

NHSN Updates

COVID-19 Vaccine Module & Pathway

Welcome!

Chat to Technical Support if you need assistance

Presented by:

Donald Chitanda, MPH, CIC

Infection Prevention Technical Advisor

December 15, 2022

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 the CMS and The Joint Commission.

Donald enjoys spending time with family and doing outdoor activities.

Contact: Donald.Chitanda@AlliantHealth.org



Amy Ward, MS, BSN, RN, CIC, FAPIC

PATIENT SAFETY MANAGER

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 healthcare-associated infections across the continuum of care.

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

Contact: Amy.Ward@AlliantHealth.org



Erica Umeakunne, MSN, MPH, APRN, CIC

INFECTION PREVENTION SPECIALIST

Erica Umeakunne is an adult-gerontology nurse practitioner and infection preventionist with experience in primary care, critical care, health care administration and public health.

She was previously the interim hospital epidemiology director for a large health care system in Atlanta and a nurse consultant in the Center for Disease Control and Prevention's (CDC) Division of Healthcare Quality Promotion. While at the CDC, she served as an infection prevention and control (IPC) subject matter expert for domestic and international IPC initiatives and emergency responses, including Ebola outbreaks and, most recently, the COVID-19 pandemic.

Erica enjoys reading, traveling, family time and outdoor activities.

Contact: Erica.Umeakunne@allianthealth.org



Paula St. Hill, MPH, A-IPC

INFECTION PREVENTION TECHNICAL ADVISOR

Paula is a doctoral student with a diverse background in public health, infection prevention, epidemiology and microbiology. She has always enjoyed public health and identifying ways to improve health outcomes, specifically those related to healthcare-associated infections.

Paula enjoys spending time with her friends and family. In her spare time, she loves watching a good horror or thriller movie.

Contact: Paula.StHill@allianthealth.org



Objectives

Agenda:

- Join our Alliant Health Solutions LTC NHSN Group
- Reporting Requirements Review
- Influenza Vaccination Reporting
- SAMS and NHSN Tips
- Questions and Answers

Make Sure You Have Joined Our NHSN Group

On the NHSN Home page:
Click **Group > Join**

Make sure you see **Alliant Health Solutions–LTC (83378)**. If not, follow the instructions on the next slide to join.

Take this important step to receive assistance from your CMS quality improvement organization.

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 ▶
- Group ▶**
- Logout

Memberships

Groups that have access to this facility's data

- Alliant Health Solutions - LTC (83378) **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

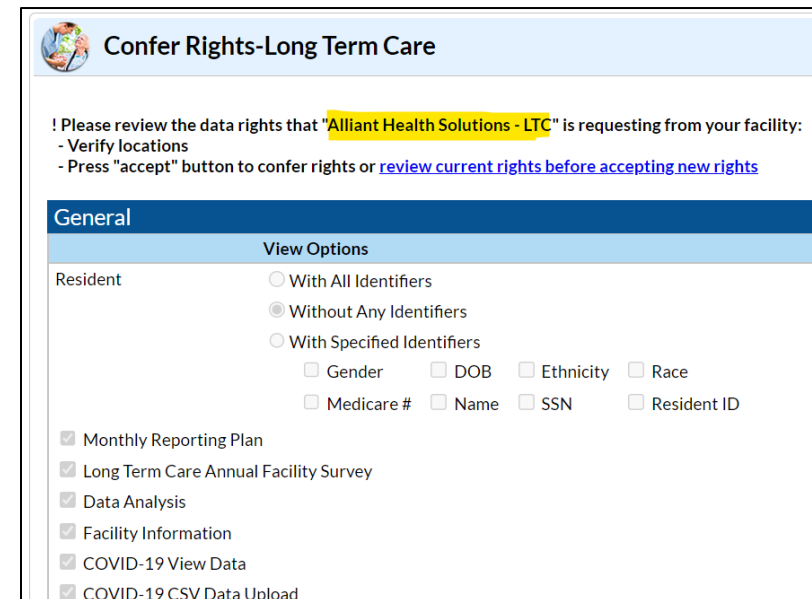
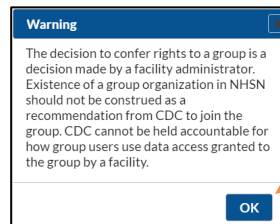
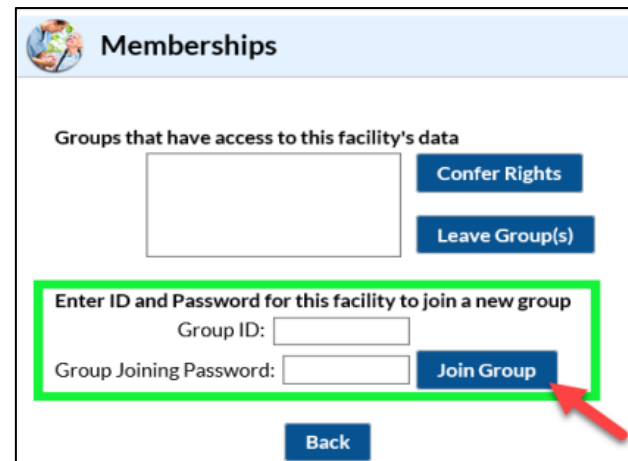
Join

Join and Confer Rights to Alliant Health Solutions

Group Name: Alliant Health Solutions-LTC

Group ID: 83378

Joining Password: Alliant20!



https://quality.allianthealth.org/wp-content/uploads/2021/01/TO1_NHSNGroups_12SOW-AHSQIN-QIO-TO1NH-20-391_508-1.pdf

Shop Talk Shorts YouTube Channel

Instructional videos to answer technical questions related to NHSN

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

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

[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?](#)

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



Shop Talk Shorts YouTube Channel

Instructional videos to answer technical questions related to NHSN

NOW AVAILABLE!

Shop Talk Shorts for Influenza Vaccination Reporting (HCP)

November 2022

Presented by:

Donald Chitanda, MPH, CIC

Infection Prevention Technical Advisor

0:03 / 6:25

ALLIANT
HEALTH SOLUTIONS

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

**Welcome to
ShopTalk Shorts**

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Reporting Requirements

Registration Steps

- **Step 1** - Enrollment Preparation
 - Review required LTCF Enrollment Guidance
 - Check system requirements (trusted websites and spam blocker settings)
- **Step 2** - Register Facility with NHSN
 - Read and agree to NHSN Rules of Behavior

After registration, you will receive two emails: “Welcome to NHSN” and an Invitation to Register with SAMS

- **Step 3** - Register with the SAMS partner portal and complete the Identity Proofing verification

After online registration, you will receive an Identity Verification Request email from SAMS with instructions to provide proof of your identity. This can be done either online or via document submission

<https://www.cdc.gov/nhsn/ltc/enroll.html>

Registration Steps

- **Step 4 - Access Approval and Account Activation**

Once your information is approved, you will receive an approval email from sams-no-reply@cdc.gov with the subject: U.S Centers for Disease Control: SAMS Partner Portal-SAMS Activity Authorization. This email will contain web links to access the SAMS Partner portal app. It will also contain instructions for additional authentication:

- Soft token (Entrust Authenticator app) on your phone, tablet or computer
- Hard token (Grid card) which will be delivered to your home address within two weeks after receiving the SAMS approval email.

- **Step 5 - Complete NHSN Enrollment**

- Login to SAMS (Multi-factor Login option) > Select NHSN Enrollment to complete the enrollment process
- While in SAMS, select the Long-term Care Facility Component and review the “Agreement to Participate and Consent”. Check the box to Accept then submit.

