Lee BY, Bartsch SM, Wong KF, Yilmaz SL, Avery TR, Singh A, et al. Simulation shows hospitals that cooperate on infection control obtain better results than hospitals acting alone. Health Aff (Millwood). 2012;31(10).

## Appendix

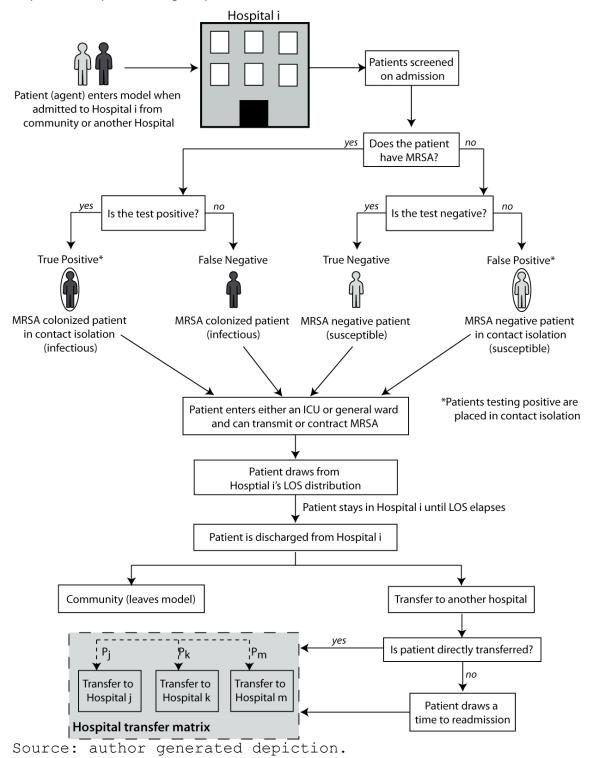
Exhibit 1: Key hospital parameters (for 2006-2007 Orange County, California hospitalizations).

Hospital	Patient Admissions in 2006	Mean Patient Length-of- Stay (LOS) in Days	Media n LOS (days	General Ward Initial MRSA Prevalence	General Ward MRSA Transmissi on Coefficien t (β)	ICU Initial MRSA Prevale nce	ICU β	
Acute Care								
A	7,111	6.57	4	0.028	0.00046	0.054	0.0109	
В	15 <b>,</b> 058	6.20	4	0.031	0.00065	0.064	0.0053	
С	4,540	5.70	4	0.044	0.00065	0.044	0.0067	
D	21,488	5.05	4	0.029	0.00083	0.057	0.0069	
E	9,202	4.06	3	0.032	0.0011	0.064	0.011	
F	2,481	4.55	4	0.033	0.0012	0.064	-	
G	6,932	4.41	3	0.032	0.00070	0.064	0.0120	
H	2,366	6.59	4	0.012	0.00063	0.084	0.0107	
I	14,347	6.59	4	0.088	0.00053	0.090	0.0060	
J	13 <b>,</b> 755	5.45	4	0.026	0.00075	0.043	0.0064	
K	14,281	4.96	4	0.032	0.00084	0.064	0.0085	
L	16,095	5.17	4	0.014	0.00078	0.039	0.0076	
M	4,028	4.30	4	0.021	0.0013	0.045	0.024	
N	6 <b>,</b> 535	5.72	4	0.033	0.00062	0.290	0.0077	
0	11,375	5.41	4	0.032	0.00061	0.064	0.0048	
P	4,399	6.32	4	0.053	0.00047	0.080	0.0117	
Q	12,020	4.50	3	0.056	0.00096	0.069	0.0058	
R	8 <b>,</b> 951	5.67	4	0.043	0.00069	0.064	0.0088	
s	11,505	4.54	4	0.032	0.00093	0.064	0.0059	
T	2,773	6.94	5	0.031	0.00057	0.064	0.0105	
υ	15 <b>,</b> 967	4.67	4	0.124	0.00090	0.064	0.0091	
v	26,292	5.06	4	0.032	0.00082	0.096	0.0072	
W	4,810	5.39	4	0.010	0.00093	0.029	0.0219	
x	4,881	5.38	4	0.015	0.00081	0.115	0.040	
Long-term	Long-term Acute Care (LTAC)							
AA	388	33.97	28.5	0.085	0.00033	_	-	
BB	947	37.15	25	0.085	0.00028	_	-	
cc	3,082	9.38	5	0.085	0.0016	_	-	
DD	966	12.47	11	0.085	0.0011	_	-	
EE	1,819	3.32	3	0.165	0.0056	_	_	

Source: California Health and Human Services Agency. Office of Statewide Health Planning and Development,. Sacramento, CA [updated October 4, 2010; cited 2010]; Available from: <a href="http://www.oshpd.ca.gov/">http://www.oshpd.ca.gov/</a>. And, Initial MRSA prevalence for each hospital's wards came from Project MAPP Infection Control Survey.

