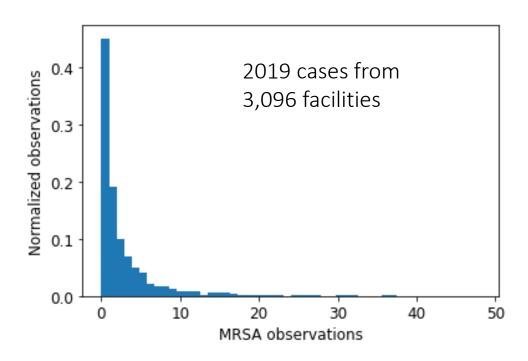
Predicting MRSA Healthcare Related Infections

Jeffrey Jex Capstone project #1 May 2021 "At any given time, about 1 in 25 inpatients have an infection related to hospital care. These infections lead to tens of thousands of deaths and cost the U.S. health care system billions of dollars each year."

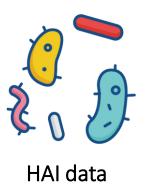
Goal

Predict 2019 MRSA infections at the hospital level, using only 2019 data



Data Sources

Joined data from 3 separate CMS (Center for Medicaid and Medicare Services) sets







Data Cleaning

CMS data

Healthcare Associated Infections (HAIs)

- 4878 facilities down to 1715 facilities

Patient Surveys (HCAHPS)

- Remove partial year surveys and star ratings
- Save only aggregated question results
- From 93 features down to 11

Timely and Effective Care

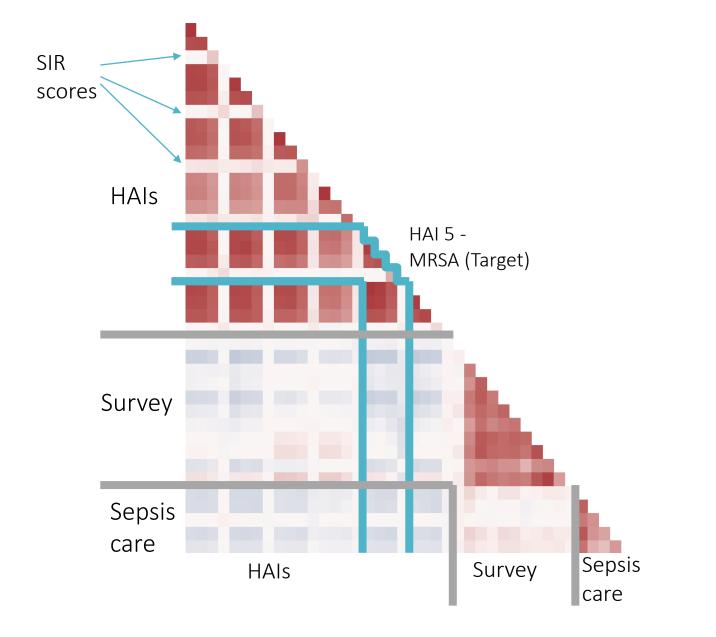
- Only include sepsis care
- From 16 features down to 5



EDA

Correlation heat map

strongest correlations are internal to each dataset



Standardized Infection Ratio (SIR) = Actual Number of Infections

Predicted Number of Infections

Modeling

Avoid data leakage – removed following features from predictors:

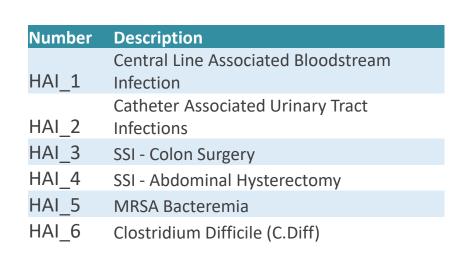
- MRSA observed cases target variable
- MRSA predicted cases (by the CMS)
- MRSA SIR score
- MRSA total patient hours
- MRSA SIR compared to national category

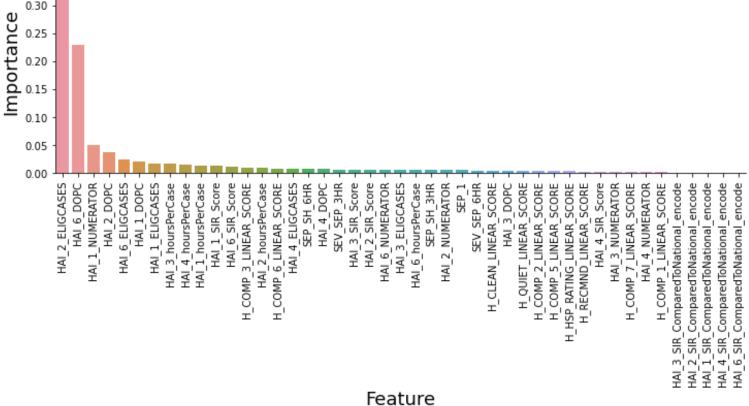
Algorithms tried – OLS regression, ridge regression, decision tree, random forest

Random Forest- feature importance

0.35

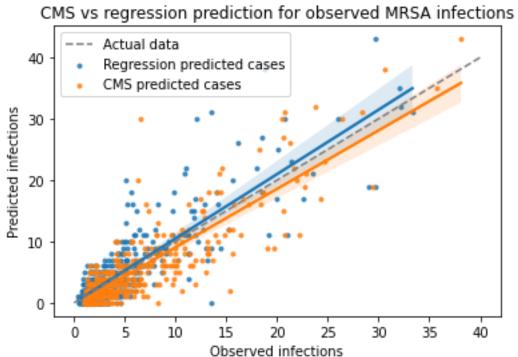
 A few key features dominate themodel importance, all are HAI related



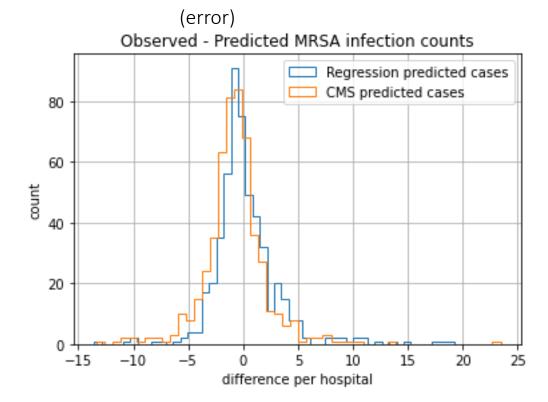


Outcomes

Comparison of my random forest regression prediction with CMS' prediction of observed MRSA cases for 2019 per facility

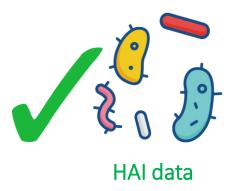


My regression MAE: 1.991 CMS MAE: 2.063



Conclusions

- •It is possible to predict the number of MRSA infections expected with some error
 - Most important data for prediction is other HAI types
 - Patient survey results don't help predict MRSA infections
 - Sepsis care data don't help predict MRSA infections







Future Work

- •Incorporate healthcare facility size (how many patients seen per year) and type of facility.
- •Include historic data on infections
- •Look more at geographic trends, especially with historic data
- •Even more fun: hone in beyond the hospital aggregation level what tests, procedures, and other data exists, ideally at a by-case detail level to help unravel this problem?

Thanks - Questions