



INSTRUCTIONS FOR LONG TERM CARE FACILITIES REPORTING CRE IN NHSN

The following instructions relate to the Health Officer Order for Reporting of Carbapenem-Resistant Enterobacteriaceae (CRE) and Antimicrobial Resistance of Bacterial Pathogens, issued on January 19, 2017.

*Updated information and instructions for CRE reporting can be found at:
<http://publichealth.lacounty.gov/acd/Diseases/CRE.htm>*

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1 Surveillance Definition

1.1 Reporting Requirements

Effective January 19, 2017 all acute care hospitals and skilled nursing facilities (SNFs) are mandated to report carbapenem-resistant *Enterobacteriaceae* (CRE) and submit an antibiogram annually. Reporting of CRE to the Los Angeles County Department of Public Health (LACDPH) will follow the Centers for Disease Control and Prevention (CDC) National Healthcare Safety Network (NHSN) Multidrug-Resistant Organism (MDRO) and *Clostridium difficile* Infection (CDI) Module: report all first CRE positive tests per resident, per calendar month, per location, regardless of specimen source except when a unique blood source is identified, that were collected on or after January 1st, 2017.

1.2 CRE Definition

LACDPH will follow the CDC NHSN MDRO and CDI Module CRE surveillance definition, which define CRE as any *Escherichia coli*, *Klebsiella oxytoca*, *Klebsiella pneumoniae*, or *Enterobacter spp.* demonstrating resistance by one or more of the following methods:

1. Resistant to imipenem, meropenem, doripenem, or ertapenem by standard susceptibility testing methods (i.e., minimum inhibitory concentrations of ≥ 4 mcg/mL for doripenem, imipenem and meropenem or ≥ 2 mcg/mL for ertapenem) **OR**
2. Production of a carbapenemase (e.g., KPC, NDM, VIM, IMP, OXA-48) demonstrated using a recognized test (e.g., polymerase chain reaction (PCR), metallo- β -lactamase test, modified-Hodge test, Carba-NP, Carbapenem Inhibition Method (CIM)).

2 Submitting Data via the National Healthcare Safety Network – All NHSN Enrolled Facilities

2.1 Joining the LA County CRE NHSN Group

All facilities enrolled in NHSN are to join the LA County CRE NHSN group and report via NHSN to comply with the Health Officer Order.

1. In the left menu bar select Group →Join
2. This will take you to the Memberships page where you can view the groups you have joined that have access to your facility's data
3. Enter Group ID: 49773
4. Enter Group Joining Password: lacdph (all lowercase)
5. Click 'Join Group'
6. After you have joined the group, follow directions below to confer rights to LAC DPH

2.2 Conferring Rights

To comply with the Health Officer Order, conferred rights to CRE data with resident identifiers in the MDRO/CDI Events module is required. Please note the following elements must be present in the conferred rights template you accept.

1. Select the group named LA County CRE in the 'Groups that have access to this facility's data' box
 - a. Click 'Confer Rights'
2. Under General:
 - a. Select resident data with specified identifiers
 - i. Ensure the following identifiers are selected: Gender, DOB, Ethnicity, Race, Name
 - b. Select Monthly Reporting Plan, Long Term Care Annual Facility Survey, Data Analysis, and Facility Information



Define Rights-Long Term Care

! Please select the rights that facilities joining "LA County CRE" will confer

General	
	View Options
Resident	<input type="radio"/> With All Identifiers
	<input type="radio"/> Without Any Identifiers
	<input checked="" type="radio"/> With Specified Identifiers
	<input checked="" type="checkbox"/> Gender <input checked="" type="checkbox"/> DOB <input checked="" type="checkbox"/> Ethnicity <input checked="" type="checkbox"/> Race
	<input type="checkbox"/> Medicare # <input checked="" type="checkbox"/> Name <input type="checkbox"/> SSN <input type="checkbox"/> Resident ID
<input checked="" type="checkbox"/> Monthly Reporting Plan	
<input checked="" type="checkbox"/> Long Term Care Annual Facility Survey	
<input checked="" type="checkbox"/> Data Analysis	
<input checked="" type="checkbox"/> Facility Information	

3. Under MDRO/CDI Events:
 - a. Month: January
 - b. Year: 2017
 - c. Leave 'To' fields blank
 - d. Location Type: FACWIDE
 - e. Location: FacWIDEIn
 - f. Specific Organism Type: CRE – CRE (CRE-Ecoli, CRE-Enterobacter, CRE-Klebsiella)
 - g. Event Type: LABID – Laboratory-identified MDRO or CDI Event
4. Save the template

