



# Survival Guide for Mandatory National Healthcare Safety Network (NHSN) Reporting for Long-Term Care Facilities (LTCFs)

HSAG can assist with NHSN data review, training, and support but final reporting to local, state, and/or federal groups is the responsibility of the LTCF. Facilities should pull final validation reports to determine if their data is successfully submitted.

For validation specific questions, please contact:

- LTCFs weekly reporting: [DNH\\_TriageTeam@cms.hhs.gov](mailto:DNH_TriageTeam@cms.hhs.gov)
- Skilled nursing facilities quality reporting program: [SNFQualityQuestions@cms.hhs.gov](mailto:SNFQualityQuestions@cms.hhs.gov)

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# Survival Guide for Mandatory NHSN Reporting for LTCFs



This **Survival Guide for Mandatory NHSN Reporting for LTCFs** was designed to help LTCFs better understand their NHSN reporting requirements, review key definitions, share common mistakes, and connect users to more in-depth training resources and guidance.

Health Services Advisory Group (HSAG) has seen common errors lead to Centers for Medicare & Medicaid Services (CMS) fines for facilities because of misunderstanding of COVID-19 reporting requirements, vaccine up-to-date definitions, limited access to NHSN, and inadequate vaccination data collection processes. This **Survival Guide** will aid your facility in accurate reporting to NHSN.

## NHSN Overview

The Centers for Disease Control and Prevention (CDC) NHSN is the nation’s most widely used healthcare-associated infection (HAI) tracking system. NHSN provides facilities, states, regions, and the nation with data needed to identify problem areas, measure progress of prevention efforts, and ultimately eliminate HAIs.<sup>1</sup>

There are several different ways to gain access to NHSN depending on the facility’s current user access. However, each new NHSN user must become verified through The CDC’s Secure Access Management Service (SAMS), which is a federal information technology (IT) system that gives authorized personnel secure access to non-public CDC applications. The SAMS partner portal is a website designed to provide centralized access to public health information and computer applications operated by the CDC. For the NHSN Program, SAMS will provide healthcare facilities and other partners, such as state health departments and Quality Improvement Organizations (QIOs), with secure and immediate access to the NHSN application.<sup>2</sup>

If you need assistance gaining access to NHSN, please refer to the link below or contact Simi Williams at [swilliams1@hsag.com](mailto:swilliams1@hsag.com).



### LTCF NHSN Frequently Asked Questions, Scenarios, and Important Links:

[www.hsag.com/globalassets/12sow/nhsn/nhsnimportantlinksfaqs2022final.pdf](http://www.hsag.com/globalassets/12sow/nhsn/nhsnimportantlinksfaqs2022final.pdf)

#### NHSN Help Desk (via ServiceNow)

ServiceNow can be accessed through your SAMS account, or on the NHSN website at <https://servicedesk.cdc.gov>.

#### SAMS Help Desk (via phone and email)

Monday–Friday, 8 a.m.–6 p.m. EST  
Excluding U.S. Federal Holidays  
877.681.2901 (Select Option #5)  
[samshelp@cdc.gov](mailto:samshelp@cdc.gov)

## NHSN Reporting Requirements and Deadlines

Common challenges that lead to CMS fines and inaccurately reported public data include:

- Misunderstanding COVID-19 reporting requirements and vaccine up-to-date definitions.
- Inadequate vaccination data collection processes.
- Lack of access to NHSN and statewide vaccine registries.

LTCFs are required to report COVID-19 impact, therapeutics, and vaccination data, as well as report an annual healthcare personnel (HCP) influenza vaccination summary. Noncompliance related to COVID-19 reporting will be cited at F-tag 884, as well as failure to submit the required quality data may result in a 2 percent point reduction in the skilled nursing facility’s (SNF’s) annual rate update (i.e., Annual Payment Update [APU]).<sup>3,4</sup>

This guide will help navigate the reporting requirements, provide definitions to reporting questions, and will include helpful tips to ensure your facility is reporting accurately.

NHSN Reporting Description	NHSN Deadline																					
<ul style="list-style-type: none"> <li>• <b>COVID-19/Respiratory Pathogens Pathway Data Reporting:</b> Each week, new data should be reported representing the time since the last report date.               <ol style="list-style-type: none"> <li>1. Resident Impact and Facility Capacity</li> <li>2. Staff and Personnel Impact</li> </ol> </li> <li>• <b>COVID-19 Vaccination Data Reporting:</b> Cumulative data should be reported every week for all residents and staff that were in your facility for the week of data collection.               <ol style="list-style-type: none"> <li>1. LTCF Residents</li> <li>2. LTCF HCP</li> </ol> </li> </ul> <p><b>Use the recommended Person-Level Vaccination Reporting Tool to standardize and simplify data monitoring and tracking.</b></p>	<p><b>Reporting week is Monday through Sunday. Data must be submitted into NHSN once every reporting week. Report consistently each week.</b></p> <p><b>Report once every week before Sunday at 11:59 p.m. (local time zone).</b></p> <table border="1" data-bbox="906 1182 1463 1444"> <thead> <tr> <th>S</th> <th>M</th> <th>T</th> <th>W</th> <th>Th</th> <th>F</th> <th>S</th> </tr> </thead> <tbody> <tr> <td></td> <td>1</td> <td>2</td> <td>3</td> <td>4</td> <td>5</td> <td>6</td> </tr> <tr> <td>7</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>	S	M	T	W	Th	F	S		1	2	3	4	5	6	7						
S	M	T	W	Th	F	S																
	1	2	3	4	5	6																
7																						
<ul style="list-style-type: none"> <li>• <b>Annual Flu Vaccination Data Reporting for Health Care Personnel:</b> CDC/NHSN encourages that HCP influenza vaccination summary data be updated monthly. However, to meet the minimum data requirements for NHSN participation, CMS only requires one influenza vaccination summary report to be submitted at the conclusion of the measure reporting period (October 1–March 31).</li> </ul>	<p><b>Reporting period is October 1–March 31. Summary data due by May 15 each year in NHSN Healthcare Personnel Safety (HPS) Component.</b></p>																					

