

Quarterly Quality Improvement Webinar Influenza & NHSN

Tuesday, November 9th, 2021

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Acknowledgement

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Learning Objectives

- Examine and Analyze MBQIP Portal, EDTC Database, and NHSN Influenza data.
- Discuss and share tips for NHSN website.
- Provide resources on quality reporting.





MBQIP Data - Upcoming

Report Name	Q1 Jan 1 – Mar 31	Q2 Apr 1 – Jun 30	Q3 Jul 1 – Sep 30	Q4 Oct 1 – Dec 31
Patient Safety/ Inpatient & Outpatient	Early October	Early January	Early April	Late June
Care Transitions (EDTC)	Late June	Late September	Late December	Late March
Patient Experience (HCAHPS)	TBD	TBD	Early July	Early August

^{*}Timelines subject to change based on availability of the data from CMS



MBQIP Portal and EDTC Database

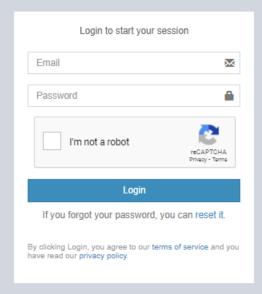






One Location For All Your MBQIP Needs LOGIN

MBQIP-DB Login



All information utilized in this program will be protected as afforded under the Healthcare Quality Improvement Act of 1986 (HCQIA) and all confidentiality provisions and protections as provided in Texas HB 1614, Section 160.010 Texas Occupations Code, Medical Peer Review committees, Section 161.033 of the Health and Safety Code and identifiable information will be protected as afforded by HIPAA of 1996.

