

Long-Term Care Healthcare-Associated Infections in 2023:

An Analysis of 23,970 Reports

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Abstract

Background: The Pennsylvania Patient Safety Reporting System (PA-PSRS) is the largest database of patient safety event reports in the United States. In addition to over 4.7 million acute care reports, the PA-PSRS database contains more than 420,000 long-term care (LTC) healthcare-associated infection (HAI) reports.

Methods: LTC HAI data from PA-PSRS were extracted on March 1, 2024. Infection counts were calculated based on report submission date and rates were calculated based on infection confirmation date. Reports submitted by LTC facilities and specific care areas were included for infection rates each month if resident and device days were also entered in PA-PSRS for the facility and care area.

Results: A total of 23,970 infection reports were submitted by Pennsylvania's LTC facilities in 2023, representing an 18.6% increase from 2022. The overall infection rate increased by 11.4%, from 0.88 in 2022 to 0.98 in 2023, and all six regions of the state had an increase in infection rate. The Northeast region had the highest rate, with 1.28 reports per 1,000 resident days, and the Southeast region had the lowest rate, at 0.72. The overall rate increase was driven by rates of urinary tract infection (UTI) and skin and soft tissue infection (SSTI), which increased by 20.1% and 17.4%, respectively. Within the UTI infection type, symptomatic urinary tract infection (SUTI) rates increased by 21.1% and catheter-associated urinary tract infection (CAUTI) rates increased by 11.8%.

Conclusion: There was an increase in the total number and rate of infections reported to PA-PSRS in 2023.

Introduction

The Pennsylvania Patient Safety Reporting System (PA-PSRS)^a is the largest repository of patient safety data in the United States. In addition to over 4.7 million acute care records, PA-PSRS has collected more than 420,000 long-term care (LTC) healthcare-associated infection (HAI) reports since 2009.

Methods

The LTC data from PA-PSRS were extracted on March 1, 2024, to allow additional time for rate calculations based on resident and device utilization days. Report counts for infections are based on the report submission date. Overall rates are based on the infection confirmation date and calculated per 1,000 resident days. Infection rates related to urinary catheters or central lines are calculated per 1,000 urinary catheters or 1,000 central line days, respectively. Reports submitted by LTC facilities and specific care areas were included in rate calculations if resident and device days were entered in PA-PSRS for the corresponding month.

Results

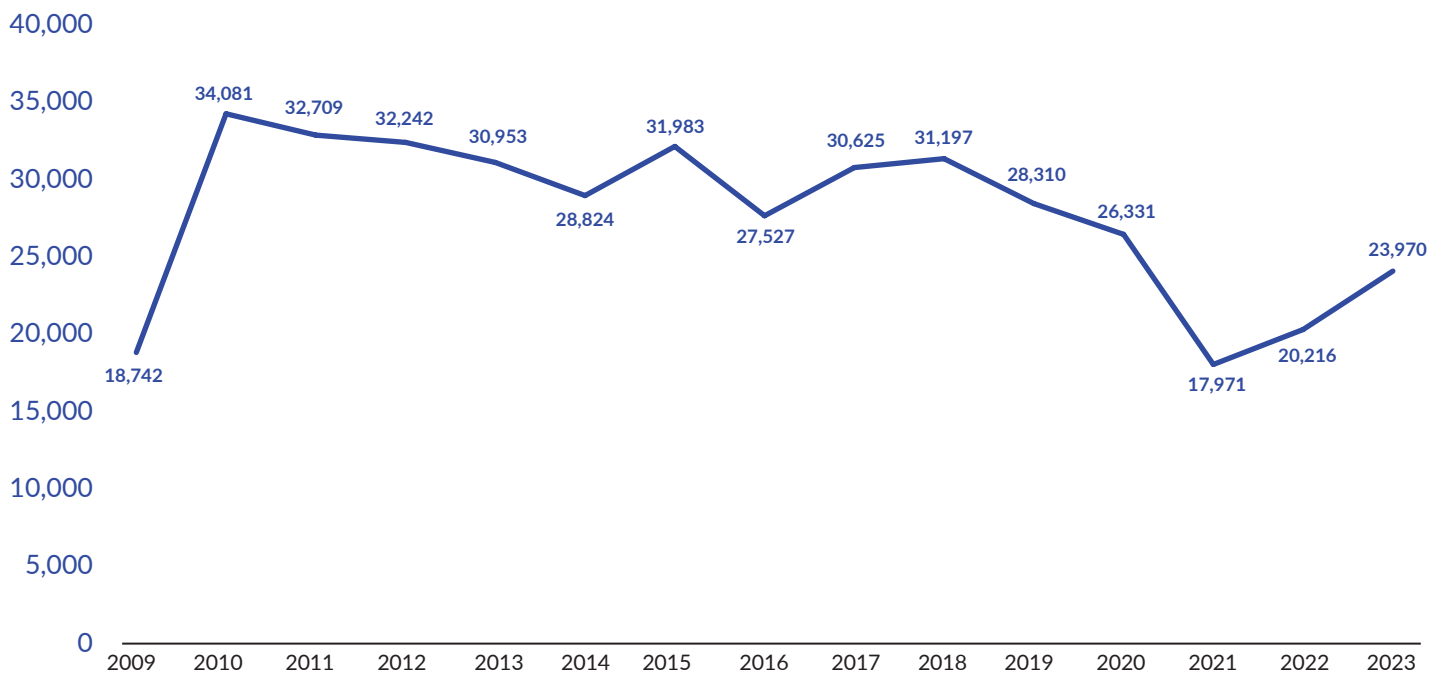
Pennsylvania's LTC facilities submitted 23,970 infection reports to PA-PSRS in 2023, which is an 18.6% increase over the prior year (see **Figure 1**). As shown in **Figure 2**, the overall infection rate in 2023 was 0.98 infections per 1,000 resident days, representing an 11.4% increase from 2022.

Figure 3, which displays infection rates by region, shows that all six regions of the state had an increase in infection rate from 2022 to 2023. The Northeast region had the highest infection rate in 2023, with 1.28 reports per 1,000 resident days, and the Southeast region had the lowest rate, at 0.72. The distribution of LTC infection reports and infection rates by region are shown in **Table 1**.

