

**SNF COVID-19 Weekly Testing Reporting
Data Dictionary**

QUESTION/LABEL	DESCRIPTION
Reporting Week	The 7-day period from 12:00am midnight Monday through 11:59pm Sunday, for which data is being reported.
Reporting Period	The three-day window of time (Monday 12:00am through Wednesday 11:59pm) following the Reporting Week, during which testing data can be entered.
Facility Name	The Skilled Nursing Facility name based on Facility_UAT NAIC_Desc field.
Facility ID	The ID number assigned to the facility by CDPH Center of Healthcare Quality, Licensing and Certification Program.
License No	A nine-digit license identifier used in the Electronic Licensing Management System (ELMS), CDPH Center of Health Care Quality, Licensing and Certification Program. An active license verifies that the health care hospital/provider is approved to operate within state statute/regulations and can legally do business in California. One or more hospitals can operate under one license.
Licensed Beds	The number of beds for which the facility is licensed.
Latitude	The latitude of the facility.
Longitude	The longitude of the facility.
Location	The map showing the longitudinal and latitudinal location of the facility.
Facility Address	The street address of the facility.
Facility City	The city of the facility.
Facility County	The county where the facility is located.
Facility District Name	The CDPH Center for Health Care Quality District Office that regulates the facility.
Facility Telephone	The telephone number of the facility.
Name of Skilled Nursing Facility POC	The name of the facility's point of contact who is entering the data into the weekly survey.
Title of Skilled Nursing Facility POC	The position title of the facility's point of contact who is entering the data into the weekly survey.

QUESTION/LABEL	DESCRIPTION
Email of Skilled Nursing Facility POC	The email address of the facility's point of contact who is entering the data into the weekly survey.
Recommendations for Testing	<p>Pursuant to AFL 20-53.6:</p> <p>Diagnostic Testing for Symptomatic Individuals</p> <p>Residents or HCP with signs or symptoms consistent with COVID-19 should be tested immediately to identify current infection; SNFs should not delay testing of symptomatic individuals until scheduled screening or response-driven testing.</p> <p>Screening Testing of SNF HCP</p> <p>In facilities without any positive COVID-19 cases, implement a minimum weekly screening testing of ALL Unvaccinated HCPs, if the vaccination percentage is greater than 90% for both residents and HCP. Additional testing considerations may include regular screening testing of residents who frequently leave the facility for dialysis or other services.</p> <p>Response-driven Testing</p> <p>As soon as possible after one (or more) COVID-19 positive individuals (resident or HCP) is identified in a facility, serial retesting of ALL residents and HCP who test negative upon the prior round of testing should be performed every seven days until no new cases are identified among residents in two sequential rounds of testing; the facility may then resume their regular screening testing schedule for HCP.</p>

QUESTION/LABEL	DESCRIPTION
<p>Gateway Question</p> <p>Has anyone at the facility (resident or health carepersonnel) tested positive for COVID-19 from (Date 1) to (Date 2)?</p>	<p>(Date 1) to (Date 2) represents a two-week period comprised of the current reporting week and the previous reporting week.</p> <p>HCPs include all personnel at the facility (including but not limited to health workers, food staff, cleaning staff, administration, security, consultants, contractors, volunteers, nursing students on clinical rotation, any individual whoperforms a function at the facility, regardless of whether or not they are paid orunpaid by the facility).</p>
<p>If yes, was/were positive result(s) detected through:</p> <ul style="list-style-type: none"> • a lab • point of care device (antigen test) • both 	<p>Please select one of the buttons to represent data for the entire reporting period.You will only be permitted to enter this data ONE TIME. Please ensure it is correct.</p>
<p>COVID-19 testing for Health Care Personnel (HCPs)</p>	<p>TITLE</p>
<p>Recommendations for Testing</p>	<p>If testing capacity is not sufficient to serially retest all HCP, prioritize testing HCPwho worked on the unit with COVID-19 positive residents or are known to work atother healthcare facilities with cases of COVID-19.</p>
<p>EmpHCP) Number of employed HCP that were eligible to have worked at this healthcare facility for at least 1 day during the week of data collection*</p>	<p>Employee HCP (Staff on facility payroll) Required. Defined as all persons receiving a direct paycheck from the healthcare facility (i.e., on the facility's payroll), regardless of clinical responsibility or patient contact.</p>
<p>LIPHCP) Number of licensed independent practitioner HCP that were eligible to have worked at this healthcare facility for at least 1 dayduring the week of data collection*</p>	<p>Non-Employee HCP (Licensed independent practitioners: Physicians, advanced practice nurses, & physician assistants) Required. Defined as physicians (MD, DO); advanced practice nurses; and physician assistants only who are affiliated with the healthcare facility, but are not directly employed by it (i.e., they do not receive a paycheck from the facility), regardless of clinical responsibility or patient contact. Post-residency fellows are also included in this category.</p>

