Assessment of Healthcare Personnel Exposed to or Infected with SARS-CoV-2 Denominator Form

Instructions

Table A

1) Record the Facility ID

2) Enter the number of HCP who worked at this healthcare facility for at least 1 day during the CALENDAR month:
   - Include all HCP who have worked at the facility for at least 1 day during the calendar month being tracked, regardless of clinical responsibility or patient contact. This includes HCP who were on leave for part of the month or were hired or left employment during the month. Working for any number of hours a day counts as 1 day.
   - Include both full-time and part-time persons. If a HCP works in 2 or more facilities, each facility should include the HCP in their denominator. Count HCP as individuals rather than full-time equivalents.
   - Licensed practitioners who receive a direct paycheck from the reporting facility, or who are owners of the reporting facility, should be counted as employees.
   - The HCP categories are mutually exclusive. Each HCP should be counted only once in the denominator.

3) *(Optional)* Enter the number of COVID-19 patients in the facility during the CALENDAR month:
   - These data may be available for some facilities through the National Healthcare Safety Network (NHSN). Many state health departments have access to NHSN data through a group user function
   - Report the total number of inpatients with confirmed COVID-19 for the calendar month. Count patients who were hospitalized for any number of days during the month, including patients admitted to the facility before the month being tracked.

Table B *(Optional)*

1) Record the Facility ID

2) Enter the number of HCP in each occupation category who worked at this healthcare facility for at least 1 day during the CALENDAR month:
   - Include all HCP who have worked at the facility for at least 1 day during the calendar month being tracked, regardless of clinical responsibility or patient contact. This includes HCP who were on leave for part of the month or were hired or left employment during the month. Working for any number of hours a day counts as 1 day.
   - Include both full-time and part-time persons. If a HCP works in 2 or more facilities, each facility should include the HCP in their denominator. Count HCP as individuals rather than full-time equivalents.
   - Count employees and non-employees within each occupation category.
   - The HCP categories are mutually exclusive. Each HCP should be counted only once in the denominator.

3) Enter the total number of shifts worked in the facility for each occupation category during the CALENDAR month.
   - Count employees and non-employees within each occupation category.

4) Enter the total number of hours worked in the facility for each occupation category during the CALENDAR month.
   - Count employees and non-employees within each occupation category.

Table A. Record the number of healthcare personnel (HCP) for each category below for the full CALENDAR month (e.g., Jun20 = June 2020).

Facility ID: _____ Comments:

Month and year		A. Employee HCP — Employees (staff on facility payroll)	B. Non-Employee HCP — Licensed independent practitioners: Physicians, advanced practice nurses, & physician assistants	B. Non-Employee HCP — Adult students/ trainees & volunteers	B. Non-Employee HCP — Other contract personnel	A+B. Total HCP
May 2020	1a. Number of HCP who worked at this healthcare facility for at least 1 day during the month					
	1b. (*Optional*) Number of COVID-19 patients in the facility: _____					
Jun 2020	2a. Number of HCP who worked at this healthcare facility for at least 1 day during the month					
	2b. (*Optional*) Number of COVID-19 patients in the facility: _____					
Jul 2020	3a. Number of HCP who worked at this healthcare facility for at least 1 day during the month					
	3b. (*Optional*) Number of COVID-19 patients in the facility: _____					
Aug 2020	4a. Number of HCP who worked at this healthcare facility for at least 1 day during the month					
	4b. (*Optional*) Number of COVID-19 patients in the facility: _____					
Sep 2020	5a. Number of HCP who worked at this healthcare facility for at least 1 day during the month					
	5b. (*Optional*) Number of COVID-19 patients in the facility: _____					
Oct 2020	6a. Number of HCP who worked at this healthcare facility for at least 1 day during the month					
	6b. (*Optional*) Number of COVID-19 patients in the facility: _____					
Nov 2020	7a. Number of HCP who worked at this healthcare facility for at least 1 day during the month					
	7b. (*Optional*) Number of COVID-19 patients in the facility: _____					