LTC Healthcare-Associated Infections

Reports submitted by LTC facilities to PA-PSRS are classified into five main infection types (see **Figure 4**). In 2020, respiratory tract infections (RTI) were the most frequently reported infection type. For the last three years, skin and soft tissue infections (SSTI) were the most frequently reported, followed by urinary tract infections (UTI) and RTI. The number of reports submitted for all three of these infection types increased in 2023, with the top two showing large increases of 23.1% and 26.6%, respectively.

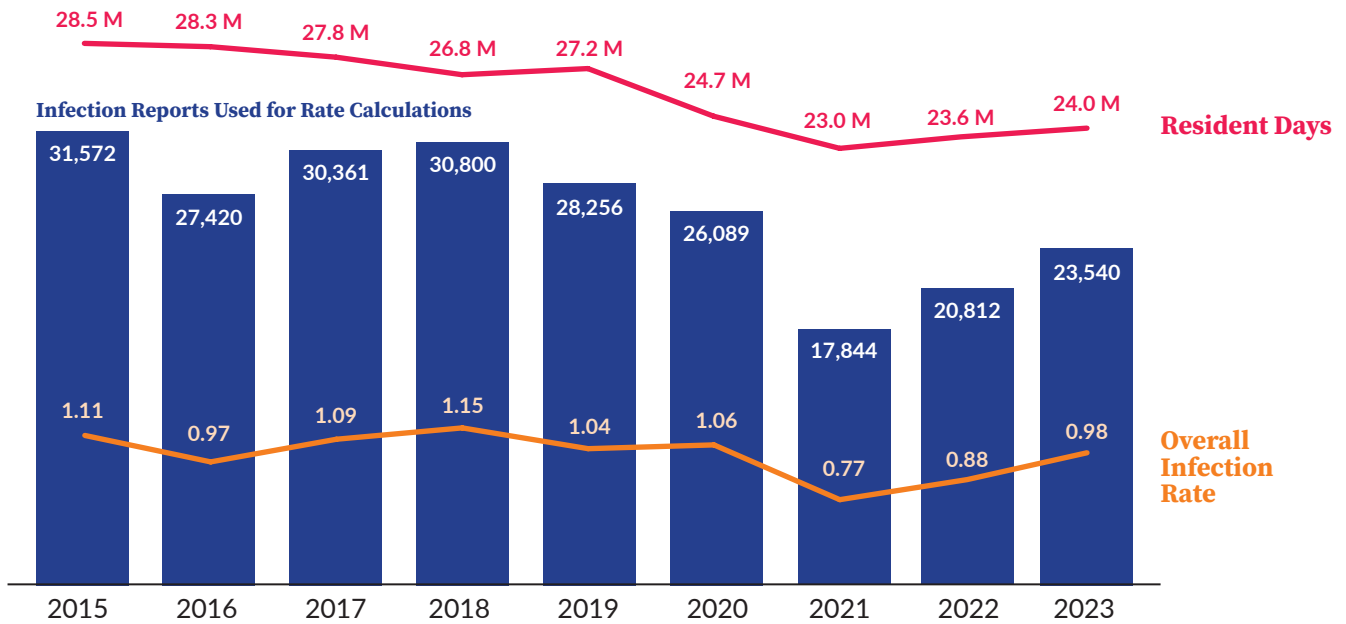
Figure 1. LTC Infection Reports Submitted to PA-PSRS by Year



Note: Numbers shown for prior years may differ from previously published information due to receipt of data or changes to reports made by reporting facilities after the data cutoff date for prior publications.

^aPA-PSRS is a secure, web-based system through which Pennsylvania long-term care facilities submit reports of healthcare-associated infections in accordance with mandatory reporting laws outlined in the Medical Care Availability and Reduction of Error (MCARE) Act (Act 52 of 2007).¹ All reports submitted through PA-PSRS are confidential and no information about individual facilities or providers is made public.

Figure 2. PA-PSRS LTC Infection Reports, Resident Days, and Overall Infection Rates per 1,000 Resident Days by Year



Note: The number of infection reports shown for each year is based on infection confirmation date, rather than report submission date, to ensure consistency with the time frame in which the resident days occurred. Reports were excluded from the rate calculation if a facility did not report resident days for the corresponding month. Numbers and rates shown for prior years may differ from previously published information due to receipt of data or changes to reports made by reporting facilities after the data cutoff date for prior publications.

Figure 3. PA-PSRS LTC Infection Rates per 1,000 Resident Days by Region—2022 Versus 2023

