National Center for Emerging and Zoonotic Infectious Diseases

Tracking Infections in Long-term Care Facilities (LTCFs) Using the National Healthcare Safety Network (NHSN) Overview

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LEARNING OBJECTIVE 1

Define the National Healthcare Safety Network (NHSN) and the different Components and Modules available for Long-term Care Facilities (LTCFs).

LEARNING OBJECTIVE 2

Describe how NHSN supports LTCFs and infection surveillance activities.

LEARNING OBJECTIVE 3

Describe how NHSN supports LTCFs and infection surveillance activities.

NHSN at 14 Years: Many More Uses and Users Focus on Resident & Patient Safety Continues

Healthcare facilities: (1) Join NHSN, (2) complete an annual survey of their care capacities, (3) submit process and outcome data manually or electronically to one or more NHSN components, and (4) use their own data and NHSN statistical benchmarks for analysis and action Healthcare Neonatal Patient Long Term Outpatient Personnel Blood Safety Dialysis Component Safety Care Facility Procedure Safetv Component Component (Coming in Component Component Component Component 2020) CDC: Collects, analyzes, summarizes, and provides data on healthcare-associated infections (HAIs), other adverse healthcare events, antimicrobial use and resistance (AUR), adherence to infection prevention practices, and use of antimicrobial stewardship programs (ASPs)

NATIONAL HEALTHCARE SAFETY NETWORK (NHSN)

Reporting options specifically for LTCFs

- Standardizes surveillance definitions and data collection
- Data are secure, confidential and immediately available for analysis and use by the facility
- Data used by facilities for internal quality improvement
- Data used by CDC to establish risk-adjusted national benchmarks and set national HAI prevention targets
- Data used by CMS and state partners for public reporting and performance management

The NHSN, Long-term Care Facility (LTCF) Component provides long-term care facilities with a customized system to track infections and prevention process measures in a systematic way.

Tracking this information allows facilities to identify problems, improve care, and determine progress toward national healthcare-associated infection goals.

Facilities eligible to report into all modules of this component include nursing homes, skilled nursing, chronic care, and developmental disability facilities. Assisted living facilities can only report into the prevention process measures module.

Long-term acute care hospitals (LTACHs) are not eligible to report into this component.



LONG-TERM CARE FACILITY COMPONENT MODULES Click on each module to access relevant training, protocols, data collection forms, supporting materials, analysis resources, and FAOs. C. difficile Infection Urinary Tract Prevention Process (CDI) and Multidrug-Infections (UTI) Measures resistant Organisms Hand Hygiene, Gloves and Gown Use Adherence (MDRO) TRAINING & EDUCATION RESOURCES LTCF Component Manual FREQUENTLY Frequently Asked Ouestions SKED Questions and answers categorized by topic A single document combining all LTCF protocols, QUESTIONS fata collection forms form instructions, and other resources Newsletters & Archived Training Materials Communications ISN LTCF annual training materials, videos, and archived newsletters and email communications Data Validation Guidance Educational Roadmap LTCF guidance and resources for internal and Kick start your training with an overview of the external data validation, including relevant LTCF component archived protocols and trainings

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TWO NHSN Components Available for LTCFs

Long-term Care Facility: Resident Infections and Process Measures

Long-term Care Facilities

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LONG-TERM CARE FACILITY COMPONENT MODULES

Click on each module to access relevant training, protocols, data collection forms, supporting materials, analysis resources, and FAQs.

C. difficile Infection (CDI) and Multidrugresistant Organisms (MDRO) Urinary Tract Infections (UTI) Prevention Process Measures Hand Hygiene, Gloves and Gown Use Adherence

Healthcare Personnel Safety: Influenza Vaccination

Surveillance for Healthcare Personnel Vaccination

The Advisory Committee on Immunization Practices (ACIP) recommends that all healthcare personnel (HCP) and persons in training for healthcare professions should be vaccinated annually against influenza. [1] Vaccination of HCP helps to reduce absenteeism of workers and safeguard patients. Although annual vaccination is recommended for all HCP, national survey data have demonstrated that vaccination coverage levels are only approximately 78% [2]. This is below the Healthy People 2020 target of 90% for HCP influenza vaccination [3].

