

## Frequently Asked Questions on COVID-19 Vaccination Tracking and Reporting in Long-term Care Facilities (LTCFs)

*Updates to the FAQ are noted in red.*

### Q: How often do I need to report COVID-19 vaccination data to OHA?

A: For community-based care facilities, OHA has updated the frequency of reporting from weekly to a monthly cadence. Vaccination data for the first week of the month (1<sup>st</sup> Monday through Sunday) should be collected and the survey will open once that week ends. Facilities have until the last day of the month to submit the survey.

For example, the survey for July will open on Monday, 7/10. Facilities will be asked to submit data for residents and staff for the week of 7/3 – 7/9. The July survey will close on 7/31.

Nursing facilities are subject to federal requirements and are still required to report on a weekly basis.

### Q: What questions have been updated on the OHA Reporting Survey?

A: To align with federal reporting, OHA has updated the survey questions to ask about summary counts of staff and residents who are up to date. Questions about primary vaccine series and booster doses have been removed.

Updated questions are noted in the table below. Required fields are noted with a red asterisk.

Data Fields for the OHA Reporting Survey
Select Week of Reporting (Monday through Sunday)
Weekly Summary for HCP/Residents
1. Number of HCP/Residents working in this facility for at least 1 day during the week of data collection*
2. Number of HCP/Residents who are up to date with COVID-19 vaccine (received 2023-2024 updated COVID-19 vaccine) *
3. Number of HCP/Residents in Question #1 with other conditions:
<ul style="list-style-type: none"> <li>Medical contraindication to COVID-19 vaccine*</li> <li>Offered but declined COVID-19 vaccine</li> <li>Unknown/other COVID-19 vaccination status</li> </ul>

### Q: Who is considered 'up to date' for COVID-19 vaccination?

A: The current definition for 'up to date' is receiving the 2023-2024 updated COVID-19 vaccine, or the bivalent vaccine in the last two months. The definition no longer includes receipt of the original monovalent vaccine or individuals who received the bivalent vaccine more than two months ago. This surveillance definition has been updated as of reporting for the week of September 25, 2023. See the CDC website for additional information: <https://www.cdc.gov/coronavirus/2019-ncov/vaccines/stay-up-to-date.html>

OHA has also provided a document with frequently asked questions about the new 2023-2024 COVID-19 vaccine which can be found here: <https://sharesystems.dhsoha.state.or.us/DHSForms/Served/LE-354004.pdf>

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**Q: What has been changed on the new LTCF tracking tools?**

A: To align with the removal of vaccine questions, we have simplified the tracking tools to document receipt of the 2023-2024 updated COVID-19 vaccine to calculate 'up to date' status for residents and staff. Additionally, to assist nursing facilities who report into NHSN we also continue to capture completion of the primary vaccine series for staff.

The WeeklySummary sheet has been updated to reflect the new questions for the OHA reporting survey.

Updated tracking tools are available here:

[Resident COVID-19 Vaccine Tracking Tool](#)

[Staff COVID-19 Vaccine Tracking Tool](#)

In addition, we have a COVID-19 and influenza tracking sheet for staff to assist facilities in tracking both vaccination data for reporting to OHA (assisted living and residential care facilities are not required to report influenza vaccination data).

Staff COVID-19 and Influenza Vaccine Tracking Tool:

<https://www.oregon.gov/oha/covid19/Documents/COVID-19-and-Influenza-Vaccine-Tracking-Sheet-Staff.xlsx>

**Q: If I have already been using the Vaccine Tracking Tools, how should I transfer my data over to utilize the new tools?**

A: To transfer the data from the older tracking tool, copy the data from each column that you want to retain on the tracking worksheet and paste it as values in the new tool. For example, you can copy the data from Columns B through E and the columns about completing the primary vaccine series. Avoid deleting any rows on the tracking worksheet as errors may result. For tips on pasting options in Excel, refer [here](#).

**Q: Why is vaccine tracking in LTCFs important?**

A: There are two important components to vaccine tracking in LTCFs: 1) individual tracking of resident and HCP vaccine status by facilities, and 2) reporting summary vaccine data to the Oregon Health Authority (OHA). It is important for facilities to track individual vaccine status of their residents and HCP to inform outbreak response and infection control strategies, and identify key outcomes of public health concern, such as vaccine breakthrough infections. Additionally, OHA needs vaccine information from facilities to rapidly support and inform public health response activities, inform facility infection control policies, track facility- and state-level progress towards vaccination goals.

**Q: How do I use the Vaccine Tracking Tools?**

A: OHA has provided Vaccine Tracking Tools to help facilities collect vaccination data for residents and HCP prior to reporting. To use these tools, facilities should enter individual-level information for all residents and HCP on the "TrackingWorksheet" tab. The tools will auto-calculate useful summary metrics to assess your facility's vaccination progress and assist with reporting to OHA.

OHA is asking for facilities to report the summary counts (cells highlighted in red) on the "WeeklySummary" sheet on the Vaccine Tracking Tools. Facilities will not have to report any data on the

“TrackingWorksheet” sheet to OHA. The forms on the OHA Reporting Survey are organized in the same format and include the exact question language on the Vaccine Tracking Tools to assist with reporting.