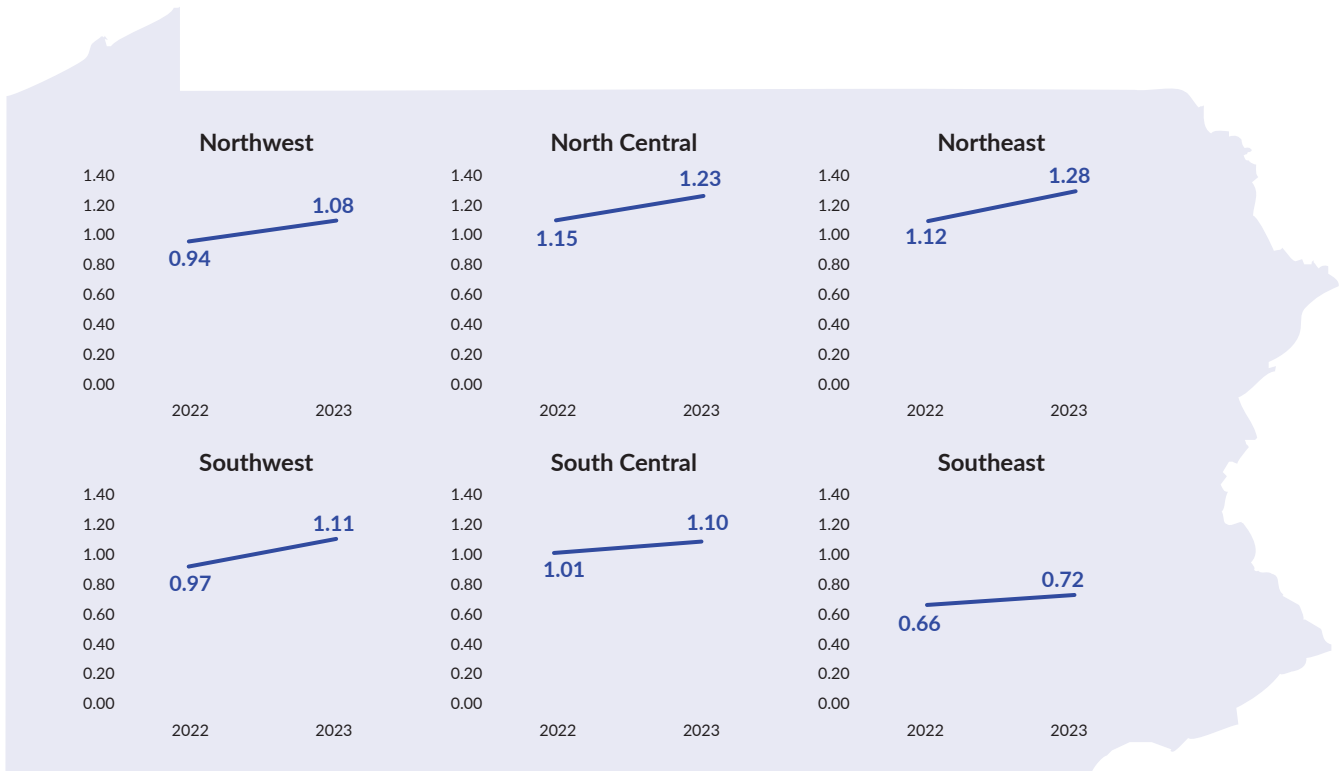
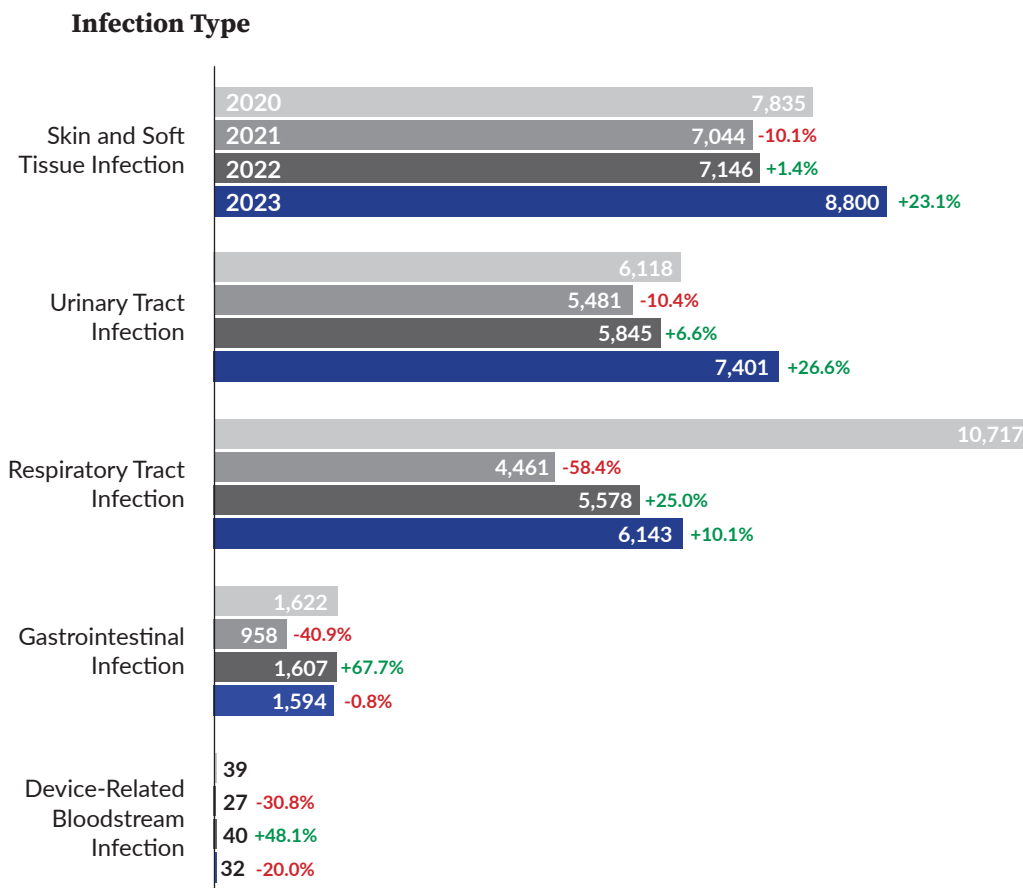


Table 1. PA-PSRS LTC Infection Reports and Infection Rates per 1,000 Resident Days by Region

Region	2022 Infection Reports	2022 Rate per 1,000 Resident Days	2023 Infection Reports	2023 Rate per 1,000 Resident Days
North Central	1,653	1.15	1,850	1.23
Northeast	3,452	1.12	4,026	1.28
Northwest	1,963	0.94	2,265	1.08
South Central	3,123	1.01	3,481	1.10
Southeast	6,213	0.66	6,807	0.72
Southwest	4,408	0.97	5,111	1.11
Total	20,812	0.88	23,540	0.98

Note: The number of infection reports shown for each year is based on infection confirmation date, rather than report submission date, to ensure consistency with the time frame in which the resident days occurred. Reports were excluded from the rate calculation if a facility did not report resident days for the corresponding month. Numbers and rates shown for prior years may differ from previously published information due to receipt of data or changes to reports made by reporting facilities after the data cutoff date for prior publications.

Figure 4. LTC Infection Reports Submitted to PA-PSRS by Infection Type and Year



Note: Numbers shown for prior years may differ from previously published information due to receipt of data or changes to reports made by reporting facilities after the data cutoff date for prior publications.

LTC Healthcare-Associated Infection Subtypes

Table 2 shows the number of reports submitted for all infection subtypes for the past four years. The most frequently reported subtype in 2023 was cellulitis, soft tissue, or wound infection, followed by symptomatic urinary tract infection (SUTI) and pneumonia, which is the same top-three subtype ordering as the prior two years. Of the 14 infection subtypes, nine had an increase in number of reports submitted in 2023 compared to 2022, with SUTI showing the largest increase of 1,228 reports. Influenza-like illness had the largest percentage increase of 179.7%, going from 64 reported infections in 2022 to 179 in 2023. Of the five subtypes that decreased in number, influenza had the largest decrease, dropping by 449 reports from 2022 to 2023.

