

# Person-Level COVID-19 Vaccination Forms: A How-To Guide

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## Purpose

CMS-certified skilled nursing facilities (SNFs) are required to submit cumulative weekly COVID-19 vaccination data to the Weekly COVID-19 Vaccination Modules. Long-term care facilities need to continue to report to the Healthcare Personnel (HCP) and Resident Weekly LTCF COVID-19 Vaccination Modules of the LTCF component on a weekly basis. Data can be reported to these modules in three ways, and this guide focuses on #3:

- 1. Directly into the data entry screens of the Weekly COVID-19 Vaccination Modules
- 2. Through .CSV upload into the Weekly COVID-19 Vaccination Modules
- 3. As of March 28, 2022, Long-Term Care (LTC) facilities have the option to use the **Person-Level Vaccination Forms** and select the "view reporting summary and submit" to submit these data to the Weekly COVID-19 Vaccination Modules.

## What will be covered in this guide?

This guide covers how to enter a new record and update an existing record in the Person-Level COVID-19 Vaccination Forms. This guide will also provide instructions for exporting and importing .CSV data. Please note that all examples in this guide use test data. These data are fictitious and are for educational purposes only. While most examples in this guide use resident data, the steps for entering and updating records in the Person-Level COVID-19 Vaccination Forms are the same for HCP and residents.

## Who should use the Person-Level COVID-19 Vaccination Forms?

We recommend that **all LTC facilities** use the Person-Level COVID-19 Vaccination Forms to ensure accurate summary of data when submitting HCP and resident data to the Weekly COVID-19 Vaccination Modules.

## What are the advantages of the Person-Level COVID-19 Vaccination Forms?

Use of these forms simplifies reporting summary data. The NHSN application automatically **calculates** and **enters** the weekly summary totals based on the person-level data. This means those who use the Person-Level COVID-19 Vaccination Forms will no longer need to manually calculate and enter totals in the summary forms. Users update the person-level data and click 'View Reporting Summary and Submit' to review the totals and submit their weekly data. The Person-Level COVID-19 Vaccination Forms automatically classify individuals' up to date vaccination status for each reporting week of interest. The Person-Level COVID-19 Vaccination Forms also help facilities organize and manage their data on all HCP and residents and capture changes in individuals' vaccination status over time.

# Accessing the Person-Level COVID-19 Vaccination Forms

The optional Person-Level COVID-19 Vaccination Forms are available in the LTC component of the NHSN application. SAMS Level 3 access is required to access the Person-Level COVID-19 Vaccination Forms. Please contact <u>NHSN@cdc.gov</u> and place in the subject line: "SAMS Level 3 Access" to request SAMS Level 3 access.

Select "Person-Level COVID-19 Vaccination Form-Residents" or "Person-Level COVID-19 Vaccination Form-HCP" as to open the person-level form of interest. The image below shows what to select for accessing the Person-Level COVID-19 Vaccination Form for residents.

This will take you to the data entry screen where person-level data can be entered, modified, or uploaded via .CSV file. This is the first step for any data entry, upload, or modification.

| NHSN Home           |   |   |  |  |  |
|---------------------|---|---|--|--|--|
| Alerts              |   |   |  |  |  |
| Dashboard           | • | <ul> <li>Long Term Care Dashboard</li> </ul>    |  |  |  |
| Reporting Plan      | × |   |  |  |  |
| Resident            | • | <ul> <li>Action Items</li> </ul>                |  |  |  |
| Event               | • |   |  |  |  |
| Summary Data        | • | COMPLETE THESE ITEMS                            |  |  |  |
| COVID-19            | • | Dashboard                                       |  |  |  |
| Vaccination Summary |   | Pathway Data Reporting                          |  |  |  |
| Import/Export       |   | POC Test Result Reporting                       |  |  |  |
| Surveys             | • | COVID-19 Event                                  |  |  |  |
| Analysis            | • | COVID-19 Vaccination - HCP                      |  |  |  |
| Users               | • | COVID-19 Vaccination - Residents                |  |  |  |
| Facility            | × | Person-Level COVID-19 Vaccination Form<br>- HCP |  |  |  |
| Group               | • | Person-Level COVID-19 Vaccination Form          |  |  |  |
| Tools               | • | - Residents                                     |  |  |  |

## User Rights

To enter person-level HCP vaccination data, users must have the 'Staff/Visitor-Add, Edit, Delete' and 'Staff/Visitor-view' boxes checked under user rights (administrators can grant these rights).

Please note that facility administrators automatically have these rights.

| Rights                            | Long Term Care Facility |
|-----------------------------------|-------------------------|
| Administrator                     |                         |
| All Rights                        |                         |
| Analyze Data                      |                         |
| Add, Edit, Delete                 |                         |
| View Data                         |                         |
| Staff/Visitor - Add, Edit, Delete |                         |
| Staff/Visitor - View              |                         |

# Entering a New Person-Level Vaccination Record

There are other forms in NHSN that collect data on individual residents and HCP (e.g., POC Tool, LabID Event, UTI Event, SVH COVID-19 Event Form). All individuals (and their demographic data) entered on these forms are stored in NHSN resident and HCP lists. The NHSN person-level vaccination records are linked to the NHSN resident and HCP lists to provide consistency and integration across forms.

## Tips for creating Resident IDs and HCP IDs

- Ensure that you are using the ID used for the same individual entered on other person-level forms in NHSN.
- Avoid starting the ID with a 0 (zero) because if you ever decide to import a .CSV file, the .CSV drops the leading 0 (zero) and this changes the ID. This will result in duplicate rows for the same person with two different IDs.
- Avoid using birthday or room number as the ID because these types of identification can be shared by more than one individual, so this will eventually create duplicates.

## Step 1. Enter ID and demographics

## The first step is to identify or enter an individuals' ID and demographic information.

Click + Add Row.

If you **know the resident ID** you are looking for, type it in the Resident identifier box. Click the Select button and this will auto-fill in name, DOB, gender, ethnicity, and race. Finish entering the vaccination data and click save row.

If you **do not know the resident ID** (or don't know if this person has a record on the NHSN resident list), click Find.

The text below will display when you hover over the Find button.

| Perso   | n-Level CC                      | VID-19 Vaccination Form  | - Residents       |                 |               |                          |                          |             |
|---|---------------------------------|--|-------------------|-----------------|---------------|--------------------------|--------------------------|-------------|
| + Add Row   | View Repo                       | orting Summary & Submit 📃 🔨 Upl  | oad CSV 🔷 Ex      | port CSV 🔹 Expo | t SQL         |                          |                          |             |
| Resident id   | lentifier *                     | Resident First Name *  | Reside            | nt Last Name *  | Gender **     | Date of Birth <b>*</b> * | Ethnicity **             |             |
|   | Find                            |  |                   |                 | ~             |                          |                          |             |
| <ul> <li>Save Row</li> <li>Required fields man</li> </ul> | a record on                     | ndividual you are adding already has<br>the Resident screen (because they<br>busly entered on another event-level  |                   |                 |               |                          |                          | •           |
| Delete Duplicat<br>Row                                    | e UTI), please<br>individual. 1 | s POC, COVID-19 Event, LabID, or<br>use this feature to select this<br>This will auto-fill the following fields:<br>rst name, last name, gender, date of     | rst Name <b>*</b> | Resident Last   | Name <b>*</b> | Gender * *               | Date of Birth <b>* *</b> | Ethnicity ' |
| +<br>+<br>+   | not already<br>will be creat    | tity, and race. If the individual does<br>have a record entered, a new record<br>ted on the Resident screen when you<br>fields using the +Add Row button and |                   |                 |               |                          |                          |             |
| +   | click save ro                   |  |                   |                 |               |                          |                          |             |

After you click the **Find** button, the NHSN resident list will appear on the screen.

