National Healthcare Safety Network

2019 Long-term Care Facility Component Annual Updates and Annual Facility Survey Review

January 9, 2019
January 30, 2019
What’s New in 2019?

Where can I find a list of the updates?

- December newsletter
- LTCF module web-pages under the protocol tab
- Blast e-mail sent to NHSN users
- NHSN version 9.2 Release Notes (12/12/18)
What’s New in 2019?

Name Change for *Clostridium difficile*

- *Clostridium difficile* infection (CDI), also known as *C. difficile* infection, has been reclassified as *Clostridioides difficile* (CDI), also known as *C. difficile* infection.
  - **Note:** Currently, the update is only reflected in the NHSN protocols, forms, and table of instructions.
What’s New in 2019?

Annual Facility Survey

- Soft alerts will appear when an uncommon testing method is selected for:
  - Cell cytotoxicity neutralization assay
  - Culture
Soft alerts will appear when “Other” is selected as primary testing method and:

- The testing method typed in the box matches a selection already available

What’s New in 2019?

Annual Facility Survey

3. What is the primary testing method for *C. difficile* used most often by you 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
- Culture (C. difficile culture followed by detection of toxins)
- Other (specify) [PCR]
What’s New in 2019?

Events

- A pop-up message will appear on the Event Page if the selected Resident Type (Short Stay [SS]) does not meet the NHSN definition based on the date of first admission and the event date.
What’s New in 2019?

Events

- A pop-up message will appear on the Event Page if the selected Resident Type (Long Stay [LS]) does not meet the NHSN definition based on the date of first admission and the event date.
Is the resident Short Stay or Long Stay?

- Do we count residents who have a respite stay, but are not admitted as short stay?
  - If they occupied a bed they should be counted.

- Do the 100 days per calendar year need to be consecutive to count as long-term stay?
  - Only if the resident was discharged for more than 30 consecutive days at a time, in which the “Date of First Admission to Facility” will change. In this case, the count will start over for determining resident type. If the resident leaves the facility for less than 30 days then the "Date of first admission to facility" would not change and the resident would remain as long stay.
### What’s New in 2019?

#### UTI Event

- **Urine culture requirements:**
  - Regardless of specimen collection method, resident must have at least one positive urine culture with no more than 2 species of microorganisms, at least one of which is a bacterium of $\geq 10^5 \text{ CFU/ml}$

<table>
<thead>
<tr>
<th>Specify Criteria Used</th>
<th>(check all that apply):</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Signs &amp; Symptoms</strong></td>
<td></td>
</tr>
<tr>
<td>□ Fever: Single temperature $&gt; 37.8^\circ C (&gt;100^\circ F)$ or $&gt;37.2^\circ C (&gt;99^\circ F)$ on repeated occasions, or an increase of $&gt; 1.1^\circ C (&gt;2^\circ F)$ over baseline</td>
<td></td>
</tr>
<tr>
<td>□ Rigors</td>
<td></td>
</tr>
<tr>
<td>□ New onset confusion/functional decline</td>
<td></td>
</tr>
<tr>
<td>□ New onset hypotension</td>
<td></td>
</tr>
<tr>
<td>□ Acute pain, swelling or tenderness of the testes, epididymis, or prostate</td>
<td></td>
</tr>
<tr>
<td>□ Acute dysuria</td>
<td></td>
</tr>
<tr>
<td>□ Purulent drainage at catheter insertion site</td>
<td></td>
</tr>
</tbody>
</table>

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**Laboratory & Diagnostic Testing**

- □ Specimen collected from clean catch voided urine and a positive culture with no more than 2 species of microorganisms, at least one of which is a bacterium of $\geq 10^5 \text{ CFU/ml}$
- □ Specimen collected from in/out straight catheter and a positive culture with no more than 2 species of microorganisms, at least one of which is a bacterium of $\geq 10^5 \text{ CFU/ml}$
- □ Specimen collected from indwelling catheter and a positive culture with no more than 2 species of microorganisms, at least one of which is a bacterium of $\geq 10^5 \text{ CFU/ml}$
- □ Leukocytosis ($> 14,000 \text{ cells/mm}^3$), or Left shift ($> 6\% \text{ or } 1,500 \text{ bands/mm}^3$)
- □ Positive blood culture with 1 matching organism in urine culture
Example Scenario – Should I Report Case as UTI?