Care Area

Table 3 shows the distribution of 2023 reports by infection type and care area. Skilled nursing/short-term rehabilitation units accounted for the largest proportion of infections (34.1%; 8,162 of 23,970). In 2023, SSTI were reported more than any other infection type in all care areas except ventilator-dependent units, in which RTIs were reported most frequently. **Table 4** shows the 2023 distribution of infection reports by infection subtype and care area. As was the case in 2022, the largest concentration of reports in 2023 was seen with SUTI in skilled nursing/short-term rehabilitation units.

LTC Healthcare-Associated Infection Rates

Figure 5 shows rates per 1,000 resident days for the five main infection types for 2020 through 2023. The increase in overall rate

in 2023 was driven by increases in the UTI and SSTI rates, which increased by 20.1% and 17.4%, respectively.

In **Figure 6** and **Table 5**, rates are shown for each infection subtype for 2020 through 2023. As mentioned above, the UTI rate was a driver of the increase in the overall rate for 2023. Within the UTI infection type, there were notable increases in SUTI and catheter-associated urinary tract infection (CAUTI) rates, with SUTI increasing by 21.1% and CAUTI by 11.8%. Looking further into the circumstances around CAUTI, the past three years have seen a steady increase in the percentage of resident days that coincided with catheter usage. In the 10 years prior to 2021, this percentage varied from 4.5% to 4.8%; in 2021, 2022, and 2023, the percentage was 4.9%, 5.1%, and 5.3%, respectively.

In **Table 6**, the infection rates are displayed by year based on care area and infection subtype. The largest percentage increases in rate from 2022 to 2023 occurred with influenza-like illness in dementia units (+528.6%), asymptomatic bacteremic urinary tract infection (ABUTI) in dementia units (+128.6%), and norovirus in mixed units (+108.1%). Influenza rates had the largest percentage decrease of all infection subtypes in three of the five care areas (mixed, nursing, and ventilator-dependent units).

Figure 7 and **Table 7** display infection rates for influenza, influenza-like illness, pneumonia, lower RTI (LRTI), and norovirus by quarter for 2020 through 2023. These rates are calculated as the number of infections by quarter per 1,000 resident days. With the exception of 2021, norovirus rates have peaked in Q1 of each year. The influenza rate rose to 0.04 in Q4 2023 after having been on a decline for three quarters following its peak in Q4 2022.

Table 2. LTC Infection Reports Submitted to PA-PSRS and Percentage Distribution by Infection Subtype and Year

Infection Type	Infection Subtype	Number of Reports				% of Total				Change in Reports 2022 to 2023	
		2020	2021	2022	2023	2020	2021	2022	2023	Number	Percent
Skin and Soft Tissue Infection	Cellulitis/Soft Tissue/Wound Infection	5,180	4,951	5,081	6,212	19.7%	27.5%	25.1%	25.9%	1,131	22.3%
	Conjunctivitis	2,528	1,957	1,937	2,483	9.6%	10.9%	9.6%	10.4%	546	28.2%
	Scabies	127	136	128	105	0.5%	0.8%	0.6%	0.4%	-23	-18.0%
Urinary Tract Infection	SUTI	4,715	4,288	4,589	5,817	17.9%	23.9%	22.7%	24.3%	1,228	26.8%
	CAUTI	1,251	1,052	1,087	1,363	4.8%	5.9%	5.4%	5.7%	276	25.4%
	ABUTI	152	141	169	221	0.6%	0.8%	0.8%	0.9%	52	30.8%
Respiratory Tract Infection	Pneumonia	4,862	3,004	3,005	3,747	18.5%	16.7%	14.9%	15.6%	742	24.7%
	LRTI	3,769	1,216	1,451	1,608	14.3%	6.8%	7.2%	6.7%	157	10.8%
	Influenza	1,432	201	1,058	609	5.4%	1.1%	5.2%	2.5%	-449	-42.4%
	Influenza-Like Illness	654	40	64	179	2.5%	0.2%	0.3%	0.7%	115	179.7%
Gastro-intestinal Infection	<i>C. diff</i>	961	883	854	872	3.6%	4.9%	4.2%	3.6%	18	2.1%
	Norovirus	647	70	730	707	2.5%	0.4%	3.6%	2.9%	-23	-3.2%
	Bacteriologic Gastroenteritis	14	5	23	15	0.1%	0.0%	0.1%	0.1%	-8	-34.8%
Device-Related Bloodstream Infection	CLABSI	39	27	40	32	0.1%	0.2%	0.2%	0.1%	-8	-20.0%
Totals		26,331	17,971	20,216	23,970	100.0%	100.0%	100.0%	100.0%	3,754	18.6%

Note: Numbers shown for prior years may differ from previously published information due to receipt of data or changes to reports made by reporting facilities after the data cutoff date for prior publications.

SUTI = Symptomatic Urinary Tract Infection
 CAUTI = Catheter-Associated Urinary Tract Infection
 ABUTI = Asymptomatic Bacteremic Urinary Tract Infection

LRTI = Lower Respiratory Tract Infection
 CLABSI = Central Line-Associated Blood Stream Infection

