

# Welcome!

- **Audio for this event is available via ReadyTalk® Internet Streaming.**
- **No telephone line is required.**
- **Computer speakers or headphones are necessary to listen to streaming audio.**
- **Limited dial-in lines are available. Please send a chat message if needed.**
- **This event is being recorded.**



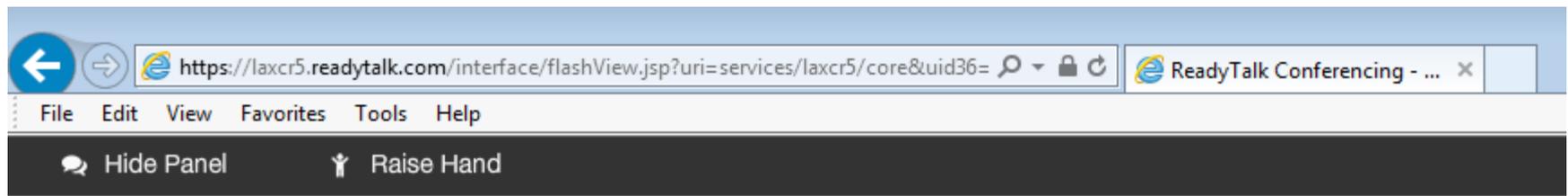
# Troubleshooting Audio

Audio from computer speakers breaking up?  
Audio suddenly stop?

- Click Refresh icon –  
or-  
Click F5



F5 Key  
Top row of Keyboard

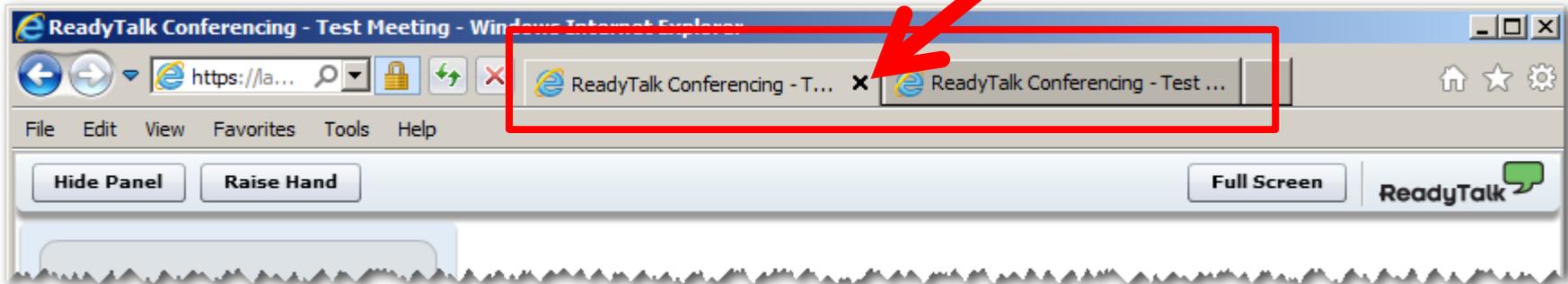


Location of Buttons

Refresh

# Troubleshooting Echo

- Hear a bad echo on the call?
- Echo is caused by multiple browsers/tabs open to a single event – multiple audio feeds.
- Close all but one browser/tab and the echo will clear up.



*Example of Two Browsers Tabs open in Same Event*

# Submitting Questions

Type questions in the “Chat with Presenter” section, located in the bottom-left corner of your screen.



A screenshot of a web interface for a CMS event. The interface is split into two main sections. The left section is a vertical chat window with a white background and a blue border. At the top of this window are buttons for "Hide Chat" and "Raise Hand". At the bottom, there is a text input field labeled "Type questions here." and a "Send" button. The right section has a grey background. At the top, it features the CMS logo (Centers for Medicare &amp; Medicaid Services). Below the logo, the text "Welcome to Today's Event" is displayed in a large, blue, sans-serif font. A horizontal yellow line separates this from the bottom section, which contains the text "Thank you for joining us today! Our event will start shortly." in a smaller, italicized, blue font. In the top right corner of the entire interface, there are buttons for "Full Screen" and "Ready to Go".



# **IPFQR Program: Collecting and Entering Healthcare Personnel Influenza Vaccination Data**

**Elizabeth Kalayil, MPH**

**Parneet Ghuman, MPH**

Public Health Analysts

Centers for Disease Control and Prevention (CDC)

**Evette Robinson, MPH**

Project Lead, Inpatient Psychiatric Facility Quality Reporting (IPFQR) Program

Value, Incentives, and Quality Reporting (VIQR)

Outreach and Education Support Contractor (SC)

**January 26, 2017**

# Purpose

During this presentation participants will receive:

- A brief description of the Influenza Vaccination Coverage Among Healthcare Personnel (HCP) measure as a requirement of the IPFQR Program
- Step-by-step instructions on how to complete the National Healthcare Safety Network (NHSN) enrollment and the Influenza Vaccination Coverage Among HCP measure data-submission processes
- Information on how facilities can verify data submission in the NHSN

# Learning Objectives

By the end of the presentation, attendees will be able to:

- Identify resources to complete NHSN enrollment and the Influenza Vaccination Coverage Among HCP measure data submission
- Verify the status of their facility's measure data submission

# Acronyms

<b>APU</b>	Annual Payment Update
<b>CAH</b>	Critical Access Hospital
<b>CMS</b>	Centers for Medicare & Medicaid Services
<b>CCN</b>	CMS Certification Number
<b>FAQs</b>	Frequently Asked Questions
<b>FR</b>	Final Rule
<b>FY</b>	Fiscal Year
<b>HCP</b>	Healthcare Personnel
<b>HPS</b>	Healthcare Personnel Safety
<b>IPF</b>	Inpatient Psychiatric Facility
<b>NHSN</b>	National Healthcare Safety Network
<b>PPS</b>	Prospective Payment System
<b>Q</b>	Quarter
<b>SAMS</b>	Secure Access Management Services
<b>TBD</b>	To Be Determined

IPFQR Program: Collecting and Entering Healthcare  
Personnel Influenza Vaccination Data

---

## **Overview of the Influenza Vaccination Among HCP Measure Requirement in the IPFQR Program**

# Overview of the Influenza Vaccination Coverage Among HCP Measure

The Influenza Vaccination Coverage Among HCP measure was finalized in the FY 2015 IPF PPS Final Rule, published August 6, 2014.

- “The IPF reporting of HCP influenza vaccination summary data to NHSN will begin for the 2015–2016 influenza season, from October 1, 2015, to March 31, 2016, with a reporting deadline of May 15, 2016. Although the collection period for this measure extends into the first quarter of the following calendar year, this measure data will be included with other measures that will be required for FY 2017 payment determination.” (79 FR 45969)
- A full description of the measure is found on pages 45968 – 45970 of the FY 2015 IPF PPS Final Rule.

# Overview of the Influenza Vaccination Coverage Among HCP Measure

The HCP measure is designed to:

- Ensure that reporting of influenza vaccination coverage among HCP data is consistent over time within a single healthcare facility and comparable across facilities
- Allow staff members in healthcare facilities to use the HCP Influenza Vaccination Summary to monitor influenza vaccination percentages among HCP

The HCP measure is relevant to IPFs because:

- In the FY 2015 IPF PPS Final Rule, CMS finalized the inclusion of the HCP measure into the IPFQR Program
- IPFs are required to meet this and all other requirements of the IPFQR Program starting in the FY 2017 payment determination year, or else be subject to a 2 percent reduction to annual payment update

# Overview of the Influenza Vaccination Coverage Among HCP Measure

Data are collected on denominator and numerator categories.

