National Healthcare Safety Network

2019 Long-term Care Facility Component Annual Updates and Annual Facility Survey Review

January 9, 2019

January 30, 2019

What's New in 2019?

Where can I find a list of the updates?

- December newsletter
- LTCF module web-pages under the protocol tab
- Blast e-mail sent to NHSN users
- NHSN version 9.2 Release Notes (12/12/18)

Impacted Infection Event/Module	Summary of Modifications
General	• *Clostridium difficile* infection (CDI), also known as *C. difficile* infection, has been reclassified as *Clostridioides difficile* (CDI), also known as *C. difficile* infection. **Note**: Currently, the update is only reflected in the NHSN protocols, forms, and table of instructions.
Annual Facility Survey	• To assist in improving data quality, a pop-up message will appear as a reminder to verify the primary testing method for *C. difficile* when: o An uncommon *C. difficile* testing method is selected (specifically, culture or cell cytotoxicity neutralization assay) OR o "Other" is selected and the testing method that is manually typed in the space is equivalent to one of the provided testing methods.
Event Reporting – All Modules	• To assist in improving data quality, a pop-up message will appear on the Event Page if the selected Resident Type (Short Stay [SS] or Long Stay [LS]) does not meet the NHSN definition based on the **date of first admission** and **the event date**.
Urinary Tract Infection (UTI) Event Module	• Urine culture requirements are no longer based on specimen collection method. The following changes were made: o Specimen collected from **in/out straight catheter** and a **positive culture with no more than 2 species of microorganisms, at least one of which is a bacterium of ≥ 10^5 CFU/ml** o Specimen collected from **indwelling catheter** and a **positive culture with no more than 2 species of microorganisms, at least one of which is a bacterium of ≥ 10^5 CFU/ml**
Laboratory-identified (LabID) Event Module	• No significant protocol changes made to the module.
Prevention Process Measures Module	• No significant protocol changes made to the module.
CDI Denominator Monthly Summary Data and Denominators for LTCF	• Added a new required variable called "CDI Treatment Starts" to enable an estimate of CDI burden in a facility when empiric treatment for CDI occurs in the absence of confirmatory testing.
Analysis	• In the NHSN line listing and rate tables, the column titles were updated to reflect the descriptive variable names as the default instead of the variable names. • The following additional variables added as columns to the default *Line Listing – All* CDI *LabID Events:* (1) CDI Assay; (2) Onset; (3) Onset Description; and (4) Days: Admit to Event. • Definitions for incident and recurrent CDI added as footnotes to *Line Listing - All CDI LabID Events*.

What's New in 2019?

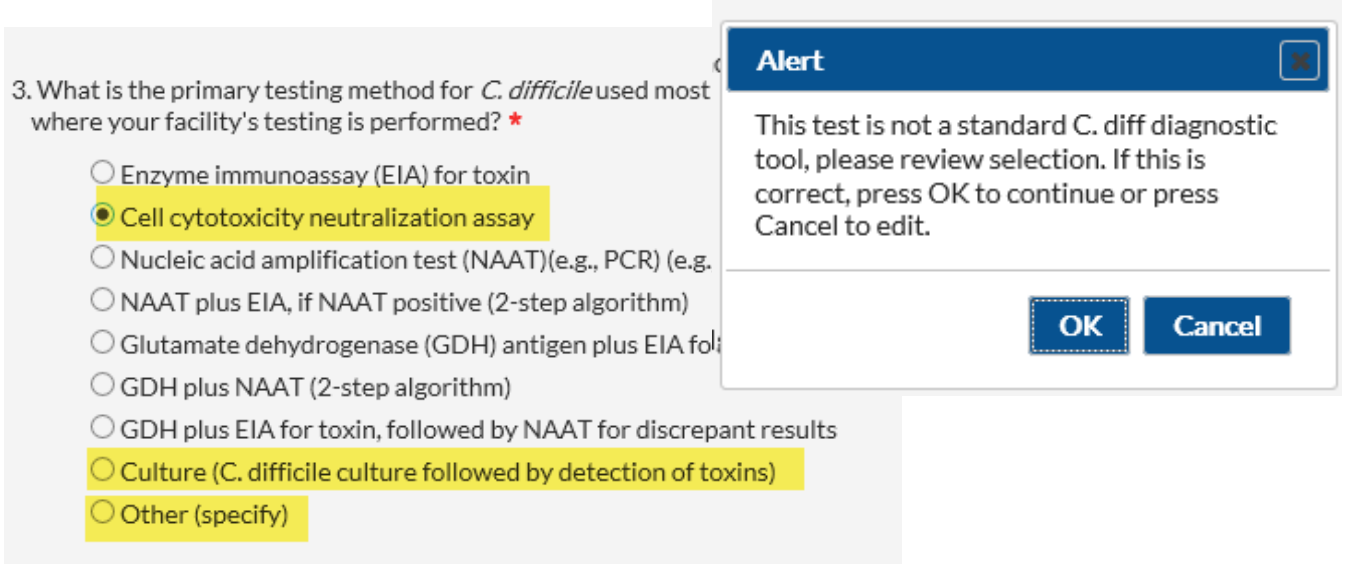
Name Change for *Clostridium difficile*

- *Clostridium difficile* infection (CDI), also known as *C. difficile* infection, has been reclassified as *Clostridioides difficile* (CDI), also known as *C. difficile* infection.
  - **Note**: Currently, the update is only reflected in the NHSN protocols, forms, and table of instructions.

What's New in 2019?

Annual Facility Survey

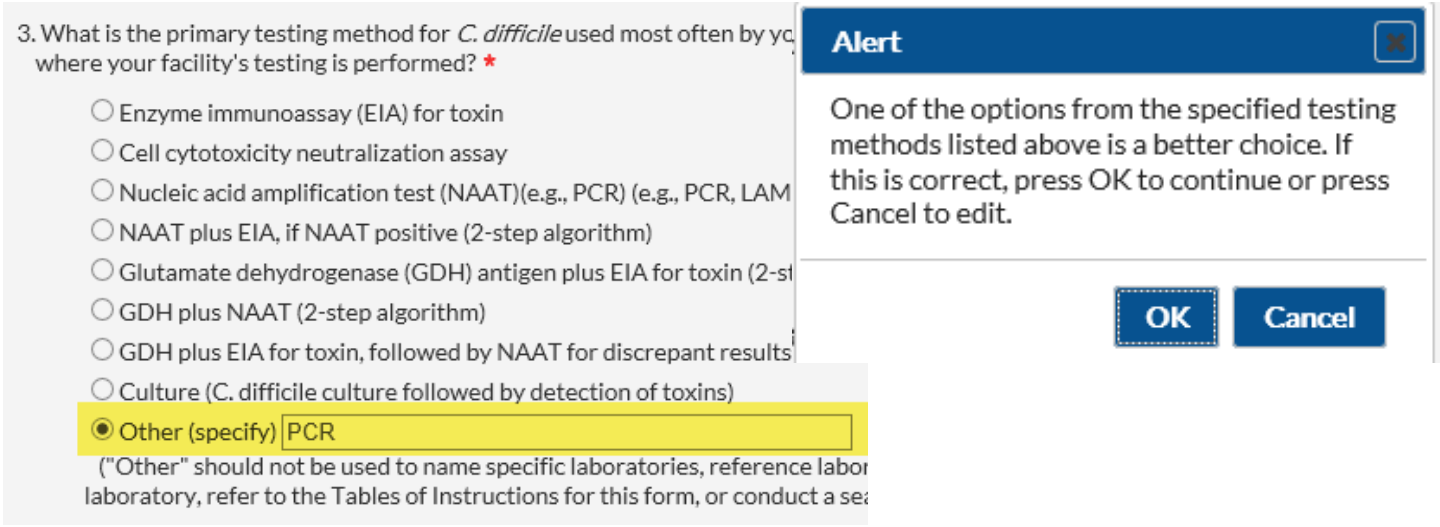
- Soft alerts will appear when an uncommon testing method is selected for:
  - Cell cytotoxicity neutralization assay
  - Culture



What's New in 2019?

Annual Facility Survey

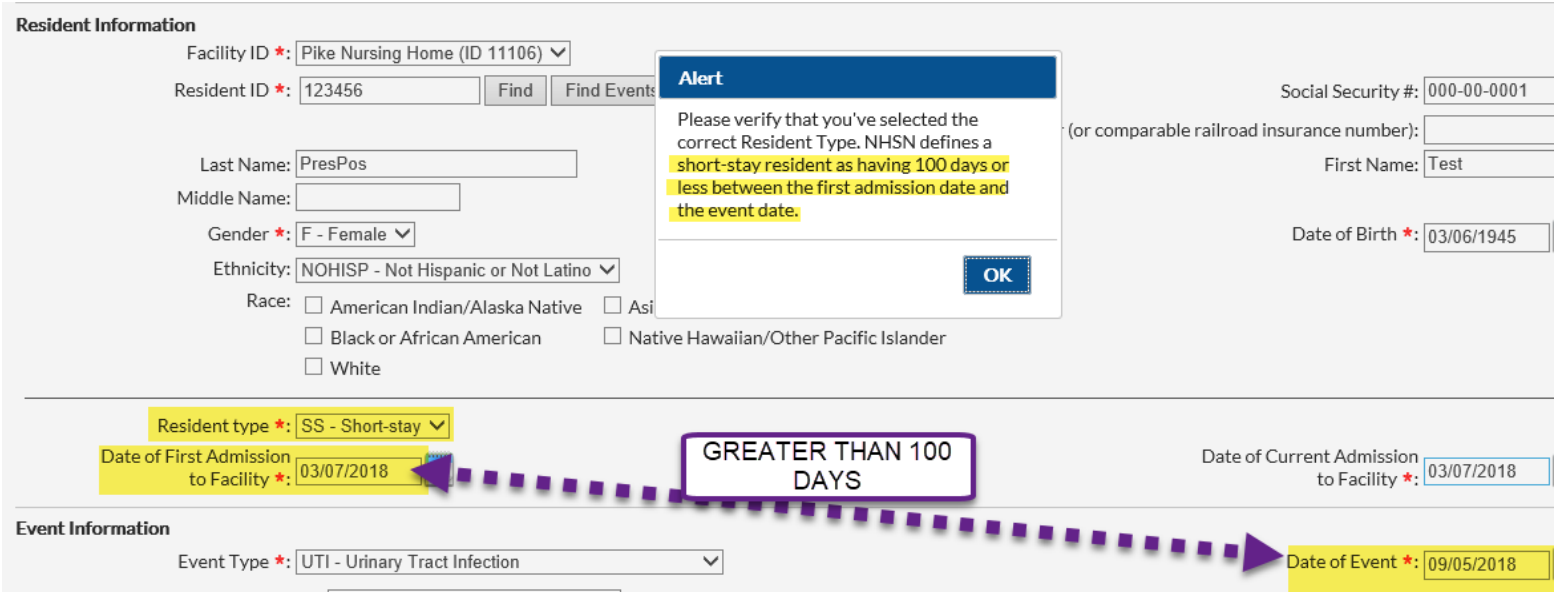
- Soft alerts will appear when "Other" is selected as primary testing method and:
  - The testing method typed in the box matches a selection already available



What's New in 2019?