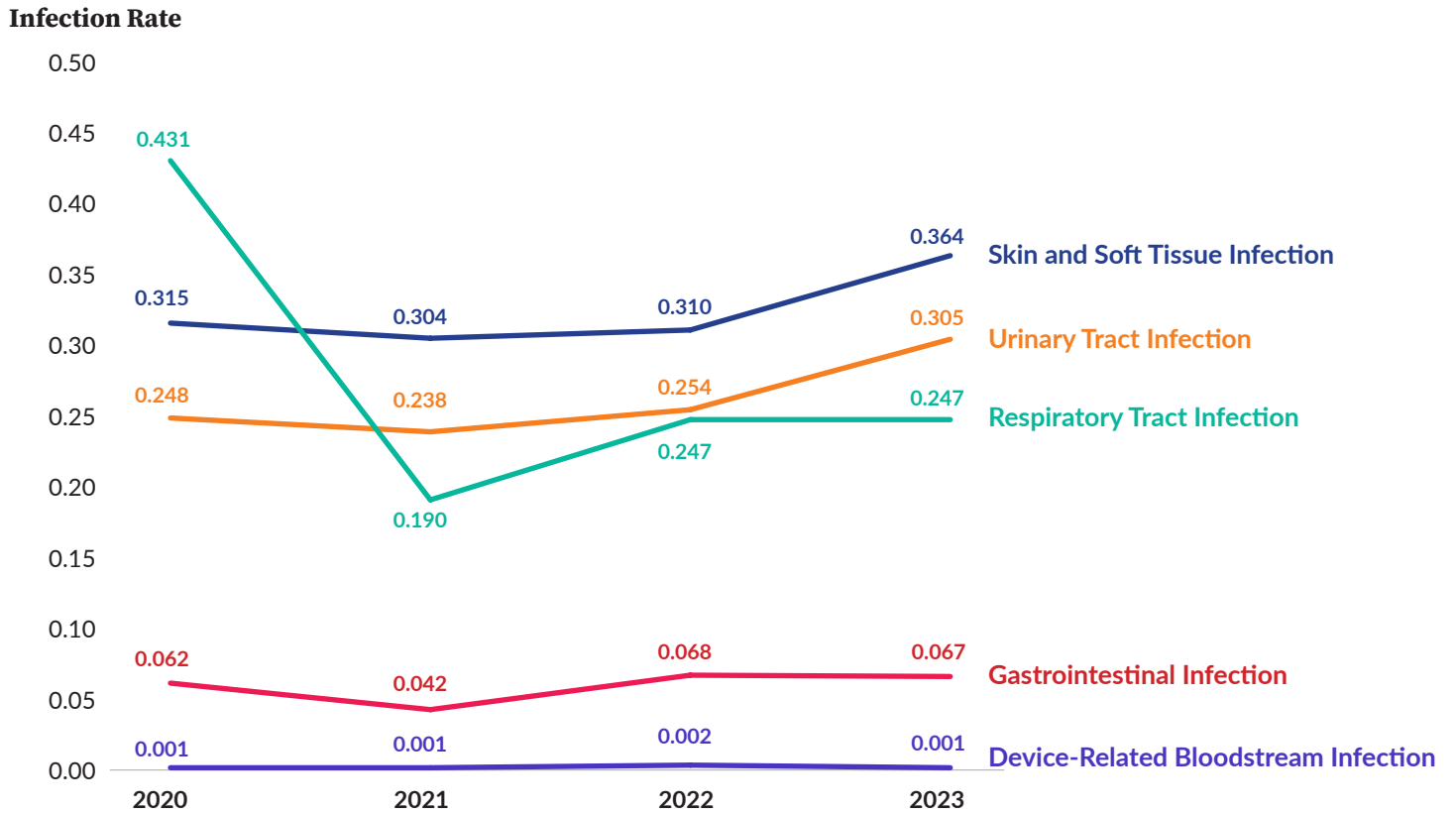
Table 3. LTC Infection Reports Submitted to PA-PSRS in 2023 by Infection Type and Care Area

Infection Type	Skilled Nursing/ Short-Term Rehabilitation Unit	Mixed Unit	Nursing Unit	Dementia Unit	Ventilator- Dependent Unit	Total
Skin and Soft Tissue Infection	2,786	2,612	2,735	589	78	8,800
Urinary Tract Infection	2,742	2,236	2,099	303	21	7,401
Respiratory Tract Infection	2,000	1,782	1,757	404	200	6,143
Gastrointestinal Infection	625	444	397	112	16	1,594
Device-Related Bloodstream Infection	9	17	6	0	0	32
Total	8,162	7,091	6,994	1,408	315	23,970

Table 4. LTC Infection Reports Submitted to PA-PSRS in 2023 by Infection Subtype and Care Area

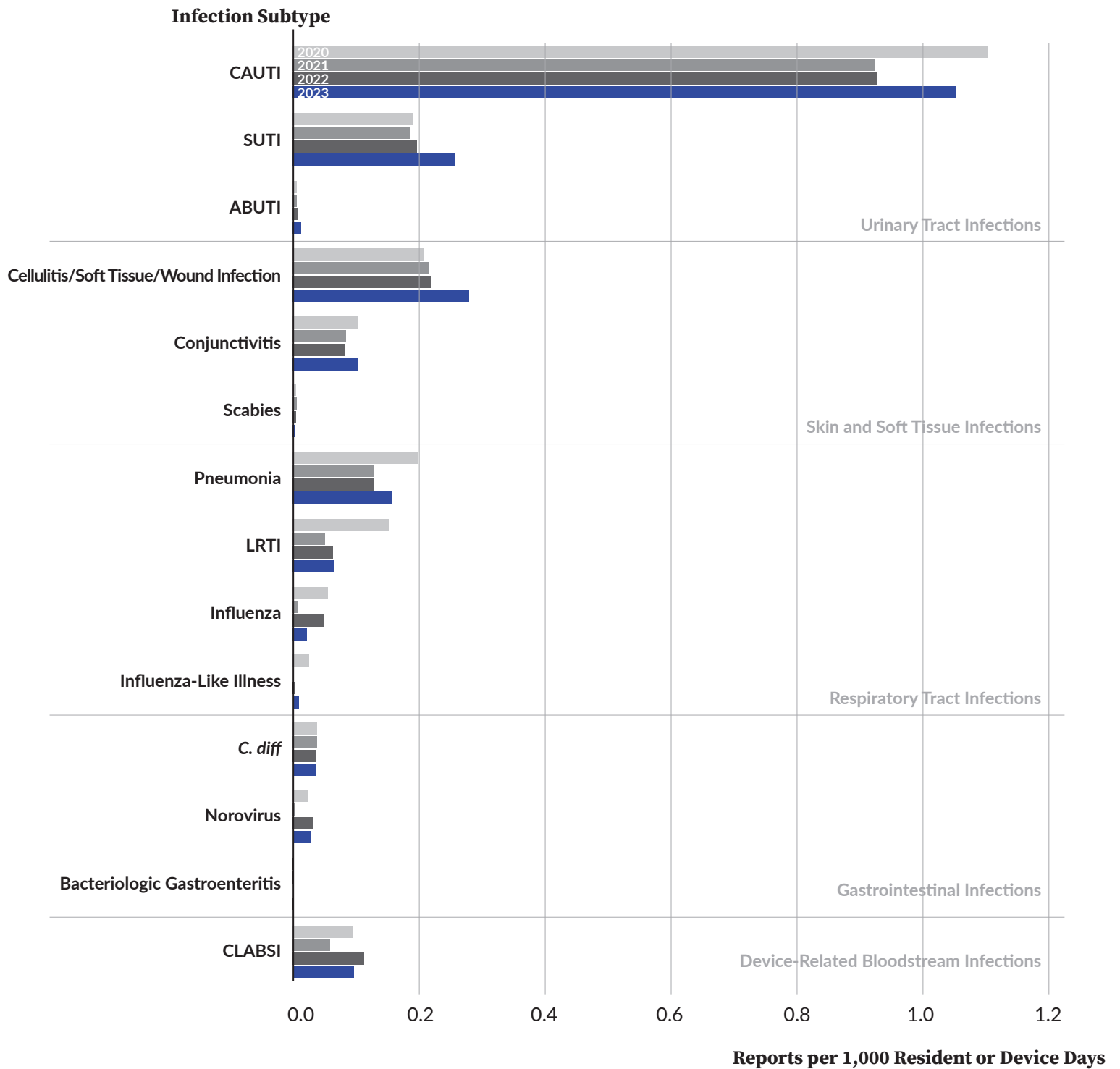
Infection Subtype	Skilled Nursing/ Short-Term Rehabilitation Unit	Mixed Unit	Nursing Unit	Dementia Unit	Ventilator- Dependent Unit	Total
Cellulitis/Soft Tissue/Wound Infection	1,948	1,860	2,045	313	46	6,212
SUTI	2,156	1,713	1,688	249	11	5,817
Pneumonia	1,181	1,092	1,121	198	155	3,747
Conjunctivitis	784	727	674	266	32	2,483
LRTI	536	440	451	136	45	1,608
CAUTI	522	429	360	44	8	1,363
Influenza	362	257	201	36	16	872
<i>C. diff</i>	258	183	191	75	0	707
Norovirus	220	192	154	43	0	609
ABUTI	64	94	51	10	2	221
Scabies	63	58	31	27	0	179
Influenza-Like Illness	54	25	16	10	0	105
CLABSI	9	17	6	0	0	32
Bacteriologic Gastroenteritis	5	4	5	1	0	15
Total	8,162	7,091	6,994	1,408	315	23,970