- A resident of a LTC facility was complaining of new onset of dysuria. A urine culture was collected via straight catheter and the culture comes back positive for mixed flora, E. coli, and Candida glabrata $10^5$ CFU/ml.

A. YES

B. NO
Applying the NHSN Definition

If more than 2 species of microorganisms are present, the resident does not meet the urine culture requirement for an NHSN UTI regardless of colony count and how specimen was collected.
What’s New in 2019?

Monthly Summary Data/Denominators for LTCF

- Added a new required variable called “CDI Treatment Starts”
  - Estimate of CDI burden in a facility when empiric treatment for CDI occurs in the absence of confirmatory testing.
  - Include residents with treatment orders regardless of testing
CDI Treatment Starts

- Should all new treatments for CDI be counted, even if a test for *C. difficile* was not performed or if a *C. difficile* test result was negative?

A. Yes  
B. No
CDI Treatment Starts

- While a resident is being treated *C. difficile* infection, the provider orders repeat testing which was negative. The provider orders for the resident to continue with the previously ordered treatment. How do I count this?

✓ **Count new orders only.**

    Do not count continued treatment as separate counts. Remember, you should only capture new medication orders.
CDI Treatment Starts

- Should the number of residents started on antibiotic treatment for *C. difficile* include only residents with a positive *C. difficile* lab result?

A. Yes

✔️ B. No

**NO,** Number of *C. difficile* treatment starts should only include residents with a new order for treatment irrespective of lab results.

**Note**—if the resident had a new order for CDI treatment and had a positive *C. difficile* lab result, the resident will be counted once for C. diff treatment start and a CDI LabID Event should be submitted for that resident.
CDI Treatment Starts

- Should the number of residents started on antibiotic treatment include residents receiving empiric treatment?

A. Yes
B. No

YES

- Number of *C. difficile* treatment starts should include residents with a new order for treatment irrespective of why the treatment is ordered.
**CDI Treatment Starts**

- For the "**Number of residents started on antibiotic treatment for C. difficile**" should I include residents admitted on treatment for C. diff?

<table>
<thead>
<tr>
<th>Location Code</th>
<th>Resident Admissions:</th>
<th>Resident Days:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Facility-wide Inpatient (FacWIDEIn)</td>
<td>Number of Admissions on C. diff Treatment:</td>
<td>Number of residents started on antibiotic treatment for C.diff:</td>
</tr>
</tbody>
</table>

**NO**

There are TWO different monthly summary variables that must be answered for facilities participating in CDI LabID Event Reporting.
CDI Treatment Starts

1. **Number of admission on C. difficile treatment**: Count only residents who are receiving medication therapy (such as antibiotics) for the treatment of *C. difficile* infection at the time of admission to your facility.
   - Include both new admissions and re-admissions when a resident was out of the facility >2 calendar days (change to the Current Admission Date).
   - A resident admitted on CDI treatment should be included in this count even if he/she does not have a CDI LabID event for the LTCF.

2. **Number of residents started on antibiotic treatment for C. difficile**: Count residents that have a new medication order for *C. difficile* treatment.
   - Capture all new medication treatments (antibiotic orders), regardless of: (1) results of *C. difficile* testing; or (2) number of doses or days of therapy completed.
   - Remember, this count does NOT include residents admitted to your facility on treatment or with treatment orders.
What’s New in 2019?

Analysis

- Line listing and Rate Tables:
  - Column titles updated to reflect the **descriptive** variable names as the default instead of the variable names.
What’s New in 2019?

