2022	Nat
	S

Introduction:

Welcome to the 2022 National and State HAI Progress Report using the 2015 bas by comparing the number of observed device days to the number of predicted dev This report is created by CDC staff with the National Healthcare Safety Network (N

Scope of report:

Device Days Types

Central line days (CLDs) by locations Urinary catheter days (UCDs) by locations Ventilator days (VDs) by locations

tional and State HAI Progress Report tandardized Utilization Ratios

Long Term Acute Care Hospitals

eline and risk adjustment calculations. Standardized utilization ratios (SURs) are used to describe device ice days. IHSN).

LTACH							
	National	State					
þ	þ						
þ	þ						
þ	þ						

e utilization

Development of the NHSN Standardized Utilization Ratio (SUR): Methodology

Rationale

Traditionally, NHSN has been providing a crude measure of device utilization rate to the healthcare facilities. standardized to compare with a reference baseline population as well as over time. Accordingly, CDC has device utilization rate to the healthcare facilities.

Development of SUR models

SUR models were developed for the following measures: central line days, urinary catheter days and ventilate inpatient rehabilitation facilities (IRF), long-term acute care hospitals (LTACH) (and NICU for central line days Using the NHSN data (2022) in sync with rebaseline work, CDC has developed multivariable logistic regressic "Extra-binomial Variation in Logistic Linear Models," Applied Statistics, 31, 144–148.). Unit of analysis in all the

STEPS to compute SUR at the location level

1: First, calculate the logit scale value of p_hat, using parameter estimates of corresponding SUR model. Logit p_hat= intercept + x1 + X2 + X3 + (Risk factors are provided in appendices for individual matrix of measure and healthcare setting)

2: Then, compute the probability of device use p_hat = [e^logit(p_hat)] / [1+ e^logit(p_hat)]

3: Calculate predicted device days as follows: Predicted Device Days = p-hat * In-patient days

4: Finally, derive SUR value at the location by dividing number of observed device days with number of predic SUR = Observed Device Days / Predicted Device Days

Note that SUR will not be calculated if Predicted Device Days is <1 due to minimum precision criteria of 1.0.

STEPS to compute SUR at higher level above location

Do the same computation as in step 1, 2, 3 at location level.

Sum the observed device days and predicted device days up to the level of aggregation desired (e.g., facility-Then, derive SUR value at the desired aggregate level by dividing number of observed device days with number

SUR Guide: https://www.cdc.gov/nhsn/pdfs/ps-analysis-resources/nhsn-sur-guide-508.pdf

To monitor the progress of healthcare acquired infections (HAI) prevention efforts, device utilization in any healt veloped statistical models to make SUR values available for different measures (e.g., central line days, urinary control of the co
or days. They were available for the healthcare setting of acute care hospitals (ACH), critical access hospitals (C). on models that correct over dispersion by the Williams' method (Reference: Williams, D. A. (1982), e SUR models are at the location level.
ted device days;
level). per of predicted device days.

hcare setting/location needs to be atheter days) at various healthcare settings.

;ΑH),

2022 Annual National and State HAI Progress Report

Long-Term Acute Care Hospitals: Full series of tables for all national and state data

Table 1 National standardized utilization ratios (SURs) and facility-specific summar

Central line days (CLDs)
Urinary catheter days (UCDs)

Ventilator days (VDs)

Table 2 State-specific SURs for CLDs from Long term acute care hospitals:

All locations combined

Table 3 State-specific SURs for UCDs from Long term acute care hospitals:

All locations combined

Table 4 State-specific SURs for VDs from Long term acute care hospitals:

All locations combined

Table 5 Changes in national SURs, 2022 compared to 2021:

Central Line Days (CLDs)
Urinary Catheter Days (UCDs)

Ventilator days (VDs)

Table 6 Changes in state SURs, 2022 compared to 2021:

6a. Central Line Days (CLDs)6b. Urinary Catheter Days (UCDs)

6c. Ventilator Days (VDs)

Appendix A Factors used in NHSN risk-adjusted SUR calculation of the device utilization in It

Additional Resources Technical Appendix

HAI Progress Report Home Page

SUR Guide: https://www.cdc.gov/nhsn/pdfs/ps-analysis-resources/nh



Table 1. Natio

Device and Patient Population	No. of Facilities	No. of De	vice days
	Reporting ¹	Observed	Predicted
Central line days, all⁴	393	1,536,064	2,570,031.4158
ICUs⁵	67	98,300	166,539.6078
Wards ⁶	10	6,417	15,311.3853
Urinary catheter days, all⁴	393	1,343,208	1,759,405.0491
	67	85,847	132,856.2275
Wards ⁶	26	9,195	27,712.5629
Ventilator days, all⁴	162	501,042	433,377.1699
	37	47,503	45,220.2385
	4		

