

Shop Talk: NHSN Event-Level Vaccination Forms: Office Hours and FAQs

Welcome!

Please enter questions in the Q&A box.
Chat to Technical Support if you need assistance.

We will get started shortly!

Facilitated By:

Marilee Johnson, MBA, MT (ASCP)
Infection Prevention Technical Advisor

April 21, 2022

Marilee Johnson, MBA, MT (ASCP)

INFECTION PREVENTION TECHNICAL ADVISOR

Marilee is a health professional with experience in public health epidemiology, infection prevention and clinical microbiology. Recently, she worked with the Centers for Disease Control and Prevention's (CDC) National Healthcare Safety Network (NHSN) to reduce *C. difficile* infections in nursing home residents. She supports nursing homes with tracking and reporting infections in NHSN and focuses on strategies to reduce health care-acquired infections across all patient care settings.

Marilee loves gardening, hiking, reading, yoga and spending time with her family and friends.

Contact: marilee.johnson@allianthealth.org



Amy Ward, MS, BSN, RN, CIC

INFECTION PREVENTION SPECIALIST

Amy is a registered nurse with a diverse background in acute care nursing, microbiology, epidemiology and infection control. She is passionate about leading and mentoring new and future infection preventionists in their career paths and assisting them in reducing health care-associated infections across the continuum of care.

Amy enjoys spending time with family. She loves all the time she can get outdoors camping, bicycling and running.

Contact: Amy.Ward@AlliantHealth.org



Donald Chitanda, MPH, CIC

INFECTION PREVENTION TECHNICAL ADVISOR

Donald is a health professional with experience in public health epidemiology and infection prevention. Over the past several years, he worked as an infection preventionist at the hospital- and system-level, where he was part of a task force to ensure the safety of caregivers and patients during the ongoing COVID-19 pandemic. In addition, he was part of and led several projects to reduce hospital-acquired infections utilizing Lean Six Sigma methodologies. He is also trained in ensuring ongoing facility survey readiness for regulatory agencies such as CMS and The Joint Commission.

Donald enjoys spending time with family and doing outdoor activities.

Contact: Donald.Chitanda@AlliantHealth.org



Heather Dubendris, MSPH

EPIDEMIOLOGIST

Heather Dubendris is an epidemiologist with over 10 years of experience working in public health. She earned a bachelor's degree in community health education from the University of Maine and a master's degree in public health from the University of South Carolina. Heather previously served as the lead health care-associated infections (HAI) epidemiologist for the North Carolina Division of Public Health. In this role, Heather had primary responsibility for the surveillance and analysis of HAI data, led outbreak responses, and provided communicable disease consultation to various stakeholders.

At Lantana, Heather began by supporting the CDC's NHSN Antimicrobial Use and Resistance module. She now provides analytic and user support to the NHSN's vaccination modules. In addition, she analyzes and presents surveillance data, assists with module development, performs data quality outreach and develops guidance for submitting facilities and partners to inform public health and quality improvement efforts.



Hannah Reses

EPIDEMIOLOGIST AT CENTERS FOR DISEASE CONTROL AND PREVENTION

Hannah Reses is an epidemiologist and has been working at the CDC since 2014. She earned a bachelor's degree in ecology and evolutionary biology from the University of Michigan and a master's degree in public health from Emory University. Hannah previously worked in other positions at the CDC as a surveillance epidemiologist focused on waterborne diseases and antimicrobial-resistant infections in health care settings and the community.

Recently, Hannah served as the lead of the HHS Interagency Hospital Data Analytics Unit, leading efforts to analyze, manage, and improve the HHS teletracking hospital data surveillance system. Hannah currently serves as the lead of the CDC's NHSN Vaccination Unit. The Vaccination Unit oversees all work related to collecting, analyzing and reporting health care worker, patient and nursing home resident vaccination data for COVID-19 and influenza in NHSN.



National Healthcare Safety Network (NHSN) Event-Level Vaccination Forms: Office Hours and FAQs



NHSN Vaccination Unit

April 12, 2022

Overview



- Facilities will continue to submit cumulative weekly COVID-19 vaccination data to the Weekly COVID-19 Vaccination Modules. Data can be reported to these modules in three ways:
 - Directly into the data entry screens of the COVID-19 Vaccination Modules.
 - Through CSV upload into the Weekly COVID-19 Vaccination Modules.
 - As of March 28, 2022, long-term care facilities also have the option to use these event-level COVID-19 vaccination forms and select the “view reporting summary and submit” button to submit these data to the Weekly Modules.
 - The event-level forms replace the optional excel data tracking worksheets previously offered to facilities to assist with reporting to the Weekly COVID-19 Vaccination Modules.

Today, We'll Focus on #3, the Event-Level COVID-19 Vaccination Forms



Facilities will continue to submit cumulative weekly COVID-19 Vaccination data to the Weekly COVID-19 Vaccination Modules. Data can be reported to these modules in three ways:

1. Directly into the data entry screens of the COVID-19 Vaccination Modules.
2. Through CSV upload into the Weekly COVID-19 Vaccination Modules.
3. As of March 28, 2022, long-term care facilities also have the option to use these event-level COVID-19 vaccination forms and select the “view reporting summary and submit” button to submit these data to the Weekly Modules.

The event-level forms are replacing the optional excel data tracking worksheets previously offered to facilities to assist with reporting to the Weekly COVID-19 Vaccination Modules.

Background of COVID-19 Weekly Reporting



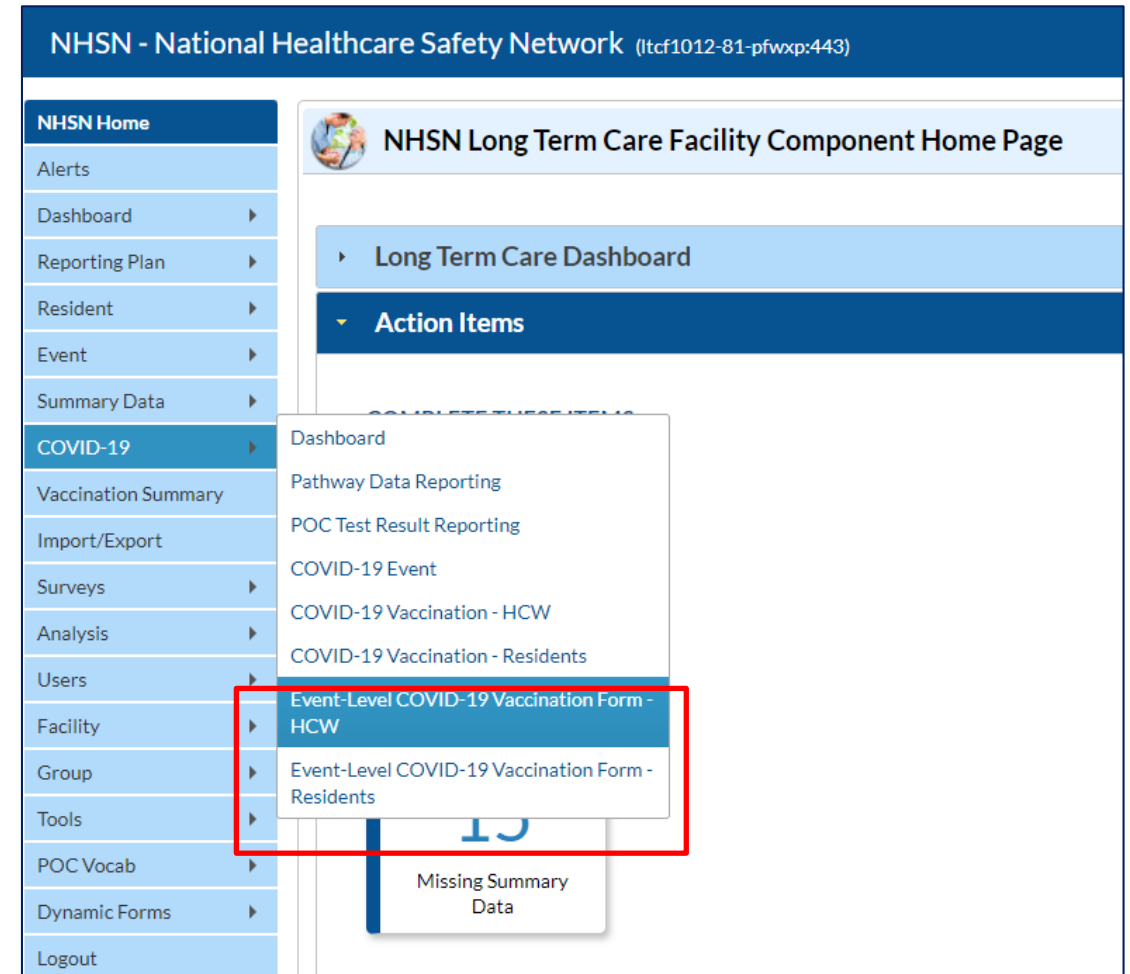
- To track individual resident and health care personnel vaccination information, the CDC currently provides Excel spreadsheets (named Excel Data Tracking Worksheets) to track resident and health care personnel.
 - Enhanced versions of these worksheets have now been built into the NHSN Event-Level Vaccination Forms.

Data Entry and Submission Overview

How To Access Event-Level COVID-19 Vaccination Form



- Must be a SAMS Level 3 user
- LTCF Component
- Navigate to the COVID-19 tab
- Select Event-Level COVID-19 Vaccination Form - HCW or Event-Level COVID-19 Vaccination Form - Residents



How To Enter Vaccination Information for an Individual



Event-Level COVID-19 Vaccination Form - Residents

+ Add Row... View Reporting Summary & Submit... Upload CSV... Export CSV... Export SQL...

Resident identifier *	Resident Admit Date *	Resident Discharge Date	Resident First Name *	Resident Last Name *	Dose 1 vaccination date **	Dose 1 vaccine manufacturer name **	Dose 2 vaccination date **	Dose 2 vaccine manufacturer name **	Is vaccination series complete?

Save Row Cancel

Required fields marked with * Conditionally required fields marked with **

Delete	Resident identifier *	Resident Admit Date *	Resident Discharge Date	Resident First Name *	Resident Last Name *	Dose 1 vaccination date **	Dose 1 vaccine manufacturer name **	Dose 2 vaccination date **	Dose 2 vaccine manufacturer name **	Is vaccination series complete?
	10075	08/08/2020		B	B	10/10/2021	Moderna COVID-19	11/08/2021	Moderna COVID-19	Y

- Click **+ Add Row** button
- New yellow section at the top of the form will appear to enter this individual's data
- Enter required and applicable fields
- Click **Save Row**

Note: CSV upload also available

Required Fields



- Resident/HCW Identifier (unique identifier for the individual, assigned by your facility)
- Admission/start date
- First name
- Last name
- At least ONE status
 - This means each person must be classified into at least one of the main categories, such as partial or complete primary series vaccination, contraindication, declined, unknown vaccination status.

