National Center for Emerging and Zoonotic Infectious Diseases



### **CDC / State of Minnesota Data Use Agreement**

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**Division of Healthcare Quality Promotion** 

**Centers for Disease Control and Prevention** 

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#### Housekeeping

- Today's call is intended for Minnesota NHSN members only
- DUA execution date **September 26, 2017**
- Data access will begin February 15, 2018

#### **Data Use Agreement**

 Agreement between CDC's National Healthcare Safety Network (NHSN) and the Minnesota Department of Health Data Use Agreement Between Minnesota Department of Health And Centers for Disease Control and Prevention ("CDC"), National Healthcare Safety Network ("NHSN")

The Minnesota Department of Health ("MDH") and CDC/NHSN enter into this Data Use Agreement (the "Agreement") effective September 11, 2017 ("Effective Date"). CDC/NHSN and the MDH shall be referred to individually as a "Party," or collectively us the "Parties."

This Agreement establishes a formal data access and data use relationship between CDC/NHSN and the MDH. This Agreement covers individual- and institution-identifiable data, received by the CDC/NHSN subject to the Federal Privacy Act, 5 USC §§552 and 552a, from the NHSN Patient Safety Component, Healthcare Personnel Safety Component, and Dialysis Component as listed in the attached document that have been volumatrily submitted to THSN by healthcare institutions in Minnesota and for which there is no State or applicable local mandate for reporting of such individual- or institution-identifiable data ("COVERED DATA"). However, COVERED DATA shall NOT include data pertaining to federal or tribal healthcare institutions.

The Parties shall abide by all applicable Federal and State laws, rules, and regulations including, without limitation, all patient confidentiality and medical record requirements and any applicable Institutional Review Board ("IRB") requirements.

#### STATE'S USES OF COVERED DATA

MDH agrees to use the COVERED DATA for surveillance and/or prevention purposes only (e.g., evaluating the impact of a targeted program to reduce central line-associated bloodstream infections). MDH specifically agrees not to use the COVERED DATA obtained under this data use agreement for purpose of pablic reporting of institution-specific data or any regulatory or punitive actions against healthcare institutions, such as n fine or licensure action. The Parties acknowledge that COVERED DATA is limited to those data specified in the attached document, which identifies the complete set of data items, e.g., facility survey data, central line associated bloodstream infection numerator data, that MDH will have access to as a result of this Agreement.

MDH agrees to designate an NTSN Group Administrator and CDC/NHSN agrees to grant the State's designated NHSN Group Administrator access to the State's COVERED DATA. In the event that the NHSN Group Administrator leaves that role prior to assigning a replacement via the NHSN application, CDC/NHSN requires notification in writing an official letterhead from the signatory or the signatory's successer to assure continuity.

 The designated NHSN Group Administrator for MDH is <u>Brittany VonBank, Epidemiologist,</u> <u>Brittany, VonBank@state.mn.us, Saint Paul, Minnesota.</u>

MDH agrees that access to individual- and institution-identifiable data provided under the terms of the Agreement will be limited solely to Department staff or contractors who are explicitly authorized to use those data for surveiliance and/or prevention purposes only.

Final Version -- 05/15/2017

#### Background

- Since October 2011, CDC's Division of Healthcare Quality Promotion (DHQP) has provided state health departments with additional access to data reported by healthcare facilities in their jurisdiction to CDC's National Healthcare Safety Network (NHSN).
- Since 2006, CDC has provided health departments in states with mandatory HAI reporting requirements with access to mandatorily reported data in their jurisdiction.
- Now CDC is making provisions for health departments regardless of whether their state has a mandatory reporting requirement — to improve access to data reported from facilities in their state to NHSN that are outside the scope of a state mandate.
- The additional provisions are designed to allow data access <u>solely for the</u> <u>purposes of surveillance and prevention</u>.

#### What is the DUA?

- The Data Use Agreement is the starting point in discussions between state health departments and CDC's DHQP.
- How it works: after a state department of health has worked with CDC's DHQP to complete a DUA and before the health department begins accessing new NHSN data, DHQP will provide healthcare facilities in the state's jurisdiction the opportunity to opt—out of voluntary reporting to NHSN. Some healthcare facilities voluntarily report data to NHSN, even in states with HAI reporting mandates. Those facilities will be able to stop their voluntary NHSN reporting before the new data access provisions go into effect. CDC's DHQP and state health departments want voluntary NHSN reporting to continue wherever possible, while simultaneously enabling health department access to those data for surveillance and prevention programs.
- The overarching goal of these access provisions is to enhance the value of data reported to NHSN for public health purposes.

