

Orpheus County Feedback Meeting Agenda & Notes

*Data for Public Health
Policy*

Date: May 14, 2015

Time: 1:30-3:00

Place: PSOB AOC, 4th flr (or room 710)

Registration URL: <https://attendee.gotowebinar.com/register/5575381935383763458>

The phone number is 1- 888-278-0296 participant code 6585758

ALL DATA FROM SCREEN SHOTS SHOWN IN THESE MINUTES ARE FAKE

Counties: Baker; Benton , **Clackamas**- Karen; **Clatsop**-Annette, Sherri, Nancy ; **Crook**- Karen, **Curry**- Susan, Brody; **Deschutes**-, Heather, **Douglas**- Kieta; Grant, Harney, Hood-River, Jackson, **Jefferson**-Joy; **Josephine** - Cat, **Klamath**- Kathy, Lake, **Lane**- Sidney, Heather; **Lincoln**- Mollie, **Linn**,-Debby, Leta, Karen; Malheur ; **Marion**- Melanie; **Morrow** - Shelley; **Multnomah**- Marta, Linda, Taylor; **NCPHD** - Allyson; Polk ; **Tillamook**- Christina; Umatilla-; Union , Wallowa, Warm Springs, **Washington**- Eva; Wheeler, **Yamhill**- Kara, Rae

State: June Bancroft, Michelle Barber, Rob Laing, Magdalena Scott, Dave Dreher, Tom Fitch, Lea Bush. Stephen Ladd-Wilson, Irina Kasarskis

AGENDA / BACKGROUND	Presenter(s)	Time
<p>Introductions - June - 5 min</p> <p>Security and Confidentiality update – Stephen – 5 min</p> <p>ELR updates –Michelle/June - 10 min:</p> <ul style="list-style-type: none"> Mid-Columbia -reportable results have to be manually flagged for transmission (except lead) because they 		<p>Security audit will be going out in June/July. Adding who the Overall Responsible Party (ORP) as a user in Orpheus, even if they are not current users. There is to a screen in Orpheus. Please interview the mailing address for the ORP. If the ORP listed for you in your user settings is incorrect let the tech team know</p> <p>Let Michelle know if there is no improvement, she will check in</p>

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send out to Quest and receive results back. They are working on their timeliness issues. Also shared with them some results that should have been received that weren't and they are addressing this as a workflow issue. Manually checking box to send the report to public health – explains missed reports and sometimes they check the box and then the result is negative – and it gets sent

- Salem Hospital – not sending signal to cut off ratios. There was a box that had not been checked that makes them flagged as reportable. They should now start being included in ELR
- Peacehealth – started updating messages, actively testing but only at WA facilities– we should see some OR residents seen at WA facilities in the coming months (anticipated August 2015). Springfield facility coming October 2016, so we'll notice gradual but not complete improvements in both quality and timeliness in the coming year. – hopefully address information will come in
- Asante – (Rogue Valley) even though they upgraded last year, they have switched vendors, in August, they plan to take over submission for Sky Lakes; by April 2016 the Asante feed will change – they are testing and upgrading systems – looks better per Michelle's evaluation
- Tamarac – blood lead values are being rounded up to the nearest whole number, this is a problem because looking at values ≥ 5 , but they are sending 4.5 as 5
- Willamette Valley – things looking better, they are now filtering out negatives and immunization titers so we shouldn't be seeing those. Should still be faxing, let Michelle know if not.
- PAML should start testing ELR later this summer and hopefully in production by Fall
- McKenzie-Willamette has established a connection and begun testing
- Quest – San Juan Capistrano would like to stop faxing – Michelle to give them the go ahead
- Quest Specialty (Valencia) – do not have an automated process to send us data. They have 5 people who pick up and drop off files, Michelle found 30 files going back to Dec that were placed in the wrong location,

with Allyson in a month

Marion county or others to let Michelle know if Salem Hospital is not sending S/C ratios

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most HIV, some hep C . So there will be some old ELRs coming through.

