



# SDPS MEMORANDUM

MEMO NBR: 10-318-HD

DATE: November 8, 2010

SUBJECT: Healthcare Associated Infection (HAI) measure, Central Line-Associated Bloodstream Infection (CLABSI) Requirement

TO: SDPS ANA Point of Contact, SDPS CEO Point of Contact, SDPS COMM Point of Contact, SDPS DBA Point of Contact, SDPS HCQIP Point of Contact, SDPS HRI Point of Contact, SDPS MEDPCC Point of Contact, SDPS UNDRSVD Point of Contact

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The purpose of this SDPS memorandum is to provide information about the addition of an HAI measure, CLABSI, to the Hospital Inpatient Quality Reporting Program (Reporting Program), formerly known as the Reporting Hospital Quality Data for Annual Payment Update (RHQDAPU) program.

The CLABSI measure assesses the rate of laboratory-confirmed cases of bloodstream infection among adult, pediatric, and neonatal intensive care unit (ICU) patients. Data collection period begins with January 2011 events for the Reporting Program FY 2013 payment determination.

**The Hospital Inpatient Quality Reporting Support Contractor, formerly known as the RHQDAPU QIOSC, has posted to QualityNet an overview of the CLABSI requirement, a recorded Web-ex presentation and Quick Reference Guide. Select the "Hospitals - Inpatient" tab → select Healthcare Associated Infections (CLABSI) to view these resources.**

## CMS Quality Reporting Program Requirements

Hospitals must use the CLABSI protocol to submit the data elements needed to calculate the CLABSI measure to the National Healthcare Safety Network (NHSN).

Hospitals with a signed Centers for Medicare and Medicaid Services (CMS) Notice of Participation indicating they participate in the Reporting Program do not need to sign a new CMS Notice of Participation.

All hospitals participating in the Reporting Program are required to:

- Submit quarterly data if a hospital has an ICU, in which there were central line days.
- Submit quarterly data if a hospital has an ICU, in which there were no central line days.
- Submit the required notice if a hospital does not have ICU beds. **NHSN enrollment is not required at this time for hospitals that do not have ICU beds.** The required notification form, timing and where to submit will be announced as these decisions are finalized. (effective 11/3/2010)

### **National Healthcare Safety Network (NHSN)**

In order to submit CLABSI data, there are additional steps required for participation in the NHSN.

- Complete required training.
- Follow enrollment process for NHSN.
- Print, sign and return the NHSN Agreement to Participate and Consent form. (An updated NHSN Agreement to Participate and Consent form will be available by November 2010 for hospitals **not currently** submitting to NHSN.)
- Hospitals **not currently** submitting CLABSI data to NHSN are encouraged to move forward with completing the required NHSN training in October in preparation for NHSN enrollment in November 2010.
- Hospitals **currently** submitting CLABSI data to NHSN should anticipate receiving an alert to re-consent in December 2010. They must complete and return the updated NHSN Agreement to Participate and Consent Form to NHSN in December 2010.

The above information provides a general overview only. Please see the NHSN web site, <http://www.cdc.gov/nhsn/cms-welcome.html>, for complete details regarding NHSN training, enrollment and Agreement to Participate and Consent form.

The attached overview document is provided for QIO reference and distribution to hospitals.

Direct questions regarding the CMS Quality Reporting Program requirements to the Hospital Inpatient Quality Reporting Program Support Contractor, [hrpqiosc@iaqio.sdps.org](mailto:hrpqiosc@iaqio.sdps.org).

Direct questions regarding NHSN training, enrollment and submission to, [NHSN@cdc.gov](mailto:NHSN@cdc.gov). (CDC has indicated a response will be provided in 3 to 5 business days).

**Attachment:** HAI Overview