



Getting Started with NHSN for CRE Surveillance

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May 18, 2017

Wisconsin Department of Health Services



Objectives

- Review the steps for National Healthcare Safety Network (NHSN) enrollment to prepare for state-mandated Carbapenem-resistant *Enterobacteriaceae* (CRE) reporting.
- Learn how to enter CRE data into NHSN.
- Apply the NHSN CRE algorithm to determine cases for data entry.



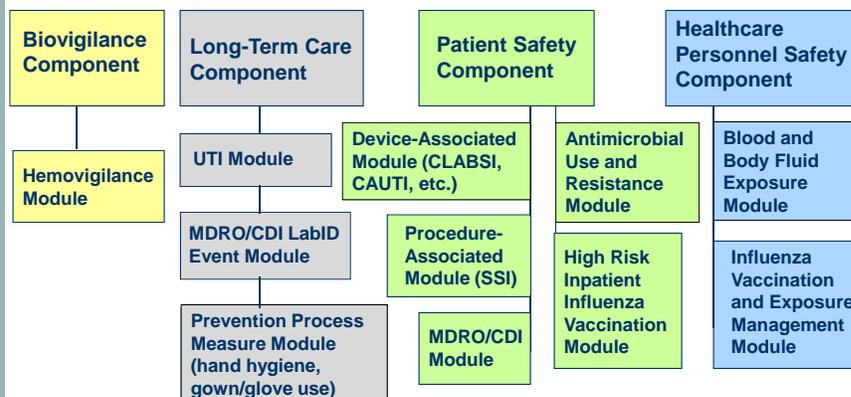
History of NHSN

- Developed and maintained by CDC
- Predecessor system dates back to the 1970s
- Opened up to include hospitals of all sizes, dialysis, ambulatory surgery centers, etc. in 2009
- Launched the Long-Term Care (LTC) Component in 2012
- Includes manual entry via secure web interface and electronic reporting through file import

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Reporting Options



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Advantages

- Free, web-based training
- Standardized surveillance protocols
- Reports built into the system for real-time data analysis by users
- Ability to share data securely with other organizations via the group function
- Gold standard for healthcare-associated infection (HAI) data collection and reporting, used for federal and state reporting requirements
- Users contribute to the national benchmarks

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Public Reporting

- Used by 34 states, Washington, DC, and CMS for reporting infection events
- More than 21,000 facilities, including 2,498 LTC facilities (as of March 2017) participate

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Wisconsin NHSN Use

- Total facilities: 419
- Hospitals: 155
- Dialysis: 116
- Ambulatory surgery centers: 73
- Long-term care facilities: 75+

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NHSN Enrollment Steps

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Checklist for Enrollment

- Identify Facility Administrator
- CDC training
- Prepare required forms
- Facility Administrator registration
- SAMS registration
- Facility enrollment
- Facility activation
- Facility set-up
- Monthly reporting plan
- Data entry (numerator and denominator)

<https://www.cdc.gov/nhsn/ltc/enroll.html>

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Step 1: Identify Facility Administrator

- One per facility, enrolls the facility in NHSN
- Has the most administrative rights on the system
- Typically the primary user of NHSN: Infection control coordinator, director of nursing, etc.
- Only user who can confer rights, add users, and add locations
- Role can be reassigned after enrollment

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Step 2: CDC Training

- Review two slide sets:
 - Overview of LTC Component (18 slides)
 - Enrollment steps (49 slides)
- Can be done while enrolling
- Completion date on registration form
- <https://www.cdc.gov/nhsn/ltc/enroll.html>
(listed under step 1 on the checklist)

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Step 3: Print and Prepare Required Forms

- Facility contact info:
https://www.cdc.gov/nhsn/forms/57.101_facconinf_blank.pdf
- Annual facility survey (relates to last full calendar year):
https://www.cdc.gov/nhsn/forms/57.137_ltcfsurv_blank.pdf
- Fill out in hard copy and save for later electronic entry in step 6
- Can be done while completing other enrollment steps

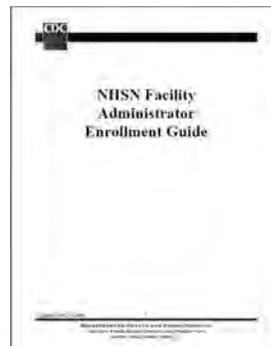
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Step 4: Facility Administrator Registration

More detailed information on facility administrator enrollment is available in CDC's *Facility Administrator Enrollment Guide*.

<http://www.cdc.gov/nhsn/PDFs/FacilityAdminEnrollmentGuideCurrent.pdf>



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FA Registration, Cont.

Read and accept the NHSN Rules of Behavior.

<http://nhsn.cdc.gov/RegistrationForm>

Facility/Group Administrator Rules of Behavior

In order to participate in the NHSN, you must read and agree to abide by the following rules of behavior for safeguarding the system's security. Scroll through the document below and click on Agree or Do Not Agree button. To print a copy of the rules, click on the Print button.

NHSN, a surveillance system of the Centers for Disease Control and Prevention (CDC), allows participating healthcare facilities to enter data associated with healthcare safety, such as surgical site infections, antimicrobial use and resistance, bloodstream infections, dialysis incidents, and healthcare worker vaccinations. NHSN provides analysis tools that generate reports using the aggregated data (reports about infection rates, national and local comparisons, etc). NHSN also provides links to best practices, guidelines, and lessons learned.

