





# Overview of NHSN Enrollment & Groups

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SAFER•HEALTHIER•PEOPLE<sup>™</sup>



- Brief overview of the NHSN training requirements and the NHSN Enrollment process
- How to join a group & confer rights

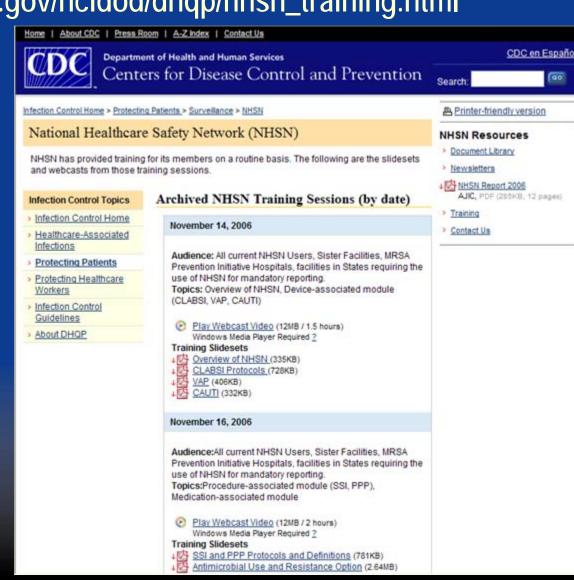
## NHSN Training Requirements

- NHSN requires that each user completes training relevant to their role in NHSN, prior to using NHSN
- Facility Administrators need to complete most of the training <u>prior</u> to starting the enrollment process
- Training not required prior to enrollment:
  - Analysis: Introduction
  - Analysis: Advanced
  - Groups
- Dialysis training is only required for Facility Administrators & users at an Outpatient Dialysis facility, or those performing surveillance in an Outpatient Dialysis location

## NHSN Training: NHSN Webcasts

http://www.cdc.gov/ncidod/dhqp/nhsn\_training.html

- Currently, training is available through archived webcasts
- Each webcast is 2 hours in length and includes corresponding slides in PDF documents
- 8 webcast videos total
- Windows Media Player required to view webcasts
- Available on NHSN Training website







- Self-study, web-based training courses are in development
- Each course should take approx. 20-30 minutes to complete, with randomized 10 question quiz at end
- Must pass each course with 80% or better to be considered complete





- Everyone will be required to complete each training course once, based on their rights/role
- Includes existing NHSN users
- Renewal of digital certificate will be dependent upon completion of individual's required courses
- Many courses will qualify for CE credit





Central Line-associated Bloodstream Infections (CLABSI)



Central Line-associated Bloodstream Infections (CLABSI)

**Begin** 







Central Line-associated Bloodstream Infections (CLABSI)

Introduction

Hide Menu

Definitions & Protocols

Collecting CLABSI data

Using CLABSI data

### Key Terms: Transfer Rule

If the BSI develops in a patient within 48 hours of transfer from one inpatient location to another, indicate the *transferring* location on the infection report.

Example: A patient with a central line is transferred from the Orthopedic ward to the Medical-Surgical ICU on Monday. On Tuesday afternoon, he spikes a fever and is determined to have a CLABSI. The location of the CLABSI is recorded as the Orthopedic Ward.

NOTE: It is not required to monitor for CLABSIs after the patient is discharged from the facility. However, if discovered, they should be reported to NHSN. No additional central line days are recorded.