Events

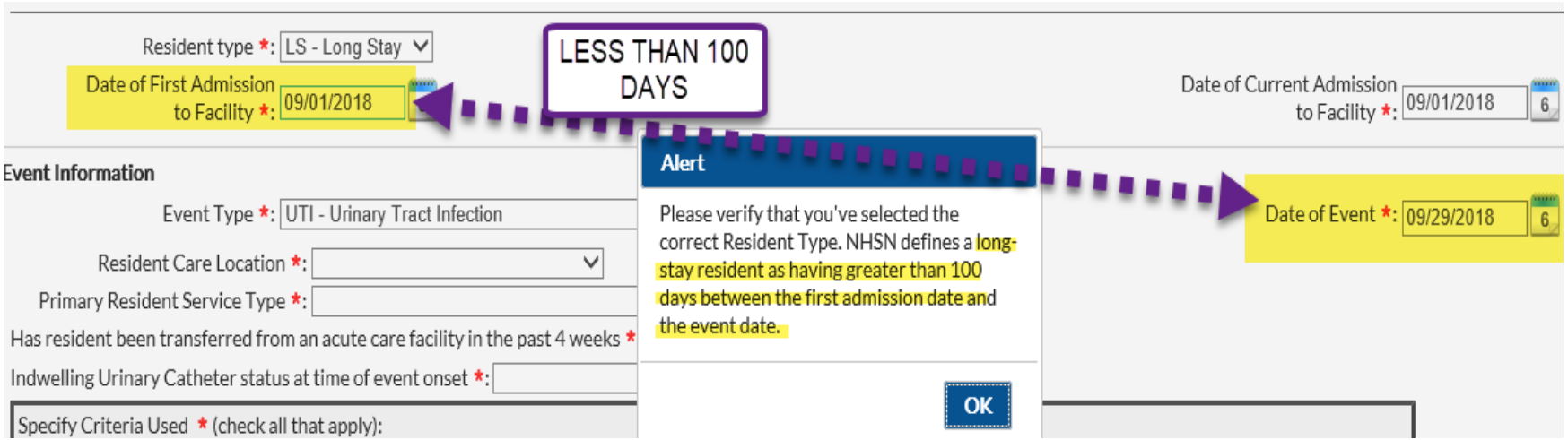
- A pop-up message will appear on the **Event Page** if the selected Resident Type (Short Stay [SS])does not meet the NHSN definition based on the date **of first admission** and **the event date**



What's New in 2019?

Events

- A pop-up message will appear on the Event Page if the selected Resident Type (Long Stay [LS]) does not meet the NHSN definition based on the date **of first admission** and **the event date**



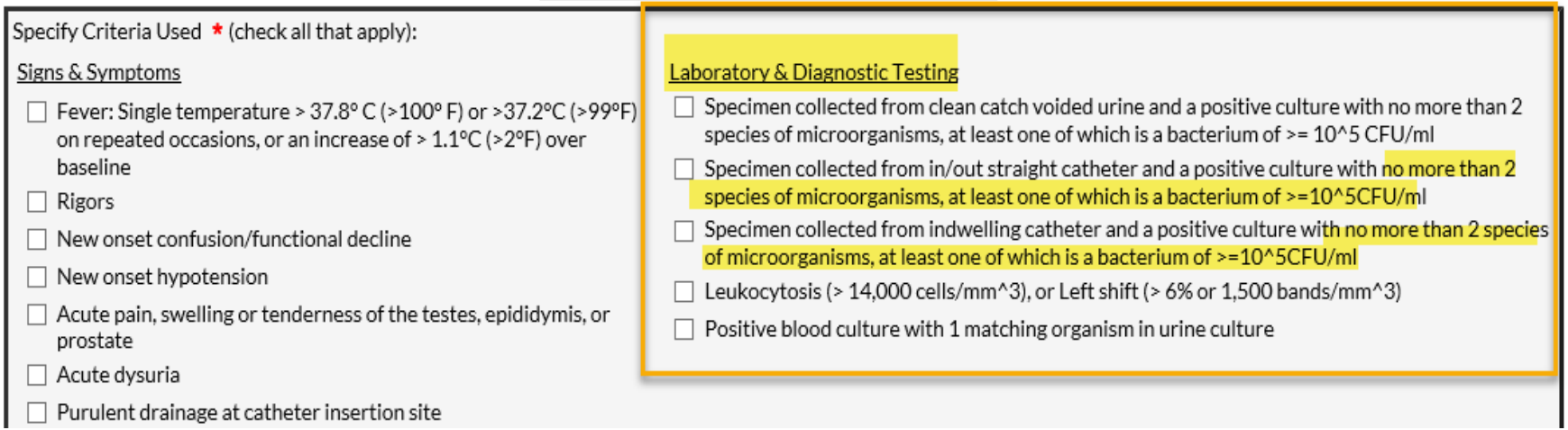
Is the resident Short Stay or Long Stay?

- Do we count residents who have a respite stay, but are not admitted as short stay?
  - If they occupied a bed they should be counted.
- Do the 100 days per calendar year need to be consecutive to count as long-term stay?
  - Only if the resident was discharged for more than 30 consecutive days at a time, in which the “Date of First Admission to Facility” will change. IN this case, the count will start over for determining resident type. If the resident leaves the facility for less than 30 days then the "Date of first admission to facility" would not change and the resident would remain as long stay.

What's New in 2019?

UTI Event

- Urine culture requirements:
  - Regardless of specimen collection method, resident must have at least one positive urine culture with no more than 2 species of microorganisms, at least one of which is a bacterium of ≥ 10^5 CFU/ml



Specify Criteria Used * (check all that apply):

Signs & Symptoms

- ☐ 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
- ☐ Rigors
- ☐ New onset confusion/functional decline
- ☐ New onset hypotension
- ☐ Acute pain, swelling or tenderness of the testes, epididymis, or prostate
- ☐ Acute dysuria
- ☐ Purulent drainage at catheter insertion site

Laboratory & Diagnostic Testing

- ☐ Specimen collected from clean catch voided urine and a positive culture with no more than 2 species of microorganisms, at least one of which is a bacterium of >= 10^5 CFU/ml
- ☐ Specimen collected from in/out straight catheter and a positive culture with no more than 2 species of microorganisms, at least one of which is a bacterium of >=10^5CFU/ml
- ☐ Specimen collected from indwelling catheter and a positive culture with no more than 2 species of microorganisms, at least one of which is a bacterium of >=10^5CFU/ml
- ☐ Leukocytosis (> 14,000 cells/mm^3), or Left shift (> 6% or 1,500 bands/mm^3)
- ☐ Positive blood culture with 1 matching organism in urine culture

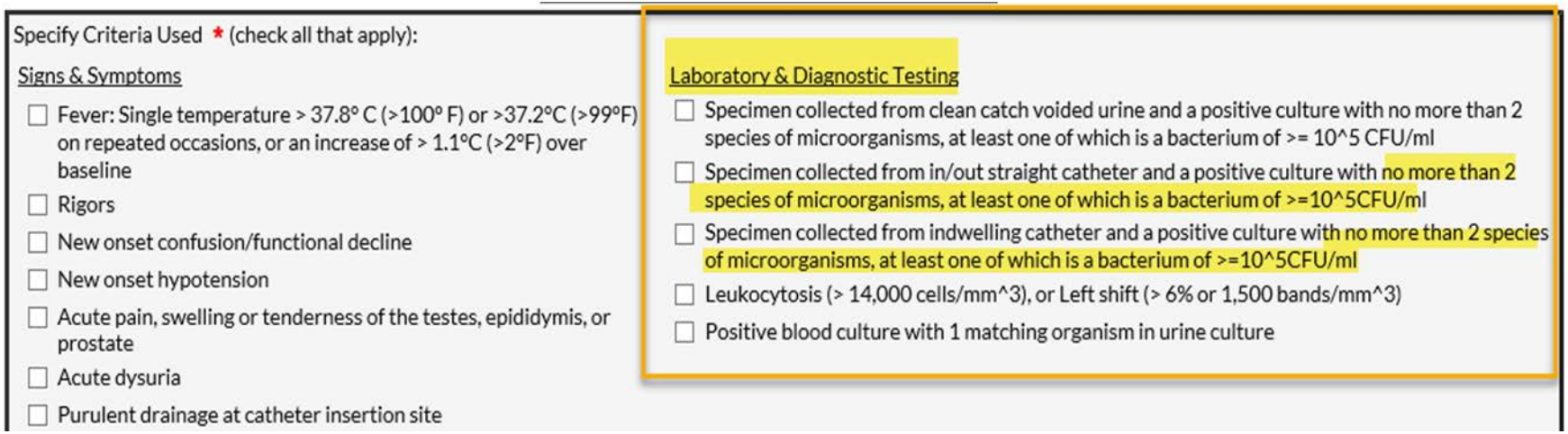
Example Scenario – Should I Report Case as UTI?

