



# Ambulatory Surgical Center Quality Reporting Program

---

## Support Contractor

### Healthcare Personnel Safety Component Healthcare Personnel Vaccination Module Influenza Vaccination Summary

#### Presentation

##### Moderator:

Karen VanBourgondien  
Project Coordinator, HSAG

##### Speakers:

Elizabeth Kalayil, MPH  
Public Health Analyst, Centers for Disease Control and Prevention  
Parneet Ghuman, MPH  
Public Health Analyst, Centers for Disease Control and Prevention

**October 26, 2016**  
**2:00 p.m.**

**Karen**

**VanBourgondien:** Hello, and welcome to the Ambulatory Surgical Center Quality Reporting Program webinar. Thank you for joining us today. My name is Karen VanBourgondien, an education coordinator for the ASC Quality Reporting Program.

[I will] take a few minutes to announce a few things here on the slide. On November 30th, we will be presenting a webinar discussing the final rule. This will provide clarity on any upcoming changes to this program, and that will be presented by CMS. On December 15, we will be presenting a webinar going over all of the changes in the Specifications Manual over the course of the last year. This will be valuable information and will assist you in abstracting and reporting for this program.

Now without further ado, let's turn our attention to the presentation today. We are very fortunate to have Elizabeth Kalayil and Parneet Ghuman with the

# Ambulatory Surgical Center Quality Reporting Program

---

## Support Contractor

CDC to offer this presentation today. Their insight, knowledge, and expertise are invaluable to the reporting of the ASC-8 measure. It is my pleasure to introduce our first speaker, Elizabeth Kalayil. Elizabeth?

**Elizabeth Kalayil:** Thank you, and welcome to the Healthcare Personnel Safety Component training session for the Influenza Vaccination Summary of the Healthcare Personnel Vaccination Module. My name is Elizabeth Kalayil, and I work as a contractor in the Immunization Services Division at CDC. 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 the presentation will outline how facilities can verify their data entry in NHSN.

So 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, Division of Healthcare Quality Promotion. The purposes of NHSN are to collect data from a sample of healthcare facilities to permit valid estimations of the magnitude of adverse events and adherence to practices to prevent adverse events. NHSN also analyzes and reports the data collected to permit recognition of trends and provide facilities with data that could be used for any facility comparisons and local quality improvement activities.

NHSN also enables healthcare facilities to use the system to report healthcare associated infections and prevention practice adherence data to the Centers for Medicare & 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 the slide.

# Ambulatory Surgical Center Quality Reporting Program

---

## Support Contractor

NHSN is divided into five components: Patient Safety, Healthcare Personnel Safety, Biovigilance, 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 will discuss the Healthcare Personnel Vaccination Module during this presentation.

As shown in 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 in healthcare facilities can use the Influenza Vaccination Summary to monitor influenza vaccination percentages among healthcare personnel.

So now we will go over some basic elements in 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 is 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 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 are 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

# Ambulatory Surgical Center Quality Reporting Program

---

## Support Contractor

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, declinations, and unknown status for the numerator categories. Each facility must report all numerator categories for the three required denominator categories.

The next slides provide an overview on how to get started in the Healthcare Personnel Vaccination Module of the Healthcare Personnel Safety Component. First, we'll go over some key roles in NHSN. The Facility Administrator is the person who enrolled the facility in NHSN and is the only person who can activate additional components for a facility. The Facility Administrator also has add, edit, or delete rights to facility data, users, and users' access. The Facility Administrator has the authority to nominate or join groups for data sharing, and is the only person who can reassign the role of Facility Administrator to another user. Please note that there can be only one Facility Administrator per facility.

Beyond the NHSN Facility Administrator, facilities can add individual users. These users can 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. NHSN highly recommends that facilities add at least one additional user to the NHSN facility beyond the NHSN Facility Administrator. We'll discuss how to add additional users later on in the presentation.

For facilities to participate in the Healthcare Personnel Safety Component, they must enroll in NHSN and activate the Healthcare Personnel Safety Component in NHSN. Enrollment in NHSN is required for facilities that are currently not participating in NHSN and wish to participate. Please follow the link on the slide for more information on enrollment.

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

# Ambulatory Surgical Center Quality Reporting Program

---

## Support Contractor

Healthcare Personnel Safety Component. If the facility is already enrolled in NHSN and wishes to participate in the Healthcare Personnel Safety Component, the facility must complete the one-time Healthcare Personnel Safety Component activation process within NHSN. This will be discussed later in the presentation.

