# **Reporting Influenza Data**

# Welcome!

Chat with Technical Support if you need assistance.

**Presented by:** Donald Chitanda, MPH, CIC LTC-CIP Infection Prevention Technical Advisor

July 18, 2024



# Donald Chitanda, MPH, CIC LTC-CIP

#### **INFECTION PREVENTION TECHNICAL ADVISOR**

Donald is a health professional with experience in public health epidemiology and infection prevention. Over the past several years, he was 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 hospitalacquired 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: <a href="mailto:Donald.Chitanda@AlliantHealth.org">Donald.Chitanda@AlliantHealth.org</a>



# Paula St. Hill, DrPH, MPH, CIC, A-IPC

#### **INFECTION PREVENTION TECHNICAL ADVISOR**

Dr. St. Hill 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 healthcareassociated infections.

Dr. St. Hill enjoys spending time with her friends and family.

Contact: Paula.StHill@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 of 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.

Contact: <a>Erica.Umeakunne@allianthealth.org</a>



# 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 healthcareassociated 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:

- New Updates/Upcoming NHSN trainings
- HCP Vaccination Flu Summary Reporting
- NHSN Optional Reporting of Influenza and RSV
  Vaccination for LTC Residents
- NHSN Resources
- Live questions and answers



#### **Upcoming Trainings**

#### NHSN Annual Training

WHEN: Tuesday, July 23–Thursday, July 25

WHERE: Online

TIME: 9 a.m. ET

REGISTER NOW: <a href="https://2024nhsntraining-pac.vfairs.com/">https://2024nhsntraining-pac.vfairs.com/</a>



# **HCP Influenza Reporting**



DEPARTMENT OF HEALTH & HUMAN SERVICES Centers for Medicare & Medicaid Services Center for Clinical Standards and Quality 7500 Security Boulevard, Mail Stop S3-02-01 Baltimore, MD 21244-1850



07/01/2024

RE: Non-Compliance that May Result in a 2% Reduction to Your FY 2025 Annual Payment Update for CCN

To Whom It May Concern:

This letter is to officially notify you that one or more of the Skilled Nursing Facility (SNF) Quality Reporting Program (QRP) requirements for Calendar Year (CY) 2023 data submission that impacts Fiscal Year (FY) 2025 Annual Payment Update (APU). Failure to meet the requirements of the SNF QRP will result in a two (2) percentage point reduction in the FY 2025 APU.

CMS has determined your facility did not meet the program requirements for the following reason(s):

{Did not submit all required months of complete CMIT Measure ID #00180 COVID-19 Vaccination Coverage among Healthcare Personnel (HCP) data }

If you believe you have been identified for this payment reduction in error, you have the right to request a reconsideration of this decision. Reconsideration requests will <u>only</u> be accepted via <u>email</u> no later than 11:59:59 pm local time zone, August 14, 2024 at the following address: <u>SNFQRPReconsiderations@cms.hhs.gov</u>.

Note: CMS blanket waivers and flexibility for health care providers that were issued during the COVID-19 Public Health Emergency (PHE) ended on May 11, 2023. This means that considerations in place during the PHE for requests of reconsideration are no longer in effect for FY 2025.



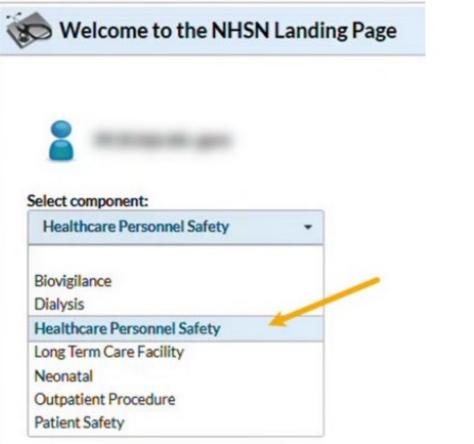
#### When To Report

- 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.