NHSN processes and stores a variety of sensitive data that are provided by healthcare facilities. This information requires protection from unauthorized access, disclosure, or modification based on confidentiality, integrity, and availability requirements. These "Rules of Behavior" apply to all users of the NHSN web-based computer system.

Purpose
Rules of Behavior establish standards that recognize knowledgeable users are the foundation of a successful security plan. Non-compliance with these rules will be enforced through

Print Version [PDF] [2/13/13] [20081]

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FA Registration, Cont.

The screenshot shows a registration form with three main sections:

- Personal Information:** Fields for *First name, *Last name, Middle name, and *Email address.
- Facility Identifier:** A section titled "*Please select a facility identifier:" with radio button options for OCN, JHA, VA, CDC Registration ID, and NONE. Below this is a field for *Selected identifier ID.
- NHSN Training Date:** A section titled "*I certify that I have completed all of the appropriate, required NHSN trainings on:" followed by a date field and a red asterisk icon.

A "Submit" button is located at the bottom right of the form.

Complete registration information:

- Name and email address
- Facility identifier: Use the CMS Certification Number (CCN)
 - Six digits, starts with “52” for WI facilities. Example: 525019
 - DQA lists all CCNs at <https://www.dhs.wisconsin.gov/guide/nhdir.pdf>
- Date you completed training

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FA Registration, Cont.

- Receive immediate NHSN confirmation email, subject “Welcome to NHSN!”
- Second email (subject: “Invitation to Register”) arrives within 24 hours from sams-no-reply to begin the secure access management services (SAMS) registration process.

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Step 5: SAMS

- Provides a platform for secure access to non-public CDC applications.
- SAMS users need a password and grid card.
 - Users will be prompted to choose a new password every 60 days.
- SAMS can be used on any computer from anywhere.

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For SAMS Registration Process, NHSN users will:

Step 1: Receive an invitation to register for SAMS

Step		Time
1a	Log in to the SAMS application using assigned username (i.e., your current email address) and temporary password from the invite email	2 Min
1b	Accept the SAMS Rules of Behavior	5 Min
1c	Complete the SAMS Registration Form	5 Min

Wait for an email from SAMS with subject “Identity Verification Request.” It will be sent within 24 hours of registration.

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Step 2: Complete and submit identity verification documents to CDC

Step		Time
2a	Receive SAMS registration confirmation email, print the attached verification form	5 Min
2b	Take the Identity Verification Form to a notary public for endorsement	Varies
2c	Mail or fax the endorsement verification forms and supporting documents back to CDC	Varies

- Need two forms of identification for the process
- Commonly use driver's license, passport, employee ID, etc.

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Step 3: Access NHSN using SAMS credentials

Step		Time
3a	Receive confirmation from CDC that forms were received (correspondence via email and US Postal Service)	Varies
3b	Receive welcome emails from SAMS and the NHSN Program	Varies
3c	Receive SAMS grid card delivered to your home address	Varies
3d	Access NHSN: <ul style="list-style-type: none"> • If you are a newly enrolling facility, the facility admin will require access to NHSN Enrollment • If you are any other NHSN user, you will access NHSN Reporting 	2 Min

New users will receive two emails (subject lines: "SAMS Account Activation" and "SAMS Activity Authorization) when the access is approved. This can take up to three weeks.

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SAMS Grid Card



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Step 6: Facility Enrollment

- Log into SAMS (<https://sams.cdc.gov>) using your password and grid card.
- Select “NHSN Enrollment/Enroll a Facility.”
- Enter required enrollment information filled out in hard copy as part of step 3:
 - Facility contact info form
 - Annual facility survey form
- You are enrolling in the Long-Term Care Component.

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Facility Enrollment, Cont.

- Receive another email from CDC, subject line “NHSN Facility Enrollment Submitted.”
- Print the Agreement to Participate and Consent form from the email.
- NHSN Facility Administrator and a nursing home administrator (DON, medical director) sign the form.
- Fax back to CDC.
- Within three days, receive email from NHSN, subject “NHSN enrollment approved.”

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Enrolling Additional Facilities on Your Existing SAMS Account

- Log into SAMS.
- Click the “NHSN Enrollment” option and complete registration info for each additional facility.
- Use the same email address for your current NHSN-SAMS login so all the long-term care facilities (LTCF) will be on the existing SAMS account.
- If you do not see the “NHSN Enrollment” link, request it from the NHSN Help Desk (nhsn@cdc.gov).
- Sign/return a separate participation agreement for each LTCF being enrolled.

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How Do I Access Multiple LTCFs?

Welcome to the NHSN Landing Page

Select a facility and component, then click Submit to go to the Home Page.

User: ASHLIEWI (ID 10554)

Select facility/group from dropdown list:

Fac: LTCF A (ID 12345)

Select facility within the above group:

Fac: LTCF B (ID 12346)

Select component:

Fac: LTCF C (ID 12347)

Fac: NHSN Test Medical Clinic #3 (ID 14352)

Submit



[Get Adobe Acrobat Reader for PDF files](#)

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Step 7: Add Users

- Once live, can add other users to the facility account.
- Recommend at least one other administrative user as a back-up.
- Can assign administrative (add/edit/delete data) or specific rights (only enter data, only view data, etc.).
- NHSN will automatically send new users instructions for SAMS registration.

