# **COVID-19 Vaccination Quick Reference Guides in Response** to Quarterly Combined Data Quality Checks

# February 2023

Table of Contents	
Overview	3
1. Identifying if COVID-19 Vaccination Data were Reported:	4
Purpose	4
Option 1. Identifying missing data through review of data collection form	4
Option 2. Identifying Missing Data through Line List Reports	5
Modify and Run a Line List Report	5
Additional Resources:	6
2. COVID-19 Vaccination Reporting for Individuals with Medical Contraindications:	7
Purpose	7
Overview of Question 3.1	7
Resolving Data Quality Concern for Question 3.1	8
Additional Resources:	8
3. Reporting COVID-19 Vaccinations Among Individuals Declining COVID-19 Vaccination:	9
Purpose	9
Overview of Question 3.2	9
Resolving Data Quality Concern for Question 3.2	10
Additional Resources:	10
4. Reporting COVID-19 Vaccination Reporting for Individuals with Unknown COVID-19 Status:	11
Purpose	11
Overview of Question 3.3	11
Resolving Data Concern for Question 3.3	12
Additional Resources:	12
5. Reporting Decrease in COVID-19 Vaccinations:	13
Overview of Question 1 and Question 2	13
Additional Resources:	14



1

6. Reporting Up To Date COVID-19 Vaccination Status	
Purpose	15
Overview of Question 4 and Question 5	15
Additional Resources:	16



# Overview

This document contains reference guides to aid users in reviewing their vaccination data reported to NHSN in response to monthly Data Quality (DQ) e-mails.

DQ Check #	DQ Description	Action Requested	Reference Guide
1	Facility did not report any data for reporting weeks in January 2023.	Please review and report data for one or more weeks of January 2023.	Identifying if COVID-19 Vaccination Data were Reported
2	High percentage of individuals having a medical contraindication to COVID-19 vaccine (Question 3.1)	Please confirm that the number of individuals have a medical contraindication is correct. We suggest checking the reported number residents, HCP, or patients (Question 1) and the reported number of residents HCP or patients who have a medical contraindication (Question 3.1).	COVID-19 Vaccination Reporting for individuals with Medical Contraindications
3	High percentage of individuals declining COVID-19 vaccine (Question 3.2)	Please confirm that the number of individuals who declined COVID-19 vaccination is correct. We suggest checking the reported number of residents, HCP, or patients (Question 1) and the reported number of residents, HCP, or patients who declined vaccination (Question 3.2).	Reporting COVID- 19 Vaccinations among Individuals that have Declined COVID- 19 Vaccination
4	High percentage of individuals with unknown COVID-19 vaccination status (Question 3.3)	Please confirm that the number of residents, HCP, or patients who have unknown COVID-19 vaccination status is correct. We suggest checking the reported number of residents, HCP, or patients (Question 1) and the reported number of residents, HCP, or patients with unknown vaccination status (Question 3.3).	COVID-19 Vaccination reporting Unknown COVID- 19 Vaccination Status
5	Number of individuals (or vaccination percentages) increased or decreased by at least 30% compared to the prior week	Please confirm that the number of residents, HCP, or patients reported in Question 1 is correct.	Reporting Decreases in COVID-19 Vaccinations
6	Facility reporting the number of individuals with up to date vaccination greater than 0 (Question 5) and the number of additional/booster doses reported equals 0 (Question 4)	Please confirm that the number of individuals who have ever received any additional/booster doses are correct (Question 4).	Reporting Up To Date COVID-19 Vaccination Status



# 1. Identifying if COVID-19 Vaccination Data were Reported:

#### **Purpose**

NHSN allows for and encourages weekly submission of COVID-19 vaccination data via the Weekly COVID-19 Vaccination Module. The NHSN team conducts outreach to facilities that have not reported any data for any surveillance week during a reporting month. The information below will help facilities review data to identify if data were reported for specific reporting week(s). After reviewing your data using one of the three options outlined below be sure to update and save the data in the NHSN application as needed. This may include entering data for prior reporting weeks.

## Option 1. Identifying missing data through review of data collection form

First, click on the Vaccination Summary tab on the left-hand navigation panel on the NHSN home screen. Second, select COVID-19 Weekly Vaccination Summary.



Next, use the arrow buttons to locate a week to review. Lastly, click on a week to review the data collection form. Please note that completed records are indicated in green. Incomplete records are indicated in light yellow.



