Important Messages - Patient Safety & Outpatient Procedure Components, Upcoming CMS Deadline

Dear Users:

We have learned that some individuals may not have received important messages from NHSN. Please see the digest below for recent messages we want to ensure you have received. We apologize if you are receiving this information as a duplicate or if it does not pertain to your facility type.

Subject: 3 Important Messages r.e. Patient Safety and Outpatient Procedure Components
Originally sent October 22, 2018:

RELEASE OF SUMMARY OF PROTOCOL CHANGES FOR PATIENT SAFETY COMPONENT FOR 2019

Attached please find a summary of modifications to the Patient Safety Component for 2019 many of which represent only clarifications of protocol instructions. The modifications are presented as "clarifications", "additions", or "deletions". Data collection forms for 2019 are still in the Centers for Disease Control and Prevention's approval process and will be posted to the website on or around January 1, 2019 for your use. You will receive an email when posted. It is our hope that providing the protocol information ahead of the New Year will allow you to prepare for surveillance in 2019.

RELEASE OF OUTPATIENT PROCEDURE COMPONENT DOCUMENTS FOR AMBULATORY SURGICAL CENTERS

We are excited to announce that we have updated the Ambulatory Surgery Center (ASC) webpage and it now includes the new Outpatient Procedure Component (OPC) which is now available for data entry. A newsletter is attached which provides helpful information regarding the new component.

The OPC includes two modules that focus on adverse events associated with surgical procedures performed in Ambulatory Surgery Centers (ASCs). The two modules are:

- Same Day Outcome Measures (OPC-SDOM) are a grouping of outpatient care quality indicators that represent a broad range of risks encountered by patients accessing care in various outpatient settings. The four individual outcome measures are:
  - Patient Burn
  - Patient Fall
  - Wrong Site, Wrong Side, Wrong Patient, Wrong Procedure, Wrong Implant
  - All-Cause Hospital Transfer/Admission
- Surgical Site Infection (OPC-SSI) - SSI surveillance for outpatient operative procedures using the Outpatient Procedure Component (OPC) replaces the use of the Patient Safety Component SSI event chapter for ASCs.

The ASC webpage found at **https://www.cdc.gov/nhsn/ambulatory-surgery/index.html** contains the OPC protocols, data collection forms and Tables of Instructions for each module. Training courses are available for both measures on the NHSN Training website page under the last section of the page, which is titled "Outpatient Procedure Component". Click the link below to get started!

https://www.cdc.gov/nhsn/training/continuing-edu/cbts.html

If you have any questions about training please send an email to **NHSNTrain@cdc.gov**. Please contact NHSN@cdc.gov with any other questions about the Outpatient Procedure Component.

RELEASE OF PEDIATRIC VENTILATOR-ASSOCIATED EVENT PROTOCOL AND TABLES OF INSTRUCTIONS

Attached please the protocol and Tables of Instructions for the new NHSN Pediatric Ventilator-associated Event. Starting January 1, 2019, surveillance for this type of event may be performed in neonatal and pediatric locations in acute care hospitals, long term acute care hospitals, and inpatient rehabilitation facilities where denominator data (ventilator and patient days) can be collected for patients. Such locations may include critical/intensive care units (ICU), specialty care areas (SCA), step-down units and wards.

There are some differences between performing Adult VAE surveillance and Pediatric VAE surveillance, so please be sure to review the documents. Please also note that the links embedded within the protocol will direct users to the current 2018 protocols as opposed to the 2019 versions. The links will automatically direct users to the 2019 protocols once those are updated on the NHSN site (expected around December 1, 2018).

PedVAE data collection forms for 2019 are still in the Centers for Disease Control and Prevention's approval process and will be posted to the website on or around January 1st for your use. You will receive an email when posted. The pedVAE website is under construction and you will receive an email when that site is live. In the meantime, please use the attached documents as needed to prepare.

Please send questions or comments regarding any information contained in this email or its attachments to NHSN@cdc.gov

Thank you!

The NHSN Team

Subject: CMS Q2 Reporting Deadline Reminder
Originally sent October 30, 2018:

Attention Acute Care Hospitals, Cancer Hospitals, Inpatient Rehabilitation Facilities, Long-term Acute Care Facilities (Long-term Care Hospitals)

This email contains reporting deadline reminders for the CMS Quality Reporting Programs. The National Healthcare Safety Network (NHSN) encourages facilities to enter data in timely manner ahead of the prescribed deadlines in order to ensure data completion and accuracy.