Table A (con). Record the number of healthcare personnel (HCP) for each category below for the full CALENDAR month (e.g., Jun20 = June 2020).						
Facility ID:	Comments:					
Month and year		**A. Employee HCP** Employees (staff on facility payroll)	**B. Non-Employee HCP**			**A+B. Total HCP**
			Licensed independent practitioners: Physicians, advanced practice nurses, & physician assistants	Adult students/ trainees & volunteers	Other contract personnel	
Dec 2020	8a. Number of HCP who worked at this healthcare facility for at least 1 day during the month					
	8b. (*Optional*) Number of COVID-19 patients in the facility: _____					
Jan 2021	9a. Number of HCP who worked at this healthcare facility for at least 1 day during the month					
	9b. (*Optional*) Number of COVID-19 patients in the facility: _____					
Feb 2021	10a. Number of HCP who worked at this healthcare facility for at least 1 day during the month					
	10b. (*Optional*) Number of COVID-19 patients in the facility: _____					
Mar 2021	11a. Number of HCP who worked at this healthcare facility for at least 1 day during the month					
	11b. (*Optional*) Number of COVID-19 patients in the facility: _____					
Apr 2021	12a. Number of HCP who worked at this healthcare facility for at least 1 day during the month					
	12b. (*Optional*) Number of COVID-19 patients in the facility: _____					
May 2021	13a. Number of HCP who worked at this healthcare facility for at least 1 day during the month					
	13b. (*Optional*) Number of COVID-19 patients in the facility: _____					
Jun 2021	14a. Number of HCP who worked at this healthcare facility for at least 1 day during the month					
	14b. (*Optional*) Number of COVID-19 patients in the facility: _____					

Table B. Optional detailed denominator data collection form stratified by occupation category. Record the number of healthcare personnel (HCP) AND/OR total shifts AND/OR total hours worked for each occupation category below for the full CALENDAR month (e.g., Jun20 = June 2020).

Facility ID:

Comments:

Month and year	Denominator variable	Physicians (MD, DO)	Nurses (RN, LPN, NP/advanced practice nurses)	Other, specify: _____	Other, specify: _____
May 2020	Number of HCP who worked at this healthcare facility for at least 1 day during the month				
	Total number of shifts worked during the month				
	Total number of hours worked during the month				
Jun 2020	Number of HCP who worked at this healthcare facility for at least 1 day during the month				
	Total number of shifts worked during the month				
	Total number of hours worked during the month				
Jul 2020	Number of HCP who worked at this healthcare facility for at least 1 day during the month				
	Total number of shifts worked during the month				
	Total number of hours worked during the month				
Aug 2020	Number of HCP who worked at this healthcare facility for at least 1 day during the month				
	Total number of shifts worked during the month				
	Total number of hours worked during the month				
Sep 2020	Number of HCP who worked at this healthcare facility for at least 1 day during the month				
	Total number of shifts worked during the month				
	Total number of hours worked during the month				
Oct 2020	Number of HCP who worked at this healthcare facility for at least 1 day during the month				
	Total number of shifts worked during the month				
	Total number of hours worked during the month				
Nov 2020	Number of HCP who worked at this healthcare facility for at least 1 day during the month				
	Total number of shifts worked during the month				
	Total number of hours worked during the month				

Table B (con). Optional detailed denominator data collection form stratified by occupation category. Record the number of healthcare personnel (HCP) AND/OR total shifts AND/OR total hours worked for each occupation category below for the full CALENDAR month (e.g., Jun20 = June 2020).

Facility ID:

Comments:

Month and year		Physicians (MD, DO)	Nurses (RN, LPN, NP/advanced practice nurses)	Other, specify: _____	Other, specify: _____
Dec 2020	Number of HCP who worked at this healthcare facility for at least 1 day during the month				
	Total number of shifts worked during the month				
	Total number of hours worked during the month				
Jan 2021	Number of HCP who worked at this healthcare facility for at least 1 day during the month				
	Total number of shifts worked during the month				
	Total number of hours worked during the month				
Feb 2021	Number of HCP who worked at this healthcare facility for at least 1 day during the month				
	Total number of shifts worked during the month				
	Total number of hours worked during the month				
Mar 2021	Number of HCP who worked at this healthcare facility for at least 1 day during the month				
	Total number of shifts worked during the month				
	Total number of hours worked during the month				
Apr 2021	Number of HCP who worked at this healthcare facility for at least 1 day during the month				
	Total number of shifts worked during the month				
	Total number of hours worked during the month				
May 2021	Number of HCP who worked at this healthcare facility for at least 1 day during the month				
	Total number of shifts worked during the month				
	Total number of hours worked during the month				
Jun 2021	Number of HCP who worked at this healthcare facility for at least 1 day during the month				
	Total number of shifts worked during the month				
	Total number of hours worked during the month				