Change the **view** from 10 to 100 records.

Scan the list to see if the individual you are looking for has a record.

## Example 1: The person I'm looking for already has a corresponding record on the NHSN resident list

Say you are looking for a record for someone named Erica Masterson with a birthday of 1/1/1950. She already has a record on the NHSN resident list, so click on her row, then click the **Select** button.

Clicking the Select button will automatically fill in the Resident identifier, name, gender, date of birth, ethnicity, and race from her record on the NHSN resident list. Although the row has auto filled the individuals' demographics, the vaccination information will need to be entered prior to saving the row for that individual.

| Facility ID 🚖 | ID       | Last Name   | First Name        | Middle Name | Date of Birt  |
|---------------|----------|---|-------------------|-------------|---------------|
|               | x        | x   | x                 | x           | ,             |
| 14701         | DFDGDG   | DFGD  | GDGFDF            |             | 01/03/195     |
| 14701         | NEWRECOR | FGDF  | DSDG              |             | 01/01/195     |
| 14701         | NEWRECOR | FGDF  | DSDG              |             | 01/01/195     |
| 14701         | 2238     | FREEMAN   | JUDY              |             | 07/13/196     |
| 14701         | PULL7410 | JACKSON   | JUNE              |             | 10/15/197     |
| 14701         | SUN258   | LOWS  | JIM               |             | 08/15/198     |
| 14701         | 80005522 | MASTERSON   | ERICA             |             | 01/01/195     |
| 14701         | 99805821 | STRANGE   | STEPHEN           |             | 01/01/195     |
| 14701         | 10000000 | WILLIAMS  | SIMON             |             | 01/01/195     |
|               |          | ia <a page<="" td=""><td>e1 of 1 🔛 🖬 100 🗸</td><td>,</td><td>View 1 - 9 of</td></a> | e1 of 1 🔛 🖬 100 🗸 | ,           | View 1 - 9 of |
|               |          |   |                   |             |               |
|               |          |   |                   |             |               |

Example 2: The person you are entering vaccination data for does not already have a corresponding record on the NHSN list

Click + Add Row button. If you do not know if this person has a record on the NHSN list, click the **Find** button indicated by the #1 in the image below. Next, change the **view** from 10 to 100 records as shown in the image below with #2 and scan the list to see if the person you are looking for has a record.

| Person-                  |   | VID-19 Vaccination Form   | - Resider  | nts<br>Export CSV    | Export SQL       |                    |                  |   |
|--------------------------|---|---|------------|----------------------|------------------|--------------------|------------------|---|
| Resident iden            | tifier *  | Resident First Name *   |            | Resident Last Name * | Gender *         | * Date of Birth ** | Ethnicity **     |   |
|                          | Find  |   |            |                      | <b>~</b>         |                    |                  |   |
|                          |   |   | 1          |                      |                  |                    |                  | • |
| Save Row                 |   | dividual you are adding already has<br>ne Resident screen (because they   |            |                      |                  |                    |                  |   |
| equired fields mark      |   | sly entered on another event-level  |            |                      |                  |                    |                  | C |
| Delete Duplicat<br>e Row | UTI), please u                                    | POC, COVID-19 Event, LabID, or<br>use this feature to select this<br>his will auto-fill the following fields:   | rst Name ★ | Resi                 | dent Last Name * | Gender **          | Date of Birth ** |   |
|                          | birth, ethnici<br>not already h<br>will be create | t name, last name, gender, date of<br>ty, and race. If the individual does<br>ave a record entered, a new record<br>d on the Resident screen when you<br>elds using the +Add Row button and<br>v. |            |                      |                  |                    |                  |   |

| Facility ID 🚖  | ID                   | Last Name           | First Name    | Middle Name | Date of Birth            |
|----------------|----------------------|---------------------|---------------|-------------|--------------------------|
|                | x                    | x                   | x             | x           | x                        |
| 14701          | DFDGDG               | DFGD                | GDGFDF        |             | 01/03/1950               |
| 14701          | NEWRECOR             | FGDF                | DSDG          |             | 01/01/1950               |
| 14701          | NEWRECOR             | FGDF                | DSDG          |             | 01/01/1950               |
| 14701          | 2238                 | FREEMAN             | JUDY          |             | 07/13/1962               |
| 14701<br>14701 | PULL7410<br>10000000 | JACKSON<br>WILLIAMS | JUNE<br>SIMON |             | 10/15/1977<br>01/01/1950 |
|                |                      | 14 <4 Pag           |               |             | View 1 - 9 of            |

If the individual does not have a record, click **cancel** as indicated by the #3 below.

|          | 🖙 🛹 Page   | 1 of 2 → → 10 → View 1 - 1  |  |  |  |  |
|----------|--|---|--|--|--|--|
| ID       | Last Name  | First Name  | Middle Name  | Date of Birt   |  |  |
| x        | x  | x   | x  |  |  |  |
| 20006688 | BAKER  | WILLIAM   |  | 01/01/195  |  |  |
| DFDGDG   | DFGD   | GDGFDF  |  | 01/03/195  |  |  |
| NEWRECOR | IFGDF  | DSDG  |  | 01/01/195  |  |  |
| NEWRECOR | IFGDF  | DSDG  |  | 01/01/195  |  |  |
| NEWRECOR | IFGDF  | DSDG  |  | 01/01/195  |  |  |
| 2238     | FREEMAN  | JUDY  |  | 07/13/196  |  |  |
| 2238A    | FREEMAN  | JUDY  |  | 07/13/195  |  |  |
| PULL7410 | JACKSON  | JUNE  |  | 10/15/197  |  |  |
| SUN258   | LOWS   | MIL   |  | 08/15/198  |  |  |
| 80005522 | MASTERSON  | ERICA   |  | 01/01/195  |  |  |
|          | x<br>20006688<br>DFDGDG<br>NEWRECOR<br>NEWRECOR<br>2238<br>2238A<br>PULL7410<br>SUN258 | ID Last Name X X X X 20006688 BAKER DFDGDG DFGD NEWRECOR FGDF NEWRECOR FGDF 2238 FREEMAN 2238A FREEMAN PULL7410 JACKSON SUN258 LOWS | ID     Last Name     First Name       x     x     x     x       20006688     BAKER     WILLIAM       DFDGDG     DFGD     GDGFDF       NEWRECOR   FGDF     DSDG       NEWRECOR   FGDF     DSDG       2238     FREEMAN     JUDY       2238A     FREEMAN     JUDY       PULL7410     JACKSON     JUNE       SUN258     LOWS     JIM | ID     Last Name     First Name     Middle Name       x     x     x     x       20006688     BAKER     WILLIAM     x       DFDGDG     DFGD     GDGFDF       NEWRECOR   FGDF     DSDG       NEWRECOR   FGDF     DSDG       2238     FREEMAN     JUDY       2238A     FREEMAN     JUDY       PULL7410     JACKSON     JUNE       SUN258     LOWS     JIM |  |  |



Since this individual does not have a corresponding record, type in a new, unique Resident ID. An alert will appear indicating this is a new ID. Click OK to continue entering the data on this row.

| Person-Level COVI                        | ID-19 Vaccination Form - Resident  | S                    |                                |                          |               |   |
|--|--|----------------------|--------------------------------|--------------------------|---------------|---|
| <ul> <li>Add Row View Reporti</li> </ul> | Alert  | Export CSV           | <ul> <li>Export SQL</li> </ul> |                          |               |   |
| Resident identifier *                    | Could not find Resident. You can directly enter a new Resident from this screen. | Resident Last Name * | Gender <b>* *</b>              | Date of Birth <b>* *</b> | Ethnicity * * |   |
| AO5678                                   | ОК   |                      |                                |                          |               |   |
| I Save Row Ø Cancel                      |  |                      |                                |                          |               | Þ |

Enter the individuals' vaccination information including dose dates and vaccine manufacturers (or date of declining or medical contraindication) and click Save Row. If you do not know their vaccination status, you can enter an unknown vaccination status that is the same day as their admission or start date.

| Add Row       | View Rep  | orting Summary & Submit | Upload CSV | Export CSV           | Ехро | rt SQL    |                  |                    |                     |
|---------------|-----------|-------------------------|------------|----------------------|------|-----------|------------------|--------------------|---------------------|
| Resident ider | itifier * | Resident First Name     |            | Resident Last Name * |      | Gender ** | Date of Birth ** | Ethnicity **       | Race                |
| 2238          | Find      | JUDY                    | FREEM      | AN                   |      | Female 🗸  | 07/13/1962       | Hispanic or Latino | American Indian/Ala |
| B Save Row    |           |                         |            |                      |      |           |                  |                    |                     |

Entering and saving a record for this new individual adds them to the NHSN resident list.

