

SARS COV2 Testing ▼

TESTING AVAILABILITY: Does the LTCF have the ability to perform or to obtain resources for performing SARS-CoV-2 viral testing (NAAT [PCR] or antigen) on all residents, staff and facility personnel if needed?*

Answer "Yes" if the LTCF can perform COVID-19 viral testing, if there was a need to do so, or are able to obtain resources needed from outside sources, such as laboratories, health department, outbreak response team etc.

Yes No

CURRENT CENSUS: Total number of beds that are currently occupied.*

RESIDENTS: Do you have any new Resident COVID admissions, cases, or deaths to report? OR Do you have new resident deaths or Influenza cases to report?*

Yes No

Staff and Personnel Impact ▼

STAFF: Do you have new HCP cases or deaths to report? OR Do you have new HCP Influenza cases to report?*

Yes No

Urgent Needs ▼

Do you have an urgent staffing need over the next 48 hours?*

Yes No

Urgent Needs ▼

Do you have any urgent PPE needs in the next 48 hours?*

Yes No

RESIDENTS: Do you have any new Resident COVID admissions, cases, or deaths to report? OR Do you have new resident deaths or Influenza cases to report?*

Yes No

Resident Impact

ADMISSIONS: New residents admitted or re-admitted who were previously hospitalized and treated for COVID-19 since the last time counts were reported.*

Enter the number of residents newly admitted or readmitted to the LTCF from a hospital where they were treated for suspected or laboratory positive COVID-19. Include only newly admitted or readmitted residents since the last date these counts were entered, regardless if the resident(s) is still in the facility.

CONFIRMED: Residents with new laboratory positive COVID-19 since the last time counts were reported.*

Since the last date Confirmed Counts (laboratory positive COVID-19 test result) were entered, enter the number of residents with a new laboratory-positive COVID-19 test result, including residents who remain in the LTCF, as well as residents who were transferred out of the facility, admitted to another facility, or died.

COVID-19 DEATHS: Residents with suspected or laboratory positive COVID-19 who died in the facility or another location since the last time counts were reported.*

Since the last date COVID-19 Death Counts were entered, enter the total number of new deaths for both, residents suspected of having COVID-19 AND residents with laboratory positive COVID. This includes residents that died in the LTCF or another location.

TOTAL DEATHS: Residents who have died in the facility or another location since the last time counts were reported.*

Since the last date the Total Deaths were entered, enter the number of residents who have died for any reason in the LTCF or another location. **Note:** Include both COVID-19 related deaths AND non-COVID-19 related deaths.

INFLUENZA: Number of residents with new influenza (flu).*

Resident Impact

ADMISSIONS: New residents admitted or re-admitted who were previously hospitalized and treated for COVID-19 since the last time counts were reported.*

Enter the number of residents newly admitted or readmitted to the LTCF from a hospital where they were treated for suspected or laboratory positive COVID-19. Include only newly admitted or readmitted residents since the last date these counts were entered, regardless if the resident(s) is still in the facility.

CONFIRMED: Residents with new laboratory positive COVID-19 since the last time counts were reported.*

Since the last date Confirmed Counts (laboratory positive COVID-19 test result) were entered, enter the number of residents with a new laboratory-positive COVID-19 test result, including residents who remain in the LTCF, as well as residents who were transferred out of the facility, admitted to another facility, or died.

Vaccination Status of Residents with a Newly Confirmed SARS-CoV-2 Viral Test Result:

Not Vaccinated: Include residents who have not been vaccinated with a COVID-19 vaccine OR residents whose first dose was administered 13 days or less before the specimen collection date.*

Partial Vaccination: Include residents who have received Only 1-dose of a two-dose mRNA vaccine (for example, Moderna, PfizerBioNTech, or dose 1 of unspecified COVID-19 vaccine).*

Complete Primary Vaccination Series: Include residents who have received Dose 1 and Dose 2 of a two-dose mRNA vaccine (for example, Moderna or Pfizer-BioNTech, or dose 1 and 2 of unspecified COVID-19 vaccine) OR 1 Dose of the Janssen COVID-19 Vaccine.*

