Welcome!

- **Audio for this event is available via ReadyTalk® Internet Streaming.**

- **No telephone line is required.**

- **Computer speakers or headphones are necessary to listen to streaming audio.**

- **Limited dial-in lines are available. Please send a chat message if needed.**
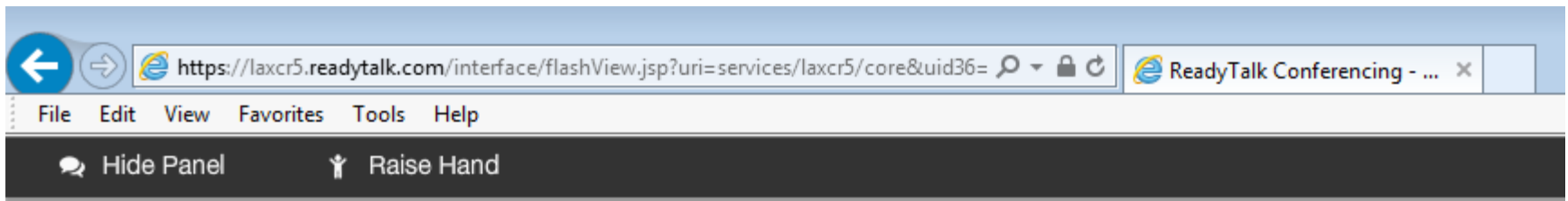
- **This event is being recorded.**

Troubleshooting Audio

Audio from computer speakers breaking up? Audio suddenly stop?

- **Click <u>Refresh</u> icon – or- Click F5**
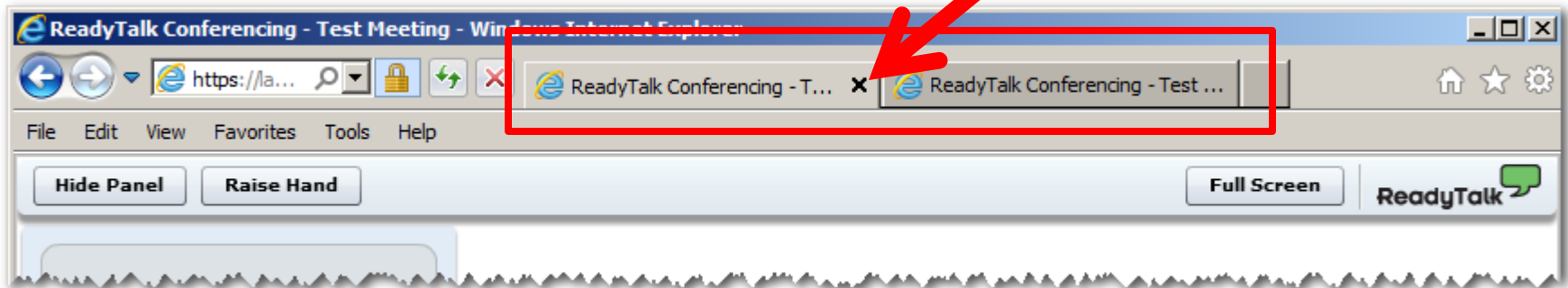
F5 Key
Top row of Keyboard

ReadyTalk Conferencing - ...

File   Edit   View   Favorites   Tools   Help

Hide Panel   Raise Hand

Location of Buttons

Refresh

Troubleshooting Echo

- **Hear a bad echo on the call?**
- **Echo is caused by multiple browsers/tabs open to a single event – multiple audio feeds.**
- **Close all but one browser/tab and the echo will clear up.**

Example of Two Browsers Tabs open in Same Event

Submitting Questions

Type questions in the "Chat with Presenter" section, located in the bottom-left corner of your screen.

Getting Ready for August 15, 2016 Data Submissions

Tom Ross, MS
PPS-Exempt Cancer Hospital Quality Reporting (PCHQR) Program Lead,
Hospital Inpatient Values, Incentives, and Quality Reporting (VIQR)
Outreach and Education Support Contractor (SC)

Lisa Vinson, BS, BSN, RN
Project Manager, Hospital Inpatient VIQR Outreach and Educations SC

Henrietta Hight, BA, BSN, RN
Project Coordinator, Hospital Inpatient VIQR Outreach and Education SC

June 23, 2016

Acronyms and Abbreviations

ACS	American College of Surgeons
ADCC	Alliance of Dedicated Cancer Centers
ACA	Affordable Care Act
AHRQ	Agency for Healthcare Research and Quality
AMA	American Medical Association
CAUTI	Catheter-Associated Urinary Tract Infections
CDC	Centers for Disease Control and Prevention
CCN	CMS Certification Number
CDI	*Clostridium difficile* Infection
CE	Continuing Education
CLABSI	Central Line-Associated Bloodstream Infection
CMS	Centers for Medicare & Medicaid Services
CPT	Current Procedural Terminology
CST	Cancer-Specific Treatment
CSV	Comma Separated Values
CY	Calendar Year
DACA	Data Accuracy and Completeness Acknowledgement
EBRT	External Beam Radiotherapy
FFS	Fee-For-Service
FY	Fiscal Year
Fxns	Fractions
Gy	Gray
HAI	Healthcare-Associated Infection
HCAHPS	Hospital Consumer Assessment of Healthcare Providers and Systems
HCP	Healthcare Personnel
HHS	Health and Human Services
HQR	Hospital Quality Reporting

ICD	International Classification of Diseases
IPF	Inpatient Psychiatric Facility
IPPS	Inpatient Prospective Payment System
IQR	Inpatient Quality Reporting
LabID	Laboratory-Identified
LTCH	Long-Term Care Hospital
MAP	Measure Application Partnership
MIF	Measure Information Form
MUC	Measures Under Consideration
N/A	Not Available
NIH	National Institutes of Health
NHSN	National Healthcare Safety Network
NQF	National Quality Forum
OCM	Oncology Care Measure
OQR	Outpatient Quality Reporting
PCH	PPS-Exempt Cancer Hospital
PCHQR	PPS-Exempt Cancer Hospital Quality Reporting
PQRS	Physician Quality Re[porting System
PR	Public Reporting
Q	Quarter
SBRT	Stereotactic Body Radiation Therapy
SC	Support Contractor
SCIP	Surgical Care Improvement Project
SRS	Stereotactic Radiosurgery
SSI	Surgical Site Infection
TEP	Technical Expert Panel
TBD	To be determined
TJC	The Joint Commission
VIQR	Value, Incentives, and Quality Reporting

Purpose

This presentation will provide a detailed review of the August 15, 2016 data submissions of the CST, SCIP, OCM, and EBRT measures. Submission of this data via *QualityNet* Secure File Transfer in a Comma Separated Values (CSV) format will be reexamined. Submission of the HAI measures via the NHSN will also be addressed.

