**SSI Data Collection Practices Survey – Texas Department of State Health Services**

**Hospital Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

## Site Visit Date: / / Time Started:\_\_\_\_\_\_\_\_\_ Time Ended: \_\_\_\_\_\_\_\_\_\_

Auditor: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Procedures Reported:

[ ] AAA [ ] CEA [ ] HTP [ ]  PVBY

[ ] CARD [ ] COLO [ ] HYST [ ] RFUSN

[ ] CBGB [ ] FUSN [ ] KPRO [ ] VHYS

[ ] CBGC [ ] HPRO [ ] LAM [ ] VSHN

1. How are procedures tracked?
2. Who is responsible for collecting procedure data?
3. How are infections identified?
4. How is 30 day/60 day follow-up done?
5. Do you perform post-discharge surveillance? If so, how is it performed and what percent of surgeons respond?
6. How is procedure data entered in to NHSN?

[ ]  Electronically via bulk data upload

[ ]  Manually by Infection Prevention Staff

[ ]  Manually by OR staff

[ ]  Other (specify)

Comments:

1. What data quality control activities are performed on the SSI event and/or denominator data?
2. In cases of ambiguity, who makes the final decision regarding the determination of whether an infection is an SSI?
3. Does anyone, other than the facility IP(s), have final say as to whether an infection should or should not be reported as an HAI in NHSN? If so, what is their training/background in regards to NHSN surveillance definitions?
4. Who is responsible for correcting NHSN data that are found to be incorrect?
5. Do you provide any ongoing or periodic training for staff involved in SSI data collection and reporting? Including NHSN training for the infection preventionist. If so, describe the training activities.
6. What steps have you taken to prevent and/or reduce the risk of patients developing SSI in your facility? What have been the biggest challenges/successes?
7. In preparing for this audit, what challenges (if any) did you face in obtaining the data for this audit?
8. Were there any other challenges in preparing for this audit?