- How are the data going to be used by the state health department? The data will be used for healthcare-associated infection (HAI) surveillance and prevention purposes and not legal and regulatory action.
- Who in the state health department will have access to the data? Access to the data is intended for the state HAI program for prevention activities. To identify the HAI coordinator in your state health department click on your state at CDC's state-based HAI prevention website: <u>http://www.cdc.gov/HAI/statebased/index.html</u>.
- Will facility-identifiable data be made publicly available?
   No. Making facility-identifiable data publicly available would be a violation of the data use agreement and CDC will terminate the data use agreement immediately.

What data will be included in the data use agreement?

Each data use agreement is modeled using a template developed by CDC and customized by CDC and the state health department to reflect local data needs, protections, and policies. If your state has a data use agreement, CDC will make the agreement publicly available on <u>CDC's website</u>. It is important to note that past data (i.e., data that was entered into NHSN prior to the opt-out period) will not be shared; only future data will be shared with the health department. NHSN data required by state law to be shared with the health department will continue to be shared as usual (by facilities joining a state Group in NHSN and accepting a template for data sharing).

Do health care facilities need to take any action as a result of this DUA?
 No, facilities do not need to do anything. CDC will confer data rights on behalf of the health care facilities whose data will be accessible via the DUA.

- What guarantee does a facility have that a data use agreement will not be breached? State health departments are taking an increasingly critical role in the prevention of HAIs. By sharing data, prevention needs can be identified, and tailored strategies can be planned and evaluated. State health departments would be motivated to abide by the data use agreement to gain access to HAI data in CDC's NHSN. A breach in this contract will end the contract, ending the data flow to the state health department.
- Will facilities have to do anything additional within NHSN to participate in this program?

No additional steps will be necessary to share your data such as joining a state health department Group in NHSN. CDC will administer a special Group for your state health department and your facility will automatically be joined to the Group. Your NHSN Facility Administrator can view the data sharing template for this Group at any time from within the NHSN application.

If the same data is on Centers for Medicare and Medicaid Services' (CMS') Compare websites, why does my state want it through a data use agreement with CDC?

The data use agreement allows CDC to share data with the state health department sooner and with more detail than if the state uses CMS' Compare websites.

How does a state health department entering into a data use agreement benefit my facility?

Many state health departments have an effective and collaborative relationship with facilities in their state, including the prioritizing of prevention programs and opportunities for undertaking complementary HAI prevention projects. The data use agreement may foster additional collaborations between facilities and health departments in this manner.

Can a facility opt-out of voluntary reporting to NHSN to avoid access of data by the state health department?

After a state health department has worked with CDC to complete a data use agreement and before the health department begins accessing new NHSN data, CDC will provide healthcare facilities in the state's jurisdiction the opportunity to opt out of voluntary reporting to NHSN. Some healthcare facilities voluntarily report to NHSN, even in states with HAI reporting mandates. Those facilities will be able to stop their voluntary NHSN reporting, before new data access provisions go into effect. CDC and state health departments want voluntary NHSN reporting to continue wherever possible, while simultaneously enabling health department access to those data for surveillance and prevention programs.

Are states required to have a data use agreement?
 No. Participation is at the discretion of each state.

If our facility chooses to opt out of the data use agreement, can we still use NHSN for tracking and prevention of HAIs within our facility?

It is possible to opt out of the data use agreement while still using NHSN for tracking and prevention of HAIs within a facility. There are two possible ways for a healthcare facility to opt out of the data use agreement. A facility could stop entering data into NHSN <u>or</u> remove select events from their monthly reporting plans. It is important to note that only data collected through surveillance that is included in a facility's monthly reporting plans will be shared with CMS. Furthermore, most states that have HAI reporting mandates require HAI surveillance to be in the monthly reporting plans.

 Who at the state health department can a facility contact for additional information? To identify the HAI coordinator in your state health department click on your state at CDC's state-based HAI prevention website: <u>http://www.cdc.gov/HAI/state-</u> <u>based/index.html</u>

# Minnesota Department of Health DUA Data Template



Data Use Agreement between CDC National Healthcare Safety Network and Minnesota Department of Health ("MDH")						
Data File Spec	cifications Tem	plate - Patient Safety Component				

The template below can be used to describe which data from the NHSN Patient Safety Component will be shared with the state health department. Only data that is included in a facility's monthly reporting plan will be included in datasets shared with the state health department. "Time Period" of data shared with state health department will completed on template after signing of DUA. Please complete the template and provide to CDC/NHSN for further discussion.

