

# COVID-19 Updates, Definition Changes for Up-to-Date COVID-19 Vaccination Status, and Updates to COVID-19 Surveillance Pathways and COVID-19 Vaccination Modules

## Welcome!

Chat with Technical Support if you need assistance

### Presented by:

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Infection Prevention Technical Advisor

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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. 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 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 family and doing outdoor activities.**

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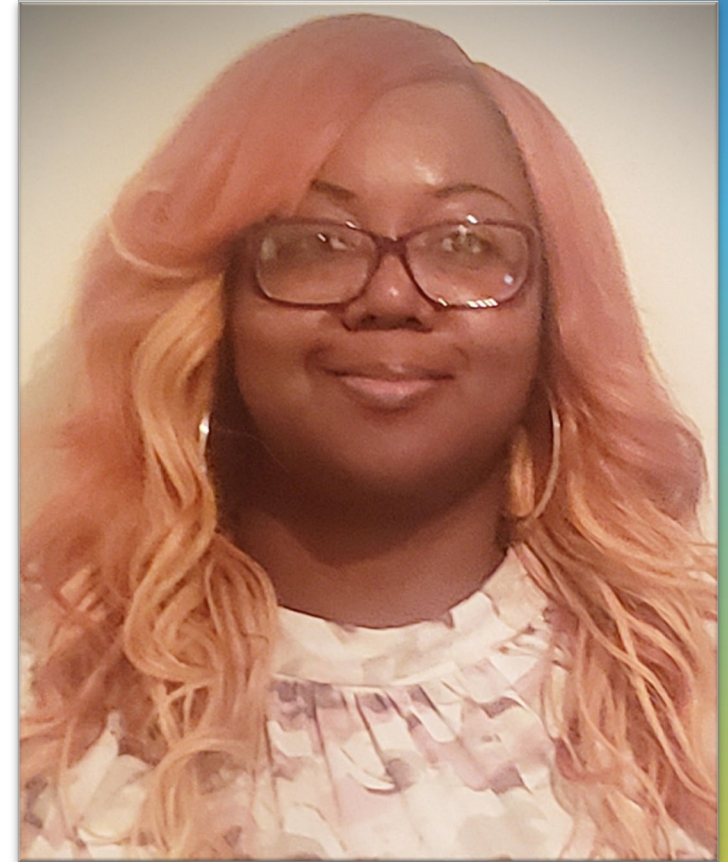
# Paula St. Hill, MPH, A-IPC

## 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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# 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 was an infection prevention and control (IPC) subject matter expert for domestic and international IPC initiatives and emergency responses, including Ebola outbreaks and 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.**

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# Objectives

## Agenda:

- COVID-19 vaccine updates
- Definition changes for up-to-date COVID-19 vaccination status
- HCP Influenza Reporting
- Live questions and answers

# COVID-19 Vaccine Updates

# COVID-19 Vaccine Update

- FDA approved updated 2023-2024 COVID-19 vaccines for this fall/winter season. The bivalent vaccines are no longer authorized as of 9/12/2023.
- CDC recommends everyone aged six months and older receive the 2023-2024 updated COVID-19 vaccine to protect against serious illness from COVID-19 and to remain up to date.
- **Under the new recommendations, most individuals will not be up to date with COVID-19 vaccines until they receive the 2023-2024 updated COVID-19 vaccine.**
- The new definition of up-to-date COVID-19 vaccines will apply for NHSN surveillance beginning the week of **September 25, 2023–October 1, 2023** (the first week of reporting Quarter 4 2023).
- The new definition applies to both the **NHSN Weekly HCP and Resident Vaccination Forms and the NHSN COVID-19 Surveillance Pathways (RIFC Form).**



# COVID-19 Vaccine Update-Webinar Dates & Registration

**Topic: Up-to-Date Vaccination Status: Surveillance Definition Change for Long-Term Care Facilities (Replay)**

**When: September 22, 2023, 2 p.m. Eastern Time (U.S. and Canada)**

Register in advance for this webinar:

[https://cdc.zoomgov.com/webinar/register/WN\\_7bPDRWYETNSf6mnlo6qQvw](https://cdc.zoomgov.com/webinar/register/WN_7bPDRWYETNSf6mnlo6qQvw)

