Revised New Jersey Requirements for 2011 MRSA Reporting Using the NHSN MDRO/CDI Module

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Division of Healthcare Quality Promotion
NCEZID, CDC
Outline

1) New 2011 MRSA reporting requirements
2) Adding locations in NHSN
3) New method for Conferring Rights
4) Completion of a Monthly Reporting Plan
5) Entry of blood specimen LabID Events
6) Entry of monthly denominator data for LabID reporting
7) Entry of monthly Admission AST Adherence data
New 2011 MRSA Reporting Requirements for New Jersey
Important Information

1) The New Jersey MRSA legislation (N.J.S.A. 26:2H-12.35 et seq.) has not been changed

2) The reporting elements required to meet this legislative mandate have been updated by the NJ DHSS

3) The new requirements will begin January 2011

4) The reasons for these updated reporting requirements include: better standardization of reporting definitions and methods and NHSN system guidance and evaluation of data entry
2011 MRSA Reporting

- Organism = MRSA

- Data Collection:
  - CDC NHSN - MDRO/CDI Module

- Required Facilities and Locations:
  - All acute care hospitals
  - All inpatient locations facility-wide for LabID Events
  - Locations specified by the facility for AST

- Required Data:
  - CO and HO LabID Event blood specimens at the facility-wide level
  - Adherence to AST in chosen locations
What Will be Different?

- **Specific Reporting for LabID Events:**
  - Must monitor blood specimen LabID Events at the **facility-wide** inpatient level
  - Must report all CO and HO blood specimen LabID Events

- **Overall MRSA Reporting:**
  - Must add this reporting info to the **Monthly Reporting Plan**
  - Data entry for LabID Event and AST Adherence reporting will be “in-plan” according to the module protocol
  - Business rules and edit checks will help guide appropriate and accurate reporting
How Will this Help?

- Standardized definitions for what is reported as HO and CO
- No required calculating of days between admission and specimen collection
- Only one facility-wide Total Patient Days and Total Admissions count per month for required LabID Events
- Efficient and effective transmission prevention efforts are dependent on knowing:
  - CO-Prevalence information (exposure pressure/burden)
  - MRSA exposure and infection burden throughout a facility (not only in ICUs)
- Reporting “in-plan” allows for faster and more accurate data entry:
  - System will guide a user to required fields
  - System will release alerts and reminders when data are missing
Adding Locations into NHSN
Why do I Need to Add Locations?

- LabID Event reporting of MRSA-positive blood specimens is now required at the facility-wide inpatient level (FacWideIN).
- Each LabID Event (numerator) is reported according to the patient’s location when the specimen is collected.
- This means that any inpatient unit could potentially house a patient who has an MRSA blood specimen LabID Event.
- Two choices available to ensure that a location is available for reporting when a LabID Event is identified:
  - Add all inpatient locations before reporting begins in 2011.
  - Add each inpatient location as it is identified as a location where a qualifying LabID Event was collected from a patient.
Logged into Pleasant Valley Hospital (ID 10312) as DSIEVERT. Facility Pleasant Valley Hospital (ID 10312) is following the PS component.

NHSN Patient Safety Component Home Page

Use the Navigation bar on the left to access the features of the application.

Assurance of Confidentiality: The information obtained in this surveillance system that would permit identification of any individual or institution is collected with a guarantee that it will be held in strict confidence, will be used only for the purposes stated, and will not otherwise be disclosed or released without the consent of the individual, or the institution in accordance with Sections 304, 306 and 308(d) of the Public Health Service Act (42 USC 242b, 242k, and 242m(d)).

NHSN maintenance may occur nightly between 12am and 6am Eastern time.

Get Adobe Acrobat Reader for PDF files
Locations Page: Specify Location Info

Logged into Pleasant Valley Hospital (ID 10312) as DSIEVERT. Facility Pleasant Valley Hospital (ID 10312) is following the PS component.