How To Update Vaccination Information for an Individual



- The Event-Level COVID-19 Vaccination Form captures changes in individual vaccination status over time.
- If an individual's vaccination status changes, do not delete the old status.
- Add the new status date to their existing row.
- For example, a resident initially declined vaccination when admitted on 1/1/22. The resident later decided to get vaccinated on 2/6/22.
 - Do NOT delete the declined date.
 - Instead, ADD the new vaccination information to the resident's existing row.

How To Update Vaccination Information for an Individual



- For example, the resident below initially declined vaccination when she was admitted on 1/1/22. She later decided to get vaccinated on 2/6/22. Both events are maintained on her row.
 - After saving her data on 1/1/22, her row looked like this:

fields marked with * Conditionally required fields marked with **									
	Resident identifier *	Resident Admit Date *	Resident Discharge Date	Resident First Name * ⬆	Resident Last Name *	Dose 1 vaccination date **	Dose 1 vaccine manufacturer name **	Dose 2 vaccination date **	Dose 2 vaccine manufacturer name **
+	5675566	01/01/2022		1Res	ResLastName4				

Required fields marked with * Conditionally required fields marked with **						
Is vaccination series complete?	Medical contraindication date **	Declination date **	Declination reason	Unknown COVID-19 vaccination status Date **	Additional/booster dose date **	Additional/booster dose manufacturer name **
No		01/01/2022	Other			

- When she decided to receive dose 1 on 2/6/22, do not delete the information on her prior declination. Instead, add the information on dose 1 to her existing row.


Required fields marked with * Conditionally required fields marked with **									
	Resident identifier *	Resident Admit Date *	Resident Discharge Date	Resident First Name * ⬆	Resident Last Name *	Dose 1 vaccination date **	Dose 1 vaccine manufacturer name **	Dose 2 vaccination date **	Dose 2 vaccine manufacturer name **
+	5675566	01/01/2022		1Res	ResLastName4	02/06/2022	Moderna COVID-19 vacc		

Required fields marked with * Conditionally required fields marked with **						
Is vaccination series complete?	Medical contraindication date **	Declination date **	Declination reason	Unknown COVID-19 vaccination status Date **	Additional/booster dose date **	Additional/booster dose manufacturer name **
No		01/01/2022	Other			

How To Submit Data to the Aggregate Weekly Reporting Form



- Rows will appear in green after they have been added or modified, and will remain green until they have been submitted to the weekly reporting form for all relevant weeks.
- When all data are entered and ready for submission, click the View Reporting Summary & Submit button.

 Event-Level COVID-19 Vaccination Form - Residents

[Add Row...](#) [View Reporting Summary & Submit...](#) [Upload CSV...](#) [Export CSV...](#) [Export SQL...](#)

Required fields marked with * Conditionally required fields marked with **

Delete		Resident identifier *	Resident Admit Date *	Resident Discharge Date	Resident First Name *	Resident Last Name *	Dose 1 vaccination date **	Dose 1 vaccine manufacturer name **	Dose 2 vaccination date **	Dose 2 vaccine manufacturer name **	Is vaccinated
<input type="checkbox"/>	+	346546	01/05/2022		Res5	ResLastName5	10/11/2021	Janssen COVID-19 vacci			Yes
<input type="checkbox"/>	+	43875	02/02/2022		Res2	ResLastName2	10/12/2021	Moderna COVID-19 vacc	11/02/2021	Moderna COVID-19 vacc	Yes
<input type="checkbox"/>	+	5675566	01/01/2022		1Res	ResLastName4	02/06/2022	Moderna COVID-19 vacc			No
<input type="checkbox"/>	+	849547	11/04/2021		Res3	ResLastName3					No
<input type="checkbox"/>	+	84984	01/01/2022		Res1	ResLastName1	04/06/2021	Pfizer-BioNTech COVID-	05/10/2021	Pfizer-BioNTech COVID-	Yes

How To Submit Data to the Aggregate Weekly Reporting Form



- This is the Reporting Summary screen.
- The totals here are auto-calculated based on the person-level data.
- Use the week of data collection drop-down menu to view the data by reporting week and see which weeks need data.

View Reporting Summary & Submit...

COVID-19 Vaccination Cumulative Summary for Long-Term Care Facility Residents TRACKING WORKSHEET	
Facility ID#:	20568
Vaccination type:	COVID19
Week of data collection first day (Monday):	2/28/2022 (Changed since submitted using the Tracking Worksheet) ▼
Week of data collection last day (Sunday):	03/06/2022

Cumulative Vaccination Coverage	
	* All Patients (Total)
1. *Number of residents staying in this facility for at least 1 day during the week of data collection	5
2. *Cumulative number of residents in Question #1 who have received COVID-19 vaccine(s) at this facility or elsewhere:	
2.1. Only dose 1 of Pfizer-BioNTech COVID-19 vaccine	0
2.2. Dose 1 and dose 2 of Pfizer-BioNTech COVID-19 vaccine	1
2.3. Only dose 1 of Moderna COVID-19 vaccine	1
2.4. Dose 1 and dose 2 of Moderna COVID-19 vaccine	1
2.5 One dose of Janssen COVID-19 vaccine	1
2.99 Complete COVID-19 vaccination series: Unspecified Manufacturer	0
* Any completed primary COVID-19 vaccine series	3
3. Cumulative number of residents in Question #1 with other conditions:	
3.1 *Medical contraindication or exclusion to COVID-19 vaccine	0
3.2. *Offered but declined COVID-19 vaccine	1
3.3.*Unknown COVID-19 vaccination status	0
4. *Cumulative number of residents in Question #2 who have received an additional dose or booster of COVID-19 vaccine at this facility or elsewhere since 07/19/2021	
4.1. * Additional dose of Pfizer-BioNTech COVID-19 vaccine	0
4.2. * Additional dose of Moderna COVID-19 vaccine	2
4.3 * Additional dose of Janssen COVID-19 vaccine	0
4.4. Additional dose of unspecified manufacturer	0
* Any Additional dose or booster of COVID-19 vaccine series	2
COVID-19 Vaccine(s) Supply	
5. *For the current reporting week, please describe the availability of COVID-19 vaccine(s) for your facility's residents:	
5.1 Is your facility enrolled as a COVID-19 vaccination provider?	▼
5.2. Did your facility have a sufficient supply of COVID-19 vaccine(s) to offer all residents the opportunity to receive COVID-19 vaccine(s) from your facility in the current reporting week?	▼
5.3. Did your facility have other arrangements sufficient to offer all residents the opportunity to receive COVID-19 vaccine(s) in the current reporting week (examples of other arrangements include referring to the health department or pharmacies for vaccination)?	▼
5.4. Please describe any other COVID-19 vaccination supply-related issue(s) at your facility.	

Save and Submit Data Done

How To Submit Data to the Aggregate Weekly Reporting Form



- Use the week of data collection drop-down menu to view the data by reporting week and see which weeks need data based on the changes you made to the event-level data.
- In this example, I modified data to impact the summary counts for weeks 2/28-4/4, so I am being prompted to submit or re-submit for those weeks.

2/28/2022 (Changed since submitted using the Tracking Worksheet) ▼
1/10/2022
1/17/2022
1/24/2022
1/31/2022
2/7/2022
2/14/2022
2/21/2022
2/28/2022 (Changed since submitted using the Tracking Worksheet)
3/7/2022 (Changed since submitted using the Tracking Worksheet)
3/14/2022 (Changed since submitted using the Tracking Worksheet)
3/21/2022 (Changed since submitted using the Tracking Worksheet)
3/28/2022 (Changed since submitted using the Tracking Worksheet)
4/4/2022 (Changed since submitted using the Tracking Worksheet)

How To Submit Data to the Aggregate Weekly Reporting Form



- Select the first week you want to submit aggregate weekly summary data.
- Review the totals.
- If everything appears correct, click “Save and Submit Data.”
- You will receive a pop-up message that your data was successfully saved.
- Click OK.
- Select the next week you want to submit data for and repeat.

View Reporting Summary & Submit...

COVID-19 Vaccination Cumulative Summary for Long-Term Care Facility Residents

TRACKING WORKSHEET

Facility ID#:	20568
Vaccination type:	COVID-19
Week of data collection first day (Monday):	2/28/2022
Week of data collection last day (Sunday):	03/06/2022

Cumulative Vaccination Coverage

	* All Patients (Total)
1. *Number of residents staying in this facility for at least 1 day during the week of data collection	4
2. *Cumulative number of residents in Question #1 who have received COVID-19 vaccine(s) at this facility or elsewhere:	
2.1. Only dose 1 of Pfizer-BioNTech COVID-19 vaccine	0
2.2. Dose 1 and dose 2 of Pfizer-BioNTech COVID-19 vaccine	1
2.3. Only dose 1 of Moderna COVID-19 vaccine	1
2.4. Dose 1 and dose 2 of Moderna COVID-19 vaccine	1
2.5. One dose of Janssen COVID-19 vaccine	0
2.99. Complete COVID-19 vaccination series: Unspecified Manufacturer	0
* Any completed primary COVID-19 vaccine series	2
3. Cumulative number of residents in Question #1 with other conditions:	
3.1 *Medical contraindication or exclusion to COVID-19 vaccine	0
3.2. *Offered but declined COVID-19 vaccine	1
3.3.*Unknown COVID-19 vaccination status	0
4. *Cumulative number of residents in Question #2 who have received an additional dose of COVID-19 vaccine since 07/19/2021	
4.1. * Additional dose of Pfizer-BioNTech COVID-19 vaccine	0
4.2. * Additional dose of Moderna COVID-19 vaccine	2
4.3 * Additional dose of Janssen COVID-19 vaccine	0
4.4. Additional dose of unspecified manufacturer	0
* Any Additional dose or booster of COVID-19 vaccine series	2

COVID-19 Vaccine(s) Supply

5. *For the current reporting week, please describe the availability of COVID-19 vaccine(s) for your facility's residents:

5.1 Is your facility enrolled as a COVID-19 vaccination provider?

5.2. Did your facility have a sufficient supply of COVID-19 vaccine(s) to offer all residents the opportunity to receive COVID-19 vaccine(s) from your facility in the current reporting week?

5.3. Did your facility have other arrangements sufficient to offer all residents the opportunity to receive COVID-19 vaccine(s) in the current reporting week (examples of other arrangements include referring to the health department or pharmacies for vaccination)?

5.4. Please describe any other COVID-19 vaccination supply-related issue(s) at your facility.

Alert
Successfully saved.
OK

Save and Submit Data Done

How To Submit Data to the Aggregate Weekly Reporting Form



- After submitting for each week of interest, navigate to the Vaccination Summary tab to ensure that all weeks were successfully submitted to the aggregate weekly reporting form.
 - Completed weeks will appear green in the calendar view.

