National Healthcare Safety Network (NHSN)

Enrollment

And

Conferring Rights

Objectives

- Describe NHSN, its purposes, requirements, structure, and methodology
- Go over Checklist to get started with NHSN
- Explain the new confer rights template and what it means for you
- Answer any further questions

What is NHSN?

- NHSN is a secure internet based surveillance system that was created and is maintained by the Division of Healthcare Quality Promotion (DHQP) at CDC
- Provides a tool for healthcare facilities to collect information about healthcare-associated infections (HAIs) and other adverse patient events using…
  - Standardized protocols
  - Standard definitions
  - Forms
  - Analysis with comparative national data
  - Outcome and process measures for performance improvement

Also….

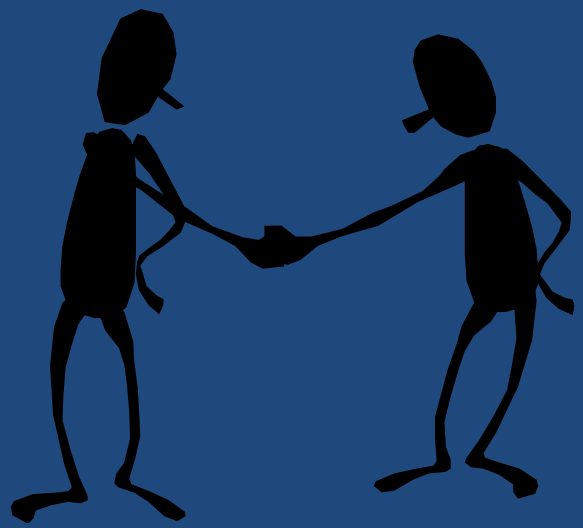
NHSN facilitates reporting to both U.S. Center for Medicare and Medicaid Services (CMS) AND Arkansas Department of Health for Act 634

Confidentiality with NHSN

The voluntarily provided 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 Requirements

- When you join NHSN you sign an agreement to:
  - Submit a Monthly Reporting Plan to CDC
  - Use the CDC definitions and surveillance methodology
  - Report your data within 30 days of the end of the month
  - Complete an annual survey
  - Pass quality control checks



Why are we doing this?

- Improve patient outcomes
- Obtain “baseline” data
- Identify problems
- Evaluate control interventions
- Monitor quality of infection control practices
- Satisfy regulatory/ accreditation requirements

Checklist to get started

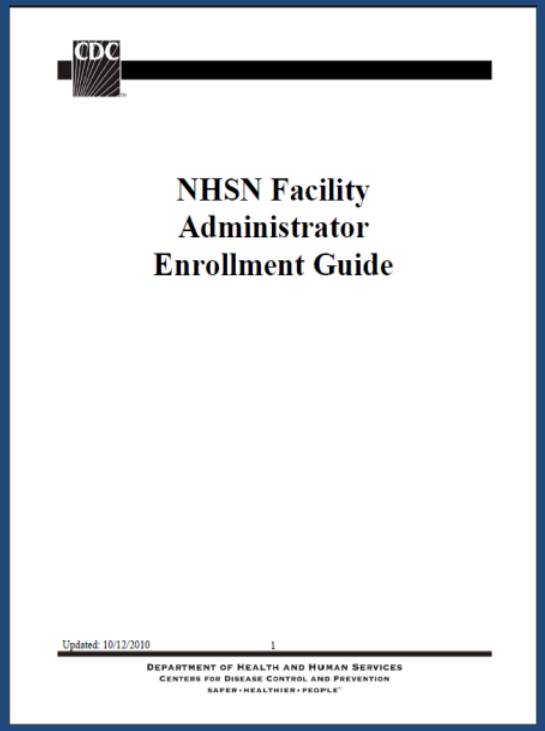
- ❑ Identify facility administrator
- ❑ CDC training
- ❑ Facility Administrator Registration
- ❑ Digital Certificate
- ❑ Facility Enrollment
- ❑ Facility Activation
- ❑ Facility Set up
- ❑ Monthly Reporting Plan
- ❑ Confer Rights

Identify the Facility Administrator

- The Facility Administrator should be your primary NHSN user, typically an IP or a hospital epidemiologist.
- They will have the most rights on the system
- The Facility Administrator will be responsible for enrolling the facility into NHSN.
- There can only be one facility administrator, however the facility administrator can add others to the system with various administrative rights.
- The facility administrator is the only person that can confer rights.

CDC Training

- www.cdc.gov/nhsn/training.html
- This training will take around 10 hours and must be completed before you enroll your facility.
- The training covers data collection, numerators, denominators, and data entry.
- Slides will serve as good references later on.
- The CDC enrollment guide will serve as a great resource during enrollment. It can be found at: www.cdc.gov/nhsn/library.html