- 1. The number of reporting facilities included in the SUR calculation; SURs are not calculated when there are less
- 2. Percent of facilities with at least one predicted device day that had an SUR significantly greater than or less than
- 3. Facility-specific percentiles are only calculated if at least 20 facilities had ≥1.0 predicted number of device days i
- 4. Data from all ICUs, wards, and other non-critical care locations. Data contained in this table are reported from lo
- 5. Data from all ICUs; excludes wards (and other non-critical care locations), and NICUs. Data contained in this tak
- 6. Data from all wards (for this table, wards also include step-down, mixed acuity, and specialty care areas [includir

onal standardized utilization ratios (SURs) and facility-specific summary SURs using device days

	95% CI fo	or SUR		Facility-specific SURs					
SUR	Lower	Upper	No. Facilities with ≥1			No. Facilities			
			Predicted Device Days	Significantly > N	Significantly SUF				
				N	%	N			
0.5977	0.5968	0.5986	393	193	49%	176			
0.5902	0.5866	0.5940	67	40	60%	22			
0.4191	0.4089	0.4295	10	2	20%	7			
0.7634	0.7622	0.7647	393	183	47%	174			
0.6462	0.6419	0.6505	67	46	69%	17			
0.3318	0.3251	0.3386	26	1	4%	23			
1.1561	1.1529	1.1594	162	58	36%	93			
1.0505	1.0411	1.0599	37	23	62%	11			

than 5 reporting facilities. This may be different from those reported in the SIR tables due to exclusion ϵ 1 the nominal value of the national SUR. This is only calculated if at least 10 facilities had \geq 1.0 predicte n 2022. If a facility's predicted number of device days was <1.0, a facility-specific SUR was neither calc ng-term acute care hospitals; as such, data from ACHs, IRFs and CAHs are excluded.

ble are reported from long-term acute care hospitals; as such, data from ACHs, IRFs and CAHs are exc ng hematology/oncology, bone marrow transplant]). Data contained in this table are reported from long-

s data reported to NHSN during 2022 for long term acute care hospitals (LTACHs), by device type Table 1. Central line days (CLDs), urinary catheter days (UCDs), and ventilator days (VDs).

								Percenti
with SUR								
< National	5%	10%	15%	20%	25%	30%	35%	40%
%								
45%	0.2552	0.3312	0.3761	0.4100	0.4475	0.4805	0.5117	0.5481
33%	0.2060	0.3134	0.3411	0.3644	0.4647	0.5191	0.5709	0.6202
70%								
44%	0.3170	0.4391	0.5245	0.5728	0.6113	0.6427	0.6707	0.7108
25%	0.1978	0.3463	0.3949	0.4928	0.5285	0.6675	0.7151	0.7415
88%	0.1284	0.1383	0.1496	0.2043	0.2079	0.2220	0.2960	0.3000
57%	0.3307	0.4702	0.6090	0.6766	0.7392	0.7898	0.8530	0.8913
30%	0.3581	0.4441	0.5881	0.6622	0.9477	0.9825	1.0200	1.1354

and inclusion criteria. Refer to the technical appendix for details.

luded.

term acute care hospitals.

d device days in 2022.

[:]ulated nor included in the distribution of facility-specific SURs.

and patient population:

le Distribution of Facility-specific SURs³

М	60	ł١	an

45%	50%	55%	60%	65%	70%	75%	80%	85%	90%
0.5789	0.6098	0.6407	0.6765	0.7172	0.7458	0.7889	0.8457	0.9002	0.9971
0.6804	0.7305	0.7592	0.8081	0.8393	0.9264	0.9888	1.0079	1.0357	1.1391
0.7386	0.7677	0.8065	0.8438	0.8732	0.9424	1.0206	1.0725	1.1593	1.2671
0.7971	0.8247	0.8656	0.9334	0.9647	0.9996	1.0212	1.0428	1.0700	1.2101
0.3026	0.3447	0.3879	0.3931	0.3990	0.4230	0.4432	0.4698	0.6058	0.7794
0.9750	1.0230	1.0791	1.1465	1.2330	1.2689	1.3323	1.4116	1.4925	1.6259
1.2200	1.2812	1.3868	1.4909	1.5489	1.5659	1.5939	1.6557	1.7277	1.8131
									•

95%

1.1317

1.2582

1.3790

1.2916

0.9738

1.8980

2.5115

Table 2. State-specific standardized utilization ratios (SURs) and facility-specific summary SURs ι
Table 2. C

