

Dialysis News from the NHSN Help Desk

Updated NHSN Dialysis Component Analysis Resources!

Benefits of NHSN Data Analysis

NHSN users are encouraged to analyze facility data on a routine basis.

The benefits of data analysis include:



- ✓ Improved data quality
- ✓ Assurance your facility met minimum QIP reporting requirements
- ✓ Detection of problems within your facility
- ✓ Ability to inform infection prevention and quality improvement efforts
- ✓ Ability to relay feedback and engage staff in infection prevention

Whether it is monthly or quarterly, use reports in NHSN to get the most out of your NHSN participation!

Updated Resources to Help You Run NHSN Reports:

Revised Analysis guides have been posted to the Dialysis Event Surveillance webpage under the “Analysis Resources to Create Reports” section: <http://www.cdc.gov/nhsn/dialysis/dialysis-event.html>. These short, illustrated guides provide step-by-step instructions to run and interpret the most popular NHSN reports.

Available Analysis Guides:

1. [Three Steps to Review NHSN Dialysis Event Surveillance Data](#) – This guide assists you to comprehensively review your facility’s data and answer the following questions:
 - a. Has my facility met minimum Quality Incentive Program (QIP) NHSN reporting criteria for this month?
 - b. Has my facility reported correct numerators (events)? A correct denominator (patient census data)?
 - c. How well is my facility preventing bloodstream infections quarterly?

3 Steps to Review NHSN Dialysis Event Surveillance Data

Step 1: Have Minimum Monthly DE Reporting Requirements Been Met?

USE THIS REPORT TO VERIFY CMS ESRD QIP MINIMUM NHSN REPORTING REQUIREMENTS ARE MET each month as indicated by a “Y” (Yes) on each line under the “Criteria Met this Month” column. To get a “Y” all “Yes/No” fields in the same row must = “Y”.

Org ID	CMS Certification Number	Facility Name	Location	Survey Year	ES on Reporting Plan	Dialysis Event Reporting Required	Criteria Met this Month
10050	12450	Dialysis Facility	DAL	2014M1	Y	Y	Y
10050	12450	Dialysis Facility	DAL	2014M2	N	Y	N

Step 2: Are the Submitted Data Correct and Complete?

USE THESE TWO REPORTS TO CHECK ALL DATA ARE CORRECT AND COMPLETE.

Org ID	Location	No. of Patients	No. of Events	ESR	ESR	ESR	ESR
10050	DAL1005	30	0	33	12	2	0
10050	DAL1005	30	0	33	12	2	0

Step 3: How is Your Facility Doing?

USE THIS REPORT TO ASSESS FACILITY PERFORMANCE.

Org ID	Location	Access Type	Survey Year	Number of Patients	Number of Bloodstream Infections	Incidence Rate/100 patient-months	Incidence Density/100 patient-months	Incidence Rate/100 patient-months	Incidence Density/100 patient-months
10050	DAL1005	Femoral	2015Q4	3	0	0.000	0.48	0.5779	25
10050	DAL1005	Femoral	2014Q1	3	0	0.000	0.48	0.5000	25
10050	DAL1005	Guft	2015Q4	3	0	0.000	0.00	0.4229	50
10050	DAL1005	Guft	2014Q1	3	0	0.000	0.00	0.4363	50
10050	DAL1005	Tunneled	2013Q4	3	2	3.0	3.24	0.3260	78
10050	DAL1005	Tunneled	2014Q1	3	1	1.333	2.44	1.0000	54

REVIEW RATES OVER TIME

Table rows are sorted by vascular access type and then chronologically, so changes to each vascular access type’s rate can be observed over time.

REVIEW DATA MONTHLY TO:

- Ensure all data have been accurately reported
- Detect problems in your facility
- Provide feedback to your staff
- Engage staff in quality improvement

Act on the Data:

- Consider discussing the data at QAPI meetings
- Identify areas for improvement
- Set measurable goals
- Provide feedback to frontline staff

BENCHMARK AGAINST NHSN RATES

The three right-most columns contain aggregate NHSN data (i.e., data combined from facilities that participated in NHSN Dialysis Event Surveillance).

Compare the facility’s rate to the NHSN rate.

- NHSN Infection Rate/100 patient-months:** The mean or average rate of Dialysis Event bloodstream infections for NHSN (per 100 patient-months).
- Incidence Density/100 patient-months:** Probability that the facility’s rate is statistically different than the NHSN rate (a p-value < 0.05 is usually considered significant).
- Incidence Density Percentile:** The facility’s percentile ranking for bloodstream infection rate compared to the NHSN aggregate rate (lower numbers are better).

Other NHSN Data Reports:

NHSN also includes reports for rates of: IV Antimicrobial Starts, IV Intravenous Starts, Access-Related Bloodstream Infections (ARBI), Local Access Site Infections (LASI), and Vascular Access Infections (VAI).

Dialysis News from the NHSN Help Desk

Updated NHSN Dialysis Component Analysis Resources!

Available Analysis Guides (continued):

NHSN Dialysis Event ARB Report Quick Reference

How to Create an NHSN Access Related Bloodstream Infection Report

- From the navigation bar, select "Analysis" and "Generate Data Sets".
- From the navigation bar, select "Output Options".
- Under the last folder, locate the report and click the "Run" button.

How to Read an NHSN Access Related Bloodstream (ARB) Infection Report

The year and calendar quarter of the data (e.g., 2014Q3 to Jan, Feb, Mar 2015).

The number (count) of Access Related Bloodstream Infections (ARB) at the facility.

The mean or average rate of Dialysis Event ARB for all of NHSN (per 100 patient-month).

The facility's percentile rank for ARB as compared to all of NHSN (lower is better).