	🧒 covii	D-19 Weekly Vaccination Summa	ary Data		
	Reporting of med	ell to begin entering data for the weel dical events or health problems that occur after v <u>ttps://vaers.hhs.gov/reportevent.html.</u>			are not sure they are the result of
	3 ∢ ►	26 December 2022 - 05 February 2023	Record Complete	Record Incomplete	
4					
	12/26/2022 (M COVID-19	1onday) - 01/01/2023 (Sunday)			
		vac			
		1onday) - 01/08/2023 (Sunday)			
	COVID-19	Vac			

# **Option 2. Identifying Missing Data through Line List Reports**

Line List reports in NHSN describe in detail data reported into NHSN. NHSN has two options for Healthcare Personnel (HCP) COVID-19 Vaccination line list reports.

#### • All COVID-19 Vaccination Cumulative Summary Data

This report includes summary level information not dependent on vaccine manufacturer

#### • All COVID-19 Vaccination Cumulative Detail Data

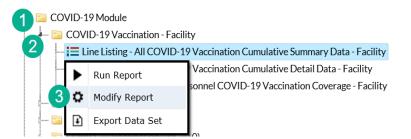
This report includes manufacturer-dependent vaccine and dose specific counts. Vaccine names ending in the number "1" (e.g., MODERNA1) represent counts for the first dose of a 2-dose vaccination series.

Both reports can be utilized to identify missing data in NHSN. For this example, we will modify the "Line Listing – All COVID-19 Vaccination Cumulative Summary Data" to confirm if data were submitted for any surveillance week during January 2023.

#### Modify and Run a Line List Report

Once you have generated your data set, you are ready to produce a line list.

 On the "Analysis Reports" screen, click on the "COVID-19 Module" folder.
 Select the "COVID-19 Vaccination – Facility" Subfolder.
 Click on "Line Listing – All COVID-19 Vaccination Cumulative Summary Data - Facility" and select "Modify Report"



4. Click on the "Time Period" tab. Then, select the "survWeekStart" or "Week of data collection, start date" variable from the Date Variable options. Next, enter a survey start week that includes January 1, 2023. The end period should include the start date of a survey week that includes January 31, 2023.



5

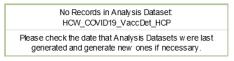
Title/Format	Time Period	Filters	Display Variables	Sort Variables	<b>Display Options</b>
Time Period:					

Date Variable	Beginning	Ending	
survWeekStart	▶ 12/26/2022	01/30/2023	Clear Time Period
Enter Date variable/	ı		

5. Click "Run" If data are not present the "No Record in Analysis Dataset HCW\_COVID19\_VaccDet\_HCP" message will appear in the report output screen. If no data are present, please review your records and ensure data are reported as intended.

#### National Healthcare Safety Network

Line Listing - All COVID-19 Vaccination Cumulative Detail Data - Healthcare Personnel As of: November 19, 2021 at 1:56 PM



#### Additional Resources:

- Weekly HCP COVID-19 Vaccination
   <a href="https://www.cdc.gov/nhsn/hps/weekly-covid-vac/index.html">https://www.cdc.gov/nhsn/hps/weekly-covid-vac/index.html</a>
- FAQs on Reporting COVID-19 Vaccination Data https://www.cdc.gov/nhsn/hps/weekly-covid-vac/faqs.html
- Healthcare Personnel Safety Component (HPS) <u>https://www.cdc.gov/nhsn/hps/index.html</u>

•Facilities can contact CMS with questions about reporting requirements:

- Inpatient quality reporting program (hospitals): <u>iqr@hsag.com</u>
- PPS-exempt cancer hospital quality reporting program: <u>QRFormsSubmission@hsag.com</u>
- Inpatient psychiatric facility quality reporting program: <u>IPFQualityReporting@hsag.com</u>
- Inpatient rehabilitation facility quality reporting program: IRF.questions@cms.hhs.gov
- Long-term acute care quality reporting program: <u>LTCHQualityQuestions@cms.hhs.gov</u>
- Long-term care facilities (including nursing facilities and skilled nursing facilities):
  - For CMS enforcement-related questions, please email: <u>DNH\_Enforcement@cms.hhs.gov</u>.
  - For other questions or concerns regarding CMS memo QSO-20-29-NH, please email: <u>DNH\_TriageTeam@cms.hhs.gov</u>.
  - For questions about SNF QRP, email ccsq-pacqrp-helpdesk@acumenllc.com.



# **2. COVID-19 Vaccination Reporting for Individuals with Medical Contraindications:**

## **Purpose**

The NHSN Weekly COVID-19 Vaccination Modules allow facilities to enter weekly COVID-19 vaccination data for healthcare personnel (HCP), residents and/or patients. This quick reference guide will help facilities identify possible irregularities with Question 3.1.

## **Overview of Question 3.1**

Question 3.1 collects data on individuals reporting medical contraindications related to the COVID-19 vaccination.