#### Ventilator-associated Pneumonia (VAP)

Hide Menu

Introduction

Key Terms & Protocols

Collecting VAP Data

Using VAP Data

References

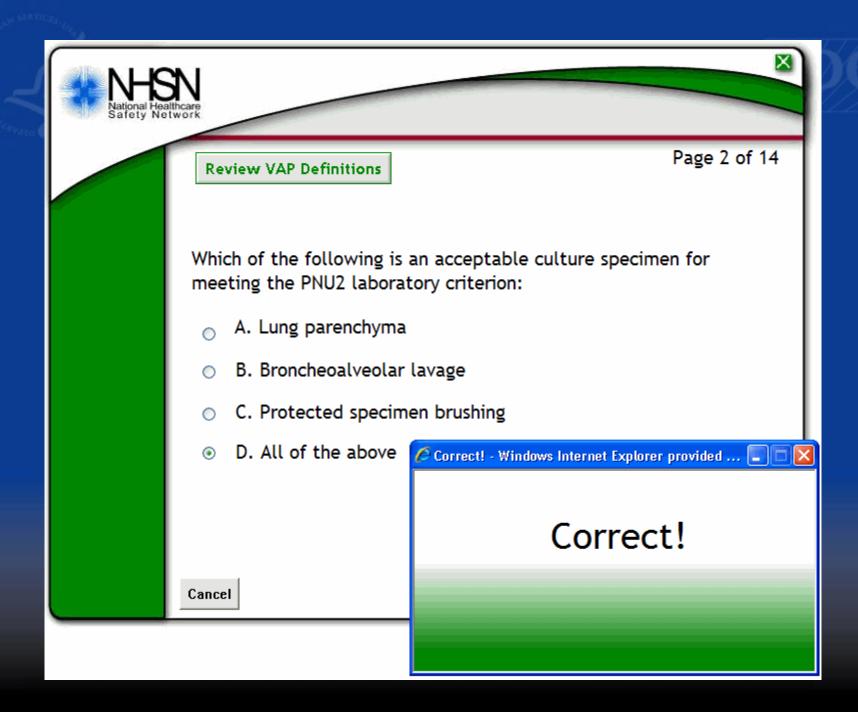
#### Example:

On September 10, Susan Smith was intubated in the Emergency Department of General Hospital following a spontaneous pneumothorax which occurred at the school where she teaches. She was connected to a ventilator and transferred to the Respiratory ICU. On September 12 she was extubated and removed from the ventilator, but on September 13 it is determined that she meets the surveillance criteria for pneumonia.

Would this pneumonia be considered ventilatorassociated? Please answer yes or no in the space provided.



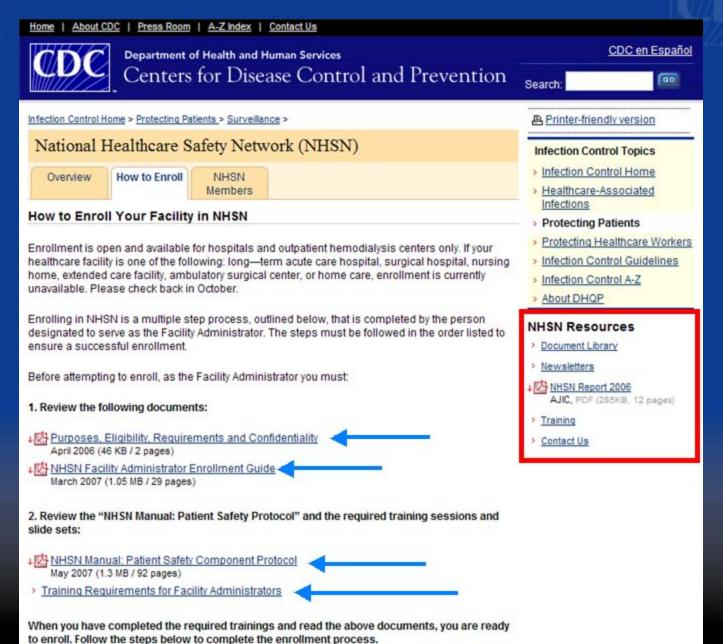






- Available Fall 2008
- Stay tuned to the NHSN
   Members page for Training updates

### http://www.cdc.gov/ncidod/dhqp/nhsn\_howToEnroll.html



## NHSN Facility Administrator

- Only person who can enroll a facility
- Only one Facility Administrator per facility
- Responsible for initially adding users and assigning user rights
  - Additional users with administrative rights in NHSN can add other users

### http://www.cdc.gov/ncidod/dhqp/nhsn\_howToEnroll.html

Before attempting to enroll, as the Facility Administrator you must:

#### 1. Review the following documents:

- Purposes, Eligibility, Requirements and Confidentiality April 2006 (46 KB / 2 pages)
- March 2007 (1.05 MB / 29 pages)
- 2. Review the "NHSN Manual: Patient Safety Protocol" and the required tra slide sets:
- ↓ NHSN Manual: Patient Safety Protocol
  January 2008 (1.21 MB / 98 pages)
- > Training Requirements for Facility Administrators