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Edit User Rights

User ID: ASHLIE (ID 42620)

Facility List:

Rights	Healthcare Personnel Safety	Long Term Care
Administrator	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
All Rights	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Analyze Data	<input type="checkbox"/>	<input type="checkbox"/>
Add, Edit, Delete	<input type="checkbox"/>	<input type="checkbox"/>
View Data	<input type="checkbox"/>	<input type="checkbox"/>
Customize Rights	<input type="checkbox"/>	<input type="checkbox"/>

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Step 8: Map Locations

- Surveillance is done at the facility-wide level, but specific locations need to be mapped before entering reporting plans and data.
- Available LTCF location types include: Inpatient hospice, dementia, psychiatric, skilled nursing/short term rehabilitation, general nursing, ventilator dependent and bariatric.

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Location Definitions

CDC Location Label	NHSN Healthcare Service Location Code	CDC Location Code	Location Description
LTCF Psychiatric Unit	1256-7	IN:NONACUTE:LTCF:PSY	Unit or designated area which provides specialized care for individuals diagnosed with psychiatric or behavioral disorders.
LTCF Skilled Nursing/Short Term Rehabilitation	1257-5	IN:NONACUTE:LTCF:REHAB	A unit or designated area which primarily provides short term (<90 days), medical, skilled nursing or rehabilitation services to individuals requiring restorative care following recent hospitalization.
LTCF General Nursing Unit	1258-3	IN:NONACUTE:LTCF:GEN	A unit or designated area which primarily provides nursing, rehabilitative or custodial services to individuals with varying levels of chronic conditions or disability requiring long term (>90 days) support.

30 https://www.cdc.gov/nhsn/pdfs/pscmanual/15locationsdescriptions_current.pdf

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- NHSN Home
- Alerts
- Reporting Plan ▶
- Resident ▶
- Event ▶
- Summary Data ▶
- Surveys ▶ Customize Forms
- Analysis ▶ Facility Info
- Users ▶ Add/Edit Component
- Facility ▶ Locations
- Group ▶
- Logout

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 **Locations**

Instructions

- To **Add** a record, fill in the form with the required fields and any desired optional values. Then click on the **Add** button.
- To **Find** a record, click on the **Find** button. One or more fields can be filled in to restrict the search to those values.
- To **Edit** a record, perform a **Find** on the desired record. Click on the desired record to fill in its values into the form and edit it button.
- To **Delete** one or more records, perform a **Find** on the desired record(s). Check the corresponding box(es), then click on the **Delete** button.
- Press the **Clear** button to start over with a new form.

Mandatory fields to "Add" or "Edit" a record marked with *

Your Code *:

Your Label *:

CDC Location Description *:

Status *:

Bed Size *: A bed size greater than zero is required for most inpatient locations.

Location Table

[Display All](#) [Print Location List](#)

Delete	Status	Your Code	Your Label	CDC Description
<input type="checkbox"/>	Active	N.WING	NORTH WING - GENERAL NU	LTCF General Nursing Unit

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View 1 - 1 of 1

CDC Code	NHSN HL7 Code	Bed Size
IN:NONACUTE:LTCF:GEN	1258-3	20

View 1 - 1 of 1

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Step 9: Monthly Reporting Plan

- Identifies facility's surveillance plan for the month
- Certifies you are following NHSN protocols for the selected modules
- Triggers missing data alerts
- Allows inclusion of data in national aggregates for eventual benchmarking

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NHSN Home

- Alerts
- Reporting Plan** ▶ Add
- Resident ▶ Find
- Event ▶
- Summary Data ▶
- Surveys ▶
- Analysis ▶
- Users ▶
- Facility ▶
- Group ▶
- Logout

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Add Monthly Reporting Plan

Mandatory fields marked with *

Facility ID *: State Memorial Long-term Care Facility

Month *: March

Year *: 2017

No Long Term Care Facility Component

HAI Module

Locations	UTI
<input type="checkbox"/> Facility-wide Inpatient (FacWIDEIn)	<input type="checkbox"/>

Alert

No data found for March, 2017

OK

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Mandatory fields marked with *

Facility ID *: State Memorial Long-term Care Facility (ID 30203) ▼

Month *: March ▼

Year *: 2017 ▼

No Long Term Care Facility Component Modules Followed this Month

HAI Module

Locations	UTI
Facility-wide Inpatient (FacWIDEIn) ▼	<input checked="" type="checkbox"/>

LabID Event Module

Locations	Specific Organism Type	Lab ID Event All Specimens
Facility-wide Inpatient (FacWIDEIn) ▼	CRE - CRE (CRE-Ecoli, CRE-Enterobacter, CRE-Klebsiella) ▼	<input checked="" type="checkbox"/>
Facility-wide Inpatient (FacWIDEIn) ▼	CDIF - C. difficile ▼	<input checked="" type="checkbox"/>
Facility-wide Inpatient (FacWIDEIn) ▼	MRSA - MRSA ▼	<input checked="" type="checkbox"/>

