

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

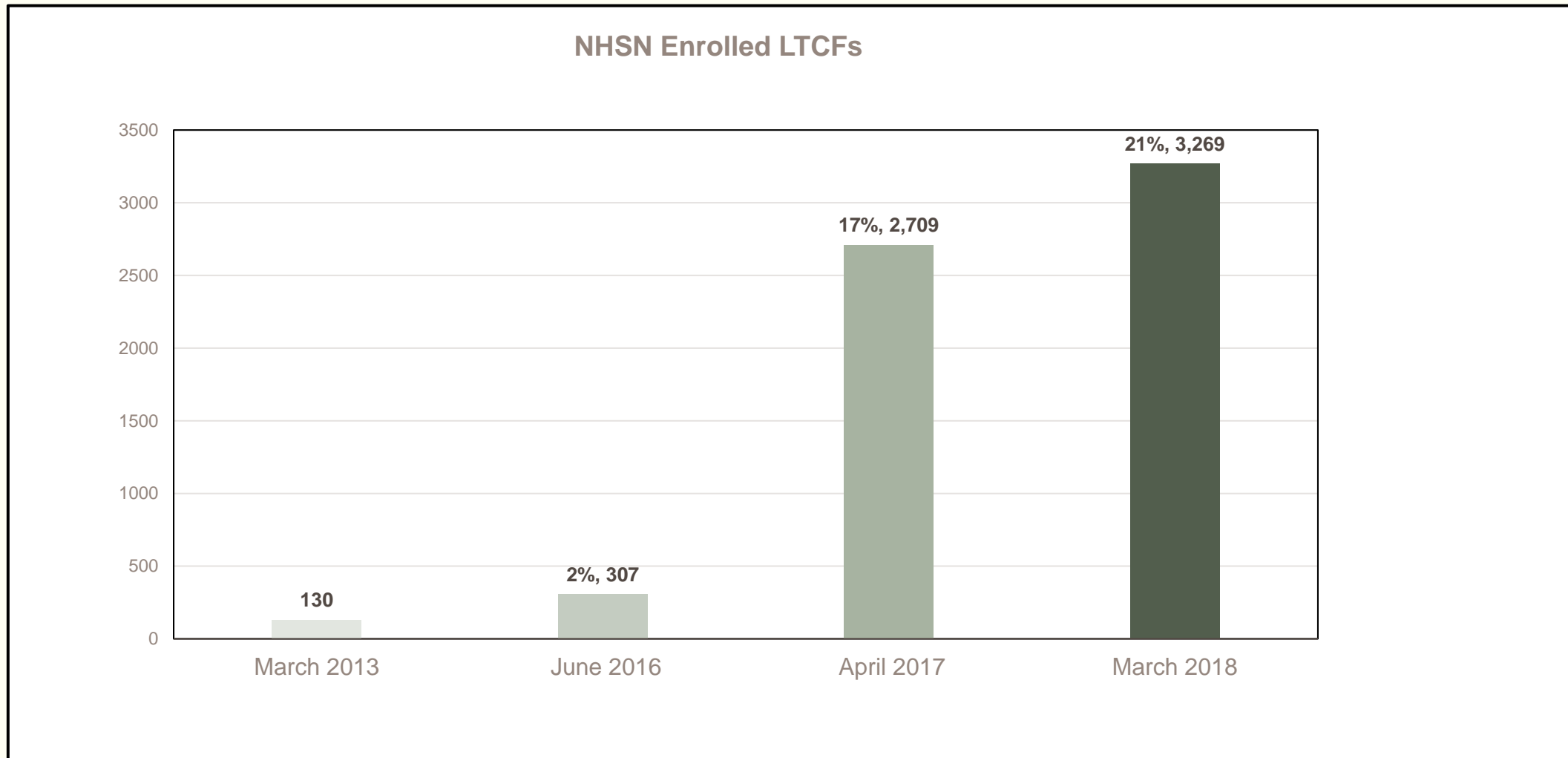
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Infection Prevention and Control/Epidemiology