Figure 5. PA-PSRS LTC Infection Rates per 1,000 Resident Days by Infection Type



Note: Rates shown for prior years may differ from previously published information due to receipt of data or changes to reports made by reporting facilities after the data cutoff date for prior publications.

Figure 6. PA-PSRS LTC Infection Rates per 1,000 Resident or Device Days by Infection Subtype and Year



Note: Rates shown for prior years may differ from previously published information due to receipt of data or changes to reports made by reporting facilities after the data cutoff date for prior publications.

Table 5. PA-PSRS LTC Infection Rates per 1,000 Resident or Device Days by Infection Subtype and Year in Descending Order by 2023 Rates

Infection Subtype	Rates			
	2020	2021	2022	2023
CAUTI	1.098	0.921	0.938	1.049
Cellulitis/Soft Tissue/Wound Infection	0.208	0.215	0.221	0.256
SUTI	0.191	0.186	0.199	0.241
Pneumonia	0.197	0.128	0.130	0.154
Conjunctivitis	0.102	0.084	0.083	0.104
CLABSI	0.095	0.059	0.112	0.093
LRTI	0.152	0.051	0.064	0.065
<i>C. diff</i>	0.038	0.038	0.036	0.036
Norovirus	0.023	0.003	0.031	0.030
Influenza	0.055	0.009	0.049	0.022
ABUTI	0.006	0.006	0.007	0.009
Influenza-Like Illness	0.026	0.002	0.004	0.006
Scabies	0.005	0.006	0.005	0.004
Bacteriologic Gastroenteritis	0.001	<0.0005	0.001	0.001

Note: Rates shown for prior years may differ from previously published information due to receipt of data or changes to reports made by reporting facilities after the data cutoff date for prior publications. If <0.0005 appears in a cell, it means that the rate is greater than zero but would otherwise be shown as 0.000 due to rounding to three decimal places.

Table 6. PA-PSRS LTC Infection Rates per 1,000 Resident or Device Days by Care Area, Infection Subtype, and Year in Descending Order by Percentage Increase From 2022 to 2023 Within Each Care Area