Exhibit 2. Sequence of steps for each agent (patient) in the model.

Sequence of steps for each agent (patient) in the model



Methodology

The following formula determined the new cases of MRSA (colonization or carriage) in a hospital ward or intensive care unit each day:

New MRSA Cases (colonization) = 
$$\beta SI$$
 +  $\beta (1-\theta) SI_{CI}$  +  $\beta (1-\theta) S_{CI}I$  + 
$$\beta (1-\theta)^2 S_{CI}I_{CI}$$

where  $\beta$  (beta) is the ward's transmission coefficient, S the number of susceptible patients, I the number of infectious patients (i.e., MRSA positive), and  $\theta$  the staff compliance with contact isolation procedures. CI denotes those patients who are under contact isolation;  $I_{\rm CI}$  are the true positives and  $S_{\rm CI}$  are false positives placed under contact isolation. Contact isolation for other organisms or syndromes was not modeled.

Exhibit 3. Percent Relative reduction in MRSA prevalence (Number of Cases Averted\*) at each healthcare facility when implementing various active surveillance and contact isolation campaigns.

	Hospitals In	mplementing Act	ive Surveillan	ce and Contact	Isolation (75%	Compliance)	
	Only This	1 Highest	5 Highest	10 Highest	11 Highest	All	
	Hospital	Capacity	Capacity	Capacity	Volume <sup>†</sup>	Hospitals	
Acute Care Hospital Impacted:							
A	14.9 (59.1)	0.3 (1.0)	2.2 (8.7)	2.8 (11.1)	3.1 (12.4)	20.2 (80.4)	
В	13.6 (100.2)	0.2 (1.5)	14.4 (106.3)	14.8 (109.0)	14.8 (108.9)	15.6 (115.0)	
С	13.5 (36.1)	0.7 (1.9)	2.3 (6.2)	3.5 (9.4)	3.8 (10.2)	19.6(52.6)	
D	10.3 (87.4)	0.3 (2.6)	11.4 (96.7)	12.0 (102.6)	12.1 (103.4)	13.6 (115.4)	
E	8.3 (33.6)	0.4 (1.6)	1.0 (4.1)	2.7 (10.7)	2.8 (11.1)	11.9 (48.1)	
F	6.7 (7.4)	0.1 (0.1)	2.3 (2.6)	4.7 (5.2)	4.8 (4.9)	12.2 (13.4)	
G	9.9 (31.9)	0.3 (0.8)	1.6 (5.2)	2.9 (9.4)	3.1 (9.8)	14.9 (47.8)	
H	19.1 (34.1)	0.7 (1.3)	1.9 (3.5)	2.6 (4.6)	2.7 (4.8)	22.8 (40.7)	
I	17.0(260.9)	0.4 (6.1)	17.2 (265.4)	17.7 (272.7)	17.8 (273.1)	18.5 (284.3)	
J	12.5 (72.0)	0.4 (2.3)	1.2 (7.0)	14.2 (81.7)	14.5 (83.5)	16.8 (96.7)	
K	10.6 (69.2)	0.1 (0.8)	1.2 (7.8)	12.6 (82.3)	12.8 (83.1)	14.6 (95.1)	
L	16.9 (115.5)	None	17.6 (120.4)	19.3 (132.1)	19.2 (131.5)	20.2 (138.1)	
M	12.5 (18.5)	0.1 (0.2)	2.3 (3.4)	3.6 (5.4)	3.6 (5.4)	17.2 (25.4)	
N	9.4 (33.5)	0.4 (1.3)	1.7 (6.1)	3.1 (11.0)	3.4 (12.2)	15.5 (55.5)	
0	11.2 (60.6)	0.3 (1.7)	1.6 (8.9)	13.2 (71.5)	13.2 (71.7)	15.6 (84.8)	
P	13.1 (40.8)	0.6 (1.9)	1.3 (4.1)	2.1 (6.6)	2.3 (7.1)	15.9 (49.3)	
Q	8.7 (67.8)	0.2 (1.7)	0.7 (5.7)	9.7 (75.6)	10.0 (77.5)	10.6 (82.6)	
R	15.6 (89.9)	0.2 (1.4)	0.36 (2.1)	0.7 (2.6)	0.5 (2.8)	16.4 (95.3)	
S	9.8 (50.3)	0.5 (2.3)	1.2 (6.1)	2.4 (12.1)	12.1 (61.8)	13.5 (68.9)	
T	11.3 (18.6)	0.0 (0.1)	1.7 (2.8)	2.8 (4.6)	3.1 (5.1)	20.2 (33.3)	
υ	8.6 (163.9)	0.5 (8.9)	0.9 (17.8)	9.2 (174.9)	9.2 (174.9)	9.4 (179.3)	
v	12.2 (162.0)	12.2 (162.0)	12.7 (169.4)	13.1 (173.8)	13.3 (176.5)	13.9 (184.8)	
W	10.5 (12.0)	0.6 (0.7)	2.9 (3.2)	4.7 (5.3)	4.8 (5.4)	17.8 (20.2)	
X	9.3 (14.5)	none	1.5 (2.3)	3.0 (4.7)	3.3 (5.1)	16.5 (25.7)	
Countywide Acute Care Reduction							
Mean	-	0.8 (8.4)	4.3 (36.1)	7.4 (57.5)	7.9 (60.1)	16.0 (84.7)	
Median	-	0.3 (1.4)	1.7 (6.1)	4.2 (11.0)	4.6 (12.3)	15.7 (74.7)	
_	rm Acute Care	Facility Impact	ced:				
AA	9.9 (2.0)	4.5 (0.9)	10.9 (2.2)	12.9 (2.6)	13.2 (2.7)	25.3 (5.1)	
BB	7.4 (4.8)	2.1 (1.3)	3.8 (2.5)	7.2 (4.7)	7.4 (4.8)	19.5 (12.8)	
CC	12.7 (36.6)	0.8 (2.2)	1.26 (3.6)	1.5 (4.4)	1.6 (4.6)	15.8 (45.3)	
DD	15.4 (8.5)	10.9 (6.0)	15.1 (8.4)	18.2 (10.1)	18.4 (10.2)	28.0 (15.5)	
EE	11.3 (37.5)	0.4 (1.3)	0.6 (2.0)	0.7 (2.5)	0.8 (2.5)	12.6 (41.7)	
Countywide Long-term Acute Care Reduction							
Mean	-	3.7 (2.3)	6.3 (3.7)	8.1 (4.8)	8.3 (5.0)	20.2 (24.1)	
Median	_	2.1 (1.3)	3.8 (2.5)	7.2 (4.4)	7.4 (4.6)	19.5 (15.5)	

