



Dialysis Facilities: Reporting COVID-19 and Influenza Vaccination Data for Patients and Healthcare Personnel

Division of Healthcare Quality Promotion

July 2024

Goals

- Review vaccination reporting requirements for Dialysis Facilities
 - Patient reporting
 - Healthcare Personnel
- Review how to report data
 - COVID-19 vaccination data
 - Weekly influenza data
- Other ways to report data
 - .CSV
 - Person-level reporting

Objectives

By the end of this session, you will:

- Know COVID-19 Reporting Deadlines
- Know the Influenza Reporting Requirements
- Access the Dialysis Component in NHSN
- Access the Dialysis COVID-19 Vaccination Patient Form
- Access the Healthcare Personnel Safety Component

Reporting Requirements for Dialysis Facilities

COVID-19 Reporting Requirements

Contact your End Stage Renal Disease (ESRD) Network for information on COVID-19 vaccination reporting requirements for healthcare personnel and patients of dialysis facilities.

COVID-19 Reporting Deadlines

- Here are the due dates for the specific reporting weeks
- [FAQs on Reporting COVID-19 Vaccination Data - April 2024](#) | [NHSN](#) | [CDC](#)

<u>Patients Reporting Week</u>	<u>Staff Reporting Week</u>	<u>Due Date</u>
<u>1/24/2024-1/30/2024</u>	<u>1/22/2024-1/28/2024</u>	<u>Friday February 9, 2024</u>
<u>2/21/2024-2/27/2024</u>	<u>2/19/2024-2/25/2024</u>	<u>Friday March 8, 2024</u>
<u>3/20/2024-3/26/2024</u>	<u>3/25/2024-3/31/2024</u>	<u>Friday April 5, 2024</u>
<u>4/24/2024-4/30/2024</u>	<u>4/22/2024-4/28/2024</u>	<u>Friday May 10, 2024</u>
<u>5/22/2024-5/28/2024</u>	<u>5/20/2024-5/26/2024</u>	<u>Friday June 7, 2024</u>
<u>6/19/2024-6/25/2024</u>	<u>6/24/2024-6/30/2024</u>	<u>Friday July 5, 2024</u>
<u>7/24/2024-7/30/2024</u>	<u>7/22/2024-7/28/2024</u>	<u>Friday August 9, 2024</u>
<u>8/21/2024-8/27/2024</u>	<u>8/19/2024-8/25/2024</u>	<u>Friday September 6, 2024</u>
<u>9/18/2024-9/24/2024</u>	<u>9/23/2024-9/29/2024</u>	<u>Friday October 11, 2024</u>
<u>10/23/2024-10/29/2024</u>	<u>10/21/2024-10/27/2024</u>	<u>Friday November 8, 2024</u>
<u>11/20/2024-11/26/2024</u>	<u>11/18/2024-11/24/2024</u>	<u>Friday December 6, 2024</u>
<u>12/25/2024-12/31/2024</u>	<u>12/23/2024-12/29/2024</u>	<u>Friday January 10, 2025</u>

NOTE: 2025 COVID-19 vaccination reporting weeks are forthcoming, contact the ESRD Network for more information

Influenza Reporting Requirements

To meet the ESRD Network reporting requirement, dialysis facilities must report cumulative healthcare personnel influenza vaccination data for each calendar month in the last full week for that month for the 2024-2025 influenza season.

- Report through the Healthcare Personnel Safety (HPS) component
- Patient reporting for the influenza vaccine is not available

