

Shop Talk: NHSN Updates & Technical Assistance

Welcome!

- All lines are muted, so please ask your questions in Q&A
- For technical issues, chat to the ‘Technical Support’ Panelist
- Please actively participate in polling questions that will pop up on the lower righthand side of your screen

We will get started shortly!



Quality Improvement Organizations

Sharing Knowledge. Improving Health Care.
CENTERS FOR MEDICARE & MEDICAID SERVICES



The Quality Improvement Services Group of
ALLIANT HEALTH SOLUTIONS

Shop Talk: NHSN Updates & Technical Assistance



February 2021

Presented by:

Marilee H. Johnson, MBA, MT (ASCP)

Technical Advisor, Infection Prevention



Marilee Johnson, MBA, MT (ASCP)

INFECTION PREVENTION TECHNICAL ADVISOR

Marilee is a health professional with experience in public health epidemiology, infection prevention, and clinical microbiology. Recently, she worked with nursing homes through a national CDC project to reduce *C. difficile* infections. She continues to support nursing homes with reporting infections into the National Healthcare Safety Network and reducing health acquired infections.

Marilee loves gardening, hiking, reading, yoga, and spending time with her family.

marilee.johnson@allianthealth.org



Amy Ward, MS, BSN, RN, CIC

INFECTION PREVENTION SPECIALIST

Amy is a registered nurse with a diverse background in acute care nursing, microbiology, epidemiology and infection control. She is passionate about leading and mentoring new and future infection preventionists in their career paths. Over the past several years, her focused efforts in C. difficile infection reduction lead to significant local improvements in patient outcomes, antimicrobial use, and C. difficile rates.

Amy enjoys spending time with family. She loves all the time she can get outdoors cycling and running.

Contact:

Amy.Ward@AlliantHealth.org



Guest Panelists



Andrew Turner

User Support Specialist II

CACI, subcontractor to Leidos

Contractor for the National Healthcare Safety Network (NHSN) NCEZID,
Division of Healthcare Quality Promotion (DHQP)

National Center for Emerging and Zoonotic Infectious Disease Centers for
Disease Control and Prevention

Robert Maxwell

User Support Specialist II

CACI, subcontractor to Leidos | Contractor for the National Healthcare Safety
Network (NHSN) NCEZID, Division of Healthcare Quality Promotion
(DHQP) National Center for Emerging and Zoonotic Infectious Disease
Centers for Disease Control and Prevention

Disclaimer

- I do **not** work for NHSN, SAMS, CDC, or CMS.
- I am **not** the SAMS or NHSN help desk
- I **am** the technical advisor for infection prevention for Alliant Quality, the QIO for Alabama, Florida, Georgia, Kentucky, Louisiana, North Carolina and Tennessee

