COVID-19 Updates, Definition Changes for Up-to-Date COVID-19 Vaccination Status, HCP Person-Level COVID-19 Vaccination Form, and Influenza Reporting

Welcome!
Chat with Technical Support if you need assistance

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

October 19, 2023
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.

Contact: Paula.StHill@allianthealth.org
Donald Chitanda, MPH, CIC

INFECTION PREVENTION TECHNICAL ADVISOR

Donald is a health professional with experience in public health epidemiology and infection prevention. Over the past several years, he worked as an Infection Preventionist at the hospital - and system-level, where he was part of a task force to ensure the safety of caregivers and patients during the ongoing COVID-19 pandemic. In addition, he was 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.

Contact: Donald.Chitanda@AlliantHealth.org
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. 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.

Contact: Erica.Umeakunne@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 camping, bicycling and running.

Contact: Amy.Ward@AlliantHealth.org
Objectives

Agenda:

• COVID-19 updates
• Review Viral Respiratory Pathogens Toolkit for Nursing Homes
• Definition changes for up-to-date COVID-19 vaccination status
• Definition change for completed primary vaccine series for HCP
• Influenza reporting
• SAMS and NHSN updates
• Live questions and answers
COVID-19 Updates
COVID-19 U.S. Hospital Admission Rates

United States COVID-19 Hospitalizations, Deaths, Emergency Department (ED) Visits, and Test Positivity by Geographic Area

Maps, charts, and data provided by CDC, updates weekly for the previous MMWR week (Sunday-Saturday) on Fridays by 8 pm ET.

View Footnotes and Download Data

COVID-19 HOSPITAL ADMISSIONS (PAST WEEK)
18,139

% CHANGE IN COVID-19 HOSPITAL ADMISSIONS
-6%

COVID-19 HOSPITAL ADMISSIONS PER 100,000 (PAST WEEK)
5.46

CDC | Data through: September 30, 2023. Posted: October 10, 2023

COVID-19 U.S. Hospital Admission Rates

COVID-19 U.S. ED Visits

United States COVID-19 Hospitalizations, Deaths, Emergency Department (ED) Visits, and Test Positivity by Geographic Area

Maps, charts, and data provided by CDC, updates weekly for the previous MMWR week (Sunday-Saturday) on Fridays by 8 pm ET†

View Footnotes and Download Data

WEEKLY % OF COVID-19 ED VISITS
1.6%

% CHANGE IN COVID-19 ED VISITS (%) FROM PRIOR WEEK
-14.5%

COVID-19 HOSPITAL ADMISSIONS (PAST WEEK)
18,139

CDC | Data through: September 30, 2023. Posted: October 10, 2023

https://covid.cdc.gov/covid-data-tracker/#/maps_positivity-week
# COVID-19 U.S. Deaths

United States COVID-19 Hospitalizations, Deaths, Emergency Department (ED) Visits, and Test Positivity by Geographic Area

Maps, charts, and data provided by CDC, updates weekly for the previous MMWR week (Sunday-Saturday) on Fridays by 8 pm ET

View Footnotes and Download Data

<table>
<thead>
<tr>
<th></th>
<th>% COVID-19 DEATHS IN PAST WEEK</th>
<th>% CHANGE FROM PRIOR WEEK</th>
<th>ABSOLUTE CHANGE FROM PRIOR WEEK</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>2.7%</td>
<td>3.8%</td>
<td>0.1%</td>
</tr>
</tbody>
</table>

CDC | Data through: September 30, 2023. Posted: October 10, 2023

https://covid.cdc.gov/covid-data-tracker/#vaccinations-nursing-homes
COVID-19 U.S. Deaths

Percentage of Provisional Deaths Due to COVID-19 in the Past Week, by State/Territory – United States

https://covid.cdc.gov/covid-data-tracker/#maps_percent-covid-deaths
2023-2024 Updated COVID-19 Vaccine

• On September 11, 2023, the Food and Drug Administration (FDA) approved the updated (2023–2024 Formula) COVID-19 mRNA vaccines by Moderna and Pfizer-BioNTech for persons aged ≥12 years and authorized these vaccines for persons aged 6 months–11 years under Emergency Use Authorization (EUA)