Consent must be accepted within 60 days or the facility will be withdrawn

- **Final Step - Complete required NHSN Set-Up:** <https://www.cdc.gov/nhsn/ltc/setup.html>

<https://www.cdc.gov/nhsn/ltc/enroll.html>

Healthcare Settings	COVID-19 Reporting Data Fields	CMS Reporting Deadlines and Frequency
<p><i>CMS-certified Long-Term Care Facilities (Skilled Nursing Facilities (SNFs) and/or Nursing Facilities (NFs))</i></p>	(i) Suspected and confirmed COVID-19 infections among residents and staff, including residents previously treated for COVID-19	<p><u>Deadlines:</u> May 17, 2020: facilities must submit first set of data. CMS will provide facilities with an initial two-week grace period to begin reporting cases in the NHSN system (which ends at 11:59 p.m. on May 24, 2020). Facilities that fail to begin reporting after the third week (by 11:59 p.m. on May 31st) will receive a warning letter reminding them to begin reporting the required information to CDC. June 13, 2021: Facilities must begin including vaccination and therapeutic data reporting in NHSN submissions by 11:59 p.m.</p> <p><u>Frequency:</u> Facilities must continue submitting their COVID-19 data to NHSN at least weekly, but no later than Sunday at 11:59 p.m., each week. To be compliant with the new reporting requirements, facilities must submit the data through the NHSN reporting system at least once every seven days. Facilities may choose to submit multiple times a week. CMS is not prescribing which day of the week the data must be submitted, although reporting should remain consistent with data being submitted on the same day(s) each week. The collection period should also remain consistent (e.g., Monday through Sunday). Each Monday, CMS will review the data submitted to assess if each facility submitted data at least once in the previous seven days. The data pulled each Monday will also be used to update the data that is publicly reported.</p>
	(ii) Total deaths and COVID-19 deaths among residents and staff	
	(iii) Personal protective equipment and hand hygiene supplies in the facility	
	(iv) Ventilator capacity and supplies in the facility	
	(v) Resident beds and census	
	(vi) Access to COVID-19 testing while the resident is in the facility	
	(vii) Staffing shortages	
	(viii) Vaccination data for residents and staff and the use of therapeutics for residents <ul style="list-style-type: none"> (a) total numbers of residents and staff vaccinated, (b) therapeutics administered to residents for treatment of COVID-19 	
	(ix) Other information specified by the Secretary	

Pathway Data Reporting

- 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 ▸

COVID-19

Click a cell to begin entering data on the day for which counts are reported.

27 November 2022 - 07 January 2023

Record Complete Record Incomplete




Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
27	28	29	30	Dec 01	02	03
04	05	06	07	08	09	10
11	12	13	14	15	16	17

Pathway Data Reporting

Add COVID-19 Data

Date for which counts are reported: 12/02/2022 Facility CCN: Facility Type: LTC-SKILLNURS

Resident Impact and Facility Capacity Staff and Personnel Impact Therapeutics

Date Created:  ①  ②  ③

If the count is zero, a "0" must be entered as the response. A blank response is equivalent to missing data. NON-count questions should be answered one calendar day during the reporting week.

Facility Capacity

<input type="text" value="250"/>	ALL BEDS
<input type="text"/>	*CURRENT CENSUS: Total number of beds that are occupied on the reporting calendar day

Resident Impact for COVID-19 (SARS-CoV-2)

<input type="text"/>	*ADMISSIONS: Number of residents admitted or readmitted from another facility who were previously diagnosed with COVID-19 and continue to require transmission-based precautions. <i>Excludes recovered residents.</i>
<input type="text"/>	* POSITIVE TESTS: Enter the Number of residents with a newly positive SARS-CoV-2 viral test result (for example, a positive SARS-CoV-2 antigen test and/or SARS-CoV-2 NAAT (PCR)). Note: Do not include residents who have a positive SARS-CoV-2 antigen test, but a negative SARS-CoV-2 NAAT (PCR). Only include residents newly positive since the most recent date data were collected for NHSN reporting.

Pathway Data Reporting

Resident Impact and Facility Capacity

Vaccination Status of Residents with a Newly Confirmed SARS-CoV-2 Viral Test Result

PRIMARY SERIES: Based on the number of residents with a newly positive SARS-CoV-2 viral test result identified above.	Not Vaccinated: Include residents who have not been vaccinated with a COVID-19 vaccine OR residents whose first dose was administered 13 days or less before the specimen collection date	<input type="text"/>
	Partial Vaccination: Include residents who have received Only 1-dose of a two-dose primary vaccine series.	<input type="text"/>
	Complete Primary Vaccination Series: Include residents who have received Dose 1 and ~ Dose 2 of a two-dose primary vaccine series OR 1 Dose of the Janssen COVID-19 Vaccine. ~ second dose received 14 days or more before the specimen collection date; otherwise, count as only dose 1.	<input type="text"/>
ADDITIONAL OR BOOSTER DOSES	Additional or Booster Vaccination: Include newly positive residents who have received any additional dose(s) or booster dose(s) of COVID-19 vaccine (any manufacturer) AND 14 days or more have passed before the specimen collection date. <i>Include additional or booster dose received 14 days or more before the specimen collection date; otherwise, count as only primary series.</i>	<input type="text"/>
Residents who received at least one or more booster dose of COVID-19 vaccine: Based on the number of residents with a newly positive SARS-CoV-2 viral test result identified above.		
BOOSTER DOSES	One Booster: Include residents who have received only one booster dose of COVID-19 vaccine (any manufacturer) AND 14 days or more have passed before the specimen collection date.	<input type="text"/>
	Two or More Boosters: Include residents who have received two or more booster doses of COVID-19 vaccine since March 29, 2022 AND 14 days or more have passed before the specimen collection date.	<input type="text"/>
Up to Date Vaccination Status		
Up to Date: Include residents who are up to date with COVID-19 vaccines 14 days or more before the specimen collection date.		<input type="text"/>
Note: Please review the current definition of up to date: https://www.cdc.gov/nhsn/pdfs/hps/covidvax/UpToDateGuidance-May2022-508.pdf		

Pathway Data Reporting

Resident Impact and Facility Capacity

Resident Deaths

***TOTAL DEATHS:** Number of residents who have died for *any* reason in the facility or another location.

Include only the number of new deaths since the most recent date data were collected for NHSN reporting.

COVID-19 DEATHS: Based on the number reported for *Total Deaths*, indicate the number of residents who died from COVID-19 or related complications, either in the facility or another location.

Resident Impact for Non-COVID-19 (SARS-CoV-2) Respiratory Illness

***INFLUENZA:** Number of Residents with new influenza (flu).

SARS-CoV-2 TESTING

***TESTING AVAILABILITY:** Does the LTCF have the ability to perform or to obtain resources for performing SARS-CoV-2 viral testing (NAAT [PCR] or antigen) on all residents, staff and facility personnel if needed?

Supplies and PPE Shortages

***Urgent Need:** Indicate if facility will no longer have any PPE supply items in 7 days

Save

Cancel

Pathway Data Reporting

Add COVID-19 Data

Date for which counts are reported: 12/02/2022 Facility CCN: Facility Type: LTC-SKILLNURS

Resident Impact and Facility Capacity **Staff and Personnel Impact** Therapeutics

Date Created:

Counts should be reported on the correct calendar day and include only new counts for the calendar day (specifically, since counts were last collected). If the count is zero, a "0" must be entered as the response. A blank response is equivalent to missing data. **NON**-count questions should be answered one calendar day during the reporting week.

Staff and Personnel Impact

* **POSITIVE TESTS:** Enter the number of staff and facility personnel with a **newly** positive SARS-CoV-2 viral test result (for example, a positive SARS-CoV-2 antigen test and/or SARS-CoV-2 NAAT (PCR)).
Note: Exclude staff and facility personnel who have a positive SARS-CoV-2 antigen test, but a negative SARS-CoV-2 NAAT (PCR).
Include only staff and facility personnel newly positive since the most recent date data were collected for NHSN reporting

* **COVID-19 DEATHS:** Number of staff and facility personnel with COVID-19 who died.

Staff and Personnel Impact for Non-COVID-19 (SARS-CoV-2) Respiratory Illness

* **INFLUENZA:** Number of staff and facility personnel with a new influenza (flu).

Staff and Personnel Shortages

* Does your organization have a shortage of staff and/or personnel?



Pathway Data Reporting

Add COVID-19 Data

Date for which counts are reported: 12/02/2022

Facility CCN:

Facility Type: LTC-SKILLNURS

Resident Impact and Facility Capacity

Staff and Personnel Impact

Therapeutics

Date Created:

Report total counts for the below questions only one calendar day during the reporting week and include only new counts since the previously reported counts. If the count is zero, a "0" must be entered as the response. A blank response is equivalent to missing data.

For each therapeutic listed, enter number of residents who received the therapeutic at this facility or elsewhere during the reporting week:

Did not administer any Therapeutics

Therapeutic	How many residents were treated from stock stored at this facility?	How many residents were treated from stock that was stored at another facility, such as an infusion center?
Monoclonal Antibody Therapy		
Casirivimab/imdevimab (Regeneron)	* <input type="text"/>	* <input type="text"/>
Bamlanivimab/etesevimab (Lilly)	* <input type="text"/>	* <input type="text"/>
Sotrovimab (GlaxoSmithKline)	* <input type="text"/>	* <input type="text"/>
Evusheld (AstraZeneca)	* <input type="text"/>	* <input type="text"/>
Bebtelovimab (Lilly)	* <input type="text"/>	* <input type="text"/>
Antiviral Therapy		
Paxlovid (Pfizer)	* <input type="text"/>	* <input type="text"/>
Molnupiravir (Merck)	* <input type="text"/>	* <input type="text"/>

Save

Pathway Data Reporting

COVID-19 ▸ Dashboard
Pathway Data Reporting
Vaccination Summary
Import/Export
Surveys ▸ POC Test Result Reporting
Analysis ▸ COVID-19 Vaccination - HCW
Users ▸ COVID-19 Vaccination - Residents
Facility ▸ Event-Level COVID-19 Vaccination Form - HCW
Group ▸ Event-Level COVID-19 Vaccination Form - Residents



COVID-19

Click a cell to begin entering data on the day for which counts are reported.

