



## **Healthcare Personnel Safety Component**

# **Healthcare Personnel Vaccination Module Influenza Vaccination Summary**

## **Outpatient Dialysis Facilities**

**November 2018**

# Objectives

- ❑ **Provide an overview of the National Healthcare Safety Network (NHSN) and the Healthcare Personnel (HCP) Vaccination Module**
- ❑ **Review how to get started in the Healthcare Personnel Safety (HPS) Component**
- ❑ **Describe reporting requirements for the HCP Vaccination Module**
- ❑ **Review entering data for the HCP Vaccination Module**
  - HCP Safety Monthly Reporting Plan
  - HCP Influenza Vaccination Summary
- ❑ **Review data verification in NHSN**

# Overview of NHSN

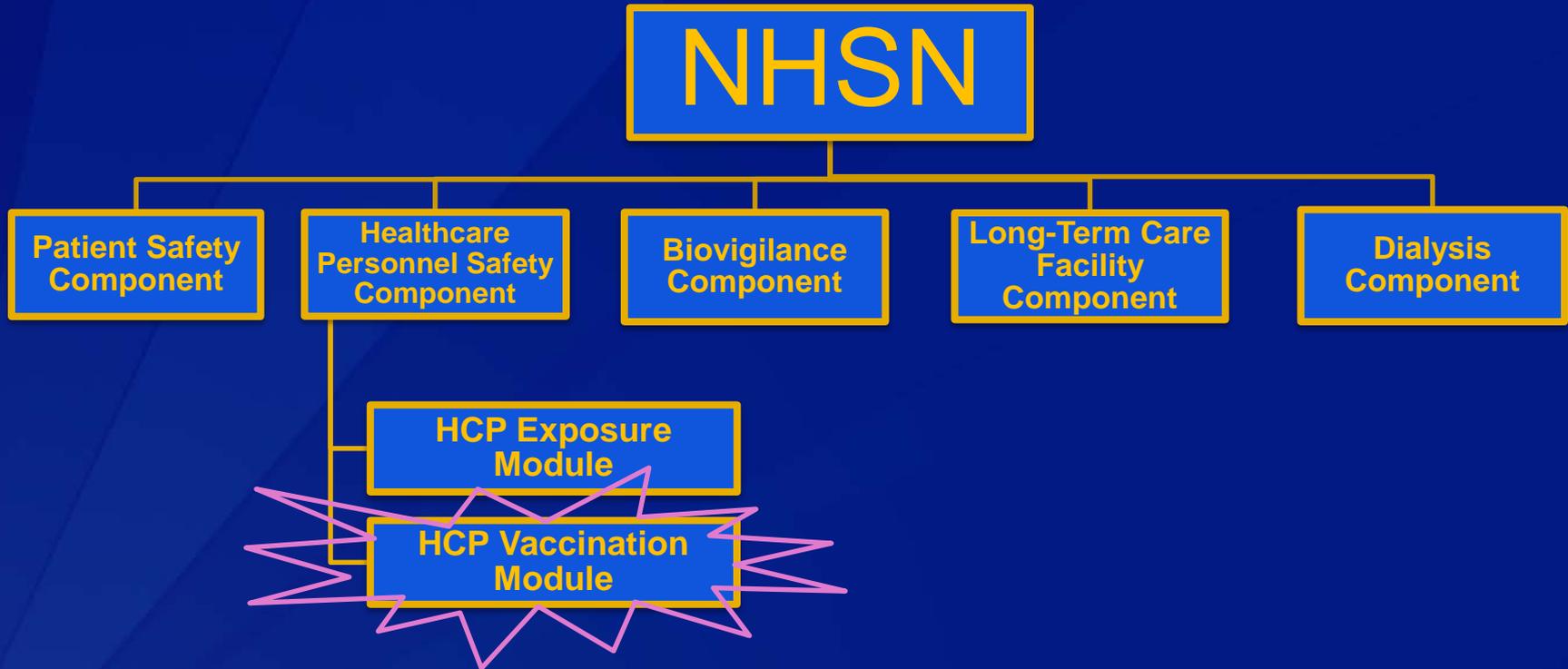
# Purposes of NHSN

- ❑ **NHSN is a secure, Internet-based surveillance system managed by the CDC's Division of Healthcare Quality Promotion (DHQP) that is used to:**
  - Collect data from a sample of healthcare facilities to permit valid estimations of the:
    - Magnitude of adverse events
    - Adherence to practices to prevent adverse events
  - Analyze and report collected data to permit recognition of trends
  - Provide facilities with data that can be used for inter-facility comparisons and local quality improvement activities

## Purposes of NHSN (cont.)

- ❑ Enable healthcare facilities to report healthcare-associated infections (HAI) and prevention practice adherence data via NHSN to the U.S. Centers for Medicare and Medicaid Services (CMS) in fulfillment of CMS's quality measurement reporting requirements for those data
- ❑ A comprehensive list of purposes can be found on the Website: <http://www.cdc.gov/nhsn/>

# NHSN Structure



# Healthcare Personnel Safety Component

- ❑ **The HPS Component consists of two modules:**
  - **Healthcare Personnel (HCP) Exposure Module**
    - Blood/Body Fluid Exposure Only
    - Blood/Body Fluid Exposure with Exposure Management
    - Influenza Exposure Management
  - **HCP Vaccination Module**
    - Influenza Vaccination Summary
- ❑ **The Influenza Vaccination Summary within the HCP Vaccination Module is designed to assist staff in healthcare facilities to monitor influenza vaccination percentages among HCP**