Three Good Things

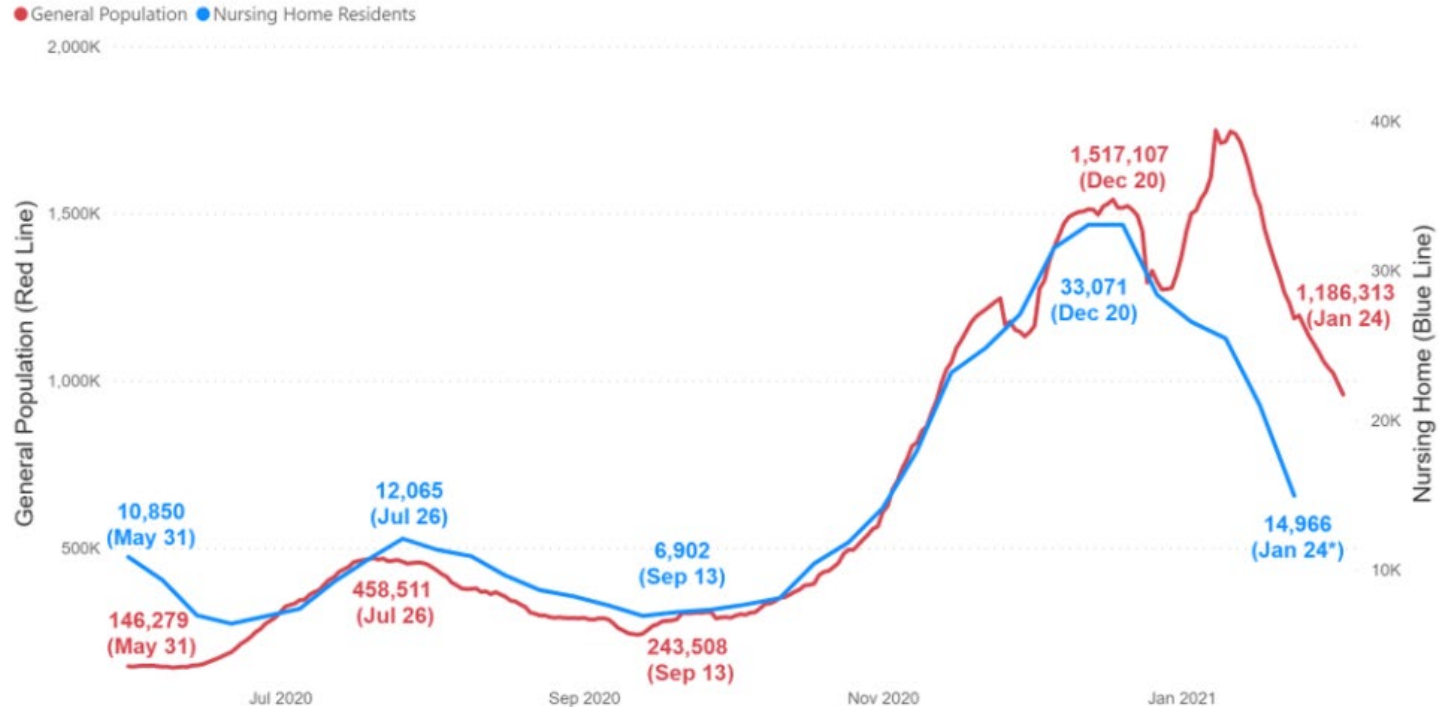
There are:

- CDC Guidelines that will **protect** my residents, co-workers, family, friends and myself from spreading the virus
- Two vaccines available that will **prevent** me from getting sick
- Lab tests that will **detect** if my residents, co-workers, friends, family or myself have the virus

<https://www.hsq.dukehealth.org/tools/>

COVID-19 Cases

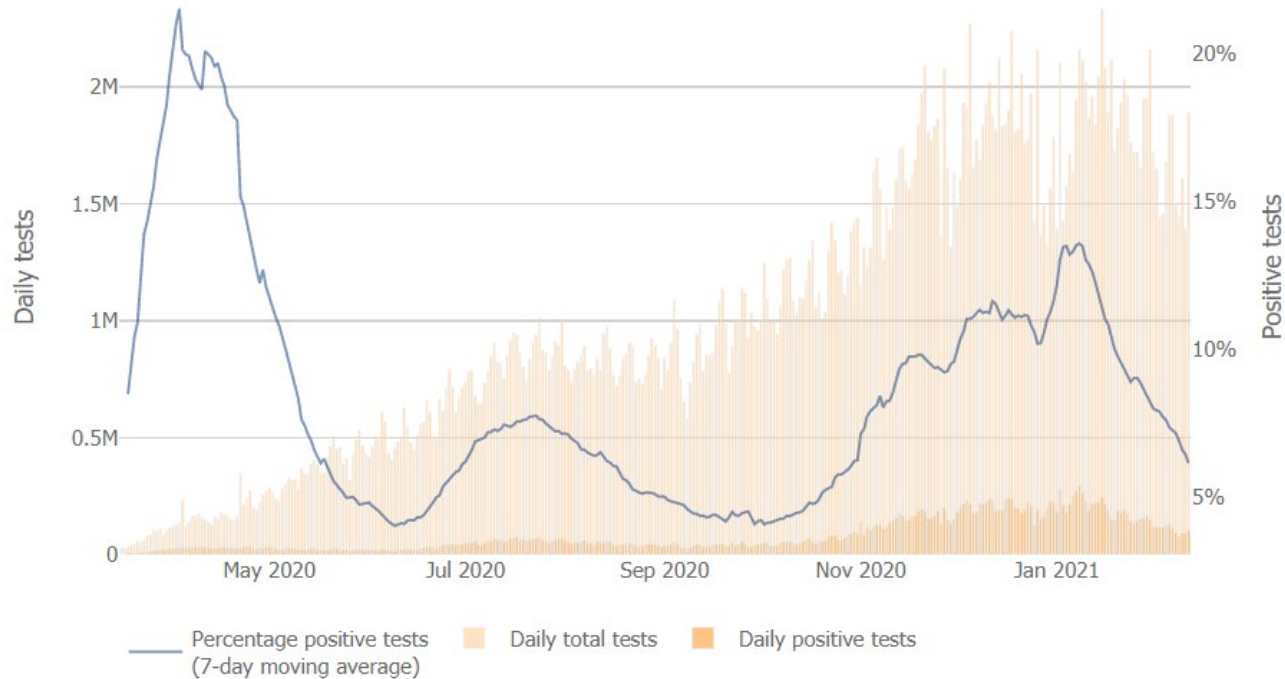
New Case Trends: General Population & Nursing Homes Residents (7-day)



