

## Performance Indicators for Hospitals Participating in the VICNISS Type 2 Surveillance Program July 2011 – June 2012

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Hospitals that do not follow **VICNISS Type 2 Surveillance Hospital Participation Indicators**, as listed below, are requested to document this decision with an outline of the reasons for not following these activities, and submit to the VICNISS Coordinating Centre. The documentation will then be forwarded to the Victorian Department of Health.

This document lists the revised VICNISS Hospital Participation Indicators and the VICNISS Data Quality Indicators for all hospitals participating in Type 2 surveillance activities.

The VICNISS Coordinating Centre is required to report this information to the Victorian Department of Health.

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### 1. VICNISS Type 2 Surveillance Hospital Participation Indicators

#### Required Surveillance Activities

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##### 1.1 Outcome Indicator Modules

###### *Small, Medium and Large Hospitals*

Collect continuously and submit to the VICNISS Coordinating Centre quarterly:

- 1.1.1 Methicillin Resistant *Staphylococcus aureus* Infections
- 1.1.2 *Staphylococcus aureus* Bacteraemias
- 1.1.3 Vancomycin Resistant Enterococci Infections
- 1.1.4 *Clostridium difficile* Infections
- 1.1.5 Occupational Exposures

##### 1.2 Process Indicator Modules

###### *Large Hospitals*

Collect and submit Surgical Antibiotic Prophylaxis data on at least 50 consecutive procedures to the VICNISS Coordinating Centre once per year.

##### 1.3 Hand Hygiene Compliance Initiative (HHCI)

###### *Small, Medium and Large Hospitals*

Collect and submit HHCI data to the HHCApp three times per year.

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### 2. VICNISS Type 2 Surveillance Data Quality Indicators

#### *Small, Medium and Large Hospitals*

- 2.1 Quarterly surveillance data - submit within 1 week of the required date (as specified by the VICNISS Coordinating Centre).
- 2.2 HHCI data submitted three times per year no later than the required date (as specified by the VICNISS Coordinating Centre).