## COVID-19 Updates, Influenza Vaccination Reporting and NHSN Updates

#### Welcome!

Chat with Technical Support if you need assistance

#### Presented by:

Paula St. Hill, MPH, A-IPC
Infection Prevention Technical Advisor



#### 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 over 10 years of health care experience and enjoys 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.

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#### Donald Chitanda, MPH, CIC

#### INFECTION PREVENTION TECHNICAL ADVISOR

Donald is a health professional with experience in public health epidemiology and infection prevention. For several years, he worked as an infection preventionist at a 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 a 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 his family and doing outdoor activities.

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#### 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 Centers 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.

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#### 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: <u>Amy.Ward@AlliantHealth.org</u>



#### **Objectives**

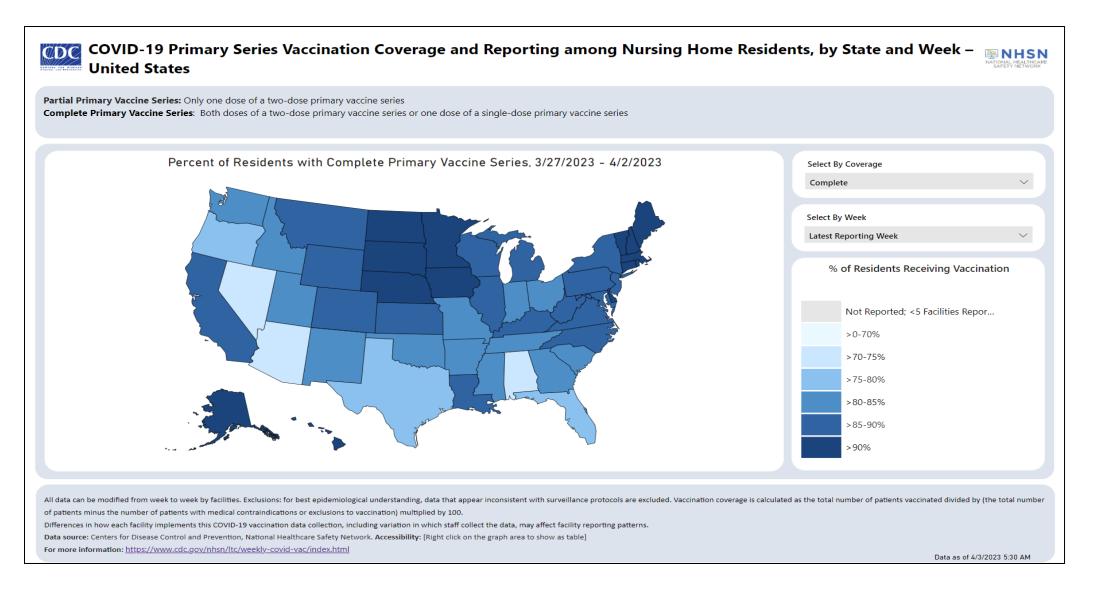
#### Agenda:

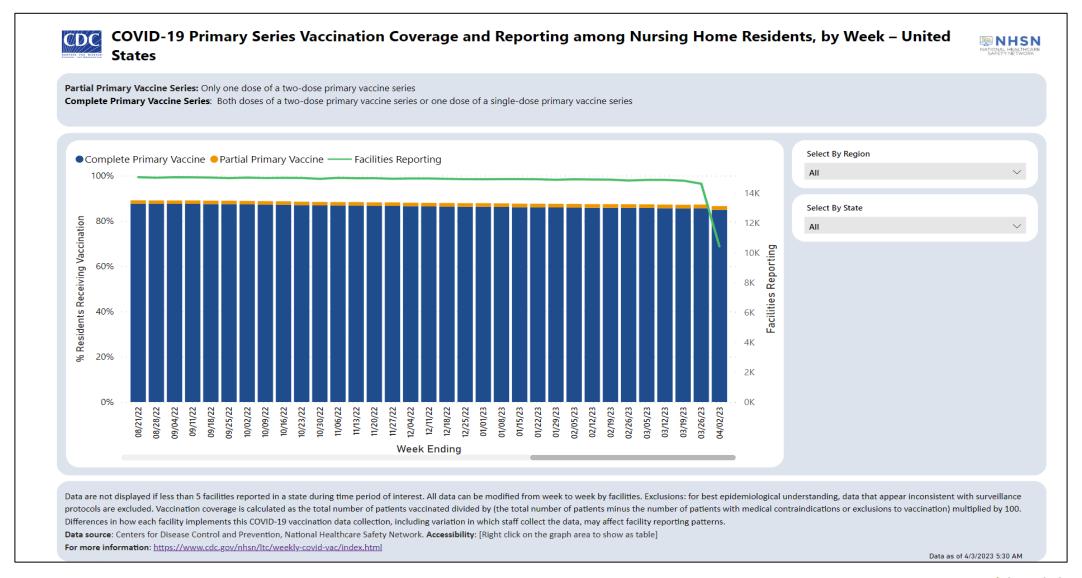
- COVID-19 updates
- Discuss the ending of the COVID-19 public health emergency as it relates to NHSN reporting
- NHSN influenza vaccination reporting
- SAMS and NHSN updates
- Live questions and answers