Note: If you are unable to obtain information on gender, ethnicity, and/or race, you may select the 'Unknown' option.

## Example 3: Adding demographic information for a new record

Click the + Add Row button. Enter ID, name, then use the drop-down menus to select gender, ethnicity, and race.

| Add Row View Rep      | orting Summary & Submit | - Upload CSV | Export CSV           | Export SQL              |  |
|-----------------------|-------------------------|--------------|----------------------|-------------------------|--|
| Resident identifier * | Resident First Name *   |              | Resident Last Name * | Gender **               | Ethnicity **   |
| RES234 Find           | Donna                   | Morgan       |                      |                         |  |
| ■ Save Row Ø Cancel   |                         |              |                      | Female<br>Male<br>Other | Hispanic or Latino<br>Not Hispanic or Not Latino<br>Declined to respond<br>Unknown |

For race, scroll down to see all checkbox options. *Note: You can select more than 1 race. If you select* **Declined to** *respond* or **Unknown**, you cannot check more than 1 value.



## Step 2. Enter vaccination information

The vaccination information will need to be entered after the individuals' ID and demographics are entered (prior to saving the row).

#### Example 1: A resident who has received multiple doses of COVID-19 vaccine

In this example, there is a new resident admitted on 10/02/2022 and they completed 4 COVID-19 vaccines.

- 1. In this case, the resident does not have a known ID; therefore, his ID and demographics data will need to be manually entered.
- 2. 2.Enter the vaccine information for his administered COVID-19 vaccines. Enter the date he received dose 1 (6/17/2022) and the manufacturer of dose 1 (Novavax).
- 3. Enter the date he received dose 2 (7/15/2022) and the manufacturer of dose 2 (Novavax).
- 4. Enter date he received dose 3 (12/21/2022) and the manufacturer (Bivalent Moderna).
- 5. Enter date he received dose 4 (5/1/2023) and the manufacturer (Bivalent Moderna).

Note: Novavax is not valid prior to 6/1/2022 & <u>Updated (Bivalent) Pfizer vaccine</u> and <u>Updated (Bivalent) Moderna</u> vaccine can only be selected if corresponding dose date is after 4/19/2023.

| Person-Level COVID-          | 19 Vaccination Form - Res   | idents                       |              |                  |            |                               |  |                               |                                       |
|------------------------------|-----------------------------|------------------------------|--------------|------------------|------------|-------------------------------|--|-------------------------------|---------------------------------------|
| Add Row     View Reporting S | ummary & Submit 🔗 Upload CS | SV \land Export CSV \land Ex | port SQL     |                  | Ś          | 2                             |  | 3                             |                                       |
| 1 Resident identifier *      | Resident First Name *       | Resident Last Name *         | Gender **    | Date of Birth ** | Ethnici    | Dose 1 vaccination<br>date ** | Dose 1 vaccine manufacturer<br>name ** | Dose 2 vaccination<br>date ** | Dose 2 vaccine manufacture<br>name ** |
| 4M56789<br>Find              | y M                         | ouse                         | Female 🛩     | 01/02/1952       | Not Hispan | 06/17/2022                    | Novavax COVID-19 vaccin                | e 07/15/2022 <b>(</b>         | Novavax COVID-19 vac                  |
| Save Row     Ø Cancel        |                             |                              |              |                  |            |                               |  |                               |                                       |
| <ul> <li>Add Row</li> </ul>  | View Reportin               | g Summary & Sub              | _            |                  | ad CSV     |                               | port CSV                               | • Ехро                        | rt SQL                                |
| Pequired fields mar          | ked with * Conditio         | nally required fields        | s marked wit | h **             | 5          |                               |  |                               |                                       |
| Dose 3 Date **               | Dose 3 dose type            | ** Dose 3                    | Manufacture  | ***              | Dose 4 [   | Date                          | Dose 4 Man                             | ufacturor                     |                                       |
| Dose o Date                  | Dose 5 dose type            | Dose o                       | Manufacture  |                  | D036 4 1   |                               | Dose milan                             | ulactulei                     | Dose                                  |

Note: Bivalent Moderna and Bivalent Pfizer are not valid prior to 9/1/2022.

Once all demographics and vaccination data are entered for that row, click the Save Row button.

## Example 2: A resident who declined COVID-19 vaccination

A resident can decline COVID-19 vaccination for numerous reasons. The Person-Level COVID-19 Vaccination Form allows users to specify a resident's reason for declining vaccine (Received official religious exemption, Other, or Unknown) listed in the drop-down box.

For example, the resident was admitted on 8/5/2022 and that date was entered indicated by #1 in the screenshot below. He was offered the COVID-19 vaccine but declined. To enter the declination date, click on the cell labeled declination date and enter the date that the resident declined indicated by #2 below. Once the declination reason is determined, select one of the three options from the drop-down box (received official religious exemption, Other, or Unknown) as shown below on #3.

| Person-Level CO       | VID-19 Vaccination Form -        | Residents            |            | 1  |                                 |                            | }                    |   |                        |  |  |                                    |
|-----------------------|----------------------------------|----------------------|------------|--|---------------------------------|----------------------------|----------------------|---|------------------------|--|--|------------------------------------|
| Add Row View Report   | rting Summary & Submit 📃 👘 Uploa | ad CSV 🔗 Export CSV  | Export SQL | l de la companya de l | 1                               |                            | Ì                    |   | 2                      | 8  |  |                                    |
| Resident identifier * | Resident First Name *            | Resident Last Name * | Gender **  | Date of Birth  | Resident Admit<br>Date <b>*</b> | Resident Discharge<br>Date | Dose 1 vacch<br>date | • | Declination<br>date ** | Declination reason                       | Unknown COVID-<br>19 vaccination<br>status Date ** | Additional/booster<br>dose date ** |
| A123 Find             | Alpha                            | Romeo                | Male 🗸     | 06/11/1942   | 98/05/2022                      |                            |                      |   | 08/05/2022             |  |  |                                    |
| Save Row Cancel       |                                  |                      |            |  |                                 |                            |                      |   |                        | Received official re<br>Other<br>Unknown | ligious exemption                                  | 1                                  |

Note: The process is similar for specifying medical contraindication and unknown vaccination status. For medical contraindication, enter the date the medical contraindication occurred or was recorded. For unknown vaccination status, enter the date the individual was admitted or started working in the facility.

## Example 3: A resident's vaccination status changes over time

Over time, a resident's vaccination status may change. The Person-Level COVID-19 Vaccination Forms were designed to capture these changes.

