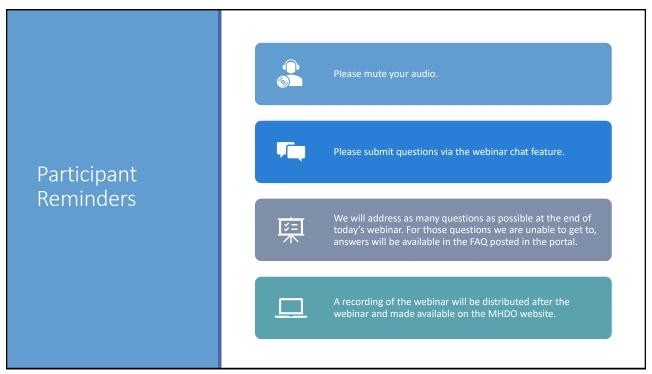


New Reporting Requirement Specific to Nursing Facilities

October 19, 2023

1:00 - 2:00pm EST

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Agenda



- · Welcome & Review of Agenda
- · Overview of MHDO
- Review New CDI Reporting Requirement
 - Rule 90-590 Chapter 270, Uniform Reporting System for Health Care Quality Data Sets
 - · Protocol for CDI Data Collection and Reporting
 - NHSN and CDI Data Submission
- Questions
- Support Resources
- Closing Remarks

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Maine Health Data Organization (MHDO)

MHDO.Maine.gov

The MHDO was created by the Legislature in 1995 as an independent executive agency (Title 22 Chapter 1683) that operates under the supervision of a multistakeholder Board of Directors.

The Governor appoints the members of the board. Board composition includes representation from: Payers, Hospitals, Providers, Home Health Care, Chiropractic, Consumers, Employers and, Government.

MHDO's purpose defined in law (Title 22, Chapter 1683) is to create and maintain a useful, objective, reliable and comprehensive health information data warehouse that is used to improve the health of Maine citizens and to promote transparency of the cost and quality of healthcare in the State of Maine by procedure, payer, facility, and provider in collaboration with the Maine Quality Forum (MQF).

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Maine Health Data Organization

The MHDO is responsible for the collection, secure storage, management and authorized release of healthcare data and information per the requirements defined in **Title 22**, **Chapter 1683**, and **thirteen agency rules**, including Rule Chapter **270**, *Uniform Reporting System for Health Care Quality Data Sets*

Data Sets submitted to MHDO include: private and public claims data, hospital inpatient and outpatient encounter data, hospital quality data, pharmacy data and hospital financial and provider organizational data.

MHDO maintains over 1 billion healthcare records and that number grows every month when new data is submitted.

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MHDO Rule Chapter 270, Uniform Reporting System for Health Care Quality Data Sets

Rule Chapter 270 defines the health care quality data sets and the provisions for filing the data sets to the Maine Health Data Organization.

The provisions include:

- Identification of the organizations required to report;
- Establishment of requirements for the content, form, medium, and time for filing health care quality metrics data:
- Establishment of standards for the data reported; and
- Compliance provisions.

(Note: Failure to report may result in up to a \$25,000 penalty as described in MHDO Rule Chapter 100, *Enforcement Procedures*)

MHDO Rule Chapter 270

Chapter 270, Section 2. E., 2. G., and 2. H.

E. Each nursing facility shall make a quarterly submission to the MHDO of data, separated by month, for *Clostridium difficile* Lab ID Events for all facility-wide residents (FacWidelN) in accordance with NHSN specifications beginning July 1, 2020. (Measure steward - NHSN).

G. Each health care facility shall authorize **Maine CDC** to have access to the NHSN for facility specific reports of data submitted for any healthcare associated infection measure under a state or federal mandate and shall authorize Maine CDC to use this data for data validation, public health surveillance and performance improvement purposes.

H. Each health care facility shall also authorize the **MHDO** to have access to the NHSN for facility-specific reports of data submitted for any healthcare associated infection measure under a state or federal mandate, for the purpose of public reporting.