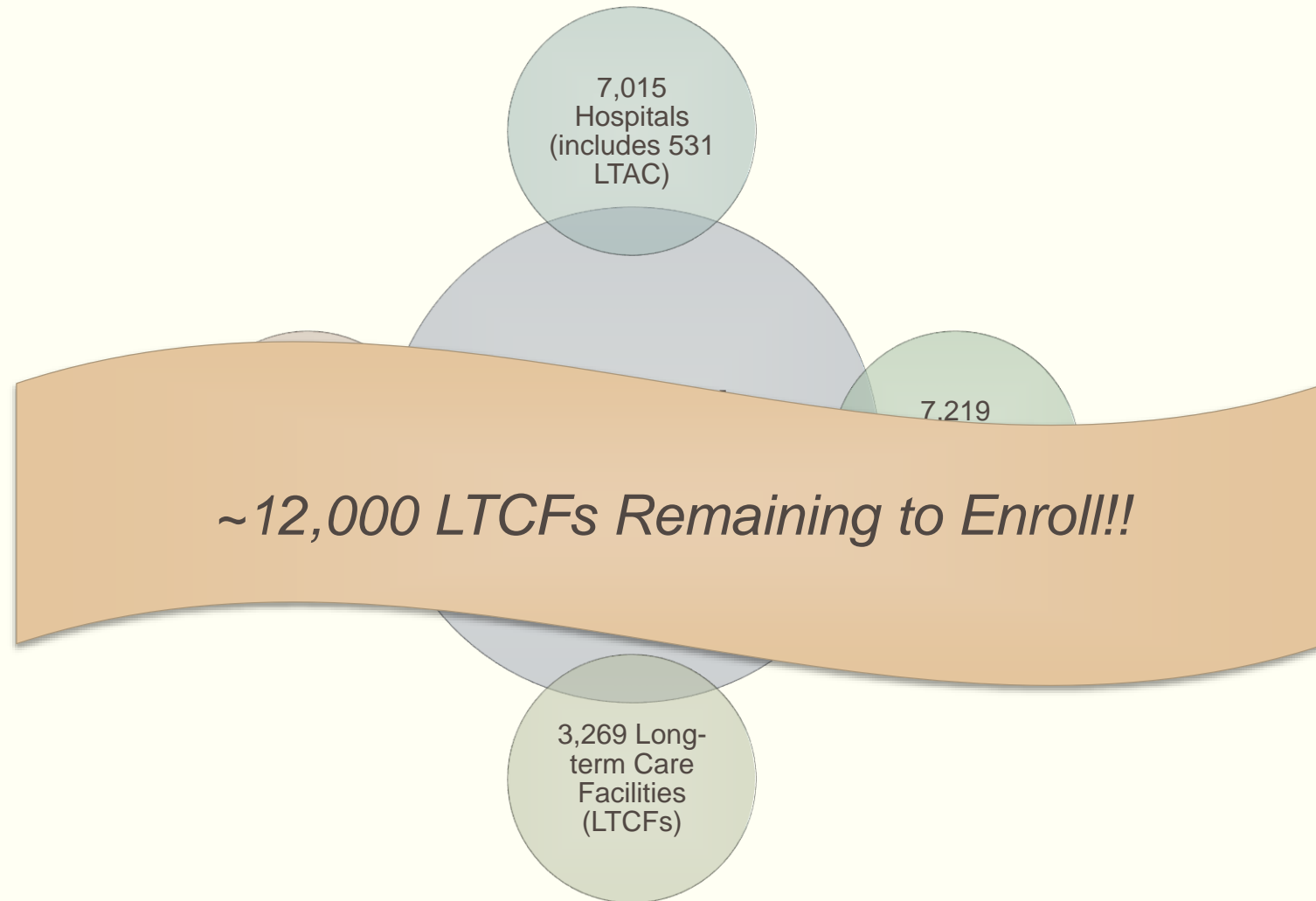
Objectives

- 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 Enrollment as of March 23, 2018



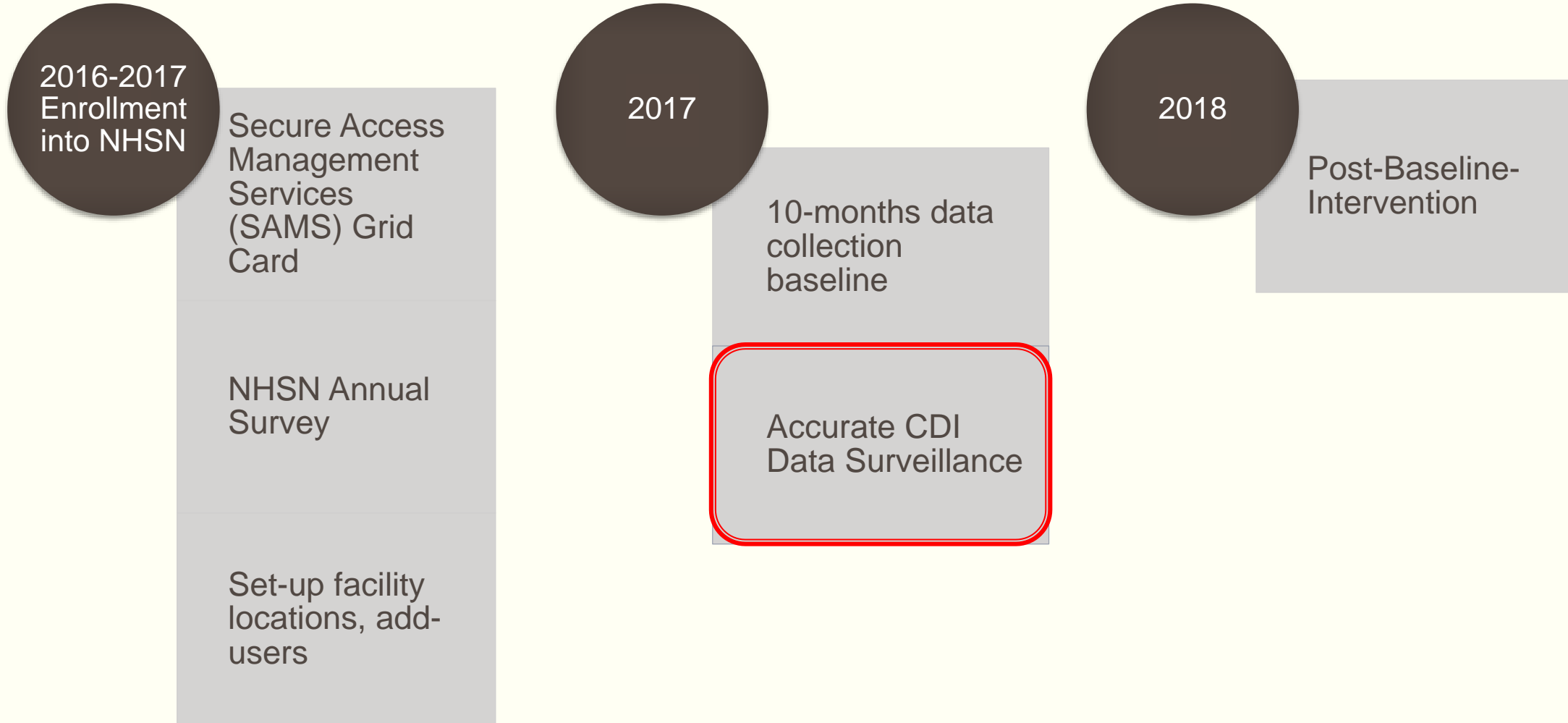
Data Reporting

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



NHSN Surveillance Table of Instructions

National Healthcare Safety Network (NHSN)

