

CHAPTER 5: GUIDANCE FOR THE REPORTING OF DATA ON CAUTI AND CLABSI

5.1 Overview for Data Reporting on CAUTI and CLABSI Measures

The CMS Prospective Payment System (PPS) FY 2012 rule includes a provision that LTCHs are to report Catheter-Associated Urinary Tract Infection (CAUTI) and Central Line-Associated Bloodstream Infection (CLABSI) under the LTCHQR Program (Federal Register/Vol. 76, No. 160, August 18, 2011). The Centers for Disease Control and Prevention's (CDC's) National Healthcare Safety Network (NHSN) was finalized as the method of data reporting and submission for CAUTI and CLABSI measures. Note that LTCHs are called Long Term Acute Care Hospitals or LTACHs in the NHSN. Each LTCH must submit data for these measures on all patients from all inpatient locations, regardless of payer.

For reporting of data on the CAUTI and CLABSI measures under the LTCHQR Program, LTCHs must adhere to the definitions and reporting requirements for CAUTIs and CLABSIs as specified in the CDC's NHSN Patient Safety Component Manual available at http://www.cdc.gov/nhsn/TOC_PSCManual.html. The specific chapters of the CDC's NHSN Patient Safety Component Manual for CAUTI and CLABSI reporting can be found at: <http://www.cdc.gov/nhsn/PDFs/pscManual/7pscCAUTICurrent.pdf> http://www.cdc.gov/nhsn/PDFs/pscManual/4PSC_CLABSCurrent.pdf.

These include reporting of denominator data (patient days, urinary catheter days, and central line days), as well as CAUTIs and CLABSIs, to NHSN each month. Monthly denominator data must be reported on CAUTIs and CLABSIs, regardless of whether an infection occurred in the LTCH. Monthly reporting plans must be created or updated to include CAUTI and CLABSI surveillance in all locations that require reporting (i.e., surveillance must be "in-plan"). All required data fields in the numerator and the denominator, including the "no events" field for any month during which no CAUTIs or CLABSIs were identified, must be submitted to NHSN.

CDC/NHSN requires that data be submitted on a monthly basis and strongly encourages healthcare facilities to enter each month's data within 30 days of the end of the month in which it is collected (for example, data for October should be entered by November 30) so it has the greatest impact on infection prevention activities. However, for purposes of fulfilling CMS quality measurement reporting requirements for FY2014 payment update determination, each facility's data for CAUTI measure and CLABSI measure must be entered into NHSN no later than 4 ½ months after the end of the reporting quarter. In other words, for the FY2014 payment update determination, data for the quarter starting October 1, 2012 and ending on December 31, 2012, must be entered into NHSN by May 15, 2013 for data to be shared with CMS. The CDC submits the data to CMS as required by CMS, according to the facility's monthly reporting plan, on behalf of the facility. LTCHs can also review these data. Data submitted by the LTCH to the CDC NHSN after May 15, 2013 for the October 1-December 31, 2012 quarter will not be provided to CMS.

CDC has prepared for CAUTI and CLABSI data submission from LTCHs by developing a new annual facility survey that is specific to LTCHs, identifying and enrolling new facilities that were previously defined as single locations within acute-care facility types, creating new locations that are unique to LTCHs, and removing all acute-care facility inpatient location choices from the LTCH facility types. For more information including operational guidance and updates on the reporting of CAUTIs and CLABSI under the LTCHQR Program, please check CDC's Web site at: <http://www.cdc.gov/nhsn/LTACH/ltc-welcome.html>.

To report CAUTI and CLABSI data for the LTCHQR Program through CDC's NHSN, the LTCH must be enrolled in the NHSN. Enrollment steps are outlined in the *NHSN Facility Administrator Enrollment Guide* available at: <http://www.cdc.gov/nhsn/PDFs/FacilityAdminEnrollmentGuideCurrent.pdf>. The information in the rest of this chapter supplements information available to the LTCHs through the *NHSN Facility Administrator Enrollment Guide*.