References

- Centers for Disease Control and Prevention. "Prevention and control of seasonal influenza with vaccines: Recommendations of the Advisory Committee on Immunization Practices – United States, 2018-19 Influenza Season. 2018. MMWR 67 (RR-3); 1-20.
- Centers for Disease Control and Prevention. "Influenza Vaccination Coverage Among Health-Care Personnel United States. 2017–18 Influenza Season." MMWR 67(38):1050-1054.
- 3. Healthy People 2020. Immunization and Infectious Diseases 🖸 .



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LTCFs Eligible to Enroll in NHSN LTCF Component







Certified skilled nursing facilities (SNF) and nursing homes (NH) Intermediate/chronic care facilities for the developmentally disabled Assisted living facilities & residential care facilities

> Note: limited to Prevention Process Measures Module

Standardized Surveillance Criteria and Analysis for the Following Modules



Long-Term Care Facility **Home Page**

- **Protocols**
- **Frequently Asked** Questions
- Trainings
- **Data Validation**
- Archived newsletters and e-mail communications
- **LTCF Component Manual**

https://www.cdc.gov/nhsn/ltc/index.html

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LONG-TERM CARE FACILITY COMPONENT MODULES

Click on each module to access relevant training, protocols, data collection forms, supporting materials, analysis resources, and FAOs.

C. difficile Infection (CDI) and Multidrugresistant Organisms (MDRO)

Urinary Tract Infections (UTI)

Prevention Process Measures Hand Hygiene, Gloves and Gown Use Adherence

TRAINING & EDUCATION

LTCF Component Manual A single document combining all LTEF protocols, data collection forms, form instructions, and other resources







Educational Roadmap Kick start your training with an overview of the LTCF component

RESOURCES

ASKED

FREQUENTLY Frequently Asked Questions Questions and answers categorized by topic QUESTIONS



Newsletters & Archived Communications

Archived newsletters and email communications



NHSN Long-term Care Facility Component Manual Updated Annually

NHSN Long-term Care Facility Component Manual



The National Healthcare Safety Network (NHSN)

Long Term Care Facility Component Tracking Infections in Long-term Care Facilities

Division of Healthcare Quality Promotion National Center for Emerging and Zoonotic Infectious Diseases Atlanta, GA, USA

https://www.cdc.gov/nhsn/pdfs/ltc/ltcf -manual-508.pdf

NHSN Forms and Instructions for Completion

- Include required data collection elements
- Customizable
- Available on NHSN website:

https://www.cdc.gov/nhsn/ltc/index.html



Checklist

ENROLL Facility

MAP Resident Care LOCATIONS

ADD Additional Users

Complete ANNUAL FACILITY SURVEY

> Complete MONTHLY REPORTING PLAN

Enter Resident EVENT DATA

Submit MONTHLY SUMMARY DATA

Data Quality Checks RESOLVE ALERTS

NHSN LONG-TERM CARE FACILITY CHECKLIST FOR NHSN PARTICIPATION

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Tab 1 **New To NHSN? Complete NHSN 5 Step Enrollment** for LTCFs **NHSN Enrollment Steps 1-5** Enrollment Preparation Register with Secure Access Management Services (SAMS) Receive "NHSN Enrollment Approved" email

ENROLL Facility



ENROLL New Facility

- 5-steps to NHSN Enrollment
- A facility should only enroll ONE time
- Must have an individual e-mail account
- Use the LTCF Enrollment Training
 Guide as your resource through the enrollment process

5-Step Enrollment for Long-term Care Facilities

The below steps serve as a guide for Long-term Care Facilities (LTCFs) enrolling in the National Healthcare Safety Network (NHSN).

Once a facility is registered with NHSN, the Secure Access Management Services (SAMS) grid card must be used to continue with the NHSN enrollment process for the facility. If the designated facility NHSN user has not previously registered with SAMS and received a grid card, the user must complete the identity verification process with SAMS prior to gaining access to continue with the NHSN enrollment process for the facility.

A facility should only enroll **once** into the LTCF Component. Once a facility is enrolled, additional options become available, such as adding additional users and enrolling in additional Components.

