The National Healthcare Safety Network (NHSN) Manual

2025 Healthcare Personnel Vaccination Module Protocol: Influenza Vaccination Summary

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1. Introduction to Healthcare Personnel Safety Component

In recent years, occupational hazards faced by healthcare personnel (HCP) in the United States have received increasing attention. Although recommendations, guidelines, and regulations to minimize HCP exposure to such hazards have been developed, additional information is needed to improve HCP safety. In particular, existing surveillance systems are often inadequate to describe the scope and magnitude of occupational exposures to infectious agents and noninfectious occupational hazards that HCP experience, the outcomes of these exposures and injuries, and the impact of preventive measures. The lack of ongoing surveillance of occupational exposures, injuries, and infections in a national network of healthcare facilities using standardized methodology also compromises the ability of the Centers for Disease Control and Prevention (CDC) and other public health agencies to identify emerging problems, to monitor trends, and to evaluate preventive measures.

The Healthcare Personnel Safety (HPS) Component of the National Healthcare Safety Network (NHSN) was launched in 2009. The component consists of two modules: 1) Healthcare Personnel Exposure; and (2) Healthcare Personnel Vaccination. The exposure module includes: Blood/Body Fluid Exposure Only; Blood/Body Fluid Exposure with Exposure Management; and Influenza Exposure Management. The Healthcare Personnel Vaccination Modules, include: Influenza Vaccination Summary and COVID-19 Vaccination Summary.

Data collected in this surveillance system will assist healthcare facilities, HCP organizations, and public health agencies to monitor and report trends in blood/body fluid exposures, to assess the impact of preventive measures, to characterize antiviral medication use for exposures to influenza, and to monitor influenza vaccination coverage among HCP. In addition, this surveillance component will allow CDC to monitor national trends, to identify newly emerging hazards for HCP, to assess the risk of occupational infection, and to evaluate measures, including engineering controls, work practices, protective equipment, and post-exposure prophylaxis designed to prevent occupationally-acquired infections. Hospitals and other healthcare facilities will benefit by receiving technical support and standardized methodologies, including a Web-based application, for conducting surveillance activities on occupational health. The NHSN reporting application will enable facilities to analyze their own data and compare these data with a national database.

2. Healthcare Personnel Safety Monthly Reporting Plan

For the Influenza Vaccination Module, the monthly reporting plan (MRP) is no longer required to complete beginning with the 2022-2023 influenza season. Instead, upon saving or uploading data, users will agree to the following: (1) The data reported are consistent with definitions outlined in NHSN surveillance protocols (including tables of instructions and frequently asked questions) and (2) The data will be sent to the Centers for Medicare and Medicaid Services (CMS) to fulfill CMS quality reporting requirements (when applicable).

3. Healthcare Personnel Vaccination Module: Influenza Vaccination Summary

Introduction

The Advisory Committee on Immunization Practices (ACIP) recommends that all persons six months of age and older, including HCP and persons in training for healthcare professions, should be vaccinated annually against influenza. [1,2] Persons infected with influenza virus, including those who are pre-symptomatic, can transmit the virus to coworkers and patients, some of whom may be at higher risk for complications from influenza. Vaccination of working age adults, including HCP, has been associated with reduced risk of influenza illness, and reduced work absenteeism, antibiotic use, and medical visits [3,4]. In addition, HCP influenza vaccination has reduced deaths among nursing home patients [5,6] and elderly hospitalized patients. [6] Annual vaccination is recommended for all HCP and is a high priority for reducing morbidity associated with influenza in healthcare settings. National survey data have demonstrated that HCP influenza vaccination coverage levels are approximately 80% [7], falling short of the Healthy People 2020 target of 90% for HCP influenza vaccination [8]. HCP influenza vaccination varies substantially by provider type and healthcare setting. [7]

