IMPROVING THE QUALITY OF NATIONAL HEALTHCARE SAFETY NETWORK (NHSN) DATA: EXPERIENCE FROM THE FIELD

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Infection Prevention and Control/Epidemiology
Objectives

- Apply knowledge learned from the Centers for Medicare & Medicaid Services (CMS), Centers for Disease Control and Prevention (CDC) pilot project to support accurate data reporting
- Describe common *Clostridium difficile* data reporting errors in NHSN
- Demonstrate long-term care facility (LTCF) data surveillance and collection strategies
- Share national educational resources
**Clostridium difficile** Infection (CDI) Initiative Impact on NHSN Enrollment

NHSN Enrolled LTCFs

<table>
<thead>
<tr>
<th>Month</th>
<th>Count</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>March 2013</td>
<td>130</td>
<td></td>
</tr>
<tr>
<td>June 2016</td>
<td>2%</td>
<td>307</td>
</tr>
<tr>
<td>April 2017</td>
<td>17%</td>
<td>2,709</td>
</tr>
<tr>
<td>March 2018</td>
<td>21%</td>
<td>3,269</td>
</tr>
</tbody>
</table>
NHSN Enrollment as of March 23, 2018

NHSN Enrollment

7,015 Hospitals
(includes 531 LTAC)

7,219 Outpatient Hemodialysis Facilities

3,269 Long-term Care Facilities (LTCFs)

~12,000 LTCFs Remaining to Enroll!!
Data Reporting

Lessons Learned

• There is a steep learning curve (be patient)
• LTCF users are busy
• One size does not fit all (training material)
• Utilize national, state and local resources
Experience From the Field

2016-2017 Enrollment into NHSN
- Secure Access Management Services (SAMS) Grid Card
- NHSN Annual Survey
- Set-up facility locations, add-users

2017
- 10-months data collection baseline
- Accurate CDI Data Surveillance

2018
- Post-Baseline Intervention
# NHSN Surveillance Table of Instructions

## National Healthcare Safety Network (NHSN)

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

### Resources for NHSN Users Already Enrolled

- **Training**
- **Protocol**
- **Data Collection Forms**

### All Data Collection Forms are Print-only

- **57.138 LabID Event Form for LTCF January 2018**
  - Customizable form
  - [PDF - 49K]
- **Table of Instructions - LabID Event Form for LTCF**
  - [PDF - 280K]
- **57.140 MRSA and C Diff Monthly Monitoring for LTCF January 2018**
  - [PDF - 44K]
- **Table of Instructions - MRSA and C Diff Monthly Monitoring for LTCF**
  - [PDF - 48K]
- **57.142 Denominators for LTCF January 2018**
  - [PDF - 40K]
  - Customizable form
  - [DOCX - 29K]
- **Table of Instructions - Denominators for LTCE**
  - [PDF - 162K]
- **57.141 Monthly Reporting Plan for LTCE January 2018**
  - [PDF - 42K]
  - Customizable form
  - [DOCX - 27K]
- **Table of Instructions - Monthly Reporting Plan for LTCE**
  - [PDF - 129K]

**New Users - Start Here**

- Step 1: Enroll into NHSN
- Step 2: Set up NHSN
- Step 3: Report
  - [Click here to enroll](https://www.cdc.gov/nhsn/ltc/cdiff-mrsa/index.html)
Reporting Quality Data: NHSN Training Videos

https://www.youtube.com/watch?v=EY1GQfv9tTg
### NHSN Reporting Checklist: Best Practice

1. Review Monthly Reporting Plan (MRP) and update as necessary

2. Identify and enter all *C. difficile* LAB ID events

3. Enter monthly summary report data

4. Resolves “Alerts”, if applicable
NHSN Data Quality Checks

NHSN Annual Survey

Monthly Reporting Plan

Monthly CDI Events

Monthly Summary Report
BEFORE WE DIVE INTO THE DATA…

Logging into SAMS…Quick Tip
1. Enter your Username and SAMS Password

2. Enter the SAMS Grid Card Criteria

**Warning:** This warning banner provides privacy and security notices consistent with applicable federal laws, directives, and other federal guidance for accessing this Government system. Includes all devices/storage/media attached to this system. This system is provided for Government-authorized use only. Unauthorized or improper use of this system is prohibited as it may result in disciplinary action and/or civil and criminal penalties. A person using this system consents to having any and all activity on the system monitored and audited. Therefore, you have no reasonable expectation of privacy. Any communication or data transferred using this system may be disclosed or used for any lawful Government purpose.
Primary Laboratory Testing Type

The Problem

- Primary testing method for *C. difficile* is not known or inaccurately reported.