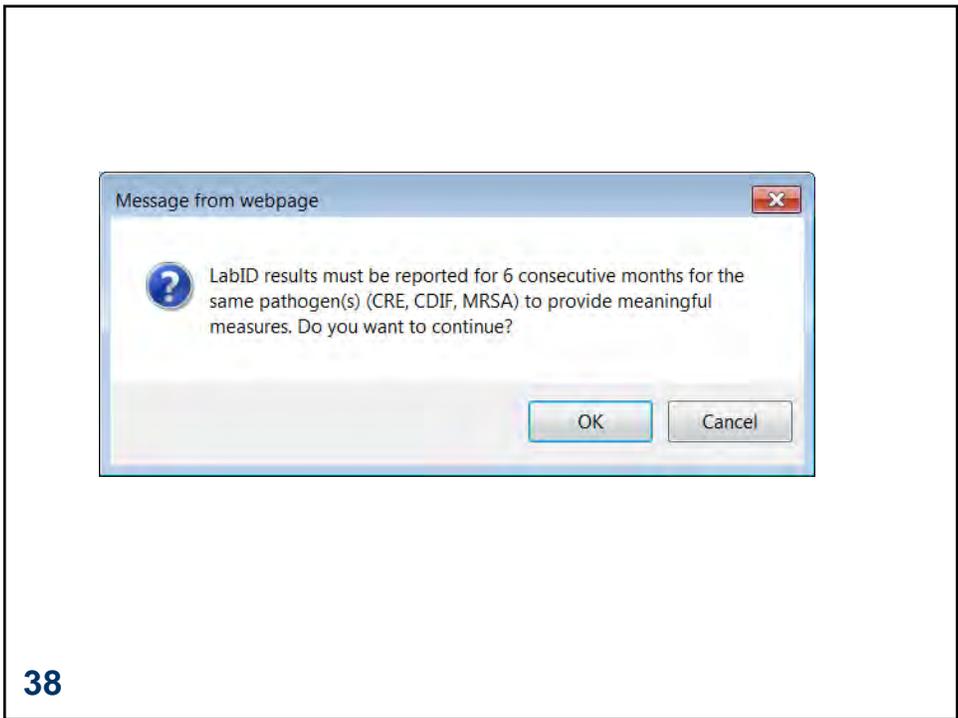
Add Row Clear All Rows Copy from Previous Month

Prevention Process Measure Module

Locations	Hand Hygiene	Gown and Gloves Use
Facility-wide Inpatient (FacWIDEIn) ▼	<input type="checkbox"/>	<input type="checkbox"/>

Copy from Previous Month

Save Back





Add Monthly Reporting Plan



Plan created successfully.

Mandatory fields marked with *

Facility ID *: State Memorial Long-term Care Facility (ID 30203) ▼

Month *: ▼

Year *: ▼

No Long Term Care Facility Component Modules Followed this Month

HAI Module

	Locations	UTI
	Facility-wide Inpatient (FacWIDEIn) ▼	<input type="checkbox"/>

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Step 10: MDRO Denominator Data: Monthly Totals



- Resident days
 - Census of residents in the facility
- Resident admissions
 - Number of new admissions (and readmissions when a resident was out of the facility for more than two calendar days)
- Summary data must be entered every month, even when there are no CRE events identified.

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- NHSN Home**
- Alerts
- Reporting Plan ▶
- Resident ▶
- Event ▶
- Summary Data ▶ **Add**
- Surveys ▶ Find
- Analysis ▶ Incomplete
- Users ▶
- Facility ▶
- Group ▶
- Logout

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Facility ID *: State Memorial Long-term Care Facility (ID 30203) ▼

Month *: ▼

Year *: ▼

Denominators for Long Term Care Locations

Location Code	Total Resident Days	Urinary Catheter Days	Report No UTI	Number of Urine Cultures Ordered
Facility-wide Inpatient (FacWIDEIn) ▼			<input type="checkbox"/>	<input type="checkbox"/> *

MDRO & CDI LabID Event Reporting

Location Code	Resident Admissions:	LabID Event (All specimens)	MRSA	VRE	Cept Klebs
Facility-wide Inpatient (FacWIDEIn) ▼	Resident Admissions: <input type="text"/>	LabID Event (All specimens) <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Resident Days: <input type="text"/>	Report No Events <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Prevention Process Measures

Location Code	Hand Hygiene		Gown and Gloves	
	Performed	Indicated	Used	Indicated
Facility-wide Inpatient (FacWIDEIn) ▼	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Save **Back**

Facility ID *: State Memorial Long-term Care Facility (ID 30203) ▾
 Month *: February ▾
 Year *: 2017 ▾

Denominators for Long Term Care Locations

Location Code	Total Resident Days	Urinary Catheter Days
Facility-wide Inpatient (FacWIDEIn)	100 *	20 *

Report No UTI	New Antibiotic Starts for UTI Indication	Number of Urine Cultures Ordered
<input checked="" type="checkbox"/> **	2 *	1 *

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MDRO & CDI LabID Event Reporting

Location Code	Resident Admissions:	Resident Days:	Number of Admissions on C. diff Treatment:
Facility-wide Inpatient (FacWIDEIn)	3 *	100 *	0 *

Prevention Process Measures

- No long term care locations selected on monthly reporting plan

	MRSA	VRE	CephR-Klebsiella	CRE-Ecoli	CRE-Enterobacter	CRE-Klebsiella	C. difficile
LabID Event (All specimens)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Report No Events	<input checked="" type="checkbox"/> **	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/> **			

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Save Back



Denominator Form Table of Instruction = More Field Details

New antibiotic starts for UTI indication	<p>Conditionally required. Complete <u>only</u> if you are performing urinary tract infection (UTI) surveillance for this month.</p> <p>For each day of the month, count and record the number of new prescriptions for an antibiotic given for residents suspected or diagnosed with having a urinary tract infection, (both catheter-associated and not catheter associated), in the facility. Capture all new antibiotic orders, regardless of number of doses or days of therapy. The aggregate count for the calendar month should be entered as the total <i>Antibiotic Starts for UTI Indication</i>. Note: Include only antibiotics that are started while the resident is receiving care in your facility, either by clinical providers working in the facility or by outside physicians who see the resident in an outpatient clinic or emergency department. Do not include antibiotic courses started by another healthcare facility prior to the resident's admission or readmission back to your facility, even if the resident continues to take the antibiotic while in the facility.</p>
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45 <https://www.cdc.gov/nhsn/forms/instr/57.142-toi-denominators-ltcf.pdf>



Step 11: CRE (Event) Data

- All infections/laboratory-identified (LabID) events start entry the same way, Event > Add.
- Form adjusts based on information provided.
- LabID form requests brief information about the specimen collected.