Healthcare facilities should provide influenza vaccine to HCP using approaches that have demonstrated effectiveness in increasing vaccination coverage. [1, 2] Healthcare administrators should consider the level of vaccination coverage among HCP to be one measure of a patient safety quality program and consider obtaining signed declinations from personnel who decline influenza vaccination for reasons other than medical contraindications. [2; 9-12] Influenza vaccination rates (including ward-, unit-, and specialty-specific coverage rates) among HCP within facilities should be regularly measured and reported to facility administrators and staff. [2,12]

Healthcare facilities should offer influenza vaccinations to all eligible HCP, [2] including part-time and temporary staff. Efforts should be made to educate HCP on the benefits of vaccination and the potential health consequences of influenza illness for their patients, themselves, and their family members [2]. Studies have demonstrated that organized campaigns can attain higher rates of vaccination among HCP with moderate effort and by using strategies that increase vaccine acceptance [9,13,14]. All HCP should be provided convenient access to influenza vaccine at the work site, free of charge. [9,14]

HCP Influenza Vaccination Measure

The HCP influenza vaccination measure is designed to ensure that reported HCP influenza vaccination percentages are consistent over time within a single healthcare facility and comparable across facilities. Using this measure to monitor influenza vaccination among

HCP may also result in increased influenza vaccination uptake among HCP, because improvements in tracking and reporting HCP influenza vaccination status will allow healthcare institutions to better identify and target unvaccinated HCP. Increased influenza vaccination coverage among HCP is expected to result in reduced morbidity and mortality related to influenza virus infection among patients. The HCP Vaccination Module of the HPS Component will allow NHSN users to report HCP influenza vaccination data using this HCP influenza vaccination measure.

Settings

All types of healthcare facilities including acute care hospitals, long-term acute care facilities, inpatient psychiatric facilities (IPFs), inpatient rehabilitation facilities (IRFs), outpatient dialysis centers, ambulatory surgery centers, and long-term care facilities are invited to join NHSN and use the measure.

CMS-certified free-standing acute care facilities, inpatient rehabilitation facilities, critical access hospitals, long-term acute care facilities, prospective payment system (PPS)-exempt cancer hospitals, and skilled nursing facilities (SNFs) are required to report HCP influenza vaccination summary data through NHSN.

IRF units located within acute care facilities, long-term acute care facilities, critical access hospitals, and inpatient psychiatric facilities are also required to report HCP influenza vaccination data through NHSN.

Requirements

Participating facilities are required to report data according to this protocol, using the NHSN definitions described herein, to ensure data are uniformly reported across facilities.

CDC/NHSN encourages that HCP influenza vaccination summary data be updated on a monthly basis and suggests that healthcare facilities update data within 30 days of the end of each month (for example, all October data should be added by November 30) so they have the greatest impact on influenza vaccination activities. However, entering a single influenza vaccination summary report at the conclusion of the measure reporting period will meet the minimum data requirements for NHSN participation.

Reporting Instructions

Forms, Description, and Purpose

All facilities using the HCP Vaccination Module for HCP influenza vaccination summary data reporting must complete the Healthcare Personnel Influenza Vaccination Summary form in the HPS Component. In addition, dialysis centers that do not provide in-center hemodialysis are also required to complete the Home Dialysis Center Practices survey.

- *Healthcare Personnel Influenza Vaccination Summary Form* (CDC 57.214): [57.214 HCP Influenza Vaccination Summary Form (cdc.gov)].
  This is used to collect data on summary influenza vaccination counts among HCP working in a facility. HCP influenza vaccination summary reporting in NHSN consists of a single data entry screen per influenza season. Each time a user enters updated data for a particular influenza season, all previously entered data for that season will be overwritten and a new modified date will be auto-filled by the system. When entering data, all required fields indicated with an asterisk must be completed. Otherwise, the data cannot be saved. Users should enter "0" in a field if no HCP at the facility fall into that category.

    - Instructions for completing the data collection form: HCP Influenza Vaccination Summary Form TOI August 2022 (cdc.gov)

- *Home Dialysis Center Practices Survey* (CDC 57.507)
  [57.507 Home Dialysis Survey (cdc.gov)]
  Dialysis centers that do not provide in-center hemodialysis are required to complete the Home Dialysis Center Practices Survey before they can enter the HCP influenza vaccination summary data into NHSN. This survey captures information about various topics such as surveillance practices, vaccination, and vascular access.

