



NHSN LONG-TERM CARE FACILITY COMPONENT

SEPTEMBER 2018 NEWSLETTER

RECAP: 2018 NHSN LTCF COMPONENT TRAINING

The 2018 NHSN Long-term Care Facility Component Annual Training kicked off on a high note! Dr. Daniel Pollock, MD, NHSN Surveillance Branch Chief, welcomed participants by describing the Centers for Disease Control and



Prevention's (CDC) history in surveillance and how the National Healthcare Safety Network (NHSN) was established. Dr. Jeneita Bell, MD, NHSN Long-term Care Lead, followed with a presentation on the national perspective of infection surveillance in

LTC. During the two-and-half day session, other CDC staff shared information regarding infection prevention, reporting, and data analysis. In addition, two external speakers shared their experience with NHSN and quality improvement implementation. By the end of the training, over 1,000 in-person and virtual participants were educated on infection prevention and the LTCF Component.

We are thankful to The National Association of Directors of Nursing Administration in Long-term Care (NADONA) for their generous donation and provision of a sweet and much appreciated surprise for the nearly 100 onsite participants.

Again, thank you for making our 2018 NHSN Long-term Care Facility Component Annual Training a success! We recognize that your participation and commitment to improve resident health outcomes are critical to advancing our mission.

We value your continued support!

- The LTC Team

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NOW AVAILABLE! 2018 NHSN LTCF TRAINING PRESENTATIONS

The 2018 NHSN Long-term Care Facility Component Annual Training videos and slide decks are now available on the NHSN website!

Recorded presentations include 2018 NHSN updates, epidemiology and infection surveillance in long-term care, and more. Recorded sessions covering validation of NHSN data and antibiotic stewardship surveillance practices are also available.

All videos and slide PDFs are located on the NHSN [training page](#).

Continuing Education (CE) is available for this activity. Information on how to obtain Continuing Education for NHSN Training Events, can be found [here](#).

*LOW-RESOLUTION NHSN LTCF TRAINING PRESENTATIONS

If you experience difficulty in accessing the LTCF training videos through the NHSN website (i.e. accessing the YouTube video links), please use the links below to access the Mp4 video for each training session.

Infection Surveillance and Prevention in Long-term Care: A National Perspective

<https://www.cdc.gov/nhsn/lowres/2018/lcf/infection-surveillance-ltc-lowres.mp4>

Overview of the NHSN LTCF Component

<https://www.cdc.gov/nhsn/lowres/2018/lcf/overview-nhsn-ltcf-lowres.mp4>

Epidemiology and Prevention of CDI and MDROs in LTCF

<https://www.cdc.gov/nhsn/lowres/2018/lcf/epidemiology-Prevention-cdi-mdro-ltcf-lowres.mp4>

Surveillance for CDI and MDROs in LTCF

<https://www.cdc.gov/nhsn/lowres/2018/lcf/surveillance-cdi-mdros-ltcf-lowres.mp4>

Epidemiology and Prevention of UTI

<https://www.cdc.gov/nhsn/lowres/2018/lcf/epidemiology-prevention-uti.mp4-lowres.m4v>

Surveillance for UTI: Part I

<https://www.cdc.gov/nhsn/lowres/2018/lcf/surveillance-uti-p1-lowres.mp4>

Surveillance for UTI: Part II

<https://www.cdc.gov/nhsn/lowres/2018/lcf/surveillance-uti-p2-lowres.mp4>

LTCF Prevention Process Measures

<https://www.cdc.gov/nhsn/lowres/2018/lcf/ppm-module-lowres.mp4>

Healthcare Personnel Safety in Long-term Care Settings

<https://www.cdc.gov/nhsn/lowres/2018/lcf/hps-component-lowres.mp4>

Antibiotic Stewardship in LTCF

<https://www.cdc.gov/nhsn/lowres/2018/lcf/antibiotic-stewardship-ltcf-lowres.mp4>

(Continued on the next page)

*LOW-RESOLUTION NHSN LTCF TRAINING PRESENTATIONS (CONTINUED)

Antibiotic Stewardship in LTCF

<https://www.cdc.gov/nhsn/lowres/2018/ltof/antibiotic-stewardship-ltcf-lowres.mp4>