**Topic: Up-to-Date Vaccination Status: Surveillance Definition Change for Long-Term Care Facilities (Replay)**

**When: September 25, 2023, 1 p.m. Eastern Time (U.S. and Canada)**

Register in advance for this webinar:

[https://cdc.zoomgov.com/webinar/register/WN\\_JGOOXuiSAW1VF2zS-\\_baw](https://cdc.zoomgov.com/webinar/register/WN_JGOOXuiSAW1VF2zS-_baw)

**Topic: Up-to-Date Vaccination Status: Surveillance Definition Change for Long-Term Care Facilities (Replay)**

**When: October 2, 2023, 1 p.m. Eastern Time (U.S. and Canada)**

Register in advance for this webinar:

[https://cdc.zoomgov.com/webinar/register/WN\\_TDnotOroSbiPut3-2-5RtQ](https://cdc.zoomgov.com/webinar/register/WN_TDnotOroSbiPut3-2-5RtQ)

# Up to Date: Quarter 4 of 2023

(September 25, 2023- December 31, 2023)

Individuals are considered up to date with their COVID-19 vaccines for the purpose of NHSN surveillance if they meet (1) of the following criteria:

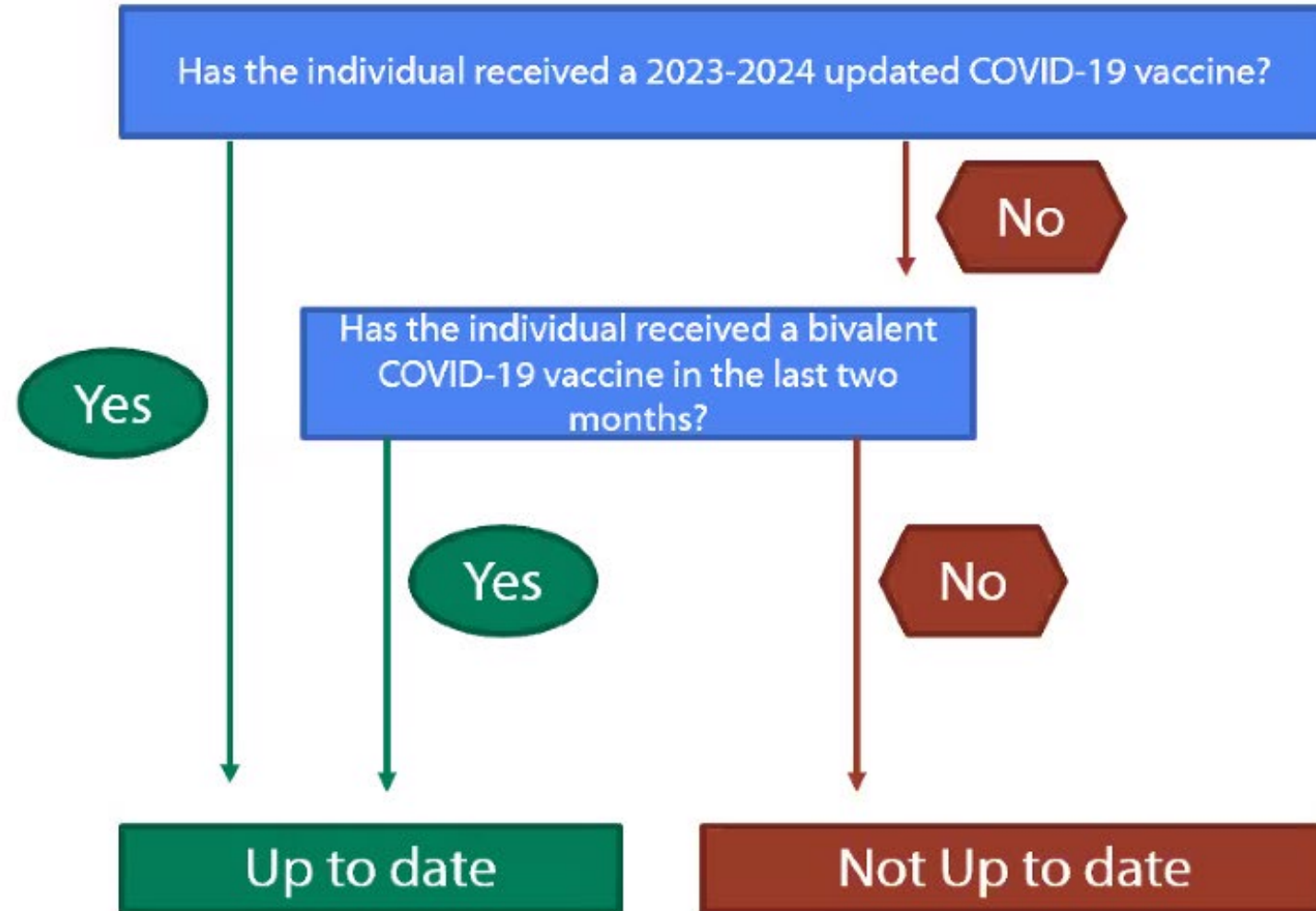
Received a **2023-2024 Updated COVID-19 Vaccine**

