

# Simplification of Reporting Requirements Needed to Improve Patient Safety and Quality



**Sen. Jane Nelson**  
(R-Flower Mound)



**Rep. J.D. Sheffield**  
(R-Gatesville)

Texas hospitals support **Senate Bill 384**, by Sen. Jane Nelson and Rep. J.D. Sheffield, to promote Texas hospitals' ongoing work to minimize health care-associated infections and protect patients and health care workers.



**A health care-associated infection** is a localized or symptomatic condition resulting from an adverse reaction to an infectious agent or its toxins to which a patient is exposed in the course of the care delivery to the patient.



SB 384 aligns state reporting requirements for health care-associated infections with existing federal requirements, eliminating duplication and unnecessary regulatory burden.



Controlling and preventing the spread of disease and reducing the number of HAIs in Texas are among Texas hospitals' top priorities.

Since 2008, Texas hospitals have reported to the state data on infections that occurred while a patient received medical treatment. The federal government subsequently required HAI reporting for hospitals in 2011.

State and federal reporting requirements vary.



For example, the state requires only hospitals' intensive care units to report catheter-associated urinary tract infections. The federal government, however, requires ICUs in addition to adult and pediatric medical, surgical and medical-surgical units to report CAUTIs.



In addition, the state's requirements have not changed since the state law authorizing HAI reporting passed more than a decade ago. Federal reporting requirements, however, routinely are updated and revised based on the relevance of the infection to protecting and improving patient care.



Aligning the state requirements for hospitals' HAI reporting with those that are currently in place at the federal level will:



**Give hospitals access to infection data** that is most useful for protecting patients, their families and health care workers.



**Free up time and resources** so hospitals can better focus on eliminating HAIs and improving infection control and prevention efforts.



**Allow Texas hospitals to report the same infection data** to the state and federal governments through an existing portal.



**Reduce** administrative burden for Texas hospitals.