



# Ambulatory Surgical Center Quality Reporting Program

## Support Contractor

### Influenza Vaccination of Healthcare Personnel: ASCQR Program Presentation

#### Moderator:

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#### Speakers:

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**May 6, 2015**

**3:00 p.m.**

Reneé Parks:

Thank you, Matt. Hello and welcome, everyone. As Matt stated, this is the ASC Quality Reporting Program webinar. My name is Reneé Parks, and I am the project lead for the ASC Quality Reporting Program.

Before we begin today's presentation, I would like to make a couple of quick announcements. First, the next ASC Quality Reporting Program educational webinar will be on May 27, 2015, and it will cover and discuss the web-based measures with an emphasis, or focus, on ASC-9 and ASC-10. Registration announcements will be sent out via the ASC ListServe, as the ListServe is our primary mode of communication. Registration and handouts will be posted at [www.qualityreportingcenter.com](http://www.qualityreportingcenter.com).

And now, for today's presentation. We are fortunate today to have Elizabeth Kalayil and Amy Webb with the CDC here to offer the presentation. It is my pleasure to introduce Elizabeth Kalayil. Elizabeth is a public health analyst for Carter Consulting and is based in the Immunization Services division at CDC. She provides training and technical assistance to healthcare facilities on reporting healthcare personnel influenza vaccination. Elizabeth earned a master's of public health degree and international health from Emory University.

And our second speaker during the presentation will be Amy Webb. Amy is a public health analyst within the surveillance branch of the Division of

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Healthcare Quality Promotion at CDC. She is currently one of the subject matter experts for the National Healthcare Safety Network, or NHSN, working with facilities to support the submission of mandated and voluntarily reported data into NHSN.

And now, it is my pleasure to turn the presentation over to our speakers. Elizabeth, the floor is now yours.

Elizabeth Kalayil:

Thanks a lot, Reneé, and welcome, everyone, to the Healthcare Personnel Safety Component Training session for the Influenza Vaccination Summary of the Healthcare Personnel Vaccination Module. As Reneé said, my name is Elizabeth Kalayil, and I work as a contractor in the Immunization Services Division at CDC. So, I'll be presenting information during the first part of the webinar.

This presentation will cover several topics. The first objective is to provide an overview of the National Healthcare Safety Network, or NHSN, and the Healthcare Personnel Vaccination Module, where users will enter data for the Healthcare Personnel Influenza Vaccination Summary. The steps on how to get started in the Healthcare Personnel Safety Component will then be reviewed, along with the surveillance and reporting requirements for the module and the data reporting forms that facilities will need to use. The last segment of our presentation will briefly outline data analysis features.

First, we'll briefly cover some background information on NHSN. NHSN is a secure Internet-based surveillance system managed by the Centers for Disease Control and Prevention's Division of Healthcare Quality Promotion. The purposes of NHSN are to collect data from a sample of healthcare facilities, to promote valid estimations of the magnitude of adverse events, and adherences to practices to prevent adverse events. NHSN also analyzes and reports the data collected to the recognition of trends, and also provides facilities with the data that can be used for inter-facility comparisons and local quality improvement activities.

NHSN also enables healthcare facilities to use a system to report healthcare-associated infections and prevention practice adherence data to the Centers for Medicare and Medicaid Services, or CMS, to fulfill CMS' quality measure reporting requirements for those data. A comprehensive list of purposes can be found using the website link listed on this slide.

Assurance of confidentiality is provided by the Public Health Service Act. NHSN takes confidentiality very seriously and makes every effort to protect all the facilities that participate.

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NHSN is divided into five components. This includes Patient Safety, Healthcare Personnel Safety, Vigilance, Long-Term Care Facility, and Dialysis. Each component can have multiple modules. This training is focusing on the Healthcare Personnel Safety Component, which consists of two modules -- the Healthcare Personnel Vaccination Module and the Healthcare Personnel Exposure Module. We'll discuss the Healthcare Personnel Vaccination Module during this presentation.

As we've seen on the previous flowchart, there are two modules within the Healthcare Personnel Safety Component. The Influenza Vaccination Summary is located within the Healthcare Personnel Vaccination Module. Staff members and healthcare facilities can use the Influenza Vaccination Summary to monitor influenza vaccination percentages among healthcare personnel. Please note that the summary (level) reporting replaces individual (level) reporting of vaccination status for healthcare personnel which was previously available through NHSN.