MDRO/CDI Events
Includes Applicable Denominators and "No Events" Indicators

Month	Year	To	Month	Year	Location Type	Location	Other Location Requirements
January	2017				FACWIDEIN	FACWIDEIN	
Specific Organism Type:							Event Type:
<input type="checkbox"/> ACINE - MDR-Acinetobacter <input checked="" type="checkbox"/> CDIF - C. difficile <input type="checkbox"/> CEPHRKLEB - CephR-Klebsiella <input checked="" type="checkbox"/> CRE - CRE (CRE-Ecoli, CRE-Enterobacter, CRE-Klebsiella) <input type="checkbox"/> MRSA - MRSA <input type="checkbox"/> MSSA - MSSA <input type="checkbox"/> VRE - VRE							LABID - Laboratory-identified MDRO or CDI Event

2.3 Adding CRE to Monthly Reporting Plan

1. In the NHSN menu bar on the left of the screen select Reporting Plan → Find
2. In Month field enter January
3. In Year field enter 2017

Find Monthly Reporting Plan

- Enter search criteria and click Find
- Fewer criteria will return a broader result set
- More criteria will return a narrower result set

Facility ID: NHSN State Users Test Facility #1 (ID 15164) ▼

Month: January ▼

Year: 2017 ▼

4. Once you are in the January 2017 plan scroll down and select 'Edit'
5. Scroll down to the Lab ID Event Module section of the template
6. Check the box under Lab ID Event All Specimens for CRE
7. Save your monthly reporting plan. This same plan should be used for all reporting months going forward.

LabID Event Module

Locations	Specific Organism Type	Lab ID Event All Specimens
Facility-wide Inpatient (FacWIDEIn)	CDIF - C. difficile	<input checked="" type="checkbox"/>
Facility-wide Inpatient (FacWIDEIn)	CRE - CRE (CRE-Ecoli, CRE-Enterobacter, CRE-Klebsiella)	<input checked="" type="checkbox"/>

2.4 Creating Custom Reporting Fields

We will be creating new custom fields in your LabID entry form to capture the CRE positive resident's healthcare exposure, both from direct transfers to your facility as well as other known exposures obtained from history and physical examinations, medical record review from transferring facilities, etc.

Variables to be created in NHSN for additional data entry:

- ADMIT_FACILITY: Enter the name of the facility that transferred the resident under this variable; if you do not know the name of the facility enter Unk – Alphanumeric field
- DATE_LAST_CRE: Enter the date of the last CRE positive test for the resident in the current admission, regardless of specimen source; if the test being reported was the only CRE positive during the admission, leave blank – Date field
- DIED: Indicate Yes, No, or Unk for resident status at the end of the current hospitalization or at the time the event is being reported – Alphanumeric field
- DISCHARGED_TO: If known, indicate the name of the facility to which the resident was discharged; if not known, enter Unk – Alphanumeric field
- DATE_DEATH.D/C: enter the date the resident was discharged; if the resident died, please enter the date of death here. If unknown or resident not discharged when entering event leave blank – Date field

Note: Custom fields are to be created in the order listed above for consistency of data analysis across the many facilities reporting into NHSN. The NHSN system will label and order the variables in the order they are created in the custom options manager, so they will be labeled 'custom 1', 'custom 2', etc. You are able to analyze the custom variables created in NHSN, though note they will be labeled as custom 1, custom 2, etc.

To create the custom variables in NHSN

1. In the left menu bar from the main NHSN page go to Facility → Customize Forms
2. Go down to the Custom Field Labels section
 - a. In Form Type field select CDC-Defined - LTCF - Event
 - b. In Form field select LABID - Laboratory Identified MDRO orA CDI EVENT
 - c. In Status field select Active
 - d. In the first row of the Define Custom Fields box click in the box under Label and enter your first custom variable name
 - e. In the same row tab to the box under Type and select Alphanumeric in the drop down box
 - f. In the same row tab to the box under Status and select Active
 - g. When your row entry is complete click Add Row to add another row for a new custom variable

VARIABLE CREATION EXAMPLE - ADMIT_FACILITY

1. Click in the box under Label and type ADMIT_FACILITY
2. Click in the box under Type and select 'Alphanumeric' in the drop down box
3. In the same row click in the box under Status and select 'Active'
4. When your row entry is complete click Add Row to add another row for a new custom variable
5. Continue with the additional custom variables in the order listed above
6. When you complete entry of all your custom variables click 'Save' to save the entry

Define Custom Fields			
Add Row			
Delete			
	Label	Type	Status
<input type="checkbox"/>	ADMIT_FACILITY	Alphanumeric	Active
<input type="checkbox"/>	DATE_LAST_CRE	Date	Active
<input type="checkbox"/>	DIED	Alphanumeric	Active
<input type="checkbox"/>	DISCHARGED_TO	Alphanumeric	Active
<input type="checkbox"/>	DATE_DEATH.D/C	Date	