    - Instructions for completing the data collection form: 57.507 Home Dialysis Survey Table of Instructions (cdc.gov)

- The *Seasonal Survey on Influenza Vaccination Programs for Healthcare Personnel* (CDC 57.215) [Healthcare Personnel Safety Component Seasonal Survey (cdc.gov)] is not required at this time. The survey collects data on types of personnel groups that are included in a facility's annual influenza vaccination campaign, methods a facility is using to deliver influenza vaccine to its HCP, strategies a facility uses to

promote/enhance HCP influenza vaccination, etc. Facilities are encouraged to complete one survey at the end of the influenza season.

- Instructions for completing the data collection form: Healthcare Personnel Safety Seasonal TOI_June2020 (cdc.gov)

Measure Specifications

Denominator

The denominator for this measure consists of HCP who are physically present in the healthcare facility for at least 1 working day between October 1 through March 31 of the following year. Denominators are to be calculated separately for three required categories of HCP and can also be calculated for a fourth optional category:

a. Employees (required): This includes all persons receiving a direct paycheck from the reporting facility (i.e., on the facility's payroll), regardless of clinical responsibility or patient contact.

b. Licensed independent practitioners (LIPs) (required): This includes physicians (MD, DO), advanced practice nurses, and physician assistants who are affiliated with the reporting 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 if they are not on the facility's payroll.

c. Adult students/trainees and volunteers (required): This includes medical, nursing, or other health professional students, interns, medical residents, or volunteers aged 18 or older 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.

d. Other contract personnel (optional): Contract personnel are defined as persons providing care, treatment, or services at the facility through a contract who do not fall into any of the other denominator categories. (See Appendix A for a list of contract personnel examples.) Reporting for this category is optional.

Denominator Notes

1. The denominator includes HCP who worked at the facility for at least 1 working day from October 1 through March 31 during the reporting period, regardless of clinical responsibility or patient contact. This includes HCP who joined after October 1 or left before March 31, or who were on extended leave during part of the reporting period. Working for any number of hours a day counts as one working day.

2. Both full-time and part-time personnel should be included. HCP should be counted as individuals rather than full-time equivalents. If a healthcare worker (HCW) works in two or more facilities, each facility should include the HCW in their denominator data.

3. Licensed practitioners who receive a direct paycheck from the reporting facility, or who are owners of the reporting facility, should be counted as employees.

4. The denominator categories are mutually exclusive. The numerator data are to be reported separately for each of the denominator categories.

Numerator

The numerator for this measure consists of HCP in the denominator population, who fall into one of the categories below. HCP should be counted as vaccinated if they receive influenza vaccine any time from when it first became available, such as August or September, through March 31 of the following year:

a. received an influenza vaccination administered at the healthcare facility; or

b. reported in writing (paper or electronic) or provided documentation that influenza vaccination was received elsewhere; or

c. were determined to have a medical contraindication/condition of severe allergic reaction to eggs or other component(s) of the vaccine, or history of Guillain-Barré Syndrome (GBS) within 6 weeks after a previous influenza vaccination; or

d. were offered but declined influenza vaccination; or

e. had an unknown vaccination status or did not otherwise meet any of the definitions of the other numerator categories.

Numerator Notes

1. Persons who declined vaccination because of conditions other than those specified in category (c) above should be categorized as declined vaccination.*

2. Persons who declined vaccination and did not provide any other information should be categorized as declined vaccination.

3. Persons who did not receive vaccination because of religious or philosophical exemptions should be categorized as declined vaccination.

4. Persons who deferred vaccination all season should be categorized as declined vaccination.

5. The numerator data are mutually exclusive. The sum of the numerator categories should be equal to the denominator for each HCP group.