# **Overview of the HCP Influenza Vaccination Summary**

# HCP Influenza Vaccination Summary

- ❑ **The HCP Vaccination Module allows NHSN users to report HCP influenza vaccination summary data**
- ❑ **HCP influenza vaccination summary data are designed to ensure that reported HCP influenza vaccination coverage is:**
  - Consistent over time within a single healthcare facility
  - Comparable across facilities
- ❑ **Improvements in tracking and reporting HCP vaccination status may allow for identification and targeting of unvaccinated HCP**

# HCP Influenza Vaccination Summary

- ❑ **Data are collected on denominator and numerator categories**
  - Denominator categories:
    - HCP must be physically present in the facility for at least 1 working day between October 1 through March 31
    - Includes both full-time and part-time HCP
      - Employee HCP: 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
  - Numerator categories:
    - Influenza vaccinations, medical contraindications, declinations, and unknown status
- ❑ **Facilities are required to report all numerator categories for the three denominator categories**

# Getting Started in the HPS Component

# Key Roles in NHSN

## □ Facility Administrator

- The person enrolling the facility in NHSN
- Only person who can activate additional components for a facility
- Has add/edit/delete rights to facility data, users, and users' access
- Has authority to nominate/join groups for data sharing
- Only person who can re-assign the role of Facility Administrator to another user
- There is only one Facility Administrator per facility

## □ Users

- Rights are determined by Facility Administrator: view data, data entry, and data analysis
- May be given administrative rights

# Getting Started in the HPS Component

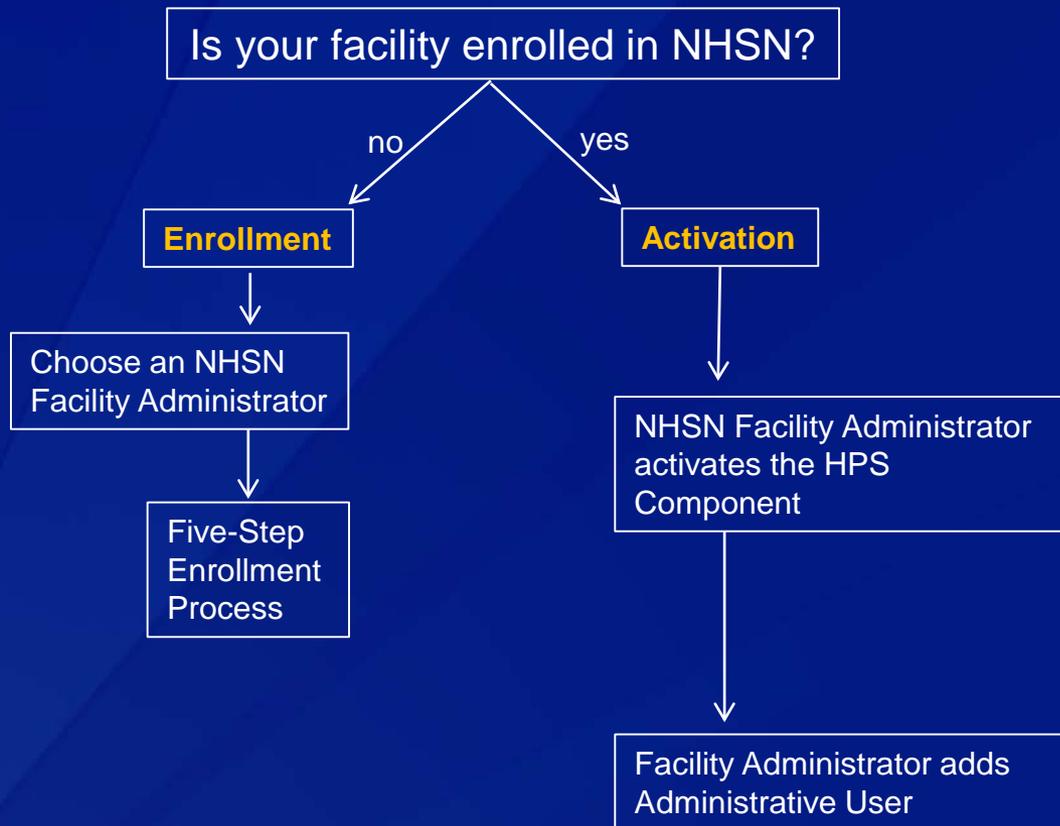
## ❑ Enrolling in NHSN

- Facilities that are currently not participating in NHSN and wish to participate must enroll their facility in NHSN
  - Please visit: <http://www.cdc.gov/nhsn/dialysis/enroll.html> for more information regarding the enrollment process
- During the enrollment process, facilities may choose to participate in any of the NHSN components

## ❑ Activating the HPS Component

- The HPS Component is the only component necessary for reporting HCP influenza vaccination data
- Facilities that are already enrolled in NHSN and wish to participate in the HPS Component must activate the component within NHSN

# Getting Started in the HPS Component (cont.)



- ❑ Are you unsure of your facility's status with NHSN?
  - E-mail [nhsn@cdc.gov](mailto:nhsn@cdc.gov)



# Enrollment for Outpatient Dialysis Facilities

- ❑ Facilities must complete a 5-step enrollment process (if not already enrolled)
- ❑ Enrollment usually takes at least 4-6 weeks
- ❑ Information about the process can be found at:

<http://www.cdc.gov/nh/dialysis/enroll.html>

## 5-Step Enrollment for Outpatient Dialysis Facilities - CMS QIP



For complete detailed enrollment instructions please download the [NHSN Facility Administrator Enrollment Guide March 2014](#). [PDF - 816 KB]. Please see [FAQs about NHSN and the CMS ESRD QIP Rule](#).

