

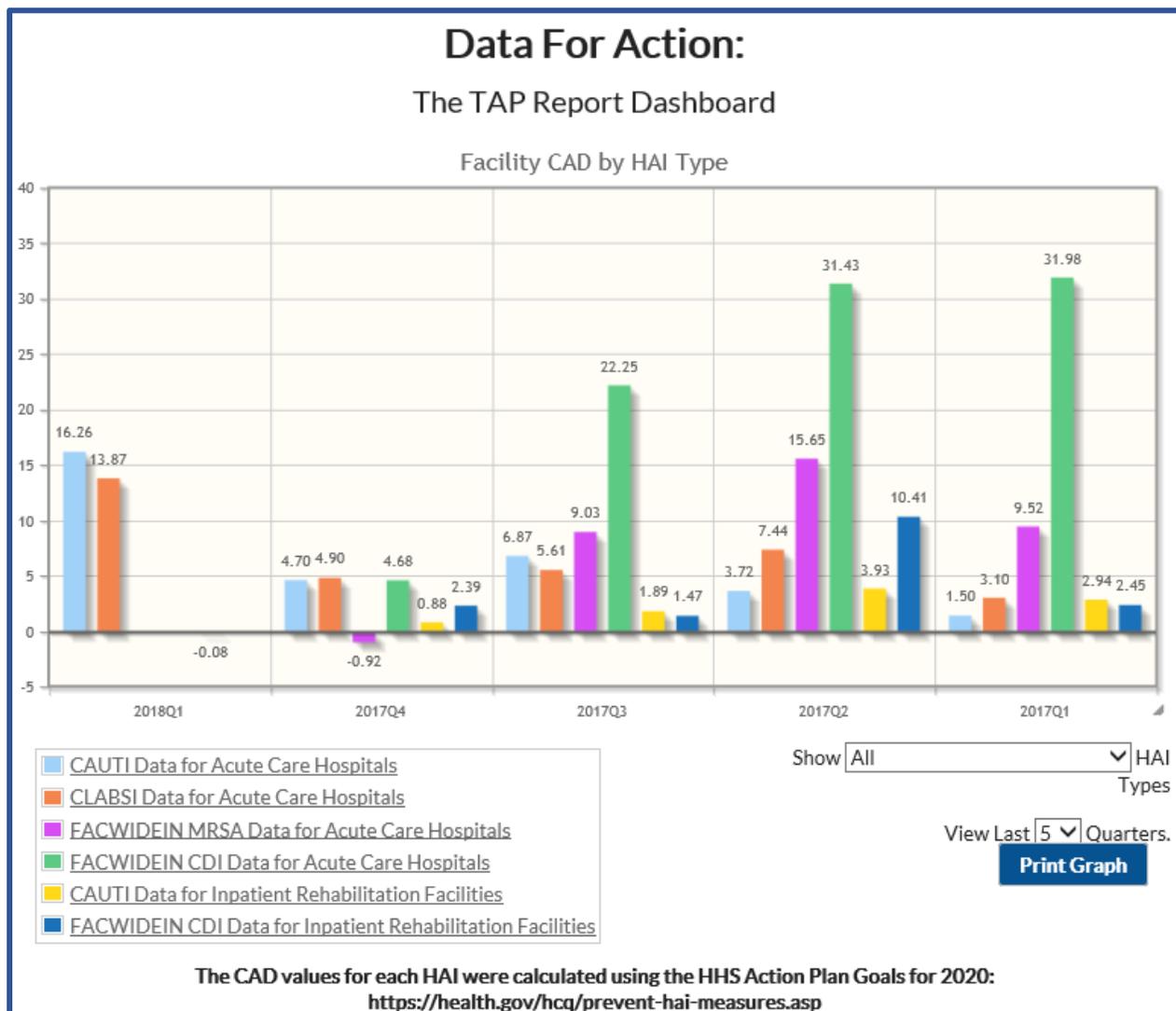
NATIONAL HEALTHCARE SAFETY NETWORK TAP DASHBOARD REPORT QUICK REFERENCE GUIDE



Description

CDC's Targeted Assessment for Prevention (TAP) Strategy allows a facility to identify and target locations with the greatest need for improvement using a metric that tracks excess infections. The first step of the TAP strategy is to create a TAP Report. TAP Reports use a metric known as the Cumulative Attributable Difference (CAD) to help a facility prioritize the locations where the greatest prevention impact could be achieved. CAD is the number of infections that must be prevented to achieve an HAI reduction goal. TAP Reports can be generated within NHSN for CLABSI, CAUTI, MRSA, and CDI LabID data. The TAP Dashboard, located on the NHSN Patient Safety Component Home Page, gives facility users an opportunity to view and access their TAP Report data via an interactive chart display. Additionally, the dashboard serves as an access point for creating TAP Reports and generating new datasets. This guide will help users understand how to use and interpret the TAP Dashboard.

TAP Dashboard Report



NATIONAL HEALTHCARE SAFETY NETWORK TAP DASHBOARD REPORT QUICK REFERENCE GUIDE



Generate TAP Dashboard Report

Select “TAP Strategy Dashboard” on the NHSN Patient Safety Component Home Page to view the TAP Dashboard. Before beginning analysis within NHSN, it is recommended that users generate new datasets. Users have the ability to generate new datasets from the TAP dashboard screen using the “Update” button. The date to the right of the “Update” button indicates the last time datasets have been updated. Click “Update” to generate new datasets.