Analysis

- Line Listing - *All CDI LabID*
  - Additional variables added

### National Healthcare Safety Network
#### Line Listing - All CDI LabID Events

<table>
<thead>
<tr>
<th>Facility Org ID</th>
<th>Resident ID</th>
<th>Date of Current Admission</th>
<th>Event ID</th>
<th>Event Date</th>
<th>Specific Organism</th>
<th>Specimen Source</th>
<th>Location</th>
<th>CDI Assay</th>
<th>Onset Description</th>
<th>Days: Admit to Event</th>
</tr>
</thead>
<tbody>
<tr>
<td>39455</td>
<td>2468</td>
<td>12/25/2014</td>
<td>3140</td>
<td>01/05/2015</td>
<td>CDIF</td>
<td>STOOL</td>
<td>1 D</td>
<td>Incident</td>
<td>ACT-LO - Acute Care Transfer-Long-term Care Facility-Onset</td>
<td>12</td>
</tr>
<tr>
<td>39455</td>
<td>444444</td>
<td>10/25/2014</td>
<td>3179</td>
<td>01/10/2015</td>
<td>CDIF</td>
<td>STOOL</td>
<td>4 GEN</td>
<td>Incident</td>
<td>LO - Long-term Care Facility-Onset</td>
<td>78</td>
</tr>
<tr>
<td>39455</td>
<td>111111</td>
<td>01/01/2015</td>
<td>3134</td>
<td>01/15/2015</td>
<td>CDIF</td>
<td>STOOL</td>
<td>1 D</td>
<td>Incident</td>
<td>LO - Long-term Care Facility-Onset</td>
<td>15</td>
</tr>
</tbody>
</table>
2018 ANNUAL FACILITY SURVEY IS DUE
2018 Annual Facility Surveys are available for completion now!
- Deadline to complete survey is March 1, 2019.

Most survey questions are based on facility characteristics and practices during the previous calendar year.

New soft alerts (pop-up messages) added to improve data quality.

Accuracy is important—responses in the annual survey may be used for future risk adjustment of data.
Important Information, continued

- Recommend collecting all required information using NHSN paper form.
- NHSN provides instructions for completing the form in the Table of Instructions (TOI).
- Surveys may be viewed, edited, and printed anytime after submitting.
- NHSN helpdesk is your friend! nhsn@cdc.gov with “LTCF” in subject line.
Getting Started with your Annual Facility Survey

Before Getting Started!

- Recommend the use of NHSN paper forms and instructions to collect required information
  - **Form:**
    https://www.cdc.gov/nhsn/forms/57.137_LTCFSurv_BLANK.pdf
  - **Instructions:**

- May review and print your survey completed during previous calendar year (2017) if facility characteristics are similar
Getting Started with your Annual Facility Survey

Log-in to SAMS

1. Go to https://sams.cdc.gov
2. Sign-in using your SAMS Grid card
Getting Started with your Annual Survey

Select NHSN Reporting

- Select **NHSN Reporting** to access your enrolled facility

  **Note:** facility that have already enrolled in NHSN should **NOT** enroll again, even if the NHSN administrator changes
Getting Started with your Annual Survey

Open 2018 Annual Facility Survey

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

NHSN Long Term Care Facility Component Home Page

Action Items

COMPLETE THESE ITEMS

Survey Required
2018

Assurance of Confidentiality: The voluntarily provided information obtained in this surveillance system that is
Getting Started with your Annual Facility Survey

- To review and/or print a copy of your completed survey for the previous calendar year:

  1. Click “Surveys”
  2. Click “Find”
  3. Select Survey Year “2017”
  4. Click “Find”

To Access Previously Submitted Survey:

- Enter search criteria and click Find
- Fewer criteria will return a broader result set
- More criteria will return a narrower result set
Getting Started with your Annual Survey

Open 2018 Annual Facility Survey
Getting Started with your Annual Survey

Add Required Information

Survey Year = 2018

Red *asterisk = required
Total number of unique residents who stayed \( \leq 100 \) days in the previous calendar year.

**Note:** If a resident starts off as short stay but converts to long-stay, then count the resident in the total number of long-stay.
Total Number of Long-Stay Residents

In the previous calendar year,

<table>
<thead>
<tr>
<th>Average daily census *:</th>
<th>Average length of stay for short-stay residents:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total number of short-stay residents *:</td>
<td>Average length of stay for long-stay residents:</td>
</tr>
<tr>
<td>Total number of long-stay residents *:</td>
<td></td>
</tr>
<tr>
<td>Total number of new admissions *:</td>
<td>Number of Pediatric Beds (age &lt;21) *:</td>
</tr>
<tr>
<td>Total Number of Beds *:</td>
<td></td>
</tr>
</tbody>
</table>

Total number of unique residents who stayed > 100 days in the previous calendar year.
On the day you complete this survey...