The screenshot displays the 'Weekly Vaccination Calendar' interface. At the top, there is a date range selector showing '28 March 2022 - 08 May 2022' and a legend indicating 'Record Complete' (dark green) and 'Record Incomplete' (yellow). The calendar is organized into two main sections, each representing a week. The first section is for the week of 03/28/2022 (Monday) to 04/03/2022 (Sunday). It shows two rows of data: 'COVID-19: HCW' with a yellow background and a checkmark, and 'COVID-19: Residents' with a dark green background and a checkmark. The second section is for the week of 04/04/2022 (Monday) to 04/10/2022 (Sunday). It also shows two rows of data: 'COVID-19: HCW' with a yellow background and a checkmark, and 'COVID-19: Residents' with a dark green background and a checkmark.

The Data in the Reporting Summary and the Official Weekly Vaccination Form Are the Same After Submission



Reporting Summary

View Reporting Summary & Submit...

COVID-19 Vaccination Cumulative Summary for Long-Term Care Facility Residents

TRACKING WORKSHEET

Facility ID#: 20568
 Vaccination type: COVID19
 Week of data collection first day (Monday): 3/28/2022
 Week of data collection last day (Sunday): 04/03/2022

Cumulative Vaccination	
	* All Patients (Total)
1. *Number of residents staying in this facility for at least 1 day during the week of data collection	5
2. *Cumulative number of residents in Question #1 who have received COVID-19 vaccine(s) at this facility or elsewhere	
2.1. Only dose 1 of Pfizer-BioNTech COVID-19 vaccine	0
2.2. Dose 1 and dose 2 of Pfizer-BioNTech COVID-19 vaccine	1
2.3. Only dose 1 of Moderna COVID-19 vaccine	1
2.4. Dose 1 and dose 2 of Moderna COVID-19 vaccine	1
2.5. One dose of Janssen COVID-19 vaccine	1
2.99. Complete COVID-19 vaccination series: Unspecified Manufacturer	0
* Any completed primary COVID-19 vaccine series	3
3. Cumulative number of residents in Question #1 with other conditions:	
3.1 *Medical contraindication or exclusion to COVID-19 vaccine	0
3.2. *Offered but declined COVID-19 vaccine	1
3.3.*Unknown COVID-19 vaccination status	0
4. *Cumulative number of residents in Question #2 who have received an additional dose or booster of COVID-19 vaccine	
4.1. * Additional dose of Pfizer-BioNTech COVID-19 vaccine	0
4.2. * Additional dose of Moderna COVID-19 vaccine	2
4.3 * Additional dose of Janssen COVID-19 vaccine	0
4.4. Additional dose of unspecified manufacturer	0
* Any Additional dose or booster of COVID-19 vaccine series	2
COVID-19 Vaccine(s) Supply	
5. *For the current reporting week, please describe the availability of COVID-19 vaccine(s) for your facility	
5.1 Is your facility enrolled as a COVID-19 vaccination provider?	<input type="checkbox"/>
5.2. Did your facility have a sufficient supply of COVID-19 vaccine(s) to offer all residents the opportunity to receive a COVID-19 vaccine during the reporting week?	<input type="checkbox"/>
5.3. Did your facility have other arrangements sufficient to offer all residents the opportunity to receive a COVID-19 vaccine during the reporting week? (If other arrangements include referring to the health department or pharmacies for vaccination?)	<input type="checkbox"/>
5.4. Please describe any other COVID-19 vaccination supply-related issue(s) at your facility.	

Weekly Form

Edit Vaccine Data

*Facility ID: 20568 *Vaccination type: COVID19 Facility CCN:
 *Week of Data Collection: 03/28/2022 - 04/03/2022 *Date Last Modified: 04/04/2022 4:38PM

Cumulative Vaccination Coverage

1. *Number of residents staying in this facility for at least 1 day during the week of data collection

2. *Cumulative number of residents in Question #1 who have received COVID-19 vaccine(s) at this facility or elsewhere

2.1 *Only dose 1 of Pfizer-BioNTech COVID-19 vaccine

2.2 *Dose 1 and dose 2 of Pfizer-BioNTech COVID-19 vaccine

2.3 *Only dose 1 of Moderna COVID-19 vaccine

2.4 *Dose 1 and dose 2 of Moderna COVID-19 vaccine

2.5 *Dose of Janssen COVID-19 vaccine

2.99 *Complete COVID-19 vaccination series: unspecified manufacturer

* Any completed COVID-19 vaccine series

3. *Cumulative number of residents in Question #1 with other conditions:

3.1 *Medical contraindication to COVID-19 vaccine

3.2. *Offered but declined COVID-19 vaccine

3.3. *Unknown COVID-19 vaccination status

4. *Cumulative number of residents in Question #2 who have received an additional dose or booster of COVID-19 vaccine

4.1 * Additional dose or booster of Pfizer-BioNTech COVID-19 vaccine

4.2 * Additional dose or booster of Moderna COVID-19 vaccine

4.3 * Additional dose or booster of Janssen COVID-19 vaccine

4.4 * Additional dose or booster of unspecified manufacturer

* Any Additional dose or booster of COVID-19 vaccine series

COVID-19 Vaccine(s) Supply

Please contact your state or local health jurisdiction if there is insufficient supply of COVID-19 vaccine available for your facility.

Data for example only

FAQs

Are the Event-Level COVID-19 Vaccination Forms Required?



No. The Event-Level COVID-19 Vaccination Forms are an optional tool that can be used to report data to the main weekly HCP and Resident vaccination modules.

NHSN - National Healthcare Safety Network

Vaccination Summary Data

Click a cell to begin entering data for the week which counts are reported.
Reporting of medical events or health problems that occur after vaccination (possible side effects) is encouraged, even if you are not sure they are the result of vaccination, at [http://www.cdc.gov/nhsn/dataquery/submit.asp?dsid=100](#)

28 March 2022 - 08 May 2022 Record Complete Record Incomplete

Vaccination Calendar

Week	HCW	Residents
022 (Monday) - 04/03/2022 (Sunday)	Record Complete	Record Complete
022 (Monday) - 04/10/2022 (Sunday)	Record Incomplete	Record Incomplete
022 (Monday) - 04/17/2022 (Sunday)	Record Incomplete	Record Incomplete
05/02/2022 (Monday) - 05/08/2022 (Sunday)	Record Incomplete	Record Incomplete

Navigation Menu:

- NHSN Home
- Alerts
- Dashboard
- Reporting Plan
- Resident
- Event
- Summary Data
- COVID-19**
 - Dashboard
 - Pathway Data Reporting
 - POC Test Result Reporting
 - COVID-19 Vaccination - HCW
 - COVID-19 Vaccination - Residents**
 - Event-Level COVID-19 Vaccination Form - HCW
 - Event-Level COVID-19 Vaccination Form - Residents
- Vaccination Summary
- Import/Export
- Surveys
- Analysis
- Users
- Facility
- Group
- Logout

Annotations:

- you can still report data here with the COVID-19 vaccination summary form!
- You can still report data with CSV upload of the COVID-19 vaccination summary form!

[Upload CSV...](#)

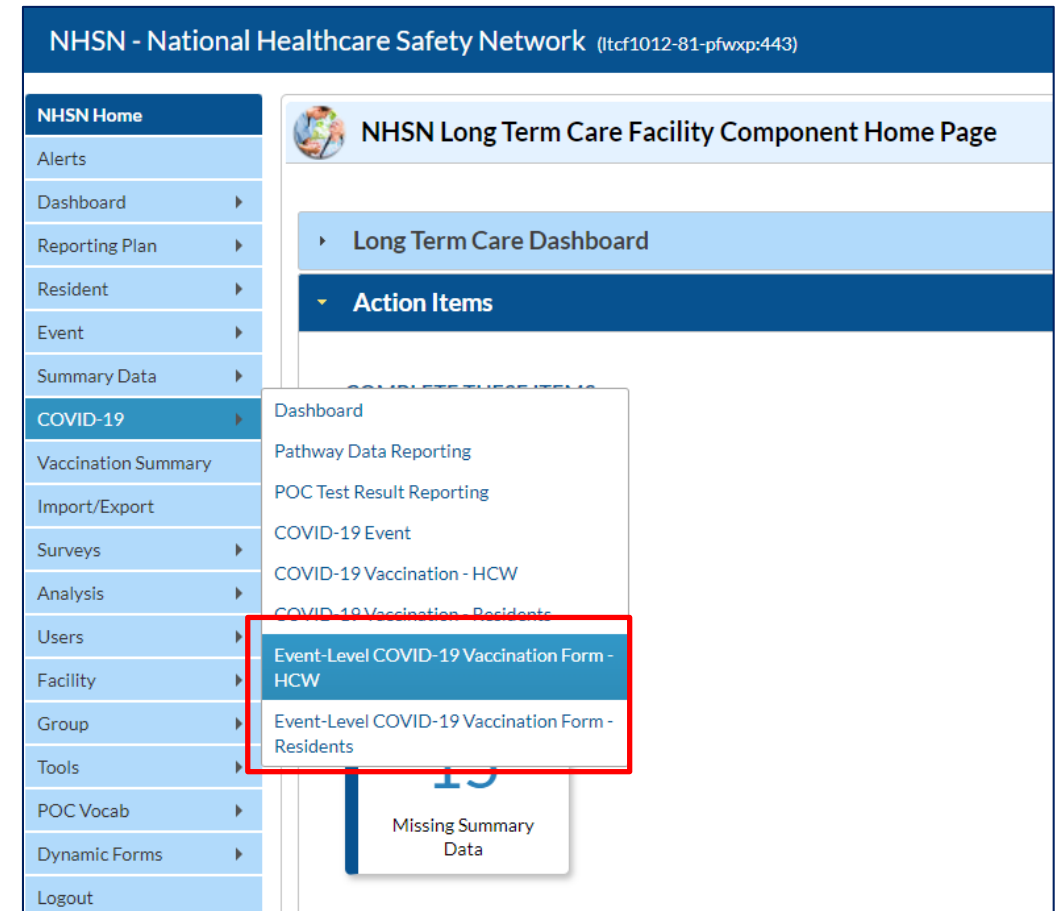
What Are the Key Advantages of This Optional Form?

- Simplifies reporting of summary data.
- Allows facilities to document vaccination information at the person-level.
- The NHSN application automatically calculates and displays the weekly totals.
- Users who use the Event-Level Vaccination Forms do not need to calculate and enter totals in the summary forms manually.
- Users can update the person-level data and use the reporting summary to review the totals and submit their weekly data.
- Captures changes in individual vaccination status over time.
- Allows users to record religious exemptions.

