The National Healthcare Safety Network (NHSN) Manual

2026 COVID-19 VACCINATION PROTOCOL

Weekly COVID-19 Vaccination Module for Healthcare Personnel

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*Protocols from previous years are posted on the NHSN Website under the 'Manuals & Protocols' heading on the left-hand navigation bar. Please review these protocols if you are submitting data for earlier time periods.

1. Introduction to the Weekly COVID-19 Vaccination Modules for Healthcare Personnel

Background

In 2020, SARS-CoV-2 (Severe Acute Respiratory Syndrome Coronavirus-2), the virus that causes COVID-19 disease, began spreading and became a pandemic. In response, COVID-19 vaccines were introduced in December 2020 for certain populations, including healthcare personnel (HCP). NHSN launched the Weekly COVID-19 Vaccination Modules in December 2020.

Objectives

NHSN designed the Weekly COVID-19 Vaccination Modules to ensure that reporting of COVID-19 vaccination data is consistent over time within a single healthcare facility and comparable across facilities. Facilities can use these modules to collect, track, and report COVID-19 vaccination data on a weekly basis. Facilities can submit data manually or via .CSV file upload. Facilities also have the option to use the Person-Level COVID-19 Vaccination Forms to report data to the weekly vaccination modules.

Healthcare facilities benefit from using NHSN by receiving technical support and standardized methodologies including a web-based application for conducting vaccination surveillance activities. Improvements in tracking and reporting vaccination status from using NHSN to monitor COVID-19 vaccination allows facilities to better identify and target unvaccinated persons which may also result in increased COVID-19 vaccination.

Authorities at the local and national levels can use NHSN vaccination coverage data to identify coverage gaps and provide targeted outreach. Users can also combine NHSN data with data on infection rates to inform infection control policies and recommendations.

2. Reporting Requirements

Background

The NHSN HCP COVID-19 Vaccination Cumulative Summary Module collects data on COVID-19 vaccination coverage among HCP working at facilities across the United States.

![CDC logo]

Settings

Healthcare facilities including acute care hospitals, long-term acute care hospitals, inpatient psychiatric facilities, inpatient rehabilitation facilities, LTCFs, outpatient dialysis centers, and ambulatory surgery centers may enroll in NHSN and report COVID-19 vaccination data. Long-term care facilities report COVID-19 vaccination data on healthcare personnel (HCP) through the Long-term Care Facility (LTCF) Component. Other facility types, such as acute care hospitals, report COVID-19 vaccination data on HCP through the HCP Safety (HPS) Component.

Requirements

Participating facilities are required to report data according to this protocol, using the NHSN definitions described herein, to ensure data are uniformly reported across facilities.

As of January 2025, CMS no longer requires inpatient hospitals, ambulatory surgery centers, inpatient psychiatric facilities, and inpatient rehabilitation facilities to report monthly COVID-19 vaccination data for HCP. The CMS reporting requirement for outpatient hospitals was also removed in November 2025. However, these facilities may still voluntarily submit COVID-19 vaccination data for HCP through NHSN.

CDC/NHSN encourages facilities to update HCP COVID-19 vaccination summary data on a weekly basis so they have the greatest impact on COVID-19 vaccination activities. Please refer to the following resources for information on Centers for Medicare and Medicaid Services (CMS) reporting requirements:

Acute care hospitals and long-term care hospitals: [Federal Register :: Medicare Program; Hospital Inpatient Prospective Payment Systems for Acute Care Hospitals and the Long-Term Care Hospital Prospective Payment System and Policy Changes and Fiscal Year 2022 Rates; Quality Programs and Medicare Promoting Interoperability Program Requirements for Eligible Hospitals and Critical Access Hospitals; Changes to Medicaid Provider Enrollment; and Changes to the Medicare Shared Savings Program](#)

LTCFs: [Federal Register :: Federal Register Documents Currently on Public Inspection](#)

3. Reporting Instructions

Forms, Description, and Purpose

- <u>All</u> facilities reporting HCP COVID-19 vaccination data must complete the *Weekly COVID-19 Summary Data Form for HCP* (CDC 57.219)
data collection form.