Data Through: Nursing Home - Jan 24, 2021 (*Latest week's data is preliminary); Community - Feb 3, 2021 **Sources:** NHSN and Johns Hopkins University
Notes: Nursing Home data shown passed NHSN's Quality Assurance check.

Positivity Rates for COVID-Testing

US



<https://coronavirus.jhu.edu/testing/individual-states>

CDC Guidelines Updated 2/10/21

We continue to recommend use of appropriate PPE including NIOSH-approved N95 respirator (or equivalent or higher level respirator), gown, gloves, and eye protection when caring for patients with suspected or confirmed SARS-CoV-2 infection.

For source control, we / CDC continues to recommend universal use of well-fitting source control for everyone in a healthcare setting. Healthcare personnel options for source control include:

- N95 respirators or equivalent or high-level respirators
- A respirator approved under standards used in other countries that are similar to NIOSH-approved N95 filtering facepiece respirators OR
- A well-fitting facemask (e.g., selection of a facemask with a nose wire to help the facemask conform to the face; selection of a facemask with ties rather than ear loops; use of a mask fitter; [tying the facemask's ear loops and tucking in the side pleats; fastening the facemask's ear loops behind the wearer's head](#); use of a cloth mask over the facemask to help it conform to the wearer's face)

Updated Guidance for Vaccinated Persons 2/10

Updated [quarantine guidance for vaccinated persons](#). This guidance states that vaccinated persons with an exposure to someone with suspected or confirmed COVID-19 are not required to quarantine if they meet if they meet all of the following criteria:

- Are fully vaccinated (i.e., ≥ 2 weeks following receipt of the second dose in a 2-dose series, or ≥ 2 weeks following receipt of one dose of a single-dose vaccine) AND
- Are within 3 months following receipt of the last dose in the series AND
- Have remained asymptomatic since the current COVID-19 exposure.

These updated quarantine criteria **could** be applied when considering work restrictions for fully vaccinated healthcare personnel with [higher-risk exposures](#) as a strategy to alleviate staffing shortages.

Residents/patients: Vaccinated inpatients and residents in healthcare settings should continue to **quarantine following an exposure** to someone with suspected or confirmed COVID-19. This exception is due to the unknown vaccine effectiveness in this population, the higher risk of severe disease and death, and challenges with social distancing in healthcare settings.

- This applies to new admissions.

Vaccinations in Nursing Homes

- As of February 10th, 33.7 M have received 1 or more doses in the US, of those 3.8M were staff or residents of nursing homes.
- 77.8 % of residents and 37.5% of staff
- Please continue to work with your pharmacy to complete vaccinations for all staff and residents.

<https://www.cdc.gov/nhsn/ltc/weekly-covid-vac/index.html>

<https://covid.cdc.gov/covid-data-tracker/#vaccinations>

<https://www.cdc.gov/coronavirus/2019-ncov/vaccines/index.html>

<https://www.cdc.gov/nhsn/pdfs/ltc/covidvax/weekly-covid-reporting-508.pdf>

https://www.cdc.gov/mmwr/volumes/70/wr/mm7005e2.htm?s_cid=mm7005e2_x

Revised QA Criteria 1/24/21

1) The ratio of Residents Total Confirmed COVID-19 to Number of All Beds is greater than or equal to 1.75; that is, resident cases and admissions combined is at least 75% larger than total facility beds. AKA 80 /100

2) The ratio of Residents Total COVID-19 Deaths to Residents Total Confirmed COVID-19 and Residents Total Admissions COVID-19 is greater than or equal to 1.5; that is, resident deaths is at least 50% larger than resident cases and admissions combined.

3) The ratio of Residents Total COVID-19 Deaths to Number of All Beds is greater than or equal to 1.15; that is, resident deaths is at least 15% larger than total facility beds. A facility is also excluded if Residents Total COVID-19 Deaths was zeroed-out due to a quality check.