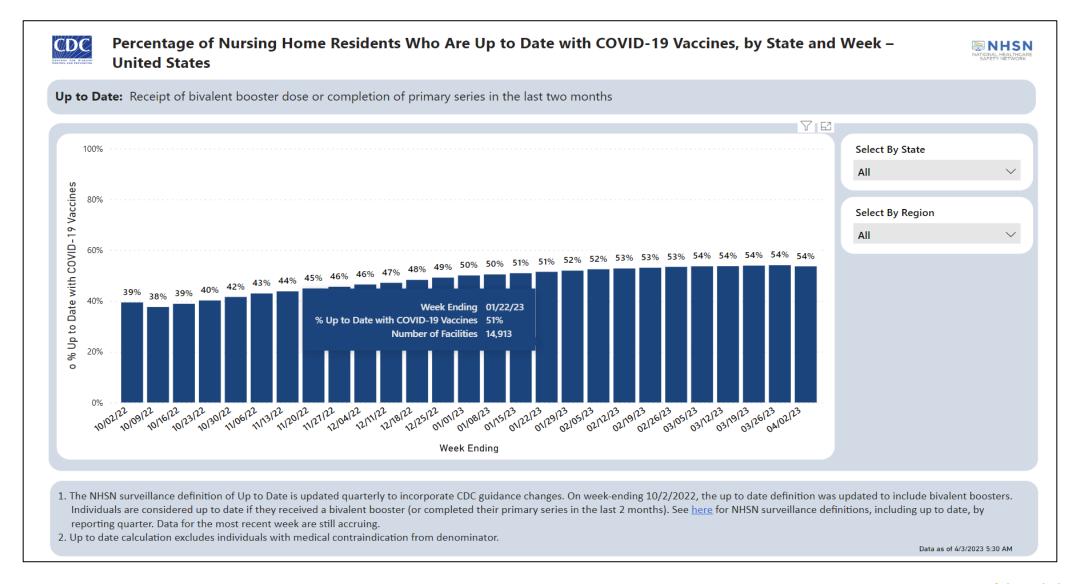


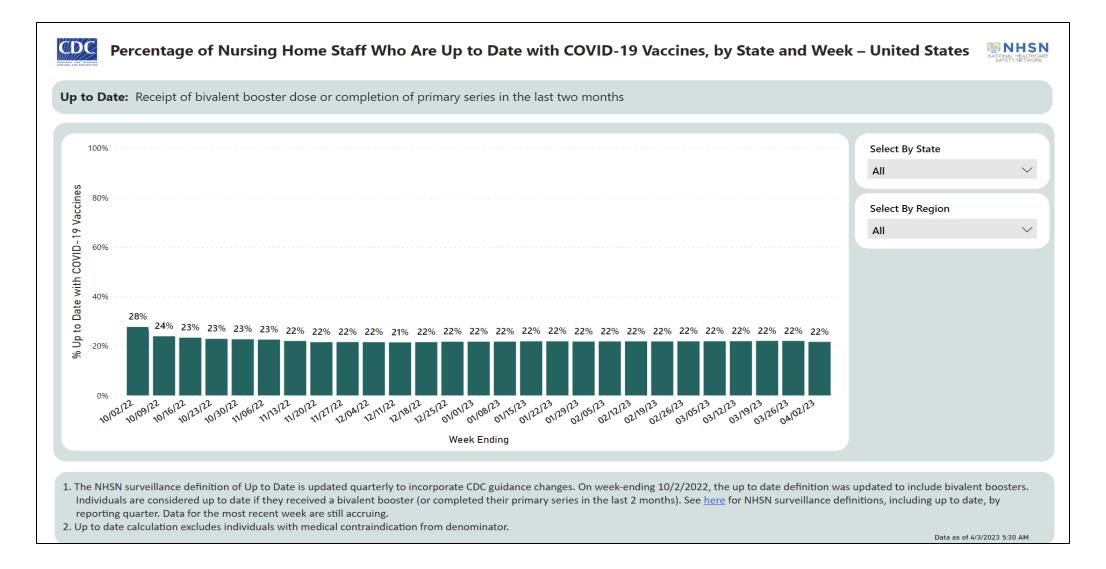
## COVID-19 Updates











COVID-19 Primary Series Vaccination Coverage and Reporting among Nursing Home Staff, by State and Week – United States Partial Primary Vaccine Series: Only one dose of a two-dose primary vaccine series Complete Primary Vaccine Series: Both doses of a two-dose primary vaccine series or one dose of a single-dose primary vaccine series Percent of Staff with Complete Primary Vaccine Series, 3/27/2023 - 4/2/2023 Select By Coverage Complete Select By Week Latest Reporting Week % of Staff Receiving Vaccination Not Reported: <5 Facilities Reporting >0-60% >60-70% >70-80% >80-90% All data can be modified from week to week by facilities. Exclusions: for best epidemiological understanding, data that appear inconsistent with surveillance protocols are excluded. Vaccination coverage is calculated as the total number of staff vaccinated divided by (the total number of staff minus the number of staff with medical contraindications or exclusions to vaccination) multiplied by 100. Differences in how each facility implements this COVID-19 vaccination data collection, including variation in which staff collect the data, may affect facility reporting patterns. Data source: Centers for Disease Control and Prevention, National Healthcare Safety Network. Accessibility: [Right click on the graph area to show as table] For more information: https://www.cdc.gov/nhsn/ltc/weekly-covid-vac/index.html Data as of 4/3/2023 5:30 AM

# Ending of the COVID-19 Public Health Emergency



#### When?

The COVID-19 public health emergency is expected to end on <u>May 11, 2023</u>.



https://www.hhs.gov/about/news/2023/02/09/fact-sheet-covid-19-public-health-emergency-transition-roadmap.html



#### **Ending of COVID-19 PHE**

Nursing homes will continue to report COVID-19 data through NHSN and will continue to provide notification to residents and families of COVID-19 infections through December 31, 2024, unless CMS takes regulatory action otherwise.