- A resident of a LTC facility was complaining of new onset of dysuria. A urine culture was collected via straight catheter and the culture comes back positive for mixed flora, E. coli, and Candida glabrata 10^5 CFU/ml.

A. YES

B. NO

Applying the NHSN Definition



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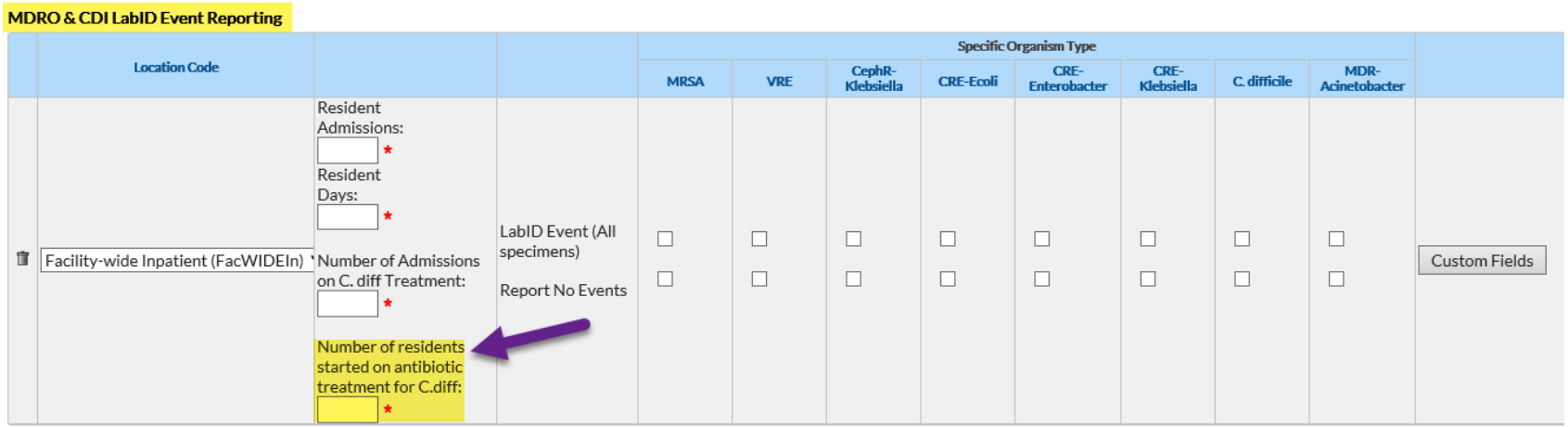
- ☐ Leukocytosis (> 14,000 cells/mm^3), or Left shift (> 6% or 1,500 bands/mm^3)
- ☐ Positive blood culture with 1 matching organism in urine culture

- If more than 2 species of microorganisms are present, the resident ***does not*** meet the urine culture requirement for an NHSN UTI regardless of colony count and how specimen was collected

What's New in 2019?

Monthly Summary Data/Denominators for LTCF

- Added a new required variable called "**CDI Treatment Starts**"
  - Estimate of CDI burden in a facility when empiric treatment for CDI occurs in the absence of confirmatory testing.
  - Include residents with treatment orders regardless of testing

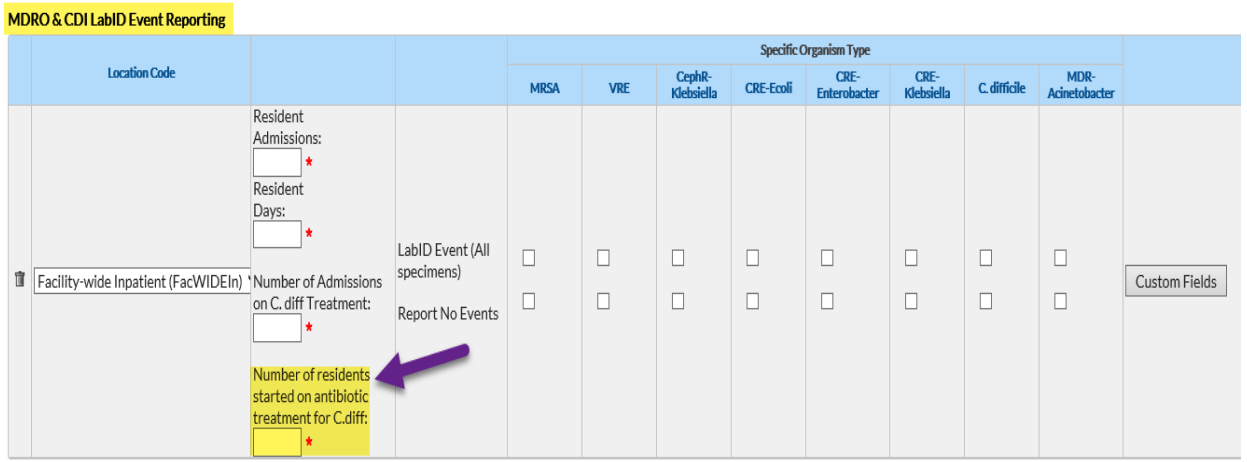


CDI Treatment Starts

- Should all new treatments for CDI be counted, even if a test for *C. difficile* was not performed or if a *C. difficile* test result was negative?

✓ A. Yes

B. No



CDI Treatment Starts

- While a resident is being treated *C. difficile* infection, the provider orders repeat testing which was negative. The provider orders for the resident to continue with the previously ordered treatment. How do I count this?

✓ **Count new orders only.**

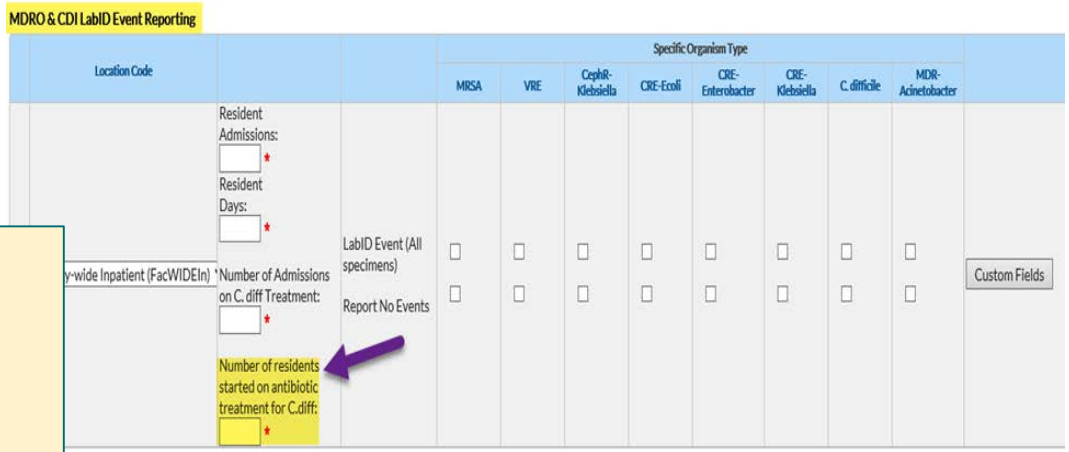
Do **not** count continued treatment as separate counts. Remember, you should only capture **new** medication orders.

CDI Treatment Starts

- Should the *number of residents started on antibiotic treatment for C. difficile* include only residents with a positive C. difficile lab result?

A. Yes

✓ B. No



NO, Number of *C. difficile* treatment starts should only include residents with a new order for treatment irrespective of lab results.

Note—if the resident had a new order for CDI treatment and had a positive *C. diff* lab result, the resident will be counted once for C. diff treatment start and a CDI LabID Event should be submitted for that resident.

CDI Treatment Starts

- Should the number of residents started on antibiotic treatment include residents receiving empiric treatment?

YES

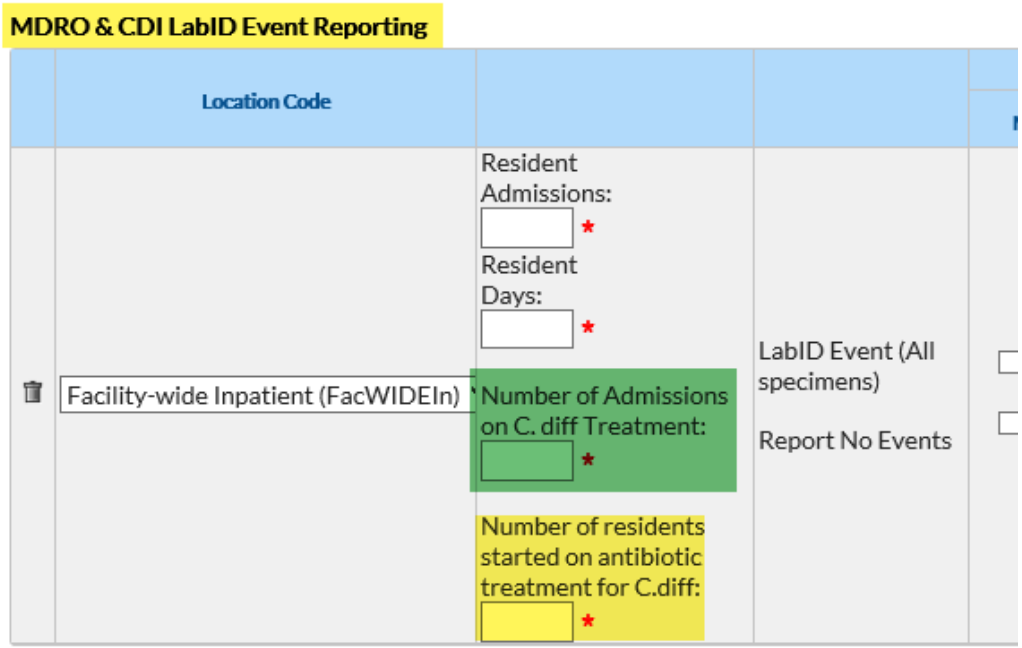
- Number of *C. difficile* treatment starts should include residents with a new order for treatment irrespective of why the treatment is ordered.