Now we will go through the Healthcare Personnel Influenza Vaccination Summary. Healthcare facilities can use the Healthcare Personnel Vaccination Module within NHSN to enter Healthcare Personnel Influenza Vaccination Summary data. It's designed to ensure that Healthcare Personnel Influenza Vaccination Reported Coverage is both consistent over time within a single healthcare facility and comparable across facilities.

Using NHSN reporting requirements to monitor influenza vaccination among healthcare personnel may also result in increased influenza vaccination uptake among healthcare personnel. And this is because improvements in tracking and reporting healthcare personnel influenza vaccination status will allow healthcare institutions to better identify and target unvaccinated healthcare personnel. Increased influenza vaccination coverage among healthcare personnel is expected to result in reduced morbidity and mortality related to influenza virus infection.

Data collected on denominator and numerator categories. To be included in the denominator, healthcare personnel must be physically present in the facility for at least one working day between October 1st through March 31st. This includes both full-time and part-time healthcare personnel. There are three required denominator categories: Employees, Licensed Independent Practitioners, and Adult Students, Trainees, and Volunteers. Facilities are required to collect data on influenza vaccinations, medical contraindications, clinicians, and unknown status for the numerator categories. Each facility must report all numerator categories for the three required denominator categories.

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The next slides will provide an overview on how to get started in the Healthcare Personnel Vaccination Module of the Healthcare Personnel Safety Component. Now we'll talk about how to use a Healthcare Personnel Safety Component. First, we'll go over some key roles in NHSN.

The facility administrator is the person enrolling the facility in NHSN and is the only person who can activate additional components for a facility. The administrator also has add, edit, and delete rights to facility data, users, and users' access; has the authority to nominate or join groups for data sharing; and is the only person who can reassign the role of a facility administrator to another user. There can only be one facility administrator per facility.

Users have the ability to view, enter, and analyze data, but these rights are determined by the facility administrator. Users may also be given administrative rights.

For facilities to participate in the Healthcare Personnel Safety Component, they must either enroll in NHSN or activate the Healthcare Personnel Safety Component in NHSN. Enrollment in NHSN is required for facilities that are currently not participating in NHSN but wish to participate. Please follow the link on this slide for more information on enrollment. And during the enrollment process, facilities may choose to participate in any of the NHSN components.

Please note that the only component in NHSN necessary for reporting healthcare personnel influenza vaccination data is the Healthcare Personnel Safety Component. If a facility is already enrolled in NHSN and wishes to participate in the Healthcare Personnel Safety Component, the facility must activate the component within NHSN.

If your facility is not enrolled in NHSN, you must designate an individual to be your NHSN facility administrator and then complete the five-step enrollment process. If your facility is already enrolled in NHSN, you must get in contact with your NHSN facility administrator and ask him or her to activate the component. And if you're unsure of your facility status within NHSN, please send an email to [nhsn@cdc.gov](mailto:nhsn@cdc.gov) for more information.

Ambulatory surgery centers must complete a five-step enrollment process. First, they must read the NHSN Facility Administrator Guide. The next step is to register by agreeing to the NHSN rules of behavior and then registering the facility using your CMS certification number, or CCN. The third step involves registering with the Secure and Access Management Services, or SAMS, after reviewing and accepting the SAMS rules of behavior and submitting identity proofing documentation. We'll further discuss SAMS a bit later in the presentation. After receiving your SAMS card, you will need to log in to

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SAMS, select NHSN Enrollment, and submit enrollment information. The last step involves signing the consent form and sending it to CDC. More details about the process can be found using the link on this slide.

We'll now talk about activating the Healthcare Personnel Safety Component. Please note that it is only necessary to activate this component for facilities that are currently enrolled in another component, such as the Patient Safety Component. To activate the Healthcare Personnel Safety Component, the facility administrator logs into SAMS. Please note that only the NHSN facility administrator can activate a new component.

Next, click on **NHSN Reporting** from the SAMS log-in page. From the home page, the facility administrator will select the **Add/Edit** component under the **Facility** tab. Next, the facility administrator will check the **Healthcare Personnel Safety Component** box. The facility administrator can then add the name, phone, email, and address for this person so that he or she can be reached if CDC or NHSN has updates or questions about the Healthcare Personnel Safety Component.

