

Using the “SIR – MRSA Blood LabID Data for PCH QRP” Report

The NHSN Analysis Report, “SIR - MRSA Blood LabID Data for PCH QRP” was created for Prospective Payment System (PPS)-Exempt cancer hospitals (PCHs) to review those MRSA Blood LabID data that would be submitted to CMS on their behalf. It’s important to keep in mind the following as you begin to use this report:

- These data will only be submitted for those facilities that are participating in the CMS PPS-Exempt Cancer Hospital Quality Reporting (PCHQR) Program, as indicated by their CCN recorded in NHSN.
- **The SIRs generated in this output will be calculated using the 2015 national baseline data.** To learn more about the standardized infection ratio (SIR) under the 2015 baseline as it pertains to MRSA data, please see: <https://www.cdc.gov/nhsn/2015rebaseline/>.
- This report will only include **in-plan FacWideIN (facility-wide inpatient) MRSA blood LabID data beginning with January 2018 data.** Earlier years for which you may have reported these data will not be included in this output. Data that have previously been submitted to CMS for participation in a Quality Reporting Program can be found at the following folders: HAI Risk Adjusted Measure Reports > Original Baseline (Baseline Set 1) > CMS - PPS-Exempt Cancer Hospitals (PCHQR) > Rate Table – MRSA blood LabID Data for CMS PPS-Exempt Cancer Hospitals.
- **IMPORTANT!** Facilities must appropriately **Report No Events** for those FacWideIN months for which no MRSA LabID events were identified in an inpatient location.
- This output option represents an SIR report for each hospital, not each CCN. If your hospital shares a CCN, this SIR will only represent the data that your hospital has contributed to the overall SIR for all hospitals that share the CCN. You may wish to use the Group feature in NHSN to obtain a single SIR for all the hospitals that share a CCN. More information about the Group feature can be found here: <http://www.cdc.gov/nhsn/group-users/index.html>.
- The data in this report will represent data current as of the last time you generated datasets. **NOTE:** Data in the Provider Participation Report are not updated simultaneously with your data in NHSN. Data changes made in NHSN will be reflected in the next monthly submission to CMS. **EXCEPTION:** Quarterly data are frozen as of the final submission date for that quarter. For example, Q1 data will be frozen as of 7am UTC* (3am ET) on August 16th. Any changes made to these data in NHSN after the final submission deadline will not be reflected in later months on the Provider Participation Report or on Hospital Compare.

**All NHSN timestamps are displayed in the UTC Time Standard. To convert UTC to Eastern Time:*

- *Between second Sunday in March – first Sunday in November: subtract 4 hours from UTC to get Eastern Daylight Time (EDT).*
- *Between first Sunday in November – second Sunday in March: subtract 5 hours from UTC to get Eastern Standard Time (EST).*



- The information in this document should be used in conjunction with the document, “How to Set Up NHSN Reporting for Facility-Wide Inpatient MRSA Bacteremia and *C. difficile* LabID events for the CMS Inpatient Quality Reporting Program”, available at: <https://www.cdc.gov/nhsn/pdfs/cms/how-to-set-up-and-report-mrsa-cdi.pdf>

