

JAN 18 2008

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# A BILL FOR AN ACT

RELATING TO HOSPITAL-ACQUIRED INFECTIONS.

**BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF HAWAII:**

1           SECTION 1. According to the Centers for Disease Control  
2 and Prevention, every year almost two million patients are  
3 infected while hospitalized and ninety-eight thousand of them  
4 die, more than auto accidents and homicides combined. The costs  
5 are estimated to add \$27,500,000,000 per year to hospital  
6 expenses each year. Of those infected patients, the Centers for  
7 Disease Control and Prevention estimates that about 94,360  
8 patients developed serious methicillin-resistant staphylococcus  
9 aureus (commonly known as MRSA) and nineteen thousand of them  
10 died, exceeding the number of acquired immune deficiency  
11 syndrome-related deaths in the United States.

12           Hospital-acquired infections include antibiotic resistant  
13 superbugs, including methicillin-resistant staphylococcus aureus  
14 and vancomycin-resistant enterococci (commonly known as VRE).  
15 About eighty-five per cent of serious methicillin-resistant  
16 staphylococcus aureus infections occur in health care settings,  
17 and with regards to hospitals, those infections account for



1 greater than half of hospital-acquired staphylococcus aureus  
2 infections, with similar statistics for vancomycin-resistant  
3 enterococci infections.

4       According to a local television news story of October 19,  
5 2007, Hawaii's tropical paradise is also home to bacteria that  
6 cause infections. Methicillin-resistant staphylococcus aureus,  
7 the deadliest strain, may go to the heart or lungs after  
8 entering the body and may cause death, according to a University  
9 of Hawaii John A. Burns school of medicine infectious disease  
10 specialist. Although the bacteria that causes staphylococcus  
11 infection has been around for thousands of years, a recent  
12 medical study conducted by the Association for Practitioners in  
13 Infection Control and Epidemiology found a disturbing trend in  
14 methicillin-resistant staphylococcus aureus cases in Hawaii.  
15 Upon review of all the different states, Hawaii ranked the worst  
16 in terms of the rate of patients with methicillin-resistant  
17 staphylococcus aureus infection. In fact, Hawaii has twice the  
18 national average. Methicillin-resistant staphylococcus aureus  
19 is so serious, it has overtaken other well-known diseases,  
20 killing people as fast as acquired immune deficiency syndrome in  
21 many respects and many other diseases as well.



1           Hospitals throughout the United States have demonstrated  
2   that using evidence-based prevention practices can dramatically  
3   reduce central line blood stream infection, surgical infection,  
4   ventilator associated pneumonia, and catheter related urinary  
5   tract infections. Evidence-based interventions can also prevent  
6   methicillin-resistant staphylococcus aureus infections,  
7   including utilizing practices such as screening of new patients  
8   to identify the infection; isolating and decolonizing those  
9   patients identified; strict hand hygiene and contact barriers  
10  (gloves, gowns, and masks); and disinfecting the environment and  
11  equipment.

12           The purpose of this Act is to:

- 13           (1) Require hospitals and medical facilities to collect  
14           and report information on hospital-acquired  
15           infections, including methicillin-resistant  
16           staphylococcus aureus infections, to the department of  
17           health;
- 18           (2) Require the department of health to appoint an  
19           advisory committee to assist the department in the  
20           development of all aspects of the department's  
21           methodology for collecting, analyzing, and disclosing  
22           information collected on hospital-acquired infections;



1           (3) Require the department of health to report annually to  
2           the legislature and to publish information on its  
3           website of the information collected by the advisory  
4           committee; and

5           (4) Require hospitals and medical facilities to implement  
6           a hospital-acquired infection prevention program.

7           SECTION 2. Chapter 323, Hawaii Revised Statutes, is  
8           amended by adding a new part to be appropriately designated and  
9           to read as follows:

10                               **"PART . HOSPITAL-ACQUIRED**

11           **INFECTION DISCLOSURE AND HOSPITAL-ACQUIRED INFECTION PREVENTION**

12           **§323-A Definitions.** As used in this part:

13           "Department" means the department of health.

14           "Hospital" shall include the same entities as referred to  
15           in section 321-11(10).

16           "Hospital-acquired infection" means a localized or systemic  
17           condition that:

18           (1) Results from adverse reaction to the presence of an  
19           infectious agent or its toxins; and

20           (2) Was not present or incubating at the time of admission  
21           of a patient to a hospital.