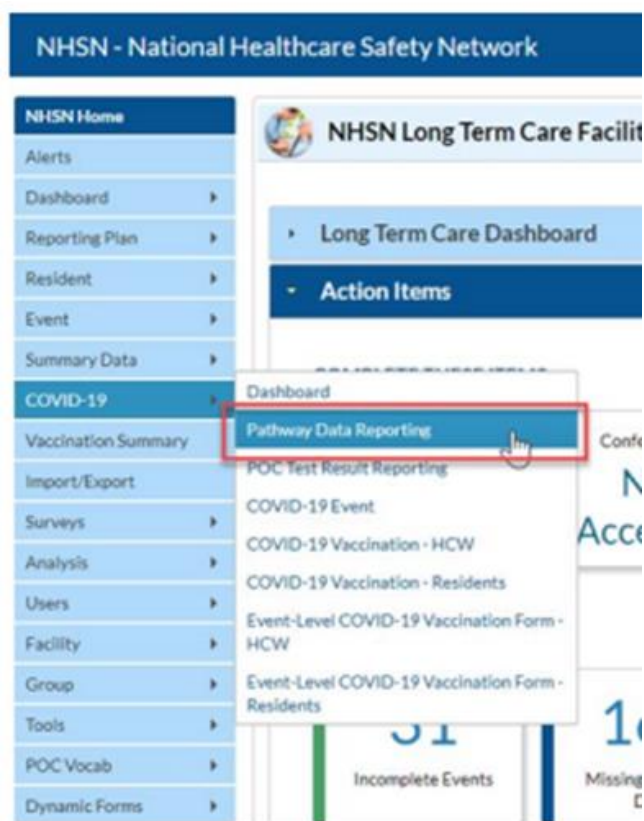
## NHSN COVID-19/Respiratory Pathogens Pathway Data Reporting

This Pathway Data Reporting module requires users to report COVID-19 staff and resident impact data, including testing data, testing supplies availability, therapeutics, and deaths. Noncompliance related to this pathway data reporting may subject your facility to Civil Monetary Penalties and a violation of F-tag 884 according to QSO-20-26-NH.<sup>5</sup>

Review the following screenshots for the questions listed on the three pathway reporting sections:

- Resident Impact and Facility Impact
- Staff and Personnel Impact

To make corrections to inaccurate submissions, go to Pathway Data Reporting > navigate to the week and date you want to correct > enter correct data > click “SAVE”.



# Survival Guide for Mandatory NHSN Reporting for LTCFs



## Resident Impact and Facility Capacity

Resident Impact and Facility Capacity
Staff and Personnel Impact

Date Created:

*If the count is zero, a "0" must be entered as the response. A blank response is equivalent to missing data. NON-count questions should be answered one calendar day during the reporting week.*

**Facility Capacity**

60	<b>ALL BEDS</b>
	* <b>CURRENT CENSUS:</b> Total number of beds that are occupied on the reporting calendar day

**Resident Impact for COVID-19 (SARS-CoV-2)**

	* <b>POSITIVE TESTS:</b> Enter the Number of residents with a newly positive SARS-CoV-2 viral test result (for example, a positive SARS-CoV-2 antigen test and/or SARS-CoV-2 NAAT (PCR)). <b>Note: Do not include residents who have a positive SARS-CoV-2 antigen test, but a negative SARS-CoV-2 NAAT (PCR). Only include residents newly positive since the most recent date data were collected for NHSN reporting.</b>
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**Vaccination Status of Residents with a Newly Confirmed SARS-CoV-2 Viral Test Result**

\* **Up to Date Vaccination Status**

**Up to Date:** Include residents with a newly positive SARS-CoV-2 viral test result who are up to date with COVID-19 vaccines 14 days or more before the specimen collection date.

**Note: Please review the current NHSN surveillance definition of [up to date](#).**

**Not Up to Date:** Based on the counts entered for POSITIVE TESTS and UP TO DATE, the count for residents who are NOT considered up to date based on the NHSN Surveillance definition has been calculated here.

This count is not editable, to edit please update the count(s) entered for UP TO DATE and/or POSITIVE TESTS.

**Hospitalizations**

*This is not a subset of the "Positive Tests" count reported above. Include only the number of new hospitalizations with a positive COVID-19 test since the most recent date data were reported to NHSN.*

	* <b>Hospitalizations with a positive COVID-19 Test:</b> Number of residents who have been hospitalized with a positive COVID-19 test. <b>Note: Only include residents who have been hospitalized during this reporting period and had a positive COVID-19 test in the 10 days prior to the hospitalization, date of specimen collection is calendar day 1.</b>
	* <b>Hospitalizations with a positive COVID-19 Test and Up to Date:</b> Based on the number reported for "Hospitalizations with a positive COVID-19 Test" indicate the number of residents who were hospitalized with positive COVID-19 test and also up to date with COVID-19 vaccinations at the time of the positive COVID-19 test.

**Deaths**

	* <b>TOTAL DEATHS:</b> Number of residents who have died for any reason in the facility or another location. <i>Include only the number of new deaths since the most recent date data were collected for NHSN reporting.</i>
	* <b>COVID-19 DEATHS:</b> Based on the number reported for Total Deaths, indicate the number of residents who died from COVID-19 or related complications, either in the facility or another location.

Save
Cancel

## Staff and Personnel Impact

Resident Impact and Facility Capacity
Staff and Personnel Impact

Date Created:

*Counts should be reported on the correct calendar day and include only new counts for the calendar day (specifically, since counts were last collected). If the count is zero, a "0" must be entered as the response. A blank response is equivalent to missing data. NON-count questions should be answered one calendar day during the reporting week.*