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NHSN Home

- Alerts
- Reporting Plan ▶
- Resident ▶
- Event ▶ Add**
- Summary Data ▶ Find
- Surveys ▶ Incomplete
- Analysis ▶
- Users ▶
- Facility ▶
- Group ▶
- Logout

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Resident Information

Facility ID #: State Memorial Long-term Care Facility (ID 30203) ▼

Resident ID #: 123456 Find Find Events for Resident Social Security # #: 123-45-6709

Medicare number (or comparable railroad insurance number):

Last Name: Badger First Name: Bucky

Middle Name:

Gender #: M - Male ▼ Date of Birth #: 06/30/1926 5

Ethnicity: NOHISP - Not Hispanic or Not Latino ▼

Race: American Indian/Alaska Native Asian
 Black or African American Native Hawaiian/Other Pacific Islander
 White

Resident type #: LS - Long Stay ▼

Date of First Admission to Facility #: 01/25/2012 5 Date of Current Admission to Facility #: 02/01/2017 5

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Event Information

Event Type * : LABID - Laboratory-identified MDRO or CDI Event Date Specimen Collected * : 03/01/2017

Specific Organism Type * : CREECOLI - CRE-Ecoli

Specimen Body Site/System * : GARD - Cardiovascular/ Circulatory/ Lymphatics

Specimen Source * : BLDSPC - Blood specimen

Resident Care Location * : N WING - NORTH WING - GENERAL NURSING

Primary Resident Service Type * : GENNUR - Long-term general nursing

Has resident been transferred from an acute care facility in the past 4 weeks *? Y - Yes

If Yes, date of last transfer from acute care to your facility * : 02/21/2017

If Yes, was the resident on antibiotic therapy for this specific organism type at the time of transfer to your facility *? N - No

Documented evidence of previous infection or colonization with this specific organism type from a previously reported LabID Event in any prior month? N - No

Custom Fields [Help](#)

LAST DISCH DATE: 3-20-13: 24

OTHER DATE: LAST DISCH DA2: 24

Comments

Save Back

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Event Form Table of Instruction = More Field Details

Data Field	Instructions for Form Completion
Event Details	
Date of Current Admission to Facility	<p>Required. The date of current admission is the most recent date the resident entered the facility. <i>If the resident enters the facility for the first time and has not left, then the date of current admission will be the same as the date of first admission.</i> Enter date using this format: MM/DD/YYYY.</p> <p>Notes:</p> <ul style="list-style-type: none"> If the resident leaves the facility for > 2 calendar days (the day the resident left the facility = day 1) and returns, the date of current admission should be updated to the date of return to the facility. If the resident has not left your facility for > 2 calendar days, then the date of current admission should not be changed. <p><i>Example:</i> A resident is transferred from your facility to an acute care facility on June 2, 2016 and returns on June 5, 2016, the current admission date would be 06/05/2016. One week later, the same resident goes to the ED for evaluation on June 12, 2016 and returns on June 13, 2016. The date of current admission stays 06/05/2016.</p>

50 <https://www.cdc.gov/nhsn/forms/instr/57.138-toi-for-lab-id-event.pdf>



Alerts

- Based on reporting plan entries
 - If you forget a reporting plan, you won't see missing data alerts for that month
- Displays upon log in for every user in the facility
- Access via “Alerts” navigation bar option too

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NHSN - National Healthcare Safety Network

NHSN Home

Alerts

Reporting Plan ▶

Resident ▶

Event ▶

Summary Data ▶

Surveys ▶

Analysis ▶

Users ▶

Facility ▶

Group ▶

Logout

NHSN Long Term Care Facility Component Home Page

COMPLETE THESE ITEMS

ALERTS

2 Missing Events	1 Incomplete Event	23 Missing Summaries	4 Incomplete Summaries
---------------------	-----------------------	-------------------------	---------------------------

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NHSN - National Healthcare Safety Network

NHSN Home

- Alerts
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- Event
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- Surveys
- Analysis
- Users
- Facility
- Group
- Logout

NHSN Long Term Care Facility Component Home Page

COMPLETE THESE ITEMS

ALERTS

2 Missing Events	1 Incomplete Event	23 Missing Summaries	4 Incomplete Summaries
---------------------	-----------------------	-------------------------	---------------------------

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Missing Events Incomplete Events Missing Summary Data Incomplete Summary Data

In-plan denominators reported for these locations with no associated events. [Print Form](#)

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Month/Year	Alert Type	Event Type/Pathogen	Summary Data Form Type	Report No Events
07/2014	Summary but no events	LABID - CDIF	MDRO	<input type="checkbox"/>
10/2016	Summary but no events	LABID - MRSA	MDRO	<input type="checkbox"/>

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Save Reset

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Facility ID *: State Memorial Long-term Care Facility (ID 30203)
 Month *: July
 Year *: 2014