*Note: For the purposes of this measure, a medical contraindication to vaccination with is defined as having a severe allergic reaction to eggs or other components of the influenza vaccine or a history of GBS within 6 weeks after a previous influenza vaccination. A healthcare facility may grant medical exemptions to HCP with other conditions besides those defined for this measure and may include these conditions in its list of acceptable medical contraindications to influenza vaccination. However, to ensure that data are comparable across different facilities reporting data using this measure, only those HCP with one of the two conditions stated above should be reported to NHSN as having a medical contraindication to influenza vaccination.

Data Sources

Data sources for the required data elements include management/personnel data, medical or occupational health records, and vaccination records. HCP can self-report in writing (paper or electronic) that the vaccination was received elsewhere or provide documentation of receipt of the influenza vaccine elsewhere. Documentation should include the date and location of vaccine receipt. For this reporting measure, verbal statements are not acceptable proof of vaccination outside the facility. However, HCP can provide verbal statements for medical contraindications to and declination of the influenza vaccine, as written documentation is not required for NHSN reporting.

Methodology

The influenza vaccination summary data reporting enables a healthcare facility to record influenza vaccination data for HCP working in the healthcare facility for at least 1 day from October 1 through March 31. Data must be entered for the three denominator

categories of HCP groups and the five numerator fields describing vaccination status. A fourth denominator category for other contract personnel is optional.

This module requires that data be collected as per CDC reporting requirements. Data covering the entire denominator reporting period (October 1 through March 31) must be entered once into NHSN for each reporting year. The data can be entered on a monthly and/or quarterly basis, but only cumulative data should be entered. Any new data that are entered into NHSN will overwrite previously entered data. Thus, if a facility would like to keep track of its monthly numbers, it should maintain its own record of monthly summary reports as it will not be able to review previously entered data in NHSN.

Data Analyses

Influenza vaccination status is calculated separately among each of the three required denominator categories: employees, LIPs, and adult students/trainees and volunteers. Influenza vaccination status can also be calculated for the fourth optional category of other contract personnel using the modify option within the analysis function. Separate

measures are calculated by dividing the number of HCP in one numerator field (for example, number of HCP who received an influenza vaccination at this healthcare facility since influenza vaccine became available this season) by the number of HCP in that denominator group, and multiplying by 100 to produce a vaccination percentage for that specific group. Percentages of vaccination received elsewhere, medical contraindications, declinations, and unknown vaccination status can also be calculated using the second, third, fourth, and fifth numerator fields, respectively. Calculations for employee vaccination percentages are shown below. Vaccination percentages for LIPs, adult students/trainees and volunteers, and other contract personnel are calculated in the same manner.

Since February 2024, timestamps in the NHSN application have displayed Coordinated Universal Time (UTC). UTC is the international time standard. UTC serves as a uniform and universal reference to measure time across all time zones. UTC has been implemented as part of ongoing NHSN system upgrades and modernization efforts.

Employee Vaccination Percentages

Employee Vaccination Percentage (at this healthcare facility)

$$\frac{\text{\# Employees vaccinated onsite}}{\text{Employees Vaccinated Onsite}} \times 100 = \text{Pct. of Employees Vaccinated onsite}$$

Employee Vaccination Percentage (outside this healthcare facility)

$$\frac{\text{\# Employees vaccinated elsewhere}}{\text{\# Employees working in the required time period}} \times 100 = \text{Pct. of Employees Vaccinated elsewhere}$$

Employee Medical Contraindication percentage

$$\frac{\text{\# Employees reporting contraindication}}{\text{\# Employees working in the required time period}} \times 100 = \text{Pct. of Employees Reporting Contraindication}$$

Employee Declination Percentage

$$\frac{\text{\# Employees declined vaccine}}{\text{\# Employees working in required time period}} \times 100 = \text{Pct. of Employees Reporting Declination}$$

Employee Unknown Vaccination Percentage

$$\frac{\text{\# Employees with unknown vaccination}}{\text{\# Employees working in required time period}} \times 100 = \text{Pct. Employees with Unknown Status}$$

HCP Vaccination Percentages

In addition to calculating vaccination percentages for individual denominator groups, percentages can be calculated for all HCP (both employees and non-employees). Percentages can also be calculated including the optional category of contract personnel using the modify option within the analysis function. To determine vaccination for all