The facility administrator can then add their primary contact and the user within NHSN facility. To do so, the facility administrator should click **Users** on the navigation bar, and then click **Add**. Next, the facility administrator should complete the mandatory fields for the **Add User** screen. And this consists of the user I.D., first name, last name, and email address. Other users can be added by the facility administrator or the new Healthcare Personnel Safety Component primary contact. The facility administrator should also make sure that at least one Healthcare Personnel Safety Component user has administrator rights, and, in general, this should be the Healthcare Personnel Safety Component primary contact. Users with administrator rights will be able to add additional Healthcare Personnel Safety Component users and share data using the group function for the Healthcare Personnel Safety Component.

The Edit User Right screen should appear after you save the new user information. The user with the administrative rights can then select the level of rights to confer to the user. This step must be completed for new users to have access to any system feature within the Healthcare Personnel Safety Component. Please be sure to confer the proper rights to the users.

New users to NHSN must register with the SAMS and will automatically receive identification to SAMS after being added as a user to their facility. After receiving identification to register, individuals will need to complete and submit identity verification documents to CDC. You will receive confirmation once these documents are approved. And the SAMS grid card will be delivered to your home address. You'll then be able to access NHSN using

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your SAMS credentials. You can find more information about the SAMS process using the link that's listed on this slide.

Now we'll review the specific reporting requirements for Healthcare Personnel Influenza Vaccination Summary data. The Healthcare Personnel Influenza Vaccination Summary protocol provides guidance for a facility to collect and report Influenza Vaccination Summary data for the Healthcare Personnel Vaccination Module. It includes comprehensive information about reporting requirements and specifications such as numerator and denominator categories, methodology, data analyses, and key terms. Each facility should thoroughly review the protocol before collecting and entering data in NHSN.

As mentioned previously, there are three required denominator categories. One category consists of employees who are staffed on the facility's payroll, while the other two categories consist of non-employees. One non-employee category is Licensed Independent Practitioners and the other non-employee category includes Adult Students, Trainees, and Volunteers. To be included in the denominator, all healthcare personnel must be physically present in the facility for at least one working day during the reporting period. And this is between October 1st through March 31st. And this slide shows the top portion in the healthcare personnel vaccination summary form which listed denominator categories. Employees are defined as all persons receiving a direct paycheck from the healthcare facility, regardless of clinical responsibility or patient contact.

The second denominator category consists of non-employee, licensed independent practitioners. Specifically, these are our physicians and advanced practice nurses and physician assistants who are affiliated at the healthcare facility but are not on the facility's payroll. And that's also regardless of clinical responsibility or patient contact. And this category also includes post-residency fellows.

The third denominator category consists of non-employee, adult students, trainees, and volunteers who are aged 18 and older. This is defined as medical, nursing, or other health professional students, interns, medical residents, or volunteers who are aged 18 or older that are affiliated with the healthcare facility but are not on the facility's payroll. And this is also regardless of clinical responsibility or patient contact.

The fourth denominator category consists of non-employee contract personnel. And reporting for this category is optional at this time. Contract personnel are defined as persons providing care, treatment, or services at the facility or contract and who do not fall into any of the other denominator categories. Some examples include dialysis technicians, occupational therapists, admitting staff, and pharmacists. Please refer to appendix A of the Healthcare Personnel

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Influenza Vaccination Summary protocol for a suggested list of contract personnel.

If a facility decides to report contractor data, it can know which categories of contract personnel are included in their data by using the comments function in NHSN. And we'll note this later in the presentation.

The numerator includes healthcare personnel who receive an influenza vaccination during the time from when the vaccine became available; for example, August or September through March 31st of the following year. There are five numerator fields in the NHSN module, and these are mutually exclusive. This slide shows the numerator categories as they appear on the Healthcare Personnel Influenza Vaccination Summary form. The categories include influenza vaccination received at this healthcare facility or elsewhere, medical contraindications, declinations, and unknown vaccination status.