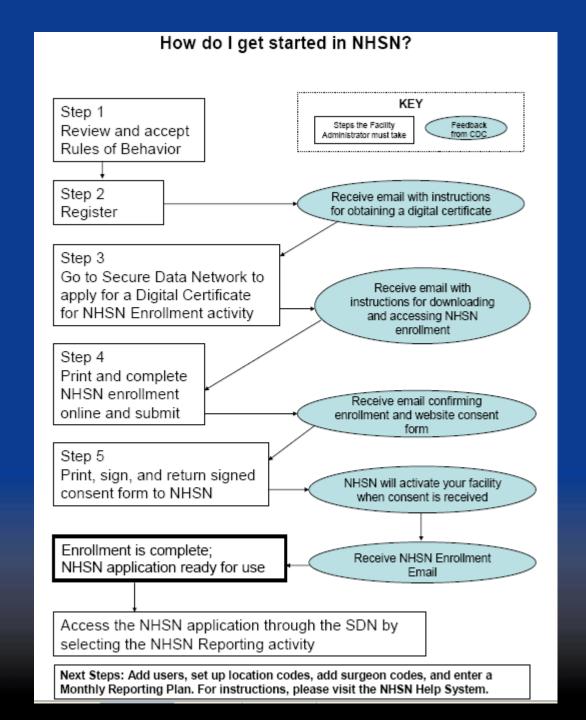


NHSN Facility
Administrator
Enrollment Guide

Updated: 03/23/2007

DEPARTMENT OF HEALTH AND HUMAN SERVICES

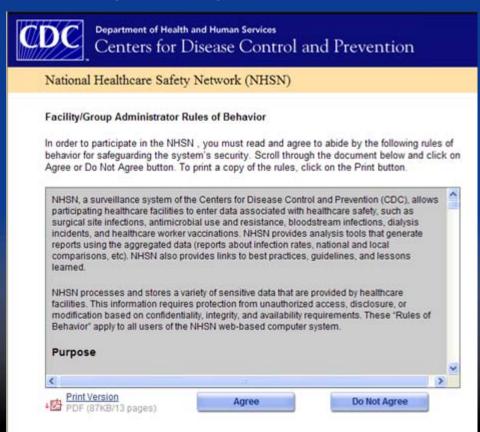
CENTERS FOR DISEASE CONTROL AND PREVENTION SAFER HEALTHIER PEOPLE"



## Step 1: Review & Accept the Rules of Behavior

After you have completed the required trainings, go to:

http://www.ncid.cdc.gov/RegistrationForm/admin.htm



## Step 2. Register

Personal Information			
*Last name: Doe			
*First name: Jane			
Middle name:			
*Email address: JDoe@organization.org			
Facility Identifier			
*Please select a facility identifier:  CMS ID ⊙ AHA ID ○ VA Station Code ○  CDC Registration ID ○ None ○			
*Selected identifier ID: 123456789			
NHSN Training Date			
*I certify that I have completed all of the appropriate,			
required NHSN trainings on: 11/01/2007			
Reset Save			



- You <u>must</u> use the same email address throughout the NHSN enrollment process. This includes your application for a digital certificate.
- Allow nhsn@cdc.gov and PHINTech@cdc.gov to come through your organization's email spam blockers



Make sure the following site is listed as a trusted site in your browser and pop-ups are allowed:

\*.cdc.gov

## Get email with instructions for obtaining digital certificate

Welcome! You are now registered in the National Healthcare Safety Network (NHSN).

In order to begin the NHSN enrollment process, you will need to obtain and install a digital certificate onto your computer.

Follow the instructions in the document "NHSN Facility Administrator Enrollment Guide" beginning at Step 3, to obtain and install the digital certificate so that you will be able to access the NHSN application through CDC's Secure Data Network (SDN). This document can be accessed at: http://www.cdc.gov/ncidod/dhqp/nhsn documents.html .

From the Centers for Disease Control and Prevention - Digital ID Enrollment page, <a href="https://ca.cdc.gov">https://ca.cdc.gov</a>, you will be prompted for the enrollment password, which is: !cdc sdn apply! (Be sure to include the exclamation points and use lower case and underscores.) Follow the onscreen instructions to apply for a digital certificate.

During the process, you will be prompted to select a Program and a Program-specific Activity.

For Program, select: National Healthcare Safety Network (NHSN)
For Activity, select: NHSN Enrollment

VERY IMPORTANT: After you obtain and install your digital certificate (Step 3d in the NHSN Facility Administrator Enrollment Guide), access the SDN (<a href="https://sdn.cdc.gov">https://sdn.cdc.gov</a>), enter your challenge phrase and select NHSN Enrollment from the list in the upper left corner titled "My Applications". This will launch the NHSN Enroll Facility page. Be sure to indicate yourself as the NHSN Facility Administrator.

If you have difficulties obtaining a digital certificate, please contact SDN at 800-532-9929 or 770-936-3636 or PHINTech@cdc.gov.

If you have any questions about NHSN, please contact us at 800-893-0485 or nhsn@cdc.gov. Information on NHSN is also available on the members'
website at <a href="http://www.cdc.gov/ncidod/dhgp/nhsn">http://www.cdc.gov/ncidod/dhgp/nhsn</a> members.html .