NHSN	CDC > NHSN > Materials for Enrolled Facilities > Long-term Care Facilities
NHSN Login	Surveillance for C. difficile, MRSA, and other Drug-resistant Infections
About NHSN +	
Enroll Here +	
Materials for Enrolled Facilities -	Resources for NHSN Users Already Enrolled
Ambulatory Surgery Centers +	> Training
Acute Care Hospitals/Facilities +	> Protocol
Long-term Acute Care Hospitals/Facilities +	> Data Collection Forms
Long-term Care Facilities -	> Data Collection Forms
Surveillance for C. difficile and MRSA Infections	All Data Collection Forms are Print-only <ul style="list-style-type: none"> • 57.138 LabID Event Form for LTCF January 2018 [PDF - 49K] <ul style="list-style-type: none"> ◦ Customizable form [DOCX - 28K] ◦ Table of Instructions – LabID Event Form for LTCF [PDF - 280K] • 57.139 MDRO and CDI Monthly Monitoring for LTCF January 2018 [PDF - 44K] <ul style="list-style-type: none"> ◦ Table of Instructions – MDRO and CDI Monthly Monitoring for LTCF [PDF - 48K] • 57.142 Denominators for LTCF January 2018 [PDF - 40K] <ul style="list-style-type: none"> ◦ Customizable form [DOCX - 29K] ◦ Table of Instructions – Denominators for LTCF [PDF - 162K] • 57.141 Monthly Reporting Plan for LTCF January 2018 [PDF - 42K] <ul style="list-style-type: none"> ◦ Customizable form [DOCX - 27K] ◦ Table of Instructions – Monthly Reporting Plan for LTCF [PDF - 112K]
Surveillance for Urinary Tract Infections	
Surveillance for Process Measures – Hand Hygiene, Gloves and Gown Adherence	
Surveillance for Healthcare Personnel Exposure	
Surveillance for Healthcare Personnel Vaccination	

New Users - Start Here



- Step 1: Enroll into NHSN
- Step 2: Set up NHSN
- Step 3: Report

[Click here to enroll](#)

