### NHSN Event-Level/ Person-Level Vaccination Forms: Office Hours and FAQs

National Healthcare Safety Network (NHSN) Vaccination Unit

June 1, 2022





### cdc.gov/coronavirus

### **Overview**

- Facilities will continue to submit cumulative weekly COVID-19 Vaccination data to the Weekly COVID-19 Vaccination Modules. Data can be reported to these modules in three ways:
  - Directly into the data entry screens of the COVID-19 Vaccination Modules
  - 2. Through .CSV upload into the Weekly COVID-19 Vaccination Modules
  - 3. As of March 28, 2022, long-term care facilities also have the option to use these event-level/person-level COVID-19 vaccination forms and select the "view reporting summary and submit" button to submit these data to the Weekly Modules.
    - The person-level forms are replacing the optional excel data tracking worksheets previously offered to facilities to assist with reporting to the Weekly COVID-19 Vaccination Modules.



### Today we'll focus on #3, the Person-Level COVID-19 Vaccination Forms

- Facilities will continue to submit cumulative weekly COVID-19 Vaccination data to the Weekly COVID-19 Vaccination Modules. Data can be reported to these modules in three ways:
  - 1. Directly into the data entry screens of the COVID-19 Vaccination Modules
  - 2. through .CSV upload into the Weekly COVID-19 Vaccination Modules
  - As of March 28, 2022, long-term care facilities also have the option to use these person-level COVID-19 vaccination forms and select the "view reporting summary and submit" button to submit these data to the Weekly Modules.

The event-level forms are replacing the <u>optional</u> excel data tracking worksheets previously offered to facilities to assist with reporting to the Weekly COVID-19 Vaccination Modules.



### Background of COVID-19 Weekly Reporting & Person-Level Vaccination Form

- To track individual resident and healthcare personnel vaccination information, CDC currently provides Excel spreadsheets (named Excel Data Tracking Worksheets) to track resident and healthcare personnel
  - Enhanced versions of these worksheets have now been built into NHSN – the Person-Level Vaccination Forms



Data for Example Only

## May Release Updates: Person-Level COVID-19 Vaccination Forms



### **Summary of Updates**

- Improved speed and efficiency shorter load times
- If end date or discharge date is before 3/28/2022, rows no longer appear green
- Aligned Reporting Summary Screen with the Updated COVID-19 Summary Forms
  - Person-level vaccination form auto-calculates new questions 4.1, 4.2, and 5 (up to date)!
- Added new column to indicate whether the additional/booster dose in question 4 was a booster dose or an additional dose – this is needed for calculating questions 4.1, 4.2, and 5
- Added columns to collect 2<sup>nd</sup> and 3<sup>rd</sup> booster doses also needed for calculating questions 4.1, 4.2, and 5



### Aligned Reporting Summary Screen with the Updated COVID-19

### Summary Form: <u>HCP</u>

	View Reporting Summary & Submit							
	Healthcare Personnel COVID-19 Vaccinati	on Cumulative Summary for Long-Term	Care Facilities					
	TRACKING WORKSHEET							
	Facility ID#:	14701						
	Vaccination type:	COVID19	)					
	Week of data collection first day (Monday):	5/23/2022 (Changed since submitted us	ing the Tracking We	orksheet) 🗸				
	Week of data collection last day (Sunday):	05/29/202	2					
	Cumulative Vaccin	ation Coverage			Healthcare Personr	el (HCP) Categories		
					Employee HCP	No	n-Employee HCP	
			All Core HCP	All 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 hav at least 1 day during the week of data collec	e worked at this healthcare facility for tion	5	6	2	2	1	1
	2. *Cumulative number of HCP in Question	#1 who have received primary series CO	VID-19 vaccine(s) a	at this facility o	or elsewhere since Dece	ember 2020:		
Simplified	2.1 *Only 1 dose of a two-dose <b>Primary</b> C	OVID-19 vaccine series	0	0	0	0	0	0
Simplined	2.2 *Any completed primary COVID-19 va	accine series	5	6	2	2	1	1
	3. Cumulative number of HCP in Question #	1 with other conditions:						
	3.1 *Medical contraindication or exclusion	to COVID-19 vaccine	0	0	0	0	0	0
	3.2. *Offered but declined COVID-19 vaco	ine	0	0	0	0	0	0
	3.3. *Unknown COVID-19 vaccination sta	tus	0	0	0	0	0	0
Simplified	 <ol> <li>*<u>Cumulative</u> number of HCP with complete #2 who have received any booster(s) or add since August 2021</li> </ol>	ete primary series vaccine in Question itional dose(s) of COVID-19 vaccine	5	6	2	2	1	1
	Question 5 asks about individuals who are	up to date. Please review the current de	finition of <u>up to dat</u>	te.				
New	 5.1 * <u>Cumulative</u> number of HCP in question vaccines	n #2 who are <b>up to date</b> with COVID-19	4	5	1	2	1	1



### Aligned Reporting Summary Screen with the Updated COVID-19 Summary Form: Residents



### **Up to Date with COVID-19 Vaccines**

Individuals are considered up to date with their COVID-19 vaccines during the surveillance period of October 3, 2021 through June 26, 2022 for the purpose of NHSN surveillance if they meet (1) of the following criteria\*:

- An individual received all recommended doses in their **primary vaccine series** and received at least **one booster dose**.
   An individual does not need to receive a second booster dose to be considered up to date at this time.
- 1. An individual **recently** received all recommended doses in the **primary vaccine series** and is **not yet eligible** for a **booster** dose. Individuals who are not yet eligible to receive a booster dose include:
  - a. Those who received their second dose of a 2-dose primary series of an mRNA COVID-19 vaccine (Pfizer-BioNTech or Moderna) less than 5 months ago.
  - b. Those who received a single dose of Janssen less than two months ago.

\*Individuals with a moderately to severely immunocompromising condition are considered up to date in the following cases:

1) An individual received an additional dose less than three months ago, if primary series was the Moderna or Pfizer-BioNTech COVID-19 vaccine; or

2) An individual received an additional dose less than two months ago, if primary series was the Janssen COVID-19 vaccine; or

3) An individual received at least one booster dose after receiving an additional dose.





### **Key Terms:**

### Additional dose

 An additional dose is another dose of vaccine administered to people who were less likely to mount a protective immune response after initial vaccination. People who are moderately or severely immunocompromised should receive an additional dose.

### Booster dose

 A booster dose is another dose of vaccine administered after receiving a primary vaccine series to enhance or restore protection which might have subsided over time.