CDC

NHSN Facility
Administrator
Enrollment Guide

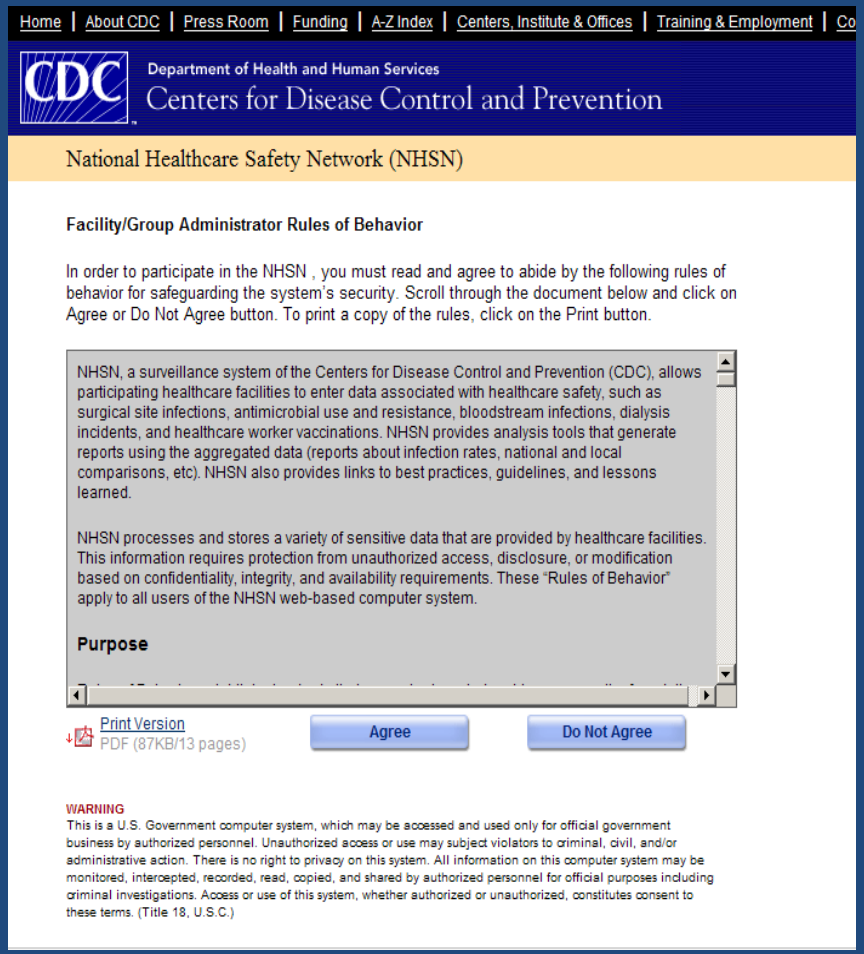
Updated: 10/12/2010 1

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR DISEASE CONTROL AND PREVENTION
SAFER • HEALTHIER • PEOPLE™

Facility Administrator Registration

http://nhsn.cdc.gov/RegistrationForm/index.jsp

- Registration Begins on this page
- You must read and agree to the NHSN Facility/Group Administrator Rules of Behavior



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CDC Department of Health and Human Services
Centers for Disease Control and Prevention

National Healthcare Safety Network (NHSN)

Facility/Group Administrator Rules of Behavior

In order to participate in the NHSN , you must read and agree to abide by the following rules of behavior for safeguarding the system's security. Scroll through the document below and click on Agree or Do Not Agree button. To print a copy of the rules, click on the Print button.

NHSN, a surveillance system of the Centers for Disease Control and Prevention (CDC), allows participating healthcare facilities to enter data associated with healthcare safety, such as surgical site infections, antimicrobial use and resistance, bloodstream infections, dialysis incidents, and healthcare worker vaccinations. NHSN provides analysis tools that generate reports using the aggregated data (reports about infection rates, national and local comparisons, etc). NHSN also provides links to best practices, guidelines, and lessons learned.

NHSN processes and stores a variety of sensitive data that are provided by healthcare facilities. This information requires protection from unauthorized access, disclosure, or modification based on confidentiality, integrity, and availability requirements. These "Rules of Behavior" apply to all users of the NHSN web-based computer system.

Purpose

Print Version
PDF (87KB/13 pages)

Agree | Do Not Agree

WARNING
This is a U.S. Government computer system, which may be accessed and used only for official government business by authorized personnel. Unauthorized access or use may subject violators to criminal, civil, and/or administrative action. There is no right to privacy on this system. All information on this computer system may be monitored, intercepted, recorded, read, copied, and shared by authorized personnel for official purposes including criminal investigations. Access or use of this system, whether authorized or unauthorized, constitutes consent to these terms. (Title 18, U.S.C.)

Facility Administrator Registration continued

- Fill out personal information
- Select facility identifier that you would like to use.
  - CMS ID: CMS Certification Number (CCN) not your National Provider Identifier (NPI)
  - For hospitals participating in the CMS hospital inpatient reporting program must use the CCN
- Input the date that you completed your CDC training.

Personal Information

*Last name:

*First name:

Middle name:

*Email address:

Facility Identifier

*Please select a facility identifier:

CMS ID ◉ AHA ID ○ VA Station Code ○

CDC Registration ID ○ None ○

*Selected identifier ID:

NHSN Training Date

*I certify that I have completed all of the appropriate,

required NHSN trainings on:

Reset Save

Digital Certificate

- The digital certificate authenticates your access to the CDC's secure data network.
- Your registration conformation will include a link to apply for a digital certificate, follow the instructions in the email to apply.
- During this process you will decide on a password that will be known as your challenge phrase.
- When your digital certificate has been approved you will receive a second email with instructions on how to install it (instructions can also be found on page 6 of enrollment guide).

Notes on Digital Certificate Use

- Don’t apply for a digital certificate if you already have one
- You may need assistance from your IT department in installing your certificate.
- Each individual must have their own digital certificate.
- Multiple digital certificates can be installed on a single computer.
- You can make copies of your digital certificate on multiple computers.
- Your digital certificate must be updated each year.
- You should save a backup copy of your certificate on a disk to ensure you will have it if you change computers.

SAMS

- Digital Certificates will be replaced by SAMS (Secure Access Management Services) at some point
- Once you are signed in to NHSN you will receive email communications from CDC about how and when this will take place

Facility Enrollment

NHSN National Healthcare Safety Network

Patient Safety Component –Annual Facility Survey

OMB No. 0920-0666
Exp. Date: 05-31-2014

Page 1 of 4

* required for saving

Tracking #:

Facility ID:

Facility Characteristics

*Ownership (check one):

For profit | Not for profit, including church | Gove

Military | Veteran's Affairs | Physi

If facility is a Hospital:
*Number of Patient Days: _____
*Number of Admissions: _____

For any Hospital **except** Long Term Acute Care Hospitals:

*Is your hospital affiliated with a medical school? : Yes N

If Yes, what type of affiliation: ____ MAJOR

Number of beds set up and staffed:
a. ICU beds (including adult, pediatric, and

NHSN National Healthcare Safety Network

Facility Contact Information

OMB No. 0920-0666
Exp. Date: 05-31-2014

Page 1 of 2

* required for saving

Tracking #:

*Facility Name:

*Main Telephone Number:

*Mailing Address:

*City: *County: *State: *ZIP: -

For each identifier listed below, enter the # / code or check "Not Applicable" if your facility does not have that identifier:

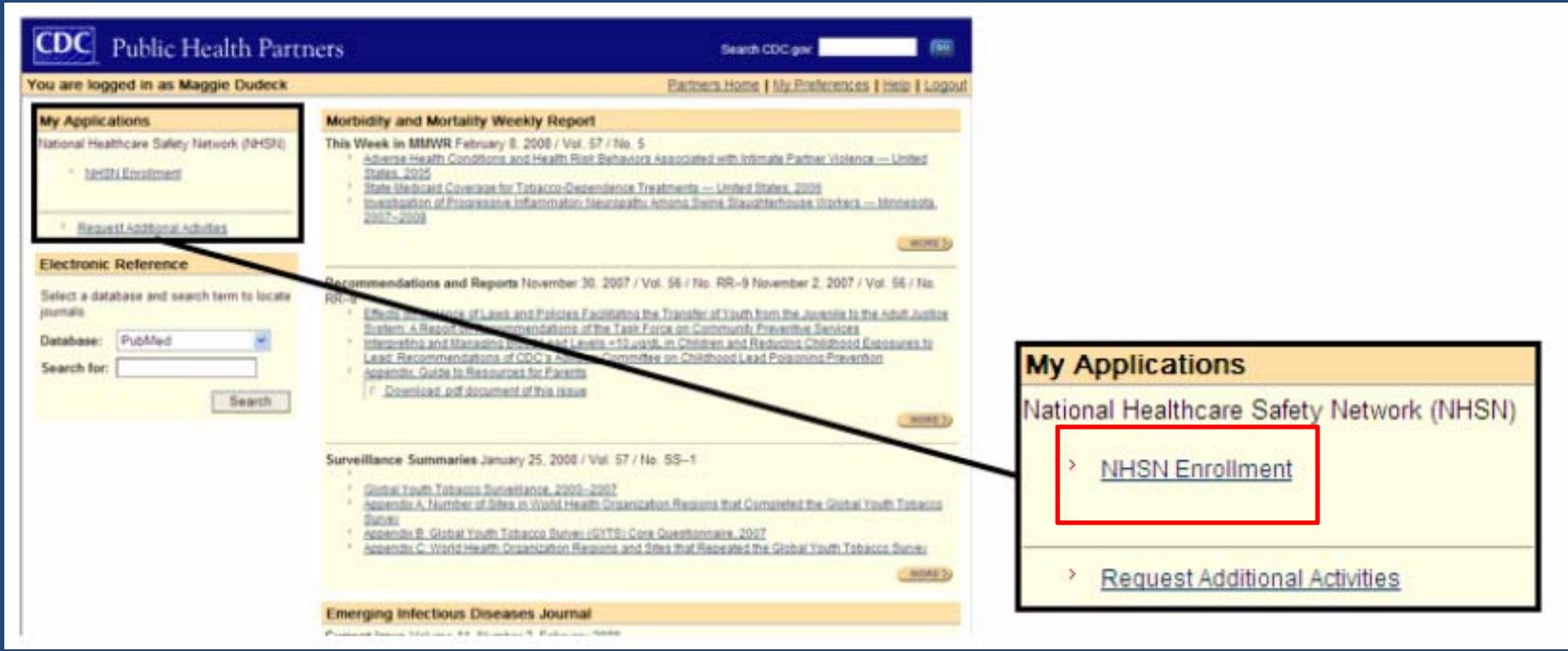
*American Hospital Association ID#: ☐ Not Applicable

- Begin by printing out forms prior to filling them out online
  - http://www.cdc.gov/nhsn/forms/57.101_FacConInf_BLANK.pdf
  - http://www.cdc.gov/nhsn/forms/57.103_PSHospSurv_BLANK.pdf

Facility Enrollment

- To access NHSN you must use internet explorer
- https://sdn.cdc.gov
- Click “NHSN Enrollment” in upper left area
- Complete the forms online.
- Print the “Agreement to Participate and Consent” form and have it signed by a hospital administrator.
- Return the form to CDC. They will notify you once they have activated your hospital on NHSN.

Facility Enrollment cont.



Facility Enrollment cont.

Facility Enrollment

Mandatory fields marked with *

Tracking # 40000

Facility Information

Facility name*: St. Someplace Else Medical Center

Address, line 1*: 40000 Anyplace St.

Address, line 2: PO Box 2

Address, line 3:

City *: Someplace

State*: GA

County*: Fulton

Zip Code *: 30111 - 2121

Main telephone number*: 551-551-5151

For each identifier listed below, enter the number / code, or check Not Applicable if your facility does not have that identifier

AHA ID*: Select ☑ if AHA ID Not Applicable

CMS ID*: 255655 Select ☐ if CMS ID Not Applicable

VA station code*: Select ☑ if VA Station Code Not Applicable

Verify Data **Click to verify values provided above before proceeding.**

Agreement to Participate and Consent

From: NHSN
To: NHSN Facility Administrator
Sent:

Subject: NHSN facility enrollment submitted

The following facility has been submitted for enrollment in the NHSN:

Facility Name: St. Someplace Medical Center
Tracking Number: 40000

NHSN Facility Administrator: Mary Andrus

The NHSN Facility Administrator has 30 days to access the Agreement to Participate and Consent form at the following URL:

http://server/enapp/enrollment.do?method=displayAgreement&trackingnum=xxxxx

If this URL appears to be broken, please type the link on your browser address line. The complete address including trackingnum=xxxxx must be included in order to access the form.

Once the form has been accessed, the CDC system administrator must receive the original, signed copy of the Consent Form within 60 days or enrollment will be suspended. Mail the form to: NHSN Administrator, MS A-24, Centers for Disease Control and Prevention, 1600 Clifton Rd, NE, Atlanta, GA 30333.

If you have questions about NHSN, please contact us at nhsn@cdc.gov. For information on NHSN, please visit the member's website at http://www.cdc.gov/ncidod/dhqp/nhsn_members.html .

