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Healthcare Personnel Vaccination Module Annual Influenza Vaccination Summary

Acute Care Facilities

Division of Healthcare Quality Promotion NHSN Vaccination Team

October 2024

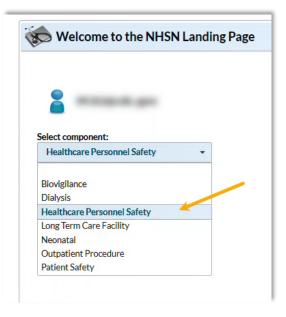


By the end of this session, you will:

- Be able to access the Healthcare Personnel Safety (HPS) Component
- Become familiar with Influenza Vaccination Summary reporting requirements
- Know how to enter data for the HCP Influenza Vaccination Summary
- Understand the updates on timestamps
- Access the analysis report for the HCP Influenza Vaccination Summary

Key Points: What to report

 Report annual HCP influenza vaccination summary data through the NHSN Healthcare Personnel Safety (HPS) Component for the 2024-2025 influenza season



Key Points: Where to report

- Facilities must activate the Healthcare Personnel Safety (HPS) Component in NHSN to report annual HCP Influenza vaccination summary data.
 - Do NOT de-activate any other components (e.g., the Long-term Care Facility Component)
- 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.



Key Points: When to report

- The reporting period for the 2024-2025 influenza season is from October 1, 2024 through March 31, 2025
- Facilities that are required to report data by CMS must submit one report covering the entire influenza season
- The deadline to report the annual HCP influenza vaccination summary data through the NHSN HPS Component is May 15, 2025



Updates on Timestamps in NHSN

- As of February 26, 2024, timestamps for data submission and modification in the NHSN application were updated to display Coordinated Universal Time (UTC)
- UTC is the international time standard. It has been implemented as part of ongoing NHSN system upgrades and modernization efforts
- The new UTC timestamp will have no impact on data submission deadlines. Local time remains in place for data submission deadlines. No action is needed from NHSN users.
- Please refer to the following guidance document for more information UTC timestamps: <u>UTC</u> <u>Guidance Document (cdc.gov)</u>

Getting Started in the HPS Component

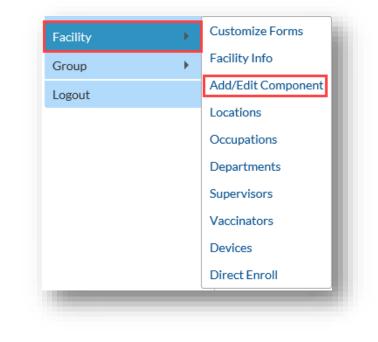
How to see if your facility already activated the HPS Component

Navigate to Facility > Add/Edit Component

| Follow/ Followed | Component | Activated | Deactivated | Agreement Accepted | View Agreement |
|---------------------|---|------------|-------------|-----------------------|----------------|
| | Biovigilance | | | | |
| | Dialysis | | | $\left(2\right)$ | |
| | Healthcare Personnel Safety | 08/09/2012 | | Y | View Agreemen |
| | Long Term Care Facility | 08/09/2012 | | Y | View Agreemen |
| | Medication Safety (pilot facilities only) | | | | |
| | Neonatal | | | | |
| | Outpatient Procedure | | | | |
| | Patient Safety | | | | |

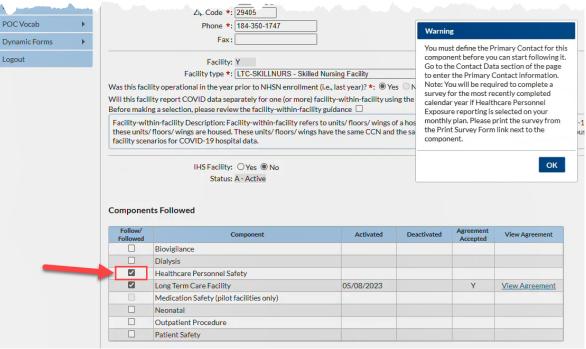
Activating the HPS Component

- Activating the HPS component is necessary for facilities that are not currently enrolled in this component
- Only a NHSN Facility Administrator can activate a new component
- Facility Administrators will log in to the HPS component and navigate to Facility > Add/Edit Component



Activating the HPS Component (cont.)