QUESTION/LABEL	DESCRIPTION
VolHCP) Number of adult student/trainee and volunteer HCP that were eligible to have worked at this healthcare facility for at least 1 day during the week of data collection*	Non-Employee HCP (Adult students/trainees & volunteers) Required. Defined as medical, nursing, or other health professional students, interns, medical residents, or volunteers aged 18 or older that are affiliated with the healthcare facility, but are not directly employed by it (i.e., they do not receive a paycheck from the facility), regardless of clinical responsibility or patient contact.
OCPHCP) Number of other contract personnel that were eligible to have worked at this healthcare facility for at least 1 day during the week of data collection*	Non-Employee HCP (Other Contract Personnel) Required. Defined as persons providing care, treatment, or services at the facility through a contract who do not meet the definition of any other required denominator category.
Total Number of Personnel	The Sum of Number of Employed HCP, licensed independent practitioner HCP, adult student/trainee and volunteer HCP, and other contract personnel.
<p>How many times were HCPs tested during this reporting week?*</p> <ul style="list-style-type: none"> • Once during reporting week • Twice during reporting week -> Answer Round 1 and Round 2 questions • No Testing due to 100% Vaccination Rate 	<p>Please select the button that reflects the facility's testing frequency during the reporting week.</p> <p>According to QSO-20-38-NH from the Centers for Medicare and Medicaid Services, facilities in a county with >10% positivity rate should be testing twice weekly.</p> <p>If the facility selects "Once during reporting week", only one round of testing questions will appear for HCP and Residents.</p> <p>If the facility selects "Twice during reporting week", two rounds of HCP and Resident testing questions will appear, and the facility must complete both rounds.</p> <p>If the facility is testing only once weekly but had to re-test one or a few HCP or Residents to confirm the result, then the second test result should be the result reported in the survey, as it was done to confirm the basis for the facility's determination of their infection prevention measures.</p> <p>If the facility selects "No Testing due to 100% Vaccination Rate", the round of testing questions will not be visible for HCPs and Residents.</p>

QUESTION/LABEL	DESCRIPTION
HCP Vaccination Volumes	TITLE
Employed HCP Volumes	EmpHCP must equal $A1 + A2 + A3 + A4 + A5$
A1) Only 1 dose of two-dose Primary COVID-19 vaccine series	Staff received only one dose of two-dose Primary COVID-19 vaccine series at least 14 days prior to the specimen collection date for the newly positive viral test result or the second dose was received less than 14 days prior to the specimen collection date for the newly positive viral test result and, therefore, not included in this count.
A2) Any completed Primary COVID-19 vaccine series	Staff received both doses (doses 1 and 2) of any Primary COVID-19 vaccine with the second dose being at least 14 days prior to the specimen collection date for the newly positive viral test result.
A3) Medical contraindication or exclusions to COVID-19 vaccine	Enter the number of staff determined to have a medical contraindication to one or more COVID-19 vaccine(s).
A4) Offered but declined COVID-19 vaccine	Enter the total number of staff that were offered COVID-19 vaccination but declined.
A5) Unknown COVID-19 vaccination status	(self-explanatory)
The sum of all vaccine answers should equal to total number of HCP in the facility during the reporting week	If this red flag appears, please check the values entered for each category in vaccine Employed HCP volumes, and ensure that when combined, the combined value is equivalent to the total number of Employed HCPs.
EmpHCP Additional Dose	TITLE
Number of HCP with complete primary series vaccine who have received any booster(s) or additional dose(s) of COVID-19 vaccine since August 2021	Staff received a complete primary series vaccine who have received any booster(s) or additional dose(s) of COVID-19 vaccine
HCP who have received booster cannot be more than the number of fully vaccinated HCP.	If this red flag appears, please check that this number is not greater than the sum of the fully vaccinated HCPs in A2.
Cumulative number of those with completed primary vaccine series, who are up to date with COVID-19 vaccine	Cumulative number of those with completed primary vaccine series, who are up to date with COVID-19 vaccine
Licensed independent practitioners: Physicians, advanced practice nurses, & Physician assistants HCP Volumes	LIPHCP must equal $B1 + B2 + B3 + B4 + B5$

