

**Massachusetts Senior Care Association**  
**Infection Control Reporting Requirements**

**Infection Control Reporting - Nursing Facilities**

Reporting Requirement	Collecting Agency	Reporting System	Purpose	Data Elements	Reporting Deadlines
Chapter 93 Elder Care Facility Reporting in REDCap	DPH	RedCAP	To comply with the COVID-19 reporting requirements in Chapter 93 of the Acts of 2020, nursing homes, rest homes, assisted living residences, and intermediate care facilities for persons with an intellectual disability report on COVID-19 cases and deaths among residents and staff and provide this information to DPH within 24 hours of case or death identification. Data is reported through the REDCap system.	Positive residents (including admissions and recovered residents with subsequent positive results); Hospitalizations among positive residents; Resident deaths that occur while resident is being actively treated for COVID-19 at the facility or elsewhere; Positive staff; staff deaths	New positive cases and deaths should be reported within 24 hours
CMS - § 483.80 Infection control	NHSN	NHSN	COVID-19 Reporting. The facility must— (I) Electronically report information about COVID-19 in a standardized format specified by the Secretary.	Resident impact; Staff & personnel impact; Supplies and PPE; COVID-19 Vaccination (resident, employee); Resident therapeutics (monoclonal antibodies)	Weekly - 11:59 pm every Sunday
CMS - § 483.80 Infection control (F884)	NHSN	NHSN	COVID-19 Reporting. The facility must— (I) Electronically report information about COVID-19 in a standardized format specified by the Secretary.	All positive POC antigen results for staff and residents. If reporting through NHSN, do not need to report to DPH through Casetivity.	Within 24 hours of results
CMS - § 483.80 Infection control.	N/A	Facility discretion - webposting, robo calls, etc,	Inform residents, their representatives, and families of those residing in facilities of staff or resident confirmed cases of COVID-19 or new onset of respiratory symptoms	Occurrence of either a single confirmed infection of COVID-19, or three or more residents or staff with new-onset of respiratory symptoms occurring within 72 hours of each other. Information on mitigating actions; Cumulative updates at least weekly	By 5 p.m. the next calendar day Cumulative updates - weekly

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CMS FY 2023 SNF PPS Final Rule	NHSN	NHSN	Requires certified skilled nursing facilities to report annual Healthcare Personnel influenza vaccination summary data through the NHSN	Submit administration of influenza vaccine to staff	Annually by May 15 for the period of 10.1 - 3.31
Chapter 105 CMR 300.00 Reportable Diseases Surveillance and Isolation and Quarantine	DPH (reported to DPH in lieu of reporting to Local Board of Health)	Casetivity	105 CMR 300.174: Laboratory Findings Indicative of Infectious Disease Reportable Directly to the Department by Point of Care Testing	All positive POC tests for diagnosis of infectious diseases. If reporting <i>positive COVID-19 POC</i> tests through NHSN, do not need to report.	Within 24 hours of results
Massachusetts Immunization Information System - Executive Order of the Commissioner of Public Health (COVID - 19 vaccines)	DPH	Virtual Gateway	105 CMR 222.100: Health Care Provider Immunization Information Reporting	All vaccinations provided by the facility to residents and staff	Within 7 days of immunization administration
105 CMR 150.000 Standards for Long-term Care Facilities	DPH	HCFRS	105 CMR 150.002 Administration (G)	(a) A death that is unanticipated - including deaths of residents that ever had COVID-19;  Report of a Disease when such illness is: 1. Believed to be part of a suspected or confirmed cluster or outbreak; no need to report subsequent cases unless facility has gone 28 days without additional cases.  2. Believed to be unusual as defined in 105 CMR 300.020: Unusual Illness; or  First case of COVID-19 or any outbreak (if the facility has gone 28 days without additional cases)	New death, clusters and cases should be reported within 24 hours
Chapter 105 CMR 300.00 Reportable Diseases Surveillance and Isolation and Quarantine	DPH (reported to DPH in lieu of reporting to Local Board of Health)	Email, phone, fax or electronic (HCFRS)	105 CMR 300.134: Illness Believed to Be Part of a Suspected or Confirmed Cluster or Outbreak	Suspected or confirmed clusters of any illness	Immediately

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Chapter 105 CMR 300.00 Reportable Diseases Surveillance and Isolation and	DPH (reported to DPH in lieu of reporting to Local)	Email, phone, fax or electronic (HCFRS)	105 CMR 300.100: Diseases Reportable to Local Boards of Health	Cases or suspect cases of the diseases listed under 150 CMR 300.100	24 hours after diagnosis or identification
Reporting of influenza or ILI clusters	DPH	Casetivity & HCFRS	Guidelines for Reporting Influenza Cases and Clusters of Influenza-Like Illness (ILI) 12/20/2022	Cases of influenza-like illness (ILI) clusters (three cases of ILI in residents), or one lab-confirmed case of influenza in	Immediately

1.31.2023