Objectives

Upon completion of this program participants will be able to:

- Summarize the similarities and differences regarding CST, SCIP, OCM, EBRT, and HAI data entry

- Meet data entry and submission requirements for CST, SCIP, OCM, and EBRT CSV files

- Use the provided templates and tools to enter and transmit CST, SCIP, OCM, and EBRT measure data

Summary of Data Submission

Due August 15, 2016:

- CST measures
  - Q4 2015 PCH-1 and PCH-2 Chemo
  - Q2 2015 PCH-3 Hormonal
- SCIP measures: Q2 – Q3 2015
  - PCH 19 – PCH 24
- OCMs: Q2 – Q4 2015
  - PCH 14 - 18
- EBRT measure: Q1 – Q4 2015
  - PCH 25
- HAI measures: Q1 2016
  - Reporting PCH 4, PCH 5, PCH 6 & 7, PCH 26, PCH 27

Measure ID Crosswalk

Measure Group	Measure ID	NQF #	Other Name	Measure Description
CST Measures	PCH-1	223	ACT	Adjuvant chemotherapy for Stage III colon cancer
	PCH-2	559	MAC	Combination chemotherapy for breast cancer
	PCH-3	220	HT	Adjuvant hormonal therapy (breast cancer)
Surgical Care Improvement Project (SCIP) Measures	PCH-19	218	SCIP-VTE-2	Surgery Patients Who Received Appropriate Venous Thromboembolism Prophylaxis Within 24 Hours Prior to Surgery to 24 Hours After Surgery
	PCH-20	453	SCIP-Inf-9	Urinary catheter removed on Postoperative Day 1 (POD 1) or Postoperative Day 2 (POD 2) with day of surgery being day zero
	PCH-21	527	SCIP-Inf-1	Prophylactic Antibiotic Received Within One Hour Prior to Surgical Incision
	PCH-22	528	SCIP-Inf-2	Prophylactic Antibiotic Selection for Surgical Patients
	PCH-23	529	SCIP-Inf-3	Prophylactic Antibiotics Discontinued Within 24 Hours After Surgery End Time - Overall Rate
	PCH-24	284	SCIP-Card-2	Surgery Patients on Beta-Blocker Therapy Prior to Arrival Who Received a Beta-Blocker During the Perioperative Period

Measure ID Crosswalk

Measure Group	Measure ID	NQF #	Other Name	Measure Description
Oncology Care Measures (OCM)	PCH-14	382		Oncology-Radiation Dose Limits to Normal Tissue
	PCH-15	383		Oncology: Plan of Care for Pain
	PCH-16	384		Oncology: Pain Intensity Quantified
	PCH-17	390		Prostate Cancer-Adjuvant Hormonal Therapy for High-Risk Patients
	PCH-18	389		Prostate Cancer-Avoidance of Overuse Measure-Bone Scan for Staging Low-Risk Patients
Clinical Effectiveness	PCH-25	1822	EBRT	External Beam Radiotherapy for Bone Metastases
HAI	PCH-4	139	CLABSI	Central Line-Associated Bloodstream Infection
	PCH-5	138	CAUTI	Catheter-Associated Urinary Tract Infection
	PCH-6 & 7	753	SSI	Surgical Site Infections (colon surgery (PCH-6) and abdominal hysterectomy surgery (PCH-7))
	PCH-26	1717	CDI	Hospital-onset *Clostridium difficile* infection
	PCH-27	1716	MRSA	Hospital-onset MRSA bacteremia

General CSV Process
Example: PCH-3 Q2 2015
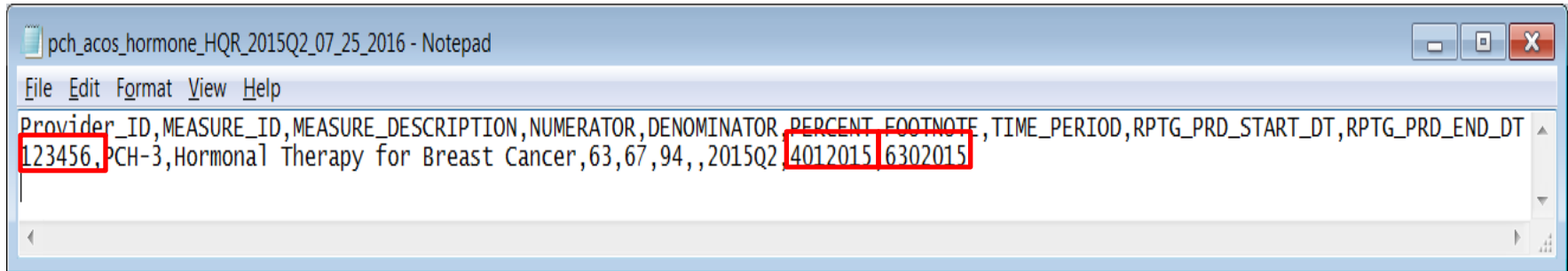
- Open "hormone" file with Excel®
- Enter CCN, numerator, denominator and per.cent on each row

- Only enter data in the highlighted cells
- Percent is calculated with specificity to one decimal place for CSTs (eg; 94.0)
- Save as CSV file with name: "pch_acos_hormone_HQR_2015Q2_MM_DD_YYYY" where MM_DD_YYYY is the date the file will be sent (eg; 07_25_2016)
- Note that in Excel® leading zeros for RPTG_PRD start and end dates are missing
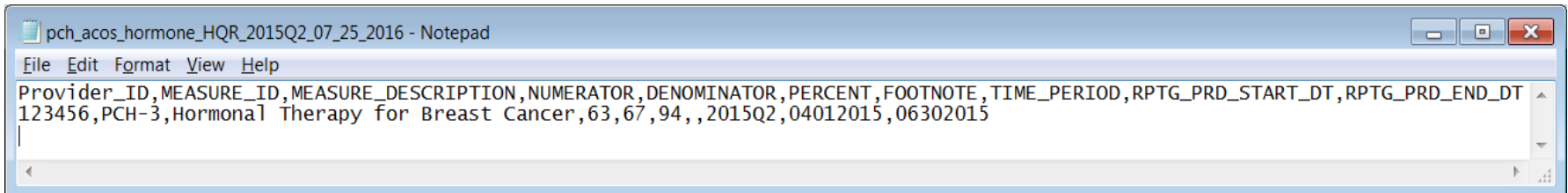
General CSV Process Example: PCH-3 Q2 2015

Notepad window: pch_acos_hormone_HQR_2015Q2_07_25_2016 - Notepad

```
Provider_ID,MEASURE_ID,MEASURE_DESCRIPTION,NUMERATOR,DENOMINATOR,PERCENT,FOOTNOTE,TIME_PERIOD,RPTG_PRD_START_DT,RPTG_PRD_END_DT
123456,PCH-3,Hormonal Therapy for Breast Cancer,63,67,94,,2015Q2,4012015,6302015
```

- Open "hormone" file with Notepad®
- Enter leading zero(s) as needed
  - In "Provider_ID" column if California hospital
  - In "RPTG_PRD_START_DT" and "RPTR_PRD_END_DT," if necessary
- Note that trailing zero(s) (eg; 94.0) disappeared; this is fine!