Importance

- Accuracy is important as the response may be used for risk-adjustment of data.
NHSN Annual Survey: Primary Laboratory Testing Type

NHSN - National Healthcare Safety Network

Find Annual Survey

- Enter search criteria and click Find
- Fewer criteria will return a broader result set
- More criteria will return a narrower result set

Facility ID: [LTCF/QIN-QIO Project - Test (ID 45188) ]
Survey Year: 2017

[Find] [Clear] [Back]
3. What is the primary testing method for C. difficile used most often by your facility’s laboratory or the outside laboratory where your facility’s testing is performed? *

- Enzyme immunoassay (EIA) for toxin
- Cell cytotoxicity neutralization assay
- Nucleic acid amplification test (NAAT) (e.g., PCR, LAMP)
- NAAT plus EIA, if NAAT positive (2-step algorithm)
- Glutamate dehydrogenase (GDH) antigen plus EIA for toxin (2-step algorithm)
- GDH plus NAAT (2-step algorithm)
- GDH plus EIA for toxin, followed by NAAT for discrepant results
- Toxigenic culture (C. difficile culture followed by detection of toxins)
- Other (specify) ____________________________

(“Other” should not be used to name specific laboratories, reference laboratories, or the brand names of the C. difficile tests; most methods can select from the options provided. Please ask your laboratory, refer to the Tables of Instructions for this form, or conduct a search for further option to report.)

4. Does your laboratory provide a report summarizing the percent of antibiotic resistance seen in common organisms identified in cultures sent from your facility (often called an antibiogram)? * Y - Yes  

Scroll to the bottom and click ‘Edit’
Facility Microbiology Laboratory Practices

1. Does your facility have its own laboratory that performs microbiology/antimicrobial susceptibility testing? * N - No
   If No, where is your facility's antimicrobial susceptibility testing performed? * REFLAB - Commercial referral laboratory

2. Indicate whether your facility screens new admissions for any of the following multidrug-resistant organisms: (check all that apply) *
   ☑ We do not screen new admissions for MDROs

3. What is the primary testing method for C. difficile used most often by your facility’s laboratory or the outside laboratory where your facility’s testing is performed? *
   - Enzyme immunoassay (EIA) for toxin
   - Cell cytotoxicity neutralization assay
   - Nucleic acid amplification test (NAAT) (e.g., PCR, LAMP)
   - NAAT plus EIA, if NAAT positive (2-step algorithm)
   - Glutamate dehydrogenase (GDH) antigen plus EIA for toxin (2-step algorithm)
   - GDH plus NAAT (2-step algorithm)
   - GDH plus EIA for toxin, followed by NAAT for discrepant results
   - Toxigenic culture (C. difficile culture followed by detection of toxins)
   - Other (specify)

4. Does your laboratory provide a report summarizing the percent of antibiotic resistance seen in common organisms identified in cultures sent from your facility (often called an antibiogram)? * Y - Yes
   If Yes, how often is this summary report or antibiogram provided to your facility? * YR - Once a year

Scroll to the bottom and click ‘Save’

Annual Survey saved successfully.
NHSN Monthly Reporting Plan

Step 1: Monthly Reporting Plan

A monthly reporting plan is required for each month that a facility will enter data into NHSN

https://www.youtube.com/watch?v=nN0Jw-jxFco
NHSN Monthly Reporting Plan

The Problem

- Extra reporting modules are selected

Importance

- Will be required to complete summary data for modules that you are not conducting surveillance for
- May result in inaccurate reporting to the NHSN

Remember!
Monthly Reporting Plan: Identify the Problem and Action Steps

**Identify the Problem:** Find Monthly Reporting Plan

- Enter search criteria and click Find
- Fewer criteria will return a broader result set
- More criteria will return a narrower result set
Monthly Reporting Plan: Current Plan

Action: If an LTCF needs to change an inaccurately created MRP, they can “Find”, “Edit” and “Save” the changes.

