Getting Started with NHSN and TxHSN

Below are the steps that facilities must take to start reporting health care-associated infections to Texas.

1. **Determine if you are required to report HAIs for Texas. The requirements are listed below. For procedures that NHSN did not list CPT codes, ICD-9 codes are substituted.**
   A. General hospitals are required to report to the Texas Healthcare Safety Network through NHSN if:
      - They have an ICU, PICU, or NICU, they will report any Central Line-Associated Infections (CLABSI)

   B. Adult General hospitals or Ambulatory Surgical Centers are required to report to the Texas Healthcare Safety Network through NHSN if:
      - They perform any of the following surgical procedures
         a) Carotid Endarterectomies (Endarterectomy on vessels of head and neck (includes carotid artery and jugular vein) (ICD-9 codes include 38.12)
         b) Peripheral Vascular Bypass Grafts (Bypass operations on peripheral arteries) (ICD-9 codes include 39.29)
         c) Knee Prosthesis (Arthroplasty of knee) (CPT codes include 27438, 27440, 27441, 27442, 27443, 27486, 27487)
         d) Hip Prosthesis (Arthroplasty of hip) (CPT codes include 27125, 27130, 27132, 27134, 27137, 27138, 27236, 27299)
         e) Coronary Artery Bypass Graft with both chest and donor site incisions (Chest procedure to perform direct revascularization of the heart; includes obtaining suitable vein from donor site for grafting (ICD-9 codes include 36.10-36.14, 36.19)
         f) Coronary Artery Bypass Graft with chest incision only (ICD-9 codes include 36.15-36.17, 36.2)
         g) Colon (Incision, resection, or anastomosis of the large intestine; includes large-to-small and small-to-large bowel anastomosis; does not include rectal operations) (CPT codes include 44140, 44141, 44143, 44144, 44145, 44146, 44147, 44150, 44151, 44160, 44204, 44205, 44206, 44207, 44208, 44210)
         h) Abdominal hysterectomy (Includes those by laparoscope) (CPT codes 58150, 58152, 58180, 58200, 58210, 58541, 58542, 58543, 58544, 58548, 58570, 58571, 58572, 58573, 58951, 58953, 58954, 58956)
         i) Vaginal Hysterectomies (Includes those by laparoscope)
         j) Abdominal Aortic Aneurism repair (Resection of abdominal aorta with anastomosis or replacement) (ICD-9 codes include 38.34, 38.44, 38.64)
         k) Peripheral Vascular Bypass Surgery (Bypass operations on peripheral arteries) (ICD-9 codes include 39.29)

   C. Pediatric Hospitals are required to report to the Texas Healthcare Safety Network through NHSN if:

- They have an ICU, PICU, or NICU, they will report any Central Line-Associated Infections (CLABSI)
- They perform any of the following surgical procedures
  a. Ventricular Shunt (Ventricular shunt operations, including revision and removal of shunt (ICD-9 codes include 02.21*, 02.22, 02.31-02.35, 02.39, 02.42, 02.43, 54.95^)
  b.   Cardiac Surgery (Procedures on the heart; includes valves or septum; does not include coronary artery bypass graft, surgery on vessels, heart transplantation, or pacemaker implantation) (ICD-9 codes include 35.00-35.04, 35.06, 35.08, 35.10-35.14, 35.20-35.28, 35.31-35.35, 35.39, 35.42, 35.50, 35.51, 35.53, 35.54, 35.60-35.63, 35.70-35.73, 35.81-35.84, 35.91-35.95, 35.98-35.99, 37.10-37.12, 37.31-37.33, 37.35-37.37, 37.41, 37.49, 37.60 *)
  c. Heart Transplant (Transplantation of heart) (ICD-9 codes include 37.51-37.55)
  d. Spinal Fusion (Immobilization of spinal column) (ICD-9 codes include 81.00-81.08)
  e. Refusion of Spine (ICD-9 codes include 81.30-81.39)
  f. Lamenectomy (Exploration or decompression of spinal cord through excision or incision into vertebral structures) (ICD-9 codes include 03.01, 03.02, 03.09, 80.50, 80.51, 80.53, 80.54†, 80.59, 84.60-84.69, 84.80-84.85)

*NOTE: The procedure represented by this ICD-9-CM code can be performed in a number of ways. However, as for all surgeries, if, at the end of the procedure, the skin incision edges do not meet because of drains, wires, or other objects extruding through the incision, the incision is not considered primarily closed. Therefore, the procedure is not considered an NHSN operative procedure and any subsequent infection is not considered a procedure-associated infection (i.e., not an SSI or PPP).
†NOTE: If this procedure is performed percutaneously, it is not considered an NHSN operative procedure and should not be included in LAM denominator data.
^NOTE: Include only if this procedure involves ventricular shunt.