- Scroll to "Components followed" and check the box next to Healthcare Personnel Safety.
- An alert will pop-up indicating you must first define the primary contact for this component.



Activating the HPS Component (cont.)

- Select "OK" and enter the contact information on the next page for your HPS primary contact.
- Note this can be an existing NHSN user.

| *: ◎Yes ○No | |
|-----------------------|--|
| Edit Record | Э |
| | OCreate new NHSN User |
| Existing NHSN User Em | ail |
| Username * | |
| Password * | |
| Verify Password * | |
| Contact Type | HCP - Healthcare Personnel Primary Contact |
| First Name * | |
| Last Name * | |
| Middle Name | |
| Phone * | Ext: |
| Email * | |
| Title | |
| Click to copy mailin | ng address from the facility |
| Address Line 1 * | |
| Address Line 2 | |
| Address Line 3 | |
| City * | |
| State * | ✓ |
| Zip Code * | Zip Code Ext: |
| Fax | |
| Pager Number | |
| • | 🖶 Submit 🗶 Cancel |

Activating the HPS Component (cont.)

- After submitting and updating this information, your FA must return to the NHSN homepage and log into the HPS Component to accept the agreement to participate and consent.
- Make sure to scroll all the way to the bottom of the page and click the "Accept" checkbox.



Reporting Requirements for the HCP Influenza Vaccination Summary

HCP Categories

- **Employee HCP: Staff on facility payroll**
- Non-Employee HCP: Licensed independent practitioners (physicians, advanced practice nurses, and physician assistants)
- Non-Employee HCP: Adult students/trainees and volunteers
- HCP must be physically present in the facility for at least 1 working day between October 1 through March 31

| Page 1 of 2 |
|---|
| *required for saving, ^conditionally required for saving |
| Record the number of healthcare personnel (HCP) for each category below for the influenza season being tracked. |
| |

Healthcare Personnel Influenza Vaccination Summary

| *Facility ID#: | | | ^Location: | | | | |
|---------------------------------|------------------------------------|---|---|---|--------------------------------|--|--|
| *Vaccination type: Influenza | *Influenza subtypeª: □ Seasonal | *Influenza Se | ason ^b : | Date Last Modified: | _/_/ | | |
| | < | Employee HCP | Non-Er | nployee HCP | > | | |
| | | *Employees (staff on facility payroll) | *Licensed independent practitioners: Physicians, advanced practice nurses, & physician assistants | *Adult students/ trainees & volunteers | Other Contract Personnel | | |

HCP Categories: Employee HCP

- Employees (staff on facility payroll) [Required]
 - Defined as all persons that receive a direct paycheck from the healthcare facility (i.e., on the facility's payroll), regardless of clinical responsibility or patient contact

HCP Categories: Non-Employee HCP: Licensed Independent Practitioners

- Licensed Independent Practitioners [Required]
 - Defined as physicians (MD, DO); advanced practice nurses; and physician assistants only who are affiliated with the healthcare facility, but are not directly employed by it (i.e., they do not receive a paycheck from the facility), regardless of clinical responsibility or patient contact. Post-residency fellows are also included in this category.

HCP Categories: Non-Employee HCP: Adult Students/Trainees and Volunteers

- Adult students/trainees and volunteers [Required]
 - Defined as adult students/trainees and volunteers: medical, nursing, or other health professional students, interns, medical residents, or volunteers aged 18 or older that are affiliated with the healthcare facility, but are not directly employed by it (i.e., they do not receive a paycheck from the facility), regardless of clinical responsibility or patient contact

HCP Categories: Non-Employee HCP: Other Contract Personnel

Other contract personnel [Optional]

- Defined as persons providing care, treatment, or services at the facility through a contract
- There are several types of personnel who provide direct care and non-direct services. Examples include:
 - Dialysis technicians
 - Occupational therapists
 - Admitting staff
 - Pharmacists
- Refer to Appendix A of the HCP Influenza Vaccination Summary Protocol for suggested list of contract personnel: <u>Combined Protocol for HCP January 2024 (cdc.gov)</u>

HCP Categories: Non-Employee HCP: Other Contract Personnel (cont.)

