Reporting Healthcare Personnel Influenza Vaccination Data – Refresher for 2018

Presentation Transcript

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Inpatient Psychiatric Facility Quality Reporting (IPFQR) Program

Support Contractor

Evette Robinson: Hello everyone and welcome to today's Inpatient Psychiatric Facility Quality Reporting Program webinar. My name is Evette Robinson and I am the Project Lead with the VIQR Support Contractor for the IPFQR Program. For today's webinar entitled *Reporting Healthcare Personnel Influenza Vaccination Data – Refresher for 2018*, I am joined by our guest speakers for today's event, Elizabeth Kalayil and Parneet Ghuman from the CDC. Elizabeth Kalayil is a Public Health Analyst with Carter Consulting Incorporated and is based in the Immunization Services Division at CDC. She provides training and technical assistance to healthcare facilities in reporting healthcare personnel influenza vaccination. Elizabeth earned a Master of Public Health degree in International Health from Emory University. Parneet Ghuman is a Public Health Analyst with CACI International and works in the division of Healthcare Quality Promotion at the CDC. She provides subject matter expertise to healthcare facilities on influenza vaccination reporting for the Healthcare Personnel Safety Component and the National Healthcare Safety Network, also known as NHSN. Parneet obtained her Master of Public Health degree with a concentration in global health from Emory University.

This presentation is provided as a refresher for the information that CMS and the CDC provided during the January 25, 2017 webinar titled *Collecting and Entering Healthcare Personnel Influenza Vaccination Data*. During that event, attendees received a description of the Influenza Vaccination Coverage Among Healthcare Personnel measure as a requirement of the IPFQR Program, as well as step-by-step instructions on how to complete the NHSN enrollment and the Influenza Vaccination Coverage Among HCP measure data submission and verification processes. CMS and the CDC recommend that you review the recording for the January 2017 event for more detailed information about these processes. You may access the webinar recording via the hyperlink on this slide.

The purpose of today's webinar is to provide those in attendance with a reminder of the NHSN re-consent process, an overview of reporting

requirements for the HCP Influenza Vaccination Summary measure as a requirement for the IPFQR Program, and participants will also learn about how they can enter and verify their HCP Influenza Vaccination Summary data in the National Healthcare Safety Network.

By the end of today's presentation, attendees will be able to ensure proper NHSN enrollment for the IPF with the reporting requirements for the HCP Influenza Vaccination Summary measure, identify the steps facilities should follow to successfully report data through NHSN, and to verify the status of those facilities' measured data submission.

This slide provides a list of the acronyms that will be referenced in this presentation.

Before I turn the presentation over to our first guest speaker, I would like to take a few moments to highlight the top four keys to success in the submission of the Influenza Vaccination Coverage Among HCP measure data to NHSN. First, we request that you ensure that the CDC and the VIQR support contractor teams have current contact information for the IPF on file. Any changes to the Healthcare Personnel Safety Component Primary Contact should be updated in NHSN since the CDC may try to contact that individual regarding enrollment or data. If the point of contact at your facility remains unchanged from last year, then no action is required. However, if any staff turnover occurs since the NHSN system was last accessed by your facility, then we request that you complete and return the Hospital Contact Change Form to the VIQR support contractor as soon as possible. You can click on the link for the form on this slide. The second key to success is that it's important that the IPF has an IPFQR Program Notice Of Participation status of "Participating," as this facilitates the IPF's receipt of timely outreach from the VIQR support contract team prior to the May 15th deadline. Third, all facilities must have an active Facility Administrator account with NHSN in order to log into the system. And finally, we encourage all data submissions and verifications to occur well in advance of the May 15th deadline, as this allows for adequate review and collection of data if needed. It also helps

circumvent any unforeseen technical issues one might encounter by waiting until the day before or the day of the data submission deadline.

As we describe the reporting process for the HCP Influenza Vaccination data, we will cover a few updates to reporting the data this year compared to last year. These include the NHSN re-consent process, updated SAMS log-in web page, and a new data verification checklist. Now I will turn the presentation over to our first speaker, Elizabeth Kalayil.

Elizabeth Kalayil: Thank you, Evette. We will start by briefly reviewing the NHSN re-consent process.

All facilities that are part of NHSN will be required to re-consent electronically through the NHSN application. In addition, newly enrolling facilities will also need to submit their consent form electronically. The re-consent is due to an update to the NHSN purposes. These purposes now include the extension of data access for surveillance and prevention purposes to local health departments via data use agreements as is currently an option for state health departments.