Staff Reporting Week

9/23/2024 - 9/29/2024

10/21/2024 - 10/27/2024

11/18/2024 - 11/24/2024

12/23/2024 - 12/29/2024

1/20/2025 - 1/26/2025

2/17/2025 - 2/23/2025

3/24/2025 - 3/30/2025

4/21/2025 - 4/27/2025

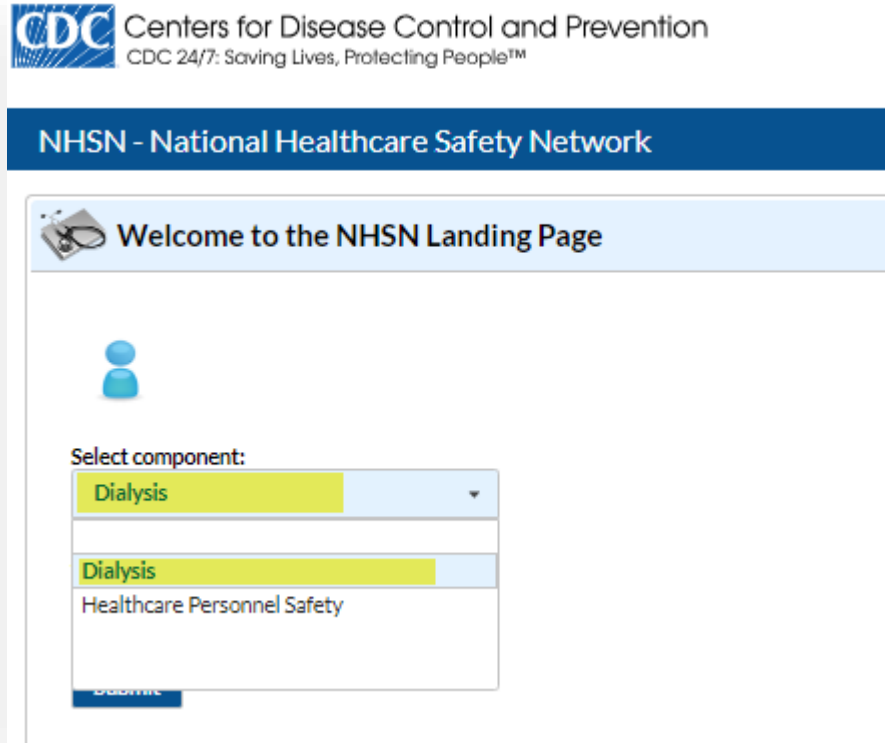
* 2024-2025 Influenza vaccination reporting weeks are forthcoming, contact the ESRD Network for more information

Dialysis Vaccination Reporting Requirements

	Patient <u>COVID-19</u> Reporting Required	Patient <u>Influenza</u> Reporting Required	Healthcare Personnel <u>COVID-19</u> Reporting Required	Healthcare Personnel <u>Influenza</u> Reporting Required
Report in HPS Component		N/A	✓	✓
Report in Dialysis Component	✓	N/A		

Patient COVID-19 Vaccination Summary Form

Access the Dialysis Component



The screenshot displays the NHSN (National Healthcare Safety Network) landing page. At the top left is the CDC logo with the text "Centers for Disease Control and Prevention" and "CDC 24/7: Saving Lives, Protecting People™". Below this is a dark blue header with "NHSN - National Healthcare Safety Network" in white. A light blue banner below the header says "Welcome to the NHSN Landing Page" with a stethoscope icon. Underneath is a blue user icon. The main content area features the text "Select component:" followed by a dropdown menu. The dropdown is open, showing "Dialysis" as the selected option (highlighted in yellow) and "Healthcare Personnel Safety" as another option. A "Submit" button is partially visible at the bottom of the dropdown menu.

How to access the Dialysis COVID-19 Vaccination Patient Form

Facilities report weekly COVID-19 Vaccination data into the **COVID-19 Vaccination Summary** page. Below is how to access the page:

1. Vaccination Summary tab
2. COVID-19 Weekly Vaccination Summary
 - Goes to Vaccination Calendar Page
3. Click the space under the appropriate week to access the summary form

The screenshot shows the CDC NHSN (National Healthcare Safety Network) interface for COVID-19 Vaccination. At the top, the CDC logo and text "Centers for Disease Control and Prevention CDC 24/7: Saving Lives, Protecting People™" are visible. Below this is a dark blue header with "NHSN - National Healthcare Safety Network". On the left is a navigation menu with "COVID-19" highlighted in blue. On the right, the "COVID-19 Vaccination" section includes a "Data Entry" button and a "Weekly Vaccination" button. A calendar view shows the period from 20 March 2024 to 30 April 2024, with a specific week (03/20/2024 - 03/26/2024) selected and labeled "COVID-19: Patients".

Patient COVID-19 vaccination summary form

Cumulative Vaccination Coverage section

1. Questions

2. Data collection columns

- *All Patients (Total)
- In-Center Dialysis Patients
- Home Dialysis Patients

Weekly COVID-19 Vaccination Cumulative Summary for Dialysis Patients

Date Created: _____
Facility ID #: _____
Facility Name: _____
Vaccination type *: COVID19
Facility CCN #: _____
Week of Data Collection: 05/01/2024 - 05/07/2024
Date Last Modified: _____

Cumulative Vaccination Coverage

	* All Patients (Total)	In-Center Dialysis Patients	Home Dialysis Patients
* 1. Number of patients receiving dialysis care from this facility during the current reporting week	<input type="text"/>	<input type="text"/>	<input type="text"/>
* 2. Cumulative number of patients in Question #1 who are up to date with COVID-19 vaccine. Please review the current definition of up to date: Key Terms and Up to Date Vaccination	<input type="text"/>	<input type="text"/>	<input type="text"/>
* 3. Cumulative number of patients in Question #1 with other conditions:			
* 3.1 Medical contraindication to COVID-19 vaccine	<input type="text"/>	<input type="text"/>	<input type="text"/>
* 3.2 Offered but declined COVID-19 vaccine	<input type="text"/>	<input type="text"/>	<input type="text"/>
* 3.3 Unknown/other COVID-19 vaccination status	<input type="text"/>	<input type="text"/>	<input type="text"/>

Reminder for reporting to Vaccine Adverse Event Reporting System (VAERS)

Please note that clinically significant adverse events following COVID-19 vaccination should be reported to the Vaccine Adverse Event Reporting System (VAERS) at <https://vaers.hhs.gov/reportevent.html>. 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, life-threatening conditions, or inpatient hospitalization) that occur after vaccination, even if it is not certain that vaccination caused the event.