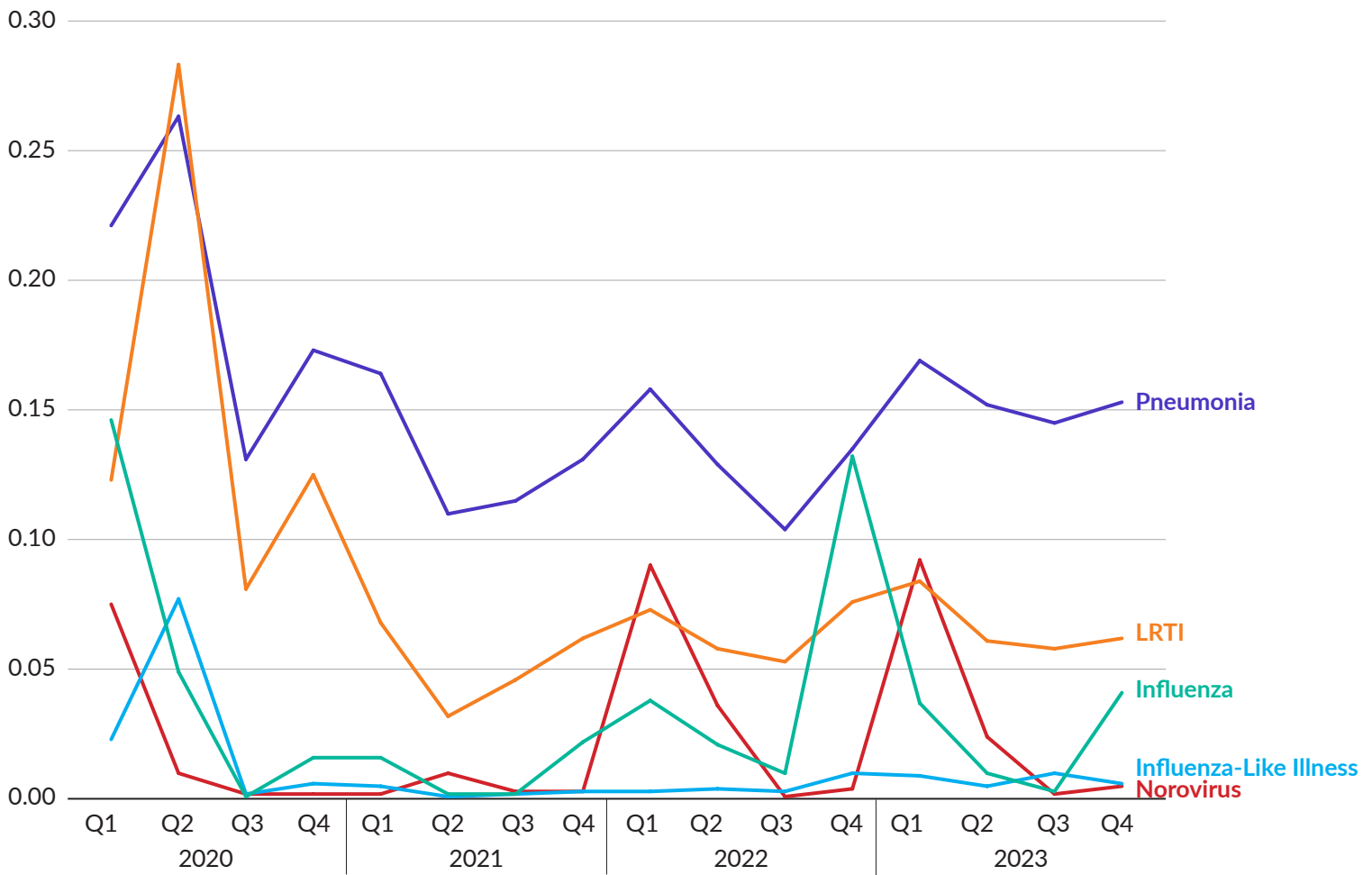
Care Area	Infection Subtype	2020	2021	2022	2023	2020 to 2021	2021 to 2022	2022 to 2023
Dementia Unit	Influenza-Like Illness	0.032	0.001	0.002	0.013	-96.6%	90.9%	528.6%
	ABUTI	0.005	0.004	0.002	0.005	-14.0%	-51.2%	128.6%
	Conjunctivitis	0.107	0.090	0.084	0.141	-15.8%	-6.6%	67.1%
	<i>C. diff</i>	0.016	0.012	0.012	0.019	-20.6%	-1.6%	52.9%
	Scabies	0.006	0.014	0.005	0.006	152.7%	-66.2%	23.4%
	Pneumonia	0.147	0.085	0.088	0.102	-42.2%	3.5%	15.6%
	LRTI	0.136	0.027	0.061	0.067	-80.0%	124.6%	9.3%
	Cellulitis, Soft Tissue, or Wound Infection	0.149	0.151	0.156	0.167	1.4%	3.2%	7.0%
	CAUTI	1.105	0.451	0.975	0.996	-59.2%	116.1%	2.2%
	SUTI	0.122	0.107	0.130	0.132	-11.8%	20.7%	2.2%
	Influenza	0.044	0.002	0.023	0.018	-95.3%	1004.8%	-22.4%
	Norovirus	0.045	-	0.066	0.039	-100.0%	-	-41.3%
	Bacteriologic Gastroenteritis	<0.0005	-	-	<0.0005	-100.0%	-	-
	CLABSI	-	-	-	-	-	-	-
Mixed Unit	Norovirus	0.016	0.003	0.014	0.028	-82.8%	400.0%	108.1%
	ABUTI	0.007	0.006	0.008	0.014	-13.6%	35.1%	85.7%
	Influenza-Like Illness	0.022	<0.0005	0.004	0.007	-98.7%	1233.3%	72.5%
	CLABSI	0.062	0.052	0.100	0.163	-17.5%	94.8%	62.0%
	Scabies	0.002	0.006	0.003	0.004	250.0%	-58.7%	46.2%
	CAUTI	1.256	0.954	0.955	1.216	-24.0%	0.1%	27.3%
	Conjunctivitis	0.109	0.088	0.087	0.110	-18.7%	-1.6%	26.4%
	SUTI	0.204	0.209	0.205	0.259	2.5%	-2.0%	26.3%
	Cellulitis, Soft Tissue, or Wound Infection	0.215	0.228	0.231	0.282	6.1%	1.7%	21.7%
	Pneumonia	0.200	0.123	0.136	0.162	-38.4%	10.6%	19.2%
	LRTI	0.144	0.040	0.054	0.064	-72.3%	35.7%	17.6%
	<i>C. diff</i>	0.043	0.040	0.042	0.040	-8.8%	6.8%	-5.5%
	Bacteriologic Gastroenteritis	<0.0005	<0.0005	0.001	<0.0005	-66.7%	450.0%	-45.5%
	Influenza	0.041	0.011	0.053	0.020	-73.2%	373.9%	-61.8%
Nursing Unit	Pneumonia	0.164	0.109	0.107	0.138	-33.8%	-2.0%	29.9%
	Conjunctivitis	0.093	0.071	0.072	0.086	-23.0%	0.8%	19.2%
	Cellulitis, Soft Tissue, or Wound Infection	0.183	0.198	0.221	0.252	8.2%	11.7%	13.9%
	SUTI	0.164	0.162	0.187	0.206	-1.4%	15.4%	10.3%
	LRTI	0.139	0.042	0.055	0.056	-69.9%	30.3%	2.4%
	ABUTI	0.005	0.007	0.007	0.007	43.8%	0.0%	1.4%
	<i>C. diff</i>	0.026	0.028	0.025	0.025	9.4%	-10.4%	0.4%
	Bacteriologic Gastroenteritis	<0.0005	-	<0.0005	<0.0005	-100.0%	-	0.0%
	CLABSI	0.151	0.014	0.081	0.081	-90.9%	494.2%	-0.4%
	CAUTI	0.943	0.855	0.959	0.850	-9.4%	12.2%	-11.4%
	Norovirus	0.033	0.006	0.035	0.024	-82.0%	494.9%	-30.8%
	Influenza-Like Illness	0.023	0.002	0.004	0.002	-89.7%	45.8%	-37.1%
	Scabies	0.006	0.005	0.004	0.002	-12.7%	-27.1%	-40.0%
	Influenza	0.057	0.005	0.051	0.021	-90.4%	837.0%	-59.3%

Table 6. (continued.)