**Please note**: For illustrative purposes we are using the LTCF Healthcare Personnel Form for this example; however, steps for review are similar across all Weekly COVID-19 Vaccination Modules.

#### LTCF Healthcare Personnel Form

COVID-19 Vaccine: HCW	COVID-19 Vaccine: Residents	5									
- Healthcare Personnel C	OVID-19 Cumulative Vaccination	Summary for Long-1	Ferm Care Facilities								
Date Created:											
*Facility ID:		*Vaccination type:		Facility CCN #: IUYIOOOOOO							
*Week of Data Collection	on: 01/02/2023 - 01/08/2023	*Date Last Modified	l:								
					Vaccination Coverage						
Note: Facilities submit V				ns on this form. As of March 28th, 2022 fa that individuals who are up to date with CC							button? to subm
									Personnel (HCP) C		
								Employee HCP		Non-Employee HCP	
						*All Core HCP (Total) <sup>a</sup>	*All HCP (Total) <sup>b</sup>	*Employees (staff on facility payroll) <sup>C</sup>	*Non- employee HCP (licensed independent practitioners) <sup>d</sup>	*Adult students/trainees/volunteers <sup>e</sup>	*Other contract personnel <sup>f</sup>
1. *Number of HCP tha	t were eligible to have worked at t	his healthcare facility	/ for at least 1 day duri	ng the week of data collection							
						*All Core HCP (Total) <sup>a</sup>	*All HCP (Total) <sup>b</sup>	*Employees (staff on facility payroll) <sup>C</sup>	*Non- employee HCP (licensed independent practitioners) <sup>d</sup>	*Adult students/trainees/volunteers <sup>e</sup>	*Other contract personnel <sup>f</sup>
2. * <u>Cumulative</u> number	of HCP in Question #1 who have rec	eived primary series C	OVID-19 vaccine(s) at t	nis facility or elsewhere since December 202	20:						
*2.1 Only 1 dose of a tv	vo-dose Primary COVID-19 vaccir	ne series									
*2.2 Any completed Pri	imary COVID-19 vaccine series			Question 3.1. The c	lata collect th	rough thi	s				
3. <b>* <u>Cumulative</u> numbe</b>	er of HCP in Question #1 with othe	r ç		question describe the individuals r medical contraindications related to 19 vaccination.				*Employees (staff on facility payroll) <sup>C</sup>	*Non- employee HCP (licensed independent practitioners) <sup>d</sup>	*Adult students/trainees/volunteers <sup>e</sup>	*Other contract personnel <sup>1</sup>
3.1 *Medical contraind	ication to COVID-19 vaccine										

#### **Required Action:**

If your facility receives an email indicating a report of a high percentage of healthcare personnel with Medical Contraindications, we ask that you confirm that the number and percent of individuals who reported a medical contraindication for COVID-19 vaccination status was correct. We suggest checking the reported number of healthcare personnel (Question 1) and the reported number of healthcare personnel with a medical contraindication (Question 3.1). It is possible that this value is correct.



# **Resolving Data Quality Concern for Question 3.1**

Review data reported for Question 1 and Question 3.1 on the form for the week(s) question. If you find data entered in error, please correct and resubmit these data.

COVID-19 Vaccine: HCW COVID-19 Vaccine: Residents							
$_{\sub}$ Healthcare Personnel COVID-19 Cumulative Vaccination Summary for Long-Term Care Faciliti	es						
Date Created:           *Facility ID:         14025           *Week of Data Collection:         01/08/2023           *Usek of Data Collection:         01/08/2023	Facility CCN #: IUYIOOOOOO						
	Cumulative Vaccination Coverage						
Note: Facilities submit Weekly COVID-19 Vaccination Cumulative Summary data by completing the q these data. Using the event-level form is recommended to e	uestions on this form. As of March 28th, 2022 facilities also have the option to nsure that individuals who are up to date with COVID-19 vaccination are cate						button? to subm
				Healthcare F	Personnel (HCP) C	ategories	
			Employee HCP		Non-Employee HCP		
Review the numbers in each of the healt personnel categories for question 1	★All Core HCP (Total) <sup>a</sup>	*All HCP (Total) <sup>b</sup>	*Employees (staff on facility payroll) <sup>c</sup>	*Non- employee HCP (licensed independent practitioners) <sup>d</sup>	*Adult students/trainees/volunteers <sup>e</sup>	*Other contract personnel <sup>1</sup>	
1. *Number of HCP that were eligible to have worked at this healthcare facility for at least 1 day	during the week of data collection						
		*All Core HCP (Total) <sup>a</sup>	*All HCP (Total) <sup>b</sup>	*Employees (staff on facility payroll) <sup>c</sup>	*Non- employee HCP (licensed independent practitioners) <sup>d</sup>	*Adult students/trainees/volunteers <sup>e</sup>	*Other contract personnel
2. * <u>Cumulative</u> number of HCP in Question #1 who have received primary series COVID-19 vaccine(s	) at this facility or elsewhere since December 2020:						
*2.1 Only 1 dose of a two-dose Primary COVID-19 vaccine series							
*2.2 Any completed Primary COVID-19 vaccine series							
	If the data are correct in questic the numbers in each of the healt			*Employees staff on facility payroll) <sup>c</sup>	*Non- employee HCP (licensed independent practitioners) <sup>d</sup>	*Adult students/trainees/volunteers <sup>e</sup>	*Other contract personnel <sup>1</sup>
3. * Cumulative number of HCP in Question #1 with other conditions:         2           3.1 *Medical contraindication to COVID-19 vaccine         2	categories for question	on 3.1					