Other clinically significant adverse events may be described in the provider emergency use authorization (EUA) fact sheets or prescribing information for the COVID-19 vaccine(s). Healthcare providers should comply with VAERS reporting requirements described in EUAs or prescribing information.

Patient COVID-19 Vaccination Summary Form (cont.)

Question 1:

Number of patients receiving dialysis care from this facility during the current reporting week

- Report the total number of patients receiving dialysis care from the facility.

Weekly COVID-19 Vaccination Cumulative Summary for Dialysis Patients

Date Created: _____
Facility ID #: _____ Facility Name: _____
Vaccination type *: COVID19 Facility CCN #: _____
Week of Data Collection: 05/01/2024 - 05/07/2024 Date Last Modified: _____

Cumulative Vaccination Coverage

	*All Patients (Total)	In-Center Dialysis Patients	Home Dialysis Patients
*1.Number of patients receiving dialysis care from this facility during the current reporting week	<input type="text"/>	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>	<input type="text"/>

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Other clinically significant adverse events may be described in the provider emergency use authorization (EUA) fact sheets or prescribing information for the COVID-19 vaccine(s). Healthcare providers should comply with VAERS reporting requirements described in EUAs or prescribing information.

Patient COVID-19 Vaccination Summary Form (cont.)

Question 2:

Cumulative number of dialysis patients in question 1 (the denominator) who are up to date with COVID-19 vaccines.

- Report patients who are up to date with COVID-19 vaccines

Weekly COVID-19 Vaccination Cumulative Summary for Dialysis Patients

Date Created: _____
Facility ID # * : _____ Facility Name: _____
Vaccination type * : COVID19 Facility CCN #: _____
Week of Data Collection: 05/01/2024 - 05/07/2024 Date Last Modified: _____

Cumulative Vaccination Coverage

	* All Patients (Total)	In-Center Dialysis Patients	Home Dialysis Patients
	<input type="text"/>	<input type="text"/>	<input type="text"/>
* 2. Cumulative number of patients in Question #1 who are <u>up to date</u> with COVID-19 vaccines. Please review the current definition of up to date: Key Terms and Up to Date Vaccination	<input type="text"/>	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>	<input type="text"/>

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Other clinically significant adverse events may be described in the provider emergency use authorization (EUA) fact sheets or prescribing information for the COVID-19 vaccine(s). Healthcare providers should comply with VAERS reporting requirements described in EUAs or prescribing information.

Use the definition for the quarter the surveillance weeks falls in: [Understanding Key Terms and Up to Date Vaccination](#)

Patient COVID-19 Vaccination Summary Form (cont.)

Question 3:

Cumulative number of patients in question 1 with other conditions

- Medical contraindication
- Declined
- Unknown/other

- Unknown/other covid-19 vaccination status

Weekly COVID-19 Vaccination Cumulative Summary for Dialysis Patients

Date Created: _____
Facility ID # *: _____ Facility Name: _____
Vaccination type *: COVID19 Facility CCN #: _____
Week of Data Collection: 05/01/2024 - 05/07/2024 Date Last Modified: _____

Cumulative Vaccination Coverage

	*All Patients (Total)	In-Center Dialysis Patients	Home Dialysis Patients
	<input type="text"/>	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>	<input type="text"/>
* 3. Cumulative number of patients in Question #1 with other conditions:			
* 3.1 Medical contraindication to COVID-19 vaccine	<input type="text"/>	<input type="text"/>	<input type="text"/>
* 3.2 Offered but declined COVID-19 vaccine	<input type="text"/>	<input type="text"/>	<input type="text"/>
* 3.3 Unknown/other COVID-19 vaccination status	<input type="text"/>	<input type="text"/>	<input type="text"/>

Reminder for reporting to Vaccine Adverse Event Reporting System (VAERS)

Please note that clinically significant adverse events following COVID-19 vaccination should be reported to the Vaccine Adverse Event Reporting System (VAERS) at <https://vaers.hhs.gov/reportevent.html>. 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, life-threatening conditions, or inpatient hospitalization) that occur after vaccination, even if it is not certain that vaccination caused the event.

Other clinically significant adverse events may be described in the provider emergency use authorization (EUA) fact sheets or prescribing information for the COVID-19 vaccine(s). Healthcare providers should comply with VAERS reporting requirements described in EUAs or prescribing information.