### Step 1: Training and Preparation



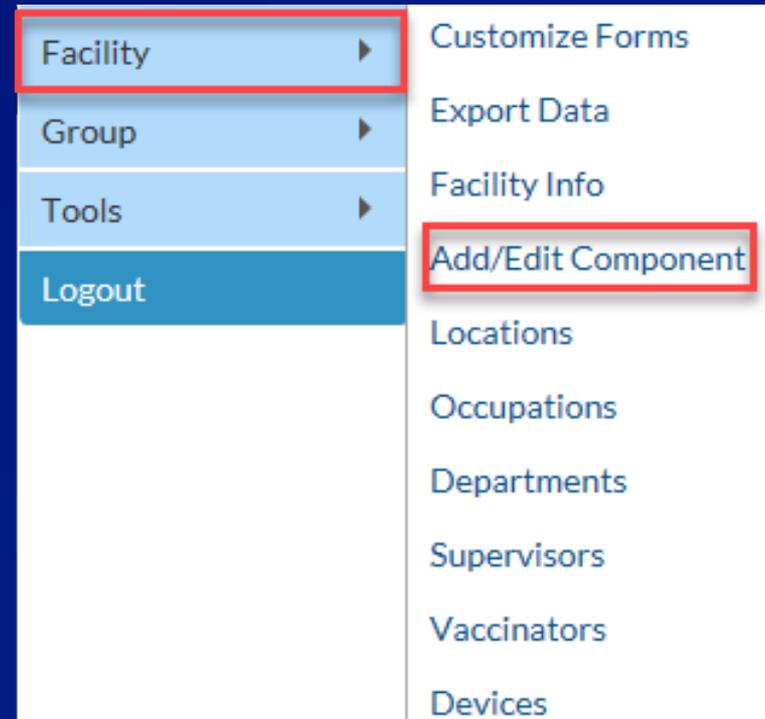
Print and follow [detailed checklist](#) [PDF - 213 KB] to ensure successful and efficient enrollment.

Complete required training and [Outpatient Dialysis Center Practices Survey](#) [PDF - 68 KB]. Be sure to check trusted websites and spam blockers.

# Activating the HPS Component

- ❑ Activating the HPS component is only necessary for facilities currently enrolled in another component
- ❑ Only a Facility Administrator can activate a new component
- ❑ Ensure that the contact information for the Facility Administrator and HPS Component Primary Contact are updated
- ❑ Refer to comprehensive training slides for more information:

<http://www.cdc.gov/nhsn/dialysis/hcp-vaccination/index.html>



# Adding a NHSN User

- ❑ Recommend at least 2 NHSN users
- ❑ To add: click “Users > Add”
- ❑ Complete required fields

**NHSN Home**

- Alerts
- Reporting Plan ▶
- HCW ▶
- Lab Test ▶
- Exposure ▶
- Prophy/Treat ▶
- Flu Summary ▶
- Surveys ▶
- Analysis ▶
- Users ▶**
  - Add
  - Find
- Facility ▶
- Group ▶
- Tools ▶
- Logout

**Add User**

Mandatory fields marked with \*

User ID \*:  Up to 32 letters and/or numbers, no spaces or special characters

Prefix:

First Name \*:

Middle Name:

Last Name \*:

Title:

Gender:  Y - Yes ▼

Role:  ▼

Extension:

Fax Number:

E-mail Address \*:

Enter New Password for user \*:

Re-enter New Password for user \*:

# User Rights

- ❑ After saving the new user information, the “Edit User Rights” screen will appear
- ❑ Please be sure to confer the proper rights to users
- ❑ CDC recommends that at least two users at each facility have rights to add and analyze data

**NHSN Home**

- Alerts
- Reporting Plan ▶
- HCW ▶
- Lab Test ▶
- Exposure ▶
- Prophy/Treat ▶
- Flu Summary ▶
- Surveys ▶
- Analysis ▶
- Users ▶
- Facility ▶
- Group ▶
- Tools ▶
- Logout

**Edit User Rights**

User ID: RUM16 (ID 9800)

Facility List:

| Rights            | Patient Safety           | Healthcare Personnel Safety         |
|-------------------|--------------------------|-------------------------------------|
| Administrator     | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| All Rights        | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| Analyze Data      | <input type="checkbox"/> | <input type="checkbox"/>            |
| Add, Edit, Delete | <input type="checkbox"/> | <input type="checkbox"/>            |
| View Data         | <input type="checkbox"/> | <input type="checkbox"/>            |
| Customize Rights  | <input type="checkbox"/> | <input type="checkbox"/>            |

