



Department  
of Health

# **New York State Sepsis Care Improvement Initiative: Sepsis Protocol Review Survey Training Webinar**

**August 14, 2023**

# Housekeeping

- All participant lines have been muted during the presentation.
- Please submit questions using the chat function located at the bottom right of your screen. Questions will be answered at the end of the webinar.
- Questions that are not answered will be compiled and responses will be posted online in an FAQ document.
- The webinar is being recorded and will be posted to the IPRO Sepsis Website by the end of the week:  
<https://ny.sepsis.ipro.org/education>

# Poll Question

Please enter the full name of the hospital(s) you are representing.

Please include the PFI(s) if possible.

# Survey Overview

# Survey Background

## Background

- The New York State Sepsis Care Improvement Initiative began in 2014 with a goal to reduce sepsis-related mortality in NYS.
- Sections 405.2 and 405.4 of Title 10 (Health) of the New York State Codes, Rules, and Regulations (NYCRR) require that hospitals shall have in place evidence-based protocols for the early recognition and treatment of patients with severe sepsis and septic shock.
- Section 405.4 further requires that staff be trained, and protocols be updated based on newly emerging evidence-based standards.

# Survey Purpose

The purpose of this survey is to assess how hospitals across New York State that report Sepsis Data are currently implementing sepsis protocols and sepsis training requirements in accordance with 10 NYCRR Sections 405.2 and 405.4

# Survey Administration

- Completion of the survey is a two-step process
  1. Completion of the survey in HERDS.
  2. Submission of the signed CEO/CMO Attestation via email to the NYS Sepsis Care Improvement Initiative at [Sepsis.Clinical.Data@health.ny.gov](mailto:Sepsis.Clinical.Data@health.ny.gov).
- Each hospital facility with a unique PFI must complete both steps

**The Survey and Signed Attestation are due by 5:00 PM on  
October 10, 2023.**

# Survey Completion Timeline

Survey Name	Survey Timeline
Sepsis Protocol Review 2023	August 14, 2023 - October 10, 2023

Length of time to complete survey: **Approximately 15 – 20 minutes**

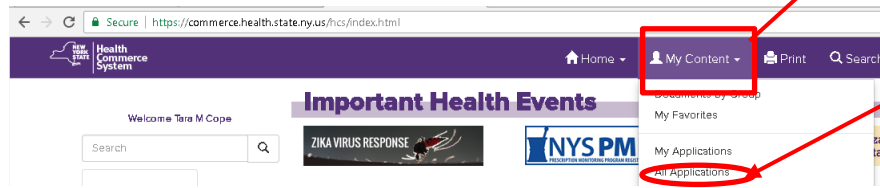


# HERDS

## Overview

# Accessing the Sepsis Protocol Review Survey

- Log into the Health Commerce System (HCS):  
<https://commerce.health.state.ny.us/>
- Add the HERDS survey to your “My Applications” List
  - At the top of the HCS homepage, click on *My Content* → *All Applications*



- Click on the *H*
- Select the green plus sign next to HERDS for Hospitals (Health Electronic Response Data System)

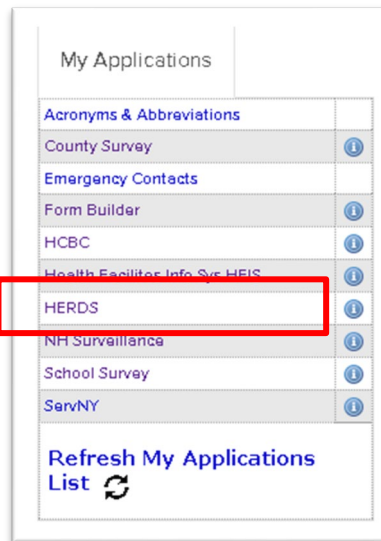
Application Name	Acronym	Profile	Restricted	Add/Remove
Health Care Facility Evacuation Center Application	HECAPP	(i)	Yes	
Health Facilities Information System	HFIS	(i)		(-)
Health Home CMART File Upload		(i)		(+)
Healthcare Financial Data Gateway	HFDD	(i)		(+)
Healthy Neighborhoods - No Access Form		(i)		(+)
HERDS for Hospitals (Health Electronic Response Data System)	HERDS	(i)		(+)

# Accessing the Sepsis Protocol Review Survey

- Click on *Home* → *Home*

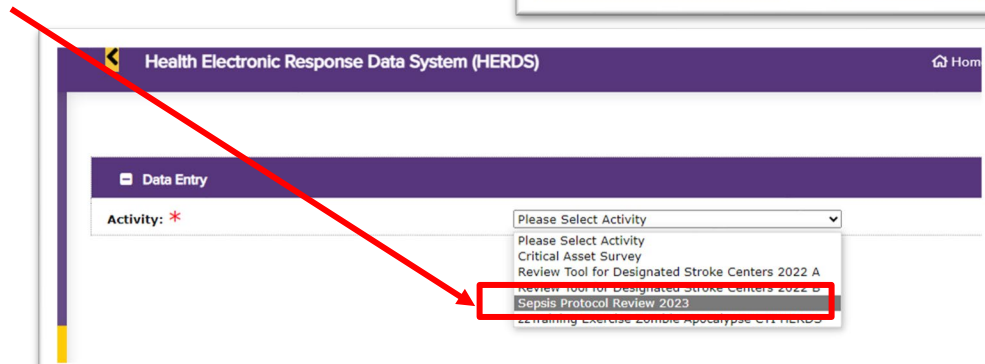
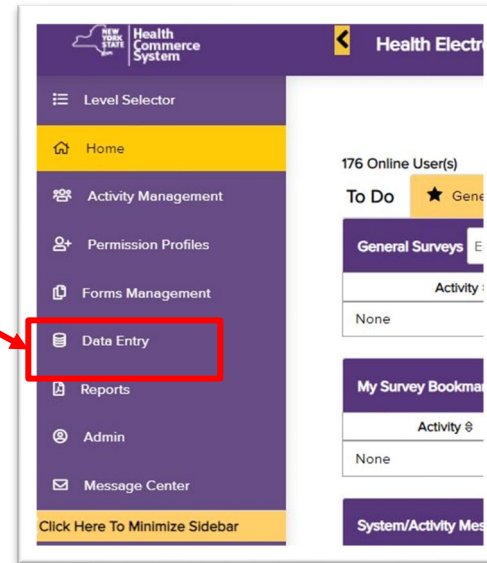


