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How did infection control programs start and why are there infection control professionals hospitals?



- 1950s: Outbreaks of infection in nurseries nationwide
- 1960s: JCAH adds standard for infection control
- 1970s: JCAH standard strengthened to include trained person designated to conduct infection surveillance, prevention and control activities
 - CDC establishes training curriculum and courses
 - CDC establishes the National Nosocomial Infections Study (NNIS)



- 1980s: CDC reports finding of SENIC and establishes that 32% of hospitalassociated infections are preventable if surveillance, prevention and control activities are conducted by trained infection control professionals and hospital epidemiologists
 - APIC takes over training courses from CDC
 - APIC establishes certification for ICP

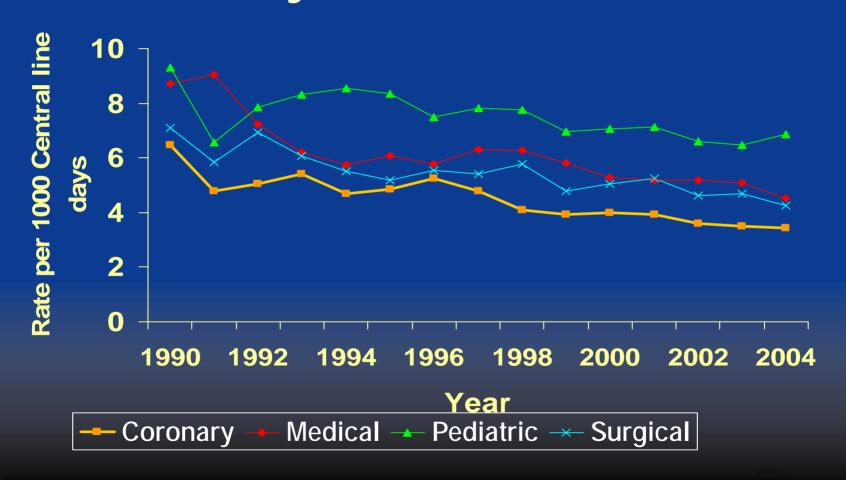


- 1990s: NNIS system expands to >300 hospitals
 - Protocols for targeted surveillance of high risk patients yield data useful for inter- and intra-hospital comparisons
 - NNIS Reports published annually
- 2000s: Patient safety brings spotlight on infection control and helps drive many prevention initiatives
 - State mandates for public reporting



- Standard definitions for events
- Specified monitoring protocols
- Feedback of actionable data to participants
- Trained personnel for data collection and for prevention & intervention (e.g., ICP)

Central Line-Associated BSI Rates, By ICU Type, NNIS System, 1990 - 2004

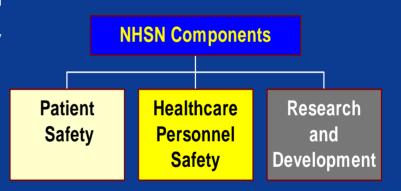


Purposes of NHSN

- Describe the epidemiology of adverse events among patients in U.S. healthcare facilities
- Monitor compliance with proven infection prevention practices in U.S. healthcare facilities
- Promote epidemiologically-sound surveillance methodology
- Establish comparative rates that can be used for local quality improvement efforts
- Conduct collaborative research with members



- Patient Safety
 - Extension of NNIS and DSN
- Healthcare Personnel Safety
 - Extension of NaSH
- Research and Development
 - One-time surveys
 - Pilot studies