27 November 2022 - 07 January 2023

Record Complete Record Incomplete

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
27	28	29	30	Dec 01	02 Resident Staff Therapeutics	03
04	05	06	07	08	09	10
11	12	13	14	15	16	17



02

- Resident
- Staff
- Therapeutics

Healthcare Settings	COVID-19 Reporting Data Fields	CMS Reporting Deadlines and Frequency
<p>CMS-certified Long-Term Care Facilities (Skilled Nursing Facilities (SNFs) and/or Nursing Facilities (NFs))</p>	<p>(i) Suspected and confirmed COVID-19 infections among residents and staff, including residents previously treated for COVID-19</p>	<p><u>Deadlines:</u> May 17, 2020: facilities must submit first set of data. CMS will provide facilities with an initial two-week grace period to begin reporting cases in the NHSN system (which ends at 11:59 p.m. on May 24, 2020). Facilities that fail to begin reporting after the third week (by 11:59 p.m. on May 31st) will receive a warning letter reminding them to begin reporting the required information to CDC.</p>
	<p>(ii) Total deaths and COVID-19 deaths among residents and staff</p>	<p>June 13, 2021: Facilities must begin including vaccination and therapeutic data reporting in NHSN submissions by 11:59 p.m.</p>
	<p>(iii) Personal protective equipment and hand hygiene supplies in the facility</p>	<p><u>Frequency:</u> Facilities must continue submitting their COVID-19 data to NHSN at least weekly, but no later than Sunday at 11:59 p.m., each week. To be compliant with the new reporting requirements, facilities must submit the data through the NHSN reporting system at least once every seven days. Facilities may choose to submit multiple times a week. CMS is not prescribing which day of the week the data must be submitted, although reporting should remain consistent with data being submitted on the same day(s) each week. The collection period should also remain consistent (e.g., Monday through Sunday). Each Monday, CMS will review the data submitted to assess if each facility submitted data at least once in the previous seven days. The data pulled each Monday will also be used to update the data that is publicly reported.</p>
	<p>(iv) Ventilator capacity and supplies in the facility</p>	<p><u>Frequency:</u> Facilities must continue submitting their COVID-19 data to NHSN at least weekly, but no later than Sunday at 11:59 p.m., each week. To be compliant with the new reporting requirements, facilities must submit the data through the NHSN reporting system at least once every seven days. Facilities may choose to submit multiple times a week. CMS is not prescribing which day of the week the data must be submitted, although reporting should remain consistent with data being submitted on the same day(s) each week. The collection period should also remain consistent (e.g., Monday through Sunday). Each Monday, CMS will review the data submitted to assess if each facility submitted data at least once in the previous seven days. The data pulled each Monday will also be used to update the data that is publicly reported.</p>
	<p>(v) Resident beds and census</p>	<p><u>Frequency:</u> Facilities must continue submitting their COVID-19 data to NHSN at least weekly, but no later than Sunday at 11:59 p.m., each week. To be compliant with the new reporting requirements, facilities must submit the data through the NHSN reporting system at least once every seven days. Facilities may choose to submit multiple times a week. CMS is not prescribing which day of the week the data must be submitted, although reporting should remain consistent with data being submitted on the same day(s) each week. The collection period should also remain consistent (e.g., Monday through Sunday). Each Monday, CMS will review the data submitted to assess if each facility submitted data at least once in the previous seven days. The data pulled each Monday will also be used to update the data that is publicly reported.</p>
	<p>(vi) Access to COVID-19 testing while the resident is in the facility</p>	<p><u>Frequency:</u> Facilities must continue submitting their COVID-19 data to NHSN at least weekly, but no later than Sunday at 11:59 p.m., each week. To be compliant with the new reporting requirements, facilities must submit the data through the NHSN reporting system at least once every seven days. Facilities may choose to submit multiple times a week. CMS is not prescribing which day of the week the data must be submitted, although reporting should remain consistent with data being submitted on the same day(s) each week. The collection period should also remain consistent (e.g., Monday through Sunday). Each Monday, CMS will review the data submitted to assess if each facility submitted data at least once in the previous seven days. The data pulled each Monday will also be used to update the data that is publicly reported.</p>
	<p>(vii) Staffing shortages</p>	<p><u>Frequency:</u> Facilities must continue submitting their COVID-19 data to NHSN at least weekly, but no later than Sunday at 11:59 p.m., each week. To be compliant with the new reporting requirements, facilities must submit the data through the NHSN reporting system at least once every seven days. Facilities may choose to submit multiple times a week. CMS is not prescribing which day of the week the data must be submitted, although reporting should remain consistent with data being submitted on the same day(s) each week. The collection period should also remain consistent (e.g., Monday through Sunday). Each Monday, CMS will review the data submitted to assess if each facility submitted data at least once in the previous seven days. The data pulled each Monday will also be used to update the data that is publicly reported.</p>
	<p>(viii) Vaccination data for residents and staff and the use of therapeutics for residents</p> <ul style="list-style-type: none"> (a) total numbers of residents and staff vaccinated, (b) therapeutics administered to residents for treatment of COVID-19 	<p><u>Frequency:</u> Facilities must continue submitting their COVID-19 data to NHSN at least weekly, but no later than Sunday at 11:59 p.m., each week. To be compliant with the new reporting requirements, facilities must submit the data through the NHSN reporting system at least once every seven days. Facilities may choose to submit multiple times a week. CMS is not prescribing which day of the week the data must be submitted, although reporting should remain consistent with data being submitted on the same day(s) each week. The collection period should also remain consistent (e.g., Monday through Sunday). Each Monday, CMS will review the data submitted to assess if each facility submitted data at least once in the previous seven days. The data pulled each Monday will also be used to update the data that is publicly reported.</p>
	<p>(ix) Other information specified by the Secretary</p>	

Vaccination Data Reporting

3 Options to Submit Weekly Vaccination Data

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 the person-level (event-level) COVID-19 vaccination forms and select the “view reporting summary and submit” button to submit these data to the Weekly Modules.

Vaccination Data Reporting - Direct Entry

A screenshot of a navigation menu. The 'COVID-19' item is highlighted with a red box. Below it, 'COVID-19 Vaccination - Residents' is also highlighted with a red box. An orange arrow points from this menu item to the right-hand screenshot.

- COVID-19
- Vaccination Summary
- Import/Export
- Surveys
- Analysis
- Users
- Facility
- Group

- 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

A screenshot of the 'Add Vaccine Data' form. The 'COVID-19 Vaccine: Residents' tab is selected and highlighted with a red box. The form title is 'Resident COVID-19 Cumulative Vaccination Summary for Long-Term Care Facilities'. It contains fields for Date Created, Facility ID (59979), Vaccination type (COVID19), Facility CCN #, Week of Data Collection (12/12/2022 - 12/18/2022), and Date Last Modified. Below this is a section for 'Cumulative Vaccination Coverage' with a note and a list of questions with input boxes.

Add Vaccine Data

COVID-19 Vaccine: HCW | **COVID-19 Vaccine: Residents**

Resident COVID-19 Cumulative Vaccination Summary for Long-Term Care Facilities

Date Created:

*Facility ID: 59979 *Vaccination type: COVID19 Facility CCN #:

*Week of Data Collection: 12/12/2022 - 12/18/2022 *Date Last Modified:

Cumulative Vaccination Coverage

Note: Facilities submit Weekly COVID-19 Vaccination Cumulative Summary data by completing the questions on this form. As of March 28th, 2022 facilities also have the option to enter data using the event-level COVID-19 vaccination form and select the "view reporting summary and submit" button? to submit these data. Using the event-level form is recommended to ensure that individuals who are up to date with COVID-19 vaccination are categorized appropriately according to their vaccination dates. Learn more here: [link to QRG](#)

- * Number of residents staying in this facility for at least 1 day during the week of data collection
- * **Cumulative number** of residents in Question #1 who have received primary series COVID-19 vaccine(s) at this facility or elsewhere since December 2020:
 - * Only 1 dose of a two-dose **Primary** COVID-19 vaccine series
 - * Any completed **Primary** COVID-19 vaccine series
- * **Cumulative number** of residents in Question #1 with other conditions:
 - * Medical contraindication to COVID-19 vaccine
 - * Offered but declined COVID-19 vaccine
 - * Unknown COVID-19 vaccination status
- * **Cumulative number** of residents with complete primary series vaccine in Question #2 who have received **any booster(s) or additional dose(s)** of COVID-19 vaccine since August 2021
 - * **Cumulative number** of residents in Question #4 who have received **only one** booster dose of COVID-19 vaccine since August 2021
 - * **Cumulative number** of residents in Question #4 who received **two or more** booster doses of COVID-19 vaccine, and the most recent dose was received since March 29, 2022

Question 5 asks about individuals who are **up to date**. Please review the current definition of **up to date**.