Reporting Quality Data: NHSN Training Videos



<https://www.youtube.com/watch?v=EY1GQfv9tTg>

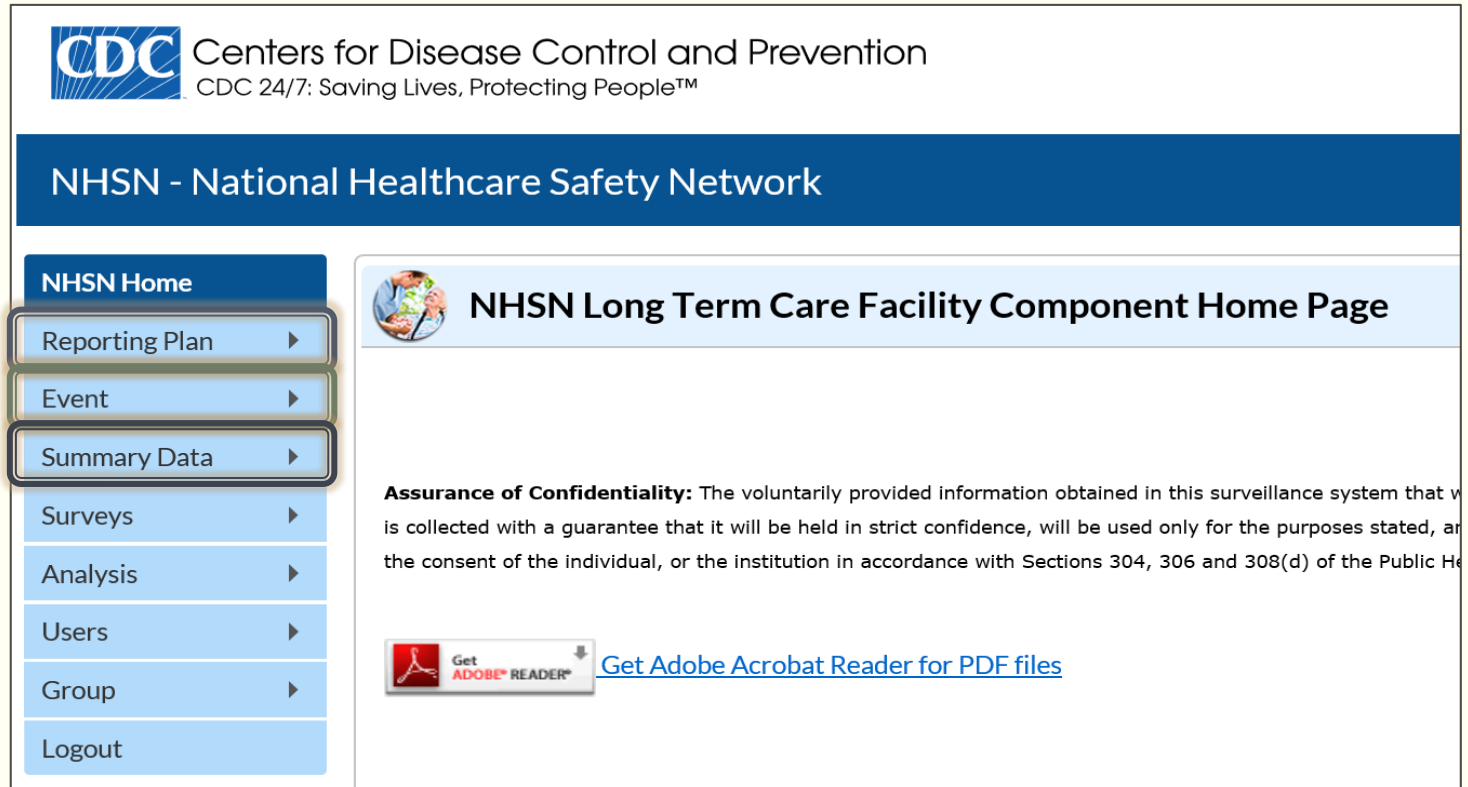
NHSN Reporting Checklist: Best Practice

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

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

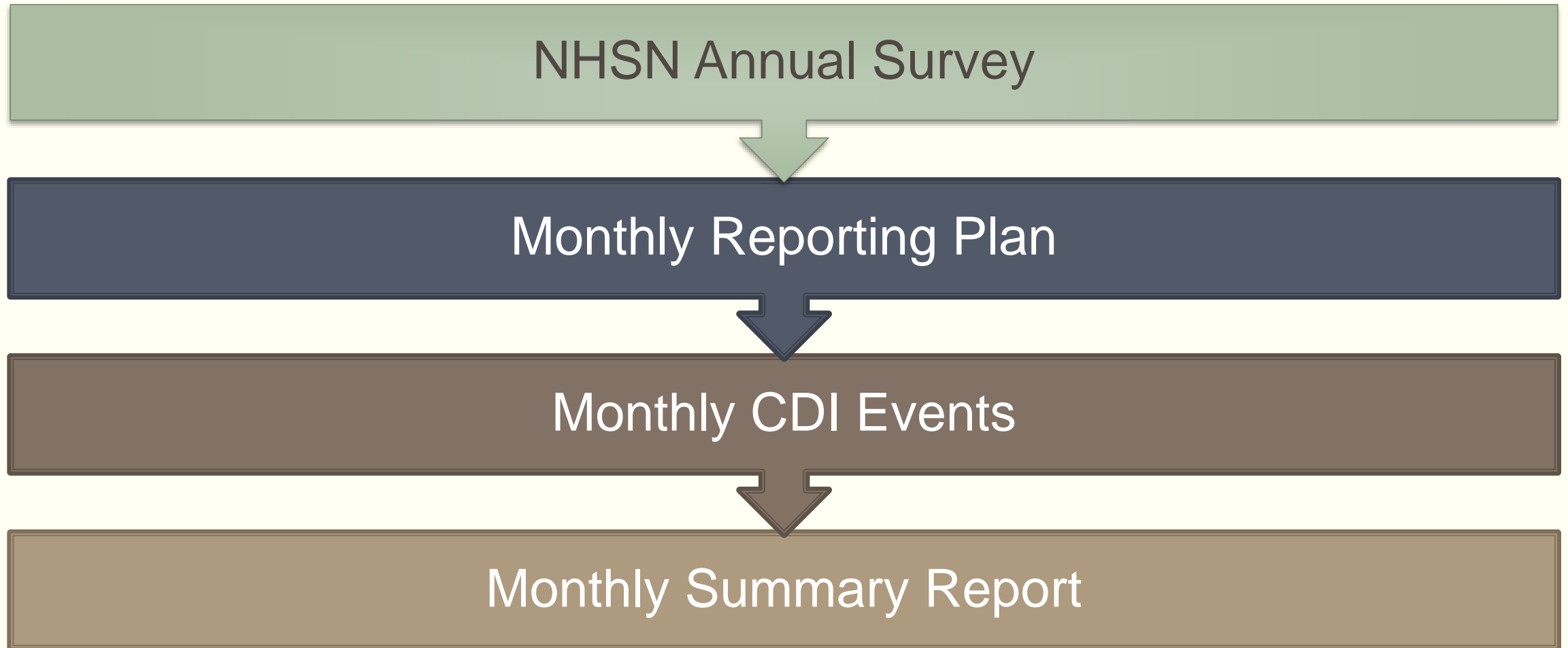
3. Enter monthly summary report data

4. Resolves "Alerts", if applicable



The screenshot shows the NHSN Long Term Care Facility Component Home Page. At the top left is the CDC logo with the text "Centers for Disease Control and Prevention" and "CDC 24/7: Saving Lives, Protecting People™". Below this is a dark blue header with "NHSN - National Healthcare Safety Network" in white. A left-hand navigation menu contains the following items: "NHSN Home", "Reporting Plan", "Event", "Summary Data", "Surveys", "Analysis", "Users", "Group", and "Logout". The "Summary Data" item is highlighted with a dark blue background. To the right of the menu is a light blue header with a globe icon and the text "NHSN Long Term Care Facility Component Home Page". Below this header is a section titled "Assurance of Confidentiality" with a paragraph of text. At the bottom right, there is a "Get Adobe Reader" button and a link to "Get Adobe Acrobat Reader for PDF files".

NHSN Data Quality Checks





BEFORE WE DIVE INTO THE DATA...

Logging into SAMS...Quick Tip

Warning: This warning banner provides privacy and security notices consistent with applicable federal laws, directives, and other federal guidance for accessing this Government system, which 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 and may result in disciplinary action and/or civil and criminal penalties. At any time, and for any lawful Government purpose, the government may monitor, record, and audit your system usage and/or intercept, search and seize any communication or data transiting or stored on this system. Therefore, you have no reasonable expectation of privacy. Any communication or data transiting or stored on this system may be disclosed or used for any lawful Government purpose.

Choose a login option

External Partners

SAMS Credentials



SAMS Username

SAMS Password

Login

[Forgot Your Password?](#)

For External Partners who login with only a SAMS issued UserID and

SAMS Grid Card



Click the Login button to sign on with a SAMS Grid Card

Login

For External Partners who have been issued a SAMS Grid Card.

OR

HHS Staff

AMS Login



[How to use AMS](#)

Login

For all HHS staff including Operating Divisions (CDC, NIH,

AMS One Time Password



[How to use OTP](#)

Login

For all HHS staff including Operating Divisions (CDC, NIH, FDA, etc.) with a One Time

OR

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 and may result in disciplinary action and/or civil and criminal penalties. At any time, and for any lawful Government purpose, the government may monitor, record, and audit your system usage and intercept, search and seize any communication or data transiting or stored on this system. Therefore, you have no reasonable expectation of privacy. Any communication or data transiting or stored on this system may be disclosed or used for any lawful Government purpose.

Choose a login option

External Partners

SAMS Grid Card



SAMS Username

SAMS Password

Login

[Forgot SAMS Password?](#)

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 and may result in disciplinary action and/or civil and criminal penalties. At any time, and for any lawful Government purpose, the government may monitor, record, and audit your system usage and intercept, search and seize any communication or data transiting or stored on this system. Therefore, you have no reasonable expectation of privacy. Any communication or data transiting or stored on this system may be disclosed or used for any lawful Government purpose.