Exception: If any of these three conditions are met, a facility is still **included** if:

4) The facility reports fewer than 25 Residents Total COVID-19 Deaths **or** fewer than 25 Residents Total Confirmed COVID-19.

<https://data.cms.gov/stories/s/COVID-19-Nursing-Home-Data/bkwz-xpvg>

Revised QA Criteria 1/24/21

- 5) The Staff Total COVID-19 Deaths to Staff Total Confirmed COVID-19 is greater than or equal to 1.5; that is, staff deaths is at least 50% larger than staff cases. If there are fewer than 10 Staff Total COVID-19 Deaths, the facility is included.
- 6) The ratio of Staff Total COVID-19 Deaths to Number of All Beds is greater than or equal to 1.5; that is, staff deaths is at least 50% larger than total facility beds.
- 7) The ratio of Staff Total Confirmed COVID-19 to Number of All Beds (a) is greater than 2.0 if the Number of All Beds is 50 or fewer and (b) is greater than 1.25 if the Number of All Beds is greater than 50.

Revised QA Criteria 1/24/21

Criteria	Description	Actions
Criteria I	If analysis of the pattern of data indicates that data was being entered in a cumulative fashion rather than in an incident fashion per the instructions.	The data in that column is set to 0 and the facility is flagged in the data set. The entire column of data fields for the given facility is set to 0 if a data field appears to be entered cumulatively.
Criteria II	At the individual record level, daily data entries are reviewed to identify outlier values that may appear invalid. Outlier values are defined as values that exceed the percentile criteria cut point for each Resident Impact and Staff/Personnel Impact variable as depicted in the table below.	Values that exceed the percentile criteria are reassigned a 0 value on the specific date for which the data were entered (single data entry nullification) and the facility is flagged in the dataset

<https://data.cms.gov/Special-Programs-Initiatives-COVID-19-Nursing-Home/COVID-19-Nursing-Home-Dataset/s2uc-8wxp/data>

Summary of NHSN Data Quality Issues

Week Ending 1/31	Not Submitted	Did Not Pass QA
Alabama	15	3
Florida	38	5
Georgia	23	8
Kentucky	10	6
Louisiana	13	8
North Carolina	18	7
Tennessee	14	1

<https://data.cms.gov/Special-Programs-Initiatives-COVID-19-Nursing-Home/COVID-19-Nursing-Home-Dataset/s2uc-8wxp/data>

Examples-do your math homework

Total Cases	Facility Beds	Ratio	≥ 1.75 ?	Pass QA?
350	120	350/120	2.91	No

Total COVID Deaths	Total Cases	Ratio	≥ 1.50 ?	Pass QA?
44	22	44/22	2.0	No

Total COVID Deaths	Facility Beds	Ratio	≥ 1.15 ?	Pass QA?
45	30	45/30	1.50	No

Data Quality Update

Each Thursday afternoon, go to the [CMS website](#), and check your data!

Each week, export your CSV file from your NHSN account and look for data that is not plausible.

Email NH_COVID_Data@cms.hhs.gov

& nhsn@cdc.gov to remove the “flags” once you have corrected and verified your data.

<https://data.cms.gov/Special-Programs-Initiatives-COVID-19-Nursing-Home/COVID-19-Nursing-Home-Dataset/s2uc-8wxp/data>

Keeping it Going

- Individuals have access to facilities through their SAMS credentials/Grid Card
- SAMS credentials/Grid Card are not Attached to a Facility. Individuals are connected and responsible for their Grid Card. It will go with you to the next facility.
- To get access to a facility, another user must add you. If no one has access, you must submit a form.

Quote of the Month

-If you are leaving the facility & are the **FADMIN**, be sure to *reassign* the role of FADMIN *before* you *leave*. *Karma is a real thing.*

Fine Print: NHSN Facility Administrator (FADMIN) is not the actual Administrator or Executive Director of the Facility. It is the person who has administrative rights for the NHSN account.



<https://www.cdc.gov/nhsn/pdfs/covid19/lctf/reassign-fa-508.pdf>

How do you know if your are the NHSN Facility Administrator?

A screenshot of a navigation menu with the following items: Analysis, Users, Facility, Group, and Logout. The 'Facility' item is selected, and a dropdown menu is open showing options: Customize Forms, Facility Info, Add/Edit Component, Locations, and Direct Enroll. The 'Facility Info' option is highlighted in blue. In the background, there is a purple vertical bar and some text including 'Missing Sum Data' and 'ntial'.