5. * **Cumulative** of residents in question #2 who are **up to date** with COVID-19 vaccines

Address Events following COVID-19 Vaccine(s)

Add Vaccine Data

2. * **Cumulative** number of residents in Question #1 who have received primary series COVID-19 vaccine(s) at this facility or elsewhere since December 2020:

2.1 * Only 1 dose of a two-dose **Primary** COVID-19 vaccine series

2.2 * Any completed **Primary** 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 with complete primary series vaccine in Question #2 who have received **any booster(s) or additional dose(s)** of COVID-19 vaccine since August 2021

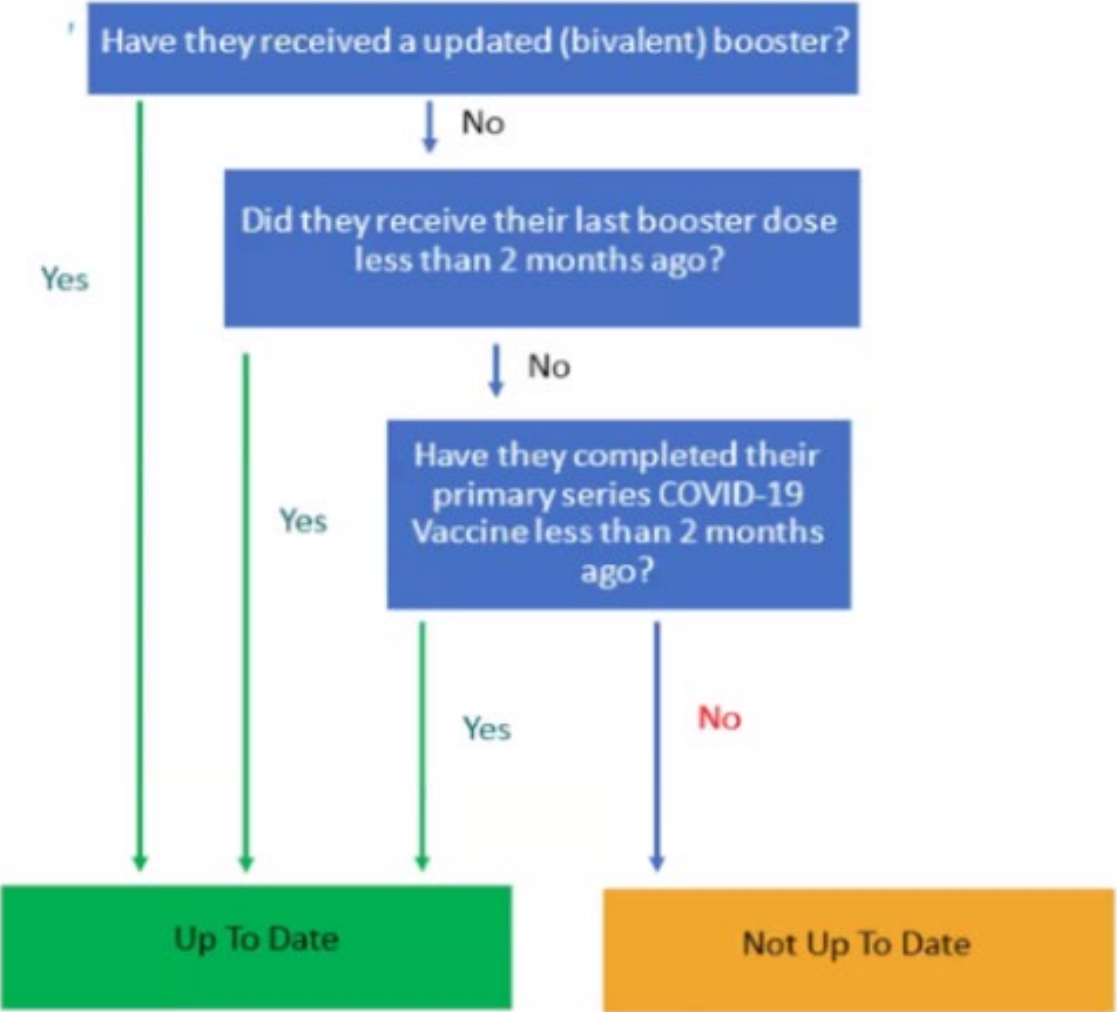
4.1 * **Cumulative** number of residents in Question #4 who have received **only one booster dose** of COVID-19 vaccine since August 2021

4.2 * **Cumulative** number of residents in Question #4 who received **two or more booster doses** of COVID-19 vaccine, and the most recent dose was received since March 29, 2022

Question 5 asks about individuals who are *up to date*. Please review the current definition of [up to date](#).

5. * **Cumulative** of residents in question #2 who are *up to date* with COVID-19 vaccines

Flow Chart: Up to Date with COVID-19 Vaccines





Vaccination Summary Data



Click a cell to begin entering data for the week which counts are reported.

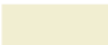
Reporting of medical events or health problems that occur after vaccination (possible side effects) is encouraged, <https://vaers.hhs.gov/reportevent.html>.



16 May 2022 - 26 June 2022



Record Complete



Record Incomplete

Weekly Vaccination Calendar

05/16/2022 (Monday) - 05/22/2022 (Sunday)



COVID-19: HCW



COVID-19: Residents

05/23/2022 (Monday) - 05/29/2022 (Sunday)



COVID-19: HCW



COVID-19: Residents

Vaccination Data Reporting - Person Level (Event Level)

Who can Use the Person-Level (Event-Level) Forms

Must be SAMS Level 3 user

- To request level 3 access, please contact NHSN@cdc.gov and place in the subject line: SAMS Level 3 Access

NHSN Reporting: LTCF Component

National Healthcare Safety Network System

- NHSN Reporting *
- NHSN Enrollment *

NHSN Long Term Care Reporting

- NHSN LTC Reporting
- NHSN LTC Enrollment

Navigate to COVID-19 tab

Select Event-Level COVID-19

Vaccination Form - HCW or Event-Level COVID-19 Vaccination Form - Residents

The screenshot shows the NHSN - National Healthcare Safety Network interface. The top navigation bar includes 'NHSN Home', 'Alerts', 'Dashboard', 'Reporting Plan', 'Resident', 'Event', 'Summary Data', 'COVID-19', 'Vaccination Summary', 'Import/Export', 'Surveys', 'Analysis', 'Users', 'Facility', 'Group', and 'Logout'. The 'COVID-19' menu is expanded, showing options: 'Dashboard', 'Pathway Data Reporting', 'POC Test Result Reporting', 'COVID-19 Vaccination - HCW', 'COVID-19 Vaccination - Residents', 'Event-Level COVID-19 Vaccination Form - HCW', and 'Event-Level COVID-19 Vaccination Form - Residents'. The 'Event-Level COVID-19 Vaccination Form - HCW' option is highlighted. Below the menu, a card displays '71 Missing Summary Data'.

Vaccination Data Reporting - Person Level (Event Level)

Administrators should Review User's Rights

- If users will submit person-level COVID-19 Vaccination data, the user must have 'Staff/Visitor- Add, Edit, Delete' and 'Staff/Visitor- view' rights as shown below:

Rights	Long Term Care Facility
Administrator	<input type="checkbox"/>
All Rights	<input checked="" type="checkbox"/>
Analyze Data	<input checked="" type="checkbox"/>
Add, Edit, Delete	<input checked="" type="checkbox"/>
View Data	<input checked="" type="checkbox"/>
Staff/Visitor - Add, Edit, Delete	<input checked="" type="checkbox"/>
Staff/Visitor - View	<input checked="" type="checkbox"/>

Vaccination Data Reporting - Person Level (Event Level)

COVID-19	Dashboard
Vaccination Summary	Pathway Data Reporting
Import/Export	POC Test Result Reporting
Surveys	COVID-19 Vaccination - HCW
Analysis	COVID-19 Vaccination - Residents
Users	Event-Level COVID-19 Vaccination Form - HCW
Facility	Event-Level COVID-19 Vaccination Form - Residents
Group	

Event-Level COVID-19 Vaccination Form - Residents

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

2 Find...

Resident identifier * Resident First Name * Resident Last Name * Gender ** Date of Birth ** Ethnicity **

Find. If the individual you are adding already has a record on the Resident screen (because they were previously entered on another event-level form such as POC, COVID-19 Event, LabID, or UTI), please use this feature to select this individual. This will auto-fill the following fields: identifier, first name, last name, gender, date of birth, ethnicity, and race. If the individual does not already have a record entered, a new record will be created on the Resident screen when you enter these fields using the +Add Row button and click save row.

