# HOSPITAL GUIDANCE - DATA INTEGRITY AND VERIFICATION (DIV) CORRECTIONS

| DEFINITE ERROR ISSUE | RESOLUTION | NOTES/COMMENTS |
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| **1. Event data** | | |
| NHSN event required fields | Enter missing data for month(s) indicated | See NHSN form instructions for required fields of CLABSI, CAUTI, SSI, VAE, PNEU, MDRO entries. |
| CLABSI/CAUTI events in OR location | Change location of event to a mapped inpatient location | Location must reflect where the patient was admitted after the OR |
| Pennsylvania required fields | Secondary ID number - Enter unique billing number (Patient Control Number/UB04). | The secondary ID number should be the Patient Control Number. This is to be entered in the Comment field on the event screen. This is the patient's account billing number as reported in Field 3a of the Universal Billing Form-04 (UB-04). Additional characters, such as # - * or any words should not be entered in this field. |
| Patient ID used for more than one patient | Validate/correct patient ID in NHSN | The patient ID should be unique to that patient and remain constant for the patient for any subsequent visits; often, this is the medical record number. |
| Non-SSI event in an inpatient location where the event date is the same day or the day after the admit date | Check the dates to ensure the correct dates were entered in NHSN | See NHSN Chapter 2 for POA definition. POA events are not reported to NHSN. |
| Non-SSI event in an outpatient location where the admit date and the event dates are not the same | Check the dates to ensure the correct dates were entered in NHSN | See NHSN Chapter 2 for date of event guidance. |
| **2. Denominator data** | | |
| Orphan records and/or incomplete denominator data | Enter missing denominator data | CAUTI, CLABSI, and VAE events must have corresponding device days and patient days. |

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| A device is checked in monthly reporting plan, but summary data was not entered. | Enter missing patient days or device days for the month(s) indicated. | All inpatient locations require mapping and monthly reporting of denominator data. |
| **3. Procedure data** | | |
| NHSN procedure required fields | Enter data or correct invalid data. | See NHSN Chapter 9 and SSI form for instructions. |
| Orphan records (a benchmarked SSI event is not linked to a procedure) | Link event to a benchmarked procedure. PA benchmarked procedures include: CARD, CBGB, CBGC, COLO, HPRO, KPRO, HYST | All benchmarked procedures that a facility performs should be in the monthly reporting plan. |
| Duplicate procedures | Delete duplicate procedures once validated. | |
| **4. Monthly reporting plan** | | |
| Missing/incomplete | Review monthly reporting plan to ensure the appropriate boxes are checked. | A monthly reporting plan is required for every mapped inpatient unit. In a rare instance when a facility (psychiatric hospital) does not have devices, they would check the "No NHSN Patient Safety Modules Followed this Month" box on the monthly reporting plan. |
| **5. Conferred rights** | | |
| Location is missing from conferred rights | This should no longer occur since this issue was corrected by NHSN in 2013, but this is double checked to be certain all locations are included. | All inpatient locations need mapped in NHSN and rights conferred to DOH. An error would occur if a location is found in the monthly reporting plan, but is missing from the conferred rights. |

| 6. MDRO module | | |
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| Event required fields | Enter missing data for month(s) indicated. See NHSN Chapter 12 instructions. | See NHSN guidance and the DOH HAIP Hospital Resource Guide for additional guidance. |
| Missing summary data for FacWideIN, ER, and OBS locations | Enter missing admissions or patient days. | Summary data required monthly. If there were no events for the entire month, this must be indicated on the summary data form. |
| Monthly Plan is inconsistent with CMS or PA requirements. | Update monthly reporting plan and enter data accordingly. | |
| **POSSIBLE ERROR ISSUE** | **RESOLUTION** | **NOTES/COMMENTS** |
| **7. Event data** | | |
| No events for the entire month | Validate no events met the criteria and needed to be entered in NHSN for the month(s) indicated. | |
| Duplicate entries | Validate and delete duplicate entries. | |
| SSI where the outpatient procedure question is answered "no." | Verify the type of procedure (outpatient/inpatient), the event, admit date, and discharge date have been entered correctly. | If the SSI outpatient procedure question is answered no (meaning it was an inpatient procedure), the admit and event date and/or the admit and discharge date should not be the same. |
| SSI when the outpatient procedure question is answered "yes." | Verify the type of procedure (outpatient/inpatient), the event, admit date, and discharge date have been entered correctly. | If the SSI outpatient procedure question is answered yes (meaning it was not an inpatient procedure), the admit and event date and/or the admit and discharge date should be the same. |

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| Social Security Number (SSN) field blank.<br><br>*When Act 52 of 2007 was passed, hospitals were required to report all HAIs to the Department of Health, the Patient Safety Authority, and PHC4 through the CDC's National Healthcare Safety Network (NHSN). This was done to have all HAIs reported to one place and eliminate redundant reporting to separate state agencies.* | Enter patient's SSN in SSN field. | The SSN field is required in Pennsylvania. If the SSN for the patient is not available, this field should be left blank and facilities may note that a SSN is not available in the **comment** section of the **patient** screen.<br><br>*PHC4 uses the patient control number along with the social security number as patient identifiers. These patient identifiers allow them to match the data reported through the Pennsylvania Uniform Claims and Billing Form electronic file (or Universal Billing Form) to the HAI data reported in NHSN to perform their cost analysis.*<br><br>Social Security Administration |
| **8. Procedure data** | | |
| Wound class | Verify the procedure identified in the report is correctly entered as CC. | See NHSN manual Chapter 9 for wound classification guidance. |
| **9. Monthly reporting plans** | | |
| Missing monthly reporting plan device check-box (catheters/central lines) | Validate that all inpatient units are appropriately mapped and have corresponding summary data each month for each unit. | A possible error will be noted if the device had been consistently followed on previous monthly reporting plans, but is not listed on the month indicated. |
| Missing benchmarked procedures from the monthly reporting plan | PA benchmarked procedures include: CARD, CBGB, CBGC, COLO, HPRO, KPRO, HYST | A possible error will be noted if a procedure had been consistently followed on previous monthly reporting plans, but is not listed on the month indicated. |