Step 1: Enrollment Preparation



1. Complete required LTCF Enrollment Training Guide [8] [PDF – 6MB]

Note: The Enrollment training slides serve as a detailed guide through the enrollment process.

- 2. Check trusted websites and spam blocker settings.
 - In Internet Explorer, add cdc.gov and verisign.com to your list of trusted websites and permit pop-ups for these sites.
 - Check spam-blocker settings to allow emails from <u>NHSN@cdc.gov</u>, <u>SAMS-NO-REPLY@cdc.gov</u>

Timo to complete Step 1: 40 minutes

https://www.cdc.gov/nhsn/ltc/enroll.html

Enrolled Facilities: Enter the SAMS Portal to Access NHSN

Log-in to SAMS

- 1. Go to <u>https://sams.cdc.gov</u>
- 2. Sign-in using your SAMS Grid card



Select "NHSN Reporting"



NHSN Landing Page

- On the NHSN Landing page, select your facility and "Long Term Care Facility" as the component.
- Click "Submit"



NHSN Homepage



use the left side navigation bar

MAP Resident Care Locations

Map resident care locations in the NHSN application immediately after enrollment and when there is a change, such as a new or closed unit.

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- LTCFs may have a different physical location where residents reside and receive care within the building – units, wards, floors, pods, etc.
- Each resident care location in the facility should be mapped to a CDC location code/description.
 - Provides information about the type of residents or care services in that specific location.

CDC Location	Label	NHSN Healthcare Service Location Code	CDC Location Code	CDC Location Code			
Skilled Nursing Short Term Rehabilitation	1257-5 IN:NO illed Nursing/ REHAt ort Term shabilitation		IN:NONACUTE:LTCF: REHAB		A unit or designated are short term (<90 days), r rehabilitation services t restorative care following	ea which primarily provides medical, skilled nursing or to individuals requiring ng recent hospitalization.	
General Nursing 1258-3 Unit		IN:NONACUTE:LTCF:GEN		A unit or designated are nursing, rehabilitative of individuals with varying or disability requiring lo			
Ventilator 1259-1 Dependent Unit		IN:NONACUTE:LTCF:VEN		A unit or designated are and respiratory care to mechanical ventilation.	ch		
Bariatric Unit 1		1260-9	IN:NONACUTE:LTCF:BAR		A unit or designated are specializing care for ind for or have undergone l	ea which provides lividuals who are preparing bariatric surgery.	oortive diagnosed conditions.
	Dementia Unit Psychiatric Unit		1255-9 IN:NOI		ACUTE:LTCF:DEM	A unit or designed area which provides specialized care for individuals diagnosed with demen or related conditions, including Alzheimer's disease.	
			1256-7	256-7 IN:NON/		A unit or designated area w provides specialized care fo individuals diagnosed with or behavioral disorders.	rhich r psychiatric

List available under *Supporting Materials* tab on LTCF pagehttps://www.cdc.gov/nhsn/pdfs/pscmanual/15locationsdescriptions_current.pdf

NHSN Home		
Alerts		
Reporting Plan	•	
Resident	•	Instructions
Event	•	 To Add a record, fill in the form with the required fields and any desired optional values. Then click on the Add button. To Find a record, click on the Find button. One of more fields can be filled in to restrict the search to those values.
Summary Data	•	 To <i>Delete</i> one or more records, perform a <i>Find</i> on the desired record (s). Check the corresponding box(es), then click on the <i>Delete</i> button. To <i>Delete</i> one or more records, perform a <i>Find</i> on the desired record(s). Check the corresponding box(es), then click on the <i>Delete</i> button.
Surveys	•	Press the <i>Liear</i> button to start over with a new form.
Analysis	•	Mandatory fields to Add or Edit a record marked with *
Users	•	Your Code *:
Facility	-	Customize Forms Your Label *:
Group		Facility Info CDC Location Description *:
Logout		Add/Edit Component
-		Locations
	_	Find Add Export Location List Clear
		Option to Find or Add Locations
		20

ADD a new location

Instructions

- To Add a record, fill in the form with the required fields and any desired optional values. Then click on the Add button.
- To Find a record, click on the Find button. One of more fields can be filled in to restrict the search to those values.
- To Edit a record, perform a Find on the desired record. Click on the desired record to fill in its values into the form and edit the values. To save the changes, click on the Save button.
- To Delete one or more records, perform a Find on the desired record(s). Check the corresponding box(es), then click on the Delete button.