#### What To Report

 Report annual HCP influenza vaccination summary data through the NHSN Healthcare Personnel Safety (HPS) Component for the 2023-2024 influenza season



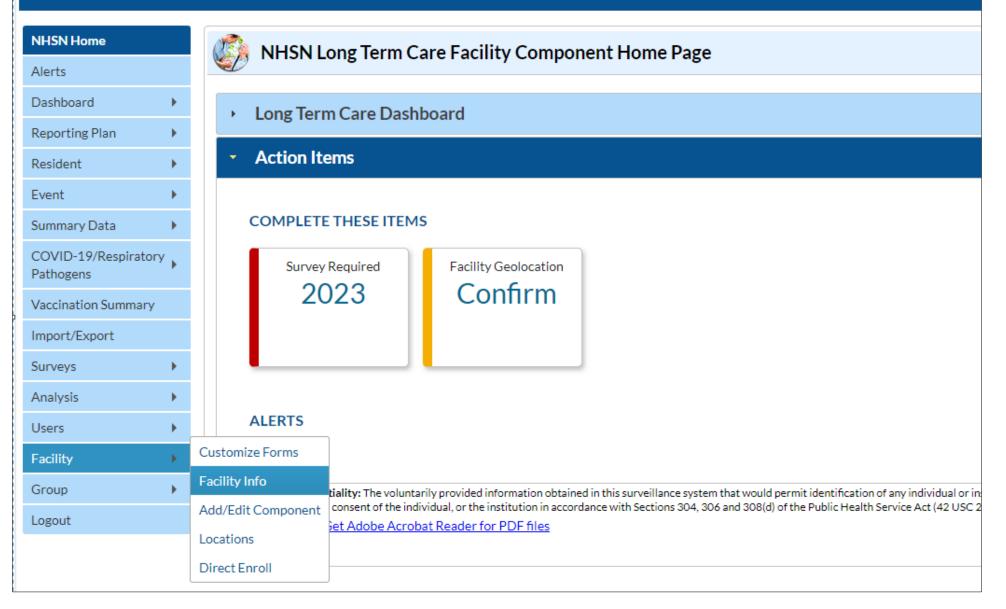


## Who Can Report

- The NHSN-designated facility admin (FA) is the only person who can initiate the process of activating 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.



#### NHSN - National Healthcare Safety Network





#### **Components Followed**

Follow/ Followed	Component	Activated	Deactivated	Agreement Accepted	View Agreement
	Biovigilance				
	Dialysis				
×	Healthcare Personnel Safety	10/18/2022		Y	View Agreement
Image: A start of the start	Long Term Care Facility	01/28/2020		Y	View Agreement
	Medication Safety (pilot facilities only)				
	Neonatal				
	Outpatient Procedure				
	Patient Safety				

#### **Contact Information**

	Contact Type	Contact Name	Phone No.+ext	Email	Action
Edit	Facility Administrator	Robert	404-		Reassign
Edit	Healthcare Personnel Primary Contact	Robert	404-		Reassign
Edit	Long Term Care Facility Primary Contact	I " Robert	404-	·	Reassign





#### **Change in NHSN Facility Administrator**

- NHSN Facility Administrator should transfer role to another user <u>prior</u> 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 <u>not</u> re-enroll the facility in NHSN
- Complete the NHSN Facility Administrator Change Request Form <u>https://www.cdc.gov/nhsn/facadmin/index.html</u>
- After being assigned as the new NHSN Facility Administrator, begin the new NHSN user onboarding process



#### Where To Report

- First, the Healthcare Personnel Safety (HPS) Component in NHSN must be activated.
  - Do not de-activate other checked components, such as the LTC component.





