



Public Health Information Management System

SYSTEM UPDATE

JANUARY 2020

January System Update

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Northern Regional Health Authority is now live with the PHIMS CDI Module

On Dec. 9, 2019, the Northern Regional Health Authority (NRHA) went live with the Communicable Disease Investigations (CDI) module of PHIMS for Sexually Transmitted and Blood-Borne Infections and Communicable Diseases, excluding Tuberculosis.

Communicable diseases requiring supplementary information, such as enteric investigations, animal bites and post-exposure investigations continue to be completed on paper forms.

Cases and contacts referred to NRHA are now being processed in PHIMS, including:

- Positive lab results and clinical notifications referred from the Manitoba Health Surveillance Unit to NRHA on or after Dec. 9, 2019
- Lab results, cases or contacts referred from other regions to NRHA on or after Dec. 9, 2019

Referrals from NRHA to other regions using CDI in PHIMS are being done via PHIMS. The NRHA will provide printed copies of the PHIMS reports for regions not using the CDI module.

New Investigation Monthly Report

The MB2703 Monthly Case Review report is now live. It provides a summary of the total number of cases of a disease for the Province and/or by the active primary investigator provider organization. It can be used by both the Regions and Manitoba Health to:

- View the monthly number of cases (over 13 months) and compare current to previous year-to-date totals. This will allow for early analysis of possible trends in disease occurrences.
- Perform monthly case reviews and obtain an overall picture of the number of investigations in a particular timeframe and organization.

New Website Resources

The 5.0 Reports section of the PHIMS Website has a number of new/updated Communicable Disease Report User Guides, including the Investigation Monthly Report.

Tools to support training of the Investigations Module have been added to the Trainers section of the PHIMS Website.

To see the most up to date version of QRCs, User Guides or Training Tools, be sure to check out the website:

<https://phimbsmb.ca/>

For more information, visit:

www.phimbsmb.ca



PHIMS Upgrade

Digital Health is planning to upgrade the PHIMS application in March 2020. The upgrade will make PHIMS easier to use, improve performance and add functionality. This change will affect all PHIMS users to varying degrees, depending on how the application is being used.

Further communications will be sent to inform users of when the upgrade will take place and where to find information on what the changes will be. This information will be provided via video and documentation. The materials are self-directed and are not expected to require classroom training.

Client Merges

There is a new process for submitting client merges. Rather than calling the Digital Health Service Desk and having one of our team send the Client Merge Form to users, the updated form is now on the website for users to complete and submit to Service Desk.

The process will also include a new final step, asking users to review and update the record after the merge is completed; this is to ensure the go-forward record has accurate and relevant information. The PHIMS Support Team is not in the same position to validate the clinical information in the record as those working with clients, so the form provides users with some direction to support the validation and reconciliation after the merge.

The form can be found in QRC 1.0c on the PHIMS Website:

<https://phimsmb.ca/resources/training-support-tools/#16-1-0-managing-client-records>

Inventory: Updates and Reminders

New Catalogue Item:

EngerixB (20mcg PF-syr) - 1 (1715119) – 1/box. EngerixB was previously available in a 1.0 ml vial, but now comes in a pre-filled syringe. The previous catalogue number (1715022) has been inactivated. Users will automatically be directed to the new catalogue item, or they can use catalogue item code of 1715119 to be brought directly to the EngerixB 20mcg PF-syringe product.

Ordering Naloxone Kits:

There is a new supplier for the assembly of take-home Naloxone Kits as well as the training supplies. As a result, the format of the training kits has changed. Training kits are now provided in single packages instead of packs of 5, so when creating a requisition, it is no longer required to order multiples of 5.

NEW: when ordering Naloxone kits (1715081), the training kits will also have to be added to the requisition (1715120). For every (1) take home Naloxone kit ordered, (1) training kit must also be ordered, unless it is not required. When ordering Naloxone Kits, a separate requisition MUST be created; they cannot be added to vaccine orders.

For more information, visit:

www.phimsmb.ca



Authorized Account Sponsors (AAS) & Authorized Account Requestors (AAR)

As part of the annual review of user accounts, emails are being sent to confirm your PHIMS user list, including an updated list of AASs and AARs. Please respond quickly to avoid any staff losing their access. Also, anyone who has not logged into PHIMS in the last 13 months will have their accounts automatically disabled.

If you are an AAS (Director) or AAR (Manager or delegate), here is a reminder of your responsibilities:

<https://phimsmb.ca/getting-access/>

Privacy Reminders

Authorized users may only access PHIMS:

- To provide health care or for arranging for the provision of health care;
- For administration responsibilities and duties;
- To generate Standard Reports as prescribed in the Report User Guides;
- To analyze surveillance data to inform timely public health action and response;
- To fulfill responsibilities and duties under *The Public Health Act*.

PHIMS Authorized Users are required by law to keep confidential all of the information accessed in PHIMS and to comply with their employer's security policies and procedures.

PHIMS Authorized Users must not:

- Access information out of curiosity, or for personal use;
- Look at their own electronic record;
- Look at the electronic record of a friend, colleague, relative, family member or any other individual unless the Authorized user is in a professional care relationship with them.

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