# Step 3: Go to SDN to apply for a digital certificate for NHSN Enrollment activity

## What is the SDN?

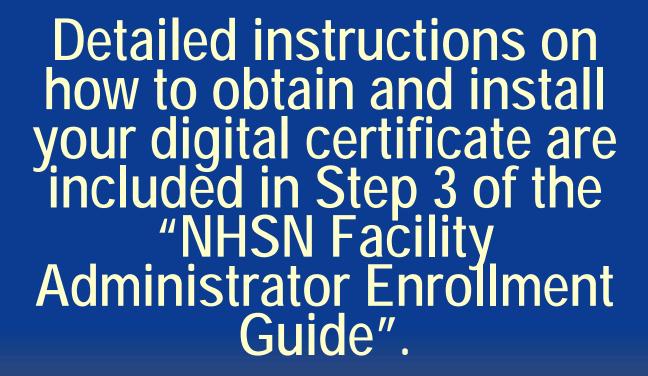
- SDN = Secure Data Network
  - Provides security control services to most CDC systems, including NHSN
    - Physical and environmental controls The computer room that houses NHSN is physically secure and environmental controls are used to protect NHSN computing resources from system damage or failure.
    - Network controls The SDN is located behind a firewall and is protected by a centralized security gateway (proxy server).
    - User Authentication All users must authenticate their identities with digital certificates

## What is a Digital Certificate?

- A digital certificate provides an electronic means of proving your identity in order to securely conduct business with NHSN. Digital certificates provide the following benefits:
  - Data being sent to NHSN is encrypted so that only NHSN can read it
  - Provides assurance to NHSN that the data has not been changed in transit
  - Certifies that the certificate owner actually sent the transmission

## Additional information about Digital Certificates

- User specific do not share your digital certificate with another user!
- Installed on your computer (you may need the assistance of your IT department)
- Make a copy as soon as it is installed
- Can be installed on additional computers
- CDC pays for the digital certificate
- When applying, request Program: National Healthcare Safety Network, Activity: NHSN Enrollment







To access NHSN via the SDN, go to:

https://sdn.cdc.gov

- Enter your challenge phrase (created when you applied for a digital certificate)
- After you are logged in, click on "NHSN Enrollment"





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

NHSN - National Healthcare Safety Network

Contact us

<u>Start</u> <u>Leave Enroll</u>

#### **Enroll Facility**

Please Select Desired Option

Access and print required enrollment forms

1

Enroll a facility

If you have not completed these forms, obtain the forms now and complete them before proceeding

eader for PDF files

The enrollment forms are also available on the NHSN members page, in the Document Library.



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Start Leave Enroll

#### **Enroll Facility**

**Please Select Desired Option** 

Access and print required enrollment forms

Enroll a facility



If you have already completed your Hospital Survey and Contact Information forms



Get Adobe Acrobat Reader for PE



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Start Leave Enroll

#### **Facility Enrollment**

	<b>,</b>	
Mandatory fields marked with * Tracking #		Print PDF Form
Facility Information		
Facility name*:		
Address, line 1*:		
Address, line 2:		
Address, line 3:		
City *:		
County*:		
State*:	~	
Zip Code *:	-	
Main telephone number*:		
For each identifier listed below, e that identifier	enter the number / code, or check	Not Applicable if your facility does not have
AHA ID*:		Select 🗌 if AHA ID Not Applicable
CMS ID*:		Select 🗌 if CMS ID Not Applicable
VA station code*:		Select $\ \square$ if VA Station Code Not Applicable
Verify Data	Click to verify values provided a	above before proceeding.

## About the identifier

For each identifier listed below, enter the number / code that identifier	e, or check Not Applicable if your facility does not have	
AHA ID*: N/A	Select 🗹 if AHA ID Not Applicable	
CMS ID*: 123456789	Select 🗆 if CMS ID Not Applicable	
VA station code*: N/A	Select 🗹 if VA Station Code Not Applicable	
Verify Data Click to verify values provided above before proceeding.		

- Enter only numbers no dashes or spaces
- Enter only one identifier and check "N/A" for other identifiers
- If your data does not verify, contact NHSN
- If you do not have any of the listed identifiers, contact NHSN
- After data verifies, enter data from the Hospital Survey and submit.

## Once enrollment is submitted, you will receive an email to access the Agreement to Participate and Consent form

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: DHQP Memorial Hospital

Tracking Number: 10000

NHSN Facility Administrator:

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  $\underline{\text{NHSN}}$ , please contact us at  $\underline{\text{nhsn@cdc.gov}}$  or 800-893-0485. For information on the  $\underline{\text{NHSN}}$ , please visit the member's website at  $\underline{\text{http://www.cdc.gov/ncidod/dhqp/nhsn members.html}}$ .