### New Column to Indicate if Question 4 Additional/ Booster Dose is a Booster Dose or Additional Dose

4. \*<u>Cumulative</u> number of HCP with complete primary series vaccine in Question #2 who have received **any booster(s) or additional dose(s)** of COVID-19 vaccine since August 2021

	Additional/booster dose type <b>* *</b>		Additional/booster dose date **	Additional/booster dose type <b>* *</b>	Additional/booster dose manufacturer name <b>* *</b>
			12/29/2021	Additional Dose	Pfizer-BioNTech COVID-19 vaccine
	Booster Dose 🗸 🗸		01/04/2022	Additional Dose	Moderna COVID-19 vaccine
			05/08/2022	Booster Dose	Pfizer-BioNTech COVID-19 vaccine
ļ	Additional Dose		12/30/2021	Booster Dose	Moderna COVID-19 vaccine
	Booster Dose		12/23/2021	Booster Dose	Moderna COVID-19 vaccine
			10/28/2021	Booster Dose	Pfizer-BioNTech COVID-19 vaccine
		l			

- Question 4 collects the first additional/booster dose after primary series
- New column differentiates between additional vs. booster dose
- Purpose: This information is used for auto-calculation of question 5 (up to date) and questions 4.1 and 4.2 on resident form
- Defaults to booster
- If you do not have specific documentation of dose being an additional dose for an immunocompromising condition, assume it is a booster



### New Columns to Collect 2<sup>nd</sup> and 3<sup>rd</sup> Booster Doses

fields marked with 🗯	Conditionally required fiel	ds marked with 🔹 📩				
Additional/booster dose date **	Additional/booster dose type <b>* *</b>	Additional/booster dose manufacturer name <b>* *</b>	Booster dose 2 vaccination date	Booster dose 2 vaccine manufacturer name	Booster dose 3 vaccination date	Booster dose 3 vaccine manufacturer name
12/29/2021	Additional Dose	Pfizer-BioNTech COVID-19 vaccine				
01/04/2022	Additional Dose	Moderna COVID-19 vaccine	05/15/2022	Pfizer-BioNTech COVID-19 vaccine	05/22/2022	Moderna COVID-19 vaco
05/08/2022	Booster Dose	Pfizer-BioNTech COVID-19 vaccine				
12/30/2021	Booster Dose	Moderna COVID-19 vaccine	04/14/2022	Moderna COVID-19 vaccine		
12/23/2021	Booster Dose	Moderna COVID-19 vaccine	05/07/2022	Pfizer-BioNTech COVID-19 vaccine		
10/28/2021	Booster Dose	Pfizer-BioNTech COVID-19 vaccine				

• **Booster dose 2** is the next dose received after additional/booster dose

- If additional/booster dose type = booster, then booster dose 2 is the individual's second booster dose
- If additional/booster dose type = additional, then booster dose 2 is the individual's first booster dose
- **Booster dose 3** is the next dose received after booster dose 2
  - If additional/booster dose type = additional, then booster dose 3 is the individual's second booster dose
- Reminder: Question 4.2 will only include second boosters received after March 29, 2022



4.2 \* <u>Cumulative</u> number of residents in Question #4 who received <u>two or more</u> booster doses of COVID-19 vaccine, and the most recent dose was received since March 29, 2022

Data for Example Only

### **Review: Data Entry and Submission**



### How to access Person-Level COVID-19 Vaccination Form

- Must be SAMS Level 3 user
- LTCF Component
- Navigate to COVID-19 tab
- Select Event-Level COVID-19
   Vaccination Form HCW or
   Event-Level COVID-19
   Vaccination Form Residents





### How to enter vaccination information for an individual

Event	-Level	COVID-19	Vaccination	Form - Resid	lents							
+ Add Row	View	w Reporting Sum	mary & Submit	Upload C	SV Export CSV							
Resident identi	fier *	Resident Admit Date *	Resident Discharge Date	Reside	nt First Name *	Resider	it Last Name *	Dose 1 vaccination date <b>* *</b>	Dose 1 vaccine manuf name **	acturer Dose 2 vaccination date **	Dose 2 vaccine manuf name **	acturer Is vaccination complete
4			ļ									
Save Row	⊘ Ca	ncel										
Required fields mark	ked with	Conditionally requir	red fields marked with	**								
Delete Duplicate Row	e Res	ident identifier *	Resident Admit Date *	Resident Discharge Date	Resident First I	Name *	Resident Last	Name *	Dose 1 vaccination date **	Dose 1 vaccine manufacturer name **	Dose 2 vaccination date **	Dose 2 vaccine manufactur name **
		x	x	x		x		x	x	<b>~</b> x	x	<b>~</b>
- +	10		02/15/2022		Example1		Patient1		11/20/2021	Janssen COVID-19 vacc		
	1001		02/15/2022	05/02/2022	Example1		Dationt1		02/20/2022	Janasan COVID 19 yasa		

- Click + Add Row button
- New yellow section at the top of the form will appear to enter this individual's data
- Enter required and applicable fields
- Click Save Row



Note: CSV upload also available

## How to update vaccination information for an individual

- The Person-Level COVID-19 Vaccination Form captures changes in individuals' vaccination status over time.
- If an individual's vaccination status changes, **do not delete the old status**.
- Add the new status date to their existing row.



#### Data for Example Only

## How to update vaccination information for an individual - continued

- For example, the resident below initially declined vaccination when she was admitted on 1/1/22. She later decided that she would get vaccinated on 2/6/22. Both events are maintained on her row.
  - After saving her data on 1/1/22, her row includes her admission date and declined date:

Required fields mar	ed with * Condition	lly required fields	marked with 🏾 🏶									
Resident identifier <b>*</b>	Resident Admit Date *	Resident Discharge Date	Resident First Name *	Resident Last Name *	Dose 1 vaccination date **	Dose 1 vaccine manufacturer name **	Dose 2 vaccination date <b>* *</b>	Dose 2 vaccine manufacturer name **	Is vaccination series complete?	Medical contraindication date **	Declination date **	Declination reason
434536	01/01/2022		Res1	ResLast1					No		01/01/2022	Other

 When she decides to receive dose 1 on 2/6/22, do not delete the information on her prior declination. Instead, add the new information on dose 1 to her existing row.

Required fields mar	ced with 🍍 Conditiona	lly required fields	marked with									
Resident identifier *	Resident Admit Date *	Resident Discharge Date	Resident First Name *	Resident Last Name *	Dose 1 vaccination date **	Dose 1 vaccine manufacturer name **	Dose 2 vaccination date **	Dose 2 vaccine manufacturer name **	Is vaccination series complete?	Medical contraindication date **	Declination date **	Declination reason
434536	01/01/2022		Res1	ResLast1	02/06/2022	Moderna COVID-19 vac			No		01/01/2022	Other



### How to submit data to the aggregate weekly reporting form

- Rows in the grid will appear in green after they have been added or modified, and will remain green until they have been submitted to the weekly reporting form for all weeks the individual was in the facility
- When all data are entered and ready for submission, click the View Reporting Summary & Submit button

4	Add	Row View Report	ing Summary & S	ubmit 🔹 U	pload CSV 🔹 Export CSV 🔹 E	Export SQL				
Re	quired f	ields marked with 🍍 Condition	ally required fields ma	arked with 🔹						(
Du	plicate Row	Resident identifier *	Resident Admit Date <b>*</b>	Resident Discharge Date	Resident First Name *	Resident Last Name *	Dose 1 vaccination date **	Dose 1 vaccine manufacturer name **	Dose 2 vaccination date **	Dose 2 vaccine n name
	+	434536	01/01/2022		Res1	ResLast1	02/06/2022	Moderna COVID-19 vaco		
	+	543TGRG	03/08/2022	05/26/2022	fgdfg	fgdg	05/13/2021	Pfizer-BioNTech COVID-	05/31/2021	Pfizer-BioNTe
	+	FDDG	03/15/2022		fgdgrh	fdgdgd	01/03/2022	Pfizer-BioNTech COVID-		