For example, suppose a resident is admitted on 05/04/2023 and their vaccination status was unknown at that time. Enter the resident identifier, DOB, admit date, first name, and last name. Since the vaccinaiton status is unknown, enter an unknown vaccination status date of 5/04/2023, as shown with box with the #1 below.

| + A     | ld Row    | View Reporting Summary &                                     | :Submit 🔷 Upload CSV 🔷 E | xport CSV 🔹 Export SQL |           |                        | CSV      | • Ехро | rt CSV             | csv | A Export C                                     | CSV 🔷 Exp      | ort SQL    |
|---------|-----------|--|--------------------------|------------------------|-----------|------------------------|----------|--------|--------------------|-----|--|----------------|------------|
| Require | Durillast | ked with * Conditionally required f<br>Resident identifier * | ields marked with 🔹      | Resident Last Name *   | Gender ** | Date of Birth <b>*</b> | Resident |        | Reside<br>Discharg | -on | Unknown/other<br>vaccination status<br>Date ** | Dose 3 Date ** | Dose 3 dos |
|         | +         | 551111   | SUN                      | SHYNE                  | Female    | 04/19/1995             | 05/04/2  | 023    |                    |     | 05/04/2023                                     |                |            |

Over the course of their first week at your facility, you learn they are unvaccinated and offer vaccine. They decline vaccination on 5/13/2023. You would update this record as indicated by box # 2 below by entering a declination date of 5/13/2023. Do **not** delete the unknown vaccination status date.

As time goes on, the resident changes their mind and on 6/02/2023 they agree to receive their first dose of COVID-19 vaccine. This can also be updated in the same way. Click on the cells corresponding to dose 1 and provide the dose 1 date and vaccine manufacturer name as shown with box 3 below. Do not delete the unknown vaccination status date or the declination date. You would maintain all three dates on this person's row. You would repeat this process again once the individual receives more doses of COVID-19 vaccine.

|      |                    | . View Reporting Summary &           |                       | Export CSV Export SQL |           |               |                          | Reporting Summary & Submit             |        | <b>λ</b> Γ             | 2                  | 1             |
|------|--------------------|--------------------------------------|-----------------------|-----------------------|-----------|---------------|--------------------------|--|--------|------------------------|--------------------|---------------|
| Requ | red fields r       | narked with * Conditionally required | fields marked with    |                       |           |               | helds marked with Dose 1 | Conditionally required fields marke    |        |                        |                    | Unknown/other |
| Dele | te Duplic<br>e Rot |                                      | Resident First Name * | Resident Last Name *  | Gender ** | Date of Birth | vaccination<br>date **   | Dose 1 vaccine manufacturer<br>name ** |        | Declination<br>date ** | Declination reasor |               |
|      | +                  | 551111                               | SUN                   | SHYNE                 | Female    | 04/19/1995    | 06/02/2023               | Moderna COVID-19 vaccine               | $\sim$ | 05/13/2023             | Other              | 05/04/2023    |

Example 4: A resident received 1 dose of a monovalent COVID-19 vaccine and 1 dose of an updated bivalent COVID-19 vaccine.

The Person-Level COVID-19 Vaccination Forms were designed to capture and apply the up to date COVID-19 vaccination definition.

If a resident received 1 dose of a monovalent Moderna COVID-19 vaccine on 6/01/2022 as indicated by #1 below and later decided to receive 1 dose of an updated bivalent Pfizer COVID-19 vaccine as indicated by #2 below, you will enter the updated bivalent vaccine and the up to date definition will be auto-calculated in the reporting summary.

Note: Updated (Bivalent) Pfizer vaccine and Updated (Bivalent) Moderna vaccine can only be selected if corresponding dose date is after 4/19/2023.

And

Pfizer-BioNTech COVID-19 vaccine and Moderna COVID-19 vaccine can only be selected if corresponding dose date is on or before 4/19/2023.

| Persor                           | n-Level COVID-19 Va                    | accination F                     | orm - Residents                                |  |                         |                    |                                    |
|----------------------------------|--|----------------------------------|--|--|-------------------------|--------------------|------------------------------------|
| + Add Row                        | View Reporting Summar                  | y & Submit                       | ∧ Upload CSV ∧ Exp                             | oort CSV                               | Export SQL              |                    |                                    |
| Required fields man              | rked with * Conditionally require      | ed fields marked wi              | th **  |  |                         |                    | 0                                  |
| Dose 1<br>vaccination<br>date ** | Dose 1 vaccine manufacturer<br>name ** | Dose 2<br>vaccination<br>date ** | Dose 2 vaccine manufacturer<br>name <b>* *</b> | Medical<br>contraindication<br>date ** | Declination<br>date * * | Declination reason | Unknown/c<br>vaccination<br>Date * |
| 06/01/2022                       | Moderna COVID-19 vaccine               | 05/11/2023                       | Updated (Bivalent) Pfizer va                   | 1                                      |                         |                    |                                    |

## Example 5: A resident only received an updated bivalent COVID-19 vaccine

A resident was admitted to the facility on 12/03/2020 and declined vaccination at that time. Time passed and a month ago, in May 2023, the resident decided to receive an updated (Bivalent) Pfizer COVID-19 vaccine.

|         | Person            | -Level COVID-19 Vac                 | cination Form - Reside | nts          | 4                                       | <b>∢</b><br>∢    |                       |                     |                             |
|---------|-------------------|-------------------------------------|------------------------|--------------|---|------------------|-----------------------|---------------------|-----------------------------|
| + Ad    | ld Row            | View Reporting Summary &            | Submit 🔷 Upload CSV    | • Export CSV | <ul> <li>Export SQL</li> </ul>          | y Vie            | w Reporting Summ      | ary & Submit        | 🔷 Upload CSV 🔷 Exp          |
| Require | d fields mar      | ked with 🝍 Conditionally required f | fields marked with 🗮   |              | , i i i i i i i i i i i i i i i i i i i | s marked wit     | h 🕈 Conditionally rec | uired fields marked | with **                     |
|         | Duplicat<br>e Row | Resident identifier *               | Resident First Name *  | I            | Resident Last Name *                    | Resident<br>Date | reoraon               |                     |                             |
|         | +                 | WR1114                              | WYNTER                 | RAINN        |   | 12/03/20         | )20                   | 05/12/2023          | B Updated (Bivalent) Pfizer |

# Example 6: HCP goes on extended leave or stops working in the facility and later returns (after more than 2 weeks)

If HCP stop working in the facility for an extended period (greater than 2 weeks) and later return, you will create a new row for this individual when they return by using the + button next to their original row. The original row will have an end date (the last day they worked in the facility). The new row will have a new start date, and this date must be at least 2 weeks after the original row end date.

## Example 7: A resident is discharged and is later re-admitted to the facility (after more than 1 week)

If a resident is discharged or leaves the facility for any reason, and then returns or is re-admitted within 1 week (7 days) or less, then nothing on their row needs to be changed and their information can continue to be maintained on the original row. If a resident is discharged or leaves the facility for any reason for longer than 1 week (7 days), and returns or is re-admitted after more than 1 week then, you should enter a discharge date on the day they were discharged. When they are later re-admitted, you should duplicate their row by using the + button next to their identifier and entering the new admission date on their new row.

Note: This guidance applies even if there is a bed hold for this resident.

Note: This is consistent with our guidance for the weekly summary forms that says to count all residents occupying a bed at this facility for at least 1 day (at least 24 hours) during the week of data collection.

Suppose a resident was discharged on 6/1/2023, and this resident is re-admitted on 6/18/2023. You enter the discharge date on 6/1/2023. When the resident is re-admitted, you will use the plus sign (+) next to the resident's original row to create a new, duplicate row for the resident where you will enter the new admission (admit) date of 6/18/2023. Also, confirm that the resident's vaccination information is correct and update as needed if there have been any changes since the last entry. Once all information is updated, select 'Save Row'.

Select the plus sign (+) next to the resident's row to create a new, duplicate row.