## **Additional Resources:**

- Weekly HCP COVID-19 Vaccination https://www.cdc.gov/nhsn/hps/weekly-covid-vac/index.html
- FAQs on Reporting COVID-19 Vaccination Data https://www.cdc.gov/nhsn/hps/weekly-covid-vac/faqs.html
- Healthcare Personnel Safety Component (HPS) <u>https://www.cdc.gov/nhsn/hps/index.html</u>



# **3. Reporting COVID-19 Vaccinations Among Individuals** Declining COVID-19 Vaccination:

## **Purpose**

The NHSN Weekly COVID-19 Vaccination Modules allow facilities to enter weekly COVID-19 vaccination data for healthcare personnel (HCP), residents and/or patients. There are data quality flags built into the reporting forms that help identify possible irregularities in data. Additionally, the NHSN team conducts outreach to facilities with higher-than-expected values for certain data fields. This quick reference guide will help facilities review data to ensure accurate and complete reporting for Question 3.2.

## **Overview of Question 3.2**

Question 3.2 collects data on individuals who have declined COVID-19 vaccination.

**Please note**: For illustrative purposes, we are using the LTCF Healthcare Personnel form for this example; however, this question is asked across all weekly COVID-19 Vaccination Modules.

#### LTCF Healthcare Personnel Form

COVID-19 Vaccine: HCW COV	VID-19 Vaccine: Resident:	s									
Healthcare Personnel COVID-19	19 Cumulative Vaccination	n Summary for Long-T	erm Care Facilities								
Date Created: *Facility ID: 1402 *Week of Data Collection: 01/02		*Vaccination type: *Date Last Modified:	COVID19	Facility CCN #: IUYIOOOOOO	Cumulative Vaccination Coverage						
Note: Facilities submit Weekly CO	OVID-19 Vaccination Cum	ulative Summarv data b	v completing the auestion	is on this form. As of March 28th. 2022:	acilities also have the ontion to enter data using the event-	level COVID-19 vacci	nation form and se	lect the "view reporti	'ng summarv and su	bmit" button? to submit these data. (	Using the event-
· · · · ·		level form is	recommended to ensure t	that individuals who are up to date with	COVID-19 vaccination are categorized appropriately accor	ding to their vaccinat	ion dates. Learn mo	ore here: <u>link to QRC</u>	1		
								Healthcare F Employee HCP	Personnel (HCP) C	Non-Employee HCP	
						*All Core HCP (Total) <sup>a</sup>	★All HCP (Total) <sup>b</sup>	*Employees (staff on facility payroll) <sup>c</sup>	*Non- employee HCP (licensed independent practitioners) <sup>d</sup>	*Adult students/trainees/volunteers <sup>e</sup>	*Other contract personnel <sup>f</sup>
1. *Number of HCP that were el	eligible to have worked at t	his healthcare facility	for at least 1 day during	the week of data collection							
						*All Core HCP (Total) <sup>a</sup>	★All HCP (Total) <sup>b</sup>	*Employees (staff on facility payroll) <sup>c</sup>	*Non- employee HCP (licensed independent practitioners) <sup>d</sup>	*Adult students/trainees/volunteers <sup>e</sup>	*Other contract personnel <sup>f</sup>
2. * Cumulative number of HCP in	in Question #1 who have rec	eived primary series CC	OVID-19 vaccine(s) at this	facility or elsewhere since December 20	20:				. ,	1	
2.1 Only 1 dose of a two-dose F	Primary COVID-19 vaccir	ne series									
*2.2 Any completed Primary CC	OVID-19 vaccine series										
			this	Question 3.2. The data collected through this question describe individuals who			*Ali HCP (Total) <sup>b</sup>	*Employees (staff on facility payroll) <sup>c</sup>	*Non- employee HCP (licensed independent practitioners) <sup>d</sup>	*Adult students/trainees/volunteers <sup>e</sup>	*Other contract personnel <sup>f</sup>
3. * <u>Cumulative</u> number of HCP     3.1 *Medical contraindication to     3.2 *Offered but declined COVI     3.3 *Unknown COVID-19 vaccin	to COVID-19 vaccine ID-19 vaccine	er condit <sup>2</sup>	(	declined COV	ID-19 vaccination.	_					