NHSN Patient Safety Component Home Page

- ▶ **TAP Strategy Dashboard** ← TAP Dashboards can be accessed by clicking on the “TAP Strategy Dashboard” Tab
- ▼ **Action Items**

COMPLETE THESE ITEMS

ALERTS

44 Missing Events	24 Incomplete Summary Items	20 Missing Summary Items
----------------------	--------------------------------	-----------------------------

TAP Strategy Dashboard

Update Apr 17 2018 3:53PM

Select “Update” to be prompted to generate datasets

Generate Patient Safety Analysis Data Sets

Datasets generated will include data for the 3 most recent full calendar years up until today's date for the Patient Safety Component. To include all years check the box below.

For all other components, datasets generated will include all years. Note that any analysis options you run will be limited to the time period shown on the date range bar.

Include all data reported to NHSN for this component within the parameters of rights conferred.

1/2017 - 4/2018

Generate New Last Generated: Apr 17 2018 3:53PM

Close

CLABS Data for Acute Care Hospitals
EACWIDEN MBSA Data for Acute Care Hospitals
EACWIDEN CDI Data for Acute Care Hospitals

View Last 15 Quarters
Print Graph

2.39	9.29	31.49
------	------	-------

The CAD values for each HAI were calculated using the HHS Action Plan Goals for 2020.