or

(Received bivalent\* COVID-19 vaccine within the last 2 months)

\*bivalent vaccines are no longer authorized as of 9/12/2023

# Flow Chart: Quarter 4 2023 Up to Date with COVID-19 Vaccines



# What does this mean for reporting Up to Date?

- **As of 9/25/2023**, we expect that **most** LTC residents and HCP will **no longer be up to date** because they haven't yet received the 2023-2024 updated COVID-19 vaccine.
- If this is the case, facilities should report **zero (0)** up to date (for both vaccination and RIFC Pathway forms) until individuals receive the 2023-2024 updated COVID-19 vaccine.
- Residents and HCP will become up to date again as they receive the 2023-2024 updated COVID-19 vaccine this fall/winter.

# Where to report: COVID-19 Surveillance Pathway: RIFC

The Resident Impact and Facility Capacity Pathway can be found under “Pathway Data Reporting”

New definition affects the following variables:

- *Up to Date*
- *Hospitalizations with a positive COVID-19 Test and Up to Date*

NHSN - National Healthcare Safety Network (AWDCV-NHSN-WL01:8001)

NHSN Home

- Alerts
- Dashboard
- Reporting Plan
- Resident
- Event
- Summary Data
- COVID-19
- Vaccination Summary
- Import/Export
- Surveys
- Analysis
- Users
- Facility
- Group
- Tools
- POC Vocab
- Dynamic Forms

NHSN Long Term Care Facility Component Home Page

- Long Term Care Dashboard
- Action Items

COVID-19 Sub-menu:

- Dashboard
- Pathway Data Reporting
- POC Test Result Reporting
- COVID-19 Event
- COVID-19 Vaccination - HCW
- COVID-19 Vaccination - Residents
- Event-Level COVID-19 Vaccination Form - HCW
- Event-Level COVID-19 Vaccination Form - Residents