#### **Required Action:**

9

If your facility receives an e-mail from NHSN indicating that a high percentage of individuals were reported to have declined COVID-19 vaccine, we ask that you review the data and confirm that the number and percentage of individuals who declined COVID-19 vaccination is correct. We suggest checking the reported number of individuals (Question 1) and the reported number of individuals who declined vaccination (Question 3.2). However, it is possible that this value is correct.



# **Resolving Data Quality Concern for Question 3.2**

Review data reported for Question 1 and Question 3.2 on the Form for the week(s) in question. If you find data entered in error, please correct, and resubmit these data.

ealthcare Personnel COVID-19 Cumulative Vaccination Su	Immary for Long-Term Care Facilities							
Date Created: Facility ID: 14025 *V Week of Data Collection: 01/02/2023 - 01/08/2023 *C		Facility CCN #: IUYIOOOOOO						
		Cumulative Vaccination Coverage						
	and fan aanh af	is form. As of March 28th, 2022 facilities also have the option to enter data using the lividuals who are up to date with COVID-19 vaccination are categorized appropriately	event-level COVID-19 vaccin according to their vaccinatio	ation form and se n dates. Learn m	ore here: link to QRC	2		Using the e
Review the number of the nu	pers for each of					Personnel (HCP) C	0	
the categories	in question 1				Employee HCP		Non-Employee HCP	
1			*All Core HCP (Total) <sup>a</sup>	*All HCP (Total) <sup>b</sup>	*Employees (staff on facility payroll) <sup>c</sup>	*Non- employee HCP (licensed independent practitioners) <sup>d</sup>	*Adult students/trainees/volunteers <sup>e</sup>	*Oth contra person
*Number of HCP that were eligible to have worked at this	Number of HCP that were eligible to have worked at this healthcare facility for at least 1 day during the week of data collection							
			*All Core HCP (Total) <sup>a</sup>	*All HCP (Total) <sup>b</sup>	*Employees (staff on facility payroll) <sup>c</sup>	*Non- employee HCP (licensed independent practitioners) <sup>d</sup>	*Adult students/trainees/volunteers <sup>e</sup>	*Oth contra person
* Cumulative number of HCP in Question #1 who have received	ed primary series COVID-19 vaccine(s) at this fa	sility or elsewhere since December 2020:						
2.1 Only 1 dose of a two-dose Primary COVID-19 vaccine	ariar							
2.2 Any completed Primary COVID-19 vaccine series	If the data ar	e correct in question 1, then						
		review the numbers in each of categories in question 3.2.		*All HCP (Total) <sup>b</sup>	*Employees (staff on facility payroll) <sup>c</sup>	*Non- employee HCP (licensed independent practitioners) <sup>d</sup>	*Adult students/trainees/volunteers <sup>e</sup>	*Oth contra person
	onaltions:							
1 *Medical contraindication to COVID-19 vaccin								
2 *Offered but declined COVID-19 vaccine					1 1			

**Note:** Individuals reporting philosophical, religious, or other reasons for declining COVID-19 vaccine not listed in the <u>Interim Clinical Considerations for Use of COVID-19 Vaccines Currently Approved or Authorized in the United States</u> should be counted under question 3.2 for the purpose of NHSN COVID-19 vaccination surveillance. The number of individuals who declined COVID-19 vaccination should not include those reporting medical contraindications to the COVID-19 vaccine (medical contraindications are reported in question 3.1).

## **Additional Resources:**

- Weekly HCP COVID-19 Vaccination
   <a href="https://www.cdc.gov/nhsn/hps/weekly-covid-vac/index.html">https://www.cdc.gov/nhsn/hps/weekly-covid-vac/index.html</a>
- FAQs on Reporting COVID-19 Vaccination Data https://www.cdc.gov/nhsn/hps/weekly-covid-vac/faqs.html
- Healthcare Personnel Safety Component (HPS) <u>https://www.cdc.gov/nhsn/hps/index.html</u>



# 4. Reporting COVID-19 Vaccination Reporting for Individuals with Unknown COVID-19 Status:

## **Purpose**

The NHSN Weekly COVID-19 Vaccination Modules allow facilities to enter weekly COVID-19 vaccination data for healthcare personnel (HCP), residents and/or patients. There are data quality flags built into the reporting forms that help identify possible irregularities in data. This quick reference guide will help facilities with the data flag associated with Question 3.3.