Choose a login option

External Partners

SAMS Grid Card



SAMS has assigned you CDC GRID card number: 29189. Please ensure this number matches the serial number printed on the lower left of your card.

Grid Card C1: E4: J4:

Login

For External Partners who have been issued a SAMS Grid Card.

Login

For all HHS staff including Operating

HHS Staff

PIV Login



Click the Login button to sign on with a HHS PIV Card.

Login

For all HHS staff including Operating Divisions (CDC, NIH, FDA, etc.)

OR

AMS One Time Password



[How to use OTP](#)

Login

For all HHS staff including Operating Divisions (CDC, NIH, FDA, etc.) with a One Time Password.

Login

For all HHS staff including Operating



NHSN ANNUAL SURVEY

NHSN Annual Survey: 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


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

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:

Survey Year:



NHSN Annual Survey: Primary Laboratory Testing Type

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 options 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)? *

Scroll to the bottom and click 'Edit'



NHSN Annual Survey: 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'



NHSN Monthly Reporting Plan

NHSN Home

- Reporting Plan ▶
- Event ▶**
- Summary Data ▶
- Surveys ▶
- Analysis ▶
- Users ▶
- Group ▶
- Logout

Step 1: Monthly Reporting Plan

NHSN Data Reporting - Monthly Reporting Plan - Video #1



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!

Message from webpage



LabID results must be reported for 6 consecutive months for the same pathogen(s) (CDIF) to provide meaningful measures. Do you want to continue?

OK

Cancel

Monthly Reporting Plan: Identify the Problem and Action Steps

Identify the Problem: Find Monthly Reporting Plan

NHSN - National Healthcare Safety Network

BUFFYL
LTCF/QIN-QIO Project - Test

NHSN Home

Alerts

Reporting Plan ▶

Resident ▶

Event ▶

Summary Data ▶

Surveys ▶

Analysis ▶

Users ▶

Facility ▶

Group ▶

Logout

NHSN Long Term Care Facility Comp

Add

Find

COMPLETE THESE ITEMS

ALERTS

3
Missing Summary Data

NHSN - National Healthcare Safety Network

NHSN Home

Alerts

Reporting Plan ▶

Resident ▶

Event ▶

Summary Data ▶

Surveys ▶

Analysis ▶

Users ▶

Facility ▶

Group ▶

Logout

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


Facility ID: LTCF/QIN-QIO Project - Test (ID 45188) ▼

Month: January ▼

Year: 2018 ▼

Find Clear Back

Monthly Reporting Plan: Current Plan



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

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

LabID Event Module

Locations	Specific Organism Type	Lab ID Event All Specimens
Facility-wide Inpatient (FacWIDEIn)	CDIF - C. difficile	<input checked="" type="checkbox"/>
Facility-wide Inpatient (FacWIDEIn)	CRE - CRE (CRE-Ecoli, CRE-Enterobacter, CRE-Klebsiella)	<input checked="" type="checkbox"/>

Prevention Process Measure Module

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

[Edit](#) [Previous](#) [Next](#) [Back](#)

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.

Monthly Reporting Plan: Editing Error



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.

The screenshot displays the NHSN Long Term Care Facility Component Home Page. On the left is a navigation menu with the following items: NHSN Home, Alerts, Reporting Plan, Resident, Event, Summary Data, Surveys, Analysis, Users, Facility, Group, and Logout. The 'Summary Data' item is highlighted, and a dropdown menu is open with the options: Add, Find, and Incomplete. The 'Find' option is currently selected. The main content area features a header with a globe icon and the text 'NHSN Long Term Care Facility Component Home Page'. Below the header is a dark blue bar labeled 'Action Items'. Underneath this bar, the text 'E THESE ITEMS' is partially visible. A notification card is displayed, showing a large blue number '3' and the text 'Missing Summary Data'.

Monthly Reporting Plan: Action to Edit a Plan Once the Summary Data has Been Entered

NHSN - National Healthcare Safety Network

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

View Monthly Summary Data

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

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

Delete **Summary Data** to Make a Change in Monthly Reporting Plan

Denominators for Long Term Care Locations

Location Code	Total Resident Days	Urinary Catheter Days	Report No UTI	New Antibiotic Starts for UTI Indication	Number of Urine Cultures Ordered
Facility-wide Inpatient (FacWIDEIn)	*	*	<input type="checkbox"/> **	*	*

MDRO & CDI LabID Event Reporting

Location Code	Resident Admissions: Resident Days:	LabID Event (All specimens) Report No Events	Specific Organism Type							
			MRSA	VRE	CephR-Klebsiella	CRE-Ecoli	CRE-Enterobacter	CRE-Klebsiella	C. difficile	MDR-Acinetobacter
Facility-wide Inpatient (FacWIDEIn)	15 * 2035 *		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> **	<input type="checkbox"/> **	<input type="checkbox"/> **	<input type="checkbox"/>	<input type="checkbox"/>

Message from webpage

Are you sure you want to delete the selected summaries?

Monthly Reporting Plan: Identify the Problem and Action Steps

NHSN - National Healthcare Safety Network

BUFFYL
LTCF/QIN-QIO Project - Test

NHSN Long Term Care Facility

NHSN - National Healthcare Safety Network

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

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

Find **Clear** **Back**

NHSN Home

Alerts

Reporting Plan ▶

Resident ▶

Event ▶

Summary Data ▶

Surveys ▶

Analysis ▶

Users ▶

Facility ▶

Group ▶

Logout

COMPLETE THESE ITEMS

ALERTS

3
Missing Summary Data

Monthly Reporting Plan: Identify the Problem and Action Steps

NHSN - National Healthcare Safety Network

NHSN Home

Alerts

Reporting Plan ▶

Resident ▶

Event ▶

Summary Data ▶

Surveys ▶

Analysis ▶

Users ▶

Facility ▶

Group ▶

Logout



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

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

LabID Event Module

Locations	Specific Organism Type	Lab ID Event All Specimens
Facility-wide Inpatient (FacWIDEIn)	CDIF - C. difficile	<input checked="" type="checkbox"/>
Facility-wide Inpatient (FacWIDEIn)	CRE - CRE (CRE-Ecoli, CRE-Enterobacter, CRE-Klebsiella)	<input checked="" type="checkbox"/>

Prevention Process Measure Module

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

Edit

Previous

Next

Back

Edit Current Reporting Plan

NHSN Home

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

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

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

LabID Event Module

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

Add Row Clear All Rows Copy from Previous Month

Prevention Process Measure Module

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

Copy from Previous Month

Save **Back**

Message from webpage

LabID results must be reported for 6 consecutive months for the same pathogen(s) (CDIF) to provide meaningful measures. Do you want to continue?