Complete Primary Vaccination Series: Include residents who have received Dose 1 and Dose 2 of a two-dose mRNA vaccine (for example, Moderna or Pfizer-BioNTech, or dose 1 and 2 of unspecified COVID-19 vaccine) OR 1 Dose of the Janssen COVID-19 Vaccine.*

Residents who received at least one or more booster dose of COVID-19 vaccine:

One Booster: Include residents who have received only one booster dose of COVID-19 vaccine (any manufacturer) AND 14 days or more have passed before the specimen collection date.*

Two or More Boosters: Include residents who have received two or more booster doses of COVID-19 vaccine since March 29, 2022. AND 14 days or more have passed before the specimen collection date.*

Additional or Booster Vaccination: Include newly positive residents who have received any additional dose(s) or booster dose(s) of COVID-19 vaccine (any manufacturer) AND 14 days or more have passed before the specimen collection date.*

Up to Date: Include residents who are up to date with COVID-19 vaccines 14 days or more before the specimen collection date. **Note:** Please review the current definition of up to date <https://www.cdc.gov/nhsn/pdfs/hps/covidvax/UpToDateGuidance-May2022-508.pdf>*

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Answer "Yes" if the LTCF can perform COVID-19 viral testing, if there was a need to do so, or are able to obtain resources needed from outside sources, such as laboratories, health department, outbreak response team etc.

Yes No

CURRENT CENSUS: Total number of beds that are currently occupied.*

RESIDENTS: Do you have any new Resident COVID admissions, cases, or deaths to report? OR Do you have new resident deaths or Influenza cases to report?*

Yes No

Staff and Personnel Impact

STAFF: Do you have new HCP cases or deaths to report? OR Do you have new HCP Influenza cases to report?*

Yes No

Urgent Needs

Do you have an urgent staffing need over the next 48 hours?*

Yes No

Urgent Needs

Do you have any urgent PPE needs in the next 48 hours?*

Yes No

Staff and Personnel Impact

STAFF: Do you have new HCP cases or deaths to report? OR Do you have new HCP Influenza cases to report?*

Yes No

Staff and Personnel Cases

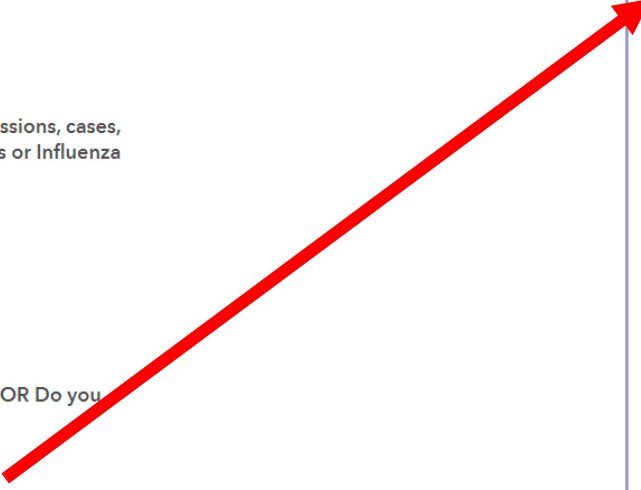
CONFIRMED: Staff and facility personnel with new laboratory positive COVID-19 since the last time counts were reported.*

Enter the number of staff and facility personnel who have newly been identified as having a laboratory positive COVID-19 test result since the last date that Confirmed COVID-19 counts were entered for staff and facility personnel. **Note:** Staff and facility personnel include anyone working or volunteering in the facility, which includes, but not limited to contractors, temporary staff, resident care givers, shared staff, etc.

COVID-19 DEATHS: Staff and facility personnel with new suspected or laboratory positive COVID-19 who died since the last time counts were reported.*

Enter the total number of new deaths for staff and facility personnel with suspected or laboratory positive COVID-19 that have occurred since the last date the COVID-19 Death count for staff and facility personnel was entered. Only include new deaths since the last time these counts were entered in the Module.

