Using the "SIR – CAUTI Data for LTCH QRP (2022 Baseline)" Report

Updated July 2025

Introduction

The NHSN Analysis Output Option located under the CMS Reports folder, "SIR – CAUTI Data for LTCH QRP (2022 Baseline)" was created in order to allow long term care hospitals (known as long term acute care hospitals, or LTACHs, in NHSN) to review the data that would be submitted to CMS on their behalf if they are participating in the CMS LTCH Quality Reporting Program.

As you begin to use this report, please keep the following in mind:

a. Data will only be submitted for facilities that are participating in the CMS Long-Term Acute Care Hospital Quality Reporting Program, as indicated by their CCN recorded in NHSN.

b. This report includes **in-plan CAUTI data for all bedded inpatient locations in an LTACH starting with January 2025**. Data from earlier periods will not appear in this output.

c. **IMPORTANT!** Facilities must appropriately report **"No Events"** for any months and locations where no CAUTI events were identified.

d. This output option provides an SIR for each LTACH, not each CCN. If your LTACH shares a CCN with other facilities, the SIR shown will reflect only your facility's contribution to the overall SIR for all LTACHs that share that CCN. To view combined SIRs across all LTACHs sharing a CCN, consider using the Group function in NHSN. More information is available on the Group User page.

e. The SIR that will be shared with CMS and shown in this report is calculated at the facility level. However, separate SIRs by location are also provided to support data accuracy checks.

f. The data in this report will reflect information as of your most recently generated datasets. Any data changes made in NHSN will be captured in the next monthly submission to CMS.

g. **EXCEPTION:** Quarterly data are frozen as of the final submission deadline for that quarter. For example, Q4 data are frozen at 7:00 AM UTC (3:00 AM ET) on May 16th. Any changes made in NHSN after that deadline will not be included in data submitted to CMS.

h. The information in this document should be used in conjunction with the "Monthly Checklist for the CMS Long-Term Care Hospital Quality Reporting Program."

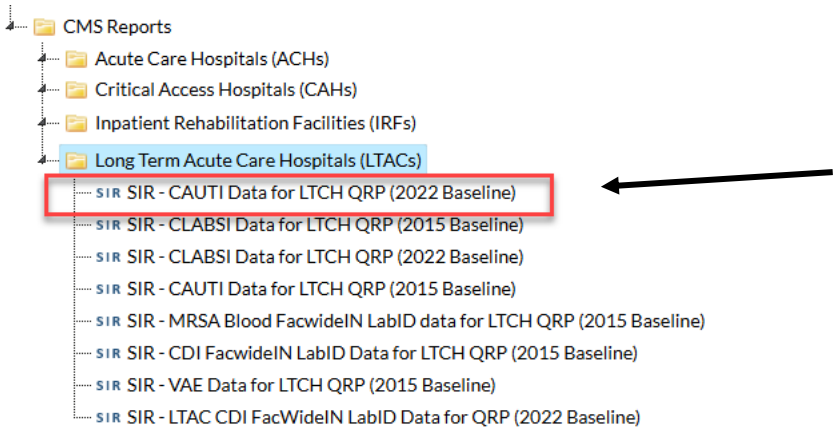
**All NHSN timestamps are displayed in Coordinated Universal Time (UTC). To convert UTC to Eastern Time:*

- *Between the second Sunday in March and the first Sunday in November (Daylight Saving Time): subtract 4 hours to get Eastern Daylight Time (EDT).*
- *Between the first Sunday in November and the second Sunday in March (Standard Time): subtract 5 hours to get Eastern Standard Time (EST).*

Example of how to access, generate, interpret and perform data quality checks on the "SIR – CAUTI Data for LTCH QRP (2022 Baseline)" Report

*Before running this output option, be sure to **generate your datasets** to ensure you are viewing the most up-to-date data your facility has reported to NHSN.*
*To generate datasets, go to **Analysis > Generate Data Sets**, then click **"Generate Reporting Data Sets."***

1. After selecting Analysis > Reports, navigate through the following folders: CMS Reports > Long Term Acute Care Hospitals (LTACs), as shown below. Click on "SIR – CAUTI Data for LTCH QRP (2022 Baseline)" then click **Run Report**.



2. By default, the results will appear in a new HTML window. If a second window does not open, please check your pop-up blocker settings and ensure that pop-ups from *.cdc.gov are allowed.

3. There will be **four tables** in the output, each described below:

i. "Standardized Infection Ratio for Urinary Catheter-associated UTI Data for LTCH QRP (2022 Baseline) – By OrgID
The first table presents an SIR for each calendar-year quarter, for the entire facility. This is the information that will be submitted to CMS for your facility.