1 The term includes methicillin-resistant staphylococcus aureus  
2 infections, vancomycin-resistant enterococci, clostridium  
3 difficile, and acinetobacter baumannii.

4 **§323-B Hospital reports to the department; department**

5 **reports to the governor and legislature.** (a) Beginning  
6 January 1, 2009, in a format and at intervals thereafter as  
7 required by the department, each hospital shall report to the  
8 department the information concerning:

9 (1) Incidents of hospital-acquired infection occurring at  
10 that hospital, including the pathogen causing the  
11 infection;

12 (2) Hand hygiene compliance rates; provided that the rate  
13 shall reflect compliance throughout the hospital as  
14 well as by hospital unit; and

15 (3) Such other information as the department may determine  
16 to be relevant.

17 (b) Beginning January 1, 2009, in a format and at  
18 intervals thereafter as required by the department, every  
19 physician, osteopathic physician, podiatrist, and dentist that  
20 has performed a clinical procedure in a hospital during the  
21 relevant time period shall report to the department information  
22 on the specific procedure performed and any diagnosis of



1 hospital-acquired infection that the physician, osteopathic  
2 physician, podiatrist, or dentist diagnoses on a follow-up  
3 appointment or subsequent hospital visit.

4 (c) Based upon the information acquired under subsections  
5 (a) and (b), the department shall calculate the infection rates  
6 for the following categories of infection:

- 7 (1) Surgical site infections;
- 8 (2) Ventilator-associated pneumonia;
- 9 (3) Central line-associated blood stream infections;
- 10 (4) Catheter-related urinary tract infections;
- 11 (5) Methicillin-resistant staphylococcus aureus,  
12 vancomycin-resistant enterococci, clostridium  
13 difficile, and acinetobacter baumannii and;
- 14 (6) Other categories as may be determined by the advisory  
15 committee under section 323-C.

16 (d) The department shall submit an annual report, no later  
17 than January 5 of each year, to the governor and legislature  
18 containing information pertaining to the immediate preceding  
19 year on hospital-acquired infection, as follows:

- 20 (1) The infection rate calculated under subsection (c) for  
21 each hospital in the State, accounting for differences  
22 in patient populations among hospitals;



1 (2) The hand hygiene compliance rate; and

2 (3) A comparison of hospital-acquired infection rates  
3 among hospitals in the State.

4 The department shall make the report available on its website to  
5 the general public. The report shall be prepared on the advice,  
6 format, and recommendation of the advisory committee under  
7 section 323-C; provided that the report shall be written in  
8 plain language, and shall include an executive summary,  
9 findings, conclusions, recommendations, and trends concerning  
10 the overall state of hospital-acquired infections in this State.  
11 Each hospital shall make the report available to the public upon  
12 the request of any patient or potential patient.

13 (e) No report under this section shall disclose  
14 confidential information, patient identification information,  
15 social security numbers, or any information prohibited from  
16 disclosure by law.

17 **§323-C Advisory committee.** (a) The department shall  
18 appoint an advisory committee, exempt from section 26-34, to  
19 assist the department in the development of and periodic  
20 updating of all aspects of the department's methodology for  
21 collecting, analyzing, and disclosing the information required  
22 to be reported by hospitals under this part, including but not



1 limited to, collection methods, formatting, and methods and  
2 means for release and dissemination of infections rates.

3 The advisory committee shall also assist the department in  
4 developing, implementing, and monitoring the hospital-acquired  
5 infection prevention program under section 323-D. In advising  
6 the department, the advisory committee shall apply guidelines  
7 prepared by the Society of Health Care Epidemiology of America,  
8 as published in the "Infection Control and Epidemiology", May  
9 2003 issue.

10 (b) The advisory committee shall consist of  
11 representatives of public and private hospitals, infection  
12 control professionals, direct care nursing staff, physicians,  
13 epidemiologists with expertise in hospital-acquired infections,  
14 academic researchers, consumer organizations, health insurers,  
15 health maintenance organizations, organized labor, and large  
16 purchasers of health insurance such as employers. The majority  
17 of the members shall represent interests other than hospitals.

18 (c) In developing the department's methodology under  
19 subsection (a), the advisory committee shall consider existing  
20 methodologies and systems for data collection, including the  
21 Centers for Disease Control and Prevention's national healthcare  
22 safety network.





