

## NHSN v8.5 (January 2016) Release Notes

### Changes to All Components:

Enrollment and Facility Information screens – Add Primary Contact as a user	On Enrollment, or during an Add or an Update for Primary Contacts, the application will require that the facility administrator add the primary contacts to the application as NHSN users.
Landing Page – Facility search	On the NHSN Landing page, and also for Groups under the Find Facility function, users can now enter search criteria to find a facility.
Analysis: Datasets	The OID variable was added to all analysis datasets that already contained the orgID and/or the CCN variable. The new OID variable will be available for selection, as appropriate, on the various Modify Option screens for the reports that use these analysis datasets. The OID variable will not be used as a default value for any report. This change affects multiple output options in all NHSN components.

### Changes to the Healthcare Personnel Safety Component:

Analysis: Monthly Report Plan Line List	HPS Component users will be able to generate a line list of reporting plan data. This report allows facilities to view when the data elements were first entered/last modified within NHSN.
Analysis: Line Listing – Facility Enrollment Data	This is a new report that lists facility enrollment information. It will be useful to groups that need a complete list of facilities, in their group, that are active in the HPS component.
Analysis: Line Listing – HCP Flu Vaccination for QIP	This is a new report for dialysis facilities participating for the CMS Quality Incentive Program (QIP) Healthcare Personnel (HCP) Influenza Vaccination summary reporting. It lists the facilities that have satisfied minimum reporting requirements for this HCP flu vaccination reporting.

### Changes to the Dialysis Component:

Annual Outpatient Dialysis Center Practices Survey	The dialysis survey, which is completed during enrollment and then annually in February thereafter, has been updated for 2016 with a few new questions and clarifications to existing questions. New variables have also been added to NHSN analysis output options, as applicable. To preview these updates, refer to the corresponding <a href="#">printable version of the survey</a> .
--	--

Dialysis Event Surveillance	<p>The <a href="#">Dialysis Event form</a> has been updated for events with event dates starting on January 1, 2016 onward:</p> <ul style="list-style-type: none"> <li>• If an “IV Antimicrobial Start” event is selected, a new question “Was this a new outpatient start or a continuation of an inpatient course?” with the answers of “New antimicrobial start” and “Continuation of antimicrobial” will display. This question will be optional until CDA implementation in 2017.</li> <li>• Under the “Risk Factors” section, a new question was added: “Patient’s dialyzer is reused?” with the answers “Yes” or “No”. This question will be optional until CDA implementation in 2017.</li> <li>• The “transient patient” question, was moved and to the end of the “Event Information” section.</li> <li>• If a “Positive Blood Culture” event is selected, the question “Where was the positive blood culture collected?” with the options “Dialysis clinic,” “Hospital or Emergency Department,” and “Other location,” is now a required field. This change corresponds to updated CDA.</li> <li>• References to “other access device” were clarified to “other vascular access device” under the “Risk Factors” section and the “Event Details” section.</li> </ul> <p>The <a href="#">Denominators for Dialysis Event Surveillance form</a> has been updated for denominator data collected for January 2016 onward:</p> <ul style="list-style-type: none"> <li>• Among the total patients reported, a new numeric field was added: “Number of these patients for whom dialyzers are reused”. Responses must be greater than or equal to zero, but less than or equal to the number of total patients reported.</li> </ul> <p>New variables have also been added to NHSN analysis output options, as applicable.</p>
Prevention Process Measures form	<p>The <a href="#">Prevention Process Measures form</a> has been updated for summary data collected for January 2016 onward:</p> <ul style="list-style-type: none"> <li>• The existing “Injection Safety” measure is being retired. In its place, two new measures are being added. Users can report the number of successful observations over the total number of observations for “Injectable Medication Preparation” and “Injectable Medication Administration”. These new measures correspond to the new CDC injection safety audit tools.</li> <li>• For in-plan reporting, a minimum of 10 “Injectable Medication Preparation” observations and a minimum of 20 “Injectable Medication Administration” are required.</li> </ul> <p>The new variables have also been added to NHSN analysis output options as applicable. Users can use these reports to monitor percent adherence to recommended practices for these two new measures.</p>
Event Entry - CLIP	<p>The rules for <a href="#">Central Line Insertion Practices (CLIP)</a> bundle adherence for patients “&gt;= 2 month olds” have been revised and some additional questions for chlorhexidine gluconate have been added. There is a new optional field if an antimicrobial coated catheter was used. There are associated analysis updates.</p>
Dialysis Facility and Locations	<p>The CMS Certification Number (CCN) “effective quarter” information has been removed from “Edit Facility Information” page for “AMB-HEMO – Hemodialysis Center” facility types.</p>