- Select *HERDS* from the “My Applications” Menu



# Accessing the Sepsis Protocol Review Survey

- Click on *Data Entry*
- From the *Activity* Drop Down List select
  - Sepsis Protocol Review 2023



# To Set Up an HCS Account and Access HERDS

- If you do not have an HCS account:
  - Contact your facility’s HCS Coordinator to request an HCS account
  - Request to be assigned the “HERDS Survey Reporter” role
- Please call the HCS Help Desk at 1-866-529-1890 or email [hinhpn@health.ny.gov](mailto:hinhpn@health.ny.gov) if you do not know your HCS Coordinator

# Survey Questions and Format

# Survey Questions and Format

- There are three survey sections
- Each section references a part of 10 NYCRR 405.4 (a)
  - Section 1: 10 NYCRR 405.4 (a)(4)
  - Section 2: 10 NYCRR 405.4 (a)(5)
  - Section 3: 10 NYCRR 405.4 (a)(6)
- All questions with a **red asterisk \*** are required

# Section 1

- These questions pertain to 10 NYCRR 405.4 (a) (4) and ask about current Sepsis Protocols
  - 5 “Yes” or “No” questions
  - If you select “No” the “If no, please explain” text box will become active and allow you to share more information

Does your sepsis protocol include:

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1. (i) a process for the screening and early recognition of patients with sepsis, severe sepsis and septic shock; \*  Yes  No

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If no, please explain:



# Section 2

- This section pertains to 10 NYCRR 405.4 (a)(5) and asks about documentation and the frequency of Staff Trainings
- The first question asks about documentation of trainings

Do you document how frequently staff at this hospital are trained on the sepsis protocol(s)?  Yes  No

- Subsequent questions ask about the frequency of training for staff with and without direct patient care responsibilities
  - Staff with direct patient care responsibilities including Physicians, Physician Trainees, Nurse Practitioners, Physician Assistants, Registered Nurses and Licensed Practical Nurses
  - Staff with indirect patient care responsibilities including Pharmacy and Laboratory staff

# Section 2 Continued

- Please select all that apply when responding about the frequency of training provided to the specified staff
- If you selected “Other” the free text section of the question will be come active and allow you to share more information

How frequently are the following staff trained on the sepsis protocol(s)? (Please select all that apply)

Physicians:  Not Trained  
 During Onboarding  
 At Least Annually  
 When Protocols are Updated  
 Other

If you selected other, please explain:

# Section 2 Continued

- The final 3 questions in this section ask for more information about trainings provided

Are other staff with indirect patient care responsibilities trained on the section(s) of the sepsis protocol(s) used in your hospital that may be applicable to that staff? \*  Yes  No

Please describe which other staff are trained and how often.

(Optional) Please share any other information about training that you would like the Department to know.

# Section 3

- This section pertains to 10 NYCRR 405.4 (a)(6) and asks about reviewing and updating Sepsis Protocols
- All questions in this section are required
- The first question is open-ended and requires a response. Potential answers may include: annually, bi-annually, when newly emerging evidence is identified

How frequently are the sepsis protocol(s) reviewed in your hospital? \*



# Section 3 Continued

- Please answer these questions based on the current Sepsis Protocol at your hospital
- Please select 2014 if the last time the protocol was reviewed or updated occurred prior to 2014

When was the last time the sepsis protocol(s) in your hospital were reviewed?

Month: \*  January  February  March  April  May  June  July  August  September  October  November  December

Year (for years prior to 2014 select 2014): \*  2023  2022  2021  2020  2019  2018  2017  2016  2015  2014

When was the last time the sepsis protocol(s) in your hospital were updated?

Month: \*  January  February  March  April  May  June  July  August  September  October  November  December

Year (for years prior to 2014 select 2014): \*  2023  2022  2021  2020  2019  2018  2017  2016  2015  2014

# Completion of the Survey

- Once all questions have been answered and you have submitted your responses you will have completed the required survey.
- You must also submit the signed CEO/CMO Attestation via email to the NYS Sepsis Care Improvement Initiative at [Sepsis.Clinical.Data@health.ny.gov](mailto:Sepsis.Clinical.Data@health.ny.gov) to complete the two-step process.

**The Survey and Signed Attestation are due by 5:00 PM  
on October 10, 2023.**

# Questions

All questions related to the HERDS survey and CEO/CMO attestation form can be directed to the Sepsis Clinical email address :

[Sepsis.Clinical.Data@health.ny.gov](mailto:Sepsis.Clinical.Data@health.ny.gov)

## Technical Assistance Webinar

- Monday, August 28, 2023 from 1 – 2 pm
- Optional webinar to answer questions hospitals have on survey submission
- Please join if you have questions or need assistance with the survey