# New Users to NHSN

- ❑ Receive a “Welcome to NHSN” e-mail
- ❑ Receive e-mails to register and create a SAMS account
  - Follow instructions carefully
- ❑ Complete and submit identity verification documents to SAMS
  - Don't delay beginning the process
- ❑ Access NHSN using SAMS credentials

## SAMS Grid Card Credentials



|   | A | B | C | D | E | F | G | H | I | J |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| 1 | E | Q | X | 3 | T | 5 | N | 4 | M | Q | 1 |
| 2 | E | 3 | K | 6 | J | M | 9 | F | 8 | 6 | 2 |
| 3 | C | 1 | 6 | M | 3 | J | H | M | P | Y | 3 |
| 4 | T | W | W | 1 | 4 | V | 6 | 0 | 7 | 2 | 4 |
| 5 | 8 | 6 | 7 | W | 6 | J | 5 | M | P | X | 5 |

Serial #

## New Users to NHSN (cont.)

- ❑ **New user onboarding takes at least 2-3 weeks**
  - New users should begin this process well in advance of the reporting deadline
- ❑ **Log into NHSN at least once per year to maintain active SAMS credentials**
- ❑ **A user with a SAMS card can enter data for multiple facilities as long as they are a registered user at each facility**
- ❑ **Information about the SAMS process can be found at:**  
**<http://www.cdc.gov/nhsn/sams/about-sams.html>**

# Change in NHSN Facility Administrator

- ❑ **NHSN Facility Administrator should transfer role to another user prior to leaving the facility!**
  
- ❑ **NHSN can add an individual as the new NHSN Facility Administrator if the previous NHSN Facility Administrator has left the facility**
  - Do not re-enroll the facility in NHSN
  
- ❑ **Fax a letter to NHSN at: 404-929-0131**
  - The letter should be from a facility official requesting that you be added as a user since the Facility Administrator has left
  
- ❑ **After being assigned as the new NHSN Facility Administrator, begin the new NHSN user onboarding process**

# **Reporting Requirements for the HCP Influenza Vaccination Summary**

# HCP Influenza Vaccination Summary Protocol

- The protocol is a facility's guide to collecting and reporting Influenza Vaccination Summary data for the HCP Vaccination Module:

<http://www.cdc.gov/nhsn/PDFs/HPS-manual/vaccination/HPS-flu-vaccine-protocol.pdf>

- It outlines reporting requirements and specifications
  - Data collection forms
  - Denominator categories and notes
  - Numerator categories and notes
  - Data sources
  - Methodology
  - Calculations for data analyses in NHSN
  - Table of instructions
  - Key terms

# Denominator 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

| National Healthcare Safety Network  |  |  |   |                                       |                          |
|---|--|--|---|---------------------------------------|--------------------------|
| Healthcare Personnel Influenza Vaccination Summary  |  |  |   |                                       |                          |
| Page 1 of 2<br>*required for saving   |  |  |   |                                       |                          |
| Record the number of healthcare personnel (HCP) for each category below for the influenza season being tracked. |  |  |   |                                       |                          |
| *Facility ID#:  |  |  |   |                                       |                          |
| *Vaccination type:<br>Influenza   | *Influenza subtype <sup>a</sup> :<br><input type="checkbox"/> Seasonal | *Influenza Season <sup>b</sup> :       |   | 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 |

## Denominator 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

# Denominator 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.

# Denominator 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

# Denominator 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:
  - Occupational therapists
  - Admitting staff
  - Pharmacists
- Refer to Appendix A of the HCP Influenza Vaccination Summary Protocol for suggested list of contract personnel

<http://www.cdc.gov/nhsn/PDFs/HPS-manual/vaccination/12-Appendix-A.pdf>

# Numerator Categories

- ❑ The numerator includes HCP who received an influenza vaccination during the time from when the vaccine became available (e.g., August or September) through March 31 of the following year
- ❑ Influenza vaccinations
  - Received at this healthcare facility or elsewhere
- ❑ Medical contraindications
- ❑ Declinations
- ❑ Unknown status

|  | Employee HCP                           |   |
|--|--|---|
|  | *Employees (staff on facility payroll) | *Licensed independent practitioners<br>Physicians, advanced practice nurses, physician assistants |
| 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 vaccination 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)   |  |   |

## Numerator Categories

- ❑ HCP who received an influenza vaccination at this healthcare facility since influenza vaccine became available this season
- ❑ 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

## Numerator Categories

### □ HCP who have a medical contraindication to the influenza vaccine

- For this module, for inactivated influenza vaccine (IIV3 or IIV4), 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 (LAIV4) 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)

## Numerator Categories

- **HCP who declined to receive the influenza vaccine**
  - Documentation is not required for reporting declinations (verbal statements are acceptable)
  
- **HCP with unknown vaccination status (or criteria not met for above-mentioned categories)**

## Notes on Reporting Requirements

- ❑ Facilities are only required to report data once at the conclusion of reporting period (October 1 through March 31)
- ❑ HCP who are physically present in the facility for at least 1 working day between October 1 through March 31 are included in the denominator
- ❑ HCP in the denominator population who received an influenza vaccination during the time from when the vaccine became available through March 31 of the following year are counted as vaccinated

## Notes on Reporting Requirements

- ❑ The denominator categories are mutually exclusive. The numerator data are to be reported separately for each of the denominator categories.
- ❑ The numerator data are mutually exclusive. The sum of the numerator categories should be equal to the denominator for each HCP group.