- Include vendors in data reporting for other contract personnel
 - Vendors providing care, treatment, or services should be included in the other contract personnel category if they physically work in the facility for at least one day during the reporting period (October 1 through March 31)

Influenza Vaccination Summary Form Questions

| | HCP categories | Employee HCP Employees (staff on facility payroll) * |
|----|--|--|
| | 1. Number of HCP who worked at this healthcare facility for at least 1 day between October 1 and March 31 | |
| а. | 2. Number of HCP who received an influenza vaccine at this healthcare facility since influenza vaccine became available this season | |
| b. | 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 | |
| c. | 4. Number of HCP who have a medical contraindication to the influenza vaccine | |
| d. | 5. Number of HCP who declined to receive the influenza vaccine | |
| e. | 6. Number of HCP with unknown vaccination status (or criteria not met for questions 2-5 above) | |

Influenza Vaccination Summary Form Questions (cont.)

- Question #2 HCP who received an influenza vaccination at this healthcare facility since influenza vaccine became available this season
- Question #3 HCP who provided a written report or documentation of influenza vaccination outside this healthcare facility since influenza vaccine became available this season
 - Acceptable forms of documentation include:
 - A signed statement or form, or an electronic form or e-mail from a healthcare worker (HCW) indicating when and where he/she received the influenza vaccine
 - A note, receipt, vaccination card, etc. from the outside vaccinating entity stating that the HCW received the influenza vaccine at that location
 - Verbal statements are not acceptable

Influenza Vaccination Summary Form Questions (cont.)

- Question #4 HCP who have a medical contraindication to the influenza vaccine
 - For this module, for inactivated influenza vaccine (IIV), accepted contraindications include:
 - (1) severe allergic reaction (e.g., anaphylaxis) after a previous vaccine dose or to a vaccine component, including egg protein; or
 - (2) history of Guillain-Barré Syndrome within 6 weeks after a previous influenza vaccination.
 - HCP who have a medical contraindication to live attenuated influenza vaccine (LAIV) other than the medical contraindications listed above, should be offered IIV by their facility, if available
 - Documentation is not required for reporting a medical contraindication (verbal statements are acceptable)

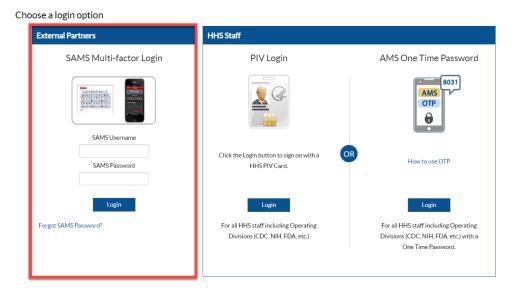
Influenza Vaccination Summary Form Questions (cont.)

- Question #5 HCP who declined to receive the influenza vaccine
 - Documentation is not required for reporting declinations (verbal statements are acceptable)
- Question #6 HCP with unknown vaccination status (or criteria not met for abovementioned categories)

Entering Data for the HCP Influenza Vaccination Summary

Log into SAMS

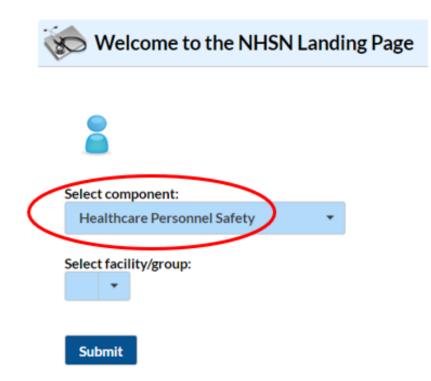
- You can access the activity home page by clicking <u>https://nhsn2.cdc.gov/nhsn/</u>
- Enter your SAMS username and password
- Enter SAMS grid card numbers



• For assistance with SAMS, contact the SAMS Help Desk at: 1-877-681-2901 or <u>samshelp@cdc.gov</u>