You're enrolled in NHSN!

To: NHSN Facility Administrator
From: NHSN
Date:
Subject: NHSN enrollment approved

Your facility has been approved as a new member of NHSN. Welcome!

Facility Name: St. Someplace Medical Center
Facility ID #: 40000

As the Facility Administrator, you will now need to access the NHSN through the SDN (https://sdn.cdc.gov) by selecting the NHSN Reporting activity. Once in the NHSN, your first task should be to add those individuals who need to use the NHSN ("users") in the "Manage Users" section of the navigation bar. Add locations and surgeons from the navigation bar under the heading "Facility".

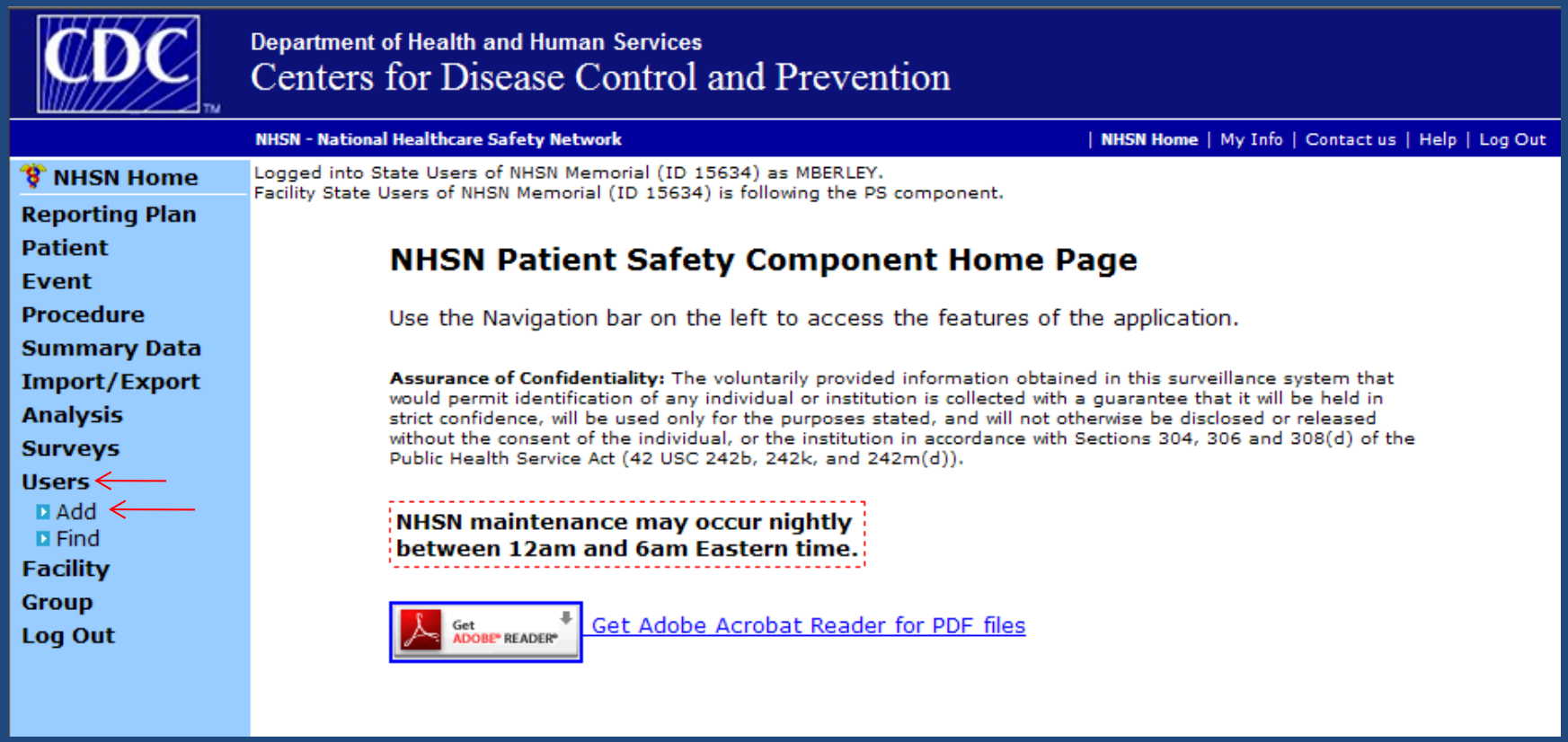
Once you add a user, that person will receive an email prompting her/him to obtain a digital certificate. It is important that you verify the email address and inform the user to use the same address when applying for their digital certificate.

If you have any questions about NHSN, please contact us at nhsn@cdc.gov. Information on NHSN is also available on the members' web site at http://www.cdc.gov/ncidod/dhqp/nhsn_members.html

Adding Users

- Good idea to have multiple users in the case of turnover
- New users must complete the required NHSN training for the rights they will be assigned

Adding Users cont.



Adding Users cont.

Logged into State Users of NHSN Memorial (ID 15634) as MBERLEY.
Facility State Users of NHSN Memorial (ID 15634) is following the PS component.

Add User

HELP

Mandatory fields marked with *

User ID*: Up to 32 letters and/or numbers, no spaces or special characters

Prefix:

First Name*:

Middle Name:

Last Name*:

Title:

User Active: Y - Yes

User Type: ICP - Infection Control Professional

Phone Number: Extension:

Fax Number:

E-mail Address*:

Address, line 1:

Address, line 2:

Address, line 3:

- create unique user ID that is not the facility ID# or your CMS #
- Each individual must have their own user ID
- Fill in the remaining information and push “save” at the bottom of the page

Adding Users cont.

Logged into State Users of NHSN Memorial (ID 15634) as MBERLEY.
Facility State Users of NHSN Memorial (ID 15634) is following the PS component.

Edit User Rights

User ADH123 (ID 20222) saved successfully. Please add rights for the new user.