ADD a new location, continued



ADD a new location, continued

Instructions

- · To Add a record, fill in the form with the required fields and any desired optional values. Then click on the Add button.
- To Find a record, click on the Find button. One of more fields can be filled in to restrict the search to those values.
- To Edit a record, perform a Find on the desired record. Click on the desired record to fill in its values into the form and edit the values. To save the changes, click on the Save button.
- To Delete one or more records, perform a Find on the desired record(s). Check the corresponding box(es), then click on the Delete button.
- Press the *Clear* button to start over with a new form.

Mandatory fields to "Add" or "Edit" a record marked with *



MAP Resident Care LOCATIONS: FIND/DEACTIVATE



ADD Additional Users

Facilities are strongly encouraged to have at least two NHSN users

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ADD Additional NHSN Users

- The NHSN Facility Administrator assigns rights to each user enable users to view, add, edit, delete, analyze NHSN data
- Once a new user is added in NHSN, an email is automatically sent to the email address entered with instructions for registering with SAMS (required for all new users who do not already have a SAMS grid card)



ADD Additional NHSN Users Assign and Save Rights

	U	Jser ID: MANTTI	LA (ID 238556)		
	Faci	Fac: Ange lity List:	ela LTCF Test Facility		
Patient Safety	Healthcare Personnel Safety	Biovigilance	Long Term Care	Dialysis	
				-	Advanced
			Effective Rights	Save	Back
	Patient Safety	Facil	Viser ID: MANTTII Fac: Ange Facility List: Patient Safety Healthcare Personnel Safety Biovigilance	User ID: MANTTILA (ID 238556) Fac: Angela LTCF Test Facility Facility List: Patient Safety Healthcare Personnel Safety Biovigilance Long Term Care	User ID: MANTTILA (ID 238556) Fac: Angela LTCF Test Facility Facility List Patient Safety Healthcare Personnel Safety Biovigilance Dialysis Dialysi

Complete ANNUAL FACILITY SURVEY

Survey is completed initially during NHSN enrollment and then annually each year thereafter- *between January 1 and March 1*



Complete ANNUAL FACILITY SURVEY

- Most survey questions are based on facility characteristics and practices during the previous calendar year.
- Some users find it helpful to use paper form to collect required information
- Accuracy is important-responses in the annual survey may be used for risk adjustment of data

COMPLETE Annual Facility Survey (Enrolled Facilities)

MAYDE 0 NHSN - National Healthcare Safety Network Integris Bass Skilled Nursing Fa. NHSN Home C) NHSN Long Term Care Facility Component Home Page Alerts **Reporting Plan** Resident Event Summary Data ۶ AANTTILA Angela LTCF Test Fac (2) NHSN - National Healthcare Safety Network Add Surveys Find NHSN Home 🕼 NHSN Long Term Care Facility Component Home Page Analysis Alerts Users **Reporting Plan** Action Items Resident Facility Event Group COMPLETE THESE ITEMS Summary Data Surveys Logout Survey Required Analysis CLICK HERE TO 2018 Users **OPEN SURVEY** Facility Group Logout ALERTS

EDIT Annual Facility Survey





NHSN Monthly Reporting Plan (MRP) is required for each month facility will submit data to the NHSN



MONTHLY REPORTING PLAN

- Informs CDC-NHSN which module(s) and events a facility is following during a given month.
- A facility must enter a Plan for every month in which surveillance and data submissions will occur.
- A plan must be in place before events can be entered into NHSN.

MONTHLY REPORTING PLAN

- A facility may complete plans for up to one calendar year in advance.
- A plan may be edited at any time to add or remove surveillance options, including retrospectively.
 - Note: Surveillance options may only be deleted if no event or summary data has been entered for that event type and month.