### How to submit data to the aggregate weekly summary form

- This is the Reporting Summary screen
- The totals here are autocalculated based on the person-level data
- Use the week of data collection drop down menu to view the data by reporting week and see which weeks you need to submit data for

View Reporting Summary & Submit			
COVID-19 Vaccination Cumulative Summ	ary for Long-Term Care Facility Residents		
TRACKING WORKSHEET			
Facility ID#:	14025		
Chassination type:	CO\/!D12		
Week of data collection first day (Monday):	5/2/2022 (Changed since submitted using the Tracking Worksheet) $$ $$		
Week of data collection last day (Sunday):	05/08/2022		
	Cumulative vaccination Coverage		
			* All Patients (Total)
1. *Number of residents staying in this fac	ility for at least 1 day during the week of data collection		3
2. *Cumulative number of patients in Que	stion #1 who have received <b>primary</b> series COVID-19 vaccine(s) at this fac	ility or elsewhere since December 2020:	
2.1 Only 1 dose of a two-dose <b>Primary</b> C	COVID-19 vaccine series		1
2.2 *Any completed primary COVID-19	vaccine series		1
3. Cumulative number of residents in Que	stion #1 with other conditions:		
3.1 *Medical contraindication or exclusion	on to COVID-19 vaccine		1
3.2 *Offered but declined COVID-19 vac	ccine		0
3.3 *Unknown COVID-19 vaccination st	atus		0
4. *Cumulative number of residents with c	complete <b>primary</b> series vaccine in Question #2 who have received <u>any boo</u>	oster(s) or additional dose(s) of COVID-19 vaccine since	0
August 2021			0
4.1 Cumulative number of residents in C	Question #4 who have received only one booster dose of COVID-19 vaccin	e since August 2021	0
4.2 Cumulative number of residents in C 2022	Question #4 who received <u>two or more booster doses</u> of COVID-19 vaccing	e, and the most recent dose was received since March 29,	0
5. *Cumulative number of patients in ques	tion #2 who are up to date with COCID-19 vaccines. Please review the cu	rrent definitions of up to date	0



## How to submit data to the aggregate weekly reporting

- Use the week of data collection drop down menu to view the data by reporting week and see which weeks you need to submit data for based on the changes you made to the event-level data
- In this example, I modified data such that it impacted the summary counts for weeks 5/2-5/23, so I am being prompted to submit for those weeks

	4/25/2022	~	
	3/28/2022		
	4/4/2022		l
1	4/11/2022		
	4/18/2022		
	4/25/2022		ŀ
1	5/2/2022 (Changed since submitted using the Tracking Worksheet)		ŀ
e	5/9/2022 (Changed since submitted using the Tracking Worksheet)		2
V	5/16/2022 (Changed since submitted using the Tracking Worksheet)		L
	5/23/2022 (Changed since submitted using the Tracking Worksheet)		



### How to submit data to the aggregate weekly reporting form – continued

- Select the first week you want to submit aggregate weekly summary data for
- Review the totals
- If everything appears correct, click 'Save and Submit Data'
- You will receive a pop-up message that your data successfully saved
- Click OK
- Select the next week you want to submit data for and repeat

View Reporting Summary & Submit					
COVID-19 Vaccination Cumulative Sumn	nary for Long-Term Care Facility Re	esidents			
TRACKING WORKSHEET					
Facility ID#:		14025			
Vaccination type:	C	OVID19			
Week of data collection first day (Monday):	5/2/2022 (Changed since submi	tted using the Tracking Worksheet) 💙			
Week of data collection last day (Sunday):	05,	/08/2022			
	·	Cumulative Vaccination Coverage	:		
					* All Patients (Total)
1. *Number of residents staying in this fac	ility for at least 1 day during the w				3
2. *Cumulative number of patients in Que	stion #1 who have received <b>prima</b>	Alert		ewhere since December 2020:	
2.1 Only 1 dose of a two-dose Primary (	COVID-19 vaccine series	Successfully saved			1
2.2 *Any completed primary COVID-19	vaccine series	Successiony saved.			1
3. Cumulative number of residents in Que	estion #1 with other conditions:				
3.1 *Medical contraindication or exclusi	on to COVID-19 vaccine				1
3.2 *Offered but declined COVID-19 va	ccine		ОК		0
3.3 *Unknown COVID-19 vaccination s	tatus	-			0
4. *Cumulative number of residents with August 2021	complete <b>primary</b> series vaccine in	Question #2 who have received <u>any boo</u>	<u>oster(s) or</u>	additional dose(s) of COVID-19 vaccine since	0
4.1 Cumulative number of residents in (	Question #4 who have received on	ly one booster dose of COVID-19 vaccin	e since Au	igust 2021	0
4.2 Cumulative number of residents in 0 2022	Question #4 who received <u>two or n</u>	nore booster doses of COVID-19 vaccine	e, and the	most recent dose was received since March 29,	0
5. *Cumulative number of patients in que	stion #2 who are up to date with C	OCID-19 vaccines. Please review the cu	rrent defii	nitions of up to date	0
· · · ·	·				

Save and Submit Data Done



### It's OK for Rows to Remain Green!

- Rows will appear in green after they have been added or modified and will remain green if they have not been submitted to the weekly reporting form for all weeks the individual was in the facility
  - This will often happen if you started using the event-level/ person-level form in May, for example, but it has been available in NHSN since March. This is perfectly fine!
- You should ONLY select "view reporting summary and submit" and submit Weekly COVID-19 Vaccination Module summary data for <u>weeks that have complete person-level</u> <u>information entered</u> in the grid

#### **\*\*It's OK for rows to remain green!**\*\*

- <u>Do not</u> submit for earlier weeks that you don't have complete person-level data for this overwrites your previously-entered weekly summary data with new, incomplete data
  - For example, if a facility initiates use of the event-level form the week of May 30, 2022
     June 5, 2022, then the facility should only use the event-level form/ reporting summary to submit data starting from that week moving forward.



