Infectious Disease Epidemiology LA Office of Public Health Summer 2013 Edition

HEALTHCARE ASSOCIATED INFECTIONS INITIATIVE

A Quarterly Newsletter for Infection Preventionists

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Ensure NHSN Reporting Continuity at Your Facility

The most frequently-asked question received at Infectious Disease Epidemiology with regard to National Healthcare Safety Network (NHSN) reporting is from infection preventionists who are new to positions that inherit reporting responsibilities but were not added to NHSN before their predecessors left. To prevent deadline scrambles, follow these helpful tips to assist in your reporting continuity:

- Before an infection preventionist leaves the facility, ensure that the role of "Facility Administrator" is transferred to another active NHSN user
- NHSN Facility Administrator should add at least one other NHSN user with "administrative rights"

If the aforementioned steps are not completed, a "C" level executive at your healthcare facility must formally request in writing and sign on hospital letterhead that there is a change in the facility administrator role. The letter should include the name of the new NHSN Administrator to be assigned, phone number, and email address, as well as the 5-digit NHSN Facility ID, if known. This letter should be faxed to the NHSN office at (404) 929-0131.

Another issue that occasionally affects NHSN reporters is the matter of expired digital certificates. Remember that your digital certificates expire after 12 months. One month prior to expiration, NHSN will send an automated email specifying that another certificate must be downloaded. Take the steps to renew your digital certificates immediately when you receive this message and save a backup copy of the certificates to a thumb drive. If your download link expires after the 30-day period, you must email <u>nhsn@cdc.gov</u> to receive another download link.

From the NHSN Help Desk

The following inquiry and response was forwarded by Leslie Kelt, Infection Preventionist at St. Tammany Parish Hospital. Many thanks to Leslie for sharing this exchange. If you have helpful information from the NHSN help desk, please forward to <u>Erica.Washington@la.gov</u> to share with other infection prevention colleagues.

February 21, 2013 To: NHSN (CDC) Subject: C diff Lab ID

- Q: For LabID for C. diff, if the patient had an overnight stay in an Observation Unit in our facility within 3 months of C. diff admit and was not classified as an inpatient, does this qualify as a discharge in the last 3 months?
- A: This question is specific to inpatient admissions only. In other words, the patient must spend time in an inpatient location to be considered an inpatient stay. Outpatient visits (even overnight) are excluded.

The HAI program allows Louisiana to create a collaborative effort to prevent healthcare associated infections. It includes development of a state plan for preventing healthcare associated infections, development of a monitoring system, and implementation of a prevention program. Visit <u>dhh.louisiana.gov/idepi</u> to access the Healthcare-Associated Infections Resource Center.

Acute Care Hospitals

Acute Care Hospitals are required to report CLABSI (adult, pediatric, and neonatal ICUs) since January 2011, CAUTI (adult and pediatric ICUs) since January 2012, SSI (colon and abdominal hysterectomy) since January 2012, MRSA Bacteremia and *Clostridium difficile* LabID Events since January 2013, and Healthcare Worker Influenza Vaccinations for the 2012-2013 Flu Season.

Patient Safety Component Monthly Reporting Plan	
Do you have Monthly Reporting Plans (MRP) on file for Jan/Feb/Mar 2013?	
Device-Associated Module	
Are each of your adult and pediatric intensive care units (ICU) added?	
Are each of your neonatal intensive care units (NICU) added?	
Are CAUTI and CLABSI checked for each of your adult and pediatric ICU locations?	
Is CLABSI checked for each of your (NICU) locations?	
If you do not have ICU locations, have you completed the Quality Net waiver form?	
*Waiver available at http://bit.ly/17tWY7C	
Procedure-Associated Module	
Is HYST selected for inpatient procedures?	
Is COLO selected for inpatient procedures?	
Multi-Drug Resistant Organism Module	
Is "MRSA LabID Event Blood Specimens Only" selected for FACWIDEIN-FacWideIN locations?	
Is "CDIF LabID Event All Specimens" selected for FACWIDEIN-FacWideIN locations?	