***This is not an option if the LTCF has already created a Summary Report for that month. The LTCF will need to delete the Summary Report first, then go in and edit the MRP.
MDRO & CDI LabID summary data exist for 1/2018, you cannot remove CREECOLI from plan. MDRO & CDI LabID summary data exist for 1/2018, you cannot remove CREENTERO from plan. MDRO & CDI LabID summary data exist for 1/2018, you cannot remove CREKLEB from plan.
Monthly Reporting Plan: Action to Edit a Plan
Once the Summary Data has Been Entered

Delete **Summary Data** to Make a Change in Monthly Reporting Plan
Monthly Reporting Plan:
Identify the Problem and Action Steps
Monthly Reporting Plan: Identify the Problem and Action Steps

NHSN - National Healthcare Safety Network

View Monthly Reporting Plan

Mandatory fields marked with *

Facility ID *: LTCF/QIN-QIO Project: Test (45188)
Month *: January
Year *: 2018

☐ No Long Term Care Facility Component Modules Followed this Month

HAI Module

<table>
<thead>
<tr>
<th>Locations</th>
<th>UTI</th>
</tr>
</thead>
<tbody>
<tr>
<td>Facility-wide Inpatient</td>
<td></td>
</tr>
</tbody>
</table>

LabID Event Module

<table>
<thead>
<tr>
<th>Locations</th>
<th>Specific Organism Type</th>
<th>Lab ID Event All Specimens</th>
</tr>
</thead>
<tbody>
<tr>
<td>Facility-wide Inpatient</td>
<td>CDIF - C. difficile</td>
<td>☑</td>
</tr>
<tr>
<td>Facility-wide Inpatient</td>
<td>CRE - CRE (CRE-E coli, CRE-Enterobacter, CRE-Klebsiella)</td>
<td>☑</td>
</tr>
</tbody>
</table>

Prevention Process Measure Module

<table>
<thead>
<tr>
<th>Locations</th>
<th>Hand Hygiene</th>
<th>Gown and Gloves Use</th>
</tr>
</thead>
<tbody>
<tr>
<td>Facility-wide Inpatient</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Edit Current Reporting Plan

Edit Monthly Reporting Plan

Mandatory fields marked with *

Facility ID*: LTCF/QIN-QIO Project - Test (45188)
Month*: January
Year*: 2018

☐ No Long Term Care Facility Component Modules Followed this Month

HAI Module

<table>
<thead>
<tr>
<th>Locations</th>
<th>UTI</th>
</tr>
</thead>
<tbody>
<tr>
<td>Facility-wide Inpatient (FacWIDEl)</td>
<td></td>
</tr>
</tbody>
</table>

LabID Event Module

<table>
<thead>
<tr>
<th>Locations</th>
<th>Specific Organism Type</th>
<th>Lab ID Event All Specimens</th>
</tr>
</thead>
<tbody>
<tr>
<td>Facility-wide Inpatient (FacWIDEl)</td>
<td>CDIF - C. difficile</td>
<td>✓</td>
</tr>
</tbody>
</table>

Prevention Process Measure Module

<table>
<thead>
<tr>
<th>Locations</th>
<th>Hand Hygiene</th>
<th>Gown and Gloves Use</th>
</tr>
</thead>
<tbody>
<tr>
<td>Facility-wide Inpatient (FacWIDEl)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Save | Back

Plan saved successfully.
Enter Summary Data That Was Deleted
Enter Summary Data That Was Deleted

*Notice UTI and CRE are now removed
Monthly CDI Event

https://www.youtube.com/watch?v=EFAxtiT3zCk
Monthly CDI Events

National Healthcare Safety Network (NHSN)