Enter the new 'Resident Admit Date' In our example, you would enter 6/18/2023.

Confirm that all vaccination fields are still correct and up to date.

## Select "Save Row"

| Re              | esident identifier *   | Residen                                     | t First Name *                     | Resider | nt Last Name *   | Gender ** | Date of Birth ** | Resident Admit<br>Date * | t F<br>Disc    |
|-----------------|--|---|------------------------------------|---------|------------------|-----------|------------------|--------------------------|----------------|
| SS1111          | Find   | SUN   |                                    | SHYNE   |                  | Female 🗸  | 04/19/1995       | 06/18/2023               |                |
| I Save          |  |   |                                    |         |                  |           |                  |                          |                |
| Required Delete | fields marked with Cor<br>Duplicat<br>e Row Residen  | nditionally required fint                   | elds marked with ** Resident First | Name *  | Resident Last    | Name *    | Gender **        | Date of Birth **         | •              |
|                 | + SS1111<br>+ USA15  |   | SUN<br>MEGAN                       |         | SHYNE<br>RAPINOE |           | Female<br>Female | 04/19/1995               | Unkn<br>Not H  |
|                 | Duplicate row. Use the leaves the facility for   | any reason for >1                           | week.                              |         | RAYNE            |           | Female<br>Female | 07/04/1956               | Unkno<br>Not H |
|                 | When they return, du<br>a new admit date, wh<br>the facility. On their p<br>date, which is the last<br>before they left. | ich is the day they<br>prior row, enter a d | return to<br>ischarge              |         |                  |           |                  |                          |                |

Once you have updated all resident information and selected the save row button, there will be a second row for this resident displaying the updated resident information for the new admission. Anytime changes are made, please remember to always click out of the box where the most recent change was made and then click the "View Reporting Summary & Submit" button to review the summary page for accuracy and submit data for all updated weeks.

## Step 3. View Reporting Summary & Submit

Once all data have been entered and updated, select the "View Reporting Summary & Submit" button.

If data are **added or modified** on the Person-Level COVID-19 Vaccination Form, you must select the 'View Reporting Summary & Submit' button to feed these data to the Vaccination Summary module. You submit data for the most recent week by clicking 'View Reporting Summary & Submit', selecting the most recent week, and clicking "Save and Submit" at least once per week.

| <b>)</b> , I | Perso            | n-Level COVID-19 Va                   | accinatio     | on Form - Residen            | nts  |          |                   |   |           |    |                  |               |
|--------------|------------------|---------------------------------------|---------------|------------------------------|------|----------|-------------------|---|-----------|----|------------------|---------------|
| + Add        | d Row            | View Reporting Summary                | / & Submit    | 🔹 Upload CSV                 | ► Ex | port CSV | Export SQL        |   |           |    |                  |               |
| Required     | fields marl      | ced with * Conditionally required fie | lds marked wi | th **                        |      |          |                   |   |           |    |                  | 0             |
| Delete       | Duplicate<br>Row | Resident identifier *                 |               | Resident First Name <b>*</b> |      | Res      | ident Last Name * |   | Gender ** | C  | Date of Birth ** | Ethnicity     |
|              |                  |                                       | x             |                              | x    |          |                   | x | ~         | x  | x                |               |
|              | +                | 1                                     | SH            |                              |      | TEST     |                   |   | Female    | 06 | 5/07/1994        | Hispanic or 🔺 |
|              | +                | 1000                                  | TESTON        | NE                           |      | THREE    |                   |   | Male      | 01 | L/02/1952        | Hispanic or   |
|              | +                | 1NEW                                  | FDDFD         | )F                           |      | DFDFD    |                   |   | Male      | 10 | )/25/1943        | Not Hispan    |
|              | +                | 2                                     | W             |                              |      | W        |                   |   | Female    | 04 | 1/21/1961        | Not Hispan    |

On the Reporting Summary screen:

- 1. Select the week you are interested in submitting data for using the drop-down menu next to the box that says, "Week of data collection first day (Monday)."
- 2. Review the counts that are displayed for this week to ensure accuracy. The totals you see here were autocalculated from the person-level data you entered.
- 3. Click "Save and Submit Data." You will see a pop-up box that says, "Successfully saved." Click OK. Now, you can either select another reporting week to submit or re-submit data for, or you can click "Done."

| View Reporting Summary & Submit  |  |                                 |   |                 |                          |               |
|--|--|---------------------------------|---|-----------------|--------------------------|---------------|
| COVID-19 Vaccination Cumulative Summary for  | Long-Term Care Facility Residents  |                                 |   | Select the week | for                      |               |
| Person-Level Form  |  |                                 |   | submission      |                          |               |
| Facility ID#:  |  | 20568                           |   |                 |                          |               |
| Vaccination type: 1  |  | COVID19                         |   |                 |                          |               |
| Week of data collection first day (Monday):  | 6/5/2023 (Never submitted)   | ~                               | Re-submit all changed   | weeks           | Review                   | Totals        |
| Week of data collection last day (Sunday):   |  | 06/11/2023                      |   | _               | _                        |               |
|  | Cumulative Va  | ccination Coverage              |   | 2               |                          |               |
|  |  |                                 |   | 6               | * All Pat                | tients (Total |
| 1. *Number of residents staying in this facility for   |  |                                 |   |                 |                          | 4             |
| 2. *Cumulative number of residents in Question #   |  | Please review the current defi  | nition of up to date  |                 |                          | 3             |
| 3. Cumulative number of residents in Question #1   |  |                                 |   |                 |                          |               |
| 3.1 *Medical contraindication to COVID-19 vac  | cine   |                                 |   |                 |                          | 0             |
| 3.2 *Offered but declined COVID-19 vaccine   |  |                                 |   |                 |                          | 0             |
| 3.3 *Unknown/Other COVID-19 vaccination sta  | atus   |                                 |   |                 |                          | 1             |
| upload are not eligible for submission using the<br>weekly summary form.<br>2. Only save and submit data via the person-leve | evel form: Weeks already reported to the Weekly CC<br>e optional person-level form. Instead, please update<br>I form for weeks with complete person-level inform<br>ation on all residents for a given reporting week, ple | those weeks by navigating to th | ne Weekly COVID-19 Summ<br>Iculated by the<br>not need to apply |                 | updating t<br>eporting v | the           |
| 4  |  |                                 |   | Save and Submit | Data                     | Done          |

When you click the 'Week of data collection first day" drop-down menu, you will see each reporting week listed since the Person-Level COVID-19 Vaccination Forms became available. You will also note that there is sometimes text next to the date with information about the data for that week. A description of what each label means is below:

<u>Not eligible for submission using the Person-Level Form:</u> Weeks already reported to the Weekly COVID-19 Vaccination Summary Modules using the weekly summary form or weekly summary .CSV upload (i.e., not the person-level form) are not eligible for submission using the Person-Level Vaccination Form. Instead, please update those weeks by navigating to the Weekly COVID-19 Summary Module directly and updating the weekly summary form.

**Never submitted**: Data for that reporting week have never been submitted.

<u>Changed since submitted using the Person-Level Form</u>: The summary counts for one or more questions for that reporting week have changed since that week was lasted submitted using the Person-Level Form. Please use the "resubmit all changed weeks" button (next to the week of data collection drop down menu) to re-submit all weeks at the same time where the counts have changed (see images below).