HELP

User ID: **ADH123 (ID 20222)**

Facility List: State Users of NHSN Memorial (15634)

Rights	Patient Safety	Healthcare Personnel Safety
Administrator	☐	☐
All Rights	☐	☐
Analyze Data	☐	☐
Add, Edit, Delete	☐	☐
View Data	☐	☐
Customize Rights	☐	☐

Advanced

Effective Rights | Save | Back

Adding Users cont.

- Administrative User: If you check this box the User will be able to view, enter, and analyze all data, add other Users, Locations, and Surgeons and nominate and join Groups
- View Data: If you check only this box, the User will be able to look at the data, but cannot enter, edit or analyze any data
- Enter Data: If you check only this box, the User will be able to enter and edit the data
- Analyze Data: If you check only this box, the User will be able to access the facility's datasets and can view and analyze data
- All Rights: If you check this box, the User will be able to view, enter, edit and analyze data, but they will not be able to add or edit new Users, add Locations or Surgeons

Adding Locations

http://www.cdc.gov/nhsn/PDFs/pscManual/15LocationsDescriptions_current.pdf
Remember 80% rule

CDC Locations and Descriptions

CDC Location Label	Location Description
LOCATIONS	
Adult Critical Care Units	
Burn Critical Care	Critical care area specializing in the care of patients with significant/major burns.
Medical Cardiac Critical Care	Critical care area specializing in the care of patients with serious heart problems that do not require heart surgery.
Medical Critical Care	Critical care area for patients who are being treated for nonsurgical conditions.
Medical/Surgical Critical Care	An area where critically ill patients with medical and/or surgical conditions are managed.
Neurologic Critical Care	Critical care area specializing in treating life-threatening neurological diseases.

Adding Locations

Adding Locations Continued

NHSN Home
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Facility
- Customize Forms
- Facility Info
- Add/Edit Component
- Locations
- Surgeons

Group
Log Out

Logged into State Users of NHSN Memorial (ID 15634) as MBERLEY.
Facility State Users of NHSN Memorial (ID 15634) 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*:
Your Label*:
CDC Location Description*:
Status*: Active
Bed Size: 0 A bed size greater than zero is required for most inpatient locations.

Find Add Clear

Adding Locations Continued

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

Your Code*: 2NORTH
Your Label*: 2 NORTH ADULT MED/SURG
CDC Location Description*: Medical/Surgical Critical Care
Status*: Active
Bed Size*: 25 A bed size greater than zero is required for most inpatient locations.

Find Add Clear

- Your Code: Any reference for this location that will make sense to you
- Your Label: Area to give more detail to your code
- CDC Location Description: Choose CDC description that best describes this area. For more information reference chapter 15 at http://www.cdc.gov/nhsn/TOC_PSCManual.html
- Status: Active/Inactive
- Bed size: Must enter number of beds in unit
- Finally, Click Add to finish

Adding Locations Finished

NHSN - National Healthcare Safety Network | NHSN Home | My Info | Contact us | Help | Log Out

- NHSN Home
- Reporting Plan
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  - Customize Forms
  - Facility Info
  - Add/Edit Component
  - Locations
  - Surgeons
- Group
- Log Out

Logged into State Users of NHSN Memorial (ID 15634) as MBERLEY.
Facility State Users of NHSN Memorial (ID 15634) is following the PS component.

Locations

The location '2 NORTH ADULT MED/SURG' has been successfully added.

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*:

Status*: Active

Adding a Monthly Reporting Plan

Note: you will not be able to input any data into NHSN for a month that has no plan

Adding a Monthly Reporting Plan Continued

NHSN Home
Reporting Plan
- Add
- Find

Patient
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Logged into State Users of NHSN Memorial (ID 15634) as MBERLEY.
Facility State Users of NHSN Memorial (ID 15634) is following the PS component.

Add Monthly Reporting Plan

Mandatory fields marked with *

Facility ID*: State Users of NHSN Memorial (ID 15634)

Month*:

Year*:

☐ No NHSN Patient Safety Modules Followed this Month

Device-Associated Module HELP

Adding Monthly Reporting Plan Continued

CDC
Department of Health and Human Services
Centers for Disease Control and Prevention

NHSN - National Healthcare Safety Network

NHSN Home
Reporting Plan
- Add
- Find

Patient
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Group
Log Out

Logged into State Users of NHSN Memorial (ID 15634) as MBERLEY.
Facility State Users of NHSN Memorial (ID 15634) is following the PS component.

Ad

No data found for May, 2011

Mandatory fields marked with *

Facility ID*: State Users of NHSN Memorial (ID 15634)
Month*: May
Year*: 2011
No NHSN Patient Safety Modules Followed this Month

