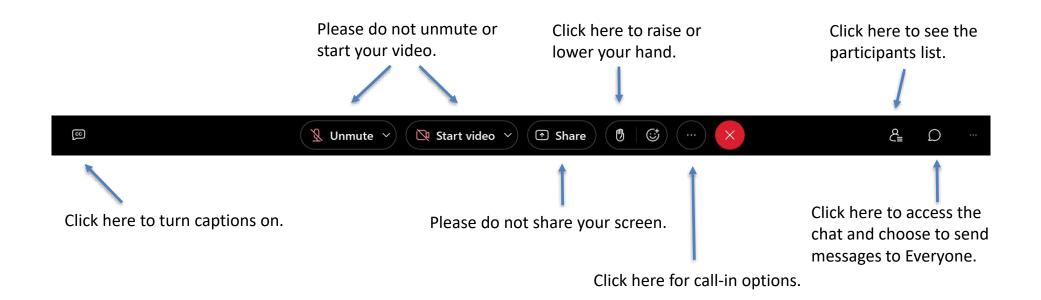


Housekeeping







Data Hygiene: COVID-19 CDPH 123 Survey Reporting

Special Session

Daniel Daugherty, PhD* CaSaundra Bush, MPH[¥] Jessica Fay, MPH[¥] Aya Obara, MPH[¥]

* California Department of Public Health ¥ Los Angeles County Department of Public Health



2

Continuing Education Units (CEUs) or Certificate of Completion

Eligibility: TNT program participants and non-participants from SNFs

- <u>CEUs</u>: for licensed attendees such as RNs, LVNs, physicians
- <u>Certificates of Completion</u>: for non-licensed attendees such as DSDs, DONs etc.
- 1) Must attend the entire live session <u>AND</u>
- Successfully pass post-session evaluation quiz with a score of 80% or more

OR

 Watch the session recording <u>AND</u>
 Successfully pass postsession evaluation quiz with a score of 80% or more

*Recording of the session will be posted on the <u>TNT Website</u> within one week following the session.

Link to the post session quiz will be posted in the chat at the completion of the live webinar session and emailed out to all SNFs at the end of the webinar session. The link to the post session quiz will be posted on the TNT website for access.



TNT Special Webinar Objectives

- Improve data collection and reporting on California Department of Public Health (CDPH) 123 weekly/daily surveys
 - Describe data hygiene best practices
 - Apply data hygiene best practices to the CDPH survey reporting
- Review up to date vaccination definition and CDPH survey data reporting
- Review data collection using a vaccine data tracker



Audience Question: Does your facility have an Infection Preventionist (IP) Orientation & Checklist?



Infection Preventionist (IP) Orientation & Checklist: Data Management & Surveillance

- An IP orientation checklist should include data management and surveillance reporting.
- Training new IPs on data reporting should include CDPH 123 surveys.
- Identify designated back-up staff to report when the IP is absent.



IP Surveillance

| Laboratory alerts/reports |
|--|
| Admission lists |
| National Healthcare Safety Network (NHSN) infection definitions and criteria |
| Targeted surveillance (hand hygiene, isolation, etc.) |
| Central line-associated bloodstream infections |
| Catheter-associated urinary tract infections |
| California reportable diseases/health department notifications |
| IP unit rounds (frequency/forms) |
| Environment of care (EOC) rounds |
| Construction/project rounds (as needed) |



Data Hygiene Best Practices



Best Practices for Data Management

| Individual-level data | Summary data for external reporting | Internal data projects |
|--|---|---|
| Ex: Resident charts or staff directories/ databases | <i>Ex: Survey or other required reports for facility-wide data</i> | Ex: Quality improvement projects |
| Digital Use categories, key words, or labels instead of free text | Use reports to summarize data by time or type Use spreadsheets to track data questions over time Make sure data is summarized regularly | Make data collection easy Smart phone apps, paper, shared spreadsheets Organize data by date (day, week, etc.) to track changes over time |