HCP, the system will add the total number of HCP (employees, LIPs, and adult students/trainees and volunteers) in one numerator field (for example, total number of HCP who received an influenza vaccination at this healthcare facility since influenza vaccine became available this season). The number is divided by the total number of HCP who worked at this healthcare facility for at least 1 working day from October 1 through March 31, and multiplied by 100 to produce a vaccination percentage for that HCP group. Percentages of vaccination received elsewhere, medical contraindications, declinations, and unknown vaccination status can also be calculated using the second, third, fourth, and fifth numerator fields, respectively. Calculations for total HCP vaccination percentages are shown below. The second calculation in this section shows how an onsite vaccination

percentage is computed for all facility HCP including other contract personnel (OCP). Other vaccination percentages for all HCP including OCP are computed in the same manner as the other calculations in this section.

HCP Vaccination Percentage (at this healthcare facility) [excluding OCP]

$$\frac{\text{\# Employees + \# LIPs + \# ASTV vaccinated onsite}}{\text{\# Employees + \# LIPs + \# ASTV working in the required time period}} \times 100 \text{ Pct. of HCP Vacc. Onsite (exc. OCP)}$$

HCP Vaccination Percentage (at this healthcare facility) [including OCP]

$$\frac{\text{\# Employees + \# LIPs + \# ASTV + \# OCP vaccinated onsite}}{\text{\# Employees + \# LIPs + \# ASTV + \# OCP working in the required time period}} \times \text{Pct. of HCP Vacc. Onsite (inc. OCP)}$$

HCP Vaccination Percentage (outside this healthcare facility) [excluding OCP]

$$\frac{\text{\# Employees + \# LIPs + \# ASTV vaccinated elsewhere}}{\text{\# Employees + \# LIPs + \# ASTV working in the required time period}} \times \text{Pct. of HCP Vacc. Elsewhere (exc. OCP)}$$

HCP Medical Contraindication Percentage [excluding OCP]

$$\frac{\text{\# Employees + \# LIPs + \# ASTV reporting contraindication}}{\text{\# Employees + \# LIPs + \# ASTV working in the required time period}} \times 100 = \text{Pct. of HCP Reporting Contra. (exc. OCP)}$$

Declination Percentage [excluding OCP]

$$\frac{\text{\# Employees + \# LIPs + \# ASTV declined vaccine}}{\text{\# Employees + \# LIPs + \# ASTV working in the required time period}} \times 100 = \text{Pct. of HCP Reporting Declination (exc. OCP)}$$

HCP Unknown Vaccination Percentage [excluding OCP]

$$\frac{\text{\# Employees + \# LIPs + \# ASTV with unknown status}}{\text{\# Employees + \# LIPs + \# ASTV working in the required time period}} \times 100 = \text{Pct. of HCP with Unknown Status (exc. OCP)}$$

Non-Employee Vaccination Percentages

Vaccination percentages can be calculated for all non-employees (LIPs and adult students/trainees and volunteers). Percentages can also be calculated including the optional category of OCP using the modify option within the analysis function. To determine vaccination for all non-employees, the system will add the total number of non-employee HCP (LIPs and adult students/trainees and volunteers) in one numerator field (for example, number of HCP who received an influenza vaccination at this healthcare facility since influenza vaccine became available this season). The number is divided by the total number of HCP who worked at this healthcare facility for at least 1 working day from October 1 through March 31, and multiplied by 100 to produce a vaccination percentage for that group of non-employees. Percentages of vaccination received elsewhere, medical contraindications, declinations, and unknown vaccination status can also be calculated using the second, third, fourth, and fifth numerator fields, respectively. Calculations for non-employee vaccination percentages are shown below. The second calculation in this section shows how a percentage is computed for OCP.