# Step 5: Print, sign and return signed Consent Form to NHSN



#### Agreement to Participate and Consent

CMB No. 0900-0966 Esp. Date: 02-09-0000

\*Tracking #\_\_\_\_\_\_
ted protocols and report complete tatus in the NHSN.

Must have PS Primary Contact signature

## Primary Contact(s) As the Primary Contact(s), I/we consent to follow exactly the selected protocols and report complete and accurate data in a timely manner in order to maintain active status in the NHSN. NHSN Patient Safety Primary Contact Person \*Signature:\_\_\_\_\_\_\*Date: NHSN Healthcare Personnel Safety Primary Contact Person (if different from Patient Safety Primary Contact \*Signature:\_\_\_\_\_\_\*Date:\_\_\_\_\_ Official Authorized To Bind This Facility To The Terms Of This Agreement (e.g., COO/CEO/CEO) As an official authorized to bind the facility specified below, I warrant that I have read and that I understand the terms of this agreement and hereby consent to allow the facility to participate in the NHSN. \*Signature: \*Date: Facility Name: \*Main Facility Telephone Number: \*Street Address: \*City: \*State: \*ZIP:\_\_\_ -

Must have a C-level signature!



- The original signed copy must be sent to CDC
- Send via U.S. mail
- NHSN will return any Agreement to Participate and Consent that is not completed correctly



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: Facility ID #:

As the Facility Administrator, you will now need to access the NHSN through the SDN (<a href="https://sdn.cdc.gov">https://sdn.cdc.gov</a>) 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 <a href="Users">Users</a> section of the navigation bar. Add locations and surgeons from the navigation bar under the heading <a href="facility">Facility</a>.

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 800-893-0485 or <a href="mailto:nhsn8cdc.gov">nhsn8cdc.gov</a>. Information on NHSN is also available on the members' web site at <a href="https://www.cdc.gov/ncidod/dhqp/nhsn">https://www.cdc.gov/ncidod/dhqp/nhsn</a> members.html

## Enrollment is complete!

NHSN Facility Administrator can now access NHSN Reporting through the SDN to add users and set up facility for reporting in NHSN.

# Recap: 5 Step NHSN Enrollment Process

### Facility Administrator -

- 1. Reviews and accepts Rules of Behavior
- 2. Registers
- 3. Applies for and installs an SDN digital certificate for NHSN Enrollment activity
- 4. Prints, completes and submits enrollment forms online
- 5. Prints, signs and returns Consent Form to NHSN

### Click on NHSN Reporting



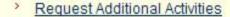
#### Public Health Partners

You are logged in as Maggie Dudeck

#### My Applications

National Healthcare Safety Network (NHSN)

- NHSN Enrollment
- > NHSN Reporting



#### Electronic Reference

Select a database and search term to locate journals.

Database:

PubMed



Search for:

Search

#### Morbidity and Mortality Weekly Report

This Week in MMWR November 9, 2007 / Vol. 56 / No. 44.

- Great American Smokeout -- November 15, 2007.
- Cigarette Smoking Among Adults United States, 2006
- Salmonella Typhimurium Infection Associated with Raw

Recommendations and Reports November 2, 2007 / Vol. 56

- Interpreting and Managing Blood Lead Levels <10 µg/dL n Lead: Recommendations of CDC's Advisory Committee
- Appendix: Guide to Resources for Parents

F. Download .pdf document of this issue

Surveillance Summaries October 19, 2007 / Vol. 56 / No.

3

National Surveillance for Asthma — United States, 1980

### NHSN is ready for users to be added and set up



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NHSN - National Healthcare Safety Network

NHSN Home | My Info | Contact us | Help | Log Out

👸 NHSN Home

Reporting Plan

Patient

Event

Procedure

**Summary Data** 

Analysis

Surveys

Users

**Facility** 

Group

Log Out

Logged into DHQP Memorial Hospital (ID 10000) as MAGGIE. Facility DHQP Memorial Hospital (ID 10000) is following PS component.

#### Welcome to the NHSN Home Page.

Use the Navigation bar on the left to access the features of the application.

NHSN maintenance may occur nightly between 12am and 6am Eastern time.



Get Adobe Acrobat Reader for PDF files

Assurance of Confidentiality: The 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)).

 Set up includes adding locations. NOTE: Locations must be added before entering a monthly reporting plan.