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Reporting Timeline

Data Collection Begins on July 1, 2023.

- ➤ Data collected during each calendar quarter shall be submitted no later than the 15th day of the 5th month following the end of each quarter.
- ➤ The first quarterly data submission will be for data collected for the months of July-September 2023. The submission deadline is February 15th, 2024. Although facilities are required to make quarterly data submissions, separated out by month, facilities are urged to submit their data to NHSN each month.

Filing Periods and Deadlines

The Filing Periods and Deadlines are as Follows:

Collection Quarter	Months	Submission Date (no later than)
1st Quarter	January, February, March	August 15 th
2 nd Quarter	April, May, June	November 15 th
3 rd Quarter	July, August, September	February 15 th
4 th Quarter	October, November, December	May 15 th

Implementation of New Reporting Requirement and Suggested Timelines

April 2023	Informational webinar hosted by the Maine Health Care Association		
June 2023	Educational materials (including a copy of the webinar) will be available online at the Maine Infection Prevention Forum Website https://maineinfectionpreventionforum.org		
July 2023	CDI LabID event surveillance begins		
October 2023	2 nd Informational webinar hosted by the Maine Health Care Association		
October 24 th and November 2nd	One on One Support Sessions Available (details at end of presentation)		
	Surveillance Month & Data	Report Data to NHSN	
	July 2023	August 2023	
Basemmanded Banestina	August 2023	September 2023	
Recommended Reporting Timeline	September 2023	October 2023	
Timeline	October 2023	November 2023	
	November 2023	December 2023	

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Protocol for CDI Data Collection and Reporting

National Health Safety Network (NHSN) – LTCFs Resource Page: NHSN LTCF MDRO & CDI resource

page: MDRO & CDI | LTCF | NHSN | CDC

Protocol: LabID Surveillance for MDRO & CDI

events in LTCF (cdc.gov)

Surveillance

Surveillance includes positive isolates collected during an OP visit, such as an emergency department (ED) or clinic/office visit, when the resident returns to the LTCF on the day of the visit or the following calendar day (specifically, these residents remain under the care of the LTCF and the current admission date does not change due to the OP visit).

Specimens collected prior to admission to the LTCF or during an admission in another facility are NOT included in data submission for the reporting LTCF. (Page 5, 6, 14)

Note: Exceptions are not made for duplicate C. difficile positive laboratory assays, location, or admission/transfer dates, as all events must be submitted for accurate categorization and analyses. In return, NHSN will categorize the submitted CDI LabID events based on the CDI categories described in this protocol. (Page 5, 6, 14)

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Numerator "The Event"

- ➤ Event Form: <u>LabID MDRO CDI Event Form 57.138 (cdc.gov)</u>
 any information with an "*" is required information.
- ➤ Submit <u>ALL</u> CDI LabID Events to NHSN.
- C. difficile positive laboratory assay: (Page 13)
 - (1) An unformed/loose stool that tests positive for C. difficile toxin A and/or B or $\,$
 - (2) A toxin-producing C. difficile organism detected in an unformed/loose stool sample by culture or other laboratory means. (Note): The two most common tests in Maine are PCR and EIA.

➤Other Info:

- Patient identifiers (Facility ID, Resident ID, Gender, DOB, Ethnicity, Race)
- Date of first admission
- Date of current admission
- Event type
- Specimen collection date
- Specimen body site/system
- Specimen source
- Resident care location
- Primary resident service type (see list on event form)
- Has resident been transferred to an acute care facility in past 4 weeks? If yes, date of last transfer and is resident on antibiotic therapy for CDI at time of transfer to your facility?