#### **Ending of COVID-19 PHE**

Reporting of COVID-19 vaccination status continues through **May 2024** or until CMS declares otherwise.





#### Staff Vaccination Mandate

- In November 2021, CMS implemented an interim final rule requiring staff, including volunteers, in most Medicare- and Medicaid-certified settings to complete the primary series of COVID-19 vaccination or be granted an approved exemption in order to work in or provide services on behalf of the certified setting.
- The federal mandate is incorporated in an interim final rule that will remain in effect until November 2024 unless other action is taken.



#### **Ending of COVID-19 PHE**

Nursing homes will need to continue to educate and offer COVID-19 vaccination to staff and residents beyond the end of the PHE as part of the Requirements of Participation through May 2024 or until otherwise specified by CMS.





#### **COVID-19 Testing Requirements**

COVID-19 testing requirements will expire with the PHE on May 11; however, nursing homes should be mindful that they will still be subject to the "accepted standards" put forth by the CDC.





# NHSN HCP Influenza Vaccination Reporting and Tips



#### **HCP Influenza Vaccination Summary**

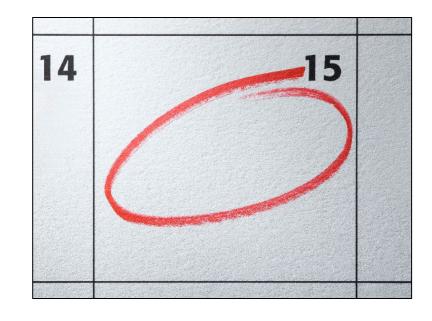
The Influenza Vaccination
Summary within the HCP
Vaccination Module is designed
to assist facility staff in monitoring
influenza vaccination
percentages among HCP.





## HCP Influenza Vaccination Summary Reporting

The reporting period for the 2022-2023 influenza season is from October 1, 2022, through March 31, 2023. To meet CMS reporting requirements, HCP influenza vaccination summary data reports must be entered into NHSN no later than May 15, **2023**, for the 2022-2023 influenza season. Facilities can edit their data after May 15, but the revised data will not be shared with CMS.



