

COVID-19 Updates, Influenza Vaccination Reporting, NHSN Updates, LTCF Annual Survey and Live Q&A

Welcome!

Chat with Technical Support if you need assistance

Presented by:

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

February 15, 2024

Paula St. Hill, MPH, CIC, 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, 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 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, 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. 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.

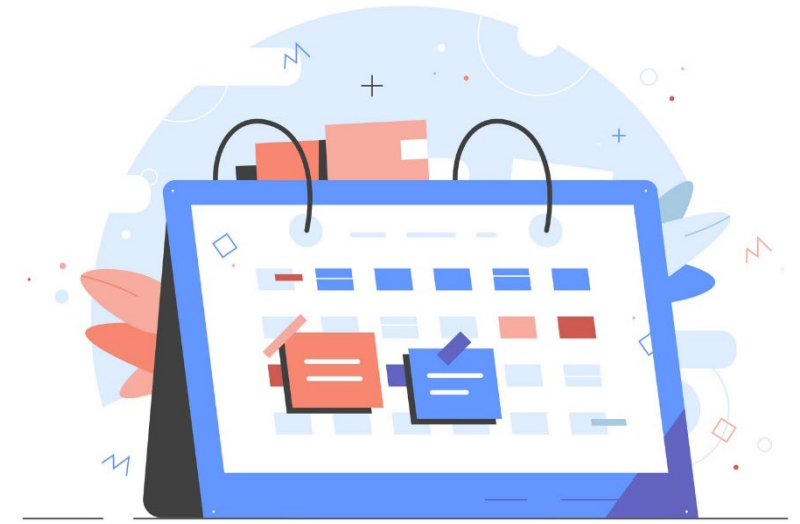
Amy enjoys spending time with her family. She loves camping, bicycling and running.

Contact: Amy.Ward@AlliantHealth.org



Agenda

- COVID-19 Updates
- NHSN Q1 Updates
- NHSN Influenza Reporting
- LTCF Annual Survey
- Alliant Health and NHSN Updates
- Live Questions and Answers



COVID-19 Updates





CDC COVID-19 Data Tracker


CDC COVID-19 data tracker:

- COVID-19 hospital admissions
- COVID-19 deaths
- COVID-19 ED visits
- COVID-19 test positivity
- COVID-19 variants, wastewater, and genomic surveillance

Although COVID-19 cases and associated hospitalizations have decreased in recent months, COVID-19 remains an ongoing public health challenge

Updated public health tracking* will keep you informed about COVID-19

Hospital admissions		track →	Spread in communities + severity of illness
Death certificates		track →	Severity of illness
Emergency department visits		track →	Early signs of spread
Genomic sequencing		tracks →	New variants

 **Check COVID.cdc.gov to know when to take action**

*To account for changes in available data after the end of the U.S. Public Health Emergency declaration

bit.ly/mm7219e1
MAY 5, 2023

MMWR

CDC COVID-19 Update for the United States

COVID-19 Update for the United States

Early Indicators

Test Positivity >

% Test Positivity

6.3%

(January 21 to January 27, 2024)

Trend in % Test Positivity

-4.6% in most recent week



Dec 9, 2023

Jan 27, 2024

Emergency Department Visits >

% Diagnosed as COVID-19

2.0%

(January 21 to January 27, 2024)

Trend in % Emergency Department Visits

-11% in most recent week



Dec 9, 2023

Jan 27, 2024

These early indicators represent a portion of national COVID-19 tests and emergency department visits. [Wastewater](#) information also provides early indicators of spread.

Severity Indicators

Hospitalizations >

Hospital Admissions

22,636

(January 21 to January 27, 2024)

Trend in Hospital Admissions

-10.9% in most recent week



Dec 9, 2023

Jan 27, 2024

Total Hospitalizations

6,771,932

Deaths >

% of All Deaths in U.S. Due to COVID-19

3.6%

(January 21 to January 27, 2024)

Trend in % COVID-19 Deaths

No change in most recent week



Dec 9, 2023

Jan 27, 2024

Total Deaths

1,174,626

CDC | Test Positivity data through: January 27, 2024; Emergency Department Visit data through: January 27, 2024; Hospitalization data through: January 27, 2024; Death data through: January 27, 2024.
Posted: February 5, 2024 4:00 PM ET

COVID-19 County Check

COVID-19 Prevention Actions

There are many ways your actions can help protect you, your household, and your community from severe illness from COVID-19. [CDC's COVID-19 hospital admission levels](#) provide information about the amount of severe illness in the community where you are located to help you decide when to take action to protect yourself and others.



COVID-19 County Check

Find hospital admission levels and prevention steps by county. Data updated weekly.

Select a Location (all fields required)

State



County



Go

COVID-19 County Check



COVID-19 County Check

Find hospital admission levels and prevention steps by county. Data updated weekly.

Select a Location (all fields required)

Georgia

Chatham County

Go

< Start Over

Medium

In **Chatham County, Georgia**, the COVID-19 hospital admission level is **Medium**.

- If you are at [high risk of getting very sick](#), wear a high-quality [mask or respirator](#) (e.g., N95) when indoors in public.
- If you have household or social contact with someone at high risk for getting very sick, consider self-testing to detect infection before contact, and consider wearing a high-quality mask when indoors with them.
- [Stay up to date](#) with COVID-19 vaccines.
- Maintain [ventilation improvements](#).
- Avoid contact with people who have suspected or confirmed COVID-19.
- Follow recommendations for [isolation](#) if you have suspected or confirmed COVID-19.
- Follow the recommendations for [what to do if you are exposed](#) to someone with COVID-19.

People may choose to mask at any time. People with symptoms, a positive test, or exposure to someone with COVID-19 should wear a high-quality [mask or respirator](#) when indoors in public.

If you are immunocompromised, learn more about [how to protect yourself](#).

Find out more about the COVID-19 situation in **Chatham County, Georgia** with [COVID-19 Data Tracker](#).

January 27, 2024

Individual-Level Prevention Strategies

LOW, MEDIUM, AND HIGH

At all COVID-19 hospital admission levels:



- [Stay up to date](#) on vaccination.
- Maintain [ventilation improvements](#).
- Avoid contact with people who have suspected or confirmed COVID-19.
- Follow recommendations for [isolation](#) if you have suspected or confirmed COVID-19.
- Follow the recommendations for [what to do if you are exposed](#) to someone with COVID-19.
- If you are at [high risk of getting very sick](#), talk with a healthcare provider about additional prevention actions.

MEDIUM AND HIGH

When the COVID-19 hospital admission level is Medium or High:



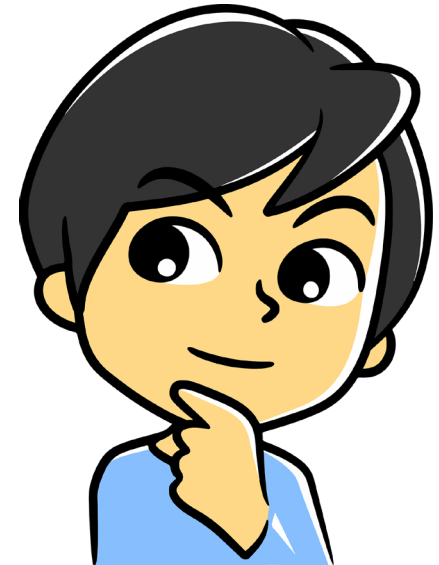
- If you are at [high risk of getting very sick](#), wear a high-quality mask or respirator (e.g., N95) when indoors in public.
- If you have household or social contact with someone at high risk for getting very sick, consider self-testing to detect infection before contact, and consider wearing a high-quality mask when indoors with them.

HIGH

When the COVID-19 hospital admission level is High:



- Wear a high-quality mask or respirator.
- If you are at high risk of getting very sick, consider avoiding non-essential indoor activities in public where you could be exposed.



Community-Level Prevention Strategies

Community-Level Prevention Strategies

LOW, MEDIUM, AND HIGH

At all COVID-19 hospital admission levels:



- Promote equitable access to vaccination, testing, masks and respirators, treatment and prevention medications, community outreach, and support services.
- Ensure access to testing, including through point-of-care and at-home tests for all people.
- Maintain [ventilation improvements](#).
- Provide communications and messaging to encourage isolation among people who test positive.

MEDIUM AND HIGH

When the COVID-19 hospital admission level is Medium or High:



- Implement screening testing in high-risk settings where screening testing is recommended.

HIGH

When the COVID-19 hospital admission level is High:



- Implement healthcare surge support as needed.



Stay Up-to-Date With COVID-19 Vaccines



Recommendations for Everyone Aged 5 Years and Older

Everyone aged 5 years and older [±] should get **1 dose of an updated COVID-19 vaccine** to protect against serious illness from COVID-19. None of the updated 2023-2024 COVID-19 vaccines is [preferred over another](#).

Children aged 5 years – 11 years who are not vaccinated or have gotten previous COVID-19 vaccine(s)

Children aged 5 years – 11 years who are unvaccinated or have previously gotten a COVID-19 vaccine before September 12, 2023, should get **1 updated Pfizer-BioNTech or Moderna COVID-19 vaccine**.

People aged 12 years and older who are not vaccinated

People aged 12 years and older who are unvaccinated should get either:

- **1 updated Pfizer-BioNTech or updated Moderna COVID-19 vaccine**, OR
- **2 doses of updated Novavax COVID-19 vaccine**.