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

- Training
  - Protocol
    - Data Collection Forms
      - All Data Collection Forms are Print-only
        - [57.138 LabID Event Form for LTCF January 2018](https://www.cdc.gov/nhsn/ltc/cdiff-mrsa/index.html)
          - [Customizable form](https://www.cdc.gov/nhsn/ltc/cdiff-mrsa/index.html) (DOCX - 28K)
          - Table of Instructions - LabID Event Form for LTCF (PDF - 28K)
        - [57.139 MDRO and CDI Monthly Monitoring for LTCF January 2018](https://www.cdc.gov/nhsn/ltc/cdiff-mrsa/index.html)
          - Table of Instructions - MDRO and CDI Monthly Monitoring for LTCF (PDF - 44K)
        - [57.142 Denominators for LTCF January 2018](https://www.cdc.gov/nhsn/ltc/cdiff-mrsa/index.html)
          - (PDF - 48K)

Remember: Only results from unformed/loose stool specimens, conforming to the shape of the container should be included in CDI LabID event surveillance and reporting.
Monthly CDI Events: Reporting Error # 1

Problem

- LTCFs create a CDI Event for residents admitted on CDI treatment

Importance

- Duplication
- Inflate CDI incident-onset
- Affect national, state and facility-level CDI rates
CDI Event Error # 1: Creating a *C. diff* Event When the Resident Was **Admitted** on *C. diff* Treatment
CDI Event Error # 1: Action

If the resident was admitted on C. diff treatment and CDI Event was created, find the event and delete.

Do Not Create a CDI Event for a Resident Admitted/Readmitted on C. diff Treatment
If the date of event is before the admission to your facility add to your **summary data**.
Monthly CDI Events: Reporting Error # 2

Problem

• Reporting antibiotic therapy for CDI organism type when the resident was on an antibiotic for ‘other’ organism type

Importance

• Misrepresent the number of residents on antibiotic therapy for CDI
• Can influence infection prevention strategies considering recurrence is a common risk-factor for residents with CDI
CDI Event Error # 2: Antibiotic Therapy

Many LTCFs enter ‘Y’ if the Resident is on **any** antibiotic therapy.

<table>
<thead>
<tr>
<th>Event Information</th>
<th>Custom Fields</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>Event Type: LABID - Laboratory-identified MDRO or CDI Event</td>
<td>TSF FROM TRENT:</td>
<td>ADMITTED ON CIPRO</td>
</tr>
<tr>
<td>Specific Organism Type: CDIF - C. difficile</td>
<td>TSF FROM SANTA:</td>
<td></td>
</tr>
<tr>
<td>Specimen Body Site/System: DIGEST - Digestive System</td>
<td>TEST:</td>
<td></td>
</tr>
<tr>
<td>Specimen Source: STOOL - Stool specimen</td>
<td>TEST2:</td>
<td></td>
</tr>
<tr>
<td>Resident Care Location: NHA - NEIGHBORHOOD A</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Primary Resident Service Type: SKNUR - Skilled nursing/short term rehab</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Has resident been transferred from an acute care facility in the past 4 weeks? Y - Yes</td>
<td></td>
<td></td>
</tr>
<tr>
<td>If Yes, date of last transfer from acute care to your facility: 03/01/2017</td>
<td></td>
<td></td>
</tr>
<tr>
<td>If Yes, was the resident on antibiotic therapy for this specific organism type at the time of transfer to your facility? Y - Yes</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Documented evidence of previous infection or colonization with this specific organism type from a previously reported LabID Event in any prior month? Y - Yes</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
**Action:** Verify that the resident was in fact admitted on antibiotics for **CDI Organism Type**.
CDI Event Report: Problem 2 Action

**Action:** Verify that the resident was in fact admitted on antibiotics for **CDI Organism Type**, edit and save if applicable.
3: NHSN Monthly Summary Report

https://www.youtube.com/watch?v=Dwp8SebX6Lc

* This is not the same as CDI events that occurred in your facility.
NHSN Summary Report: Error # 1

Problem

• Number of residents on CDI treatment are incorrectly added

Importance

• Over reporting of residents admitted on CDI treatment
• Affects admitted with CDI prevalence
### NHSN Summary Report: Error # 1