Care Area	Infection Subtype	2020	2021	2022	2023	2020 to 2021	2021 to 2022	2022 to 2023
Skilled Nursing/ Short-Term Rehabilitation Unit	Influenza-Like Illness	0.030	0.002	0.005	0.008	-92.4%	113.0%	69.4%
	SUTI	0.225	0.214	0.225	0.291	-5.2%	5.1%	29.4%
	Conjunctivitis	0.100	0.083	0.084	0.105	-16.3%	0.4%	25.1%
	CAUTI	1.054	0.950	0.910	1.137	-9.9%	-4.2%	24.9%
	Cellulitis, Soft Tissue, or Wound Infection	0.239	0.233	0.226	0.259	-2.5%	-2.9%	14.4%
	Pneumonia	0.226	0.145	0.143	0.158	-36.1%	-1.4%	10.7%
	ABUTI	0.007	0.006	0.008	0.009	-16.2%	43.9%	6.1%
	<i>C. diff</i>	0.050	0.052	0.047	0.048	2.8%	-9.5%	2.6%
	Norovirus	0.014	0.002	0.034	0.035	-86.6%	1684.2%	1.8%
	LRTI	0.169	0.061	0.074	0.072	-64.3%	22.0%	-2.7%
	Scabies	0.008	0.005	0.010	0.007	-41.0%	119.6%	-28.7%
	Influenza	0.070	0.014	0.053	0.026	-80.1%	280.6%	-51.8%
	Bacteriologic Gastroenteritis	<0.0005	<0.0005	0.002	<0.0005	0.0%	200.0%	-53.3%
CLABSI	0.095	0.091	0.136	0.062	-4.2%	49.5%	-54.1%	
Ventilator- Dependent Unit	Pneumonia	0.892	1.037	1.062	1.105	16.3%	2.4%	4.1%
	Cellulitis, Soft Tissue, or Wound Infection	0.340	0.361	0.363	0.354	6.1%	0.6%	-2.5%
	<i>C. diff</i>	0.141	0.190	0.151	0.113	34.9%	-20.8%	-24.8%
	LRTI	0.449	0.774	0.507	0.319	72.4%	-34.5%	-37.1%
	Conjunctivitis	0.289	0.407	0.452	0.220	40.9%	11.1%	-51.4%
	SUTI	0.109	0.105	0.164	0.071	-3.8%	56.6%	-56.9%
	CAUTI	1.785	1.440	0.828	0.276	-19.3%	-42.5%	-66.7%
	CLABSI	-	-	0.165	-	-	-	-100.0%
	Influenza	0.019	-	0.007	-	-100.0%	-	-100.0%
	ABUTI	0.006	0.026	-	0.014	309.4%	-100.0%	-
	Bacteriologic Gastroenteritis	-	-	-	-	-	-	-
	Influenza-Like Illness	0.006	-	-	-	-100.0%	-	-
	Norovirus	-	-	-	-	-	-	-
	Scabies	-	-	-	-	-	-	-

Note: When a dash “-” appears in a cell within the table, it means that the rate is zero. If <0.0005 appears in a cell, it means that the rate is greater than zero but would otherwise be shown as 0.000 due to rounding to three decimal places. When -100.0% appears in a cell, it means that the year to which that percentage reduction applies had a zero rate and the prior year had a nonzero rate. Rates shown for prior years may differ from previously published information due to receipt of data or changes to reports made by reporting facilities after the data cutoff date for prior publications.

Figure 7. PA-PSRS LTC Infection Rates per 1,000 Resident Days Trending for Seasonal Infection Subtypes by Quarter



Note: Rates shown for prior years may differ from previously published information due to receipt of data or changes to reports made by reporting facilities after the data cutoff date for prior publications.

Table 7. PA-PSRS LTC Infection Rates per 1,000 Resident Days for Seasonal Infection Subtypes by Quarter

	Influenza	Influenza-Like Illness	LRTI	Norovirus	Pneumonia
2020 Q1	0.145	0.022	0.122	0.074	0.220
Q2	0.048	0.076	0.282	0.009	0.262
Q3	<0.0005	0.001	0.080	0.001	0.130
Q4	0.015	0.005	0.124	0.001	0.172
2021 Q1	0.015	0.004	0.067	0.001	0.163
Q2	0.001	<0.0005	0.031	0.009	0.109
Q3	0.001	0.001	0.045	0.002	0.114
Q4	0.021	0.002	0.061	0.002	0.130
2022 Q1	0.037	0.002	0.072	0.089	0.157
Q2	0.020	0.003	0.057	0.035	0.128
Q3	0.009	0.002	0.052	<0.0005	0.103
Q4	0.131	0.009	0.075	0.003	0.134
2023 Q1	0.036	0.008	0.083	0.091	0.168
Q2	0.009	0.004	0.060	0.023	0.151
Q3	0.002	0.009	0.057	0.001	0.144
Q4	0.040	0.005	0.061	0.004	0.152

Note: Rates shown for prior years may differ from previously published information due to receipt of data or changes to reports made by reporting facilities after the data cutoff date for prior publications. If <0.0005 appears in a cell, it means that the rate is greater than zero but would otherwise be shown as 0.000 due to rounding to three decimal places.

Discussion

Pennsylvania’s LTC facilities reported 23,970 infections and 24.0 million resident days in PA-PSRS in 2023, with an overall infection rate of 0.98. This represents an 18.6% increase in the total number of infection reports and an 11.4% increase in the rate of reported infections when compared to 2022. The increase in overall infection rate was driven by increases in UTI and SSTI rates, which increased by 20.1% and 17.4%, respectively.

Since the COVID-19 pandemic began, Patient Safety Authority (PSA) infection prevention advisors have noted that LTC facilities are challenged by infection preventionist turnover, creating scenarios with no overlap in on-site infection prevention coverage and a need for education on required reporting. In 2023, PSA identified facilities that did not report any HAIs or that were in the bottom 10th percentile of reporting in the previous year. PSA sent letters to these facilities advising that they may not be meeting reporting requirements. In addition, infection prevention advisors followed up with these facilities to discuss reporting requirements and provide guidance and resources for surveillance and reporting.

Conclusion

In 2023, there were increases in the number of infection reports submitted to PA-PSRS and the overall infection rate for Pennsylvania’s LTC facilities. The increase in overall infection rate was driven by UTI and SSTI, with notable increases in CAUTI and SUTI rates.

Note

This analysis was exempted from review by the Advarra Institutional Review Board.

References

1. Pennsylvania Department of Health. Medical Care Availability and Reduction of Error (MCARE) Act, Pub. L. No. 154 Stat. 13 (2002). DOH website. <https://www.health.pa.gov/topics/Documents/Laws%20and%20Regulations/Act%2013%20of%202002.pdf>. Published 2002. Accessed April 12, 2024.

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