Why Can't I See the Event-Level COVID-19 Vaccination Forms When I Log In to NHSN?



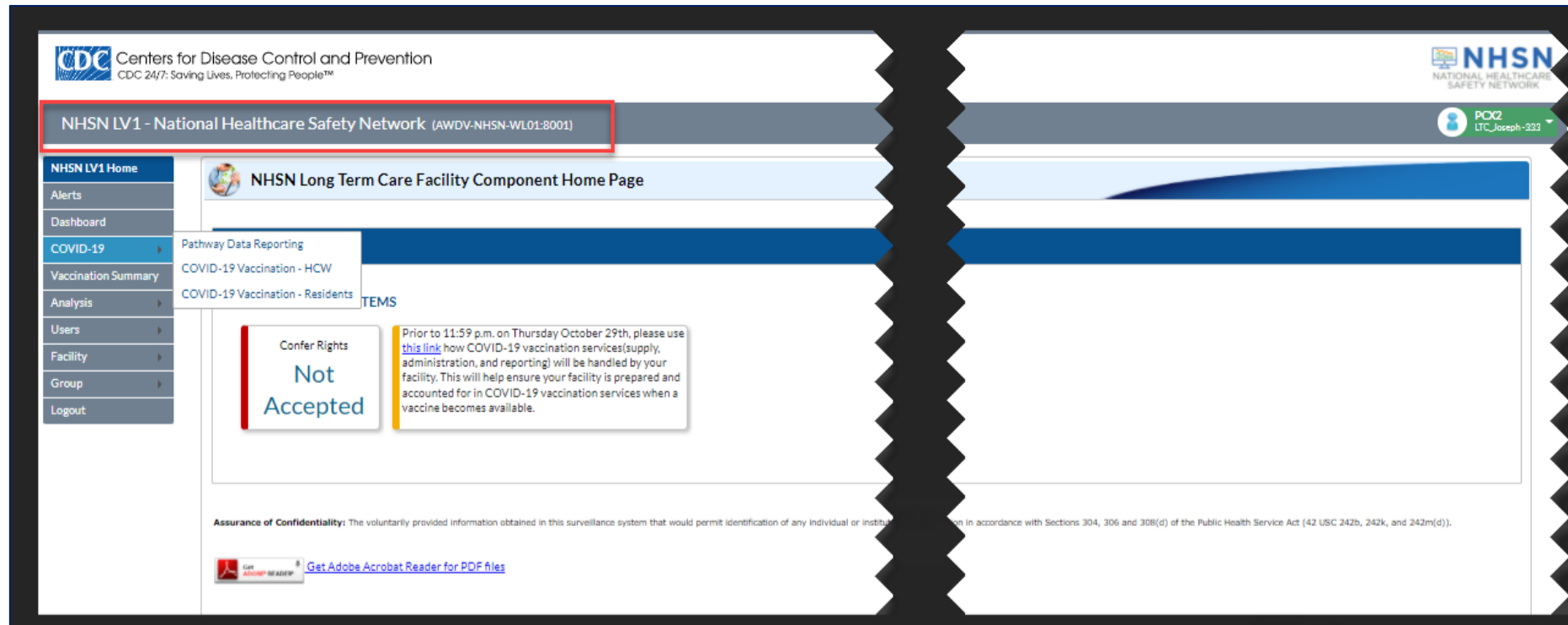
- If you do not see the Event-level Vaccination Forms under the COVID-19 tab, you may not have SAMS Level 3 Access.
- SAMS Level 3 Access is required to use the optional Event Level COVID-19 Vaccination Forms.
- To request Level 3 access, please contact the SAMS Help Desk between 8 a.m.-8 p.m. ET Monday through Friday (except U.S. federal holidays) at 877-681-2901 or email samshelp@cdc.gov.



Why Can't I See the Event-Level COVID-19 Vaccination Forms When I Log In to NHSN?



- Example of a Level 1 user's login view:



Is Reporting Completed Automatically Based on the Data Entered the Event-Level COVID-19 Vaccination Forms or Do I Still Have To Submit the Weekly Vaccination Reporting?



No. Facilities must report each week by clicking the “View Reporting Summary & Submit” button, select the week that requires data and click “Save & Submit Data.”

The screenshot shows the NHSN (National Healthcare Safety Network) interface for the "Event-Level COVID-19 Vaccination Form - Residents". The top navigation bar includes the CDC logo, the text "Centers for Disease Control and Prevention CDC 24/7: Saving Lives, Protecting People™", and the NHSN logo with "NATIONAL HEALTHCARE SAFETY NETWORK". A user profile for "DUBENDRISH Joy LTC Facility" is visible in the top right. On the left is a sidebar menu with options: NHSN Home, Alerts, Dashboard, Reporting Plan, Resident, Event, Summary Data, COVID-19, Vaccination Summary, Import/Export, Surveys, and Analysis. The main content area has a title "Event-Level COVID-19 Vaccination Form - Residents" and a toolbar with buttons: "Add Row...", "View Reporting Summary & Submit..." (highlighted with a red box), "Upload CSV...", "Export CSV...", and "Export SQL...". Below the toolbar is a table with columns: "Resident identifier", "Resident Admit Date", "Resident Discharge Date", "Resident First Name", "Resident Last Name", "Dose 1 vaccination date", "Dose 1 vaccine manufacturer name", "Dose 2 vaccination date", "Dose 2 vaccine manufacturer name", "Is vaccination series complete?", and "Medical contraindication date". The table has several rows of data, some highlighted in green. A legend indicates that required fields are marked with a red asterisk and conditionally required fields with a red double asterisk.

How Far Back Can I Report Event-Level Data?



- The Event-level COVID-19 Vaccination Form for LTC residents and staff can be used to report data beginning March 28, 2022–April 3, 2022 and forward.
- Note: If you use the Event-level Form to enter data and click Save and Submit, it will overwrite data that was previously entered via the summary form.

Centers for Disease Control and Prevention
Saving Lives, Protecting People™

National Healthcare Safety Network

View Reporting Summary & Submit...

COVID-19 Vaccination Cumulative Summary for Long-Term Care Facility Residents
TRACKING WORKSHEET

Facility ID#:	30074
Vaccination type:	COVID19
Week of data collection first day (Monday):	3/28/2022 (Changed since submitted using the Tracking Worksheet)
Week of data collection last day (Monday):	3/28/2022 (Changed since submitted using the Tracking Worksheet)
	4/4/2022 (Changed since submitted using the Tracking Worksheet)

Cumulative Vaccination Coverage

	* All Patients (Total)
Number of residents staying in this facility for at least 1 day during the week of data collection	5
Cumulative number of residents in Question #1 who have received COVID-19 vaccine(s) at this facility or elsewhere:	
Only dose 1 of Pfizer-BioNTech COVID-19 vaccine	1
Dose 1 and dose 2 of Pfizer-BioNTech COVID-19 vaccine	1
Only dose 1 of Moderna COVID-19 vaccine	0
Dose 1 and dose 2 of Moderna COVID-19 vaccine	1
One dose of Janssen COVID-19 vaccine	2
COVID-19 Complete COVID-19 vaccination series: Unspecified Manufacturer	0
Fully completed primary COVID-19 vaccine series	4
Cumulative number of residents in Question #1 with other conditions:	
*Medical contraindication or exclusion to COVID-19 vaccine	0
*Offered but declined COVID-19 vaccine	0
*Unknown COVID-19 vaccination status	0
Cumulative number of residents in Question #2 who have received an additional dose or booster of COVID-19 vaccine at this facility or elsewhere since 07/19/2021	
* Additional dose of Pfizer-BioNTech COVID-19 vaccine	0
* Additional dose of Moderna COVID-19 vaccine	0
* Additional dose of Janssen COVID-19 vaccine	1
Additional dose of unspecified manufacturer	0
Fully completed additional dose or booster of COVID-19 vaccine series	1

Save and Submit Data Done

What if I Need To Update a Record I Previously Saved?



- Previously saved records can be updated directly in the NHSN Event-level Forms.
- Click the cell that needs to be updated and enter the changes directly into the grid of the record.
- Be sure to click out of the cell(s) modified and then click “View Reporting Summary & Submit” to share the new information for all weeks impacted by a change.

Event-Level COVID-19 Vaccination Form - Residents

[Add Row...](#) [View Reporting Summary & Submit...](#) [Upload CSV...](#) [Export CSV...](#) [Export SQL...](#)

Required fields marked with * Conditionally required fields marked with **

	Resident identifier *	Resident Admit Date *	Resident Discharge Date	Resident First Name *	Resident Last Name *	Dose 1 vaccination date **	Dose 1 vaccine manufacturer name **	Dose 2 vaccination date **	Dose 2 vaccine manufacturer name **	Is vaccine
<input type="checkbox"/> Delete	QRX	02/01/2022	Folder		Second	06/08/2021	Pfizer-BioNTech COVID-			No

Example: How To Update a Previously Saved Record



- Scenario: After uploading a record for Resident ID NYCS and clicking “View Reporting Summary & Submit,” I realized I accidentally selected Moderna for their dose 1 manufacturer instead of Janssen.

The screenshot displays the NHSN National Healthcare Safety Network interface. The top navigation bar includes the CDC logo and the NHSN logo. The main content area is titled "Event-Level COVID-19 Vaccination" and shows a table of vaccination data. A purple arrow points to the "Dose 1 vaccine manufacturer" column, highlighting the error where Moderna was selected instead of Janssen.

Dose 1 vaccination date **	Dose 1 vaccine manufacturer name **	Dose 2 vaccination date **	Dose 2 vaccine manufacturer name **	Is vaccination series complete?	Medical contraindication date **
02/20/2022	Janssen COVID-19 vacci			Yes	
02/20/2022	Janssen COVID-19 vacci			Yes	
02/10/2022	Moderna COVID-19 vacci	03/03/2022	Moderna COVID-19 vacci	Yes	
02/15/2022	Pfizer-BioNTech COVID-			No	
02/01/2022	Unspecified manufacture	02/22/2022	Unspecified manufacture	Yes	
03/04/2022	Moderna COVID-19 vacci			No	
02/02/2022	Pfizer-BioNTech COVID-	02/16/2022	Pfizer-BioNTech COVID-	Yes	
02/02/2022	Pfizer-BioNTech COVID-	02/16/2022	Pfizer-BioNTech COVID-	Yes	

Below the table, the "View Reporting Summary & Submit..." window is open, showing the "COVID-19 Vaccination Cumulative Summary for Long-Term Care Facility Residents" tracking worksheet. The summary includes fields for Facility ID#, Vaccination type, Week of data collection first day, and Week of data collection last day. The cumulative vaccination coverage table shows the following data:

Cumulative Vaccination Coverage	* All Patients (Total)
1. *Number of residents staying in this facility for at least 1 day during the week of data collection	5
2. *Cumulative number of residents in Question #1 who have received COVID-19 vaccine(s) at this facility or elsewhere:	
2.1. Only dose 1 of Pfizer-BioNTech COVID-19 vaccine	1
2.2. Dose 1 and dose 2 of Pfizer-BioNTech COVID-19 vaccine	1
2.3. Only dose 1 of Moderna COVID-19 vaccine	1
2.4. Dose 1 and dose 2 of Moderna COVID-19 vaccine	1
2.5. One dose of Janssen COVID-19 vaccine	1
2.99 Complete COVID-19 vaccination series: Unspecified Manufacturer	0
* Any completed primary COVID-19 vaccine series	3
3. Cumulative number of residents in Question #1 with other conditions:	

The bottom of the window shows "Save and Submit Data" and "Done" buttons.