ADD Monthly Reporting Plan for LTCF



Monthly Reporting Plan for LTCF

Three Surveillance Modules:

- **1. HAI for urinary tract infection (UTI) events**
- 2. LabID Event for C. difficile; multi-drug resistant organisms
- 3. Prevention Process Measures for hand hygiene; gown and glove use adherence

Alerts Reporting Plan Resident Event Summary Data Surveys Analysis Coroup Identify-wide Inpatient (FacWIDEIn) Icogout Logout Logout Logout Logout Image: Instance		Add Monthly Reporting Plan			
Reporting Plan Image: Specific Organism Type Resident Mandatory fields marked with * Resident Mandatory fields marked with * Event Facility D * Surveys Print Surveys Month Analysis Mandatory fields marked with * No Long Term Care Facility (D 39455) * Worth No Long Term Care Facility (D 39455) * Surveys Month Analysis Mandatory fields marked with * Analysis Mandatory fields marked with * Group Mandatory fields marked with * Logout Locations Image: Specific Organism Type Lab ID Event All Speciments Facility-wide Inpatient (FacWIDEIn) * Image: Specific Organism Type Add Row Cier All Rows Copy from Previous Month	Alerts				
Resident Mandatory fields marked with * Print Event Print Summary Data Print Surveys Month Vear No Long Term Care Facility (D0 39455) Surveys Print Surveys Print Month Vear No Long Term Care Facility Component Modules Followed this Month Analysis Print Users Hat Module Group Image: Specific Organism Type Labl Event Module Logout Locations Specific Organism Type Labl DEvent Adl Specimeers Facility-wide Inpatient (FacWIDEIn) Prevention Process Measure Module Facility-wide Inpatient (FacWIDEIn) Facility-wide Inpatient (FacWIDEIn) Prevention Process Measure Module Facility-wide Inpatient (FacWIDEIn) Facility-wide Inpatient (FacWIDEIn)	Reporting Plan				
Event i Summary Data i Surveys i Analysis i Users i Facility i i Locations I Locations Specific Organism Type Lab ID Event All Speciments i Facility-wide Inpatient (FacWIDEIn)	Resident +	Mandatory fields marked with *			Print For
Summary Data Surveys Analysis Users Facility I Facility Facility-wide Inpatient (FacWIDEIn) I I Facility-wide Inpatient (FacWIDEIn) I I Facility-wide Inpatient (FacWIDEIn) I I Facility-wide Inpatient (FacWIDEIn)	Event +	Facility ID *: Angela LTCF Test Facility (ID 39455)	\checkmark		
Surveys Image: Surveys in the substraint of th	Summary Data	Month *			
Analysis Image: Constraint of the second of the seco	Surveys 🕨	No Long Term Care Facility Compo	oonent Modules Followed this Month		
Users	Analysis 🕨	Halberter			
Facility-wide Inpatient (FacWIDEIn) Group Logout Logout Logout Locations Specific Organism Type Lab ID Event All Speciments Table Count on Process Measure Module Prevention Process Measure Module Image: Facility-wide Inpatient (FacWIDEIn) Copy from Previous Month Copy from Previous Month	Users +	Locations UTI			
Croup LabID Event Module Logout Locations Specific Organism Type Lab ID Event All Specimens I Facility-wide Inpatient (FacWIDEIn) Image: Copy from Previous Month Add Row Clear All Rows Copy from Previous Month Prevention Process Measure Module Image: Copy from Previous Month Image: Copy from Previous Month Image: Copy from Previous Month Copy from Previous Month Image: Copy from Previous Month	Facility •	Facility-wide Inpatient (FacWIDEIn)			
Logout Locations Specific Organism Type Lab ID Event All Specimens Locations Copy from Previous Month Prevention Process Measure Module Locations Hand Hygiene Gown and Gloves Use Facility-wide Inpatient (FacWIDEIn) Copy from Previous Month Copy from Previous Month	Group 🕨	LabID Event Module			
Image: Facility-wide Inpatient (FacWIDEIn) Image: Facility-wide Inpatient (FacWIDEIn) Add Row Clear All Rows Copy from Previous Month Prevention Process Measure Module Image: Facility-wide Inpatient (FacWIDEIn) Image: Facility-wide Inpatient (FacWIDEIn) Image: Facility-wide Inpatient (FacWIDEIn) Copy from Previous Month Image: Facility-wide Inpatient (FacWIDEIn)	Logout	Locations	Specific Organism Type	Lab ID Event All Specimens	
Add Row Clear All Rows Copy from Previous Month Prevention Process Measure Module Locations Hand Hygiene Gown and Gloves Use Image: Facility-wide Inpatient (FacWIDEIn) Image: Facility-wide Inpatient (FacWIDEIn) Image: Facility-wide Inpatient (FacWIDEIn)		Facility-wide Inpatient (FacWIDEIn) *	~		
Image: Second S		Add Row Clear All Rows Copy from Previous	us Month		
Locations Hand Hygiene Gown and Gloves Use Image: Facility-wide Inpatient (FacWIDEIn) Image: Copy from Previous Month Image: Copy from Previous Month		Prevention Process Measure Module			
Facility-wide Inpatient (FacWIDEIn) Copy from Previous Month		Locations Hand H	tygiene Gown and Gloves Use		
Copy from Previous Month		Facility-wide Inpatient (FacWIDEIn)			
		Copy from Previous Month			
			Save	rek -	
Save			Save Da		