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

<table>
<thead>
<tr>
<th>Primary Service Type</th>
<th>Service Provided?</th>
<th>Number of residents</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. Long-term general nursing ★:</td>
<td>✔</td>
<td>47</td>
</tr>
<tr>
<td>b. Long-term dementia ★:</td>
<td>✔</td>
<td>20</td>
</tr>
<tr>
<td>c. Skilled nursing/Short-term (subacute) rehabilitation ★:</td>
<td>✔</td>
<td>20</td>
</tr>
<tr>
<td>d. Long-term psychiatric (non dementia) ★:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>e. Ventilator ★:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>f. Bariatric ★:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>g. Hospice/Palliative ★:</td>
<td>✔</td>
<td>10</td>
</tr>
<tr>
<td>h. Other ★:</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Total Resident Census on Survey Day: 97
Its Survey Time – What Services are being Provided?

- What should we do if we provide the service but have no one in house on the day of survey, e.g., we provide hospice, but had no hospice residents on the day of survey.

- Check the box to include the service and put a “0” for the count

<table>
<thead>
<tr>
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<tbody>
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<td>f. Bariatric</td>
<td></td>
<td></td>
</tr>
<tr>
<td>g. Hospice/Palliative</td>
<td>✓</td>
<td>0</td>
</tr>
<tr>
<td>h. Other</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Total Resident Census on Survey Day: 97
Total Resident Census on Survey Day must be less than or equal to Total Number of Beds provided in previous section of survey.
Primary Testing Method for *C. difficile*

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
- Culture (*C. difficile* culture followed by detection of toxins)
- Other (specify)

- Based on practices of diagnostic laboratory in which **most** resident specimens are sent.
- Contact diagnostic laboratory identify the primary diagnostic testing method for *C. difficile* used
Uncommon Testing Methods for *C. difficile*

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
- **Culture (C. difficile culture followed by detection of toxins)**
- Other (specify)

- Before selecting cell cytotoxicity neutralization assay or culture, verify primary testing method with diagnostic lab.
- Most testing methods can be categorized by selecting from the options provided.
- ‘Other’ should **not** be used to name specific laboratories, reference laboratories, or the brand names of *C. difficile* tests.
Lab Testing methods

- What if you changed labs this year and the testing methods are different?

✓ You will add the new lab to next year’s survey. Remember, for 2018 survey, you are only including facility characteristics and practices for 2018. If labs changed mid-way through the year, include the primary lab tests your facility used for the majority of 2018.
Remember to SAVE completed survey
EDIT Annual Facility Survey

NHSN - National Healthcare Safety Network

NHSN Long Term Care Facility Component Home Page

Action Items

COMPLETE THESE ITEMS

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

Find Annual Survey

Facility ID: Angela LTCP Test Facility (ID 39456)  
Survey Year: 2017

Find Clear Back
How do I add a new user to NHSN?

- How can our new Infection Control Nurse be added as a NHSN user?

  The NHSN facility administrator must add the new nurse as a user to the NHSN application. Once the new user is added, if he/she is not already registered with SAMS, he/she will receive an e-mail to register with SAMS.

- Please send an e-mail to nhsn@cdc.gov for additional questions or help with adding a new user.
ADD NHSN Users

Tip: use first initial and last name ex. aantila

User must use same email address for SAMS registration!
### ADD NHSN User
**Assign and Save Rights**

**User ID:** MANTILLA (ID 238556)

**Facility List:**
- Fac: Angela LTCF Test Facility

#### Rights

<table>
<thead>
<tr>
<th>Rights</th>
<th>Patient Safety</th>
<th>Healthcare Personnel Safety</th>
<th>Biovigilance</th>
<th>Long Term Care</th>
<th>Dialysis</th>
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</thead>
<tbody>
<tr>
<td>Administrator</td>
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<td>☐</td>
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<td>☐</td>
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</tr>
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<td>Add, Edit, Delete</td>
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<tr>
<td>View Data</td>
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<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
</tbody>
</table>

**Advanced**

- Effective Rights
- Save
- Back
How do I add the LTCF Component if I’m already a NHSN user?

- Will I be able to access LTC if I am already enrolled for hospital NHSN data? Or do I have to initiate another enrollment?

✓ Must enroll in the LTCF Component since it is a different component. It is an abbreviated enrollment where the LTCF annual facility survey must be completed to complete the enrollment.
How do I make a change to our facility name?

- How do we update the name of our facility within the NHSN site?
QUESTIONS?

Send all questions to nhsn@cdc.gov and type “LTCF” in the subject line.