

Tracking Infections in Long-term Care Facilities (LTCFs) Using NHSN

Angela Anttila, PhD, MSN, NP-C, CIC
February 29, 2016

Learning Objectives



- ❑ Review the purpose of surveillance
- ❑ Define the National Healthcare Safety Network (NHSN) and the different Components and Modules available for Long-term Care Facilities
- ❑ Describe how NHSN supports long-term care facilities (LTCFs) and infection surveillance activities
- ❑ Discuss how to get started using NHSN

Introducing the NHSN LTCF Team

- ❑ LTC subject matter expert
 - ❑ **Nimalie Stone**
- ❑ NHSN LTCF protocol, surveillance, clinical support
 - ❑ **Angela Anttila**
- ❑ NHSN LTCF analysis support
 - ❑ **Elisabeth Mungai**
- ❑ NHSN group function support
 - ❑ **Lea Bargaen**
- ❑ NHSN general support for non-clinical and non-protocol questions
 - ❑ **Theresa Marrow and NHSN user support team**



All e-mail Inquiries should be sent to nhsn@cdc.gov for triage and delegation

Exploring the Value of Surveillance

❑ What is surveillance?

- The ongoing, systematic collection, analysis and interpretation of health data

❑ Why do we need surveillance data?

- Used to identify emerging and changing trends
- Essential to the planning, implementation, and evaluation of practice

❑ How can we get the most from our surveillance data?

- Well organized data collection and analysis can identify problems, the people affected, and how to best direct your prevention resources
- Sharing data with others can raise awareness and motivate change

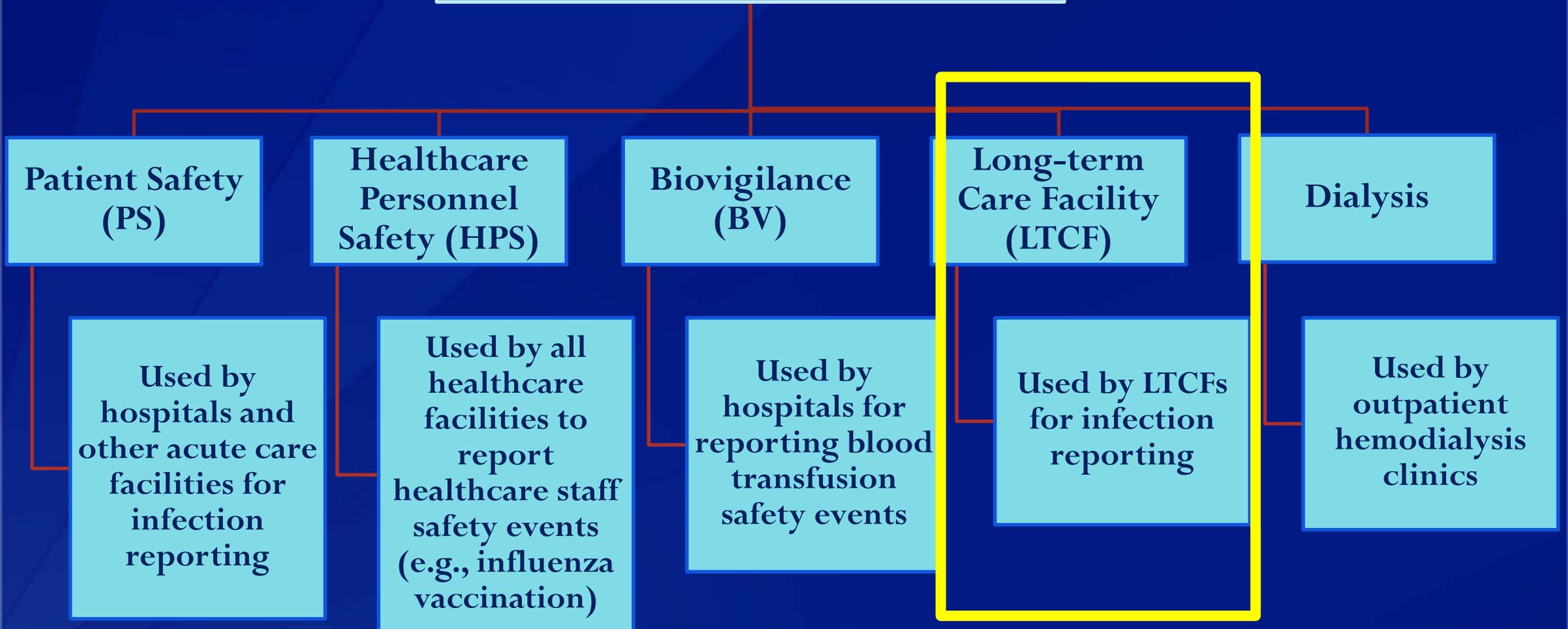


Benefits of NHSN Surveillance: Data for Action



- ❑ Standardizes and validates surveillance definitions used by all participating in the system
- ❑ Provides data to inform internal quality improvement
- ❑ Provides comparisons of infection data with adjustments for facility and/or resident characteristics
- ❑ Provides national benchmarks to assess performance in local and national prevention efforts
- ❑ Demonstrates trends in improvements and/or areas of opportunity for each infection reported in the system

NHSN Components



Which NHSN Components are Available for LTCFs?

❑ LTCFs can enroll and report in the following:

1. Long-term Care Facility Component

❑ To track resident infections

❑ To track staff adherence with hand hygiene and gown/glove use

2. Healthcare Personnel Safety Component

❑ To track staff influenza vaccination

❑ For more information about Healthcare Personnel Safety:

<http://www.cdc.gov/nhsn/hps.html>



Long-term Care Facility Component

Healthcare-associated
Infections (HAI)

Urinary Tract
Infections (UTI)

Laboratory-Identified
(LabID) Event

Multi-drug Resistant
Organisms (MDRO)

Clostridium difficile
Infection (CDI)

Prevention Process
Measures

Hand Hygiene

Gowns/Gloves

Which Facilities are Eligible for Enrolling in NHSN LTCF Component?

- ❑ Certified skilled nursing facilities and nursing homes
- ❑ Intermediate/chronic care facilities for the developmentally disabled
- ❑ Assisted living facilities and residential care facilities
 - Currently limited to Prevention Process Measures



Getting Started in NHSN

- ✓ Obtain support from the organization's leadership to participate in NHSN
- ✓ Identify the "NHSN Facility Administrator" – *the primary point of contact between your facility and NHSN*
- ✓ Ensure computer/internet access for the NHSN facility administrator and any other users
- ✓ Each NHSN user must have a current email address
- ✓ Review the enrollment training slides and materials on the NHSN LTCF website

Before you can begin reporting into NHSN....

- ✓ Register your Long-term Care Facility with NHSN
- ✓ Register yourself with Secure Access Management Services (SAMS) and receive Grid card
- ✓ Complete NHSN enrollment to receive NHSN approval to use the application

Getting Started in NHSN

After Receiving NHSN Access

After you've received SAMS access and NHSN approval, you can log-into the application.....

- ✓ Set-up your facility by adding each facility units/location into the NHSN application
- ✓ Add additional users to the NHSN application, *if applicable*
- ✓ Complete the NHSN Monthly Reporting Plan (MRP) for each month facility will report data
- ✓ Each month, identify and enter all HAI (UTI), LabID events, and/or prevention process measures into NHSN. *This step is dependent on which modules your facility is participating*
- ✓ Enter the applicable denominator data for each month surveillance is performed
- ✓ Resolve "Alerts", *if applicable*

General Requirements for LTCFs Using NHSN

- ✓ The current NHSN LTCF protocols must be followed exactly.
- ✓ Selected LabID Event and HAI surveillance must be performed for all locations within the facility. This is referred to as facility-wide inpatient (FacWideIN).
- ✓ Facilities must indicate which module(s) will be followed in the *Monthly Reporting Plan (MRP)* for each month the facility will conduct surveillance.
- ✓ In addition to reporting numerators (LabID events, UTIs) for each location in the facility, facilities must also report aggregate denominator data for each month.
- ✓ Each year, the Long-term Care Facility Component *Annual Facility Survey* must be completed in the NHSN application.
- ✓ Surveillance must be reported for at least 6 consecutive months to provide meaningful measures.

Monthly Reporting Plan

- ❑ The Monthly Reporting Plan informs CDC-NHSN which modules a facility is following during a given month
 - A plan must be in place before events can be entered into NHSN
- ❑ A facility must enter a Plan for every month of the year
- ❑ Plans can be modified retrospectively
- ❑ Plans can be entered for up to one year in advance



Monthly Reporting Plan Options

1. Choose specific plan(s): HAI Module, LabID Event Module, and/or Prevention Process Measure Module
2. Select “No Long Term Care Facility Component Modules Followed this Month” if facility will not be following any NHSN modules for the month.

NHSN Home

Reporting Plan

- Add
- Find

Event

Summary Data

Surveys

Users

Group

Log Out

Add Monthly Reporting Plan

Mandatory fields marked with *

Facility ID*: 5088Redbanks Nursing Home (ID 34838) ▼

Month*: ▼

Year*: ▼

X No Long Term Care Facility Component Modules Followed this Month

HAI Module

Locations	UTI
Facility-wide Inpatient (FacWIDEIn) ▼	<input type="checkbox"/>

LabID Event Module

Locations	Specific Organism Type	Lab ID Event All Specimens
Facility-wide Inpatient (FacWIDEIn) ▼	▼	<input type="checkbox"/>

Add Row Clear All Rows Copy from Previous Month

Prevention Process Measure Module

Locations	Hand Hygiene	Gown and Gloves Use
Facility-wide Inpatient (FacWIDEIn) ▼	<input type="checkbox"/>	<input type="checkbox"/>

Copy from Previous Month

Save Back

NHSN Annual Survey

- ❑ Survey must be completed at the beginning of every year
- ❑ Survey year represents the last full calendar year
- ❑ Variables in the annual survey may be used for risk adjustment of data
- ❑ NHSN forms and complete instructions available to user

Form Approved
 OMB No. 0920-0666
 Exp. Date: 12/31/2018
 www.cdc.gov/nhsn



Long Term Care Facility Component—Annual Facility Survey

Page 1 of 4

<i>*required for saving</i>	Tracking #:
Facility ID:	<i>*Survey Year:</i>
<i>*National Provider ID:</i>	State Provider #:

Facility Characteristics

**Ownership (check one):*
 For profit Not for profit, including church Government (not VA) Veterans Affairs

**Certification (check one):*
 Dual Medicare/Medicaid Medicare only Medicaid only State only

**Affiliation (check one):* Independent, free-standing Independent, continuing care retirement community
 Multi-facility organization (chain) Hospital system, attached Hospital system, free-standing

In the previous calendar year:
**Average daily census:* _____

**Total number of short-stay residents:* _____ *Average length of stay for short-stay residents:* _____
**Total number of long-stay residents:* _____ *Average length of stay for long-stay residents:* _____

**Total number of new admissions:* _____

**Number of Beds:* _____ **Number of Pediatric Beds (age <21):* _____

**Indicate which of the following primary service types are provided by your facility. On the day of this survey, indicate the number of residents receiving those services (list only one service type per resident, i.e. total should sum to resident census on day of survey completion):*

Primary Service Type	Service provided?	Number of residents
a. Long-term general nursing:	<input type="checkbox"/>	_____
b. Long-term dementia:	<input type="checkbox"/>	_____
c. Skilled nursing/Short-term (subacute) rehabilitation:	<input type="checkbox"/>	_____
d. Long-term psychiatric (non dementia):	<input type="checkbox"/>	_____
e. Ventilator:	<input type="checkbox"/>	_____
f. Bariatric:	<input type="checkbox"/>	_____
g. Hospice/Palliative:	<input type="checkbox"/>	_____

HEALTHCARE ASSOCIATED INFECTION (HAI) MODULE
Urinary Tract Infections (UTI)

Background



- ❑ *Why monitor urinary tract infections (UTIs) in long-term care facilities?*
 - UTIs are the most frequently reported infections in nursing homes and drive antibiotic use among residents.
 - Focused monitoring of symptomatic UTIs, both catheter and non-catheter associated, helps identify trends in these infections and provide data to improve antibiotic use in the LTCF.
 - Tracking these events will also inform infection prevention and control staff of the impact of targeted prevention efforts.