## How to submit data to the aggregate weekly reporting form - continued

- After submitting for each week of interest, navigate to the Vaccination Summary tab to ensure that all weeks were successfully submitted to the aggregate weekly reporting form
  - Completed weeks will appear green in the calendar view

◀ 🔳 ►	28 March 2022 - 08 May 2022	Record Complete	Record Incomplete
Weekly Vaccin	ation Calendar		
03/28/2022 (N	1onday) - 04/03/2022 (Sunday)		
⊘ COVID-19	:HCW		
COVID-19	: Residents		
04/04/2022 (N	1onday) - 04/10/2022 (Sunday)		
O COVID-19	: HCW		
COVID-19	Residents		



#### Data for Example Only

### The data in the Reporting Summary and the official Weekly Vaccination Form are the same after submission!

#### **Reporting Summary**

COVID-19 Vaccination Cumulative Summ	ary for Long-Term Care Facility Residents
TRACKING WORKSHEET	
Facility ID#:	20568
Vaccination type:	COVID19
Week of data collection first day [Monday]:	3/28/2022
Week of data collection last day (Sunday):	04/03/2022
	Cumulative Vaccinatic
1. "Number of residents staying in this faci	lity for at least 1 day during the week of data collection
2. *Cumulative number of residents in Que	stion #1 who have received COVID-19 vaccine(s) at this facility
2.1. Only dose 1 of Pfizer-BioNTech COV	/ID-19 vaccine
2.2. Dose 1 and dose 2 of Pfizer-BioNTec	th COVID-19 vaccine
2.3. Only dose 1 of Moderna COVID-19	vaccine
2.4. Dose 1 and dose 2 of Moderna COV	ID-19 vaccine
2.5 One dose of Janssen COVID-19 vaca	ine
2.99 Complete COVID-19 vaccination se	erles: Unspecified Manufacturer
Any completed primary COVID-19 vacci	ne series
3. Cumulative number of residents in Que	stion #1 with other conditions:
3.1 *Medical contraindication or exclusion	on to COVID-19 vaccine
3.2. "Offered but declined COVID-19 va	ccine
3.3.*Unknown COVID-19 vaccination st:	atus
4. *Cumulative number of residents in Que	istion #2 who have received an additional dose or booster of CC
4.1. * Additional dose of Pfizer-BioNTech	COVID-19 vaccine
4.2. * Additional dose of Moderna COVIE	D-19 vaccine
4.3 * Additional dose of Janssen COVID-	19 vaccine
4.4. Additional dose of unspecified manu	facturer
Any Additional dose or booster of COVII	D-19 vaccine series
	COVID-19 Vaccine(s) Supply
5. *For the current reporting week, please	describe the availability of COVID-19 vaccine(s) for your facil
5.1 Is your facility enrolled as a COVID-1	9 vaccination provider?
5.2. Did your facility have a sufficient sup	oply of COVID-19 vaccine(s) to offer all residents the opportun
6.3 Did your facility have other arranged	mante sufficient to offer all cardiante the opportunity to receive
515. Dru your racincy nave ourier arranger	memus summument to other all residents the opportunity to receive
other arrangements include referring to th	The second se



#### Official Weekly Summary Form

Facility ID: 20568	Vaccination type: COVID19	Facility CCN :
*Week of Data Collection: 03/28/2022 - 04	/03/2022 *Date Last Modified: 04/04/2022	4:38PM
1. *Number of residents staying in this facility	for at least 1 day during the week of data collect	tion 5
2. Cumulative number of residents in Quest	ion #1 who have received COVID-19 vaccine(s) a	at this facility or elsew
2.1 *Only dose 1 of Pfizer-BioNTech COVID	>19 vaccine	0
2.2 •Dose 1 and dose 2 of Pfizer-BioNTech	COVID-19 vaccine	
2.3 •Only dose 1 of Moderna COVID-19 va	accine	1
2.4 •Dose 1 and dose 2 of Moderna COVID	0-19 vaccine	1
2.5 *Dose of Janssen COVID-19 vaccine		1
2.99 *Complete COVID-19 vaccination ser	ries: unspecified manufacturer	0
Any completed COVID-19 vaccine series		3
<ol><li>Cumulative number of residents in Quest</li></ol>	ion #1 with other conditions:	
3.1 *Medical contraindication to COVID-19	vaccine	0
3.2. Offered but declined COVID-19 vaccin	ne	1
3.3. • Unknown COVID-19 vaccination statu	5	0
<ol> <li>Cumulative number of residents in Quest</li> </ol>	tion #2 who have received an additional dose or l	booster of COVID-19 y
1 4.1 • Additional dose or booster of Pfizer	r-BioNTech COVID-19 vaccine	0
4.2 Additional dose or booster of Mode	and COVID-19 vaccine	2
1 4.3 • Additional dose or booster of Janss	en COVID-19 vaccine	0
1 4.4 • Additional dose or booster of unsp	ecified manufacturer	0
<ul> <li>Any Additional dose or booster of COVID</li> </ul>	-19 vaccine series	2
Please contact your state or local health	COVID-19 iusrisdiction if there is insufficient supply of COV	9 Vaccine(s) Supply VID-19 vaccine availat)-19 vaccine provider.







## Are the Event-Level COVID-19 Vaccination Forms required?

Upload CSV..

No. The Event-Level COVID-19 Vaccination Forms are an optional tool that can be used to report data to the main weekly HCP and Resident vaccination modules.