• On October 3, 2023, the FDA authorized the updated COVID-19 vaccine by Novavax for use in persons aged ≥12 years under EUA

• The updated COVID-19 vaccines include a monovalent XBB.1.5 component, which is meant to broaden vaccine-induced immunity and provide protection against currently circulating SARS-CoV-2 XBB-sublineage variants, including against severe COVID-19–associated illness and death

• The Novavax COVID-19 Vaccine, Adjuvanted (Original monovalent), is no longer authorized for use in the United States

• The FDA granted the emergency use authorization of the Novavax COVID-19 Vaccine, Adjuvanted (2023-2024 Formula)
Use of COVID-19 Vaccines in the United States

Summary of recent changes (last updated October 6, 2023):

- The updated 2023–2024 formulation of Novavax COVID-19 vaccine is recommended for people ages 12 years and older as follows:
  - Initial vaccination: two doses of updated (2023–2024 formula) Novavax COVID-19 vaccine three weeks apart
  - Previously vaccinated with any original monovalent or bivalent COVID-19 vaccine (Moderna, Novavax, Pfizer-BioNTech, Janssen): one dose of updated (2023–2024 formula) Novavax vaccine

- People who are moderately or severely immunocompromised may receive one or more additional updated (2023–2024 formula) Novavax vaccine doses (administered at least two months following the last dose of a COVID-19 vaccine (2023-2024 formula))

- People ages 12 years and older have the option of receiving either the updated (2023–2024 formula) mRNA (Moderna, Pfizer-BioNTech) or the updated (2023–2024 formula) Novavax vaccine

Viral Respiratory Pathogens Toolkit for Nursing Homes
Preparing for and Responding to Nursing Home Residents or Health Care Personnel (HCP) Who Develop Signs or Symptoms of a Respiratory Viral Infection

- **ACTION: PREPARE** for respiratory viruses (e.g., SARS-CoV-2, influenza, RSV)
  - Vaccinate
  - Allocate resources
  - Monitor and Mask
  - Educate
  - Ventilate
  - Test and Treat

- **ACTION: RESPOND** when a resident or HCP develops signs or symptoms of a respiratory viral infection
  - For Residents: Apply appropriate transmission-based precautions
  - For HCP: Test anyone with respiratory illness signs or symptoms
  - Investigate for potential respiratory virus spread among residents and HCP

- **ACTION: CONTROL** respiratory virus spread when transmission is identified
  - Notify the local or state public health department when respiratory viral outbreaks* are suspected or confirmed
  - Consider establishing cohort units for residents with confirmed infections
  - Limit group activities and communal dining
  - Consider modifications to indoor visitation policies
  - Avoid new admissions or transfers into and out of units or wards with infected residents or facility-wide if the outbreak is more widespread

Definition Changes for Up-to-Date COVID-19 Vaccination Status
Definition for Up-to-Date COVID-19 Vaccination Status (for the COVID-19 Vaccination Modules and the Resident Impact and Facility Capacity (RIFC) Pathway)

For Reporting Period Quarter 4 2023 (September 25, 2023–December 31, 2023), individuals are considered up-to-date with their COVID-19 vaccines during the surveillance period of September 25, 2023, through December 31, 2023, for NHSN surveillance if they meet one of the following criteria:

- Received a 2023-2024 Updated COVID-19 Vaccine
- **Received bivalent COVID-19 vaccine in the last two months**

**As of 9/12/2023, the bivalent COVID-19 vaccines are no longer FDA-authorized**

Appendix 1a: Decision Tree: Up to date with COVID-19 Vaccines during the surveillance period of September 25, 2023 – December 31, 2023 for the COVID-19 Vaccination Modules

Facilities can use the following decision tree to help determine Up to date vaccination status for the NHSN COVID-19 Vaccination Modules during the reporting period of Quarter 4 of 2023 (representing vaccination data for September 25, 2023 – December 31, 2023).

- Have they received a 2023-2024 updated COVID-19 vaccine?
  - No
  - Yes
    - Did they receive their bivalent COVID-19 vaccine within the last two months?
      - Yes
        - Up To Date
      - No
        - Not Up To Date

Most HCPs will no longer be up-to-date because they have NOT yet received the 2023-2024 Updated COVID-19 vaccine. This is normal and expected!