The first numerator category is healthcare personnel who receive an influenza vaccination either at this healthcare facility or elsewhere. Please note that these are two separate fields in the module. The first field includes healthcare personnel who receive influenza vaccination at the healthcare facility since the vaccine became available for that season. The second field includes healthcare personnel who are vaccinated outside the healthcare facility since the vaccine became available that season, and they provided a written report or documentation of influenza vaccination. Acceptable forms or documentation include a signed statement or form, an electronic form or email from the healthcare worker, or a note receipt or a vaccination card from the outside vaccinating entity. Please note that verbal statements are not acceptable for the module.

The second numerator category is healthcare personnel who have a medical contraindication to the influenza vaccine. For this measure, for an activated influenza vaccine, accepted contraindications include a severe allergic reaction after a previous vaccine dose or to the vaccine component, which includes egg protein or a history of GBS within six weeks after a previous influenza vaccination. Healthcare personnel who have a medical contraindication to live attenuated influenza vaccine other than a severe allergic reaction to a vaccine component or history of GBS within six weeks after previous influenza vaccine should be offered inactivated influenza vaccine by their facility if that's available.

The medical contraindications stated above are the only accepted contraindications for this module. Please note the documentation is not required for reporting a medical contraindication. So, verbal statements are acceptable.

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The third numerator category is healthcare personnel who are offered and declined to receive influenza vaccine. Documentation is not required for reporting declinations. The fourth numerator category is healthcare personnel with unknown vaccination status or they did not meet any of the criteria for the other numerator categories.

This slide reviews a few points about the reporting requirements. Facilities are only required to report data once at the conclusion of the reporting period, which is from October 1st through March 31st. Healthcare personnel who are physically present in the healthcare facility for at least one working day between the reporting period date of October 1st through March 31st are included in the denominator. Therefore, healthcare personnel who always work offsite or out-of-state should not be counted since they are not physically working in the facility.

Healthcare personnel in the denominator population who received an influenza vaccination during the time from when the vaccine became available, for example, August or September through March 31st the following year, are counted as vaccinated in that category numerator since influenza vaccine for a given influenza season may be available as early as August through September.

Please note that the denominator categories are mutually exclusive. The numerator data are to be reported separately for each of the denominator categories. It's also important to remember that the numerator data are mutually exclusive. The sum of the numerator categories should equal the denominator for each healthcare personnel group.

And so now, I will turn things over to my colleague, Amy Schneider-Webb, and she'll be reviewing the remaining slides for the webinar.

Amy Schneider-Webb: Thanks, Elizabeth. My name is Amy Webb, and I work as a contractor in the Division of Healthcare Quality Promotion at CDC. We'll now go over data entry in NHSN.

After a facility has enrolled in NHSN and/or has activated the HPS component and added users, staff members at each facility must complete two required forms: the Healthcare Personnel Safety Monthly Reporting Plan Form and the Healthcare Personnel Safety Influenza Vaccination Summary Form. The seasonal survey on influenza vaccination programs is not required. However, facilities are encouraged to complete the short survey, as the information will be very helpful to CDC.

The survey aims to gather information on influenza vaccination programs for healthcare personnel by collecting data on the types of personnel groups that

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are included in a facility's annual influenza vaccination campaigns, the message the facility is using to deliver the influenza vaccine to its healthcare personnel, strategies -- and strategies the facility uses to promote or enhance healthcare personnel influenza vaccination.

Now we will go over how to navigate through NHSN. You can access the activity homepage by clicking on the link listed at the slide. You will then enter your SAMS username and password, followed by your SAMS grid card numbers. If you have any questions or need assistance with using SAMS, please contact the SAMS help desk using the toll-free number here listed on the slide, or the email address.

This slide shows the NHSN homepage. Select the appropriate component, which is the **Healthcare Personnel Safety Component**, and then the facility from the drop-down boxes. Next, you would click **Submit** to proceed. While you're navigating through NHSN, make sure to use the NHSN buttons and not the web browser buttons. Also, you can see which facility, user, and component are in use at the top of the screen.

This slide shows the Healthcare Personnel Safety Component homepage. You will see that there's a navigation bar on the left-hand side of the webpage which you will use to access different parts of the module. The Monthly Reporting Plan collects data on the modules and months the facility plans to participate. **Influenza Vaccination Summary** should be selected for the plan, and that information will be automatically updated for the entire influenza season as defined by NHSN, which should be July 1st through June 30th. After the initial monthly reporting then has been added for that influenza season, the user will not need to add any other reporting plan. However, please note that the Monthly Reporting Plan must be completed once each influenza season before any Influenza Vaccination Summary data can be entered.