National Healthcare Safety Network
Standardized Infection Ratio for Urinary Catheter-Associated UTI Data for LTCH QRP (2022 Baseline) - By OrgID
As of: July 22, 2025 at 2:24 AM UTC
Date Range: BS3_CAU_RATESLTAC_CMS summaryYQ After and Including 2025Q1
if (((utiPlan = "Y")))

orgID=10546

orgID	ccn	summaryYQ	CAUCount	numPred	numucathdays	SIR	SIR_pval	sir95ci
10546	33T312	2025Q1	1	3.796	3110	0.263	0.1302	0.013, 1.299

1. The SIR is only calculated if the number predicted (numPred) is >= 1. Lower bound of 95% Confidence Interval only calculated when number of observed events > 0.
2. The number of predicted events is calculated based on national 2022 NHSN data. Please see the SIR Guide for details on the HAI-specific risk adjustments and inclusion/exclusion criteria: https://www.cdc.gov/nhsn/2022rebaseline/analysis-resources.html
3. Only in-plan CAUTI data from 2022 and forward are included in this report.

Source of aggregate data: 2022 NHSN CAUTI Data
Data contained in this report were last generated on July 22, 2025 at 2:12 AM UTC to include data beginning January 2021 .

From this output, we can conclude the following:

- During the first quarter of 2025 (summaryYQ), the facility reported 1 CAUTI (CAUCount) and 3110 urinary catheter days (numucathdays).
- Based on the National baseline data, 3.796 CAUTIs were predicted (numPred). This results in an SIR of 0.263 (SIR).
- The p-value is 0.1302 (SIR_pval) and the 95% confidence interval is (0.013, 1.299) (sir95ci); The p-value results indicate that the facility's SIR is not statistically significantly different than 1.
- Be sure to review all footnotes, as they provide important context and explanations for interpreting the data.

ii. "Standardized Infection Ratio for Urinary Catheter-associated UTI Data for LTCH QRP (2022 Baseline) - By OrgID/Location Type"

National Healthcare Safety Network
Standardized Infection Ratio for Urinary Catheter-Associated UTI Data for LTCH QRP (2022 Baseline) - By OrgID/Location Type
As of: July 22, 2025 at 2:24 AM UTC
Date Range: BS3_CAU_RATESLTAC_CMS summaryYQ After and Including 2025Q1
if (((utiPlan = "Y")))

orgID=10546

orgID	ccn	locationType	summaryYQ	caucount	numPred	numucathdays	SIR	SIR_pval	sir95ci
10546	33T312	WARD_LTAC	2025Q1	1	3.796	3110	0.263	0.1302	0.013, 1.299

1. The SIR is only calculated if the number predicted (numPred) is >= 1. Lower bound of 95% Confidence Interval only calculated when number of observed events > 0.
2. The number of predicted events is calculated based on national 2022 NHSN data. Please see the SIR Guide for details on the HAI-specific risk adjustments and inclusion/exclusion criteria: https://www.cdc.gov/nhsn/2022rebaseline/analysis-resources.html
3. Only in-plan CAUTI data from 2022 and forward are included in this report.

Source of aggregate data: 2022 NHSN CAUTI Data
Data contained in this report were last generated on July 22, 2025 at 2:12 AM UTC to include data beginning January 2021 .

The second table provides an SIR for each quarter and location type. The LTAC Locations are categorized as follows:

Location Type	CDC Location Description	CDC Location Code (locCDC)
WARD_LTAC	LTAC Ward	IN:ACUTE:WARD:LTAC
WARD_LTAC	Pediatric LTAC Ward	IN:ACUTE:WARD:LTAC_PED
CC_LTAC	LTAC ICU	IN:ACUTE:CC:LTAC
CC_LTAC	Pediatric LTAC ICU	IN:ACUTE:CC:LTAC_PED

For example, if your LTAC has both an LTAC Ward and a Pediatric Ward, the data for both locations would be combined into the SIR for the WARD_LTAC location type. Note that the SIR is not calculated if the number of predicted infections (numPred) is less than 1. However, even though the SIR is not calculated, each location's data will contribute to the overall SIR for the LTACH.

iii. "Standardized Infection Ratio for Urinary Catheter-associated UTI Data for LTCH QRP (2022 Baseline) - By OrgID/CDC Location Code"

National Healthcare Safety Network
Standardized Infection Ratio for Urinary Catheter-Associated UTI Data for LTCH QRP (2022 Baseline) - By OrgID/CDC Location Code
As of: July 22, 2025 at 2:24 AM UTC
Date Range: BS3_CAU_RATESLTAC_CMS summaryYQ After and Including 2025Q1
if (((utiPlan = "Y")))

orgID=10546

orgID	ccn	locCDC	summaryYQ	CAUCount	numPred	numucathdays	SIR	SIR_pval	sir95ci
10546	33T312	IN:ACUTE:WARD:LTAC	2025Q1	1	1.898	1555	0.527	0.5842	0.026, 2.599
10546	33T312	IN:ACUTE:WARD:LTAC_PED	2025Q1	0	1.898	1555	0.000	0.1499	, 1.578

