

C.4.1.D.1 AIM3: NHSN Data Quality QIA

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INTRODUCTION

Previous data quality evaluation activities performed by CDC, ESRD Networks, and others have identified a substantial gap in BSI reporting among dialysis facilities. Sepsis is a significant concern throughout both acute and chronic settings. Increased surveillance of BSI data for ESRD patients transitioning to and from the hospital setting will provide motivation and evidence for individual clinics to improve infection control, communication with hospitals, maintain medical records accurately, and increase timely interventions to signs/symptoms of infection.

TASKS

The Network will review rates and data submitted monthly for accuracy and provide technical assistance as needed. All project facilities will establish eMR access with at least one local hospital as a central expectation of the project to improve Continuity of Care for their patients and communication between the acute and chronic settings. Reportable infection data will be reported and monitored monthly in NHSN. At each facility, patients will also assist in the development of interventions.

EXPECTATIONS

1. **Establish eMR access with at least one local hospital**
2. **Webinars**
 - a. Held third Thursday monthly; attendance is mandatory
3. **Clinic-specific Root Cause Analysis and Focused Intervention**

RESOURCES

- [CDC Page on Dialysis Event Surveillance](#)
- [NHSN Login](#)

EVALUATION

Complete and accurate reporting of infections will be monitored monthly within NHSN, with specific focus on positive blood cultures and the location at which they are drawn (hospital, clinic, or other).