

2009 State Reportable Conditions Assessment (SRCA) User Instructions

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I. Introduction and Background

The CSTE State Reportable Conditions Assessment (SRCA) for 2009 is now available online. This tool will assist CSTE to capture more robust information than we have collected in the past regarding reportable conditions. It is CSTE's charge to provide a comprehensive and accurate list of reportable conditions by state and territory, and with your prompt participation, CSTE will achieve 100% response rate.

The data from the 2009 SRCA pertaining to nationally notifiable infectious diseases will be used to generate the tables for the MMWR. Please make sure the information entered into the 2009 SRCA is accurate and reflective of your state's reporting rules. All SRCA data will be displayed in a query-results webpage on the CSTE website after the assessment is completed and validated.

The 2009 SRCA covers reporting requirements, as defined by regulation or legislation, for conditions defined as reportable by clinicians (i.e., health care providers), laboratories, hospitals, and other reporters. If a condition is reportable to another department (e.g., Department of Agriculture), and there is a data-sharing agreement in your state which results in the sending of case information to the state health agency, then the condition should be considered reportable.

II. What is NEW about the 2009 SRCA?

1. You will see some blank data values in fields throughout the 2009 SRCA. Reasons for this include:
 - a. Discrepancies were found between main condition row and sub-category row of 2008 data due to logic implementation issues, or
 - b. The rearrangement of conditions rows under new main condition categories, or
 - c. The deletion of duplicate condition rows, or
 - d. The addition of new conditions.
2. The "**Immediately Reportable**" column has replaced the "Comments" column.
 - a. For each condition, use the check box to indicate if your rules require immediate reporting by any of the reporting entities.
 - b. If the box is not checked (left blank), it indicates that your rules do not require immediate reporting by any of the reporting entities.
3. Sections of the SRCA may be printed at any time for review.
4. Users have a message pop up when their session is about to time out after 15 minutes of inactivity and are given the option to save. If the session is not manually saved, all entries prior to timeout will be saved.
5. Changed fields or new data entries will be highlighted in red font for easier review during final submission by the state/territorial epidemiologist.

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6. If an illegal entry is made, the application will notify the user with a warning sound and highlight the field. An error message will instruct the user how to enter valid data.

III. What is the **SAME** about the 2009 SRCA?

1. Sentinel surveillance for a condition is not considered reportable unless **all** providers are also required to report; in addition, active surveillance (such as for cancer or birth defects, in which abstractors go to facilities for case finding) is not considered reportable, unless all providers are also required to report.
2. The “Other” reporter type includes day care centers, schools, nursing homes, poison control centers, veterinarians, other state agencies, and other facilities or institutions. Employers may also be considered reporters in some states (e.g., for silicosis).
3. The 2009 SRCA is pre-filled with 2008 SRCA responses. If your state reporting rules have not changed from January 2008, please review and confirm the existing data
4. For each reporter type, there are three fields with drop-down menus as described below:

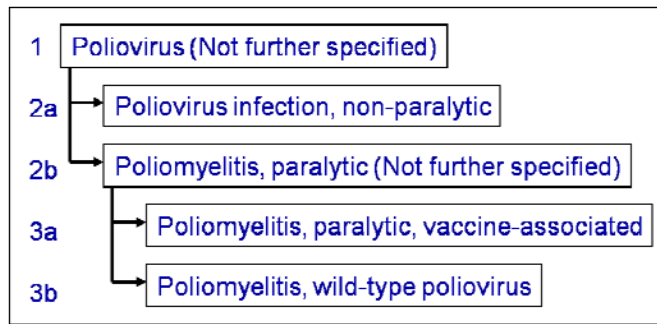
AUTHORITY (Mandate)	
E	Explicitly reportable; condition is listed as a specific condition or category in a published list, law, or regulation
I	Implicitly reportable; condition is included in a general category of the reportable condition list, such as “rare disease of public health”
NR	Not reportable
OUTBREAK ONLY	
<i>Note: For non-infectious conditions, the term outbreak refers to cluster</i>	
A	All cases reported at all times
C	Individual cases reported during outbreak
O	Aggregate counts reported during outbreak
NR	Not reportable
WORK ONLY	
A	All cases reported at all times
W	Individual cases reported if work-related
NR	Not reportable

For each section, the user must select one and only one of the choices.