## HCP Influenza Vaccination Summary Reporting

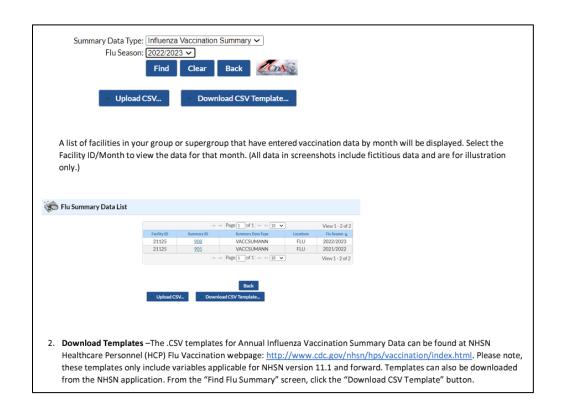
Monthly reporting in NHSN is not required; entering a single influenza vaccination summary report at the end of the reporting period for the influenza season will meet the minimum data requirements for NHSN participation. However, facilities are encouraged to update HCP influenza vaccination summary counts every month so the data can be used to inform influenza vaccination activities at the facility.



## How To Report Annual HCP Influenza Vaccination Summary Data

Data can be reported in two ways:

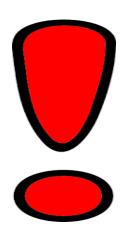
- 1. Entering data directly into the NHSN application through the **Healthcare Personnel Influenza Vaccination Module**.
- 2. Uploading .CSV files into the Healthcare Personnel Influenza Vaccination Module. Instructions for uploading data, a .CSV file template, and .CSV example file can be accessed here.





#### **HCP Influenza Vaccination Summary Data**

- To report HCP influenza vaccination summary data, all facilities or units must complete the HCP Influenza Vaccination Summary Form.
- Facilities must activate the Healthcare
   Personnel Safety Component in NHSN to report
   HCP influenza vaccination summary data. Only
   the NHSN Facility Administrator (FA) can
   activate a new component. All facility and unit
   types should submit HCP influenza vaccination
   summary data to NHSN using this component.



Please note that reporting weekly influenza vaccination data through the NHSN Long-term Care Facility (LTCF) Component does **not** fulfill the CMS annual healthcare personnel influenza vaccination data reporting requirement!



#### **Activating the HCP Component**

1. Facility administrator logs into SAMS:

https://nhsn2.cdc.gov/nhsn/

- Click "NHSN Reporting."
- 2. From the Home Page, click "Facility" then "Add/Edit Component."
- Check the box next to Healthcare Personnel Safety.
- 3. Facility Administrator adds HPS Component Primary Contact.
- Enter the name, phone, e-mail, and address of the person to be contacted if CDC/NHSN has updates or questions about the HPS Component.





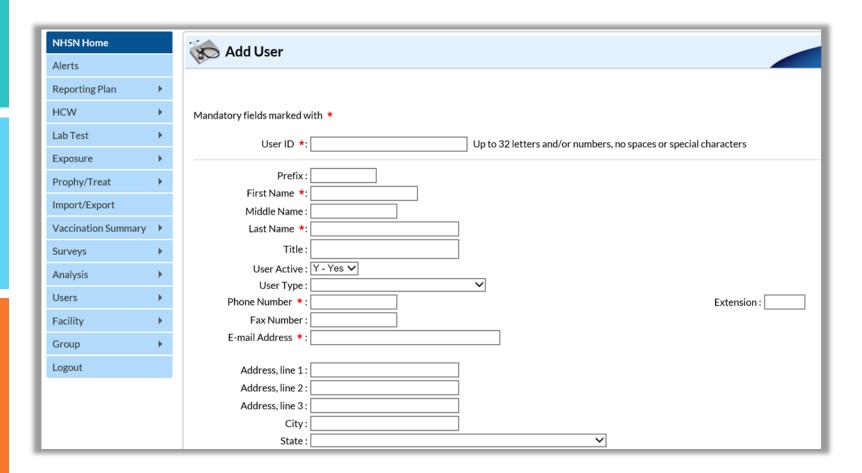
#### **Activating the HCP Component**

- Facility Administrator adds HPS Component Primary Contact as a user within the NHSN facility.
  - Click "Users" on the navigation bar, then click "Add"
  - Complete the "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.