Notepad window: pch_acos_hormone_HQR_2015Q2_07_25_2016 - Notepad

```
Provider_ID,MEASURE_ID,MEASURE_DESCRIPTION,NUMERATOR,DENOMINATOR,PERCENT,FOOTNOTE,TIME_PERIOD,RPTG_PRD_START_DT,RPTG_PRD_END_DT
123456,PCH-3,Hormonal Therapy for Breast Cancer,63,67,94,,2015Q2,04012015,06302015
```

- Save file in Notepad®
- File is ready to send
- Note that for Hospital Quality Reporting "FOOTNOTE" is always empty

CSV File Creation Review
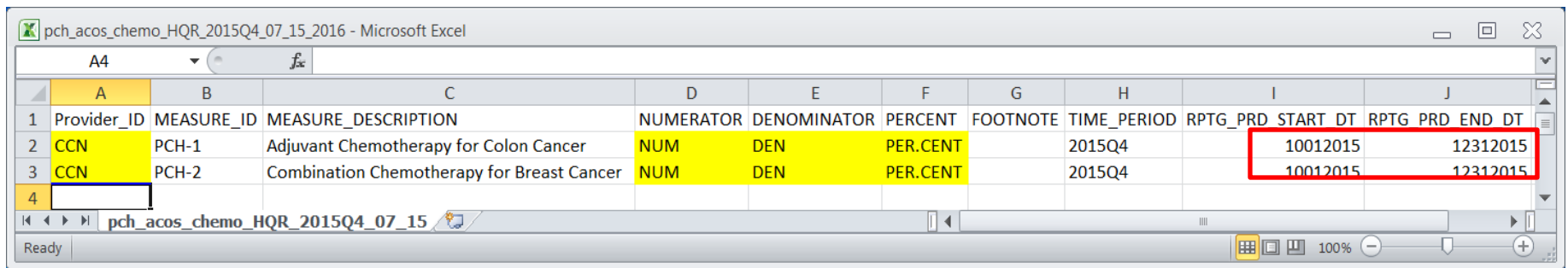
- Always use the templates provided

- Open the template in Excel®

- **Never** change the data in the following columns of the template:
    - "MEASURE_ID"
    - "MEASURE_DESCRIPTION"
    - "FOOTNOTE"
    - "TIME_PERIOD"

CSV File Creation Review (2 of 2)

- Enter your data in **all** required rows
    - "Provider_ID"
    - "NUMERATOR"
    - "DENOMINATOR"
    - "PERCENT"
    - "SF" (sampling frequency), "POP" (population) and "SAMP" (sample size) if required (for OCM and EBRT files only)
- Save file as CSV with date that you will submit data
- Open with Notepad®
    - Add leading zero(s), as needed
    - Save in Notepad®
- File is ready to be sent via Secure File Transfer in *QualityNet*

PCH-1 and PCH-2
Q4 2015 External Files
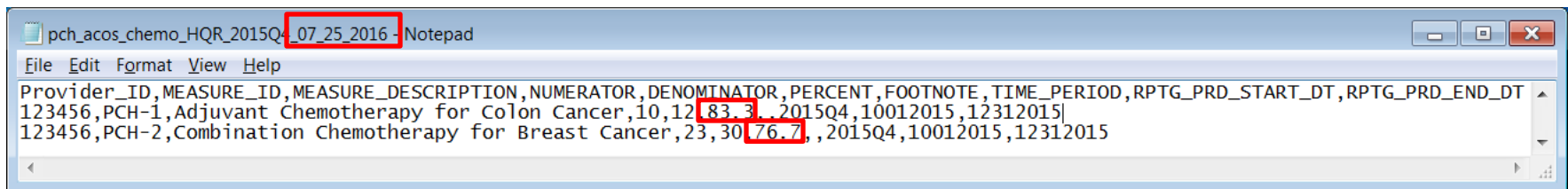
- Opening "chemo" template in Excel®

- Opening "chemo" file to be transmitted on 07.25.2016 with data entered in Notepad®

PCH-19 – 24 (SCIP) Q2–Q3 2015 External File

Viewed from Excel®

PCH-19 – 24 (SCIP) Q2–Q3 2015 External File

Viewed from Excel® with provider data entered

	A	B	C	D	E	F	G	H	I
1	Provider_ID	MEASURE_ID	NUMERATOR	DENOMINATOR	PERCENT	TIME_PERIOD	RPTG_PRD_START_DT	RPTG_PRD_END_DT	FOOTNOTE
2	123456	PCH-19	12	16	75	2015Q2	4012015	6302015	
3	123456	PCH-19	13	17	76.5	2015Q3	7012015	9302015	
4	123456	PCH-20	12	16	75	2015Q2	4012015	6302015	
5	123456	PCH-20	11	13	84.6	2015Q3	7012015	9302015	
6	123456	PCH-21	20	20	100	2015Q2	4012015	6302015	
7	123456	PCH-21	16	18	88.9	2015Q3	7012015	9302015	
8	123456	PCH-22	14	15	93.3	2015Q2	4012015	6302015	
9	123456	PCH-22	13	14	92.9	2015Q3	7012015	9302015	
10	123456	PCH-23	12	13	92.3	2015Q2	4012015	6302015	
11	123456	PCH-23	9	10	90	2015Q3	7012015	9302015	
12	123456	PCH-24	12	15	80	2015Q2	4012015	6302015	
13	123456	PCH-24	10	12	83.3	2015Q3	7012015	9302015	

PCH-19 – 24 (SCIP)
Q2–Q3 2015 External File

Viewed from Notepad®

Three things to note:
1. File name changed to date of transmission
2. The trailing zeros in "PERCENT" do not show; that is fine
3. Need to enter the leading zeros for "RPTG_PRD_START_DT" and "RPTD_PRD_END_DT"