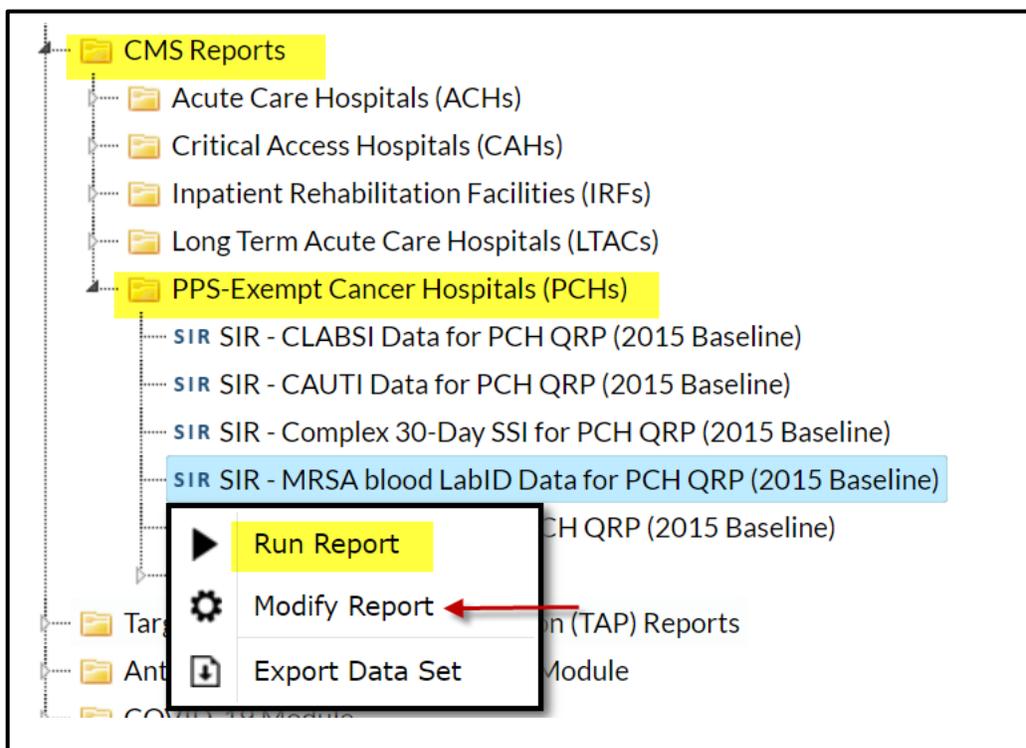
**All NHSN timestamps are displayed in the UTC Time Standard. To convert UTC to Eastern Time:*

- *Between second Sunday in March – first Sunday in November: subtract 4 hours from UTC to get Eastern Daylight Time (EDT).*
- *Between first Sunday in November – second Sunday in March: subtract 5 hours from UTC to get Eastern Standard Time (EST).*

Example of the “SIR - MRSA Blood LabID Data for PCH QRP”: Interpretation and Data Checking

Before running this output option, remember to generate your datasets for the most up-to-date data reported to NHSN by your facility! To generate datasets, go to Analysis > Generate Data Sets, then click “Generate Reporting Data Sets”.

1. After selecting Analysis > Reports, navigate through the following folders: CMS Reports > PPS-Exempt Cancer Hospitals (PCHs) > SIR - MRSA Blood LabID Data for PCH QRP (2015 Baseline). After clicking the title of the report, click “Run” on the subsequent pop-up menu.



2. By default, the results will appear in an HTML window. If a second window does not pop-up, please be sure to check your pop-up blocker and allow pop-ups from *.cdc.gov.

3. Within the output, there may be multiple tables, each described below. **Data presented below are fictitious.**

a. SIR Example Report:

“SIR - MRSA Blood LabID Data for PCH QRP (2015 Baseline)”

The table below represents an overall, single SIR for your facility, per calendar quarter. This is the information that will be submitted to CMS for each participating facility, as indicated by the facility’s CCN.

orgID	ccn	location	summaryYQ	months	MRSA_bldIncCount	numPred	numpatdays	SIR	SIR_pval	sir95ci
11305	999999	FACWIDEIN	2018Q1	3	2	1.024	5850	1.953	0.3579	0.327, 6.452
11305	999999	FACWIDEIN	2018Q2	3	2	0.352	2850	.	.	
11305	999999	FACWIDEIN	2018Q3	3	2	0.266	3100	.	.	
11305	999999	FACWIDEIN	2018Q4	3	0	0.262	3050	.	.	