OK Cancel

Plan saved successfully.

Enter Summary Data That Was Deleted

NHSN - National Healthcare Safety Network



The screenshot displays the NHSN Long Term Care Facility Component Home Page. On the left is a navigation menu with the following items: NHSN Home, Alerts, Reporting Plan, Resident, Event, Summary Data, Surveys, Analysis, Users, Facility, Group, and Logout. The 'Summary Data' item is highlighted, and a dropdown menu is open, showing 'Add', 'Find', and 'Incomplete'. The 'Add' option is highlighted with a red box. The main content area features a header for 'NHSN Long Term Care Facility Component Home Page' and a dark blue 'Action Items' section. Below this, a notification card shows a large blue number '2' and the text 'Missing Summary Data'.

Enter Summary Data That Was Deleted

NHSN - National Healthcare Safety Network BUFFYL
LTCF/QIN-QIO Project - Test

Add Monthly Summary Data

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

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

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

MDRO & CDI LabID Event Reporting

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

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

Save **Back**

*Notice UTI and CRE are now removed

Monthly CDI Event

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

NHSN Data Reporting - Entering C. diff Events - Video #2

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

NHSN National Healthcare Safety Network

NHSN Home

Add Event

Mandatory fields marked with *

Fields required for record completion marked with **

Resident Information

Facility ID *: LTCF

Resident ID *: Find Find Events for Resident

Social Security # *:

Medicare number (or comparable railroad insurance number):

Last Name:

Middle Name:

First Name:

Gender *:

Date of Birth *: M

Ethnicity:

Race:

- American Indian/Alaska Native
- Asian
- Black or African American
- Native Hawaiian/Other Pacific Islander
- White

Resident type *:

Date of Current Admission to Facility *: M

0:30 / 3:19

Date of Current Admission to Facility *: M

YouTube

Monthly CDI Events

National Healthcare Safety Network (NHSN)

CDC > NHSN > Materials for Enrolled Facilities > Long-term Care Facilities

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


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.

Data Collection Forms

All Data Collection Forms are Print-only

- [57.138 LabID Event Form for LTCF January 2018](#) [PDF - 49K]
 - [Customizable form](#) [DOCX - 28K]
 - [Table of Instructions - LabID Event Form for LTCF](#) [PDF - 280K]
- [57.139 MDRO and CDI Monthly Monitoring for LTCF January 2018](#) [PDF - 44K]
 - [Table of Instructions - MDRO and CDI Monthly Monitoring for LTCF](#) [PDF - 48K]
- [57.142 Denominators for LTCF January 2018](#) [PDF - 40K]

Here



- Step 1: Enroll into NHSN
- Step 2: Set up NHSN
- Step 3: Report

[Click here to enroll](#)

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

Resident type *: SS - Short-stay ▼

Date of First Admission to Facility *: 03/01/2017 

Date of Current Admission to Facility *: 03/01/2017 

Event Information

Event Type *: LABID - Laboratory-identified MDRO or CDI Event ▼ Date Specimen Collected *: 

Specific Organism Type *: CDIF - *C. difficile* ▼

Specimen Body Site/System *: DIGESTIVE SYSTEM

Specimen Source *: STOOL

Resident Care Location *: NH A -


Primary Resident Service Type *: SKNUR


Has resident been transferred from an acute care facility?

If Yes, date of last transfer from acute care facility:

If Yes, was the resident on antibiotic therapy at the time of admission?

Documented evidence of previous infection?

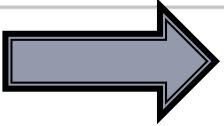

Date Specimen Collected *: 

Feb 2017 

Su	Mo	Tu	We	Th	Fr	Sa
			1	2	3	4
5	6	7	8	9	10	11
12	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28				

Validation Error

Date Specimen Collected must be >= Date of Current Admission to Facility.

Custom Fields Help

TSF FROM TRENT:

TEST:

TSF FROM SANTA:

TEST2:

CDI Event Error # 1: Action

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

Resident type *: SS - Short-stay

Date of First Admission to Facility *: 03/01/2017

Date of Current Admission to Facility *: 03/01/2017

Event Information

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

Specific Organism Type *: CDIF - C. difficile

Specimen Body Site/System *: DIGEST - Digestive System

Specimen Source *: STOOL - Stool specimen

Date of Event *: 03/01/2017

Was the resident on antibiotic therapy for this specific organism type at the time of transfer to your facility? *: Y - Yes

Documented evidence of previous infection or colonization with this specific organism type from a previously reported LabID Event in any prior month? N - No

Custom Fields

TSF FROM TRENT: TEST: TEST2:

TSF FROM SANTA: TEST2:

Comments

RESIDENT TAKING FLAGYL TO TREAT CDIFF INFECTION.

Save Delete Back

Do Not Create a CDI Event for a Resident Admitted/Readmitted on C. diff Treatment

CDI Event Error # 1: Action

If the date of event is before the admission to your facility add to your **summary data**.

NHSN Home

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

Add Monthly Summary Data

[Print F](#)

Mandatory fields marked with *

Fields required for record completion marked with **

Facility ID *:

Month *:

Year *:

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

MDRO & CDI LabID Event Reporting

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

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

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.