**Locations**

**HELP Instructions**

- To **Add** a record, fill in the form with the required fields and any desired optional values. Then click on the **Add** button.
- To **Find** a record, click on the **Find** button. One of more fields can be filled in to restrict the search to those values.
- To **Edit** a record, perform a **Find** on the desired record. Click on the desired record to fill in its values into the form and edit the values. To save the changes, click on the **Save** button.
- To **Delete** one or more records, perform a **Find** on the desired record(s). Check the corresponding box(es), then click on the **Delete** button.
- Press the **Clear** button to start over with a new form.

Mandatory fields to "Add" or "Edit" a record marked with *

```
Your Code*: 5W
Your Label*: MED WARD
CDC Location Description*: Inpatient Medical Ward
Status*: Active
Bed Size*: 22
```

A bed size greater than zero is required for most inpatient locations.
Find Locations: All or Specific Search

Locations

HELP Instructions

- To Add a record, fill in the form with the required fields and any desired optional values. Then click on the Add button.
- To Find a record, click on the Find button. One of more fields can be filled in to restrict the search to those values.
- To Edit a record, perform a Find on the desired record. Click on the desired record to fill in its values into the form and edit the values. To save the changes, click on the Save button.
- To Delete one or more records, perform a Find on the desired record(s). Check the corresponding box(es), then click on the Delete button.
- Press the Clear button to start over with a new form.

Mandatory fields to "Add" or "Edit" a record marked with *

- Your Code
- Your Label
- CDC Location Description: Inpatient Medical Ward
- Status: Active
- Bed Size: 0

Location Table

<table>
<thead>
<tr>
<th>Status</th>
<th>Your Code</th>
<th>Your Label</th>
<th>CDC Description</th>
<th>CDC Code</th>
<th>Bed Size</th>
</tr>
</thead>
<tbody>
<tr>
<td>Active</td>
<td>5W</td>
<td>MED WARD</td>
<td>Inpatient Medical Ward</td>
<td>IN:ACUTE:WARD:M</td>
<td>22</td>
</tr>
<tr>
<td>Active</td>
<td>INMEDWARD</td>
<td>IN:ACUTE:WARD:M</td>
<td>Inpatient Medical Ward</td>
<td></td>
<td>42</td>
</tr>
</tbody>
</table>
Conferring Rights
(new method in 2011)
How will Confer Rights be Different?

- Confer Rights will be different for NJ facilities in two ways:
  - The updated NJ reporting requirements include different data to be shared
    - Facilities will be reporting all CO and HO MRSA blood specimen LabID Events
    - Facilities will be reporting at the facility-wide inpatient level (FacWideIN)
  - Responsibility for template set-up is transitioning to the Group
    - The NJ State HAI Group will set up the template with all details of the specific data that need to be shared
    - For some sharing, facilities may need to specify their locations (these choices will be highlighted clearly)
    - Facilities will “Accept” the template specified by the Group
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nj state hai group: confer rights

memberships

groups that have access to this facility's data

nj state hai group

step #1

confer rights

step #2

leave group(s)

step #3

message from webpage

the decision to confer rights to a group is a decision made by a facility administrator. existence of a group organization in nhsn should not be construed as a recommendation from cdc to join the group. cdc cannot be held accountable for how group users use data access granted to the group by a facility.

ok
Pre-Filled: General Options and Surveys

Confer Rights-Patient Safety

Please select the rights that group NJ State HAI Group should have to facility 'Pleasant Valley Hospital'

View Options
- With All Identifiers
- Without Any Identifiers
- With Specified Identifiers

- Gender
- DOB

Monthly Reporting Plan
- Data Analysis
- Facility Information

Survey Type
- Facility Survey Data
Specifications will match info currently being shared for the NJ HAI Mandate. Details not covered here!
Pre-Filled: LabID Blood FacWideIN Requirements

### MDRO/CDAD Events

<table>
<thead>
<tr>
<th>Plan</th>
<th>MonthYear</th>
<th>Location Type</th>
<th>Location</th>
</tr>
</thead>
<tbody>
<tr>
<td>Both</td>
<td>1 2011 to</td>
<td>FACWIDE</td>
<td>FACWIDEIN - FacWideIN</td>
</tr>
</tbody>
</table>