NHSN Landing Page

• Select the HCP Safety Component

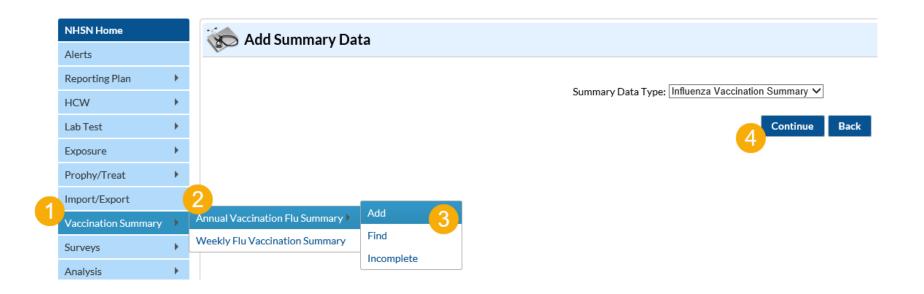


HPS Component Home Page

| NHSN - National Healthcare Safety Network | | | | | | |
|---|---|---------------------------------------|-------------------------|--------------------------------|------------------|--|
| NHSN Home | | MHSN Healthcare I | Personnel Safety Com | nonent Home Page | | |
| Alerts | | | croomic barcey com | ipoliciti nome i age | | |
| Reporting Plan | • | | | | | |
| HCW | • | Action Items | | | | |
| Lab Test | • | | | | | |
| Exposure | • | COMPLETE THESE ITEM | IS | | | |
| Prophy/Treat | • | | | | | |
| Import/Export | | Confer Rights | | | | |
| Vaccination Summary | • | Not | | | | |
| Surveys | • | Accepted | | | | |
| Analysis | • | · · · · · · · · · · · · · · · · · · · | | | | |
| Users | • | ALERTS | | | | |
| Facility | • | | | | | |
| Group | • | 2 | 1 | 18 | 33 | |
| Logout | | | L 1 | TO | 55 | |
| | | Incomplete Treatment Dates | Missing Summary Data | Missing Weekly Summary Data | Report No Events | |
| | | | | | | |
| | | | | | | |
| | | | | | | |

HCP Influenza Vaccination Summary Data

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



Summary Report for All Other Facilities

- "Influenza" and "Seasonal" are the default choices for vaccination type and influenza subtype
- Select appropriate flu season in drop-down box (e.g., 2024-2025)

| K Add Influenz | za Vaccinati | on Summary |
|--|--------------|---|
| Mandatory fields marked | with * | |
| Record the cumulative no Facility ID *: | | are personnel (HCP) for each category below for the influenza season being tracked. |
| Vaccination type *: | | |
| Influenza subtype *: Flu Season *: | | ← |
| Date Last Modified: | | |
| | 2024/2025 | |
| | 2023/2024 | HCP categories |
| | 2022/2023 | |

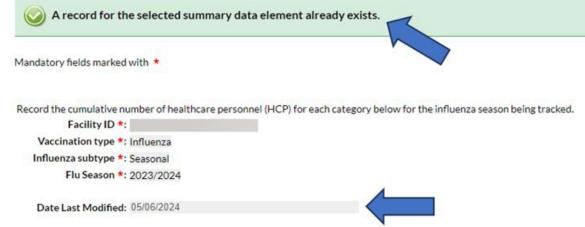
Data Entry Screen

- The asterisks indicate required columns that must be completed
- Use the "Comments" box to enter any additional information
- Click "Save" to save the record

| | Employee HCP | N | on-Employee HC | P |
|---|--|---|--|--------------------------------|
| 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 | | | | |
| 2. Number of HCP who received an influenza vaccine at this healthcare facility since influenza vaccine became available this season | | | | |
| 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 | | | | |
| 4. Number of HCP who have a medical contraindication to the influenza vaccine | | | | |
| 5. Number of HCP who declined to receive the influenza vaccine | | | | |
| 6. Number of HCP with unknown vaccination status (or criteria not met for questions 2-5 above) | | | | |
| Custom Fields | | | | |
| Comments | | | | |

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
- Click the "Edit" button at the bottom of the screen to modify existing data
- After making edits, save the updated data by clicking the "Save" button at the bottom of the screen