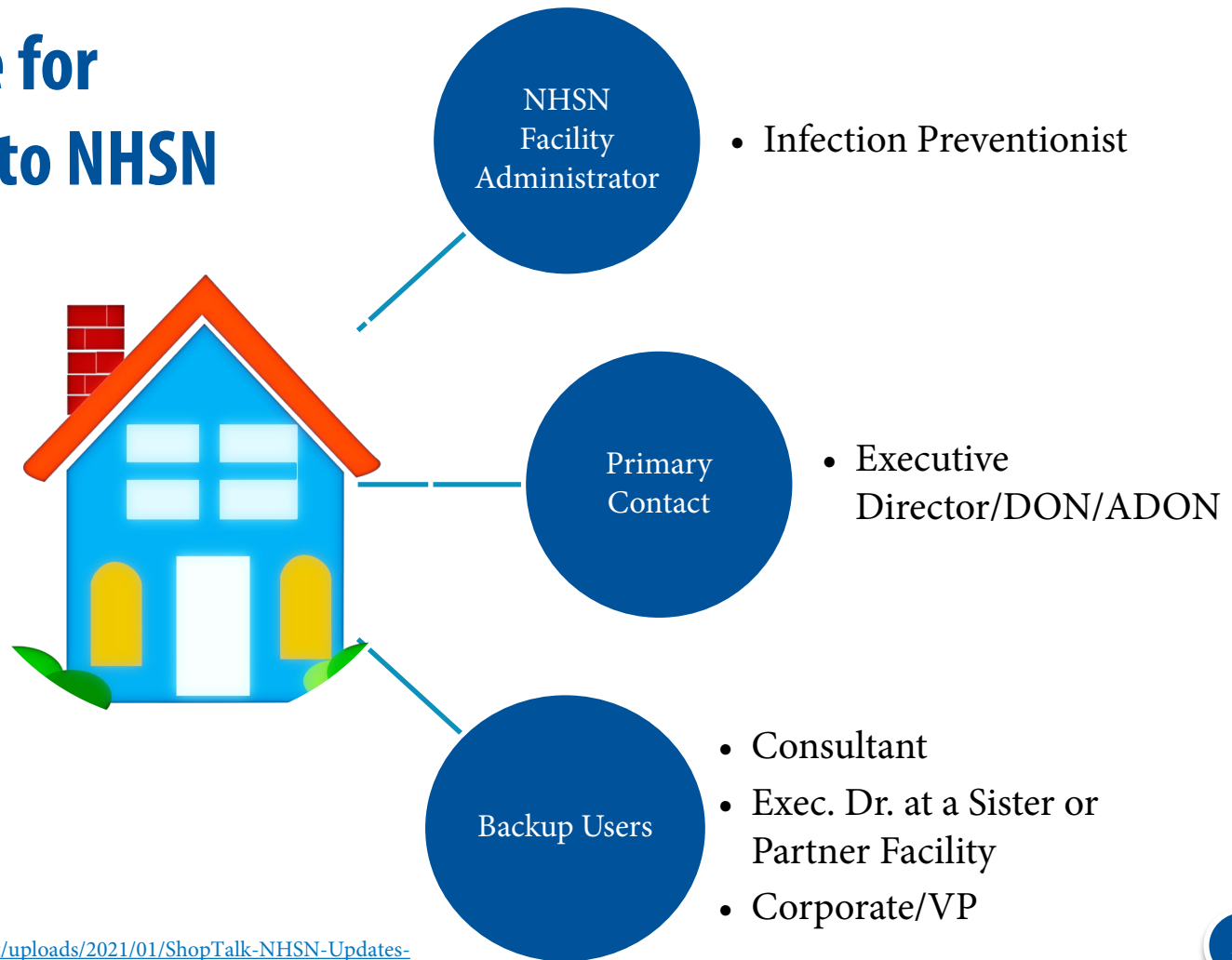
Contact Information

	Contact Type
Edit	Facility Administrator
Edit	Long Term Care Facility Primary Contact

A screenshot of a table with two columns: 'Email' and 'Action'. The 'Action' column contains two 'Reassign' buttons. A blue rectangular box highlights the 'Reassign' buttons in the 'Action' column.