Pfizer-BioNTech

1 Dose
Pfizer-BioNTech
UPDATED VACCINE

More details: [Up to Date](#)

Moderna

1 Dose
Moderna
UPDATED VACCINE

More details: [Up to Date](#)

Novavax

1 Dose
Novavax
UPDATED VACCINE

2nd Dose
Novavax
UPDATED VACCINE
8 weeks after 1st dose



NHSN Reporting Period Q1 (January 1, 2024 – March 31, 2024)

NHSN Reporting Period Q1

- From January 1, 2024–March 31, 2024
- For this reporting quarter, individuals are considered up-to-date with their COVID-19 vaccines for NHSN surveillance if they meet the following criteria:

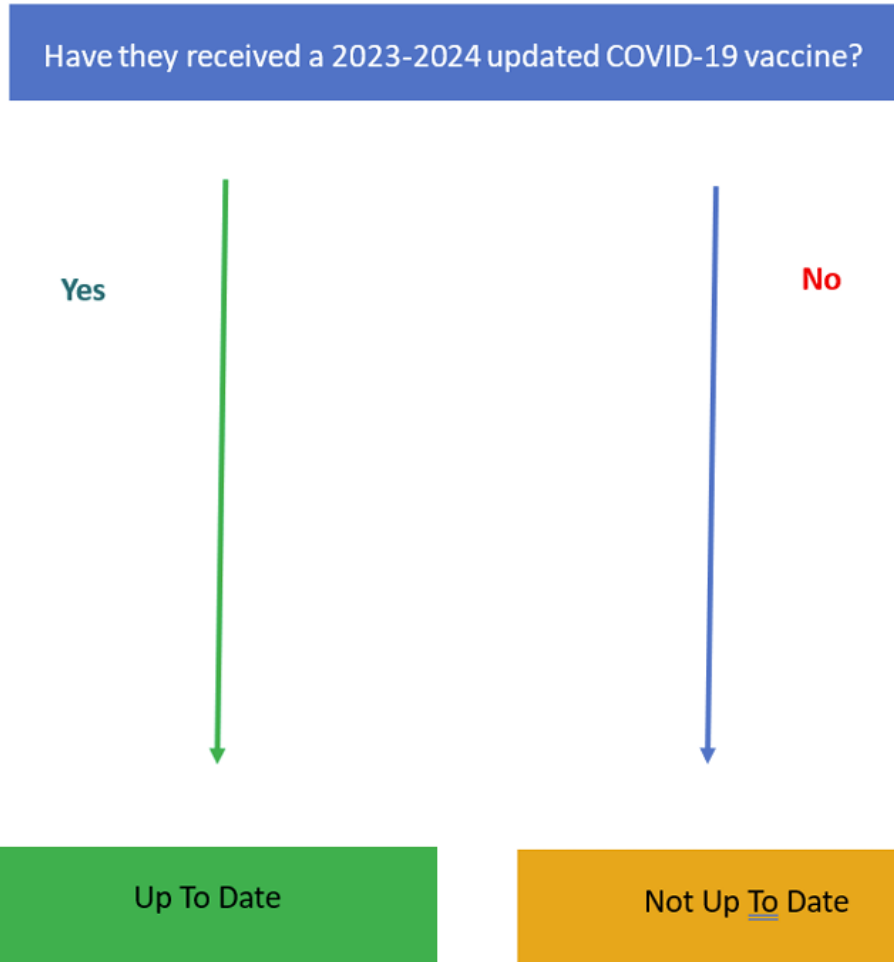
Received a 2023-2024 Updated COVID-19 Vaccine

LTCF RIFC Pathway

- A resident with a newly positive SARS-CoV-2 viral test result **and** has received a 2023-2024 updated COVID-19 vaccine should be counted in the up-to-date category if the most recent dose was received 14 days or more before the specimen collection of the newly positive test result.
- In other words, for the RIFC Pathway, a resident with a newly positive SARS-CoV-2 test result is counted in the up-to-date category if they received the vaccines required to be up to date at least 14 days before the positive test.

Up-To-Date With COVID-19 Vaccines for Q1

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 1 of 2024 (representing vaccination data for January 1, 2024 – March 31, 2024).



Form Simplification (Q1 Reporting)

Simplified COVID-19 vaccination reporting form for health care personnel.

- Removed question on complete primary series.
- Reflects the latest guidance from CDC and FDA.
- Collects data most relevant to public health.
- Consistent with CMS Quality Reporting Program Measure reporting transition of measures from primary series to up-to-date.

Aligns with COVID-19 vaccination reporting form for residents.

- No changes to the reporting form for residents.

Previous Weekly COVID-19 Vaccination: HCP Form

- **Removing question on cumulative number of HCP who have received complete **primary series** (currently question #2)**

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	0	0	<input type="text"/>
2. ★ <u>Cumulative</u> number of HCP in Question #1 who have completed primary series for COVID-19 vaccine(s) at this facility or elsewhere since December 2020	0	0	<input type="text"/>
3. ★ <u>Cumulative</u> number of HCP in Question #1 with other condition			
3.1 ★ Medical contraindication to COVID-19 vaccine	0	0	<input type="text"/>

Revised Weekly COVID-19 Vaccination: HCP Form

- Question on **up to date** vaccination (previously question #4) is now moved to **question #2**
- Aligns with resident form



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	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text"/>	<input type="text"/>
2. * Cumulative number of HCP in Question #1 who are up to date with COVID-19 vaccine(s). Please review the current definition of up to date: Key Terms and Up to Date Vaccination.	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text"/>	<input type="text"/>
3. * Cumulative number of HCP in Question #1 with other conditions:				
3.1 *Medical contraindication to COVID-19 vaccine	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text"/>	<input type="text"/>
3.2 *Offered but declined COVID-19 vaccine	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text"/>	<input type="text"/>
3.3 *Unknown/Other COVID-19 vaccination status	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text"/>	<input type="text"/>



Revised Weekly COVID-19 Vaccination: HCP Form

Question #3

- Cumulative number of HCP in question #1 with other conditions now relates to HCP who are **not up-to-date** with COVID-19 vaccination



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	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
2. * Cumulative number of HCP in Question #1 who are <u>up to date</u> with COVID-19 vaccine(s). Please review the current definition of up to date: Key Terms and Up to Date Vaccination.	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
3. * <u>Cumulative</u> number of HCP in Question #1 with other conditions:						
3.1 *Medical contraindication to COVID-19 vaccine	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
3.2 *Offered but declined COVID-19 vaccine	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
3.3 *Unknown/Other COVID-19 vaccination status	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>



How to Answer Question #1

Number of HCPs that were eligible to have worked at the facility for at least one day during the week of data collection.

- Question #1
 - Enter the number of HCPs who were eligible to have worked at the facility for at least one day during the week of data collection.
 - The vaccination status for all HCPs reported in question #1 must be reported as either up to date with the COVID-19 vaccine (Question 2) or other conditions (Questions 3.1-3.3).
 - The sum of the numbers entered for questions 2 and 3.1-3.3 on the data collection form must equal the number entered for the question.
- * If not, the NHSN application will not allow for data to be saved and will generate an error message.

How to Answer Question #2

Cumulative number of HCPs in question #1 who are up to date with COVID-19 vaccine(s).

- Question #2
 - Enter the number of HCPs who are up-to-date with COVID-19 vaccination.
 - Many HCPs who previously had a completed primary series will not be counted as up-to-date.
 - Facilities should report zero (0) up-to-date for Question #2 until HCP receive the 2023-2024 updated COVID-19 vaccine.
 - Use the definition associated with the quarter the surveillance weeks fall within [Understanding Key Terms and Up-to-date Vaccination](#).

How to Answer Question #3

Cumulative number of HCPs in Question #1 with other conditions (those who are NOT up to date).

- **Question 3.1:** Medical contraindication to COVID-19 vaccine
- **Question 3.2:** Offered but declined COVID-19 vaccine
- **Question 3.3:** Unknown/other COVID-19 vaccination status

How to Answer Question #3

Cumulative number of HCPs in Question #1 with other conditions

- Individuals who are **NOT** up-to-date with COVID-19 vaccination must be reported in Questions **3.1**, **3.2**, or **3.3**.
 - Individuals having a medical contraindication (that prevents them from receiving the vaccine that would make them up-to-date) are reported in **Question 3.1**.
 - Individuals who were offered but declined vaccination (declined vaccine that would make them up-to-date) are reported in **Question 3.2**.
 - All other individuals who are not reported in Question 2, 3.1, or 3.2 are reported in Question 3.3 (unknown/other COVID-19 vaccination status).

How to Answer Question #3

Cumulative number of HCPs in Question #1 with other conditions.

- Examples of individuals who should be included in **Question 3.3 (unknown/other COVID-19 vaccination status)**:
 - The facility could not determine an individual's vaccination status.
 - The individual received vaccination outside of the health care facility but did not provide written documentation of vaccination.
- * **Reminder:** Individuals can self-report in writing (paper or electronic) that the vaccination was received elsewhere or provide documentation of receipt of the COVID-19 vaccine elsewhere. Documentation should include the date and location of vaccine receipt and vaccine type.
 - The vaccine is not yet available in a particular location, so the individual has not yet declined or indicated that they would like to receive the vaccine.

Weekly COVID-19 Vaccination: Example with Employees

Remember: The sum of the numbers entered for questions #2 (up to date) and #3.1-3.3 (reasons not up to date) must equal to the number entered for question #1.