#### Add Monthly Summary Data

Mandatory fields marked with *
Fields required for record completion marked with **

**Facility ID:** LTCF/QIN-QP Project - Test (ID 45188)
- **Month:** March
- **Year:** 2018

#### Denominators for Long Term Care Locations
- No long term care locations selected on monthly reporting plan

#### MRSA & CDI LabID Event Reporting

<table>
<thead>
<tr>
<th>Location Code</th>
<th>Resident Admissions:</th>
<th>Resident Days:</th>
<th>LabID Event (All specimens)</th>
<th>Report No Events</th>
<th>Specific Organism Type</th>
<th>MRSA</th>
<th>VRE</th>
<th>CepH-Klebsiella</th>
<th>CRE-Ecoli</th>
<th>CRE-Enterobacter</th>
<th>CRE-Klebsiella</th>
<th>C. difficile</th>
<th>MDR-Acinetobacter</th>
</tr>
</thead>
<tbody>
<tr>
<td>Facility-wide Inpatient FacWIDEInc</td>
<td></td>
<td></td>
<td></td>
<td></td>
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<td></td>
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<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

*Number of Admissions on C. diff Treatment:

- No long term care locations selected on monthly reporting plan

Save  Back
NHSN Summary Report: Error # 1

**Action:**

Report only residents who were admitted and/or readmitted and taking antibiotics specifically for their *C. diff* infection.

Does not include residents that were tested and confirmed positive within your LTCF (exclusion for outpatient).

Review monthly admission to determine who was admitted with *C. diff* versus those that were tested by your LTCF.
NHSN Summary Report: Error # 2

Problem

- No Lab ID Events Box Not Checked
  - Sometimes the checks no events box is at the far right of your monitor.
  - If the summary data is entered before the Event then this box will not be grayed out.

Importance

- If there were no CDI events and this box was not checked then the summary data will not save and an ALERT will be created.
Summary Data: What Happens

Mandatory fields marked with *
Fields required for record completion marked with **

Facility ID  : LTCF/QIN-QIO Project - Test (ID 45188) ✓
    Month  : March ✓
    Year   : 2018 ✓

Denominators for Long Term Care Locations
- No long term care locations selected on monthly reporting plan

MDRO & CDI LabID Event Reporting

<table>
<thead>
<tr>
<th>Location Code</th>
<th>Resident Admissions: 12</th>
<th>Resident Days: 1350</th>
<th>LabID Event (All specimens) Report No Events</th>
<th>Specific Organism Type</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>MISA</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>VRE</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>CepH-Klebsiella</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>CRE-Clostridium</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>CRE-Enterobacter</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>CRE-Klebsiella</td>
</tr>
</tbody>
</table>

Prevention Process Measures
- No long term care locations selected on monthly reporting plan
Summary Report Alert

NHSN Home
- Alerts
- Reporting Plan
- Resident
- Event
- Summary Data
- Surveys
- Analysis
- Users
- Facility
- Group
- Logout

NHSN Long Term Care Facility Component Home Page

Action Items

COMPLETE THESE ITEMS

ALERTS

2

Missing Summary Data
Summary Reports No Events: Check the Box!

If you had no CDI events and **do not** see the box to check, scroll until you see it!

Sometimes the checks no events box is at the far right of your monitor.
Collect data at the same time every month

Align with other data submission requirements

Utilize electronic health record (EHR) reports to extract data
This Question Was Asked to LTCF Users:

How do you capture NHSN data? If by EHR, what reports are used to obtain the data? If obtained by manual calculation, please explain.
NHSN Annual Survey # 1: Census Variables

Add Annual Survey

Mandatory fields marked with *

Facility ID *: LTCF/QIN-QIO Project - Test (ID: 45168)  
National Provider ID *:  
Survey Year *:  
State Provider #:  

Facility Characteristics

Facility ownership *:  
Affiliation *:  
Certification *:  

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 *:  
Total 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):

- Long-term general nursing *:
- Long-term dementia *:
- Skilled nursing/Short-term (subacute) rehabilitation *:
- Long-term psychiatric (non-dementia) *:
- Ventilator *:
- Bariatric *:
- Hospice/Palliative *:
Annual Survey #1: Census Data Variables

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: __________

Electronic Health Records: Facility Information, Summary Report/Census Report, some manual calculations may be required.