(Again, if an individual received a bivalent vaccine within the past two months, they are still considered up-to-date.)

– If this is the case, facilities should report zero (0) up-to-date until individuals receive the 2023-2024 Updated COVID-19 vaccine
Appendix 1b: Decision Tree: Up to date with COVID-19 Vaccines during the surveillance period September 25, 2023 – December 31, 2023 for the Long-Term Care RIFC Pathway

Long-Term Care Facilities can use the following decision tree to help determine Up to date vaccination status for the RIFC Pathway. Please note this refers to reporting data through the NHSN COVID-19 RIFC Pathway for the reporting period of Quarter 4 of 2023 (representing data for September 25, 2023 – December 31, 2023).

Has the resident received the 2023/2024 COVID-19 vaccine or Received the most recent COVID-19 bivalent vaccine in the last 2 months

- YES
- NO

Did the resident receive the COVID-19 vaccine 14 days or more before the positive COVID-19 test?

- YES
- NO

Up to date

Not up to date
This count is auto-populated by the system, not editable by user

Definition Change for Completed Primary Vaccine Series for Healthcare Workers (Applies ONLY to HCP Form for Quarter 4 2023)
Complete primary series is defined as receiving:

- A two-dose series of a monovalent COVID-19 vaccine
- OR
- A single dose of Janssen
- OR
- A single dose of bivalent vaccine
- OR
- A single dose of 2023-2024 updated COVID-19 vaccine

Completed Primary Vaccine Series for Health Care Workers

<table>
<thead>
<tr>
<th>Healthcare Personnel (HCP) Categories</th>
<th>Employee HCP</th>
<th>Non-Employee HCP</th>
</tr>
</thead>
<tbody>
<tr>
<td><em>All Core HCP</em></td>
<td></td>
<td></td>
</tr>
<tr>
<td><em>All HCP</em></td>
<td></td>
<td></td>
</tr>
<tr>
<td><em>Employees (staff on facility payroll)</em></td>
<td></td>
<td></td>
</tr>
<tr>
<td><em>Licensed independent practitioners: Physicians, advanced practice nurses, &amp; physician assistants</em></td>
<td></td>
<td></td>
</tr>
<tr>
<td><em>Adult students/trainees</em> &amp; volunteers*</td>
<td></td>
<td></td>
</tr>
<tr>
<td><em>Other Contract Personnel</em></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

1. *Number of HCP that were eligible to have worked at this healthcare facility for at least 1 day during the week of data collection*

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

3. *Cumulative number of HCP in Question #1 with other conditions:
   - 3.1 *Medical contraindication to COVID-19 vaccine*
   - 3.2 *Offered but declined COVID-19*
Let’s Try a Few Examples!

Tommy Pickles is a nursing home resident who completed his primary COVID-19 vaccine series in January 2021, received an original monovalent booster in October 2021, received an updated (bivalent) dose on December 25, 2022, and received the 2023-2024 Updated COVID-19 Vaccine.

Is he considered up-to-date with COVID-19 vaccines for Quarter 4, 2023?
Answer

Yes. Tommy is considered up to date for weeks during Quarter 4, 2023, since he received the 2023-2024 updated COVID-19 vaccine.

Where to document?

Question 2. *Cumulative number of residents in Question #1 who are up to date with COVID-19 vaccines.

Example #2

Suzy Sheep is a nursing home resident who completed her primary vaccine series in March 2021, received an original (monovalent) booster dose in October 2021, and declined to receive the 2023-2024 Updated COVID-19 vaccine.

Is she considered up-to-date with COVID-19 vaccines for Quarter 4, 2023?
Answer

**No.** Suzy is not considered up to date with COVID-19 vaccines *for weeks during Quarter 4, 2023*, since she did not receive the 2023-2024 updated COVID-19 vaccine.

**Where to document?**

3.2. *Offered but declined COVID-19 vaccine.*

Example #3

Rebecca Rabbit, a health care worker, did not complete her primary vaccine series, received an updated (bivalent) dose in June 2023 and has not received the 2023-2024 updated COVID-19 vaccine.