NHSN Home		1			
Alerts		Vaccination Summary Da	ta		
Dashboard					
Reporting Plan		Click a cell to begin entering d	ata for the week which counts are reported	1.	
Resident		Reporting of medical events or health proble	ms that occur after vaccination (possible side effects) is	s encouraged, even if you are not sure they are the result of vaccination	, at <u>http</u> r
Event					
Summary Data			28 March 2022 - 08 May 2022	Record Complete Record Incomplete	
OVID-19		Dashboard	Vaccination Calendar		
accination Summary		Pathway Data Reporting	022 (Monday) - 04/03/2022 (Sunday) /ID-19: HCW		
mport/Export		POC Test Result Reporting	/ID-19: Residents		
		COVID-19 Vaccination - HCW			
and veys	-	COVID-19 Vaccination - Residents	022 (Monday) - 04/10/2022 (Sunday)		
Marysis		Event-Level COVID-19 Vaccination Form-	/ID-19: HCW /ID-19: Residents		
Jsers	•	HCW		you can still report data	
acility	•	Event-Level COVID-19 Vaccination Form - Residents		here with the COVID-19	
Group			022 (Monday) - 04/17/2022 (Sunday)	vaccination summary	
ogout				form!	
			~~~~~~~~	~~~~~~~~~~	
			05/02/2022 (Monday) - 05/08/2022 (Sunday)		
			You can still report		
			data with CSV		4
			upload of the		

vaccination summary form!



### What are the advantages of this optional tool?

- Simplifies reporting of summary data
  - Users who elect to use the Event-Level Vaccination forms will no longer need to manually calculate and enter totals in the summary forms!
  - The NHSN application automatically calculates and displays the weekly totals, including classifying individuals as up to date (new question on weekly summary forms)
  - Users simply update the person-level data and use the reporting summary to review the totals and submit their weekly data
- Captures changes in individuals' vaccination status over time
- Allows facilities to document vaccination information at the person-level
- Allows users to record religious exemptions



## Why can't I see the Event-Level COVID-19 Vaccination forms when I log in to NHSN?

- If you do not see the event-level vaccination forms under the COVID-19 tab, you may not have SAMS Level 3 Access.
- SAMS Level 3 Access is required to use the optional Event Level COVID-19 Vaccination Forms.
- To request Level 3 access, please contact the SAMS Help Desk between the hours of 8:00 AM and 8:00 PM EST Monday through Friday (except U.S. Federal holidays) at the following: 877-681-2901; E-mail: samshelp@cdc.gov.





Data for Example Only

### Why can't I see the Event – Level COVID-19 Vaccination forms when I log in to NHSN?

Example of a level 1 users log in view:





### Is reporting completed automatically based on the data entered the Event-Level COVID-19 Vaccination Forms or do I still have to submit the weekly vaccination reporting?

No. Facilities must report each week by clicking the "View and Reporting Summary & Submit" button, selecting the week you want to submit data for, and clicking "Save & Submit Data".

CDC Cent CDC 2	Centers for Disease Control and Prevention CDC 24/7: Saving Lives, Protecting People™												NHSN NATIONAL HEALTHCARE SAFETY NETWORK	
NHSN - Nati	NHSN - National Healthcare Safety Network												Joy LTC Facility	
NHSN Home Alerts		<b>C</b>	Event-Level CO	VID-19 Vac	cination Forr	n - Residents								
Dashboard Reporting Plan	+	4	Add Row View Reporting Summary & Submit Upload CSV Export CSV Export SQL											
Resident	•	Requ	uired fields marked with 📍 Conc	ditionally required fiel	ds marked with 👫 🕯								9	
Event			Resident identifier *	Resident Admit Date *	Resident Discharge Date	Resident First Name *	Resident Last Name *	Dose 1 vaccination date **	Dose 1 vaccine manufacturer name **	Dose 2 vaccination date **	Dose 2 vaccine manufacturer name **	Is vaccination series complete?	Medical I contraindication	
Summary Data		+												
COVID-19		+												
Vaccination Summar	У	+											-	
Import/Export		+												
Surveys		+++++++++++++++++++++++++++++++++++++++											_	
Analysis	~													



### How far back can I report event-level data?

- The event-level COVID-19 Vaccination Form for LTC residents and staff can be used to report data beginning with the week of March 28, 2022 – April 3, 2022 and forward.
- Note: if you use the event-level form to enter data and click save and submit, it will overwrite data that were previously entered via the summary form and vice versa.
- Reminder: only use this tool to submit for weeks you have COMPLETE person-level data for

4/25/2022	
3/28/2022	
4/4/2022	
4/11/2022	
4/18/2022	
4/25/2022	ŀ
5/2/2022 (Changed since submitted using the Tracking Worksheet)	
5/9/2022 (Changed since submitted using the Tracking Worksheet)	
5/16/2022 (Changed since submitted using the Tracking Worksheet)	
5/23/2022 (Changed since submitted using the Tracking Worksheet)	

\*\*It's OK for person-level rows to remain green!\*\*



### What if I need to update a record I previously saved?

- Previously saved records can be updated directly in the NHSN event-level forms
- Click the cell that needs to be updated and enter the changes directly into the grid of the record.
- Be sure to click out of the cell(s) modified and then click "view reporting summary and submit" to share the new information for all weeks impacted by a change!





### How do I eliminate staff from the form who no longer work for us?

- Add an end date on their row.
- If there is an end date, that individual will not contribute to data for any weeks AFTER the end date.
- Tip: Sort the rows by end date (or discharge date for residents) so that all individuals with an end date will be in the bottom rows

+	Add Rov	w View Rep	orting Summary	& Subi	nit	^	Uplo	ad CS	V	^	Export CSV	Export SQL			
Req	Required fields marked with * Conditionally required fields marked with **														
	Unique Li	HCP Identifier (DOB, icense #, etc.) *	HCP Start of Employment Date <b>*</b>	HC Emplo	CP End o oyment	of Date			НСР	First N	lame *	HCP L	ast Name <b>*</b>	HCP Category *	Dose 1 vaccination date **
+	1		04/06/2016	1			Bob					Smith		Employees (staff o	04/06/2022
				0	Apr		<b>~</b>   20	22	~	0					
				Su	Mo	Tu	We	Th	Fr	Sa					
										2					
				3	4	5	6	7	4	9					
				10	11	12	13	14	15	16					
				17	18	19	20	21	22	23					
	_			24	25	26	27	28	29	30					



### Healthcare Personnel (HCP): How to account for leave?

- If HCP goes on leave and returns to work in 2 weeks (14 days) or less
  - Nothing on their row needs to be changed
  - Their information can continue to be maintained on the original row
- If HCP goes on leave for longer than 2 weeks (14 days) and returns to work after more than 2 weeks
  - You should enter an end date on the day they begin leave
  - When they return to work, you should duplicate their row (using the + button next to their row) and enter a new start date on their new row. The new start date on the new row is the day they return to work
- <u>Note</u>: This is consistent with our guidance for the weekly summary forms that says to continue including HCP on temporary leave (2 weeks or less) and to exclude HCP if their leave is longer than 2 weeks.



## **Residents: How to account for residents being discharged and later re-admitted?**

- If resident is discharged or leaves the facility for any reason, and then returns or is re-admitted within 1 week (7 days) or less:
  - Nothing on their row needs to be changed
  - Their information can continue to be maintained on the original row
- If resident is discharged or leaves the facility for any reason for longer than 1 week (7 days), and returns or is re-admitted after more than 1 week:
  - You should enter a discharge date on the day they were discharged or left
  - When they return or are re-admitted, you should duplicate their row (using the + button next to their row) and enter a new admission date on their new row.
- <u>Note</u>: This is consistent with our guidance for the weekly summary forms that says to count all residents occupying a bed at this facility for at least 1 day (at least 24 hours) during the week of data collection.



## What if a resident is discharged and then later re-admitted<sup>*Data for Example Only*</sup> (after more than 1 week)?

- 1. Enter the discharge date when they are discharged (to home, hospital, or elsewhere
- 2. When they are re-admitted, find the resident in the table
- Click the + button to duplicate the row
- 4. In the new row, add the new admission date
- 5. Ensure the vaccination information is up to date and click save row.

tc	Resid	ent identifier *	Resident Admit Date *	t Admit Resident D te * Dat		Resident Admit Resident D Date * Dat		Resident Admit Date * Date		Discharge Resident First Name *		Resident Last Name *			Dose 1 vaccination date <b>* *</b>		Dose 1 vaccine manufacturer name **	
	DGGFD	F	05/22/2022	4	E	Bob		Jones			05/04/	2021	Pfizer-E	BioNTech COVID				
٢e								1										
	Save Row 5. Cancel																	
,	Required	fields marked with *	Conditionally req	uired fields n	narked with 🔺	ŧ.												
e	Duplicate Row	Resident identi	fier * Resi	dent Admit Date *	Resident Dis Date	scharge e	Resident First Name *			Resident Last Name *		Dose 1 va date	ccination	Dose 1 vaccine manu name **				
	+	434536	01/01	l/2022		F	Res1		ResLast1			02/06/2	022	Moderna COVID				
	+	543TGRG	03/08	3/2022	05/26/202	22 f	gdfg		fgdg			05/13/2	021	Pfizer-BioNTech				
	+	DFDG	02/10	)/2022		d	lgfd		fdgfg			05/01/2	022	Janssen COVID-:				
	<b>B</b> +.	DGGFDF	04/05	5/2022	05/02/20	22 E	3ob		Jones	2		05/04/2	021	Pfizer-BioNTech				
N					-	L.				Ζ.								
IC	Duplica leaves t When t a new a the faci date, w before	te row. Use this f the facility for any hey return, dupli- dmit date, which lity. On their prio hich is the last da they left.	feature if the re y reason for >1 cate their row, is the day they or row, enter a c y they were in	esident week. and enter return to lischarge the facility														



### Leave/Discharge Guidance Summary

	Healthcare Personnel	Residents
Include on same row if:	Returns to work within 2 weeks (14 days) If you entered an end date and they returned within 2 weeks, simply remove the end date and re-save the row.	Re-admitted within <b>1 week (7 days)</b> If you entered a discharge date and they returned within 1 week, simply remove the discharge date and re-save the row.
Add end date and create new row (using + button to duplicate row) if:	Returns to work after more than 2 weeks (14 days) New start date must be more than 2 weeks later than prior row's end date	Re-admitted after more than 1 week (7 days) New admission date must be more than 1 week later than prior row's discharge date



Data for Example Only

### If I enter incorrect data by mistake and click save, can the row be deleted?

- No. Once data are entered and saved, the row cannot be deleted
- Data can be updated after the row is saved
- We recommend that you:
  - Edit/repurpose the row, or