QUESTION/LABEL	DESCRIPTION
B1) Only 1 dose of two-dose Primary COVID-19 vaccine series	Staff received only one dose of two-dose Primary COVID-19 vaccine series at least 14 days prior to the specimen collection date for the newly positive viral test result or the second dose was received less than 14 days prior to the specimen collection date for the newly positive viral test result and, therefore, not included in this count.
B2) Any completed Primary COVID-19 vaccine series	Staff received both doses (doses 1 and 2) of any Primary COVID-19 vaccine with the second dose being at least 14 days prior to the specimen collection date for the newly positive viral test result.
B3) Medical contraindication or exclusions to COVID-19 vaccine	Enter the number of staff determined to have a medical contraindication to one or more COVID-19 vaccine(s).
B4) Offered but declined COVID-19 vaccine	Enter the total number of staff that were offered COVID-19 vaccination but declined.
B5) Unknown COVID-19 vaccination status	(self-explanatory)
The sum of all vaccine answers should equal to total number of HCP in the facility during the reporting week	If this red flag appears, please check the values entered for each category in vaccine Licensed independent practitioners HCP volumes, and ensure that when combined, the combined value is equivalent to the total number of Licensed independent practitioners HCPs.
LIP Additional Dose	TITLE
Number of HCP with complete primary series vaccine who have received any booster(s) or additional dose(s) of COVID-19 vaccine since August 2021	Staff received a complete primary series vaccine who have received any booster(s) or additional dose(s) of COVID-19 vaccine
HCP who have received booster cannot be more than the number of fully vaccinated HCP.	If this red flag appears, please check that this number is not greater than the sum of the fully vaccinated HCPs in B2.
Cumulative number of those with completed primary vaccine series, who are up to date with COVID-19 vaccine	Cumulative number of those with completed primary vaccine series, who are up to date with COVID-19 vaccine
Adult students/trainees & volunteers HCP Volumes	VolHCP must equal C1 + C2 + C3 + C4 + C5
C1) Only 1 dose of two-dose Primary COVID-19 vaccine series	Staff received only one dose of two-dose Primary COVID-19 vaccine series at least 14 days prior to the specimen collection date for the newly positive viral test result or the second dose was received less than 14 days prior to the specimen collection date for the newly positive viral test result and, therefore, not included in this count.

QUESTION/LABEL	DESCRIPTION
C2) Any completed Primary COVID-19 vaccine series	Staff received both doses (doses 1 and 2) of any Primary COVID-19 vaccine with the second dose being at least 14 days prior to the specimen collection date for the newly positive viral test result.
C3) Medical contraindication or exclusions to COVID-19 vaccine	Enter the number of staff determined to have a medical contraindication to one or more COVID-19 vaccine(s).
C4) Offered but declined COVID-19 vaccine	Enter the total number of staff that were offered COVID-19 vaccination but declined.
C5) Unknown COVID19 vaccination status	(self-explanatory)
The sum of all vaccine answers should equal to total number of HCP in the facility during the reporting week	If this red flag appears, please check the values entered for each category in vaccine Adult students/trainees & volunteers HCP Volumes, and ensure that when combined, the combined value is equivalent to the total number of Adult students/trainees & volunteers HCPs.
Vol Additional Dose	TITLE
Number of HCP with complete primary series vaccine who have received any booster(s) or additional dose(s) of COVID-19 vaccine since August 2021	Staff received a complete primary series vaccine who have received any booster(s) or additional dose(s) of COVID-19 vaccine
HCP who have received booster cannot be more than the number of fully vaccinated HCP.	If this red flag appears, please check that this number is not greater than the sum of the fully vaccinate HCPs in C2.
Cumulative number of those with completed primary vaccine series, who are up to date with COVID-19 vaccine	Cumulative number of those with completed primary vaccine series, who are up to date with COVID-19 vaccine
Other Contract Personnel HCP Volumes	OCPHCP must equal $D1 + D2 + D3 + D4 + D5$
D1) Only 1 dose of two-dose Primary COVID-19 vaccine series	Staff received only one dose of two-dose Primary COVID-19 vaccine series at least 14 days prior to the specimen collection date for the newly positive viral test result or the second dose was received less than 14 days prior to the to the specimen collection date for the newly positive viral test result and, therefore, not included in this count.
D2) Any completed Primary COVID-19 vaccine series	Staff received both doses (doses 1 and 2) of any Primary COVID-19 vaccine with the second dose being at least 14 days prior to the specimen collection date for the newly positive viral test result.
D3) Medical contraindication or exclusions to COVID-19 vaccine	Enter the number of staff determined to have a medical contraindication to one or more COVID-19 vaccine(s).

QUESTION/LABEL	DESCRIPTION
D4) Offered but declined COVID-19 vaccine	Enter the total number of staff that were offered COVID-19 vaccination but declined.
D5) Unknown COVID19 vaccination status	(self-explanatory)
The sum of all vaccine answers should equal to total number of HCP in the facility during the reporting week	If this red flag appears, please check the values entered for each category in vaccine Other Contract Personnel HCP Volumes, and ensure that when combined, the combined value is equivalent to the total number of Other Contract Personnel HCPs.
OCP Additional Dose	TITLE
Number of HCP with complete primary series vaccine who have received any booster(s) or additional dose(s) of COVID-19 vaccine since August 2021	Staff received a complete primary series vaccine who have received any booster(s) or additional dose(s) of COVID-19 vaccine
HCP who have received booster cannot be more than the number of fully vaccinated HCP.	If this red flag appears, please check that this number is not greater than the sum of the fully vaccinate HCPs in D2.
Cumulative number of those with completed primary vaccine series, who are up to date with COVID-19 vaccine	Cumulative number of those with completed primary vaccine series, who are up to date with COVID-19 vaccine
Percentage of vaccinated HCP	The percentage is the sum of all vaccine answers in questions A2, B2, C2, D2 divided by total number of HCP in the facility during the reporting week.
Sum of all unvaccinated HCP	The total is the answers in questions A1, A3, A4, A5, B1, B3, B4, B5, C1, C3, C4, C5, D1, D3, D4, D5 divided by total number of HCP in the facility during the reporting week.
Percentage of vaccinated HCP is below 90%	This red flag appears if the Percentage of vaccinated HCP in this round of testing is less than 90% of the number of HCPs that worked at the facility sometime during the reporting week.
Percentage of unvaccinated HCP is above 90%	This red flag appears if the Sum of all unvaccinated HCP in this round of testing is above than 90% of the number of HCPs that worked at the facility sometime during the reporting week.
HCP testing volumes	TITLE
During this reporting week, how many HCPs were tested in this round of testing?	Include all HCPs tested <u>in this round of testing only</u> . Include staff from multiple shifts and facility locations. Include all HCPs tested at the SNF or at other testing sites (e.g., community testing site), and even if their test result is not yet available. Please count each tested individual once, even if the individual was tested more than once during the reporting week. HCPs absent less than or equal to last reporting week should be included in the testing population.

