

**CHAPTER 56****HEALTH CARE FACILITY  
INFECTION REPORTING****Authority**

N.J.S.A. 26:2H-1 et seq., particularly 26:2H-12.45.

**Source and Effective Date**

R.2008 d.345, effective November 17, 2008.  
See: 40 N.J.R. 1958(a), 40 N.J.R. 6612(a).

**Chapter Expiration Date**

In accordance with N.J.S.A. 52:14B-5.1.c(2), Chapter 56, Health Care Facility Infection Reporting, expires on May 15, 2016. See: 47 N.J.R. 3075(a).

**Chapter Historical Note**

Chapter 56, Health Care Facility Infection Reporting, was adopted as new rules by R.2008 d.345, effective November 17, 2008. See: Source and Effective Date.

In accordance with N.J.S.A. 52:14B-5.1b, Chapter 56, Health Care Facility Infection Reporting, was scheduled to expire on November 17, 2015. See: 43 N.J.R. 1203(a).

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**SUBCHAPTER 1. GENERAL PROVISIONS****8:56-1.1 Purpose and scope**

(a) The purpose of this chapter is to:

1. Implement N.J.S.A. 26:2H-12.39 through 12.45 (P.L. 2007, c. 196), the Health Care Facility-Associated Infection Reporting and Prevention Act and N.J.S.A. 26:2H-5.1e (P.L. 2009, c. 263);

2. Set forth standards for maintaining the confidentiality of CDC HAI data required for reporting;

3. Identify the HAI data required for reporting; and

4. Designate the system for uniform reporting of HAI data.

(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) This chapter covers:

1. Procedures concerning enrollment and training in NHSN;
2. The process for HAI data collection and reporting;
3. The Department's use of HAI data; and
4. Enforcement.

Amended by R.2012 d.021, effective January 17, 2012.

See: 43 N.J.R. 2213(a), 44 N.J.R. 163(a).

In (a)1, inserted "and N.J.S.A. 26:2H-5.1e (P.L. 2009, c. 263)"; and in (b), inserted "as defined in N.J.A.C. 8:56-1.2" and deleted a comma following "administrators".

**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:

"Act" means the Health Care Facility-Associated Infection Reporting and Prevention Act at N.J.S.A. 26:2H-12.39 through 12.45 (P.L. 2007, c. 196) when referencing a general hospital and N.J.S.A. 26:2H-5.1e (P.L. 2009, c. 263) when referencing an ambulatory surgery facility.

"Administrator" means the person at a health care facility assigned to have all rights to the health care facility's data for reporting to the NHSN; the ability to create authorized users and confer rights to them in the NHSN; the ability to nominate groups with which the health care facility wants to share some or all of its data reported in NHSN; and the responsibility for accepting official documents regarding the NHSN and this chapter.

"Authorized user" means any person the administrator designates through NHSN to submit information to, receive information from, or access or review information contained in NHSN, on behalf of his or her health care facility.

"CDC" means the Centers for Disease Control and Prevention within the United States Department of Health and Human Services.

"CMS" means the Centers for Medicare and Medicaid Services within the United States Department of Health and Human Services.

"Commissioner" means the Commissioner of the Department of Health and Senior Services, or his or her designee.

“Department” means the New Jersey Department of Health and Senior Services.

“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).

“Identifying information” means the following NHSN patient identity fields: name, social security number, identification number, gender and date of birth.

“Major site category” means the site associated with the development of a HAI, and includes, but is not limited to, the following categories: device-associated, procedure-associated and medications-associated, containing subcategories, such as, central-line associated bloodstream infections, surgical site infections, ventilator-associated pneumonia, and other categories identified by the CDC.

“NHSN” means the National Healthcare Safety Network, which is a secure, internet-based surveillance system that integrates patient and healthcare personnel safety surveillance systems managed by the Division of Healthcare Quality Promotion at the CDC, or its derivative or successor system.

“NHSN manual” means the National Healthcare Safety Network (NHSN) Manual: Patient Safety Component Protocol, June 2011, incorporated herein by reference, as amended and supplemented, written and published by the CDC.

1. The NHSN Manual is available electronically at the following website for the “NHSN Document Library,” [http://www.cdc.gov/nhsn/toc\\_pscmanual.html](http://www.cdc.gov/nhsn/toc_pscmanual.html).

“Process quality measure” means a specific quantitative indicator used to identify whether the care provided by a health care facility conforms to nationally accepted treatment goals and care processes for specific clinical presentations.