  - Change discharge date/ end date to a date before event-level forms can be used to submit data (before 3/28/2022)
    - You should change the identifier, and add a note in the comments



#### Data for Example Only

### Am I supposed to be reporting vaccine data only on HCW who worked in the last week?

 You should report vaccine data on all HCP who are eligible to work in the facility at least once per week; these are the people who "regularly" work in the facility on a weekly basis.

57.149 Instructions for Completion of the Weekly Healthcare Personnel Vaccination Summary Form Non-LTCF HCP (cdc.gov) NHSN NATIONAL HEALTHCARE SAFETY NETWORK

February 2022

Instructions for Completion of the Weekly Healthcare Personnel COVID-19 Vaccination Cumulative Summary (57.219, REV 7)

This form is used to collect information on weekly COVID-19 vaccination counts among healthcare personnel (HCP) working at healthcare facilities.

Question #1 (Denominator) Number of HCP that were eligible to have worked at this healthcare facility for at least 1 day during the week of data collection HCP are defined as those who were eligible to have worked at this healthcare facility for at least 1 day during the week of data collection, regardless of clinical responsibility or patient contact [defined by CMS as individuals who work in the facility on a regular (weekly) basis].

- HCP eligible to have worked include employees (staff on facility payroll), licensed independent practitioners (physicians, advanced practice nurses, & physician assistants), adult students/trainees & volunteers, and other contract personnel who are scheduled to work in the facility at least one day every week. Working any part of a day is considered as working 1 day. Include HCP even if they are on temporary leave during the week of data collection. Temporary leave is defined as less than or equal to 2 weeks in duration.
  - Examples of temporary leave may include sick leave or vacation. In instances where temporary leave extends past 2 weeks, the healthcare worker should not be included in question #1 for the current week of data collection.
- Include persons who worked full-time and part-time.
- If HCP were eligible to have worked in two or more facilities, each facility should include such personnel in their denominator. Count HCP as individuals rather than full-time equivalents.

Data sources may include payroll or attendance records. Each
 person should be counted only once in the denominator.

Instructions for Completion

 The denominator categories are mutually exclusive. The numerator data are to be reported separately for each of the denominator categories.

Note that those not yet eligible to receive COVID-19 vaccination due to age should be excluded from this count.



### Does the resident identifier/ staff identifier need to be the same one that I use for the Point of Care (POC) testing results form?

- Yes, we encourage you to use the same identifier. We plan to link the two systems in NHSN in a future release.
- Note: Each individual should have a UNIQUE resident identifier (or staff identifier)
  - Choose something that is truly UNIQUE to the individual
  - For example, do NOT use the room number because someone else could occupy that room and have the same room number in the future if they are discharged or moved to another room
  - One option would be using a combination of initials, birthday, and room number. Ex: someone named Jane Test, born on 1/5/1980, in room 201 would have a resident identifier of JT01051980201



### Where do I enter a religious exemption?

- Count these individuals as declined to receive vaccination
- The Event-Level COVID-19 Vaccination form includes a field where you may provide a reason for declination, including religious exemption.





### Do I submit every time I add data or just weekly?

- You should review data and submit for all weeks affected by updated or newly entered data at least once per week.
- Please note that if you do not click "View Reporting Summary & Submit", these data will not be shared to the weekly COVID-19 vaccination modules.



## Can I sort the columns on this form? I find it helpful to be able to sort by last name or by HCP category.

 Yes! Click any column to sort in ascending order. Click the same column again to sort in descending order.

+	Add Row View Rep	porting Summary	& Submit	Upload CSV × Export CSV	<ul> <li>Export SQL</li> </ul>		
Requ	ired fields marked with * Cond Resident identifier *	itionally required field Resident Admit Date <b>*</b>	ds marked with ** Resident Discharge Date	Resident First Name *	Resident Last Name * 🗢	Dose 1 vaccination date <b>* *</b>	Dose 1 vaccine manur name **
+	ABCD	04/17/2021		TEST	CASE1	02/10/2022	Moderna COVID
+	NYCS	04/05/2021		TEST	ressurname	03/04/2022	Janssen COVID-1
+	RTS	02/01/2022	02/25/2022	Feb	Doe	02/02/2022	Pfizer-BioNTech
+	RTS	04/01/2022		Feb	Doe	02/02/2022	Pfizer-BioNTech
+	ABCDE	02/01/2022		Renolyds	John	02/15/2022	Pfizer-BioNTech
+	FGHIJ	01/01/2022	03/01/2022	Adams	John-Quincy	02/01/2022	Unspecified manu
+	1776	02/01/2005	01/09/2022	Angelica	Schuyler	02/20/2022	Janssen COVID-1
+	1776	02/15/2022		Angelica	Schuyler	02/20/2022	Janssen COVID-1
+	2	04/04/2018		Bob	Smith	04/04/2022	Pfizer-BioNTech



# I currently use the optional Excel data tracking workbook. Can I transfer this data to the Event-Level COVID-19 Vaccination form?

- The optional Excel data tracking worksheets (DTW) are being retired
- During the early transition phase, we provided one-time instructions on how to upload the DTW to the Event-Level Vaccination Form
- You should no longer transfer data from the Excel DTW to the Event-Level COVID-19 Vaccination form beginning with the week of 5/30-6/5.
  - The Excel DTW is not being updated and does not have columns for 2<sup>nd</sup> and 3<sup>rd</sup> booster, or additional vs. booster dose type.
- You should either directly enter the data in the NHSN event-level form or use our CSV templates



### How can I upload data via CSV?

#### CSV Data Import

.CSV templates for Event Level COVID-19 Vaccination Forms for LTCF Residents and HCP

.CSV Files for Event Level COVID-19 Vaccination Forms	Event-Level COVID-19 Vaccination Form - Residents								
<ul> <li>.CSV File Template for LTCF HCP 🖾 [CSV – 1 KB] – April 2022</li> </ul>									
• Example .CSV File for LTCF HCP 🖾 [CSV – 1 KB] – April 2022	Add Row View Reporting Summary & Submit     View Report CSV     Add Row     View Report CSV								
<ul> <li><u>.CSV File Template for LTCF Residents</u> [CSV – 1 KB] – April 2022</li> </ul>	Delete       Duplicate Row       Resident identifier *       Resident Admit Date *       Resident Discharge Date       Resident First Nan								
<ul> <li>Example .CSV File for LTCF Residents I [CSV – 1 KB] – April 2022</li> </ul>	+ 434536 01/01/2022 Res1								

- You can upload data using our CSV templates for event-level data
- Please ensure your data matches the formats and values in the template
- When you finish adding data to the CSV file, save it, then click Upload CSV
- CSV upload will overwrite records with the same identifier and start date



## What if I have no changes in my data since the previous week?

If during a reporting week, there are no new changes, still be sure you review data and submit data at least once per week.

#### View Reporting Summary & Submit...

Healthcare Personnel COVID-19 Vaccinat	ion Cumulative Summary for Long-Term	Care Facilities						
TRACKING WORKSHEET								
Facility ID#:	30074							
Vaccination type:	COVID19	COVID19						
Week of data collection first day (Monday):	3/28/2022		~					
Week of data collection last day (Sunday):	3/28/2022							
Cumulative Vacci	Cumulative Vaccir 4/4/2022 (Changed since submitted using							
	4/11/2022 (Never submitted using the 1	Fracking Worksheet		Employee				
		All Core HCP	All HCP	Employees (s facility pay				
1. *Number of HCP that were eligible to ha	ave worked at this healthcare facility for							



## For CSV upload and direct data entry, can I list more than one date in a cell?

- No, you can't list more than one date in an individual cell.
- List the **earliest** date that an event occurred.
- For example, if a resident declined vaccination on 2/1/2022 and again on 3/1/2022, you should enter a declined date of 2/1/2022, and you do not need to enter or update their data on 3/1/2022 because their status has not
- changed.







Data for Example Only

### Resources



### **Event-level Resources**

- <u>Event-Level COVID-19 Vaccination</u> form office hours and FAQ training <u>slides</u>
- <u>Event-Level COVID-19 Vaccination</u> form training slides
- Event-Level COVID-19 Vaccination form CSV file layout <u>https://www.cdc.gov/nhsn/pdfs/ltc/</u> <u>covidvax/c19-event-layout-508.pdf</u>
- A how to guide: <u>https://www.cdc.gov/nhsn/pdfs/ltc/</u> <u>covidvax/event-qrg-508.pdf</u>

#### NATIONAL HEALTHCARE

#### Event-Level COVID-19 Vaccination Forms: A Step-by-step Guide

#### Table of Contents

Facilities will continue to submit cumulative weekly COVID-19 Vaccination data to the <u>Weekly COVID-19 Vaccination</u> <u>Modules</u>. Data can be reported to these modules in three ways:

 Directly into the data entry screens of the COVID-19 Vaccination Modules
 through .CSV upload into the Weekly COVID-19 Vaccination Modules
 As of March 28, 2022, facilities also have the option to use these event-level COVID-19 vaccination forms and select the "view reporting summary and submit" to submit these data to the Weekly Modules. The event-level forms are replacing the optional excel data tracking worksheets previously offered to facilities to assist with reporting to the Weekly COVID-19 Vaccination Modules.

This guide provides additional information on the third option listed above. The optional Event-Level COVID-19 Vaccination Form was developed to assist facilities with entering, logging, and tracking COVID-19 vaccine person-level data directly in NHSN. These data include counts of residents and HCP, or staff, who received any COVID-19 vaccine.

Purpose	2
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Upload historic data from Excel Event-Level Vaccination Form (Single Use)	8
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### **General Resources**

### Weekly HCP & Resident COVID-19 Vaccination | LTCF | NHSN | CDC

 Remember the definitions for event-level reporting are the same as those for summary level report. Please review the table of instructions for additional guidance.

#### Weekly HCP & Resident COVID-19 Vaccination

Long-term care facilities can track weekly COVID-19 vaccination data for residents and healthcare personnel (HCP) through NHSN.

# Protocol Weekly COVID-19 Vaccination Protocol for Healthcare Personnel [PDF - 500 KB] - January 2022 Weekly COVID-19 Vaccination Protocol for Residents [PDF - 400 KB] - November 2021 Data Collection Forms and Instructions

All Data Collection Forms are Print-only