- This is used to collect data on summary COVID-19 vaccination counts among HCP working in a facility. Facilities can enter data each week, defined as Monday through Sunday. Facilities can also edit and update data after the initial data entry. Complete all required fields indicated with an asterisk when entering data; otherwise, the data cannot be saved. Facilities are required to enter data for all four categories of HCP. Users should enter "0" in a field if no HCP at the facility fall into that category.
- Please note that a week is designated as belonging to the month of the week-end date. For example, reporting data for the week of January 26, 2026 through February 1, 2026, is considered as submitting data for a week in February and not January.

Denominator Categories

The denominator consists of the number of HCP eligible to work in the healthcare facility for at least one day during the week of data collection. Facilities must collect and report denominator data for the four required categories of HCP.

a. Employees: This includes all persons receiving a direct paycheck from the reporting facility (i.e., on the facility's payroll), regardless of clinical responsibility or patient contact.

b. Licensed independent practitioners (LIPs): This includes physicians (MD, DO), advanced practice nurses, and physician assistants who are affiliated with the reporting facility, but are not directly employed by it (i.e., they do not receive a paycheck from the facility), regardless of clinical responsibility or patient contact. Post-residency fellows are also included in this category if they are not on the facility's payroll.

c. Adult students/trainees and volunteers: This includes medical, nursing, or other health professional students, interns, medical residents, or volunteers aged 18 or older 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.

d. Other contract personnel: Contract personnel are defined as persons providing care, treatment, or services at the facility through a contract who do not fall into any of the other denominator categories. Please note that this also includes vendors providing care, treatment, or services at the facility who may or may not be paid through a contract. (See Appendix A for a list of contract personnel and vendor examples.)

Denominator Notes

1. HCP eligible to have worked include individuals who are scheduled to work in the facility at least one day every week. Working any part of a day is considered as working one 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 two weeks in duration; examples include sick leave or vacation. A healthcare worker is not included in the denominator for the current week of data collection in instances where temporary leave extends past two weeks.

2. Include HCP who worked full-time and part-time. HCP are counted as individuals rather than full-time equivalents.

3. If HCP were eligible to have worked in two or more facilities, each facility must include such personnel in their denominator. Each person is counted only once in the denominator. The denominator categories are mutually exclusive. The numerator data are reported separately for each of the denominator categories.

4. The NHSN application automatically calculates the total values for two fields in the NHSN application: *All Core HCP* and *All HCP*. The All Core HCP field is the sum of employees, licensed independent practitioners, and adult students/trainees and volunteers. The All HCP field is the sum of employees, licensed independent practitioners, adult students/trainees and volunteers, and other contract personnel.

Numerator Categories
HCP should be counted as up to date if they have received the most recently recommended COVID-19 vaccine(s). Please see the following document for more information on the definition of up to date by reporting quarter:
https://www.cdc.gov/nhsn/pdfs/hps/covidvax/UpToDateGuidance-508.pdf.

Vaccination coverage is defined as a measure of the estimated percentage of people in a sample or population who received a specific vaccine or vaccines.

Facilities are required to complete the following numerator fields in the NHSN application:

   a. Received the most recent up to date COVID-19 vaccination administered at the healthcare facility; or reported in writing (paper or electronic) or provided documentation that up to date COVID-19 vaccination was received elsewhere; or

   b. Had a medical contraindication, defined as a history of a severe allergic reaction (e.g., anaphylaxis) after a previous dose or to a component of the COVID-19 vaccine, and history of a known diagnosed allergy to a component of the COVID-19 vaccine. Please see the most up-to-date list of contraindications here: Clinical Guidance for COVID-19 Vaccination | CDC

   c. Were offered but declined COVID-19 vaccination; or

d. Had an unknown/other vaccination status or did not otherwise meet any of the definitions of the other numerator categories.

Numerator Notes

1. HCP who received vaccination outside of the facility but did not provide written documentation should be categorized as having unknown vaccination status. Acceptable forms of documentation include a signed statement or form, or an electronic form or e-mail from the healthcare worker indicating when and where they received the COVID-19 vaccine. A note, receipt, vaccination card, etc. from the outside vaccinating entity stating that the healthcare worker received the COVID-19 vaccine at that location is also permitted.