#### Adding a NHSN User

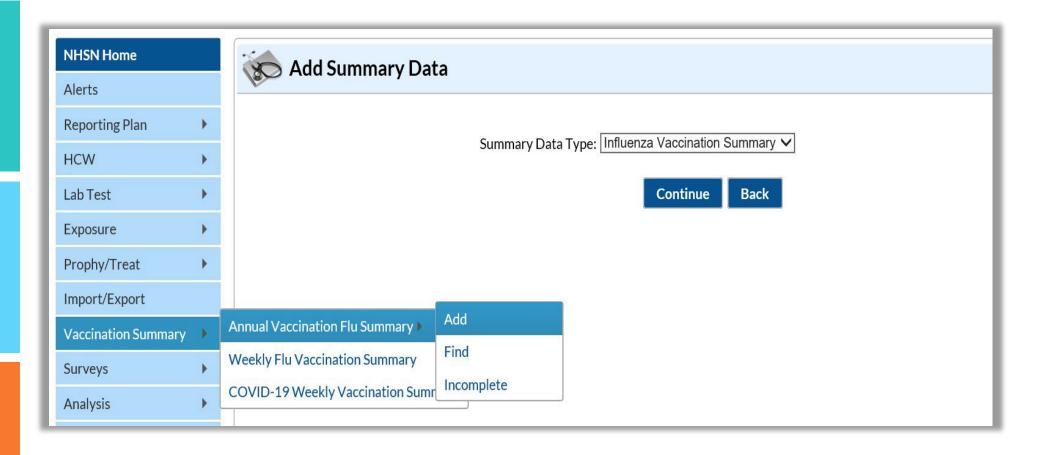
- Recommend at least two NHSN users
- To add: click "Users > Add"
- Complete required fields





#### **HPS Component Home Page**

Select 'Vaccination Summary', then 'Annual Flu Vaccination Summary', and lastly, 'Add' on the left-hand navigation bar.





#### **HPS Component**

NHSN Home		Add Influenza Vaccination Summary					
Alerts							
Reporting Plan	•	Mandatory fields marked with *				Print Form	
HCW	•					FIIILFOIII	
Lab Test	•	Record the cumulative number of healthcare personnel (HCP) for each category below for the influenza season being tracked.  Facility ID *: NHSN 12 SOW LTC QIN-QIO Test Facility (ID 59979)   Vaccination type *: Influenza v  Influenza subtype *: Flu Season *: 2022/2023 v					
Exposure	•						
Prophy/Treat	•						
Import/Export		Fitt Season *. 2022/2023 V					
Vaccination Summary	•	Date Last Modified:					
Surveys	•	HCP categories	Employee HCP	Licensed	Non-Employee HCP		
Analysis	•		Employees (staff on facility payroll) *	independent practitioners: Physicians, advanced practice nurses, & physician assistants *	Adult students/ trainees & volunteers *	Other Contract Personnel	
Users	•						
Facility	•						
Group	•	1. Number of HCP who worked at this healthcare facility for at least 1 day between October 1 and March 31					
Logout		2. Number of HCP who received an influenza vaccine at this healthcare facility since influenza vaccine became available this season					
		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					
		4. Number of HCP who have a medical contraindication to the influenza vaccine					
		5. Number of HCP who declined to receive the influenza vaccine					
		6. Number of HCP with unknown vaccination status (or criteria not met for questions 2-5 above)					
		Custom Fields					



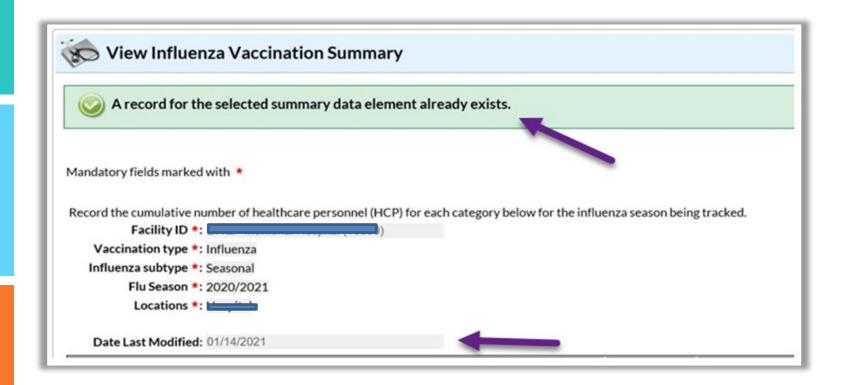
#### **HCP Influenza Vaccination Reporting**

- 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 one 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.



