

**Verification Checklist: Inpatient Psychiatric Facility (IPF) Reporting of COVID-19 Vaccination Coverage Among Healthcare Personnel (COVID HCP) Measure Data – Fiscal Year (FY) 2024**

Due	Steps	✓		
<p><b>On or before 05/15/2023</b></p>	<p><b><u>STEP 1: Perform Data Verification in National Healthcare Safety Network (NHSN).</u></b></p> <ul style="list-style-type: none"> <li>Verify that the data have been saved correctly by running a <b>Line Listing – All COVID-19 Vaccination Cumulative Summary Data – Healthcare Personnel Report</b>.</li> <li>Facilities should confirm that data have been reported for a minimum of one week per month for each month of a quarter.</li> </ul> <p><b>Important Report Information</b></p> <ul style="list-style-type: none"> <li>If a separate HTML window does <u>not</u> appear, you will need to verify that your pop-up blocker is set to allow pop-ups from *.cdc.gov.</li> <li>The Centers for Disease Control and Prevention (CDC) Healthcare Personnel Safety Component website contains links to the data collection forms, tables of instructions for reporting data, data tracking worksheets, training slides, analysis, and reporting guides, and .CSV file templates and instructions. Access training materials at: <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></li> </ul>	<input type="checkbox"/>		
<p><b>On or before 05/15/2023</b></p>	<p><b><u>STEP 2: Perform IPF Unit CMS Certification Number (CCN) and CCN Effective Date Verification in NHSN.</u></b></p> <p>Verify that the facility or IPF unit is enrolled in NHSN correctly and that the correct facility CCN <u>and</u> CCN effective date have been entered in to NHSN.</p> <table border="1" data-bbox="261 877 1479 1503"> <tr> <td data-bbox="261 877 834 1503"> <p><b>IPFs associated with an acute care, critical access, long-term care, children’s, or rehabilitation hospital:</b></p> <ul style="list-style-type: none"> <li>Verify that the facility is enrolled properly as an acute care facility (e.g., “HOSP-GEN,” “CAH,” “HOSP-SURG,” or “HOSP-WOM”) on the Facility Info page of NHSN.</li> <li>Ensure that for <u>each</u> CMS IPF unit:                             <ul style="list-style-type: none"> <li>“Yes” is selected for the question, “Is this location a CMS IPF unit within a hospital?”</li> <li>The correct CCN <b>and</b> CCN effective date were entered in the NHSN Location record for the unit. The CCN effective date is the date of receipt of the CCN from CMS.</li> </ul> </li> </ul> </td> <td data-bbox="834 877 1479 1503"> <p><b>Free-standing IPFs:</b></p> <ul style="list-style-type: none"> <li>Verify that the facility is enrolled as “HOSP-PSYCH.”</li> <li>Verify that the correct facility CCN <b>and</b> CCN effective date have been entered in to the “Facility Info” page of NHSN for the IPF. Your facility’s CCN effective date is the date of receipt of the CCN from CMS.</li> </ul> </td> </tr> </table>	<p><b>IPFs associated with an acute care, critical access, long-term care, children’s, or rehabilitation hospital:</b></p> <ul style="list-style-type: none"> <li>Verify that the facility is enrolled properly as an acute care facility (e.g., “HOSP-GEN,” “CAH,” “HOSP-SURG,” or “HOSP-WOM”) on the Facility Info page of NHSN.</li> <li>Ensure that for <u>each</u> CMS IPF unit:                             <ul style="list-style-type: none"> <li>“Yes” is selected for the question, “Is this location a CMS IPF unit within a hospital?”</li> <li>The correct CCN <b>and</b> CCN effective date were entered in the NHSN Location record for the unit. The CCN effective date is the date of receipt of the CCN from CMS.</li> </ul> </li> </ul>	<p><b>Free-standing IPFs:</b></p> <ul style="list-style-type: none"> <li>Verify that the facility is enrolled as “HOSP-PSYCH.”</li> <li>Verify that the correct facility CCN <b>and</b> CCN effective date have been entered in to the “Facility Info” page of NHSN for the IPF. Your facility’s CCN effective date is the date of receipt of the CCN from CMS.</li> </ul>	<input type="checkbox"/>
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<p><b>Note:</b> Upon completing verifications, it is recommended that you retain screenshots or printouts for your own records. If the CCN is incorrect or if the IPF unit is not mapped appropriately for IPF units associated with other facilities, CMS will <b>not</b> receive the data submitted to NHSN.</p>				

**Additional Resources**

**Educational Webinars:** Educational webinar materials pertaining to the COVID HCP measure (e.g., slides, Q&A transcript, etc.) are on the [Quality Reporting Center Archived Events](#) and [QualityNet Webinars/Calls](#) web pages.

**NHSN Help Desk:** For questions about NHSN enrollment, HCP Influenza Vaccination data submission, or data verification process, contact [NHSN@cdc.gov](mailto:NHSN@cdc.gov). We recommend including the IPF name and IPF specific CCN, as well as either “IPF Enrollment Guidance” or “Weekly COVID-19 Vaccination” (as appropriate) in the email subject line.

**SAMS Help Desk:** For assistance with SAMS, contact the help desk toll-free at (877) 681-2901 or [samshelp@cdc.gov](mailto:samshelp@cdc.gov).