EDIT Monthly Reporting Plan

Plans may be edited to add or remove surveillance selections.
 If event or summary data has already been entered for a selected month, associated module/event selections may not be deleted from the plan.

Home	View Monthly Reporting	g Plan			
ts					
eporting Plan 🕴	Add				
esident 🕨	Find narked with *				Print Form
ent 🕨	Facility ID *: Angela LTCF Test Facility (3)	9455)			
ummary Data 🕨	Month *: January				
urveys 🕨	□ No Long Term Care Facil	ity Component M	odules Followed this Month		
Analysis					
	HAI Module				
Isers •	Locations	UTI			
acility 🕨 🕨	Facility-wide Inpatient (FacWIDEIn)				
iroup 🕨	LabID Event Module				
ogout	Locations		Specific Organism Type	Lab ID Event All Specimens	Option to Edit
	Facility-wide Inpatient (FacWIDEIn)	CDIF - C. difficile			,
					- plan
	Prevention Process Measure Module				
	Locations	Hand Hygiene	Gown and Gloves Use		

EDIT Monthly Reporting Plan, continued

There is not an option to delete a previously saved Monthly Reporting Plan.
 Instead, edit the applicable plan and put a checkmark in the box *"No Long Term Care Facility Component Modules Followed this Month"*

	; F 1d11		Edit Monthly Reporting Plan
Mandatory fields marked with *			
Facility ID *: Angela LTCF Test Facility (39 Month *: June Year *: 2018	1455) ty Component M	odules Followed this Month	h
HAI Module			Mandatory fields marked with *
Locations Facility-wide Inpatient (FacWIDEIn)	UTT I∑		Facility ID *: Angela LTCF Test Facility (39455)
LabID Event Module			Month *: June
Locations		Specific Organism Type	Labi Year *: 2018
Facility-wide Inpatient (FacWIDEIn)	CDIF - C. difficile		✓ No Long Term Care Facility Component Modules Followed this Month
Prevention Process Measure Module			
Locations	Hand Hygiene	Gown and Gloves Use	
Facility-wide Inpatient (FacWIDEIn)	Y	V	Save Back
Optio	on to E	dit plan	Edit Previous Next Back Remember to SAVE your edits
			20

Lets Review 1: Based on this reporting plan, what modules and events will this facility report for April, 2018?

Lab ID Event All Specimens

Fac	ility ID *: Angela LTCF Test Facility (IE Month *: April Year *: 2018 V	39455) 🗸		
	No Long Term Care Facili	ity Component Mod	dules Followed this Month	
HA	Locations	UTI		
Î	Facility-wide Inpatient (FacWIDEIn)			
Lab	ID Event Module			
	Locations		Specific Organism Type	
1	Facility-wide Inpatient (FacWIDEIn)	CDIF - C. difficile		v
Î	Facility-wide Inpatient (FacWIDEIn)	MRSA - MRSA		~

Add Row Clear All Rows Copy from Previous Month

Prevention Process Measure Module

	Locations	Hand Hygiene	Gown and Gloves Use
Î	Facility-wide Inpatient (FacWIDEIn)	\checkmark	V

A. UTI only

- UTI, LabID (CDI and MRSA), and Prevention Process Measures (hand hygiene and gown/glove use)
- C. All Modules, all events

Submit Resident Infection EVENT DATA Identify and submit resident level HAI UTI and/or LabID event data to the NHSN.

