Monthly Checklist for Acute Care Hospital Units Designated as Inpatient Rehabilitation Facilities (IRFs)

Reporting to CMS IRF IQR

CCN: __________________________

Month/Year: ___________

<table>
<thead>
<tr>
<th>Monthly Plan</th>
<th>CAUTI</th>
<th>IRF Unit LabID Event</th>
<th>HCP Influenza Vaccination (seasonal)</th>
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<tr>
<th>Seasonal Influenza Vaccination Summary Data</th>
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<th>Monthly Denominator Data</th>
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<th>If Zero Events, Report no Events</th>
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<th>Enter Events</th>
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<th>Check for Accuracy</th>
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| Save quarterly CMS Reports                  |       |                      |                                     |
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Catheter-Associated Urinary Tract Infection (CAUTI)  
Monthly Checklist for CAUTI Reporting for Acute Care Hospital Units Designated as Inpatient Rehabilitation Facilities (IRFs) Participating in the Centers for Medicare and Medicaid Services’ IRF Quality Reporting Program

The following steps should be completed prior to the quarterly CMS Reporting Program deadline:

☐ Verify Your IRF Unit’s CMS Certification Number (CCN)

An accurate CCN is required for IRF units in acute care hospitals participating in the CMS Reporting Program, as this is the ID that will be used to submit CAUTI data to CMS on your behalf. IRF units must have their own CCN entered in NHSN’s Location Manager. Instructions can be found at http://www.cdc.gov/nhsn/PDFs/irf/Updating-IRF-locations-within-NHSN.pdf. Please be sure to double- and triple-check this number!

☐ Check the Monthly Reporting Plan each month

NHSN will release CAUTI data to CMS for those IRF units participating in the CMS Reporting Program, only for those months in which the facility’s NHSN monthly reporting plan (MRP) includes CAUTI reporting in the IRF unit. It is the responsibility of each facility to check their MRPs for compliance with this requirement.

☐ Enter denominator data for each location and month under surveillance

Denominator data (i.e., patient days and urinary catheter days) can be entered using the Summary Data > Add option within NHSN and by selecting the appropriate Denominator Data type (e.g., ICU/Other).

☐ If no events have been identified, check “Report No Events” on denominator data form

IMPORTANT! Facilities must Report No Events for those locations and months for which no events of each type under surveillance were identified. If no events have been reported and this box is not checked, your data will not be submitted to CMS. For instructions, please see: http://www.cdc.gov/nhsn/PDFs/CMS/how-to-report-No-Events-CLAB-CAU.pdf

☐ If CAUTI events have been identified, enter the appropriate events

CAUTI events can be entered by using the Event > Add option within NHSN.

☐ Use NHSN Analysis Tools to check for accuracy and completion

The NHSN Analysis Output Option, “SIR – CAUTI Data for CMS IRF PPS” was created in order to allow facilities to review those CAUTI data that would be submitted to CMS on their behalf. For more information about this output option, please see Using the “SIR – CAUTI Data for CMS IRF PPS” Output Option on the NHSN website at http://www.cdc.gov/nhsn/cms/index.html#cauti.
*Clostridium difficile* Infection (CDI) and Methicillin-Resistant *Staphylococcus aureus* (MRSA Bacteremia)

**Monthly Checklist for FacWideIN MRSA Bacteremia and FacWideIN *C. difficile* LabID Event Reporting for Acute Care Hospital Units Designated as Inpatient Rehabilitation Facilities (IRFs) Participating in the Centers for Medicare and Medicaid Services’ IRF Quality Reporting Program**

The following steps should be completed prior to the quarterly CMS Reporting Program deadline:

- **Verify Your IRF Unit’s CMS Certification Number (CCN)**
  An accurate CCN is required for IRF units in acute care hospitals participating in the CMS Reporting Program, as this is the ID that will be used to submit the LabID Event data to CMS on your behalf. IRF units must have their own CCN entered in NHSN’s Location Manager. Instructions can be found at [http://www.cdc.gov/nhsn/PDFs/irf/Updating-IRF-locations-within-NHSN.pdf](http://www.cdc.gov/nhsn/PDFs/irf/Updating-IRF-locations-within-NHSN.pdf). Please be sure to double- and triple-check this number!

- **Check the Monthly Reporting Plan each month**
  When NHSN releases LabID Event data to CMS for those IRF units participating in the CMS Reporting Program, only those months in which the acute care facility included surveillance of MRSA bacteremia and *C. difficile* in the IRF units within its NHSN monthly reporting plan (MRP) will be included. Each IRF unit should be listed separately on the facility’s monthly reporting plan, and should be following both MRSA bacteremia LabID Event and *C. difficile* LabID Event. Note that you must specify the IRF unit on individual rows of the monthly reporting plan, separate from any “FacWideIN” LabID Event surveillance that your hospital may be following. It is the responsibility of each facility to check their MRPs for compliance with this requirement.