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 Healthcare Personnel Safety Component. If your ASC completed the submission of the healthcare personnel influenza vaccination summary data for the 2015-2016 influenza season, your ASC is most likely already enrolled in NHSN and has already activated the Component. Therefore, no additional enrollment or activation steps are needed. If you are unsure of your facility's status within NHSN, please email [nhsn@cdc.gov](mailto:nhsn@cdc.gov) for more information.

Many ASCs are already enrolled in NHSN, but the ASCs that are new to this reporting must complete the five-step enrollment process. We will not be reviewing their enrollment process in this presentation; however, we have included this information in previous presentations. These resources are available on the [www.qualityreportingcenter.com](http://www.qualityreportingcenter.com) website under the Archived Events tab as well as on the NHSN website. Please note that the process of enrolling a new facility can take a minimum of four to six weeks, so new facilities are encouraged to enroll well in advance of the reporting deadlines. Details about the NHSN enrollment process can be found using the link listed on the slide.

We will now briefly talk about activating the Healthcare Personnel Safety Component. Please note that this component only needs to be activated one time. Only the NHSN Facility Administrator can activate a new component. During this process, the Facility Administrator will add the Healthcare Personnel Safety Component Primary Contact as a user within the NHSN facility. It is important to keep the contact information for both the Facility

# Ambulatory Surgical Center Quality Reporting Program

---

## Support Contractor

Administrator and Primary Contact updated, especially when there is staff turnover, so that the correct individuals can be reached if CDC or NHSN has updates or questions about the Healthcare Personnel Safety Component data. Facilities are encouraged to review the comprehensive training sites for more information about activating this component.

As previously stated, NHSN recommends that there be at least two people with access to your NHSN facility at all times. Any current user with administrative rights, which includes the NHSN Facility Administrator, can add a new user to the NHSN facility. To add an additional user to your NHSN facility, click on **Users** and then **Add** on the left-hand navigation bar. On the Add User screen, complete all fields that are marked with an asterisk. The user ID can be any combination of letters and numbers. For example, the user's first initial and the last name of the user's internal employee ID number. Next, please enter the user's first name, last name, phone number, and email address, then click on **Save**.

The Edit User Rights screen will appear after you save the new user information. Select the appropriate level of rights to give to a new user. This step must be completed for new users to have access to any system features within the Healthcare Personnel Safety Component.

To combat NHSN access issues due to staff turnover, vacation, or extended leave, we recommend that each facility have at least two individuals who can at least add, edit, delete, and analyze the healthcare personnel influenza vaccination summary data in NHSN. If you aren't sure about the level of user rights to assign to a new user, please contact the NHSN Helpdesk for assistance.

Once the new user information has been saved, that user will receive an automated "Welcome to NHSN" email with the instructions to begin the process of becoming an NHSN user. After agreeing to the NHSN Rules of Behavior, the new user will receive an automated email to register at SAMS.

# Ambulatory Surgical Center Quality Reporting Program

---

## Support Contractor

SAMS stands for Secure Access Management Services, and provides secure online access to CDC applications such as NHSN. All NHSN users are required to complete the same SAMS identity verification process prior to gaining access to NHSN. After registering with SAMS, the new user receives instructions to create a SAMS account and complete an identity verification process. During this process be sure to follow the instructions carefully to prevent delay in process documentations.

You will receive confirmation from SAMS once these documents are approved. The SAMS Grid Card will be delivered to your home address. You will then be able to access your NHSN facility using your SAMS credentials. Please keep in mind that the new user has 30 days to begin the SAMS registration process and 60 days to return the identity proofing documentation. If those deadlines are not met, users will need to reach out to the NHSN Helpdesk to be re-invited to SAMS to start the process from the beginning.

Please note that it will take at least two to three weeks for a new user to be able to access NHSN. CDC recommends that new users begin the on-boarding process well in advance of the reporting deadline.

Users should be sure to log in to NHSN using their SAMS card at least one time each year so that it will remain active. Please note that if your account is inactive and you try to enter your data, then this may delay your reporting. Because the SAMS card is user-specific and not facility-specific, an individual with user access to multiple NHSN facilities through the same email address could enter data into multiple NHSN facilities using the same single SAMS card. Additionally, an individual can keep their SAMS card and simply change the email address on the SAMS account if they should begin working at a new facility. More information about the SAMS process can be found using the link listed on the slide.