PCH-19 to 24 (SCIP)
Q2–Q3 2015 External File

Viewed from Notepad® with leading zero(s) entered
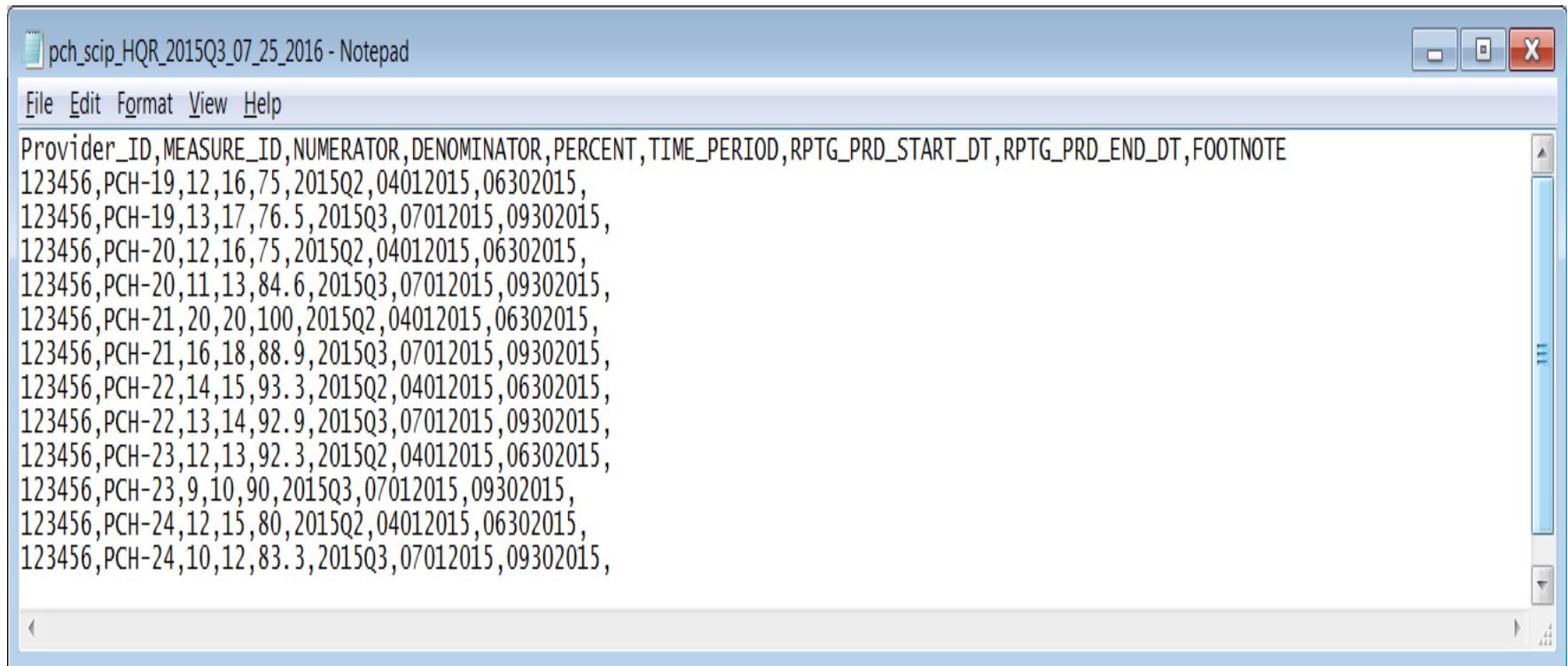

```
pch_scip_HQR_2015Q3_07_25_2016 - Notepad

File  Edit  Format  View  Help

Provider_ID,MEASURE_ID,NUMERATOR,DENOMINATOR,PERCENT,TIME_PERIOD,RPTG_PRD_START_DT,RPTG_PRD_END_DT,FOOTNOTE
123456,PCH-19,12,16,75,2015Q2,04012015,06302015,
123456,PCH-19,13,17,76.5,2015Q3,07012015,09302015,
123456,PCH-20,12,16,75,2015Q2,04012015,06302015,
123456,PCH-20,11,13,84.6,2015Q3,07012015,09302015,
123456,PCH-21,20,20,100,2015Q2,04012015,06302015,
123456,PCH-21,16,18,88.9,2015Q3,07012015,09302015,
123456,PCH-22,14,15,93.3,2015Q2,04012015,06302015,
123456,PCH-22,13,14,92.9,2015Q3,07012015,09302015,
123456,PCH-23,12,13,92.3,2015Q2,04012015,06302015,
123456,PCH-23,9,10,90,2015Q3,07012015,09302015,
123456,PCH-24,12,15,80,2015Q2,04012015,06302015,
123456,PCH-24,10,12,83.3,2015Q3,07012015,09302015,
```

Unique Characteristics of a SCIP File

- The name of file: pch_**scip**_HQR_**2015Q3**_07_15_2016.csv
  - "scip" is in lower case
  - As with all external files, reporting period in file name is LAST quarter in file: "2015Q3"
- There is no "MEASURE_DESCRIPTION" column
- "PERCENTAGE" is precise to one decimal place (note use of PER.CENT vs. PERCENT in templates)
- "FOOTNOTE" column is in an different order than other files, but remember, this is never used for HQR

Population and Sampling Questions
Applies to all OCM and EBRT Submissions Effective Now

Population and Sampling Questions

Question ID	Template Text	Question	Answers
Q1	"SF"	What was your hospital's sampling frequency?	"1" = Quarterly "2" = Not Sampled
Q2	"POP"	What was your hospital's quarterly Initial Patient Population?	(Number will vary)
Q3	"SAMP"	What was your hospital's quarterly Sample Size?	(Number will vary)

The following rule will result in a data submission error if not met

Rule	Applies to these measures only
For a given quarter of data, the sample size value must equal the corresponding denominator value for that measure	PCH-14 (NQF #0382) PCH-15 (NQF #0383) PCH-16 (NQF #0384) PCH-25 (NQF #1822)

Numerator Algorithm for NQF #0389

Apply numerator logic per calculated sample size

10 patient random sample selected
SAMPLE = 10

Bone Scan Performed

Yes → 3 patients

No → 7 patients → Included in Numerator (N)

Bone Scan Performed Due to Medical Reason

No → 2 patients

Yes → 1 patient

Bone Scan Performed Due to System Reason

No → 1 patient → Not included in Numerator (E) → 1 patient

Yes → 1 patient

Not included in Denominator Or Numerator (E)

Exclude 2 patients from denominator
Denominator = 8

Numerator

Concordance rate = 7/8 = 87.5
Report as 88%
(Note: OCM data is rounded to nearest whole number)