#### Editing HCP Influenza Vaccination Data

- For each update of the data after the initial entry, a message will indicate that a record of the summary data already exists.
- The "Date Last Modified" shows when the data were last entered.





#### **Editing HCP Influenza Vaccination Data**

Click "Edit" to modify existing data.

			F	- D				
HCP categories	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 $$	25	25	25	15				
2. Number of HCP who received an influenza vaccine at this healthcare facility since influenza vaccine became available this season	5	5	5	3				
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	5	5	5	3				
4. Number of HCP who have a medical contraindication to the influenza vaccine	5	5	5	3				
5. Number of HCP who declined to receive the influenza vaccine	5	5	5	3				
6. Number of HCP with unknown vaccination status (or criteria not met for questions 2-5 above)	5	5	5	3				
Custom Fields TEST1: TEST2:  Comments								
Edit Delete Back								



#### Saving HCP Influenza Vaccination Data

Click "Save" to save the updated data.

HCP categories	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	25	25	25	15				
2. Number of HCP who received an influenza vaccine at this healthcare facility since influenza vaccine became available this season	5	5	5	3				
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	5	5	5	3				
4. Number of HCP who have a medical contraindication to the influenza vaccine	5	5	5	3				
5. Number of HCP who declined to receive the influenza vaccine	5	5	5	3				
6. Number of HCP with unknown vaccination status (or criteria not met for questions 2-5 above)	5	5	5	3				
Custom Fields TEST1: TEST2:								
Comments  Save Delete Back								



#### Saving HCP Influenza Vaccination Data

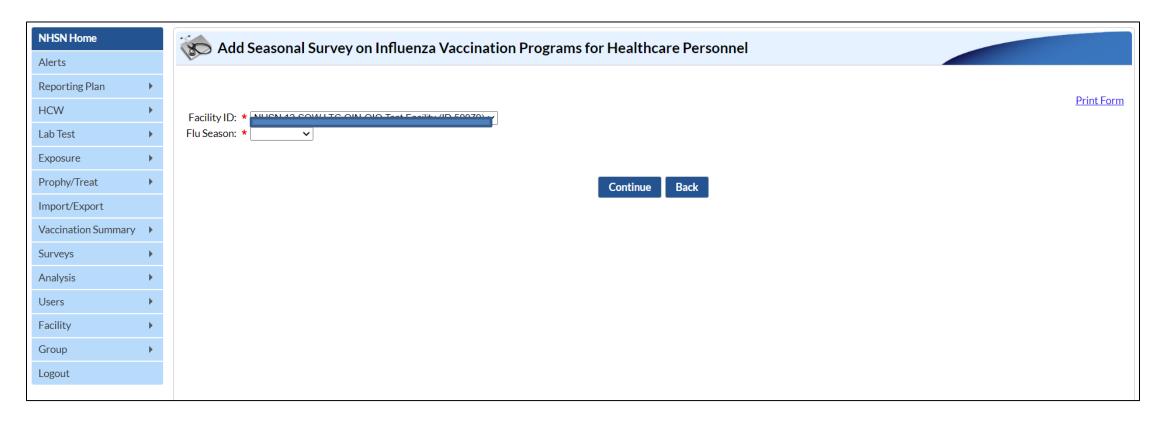
A message confirming that data were saved should appear at the top of the screen.

Successfully updated Influenza Vaccination Summary record. A record for the selected summary data element already exists.



#### Seasonal HCP Influenza Survey

The Seasonal Survey on Influenza Vaccination Programs for HCP is **not** required at this time. However, facilities are encouraged to complete the short survey as the information can help CDC examine the relationship of different vaccination program elements to facility-reported vaccination percentages.





#### Influenza Vaccination Resources

#### Annual Flu Summary

Comprehensive training slides on collecting and entering HCP influenza vaccination summary data.





# Alliant Health and NHSN Updates



#### NHSN SAMS Access Issues

**SAMS Partner Portal** Questions please contact the SAMS Help Desk at <a href="mailto:samshelp@cdc.gov">samshelp@cdc.gov</a> or call 1-877-681-2901.

NHSN questions may be directed to NHSN@cdc.gov.