Infection Event Data	
Have you entered infection information under Event? $ ightarrow$ Add for any of the measures you are tracking in your MRP.	
If no infections have arisen, have you reviewed the Alerts portion of NHSN to "Report No Events"?	
Alerts is the first menu option on the blue Navigation Bar	

Other Information	
Have you ensured all of your inpatient locations are entered into NHSN and the correct bed size information is documented?	
Facility \rightarrow Locations; ensure that each location is "active"	

Acute Care Hospitals

Acute Care Hospitals are required to report CLABSI (adult, pediatric, and neonatal ICUs) since January 2011, CAUTI (adult and pediatric ICUs) since January 2012, SSI (colon and abdominal hysterectomy) since January 2012, MRSA Bacteremia and *Clostridium difficile* LabID Events since January 2013, and Healthcare Worker Influenza Vaccinations for the 2012-2013 Flu Season.

Patient Safety Component Summary Data	
Device Associated - Intensive Care Unit/ Other Locations	
Are total patient days populated for each location and for each month of 2013Q1?	
*Are central line days populated for each location and for each month of 2013Q1?	
*Are cathether days populated for each location and for each month of 2013Q1?	
*Reporting contingent upon Waiver Submission to Quality Net.	
If you have no events (infections) to report, is "Report No Events" checked for each measure for the respective months?	
MDRO and CDI prevention Process and Outcome Measures Monthly Monitoring	
For each month of 2013Q1, is FACWIDEIN selected for the "Location Code"?	
Are total patient days and total admissions populated?	
For LabID Event (all specimens), is C. difficle checked?	
For LabID Event (blood specimens only), is MRSA checked?	
If you have no infections to report, is "Report No Events" checked next to the respective measure?	
Procedure Summary Data	
Have you completed "Denominator for Procedure" forms for each surgical procedure completed at your facility?	
Denominators for surgeries are entered in Procedure $ ightarrow$ Add	
Healthcare Personnel Safety Component Monthly Reporting Plan	
Do you have Monthly Reporting Plans (MRP) on file for Jan/Feb/Mar 2013?	

Healthcare Personnel Vaccination Module

Is "Influenza Vaccination Summary" selected?

Long Term Acute Care Hospitals (LTAC)

LTACs are required to report CLABSI (all inpatient locations) since October 2012 and CAUTI (all inpatient locations) since October 2012.

Patient Safety Component Monthly Reporting Plan	
Do you have Monthly Reporting Plans (MRP) on file for Jan/Feb/Mar 2013?	
Device-Associated Module	
Are each of your inpatient locations added?	

Infection Event Data	
Have you entered infection information under Event? $ ightarrow$ Add for any of the measures you are tracking in your MRP.	
If no infections have arisen, have you reviewed the Alerts portion of NHSN to "Report No Events"?	
Alerts is the first menu option on the blue Navigation Bar	

Patient Safety Component Summary Data	
Device Associated - Intensive Care Unit/ Other Locations	
Are total patient days populated for each location and for each month of 2013Q1?	
Are central line days populated for each location and for each month of 2013Q1?	
Are cathether days populated for each location and for each month of 2013Q1?	
If you have no events (infections) to report, is "Report No Events" checked for each measure for the respective months?	
If you have no infections to report, is "Report No Events" checked next to the respective measure?	

Other Information	
Have you ensured all of your inpatient locations are entered into NHSN and the correct bed size information is documented?	
Facility \rightarrow Locations; ensure that each location is "active"	

Inpatient Rehabilitation Facilities (IRF)

IRF are required to report CAUTI (all inpatient locations) since October 2012.

Patient Safety Component Monthly Reporting Plan	
Do you have Monthly Reporting Plans (MRP) on file for Jan/Feb/Mar 2013?	
Device-Associated Module Are each of your inpatient locations added?	

Infection Event Data	
Have you entered infection information under Event? \rightarrow Add for any of the measures you are tracking in your MRP.	
If no infections have arisen, have you reviewed the Alerts portion of NHSN to "Report No Events"?	
Alerts is the first menu option on the blue Navigation Bar	

Patient Safety Component Summary Data	
Device Associated - Intensive Care Unit/ Other Locations	
Are total patient days populated for each location and for each month of 2013Q1?	
Are cathether days populated for each location and for each month of 2013Q1?	
If you have no events (infections) to report, is "Report No Events" checked for each measure for the respective months?	
If you have no infections to report, is "Report No Events" checked next to the respective measure?	

Other Information	
Have you ensured all of your inpatient locations are entered into NHSN and the correct bed size information is documented?	
Facility \rightarrow Locations; ensure that each location is "active"	