Access Type	Number of Patients	Number of Months	Number of ARB	Rate of ARB (per 100 patient-month)	Facility's Percentile Rank
Arteriovenous (AV)	1	1	1	100	85
Arteriovenous (AV) Catheter	1	1	1	100	85
Arteriovenous (AV) Catheter (Tunnel)	1	1	1	100	85
Arteriovenous (AV) Catheter (Tunnel) (Tunnel)	1	1	1	100	85
Arteriovenous (AV) Catheter (Tunnel) (Tunnel) (Tunnel)	1	1	1	100	85

Optional: Next to the desired report, click the "Modify" button to customize the report to your needs.

Two possible modifications are to change the report's file format (CSV, HTML, or PDF) and/or limit the report to a specific time frame.

Once modifications are made, scroll down and click "Run".

Report opens in a new window - set Internet Explorer to allow pop-ups from *cdc.gov

© 2014 CDC

2. [The NHSN Dialysis Event Bloodstream Infection \(BSI\) Report Quick Reference](#) – This BSI “cheat-sheet” teaches you how to find, run, and interpret an up-to-date bloodstream infection rate table report. You can also find a link to BSI prevention resources from this reference guide.

NHSN Dialysis Event Bloodstream Infection (BSI) Report Quick Reference

How to Create an NHSN Dialysis Event BSI Report

- From the navigation bar, select "Analysis" and "Generate Data Sets".
- From the navigation bar, select "Output Options".
- Under the last folder, locate the report and click the "Run" button.

How to Read an NHSN Dialysis Event BSI Report

The year and calendar quarter of the data (e.g., 2014Q3 to Jan, Feb, Mar 2015).

The number (count) of Dialysis Event Bloodstream Infections (BSI) at the facility.

The mean or average rate of Dialysis Event BSI for all of NHSN (per 100 patient-month).

The facility's percentile rank for BSI as compared to all of NHSN (lower is better).

Access Type	Number of Patients	Number of Months	Number of BSI	Rate of BSI (per 100 patient-month)	Facility's Percentile Rank
Arteriovenous (AV)	1	1	1	100	85
Arteriovenous (AV) Catheter	1	1	1	100	85
Arteriovenous (AV) Catheter (Tunnel)	1	1	1	100	85
Arteriovenous (AV) Catheter (Tunnel) (Tunnel)	1	1	1	100	85
Arteriovenous (AV) Catheter (Tunnel) (Tunnel) (Tunnel)	1	1	1	100	85

Optional: Next to the desired report, click the "Modify" button to customize the report to your needs.

Two possible modifications are to change the report's file format (CSV, HTML, or PDF) and/or limit the report to a specific time frame.

Once modifications are made, scroll down and click "Run".

Report opens in a new window - set Internet Explorer to allow pop-ups from *cdc.gov

© 2014 CDC

3. [NHSN Dialysis Event Access Related Bloodstream Infection \(ARB\) Report Quick Reference](#) – Don't know the difference between a BSI and an ARB? This one-page guide can clue you in. Similar to the BSI quick reference guide (above), you can learn how to run and interpret your facility's ARB rate table report.

4. [NHSN Report for CMS ESRD QIP](#) – The CMS ESRD QIP report is the most commonly run report in NHSN analysis. If you are interested in knowing if your facility met the minimum CMS QIP criteria for a month, this is the report for you! This guide teaches you to find, run, and interpret the report.

NHSN Report for CMS ESRD QIP

How to Create an NHSN Report for CMS ESRD QIP

- From the navigation bar, select "Analysis," then select "Generate Data Sets".
- Click the "Generate Data Sets" button to create new data sets and overwrite old ones, this ensures the report will be created using current data.
- From the navigation bar, select "Output Options".
- Open these output option folders:
 - QIP
 - CDC Defined Output
- Locate and "Run" the report.

How to Read an NHSN Report for CMS ESRD QIP

CMS ESRD QIP NHSN requirements vary by year. Email the CMS QIP Helpdesk (ESRDQIP@cdc.gov) with questions about how participation is scored.

Verify NHSN reporting requirements are met for the month, reflected by a "Y" (Yes) on each line in the "Criteria Met This Month" column. For criteria to be met, all other Yes/No fields in the same row must be "Y". Also verify all months are accounted for in the table.

QIP	CMS Certification Number	Facility Name	Location	Summary Year/Quarter	DE on Reporting Plan	Event Reported	Event Reported	Criteria Met This Month
10550	12450	Dialysis Test Facility	DALYSG	2014M01	Y	Y	Y	Y
10550	12450	Dialysis Test Facility	DALYSG	2014M02	N	Y	Y	N
10550	12450	Dialysis Test Facility	DALYSG	2014M03	N	Y	Y	N

Verify the CEN is present and correct. If not, a facility user with administrator rights can add or edit it on the "Facility Info" screen.

• "DE on Reporting Plan" = "Y" if "DE" is checked on the Monthly Reporting Plan, indicating Dialysis Event data are collected according to the [Dialysis Event Reporting](#).

• "Dialysis Event Reported" = "Y" if at least 1 dialysis event of each type was reported that month or the corresponding "Report No Events" checkboxes were selected on the Denominators for Outpatient Dialysis form.

• "Dialysis Event Denominator Reported" = "Y" if the Denominators for Outpatient Dialysis census form was completed for the month.

© 2014 CDC

All NHSN users are highly encouraged to take advantage of the analysis resources available on the [Dialysis Event homepage!](#)

Don't wait to analyze your data! Go for it! Experimenting with analysis is a great way to learn.



Questions about NHSN? Contact us at nhsn@cdc.gov with "Dialysis" in the subject line and we will respond to your inquiry within 5 business days.