<u>Change in summary counts since submitting using the Person-Level Vaccination Form</u>: if the summary counts have changed since you previously submitted using the Person-Level Vaccination Form, the weeks will be displayed with this message. Click the "**re-submit all changed weeks**" button below the week of data collection drop-down to re-submit all weeks with updated counts. Note: this does not submit for weeks that have never been previously submitted. For a week that has never been previously submitted, you still have to click that week and click "Save and Submit Data" at the bottom of the screen.

| View Reporting Summary & Submit  |  |         |   |                             |                                 |
|--|--|---------|---|-----------------------------|---------------------------------|
| COVID-19 Vaccination Cumulative Summary for<br>Person-Level Form   | r Long-Term Care Facility Residents  |         |   |                             |                                 |
| Facility ID#:  | 20568  |         |   |                             |                                 |
| Vaccination type:  | COVID19  |         |   |                             |                                 |
| Week of data collection first day (Monday):  | 6/5/2023 (Never submitted)   | ~       | Re-submit all changed weeks   |                             |                                 |
| Week of data collection last day (Sunday):   | 1/23/2023 (Changed since submitted using the person-level form)<br>1/30/2023 (Changed since submitted using the person-level form)   |         |   |                             |                                 |
| 1. *Number of residents staying in this facility for   | 2/6/2023 (Changed since submitted using the person-level form)   | E       |   |                             | * All Patients (Total)          |
| <ol> <li>Cumulative number of residents in Question</li> <li>Cumulative number of residents in Question</li> </ol>   | $\frac{1}{2}$ 2/20/2023 (Changed since submitted using the person-level form)<br>$\frac{1}{2}$ 2/27/2023 (Changed since submitted using the person-level form)   | le      | finition of up to date  |                             | 3                               |
| 3.1 *Medical contraindication to COVID-19 v<br>3.2 *Offered but declined COVID-19 vaccine  | 3/13/2023 (Changed since submitted using the person-level form)  |         |   |                             | 0                               |
| <ol> <li>3.3 *Unknown/Other COVID-19 vaccination</li> <li>Not eligible for submission using the person<br/>upload are not eligible for submission using<br/>weekly summary form.</li> <li>Only save and submit data via the person-le<br/>you do not have complete person-level infor</li> </ol> | 3/27/2023 (Changed since submitted using the person-level form)<br>leve 4/3/2023 (Changed since submitted using the person-level form)<br>the 4/10/2023 (Never submitted)<br>4/17/2023 (Changed since submitted using the person-level form)<br>rel fc 4/24/2023 (Changed since submitted using the person-level form) | o<br>:c | y Modules using the weekly summary form<br>the Weekly COVID-19 Summary Module d<br>upied a bed at the facility for at least 1 day o<br>yrm prior to submission, or submit using the | irectly and<br>luring the i | updating the reporting week. If |
| Vaccination Summary form instead.  | 5/1/2023 (Never submitted)<br>5/15/2023 (Never submitted)<br>5/22/2023 (Never submitted)<br>5/22/2023 (Never submitted)<br>5/29/2023 (Not eligible for submission using the person-level form)<br>6/5/2023 (Never submitted)   | l       |   |                             | •                               |
|  |  |         | Save an   | d Submit                    | Data Done                       |

After the user clicks the 'Re-submit all changed weeks' button, you will see this pop-up screen to confirm that you want to re-submit for the weeks marked as changed since last submitted. Click "Yes, re-submit."

| View Reporting Summary & Submit  |  |   |   |   |                           |                           |
|--|--|---|---|---|---------------------------|---------------------------|
| COVID-19 Vaccination Cumulative Summary f<br>Person-Level Form   | or Long-Term Care  | Facility Residents  |   |   |                           |                           |
| Facility ID#:<br>Vaccination type:   |  | 20568<br>COVID19  |   |   |                           |                           |
| Week of data collection first day (Monday):  | 6/5/2023 (Ne   | ver submittedy  | ~ | Re-submit all changed weeks   |                           |                           |
| Week of data collection last day (Sunday):   |  | Confirm   | × |   | <u> </u>                  |                           |
| <ol> <li>*Number of residents staying in this facility 1</li> <li>*Cumulative number of residents in Questio</li> <li>Cumulative number of residents in Questio</li> <li>Cumulative number of residents in COVID-19 vi<br/>3.1 *Medical contraindication to COVID-19 vi<br/>3.2 *Offered but declined COVID-19 vaccine</li> <li>3.3 *Unknown/Other COVID-19 vaccination</li> <li>Not eligible for submission using the person<br/>upload are not eligible for submission using<br/>weekly summary form.</li> <li>Only save and submit data via the person-le<br/>week. If you do not have complete person-<br/>19 Vaccination Summary form instead.</li> </ol> | n #1 who are up to<br>n #1 with other cone<br>vaccine<br>status<br>n-level form: Weeks<br>the optional person<br>evel form for weeks v | Please confirm the resubmission of all data for the following surveillance week(s):<br>3/28/2022, 4/4/2022, 4/11/2022, 6/6/2022, 6/13/2022, 6/20/2022, 6/27/2022, 7/11/2022, 7/15/2022, 8/22/2022, 8/22/2022, 8/22/2022, 9/15/2022, 10/22/2022, 9/12/2022, 10/22/2022 | • | finition of up to date<br>finition of up to date<br>Modules using the weekly summary form<br>the Weekly COVID-19 Summary Module d<br>upied a bed at the facility for at least 1 day<br>-level form prior to submission, or submit u | lirectly and during the r | updating the<br>reporting |
| •  |  |   |   |   |                           | •                         |
|  |  |   |   | Save and Sub  | mit Data                  | Done                      |

<u>If there is no corresponding text next to a week</u>: As depicted in the image below, only seeing a date indicates that you already submitted data that week via the Person-Level Vaccination Form, and there have been no updates to the data for that week since submission. No action is needed.

| View Reporting Summary & Submit  |   |                  |
|--|---|------------------|
| COVID-19 Vaccination Cumulative Summary f  | or Long-Term Care Facility Residents  |                  |
| Person-Level Form  |   |                  |
| Facility ID#:  | 20568   |                  |
| Vaccination type:  | COVID19   |                  |
| Week of data collection first day (Monday):  | 6/5/2023 Re-submit all changed weeks  |                  |
| Week of data collection last day (Sunday):   | 06/11/2023  |                  |
|  | Cumulative Vaccination Coverage   |                  |
|  |   | * All Patien     |
| 1. *Number of residents staying in this facility f   | or at least 1 day during the week of data collection  | 4                |
| 2. *Cumulative number of residents in Question   | n #1 who are up to date with COVID-19 vaccines. Please review the current definition of up to date  | 3                |
| 3. Cumulative number of residents in Question  | #1 with other conditions:   |                  |
| 3.1 *Medical contraindication to COVID-19 v  | vaccine   | 0                |
| 3.2 *Offered but declined COVID-19 vaccine   |   | 0                |
| 3.3 *Unknown/Other COVID-19 vaccination  | status  | 1                |
| upload are not eligible for submission using<br>weekly summary form.<br>2. Only save and submit data via the person-le | n-level form: Weeks already reported to the Weekly COVID-19 Vaccination Summary Modules using the weekly summary form or week<br>the optional person-level form. Instead, please update those weeks by navigating to the Weekly COVID-19 Summary Module directly a<br>evel form for weeks with complete person-level information for all residents who occupied a bed at the facility for at least 1 day during t<br>evel information on all residents for a given reporting week, please update the person-level form prior to submission, or submit using the<br>sevel information on all residents for a given reporting week, please update the person-level form prior to submission, or submit using the<br>sevel information on all residents for a given reporting week, please update the person-level form prior to submission, or submit using the | and updating the |

It is important to understand that the data submitted from the Reporting Summary screen feed the Weekly COVID-19 Vaccination Summary Modules form (i.e., the traditional, aggregate, facility-level form). You can see this in the image below.