## Changes impacting facilities reporting via Clinical Document Architecture (CDA):

<p>LabID, CLIP, Dialysis Event- Implement new CDA using 'R2-D2.1 IG'</p>	<p>LabID events with specimen collection date =&gt; 2016 must use the R2-D2.1 version of the IG</p> <ul style="list-style-type: none"> <li>• Addition of required fields “Last physical overnight location of patient immediately prior to arrival into facility”; “Has been patient been discharged from your facility in the past four weeks?” and “Has patient been discharged from another facility in the past four weeks?”</li> <li>• Addition of Optional Fields: Race and Ethnicity</li> <li>• Addition of conditionally required series of questions if Pathogen=CRE-Klebsiella, CRE-E.coli, or CRE-Enterobacter: <ul style="list-style-type: none"> <li>./ "Was the bacterial isolate tested for carbapenemase?"; if “YES”, which tests were done?</li> <li>./ “Did the isolate test positive for carbapenemase?”; if “YES”, please identify which carbapenemase(s) were identified</li> </ul> </li> </ul> <p>CLIP events with insertion dates &gt;= 2016 MUST use the R2-D2.1 version of the IG</p> <ul style="list-style-type: none"> <li>• If there was a contraindication to chlorhexidine, the user will indicate the type of contraindication</li> <li>• Addition of Optional field- "Was Antimicrobial coated catheter used?"</li> </ul> <p>Dialysis numerators with event dates &gt;=2016 must use the R2-D2.1 version of the IG</p> <ul style="list-style-type: none"> <li>• If “Positive Blood Culture” is “Yes”, the question “Where was the positive blood culture collected?” must be answered</li> </ul>
<p>Event Entry – ICD-10 PCS and CPT transition</p>	<p>Keeping in line with the NHSN application, for CDA, a single ICD-10 PCS code or a single CPT code can be sent via CDA for procedures dated January 1, 2016 and going forward. The ICD-9 CM code will be accepted for procedures dated December 31, 2015 and prior.</p>
<p>CDA Direct</p>	<p>Updates were incorporated for LabID, CLIP, ICD-10 PCS and CPT (for Procedure, SSI, BSI and UTI).</p>
<p>AU Option</p>	<p>The additional drugs that were that were optional, for 2015 for AU CDA, will be required for =&gt;2016 data.</p>

<p>Summary Reports imported via CDA</p>	<p>Some versions of CDA were phased out for Summary Reports; the following CDA versions are accepted.</p> <ul style="list-style-type: none"> <li>• Denominators for Intensive Care Unit (ICU)/Other Locations (not NICU and SCA) <ul style="list-style-type: none"> <li>○ Summary's for dates =&lt; 2014 MUST use the R5 version of the IG</li> <li>○ Summary's for dates = 2015 CAN use the R5 or R2-D2.1 version of the IG</li> <li>○ Summary's for dates =&gt; 2016 MUST use the R2-D2.1 version of the IG</li> </ul> </li> <li>• Denominators for Neonatal Intensive Care Unit (NICU) <ul style="list-style-type: none"> <li>○ Summary's for dates =&lt; 2014 MUST use the R5 version of the IG</li> <li>○ Summary's for dates = 2015 CAN use the R5 or R2-D2.1 version of the IG</li> <li>○ Summary's for dates =&gt; 2016 MUST use the R2-D2.1 version of the IG</li> </ul> </li> <li>• Denominators for Specialty Care Area (SCA) <ul style="list-style-type: none"> <li>○ Summary's for dates =&lt; 2014 MUST use the R5 version of the IG</li> <li>○ Summary's for dates = 2015 CAN use the R5 or R2-D2.1 version of the IG</li> <li>○ Summary's for dates =&gt; 2016 MUST use the R2-D2.1 version of the IG</li> </ul> </li> <li>• Denominator for LabID: 'MDRO and CDI Prevention Process and Outcome Measures Monthly Monitoring. (a.k.a. LabID denominator or POM) <ul style="list-style-type: none"> <li>○ Summary's for dates =&lt; 2014 MUST use the R7 version of the IG</li> <li>○ Summary's for dates = 2015 CAN use the R7 or R2-D2.1 version of the IG</li> <li>○ Summary's for dates =&gt; 2016 MUST use the R2-D2.1 version of the IG</li> </ul> </li> </ul>
<p>Succession Management for Procedure and SSI events</p>	<p>When the Procedure or the SSI is updated using succession management, the outpatient fields are required to match exactly.</p>