2. **If a facility performs any of the above requirements**, they are requested to fill out attachment 3 of a letter indicating that they are required to report and providing us with their current facility contacts. This document is found at: http://www.dshs.state.tx.us/WorkArea/linkit.aspx?LinkIdentifier=id&ItemID=8589958009. These contacts will be responsible for reviewing data for accuracy so they will want to be sure to assign staff who will be involved in the data entry process. If they do not have an NHSN ID # yet they can still submit this information and we can search for that later. Having their contact information will allow us to get them on the email list for important announcements.
If a facility does <u>not</u> perform any of the above requirements, they are requested to fill out attachment 2 of the above letter indicating that they are not required to report and providing us with their current facility contacts and will not have to proceed any further.

3. <u>**Enroll facility in NHSN.**</u> Because NHSN is used to collect data by CMS and because Texas HAI data may also be collected through NHSN, DSHS is providing the following support to

facilities who wish to enroll in NHSN to become familiar with navigating the system and the data entry requirements. The enrollment process consists of an online agreement and several email prompts from NHSN in order to obtain a digital certificate.

    a. The Enrollment Requirements and instructions including describing the Facility Administrator's Enrollment Guide are at: http://www.cdc.gov/nhsn/enrollment/index.html.

    b. Those at the facility that will be entering data into NHSN must complete training: Go to http://www.cdc.gov/nhsn/Training/patient-safety-component/index.html for training modules for the Patient Safety Component (Only need to look at the Overview and Modules applicable for your reporting such as the Procedure Associated Module if only reporting surgical procedures).

4. **Add Facility Users and Locations in NHSN.** Once a Digital Certificate is installed on your computer, you can access NHSN and begin to add users, study locations and if you choose, surgeon data. For detailed information regarding how to set up the facility in NHSN, please review the following slides: http://www.cdc.gov/nhsn/PDFs/slides/NHSN_Getting_Started.pdf

5. **Confer Rights to Texas in NHSN.** In order to allow Texas access to a facility's data (and thus be compliant with mandatory reporting regulations), a facility must confer rights to the HAI Texas group. For detailed instructions please refer to the document found at: Guide to Conferring Rights

- Sign into NHSN at https://sdn.cdc.gov.
  - a. Click on NHSN Reporting link (under My Applications section on the upper left of the screen) on the Public Health Partners webpage.
  - b. On the NHSN landing page, use the drop down box to select Patient Safety Component for Select Component field.
  - c. Click on the Group → Confer Rights link on the left hand side of website (in the blue panel) and follow instructions in the Guide to Conferring Rights (linked above).

Examples of the Conferring Rights templates are found at:

- If you are a General Adult Hospital or LTAC: Adult General Hospital Confer Rights Template .
- If you are a Pediatric/ Adolescent Hospital: Pediatric Hospital Confer Rights Template
- If you are a Ambulatory Surgical Center: ASC Confer Rights Template

6. **Data Entry into NHSN: Denominator (procedure) data needs to be entered into NHSN within 30 days of the end of the reporting month.**

    a. **REPORTING PLAN:** A reporting plan must be submitted PRIOR to entering summary (i.e. device days), event (i.e. infections) or procedure (i.e. surgical procedure data) data into NHSN. ***It is recommended that a reporting plan be entered for each month for the whole year at one time***. To learn more about setting up a reporting plan, click on this link: http://www.cdc.gov/nhsn/PDFs/slides/NHSN_trainingDec12DataEntry.pdf.

b. **COLLECT/ENTER DATA:** The next step is to collect summary data (device days), event data (CLABSI, SSI) and procedure data (surgical procedures). If the facility is not currently collecting this data, NHSN has several tools available on their website:

    i. Go to http://www.cdc.gov/nhsn/settings.html for reporting information for the Patient Safety Component.

7. **Texas Health care Safety Network (TxHSN):** The designated contacts provided to us will receive email notifications intermittently throughout the year. They will be able to review data quality reports (called Facility Error Reports) and the facility-specific HAI data report that will be put on the website for the public to view (report called the Data Display report). These contacts will also be given an opportunity to submit a comment to be posted on the final data display to explain data to public consumers. Training for this is found at the following links:

    a. Texas Reporting Requirements & Intro to TxHSN
    b. TxHSN Reporting: Errors Report & NHSN Alerts
    c. TxHSN Reporting: Data Display Report & SIR Interpretation
    d. TxHSN Reporting: Submitting Comments

If you have any questions about any of the steps in this process, please contact David Rhinehart at David.Rhinehart@dshs.state.tx.us or you can email HAITexas@dshs.state.tx.us.