Denominators for Long Term Care Locations

Location Code	Total Resident Days	Urinary Catheter Days	Report No. UTI	Number of Urine Cultures Ordered
Facility-wide Inpatient (FacWIDEIn)	478	149	✓ **	N/A

MDRO & CDI LabID Event Reporting

Location Code	Resident Admissions:	Resident Days:	LabID Event (All specimens)	MRSA	VRE	CepHR-Klebsiella	CRE-EcoRI	CRE-Klebsiella	C. difficile	MDR-Adnetobacter
Facility-wide Inpatient (FacWIDEIn)	35	478	Report No Events	✓ **				✓ **	✓ **	

Prevention Process Measures

Location Code	Hand Hygiene		Gown and Gloves	
	Performed	Indicated	Used	Indicated
Facility-wide Inpatient (FacWIDEIn)	28	30		

NHSN - National Healthcare Safety Network

NHSN Long Term Care Facility Component Home Page

COMPLETE THESE ITEMS

ALERTS

<p>2</p> <p>Missing Events</p>	<p>1</p> <p>Incomplete Event</p>	<p>23</p> <p>Missing Summaries</p>	<p>4</p> <p>Incomplete Summaries</p>
--------------------------------	----------------------------------	------------------------------------	--------------------------------------

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Missing Events **Incomplete Events** Missing Summary Data Incomplete Summary Data

The following are incomplete "In Plan" events.

Resident ID	Last Name	First Name	Gender	Date of Birth	Event #	Event Type
B000001			F	01/10/1934	8455	UTI

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NHSN - National Healthcare Safety Network

NHSN Home NHSN Long Term Care Facility Component Home Page

Alerts

Reporting Plan

Resident

Event

Summary Data

Surveys

Analysis

Users

Facility

Group

Logout

COMPLETE THESE ITEMS

ALERTS

2 Missing Events	1 Incomplete Event	23 Missing Summaries	4 Incomplete Summaries
---------------------	-----------------------	--------------------------------	---------------------------

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Missing Events Incomplete Events **Missing Summary Data** Incomplete Summary Data

In-plan locations with no associated summary data.

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Month/Year	Alert Type	Event Type
05/2016	Events but no LTC Denominators	UTI Add Summary
06/2016	Events but no LTC Denominators	UTI Add Summary
01/2017	Events but no LTC Denominators	UTI Add Summary
02/2016	No Summary Form	UTI Add Summary
03/2016	No Summary Form	UTI Add Summary
04/2016	No Summary Form	UTI Add Summary
07/2016	No Summary Form	UTI Add Summary
08/2016	No Summary Form	UTI Add Summary
09/2016	No Summary Form	UTI Add Summary
03/2017	No Summary Form	UTI Add Summary

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NHSN - National Healthcare Safety Network

NHSN Home

- Alerts
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NHSN Long Term Care Facility Component Home Page

COMPLETE THESE ITEMS

ALERTS

2 Missing Events	1 Incomplete Event	23 Missing Summaries	4 Incomplete Summaries
---------------------	-----------------------	-------------------------	-----------------------------------

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Missing Events Incomplete Events Missing Summary Data **Incomplete Summary Data**

The following are incomplete "In Plan" summary data records.

Summary ID	Summary Data Type	Year	Month
5687	HAI	2014	August
5694	HAI	2016	January
10861	MDRO	2016	October
14004	HAI	2017	February

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Confer Rights

- Securely share data with a group
- Necessary for DPH to see your CRE data
- Go to Group > Confer Rights
 - GroupID: 33839
 - Password: wjoin
- Once in the conferring rights template, click “accept” at the bottom to authorize sharing

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NHSN Home

- Alerts
- Reporting Plan ▶
- Resident ▶
- Event ▶
- Summary Data ▶
- Surveys ▶
- Analysis ▶
- Users ▶
- Facility ▶
- Group ▶** **Confer Rights**
- Logout Join

Leave

Nominate

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 **Memberships**

Groups that have access to this facility's data

QIOTest Group (14220) **Confer Rights**
State Test LTCF Group (30578) **Leave Group(s)**

Enter ID and Password for this facility to join a new group

Group ID:

Group Joining Password: **Join Group**

Back wijoin

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General

Resident

View Options
 With All Identifiers
 Without Any Identifiers
 With Specified Identifiers
 Gender DOB Ethnicity Race
 Medicare # Name SSN Resident ID

Monthly Reporting Plan
 Long Term Care Annual Facility Survey
 Data Analysis
 Facility Information

Infections and other Events (Does not include MDRO/CDI Module)
Includes Applicable Denominators and "No Events" Indicators

Months: Year: To: Year: Event:

Location type: Location:

Other Location Requirements:

MDRO/CDI Events
Includes Applicable Denominators and "No Events" Indicators

Months: Year: To: Year: Location Type: Location:

Other Location Requirements:

Event Type:

Specific Organism Type:

- ACINE - MDR-Acinetobacter
- CDIP - C. difficile
- CEPHAKLED - CepH-Klebsiella
- CRE - CRE (CRE-EcoII, CRE-Enterobacter, CRE-yiebsiella)
- MRSA - MRSA
- MSSA - MSSA
- SVRE - VRE



Next Steps

- Access NHSN enrollment checklist with active links.
- Enroll in NHSN.
- Evaluate numerator and denominator data collection processes.
- Confer rights to DPH.