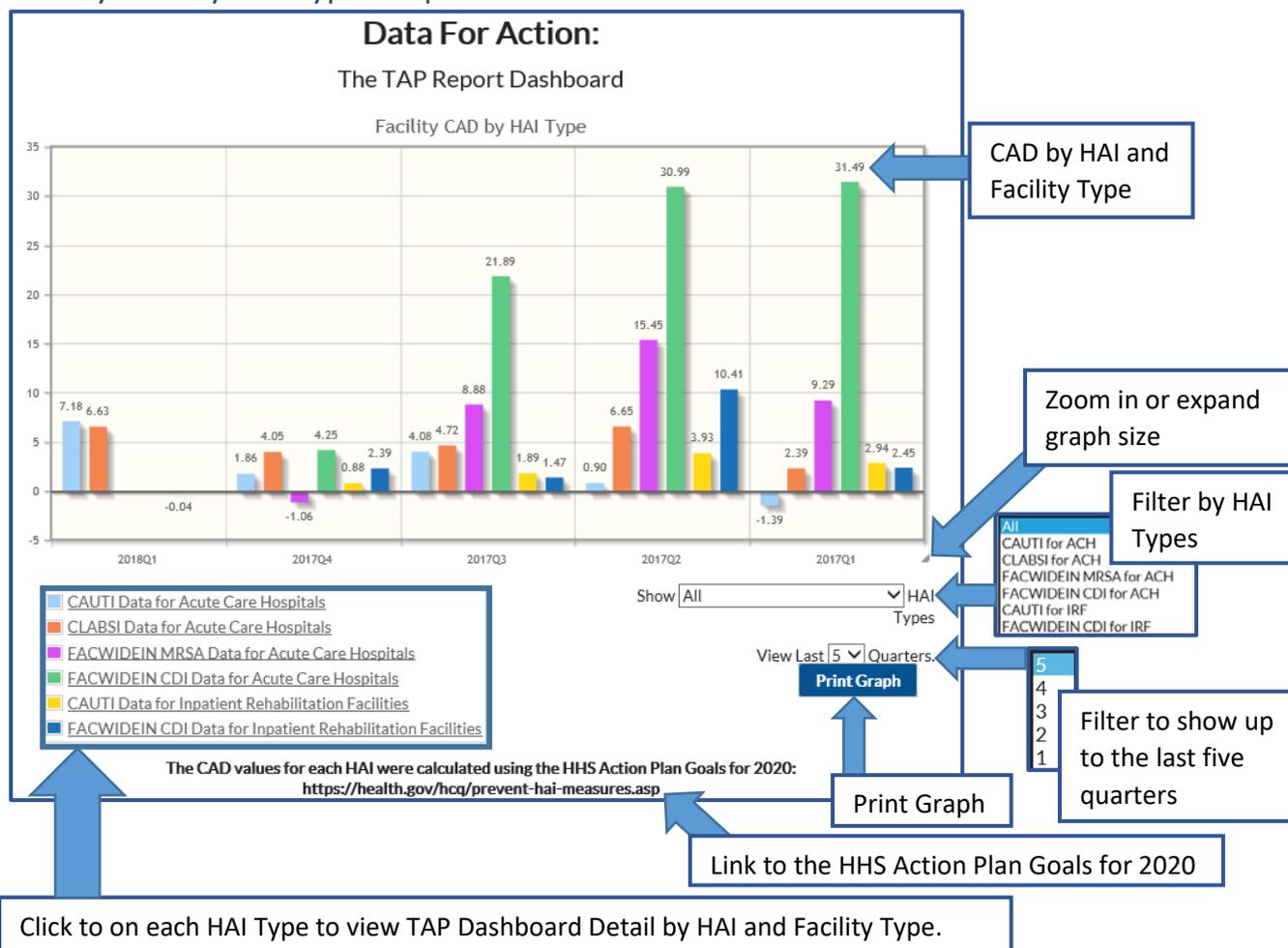
NATIONAL HEALTHCARE SAFETY NETWORK TAP DASHBOARD REPORT QUICK REFERENCE GUIDE



Example of TAP Dashboard Report Output

The following graph describes the facility level CADs by HAI and facility type. The CADs were calculated using the 2020 HHS Action plan goals. The legend includes HAI specific links that when selected, for CAUTI or CLABSI, open an additional location table ranked by CAD. The headers above each graph describe what information has been included in the table. The second line of the header describes the HAI and facility type included in the report.