Specify lev	evel of aggregation and patient identifiers to receive:						
	Only requestin	g facility level aggregate data (no patient level data)					
X	Pt level data w	ith all patient identifiers					
	Pt level data w	ith no patient identifiers					
	Pt level data w	ith specific patient identifiers (please select below)					
		DOB					
		Gender					
		Ethnicity					
		Race					
		Medicare #					
		Name					
		SSN					
		Patient ID					
		Birthweight (NICU only)					
General an	d surveys:						
Х	Monthly repor	ting plans					
Х	Facility annual	surveys					
Device-Ass	ociated Module e	vents and denominators:					
Select even	nt types of interest	below:					
	X	Central line-associated bloodstream infection (CLABSI)					
	X	Catheter-associated urinary tract infection (CAUTI)					
	Х	Ventilator-associated events (VAE)					
	X	Central line insertion practices (CLIP) - please note that requesting CLIP events will result in inserter code being shared					
	Х	Pneumonia (Vent)					



х	Pneumonia	(Post Procedure	)

For these events, please specify the facility types and locations that will be shared with state health department below. You will receive both event (numerator) and summary (denominator) data for the locations that you specify.

Plan	Time Period	Location Type (Ex - ICUs, Wards, etc)	Specific Facility Types and Locations (Ex - Acute Care, LTACH, CAH, Rehab, Psych, All Hospital types, ICUs, etc)
IN			eporting Acute Care hospitals (including Critical Access Hospitals)
IN	All units/wards reporting Long term acute care hospitals		· · · · · · · · · · · · · · · · · · ·
IN		All units/wards reporting	Rehabilitation hospitals (aka Inpatient Rehabilitation Facilities)
IN		All units/wards reporting	Ambulatory Surgery Centers
IN			
IN			
			Note: VA & Military Hosptials are excluded from DUAs
Procedur	e-Associated Mod	ule events and denominators:	
Select eve	ent types of interes	t below:	
	X	Surgical Site Infection (SSI) - please note th	hat requesting SSI events/denominators will result in surgeon code being shared
	X	Post-procedure Pneumonia (PPP)	
		cify the facility types and procedures that wi (numerator) and procedure (denominator) d	ill be shared with the state health departmentin the table below. Iata for the locations that you specify.
			· ·
You will r	eceive both event	(numerator) and procedure (denominator) d	lata for the locations that you specify.
You will r Plan		(numerator) and procedure (denominator) d NHSN Procedure Category	lata for the locations that you specify. Specific Facility Types and Settings (Inpatient, Outpatient, or Both)
You will r Plan IN	eceive both event	(numerator) and procedure (denominator) d NHSN Procedure Category All	lata for the locations that you specify. Specific Facility Types and Settings (Inpatient, Outpatient, or Both) Acute Care Hospitals (including Critical Access Hospitals), both Inpatient and Outpatient
You will r Plan IN IN	eceive both event	(numerator) and procedure (denominator) d NHSN Procedure Category	lata for the locations that you specify. Specific Facility Types and Settings (Inpatient, Outpatient, or Both)
You will r Plan IN IN IN	eceive both event	(numerator) and procedure (denominator) d NHSN Procedure Category All	lata for the locations that you specify. Specific Facility Types and Settings (Inpatient, Outpatient, or Both) Acute Care Hospitals (including Critical Access Hospitals), both Inpatient and Outpatient
You will r Plan IN IN IN IN	eceive both event	(numerator) and procedure (denominator) d NHSN Procedure Category All	lata for the locations that you specify. Specific Facility Types and Settings (Inpatient, Outpatient, or Both) Acute Care Hospitals (including Critical Access Hospitals), both Inpatient and Outpatient
You will r Plan IN IN IN IN IN	eceive both event	(numerator) and procedure (denominator) d NHSN Procedure Category All	lata for the locations that you specify. Specific Facility Types and Settings (Inpatient, Outpatient, or Both) Acute Care Hospitals (including Critical Access Hospitals), both Inpatient and Outpatient
You will r Plan IN IN IN IN	eceive both event	(numerator) and procedure (denominator) d NHSN Procedure Category All	lata for the locations that you specify. Specific Facility Types and Settings (Inpatient, Outpatient, or Both) Acute Care Hospitals (including Critical Access Hospitals), both Inpatient and Outpatient
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You will r Plan IN IN IN IN IN Antimicro	Time Period	(numerator) and procedure (denominator) d NHSN Procedure Category All All Stance Module:	lata for the locations that you specify. Specific Facility Types and Settings (Inpatient, Outpatient, or Both) Acute Care Hospitals (including Critical Access Hospitals), both Inpatient and Outpatient
You will r Plan IN IN IN IN IN Antimicro	obial Use and Resisent types of interes	(numerator) and procedure (denominator) d NHSN Procedure Category All All Stance Module: tt below:	lata for the locations that you specify. Specific Facility Types and Settings (Inpatient, Outpatient, or Both) Acute Care Hospitals (including Critical Access Hospitals), both Inpatient and Outpatient