Updated: 03/16/2016

PCH-14 – 18 (OCMs)
Q2–Q4 2015 External File

Viewed from Excel®

	Provider_ID	MEASURE_ID	MEASURE_DESCRIPTION	OCM_Q1	OCM_Q2	OCM_Q3	NUMERATOR	DENOMINATOR	PERCENT	FOOTNOTE	TIME_PERIOD	RPTG_PRD_START_DT	RPTG_PRD_END_DT
1													
2	CCN	PCH-14	Oncology-Radiation Dose Limits to Normal Ti	SF	POP	SAMP	NUM	DEN	PERCENT		2015Q2	4012015	6302015
3	CCN	PCH-14	Oncology-Radiation Dose Limits to Normal Ti	SF	POP	SAMP	NUM	DEN	PERCENT		2015Q3	7012015	9302015
4	CCN	PCH-14	Oncology-Radiation Dose Limits to Normal Ti	SF	POP	SAMP	NUM	DEN	PERCENT		2015Q4	10012015	12312015
5	CCN	PCH-15	Oncology: Plan of Care for Pain	SF	POP	SAMP	NUM	DEN	PERCENT		2015Q2	4012015	6302015
6	CCN	PCH-15	Oncology: Plan of Care for Pain	SF	POP	SAMP	NUM	DEN	PERCENT		2015Q3	7012015	9302015
7	CCN	PCH-15	Oncology: Plan of Care for Pain	SF	POP	SAMP	NUM	DEN	PERCENT		2015Q4	10012015	12312015
8	CCN	PCH-16	Oncology: Pain Intensity Quantified	SF	POP	SAMP	NUM	DEN	PERCENT		2015Q2	4012015	6302015
9	CCN	PCH-16	Oncology: Pain Intensity Quantified	SF	POP	SAMP	NUM	DEN	PERCENT		2015Q3	7012015	9302015
10	CCN	PCH-16	Oncology: Pain Intensity Quantified	SF	POP	SAMP	NUM	DEN	PERCENT		2015Q4	10012015	12312015
11	CCN	PCH-17	Prostate Cancer-Adjuvant Hormonal Therapy	SF	POP	SAMP	NUM	DEN	PERCENT		2015Q2	4012015	6302015
12	CCN	PCH-17	Prostate Cancer-Adjuvant Hormonal Therapy	SF	POP	SAMP	NUM	DEN	PERCENT		2015Q3	7012015	9302015
13	CCN	PCH-17	Prostate Cancer-Adjuvant Hormonal Therapy	SF	POP	SAMP	NUM	DEN	PERCENT		2015Q4	10012015	12312015
14	CCN	PCH-18	Prostate Cancer-Avoidance of Overuse Meas	SF	POP	SAMP	NUM	DEN	PERCENT		2015Q2	4012015	6302015
15	CCN	PCH-18	Prostate Cancer-Avoidance of Overuse Meas	SF	POP	SAMP	NUM	DEN	PERCENT		2015Q3	7012015	9302015
16	CCN	PCH-18	Prostate Cancer-Avoidance of Overuse Meas	SF	POP	SAMP	NUM	DEN	PERCENT		2015Q4	10012015	12312015
17													

PCH-14 – 18 (OCMs)
Q2–Q4 2015 External File

Viewed from Excel® with provider data entered

Population and Sampling Tips

- If you enter not sampled ("2") for "Sampling Frequency (Q1)"
  - Your "Q2" (population), "Q3" (sample), and your "DENOMINATOR" should all be equal for PCH-14, 15 and 16
  - This may or may not be true for PCH-17 and 18 due to numerator exclusions
- If your initial patient population is ≤ 10, sampling is not allowed, and you should enter not sampled ("2") for "Sampling Frequency (Q1)"

Average Quarterly Initial Patient Population Size "N"	Minimum Required Sample Size "N"
>125	25
51–125	20% of Initial Population
10–50	10
<10	No Sampling: 100% of the Initial Patient Population
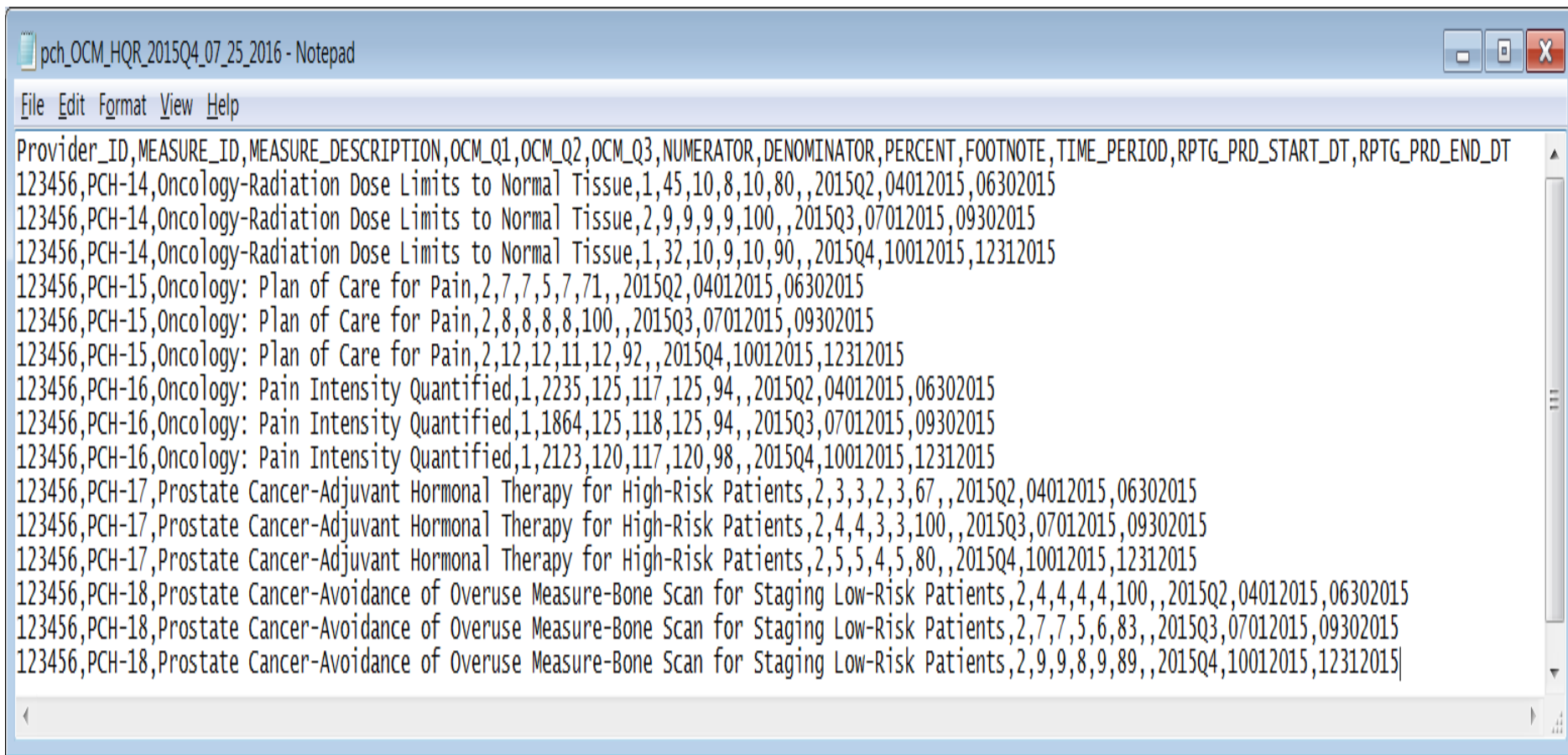
PCH-14 to 18 (OCMs)
Q2–Q4 2015 External File

