## **ADOPTIONS SECTION**

HEALTH

OFFICE OF THE COMMISSIONER

**HEALTH CARE QUALITY AND INFORMATICS DIVISION** 

**HEALTH CARE QUALITY AND ASSESSMENT PROGRAM** 

**Notice of Readoption** 

**Health Care Facility Infection Reporting** 

Readoption with Technical Changes: N.J.A.C. 8:56

Authority: N.J.S.A. 26:2H-1 et seq., particularly 26:2H-5; 26:2H-5.1.c through 5.1.f, particularly 5.1.f; and 26:2H-12.39 through 12.45, particularly 26:2H-12.45.

Authorized By: Judith M. Persichilli, R.N., B.S., Commissioner, Department of Health, in consultation with the Quality Improvement Advisory Committee, and with the approval of the Health Care Administration Board.

Effective Dates: April 12, 2023, Readoption;

May 15, 2023, Technical Changes.

New Expiration Date: April 12, 2030.

**Take notice** that, pursuant to N.J.S.A. 52:14B-5.1, the rules at N.J.A.C. 8:56, Health Care Facility Inspection Reporting, were scheduled to expire on May 13, 2023. The chapter implements the rulemaking obligations of the Commissioner of Health (Commissioner) pursuant to N.J.S.A. 26:2H-5.1.c through 5.1.f, and the Health Care Facility-Associated Infection Reporting and Prevention Act, N.J.S.A. 26:2H-12.39 through 12.45 (Act).

The Act requires general hospitals that the Department of Health (Department) licenses in accordance with the Health Care Facilities Planning Act, N.J.S.A. 26:2H-1 et seq., to report information related to Healthcare-Associated Infections (HAI) to the Department. The Act identifies the following two categories of HAI-related information for reporting: (1) the process quality indicators as identified by the Centers for Medicare and Medicaid Services (CMS); and (2) the information relating to the major site categories that define HAI as identified by the Centers for Disease Control and Prevention (CDC). N.J.S.A. 26:2H-12.41. N.J.S.A. 26:2H-12.43 requires the Commissioner to make this information available to the public on the Department's website and in the New Jersey Hospital Performance Report, in a manner that facilitates comparison among hospitals. N.J.S.A. 26:2H-12.45 requires the Commissioner, in consultation with the Quality Improvement Advisory Committee, to promulgate rules implementing the Act.

The Department originally adopted N.J.A.C. 8:56, Health Care Facility Infection Reporting, as new rules in 2008. 40 N.J.R. 1958(a); 6612(a). The chapter was scheduled to expire on November 17, 2013. N.J.S.A. 52:14B-5.1.b operated to extend the chapter expiration by two years to November 17, 2015. 43 N.J.R. 1203(a). P.L. 2009, c. 263 (approved January 17, 2010), and codified in part at N.J.S.A. 26:2H-5.1.c through 5.1.f, extends the HAI reporting requirement to ambulatory surgery facilities, and directs the Department to promulgate rulemaking implementing this requirement. Pursuant to this authority, the Department proposed and adopted amendments, repeals, and new rules at N.J.A.C. 8:56 to require HAI reporting from ambulatory surgery facilities. See 43 N.J.R. 2213(a); 44 N.J.R. 163(a). The Department readopted

N.J.A.C. 8:56 with substantive and non-substantive amendments in 2016, thereby extending the chapter expiration date to May 13, 2023. 47 N.J.R. 3075(a); 48 N.J.R. 42(a); 1299(a).

The Department has reviewed N.J.A.C. 8:56 and determined that, pursuant to Executive Order No. 66 (1978) and N.J.S.A. 52:14B-5.1.b, subject to the technical changes described below, the chapter remains necessary, adequate, reasonable, efficient, understandable, and responsive to the purposes, described above, for which the Department promulgated it, and should be readopted. Therefore, pursuant to N.J.S.A. 52:14B-5.1.c(2), the rules at N.J.A.C. 8:56 are readopted and shall continue in effect for seven years.

The Department is making technical changes throughout the chapter to correct punctuation and grammar, update references to publications incorporated by reference, and add and/or correct website addresses.

Subchapter 1 contains general provisions, establishes the purpose of the chapter, provides definitions of terms that the chapter uses, and establishes enforcement standards. The Department is deleting from existing N.J.A.C. 8:56-1.2, Definitions, the definition of the term, "NHSN Facility Administrator Enrollment Guide," which is a publication that applies specifically to hospitals and is inapplicable to ambulatory care facilities. The enrollment process now depends on the facility type, and the starting point for enrolling a facility is a website page, at which an administrator commences enrollment by selecting the facility type, following which additional facility type-specific enrollment instructions and procedures ensue.