CDPH 123 Weekly/Daily Survey Reporting

| | Q | 📣 💿 ESRI 🗸 | |
|---|---|------------|--|
| Eacility Survey | | | 9:21 ᠠ |
| Your facility name will appear here when signed in | COVID-19 Skilled Nursing Facility Surveys | | CDPH COVID-19 SNF SURVEY CDPH COVID-19 SNF SURVEY Facility Information |
| | | | |
| Select the "quick links" to navigate to the weekly Testing Survey or the Daily Survey | Weekly Testing Survey Daily Facility Survey | * | Skilled Nursing Facility Name * Start typing in facility name to see available choices. If your facility is not on the list please send an email to: COVID-19SNFSURVEY@cdph.ca.gov with the facility name and address as well as your name, telephone number and e-mail address. If you would like to venify your Facility ID please use the CDPH Healthcare Facility Lookup tool found <u>here</u> |
| | COVID-19 Daily Skilled Nursing Facility (SNF) Survey Report SNF data in response to the COVID-19 pandemic | | Facility ID |
| Your facility will appear here to submit a daily | | | ♦ |
| form | | | Facility Address |
| | Submit a Survey | | Facility City |
| | Please wait a minute for the facilities to appear. | | Facility County |
| This area will show you the | If none load then no facilities are available for this account. | | Facility Telephone |
| information from the survey you | | | Current Reporting Period |
| most recently | Survey Details | | 1 of 2 |
| filled out | Details from the Most Recently Submitted Survey | | |
| (There | * Only Records submitted through this hub will appear could be up to a 5 min delay before your recent submittal appears. Please refresh you browser if it does not appear) | | |

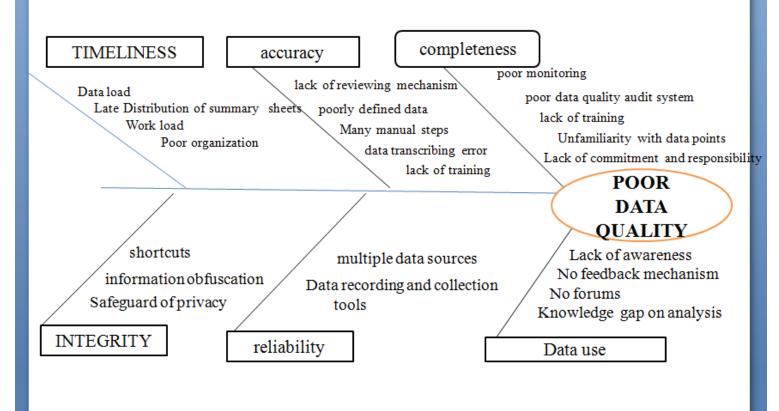


Data Quality Issues & Improving CDPH Survey Reporting



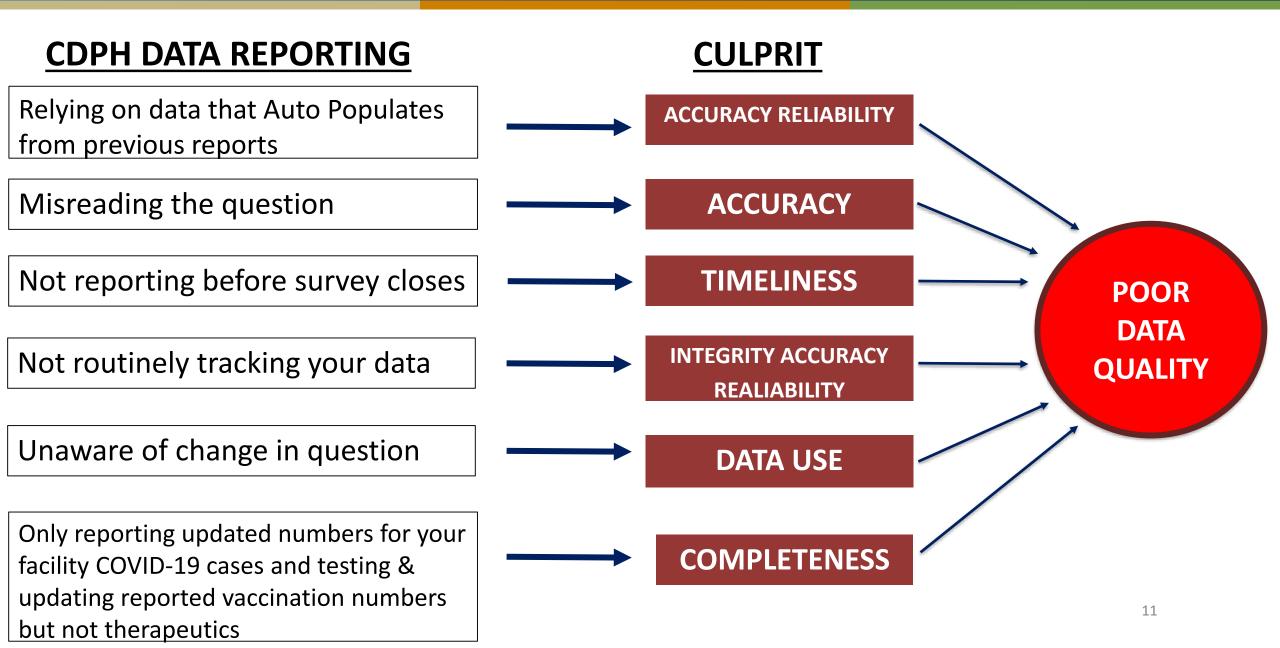
Common culprits of poor data quality (data hygiene)