Please note this slide shows what ASCs will see on their screen and then in NHSN when adding Monthly Reporting Plans. To add a Monthly Reporting Plan, click **Reporting Plan** and then **Add** on the navigation bar. Then you'd select the correct month and year from the drop-down menu. The user would then check the box next to Influenza Vaccination Summary under the Healthcare Personnel Vaccination Module. After making the appropriate selection, the user must click **Save**.

Each facility will use the Healthcare Personnel Influenza Vaccination Summary form to collect summary data. The NHSN module contains a single data entry screen to input summary data for each influenza season. When a user enters data, all previously entered data for that season will be overwritten. A modified date will be auto-filled by the system. Therefore, if a facility would like to keep track of its monthly numbers, it should maintain its own

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record of this, as it will not be able to review monthly reporting numbers in NHSN.

CDC and NHSN encourages that Healthcare Personnel Influenza Vaccination Summary count be updated on a monthly basis. However, as mentioned earlier, entering a single Influenza Vaccination Summary report at the conclusion of the measure reporting period will meet the minimum data requirements for NHSN participation. The user will see that the NHSN data entry screen is set up similar to the layout of the Healthcare Personnel Influenza Vaccination Summary form. Question one on the form pertains to the denominator, while question two through six pertain to the numerator.

The tables and instructions for the Influenza Vaccination Summary provide instructions and complete definitions for each field for the denominator and numerator categories in the module. This document is located within the Influenza Vaccination Summary protocol.

This slide highlights the employee category. The user can see that the definition of an employee is on the right-hand column. To enter summary data, go to **Add** under **Flu Summary** on the navigation bar. Click **Continue** to proceed, as Influenza Vaccination Summary data appears as the D12 option on the drop-down menu. Please remember that you will not be able to answer any summary data until you have first added your Monthly Reporting Plan.

This is what ASCs will see on their screen in NHSN when they're adding an Influenza Vaccination Summary record. You must complete all fields marked with an asterisk on this page. Influenza and Seasonal are the default choices for the vaccination type and the influenza subtype. The user will then select the appropriate flu season in the drop-down box, for example, 2014 through 2015.

This slide shows what the data entry screen looks like in the NHSN module. The asterisk on the screen indicates a column that must be completed. Users can use the Tab key on a computer keyboard to move across the column. Users should enter zero in a field if no healthcare personnel at that facility fall into that category. Staff members at facilities can use a custom field function for data they'd like to collect and analyze consistently, such as additional detail on specific types of healthcare personnel. The comments box can be used to enter additional information, usually side notes, or reminders. However, the information entered in the comments box will not be analyzed.

If your facility would like to track subsets of individuals within NHSN, such as nurses and physicians, the custom field option can be used to keep a separate count for your own purposes. Using the custom field function is optional, and we will briefly review these steps in using this field.

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First, go to **Customize Forms** under **Facility** on the navigation bar. You should make sure that the mandatory field or form type, form description, and status are completed. Next, you should enter a label or a variable name for the custom field. You will also select the type of each custom field, which will be alphanumeric, numeric, or date field. After this, you will designate which field is active or inactive. Active indicates that the custom field will be available for use on the form. Inactive indicates that user will see the custom field on the form, but it will not be available for use. Lastly, you should click the **Save** button when finished.

After clicking **Save**, a message will appear at the top of their screen, indicating that the custom field has been successfully updated. The user will now be able to see the custom field at the bottom of the data entry screen.

For each update of Influenza Vaccination Summary Data after the initial entry, you'll see a message at the top of your screen, indicating that a record of the summary data already exists. The data last modified shows when the data were last entered and saved. Click **Edit** at the bottom of the screen for modifying existing data.

Once complete, be sure to save the updated data by clicking **Save** at the bottom of the screen. This is confirming that your data has been saved. This will appear at the top of your screen. The date last modified will also be automatically updated by NHSN.

We will now go over the data analysis features for the Healthcare Personnel Influenza Vaccination Summary. To view data, go to **Generate Datasets** under **Analysis** on the navigation bar. Click **Generate New** and then select **OK** when a message appears on your screen that says, "The current datasets will be overwritten. Are you sure you want to continue?" Users should generate a new dataset after each time they enter new data into the system.