Viewed from Notepad®

PCH-14 to 18 (OCMs)
Q2–Q4 2015 External File

Viewed from Notepad® with leading zero(s) entered


```
pch_OCM_HQR_2015Q4_07_25_2016 - Notepad

File  Edit  Format  View  Help

Provider_ID,MEASURE_ID,MEASURE_DESCRIPTION,OCM_Q1,OCM_Q2,OCM_Q3,NUMERATOR,DENOMINATOR,PERCENT,FOOTNOTE,TIME_PERIOD,RPTG_PRD_START_DT,RPTG_PRD_END_DT
123456,PCH-14,Oncology-Radiation Dose Limits to Normal Tissue,1,45,10,8,10,80,,2015Q2,04012015,06302015
123456,PCH-14,Oncology-Radiation Dose Limits to Normal Tissue,2,9,9,9,9,100,,2015Q3,07012015,09302015
123456,PCH-14,Oncology-Radiation Dose Limits to Normal Tissue,1,32,10,9,10,90,,2015Q4,10012015,12312015
123456,PCH-15,Oncology: Plan of Care for Pain,2,7,7,5,7,71,,2015Q2,04012015,06302015
123456,PCH-15,Oncology: Plan of Care for Pain,2,8,8,8,8,100,,2015Q3,07012015,09302015
123456,PCH-15,Oncology: Plan of Care for Pain,2,12,12,11,12,92,,2015Q4,10012015,12312015
123456,PCH-16,Oncology: Pain Intensity Quantified,1,2235,125,117,125,94,,2015Q2,04012015,06302015
123456,PCH-16,Oncology: Pain Intensity Quantified,1,1864,125,118,125,94,,2015Q3,07012015,09302015
123456,PCH-16,Oncology: Pain Intensity Quantified,1,2123,120,117,120,98,,2015Q4,10012015,12312015
123456,PCH-17,Prostate Cancer-Adjuvant Hormonal Therapy for High-Risk Patients,2,3,3,2,3,67,,2015Q2,04012015,06302015
123456,PCH-17,Prostate Cancer-Adjuvant Hormonal Therapy for High-Risk Patients,2,4,4,3,3,100,,2015Q3,07012015,09302015
123456,PCH-17,Prostate Cancer-Adjuvant Hormonal Therapy for High-Risk Patients,2,5,5,4,5,80,,2015Q4,10012015,12312015
123456,PCH-18,Prostate Cancer-Avoidance of Overuse Measure-Bone Scan for Staging Low-Risk Patients,2,4,4,4,4,100,,2015Q2,04012015,06302015
123456,PCH-18,Prostate Cancer-Avoidance of Overuse Measure-Bone Scan for Staging Low-Risk Patients,2,7,7,5,6,83,,2015Q3,07012015,09302015
123456,PCH-18,Prostate Cancer-Avoidance of Overuse Measure-Bone Scan for Staging Low-Risk Patients,2,9,9,8,9,89,,2015Q4,10012015,12312015
```

Unique Characteristics of OCM File

- The name of file:
  pch_**OCM**_HQR_**2015Q4**_07_15_2016.csv
  - Note upper case "OCM"
  - As with all external files, reporting period in file name is LAST quarter in file: "2015Q4"

- Percentage is precise to nearest whole number (note use of "PERCENT" in template)

- Inclusion of population and sampling elements
  - Sampled or not sampled ("OCM_Q1")
  - Initial quarterly patient population ("OCM_Q2")
  - Quarterly sample size ("OCM_Q3")

PCH-25 (EBRT)
Q1–Q4 2015 External File

Viewed from Excel®

PCH-25 (EBRT)
Q1–Q4 2015 External File

Viewed from Excel® with provider data entered

Provider_ID	MEASURE_ID	MEASURE_DESCRIPTION	EBRT_Q1	EBRT_Q2	EBRT_Q3	NUMERATOR	DENOMINATOR	PERCENT	FOOTNOTE	TIME_PERIOD	RPTG_PRD_START_DT	RPTG_PRD_END_DT
123456	PCH-25	External Beam Radiothera	2	27	27	25	27	93		2015Q1	1012015	3312015
123456	PCH-25	External Beam Radiothera	1	34	10	9	10	90		2015Q2	4012015	6302015
123456	PCH-25	External Beam Radiothera	1	65	13	11	13	85		2015Q3	7012015	9302015
123456	PCH-25	External Beam Radiothera	1	54	11	10	11	91		2015Q4	10012015	12312015