Example:

How To Update a Previously Saved Record



- Scenario continued:
 - Click the cell that needs to be updated and enter the changes directly into the grid of the record.

Centers for Disease Control and Prevention
CDC 24/7: Saving Lives, Protecting People™

NHSN - National Healthcare Safety Network

NHSN Home
Alerts
Dashboard
Reporting Plan
Resident
Event
Summary Data
COVID-19
Vaccination Summary
Import/Export
Surveys
Analysis
Users
Facility

Event-Level COVID-19 Vaccination

Add Row... **View Reporting Summary**

Required fields marked with * Conditionally required fields

Resident identifier *	Resident Admit Date *	Dose 1 vaccination date **	Dose 1 vaccine manufacturer name **	Dose 2 vaccination date **	Dose 2 vaccine manufacturer name **	Is vaccination series complete?	Medical contraindication date **
1776	02/01/2005	02/20/2022	Janssen COVID-19 vaccine			Yes	
1776	02/15/2022	02/20/2022	Janssen COVID-19 vaccine			Yes	
ABCD	04/17/2021	02/10/2022	Moderna COVID-19 vaccine	03/03/2022	Moderna COVID-19 vaccine	Yes	
ABCDE	02/01/2022	02/15/2022	Pfizer-BioNTech COVID-19 vaccine			No	
FGHIJ	01/01/2022	02/01/2022	Unspecified manufacturer	02/22/2022	Unspecified manufacturer	Yes	
NYCS	04/05/2021	03/04/2022	Moderna COVID-19 vaccine			No	
RTS	02/01/2022	02/02/2022	Pfizer-BioNTech COVID-19 vaccine		Pfizer-BioNTech COVID-19 vaccine	Yes	
RTS	04/01/2022	02/02/2022	Pfizer-BioNTech COVID-19 vaccine		Pfizer-BioNTech COVID-19 vaccine	Yes	

DUBENDRISH
Joy LTC Facility

NHSN
NATIONAL HEALTHCARE SAFETY NETWORK

ALLIANT
HEALTH SOLUTIONS

QIN-QIO
Quality Innovation Network - Quality Improvement Organizations
CENTERS FOR MEDICARE & MEDICAID SERVICES
EQUALITY IMPROVEMENT & INNOVATION GROUP

Example:

How To Update a Previously Saved Record



- Scenario continued:
 - Click out of the modified cell(s) and then click “View Reporting Summary & Submit” to share the new information for all weeks impacted by the change.

CDC Centers for Disease Control and Prevention
CDC 24/7: Saving Lives, Protecting People™

NHSN - National Healthcare Safety Network

NHSN Home

View Reporting Summary & Submit...

COVID-19 Vaccination Cumulative Summary for Long-Term Care Facility Residents

TRACKING WORKSHEET

Facility ID#: 30074

Vaccination type: COVID19

Week of data collection first day: 3/28/2022 (Changed since submitted using the Tracking Worksheet) ▼

Week of data collection last day: 04/03/2022

Cumulative Vaccination Coverage

	* All Patients (Total)
Number of residents staying in this facility for at least 1 day during the week of data collection	5
Cumulative number of residents in Question #1 who have received COVID-19 vaccine(s) at this facility or elsewhere:	
• Only dose 1 of Pfizer-BioNTech COVID-19 vaccine	1
• Dose 1 and dose 2 of Pfizer-BioNTech COVID-19 vaccine	1
• Only dose 1 of Moderna COVID-19 vaccine	0
• Dose 1 and dose 2 of Moderna COVID-19 vaccine	1
• One dose of Janssen COVID-19 vaccine	2
• 9 Complete COVID-19 vaccination series: Unspecified Manufacturer	0
• Completed primary COVID-19 vaccine series	4
Cumulative number of residents in Question #1 with other conditions:	

Vaccination **	Dose 1 vaccine manufacturer name **	Dose 2 vaccination date **	Dose 2 vaccine manufacturer name **	Is vaccination series complete?	Medical contraindication date **
022	Janssen COVID-19 vacci			Yes	
022	Janssen COVID-19 vacci			Yes	
022	Moderna COVID-19 vacci	03/03/2022	Moderna COVID-19 vacci	Yes	
022	Pfizer-BioNTech COVID-			No	
022	Unspecified manufacture	02/22/2022	Unspecified manufacture	Yes	
022	Janssen COVID-19 vacci			Yes	
022	Pfizer-BioNTech COVID-	02/16/2022	Pfizer-BioNTech COVID-	Yes	
022	Pfizer-BioNTech COVID-	02/16/2022	Pfizer-BioNTech COVID-	Yes	

How Do I Eliminate Staff From the Form Who No Longer Work for Us?



- Add an end date on their row.
- If there is an end date, that individual will not contribute to data for any weeks AFTER the end date.
- Tip: Sort the rows by end date (or discharge date for residents) so that all individuals with an end date will be in the bottom rows.

Buttons: Add Row..., View Reporting Summary & Submit..., Upload CSV..., Export CSV..., Export SQL...

Legend: Required fields marked with * Conditionally required fields marked with **

	Unique HCP Identifier (DOB, License #, etc.) *	HCP Start of Employment Date *	HCP End of Employment Date	HCP First Name *	HCP Last Name *	HCP Category *	Dose 1 vaccination date **
+ 1		04/06/2016	<div>1</div>	Bob	Smith	Employees (staff o	04/06/2022

Apr 2022

Su Mo Tu We Th Fr Sa

1 2

3 4 5 6 7 8 9

10 11 12 13 14 15 16

17 18 19 20 21 22 23

24 25 26 27 28 29 30

Healthcare Personnel (HCP): How To Account for Leave?



- If HCP goes on leave and returns to work in two weeks (14 days) or less:
 - Nothing on their row needs to be changed.
 - Their information can continue to be maintained on the original row.
- If HCP goes on leave for longer than two weeks (14 days) and returns to work after more than two weeks:
 - Enter an end date on the day their leave begins.
 - When they return to work, duplicate their row (using the + button next to their row) and enter a new start date on the new row. The start date on the new row is the day they return to work.
- Note: This is consistent with our guidance for the weekly summary forms, which says to continue including HCP on temporary leave (two weeks or less) and to exclude HCP if their leave is longer than two weeks.

Residents: How To Account for Residents Being Discharged and Later Re-Admitted?



- If the resident is discharged or leaves the facility for any reason and then returns or is re-admitted within one week (seven days) or less:
 - Nothing on their row needs to be changed.
 - Their information can continue to be maintained on the original row.
- If the resident is discharged or leaves the facility for any reason for longer than one week (seven days), and returns or is re-admitted after more than one week:
 - You should enter a discharge date on the day they were discharged or left
 - When they return or are re-admitted, you should duplicate their row (using the + button next to their row) and enter a new admission date on their new row.
- Note: This is consistent with our guidance for the weekly summary forms, which says to count all residents occupying a bed at this facility for at least one day (at least 24 hours) during the week of data collection.

What if a Resident Is Discharged and Then Later Re-Admitted (After More Than One Week)?



- Enter the discharge date when they are discharged (to home, hospital or elsewhere).
- When they are re-admitted, find the resident on the table.
- Click the + button to duplicate the row.
- In the new row, delete the admission and discharge date and add the new admission date.
- Ensure the vaccination information is up to date and click Save Row.

The screenshot shows a data entry interface for residents. At the top, there is a form with fields for Resident identifier, Resident Admit Date, Resident Discharge Date, Resident First Name, Resident Last Name, Dose 1 vaccination date, and Dose 2 vaccination date. Below this is a table of residents. A red box highlights the first column of the table, which contains a '+' button and a 'Duplicate Row' button. An arrow points to the '+' button.

Resident identifier *	Resident Admit Date *	Resident Discharge Date	Resident First Name *	Resident Last Name *	Dose 1 vaccination date **	Dose 2 vaccination date **
2345	03/25/2022		Man	Test	04/15/2020	Uns
<div> <div>Save Row</div> <div>Cancel</div> </div>						
Required fields marked with * Conditionally required fields marked with **						
Resident identifier *	Resident Admit Date *	Resident Discharge Date	Resident First Name *	Resident Last Name *	Dose 1 vaccination date **	Dose 2 vaccination date **
+ 1234	01/05/2022		Patient	One	01/12/2022	Test
+ 2345	04/17/2021	02/01/2022	Man	Test	04/15/2020	
+ 3456	03/02/2022		Mouse	Jefferson	04/15/2020	
+ Duplicate Row	01/07/2022		Showers	April	01/12/2022	
+ 5678	01/07/2022		Flowers	May	01/12/2022	
+ 6789	01/05/2022		Sparkler	July	01/12/2022	


Leave/Discharge Guidance Summary



	Health Care Personnel	Residents
Include on same row if:	<p>Returns to work within two weeks (14 days).</p> <p>If you entered an end date and they returned within two weeks, remove the end date and re-save the row.</p>	<p>Re-admitted within one week (seven days).</p> <p>If you entered a discharge date and they returned within one week, remove the discharge date and re-save the row.</p>
Add end date and create new row (using + button to duplicate row) if:	<p>Returns to work after more than two weeks (14 days).</p> <p>New start date must be more than two weeks later than the prior row's end date.</p>	<p>Re-admitted after more than one week (seven days).</p> <p>New admission date must be more than one week later than the prior row's discharge date.</p>

If I Enter Incorrect Data by Mistake and Click Save, Can the Row Be Deleted?

- No. Once data are entered and saved, the row cannot be deleted.
- Data on the Event-Level COVID-19 Vaccination Form can be updated after the row is saved.



Event-Level COVID-19 Vaccination Form - Residents

Add Row...
View Reporting Summary & Submit...
Upload CSV...
Export CSV...
Export SQL...