Has she received a complete primary COVID-19 series, and should she be counted in the HCP Form Question 2 for Quarter 4, 2023?
Answer

Yes. Rebecca is considered to have received a **complete primary COVID-19 series** for Quarter 4, 2023, since she received an updated bivalent dose and should be counted in the HCP Form Question 2. However, she is **not considered up-to-date** since she has not received the 2023-2024 updated COVID-19 vaccine.

Where to document?
2.*Cumulative number of HCPs in Question #1 who have received complete primary series COVID-19 vaccine(s) at this facility or elsewhere since December 2020.

Example #4

Vax C. Nate, a health care worker, completed his primary vaccine series in March 2021 and received the 2023-2024 updated COVID-19 vaccine in October 2023.

Is he considered up-to-date with COVID-19 vaccines for Quarter 4, 2023?
Answer

Yes. He is considered up-to-date with COVID-19 vaccines for weeks during Quarter 4, 2023, since he received the 2023-2024 Updated COVID-19 Vaccine.

Where to document?

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

4.*Cumulative number of HCP in question #1 who are up-to-date with COVID-19 vaccines.

Example #5

Danny Dog, a nursing home resident, has previously declined all COVID-19 vaccines but received the 2023-2024 updated COVID-19 vaccine in October 2023.

Is he considered up-to-date with COVID-19 vaccines for Quarter 4, 2023?
Answer

Yes. Danny is considered up to date for weeks during Quarter 4, 2023, since he received the 2023-2024 Updated COVID-19 Vaccine.

Where to document?

Question 2. *Cumulative number of residents in Question #1 who are up-to-date with COVID-19 vaccines.

Example #6

Stu Pickles, a health care worker, completed his primary COVID-19 vaccine series in February 2021 and received the bivalent COVID-19 vaccine on September 5, 2023.

Is he considered up-to-date with COVID-19 vaccines for Quarter 4, 2023?
Answer

Yes. Stu is considered up-to-date with COVID-19 vaccines for weeks during Quarter 4, 2023, since he received the bivalent COVID-19 vaccine within the last two months.

Where to document?

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

4.*Cumulative number of HCP in question #1 who are up-to-date with COVID-19 vaccines.

REMEMBER!

Complete *primary series* (for HCP form) is defined as receiving:

A two-dose series of a monovalent COVID-19 vaccine

**OR**

A single dose of Janssen

**OR**

A single dose of bivalent vaccine

**OR**

A single dose of 2023-2024 updated COVID-19 vaccine

Reporting HCP Person-Level Vaccination Data
Options to Submit COVID-19 Vaccination Data

Facilities will continue to submit cumulative COVID-19 vaccination data to the HPS COVID-19 Vaccination Module. Data can be reported to this module in one of three ways:

1. Directly into the data entry screen of the COVID-19 Vaccination Module

2. Through .CSV upload into the Weekly COVID-19 Vaccination Module

3. As of September 2023, facilities can use the Person-Level COVID-19 Vaccination Form to enter vaccination information on individual health care personnel (HCP). Click the “view reporting summary and submit” button to have the totals calculated for you and submitted to the COVID-19 Vaccination Module.

What is the HPS Person-Level COVID-19 Vaccination Form?

- The Person-Level COVID-19 Vaccination Form is an **optional tool** that can be used to report data to the NHSN Healthcare Personnel (HCP) COVID-19 Vaccination module

- Data on individual HCP are directly entered line by line in the optional Person-Level COVID-19 Vaccination form or can uploaded via a .CSV file

- **Makes reporting vaccination data easier and more efficient!**

Changes in Reporting Definitions (cont.)

