



General Assembly

February Session, 2006

**Raised Bill No. 160**

LCO No. 1503

\*01503\_\_\_\_\_PH\_\*

Referred to Committee on Public Health

Introduced by:  
(PH)

**AN ACT CONCERNING HOSPITAL ACQUIRED INFECTIONS.**

Be it enacted by the Senate and House of Representatives in General Assembly convened:

1 Section 1. Section 19a-127n of the general statutes is repealed and  
2 the following is substituted in lieu thereof (*Effective from passage*):

3 (a) (1) For purposes of this section, an "adverse event" means any  
4 event that is identified on the National Quality Forum's List of Serious  
5 Reportable Events or on a list compiled by the Commissioner of Public  
6 Health and adopted as regulations pursuant to subsection [(d)] (c) of  
7 this section; [and] "corrective action plan" means a plan that  
8 implements strategies that reduce the risk of similar adverse events  
9 occurring in the future, and measures the effectiveness of such  
10 strategies by addressing the implementation, oversight and time lines  
11 of such strategies; and "hospital acquired infection" means any  
12 localized or systemic patient condition that (A) resulted from the  
13 presence of an infectious agent or agents, or its toxin or toxins, as  
14 determined by clinical examination and confirmed by laboratory  
15 testing, and (B) was not found to be present or incubating at the time  
16 of admission unless the infection was related to a previous admission  
17 to the same hospital.

18 (2) (A) The commissioner shall review the list of adverse events  
19 periodically, but not less than annually, to ascertain whether any  
20 additions, deletions or modifications to the list are necessary.

21 (B) On or before October 1, 2006, such list shall include hospital  
22 acquired infections that occur in critical care units, including, but not  
23 limited to, surgical wound infections, central line related bloodstream  
24 infections and ventilator associated pneumonia.

25 (C) On or before October 1, 2008, such list shall include additional  
26 types of hospital acquired infections identified by the commissioner  
27 after consultation with persons with expertise in the prevention,  
28 identification and control of hospital acquired infections and the public  
29 reporting of such information.

30 (b) On and after October 1, 2002, a hospital or outpatient surgical  
31 facility shall report adverse events to the Department of Public Health  
32 as follows: (1) A written report and the status of any corrective steps  
33 shall be submitted not later than seven days after the adverse event  
34 occurred; and (2) a corrective action plan shall be filed not later than  
35 thirty days after the adverse event occurred. Emergent reports, as  
36 defined in the regulations adopted pursuant to subsection (c) of this  
37 section, shall be made to the department immediately. Failure to  
38 implement a corrective action plan may result in disciplinary action by  
39 the Commissioner of Public Health, pursuant to section 19a-494.

40 (c) The Commissioner of Public Health shall adopt regulations, in  
41 accordance with chapter 54, to carry out the provisions of this section.  
42 Such regulations shall include, but shall not be limited to : [, adverse]  
43 (1) Adverse events, including hospital acquired infections, that are in  
44 addition to those contained in the National Quality Forum's List of  
45 Serious Reportable Events and that are consistent with the  
46 requirements of subdivision (2) of subsection (a) of this section; (2) a  
47 prescribed form for the reporting of adverse events, other than hospital  
48 acquired infections, pursuant to subsection (b) of this section; (3) a  
49 prescribed form for the reporting of hospital acquired infections that

50 requires information concerning (A) the specific infectious agents or  
51 toxins and the site of each infection, (B) the clinical department or unit  
52 where the patient first became infected or was first diagnosed, (C) the  
53 patient's diagnosis at the time of admission and any relevant specific  
54 surgical, medical or diagnostic procedure performed during the  
55 admission; and (4) standards and coding for the tracking and reporting  
56 of hospital acquired infections that are consistent with the  
57 recommendations of the National Healthcare Safety Network of the  
58 Centers for Disease Control and Prevention. The commissioner may  
59 require the use of said [form] forms prior to the adoption of said  
60 regulations.

61 (d) (1) On or before October first annually, the commissioner shall  
62 report, in accordance with the provisions of section 11-4a, on adverse  
63 event reporting, to the joint standing committee of the General  
64 Assembly having cognizance of matters relating to public health.

65 (2) For the report due on or before October 1, 2007, the  
66 commissioner shall include (A) an aggregate total number of hospital  
67 acquired infections reported by hospitals to the department, (B) the  
68 steps taken by the department and hospitals to comply with the  
69 provisions of this section concerning hospital acquired infections, (C)  
70 recommendations concerning any changes in reporting requirements  
71 that would improve the completeness and accuracy of the information  
72 submitted by hospitals to the department concerning hospital acquired  
73 infections.

74 (3) For the report due on or before October 1, 2008, and annually  
75 thereafter, the commissioner shall include (A) an aggregate total  
76 number of hospital acquired infections, (B) individual hospital  
77 acquired infection rates, adjusted for potential differences in risk  
78 factors, which factors shall be established by the commissioner in  
79 regulations adopted in accordance with chapter 54, (C) comparisons  
80 with state-wide averages and the steps that hospitals are taking to  
81 reduce the incidence of such infections.

82 (e) [Information] Except as provided in subsection (d) of this section,  
83 information collected pursuant to this section shall not be disclosed  
84 pursuant to subsection (a) of section 1-210, as amended, at any time,  
85 and information collected pursuant to this section shall not be subject  
86 to subpoena or discovery or introduced into evidence in any judicial or  
87 administrative proceeding except as otherwise specifically provided by  
88 law. Nothing in this section shall be construed to limit access to or  
89 disclosure of investigative files, including any adverse event report  
90 contained in such files, maintained by the department as otherwise  
91 provided in section 19a-499.

92 (f) If the department determines that it will initiate an investigation  
93 of an adverse event that has been reported, such investigation may  
94 include review by one or more practitioners with clinical expertise of  
95 the type involved in the reported adverse event.

96 (g) The Quality of Care Advisory Committee established pursuant  
97 to section 19a-127l, as amended, shall establish methods for informing  
98 the public regarding access to the department's consumer and  
99 regulatory services.

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| This act shall take effect as follows and shall amend the following sections: |                     |          |
| Section 1   | <i>from passage</i> | 19a-127n |

**Statement of Purpose:**

To provide more specific and stringent requirements for hospitals in the reporting of hospital acquired infections.

*[Proposed deletions are enclosed in brackets. Proposed additions are indicated by underline, except that when the entire text of a bill or resolution or a section of a bill or resolution is new, it is not underlined.]*