Patient COVID-19 Vaccination Summary Form

Three Cumulative Vaccination Coverage columns

- All Patients (Total)
- In-Center Dialysis Patients
- Home Dialysis Patients

Weekly COVID-19 Vaccination Cumulative Summary for Dialysis Patients

Date Created: _____
Facility ID # * : _____ Facility Name: _____
Vaccination type * : COVID19 Facility CCN #: _____
Week of Data Collection: 05/01/2024 - 05/07/2024 Date Last Modified: _____

Cumulative Vaccination Coverage

	* All Patients (Total)	In-Center Dialysis Patients	Home Dialysis Patients
* 1. Number of patients receiving dialysis care from this facility during the current reporting week	<input type="text"/>	<input type="text"/>	<input type="text"/>
* 2. Cumulative number of patients in Question #1 who are <u>up to date</u> with COVID-19 vaccines. Please review the current definition of up to date: Key Terms and Up to Date Vaccination	<input type="text"/>	<input type="text"/>	<input type="text"/>
* 3. Cumulative number of patients in Question #1 with other conditions:			
* 3.1 Medical contraindication to COVID-19 vaccine	<input type="text"/>	<input type="text"/>	<input type="text"/>
* 3.2 Offered but declined COVID-19 vaccine	<input type="text"/>	<input type="text"/>	<input type="text"/>
* 3.3 Unknown/other COVID-19 vaccination status	<input type="text"/>	<input type="text"/>	<input type="text"/>

Reminder for reporting to Vaccine Adverse Event Reporting System (VAERS)

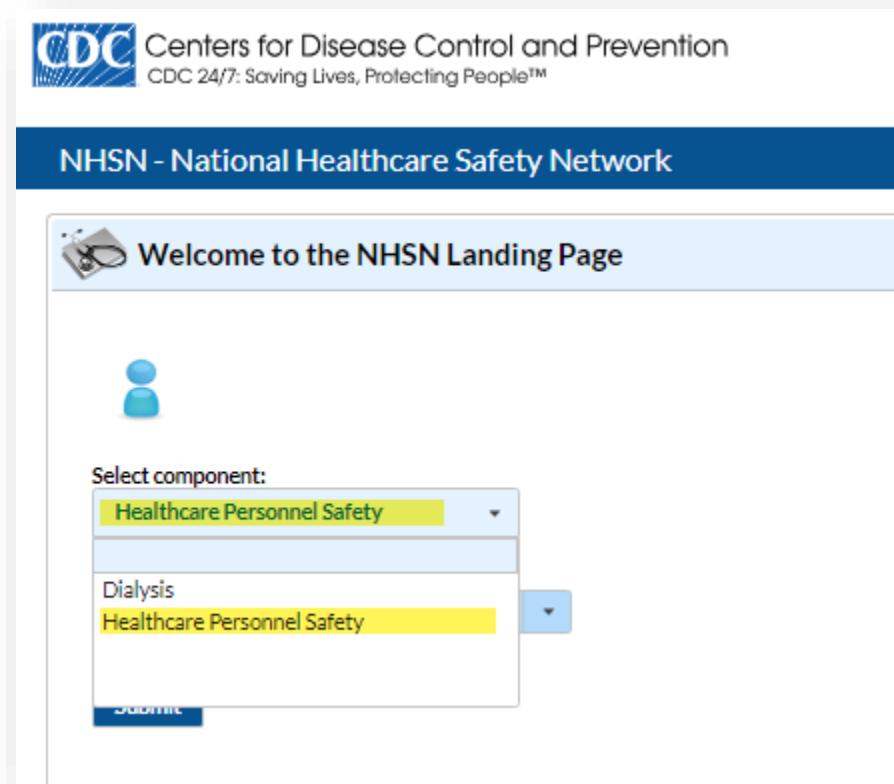
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Other clinically significant adverse events may be described in the provider emergency use authorization (EUA) fact sheets or prescribing information for the COVID-19 vaccine(s). Healthcare providers should comply with VAERS reporting requirements described in EUAs or prescribing information.

Healthcare Personnel COVID-19 Vaccination Summary Form

Access the Healthcare Personnel Safety Component



The screenshot displays the NHSN (National Healthcare Safety Network) landing page. At the top left is the CDC logo with the text "Centers for Disease Control and Prevention" and "CDC 24/7: Saving Lives, Protecting People™". Below this is a dark blue header with the text "NHSN - National Healthcare Safety Network". The main content area has a light blue banner that says "Welcome to the NHSN Landing Page" next to a stethoscope icon. Underneath is a blue person icon. A label "Select component:" is followed by a dropdown menu. The dropdown is open, showing "Healthcare Personnel Safety" as the selected option (highlighted in yellow). Other visible options include "Dialysis". A "Submit" button is located at the bottom of the dropdown menu.