The January 30, 2018 release of the NHSN 8.8.1 application will introduce an updated NHSN Agreement to Participate and Consent for current NHSN facility users who enrolled in NHSN prior to December 2, 2017. Facilities that enrolled in NHSN on or after December 2, 2017, have already accessed this new consent and will not need to accept it again if they have already done so. Once the consent form is available on January 30, an alert will appear on all NHSN component homepages, and primary contacts and Facility Administrators will receive an email notification. Primary contacts or Facility Administrators should agree to this updated consent form for each component by April 14, 2018. If this is not completed, they will lose access to NHSN. Additional information including Frequently Asked Questions and the updated NHSN purposes are available on CDC's NHSN website, which you can access from the link on this slide. If you have any questions, please send an email to NHSN@cdc.gov with the subject line "NHSN Re-Consent."

Next, we'll review a few points that facilities will need to know about NHSN users that will be submitting data.

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 Facilities 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 last name or 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 the "Save" button.

The "Edit User Rights" screen will appear after you save the new user information. Select the appropriate level of rights to give to the 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 any NHSN access issues due to staff turnover, vacation, or extended leave, we recommend that each facility has at least two individuals who can add, edit, delete, and analyze the Healthcare Personnel Influenza Vaccination Summary measure data within NHSN. If you're unsure 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 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 with SAMS. SAMS stands for Secure Access Management and Services and provides secure online access to CDC applications such as NHSN. All NHSN users are required to complete the same SAMS editing e-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 a delay in processing the documentation.

You will receive confirmation from SAMS once these documents are approved. Also, a 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, the user will need to reach out to the NHSN Helpdesk to be re-invited to SAMS and 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 onboarding process well in advance of the reporting deadline that is on May 15th. Users should be sure to log into 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, this may delay your reporting. Because a SAMS card is user-specific, rather than 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 the 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 this slide.

NHSN highly recommends that, if there's a change in NHSN Facility Administrator, he or she should transfer that role to another user at the facility in NHSN prior to leaving. This saves a significant amount of time for the newly designated Facility Administrator and prevents a gap in access to your facility. Also, inpatient psychiatric facilities should contact the VIQR support contracting staff whenever changes occur to ensure that there is timely outreach.

Please email IPFQualityReporting@hcqis.org. 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 role manually reassigned to the new administrator. To complete this process, a letter must be faxed to the NHSN Helpdesk using the number listed on the slide. The letter should be from a C-level executive at your facility requesting that you be assigned as a new NHSN Facility Administrator since the previous administrator is no longer at 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 enroll the facility in NHSN. After the NHSN Helpdesk receives a fax and completes their reassignment, the newly designated Facility Administrator will receive the "Welcome to NHSN" email to start the new user onboarding process. If the newly assigned Facility Administrator was already an NHSN user with a SAMS card, then no further action is required.

The next few slides will provide a brief overview of the data that IPFs are expected to report for the healthcare personnel measure data submission. As a reminder, we advise that you refer to the January 25, 2017 event for comprehensive guidance about the reporting requirements.

The denominator includes three required categories and one optional category of personnel. Facilities are required to include employees, staff on facility payroll, licensed independent practitioners, and adult students/trainees and volunteers. Payroll employees are defined as all persons receiving a direct paycheck from the healthcare facility, regardless of clinical responsibility or patient contact. Facilities have the option to include other contract personnel in the dominator for this measure. Please note that all healthcare personnel included in the denominator must physically work in the IPF for one day or more from October 1st through March 31st.

The numerator reporting requirement inclusions for the healthcare personnel measure are healthcare personnel who:

- Received an influenza vaccination at the reporting healthcare facility since the vaccine became available for this season.
- Healthcare personnel who provided a written report or documentation of receiving an influenza vaccination outside the reporting healthcare facility since the vaccine became available this season.
- Healthcare personnel who have a medical contraindication to the vaccine.
- Healthcare personnel who decline to receive the influenza vaccine.
- Healthcare personnel with unknown vaccination status or criteria that were not met for the above-mentioned categories.

So far, we've described how to add new users to NHSN, as well as the measure and reporting requirements. In the next several slides, we'll review step-by-step instructions that an IPF must follow in order to successfully submit their Healthcare Personnel measure data to CDC via NHSN. All data successfully submitted to the CDC for participating IPFs are then transmitted to CMS for the IPFQR Program.