Data Entry Using .CSV File Upload

- Facilities can use this same pathway and click "upload CSV"
- CSV template files and instructions are found on our webpage: <u>HCP Flu</u> <u>Vaccination | HPS | NHSN | CDC</u>
 - Under the headings 'CSV Data Import' and 'Annual Healthcare Personnel Flu Vaccination Data'

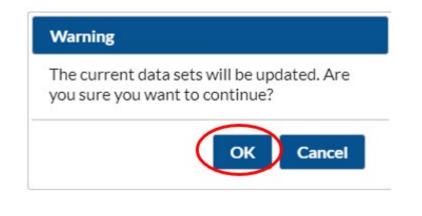
| | NHSN Home | | K Add Summary Da | ata |
|---|--------------------|-----|----------------------------------|------------|
| | Alerts | | Add Summary Da | ala |
| | Reporting Plan | • | | |
| | HCW | • | | |
| | Lab Test | • | | |
| | Exposure | • | | |
| | Prophy/Treat | • | | |
| 1 | Import/Export | | 2 | _ |
| U | Vaccination Summar | y 🕨 | Annual Vaccination Flu Summary 🕨 | Add 3 |
| | Surveys | • | Weekly Flu Vaccination Summary | Find |
| | Analysis | • | | Incomplete |

Data Analysis Features for HCP Influenza Vaccination Summary

Generating HCP Influenza Vaccination Summary Data

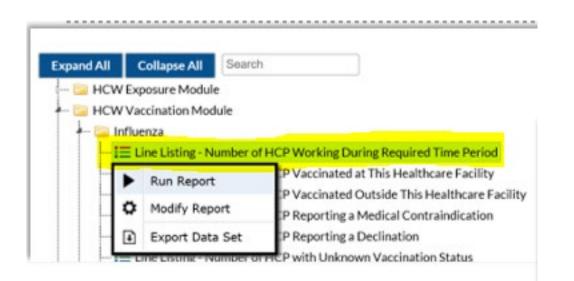
- Go to "Analysis" and select "Generate Data Sets"
- Select time period for analysis
- Select "OK" when webpage message appears on the screen





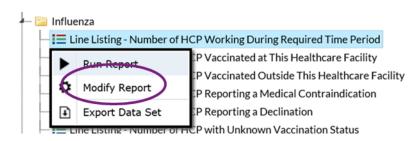
HCP Influenza Vaccination Summary Data Analysis: Output Options

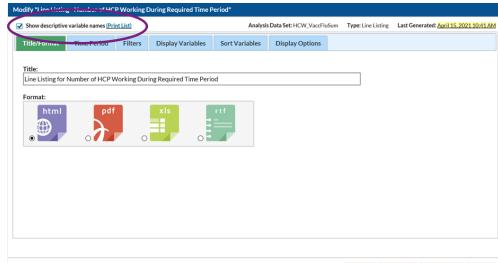
- Go to "Analysis" and "Reports"
- Click on "HCW Vaccination Module," "Influenza," and then "Line Listing-Number of HCP Working During Required Time Period"
- Click on "Run Report" to view the default output



Modifying HCP Influenza Vaccination Summary Data Output

- To modify the default analysis output, click "Modify Report" on the report you wish to modify
- Can export dataset and change output title and format
- Can use variable labels when viewing output







Confirming Data Entry

Data Verification in NHSN

 Run a CMS Line Listing Report using instructions located here: <u>https://www.cdc.gov/nhsn/pdfs/hps-</u> <u>manual/vaccination/verification-hcp-flu-data.pdf</u>



Submission of Healthcare Personnel (HCP) Influenza Vaccination Summary Data in NHSN

Several facilities have contacted NHSN to request assistance with verifying their facility's HCP influenza vaccination summary data. While data verification is important for all facilities, those required to submit data to CMS should be particularly mindful: <u>https://www.cdc.gov/nhsn/pdfs/cms/cms-reporting-requirements.pdf</u>. We have outlined some guidance to help facilities check their HCP vaccination data.

