

MDCH SHARP NHSN USERS CONFERENCE CALL

Wednesday, October 26, 2012

Thank you to those who were able to join our monthly NHSN users' conference call. If you were unable to participate on this call, we hope that you will be able to participate next month. Any healthcare facility is welcome to participate in these calls, whether they are sharing NHSN data with us or not. These conference calls are voluntary. Registration and name/facility identification are **not** required to participate.

Our monthly conference calls will be held on the 4th Wednesday each month at 10:00 a.m.

Call-in number: 877-336-1831

Passcode: 9103755

Webinar: <http://breeze.mdch.train.org/mdchsharp/>

Suggestions for agenda items and discussion during the conference calls are always welcome! Please contact Judy at weberj4@michigan.gov to add items to the agenda.

HIGHLIGHTS FROM CONFERENCE CALL

Welcome & Introductions

Judy welcomed participants on the call and introductions were made of SHARP staff on the call. Participants were reminded to put their phones on mute or to press *6.

Update on SHARP Reports

In the absence of Allie, Judy reported that Allie is finalizing the 2012 Quarter 1 Report (Jan – March 2012). Allie is also working on finalizing the semi-annual report for October 2011 – March 2012. This report will provide more SIR data for stratified variables such as procedure type for SSIs, and hospital bed size and Michigan region for CLABSIs and CAUTIs.

Allie is also continuing to look for feedback on the annual individual hospital report.

Feedback can be provided on Survey Monkey at the following link:

www.surveymonkey.com/s/individualreports. Allie will consider this feedback for the semi-annual individual hospital reports on which Allie will begin work starting next month (November).

Use of CDA to send NHSN Data

Judy indicated that she had a hospital inquire about other hospitals in Michigan which might be using CDA (clinical document architecture) to report infections to CDC. This hospital (William Beaumont in Troy) is interested in talking to other hospitals using it. U of M Hospital indicated that they have had experience with it and the two hospitals will talk further offline about this. There was also interest expressed in having someone from CDC provide additional information about how CDA works. Judy will pursue this with CDC.

Updates and Reminders

Reminder of CMS Reporting Requirements

Judy reminded participants on the call that, effective October 1, 2012, Long Term Acute Care Hospitals (LTACs) that are participating in CMS's Long Term Care Hospital Quality Reporting Program, are required to begin reporting CLABSI and CAUTI into NHSN. Judy also mentioned that Inpatient Rehab Facilities (IRFs) are required to report CAUTIs, also beginning October 1 of this year. Operational Guidance documents for reporting infections from both LTACs and IRFs are available on the NHSN website at www.cdc.gov/nhsn.

Judy also reminded acute care hospitals of their new reporting requirements which will become effective January 1, 2013: MRSA bacteremias and *C. difficile* LabID Events, and Healthcare Personnel Flu Vaccination summary data. A chart showing the CMS reporting requirements for healthcare facilities is posted on the home page of the MDCH HAI website at www.michigan.gov/hai.

Reminder of CMS November 15th Reporting Deadline

Judy reminded participants of the upcoming November 15th deadline for getting NHSN data reported into NHSN for the time period of April – June 2012. For acute care facilities this includes CLABSI and CAUTI events, SSI procedures (abdominal hysterectomies and colon surgeries), as well as denominator data for events. “No events” must also be recorded if no events have been identified for a given month. **Judy encouraged everyone to pay attention to their “alerts” of missing and/or incomplete data when they first open NHSN.** This will help to ensure that their data are complete for their facility.

For acute care hospitals that do less than 9 surgical procedures a year of abdominal hysterectomies or colon surgeries, they can apply for a waiver through CMS to not have to report their SSI “no events” and/or “no procedures” on a monthly basis. Alternatively, acute care hospitals will need to complete a Monthly Reporting Plan each month for these 2 surgical procedures and enter procedures and events each month, and/or indicate “no procedures and “no events” for each given month if no procedures are done and no infections occur.

Review of Healthcare Personnel Flu Vaccination Reporting

This is a new component within NHSN, separate from the Patient Safety Component. CDC has held 3 training webinars on this new component and 2 more are scheduled for the near future. Judy learned yesterday, however, that the 2 upcoming webinars (on Oct 25 and Nov 5) have already been filled. Judy indicated that the slides for this training are posted in today's meeting room, as well as at <http://www2.cdc.gov/vaccines/ed/nhsn>. An archived recording of each CDC webinar will also be posted about a week after each live webinar.