Fish bone diagram



- Timeliness
- Accuracy
- Completeness
- Integrity
- Reliability
- Data Use







Ways to improve CDPH survey data quality

- Take a moment to thoroughly read the question and respond correctly
- Routinely track the data you report
- Double check data entry:
 - Accurate data
 - Updated data



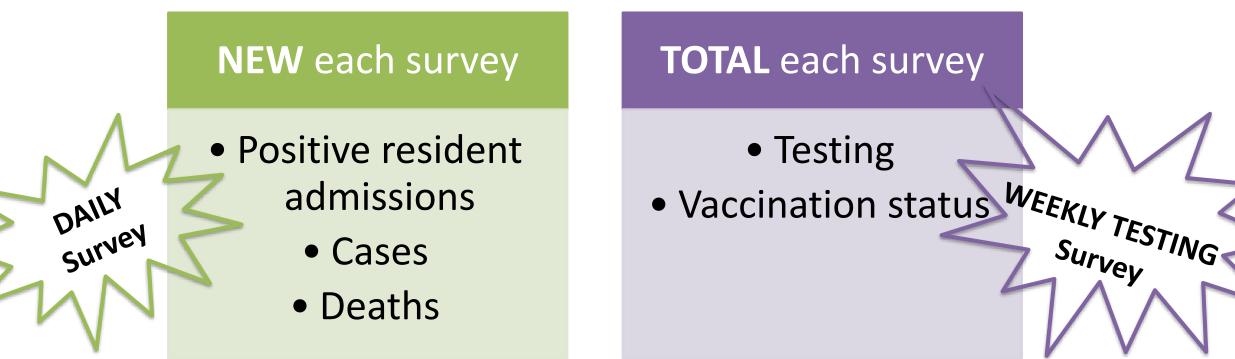
- Complete the survey in its entirety:
 - For example, ensure that along with the questions about testing, you also answer the questions about vaccination and therapeutics.



Reporting NEW vs TOTAL: Which numbers to report?

New = ONLY report numbers since the last daily survey was submitted Total = ALWAYS report the total numbers as of that survey reporting week*

Questions asking for numbers that are:





Reporting COVID-19 Deaths

- "COVID-19 DEATHS: Residents/staff or facility personnel with suspected or laboratory positive COVID-19 who died in the facility or another location since the last time counts were reported. "
 - Only report **NEW COVID-19 related deaths** at your facility.
- "Residents/staff or facility personnel who have died in the facility or another location since the last time counts were reported."
 - Report **ALL** new deaths at your facility.
- For all NEW COVID-19 related deaths, please submit a death report form to LAC DPH within 24 hours of the resident's death.
 - <u>Death Report Form: https://ladph.workflowcloud.com/forms/33710d08-db42-45a7-b90c-6aa2028eb79b</u>



Audience Question: <u>True or False</u>: When asked to report new COVID-19 positive individuals who died at my SNF or another location since the last time counts were reported on the CDPH daily 123 survey, I must only report new COVID-19 related deaths at my facility.

True. Only report new COVID-19 Deaths.