Using the above table, one can conclude the following:

- During the first quarter of 2018 (2018Q1), the facility reported 3 months of MRSA blood LabID data (*months*).
- In those months for Q1, the facility reported 2 healthcare facility-onset (HO) MRSA blood LabID events (*MRSA_bldIncCount*) among 5,850 patient days (*numpatdays*). For more information about which events are counted in the numerator of the SIR, refer to the LabID SIR Troubleshooting document (see Additional Resources below).
- The number of predicted HO MRSA blood LabID events (*numPred*) was 1.024.
- The SIR was 1.953, p-value (*SIR_pval*) was 0.3579, and 95% confidence interval (*sir95ci*) was (0.327 – 6.452) for MRSA blood LabID events during this time period.
- Based on the p-value and the 95% confidence interval, the SIR for MRSA blood LabID events is **not** statistically significantly different than the nominal value of 1 (specifically, the number of observed events is not significantly different than the number predicted).
- NOTE: If the number of predicted events is less than 1, an SIR, p-value, and 95% confidence interval will not be calculated. However, assuming all other reporting requirements are met, the SIR data are considered “complete” and will still be submitted to CMS in order to comply with Quality Reporting Programs.
- Be sure to read the footnotes beneath the SIR report for important information about the SIR calculation.



b. SIR Risk Factors Example Report

“Risk Adjustment Factors for FacwideIN MRSA Bacteremia SIR”

The table below presents the SIR-associated risk factors used in the calculation of your facility’s SIR for each calendar quarter. This information is provided to help a facility understand their SIR calculation and ensure accuracy of each risk adjustment variable. These data are **not** submitted to CMS. Additional details regarding the SIR risk factors can be found here: <https://www.cdc.gov/nhsn/pdfs/ps-analysis-resources/nhsn-sir-guide.pdf>.

summaryYQ	MRSA_admPrevBldRate	MRSA_EDObsPrevRate	LOS	medType	facType	numICUBeds	numpatdays
2018Q1	0.083	0.109	3.1	M	HOSP-ONC	100	5850
2018Q2	0.143	0.000	3.1	M	HOSP-ONC	100	2850
2018Q3	0	0.000	3.1	M	HOSP-ONC	100	3100
2018Q4	0	0.000	3.1	M	HOSP-ONC	100	3050
2019Q1	0	.	3.1	M	HOSP-ONC	100	1900

4. What can be done if a quarter does not appear in the table or if the data are inaccurate?
 - a. Check that the summary data for the FacWideIN location have been entered for each month in the quarter and double-check the accuracy of these data, which includes patient days and admissions.
 - b. If summary data have been entered, double-check your monthly reporting plan for each month in the quarter. Check to make sure that MRSA LabID surveillance is included in your monthly reporting plan for the location FacWideIN.
 - c. If summary data have been entered and no MRSA LabID events have been identified, be sure to check the ‘Report No Events’ box on the summary record or through the “Missing Events” alerts tab.
 - d. If the number of events is less than you reported *and* you’ve confirmed that the summary data have been entered in-plan, double check the MRSA LabID events in NHSN using the MRSA LabID events line list.

REMEMBER: If you have made any changes to your data, regenerate your datasets in order to review your output options with the most up-to-date data in NHSN.



Additional Resources:

Troubleshooting MRSA and CDI LabID Event SIR:

https://www.cdc.gov/nhsn/pdfs/ps-analysis-resources/mrsacdi_tips.pdf

CMS Resources for NHSN Users:

<http://www.cdc.gov/nhsn/cms/index.html>

Operational Guidance for ACHs to report MRSA bacteremia LabID Event data:

<https://www.cdc.gov/nhsn/pdfs/cms/FINAL-ACH-MRSA-Bacteremia-Guidance.pdf>

Analysis Quick Reference Guides:

<http://www.cdc.gov/nhsn/PS-Analysis-resources/reference-guides.html>

NHSN's Guide to the SIR:

<https://www.cdc.gov/nhsn/pdfs/ps-analysis-resources/nhsn-sir-guide.pdf>