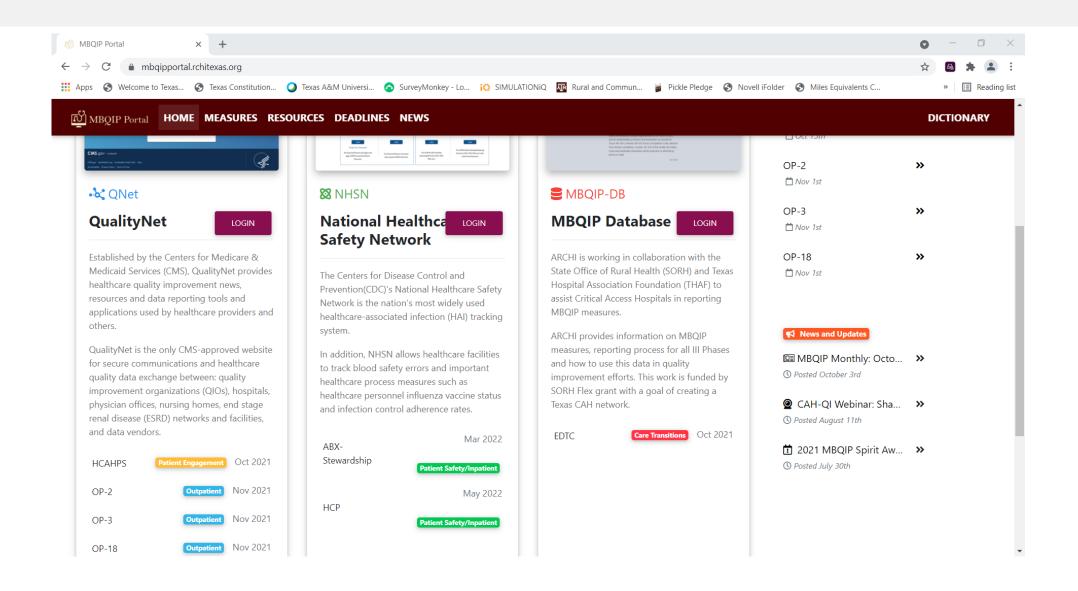
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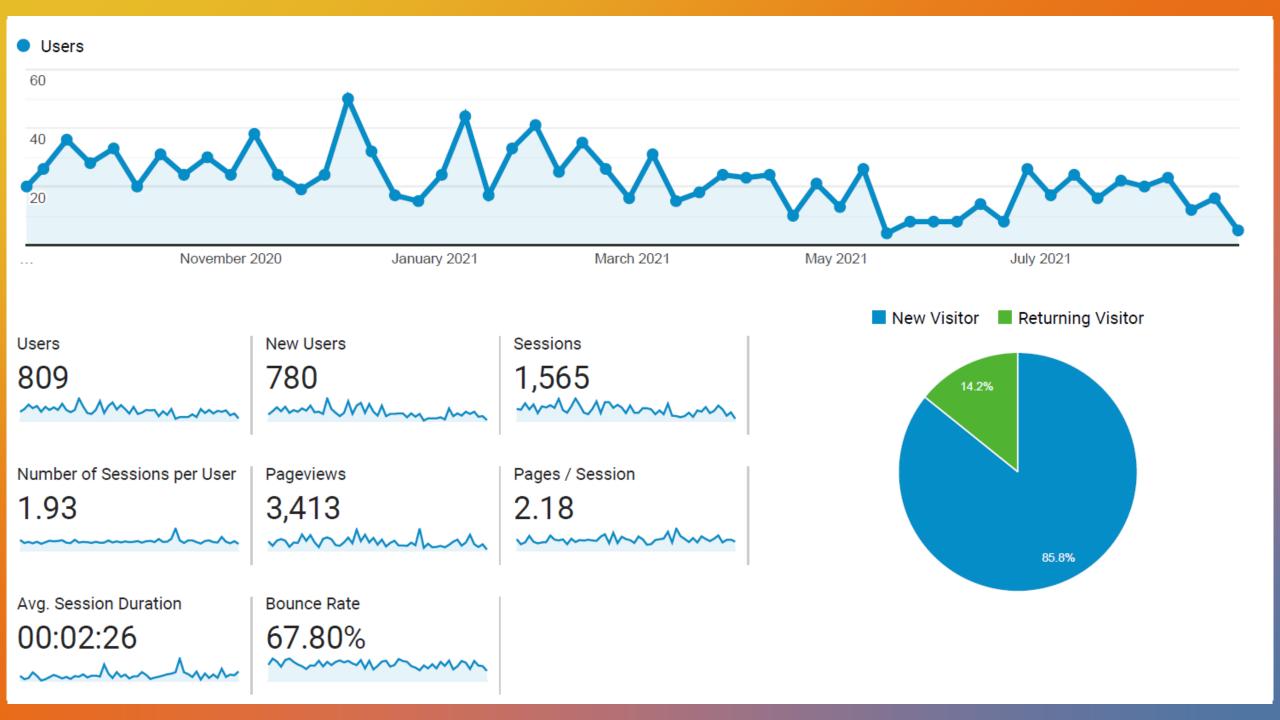
MBQIP Portal