“QIAC” means the Quality Improvement Advisory Committee established by the Department pursuant to N.J.A.C. 8:43G-27.6 as an advisory group regarding the development of a health care facility performance measurement and assessment system.

“Surgical site infection” means an incisional or organ/space infection that is associated with an operative procedure performed on the patient.

1. Surgical site infection shall be further defined according to CDC surgical site infection classification criteria and operative procedure categories established in the NHSN Manual.

Amended by R.2012 d.021, effective January 17, 2012.

See: 43 N.J.R. 2213(a), 44 N.J.R. 163(a).

In definition “Act”, inserted “when referencing a general hospital and N.J.S.A. 26:2H-5.1e (P.L. 2009, c. 263) when referencing an ambulatory surgery facility”; rewrote definition “Health care facility”; in the introductory paragraph of definition “NHSN manual”, substituted “June 2011” for “Updated January 2008”; and in paragraph 1 of definition “NHSN manual”, updated the website address.

### 8:56-1.3 Enforcement

The Department may impose enforcement remedies against any health care facility that fails to comply with the requirements set forth in the Act and this chapter in accordance with N.J.A.C. 8:43E.

## SUBCHAPTER 2. REPORTING

### 8:56-2.1 Designation of reporting system for CDC HAI data

(a) The Department designates NHSN as the internet-based surveillance system to which each health care facility shall report CDC HAI data as set forth in N.J.A.C. 8:56-2.6(a).

1. Information about NHSN is available through the following methods:

- i. Electronically at the CDC’s website entitled National Healthcare Safety Network (NHSN) at <http://www.cdc.gov/ncidod/dhqp/nhsn.html>;
- ii. By telephone to the NHSN number at (800) 893-0485, option 1; or
- iii. By email to the NHSN email address at [nhsn@cdc.gov](mailto:nhsn@cdc.gov).

**8:56-2.2 Confidentiality regarding CDC HAI data**

(a) A general hospital shall authorize the Department to access CDC HAI data from NHSN that contains patient identifying information.

(b) An ambulatory surgery facility shall authorize the Department to access only CDC HAI data from NHSN that does not contain patient identifying information.

(c) The HAI data that the Department retrieves from 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.

Repeal and New Rule, R.2012 d.021, effective January 17, 2012.

See: 43 N.J.R. 2213(a), 44 N.J.R. 163(a).

Section was "Confidentiality regarding CDC HAI data".

**8:56-2.3 Enrollment and training requirements for NHSN**

(a) Each health care facility shall comply with all NHSN requirements that are necessary to maintain enrollment in NHSN.

(b) Each health care facility shall enroll in NHSN as a separately licensed New Jersey facility.

(c) Each administrator shall:

1. Complete the NHSN enrollment process established in the NHSN Facility Administrator Enrollment Guide, Updated March 23, 2007, incorporated herein by reference, as amended and supplemented;

2. Adhere to the NHSN training set forth at the CDC's website entitled National Healthcare Safety Network (NHSN), NHSN Training Requirements (Facility Administrator), incorporated herein by reference, as amended and supplemented;

3. Designate authorized users for his or her health care facility; and

4. Join the NHSN user group that allows the Department to access HAI data that his or her health care facility submits to NHSN in order to comply with the Act and this chapter, and in accordance with:

- i. The confidentiality requirements set forth at N.J.A.C. 8:56-2.2; and

- ii. The Department's identification of the appropriate user group through posting to the Department's website at <http://www.state.nj.us/health/healthcarequality/index.shtml> and written notification to administrators.

(d) Each authorized user shall:

1. Complete the NHSN enrollment process established in the NHSN User Start-up Guide, Updated March 23, 2007, incorporated herein by reference, as amended and supplemented; and

2. Adhere to the NHSN training set forth at the CDC's website entitled National Healthcare Safety Network (NHSN), NHSN Training Requirements (User, other than Facility or Group Administrator), 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 and 2 above are available electronically at the following website for the NHSN Document Library, <http://www.cdc.gov/nhsn/>.

Amended by R.2012 d.021, effective January 17, 2012.

See: 43 N.J.R. 2213(a), 44 N.J.R. 163(a).

In (c)4i, updated the N.J.A.C. reference; and in (e), updated the website address.

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

(a) Each administrator and/or authorized user shall identify HAI in accordance with the methodology and protocols established by the CDC in the NHSN Manual.

(b) Each administrator and/or authorized user shall:

1. Adhere to the NHSN data collection and reporting requirements established in the document entitled Purposes, Eligibility, Requirements, and Confidentiality, incorporated herein by reference, as amended and supplemented.

