Interhospital comparisons of infection rates are valid only if the methods of surveillance are uniform and reliable across institutions, but there is growing evidence that manual data collection and entry are open to errors, and wide institutional variation has been observed in collecting and reporting infection rates, potentially undermining the quality and safety of inpatient care. In the United States, 100,000 patients die annually from HAIs and the associated treatment costs are estimated to be $28–33 billion.2,3 Preventable medical errors such as HAIs could potentially follow.1 The Centers for Disease Control and Prevention (CDC) estimates that each year 1.7 million patients develop an HAI, and 99,000 die as a result, adding $28–33 billion in healthcare costs.2 At the individual hospital and patient level, the costs are astounding—Pennsylvania reported in 2007 that insurers paid an average of $5,131 in hospital costs for patients with HAIs, compared with just $2,111 for patients without an infection.4

Initiatives to help reduce these preventable errors include the collection, analysis, and reporting of hospital HAI data by state agencies and the CDC’s National Healthcare Safety Network (NHSN).6 State mandated public reporting of HAIs is intended to enable consumers to make more informed healthcare decisions, as well as improve infection prevention measures and the quality of care through transparency.5 It is not enough to just report data; the processes involved in manually gathering and reporting hospital HAI data by state agencies and the CDC’s National Healthcare Safety Network (NHSN) are labor intensive and time consuming. Manual data collection and entry are open to errors, and wide institutional variation has been observed in collecting and reporting infection rates, potentially undermining the quality of data and NHSN infection reporting.6

Automated NHSN Reporting for Healthcare-Associated Infections: Improving Consistency, Accuracy and Patient Safety

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To address these barriers, an increasing number of hospitals of all sizes have turned to clinical decision support systems such as TheraDoc. The TheraDoc Clinical Intelligence Platform is a suite of technology tools that helps hospitals improve infection prevention and control. The TheraDoc platform continuously monitors data such as lab orders, microbiology, medication orders, pharmacy, patient demographics, device data,trauma, birth and death, and more, helping facilities identify when to intervene to prevent infection. It also integrates with other third-party software systems such as the TheraDoc Clinical Intelligence Platform and the TheraDoc platform. This vital step ensures that clinical and administrative data are available in one location. TheraDoc’s ability to track and analyze data in real-time enables facilities to quickly identify and mitigate infection prevention and control risks. The TheraDoc platform continuously monitors data such as lab orders, microbiology, medication orders, pharmacy, patient demographics, device data, trauma, birth and death, and more, helping facilities identify when to intervene to prevent infection. It also integrates with other third-party software systems such as the TheraDoc Clinical Intelligence Platform and the TheraDoc platform. This vital step ensures that clinical and administrative data are available in one location. TheraDoc’s ability to track and analyze data in real-time enables facilities to quickly identify and mitigate infection prevention and control risks. The TheraDoc platform continuously monitors data such as lab orders, microbiology, medication orders, pharmacy, patient demographics, device data, trauma, birth and death, and more, helping facilities identify when to intervene to prevent infection. It also integrates with other third-party software systems such as the TheraDoc Clinical Intelligence Platform and the TheraDoc platform. This vital step ensures that clinical and administrative data are available in one location. TheraDoc’s ability to track and analyze data in real-time enables facilities to quickly identify and mitigate infection prevention and control risks. The TheraDoc platform continuously monitors data such as lab orders, microbiology, medication orders, pharmacy, patient demographics, device data, trauma, birth and death, and more, helping facilities identify when to intervene to prevent infection. It also integrates with other third-party software systems such as the TheraDoc Clinical Intelligence Platform and the TheraDoc platform. This vital step ensures that clinical and administrative data are available in one location. TheraDoc’s ability to track and analyze data in real-time enables facilities to quickly identify and mitigate infection prevention and control risks. The TheraDoc platform continuously monitors data such as lab orders, microbiology, medication orders, pharmacy, patient demographics, device data, trauma, birth and death, and more, helping facilities identify when to intervene to prevent infection. It also integrates with other third-party software systems such as the TheraDoc Clinical Intelligence Platform and the TheraDoc platform. This vital step ensures that clinical and administrative data are available in one location. TheraDoc’s ability to track and analyze data in real-time enables facilities to quickly identify and mitigate infection prevention and control risks. The TheraDoc platform continuously monitors data such as lab orders, microbiology, medication orders, pharmacy, patient demographics, device data, trauma, birth and death, and more, helping facilities identify when to intervene to prevent infection. It also integrates with other third-party software systems such as the TheraDoc Clinical Intelligence Platform and the TheraDoc platform. This vital step ensures that clinical and administrative data are available in one location. TheraDoc’s ability to track and analyze data in real-time enables facilities to quickly identify and mitigate infection prevention and control risks. The TheraDoc platform continuously monitors data such as lab orders, microbiology, medication orders, pharmacy, patient demographics, device data, trauma, birth and death, and more, helping facilities identify when to intervene to prevent infection. It also integrates with other third-party software systems such as the TheraDoc Clinical Intelligence Platform and the TheraDoc platform. This vital step ensures that clinical and administrative data are available in one location. TheraDoc’s ability to track and analyze data in real-time enables facilities to quickly identify and mitigate infection prevention and control risks.
To address these barriers, an increasing number of hospitals of all sizes and regions are adopting infection prevention systems from Sanofi Pasteur, a member of the TheraDoc™ Clinical Intelligence Platform suite. These systems automate surveillance and reporting requirements, help facilities overcome challenges such as time-consuming manual data collection and entry, and promote standardization and quality of care. As these systems reduce manual workload and improve accuracy, they ensure streamlined reporting of infection data, and a number of states are now using TheraDoc NHSN reporting to collect and improve infection prevention data.