**Staff and Personnel Impact**

	* <b>POSITIVE TESTS:</b> Enter the number of staff and facility personnel with a newly positive SARS-CoV-2 viral test result (for example, a positive SARS-CoV-2 antigen test and/or SARS-CoV-2 NAAT (PCR)). <b>Note: Exclude staff and facility personnel who have a positive SARS-CoV-2 antigen test, but a negative SARS-CoV-2 NAAT (PCR). Include only staff and facility personnel newly positive since the most recent date data were collected for NHSN reporting</b>
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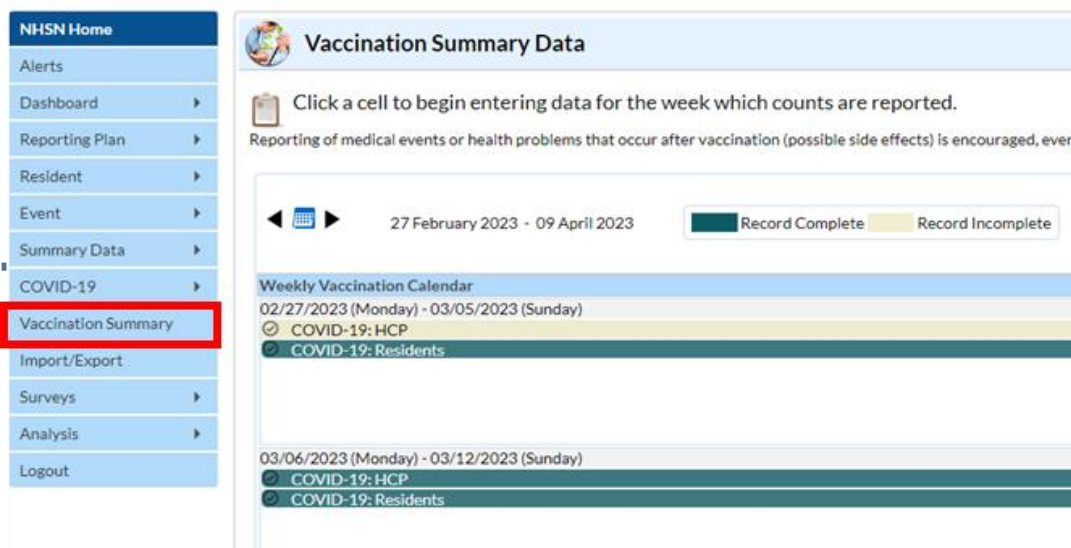
## NHSN COVID-19 Vaccination Data Reporting

The vaccination data reporting module collects data on the primary vaccine series, boosters, and up-to-date status for residents and HCP in the facility during the week of data collection (Monday–Sunday). This guide will focus on the resident questions.

There are three ways to report COVID-19 vaccinations in NHSN: (1) directly into the COVID-19 vaccination module, (2) through a CSV file upload into the COVID-19 vaccination module, or (3) through the person-level reporting module, which is the recommended route for vaccination entry.

**To make corrections to inaccurate submissions, go to Vaccination Summary > return to the week and date you want to correct > delete incorrect response > enter correct number > click “SAVE”.**

**Refer to *APPENDIX A: COVID-19 Vaccination Overview* for definitions on monovalent and bivalent booster vaccination, up to date vaccination status, and other resources.**



**NHSN Home**

- Alerts
- Dashboard
- Reporting Plan
- Resident
- Event
- Summary Data
- COVID-19
- Vaccination Summary**
- Import/Export
- Surveys
- Analysis
- Logout

### Vaccination Summary Data

Click a cell to begin entering data for the week which counts are reported.  
Reporting of medical events or health problems that occur after vaccination (possible side effects) is encouraged, even

27 February 2023 - 09 April 2023

Record Complete Record Incomplete

#### Weekly Vaccination Calendar

02/27/2023 (Monday) - 03/05/2023 (Sunday)

- COVID-19: HCP
- COVID-19: Residents

03/06/2023 (Monday) - 03/12/2023 (Sunday)

- COVID-19: HCP
- COVID-19: Residents

## COVID-19 Vaccination Questions for Residents

COVID-19 Vaccine: HCP

COVID-19 Vaccine: Residents

Resident COVID-19 Cumulative Vaccination Summary for Long-Term Care Facilities

Date Created:

\*Facility ID: 45188      \*Vaccination type: COVID19      Facility CCN #: 999991

\*Week of Data Collection: 07/10/2023 - 07/16/2023      \*Date Last Modified:

**Cumulative Vaccination Coverage**

Note: Facilities submit Weekly COVID-19 Vaccination Cumulative Summary data by completing the questions on this form. As of March 28th, 2022 facilities also have the option to use the Person-Level COVID-19 Vaccination Form and select the "view reporting summary and submit" to submit these data. Using the person-level forms is recommended to ensure that individuals who are up to date with COVID-19 vaccination are categorized appropriately according to their vaccination dates.

1. \* Number of residents staying in this facility for at least 1 day during the week of data collection

2. \* **Cumulative** number of residents in Question #1 who are up to date with COVID-19 vaccines.

Please review the current definition of **up to date**; Key Terms and Up to Date Vaccination.

3. \* **Cumulative** number of residents in Question #1 with other conditions:

3.1 \* Medical contraindication to COVID-19 vaccine

3.2 \* Offered but declined COVID-19 vaccine

3.3 \* Unknown/Other COVID-19 vaccination status



**Refer to the Instructions for Completion of the Weekly Vaccination Modules for Long-Term Care Facility Residents for more detail on each question:**

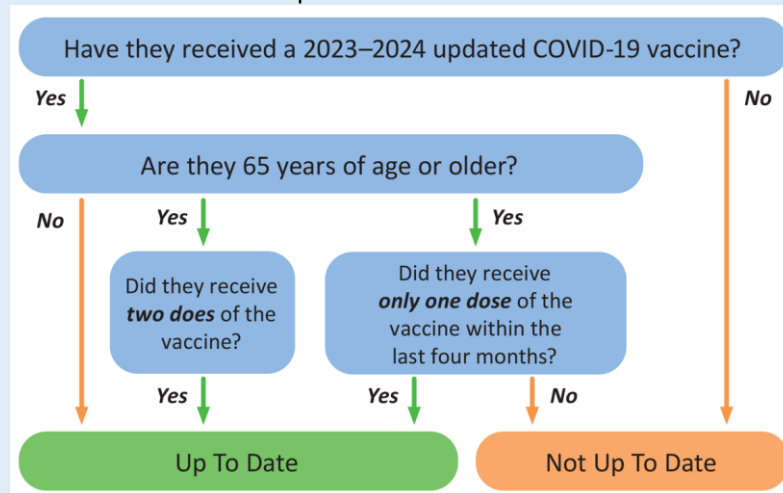
<https://www.cdc.gov/nhsn/pdfs/covid19/lcfc/vax-rpv-protocol-ltc-residents-oct-2023-508.pdf>

**Reminder:** When submitting data, enter cumulative (total) vaccine numbers for all residents in the facility during the reporting week, **not** just the new data from the current reporting week.