LAC DPH CDPH 123 Weekly Survey Non-Responder Data Collection

SNFs are required to report positive COVID-19 surveillance reporting and response testing results:

- CDPH 123 Weekly Survey
- AFL: <u>https://www.cdph.ca.gov/Programs</u>
 <u>/CHCQ/LCP/Pages/AFL-20-60.aspx</u>
- HOO: <u>http://publichealth.lacounty.gov/</u> media/Coronavirus/docs/HOO/HOO_Skil ledNursingFacilities.pdf

2 Weekly non-responders are sent a survey from LAC DPH

Weekly non-responder SNFs report via LAC DPH SNF COVID-19 Weekly Testing Reporting

| | 12:29 |
|--|---|
| SNF COVID-19 Weekly Testing Reporting | SNF COVID-19 Weekly Testing Reporting |
| Supplement to COVID-19 SNF Survey Hub - Weekly Survey 123 | Supplement to COVID-19 SNF Survey Hub - Weekly Survey 123 |
| Survey week: Monday, October 17, 2022 - Sunday, October 23, 2022 | Survey week: Monday, October 17, 2022 - Sunday, October 23, 2022 |
| Facility Name and Facility ID | Facility Name and Facility ID |
| | |
| | Powered by Qualtrics 🖄 |
| | |
| | |
| | |
| | |

Reporting provides accurate data and helps facilities meet local requirements

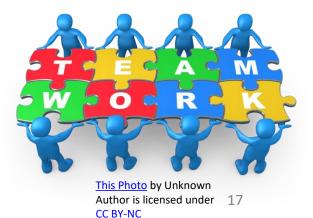


Root Cause: Timeliness

- If your facility is frequently getting the LAC DPH CDPH 123 Weekly Survey for Non-Responders, there's an issue with **timeliness**
- Impacts
 - Financial penalties from CMS
 - Lack of timely data to inform internal interventions (address low booster numbers, increasing cases, etc.)
- Potential solutions
 - Team approach: shared responsibility with multiple back-ups. <u>IP</u> should not be the only staff who is responsible/knows how to submit survey results.
 - Clear communication
 - Central, shared spreadsheets allows anyone covering to quickly gain access to updated numbers for reporting



<u>This Photo</u> by Unknown Author is licensed under <u>CC BY-NC-ND</u>





Correcting Already Submitted Data

- If discrepancies in data entries are identified, you will receive an email from <u>covid-ltc-test@ph.lacounty.gov</u>.
 - Please respond either correcting the discrepancy or confirming the data.
- If data entry error, you will receive another email asking you to contact CDPH to correct the data entry error:
 - <u>COVID-19SNFSURVEY@cdph.ca.gov</u>.

Hello,

Thank you for your time earlier today in confirming that there were actually no covid-19 deaths for the 3/7-3/13 reporting week.

Since this was a data entry error in your CDPH weekly and/or daily survey submission, please reach out to <u>COVID-19SNFSURVEY@cdph.ca.gov</u> (CC'ed) to update your survey submission to correct for the data entry error.

Alternatively, you can reach out to your district office for further assistance on updating your survey data.

Please complete this at your earliest convenience.

Thanks!



"Up to Date" status with COVID-19 Vaccines Accurate CDPH Survey Reporting



Audience Question: <u>True or False</u>: "Up to date" means a resident has received 4 doses of a COVID-19 vaccine.



Reporting Up to Date on CDPH Survey Weekly Reporting

- "Up to date" on the CDPH weekly survey includes any staff or resident who has completed their COVID-19 primary vaccine series doses and recommended booster if enough time has passed
 - For ages 5+, one booster dose of bivalent COVID-19 vaccine is recommended at least 2 months after the last COVID-19 vaccine dose (either the final primary series dose or the last booster). This is regardless of how many boosters or which type(s) of vaccine they received in the past).

CDC Up to Date COVID-19 Vaccine Recommendations: <u>https://www.cdc.gov/</u> <u>coronavirus/2019-ncov/vaccines/stay-up-</u> <u>to-date.html</u>

| Up to date | Not up to date |
|--|--|
| Received the COVID-19 bivalent booster They have not received the COVID-19 bivalent booster AND It has been less than 2 months since they completed their COVID-19 primary vaccine series It has been less than 2 months since their last COVID-19 poster (monovalent) vaccine dose | It has been more than 2 months since their last vaccine dose AND they <u>have not received</u> a COVID-19 bivalent booster |
| | |



Reporting Up to Date on CDPH Survey Weekly Reporting

An up to date person should be counted on the survey every week. All SNFs must Track and Report "Up to Date" status for ALL:

- Number of Residents
- Number of employed HCP
- Number of licensed independent practitioner HCP
- Number of adult student/trainee and volunteer HCP
- Number of other contract personnel

Please remember all responses should be <u>cumulative</u> – meaning report the total number who are up to date for residents and staff in your facility, not just those new during the reporting week.