State	Facilities	No. of Dev	rice days_		95% CI 1
		Observed	Predicted	SUR	Lower
Alabama	8	19,140	32,266.5806	0.5932	0.5848
Alaska					
Arizona	6	17,816	33,927.2247	0.5251	0.5175
Arkansas	8	23,251	35,395.3955	0.6569	0.6485
California	22	147,897	219,434.8368	0.6740	0.6706
Colorado	6	19,822	46,698.3020	0.4245	0.4186
Connecticut	2	,	,		_
D.C.	1				
Delaware	2			•	
Florida	27	123,511	220,935.4818	0.5590	0.5559
Georgia	12	42,612	72,973.8749	0.5839	0.5784
Guam	0				
Hawaii	1				
Idaho	2				
Illinois	8	46,350	71,411.5104	0.6491	0.6432
Indiana	8	28,532	45,731.1905	0.6239	0.6167
lowa	2				
Kansas	3				
Kentucky	9	31,397	44,968.9284	0.6982	0.6905
Louisiana	29	103,053	147,692.3863	0.6978	0.6935
Maine	0			•	
Maryland	2				
Massachusetts	13	49,559	172,882.6663	0.2867	0.2842
Michigan	17	42,066	84,828.8370	0.4959	0.4912
Minnesota	2			•	
Mississippi	8	21,578	42,473.9830	0.5080	0.5013
Missouri	10	35,075	54,657.0732	0.6417	0.6350
Montana	1				
Nebraska	3				
Nevada	8	41,999	48,867.0911	0.8595	0.8513
New Hampshire	0				
New Jersey	12	31,849	61,972.2425	0.5139	0.5083
New Mexico	3				
New York	2 8				
North Carolina		30,416	49,364.6604	0.6161	0.6093
North Dakota	2				
Ohio	25	82,938	125,469.4855	0.6610	0.6565
Oklahoma	10	48,739	59,923.4924	0.8134	0.8062
Oregon	1				
Pennsylvania	17	44,151	86,894.3657	0.5081	0.5034
Puerto Rico	0				
Rhode Island	0			-	
South Carolina	6	24,973	40,277.5660	0.6200	0.6124

South Dakota	1				
Tennessee	9	26,086	60,006.9108	0.4347	0.4295
Texas	57	282,689	394,296.7806	0.7169	0.7143
Utah	3			-	
Vermont	0			-	
Virgin Islands	0			-	
Virginia	6	16,614	30,859.3221	0.5384	0.5302
Washington	1			-	
West Virginia	5	15,205	27,746.2072	0.5480	0.5393
Wisconsin	4			-	
Wyoming	0		•	-	<u>.</u>
All US	393	1,536,064	2,570,031.4158	0.5977	0.5968

- 1. The number of reporting facilities included in the SUR calculation; SURs are not calculated when there are le
- 2. Percent of facilities with at least one predicted device day that had an SUR significantly greater than or less tl
- 3. Facility-specific percentiles are only calculated if at least 20 facilities had ≥1.0 predicted number of device day
- 4. Data from all ICUs, wards, and other non-critical care locations. Data contained in this table are reported from

using device days data reported to NHSN during 2022 for long term acute care hospitals (LTACHs) central line days (CLDs), all locations⁴

for SUR	Facility-specific SURs								
Upper	No. Facilities with ≥1 No. Facilities with SUR No. Facilities with SUR Predicted								
	Device Days			Significantly <	National SUR	10%			
		N	% ²	N					
0.6016	8	•		•	-				
0.5329	6	•	-	•	·	•			
0.6654	8		•	•					
0.6774	22		73%	4	18%	0.4852			
0.4304	6								
0.5622	27		30%		56%	0.3649			
0.5895	12	7	58%	5	42%	•			
i	-	•	•	•	·	•			
			•	•					
0.6550	8								
0.6312	8								
	-								
0.7060	9								
0.7020	29	21	72%	8	28%	0.3942			
1		•	•	•	•				
0.2892	13	4	31%	9	69%				
0.5006	17		24%		71%				
0.5148	8								
0.6485	10	5	50%	4	40%				
-									
0.0677				•	·	•			
0.8677	8	•	•	•	•				
0.5196	12	5	42%	5	42%	•			
			,,						
0.6231	8								
	-								
0.6655	25		64%	7	28%	0.4647			
0.8206	10	6	60%	4	40%	•			
0.5129	17	. 4	24%	12	71%	•			
0.5129	17	4	24%	12	1 1 70	•			
]]				
0.6278	6								

<u> </u>		100	70 70	.,,	70 /0	0.0012
0.5986	393	193	49%	176	45%	0.3312
					.]	
0.5568	5					
0.5466	6					
	•	•				
0.7196	57	36	63%	17	30%	0.3876
0.4400	9				.]	
I					1	

ss than 5 reporting facilities. This may be different from those reported in the SIR tables due to exclusion han the nominal value of the national SUR. This is only calculated if at least 10 facilities had ≥ 1.0 predictly ys in 2022. If a facility's predicted number of device days was <1.0, a facility-specific SUR was neither cal n long-term acute care hospitals.