- Denominator categories:
  - HCP must be **physically** present in the facility for at least one working day between October 1 and March 31
  - Includes both full-time and part-time HCP
    - Employee HCP: staff on facility payroll
    - Nonemployee HCP: licensed independent practitioners (physicians, advanced practice nurses, and physician assistants)
    - Nonemployee HCP: adult students/trainees and volunteers
- Numerator categories:

Influenza vaccination, medical contraindication, declination, and unknown status

**NOTE:** Facilities are **required** to report vaccination status (numerator) data for all three denominator categories

IPFQR Program: Collecting and Entering Healthcare  
Personnel Influenza Vaccination Data

---

## **NHSN Enrollment Instructions**

# Key Roles in NHSN

## Facility Administrator (**only** one per facility)

- Enrolls the facility in NHSN
- Activates additional components for a facility
- Retains add/edit/delete rights to facility data, users, and user access
- Holds authority to nominate/join groups for data sharing
- Has sole responsibility to reassign the role of Facility Administrator to another user

## User

- Rights are determined by the Facility Administrator and include access to view data, enter data, and analyze data
- Administrative rights may be given, as well

# Getting Started in the HPS Component

## Enrolling in NHSN

- Facilities that are not participating in NHSN and wish to participate must **enroll** their facility in NHSN
  - Newly enrolled facilities are advised to enter a CCN effective date of January 1, 2017 or earlier to ensure that any data submitted is sent to CMS
  - Please visit <http://www.cdc.gov/nhsn/enrollment/index.html> for more information regarding the enrollment process
  - Enrollment usually takes at least 4 – 6 weeks

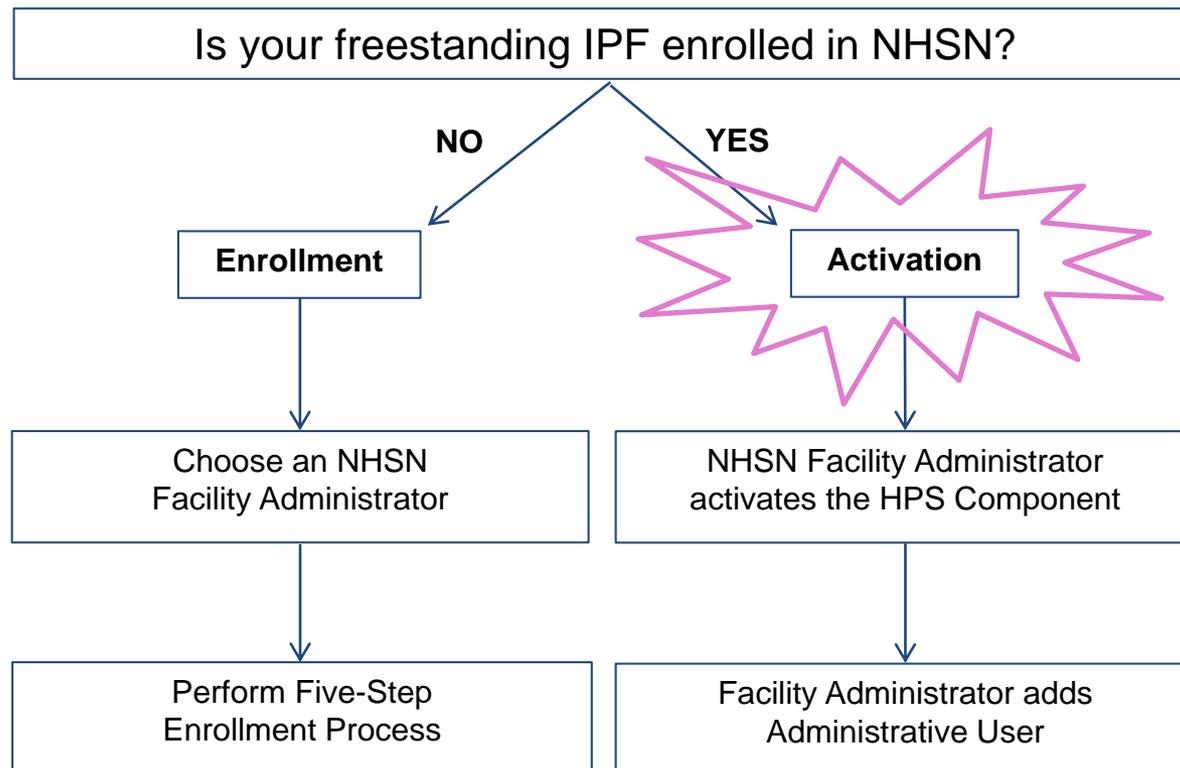
## Adding an IPF location

- IPF units located within acute care/critical access facilities must be added as a unit within the already enrolled acute care/critical access hospital

## Activating the HPS Component

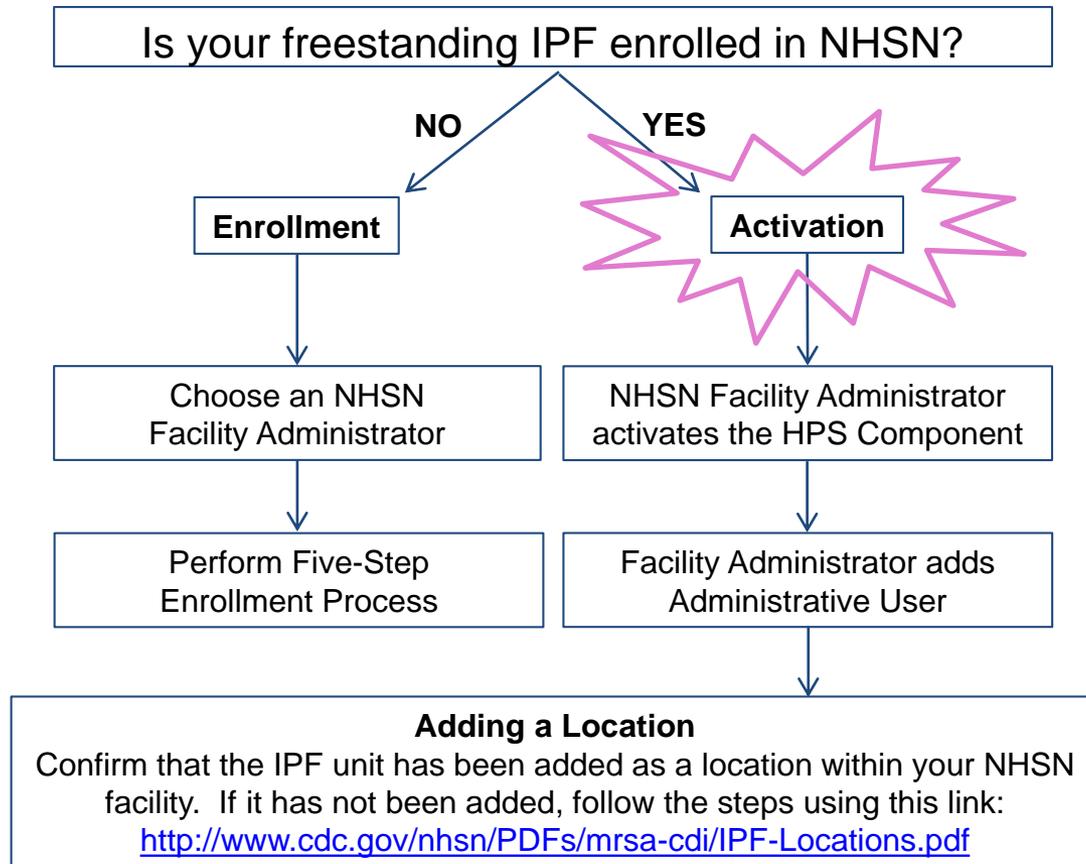
- The HPS Component is the only component necessary for reporting HCP influenza vaccination data
- Facilities that are **already enrolled** in NHSN and wish to participate in the HPS Component must **activate** the component within NHSN

# Getting Started in the HPS Component for Freestanding IPFs



Are you unsure of your facility's status with NHSN? Email [nhsn@cdc.gov](mailto:nhsn@cdc.gov)

# Getting Started in the HPS Component for IPF Units



Are you unsure of your facility's status with NHSN? Email [nhsn@cdc.gov](mailto:nhsn@cdc.gov).