Audience Question: <u>Yes or No</u> – Jon Snow received his last vaccine booster dose on August 30, 2022. Is he considered up to date?

No. Jon Snow IS NOT up to date.

Jon Snow's last vaccine booster dose was more than 2 months ago therefore he is not up to date.

Please schedule an updated bivalent booster vaccine for Jon;)



Audience Question: <u>Yes or No</u> - Minnie Mouse received her last vaccine booster dose on September 6, 2022. Is she considered up to date?

Yes. Minnie Mouse IS up to date.

Minnie Mouse received her last vaccine booster dose less than 2 months ago therefore she is up to date.



Audience Question: <u>Yes or No</u> - Robin Hood received his updated bivalent booster on September 1, 2022. Is he considered up to date?

Yes. Robin Hood IS up to date.

Robin Hood received an updated bivalent booster vaccine therefore he is up to date even though his last dose was more than 2 months ago.

If a resident or staff received an updated bivalent booster vaccine dose they are considered up to date regardless of the time since that dose.



Audience Question: <u>Yes or No</u> - Lady Macbeth completed her primary vaccine series on October 1, 2022. Is she considered up to date.

Yes. Lady Macbeth IS up to date.

Lady Macbeth completed her primary vaccine series less than 2 months ago therefore she is up to date.

However, she will no longer be considered up to date IF more than 2 months pass since her primary vaccine was completed.



COVID-19 Vaccine FAQs

- Does the COVID-19 vaccine including booster dose need to be spaced out by 14 days with other vaccines (e.g., influenza)?
 - No. COVID-19 vaccines may be administered without regard to timing of other vaccines, including simultaneous administration of COVID-19 vaccine and other vaccines on the same day.
 - If multiple vaccines are administered at a single visit, administer each injection in a different injection site.
- Do we continue administering COVID-19 vaccine primary doses?
 - Yes! Vaccination improves immunity.
 - Continue to improve vaccination coverage among residents and staff for the primary series. Continue to build vaccine confidence!



COVID-19 Vaccine Tracker Templates



Best practices for vaccine data tracking

- Use Excel, Google Sheets or other electronic record keeping
- Allow multiple people to enter data for comprehensive reporting
- Ensure data is accurate through regular "quality checks", trainings, and refreshers
- COVID-19 Vaccine Tracker Templates available on TNT website:
 - <u>COVID-19 Vaccine Tracker</u>
 <u>Template (for Residents)</u>
 - <u>COVID-19 Vaccine Tracker</u>
 <u>Template (for Staff)</u>

publichealth.lacounty.gov/acd/TNTProgram.htm

| ession #2: Quality Improvement oundations | (QI) and Quality Assurance and P | Performance Improvement (Q |
|--|----------------------------------|----------------------------|
| Access to <u>Recording</u> | TNT Training <u>Slides</u> | Post-session Evalu |
| Veek 1 | | |
| ession #1: Transforming Nursing | Home Care Together (TNT) Progra | ram - Introduction |
| Access to <u>Recording</u> | TNT Training <u>Slides</u> | Post-session Eval |
| | | |
| Week 1 Questions and Answers Resources | " | |
| | " | |
| Resources | " | |
| Resources Tools: • <u>A3 Project Template</u> • <u>COVID-19 Vaccine Tracker Tem</u> | | |
| Resources ools: • <u>A3 Project Template</u> • <u>COVID-19 Vaccine Tracker Tem</u> • <u>COVID-19 Vaccine Tracker Tem</u> | | |
| Resources Tools: • <u>A3 Project Template</u> • <u>COVID-19 Vaccine Tracker Tem</u> • <u>COVID-19 Vaccine Tracker Tem</u> • <u>Hand Hygiene Handout</u> | <u>plate (for Staff)</u> | |
| Resources Tools: • <u>A3 Project Template</u> • <u>COVID-19 Vaccine Tracker Tem</u> • <u>COVID-19 Vaccine Tracker Tem</u> • <u>Hand Hygiene Handout</u> • <u>HSAG Process Measure Tracke</u> | <u>plate (for Staff)</u> | |
| Resources Tools: • <u>A3 Project Template</u> • <u>COVID-19 Vaccine Tracker Tem</u> • <u>COVID-19 Vaccine Tracker Tem</u> • <u>Hand Hygiene Handout</u> | <u>plate (for Staff)</u> | |

CDPH Monitoring Adherence Tool



Summary Instructions:

Any resident recently admitted or currently residing at your facility should be added to the Tracking Worksheet. When residents are vaccinated, enter the vaccination information onto the Tracking Worksheet. When residents are discharged remove their row from the Resident Tracking tab. Any blank cells will count as UNKNOWN vaccination status, this is especially important for columns G and L.