#### **Activating the HPS Component**

- Facility Administrator logs into SAMS: <u>https://nhsn2.cdc.gov/nhsn/</u>
  - 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

Surveys	•	Customize Forms
Analysis	•	Facility Info
Users	$\langle \cdot \rangle$	Add/Edit Component
Facility	•	Locations
Group	•	Occupations
Logout		Departments
		Supervisors
		Vaccinators
		Devices
		Direct Enroll

Components Followed					
Follow/ Followed	Component	Activated			
	Biovigilance				
	Dialysis				
	Healthcare Personnel Safety	10/18/2022			
✓	Long Term Care Facility	01/28/2020			
	Neonatal				
	Outpatient Procedure				
	Patient Safety				



# Activating the HPS Component (cont.)

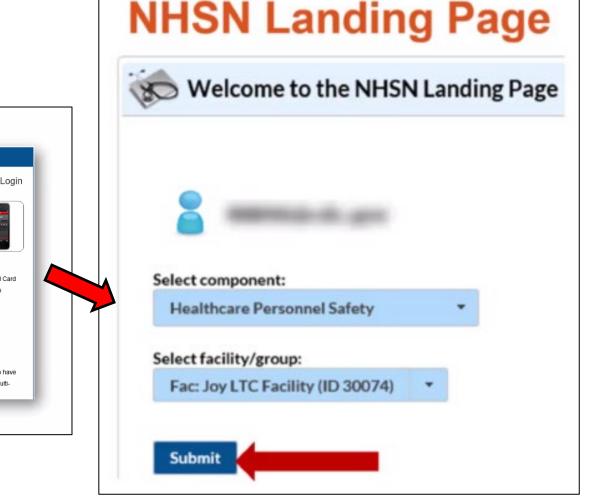
- Facility Administrator adds HPS Component Primary Contact as a user within the NHSN facility
  - Click "Users" on the navigation bar, then click "Add"
  - Complete "Add User" screen mandatory fields
    - User ID created by the facility
    - First Name
    - Last Name
    - E-mail Address Must be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



#### **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







#### 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 Multi-factor Login SAMS Credentials SAMS Username Sign on with a SAMS Grid Card SAMS Password or Mobile Soft Token Login Forgot Your Password? For External Partners who login For External Partners who have with only a SAMS issued UserID been issued a SAMS Multiand Password factor token(s).

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

- Click "Vaccination Summary" then "Annual Vaccination Flu Summary"
- Select "Add"
- Click "Continue"

NHS	5N Home		K Add Summary Dat	ta			
Alert	ts		Add Summary Da	La			
Repo	orting Plan	•					
HCV	N	¥.				Summary Data Type: Influenza Vaccination Summary 🗸	
Lab 1	Test	•					Back
Expo	osure	Ł				4	
Prop	phy/Treat	١.					
Impo	ort/Export		2				
Vacc	cination Summary		Annual Vaccination Flu Summary 🕨	Add	3		
Surv	/eys	•	Weekly Flu Vaccination Summary	Find			
Anal	lysis	•		Incomplete			



#### 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		Contraction Summary
Alerts		
Reporting Plan	•	
HCW	•	Mandatory fields marked with *
Lab Test	•	Record the cumulative number of healthcare personnel (HCP) for each category below for the influenza season being tracked.
Exposure		Facility ID *: Joy LTC Facility (30074) Vaccination type *: Influenza
Prophy/Treat	•	Influenza subtype *: Seasonal V
Import/Export		Flu Season *: 🗸



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

- Data are collected on denominator and numerator categories
  - Denominator categories:
    - HCP must be <u>physically</u> 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 <u>required</u> to report all numerator categories for the three denominator categories



#### **Saving HCP Influenza Vaccination Data**

Click "Save" to save the data

Date Last Modified: 08/26/2022

	Employee HCP	Non-Employee HCP		
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	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





#### **Editing HCP Influenza Vaccination Data (cont.)**

Click "Edit" to modify existing data

#### Date Last Modified: 08/26/2022

		Non-Employee HCP		
HCP categories		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

0





#### 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.
- LTC component was de-activated 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 who 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 currently have Level 3 access, you should have received an invitation from NHSN.
  - To request Level 3 access, please do so in NHSN-Service now or email <u>NHSN@cdc.gov</u> and put "SAMS Level 3 Access" in the email subject line.



#### **Questions or Need Help?**

Please use **NHSN-ServiceNow** to submit questions to the NHSN Help Desk. The new portal can be accessed <u>here</u> and should be used in place of <u>nhsn@cdc.gov</u>, <u>nhsntrain@cdc.gov</u>, and <u>nhsndua@cdc.gov</u>.