NHSN highly recommends that if there is a change in the Facility Administrator, he or she should transfer that role to another user in NHSN prior to leaving the facility. This saves a significant amount of time for the

# Ambulatory Surgical Center Quality Reporting Program

---

## Support Contractor

newly designated Facility Administrator and prevents a gap in access to your NHSN facility. If the previously designated NHSN Facility Administrator has left your facility prior to reassigning that role to another person, you will need to reach out to the NHSN Helpdesk to have that manually reassigned to the new NHSN Facility Administrator.

To complete this process, a letter must be faxed to the NHSN Helpdesk using the number listed on this slide. The letter should be from an official at your facility requesting that you be assigned as the new NHSN Facility Administrator since the previous Facility Administrator is no longer with your facility. In addition to the name and email address of the new Facility Administrator, the letter should include the name and email address of the old Facility Administrator, as well as the facility name and five-digit NHSN ID number, if known. Please do not re-enroll this facility in NHSN.

After the NHSN Helpdesk receives the fax and completes the reassignment, the newly designated Facility Administrator will receive the “Welcome to NHSN” email to start the new NHSN user on-boarding process. If the newly assigned Facility Administrator was already an NHSN user with a SAMs grid card, then no further action is required.

Now we will review the specific reporting requirements for the Healthcare Personnel Influenza Vaccination Summary. 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 of 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 into NHSN.

As mentioned previously, there are three required denominator categories. One category consists of employees who are staff 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

# Ambulatory Surgical Center Quality Reporting Program

---

## Support Contractor

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 that is between October 1st through March 31st. This slide shows the top portion of the Healthcare Personnel Influenza Vaccination Summary form, which lists the 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, physicians, advanced practice nurses, and physician assistants who are affiliated with the healthcare facility but are not on the facility's payroll. And that is regardless of clinical responsibility or patient contact. This category also includes post- residency fellows.

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

The fourth denominator category consists of non-employee contract personnel. Reporting for this category is optional at this time. Contract personnel are defined as persons providing care, treatment, or services at the facility through a contract, but 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 Influenza Vaccination Summary Protocol for a suggested list of contract personnel. If the facility decides to report the contractor data, it can note which categories of contract personnel are included in the data by using the Comments function in NHSN.

The numerator includes healthcare personnel who received an influenza vaccination during the time from when the vaccine became available – for

# Ambulatory Surgical Center Quality Reporting Program

---

## Support Contractor

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 highlights the numerator categories as they appear on the Healthcare Personnel Influenza Vaccination Summary form. The categories include influenza vaccinations received at this healthcare facility or elsewhere, medical contraindications, declinations, and unknown vaccination status.

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

The second numerator category is healthcare personnel who have a medical contraindication to the influenza vaccine. For this measure, for inactivated influenza vaccine, accepted contraindications include a severe allergic reaction after a previous vaccine dose or to a vaccine component, including egg protein, or a history of Guillain-Barré Syndrome 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 Guillain-Barré Syndrome within six weeks after a previous influenza vaccination should be offered inactivated influenza vaccine by their facility, if available. Therefore, the medical contraindications stated above are the only accepted contraindications for this module. Documentation is not required for reporting a medical contraindication, and verbal statements are acceptable.

# Ambulatory Surgical Center Quality Reporting Program

---

## Support Contractor

The third numerator category is healthcare personnel who are offered and declined to receive the 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 other criteria for the other numerator categories.

This slide reviews a few points about 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 October 1st through March 31st are included in the denominator, because October 1st through March 31st is the reporting period. Therefore, healthcare personnel always working off-site or out-of-state should not be included 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 of 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 or 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 is important to remember that the numerator data are mutually exclusive. The sum of the numerator categories should be equal to the denominator for each healthcare personnel group. Now, I will turn things over to my colleague Parneet Ghuman who will be presenting the remaining slides for this webinar.

**Parneet Ghuman:** Thank you, Elizabeth. My name is Parneet Ghuman, and I work as a contractor in the Division of Healthcare Quality Promotion at CDC. We will

# Ambulatory Surgical Center Quality Reporting Program

---

## Support Contractor

now go over Healthcare Personnel Influenza Vaccination Summary data entry in NHSN.