Save Row

Required fields marked with *

Duplicate Row

+ 10153					
+ 3638					
+ 3639					
+ 3639					
+					

Resident Last Name * Gender ** Date of Birth ** Ethnicity **

- Click + **Add Row** button
- A yellow section at the top of the form will appear to enter this individual's data
- Start by selecting the "find" option to search for the person ID, or start typing in the ID if you already know it

Vaccination Data Reporting - Person Level (Event Level)

How to enter vaccination information for a new individual (cont.)

The screenshot shows a software interface with a table of individuals and a pop-up window for selecting an individual. The table has columns for FacilityID, ID, Last Name, First Name, Middle Name, and Date of Birth. The pop-up window has a 'Resident identifier' field and a 'Find...' button. The 'Resident identifier' field is highlighted in yellow. The 'Find...' button is also highlighted in yellow. The table shows a list of individuals, with the row for ID 2238, Last Name FREEMAN, First Name JUDY, and Date of Birth 07/13/1962 highlighted in yellow. The 'Select' button in the pop-up window is highlighted with a red box.

FacilityID	ID	Last Name	First Name	Middle Name	Date of Birth
14701	DFDGDG	DFGD	GDGDFD		01/03/1950
14701	NEWRECORI	FGDF	DSDG		01/01/1950
14701	NEWRECORI	FGDF	DSDG		01/01/1950
14701	2238	FREEMAN	JUDY		07/13/1962
14701	PULL7410	JACKSON	JUNE		10/15/1977
14701	SUN258	LOWS	JIM		08/15/1982
14701	80005522	MASTERSON	ERICA		01/01/1950
14701	99805821	STRANGE	STEPHEN		01/01/1950
14701	10000000	WILLIAMS	SIMON		01/01/1950

- If the person ID **exists** within the NHSN list, select the individual in the pop-up window and click **select**
 - Demographic information will be filled in for you
- If the person is **not** in the NHSN list, click **cancel**
 - You will need to enter a new unique Identifier and demographic information

Vaccination Data Reporting - Person Level (Event Level)

How to enter vaccination information for a new individual continued

- In this example, this resident was already on the NHSN list, so Identifier and demographics are filled in
- Enter vaccination information including dose dates and manufacturers (or date of declining or medical contraindication), and click **Save Row**

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


Resident identifier *	Resident First Name *	Resident Last Name *	Gender **	Date of Birth **	Ethnicity **	Race *
2238 <input type="button" value="Find..."/>	JUDY	FREEMAN	Female ▾	07/13/1962	Hispanic or Latino	American Indian/Alas

Age	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 **	Declination date **	Declination reason	Unknown COVID-19 vaccination status Date **	Additional/booster dose date **	Additional/booster dose type **	Additional/booster dose manufacturer name **
	11/02/2021	Moderna COVID-19 vaccin	11/23/2021	Moderna COVID-19 vaccin						07/03/2022	Booster Dose ▾	Pfizer-BioNTech COVID-15

Vaccination Data Reporting - Person Level (Event Level)

How to submit data to the weekly reporting form

- When all rows of data are entered and ready for submission, click the View Reporting Summary & Submit button

 Event-Level COVID-19 Vaccination Form - Residents

1 Add Row... **View Reporting Summary & Submit...** Upload CSV... Export CSV...

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

Duplicate Row	Resident identifier *	Resident First Name *	Resident Last Name *	Gender **	Date of Birth **
	<input type="text"/> x	<input type="text"/> x	<input type="text"/> x	<input type="text"/> x	<input type="text"/> x
+	10153	TESTFIRST	TESTLAST	Male	09/01/1986
+	3638	BUTL	JAY	Male	10/03/1943
+	3639	BUTLER	JAY	Female	10/03/1943
+	3639	BUTLER	JAY	Female	10/03/1943
+	3878EEE	BOOTS	EFF	Female	09/17/1948

Vaccination Data Reporting - Person Level (Event Level)

NHSN Home

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

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 <https://vaers.hhs.gov/reportevent.html>.

◀ 📅 ▶ 25 July 2022 - 04 September 2022

Record Complete Record Incomplete

Weekly Vaccination Calendar

07/25/2022 (Monday) - 07/31/2022 (Sunday)
☑ COVID-19: HCW
☑ COVID-19: Residents
08/01/2022 (Monday) - 08/07/2022 (Sunday)
☑ COVID-19: HCW
☑ COVID-19: Residents

CMS Warning Letters

DEPARTMENT OF HEALTH & HUMAN SERVICES
Centers for Medicare & Medicaid Services
Survey & Operations Group



CMS Certification Number:

May 23, 2021
Sent Via CASPER Shared Folder

Dear Administrator:

SUBJECT: WARNING NOTICE: NHSN REPORTING

2019 NOVEL CORONA VIRUS (COVID-19) REPORTING REQUIREMENTS

The Centers for Medicare & Medicaid Services (CMS) is committed to taking critical steps to ensure America's health care facilities are prepared to respond to the threat of disease caused by COVID-19 Public Health Emergency (PHE). Per memorandums QSO-20-29-NH and QSO-21-19-NH, and in accordance with 42 CFR § 483.80(g)(1)-(2), nursing homes are required to report information on COVID-19, and resident and staff vaccination status to the Centers for Disease Control and Prevention (CDC) through the CDC's National Health Safety Network (NHSN) reporting system to ensure appropriate tracking, response, and mitigation of COVID-19 in nursing homes.

To be compliant with the requirement, facilities must submit the data through the NHSN system at least once every seven days. This includes reporting information to the Surveillance Reporting and COVID-19 Vaccination Pathways within the NHSN LTCF COVID-19 Module.

CMS Warning Letters

DEPARTMENT OF HEALTH AND HUMAN SERVICES CENTERS FOR MEDICARE & MEDICAID SERVICES			PRINTED: _____ FORM APPROVED OMB NO. _____	
STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED
NAME OF PROVIDER OR SUPPLIER			STREET ADDRESS, CITY, STATE, ZIP CODE	
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
F884	<p>Continued From page 1</p> <p>This REQUIREMENT is not met as evidenced by:</p> <p>Based on record review, the facility failed to report complete information about COVID-19 to the Centers for Disease Control and Prevention's (CDC) National Healthcare Safety Network (NHSN) during a seven-day period that reporting was required by regulation.</p> <p>The CDC submitted data from the NHSN to the Centers for Medicare and Medicaid Services (CMS). Based on review of that data, CMS determined that between 05/16/2022 and 05/22/2022, the facility did not report complete information to NHSN about COVID-19 in the standardized format and frequency as specified by CMS and the CDC. Specifically: the facility failed to submit data for the Staff and Personnel Impact Pathway; the facility failed to submit data for the Resident Impact and Facility Capacity Pathway; the facility failed to submit data for the Healthcare Personnel Vaccination Summary; the facility failed to submit data for the Residents Vaccination Summary. This failure to report has the potential to cause more than minimal harm to all residents residing in the facility.</p>	F884		

Influenza Vaccination Reporting

Influenza Vaccination Reporting

Notes on Reporting Requirements

- Facilities are only required to report data once at the conclusion of reporting period (October 1 through March 31)
- HCP who are physically present in the facility for at least 1 working day between October 1 through March 31 are included in the denominator
- HCP in the denominator population who received an influenza vaccination during the time from when the vaccine became available (e.g., August) through March 31 of the following year are included in that category numerator

Influenza Vaccination Reporting

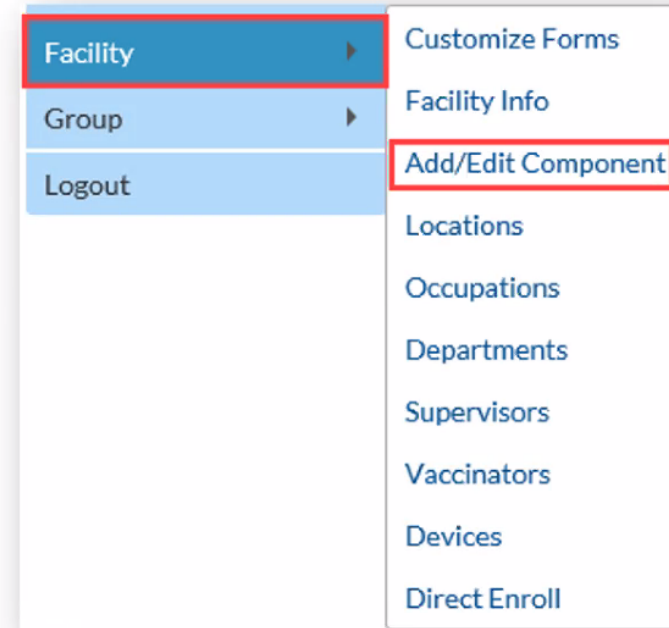
Key Things to Remember:

- Deadline to enter data is May 15
 - Reporting period- Oct to March 31
- Reporting influenza vaccination data via weekly LTCF component **WILL NOT** fulfill the CMS requirement
- Reach out to SNFQualityQuestions@cms.hhs.gov if unsure if your facility is required to report
- There is currently no requirement (CMS) to report annual influenza vaccination for residents. Only Staff/HCP

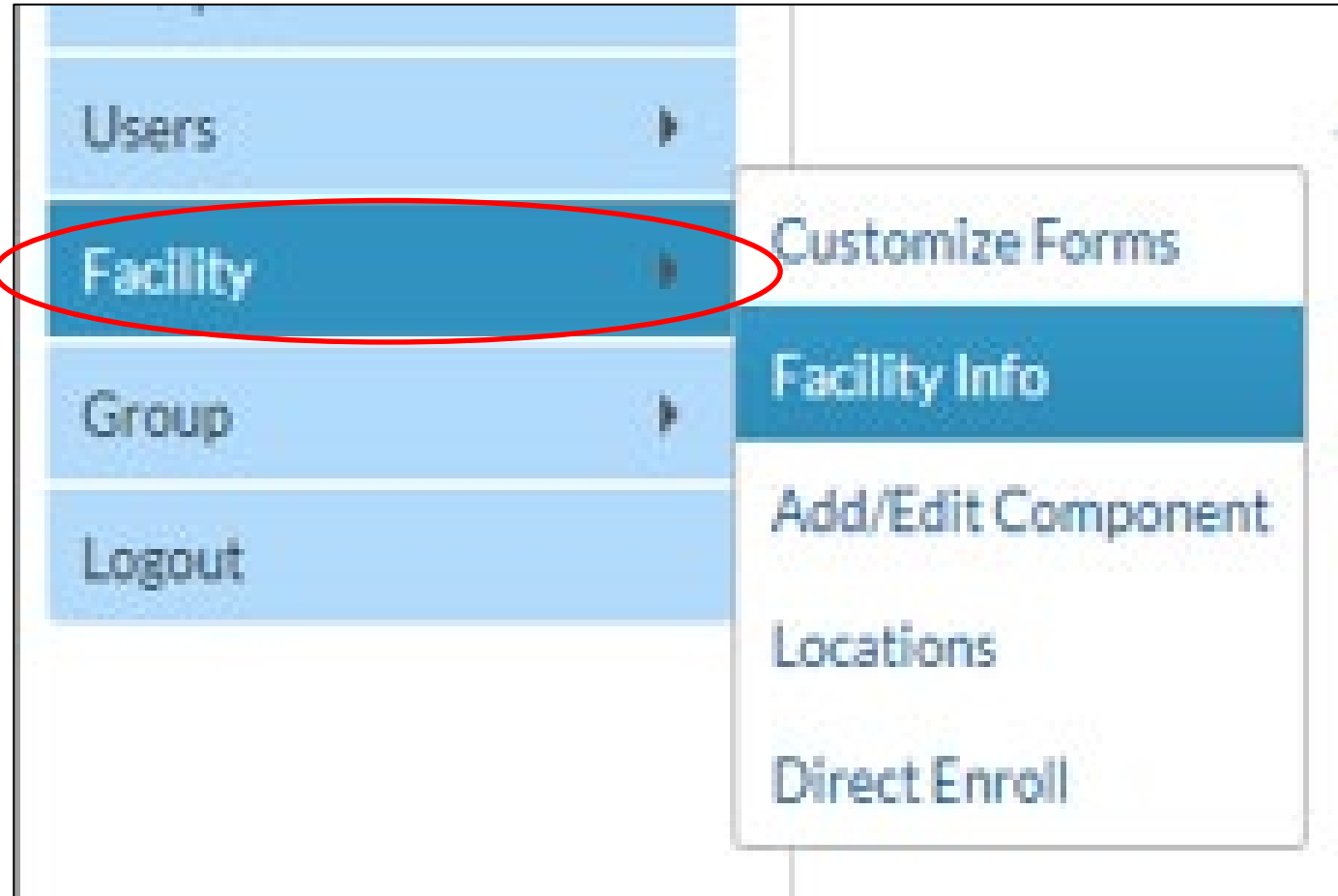
Influenza Vaccination Reporting

Activating the HPS Component

- Activating the HPS component is only necessary for facilities currently enrolled in another component
- Only a NHSN Facility Administrator can activate a new component
- Ensure that the contact information for the NHSN Facility Administrator and HPS Component Primary Contact are updated



Influenza Vaccination Reporting



Influenza Vaccination Reporting

Contact Information

	Contact Type	Contact Name	Phone No.+ext	Email	Action
<input type="button" value="Edit"/>	Facility Administrator	[REDACTED]	[REDACTED]	[REDACTED]	<input type="button" value="Reassign"/>
<input type="button" value="Edit"/>	Healthcare Personnel Primary Contact	[REDACTED]	[REDACTED]	[REDACTED]	<input type="button" value="Reassign"/>
<input type="button" value="Edit"/>	Long Term Care Facility Primary Contact	[REDACTED]	[REDACTED]	[REDACTED]	<input type="button" value="Reassign"/>

Influenza Vaccination Reporting

Change in NHSN Facility Administrator

- NHSN Facility Administrator should transfer role to another user prior to leaving the facility!
- NHSN can add an individual as the new NHSN Facility Administrator if the previous NHSN Facility Administrator has left the facility
 - Do not re-enroll the facility in NHSN
- Complete the NHSN Facility Administrator Change Request Form
<https://www.cdc.gov/nhsn/facadmin/index.html>
- After being assigned as the new NHSN Facility Administrator, begin the new NHSN user onboarding process

Activating the HPS Component

- Facility Administrator logs into SAMS:
<https://nhsn2.cdc.gov/nhsn/>
 - Click “NHSN Reporting”
- From the Home Page, click “Facility” then “Add/Edit Component”
 - Check box next to Healthcare Personnel Safety
- Facility Administrator adds HPS Component Primary Contact
 - Enter name, phone, e-mail, and address for person to be contacted if CDC/NHSN has updates or questions about the HPS Component



Components Followed		
Follow/ Followed	Component	Activated
<input type="checkbox"/>	Biovigilance	
<input type="checkbox"/>	Dialysis	
<input checked="" type="checkbox"/>	Healthcare Personnel Safety	10/18/2022
<input checked="" type="checkbox"/>	Long Term Care Facility	01/28/2020
<input type="checkbox"/>	Neonatal	
<input type="checkbox"/>	Outpatient Procedure	
<input type="checkbox"/>	Patient Safety	

Activating the HPS Component (cont.)

- Facility Administrator adds HPS Component Primary Contact as a user within the NHSN facility
 - Click “Users” on the navigation bar, then click “Add”
 - Complete “Add User” screen mandatory fields
 - User ID – created by the facility
 - First Name
 - Last Name
 - E-mail Address – Must be an active/correct address for the user
- Other users are added by the Facility Administrator or new HPS Component Primary Contact

Influenza Vaccination Reporting

Required and Optional Reporting Forms

- After enrolling in NHSN and/or activating the HPS Component and adding users:
 - Complete Required Forms
 - HCP Influenza Vaccination Summary Form
 - Complete Optional Form
 - Seasonal Survey on Influenza Vaccination Programs for HCP

Influenza Vaccination Reporting

Log into SAMS

- You can access the activity home page by clicking:
<https://nhsn2.cdc.gov/nhsn/>
- Level 3 SAMS access is needed to enter data into the HPS Component

For assistance with SAMS, contact the SAMS Help Desk at 1-877-681-2901 or samshelp@cdc.gov

External Partners

SAMS Credentials

SAMS Username

SAMS Password

Login

[Forgot Your Password?](#)

For External Partners who login with only a SAMS issued UserID and Password.

SAMS Multi-factor Login

OR

Sign on with a SAMS Grid Card or Mobile Soft Token

Login

For External Partners who have been issued a SAMS Multi-factor token(s).

