Instructions for Completion of the COVID-19 Long-term Care Facility (LTCF): Resident Impact and Facility Capacity Form (CDC 57.144)

Data Field	Instructions for Data Collection
NHSN Facility ID #	The NHSN-assigned facility ID will be auto-entered by the computer.
CMS Certification Number (CCN)	Auto-generated by the computer if the facility has previously entered the CCN number during NHSN registration. See NHSN CCN Guidance document for instructions on how to add a new CCN or edit an entered CCN.
Facility Name	Auto-generated by the computer if the facility has previously entered facility name during registration.
Date for which "*resident impact and facility capacity* "responses are reported	*Required*. Select the date on the calendar for which the responses are being reported in the NHSN LTCF COVID-19 Module.

Important:

While daily reporting will provide the timeliest data to assist with COVID-19 emergency response efforts, retrospective reporting of prior day(s), unless otherwise specified, is encouraged if daily reporting is not feasible. At a minimum, facilities should report data <u>at least</u> once per week.

RESIDENT IMPACT

Data Field	Instructions for Data Collection
ADMISSIONS: Residents admitted or readmitted who were previously hospitalized and treated for COVID-19	• *If this is the first time Admission counts are being entered in the NHSN COVID-19 Module*: Enter the number of residents **newly** admitted or readmitted to the LTCF from a hospital where they were treated for suspected or laboratory positive COVID-19 **<u>this week</u>**. • *If this is <u>not</u> the first time Admission counts are being entered in the NHSN COVID-19 Module*: Enter the number of residents **newly** admitted or readmitted to the LTCF from a hospital where they were treated for suspected or laboratory positive COVID-19 **<u>since the last date</u>** *Admission* counts were entered. • *To submit Admission counts prior to May 1, 2020 (OPTIONAL):* Using the calendar feature, select any calendar date prior to May 1, 2020 and enter the total number of residents admitted or readmitted to the LTCF from a hospital where they were treated

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	for suspected or laboratory positive COVID-19 between January 1, 2020 and April 30, 2020. If these data are not available at the time of data entry, leave blank and revise counts later. **Notes:** • Please include counts since May 1, 2020 by selecting the appropriate calendar date. • Include only newly admitted or readmitted residents since the last date these counts were entered in the Module regardless if the resident(s) is still in the facility.
CONFIRMED: Residents with new laboratory positive COVID-19	• *If this is the first time Confirmed COVID-19 counts for residents are being entered in the NHSN COVID-19 Module*: Enter the number of residents who have been **newly** identified with laboratory positive COVID-19 **this week**. • *If this is not the first time Confirmed COVID-19 counts for residents are being entered in the NHSN COVID-19 Module*: Enter the number of residents who have been **newly** identified as having a laboratory positive COVID-19 test result **since the last date** that *Confirmed COVID-19* counts (laboratory positive COVID-19 test results) were entered, including residents who remain in the LTCF, as well as residents who were transferred out of the facility, admitted to another facility, or died. • *To submit Confirmed counts for residents prior to May 1, 2020 (OPTIONAL):* Using the calendar feature, select any calendar date prior to May 1, 2020 and enter the total number residents with a laboratory-positive COVID-19 test result between January 1, 2020 and April 30, 2020. If these data are not available at the time of data entry, leave blank and revise counts later. **Notes:** • Please include counts since May 1, 2020 by selecting the appropriate calendar date. • Include only new laboratory positive COVID-19 residents since the last date these counts were entered in the Module. • Include residents with new laboratory-positive COVID-19 results regardless if the resident(s) is still in the LTCF. For example, the count should include resident(s) that remain in the facility, were transferred out of the facility, admitted to another facility, as well as those who died.

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SUSPECTED: Residents with new suspected COVID-19	• *If this is the first time Suspected COVID-19 counts for residents are being entered in the NHSN COVID-19 Module:* Enter the number of residents who have been or are **newly** managed as though they have COVID-19, but *do not* have a laboratory positive COVID-19 test result, **this week**. • *If this is not the first time Suspected COVID-19 counts for residents are being entered in the NHSN COVID-19 Module*: Enter the number of residents who have been or are **newly** managed as though they have COVID-19 (but *do not* have a laboratory positive COVID-19 test result) **since the last date** that *Suspected COVID-19* counts were entered, including residents who remain in the LTCF, as well as residents who were transferred out of the facility, admitted to another facility, or died. • *To submit Suspected counts for residents prior to May 1, 2020 (OPTIONAL):* Using the calendar feature, select any calendar date prior to May 1, 2020 and enter the total number of residents who were managed as though they had COVID-19 (but did not have a laboratory positive COVID-19 test result) between January 1, 2020 and April 30, 2020. If these data are not available at the time of data entry, leave blank and revise counts later. **Notes:** • Please include counts since May 1, 2020 by selecting the appropriate calendar date. • *Suspected* is defined as a resident with signs and symptoms suggestive of COVID-19 as described by CDC's guidance but does not have a laboratory positive COVID-19 test result. This may include residents who have not been tested or those with pending test results. It may also include residents with negative test results but continue to show signs/symptoms suggestive of COVID-19. • Include residents with new suspected COVID-19 regardless if the resident is still in the LTCF. For example, the count should include suspected resident(s) that remain in the facility, were transferred out of the facility, admitted to another facility, as well as those who died.