, by device type and patient population:

	Median		
25%	50%	75%	90%
0.5988	0.7419	0.8438	0.9030
	•		
0.4494	0.5433	0.6518	0.7771
0.5481	0.7025	0.9180	1.6718
0.5706	0.6765	0.7315	0.7950

0.5144	0.7411	0.9306	1.0530
-	•		
-	•		
	•	•	
		•	
		•	
	•	•	
		•	
		-	
0.4475	0.6098	0.7889	0.9971

and inclusion criteria. Refer to the technical appendix for details. ed device days in 2022.

culated nor included in the distribution of facility-specific SURs.

Table 3. State-specific standardized utilization ratios (SURs) and facility-specific summary SURs ι

Table 3. Urinary C

State	No. of Facilities	No. of De	vice days_		95% CI	
		Observed	Predicted	SUR	Lower	
Alabama	8	23,426	20,147.5248	1.1627	1.1479	
Alaska	1					
Arizona	6	17,158	24,040.9916	0.7137	0.7031	
Arkansas	8	22,766	22,659.6681	1.0047	0.9917	
California	22	143,117	155,004.1810	0.9233	0.9185	
Colorado	6	25,919	32,515.3798	0.7971	0.7875	
Connecticut	2	•				
D.C.	1	•	•		-	
Delaware	2	•	•		-	
Florida	27	109,075	159,501.8309	0.6838	0.6798	
Georgia	12	44,059	53,512.8139	0.8233	0.8157	
Guam	0					
Hawaii	1					
Idaho	2					
Illinois	8	41,797	49,317.6282	0.8475	0.8394	
Indiana	8	24,181	33,862.6847	0.7141	0.7051	
Iowa	2 3					
Kansas	3					
Kentucky	9	25,660	31,095.2903	0.8252	0.8152	
Louisiana	29	89,978	87,166.6065	1.0323	1.0255	
Maine	0			•		
Maryland	2			•		
Massachusetts	13	35,477	107,394.8551	0.3303	0.3269	
Michigan	17	37,896	55,301.1863	0.6853	0.6784	
Minnesota	2					
Mississippi	2 8	17,002	27,822.9773	0.6111	0.6020	
Missouri	10	31,607	39,432.2328	0.8016	0.7927	
Montana	1					
Nebraska	3					
Nevada	8	32,370	31,681.2816	1.0217	1.0106	
New Hampshire	0					
New Jersey	12	27,195	40,405.9401	0.6730	0.6651	
New Mexico	3					
New York						
North Carolina	2 8	24,541	32,395.1640	0.7576	0.7481	
North Dakota	2	,-	,			
Ohio	25	62,047	91,005.7579	0.6818	0.6764	
Oklahoma	10	42,781	41,788.8989	1.0237	1.0141	
Oregon		12,101	, . 55.5556			
Pennsylvania	17	41,143	61,380.5119	0.6703	0.6639	
Puerto Rico	0	71,170	01,000.0110	0.0700	0.0000	
Rhode Island	0	•	•	•	•	
South Carolina	6	15,426	28,733.6146	0.5369	0.5284	
Journ Jaronna	1 Y	10,720	20,700.0140	0.0000	0.0204	

South Dakota	1				
Tennessee	9	24,895	38,738.6314	0.6426	0.6347
Texas	57	234,182	268,789.0346	0.8712	0.8677
Utah	3				
Vermont	0				
Virgin Islands	0				•
Virginia	6	18,661	21,702.0959	0.8599	0.8476
Washington	1				
West Virginia	5	16,600	18,219.6319	0.9111	0.8973
Wisconsin	4				-
Wyoming	0				<u>.</u>
All US	393	1,343,208	1,759,405.0491	0.7634	0.7622

- 1. The number of reporting facilities included in the SUR calculation; SURs are not calculated when there are les
- 2. Percent of facilities with at least one predicted device day that had an SUR significantly greater than or less th
- 3. Facility-specific percentiles are only calculated if at least 20 facilities had ≥1.0 predicted number of device day
- 4. Data from all ICUs, wards, and other non-critical care locations. Data contained in this table are reported from