# Getting Started in the HPS Component for IPF Units

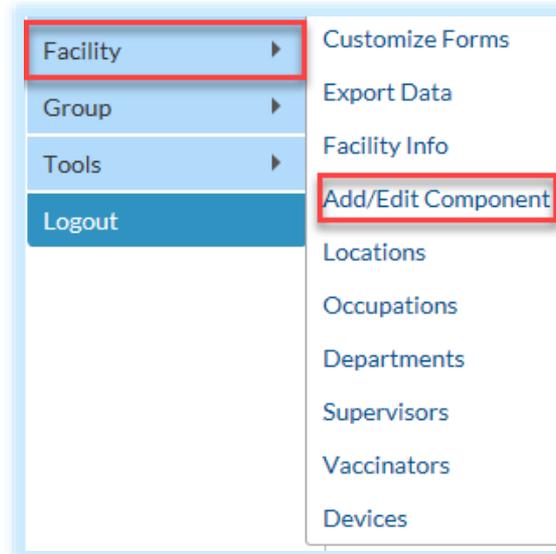
Once an IPF unit has been mapped, the fields for the IPF unit location should be completed.

Your Code *	<input type="text" value="PSYCH"/>
Your Label *	<input type="text" value="PSYCH UNIT"/>
CDC Location Description *	<input type="text" value="Behavioral Health/Psych Ward"/>
Is this location a CMS IPF unit within a hospital? *	<input type="text" value="Y - Yes"/>
If Yes, specify the IPF CCN (will have an M or S in the 3rd position) *	<input type="text" value="44M444"/> Effective Date of IPF CCN: 08/12/2015 2015Q3
	<a href="#">Edit IPF CCN</a>
Status *	<input type="text" value="Active"/>
Bed Size *	<input type="text" value="10"/> A bed size greater than zero is required for most inpatient locations.

# Activating the HPS Component for Existing NHSN Facilities

Only a Facility Administrator can activate a new component.

- Log into the SAMS at <https://nhsn2.cdc.gov/nhsn/>
  - Click **NHSN Reporting**
  - On the landing page, select your component and facility; then click **Submit**
- From the home page, click **Facility**, then **Add/Edit Component** and check the box next to Healthcare Personnel Safety.
- Add HPS Component Primary Contact by entering the name, phone, email, and address for person to be contacted if CDC/NHSN has updates or questions about the HPS Component.



Components Followed			
Follow/ Followed	Component	Activated	Deactivated
<input type="checkbox"/>	Biovigilance		
<input type="checkbox"/>	Dialysis		
<input checked="" type="checkbox"/>	Healthcare Personnel Safety	08/07/2012	
<input type="checkbox"/>	Long Term Care Facility		

# Activating the HPS Component for Existing NHSN Facilities

The Facility Administrator performs the following:

- Add HPS Component Primary Contact as a user within the NHSN facility
  - Click **Users** on the navigation bar, then click **Add**
  - Complete **Add User** screen mandatory fields
    - User ID – created by the facility
    - First Name
    - Last Name
    - Email Address – must be an active/correct address for the user
- Ensure contact information for the Facility Administrator and HPS Component Primary Contact are updated
- Add other users or new HPS Component Primary Contact
- Ensure that at least one HPS Component user has administrative rights

# Adding an NHSN User

Recommend at least two NHSN users.

- To add, click **Users**, then **Add**
- Complete required fields

**NHSN Home**

- Alerts
- Reporting Plan ▶
- HCW ▶
- Lab Test ▶
- Exposure ▶
- Prophy/Treat ▶
- Flu Summary ▶
- Surveys ▶
- Analysis ▶
- Users** ▶ **Add**
- Facility ▶ **Find**
- Group ▶
- Tools ▶
- Logout

**Add User**

Mandatory fields marked with \*

User ID \*:  Up to 32 letters and/or numbers, no spaces or special characters

Prefix:

First Name \*:

Middle Name:

Last Name \*:

Title:

User Active: Y - Yes ▼

User Type:

Phone Number \*:  Extension:

Fax Number:

E-mail Address \*:

Enter New Password for user \*:

Re-enter New Password for user \*:

# User Rights

- After saving the new-user information, the **Edit User Rights** screen will appear.
- Please be sure to confer the proper rights to users.
- CDC recommends that at least two users at each facility have rights to add and analyze data.

The screenshot shows the 'Edit User Rights' interface. On the left is a sidebar with navigation links: NHSN Home, Alerts, Reporting Plan, HCW, Lab Test, Exposure, Propy/Treat, Flu Summary, Surveys, Analysis, Users, Facility, Group, and Tools. The main content area has a header 'Edit User Rights' and displays 'User ID: EMPLHLTH (ID 972)'. Below this is a 'Facility List' dropdown menu with 'Fac: IPF Name' selected. A table lists various rights categories and their status for the user. The 'Healthcare Personnel Safety' column is highlighted with a red box.

Rights	Patient Safety	Healthcare Personnel Safety
Administrator	<input type="checkbox"/>	<input checked="" type="checkbox"/>
All Rights	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Analyze Data	<input type="checkbox"/>	<input type="checkbox"/>
Add, Edit, Delete	<input type="checkbox"/>	<input type="checkbox"/>
View Data	<input type="checkbox"/>	<input type="checkbox"/>
Customize Rights	<input type="checkbox"/>	<input type="checkbox"/>

Buttons at the bottom: Effective Rights, Save, Back, and an Advanced button.

# New Users to NHSN

- Receive a “Welcome to NHSN” email
- Receive emails to register and create a SAMS account
  - Follow instructions carefully
- Complete and submit identity-verification documents to SAMS
  - Begin the process as soon as possible
- Access NHSN using SAMS credentials

## SAMS Grid Card Credentials



# New Users to NHSN

- New user onboarding takes at least 2 – 3 weeks; begin the process well in advance of the reporting deadline
- Log into NHSN at least once per year to maintain active SAMS credentials
- A user with a SAMS card can enter data for multiple facilities as long as they are a registered user at each facility
- Information about the SAMS process can be found at: <http://www.cdc.gov/nhsn/sams/about-sams.html>

# Change in NHSN Facility Administrator

- NHSN Facility Administrator should transfer role to another user **prior** to leaving the facility.
- NHSN can add an individual as the new NHSN Facility Administrator if the previous NHSN Facility Administrator has left the facility. Do **not** reenroll the facility in NHSN.
- Fax a letter to NHSN at (404) 929-0131. The letter should be from a facility official requesting that you be added as a user since the Facility Administrator has left.
- After being assigned as the new NHSN Facility Administrator, begin the new NHSN user-onboarding process.

IPFQR Program: Collecting and Entering Healthcare  
Personnel Influenza Vaccination Data

---

## **HCP Measure Reporting Requirements**

# Denominator Reporting Requirement: Inclusions

## Required

- Employees (staff on facility payroll)
- Licensed independent practitioners
- Adult students/trainees and volunteers

## Optional

Other contract personnel

# Numerator Reporting Requirement: Inclusions

Numerator reporting requirement inclusions for the HCP measure consist of HCP who:

- Received an influenza vaccination at the reporting healthcare facility since the influenza vaccine became available this season
- Provided a written report or documentation of receiving an influenza vaccination outside the reporting healthcare facility since the influenza vaccine became available this season
- Had a medical contraindication to the influenza vaccine
- Declined to receive the influenza vaccine
- Had an unknown vaccination status (or criteria not met for above-mentioned categories)

IPFQR Program: Collecting and Entering Healthcare  
Personnel Influenza Vaccination Data

---

## **HCP Measure Data Submission Instructions**

# Required and Optional Reporting Forms

After enrolling in NHSN and/or activating the HPS Component and adding users:

- Complete required forms
  - HCP Safety Monthly Reporting Plan
  - HCP Influenza Vaccination Summary
- Complete optional form
  - Seasonal Survey on Influenza Vaccination Programs for HCP

# Log into SAMS

Access the activity home page at <https://nhsn2.cdc.gov/nhsn/>.