# **Overview of Question 3.3**

Question 3.3 collects data that describes the individuals that have unknown COVID-19 vaccination status.

**Please note**: For illustrative purposes we are using the LTCF Healthcare Personnel form for this example; however, steps for review are similar across all Weekly COVID-19 Vaccination Modules.

#### LTCF Healthcare Personnel Form

COVID-19 Vaccine: HCW	COVID-19 Vaccine: Residents									
- Healthcare Personnel CO	VID-19 Cumulative Vaccination S	Summary for Long-Term Care Facili	ties							
Date Created: *Facility ID: *Week of Data Collection	14025 *1 01/02/2023 - 01/08/2023 *1	Vaccination type: COVID19 Date Last Modified:	Facility CCN #: IUYIOOOOOO	Cumulative Vaccination Coverage						
Note: Facilities submit We	eekly COVID-19 Vaccination Cumula	ative Summary data by completing the level form is recommended to	questions on this form. As of March 28th, 2022 fa ensure that individuals who are up to date with C	ncilities also have the option to enter data using the event-le IOVID-19 vaccination are categorized appropriately accord	vel COVID-19 vaccir ing to their vaccinati	nation form and se on dates. Learn m	ore here: <u>link to QRC</u>	2		Using the event-
								Personnel (HCP) C	•	
					★All Core HCP (Total) <sup>a</sup>	*All HCP (Total) <sup>b</sup>	Employee HCP *Employees (staff on facility payroll) <sup>c</sup>	*Non- employee HCP (licensed independent practitioners) <sup>d</sup>	Non-Employee HCP *Adult students/trainees/volunteers <sup>e</sup>	*Other contract personnel <sup>f</sup>
1. *Number of HCP that v	1. *Number of HCP that were eligible to have worked at this healthcare facility for at least 1 day during the week of data collection									
					*All Core HCP (Total)ª	★All HCP (Total) <sup>b</sup>	*Employees (staff on facility payroll) <sup>c</sup>	*Non- employee HCP (licensed independent practitioners) <sup>d</sup>	*Adult students/trainees/volunteers <sup>e</sup>	*Other contract personnel <sup>f</sup>
2. * Cumulative number of	f HCP in Question #1 who have receiv	ived primary series COVID-19 vaccine	s) at this facility or elsewhere since December 202	10:						
*2.1 Only 1 dose of a two	odose Primary COVID-19 vaccine	series								
*2.2 Any completed Prim	nary COVID-19 vaccine series									
Question 3.3. The data collected through this question #1 with other conditions:					*All HCP (Total) <sup>b</sup>	*Employees (staff on facility payroll) <sup>c</sup>	*Non- employee HCP (licensed independent practitioners) <sup>d</sup>	*Adult students/trainees/volunteers <sup>e</sup>	*Other contract personnel <sup>f</sup>	
	ation to COVID-19 vaccine d COVID-19 vaccine			0-19 vaccination stat	1					

#### **Required Action:**

If your facility receives an email indicating a report of a high percentage of individuals with unknown COVID-19 vaccination status, we ask that you confirm that the number and percentage of individuals who have unknown COVID-19 vaccination status is correct. We suggest checking the reported number of individuals (Question 1) and the reported number of individuals with unknown vaccination status (Question 3.3). It is possible that this value is correct.





# **Resolving Data Concern for Question 3.3**

Review data reported for Question 1 and Question 3.3 on the Form for the week(s) in question. If you find data entered in error, please correct and resubmit these data.