Using NHSN for Action: Case Studies and Scenarios

<https://www.cdc.gov/nhsn/lowres/2018/ltof/using-nhsn-for-action-lowres.mp4>

Improving the Quality of NHSN Data

<https://www.cdc.gov/nhsn/lowres/2018/ltof/improving-quality-nhsn-data-lowres.mp4>

NHSN Data Validation

<https://www.cdc.gov/nhsn/lowres/2018/ltof/how-good-is-your-data-lowres.mp4>

ICAR Assessment

<https://www.cdc.gov/nhsn/lowres/2018/ltof/icar-assessment-lowres.mp4>

QIO and Community Partnerships to Improve CDI and Surveillance and Prevention Activities

<https://www.cdc.gov/nhsn/lowres/2018/ltof/qin-community-improve-cdi-lowres.mp4>

Future Directions for NHSN LTCF Component

<https://www.cdc.gov/nhsn/lowres/2018/ltof/future-directions-ltof-lowres.mp4>

DIRECTOR'S RECOGNITION AWARD: TRAINING ON ANTIBIOTIC STEWARDSHIP TEAM

After CDC's Division of Healthcare Quality Promotion (DHQP) understood the need for training on appropriate antibiotic use, the DHQP Antibiotic Stewardship Team produced a comprehensive program based on the latest science. [CDC Training on Antibiotic Stewardship](#), an interactive online course that offers participants up to eight hours of free continuing education, serves as a resource for a wide array of stakeholders and helps learners deliver effective and consistent messages to patients about antibiotic use and antibiotic resistance. Within a matter of weeks, 4,500 people have registered to take the course. The Antibiotic Stewardship Team was recognized for this accomplishment (left). Register to take the course today!



L to r: Sarah Kabbani, Lauri Hicks, Katherine Fleming-Dutra, me, Nimalie Stone, and Liz Wilkins. Team members not pictured: Austyn Dukes, Melinda Neuhauser, Kelly O'Neill, Arjun Srinivasan, and Amy Valderrama

PREVENTION PROCESS MEASURES MODULE



Unclean hands of healthcare workers and environmental contamination play a significant role in the spread of communicable diseases among residents in Long-Term Care facilities (LTCF). What is your facility doing to prevent the spread of communicable diseases? How do you measure the effectiveness of your prevention strategies?

The CMS – Medicare and Medicaid; Reform of Requirements for Long-Term Care Facilities (Final Rule 483.80) require that LTCFs establish a system of surveillance designed to identify possible communicable diseases or infections. NHSN’s LTCF Component offers facilities several surveillance options. One of these options is the [Prevention Process Measures Module](#). This surveillance module provides facilities with a method to document and analyze adherence to prevention practices, including hand hygiene after contact with a resident or surfaces in immediate vicinity of the resident; and gown and glove use in the context of transmission based precautions. By documenting prevention process measures, facilities are able to identify potential sources of infection transmission, opportunities for improvement, and measure the progress of prevention efforts at a facility level.

Prevention Process Measures Monthly Monitoring Form



Prevention Process Measures Monthly Monitoring for LTCF

Page 1 of 1
*conditionally required based upon monitoring selection in Monthly Reporting Plan

Facility ID #: _____ *Month: _____ *Year: _____ Location Code: _____

Prevention Process Measures

Hand Hygiene

**Performed: _____

**Indicated: _____

← Numerator →

← Denominator →

Gown and Gloves

**Used: _____

**Indicated: _____

Form Approved
OMB No. 0920-0666
Exp. Date: 01/31/2021
www.cdc.gov/nhsn

- Monitor for staff Hand Hygiene and/or Gown/Glove opportunities
- For each opportunity observed, indicate whether hand hygiene and/or Gown/Glove adherence was successful.
- Tally each measure:
 - Numerator = Performed/Used
 - Denominator = Indicated

Important Note:

Only totals are entered in NHSN

See Table of Instructions at : <https://www.cdc.gov/nhsn/ltc/process-measures/index.html>

Example of Prevention Process Measures Analysis Reports

National Healthcare Safety Network
Rate Table for All Hand Hygiene Adherence

Location	Summary Year/Month	Hand Hygiene Performed	Hand Hygiene Indicated	Hand Hygiene Adherence Rate
FACWIDEIN	2017M01	100	122	81.967
FACWIDEIN	2017M03	147	240	61.250
FACWIDEIN	2017M05	34	36	94.444
FACWIDEIN	2017M06	100	100	100.000
FACWIDEIN	2017M08	100	100	100.000
FACWIDEIN	2017M09	100	100	100.000