### NHSN Up-to-Date Surveillance Definition

For NHSN surveillance purposes, individuals are considered “up to date” with their COVID-19 vaccines if they meet the following criteria: Individuals aged 65 years and older are up to date when they have received 2 doses of the updated 2023–2024 COVID-19 vaccine or received 1 dose of the updated 2023–2024 COVID-19 vaccine within the past 4 months.

Individuals younger than 65 years of age are up to date when they have received 1 dose of the updated 2023–2024 COVID-19 vaccine.



COVID-19 Vaccination Modules: Key Terms<sup>6</sup>





**Review the NHSN website quarterly to check for NHSN up-to-date definition updates. Use of the person-level reporting is recommended to ensure individuals who are up to date with COVID-19 vaccination are categorized and reported appropriately according to their vaccination dates. Refer to the Person-Level Vaccination Reporting section for more information.**

### Case Example

This small facility is licensed for 24 beds. During this current reporting week, the facility is full (census was 24). Half of the residents are long-term residents (n = 12) and half are short-stay residents (n = 12). All of the short stay and long-term residents are older than 65.

#### Of the long-term residents:

- 4 of the 12 have received the updated 2023–2024 COVID-19 vaccine 6 months ago.
- 1 of the 4 above received a second dose of the 2023–2024 updated COVID-19 vaccine.
- 8 of the 12 declined the updated 2023–2024 COVID-19 vaccine.

#### Of the short-stay residents:

- 2 of the 12 have received the 2023–2024 updated COVID-19 vaccine 6 months ago.
- 1 of the 2 above received a second dose of the 2023–2024 updated COVID-19 vaccine.
- 10 of the 12 declined the updated 2023–2024 COVID-19 vaccine.

#### NHSN Resident Vaccination Questions

	Calculation Notes	Total
1. Number of residents staying in this facility for at least 1 day during the week of data collection	24	24
2. Cumulative number of residents in question 1 who are up to date with COVID-19 vaccines.	1 long term + 1 short stay = 2	2
3. <b>Cumulative</b> number of residents in question 1 with other conditions:		
3.1 Medical contraindication to COVID-19 vaccine	0	0
3.2 Offered but declined COVID-19 vaccine	$3+8+1+10 = 22$ Even though 4 long-term residents received the 2023–2024 updated COVID-19 vaccine, it has been longer than 4 months, so they are no longer up to date until they receive a second dose.  Even though 2 short-term residents received the 2023–2024 updated COVID-19 vaccine, it has been longer than 4 months, so they are no longer up to date until they receive a second dose.	22
3.3 Unknown COVID-19 vaccination status	0	0

## NHSN Case Vaccination Reporting Sample

COVID-19 Vaccine: HCP
COVID-19 Vaccine: Residents

**Resident COVID-19 Cumulative Vaccination Summary for Long-Term Care Facilities**

Date Created: 09/27/2023 2:39PM  
 \* Facility ID: 45188      \* Vaccination type: COVID19      Facility CCN #: 999991  
 \* Week of Data Collection: 09/25/2023 - 10/01/2023      \* Date Last Modified: 09/28/2023 3:27PM

**Cumulative Vaccination Coverage**

Note: Facilities submit Weekly COVID-19 Vaccination Cumulative Summary data by completing the questions on this form. As of March 28th, 2022 facilities also have the option to use the Person-Level COVID-19 Vaccination Form and select the "view reporting summary and submit" to submit these data. Using the person-level forms is recommended to ensure that individuals who are up to date with COVID-19 vaccination are categorized appropriately according to their vaccination dates.

1. \* Number of residents staying in this facility for at least 1 day during the week of data collection 24

2. \* **Cumulative number** of residents in Question #1 who are up to date with COVID-19 vaccines. 2

Please review the current definition of **up to date**: Key Terms and Up to Date Vaccination.

3. \* **Cumulative number** of residents in Question #1 with other conditions:

3.1 \* Medical contraindication to COVID-19 vaccine 0

3.2 \* Offered but declined COVID-19 vaccine 22

3.3 \* Unknown/Other COVID-19 vaccination status 0

**Adverse Events following COVID-19 Vaccine(s)**

Clinically significant adverse events 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.

By saving these data in NHSN, facilities are agreeing to the following:

1) The data reported are consistent with definitions outlined in NHSN surveillance protocols (including tables of instructions and frequently asked questions).  
 2) The data will be sent to the Centers for Medicare and Medicaid Services (CMS) to fulfill CMS quality reporting requirements (when applicable).

Save
Cancel

## Case Summary

In order to be considered up to date, an individual 65 or older must either have received a second dose of the 2023–2024 updated COVID-19 vaccine or received their first dose of the 2023–2024 updated COVID-19 vaccine in the past 4 months. 4 of the 6 individuals that received only one dose of the 2023–2024 updated COVID-19 vaccine 6 months ago, are no longer considered up to date, as they have not yet received a second dose of the 2023–2024 updated COVID-19 vaccine. Thus, this facilities’ resident up-to-date rate is only 8 percent and there is much room for improvement.

<b>Resident Up-to-Date Vaccination Rate</b>	
Numerator (Q 2):	2
Denominator (Q 1– Q 3.1):	24
	$2/24 = 8\%$



**Double check any “0” data submissions, especially on Question 2. Errors reported on those questions will impact resident booster vaccination rate calculations.**

**Note:** There is a variance between how HSAG and CMS Care Compare calculates the resident up-to-date vaccination rate. When HSAG calculates the resident up-to-date vaccination rate, the number of residents with medical contradictions is removed from the denominator.