2.5 Entering CRE Events into NHSN

1. Enter resident information as defined in rights template, including resident t Name, DOB, Gender, Ethnicity and Race
2. In Event Type select LABID-Laboratory-identified MDRO or CDI Event
3. Complete all required fields indicated with an * under Event Information
 - a. In Specific Organism Type select the CRE organism that was detected in your laboratory (CRE-Ecoli, CRE-Enterobacter, CRE-Klebsiella)
4. Custom field data entry
 - a. ADMIT_FACILITY: If the resident was immediately admitted from another facility to yours and you know the name of that healthcare facility, enter it in the ADMIT_FACILITY field
 - b. DATE_LAST_CRE: If the resident is positive multiple times during their stay, enter the date of the last CRE positive specimen collection in the DATE_LAST_CRE field
 - c. Died: indicate the resident's status at the time you are reporting the event (Yes, No, Unk)
 - d. DISCHARGED_TO: If you know the name of the facility the resident was discharged to, enter the name; if you do not know the name but know the facility type (i.e., hospital, other SNF, home) enter that here
 - e. DATE_DEATH.D/C: if the resident has been discharged or died at the time you are reporting the event enter the date they died or the date they were discharged

Custom Fields

ADMIT_FACILITY:

DATE_LAST_CRE: 11

DIED: DISCHARGED_TO:

DATE_DEATH.D/C: 11

Sample patient data entry:

Patient information:

Resident Information

Facility ID *: LTCF/QIN-QIO Project - Test (ID 45188) ▾

Resident ID *: 1234

Last Name: Mouse

Middle Name:

Gender *: M - Male ▾

Ethnicity: NOHISP - Not Hispanic or Not Latino ▾

Race: American Indian/Alaska Native Asian
 Black or African American Native Hawaiian/Other Pacific Islander
 White

Event #:

Social Security #:

Medicare number (or comparable railroad insurance number):

First Name: Mickey

Date of Birth *: 11/18/1928 13

Event Information:

Event Information

Event Type *: LABID - Laboratory-identified MDRO or CDI Event ▾

Specific Organism Type *: CREKLEB - CRE-Klebsiella ▾

Specimen Body Site/System *: GU - GenitoUrinary System ▾

Specimen Source *: URINARSPC - Urinary specimen ▾

Resident Care Location *: XYZ - XYZ ▾

Primary Resident Service Type *: VENT - Ventilator ▾

Has resident been transferred from an acute care facility in the past 4 weeks *: Y - Yes ▾

If Yes, date of last transfer from acute care to your facility *: 08/29/2018 13

If Yes, was the resident on antibiotic therapy for this specific organism type at the time of transfer to your facility *: Y - Yes ▾

Documented evidence of previous infection or colonization with this specific organism type from a previously reported LabID Event in any prior month?

Date Specimen Collected *: 09/01/2018 13

Custom Fields:

Custom Fields

ADMIT_FACILITY: LAC SNF DATE_LAST_CRE: 01/19/2017

DIED: NO DISCHARGED_TO: LAC SNF

DATE_DEATH.D/C: 01/20/2017

2.6 Summary Data Entry

Entry of monthly denominator data is required in order to complete reporting in NHSN. Please enter the number of resident admissions, and resident days for your facility for the indicated month. If your facility did not identify any CRE during the month you are submitting denominator data, please ensure you check the “Report No Events” box under the individual CRE organism for which you are reporting no events.



Add Monthly Summary Data

Mandatory fields marked with *

Fields required for record completion marked with **

Facility ID *:

Month *:

Year *:

Denominators for Long Term Care Locations

Location Code	Total Resident Days	Urinary Catheter Days	Report No UTI	New Antibiotic Starts for UTI Indication	Number of Urine Cultures Ordered
<input type="checkbox"/> Facility-wide Inpatient (FacWIDEIn) *	<input type="text"/> **	<input type="text"/> *	<input type="checkbox"/>	<input type="text"/> *	<input type="text"/> *

MDRO & CDI LabID Event Reporting

Location Code			Specific Organism Type							
			MRSA	VRE	CephR-Klebsiella	CRE-Ecoli	CRE-Enterobacter	CRE-Klebsiella	C. difficile	MDR-Acinetobacter
<input type="checkbox"/> Facility-wide Inpatient (FacWIDEIn) *	Resident Admissions: <input type="text"/> *									
	Resident Days: <input type="text"/> *	LabID Event (All specimens)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	Number of Admissions on C. diff Treatment: <input type="text"/> *	Report No Events	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

If you have additional questions, please contact the Acute Communicable Disease Program at **(213)240-7941** or **hai@ph.lacounty.gov**.