Required fields marked with * Conditionally required fields marked with **

	Resident identifier *	Resident Admit Date *	Resident Discharge Date	Resident First Name *	Resident Last Name *	Dose 1 vaccination date **
+	1234	01/05/2022		Patient	One	01/12/2022
+	2345	04/17/2021	02/01/2022	Man	Iron	04/15/2020
+	3456	03/02/2022		Mouse	Jefferson	04/15/2020
+	4567	01/07/2022		Showers	April	01/12/2022
+	5678	01/07/2022		Flowers	May	01/12/2022
+	6789	01/05/2022			July	01/12/2022

If I Enter Incorrect Data by Mistake and Click Save, Can the Row Be Deleted?



- If you need to delete a row entirely, we suggest that you do one of the following:
 - Edit the row/repurpose the row with someone else's data, or
 - Change the discharge/end date to a date before the Event-Level Forms can be used to submit data (i.e., before 3/28/2022). This way, the incorrect individual won't contribute to any data that can be submitted.
 - If you do this, you should also change the name and ID to avoid confusion. Also, add a note to the "Comments" column on the far right to document that this entry is incorrect.

Required fields marked with * Conditionally required fields marked with **							
	Unique HCP Identifier (DOB, License #, etc.) *	HCP Start of Employment Date *	HCP End of Employment Date	HCP First Name *	HCP Last Name *	HCP Category *	Dose
+	123456	04/06/2016	04/01/2020	Accidently	Entered	Other Contract Pe	
							entry error

What if Someone's Vaccination Status Changes Over Time?



Event-Level COVID-19 Vaccination Form - Residents

Buttons: Add Row..., View Reporting Summary & Submit..., Upload CSV..., Export CSV..., Export SQL...

Required fields marked with * Conditionally required fields marked with **

Delete	Resident identifier *	Resident Admit Date *	Resident Discharge Date	Resident First Name *	Resident Last Name *
<input type="checkbox"/>	TEST6	02/21/2022		TEST	CASE6

Note: GREEN ROW = modified data that has not yet been submitted.

Zoomed-in view of the table row:

Unknown COVID-19 vaccination status Date **	02/21/2022	Additional/booster dose date **	Additional manufacturer
---	------------	---------------------------------	-------------------------

View 1 - 9 of 9

- Resident was admitted on 2/21/2022 and vaccination status was unknown.

What if Someone's Vaccination Status Changes Over Time? (cont.)



Event-Level COVID-19 Vaccination Form - Residents

Buttons: Add Row..., View Reporting Summary & Submit..., Upload CSV..., Export CSV..., Export SQL..., L...

Required fields marked with * Conditionally required fields marked with **

Delete	Resident identifier *	Resident Admit Date *	Resident Discharge Date	Resident First Name *	Resident Last Name *	Do
<input type="checkbox"/>	TEST5	01/05/2022	01/11/2022	TEST1	TEST2	01
<input type="checkbox"/>	TEST6	02/21/2022		TEST	CASE6	

Note: GREEN ROW = modified data that has not yet been submitted.

Zoomed-in view of the table:

Declination date **	Declination reason	Unknown COVID-19 vaccination status Date **	Additional/booster dose date **
02/25/2022	Other	02/21/2022	

View 1 - 9 of 9

- You learn that the resident is unvaccinated and offer vaccination. They decline on 2/25/2022.
 - Add this information to the resident's existing row.
 - Do NOT delete the 2/21/2022 unknown status date.

What if Someone's Vaccination Status Changes Over Time? (cont.)



Event-Level COVID-19 Vaccination Form - Residents

Buttons: Add Row..., View Reporting Summary & Submit..., Upload CSV..., Export CSV..., Export SQL...

Legend: Required fields marked with *, Conditionally required fields marked with **

Delete	Resident Identifier *	Resident Admit Date *	Resident Discharge Date	Resident First Name *	Resident Last Name *	Dose 1 vaccination date **	Dose 1 vaccine manufacturer name **	Declination date **	Declination reason	Unknown COVID-19 vaccination status Date **
<input type="checkbox"/>	TEST6	02/21/2022	TEST	CASE6		03/22/2022	Janssen COVID-19 vacci	02/25/2022	Other	02/21/2022

Note: GREEN ROW = modified data that has not yet been submitted.

Annotations: 1 (Unknown COVID-19 vaccination status Date), 2 (Declination date), 3 (Dose 1 vaccination date)

- The resident decides to get vaccinated on 3/22/2022. Add this information to existing row.
- The resident now has three statuses recorded:
 - Unknown from 2/21/2022-2/24/2022
 - Declined from 2/25/2022-3/21/2022
 - Vaccinated with Janssen beginning on 3/22/2022

What if Someone's Vaccination Status Changes Over Time?



- You should report vaccine data on all HCP eligible to work in the facility at least once per week; these are the people who regularly work in the facility on a weekly basis.

[57.149 Instructions for Completion of the Weekly Healthcare Personnel Vaccination Summary Form Non-LTCF HCP \(cdc.gov\)](#)

NHSN NATIONAL HEALTHCARE SAFETY NETWORK		February 2022
Instructions for Completion of the Weekly Healthcare Personnel COVID-19 Vaccination Cumulative Summary (57.219, REV 7) <small>This form is used to collect information on weekly COVID-19 vaccination counts among healthcare personnel (HCP) working at healthcare facilities.</small>		
Question #1 (Denominator) Number of HCP that were eligible to have worked at this healthcare facility for at least 1 day during the week of data collection	<p>HCP are defined as those who were eligible to have worked at this healthcare facility for at least 1 day during the week of data collection, regardless of clinical responsibility or patient contact [defined by CMS as individuals who work in the facility on a regular (weekly) basis].</p> <ul style="list-style-type: none">HCP eligible to have worked include employees (staff on facility payroll), licensed independent practitioners (physicians, advanced practice nurses, & physician assistants), adult students/trainees & volunteers, and other contract personnel who are scheduled to work in the facility at least one day every week. Working any part of a day is considered as working 1 day. Include HCP even if they are on temporary leave during the week of data collection. Temporary leave is defined as less than or equal to 2 weeks in duration.<ul style="list-style-type: none">Examples of temporary leave may include sick leave or vacation. In instances where temporary leave extends past 2 weeks, the healthcare worker should not be included in question #1 for the current week of data collection.Include persons who worked full-time and part-time.If HCP were eligible to have worked in two or more facilities, each facility should include such personnel in their denominator. Count HCP as individuals rather than full-time equivalents.	
Data Fields	Instructions for Completion <ul style="list-style-type: none">Data sources may include payroll or attendance records. Each person should be counted only once in the denominator.The denominator categories are mutually exclusive. The numerator data are to be reported separately for each of the denominator categories. <p><i>Note that those not yet eligible to receive COVID-19 vaccination due to age should be excluded from this count.</i></p>	

Does the Resident Identifier/Staff Identifier Need To Be the Same One That I Use for the Point of Care (PoC) Testing Results Form?



- Yes, we encourage you to use the same identifier. We plan to link the two systems in NHSN in a future release.
- Note: Each individual should have a unique resident identifier (or staff identifier).
 - Choose something truly unique to the individual.
 - For example, do NOT use the room number because someone else could occupy that room in the future.
 - One option would be using a combination of initials, birthday and room number. Ex: someone named Jane Test, born on 1/5/1980, in room 201, would have a resident identifier of JT01051980201.

Where Do I Enter a Religious Exemption?



- Count these individuals as declined to receive the vaccination.
- The Event-Level COVID-19 Vaccination Form includes a field where you may provide a reason for declination, including religious exemption.

The screenshot displays the Event-Level COVID-19 Vaccination Form interface. At the top, there are five buttons: "Add Row...", "View Reporting Summary & Submit...", "Upload CSV...", "Export CSV...", and "Export SQL...". Below these buttons is a table with the following columns: "Medical contraindication date **", "Declination date **", "Declination reason", "Unknown COVID-19 vaccination status Date **", "Additional/booster dose date **", "Additional/booster dose manufacturer name **", and "Dose". The "Declination date" column contains the value "01/20/2022". The "Declination reason" column has a dropdown menu open, showing three options: "Received official religious exemption" (highlighted), "Other", and "Unknown".

Medical contraindication date **	Declination date **	Declination reason	Unknown COVID-19 vaccination status Date **	Additional/booster dose date **	Additional/booster dose manufacturer name **	Dose
	01/20/2022	Received official religious exemption				

Do I Submit Every Time I Add Data or Just Weekly?




- You should review data and submit for all weeks affected by the updated or newly entered data at least once per week.
- Please note that if you do not click “View Reporting Summary & Submit,” these data will not be shared to the weekly COVID-19 vaccination modules.

Can I Sort the Columns on This Form? I Find It Helpful To Be Able To Sort by Last Name or by HCP Category

Yes. Click any column to sort in ascending order. Click the same column again to sort in descending order.

Add Row...
View Reporting Summary & Submit...
Upload CSV...
Export CSV...
Export SQL...

Required fields marked with * Conditionally required fields marked with **

	Resident identifier *	Resident Admit Date *	Resident Discharge Date	Resident First Name *	Resident Last Name * 	Dose 1 vaccination date **	Dose 1 vaccine manu name **
+	ABCD	04/17/2021		TEST	CASE1	02/10/2022	Moderna COVID-
+	NYCS	04/05/2021		TEST	ressurname	03/04/2022	Janssen COVID-1
+	RTS	02/01/2022	02/25/2022	Feb	Doe	02/02/2022	Pfizer-BioNTech (
+	RTS	04/01/2022		Feb	Doe	02/02/2022	Pfizer-BioNTech (
+	ABCDE	02/01/2022		Renolyds	John	02/15/2022	Pfizer-BioNTech (
+	FGHIJ	01/01/2022	03/01/2022	Adams	John-Quincy	02/01/2022	Unspecified manu
+	1776	02/01/2005	01/09/2022	Angelica	Schuyler	02/20/2022	Janssen COVID-1
+	1776	02/15/2022		Angelica	Schuyler	02/20/2022	Janssen COVID-1
+	2	04/04/2018		Bob	Smith	04/04/2022	Pfizer-BioNTech (

Why Are Some Rows Remaining Green After I Have Already Submitted the Data for All Weeks?

- If you entered or uploaded data on individuals with an end date/discharge date that is EARLIER than the first week that you can use the Event-level Form to submit data (week of 3/28/2022-4/3/2022), the rows will remain green since they haven't been submitted for any weekly reporting summaries.
- This can cause confusion, so we are modifying this in the next release so that the rows don't appear green if the end date is before 3/28/2022.


Required fields marked with * Conditionally required fields marked with **					
	Resident identifier *	Resident Admit Date *	Resident Discharge Date *	Resident First Name *	Resident Last Name *
+	1776	02/15/2022		Angelica	Schuyler
+	2	04/04/2018		Bob	Smith
+	ABCD	04/17/2021		TEST	CASE1
+	ABCDE	02/01/2022		Renolyds	John
+	NYCS	04/05/2021		TEST	CASE9
+	RTS	04/01/2022		Feb	Doe
+	1776	02/01/2005	01/09/2022	Angelica	Schuyler
+	RTS	02/01/2022	02/25/2022	Feb	Doe
+	FGHIJ	01/01/2022	03/01/2022	Adams	John-Quincy

These three individuals remain green after data have been submitted for all weeks because they were discharged before the Event-level Forms became active (3/28).