# **Entering Data for the HCP Influenza Vaccination Summary**

# Required and Optional Reporting Forms

- **After enrolling in NHSN and/or activating the HPS Component and adding users:**
  - Complete Required Forms
    - HCP Safety Monthly Reporting Plan
    - HCP Influenza Vaccination Summary Form
    - Home Dialysis Center Practices Survey (required only for dialysis centers that do not provide in-center hemodialysis)
  - Complete Optional Form
    - Seasonal Survey on Influenza Vaccination Programs for HCP

# Log into SAMS

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

Login Options

Choose one of the two login options.

### SAMS Grid Card Credentials



SAMS Username:

SAMS Password:

**Login**

[Forgot SAMS Password?](#)

For users who have been issued a SAMS Grid Card.

OR

### HHS PIV Card



Insert your PIV card in your smart card reader before you try to login.

**Login**

For users who are CDC staff and have been issued a PIV card.

- ❑ For assistance with SAMS, contact the SAMS Help Desk at 1-877-681-2901 or [samshelp@cdc.gov](mailto:samshelp@cdc.gov)

# NHSN Landing Page



Centers for Disease Control and Prevention  
CDC 24/7: Saving Lives, Protecting People™



NHSN - National Healthcare Safety Network (apt-v-nhsn-test:8001)



Welcome to the NHSN Landing Page



CVX9

Select component:

Healthcare Personnel Safety

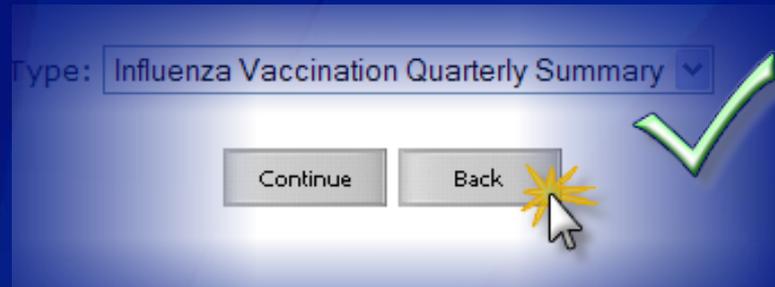
Select facility/group:

Fac: Dialysis Test Facility 1 (ID 10001)

Submit

# Navigating NHSN

- ❑ Use NHSN buttons to navigate (do not use Web browser buttons)



- ❑ View facility name, user, and component in use at the top of the screen



# HPS Component Home Page

NHSN - National Healthcare Safety Network (apt-v-nhsn-test:8001)

 CVX9  
Dialysis Test Facility 1

## NHSN Home

- Alerts
- Reporting Plan ▶
- HCW ▶
- Lab Test ▶
- Exposure ▶
- Prophy/Treat ▶
- Flu Summary ▶
- Surveys ▶
- Analysis ▶
- Users ▶
- Facility ▶
- Group ▶
- Tools ▶



## NHSN Healthcare Personnel Safety Component Home Page

### COMPLETE THESE ITEMS

Confer Rights  
**Not  
Accepted**

### ALERTS

**5**  
Report No Events

**1**  
Missing Flu Summary

**1**  
Incomplete Home  
Dialysis Survey

# HCP Safety Monthly Reporting Plan Form

- ❑ Collects data on which modules and months the facility plans to participate
  
- ❑ Users should select “Influenza Vaccination Summary”
  - The plan is automatically updated with this information for the entire NHSN-defined influenza season (July 1 to June 30)
    - The user will not need to add any reporting plans after the initial monthly plan has been added for that influenza season

The screenshot shows the NHSN logo (National Healthcare Safety Network) in the top left. The title is "Healthcare Personnel Safety Monthly Reporting Plan". Below the title, it says "Page 1 of 1" and "\*required for saving". There are two input fields: "Facility ID#: \_\_\_\_\_" and "\*Month/Year: \_\_\_\_\_". Below these are three sections, each with a checkbox and a description:

- No NHSN Healthcare Personnel Safety Modules followed this month
- Healthcare Personnel Exposure Modules**
  - Blood/Body Fluid Exposure Only
  - Blood/Body Fluid Exposure with Exposure Management
  - Influenza Exposure Management
- Healthcare Personnel Vaccination Module**
  - Influenza Vaccination Summary

# Monthly Plan View

- ❑ Click “Reporting Plan” then “Add”
- ❑ Select correct month and year from dropdown menus (e.g., October 2016)
- ❑ Check box next to “Influenza Vaccination Summary”
- ❑ Click “Save”

**NHSN Home**

- Alerts
- Reporting Plan ▶
- HCW ▶
- Lab Test ▶
- Exposure ▶
- Prophy/Treat ▶
- Flu Summary ▶
- Surveys ▶
- Analysis ▶
- Users ▶
- Facility ▶
- Group ▶

## Add Monthly Reporting Plan

Mandatory fields marked with \*

\*Facility ID: Dialysis Test Facility 1 (ID 10001)

\*Month:

\*Year:

HSN Healthcare Personnel Safety Modules Followed this Month

**Healthcare Personnel Exposure Modules**

- Blood/Body Fluid Exposure Only
- Blood/Body Fluid Exposure with Exposure Management
- Influenza Exposure Management

**Healthcare Personnel Vaccination Module**

- Influenza Vaccination Summary

# Monthly Plan View (cont.)

- Adding 1 plan automatically adds a plan for each month of the influenza season

g the HPS component

### Monthly Reporting Plan List

| Month                     | Year | Facility ID |
|---------------------------|------|-------------|
| <a href="#">July</a>      | 2016 | 33736       |
| <a href="#">August</a>    | 2016 | 33736       |
| <a href="#">September</a> | 2016 | 33736       |
| <a href="#">October</a>   | 2016 | 33736       |
| <a href="#">November</a>  | 2016 | 33736       |
| <a href="#">December</a>  | 2016 | 33736       |
| <a href="#">January</a>   | 2017 | 33736       |
| <a href="#">February</a>  | 2017 | 33736       |
| <a href="#">March</a>     | 2017 | 33736       |
| <a href="#">April</a>     | 2017 | 33736       |
| <a href="#">May</a>       | 2017 | 33736       |
| <a href="#">June</a>      | 2017 | 33736       |

Page 1 of 1 100 View 1 - 36 of 36

Page 1 of 1 100 View 1 - 36 of 36

Add Back

# HCP Influenza Vaccination Summary Form

- ❑ **Collects summary influenza vaccination counts among HCP**
- ❑ **HCP influenza summary reporting in NHSN consists of a single data entry screen per influenza season**
- ❑ **Each time a user enters updated data for a particular influenza season:**
  - All previously entered data for that season will be overwritten
  - A new modified date will be auto-filled by the system

# HCP Influenza Vaccination Summary Form

□ **NHSN data entry screen mirrors the HCP Influenza Vaccination Summary Form**

- Denominator (Question 1)
- Numerator (Questions 2-6)

|  | *Employees<br>(staff on<br>facility<br>payroll) | *Licensed independent<br>practitioners:<br>Physicians, advanced<br>practice nurses, &<br>physician assistants | *Adult<br>students/<br>trainees &<br>volunteers | Other<br>Contract<br>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 vaccination 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)   |   |   |   |                                |

# Table of Instructions

| Data Fields                              | Instructions for Completion  |
|--|--|
| Facility ID #                            | <i>Required.</i> The NHSN-assigned facility ID will be auto-entered.   |
| Vaccination Type                         | <i>Required.</i> Influenza is the default and only current choice.   |
| Influenza Subtype                        | <i>Required.</i> Seasonal is the default and only current choice.  |
| Influenza Season                         | <i>Required.</i> Select the influenza season years for which data were collected (e.g., 2012/2013).  |
| Date Last Modified                       | The Date Last Modified will be auto-entered and will indicate the date that these data were last changed by a user.  |
| Employee HCP (staff on facility payroll) | <i>Required.</i> 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. |
| Non-Employee HCP: Licensed independent   | <i>Required.</i> Defined as physicians (MD, DO); advanced practice nurses; and physician   |

- The Table of Instructions outlines the instructions and definitions for each data field in the NHSN module

- The Instructions for the HCP Influenza Vaccination Summary Form are located in the HCP Influenza Vaccination Summary Protocol: <http://www.cdc.gov/nhsn/forms/57-214-HCP-Influenza-Vaccination-Summary-Form-TOI-.pdf>

# HCP Influenza Vaccination Summary Data

- ❑ Click “Flu Summary” then “Add”
- ❑ “Influenza Vaccination Summary Data” appears as the only option
- ❑ Click “Continue”

The screenshot displays the NHSN 'Add Summary Data' interface. On the left, a navigation menu lists various options: NHSN Home, Alerts, Reporting Plan, HCW, Lab Test, Exposure, Prophy/Treat, Flu Summary (highlighted with a red box), and Surveys. The main content area is titled 'Add Summary Data' and features a dropdown menu for 'Summary Data Type' set to 'Influenza Vaccination Summary'. Below the dropdown, there are two buttons: 'Continue' (circled in red) and 'Back'.

# HCP Influenza Vaccination Summary Data

- ❑ “Influenza” and “Seasonal” are the default choices for vaccination type and influenza subtype
- ❑ Select appropriate flu season in drop-down box (e.g., 2016-2017)

NHSN - National Healthcare Safety Network (apt-v-nhsn-test:8001) CVX9  
Dialysis Test Facility 1

**NHSN Home**  
Alerts  
Reporting Plan ▶  
HCW ▶  
Lab Test ▶  
Exposure ▶  
Prophy/Treat ▶  
Flu Summary ▶  
Surveys ▶  
Analysis ▶

## 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:

|  | Employee HCP | Non-Employee HCP |
|--|--------------|------------------|
|  |              |                  |

# 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
- ❑ Data must be entered by June 30, to be included in the NHSN annual data report

| 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** [HELP](#)

**Comments**

# Editing HCP Influenza Vaccination Data

 **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

**Facility ID \***: Dialysis Test Facility 1 (10001)

**Vaccination type \***: Influenza

**Influenza subtype \***: Seasonal

**Flu Season \***: 2016/2017

**Date Last Modified:** 11/08/2016

| 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 * |
| 1. Number of HCP who worked at this healthcare facility for at least 1 day between October 1 and March 31 | 5                                       | 5  | 5                                      |