Device-Associated Module HELP

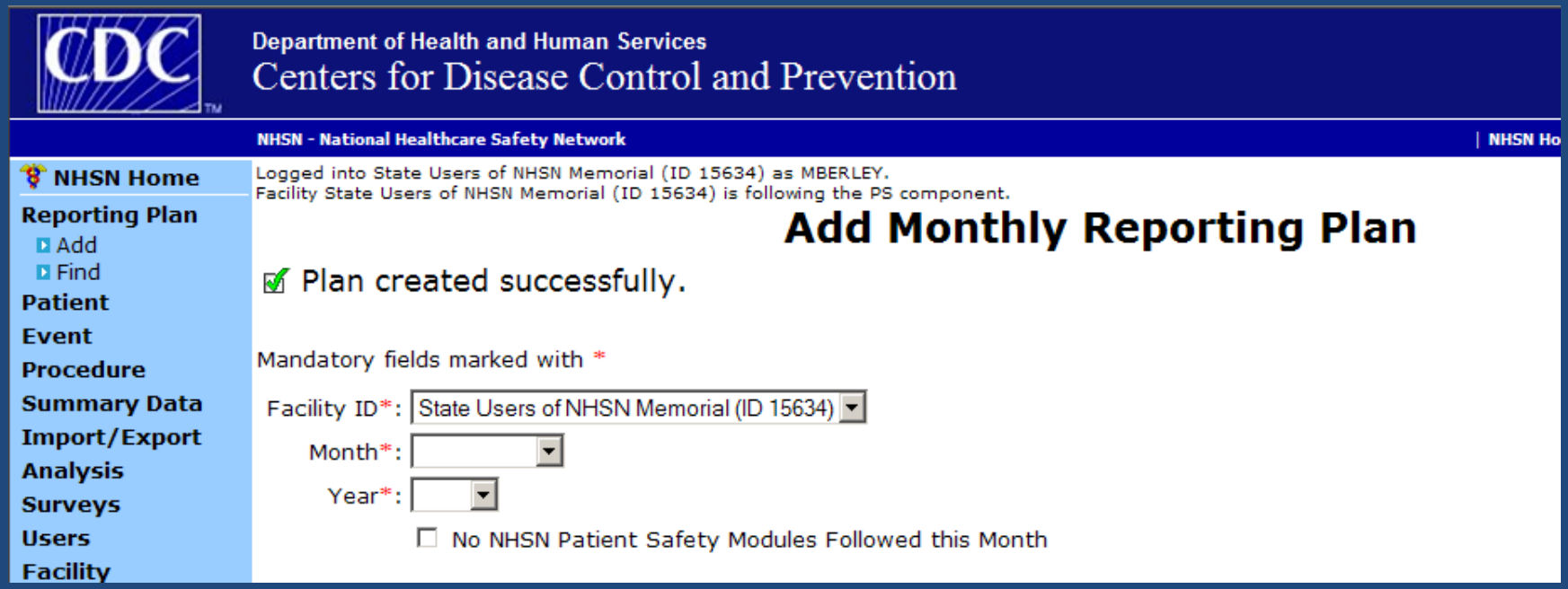
Locations	CLA	BSI	DE	VAP	CAUTI	CLIP
2NORTH - 2 NORTH ADULT MED/SURG	☑			☐	☐	☐

Add Row | Clear All Rows | Copy from Previous Month

Procedure-Associated Module HELP

After you have filled out the form press “Save” at the bottom of the page.

Plan Added


CDC
Department of Health and Human Services
Centers for Disease Control and Prevention
NHSN - National Healthcare Safety Network
| NHSN Ho
NHSN Home
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Facility
Logged into State Users of NHSN Memorial (ID 15634) as MBERLEY.
Facility State Users of NHSN Memorial (ID 15634) is following the PS component.
Add Monthly Reporting Plan
Plan created successfully.
Mandatory fields marked with *
Facility ID*: State Users of NHSN Memorial (ID 15634)
Month*:
Year*:
No NHSN Patient Safety Modules Followed this Month

Data sharing with groups

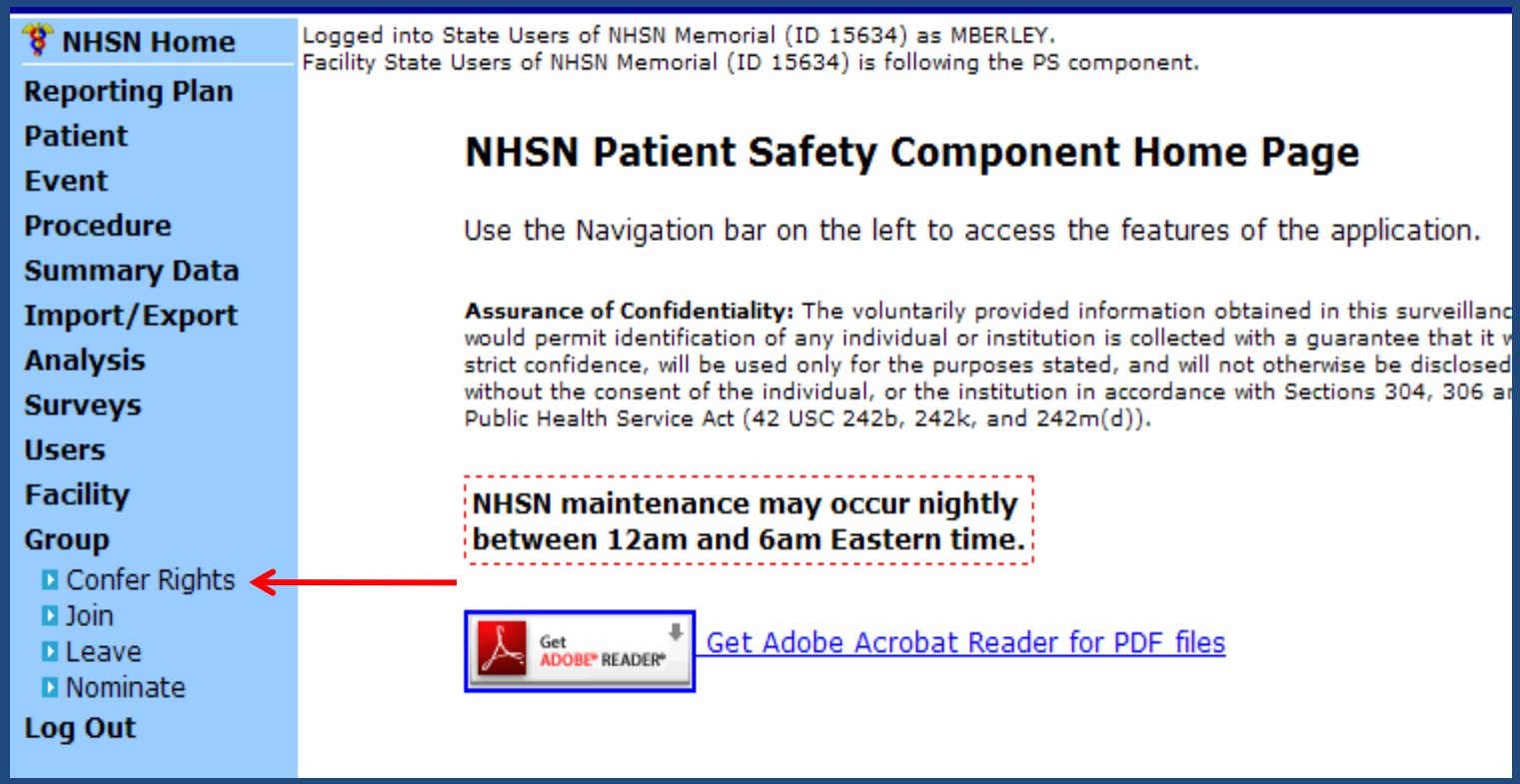
- A government health department (or other entity) can be nominated as a Group in NHSN
- An NHSN hospital joins the Group
- Hospital gives access rights to certain of its data to the Group
- Group can analyze the data of its member facilities
- NHSN facilities in the Group cannot see one another's data

