

Healthcare Personnel Safety Component

Healthcare Personnel Vaccination Module Influenza Vaccination Summary

Acute Care Facilities

October 2022

Objectives

- Review reporting of healthcare personnel (HCP) influenza vaccination summary data by acute care facilities
- Describe the Healthcare Personnel Safety (HPS) Component and reporting requirements
- Outline how to count HCP in acute care facilities.
- Review key points about data entry
- Discuss frequently asked questions

Reporting HCP Influenza Vaccination Summary Data in NHSN

Centers for Medicare and Medicaid Services (CMS) Reporting Requirements for Acute Care Facilities

- CMS Final Rule in August 2012
 - 2012-2013 Influenza Season
 - Required to report data beginning on January 1, 2013 for inpatient reporting
 - 2013-2014 Influenza Season
 - Required to report data beginning on October 1, 2013 for inpatient reporting
- CMS Final Rule in December 2013.
 - 2014-2015 Influenza Season
 - Required to report data beginning on October 1, 2014 for inpatient and outpatient reporting

CMS Reporting Requirements for Acute Care Facilities (cont.)

- CMS Final Rule in November 2018
 - 2018-2019 Influenza Season
 - Required to report data beginning on October 1, 2018 for inpatient and outpatient units/departments sharing the exact same CCN as the acute care facility

Healthcare Personnel Safety (HPS) Component and Reporting Requirements

Healthcare Personnel Safety Component

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

HCP Influenza Vaccination Summary

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

HCP Influenza Vaccination Summary (cont.)

- Data are collected on denominator and numerator categories
 - Denominator categories:
 - HCP must be <u>physically</u> present in the facility for at least 1 working day between October 1 through March 31
 - Includes both full-time and part-time HCP
 - Employee HCP: Staff on facility payroll
 - Non-employee HCP: Licensed independent practitioners (physicians, advanced practice nurses, and physician assistants)
 - Non-employee HCP: Adult students/trainees and volunteers
 - Numerator categories:
 - Influenza vaccinations, medical contraindications, declinations, and unknown status
- Facilities are <u>required</u> to report all numerator categories for the three denominator categories

Notes on Reporting Requirements

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

Notes on Reporting Requirements (cont.)

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

Monthly Reporting Plan

- The monthly reporting plan (MRP) is no longer required to complete prior to entering annual healthcare personnel influenza vaccination data beginning with the 2022-2023 influenza season
- Upon saving or uploading data, users will agree to the following:
 - The data reported are consistent with definitions outlined in NHSN surveillance protocols (including tables of instructions and frequently asked questions).
 - The data will be sent to the Centers for Medicare and Medicaid Services (CMS) to fulfill CMS quality reporting requirements (when applicable).



Acute Care Facility: Inclusion Criteria

- Include all inpatient units/departments of the acute care facility
 - Sharing the exact same CCN (100% identical) as the acute care facility
 - Regardless of distance from the facility
- Include all outpatient units/departments of the acute care facility
 - Sharing the exact same CCN (100% identical) as the acute care facility
 - Regardless of distance from the facility

Acute Care Facility: Exclusion Criteria

- Facilities would <u>not</u> count HCP working in:
 - Inpatient and outpatient units/departments of the acute care facility having separate CCNs from the acute care facility
 - These include the following, but may not be limited to:
 - Inpatient rehabilitation facilities (IRF)
 - Inpatient psychiatric facilities (IPF)
 - Long-term acute care facilities (LTAC)
 - Skilled nursing facilities (SNF)
- You would not count HCP working in the areas noted above, unless these HCP also physically work in the acute care facility for at least one day between October 1 through March 31

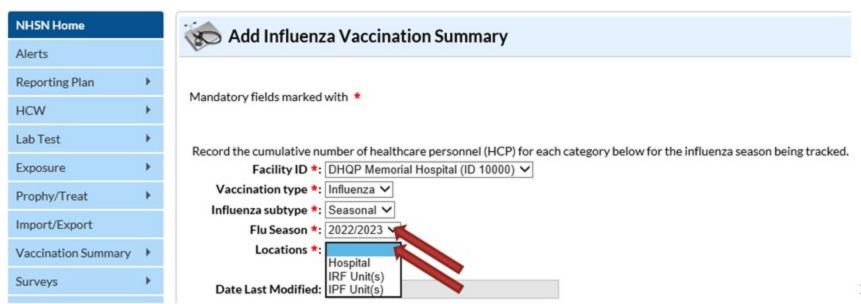
Facilities Required to Report Data

- Facilities subject to CMS or Health Resources & Services
 Administration reporting requirements <u>must continue</u> with HCP influenza vaccination data reporting
 - Acute care facilities
 - Critical access hospitals
 - Prospective payment system (PPS)-exempt cancer hospitals
 - Long-term acute care facilities
 - Inpatient rehabilitation facilities

