

VRE BACTERAEMIA INFECTION RATE REPORTING

Public reporting of Vancomycin-resistant Enterococcus (VRE) bacteraemia infection rates in Ontario hospitals will begin on December 30, 2008. Hospitals will post their rates and case counts of new VRE bacteraemia acquired in their facility on their website every three months (quarterly), and will also report their data to the Ministry of Health and Long-Term Care through an online template captured by a central database. The ministry will post this information on its public website on December 30, 2008.

What is Vancomycin-resistant Enterococcus?

VRE is spread from one person to another by contact, usually on the hands of caregivers. VRE can be present on the caregiver's hands either from touching contaminated material excreted by an infected person or from touching articles soiled by faeces. VRE can survive well on hands and can survive for weeks on inanimate objects such as toilet seats, taps, door handles, bedrails, furniture and bedpans. VRE is easy to kill with the proper use of disinfectants and good hand hygiene.

What is bacteraemia?

Bacteraemia is the presence of bacteria in the bloodstream and is referred to as a bloodstream infection.

What is a case of VRE bacteraemia?

A case is a patient identified with laboratory confirmed bloodstream infection with Vancomycin-resistant Enterococcus (VRE-Bacteraemia). A blood stream infection is a single positive blood culture for VRE.

What will be publicly reported?

Each hospital will post its quarterly rate and case count of new VRE bacteraemia acquired in their facility on their website.

At the end of each quarter, the ministry will report the previous quarter's data on its website by hospital site including:

- (i) the number of new hospital acquired VRE bacteraemia cases that is zero (0) or totalling five (5) or more associated with that hospital site, or if this is less than 5 cases (i.e. 1 to 4 cases), text reading "< 5 cases", and
- (iii) the hospital acquired VRE bacteraemia rate

What determines the rate?

The total number of new cases of VRE bacteraemia acquired in the hospital in a quarter is divided by the total number of patient days for that quarter. Patient days are the number of days spent in a hospital for all patients. The results are multiplied by 1000. This represents the rate of hospital acquired associated VRE bacteraemia associated with the reporting facility per 1000 patient days for that quarter. (e.g. 2 cases for that quarter ÷ 30,000 patient days for that quarter = 0.00006 x 1000 = 0.06 per 1000 patient days). The rates of infection will be calculated by quarter.

What will the healthcare system do with the rate information?

Hospital acquired infection rates provide one measure of patient safety and quality of care. The rate of hospital acquired VRE bacteraemia can be used to analyze any trends of infection, sources of infection and general surveillance of VRE bacteraemia. It can also assist hospitals to evaluate the effectiveness of infection prevention and control interventions and make further improvements based on this information.

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