After a facility has enrolled in NHSN and/or has activated the Healthcare Personal Safety 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 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 CDC. The survey aims to gather information on influenza vaccination programs for healthcare personnel by collecting data on the types of personnel groups that are included in the facility's annual influenza vaccination campaign, methods that facilities are using to deliver influenza vaccine to healthcare personnel, and strategies that a facility uses to promote or enhance the healthcare personnel influenza vaccination.

So now we'll go over how to navigate through NHSN. Facilities must use the SAMS card to enter their NHSN data. Please note that the appearance

on the web page has changed compared to last year. You can access the NHSN activity homepage by clicking on the link listed on this 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 toll free by phone or by email using the information listed here.

This slide shows the NHSN landing page. Select the appropriate component, which is "Healthcare Personnel Safety," and facility from the dropdown boxes. Next, please click the "Submit" button to proceed. While you're navigating through NHSN, you should use the NHSN buttons and not the web browser buttons. You can always see which user ID, facility name, and facility ID and component 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 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 information is automatically updated for the entire influenza season, as it is defined by NHSN. That's July 1st through 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.

Please note that only acute care or critical access hospitals who have a CMS IPF unit mapped within their NHSN facility will see a different NHSN screen when adding the Monthly Reporting Plan. Acute care and critical access hospitals with IPF units will also need to select the correct month and year from the dropdown menu. Each hospital or unit should check the appropriate box for Influenza Vaccination Summary under the Healthcare Personnel Vaccination Module. For example, to report data on inpatient and outpatient units for the acute care hospital, you would check

"Influenza Vaccination Summary for the Hospital." To report data for an inpatient psychiatric unit that is part of the acute care or critical access hospital, you would check "Influenza Vaccination Summary for Inpatient Psychiatric Facility Units." Please note that to report both hospital units and IPF, both boxes on the reporting plan should be checked.

Now this slide shows what freestanding IPFs will see on their screen in NHSN when adding a Monthly Reporting Plan. To add a Monthly Reporting Plan, click on "Reporting Plan" and then "Add" on your navigation bar. Select the correct month and year from the dropdown menus. So, for example, if you're reporting data for the 2017–2018 influenza season, you can select January 2018 for your plan. It's very important to correctly submit your Monthly Reporting Plan and this includes identifying the correct influenza season. Please note that reporting plans that identified the wrong influenza season will not allow your data to be submitted in fulfillment of the CMS reporting requirements. The user should check the box next to Influenza Vaccination Summary under the Healthcare Personnel Vaccination Module. After making appropriate selections, the user must click on "Save." Now that we have covered how to enter a Monthly Reporting Plan, I will turn things over to my colleague, Parneet Ghuman. She will go over data entry and verification.

Parneet Ghuman: Thank you, Elizabeth. 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 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 accounts be updated on a monthly basis. However, as mentioned earlier, entering the 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 1 on the form pertains to the denominator, while questions 2–6 pertain to the numerator.

The Table of Instructions for the Influenza Vaccination Summary provides 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 appear as the default option on the dropdown menu. Please remember that you will not be able to enter summary data until you have first added your Monthly Reporting Plan.

Acute care or critical access hospitals with IPF units will see a slightly different screen when adding Healthcare Personnel Influenza Vaccination data. The user 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 dropdown box. For example, if you're reporting data for the 2017–2018 influenza season, you must select 2017–2018 in the dropdown box. This is very important since data submitted under the incorrect influenza season will not be shared with CMS and will not fulfill reporting requirements for the IPFQR Program. Facilities can always contact NHSN if they are unsure of which influenza season is currently being reported. The user must select the appropriate location from the dropdown box. To report data for an inpatient psychiatric unit that is part of an acute care or a critical access hospital, select "IPF Units." Please note that to report data for both hospital units and IPFs, a summary report

should be submitted for each. After the Monthly Reporting Plan, please note that the screen is what all facilities, such as freestanding IPFs, will see on their screen at 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 dropdown box. For example, if you are reporting data for the 2017–2018 influenza season, you must select the 2017–2018 in the dropdown box. Again, this is very important since data submitted under the incorrect influenza season will not be shared with CMS and will not fulfill reporting requirements for the IPFQR Program. 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 for users who will be entering data for the first time during the current data submission period. 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 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 gray "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 IPFQR Program requirements. Any data that are entered after the May 15th reporting deadline will not meet the submission requirements for the 2017–2018 influenza season for the IPFQR Program.

After you save the data, you should see a message confirming your data have been saved. This will appear at the top of your screen. Users that wish to edit their data will see this imagine on this slide. Specifically, 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. Click "Edit" at the bottom of the screen to modify existing data.