Email	Action
	Reassign
	Reassign

Best Practice for Reporting into NHSN



NHSN Updates /February 1st

- COVID-19 Point of Care Test Reporting Tool
- COVID-19 Resident Impact and Facility Capacity Pathway (retrospective to Feb 1st for vaccine status)
- New COVID-19 Therapeutics Module
- Weekly COVID-19 Vaccination Data Modules
- Annual Survey is not required unless you report UTI/*Cdiff* data.

POCT Update and Training

POC Test Reporting Tool slides are available and can be found here:

Slides - <https://www.cdc.gov/nhsn/pdfs/covid19/lctf/poc-testing-training-508.pdf>

*Video will be available at a later date. We will send communication once available.

Upcoming POCT Training Dates!

Topic: Point of Care Test (POCT) Reporting Tool for COVID-19 - Updates

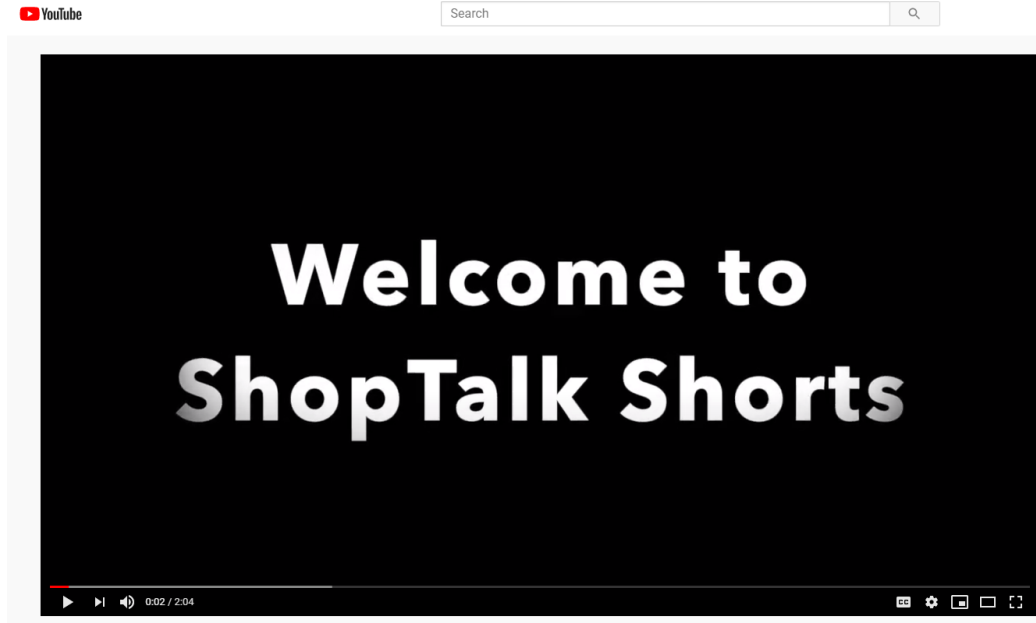
Date: Monday, Feb 22, 2021 10:00 AM – 11:15 AM Eastern Time

Register in advance for this webinar:

https://cdc.zoomgov.com/webinar/register/WN_VbKQlKJdSSqJdKOhdQHvKg

- After registering, you will receive a confirmation email containing information about joining the webinar.

Shop Talk Shorts YouTube Channel



<https://www.youtube.com/playlist?list=PLXWmxni-xNHspWHhLLIrqcLGlzXZPljIF>

Join & Confer Rights to Alliant Quality

Group Name: Alliant Quality-LTC

Group ID: 83378 Joining Password: Alliant20!

NHSN LV1 Home

- Alerts
- COVID-19
- Users
- Facility
- Group**
 - Confer Rights
 - Join**
 - Leave
 - Nominate
- Logout

Memberships

Groups that have access to this facility's data

Confer Rights

Leave Group(s)

Enter ID and Password for this facility to join a new group

Group ID:

Group Joining Password: **Join Group**

Back

Confer Rights-Long Term Care

! Please review the data rights that "LTCF Test Group" is requesting from your facility:
- Verify locations
- Press "accept" button to confer rights or [review current rights before accepting new rights](#)