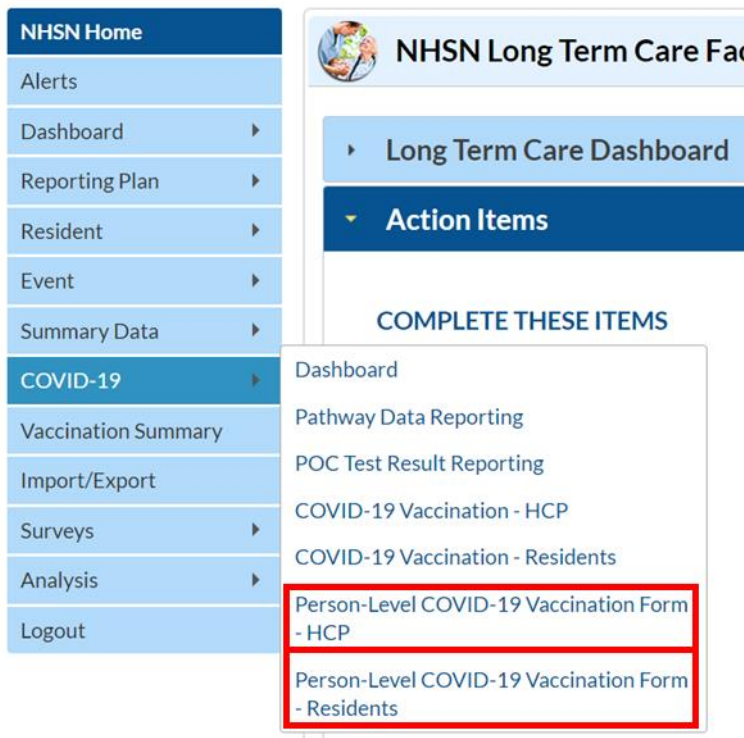
## Recommended NHSN Vaccination Reporting Tool

### Person-Level Vaccination Reporting

The person-level COVID-19 vaccination form is an optional tool that can be used to report data to the long-term care weekly HCP and resident vaccination modules.<sup>7</sup> This tool is only available for NHSN users with Level 3 access.

This reporting module in NHSN is meant to assist facilities with the tracking and interpreting resident and staff vaccination data. In this tab, facilities can upload patient and staff vaccination status, which may reduce the amount of interpretation required for NHSN COVID-19 vaccination reporting.

Person-level reporting is the recommended mode of data reporting and tracking in NHSN. This tool tracks resident and staff name, date of birth, gender, ethnicity, race, hiring, admittance, discharge and readmittance dates, as well as type and date of vaccinations received. Using these data, NHSN will automatically calculate and autofill the data required to submit weekly COVID-19 vaccination data, including determining who is up to date. Using this tool will organize facility vaccination data, reduce confusion during staff turnover, improve data reporting accuracy, and reduce time in reporting. However, to submit the weekly report through the person-level reporting module, facilities will need to login once a week, review the data, and click “SAVE”.



# Survival Guide for Mandatory NHSN Reporting for LTCFs

[Add Row...](#)
[View Reporting Summary & Submit...](#)
[Upload CSV...](#)
[Export CSV...](#)
[Export SQL...](#)

Required fields marked with \* Conditionally required fields marked with \*\*

Duplicate Row	Resident Identifier *	Resident First Name *	Resident Last Name *	Gender **	Date of Birth **	Ethnicity **	Race **	Resident Admit Date *	Resid
+	10000000	SIMON	WILLIAMS	Male	01/01/1950	Not Hispanic or Not Lat	Black or African American	03/28/2022	

If these match perfectly to an underlying main resident list record  
 then these will be filled in

COVID-19 Vaccination Cumulative Summary for Long-Term Care Facility Residents	
Person-Level Form	
Facility ID#:	
Vaccination type:	COVID19
Week of data collection first day (Monday):	
Week of data collection last day (Sunday):	
<a href="#">Re-submit all changed weeks</a>	
Cumulative Vaccination Coverage	
	* All Patients (Total)
1. *Number of residents staying in this facility for at least 1 day during the week of data collection	1
2. *Cumulative number of residents in Question #1 who are up to date with COVID-19 vaccines. Please review the current definition of up to date	1
Please review the current definition of up to date: <a href="#">Key Terms and Up to Date Vaccination</a> .	
3. Cumulative number of residents in Question #1 with other conditions:	
3.1 *Medical contraindication to COVID-19 vaccine	0
3.2 *Offered but declined COVID-19 vaccine	0
3.3 *Unknown/Other COVID-19 vaccination status	0



Refer to the [Person-Level Reporting How-To Guide](#) for detailed instructions to use this tool.  
[www.cdc.gov/nhsn/pdfs/ltc/covidvax/event-qrg-508.pdf](http://www.cdc.gov/nhsn/pdfs/ltc/covidvax/event-qrg-508.pdf)

## Annual Vaccination Flu Data Reporting

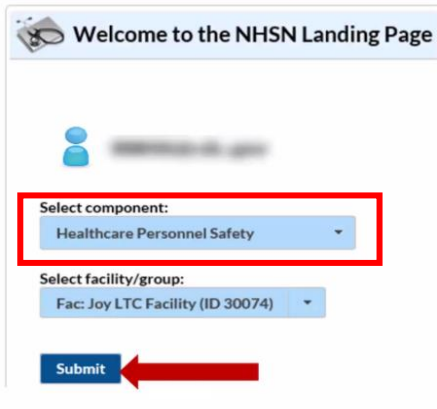
Reporting flu vaccines is not mandated, but it is a new CMS Quality Reporting Payment (QRP) measure and must be completed in NHSN. If a SNF fails to submit the required annual quality data, the SNF will be subject to a 2 percent point reduction in the Annual Payment Update for the applicable performance year.

To properly complete this QRP measure, the influenza vaccination status of all HCP who have worked at the facility for at least one day between the period of October 1 and March 31 must be documented in NHSN on or before May 15. This includes all influenza vaccinations received by staff members on- and off-site of the facility.

These data are to be reported in the HPS component, which must be added by your NHSN facility administrator. The NHSN facility administrator must have Level 3 access in NHSN to add this HPS component. Once added, you can access this component on your NHSN home landing page.

**To access the annual influenza report, on your landing page, switch the component to Healthcare Personnel Safety > Vaccination Summary > Annual Vaccination Flu Summary.**

### NHSN Landing Page



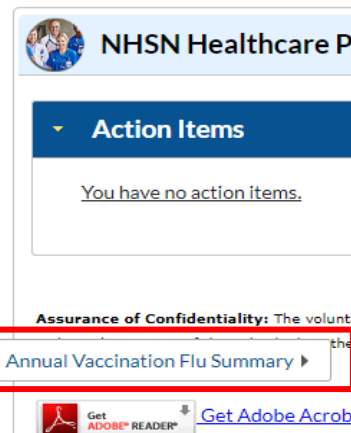
Welcome to the NHSN Landing Page

Select component:  
Healthcare Personnel Safety

Select facility/group:  
Fac: Joy LTC Facility (ID 30074)

Submit

- NHSN Home
- Alerts
- Reporting Plan
- HCW
- Lab Test
- Exposure
- Prophy/Treat
- Import/Export
- Vaccination Summary
- Surveys
- Analysis
- Users
- Facility
- Group
- Logout



NHSN Healthcare P

Action Items

You have no action items.