CHICAGO JOURNALS



Surveillance Definitions of Infections in Long-Term Care Facilities: Revisiting the McGeer Criteria

Author(s): Nimalie D. Stone, MD; Muhammad S. Ashraf, MD; Jennifer Calder, PhD; Christopher J. Crnich, MD; Kent Crossley, MD; Paul J. Drinka, MD; Carolyn V. Gould, MD; Manisha Juthani-Mehta, MD; Ebbing Lautenbach, MD; Mark Loeb, MD; Taranisia MacCannell, PhD; Preeti N. Malani, MD; Lona Mody, MD; Joseph M. Mylotte, MD; Lindsay E. Nicolle, MD; Mary-Claire Roghmann, MD; Steven J. Schweon, MSN; Andrew E. Simor, MD; Philip W. Smith, MD; K ...

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UTI Protocol Updates for 2016



- ❑ Presence of a fever, even if due to another cause, should still be counted as part of meeting a UTI definition. This change to the protocol is being made to remove subjectivity about whether a fever is attributable to a UTI event.
- ❑ Yeast and other microorganisms, which are not bacteria, will no longer be accepted as UTI pathogens.

What These Changes Mean for LTCFs Reporting UTIs into NHSN in 2016

- Fever can be used to meet SUTI criteria even if the resident has another possible cause for the fever (e.g., pneumonia).
- Only urine cultures meeting the colony count requirement for at least one bacteria will be used to meet NHSN UTI criteria.

Replace Figure 1 in the Resource Manual



Figure 1: Criteria for Defining UTI Events in NHSN LTCF Component.

Resident with an indwelling catheter: CA-SUTI – Criteria

ONE or more of the following:

- Fever^{† a}
- Rigors
- New onset hypotension, with no alternate noninfectious cause
- New onset confusion/functional decline AND Leukocytosis^b
- New costovertebral angle pain or tenderness
- New or marked increase in suprapubic tenderness
- Acute pain, swelling or tenderness of the testes, epididymis or prostate
- Purulent discharge from around the catheter

AND

Any of the following:

If urinary catheter removed within last 2 calendar days:

1. Specimen collected from clean catch voided urine and positive culture with no more than 2 species of microorganisms, at least one of which is bacteria of $\geq 10^5$ CFU/ml
2. Specimen collected from in/out straight catheter and positive culture with any microorganism, at least one of which is bacteria of $\geq 10^2$ CFU/ml

If urinary catheter in place:

3. Specimen collected from indwelling catheter^c and positive culture with any microorganism, at least one of which is bacteria of $\geq 10^5$ CFU/ml

NOTE: Yeast and other microorganisms, which are not bacteria, are not acceptable UTI pathogens

CA-SUTI

[†]Fever can be used to meet SUTI criteria even if the resident has another possible cause for the fever (e.g., pneumonia)

^aFever: Single temperature $\geq 37.8^\circ\text{C}$ ($>100^\circ\text{F}$), or $> 37.2^\circ\text{C}$ ($>99^\circ\text{F}$) on repeated occasions, or an increase of $>1.1^\circ\text{C}$ ($>2^\circ\text{F}$) over baseline

^bLeukocytosis: $>14,000$ cells/ mm^3 , or Left shift ($> 6\%$ or $1,500$ bands/ mm^3)

^cIndwelling urinary catheters which have been in place for >14 days should be changed prior to specimen collection, but failure to change catheter does not exclude a UTI for surveillance purposes

Replace Figure 1 in the Resource Manual



Figure 1: Criteria for Defining UTI Events in NHSN LTCF Component.

Resident with or without an indwelling catheter:

ABUTI Criteria

Resident has **no localizing urinary signs or symptoms** (i.e., no urgency, frequency, acute dysuria, suprapubic tenderness, or costovertebral angle pain or tenderness). *If no catheter is in place, fever as only sign would not exclude ABUTI if other positive culture criteria are met.*

AND

Any of the following:

1. Specimen collected from clean catch voided urine and positive culture with no more than 2 species of microorganisms, at least one of which is bacteria of $\geq 10^5$ CFU/ml
2. Specimen collected from in/out straight catheter and positive culture with any microorganism, at least one of which is bacteria of $\geq 10^2$ CFU/ml
3. Specimen collected from indwelling catheter and positive culture with any microorganism, at least one of which is bacteria of $\geq 10^5$ CFU/ml

NOTE: Yeast and other microorganisms which are not bacteria, are not acceptable UTI pathogens

AND

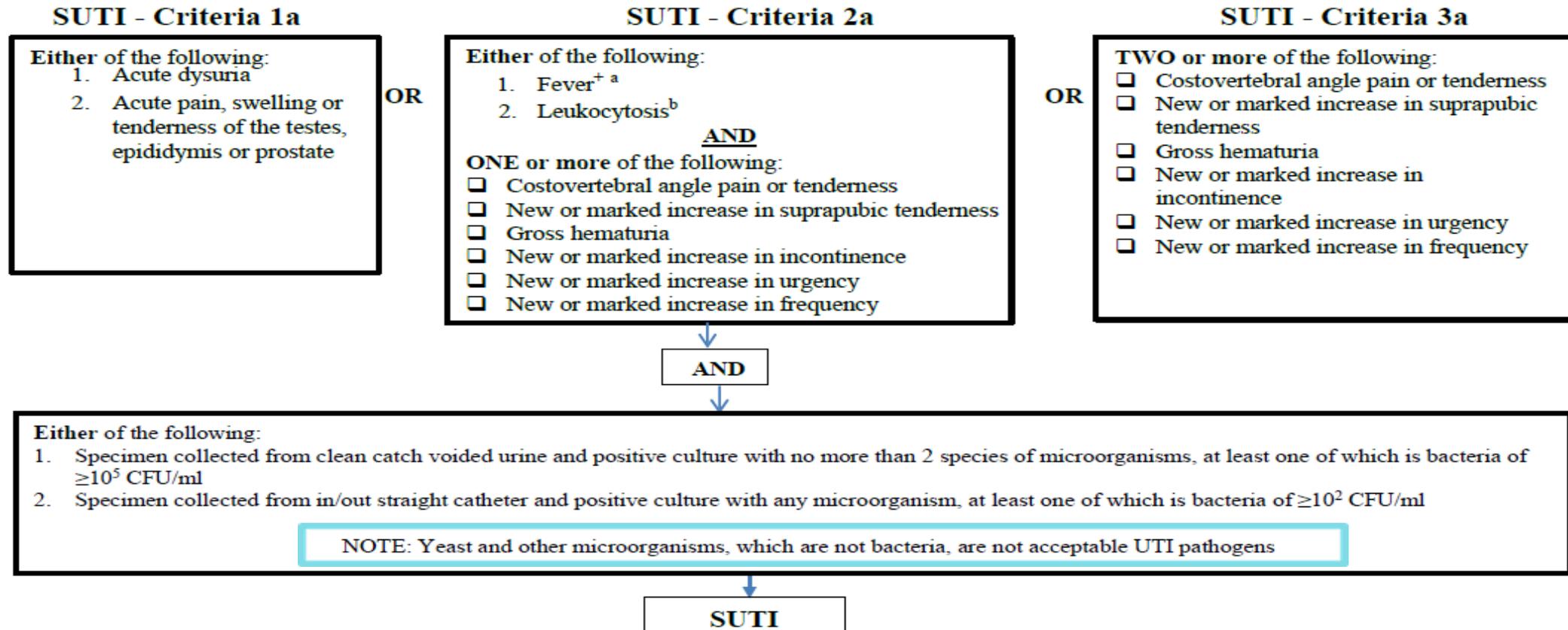
Positive blood culture with at least 1 matching organism in urine culture

ABUTI



Figure 1: Criteria for Defining UTI Events in NHSN/LTCF Component.

Resident *without* an indwelling catheter (Meets criteria 1a OR 2a OR 3a):



⁺ Fever can be used to meet SUTI criteria even if the resident has another possible cause for the fever (e.g., pneumonia)

^a Fever: Single temperature $\geq 37.8^\circ\text{C}$ ($>100^\circ\text{F}$), or $> 37.2^\circ\text{C}$ ($>99^\circ\text{F}$) on repeated occasions, or an increase of $>1.1^\circ\text{C}$ ($>2^\circ\text{F}$) over baseline

^b Leukocytosis: $>14,000$ cells/ mm^3 , or Left shift ($> 6\%$ or $1,500$ bands/ mm^3)

Monthly Reporting Plan for LTCF Following NHSN UTI Module

- ❖ The MRP must be completed before reporting in the application is allowed.
- ❖ Add Facility-wide Inpatient (FacWideIN) UTI event reporting to HAI Module section of monthly reporting plan (MRP)

CDC Department of Health and Human Services
Centers for Disease Control and Prevention

NHSN - National Healthcare Safety Network

NHSN Home Logged into Angela LTCF Test Facility (ID 39455) as AANTTILA.
Facility Angela LTCF Test Facility (ID 39455) is following the LTCF component.

Add Monthly Reporting Plan

[HELP](#)

Reporting Plan

- Add
- Find

Resident Event Summary Data Analysis Surveys Users Facility Group Log Out

Mandatory fields marked with *

Facility ID*: Angela LTCF Test Facility (ID 39455) ▼

Month*: March ▼

Year*: 2016 ▼

No Long Term Care Facility Component Modules Followed this Month

HAI Module [HELP](#)

Locations	UTI
Facility-wide Inpatient (FacWideIN) ▼	<input checked="" type="checkbox"/>

LabID Event Module [HELP](#)

Locations	Specific Organism Type	Lab ID Event All Specimens
Facility-wide Inpatient (FacWideIN) ▼	▼	<input type="checkbox"/>

Add Row Clear All Rows Copy from Previous Month

Prevention Process Measure Module [HELP](#)

Locations	Hand Hygiene	Gown and Gloves Use
Facility-wide Inpatient (FacWideIN) ▼	<input type="checkbox"/>	<input type="checkbox"/>

Copy from Previous Month

Save Back

Urinary Tract Infection Definitions

There are **two** specific types of UTI:

- Symptomatic UTI (SUTI)
- Asymptomatic Bacteremic UTI (ABUTI)

For **BOTH** Types- surveillance must occur for both catheter and non-catheter associated UTI events



Key Points To Remember When Reporting UTI Events



- ✓ UTIs can occur in residents with or without indwelling urinary devices.
- ✓ The **Symptomatic UTI** protocol criteria combine sign and symptoms with laboratory and culture data.
- ✓ **The Asymptomatic Bacteremic UTI:** resident has **NO** signs and symptoms localizing to the urinary tract, but has urine and blood cultures positive for the same bacteria.