Once complete, be sure to save the updated data by clicking the "Save" button at the bottom of the screen. Again, you should see a message confirming your data have been saved and the date last modified will be automatically updated by NHSN. We will now briefly review the steps facilities can take to verify that their data had 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 a report within the NHSN analysis feature. This report can be found in the CMS reports folder under the Inpatient Psychiatric Facilities subfolder. By clicking the gray "Run" button next to this report, the facility can review the Healthcare Personnel Influenza Vaccination data by influenza season, stratified by healthcare personnel category such as employees, licensed independent practitioners, adult students or trainees, and volunteers, and all three categories combined. This report shows 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 the second window does not appear when you click the "Run" button, please be sure to check your pop-up blocker and allow pop-ups from *.CDC.gov. Please refer to the link on this slide for the step-by-step guidance for running and interpreting this report.

In addition to running the CMS Line Listing Report described on the previous slide, a facility's' freestanding IPFs 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 to the "Facility Information" screen, click on "Facility," and then "Facility Info" on the left-hand navigation bar. First, verify that the correct facility CMS Certification Number, or CCN, and CCN effective date have been entered correctly. Your CCN effective date should be the date your facility first

received its CCN from CMS. If you cannot obtain that date, but it was prior to January 1, 2018, please use January 1, 2018, as a CCN effective date. You also need to ensure that your facility is enrolled in NHSN as the correct facility type. All freestanding IPFs should be enrolled as a facility type, "HOSP-PSYCH." If your facility is not correctly enrolled, please contact NHSN@CDC.gov for assistance. This is very important, as only data from facilities enrolled as "HOSP-PSYCH" will be shared with CMS. As long as your data appear in the CMS line listing report for the current reporting period, your CCN and CCN effective date 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.

When verifying data in NHSN for IPF units, first verify that the correct acute care or critical access facility, CCN, and CCN effective date have been entered correctly. Your CCN effective date should be the date your facility first received its CCN from CMS. If you cannot obtain that date, but it was prior to January 1, 2018, please use January 1, 2018, as a CCN effective date. You also need to ensure that your facility is enrolled in NHSN as the correct facility type for acute care facilities, for example, "HOSP-GEN," "CAH," "HOSP-SURG," or "HOSP-WOM." If your facility is not correctly enrolled, please contact NHSN@CDC.gov for assistance.

In addition, please review the specific details for the IPF units of the acute care or critical access facility by going to the "Locations" tab under "Facility" on the left-hand navigation bar in NHSN. Ensure that "Yes" is selected for the question: "Is this location a CMS IPF unit within a hospital?" Also, please ensure that the correct CCN and CCN effective date are entered for each IPF unit. As long as your data appear in the CMS line listing report for the current reporting period, your CCN and CCN effective date are correct for both your IPF units and acute care facility type, and your facility is enrolled in NHSN 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.

We know that there is a lot of information in this presentation, so we've decided to boil down some key points into a checklist to which you can refer. The first point is to remember to keep your SAMS credentials active by logging into NHSN every few months. If this is not done at least once every 12 months, the individual will lose access to SAMS and NHSN. Also, NHSN users will be prompted to change their SAMS password every 60 days. It is also important to have at least two staff members at each facility who can add, edit, delete, and analyze data in NHSN. This will be helpful in case certain staff members are not available to enter data due to circumstances such as staff turnover or vacation.

You will need to create a new Monthly Reporting Plan for each new influenza season. Therefore, you will need to create a plan for the current 2017–2018 influenza season. You may select January 2018 for the month and year for this plan. Once you have successfully added a Monthly Reporting Plan, you can then enter your data. Once you arrive at the data entry screen, you will need to select the 2017–2018 season in the dropdown box for the influenza season. This is very important since data submitted under the incorrect influenza season will not be shared with CMS and will not fulfill reporting requirements. Lastly, be sure that your CCN and CCN effective date are entered correctly and appropriately into NHSN. You can refer to the link listed on this slide for guidance on how to accomplish this. The correct facility type needs to also be entered into the "Facility Information" page in NHSN. This concludes my portion of the presentation. I will now turn it back over to our moderator, Evette Robinson.

Evette Robinson: Thank you, Parneet. In the next few slides we will review several helpful resources pertaining to today's webinar. Since today's webinar was designed to be a refresher presentation, we did not review information on facility enrollment and location mapping for IPF units in great detail. However, links to resources about these topics are listed on this slide. You can always access a variety of training materials on the CDC website such as training slides, data reporting protocols and Frequently Asked Questions.