Access the HPS COVID-19 Vaccination Summary Form

Facilities report weekly COVID-19 Vaccination data into the **COVID-19 Vaccination Summary** page. Below is how to access the page:

1. Vaccination Summary tab
2. COVID-19 Weekly Vaccination Summary
 - Goes to Vaccination Calendar Page
3. Click the space under the appropriate week to access the summary form

The screenshot displays the NHSN National Healthcare Safety Network interface. At the top, the CDC logo and the text "Centers for Disease Control and Prevention" and "CDC 24/7: Saving Lives, Protecting People™" are visible. Below this is a blue header bar with the text "NHSN - National Healthcare Safety Network". On the left side, there is a vertical navigation menu with the following items: NHSN Home, Alerts, Reporting Plan, HCW, Lab Test, Exposure, Prophyl/Treat, Import/Export, COVID-19, Vaccination Summary, Surveys, Analysis, Users, Facility, Group, and Logout. The "Vaccination Summary" item is highlighted with a yellow border. To the right of this menu, a dropdown menu is open, showing three options: "Annual Vaccination Flu Summary", "Weekly Flu Vaccination Summary", and "COVID-19 Weekly Vaccination Summary". The "COVID-19 Weekly Vaccination Summary" option is also highlighted with a yellow border. The main content area on the right shows a header for "NHSN Healthcare Personnel Safety Component Home Page" and a section titled "Action Items" which is currently empty.

Healthcare Personnel COVID-19 Vaccination Summary Form

- **All core HCP:**
 - Sum of employees (staff on facility payroll),
 - licensed independent practitioners (physicians, advanced practice nurses, & physician assistants)
 - adult students/trainees & volunteers
- **All HCP:** All core HCP + contractors
- **Employees (staff on facility payroll):**
 - Persons receiving a direct paycheck from the facility
- **Non-Employee HCP:**
 - Licensed independent practitioners:
 - Non-Employee HCP: Adult students/trainees & volunteers
 - Non-Employee HCP: Other Contract Personnel

Cumulative Vaccination Coverage						
	Healthcare Personnel (HCP) Categories					
	Employee HCP			Non-Employee HCP		
	* All Core HCP ^a	* All HCP ^b	* Employees (staff on facility payroll) ^c	* Licensed independent practitioners: Physicians, advanced practice nurses, & physician assistants ^d	* Adult students/trainees and volunteers ^e	* Other Contract Personnel ^f
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"/>	<input type="text"/>	<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).	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Please review the current definition of up to date: Key Terms and Up to Date Vaccination .						
3. * Cumulative number of HCP in Question #1 with other conditions:						
3.1. * Medical contraindication to COVID-19 vaccine	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
3.2. * Offered but declined COVID-19 vaccine	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
3.3. * Unknown/other COVID-19 vaccination status	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Healthcare Personnel COVID-19 Vaccination Summary Form (cont.)

Question 1:

- Number of HCP that were eligible to have worked at the facility for at least one day during the week of data collection
- Healthcare personnel eligible to have worked include those scheduled to work in the facility at least one day every week.

Healthcare Personnel COVID-19 Vaccination Cumulative Summary for Non-Long-Term Care Facilities

Cumulative Vaccination Coverage						
Healthcare Personnel (HCP) Categories						
		Employee HCP		Non-Employee HCP		
	*All Core HCP ^a	*All HCP ^b	* Employees (staff on facility payroll) ^c	* Licensed independent practitioners: Physicians, advanced practice nurses, & physician assistants ^d	* Adult students/trainees and volunteers ^e	* Other Contract Personnel ^f
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"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Healthcare Personnel COVID-19 vaccination Summary Form (cont.)

Question 2:

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

Healthcare Personnel COVID-19 Vaccination Cumulative Summary for Non-Long-Term Care Facilities

Cumulative Vaccination Coverage						
Healthcare Personnel (HCP) Categories						
	Employee HCP			Non-Employee HCP		
	* All Core HCP ^a	* All HCP ^b	* Employees (staff on facility payroll) ^c	* Licensed independent practitioners: Physicians, advanced practice nurses, & physician assistants ^d	* Adult students/trainees and volunteers ^e	* Other Contract Personnel ^f
	<input type="text"/>	<input type="text"/>	<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).	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Please review the current definition of up to date: Key Terms and Up to Date Vaccination .	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Use the definition for the quarter the surveillance weeks falls in: [Understanding Key Terms and Up to Date Vaccination](#)

Healthcare Personnel COVID-19 vaccination Summary Form (cont.)