Data Field	Instructions for Data Collection
TOTAL DEATHS: Residents who have died in the facility or another location	• *If this is the first time Total Death count for residents is being entered in the NHSN COVID-19 Module*: Enter the total number of residents who have died **for any reason** in the LTCF or another location **this week**. • *If this is <u>not</u> the first time the Total Death count is being entered in the NHSN COVID-19 Module:* Enter the number of residents who died **for any reason** in the LTCF or another location **since the last date** *Total Death* counts were entered. • *To submit Total Death counts residents prior to May 1, 2020 (OPTIONAL):* Using the calendar feature, select any calendar date prior to May 1, 2020 and enter the total number of deaths for residents who died **for any reason** in the LTCF or another location between January 1, 2020 and April 30, 2020. If these data are not available at the time of data entry, leave blank and revise counts later. **Notes:** • Please include counts since May 1, 2020 by selecting the appropriate calendar date. • Include both COVID-19 related deaths **AND** non-COVID-19 related deaths.
COVID-19 DEATHS: Residents with suspected or laboratory positive COVID-19 who died in the facility or another location	• *If this is the first time COVID-19 Death counts for residents are being entered in the NHSN COVID-19 Module*: Enter the number of deaths for residents with suspected **AND** confirmed COVID-19 (laboratory-positive COVID-19 test result) **this week**. This includes residents that died in the LTCF or another location. • *If this is <u>not</u> the first time the COVID-19 Death counts for residents are being entered in the NHSN COVID-19 Module:* Enter the number of **new** deaths for residents with suspected **AND** confirmed COVID-19 (laboratory positive COVID-19) **since the last date** *COVID-19 Death* counts were entered. This includes residents that died in the LTCF or another location. **Note:** Include only new deaths since the last time these counts were entered in the Module. • *To submit COVID-19 Death counts for residents prior to May 1, 2020 (OPTIONAL):* Using the calendar feature, select any calendar date prior to May 1, 2020 and enter the total number of deaths for residents with suspected **AND** confirmed COVID-19

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	(laboratory-positive COVID-19 test result) between January 1, 2020 and April 30, 2020. This includes residents that died in the LTCF or another location. If these data are not available at the time of data entry, leave blank and revise counts later. **Notes:** • Please include counts since May 1, 2020 by selecting the appropriate calendar date. • *Suspected* is defined as a resident with signs and symptoms suggestive of COVID-19 as described by CDC's guidance but does not have a laboratory positive COVID-19 test result. This may include residents who have not been tested or those with pending test results. It may also include residents with negative test results but continue to show signs/symptoms suggestive of COVID-19. • If a resident previously had laboratory-positive or suspected COVID-19 but recovered and is no longer being treated as having COVID-19 (for example, resolved signs/symptoms) at the time COVID-19 death counts are being collected, do not include resident in COVID-19 death count. Instead, include the resident in the Total Deaths count.

FACILITY CAPACITY AND LABORATORY TESTING

Data Field	Instructions for Data Collection
ALL BEDS: (FIRST SURVEY ONLY)	Enter the total number of resident beds in the facility. **Note:** • Include the number of beds the facility is licensed for. • After the first time the *total number of resident beds* in the facility is entered, the count will auto-populate for future sessions. If the resident bed count changes, the user may update the count.
CURRENT CENSUS: Total number of beds that are **currently** occupied.	<u>On the date responses are being reported in the Module</u>, enter the total number of residents that are occupying a bed in the facility. **Note:** • This count should include all residents who are occupying a bed in your facility, even non-licensed beds (for example,

	additional beds had to be brought in to handle increased capacity of residents or residents are being moved to other parts of the facility that are not normally included in the LTCF bed count).
TESTING: Does your facility have access to COVID-19 testing while the resident is in the facility?	*Required.* Answer "YES" if on the date responses are being reported in the Module, the LTCF has access to COVID-19 testing that can be performed while the resident remains in the LTCF Otherwise, answer, "NO".
If "**YES**," what laboratory type are the specimens sent for testing? *Select all that apply.*	*Conditional:* If "YES" is answered indicating that testing is available to be performed while the resident remains in the LTCF, select **one or more** of the locations where the specimens are sent for testing: □ State health department lab □ Private lab (hospital, corporation, academic institution) □ Other **Notes:** • *Other* should be selected only if the location is not included in the available selections. • A response to this question is required to SAVE this pathway.