NOTE: If data entries are made in error, they can be removed with the "Delete" key; Using the "Backspace" key may not delete the entry and may return a warning.

- A. Enter data in rows (from left to right) when entering vaccine data for each resident
- B. Steps for Entering Resident Vaccination Data on the Resident Tracking tab:
 - 1 Enter the unique (Facility ID#) for the reporting facility
 - 2 Enter resident's first name, last name, or Other identifier (e.g. medical record number or patient record number)
 - 3 Enter date the resident vaccinated with dose 1 (Vaccinated with Dose 1)
 - 4 Enter date the resident vaccinated with dose 2 (Vaccinated with Dose 2)
 - 5 Use dropdown to select YES or NO for if resident has completed primary COVID-19 vaccination series

Note: Column G will be colored red if there is a missing value, and colored green once a selection is made from the drop-down. Please refer to https://www.cdc.gov/coronavirus/2019-ncov/vaccines/stay-up-to-date.html for current definitions of primary vaccination series completion, per vaccine manufacturer type.

- 6 Enter date the resident declined the primary series of COVID-19 vaccine (Date of Declination). This DOES include residents declining due to acute medical illness.
- 7 Enter date the resident was vaccinated with additional/booster (monovalent) vaccine (Additional/Booster (Monovalent) Dose Vaccination Date)
- 8 Enter date the resident was vaccinated with second additional/booster (monovalent) vaccine (Second Additional/Booster (Monovalent) Dose Vaccination Date)
- 9 Enter date the resident was vaccinated with updated (bivalent) booster vaccine (Updated (Bivalent) Booster Dose Vaccination Date)
- 10 If the resident has medical contraindication(s), enter the date of medical contraindication(s) first noted.
- 11 Use dropdown to select YES or NO for if resident is up to date on their COVID-19 vaccinations

Note: Column M will be colored red if there is a missing value, and colored green once a selection is made from the drop-down. Please refer to https://www.cdc.gov/coronavirus/2019-ncov/vaccines/stay-up-to-date.html for current definitions of up to date, per vaccine manufacturer type.

- 12 Enter any additional comments (optional)
- 13 Enter YES/NO for if resident needs to be followed up with, and completed date (optional)

IMPORTANT **This form is an example template ONLY to be used by your facility for COVID-19 vaccine data collection and internal record keeping purposes.**



| A | В | С | D | E | F | G | Н |
|---|--|---|-------------------------------------|---|------------------------------------|---|--|
| | | | | | Facility ID#: | | |
| | Resident Last Name. (Enter name) | Resident First Name. (Enter name) | Identifier. (e.g. Medical record | Vaccinated with Dose 1. (Enter verified date of vaccination 1) | Dose 2. (Enter verified date of | ls Primary COVID-19 Vaccination Series Complete? (Please enter YES/NO for red cells) | Declined Primary COVID-19 Vaccination Series, considered NOT Up to Date. (Enter date of declination) |
| | | | | | | | |
| | | | | | | | |

| 1 | J | К | L | М | N | 0 |
|--|--|--------------|----------------------------------|---|---|--|
| | | | | | | |
| Additional/Booster (Monovalent) Dose Vaccination Date? (Enter date) | Second Additional/Booster (Monovalent) Dose Vaccination Date? (Enter date) | Booster Dose | Contraindication or Exemption | Is "Up to Date" per CDC with all recommended COVID-19 vaccine doses (primary series, boosters, additional doses)? (Please enter YES/NO for red cells) | | Follow-up Needed? (Optional. Please enter YES/NO; If completed, enter date of follow up) |
| | | | | | | |
| | | | | | | |