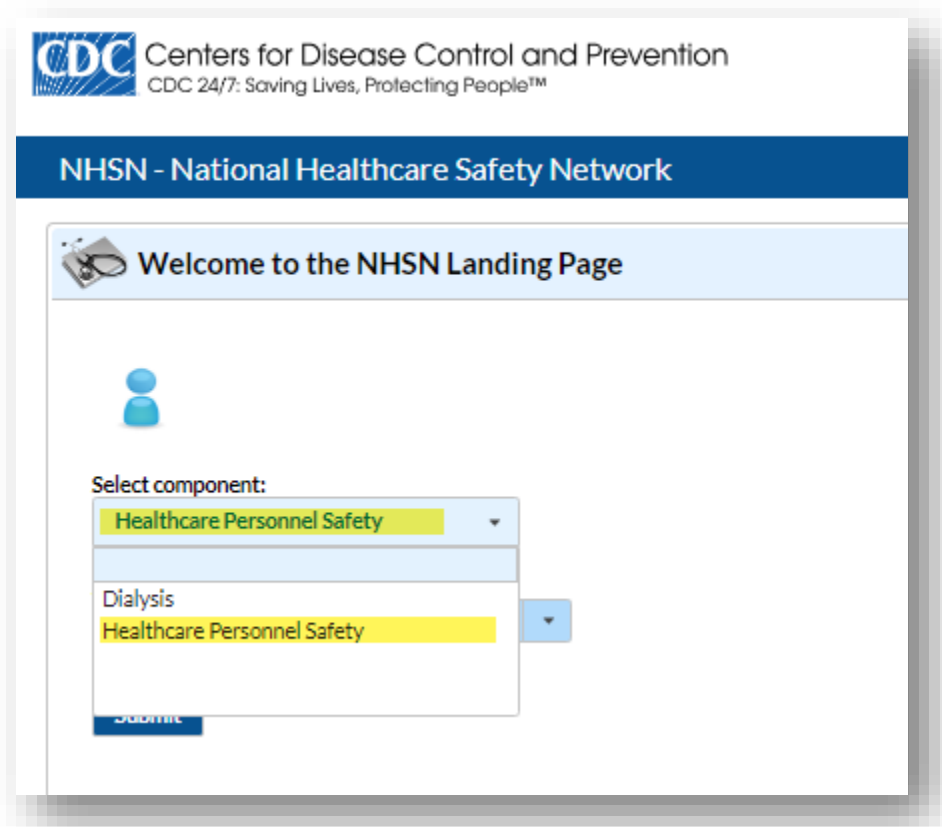
Question 3:

- Record why a healthcare personnel is not up to date
 - Medical contraindication
 - Offered but declined
 - Unknown/other

Healthcare Personnel COVID-19 Vaccination Cumulative Summary for Non-Long-Term Care Facilities								
Cumulative Vaccination Coverage								
			Healthcare Personnel (HCP) Categories					
			Employee HCP	Non-Employee HCP				
			* All Core HCP ^a	* All HCP ^b	* Employees (staff on facility payroll) ^c	* Licensed independent practitioners: Physicians, advanced practice nurses, & physician assistants ^d	* Adult students/trainees and volunteers ^e	* Other Contract Personnel ^f
			<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
			<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<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"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
3.2. * Offered but declined COVID-19 vaccine			<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
3.3. * Unknown/other COVID-19 vaccination status			<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Healthcare Personnel Influenza (FLU) Vaccination Summary Form

Access the Healthcare Personnel Safety Component



The screenshot displays the NHSN (National Healthcare Safety Network) landing page. At the top left is the CDC logo with the text "Centers for Disease Control and Prevention" and the tagline "CDC 24/7: Saving Lives, Protecting People™". Below this is a dark blue header bar with the text "NHSN - National Healthcare Safety Network". The main content area has a light blue header with a magnifying glass icon and the text "Welcome to the NHSN Landing Page". Underneath is a blue person icon. The text "Select component:" is followed by a dropdown menu. The menu is open, showing "Healthcare Personnel Safety" as the selected option (highlighted in yellow). Other visible options include "Dialysis" and another "Healthcare Personnel Safety" option. A "Submit" button is partially visible at the bottom of the form.

Access the HPS Weekly Flu Vaccination Summary

Facilities report weekly Influenza Vaccination data into the **Weekly Flu Vaccination Summary** page. Below is how to access the page:

1. Vaccination Summary tab
2. Weekly Flu Vaccination Summary
 - Goes to Vaccination Calendar Page
3. Click the space under the appropriate week to access the summary form

The screenshot displays the NHSN (National Healthcare Safety Network) interface. At the top left is the CDC logo with the text "Centers for Disease Control and Prevention" and "CDC 24/7: Saving Lives, Protecting People™". Below this is a blue header bar with the text "NHSN - National Healthcare Safety Network". On the left side, there is a vertical navigation menu with the following items: NHSN Home, Alerts, Reporting Plan, HCW, Lab Test, Exposure, Prophyl/Treat, Import/Export, COVID-19, Vaccination Summary, Surveys, Analysis, Users, Facility, Group, and Logout. The "Vaccination Summary" item is highlighted in blue. A dropdown menu is open next to it, showing three options: "Annual Vaccination Flu Summary", "Weekly Flu Vaccination Summary", and "COVID-19 Weekly Vaccination Summary". The "Weekly Flu Vaccination Summary" option is highlighted with a purple border. To the right of the navigation menu, the main content area shows "NHSN Healthcare Personnel Safety Component Home Page" with a profile picture icon and an "Action Items" section.