<sup>\*</sup>Per year, after the implementation of surveillance and isolation has taken full effect (approximately 6 months)

Source: author generated data.

<sup>&</sup>lt;sup>†</sup> Those with ≥10,000 Admissions (11 in OC)

Exhibit 4. Benefits [Median (Range)] to each hospital when implementing active surveillance and contact isolation campaigns in select subsets of hospitals

Contact	Hospitals Implementing the Intervention							
Isolation	1 Highest	3 Highest	5 Highest	10 Highest	11 Highest	All		
Compliance	Capacity	Capacity	Capacity	Capacity	Volume <sup>†</sup>	Hospitals		
	Reduction in Each Hospital's MRSA Prevalence (%)							
25%	0.2	0.5	0.7	1.5	1.6	5.7		
	(NE to	(NE to	(0.2 to	(0.2 to	(0.2 to	(3.5 to		
	9.7)	11.5)	11.3)	12.6)	12.6)	15.9)		
50%	0.3	0.9	1.9	3.1	3.1	10.9		
	(NE to	(0.2 to	(0.4 to	(0.2 to	(0.4 to	(0.2 to		
	10.4)	13.0)	13.5)	13.5)	15.6)	13.8)		
75%	0.4	1.3	1.7	4.7	4.8	15.9		
	(NE to	(0.3 to	(0.4 to	(0.5 to -	(0.4 to	(9.4 to		
	12.2)	17.1)	17.6)	19.3)	17.6)	28.0)		
Number of MRSA Cases Averted in Each Hospital*								
25%	1.0	2.1	2.2	4.1	4.2	18.8		
	(None to	(None to	(0.6 to	(1.2 to	(1.4 to	(2.4 to		
	55.0)	92.5)	93.8)	95.8)	95.0)	99.0)		
50%	1.1	2.9	4.1	7.3	7.8	36.2		
	(None to	(0.8 to	(1.3 to	(2.0 to	(2.1 to	(3.8 to		
	109.2)	177.9)	180.2)	184.8)	185.3)	193.9)		
75%	1.4	4.0	5.7	10.1	10.2	52.6		
	(None to	(1.0 to	(2.0 to	(2.5 to	(2.5 to	(5.1 to		
	162.0)	262.7)	265.4)	272.7)	273.1)	284.3)		

<sup>\*</sup>Per year, after the implementation of surveillance and isolation has taken full effect (approximately 6 months)

NE = no effect

Source: author generated data.

<sup>&</sup>lt;sup>†</sup> Those with ≥10,000 Admissions (11 in OC)