1           **§323-D Hospital-acquired infection prevention program.**

2       (a) No later than March 31, 2009, each hospital shall implement  
3       a hospital-acquired infection prevention program with priority  
4       given to the hospital's intensive care unit and surgical unit,  
5       or other unit where there is significant risk of facility-  
6       acquired infections. Thereafter, other hospital units shall be  
7       incorporated into the program, but in no event later than  
8       June 31, 2010.

9           (b) The hospital-acquired infection prevention program  
10       shall include the following strategies:

- 11           (1) Identification of colonized and infected patients upon  
12           admission using active surveillance culture;
- 13           (2) Isolation of colonized and infected patients in an  
14           appropriate manner;
- 15           (3) Contact precautions for patients found to test  
16           positive for hospital-acquired infection, as defined  
17           by the Centers for Disease Control and Prevention;
- 18           (4) A hand hygiene program and measures for strict  
19           adherence to hand hygiene, with oversight of personnel  
20           so that they are observed without their knowledge of  
21           the observation;



- 1 (5) Patient cultures for hospital-acquired infection upon  
2 discharge or transfer from the unit that the infection  
3 prevention program has been implemented, and flagging  
4 such patients who are readmitted to the hospital;
- 5 (6) A written infection prevention and control policy,  
6 formulated with input from frontline caregivers in the  
7 hospital; and
- 8 (7) A worker education requirement regarding modalities of  
9 transmission of hospital-acquired infection, use of  
10 protective equipment, disinfection policies and  
11 procedures, and other preventive measures.

12 **§323-E Penalty.** A violation of this part by a hospital  
13 shall be deemed grounds for suspension of a hospital's license  
14 by the department."

15 SECTION 3. Section 321-11, Hawaii Revised Statutes, is  
16 amended to read as follows:

17 **"§321-11 Subjects of health rules, generally.** The  
18 department pursuant to chapter 91 may adopt rules that it deems  
19 necessary for the public health and safety respecting:

- 20 (1) Nuisances, foul or noxious odors, gases, vapors,  
21 waters in which mosquitoes breed or may breed, sources  
22 of filth, and causes of sickness or disease, within



- 1           the respective districts of the State, and on board  
2           any vessel;
- 3           (2) Adulteration and misbranding of food or drugs;
- 4           (3) Location, air space, ventilation, sanitation,  
5           drainage, sewage disposal, and other health conditions  
6           of buildings, courts, construction projects,  
7           excavations, pools, watercourses, areas, and alleys;
- 8           (4) Privy vaults and cesspools;
- 9           (5) Fish and fishing;
- 10          (6) Interments and dead bodies;
- 11          (7) Disinterments of dead human bodies, including the  
12          exposing, disturbing, or removing of these bodies from  
13          their place of burial, or the opening, removing, or  
14          disturbing after due interment of any receptacle,  
15          coffin, or container holding human remains or a dead  
16          human body or a part thereof and the issuance and  
17          terms of permits for the aforesaid disinterments of  
18          dead human bodies;
- 19          (8) Cemeteries and burying grounds;
- 20          (9) Laundries, and the laundering, sanitation, and  
21          sterilization of articles including linen and uniforms  
22          used by or in the following businesses and



1 professions: barber shops, manicure shops, beauty  
2 parlors, electrology shops, restaurants, soda  
3 fountains, hotels, rooming and boarding houses,  
4 bakeries, butcher shops, public bathhouses, midwives,  
5 masseurs, and others in similar calling, public or  
6 private hospitals, and canneries and bottling works  
7 where foods or beverages are canned or bottled for  
8 public consumption or sale; provided that nothing in  
9 this chapter shall be construed as authorizing the  
10 prohibiting of laundering, sanitation, and  
11 sterilization by those conducting any of these  
12 businesses or professions where the laundering or  
13 sterilization is done in an efficient and sanitary  
14 manner;

15 (10) Hospitals, freestanding surgical outpatient  
16 facilities, skilled nursing facilities, intermediate  
17 care facilities, adult residential care homes, adult  
18 foster homes, assisted living facilities, special  
19 treatment facilities and programs, home health  
20 agencies, hospices, freestanding birthing facilities,  
21 adult day health centers, independent group  
22 residences, and therapeutic living programs, but



1           excluding youth shelter facilities unless clinical  
2           treatment of mental, emotional, or physical disease or  
3           handicap is a part of the routine program or  
4           constitutes the main purpose of the facility, as  
5           defined in section 346-16 under "child care  
6           institution". For the purpose of this paragraph,  
7           "adult foster home" has the same meaning as provided  
8           in section 321-11.2;

