

Reporting Details

Details related to these indicators are contained in the attached letter from John McKinley, Assistant Deputy Minister, Health System Information Management & Investment Division (HSIMI).

Questions or further clarification related to reporting details should be directed to Sten Ardal, Director, Health Analytics, Health System Information Management and Investment Division at 416-327-6483.

Please do not hesitate to contact me directly at michael.baker@uhn.on.ca if you have any questions, wish to discuss these issues further or have suggestions for the future of the Patient Safety Initiative.

Sincerely,

Original signed by

Michael Baker M.D.
Executive Lead – Patient Safety

cc: Hon. David Caplan, MPP
Minister of Health and Long-Term Care

Ron Sapsford
Deputy Minister
Ministry of Health and Long-Term Care