QUESTION/LABEL	DESCRIPTION
<p>The total number of HCPs tested is less than number of required by AFL. Are the numbers entered above correct? Please make sure number of tested meets AFL 20-53 requirements</p>	<p>Select “Yes” or “No”</p>
<p>The total number of HCPs tested is greater than the Total Number of Personnel. Are the numbers entered above correct?*</p>	<p>Select “Yes” or “No”</p>
<p>Number of HCPs tested = HCPs tested through a lab (PCR test) + HCPs tested through a point-of-care device (antigen test)</p>	<p>Survey structure: The survey will first show the main question (e.g. “During this reporting week, how many HCPs were tested in this round of testing?”), followed by the sub-questions that break down the numbers by lab (PCR test) and by point-of-care device (antigen test).</p> <p>Formula: This formula serves to remind the user that the lab and point-of-care device numbers combined, must be equivalent to the number entered for the main question; otherwise, a hard constraint flag will appear, and the facility will not be able to complete the survey without first resolving the discrepancy in the numbers entered.</p>
<p>How many HCPs were tested through a lab (PCR test)?</p>	<p>The value entered for this question, plus the value entered for the next question, must be equivalent to the value entered for the number of HCPs tested in this round of testing.</p>
<p>How many HCPs were tested through a point-of-care device (antigen test)?</p>	<p>The value entered for this question, plus the value entered for the previous question, must be equivalent to the value entered for the number of HCPs tested in this round of testing.</p>
<p>How many HCPs refused COVID-19 testing during this round of testing?</p>	<p>Please report the total number of unique HCPs who refused testing during this round of testing only. If a HCP refused more than once, please report as a 1.</p>
<p>How many HCPs were scheduled to receive a COVID-19 test during this round of testing BUT NOT TESTED?</p>	<p>Please report the total number of unique HCPs who were scheduled for testing during this round of testing only. If a HCP was scheduled more than once, please report as a 1.</p>
<p>How many HCPs previously tested positive for COVID-19 (prior to this reporting week or round of testing) and were not re-tested during this round of testing?</p>	<p>HCP with a previous positive test: HCP who had a positive viral test in the past three months and are now asymptomatic do not need to be retested as part of facility-wide testing; testing should be considered again (e.g., in response to an exposure) only if it is three months after the date of onset of the prior infection. For HCP who develop new symptoms consistent with</p>

QUESTION/LABEL	DESCRIPTION
	COVID-19 during the threemonths after the date of initial symptom onset, if an alternative etiology cannot be identified, then retesting can be considered in consultation with infectious disease or infection control experts.
Percentage of (HCPs tested + HCPs refused testing + HCPs scheduled to test but did not + HCPs previously tested positive and not re-tested) out of the total number of HCPs that worked at the facility sometime during the past last reporting week.	This percentage is calculated for you based on prior entered data. The sum of (HCPs tested + HCPs refused testing + HCPs scheduled to test but did not + HCPs previously tested positive and not re-tested) should be equivalent to 100% of HCPs that worked at the facility sometime during the past reporting weeks.
The number of (HCPs tested + HCPs refused testing + HCPs scheduled to test but did not + HCPs previously tested positive and not re-tested) is less than the number of HCPs that worked at the facility sometime during the past last reporting week. Explain the lower than recommended testing volume.	(self-explanatory)
The number of (HCPs tested + HCPs refused testing + HCPs scheduled to test but did not + HCPs previously tested positive and not re-tested) is higher than the number of HCPs that worked at the facility sometime during the past last reporting week. Please check that the data is correct or provide comments to explain this difference.	(self-explanatory)
How many of those HCP previous positive results were detected through a lab (PCR test)?	The value entered for this question, plus the value entered for the next question, must be equivalent to the value entered for the number of HCPs that previously tested positive and not re-tested during this reporting week.
How many of those HCP previous positive results were detected through a point-of-care device (antigen test)?	The value entered for this question, plus the value entered for the previous question, must be equivalent to the value entered for the number of HCPs that previously tested positive and not re-tested during this reporting week.