Next, go to **Output Options** under **Analysis** on the navigation bar. You will see several folders on the screen. Click on the **HCW Vaccination Module Influenza** and **CDC Defined Output** folders. To view the default output, click **Run** to see the total numbers or summary count, percentages, vaccination compliance figures, and vaccination noncompliant figures.

The user can see the summary counts listed by influenza season and by variable. This example shows that 400 employees worked during the required time period during the 2011/2012 influenza season, while 25 employees worked during the required time period during 2012/2013 influenza season. Two overall totals are represented, one number includes the total number of healthcare personnel working without other contract personnel, which is 420 healthcare personnel for the 2011/2012 influenza season. Another number

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shows the total number of healthcare personnel working with other contract personnel, which is 427 healthcare personnel for the 2011/2012 influenza season.

Please note that reporting contractor personnel is not currently required. Therefore, it's fine if **Zero** is entered for the number of contractors, even if there are contractors working in a given facility.

Facilities can visit the NHSN website using the link on this slide. The website contains links to the protocol, data collection form, frequently asked questions, comprehensive training slides, and recorded trainings for the Healthcare Personnel Influenza Vaccination Summary reporting.

If you have any questions about NHSN, please send an email to User Support at [nhsn@cdc.gov](mailto:nhsn@cdc.gov). You should also include HPS flu summary in the subject line of your email and specify that you are an ASC, as this will help us to better assist you.

Reneé Parks: Thank you, Amy and Elizabeth. And now, we will share some of the questions that we received during the presentation. And the first question is: What identity proofing documents are required for the SAMS process?

Amy Schneider-Webb: Sure, I can take that one. So, users will submit identity proofing documents as part of the SAMS process. That includes the identity verification form and supporting documents, such as a driver's license or a passport. However, more information about the SAMS process can be found at this URL I'm about to read. But this URL can also be found in the chat window, or you'll be able to see it published in the final transcript of the webinar. So, the URL for your reference is [www.cdc.gov/nhsn/sams/about-sams.html](http://www.cdc.gov/nhsn/sams/about-sams.html). Again, you can find that full URL in the chat box or in the transcript of this webinar today.

Reneé Parks: Thank you, Amy. That was certainly a mouthful, and we greatly appreciate that. And as Amy stated, it will be – should be popping up in your chat window so that it will be displayed for all to see. And then again, it will be in the final transcript.

As we take a look at some of the other questions that we have received during the presentation, another one is: Do I need to report data each month?

Elizabeth Kalayil: Hi, Reneé. That's a great question. Healthcare Personnel Influenza Vaccination Summary reporting actually consists of a single data entry screen per flu season. So, this can actually be entered at any time during the influenza season. And that's defined by NHSN as July 1st through June 30th. So, monthly reporting in NHSN is not required. And entering the single Influenza Vaccination Summary report at the end of the reporting period for the influenza season will meet the minimum data requirements for participation.

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- Reneé Parks: Thank you, Elizabeth. And another one similar in that same vein, and I know it was referenced in the presentation, is: Which month and year should I select on the Monthly Reporting Plan for the Healthcare Personnel Vaccination Module?
- Elizabeth Kalayil: Well, users can select any month within the current influenza season. So, it's fine if someone enters a single summary report for one month. So, for example, they may enter March of 2015. And, unlike the other NHSN components and modules, when Influenza Vaccination Summary is selected on one of the reporting plans, the information is automatically updated on all of the reporting plans for the entire influenza season. So, adding other reporting plans after the initial plan has been added for that influenza season is not necessary.
- Reneé Parks: Thank you, Elizabeth. Great information. Another one looks, like, similar is: When trying to enter data in NHSN, why do I receive an error message stating that a plan does not exist with Influenza Vaccination Summary for flu season entered?
- Elizabeth Kalayil: That's also a great question. Individuals who are receiving that message are receiving it because they have not added the Monthly Reporting Plan. And so, to add the plan, they would need to click **Reporting Plan** and then add on the NHSN navigation bar, and that's after logging into the Healthcare Personnel Safety Component. And then after you do that, you would select a month and year from the drop-down menus. And you can select any month and year from the current influenza season.
- So then, they would check the box next to Influenza Vaccination Summary under the Healthcare Personnel Vaccination Module. And then click **Save**. After this, they can proceed to enter their data.
- Reneé Parks: So, they must do that first before they can then enter their data? Did I understand what you just went through?
- Elizabeth Kalayil: Yes, that's correct.
- Reneé Parks: Great. What about: Do I count healthcare personnel members who are not working with patients but, because of staff meetings and other potential meetings in the facility, they are physically in the facility but not employed by the facility?
- Elizabeth Kalayil: Well, you should count healthcare personnel who physically work in the facility and if you perform any work duty in the facility for at least one day from October 1st through March 31st and you meet the NHSN protocol definitions, and that's regardless of clinical responsibility or patient contact. So, for example, you should count a healthcare worker who has official

