Glossary of TAP Terms

This document aims to provide a quick-reference glossary for terms included in the Targeted Assessment for Prevention (TAP) Strategy promoted by the Centers for Disease Control and Prevention, and TAP Reports generated by the National Healthcare Safety Network (NHSN). For more information about NHSN surveillance and definitions please visit: www.cdc.gov/nhsn.

Acronyms:	
CAD	Cumulative Attributable Difference
CAUTI	Catheter-Associated Urinary Tract Infection
CDI	*Clostridium difficile* Infection
CLABSI	Central Line-Associated Bloodstream Infection
DUR	Device Utilization Ratio
HAI	Healthcare-Associated Infection
HHS	Department of Health and Human Services
ICU	Intensive Care Unit
NHSN	National Healthcare Safety Network
SIR	Standardized Infection Ratio
TAP	Targeted Assessment for Prevention

TAP Strategy Terms

Term	Definition
TAP Strategy	Targeted Assessment for Prevention Strategy: a data-driven approach that utilizes NHSN data to prioritize healthcare facilities and specific units within facilities with a disproportionate burden of HAIs so that gaps in infection prevention locations can be addressed. The strategy is three-fold: 1. Identify and target facilities and/or location/units with a high CAD 2. Assess prevention efforts and areas for quality improvement in the targeted locations 3. Implement known prevention strategies to improve quality and lower infection rates
TAP Report	A table-formatted report that ranks healthcare facilities and patient care locations within these facilities by the CAD metric in descending order. These reports also contain other applicable information for prevention of HAIs such as count of HAIs, SIRs, DURs, and pathogen distributions.
Facility Assessment Tool	Measurement instruments to assess the gaps in infection prevention in locations within a targeted facility. The assessment tools are organized by domains that address general infection control as well as HAI-specific prevention strategies. These tools are designed to be administered to staff at various levels of a facility, including but not limited to: hospital administration and front-line staff nurses and physicians.
CAD	*Cumulative Attributable Difference*: The CAD is the number of infections that must be prevented within a group, facility, or unit to achieve an HAI reduction goal. The CAD is calculated by subtracting a numerical prevention target from an observed number of HAIs. The prevention target is the product of the predicted number of HAIs and a standardized infection ratio goal (SIR_{goal}).
SIR	*Standardized Infection Ratio*: A summary measure to track HAIs at a location, facility, or group level for a specified period of time. $$SIR = OBSERVED/PREDICTED$$ The SIR compares the number of reported HAIs to the number of predicted HAIs. A SIR greater than 1.0 indicates that more HAIs were observed than predicted, adjusting for known risk factors and differences in the types of patients followed. Conversely, a SIR less than 1.0 indicates that fewer HAIs were observed than predicted.
SIR_{goal}	*Standardized infection ratio target* (used as a multiplier in the CAD formula). HHS target SIRs are used in the NHSN TAP reports to calculate the CADs. The **2013** HHS targets for specific infections are as follows: CAUTI: Reduce by 25% SIR_{goal} = 0.75 CDI: Reduce by 30% SIR_{goal} = 0.70 CLABSI: Reduce by 50% SIR_{goal} = 0.50 While CDC uses HHS targets for the NHSN TAP reports, the SIR_{goal} may be adjusted and specified for any infection ratio target. This functionality will be available in NHSN in a future release.
Observed	The observed number of HAIs for a specific location, facility, or group of locations/facilities over a specified time period. This is also listed as Event Count.
Predicted	Statistically predicted number of HAIs for a specified time period. The predicted number is derived from NHSN baseline data, adjusting for several factors that may impact the risk of acquiring an HAI. These metrics and derivations vary for different HAIs.