INFLUENZA: Number of staff and facility personnel above with new influenza (flu).*



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Yes No

CURRENT CENSUS: Total number of beds that are currently occupied.*

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RESIDENTS: Do you have any new Resident COVID admissions, cases, or deaths to report? OR Do you have new resident deaths or Influenza cases to report?*

Yes No

Staff and Personnel Impact

STAFF: Do you have new HCP cases or deaths to report? OR Do you have new HCP Influenza cases to report?*

Yes No

Urgent Needs

Do you have an urgent staffing need over the next 48 hours?*

Yes No

Urgent Needs

Do you have any urgent PPE needs in the next 48 hours?*

Yes No

Urgent Needs

Do you have an urgent staffing need over the next 48 hours?*

Yes No

Nursing Staff: registered nurse, licensed practical nurse, vocational nurse*

Yes No

Clinical Staff: physician, physician assistant, advanced practice nurse*

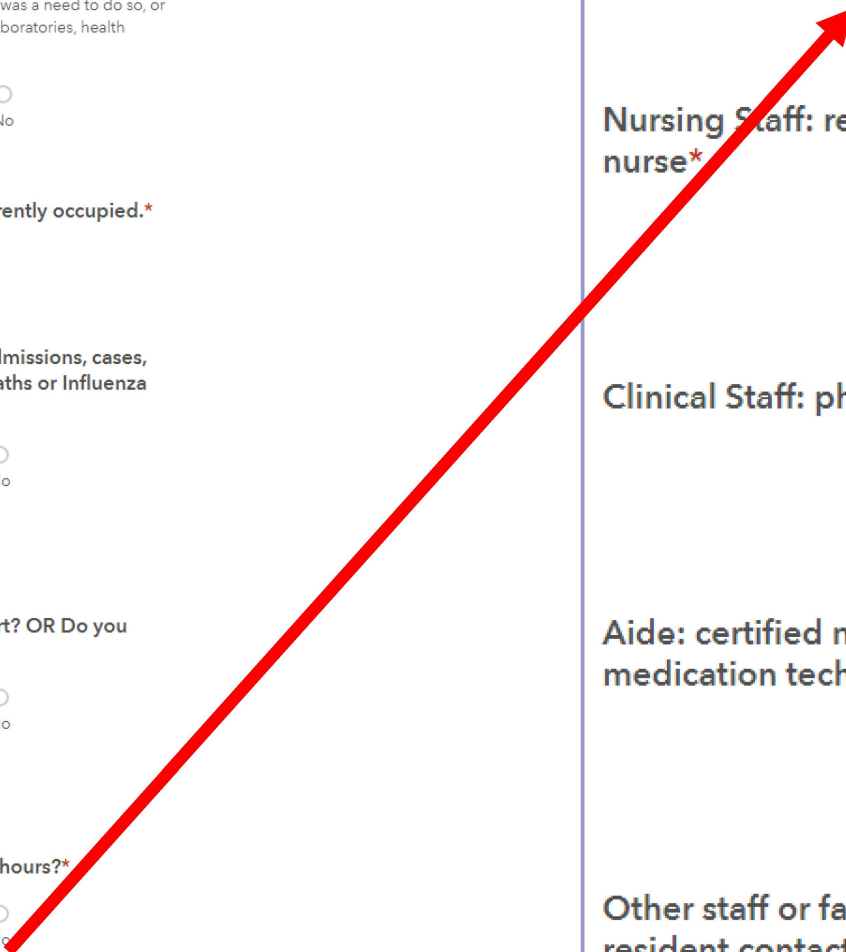
Yes No

Aide: certified nursing assistant, nurse aide, medication aide, and medication technician*

Yes No

Other staff or facility personnel, regardless of clinical responsibility or resident contact not included in the categories above (for example, environmental services)*

Yes No



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Yes No

Staff and Personnel Impact

STAFF: Do you have new HCP cases or deaths to report? OR Do you have new HCP Influenza cases to report?*

Yes No

Urgent Needs

Do you have an urgent staffing need over the next 48 hours?*

Yes No

Urgent Needs

Do you have any urgent PPE needs in the next 48 hours?*

Yes No

Urgent Needs

Do you have any urgent PPE needs in the next 48 hours?*

Yes No

N95 Respirator

Yes No

Face mask

Yes No

Eye Protection, including goggles or face shields

Yes No

Gowns

Yes No

Gloves

Yes No

Have you reached out to your local Public Health Office or Medical Health Operational Area Coordinator (MHOAC) in the last 24 hours to place a resource request for this need?

Yes No