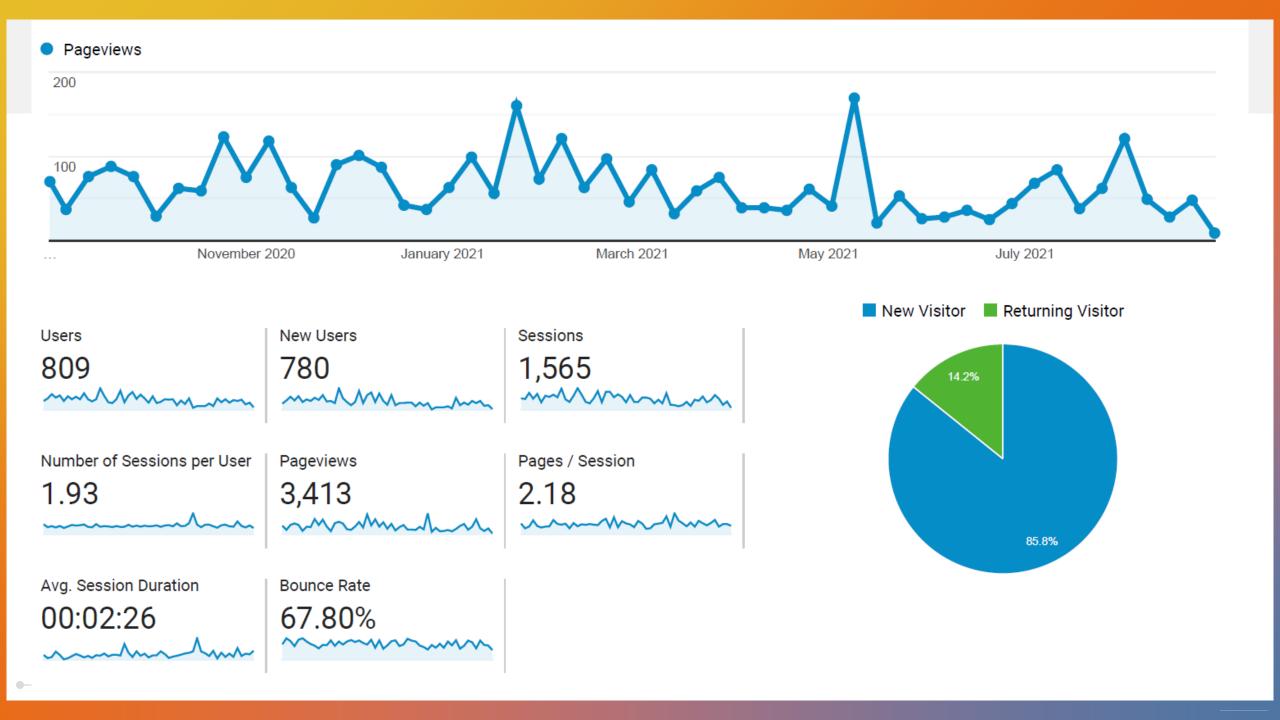
Usage Graphs and Comparison Users/Page Views/Time of Day/Annual Comparison