TAP Report Terms

For detailed guides for specific analysis options, please refer to the NHSN Technical Documentation

Term	Definition
Facility Org ID	Designated ID for each free-standing facility in NHSN
Facility Name	User-defined name for each free-standing facility
Location	User-defined name for each patient care area
CDC Location	NHSN requires that facilities map each patient care area in their facility to one or more standardized CDC locations as defined by NHSN in order to report surveillance data collected from these areas.
Location (I, N, W)	Overall number of locations listed in the aggregate facility grouping. In parentheses, the counts for specific CDC location types are broken out:
	I: Number of intensive care units
	N: Number of neonatal intensive care units
	W: Number of ward+ units: including step-down units and specialty care areas such as hematology/oncology and bone marrow transplant units.
Type of Affiliation	This code represents medical school affiliation for a facility, as reported to NHSN. If blank, facility is a non-teaching hospital.
	M- Major: Facility has a program for medical students and post-graduate medical training.
	G- Graduate: Facility has a program for post-graduate medical training (i.e., residency and/or fellowships).
	U –Undergraduate: Facility provides training program(s) for medical students only.
Events	The count of the specified HAIs for the designated time period. This number also represents the <u>observed</u> number of infections for that HAI type.
CAD	*Cumulative Attributable Difference* (CAD): The overall number of infections a facility must prevent to achieve the HAI reduction goal. In parentheses, CADs for specific location types are broken out (see Location for definitions of groups).
Facility CAD	A summation of the CAD for all locations reporting data (that a group has access to) for the facility.
Location CAD	A location (unit)-specific CAD. Location CADs are only available for device-associated infections (i.e., CLABSI and CAUTI).
Rank	The rank is determined by sorting highest to lowest CADs for each group. A rank of 1 identifies the location/facility with the highest number of excess infections in the designated group.
Facility Rank	A ranking of facilities within a group by CAD on the TAP reports to facilitate targeting of hospitals for additional prevention efforts.
Location Rank	A ranking of locations within a facility to enable targeting of certain locations/units for additional prevention efforts. Location rank is only available for device-associated infections (i.e., CLABSI and CAUTI)

SIR	*Standardized Infection Ratio:* The ratio of observed/predicted for a facility in the designated time period.

CAUTI Specific TAP Report Terms

DUR %	Device Utilization Ratio: The number of device days divided by the number of patient days. DUR is a measure of device use on a given unit (relative to the number of patient days) and is shown as a percent. The DURs for specific location types are broken out in parentheses following the overall DUR (see location for definitions of groups).
Device Days / Urinary Catheter Days	A count of the number of patients with urinary catheters in the patient care location during a time period. Device days for specific location types are broken out in parentheses (see location for definitions of groups). See NHSN website for more methodology and details.
Events	The count of the observed number of CAUTIs in the designated time period. The count of events for specific location types are broken out in parentheses (see location for definitions of groups).
Total No. Pathogens	Total number of pathogens reported (in order) for all events reported. This number may be greater than the total events, as multiple pathogens may be reported per event.

CDI Specific TAP Report Terms

Type of Facility	The self-identified group for facilities. Facilities are grouped HOSP-GEN are general acute care hospital. Other facility types include children's, military hospitals, women's hospitals, etc.
Number of Beds	The number of beds set up and staffed, as reported to NHSN.
Patient Days	A count of the number of patients in the patient care location during a time period. See NHSN website for methodology and details.
COHCFA Prevalence Rate	Community-onset healthcare facility associated CDI prevalence rate per 100 admissions.
CDIF Facility Incident HO LabID Event Count	Facility-wide number of observed infections for hospital-onset CDI for specified time period.
CDIF Facility Incident HO LabID Number Expected	Facility -wide predicted number of infections for hospital-onset CDI for specified time period.

CLABSI Specific TAP Report Terms

Device Days / Central Line Days	A count of the number of patients with central lines in the patient care location during a time period. Device days for specific location types are broken out in parentheses (see location for definitions of groups). See NHSN website for more methodology and details.

Events	The count of the observed number of CLABSIs in the designated time period. The count of events for specific location types are broken out in parentheses (see location for definitions of groups).
Total No. Pathogens	Total number of pathogens reported (in order) for all events reported. This number may be greater than the total events, as multiple pathogens may be reported per event.