5. The SRCA covers reporting rules for calendar year 2009: a condition must be reportable for most of the year (i.e., more than six months).
6. Users can use the one-keystroke entry method for easier data entry.
 - E= Explicitly Reportable,
 - I= Implicitly Reportable,
 - A=All cases are reported,
 - W= Work –Related Cases only are reported,
 - C= Cases associated with the outbreaks are reportable but individual cases are not reportable unless there is an outbreak,
 - O= Outbreaks are reportable, aggregate case counts only (not individual case reports),
 - N= NR or Not Reportable

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7. The condition hierarchy and data entry logic are used by CDC to calculate a dichotomous result (Yes/No) for determining whether a condition is reportable.
 - a. **IMPORTANT!!!** For nationally notifiable infectious diseases, the dichotomous result is applied to the MMWR tables at CDC. Only reportable disease data are published.
 - b. Example of condition hierarchy: *Row 1 is the main category of subcategory rows 2a and 2b. Row 2b is the main category of rows 3a and 3b as well as a subcategory of row 1.*



- a. If a main category row is explicitly reportable for a reporter type, all of its subcategory rows inherit explicit reporting statuses. If a main category row is implicitly reportable or not reportable, then its subcategory rows may have any entry for the authority column.
 - b. If a condition is entered as NR (not reportable), the work-only and outbreak-only reporting will be automatically classified as not reportable
8. CSTE staff will be contacting those states who were unable to complete the assessment online by the deadline. Telephone interviews will be conducted at that time.

IV. To assign additional users to the 2009 SRCA:

1. Log onto SRCA using your provided username and password at www.cste.org/srca
2. Click on "User Administration"
3. Click on "Add User"
4. Enter information for new user
 - a. Enter unique user name, email, and phone number
 - b. Username for Joseph Smith could be jsmith1 or joe_smith.
 - i. If the user name is already in use, please choose another user name
 - c. Password must be a combination of letters, numbers, and symbols and should not be based on a dictionary word
5. Assign access permissions to users: Infectious, Non-Infectious, General
 - a. Users can have access to as many areas as appropriate
6. Click on "Save"

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The screenshot shows a web form titled "Adding" for creating a new user. It includes a "Back" link and several input fields: Username (jsmith1), Password (masked with dots), Confirm password (masked with dots), Email (jsmith@ga.state), First name (Josh), Last name (Smith), Telephone (555-555-5555), and Region (Georgia, selected from a dropdown). Below these fields are three radio buttons for user roles: Administrator, State user, and Secondary user (which is selected). There are also three checkboxes for permissions: Infectious, Non Infectious (checked), and General (checked). A "Save" button is located at the bottom left of the form.

Note: The state/territorial epidemiologist will assign specific sections (General, Infectious, and Non-Infectious) to specific staff. Staff can choose to "Save and return" if they are interrupted during completion of a section, or choose to "Submit Final Responses" when a section is completed and ready for final review by the state/territorial epidemiologist.

Users assigned to review the SAME section will NOT be able to update that user section at the same time. When the section is in use by another user, all other users will have read-only access only.

The state/territorial epidemiologist has the ultimate responsibility to ensure the information provided is accurate before final approval.

V. Making your final submission

1. All users
 - a. Click "Submit Final Response" to send SRCA responses to the state/territorial epidemiologist for review
 - b. After submission, further edits to responses cannot be made
 - c. Access to the assigned section will be read-only after submission
2. State/territorial epidemiologist
 - a. Make edits to responses as necessary after receiving emails automatically-generated as delegated sections are completed
 - b. Click "Submit Final Responses" after all sections have been reviewed for accuracy
 - c. After submission, further edits to responses cannot be made at a later date

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- d. Access to the SRCA will be read-only after submission

VI. Training and Technical Support

For technical support or to suggest new conditions for the SRCA, contact Lisa Ferland (email: LFerland@cste.org or 770-458-3811)

Thank you for your participation,

CSTE and CDC SRCA project staff:

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