- Enter SAMS user name and password
- Enter SAMS grid card numbers

Login Options  
Choose one of the two login options.

### SAMS Grid Card Credentials



	A	B	C	D	E	F	G	H	I	J	
1	E	Q	X	3	T	5	N	4	M	Q	1
2	E	3	K	6	J	M	9	F	8	6	2
3	C	1	6	M	3	J	H	M	P	Y	3
4	T	W	W	1	4	V	6	0	7	2	4
5	8	6	7	W	6	J	5	M	P	X	5

SAMS Username:

SAMS Password:

**Login**

[Forgot SAMS Password?](#)

For users who have been issued a SAMS Grid Card.

OR

### HHS PIV Card



Insert your PIV card in your smart card reader before you try to login.

**Login**

For users who are CDC staff and have been issued a PIV card.

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

# NHSN Landing Page

NHSN - National Healthcare Safety Network (apt-v-nhsn-test:8001)



Welcome to the NHSN Landing Page



**NIN7 (ID 9629)**

Select component:

Healthcare Personnel Safety

Select facility/group:

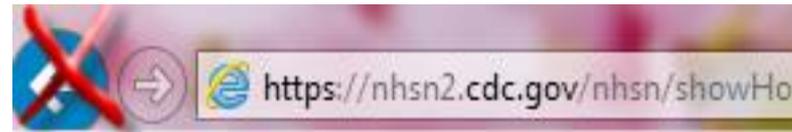
Fac: IPF Name (ID #####)

Submit



# Navigating NHSN

Use NHSN buttons to navigate (avoid using the Web browser buttons)



View facility name, user, and component in use at the top right of the screen



# HPS Component Home Page

NHSN - National Healthcare Safety Network (apt-v-nhsn-test:8001) NIN7 Pleasant Valley Hospital

**NHSN Home**

- Alerts
- Reporting Plan ▶
- HCW ▶
- Lab Test ▶
- Exposure ▶
- Prophy/Treat ▶
- Flu Summary ▶
- Surveys ▶
- Analysis ▶
- Users ▶
- Facility ▶
- Group ▶
- Tools ▶
- Logout

**NHSN Healthcare Personnel Safety Component Home Page**

**COMPLETE THESE ITEMS**

- Confer Rights  
**Not Accepted**

**ALERTS**

- 3** Report No Events
- 4** Missing Flu Summaries

# HCP Safety Monthly Reporting Plan Form

- Collects data on which modules and months the facility plans to participate
- Users select **Influenza Vaccination Summary**
  - The plan is automatically updated with this information for the entire NHSN-defined influenza season (July 1 – June 30)
  - The user will not need to add any reporting plans after the initial monthly plan has been added for that influenza season



## Healthcare Personnel Safety Monthly Reporting Plan

Page 1 of 1  
\*required for saving

Facility ID#: \_\_\_\_\_ \*Month/Year: \_\_\_\_\_ /

No NHSN Healthcare Personnel Safety Modules followed this month

### Healthcare Personnel Exposure Modules

Blood/Body Fluid Exposure Only

Blood/Body Fluid Exposure with Exposure Management

Influenza Exposure Management

### Healthcare Personnel Vaccination Module

Influenza Vaccination Summary

# Monthly Plan View for IPF Units

- Click **Reporting Plan**, then **Add**
- Select appropriate month and year from drop-down menus, e.g., October 2016
- Check appropriate box next to “Influenza Vaccination Summary for Inpatient Psychiatric Facility Unit(s)”
- Click **Save**

**NHSN Home**

- Alerts
- Reporting Plan**
- HCW
- Lab Test
- Exposure
- Prophy/Treat
- Flu Summary
- Surveys
- Analysis
- Users
- Facility
- Group
- Tools
- Logout

## Add Monthly Reporting Plan

Mandatory fields marked with \*

\*Facility ID:

\*Month:

\*Year:

No NHSN Healthcare Personnel Safety Modules Followed this Month

### Healthcare Personnel Exposure Modules

- Blood/Body Fluid Exposure Only
- Blood/Body Fluid Exposure with Exposure Management
- Influenza Exposure Management

### Healthcare Personnel Vaccination Module

- Influenza Vaccination Summary for the Hospital
- Influenza Vaccination Summary for Inpatient Rehabilitation Facility Unit(s)
- Influenza Vaccination Summary for Inpatient Psychiatric Facility Unit(s)

**Save** **Back**

# Monthly Plan View for Freestanding IPFs

- Click **Reporting Plan**, then **Add**
- Select appropriate month and year from drop-down menus, e.g., October 2016
- Check appropriate box next to “Influenza Vaccination Summary”
- Click **Save**

**NHSN Home**

- Alerts
- Reporting Plan**
- HCW
- Lab Test
- Exposure
- Prophy/Treat
- Flu Summary
- Surveys
- Analysis
- Users
- Facility
- Group

## Add Monthly Reporting Plan

Mandatory fields marked with \*

\* Facility ID:

\* Month:

\* Year:

HSN Healthcare Personnel Safety Modules Followed this Month

### Healthcare Personnel Exposure Modules

- Blood/Body Fluid Exposure Only
- Blood/Body Fluid Exposure with Exposure Management
- Influenza Exposure Management

### Healthcare Personnel Vaccination Module

- Influenza Vaccination Summary

**Save** **Back**

# Monthly Plan View for IPFs

Adding one plan automatically adds a plan for each month of the influenza season.

Monthly Reporting Plan List

Month	Year	Facility ID
<a href="#">December</a>	2016	10312
<a href="#">November</a>	2016	10312
<a href="#">October</a>	2016	10312
<a href="#">September</a>	2016	10312
<a href="#">August</a>	2016	10312
<a href="#">July</a>	2016	10312
<a href="#">June</a>	2016	10312
<a href="#">May</a>	2016	10312
<a href="#">April</a>	2016	10312
<a href="#">March</a>	2016	10312

Page 1 of 2 View 1 - 10 of 12

Page 1 of 2 View 1 - 10 of 12

Add Back

# HCP Influenza Vaccination Summary Form

- The form collects summary influenza vaccination counts among HCP
- HCP influenza summary reporting in NHSN consists of a single data-entry screen per influenza season
- Each time a user enters updated data for a particular influenza season:
  - All previously entered data for that season is overwritten
  - A new, modified date is auto-filled by the system

# HCP Influenza Vaccination Summary Form

NHSN data-entry screen mirrors the HCP Influenza Vaccination Summary form

- Denominator (Question 1)
- Numerator (Questions 2 – 6)

	*Employees (staff on facility payroll)	*Licensed independent practitioners: Physicians, advanced practice nurses, & physician assistants	*Adult students/trainees & volunteers	Other Contract Personnel
1. Number of HCP who worked at this healthcare facility for at least 1 day between October 1 and March 31				
2. Number of HCP who received an influenza vaccination at this healthcare facility since influenza vaccine became available this season				
3. Number of HCP who provided a written report or documentation of influenza vaccination outside this healthcare facility since influenza vaccine became available this season				
4. Number of HCP who have a medical contraindication to the influenza vaccine				
5. Number of HCP who declined to receive the influenza vaccine				
6. Number of HCP with unknown vaccination status (or criteria not met for questions 2-5 above)				

# Table of Instructions

The table of instructions outlines the instructions and definitions for each data field in the NHSN module