1. The SIR is only calculated if the number predicted (numPred) is >= 1. Lower bound of 95% Confidence Interval only calculated when number of observed events > 0.
2. The number of predicted events is calculated based on national 2022 NHSN data. Please see the SIR Guide for details on the HAI-specific risk adjustments and inclusion/exclusion criteria: https://www.cdc.gov/nhsn/2022rebaseline/analysis-resources.html
3. Only in-plan CAUTI data from 2022 and forward are included in this report.

Source of aggregate data: 2022 NHSN CAUTI Data
Data contained in this report were last generated on July 22, 2025 at 2:12 AM UTC to include data beginning January 2021 .

The third table provides an SIR for each quarter and CDC location (e.g., pediatric LTAC ward). Note that if your facility reports data for more than one location of the same CDC location code (for example, 2 LTAC Wards), these locations will be grouped into one SIR in this table.

From this output above, we can conclude:

- During the first quarter of 2025 (summaryYQ), the IN:ACUTE:WARD:LTAC (locCDC) reported 1 CAUTI (CAUCount) and 1555 urinary catheter days (numucathdays). The IN:ACUTE:WARD:LTAC_PED (locCDC) reported 0 CAUTI (CAUCount) and 1555 urinary catheter days (numcathdays).
- Based on the National baseline data, 1.898 CAUTIs were predicted (numPred) for IN:ACUTE:WARD:LTAC. This results in an SIR of 0.527 (SIR). 1.898 CAUTIs were predicted (numPred) for IN:ACUTE:WARD:LTAC_PED with an SIR of 0.000 because the CAUCount was 0.
- The p-value is 0.5842 (SIR_pval) and the 95% confidence interval is (0.026, 2.599) (sir95ci) for IN:ACUTE:WARD:LTAC. The p-value is 0.1499 (SIR_pval) and the 95% confidence interval is (, 1.578) for IN:ACUTE:WARD:LTAC_PED. The p-value results indicate that the facility's SIR is not statistically significantly different than 1.
- Be sure to review all footnotes, as they provide important context and explanations for interpreting the data.

iv. "Standardized Infection Ratio for Urinary Catheter-associated UTI Data for LTCH QRP (2022 Baseline) - By OrgID/Location"

National Healthcare Safety Network
Standardized Infection Ratio for Urinary Catheter-Associated UTI Data for LTCH QRP (2022 Baseline) - By OrgID/Location
As of: July 22, 2025 at 2:24 AM UTC
Date Range: BS3_CAU_RATESLTAC_CMS summaryYQ After and Including 2025Q1
if (((utiPlan = "Y")))

orgID=10546

orgID	ccn	location	summaryYQ	months	CAUCount	numPred	numucathdays	SIR	SIR_pval	sir95ci
10546	33T312	CAURBLTAC	2025Q1	1	1	1.898	1555	0.527	0.5842	0.026, 2.599
10546	33T312	CAURBLTACP	2025Q1	1	0	1.898	1555	0.000	0.1499	, 1.578

1. The SIR is only calculated if the number predicted (numPred) is >= 1. Lower bound of 95% Confidence Interval only calculated when number of observed events > 0.
2. The number of predicted events is calculated based on national 2022 NHSN data. Please see the SIR Guide for details on the HAI-specific risk adjustments and inclusion/exclusion criteria: https://www.cdc.gov/nhsn/2022rebaseline/analysis-resources.html
3. Only in-plan CAUTI data from 2022 and forward are included in this report.

Source of aggregate data: 2022 NHSN CAUTI Data
Data contained in this report were last generated on July 22, 2025 at 2:12 AM UTC to include data beginning January 2021 .