QUESTION/LABEL	DESCRIPTION
The number of HCPs previously tested positive and not re-tested during this reporting week = HCPs previously tested through a lab (PCR test) + HCPs previously tested through a point-of-care device (antigen test) - (You may have to re-enter the values to re-calculate correctly)	Survey structure: The survey will first show the main question (e.g. “How many HCPs previously tested positive for COVID-19 (prior to this reporting week or round of testing) and were not re-tested during this round of testing?”), followed by the sub-questions that break down the numbers by lab (PCR test) and by point-of-care device (antigen test).
Round 1 – HCP testing results	TITLE
How many COVID-19 positive results were received during this round of testing for HCPs (may include tests conducted in prior weeks)?	Please only include positive results since the last time these results were entered in the survey. If a HCP received a positive result more than once during this reporting week, please enter the number of times they received a positive result during this round of testing only.
How many of the HCP positive results were detected through a lab (PCR test)?	The value entered for this question, plus the value entered for the next question, must be equivalent to the value entered for the number of HCP positive test results that were received during this round of testing (may include tests conducted in prior weeks).
How many of the HCP positive results were detected through a point-of-care device (antigen test)?	The value entered for this question, plus the value entered for the previous question, must be equivalent to the value entered for the number of HCP positive test results that were received during this round of testing (may include tests conducted in prior weeks).
How many COVID-19 negative results were received during this round of testing for HCPs (may include tests conducted in prior weeks)?	Please only include negative results since the last time these results were entered in the survey. If a HCP received a negative result more than once during this reporting week, please enter the number of times they received a negative result during this round of testing only.
How many of the HCP negative results were detected through a lab (PCR test)?	The value entered for this question, plus the value entered for the next question, must be equivalent to the value entered for the number of HCP negative test results that were received during this round of testing (may include tests conducted in prior weeks).
How many of the HCP negative results were detected through a point-of-care device (antigen test)?	The value entered for this question, plus the value entered for the previous question, must be equivalent to the value entered for the number of HCP negative test results that were received during this round of testing (may include tests conducted in prior weeks).

QUESTION/LABEL	DESCRIPTION
For how many HCPs were COVID-19 tests conducted during this round of testing, but results were inconclusive or not yet available?	Total number of unique HCPs that were tested during the week data is being reported for whom the results of the test are awaited or inconclusive- please only include results awaited for tests completed since the last time these counts were entered in the survey.
How many of the inconclusive or not-yet-available HCP test results are through a lab (PCR test)?	The value entered for this question, plus the value entered for the next question, must be equivalent to the value entered for the number of inconclusive or not-yet-available HCP test results that were received during this round of testing (may include tests conducted in prior weeks).
How many of the inconclusive or not-yet-available HCP test results were through a point-of-care device (antigen test)?	The value entered for this question, plus the value entered for the previous question, must be equivalent to the value entered for the inconclusive or not-yet-available HCP test results that were received during this round of testing (may include tests conducted in prior weeks).
Total number of HCPs with positive results, negative results, and inconclusive/not yet available results	This number is calculated for you based on prior entered data.
The total number of (HCPs with positive results + HCPs with negative results + HCPs with inconclusive/not yet available results) does not equal to the total number of HCPs tested. Are the numbers entered above correct?	If this red flag appears, please check the values entered for each category in parenthesis, and ensure that when combined, the combined value is equivalent to the total number of residents tested; then select a button to answer "Yes" or "No".
<p>If you indicated that your facility conducted testing twice during the reporting week, the same series of HCP questions above will repeat as Round 2.</p> <p>If you indicated that your facility conducted testing once during the reporting week, the survey will continue with the series of questions below regarding Residents.</p>	(self-explanatory)
COVID-19 testing for SNF Residents	TITLE

QUESTION/LABEL	DESCRIPTION
Recommendations for testing Response-driven testing for Residents:	If testing capacity is not sufficient to serially retest all residents, prioritize responsetesting of residents on the same unit(s) where COVID-19 positive residents or HCP were identified. Two sequential rounds of negative response testing among residents is generally considered evidence that transmission has been halted among residents; if positive HCP are identified in subsequent response-testing rounds after transmission has been halted among residents, the SNF may consider more targeted response testing of residents only on the same unit(s) where the positive HCP were identified, in consultation with their LHD.
Has your facility performed COVID-19 testing of any residents during the reporting week?	Required for response-driven testing. Not required for screening testing, but if you tested residents, anyway, please report it. If test results arrived this reporting week from tests conducted during prior reporting weeks, please report the test results below.
How many beds were occupied at the facility during this reporting week? Only count each individual once.	Please report the unique number of residents present at the facility or the number of beds occupied during the week that the data is being reported.
# Beds occupied during the week = # Residents tested for Covid-19 during the week + # Residents refused Covid-19 test during the week + # Residents scheduled for Covid-19 test during the week BUT NOT TESTED + # Residents not tested during the week because previously positive for Covid-19	For response-driven testing, the sum of the components should be equal to the total # residents present during the week given that 100% of resident testing is required weekly.
RES Vaccination Volumes	RES must equal A1 + A2 + A3 + A4 + A5
A1) Enter the number of residents who received only dose 1 of a two-dose primary COVID-19 vaccine series	Resident received only one dose of a two-dose primary COVID-19 vaccine series at least 14 days prior to the specimen collection date for the newly positive viral test result or the second dose was received less than 14 days prior to the to the specimen collection date for the newly positive viral test result and, therefore, not included in this counted.