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responsibility in the facility for at least one day from October 1st through March 31st, such as attending regularly scheduled meetings. But you would not need to count healthcare personnel who are not officially in the facility for work duties, for example, a personnel who may be only coming into the facility to have lunch.

Reneé Parks: Thank you. Great information. And another one pertaining to employees: Should I count an employee who starts working at my facility after October 1st or leaves this position or their position after October 1st?

Elizabeth Kalayil: Yes. All employees, non-employee licensed independent practitioners, and non-employee students and volunteers who are aged 18 or older who physically work at the facility for at least one day during the reporting period should be counted, regardless of exact stop-to-start date.

Reneé Parks: Great. Thank you so much, Elizabeth. Then let's see, let me take a look. Another question that's coming in is: Why is the reporting period for the denominator different from the numerator -- for the numerator?

Elizabeth Kalayil: Yes. The numerator includes healthcare personnel who receive an influenza vaccination during the time from when the vaccine became available, which would be August or September through March 31st of the following year. So, the reporting time frame for the denominator is from October 1st through March 31st. And the reason the numerator and denominator cover different time periods is to account for potential delays in vaccine availability.

Reneé Parks: Great. Thank you. And I think we'll take this one last question, and that is: If a healthcare worker was vaccinated at his or her doctor's office in August, should he or she be included?

Elizabeth Kalayil: Yes. This healthcare worker should be counted in the numerator since influenza vaccine for a given influenza season may be available as early as July or August. So, the strict reporting period for the measure, October 1st through March 31st, actually applies to the denominator.

So, this healthcare worker would be required to provide documentation of influenza vaccination and also would be counted in the vaccinated outside of the healthcare facility category. So, if the healthcare worker did not provide acceptable documentation, then he or she would be counted as unknown.

Reneé Parks: Thank you, Elizabeth. Great information. And I want to – that you both presented today. And I would like to move on now, so that we are going to wrap up the presentation. So, thank you both again for the great information you presented, and we would like to remind everyone that today's webinar has been approved for one continuing education credit by the boards which are on the current slide.

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We now have an online CE certificate process, as you can see from this slide, where you can receive a CE certificate in two ways. First, if you registered for this webinar through ReadyTalk, a survey will automatically pop up when the webinar closes. That survey will then take you to your certificate. The second way is we will also be sending out the survey link in an email to all participants within the next 48 hours. And if others are listening to this event that are not registered in ReadyTalk and were in the room with you as you were reviewing and listening to the webinar, please pass that survey on to them.

On the next slide, you will see that this is what the survey will look like as it appears. It will pop up again at the end of this event and will be sent to all attendees within 48 hours. Once it's completed, click on the **Done** button, the radio button at the bottom of the page when you are finished.

This will be the next screen that will pop up after you click **Done** on the previous page. If you have already attended one of our webinars and received CE, then please click **Existing User**. If this is your first webinar for credit, click **New User**.

This will take you to the next pop up window. This is what the new user screen looks like. Please register a personal email like one from Yahoo or Gmail, since those accounts are typically not blocked by hospital firewalls. Remember your password since you will use it for all future events.

On the next slide is just what you will see if you have been attending some of our webinars in the past. This is what the existing user screen looks like. Use your complete email address as your user I.D. and password that you registered with. Once you select that, it will take you to your certificate where you can then print it.

We want to thank our speakers again today, Amy and Elizabeth, from the CDC, and all of the valuable information that they provided and shared with us today. We hope that you have heard some useful information that will assist you when registering and reporting for the ASC-8 measure. Thank you again, and enjoy the rest of your day.

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