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CRE Surveillance Basics

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<https://www.cdc.gov/nhsn/ltc/cdiff-mrsa/index.html>

[CDC](#) > [NHSN](#) > [Materials for Enrolled Facilities](#) > [Long-term Care Facilities](#)

Surveillance for C. difficile, MRSA, and other Drug-resistant Infections



Resources for NHSN Users Already Enrolled

> Training

> Protocol

> Data Collection Forms

> Supporting Material

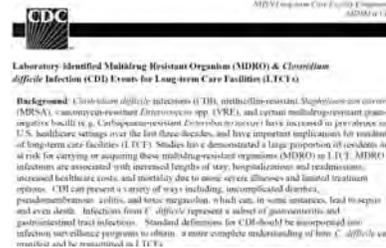
> FAQs

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Review the Protocol

- https://www.cdc.gov/nhsn/pdfs/ltc/ltcf-labid-event-protocol_current.pdf
- Includes definitions and surveillance algorithm
- Covers *C. difficile* and multidrug-resistant organisms (MDRO)



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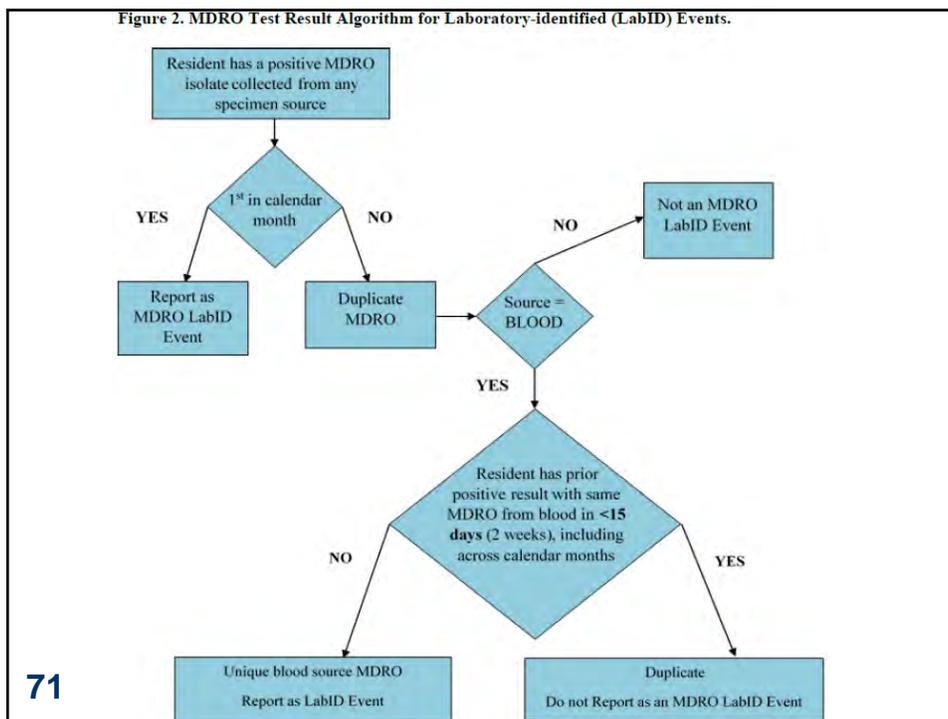


Wisconsin CRE Mandate

- Focus is on carbapenemase-producing CRE (CP-CRE)
- Determined by Wisconsin State Lab of Hygiene when specimen is sent in for further testing after carbapenem non-susceptibility is identified
- CP-CRE: Any *Escherichia coli*, *Klebsiella oxytoca*, *Klebsiella pneumoniae*, or *Enterobacter* spp. determined to produce a carbapenemase using a recognized test (e.g., polymerase chain reaction, metallo- β -lactamase test, modified-Hodge test, Carba-NP)

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Figure 2. MDRO Test Result Algorithm for Laboratory-identified (LabID) Events.



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Key Principles

- The first chronological MDRO isolate per resident per month is reported regardless of specimen source.
- If blood is first, enter it as a LabID event even if the resident had a prior blood reported within two weeks in the previous month.
- If blood is first, no non-blood specimens are entered for the month. Another blood can be entered if there was no prior blood positive for the same MDRO in the previous two weeks (even across calendar months and admissions).

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Keep in Mind

- Active surveillance testing cultures do not count.
- Specimens should be collected while resident is receiving care from the LTCF, including those from the ED or outpatient setting, during the resident's current admission.
- Specimen order matters as to whether it counts.

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LabID Event Classification

- Based objectively on dates of admission and specimen collection
- Community-onset: Specimen collected on days 1, 2 or 3 of admission
- Long-term care facility-onset (LO): Specimen collected on day 4 or later of admission
- Acute care transfer-long-term care facility onset: LO cases with a specimen collected ≤ 4 weeks following date of last transfer from acute care to LTC

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DEPARTMENT OF HEALTH SERVICES
Division of Public Health
F-01887A (09/2018)

STATE OF WISCONSIN

LABORATORY-IDENTIFIED MDRO EVENTS IN LTCF
(NHSN LTCF MDRO/C. *difficile* protocol http://www.cdc.gov/nhsn/pdfs/lto/lcf-labid-event-protocol_current.pdf)

Resident Name		Record No.	
Date of Admission		Date of Review	
Date of Previous MDRO Culture Result(s)			
Date of Event/Specimen Collection		Type of Specimen Collected	
<input type="checkbox"/> Individual is receiving care at the LTCF at the time of specimen collection.			
AND			
<input type="checkbox"/> Specimen is collected for clinical assessment purposes (not active surveillance testing).			
AND			
One of the following definitions of a unique laboratory event is met:			
<input type="checkbox"/> MDRO isolate is the first one obtained in the calendar month from any specimen source (e.g., urine, wound, sputum, blood), for the resident (if source is blood, a prior positive blood culture with the same MDRO must <u>not</u> occur ≤14 days before the current blood culture, even if in different calendar months).			
<input type="checkbox"/> MDRO isolate is the first obtained from a blood source in the calendar month (with no prior positive blood culture with the same MDRO ≤14 days before the current blood culture). A prior MDRO may or may not have been obtained from another source (e.g., urine, wound, sputum).			