CDI Treatment Starts

- For the *"Number of residents started on antibiotic treatment for C. difficile"* should I include residents admitted on treatment for C. diff?

NO

There are TWO different monthly summary variables that must be answered for facilities participating in CDI LabID Event Reporting.



CDI Treatment Starts

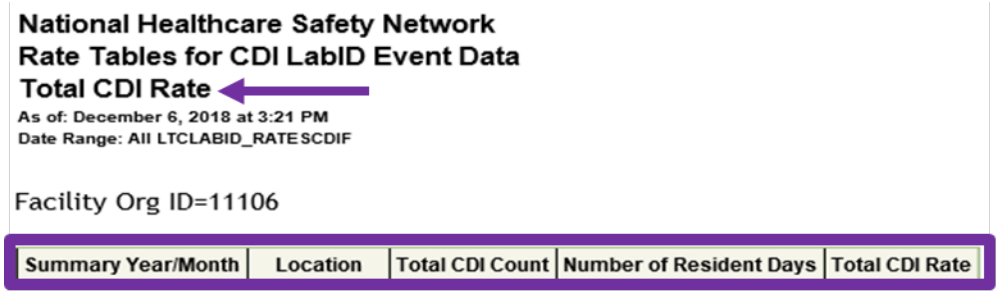
1. **Number of admission on C. difficile treatment**: Count only residents who are receiving medication therapy (such as antibiotics) for the treatment of *C. difficile* infection **at the time of admission to your facility**.
   - Include both new admissions and re-admissions when a resident was out of the facility >2 calendar days (change to the Current Admission Date).
   - A resident admitted on CDI treatment should be included in this count even if he/she does not have a CDI LabID event for the LTCF.

2. **Number of residents started on antibiotic treatment for *C. difficile*** : Count residents that have a new medication order for *C. difficile* treatment.
   - Capture all new medication treatments (antibiotic orders), regardless of: (1) results of *C. difficile* testing; or (2) number of doses or days of therapy completed.
   - Remember, this count does NOT include residents admitted to your facility on treatment or with treatment orders.

What's New in 2019?

Analysis

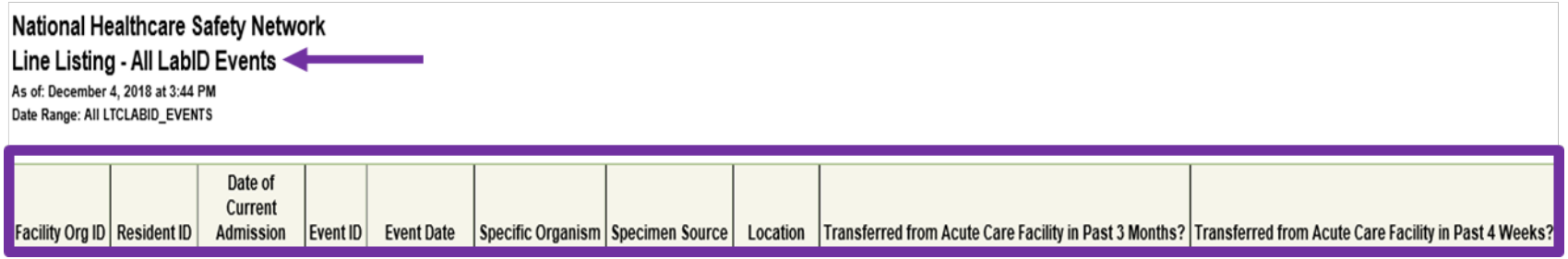
- Line listing and Rate Tables:
  - Column titles updated to reflect the **descriptive** variable names as the default instead of the variable names.



National Healthcare Safety Network
Rate Tables for CDI LabID Event Data
Total CDI Rate
As of: December 6, 2018 at 3:21 PM
Date Range: All LTCLABID_RATESCDIF

Facility Org ID=11106

Summary Year/Month	Location	Total CDI Count	Number of Resident Days	Total CDI Rate



National Healthcare Safety Network
Line Listing - All LabID Events
As of: December 4, 2018 at 3:44 PM
Date Range: All LTCLABID_EVENTS

Facility Org ID	Resident ID	Date of Current Admission	Event ID	Event Date	Specific Organism	Specimen Source	Location	Transferred from Acute Care Facility in Past 3 Months?	Transferred from Acute Care Facility in Past 4 Weeks?

What's New in 2019?

Analysis

- Line Listing - *All CDI LabID*
  - Additional variables added

National Healthcare Safety Network
Line Listing - All CDI LabID Events
As of: January 9, 2019 at 10:45 AM
Date Range: All LTCLABID_EVENTS

Facility Org ID	Resident ID	Date of Current Admission	Event ID	Event Date	Specific Organism	Specimen Source	Location	Transferred from Acute Care Facility in Past 4 Weeks?	CDI Assay	Onset	Onset Description	Days: Admit to Event
39455	2468	12/25/2014	3140	01/05/2015	CDIF	STOOL	1 D		Incident	ACT-LO	ACT-LO - Acute Care Transfer-Long-term Care Facility-Onset	12
39455	444444	10/25/2014	3179	01/10/2015	CDIF	STOOL	4 GEN		Incident	LO	LO - Long-term Care Facility-Onset	78
39455	111111	01/01/2015	3134	01/15/2015	CDIF	STOOL	1 D		Incident	LO	LO - Long-term Care Facility-Onset	15

2018 ANNUAL FACILITY SURVEY IS DUE

Important Information

- **2018** Annual Facility Surveys are available for completion **now**!
  - Deadline to complete survey is **March 1, 2019**.
- Most survey questions are based on facility characteristics and practices during the **previous** calendar year.
- New soft alerts (pop-up messages) added to improve data quality.
- Accuracy is important-responses in the annual survey may be used for future risk adjustment of data.

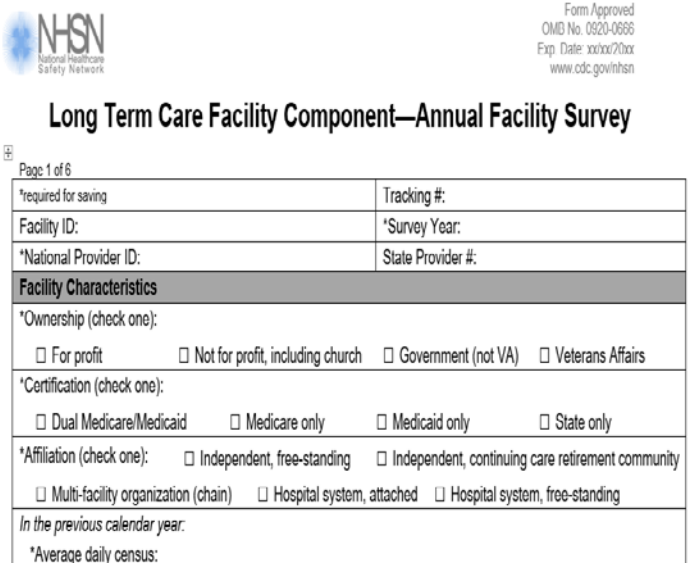
Important Information, *continued*

- Recommend collecting all required information using NHSN paper form.
- NHSN provides instructions for completing the form in the Table of Instructions (TOI).
- Surveys may be viewed, edited, and printed anytime after submitting.
- NHSN helpdesk is your friend! nhsn@cdc.gov with “LTCF” in subject line.

Getting Started with your Annual Facility Survey

Before Getting Started!

- Recommend the use of NHSN paper forms and instructions to collect required information
  - **Form:** https://www.cdc.gov/nhsn/forms/57.137_LTCFSurv_BLANK.pdf
  - **Instructions:** https://www.cdc.gov/nhsn/forms/instr/57.137-toi-annual-facility-survey.pdf
- May review and print your survey completed during previous calendar year (2017) if facility characteristics are similar