Key Points To Remember When Reporting UTI Events



- ✓ “Mixed flora” is not considered an organism and cannot be reported.
- ✓ Yeast cannot be reported as an organism for a UTI. Urine culture with yeast can be included only if there is at least one qualifying bacterium.
- ✓ To be considered as catheter associated, the catheter must be in place for a minimum of 2 calendar days (day of insertion = day 1), and in-place at the time of the event or removed within the 2 calendar days prior to event onset (day of removal = Day 1).

Key Points To Remember When Reporting UTI Events



- ✓ **Date of Event** is the date when the first clinical evidence (signs/symptoms) of the UTI appeared or the date the specimen used to make diagnosis was collected, whichever comes first
- ✓ Infections should be attributed as an HAI for the LTCF if
 - ✓ (a) there is no evidence of an incubating infection at the time of admission to the facility (*on the basis of clinical documentation of appropriate signs and symptoms and not solely on screening microbiologic data*); and
 - ✓ (b) onset of clinical manifestation occurs >2 calendar days after admission.

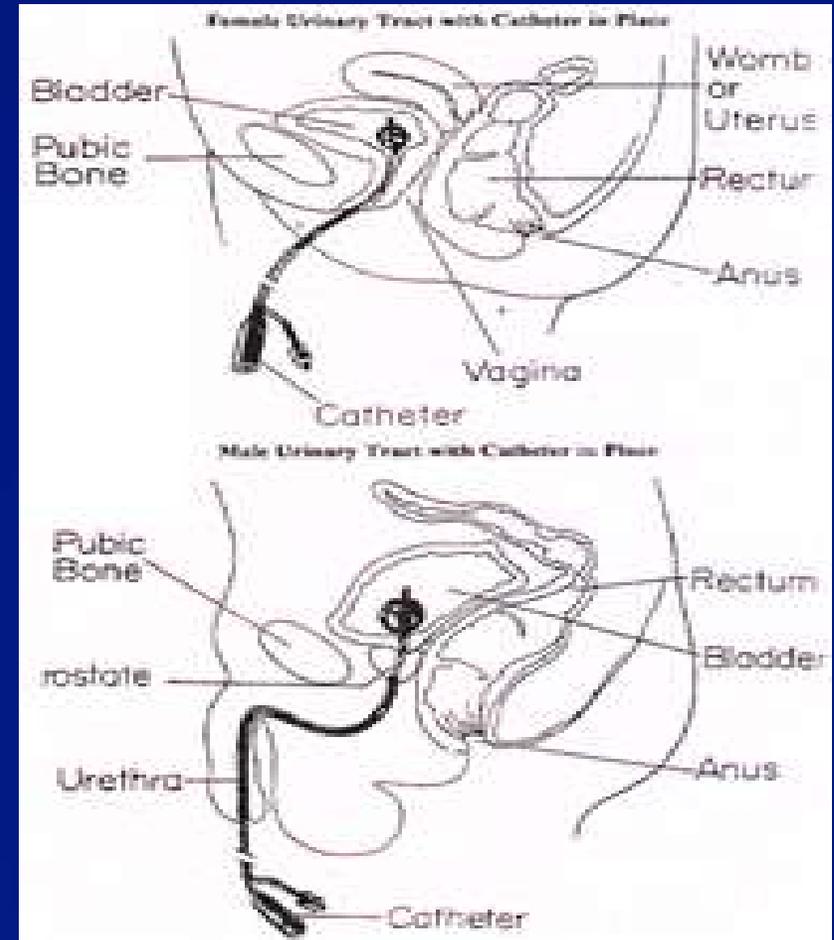
Key Points To Remember When Reporting UTI Events



- ✓ The LTCF UTI protocol does not have a set time period during which only one UTI may be reported for the same resident.
- ✓ To determine if a second UTI should be reported for the same resident, which is either present on admission (POA) or a healthcare-associated infection (HAI), clinical information must be used to determine that the original infection had resolved before reporting a second UTI.
- ✓ Information that may be useful include a new onset of signs and symptoms, as well as completion of antimicrobial therapy. Using this logic, if UTI signs/symptoms resolved prior to the onset of any new signs/symptoms and a new urine culture, a second UTI must be considered for NHSN surveillance.

Indwelling Catheter

A drainage tube that is inserted into the urinary bladder (includes neobladder) through the urethra, is left in place, and is connected to a collection system. This includes a collection system that is used for irrigation of any type or duration (e.g., intermittent, continuous). Also called a Foley catheter



Does not qualify as Indwelling urethral catheter

- × Straight catheterization
- × In and Out catheterization
- × Condom catheter (Texas catheter)
- × Suprapubic catheter
- × Nephrostomy tubes
- × Urostomy
- × Ileal conduit



NHSN Numerator Form

Urinary Tract Infection (UTI) for LTCF Form (CDC 57.140)

- Numerator data (one form for each event being recorded)
 - Collect and report each event that meets the NHSN UTI Event definition
 - Electronic version: http://www.cdc.gov/nhsn/forms/57.140_uti_ltcf_blank.pdf
 - Instructions for completing form: http://www.cdc.gov/nhsn/forms/instr/57.140-toi-uti-toi_final.pdf

 Form Approved OMB No. 0920-0666 Exp. Date: 12/31/2018 www.cdc.gov/nhsn	
Urinary Tract Infection (UTI) for LTCF	
Page 1 of 4 *required for saving	
*Facility ID:	Event #:
*Resident ID:	*Social Security #:
Medicare number (or comparable railroad insurance number):	
Resident Name, Last:	First: Middle:
*Gender: M F Other	*Date of Birth: __/__/__
Ethnicity (specify):	Race (specify):
*Resident type: <input type="checkbox"/> Short-stay <input type="checkbox"/> Long-stay	
*Date of First Admission to Facility: __/__/__	*Date of Current Admission to Facility: __/__/__
*Event Type: UTI	*Date of Event: __/__/__
*Resident Care Location: _____	
*Primary Resident Service Type: (check one)	
<input type="checkbox"/> Long-term general nursing <input type="checkbox"/> Long-term dementia <input type="checkbox"/> Long-term psychiatric <input type="checkbox"/> Skilled nursing/Short-term rehab (subacute) <input type="checkbox"/> Ventilator <input type="checkbox"/> Bariatric <input type="checkbox"/> Hospice/Palliative	
*Has resident been transferred from an acute care facility to your facility in the past 3 months? <input type="checkbox"/> Yes <input type="checkbox"/> No	
If Yes, <u>date of last transfer</u> from acute care to your facility: __/__/__	
If Yes, did the resident have an indwelling urinary catheter at the time of transfer to your facility? <input type="checkbox"/> Yes <input type="checkbox"/> No	
*Indwelling Urinary Catheter status at time of event onset (check one):	
<input type="checkbox"/> In place <input type="checkbox"/> Removed within last 2 calendar days <input type="checkbox"/> Not in place If indwelling urinary catheter status in place or removed within last 2 calendar days: Site where indwelling urinary catheter inserted (check one): <input type="checkbox"/> Your facility <input type="checkbox"/> Acute care hospital <input type="checkbox"/> Other <input type="checkbox"/> Unknown Date of indwelling urinary catheter insertion: __/__/__	
If indwelling urinary catheter not in place, was another urinary device type present at the time of event onset? <input type="checkbox"/> Yes <input type="checkbox"/> No	
If Yes, other device type: <input type="checkbox"/> Suprapubic <input type="checkbox"/> Condom (males only) <input type="checkbox"/> Intermittent straight catheter	
Event Details	
*Specify Criteria Used: (check all that apply)	
Signs & Symptoms <input type="checkbox"/> Fever: Single temperature $\geq 37.8^{\circ}\text{C}$ ($>100^{\circ}\text{F}$), or $> 37.2^{\circ}\text{C}$ ($>99^{\circ}\text{F}$) on repeated occasions, or an increase of $>1.1^{\circ}\text{C}$ ($>2^{\circ}\text{F}$) over baseline <input type="checkbox"/> Rigors <input type="checkbox"/> New onset hypotension <input type="checkbox"/> New onset confusion/functional decline <input type="checkbox"/> Acute pain, swelling, or tenderness of the testes, epididymis, or prostate <input type="checkbox"/> Acute dysuria <input type="checkbox"/> Purulent drainage at catheter insertion site	Laboratory & Diagnostic Testing <input type="checkbox"/> Specimen collected from clean catch voided urine and positive culture with $\geq 10^5$ CFU/ml of no more than 2 species of microorganisms <input type="checkbox"/> Specimen collected from in/out straight catheter and positive culture with $\geq 10^2$ CFU/ml of any microorganisms <input type="checkbox"/> Specimen collected from indwelling catheter and positive culture with $\geq 10^5$ CFU/ml of any microorganisms <input type="checkbox"/> Leukocytosis ($> 14,000$ cells/mm ³), or Left shift ($> 6\%$ or 1,500 bands/mm ³) <input type="checkbox"/> Positive blood culture with 1 matching organism in urine culture
New and/or marked increase in (check all that apply):	
<input type="checkbox"/> Urgency <input type="checkbox"/> Costovertebral angle pain or tenderness <input type="checkbox"/> Frequency <input type="checkbox"/> Suprapubic tenderness <input type="checkbox"/> Incontinence <input type="checkbox"/> Visible (gross) hematuria	
*Specific Event (Check one):	
<input type="checkbox"/> Symptomatic UTI (SUTI) <input type="checkbox"/> Symptomatic CA-UTI (CA-SUTI) <input type="checkbox"/> Asymptomatic Bacteremic UTI (ABUTI)	
Secondary Bloodstream Infection: Yes No	Died within 7 days of date of event: Yes No
*Transfer to acute care facility within 7 days: Yes No	
*Pathogens identified: Yes No *If Yes, specify on page 2	
Assurance of Confidentiality: The voluntarily provided information obtained in this surveillance system that would permit identification of any individual or institution is collected with a guarantee that it will	

LABID EVENT MODULE

Clostridium difficile Infection (CDI) and Multidrug Resistant Organisms (MDROs)

Why monitor CDI and MDRO in long-term care facilities?

- ❖ Residents in long term care facilities are at risk of carrying or acquiring *C. difficile* and multidrug resistant organisms, such as MRSA and VRE.
- ❖ Infections from multi-drug resistant organisms and *C. difficile* can be more severe, harder to treat, and are associated with increased risk of hospitalization, debility, and death, especially in older adults.
- ❖ Focused monitoring of multi-drug resistant organisms and *C. difficile* helps to evaluate trends and changes in the occurrence of these pathogens and related infections in the facility over time.
- ❖ Tracking these events will also inform infection prevention staff of the impact of targeted prevention efforts.