QUESTION/LABEL	DESCRIPTION
A2) Enter the number of residents who received any completed Primary COVID-19 vaccine series	Resident received both doses (doses 1 and 2) of any Primary COVID-19 vaccine series with the second dose being at least 14 days prior to the specimen collection date for the newly positive viral test result.
A3) Enter the total number of residents not receiving vaccination due to either a medical contraindication or exclusion to one or more COVID-19 vaccine(s)	<p>Enter the number of residents determined to have a medical contraindication to one or more COVID-19 vaccine(s).</p> <p>1. If this is the first time the medical contraindication counts are being entered in the survey, enter the total number of residents determined to have a medical contraindication to one or more COVID-19 vaccine(s) up until the day being reported.</p> <p>If this is not the first time, enter the new counts of residents determined to have a medical contraindication to one or more COVID-19 vaccine(s) since the last date the survey was submitted.</p>
A4) Enter the total number of residents in question #1 that were offered COVID-19 vaccination but declined	<p>Enter the total number of residents that were offered COVID-19 vaccination but declined.</p> <p>1. If this is the first time the refused COVID 19 vaccination counts are being entered in the survey, enter the total number of residents who refused vaccination up until the day being reported.</p> <p>2. If this is not the first time, enter the new counts of resident who refused vaccination since the last date the survey was submitted.</p> <p>The following residents should be counted in this category:</p> <p>Residents declining vaccination because of health conditions that are not considered acceptable medical contraindications to the COVID-19 vaccine.</p> <p>Residents declining vaccination because of religious or philosophical objection.</p> <p>Residents declining vaccination and who did not provide any information about the reason why they declined.</p>
A5) Enter the number of residents whose COVID-19 vaccination status could not be determined	(self-explanatory)

QUESTION/LABEL	DESCRIPTION
The sum of all vaccine answers should equal to total number of residents in the facility during thereporting week	If this red flag appears, please check the values entered for each category in vaccine volumes, and ensure that when combined, the combined value is equivalent to the total number of residents.
RES Vaccination Volumes (Sub group)	TITLE
Cumulative number of residents with complete primary series vaccine who have received only one booster dose of COVID-19 vaccine since August 2021	Cumulative number of residents with complete primary series vaccine who have received only one booster dose of COVID-19 vaccine since August 2021
Cumulative number of residents with complete primary series vaccine who have received two or more booster doses of COVID-19 vaccine since March 29, 2022	Cumulative number of residents with complete primary series vaccine who have received two or more booster doses of COVID-19 vaccine since March 29, 2022
Residents who have received booster cannot be more than the number of fully vaccinated residents.	If this red flag appears, please check that this number is not greater than the sum of the fully vaccinate Residents in A2.
Cumulative number of residents with complete primary series vaccine who are up-to-date with COVID-19 vaccines	Cumulative number of residents with complete primary series vaccine who are up-to-date with COVID-19 vaccines
Residents who are up-to-date cannot be more than the number of Residents who have completed Primary COVID-19 vaccine series.	If this red flag appears, please check that this number is not greater than the number of Residents who have completed Primary COVID-19 vaccine series.
Percentage of vaccinated RES	The percentage is the sum of all vaccine answers in questions A2 divided by total number of RES in the facility during the reporting week
Sum of all unvaccinated RES	The total is the answers in questions A1, A3, A4, A5 divided by total number of RES in the facility during the reporting week
Percentage of RES below 90%	This red flag appears if the Percentage of vaccinated RES in this round of testing is less than 90% of the number of RES that worked at the facility sometime during the reporting week.
Sum of all unvaccinated RES above 90%	This red flag appears if the Sum of all unvaccinated RES in this round of testing is above than 90% of the number of RES that worked at the facility sometime during the reporting week.
Round 1 – Resident testing volumes	TITLE