PCH-25 (EBRT)
Q1–Q4 2015 External File

Viewed from Notepad®

PCH-25 (EBRT)
Q1–Q4 2015 External File

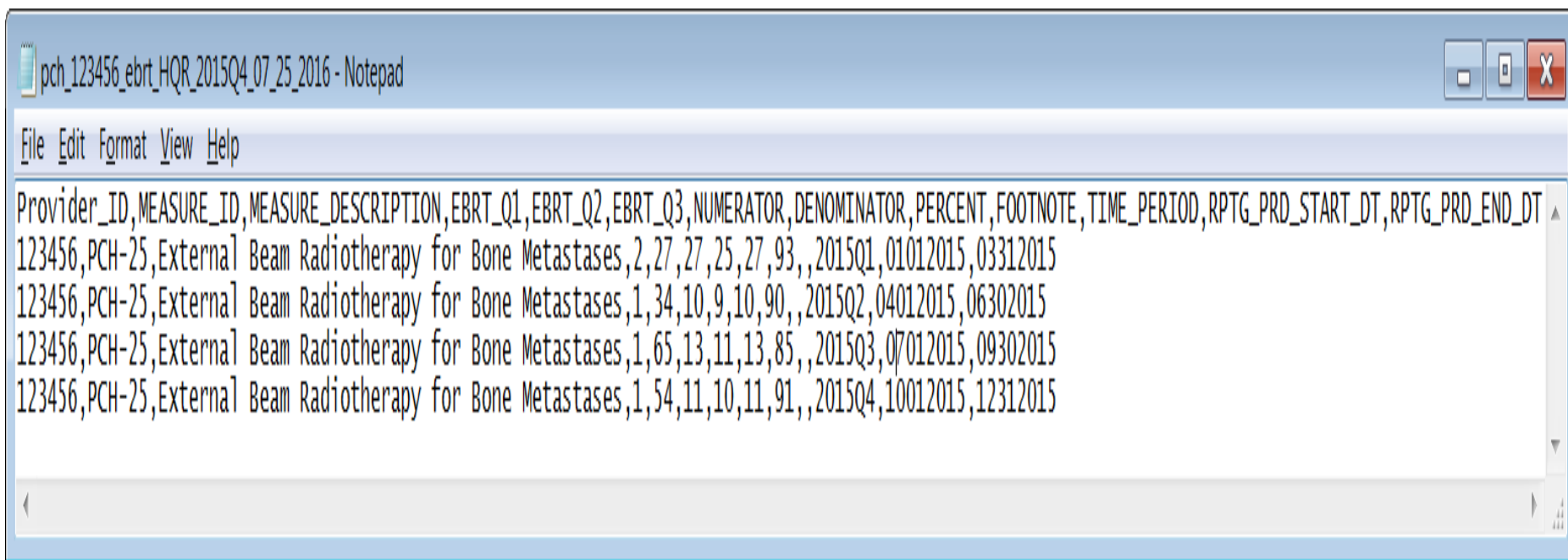Viewed from Notepad® with leading zero(s) entered
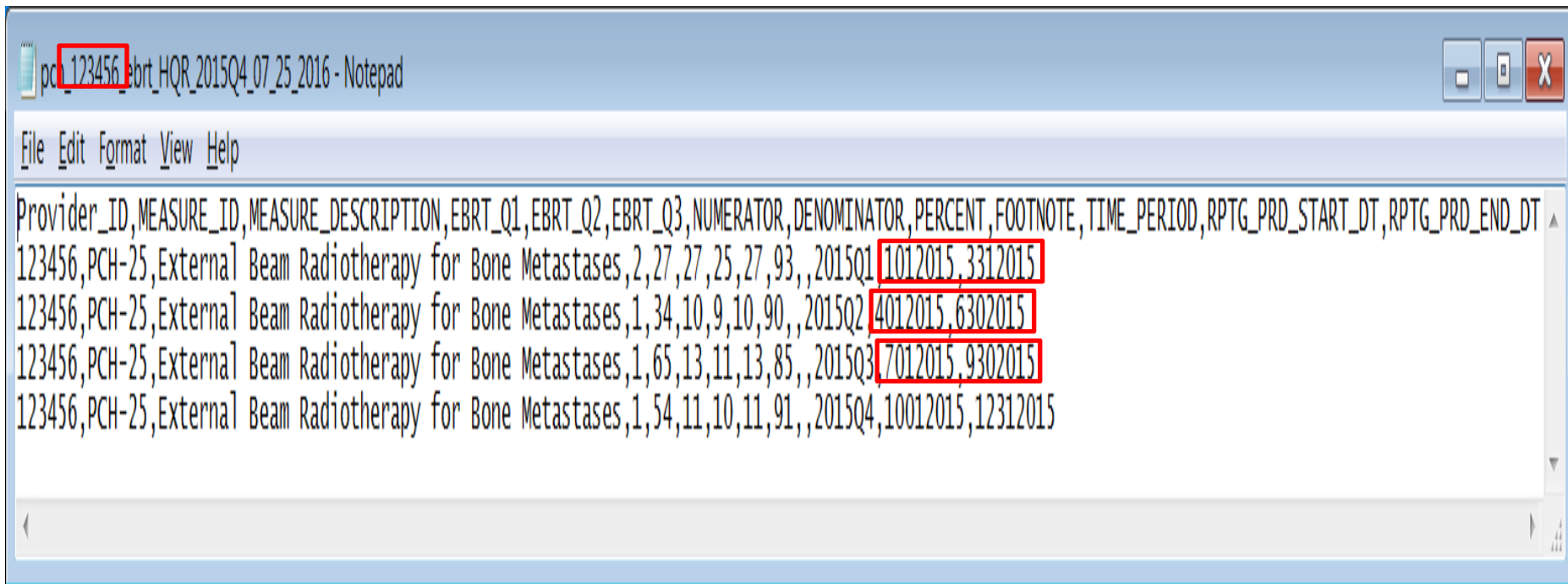

```
pch_123456_ebrt_HQR_2015Q4_07_25_2016 - Notepad

File  Edit  Format  View  Help

Provider_ID,MEASURE_ID,MEASURE_DESCRIPTION,EBRT_Q1,EBRT_Q2,EBRT_Q3,NUMERATOR,DENOMINATOR,PERCENT,FOOTNOTE,TIME_PERIOD,RPTG_PRD_START_DT,RPTG_PRD_END_DT
123456,PCH-25,External Beam Radiotherapy for Bone Metastases,2,27,27,25,27,93,,2015Q1,01012015,03312015
123456,PCH-25,External Beam Radiotherapy for Bone Metastases,1,34,10,9,10,90,,2015Q2,04012015,06302015
123456,PCH-25,External Beam Radiotherapy for Bone Metastases,1,65,13,11,13,85,,2015Q3,07012015,09302015
123456,PCH-25,External Beam Radiotherapy for Bone Metastases,1,54,11,10,11,91,,2015Q4,10012015,12312015
```

Unique Characteristics of EBRT File

- The name of file: pch_**CCN**_ebrt_HQR_**2015Q4**_07_15_2016.csv
  - The only file with a CCN in the file name – replace "CCN" with your actual CCN
  - As with all external files, reporting period in file name is LAST quarter in file: "2015Q4"

- Percentage is precise to nearest whole number (note use of "PERCENT" in template)

- Inclusion of population and sampling elements
  - Sampled or not sampled ("EBRT_Q1")
  - Initial quarterly patient population ("EBRT_Q2")
  - Quarterly sample size ("EBRT_Q3")

- The sample size value must equal the corresponding denominator value for that quarter for EBRT

Summary of Data Submission

Due August 15, 2016:

- CST measures
  - Q4 2015 PCH-1 and PCH-2 Chemo
  - Q2 2015 PCH-3 Hormonal

- SCIP measures: Q2 – Q3 2015
  - PCH 19 – PCH 24

- OCMs: Q2 – Q4 2015
  - PCH 14 - 18

- EBRT measure: Q1 – Q4 2015
  - PCH 25

- HAI measures: Q1 2016
  - Reporting PCH 4, PCH 5, PCH 6 & 7, PCH 26, PCH 27

Sending Files through the *QualityNet* Secure File Transfer

Once logged into *QualityNet,* select the **Secure File Transfer** link

For in-depth training on use of Secure File Transfer please refer to the July 2015 PCHQR Webinar.