Introduction to LabID Event

LabID Event reporting allows limited resident admission/transfer data and laboratory testing data to be used **without** clinical evaluation of the resident, allowing for a much less labor intensive method to track infections, such as *C. difficile* and multidrug resistant organisms (MDROs)

Advantages of LabID Event Reporting

- Objective laboratory-based metrics that allow the following **without** clinical evaluation of the resident to:
 - ❖ Estimate healthcare acquisition
 - ❖ Estimate infection burden
 - ❖ Estimate exposure burden
 - ❖ Assess need for and effectiveness of interventions
- Standardized case definitions

Metrics in LabID Event Module align with recommendations from published literature

INFECTION CONTROL AND HOSPITAL EPIDEMIOLOGY OCTOBER 2008, VOL. 29, NO. 10

SHEA/HICPAC POSITION PAPER

Recommendations for Metrics for Multidrug-Resistant Organisms in Healthcare Settings: SHEA/HICPAC Position Paper

Adam L. Cohen, MD, MPH; David Calfee, MD, MS; Scott K. Fridkin, MD; Susan S. Huang, MD, MPH; John A. Jernigan, MD; Ebbing Lautenbach, MD, MPH, MSCE; Shannon Oriola, RN, CIC, COHN; Keith M. Ramsey, MD; Cassandra D. Salgado, MD, MS; Robert A. Weinstein, MD; for the Society for Healthcare Epidemiology of America and the Healthcare Infection Control Practices Advisory Committee

EXECUTIVE SUMMARY

Monitoring multidrug-resistant organisms (MDROs) and the infections they cause in a healthcare setting is important to detect newly emerging antimicrobial resistance profiles, to identify vulnerable patient populations, and to assess the need for and effectiveness of interventions; however, it is unclear which metrics are the best, because most of the metrics are

quantify the number of people whose MDRO acquisition is healthcare associated. In addition, healthcare facilities may want to calculate both the overall prevalence of carriage and

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INFECTION CONTROL AND HOSPITAL EPIDEMIOLOGY FEBRUARY 2007, VOL. 28, NO. 2

ORIGINAL ARTICLE

Recommendations for Surveillance of *Clostridium difficile*-Associated Disease

L. Clifford McDonald, MD; Bruno Coignard, MD, MSc; Erik Dubberke, MD; Xiaoyan Song, MD, MS; Teresa Horan, MPH; Preeti K. Kuttu, MD, MPH; the Ad Hoc *Clostridium difficile* Surveillance Working Group

BACKGROUND. The epidemiology of *Clostridium difficile*-associated disease (CDAD) is changing, with evidence of increased incidence and severity. However, the understanding of the magnitude of and reasons for this change is currently hampered by the lack of standardized surveillance methods.

OBJECTIVE AND METHODS. An ad hoc *C. difficile* surveillance working group was formed to develop interim surveillance definitions and recommendations based on existing literature and expert opinion that can help to improve CDAD surveillance and prevention efforts.

DEFINITIONS AND RECOMMENDATIONS. A CDAD case patient was defined as a patient with symptoms of diarrhea or toxic megacolon combined with a positive result of a laboratory assay and/or endoscopic or histopathologic evidence of pseudomembranous colitis. Recurrent CDAD was defined as repeated episodes within 8 weeks of each other. Severe CDAD was defined by CDAD-associated admission to an intensive care unit, colectomy, or death within 30 days after onset. Case patients were categorized by the setting in which *C. difficile* was likely acquired, to account for recent evidence that suggests that healthcare facility-associated CDAD may have its onset in the community up to 4 weeks after discharge. Tracking of healthcare facility-onset, healthcare facility-associated CDAD is the minimum surveillance required for healthcare settings; tracking of community-onset, healthcare facility-associated CDAD should be performed only in conjunction with tracking of healthcare facility-onset, healthcare facility-associated CDAD. Community-associated CDAD was defined by symptom onset more than 12 weeks after the last discharge from a healthcare facility. Rates of both healthcare facility-onset, healthcare facility-associated CDAD and community-onset, healthcare facility-associated CDAD should be expressed as case patients per 10,000 patient-days; rates of community-associated CDAD should be expressed as case patients per 100,000 person-years.

Infect Control Hosp Epidemiol 2007; 28:140-145

INFECTION CONTROL AND HOSPITAL EPIDEMIOLOGY MAY 2010, VOL. 31, NO. 5

SHEA-IDS A GUIDELINE

Clinical Practice Guidelines for *Clostridium difficile* Infection in Adults: 2010 Update by the Society for Healthcare Epidemiology of America (SHEA) and the Infectious Diseases Society of America (IDSA)

Stuart H. Cohen, MD; Dale N. Gerding, MD; Stuart Johnson, MD; Ciaran P. Kelly, MD; Vivian G. Loo, MD; L. Clifford McDonald, MD; Jacques Pepin, MD; Mark H. Wilcox, MD

Since publication of the Society for Healthcare Epidemiology of America position paper on *Clostridium difficile* infection in 1995, significant changes have occurred in the epidemiology and treatment of this infection. *C. difficile* remains the most important cause of healthcare-associated diarrhea and is increasingly important as a community pathogen. A more virulent strain of *C. difficile* has been identified and has been responsible for more-severe cases of disease worldwide. Data reporting the decreased effectiveness of metronidazole in the treatment of *C. difficile* infection have been published. The limited quantity of data available, areas of controversy still exist. This guideline updates and infection control and environmental management.

Infect Control Hosp Epidemiol 2010; 31(5):431-455

Reporting Options Available in the LabID Event Module

- ❑ I. *C. difficile* (CDI)
- ❑ II. Multi-drug Resistant Organisms (MDROs)
 - A facility can chose to monitor one or more of the following organisms:
 - *Staphylococcus aureus*, methicillin-resistant (MRSA)
 - *Staphylococcus aureus*, methicillin-susceptible (MSSA)
 - Vancomycin-Resistant *Enterococcus* spp. (VRE)
 - Cephalosporin-Resistant *Klebsiella* spp.(CephR-*Klebsiella*)
 - Carbapenem-Resistant *Enterobacteriaceae* (CRE)
 - *Klebsiella* spp. (CRE-*Klebsiella*)
 - *E coli*. (CRE-*Ecoli*)
 - *Enterobacter* (CRE-*Enterobacter*)
 - Multidrug-Resistant *Acinetobacter* spp. (MDR-*Acinetobacter*)

LabID Event Protocol Updates for 2016

- ❑ The question “*Has the resident been discharged from an acute care facility in the previous 3 months*” has been changed to **4 weeks** to reduce surveillance burden and better align with Acute Care Transfer-Long-term Care Facility-onset (ACT-LO) categorization.
- ❑ Clarifications have been made throughout the protocol to explain that LabID event reporting is specific to specimens collected while the resident is receiving care in the LTCF. Specimens collected while the resident is receiving care outside of the facility (for example, prior to admission) should not be included in LabID Event reporting for the LTCF.



Monthly Reporting Plan (MRP) for LTCF Following NHSN LabID Event Module

- ❖ The MRP must be completed before reporting in the application is allowed
- ❖ Add Facility-wide Inpatient (FacWideIN) as the location
- ❖ Click “Add Row” to add additional organism types to MRP (see protocol for organisms)

CDC Department of Health and Human Services
Centers for Disease Control and Prevention

NHSN - National Healthcare Safety Network

NHSN Home
Alerts
Reporting Plan
Resident
Event
Summary Data
Analysis
Surveys
Users
Facility Group
Log Out

Logged into Angela LTCF Test Facility (ID 39455) as AANTTILA.
Facility Angela LTCF Test Facility (ID 39455) is following the LTCF component.

Add Monthly Reporting Plan

MANDATORY FIELDS MARKED WITH *

Facility ID*: Angela LTCF Test Facility (ID 39455) ▼
Month*: March ▼
Year*: 2016 ▼
 No Long Term Care Facility Component Modules Followed this Month

HAI Module

Locations	UTI
Facility-wide Inpatient (FacWideIn) ▼	<input type="checkbox"/>

LabID Event Module

Locations	Specific Organism Type	Lab ID Event All Specimens
Facility-wide Inpatient (FacWideIn) ▼	MRSA - MRSA ▼	<input checked="" type="checkbox"/>
Facility-wide Inpatient (FacWideIn) ▼	CDIF - C. difficile ▼	<input checked="" type="checkbox"/>

Add Row Clear All Rows Copy from Previous Month

Prevention Process Measure Module

Locations	Hand Hygiene	Gown and Gloves Use
Facility-wide Inpatient (FacWideIn) ▼	<input type="checkbox"/>	<input type="checkbox"/>

Copy from Previous Month

Save Back

Definition

C. difficile (CDI) LabID Event

C. difficile positive laboratory assay, tested on a liquid stool specimen, and collected while a resident is receiving care in the LTCF, and the resident has no prior *C. difficile* positive laboratory assay collected in the previous **14 days** while receiving care in the LTCF.

Definition

C. difficile Positive Laboratory Assay

- A positive laboratory test result for *C. difficile* toxin A and/or B, (includes molecular assays [PCR] and/or toxin assays)

OR

- A toxin-producing *C. difficile* organism detected by culture or other laboratory means performed on a stool sample

Stool must conform to shape of container



Definition

Multi-drug Resistant Organism (MDRO) LabID Event

A MDRO positive laboratory test result, tested on any laboratory specimen source, and collected while a resident is receiving care in the LTCF, and the resident has no prior positive for the same organism from any specimen source collected in the same calendar month, except when a unique blood source is identified.

NOTE: Excludes tests related to active surveillance testing

Definition

Unique Blood Source (MDRO LabID Event)

MDRO isolate identified in a blood culture from a resident with no prior isolation of the same MDRO in blood in the past 2 weeks (14-days), while receiving care in the LTCF, even across calendar months.

NOTE: A unique blood source isolate must be reported even if the resident had this same MDRO previously isolated in a non-blood specimen earlier during the same calendar month.

Let's Practice: Meet Mr. Smith



Assume this is the line list for Mr. Smith and all specimens collected are shown

	Res	Current Admit Date/	Specimen Collection Date	Specimen Source	Lab Result	Report as a LabID Event?	Explanation
1	MS	2/1/16	2/2/16	Urine	MRSA	YES	1 st MRSA from any specimen in calendar month
2	MS	2/1/16	2/17/16	Wound	MRSA	NO	Non-blood source, prior positive MRSA isolate this calendar month
3	MS	2/1/16	2/21/16	Blood	MRSA	YES	Unique blood source and no prior MRSA blood in ≤ 14 days
4	MS	2/1/16	2/26/16	Blood	MRSA	NO	≤ 14 days from previous MRSA + blood specimen
5	MS	2/1/16	2/28/16	Nasal screen	MRSA	NO	Screening test results are excluded from LabID events
6	MS	2/1/16	3/1/16	Blood	MRSA	YES	First MRSA positive isolate collected in new calendar month for Mr. Smith
7	MS	2/1/16	3/11/16	Urine	MRSA	NO	Non-blood source, prior positive MRSA isolate this calendar month

Key Points To Remember When Reporting LabID Events



- ✓ LabID event date is the specimen collection date
- ✓ Only non-duplicate specimens should be entered into NHSN as a LabID Event.
- ✓ Laboratory results available from other healthcare facilities before the resident was admitted to the LTCF should not be reported as LabID Events.

Key Points To Remember When Reporting LabID Events



- ✓ LabID Event reporting is ONLY for collecting and tracking isolates from positive cultures that are taken for "clinical" purposes (i.e., for diagnosis and treatment)
- ✓ Active Surveillance Culture/Testing (e.g., nasal swabs for MRSA or perirectal swabs for VRE) results are not reported as LabID Events.