ServiceNow will help the NHSN team respond to your questions faster. Users will be authenticated using CDC's Secure Access Management Services (SAMS), the same way you access NHSN. If you do not have a SAMS login, or are unable to access ServiceNow, you can still email the NHSN Help Desk at nhsn@cdc.gov.

> For more information, please contact Centers for Disease Control and Prevention 1600 Clifton Road NE, Atlanta, GA 30333 Telephone, 1-800-CDC-INFO (232-4636) / TTY: 1-888-232-6348 E-mail: <u>cdcinfo@cdc.gov</u> Web: <u>www.cdc.gov</u>



# **Resources for HCP Flu Reporting**

#### Where can facilities access training materials?

 Materials about annual HCP influenza vaccination data reporting are organized under the "Annual" reporting headings on this webpage: <u>HCP Flu Vaccination | HPS | NHSN | CDC</u>.

#### What are key training materials for LTCFs?

- This slide deck reviews how LTC facilities can report annual HCP influenza vaccination data through NHSN: <u>HCP Influenza Vaccination Summary (cdc.gov)</u>.
- This operational guidance document outlines the CMS reporting requirement: <u>Operational</u> <u>Guidance for Skilled Nursing Facilities to Report Annual Influenza Vaccination Data to CDC's</u> <u>NHSN</u>.
- 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 <u>SNFQualityQuestions@cms.hhs.gov</u>.
- For questions on entering annual HCP influenza vaccination summary data through NHSN, please e-mail <u>nhsn@cdc.gov</u> with "HPS Flu Summary – LTCF" in the e-mail subject line.



# **NHSN Optional Reporting of Influenza** and RSV Vaccination for LTC Residents



# Is reporting Influenza and RSV vaccines for LTCF residents required?

Reporting for influenza and RSV is optional

- There are not currently any federal regulations for reporting these vaccines in this population
- Reporting is still highly encouraged!

https://www.cdc.gov/nhsn/pdfs/covid19/ltcf/respiratory-pathogens-vaccination-webinar-sept-2023-508.pdf



#### **Objectives**

#### Reporting for Respiratory Pathogens Vaccines and Cases

- Highlight optional influenza and RSV reporting for LTCF Residents:
  - Weekly influenza and RSV vaccination
  - Weekly positive influenza and RSV cases
- Review recent changes and updates:
  - Review optional collection forms
  - Review language and website changes
  - Discuss frequently asked questions

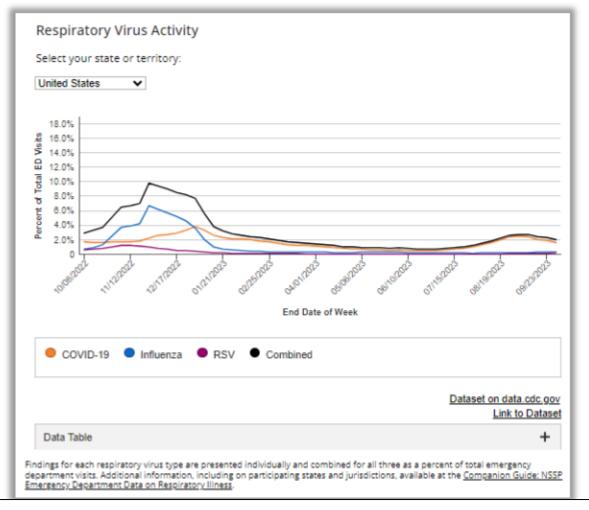
#### There are no changes for COVID-19 case or vaccination reporting



#### The "Big Three" Respiratory Pathogens

- COVID-19
- Influenza
- Respiratory Syncytial Virus Infection (RSV)

#### Vaccines are available for all 3 of these respiratory pathogens!





#### What is Considered Up to Date for these vaccines?

	2023-2024 Influenza	RSV	2023 – 2024 COVID–19
Definition of up to date:	Received an influenza vaccine any time from when it first became available in September 2023 Key Terms Document coming soon!		