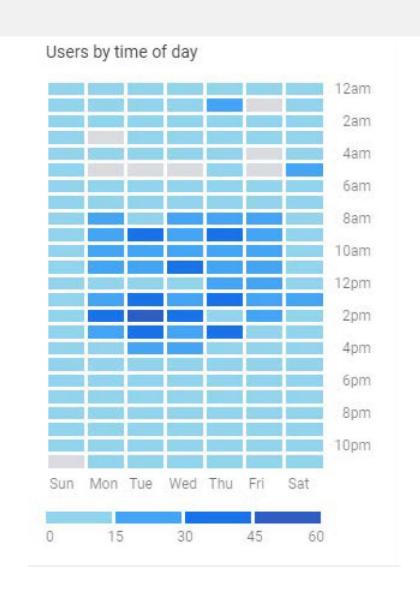


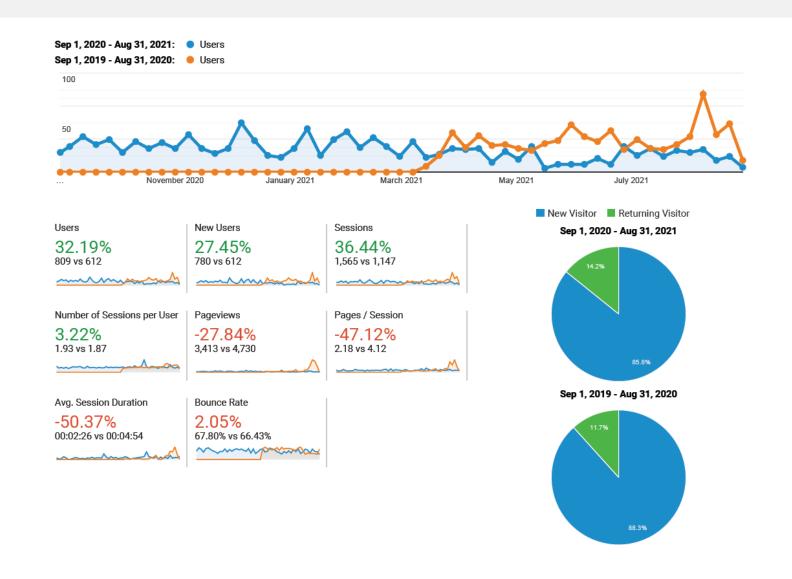










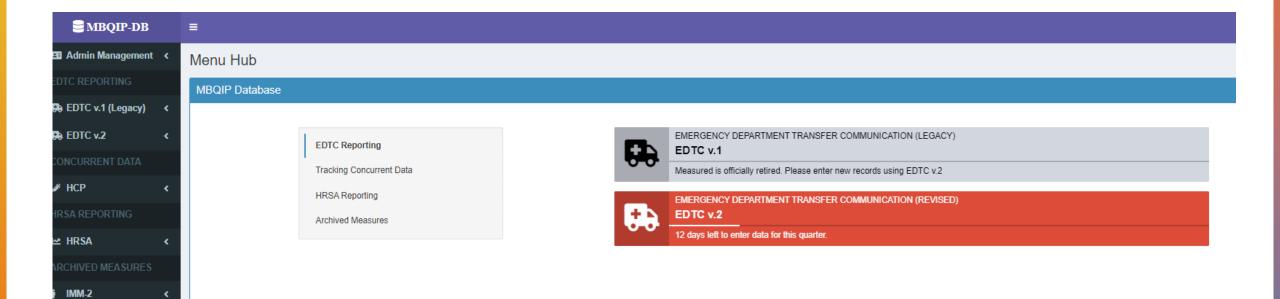


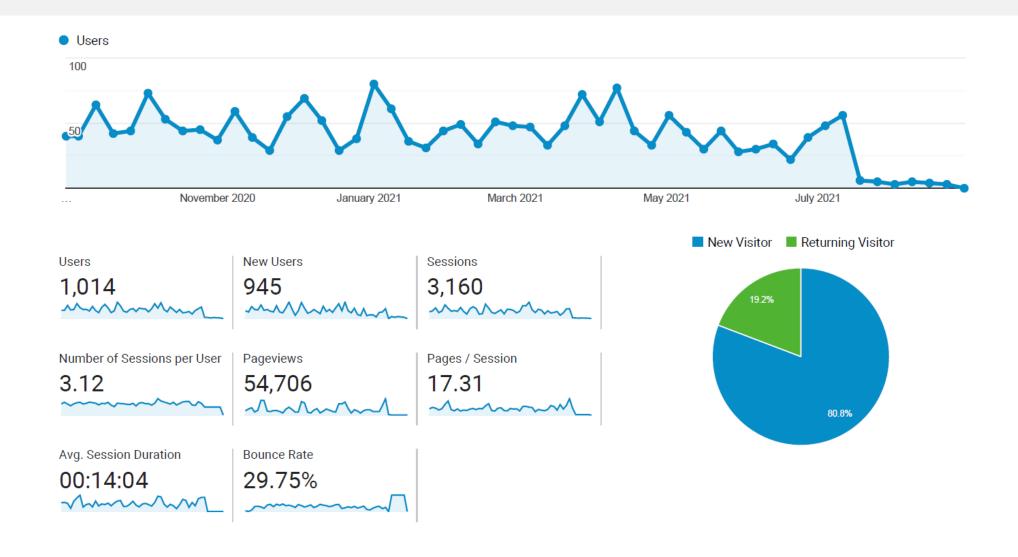