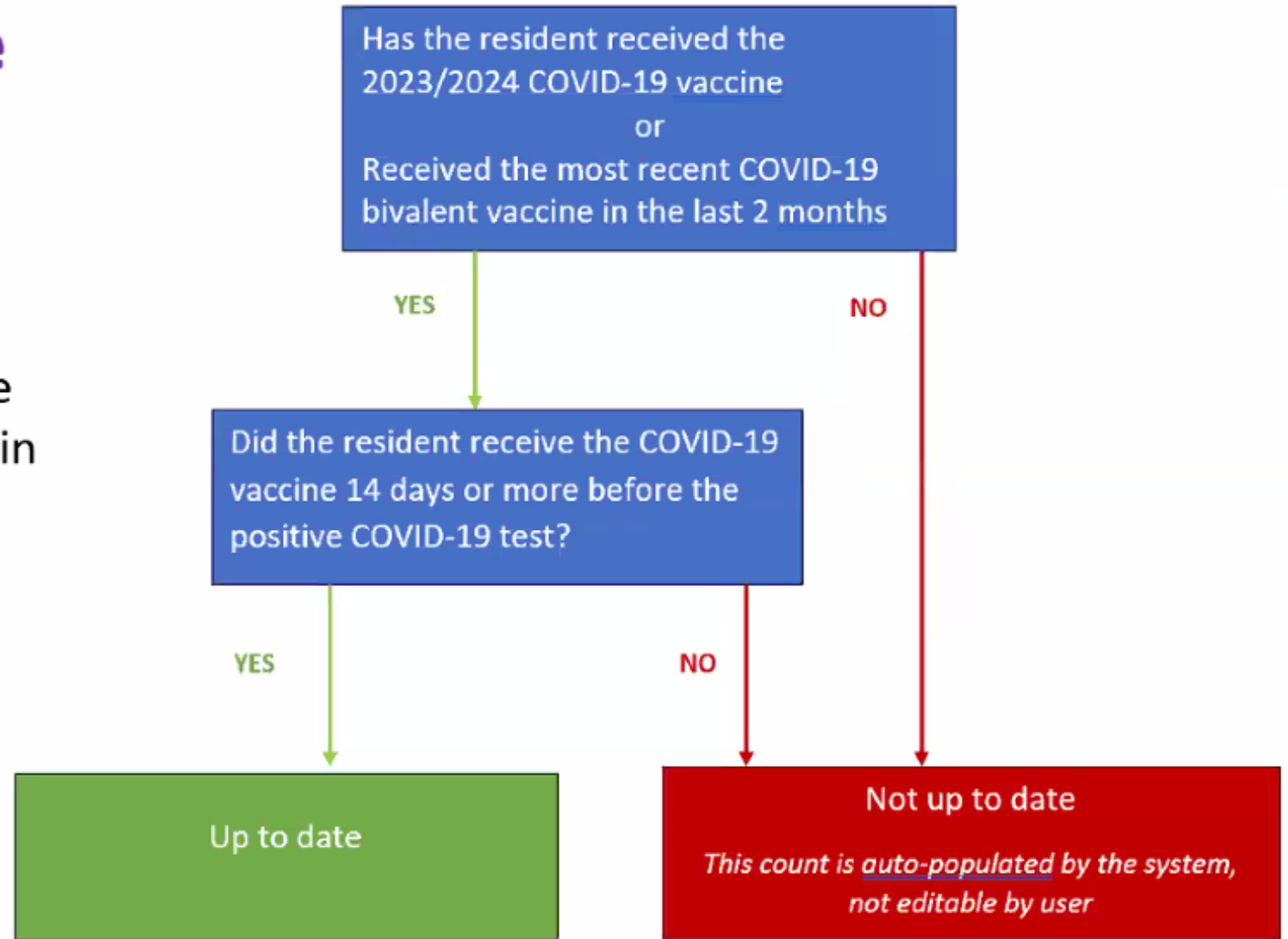
Add COVID-19 Data

Date for which counts are reported: Facility CCN: Facility Type:

Resident Impact and Facility Capacity Staff and Personnel Impact

# COVID-19 Surveillance Pathway: RIFC

Decision tree can be used to determine if a newly positive resident should be included in the up to date count



# Person-Level Vaccination Forms: Up to Date Definition

- Updates beginning 9/25/23 will include:
  - Adding the 2023-2024 updated COVID-19 vaccine for all doses
  - ⑤ – Automatically classifying residents and HCP according to the new definition beginning 9/25/23
  - Updating any doses received from 9/12/23 – 9/24/23 to the 2023-2024 updated COVID-19 vaccine
    - The bivalent Moderna and bivalent Pfizer vaccine are no longer FDA authorized as of 9/12/2023. Until 9/25, continue entering doses as bivalent. The system will update these for you on 9/25.

# COVID-19 Vaccine Types

New



## 2023-2024 Updated COVID-19 Vaccine Up to Date!

The 2023-2024 updated COVID-19 vaccine more closely targets the XBB lineage of the [Omicron variant](#) and could restore protection against severe COVID-19 that may have decreased over time. As of September 12, 2023, the 2023-2024 updated Pfizer-BioNTech and Moderna COVID-19 vaccines were recommended by CDC for use in the United States.

### 2022-2023 Bivalent Vaccines

The 2022-2023 bivalent vaccines were designed to protect against **both** the original virus that causes COVID-19 **and** the Omicron variants BA.4 and BA.5. Two COVID-19 vaccine manufacturers, Pfizer-BioNTech and Moderna, had developed bivalent COVID-19 vaccines. As of September 11, 2023, the bivalent Pfizer-BioNTech and Moderna COVID-19 vaccines are no longer available for use in the United States.