- **Enter denominator data for each IRF unit and month under surveillance**
  Denominator data (i.e., location patient days and admissions) can be entered using the “Summary Data > Add” option within NHSN and selecting the appropriate Summary Data Type (i.e., MDRO and CDI Prevention Process and Outcome Measures Monthly Monitoring).

- **If no events have been identified, check “Report No Events” on denominator data form**
  **IMPORTANT!** Facilities must Report No Events for IRF units for months in which no MRSA bacteremia LabID events and/or *C. difficile* LabID events were identified. If no events have been reported and this box is not checked, your data will not be submitted to CMS. For instructions, please see step 5 of the document titled “How to Set Up NHSN Reporting for MRSA Bacteremia and *C. difficile* LabID events for the CMS IRF Quality Reporting Program”, available from: [http://www.cdc.gov/nhsn/cms/index.html#mrsa](http://www.cdc.gov/nhsn/cms/index.html#mrsa)

- **If MRSA bacteremia or *C. difficile* LabID events have been identified, enter the appropriate events**
  LabID events can be entered by using the Event > Add option within NHSN.

- **Use NHSN Analysis Tools to check for accuracy and completion**
  NHSN has created specific Analysis Output Options to allow facilities to review those MRSA bacteremia and *C. difficile* LabID event data that would be submitted to CMS on their behalf.
  - “Rate Table- MRSA Blood LabID Data for IRF PPS” was created in order to allow facilities to review those MRSA bacteremia LabID event data from IRF units that would be submitted to CMS on their behalf.
Updated May 2015

- “Rate Table- CDI LabID Data for IRF PPS” was created in order to allow facilities to review those *C. difficile* LabID event data from IRF units that would be submitted to CMS on their behalf.

For more information about these output options, please see: [http://www.cdc.gov/nhsn/cms/index.html#mrsa](http://www.cdc.gov/nhsn/cms/index.html#mrsa)
Healthcare Personnel (HCP) Influenza Vaccination

Helpful Tips for Healthcare Personnel (HCP) Influenza Vaccination Reporting for the Centers for Medicare and Medicaid Services’ Inpatient Rehabilitation Facility Quality Reporting Program (IRF QRP)

The following steps should be completed prior to the CMS Reporting Program deadline:

☐ Verify Your Facility’s CMS Certification Number (CCN)
An accurate CCN is required for those facilities participating in the CMS Reporting Program, as this is the ID that will be used to submit HCP influenza vaccination data to CMS on your behalf. Please be sure to double- and triple-check this number!
Free-standing IRFs: To update the CCN, use the Facility > Facility Info option within NHSN. At the top of the Facility Information screen, verify and update, if necessary, the CCN in the appropriate data entry field. If any changes have been made, remember to click the “Update” button at the bottom of the screen.
IRF Units: IRF units must have their own CCN entered in NHSN Facility’s Location Manager. Instructions can be found at http://www.cdc.gov/nhsn/PDFs/irf/Updating-IRF-locations-within-NHSN.pdf.

☐ Activate the Healthcare Personnel Safety Component
HCP Influenza Vaccination reporting is done through NHSN’s Healthcare Personnel Safety (HPS) Component. The HPS Component must be activated by the NHSN Facility Administrator before the facility can report any data. Instructions for activating the HPS Component can be found in the HCP Influenza Vaccination training slideset at: http://www.cdc.gov/nhsn/PDFs/training/HCP-flu-Vaccination-Summary-Reporting-General-Training.pdf

☐ Create a Monthly Reporting Plan in the HPS Component
HCP influenza vaccination data from NHSN will only be sent to CMS for those free-standing IRFs or IRF units participating in the CMS Reporting Program who have included the HCP influenza vaccination summary in their HPS Component monthly reporting plan. Unlike the other NHSN components and modules, when “Influenza Vaccination Summary” is selected on one reporting plan, the information is automatically updated on all reporting plans for the entire influenza season as defined by NHSN (which is July 1 to June 30).

☐ Enter HCP influenza vaccination summary data for the entire influenza season
The HCP influenza vaccination summary data form must be completed (Flu Summary->Add) for each influenza season. There is only a single form for each influenza season, and the form must be completed by each season’s reporting deadline. For IRF units located within acute care hospitals, a separate summary data form should be entered within NHSN for HCP working in the IRF unit. Each time a user enters updated data for an influenza season, all previously entered data for that season are overwritten.

☐ Use NHSN Analysis Tools to check for accuracy and completion
The NHSN Analysis Output Option, “Line Listing – HCP Flu Vaccination Data for CMS IRF PPS” was created to allow facilities to review the HCP influenza vaccination data that will be submitted to CMS on their behalf. For more information about this output option, please see Using the “Line Listing – HCP Flu Vaccination Data for CMS IRF PPS” Output Option on the NHSN website at http://www.cdc.gov/nhsn/cms/index.html.
**Additional Resources:**

**Catheter-Associated Urinary Tract Infection (CAUTI)**

**Clostridium difficile Infection (CDI) and Methicillin-Resistant Staphylococcus aureus (MRSA Bacteremia)**

**Healthcare Personnel (HCP) Influenza Vaccination**