ısing device days data reported to NHSN during 2022 for long term acute care hospitals (LTACHs), l atheter days (UCDs), all locations⁴

for SUR	Facility-specific SURs					
Upper	No. Facilities with ≥1	No. Facilitie		No. Facilitie	s with SUR	
	Predicted Device Days	Significantly > N	National SUR	Significantly <	National SUR	10%
1.1777	8					
0.7244 1.0178	6 8					
0.9281	o 22	17	77%	5	23%	0.6717
0.8069			1170		2370	0.0717
0.6879		6	22%	18	67%	0.4109
0.8311	12	6	50%	4	33%	
					•	
•		•	•			•
0.8557	8			•		•
0.7231	8					
0.8353						
1.0390	29	22	76%	6	21%	0.6299
						•
0.3338	13	. 3	23%	. 10	77%	•
0.5556	17	6	25% 35%	11	65%	•
0.0022						
0.6203	8					
0.8104		5	50%	3	30%	
1.0329	8					
0 6911			E00/	E	42%	
0.6811	12	6	50%	5	42%	
•			•	•		•
0.7671	8					
0.6872	25	6	24%	15	60%	0.4834
1.0335	10	7	70%	3	30%	
0.6768	17	5	29%	10	59%	
•					•	
0.5454	6	•				•
0.5454	l O				•	

0.9250	5					
0.8723	6					
0.6507 0.8748		38	67%	12	21%	0.6321

ss than 5 reporting facilities. This may be different from those reported in the SIR tables due to exclusion ar nan the nominal value of the national SUR. This is only calculated if at least 10 facilities had \geq 1.0 predicted rs in 2022. If a facility's predicted number of device days was <1.0, a facility-specific SUR was neither calculong-term acute care hospitals.

by device type and patient population:

	Median		
25%	50%	75%	90%
0.8555	1.0256	1.1111	1.238
			4 400
0.5728	0.6628	0.7878	1.103
0.8050	0.9604	1.2633	1.379
	•		
	•		
•			
	•		
0.6140	0.6986	0.7971	0.860
	•		
•		•	

0.7404	0.8630	1.0322	1.2676
•			
		•	•
•	•	•	
•			
	•	•	•
	0.7677	1 0206	1 2671
0.6113	0.7677	1.0206	1.2671

 \mbox{nd} inclusion criteria. Refer to the technical appendix for details. $\mbox{|}$ device days in 2022.

ılated nor included in the distribution of facility-specific SURs.

Table 4. State-specific standardized utilization ratios (SURs) and facility-specific summary

 \mathbf{T}_i

State	No. of Facilities	No. of De	vice days_	
		Observed	Predicted	SUR
Alabama		4.400	4 007 4750	0.0705
Alabama	5	4,128	4,227.4756	0.9765
Alaska	0		•	•
Arizona	0		•	•
Arkansas California	3	. 112.055	. 04 104 2222	1.1908
Colorado		112,055	94,104.2332	1.1906
	2			·
Connecticut	0			·
D.C.	0			·
Delaware	2	45.006		1 2474
Florida	11	45,096	33,468.6064	1.3474
Georgia	6	13,229	15,799.9974	0.8373
Guam	0		•	ě
Hawaii			•	ě
Idaho	0			4 2064
Illinois	7	40,234	30,796.5954	1.3064
Indiana	2	•		•
lowa	0	•	•	-
Kansas	0			
Kentucky	5	11,773	10,679.9110	1.1024
Louisiana	6	2,437	2,769.3178	0.8800
Maine	0	•		•
Maryland	2			. 4 4757
Massachusetts	6	17,416	14,812.8862	1.1757
Michigan	2		•	•
Minnesota	0		•	ě
Mississippi	2			0.0000
Missouri Montana	/	9,767	11,864.2858	0.8232
Nebraska	0	٠	•	•
Nevada	0 3	٠	•	•
New Hampshire	3	•	•	•
New Jersey	0	20,103	16,983.2180	1.1837
New Mexico	9	20,103	10,903.2100	1.1031
New York		•	•	•
North Carolina	3	•	•	•
North Dakota	3	•	•	•
Ohio	2	•	•	•
Oklahoma	1	•	•	•
Oregon			•	•
Pennsylvania	16	34,955	33,423.0232	1.0458
Puerto Rico	0		00,720.0202	1.0+00
Rhode Island	0		•	•
THOUS ISIAIN	ı		•	

South Carolina	6	12,086	15,814.0888	0.7643
South Dakota	0			
Tennessee	9	25,719	24,442.8013	1.0522
Texas	21	46,766	46,793.1361	0.9994
Utah	1			
Vermont	0			
Virgin Islands	0			
Virginia	1	•		
Washington	1	•		
West Virginia	1			
Wisconsin	0	•		
Wyoming	0			
AII US	162	501,042	433,377.1699	1.1561

- 1. The number of reporting facilities included in the SUR calculation; SURs are not calculated when there are
- 2. Percent of facilities with at least one predicted device day that had an SUR significantly greater than or le
- 3. Facility-specific percentiles are only calculated if at least 20 facilities had ≥1.0 predicted number of device
- 4. Data from all ICUs and wards (and other non-critical care locations). Data contained in this table are repo