- Kaiser – plan “c” faxes. Michelle asking what the sense is about Kaiser ELRs. Some recent missing reports, but these were lab tests that we not correctly mapped. Feedback for the last 2 weeks. Clackamas and Clatsop still report a slight lag – getting faxed report before ELR.

Elevated blood lead reporting – Dave – 15 min

Dave reviewed a power point presentation of processing elevated and negative blood lead levels. See the document for more information

Lead exposure is under PE1- depends on which LHD as to whether this is MCH, or CD. If someone who does lead exposure investigations are not currently Orpheus users they might have to apply to become Orpheus users

Contact transfer – any issues - June/all – 5 min

Allyson in North Central – transferred and disappeared. This was two weeks ago. On home screen the recent tab should be able to find it again. Recent cases, persons, contacts should all show up. Allyson reported this did not work for her. Followed up with Orpheus tech. There was an issue with disease group not setting – we fixed these. You can also change the status of a transfer on the contact detail page. See if it was rejected, accepted, completed. – Completed would remove it from your list.

Entering multiple vaccinations –issues – June/all

Applies to pertussis cases as there are multiple vaccinations. Problem when adding multiple vaccines, looks like dates were being deleted, believed to be a screen refresh issue as the record was not saving quickly enough so then you were writing over data you entered. There is a lag using the Internet. Someone deleted a lab report, but it did not look like it was deleting, screen not refreshing after the deleting a record. This same refresh button can be clicked and the record should be gone. This is the same as when processing ELR reports – click refresh if they are not leaving your list quickly enough. When click on the show all this sorts the vaccine so that you might not see what you were entering.

Alert connection update – the ALERT program is planning to remove the certificate requirement. This should open a window to have this up and running quickly. Michelle is also put in another request to our IT folks – to see why this cannot be fixed. Either way – Michelle is still working on this. Stay tuned

Add a link in Orpheus to this document – post on the web site.

The June monthly training webinar (June 3 10:30-11:30) will be on lead exposure investigations.

Tom’s suggestion to put a refresh button on the main menu – on the tool bar – or on the file menu. Near where you print redacted.

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Population database development – June/all – 5 min

The screenshot shows the DUDE website interface. At the top, it says 'DUDE (FMS12-WPOHAFMSL04)' and 'DUDE Directory of Useful Databases for Epidemiologists Logged in as: June Bancroft'. Below this are several buttons with descriptions:

- Orpheus**: Information on individual cases of reportable disease.
- Outbreaks**: Summary data on outbreak investigations.
- Case Log**: Initial data collection tool for GI and respiratory outbreaks.
- Keene Stories**: Share your memories of Bill Keene.
- Napoli**: Data entry and analysis tool for event-centered outbreaks (restaurants, weddings, schools, camps, etc.).
- Control Measures**: Control Measures Reports (for long-term care facility outbreaks).
- Training**: Hypothesis-generating questionnaire generator, data entry tool, and food background rate estimator.
- Population**: Disease rates for Oregon and counties. (A red arrow points to this button.)
- Mening Vax**: Data entry for UoO Mening Vaccination Clinic.

Add a note of the date the data were updated. Will only be updated one time a year – probably in June.