**Specific Organism Type:**
- ACINE
- CDIF
- KLEB
- MRSA
- MSSA
- VRE

**Event Type:**
- LABIDBid - Laboratory-identified MDRO or CDAD Event - Blood Specimen Only

### MDRO/CDAD Summary Data (Denominators)

<table>
<thead>
<tr>
<th>Plan</th>
<th>Month</th>
<th>Year</th>
<th>Location Type</th>
<th>Location</th>
</tr>
</thead>
<tbody>
<tr>
<td>Both</td>
<td>1 2011</td>
<td>FACWIDE</td>
<td>FACWIDEIN - FacWideIN</td>
<td></td>
</tr>
</tbody>
</table>

- **Admissions**
- **Patient Days**
- C. difficile Admissions
- C. difficile Patient Days
- C. difficile Encounters
Pre-Filled: Location Specific Admission AST Requirements

<table>
<thead>
<tr>
<th>Location Type Location</th>
<th>Other Location Requirements</th>
</tr>
</thead>
<tbody>
<tr>
<td>(ALL)</td>
<td>Include all locations where Adm AST is conducted</td>
</tr>
</tbody>
</table>

Process Measures:
- Hand Hygiene
- Gown and Gloves
- MRSA

Your Locations:
- 5W
- 6E
- 7N
Facility must click “Accept” for data sharing to occur with the Group
Creating a Monthly Reporting Plan
Logged into Pleasant Valley Hospital (ID 10312) as DSIEVERT. Facility Pleasant Valley Hospital (ID 10312) is following the PS component.

**NHSN Patient Safety Component Home Page**

Use the Navigation bar on the left to access the features of the application.

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**NHSN maintenance may occur nightly between 12am and 6am Eastern time.**
Choose: Month and Year

Add Monthly Reporting Plan

Mandatory fields marked with *

Facility ID*: Pleasant Valley Hospital (ID 10312)
Month*: January
Year*: 2011

No NHSN Patient Safety Modules Followed this Month

Device-Associated Module
Locations

CLA BSI DE VAP CAUTI CLIP
For HAI Mandated Reporting:
“Copy from Previous Month”

<table>
<thead>
<tr>
<th>Mandatory fields marked with *</th>
</tr>
</thead>
<tbody>
<tr>
<td>Facility ID*: Pleasant Valley Hospital (ID 10312)</td>
</tr>
<tr>
<td>Month*: January</td>
</tr>
<tr>
<td>Year*: 2011</td>
</tr>
</tbody>
</table>

- No NHSN Patient Safety Modules Followed this Month

**Device-Associated Module**

<table>
<thead>
<tr>
<th>Locations</th>
</tr>
</thead>
<tbody>
<tr>
<td>CLA BSI DE VAP CAUTI CLIP</td>
</tr>
</tbody>
</table>

- Add Row
- Clear All Rows
- Copy from Previous Month

**Procedure-Associated Module**

<table>
<thead>
<tr>
<th>Procedures</th>
<th>SSI</th>
<th>Post-procedure PNEU</th>
</tr>
</thead>
</table>

- Add Row
- Clear All Rows
- Copy from Previous Month
For MRSA Mandated Reporting: FacWideIN – MRSA – LabID Blood Only

NOTE: There are NO AST settings required for FacWideIN
For MRSA Mandated Reporting:
Choose Locations – MRSA – ADM – ALL or NHx

**NOTE**: There are NO LabID Event settings required for AST units.
Facility must click “Save” for Monthly Reporting Plan to be active
For All Months After January 2011:
Use “Copy from Previous Month” for All Sections
Entry of Blood Specimen
LabID Events
What are the Rules for Entering MRSA Blood Specimen LabID Events FacWideIN?

- MRSA-positive blood specimens **MUST** be monitored throughout all inpatient locations within a facility for FacWideIN reporting.

- An MRSA blood specimen LabID Event **MUST** be entered whether it is community-onset (CO) or healthcare facility-onset (HO).

- For a patient in a specific location, a new MRSA blood specimen qualifies as a LabID Event after 14 days or greater from a prior one:
  - The 14-day rule not only includes the 14-days after a previously reported blood LabID Event, but there must also be 14-days since the last MRSA-positive result reported from the lab for the patient in the specific location.