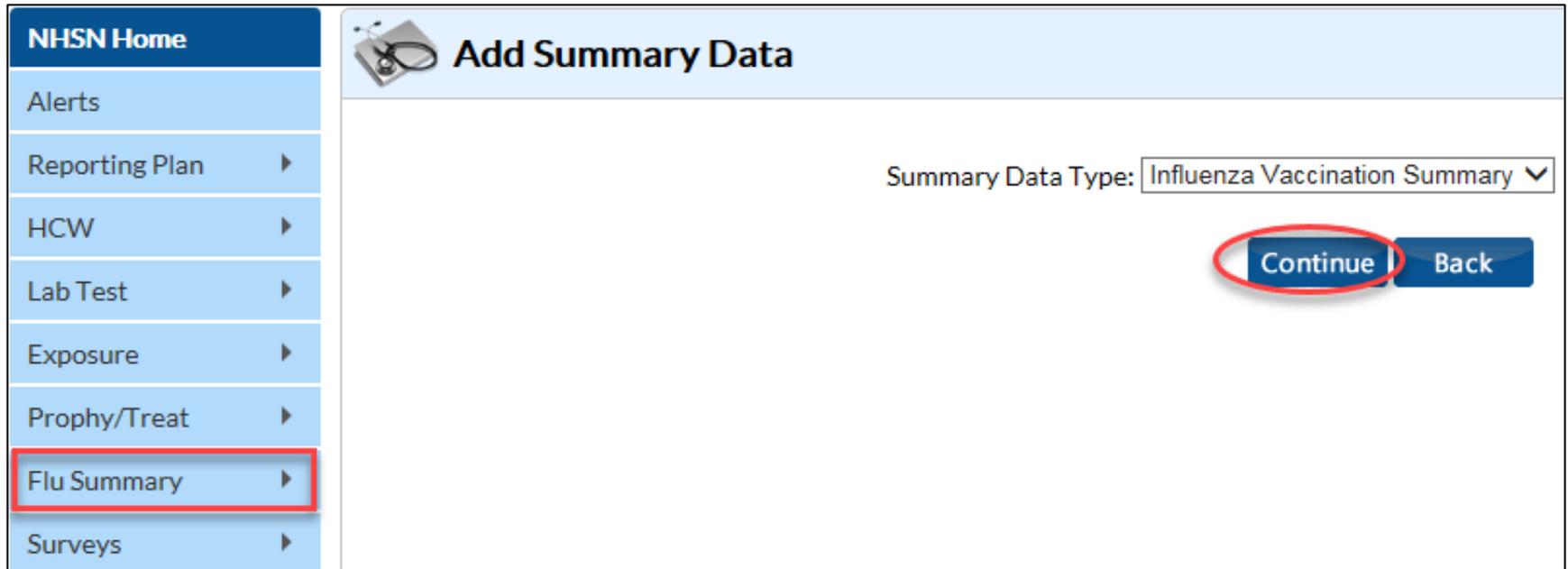
Data Fields	Instructions for Completion
Facility ID #	<i>Required.</i> The NHSN-assigned facility ID will be auto-entered.
Vaccination Type	<i>Required.</i> Influenza is the default and only current choice.
Influenza Subtype	<i>Required.</i> Seasonal is the default and only current choice.
Influenza Season	<i>Required.</i> Select the influenza season years for which data were collected (e.g., 2012/2013).
Date Last Modified	The Date Last Modified will be auto-entered and will indicate the date that these data were last changed by a user.
Employee HCP (staff on facility payroll)	<i>Required.</i> Defined as all persons that receive a direct paycheck from the healthcare facility (i.e., on the facility's payroll), regardless of clinical responsibility or patient contact.
Non-Employee HCP: Licensed independent	<i>Required.</i> Defined as physicians (MD, DO); advanced practice nurses; and physician

The Instructions for the HCP Influenza Vaccination Summary form are located in the HCP Influenza Vaccination Summary Protocol:

<http://www.cdc.gov/nhsn/forms/57-214-HCP-Influenza-Vaccination-Summary-Form-TOI-.pdf>

# HCP Influenza Vaccination Summary Data

- Click **Flu Summary**, then **Add**
- “Influenza Vaccination Summary” appears; the only option in the Summary Data Type drop-down menu
- Click **Continue**



The screenshot displays the NHSN Home interface. On the left, a navigation menu lists various options: Alerts, Reporting Plan, HCW, Lab Test, Exposure, Prophy/Treat, **Flu Summary** (highlighted with a red box), and Surveys. The main content area is titled 'Add Summary Data' and features a 'Summary Data Type' dropdown menu set to 'Influenza Vaccination Summary'. Below the dropdown, there are two buttons: 'Continue' (circled in red) and 'Back'.

# Summary Report for Hospitals with IPF Units

- “Influenza” and “Seasonal” are the default choices for vaccination type and influenza subtype
- Select appropriate flu season in drop-down box, e.g., “2016/2017”
- Select the appropriate location(s) for reporting hospital or IPF unit(s)

<b>NHSN Home</b>	 <b>Add Influenza Vaccination Summary</b>
Alerts	Mandatory fields marked with *
Reporting Plan ▶	Record the cumulative number of healthcare personnel (HCP) for each category below for the influenza season being tracked.
HCW ▶	<b>Facility ID *</b> : <input type="text" value="Facility Name (ID Number)"/>
Lab Test ▶	<b>Vaccination type *</b> : <input type="text" value="Influenza"/>
Exposure ▶	<b>Influenza subtype *</b> : <input type="text" value="Seasonal"/>
Prophy/Treat ▶	<b>Flu Season *</b> : <input type="text" value="2016/2017"/> ←
Flu Summary ▶	<b>Locations *</b> : <input type="text" value="IPF Unit(s)"/> ←

# Summary Report for Freestanding IPFs

- “Influenza” and “Seasonal” are the default choices for vaccination type and influenza subtype
- Select appropriate flu season in drop-down box, e.g., “2016/2017”

<b>NHSN Home</b>	 <b>Add Influenza Vaccination Summary</b>
Alerts	Mandatory fields marked with *
Reporting Plan ▶	Record the cumulative number of healthcare personnel (HCP) for each category below for the influenza season being tracked.
HCW ▶	Facility ID *: Facility Name (ID Number)
Lab Test ▶	Vaccination type *: Influenza ▼
Exposure ▶	Influenza subtype *: Seasonal ▼
Prophy/Treat ▶	Flu Season *: ▼
Flu Summary ▶	

# Data Entry Screen

- The asterisks indicate required columns that must be completed.
- Use the “Comments” box to enter any additional information.
- Click **Save** to save the record.
- Data must be entered by the May 15 reporting deadline to meet CMS program requirements.

HCP categories	Employee HCP	Non-Employee HCP		
	Employees (staff on facility payroll) *	Licensed independent practitioners: Physicians, advanced practice nurses, & physician assistants *	Adult students/trainees & volunteers *	Other Contract Personnel
1. Number of HCP who worked at this healthcare facility for at least 1 day between October 1 and March 31	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
2. Number of HCP who received an influenza vaccine at this healthcare facility since influenza vaccine became available this season	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
3. Number of HCP who provided a written report or documentation of influenza vaccination outside this healthcare facility since influenza vaccine became available this season	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
4. Number of HCP who have a medical contraindication to the influenza vaccine	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
5. Number of HCP who declined to receive the influenza vaccine	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
6. Number of HCP with unknown vaccination status (or criteria not met for questions 2-5 above)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<b>Custom Fields</b>				
HCP NURSES: <input type="text"/> HCP PHYSICIANS: <input type="text"/>				

# Editing HCP Influenza Vaccination Summary Data

- After the initial entry, each update of the data receives the message, “A record of the summary data already exists.”
- The “Date Last Modified” shows when the data were last entered.

✔ A record for the selected summary data element already exists.

Mandatory fields marked with \*

[Print Form](#)

Facility Name (ID Number)

Record the cumulative number of healthcare personnel (HCP) for each category below for the influenza season being tracked.

Facility ID \*: Pleasant Valley Hospital (10312)

Vaccination type \*: Influenza

Influenza subtype \*: Seasonal

Flu Season \*: 2016/2017

Locations \*: IPF Units(s)

Date Last Modified: 11/21/2016

HCP categories	Employee HCP	Non-Employee HCP		
	Employees (staff on facility payroll) *	Licensed independent practitioners: Physicians, advanced practice nurses, & physician assistants *	Adult students/trainees & volunteers *	Other Contract Personnel
1. Number of HCP who worked at this healthcare facility for at least 1 day between October 1 and March 31	30	10	25	5

# Editing HCP Influenza Vaccination Summary Data

Click **Edit** to modify existing data.