June to compare the data in Population database to the OPHAT data

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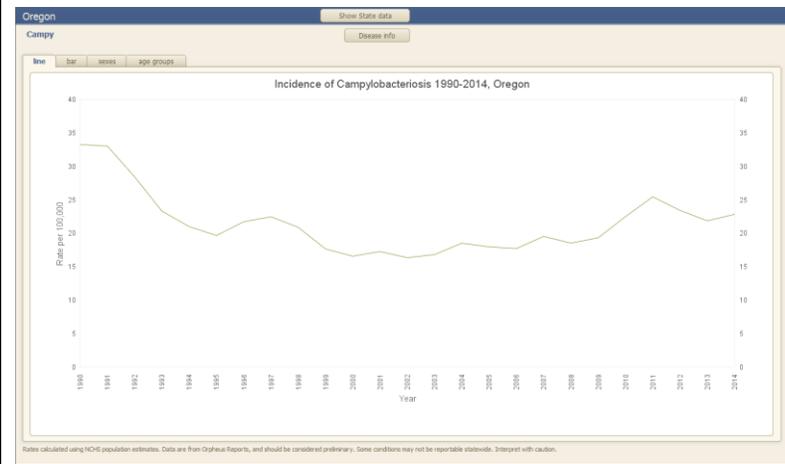
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Oregon

Disease Group: Year: Pop:

	Case Count	Rate per 100k		Case Count	Rate per 100k
<i>Chlamydia</i>	15,326	389.97	<i>Malaria</i>	18	0.46
HepC (chronic)	5,461	138.95	<i>Mening</i>	18	0.46
Gonorrhea	2,294	58.37	<i>HepA</i>	16	0.41
<i>Campy</i>	897	22.82	<i>Listeria</i>	16	0.41
Syphilis	593	15.09	<i>HepC (acute)</i>	15	0.38
HepB (chronic)	535	13.61	<i>Rabies (animal)</i>	13	0.33
Pertussis	411	10.46	<i>WNV</i>	8	0.20
<i>Salmonella</i>	395	10.05	<i>HUS</i>	6	0.15
<i>Giardia</i>	350	8.91			
<i>E. coli</i> (STEC)	183	4.66			
<i>Cryptosporidium</i>	110	2.80			
H. flu	82	2.09			
TB	77	1.96			
<i>Shigella</i>	50	1.27			
CRE	47	1.20			
HepB (acute)	44	1.12			
Lyme	42	1.07			
<i>Legionella</i>	39	0.99			
<i>Vibrio</i>	29	0.74			
<i>Yersinia</i>	19	0.48			

Rates calculated using NCHS population estimates. Data are from Orpheus Reports, and should be considered preliminary. Some conditions may not



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Tom and June working on the population database – where you would find rates. Have decided to use National Center for Health Statistics bridged population estimates not the PSU estimates. Data are from Orpheus and ARE NOT updated on a regular basis. Also some conditions are not statewide reportable. Brief demo of the system. There are some diseases that are in there – use with caution. Contact June if you have questions. These are static rates. You can use this to compare the rates to the state, and your county. Double check rates before releasing to your commissioners or to the media.

We also report data to OPHAT - Michelle asked how these reconcile. Have been imported data a year at a time. Working through the updating process. Heather in Deschutes – updating the county reports. She is using older data from OPHAT but wants to have more current data. OPHAT data is requested in June or July for the next year.

Looking for feedback on these reports. If you want to review these and provide feedback – send June an email – how would this be useful to you.

Highlights from NTM and hepatitis C training – Maureen/Tasha/June – 5 min

June's highlight- do not enter an old onset date, this changes the year the case would be reported. Current county – if you want to run the case changed county list report – when chronic cases moved to your county. DO NOT change the case address, add the person address.

What happens when people move multiple times – back and forth? Click the current county box. When you accept a case that transfers from another county- does it update the current checkbox? Yes.

Non TB mycobacterium– really important to capture dates. Rapid and slow growers, long incubation for many. Capturing the date of diagnosis, onset etc. This helps guide the investigation. Also the wound site is very important. These are important fields.

Upcoming training webinars/other training needs– June – 5 min

Have not forgotten syphilis training – should happen sometime

Are there other training ideas that users have?? Please let June know – new users, case log, outbreaks – etc.

June 3rd – 10:30-11:30 – Lead exposure module

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July 1 – 10:30-11:30 – Coccidioidomycosis	
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Future Meetings: 2nd Thursdays
June 11
July 9