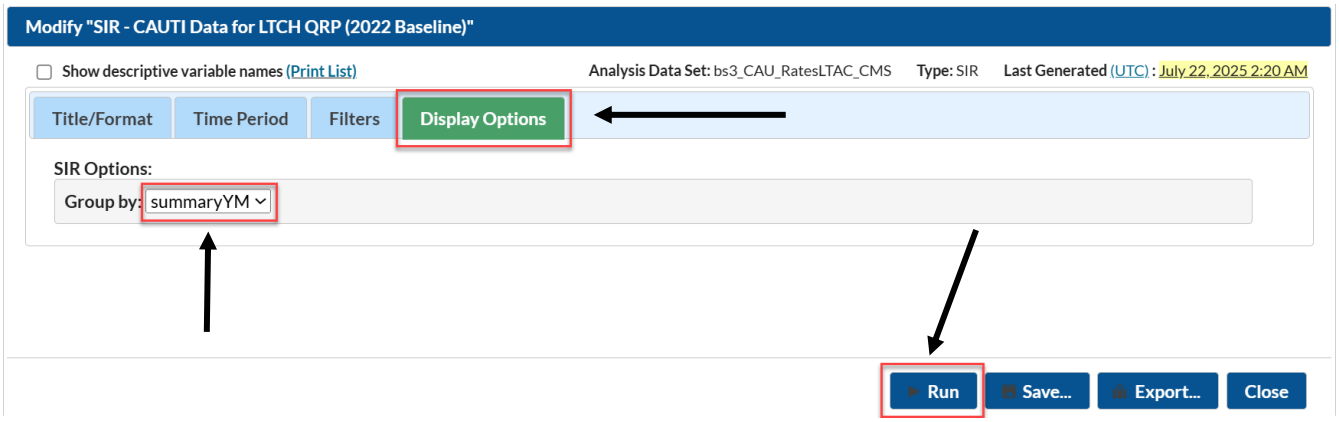
The fourth table provides the SIR for each quarter and for each individual location within your facility. This is also the only table that displays the number of months contributing to each location's quarterly SIR.

For example, in the CAURBLTAC location, the "months" column shows a value of 1 for the first quarter of 2025, indicating that one month of data contributed to the quarterly SIR for that location, as expected. However, notice that only one month is also indicated for the CAURBLTACP location in the first quarter of 2025

If fewer than three months of data contribute to a quarterly SIR, it indicates that the SIR is incomplete and additional data verification may be needed.

4. What can be done if data are incomplete or if the number of infections or urinary catheter days is incorrect?

i. To point out which months are missing from the quarter, the report can be modified to display by month. To make this modification, after selecting Analysis > Reports, navigate through the following folders: CMS Reports > Long Term Acute Care Hospitals (LTACs). Click on "SIR – CAUTI Data for LTCH QRP (2022 Baseline)" then click **Modify Report**.



a. On the Modify Report screen, click on the **Display Options** tab. Use the drop-down menu next to "Group by" to select **Summary YM** to display the SIR report by month. Click the blue **Run** button to run the report.

b. Sample output for the fourth table, "Standard Infection Ratio for Urinary Catheter-associated UTI Data for LTCH QRP (2022 Baseline) - By OrgID/Location" is displayed by month below; this sample output shows that CAUTI data are missing for February through December for 2025 in the CAURBLTAC and CAURBLTACP location:

National Healthcare Safety Network
Standardized Infection Ratio for Urinary Catheter-Associated UTI Data for LTCH QRP (2022 Baseline) - By OrgID/Location
As of: July 22, 2025 at 11:31 AM UTC
Date Range: BS3_CAU_RATESLTAC_CMS summaryYQ After and Including 2025Q1
if (((utiPlan = "Y")))

orgID=10546

orgID	ccn	location	summaryYM	CAUCount	numPred	numucathdays	SIR	SIR_pval	sir95ci
10546	33T312	CAURBLTAC	2025M01	1	1.898	1555	0.527	0.5842	0.026, 2.599
10546	33T312	CAURBLTACP	2025M01	0	1.898	1555	0.000	0.1499	, 1.578

1. The SIR is only calculated if the number predicted (numPred) is >= 1. Lower bound of 95% Confidence Interval only calculated when number of observed events > 0.
2. The number of predicted events is calculated based on national 2022 NHSN data. Please see the SIR Guide for details on the HAI-specific risk adjustments and inclusion/exclusion criteria: https://www.cdc.gov/nhsn/2022rebaseline/analysis-resources.html
3. Only in-plan CAUTI data from 2022 and forward are included in this report.

Source of aggregate data: 2022 NHSN CAUTI Data
Data contained in this report were last generated on July 22, 2025 at 2:12 AM UTC to include data beginning January 2021 .

ii. Once the missing month(s) has been identified, double-check the below data elements:

- **a.** Check that the summary data for this location has been entered for the month. This includes urinary catheter days and patient days.
- **b.** If summary data have been entered, double-check your monthly reporting plan for that month. Check to make sure that each location is included in your monthly reporting plan, with the CAUTI box checked.
- **c.** If summary data have been entered and no CAUTIs have been identified, be sure to check the 'Report No Events' box either on the summary record, next to the Urinary Catheter days count, or through the "Missing Events" tab on the Alerts page.
- **d.** If the number of infections is less than you reported and you've confirmed that the summary data have been entered in-plan, double check the UTI events in NHSN: if urinary catheter is entered as "Neither", the event is not considered a CAUTI and will not appear in this report. Note that you can edit the event with the correct information.

REMEMBER: If you have made any changes to your data, regenerate your datasets to review your output options with the most up-to-date data in NH.