

# NHSN MONTHLY CHECKLIST FOR REPORTING TO CMS LTCHQR PROGRAM

September 2021

CCN: \_\_\_\_\_

Month/Year: \_\_\_\_\_/\_\_\_\_\_

## STEP 1: Monthly Reporting Plans

| CAUTI                                       | CLABSI                                      | CDI LabID*  |
|---|---|---|
| <input type="checkbox"/> All inpatient beds | <input type="checkbox"/> All inpatient beds | <input type="checkbox"/> FacWideIN- CDI (all specimens) |

The following tables refer to Influenza and COVID-19 Vaccination quality reporting. For a checklist for *HCP Reporting to CMS Hospital, IRF and LTCH Quality Reporting Programs* please click the following link; [NHSN Checklist for HCP Reporting](#).

| HCP Influenza Vaccination (Healthcare Personnel Safety Component)                           |
|---|
| <input type="checkbox"/> Quarter 4 (October – December) through Quarter 1 (January – March) |

| COVID-19 Vaccination (Healthcare Personnel Safety Component)  |
|---|
| <input type="checkbox"/> Quarter 4 (October – December) through Quarter 1 (January – March) 1 week of data for each month |

## STEP 2: Events

| CAUTI                                       | CLABSI                                      | CDI LabID  |
|---|---|--|
| <input type="checkbox"/> All inpatient beds | <input type="checkbox"/> All inpatient beds | <input type="checkbox"/> All CDI LabID events that occur in an inpatient unit (FacWideIN) <sup>†</sup> |

## STEP 3: Summary Data

“Device-Associated – Intensive Care Unit / Other Locations” form  
*Summary record for each inpatient location*

- Total Patient Days
- Central Line Days
- Urinary Catheter Days

Select “Report No Events”, for each event type, only if no events were identified that met the NHSN surveillance definition

“MDRO and CDI Monthly Denominator – all Locations” form  
*One summary record for FacWideIN*

- Total Facility Patient Days
- Total Facility Admissions
- Indicate CDI test type (3<sup>rd</sup> month of each qtr)
  - March, June, September, December

Select “Report No Events” if no CDI LabID events were identified during this month that met the NHSN surveillance definition

## STEP 4: Resolve Alerts

- Incomplete Events
- Missing Events (*select “Report No Events” box, if applicable*)
- Incomplete Summary Data

- Missing Summary Data
- Unusual Susceptibility Profile
- Confirm CDI Test Type

## STEP 5: Generate Datasets

- Generate new data sets before verifying data in CMS reports in **STEP 6**

## STEP 6: Print/Save Copies of Quarterly CMS Reports

- “SIR- CLAB Data for LTCHQR”
- “SIR- CAU Data for LTCHQR”
- “SIR- CDI FacWideIN LabID Data for LTCHQR”

## CMS Deadlines:

Quarter 1 (January – March): **August 15<sup>th</sup>**

Quarter 2 (April – June): **November 15<sup>th</sup>**

\* The CMS LTCHQR Program no longer requires LTCHs to submit data for FacWideIN MRSA Bacteremia starting with 2018 Q4 data.

† All healthcare-onset, community-onset, incident, and recurrent events that meet NHSN definitions should be reported.



## **NHSN MONTHLY CHECKLIST FOR REPORTING TO CMS LTCHQR**

Quarter 3 (July – September): **February 15<sup>th</sup>**

Quarter 4 (October – December): **May 15<sup>th</sup>**

Quarter 4 & Quarter 1 (October 1 – March 31) Healthcare Personnel Influenza Vaccination Summary data: **May 15<sup>th</sup>**

*For additional guidance on ensuring your data are accurately sent to CMS for Quality Reporting purposes, please visit our website and navigate to the appropriate section(s) for your facility type: <http://www.cdc.gov/nhsn/cms/index.html>. If you have any questions, please contact the NHSN Helpdesk: [NHSN@cdc.gov](mailto:NHSN@cdc.gov). The NHSN Helpdesk is staffed Monday through Friday, 7am ET – 5pm ET, excluding Federal Holidays.*

### **Additional Resources:**

#### **Catheter-Associated Urinary Tract Infection (CAUTI)**

- Operational Guidance for Long Term Care Hospitals to Report Catheter-Associated Urinary Tract Infection (CAUTI) Data to CDC's NHSN for the Purpose of Fulfilling CMS's Hospital Quality Reporting Requirements: [https://www.cdc.gov/nhsn/PDFs/CMS/LTCH-CAUTI-Guidance\\_2015.pdf](https://www.cdc.gov/nhsn/PDFs/CMS/LTCH-CAUTI-Guidance_2015.pdf)
- NHSN Surveillance for Urinary Tract Infections: <https://www.cdc.gov/nhsn/LTACH/CAUTI/index.html>

#### **Central Line-Associated Bloodstream Infection (CLABSI)**

- Operational Guidance for Long Term Care Hospitals to Report Central Line-Associated Bloodstream Infection (CLABSI) Data to CDC's NHSN for the Purpose of Fulfilling CMS's Hospital Quality Reporting Requirements: [https://www.cdc.gov/nhsn/PDFs/CMS/LTCH-CLABSI-Guidance\\_2015.pdf](https://www.cdc.gov/nhsn/PDFs/CMS/LTCH-CLABSI-Guidance_2015.pdf)
- NHSN Surveillance for Central Line-Associated Bloodstream Infections (CLABSI): <https://www.cdc.gov/nhsn/LTACH/clabsi/index.html>

#### ***Clostridioides difficile* Infection (CDI) Laboratory-identified Event**

- Operational Guidance: <https://www.cdc.gov/nhsn/PDFs/CMS/LTACH-CDI-Op-Guidance2015.pdf>
- How to Set Up NHSN Reporting for Facility-Wide Inpatient MRSA Bacteremia and *C. difficile* LabID events for the CMS Long Term Care Hospital Quality Reporting Program: [https://www.cdc.gov/nhsn/pdfs/cms/ltac/setting-up-and-reporting-labid-event\\_ltch.pdf](https://www.cdc.gov/nhsn/pdfs/cms/ltac/setting-up-and-reporting-labid-event_ltch.pdf)
- NHSN Surveillance for *C. difficile*, MRSA, and other Drug-resistant Infections: <https://www.cdc.gov/nhsn/ltach/cdiff-mrsa/index.html>