- i. The document entitled Purposes, Eligibility, Requirements, and Confidentiality, is available electronically at the following website for the NHSN Document Library, [http://www.cdc.gov/ncidod/dhqp/nhsn\\_documents.html#](http://www.cdc.gov/ncidod/dhqp/nhsn_documents.html#); 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 facility licensed pursuant to N.J.S.A. 26:2H-1 et seq. that originally performed the surgery.

(d) A health care facility shall report the required data for a calendar quarter within 30 days of the end of a calendar quarter.

Amended by R.2012 d.021, effective January 17, 2012.

See: 43 N.J.R. 2213(a), 44 N.J.R. 163(a).

Added (d).

**8:56-2.5 Process for data collection and reporting of CMS HAI data**

Each health care facility shall submit quality performance measurement data as specified at N.J.A.C. 8:56-2.6.

Repeal and New Rule, R.2012 d.021, effective January 17, 2012.

See: 43 N.J.R. 2213(a), 44 N.J.R. 163(a).

Section was "Process for data collection and reporting of CMS HAI data".

**8:56-2.6 HAI data required to be reported**

(a) Each health care facility shall report CDC HAI data, as stated in the Department's notification, described in (c) below, that the Commissioner, in consultation with the QIAC, selects from the CDC identified major site categories established in the NHSN Manual.

(b) Each health care facility shall report CMS HAI data, as stated in the Department's notification, described in (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 2.4), incorporated herein by reference, as amended and supplemented.

1. The CMS Specifications Manual is available electronically at the following website, [www.qualitynet.org](http://www.qualitynet.org).

(c) The Department shall provide written notification to each health care facility's chief executive officer and administrator:

1. Stating the major site categories for which each health care facility is required to report CDC HAI data, pursuant to (a) above, by August 1st annually for the following year; and

2. Stating the process quality measures for which each health care facility is required to report CMS HAI data, pursuant to (b) above, by December 15th annually for the following year.

(d) The Department's written notification, pursuant to (c) above, shall be through the following methods:

1. Sending a notification letter to each health care facility's chief executive officer and administrator; and

2. Posting the notification letter on the Department's website at <http://www.state.nj.us/health/healthcarequality>.

**8:56-2.7 Data accuracy and retention**

(a) The chief executive officer, or his or her designee, of each health care facility shall submit in writing to the Department, by June 1st annually, a signed statement certifying that the facility has processes in place to ensure accurate submission of CDC HAI data in accordance with NHSN requirements during the current reporting year.

1. The mailing address to which the chief executive officer, or his or her designee, shall submit the written certification to is:

Office of Health Care Quality Assessment  
New Jersey Department of Health and Senior  
Services  
PO Box 360  
Trenton, NJ 08625-0360

(b) 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 to submit CDC HAI data to NHSN.

1. Medical records that each administrator and/or authorized user utilizes in order to submit CDC HAI data to NHSN shall be retained and preserved in accordance with N.J.S.A. 26:8-5.

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

Amended by R.2012 d.021, effective January 17, 2012.

See: 43 N.J.R. 2213(a), 44 N.J.R. 163(a).

Rewrote (b)1 and (c).

**SUBCHAPTER 3. UTILIZATION OF REPORTED DATA****8:56-3.1 Department use of reported data**

(a) The Department shall utilize 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. Consideration of the number of device-days to calculate device-associated infection rates;

2. Grouping of surgery infections by specific surgery; and/or

3. Consideration of other patient, procedure, or health care facility characteristics identified by the CDC.

(b) The Department shall make available to the public the results of the Department's analysis set forth in (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>;

ii. Anyone wishing to obtain multiple copies of the New Jersey Hospital Performance Report for a fee may send a written request to: Office of the Commissioner, Office of Health Care Quality Assessment, New Jersey Department of Health and Senior Services, PO Box 360, Trenton, NJ 08625-0360; or call (800) 418-1397; or

iii. Inclusion of the results in the interactive online version of the New Jersey Hospital Performance Report available at <http://web.doh.state.nj.us/hpr>; and

2. Inclusion of the results for ambulatory surgery facilities shall be made available on the Department's website at <http://www.state.nj.us/health/healthcarequality>.

Amended by R.2012 d.021, effective January 17, 2012.

See: 43 N.J.R. 2213(a), 44 N.J.R. 163(a).

In the introductory paragraph of (b)1, inserted "for general hospitals"; deleted former (b)1ii, recodified former (b)1iii and (b)2 as (b)1ii and (b)1iii; in (b)1ii, substituted "or" for "and" at the end; in (b)1iii, substituted "; and" for a period at the end; and added new (b)2.