

How to Upload Healthcare-Associated Infection Data into the Hospital Quality Improvement Platform

Background:

To explore your hospital’s healthcare-associated infections (HAIs) performance, you just need to join HQI’s [National Healthcare Safety Network](#) (NHSN) group so we can import your hospital’s HAI data into the Hospital Quality Improvement Platform. This step takes about 10 minutes, only needs to be completed one time for the quarterly data uploads to occur automatically moving forward, and does not involve concerns about Protected Health Information (PHI) because the requested data are deidentified.

Your hospital is probably already a member of NHSN for purposes of providing data for various Centers for Medicare and Medicaid Services (CMS) [Quality Programs](#) (e.g., the [Hospital Inpatient Quality Reporting Program](#)). By joining our group you will be able to compare your quarterly standardized infection ratios (SIRs) for the following HAIs over time to peer hospitals and statewide or national benchmarks:

1. Central line-associated bloodstream infection (CLABSI)
2. Catheter-associated urinary tract infection (CAUTI)
3. Ventilator-associated events (VAE) total
4. Infection-related Ventilator-Associated Complications (IVAC) Plus
5. *Clostridium difficile* Infection (CDI) Laboratory-Identified Events
6. Methicillin-resistant *Staphylococcus aureus* (MRSA) Bacteremia Laboratory-Identified Events
7. Surgical site infection (SSI) – up to 39 different procedures

Additionally, the specific HAIs used in CMS’ [Hospital Acquired Condition Reduction Program](#) (HACRP) will be uploaded into the platform for purposes of estimating your hospital’s likely performance for this program. As such, HQI pulls NHSN data following the [Reporting Requirements and Deadlines in NHSN per CMS Current & Proposed Rules for Acute Care Facilities that participate in CMS Hospital IQR Program](#):

Infection Type	NHSN	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
CLABSI, CAUTI, CDI, MRSA, SSI, VAE/IVAC	Report period	Jan 1–Mar 31			Apr 1–Jun 30			Jul 1–Sep 30			Oct 1–Dec 31		
	Due date	Aug 15 of the same year			Nov 15 of the same year			Feb 15 of the following year			May 15 of the following year		

The instructions in this document tell you how to join HQI’s NHSN group so your hospital’s data will be uploaded into the Hospital Quality Improvement Platform and you can then take advantage of the platform’s various HAI-based analytics.

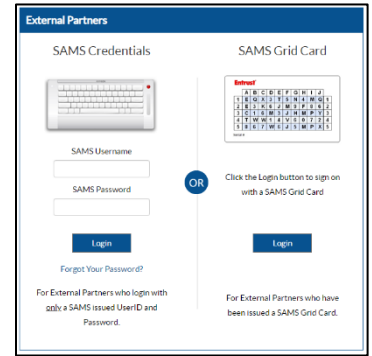
Before you Start:

1. Identify your hospital’s [NHSN Facility Administrator](#), which typically the hospital infection preventionist. This is the only person at your hospital with the ability to “confer rights to groups” (i.e., join our NHSN group) in the Centers for Disease Control and Prevention’s (CDC) Secure Access Management Services (SAMS) [Partner Portal](#). If the infection preventionist is not your NHSN Facility Administrator (or you do not know who it is), contact your infection control department and ask “Who does our infection reporting to NHSN for our hospital?” If all else fails, you can also contact NHSN Support (nhsn@cdc.gov) and ask them.
2. Once you’ve identified your hospital’s NHSN Facility Administrator, ask them follow the instructions on the following pages to complete Tasks A and B:

- A. Join the HQI NHSN group
- B. Review and approve HQI's "Confer Rights – Patient Safety" template