Judy mentioned a few things to note about the new Healthcare Personnel Flu Vaccination Component:

1. It will be required to be used by acute care facilities beginning January 1, 2013, however, facilities may use it before then.
2. Vaccination status is required to be reported for specific individuals within the healthcare facility:
 - a. All employees on payroll
 - b. Licensed independent practitioners
 - c. Adult students & volunteer aged 18 and older
 - d. Optional: other contract personnel
3. Questions and clarification regarding the definition of these various groups should be directed to the CDC Help Desk at nhsn@cdc.gov.
4. Only individuals working 30 days or more in the facility between October 1, 2012 and March 31, 2013 should be included in the counts of healthcare personnel being monitored.
5. Actions required by the acute care facility including the following:
 - a. Enrollment in NHSN, if not already done so.
 - b. Activation of the Healthcare Personnel Safety Component by the Facility's NHSN Administrator.
 - c. Recruitment of additional NHSN users and assignment of rights, if new users will be entering data into this Component.
 - d. Completion of monthly reporting plans in this Component
6. Data to be entered into NHSN for this Component include:
 - a. Flu vaccination data (documentation must be in writing)
 - b. Medical contra-indications (verbal statements ok)
 - c. Declinations (verbal statements ok)
 - d. Unknown Vaccination Status
7. Data is only required to be reported once at the end of the report period (March 31, 2013), however, CDC recommends keeping track of the data on a monthly basis. (Note that data entered into the component will be cumulative, so counts of individual monthly reports should be saved if wanted for tracking purposes.)

Questions and answers regarding the Healthcare Personnel Influenza Vaccination Component can be found at the CDC website: <http://www.cdc.gov/nhsn/faqs/FAQ-Influenza-Vaccination-Summary-Reporting.html>.

Other NHSN Changes for 2013

Judy mentioned other changes that will be happening effective January 1, 2013, and referenced the document "NHSN Surveillance Changes", document which is posted in the Breeze meeting room.

1. For SSIs, the definition of "Primary Closure" is being changed.
2. NHSN will no longer collect information on "implants" utilized during operative procedures as part of SSI surveillance. Instead, surgical procedures will be monitored for a period of 30 days or 90 days, according to a list being developed by CDC.

3. There will be word changes in some of the SSI definitions to make them more objective and less subjective.
4. NHSN is introducing the new terminology of “POA” (Present on Admission) to indicate any infection that is incubating on the 1st or 2nd day of the patient’s admission. HAIs will be defined as infections that occur on day 3 or after of patient admission. Reminder that only HAIs are reportable to NHSN, not infections that are present on admission.

Requests for Additional NHSN Training

Judy mentioned that she has heard from several individuals requesting additional NHSN training by the SHARP Unit, possibly done locally or within regions of the state. Judy suggested that persons who are interested in additional training send her an email with details regarding topic area of training, location of training, # of people likely to attend, and potential dates for the training. After receiving these requests, Judy will meet with her supervisor and other SHARP staff to discuss options that might be available. Judy also reminded participants that there are training webinars and slides available on the NHSN website at www.cdc.gov/training.html. Judy also indicated that trainings through the use of Breeze might also be possible. Lastly, Judy showed a slide with links to the slides used for the October 2 – 4th training in Atlanta, as well as to the CDC NHSN Resource Manual, both of which everyone is encouraged to download. The link to the training slides is <http://www.cdc.gov/nhsn/pdfs/training/3-day-Training-final.pdf>, and the link to the NHSN Resource Manual is <http://www.cdc.gov/nhsn/pdfs/training/Resource-book.pdf>.

NHSN Training Slides from Oct 2 – 4, 2012 Training

Judy indicated that Allie had attended this training at CDC in early October, and other SHARP staff viewed it live from their office computers. Allie will discuss some of her thoughts and what she learned from these trainings on the November conference call.

MPRO NHSN Webinar

Judy reminded participants of this upcoming MPRO-sponsored webinar, scheduled for Wednesday, October 31st from 10:00 – 11:30 a.m. MPRO has sent out information regarding this call and the SHARP Unit has it posted on the home page of their website. During the call, Maggie Dudeck from CDC will discuss analysis of NHSN data. Everyone is welcome to participate. There is no registration fee.

Open Questions & Answers

Questions were mainly asked during discussion of the individual items on the agenda.

Judy referenced many of the Attachments included in the Breeze meeting room and indicated that anyone can go back into the meeting room later to review and/or download these documents for their use.

Participant Announcements

None were reported.

Next Call:

Judy indicated that the next conference call is scheduled for Wednesday, November 28th at 10:00 a.m. Topics to be included on the November agenda include an update from Allie regarding the Oct 2-4 NHSN training at CDC, and also the new *MRSA* bacteremia and *C. diff* LabID events reporting requirement from CMS, among other items. Judy thanked facilities for participating in this October conference call.