- Definition of up to date for NHSN surveillance may change each quarter:
  - Understanding Key Terms and Definitions

- Reporting periods for COVID-19 Vaccination:
  - Quarter 1 (January 1, 2023 - March 31, 2023)
  - Quarter 2 (April 1, 2023 - June 30, 2023)
  - Quarter 3 (July 1, 2023 - September 30, 2023)
  - Quarter 4 (October 1, 2023 - December 31, 2023)

The person-level forms apply these definitions for you!
Requirements To Use Person-Level Vaccination Form

User Rights Requirement for Facility Administrators

- NHSN Facility Administrators (FA) will automatically have the ‘Administrator’ and ‘All Rights’ boxes checked in the User Rights tab of NHSN.
- A FA or a user with ‘Administrator’ rights can grant additional rights to users in NHSN for a facility.
- Conferring user rights to users for a facility within the NHSN application provides enhanced security for person-level staff vaccination data.

<table>
<thead>
<tr>
<th>Rights</th>
<th>Healthcare Personnel Safety</th>
</tr>
</thead>
<tbody>
<tr>
<td>Administrator</td>
<td>☑</td>
</tr>
<tr>
<td>All Rights</td>
<td>☑</td>
</tr>
<tr>
<td>Analyze Data</td>
<td></td>
</tr>
<tr>
<td>Add, Edit, Delete</td>
<td></td>
</tr>
<tr>
<td>View Data</td>
<td></td>
</tr>
<tr>
<td>Staff/Visitor - Add, Edit, Delete</td>
<td></td>
</tr>
<tr>
<td>Staff/Visitor - View</td>
<td></td>
</tr>
<tr>
<td>Customize Rights</td>
<td></td>
</tr>
</tbody>
</table>

Needs to be checked to report data using the Person-Level Vaccination Form

Requirements To Use Person-Level Vaccination Form

User Rights Requirements for Non-Facility Administrators

- If a user is not a NHSN facility administrator (FA), the user must have the “All Rights” box checked in the User Rights tab of NHSN in order to submit person-level data using the HPS Person-Level Vaccination Form.

- Checking the “All Rights” box will also automatically check the “Analyze Data,” “Add, Edit, Delete,” and “View Data” boxes.

<table>
<thead>
<tr>
<th>Rights</th>
<th>Healthcare Personnel Safety</th>
</tr>
</thead>
<tbody>
<tr>
<td>Administrator</td>
<td></td>
</tr>
<tr>
<td>All Rights</td>
<td>✓</td>
</tr>
<tr>
<td>Analyze Data</td>
<td>✓</td>
</tr>
<tr>
<td>Add, Edit, Delete</td>
<td>✓</td>
</tr>
<tr>
<td>View Data</td>
<td>✓</td>
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<tr>
<td>Staff/Visitor - Add, Edit, Delete</td>
<td>✓</td>
</tr>
<tr>
<td>Staff/Visitor - View</td>
<td></td>
</tr>
</tbody>
</table>

Customize Rights ✓

Needs to be checked to report data using the Person-Level Vaccination Form

NHSN Facility Administrators should Review User’s Rights

To review User’s Rights:

- Select Users > Find from the left navigation bar:

- Locate the user’s profile, and then select the user’s name

- Click on “Edit” at the bottom of the page, and then click on “Edit Rights” at the bottom of the next page:

NHSN Facility Administrators should Review User’s Rights (cont.)

- Check the boxes in the **User Rights** page of NHSN to confer rights to the user.
- Click on “Save” at the bottom of the form to save the changes made.

![Rights Table]

- Needs to be checked to report data using the Person-Level Vaccination Form

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[Link to CDC Guidance](https://www.cdc.gov/nhsn/pdfs/hps/covidvax/hps-nhsn-person-level-vaccination-sep-2023-508.pdf)
Person-Level Vaccination Form: Up to Date Definition

- Updates beginning 9/25/23 will include:
  - Adding the 2023-2024 updated COVID-19 vaccine for all doses
  - Automatically classifying HCP according to the new definition beginning 9/25/23
  - Changing 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, enter doses as bivalent. The system will update these for you on 9/25.
How To Enter Data: Person-Level Vaccination Form

Location of the Person-Level Vaccination Form

- To access the Person-Level Vaccination Form in the Healthcare Personnel Safety (HPS) component:
  - Navigate to the COVID-19 tab on the NHSN homepage
  - Select Person-Level COVID-19 Vaccination Form for HCP

How To Enter Data: Person-Level Vaccination Form

1. In the Person-Level COVID-19 Vaccination Form for HCP:
   - **Add Row**
   - **View Reporting Summary & Submit**
   - **Upload CSV**
   - **Export CSV**
   - **Export SQL**

2. **Unique HCP Identifier**
   - **HCP First Name**
   - **HCP Last Name**
   - **Gender**
   - **Date of Birth**
   - **Ethnicity**

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### Find

- **Find**. If the individual you are adding was previously entered on another event-level form, 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 when you enter these fields using the **+ Add Row** button and click save row.