QUESTION/LABEL	DESCRIPTION
During this reporting week, how many residents were tested in this round of testing?	Include all residents tested in this round of testing only. Include all tests conducted at the site or at another location (e.g., community testing site). If a resident was tested more than once, please report as a 1.
Less than 100% of reported SNF residents tested. Please check that the data is correct or provide comments to explain lower than recommended testing volumes. Explain the lower than recommended testing volume.	This red flag appears if the value entered for the number of Residents tested in this round of testing is less than the number of beds that were occupied at the facility during this reporting week. Please check that the data is correct or provide comments to explain lower than recommended testing volumes.
Number of residents tested = Residents tested through a lab (PCR test) + Residents tested through a point-of-care device (antigen test)	<p>Survey structure: The survey will first show the main question (e.g. “During this reporting week, how many residents were tested in this round of testing?”), followed by the sub-questions that break down the numbers by lab (PCR test) and by point-of-care device (antigen test).</p> <p>Formula: This formula serves to remind the user that the lab and point-of-care device numbers combined, must be equivalent to the number entered for the main question; otherwise, a hard constraint flag will appear, and the facility will not be able to complete the survey without first resolving the discrepancy in the numbers entered.</p>
How many residents were tested through a lab (PCR test)?	The value entered for this question, plus the value entered for the next question, must be equivalent to the value entered for the number of Residents tested during this round of testing.
How many residents were tested through a point-of-care device (antigen test)?	The value entered for this question, plus the value entered for the previous question, must be equivalent to the value entered for the number of Residents tested during this round of testing.
How many residents refused COVID-19 testing during this round of testing?	Please report the total number of unique residents who refused testing during this round of testing only. If a HCP refused more than once, please report as a 1.
How many residents were scheduled to receive a COVID-19 test during this round of testing BUT NOT TESTED?	Please report the total number of unique residents who were scheduled for testing during this round of testing only. If a resident was scheduled more than once, please report as a 1.

QUESTION/LABEL	DESCRIPTION
How many residents previously tested positive for COVID-19 (prior to this reporting week or round of testing) and were not re-tested during this round of testing?	(self-explanatory)
Percent of (residents tested + residents refused testing + residents scheduled to test but did not + residents previously tested positive and not re- tested) out of the total number of occupied beds that were in the facility sometimes during the past last reporting week.	This percentage is calculated for you based on prior entered data.
<p>The number of (residents tested + residents refused testing + residents scheduled to test but did not + residents previously tested positive and not re-tested) is less than the number of residents that occupied beds sometime during the past last reporting week. Explain the lower than recommended testing volume.</p> <p>If needed, please share any additional information that explains less than 100% Resident testing volumes.</p>	(self-explanatory)
Information provided for greater than 100% of reported SNF residents. Please check that the data is correct or provide comments to explain higher testing volumes.	(self-explanatory)

QUESTION/LABEL	DESCRIPTION
<p>The number of (residents tested + residents refused testing + residents scheduled to test but did not + residents previously tested positive and not re-tested) is less than the number of residents that occupied beds sometime during the past last reporting week. Explain the lower than recommended testing volume.</p>	<p>Survey structure: The survey will first show the main question (e.g. “How many residents previously tested positive for COVID-19 (prior to this reporting week or round of testing) and were not re-tested during this round of testing?”), followed by the sub-questions that break down the numbers by lab (PCR test) and by point-of-care device (antigen test).</p> <p>Formula: This formula serves to remind the user that the lab and point-of-care device numbers combined, must be equivalent to the number entered for the main question; otherwise, a hard constraint flag will appear, and the facility will not be able to complete the survey without first resolving the discrepancy in the numbers entered.</p>
<p>How many of those resident previous positive results were detected through a lab (PCR test)?</p>	<p>The value entered for this question, plus the value entered for the next question, must be equivalent to the value entered for the number of Residents that previously tested positive and not re-tested during this reporting week.</p>
<p>How many of those resident previous positive results were detected through a point-of-care device (antigen test)?</p>	<p>The value entered for this question, plus the value entered for the previous question, must be equivalent to the value entered for the number of Residents that previously tested positive and not re-tested during this reporting week.</p>
<p>Round 1 - Resident testing results</p>	<p>TITLE</p>
<p>How many COVID-19 positive results were received during this round of testing for residents (may include tests conducted in prior weeks)?</p>	<p>Please only include positive results since the last time these results were entered in the survey. If a resident received a positive result more than once during this reporting week, please enter the number of times they received a positive result during this round of testing only.</p>
<p>How many of the resident positive results were detected through a lab (PCR test)?</p>	<p>The value entered for this question, plus the value entered for the next question, must be equivalent to the value entered for the number of Resident positive test results that were received during this round of testing (may include tests conducted in prior weeks).</p>
<p>How many of the resident positive results were detected through a point-of-care device (antigen test)?</p>	<p>The value entered for this question, plus the value entered for the previous question, must be equivalent to the value entered for the number of Resident positive test results that were received during this round of testing (may include tests conducted in prior weeks).</p>
<p>How many COVID-19 negative results were received during this round of testing for residents (may include tests conducted in prior weeks)?</p>	<p>Please only include negative results since the last time these results were entered in the survey. If a resident received a negative result more than once during this reporting week, please enter the number of times they received a negative result during this round of testing only.</p>