- See "Enrollment & Set-Up" webcast for step-by-step training
- Refer to the CDC Locations section of the NHSN Manual: Patient Safety Component Protocol for CDC locations & descriptions
- Step-by-step instructions in NHSN Online Manual ("Help")







Reporting Plan

Patient

Event

Procedure

**Summary Data** 

Analysis

Surveys

#### Users

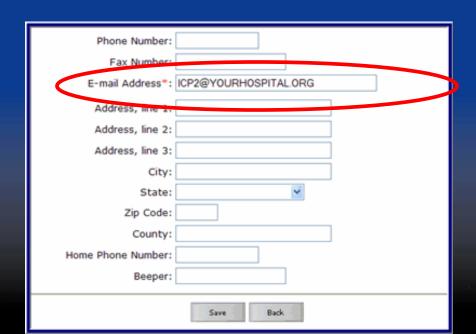
- Add
- Find

Facility

Group

Log Out

- When adding users, make sure email address is correct!
- Step-by-step instructions can be found in NHSN Online Manual ("Help")

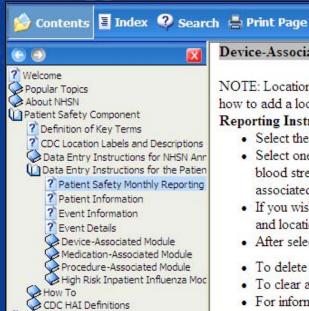






### NHSN Online Manual





Analysis

#### Device-Associated Module

NOTE: Locations must be set up in NHSN before entering a Plan for the Device-associated Module. For instructions on how to add a location, click here.

#### Reporting Instructions

- · Select the first inpatient location you wish to follow for the month.
- . Select one or more events that will be monitored during the selected time period for that unit: Central line-associated blood stream infection (CLABSI), Dialysis incident (DI), Ventilator-associated pneumonia (VAP), Catheterassociated urinary tract infection (CAUTI).
- . If you wish to follow the data collection plan from the previous month, select "Copy from Previous Month". Events and locations used in the previous month will automatically populate the fields.
- After selecting events for a location, click on "Add Rows" to add another unit.
- To delete one row, click on the trash can on the left of the row you wish to delete.
- . To clear all of the rows in this section, click on "Clear All Rows".
- For information on the data collection methodology for the Device-Associated Module, please click here.

#### Procedure-Associated Module

#### Procedure-Associated Module

#### Reporting Instructions

- · Select the first procedure you wish to follow for the month.
- Select one or more events that will be monitored during the selected time period for that procedure: Surgical Site Infection (SSI) and/or Post-Procedure Pneumonia (PPP).
- . If you will be monitoring SSI, select the setting you would like to monitor during the selected time period for that procedure: IN - Inpatient. OUT - Outpatient. or BOTH - Inpatient and Outpatient.
- · If you will be monitoring PPP, Inpatient is the only location option.
- If you wish to follow the data collection plan from the previous month, select "Copy from Previous Month". Events used in the previous month will automatically populate the fields.
- · After selecting events for a location, click on "Add Rows" to add another unit.





# Groups

### What is a Group?

A Group is a collection of facilities that have joined together within the NHSN framework to share some or all of their data at a single (Group) level for a mutual purpose (e.g., performance improvement, state and/or public reporting).

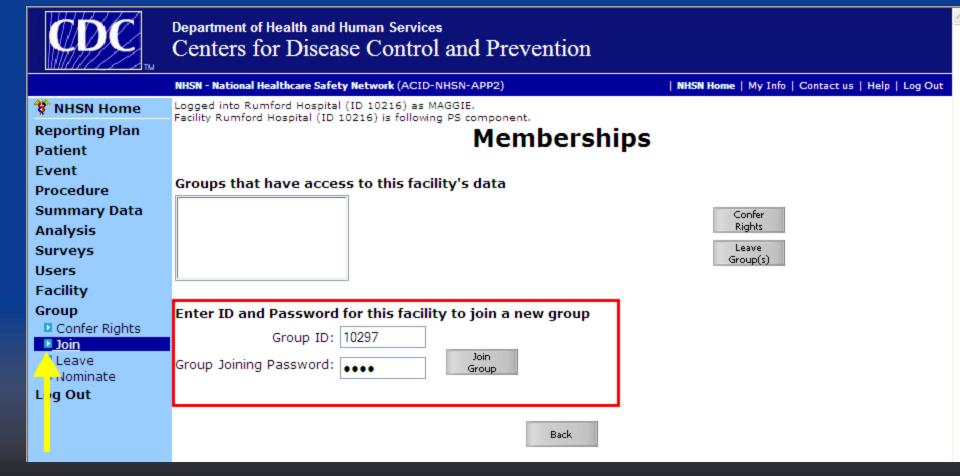
### Join a Group

- From the Group section of NHSN Nav Bar, the Facility Administrator selects Join
- Enters the Group ID
- Enters the Group Joining Password
  - Clicks on Join Group
- Group ID and joining password will be provided by an individual at the Group level