2. HCP who declined vaccination because of conditions other than those specified in category (b) above should be categorized as declined vaccination*

3. HCP who declined vaccination and did not provide any other information should be categorized as declined vaccination.

4. HCP who did not receive vaccination because of religious or philosophical exemptions should be categorized as declined vaccination.

5. The numerator data are mutually exclusive. The sum of the numerator categories (listed in a. through d. above) should be equal to the denominator for each HCP group.

6. The NHSN application automatically calculates the total value for the cumulative number of HCP who are up to date with COVID-19 vaccines. Please see the following document for more information: https://www.cdc.gov/nhsn/pdfs/hps/covidvax/UpToDateGuidance-508.pdf.

7. For surveillance purposes, facilities are required to enter data in the NHSN application on the number of HCP who have received the most recent up to date COVID-19 vaccination.

8. Facilities must report cumulative data. This cumulative count includes all HCP eligible to work at the facility and who were ever vaccinated with the most recently recommended vaccine and not just those individuals vaccinated during the current reporting week.

*Note: For the purposes of this module, a medical contraindication to vaccination is defined as history of a severe allergic reaction (e.g., anaphylaxis) after a previous dose or to a component of the COVID-19 vaccine, and history of a known diagnosed allergy to a component of the COVID-19 vaccine. Please see the most up-to-date list of contraindications here: Clinical Guidance for COVID-19 Vaccination | CDC. A healthcare facility may grant medical

exemptions to HCP with other conditions besides those defined for this module and may include these conditions in its list of acceptable medical contraindications to COVID-19 vaccination. However, only those HCP with one of the two conditions stated above are reportable to NHSN as having a medical contraindication to COVID-19 vaccination to ensure that data are comparable across different facilities reporting data using this module.

Data Sources

Data sources for the required data elements include management/personnel data (e.g., payroll or attendance records), medical or occupational health records (e.g., electronic health data) vaccination records, claims, instrument-based data, and immunization tracking. HCP can self-report in writing (paper or electronic) that the vaccination was received elsewhere or provide documentation of receipt of the COVID-19 vaccine elsewhere. Documentation must include the date and location of vaccine receipt and vaccine type. Verbal statements are not acceptable proof of vaccination outside the facility for this reporting module. However, HCP can provide verbal statements for medical contraindications to and declination of the COVID-19 vaccine, as written documentation is not required for NHSN reporting.

Methodology

The COVID-19 vaccination summary data reporting enables a healthcare facility to record weekly COVID-19 vaccination data for HCP eligible to work in the healthcare facility for at least one day during the reporting period. Data must be entered for the four denominator categories of HCP groups and the four numerator fields describing vaccination status. This module requires that data be collected as per CDC reporting requirements. Any new data that are entered into NHSN will overwrite previously entered data.

Data Analyses

Vaccination coverage is defined as a measure of the estimated percentage of people in a sample or population who received a specific vaccine or vaccines.

Facilities participating in a CMS quality reporting program with the Consensus-Based Entity (CBE) endorsed quality measure for Quarterly Reporting of COVID-19 Vaccination Coverage among HCP (CBE# 3636) are required to report data for at least one week per month for this measure. Facilities can report data for more than one week per month; however, this is not mandatory. Please note that a week is designated as belonging to the month of the week-end date. For example, reporting data for the week of January 26, 2026 through February 1, 2026, is considered as submitting data for a week in February and not January.

Each quarter, CDC will calculate a single quarterly HCP COVID-19 vaccination coverage rate for each facility, by taking the average of the data from the three weekly rates submitted by the facility for that quarter. If more than one week of data are submitted for the month, the most recent week of the month will be used.