Facility CAD by HAI Type Graph

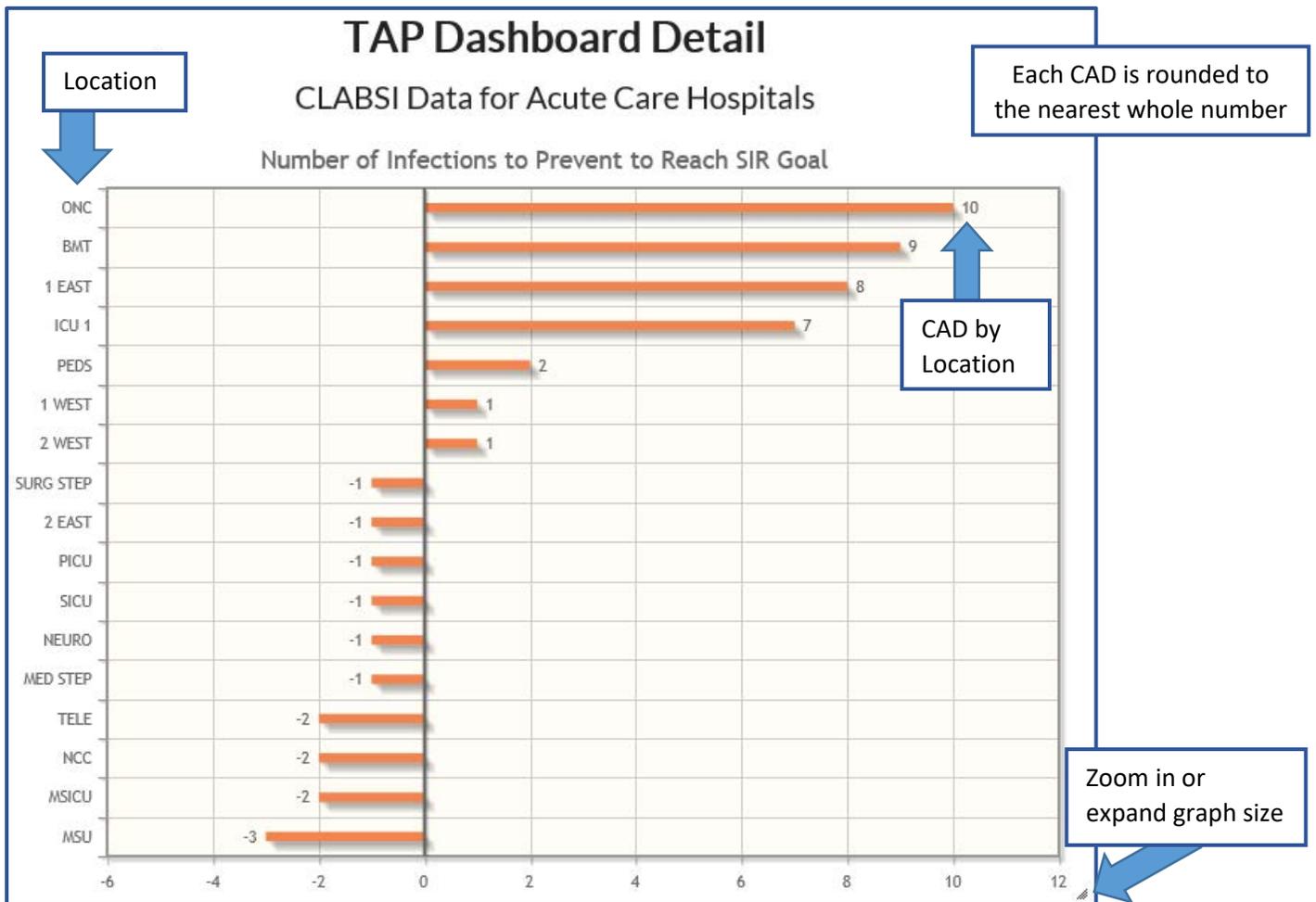


The **Facility CAD by HAI Type Graph (above)** describes the Cumulative Attribute Difference (CAD) by HAI and facility type. The y-axis describes the CAD value, while the x-axis represents time period and can be filtered by quarter. The CAD values are calculated for each HAI using the HHS Action Plan Goals for 2020. Each bar in the graph is represented by a color. At the top of each bar is the CAD rounded to the nearest hundredth decimal point. The legend directly below the graph links to a detailed view of the data included in the graph. Additionally, the graph can be filtered by HAI Type and quarter using the available dropdown menus. The graph can be expanded in size and printed.

NATIONAL HEALTHCARE SAFETY NETWORK TAP DASHBOARD REPORT QUICK REFERENCE GUIDE



TAP Dashboard Detail View: HAI specific CAD by Location Type Graph



The **TAP Dashboard Detail graph (above)** describes the CAD by location type for a specific HAI. The y-axis shows the facility's location while the x-axis shows the range of the CAD values from negative to positive. In this graph, CAD represents the number of infections that would need to be prevented to reach the SIR goal (the HHS Action Plan Goal for 2020). As such, the CAD is rounded up to the nearest whole number and is located to the right or left of each bar in the graph depending on whether the CAD is negative or positive. A negative CAD should be interpreted as fewer infections than predicted given the HHS action plan goal. A positive CAD is indicative of an additional burden of infection for the location. The CAD helps a facility determine a tangible prevention goal for preventing more of its observed infections. The graph can be expanded in size and printed.