#### **Reporting Summary**

#### Weekly Aggregate Form

Save and Submit Data

Done

| View Reporting Summary & Submit.  | COVID-19 Vaccine: HCP COVID-19 Vaccine: Residents   |   |
|---|---|---|
| Varie March & Sondell         Proprinting Summary Rossenary For Long Term Care Hallity Histobers         Proprinting Summary Rossenary For Long Term Care Hallity Histobers         Proprinting Summary Rossenary For Long Term Care Hallity Histobers         Machington Togic         Weise of data-contention hist day Monetaly         Weise of data-contention hist day Monetaly         Unstanding Turbon Togic         Unstanding Turbon Term Hast Rossenary Torus Term Hallity Host and Hall Care ragic         Unstanding Turbon Term Hast Rossenary Host Ross Term Hast Rossenary         Unstanding Turbon Term Hast Rossenary Host Ross Term Hast Rossenary         Unstanding Turbon Term Hast Rossenary Host Rossenary Host Rossenary         Standhaler Turbon Term Hast Rossenary Host Rossenary         Unstanding Turbon Term Hast Rossenary Host R | Additional Control of | Pacifing ENCLOSE<br>COMPLEX COMPLEX COMPLEX<br>Value 104 January 104<br>2010<br>1010<br>1010<br>1010<br>1010<br>1010<br>1010<br>1 |

After submitting these data on the reporting summary screen, if you want to confirm that the data were successfully submitted to the Weekly COVID-19 Vaccination Summary Module, please navigate to Vaccination Summary on the left-

hand navigation bar and observe that the week of interest appears green, indicating that the data are complete for that week. You can also click on that week and confirm that the numbers match those that you submitted for the Reporting Summary.

| NHSN Home           | Vaccination Summary Data   |
|---------------------|--|
| Alerts              |  |
| Dashboard           | Click a cell to begin entering data for the week which counts are reported.  |
| Reporting Plan      | Reporting of medical events or health problems that occur after vaccination (possible side effects) is encouraged, even if you are not sure they are the result of vaccination, at |
| Resident •          | https://vaers.hhs.gov/reportevent.html.  |
| Event •             |  |
| Summary Data        | Image: Second Complete   Record Complete   |
| COVID-19            |  |
| Vaccination Summary | Weekly Vaccination Calendar<br>05/29/2023 (Monday) - 06/04/2023 (Sunday)   |
| Import/Export       | COVID-19: HCP  |

As a reminder, when reviewing Vaccination Summary data, a user can always review the Create and Modify dates as described here: <u>https://www.cdc.gov/nhsn/pdfs/ltc/covidvax/how-to-enter-data-ltcf-508.pdf</u>. The "Date Created" is auto-populated when data are initially entered and saved in the Weekly COVID-19 Vaccination Module. The "Date Last Modified" is auto-populated based on the most recent date that changes were made to previously submitted COVID-19 Vaccination Module data.

## CSV File Upload (Optional)

Users **do not need to use CSV file** templates or upload CSV files to use the Person-Level COVID-19 Vaccination Forms. This section is intended to assist facilities that choose to use the upload CSV file option.

Please make sure you are using the most recent CSV file template when uploading your COVID-19 vaccination data. If you realize that you are attempting to upload an old CSV file template, use one of following options below to ensure that you are using the most recent CSV file template for residents and healthcare personnel.

## To make sure that you are using the most recent CSV file template:

Navigate to the NHSN LTC Vaccination webpage

Scroll down to the 'Person-Level COVID-19 Vaccination Data - CSV Data Import' section

Select the most recent CSV template for residents and HCP of Long-term care facilities

| VARIABLE DESCRIPTION AND FILE LAYOUT FOR RESIDENTS AND HEALTHCARE PERSONNEL OF LONG-TERM CARE FACILITIES (LTCFS)                 |
|--|
| Variable description and file layout for residents and healthcare personnel of LTCFs ( <u>11.4.1)</u> [PDF – 208 KB] – June 2023 |
| Variable description and file layout for person-level vaccination forms 🚦 [PDF – 213 KB] – October 2022                          |
| CSV TEMPLATES AND EXAMPLES FILES FOR RESIDENTS OF LONG-TERM CARE FACILITIES (LTCFS)  |
| . <u>CSV File Template for LTCF Residents</u> 🕼 [XLS – 521 B] – June 2023  |
| .CSV File Template for LTCF Residents 🏼 🗱 [XLS – 17 KB] – October 2022   |
| Example .CSV File for LTCF Residents 🗱 [XLS – 677 B] – June 2023   |
| Example .CSV File for LTCF Residents 🗱 [XLS – 18 KB] – October 2022  |
| CSV TEMPLATES AND EXAMPLES FILES FOR HEALTHCARE PERSONNEL OF LONG-TERM CARE FACILITIES (LTCFS)                                   |
| <u>.CSV File Template for LTCF HCP</u> 🕼 [XLS – 534 B] – June 2023   |
| .CSV File Template for LTCF HCP 🔹 [XLS - 17 KB] - October 2022   |
| Example .CSV File for LTCF HCP 📑 [XLS – 658 B] – June 2023   |
| Example .CSV File for LTCF HCP 🗱 [XLS – 18 KB] – October 2022  |

Person-Level COVID-19 Vaccination Data - CSV Data Import

### OR

Export the data (or just the column headers if no data are entered) to a CSV file and use it as a template by using the **Export CSV...** button on the Person-Level Form. Note: Remember to use the Variable description and file layout for Person-Level COVID-19 Vaccination Forms PDF as a guide. Use this document to assist with defining each variable in the CSV template and entering data that are formatted correctly.

| Export | CSV | Option |  |
|--------|-----|--------|--|
|--------|-----|--------|--|

| Add Row       View Reporting Summary & Submit       ✓ Upload CSV       ▲ Export CSV       ▲ Export SQL         Required fields marked with       Conditionally required fields marked with       ***       Internet Explorer       ×       Resident Last Name *         Delete       Duplicate<br>Row       Resident identifier *       Date of Birth **       Resident<br>Date of Dirth **       Internet Explorer       ×       Resident Last Name *         ·       +       001       02/13/1969       05/01/20       What do you want to do with covid19.csv?       M         ·       +       002       06/01/1942       01/21/20       Size: 1.44 KB       Test         ·       +       003       01/10/1958       01/06/20       From:       M         ·       +       005       11/26/1955       01/05/20       M       ·       Open         ·       +       006       03/25/1956       05/10/20       ×       Save       ·   | Event-Level COVID-19 Vaccination Form - Residents |                      |        |  |          |                          |                           |               |          |
|--|---|----------------------|--------|--|----------|--------------------------|---------------------------|---------------|----------|
| Delete         Duplicate<br>Row         Resident identifier *         Date of Birth **         Resident<br>Date         Internet Explorer         X         Resident Last Name *           Image: State of Birth **         02/13/1969         05/01/20         05/01/20         What do you want to do with covid19.csv?         M           Image: State of Birth **         02/13/1969         05/01/20         01/21/20         Size: 1.44 KB         Test           Image: State of Birth **         01/10/1958         01/06/20         From:         M           Image: State of Birth **         01/10/1958         01/06/20         From:         M           Image: State of Birth **         01/20/20         03/23/20         Image: State of Birth **         Type: Microsoft Excel From:           Image: State of Birth **         005         11/26/1955         01/05/20         Image: State of Birth **         M           Image: State of Birth **         03/25/1956         05/10/20         Image: State of Birth **         M   |   |                      | 1      | SV A Export CSV Export SQL             | - Upl    | ımary & Submit           | View Reporting Sun        | Row           | + Ada    |
| Delete         Row         Resident identifier*         Date of Birth **         Date  | 0   |                      |        |  | **       | red fields marked with   | vith 🍍 Conditionally requ | elds marked w | Required |
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| □         +         005         11/26/1955         01/05/20         → Open<br>The file won't be saved automatically.         M           □         +         006         03/25/1956         05/10/20         → Open         M         J  | 01/3  |                      | д      |  | 01/06/20 | 01/10/1958               | )3                        | + 00          |          |
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| → Save   | 02/1  |                      | J      |  | 05/10/20 | 03/25/1956               | 06                        | + 00          |          |
| → Save as<br>Cancel  |   |                      | Cancel |  |          |                          |                           |               |          |

Step 1. Once data have been entered into the Person-Level COVID-19 Vaccination Form, if you wish to export these data to a CSV file (or if you want to generate a CSV template), you can click 'Export CSV'.