Make sure to allow ample time before the deadline to review, and if necessary, correct your HAI data. Data that are modified in NHSN after the submission deadline are not sent to CMS and will not be used in CMS pay-for-reporting or pay-for-performance programs. Data can be reviewed by using the Analysis reports within NHSN. For questions about how to access or interpret the analysis reports, please email nhsn@cdc.gov.

If you are unable to enter data into NHSN, it is possible that your Facility Administrator or Patient Safety Primary Contact has not accepted the updated NHSN Agreement to Participate and Consent. For questions or assistance with the updated Consent form and/or reassignment of the Facility Administrator or Primary Contact, please contact nhsn@cdc.gov as soon as possible

Acute Care Hospitals

Acute Care Hospitals that take part in the CMS Hospital Inpatient Quality Reporting (IQR) Program must report the following data into NHSN by the upcoming November 15, 2018 reporting deadline:

Q2 2018 Quarter 2 (April 1 – June 30): CLABSI and CAUTI data

- Adult and pediatric ICU locations
- Neonatal ICU locations (CLABSI only)
- Adult and pediatric medical, surgical, and medical/surgical wards

Q2 2018 Quarter 2 (April 1 – June 30) Inpatient COLO and HYST SSI data

Q2 2018 Quarter 2 (April 1 – June 30) MRSA Bacteremia and *C. difficile* LabID Events (FacWideIN, all healthcare-onset and community-onset)

- Emergency department and 24-hour observation locations

Inpatient Rehabilitation Facilities (IRFs) (including both free-standing hospitals and IRFs located within affiliated acute care/critical access hospitals)

Inpatient Rehabilitation Facilities that take part in the CMS IRF Quality Reporting Program must report the following data into NHSN by the upcoming November 15, 2018 reporting deadline:

Q2 2018 Quarter 2 (April 1 – June 30) CAUTI data (all bedded inpatient locations)

Q2 2018 Quarter 2 (April 1 – June 30) MRSA Bacteremia and *C. difficile* LabID Events (all healthcare-onset and community-onset)

- Freestanding IRFs: Reporting by FacWideIN
- IRF units within acute care or critical access hospitals: Reporting by each CMS IRF unit

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Long-Term Acute Care Facilities (LTACs/LTCHs)

Long-Term Acute Care Facilities that participate in the CMS LTCH Quality Reporting Program must report the following data into NHSN by the upcoming November 15, 2018 reporting deadline:

Q2 2018 Quarter 2 (April 1 – June 30) CLABSI and CAUTI data (all bedded inpatient locations)

Q2 2018 Quarter 2 (April 1 – June 30) MRSA Bacteremia and *C. difficile* LabID Events (FacWideIN, all healthcare-onset and community-onset)

Q2 2018 (April 1 – June 30) VAE data (all bedded inpatient locations)

Cancer Hospitals

Cancer Hospitals that participate in the PPS-Exempt Cancer Hospital Quality Reporting Program must report the following data into NHSN by the upcoming November 15, 2018 reporting deadline:

Q2 2018 Quarter 2 (April 1 – June 30) CLABSI and CAUTI data (all bedded inpatient care locations)

Q2 2018 Quarter 2 (April 1 – June 30) Inpatient COLO and HYST SSI data

Q2 2018 Quarter 2 (April 1 – June 30) MRSA Bacteremia and *C. difficile* LabID Events (FacWideIN, all healthcare onset and community onset)

Please make sure at least one individual at your facility can access NHSN via SAMS and has been assigned appropriate user rights in NHSN so they August enter and view the facility's data. To ensure your data have been correctly entered into NHSN, please make sure to verify that your monthly reporting plans are complete, you've entered appropriate summary and event data, and you've cleared all alerts from your NHSN facility homepage. For additional guidance on ensuring your data are accurately sent to CMS for Quality Reporting purposes, please visit our website and navigate to the appropriate section(s) for your facility type: **http://www.cdc.gov/nhsn/cms/index.html**.

If you have any questions, please contact the NHSN Helpdesk: NHSN@cdc.gov. The NHSN Helpdesk is staffed Mondays thru Fridays, 7am ET – 5pm ET, excluding Federal Holidays.

National Center for Emerging and Zoonotic Infectious Diseases
Division of Healthcare Quality Promotion