NHSN National Healthcare Safety Network

Form Approved
OMB No. 0920-0666
Exp. Date: xx/xx/20xx
www.cdc.gov/nhsn

Long Term Care Facility Component—Annual Facility Survey

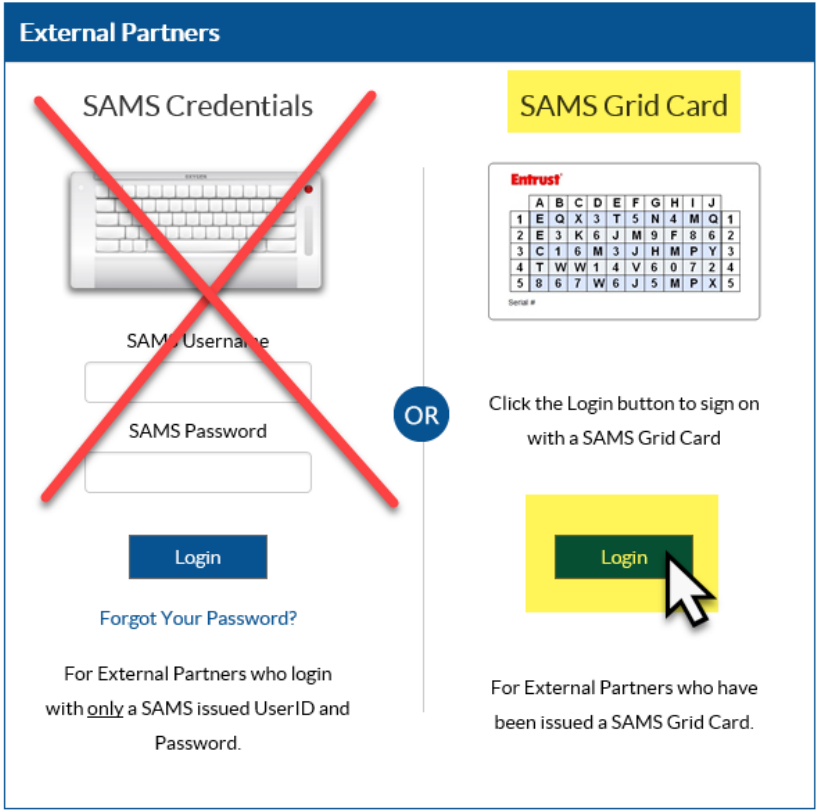
Page 1 of 6

*required for saving	Tracking #:
Facility ID:	*Survey Year:
*National Provider ID:	State Provider #:
Facility Characteristics	
*Ownership (check one): ☐ For profit ☐ Not for profit, including church ☐ Government (not VA) ☐ Veterans Affairs	
*Certification (check one): ☐ Dual Medicare/Medicaid ☐ Medicare only ☐ Medicaid only ☐ State only	
*Affiliation (check one): ☐ Independent, free-standing ☐ Independent, continuing care retirement community ☐ Multi-facility organization (chain) ☐ Hospital system, attached ☐ Hospital system, free-standing	
In the previous calendar year: *Average daily census:	

Getting Started with your Annual Facility Survey

Log-in to SAMS

1. Go to https://sams.cdc.gov
2. Sign-in using your SAMS Grid card

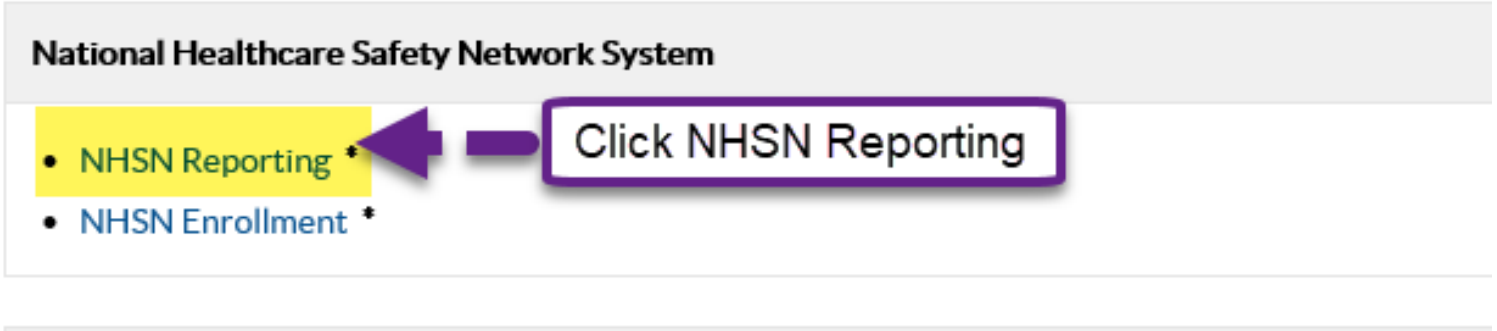


Getting Started with your Annual Survey

Select NHSN Reporting

- Select **NHSN Reporting** to access your enrolled facility

  Note: facility that have already enrolled in NHSN should **NOT** enroll again, even if the NHSN administrator changes



Getting Started with your Annual Survey

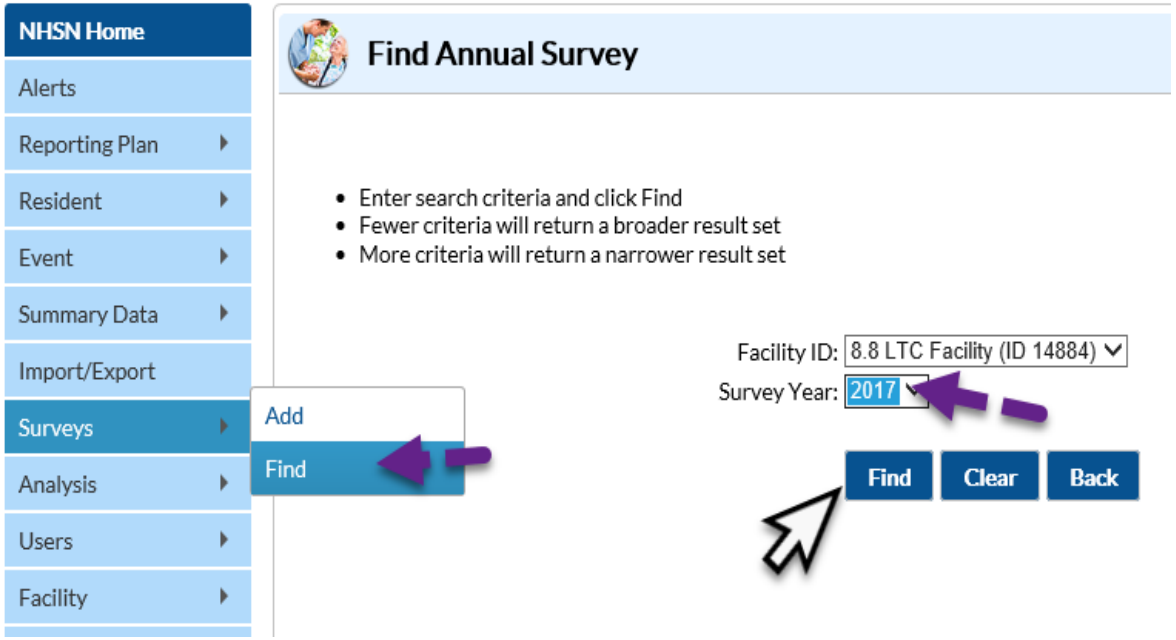
Open 2018 Annual Facility Survey

Getting Started with your Annual Facility Survey

- To review and/or print a copy of your completed survey for the previous calendar year:

To Access Previously Submitted Survey:

1. Click **“Surveys”**
2. Click **“Find”**
3. Select Survey Year **“2017”**
4. Click **“Find”**



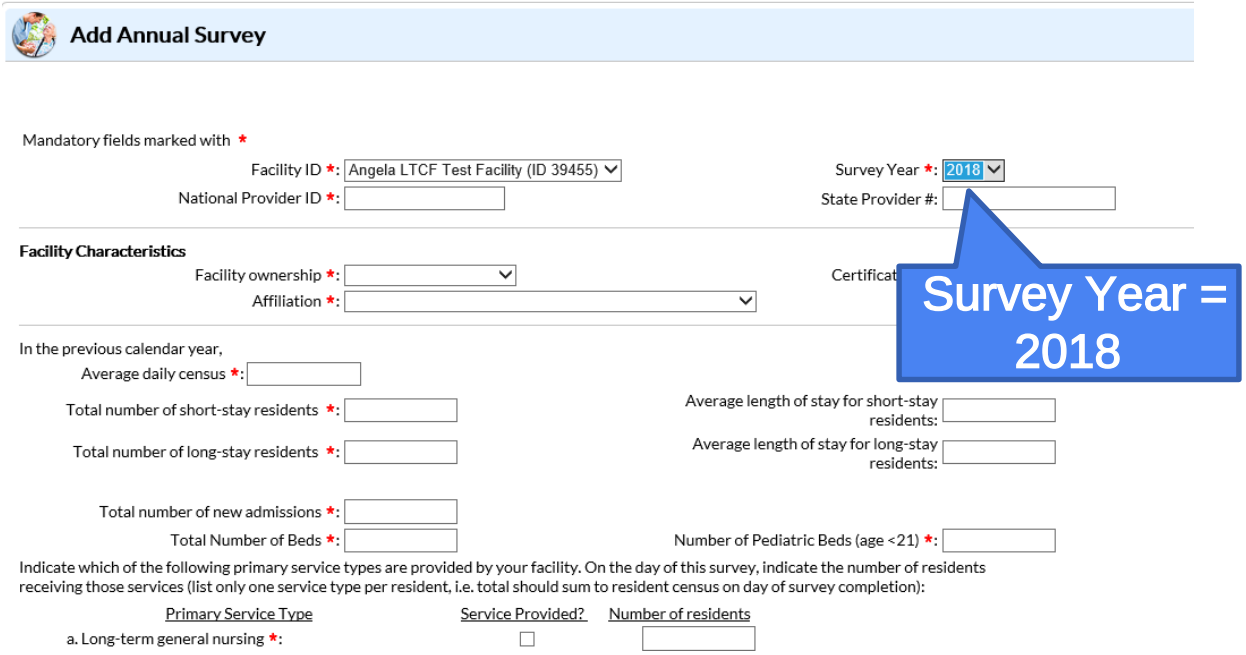
Getting Started with your Annual Survey

Open 2018 Annual Facility Survey

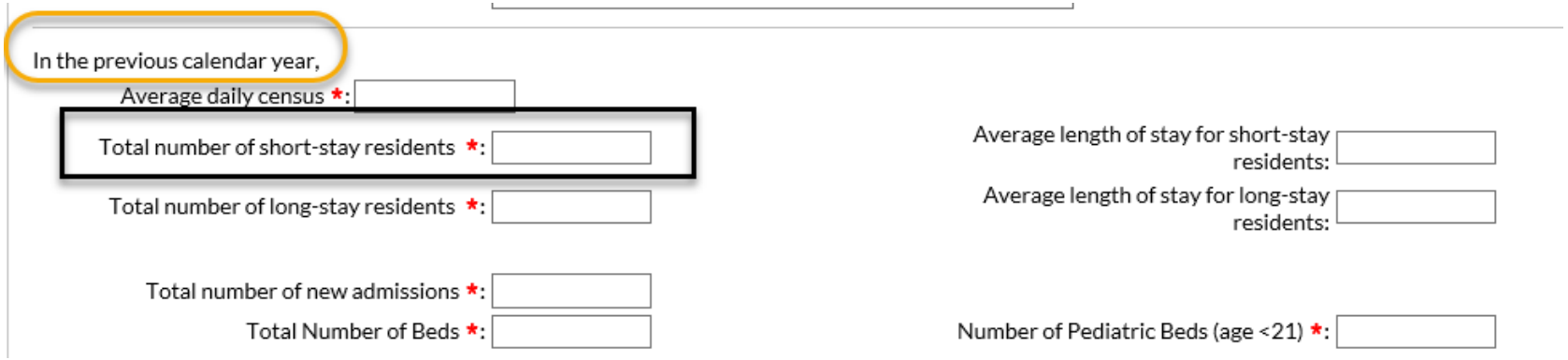
Getting Started with your Annual Survey

Add Required Information

Red *asterisk = required



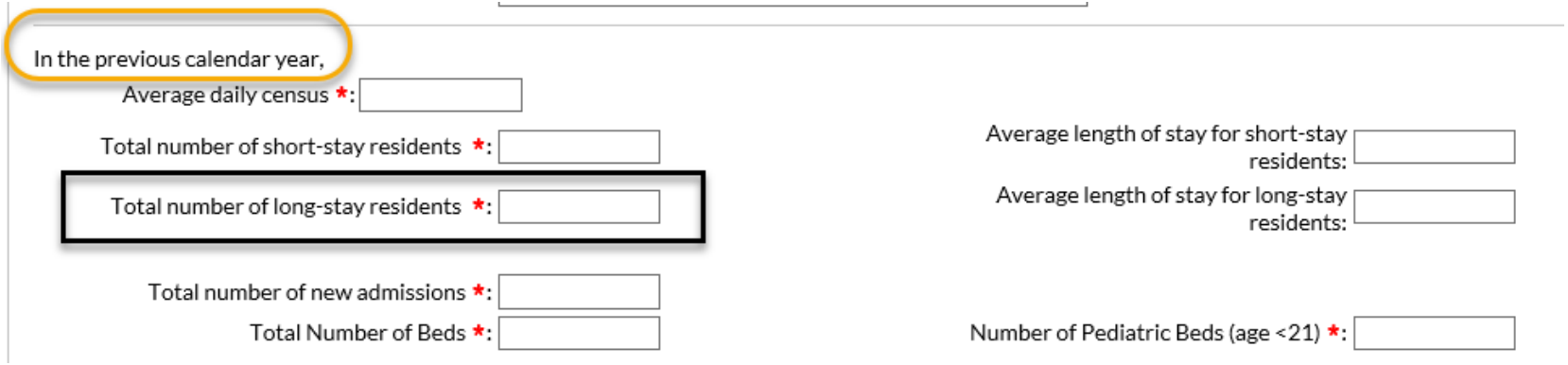
Total Number of Short-Stay Residents



Total number of unique residents who stayed ≤ 100 days in the previous calendar year.

Note: If a resident starts off as short stay but converts to long-stay, then count the resident in the total number of long-stay.

Total Number of Long-Stay Residents



Total number of unique residents who stayed > 100 days in the previous calendar year.

On the day you complete this survey..

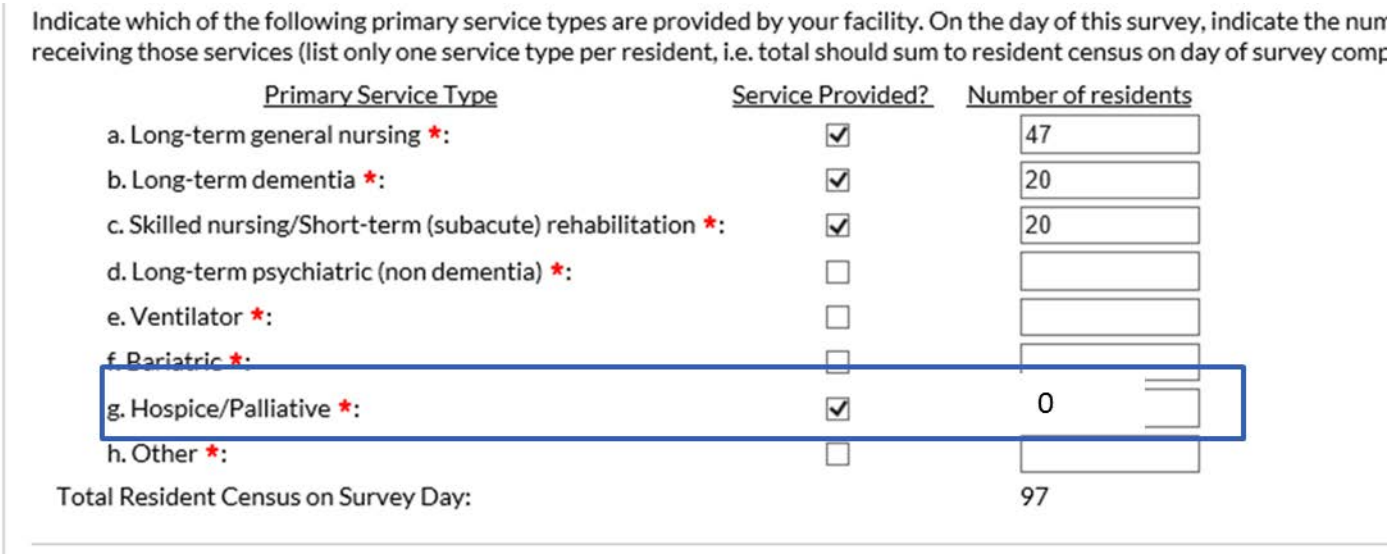
Indicate which of the following primary service types are provided by your facility. On the day of this survey, indicate the num
receiving those services (list only one service type per resident, i.e. total should sum to resident census on day of survey comp

Primary Service Type	Service Provided?	Number of residents
a. Long-term general nursing *:	☑	47
b. Long-term dementia *:	☑	20
c. Skilled nursing/Short-term (subacute) rehabilitation *:	☑	20
d. Long-term psychiatric (non dementia) *:	☐	
e. Ventilator *:	☐	
f. Bariatric *:	☐	
g. Hospice/Palliative *:	☑	10
h. Other *:	☐	
Total Resident Census on Survey Day:		97

Its Survey Time – What Services are being Provided?

- What should we do if we provide the service but have no one in house on the day of survey, e.g., we provide hospice, but had no hospice residents on the day of survey.

✓ **Check the box to include the service and put a "0" for the count**



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f. Bariatric *:	☐	
g. Hospice/Palliative *:	☑	0
h. Other *:	☐	
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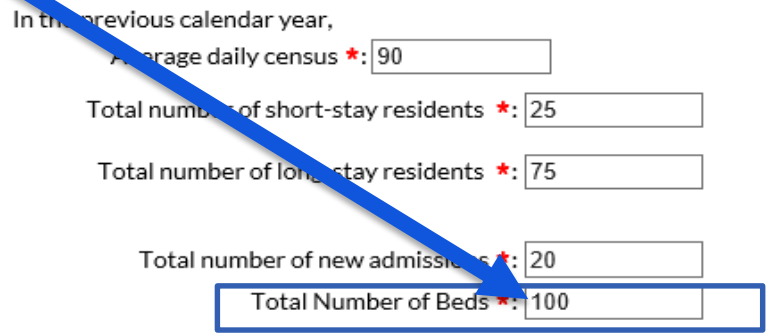
e. Ventilator *:	☐	
f. Bariatric *:	☐	
g. Hospice/Palliative *:	☑	10
h. Other *:	☐	
Total Resident Census on Survey Day:		97

Total Resident Census on Survey Day must be less than or equal to **Total Number of Beds** *provided in previous section of survey*



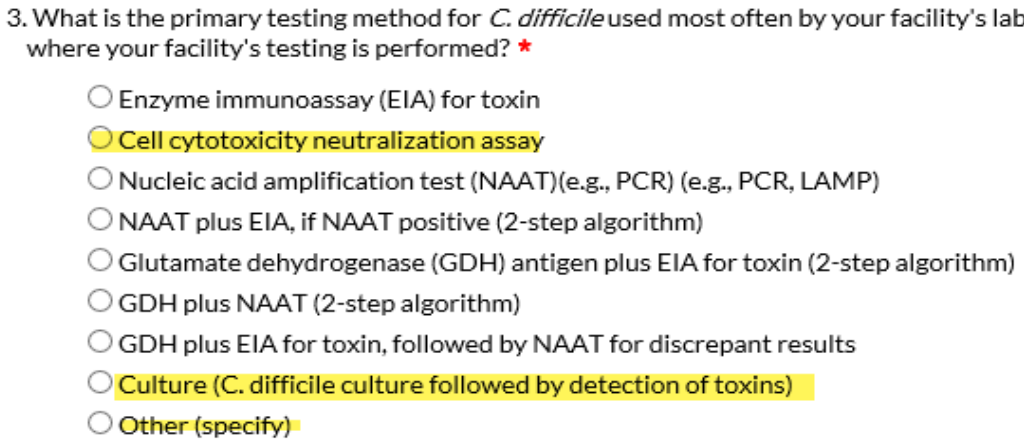
Primary Testing Method for *C. difficile*

3. What is the primary testing method for *C. difficile* used most often by your facility's laboratory or the outside laboratory where your facility's testing is performed? *