Healthcare Personnel Weekly Flu Vaccination Summary Form

- 4 columns with different types of healthcare workers
- Other contract personnel is an optional category

Healthcare Personnel Influenza Vaccination Summary for Non-Long-Term Care Facilities

Facility ID #: Location ^: FLUDIAL - Dialysis
 Vaccination type *: Influenza Influenza subtype *: SEASONAL - Seasonal Influenza Season *:
 Week of Data Collection: () - () 4 Date Last Modified:

	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 that were eligible to have worked at this healthcare facility for at least 1 day during the week of data collection	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
2. Cumulative number of HCP in question #1 that received an influenza vaccination at this healthcare facility since influenza vaccine became available this season	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
3. Cumulative number of HCP in question #1 that 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 in question #1 that have a medical contraindication to the influenza vaccine	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
5. Number of HCP in question #1 that declined to receive the influenza vaccine this season	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
6. Number of HCP in question #1 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"/>
Vaccine Availability				
*7. Has your facility received its supply of influenza vaccine for the current influenza season?	<input type="text"/>			
*8. Is your facility currently experiencing a shortage of influenza vaccine for the current influenza season?	<input type="text"/>			

Healthcare Personnel Weekly Influenza Vaccination Summary Form (cont.)

Question 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

Healthcare Personnel Influenza Vaccination Summary for Non-Long-Term Care Facilities

Facility ID #: Location ^: FLUDIAL - Dialysis
Vaccination type *: Influenza Influenza subtype *: SEASONAL - Seasonal Influenza Season *:
Week of Data Collection: () - () 4 Date Last Modified:

	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 that were eligible to have worked at this healthcare facility for at least 1 day during the week of data collection	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Healthcare Personnel Weekly Influenza Vaccination Summary Form (cont.)

Question 2:

- Cumulative number of HCP in question #1 that received an influenza vaccination at this healthcare facility since influenza vaccine became available this season

Healthcare Personnel Influenza Vaccination Summary for Non-Long-Term Care Facilities

Facility ID #: Location ^: FLUDIAL - Dialysis
 Vaccination type *: Influenza Influenza subtype *: SEASONAL - Seasonal Influenza Season *:
 Week of Data Collection: () - () 4 Date Last Modified:

	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 in question #1 that received an influenza vaccination at this healthcare facility since influenza vaccine became available this season	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
2. Cumulative number of HCP in question #1 that received an influenza vaccination 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 in question #1 that received an influenza vaccination at 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 in question #1 that received an influenza vaccination at this healthcare facility since influenza vaccine became available this season	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
5. Number of HCP in question #1 that received an influenza vaccination at this healthcare facility since influenza vaccine became available this season	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
6. Number of HCP in question #1 that received an influenza vaccination at this healthcare facility since influenza vaccine became available this season	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Total Available:

Healthcare Personnel Weekly Influenza Vaccination Summary Form (cont.)

Question 4:

- Number of HCP in question #1 that have a medical contraindication to the influenza vaccine

Healthcare Personnel Influenza Vaccination Summary for Non-Long-Term Care Facilities

Facility ID #: Location ^: FLUDIAL - Dialysis
Vaccination type *: Influenza Influenza subtype *: SEASONAL - Seasonal Influenza Season *:
Week of Data Collection: () - () 4 Date Last Modified:

	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
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
4. Number of HCP in question #1 that have a medical contraindication to the influenza vaccine	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Healthcare Personnel Weekly Influenza Vaccination Summary Form (cont.)

Question 5:

- Number of HCP in question #1 that declined to receive the influenza vaccine this season

- Declination reasons:

- Did not provide any other information
- Due to religious or philosophical objections
- Health conditions other than those included in question #4.

Healthcare Personnel Influenza Vaccination Summary for Non-Long-Term Care Facilities

Facility ID #: Location ^: FLUDIAL - Dialysis
Vaccination type *: Influenza Influenza subtype *: SEASONAL - Seasonal Influenza Season *:
Week of Data Collection: (- 4 Date Last Modified:

	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
	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
5. Number of HCP in question #1 that declined to receive the influenza vaccine this season	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Healthcare Personnel Weekly Influenza Vaccination Summary Form (cont.)

Question 6:

- Number of HCP in question #1 with unknown vaccination status
- Or criteria not met for questions #2-#5 above

- Example:

- A new employee has not provided flu vaccination documentation or been offered the vaccine

Healthcare Personnel Influenza Vaccination Summary for Non-Long-Term Care Facilities

Facility ID #: Location: FLUDIAL - Dialysis
Vaccination type: Influenza Influenza subtype: SEASONAL - Seasonal Influenza Season:
Week of Data Collection: - Date Last Modified:

	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
	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
6. Number of HCP in question #1 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"/>

Healthcare Personnel Weekly Influenza Vaccination Summary Form (cont.)

- **Questions 7:**
 - Has your facility received its supply of influenza vaccine for the current influenza season?
- **Question 8:**
 - Is your facility currently experiencing a shortage of influenza vaccine for the current influenza season?