- LabID Events **never** include results from Active Surveillance Testing.
NHSN will Categorize your MRSA Blood Specimen LabID Events as CO or HO

**Community-Onset (CO):** LabID Event specimen collected as an inpatient ≤ 3 days after admission to the facility (i.e., days 1, 2, or 3 of admission to the facility).

- Prevalence metrics will include the CO blood LabID Events

**Healthcare Facility-Onset (HO):** LabID Event specimen collected > 3 days after admission to the facility (i.e., on or after day 4 of admission to the facility).

- Incidence metrics will include the HO blood LabID Events
NHSN Patient Safety Component Home Page

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Add Patient Information

Logged into Pleasant Valley Hospital (ID 10312) as DSIEVERT. Facility Pleasant Valley Hospital (ID 10312) is following the PS component.

Add Event

Mandatory fields marked with *
Fields required for record completion marked with **
Fields required when in Plan marked with >

Event #: 24941

Patient Information

Facility ID*: Pleasant Valley Hospital (ID 10312)  
Patient ID*: DS3636  

Social Security #:  
Last Name:  
Middle Name:  
Gender*: F - Female

Secondary ID:  
First Name:  

Date of Birth*: 05/16/1943

Ethnicity:  
Race: American Indian/Alaska Native
Black or African American

White
Add Event Information

Event Information

**Event Type**: LABID - Laboratory-identified MDRO or CDAD Event

- **Date Specimen Collected**: 01/14/2011
- **Specific Organism Type**: MRSA - MRSA
- **Outpatient**: N - No
- **Specimen Body Site/Source**: CARD - Cardiovascular/Circulatory/Lymphatics
- **Specimen Source**: BLDSPC - Blood specimen
- **Date Admitted to Facility**: 01/09/2011
- **Location**: INMSWARD - IN:ACUTE:WARD:MS
- **Date Admitted to Location**: 01/09/2011
- **Documented prior evidence of previous infection or colonization with this specific organism type from a previously reported LabID Event**: N - No
- **Has patient been discharged from your facility in the past 3 months**: N - No
Remember to click “Save” at bottom of LabID Event entry screen
Entry of Monthly Denominator Data for FacWideIN LabID Event Reporting
NHSN Patient Safety Component Home Page

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Add Patient Safety Summary Data

Summary Data Type: MDRO and CDAD Prevention Process and Outcome Measures Monthly Monitoring
Enter Location Code = FacWideIN plus Month and Year

MDRO and CDAD Prevention Process and Outcome Measures
Monthly Monitoring

Mandatory fields marked with *

**Facility ID**: 10312 (Pleasant Valley Hospital)

**Location Code**: FACWIDEIN - FacWideIN

**Month**: January

**Year**: 2011

<table>
<thead>
<tr>
<th>Specific Organism Type</th>
<th>MRSA</th>
<th>VRE</th>
<th>MDR-Klebsiella</th>
<th>MDR-Acinetobacter</th>
<th>C. difficile</th>
</tr>
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<tr>
<td>Infection Surveillance</td>
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<td></td>
<td></td>
</tr>
<tr>
<td>LabID Event (All)</td>
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<tr>
<td>LabID Event (Blood specimens only)</td>
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</tr>
</tbody>
</table>
Enter Facility-Wide Inpatient Counts
Total Patient Days and Total Admissions

Facility ID*: 10312 (Pleasant Valley Hospital)
Location Code*: FACWIDEIN - FacWideIN
Month*: January
Year*: 2011

Setting: Inpatient  Total Patient Days*: 1235  Total Admissions*: 78

MDRO & CDAD Infection Surveillance or LabID Event Reporting

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<td>*X</td>
<td></td>
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</tr>
</tbody>
</table>
MRSA / LabID Event (blood specimens only) box is Auto-filled according to Monthly Reporting Plan.

