

Understanding NHSN for Home Hemodialysis (HHD) & Peritoneal Dialysis Facilities (PD)

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Objectives

- Overview of NHSN, facility types, and definitions
- Requirements for home hemodialysis (HHD) and peritoneal dialysis (PD) data reporting based on facility type and component
- Understand the process for SAMS and NHSN enrollment
- Common SAMS questions
- Learn about the annual Home Dialysis Center Practices Survey

Overview of NHSN & Dialysis Facility Types

NHSN Overview

- NHSN is the National Healthcare Safety Network (CDC).
- The Dialysis and Healthcare Safety Personnel components are applicable to dialysis facilities for tracking infections and antimicrobial use.
- These components are designed to support infection prevention and improve patient safety in dialysis settings.

Understanding the Two Types of Dialysis

- Hemodialysis (HD) is a method where a machine and dialyzer (artificial kidney) are used to filter a patient's blood. This can be done in-center or at home (home hemodialysis).
- Peritoneal dialysis (PD) is a dialysis method where the peritoneal membrane inside a patient's abdomen acts as a filter to clear waste. It does not involve a machine or blood flow outside the body.

CAPD vs. CCPD: Types of Peritoneal Dialysis (PD)

- Continuous Ambulatory Peritoneal Dialysis (CAPD) involves the continuous presence of dialysis solution in the peritoneal cavity.
- Continuous Cyclic Peritoneal Dialysis (CCPD) takes place during the night, using a machine to make several fluid exchanges automatically.

Dialysis Facility Types and Their NHSN Component Alignment

- There are three facility types for all dialysis facilities inside NHSN:
 - Home Hemodialysis (AMB-HDPD) home dialysis used for facilities provide home hemodialysis or peritoneal dialysis
 - Hemodialysis Center (AMB-HEMO) used for outpatient in-center dialysis facilities
 - Pediatric Hemodialysis (AMB-PEDHEMO) 80% or more of their patients are less than or equal to 21 years of age and/or the facility's medical director is a pediatric nephrologist

Dialysis Facility Types and Their NHSN Component Alignment Continued...

- Each facility type aligns with a specific NHSN component.
 - AMB-HDPD reports to the Health Care Personnel Safety (HPS) Component only since they are <u>not required</u> by CMS to report dialysis events.
 - The NHSN application will still allow you to report data for this facility type although its not required.
 - AMB-HEMO reports under both the Dialysis Component and the Healthcare Personnel Safety (HPS) Component.
 - AMB-PEDHEMO reports under both the Dialysis Component and the Healthcare Personnel Safety (HPS) Component.

Home Hemodialysis (HHD) and Peritoneal Dialysis (PD) Reporting Requirements

- Facilities enrolled as AMB-HDPD (home dialysis and home peritoneal dialysis) are <u>NOT</u> required to report event data.
 - HHD and PD patients are excluded from both:
 - **Denominator data** (e.g., census counts for vascular access types)
 - **Numerator data** (e.g., dialysis events like positive blood cultures, IV antimicrobial starts, or pus, redness, or increased swelling events)
- Facilities enrolled as AMB-HEMO and AMB-PEDHEMO (hemodialysis center with in-center, peritoneal dialysis, and home dialysis) <u>ARE</u> required to report event data and census data on <u>in-center patients</u> <u>ONLY.</u>

What You Need to Know About AMB-HEMO and AMB-PEDHEMO Dialysis Facility Types

- These are freestanding or hospital-affiliated outpatient facility.
- Patients receive dialysis on site.
- Patient care area is mapped to one or more locations:
 - Outpatient Hemodialysis Clinic
 - Outpatient Hemodialysis Clinic-Acute Kidney Injury
- Within the Dialysis Component, facilities are required to report:

- Monthly reporting plans.
- Report denominator and numerator data monthly.
- Report dialysis events for any patient and transient patients
 Report all positive blood cultures.
- Complete the Outpatient Dialysis Center Practices Survey yearly.
- Facilities must report COVID-19 vaccination data with the Healthcare Personnel Safety component monthly.

SAMS & NHSN Enrollment for AMB-HEMO & AMB-PEDHEMO Dialysis Facility Types

NHSN Facility Group/User & Administrator Rules of Behavior

- The first step to NHSN Enrollment is for the person who will serve as the NHSN Facility Administrator to access and read the <u>Facility/Group User &</u> <u>Administrator Rules of Behavior</u>.
- This step ensures that facilities and users understand how to effectively safeguard the system.

Secure Access Management Services (SAMS) Enrollment Process for Facilities and Users

• If a facility and user are not enrolled in SAMS:

- The facility must first complete the NHSN enrollment process, which includes registering with SAMS. Once the facility is enrolled, individual users can then be added and go through their own SAMS registration.
- If a facility is enrolled in SAMS but a user is not:
 - The NHSN Facility Administrator can add new users to the system. Once added, the user will receive an invitation to register with SAMS, complete identity proofing, and gain access.
- If the facility is enrolled in SAMS and the user is not:
 - The process remains the same—the NHSN Facility Administrator must add the user, who will then receive an email invitation to complete SAMS registration and identity verification.