Note: This step is dependent on which modules a facility is participating during a given month.



Two Modules for Reporting Infection Events



Resources on the Long-Term Care Facility Home Page

- Protocols
- Forms and form instructions
- Frequently Asked Questions
- Trainings
- Data Validation
- Archived newsletters and email communications
- LTCF Component Manual

https://www.cdc.gov/nhsn/ltc/index.html

ources, and FAQs.		
C. difficile Infection (CDI) and Multidrug- resistant Organisms (MDRO)	Uninary Tract Infections (UTI)	Prevention Process Measures Hand Hygiene, Gloves and Gown Use Adherence
AINING & EDUCATION	RESO	URCES
A single document combanies deter collection forms, formal resources	CManual particity protocols, consistence, and other	Frequently Asked Questions Questions and abovem categorized by type
Training Material	is and	Newsletters & Archived Communications
Resources for 1	NHSN Users A	lready Enrolled
Training		10
Protocol		
	and Instructions	
Data Collection Forms	s and insulucions	
Data Collection Forms Supporting Material	Sand Instructions	
Data Collection Forms Supporting Material Analysis Resources		

Submit MONTHLY SUMMARY DATA Submit monthly summary data for each month under surveillance, even if no events were reported for that month.



Submit MONTHLY SUMMARY DATA to NHSN

- Referred to as denominator data
- At the end of the month, enter monthly total denominator data into the NHSN application
 - Unless otherwise stated, best practice is to have monthly events and summary data complete by the end of the following month
 - Example: have June data submitted by the end of July
- Required even if no events were identified during the month
- Locate 'Summary Data' on left-hand navigation Bar, and then 'ADD'



Submitting MONTHLY SUMMARY DATA in NHSN

Mandatory fields marked with * Fields required for record completion m: Facility ID *: <u>Angela LTCF Test Facility</u> Month *: <u>January v</u> Year *: <u>2017 v</u> Denominators for Long Term Care Loc Location Cade	arked with ** (39455) v ations Total Resident Days	Urinary Catheter Days	Report No UTI	New Antibiotic for UT1 Indica	Starts Nu	mber of Urine tures Ordered					Monthly Summary Page Pre-populates based on facility selections in the Monthly Reporting Plan
Facility-wide Inpatient (FacWIDEIr	n) * 300	200 •	⊻	10 •	50	•	Custom Fiel	ds)
MDRO & CDI LabID Event Reporting											
Facility-wide Inpatient (FacWIDE)	Admissions: 10 * Resident Days: 0 500 * Number of Admission on C. diff Treatment: 2 *	LabID Event (All specimens) Report No Events	Goven and Ga	es Indicated		0		Manda Facilit	View Mo	Custom Fields	
Prevention Process Measures Location Code Facility-wide Inpatient (FacWIDEIn	Hand Hyglen Performed n) * 100 * 122	Indicated Us	* 300	•				M	nth *: Janua 'ear *: 2017	Ŷ	
Prevention Process Measures Location Code Facility-wide Inpatient (FacWIDEI)	Fand Hygler Performed n) * 100 * 122	Indicated Us	* 30x					HAI M	nth *: Janua 'ear *: 2017 □ N odule	y Long Term Care Facility Compo ocation: UTT patient (FacWIDEIn) &	onent Modules Followed this Month
Prevention Process Measures Location Code B Facility-wide Inpatient (FacWIDEI)	Hand Hyglen Pertonied n) * 100 ★ 122	100/2010 U9	* 30X				1	HAI M Fa LabiD Fa Fa	inth *: Janua 'ear *: 2017 D N odule cility-wide in Event Modu cility-wide in	y Long Term Care Facility Compo actions UII batient (FacWIDEIn) 0 b contons contons CDIF-C, content (FacWIDEIn) MRSA-N	Specific Organism Type Lab 10 Event All Specimens difficile WRSA

Lets Review 2: Based on the below Monthly Summary Data, what modules and events did the facility commit to participate on the Monthly Reporting Plan for March, 2018?