| Facility ID#: | |
|--|-----------------------|
| Vaccination type: | COVID-19 |
| Date Last Modified: | 10/26/2022 |
| Cumulative Vaccination Coverage | |
| | All Residents (Total) |
| Only dose 1 of COVID-19 vaccine | 0 |
| 2 doses of COVID-19 vaccine | 0 |
| Completed Primary COVID-19 vaccine series | 0 |
| Medical contraindication or exemption to COVID-19 vaccine, e.g. anaphylaxis. Does not include residents deferring due to acute medical illness | 0 |
| Offered but declined COVID-19 vaccine (NOTE: this DOES include residents deferring due to acute medical illness) | 0 |
| COVID 19 vaccination status could not be determined | 0 |
| Complete primary series vaccine who have received only one (monovalent) booster dose of COVID-19 vaccine since August 2021 | 0 |
| Complete primary series vaccine who have received two or more (monovalent) booster doses of COVID-19 vaccine since March 29, 2022 | 0 |
| Complete primary series vaccine who have received updated (bivalent) booster | 0 |
| Cumulative number of residents with complete primary series vaccine who are up-to-date with COVID-19 vaccines | 0 |



STY OF LOS AND

Instructions (8/24/2022)

Purpose of this Tracking Worksheet:

Please use this worksheet to help log and track the number of staff who are vaccinated for COVID-19. When you enter COVID-19 vaccination data for each staff in the Tracking Worksheet, the data to be entered into NHSN or CDPH 123 will automatically be calculated on the Summary tab.

Summary Instructions:

Any staff that were eligible to have worked at this healthcare facility for at least 1 day/week should be added to the Tracking Worksheet. When staff are vaccinated, enter the vaccination information onto the Tracking Worksheet. When staff are no longer working at the facility remove their row from the Staff Tracking tab. Any blank cells will count as UNKNOWN vaccination status, this is especially important for columns G and K.

NOTE: If data entries are made in error, they can be removed with the "Delete" key; Using the "Backspace" key may not delete the entry and may return a warning.

A. Enter data in rows (from left to right) when entering vaccine data for each staff B. Steps for Entering staff Vaccination Data on the Staff Tracking tab:

- Enter the unique (Facility ID#) for the reporting facility
- Select staff type: Employee HCP (Staff on facility payroll), Non-Employee HCP (Licensed independent practitioners such as physicians, advanced practice nurses, &
- ² physician assistants), Adult students/trainees & volunteers, Other Contract Personnel
- 3 Enter date the staff vaccinated with dose 1 (Vaccinated with Dose 1)
- 4 Enter date the staff vaccinated with dose 2 (Vaccinated with Dose 2)
- 5 Use dropdown to select YES or NO for if staff has completed primary COVID-19 vaccination series

Note: Column G will be colored red if there is a missing value, and colored green once a selection is made from the drop-down. Please refer to https://www.cdc.gov/coronavirus/2019-ncov/vaccines/stay-up-to-date.html for current definitions of primary vaccination series completion, per vaccine manufacturer type.

- 6 Enter date the staff declined the primary series of COVID-19 vaccine (Date of Declination)
- 7 Enter date(s) the staff was vaccinated with additional/(monovalent) booster vaccine(s) (Additional/(Monovalent) Booster Dose Vaccination Date(s))
- 8 Enter date the staff was vaccinated with updated (bivalent) booster vaccine (Updated (Bivalent) Booster Dose Vaccination Date)
- 9 If the staff has medical contraindication(s), enter the date of medical contraindication(s) first noted.
- 10 Use dropdown to select YES or NO for if staff is up to date on their COVID-19 vaccinations

Note: Column L will be colored red if there is a missing value, and colored green once a selection is made from the drop-down. Please refer to https://www.cdc.gov/coronavirus/2019-ncov/vaccines/stay-up-to-date.html for current definitions of up to date, per vaccine manufacturer type.