The COVID-19 up to date vaccination coverage rate for each quarter is calculated using the following formula:

$$\frac{\text{\# Cumulative total of HCP Up to Date}}{\text{\# HCP eligible to have worked (excluding contraindications)}} \times 100 = \text{Pct. of HCP Up to Date}$$

This calculation includes only the core HCP categories of employees, licensed independent practitioners, and adult students/trainees and volunteers who received the most recent up to date COVID-19 vaccination. HCP with contraindications to COVID-19 vaccination are excluded from the denominator. Vaccination percentages for individual HCP categories of employees, licensed independent practitioners, adult students/trainees and volunteers, and other contract personnel are calculated in the same manner. For example, the calculation of the COVID-19 up to date vaccination coverage rate for employees is listed below.

$$\frac{\text{\# Cumulative total of employees Up to Date}}{\text{\# employees eligible to have worked (excluding contraindications)}} \times 100 = \text{Pct. of employees Up to Date}$$

Please note that the analysis reports available in NHSN include several rate calculations. More information on running analysis reports in NHSN are available here: [HPS | Weekly HCP COVID-19 Vaccination | NHSN | CDC](#)

Timestamps in NHSN

Since February 2024, timestamps in the NHSN application have displayed Coordinated Universal Time (UTC). UTC is the international time standard. UTC serves as a uniform and universal reference to measure time across all time zones. UTC has been implemented as part of ongoing NHSN system upgrades and modernization efforts.

4. Key Terms

![CDC logo]

Key terms	Definition for purposes of the HCP COVID-19 Vaccination Summary Module
Adult students/trainees and volunteers	Medical, nursing, or other health professional students, interns, medical residents, or volunteers aged 18 or older 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.
Contract personnel	Persons providing care, treatment, or services at the facility through a contract, regardless of clinical responsibility or patient contact, who do not meet the definition of employees, licensed independent practitioners, or adult students/trainees and volunteers. Please note this also includes vendors providing care, treatment, or services at the facility who may or may not be paid through a contract.
Cumulative data	Cumulative data accounts for all individuals eligible to work at the facility and who were ever vaccinated (not just those individuals vaccinated during the current reporting week).
Employees	Persons receiving a direct paycheck from the healthcare facility (i.e., on the facility's payroll), regardless of clinical responsibility or patient contact.
Healthcare personnel (HCP)	The entire population of healthcare workers working in healthcare settings. HCP might include (but are not limited to) physicians, nurses, nursing assistants, therapists, technicians, emergency medical service personnel, dental personnel, pharmacists, laboratory personnel, autopsy personnel, students/ trainees, and volunteers, contractual staff not employed by the healthcare facility (for example, clerical, dietary, housekeeping, maintenance, and volunteers), regardless of clinical responsibility or patient contact.
Healthcare worker (HCW)	A person who works in a healthcare facility, whether paid or unpaid, regardless of clinical responsibility or patient contact. Healthcare worker is the singular form of HCP.
Licensed independent practitioners (LIPs)	Physicians (MD, DO), advance practice nurses, and physician assistants who are affiliated with the healthcare facility, but are not directly employed by it (i.e., they do not receive a paycheck from the facility), regardless of clinical responsibility or patient contact. Post-residency fellows are also included in this category if they are not on a facility's payroll.

Appendix A

COVID-19 Vaccination Summary: List of Contracted and Vendor HCP

Examples

The list below includes examples of contracted and vendor HCP who provide direct patient care and who perform non-direct or non-patient care duties. HCP listed below can acquire COVID-19 from or transmit COVID-19 to patients, families, and other staff members. This list is not exhaustive.

Contracted and vendor HCP can include the following non-employee care providers who may or may not be involved in patient care:

- Admitting staff/clerical support/registrars
- Agency nurses
- Ambulance drivers (who enter the facility to assist with transportation)
- Biomedical engineers
- Central supply staff
- Chaplains
- Construction workers (working inside the facility)
- Dietary/food service staff
- Dieticians
- Dialysis technicians
- EKG technicians
- EMG technicians
- Home health aides
- Housekeeping staff
- Information Technology staff
- Laboratory: Phlebotomists
- Laboratory: Technicians
- Landscapers (working inside the facility)
- Laundry staff
- Maintenance staff/engineers
- Nursing aides
- Occupational therapists
- Patient care technicians
- Patient transporters
- Pharmacists
- Pharmacy/medication technicians
- Physical therapists
- Psychologists
- Psychology technicians/Mental health workers
- Radiology: X-ray technicians
- Recreational therapists/Music therapists
- Respiratory therapists
- Security staff

- Social workers/Case managers
- Speech therapists
- Surgical technicians
- Traveling nurses
- Ultrasound technicians
- Utilization review nurses