## NHSN Help Desk

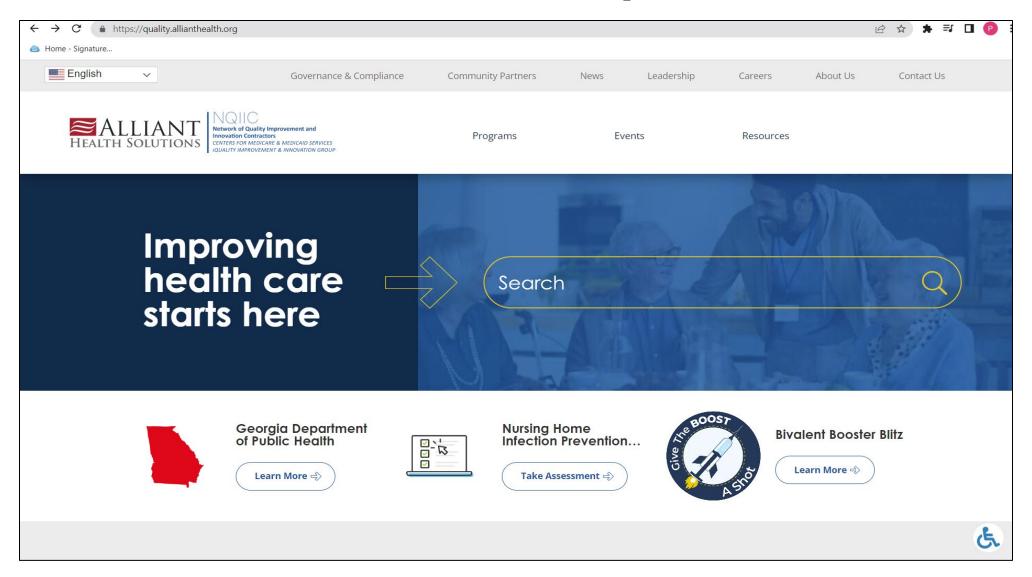
#### **Resolution Timeframes**

Help Requests	Resolution Time
Requests received 15 days prior to a Centers for Medicare and Medicaid Services (CMS) reporting deadline	Requests directly related to CMS reporting and requiring subject matter expert involvement will be resolved within 7 business days.
Requests requiring Subject Matter Expertise (SME) received from 5 to 15 business days prior to a CMS reporting deadline	Requests directly related to CMS reporting and requiring subject matter expert involvement will be resolved within 5 business days
Requests requiring SME received 4 business days or less, before a CMS reporting deadline	Every effort will be made to resolve each request before the deadline
Requests requiring SME, not related to CMS reporting deadline	Within 7 business days
No Subject Matter Expertise response required	Within 2-5 business days

<sup>\*</sup>Subject Matter Expertise is required for questions regarding data analysis or surveillance protocol interpretations.