Non-Employee Vaccination Percentage (at this healthcare facility) [excluding OCP]

$$\frac{\text{\# Employees + \# LIPs + \# ASTV with unknown status}}{\text{LIPs + \# ASTV working in the required time period}} \times 100 = \text{Pct. of Non-Employees Vacc. Onsite (exc. OCP)}$$

Non-Employee Vaccination Percentage (outside this healthcare facility) [excluding OCP]

$$\frac{\text{\# LIPs + \# ASTV vaccinated elsewhere}}{\text{\# LIPs + \# ASTV working in the required time period}} \times 100 = \text{Pct. of Non-Employees Vacc. Elsewhere (exc. OCP)}$$

Non-Employee Medical Contraindication Percentage [excluding OCP]

$$\frac{\text{\# LIPs + \# ASTV reporting contraindication}}{\text{\# LIPs + \# ASTV working in the required time period}} \times 100 = \text{Pct. of Non-Employees Reporting Contra. (exc. OCP)}$$

Non-Employee Declination Percentage [excluding OCP]

$$\frac{\text{\# LIPs + \# ASTV declined vaccine}}{\text{\# LIPs + \# ASTV working in the required time period}} \times 100 = \text{Pct. of Non-Employees Reporting Declination (exc. OCP)}$$

Non-Employee Unknown Vaccination Percentage [excluding OCP]

$$\frac{\text{\# LIPs + \# ASTV with unknown vaccination}}{\text{\# LIPs + \# ASTV working in the required time period}} \times 100 = \text{Pct. of Non-Employees with Unknown Status (exc. OCP)}$$

Vaccination Compliance

To determine vaccination compliance, the system will add the total number of HCP who received an influenza vaccination at this healthcare facility to the total number of HCP who provided a written report or documentation of influenza vaccination outside this healthcare facility since influenza vaccine became available this season. The number is divided by the total number of HCP who worked at this healthcare facility for at least 1 working day from October 1 through March 31. This number is then multiplied by 100 to obtain a percentage. Percentages can also be calculated including the optional category of other OCP using the modify option within the analysis function. Calculations for employee vaccination compliance, HCP vaccination compliance, and non-employee vaccination compliance percentages are shown below. Vaccination compliance percentages for LIPs, adult students/trainees and volunteers, and other contract personnel are calculated in the same manner.

Employee Vaccination Compliance Percentage

$$\frac{\text{\# Employees vaccinated onsite + \# Employees vaccinated elsewhere}}{\text{\# Employees working in the required time period}} \times 100 = \text{Pct. of Employee Vacc. Compliance}$$

HCP Vaccination Compliance Percentage [excluding OCP]

$$\frac{\text{(\# Emp. + \# LIPs + \# ASTV vacc. onsite) + (\# Emp. + \# LIPs + \# ASTV vacc. elsewhere)}}{\text{\# Emp. + \# LIPs + \# ASTV working in the required time period}} \times 100 = \text{Pct. of HCP Vacc. Comp. (exc. OCP)}$$

HCP Vaccination Compliance Percentage [including OCP]

$$\frac{\text{(\# Emp. + \# LIPs + \# ASTV + \# OCP vacc. onsite) + (\# Emp. + \# LIPs + \# ASTV + \# OCP vacc. elsewhere)}}{\text{\# Emp. + \# LIPs + \# ASTV + \# OCP working in the required time period}} \times \text{Pct. of HCP Vacc. Comp. (inc. OCP)}$$

Non-Employee Vaccination Compliance Percentage [excluding OCP]

$$\frac{\text{(\# LIPs + \# ASTV vacc. onsite) + (\# LIPs + \# ASTV vacc. elsewhere)}}{\text{\# LIPs + \# ASTV working in the required time period}} \times 100 = \text{Pct. of Non-Employee Vacc. Comp. (exc. OCP)}$$

Non-Employee Vaccination Compliance Percentage [including OCP]

$$\frac{\text{(\# LIPs + \# ASTV + \# OCP vacc. onsite) + (\# LIPs + \# ASTV + \# OCP vacc. elsewhere)}}{\text{\# LIPs + \# ASTV + \# OCP working in the required time period}} \times \text{Pct. of Non-Employee Vacc. Comp. (inc. OCP)}$$

Vaccination Non-Compliance

To determine vaccination non-compliance, the system will add the total number of HCP who declined to receive the influenza vaccination to the total number of HCP with unknown vaccination status. The number is divided by the total number of HCP who worked at this healthcare facility for at least 1 working day between October 1 through March 31. This number is then multiplied by 100 to obtain a percentage. Percentages can also be calculated including the optional category of OCP using the modify option within the analysis function. Calculation for employee vaccination non-compliance, HCP vaccination non-compliance, and non-employee vaccination non-compliance percentages

are shown below. Vaccination non-compliance percentages for LIPs, adult students/trainees and volunteers, and OCP are calculated in the same manner.