Employees at facility = **100**

- Up to date with COVID-19 vaccination = **75**
- Medical contraindication = **2**
- Declined vaccination = **10**
- Unknown/other vaccination status = **13**

$$75 + 2 + 10 + 13 = 100$$



	*All Core HCP ^a	*All HCP ^b	*Employees (staff on facility payroll) ^c	*Licensed independent practitioners: Physicians, advanced practice nurses, & physician assistants ^d
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	240	280	100	80
2. *Cumulative number of HCP in Question #1 who are <u>up to date</u> with COVID-19 vaccine(s). Please review the current definition of up to date: Key Terms and Up to Date Vaccination .	165	180	75	55
3. *Cumulative number of HCP in Question #1 with other conditions:				
3.1 *Medical contraindication to COVID-19 vaccine	2	2	2	0
3.2 *Offered but declined COVID-19 vaccine	35	40	10	15
3.3 *Unknown/Other COVID-19 vaccination status	38	58	13	10

CMS Reporting Requirements

Reminder: Facilities can contact CMS with questions about reporting requirements

- Weekly reporting requirement questions:
DNH_TriageTeam@cms.hhs.gov
- Quality reporting program questions:
SNFQualityQuestions@cms.hhs.gov

Reviewing Q1 Up-to-Date Definitions Polling Questions

Polling Question #1

Mary is a health care worker at Little Lamb Nursing Home. She reported a medical contraindication that prevented her from receiving the 2023-2024 updated COVID-19 vaccine.

Is Mary considered up-to-date?

- A. Yes
- B. No
- C. Not sure

Answer

B. No

Mary is **NOT** considered up-to-date.

Where to document?

Mary should be counted in **Question #3.1 (medical contraindication)** because she has a medical contraindication that prevents her from receiving the 2023-2024 updated COVID-19 vaccine.

Polling Question #2

Jack is a health care worker at Beanstalk Health and Rehab. He received a dose of bivalent Pfizer on August 15, 2023. He is unsure if he will receive the 2023-2024 updated COVID-19 vaccine, and it hasn't been offered. Is Jack considered up-to-date?

- A. Yes
- B. No
- C. Not sure

Answer

B. No

Jack is NOT considered up-to-date.

Where to document?

Jack should be counted in **Question #3.3 (unknown/other COVID-19 vaccination status)** because he has not yet received a 2023-2024 updated COVID-19 vaccine, but he also hasn't declined it.

Polling Question #3

Elsa is a health care worker at Let It Go Nursing & Rehab Center. She has refused all previous COVID-19 vaccines but decided to receive the updated 2023-2024 COVID-19 vaccine. Is Elsa considered up-to-date?

- A. Yes
- B. No
- C. Not sure

Answer

A. Yes

Elsa IS considered up-to-date.

Where to document?

Elsa should be counted in **Question #2 (up-to-date)** because she received a 2023-2024 updated COVID-19 vaccine.

Polling Question #4

Charlie is a health care worker at Willy Wonka Nursing Home. He received a dose of the bivalent Moderna COVID-19 vaccine in September 2023 and has declined all COVID-19 vaccines since then.

Is Charlie considered up-to-date?

- A. Yes
- B. No
- C. Not sure

Answer

B. No

Charlie is NOT considered up-to-date.

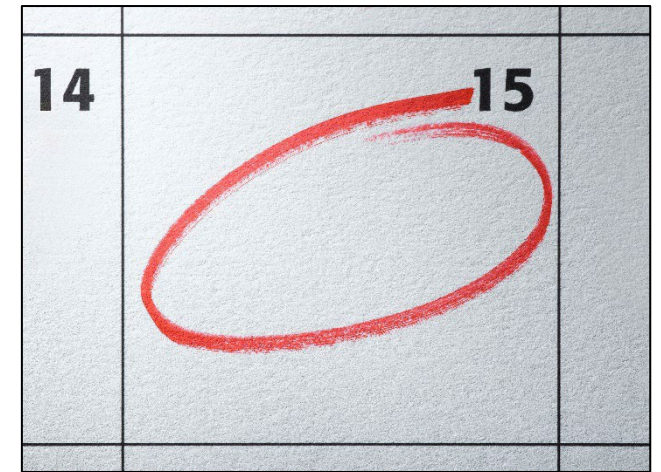
Where to document?

Charlie should be counted in **Question #3.2 (declined vaccine)** because he declined to receive a 2023-2024 updated COVID-19 vaccine.

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.



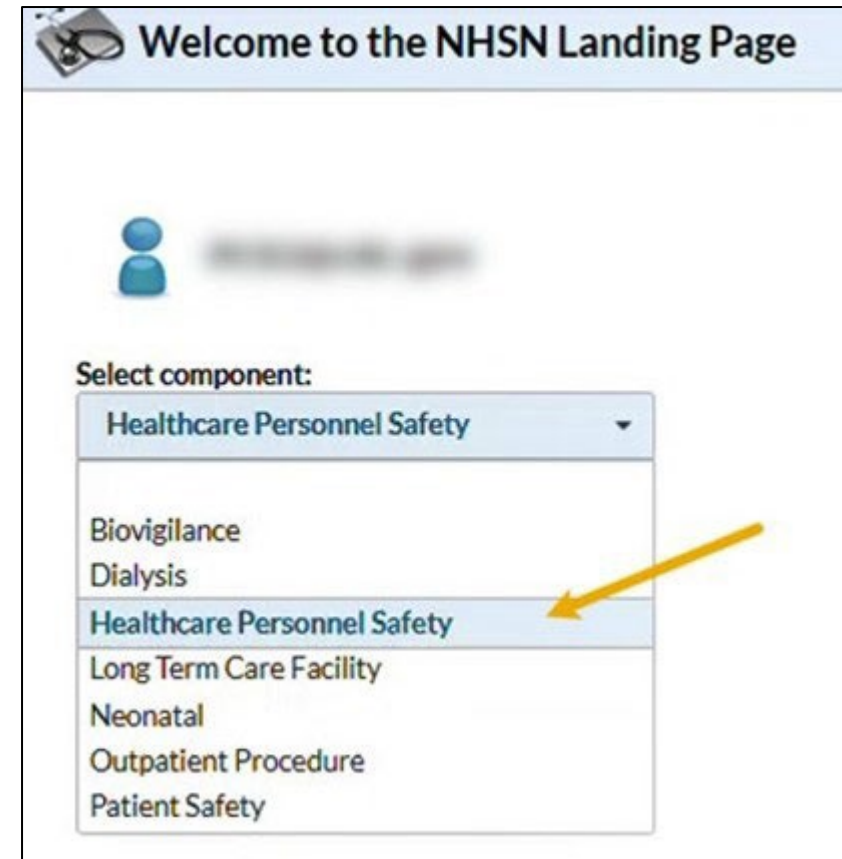
How To Report Annual HCP Influenza Vaccination Summary Data

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/>

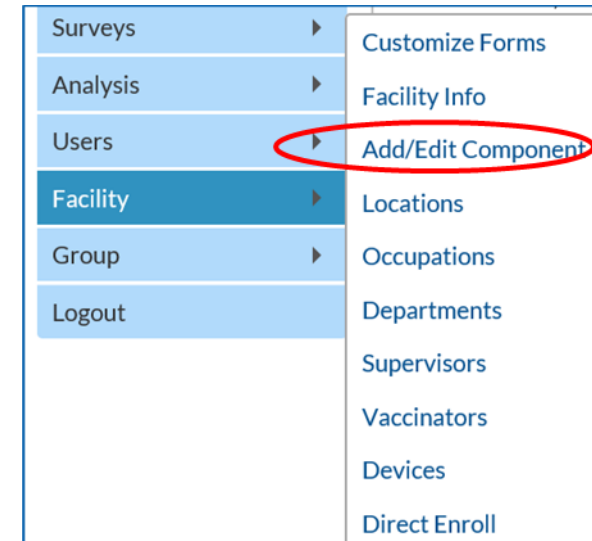
- Click “NHSN Reporting”

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

How To Report Annual HCP Influenza Vaccination Summary Data

NHSN Landing Page

- Select the HCP Safety Component



Select component:

Healthcare Personnel Safety

Select facility/group:

Submit


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”

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

How To Report Annual HCP Influenza Vaccination Summary Data

 **Add Influenza Vaccination Summary**

Mandatory fields marked with *

[Print Form](#)

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

Facility ID *:

Vaccination type *:

Influenza subtype *:

Flu Season *:

Date Last Modified:

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

Custom Fields

Comments

<https://www.cdc.gov/nhsn/pdfs/training/hcp/hcp-flu-vaccination-summary-reporting-general-training-508.pdf> **ALLIANT**
HEALTH SOLUTIONS **QIN-QIO**
Quality Innovation Network -
Quality Improvement Organizations
CENTER FOR MEDICARE & MEDICAID SERVICES
EQUALITY IMPROVEMENT & INNOVATION GROUP

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

View Influenza Vaccination Summary

✓ A record for the selected summary data element already exists.

Mandatory fields marked with *

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

Memorial Hospital (10000)

Vaccination type *: Influenza

Influenza subtype *: Seasonal

Flu Season *: 2020/2021

Locations *: Hospital

Date Last Modified: 01/14/2021

Editing HCP Influenza Vaccination Data

Click “Edit” to modify existing data

HCP categories	Employee HCP	Non-Employee HCP		
	Employees (staff on facility payroll) *	Licensed independent practitioners: Physicians, advanced practice nurses, & physician assistants *	Adult students/trainees & volunteers *	Other Contract Personnel
1. Number of HCP who worked at this healthcare facility for at least 1 day between October 1 and March 31	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

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

Influenza Vaccination Resources

Annual Flu Summary

[Comprehensive Training – September 2023](#)  [PDF – 2 MB]

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

Common Influenza Vaccination Reporting Issues (Last Season)

- NHSN designated Facility Administrator was no longer employed at the facility
- Facility Administrator and/or other NHSN users did not have Level 3 access
- LTC component was de-activated while trying to activate the HPS component
- Facilities were not aware of the reporting deadline

NHSN LTCF Annual Survey

Is the Annual Facility Survey Required?

The NHSN Annual Facility survey for long-term care facilities (LTCFs) is required for facilities that are currently or plan to report healthcare-associated infections (urinary tract infections), laboratory-identified events for C. difficile and/or multidrug-resistant organisms, and/or prevention process measures by March 1st or prior to reporting in the non-COVID-19 module(s), if beginning after March 1st.