Also, the CDC has developed a resource for facilities to use that outlines the exact steps they should take when verifying that their data will be sent to CMS. You can access this document using the third link on this slide.

If you have any questions about the NHSN enrollment, re-consent, or HCP Influenza Vaccination data submission processes, please send an email to user support at NHSN@cdc.gov. Again, that email address is NHSN@cdc.gov. Be sure to include "IPF NHSN Enrollment" or "IPF HCP Measure Data Submission" in the subject line as well as the name and IPF-specific CCN of the facility in the body of the email. This will help the NHSN team to better assist you. Note that an IPF-specific CCN will have the letter S, letter M, or number 4 in the third position to indicate that the IPF is associated with an acute care hospital, a critical access hospital, or it is a freestanding IPF, respectively.

The slide includes additional links to the webinar materials from the January 2017 webinar referenced earlier in this presentation. The webinar materials for this event include the slides, recording, Q&A transcript, and presentation transcript.

CMS recommends that IPFs refer to the most recent IPFQR Program Manual for information pertaining to the IPFQR Program. The manual is located on the *QualityNet* and *Quality Reporting Center* websites and it contains information about program requirements, program measures for the FY 2018 payment determination, as well as links to helpful optional paper tools pertinent to the data submission process.

You can click on the title of the table on this slide to access the IPFQR Program Resources page on the *QualityNet* website. Additional active links on this slide are available for you to send us your questions about the IPFQR Program. We encourage you to use the Q&A tool in particular because it provides the best means by which we can track questions and answers and also delivers our responses to your email inbox. Additionally, this is a great way for you to let us know what type of questions and topics you'd like for us to address in future webinars. We recommend that you sign up for the IPFQR Program ListServe, if you have not already, so that

you can receive communications that we send out to the IPFQR community pertaining to webinars, program updates, and other announcements. You can sign up to be added to the ListServe on the *QualityNet* ListServe registration page.

On this slide, we have a list of upcoming educational webinars that are planned for the second quarter of 2018. More information about the upcoming webinars will be distributed via email to the IPFQR Program ListServe, so be sure to monitor your emails for details about these webinar events. This concludes the conference portion of the webinar titled: *Reporting Healthcare Personnel Influenza Vaccination Data – Refresher for 2018*. I will now turn the presentation over to Deb Price, who will describe the continuing education process for today's webinar.

Deb Price: Well, thank you very much. Today's webinar has been approved for one continuing education credit by the boards listed on this slide. We are now a nationally accredited nursing provider and, as such, all nurses report their own credits to their boards using the national provider number 16578. It is your responsibility to submit this number to your own accrediting body for your credits.

We now have an online CE certificate process. You can receive your CE certificate two ways. The first way is, if you registered for the webinar through ReadyTalk, a survey will automatically pop up when the webinar closes. The survey will allow you to get your certificate. We will also be sending out the survey link in an email to all participants within the next 48 hours. If there are others listening to the event that are not registered in ReadyTalk, please pass the survey to them.

After completion of the survey, you'll notice at the bottom right-hand corner a little gray box that says "Done." You will click the "Done" box and then another page opens up. That separate page will allow you to register on our Learning Management Center. This is a completely separate registration from the one that you did in ReadyTalk. Please use your personal email for this separate registration so you can receive your

certificate. Healthcare facilities have firewalls that seem to be blocking our certificate from entering your computer.

If you do not immediately receive a response to the email that you signed up with the Learning Management Center, that means you have a firewall up that's blocking the link into your computer. Please go back to the New User link and register a personal email account. Personal emails do not have firewalls up. If you can't get back to your New User link, just wait 48 hours because, remember, you're going to be getting another link and another survey sent to you within 48 hours.

Okay, this is what the survey will look like. It will pop up at the end of the event and will be sent to all attendees within 48 hours. Click "Done" at the bottom of the page when you are finished. This is what pops up after you click "Done" on the survey. If you have already attended our webinars and received CEs, click "Existing User." However, if this is your first webinar for credit, click "New User."

This is what the New User screen looks like. Please register a personal email like Yahoo, or Gmail, or AT&T since these accounts are typically not blocked by hospital firewalls. Remember your password, however, since you will be using it for all of our events. You notice you have a first name, a last name, and the personal email, and we're asking for a phone number in case we have some kind of backside issues that we need to get in contact with you.

This is what the Existing User slide looks like. Use your complete email address as your user ID and of course the password that you registered with. Again, the user ID is the complete email address including what is after the @ sign.

Thank you for taking the time spent with me.