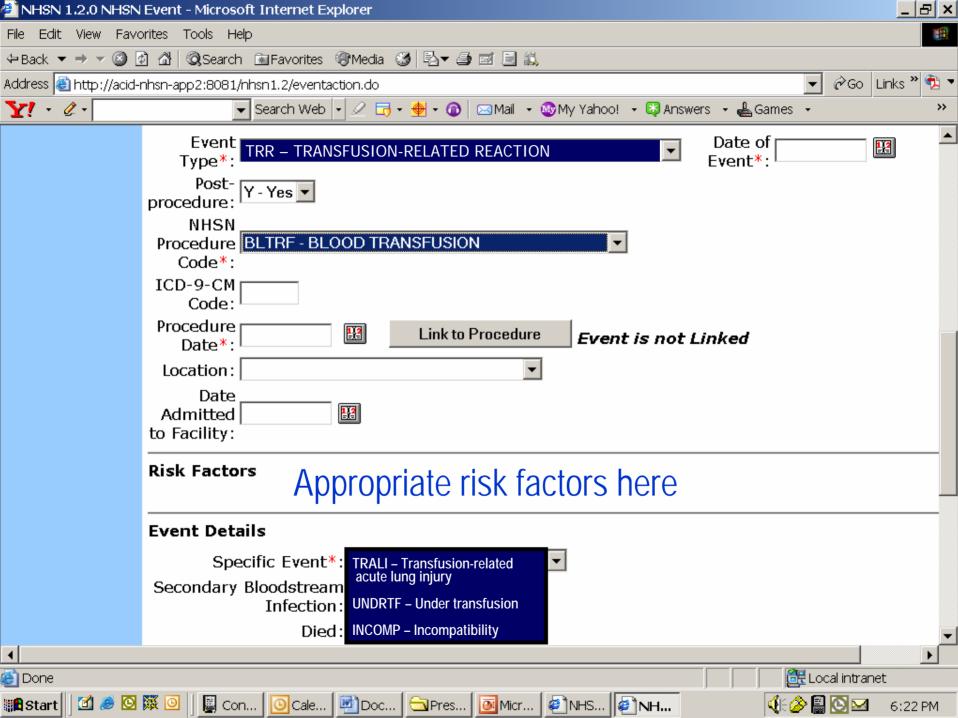
NHSN is a voluntary, confidential system

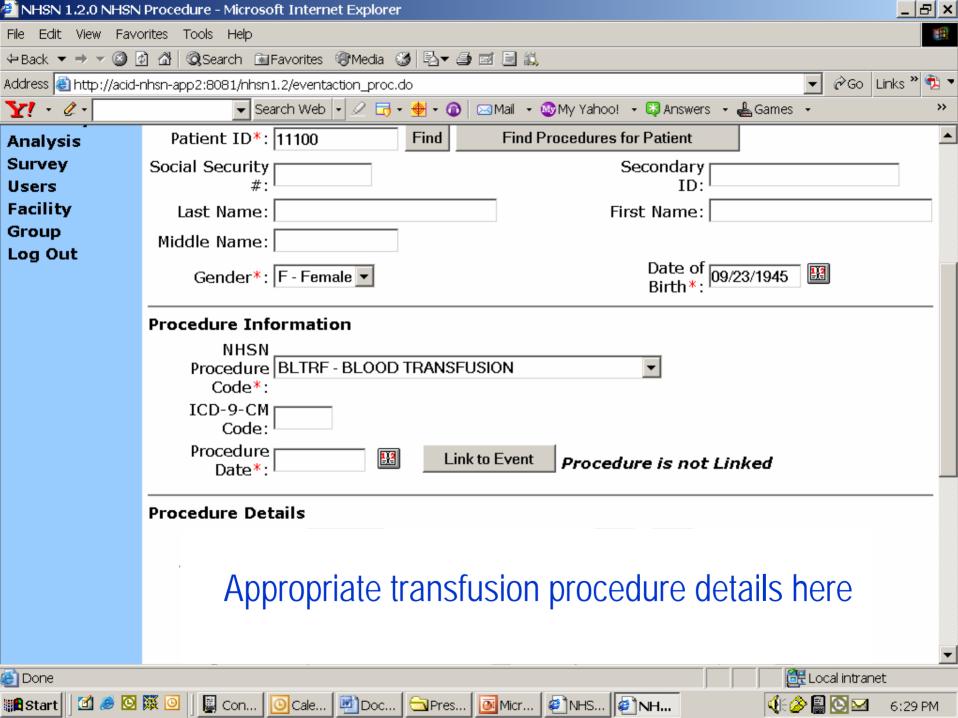
How the Patient Safety Component Works

- Device-associated
 - Facility chooses the events/processes to monitor and the patient populations (locations) on which to focus
- Procedure-associated
 - Facility chooses the events/processes to monitor and the procedures on which to focus
- Medication-associated
 - Facility chooses to report antimicrobial resistance data from microbiology, antimicrobial use data from pharmacy, or both

Possible Model for Recipient Surveillance in NHSN

- Procedure-associated Module
 - Transfusion-related events
 - Numerator data = Patient data, transfusion reaction data (e.g., incompatibility; under transfusion; transfusion reaction acute lung injury [TRALI]), risk factors
 - Denominator data = Relevant information on each blood product transfusion procedure (type of product, origin, dates, etc.)
 - ? Process monitors