MBQIP EDTC Database

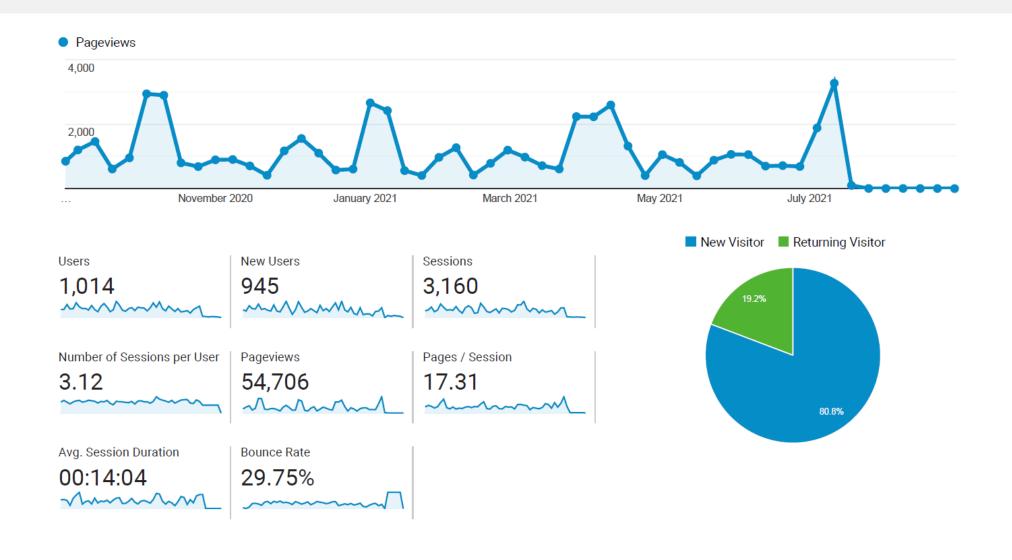
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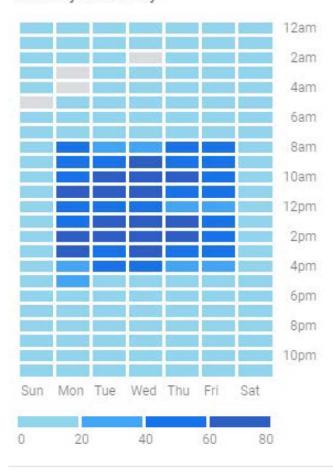