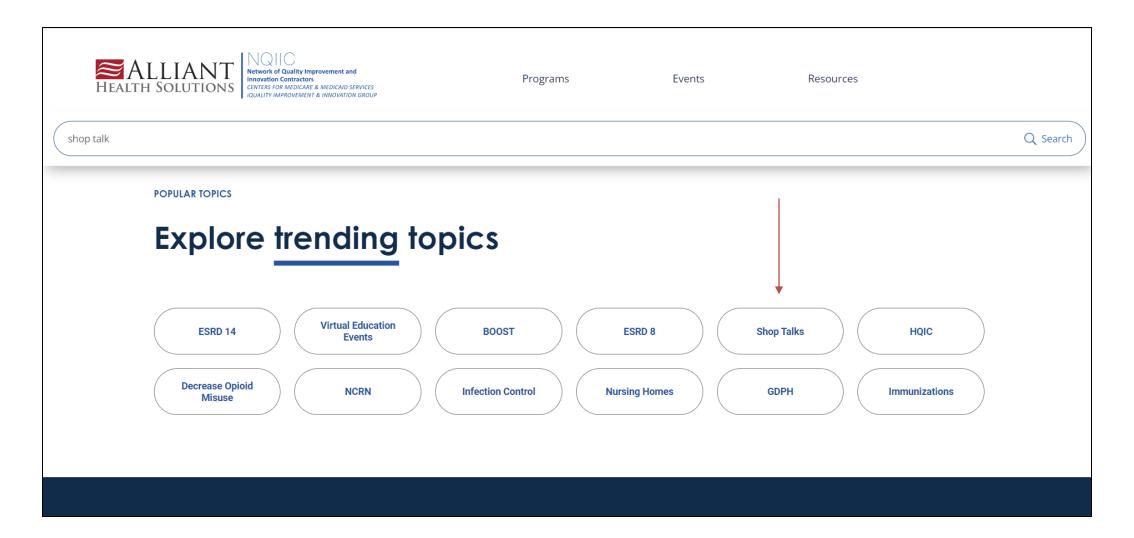


## Alliant Health Solutions Updated Website!



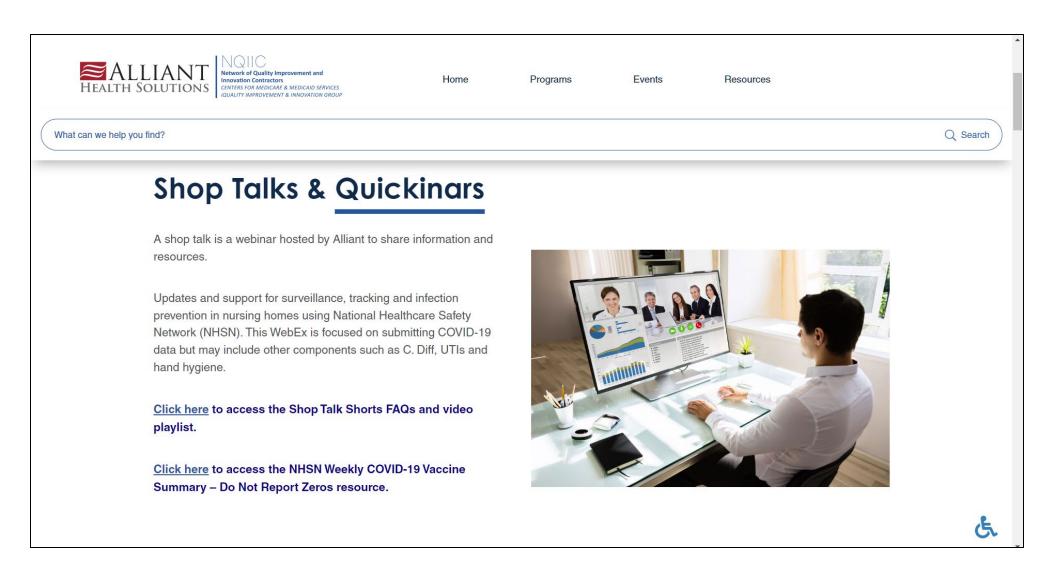


#### **Alliant Health Solutions Website**



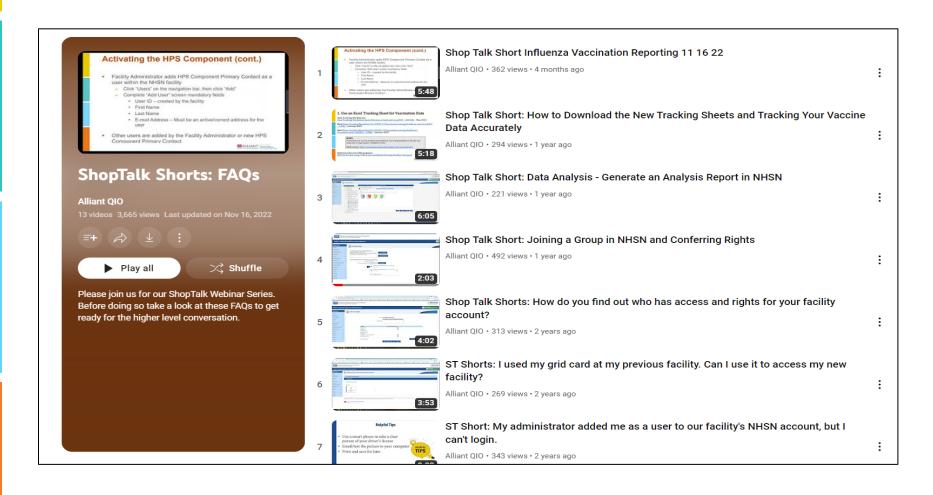


#### **Alliant Health Solutions Website**





# Shop Talk and Shop Talk Shorts YouTube Channel



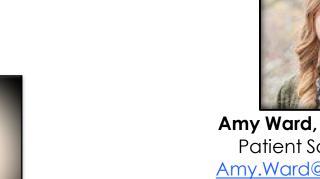
# Questions?





# Thank You for Your Time! Contact the Patient Safety Team

patientsafety@alliantHealth.org



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### Mark Your Calendar!



Shop Talk 3<sup>rd</sup> Thursdays at 2 p.m. ET

### Registration Link

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 highrisk 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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