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Denominator

- Denominator Form (monthly totals): MDRO and CDI Monthly Monitoring for LTCF (57.139) (cdc.gov)
- ➤ Denominator Form (daily totals): 57.142 Denominators Form for LTCF (cdc.gov)
- Resident Admissions refer to total number of residents admitted to the facility including both new and re-admissions (specifically, a resident that was out of the facility for more than two (2) calendar days and then returned). The total number of new and re-admissions is added for the complete calendar month and submitted to NHSN as Resident Admissions.
- ➤ Resident-Days are calculated using the daily census of residents in the facility each calendar day of the month. The daily total is added at the end of the calendar month and the total number is then submitted to NHSN as Resident Days.
- Number of Admissions on C. difficile Treatment is calculated by counting the number of residents who were receiving antibiotic therapy for C. difficile infection at the time of admission to your facility during the current calendar month.
- Number of Residents Started on Antibiotic Treatment for C. difficile is the total count of new prescriptions for an antibiotic/medication given to residents suspected or diagnosed with having a C. difficile infection in the facility for the calendar month and includes treatment with or without a positive laboratory test.

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NHSN LTCF Component MDRO & CDI LabID Event Module

The manual states the following:

"Facilities are encouraged to perform surveillance and reporting for at least 6 consecutive months to provide meaningful measures for analysis, but there is not a minimum reporting requirement." This is true on the federal level (page 6,14).

HOWEVER, the State requirement per the provisions in MHDO Rule Chapter 270, requires nursing facilities to report all 12 months of the year, starting 07/01/2023.

NHSN Data Access

To access the NHSN reports of data, MHDO has created an NHSN group named:

"MHDOnursingfacilityqualitydata"

To join the Group, the NHSN facility administrator (or user with administrative rights in your facility) will need to enter the 5-digit ID number and joining password.

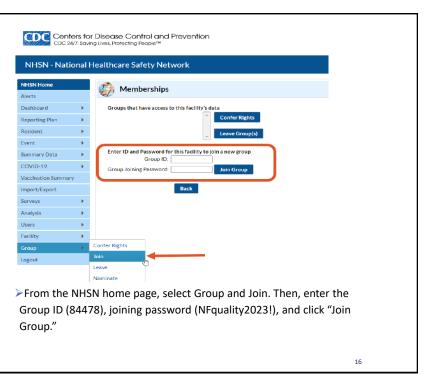
• 5-digit ID number: 84478

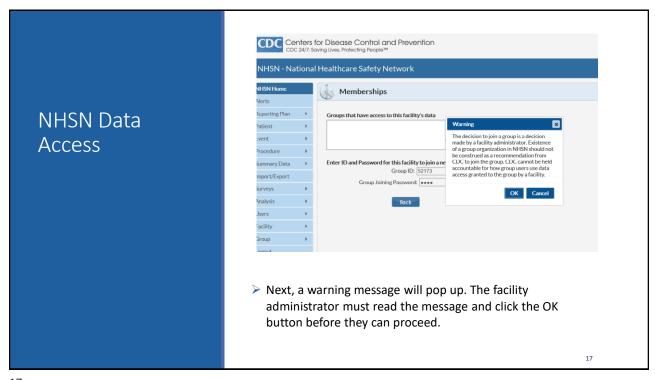
Joining password: NFquality2023!

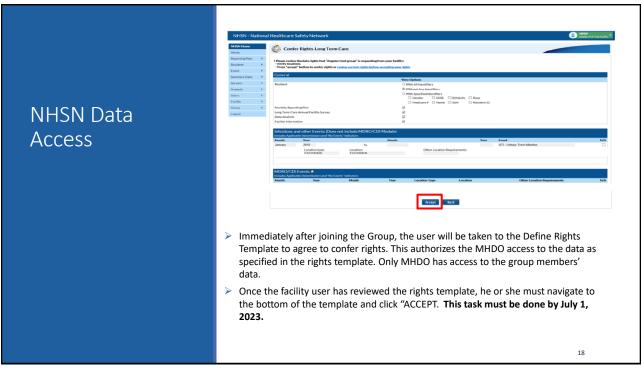
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NHSN Data Access







NHSN Data Access

More Instructions:

For detailed instructions on how to join the Group and to agree to confer rights, access the NHSN document titled, "Data Sharing in NHSN: Joining a Group and Accepting the Confer Rights Template" here:

http://www.cdc.gov/nhsn/pdfs/groups-startup/joingroupcurrent.pdf

This short video walks through the process of joining a group and conferring rights in NHSN:

https://www.youtube.com/watch?v=nCmh6oRJhoE

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Getting Started in NHSN

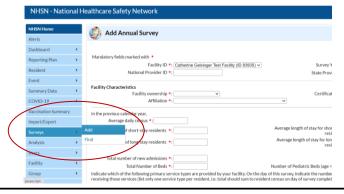
Monthly Reporting Plan
Entering *C.diff* events
Monthly Summary Data

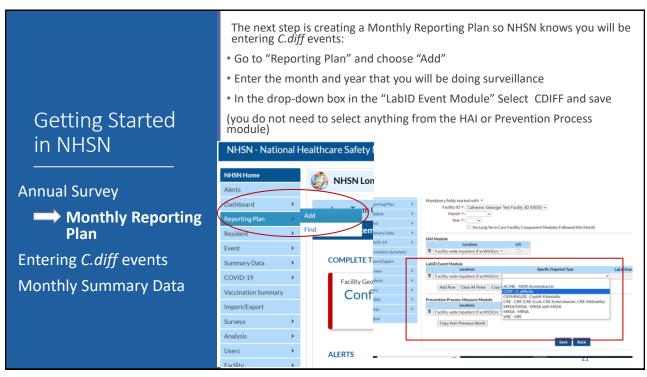
Before you can start entering *C.diff* events, there are a few administrative tasks that will need to be completed. The first step is completing last year's Annual Survey if that hasn't been done already.

Go to "Surveys," choose "Add" and fill in the required fields for the survey.

You can find the information you will need here: https://www.cdc.gov/nhsn/forms/instr/57.137-toi-annual-facility-survey.pdf

It might be helpful to gather your information ahead of time because the Annual Survey must be completed all at once (no saving and coming back):





Getting Started in NHSN

Annual Survey

Monthly Reporting Plan

Entering *C.diff* events

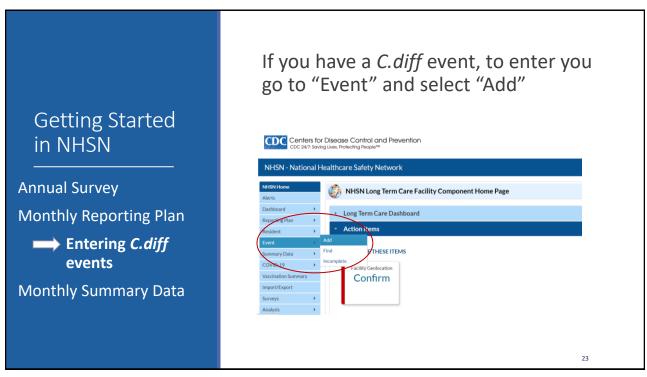
Monthly Summary Data

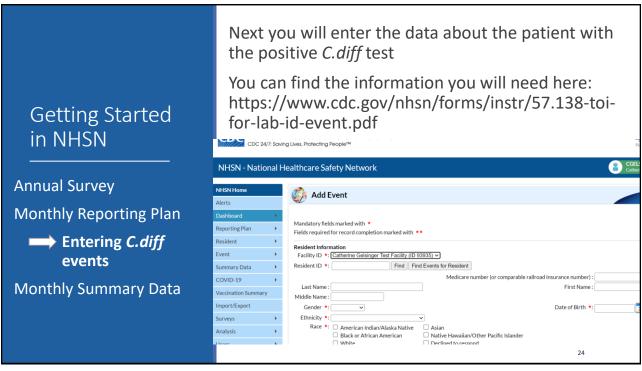
You will need to create a Monthly Reporting Plan for each month separately.

Unfortunately, there is no way to duplicate Reporting Plans for the entire year automatically. Many people create plans for the year all at once, so you don't have to think about it until the following year.

You can go back and edit your monthly reporting plans if you decide to add or delete a surveillance category.

