

South Carolina Hospital Infections Disclosure Act (HIDA) Code of Laws of South Carolina, 1976, Chapter 7, Article 20, Title 44

Implementation and Training Plan: Phase I (Supplement to the Deputy Commissioner's HIDA Letter to Hospitals January 4, 2006)

I. Purpose:

- Identify responsibilities of hospital administrators, infection control practitioners (ICPs), and other infection control staff and departments, and DHEC and the HIDA Advisory Committee.
- Define HIDA requirements and timeline.
- Describe the data bases chosen for the reporting system: Centers for Disease Control and Prevention (CDC) National Healthcare Safety Network (NHSN) and the South Carolina Office of Research and Statistics (ORS) hospital discharge data set.
- Define HIDA implementation plans.
- Define training requirements.

DHEC:

The HIDA Program is in the Health Services Deputy Area, Division of Acute Disease Epidemiology (DADE). Responsibilities include: collecting, analyzing, and disseminating reported data on hospital infections, process measures, and to assure their accuracy. We are therefore responsible for: 1) assuring that rates are reported accurately and in a timely manner; 2) assuring that all hospitals are treated fairly; 3) establishing and defining training requirements; 4) establishing a validation program.

Compliance issues will be forwarded from Health Services to DHEC Health Licensing for appropriate action.

• DHEC Contact Information:

o e-mail: <u>HIDAAdvisory@dhec.sc.gov</u>

Mailing address: DHEC: Attn: Christine Phillips, Box 101106, Columbia, SC 29211-0106.

Primary Contact: Dixie Roberts at 803-898-0861.

HOSPITALS: The complete definition for hospitals and reporting requirements can be found in the enclosed statute.

Hospitals are defined as a facility organized and administered to provide overnight medical or surgical care or nursing care of illness, injury, or infirmity and may provide obstetrical care, and in which all diagnoses, treatment, or care is administered by or under the direction of persons currently licensed to practice medicine, surgery, or osteopathy and is licensed by the department as a hospital.

• Hospital Contact Information – to be provided by hospitals:

- o <u>By January 26, 2007, hospitals should submit</u> the name of your hospital's ICP and primary HIDA contact (who may be the same person) along with their contact information (address, phone, e-mail) to the DHEC e-mail <u>HIDAAdvisory@dhec.sc.gov</u>
- o or DHEC mailing address listed above.

Hospital Staffing:

- ICPs in the hospitals are the key persons with the clinical knowledge required to report these infections and that they will provide the leadership for this initiative.
- Members of our Advisory Committee are informing us that in many hospitals this will
 involve the need for additional resources, if it is to be done with good accuracy and
 quality.
- The application of standardized case definitions across all hospitals is critical to obtain comparable data for reporting rates.
- Each hospital should work with your ICPs to develop a plan for HIDA implementation and training.
- Participation in the training program is a <u>requirement</u> for those entering data into the reporting system.

II. HIDA: Major components for hospital reporting are summarized below:

- "Hospitals" shall collect data on hospital acquired infection rates for specific groups of infections that must initially include surgical site infections, ventilator associated pneumonia and central line associated bloodstream infections. Additional categories of infection may be added.
- Hospitals shall also report the methods and adequacy of selected infection control processes. (DHEC will notify hospitals of the reporting requirements and methods for infection control processes in 2007, as soon as they are defined).
- Hospitals shall submit reports to DHEC every 6 months with the first report due by February 1, 2008. The data in the reports must cover a period ending not earlier than one month prior to submission and be submitted in a format and at a time as required by DHEC.
- DHEC must submit the first annual report containing data comparing risk adjusted hospital acquired infection rates for each individual hospital to the SC General Assembly by February 1, 2009.
- Reports must be made available to the public in easy to comprehend language.
- DHEC must evaluate quality and accuracy of data regularly.
- Strict patient confidentiality must be maintained.
- DHEC shall ensure and enforce compliance with this law as a condition of licensure.
- (See attached Timeline)

HIDA Advisory Committee: The Committee's role is defined in the attached statute. See attached List of Members

DHEC and the Advisory Committee will continue to meet to:

- identify surgical sites and clinical units for Phase II of the implementation plan
- decide upon process measures for reporting
- define a validation program
- develop HIDA Website format
- develop easy to comprehend reporting, analysis, and interpretation language and format for the website.

III. HIDA Data System

- The Centers for Disease Control and Prevention (CDC) National Healthcare Safety Network (NHSN) system has been selected for reporting risk adjusted hospital acquired infections. http://www.cdc.gov/ncidod/dhqp/nhsn_members.html
- SC Office of Research and Statistics' (ORS) Hospital Discharge Data Set (HDDS): The HDDS will be used to link with the reported infections in the NHSN system to identify information needed for a validation program, to conduct cost analysis, and identify other relevant information such as post surgery readmissions related to infection. DHEC and the Advisory Committee have established a sub-committee to develop models for the NHSN and ORS hospital discharge data links and methods.