New Confer Rights Template

- With version of NHSN state creates the confer rights template for everyone in the group and each member approves it
- The template includes mandated HAIs as well as HAIs that can be reported on a voluntary basis
  - It is mandatory to report CLABSIs in the ICU and NICU
  - It is optional to report CLABSIs in other hospital areas, CAUTIs, and SSIs

This is a working document that can be adjusted to fit the needs of everyone in the group

Conferring Rights



Conferring Rights Continued

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- Confer Rights
- Join
- Leave
- Nominate

Log Out

Logged into State Users of NHSN Memorial (ID 15634) as MBERLEY.
Facility State Users of NHSN Memorial (ID 15634) is following the PS component.

Memberships

Groups that have access to this facility's data

Health Management Associates (15834)

Confer Rights HELP

Leave Group(s) HELP

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

Group ID: 15658

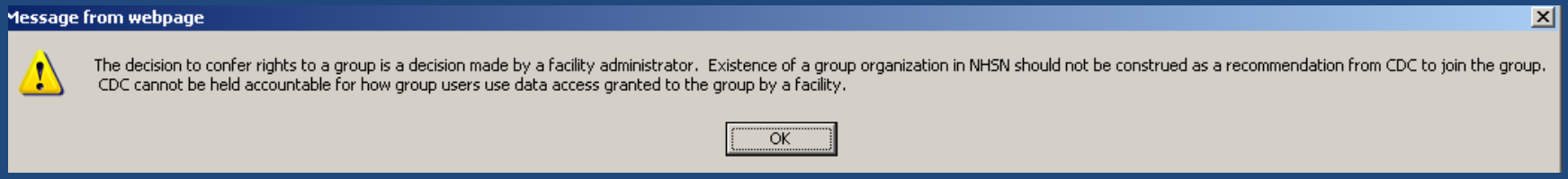
Group Joining Password: ••••••••••

Join Group HELP

Back

ADH Group
Group ID: 15658
Password: Arkansas01

Conferring Rights Continued



Before you are allowed to precede to the next page this message will popup. This is a disclaimer message indicating that the decision to enter a group is the facilities own decision. Click Ok.

General and Survey Sections

Patient Safety | Healthcare Personnel Safety

General

	View Options
Patient	With All Identifiers
	X Without Any Identifiers
	With Specified Identifiers Gender DOB Ethnicity Race
Monthly Reporting Plan	X
Data Analysis	X
Facility Information	X

Surveys

Year	Year	Survey Type	N/A
2011	to	Facility Survey Data	☐

Infections and other Events (Not specific to MDRO/CDI)

All rights listed above are required

Events and Summary Data Sections

Infections and other Events (Not specific to MDRO/CDI)

Plan	Month Year	Month Year	Event	N/A
Both	1 2011	to	BSI - Bloodstream Infection (CLA)	☐
	Location type: CC	Location: (ALL)	Other Location Requirements:	Your Locations: 1 CATHY - CATHY'S ICU, 1 MICU - 1S
Both	1 2011	to	BSI - Bloodstream Infection (CLA)	☐
	Location type: CC_N	Location: (ALL)	Other Location Requirements:	Your Locations: 8585 - NICU II/III, NICU - NICU
Both	1 2011	to	BSI - Bloodstream Infection (CLA)	☐
	Location type: (ALL)	Location: (ALL)	Other Location Requirements:	Your Locations: 1 CATHY - CATHY'S ICU, 1 MICU - 1S
Both	1 2011	to	UTI - Urinary Tract Infection (Cath)	☐
	Location type: (ALL)	Location: (ALL)	Other Location Requirements:	Your Locations: 1 CATHY - CATHY'S ICU, 1 MICU - 1S
Both	1 2011	to	SSI - Surgical Site Infection	☐
	Procedure: COLO - Colon surgery		Setting: Both	
Both	1 2011	to	SSI - Surgical Site Infection	☐
	Procedure: HYST - Abdominal hysterectomy		Setting: Both	

The top two infections listed are required by Act 634. These are CLABSIs in the ICU and CLABSIs in the NICU (If your facility has one)

Events and Summary Data Sections

Infections and other Events (Not specific to MDRO/CDI)

Plan	Month Year	Month Year	Event	N/A
Both	1 2011	to	BSI - Bloodstream Infection (CLA)	☐
	Location type: CC	Location: (ALL)	Other Location Requirements:	Your Locations: 1 CATHY - CATHY'S ICU, 1 MICU - 1S
Both	1 2011	to	BSI - Bloodstream Infection (CLA)	☐
	Location type: CC_N	Location: (ALL)	Other Location Requirements:	Your Locations: 8585 - NICU II/III, NICU - NICU
Both	1 2011	to	BSI - Bloodstream Infection (CLA)	☐
	Location type: (ALL)	Location: (ALL)	Other Location Requirements:	Your Locations: 1 CATHY - CATHY'S ICU, 1 MICU - 1S
Both	1 2011	to	UTI - Urinary Tract Infection (Cath)	☐
	Location type: (ALL)	Location: (ALL)	Other Location Requirements:	Your Locations: 1 CATHY - CATHY'S ICU, 1 MICU - 1S
Both	1 2011	to	SSI - Surgical Site Infection	☐
	Procedure: COLO - Colon surgery		Setting: Both	
Both	1 2011	to	SSI - Surgical Site Infection	☐
	Procedure: HYST - Abdominal hysterectomy		Setting: Both	

These infections are not required by the Act but may be reported voluntarily

Events and Summary Data Sections

Infections and other Events (Not specific to MDRO/CDI)