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Getting Started in NHSN

Annual Survey

Monthly Reporting Plan

Entering C.diff events

Monthly Summary Data

What if I don't have any *C.diff* events to add for the month?

You will not enter any events, and will let NHSN know in your Monthly Summary Data (see next slides)

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Getting Started in NHSN

Annual Survey

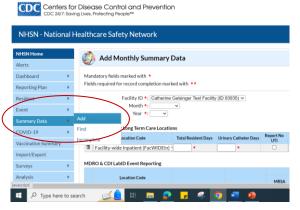
Monthly Reporting Plan

Entering *C.diff* events

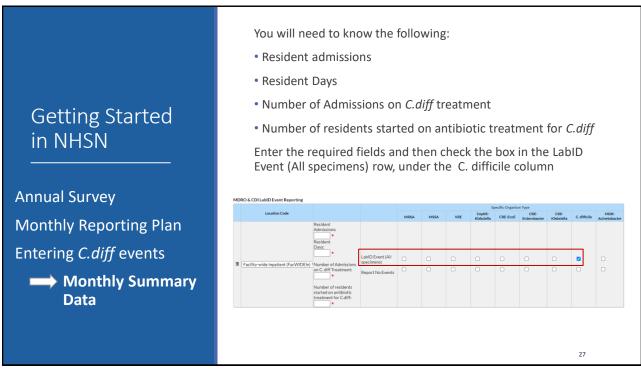
Monthly Summary
Data

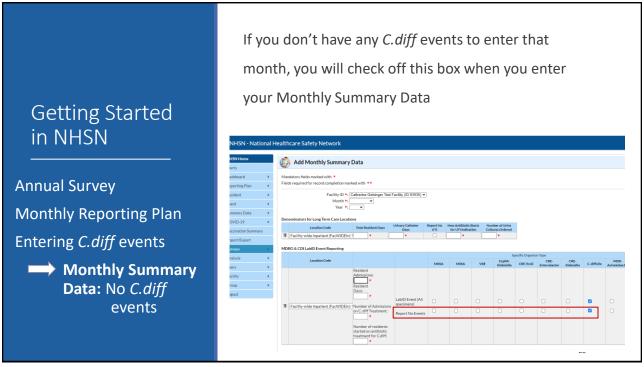
The next step is adding your Monthly Summary Data so that NHSN knows more about your residents and facility for that month. This information is used to calculate your infection rates

To add your facility data, go to "Summary Data" and select "Add"



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Getting Started in NHSN

More resources

Here are videos that can walk you through the steps to get started in NHSN:

NHSN Monthly Reporting Plan - Video #1: https://www.youtube.com/watch?v=nN0Jw-jxFco&t=85s

NHSN C. diff Events - Video #2: https://www.youtube.com/watch?v=EFAxtiT3zCk

NHSN Monthly Summary Data - Video #3: https://www.youtube.com/watch?v=Dwp8SebX6Lc&t=4s

Long-Term Care Facility Component Manual

There is useful information throughout the manual, but the most helpful sections for *C. diff* reporting are below. They include instructions and paper forms that can show you the information you'll need to have before entering data into NHSN.

- · Section 5: Annual Survey
- · Section 6: Monthly Reporting Plan
- Section 8: LabID event (for C. diff event reporting)
- · Section 10: Monthly Summary Data

NHSN Facility administrator

Do you need to add a new administrator, but the previous administrator no longer works at your facility? You can send a request directly to NHSN asking them to re-assign an administrator here: https://www.cdc.gov/nhsn/facadmin/index.html

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Support Resource

One on One Support Sessions

Rita Owsiak, HAI Coordinator, DHHS-Maine CDC-will be available for one on one sessions October 24th from noon-1pm ET and November 2nd from 2-3pm ET.

To schedule time with Rita please e-mail Maureen Carland at mcarland@mehca.org

Compliance Issues and General Questions

Kimberly Bonsant, Compliance Officer, Maine Health Data Organization

Email: Kimberly.Bonsant@maine.gov

Phone (207) 287-2296

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