- 11 Enter any additional comments (optional)
- 12 Enter YES/NO for if staff needs to be followed up with, and completed date (optional)

IMPORTANT **This form is an example template ONLY to be used by your facility for COVID-19 vaccine data collection and internal record keeping purposes.**



| A | В | С | D | E | F | G | Н |
|---|---|--------------|---|---|------------------------------------|--|---|
| | | | | | Facility ID# | | |
| | | (Enter name) | Staff Type. (Please select from: Employee HCP (Staff on facility payroll), Non-Employee HCP (Licensed independent practitioners), Adult students/trainees & volunteers, Other Contract Personnel) | Vaccinated with Dose 1. (Enter verified date of vaccination 1) | Dose 2. (Enter date of verified | ls Primary COVID-19 Vaccination Series Complete? (Please select YES/NO for red cells) | Declined Primary DOVID-19 Vaccination Series, onsidered NOT Up to Date. (Enter late of leclination) |
| | | | | | | | |
| | | | | | | | |

| I | J | K | L | М | N |
|----------------------|--------------|---|---|------------------------------|--|
| | | | | | |
| Vaccination Date(s)? | Booster Dose | Contraindication o Exemption Noted, considered NOT up to date. e.g. anaphylaxis (Enter date of | Is "Up to Date" per CDC with all recommended COVID-19 vaccine doses (primary series, boosters, additional doses)? (Please enter YES/NO for red cells) | dditional Comment (Optional) | Follow-up Needed? (Optional. Please enter YES/NO; If completed, enter date of follow up) |
| | | | | | |
| | | | | | |



| FRACKING WORKSHEET | |
|--|-------------------|
| Facility ID#: | |
| /accination type: | COVID-19 |
| Date Last Modified: | 10/26/2022 |
| Cumulative Vaccination Coverage for Employee HCP (Staff on facility payroll) | |
| | All Staff (Total) |
| Only dose 1 of COVID-19 vaccine | 0 |
| 2 doses of COVID-19 vaccine | 0 |
| Completed Primary COVID-19 vaccine series | 0 |
| viedical contraindication or exemption to COVID-19 vaccine, e.g. anaphylaxis. Does not include statt deterring due to acute medical | 0 |
| Offered but declined COVID-19 vaccine (NOTE: this DOES include residents deferring due to acute medical illness) | 0 |
| COVID 19 vaccination status could not be determined | 0 |
| complete primary series vaccine who have received any (monovalent) pooster(s) or additional dose(s) of COVID-19 vaccine since | 0 |
| Complete primary series vaccine who have received updated (bivalent) booster | 0 |
| Cumulative number of staff with complete primary series vaccine who are up-to-date with COVID-19 vaccines | 0 |
| Cumulative Vaccination Coverage for Non-Employee HCP (Licensed independent practitioners) | |
| | All Staff (Total |
| Only dose 1 of COVID-19 vaccine | 0 |
| 2 doses of COVID-19 vaccine | 0 |
| Completed Primary COVID-19 vaccine series | 0 |
| viedical contraindication or exemption to COVID-19 vaccine, e.g. anaphylaxis. Does not include statt deterring due to acute medical | 0 |
| llasse | 0 |
| Upose Offered but declined COVID-19 vaccine (NOTE: this DOES include residents deferring due to acute medical illness) | • |
| COVID 19 vaccination status could not be determined | 0 |
| COVID 19 vaccination status could not be determined Complete primary series vaccine who have received any (monovalent) booster(s) or additional dose(s) of COVID-19 vaccine since | |
| COVID 19 vaccination status could not be determined | 0 |



Audience Question: What is the best data tracking practice for reporting staff vaccination totals on the CDPH 123 daily survey?

A. Use memory when reporting

B. Use a central spreadsheet (Excel, Google sheets) to track data for reporting

C. Use paper logs to track data for reporting

D. Someone else tracks and I report based on what they tell me



Key Takeaways



Key Takeaways

- Remember the best practices for data management
- Common issues that lead to poor data quality: timeliness, accuracy, completeness, integrity, reliability, and data use
- Include data management and surveillance data reporting in your IP Orientation & Checklist
- Report NEW COVID-19 related deaths at your facility under COVID-19 deaths for residents/staff or facility personnel with suspected or laboratory positive COVID-19
- Remember to apply the current up to date definition per CDC when reporting residents and staff who are up to date on COVID-19 vaccines at your facility
 - An up to date person should be counted on the survey every week
- Use the COVID-19 Vaccine Tracker Templates to organize your facility vaccine data in one place for resident and staff



For additional assistance:

- If you have access issues regarding the CDPH 123 weekly or daily survey please contact CDPH at: <u>COVID-19SNFSURVEY@cdph.ca.gov</u>
- If you have questions regarding the CDPH 123 weekly or daily survey please contact DPH at <u>COVID-LTC-Test@ph.lacounty.gov</u>



Questions