General

- Facility Information
- COVID-19 View Data
- COVID-19 CSV Data Upload

Accept

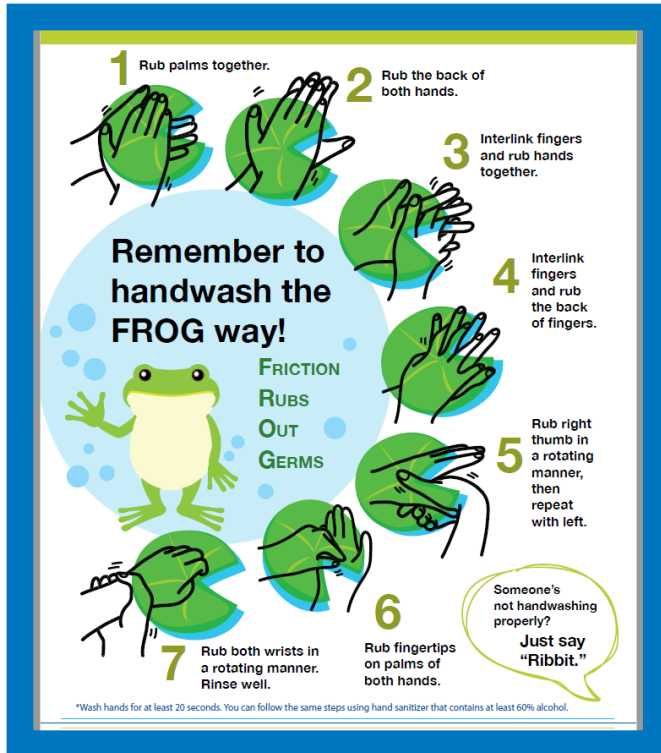
https://www.alliantquality.org/wp-content/uploads/2020/12/TO1_NHSNGroups_12SOW-AHSQIN-QIO-TO1NH-20-391_508.pdf

Have You Completed the CMS Targeted COVID-19 Training?

CMS Long Term Care Journal Volume II – Urinary Incontinence	CMS Targeted COVID-19 Training for Nursing Home Management	
CMS Targeted COVID-19 Training for Frontline Nursing Home Staff	<p>This Targeted COVID-19 Training for Nursing Home Management is intended to provide administrative staff members with best practices for containing and preventing the spread of COVID-19 in nursing homes. This training will aid you in prioritizing resident and staff health during the COVID-19 pandemic.</p>	
CMS Targeted COVID-19 Training for Nursing Home Management		
Community Mental Health Centers Basic Training		
Complaint & Incident Intake for Long Term Care		

<https://qsep.cms.gov/welcome.aspx>

New Hand Hygiene Poster & Badge



<https://www.alliantquality.org/topic/hand-hygiene/>

Mark Your Calendar!



Shop Talk 3rd Thursdays at 2pm ET:

March 18th 2021: <https://bit.ly/3oXl8Hv>

April 15th 2021: <https://bit.ly/39RQmt5>

May 20th 2021: <https://bit.ly/2KD7zy8>

Visit our website for More info:

<https://www.alliantquality.org/topic/shop-talks/>

Questions?

- Please put your questions into the Q & A.



Thank You for Your Time!

Contact the Patient Safety Team



Marilee H. Johnson, MBA, MT (ASCP)

Technical Advisor, Infection Prevention

Marilee.Johnson@AlliantHealth.org | 919.695.8331



Amy Ward, MS, BSN, RN, CIC
Infection Prevention Specialist

Amy.Ward@AlliantHealth.org | 678.527.3653



Melody Brown, MSM

Aim Manager, Patient Safety

Melody.Brown@AlliantHealth.org | 678.527.3466

Making Health Care Better Together

ALABAMA • FLORIDA • GEORGIA • KENTUCKY • LOUISIANA • NORTH CAROLINA • TENNESSEE



@AlliantQualityOrg



Alliant Quality



@AlliantQuality



Alliant Quality

This material was prepared by Alliant Quality, the quality improvement group of Alliant Health Solutions (AHS), the Medicare Quality Innovation Network - Quality Improvement Organization for Alabama, Florida, Georgia, Kentucky, Louisiana, North Carolina, and Tennessee, under contract with the Centers for Medicare & Medicaid Services (CMS), an agency of the U.S. Department of Health and Human Services. The contents presented do not necessarily reflect CMS policy. Publication No. 12SOW-AHSQIN-QIO-TO1NH-21-493



Quality Improvement Organizations

Sharing Knowledge. Improving Health Care.
CENTERS FOR MEDICARE & MEDICAID SERVICES

ALLIANT
QUALITY

The Quality Improvement Services Group of
ALLIANT HEALTH SOLUTIONS