**Change Memo for**

“National Healthcare Safety Network (NHSN) Patient Impact Module for Coronavirus (COVID-19)

Surveillance in Healthcare Facilities”

**(OMB Control No. 0920-1290)**

**Expiration Date: 09/30/2020**

**Program Contact**

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The Centers for Disease Control and Prevention (CDC), Division of Healthcare Quality Promotion (DHQP) requests a nonmaterial/non-substantive of the currently approved Information Collection Request: “National Healthcare Safety Network (NHSN) Patient Impact Module for Coronavirus (COVID-19) Surveillance in Healthcare Facilities (OMB Control No. 0920-1290).”

The COVID-19 Patient Impact and Hospital Capacity data collection tool was released with the NHSN COVID-19 Module on March 27, 2020. Facility-level data collected through NHSN 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.

In order to strengthen the COVID-19 response efforts, the White House Coronavirus Task Force has requested additional data elements be added to the Healthcare Supply form. Specifically, we are adding nine new data fields for daily collection:

* Numerical values of on-hand supply (INDIVIDUAL UNITS/ “EACHES”) for N95 masks, other respirators including PAPRs, surgical masks, eye protection including face shields or goggles, gowns (single use), and gloves
* Yes/No question asking if facility uses reusable/launderable isolation gowns for the care of any patients on transmission-based precautions
* Estimation of the percentage of isolation gowns used that are reusable/ launderable (select from four options)
* Selection of whether PPE supply items in the form are managed (purchased, allocated, and/or stored) at the facility level or at the health system level (or other multiple facility group)

We estimate these changes will add five minutes to the previously approved burden for this data collection tool. The previous burden calculated for this form consisted of 233,775 hours. As a result of the changes proposed in this change memo, the burden for this form will increase by 46,755 hours to 280,530 hours.

The previous burden calculated for this entire data collection consisted of 1,206,491 hours. As a result of the changes proposed in this change memo, the new burden will consist of **1,253,246 hours.**

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| Type of Respondent | Form Name | No. of Respondents | No. Responses per Respondent | Avg. Burden per response (in hrs.) | Total Burden (in hrs.) |
| Microbiologist (IP) | COVID-19 Healthcare Supply Form | 2079 | 180 | 30/60 | 187,110 |
| Business and financial operations occupations | COVID-19 Healthcare Supply Form | 519 | 180 | 30/60 | 46,710 |
| State and local health department occupations | COVID-19 Healthcare Supply Form | 519 | 180 | 30/60 | 46,710 |
| **Total package burden** |  | | | | 1,253,246 |

Attachments:

1. COVID-19 Healthcare Supply Form
2. Table of Instructions for COVID-19 Healthcare Supply Form