Employee Vaccination Non-Compliance Percentage

$$\frac{\text{\# Employees declined vacc. + \# Employees with unknown status}}{\text{\# Employees working in the required time period}} \times \text{Pct. of Non-Employee Vacc. Comp. (inc. OCP)}$$

HCP Vaccination Non-Compliance Percentage [excluding OCP]

$$\frac{\text{(\# Emp. + \# LIPs + \# ASTV declined vacc.) + (\# Emp. + \# LIPs + \# ASTV with unknown status)}}{\text{\# Emp. + \# LIPs + \# ASTV working in the required time period}} \times 100 = \text{Pct. of HCP Vacc. Non-Comp. (exc. OCP)}$$

HCP Vaccination Non-Compliance Percentage [including OCP]

$$\frac{\text{(\# Emp. + \# LIPs + \# ASTV + \# OCP dec. vacc.) + (\# Emp. + \# LIPs + \# ASTV + \# OCP with unknown status)}}{\text{\# Emp. + \# LIPs + \# ASTV + \# OCP working in the required time period}} \times 100 = \text{Pct. of HCP Vacc. Non-Comp. (inc. OCP)}$$

Non-Employee Vaccination Non-Compliance Percentage [excluding OCP]

$$\frac{\text{(\# LIPs + \# ASTV declined vacc.) + (\# LIPs + \# ASTV with unknown status)}}{\text{\# LIPs + \# ASTV working in the required time period}} \times 100 = \text{Pct. of Non-Employee Vacc. Non-Comp. (exc. OCP)}$$

Non-Employee Vaccination Non-Compliance Percentage [including OCP]

$$\frac{\text{(\# LIPs + \# ASTV + \# OCP declined vacc.) + (\# LIPs + \# ASTV + \# OCP with unknown status)}}{\text{\# LIPs + \# ASTV + \# OCP working in the required time period}} \times 100 = \text{Pct. of Non-Emp. Vacc. Non-Comp. (inc. OCP)}$$

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Appendix A

Influenza Vaccination Summary: List of Contracted and Vendor Healthcare Personnel

Examples
The list below includes examples of contracted and vendor healthcare personnel (HCP) who provide direct patient care and who perform non-direct or non-patient care duties. HCP listed below can acquire influenza from or transmit influenza to patients, families, and other staff members. This list is not exhaustive.

Contracted and vendor HCP can include the following non-employee care providers who may or may not be involved in patient care:

- Admitting staff/clerical support/registrars
- Agency nurses
- Ambulance drivers (who enter the facility to assist with transportation)
- Biomedical engineers
- Central supply staff
- Chaplains
- Construction workers (working inside the facility)
- Dietary/food service staff
- Dieticians
- Dialysis technicians
- EKG technicians
- EMG technicians
- Home health aides
- Housekeeping staff
- Information Technology staff
- Laboratory: Phlebotomists
- Laboratory: Technicians
- Landscapers (working inside the facility)
- Laundry staff
- Maintenance staff/engineers
- Nursing aides
- Occupational therapists
- Patient care technicians
- Patient transporters
- Pharmacists
- Pharmacy/medication technicians
- Physical therapists

- Psychologists
- Psychology technicians/Mental health workers
- Radiology: X-ray technicians
- Recreational therapists/Music therapists
- Respiratory therapists
- Security staff
- Social workers/Case managers
- Speech therapists
- Surgical technicians
- Traveling nurses
- Ultrasound technicians
- Utilization review nurses