National Healthcare Safety Network
Line Listing for All Process Measures

Facility Org ID	Summary Year/Month	Location	Hand Hygiene Performed	Hand Hygiene Indicated	Gown/Glove Used	Gown/Glove Indicated
39455	2017M01	FACWIDEIN	100	122	230	300
39455	2017M03	FACWIDEIN	147	240	42	127
39455	2017M05	FACWIDEIN	34	36	35	36
39455	2017M06	FACWIDEIN	100	100	100	100
39455	2017M08	FACWIDEIN	100	100	100	100
39455	2017M09	FACWIDEIN	100	100	100	100

PREVENTION PROCESS MEASURES MODULE

National Healthcare Safety Network (NHSN)

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 the impact of these associated infection goals.

NHSN's long-term nursing facilities

Click on title or "More" to open Prevention Process Measures page

Surveillance for Process Measures – Hand Hygiene, Gloves and Gown Adherence

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

- Training
- Protocols
- Forms
- Support Materials
- Analysis Resources
- FAQs

Surveillance for Urinary Tract Infections (UTI)

- Training
- Protocols
- Forms
- Support Materials
- Analysis Resources
- FAQs

Prevention Process Measures

Surveillance for Prevention Process Measures – Hand Hygiene, Gloves and Gown Adherence

- Training
- Protocols
- Forms
- Support Materials
- Analysis Resources
- FAQs

National Healthcare Safety Network (NHSN)

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

Report Prevention Process Measures - Hand Hygiene, Gloves and Gown Adherence

Resources for NHSN Users Already Enrolled

- > Training
- > Protocol
- > Data Collection Forms
- > Supporting Material
- > FAQs

Click on arrow to open each resource

Resources to Help Prevent Infections

- HAI Prevention in long-term care settings

New Users - Start Here

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

[Click here to enroll!](#)

Please contact us at nhsn@cdc.gov and include "LTCF – Prevention Process Measures" in the subject line, if you have additional questions or need assistance with enrolling or adding this module to your Monthly Reporting Plan. We are happy to assist!

LTCF DATA VALIDATION GUIDANCE

The 2018 NHSN LTCF Data Validation Guidance and Toolkit for *C. difficile* infection (CDI) is now posted to the [NHSN website](#). This guidance provides methods for validating CDI LabID Events in Long-term Care Facilities (LTCF). Performing internal or external validation activities will assure high-quality surveillance data through accountability and by identifying, understanding, and correcting reporting problems. The intended audience for this external guidance is state health departments and other oversight agencies seeking to validate performance and adherence to the 2018 LTCF CDI LabID Event protocol.

National Healthcare Safety Network (NHSN)

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

LTCF Data Validation Guidance



Internal Validation: Active efforts by a reporting facility to assure completeness and accuracy of NHSN data.

External Validation: Survey and audit process by external agency to assure quality of NHSN surveillance and reporting.



NHSN LTCF Validation Guidance and Resources for 2018

For Auditors: External Validation Guidance

- 2018 External Validation Guidance and Toolkit for *Clostridium difficile* Infection (CDI) LabID Event  [PDF - 2 MB]

For Reporting Facilities: Internal Validation Guidance

- Data Quality Check Guidance  [PDF - 1 MB]

Resources

- Long-term Care Facility Manual – 2018  [PDF - 4 MB]
- How to Modify an Analysis Report  [PDF - 500 KB]
- Overview of the NHSN LTCF Component – July 2018

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 <i>C. difficile</i> and MRSA Infections
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
LTCF Data Validation Guidance
Newsletters and Archived Communications

TEST YOUR KNOWLEDGE



Question: I am trying to report a CA-SUTI to NHSN, but the “Specific Event” box is grayed out. What am I doing wrong?