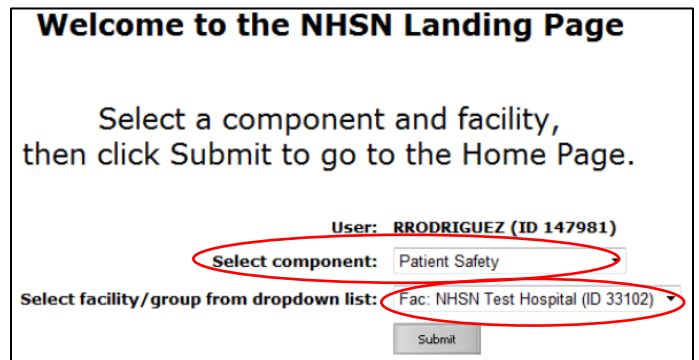
Instructions for Step A: Joining the HQI NHSN Group

1. Log into CDC [SAMS Partner Portal](#) using the username and password supplied by NHSN.



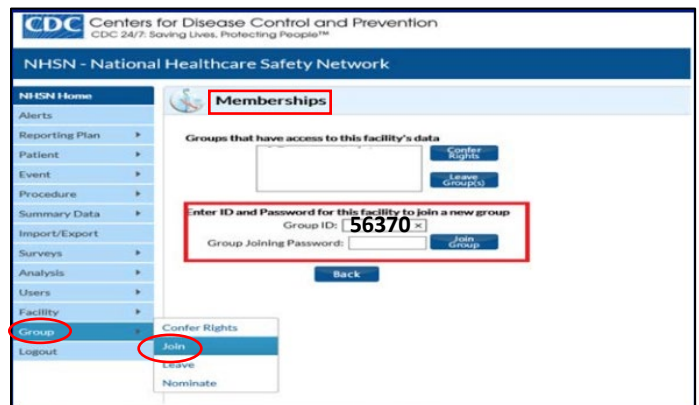
2. On the **Welcome to the NHSN Landing Page**, select **Patient Safety** in the **Select Component** dropdown box and select your hospital in the **Select Facility/Group** dropdown box.

Then click the **Submit** button.



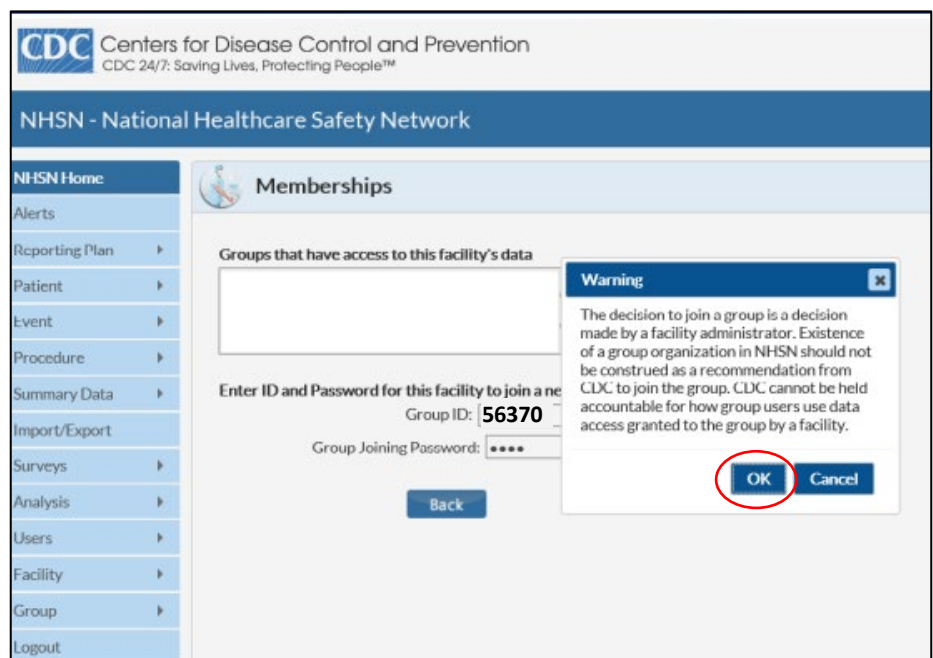
3. In the left hand column, click **Group**, and then **Join**. This will take you to the **Memberships** screen.

4. On the **Memberships** screen enter **56370** in the **Group ID** box and **Drive2zero2020!** (including the exclamation mark) in the **Group Joining Password** box. Then click the **Join Group** button.