HCP categories	Employee HCP	Non-Employee HCP		
	Employees (staff on facility payroll) *	Licensed independent practitioners: Physicians, advanced practice nurses, & physician assistants *	Adult students/trainees & volunteers *	Other Contract Personnel
1. Number of HCP who worked at this healthcare facility for at least 1 day between October 1 and March 31	30	10	25	5
2. Number of HCP who received an influenza vaccine at this healthcare facility since influenza vaccine became available this season	10	7	10	2
3. Number of HCP who provided a written report or documentation of influenza vaccination outside this healthcare facility since influenza vaccine became available this season	5	2	10	3
4. Number of HCP who have a medical contraindication to the influenza vaccine	5	1	2	0
5. Number of HCP who declined to receive the influenza vaccine	5	0	2	0
6. Number of HCP with unknown vaccination status (or criteria not met for questions 2-5 above)	5	0	1	0

**Custom Fields**  
 HCP NURSES:  HCP PHYSICIANS:

**Comments**

# Saving HCP Influenza Vaccination Summary Data

Click **Save** to save the updated data.

HCP categories	Employee HCP	Non-Employee HCP		
	Employees (staff on facility payroll) *	Licensed independent practitioners: Physicians, advanced practice nurses, & physician assistants *	Adult students/trainees & volunteers *	Other Contract Personnel
1. Number of HCP who worked at this healthcare facility for at least 1 day between October 1 and March 31	<input type="text" value="30"/>	<input type="text" value="10"/>	<input type="text" value="25"/>	<input type="text" value="5"/>
2. Number of HCP who received an influenza vaccine at this healthcare facility since influenza vaccine became available this season	<input type="text" value="10"/>	<input type="text" value="7"/>	<input type="text" value="10"/>	<input type="text" value="2"/>
3. Number of HCP who provided a written report or documentation of influenza vaccination outside this healthcare facility since influenza vaccine became available this season	<input type="text" value="5"/>	<input type="text" value="2"/>	<input type="text" value="10"/>	<input type="text" value="3"/>
4. Number of HCP who have a medical contraindication to the influenza vaccine	<input type="text" value="5"/>	<input type="text" value="1"/>	<input type="text" value="2"/>	<input type="text" value="0"/>
5. Number of HCP who declined to receive the influenza vaccine	<input type="text" value="5"/>	<input type="text" value="0"/>	<input type="text" value="2"/>	<input type="text" value="0"/>
6. Number of HCP with unknown vaccination status (or criteria not met for questions 2-5 above)	<input type="text" value="5"/>	<input type="text" value="0"/>	<input type="text" value="1"/>	<input type="text" value="0"/>

**Custom Fields**  
 HCP NURSES:  HCP PHYSICIANS:

**Comments**

# Saving HCP Influenza Vaccination Summary Data

A message confirming that data were saved should appear at the top of the screen.

✔ Successfully added/updated Influenza Vaccination Summary record.

Mandatory fields marked with \*

[Print Form](#)

Record the cumulative number of healthcare personnel (HCP) for each category below for the influenza season being tracked.

**Facility ID \***: Facility Name (ID Number)

**Vaccination type \***: Influenza

**Influenza subtype \***: Seasonal

**Flu Season \***: 2016/2017

**Date Last Modified:**

HCP categories	Employee HCP	Non-Employee HCP		
	Employees (staff on facility payroll) *	Licensed independent practitioners: Physicians, advanced practice nurses, & physician assistants *	Adult students/trainees & volunteers *	Other Contract Personnel
1. Number of HCP who worked at this healthcare facility for at least 1 day between October 1 and March 31	30	22	10	

## IPFQR Program: Collecting and Entering Healthcare Personnel Influenza Vaccination Data

---

### **Data Verification in NHSN**

# Data Verification in NHSN

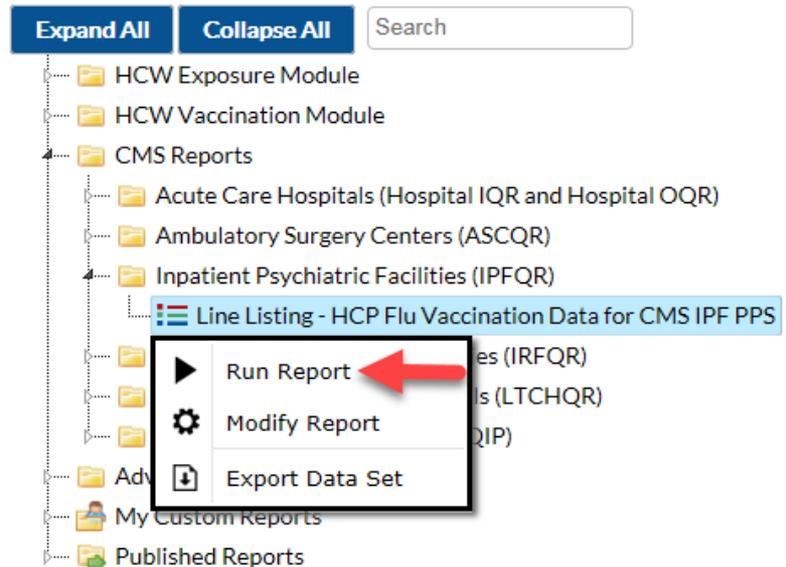
Run a CMS Line Listing Report using instructions located here:

<http://www.cdc.gov/nhsn/pdfs/cms/cms-ipfqr-hcpfluvacc-linelist-ipf.pdf>

## National Healthcare Safety Network Line Listing for HCP Flu Vaccination Data for CMS IPF PPS

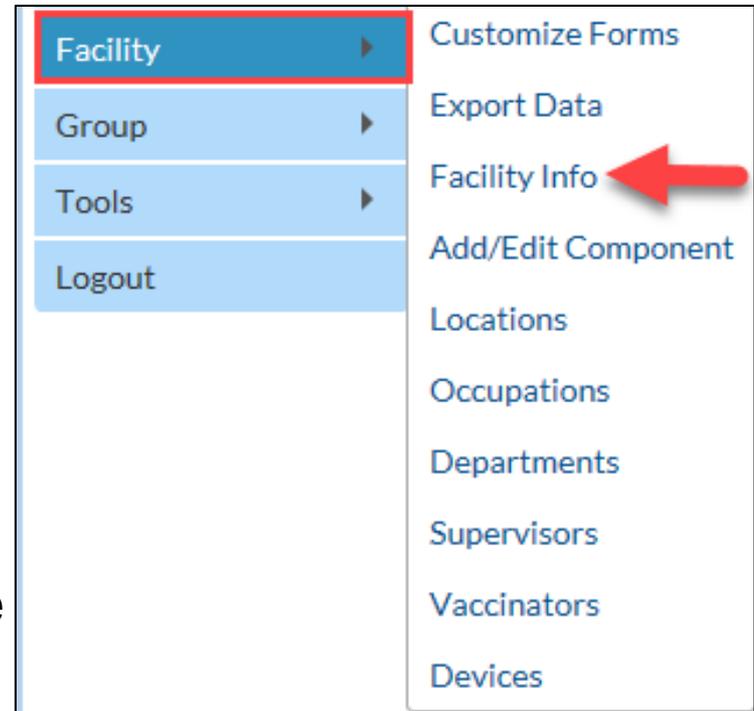
As of: November 21, 2016 at 2:27 PM  
Date Range: All HCW\_VACCFUSUMCMS\_IPFQR

orgID	summarySeason	vaccType	personnelType	personnelTypeDesc	vaccTypeDesc	declinations	contraindications	vaccEW	vaccHere	working	pctVacc	totVacc	pctVaccCI
10312	2016/2017	FLU	Employee	Employees	Influenza	5	5	5	10	30	50%	15	33%, 67%
10312	2016/2017	FLU	LIP	Licensed Independent Practitioners	Influenza	0	1	2	7	10	90%	9	60%, 99%
10312	2016/2017	FLU	studVol	Adult Students/Trainees and Volunteers	Influenza	2	2	10	10	25	80%	20	61%, 92%
10312	2016/2017	FLU	All	All Healthcare Workers	Influenza	7	8	17	27	65	68%	44	56%, 78%