All actively enrolled LTCFs have the option to complete the survey. However, the survey is NOT required for facilities participating exclusively in the COVID-19 module, and those facilities will not lose access to the system after March 1.

Please be aware that facilities with incomplete surveys may continue to see the "Survey Required" alert under Action Items on the NHSN LTCF home page, but no action is required unless the facility plans to participate in the available non-COVID-19 modules. Multidrug-resistant

Missed Survey Deadline

If the deadline (March 1st) to complete the survey was missed, users can still access their NHSN facility account to fulfill this task.

Once the survey has been completed, the survey alert will disappear, and users can resume submitting the Monthly Reporting Plans (MRP) and Monthly Summary Data.



LTCF Annual Survey



If your facility is **only** participating in the COVID-19 module, no further action is needed to complete Annual Facility Survey.



Facilities that are currently or plan to participate in HAI surveillance modules, should proceed forward with the training guidance to assist with completing survey.

Important Information

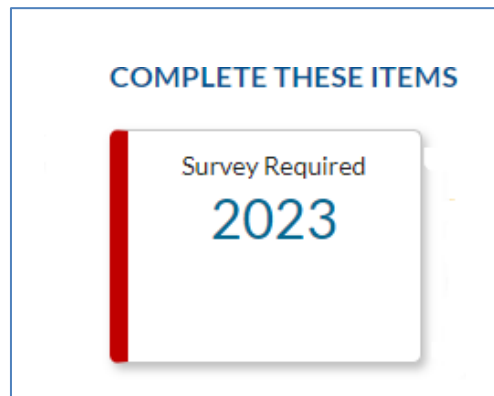
- Annual Facility Surveys should be completed and submitted online by all LTC active facilities that plan to report HAI data.
- Deadline to complete the survey is **March 1st of each year.**
 - **Failure to complete by the due date will result in users not being able to complete monthly reporting plans and enter event data.**
- Most survey questions are based on facility characteristics and practices during the previous calendar year.
 - *Ex. Survey year 2022 (incl. Jan. 2022 through Dec. 2022)*

Important Information

- Surveys **must** be completed in one session (incomplete surveys cannot be saved).
- Survey **must** be submitted into the NHSN application and **should not** be sent to NHSN via e-mail.
- Surveys may be viewed, edited, and printed anytime after submitting.
- NHSN ServiceNow – for questions and issues

LTCF Annual Survey

- **Accuracy is important** - Recommend the use of NHSN paper forms and instructions to collect required information
- Paper form:
https://www.cdc.gov/nhsn/forms/57.137_LTCFSurv_B_LANK.pdf
- Survey Table of Instructions:
<https://www.cdc.gov/nhsn/forms/instr/57.137-toi-annual-facility-survey.pdf>

The image shows the top portion of the NHSN Long Term Care Facility Component—Annual Facility Survey form. At the top left is the NHSN logo. To the right, it says "Form Approved OMB No. 0920-0605 Exp. Date: 1/31/25 www.cdc.gov/nhsn". The title "Long Term Care Facility Component—Annual Facility Survey" is centered. Below the title, it says "Page 1 of 6". The form has several sections: "Facility ID:", "Tracking #:", "National Provider ID:", "Survey Year:", "State Provider #:". Below these is the "Facility Characteristics" section, which includes "Ownership (check one):" with options for For profit, Not for profit, including church, Government (not VA), and Veterans Affairs. It also includes "Certification (check one):" with options for Dual Medicare/Medicaid, Medicare only, Medicaid only, and State only. The "Affiliation (check one):" section has options for Independent, free-standing; Independent, continuing care retirement community; Multi-facility organization (chain); Hospital system, attached; and Hospital system, free-standing. The bottom section is "In the previous calendar year:" and includes fields for Average daily census, Total number of short-stay residents, Average length of stay for short-stay residents, Total number of long-stay residents, Average length of stay for long-stay residents, and Total number of new admissions.

LTCF Annual Survey

This email is intended for Facility and Group users of the Long-term Care Facility Component (LTCF) of NHSN.

Dear LTCF User,

This email is a follow-up to previous communication regarding the LTC *Annual Facility Survey*. NHSN appreciates your patience while we worked to implement the NHSN application update to resolve the issue.

The resolved issue: A validation error previously appeared when a user selected “No” for question #6: *“Is it a policy in your facility to routinely use gown/gloves for care of residents infected or colonized with a multidrug-resistant organism (MDRO)?* ☐ Yes ☐ No (If “No”, continue to question #7)”.*”*

- This issue has now been resolved and facilities are able to successfully save the Annual Facility Survey.

As a reminder, surveys should be completed electronically by March 1, 2024.

If you have questions, please use NHSN-ServiceNow. The portal can be accessed [here](#) or through your SAMS account. After logging into SAMS, the NHSN-ServiceNow link is located at the bottom of the page.

If you are unable to access ServiceNow, you can email the NHSN Help Desk at nhsn@cdc.gov and include “*LTCF Annual Facility Survey Validation Error*” in the subject line.

We appreciate your patience in resolving this issue.

Thank you for your partnership,

The NHSN LTCF Team

Getting Started With Your Annual Survey

NHSN Facility User w/All Rights View

You can access the survey by clicking “Surveys” tab then “Add” on the left blue navigation panel (as shown in the example on the slide).

The screenshot displays the NHSN - National Healthcare Safety Network interface. On the left is a vertical navigation menu with the following items: NHSN Home, Alerts, Dashboard, Reporting Plan, Resident, Event, Summary Data, COVID-19, Vaccination Summary, Import/Export, Surveys, Analysis, and Logout. The 'Surveys' item is highlighted in a darker blue, and a sub-menu is open showing 'Add' and 'Find' options, with a hand cursor pointing at 'Add'. The main content area is titled 'NHSN Long Term Care Facility Component Home Page' and includes a 'Long Term Care Dashboard' link and an 'Action Items' section stating 'You have no action items.' Below this is an 'Assurance of Confidentiality' notice. At the bottom right of the main area is a link to 'Get Adobe Acrobat Reader for PDF files'.

Completing Your Annual Survey

Add Annual Survey

Mandatory fields marked with *

Facility ID *:

National Provider ID *:

Survey Year *:

State Provider #:

Facility Characteristics

Facility ownership *:

Affiliation *:

Certification *:

In the previous calendar year,

Average daily census *:

Total number of short-stay residents *:

Total number of long-stay residents *:

Total number of new admissions *:

Total Number of Beds *:

Average length of stay for short-stay residents:

Average length of stay for long-stay residents:

Number of Pediatric Beds (age < 21) *:

Indicate which of the following primary service types are provided by your facility. On the day of this survey, indicate the number of residents receiving those services (list only one service type per resident, i.e. total should sum to resident census on day of survey completion):

Primary Service Type	Service Provided?	Number of residents
a. Long-term general nursing *	<input type="checkbox"/>	<input type="text"/>
b. Long-term dementia *	<input type="checkbox"/>	<input type="text"/>
c. Skilled nursing/Short-term (subacute) rehabilitation *	<input type="checkbox"/>	<input type="text"/>
d. Long-term psychiatric (non dementia) *	<input type="checkbox"/>	<input type="text"/>
e. Ventilator *	<input type="checkbox"/>	<input type="text"/>
f. Bariatric *	<input type="checkbox"/>	<input type="text"/>
g. Hospice/Palliative *	<input type="checkbox"/>	<input type="text"/>
h. Other *	<input type="checkbox"/>	<input type="text"/>

Total Resident Census on Survey Day: 0

Add Required Information
Red *asterisk = required

Select Survey Year

Completing Your Annual Survey

On the day you complete this survey..

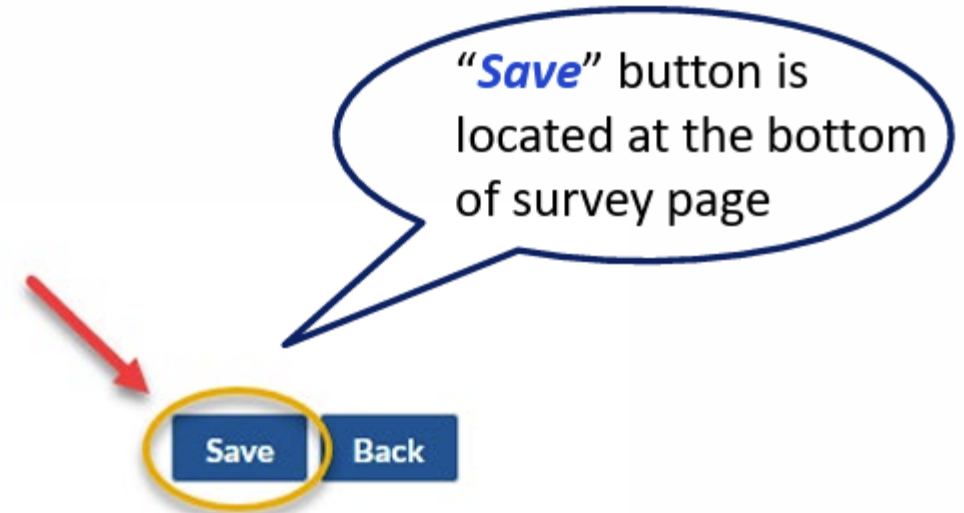
- The **Primary Service Type** portion is the only section on the survey that seeks current year information on the day this survey is completed.