NATIONAL HEALTHCARE SAFETY NETWORK TAP DASHBOARD REPORT QUICK REFERENCE GUIDE



TAP Dashboard Detail View: CAD by Location Type Detailed Data Table

Location Rank ↑	Location	Location Type	Infection Count	Location CAD	Organisms
1	ONC	WARD+	13		13 (0, 0, 0, 0, 1, 4)
2	BMT	WARD+	10		10 (1, 0, 1, 0, 0, 2)
3	1 EAST	WARD+	10		11 (0, 2, 0, 0, 0, 5)
4	ICU 1	ICU	10		10 (0, 1, 0, 0, 1, 2)
5	PEDS	WARD+	2		2 (0, 0, 0, 0, 0, 0)
6	1 WEST	WARD+	2		2 (0, 1, 1, 0, 0, 0)
7	2 WEST	WARD+	2		2 (0, 0, 1, 0, 0, 0)
8	SURG STEP	WARD+	1		2 (0, 0, 0, 0, 0, 2)
9	2 EAST	WARD+	1		1 (0, 0, 0, 0, 0, 1)
10	PICU	ICU	1		1 (0, 0, 0, 0, 0, 0)
11	SICU	ICU	4		4 (0, 0, 0, 0, 0, 1)
12	NEURO	WARD+	0		
13	MED STEP	WARD+	0		
14	TELE	WARD+	0		
15	NCC	ICU	1		1 (0, 0, 0, 0, 0, 0)
16	MSICU	ICU	0		
17	MSU	WARD+	0		

Page 1 of 1 17 record(s) found

* This table and visualization are a summary year depiction of the available data. For further analysis, use the [Analysis TAP Reports](#).

[More Info](#)

Data are ranked by Location CAD

Selecting "More Info" reveals informative footnotes.

Direct link to TAP Reports

More Info

1. This report includes CLABSI data for 2015 and forward. Following the 2015 rebaseline, Mucosal Barrier Injury Laboratory-Confirmed Bloodstream Infections (MBI-LCBI) are excluded from CLABSI rates, SIRs and TAP reports.
2. If location-level CADs are the same in a given facility, their ranks are tied.
3. (CNS,YS,SA,ES,KS,EC) = No. of CNS, Yeast (both candida and non-candida species), Staph aureus, Enterococcus species, K. pneumoniae/K. oxytoca, E. coli
4. SIR is set to '.' when predicted number of events is <1.0.
5. LOCATION CAD = (OBSERVED_LOCATION - PREDICTED_LOCATION* SELECTED SIR Goal)
6. SIR TEST = 'SIG' means SIR > SIR Goal significantly

Source of aggregate data: 2015 NHSN CLABSI Data

The **CAD by Location Detailed Data Table (above)** is available for CLABSI and CAUTI CADs. It shows (from left to right) the location ranking, location, location type, and location CAD. The last column identifies the organisms within the location that are also one of the six most common pathogens identified within NHSN for that particular HAI. The footnotes for the location table can be accessed by selecting the "More Info" link below the table. The footnotes describe the data presented in the table and provides helpful information for interpreting it. For example, footnote #1 states the source of the data, the time period, and exclusions when present. Footnote #2 explains that if location-level CADs are the same, the ranking will be the same as well. Footnote #3 lists the names of the 6 most common pathogens found in the organism list (specific to HAI type). Footnote #4 indicates that the SIR will not be calculated if the number of predicted events is less than 1. Footnote #5 shows the equation for calculating CAD.

NATIONAL HEALTHCARE SAFETY NETWORK TAP DASHBOARD REPORT QUICK REFERENCE GUIDE



Additional Resources:

- TAP Training – NHSN Data Entry and Analysis:
<https://www.cdc.gov/nhsn/training/analysis/index.html>
- The Five “W”s of the Targeted Assessment for Prevention (TAP) Strategy:
<https://www.cdc.gov/hai/prevent/tap.html>
- Analysis Quick Reference Guides:
<https://www.cdc.gov/nhsn/PS-Analysis-resources/reference-guides.html>
- NHSN Patient Safety Component Data Entry:
<https://www.cdc.gov/nhsn/pdfs/training/general/PS-Data-Entry.pdf>
- 2020 HHS Action Plan:
<https://health.gov/hcq/prevent-hai.asp>
- HAI Progress Report:
<https://www.cdc.gov/hai/surveillance/progress-report/previous-reports.html>
- TAP Quick Learn:
<https://www.youtube.com/watch?v=nIpUxxCOX94&feature=youtu.be>