Key Points To Remember When Reporting LabID Events



- ❖ NHSN application will automatically categorize the LabID Events based on the current admission into the LTCF and the date of specimen collection (event date)
 - ❖ **Community-onset (CO) LabID Event:** Date specimen collected ≤ 3 calendar days after resident admission to the facility (i.e., days 1, 2, or 3 of admission).
 - ❖ **Long-term Care Facility-onset (LO) LabID Event:** Date specimen collected > 3 calendar days after admission to the facility (i.e., on or after day 4).
 - ❖ LO can be further sub-classified as:
 - ❖ **Acute Care Transfer-Long-term Care Facility-onset (ACT-LO):** LTCF-onset (LO) LabID Event with date specimen collected ≤ 4 weeks following date of last transfer from an Acute Care Facility (Hospital, Long-term acute care hospital, or acute inpatient rehabilitation facility only).

EXAMPLE: NHSN Classification of Lab ID Events as Community-onset (CO) or LTCF-onset (LO)

LTCF Admission Date				
March 1 st	March 2 nd	March 3 rd	March 4 th	March 5 th
Day 1	Day 2	Day 3	Day 4	Day 5
Community-Onset (CO)			Long-term Care Facility Onset (LO)	

Key Points To Remember When Reporting LabID Events

Applies to CDI LabID Events Only

CDI LabID events are further categorized based on the current specimen collection date and prior specimen collection date of a previous CDI LabID Event entered into NHSN



- ❖ **Incident CDI LabID Event:** Any CDI LabID Event from a specimen collected >8 weeks after the most recent CDI LabID Event entered into the NHSN application or the first LabID Event ever entered for the resident while in the facility
- ❖ **Recurrent CDI LabID Event:** Any LabID Event entered > 2 weeks and ≤ 8 weeks after the most recent LabID Event reported for an individual resident in the facility

Knowledge Check



Assume these are all of the *C. difficile* test results for a resident in the LTCF

Date of Positive <i>C.difficile</i> lab tests for a resident	Duplicate?	Enter as a CDI LabID Event?
1/3/2016	No	YES.
1/9/2016	Yes	No (within 2 weeks of positive test 1/3/2015)
1/20/2016	Yes	No (within 2 weeks of <u>positive test</u> 1/9/2015)
1/29/2016	Yes	No (within 2 weeks of <u>positive test</u> 1/20/2015)
2/23/2016	No	YES

NHSN Numerator Form

Laboratory-identified MDRO or CDI Event for LTCF Form (CDC 56.138)

- Numerator data (one form for each event being recorded)
 - Collect and report each event that meets the LabID Event definition.
 - Electronic version:
http://www.cdc.gov/nhsn/PDFs/LTC/forms/57.138_LabIDEvent_LTCF_BLANK.pdf
 - Instructions for completing form:
<http://www.cdc.gov/nhsn/forms/instr/57.138-toi-for-lab-id-event.pdf>

NHSN National Healthcare Safety Network		Form Approved OMB No. 0920-0666 Exp. Date: 12/31/2018 www.cdc.gov/nhsn	
Laboratory-identified MDRO or CDI Event for LTCF			
Page 1 of 1			
*required for saving			
Facility ID:		Event #:	
*Resident ID:		*Social Security #:	
Medicare number (or comparable railroad insurance number):			
Resident Name, Last:	First:	Middle:	
*Gender: M F Other		*Date of Birth: __/__/__	
Ethnicity (specify):		Race (specify):	
*Resident type: <input type="checkbox"/> Short-stay <input type="checkbox"/> Long-stay			
*Date of First Admission to Facility: __/__/__		*Date of Current Admission to Facility: __/__/__	
Event Details			
*Event Type: LabID		*Date Specimen Collected: __/__/__	
*Specific Organism Type: (check one)			
<input type="checkbox"/> MRSA <input type="checkbox"/> MSSA <input type="checkbox"/> VRE <input type="checkbox"/> C. difficile <input type="checkbox"/> CephR-Klebsiella			
<input type="checkbox"/> CRE-E. coli <input type="checkbox"/> CRE-Enterobacter <input type="checkbox"/> CRE-Klebsiella <input type="checkbox"/> MDR-Acinetobacter			
*Specimen Body Site/System:		*Specimen Source:	
*Resident Care Location:			
*Primary Resident Service Type: (check one)			
<input type="checkbox"/> Long-term general nursing <input type="checkbox"/> Long-term de			

NHSN Denominator Form

- **Denominators for LTCF Form (CDC 57.142)**
 - One form for the entire month to collect both LabID event and UTI denominator data
 - **Monthly totals** will be entered into the NHSN application
 - Electronic version: http://www.cdc.gov/nhsn/PDFs/LTC/forms/57.142_DenominatorLTCF_BLANK.pdf



Form Approved
OMB No. 0920-0666
Exp. Date: 12/31/2018
www.cdc.gov/nhsn

Denominators for LTCF

Page 1 of 1 *required for saving

Facility ID:		*Location Code:		*Month:	*Year:
Date	*Number of residents	*Number of residents with a urinary catheter	*New antibiotic starts for UTI indication	*Number of admissions	Number of admissions on <i>C. diff</i> treatment
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					
16					
17					
18					
19					
20					
21					
22					
23					
24					
25					
26					
27					
28					
29					
30					
31					
*Total	Resident-days	Urinary-catheter days	Total antibiotic starts for UTI indication	Resident-admissions	Resident-admissions on <i>C. diff</i> treatment

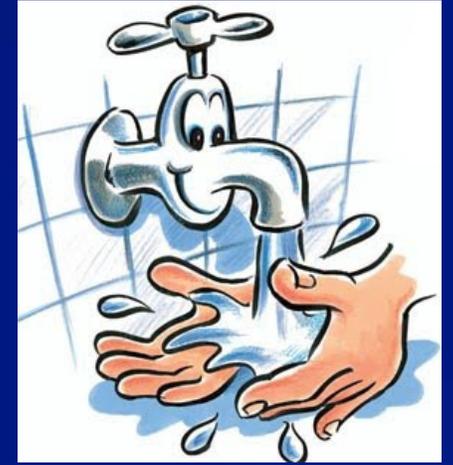
Label: _____
Data: _____

Assurance of Confidentiality: The voluntarily provided information obtained in this surveillance system that would permit identification of any individual or institution is collected with a guarantee that it will be held in strict confidence, will be used only for the purposes stated, and will not otherwise be disclosed or released without the consent of the individual, or the institution in accordance with Sections 304, 306 and 308(d) of the Public Health Service Act (42 USC 242b, 242k, and 242m(d)).
Public reporting burden of this collection of information is estimated to average 3.25 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. An agency may not conduct or sponsor a collection of information unless it displays a currently valid OMB control number. Send comments regarding this collection of information, including suggestions for reducing this burden to CDC, Reports Clearance Office, 1600 Clifton Road, NE, Atlanta, GA 30333, (0920-0666).
CDC 57.142 r1, v8.3

PREVENTION PROCESS MEASURES MODULE

Hand Hygiene and Glove and Gown use

Why monitor adherence to prevention process measures in LTCF?



- Hands of healthcare personnel (HCP) are easily contaminated during care-giving or from contact with surfaces in close proximity to a resident, and can transmit healthcare-associated infections (HAIs) from one resident to another.
- Hand hygiene (HH) is one of the most effective ways to prevent transmission of HAIs.
- Gown and gloves use by HCP when residents are placed in Transmission-based Contact Precautions have been shown to reduce rates of HAI transmission.
- Reinforces and supports the CDC and HICPAC approved guidelines for prevention HAI and informs infection control staff of the impact of performance improvement efforts-
<http://www.cdc.gov/hicpac/pubs.html>

Purpose of Prevention Process Measure Event Reporting



- To calculate rates of adherence to hand hygiene (HH) and/or gown and glove (GG) use opportunities among all healthcare personnel (HCP) in a facility.
- To provide feedback to HCP on adherence to HH and/or GG use.
- To assess the impact of efforts to improve HH and/or GG use practices by HCP over time.

Prevention Process Measures Protocol Updates for 2016



- ❑ No changes made to the Prevention Process Measures Surveillance Module for 2016

Monthly Reporting Plan for Prevention Process Measures Module

- ❖ The MRP must be complete before reporting in the application is allowed
- ❖ Add Facility-wide Inpatient (FacWideIN) as the location
- ❖ Select Hand Hygiene and/or Gowns and Gloves use

The screenshot shows the NHSN Reporting Plan interface. A red arrow points to the 'Reporting Plan' menu item in the left sidebar. A blue arrow points to the 'Add' sub-menu item. A large blue rounded rectangle highlights the 'Prevention Process Measure Module' table, with two blue arrows pointing to the 'Hand Hygiene' and 'Gown and Gloves Use' columns. A small blue box highlights the 'Save' and 'Back' buttons at the bottom right.

CDC Department of Health and Human Services
Centers for Disease Control and Prevention

NHSN - National Healthcare Safety Network

NHSN Home Logged into Angela LTCF Test Facility (ID 39455) as AANTTILA.
Facility Angela LTCF Test Facility (ID 39455) is following the LTCF component.

Add Monthly Reporting Plan

HELP

Mandatory fields marked with *

Facility ID*: Angela LTCF Test Facility (ID 39455) ▼
Month*: March ▼
Year*: 2016 ▼
 No Long Term Care Facility Component Modules Followed this Month

HAI Module HELP

Locations	UTI
Facility-wide Inpatient (FacWideIN) ▼	<input checked="" type="checkbox"/>

LabID Event Module HELP

Locations	Specific Organism Type	Lab ID Event All Specimens
Facility-wide Inpatient (FacWideIN) ▼	CDIF - C. difficile ▼	<input checked="" type="checkbox"/>
Facility-wide Inpatient (FacWideIN) ▼	MRSA - MRSA ▼	<input checked="" type="checkbox"/>

Add Row Clear All Rows Copy from Previous Month

Prevention Process Measure Module HELP

Locations	Hand Hygiene	Gown and Gloves Use
Facility-wide Inpatient (FacWideIN) ▼	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

Copy from Previous Month

Save Back

Key Points To Remember When Reporting Prevention Process Measures



- ✓ To participate in the module, a facility can choose to perform monitoring of hand hygiene, or gown and gloves use, or both.
- ✓ To get the most out of the data, a minimum of six months should be reported during a calendar year.
- ✓ A minimum of 30 unannounced observations should occur per month for each event.
- ✓ Monitoring must be performed facility-wide and include all types of healthcare personnel (HCP).
- ✓ LTCF staff other than an infection preventionists can be trained to perform the observations and collect required data elements.