The NHSN:

- is a web based reporting system
- requires a secure digital certificate supplied by the CDC to enter data and access your own hospital data.
- requires that the Infection Control Professionals (ICPs) have routine access to a computer with Internet connection.
- requires access to a computer that meets the NHSN system requirements defined at this web site: http://www.cdc.gov/ncidod/dhqp/nhsn_sysRequirements.html
- requires that hospitals enroll in the NHSN during March 2007, which has been established as the CDC scheduled enrollment period for South Carolina Hospitals.
- will enroll other states in the following months, so SC must be prepared to enroll in March. The enrollment process (with waiting times in between the steps) will take approximately 3 weeks to complete.
- information needed for enrolling your hospital will be covered in the February 2007 training sessions described below.
- for reporting purposes, will create a South Carolina NHSN data group consisting of all hospitals for access only by DHEC.
- is structured so that DHEC will need to have access to the NHSN SC Hospital Group data, therefore each hospital will need to specifically assign access rights in the system to DHEC.

Implementation Phase I Reporting Requirements:

• To facilitate training and to give the hospitals time to plan for and implement this requirement, the decision was made to phase in the reporting of infections for a few

selected procedures and clinical units. (In February, the DHEC Workgroup and Advisory Committee will begin to plan for Phase II of the Implementation which will include additional reporting requirements for infections DHEC will notify hospitals as requirements are added.)

Initially (Phase I), hospitals must report the following infections (with more to be added at a later date in Phase II):

- Surgical Site Infections for the following procedures, in all hospitals where these procedures are performed:
 - o Coronary Artery Bypass Graph (CABG)
 - o Hysterectomies (vaginal and abdominal)
- Central Line Associated Bloodstream Infections (CLABSI) in Medical-Surgical Intensive
 Care Units (all combinations of Medical and Surgical Intensive Care units as defined by
 the CDC NHSN system).

IV. Training

Training for ICP staff who will be submitting data is mandatory and will need to occur prior to the CDC NHSN March 2007 enrollment date for SC. Very soon, you will receive additional training and registration instructions from the SC Hospital Association.

- A one-day training will be presented on two separate days for your staff to choose the most convenient day for them: The dates are set for
 - o Thursday, February 22, 2007
 - o Wednesday, February 28, 2007

Target Audience: The NHSN surveillance system requires data entry concurrently during or immediately following the hospitalization. ICPs must attend and other key staff involved in infection control practice and management may also want to attend the training. If a hospital does not have a current certified ICP, the clinical professional responsible for infection control in your hospital must attend the training. Each hospital with only one ICP should send at least one other person involved in infection control practice and management so that more than one person in each facility is familiar with the NHSN requirements.

Hospitals: Your hospital may not perform all or any of the Phase I surgical procedures or insert central lines in the designated units. However, to be ready to report the next phase of procedures, you should send staff to the training if you perform any surgical procedures, insert central lines, or place patients on ventilators. If the procedures chosen above are not performed by your hospital, we will choose other procedures for you to use to begin developing the skills and experience with NHSN. When your hospital submits the name and contact information of your HIDA representative, please submit the three (3) surgical procedures most often performed in your facility. This will allow DHEC and the Advisory Committee to choose procedures common to smaller hospitals.

Training Sub-committee: The Advisory Committee recommended a training sub-committee. Advisory Committee members who are ICPs are taking the lead on the training sub-committee along with other members of the Association of Professionals in Infection Control and Epidemiology (APIC), Palmetto Chapter. The SC Hospital Association will host the training sessions and supply training materials and other training support. A small registration fee will be charged to cover the cost of an out of state speaker experienced in the NHSN system. DHEC HIDA workgroup members are also working on the training sub-committee. CDC will be assisting us with activities such as providing training Webinars and consultation to DHEC and APIC Trainers.

Enclosed:

HIDA Letter to Hospitals: Dr. Waddell HIDA Timeline Hospital Infections Disclosure Act HIDA Advisory Committee Members Timeline: 2007-2008 (Subject to revision*)

	(Subject to revision*)	DEGDONGIDII IEW
DATE	ACTION	RESPONSIBILITY
February, 2007	NHSN Training	1) Conducted by Training sub
		committee: APIC- Palmetto, SC
		Hospital Association, and DHEC
		HIDA staff
		2) Attendance required for Hospital
7.5		ICPs using NHSN
March 2007	-Register with CDC to join	Each Hospital and all staff responsible for
	NHSN and receive the	entering data into NHSN
	digital certificates for all	
	users; Begin entering data	
	to develop skills and internal	
	hospital procedures.	
	-Assign rights to reportable	
	data to DHEC	
July 1, 2007	1) Must begin entering	1) Each Hospital
	complete Phase I	
	data into NHSN	A) DWEG 0 4 1 1 2 4 1 1 1
	2) Begin developing	2) DHEC & Advisory Committee
	reporting	
	procedures and	
	format based upon	
	data from this date	
	forward.	
Esh 2000	Danin analysis of 1 St sin	DHEC
February 2008	Begin analysis of 1 st six months of data.	DHEC
2008	1) Develop methods and	DHEC & Advisory Committee
2008	format for posting the	DITEC & Advisory Committee
	hospitals annual data	
	reports and hospital	
	comments regarding the	
	reports back	
	2) . Develop Web site and	
	easy to understand language	
	for the public reports.	
February 1, 2009	1) Submit First Annual	1) DHEC
	Report to the General	
	Assembly	
	2) Make Reports available	
	to the Public	2) DHEC and Hospitals
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Dates to be	1. Add Phase II procedures	DHEC and Advisory Committee
determined*	2. Add processes	
	3. Add Validation Site Visits	