Event Information

Event Type *: LABID - Laboratory-identified MDRO or CDI Event Date of Event *: 03/01/2018

Specific Organism Type *: CDIF - C. difficile

Specimen Body Site/System *: DIGEST - Digestive System


Specimen Source: *: STOOL - Stool specimen

Resident Care Location *: NH A - NEIGHBORHOOD A

Primary Resident Service Type *: SKNUR - Skilled nursing/short term rehab

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 *: 03/01/2017

If Yes, was the resident on antibiotic therapy for this specific organism type at the time of transfer to your facility *? Y - Yes 

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

Custom Fields

TSF FROM TRENT: TEST:

TSF FROM SANTA: TEST2:

Comments

ADMITTED ON CIPRO

CDI Event Report: Problem 2 Action

Action: Verify that the resident was in fact admitted on antibiotics for **CDI Organism Type**.

Event Information

Event Type *: LABID - Laboratory-identified MDRO or CDI Event Date of Event *: 03/01/2018

Specific Organism Type *: CDIF - C. difficile


Specimen Body Site/System *: DIGEST - Digestive System

Specimen Source: *: STOOL - Stool specimen

Resident Care Location *: NHA - NEIGHBORHOOD A

Primary Resident Service Type *: SKNUR - Skilled nursing/short term rehab

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 *: 03/01/2017 

If Yes, was the resident on antibiotic therapy for this specific organism type at the time of transfer to your facility *? Y - Yes

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


Custom Fields

TSF FROM TRENT: TEST:

TSF FROM SANTA: TEST2:

Comments

ADMITTED ON CIPRO

 Edit Delete Back

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.

Event Information

Event Type *: LABID - Laboratory-identified MDRO or CDI Event Date of Event *: 03/01/2018 14

Specific Organism Type *: CDIF - C. difficile

Specimen Body Site/System *: DIGEST - Digestive System

Specimen Source *: STOOL - Stool specimen

Resident Care Location *: NH A - NEIGHBORHOOD A

Primary Resident Service Type *: SKNUR - Skilled nursing/short term rehab

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 *: 03/01/2017 14

If Yes, was the resident on antibiotic therapy for this specific organism type at the time of transfer to your facility *? **N - No** ←

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

Custom Fields

TSF FROM TRENT: TEST:

TSF FROM SANTA: TEST2:

Comments

ADMITTED ON CIPRO

→

3: NHSN Monthly Summary Report

- NHSN Home
- Reporting Plan
- Event
- Summary Data**
- Surveys
- Analysis
- Users
- Group
- Logout

NHSN Data Reporting - Entering Summary Data - Video #3

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

NHSN - National Healthcare Safety Network

Add Monthly Summary Data

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

Facility ID: LTCF
Month: January
Year: 2017

MDRO & CDI LabID Event Reporting

Location Code	Resident Admissions:	Resident Days:	LabID Event (A specimens)	Report No Events	CRE-Enterobacter	CRE-Klebsiella	C. difficile	MDR-Acinetobacter
Facility-wide Inpatient (FacWIDEIn)	12	1500			<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Number of Admissions on C. diff Treatment: 1

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

1:07 / 2:02

Save Back

CC YouTube

** 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

NHSN Home

Alerts

Reporting Plan ▶

Resident ▶

Event ▶

Summary Data ▶

Surveys ▶

Analysis ▶

Users ▶

Facility ▶

Group ▶

Logout

Add Monthly Summary Data

[Print F](#)

Mandatory fields marked with *

Fields required for record completion marked with **

Facility ID *: ▼

Month *: ▼

Year *: ▼

Denominators for Long Term Care Locations

- No long term care locations selected on monthly reporting plan

MDRO & CDI LabID Event Reporting

Location Code			Specific Organism Type							Custom Fields	
			MRSA	VRE	CephR-Klebsiella	CRE-Ecoli	CRE-Enterobacter	CRE-Klebsiella	C. difficile		MDR-Acinetobacter
<div style="display: flex; align-items: center;"> 🗑️ <input type="text" value="Facility-wide Inpatient (FacWIDEIn)"/> </div>	Resident Admissions: <input type="text"/> *	LabID Event (All specimens)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
	Resident Days: <input type="text"/> *										
	Number of Admissions on C. diff Treatment: <input type="text"/> *	Report No Events	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Prevention Process Measures

- 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

Location Code			Specific Organism Type					
			MRSA	VRE	CephR-Klebsiella	CRE-Ecoli	CRE-Enterobacter	CRE-Klebsiella
 Facility-wide Inpatient (FacWIDEIn)	Resident Admissions: 12 *	LabID Event (All specimens)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Resident Days: 1350 *		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Number of Admissions on C. diff Treatment: 1 *		Report No Events	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

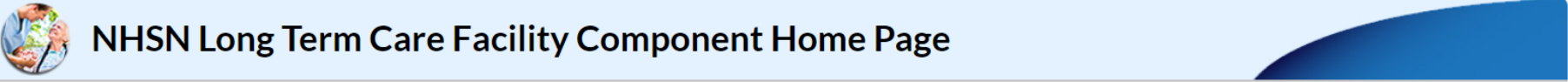
Prevention Process Measures
 - No long term care locations selected on monthly reporting plan


Save
Back

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!

		Specific Organism Type							
		MRSA	VRE	CephR-Klebsiella	CRE-Ecoli	CRE-Enterobacter	CRE-Klebsiella	C. difficile	MDR-Acineobacter
Resident Admissions:									
Resident Days:	LabID Event (All specimens)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Number of Admissions on C. diff Treatment:	Report No Events	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Monthly reporting plan



Sometimes the checks no events box is at the far right of your monitor

Demonstrate LTCF Data Surveillance and Collection Strategies

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 NMSN 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

NHSN Home

Alerts

Reporting Plan ▶

Resident ▶

Event ▶

Summary Data ▶

Surveys ▶

Analysis ▶

Users ▶

Facility ▶

Group ▶

Logout

Add Annual Survey

Mandatory fields marked with *

Facility ID *: LTCF/QIN-QIO Project - Test (ID 45188) ▼

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 *:

Total number of long-stay residents *:

Total number of new admissions *:

Average length of stay for short-stay residents:

Average length of stay for long-stay residents:

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):

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

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

NHSN Annual Survey # 2: Microbiology Laboratory Practices

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)

NHSN Annual Survey # 2: Microbiology Laboratory Practices


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
- 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): _____

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

CDI Events # 1: Specimen Collection Date

 **Add Event**

Mandatory fields marked with *

Fields required for record completion marked with **

Resident Information

Facility ID *:

Resident ID *: 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 *:

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 *: 

CDI Events # 1: Specimen Collection Date

Event Information

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

Date Specimen Collected *: 16

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?