Prevention Process Measures Monthly Form

Hand Hygiene

- ❖ Numerator = Number of hand hygiene opportunities **performed**
- ❖ Denominator = Total hand hygiene observations **indicated**

Gown and Glove Use

- ❖ Numerator – Number of contacts for which gown/gloves were **correctly used**
- ❖ Denominator – Total number of contacts for which gown/gloves use was **indicated**
- ❖ **Data Collection Form-**
http://www.cdc.gov/nhsn/forms/57.143_processmeasuresummaryforltcf_blank.pdf

NHSN
National Healthcare
Safety Network

Form Approved
OMB No. 0920-0666
Exp. Date: 12/31/2018
www.cdc.gov/nhsn

Prevention Process Measures Monthly Monitoring for LTCF

Page 1 of 1
*required for saving **conditionally required based upon monitoring selection in Monthly Reporting Plan

Facility ID #: _____ *Month: _____ *Year: _____ *Location Code: _____

Prevention Process Measures

<u>Hand Hygiene</u>	<u>Gown and Gloves</u>
**Performed: _____	**Used: _____
**Indicated: _____	**Indicated: _____



Denominator Data

28

4

17

25

Ostermontag

Donnerstag

April

14. Woche

März

April

Montag

Sonntag

April

weil

ag

reitag

Samstag

Sonntag

Karfreitag

März

16. Woche

April

16. Woche

April

NHSN Denominators for LTCF Form

HAI UTI and LabID Event

- ❖ NHSN Denominators for LTCF forms may be used to collect daily denominators for the facility.
- ❖ The **monthly totals** will be entered into the NHSN application



Form Approved
OMB No. 0920-0666
Exp. Date: 12/31/2017
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Denominators for LTCF

Page 1 of 1 *required for saving

Facility ID:		*Location Code:		*Month:	*Year:
Date	*Number of residents	*Number of residents with a urinary catheter	*New antibiotic starts for UTI indication	*Number of admissions	Number of admissions on <i>C. diff</i> treatment
1					
2					
3					
...					
30					
31					
*Total					
	Resident-days	Urinary-catheter days	Total antibiotic starts for UTI indication	Resident-admissions	Resident-admissions on <i>C. diff</i> treatment

Document daily counts

Document totals for the entire month

Entering Denominator Data into NHSN

- ❑ At the end of the month, enter each monthly total denominator for the month into the NHSN application
- ❑ Locate ‘Summary Data’ on left-hand navigation Bar, and then ‘Add’
- ❑ Enter the month, and year for which denominator data will be reported

The screenshot displays the NHSN application interface. At the top left is the CDC logo and the text 'Department of Health and Human Services, Centers for Disease Control and Prevention'. Below this is the NHSN logo and 'NHSN - National Healthcare Safety Network'. The user is logged in as 'Angela?s LTC Test Facility (ID 39455) as AANTTILA'. The left-hand navigation bar includes 'NHSN Home', 'Alerts', 'Reporting Plan', 'Resident', 'Event', 'Summary Data', 'Analysis', 'Surveys', 'Users', 'Facility', 'Group', and 'Log Out'. Under 'Summary Data', there are three options: 'Add', 'Find', and 'Incomplete'. A red arrow points to the 'Add' option. The main content area is titled 'Add Monthly Summary Data' and contains the following text: 'Mandatory fields marked with *' and 'Fields required for record completion marked with **'. Below this, there are three dropdown menus: 'Facility ID*' (set to 'Angela?s LTC Test Facility (ID 39455)'), 'Month*' (set to 'March'), and 'Year*' (set to '2015').

Entering Denominator Data in NHSN

- ❖ Enter denominator data for each module your facility is participating in for the month, as indicated by the red asterisk

Denominators for Long Term Care Locations

Location Code	Total Resident Days	Urinary Catheter Days	Report No UTI	New Antibiotic Starts for UTI Indication	
Facility-wide Inpatient (FacWIDEIn)	<input type="text"/> *	<input type="text"/> *	<input type="checkbox"/>	<input type="text"/> *	Custom Fields

MDRO & CDI LabID Event Reporting

Location Code		MRSA	VRE	CephR-Klebsiella	CRE-Ecoli	CRE-Enterobacter	CRE-Klebsiella	C. difficile	MDR-Acinetobacter	
Facility-wide Inpatient (FacWIDEIn)	Resident Admissions: <input type="text"/> *									Custom Fields
	Resident Days: <input type="text"/> *	LabID Event (All specimens) <input type="checkbox"/>	<input type="checkbox"/>							
	Number of Admissions on C. diff Treatment: <input type="text"/> *	Report No Events <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Prevention Process Measures

Location Code	Hand Hygiene		Gown and Gloves		
	Performed	Indicated	Used	Indicated	
Facility-wide Inpatient (FacWIDEIn)	<input type="text"/> *	<input type="text"/> *	<input type="text"/> *	<input type="text"/> *	Custom Fields

New antibiotic starts for UTI indication



- ❖ The monthly sum of all new prescriptions for antibiotics given to residents suspected or diagnosed with having a UTI (catheter-associated and not catheter associated)
- ❖ Count antibiotic starts even if the infection being treated did not meet NHSN criteria for a symptomatic UTI event

Log Out

Denominators for Long Term Care Locations

	Location Code	Total Resident Days	Urinary Catheter Days	Report No UTI	New Antibiotic Starts for UTI Indication	
	Facility-wide Inpatient (FacWIDEIn) ▼	<input type="text"/> *	<input type="text"/> *	<input type="checkbox"/> **	<input type="text"/> *	Number of new antibiotic orders for the month

Number of admissions on *C. difficile* treatment



- ❖ The monthly total number of admitted residents who were receiving antibiotic therapy for *C. difficile* infection at the time of admission. Includes new admissions and readmissions.
- ❖ Count number of admissions on *C. difficile* treatment even if the infection being treated did not meet NHSN criteria for a CDI LabID Event.

MDRO & CDI LabID Event Reporting		MRSA	VRE	CephR-Klebsiella	CRE-Ecoli	CRE-Enterobacter	CRE-Klebsiella	C. difficile	MDR-Acinetobacter
Location Code	Resident Admissions: 10*								
Facility-wide Inpatient (FacWIDEIn)	Resident Days: 150*								
	Number of Admissions on C. diff Treatment: 5*								
	LabID Event (specimens) Report No. Ev							**	

Number of admitted residents who were receiving antibiotic treatment for CDI at the time of admission for the month

Entering Denominator Data into NHSN

Report No Events

- ❖ If the facility did not report any Events for a module that's included in the monthly reporting plan, a check mark must be placed in the box "Report No Events"

Denominators for Long Term Care Locations				
Location Code	Total Resident Days	Urinary Catheter Days	Report No UTI	Antibiotic Starts for UTI Indication
Facility-wide Inpatient (FacWIDEIn) ▼	<input type="text"/> *	<input type="text"/> *	<input type="checkbox"/>	<input type="text"/> *

MDRO & CDI LabID Event Reporting										
Location Code			MRSA	VRE	CephR-Klebsiella	CRE-Ecoli	CRE-Enterobacter	CRE-Klebsiella	C. difficile	MDR-Acinetobacter
Facility-wide Inpatient (FacWIDEIn) ▼	Resident Admissions:									
	Resident Days:	LabID Event (All Specimens)	<input checked="" type="checkbox"/>							
	Number of Admissions on C. diff Treatment:	Report No Events	<input type="checkbox"/> **	<input type="checkbox"/>	<input type="checkbox"/> **					

Resolve Alerts

- ❑ Alerts will show up on NHSN Home page
- ❑ Facilities must resolve Alerts before data is considered complete

The screenshot shows the NHSN Long Term Care Facility Component Home Page. On the left is a navigation bar with the following items: NHSN Home, Alerts, Reporting Plan, Resident, Event, Summary Data, Analysis, Surveys, Users, Facility, Group, and Log Out. The main content area displays the user's login information: 'Logged into Angela LTCF Test Facility (ID 39455) as AANTTILA. Facility Angela LTCF Test Facility (ID 39455) is following the LTCF component.' Below this is the title 'NHSN Long Term Care Facility Component Home Page' and a message: 'Use the Navigation bar on the left to access the features of the application.' A section titled 'Action items' contains the text 'You must complete these items.' followed by a sub-section 'Alerts' with a bulleted list: 'You have 4 missing events', 'You have 3 incomplete events', 'You have 11 missing summaries', and 'You have 4 incomplete summaries'. A red line points from a callout box to the 'Alerts' section. The callout box is a teal rectangle with a red border containing the text: 'Click on each hyperlink to open list of alerts for that category'.

- Alerts
- Reporting Plan
- Resident
- Event
- Summary Data
- Analysis
- Surveys
- Users
- Facility Group
- Log Out

Incomplete/Missing Lists

Missing Events **Incomplete Events** Missing Summary Data Incomplete Summary Data

The following are incomplete "In Plan" events.

[Print this report](#)
[Display All](#)

First | Previous | Next | Last

Displaying 1 - 3 of 3

Resident ID	Last Name	First Name	Gender	Date of Birth	Event #	Event Type
11111	Shine	Sun	F	01/10/1930	3176	UTI
123456	Boat	MissThe	F	09/29/1935	3491	UTI
2468	Summer	Hello	F	01/15/1935	3527	UTI

First | Previous | Next | Last

Displaying 1 - 3 of 3

Click event number hyperlink to open the event and resolve the issue, which in this case is completing the incomplete event

Resolve Alerts

 **NHSN Home**

Logged into Angela LTCF Test Facility (ID 39455) as AANTTILA.
Facility Angela LTCF Test Facility (ID 39455) is following the LTCF component.

Alerts

Reporting Plan

Resident

Event

Summary Data

Analysis

Surveys

Users

Facility

Group

Log Out

NHSN Long Term Care Facility Component Home Page

Use the Navigation bar on the left to access the features of the application.

Action items

You must complete these items.

Alerts

- You have [6](#) missing events
- You have [3](#) incomplete events
- You have [6](#) missing summaries
- You have [2](#) incomplete summaries

Click blue/underlined hyperlink to see incomplete summaries

Resolve Alerts

 **NHSN Home** Logged into Angela LTCF Test Facility (ID 39455) as AANTTILA.
Facility Angela LTCF Test Facility (ID 39455) is following the LTCF component.

Alerts
Reporting Plan
Resident
Event
Summary Data
Analysis
Surveys
Users
Facility
Group
Log Out

Incomplete/Missing Lists

Missing Events Incomplete Events Missing Summary Data **Incomplete Summary Data**

[Print this report](#)
[Display All](#)

First | Previous | Next | Last Displaying 1 - 2 of 2

Summary ID	Summary Data Type	Year	Month
3856	LTC Denominators	2015	7
3857	MDRO and CDI Reporting	2015	7

First | Previous | Next | Last 1 - 2 of 2

Click hyperlink to access the incomplete denominator page for July 2015

Resolve Alerts

If no CDI LabID Events were identified for the month, and this box is not checked, the facility data will be considered as incomplete and may be excluded from analysis

Location Code	CRE- Klebsiella	C. difficile	MDR- Acinetobact er
Facility-wide Inpatient (FacWIDEIn) 1000 *	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Report No Events	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Number of Admissions on C. diff Treatment: 150 *			

Put a check mark in box to indicate No CDI events were identified for the month

**Time for a break!
Stretch your legs!**

When we come back....

**CDC NHSN Resources Available for Long-
term Care Facilities**



Available Resources for LTCFs

One Stop Shopping



- ❖ NHSN LTCF Website: <http://www.cdc.gov/nhsn/LTC/>
 - ❖ Long-term Care Facility Component
 - Training
 - Protocols
 - Data collection forms
 - Tables of instructions for completing all forms
- ❖ NHSN LTCF Enrollment Page: <http://www.cdc.gov/nhsn/ltc/enroll.html>
- ❖ NHSN Group User Page: <http://www.cdc.gov/nhsn/group-users/index.html>
- ❖ LTCF Resources: <http://www.cdc.gov/longtermcare/index.html>
- ❖ Questions or Need Help? Contact User Support at nhsn@cdc.gov

LTCF Home Page: <http://www.cdc.gov/nhsn/ltc/index.html>

NHSN Login	
About NHSN	+
Enroll Here	+
Materials for Enrolled Facilities	-
Ambulatory Surgery Centers	+
Acute Care Hospitals/Facilities	+
Long-term Acute Care Hospitals/Facilities	+
Long-term Care Facilities	-
Surveillance for C. difficile and MRSA Infections	
Surveillance for Urinary Tract Infections	
Surveillance for Healthcare Personnel Exposure	
Surveillance for Healthcare Personnel Vaccination	
Surveillance for Process Measures - Hand Hygiene, Gloves and Gown Adherence	

Tracking Infections in Long-term Care Facilities



Eliminating infections, many of which are preventable, is a significant way to improve care and decrease costs. CDC's National Healthcare Safety Network provides long-term care facilities with a customized system to track infections in a streamlined and systematic way. When facilities track infections, they can identify problems and track progress toward stopping infections. On the national level, data entered into NHSN will gauge progress toward national healthcare-associated infection goals.