- 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

# Editing HCP Influenza Vaccination Data (cont.)

- Click “Edit” to modify existing data

Date Last Modified: 11/25/2016

| 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  | 40                                      | 30   | 20                                      |                          |
| 2. Number of HCP who received an influenza vaccine at this healthcare facility since influenza vaccine became available this season  | 30                                      | 15   | 15                                      |                          |
| 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                                       | 10   | 5                                       |                          |
| 4. Number of HCP who have a medical contraindication to the influenza vaccine  | 1                                       | 0  | 0                                       |                          |
| 5. Number of HCP who declined to receive the influenza vaccine   | 4                                       | 5  | 0                                       |                          |
| 6. Number of HCP with unknown vaccination status (or criteria not met for questions 2-5 above)   | 0                                       | 0  | 0                                       |                          |

Custom Fields

Comments

[Edit](#) [Delete](#) [Back](#)

# Saving HCP Influenza Vaccination Data

- ❑ Click “Save” to save the updated data

Date Last Modified: 11/25/2016

| 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  | 50                                      | 30   | 20                                     |                          |
| 2. Number of HCP who received an influenza vaccine at this healthcare facility since influenza vaccine became available this season  | 40 ×                                    | 15   | 15                                     |                          |
| 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                                       | 10   | 5                                      |                          |
| 4. Number of HCP who have a medical contraindication to the influenza vaccine  | 1                                       | 0  | 0                                      |                          |
| 5. Number of HCP who declined to receive the influenza vaccine   | 4                                       | 5  | 0                                      |                          |
| 6. Number of HCP with unknown vaccination status (or criteria not met for questions 2-5 above)   | 0                                       | 0  | 0                                      |                          |

Custom Fields

Comments

# Saving HCP Influenza Vaccination Data (cont.)

- ❑ A message confirming that data were saved should appear at the top of the screen

✔ Successfully updated Influenza Vaccination Summary record. 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.

**Facility ID** \*: Dialysis Test Facility 1 (10001)

**Vaccination type** \*: Influenza

**Influenza subtype** \*: Seasonal

**Flu Season** \*: 2016/2017

**Date Last Modified**: 11/28/2016

| 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 * |   |
| 1. Number of HCP who worked at this healthcare facility for at least 1 day between October 1 and March 31                           | 5                                       | 8  | 5                                      | 5 |
| 2. Number of HCP who received an influenza vaccine at this healthcare facility since influenza vaccine became available this season | 1                                       | 5  | 1                                      | 1 |

# Home Dialysis Facility Survey

- ❑ Click on “Surveys” on the navigation bar
- ❑ Click on “Dialysis” and then “Add”

The screenshot displays the NHSN Healthcare Personnel Safety Component Home Page. On the left is a vertical navigation bar with the following items: NHSN Home, Alerts, Reporting Plan, HCW, Lab Test, Exposure, Prophy/Treat, Flu Summary, Surveys, Analysis, Users, Facility, and Group. The 'Surveys' item is highlighted in a darker blue. A dropdown menu is open from 'Surveys', showing 'Facility', 'Flu', and 'Dialysis'. The 'Dialysis' item is also highlighted, and its own dropdown menu is open, showing 'Add', 'Find', and 'Incomplete'. The 'Add' option is highlighted in a darker blue. The main content area of the page has a header with a profile picture and the text 'NHSN Healthcare Personnel Safety Component Home Page'. Below the header is a section titled 'Action Items' with a dropdown arrow and the text 'You have no action items.' Below this is a privacy notice: 'Confidentiality: The voluntarily provided information obtained in this surveillance system that would permit identification of individuals, in whole or in part, and that, if disclosed, would be a breach of confidentiality, will be used only for the purposes stated, and will not otherwise be disclosed or released without the written consent of the individual. This information is protected under the provisions of the Public Health Service Act (42 USC 242b, 242k, and 242m(d)).' At the bottom of the page, there is a small Adobe Reader logo and a link that says 'reader for PDF files'.

# Home Dialysis Facility Survey (cont.)

- ❑ Complete all required fields with an asterisk
- ❑ Select the current year under “Survey Year”

 **Add Home Dialysis Facility Survey**

Mandatory fields marked with \*

Fields required for record completion marked with \*\*

Facility ID # \*: PRB Dialysis Test Facility (ID 19907) ▼

Survey Type \*: HDPD - Home Dialysis Center Practices Survey ▼

Survey Year \*: ▼

ESRD Network # \*: ▼

**A. Dialysis Center Information**

**A.1. General**

1. What is the ownership of your dialysis center? (choose one) \*\*: ▼

2. What is the location / hospital affiliation of your dialysis center (choose one) \*\*: ▼

3.

a. What types of dialysis services does your center offer (select all that apply) \*\*:

Peritoneal Dialysis

Home Hemodialysis

b. What patient population does your center serve? (select one) \*\*: ▼

# Data Verification in NHSN

# Data Verification in NHSN

- Run a CMS Line Listing Report using instructions located here:

[http://www.cdc.gov/nhsn/pdf/s/cms/dialysis/cms\\_esrd-qip\\_hcpfluvacc\\_linelist-dialysis-oct-2015.pdf](http://www.cdc.gov/nhsn/pdf/s/cms/dialysis/cms_esrd-qip_hcpfluvacc_linelist-dialysis-oct-2015.pdf)