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 ▼

Date Specimen Collected *:  16

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 *? Y - Yes ▼

If Yes, *date of last transfer* from acute care to your facility *:  16

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

Event Information

Event Type *: LABID - Laboratory-identified MDRO or CDI Event ▾ Date Specimen Collected *: 16

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 *? Y - Yes ▾

If Yes, date of last transfer from acute care to your facility *: 16

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?

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 **

[Print Form](#)

Facility ID *:

Month *:

Year *:

Denominators for Long Term Care Locations

- No long term care locations selected on monthly reporting plan

MDRO & CDI LabID Event Reporting

Location Code	LabID Event (All specimens)	Specific Organism Type							MDR-Acinetobacter	Custom Fields
		MRSA	VRE	CephR-Klebsiella	CRE-Ecoli	CRE-Enterobacter	CRE-Klebsiella	C. difficile		
<div style="border: 2px solid #0070c0; border-radius: 15px; padding: 5px; width: fit-content;"> Resident Admissions: <input type="text"/> * Resident Days: <input type="text"/> * Number of Admissions on C. diff Treatment: <input type="text"/> * </div>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input checked="" type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>

CDI Monthly Summary Report #1: Resident Admissions

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

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

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

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

Business office

CDI Summary Monthly Report #3 : Total Number of Admissions on *C. diff* Treatment

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

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...



NHSN

National Healthcare Safety Network (NHSN)

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

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

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



C. difficile & MRSA Infections



Urinary Tract Infections (UTI)



Prevention Process Measures



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

QIO: Nursing Home Training Sessions

The screenshot shows the Quality Improvement Organizations website. The header includes the logo, navigation links (Locate Your QIO, About This Site, Contact Us), and social media icons. The main navigation bar has categories: PATIENTS & FAMILIES, HEALTH CARE PROVIDERS, PARTNERSHIPS & INITIATIVES, ABOUT, EVENTS, and NEWS. The 'PARTNERSHIPS & INITIATIVES' menu is expanded, showing 'NURSING HOME TRAINING SESSIONS' and 'NURSING HOME RESOURCES'. The 'NURSING HOME TRAINING SESSIONS' list includes: 1. TeamSTEPPS® in LTC: Communication Strategies to Promote Quality and Safety, 2. Exploring Antibiotics and their Role in Fighting Bacterial Infections, 3. Antibiotic Resistance: How it Happens and Strategies to Decrease the Spread of Resistance, 4. Antibiotic Stewardship, 5. Clostridium difficile Part One: Clinical Overview, and 6. Clostridium difficile Part Two: Strategies to Prevent, Track, and Monitor C. difficile. The main content area is titled 'Nursing Home Training Sessions Introduction' and features a 'Train-the-Trainer Series' diagram with three arrows pointing to the left, up, and down. Below the diagram is a paragraph of introductory text. A blue box highlights the text: 'C. difficile harms residents!' followed by a bullet point: 'C. difficile caused almost half a million infections among patients in the US in 2011. More than 80% of the deaths associated with C. difficile occurred among Americans aged 65 or older (CDC 2015).' A section titled 'Training sessions and resources for nursing homes to support:' lists: Implementation of principles and practices of antibiotic stewardship, Prevention and management of Clostridium difficile infections, and TeamSTEPPS® communication strategies and tools to promote quality and safety.

Quality Improvement Organizations
Sharing Knowledge. Improving Health Care.
CENTERS FOR MEDICARE & MEDICAID SERVICES

Locate Your QIO | About This Site | Contact Us

PATIENTS & FAMILIES | HEALTH CARE PROVIDERS | PARTNERSHIPS & INITIATIVES | ABOUT | EVENTS | NEWS

▼ NURSING HOME TRAINING SESSIONS

Nursing Home Training Sessions Introduction

1. TeamSTEPPS® in LTC: Communication Strategies to Promote Quality and Safety
2. Exploring Antibiotics and their Role in Fighting Bacterial Infections
3. Antibiotic Resistance: How it Happens and Strategies to Decrease the Spread of Resistance
4. Antibiotic Stewardship
5. Clostridium difficile Part One: Clinical Overview
6. Clostridium difficile Part Two: Strategies to Prevent, Track, and Monitor C. difficile

▼ NURSING HOME RESOURCES

Nursing Home Training Sessions

Nursing Home Training Sessions Introduction

Print PDF

Train-the-Trainer Series

We hope that you find these training tools and resources helpful in your work to implement antibiotic stewardship and prevent C. difficile infections in your residents. All are welcome to explore this site and use the information as applicable to you and your organization. Thank you for your dedication to preventing infections in residents (and staff, too) and promoting appropriate antibiotic use.

Training sessions and resources for nursing homes to support:

- Implementation of principles and practices of antibiotic stewardship
- Prevention and management of Clostridium difficile infections
- TeamSTEPPS® communication strategies and tools to promote quality and safety

C. difficile harms residents!

- C. difficile caused almost half a million infections among patients in the US in 2011. More than 80% of the deaths associated with C. difficile occurred among Americans aged 65 or older (CDC 2015).

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



QIN-QIO | NHSN Monthly Reporting



NHSN Data Reporting - Monthly Reporting Plan - Video #1
Health Services Advisory Group, Inc.
349 views • 5 months ago
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QUESTIONS?

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