- **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 Unique HCP Identifier from a list of healthcare workers who have previously had data submitted in NHSN via other Person-Level Forms, or start typing in the Identifier if you already know it

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How To Enter Data: Person-Level Vaccination Form

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

- If the Unique HCP Identifier already exists within the NHSN list, select the healthcare worker in the pop-up window and click Select
  - Demographic information will be filled in for you
- If the healthcare worker is not in the NHSN list, click Cancel
  - You will need to manually enter a new unique Identifier and demographic information
How To Submit Data: Person-Level Vaccination Form

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

- In this example, this healthcare worker was already on the NHSN list, so the identifier and the demographics are filled in.
- Enter vaccination information including the vaccination location type, the HCP category, vaccination dose dates, and vaccine manufacturers (or dates of declination or medical contraindication), and click **Save Row**.

<table>
<thead>
<tr>
<th>Unique HCP Identifier</th>
<th>HCP First Name</th>
<th>HCP Last Name</th>
<th>Gender</th>
<th>Date of Birth</th>
<th>Ethnicity</th>
<th>Race</th>
</tr>
</thead>
<tbody>
<tr>
<td>2236</td>
<td>Judy Freeman</td>
<td></td>
<td>Female</td>
<td>07/13/1962</td>
<td>Hispanic</td>
<td>Native</td>
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</table>

<table>
<thead>
<tr>
<th>Vaccination location type</th>
<th>HCP Category</th>
<th>Dose 1 vaccination date</th>
<th>Dose 1 vaccine manufacturer name</th>
<th>Dose 2 vaccination date</th>
<th>Dose 2 vaccine manufacturer name</th>
<th>Medical contraindication date</th>
<th>Declination date</th>
<th>Declination reason</th>
<th>Unknown/other medication date</th>
<th>Dose 3 Date</th>
<th>Dose 3 Manufacturer</th>
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</thead>
<tbody>
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<td>Employees</td>
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<td>Pfizer-BioNTech COVID-19</td>
<td>01/01/2022</td>
<td>Pfizer-BioNTech COVID-19</td>
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<td></td>
<td></td>
<td></td>
<td>06/01/2023</td>
<td>Updated (Blutel) Pfizer</td>
</tr>
</tbody>
</table>

How To Submit Data: Person-Level Vaccination Form

When all rows of data are entered in the Person-Level COVID-19 Vaccination Form and ready for submission, click the View Reporting Summary & Submit button.

Pro tip! Click out of the data field you just edited in order to save the data.
How To Submit Data: Person-Level Vaccination Form

Reporting Summary Screen: Healthcare Personnel

1. Select the week and vaccination location type for submission.
2. Review totals.

Note: Up to date totals are calculated by the application. Users do not need to apply the up to date definition themselves.

The Reporting Summary screen feeds the aggregate weekly vaccination form when you click save and submit!
How To Submit Data: Person-Level Vaccination Form

Week of data collection: statuses in drop-down menu

1. **Never submitted** = Data for that reporting week have never been submitted by any form or reporting mechanism.

2. **Not eligible for submission using the person-level form** = Weeks already reported to the Weekly COVID-19 Vaccination Summary Module using the standard Weekly Summary form or standard Weekly Summary CSV upload (i.e., NOT via person-level form or person-level CSV) are not eligible for submission using the person-level vaccination form.

3. **Changed since submitted using the person-level form** = Data for this reporting week have been modified since submitted; click the **Re-Submit all changed weeks** button and save.

4. **Blank/ no text next to date** = You have already submitted data for this week using the Person-Level Form, and there have been no updates to the data since submission; no action needed.