How Data are Shared in NHSN

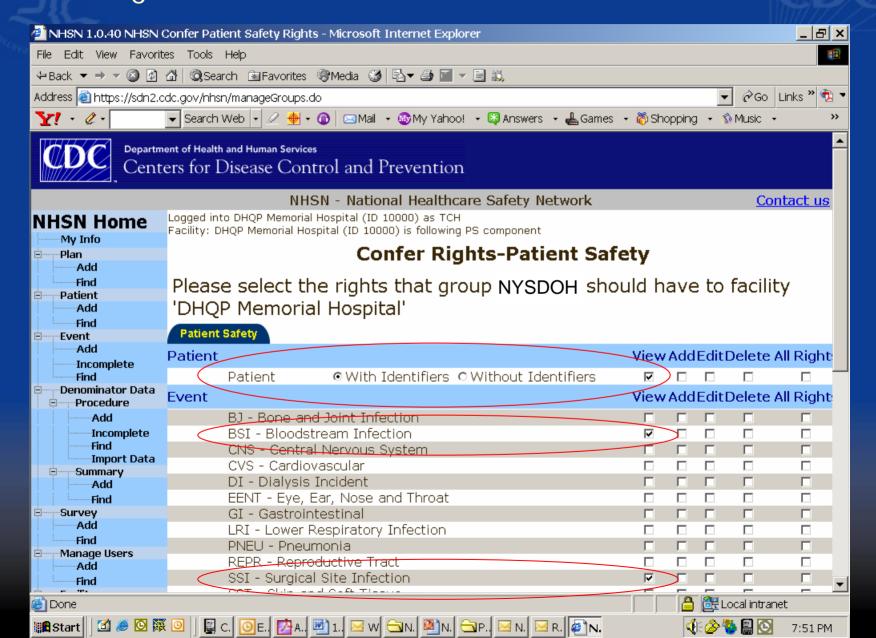
 CDC does not send NHSN data to State health departments or other entities

- Health departments or others obtain data directly from NHSN facilities
 - By becoming a Group in NHSN
 - By accepting data files or reports from facilities

NHSN Data Sharing: Group

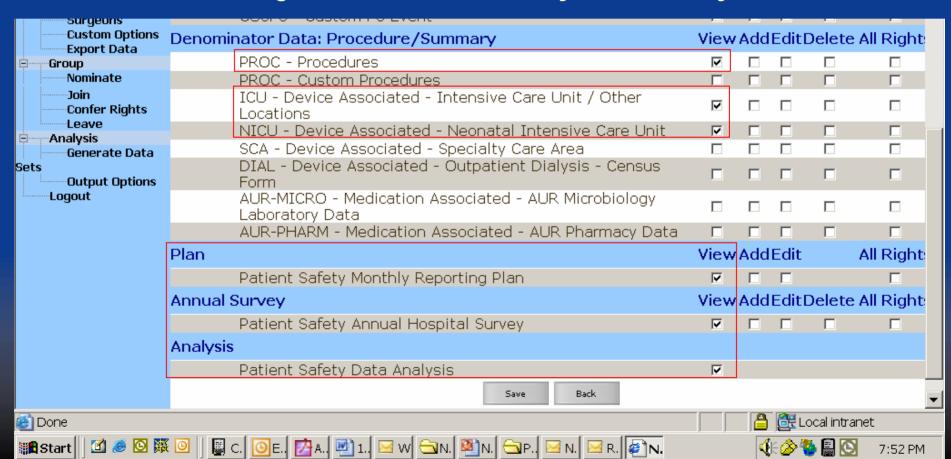
- A Group can enroll in NHSN
- An NHSN facility joins the Group
- Facility gives access rights to certain of its data to the Group
- Group can analyze the data of its member facilities

View rights for Patient With Identifiers, BSI and SSI Events



View rights for Procedure and ICU/NICU Denominators, Plan, and Hospital Survey

View Rights for Patient Safety Data Analysis



Issues to Consider

- Are the data readily available?
 - Data sources (numerator/denominator)
- Data collectors
 - If none, what is incentive for such a position?
- Which adverse events?
 - Sentinel or common
- What patient population(s)?
 - All or sample



- Confidentiality needed?
- Voluntary or mandatory reporting?
- Link to other systems?
 - Data sharing agreements
 - Database management
 - Analysis
- Resources



www.cdc.gov/ncidod/hip/nhsn/members/members.htm