



2019 BSI QIA TASK TRACKER

Project Page: www.esrdnetwork.org/infection-detection

START DATE	DUE DATE	TASKS	LINKS
January	Pre-Project	Getting Started with Infection Detection	https://www.esrdnetwork.org/infection-detection
	12/28/18	Complete the Pre-Project Survey (if you haven't already) ASAP!!	Pre-Project Survey
2pm - 3pm	1/8/19	Attend the ESRD NCC 's HAI LAN call. <u>Registration information will be sent out prior to the call.</u> Be sure to have someone represent your facility on this national call. (If you missed this call, you can find the slides posted on the project page).	Look under "NCC HAI LAN" from the NW Project Page
	1/31/19	Attend the Introductory Webinar for your cohort. OR watch the webinar recording for your cohort if you were unable to attend.	Webinar Recordings
	1/31/19	Complete the Webinar Attestation Survey, to confirm your attendance and that you understand the requirements. (There is only 1 survey for both cohorts)	Webinar Attestation Survey - For both Cohorts
	1/31/19	Order the FREE CDC Audit tools, Checklists, and "Days Since Last Bloodstream Infection" poster. The audits and checklists needed are: Hand Hygiene, Dialysis Station Routine Disinfection, Catheter Exit Site Care, and Catheter Connection and Disconnection. (Note: There is NO checklist for hand hygiene, there will be a network hand hygiene checklist on the project page as a substitute).	Order Free CDC Laminated Tools
	1/31/19	All facilities must have at least 1 NHSN Trained employee. (If you don't have one already begin ASAP, it takes time to get access)	https://www.cdc.gov/nhsn/dialysis/enroll.html
	1/31/19	After you have access to NHSN, go set up your Prevention Process Measures (PPM) and Confer Rights to the Network. If you are unsure how to do so, watch the webinar slides "NHSN Intro Training Webinar"	Watch NHSN Training under "Webinars" from NW Project Page



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FEBRUARY	Core #1	Surveillance and feedback using NHSN	https://www.cdc.gov/nhsn/dialysis/event/index.html
	2/1/19	Begin the NHSN Monthly Audits! Remember you <u>must</u> use the CDC Audit Tools (either your laminated ones, or you can print a copy. They are linked on the project page)	Look under "Intervention Resources" on the NW Project Page
	2/28/19	(20% Cohort Only) Calculate your facility rates for BSIs and other dialysis events, and compare to rates in other NHSN facilities. Share the data during your QAPI/staff meetings. Use the data to complete a Root Cause Analysis Survey .	NHSN Dialysis Event BSI Run Chart (How to) NHSN Dialysis Event BSI Report (How To) Root Cause Analysis Survey
	2/28/19	Set up your " Infection Prevention Station " with CDC's " Days Since Last BSI " Poster in an area visible to patients, family members, and staff. Report how many days since your facility's last bloodstream infection. Add additional handouts around the BSI Poster. The handouts to post will be available on the project page, in the Patient Engagement section under "Infection Prevention Station". Submit a picture of your station in the monthly survey.	Look under "Patient Engagement" from the NW Project Page
	2/28/19	All facilities must have 2 NHSN Trained Employees.	https://www.cdc.gov/nhsn/dialysis/enroll.html
	2/28/19	Complete the 4 monthly surveillance audits: (HH 30 /CATHCON 10 /CATHEXIT 5 /DISINFECT 10) and Enter data into NHSN . Make sure to complete each of the checklist audits (4 total) with <u>at least 1</u> patient. (Required for 20% Cohort & Recommended for 30% Cohort)	Look under "CDC Resources" from the NW Project Page
	2/28/19	Choose one of the patient engagement options, and report the results on the monthly survey. More information and resources can be found on the project page.	Look Under "Patient Engagement" from NW Project Page
	02/28/19	Complete the monthly survey for February	February Monthly Survey