lan	Time Period	Location Type (FACWIDEIN or By Location)		
N		All locations, by location		
IN				
IN				
IN				
MDRO Mo	dule events and d	lenominators:		
	nt types of interes			
	in types of interes	1		
	x	Infection Surveillance		
	х	LabID Event - all specimens		
		LabID Event - blood specimens only		
Select orga	anisms of interest	below:		
	х	MDR Acinetobacter		
	X	C. difficile		
	x	Ceph-R Klebsiella		
	X	CRE-Ecoli, CRE-Enterobacter, CRE-Klebsiella		
	x	MRSA		
	x	MSSA		
	X	VRE		
	0			
For these e	events inlease sne	cify the facility types and locations that will be sh	ared with state health denartment below	
		numerator) and summary (denominator) data for		
rou white	cerre bour event (	and summary (denominator) data for	r are receiver a struct you specify.	
Plan	Time Period	Location Type (Ex - ICUs, FACWIDE, etc)	Specific Locations (Ex - All ICUs, FACWIDEIN, etc)	
IN	Time Period	Acute Care Hospitals	LABID events, FACWIDEIN; Infection Surveillance: All locations/units reporting	
IN		Long Term Care Acute Care Hospitals	LABID events, FACWIDEIN; Infection Surveillance: All locations/units reporting	
IN				



MDRO Module Process	s and Outcome Measures	
Select process and outo	come measures of interest below:	
	Hand Hygeine	
	Gown and Gloves	
	AST Adm	
	AST D/T	
	AST Incidence	
	AST Prevalence	
Select organisms of inte	erest for AST Process and Outcome Measures below:	
	MRSA	
	VRE	
Please include any oth	er comments that do not fit into the template structure	in the field below.

Data File 9	<u> </u>					Component		Departmen		1		
Data File 3	pecification	is rempiat	e - nearciù	are reison	lier salety t	omponent						
The template below can be used to describe which data from the NHSN Healthcare Personnel Safety Component were the state health department. Only data that is included in a facility's monthly reporting plan will be included in date the state health department. "Time Period" of data shared with state health department will completed on template DUA. Please complete the template and provide to CDC/NHSN for further discussion.										atasets sha	tasets shared wi	
General and Surveys:												
X	HCW Data											
	X	With Ident	ifiers									
		Without Io	entifiers									
X	Monthly Reporting Plans											
X Annual Survey												
X	Seasonal F	lu Survey										
Healthcare Worker Influenza Vaccination Module:												
	X				cination dat	ta						
	X					e standing)						
	X		-			e standing)						
l	X	HCW sum									+	

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Data File	Specifications T	emplate - Dialysis Component	
			ponent will be shared with the state health department. Only data that is the state health department. "Time Period" of data shared with state health
departme	ent will complete	ed on template after signing of DUA. Please complete the te	nplate and provide to CDC/NHSN for further discussion.
Sun aife la		ion and patient identifiers to receive:	
X X		lata with all patient identifiers	
^		lata with no patient identifiers	
		lata with specific patient identifiers (please select below)	
	T delette lever e	Gender	
		DOB	
		Ethnicity	
		Race	
		Medicare #	
		Name	
		SSN	
		Patient ID	
General a	and surveys:		
Х	Monthly repo		
Х	Facility annua	l surveys	
	nd denominator		
Select ev	ent types of inte		
	X	Dialysis event (DE)	
Coutho	avente places :	specify the locations that will be shared with state health de	anter ant halarr
		specify the locations that will be shared with state health de nt (numerator) and summary (denominator) data for the loc	

	Plan	Time Period	Location Type	Specific Facility Types and Locations (Outpatient Clinic- ONLY)
I	IN		CLINIC	Outpatient Hemodialysis Clinic



National Center for Emerging and Zoonotic Infectious Diseases



NHSNDUA@cdc.gov