

NATIONAL HEALTHCARE SAFETY NETWORK FACILITY TAP REPORTS - CDI

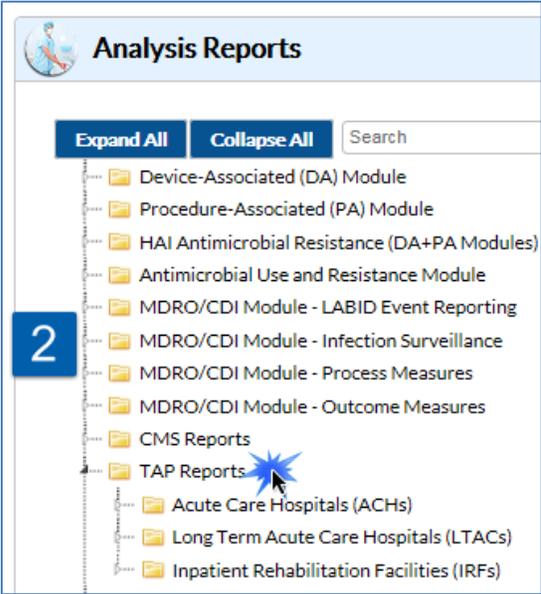
Description

CDC’s Targeted Assessment for Prevention (TAP) strategy allows for the ranking of facilities and/or locations to identify and target those areas with the greatest need for improvement using a metric known as the Cumulative Attributable Difference (CAD). This is the number of infections that must be prevented to achieve a HAI reduction goal. TAP Reports can be generated within NHSN for CLABSI, CAUTI, and CDI LabID data. The ranking is established using the overall Hospital CAD (highest to lowest). TAP Reports can help to prioritize the facilities where the greatest prevention impact could be achieved.

This quick reference guide will describe how a facility can generate a TAP report for CDI LabID data within NHSN. It will also explain how to interpret the TAP report output for facility users. For more information about the TAP Strategy, please visit: <http://www.cdc.gov/hai/prevent/tap.html>.

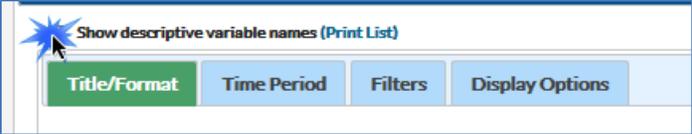
Generate a CDI TAP Report

1. Select Analysis on the NHSN home screen. Then select “Reports” (formerly known as Output Options) from the dropdown menu that opens. Expand the “TAP Reports” folder. The TAP reports are organized by facility type. Expand the folder for the facility type relevant to your analysis to see the available TAP Report options.



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2. Choose to either Run or Modify an Acute Care Hospitals (ACH), Long Term Acute Care Hospitals (LTACs), or Inpatient Rehabilitation Facilities (IRFs) FACWIDEIN CDI LabID TAP Report. Please note: ACH TAP Reports contain both Acute Care and Critical Access Hospital (CAH) data, and exclude IRF unit data.
 - a. Click Run to create a TAP Report that is inclusive of all data reported to NHSN and available in the analysis datasets (e.g., all CDI LabID data from 2015 to present).
 - b. Click Modify to customize the TAP Report.
 - i. It is recommended that users check the box above Title/Format titled “Show descriptive variable names”. Not only will this show more descriptive variable names while modifying a TAP report, it will also create more descriptive column headers in the tables created.



- ii. Use the Title/Format tab to change the name of the Report generated or to change the format (HTML, PDF, CSV, and RTF). TIP: If the format is changed to PDF or RTF, change the orientation of the report to Landscape in order to allow all columns to fit on a single page.
- iii. Use the Time Period tab to modify the date variable by months, quarters, half-years, or year (e.g., summaryYr 2015 to 2016).
- iv. Display Options. Choose the source value of the SIR goal. The SIR goal can be a custom/value or the user can use the HHS Goal or CDI National SIR. These are available in the source drop down menu. If a custom value is used, remember that the multiplier must be <1.