🍪 Add Monthly Summary Data	
Mandatory fields marked with * Fields required for record completion marked with **	
Facility ID *: Angela LTCF Test Facility (ID 39455) V Month *: March V	
Year *: 2018 V Denominators for Long Term Care Locations - No long term care locations selected on monthly reporting plan	

MDRO & CDI LabID Event Reporting

						Specific	Drganism Type			
Location Code			MRSA	VRE	CephR- Klebsiella	CRE-Ecoli	CRE- Enterobacter	CRE- Klebsiella	C. difficile	MDR- Acinetobacter
Facility-wide Inpatient (FacWIDEIn	Resident Admissions: Resident Days: Number of Admissions on C. diff Treatment:	LabID Event (All specimens) Report No Events							⊠ □**	

Prevention Process Measures

No long term care locations selected on monthly reporting plan

- A. All modules, all events
- MRSA and CDI LabID events
- C. CDI and all MDRO LabID events

Optional Data Collection Forms

- 1. CDC 57.139: MDRO and CDI LabID Event Reporting Monthly summary Data for LTCF
 - Resembles Summary Data page in the NHSN application
 - Specific to LabID Event reporting (CDI and/or MDRO)
 - Total counts only
- 2. CDC 57.142: Denominators for LTCF
 - Optional worksheet for the month to collect MDRO, CDI, and/or UTI denominator data
 - Daily counts that must be summed at the end of the month

Forms and Table of Instructions (TOIs) available under *Data Collection Forms* at: <u>https://www.cdc.gov/nhsn/ltc/cdiff-</u> <u>mrsa/index.html</u>

required for sav	ing							,	
Facility ID #:			*M	onth:		*Year:	Loc	ation Code:	
*Resident Days	s:	*R	esident A	dmissions:		**Number of A	dmissions on	C. diff Treatmen	t:
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Specific Organism Type	MR	SA	VRE	CephR- Klebsiella	CRE- E. coli	CRE- Enterobacter	CRE- Klebsiella	MDR- Acinetobacter	C.difficile
LabID Event (All specimens) []							
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abel		_	_	-				Form Approv	ed
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MDBO and CDLL abID Event Departing

Data Quality Checks RESOLVE ALERTS Resolve outstanding alerts to improve the quality of your data!

Note: Data are not considered as complete and will not be included in analysis reports until all alerts for the month are resolved.





- Alerts remind users of outstanding issues that impact data quality.
- Alerts must be resolved each month for data analysis function to be accurate.
- Found on the Home Page, or by clicking on the 'Alerts' tab on the sidebar.

NHSN Home Alerts Reporting Plane Resident Event
Alerts Reporting Plan Resident Event ALERTS
Resident COMPLETE THESE ITEMS
Event ALERTS
ALERIS
Summary Data
Surveys
Analysis > Z 4 4/ 4
Users Missing Events Incomplete Events Missing Summaries Incomplete Summaries
Facility
Group
Logout



- When an alert category is selected all occurrences will be listed on a separate page for selection
- Each occurrence will need to be resolved in order for alert category to clear

complete/	Missing List		
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Log-out of the NHSN application before closing your browser



Centers for Disease Control and Prevention CDC 24/7: Saving Lives, Protecting People™

NHSN - National Healthcare Safety Network



Safety Network

AANTTILA

Angela LTCF Test Facility

LTCF Home Page

https://www.cdc.gov/nhsn/ltc/index.html

2018 🔼 [PDF – 1 MB]

Component Manual 🔼

2019 🔼 [PDF – 4 MB]

2019 NHSN Patient Safety

Component Manual 🔼

[PDF – 1 MB]



Enrollment for nursing homes, assisted living and

residential care, chronic care facilities and skilled

nursing facilities.

Long-term facilities are also eligible to report to the Healthcare Personnel Vaccination Component. The component allows facilities to monitor influenza vaccination coverage of personnel.

View enrollment information and resources.

QUESTIONS?