Assurance of Confidentiality: The volunt... the

Annual Vaccination Flu Summary

Get ADOBE READER Get Adobe Acrobat

# Survival Guide for Mandatory NHSN Reporting for LTCFs

Date Last Modified:

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

Refer to the CDC Healthcare Personnel Vaccination Module Influenza Vaccination Summary Comprehensive Training Slides for additional reporting guidance.



<https://www.cdc.gov/nhsn/pdfs/training/hcp/hcp-flu-vaccination-summary-reporting-general-training-508.pdf>

Refer to APPENDIX C Annual Influenza Reporting for guidance on adding the NHSN HPS component.



## Running Reports

As an NHSN user, you can mass-analyze all the data you have been reporting to NHSN. Running reports allows you to analyze and sort your data. Running reports can also help facilities identify if they have any missed weeks of data reporting. This is a helpful tool to use if you are reviewing your data to meet QRP deadlines. When you run these reports, you have the option of downloading them as a CSV file so you can access them as a spreadsheet to analyze and sort the data.

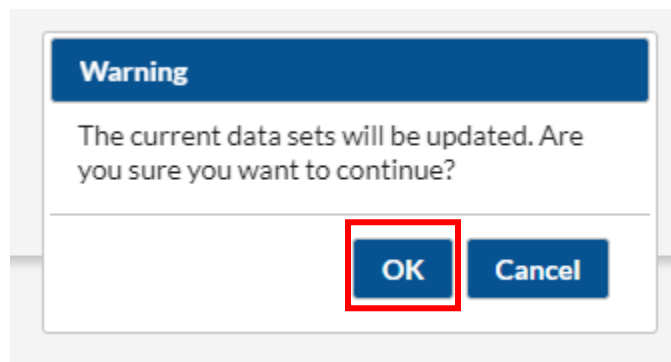
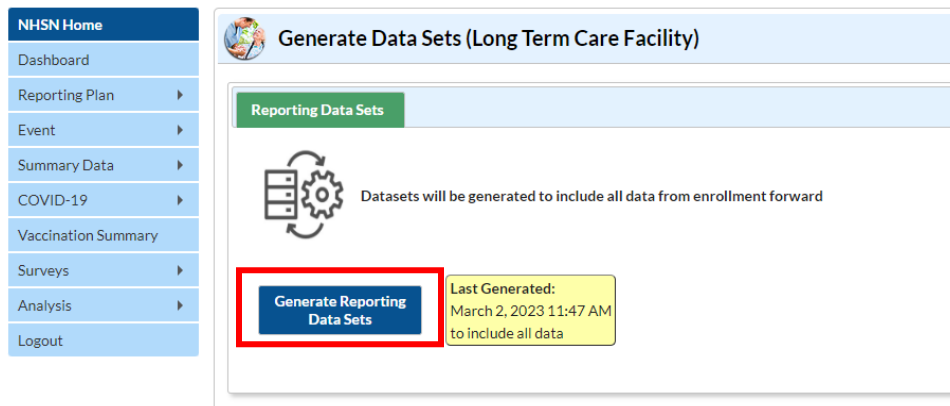
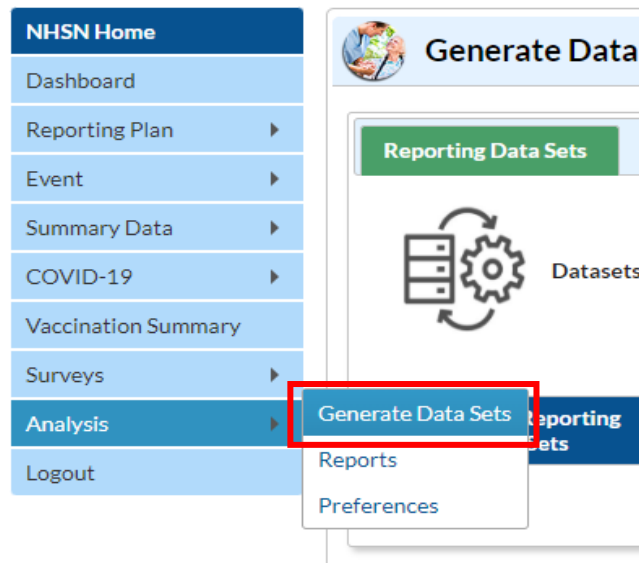
**To run and analyze reports, go to Analysis > Reports > access the report you are interested in running.**

The screenshot displays the NHSN user interface for running reports. On the left is a navigation sidebar with the following items: NHSN Home, Dashboard, Reporting Plan, Event, Summary Data, COVID-19, Vaccination Summary, Surveys, Analysis (highlighted), and Logout. The main area is titled 'Analysis Reports' and includes 'Expand All' and 'Collapse All' buttons. A tree view shows the following categories: MDRO/CDI Module - LAI, HAI Module, Process Measures, CMS Reports, COVID-19 Module, Resident Impact and Staff and Personnel Impact, Supplies and Personal Protective Equipment, Ventilator Capacity and Supplies, Therapeutics, and Weekly Influenza Vaccination. A 'Generate Data Sets' menu is open, with 'Reports' highlighted in a red box. Below this, a detailed view of the 'COVID-19 Module' is shown, listing the following sub-categories: Resident Impact and Facility Capacity, Staff and Personnel Impact, Supplies and Personal Protective Equipment, Ventilator Capacity and Supplies, Therapeutics, Weekly Influenza Vaccination, POC Testing, COVID-19 Vaccination, COVID-19 Vaccination (Pre-10.0), and COVID-19 Events.

**It is important to generate new data sets every new week you are running your data report.** Generating new data sets will update your reports with the newest data available in NHSN.

# Survival Guide for Mandatory NHSN Reporting for LTCFs

To generate new data sets, go to Analysis > Generate Data Sets > click Generate Data Sets > select 'OK' on the pop-up screen > wait until data sets have been generated.