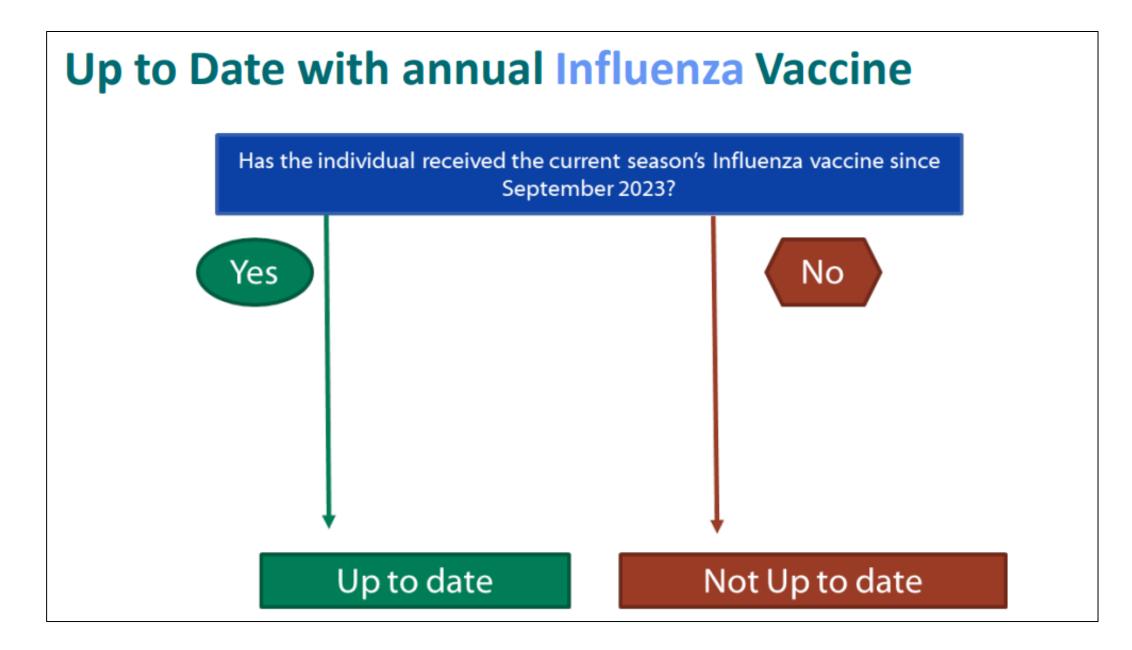


#### What is Considered Up to Date for these vaccines? (Cont.)

	2023-2024 Influenza	RSV	2023 – 2024 COVID–19
Definition of up to date:	Received an influenza vaccine any time from when it first became available in September 2023 Key Terms Document coming	Received RSV vaccination any time from when it first became available in August 2023	
	soon!	Key Terms Document coming soon!	

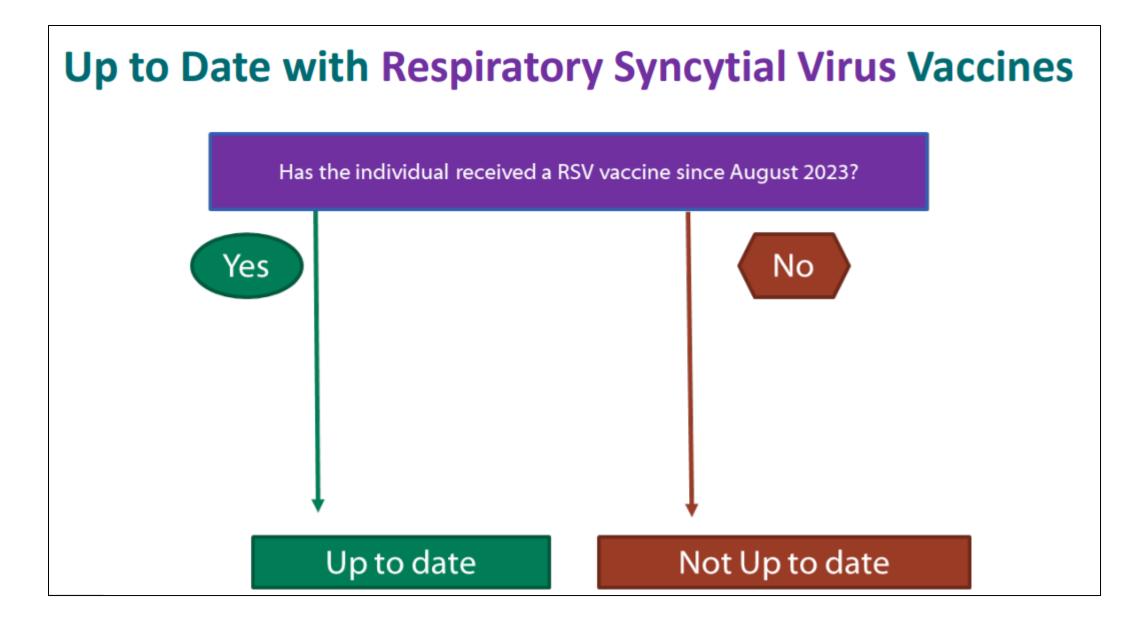
https://www.cdc.gov/nhsn/pdfs/covid19/ltcf/respiratory-pathogens-vaccination-webinar-sept-2023-508.pdf