If your LTCH is already enrolled as an LTCH in the NHSN, please do the following:

- 1) Confirm that your CMS Certification Number (CCN) is correctly entered on the Facility Information screen.
- 2) Take the NHSN trainings for CAUTI and CLABSI if you haven't already.
- 3) Check your location mappings prior to reporting.

If you need assistance with these steps, please contact the CDC NHSN Helpdesk at nhsn@cdc.gov.

If your LTCH is not enrolled in the NHSN as a separate facility, and instead is currently submitting data as part of an acute-care hospital, it will have to be enrolled in NHSN as a separate facility with a unique orgID that is identified as an LTCH. CDC staff sent a letter to all LTCHs currently listed as locations within an acute-care hospital advising them to enroll as a separate facility in order to meet the CMS LTCHQR Program requirements. If you have questions or need assistance with this process, or if you need assistance with transferring data that was previously entered into a hospital location that was mapped as a LTAC Specialty Care Area to your newly-enrolled LTCH, please contact the CDC NHSN Helpdesk at nhsn@cdc.gov.

5.2 Before LTCH begins the enrollment process

- Consult technical and legal requirements for the NHSN at <http://www.cdc.gov/nhsn/enroll.html>.
- Appoint a person from your facility as the NHSN Facility Administrator to complete the NHSN enrollment process. The person in charge of Infection Prevention/Control is an appropriate choice. This person will be responsible for enrolling the facility in NHSN and will serve as the contact person for NHSN.
- To complete the NHSN enrollment process, you will need your facility's CCN or relevant identifier code.
- Urinary tract infection diagnostic criteria can be found here, starting on page 7-1: <http://www.cdc.gov/nhsn/PDFs/pscManual/7pscCAUTICurrent.pdf>

- Primary bloodstream infection diagnostic criteria can be found here, starting on page 4-1: http://www.cdc.gov/nhsn/PDFs/pscManual/4PSC_CLABSCurrent.pdf
- Note that after the facility is enrolled in NHSN, the NHSN Facility Administrator can add other users to assist with the CAUTI and CLABSI surveillance and reporting activities.
- Complete the required NHSN trainings that are available on the NHSN Web site at <http://www.cdc.gov/nhsn/training/>.

5.3 Basic Steps to NHSN Enrollment and Data Submission

1. Review the *NHSN Facility Administrator Enrollment Guide*:
<http://www.cdc.gov/nhsn/PDFs/FacilityAdminEnrollmentGuideCurrent.pdf>.
2. Complete the following sections of the training available at <http://www.cdc.gov/nhsn/training/>:
 - [NHSN Enrollment & Facility Set-up](#) (PDF Slide Sets)
 - [Overview of the Patient Safety Component, Device-associated module](#) (PDF Slide Set)
 - [Data Entry, Surveillance, Analysis, Data Entry, Import, and Customization](#) (PDF Slide Set)
 - [Introduction to the Device-associated Module Training Course with Quiz](#)
 - [Catheter-associated Urinary Tract Infection \(CAUTI\) Training Course with Quiz](#)
 - [Central Line-associated Bloodstream Infections \(CLABSI\) Training Course with Quiz](#)
3. Register for the NHSN, which includes accepting the NHSN Rules of Behavior and providing your contact information at <http://nhsn.cdc.gov/RegistrationForm/index.jsp>. If you use an identifier other than your CCN during the enrollment process, you will have to enter your CCN on NHSN's Facility Information screen after your facility is enrolled to ensure that its CAUTI and CLABSI data are shared with CMS.
4. Apply for and install a digital certificate on your computer so you can access NHSN via CDC's Secure Data Network.
5. Electronically submit your facility's enrollment forms, including a Facility Contact form and a Facility Survey. It is recommended that you print and complete the paper forms and then enter the information online.
6. Print out and complete the *Agreement to Participate and Consent Form* that will be emailed to you. The form must be signed by a senior executive at your facility. The LTCH must complete and sign this form and fax it to the CDC at (404)-929-0131 within sixty (60) days of receiving it.
7. Begin reporting CAUTI and CLABSI data into the NHSN web-based application. Paper forms that may be useful for data collection are available at <http://www.cdc.gov/nhsn/forms/Patient-Safety-forms.html>.