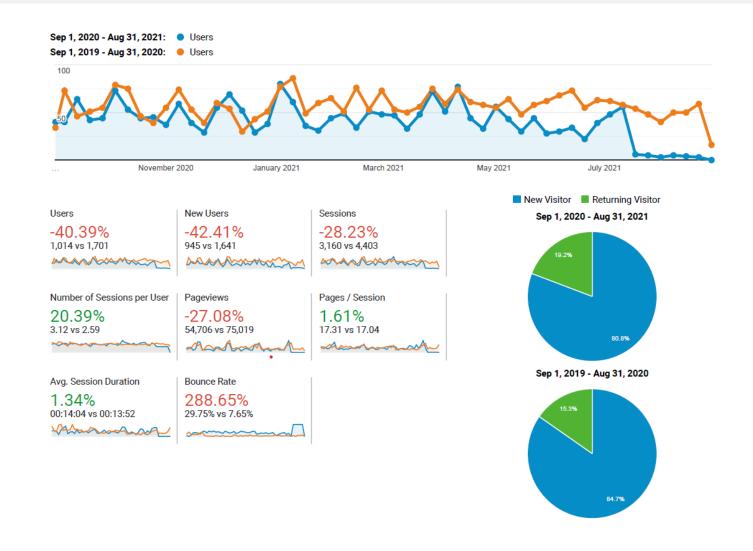




Users by time of day



Sep 1, 2020 - Aug 31, 2021 ▼



MBQIP NHSN HCP INFLUENZA DATA Quarter 1 2021

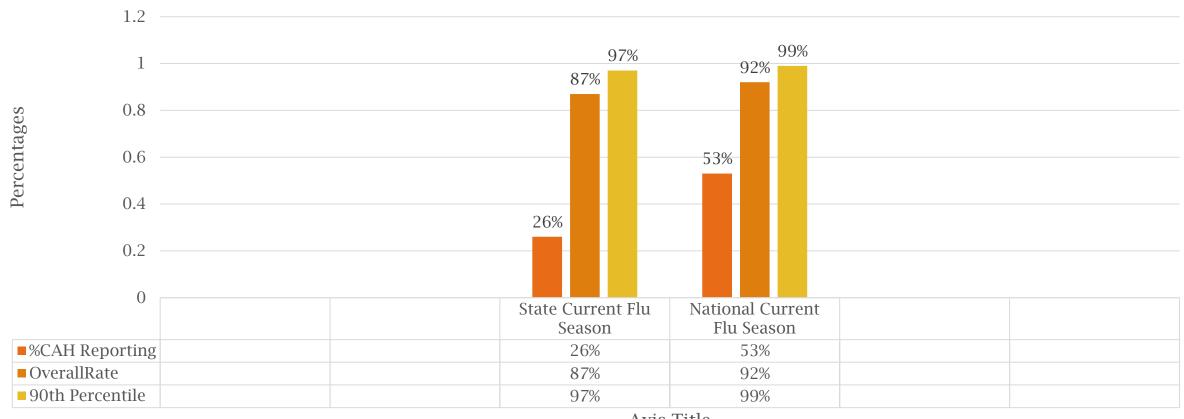




NHSN INFLUENZA Data



NHSN Immunization Measure Quarter 1 2021



Axis Title

■%CAH Reporting ■OverallRate ■90th Percentile



Influenza





HCP (formerly OP – 27)

- Measures percentage of healthcare personnel obtaining influenza vaccination
- Goal is increase in percentage
- Reported through NHSN

ata Elements

Three categories (all with separate denominators) of HCP working in the f at least one day b/w 10/1-3/31:

- Employees on payroll
- Licensed independent practitioners
- Students, trainees and volunteers 18yo+

A fourth optional category is available for reporting other contract personn

HCP workers who:

- Received vaccination at the facility
- Received vaccination outside of the facility
- Did not receive vaccination due to contraindication
- Did not receive vaccination due to declination

Reporting with COVID

Influenza fields 33 - 38 to be reported every day except for psychiatric and rehabilitation hospitals who report weekly – Optional starting 10/19/20 with the intention to have these be mandatory fields within the coming weeks.

Existing upload templates will continue to work during transition.

Laboratory confirmation includes detection of influenza virus through molecular tests (e.g., polymerase chain reaction, nucleic acid amplification), antigen detection tests, immunofluorescence tests, and virus culture.

Total hospitalized patients with laboratory-confirmed influenza	Patients (all ages) currently hospitalized in an inpatient bed who have laboratory-confirmed influenza. Include
iff	those in observation beds.
Previous day's influenza	Enter the number of patients (all ages) who were
admissions	admitted to an inpatient bed on the previous calendar
	day who had laboratory-confirmed influenza at the time
	of admission. This is a subset of #33.
Total ICU patients with	Patients (all ages) currently hospitalized in a designated
laboratory-confirmed influenza	ICU bed with laboratory-confirmed influenza. This is a
	subset of #33.
	Patients (all ages) currently hospitalized in an inpatient
both laboratory-confirmed	bed who have laboratory-confirmed COVID-19 and
COVID-19 and influenza	5
	Previous day's influenza admissions Total ICU patients with laboratory-confirmed influenza Total hospitalized patients with both laboratory-confirmed

		laboratory-confirmed influenza. This is a subset of #9b/10b and #33.
37.	Previous day's influenza deaths	Number of patients with laboratory-confirmed influenza who died on the previous calendar day in the hospital, ED, or any overflow location.
38.	Previous day's deaths with both COVID-19 and influenza	Number of patients with laboratory-confirmed influenza AND laboratory-confirmed COVID-19 who died on the previous calendar day in the hospital, ED, or any overflow location. This is a subset of #16.



What Are Best Practices:

• All Hospitals should have policy regarding vaccination for staff

• Includes requirement of proof of vaccination if done elsewhere

• Enforce mask use at all times if not vaccinated

Antibiotic Stewardship





Being in Compliance

- Now a condition of participation with CMS
- Effective date of final rule November 29, 2019

Implementation dates: The regulations at § 485.641 regarding Quality
Assessment and Performance Improvement Programs (QAPI) in critical access
hospitals (CAHs) must be implemented by March 30, 2021.