- ○ Enzyme immunoassay (EIA) for toxin
- ○ Cell cytotoxicity neutralization assay
- ○ Nucleic acid amplification test (NAAT)(e.g., PCR) (e.g., PCR, LAMP)
- ○ NAAT plus EIA, if NAAT positive (2-step algorithm)
- ○ Glutamate dehydrogenase (GDH) antigen plus EIA for toxin (2-step algorithm)
- ○ GDH plus NAAT (2-step algorithm)
- ○ GDH plus EIA for toxin, followed by NAAT for discrepant results
- ○ Culture (C. difficile culture followed by detection of toxins)
- ○ Other (specify)

- Based on practices of diagnostic laboratory in which **most** resident specimens are sent.
- Contact diagnostic laboratory identify the primary diagnostic testing method for *C. difficile* used

Uncommon Testing Methods for *C. difficile*



3. What is the primary testing method for *C. difficile* used most often by your facility's laboratory or the outside laboratory where your facility's testing is performed? *

- ○ Enzyme immunoassay (EIA) for toxin
- ○ Cell cytotoxicity neutralization assay
- ○ Nucleic acid amplification test (NAAT)(e.g., PCR) (e.g., PCR, LAMP)
- ○ NAAT plus EIA, if NAAT positive (2-step algorithm)
- ○ Glutamate dehydrogenase (GDH) antigen plus EIA for toxin (2-step algorithm)
- ○ GDH plus NAAT (2-step algorithm)
- ○ GDH plus EIA for toxin, followed by NAAT for discrepant results
- ○ Culture (C. difficile culture followed by detection of toxins)
- ○ Other (specify)

- Before selecting cell cytotoxicity neutralization assay or culture, verify primary testing method with diagnostic lab.
- Most testing methods can be categorized by selecting from the options provided.
- 'Other' should **not** be used to name specific laboratories, reference laboratories, or the brand names of *C. difficile* tests.

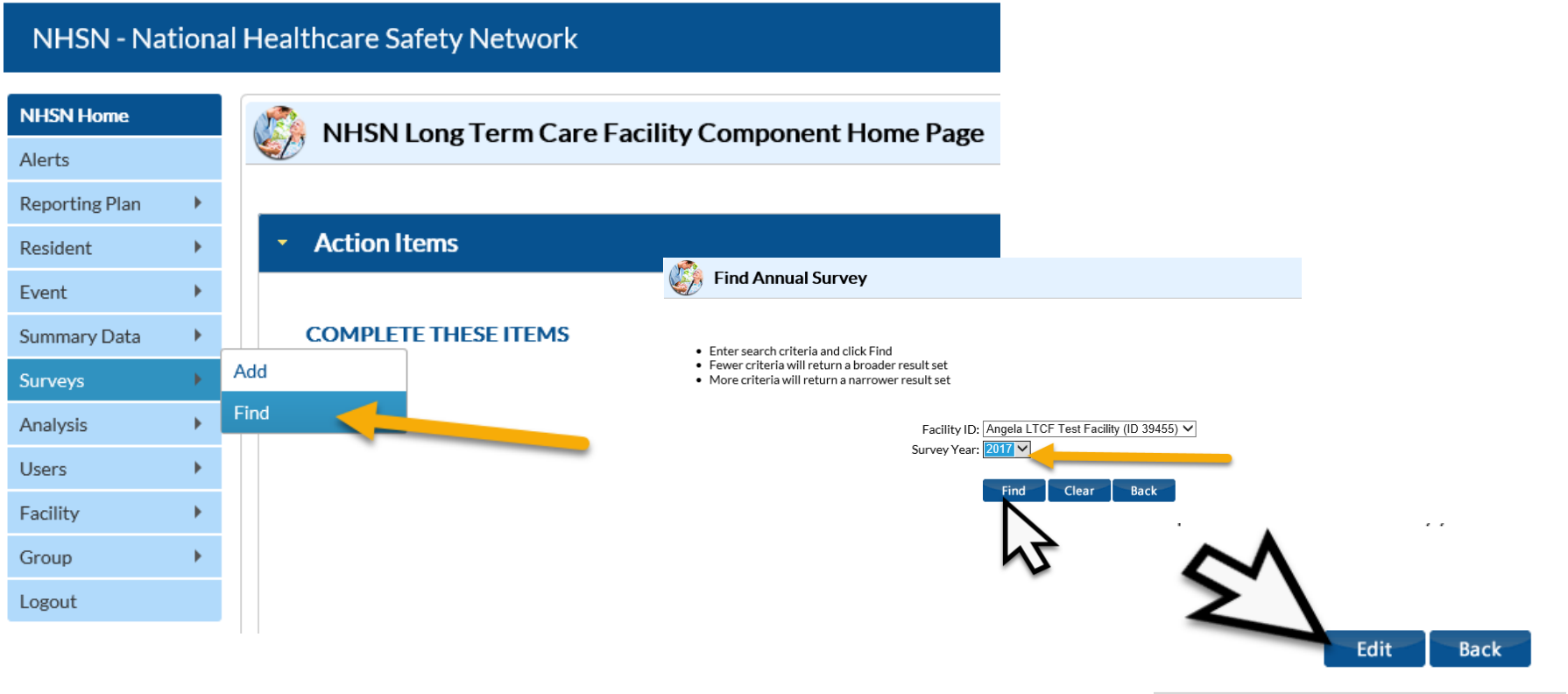
Lab Testing methods

- What if you changed labs this year and the testing methods are different?

✓ **You will add the new lab to next year's survey. Remember, for 2018 survey, you are only including facility characteristics and practices for 2018. If labs changed mid-way through the year, include the primary lab tests your facility used for the majority of 2018.**

Remember to SAVE completed survey

EDIT Annual Facility Survey



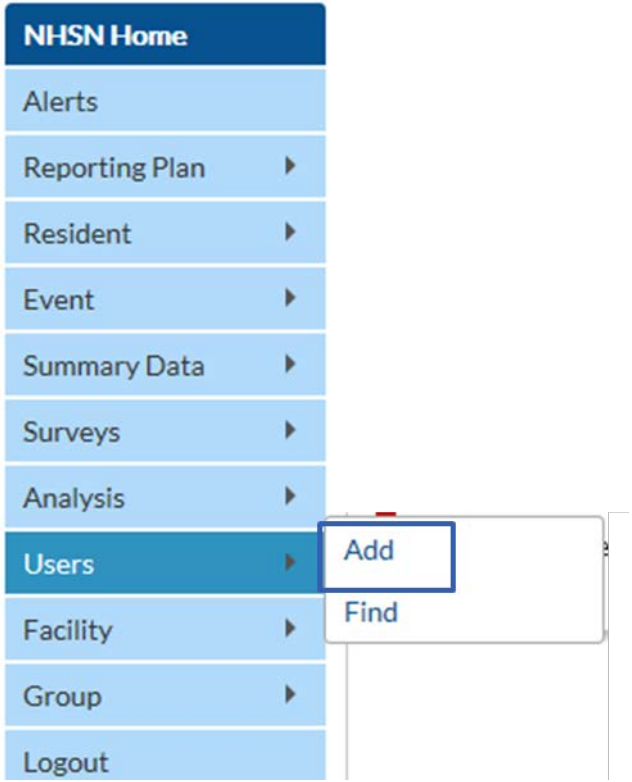
How do I add a new user to NHSN?

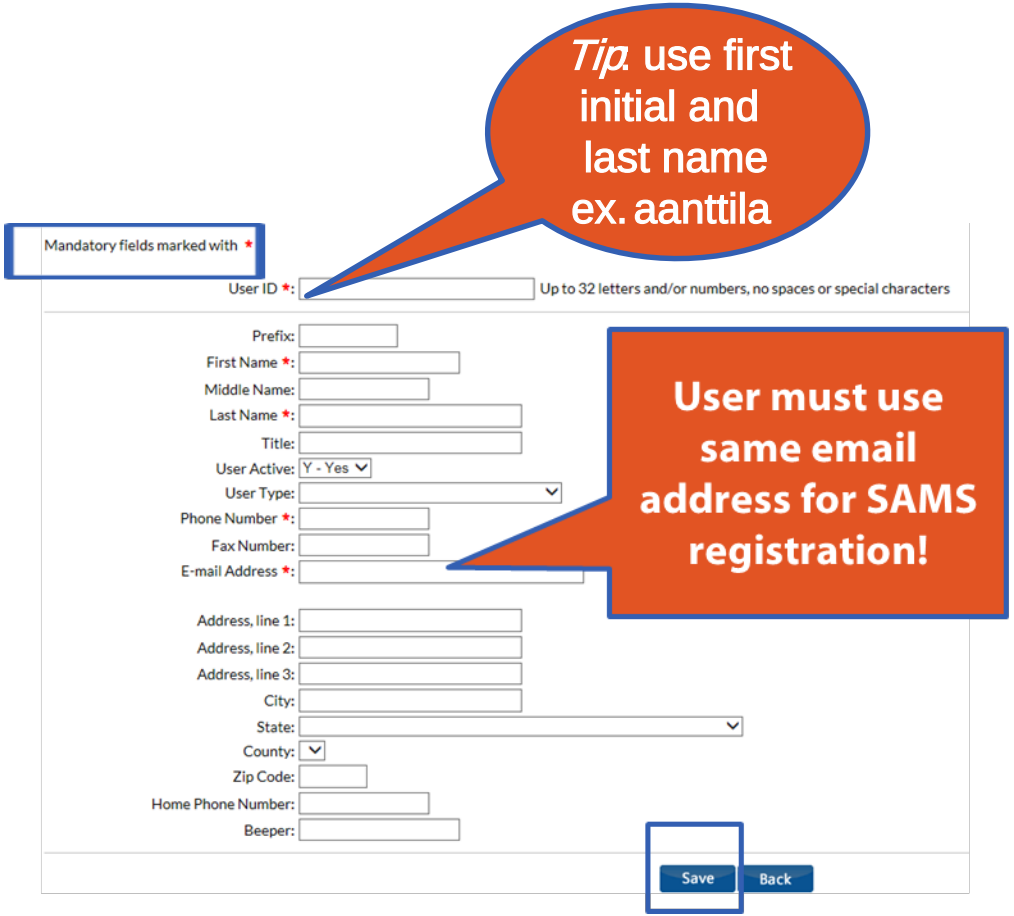
- How can our new Infection Control Nurse be added as a NHSN user?