https://www.cdc.gov/nhsn/pdfs/covid19/ltcf/respiratory-pathogens-vaccination-webinar-sept-2023-508.pdf







## **Overview of Vaccination Reporting for LTCF Residents**

- Overview Vaccination Data Collection Forms
  - Continue reporting COVID-19 vaccination per CMS requirements
  - Optional Influenza and RSV vaccination forms
  - Reporting tips
- .CSV Summary Vaccination Reporting
  - Key Points
  - Overview of Form



# Influenza and RSV Vaccine Form

- Flu/RSV Total Residents (Question 1) is auto-populated from COVID-19 Residents tab
- 4 data fields for Flu/RSV vaccinations
  - Number of up to date
  - Number of medical contraindications
  - Number offered but declined
  - Number other/unknown
- The 4 data fields need to add up to the number reported in Total Residents (Question1)

			New Optional
COVID-19 Vaccine: HC	P COVID-19 Vaccine: Residents	Influenza/RSV: Residents (Optional)	Tab
Resident Flu/RSV Cu	mulative Vaccination Summary for Lo	ng-Term Care Facilities	
Date Created:			
Facility ID:	•V	accination type: Respiratory	Facility
•Week of Data Colle	10/00/2023	ate Last Modified:	CONF
		e Vaccination Coverage	1
	Optional Reporting	g These data are NOT required.	
Total Residents	1. *Number of residents staying in t	his facility for at least 1 day during the wee	k of data collection 100
	<ol> <li>Number of residents in question season</li> </ol>	#1 who are up to date with Influenza vacc	ination for current 90
Influenza	Among those not in Question #2, rea		
Vaccination	2.1 *Medical contraindication to influenza vaccine		2
	2.2 *Offered but declined influenza vaccine		
	2.3 *Other/unknown influenza vaccination status		
	3. *Number of residents in question #1 who are up to date with RSV vaccination		
	Among those not in Question #3, reason not up to date:		
<b>RSV Vaccination</b>	3.1 *Medical contraindication to	RSV vaccine	
	3.2 *Offered but declined RSV vaccine		
	3.3 *Other/unknown RSV vaccina		
		he Vaccine Adverse Event Reporting Syste orts from NHSN sites, please enter your N	
threatening conditio event. Other cliftically signi prescribing informat	ns, or inpatient hospitalization) that on ficant adverse events may be described	stration errors and serious adverse events cur after vaccination, even if it is not certain in the provider emergency use authorization hcare providers should comply with VAER	n that vaccination caused the
<ol> <li>The data reporte frequently asked qui</li> </ol>		ed in NHŠN surveillance protocols (includir	Š