### Original Vaccines

Previous COVID-19 vaccines were called “original” because they were designed to protect against the original virus that causes COVID-19. As of April 18, 2023, the original Pfizer-BioNTech and Moderna COVID-19 vaccines are no longer available for use in the United States. As of May 6, 2023, J&J/Janssen COVID-19 vaccine is no longer available for use in the United States.



# Example #1: Vaccination Form

- Chloe is a **resident** who received 2 doses of original Moderna primary series in June 2021. She received a bivalent Moderna Vaccine in December 2022 and received a 2023-2024 updated COVID-19 vaccine in September 2023.
  - Is she up to date?

# Example #1: Vaccination Form

- Chloe is a **resident** who received 2 doses of original Moderna primary series in June 2021. She received a bivalent Moderna Vaccine in December 2022 and received a 2023-2024 updated COVID-19 vaccine in September 2023.

– Is she up to date?



- Yes, Chloe is up to date because she received the 2023/2024 updated COVID-19 vaccine

# Example #1: RIFC Pathway

- Chloe is a **resident** who tested positive for COVID-19 **4 days ago**. She has received 2 doses of original Moderna primary series in June 2021. She received a bivalent Moderna Vaccine in December 2022 and received a 2023-2024 updated COVID-19 vaccine **15 days prior** to testing positive. Chloe was also admitted to the hospital **3 days ago** due to shortness of breath and low oxygen levels.
  - What categories will she be counted in for the RIFC Pathway?

# Example #1: RIFC Pathway

- Chloe is a **resident** who tested positive for COVID-19 **4 days ago**. She has received 2 doses of original Moderna primary series in June 2021. She received a bivalent Moderna Vaccine in December 2022 and received a 2023-2024 updated COVID-19 vaccine **15 days prior** to testing positive. Chloe was also admitted to the hospital **3 days ago** due to shortness of breath and low oxygen levels.
  - What categories will she be counted in for the RIFC Pathway?
    - ✓ **Positive Tests:** Chloe has a newly positive SARS-CoV-2 viral test result
    - ✓ **Up to date:** Chloe received the 2023-2024 updated COVID-19 vaccine 14 days or more before the specimen collection date of the newly positive test result.
    - ✓ **Hospitalization with a Positive COVID-19 Test:** Chloe tested positive in the 10 days prior to the hospitalization
    - ✓ **Hospitalization with a Positive COVID-19 Test and Up to Date:** Chloe tested positive in the 10 days prior to the hospitalization and was considered up to date 14 days prior to the newly positive test.



## Example #3: Vaccination Form

- Kitt is a **resident** who has refused all previous COVID-19 vaccines but decided to receive the 2023-2024 updated COVID-19 vaccine.
  - Is she up to date?

## Example #3: Vaccination Form

- Kitt is a **resident** who has refused all previous COVID-19 vaccines but decided to receive the 2023-2024 updated COVID-19 vaccine.

– Is she up to date?



- Yes, she is up to date because she received the 2023-2024 updated COVID-19 vaccine

## Example #3: RIFC Pathway

- Kitt is a **resident** who has refused all previous COVID-19 vaccines but decided to receive the 2023-2024 updated COVID-19 vaccine.
- Kitt received the 2023-2024 updated COVID-19 vaccine 20 days prior to testing positive.
  - Would she be counted in the up to date category of the RIFC Pathway?
    - Yes, Kitt is up to date because she received the 2023-2024 updated COVID-19 vaccine 14 days or more before the specimen collection date of the newly positive test result.



# Example #4: Vaccination Form

- Josh, received a dose of bivalent Pfizer 1 month ago in August 2023.
  - Is he up to date?



- Yes, Josh is up to date because he received the bivalent Pfizer 1 month ago and is therefore not yet eligible to receive the 2023-2024 updated COVID-19 vaccine.



## Example #4: RIFC Pathway

- Josh received a dose of bivalent Pfizer 1 month ago in August 2023.
- Josh received the bivalent vaccine **10 days** prior to testing positive.
  - Would he be counted in the up to date category of the RIFC Pathway?