8. The LTCH location(s), which need to be mapped in NHSN in advance by a facility user, will need to be added to the monthly reporting plan under the device-associated module section for each month you plan on submitting CAUTI and CLABSI data to CMS.
 - a. **After adding the location, please remember to check the CAUTI box and the CLABSI box to ensure that the data will be appropriately sent to CMS.**
9. Fill out a Urinary Tract Infection event form for each CAUTI identified in the LTCH location(s). The form itself can be found here: <http://www.cdc.gov/nhsn/forms/Patient-Safety-forms.html#cauti>
 - a. Instructions for filling out the form can be found here:
http://www.cdc.gov/nhsn/forms/instr/57_114.pdf
10. Fill out a Primary Bloodstream Infection event form for each CLABSI identified in the LTCH location(s). The form itself can be found here:
<http://www.cdc.gov/nhsn/forms/Patient-Safety-forms.html#cv>
 - a. Instructions for filling out the form can be found here:
http://www.cdc.gov/nhsn/forms/instr/57_108.pdf
11. Complete a monthly summary form. The number of indwelling catheter days for the location must be reported, even if that number was zero. The number of central line days for the location must be reported, even if that number was zero.
 - a. To report data, use the ICU/Other Denominator form found here:
http://www.cdc.gov/nhsn/forms/57.118_DenominatorICU_BLANK.pdf
 - b. Instructions for filling out the form can be found here:
http://www.cdc.gov/nhsn/PDFs/pscManual/14pscForm_Instructions_current.pdf
 - c. If there were no CAUTI events identified for the month, the Report No Events: CAUTI box must be checked on the Denominator for Intensive Care Unit/Other Locations screen within the NHSN application. If there were no CLABSI events identified for the month, the Report No Events: CLABSI box must be checked on the Denominator for Intensive Care Unit/Other Locations screen with the NHSN application. See pg. 14-22 for guidance on this
http://www.cdc.gov/nhsn/PDFs/pscManual/14pscForm_Instructions_current.pdf

5.4 Additional Tips and Hints

- Follow the step-by-step instructions in the *Facility Administrator Enrollment Guide*, found here: <http://www.cdc.gov/nhsn/PDFs/FacilityAdminEnrollmentGuideCurrent.pdf>. **You must complete the steps in order.**
- Allow several days for this process, because there are several steps that require you to wait for information from the CDC.
- Use Internet Explorer, which is the only browser that supports the NHSN.
- Use the buttons and arrows on the NHSN Web pages instead of the browser's "back" button.