COVID-19 Vaccine: HCW	COVID-19 Vaccine: Residents							
_ Healthcare Personnel CO	/ID-19 Cumulative Vaccination Summary for Long-Term Care Facilities							
Date Created: *Facility ID: *Week of Data Collection	14025  Vaccination type: COVID19 01/02/2023 • 01/08/2023 • Date Last Modified:	actility CCN #: IUY10000000 Cumulative Vaccination Coverage						
Note					ore here: link to QRC	ing summary and su Personnel (HCP) C		Using the event-
					Employee HCP	craonner (ner / e	Non-Employee HCP	
1	categories in question 1.		*All Core HCP (Total) <sup>a</sup>	*All HCP (Total) <sup>b</sup>	*Employees (staff on facility payroll) <sup>c</sup>	*Non- employee HCP (licensed independent practitioners) <sup>d</sup>	*Adult students/trainees/volunteers <sup>e</sup>	*Other contract personnel <sup>f</sup>
1. *Number of HCP that	vere eligible to have worked at this healthcare facility for at least 1 day during th	week of data collection						
		-	*All Core HCP (Total) <sup>a</sup>	*All HCP (Total) <sup>b</sup>	*Employees (staff on facility payroll) <sup>c</sup>	*Non- employee HCP (licensed independent practitioners) <sup>d</sup>	*Adult students/trainees/volunteers <sup>e</sup>	*Other contract personnel <sup>f</sup>
2. * <u>Cumulative</u> number of	HCP in Question #1 who have received primary series COVID-19 vaccine(s) at this fac	ility or elsewhere since December 2020:						
*2.1 Only 1 dose of a two	-dose Primary COVID-19 vaccine series							
*2.2 Any completed Prim	ary COVID-19 vaccine series							
	review the num	e correct in question 1, then bers in each of categories in	*All Core HCP (Total) <sup>a</sup>	*All HCP (Total) <sup>b</sup>	*Employees (staff on facility payroll) <sup>c</sup>	*Non- employee HCP (licensed independent practitioners) <sup>d</sup>	*Adult students/trainees/volunteers <sup>e</sup>	*Other contract personnel <sup>f</sup>
	of HCP in Question #1 with othe	question 3.3.						
	3.1 *Medical contraindication to COVID-19 vace							
3.2 *Offered but declined								
3.3 *Unknown COVID-1	Pvaccination status							

# **Additional Resources:**

- Weekly HCP COVID-19 Vaccination
   <a href="https://www.cdc.gov/nhsn/hps/weekly-covid-vac/index.html">https://www.cdc.gov/nhsn/hps/weekly-covid-vac/index.html</a>
- FAQs on Reporting COVID-19 Vaccination Data <u>https://www.cdc.gov/nhsn/hps/weekly-covid-vac/faqs.html</u>
- Healthcare Personnel Safety Component (HPS) <u>https://www.cdc.gov/nhsn/hps/index.html</u>



# 5. Reporting Decrease in COVID-19 Vaccinations:

#### Purpose

The NHSN Weekly COVID-19 Vaccination Modules allow facilities to enter weekly COVID-19 vaccination data for healthcare personnel (HCP), residents and/or patients. There are data quality flags built into the reporting forms that help identify possible irregularities in data. This quick reference guide will help facilities with the data quality flag associated with decreases in vaccination percentages or large changes in numbers of individuals.

## **Overview of Question 1 and Question 2**

As a reminder, weekly COVID-19 vaccination data is reported cumulatively, because of this, large decreases in vaccination percentages may represent a data quality error. To report cumulative data, facilities report the total number of individuals at the facility for that week. Of these individuals, report the number who have ever received COVID-19 vaccination (at your facility or elsewhere) since it became available in December 2020. Do not limit reporting to just the individuals who were vaccinated that week. It is important to review data reported from the prior week before entering the current week's data. Question 1 and 2 are highlighted in the screenshot below of the Healthcare Personnel COVID-19 Vaccination Cumulative Summary for Non-Long-Term Care Facilities Form.

**Please note:** For illustrative purposes we are using the Healthcare Personnel COVID-19 Vaccination Cumulative Summary for Non-Long-Term Care Facilities Form for this example, however this data quality flag will appear across all facility types.

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

	Healthcare Personnel COVID-19 Vaccination	on Cumulative Summary for Non-Lo	ong-Term Care Facilit	ies			
Date Created:							
Facility ID # *: 10312	Location Type *: Hospital						
Vaccination type *: COVID19	Facility CCN #: 222222222						
Week of Data Collection: 01/02/2023 - 01/08	3/2023 Date Last Modified:						
	Cumulati	ve Vaccination Coverage					
				Healthcare Personnel (HCP) Categories			
				Employee HCP	Non-Employee HCP		
		*All Core HCP <sup>a</sup>	*All HCP <sup>b</sup>	* Employees (staff on facility payroll) <sup>c</sup>	* Licensed independent practitioners: Physicians, advanced practice nurses, & physician assistants <sup>d</sup>	* Adult students/trainees and volunteers <sup>e</sup>	* Other Contract Personnel <sup>f</sup>
1. * Number of HCP that were eligible to have	worked at this healthcare facility for at least 1 day during the week of data collection						
		*All Core HCP <sup>a</sup>	*All HCP <sup>b</sup>	★ Employees (staff on facility payroll) <sup>c</sup>	* Licensed independent practitioners: Physicians, advanced practice nurses, & physician assistants <sup>d</sup>	* Adult students/trainees and volunteers <sup>e</sup>	* Other contract personnel <sup>f</sup>
2. *Cumulative number of HCP in Question #:	who have received primary series COVID-19 vaccines at this facility or elsewhere si	ince December 2020:					
2.1 *Only 1 dose of a two-dose Primary COVI	D-19 vaccine series						

Data Quality Flags and Required Actions:

 The Percentage of individuals who received complete vaccination decreased >=30% compared to the prior week

13



- Required Action
  - Please confirm that the percentage of individuals who received complete vaccine is correct. We suggest checking the reported number of individuals (Question 1) and the reporting number of individuals who received complete vaccinated (Questions 2.2, 2.4, and 2.5).
- Number of individuals decreased >=30% compared to the prior week
  - Required Action
    - Please confirm that the number of individuals correct (Question 1).