/ SURs using device days data reported to NHSN during 2022 for long term acute care hospitals (LT/ able 4. Ventilator days (VDs), all locations⁴

95% CI fo	or SUR	Facility-specific SURs				
Lower	Upper	No. Facilities with ≥1	No. Facilities	s with SUR	No. Facilities with SUR	
		Predicted Device Days	Significantly > N	National SUR	Significantly <	National SUR
0.9470	1.0066	5				
1.1838	1.1977	17	9	53%	5	29%
1.3350	1.3599	11	7	64%	4	36%
0.8231	0.8516	6				
					•	
1.2937	1.3193	7				
1.0826 0.8456	1.1224 0.9155			•		
0.0430	0.9100					
1.1584	1.1933	6				
0.8070	0.8307					
0.8070	0.8397					
1.1674	1.2002	9				
1.0349	1.0569	16	4	25%	11	69%
		•				'

· ·						
•	1					
	_		-			
	-	•			•	
•	-	•	•	•	•	•
•	-	•	•	•	•	•
•	-	•	•	•	•	•
	-	•	•	•	•	•
0.9904	1.0085	21	6	29%	12	57%
		•				
	:				•	
0.7507	0.7780	6	•			
	0.7507 1.0394 0.9904					

re less than 5 reporting facilities. This may be different from those reported in the SIR tables due to exclusions than the nominal value of the national SUR. This is only calculated if at least 10 facilities had ≥ 1.0 predicted and 2022. If a facility's predicted number of device days was <1.0, a facility-specific SUR was neither content from long-term acute care hospitals.

ACHs), by device type and patient population:

	Median					
10%	25%	50%	75%	90%		
			•			
	-					

I					
	0.4384	0.7677	0.9692	1.2559	1.4999
I				•	-
	•	•		•	•
	•	•	•	•	1
ı	•	•		•	
ı]
	0.4702	0.7392	1.0230	1.3323	1.6259

n and inclusion criteria. Refer to the technical appendix for details. cted device days in 2022.

alculated nor included in the distribution of facility-specific SURs.

Table 5. Changes in national standardized utilization ratios (SURs) using HAI data reported from all NHSN long term acute care hospitals reporting during 2022 by HAI and patient population:

Central line days (CLDs), urinary catheter days (UCDs), and ventilator days (VDs), 2022 compared to 2021

	2021 SUR	2022 SUR	Percent Change	Direction of Change, Based on Statistical Significance	p-value
CLDs, all locations ¹	0.6205	0.5977	4%	Decrease	0.0000
ICU ²	0.5926	0.5902			0.3647
				~ I	
Ward ³	0.3309	0.4191	27%	Increase	0.0000
UCDs, all locations ¹	0.7901	0.7634	3%	Decrease	0.0000
	0.6812	0.6462	5%	Decrease	0.0000
	0.3332	0.3318	0%	No change	0.7932
VDs, all¹	1.2452	1.1561	7%	Decrease	0.0000
ICUs ²	1.1240	1.0505	7%	Decrease	0.0000
Wards³					

^{*} Statistically significant, p < 0.0500

^{1.} Data from all ICUs, wards, and other non-critical care locations.

^{2.} Data from all ICUs; excludes wards (and other non-critical care locations).

^{3.} Data from all wards (for this table, wards also include step-down and specialty care areas [including hematology/oncology, bone marrow trans

plant]).

Table 6. Changes in state-specific standardized utilization ratios (SURs) between 2021 and 2022 from NHSN Long Term Acute Care Hospitals