~~~~~

Weekly COVID-19 Vaccination Summary Form for Residents at LTCFs (57.218) P [PDF – 120 KB] – February 2022

• Table of Instructions P [PDF – 300 KB]

Weekly COVID-19 Vaccination Summary Form for Healthcare Personnel at LTCFs (57.219) [PDF – 150 KB] – February 2022

○ <u>Table of Instructions</u> [PDF – 350 KB]



### **Questions or Need Help?**

E-mail user support at: <a href="mailto:nhsn@cdc.gov">nhsn@cdc.gov</a>

### Please write '*Event-Level COVID-19* Vaccination Form ' in the subject line of the e-mail along with your facility type

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.





Data for Example Only

### **Additional Slides**



### Example: How to update a previously saved record

Scenario- After uploading a record for Resident ID NYCS and clicking "view reporting summary and submit" I realized I accidently selected Moderna for their dose one manufacturer name instead of Janssen





Save and Submit Data

Done

## Example: How to update a previously saved record for Example Only continued

- Scenario continued
  - Click the cell that needs to be updated and enter the changes directly into the grid of the record.





## Example: How to update a previously saved record for Example Only continued

- Scenario continued
  - Be sure to click out of the cell(s) modified and then click "view reporting summary and submit" to share the new information for all weeks impacted by a change!