Entering Data for the HCP Influenza Vaccination Summary

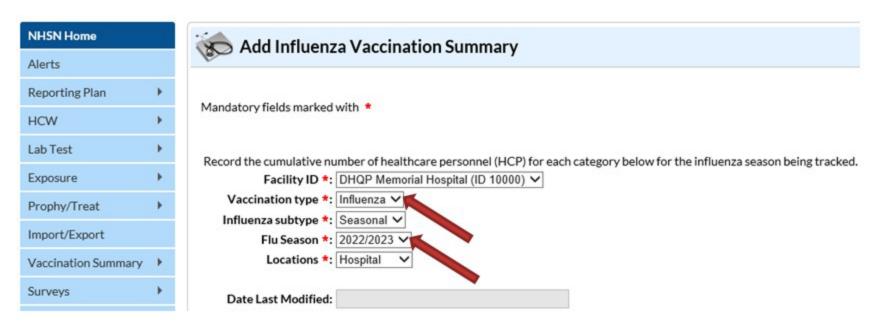
Summary Report for Hospitals with IRF or IPF Units

- "Influenza" and "Seasonal" are the default choices for vaccination type and influenza subtype
- Select appropriate flu season in drop-down box (e.g., 2022-2023)
- Select the appropriate location for reporting hospital data, IRF unit(s) or IPF unit(s) data



HCP Influenza Vaccination Summary

- "Influenza" and "Seasonal" are the default choices for vaccination type and influenza subtype
- Select appropriate flu season in drop-down box (e.g., 2022-2023)



Frequently Asked Questions

Question One

- I am reporting data for my acute care facility and for my CMS IRF unit that has a separate CCN from the acute care facility. How should I report my data, now that the acute care facility reporting requirements have changed?
 - You should still continue to report your data separately for the IRF unit.
 - HCP working only in the IRF unit should be counted in the IRF unit report, but not in the acute care facility report.
 - HCP working in both the IRF unit and acute care facility should be counted in both the IRF unit and acute care facility reports.

Question Two

- I used to report data for my CMS IPF unit that is located within my acute care facility. How should I report data, now that CMS has suspended the requirement for IPFs to report data through NHSN?
 - HCP only working in the IPF unit should not be counted in the acute care facility report. The HCP do not have to be reported to NHSN for CMS purposes, although reporting may be required for your state or locality.
 - HCP working in both the IPF unit and in other units of the acute care facility should be counted in the acute care facility report.

Question Three

- Our facility has an administrative building that is physically connected to the acute care facility by a skywalk. The building is only used for administrative duties and not inpatient care. Should I count HCP working in this building?
 - Yes, you should count HCP working in the administrative building, as it is considered part of the acute care facility.

Question Four

- My acute care hospital owns several outpatient provider practices with separate CCNs that are physically separate from the main hospital campus. Employees of the clinics are on the hospital's payroll. Should I include them in our reporting?
 - These employees should not be counted in the vaccination reports for the acute care hospital, unless these employees also physically work in the acute care hospital for a least one day from October 1 through March 31.

Question Five

- Should employees who always work off-site or out-of-state be counted, such as employees practicing telemedicine?
 - No. Only HCP physically working in the acute care facility for at least one day or more from October 1 through March 31 are included in your report.

Question Six

- My facility is finding it difficult to distinguish HCP who only work in the outpatient units versus those who work in inpatient units. How should I move forward?
 - Here is the guidance from CMS on this issue: "This measure does not separate out HCP who only work in the inpatient or outpatient areas or work in both. Due to the burden of trying to separate out the counts for inpatient and outpatient units, CMS allows facilities to collect and submit a single vaccination count to include all HCP hospital-wide that meet the criteria, regardless of whether they work inpatient or outpatient units. The hospital-wide or combined counts should be entered on one single influenza vaccination summary data form in NHSN. This includes all units/departments, inpatient and outpatient, that share the same CCN as the hospital and are affiliated with the acute care facility."

The NHSN Website

Visit: <u>HCP Flu Vaccination | HPS | NHSN | CDC</u> for training materials:

- Protocol
- Data collection forms
- Frequently asked questions (FAQs)
- Training slides

Questions or Need Help?



E-mail user support at: nhsn@cdc.gov

Please include "HPS Flu Summary" in the subject line of the e-mail and specify "Acute Care"