

Healthcare Personnel Influenza Vaccination Report Instructions


Summary

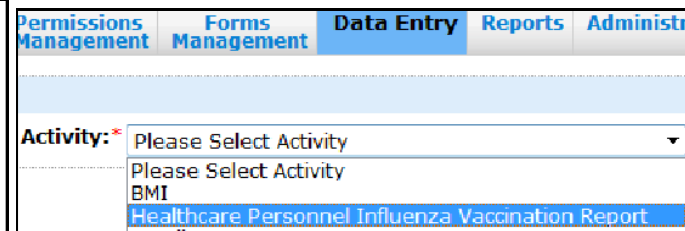
The **Healthcare Personnel Influenza Vaccination Report** is administered through a system referred to as **HERDS**. This is a required report of your facility's healthcare personnel influenza vaccination and declination information.

In order to complete the report, you must have a Health Commerce System (HCS) account and be assigned a role able to access the report (see below for a full list of roles able to access the report). To view your role assignment, click on the **My Content** button in the upper left of the HCS menu bar, and select **See what roles I hold** from the dropdown menu. If you are not in one of these roles, contact your facility's HCS Coordinator for role assignment.

- HERDS Data Reporter (may be listed as Data Reporter or Nursing Home Data Reporter)
- Administrator
- Director, Nursing
- HPN Coordinator
- Infection Control Practitioner
- Medical Director

Find the Report

1. Log onto the HCS at <https://commerce.health.state.ny.us>. If you need assistance logging in, please call Commerce Accounts Management Unit at 1-866-529-1890.
2. Click on **My Content** on the HCS menu bar, and select on **All Applications** from the drop-down menu.
3. Select **H** to locate the **Health Electronic Response Data System**.
4. Click  located to the right of the application name to add HERDS to your **My Applications** list in the left side panel. The next time that you log onto the HCS, you will see a link to **HERDS** in your **My Applications** list.
5. Click **HERDS for Hospitals** to enter the application.
7. Click **Data Entry** in the HERDS application.
8. Select the **Healthcare Personnel Influenza Vaccination Report** from the **Activity** menu to begin the report.



Permissions Management Forms Management Data Entry Reports Administr

Activity:* Please Select Activity

Please Select Activity

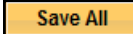


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Healthcare Personnel Influenza Vaccination Report

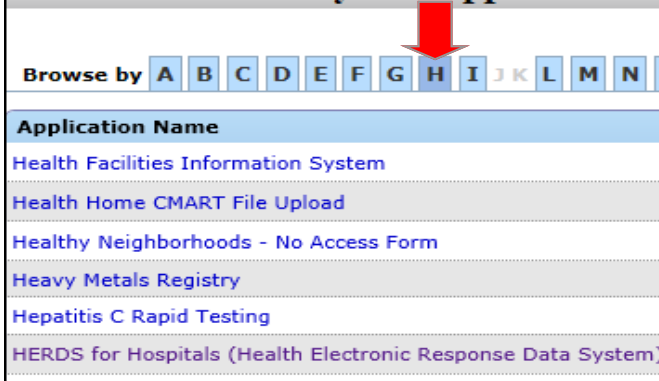
Complete the Report

1. Contact info: Enter your name, title, phone number, and email address.
2. Vaccination Info: Enter the following data for your **employees, licensed independent practitioners, students, trainees, and volunteers**, and **contract personnel**: TOTAL number that worked at your facility or agency from October 1, 2017 through March 31, 2018 and
 - A. Number vaccinated against influenza after July 1, 2017
 - B. Number that declined influenza vaccination
 - C. Number with unknown influenza vaccination status

Check Your Data and Submit

1. Click  to save your data.
2. Click  after all of your data has been entered.
3. Answers that do not add up or are missing will be **red**.
4. Check your answers and correct if needed.
5. Hit  to submit your data.

Health Commerce System Applications



Browse by A B C D E F G H I J K L M N

Application Name

Health Facilities Information System

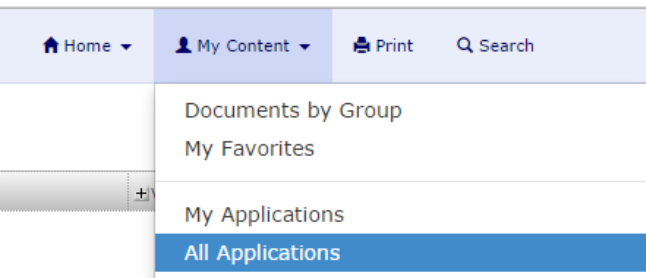
Health Home CMART File Upload

Healthy Neighborhoods - No Access Form

Heavy Metals Registry

Hepatitis C Rapid Testing

HERDS for Hospitals (Health Electronic Response Data System)





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Save EARLY and Save OFTEN! For security reasons, your session will expire after 60 minutes of idle time. Confirm that your data has been saved  and submitted. .

Points of Contact for Questions

Survey content questions: Call Bureau of Immunization at 518-473-4437 or email immunize@health.ny.gov.
 Technical issues regarding survey completion: Call Office of Health Emergency Preparedness at 518-408-5163.
 Questions related to the flu mask regulation: Visit www.health.ny.gov/flumaskreg or email flumaskreg@health.ny.gov.