Step 2. You will then see a screen that opens asking what you want to do with the covid19.csv file. Select 'Open' to view the CSV file or select 'Save as' to save the CSV file on your computer. If you don't see this pop-up, check your downloads folder on your computer.

## CSV File Upload

After you have transferred your data to the CSV file template, please follow the steps below to upload the CSV file to the Person-Level Form in NHSN.

- A. Click "Upload CSV ... "
- B. Click "Choose File" to locate the saved file and select the .CSV file that you added your data.
- C. Once the selected file is visible in the Browse box, you will then click the 'Upload CSV' button at the bottom of the page

| ()<br>() | Persor           | n-Level COVID-19 Vac                     | cination Fo   | rm - Residents                       |    |   |                          |               |
|----------|------------------|--|---------------|--------------------------------------|----|---|--------------------------|---------------|
| + Add    | l Row            | View Reporting Summary &                 | a Submit      | Upload CSV 🔷 Export CSV 🔷 Export SQL |    |   |                          |               |
| Required | fields mark      | xed with * Conditionally required fields | marked with 🔺 | Upload CSV file                      |    |   |                          | 0             |
| Delete   | Duplicate<br>Row | Resident identifier *                    | Resi          |                                      | ** |   | Date of Birth <b>*</b> * | Ethnicity     |
|          |                  | x  |               | Please select a CSV file containing: | ~  | x | x                        |               |
|          | +                | 1  | SH            |                                      |    |   | 06/07/1994               | Hispanic or 📤 |
|          | +                | 1000                                     | TESTONE       | Choose File No file chosen           |    |   | 01/02/1952               | Hispanic or   |
|          | +                | 1NEW                                     | FDDFDF        |                                      |    |   | 10/25/1943               | Not Hispan    |
|          | +                | 2  | W             |                                      |    |   | 04/21/1961               | Not Hispan    |
|          | +                | 4  | ARYA          |                                      |    |   | 07/01/1988               | Hispanic or   |
|          | +                | 42                                       | ARYA          |                                      |    |   | 07/01/1988               | Hispanic or   |
|          | +                | 7  | PHIL          |                                      |    |   | 03/01/2006               | Not Hispan    |
|          | +                | AAAAA                                    | SUE           |                                      |    |   | 10/05/1949               | Not Hispan    |
|          | +                | BB12345                                  | BETTY         | C                                    |    |   | 12/23/1967               | Unknown       |
|          | +                | DD23456                                  | DONN          | Upload CSV Cancel                    |    |   | 06/17/1975               | Hispanic or   |
|          | +                | DGDFD                                    | DFGD          |                                      |    |   | 08/01/2022               | Hispanic or   |

Note: If any errors are found during upload, those will be described in the pop-up window. The file will not upload with errors. Please correct any rows with errors and re-upload.

| Person-Level COVID-19 Vaccination Form - Residents |                  |   |                          |                       |            |                          |                  |  |
|--|------------------|---|--------------------------|-----------------------|------------|--------------------------|------------------|--|
| + Add  | d Row            | View Reporting Summary &                | Submit 🔷 Upload CSV 🔷 Ex | port CSV 🔹 Export SQL |            |                          |                  |  |
| Required   | fields mark      | ed with 🗯 Conditionally required fields | marked with **           |                       |            |                          | 0                |  |
| Delete   | Duplicate<br>Row | Resident identifier *                   | Resident First Name *    | Resident Last Name *  | Gender **  | Date of Birth <b>*</b> * | Ethnicity '      |  |
|  |                  | x                                       | x                        | x                     | <b>~</b> x | x                        |                  |  |
|  | +                | 1                                       | SH                       | TEST                  | Female     | 06/07/1994               | Hispanic or 🔺    |  |
| 0  |                  |   |                          | TUD 55                |            | 04/00/4050               | L Para and a sec |  |
| $\cup$   | +                | 1000                                    | TESTONE                  | THREE                 | Male       | 01/02/1952               | Hispanic or      |  |
|  | + +              | 1000<br>1NEW                            | FDDFDF                   | DFDFD                 |            | 10/25/1952               | Not Hispan       |  |

**Note:** A message will appear describing the number of records that were successfully uploaded. In this example, there were 10 records that were successfully uploaded.

| VID-19          | nhsn2.cdc.gov says  |    |
|-----------------|---|----|
| VID-17          | Successfully uploaded CSV.                                |    |
|                 | Added 10 records.   |    |
| porting Sur     | ок  |    |
| litionally requ |   |    |
| Date            | Upload CSV file   |    |
| x               | Please select a CSV file containing:                      | x  |
| Please w        | ait   |    |
|                 |   | ŧ  |
|                 | Processing 'Event-level-covid19-vacc-ltc-resCSV2.csv (1%) |    |
| -               |   |    |
|                 |   | )  |
|                 |   |    |
| 06/15           |   | dc |
| 04/12           | Upload CSV Cancel   | df |

D. Submit the person-level data to the Weekly Summary Module using the "View Reporting Summary & Submit" button once the data have been uploaded. Please see the sections in this document above regarding saving and submitting data.

E. After submitting these data, navigate to Vaccination Summary on the left-hand navigation bar and observe that the "Record Complete" icon in the report key for the Vaccination Summary Data page will turn green indicating that the data have been successfully saved for the reporting week(s).

| NHSN Home           | Vaccination Summary Data   |
|---------------------|--|
| Alerts              | Vaccination Summary Data   |
| Dashboard •         | Click a cell to begin entering data for the week which counts are reported.  |
| Reporting Plan      | Reporting of medical events or health problems that occur after vaccination (possible side effects) is encouraged, even if you are not sure they are the result of vaccination, at |
| Resident •          | https://vaers.hhs.gov/reportevent.html.  |
| Event •             |  |
| Summary Data        | Image: Second Complete     29 May 2023 - 09 July 2023   Record Complete Record Incomplete  |
| COVID-19            |  |
| Vaccination Summary | Weekly Vaccination Calendar 05/29/2023 (Monday) - 06/04/2023 (Sunday)  |
| Import/Export       | COVID-19: HCP     COVID-19: Residents  |

## Group Upload

Group and supergroup users can import Person-Level resident and healthcare personnel (HCP) COVID-19 vaccination data on behalf of their member facilities who report in the LTCF COVID-19 Vaccination Module using the .CSV group upload option. Please refer to the Person-Level Group Upload CSV Instructions – LTC\_document for guidance and instructions on how groups and supergroups users can import person-level .CSV files and view person-level data in the NHSN LTCF COVID-19 Vaccination Module.

Additional Resources:

- <u>Weekly HCP and Resident COVID-19 Vaccination website</u> (all of the resources below can be found here):
  - Person-Level Trainings (Recordings and Slide sets)
  - o <u>Person-Level Vaccination Form Table of Instructions: Instructions and Guidance Documents</u>
  - o <u>Person-Level COVID-19 Vaccination Data CSV Data Import Materials</u>
  - FAQs on Reporting COVID-19 Vaccination Data
  - FAQs on Person-Level Vaccination Reporting: General
  - o FAQs on Person-Level Vaccination Reporting: Data Entry
  - o Up to date COVID-19 Vaccination Guidance