**Q: If a resident or staff is vaccinated outside of the facility, is there documentation needed as vaccination proof? If so, what types are acceptable?**

A: Staff and residents receiving vaccination elsewhere should provide documentation of vaccination, which includes vaccine type. Documentation provided by a tribal, federal, state or local government, or a health care provider, that includes an individual’s name, date of birth, type of COVID-19 vaccination given, date or dates given, depending on whether it is a one-dose or two-dose vaccine, and the name/location of the health care provider or site where the vaccine was administered. Documentation may include but is not limited to a COVID-19 vaccination record card or a copy or digital picture of the vaccination record.

**Q: There are multiple licensed facilities on my campus, including an assisted living and skilled nursing facility. Should I be tracking and reporting data for these licensed facilities separately?**

A: Yes, each licensed facility should be tracked and reported separately, even if they are on the same campus.

**Q: How are HCP defined?**

A: HCP includes all staff working in your facility. This should include employees and non-employees such as contracted staff, students, trainees, and volunteers. For instructions on determining HCP counts and categories, please refer [here](#).

To assist with weekly reporting, CMS and NHSN have provided a more detailed definition of HCP which we are following: individuals who work in a facility on a regular basis (at least once a week), including individuals who may not be physically in the facility for a period of time due to illness, disability, or scheduled time off, but who are expected to return to work. This also includes individuals under contract or arrangement, including hospice and dialysis staff, physical therapists, occupational therapists, mental health professionals, or volunteers, who are in a facility on a regular basis.

**Q: There is an independent living facility on my campus. Should I be tracking independent living residents and HCP?**

A: OHA is not asking facilities to track and report these data for independent living residents and HCP. However, the Vaccine Tracking Tools can be used for internal tracking of vaccine information for these types of facilities.

**Q: If there are HCP who work in multiple facilities, how should they be counted?**

A: If HCP work in two or more facilities, each facility should include these HCP in their tracking worksheet and their denominator counts. This will allow for accurate calculation of vaccination rates that include all HCP working in each facility.

**Q: Should only vaccinated residents and HCP be included on the Vaccine Tracking Tools?**

A: No, all residents and HCP in your facility should be included, even if they did not receive any COVID-19 vaccine. There are options to document whether a resident or HCP had a medical contraindication or declined vaccination. Including all HCP and residents, regardless of their vaccination status, ensures that the correct denominator is used to calculate vaccination rates.

**Q: Do the weekly summary counts include any HCP who are eligible to work in the facility regardless of their physical presence in the building during the week of reporting?**

A: Yes, include all HCP who were eligible to have worked at your facility for at least one day during the week of data collection, regardless of clinical responsibility or patient contact. This includes HCP on sick leave, maternity leave, vacation, etc., as well as those who worked full-time and part-time.

**Q: Do the weekly summary counts include only data for individuals who were vaccinated during the OHA reporting week?**

A: No, the weekly summary counts capture the total number of residents and HCP residing or eligible to work in your facility for at least one day during the week previous to the OHA reporting week (you will be reporting with a lag of one week). Of those, the counts also include how many have received COVID-19 vaccines, had a medical contraindication, or declined vaccination so far.

**Q: Is reporting of COVID-19 vaccine data to OHA required?**

A: Yes, ODHS released a new rule that requires reporting of COVID-19 vaccine data to OHA effective June 1, 2021. Long-term care facilities are required to report summary counts of total staff and residents, and vaccination status of staff and residents, including those with medical contraindications, on a weekly basis. In addition, facilities are required to report summary counts of staff and residents who have received an additional dose or booster of COVID-19 vaccine. Nursing facilities may report solely to the National Healthcare Safety Network (NHSN) to fulfill the reporting requirements. Refer to [OAR 411-061](#) for additional details on the reporting requirements.

**Q: If facilities are reporting these data to the National Healthcare Safety Network (NHSN), will that suffice for reporting to OHA?**

A: Yes, after June 13, 2021 reporting to NHSN will suffice for reporting to OHA. The Centers for Medicare and Medicaid Services (CMS) released an interim final rule on May 11, 2021 that requires weekly reporting of staff and resident COVID-19 vaccination data to NHSN for nursing facilities. Facilities must begin reporting this data to NHSN by 11:59 PM Sunday, June 13, 2021. <https://www.cms.gov/files/document/qso-21-19-nh.pdf>

**Q: Will OHA be collecting any protected health information (like name or date of birth) for residents and HCP?**

A: No, OHA will only be collecting summary data from facilities through this reporting process. No individual-level information will be collected and thus, no protected health information will be shared. OHA is asking for the minimal amount of summary data needed in order to inform policies, track vaccine progress, and identify gaps for appropriate resource allocation.

**Q: If my facility's summary data have not changed from the previous week, do I still need to submit weekly data?**

A: Yes, OHA is asking for facilities to report on a weekly basis even if summary data have not changed. No changes from the prior week means that none of the summary data fields have changed, including no changes to resident census or employment status of staff. On the Reporting Survey, you will have an option to pre-fill data from the prior week and can either submit the same summary counts if nothing has changed, or make any needed edits (for example, changes to resident and HCP census counts) before submitting data.

**Q: I am having challenges in using the Vaccine Tracking Tools, who do I reach out to for assistance?**

A: Contact Lisa Iguchi at [lisa.c.iguchi@oha.oregon.gov](mailto:lisa.c.iguchi@oha.oregon.gov) for technical assistance with the Vaccine Tracking Tools.

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