The regulations at § 482.42(b) and § 485.640(b) regarding hospital and critical access hospital (CAH) antibiotic stewardship programs must be implemented by March 30, 2020.

§ 482.42 requires the hospital to:

- i. Provide a sanitary environment to avoid sources and transmission of infections and communicable diseases
- ii. Develop an active program for the prevention, control, and investigation of infections and communicable diseases, and
- iii. Assign a designated infection control officer
- § 485.640 requires the following goals for an antibiotic stewardship program be met:
 - i. Coordination among all components of the CAH responsible for antibiotic use and resistance, including, but not limited to, the infection prevention and control program, the QAPI program, the medical staff, and nursing and pharmacy services;
 - ii. Document the evidence-based use of antibiotics in all departments and services of the CAH; and
- iii. Demonstration of improvements, including sustained improvements, in proper antibiotic use, such as through reductions in, CDI and antibiotic resistance in all departments and services of the hospital.

7 Core Elements

- Leadership Commitment
- Accountability
- Drug Expertise
- Action
- Tracking
- Reporting
- Education



Where You Should Be Now:

- Reporting compliance with 7 core elements Antibiotic Stewardship
- Reporting through NHSN
- If you do not have access to NHSN get started!!! It is a lengthy process
- https://nhsn.cdc.gov/RegistrationForm/index



Resources

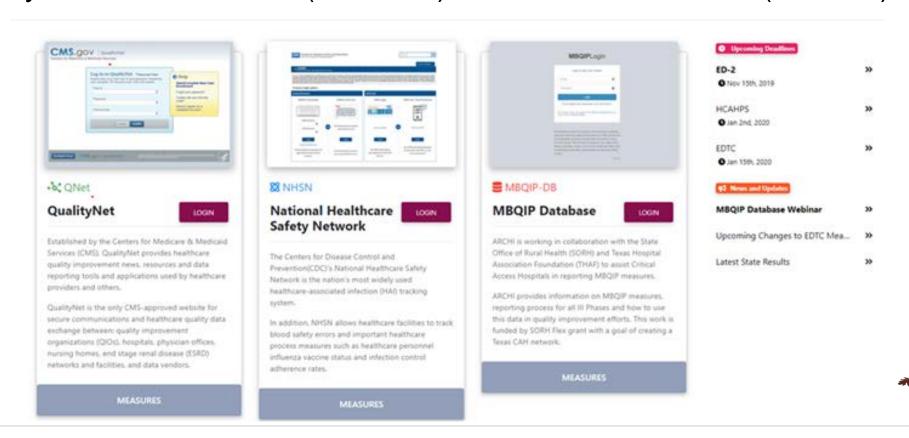
- Upcoming Webinar! Enhancing Antibiotic Stewardship Programs in Critical Access Hospitals | Wednesday,
 November 17, 2021, 2-3 p.m. CT Register
 During this webinar, speakers will discuss The Joint Commission's upcoming revisions to their antibiotic stewardship standards and highlight strategies to enhance antibiotic stewardship programs in critical access hospitals. This webinar
- Quarterly Quality Improvement Webinar February 2022!

will be co-hosted by CDC and HRSA's Federal Office of Rural Health Policy

- If you haven't submitted an NoP, the CDC/NHSN does not submit your HCP data to us for the MBQIP reports.
 Check out this CMS tutorial: https://www.youtube.com/watch?v=8DEMuiFlmPk&list=PLaV7m2-zFKpjctAKzszs_jNbXmhvADgcy&index=20
- Check out the NHSN website for instructions on how to collect and submit HCP data: <u>HCP Flu Vaccination | HPS | NHSN | CDC</u>

MBQIP Submission Reminder

- •MBQIP Portal Website: https://mbqipportal.rchitexas.org/index.php/site/index
- •January EDTC Q4 2022 (Jan. 15th) & HCAHPS Q3 2022 (Feb. 8th)



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#powerofrural

National Rural Health Day Celebrating the Power of Rural!

IT'S NOT JUST A DAY, IT'S A MOVEMENT.

Questions & Thank You!