Indicate which of the following primary service types are provided by your facility. On the day of this survey, indicate the number receiving those services (list only one service type per resident, i.e. total should sum to resident census on day of survey completion)

<u>Primary Service Type</u>	<u>Service Provided?</u>	<u>Number of residents</u>
a. Long-term general nursing *:	<input checked="" type="checkbox"/>	47
b. Long-term dementia *:	<input checked="" type="checkbox"/>	20
c. Skilled nursing/Short-term (subacute) rehabilitation *:	<input checked="" type="checkbox"/>	20
d. Long-term psychiatric (non dementia) *:	<input type="checkbox"/>	
e. Ventilator *:	<input type="checkbox"/>	
f. Bariatric *:	<input type="checkbox"/>	
g. Hospice/Palliative *:	<input checked="" type="checkbox"/>	10
h. Other *:	<input type="checkbox"/>	
Total Resident Census on Survey Day:		97

Save Your Completed Survey!

- Survey must be completed in one session as incomplete surveys cannot be saved.
- Survey must be submitted into the NHSN application and ***should not*** be sent to NHSN via e-mail.

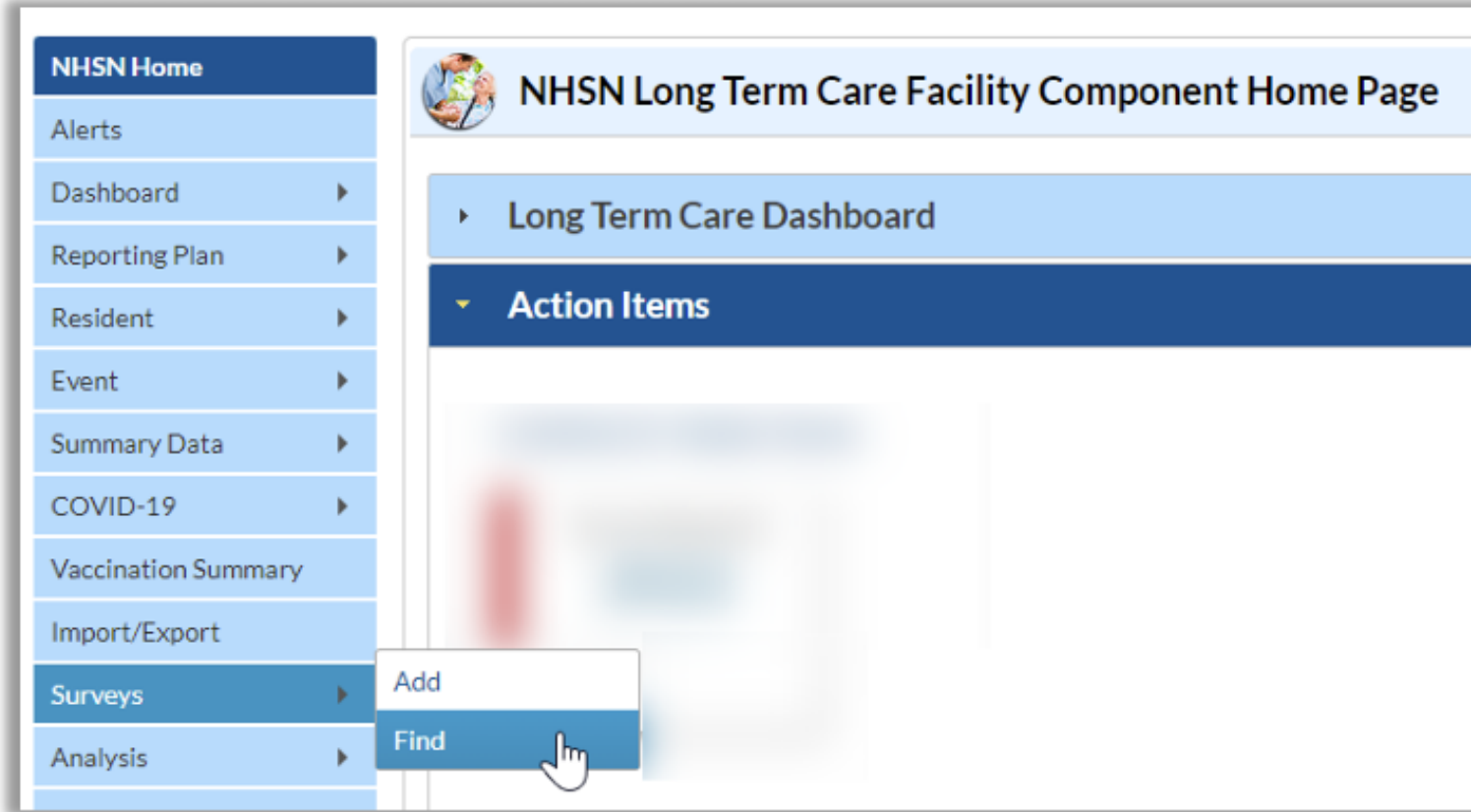


How to Review a Completed Annual Survey

To review and/or print a copy of a submitted survey:

Step 1: On the navigation panel click **“Surveys”**

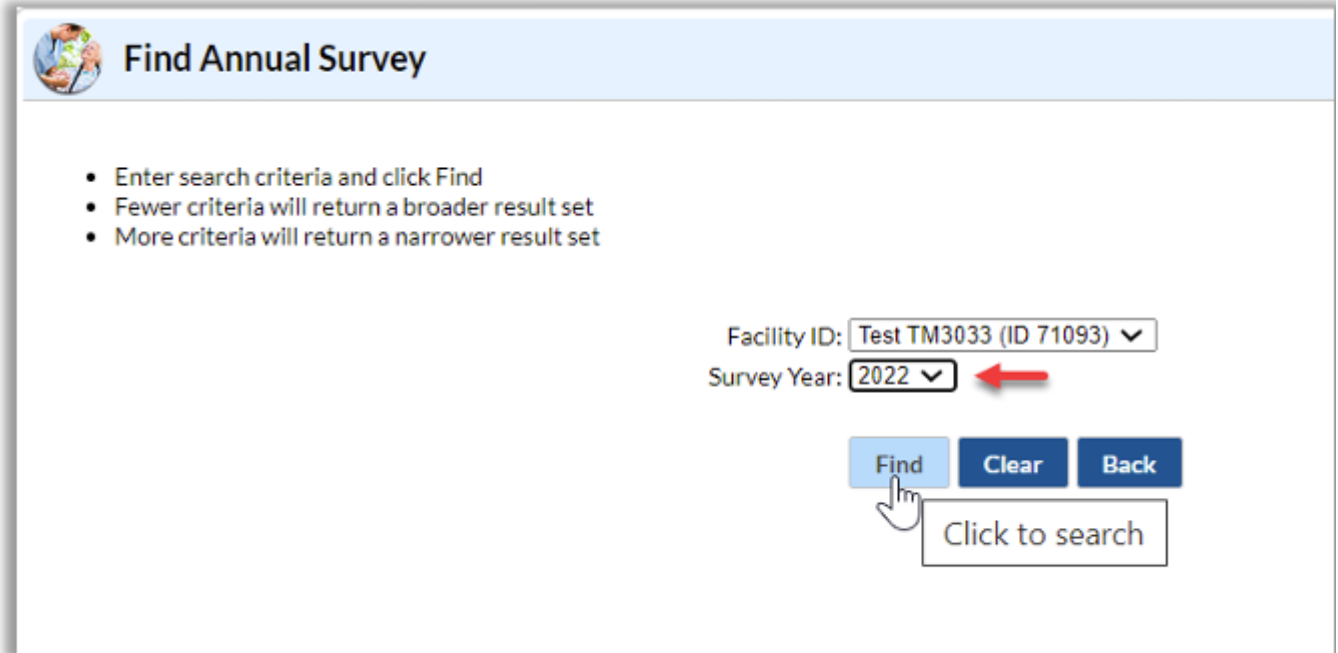
Step 2: Click **“Find”**



How to Review a Completed Annual Survey

Step 3: On the “Find Annual Survey” page select **“Survey Year”** in drop down

Step 4: Click **“Find”** to search



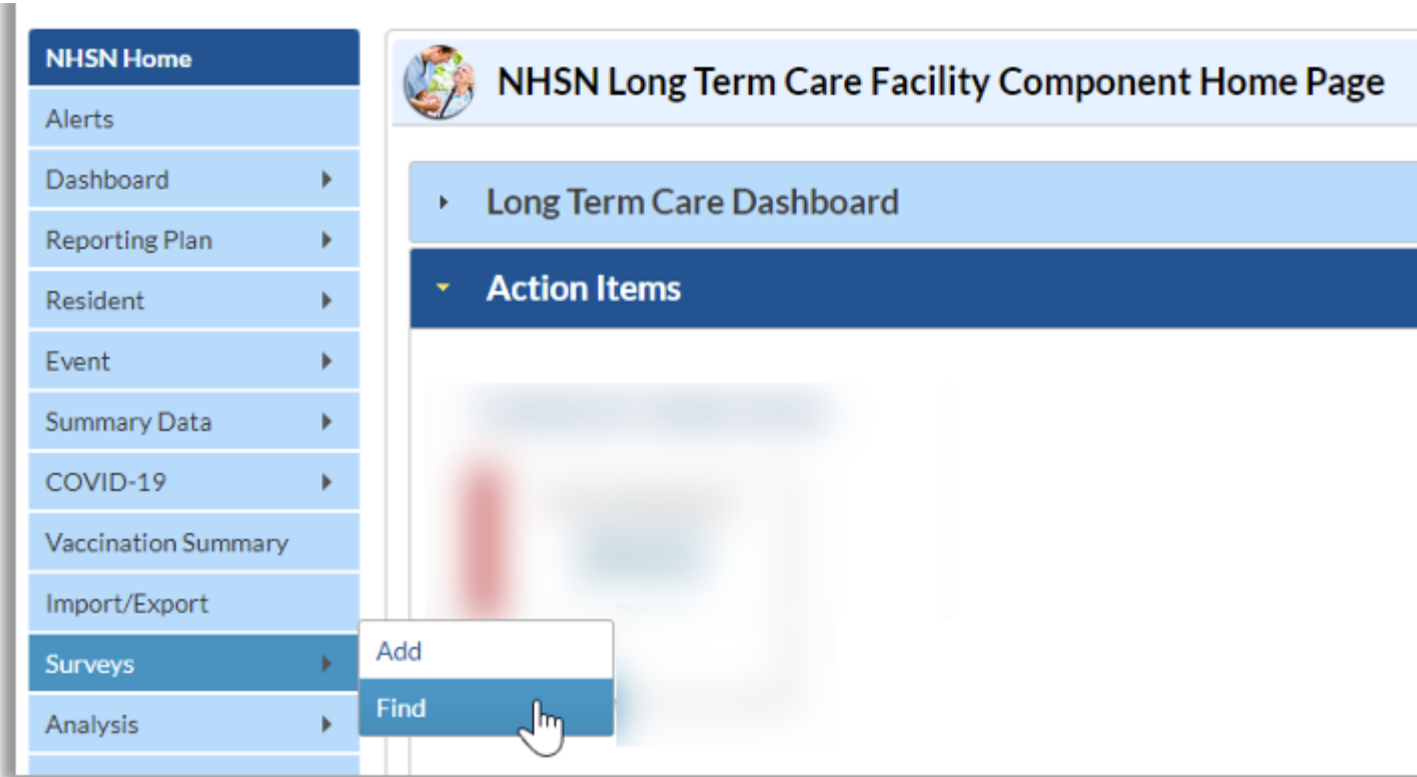
The screenshot shows the 'Find Annual Survey' interface. At the top, there is a header with a globe icon and the title 'Find Annual Survey'. Below the header, there are three bullet points: 'Enter search criteria and click Find', 'Fewer criteria will return a broader result set', and 'More criteria will return a narrower result set'. On the right side, there are two dropdown menus: 'Facility ID: Test TM3033 (ID 71093) v' and 'Survey Year: 2022 v'. A red arrow points to the 'Survey Year' dropdown. Below the dropdowns, there are three buttons: 'Find', 'Clear', and 'Back'. A hand icon is pointing to the 'Find' button, and a tooltip box with the text 'Click to search' is visible next to it.

How to Edit a Completed Annual Survey

To review and/or print a copy of a submitted survey:

Step 1: On the navigation panel click “**Surveys**”

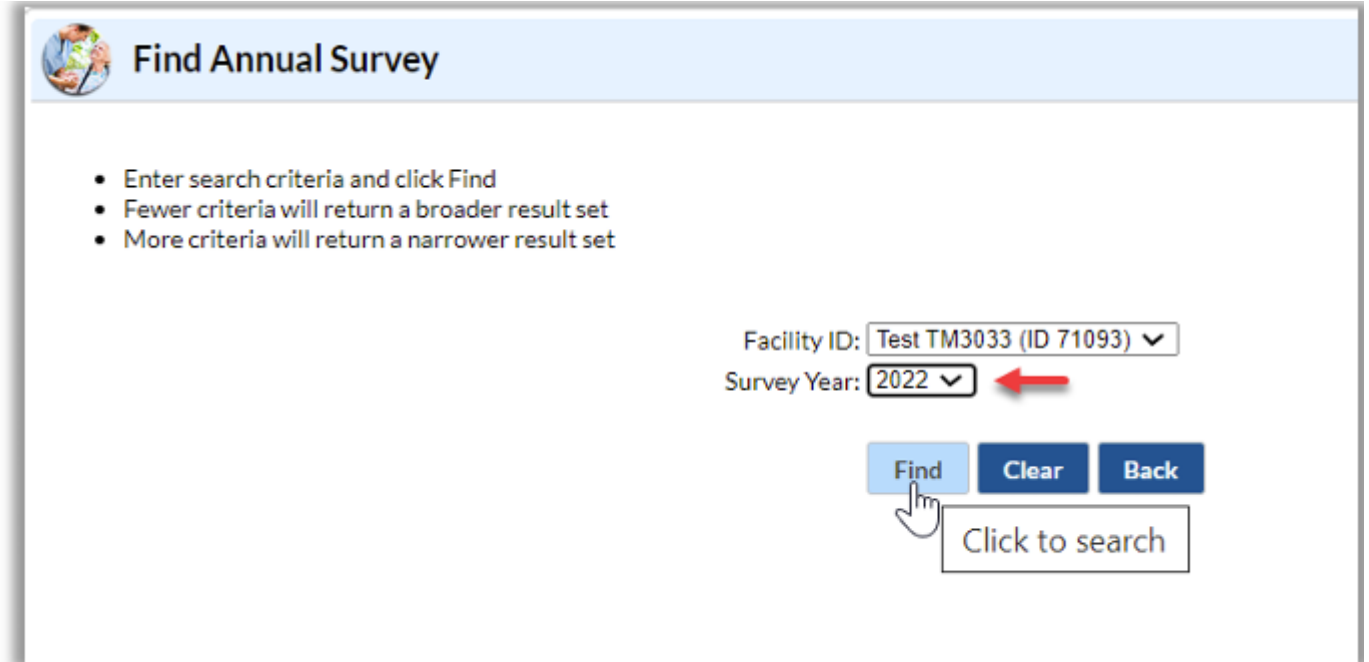
Step 2: Click “**Find**”



How to Edit a Completed Annual Survey

Step 3: On the “Find Annual Survey” page select “**Survey Year**” in drop down

Step 4: Click “**Find**” to search



Find Annual Survey

- Enter search criteria and click Find
- Fewer criteria will return a broader result set
- More criteria will return a narrower result set