NHSN Landing Page

Welcome to the NHSN Landing Page



Select component:

Healthcare Personnel Safety

Select facility/group:

Fac: Joy LTC Facility (ID 30074)

Submit

Influenza Vaccination Reporting

HCP Influenza Vaccination Summary Data

- Click “Vaccination Summary” then “Annual Vaccination Flu Summary”
- Select “Add”
- Click “Continue”

The screenshot displays the NHSN Home interface. On the left is a navigation menu with the following items: NHSN Home, Alerts, Reporting Plan, HCW, Lab Test, Exposure, Prophy/Treat, Import/Export, Vaccination Summary, Surveys, and Analysis. The 'Vaccination Summary' item is highlighted with a yellow circle labeled '1'. A dropdown menu is open for 'Vaccination Summary', showing 'Annual Vaccination Flu Summary' (highlighted with a yellow circle labeled '2') and 'Weekly Flu Vaccination Summary'. The 'Annual Vaccination Flu Summary' dropdown is further open, showing 'Add' (highlighted with a yellow circle labeled '3'), 'Find', and 'Incomplete'. The main content area is titled 'Add Summary Data' and contains a 'Summary Data Type:' dropdown menu set to 'Influenza Vaccination Summary'. At the bottom right of the main area are two buttons: 'Continue' (highlighted with a yellow circle labeled '4') and 'Back'.

Influenza Vaccination Reporting

HCP Influenza Vaccination Summary Data (cont.)

- “Influenza” and “Seasonal” are the default choices for vaccination type and influenza subtype
- Select appropriate flu season in drop-down box (e.g., 2022-2023)

NHSN Home

- Alerts
- Reporting Plan ▶
- HCW ▶
- Lab Test ▶
- Exposure ▶
- Propyl/Treat ▶
- Import/Export

Add Influenza Vaccination Summary

Mandatory fields marked with *

Record the cumulative number of healthcare personnel (HCP) for each category below for the influenza season being tracked.

Facility ID *: Joy LTC Facility (30074)

Vaccination type *: Influenza ▼

Influenza subtype *: Seasonal ▼

Flu Season *: ▼

Influenza Vaccination Reporting

HCP Influenza Vaccination Summary

- Data are collected on denominator and numerator categories
 - Denominator categories:
 - HCP must be physically present in the facility for at least 1 working day between October 1 through March 31
 - Includes both full-time and part-time HCP
 - Employee HCP
 - Non-employee HCP: Licensed independent practitioners (physicians, advanced practice nurses, and physician assistants)
 - Non-employee HCP: Adult students/trainees and volunteers
 - Numerator categories:
 - Influenza vaccinations, medical contraindications, declinations, and unknown status
- Facilities are required to report all numerator categories for the three denominator categories

Influenza Vaccination Reporting

Saving HCP Influenza Vaccination Data

- Click “Save” to save the data

Date Last Modified: 08/26/2022

HCP categories	Employee HCP	Non-Employee HCP		
	Employees (staff on facility payroll) *	Licensed independent practitioners: Physicians, advanced practice nurses, & physician assistants *	Adult students/ trainees & volunteers *	Other Contract Personnel
1. Number of HCP who worked at this healthcare facility for at least 1 day between October 1 and March 31	100	100	50	0
2. Number of HCP who received an influenza vaccine at this healthcare facility since influenza vaccine became available this season	100	100	50	0
3. Number of HCP who provided a written report or documentation of influenza vaccination outside this healthcare facility since influenza vaccine became available this season	0	0	0	0
4. Number of HCP who have a medical contraindication to the influenza vaccine	0	0	0	0
5. Number of HCP who declined to receive the influenza vaccine	0	0	0	0
6. Number of HCP with unknown vaccination status (or criteria not met for questions 2-5 above)	0	0	0	0

Custom Fields

Comments



Influenza Vaccination Reporting

Editing HCP Influenza Vaccination Data (cont.)

- Click “Edit” to modify existing data

Date Last Modified: 08/26/2022

HCP categories	Employee HCP	Non-Employee HCP		
	Employees (staff on facility payroll) *	Licensed independent practitioners: Physicians, advanced practice nurses, & physician assistants *	Adult students/trainees & volunteers *	Other Contract Personnel
1. Number of HCP who worked at this healthcare facility for at least 1 day between October 1 and March 31	100	100	50	0
2. Number of HCP who received an influenza vaccine at this healthcare facility since influenza vaccine became available this season	100	100	50	0
3. Number of HCP who provided a written report or documentation of influenza vaccination outside this healthcare facility since influenza vaccine became available this season	0	0	0	0
4. Number of HCP who have a medical contraindication to the influenza vaccine	0	0	0	0
5. Number of HCP who declined to receive the influenza vaccine	0	0	0	0
6. Number of HCP with unknown vaccination status (or criteria not met for questions 2-5 above)	0	0	0	0

Custom Fields

Comments

[Edit](#) [Delete](#) [Back](#)

Influenza Vaccination Reporting

The NHSN Website

Visit: [HCP Flu Vaccination | HPS | NHSN | CDC](#) for training materials:

- Protocol
- Data collection forms
- Frequently asked questions (FAQs)
- Training slides

SNFQualityQuestions@cms.hhs.gov

Questions or Need Help?



E-mail user support at: nhsn@cdc.gov

Please include “HPS Flu Summary” in the subject line of the e-mail and specify “Long-term care facility”

SAMS & NHCN Tips

▼ Action Items

COMPLETE THESE ITEMS

Survey Required
2021

Mini-IRF Survey
Required
2021

Confer Rights
**Not
Accepted**

ALERTS

1

Missing Events

2

Incomplete Summary
Items

26

Missing Summary
Items

2

Missing Procedures

Clean Up the Users in Your NHSN Account

NHSN Home

- Alerts
- Dashboard ▶
- Reporting Plan ▶
- Resident ▶
- Event ▶
- Summary Data ▶
- COVID-19 ▶
- Vaccination Summary
- Import/Export
- Surveys ▶
- Analysis ▶
- Users** ▶
 - Add
 - Find**
- Facility ▶
- Group ▶

Find User

- Enter search criteria and click Find

User Information

User ID:

First Name:

Middle Name:


Last Name:

Phone Number:

















E-mail Address:

Find **Clear** **Back**

Deactivate Users Who No Longer Need Access

 **Users List**

Page 1 of 1 | 10 | View 1 - 8 of 8

Deactivate	Name	Title	User ID	User Type	Active
<input type="checkbox"/>	 Jennifer		 T	NU - Nurse	Y
<input type="checkbox"/>	Johnso 		 ON		Y
<input type="checkbox"/>	 Mirana	EXECUTIVE DIRECTOR		OTH - Other	Y
<input type="checkbox"/>	 robin		 ES	OTH - Other	Y
<input type="checkbox"/>	 Crystal		 1	ICP - Infection Control Professional	Y
<input type="checkbox"/>	Gray 		 1	OTH - Other	N
<input type="checkbox"/>					N
<input type="checkbox"/>	 Heather		 ER		N

Page 1 of 1 | 10 | View 1 - 8 of 8

Add **Back**

Check the box beside their name and click **Deactivate**.

OR Go to the Contact Page and Click User Active “No”

Mandatory fields marked with *

User ID *: MJOHNSON Up to 32 le

Prefix:

First Name *: Marilee

Middle Name:

Last Name *: Johnson

Title:

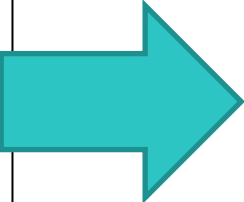
User Active: N - No ▾

User Type: ▾

Phone Number *: 331

Fax Number:

E-mail Address *: MARILEE.JOHNSON@ALLIANTQUALITY.ORG



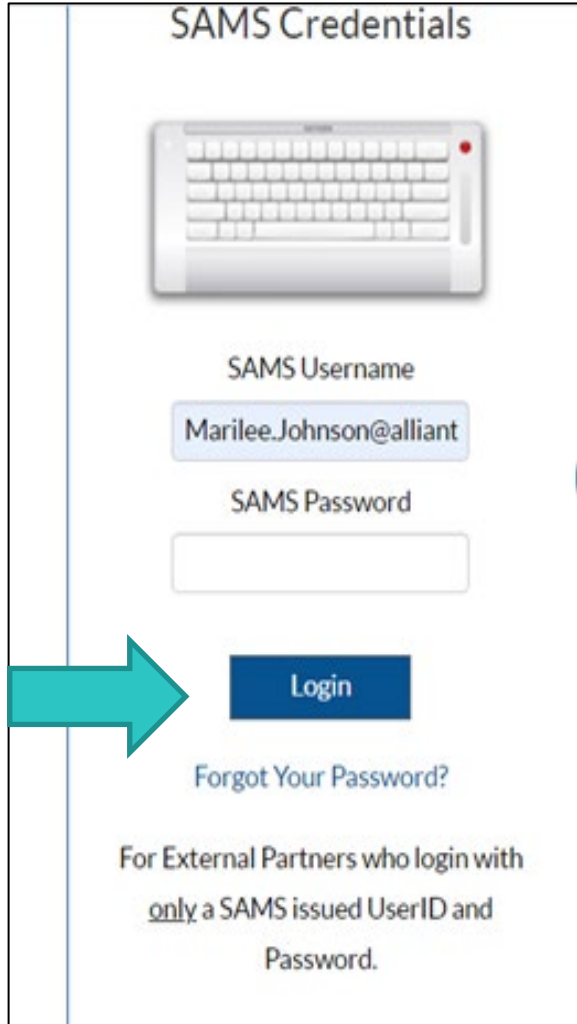
User > Find > Find > Click on the user account.
Click Edit.
Then change the User Active to NO.
Select "Save"