5. A pop-up **Warning** message will appear telling you that you are about to join a group. Click the **Ok** button and you will be taken to the **Confer Rights – Patient Safety** screen.

Continue with the instructions for Step B (next page) to confer rights and permit HQI to receive your HAI data.



Instructions for Step B: Review and Approve HQI’s “Confer Rights – Patient Safety” Template

On the **Confer Rights – Patient Safety** screen you can review the specific HAI data elements, timeframes, and locations/settings that HQI is requesting access to as a member of our NHSN Group.



1. In the section titled **General**, HQI is requesting to access as a member of our NHSN group:
 - A. **Patient: Without Any Identifiers**
 - B. **Monthly Reporting Plan**
 - C. **Data Analysis**
 - D. **Facility Information**

General

View Options

Patient

With All Identifiers

Without Any Identifiers

With Specified Identifiers

Gender DOB Ethnicity Race

Medicare # Name SSN Patient ID Birthweight (NICU only)

Monthly Reporting Plan

Data Analysis

Facility Information

COVID-19 View Data

COVID-19 CSV Data Upload

1. In the **Surveys** section, HQI is requesting to access to **Hospital Survey Data from 2015 to present:**

Surveys

Year: 2015 To: [] Survey Type: Hospital Survey Data

2. In the **Infections and Other Events (Not specific to MDRO/CDI)** section, HQI is requesting 2015 to present data for the four types of HAIs shown below in the indicated location/setting:

Time Frame	Location/Setting	Infection/Event
Jan 2015 to present	Location Type: (ALL) Location: (ALL)	BSI - Bloodstream Infection (CLA)
Jan 2015 to present	Procedures: (ALL) Setting: IN (inpatient)	SSI - Surgical Site Infection
Jan 2015 to present	Location Type: (ALL) Location: (ALL)	UTI - Urinary Tract Infection (Cath)
Jan 2015 to present	Location Type: (ALL) Location: (ALL)	VAE - Ventilator-Associated Event

Infections and other Events (Not specific to MDRO/CDI)
Includes Applicable Denominators and "No Events" Indicators

Plan	Month	Year	Month	Year	Event
In	January	2015	To		BSI - Bloodstream Infection (CLA)
	Location type:		Location:		Other Location Requirements:
	(ALL)		(ALL)		
In	January	2015	To		SSI - Surgical Site Infection
	Procedure:				Setting:
	(ALL)				<input checked="" type="checkbox"/> IN <input type="checkbox"/> OUT
In	January	2015	To		UTI - Urinary Tract Infection (Cath)
	Location type:		Location:		Other Location Requirements:
	(ALL)		(ALL)		
In	January	2015	To		VAE - Ventilator-Associated Event
	Location type:		Location:		Other Location Requirements:
	(ALL)		(ALL)		

Add Row Clear All Rows

Note: You can ignore any error message that appears under Your Locations indicating that **"No locations meet criteria,"** which just means your facility has no mapped locations for the location requested.

Your Locations
No locations meet criteria

3. In the **Antimicrobial Use and Resistance** section, there are no selections made because HQI is not requesting access to any of these data at this time.

Antimicrobial Use and Resistance

Plan	Month	Year	Month	Year	Location Type	Location	Other Location Requirements
			To				
<input type="checkbox"/> Antimicrobial Use		<input type="checkbox"/> Antimicrobial Resistance					

4. In the **MDRO/CDI Events, Process and Outcome Measures** section, HQI is requesting 2015 to present data for the two types of infections shown below for all facility-wide inpatient locations:

Infection	Location Type	Location	Event Type	Time Frame
A. CDIF - C. difficile	FACWIDE	FacWIDEIn	LabID (laboratory-identified)	Jan 2015 to present
B. MRSA - MRSA	FACWIDE	FacWIDEIn	LabIDbId (blood events only)	Jan 2015 to present

MDRO/CDI Events, Process and Outcome Measures
Includes Applicable Denominators and "No Events" Indicators

