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Mr. Volavka:

Doylestown Hospital has an aggressive infection control program that includes participation with the Centers for Disease Control and Prevention (CDC) in the only nationally-recognized comprehensive infection surveillance and control program. The hospital's infection control program staff is trained by the CDC and they closely follow all CDC protocols. Only a select number of hospitals participate in this important program.

Quality reporting is the cornerstone of Doylestown Hospital's mission. Long-term quality improvement programs have been enhanced at Doylestown Hospital through the Improving Systems Initiative (ISI), an evidence-based analysis and process improvement effort that provides timely data to guide teams to focus on variations in clinical practices and redesign our processes.

The combination of aggressive surveillance and process improvement supported by data that is close to real-time should impact how the consumer comprehends the Doylestown Hospital statistics presented in the Pennsylvania Health Care Cost Containment Council's (PHC4) report on hospital-acquired infections for CY2005. For instance:

- The Doylestown Hospital rate per 1,000 cases for the three of the most serious infections Surgical Site, Bloodstream and Multiple are well below the statewide and peer group rates. Doylestown participates in the Surgical Care Improvement Project, a national quality partnership with leading private and public organizations.
- There were 0 (zero) mortalities related to surgical site infections, far below the statewide and peer group rates.
- The rate of incidence for another serious infection Pneumonia is slightly higher than the statewide and peer group figures. However, the mortality rate associated with pneumonia patients is lower than the statewide norm and significantly lower than the peer group. A variety of factors may influence this rate.
- Doylestown Hospital had a higher rate for the most common and least serious infection –
 Urinary Tract than statewide or peer group statistics. The Hospital & Healthcare
 Association of Pennsylvania has reported discrepancies in how hospitals collected the data.
 Prior to the collection of PHC4's 2005 data, Doylestown Hospital staff revamped processes
 to further identify and reduce urinary tract infections. Details are available.

- The mortality rate for patients with associated urinary tract infections at Doylestown Hospital is also higher than statewide and peer group figures. No patient died because of a urinary tract infection at Doylestown. A complete chart review of these 14 deaths demonstrates that the cause of death was completely unrelated to the infection in each of the cases. Any additional charges relate only to the cost of medicine and did not increase costs to the insurer.
- Doylestown Hospital cautions the reader to be aware that infection rates and average length of stay and average charges are not directly related. Treatment of a urinary tract infection is relatively simple and inexpensive; the average length of stay and patient stay charges for those with a urinary tract infection reflect the medical or surgical condition that required hospitalization and not the urinary tract infection.

Doylestown Hospital maintains its commitment to quality improvement and quality reporting, and will use the PHC4 report as another point of information in addition to the more significant, validated and time-tested CDC efforts. We welcome all inquiries.

Sincerely

Scott Levy, MD

Chief Medical Officer