<https://www.dhs.wisconsin.gov/forms/f01887a.pdf>

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Is it a CRE LabID Event?

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Scenario 1

- Day 1: Resident transferred to LTC from acute care. CP-CRE Enterobacter wound specimen collected.
Is this a LabID event?
- Day 10: CP-CRE Enterobacter blood specimen collected from the same resident.
Is this a LabID event?

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Scenario 2

- March 15: Resident sent to ED after a fall. Urine specimen collected, CP-CRE E. coli positive.
- March 16: Resident returns to LTCF on antibiotics for a suspected UTI.

Is this a LabID event for the LTCF?

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Scenario 3

Resident	Admission Date	Specimen Date	Result	Source	LabID event?
John	9/10/2016	2/1/2017	CRE-Enterobacter	Urine	Y/N
John	9/10/2016	2/5/2017	CRE-Enterobacter	Blood	Y/N
John	9/10/2016	2/15/2017	CRE-Enterobacter	Blood	Y/N
Jane	1/23/2014	2/28/2017	CRE-K. oxytoca	Blood	Y/N
Jane	1/23/2014	3/1/2017	CRE-K. oxytoca	Blood	Y/N
Jane	1/23/2014	3/28/2017	CRE-K. oxytoca	Blood	Y/N
Jane	1/23/2014	3/28/2017	CRE-E. coli	Blood	Y/N

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Scenario 4

Resident	Admission Date	Specimen Date	Result	Source	LabID event?
Bob	11/20/2016	4/5/2017	CRE-K. pneumoniae	Blood	Y/N
Bob	11/20/2016	4/20/2017	CRE-K. pneumoniae	Urine	Y/N
Dan	6/8/2010	4/15/2017	CRE-Enterobacter	Blood	Y/N
Sarah	4/8/2014	3/28/2017	CRE-K. oxytoca	Wound	Y/N
Sarah	4/8/2014	4/15/2017	CRE-K. oxytoca	Blood	Y/N
Sarah	4/8/2014	4/29/2017	CRE-K. oxytoca	Blood	Y/N
Bob	11/20/2016	5/1/2017	CRE-K. pneumoniae	Urine	Y/N

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 CDC 24/7: Saving Lives. Protecting People.™

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 Through a Copy:

A-Z Index **A** B C D E F G H I J K L M N O P Q R S T U V W X Y Z #

National Healthcare Safety Network (NHSN) www.cdc.gov/nhsn

CDC's National Healthcare Safety Network is the nation's most widely used healthcare-associated infection tracking system. NHSN provides facilities, states, regions, and the nation with data needed to identify problem areas, measure progress of prevention efforts, and ultimately eliminate healthcare-associated infections.

In addition, NHSN allows healthcare facilities to track blood safety errors and important healthcare process measures such as healthcare personnel influenza vaccine status and infection control adherence rates.

Drug Resistance
 Superbugs ranked, CDC outlines four core actions to halt resistance
 Learn More

ANTIBIOTIC RESISTANCE THREATS in the United States, 2013

About NHSN
 CDC's NHSN is the largest HAI reporting system in the U.S.

Data & Reports
 See national and state reports using NHSN data

HICPAC Guidelines and Recommendations
 Review CDC HAI prevention guidelines

New to NHSN? Enroll Facility Here.
 For first time facility enrollment.

Reporting & Surveillance Resources for Enrolled Facilities
 Training, protocols, forms, support materials, analysis resources, and FAQs

Group Users
 View resources for group users here.

Contact NHSN:
 Centers for Disease Control and Prevention
 National Healthcare Safety Network
 MS-424
 1600 Clifton Rd
 Atlanta, GA 30333
 Contact: NHSN@cdc.gov

Contact Us:
 Centers for Disease Control and Prevention
 1600 Clifton Rd
 Atlanta, GA 30333
 800-CDC-INFO (800-232-4636)
 TTY: (888) 232-6348
 New Hours of Operation
 8am-5pm ET/Monday-Friday
 Closed **Holidays**
 Contact CDC-INFO

e-LEARNING

81 [Training / Demo](#) [Newsletters / Members Meeting Updates](#) [E-mail Updates](#) [State-based HAI Prevention Activities](#) [HIPAA Privacy Rule](#)



More Info on NHSN

- Enrollment info: <https://www.cdc.gov/nhsn/ltc/enroll.html>
- LTC surveillance: <https://www.cdc.gov/nhsn/ltc/index.html>
- MDRO surveillance protocol: https://www.cdc.gov/nhsn/pdfs/ltc/ltcf-labid-event-protocol_current.pdf
- DPH NHSN resources (tutorials, worksheets): <https://www.dhs.wisconsin.gov/hai/nhsn-resources.htm>

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Questions?

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