Plan	Month	Year	Month	Year	Location Type	Location	Other Location Requirements
In	January	2015	To		FACWIDE	FacWIDEIn	
Specific Organism Type:							
<input type="checkbox"/> ACINE - MDR-Acinetobacter <input checked="" type="checkbox"/> CDIF - C. difficile <input type="checkbox"/> CEPHRKLEB - CephR-Klebsiella <input type="checkbox"/> CRE - CRE (CRE-Ecoli, CRE-Enterobacter, CRE-Klebsiella) <input type="checkbox"/> MRSA - MRSA <input type="checkbox"/> MSSA - MSSA <input type="checkbox"/> VRE - VRE							
Event Type:							
LABID - Laboratory-identified MDRO or CDI Event							
AST Process & Outcome Measures							
Process Measures		Organism	ASTAdm	AST D/T	AST Incidence	AST Prevalence	
<input type="checkbox"/> Hand Hygiene <input type="checkbox"/> Gown and Gloves		<input type="checkbox"/> MRSA <input type="checkbox"/> VRE	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	

In 2015 To

Specific Organism Type:

- ACINE - MDR-Acinetobacter
- CDIF - C. difficile
- CEPHRKLEB - CephR-Klebsiella
- CRE - CRE (CRE-Ecoli, CRE-Enterobacter, CRE-Klebsiella)
- MRSA - MRSA
- MSSA - MSSA
- VRE - VRE

Event Type:

AST Process & Outcome Measures

Organism	ASTAdm	AST D/T	AST Incidence	AST Prevalence
<input type="checkbox"/> MRSA	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> VRE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Process Measures

- Hand Hygiene
- Gown and Gloves

Note: Location Type FACWIDE and Location FacWIDEIn, all adult/pediatric emergency departments and 24-hour observation areas are automatically included in the template for both CDIF and MRSA.

Auto added rights for ED/OBS

In 2015 To

Specific Organism Type:

- ACINE - MDR-Acinetobacter
- CDIF - C. difficile
- CEPHRKLEB - CephR-Klebsiella
- CRE - CRE (CRE-Ecoli, CRE-Enterobacter, CRE-Klebsiella)
- MRSA - MRSA
- MSSA - MSSA
- VRE - VRE

Event Type:

LABID - Laboratory-identified MDRO or CDI Event

AST Process & Outcome Measures

Organism	ASTAdm	AST D/T	AST Incidence	AST Prevalence
<input type="checkbox"/> MRSA	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> VRE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Process Measures

- Hand Hygiene
- Gown and Gloves

In 2015 To

Specific Organism Type:

- ACINE - MDR-Acinetobacter
- CDIF - C. difficile
- CEPHRKLEB - CephR-Klebsiella
- CRE - CRE (CRE-Ecoli, CRE-Enterobacter, CRE-Klebsiella)
- MRSA - MRSA
- MSSA - MSSA
- VRE - VRE

Event Type:

LABID - Laboratory-identified MDRO or CDI Event

AST Process & Outcome Measures

Organism	ASTAdm	AST D/T	AST Incidence	AST Prevalence
<input type="checkbox"/> MRSA	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> VRE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Process Measures

- Hand Hygiene
- Gown and Gloves

In 2015 To

Specific Organism Type:

- ACINE - MDR-Acinetobacter
- CDIF - C. difficile
- CEPHRKLEB - CephR-Klebsiella
- CRE - CRE (CRE-Ecoli, CRE-Enterobacter, CRE-Klebsiella)
- MRSA - MRSA
- MSSA - MSSA
- VRE - VRE

Event Type:

LABID - Laboratory-identified MDRO or CDI Event

AST Process & Outcome Measures

Organism	ASTAdm	AST D/T	AST Incidence	AST Prevalence
<input type="checkbox"/> MRSA	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> VRE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Process Measures

- Hand Hygiene
- Gown and Gloves

5. Finally, click the **Accept** button at the bottom of the page. **You will receive a message indicating that you have successfully conferred data rights with the HQI NHSN Group.** The group name in your message will be **HQI (56370)**.



If you have any questions, or problems, or suggestions for improving this process, please email us at HQIAnalytics@HQInstitute.org