HCP Influenza Vaccination Reporting
HCP Influenza Vaccination Summary Reporting

The reporting period for the 2023-2024 influenza season is from October 1, 2023, through March 31, 2024. To meet CMS reporting requirements, HCP influenza vaccination summary data reports must be entered into NHSN no later than May 15, 2024, for the 2023-2024 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

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 monthly 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.
Activating the HCP Component

• Please note that your Facility Administrator (FA) must have SAMS Level 3 reporting access to activate the HPS component.
  – Only the NHSN FA can activate a new component.

• Please do NOT de-activate any other components, such as the LTC component.
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
How To Report Annual HCP Influenza Vaccination Summary Data

NHSN Landing Page

- Select the HCP Safety Component
How To Report Annual HCP Influenza Vaccination Summary Data

HCP Influenza Vaccination Summary Data

- Click “Vaccination Summary” then “Annual Vaccination Flu Summary”
- Select “Add”
- Click “Continue”
How To Report Annual HCP Influenza Vaccination Summary Data

Influenza Vaccination Resources

Annual Flu Summary

Comprehensive Training – September 2023

Comprehensive training slides on collecting and entering HCP influenza vaccination summary data.
Alliant Health and NHSN Updates
Refresher Trainings on Reporting Annual HCP Influenza Vaccination Summary Data on November 21 and November 28
(The content for each webinar is the same)

When: Tuesday, November 21, 2023, at 1:00 p.m. ET
Register in advance for this webinar:
https://cdc.zoomgov.com/webinar/register/WN_PcTHDlv6SC6xyA1VYUEurQ

When: Tuesday, November 28, 2023, at 1:00 p.m. ET
Register in advance for this webinar:
https://cdc.zoomgov.com/webinar/register/WN_lx1CWu4OSTmUDyuPgo07AA
Upcoming Webinars for Reporting of Influenza and RSV

The NHSN Long Term Care and Vaccination Teams will be hosting webinars that focus on Reporting Influenza and RSV Cases and Vaccination for Long-term Care Facility Residents. Long-term care facilities (LTCF) will now be able to report influenza and RSV vaccine and case information in addition to reporting COVID-19 vaccine and case information for LTCF residents. Reporting influenza and RSV data for LTCF Residents is optional and will be completed through the Long-term Care (LTC) Component. LTCFs should continue to follow reporting requirements for submitting COVID-19 data information for residents and staff.

Webinar Dates:

Topic: Optional Reporting of Influenza and RSV Cases and Vaccinations for Residents of Long-term Care Facilities
When: Oct 17, 2023 02:00 PM Eastern Time (US and Canada)
Register in advance for this webinar:
https://cdc.zoomgov.com/webinar/register/WN_I-sb9k4oTDOncbVFkuXI3A

Topic: Optional Reporting of Influenza and RSV Cases and Vaccinations for Residents of Long-term Care Facilities (Replay)
When: Oct 19, 2023 02:00 PM Eastern Time (US and Canada)
Register in advance for this webinar:
https://cdc.zoomgov.com/webinar/register/WN_dO7ifYCESBgzNLGScQhpIQ

Topic: Optional Reporting of Influenza and RSV Cases and Vaccinations for Residents of Long-term Care Facilities (Replay)
When: Oct 26, 2023 02:00 PM Eastern Time (US and Canada)
Register in advance for this webinar:
https://cdc.zoomgov.com/webinar/register/WN_CCkaEVDCSWGn5stkjXU5g
The NHSN Protocol and Training Team (PaTT) invites you to attend their next “Ask the Experts” session on Wednesday, October 25, 2023. Their Surgical Site Infections Subject Matter Experts (SMEs) will help you with SSIs. Audience: PSC users, including acute care or other short-term stay hospitals, Long-term Acute Care Hospitals (LTACH), Inpatient Rehabilitation Facilities (IRF), and Inpatient Psychiatric Facilities (IPF). NOTE: Specific case questions will not be reviewed. All PSC Users of NHSN are invited. However, the conversation will be geared toward newer NHSN users with three years or less experience.