- Use your professional email address, not your personal email address, and be consistent. Use the same one for all fields requiring an email address. The email address you use to apply for your digital certificate must match the one you used to register in NHSN.
- Locate your facility's CCN or relevant identifier code.
- Remember the challenge phrase (password) you created when you applied for your digital certificate; that phrase will be required each time you access NHSN.
- Facilities with separate CMS Certification Numbers (CCNs) must register as separate facilities, and each facility will need to identify and set-up their location types.
- You may join or organize a group that reports to NHSN collectively, but first you must enroll with NHSN. Once enrolled, the Group Administrator should send an invitation and password for the group. Your facility must report data individually, but the group will be able to see data for which you confer rights.
- It is strongly recommended that a unique organization ID be created for separate facilities at separate locations. If this is not done, the ability to clearly track and analyze infections by specific locations is compromised and effectively targeting prevention efforts becomes difficult.
- NHSN is considering needs for further types of locations for LTCHs. Please send information about locations that do not fit well in the available categories to NHSN@cdc.gov. Location descriptions are available at: <http://www.cdc.gov/nhsn/PDFs/master-locations-descriptions.pdf>
- If a single unit has more than one type of patient population, report the location according to which population comprises 80% or more of the unit. For example, if 80% of the patients in the unit are pediatric and 20% are adult, the location would be reported as pediatric. If no patient population in the unit fulfills this "80% rule", please contact the NHSN at: NHSN@cdc.gov for guidance.
- Frequently asked questions about the NHSN enrollment process are available at http://www.cdc.gov/nhsn/FAQ_enrollment.html.
- Once a patient is entered into the NHSN, new events can be added for that patient using the Patient Find feature, provided the same patient identifier is used.
- Be sure that all events entered into NHSN are completed. Although an event may be saved without "completing" the event, only data for completed events will be sent by CDC to CMS.
- Facilities have 4.5 months following the end of a quarter before NHSN freezes the data and the CDC sends it to CMS. LTCH patients may exceed this freeze date. Users should enter the patient's status at the time of data entry, and then update this variable if AND when the patient's status changes (e.g. the patient dies). This will ensure all the data is marked as complete at the time of the freeze date and can be sent to CMS.
- You do not need to confer rights to CMS. The CDC submits data on behalf of the LTCH.
- Remember, you are only required to report what is in your NHSN monthly reporting plan
- If your facility's monthly reporting plan requires reporting of both device-associated infections (e.g., CAUTI and CLABSI) and Lab ID events, then both events will need to be entered separately.
- Until sufficient LTCH baseline data has been collected, rates will be generated for CAUTI and CLABSI rather than Standardized Infection Ratios. Rates will not be risk adjusted.

- Notes on reporting CAUTI
 - Only patients who meet the NHSN's current CAUTI criteria should be reported. Those that do not meet this criteria, do not need to be reported
 - If a patient has more than one CAUTI during his or her stay, a second CAUTI would be reportable only if there is appearance/reappearance of new symptoms and a change in organisms. This would suggest the acquisition of a second infection. If resolution of the first infection is not complete (i.e. symptoms of the infection remain) but a new organism is cultured from the urine, it is considered and extension of the first CAUTI and the new pathogen should be added to the previously reported CAUTI event. Likewise, if the patient had not completed his treatment for the original CAUTI event, and a subsequent urine culture with the same organism is collected this is not reported as a separate event, as it is considered a failure of treatment.
 - There is no exclusion for UTIs that are clinically believed to be related to an infection at another site (e.g. a wound). It must be reported if it otherwise meets the criteria of a reportable CAUTI and cannot be identified as secondary to another site of infection. Note that NHSN uses surveillance definitions, which may, at times, vary from clinical definitions.
- Notes on reporting CLABSI
 - A midline is not considered a central line, and would not be counted.
 - You may want to work with your Information Services staff to develop a list of patients with central lines for ease of data retrieval.
- If a patient is transferred from another facility or location, and the onset of the infection is within 48 hours of admission to your facility, the infection is attributed to the transferring location. If the patient was not transferred, or there are no symptoms of infection upon admission, the infection is attributed to the admitting location. Infections attributed to another facility or location do not need to be entered into NHSN by the admitting facility.
- While not required, the CDC strongly recommends sharing information about hospital acquired infections identified in transferred patients to ensure the accuracy of data reported from all facilities.
- Frequently asked questions about the NHSN in general are located at http://www.cdc.gov/nhsn/FAQ_general.html.
- Direct any questions and/or comments **about the definitions, measure specifications, or the process of reporting and submitting data for CAUTI and CLABSI measures via NHSN for the LTCHQR Program** to the CDC NHSN Helpdesk at nhsn@cdc.gov. Each message will be forwarded to the appropriate person and a response will be sent to you.
- All other questions and/or comments about the CAUTI and CLABSI measures for the LTCHQR Program should be emailed to LTCHQualityQuestions@cms.hhs.gov.