# **Reporting Influenza and RSV Vaccinations**

- You can report:
  - Both Flu and RSV vaccination questions
  - Only Flu vaccination (questions 2-2.3)
  - Only RSV vaccination (questions 3-3.3)
  - Neither
- If you report in any data field for either vaccine. You must complete all vaccination questions for the associated vaccine.
- Users choose how often to report
  - Ideally in same weekly reporting cadence as COVID-19 Vaccine

				New Optiona	
OVID-19 Vaccine: HCP	COVID-19 Vaccine: Residents	Influenza/RSV: Residents (Optional)		Tab	
Resident Flu/RSV Cur	nulative Vaccination Summary for Lor	ng-Term Care Facilities			
Date Created:			-		
*Facility ID:	*V:	accination type: Respiratory	Facility		
•Week of Data Collec	. 10/09/2023 -		CCN#		
•Week of Data Collec	20.20.20.20.0	ate Last Modified:			
		e Vaccination Coverage			
		; These data are NOT required.			
Total Residents	and the second	his facility for at least 1 day during the week	Course of the property of the bosons around	100	
	2. *Number of residents in question season	#1 who are up to date with Influenza vacci	nation for current	90	
	Among those not in Question #2, rea	ison not up to date:			
Influenza Vaccination	2.1 *Medical contraindication to i	influenza vaccine		2	
	2.2 *Offered but declined influence	za vaccine		8	
	2.3 *Other/unknown influenza vaccination status			0	
	3. *Number of residents in question #1 who are up to date with RSV vaccination				
	Among those not in Question #3, rea	son not up to date:			
RSV Vaccination	3.1 Medical contraindication to P	RSV vaccine			
	3.2 Coffered but declined RSV va	ccine			
	3.3 *Other/unknown RSV vaccina	ation status		(and a)	
		he Vaccine Adverse Event Reporting System orts from NHSN sites, please enter your NH		ofthe	
threatening condition event. Other cliftically signifi	is, or inpatient hospitalization) that occ	tration errors and serious adverse events (s cur after vaccination, even if it is not certain in the provider emergency use authorizatio	that vaccination ca	or	
described in EUAs or	prescribing information.	hcare providers should comply with VAERS	reporting requirem	ents	
<ol> <li>The data reported frequently asked que</li> </ol>	stions).	following ed in NHSN surveillance protocols (including edicaid Services (CMS) to fulfill CMS quality			



# **Review the Influenza/RSV Tab after Data Change**

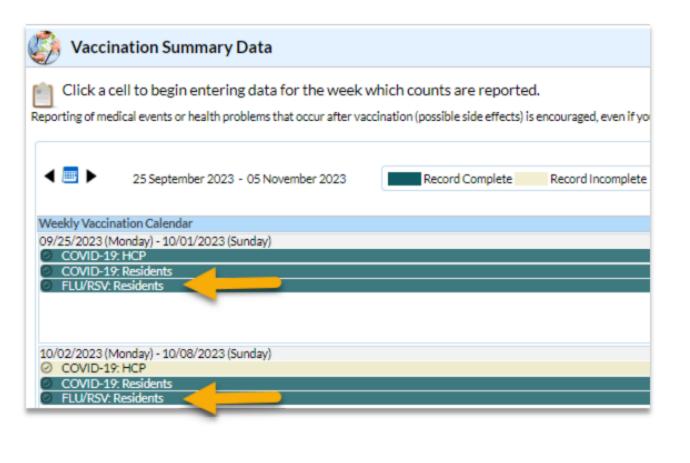
- Review that week's Flu and RSV data after changing COVID-19 total residents
- On the Flu and RSV tab totals do not add to 80
- Their totals will need to be changed in order to match the new total in Question 1