After a facility has enrolled in NHSN, activated the Healthcare Personnel Safety Component, and added users, the facility must complete two required forms: the Healthcare Personnel Safety Monthly Reporting Plan form and the Healthcare Personnel 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 for the CDC. The survey aims to gather information on influenza vaccination programs for healthcare personnel by collecting data on types of personnel groups that are included in the facility's annual influenza vaccination campaign, methods a facility is using to deliver influenza vaccine to its healthcare personnel, and strategies a facility uses to promote and enhance healthcare personnel influenza vaccinations.

Now we will go over how to log into NHSN through SAMS. You can access the SAMS activity home page by clicking on the link listed on the slide. You will then need to enter your SAMS user name and password, followed by your SAMS grid card numbers. If you have any questions or need assistance with using SAMS, please contact the SAMS Helpdesk by phone or by email using the information listed on this slide.

This slide shows the NHSN landing page. Select the appropriate component which is **Healthcare Personnel Safety** and facility from the drop-down boxes. Next, click the **Submit** button to proceed. While you are navigating through NHSN, you should use the NHSN buttons and not the Web browser buttons. While navigating through NHSN, you can always see which facility, user, and components are in use at the top of the screen.

This slide shows the Healthcare Personnel Safety Component home page. You will see that there is a navigation bar on the left-hand side of the Web page which can be used to access different parts of the module.

# Ambulatory Surgical Center Quality Reporting Program

---

## Support Contractor

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 the information is automatically updated for the entire influenza season as defined by NHSN, which is July 1st to June 30th. After the initial monthly reporting plan has been added for that influenza season, the user will not need to add any other reporting plans. Please note that the monthly reporting plan must be completed once each influenza season before any influenza vaccination summary data can be entered.

This slide show what ASCs will see on their screen in NHSN when adding a monthly reporting plan. To add a monthly reporting plan, click **Reporting Plan** and then **Add** on the navigation bar. Select the correct month and year from the drop-down menus. If you are reporting data for the 2016–2017 influenza season, you can select **October 2016** for your monthly reporting plan. It is very important to correctly submit your monthly reporting plan, and this includes identifying the correct influenza season. Please note that reporting plans that identify the wrong influenza season will not allow your data to be submitted in fulfillment of CMS requirements.

The user should check the box next to Influenza Vaccination Summary under the Healthcare Personnel Vaccination Module. After making the appropriate selections, the user must click **Save**. As described earlier, after adding a reporting plan for one month of a given influenza season, NHSN automatically adds the remaining 11 months of reporting plans for that flu season. After adding the reporting plan for any month within the 2016-2017 influenza season, you should see reporting plans for July 2016 through June 2017 populated within your NHSN facility.

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

# Ambulatory Surgical Center Quality Reporting Program

---

## Support Contractor

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

The CDC and NHSN encourage that healthcare personnel influenza vaccination summary counts be updated on a monthly basis. However, as mentioned earlier, entering a single influenza vaccination summary report at the end 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 questions two through six pertain to the numerator.

The Table of Instructions for the Influenza Vaccination Summary provide instructions and complete definitions for each data 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 the definition of an employee in 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 default option on the drop-down menu. Please remember that you will not be able to add summary data until you have first added your monthly reporting plan.

This is what ASCs will see on their screen in NHSN when adding influenza vaccination summary data. You must complete all fields marked with an asterisk on this page. **Influenza** and **Seasonal** are the default choices for vaccination type and influenza subtype. The user would then select the appropriate flu season in the drop-down box. For example, if you are reporting data for the 2016–2017 influenza season, you must select **2016–2017** in the drop-down box. This is very important since the data submitted under the incorrect influenza season will not be shared with CMS and will not

# Ambulatory Surgical Center Quality Reporting Program

---

## Support Contractor

fulfill their reporting requirements. Facilities can always contact NHSN if they are unsure of which influenza season is currently being reported.

This slide shows what the data entry screen looks like in the NHSN module. The asterisks on the screen indicate the columns that must be completed. Users can use the tab key on a computer keyboard to move across columns. Users should enter a **0** (zero) in a field if no healthcare personnel at the facility fall into that category. The Comments box can be used to enter additional information, which are usually side notes or reminders. However, the information cannot be analyzed within NHSN. Once the data have been entered click the grey **Save** button to save the record. Please note that the summary record must be entered into NHSN prior to the May 15th reporting deadline in order to have your data shared with CMS to meet the ASC Quality Reporting Program requirement. Any data that are entered after the May 15th reporting deadline will not meet the submission requirements for the 2016–2017 influenza season for the ASC Quality Reporting Program.