When: Wednesday, October 25, 2023, at 2:00 p.m. ET
Register in advance for this webinar: https://cdc.zoomgov.com/webinar/register/WN_l9R4pXgFRsGFwm3vsfLcLw
NHSN ServiceNow is LIVE

Please submit NHSN questions in ServiceNow instead of using nhsn@cdc.gov, nhsntrain@cdc.gov, and nhsndua@cdc.gov. ServiceNow can be accessed through your SAMS account at https://sams.cdc.gov.

Tickets requiring CDA support and AUR test files should continue to be emailed to nhsnCDA@cdc.gov until further notice. If you are unable to access ServiceNow, you can still email the NHSN Help Desk at nhsn@cdc.gov.
NHSN ServiceNow

For component, you can choose from:

• Patient Safety
• Long-term Care
• Dialysis
• Healthcare Personnel Safety
• Biovigilance
• Outpatient Procedure
• Neonatal
• Medication Safety
• Other
NHSN ServiceNow

For **Category** (using *Long-term Care Component*), you can choose from:

- Add/edit Component
- Alerts
- Analysis
- CAUTI
- CMS Letters
- CMS Reporting
- COVID-19
- COVID-19 Vaccination
- CSV File
- Data Entry
- Data Quality
- DUA
- Email Change
- Enrollment
- Facility Admin Reassignment
- General Analysis
- Group Analysis
- Groups/Super Groups
- Help Desk Support
- LabID Event-CDI
- LabID Event-MDRO
- NHSN Access
- NHSN Alert
- Other
- Password Reset
- Policy and Operations
- Prevention Process Measures
- Protocol
- SAMS Access
- Surveys
- Temporary Enrollment Number
- Training
NHSN ServiceNow

For **Category** (using **Healthcare Personnel Safety Component**), you can choose from:

- Acute Care
- Add/Edit Component
- Ambulatory Surgery Center
- CMS Letters
- COVID-19 Vaccination
- CSV File
- Dialysis
- DUA
- Email Change
- Enrollment
- Facility Admin Reassignment
- Flu Vaccination
- Groups/Super Groups
- Health Department
- Help Desk Support
- Inpatient Psychiatric Facility
- Inpatient Rehab Facility
- Long Term Care
- NHSN Access
- NHSN Alert
- Other
- Password Reset
- Policy and Operations
- Quality Improvement Organization or Network
- SAMS Access
- Temporary Enrollment Number
- Training
Volunteers Needed

We are currently seeking volunteers for the NHSN annual release of version 12.0. The Beta team is planning for a one-week beta testing period prior to the full production release scheduled for December 9, 2023. Beta testing will provide an opportunity for NHSN users to explore new NHSN features and potentially identify issues that can be resolved prior to the production release.

From November 13, 2023, through November 17, 2023, test data will be populated in the beta environment for beta users to test with the NHSN 12.0 application. During the testing period, all data submitted the previous day during testing will be purged, and new data will be available for testing each morning.

We need volunteers from all NHSN components to participate: Dialysis, Neonatal, Patient Safety, Healthcare Personnel Safety, and Long-Term Care. If you are interested in volunteering, please contact us at NHSNBeta@cdc.gov to express your willingness to participate and specify the component for which you are volunteering. We can support a limited number of beta testers, so availability cannot be guaranteed to everyone. More details will be made available in direct communication with volunteers via email prior to the beta testing period.
Alliant Health Solutions Updated Website!
Shop Talks & Quickinars

A shop talk is a webinar hosted by Alliant to share information and resources.

Updates and support for surveillance, tracking and infection prevention in nursing homes using National Healthcare Safety Network (NHSN). This WebEx is focused on submitting COVID-19 data but may include other components such as C, Diff, UTIs and hand hygiene.

Click here to access the Shop Talk Shorts FAQs and video playlist.

Click here to access the NHSN Weekly COVID-19 Vaccine Summary – Do Not Report Zeros resource.
Shop Talk and Shop Talk Shorts YouTube Channel

https://www.youtube.com/playlist?list=PLXWmxni-xNHspWHhLlrqclGizXZPjiJF
Questions?
Thank You for Your Time!
Contact the Patient Safety Team

patientsafety@alliantHealth.org

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Paula St. Hill, MPH, A-IPC
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Mark Your Calendar!

Shop Talk
3rd 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