Facility ID: Test TM3033 (ID 71093) ▼

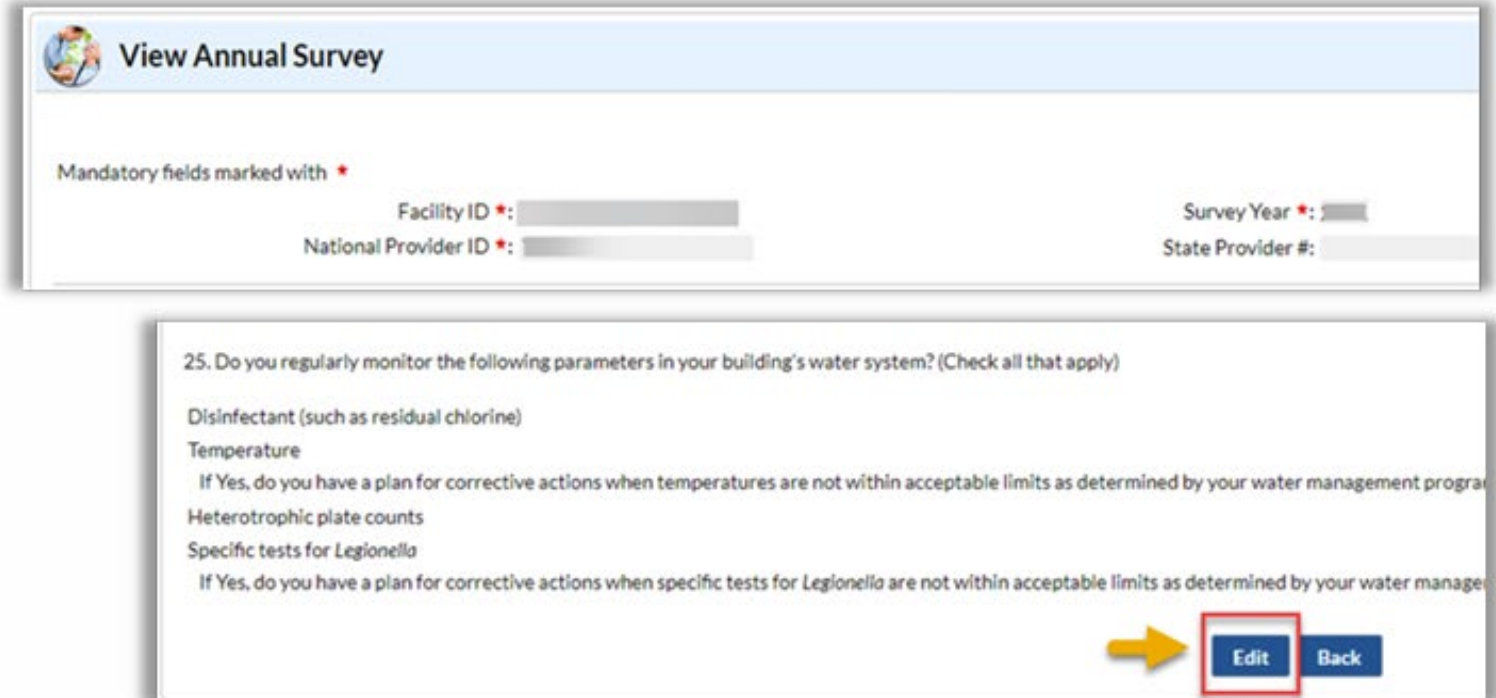
Survey Year: 2022 ▼

Find Clear Back

Click to search

How to Edit a Completed Annual Survey

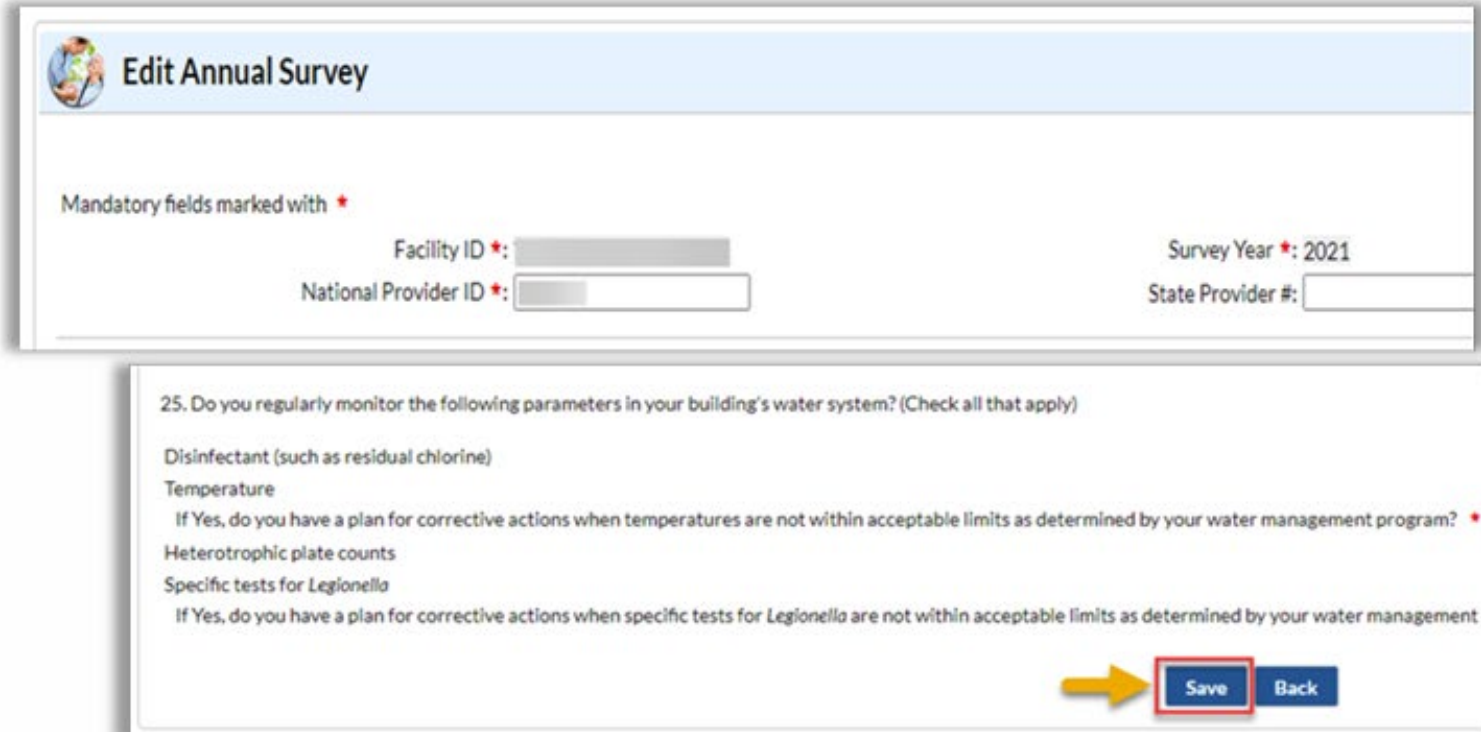
Step 5: On the “View Annual Survey” page scroll to bottom of page and click **“Edit”**



The screenshot shows the 'View Annual Survey' page. At the top, there is a header with a globe icon and the title 'View Annual Survey'. Below the header, a section titled 'Mandatory fields marked with *' contains four input fields: 'Facility ID *', 'National Provider ID *', 'Survey Year *', and 'State Provider #'. Below this, a question is displayed: '25. Do you regularly monitor the following parameters in your building's water system? (Check all that apply)'. The parameters listed are: 'Disinfectant (such as residual chlorine)', 'Temperature', 'If Yes, do you have a plan for corrective actions when temperatures are not within acceptable limits as determined by your water management program?', 'Heterotrophic plate counts', 'Specific tests for Legionella', and 'If Yes, do you have a plan for corrective actions when specific tests for Legionella are not within acceptable limits as determined by your water management program?'. At the bottom right, there are two buttons: 'Edit' and 'Back'. A yellow arrow points to the 'Edit' button, which is also highlighted with a red box.

How to Edit a Completed Annual Survey

Step 6: On the “Edit Annual Survey” page, make your changes and Click **“SAVE”** located at the bottom of page



Edit Annual Survey

Mandatory fields marked with *

Facility ID *: Survey Year *: 2021

National Provider ID *: State Provider #:

25. Do you regularly monitor the following parameters in your building's water system? (Check all that apply)

Disinfectant (such as residual chlorine)


Temperature

If Yes, do you have a plan for corrective actions when temperatures are not within acceptable limits as determined by your water management program? *

Heterotrophic plate counts

Specific tests for Legionella

If Yes, do you have a plan for corrective actions when specific tests for Legionella are not within acceptable limits as determined by your water management

 **Save** **Back**

Alliant Health and NHSN Updates

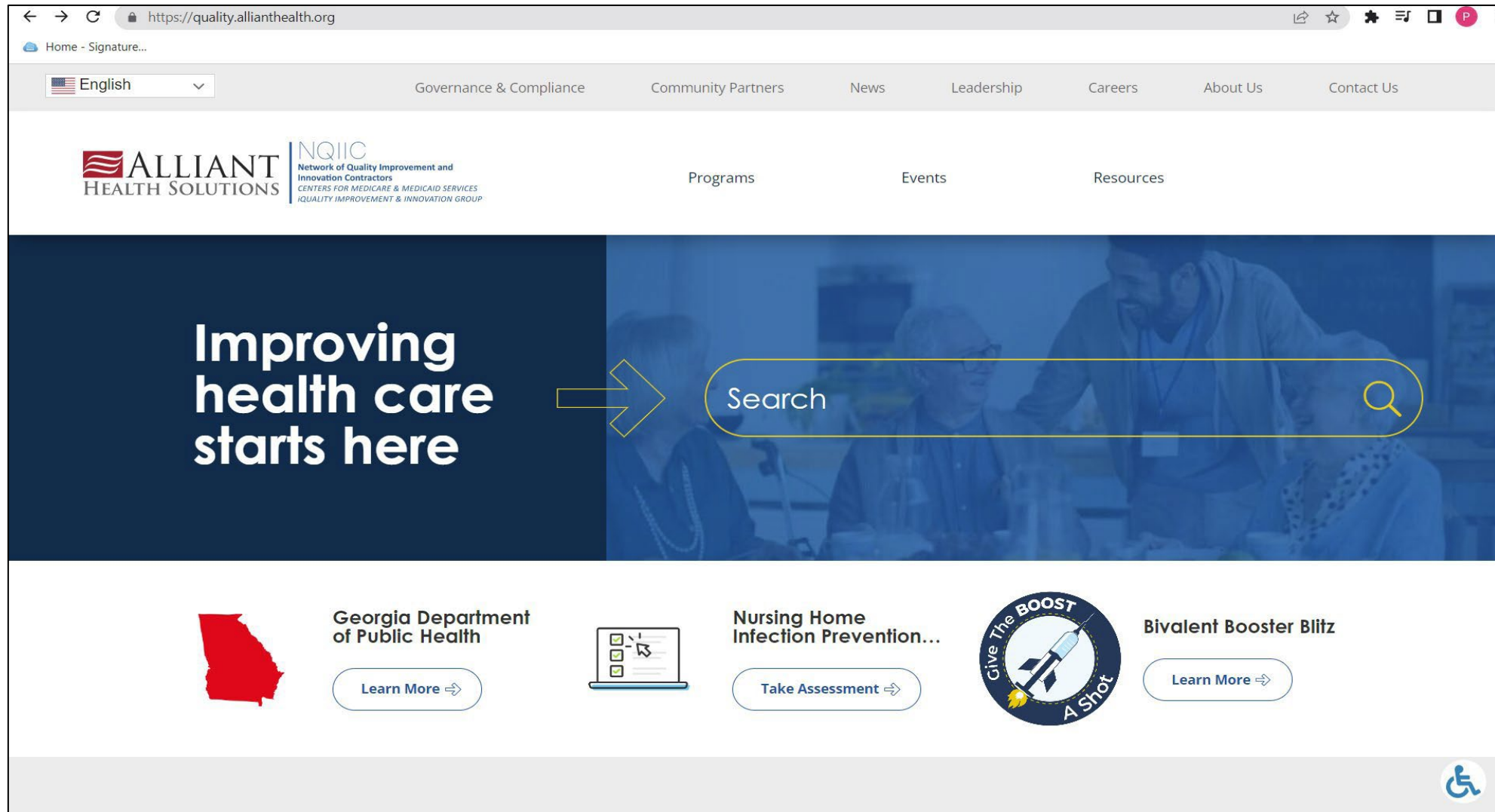
In Case You Missed It

Last month's Shop Talk:

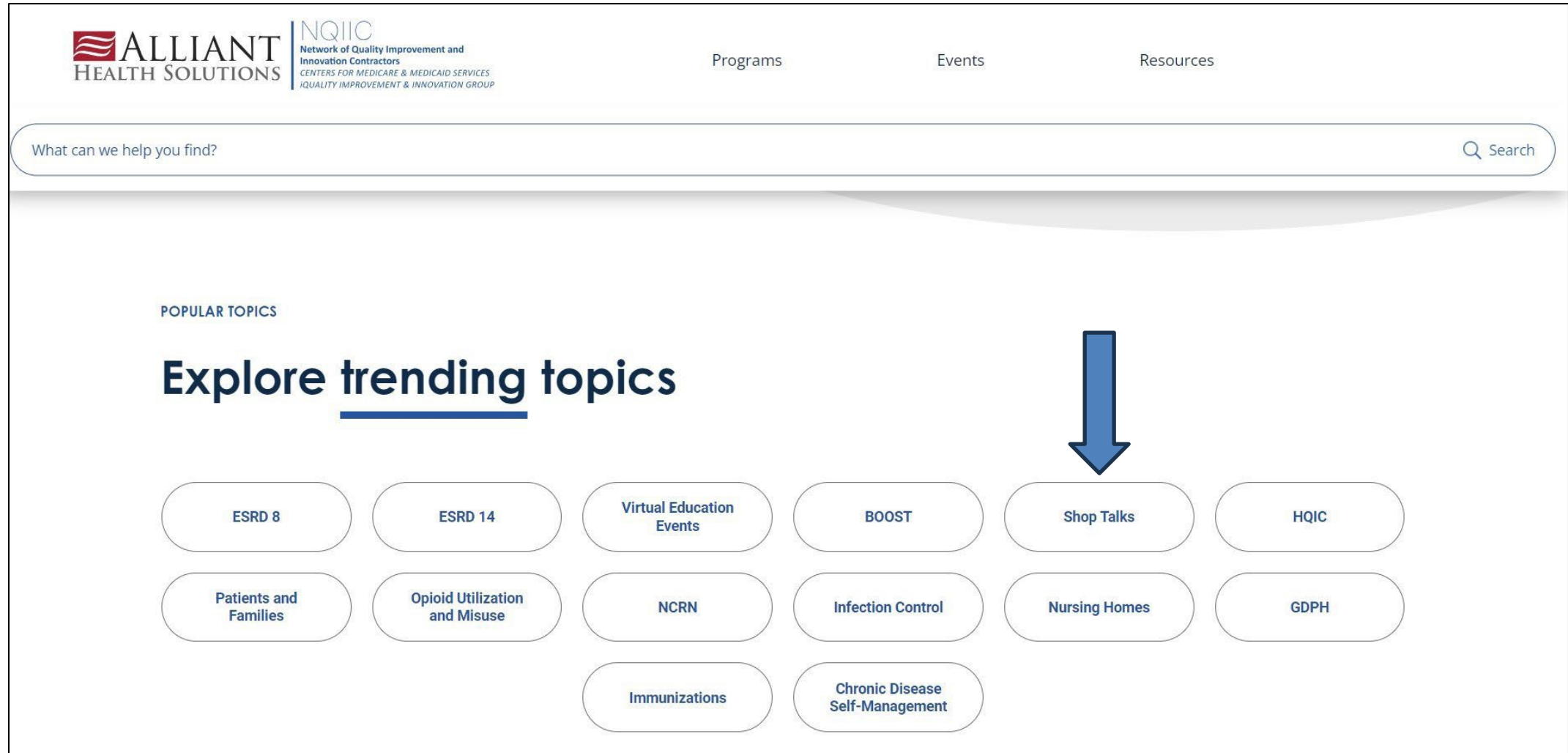
- NSHN updated definition changes, reporting form changes, LTCF annual survey, and HCP flu summary reporting.
- [Slides](#)
- [Webinar Recording](#)



Alliant Health Solutions Updated Website!



Alliant Health Solutions Website



Alliant Health Solutions Website



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

Home

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What can we help you find?

Search

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.





New Shop Talk Shorts

[Shop Talk Short: How to setup mobile soft token](#)

[Shop Talk Short: How to reinstall Entrust soft token on a new device](#)



NHSN E-Newsletters

<p>Volume 18, Issue 4 <u>December 2023</u></p> <p>NHSN NATIONAL HEALTHCARE SAFETY NETWORK</p>	Inside this Issue:	
	Patient Safety Component	
	Attention! New CMS Required Reporting Measure for CY 2024: NHSN AUR Module Submission Required for the CMS Promoting Interoperability Program	2
	Analysis Updates: Patient Safety Component Analysis Treeview Screen	3
	AUR Module Updates	4
	Updates to the Antimicrobial Resistance and Patient Safety Portal	7
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	2024 NHSN Protocol and Training Events	7
	Healthcare Personnel Safety Component	
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	General NHSN Information	
	NHSN Vendor Corner	12
	NHSN Helpdesk: Activity Update	17
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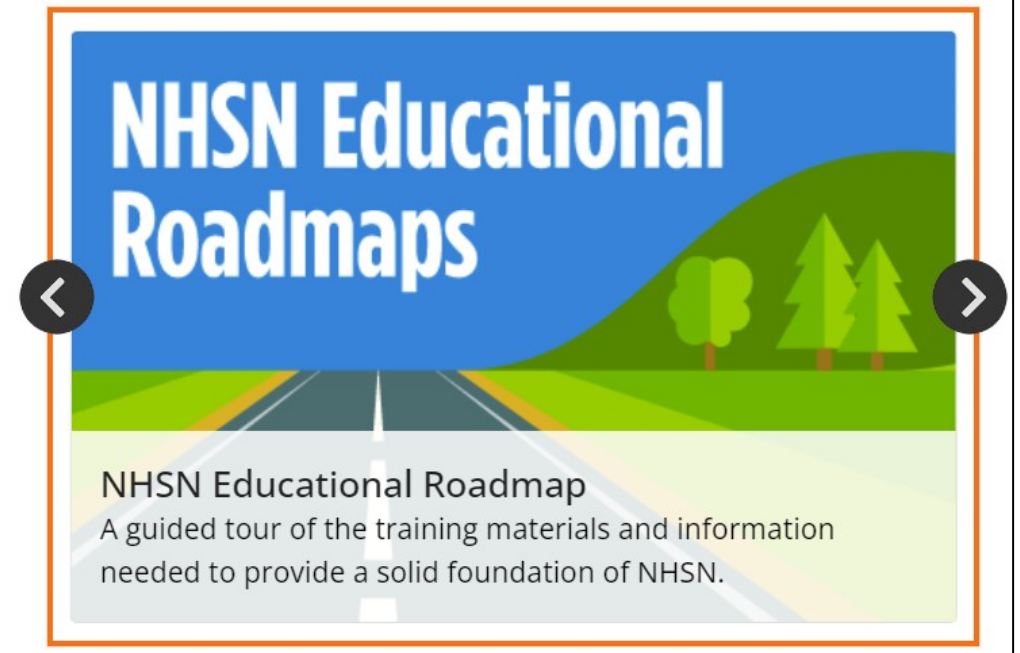


NHSN Training

Our mission is to offer learning opportunities in a variety of formats that enhance the knowledge and skills of NHSN facility- and group-level participants and their partners in order that they may effectively use the data obtained from the surveillance system to improve patient and healthcare personnel safety.

Objectives

- Convey NHSN data collection methods, submission requirements, and analysis options to participants so that they may acquire, submit, and disseminate high quality, actionable data.
- Prepare participants to use the NHSN reporting application accurately and efficiently.
- Enhance participants' and their partners' understanding of data quality and the value of adverse event monitoring.
- Encourage collaboration among participants and partners to improve the patient and healthcare personnel safety across the spectrum of care.




Long-Term Care Facility Component Roadmap

Phase II: Modules/Protocols

Healthcare-associated Infections: Surveillance for Urinary Tract Infections

 [Surveillance for UTI Module: Part I \[Video – 24 min\]](#)
[Slideset](#)  [PDF – 1.1 MB]

 [Surveillance for UTI Module: Part II \[Video – 31 min\]](#)
[Slideset](#)  [PDF – 3.4 MB]

 [UTI Protocol](#)  [PDF – 533 KB]

Laboratory-identified Event (LabID Event): Surveillance for CDI and MDROs in LTCF

 [Surveillance for CDI in LTCFs: LabID Event Modules \[Video – 30 min\]](#)
[Slideset](#)  [PDF – 1.1 MB]

 [Surveillance for MDROs in LTCFs: LabID Event Modules \[Video – 24 min\]](#)
[Slideset](#)  [PDF – 1.1 MB]

 [LabID Event Protocol](#)  [PDF – 308 KB]

Prevention Process Measures: Hand Hygiene, Gloves and Gown Adherence

 [LTCF Prevention Process Measures Module \[Video – 27 min\]](#)
[Slideset](#)  [PDF – 2 MB]

 [PPM Protocol](#)  [PDF – 308 KB]

Phase III: Analysis

Introduction to Analysis

 [Data for Action: How can NHSN data be used to guide prevention efforts in LTCF? – March 2017 \[Video – 43 min\]](#)
[Slideset](#)  [PDF – 4 MB]

NHSN Educational Roadmaps

LONG-TERM CARE FACILITY COMPONENT TRAINING

Welcome to the Long-term Care Facility Component (LTC) Educational Roadmap. This roadmap has three (3) sections, LTC Foundation, Modules/Protocols and Analysis. For the best learning experience, start with the Long-term Care Foundation section and work your way down the list and complete each item. After you complete this section, select the LTC Modules/Protocols Training that best meets your practice needs followed by Analysis.

Phase I: Long-Term Care Foundation

Part I: NHSN Getting to Know NHSN and the Long-term Care Facility Component

 [Infection Surveillance and Prevention in Long-term Care: A National Perspective \[Video – 29 min\]](#)
[Slideset](#)  [PDF – 3 MB]

 [Overview of Using NHSN to Track and Report Infections in LTCF \[Video – 51 min\]](#)
[Slideset](#)  [PDF – 5 MB]

<https://www.cdc.gov/nhsn/training/roadmap/ltc-roadmap.html>

NHSN ServiceNow

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 **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

Questions?



Thank You for Your Time!

Contact the Patient Safety Team

patientsafety@alliantHealth.org



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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



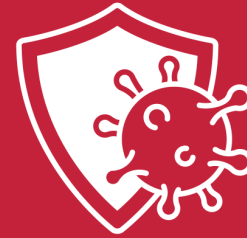
CHRONIC DISEASE SELF- MANAGEMENT

- 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

Making Health Care Better *Together*



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