NHSN's long-term care component is ideal for use by: nursing homes, skilled nursing facilities, chronic care facilities, and assisted living and residential care facilities



MDRO/C.Diff - Surveillance for C. difficile, MRSA, and other Drug-resistant Infections

- Training
- Protocols
- Forms
- Support Materials
- Analysis Resources
- FAQs



[More >](#)

Report Prevention Process Measures - Hand Hygiene, Gloves and Gown Adherence

- Training
- Protocols
- Forms
- Support Materials
- Analysis Resources
- FAQs



[More >](#)

Surveillance for C. difficile and MRSA Infections

Surveillance for Urinary Tract Infections

Surveillance for Healthcare Personnel Exposure

Surveillance for Healthcare Personnel Vaccination

Surveillance for Process Measures - Hand Hygiene, Gloves and Gown Adherence

Tracking Infections in Long-term Care Facilities



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MDRO/C.Diff - Surveillance for C. difficile, MRSA, and other Drug-resistant Infections

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- Forms
- Support Materials
- Analysis Resources
- FAQs

[More >](#)

Click Module title to open resources for each module

- Training
- Protocols
- Forms
- Support Materials
- Analysis Resources
- FAQs

[More >](#)

How to Access Protocol for Each Module

NHSN	
NHSN Login	
About NHSN	+
Enroll Here	+
Materials for Enrolled Facilities	-
Ambulatory Surgery Centers	+
Acute Care Hospitals/Facilities	+
Long-term Acute Care Hospitals/Facilities	+
Long-term Care Facilities	-
Surveillance for C. difficile and MRSA Infections	
Surveillance for Urinary Tract Infections	
Surveillance for Healthcare Personnel Exposure	

CDC > [NHSN](#) > [Materials for Enrolled Facilities](#) > [Long-term Care Facilities](#)

Surveillance for C. difficile, MRSA, and other Drug-resistant Infections

[f](#) [Twitter](#) [+](#)

Resources for NHSN Users Already Enrolled

- > Training
- ▼ **Protocol**
 - [Component Protocol Changes for LTCF January 2016](#) [PDF - 70 KB]
 - [LabID Event Protocol for LTCF January 2016](#)
- > Data Collection Forms
- > Supporting Material
- > FAQs

Click hyperlink to open protocol

Surveillance for C. difficile and MRSA Infections

Surveillance for Urinary Tract Infections

Surveillance for Healthcare Personnel Exposure

Surveillance for Healthcare Personnel Vaccination

Surveillance for Process Measures - Hand Hygiene, Gloves and Gown

Surveillance for C. difficile, MRSA, and other Drug-resistant Infections



Resources for NHSN Users Already Enroll

> Training

> Protocol

▼ Data Collection Forms

- [57.138 LabID Event Form for LTCF January 2016](#) [PDF - 103 KB]
 - [Customizable form](#) [DOCX - 29 KB]
 - [Table of Instructions - LabID Event Form for LTCF](#) [PDF - 343 KB]
- [57.142 Denominators for LTCF January 2016](#) [PDF - 49 KB]
 - [Customizable form](#) [DOCX - 29 KB]
 - [Table of Instructions - Denominators for LTCF](#) [PDF - 57 KB]
- [57.141 Monthly Reporting Plan for LTCF January 2016](#) [PDF - 92 KB]
 - [Customizable form](#) [DOCX - 28 KB]
 - [Table of Instructions - Monthly Reporting Plan for LTCF](#) [PDF - 175 KB]
- [57.137 Annual Facility Survey for LTCF January 2016](#) [PDF - 224 KB]
 - [Table of Instructions - Annual Facility Survey for LTCF](#) [PDF - 458 KB]

Every form has a separate document with instructions for completing the form, titled Table of Instructions





Form Approved
OMB No. 0920-0686
Exp. Date: 12/31/2018
www.cdc.gov/nhsn

Laboratory-identified MDRO or CDI Event for LTCF

Page 1 of 1

*required for saving	
Facility ID:	Event #:
*Resident ID:	*Social Security #:
Medicare number (or comparable railroad insurance number):	
Resident Name, Last:	First: Middle:
*Gender: M F Other	*Date of Birth: __/__/__
Ethnicity (specify):	Race (specify):
*Resident type: <input type="checkbox"/> Short-stay <input type="checkbox"/> Long-stay	
*Date of First Admission to Facility: __/__/__	*Date of Current Admission to Facility: __/__/__
Event Details	
*Event Type: LabID	*Date Specimen Collected: __/__/__
*Specific Organism Type: (check one)	
<input type="checkbox"/> MRSA <input type="checkbox"/> MSSA <input type="checkbox"/> VRE <input type="checkbox"/> C. difficile <input type="checkbox"/> CephR-Klebsiella <input type="checkbox"/> CRE-E. coli <input type="checkbox"/> CRE-Enterobacter <input type="checkbox"/> CRE-Klebsiella <input type="checkbox"/> MDR-Acinetobacter	
*Specimen Body Site/System:	*Specimen Source:
*Resident Care Location:	
*Primary Resident Service Type: (check one)	
<input type="checkbox"/> Long-term general nursing <input type="checkbox"/> Long-term dementia <input type="checkbox"/> Long-term psychiatric <input type="checkbox"/> Skilled nursing/Short-term rehab (subacute) <input type="checkbox"/> Ventilator <input type="checkbox"/> Bariatric <input type="checkbox"/> Hospice/Palliative	
*Has resident been transferred from an acute care facility in the past 4 weeks? Yes No	
If Yes, date of last transfer from acute care to your facility: __/__/__	
If Yes, was the resident on antibiotic therapy for this specific organism type at the time of transfer to your facility? Yes No	
Custom Fields	



Table 5. Instructions for Completion of the LTCF Laboratory-identified (LabID) MDRO or CDI Event form (CDC 57.138)

Data Field	Instructions for Form Completion
Facility ID	The NHSN-assigned facility ID number will be auto-entered by the system.
Event ID	Event ID number will be auto-entered by the system.
Resident ID	Required. Enter the alphanumeric resident ID. This is the resident identifier assigned by the facility and may consist of any combination of numbers and/or letters. This should be an ID that remains the same for the resident across all visits and admissions.
Social Security #	Required. Enter the resident's 9-digit numeric Social Security Number or Tax Identification (ID) Number.
Medicare number	<i>Optional.</i> Enter the resident Medicare number or comparable railroad insurance number.
Resident Name, Last, First, Middle	<i>Optional.</i> Enter the name of the resident.
Gender	Required. Select M (Male) or F (Female) to indicate the gender of the resident.
Date of Birth	Required. Record the date of the resident's birth using this format: MM/DD/YYYY.
Ethnicity (specify)	<i>Optional.</i> Enter the resident's ethnicity: Hispanic or Latino, Not Hispanic or Not Latino.
	<i>Optional.</i> Enter the resident's race: White, Black or African American, Asian or Pacific Islander, American Indian or Alaska Native, Other.

To begin NHSN Enrollment...Select *Enroll Here*

National Healthcare Safety Network (NHSN)

NHSN

NHSN Login

About NHSN +

Enroll Here +

Materials for Enrolled Facilities -

Ambulatory Surgery Centers +

Acute Care Hospitals/Facilities +

Long-term Acute Care Hospitals/Facilities +

Long-term Care Facilities -

Surveillance for C. difficile and MRSA Infections

Surveillance for Urinary Tract Infections

Surveillance for Healthcare Personnel Exposure

Surveillance for Healthcare Personnel Vaccination

Surveillance for Process Measures - Hand Hygiene, Gloves and Gown Adherence

Outpatient Dialysis Facilities +

Respite +

[CDC](#) > [NHSN](#) > [Materials for Enrolled Facilities](#)

Tracking Infections in Long-term Care Facilities



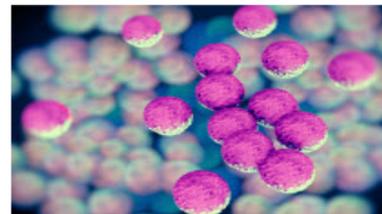
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MDRO/C.Diff - Surveillance for C. difficile, MRSA, and other Drug-resistant Infections

- Training
- Protocols
- Forms
- Support Materials
- Analysis Resources
- FAQs



More >

Report Prevention Process Measures - Hand Hygiene, Gloves and Gown Adherence

- Training
- Protocols
- Forms
- Support Materials
- Analysis Resources
- FAQs



Surveillance for Health

Select Enrollment for Long-term Care Facilities

Enroll Here	-
Enrollment for Ambulatory Surgery Centers	+
Acute Care Hospitals/Facilities	+
Enrollment for Long-term Acute Care Hospitals/Facilities	+
Enrollment for Inpatient Rehabilitation Facilities	+
Enrollment for Inpatient Psychiatric Facilities	+
Enrollment for Long-term Care Facilities	+
Enrollment for Outpatient Dialysis Facilities	+
FAQs About Enrollment	
Materials for Enrolled Facilities	+
Group Users	+
Analysis Resources	+
Annual Reports	
CMS Requirements	+
National Quality Forum (NQF)	
Newsletters	
E-mail Updates	



Acute Care Hospitals / Facilities



Enrollment for urgent care or other short-term stay facilities (e.g. critical access facilities, oncology facilities, military/VA facilities)

[More >](#)

Ambulatory Surgery Centers



Enrollment for outpatient surgery centers.

[More >](#)

Long-term Acute Care Facilities



Enrollment for long-term acute care hospitals (LTACs).

[More >](#)

Long-term Care Facilities



Enrollment for nursing homes, assisted living and residential care, chronic care facilities and skilled nursing facilities.

Outpatient Dialysis Facilities



Enrollment for outpatient dialysis clinics.

[More >](#)

Inpatient Rehabilitation Facilities



Enrollment for inpatient rehabilitation facilities.

[More >](#)

Follow the 5-Step Enrollment for LTCF Process

National Healthcare Safety Network (NHSN)

NHSN

NHSN Login

About NHSN +

Enroll Here -

Enrollment for Ambulatory Surgery Centers +

Acute Care Hospitals/Facilities +

Enrollment for Long-term Acute Care Hospitals/Facilities +

Enrollment for Inpatient Rehabilitation Facilities +

Enrollment for Inpatient Psychiatric Facilities +

Enrollment for Long-term Care Facilities -

Set-up

Enrollment for Outpatient Dialysis Facilities +

FAQs About Enrollment

Materials for Enrolled Facilities +

Group Users +

Analysis Resources +

Annual Reports

CMS Requirements +

Quality Forum

[CDC](#) > [NHSN](#) > [Enroll Here](#)

5-Step Enrollment for Long-term Care Facilities



Note: Once your facility is enrolled in NHSN, you can add additional reporting options using your monthly reporting plan or activating a new component within the NHSN application. You do not need to re-enroll for each type of event reported.