Business/accounting office which often uses Electronic Health Record

Physical Therapy assists with collecting the average length of stay for short stay residents

Admission discharge transfer report in Electronic Health Record

Manual calculation (short-stay/long-stay): Length of stay by discharge report then add each line manually
Facility Microbiology Laboratory Practices

1. Does your facility have its own laboratory that performs microbiology/antimicrobial susceptibility testing? * □

2. Indicate whether your facility screens new admissions for any of the following multidrug-resistant organisms: (check all that apply) *
   □ We do not screen new admissions for MDROs
   □ Methicillin-resistant *Staphylococcus aureus* (MRSA)
   □ Vancomycin-resistant *Enterococcus* (VRE)
   □ Multidrug-resistant gram-negative rods (includes carbapenemase resistant *Enterobacteriaceae; multidrug-resistant Acinetobacter, etc.*

3. What is the primary testing method for *C. difficile* used most often by your facility’s laboratory or the outside laboratory where your facility’s testing is performed? *
   □ Enzyme immunoassay (EIA) for toxin
   □ Cell cytotoxicity neutralization assay
   □ Nucleic acid amplification test (NAAT) (e.g., PCR) (e.g., PCR, LAMP)
   □ NAAT plus EIA, if NAAT positive (2-step algorithm)
   □ Glutamate dehydrogenase (GDH) antigen plus EIA for toxin (2-step algorithm)
   □ GDH plus NAAT (2-step algorithm)
   □ GDH plus EIA for toxin, followed by NAAT for discrepant results
   □ Toxigenic culture (C. difficile culture followed by detection of toxins)
   □ Other (specify)
What is the primary testing method for *C. difficile* used most often by your facility’s laboratory or the outside laboratory where your facility’s testing is performed? (check one)

- Enzyme immunoassay (EIA) for toxin
- GDH plus NAAT (2-step algorithm)
- Cell cytotoxicity neutralization assay
- GDH plus EIA for toxin, followed by NAAT for discrepant results
- Nucleic acid amplification test (NAAT) (e.g., PCR, LAMP)
- Toxigenic culture (*C. difficile* culture followed by detection of toxins)
- NAAT plus EIA, if NAAT positive (2-step algorithm)
- Other (specify): ______________________
- Glutamate dehydrogenase (GDH) antigen plus EIA for toxin (2-step algorithm)

User contacts diagnostic laboratory to confirm testing type. If more than one diagnostic laboratory is used, the user selects the testing type most commonly used.

Pulled directly from the lab reports provided by the lab.
Add Event

Mandatory fields marked with *
Fields required for record completion marked with **

Resident Information

Facility ID: [LTCF/GN-QID Project - Test (ID 45188)]
Resident ID: [Find Find Events for Resident]
Social Security #: [Medicare number (or comparable railroad insurance number):]

Last Name: [ ]
Middle Name: [ ]
Gender: [ ]
Ethnicity: [ ]
Race: [ ]

Resident type: [ ]
Date of First Admission to Facility: [ ]

Event Information

Event Type: [LAB]
Specific Organism Type: [ ]
Specimen Body Site/System: [ ]
Specimen Source: [ ]
Resident Care Location: [ ]
Primary Resident Service Type: [ ]

Has resident been transferred from an acute care facility in the past 4 weeks? [ ]

Documented evidence of previous infection or colonization with this specific organism type from a previously reported LabID Event in any prior month? [ ]

Date Specimen Collected: [16]
CDI Events # 1: Specimen Collection Date

Electronic Health Records: Admission documents

New orders for *C. diff* stool testing kept on a daily NHSN Log used for monthly reporting

Nurses notes

Lab report
CDI Events #2: Resident Transfer

Event Information

Event Type: LABID - Laboratory-identified MDRO or CDI Event

Specific Organism Type:

Specimen Body Site/System:

Specimen Source:

Resident Care Location:

Primary Resident Service Type:

Date Specimen Collected:

Has resident been transferred from an acute care facility in the past 4 weeks? Y - Yes

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?

