I would like to encourage the committee to evaluate the issue of risk adjustment of reported infection rates. For MRSA, risk adjustment can cut the infection rate of a facility in half and it can also double rates in facilities with few infections. Interfacility variability is decreased and performance comparisons become more difficult to make.

An additional concern is that risk adjustment is based upon old data from facilities which may not have implemented optimal current strategies, thus, baking underperformance into the reporting system. And it also discourages innovation.

Recently the Opioid epidemic is being used as an excuse for some to call for increased risk adjustment. But instead of mathematically decreasing elevated infection rates associated with opioid injection abuse, wouldn't it be better to allocate additional resources and perform admission screening and decolonization to lower actual infections.

The actual number of patient infections are important to report. It is possible that similar to CLABSIs, low infection rates may be obtainable by almost all facilities, making the "N" so low that reliable interfacility comparison may not be possible, which would also negate the need for risk adjustment.

In recent years, the number of infections in the United States may have also been mitigated by,

1. Doubling the number of bacteria needed to report a urinary tract infection.
2. Increasing the time for occurrence of a hospital acquired MRSA infection from 2 to 3 days post admission.
3. And almost no one is reporting healthcare worker acquisitions or infections of dangerous pathogens. A national reporting system for healthcare workers is desperately needed.

Yesterday's presentations repeatedly referenced a lack of data on the incidence of these infections. We need to start reporting and accurately tracking all dangerous pathogens, not just few. Data for action was one of the four pillars of HAI elimination in the 2010 Dept HHS white paper published in AJIC. Almost a decade later, we still have not accomplished this goal.