QUESTION/LABEL	DESCRIPTION
How many of the resident negative results were detected through a lab (PCR test)?	The value entered for this question, plus the value entered for the next question, must be equivalent to the value entered for the number of Resident negative test results that were received during this round of testing (may include tests conducted in prior weeks).
How many of the resident negative results weredetected through a point-of-care device (antigentest)?	The value entered for this question, plus the value entered for the previous question, must be equivalent to the value entered for the number of Resident negative test results that were received during this round of testing (may includetests conducted in prior weeks).
For how many residents were COVID-19 tests conducted during this round of testing, but resultswere inconclusive or not yet available?	Total number of unique residents who were tested during the week data is being reported for whom the results of the test are awaited or inconclusive - please only include tests done since the last time these counts were entered in the survey.
How many of the inconclusive or not-yet-available resident test results are through a lab (PCR test)?	The value entered for this question, plus the value entered for the next question, must be equivalent to the value entered for the number of inconclusive or not-yet-available Resident test results that were received during this round of testing (may include tests conducted in prior weeks).
How many of the inconclusive or not-yet-available resident test results are through a point-of-care device (antigen test)?	The value entered for this question, plus the value entered for the previous question, must be equivalent to the value entered for the inconclusive or not-yet-available Resident test results that were received during this round of testing (may include tests conducted in prior weeks).
Total number of residents with positive results, negative results, and inconclusive/not yet available results	This is calculated for you based on prior entered data.
The total number of (residents with positive results + residents with negative results + residents with inconclusive/not yet available results) does not equal to the total number of residents tested. Are the numbers entered above correct?	If this red flag appears, please check the values entered for each category in parenthesis, and ensure that when combined, the combined value is equivalent tothe total number of residents tested; then select a button to answer “Yes” or “No”.

QUESTION/LABEL	DESCRIPTION
<p>If you indicated that your facility conducted testing <u>twice</u> during the reporting week, the same series of Resident questions above will repeat as Round 2.</p> <p>If you indicated that your facility conducted testing <u>once</u> during the reporting week, the survey will continue with the laboratory and point-of-care device questions below.</p>	NOTE
Laboratory Information	TITLE
Which lab(s) did you use this week for COVID-19 testing?	This is a multiple-choice question. Please select all that apply for the reporting week. If the lab(s) you used is/are not on the list provided, please select “Other” and proceed to the next question.
Please specify which “Other” lab was used for COVID-19 testing.	Please type in the name of the lab.
Which point-of-care testing machine did you use this week for testing?	Please type in the name of the point-of-care device.
Therapeutics Information	TITLE
<p>Since the last reporting period, were any residents newly administered any of the following therapeutics: Casirivimab plus Imdevimab (Regeneron), Bamlanivimab plus etesevimab (Lilly), Sotrovimab (GlaxoSmithKline), Evusheld (AstraZeneca), Paxlovid (Pfizer) Molnupiravir (Merck), or Bebtelovimab (Lilly): from either stock stored at the facility or from stock from another facility such as an infusion center? If yes, please enter the number of residents that have been treated for each therapeutic. (Only enter the number of residents who were newly administered a therapeutic since the previously reported counts. DO NOT ENTER CUMULATIVE COUNTS)*</p>	<p>Please select a button to answer “Yes” or “No”.</p> <p>Therapeutic is defined as a treatment, therapy, or drug. Monoclonal antibodies are examples of anti-SARS-CoV-2 antibody-based therapeutics used to help the immune system recognize and respond more effectively to the COVID-19 virus.</p>

QUESTION/LABEL	DESCRIPTION
If yes, please enter the number of residents that have been treated for each therapeutic.	If Bamlanivimab alone is given as therapy, do not also select Bamlanivimab plus etesevimab (Lilly) in the application. Please select Bamlanivimab alone (Lilly).
A1) Casirivimab plus Imdevimab (Regeneron): at this facility.	The default count for each selection is set to 0.
A2) Casirivimab plus Imdevimab (Regeneron): at another facility/infusion center.	The default count for each selection is set to 0.
A3) Bamlanivimab plus etesevimab (Lilly): at this facility.	The default count for each selection is set to 0.
A4) Bamlanivimab plus etesevimab (Lilly): at another facility/infusion center.	The default count for each selection is set to 0.
A5) Sotrovimab (GlaxoSmithKline): at this facility.	The default count for each selection is set to 0.
A6) Sotrovimab (GlaxoSmithKline): at another facility/infusion center.	The default count for each selection is set to 0.
A7) Evusheld (AstraZeneca): at this facility.	The default count for each selection is set to 0.
A8) Evusheld (AstraZeneca): at another facility/infusion center.	The default count for each selection is set to 0.
A9) Paxlovid (Pfizer): at this facility.	The default count for each selection is set to 0.
A10) Paxlovid (Pfizer): at another facility/infusion center.	The default count for each selection is set to 0.
A11) Molnupiravir (Merck): at this facility.	The default count for each selection is set to 0.
A12) Molnupiravir (Merck): at another facility/infusion center.	The default count for each selection is set to 0.
A13) Bebtelovimab (Lilly): at this facility.	The default count for each selection is set to 0.
A14) Bebtelovimab (Lilly): at another facility/infusion center.	The default count for each selection is set to 0.
Total sum of therapeutics cannot be more than the total number of residents in the facility that week	If this red flag appears, please check the values entered for each category in therapeutics and ensure that when combined, the combined value is greater than or equal to the total number of therapeutics entered.