For each update of the influenza vaccination summary data after the initial entry, you will see a message at the top of the screen indicating that a record of the summary data already exists. The Date Last Modified shows when the data were last entered and saved. If you would like to edit or update your facility data, simply click the **Edit** at the bottom of the screen for modifying existing data. Once you have completed these edits, please be sure to save the updated data by clicking the **Save** button at the bottom of the screen. You should see a message confirming that your data have 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 briefly review the steps facilities can take to verify that their data have been entered correctly and will be submitted to CMS. After the data have been entered into NHSN, users can verify that the data have been saved correctly by running the report within the NHSN Analysis feature. This report can be found in the CMS Reports folder under the Ambulatory Surgery Center subfolder. By clicking the grey **Run** button next to this report, the facility can review the healthcare personnel influenza vaccination data by influenza

# Ambulatory Surgical Center Quality Reporting Program

---

## Support Contractor

season stratified by healthcare personnel category, which includes employees, licensed independent practitioners, adult students, trainees, and volunteers, and all three categories combined. This report will show the exact information that will be submitted to CMS for your facility. Remember that by default, the results will appear in a separate HTML window. If a second window does not appear on your screen when you click the **Run** button, please be sure to check your pop-up blocker, and allow pop-ups from [cdc.gov](http://cdc.gov). Please refer to the link on the slide for the step-by-step guidance for running and interpreting this report.

In addition to running the CMS line listing described on the previous slide, ASCs can confirm two other pieces of information within NHSN to ensure their data will be shared with CMS appropriately. Both of these pieces of information can be confirmed on the Facility Information screen within NHSN. To get the Facility Information screen, click on **Facility** then **Facility Info** on the left-hand navigation bar. First, verify that the correct facility CMS Certification Number, or CCN and CCN Effective Dates have been entered correctly. Your CCN Effective Date should be the day your facility first received its CCN from CMS. If you cannot obtain that date but it was prior to January 1, 2016, please use January 1, 2016 as the CCN Effective Date.

You also need to ensure that your facility is enrolled in NHSN as the correct facility type. All ASCs should be enrolled as facility type AMB-SURG or (AMB-SURG). If your facility is not correctly enrolled, please contact [nhsn@cdc.gov](mailto:nhsn@cdc.gov) for assistance. This is very important, as only data from facilities enrolled as AMB-SURG will be shared with CMS. As long as your data appear in the CMS line listing for the current reporting period, your CCN and CCN Effective Dates are correct, and your facility is enrolled correctly, no further action is required on your part, and your data will be shared with CMS following the reporting deadline.

Please note that NHSN does not provide a confirmation email to facilities once they have submitted their data. In addition to following the steps on the previous slides, ASCs can use the NHSN Status Listing Tool using the link

# Ambulatory Surgical Center Quality Reporting Program

---

## Support Contractor

listed on this slide. To use this tool, enter the 10-digit facility CCN to determine if data were entered successfully. By entering the facility CCN, the tool will indicate “yes” if the facility is enrolled in NHSN and submitted data for the current reporting period. Please note that this tool is only updated periodically, and a date last updated is indicated on the website. If your data were entered into NHSN close to or after this date, it may not be reflected on this website. Therefore, you would need to wait until the next time the tool is updated to confirm your data. CDC also recommends that facilities maintain printed copies or screenshots of their data entry for their records.

Facilities can visit the NHSN website using the link on this slide. The website contains links to the protocol, data collection forms, frequently asked questions, comprehensive training slides, and recorded trainings for healthcare personnel influenza vaccination summary reporting. Please note that the comprehensive training slides include more details on topics such as NHSN enrollment, how to activate the Healthcare Personnel Safety Component, and data reporting and analysis features. Therefore, new facilities might find it helpful to also refer to these slides.

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 Healthcare Personnel Safety Flu Summary in the subject line of the email and specify that you are an ASC. This will help us to better assist you. This concludes the slide presentation for the webinar. I am going to turn it back over to Karen.

**Karen**

**VanBourgondien:** Thank you, Parneet. That was a very informative, comprehensive presentation. We really appreciate it. Again, thank you to both of our speakers, Elizabeth Kalayil and Parneet Ghuman. That completes our presentation for today. I am now going to turn it back over to our host for information on the CE process. Thanks again.