Healthcare Personnel Influenza Vaccination Summary for Non-Long-Term Care Facilities

Facility ID # *:

Location *: FLUDIAL - Dialysis

Vaccination type *: Influenza

Influenza subtype *: SEASONAL - Seasonal

Influenza Season *:

Week of Data Collection: () - () 4 Date Last Modified:

	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
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Vaccine Availability

*7. Has your facility received its supply of influenza vaccine for the current influenza season?

*8. Is your facility currently experiencing a shortage of influenza vaccine for the current influenza season?

.CSV Upload for weekly vaccination data

Resources for .CSV Upload

- Find resources on .CSV upload on the following webpages under “CSV Data Import” headings.
 - [HCP Flu Vaccination | HPS | NHSN | CDC](#)
 - [HPS | Weekly HCP COVID-19 Vaccination | NHSN | CDC](#)
 - [Dialysis | Weekly Patient COVID-19 Vaccination | NHSN | CDC](#)

*The example file includes test data in the required fields, making it easier to replace with your data!
- For more information on how to upload .CSV files, see the on-demand training

Reporting COVID-19 Vaccination Data with Person-Level Form

Person-Level COVID-19 Vaccination Form

- The Person-Level COVID-19 Vaccination Form is an optional tool that can be used to report data to the NHSN COVID-19 Vaccination module for healthcare personnel.
- Data on individuals are directly entered line by line in the optional Person-Level COVID-19 Vaccination form or can **be** uploaded via a .CSV file.
- Makes reporting vaccination data easier and more efficient!
- It applies changes of the up to date NHSN surveillance definition for you!

Note: Review the [COVID-19 Vaccination Modules: Understanding Key Terms and Up to Date Vaccination](#) document at least once per quarter to check for definition updates.

Person-Level Resources

- Find trainings and resources for person-level reporting on the HPS Weekly HCP COVID-19 Vaccination webpage:

<https://www.cdc.gov/nhsn/hps/weekly-covid-vac/index.html>

- Look under the “Person-Level COVID-19 Vaccination” headings
- See the Person-Level on demand training

Person-Level COVID-19 Vaccination Form – Instructions and Guidance Documents

Instructions for Reporting Person-Level Vaccination Data

[Person-Level Vaccination Form Table of Instructions: Healthcare Personnel](#) [PDF – 355 KB] — January 2024

[Person-Level COVID-19 Vaccination Forms: A How to Guide](#) [PDF – 3 MB] — April 2024

[Person-Level Upload .CSV Instructions — HPS](#) [PDF – 433 KB] — September 2023

Person-Level COVID-19 Vaccination Data – CSV Data Import

Variable Description and File Layout for Healthcare Personnel of In-patient Facilities/Ambulatory Surgery Centers

[Variable Description and File Layout for Person-Level Vaccination Forms HPS – September 2023](#) [PDF – 156 KB]

CSV Templates and Example Files for Healthcare Personnel of In-Patient Facilities/Ambulatory Surgery Centers

[.CSV File Template for HPS HCP](#) [CSV – 522 B]

[.CSV File Example for HPS HCP](#) [CSV – 799 B]

Resources

Resource: Dialysis Weekly Patient COVID-19 Vaccination

- NHSN Dialysis Weekly Patient COVID-19 Vaccination webpage: <https://www.cdc.gov/nhsn/dialysis/pt-covid-vac/index.html>
 - Training Slides
 - Quick Reference Guides
 - FAQs
 - Data Collection Forms
 - .CSV files
 - Person-Level Forms

Weekly Patient COVID-19 Vaccination

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Dialysis facilities can track weekly COVID-19 vaccination data for patients through NHSN.

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[Dialysis COVID-19 Vaccination Data Dashboard](#)

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Resource: Weekly Healthcare Personnel COVID-19 Vaccination

- NHSN Weekly HCP COVID-19 Vaccination webpage:
<https://www.cdc.gov/nhsn/hps/weekly-covid-vac/index.html>
 - Training Slides
 - Quick Reference Guides
 - FAQs
 - Data Collection Forms
 - .CSV files
 - Person-Level Forms

Weekly HCP COVID-19 Vaccination

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Facilities can track weekly COVID-19 vaccination data for healthcare personnel (HCP) through NHSN.

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CSV Data Import	Resources
	Retired Quick Reference Guides

FAQs on Reporting COVID-19 Vaccination Data

Resource: Healthcare Personnel Flu Vaccination

- NHSN HCP Flu Vaccination webpage:
https://www.cdc.gov/nhsn/hps/vaccination/index.html#anchor_37992
 - Training Slides
 - Quick Reference Guides
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Healthcare Personnel (HCP) Flu Vaccination

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FAQs

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Questions or Need Help?

Please use **NHSN-ServiceNow** to submit questions to the NHSN Help Desk. The new portal can be accessed [here](#) and should be used in place of **nhsn@cdc.gov**, **nhsntrain@cdc.gov**, and **nhsndua@cdc.gov**.

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, 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.