Step 1: Training and Preparation



Print and follow [LTCF detailed checklist](#) [PDF - 209 KB] to ensure successful and efficient enrollment.

Complete required trainings: [Overview of the Long-term Care Facility Component January 2015](#) [PDF - 350 KB] and Enrollment: [Getting Access to NHSN for your LTCF](#) [PDF - 1.8 MB]. **Note:** The Enrollment training is a useful guide through the enrollment process.

Complete the [Facility Contact form](#) [PDF - 63 KB] and [Annual Facility Survey for LTCF](#) [PDF - 66 KB] January 2015

These forms will assist with collecting the required information that will be needed to complete the electronic versions in Steps 2 and 4. Do not submit these forms to NHSN. Detailed instructions for completing the Annual Facility Survey for LTCF are located in the [Table of Instructions](#) [PDF - 433 KB] document.

Check trusted websites and spam blocker settings (see [detailed checklist](#) [PDF - 209 KB]).

For detailed enrollment instructions, download the [NHSN Facility Administrator Enrollment Guide March 2014](#) [PDF - 689 KB]. **Note:** This guide is not specific to Long-Term Care Facilities.

Time to complete step 1: 3 hours, 15 minutes



Step 2: Agree to NHSN Rules of Behavior and Register



After electronically agreeing to the registration...

Take Advantage of Online Enrollment Training Resources

<http://www.cdc.gov/nhsn/pdfs/training/ltc/lctcf-enrollment-training.pdf>

NHSN

- NHSN Login
- About NHSN +
- Enroll Here -
- Enrollment for Ambulatory Surgery Centers +
- Acute Care Hospitals/Facilities +
- Enrollment for Long-term Acute Care Hospitals/Facilities +
- Enrollment for Inpatient Rehabilitation Facilities +
- Enrollment for Inpatient Psychiatric Facilities +
- Enrollment for Long-term Care Facilities** -
- Set-up
- Enrollment for Outpatient Dialysis Facilities +
- FAQs About Enrollment
- Materials for Enrolled Facilities +

[CDC](#) > [NHSN](#) > [Enroll Here](#)

5-Step Enrollment for Long-term Care Facilities

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National Healthcare Safety Network (NHSN)

NHSN

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About NHSN	+
Enroll Here	+
Materials for Enrolled Facilities	-
Ambulatory Surgery Centers	+
Acute Care Hospitals/Facilities	+
Long-term Acute Care Hospitals/Facilities	+
Long-term Care Facilities	-
Surveillance for C. difficile and MRSA Infections	
Surveillance for Urinary Tract Infections	
Surveillance for Healthcare Personnel Exposure	
Surveillance for Healthcare Personnel Vaccination	
Surveillance for Process Measures - Hand Hygiene, Gloves and Gown Adherence	
Outpatient Dialysis Facilities	+
Inpatient Rehabilitation Facilities	+
Inpatient Psychiatric Facilities	+
MDRO & CDI LabID Event Calculator	
VAE Calculator	
FAQs about HCP Influenza Vaccination Summary Reporting in NHSN	
FAQs About the Hemovigilance Module	
Group Users	+
Analysis Resources	+
Annual Reports	
CMS Requirements	+
National Quality Forum (NQF)	
Newsletters	
E-mail Updates	
Data Validation Guidance	
Clinical Document Architecture (CDA)	+

CDC > NHSN > [Materials for Enrolled Facilities](#)

Tracking Infections in Long-term Care Facilities



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MDRO/C.Diff - Surveillance for C. difficile, MRSA, and other Drug-resistant Infections

- Training
- Protocols
- Forms
- Support Materials
- Analysis Resources
- FAQs



[More >](#)

Report Prevention Process Measures - Hand Hygiene, Gloves and Gown Adherence

- Training
- Protocols
- Forms
- Support Materials
- Analysis Resources
- FAQs



[More >](#)

Surveillance for Healthcare Personnel Exposure

- Training
- Protocols
- Forms
- Support Materials
- Analysis Resources
- FAQs



[More >](#)

Surveillance for Healthcare Personnel Vaccination

- Training
- Protocols
- Forms
- Support Materials
- Analysis Resources
- FAQs



[More >](#)

UTI - Report Urinary Tract Infections

- Training
- Protocols
- Forms
- Support Materials
- Analysis Resources
- FAQs



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[State-based HAI Prevention Activities](#)

Click here to access training

National Healthcare Safety Network (NHSN) Training



Our mission is to offer learning opportunities in a variety of formats that enhance the knowledge and skills of NHSN facility- and group-level participants and their partners in order that they may effectively use the data obtained from the surveillance system to improve patient and healthcare personnel safety.

Objectives

- Convey NHSN data collection methods, submission requirements, and analysis options to participants so that they may acquire, submit, and disseminate high quality, actionable data.
- Prepare participants to use the NHSN reporting application accurately and efficiently.
- Enhance participants' and their partners' understanding of data quality and the value of adverse event monitoring.
- Encourage collaboration among participants and partners to improve the patient and healthcare personnel safety across the spectrum of care.



COURSE CATALOG

Course descriptions for NHSN components, modules and events.



ENROLLMENT AND SETUP TRAINING

Self-paced training for new NHSN enrollment and existing facility set-up.



DATA ENTRY AND ANALYSIS

Self-paced training for data entry, import, customization and analysis.



REQUEST CDC LED TRAINING

Webinar / In-person training policy and request.



CONTINUING EDUCATION

CE available free of charge for all NHSN education course work.



PATIENT SAFETY COMPONENT TRAINING

Self-paced training for specific module and events.



DIALYSIS COMPONENT TRAINING

Self-paced training for outpatient dialysis facilities.



HEALTHCARE PERSONNEL SAFETY COMPONENT TRAINING

Self-paced training for specific module and events.



BIOVIGILANCE COMPONENT TRAINING

Self-paced training for specific module and events.



LONG-TERM CARE FACILITY COMPONENT TRAINING

Self-paced training for long-term care facilities enrollment and set-up.



[Access NHSN Demo](#)



2016 NHSN Annual Training
Feb 29th - Mar 4th

[Click here for LTCF training resources](#)

NHSN Home

NHSN Training

NHSN Demo +

Course Catalog

Long-term Care Facility Component

Enrollment and Setup Training

Data Entry and Analysis

Patient Safety Component

Dialysis Component +

Healthcare Personnel Safety Component

Biovigilance Component

Continuing Education

Request CDC Led Training +

2016 Annual Training



Get Email Updates

To receive email updates

[CDC](#) > [NHSN Home](#)

Long-term Care Facility Component Training



Training Resources

Overview of the Long-term Care Facility Component

- [Overview of the Long-term Care Facility Component January 2015](#) [PDF - 350 KB]

Enrollment and Set-up

- [Enrollment training](#) [PDF - 2 MB] January 2015.
- [Set-up March 2015](#) [PDF - 3 MB]

Secure Access Management Services (SAMS) Registration Process

- [SAMS registration process](#) [PDF - 1.2 MB] January 2015.

Laboratory-identified (LabID) Event: *C. difficile*, MRSA, and other drug-resistant organisms

- [LTCF LabID Event Training January 2015](#) [PDF - 151 KB]

Urinary Tract Infections

- [LTCF UTI Event Training January 2015](#) [PDF - 915 KB]

Prevention Process Measures - Hand Hygiene, Gloves and Gown Adherence

- [LTCF Prevention Process Measures Training](#) [PDF - 783 KB]

National Healthcare Safety Network (NHSN)

NHSN

NHSN Login

About NHSN

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Enroll Here

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Materials for Enrolled Facilities

+

Group Users

Click *Group Users* to access resources and training for Group Users

Analysis Resources

+

Annual Reports

CMS Requirements

+

National Quality Forum (NQF)

Newsletters

E-mail Updates

Data Validation Guidance

Clinical Document Architecture (CDA)

+

HIPAA Privacy Rule

+



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[CDC](#) > [NHSN](#) > [Materials for Enrolled Facilities](#)

Tracking Infections in Long-term Care Facilities



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Report Prevention Process Measures - Hand Hygiene, Gloves and Gown Adherence

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National Healthcare Safety Network (NHSN)

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E-mail Updates
Data Validation Guidance
Clinical Document Architecture (CDA) +
HIPAA Privacy Rule +

[CDC](#) > [NHSN](#)

NHSN Group Users

View resources for group users



Enrollment steps for new NHSN group users

The NHSN Facility Administrator is the only person who can enroll a facility in NHSN or reassign the role of Facility Administrator. The Facility Administrator will also have the ability to confer rights to groups, that is, entities with which your hospital wants to share some/all of its data (e.g., a hospital, a state or county health department, corporate headquarters). For facilities participating in more than one NHSN Component, the NHSN Facility Administrator should be a person with authority across the involved departments.

NHSN User Resources

Guides for Group Functions

- [Guide to Creating a Group in NHSN February 2015](#) [PDF - 1 MB]
- [Guide to Joining a Group in NHSN February 2015](#) [PDF - 1 MB]
- [Guide to Setting Up the Confer Rights Template - Patient Safety Component February 2015](#) [PDF - 1 MB]

> Group Administrator

> FAQs

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[State-based HAI Prevention](#)

[Activities](#)

Prevention Resources

<http://www.cdc.gov/longtermcare/index.html>

Nursing Homes and Assisted Living (Long-term Care Facilities [LTCFs])



Nursing homes, skilled nursing facilities, and assisted living facilities, (collectively known as long-term care facilities, LTCFs) provide a variety of services, both medical and personal care, to people who are unable to manage independently in the community. Over 4 million Americans are admitted to or reside in nursing homes and skilled nursing facilities each year and nearly one million persons reside in assisted living facilities. Data about infections in LTCFs are limited, but it has been estimated in the medical literature that:

- 1 to 3 million serious infections occur every year in these facilities.
- Infections include urinary tract infection, diarrheal diseases, antibiotic-resistant staph infections and many others.
- Infections are a major cause of hospitalization and death; as many as 380,000 people die of the infections in LTCFs every year.



CLINICAL STAFF INFORMATION

Fact sheets, guidelines, reports, and resources

RESIDENT INFORMATION

Fact sheet, patient safety and other information

PREVENTION TOOLS

Checklists, fact sheet, toolkits, and additional links

HEALTH DEPARTMENT RESOURCES

State-developed resources and information



[The Core Elements of Antibiotic Stewardship for Nursing Homes](#)



The Department of Health and Human Services has developed a strategy to address infections in Long-term Care Facilities in Phase 3 of the [National Action Plan to Prevent Health Care-Associated Infections: Road Map to Elimination](#)



Making nursing homes better places to live, work and visit. [Advancing Excellence in America's Nursing Homes](#)

Other Resources



Antibiotic Stewardship



Injection Safety



Dialysis Safety



Protecting Healthcare Personnel



Hand Hygiene



Tracking Infections in LTCFs Using the NHSN



Healthcare-Associated Infections



Sepsis

Other CDC Links for LTC Settings

[Hepatitis Prevention in Healthcare](#)

[Influenza Outbreak Guidance for LTCF](#)

[Other Influenza Resources for Healthcare Providers](#)



Take a Break and Recharge