Barriers to Successful NHSN Reporting

While participation in the NHSN provides a variety of potential benefits to hospitals, hybrid and state hospital agencies, and the public, it presents numerous challenges. One of the key barriers to NHSN participation is the labor-intensive and time-consuming, especially for facilities with limited financial resources, human resource, and technology staff. Data accuracy and the issue of variability in infectious disease surveillance reporting make it difficult to ensure the effectiveness of reporting and benchmarking efforts.

Data Collection

Data collection and validation are the first steps in the process. Facilities utilizing manual infection surveillance methods must allocate staff resources to collecting and reviewing significant amounts of data from a variety of sources. In addition to infections, drug errors, and surgical site infections, reporting standards have been expanded to include multisite events, such as sepsis, bloodstream infections, and the information is available to consumers. Common among Medicare patients, such as catheter-associated urinary tract infections, and the information is available to consumers. The National Healthcare Safety Network (NHSN) is the CDC’s tool for surveillance, reporting, and prevention of HAIs.

The NHSN provides valuable information for healthcare facilities, reducing costs and, most importantly, saving lives. The NHSN reduces preventable hospital-acquired infections, reduces hospitalizations, and decreases mortality and length of stay. The NHSN assists healthcare facilities in identifying and responding to healthcare-associated infections, which could mean the difference between life and death for patients. The NHSN helps track, prevent, and report healthcare-associated infections.

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Conclusion

Improving patient safety is one of the country’s most critical priorities, and a number of financial incentives and penalties have been implemented to focus on improving patient outcomes and improving the quality of care. For instance, Medicare and Medicaid are the largest payors in the country, and they use a variety of tools to encourage hospitals to adopt and implement evidence-based practices that improve patient outcomes. The NHSN, for example, is a valuable tool for hospitals to use in identifying and reporting infections.

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To address these challenges, an increasing number of hospitals of all types have engaged in the NHSN and taken advantage of the capabilities of the Theradoc system. TheraDoc’s Clinical Intelligence Platform is anchored in the notion of the electronic health record (EHR) and is a component of the Theradoc System that adds value by providing a system to facilitate the collection and management of infection surveillance data. The Clinical Intelligence Platform manages the collection of surveillance data, stores it in a database, and integrates it with healthcare systems. This system eliminates the need for patients to fill out forms, enter data, and answer questions about their conditions. Instead, data is automatically collected and stored in a database. This allows healthcare providers to quickly access this information and make decisions about patient care. Additionally, the system provides a platform for benchmarking and comparison of data across multiple facilities, enabling healthcare providers to identify areas for improvement and implement best practices. TheraDoc provides a real-time system for tracking and reviewing surgical-site infection data before inputting it into the NHSN system, reducing time-to-accuracy. This can help reduce the time and cost associated with manual data collection and increases the accuracy of the data. In addition, this system can help improve patient safety by allowing healthcare providers to quickly identify potential issues and take appropriate action. Conclusion

Improving patient safety is one of the country's most critical priorities, and a number of financial incentives and penalties have been introduced to providers on systems that can help reduce infections. In 2015, the Centers for Medicare and Medicaid Services (CMS) announced that hospitals could face penalties for high rates of nosocomial infections, including bloodstream infections, ventilator-associated pneumonia, catheter-associated urinary tract infections, and surgical-site infections. The CMS also announced that hospitals would be required to submit data on these infections to the NHSN. Therefore, providers must ensure that they are collecting and reporting this data accurately and efficiently to avoid financial penalties. The NHSN is a national surveillance system that collects data on nosocomial infections in U.S. hospitals. The system collects data on the number of infections, the types of infections, and the severity of infections. This information is used to identify trends in infections and to develop strategies to prevent infections. In addition, the NHSN is used to track the effectiveness of infection control measures. The TheraDoc system provides a platform for easy, efficient, and comprehensive data collection, analysis, and reporting of NHSN data. This allows hospital staff to quickly and accurately identify trends and patterns in infections, and to take appropriate action to prevent infections. The TheraDoc system is an important tool for improving patient safety and reducing healthcare costs.
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White Paper

Automated NHSN Reporting for Healthcare-Associated Infections: Improving Consistency, Accuracy and Patient Safety

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Introduction

Preventable medical errors such as healthcare-associated infections (HAIs) significantly increase patient mortality and morbidity, and have an enormous financial impact on healthcare institutions. The Centers for Disease Control and Prevention (CDC) estimates that each year 1.7 million patients develop an HAI, and $28–33 billion in direct healthcare costs are incurred.2,3 Additional recent developments have increased pressure on healthcare facilities for reporting HAIs, including a move by the Centers for Medicaid and Medicare Services (CMS) that will put Medicare dollars on the line for hospitals that fail to report data on central-line associated bloodstream infections and surgical-site infections via the NHSN.7 Requirements for additional types of infections—as well as other types of medical errors—could potentially follow.

White NHSN infection reporting has the potential to help hospitals improve the quality and safety of important care, the processes involved in manually gathering data from a variety of sources across the hospital, confirming HAIs, reviewing data for accuracy and standardized vocabulary (e.g., NHSN operative codes), and reporting data into the online NHSN system are labor intensive and time consuming. Manual data collection and entry are error prone, and scale institutional variance has been observed in collecting and reporting infection rates, potentially undermining the goals of state and NHSN infection reporting7,9.