Example TAP Report Output – CDI

The following table is an example of a CLABSI TAP report generated by an acute care hospital for the calendar year 2016. The footnotes provided with each table define the data that appear in the derived columns. Please see page 3 for an example interpretation of this table.

National Healthcare Safety Network
TAP Report for FACWIDEIN CDI LabID data for Acute Care and Critical Access Hospitals (2015 Baseline)
Facilities Ranked by CAD 'Cumulative Attributable Difference'
SIR Goal: HHS Goal = 0.7
 As of February 16, 2017 at 2:00 PM
 Date Range: BS2_CDL_TAP summaryYr2016 to 2016



Facility Org ID	Facility Name	State	Type of Facility	Type of Affiliation	Number of Beds	Patient Days	COHCFA Prevalence	CDIF Facility Incident HO LabID Event Count	CDIF Facility Incident HO LabID Number Expected	Facility CAD	SIR	SIR Test
10000	DHQP Memorial Hospital	GA	HOSP-GEN	M	354	60059	0.14	61	55.034	22.48	1.108	

SIR is set to '.' when expected number of events is <1.0.
 Facility Rank = Priority ranking for Targeted Assessment of Prevention by CAD in descending order
 COHCFA PREVALENCE RATE = Community-onset healthcare facility-associated CDI prevalence rate per 100 admissions
 CAD = Observed - Expected*SELECTED CAD MULTIPLIER
 SIR TEST = 'SIG' means SIR > SIR Goal significantly
 Data contained in this report were last generated on February 16, 2017 at 12:22 PM.



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Interpretation

- The header above each table describes what information has been included in the table. The second line of the header is a descriptive title for the table. The title names which hospital types are included in the report and what baselines data sets are used for the analysis. The third line of the header describes how the data has been arranged (i.e., Facilities Ranked by CAD). The fourth line displays the value for the SIR goal. For the TAP report in this example, HHS Goal = 0.7 was used as the SIR goal. Lastly, the final line of the header helps users find out more about the CDC TAP Strategy. For more information about the TAP strategy, please visit: <https://www.cdc.gov/hai/prevent/tap.html>.
- The footnote for each table includes the rules for interpreting the data, meanings for abbreviation used in the table, pathogen names, and the date that the table was created. For example, footnote #5 states, “The SIR is set to ‘.’ when predicted number of events is <1.0.” This would be helpful to know if an SIR value is not given in the table. Additionally, the formula for calculating the CAD can also be found in the footnotes.
- Since CDI data are collected and analyzed at the inpatient, facility wide level, location specific information is not displayed in the table. Looking at the third to last column in the TAP report, we can see that this facility’s CAD is 22.48 – this means that the facility had approximately 23 excess infection when compared to the number of infections that were predicted, when using an SIR Goal of 0.7.

Addition Resources:

- The Five “W”s of the Targeted Assessment for Prevention (TAP) Strategy:
<http://www.cdc.gov/hai/prevent/tap.html>
- Introduction to NHSN Analysis:
<http://www.cdc.gov/nhsn/PDFs/training/intro-AnalysisBasics-PSC.pdf>
- How to filter your data by time period:
<http://www.cdc.gov/nhsn/PS-Analysis-resources/PDF/FilterTimePeriod.pdf>
- How to filter your data on additional criteria:
<http://www.cdc.gov/nhsn/PS-Analysis-resources/PDF/SelectionCriteria.pdf>
- Analysis Quick Reference Guides:
<http://www.cdc.gov/nhsn/PS-Analysis-resources/reference-guides.html>
- HHS Action Plan to Prevent Healthcare-associated Infections: <http://health.gov/hcq/prevent-hai.asp>
- HAI Progress Report: http://www.cdc.gov/hai/surveillance/nhsn_nationalreports.html