MDRO and CDAD Prevention Process and Outcome Measures
Monthly Monitoring

Mandatory fields marked with *

Facility ID*: 10312 (Pleasant Valley Hospital)
Location Code*: FACWIDEIN - FacWideIN
Month*: January
Year*: 2011

General
Setting: Inpatient Total Patient Days*: 1235 Total Admissions*: 78
Setting: Outpatient (or Emergency Room) Total Encounters: 

MDRO & CDAD Infection Surveillance or LabID Event Reporting

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<td></td>
</tr>
</tbody>
</table>

*Auto-filled*
Remember to click “Save” at bottom of Summary Data entry screen
Entry of Monthly Admission AST Adherence Data by Specified Locations
What are the Rules for Entering MRSA Admission AST Adherence Data?

- These are aggregate counts of location specific MRSA Admission AST and are entered at the end of each month.
- Admission AST must be performed within the first three days upon patient admission to a specific unit (Admit=Day 1, 2, 3).
- The facility must conduct MRSA Admission AST in at least one specific high-risk location, and up to as many as the facility chooses.
- The facility should share data from all MRSA Admission AST locations with the NJ State HAI Group.
- The facility must decide for each specific location whether to conduct Admission AST on ALL patients admitted to the unit, or only on NHx patients admitted to the unit.
Definitions for Monitoring Adherence to MRSA Admission AST

- **AST Eligible Patients**: (facility chooses one of the following)
  - **All**: All patients admitted to the selected location regardless of history of MRSA infection or colonization
  - **NHx**: Only patients admitted to the selected location with NO documented positive MRSA infection or colonization during the previous 12 months

- **Counts for Admission AST Eligible**:
  - For **All** - total # of patients admitted to the unit in the month
  - For **NHx** – # of patients admitted to the unit in the month with no history of MRSA in previous 12 months

- **Counts for Admission AST Performed**: # of patients who received MRSA AST in the first three days of admission to the unit in the month
NHSN - National Healthcare Safety Network (ISD-CLFT-NHSN1)

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Choose Summary Data Type > Continue

Add Patient Safety Summary Data

Summary Data Type: MDRO and CDAD Prevention Process and Outcome Measures Monthly Monitoring

Continue  Back
Enter Location Code where Conducting AST plus Month and Year

Facility ID: 110312 (Pleasant Valley Hospital)
Location Code: INMEDCC - IN:ACUTE:CC:M
Month: January
Year: 2011
Enter Specific Location Counts
Total Patient Days and Total Admissions

Mandatory fields marked with *

- **Facility ID**: 10312 (Pleasant Valley Hospital)
- **Location Code**: INMEDCC - IN:ACUTE:CC:M
- **Month**: January
- **Year**: 2011

**Setting**: Inpatient  **Total Patient Days**: 134  **Total Admissions**: 19

### MDRO & CDAD Infection Surveillance or LabID Event Reporting

<table>
<thead>
<tr>
<th>Specific Organism Type</th>
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<td></td>
<td></td>
</tr>
</tbody>
</table>

### Process Measures

<table>
<thead>
<tr>
<th>Hand Hygiene</th>
<th>Indicated:</th>
<th>Gown and Gloves</th>
<th>Indicated:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Performed:</td>
<td></td>
<td>Used:</td>
<td></td>
</tr>
</tbody>
</table>

### Active Surveillance Testing (AST)

- **Active Surveillance Testing**

### Timing of AST

- **AST Eligible Patients**: ALL-ALL

### Admission AST

- **Performed**:      
- **Eligible**:       

### Discharge/Transfer AST

- **Performed**:      
- **Eligible**:       

### Outcome Measures

#### Prevalent Cases

- **AST/Clinical Positive**
- **Known positive**

#### Incident Cases

- **AST/Clinical Positive**
Enter Counts for Admission AST Eligible and Performed
MRSA and AST Timing and Eligibility boxes are Auto-filled according to Monthly Reporting Plan.
Remember to click “Save” at bottom of Summary Data entry screen
Need Help?

Contact: Rebecca Greeley
Rebecca.Greeley@doh.state.nj.us
Phone: 609-826-5964

or

E-mail: NHSN@cdc.gov
Questions?
Thank You!