Plan	Month Year	Month Year	Event			N/A
Both	1 2011	to	BSI - Bloodstream Infection (CLA)			☐
	Location type: CC	Location: (ALL)	Other Location Requirements:		Your Locations: 1 CATHY - CATHY'S ICU, 1 MICU - 1S	
Both	1 2011	to	BSI - Bloodstream Infection (CLA)			☐
	Location type: CC_N	Location: (ALL)	Other Location Requirements:		Your Locations: 8585 - NICU II/III, NICU - NICU	
Both	1 2011	to	BSI - Bloodstream Infection (CLA)			☐
	Location type: (ALL)	Location: (ALL)	Other Location Requirements:		Your Locations: 1 CATHY - CATHY'S ICU, 1 MICU - 1S	
Both	1 2011	to	UTI - Urinary Tract Infection (Cath)			☐
	Location type: (ALL)	Location: (ALL)	Other Location Requirements:		Your Locations: 1 CATHY - CATHY'S ICU, 1 MICU - 1S	
Both	1 2011	to	SSI - Surgical Site Infection			☐
	Procedure: COLO - Colon surgery		Setting: Both			
Both	1 2011	to	SSI - Surgical Site Infection			☐
	Procedure: HYST - Abdominal hysterectomy		Setting: Both			

If you do not wish to report on these items then click the N/A box on the right and you will not report that data

Events and Summary Data Sections

Infections and other Events (Not specific to MDRO/CDI)

Plan	Month Year	Month Year	Event	N/A
Both	1 2011	to	BSI - Bloodstream Infection (CLA)	☐
	Location type: CC	Location: (ALL)	Other Location Requirements:	Your Locations:
Both	1 2011	to	BSI - Bloodstream Infection (CLA)	☐
	Location type: CC_N	Location: (ALL)	Other Location Requirements:	Your Locations: 8585 - NICU II/III, NICU - NICU
Both	1 2011	to	BSI - Bloodstream Infection (CLA)	☐
	Location type: (ALL)	Location: (ALL)	Other Location Requirements:	Your Locations: 1 CATHY - CATHY'S ICU, 1 MICU - 1S
Both	1 2011	to	UTI - Urinary Tract Infection (Cath)	
	Location type: (ALL)	Location: (ALL)	Other Location Requirements:	
Both	1 2011	to	SSI - Surgical Site Infection	
	Procedure: COLO - Colon surgery		Setting: Both	
Both	1 2011	to	SSI - Surgical Site Infection	
	Procedure: HYST - Abdominal hysterectomy		Setting: Both	

- ☑ 1 CATHY - CATHY'S ICU
- ☑ 1 MICU - 1ST FLOOR, NORTH WING, MEDICAL ICU
- ☑ 1 SICU - 1ST FLOOR, SOUTH WING, SURGICAL ICU
- ☑ 22ICU - PEDIATRIC ICU
- ☑ 2NORTH - 2 NORTH ADULT MED/SURG
- ☑ 650 - CCU
- ☑ 71 ICU - 71 ICU CARDIAC
- ☑ 72 ORTHO - ORTHOPEDIC UNIT
- ☑ 8585 - NICU II/III
- ☑ CCU - CCU
- ☑ DIAL - OUTPATIENT DIALYSIS

On voluntary reporting you may select which of your locations to report from

Events and Summary Data Sections

Summary Data for Events

Plan	Month	Year		Month	Year	Location Type	Location	Other Location Requirements	Your Locations	N/A
Both	1	2011	to			CC	(ALL)			☐
Both	1	2011	to			CC_N	(ALL)		8585 - NICU II/III, NICU - NICU	☐
Both	1	2011	to			(ALL)	(ALL)		1 CATHY - CATHY'S ICU, 1 MICU - 1S	☐

Denominator Data for Events

Plan	Month	Year		Month	Year	Procedure	Setting	N/A
Both	1	2011	to			COLO - Colon surgery	Both	☐
Both	1	2011	to			HYST - Abdominal hysterectomy	Both	☐

Summary Data for Vaccinations

Plan	Month	Year	Month	Year	Vaccination Type	N/A

MDRO/CDI Events

Plan	Month	Year	Month	Year	Location Type	Location	Other Location Requirements	Your Locations	N/A

MDRO/CDI Summary Data (Denominators)

Plan	Month	Year	Month	Year	Location Type	Location	Other Location Requirements	Your Locations	N/A

MDRO/CDI Process & Outcome Measures

Plan	Month	Year	Month	Year	Location Type	Location	Other Location Requirements	Your Locations	N/A

Accept Back

If you have already selected N/A on event data the corresponding summary/denominator data will be mark as N/A automatically. Press “Accept” when you are finished.

If you are already a group member

Department of Health and Human Services
Centers for Disease Control and Prevention

NHSN - National Healthcare Safety Network | NHSN Home | My Info | Contact us | Help | Log Out

- NHSN Home
- Reporting Plan
- Patient
- Event
- Procedure
- Summary Data
- Import/Export
- Analysis
- Surveys
- Users
- Facility
- Group
- Log Out

Logged into State Users of NHSN Memorial (ID 15634) as MBERLEY.
Facility State Users of NHSN Memorial (ID 15634) is following the PS component.

Confer Rights Not Accepted List

Define rights have been changed or new locations have been added affecting the Group below. You may accept new rights or leave the group. Click the Group Name to view and accept new rights.

First | Previous | Next | Last — Displaying 1 - 1 of 1

Group Name	Group ID	Status	Status Date
NHSN State Users Test Group	15144	Not Accepted	Jul 8 2011 11:52AM

First | Previous | Next | Last — Displaying 1 - 1 of 1

Final Notes about the Rights Template

- All voluntary data entered will have the same protections as the mandated data
- There is no penalty if you confer rights for one of the voluntary HAIs and then report no data for it
- The confer rights document can be changed as the need arises

Special Thanks…

- Wisconsin Department of Health
- Texas Department of Health
- APIC National

Questions?

Megan Berley

HAI Program

Arkansas Department of Health

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