| CDC 24/7: Saving Live  | ease Control and Prevention<br>s. Protecting People™                             |      |                        |           |  |  |                                 |  | NATIONAL HEALTH          |
|--|--|------|------------------------|-----------|--|--|---------------------------------|--|--------------------------|
| NHSN - National Heal   | thcare Safety Network  |      |                        |           |  |  |                                 |  | BUBENDR<br>Joy LTC Facil |
| NHSN Home<br>View Reporting Summary & Subm   | n  |      | M                      | 1         |  |  |                                 |  |                          |
| ID-19 Vaccination Cumulative Summ<br>CKING WORKSHEET<br>Ity ID#:<br>Ination type:  | ary for Long-Term Care Facility Residents<br>30074<br>COVID19                    |      |                        |           |  |  |                                 |  |                          |
| k of data collection first day<br>hday):<br>k of data collection last day<br>day): | 3/28/2022 (Changed since submitted using the Tracking Worksheet) ➤<br>04/03/2022 |      |                        | ccination | n Dose 1 vaccine manufacturer Dose 2 vaccinat<br>name ** date ** | ion Dose 2 vaccine manufacturer<br>name ** | Is vaccination series complete? | Medical<br>contraindication<br>date ** |                          |
|  | Cumulative Vaccination Coverage  |      |                        | 022       | Janssen COVID-19 vacci   |  | Yes                             |  |                          |
| umber of residents staving in this fac   | lity for at least 1 day during the week of data collection                       |      | * All Patients (Total) | 022       | Janssen COVID-19 vacci   | Madama COVID 10,000                        | Yes                             |  |                          |
| umulative number of residents in Ou  | estion #1 who have received COVID-19 vaccine(s) at this facility or elsewhe      | ere: |                        | 022       | Percer BioNTech COVID  | Moderna COVID-19 vao                       | No                              |  |                          |
| . Only dose 1 of Pfizer-BioNTech CO  | VID-19 vaccine   |      | 1                      | 022       | Homesified manufacture 02/22/2022                                | Lingung the dimensional structures         | Vec                             |  |                          |
| Dose 1 and dose 2 of Pfizer-BioNTe   | ch COVID-19 vaccine  |      | 1                      | 022       | lansson COVID-19 vassi   | chied manufacture                          | Vec                             |  |                          |
| Only dose 1 of Moderna COVID-19  | . Only dose 1 of Moderna COVID-19 vaccine 0                                      |      |                        |           |  | Diana DiaNitata COMD                       | res                             |  |                          |
| Dose 1 and dose 2 of Moderna COV   | ID-19 vaccine  |      | 1                      | 022       | Prizer-BION Tech COVID-02/16/2022                                | Prizer-BION Tech COVID                     | Yes                             |  | _                        |
| 9 Complete COVID-19 vac  | ariae: Linenacified Manufacturar   |      | 2                      | 022       | Pfizer-BioNTech COVID-02/16/2022                                 | Pfizer-BioNTech COVID                      | Yes                             |  |                          |
| completed primary COVID-19 vacci   | ine series   |      | 4                      | 1         |  |  |                                 |  |                          |
| imulative number of residents in Que   | stion #1 with other conditions:  |      |                        |           |  |  |                                 |  |                          |



#### Data for Example Only

### What if someone's vaccination status changes over time?

| 🗿 Event-             | -Level COVID-1              | 9 Vaccinatio             | on Form - Re               | sidents | 5                              |          |                      |   |    |                                  |              |                    |
|----------------------|-----------------------------|--------------------------|----------------------------|---------|--------------------------------|----------|----------------------|---|----|----------------------------------|--------------|--------------------|
| + Add Row            | View Reporting So           | ummary & Submi           | t ^ Upload                 | ICSV    | <ul> <li>Export CSV</li> </ul> | port SQL | ĮL                   | / |    | 1                                |              |                    |
| Required fields mark | ked with * Conditionally re | quired fields marked v   | with **                    |         |                                |          |                      |   |    | Linknown COVID-                  |              | 0                  |
| Delete               | Resident identifier *       | Resident Admit<br>Date * | Resident Discharge<br>Date |         | Resident First Name *          |          | Resident Last Name * |   | on | 19 vaccination<br>status Date ** | dose date ** | Additior<br>manufa |
| - + TE               | EST6                        | 02/21/2022               |                            | TEST    |                                | CASE6    |                      |   |    | 02/21/2022                       |              |                    |
| •                    |                             |                          |                            |         |                                |          |                      | 1 | L  |                                  | )            | •                  |
|                      |                             |                          |                            |         |                                |          |                      |   |    |                                  | View         | 1 - 9 of 9         |

Resident was admitted on 2/21/2022, and vaccination status was unknown



### What if someone's vaccination status changes over time? (cont.)

| 🧐 Ev               | ent-Level COVID-:   | 19 Vaccinatio                   | on Form - Re               | sident        | S                     |                                |                      |    |                               |                   |  |                                    |        |
|--------------------|---|---------------------------------|----------------------------|---------------|-----------------------|--------------------------------|----------------------|----|-------------------------------|-------------------|--|------------------------------------|--------|
| Add Repaired field | ow View Reporting States of the second seco | Summary & Submi                 | it <u> </u>                | ICSV          | • Export CSV          | <ul> <li>Export SQL</li> </ul> |                      |    |                               | 2                 | 1  | <b>\</b>                           | 0      |
| Delete             | Resident identifier *   | Resident Admit<br>Date <b>*</b> | Resident Discharge<br>Date |               | Resident First Name * |                                | Resident Last Name * | D¢ | Declinatio<br>date <b>*</b> * | Declination reaso | Unknown COVID-<br>19 vaccination<br>status Date <b>* *</b> | Additional/booster<br>dose date ** | A<br>n |
|                    | TEST5<br>TEST6  | 01/05/2022<br>02/21/2022        | 01/11/2022                 | TEST1<br>TEST |                       | TEST2<br>CASE6                 |                      | 01 | 02/25/2022                    | Other             | 02/21/2022   |                                    |        |
| Note: CDEE         | NPOW - modified data th   | at has not yet have             | a submitted                |               |                       |                                |                      |    |                               |                   |  | View 1 - 9                         | of 9   |
| NOTE: GREE         | IN KOVV = MODIFIED DATA th  | at has not yet beer             | n submitted.               |               |                       |                                |                      |    |                               |                   |  |                                    |        |

- You learn that the resident is unvaccinated and offer vaccination. They decline on 2/25/2022.
  - Add this information to the resident's existing row
  - Do NOT delete the 2/21/2022 unknown status date



### What if someone's vaccination status changes over time? continued

| 🧐 Ev          | ent-Level COVID-1                 | 9 Vaccinatio                    | on Form - Re               | sidents               |                                |                    |                               |  |     |                                |                    |  |    |
|---------------|-----------------------------------|---------------------------------|----------------------------|-----------------------|--------------------------------|--------------------|-------------------------------|--|-----|--------------------------------|--------------------|--|----|
| + Add R       | ow View Reporting S               | ummary & Submi                  | t ^ Upload                 | CSV × Export CSV      | <ul> <li>Export SQL</li> </ul> |                    |                               | 3<br>kport SQL                           |     |                                | 2                  | 1  |    |
| Required fiel | ds marked with * Conditionally re | quired fields marked v          | with **                    |                       |                                |                    | (                             |  |     |                                |                    |  |    |
| Delete        | Resident identifier *             | Resident Admit<br>Date <b>*</b> | Resident Discharge<br>Date | Resident First Name * | Res                            | sident Last Name * | Dose 1 vaccination<br>date ** | Dose 1 vaccine manufacturer I<br>name ** | Da. | Declination<br>date <b>* *</b> | Declination reason | Unknown COVID-<br>19 vaccination<br>status Date <b>* *</b> | Aı |
|               | + TEST6                           | 02/21/2022                      |                            | TEST                  | CASE6                          |                    | 03/22/2022                    | Janssen COVID-19 vacci                   | 1   | 02/25/2022                     | Other              | 02/21/2022   | K  |
| Note: GRE     | EN ROW = modified data tha        | it has not yet beer             | submitted.                 |                       |                                |                    |                               |  |     |                                |                    | $\sim$   |    |

- The resident decides to get vaccinated on 3/22/2022. Add this information to existing row.
- The resident now has 3 statuses recorded:
  - Unknown from 2/21/2022 2/24/2022
  - Declined from 2/25/2022 3/21/2022
  - Vaccinated with Janssen beginning on 3/22/2022