Choosing File Recipients

- The recipients are:
    - **To:** Marcus Wadsworth, Andrea Carver, Jennifer Miller, Benton Tedder

    - **CC:** Kim Taylor, Steven Ehlers, Robert Mitchell, Anna Yap

- When selecting recipients:
    - To remove a recipient from the *Selected Recipients* list, select that recipient and click **[REMOVE]**

    - Once the desired people are in the *Selected Recipients* list, click **[OK]** to insert the recipient's(s') email(s) into the address fields

    - To clear your *Groups* and *Choose Recipients* search results, clicking the **[Clear Results]** button which will allow you to do an additional search while retaining your *Selected Recipients*.

Attaching CSV Files

Once the recipients are chosen, select the **[Attach File]** button.

NOTE: You are encouraged to send all of your files (five attachments) via one message. This is new!

Training and Timeframes

- Today's educational event
- Distribution of templates and instructions by July 1, 2016
- Online video tutorials in development – estimated availability June 30, 2016
- Technical support as needed by Support Contractor
- Goal: Data submission by August 1, 2016
- Deadline: August 15, 2016 at 11:59 p.m. PT

CDI and MRSA NHSN Pointers

- NHSN steps for CDI and MRSA reporting are more complex than those for CLABSI, CAUTI, and SSI reporting

- Today's webinar will review NHSN CDI and MRSA highlights

- November 18, 2015 webinar, entitled ***PCHQR: Using NHSN for MRSA and C. difficile LabID Event Reporting*** – Denise Leaptrot, CDC – available on the *Quality Reporting Center* website at http://www.qualityreportingcenter.com/inpatient/pch/events/ provides in-depth guidance

CDI and MRSA NHSN Pointers

- First time for PCHQR Requirement for PCHs to report CDI and MRSA LabID infections/events that occur in their emergency departments, 24-hour observation units, and all inpatient care locations to the CDC's NHSN

- Reporting requirement is for events occurring on or after January 1, 2016

- ***Multidrug-Resistant Organism* & Clostridium difficile *Infection (MDRO/CDI) Module***
  http://www.cdc.gov/nhsn/PDFs/pscManual/12pscMDRO_CDADcurrent.pdf

CDI and MRSA NHSN: Terms to Know

- **Community-Onset (CO)**: LabID Event specimen collected in an outpatient location or an inpatient location ≤3 days after admission to the facility (i.e., days 1, 2, or 3 of admission) – CDI or MRSA

- **Healthcare Facility-Onset (HO)**: LabID Event specimen collected >3 days after admission to the facility (i.e., on or after day 4) – CDI or MRSA

- **Community-Onset Healthcare Facility-Associated (CO-HCFA)**: CO LabID Event collected from a patient who was discharged from the facility ≤4 weeks prior to current date of stool specimen collection – CDI only
  - Data from outpatient locations (e.g., outpatient encounters) are not included in this definition

CDI and MRSA NHSN: SIRs

CDI and MRSA Standardized Infection Ratio (SIR):

- Calculated by dividing the number of observed events by the number of predicted/expected events
  - CDI – for the last month of each quarter, users are asked to report the primary type of test that was used to identify CDI in the hospital for that quarter

MDRO and CDI LabID Event Calculator

- Web-based tool designed to help users learn how to accurately apply the MDRO and CDI LabID Event algorithms and assist users in making the correct MDRO & CDI LabID Event determinations

- Located at http://www.cdc.gov/nhsn/labid-calculator/index.html

- For assistance contact the NHSN Helpdesk at NHSN@cdc.gov

Important Upcoming Dates and Milestones

Upcoming 2016 Webinars
- **July 28:** *Using NHSN for Reporting Influenza Vaccination Coverage Among Healthcare Personnel*
- **August 25:** *FY 2017 PCHQR Final Rule*
- **September 22:** *PCH Analysis of LabID Event Reporting*

Upcoming Data Submissions
- **July 6:** Q1 2016 HCAHPS
- **August 15:** HAI, CST, SCIP, OCM, EBRT
- **August 31:** 2017 DACA

Getting Ready for August, 15, 2016 Data Submission

CONTINUING EDUCATION CREDIT

Continuing Education Approval

This program has been approved for 1.0 continuing education (CE) unit for the following professional boards:

- Florida Board of Clinical Social Work, Marriage and Family Therapy and Mental Health Counseling
- Florida Board of Nursing Home Administrators
- Florida Council of Dietetics
- Florida Board of Pharmacy
- Board of Registered Nursing (Provider #16578)
  - It is your responsibility to submit this form to your accrediting body for credit.

CE Credit Process

- Complete the ReadyTalk® survey that will pop up after the webinar, or wait for the survey that will be sent to all registrants within the next 48 hours.

- After completion of the survey, click "Done" at the bottom of the screen.

- Another page will open that asks you to register in HSAG's Learning Management Center.

  - This is a separate registration from ReadyTalk®.
  - Please use your PERSONAL email so you can receive your certificate.
  - Healthcare facilities have firewalls up that block our certificates.

CE Certificate Problems?

- If you do not <u>immediately</u> receive a response to the email that you signed up with in the Learning Management Center, you have a firewall up that is blocking the link that is sent out.

- Please go back to the **New User** link and register your personal email account.

  - Personal emails do not have firewalls.

CE Credit Process: Survey

○ No
Please provide any additional comments
[text box]

10. What is your overall level of satisfaction with this presentation?
○ Very satisfied
○ Somewhat satisfied
○ Neutral
○ Somewhat dissatisfied
○ Very dissatisfied
If you answered "very dissatisfied", please explain
[text box]

11. What topics would be of interest to you for future presentations?
[text box]

12. If you have questions or concerns, please feel free to leave your name and phone number or email address and we will contact you.
[text box]

[Done]

Powered by **SurveyMonkey**
Check out our sample surveys and create your own now!

CE Credit Process

Thank you for completing our survey!

Please click on one of the links below to obtain your certificate for your state licensure.

You must be registered with the learning management site.

New User Link:
https://lmc.hshapps.com/register/default.aspx?ID=da0a12bc-db39-408f-b429-d6f6b9ccb1ae

Existing User Link:
https://lmc.hshapps.com/test/adduser.aspx?ID=da0a12bc-db39-408f-b429-d6f6b9ccb1ae

Note: If you click the 'Done' button below, you will not have the opportunity to receive your certificate without participating in a longer survey.

Done

CE Credit Process: New User

CE Credit Process: Existing User

Getting Ready for August 15, 2016 Data Submission

CLOSING REMARKS