✓ The NHSN facility administrator must add the new nurse as a user to the NHSN application. Once the new user is added, if he/she is not already registered with SAMS, he/she will receive an e-mail to register with SAMS.

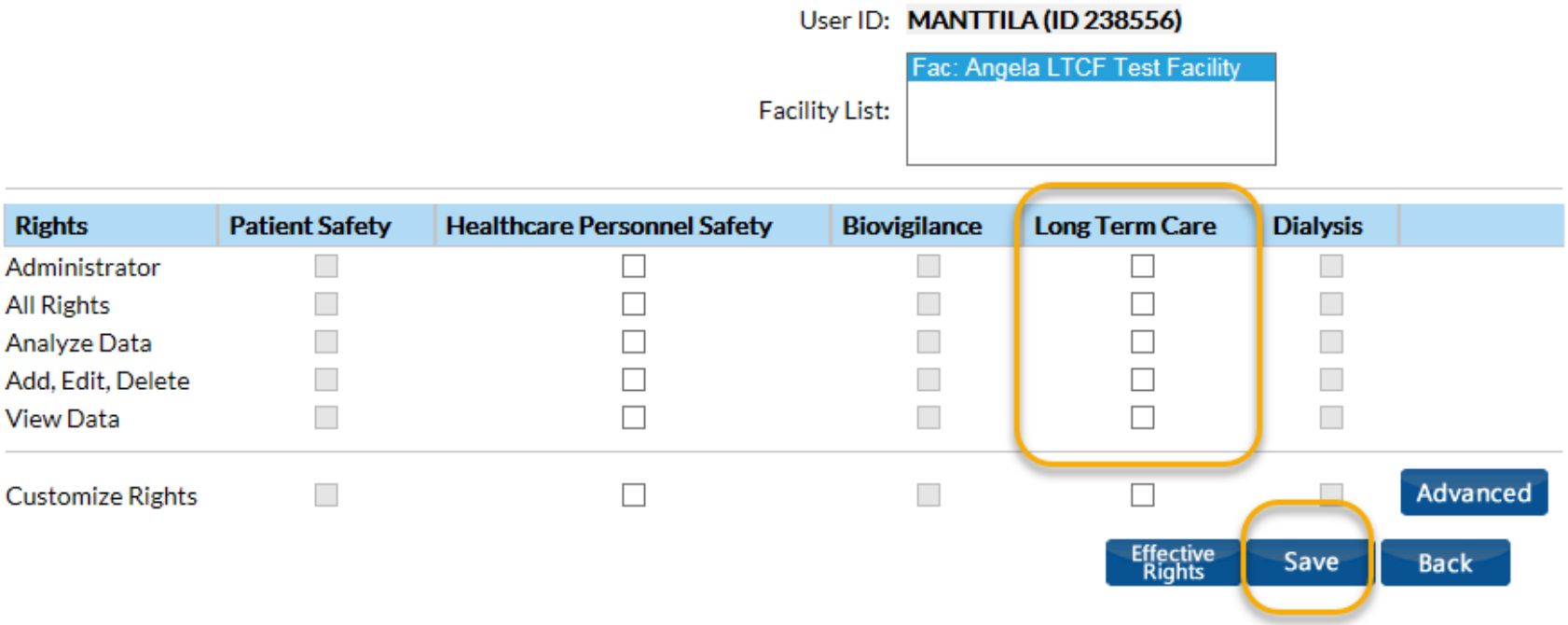
- Please send an e-mail to nhsn@cdc.gov for additional questions or help with adding a new user

ADD NHSN Users





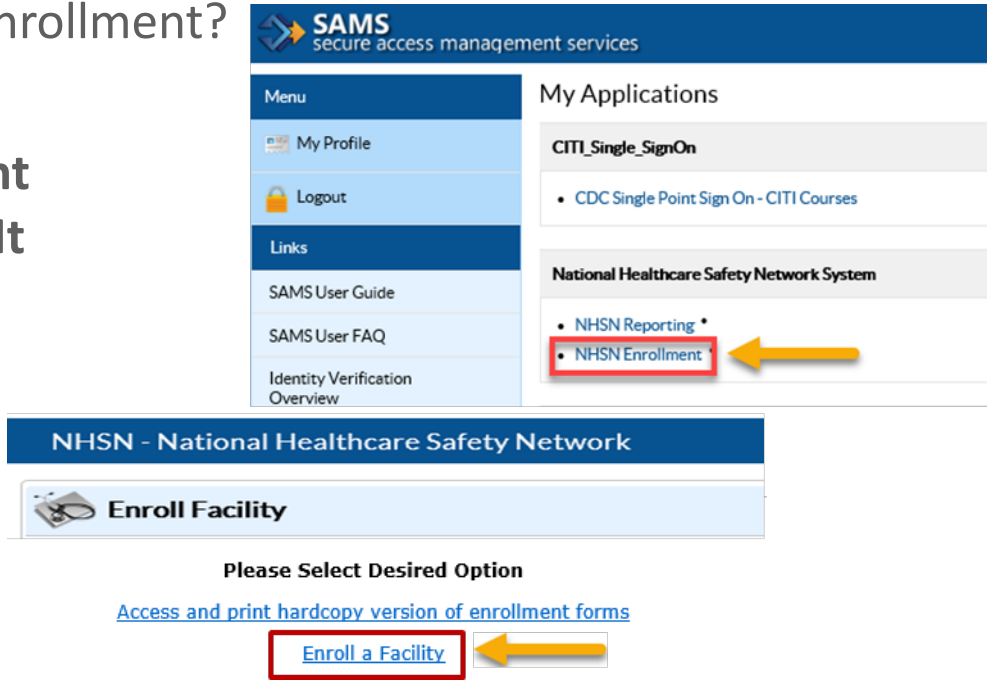
ADD NHSN User
Assign and Save Rights



How do I add the LTCF Component if I'm already a NHSN user?

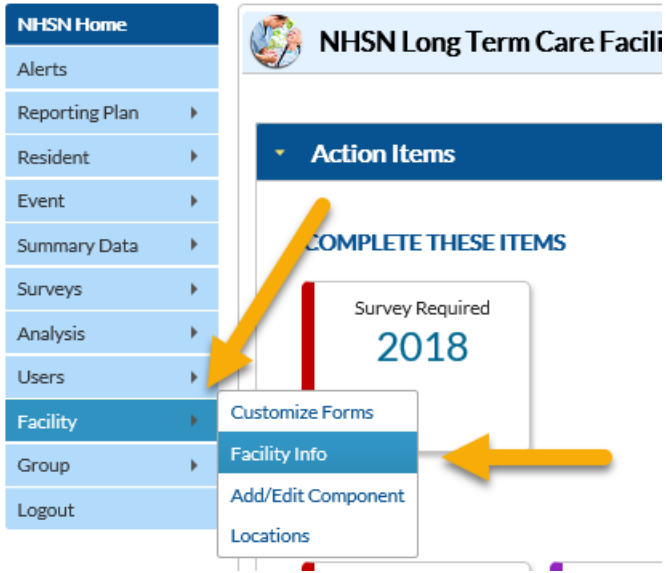
- Will I be able to access LTC if I am already enrolled for hospital NHSN data? Or do I have to initiate another enrollment?

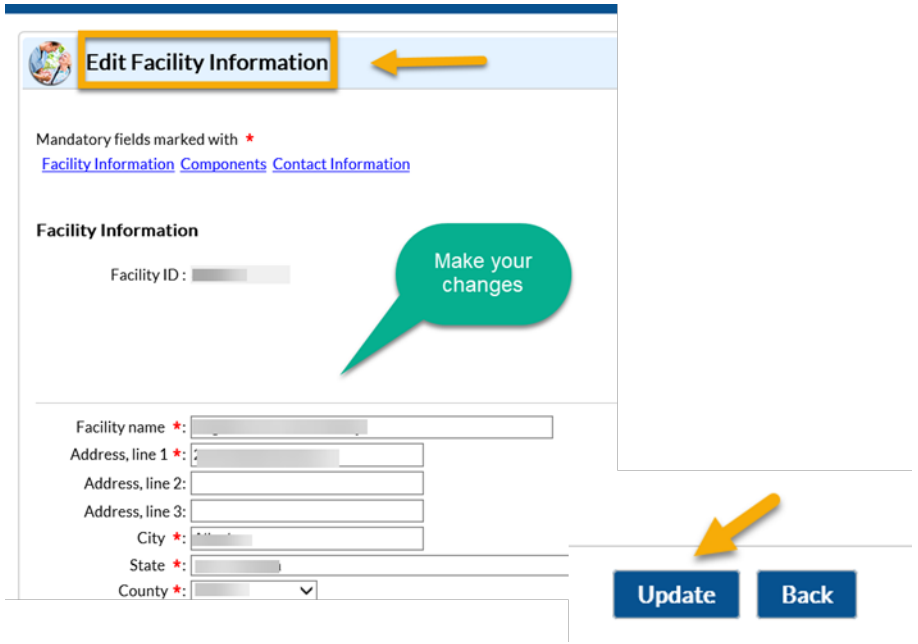
✓ **Must enroll in the LTCF Component since it is a different component. It is an abbreviated enrollment where the LTCF annual facility survey must be completed to complete the enrollment.**



How do I make a change to our facility name?

- How do we update the name of our facility within the NHSN site?





QUESTIONS ?

Send all questions to nhsn@cdc.gov and type “LTCF” in the subject line