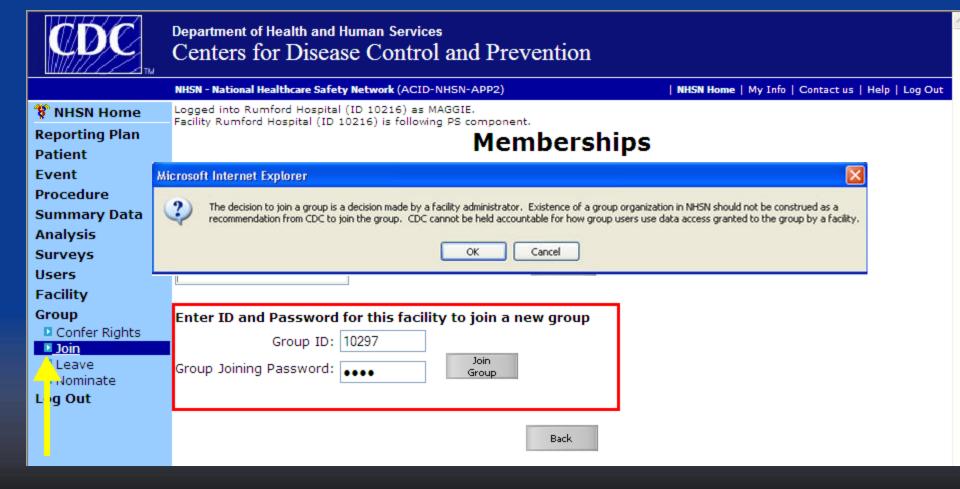
### Join a Group

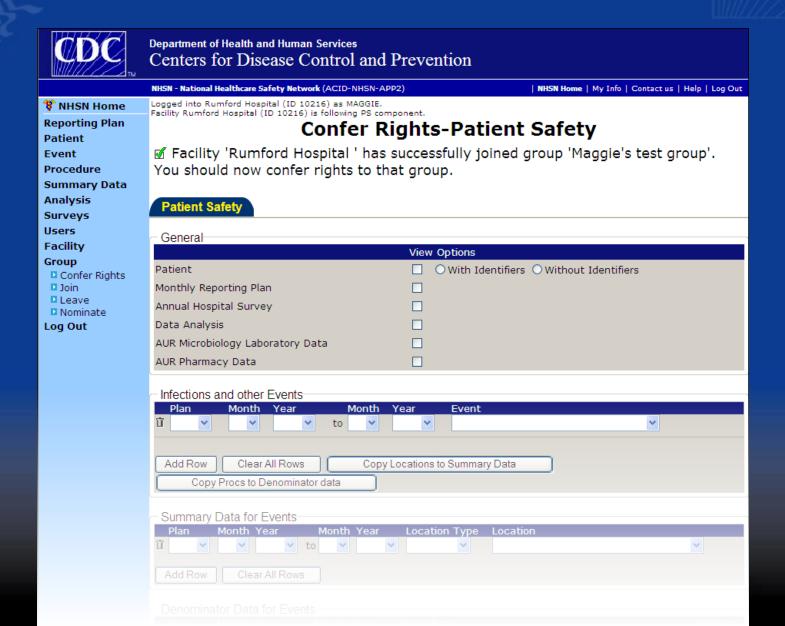






### Join a Group

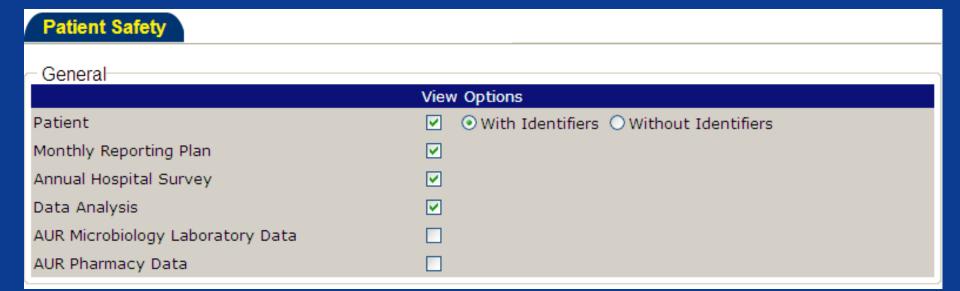




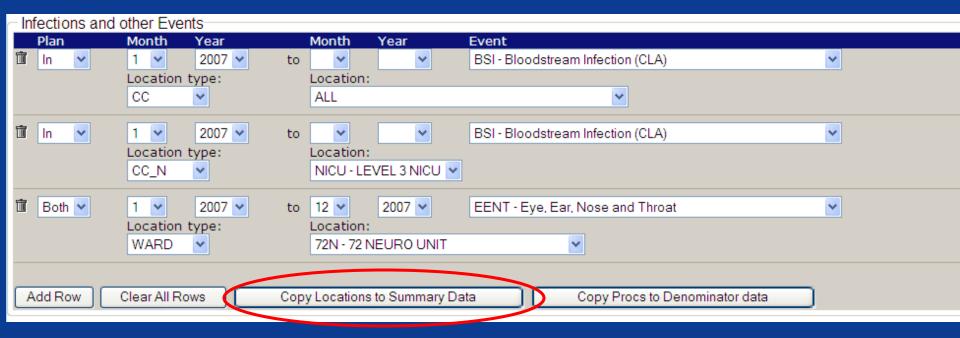
### **About Conferring Rights**

- Facility gives access rights to certain pieces 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
- Facilities can confer rights
  - -By Plan status
  - -By Location
  - -By Date Range
  - –By Procedure/Setting
  - -By Event





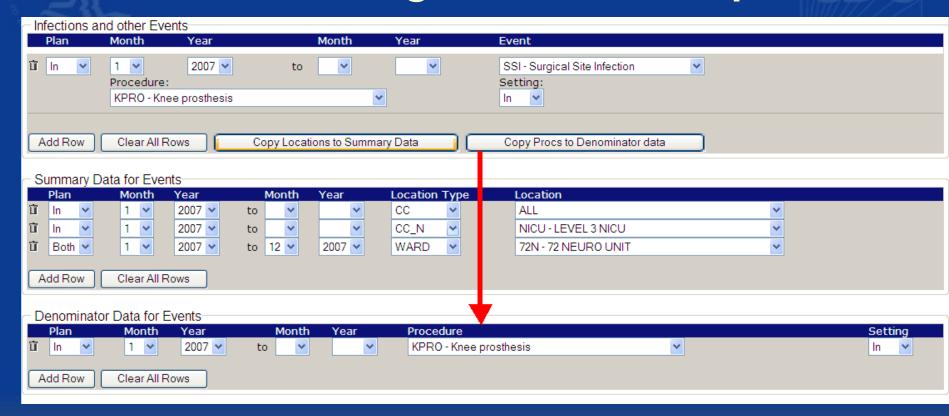
- Confer rights to patient data, with or without identifiers
- Conferring rights to the Annual Hospital Survey will allow the Group to see the Facility's name, address, phone, and facility type



- Plan options include: All, In, Out, and Both
- If "In" is selected, only rights to protocol events can be conferred (CLABSI, VAP, SSI, CAUTI, etc.)



Can copy all locations to the Summary Data rights section



Can copy all procedures to the Denominator
 Data rights section

### Managing Group Memberships



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

m	Centers for Disease Control and Prevention	
	NHSN - National Healthcare Safety Network (ACID-NHSN-APP2)	NHSN Home   My Info   Contact us   Help   Log Out
🌹 NHSN Home	Logged into DHQP MEMORIAL HOSPITAL (ID 10018) as MAGGIE. Facility DHQP MEMORIAL HOSPITAL (ID 10018) is following PS component.	
Reporting Plan	Memberships	
Patient	Memberships	
Event Procedure	Groups that have access to this facility's data	
Summary Data	Teresa's test group (10049)	Confer
Analysis	HCW Group (10168) Test Group MMS (10231)	Rights
Surveys	Test MMS2 (10240)	Leave Group(s)
Users	Test Group MMS again (10246)	
Facility		
Group	Enter ID and Password for this facility to join a new group	
□ Confer Rights □ Join	Group ID:	
□ Leave □ Nominate	Group Joining Password: Join Group	
Log Out		
	Back	



## Contact Information: nhsn@cdc.gov

Important web addresses:

http://www.cdc.gov/ncidod/dhqp/nhsn\_members.html

http://www.cdc.gov/ncidod/dhqp/nhsn\_training.html

http://www.cdc.gov/ncidod/dhqp/nhsn\_howToEnroll.html