I Currently Use the Optional Excel Data Tracking Workbook. Can I Transfer This Data to the Optional Event-Level COVID-19 Vaccination Form?

Yes. Review training slides for more information:

[Weekly HCP & Resident COVID-19 Vaccination | LTCF | NHSN | CDC](https://www.cdc.gov/nhsn/ltc/weekly-covid-vac/index.html)



The screenshot shows a web browser window with the URL <https://www.cdc.gov/nhsn/ltc/weekly-covid-vac/index.html>. The page is titled "Patient Safety Component" and features a sidebar with a list of components. The "HCP & Resident COVID-19 Vaccination" component is highlighted with a purple circle and the number 1. The main content area is divided into two sections: "Protocol" and "Training". Under "Protocol", there are two links: "Weekly COVID-19 Vaccination Protocol for Healthcare Personnel" (PDF - 500 KB) and "Weekly COVID-19 Vaccination Protocol for Residents" (PDF - 400 KB). Under "Training", there is a link for "New! NHSN Event-Level COVID-19 Vaccination Forms - April 2022" (PDF - 3 MB).

Long-term Care Facility Component

LTCF COVID-19 Module

State Veterans Homes COVID-19 Tool

1 HCP & Resident COVID-19 Vaccination

MDRO & CDI

UTI

Protocol

[Weekly COVID-19 Vaccination Protocol for Healthcare Personnel](#) [PDF - 500 KB] - January 2022

[Weekly COVID-19 Vaccination Protocol for Residents](#) [PDF - 400 KB] - November 2021

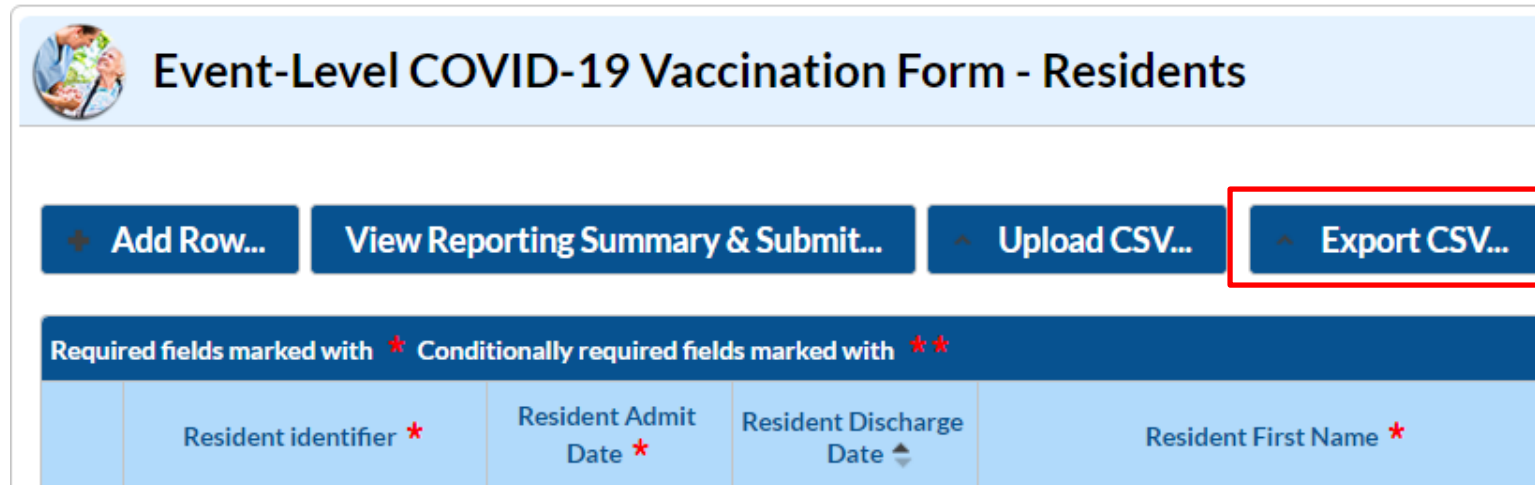
Training

2 New! NHSN Event-Level COVID-19 Vaccination Forms - April 2022

- [Slideset](#) [PDF - 3 MB]

How Can I Upload Data via CSV?

- Click “Export CSV” for a blank template.
- Ensure your data matches the formats and values in this document: [.CSV templates for Event Level COVID-19 Vaccination Forms for LTCF Residents and HCP pdf icon](#)
- When you finish adding data to the CSV file, save it and then click “Upload CSV.”
- CSV upload will overwrite records with the same identifier and start date.



Event-Level COVID-19 Vaccination Form - Residents

➕ Add Row... View Reporting Summary & Submit... ⬅ Upload CSV... ➡ **Export CSV...**

Required fields marked with * Conditionally required fields marked with **

Resident identifier *	Resident Admit Date *	Resident Discharge Date ⬆	Resident First Name *
-----------------------	-----------------------	---------------------------	-----------------------

What if I Have No Changes in My Data Since the Previous Week?



- If, during a reporting week, there are no new changes, still review and submit your data at least once per week.

View Reporting Summary & Submit...

Healthcare Personnel COVID-19 Vaccination Cumulative Summary for Long-Term Care Facilities			
TRACKING WORKSHEET			
Facility ID#:	30074		
Vaccination type:	COVID19		
Week of data collection first day (Monday):	3/28/2022 ✓		
Week of data collection last day (Sunday):	3/28/2022		
Cumulative Vaccin	4/4/2022 (Changed since submitted using the Tracking Worksheet)		Healthcare
	4/11/2022 (Never submitted using the Tracking Worksheet)		Employee
	All Core HCP	All HCP	Employees (s facility pay
1. *Number of HCP that were eligible to have worked at this healthcare facility for	1	1	1

Will the Form Be Updated To Account for 2nd Booster Doses?



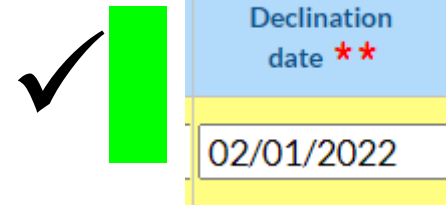
- Yes. We will be adding booster dose 2 fields to the form. More information on upcoming changes will be shared in the coming weeks.
- Note: The weekly summary form is also being updated to include a question on “number of individuals who are up to date on COVID-19 vaccines.”
 - Up to date = received booster OR received complete Pfizer/Moderna primary series in the last five months OR received Janssen dose in last two months
 - Major advantage of using Event-level Vaccination Form = the NHSN application will use the vaccination dates and classify people as up-to-date or not up-to-date for you.

For CSV Upload and Direct Data Entry, Can I List More Than One Date in a Cell?

- No, you can't list more than one date in an individual cell.
- List the earliest date that an event occurred.
- For example, if a resident declined vaccination on 2/1/2022 and again on 3/1/2022, you should enter a declined date of 2/1/2022, and you do not need to enter or update their data on 3/1/2022 because their status has not changed.

~~*Declined COVID Vaccine (Enter date of Declination)
2/1/2022, 3/1/2022~~

*Declined COVID Vaccine (Enter date of Declination)
2/1/2022



Resources

Event-Level Resources



- Event-Level COVID-19 Vaccination Form training slides:
 - <https://www.cdc.gov/nhsn/pdfs/ltc/covidvax/c19-eventlevel-508.pdf>
- Event-Level COVID-19 Vaccination Form CSV file layout:
<https://www.cdc.gov/nhsn/pdfs/ltc/covidvax/c19-event-layout-508.pdf>
- A How-To Guide:
<https://www.cdc.gov/nhsn/pdfs/ltc/covidvax/event-qrg-508.pdf>



Event-Level COVID-19 Vaccination Forms: A Step-by-step Guide

Table of Contents

Facilities will continue to submit cumulative weekly COVID-19 Vaccination data to the [Weekly COVID-19 Vaccination Modules](#). Data can be reported to these modules in three ways:

1. Directly into the data entry screens of the COVID-19 Vaccination Modules
2. through .CSV upload into the Weekly COVID-19 Vaccination Modules
3. As of March 28, 2022, facilities also have the option to use these event-level COVID-19 vaccination forms and select the “view reporting summary and submit” to submit these data to the Weekly Modules. The event-level forms are replacing the optional excel data tracking worksheets previously offered to facilities to assist with reporting to the Weekly COVID-19 Vaccination Modules.

This guide provides additional information on the third option listed above. The optional Event-Level COVID-19 Vaccination Form was developed to assist facilities with entering, logging, and tracking COVID-19 vaccine person-level data directly in NHSN. These data include counts of residents and HCP, or staff, who received any COVID-19 vaccine.

Purpose	2
Creating A New Entry	3
Example 1: Entering a new record	3
Example 2: Updating an existing record	4
Example 3: Adding a resident that was discharged and returns	4
Example 4: A resident's vaccination status changes overtime	5
Upload historic data from Excel Event-Level Vaccination Form (Single Use)	8
Export CSV Option	11
Additional Resources:	12

General Resources



Weekly HCP & Resident COVID-19 Vaccination

Long-term care facilities can track weekly COVID-19 vaccination data for residents and healthcare personnel (HCP) through NHSN.