- No, Josh is not counted in the up to date category because he received the most recent dose less than 14 days before the specimen collection date of the newly positive test result.

- Would he be counted in the hospitalizations categories for the RIFC Pathway?



- No, Josh was not officially admitted to the hospital therefore would not be included in the *Hospitalizations with a Positive COVID-19 Test* or the *Hospitalizations with a Positive COVID-19 Test and Up to Date*.



# Key Points Summary

- **As of 9/25/2023**, we expect that **most** LTC residents and HCP will **no longer be up to date** until they received the 2023-2024 updated COVID-19 vaccine.
- If this is the case, facilities should report **zero (0)** up to date (for both vaccination and RIFC Pathway forms) until individuals receive the 2023-2024 updated COVID-19 vaccine.
- Residents and HCP will become up to date again as they receive the 2023-2024 updated COVID-19 vaccine this fall/winter.

# HCP Influenza Reporting

# What To Report

Annual HCP influenza vaccination summary data for the 2023-2024 flu season



# What To Report

- First, the Healthcare Personnel Safety (HPS) Component in **NHSN** must be activated.
  - Be sure not to de-activate any other already checked components, such as the LTC component.



# What To Report

- The reporting period for the 2023-2024 influenza season is from October 1, 2023, through March 31, 2024.
- The deadline to report the one-time summary report is **May 15, 2024**.

# Who Can Report

- NHSN-designated facility admin (FA) is the only person who can initiate the process to activate the HPS component in NHSN.
  - FA must have SAMS Level 3 reporting access to activate the HPS component.
  - FA can designate another user to do the reporting, once activated.

# Common Issues (last season)

- NHSN-designated FA is no longer employed at the facility.
- FA and/or other NHSN users did not have Level 3 access.
- The LTC component was deactivated while trying to activate the HPS component.
- Facilities not aware of the reporting deadline.



# How To Be Prepared

- Ensure each entity has multiple NHSN users that have admin rights assigned to them.
- Ensure the person listed as FA is still with the facility.
- Ensure all NHSN users have Level 3 access.
  - If you do not have Level 3 access, you should have received an invitation from NHSN.
  - To request Level 3 access, email [NHSN@cdc.gov](mailto:NHSN@cdc.gov) and put “SAMS Level 3 Access” in the email subject line.

# Resources

## Where can facilities access training materials?

- Materials pertaining to annual HCP influenza vaccination data reporting are organized under the “Annual” reporting headings on this webpage: [HCP Flu Vaccination | HPS | NHSN | CDC](#).

## What are key training materials for LTCFs?

- This slide deck reviews how LTC facilities can report annual HCP influenza vaccination data through NHSN: [HCP Influenza Vaccination Summary \(cdc.gov\)](#).
- This operational guidance document outlines the CMS reporting requirement: [Operational Guidance for Skilled Nursing Facilities to Report Annual Influenza Vaccination Data to CDC’s NHSN](#).
- There will be a refresher training for LTCFs this fall. Registration information will be provided at a later date.

## Who do facilities contact with questions?

- Please direct all questions regarding CMS SNF QRP requirements and deadlines to: [SNFQualityQuestions@cms.hhs.gov](mailto:SNFQualityQuestions@cms.hhs.gov).
- For questions on how to enter annual HCP influenza vaccination summary data through NHSN, please send an e-mail to [nhsn@cdc.gov](mailto:nhsn@cdc.gov) with “HPS Flu Summary –LTCF” in the e-mail subject line.

# Contact the Patient Safety Team

[patientsafety@alliantHealth.org](mailto:patientsafety@alliantHealth.org)



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**Questions?**



# 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



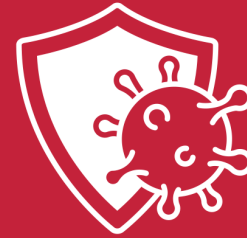
## CHRONIC DISEASE SELF-MANAGEMENT

- Increase instances of adequately diagnosed and controlled hypertension
- Increase use of cardiac rehabilitation programs
- Reduce instances of uncontrolled diabetes
- Identify patients at 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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