

Arizona BioSense Workgroup Meeting

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Electronic Disease Surveillance Program
June 6th, 2017**



**ARIZONA DEPARTMENT
OF HEALTH SERVICES**

Health and Wellness for all Arizonans

- Welcome and Attendance
- Updates
 - BioSense Server Upgrades
 - June 12th-July 1st, 2017
 - Onboarding
 - On hold during transition
 - BioSense Grant
 - CDC NSSP Site Visit
 - Legacy Data
 - Community of Practice:
 - Join the [ISDS Website](#) and [Knowledge Repository](#)
 - Chapter: Arizona BioSense Group
 - Heat Related Illness Flash Mob 05/24/17-05/25/17
- Charter
 - **Objective 1**
 - Continue to increase awareness among acute care facilities (hospitals) about how BioSense data is used.
 - **Deliverable 2**
 - Implement a process to provide outreach to acute care facilities regarding updates, use, onboarding, etc. at a state and/or local level. Report on the use of the decided process(es).
 - Hospital Reports
 - What information would be useful to our Hospital Partners?
 - How often should reports be available?

– **Objective 3**

- Assist ADHS and local health department users adapt to the NSSP transition. Continue to develop new and advance existing use cases which will include maintaining updates for current protocols.

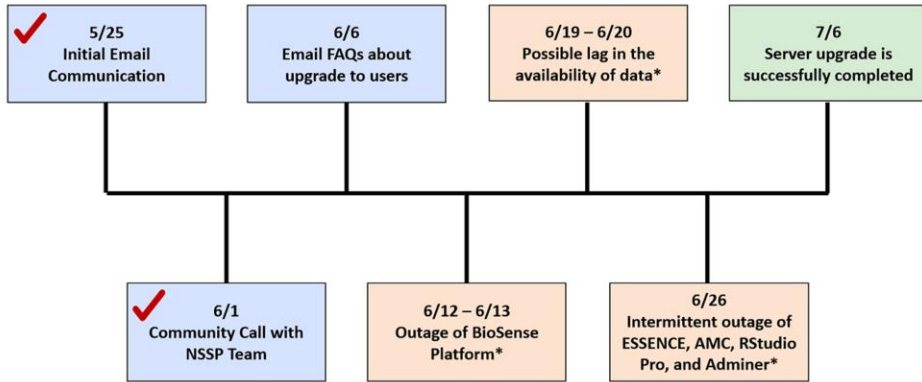
– **Deliverable 3**

- Define new use cases for Arizona and any revisions for existing use cases. Report the number of use cases for routine analysis and event/outbreak analysis.
 - Decision to create sub-jurisdiction (county) “locker” views similar to legacy system
 - » Pilot process with Maricopa County
-
- Questions
- Other items



BioSense Platform Server Upgrade Process

Server Upgrade Timeline



*Email reminders one week out and the day of for each instance of downtime (all users)



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BioSense Platform Server Upgrade Process

- **Effect on Services:**
- Queries and preferences **created and saved in ESSENCE** (myESSENCE, QueryManager, MyAlerts, Bookmarks, Report Manager) from June 12–July 6, 2017, **may not be transferred to the new servers.** ***Document (screen shots, protocols) all work saved in ESSENCE from June 12th until July 6th.***

Electronic Partners Status Update

Hospital Onboarding

Registration of Intent = 69

Hold Queue = 40

Testing = 0

Validation = 0

Production = 28

Data Use Agreements

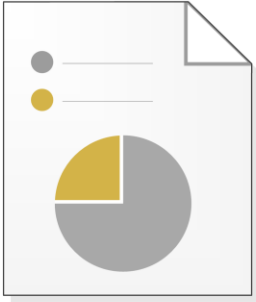
Hospitals = 66

Local Public Health
Jurisdictions = 14

Onboarding is currently on hold during the transition to the new environment of the BioSense Platform.

CDC NSSP Site Visit

- Visit 05/17-05/18



- NSSP Attendees
 - Phillip Baptiste, Project Officer
 - Niketta Womack, Site Inspector
 - Shaan Purushothaman, Onboarding Coordinator

Charter 2016-2017

Workgroup Year 2 Objectives and Deliverables

Objective: Continue to increase awareness among acute care facilities (hospitals) about how BioSense data is used.

Deliverable: Implement a process to provide outreach to acute care facilities regarding updates, use, onboarding, etc. at a state and/or local level. Report on the use of the decided process(es).

Objective: Collaborate with the ADHS BioSense team to determine training needs, conduct trainings, review training and guidance materials, and disseminate training materials to relevant users.

Deliverable: Determine the best methods to train users on the BioSense Platform based on the evaluation of needs. Report the number of users trained for use of the BioSense ESSENCE and/or back end analysis.

Objective: Assist ADHS and local health department users adapt to the NSSP transition. Continue to develop new and advance existing use cases which will include maintaining updates for current protocols.

Deliverable: Define new use cases for Arizona and any revisions for existing use cases. Report the number of use cases for routine analysis and event/outbreak analysis.

Objective: Evaluate Arizona's syndromic surveillance use cases and validate BioSense data.

Deliverable: Present to workgroup results of evaluation.

Charter 2016-2017

Objective 2: Continue to increase awareness among acute care facilities (hospitals) about how BioSense data is used.

Deliverable 2: Implement a process to provide outreach to acute care facilities regarding updates, use, onboarding, etc. at a state and/or local level. Report on the use of the decided process(es).