9           (11) Hotels, rooming houses, lodging houses, apartment  
10           houses, tenements, and residences for persons with  
11           developmental disabilities including, but not limited  
12           to, those built under federal funding;

13           (12) Laboratories;

14           (13) Any place or building where noisome or noxious trades  
15           or manufacturers are carried on, or intended to be  
16           carried on;

17           (14) Milk;

18           (15) Poisons and hazardous substances, the latter term  
19           including but not limited to any substance or mixture  
20           of substances which:

21           (A) Is corrosive;

22           (B) Is an irritant;



- 1 (C) Is a strong sensitizer;
- 2 (D) Is inflammable; or
- 3 (E) Generates pressure through decomposition, heat,
- 4 or other means,
- 5 if the substance or mixture of substances may cause
- 6 substantial personal injury or substantial illness
- 7 during or as a proximate result of any customary or
- 8 reasonably foreseeable handling or use, including
- 9 reasonably foreseeable ingestion by children;
- 10 (16) Pig and duck ranches;
- 11 (17) Places of business, industry, employment, and
- 12 commerce, and the processes, materials, tools,
- 13 machinery, and methods of work done therein; and
- 14 places of public gathering, recreation, or
- 15 entertainment;
- 16 (18) Any restaurant, theater, market, stand, shop, store,
- 17 factory, building, wagon, vehicle, or place where any
- 18 food, drug, or cosmetic is manufactured, compounded,
- 19 processed, extracted, prepared, stored, distributed,
- 20 sold, offered for sale, or offered for human
- 21 consumption or use;



- 1           (19) Foods, drugs, and cosmetics, and the manufacture,  
2                    compounding, processing, extracting, preparing,  
3                    storing, selling, and offering for sale, consumption,  
4                    or use of any food, drug, or cosmetic;
- 5           (20) Devices as defined in section 328-1;
- 6           (21) Sources of ionizing radiation;
- 7           (22) Medical examination, vaccination, revaccination, and  
8                    immunization of school children. No child shall be  
9                    subjected to medical examination, vaccination,  
10                    revaccination, or immunization, whose parent or  
11                    guardian objects in writing thereto on grounds that  
12                    the requirements are not in accordance with the  
13                    religious tenets of an established church of which the  
14                    parent or guardian is a member or adherent, but no  
15                    objection shall be recognized when, in the opinion of  
16                    the department, there is danger of an epidemic from  
17                    any communicable disease;
- 18           (23) Disinsectization of aircraft entering or within the  
19                    State as may be necessary to prevent the introduction,  
20                    transmission, or spread of disease or the introduction  
21                    or spread of any insect or other vector of  
22                    significance to health;



1 (24) Fumigation, including the process by which substances  
2 emit or liberate gases, fumes, or vapors which may be  
3 used for the destruction or control of insects,  
4 vermin, rodents, or other pests, which, in the opinion  
5 of the department, may be lethal, poisonous, noxious,  
6 or dangerous to human life;

7 (25) Ambulances and ambulance equipment;

8 (26) Development, review, approval, or disapproval of  
9 management plans submitted pursuant to the Asbestos  
10 Hazard Emergency Response Act of 1986, Public Law  
11 99-519; [~~and~~]

12 (27) Development, review, approval, or disapproval of an  
13 accreditation program for specially trained persons  
14 pursuant to the Residential Lead-Based Paint Hazard  
15 Reduction Act of 1992, Public Law 102-550[-]; and

16 (28) Hospital-acquired infection prevention and reporting.

17 The department may require any certificates, permits, or  
18 licenses that it may deem necessary to adequately regulate the  
19 conditions or businesses referred to in this section."

20 SECTION 4. In codifying this Act, the revisor shall  
21 substitute the appropriate numbers for the letter designations  
22 used in this Act.





1 SECTION 5. Statutory material to be repealed is bracketed  
2 and stricken. New statutory material is underscored.

3 SECTION 6. This Act shall take effect upon its approval.  
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INTRODUCED BY:

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**Report Title:**

Hospital-Acquired Infection; Disclosure; Prevention

**Description:**

Enacts the hospital-acquired infection disclosure and hospital-acquired infection prevention law to detect, report, and prevent organism caused infections in hospitals and medical facilities.