Documented evidence of previous infection or colonization with this specific organism type from a previously reported LabID Event in any prior month?
CDI Events #2: Resident Transfer

Electronic Health Records: Facility activity report, Action summary report

Face sheet from discharging facility

Facility notes
### CDI Monthly Summary Report:

**Add Monthly Summary Data**

Mandatory fields marked with *
Fields required for record completion marked with **

** Facility ID**: LTGF/QIN-QIO Project - Test (ID: 45188)
** Month**: March
** Year**: 2018

**Denominators for Long Term Care Locations**
- No long term care locations selected on monthly reporting plan

#### MDRO & CDI LabID Event Reporting

<table>
<thead>
<tr>
<th>Location Code</th>
<th>Specific Organism Type</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>MDRSA</td>
</tr>
<tr>
<td>Resident Admissions:</td>
<td></td>
</tr>
<tr>
<td>Resident Days:</td>
<td></td>
</tr>
<tr>
<td>Facility-wide Inpatient (FacWIDEIn)</td>
<td></td>
</tr>
<tr>
<td>Number of Admissions on C. diff Treatment:</td>
<td></td>
</tr>
<tr>
<td>LabID Event (All specimens)</td>
<td></td>
</tr>
<tr>
<td>Report No Events</td>
<td></td>
</tr>
</tbody>
</table>

- Custom Fields
## CDI Monthly Summary Report #1: Resident Admissions

<table>
<thead>
<tr>
<th>Location Code</th>
<th>Specific Organism Type</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>MRSA</td>
</tr>
<tr>
<td>Facility-wide Inpatient (FacWIDEIn)</td>
<td><img src="image" alt="Resident Admissions" /></td>
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</tbody>
</table>

### Electronic Health Record: Daily census by unit and total census of the building, Action summary report

### Business office
# CDI Monthly Summary Report #2: Total Number of Resident Days

<table>
<thead>
<tr>
<th>Location Code</th>
<th>Resident Admissions:</th>
<th>Resident Days:</th>
<th>Number of Admissions on C. diff Treatment:</th>
<th>LabID Event (All specimens)</th>
<th>Report No Events</th>
<th>Specific Organism Type</th>
</tr>
</thead>
<tbody>
<tr>
<td>Facility-wide Inpatient (FacWIDEIn)</td>
<td><img src="FacWIDEIn" alt="Image" /></td>
<td><img src="Resident_Days" alt="Image" /></td>
<td><img src="Number_Admissions" alt="Image" /></td>
<td><img src="LabID_Event" alt="Image" /></td>
<td><img src="Report_No_Events" alt="Image" /></td>
<td>MRSA</td>
</tr>
<tr>
<td><img src="Custom_Fields" alt="Image" /></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Electronic Health Record:** Daily census by unit and total census of the building, Action Summary Report

**Business office**
Any residents admitted with *C. diff* are tracked in an infection control log.

Any new admission in the last 24 hours appears on the facility activity report along with medication orders and diagnosis.

Admission discharge transfer report.
There is Help…
# National Healthcare Safety Network (NHSN)

**NHSN**

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

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## 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.

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[CDC > NHSN > Materials for Enrolled Facilities](https://www.cdc.gov/nhsn/ltc/index.html)
QIO: Nursing Home Training Sessions

http://www.qioprogram.org/nursing-home-training-sessions
AHCA: Infection Preventionist Specialized Training–IPCO

Specialized training for healthcare professionals who seek to serve as the Infection Preventionist

Training will enable you to effectively implement and manage an infection control program at your facility

Online, self-study infection prevention program

https://educate.ahcanal.org/products/infection-preventionist-specialized-training-ipco
NHSN YOUTUBE Training Videos: HSAG QIN-QIO

https://www.youtube.com/user/hsagvideo
You Can
Do It!!!
QUESTIONS?

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Independent Consultant
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lloydkrejci@gmail.com