Instructions for Completing the Monthly Survey Form for Patient Day & Nurse Staffing Hours Indicator (CD 57.408)

Data Field	Instructions for Form Completion
Facility ID #	The NHSN-assigned facility ID number will be auto-entered by the computer.
Month	Required. Enter the 2-digit month during which surveillance was performed.
Year	Required. Enter the 4-digit year during which surveillance was performed.
NHSN Location Code	Required. Auto-populate for all mapped critical care units/locations in Active status. Enter the code of the patient care location in which the nurse staffing hours are worked and reported. **Both nurse staffing hours and patient days must be reported from the same unit/location.**
Total # Productive Licensed Vocational/Practical Nurse (LVN/LPN) Hours	**Optional.** Defined as the number of productive hours worked by LVN/LPNs assigned to the unit who have direct patient care responsibilities for greater than 50% of their shift. Productive hours are actual direct patient care hours worked by nursing staff including overtime, not budgeted or scheduled hours. Vacation, sick time, orientation, education leave, or committee time are considered non-productive hours. However, orientation programs vary from hospital to hospital. Once orientees reach the point where they are considered part of the staffing matrix, their work hours are charged to the unit, and they would be replaced if they call in sick, then their hours are counted as productive. Direct patient care responsibilities: Patient centered nursing activities by unit-based staff in the presence of the patient and activities that occur away from the patient that are patient related: • Medication administration • Nursing treatments • Nursing rounds • Admission, transfer, discharge activities • Patient teaching • Patient communication • Coordination of patient care • Documentation time • Treatment planning • Patient screening (for example, risk) and assessment

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	Nursing staff included are either staff employed by the facility or temporary staff who are not employed by the facility (contracted/agency staff). Float staff—those are assigned to a unit other than their unit of employment on an as-needed basis—must be counted and reported in the unit's total nursing hours where staff provided direct patient care. **Included nursing staff:** • Who are counted in the unit's staffing matrix, and • Are replaced if they call in sick, and • Work hours are charged to the unit's cost center. **Excluded nursing staff:** • Whose primary responsibility is administrative in nature • Who are a part of a specialty team, a patient educator, or case manager who is not assigned to a specific unit
Total # Productive Registered Nurse (RN) Hours	**Optional.** Defined as the number of productive hours worked by RNs assigned to the unit who have direct patient care responsibilities for greater than 50% of their shift. Productive hours are actual direct patient care hours worked by nursing staff including overtime, not budgeted or scheduled hours. Vacation, sick time, orientation, education leave, or committee time are considered non-productive hours. However, orientation programs vary from hospital to hospital. Once orientees reach the point where they are considered part of the staffing matrix, their work hours are charged to the unit, and they would be replaced if they call in sick, then their hours are counted as productive. Direct patient care responsibilities: Patient centered nursing activities by unit-based staff in the presence of the patient and activities that occur away from the patient that are patient related: • Medication administration • Nursing treatments • Nursing rounds • Admission, transfer, discharge activities • Patient teaching • Patient communication • Coordination of patient care • Documentation time • Treatment planning • Patient screening (for example, risk) and assessment Nursing staff included are either staff employed by the facility or temporary staff who are not employed by the facility (contracted/agency staff). Float

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	staff—those are assigned to a unit other than their unit of employment on an as-needed basis—must be counted and reported in the unit's total nursing hours where the staff provided direct patient care. **Included nursing staff:** • Who are counted in the unit's staffing matrix, and • Are replaced if they call in sick, and • Work hours are charged to the unit's cost center. **Excluded nursing staff:** • Who are Advanced Practice RNs (APRNs) preforming the role of an institutionally credentialed provider (specifically, licensed provider). Institutionally credentialed providers may include physicians, Certified Registered Nurse Anesthetist (CRNAs), midwives, nurse practitioners, or physician assistants. • Whose primary responsibility is administrative in nature. • Part of specialty teams, patient educators, or case managers who are not assigned to a specific unit. NOTE: Charge nurses are included in the direct patient care hours total when they are part of the unit's staffing plan for any given day of the reporting month AND they are replaced if they call in sick AND their work hours are charged to the unit's cost center AND they provide direct patient care responsibilities for greater than 50% of their shift.
Total # Productive Unlicensed Assistive Personnel (UAPs) Hours	**Optional.** Defined as the number of productive hours worked by UAPs assigned to the unit who have direct patient care responsibilities for greater than 50% of their shift. Unlicensed Assistive Personnel (UAPs): Individuals trained to function in an assistive role to nurses in the provision of patient care, as delegated by and under the supervision* of the registered nurse. Typical activities performed by UAPs may include (but are not limited to): taking vital signs, bathing, feeding, dressing patients, assisting patients with transfers, ambulation, or toileting. **Included nursing staff:** • Nursing assistants, orderlies, patient care technicians/assistants, graduate nurses (not yet licensed) who have completed unit orientation. • Assistive personnel who may be licensed by their state in this category, if functioning in the role of UAP. **Excluded nursing staff:** • Unit secretaries, clerks, or schedulers

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	• Monitor technicians • Therapy assistants • Orderlies or transportation staff whose sole responsibilities are to assist with transport of the stable patient to another phase of care (such as to another nursing unit or to a vehicle for transportation home) • Student nurses who are fulfilling educational requirements • Sitters who either are not employed by the facility or who are employed by the facility but are not providing typical UAP activities.
Total# Patient Days	**Optional.** Defined as the total count of the number of patients in a critical care location during the reporting month. Patient days must be from the same unit in which nursing hours are reported. For each day of the reporting month selected, record the number of patients in the critical care unit/location. Record this number at the same time each day. This count can be determined electronically or manually by a daily count. Patient days should be collected at the same time, every day, for the critical care unit/location reporting NHPPD – it is preferable that the count is performed at midnight/midnight census counts (the number of patients on the unit at midnight each day). At the end of the month, sum the daily counts/midnight census counts. **Monthly patient day counts reported for NHPPD must match those reported for Device-associated Surveillance for the same location.** This means patient day counts reported on the Device-associated Denominator Summary webform must be the same as those reported on the Monthly Survey webform. • If total patient day counts for critical care units/locations are reported as part of the facility's Monthly Reporting Plan (MRP) for one of the Device-associated Event Modules, such as Bloodstream Infection (CLABSI – Central line-associated bloodstream infection), the patient day counts entered on the Denominator Summary Data webform will auto-populate on the Monthly Survey webform. **Excluded Patient Days:** Patient days from some non-reporting unit types, such as non-critical care locations/units, emergency department, peri-operative unit, and obstetrics, are excluded.