Subchapter 2 establishes the reporting system for, and the standards for

collection and reporting of, health care facility infection data. The Department is deleting, from existing N.J.A.C. 8:56-2.3(c)1 and (d)1 and 2.4(b)2, the references to the NHSN Facility Administrator Enrollment Guide, and adding in place thereof, the link to the facility-specific NHSN enrollment instructions page, for the reasons described above with respect to the change at existing N.J.A.C. 8:56-1.2. The Department is deleting existing N.J.A.C. 8:56-2.3(e) as the Department is deleting the publications to which it refers. At existing N.J.A.C. 8:56-2.6, HAI data required to be reported and access to HAI data, the Department is deleting the reference at subsection (b) to the "Specifications Manual for National Hospital Quality Measures," which is a publication that applies specifically to hospitals and is inapplicable to ambulatory care facilities. Like the enrollment guides, described above, the specifications manuals for reporting quality measures are now facility type-specific, and are available on the CMS "QualityNet" quality program reporting website, to which the existing rule refers at N.J.A.C. 8:56-(b)1.

Subchapter 3 establishes standards and procedures for using the health care infection data.

**Full text** of the technical changes follows (additions indicated in boldface **thus**; deletions indicated in brackets [thus]):

SUBCHAPTER 1. GENERAL PROVISIONS

8:56-1.1 Purpose and scope

- (a) (No change.)
- (b) This chapter applies to the Department [and all], health care facilities [as defined in

N.J.A.C. 8:56-1.2], administrators, and authorized users.

(c) (No change.)

## 8:56-1.2 Definitions

The following words and terms, when used in this chapter, shall have the following meanings, unless the context clearly indicates otherwise:

. . .

"HAI data" means both CDC HAI data and CMS HAI data, as described below:

- 1. "CDC HAI data" means information and data elements relating to the major site categories, as specified in the Department's notification to health care facilities, which each health care facility shall report as set forth at N.J.A.C. 8:56-2.6(a); and
- 2. "CMS HAI data" means information relating to the process quality measures associated with prevention of HAI, which each health care facility shall report as set forth at N.J.A.C. 8:56-2.6(b).

"Health care facility" or "facility" means any facility that the Department licenses as:

- 1. A general hospital pursuant to N.J.S.A. 26:2H-1 et seq., and in accordance with the definition of hospital and classification of general hospital set forth in the Department's Hospital Licensing Standards at N.J.A.C. 8:43G-1.2 and 1.3(b); and
- 2. An ambulatory surgery facility licensed pursuant to the standards at N.J.A.C. 8:43A.

"Healthcare-associated infection" or "HAI" means a localized or systemic

condition resulting from an adverse reaction to the associated presence of an infectious agent(s) or its toxin(s) that meets classification criteria defined by the CDC in the NHSN Manual.

["HAI data" means both CDC HAI data and CMS HAI data as described below:

- 1. "CDC HAI data" means information and data elements relating to the major site categories, as specified in the Department's notification to health care facilities, that each health care facility shall report as set forth at N.J.A.C. 8:56-2.6(a); and
- 2. "CMS HAI data" means information relating to the process quality measures associated with prevention of HAI that each health care facility shall report as set forth at N.J.A.C. 8:56-2.6(b).]

. . .

["NHSN Facility Administrator Enrollment Guide" means the National Healthcare Safety Network Facility Administrator Enrollment Guide, March 2014, incorporated herein by reference, as amended and supplemented, written and published by the NHSN and available electronically at

http://www.cdc.gov/NHSN/PDFs/facilityadminenrollmentguidecurrent.pdf.]

"NHSN manual" means the [National Healthcare Safety Network (]publication, CDC, NHSN[) Manual:] Patient Safety Component Manual[, April 2015,] (January 2023), incorporated herein by reference, as amended and supplemented, [written and published by the CDC.

1. The NHSN Manual] which is available electronically [on the internet] at [http://www.cdc.gov/nhsn/settings.html] https://www.cdc.gov/nhsn/psc/index.html and at https://www.cdc.gov/nhsn/pdfs/pscmanual/pcsmanual\_current.pdf.

. . .

## SUBCHAPTER 2. REPORTING

- 8:56-2.1 Designation of reporting system for CDC HAI data
- (a) The Department designates **the** NHSN as the internet-based surveillance system to which each health care facility shall report CDC HAI data as set forth [in] **at** N.J.A.C. 8:56-2.6(a).
  - 1. Information about **the** NHSN is available through the following methods:
    - i. (No change.)
    - ii. By telephone to the NHSN number at (800) [893-0485] **232-4636**, option

2; or

- iii. (No change.)
- 8:56-2.2 Confidentiality regarding CDC HAI data
- (a) A general hospital shall authorize the Department to access CDC HAI data from **the** NHSN that contains patient identifying information.
- (b) An ambulatory surgery facility shall authorize the Department to access CDC HAI data from **the** NHSN that contains patient identifying information.
- (c) The HAI data that the Department retrieves from **the** NHSN on each health care facility shall not be considered "government records" subject to public access or inspection pursuant to N.J.S.A. 47:1A-1 et seq.
- 8:56-2.3 Enrollment and training requirements for the NHSN