Data Submission and Verification in NHSN

A facility should enter and save their HCP influenza vaccination summary data into NHSN. Please note that NHSN does not provide a confirmation e-mail to facilities once they have submitted their data.

CDC assists with routinely verifying HCP influenza vaccination summary data during the <u>first year</u> of data reporting for a CMS program as a courtesy to facilities. After the first year, facilities should follow the steps below to verify data. Facilities should also maintain printed copies or screenshots of their data entry for their records.

National Healthcare Safety Network Line Listing for HCP Flu Vaccination Data for CMS IPPS

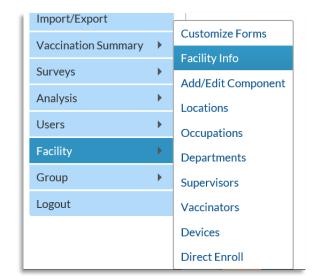
As of: August 16, 2024 at 7:21 PM Date Range: All HCW_VACCFLUSUMCMS_ACUTE

| orgID | summary Season | vacc Туре | personnelType | personnelTypeDesc | vaccTypeDesc | declinations | contraindications | vaccEW | vaccHere | working | pctVacc | totVacc | pct |
|-------|----------------|------------------|---------------|--|--------------|--------------|-------------------|--------|----------|---------|---------|---------|-----|
| | | FLU | Employee | Employees | Influenza | 0 | 0 | 0 | 100 | 100 | 100% | 100 | 97% |
| | | FLU | LIP | Licensed Independent Practitioners | Influenza | 0 | 0 | 0 | 100 | 100 | 100% | 100 | 97% |
| | | FLU | studVol | Adult Students/Trainees and Volunteers | Influenza | 0 | 0 | 0 | 50 | 50 | 100% | 50 | 94% |
| | | FLU | All | All Healthcare Workers | Influenza | 0 | 0 | 0 | 250 | 250 | 100% | 250 | 99% |

| Analysis Reports |
|---|
| Expand All Collapse All Search |
| - 🔄 HCW Exposure Module |
| - 🔄 HCW Vaccination Module |
| 🗕 🔚 CMS Reports |
| 📴 Acute Care Hospitals (Hospital IQR) |
| 📟 🔚 Ambulatory Surgery Centers (ASCQR) |
| 📖 📴 Inpatient Psychiatric Facilities (IPFQR) |
| 📖 📴 Inpatient Rehabilitation Facilities (IRFQR) |
| 🖳 🔄 Long Term Acute Care Hospitals (LTCHQR) |
| 📖 📴 Outpatient Dialysis Facilities (QIP) |
| 🦾 📴 Long Term Care Facilities (SNFQRP) |
| 📴 COVID-19 Module |
| 📴 Advanced |
| 🖟 🚰 My Custom Reports |
| |

Data Verification in NHSN (cont.)

- Ensure that the correct facility CMS Certification Number (CCN) <u>and</u> CCN effective date have been entered into the "Facility Information" page of NHSN
 - Your CCN effective date = date your facility first received its CCN from CMS
- Ensure that your facility is enrolled as the correct facility type on the "Facility Information" page of NHSN
 - If your facility is not correctly enrolled, please contact NHSN-ServiceNow for assistance





Resource: The NHSN Website

- Visit <u>https://www.cdc.gov/nhsn/hps/vaccination/index.html</u>
- Refer to materials under the "Annual Flu Summary" headings
- Data collection forms
- Tables of Instructions
- Training slides

| Healthcare Pe | ersonnel (HCP) F | lu Vaccination |
|---|----------------------|---------------------------------------|
| On This Page | | Educational Roadmap |
| Announcements | CSV Data Import | |
| Protocols | Operational Guidance | Influenza Vaccination Data Reports |
| Trainings | Resources | |
| Data Collection Forms & Instructions | | FAQs |

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>.

If you do not have a SAMS login, or are unable to access ServiceNow, you can still e-mail the NHSN Help Desk at nhsn@cdc.gov.

For more information, contact CDC 1-800-CDC-INFO (232-4636) TTY: 1-888-232-6348 www.cdc.gov

The findings and conclusions in this report are those of the authors and do not necessarily represent the official position of the Centers for Disease Control and Prevention.