Hospital Reports



- What information would be useful to our Hospital Partners?
- **How often should reports be available?**

Hospital Reports

- Example shared from Massachusetts Department of Public Health's Syndromic Surveillance Program

Hospital Reports

- Number of ED visits by week (total numbers and graphed) by facility compared to statewide numbers
- Message type counts (A01, A03, A04, A08) – *this was a bit confusing to the hospital staff since they are not familiar with ADT messages. Also the report includes some data on timeliness (mean time to first message with chief complaint and diagnosis code – and % complete within set time frame). The timeliness info is very valuable but no meaningful to the hospital staff until it is explained.*
- Compliance with chief complaint and diagnosis code (% of messages with this required information)
- Number of patient admitted to inpatient (total numbers and graphed) by facility compared to statewide numbers
- Number of patient deceased (total numbers and graphed) by facility compared to statewide numbers
- Average time in ED and ED/inpatient by facility and statewide numbers
- Percentage of patients with ILI by facility and statewide numbers
- Basic demographic graphs showing breakdown of patients seen by gender, age, race and diagnosis category.

Comments from Hospital Workgroup Member Lori Darr

Hospital Reports

- Oregon's Publicly Available Reports
 - ESSENCE
 - Opioid Dashboard

Oregon's ESSENCE Reports:

<https://public.health.oregon.gov/DiseasesConditions/CommunicableDisease/PreparednessSurveillanceEpidemiology/essence/Pages/index.aspx>

Oregon's Opioid Dashboard:

<https://public.health.oregon.gov/PreventionWellness/SubstanceUse/Opioids/Pages/data.aspx>

More examples of opioid reports in Amy Ising's Blog post:

<http://www.healthsurveillance.org/blogpost/1556053/275793/Opioids-Updates-Prevention-for-States-and-Data-Driven-Prevention-Initiative-CDC-Awardee-Meeting-May-2017>

Hospital Reports

- Who at the hospital would be interested in reports?
- How do we report on hospital groups?
- Where should we go from here?



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Oregon's ESSENCE Reports:

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Climate-related Surveillance Flash Mob

Community Forums

Climate-related surveillance Discussion

Forum Index » Climate-related surveillance Discussion

+ New Topic Forum Actions

Search Forums...

Topics	Replies	Author	Latest Post
Heat-Related Illness	14	K. Collier	We are very interested in both cold and hot weather effects on residents' health. by M. Schumacher Wednesday, May 31, 2017
Heat-Related Illness and Weather Data	1	M. Roach	This is really cool Matt. Thanks for sharing! Krystal by K. Collier Tuesday, May 30, 2017

Climate-related Surveillance Flash Mob:

http://www.healthsurveillance.org/forums_engagement/Topics.aspx?forum=219360

On 05/24/2017-05/25/2017, multiple jurisdictions participated in a Climate-related Surveillance Flash Mob on the ISDS website. This is a good example of how jurisdictions can come together on a common topic and share questions and resources in the forum. If you are interested in the topics posted, please feel free to comment and share.

Charter 2016-2017

Objective 3: Assist ADHS and local health department users adapt to the NSSP transition. Continue to develop new and advance existing use cases which will include maintaining updates for current protocols.

Deliverable 3: Define new use cases for Arizona and any revisions for existing use cases. Report the number of use cases for routine analysis and event/outbreak analysis.



Tool Time



Pilot

New Environment

Next Steps:

- ADHS **reviewing** the code and set up for the Maricopa County Pilot “locker” with NSSP
- In the future, Zip Code lists will be sent to BioSense Liaisons to review and provide feedback to create individual county “locker” view

The decision made by the workgroup from our survey is to proceed with option 2. The ADHS Syndromic Surveillance Team will work with the CDC NSSP team to create individual county “locker” views for the database tools, Adminer Webquery Tool and RStudio Professional, for AZ authorized users. Keep in mind that there is more data available in ESSENCE than we previously had. Some of the current authorized users may not need to use the database tools because the data may be accessible in ESSENCE. ESSENCE also dedupes the messages to be visualized at the visit level. Line lists can be downloaded from ESSENCE. The database has all of the data received at message level, where multiple messages are sent that make up the entire patient visit (messages for when patient is admitted to the ED, given a diagnosis, discharged and any updates to the visit). Hospital partners do not need to make any changes for their interfaces that would be affected by this decision. The Data Use Agreements will not require changes for either option to be created for Adminer or RStudio Professional.

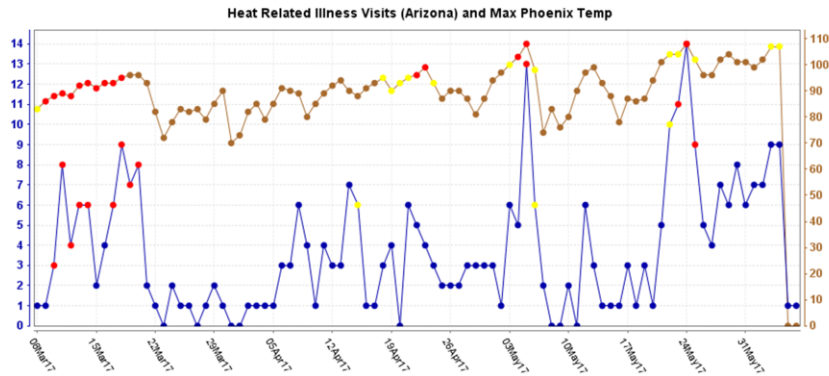
Legacy Data Project

- ADHS is still reviewing the legacy data (2014 – April 2016)
- Earliest it would be available in ESSENCE would be end of July

Exploratory Analysis Subgroup Projects

Heat Related Illness

- CSTE Heat Syndrome Definition now available in ESSENCE
- Can Overlay Weather Stations with HRI Queries in ESSENCE





Upcoming Meetings

Exploratory
Analysis Subgroup



Exploratory
Analysis Subgroup

- Thurs. June. 22
from 1:00 – 2:00

- Thurs. July. 27
from 1:00 – 2:00



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THANK YOU

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