Fadility ID:	Vaccination type: Respiratory Facility CCN #     Vaccination type: Respiratory Facility CCN #     Consultative Vaccination Coverage     Cannulative Vaccination Coverage	Influenza totals do not	
	Optional Reporting: These data are NOT required.	add to 80 total residents	
Total Residents	1. *Number of residents staying in this facility for at least 1 day during the week of data collection	80	
	<ol><li>Number of residents in question #1 who are up to date with Influenza vaccination for current season</li></ol>		95
Influenza Vaccination	Among those not in Question #2, reason not up to date		
	2.1 *Medical contraindication to influenza vaccine		0
	2.2 *Offered but declined influenza vaccine	DOM NOT A DOM NOT	3
	2.3 *Other/unknown influenza vaccination status	RSV totals do not add	0
RSVVaccination	<ol><li>Number of residents in question #1 who are up to date with RSV vaccination</li></ol>	to 80 total residents	20
	Among those not in Question #3, reason not up to date:		
	3.1 *Medical contraindication to RSV vaccine		
	3.2 *Offered but declined RSV vaccine		60
	3.3 *Other/unknown RSV vaccination status		15
Clinically significant adverse events https://wers.hhs.gov/reportevent.h	s should be reported to the Vaccine Adverse Event Reporting System (VAERS) at <u>Inni</u> . To help identify reports from NHSN sites, please enter your NHSN orgID in Box 26 of the VAERS form.		
Clinically significant adverse events	include vaccine administration errors and serious adverse events (such as death, INe-threatening conditions, or inpatient hospitalization	) that occur after vaccination, even if it is not certain that vaccinat	ion caused the event.
Other clicksly cloubsort scheme -	events may be described in the provider emergency use authorization IEUAI fact sheets or prescribing information for the COVID-19 vac	relinate's Handblocker or of date to based controls with USEDS reportion	ren inements described in
ELIAs or prescribing information.	energi ne deserves in angri onner entergen provision nacion (score) naciones a organization gri contracti no como a riva	conego, maero nae o promitero a anteses comprey men mesora reporten	reparentera ococrocom
By saving these data in NHSN, facil	Ries are agreeing to the following: It with definitions outlined in NHSN surveillance protocols (including tables of instructions and frequently asked questions).		



# **Weekly Vaccination Calendar**

- Verify data submission on the Weekly Vaccination Calendar
- After saving data, it will be highlighted green
- Tan means data has not been submitted





# How frequently do I report Influenza and RSV vaccines for Long Term Care Residents?

- The Flu/RSV form is set up for weekly reporting
- Ideally, use same weekly reporting cadence as COVID-19 vaccines

Users have ability to choose which weeks to report



## **Key Points for Vaccination**

- For surveillance purposes, NHSN will refer to surveillance of COVID-19, RSV, and Influenza vaccination as COVID-19/Respiratory Pathogens Vaccination
- Reporting Influenza and RSV Vaccines for Residents is OPTIONAL
- Report by entering data directly into NHSN summary form or using .CSV file
  - Flu/RSV is a separate .CSV form from the COVID-19 .CSV
  - Person level forms will be available in June 2024
- Materials will be available through LTCF COVID-19/Respiratory Pathogens Vaccination website in the next week





Network of Quality Improvement and Innovation Contractors CENTERS FOR MEDICARE & MEDICAID SERVICES IQUALITY IMPROVEMENT & INNOVATION GROUP

Home

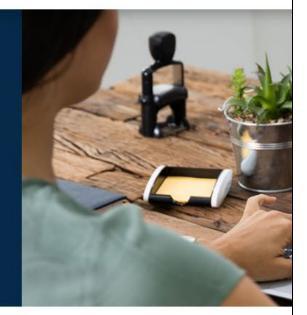
Programs

Events

Resources

# NHSH Shop Talk for Long-Term Care Facilities

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



### **Shop Talks & Quickinars**

### https://quality.allianthealth.org/topic/shop-talks/



# **Contact the Patient Safety Team**

#### patientsafety@alliantHealth.org



Amy Ward, MS, BSN, RN, CIC Patient Safety Manager Amy.Ward@AlliantHealth.org



Erica Umeakunne, MSN, MPH, APRN, CIC Infection Prevention Specialist Erica.Umeakunne@AlliantHealth.org





Paula St. Hill, DrPH, MPH, CIC, A-IPC Technical Advisor, Infection Prevention Paula.Sthill@allianthealth.org



**Donald Chitanda, MPH, CIC LTC-CIP** Technical Advisor, Infection Prevention Donald.Chitanda@AlliantHealth.org

# **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







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



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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