Event Information

Event Type *: UTI - Urinary Tract Infection Date of Event *: 05/04/2015

Resident Care Location *: 1 D - DEMENTIA UNIT

Primary Resident Service Type *: BARIA - Bariatric

Has resident been transferred from an acute care facility in the past 3 months *: N - No

Indwelling Urinary Catheter status at time of event onset *: INPLACE - In place

If indwelling urinary catheter status In place or Removed within last 2 calendar days:
Site where indwelling urinary catheter Inserted *: FAC - Your facility

Date of indwelling urinary catheter Insertion: 04/24/2015

Specify Criteria Used * (check all that apply):

Signs & Symptoms	Laboratory & Diagnostic Testing
<input checked="" type="checkbox"/> Fever: Single temperature > 37.8°C (>100°F) or >37.2°C (>99°F) on repeated occasions, or an increase of > 1.1°C (>2°F) over baseline	<input type="checkbox"/> Specimen collected from clean catch voided urine and positive culture with $\geq 10^5$ CFU/ml of no more than 2 species of microorganisms
<input checked="" type="checkbox"/> Rigors	<input type="checkbox"/> Specimen collected from in/out straight catheter and positive culture with $\geq 10^2$ CFU/ml of any microorganisms
<input type="checkbox"/> New onset confusion/functional decline	<input type="checkbox"/> Specimen collected from indwelling catheter and positive culture with $\geq 10^5$ CFU/ml of any microorganisms
<input checked="" type="checkbox"/> New onset hypotension	<input checked="" type="checkbox"/> Leukocytosis (14,000 cells/mm ³) or left shift (>6% or 1,500 bands/mm ³)
<input type="checkbox"/> Acute pain, swelling or tenderness of the testes, epididymis, or prostate	<input type="checkbox"/> Positive blood culture with 1 matching organism in urine
<input type="checkbox"/> Acute dysuria	
<input type="checkbox"/> Purulent drainage at catheter insertion site	

New and/or marked increase in (check all that apply):

- Urgency
- Frequency
- Incontinence
- Costovertebral angle pain or tenderness
- Suprapubic tenderness
- Visible (gross) hematuria

Specific Event **:

- A. You did not select the correct signs and symptoms to meet the NHSN CA-SUTI criteria
- B. You did not select the required urine culture result to meet the NHSN CA-SUTI criteria
- C. You must manually type in the *Specific Event*

See the next page for the answer

TEST YOUR KNOWLEDGE



Answer: The correct answer is **B**. You did not select the required urine culture results to meet the NHSN CA-SUTI criteria

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<input checked="" type="checkbox"/> New onset hypotension	<input checked="" type="checkbox"/> Leukocytosis (14,000 cells/mm ³) or left shift (>6% or 1,500 bands/mm ³)
<input type="checkbox"/> Acute pain, swelling or tenderness of the testes, epididymis, or prostate	<input type="checkbox"/> Positive blood culture with 1 matching organism in urine
<input type="checkbox"/> Acute dysuria	
<input type="checkbox"/> Purulent drainage at catheter insertion site	

New and/or marked increase in (check all that apply):

- Urgency
- Frequency
- Incontinence
- Costovertebral angle pain or tenderness
- Suprapubic tenderness
- Visible (gross) hematuria

Specific Event **: **CA-SUTI**

Rationale:

- A qualifying positive urine culture is required to meet NHSN UTI criteria
- The correct NHSN UTI criteria must be selected before the NHSN application will auto-populate the SPECIFIC EVENT TYPE
- If the resident does not meet the NHSN UTI criteria, then a UTI event should not be submitted to NHSN

TEST YOUR KNOWLEDGE



Question: *Should a specimen collected in the Emergency Department (ED) be reported as a CDI LabID Event for the LTCF?*

Case: Mr. A is a resident in your LTCF. He does not have a history of *C. difficile*. On March 1, he was transferred to the local emergency department (ED) for evaluation of diarrhea and fever. While in the ED, a loose stool specimen tested positive for *C. difficile*. He received IV fluids and was transferred back to the LTCF in a contact isolation room on March 2. Should the LTCF report a CDI LabID Event for Mr. A?

A. YES

B. NO

Answer: A

Rationale: Since the specimen was collected in an outpatient location (i.e., the ED) and Mr. A returned back to the LTCF within 2 calendar days of leaving, the positive *C. difficile* specimen was entered into NHSN as a CDI LabID Event for the LTCF. NOTE: When entering the event, the location of the resident should represent the bedded location of the resident prior to the transfer to the OP facility.



QUESTIONS ABOUT NHSN?

Contact us at nhsn@cdc.gov with "LTCF" in the subject line, and we will respond to your inquiry.