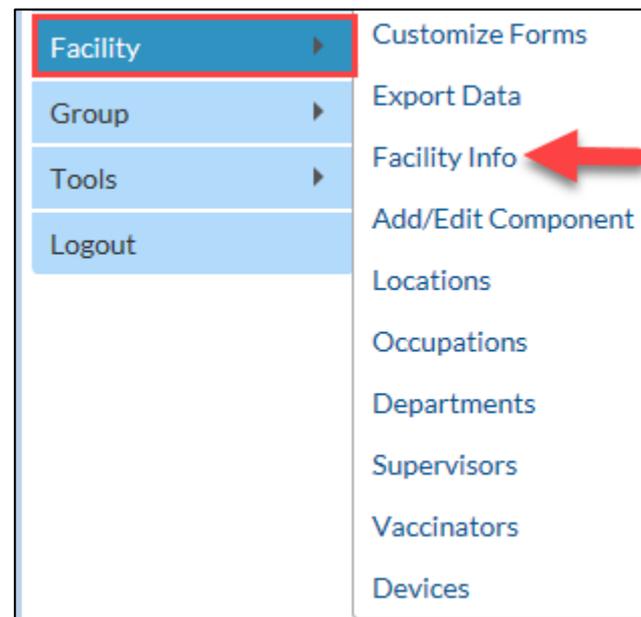
# Data Verification in NHSN for Freestanding IPFs

- Ensure that the correct facility CCN **and** CCN effective date have been entered into the “Facility Info” page of NHSN. Your facility’s CCN effective date equals date facility first received its CCN from CMS.
- Ensure that facility is enrolled as a “HOSP-PSYCH” facility on the “Facility Info” page of NHSN. If your facility is not correctly enrolled, please contact [NHSN@cdc.gov](mailto:NHSN@cdc.gov) for assistance.



# Data Verification in NHSN for IPF Units

- Ensure that the correct facility CCN **and** CCN effective date are entered into the “Facility Info” page of NHSN for your acute-care or Critical Access Hospital. Your CCN effective date equals date your facility first received its CCN from CMS.
- Ensure that your facility is enrolled properly as an acute care facility; for example, “HOSP-GEN,” “CAH,” “HOSP-SURG,” “HOSP-WOM,” on the “Facility Info” page of NHSN. If your facility is not correctly enrolled, please contact [NHSN@cdc.gov](mailto:NHSN@cdc.gov) for assistance.



# Data Verification in NHSN for IPF Units

- Ensure that “Yes” is selected for the question: Is this location a CMS IPF unit within a hospital?
- Ensure that the correct CCN **and** CCN effective date have been entered for **each** CMS IPF unit in NHSN for your facility. CCN effective date equals date facility first received its CCN from CMS.

Your Code \*: PSYCH

Your Label \*: PSYCH UNIT

CDC Location Description \*: Behavioral Health/Psych Ward

Is this location a CMS IPF unit within a hospital? \*: Y - Yes

If Yes, specify the IPF CCN (will have an M or S in the 3rd position) \*: 44M444 Effective Date of IPF CCN: 08/12/2015 2015Q3

Status \*: Active

Bed Size \*: 10 A bed size greater than zero is required for most inpatient locations.

[Edit IPF CCN](#)

Find Add Export Location List Clear

IPFQR Program: Collecting and Entering Healthcare  
Personnel Influenza Vaccination Data

---

## **Frequently Asked Questions (FAQs)**

# FAQ #1

**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?”**

*You are receiving this message because you have not added a monthly reporting plan. Note that a monthly reporting plan must be added in order to report the Influenza Vaccination Summary data. To add this plan, click on “Reporting Plan” and then on “Add” on the NHSN navigation bar after logging in to the Healthcare Personnel Safety Component. Next, select a month and year from the dropdown menus; you can select any month and year during the current influenza season. Then, check the box next to “Influenza Vaccination Summary” under the “Healthcare Personnel Vaccination Module” and click on Save. You can then proceed to enter your influenza vaccination summary data.*

# FAQ #2

**Why are free-standing IPFs required to enroll in NHSN, while IPF units having different CCNs of the acute care or critical access facilities usually do not need to do so?**

*IPF units do not need to enroll nor activate the HPS Component unless their affiliated acute care or critical access facility is not already enrolled in NHSN or the IPF unit is not physically located within the walls of the affiliated acute care or critical access facility. IPF units located within hospitals can simply be mapped as locations of the already enrolled acute care or critical access facility. Once the IPF unit is added as a location of the facility, the IPF unit-specific CCN can be associated with the facility, so all HCP influenza vaccination data entered into NHSN for the IPF can be sent to CMS appropriately. More information about how to map an IPF unit and add an IPF unit-specific CCN can be found at <http://www.cdc.gov/nhsn/PDFs/mrsa-cdi/IPF-Locations.pdf>.*

# FAQ #3

**I submitted the HCP influenza vaccination measure data; however, I continue to receive emails and/or phone calls from the VIQR SC stating that the data has not been submitted. What can I do to have my IPF removed from the outreach list?**

*This is typically due to incorrect or incomplete enrollment of an IPF (e.g., incorrect CCN, IPF unit not mapped correctly to the main hospital, etc.). Complete the steps outlined in slides 50-54 of this presentation pertaining to data verification in NHSN. If you find after completing these steps that the facility is not enrolled correctly please contact [NHSN@cdc.gov](mailto:NHSN@cdc.gov) for assistance.*

## IPFQR Program: Collecting and Entering Healthcare Personnel Influenza Vaccination Data

---

### **Helpful Resources**

# CDC NHSN Resources

## IPF NHSN Enrollment/Location Mapping

- Detailed checklist for IPFs  
<http://www.cdc.gov/nhsn/pdfs/gen-support/ipf-enrollment-checklist.pdf>
- NHSN enrollment for freestanding IPFs  
<http://www.cdc.gov/nhsn/ipfs/enroll.html>
- IPFs within Acute Care and Critical Access Hospitals
  - Ensure the main hospital has completed the NHSN enrollment  
<http://www.cdc.gov/nhsn/acute-care-hospital/enroll.html>
  - Complete NHSN location mapping for IPFs within hospitals  
<http://www.cdc.gov/nhsn/pdfs/mrsa-cdi/ipf-locations.pdf>

# CDC NHSN Resources

## Influenza Vaccination Coverage Among HCP Measure Data Submission

- Training slides for IPFs  
<http://www.cdc.gov/nhsn/pdfs/training/vaccination/hcp-flu-vax-summary-reporting-ipf-training.pdf>
- Training, protocols, data-collection forms, CMS supporting materials, FAQs  
<http://www.cdc.gov/nhsn/ipfs/vaccination/index.html>

## NHSN User Support

- Email [nhsn@cdc.gov](mailto:nhsn@cdc.gov) for additional information; include “IPF NHSN Enrollment” or “IPF HCP Measure Data Submission” in the subject line.
- Be sure to include the name and CCN of the facility in the body of the email.