- (a) Each health care facility shall comply with all NHSN requirements that are necessary to maintain enrollment in **the** NHSN.
- (b) Each health care facility shall enroll in **the** NHSN as a separately licensed New Jersey facility.
- (c) Each administrator shall:
- 1. Complete the NHSN facility enrollment process [established] in accordance with the [NHSN Facility Administrator Enrollment Guide] enrollment instructions applicable to the facility type at <a href="https://www.cdc.gov/nhsn/enrollment/index.html">https://www.cdc.gov/nhsn/enrollment/index.html</a>;
- 2. Adhere to the NHSN administrator training [set forth] requirements at [the CDC's website entitled National Healthcare Safety Network (NHSN), NHSN Training Requirements (Facility Administrator)] <a href="https://www.cdc.gov/nhsn/training/index.html">https://www.cdc.gov/nhsn/training/index.html</a>, incorporated herein by reference, as amended and supplemented;
  - 3. Designate authorized users for [his or her] the health care facility; and
- 4. Join the NHSN user group that allows the Department to access HAI data that [his or her] **the** health care facility submits to **the** NHSN [in order] to comply with the Act and this chapter, and in accordance with:

i.-ii. (No change.)

- (d) Each authorized user shall:
- Complete the NHSN user enrollment process established [in the NHSN Facility Administrator Enrollment Guide] at

https://www.cdc.gov/nhsn/enrollment/index.html; and

2. Adhere to the NHSN **user** training [set forth] **requirements** at [the CDC's website entitled National Healthcare Safety Network (NHSN), NHSN Training

Requirements (User, other than Facility or Group Administrator)]

<u>https://www.cdc.gov/nhsn/training/index.html</u>, incorporated herein by reference, as amended and supplemented.

[(e) The documents, incorporated by reference, as amended and supplemented in (c)1 and 2 and (d)1 above are available electronically at the following website for the NHSN Document Library, <a href="http://www.cdc.gov/nhsn/">http://www.cdc.gov/nhsn/</a>.]

8:56-2.4 Process for data collection and reporting of CDC HAI data

- (a) (No change.)
- (b) Each administrator and/or authorized user shall:
- 1. Adhere to the NHSN data collection and reporting requirements [established in] that are applicable to each facility type, which are on the [document entitled] NHSN [Facility Administrator Enrollment Guide.] website at <a href="https://www.cdc.gov/nhsn/index.html">https://www.cdc.gov/nhsn/index.html</a>; and
- 2. Submit NHSN mandatory data elements, as required for each major site category pursuant to N.J.A.C. 8:56-2.6(a), in accordance with the reporting protocol [established] in the NHSN Manual.
- (c) Each health care facility shall establish a notification system for reporting surgical site infections, as applicable, to [any] **the health care** facility [licensed pursuant to N.J.S.A. 26:2H-1 et seq. that] **at which the surgery** originally **was** performed [the surgery].
- (d) A health care facility shall report the required data for a calendar quarter in accordance with **the** CMS data reporting requirements **that are applicable to the**

facility type, which [may be found on the internet] are available at www.cdc.gov/NHSN/CMS/index.html.

8:56-2.6 HAI data required to be reported and access to HAI data

- (a) (No change.)
- (b) Each health care facility shall report CMS HAI data, as stated in the Department's notification, described [in] at (c) below, that the Commissioner, in consultation with the QIAC, selects from the list of process quality measures [established] in the [Specifications Manual for National Hospital Quality Measures (Version 5)] applicable specifications manual for reporting national quality measures that the CMS establishes for each facility type, incorporated herein by reference, as amended and supplemented[.
- The CMS Specifications Manual is], which are available electronically at [the following website,] www.qualitynet.org.
   (c)-(e) (No change.)
- 8:56-2.7 Data accuracy and retention
- (a) Each health care facility shall retain, for a period of three years, all NHSN worksheets, test results, and records that each administrator and/or authorized user [utilizes in order] uses to submit CDC HAI data to NHSN.
- 1. [Medical records that each] **Each** administrator and/or authorized user [utilizes in order] **shall retain and preserve the medical records that they use** to submit CDC HAI data to **the** NHSN [shall be retained and preserved], in accordance with N.J.S.A.

26:8-5.

(b) The Department may conduct audits of each health care facility's HAI data including on-site audits, [where] if applicable.

## SUBCHAPTER 3. UTILIZATION OF REPORTED DATA

- 8:56-3.1 Department use of reported data
- (a) The Department shall [utilize] **use** procedures to allow appropriate comparison of the quality of care related to HAI across health care facilities that include, but are not limited to:
  - 1.-2. (No change.)
- Consideration of other patient, procedure, or health care facility characteristics [identified by] that the CDC identifies.
- (b) The Department shall make available to the public the results of the Department's analysis set forth [in] **at** (a) above through:
- 1. Inclusion of the results for general hospitals in the New Jersey Hospital

  Performance Report, written and published annually by the Department, and available through the following methods:
- i. A "pdf" version of the New Jersey Hospital Performance Report is available electronically through the Department's Hospital Performance Report website at [http://web.doh.state.nj.us/hpr] https://www.nj.gov/health/healthcarequality/healthcare-professionals/hospital-performance-report;
  - ii. (No change.)
  - iii. [Via] **Through** the interactive online version of the New Jersey Hospital

Performance Report available at [http://web.doh.state.nj.us/hpr]

https://web.doh.state.nj.us/apps2/hpr; and

2. (No change.)