SAMS Online Registration

- Within 24 hours, new users will receive an email titled 'Invitation to Register.'
- This invitation will include instructions for the online registration process.
- Users will be asked to provide basic information about themselves.
- Users will choose their personal SAMS password to help keep their account private and secure.

SAMS Identity Verification

• After completing online registration, you will receive an email with instructions for identity verification.

- Why It's Important: U.S. law requires identity verification to protect non-public information, ensuring secure data access and preventing misuse.
- Process Details: NHSN has streamlined this process to be simple and non-intrusive.
- **Privacy Assurance:** Your registration materials will only be used to verify your identity.

SAMS Identity Verification Continued

- Authorized access also requires you to set up a mobile soft token or grid card for second factor authentication.
- Either is used when you access SAMS with your established username and password.
 - For the soft token, you will install and set up an Entrust Soft Token using an 'authenticator' application on your smart phone, tablet, or computer (recommended for immediate access).
 - For the grid card, it is a physical card token. The Entrust Grid Card is mailed to the home address associated with your SAMS profile.

SAMS Access Approval

- Await your approval and SAMS grid card activation.
- This process can take up to 2-3 weeks.
- Your assigned role determines your level of access within NHSN.
- Once approved, your SAMS account will be activated.
- You will receive an account activation email with a link to the SAMS portal.
- Log into SAMS and select NHSN Reporting from your dashboard to begin entering data.

Understanding Large Dialysis Organizations (LDOs)

- LDOs enroll and manage their facilities inside NHSN at the corporate level.
- Home and peritoneal dialysis units within an LDO, follows this guidance on enrollment.
 - For example, DaVita and Fresenius Medical Care facilities are enrolled in NHSN at the corporate level.
 - Some facilities are not aware of this resulting in duplicate enrollments.

Common SAMS Questions

Is the Identity Verification Process Similar to a Background Check?

 No. Identity Verification is only used to confirm that you have registered using your identity and that no one else is attempting to impersonate you.

How Often Will I Have to Complete the SAMS Registration Process?

- NHSN users are only required to complete the SAMS registration process once.
- This applies regardless of:
 - The number of NHSN Components a user has. (Ex: Dialysis, Patient Safety and Healthcare Personnel Safety Components)
 - The number of CDC applications a user has access to.
- To keep your account active, log in at least once every 12 months. Otherwise, you'll need to restart the registration process.

If I Do Not Access SAMS Monthly, Will I Lose Access?

- No. However, if you do not access SAMS in a 12-month period, your SAMS account will get terminated.
- Users will not be able to access NHSN application via SAMS until they reregister for SAMS.
- After completing the re-registration process, users will regain access to NHSN.
- Users will remain active in NHSN as long as they:
 - Successfully log in at least once every 12 months or,
 - Until their Facility Administrator deactivates them.

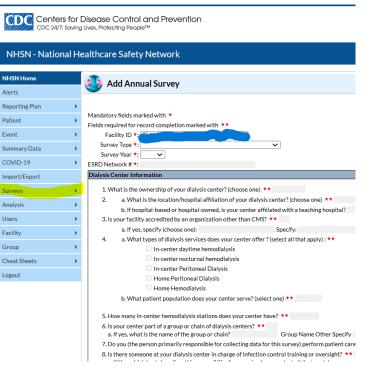
Home Dialysis Center Practices Survey

What Do I Need To Know About the Home Dialysis Center Practices Survey?

- Although CMS and CDC do not require HDPD facilities to complete a home survey, some LDOs (Fresenius and DaVita) likely have internal expectations and requirements that HPDP facilities must complete the survey.
- The survey captures surveillance practices, vaccination, and vascular access data inside the HCP component.
- The survey must be completed before entering the HCP influenza vaccination summary data into NHSN.
- Facilities complete the survey for the current year and one survey per center.
- We strongly recommend that facilities complete the survey in February of each year by someone who works in the center and is familiar with current practices within the center.

Where Can I Find the Home Dialysis Center Practices Survey?

- Log into NHSN via SAMS.
- Select the Healthcare Personnel Safety component from dropdown.
 - Not the Dialysis component.
- Click "Surveys" on the left panel.
- Click "Add."



Resources and Support

- NHSN Dialysis Event Surveillance Protocol
- NHSN Enrollment Guide
- Home Dialysis Center Practices Survey
- Submit <u>Service Now ticket</u>
- NHSN CDC Dialysis team <u>NHSN@cdc.gov</u>
- SAMS Helpdesk <u>SAMShelp@cdc.gov</u>

Thank You

For more information, contact CDC/ATSDR 1-800-CDC-INFO (232-4636) TTY: 1-888-232-6348 www.cdc.gov www.atsdr.cdc.gov

The findings and conclusions in this report are those of the authors and do not necessarily represent the official position of the Centers for Disease Control and Prevention and the Agency for Toxic Substances and Disease Registry.