Ensure Users Are Assigned Rights

Rights	Long Term Care Facility
Administrator	<input checked="" type="checkbox"/>
All Rights	<input checked="" type="checkbox"/>
Analyze Data	<input type="checkbox"/>
Add, Edit, Delete	<input type="checkbox"/>
View Data	<input type="checkbox"/>
Staff/Visitor - Add, Edit, Delete	<input checked="" type="checkbox"/>
Staff/Visitor - View	<input checked="" type="checkbox"/>
Customize Rights	<input type="checkbox"/>

Hint: Double-check to ensure users have administrator rights, if applicable. If you don't have admin rights, you will be unable to add users or perform key tasks to maintain the functionality of your account.

I Forgot My Password. How Do I Reset?



SAMS Credentials


SAMS Username
Marilee.Johnson@alliant

SAMS Password

Login

[Forgot Your Password?](#)

For External Partners who login with only a SAMS issued UserID and Password.



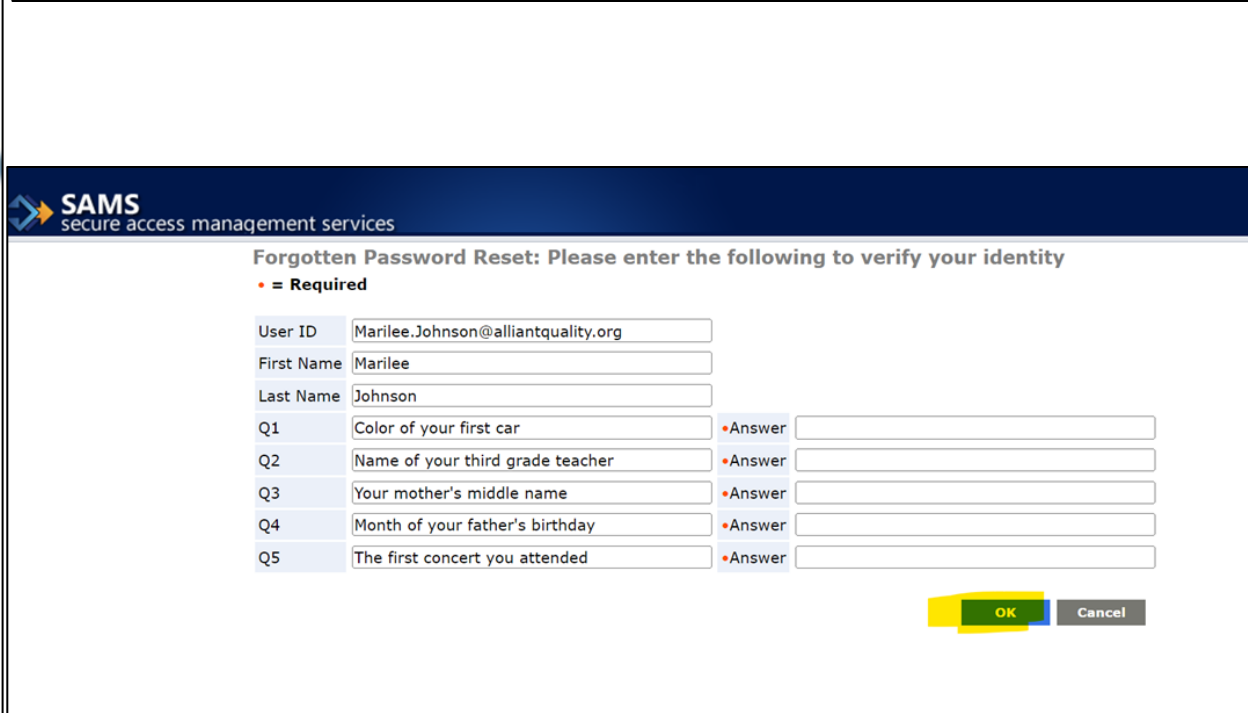
SAMS
secure access management services

Forgotten Password Reset: Please enter the following to identify yourself

• = Required

• User ID

OK **Cancel**



SAMS
secure access management services

Forgotten Password Reset: Please enter the following to verify your identity

• = Required

User ID	<input type="text" value="Marilee.Johnson@alliantquality.org"/>	
First Name	<input type="text" value="Marilee"/>	
Last Name	<input type="text" value="Johnson"/>	
Q1	<input type="text" value="Color of your first car"/>	• Answer <input type="text"/>
Q2	<input type="text" value="Name of your third grade teacher"/>	• Answer <input type="text"/>
Q3	<input type="text" value="Your mother's middle name"/>	• Answer <input type="text"/>
Q4	<input type="text" value="Month of your father's birthday"/>	• Answer <input type="text"/>
Q5	<input type="text" value="The first concert you attended"/>	• Answer <input type="text"/>

OK **Cancel**

HINT: The USER ID is the email address you use to sign into the SAMS login.

Do you know your security questions? You must answer using correct capitalization.

If You Don't Remember Your Security Questions

You must request the SAMS help desk to terminate your account. Then, email nhsn@cdc.gov and request a new invitation to register. Include your email address and first and last name.

Why risk this? Print out or screenshot your security questions and save them in a secure location. Log in to <https://sams.cdc.gov> SAMS credential > Click on Modify My Identity Data to view your answers.

The image shows two screenshots from the SAMS (Secure Access Management Services) portal. The left screenshot is the login page, titled "Choose a login option". Under the "External Partners" section, the "SAMS Credentials" option is highlighted with a yellow box and a teal arrow. Below this, there are input fields for "SAMS Username" (containing "Marilee.Johnson@alliantc") and "SAMS Password" (masked with dots), and a "Login" button. The right screenshot is the "Modify My Identity Data" page. It features a "Tasks" menu on the left with "Modify My Identity Data" selected. The main content area contains several fields: "City" (redacted), "State" (North Carolina), "Postal Code" (redacted), "Country" (United States), "Primary Phone" (919-695-8331), and "Alternate Phone". Below these fields is a red warning: "Your answers to the following questions will be used to verify your identity should you forget your password. Answers may not contain any part of the question." This is followed by a table of five security questions (Q1-Q5) and their corresponding answers (A1-A5), all of which are redacted.

Questions or Need Help?

Please submit questions by email to nhsn@cdc.gov and put the module in the subject line for a faster response.

Facilities can contact CMS with questions about reporting requirements and quality reporting:

- Long-term care facilities weekly reporting: DNH_TriageTeam@cms.hhs.gov
- Skilled nursing facilities quality reporting program: SNFQualityQuestions@cms.hhs.gov

Questions?



Thank You for Your Time!

Contact the Patient Safety Team



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Mark Your Calendar!

Shop Talk

3rd Thursdays at 2 p.m. ET

Visit our website for more info:

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



Nursing Home and Partnership for Community Health: CMS 12th SOW GOALS



OPIOID UTILIZATION AND MISUSE

- Promote opioid best practices
- Reduce opioid adverse drug events in all settings



PATIENT SAFETY

- Reduce hospitalizations due to c. diff
- Reduce adverse drug events
- Reduce facility acquired infections



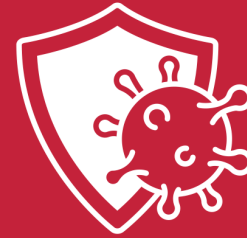
CHRONIC DISEASE SELF-MANAGEMENT

- Increase instances of adequately diagnosed and controlled hypertension
- Increase use of cardiac rehabilitation programs
- Reduce instances of uncontrolled diabetes
- Identify patients at high-risk for kidney disease and improve outcomes



CARE COORDINATION

- Convene community coalitions
- Reduce avoidable readmissions, admissions to hospitals and preventable emergency department visits
- Identify and promote optimal care for super utilizers



COVID-19

- Support nursing homes by establishing a safe visitor policy and cohort plan
- Provide virtual events to support infection control and prevention
- Support nursing homes and community coalitions with emergency preparedness plans



IMMUNIZATION

- Increase influenza, pneumococcal, and COVID-19 vaccination rates



TRAINING

- Encourage completion of infection control and prevention trainings by front line clinical and management staff

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