Protocol

[Weekly COVID-19 Vaccination Protocol for Healthcare Personnel](#) [PDF – 500 KB] – January 2022

[Weekly COVID-19 Vaccination Protocol for Residents](#) [PDF – 400 KB] – November 2021

Data Collection Forms and Instructions

All Data Collection Forms are Print-only

[Weekly COVID-19 Vaccination Summary Form for Residents at LTCFs \(57.218\)](#) [PDF – 120 KB] – February 2022

◦ [Table of Instructions](#) [PDF – 300 KB]

[Weekly COVID-19 Vaccination Summary Form for Healthcare Personnel at LTCFs \(57.219\)](#) [PDF – 150 KB] – February 2022

◦ [Table of Instructions](#) [PDF – 350 KB]

[Weekly HCP & Resident COVID-19 Vaccination | LTCF | NHSN | CDC](#)

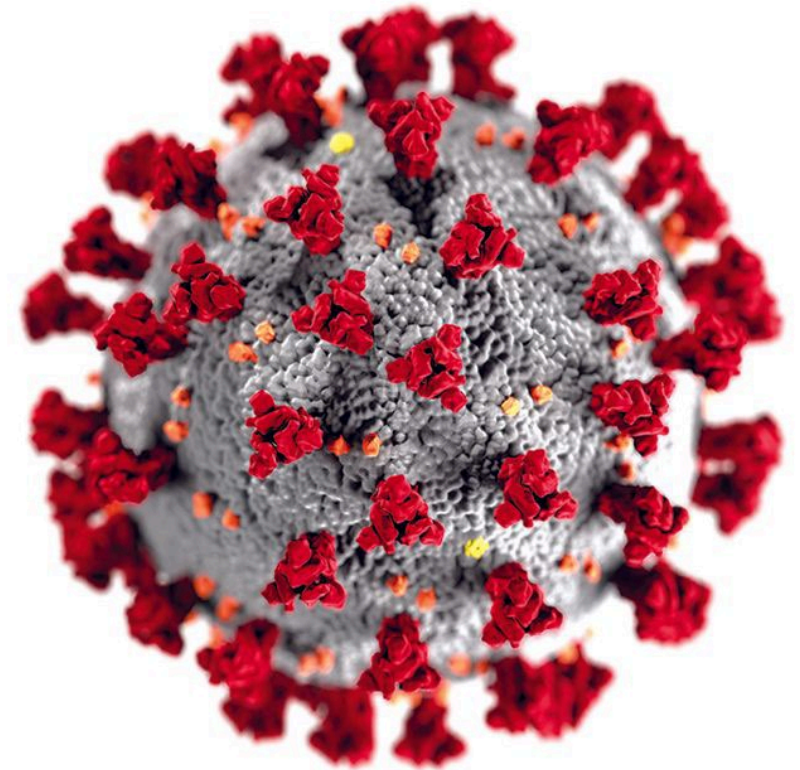
- Remember the definitions for event-level reporting are the same as those for the summary level report. Please review the table of instructions for additional guidance.

Questions or Need Help?



Email user support at: nhsn@cdc.gov

Please write “*Event-Level COVID-19 Vaccination Form*” in the subject line of the email along with your facility type



Shop Talk Shorts YouTube Channel

Instructional videos to answer technical questions related to NHSN

[Help! I am new & no one has NHSN access](#)

[How to Upgrade to Level-3 Access in NHSN](#)

[How do I find out who has access to my facility?](#)

[How do I add users and rights to our NHSN account?](#)

I got a new job. [Can I use my grid card to access my new facility?](#)

[How do I change my email address for NHSN & SAMS?](#)

[I am leaving, how do I reassign another NHSN facility administrator?](#)

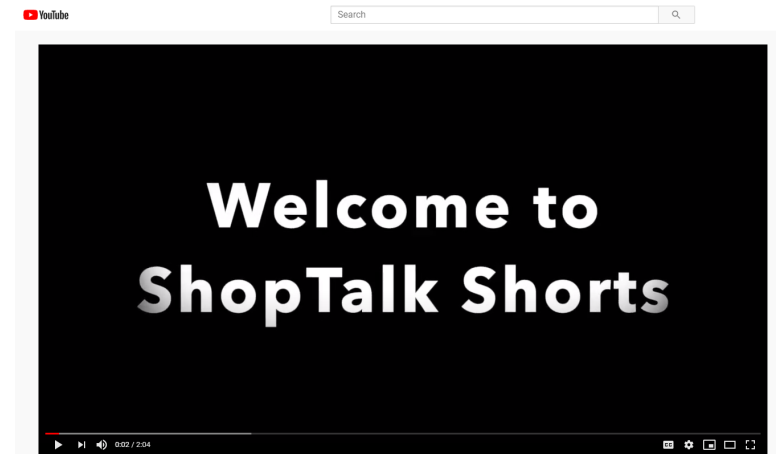
[How do I generate a report in NHSN to see my vaccine data and dates submitted?](#)

I want to receive technical assistance. [How do I join Alliant Quality's NHSN Data Group?](#)

[Generate an analysis report](#)

Bookmark our FAQ YouTube channel for easy reference to frequent NHSN issues:

<https://www.youtube.com/playlist?list=PLXWmxni-xNHspWHhLLlrqcLGlzXZPljlf>

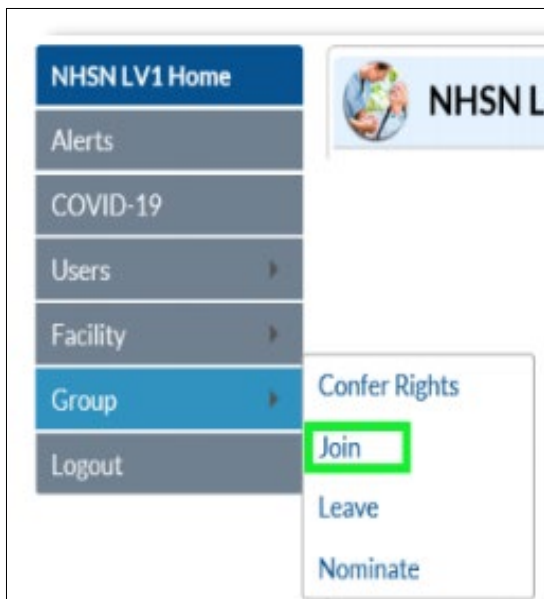


Important Notice: If Your Facility Would Like NHSN Technical Assistance

Ensure you have joined our group **before** you reach out to us.
We cannot provide assistance efficiently unless you join.
Also, when you send an email to us, be sure to copy
NHSN@cdc.gov for reference.

Need Assistance with NHSN Reporting?

Join our NHSN data group!
Group Name: Alliant Quality-LTC
Group ID: 83378
Joining Password: Alliant20!



NHSN LV1 Home

Alerts

COVID-19

Users

Facility

Group

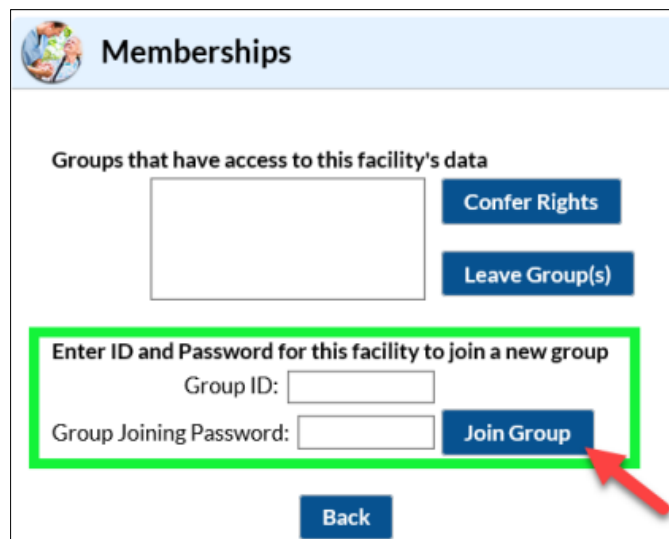
Logout

Confer Rights

Join

Leave

Nominate



Memberships

Groups that have access to this facility's data

Confer Rights

Leave Group(s)

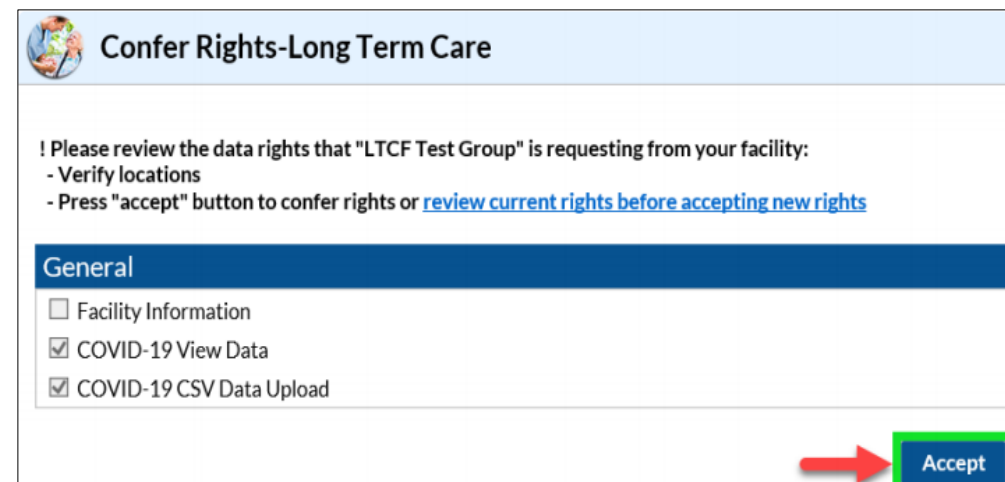
Enter ID and Password for this facility to join a new group

Group ID:

Group Joining Password:

Join Group

Back



Confer Rights-Long Term Care

Please review the data rights that "LTCF Test Group" is requesting from your facility:

- Verify locations
- Press "accept" button to confer rights or [review current rights before accepting new rights](#)

General

☐ Facility Information

☒ COVID-19 View Data

☒ COVID-19 CSV Data Upload

Accept

<https://www.youtube.com/watch?v=nCmh6oRJhoE&list=PLXWmxni-xNHspWHhLLlrqLGLzXZPljIF&index=1>

Questions?



Thank You for Your Time!

Contact the Patient Safety Team



Marilee H. Johnson, MBA, MT (ASCP)
Technical Advisor, Infection Prevention
Marilee.Johnson@AlliantHealth.org | 919.695.8331

Amy Ward, MS, BSN, RN, CIC
Infection Prevention Specialist
Amy.Ward@AlliantHealth.org | 678.527.3653



Melody Brown, MSM
Aim Manager, Patient Safety
Melody.Brown@AlliantHealth.org | 678.527.3466

Mark Your Calendar!



Shop Talk 3rd Thursdays at 2pm ET

Registration Links:

[Thursday, May 19th](#)

Visit our website for more info:

<https://quality.allianthealth.org/topic/shop-talks/>

Making Health Care Better *Together*

ALABAMA • FLORIDA • GEORGIA • KENTUCKY • LOUISIANA • NORTH CAROLINA • TENNESSEE



@AlliantQIO



Alliant Health Solutions



@AlliantQIO



AlliantQIO

This material was prepared by Alliant Health Solutions, a Quality Innovation Network – Quality Improvement Organization (QIN – QIO) and Hospital Quality Improvement Contractor (HQIC) under contract with the Centers for Medicare & Medicaid Services (CMS), an agency of the U.S. Department of Health and Human Services (HHS). Views expressed in this material do not necessarily reflect the official views or policy of CMS or HHS, and any reference to a specific product or entity herein does not constitute endorsement of that product or entity by CMS or HHS. Publication No. 12SOW-AHSQIN-QIO TO1 - NH--1871-04/19/22

 **ALLIANT**
HEALTH SOLUTIONS

QIN-QIO
Quality Innovation Network -
Quality Improvement Organizations
CENTERS FOR MEDICARE & MEDICAID SERVICES
QUALITY IMPROVEMENT & INNOVATION GROUP