6a. Central line days (CLDs), all locations¹

	All Long Term Acute Care Hospitals Reporting to NHSN				
State ²	2021 SUR	2022 SUR	Percent Change ³	Direction of Change, Based on Statistical Significance	p-value
Alabama	0.5816	0.5932	2%	No change	0.0507
Alaska					
Arizona	0.5717	0.5251	8%	Decrease	0.0000
Arkansas	0.5728	0.6569	15%	Increase	0.0000
California	0.6725	0.6740	0%	No change	0.5501
Colorado	0.4335	0.4245	2%	Decrease	0.0378
Connecticut					
D.C.		·	·	j	
Delaware	•	•	•		
Florida	0.5563	0.5590	0%	No change	0.2251
Georgia	0.5898	0.5839	1%	No change	0.1312
Guam	0.0000	0.0000	170	140 onlange	0.1012
Hawaii		i		·	
Idaho		·	•	•	
Illinois	0 6221	0.6491	4%	Increase	0,0000
Indiana	0.6221	0.6239	8%	Decrease	0.0000 0.0000
	0.6763	0.6239	070	Decrease	0.0000
lowa		·	•	•	
Kansas					
Kentucky	0.6894	0.6982	1%	No change	0.1047
Louisiana	0.6937	0.6978	1%	No change	0.1813
Maine					
Maryland	-				-
Massachusetts	0.4242	0.2867	32%	Decrease	0.0000
Michigan	0.5054	0.4959	2%	Decrease	0.0050
Minnesota					
Mississippi	0.5162	0.5080	2%	No change	0.0924
Missouri	0.6438	0.6417	0%	No change	0.6677
Montana					
Nebraska					
Nevada	0.8613	0.8595	0%	No change	0.7524
New Hampshire					
New Jersey	0.6082	0.5139	16%	Decrease	0.0000
New Mexico					
New York					
North Carolina	0.6309	0.6161	2%	Decrease	0.0026
North Dakota					
Ohio	0.6707	0.6610	1%	Decrease	0.0024
Oklahoma	0.8330	0.8134	2%	Decrease	0.0002
Oregon					
Pennsylvania	0.5509	0.5081	8%	Decrease	0.0000
Puerto Rico					
Rhode Island	·	·	·	İ	
South Carolina	0.6002	0.6200	3%	Increase	0.0004
South Dakota	0.0002	0.0200	370	increase	0.0004
Tennessee	0.4816	0.4347	10%	Docrosso	0.0000
Texas	0.4616	0.4347	10%	Decrease Increase	
Utah	0.7072	0.7 109	1 70	morease	0.0000
			•	•	
Vermont			•		
Virgin Islands	-				
Virginia	0.5932	0.5384	9%	Decrease	0.0000
Washington					
West Virginia	0.8695	0.5480	37%	Decrease	0.0000
Wisconsin					
Wyoming			·]	·
All US	0.6205	0.5977	4%	Decrease	0.0000

 $^{^{\}star}$ Statistically significant, p < 0.0500

^{1.} Data from all ICUs, wards, and other non-critical care locations.

 $^{2. \} Percent \ change \ and \ subsequent \ calculations \ are \ not \ calculated \ for \ states \ without \ SUR \ in \ either \ 2021 \ and/or \ 2022.$

^{3.}For states with >>100% value in the percent change field, the p-value cannot be estimated due to sparse data reported within the facility type. The p-value is indicated as inestimable when the numerator and/or denominator of percent change = 0.

Table 6. Changes in state-specific standardized utilization ratios (SURs) between 2021 and 2022 from NHSN Long Term Acute Care Hospitals

6b. Urinary catheter days (UCDs), all locations¹

	All Long Term Acute Care Hospitals Reporting to NHSN				
	2021 SUR	2022 SUR		Direction of Change, Based on Statistical Significance	p-value
Alabama	1.1229	1.1627	4%	Increase	0.0001
Alaska					
Arizona	0.7434	0.7137	4%	Decrease	0.0001
Arkansas	1.0164	1.0047	1%	No change	0.2088
California	0.9704	0.9233	5%	Decrease	l
Colorado	0.7712	0.7971	3%	Increase	l
Connecticut					
D.C.					
Delaware	-	Ī			
Florida	0.6633	0.6838	3%	Increase	0.0000
Georgia	0.7800	0.8233	6%	Increase	0.0000
Guam	0.7000	0.0200	070	morease	0.0000
Hawaii	-	•		·	·
Idaho		•	•	•	
Illinois	0.8272	0.8475	2%	Increase	0.0003
			7%		l
Indiana	0.7694	0.7141	1%	Decrease	0.0000
lowa	-			•	
Kansas					
Kentucky	0.7730	0.8252	7%	Increase	0.0000
Louisiana	1.0062	1.0323	3%	Increase	0.0000
Maine		-			
Maryland		-	-		
Massachusetts	0.4033	0.3303	18%	Decrease	l
Michigan	0.7304	0.6853	6%	Decrease	0.0000
Minnesota					
Mississippi	0.7151	0.6111	15%	Decrease	0.0000
Missouri	0.8268	0.8016	3%	Decrease	0.0001
Montana					
Nebraska	-				
Nevada	0.9147	1.0217	12%	Increase	0.0000
New Hampshire					
New Jersey	0.7784	0.6730	14%	Decrease	0.0000
New Mexico					
New York					
North Carolina	0.7569	0.7576	0%	No change	0.9167
North Dakota					
Ohio	0.7702	0.6818	11%	Decrease	0.0000
Oklahoma	1.1011	1.0237	7%	Decrease	0.0000
Oregon					
Pennsylvania	0.6982	0.6703	4%	Decrease	0.0000
Puerto Rico	0.0002	0.01.00	.,,	200.0000	0.000
Rhode Island	•		•	·	
South Carolina	0.5587	0.5369	4%	Decrease	0.0005
South Dakota	0.0007	0.0000	470	Decidase	0.0000
Tennessee	0.7585	0.6426	15%	Decrease	0.0000
Texas	0.7363	0.0420	2%		0.0000
Utah	0.0001	0.0112	270	Decrease	0.0000
		•		•	
Vermont	•	-		•	
Virgin Islands	•				•
Virginia	0.8148	0.8599	6%	Increase	0.0000
Washington					
West Virginia	1.3737	0.9111	34%	Decrease	0.0000
Wisconsin					
Wyoming					
All US	0.7901	0.7634	3%	Decrease	0.0000

^{*} Statistically significant, p < 0.0500

^{1.} Data from all ICUs, wards, and other non-critical care locations.

