

# **CDC/CDPH Pilot Project**

## **Healthcare Personnel Influenza Vaccination Reporting**

### **Additional Information**

#### ***Background***

Influenza vaccination of healthcare personnel (HCP) is associated with lower rates of patient illness and death from influenza, and fewer sick days among HCP. The National Quality Forum (NQF), a nonprofit organization dedicated to healthcare quality improvement, has recently issued a time-limited endorsement to a CDC-sponsored standardized measure for reporting influenza vaccination among HCP. This measure is designed to ensure healthcare-reported influenza vaccination is comprehensive within a single facility and comparable across facilities. This measure may be used by the Centers for Medicare and Medicaid Services (CMS) or other organizations if it receives full NQF endorsement.

#### ***Objectives***

- Determine the feasibility of implementing the NQF measure for HCP influenza vaccination coverage in various healthcare settings
- Identify barriers and facilitators to implementing the NQF measure

#### ***Eligible Healthcare Institutions***

This project invites all types of healthcare institutions.

- Acute care hospitals
- Dialysis centers
- Long term care facilities
- Ambulatory surgery centers
- Physician practices

Currently *all general acute care hospitals* in California are required to report HCP influenza vaccination data to the California Department of Public Health (CDPH). Participation in this project would not replace that requirement for an acute care hospital, but would provide additional information.

## Data Collection

Data will be collected on a web-based survey on the secure CDC web site. An example of the form to be used is available at:

Participating institutions will be asked to complete the survey with the following schedule.

Survey	Reporting time	Reporting data
Enrollment survey	October- November, 2010 (at enrollment)	<ul style="list-style-type: none"><li>• Facility characteristics (6 items)</li><li>• The total number of HCP* as of October 1, 2010 (Denominator)</li></ul>
Interim report	January, 2011 (no later than January 31)	<ul style="list-style-type: none"><li>• The total number of HCP<sup>a</sup> who worked between October 1 and December 31, 2010 (Denominator)</li><li>• Vaccination coverage<sup>b</sup> from the day vaccination started at facility to December 31, 2010 (Numerator)</li><li>• Barriers to reporting</li></ul>
Final report	April, 2011 (no later than April 30)	<ul style="list-style-type: none"><li>• The total number of HCP<sup>a</sup> who worked between October 1, 2010 and March 31, 2011 (Denominator)</li><li>• Vaccination coverage<sup>b</sup> from the day vaccination started at facility to March 31, 2011 (Numerator)</li><li>• Barriers to reporting</li><li>• Vaccination program characteristics<sup>c</sup></li><li>• Data sources<sup>d</sup></li></ul>

### a. Healthcare personnel (HCP)

HCP includes all persons working full-time or part-time at a healthcare institution, whether or not they have direct patient contact. All persons who worked at the healthcare institution for any length of time between the time period should be counted in the number of HCP in the interim and final reports. HCP is grouped into three mutually exclusive categories.

- **Employees:** All persons who receive a paycheck from the healthcare institution
- **Credentialed non-employees:** Licensed practitioners affiliated with the healthcare institution who do not receive a paycheck from the institution. These may include physicians or other midlevel providers with clinical or admitting privileges at the healthcare institution or technicians or therapists with professional credentialing.
- **Other non-employees:** Non-credentialed persons affiliated with the healthcare institution who do not receive a paycheck from the institution. These may include contractors, students or trainees, resident physicians or fellows (if not paid by the

institution), and volunteers. (Facilities with contractually-provided on-site laboratory services should report these contractual staff (both credentialed and non-credentialed) as non-credentialed non-employees.)

*b. Vaccination coverage (numerator)*

The numerator consists of four mutually exclusive categories which should be reported separately for each of the three groups of HCP (employees, credentialed non-employees, and other non-employees). Numerator data should be counted as of the day the healthcare institution began administering influenza vaccine for the 2010-2011 influenza vaccination season.

- Total number of HCP that **received an influenza vaccination offered by the healthcare institution** as of the reporting date
- Total number of HCP that **received an influenza vaccination elsewhere** as of the reporting date
- Total number of HCP **determined to have a medical contraindication** to influenza vaccination as of the reporting date
- Total number of HCP that were **offered an influenza vaccination but declined** for a non-medical reason as of the reporting date. This **should not** include HCP who received vaccination elsewhere.

*c. Vaccination program characteristics*

Institutions will be asked to describe how and when influenza vaccines were offered or made available to HCP working at the healthcare institution. This will include details on influenza vaccination educational campaigns, types of influenza vaccine available, whether vaccine was provided at no cost to some or all HCP, date the vaccine was first available to HCP, vaccine declination process, and the date the institution stopped offering influenza vaccine to HCP.

*d. Data sources*

Institutions will be asked to describe sources used to obtain the data reported for each numerator and denominator category above, as well as the department or office that compiled the data. These sources may include but are not limited to human resources databases or payroll lists, employee health or medical records, employment files or contracts for services, occupational health records, consent forms, influenza vaccine declination forms, or records from external healthcare providers or agencies.

### ***Data Validation***

A sample of participating healthcare institutions will be invited to participate in a validation study to assess the accuracy and reproducibility of the data elements reported. Additional information about the validation process will be provided by CDC.