HEALTHCARE-ASSOCIATED INFECTION PREVENTION
REPORTING GUIDE FOR
AMBULATORY SURGICAL CENTERS

August 2017

PURPOSE

This guide from the Pennsylvania Department of Health (Department), Healthcare-Associated Infection Prevention (HAIP) program is intended to provide a summary of information and guidance to infection prevention personnel. A brief summary of the legislation and highlights of reporting requirements are provided.

BACKGROUND

Senate Bill 968 was signed into law on July 20, 2007. Act 52 of 2007, the Health Care-Associated Infection Prevention and Control Act, amends the Medical Care Availability and Reduction of Error (MCare) Act (Act 13 of 2002) to address the reduction and prevention of healthcare-associated infections.

Act 52 of 2007 requires all hospitals, nursing homes, and ambulatory surgical centers to develop and implement an internal infection control plan. The infection control plan is submitted to the Department for review. If, at any time, the department finds that an infection control plan does not meet the requirements of Act 52 of 2007 or any applicable laws, the facility shall modify its plan to come into compliance. Additional requirements regarding the infection control plan are outlined in Section 403 of Act 52 and in the document “Infection Control Plan Submission and Updates.”

AMBULATORY SURGICAL CENTER REPORTING

HAIP provides guidance and assistance to ASCs for the CMS requirements and the reporting of health care personnel influenza vaccination information in the National Healthcare Safety Network (NHSN).

Ambulatory surgical centers (ASC) that participate in the Centers for Medicare and Medicaid Services (CMS) Ambulatory Surgical Center Quality Reporting (ASCQR) program must report health care personnel (HCP) influenza vaccination summary data via the Centers for Disease Control and Prevention’s (CDC) National Healthcare Safety Network (NHSN) for the influenza season (e.g., Oct. 1, 2016, through March 31, 2017). The Healthcare Personnel Safety Module is designed to assist staff in health care facilities to monitor influenza vaccination percentages among HCP.

Although CMS only requires participation from ASCs that participate in the ASCQR, the Pennsylvania Department of Health requests this information from all ASCs.
Each CMS-licensed ASC with a CMS Certification Number (CCN) should enroll in NHSN as a separate facility (i.e., they will have a unique NHSN OrgID), even if they are owned by or affiliated with a health care system or acute care hospital. The CCN is a 10-digit number with a “C” in the third position.

- Ambulatory surgical centers that do not participate in the ASCQR program should not be enrolled separately in NHSN.
- If an ASC has the same CCN as the hospital, it should not be enrolled in NHSN as a separate facility; the HCP vaccination information for the ASC may continue to be included in the HCP data submitted by the hospital. For additional guidance and information, please refer to the Frequently Asked Questions on the Surveillance for Healthcare Personnel Vaccination web page.

Monthly reporting plans must be entered before reporting HCP influenza vaccination data. To enter a monthly reporting plan for the entire year (July 1 to June 31), log in to NHSN and select monthly reporting plan from the left hand navigation bar. Next, select add, enter, then January 2017 in the drop down menus. Place a check mark in the box “Healthcare Personnel Vaccination Module—Influenza Vaccination Summary.” This will auto-populate the monthly reporting plan for all 12 months.

NHSN Resources

The Centers for Disease Control and Prevention (CDC) provides resources such as training, protocols, data collection forms, supporting materials, and frequently asked questions for health care facilities reporting health care personnel influenza vaccination to the National Healthcare Safety Network (NHSN). This information is available by facility type and can be accessed on the NHSN website.

Specific information for health care personnel influenza vaccination reporting for ambulatory surgical centers is located at: NHSN ASC Surveillance for Healthcare Personnel Vaccination.

The NHSN Manual for the Healthcare Personnel Safety Component Protocol provides instructions on correctly determining both the numerators and denominators that are required to be entered on an annual basis. HCP who are physically present in the facility for at least one working day between Oct. 1, 2016, and March 31, 2017, are included in the denominator. A guide for “Methods and Strategies Used to Collect Healthcare Personnel Influenza Vaccination Data” as well as detailed instructions on “How to View Create and Modify Dates within NHSN” are also available.

Frequently asked questions (FAQs) are provided to assist facilities with reporting HCP data to NHSN. These include:

- CMS Reporting Requirements FAQs;
- Denominator FAQs;
- Numerator FAQs; and
- General FAQs.

Enrollment in NHSN

Facilities not yet enrolled in NHSN should follow the steps outlined in the enrollment information for Ambulatory Surgery Centers.
There are two processes (the registration of an individual and the enrollment of the facility) required in order to have a user and a facility enroll in NHSN. The registration of an individual requires a person to complete an identity verification process through NHSN’s Security Access Management System (SAMS). This process includes:

- Completing an identity verification form;
- Two required forms of ID (one with a picture), both ID’s with the same last name (If not, other verification may be required.);
- Notarization of the form prior to return to the CDC.
- Providing the home address in order for the SAMS card to be sent (this is part of the identity verification process).

The SAMS card is for individual use only. This is not meant to be a facility card.

**NHSN SAMS Grid Card**

In order to report into NHSN the ASC must complete the registration process (in order to become a user) which includes the receipt of a SAMS grid card in order to access the NHSN website. After receipt of the grid card, the designated individual may enroll the facility (to receive an NHSN ID number) and complete the NHSN consent agreement.

**NHSN Facility Administrator**

The person who enrolls a facility in NHSN is designated as the NHSN facility administrator. Only the NHSN facility administrator can reassign his/her role to another user. If the facility administrator is unavailable to make the change, the facility may formally request a reassignment in writing on facility letterhead to NHSN. The letter must include the name of the new administrator, phone number, email address and NHSN facility ID.

**NHSN Help Desk**

Questions about NHSN may be submitted by email to nhsn@cdc.gov. Be sure to include your name and NHSN assigned facility ID number, which is found on your hospitals NHSN secure data network “landing page,” located under your name. NHSN does not accept phone calls.

**PATIENT SAFETY ADVISORIES**

Chapter 4 of The Medical Care Availability and Reduction of Error (MCARE) Act, 40 P.S. § 1303.403(a)(8) Infection Control Plan states that a health care facility shall have “a procedure for distribution of advisories issued under section 405(b)(4) so as to ensure easy access in each health care facility for all administrative staff, medical personnel and health care workers.”

The Pennsylvania Patient Safety Authority (PSA) as per section 405(b)(4) issues advisories to health care facilities. The PSA Pennsylvania Patient Safety Advisory Library provides important patient safety information.