**Analysis Reports**

Expand All Collapse All Search

- HCW Exposure Module
- HCW Vaccination Module
- CMS Reports
  - Acute Care Hospitals (Hospital IQR and Hospital OQR)
  - Ambulatory Surgery Centers (ASCQR)
  - Inpatient Psychiatric Facilities (IPFQR)
  - Inpatient Rehabilitation Facilities (IRFQR)
  - Long Term Acute Care Hospitals (LTCHQR)
  - Outpatient Dialysis Facilities (QIP)
    - Line Listing - HCP Flu Vaccination for QIP
- Adv
- My

Run Report  
Modify Report  
Export Data Set

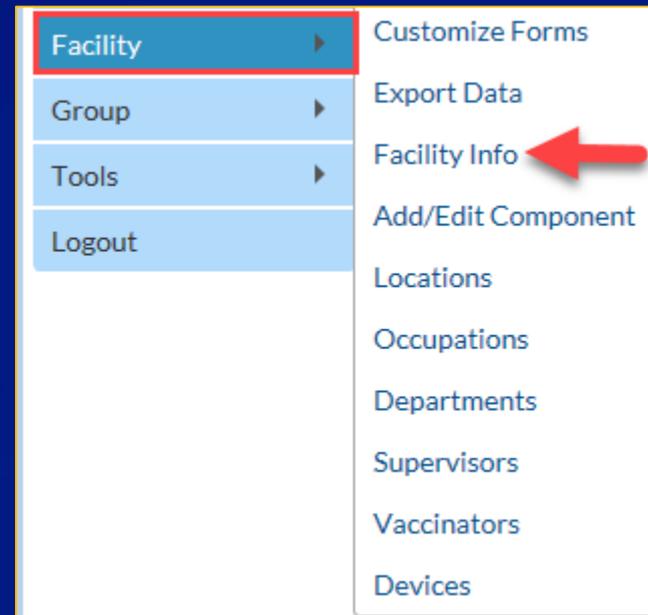
## National Healthcare Safety Network Line Listing for HCP Flu Vaccination for QIP

As of November 28, 2016 at 1:56 PM  
Date Range: All HCW\_VACCF LUSUMCMS\_QIPQR

| Facility Org ID | CMS Certification Number | summary Season | Category                               | # Declinations | # Contraindications | Vaccinated at Facility | Vaccinated Elsewhere | Total # HCW | Vaccination % | 95% CI    | HPS Criteria Met |
|-----------------|--------------------------|----------------|--|----------------|---------------------|------------------------|----------------------|-------------|---------------|-----------|------------------|
| 10001           | 012521                   | 2011/2012      | All Healthcare Workers                 | 1              | 1                   | 13                     | 7                    | 22          | 91%           | 73%, 98%  | Y                |
| 10001           | 012521                   | 2011/2012      | Employees                              | 0              | 0                   | 10                     | 1                    | 11          | 100%          | 76%, 100% | Y                |
| 10001           | 012521                   | 2011/2012      | Licensed Independent Practitioners     | 1              | 1                   | 2                      | 3                    | 7           | 71%           | 33%, 95%  | Y                |
| 10001           | 012521                   | 2011/2012      | Adult Students/Trainees and Volunteers | 0              | 0                   | 1                      | 3                    | 4           | 100%          | 47%, 100% | Y                |

# Data Verification in NHSN (cont.)

- ❑ Ensure that the correct facility CMS Certification Number (CCN) and 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 an “AMB-HEMO” facility on the “Facility Information” page of NHSN
  - If your facility is not correctly enrolled, please contact [NHSN@cdc.gov](mailto:NHSN@cdc.gov) for assistance



# The NHSN Website

## Surveillance for Healthcare Personnel Vaccination

The Advisory Committee on Immunization Practices (ACIP) recommends that all healthcare personnel (HCP) and persons in training for healthcare professions should be vaccinated annually against influenza.[1] Persons who are infected with influenza virus, including those with subclinical infection, can transmit influenza virus to persons at higher risk for complications from influenza. Vaccination of HCP has been associated with reduced work absenteeism and with fewer deaths among nursing home patients and elderly hospitalized patients. Although annual vaccination is recommended for all HCP and is a high priority for reducing morbidity associated with influenza in healthcare settings, national survey data have demonstrated that vaccination coverage levels are only approximately 60% [2]. This is well below the Healthy People 2020 goal of 90% for HCP influenza vaccination [3].

### On this Page

- Training
- Protocols
- Data Collection Forms
- CMS Supporting Materials
- Supporting Material
- FAQs

**[Visit: http://www.cdc.gov/nhsn/dialysis/hcp-vaccination/index.html](http://www.cdc.gov/nhsn/dialysis/hcp-vaccination/index.html) for training materials:**

- ❑ Protocol (with Tables of Instructions)
- ❑ Forms
- ❑ Frequently asked questions (FAQs)
- ❑ Training slides and recorded trainings



## Questions or Need Help?



E-mail user support at: [nhsn@cdc.gov](mailto:nhsn@cdc.gov)

Please include “HPS Flu Summary-Dialysis” in the subject line of the e-mail