Dear NHSN Users:

The Centers for Disease Control and Prevention's (CDC's) National Healthcare Safety Network (NHSN) continues to support the nation's COVID-19 response and has released two additional data collection pathways in the COVID-19 Module within the Patient Safety Component. The Healthcare Worker Staffing Pathway and the Supplies Pathway are now active and enable hospitals to report critical information to NHSN on healthcare personnel shortages and COVID-19 treatment supplies shortages, such as ventilator supplies, N95 masks, and gloves. In addition to the new Healthcare Worker Staffing and Supplies data collection pathways, CDC also implemented a new technical feature that enables NHSN group users (for example, health departments, hospital associations, health systems) to bulk upload COVID-19 data to NHSN on behalf of member facilities in their NHSN groups. We received significant feedback and requests for this group function that we believe will reduce reporting burden for hospitals and result in more hospitals reporting COVID-19 data to NHSN.

The new Healthcare Worker Staffing and Supplies Pathways in the COVID-19 Module consist of a total of 15 data elements. The COVID-19 Module calls for reporting aggregate count data for each calendar day. Participation in the Module is voluntary and does not call for patient-level data collection. The data can be submitted using manual entry or CSV file. As with the Patient Impact and Hospital Capacity Pathway released on March 27th, NHSN will enable state and local health departments to gain immediate access to the COVID-19 data for hospitals in their jurisdictions.

Facility-level data collected through NSHN as part of the COVID-19 Module are being made available to a broader set of Federal, state, and local agency data users than data typically collected by NHSN. Specifically, COVID-19 data at the state, county, territory, and facility level submitted to NHSN will continue to be used for public health emergency response activities by CDC's emergency COVID-19 response, by the U.S. Department of Health and Human Services' (HHS') COVID-19 tracking system maintained in the Office of the Assistant Secretary of Preparedness and Response as part of the National Response Coordination Center at the Federal Emergency Management Agency (FEMA), and by the White House Coronavirus Task Force.¹

NHSN's additions to the new COVID-19 Module underscore the imperative for hospitals to continue to report COVID-19 data to state and local health departments in accordance with state and local requirements and via the state and local reporting mechanisms already in use. Use of the NHSN Module does not replace state and local public health reporting requirements. If NHSN's COVID-19 data overlaps with a state or local health departments' requirements, the data aggregated by NHSN can add value to current reporting by providing national level data. In some public health jurisdictions, the data that hospitals report to the new Module may supplement the data that the hospitals already report to public health. NHSN will use existing functionality (NHSN's Group function) to make COVID-19 data immediately accessible to state and local health departments. NHSN also plans to provide summary COVID-19 data on at least a daily basis to CDC's COVID-19 Incident Response.

CDC plans to provide COVID-19 data access to health departments in accordance with provisions of the NHSN Agreement to Participate and Consent form completed by each facility and with the understanding that the data will be used for outbreak surveillance and response. CDC stipulates that the facility identifiable information must not be used for purposes of public reporting of institution-specific data or for scientific abstracts,

https://www.whitehouse.gov/briefings-statements/vice-president-pence-secretary-azar-add-key-administration-officials-coronavirus-task-force-2/

https://www.whitehouse.gov/briefings-statements/statement-press-secretary-regarding-presidents-coronavirus-task-force/

¹ Members of the White House Coronavirus Task Force are listed here:

presentations, or manuscripts unless the included facilities have provided informed consent of such reporting. The information also must not be used for any regulatory or punitive actions against healthcare institutions, such as a fine or licensure action. CDC retains the right to discontinue providing such information and/or cease collaboration on future projects if a health department uses the provided patient and/or facility identifiable information in any of the aforementioned prohibited manners.

NHSN's role as a shared platform for healthcare-associated infection surveillance and its collaborations with hospital and health departments throughout the nation provide a valuable foundation for COVID-19 surveillance. Thank you in advance for working with NHSN as we update the Module, provide information about its use, and invite your participation in a new surveillance effort designed to respond to the COVID-19 public health emergency.

The NHSN Team