# CMS Resources

- IPFQR Program webinars held April 16, 2015 and February 18, 2016
  - *QualityNet*: Inpatient Psychiatric Facilities>[IPF Webinars, Calls – 2015](#) and [IPF Webinars, Calls – 2016](#)
  - *Quality Reporting Center*: Inpatient>IPFQR Program>[Archived Events](#)
- Webinar materials include:
  - Presentation slides
  - Event recording
  - Presentation transcript
  - Questions and answers transcript

# Helpful Resources

## IPFQR Program General Resources

Q & A Tool	Email Support	Website	Phone Support
<a href="https://cms-IP.custhelp.com">https://cms-IP.custhelp.com</a>	<a href="mailto:IPFQualityReporting@hcqis.org">IPFQualityReporting@hcqis.org</a>	<a href="http://www.QualityReportingCenter.com">www.QualityReportingCenter.com</a>	(866)800-8765
Monthly Web Conferences	ListServes	Hospital Contact Change Form	Secure Fax
<a href="http://www.QualityReportingCenter.com">www.QualityReportingCenter.com</a>	<a href="http://www.QualityNet.org">www.QualityNet.org</a>	<a href="#">Hospital Contact Change Form</a>	(877)789-4443

# Helpful Resources

## Save the Dates

Upcoming IPFQR Program educational webinars:

### **February 2017**

*IPFQR Program Manual and Paper Tools*

### **March 2017**

*The Lifecycle of a Measure in the IPFQR Program*

# Continuing Education Approval

This program has been approved for 1.0 continuing education (CE) unit for the following professional boards:

- Florida Board of Clinical Social Work, Marriage and Family Therapy and Mental Health Counseling
- Florida Board of Nursing Home Administrators
- Florida Council of Dietetics
- Florida Board of Pharmacy
- Board of Registered Nursing (Provider #16578)
  - It is your responsibility to submit this form to your accrediting body for credit.

# CE Credit Process

- Complete the ReadyTalk<sup>®</sup> survey that will pop up after the webinar, or wait for the survey that will be sent to all registrants within the next 48 hours.
- After completion of the survey, click “Done” at the bottom of the screen.
- Another page will open that asks you to register in HSAG’s Learning Management Center.
  - This is a separate registration from ReadyTalk<sup>®</sup>.
  - Please use your PERSONAL email so you can receive your certificate.
  - Healthcare facilities have firewalls up that block our certificates.

# CE Certificate Problems?

- If you do not immediately receive a response to the email that you signed up with in the Learning Management Center, you have a firewall up that is blocking the link that is sent out.
- Please go back to the **New User** link and register your personal email account.
  - Personal emails do not have firewalls.

# CE Credit Process: Survey

No

Please provide any additional comments

**10. What is your overall level of satisfaction with this presentation?**

Very satisfied

Somewhat satisfied

Neutral

Somewhat dissatisfied

Very dissatisfied

If you answered "very dissatisfied", please explain

**11. What topics would be of interest to you for future presentations?**

**12. If you have questions or concerns, please feel free to leave your name and phone number or email address and we will contact you.**

Done

Powered by [SurveyMonkey](#)  
Check out our [sample surveys](#) and create your own now!

# CE Credit Process

Thank you for completing our survey!

Please click on one of the links below to obtain your certificate for your state licensure.

You must be registered with the learning management site.

**New User Link:**

<https://lmc.hshapps.com/register/default.aspx?ID=da0a12bc-db39-408f-b429-d6f6b9ccb1ae>

**Existing User Link:**

<https://lmc.hshapps.com/test/adduser.aspx?ID=da0a12bc-db39-408f-b429-d6f6b9ccb1ae>

**Note:** If you click the 'Done' button below, you will not have the opportunity to receive your certificate without participating in a longer survey.

Done

# CE Credit Process: New User

The screenshot shows a web browser window displaying the registration page for a new user. The page header includes the HSAG logo (Health Services Advisory Group) on the left and a security notice on the right: "this is a secure site please provide credentials to continue" with a lock icon. Below the header, the text "Learning Management Center" is displayed. The main content area is titled "Learning Center Registration: OQR: 2015 Specifications Manual Update - 1-21-2015". The registration form contains four input fields: "First Name:", "Last Name:", "Email:", and "Phone:". The "Phone:" field has a small icon of a telephone handset. Below the input fields is a "Register" button. The page is framed by a blue border.

**HSAG** HEALTH SERVICES ADVISORY GROUP

this is a secure site  
please provide credentials to continue

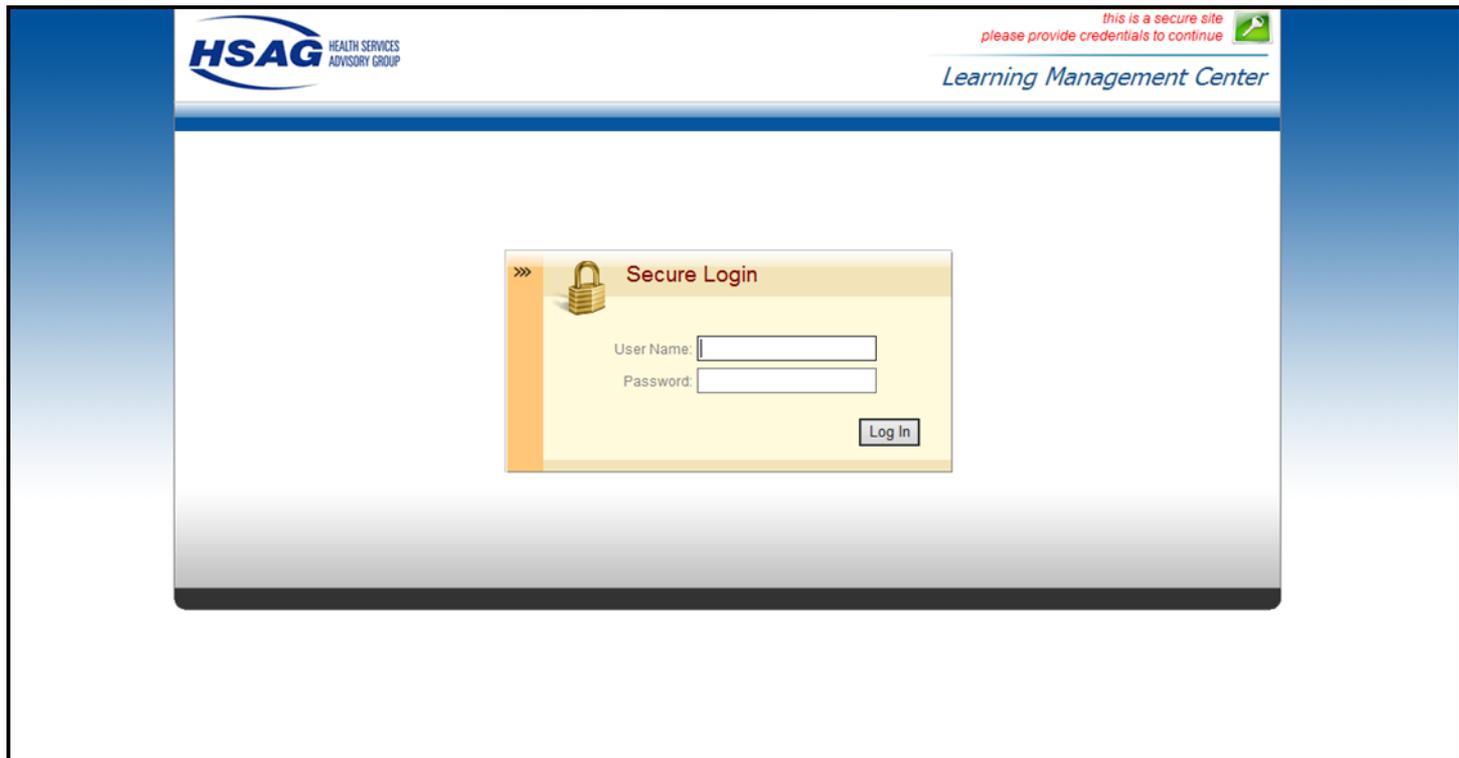
Learning Management Center

**Learning Center Registration: OQR: 2015 Specifications Manual Update - 1-21-2015**

First Name:  Last Name:

Email:  Phone:

# CE Credit Process: Existing User



The screenshot displays the login interface for the HSAG Learning Management Center. At the top left is the HSAG logo with the text "HEALTH SERVICES ADVISORY GROUP". At the top right, a security notice reads "this is a secure site please provide credentials to continue" next to a lock icon, and the text "Learning Management Center" is displayed below it. The central focus is a "Secure Login" box containing a padlock icon, a "User Name:" label with an input field, a "Password:" label with an input field, and a "Log In" button.