#### **Additional Resources:**

Weekly HCP COVID-19 Vaccination

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

FAQs on Reporting COVID-19 Vaccination Data

https://www.cdc.gov/nhsn/hps/weekly-covid-vac/faqs.html

Healthcare Personnel Safety Component (HPS)

https://www.cdc.gov/nhsn/hps/index.html



# 6. Reporting Up To Date COVID-19 Vaccination Status

#### Purpose

The NHSN Weekly COVID-19 Vaccination Modules allow facilities to enter weekly COVID-19 vaccination data for healthcare personnel (HCP), residents and/or patients. There are data quality flags built into the reporting forms that help identify possible irregularities in data. This quick reference guide will help facilities with the data quality flag associated with Question 4 and Question 5.

## **Overview of Question 4 and Question 5**

Question 4 collects data about individuals who have received an additional or booster dose of COVID-19 vaccine among those with complete primary COVID-19 vaccination series. Question 5 collects data about individuals who are up to date with COVID-19 vaccination. Please note: the definition of up to date for NHSN surveillance may change over time. To view the current up to date surveillance definition as well as previous definitions, please see: Up To Date Guidance Quarter 1 2023 (cdc.gov)

Please note: For illustrative purposes we are using the LTCF Healthcare Personnel Form for this example, however this data quality flag will appear across all facility types.

#### Add COVID-19 Vaccination Summary Data \* Licensed Question 4. The data collected through this question \* Adult \* Other describe individuals who have received an additional or students/trainees contract booster dose of COVID-19 vaccine among those with and volunteers<sup>e</sup> personnel complete primary vaccination series 4. \*Cumulative 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 \* Licensed independent \* Adult \* Other Question 5. The data collected through this question students/trainees contract describe individuals who are up to date with COVIDand volunteers<sup>e</sup> personnel 19 vaccination. assistantsd Question 5 asks about individuals who are up to date. Please review the current definition of up to date 5. \* <u>Cumulative</u> number of HCP in Question #2 who are <u>up to date</u> with COVID-19 vaccines Γ <sup>a</sup> sum of Employees (staff on facility payroll), Licensed independent practitioners: Physicians, advanced practice nurses, & physician assistants, and Adult students/trainees & volunteers. <sup>b</sup> sum of Employees (staff on facility payroll), Licensed independent practitioners: Physicians, advanced practice nurses, & physician assistants, Adult students/trainees & volunteers, and Other contract personnel all persons receiving a direct paycheck from the healthcare facility (i.e., on the facility's payroll), regardless of clinical responsibility or patient contact. <sup>d</sup> physicians (MD, DO); advanced practice nurses; and physician assistants only who are affiliated with the healthcare facility, but are not directly employed by it (i.e., they do not receive a paycheck from the facility), regardless of clinical responsibility or patient contact. Post-residency fellows are also included in this catego

#### **Required Action:**

If your facility receives an email indicating that the number of individuals who are up to date is greater than 0 while the number of additional/booster doses reported equals 0, we ask that you confirm that the number of individuals who have ever received any additional/booster doses is correct (Question 4). If this is correct, please confirm that the number of individuals who are up to date is correct (Question 5). If you find data entered in error, please correct and resubmit these data.



**Centers for Disease Control** and Prevention National Center for Emerging and Zoonotic Infectious Diseases

#### LTCF Healthcare Personnel Form

#### **Additional Resources:**

- Weekly HCP COVID-19 Vaccination
   <a href="https://www.cdc.gov/nhsn/hps/weekly-covid-vac/index.html">https://www.cdc.gov/nhsn/hps/weekly-covid-vac/index.html</a>
- FAQs on Reporting COVID-19 Vaccination Data https://www.cdc.gov/nhsn/hps/weekly-covid-vac/faqs.html
- Healthcare Personnel Safety Component (HPS) <u>https://www.cdc.gov/nhsn/hps/index.html</u>
- Quick Reference Guide: Reporting Up To Date COVID-19 Vaccination Status through the COVID-19 Vaccination Module <u>https://www.cdc.gov/nhsn/pdfs/covid19/quickreferenceguide-uptodateguidance-508.pdf</u>