## APPENDIX A: COVID-19 Vaccination Overview

COVID-19 vaccinations have proven to be effective, safe, and help to prevent severe illness, hospitalizations, and death from COVID-19.<sup>8</sup>

### 2023–2024 Updated COVID-19 Vaccine

The 2023–2024 updated COVID-19 vaccine more closely targets the XBB lineage of the Omicron variant and could restore protection against severe COVID-19 that may have decreased over time. As of October 3, 2023, the 2023–2024 updated Novavax vaccine was recommended by CDC for use in the United States. As of September 12, 2023, the 2023–2024 updated Pfizer-BioNTech and Moderna COVID-19 vaccines were recommended by CDC for use in the United States. We anticipate the updated vaccines will be better at fighting currently circulating variants. There is no preferential recommendation for the use of any one COVID-19 vaccine over another when more than one licensed or authorized, recommended, and age-appropriate vaccine is available.<sup>9</sup>

- [Everyone aged 5 years and older](#) ‡ should get **1 dose of an updated COVID-19 vaccine** to protect against serious illness from COVID-19.<sup>9</sup>
- [Children aged 6 months–4 years](#) need multiple doses of COVID-19 vaccines to be [up to date](#), including at least 1 dose of updated COVID-19 vaccine.<sup>9</sup>
- [People who are moderately or severely immunocompromised](#) may get additional doses of updated COVID-19 vaccine.<sup>9</sup>
- People aged 65 years and older who received 1 dose of any updated 2023–2024 COVID-19 vaccine (Pfizer-BioNTech, Moderna or Novavax) should receive 1 additional dose of an updated COVID-19 vaccine at least 4 months after the previous updated dose.<sup>9</sup>

### 2023–2023 Bivalent Vaccines

The 2022–2023 bivalent vaccines were designed to protect against both the original virus that causes COVID-19 and the Omicron variants BA.4 and BA.5. Two COVID-19 vaccine manufacturers, Pfizer-BioNTech and Moderna, had developed bivalent COVID-19 vaccines. As of September 11, 2023, the bivalent Pfizer-BioNTech and Moderna COVID-19 vaccines are no longer available for use in the United States.<sup>11</sup>

### Original Vaccines

Previous COVID-19 vaccines were called “original” because they were designed to protect against the original virus that causes COVID-19. As of April 18, 2023, the original Pfizer-BioNTech and Moderna COVID-19 vaccines are no longer available for use in the United States. As of May 6, 2023, J&J/Janssen COVID-19 vaccine is no longer available for use in the United States.<sup>11</sup>

### Staying Up to Date

CDC recommends the 2023–2024 updated COVID-19 vaccines: Pfizer-BioNTech, Moderna, or Novavax, to protect against serious illness from COVID-19. Everyone aged 5 years and older ‡ should get 1 dose of an updated COVID-19 vaccine to protect against serious illness from COVID-19. Children aged 6 months–4 years need multiple doses of COVID-19 vaccines to be up to date, including at least 1 dose of updated COVID-19 vaccine. People who are moderately or severely immunocompromised may get additional doses of updated COVID-19 vaccine. People aged 65 years and older who received 1 dose of any updated 2023–2024 COVID-19

vaccine (Pfizer-BioNTech, Moderna or Novavax) should receive 1 additional dose of an updated COVID-19 vaccine at least 4 months after the previous updated dose. COVID-19 vaccine recommendations will be updated as needed. People who are up to date have lower risk of severe illness, hospitalization and death from COVID-19 than people who are unvaccinated or who have not completed the doses recommended for them by CDC.<sup>9</sup> Individuals are considered up to date with their COVID-19 vaccines, for the purpose of NHSN surveillance if they meet the following criteria\*:

- Individuals aged 65 years and older are up to date when they have: Received 2 doses of the updated 2023–2024 COVID-19 vaccine or Received 1 dose of the updated 2023–2024 COVID-19 vaccine within the past 4 months.

Individuals younger than 65 years of age are up to date when they have: Received 1 dose of the updated 2023–2024 COVID-19 vaccine\*. As of September 12, 2023, the 2023–2024 updated Pfizer-BioNTech and Moderna COVID-19 vaccines were recommended by the CDC for use in the United States. The 2023–2024 updated COVID-19 vaccine more closely targets the XBB lineage of the Omicron variant and could restore protection against severe COVID-19 that may have decreased over time. Individuals are also considered up to date if they received a 2023–2024 updated COVID-19 vaccine.

[\\*\\*As of September 12, 2023, the bivalent COVID-19 vaccines are no longer FDA-authorized.](#)

Misunderstanding COVID-19 reporting requirements and vaccine up-to-date definitions can lead to CMS fines and inaccurately reported public data. See below example with decision tree diagram regarding up-to-date vaccination status.<sup>9</sup>

## APPENDIX B: Influenza Reporting

Follow these instructions to activate the HPS component in NHSN (this only needs to be completed once). The NHSN facility administrator is the only eligible person to activate the HPS component for QRP reporting. The NHSN facility administrator must have level 3 access in order to add this HPS component.

### To activate the HPS component:

1. On the left-hand panel, select Facility, then select Add/Edit Component.



# Survival Guide for Mandatory NHSN Reporting for LTCFs

2. Check the box next to HPS.

## Components Followed

Follow/ Followed	Component	Activated	Deactivated	Agreement Accepted	View Agreement
<input type="checkbox"/>	Biovigilance				
<input type="checkbox"/>	Dialysis				
<input checked="" type="checkbox"/>	Healthcare Personnel Safety	09/30/2022		Y	<a href="#">View Agreement</a>
<input checked="" type="checkbox"/>	Long Term Care Facility	05/08/2020		Y	<a href="#">View Agreement</a>
<input type="checkbox"/>	Neonatal				
<input type="checkbox"/>	Outpatient Procedure				
<input type="checkbox"/>	Patient Safety				

3. An alert will appear stating that you need to assign a primary contact. HSAG recommends assigning yourself as the HPS Primary Contact. There should be an option for existing users at the top of the contact information. Once you save the contact information, click on Update at the bottom of the screen.

