

New Hampshire Healthcare-Associated Infections Program Annual NHSN Workshop: February 22, 2017 Using Quarterly/Annual Reports

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Overview: Using Quarterly/Annual Reports

- How to read/use your quarterly report
- Panel

Tab 2: SSI data (CBGB, CBGC, COLO, KPRO, HYST)

- All SSI data is presented in the same format and is straightforward to interpret
- Data is arranged by Org ID
- SSI data includes number of infections, number of procedures, SIR, p-value for SIR, and comments if necessary

SSI: CBGB (Coronary artery bypass graft with both chest and donor site incisions), 2014 Q3 (July 1-September 30)						
OrgID	Number of Infections	Number of Procedures	Number of Predicted Infections	Standardized Infection Ratio	P-value	Comments
12242	0	10	0.166			
12373	0	47	0.851			
13759	0	57	1.203	0.000	0.30	
13936	0	92	1.703	0.000	0.18	

Tab 2: Interpreting SSI comments

What the comments say (examples)	What the comments mean
No data submitted for this procedure in Q3 of 2017	If 0 procedures and events show up in our reports during a quarter, we include a note in case there are procedures or events that have not been entered. Please check that the number of procedures/events entered matches what is reflected in the report.
Please confirm this procedure performed in only 2 months of Q3 of 2017	If procedures are carried out in less than 3 months during a quarter, we include a note in case there are procedures or events that have not been entered. Please check that the number of procedures/events entered matches what is reflected in the report.
Please confirm 28 HYSTs reported as outpatient procedures	Typically, procedures performed at acute care hospitals are inpatient, so we include a note whenever there is a procedure classified as outpatient. Please check that the procedure is correctly classified.
2 procedures missing ASA Class/Wound Class	Wound Class and ASA Class are required components of complete procedures, so we include a note whenever there is a procedure with one of these elements missing. Please enter the missing data if possible.

Tabs 3 & 4: CAUTI and CLABSI data

- CAUTI and CLABSI data are in the same format; data are presented by OrgID and stratified by location
- CAUTI and CLABSI data includes number of infections, number of line/catheter days, number of predicted infections, SIR, p-value for SIR, and comments if necessary
- Facilities reporting data for more than one ICU will have more than one line of data for CLABSI and/or CAUTI; compare your facility's total events and procedures with your internal reports to verify that there are no discrepancies.

CAUTI (Catheter-associated urinary tract infections), 2014 Q3 (July 1-September 30)							
OrgID	Type of Unit	Number of Infections	Number of Catheter Days	Number of Predicted Infections	SIR	P-value	Comments
12373	IN:ACUTE:CC:MS	5	662	0.794			
12373	IN:ACUTE:CC:C	2	562	1.124	1.779	0.41	
12373	IN:ACUTE:CC:MS	5	2069	4.759	1.051	0.86	
12373	IN:ACUTE:CC:MS_PED	1	131	0.367			
12613	IN:ACUTE:CC:MS	0	9	0.012			

Tabs 3 & 4: Interpreting CAUTI/CLABSI comments

What the comments say (examples)	What the comments mean
Please confirm catheter/central line days generated in only 2 months of Q3 of 2017 for this location	If catheter/central line days are reported for less than 3 months during a quarter, we include a note in case there are days that have not been reported. Please check that the total number of catheter/central line days entered matches what is reflected in the report across all locations
Please confirm 0 ICU catheter/central line days in Q3 of 2017 for this location	If there are 0 days reported for a particular location during a quarter, we include a note in case there are days that have not been entered. Please check that the total number of days entered matches what is reflected in the report.

Tab 5: CLIP data

- CLIP data are presented by OrgID and stratified by occupation of inserter
- CLIP data includes number of insertions, number of insertions adhering to bundle, percent adherence, and comments if necessary
- Facilities reporting insertions performed by more than one occupation will have more than one line of data; add the insertions together on all lines with your OrgID to get your total and compare it with your internal reports

CLIP (Central line insertion practices), 2014 Q3 (July 1-September 30)					
OrgID	Occupation of inserter	Total number of insertions	Insertions that adhered to bundle	% adherence	Comments
12242	ADPN	32	32	100.0	
12242	PHY	22	22	100.0	
12242	RNU	12	12	100.0	
12373	FEL	37	36	97.2	
12373	RES	86	86	100.0	
12373	RNU	15	15	100.0	
12373	ADPN	49	49	100.0	
12373	OMS	8	8	100.0	
12373	PAS	7	7	100.0	
12373	PHY	6	6	100.0	
12613	OMS	5	5	100.0	

Tab 5: Interpreting CLIP comments

What the comments say (examples)	What the comments mean
Please confirm no central lines inserted during Q3 2017	<p>Each time a central line is inserted in an ICU, a CLIP event should be entered into NHSN. If no data is reported for CLIP during a given quarter, please check if any central lines were inserted in an ICU location and, if so, enter a CLIP event for each.</p> <p>Note: The presence of central line days during a quarter does not mean that a central line was actually inserted during that quarter.</p>

Summation

- Generally, check the data you have entered (# line/catheter days, # procedures, # events) against the data represented in our reports, and read the comments. If there is a discrepancy, let us know!
- If you are having problems, we want to know!
- Thank you for your support and patience!
- Contact HAI Program if you have any questions about these reports
 - Cannot find your org ID
 - Need further explanation re: data/data dictionary/comments
 - Need proc ID numbers for procedures with missing data (ASA, Wound Class, etc.) and/or other output
 - Etc. ...



ICP Panel Members

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 - Exeter Hospital
- Robert Tucker, MPH
 - Elliot Health Systems
- Lynda Caine, RN, BSN, MPH, CIC
 - Concord Hospital
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References

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