^{2.} Percent change and subsequent calculations are not calculated for states without SUR in either 2021 and/or 2022.

^{3.}For states with >>100% value in the percent change field, the p-value cannot be estimated due to sparse data reported within the facility type.

The p-value is indicated as inestimable when the numerator and/or denominator of percent change = 0.

Table 6. Changes in state-specific standardized utilization ratios (SURs) between 2021 and 2022 from NHSN Long Term Acute Care Hospitals

6c. Ventilator days (VDs), all locations1

		All Long Term A	cute Care Hos	pitals Reporting to NHSN	
	2021 SUR	2022 SUR		Direction of Change, Based on Statistical Significance	p-value
Alabama	0.6548	0.9765	49%	Increase	0.0000
Alaska					
Arizona					
Arkansas					
California	1.1203	1.1908	6%	Increase	0.0000
Colorado					
Connecticut					
D.C.					
Delaware					
Florida	0.5434	1.3474	148%	Increase	0.0000
Georgia	0.3874	0.8373	116%	Increase	0.0000
Guam					
Hawaii					
Idaho					
Illinois	1.0990	1.3064	19%	Increase	0.0000
Indiana					
lowa					
Kansas					
Kentucky	0.7402	1.1024	49%	Increase	0.0000
Louisiana	0.0463	0.8800	1801%	Increase	0.0000
Maine					
Maryland					
Massachusetts	0.4749	1.1757	148%	Increase	0.0000
Michigan					
Minnesota			-		
Mississippi			-		
Missouri	0.5330	0.8232	54%	Increase	0.0000
Montana					
Nebraska					
Nevada					
New Hampshire					
New Jersey	1.0845	1.1837	9%	Increase	0.0000
New Mexico					
New York					
North Carolina					
North Dakota					
Ohio			-		
Oklahoma	-		-		
Oregon			•		
Pennsylvania	1.0449	1.0458	0%	No change	0.9063
Puerto Rico			-		
Rhode Island	-		-		
South Carolina	0.9446	0.7643	19%	Decrease	0.0000
South Dakota			•		
Tennessee	1.1908	1.0522	12%	Decrease	0.0000
Texas	0.4403	0.9994	127%	Increase	0.0000
Utah			-		
Vermont					
Virgin Islands					
Virginia		.].			
Washington		.]			
West Virginia					
Wisconsin		1	·	j	
Wyoming		1		1	•
All US	1.2452	1.1561	7%	Decrease	0.0000

 $^{^{\}star}$ Statistically significant, p < 0.0500

^{1.} Data from all ICUs, wards, and other non-critical care locations.

^{2.} Percent change and subsequent calculations are not calculated for states without SUR in either 2021 and/or 2022.

^{3.}For states with >>100% value in the percent change field, the p-value cannot be estimated due to sparse data reported within the facility type.

The p-value is indicated as inestimable $\,$ when the numerator and/or denominator of percent change = 0.

Appendix A. Factors used in NHSN risk adjusted standard utilization ratios (SUR) calculation of the device utilization in Long Term Acute Care Hospitals (LTACHs).

Device Type	Validated Parameters for Risk Model
CLD	Intercept Location type Facility bed size* Facility type* LTACH setting** Proportion of admissions with hemodialysis (in percentile) Length of stay in days (in percentile)
UCD	Intercept Location type Facility bed size* Ventilator days HEMO LTACH setting** Proportion of admissions with ventilator dependence (in percentile) Proportion of admissions with hemodialysis (in percentile) Length of stay in days (in percentile)
VD	Intercept Location type proportion of admissions with ventilator dependence (in percentile)

^{*} Facility bed size and facility type are taken from the Annual LTACH Survey.

^{**} LTACH setting categorized as free standing LTACH or LTACH units in Hospitals

Additional Resources

Technical Appendix: http://www.cdc.gov/hai/pdfs/progress-report/tech-appendix.pdf Explains the methodology used to procedure the HAI Progress Report.

HAI Progress Report Home Page: http://www.cdc.gov/hai/progress-report/index.html
The complete HAI Progress Report, including state-specific fact sheets and the Executive Summary, can be found

at the above website.