## Contact Information

Contact Type	
Edit	Facility Administrator
Edit	Long Term Care Facility Primary Contact
Edit	Healthcare Personnel Primary Contact

The box next to “Healthcare Personnel Safety” must be checked after updating the contact. If not, check it again and then click on update.

## To access the HPS component:

1. Click on NHSN Home.


<b>NHSN Home</b>
Alerts
Dashboard ▶
Reporting Plan ▶
Resident ▶
Event ▶
Summary Data ▶
COVID-19 ▶

## Survival Guide for Mandatory NHSN Reporting for LTCFs

2. On the landing page, use the dropdown under Select Component and choose Healthcare Personnel Safety. Make sure your facility is selected, then click on Submit.
3. Accept the Terms of Use Agreement. **Tip: Scroll down and to the right to check the box to accept.**

### NHSN Landing Page

Welcome to the NHSN Landing Page

 [blurred]

Select component:  
Healthcare Personnel Safety

Select facility/group:  
Fac: Joy LTC Facility (ID 30074)

Submit



## APPENDIX C: Quality Tips and Resources



Review, print, and use the Summary of NHSN COVID-19 Reporting Requirements to improve reporting adherence.

NHSN Reporting Description	NHSN Deadline																					
<ul style="list-style-type: none"> <li> <b>COVID-19/Respiratory Pathogens Pathway Data Reporting:</b> Only new data should be reported representing the time since the last report date.                             <ol style="list-style-type: none"> <li>Resident Impact and Facility Capacity</li> <li>Staff and Personnel Impact</li> </ol> </li> <li> <b>COVID-19 Vaccination Data Reporting:</b> Cumulative data should be reported every week for all residents and staff that were in your facility for the week of data collection.                             <ol style="list-style-type: none"> <li>LTCF Residents</li> <li>LTCF HCP</li> </ol> </li> </ul> <p>Use the recommended Person-Level Vaccination Reporting Tool to standardize and simplify data monitoring and tracking.</p>	<p>Reporting week is Monday through Sunday. Data must be submitted into NHSN once every reporting week. Report consistently each week.</p> <p>Report once every week before Sunday at 11:59 p.m. (local time zone)</p> <table border="1" data-bbox="906 821 1463 1077"> <thead> <tr> <th>S</th> <th>M</th> <th>T</th> <th>W</th> <th>Th</th> <th>F</th> <th>S</th> </tr> </thead> <tbody> <tr> <td></td> <td>1</td> <td>2</td> <td>3</td> <td>4</td> <td>5</td> <td>6</td> </tr> <tr> <td>7</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>	S	M	T	W	Th	F	S		1	2	3	4	5	6	7						
S	M	T	W	Th	F	S																
	1	2	3	4	5	6																
7																						
<ul style="list-style-type: none"> <li> <b>Annual Flu Vaccination Data Reporting for HCP:</b> CDC/NHSN encourages that HCP influenza vaccination summary data be updated monthly. However, to meet the minimum data requirements for NHSN participation, CMS only requires one influenza vaccination summary report to be submitted at the conclusion of the measure reporting period (October 1–March 31).                             </li> </ul>	<p>Reporting period is October 1–March 31. Summary data due by May 15 each year in NHSN HPS Component.</p>																					



Check the NHSN website on a quarterly basis to monitor definition changes of up-to-date vaccination status. COVID-19 Vaccination Modules: Understanding Key Terms and Up-to-Date Vaccination: [www.cdc.gov/nhsn/pdfs/hps/covidvax/UpToDateGuidance-508.pdf](http://www.cdc.gov/nhsn/pdfs/hps/covidvax/UpToDateGuidance-508.pdf)



Use Person-Level Vaccination Reporting to organize facility vaccination data, reduce confusion during staff turnover, improve data reporting accuracy, and reduce time on reporting. How-To Guide: [www.cdc.gov/nhsn/pdfs/ltc/covidvax/event-qrg-508.pdf](http://www.cdc.gov/nhsn/pdfs/ltc/covidvax/event-qrg-508.pdf)



When submitting data, enter cumulative (total) vaccine numbers for all residents in the facility during the reporting week, not just the new data from the current reporting week.



Refer to the CDC COVID-19 Vaccination Schedules for current vaccination recommendations. Guidance is available for people ages 12 years and older (people who are and are not moderately or severely immunocompromised).

## Key NHSN Resources

### LTCF NHSN Frequently Asked Questions, Scenarios, and Important Links

[www.hsag.com/globalassets/12sow/nhsn/nhsnimportantlinksfags2022final.pdf](http://www.hsag.com/globalassets/12sow/nhsn/nhsnimportantlinksfags2022final.pdf)

### Instructions for Completion of the Weekly COVID-19 Vaccination Cumulative Summary for Residents of LTCFs

[www.cdc.gov/nhsn/forms/instr/COVIDVax.LTC\\_Residents.TOI\\_MAY2022-508.pdf](http://www.cdc.gov/nhsn/forms/instr/COVIDVax.LTC_Residents.TOI_MAY2022-508.pdf)

### Person-Level Reporting How-to Guide

[www.cdc.gov/nhsn/pdfs/ltc/covidvax/event-qrg-508.pdf](http://www.cdc.gov/nhsn/pdfs/ltc/covidvax/event-qrg-508.pdf)

### CDC Interim Clinical Considerations for Use of COVID-19 Vaccines Currently Authorized in the United States

[www.cdc.gov/vaccines/covid-19/clinical-considerations/interim-considerations-us.html#not-immunocompromised](http://www.cdc.gov/vaccines/covid-19/clinical-considerations/interim-considerations-us.html#not-immunocompromised)

### CDC Reporting Weekly Influenza Vaccination Data

[www.cdc.gov/nhsn/pdfs/training/hcp/weekly-fluvax-training-508.pdf](http://www.cdc.gov/nhsn/pdfs/training/hcp/weekly-fluvax-training-508.pdf)

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10. CDC. Interim Clinical Considerations for Use of COVID-19 Vaccines Currently Authorized in the United States. May 16, 2023. Available at: <https://www.cdc.gov/vaccines/covid-19/clinical-considerations/interim-considerations-us.html#not-immunocompromised>
11. NHSN. COVID-19 Vaccine Modules: Key Terms. Available at: [UpTo Date Guidance Quarter 2 Of 2023 mockup 508 \(cdc.gov\)](#).

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