

# Manitoba Public Health Information Management System

## Report User Guide

**MB2709B**

**Disease Count by Investigator Organization**

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### Definitions for Report User Guides:

- a. "Authorized Organization" means an organization (an RHA, a First Nation, or other organization) with whom Manitoba has entered into an agreement in order to facilitate access to PHIMS;
- b. "Authorized User" means an employee, agent or contractor of an Authorized Organization (the employer) permitted to access to PHIMS.
- c. "Service Delivery Location" (SDL) means a public health office or a Community Health Centre
- d. "User Role" means the specific role or roles to which an Authorized User is assigned and which prescribes what Information the Authorized User is permitted to access, use and disclose.

Data Type		Explanation
<b>Aggregate</b> , no identifiable data	=	Summary data with no client identifiers
<b>Aggregate</b> , no identifiable data, but possible small population sensitivity or Provider / Org Sensitivity	=	Summary data with no client identifiers However there are sensitivities in the data where small numbers could identify clients, communities or providers
<b>Line Level</b> , <u>Single client</u> identifiable data	=	Includes client identifiers of an individual client
<b>Line level</b> , <u>Multi client</u> identifiable data	=	Includes client identifiers of a list of multiple clients

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## 1. Background:

### 1.1. Data Access Scope for Investigations in PHIMS

Access to individual client case investigations within the investigation module in PHIMS is based on permissions for specific encounter groups (Sexually Transmitted and Blood-borne Infections, Communicable Diseases, and Tuberculosis).

In Manitoba, Authorized Users ("users") of the investigations module have access to all investigations in encounter groups assigned to the logged in user for all PHIMS clients. This was decided as a result of a number of considerations, including:

- Clients can receive services at service delivery locations other than their default public health office, either within or outside their home health region.
- Cases and outbreaks of vaccine preventable diseases also cross regional boundaries and may involve multiple public health provider organizations.
- It is important to be aware of all concurrent or previous investigations for a client within an encounter group, regardless of which organization is responsible for the investigation.

However, for some reports with access to line-level client data, users may only run reports for investigations associated with their organization.

### 1.2. Privacy/Data Sensitivity

This report is set at the Manitoba level. This means that users who have access to this report can view data from all regions. The report only includes summary data counts and does not display personal health information.

Although only summary data is displayed, there may be results displayed with cell counts <5, which may potentially identify individuals, particularly when workgroup detail (may be analogous to public health office catchment area) is displayed. As a result, the number of users who have access to this report is limited to public health users which require access to this information to fulfill their functions under the *Public Health Act*.

### 1.3. Permitted Disclosures

- Disclosure of the aggregate number of investigation based on the investigator org assigned to the case is permitted based on regional or organizational need. The number cannot be disclosed if it is based on a total number less than five (5) and as long as the information provided easily identify individuals.
- Canada's Authorized Users may, in accordance with the terms of the Agreement, disclose the above information to First Nations leadership (Chief, Council, Health Director).

**Note re Permitted Disclosures** - In general, Reports in PHIMS have been designed for internal use for day to day public health and health service delivery, limited to Authorized Users of Authorized Organizations. Authorized Users may only disclose information from the report that relates to their Designated Health Region. For First Nation Authorized Organizations - sites that have entered into a Bridging Service ISA,

an Authorized User (of the Bridging Organization) generating the reports may provide Reports to a FN Authorized User.

#### 1.4. Data Stewardship

Users who have access to this report should have a background in report generation and epidemiology, and are responsible for the following:

- Users may only run this report for their designated Health Region.
- The data is intended to be used by public health providers for case management and surveillance only. No disclosure of information to non-PHIMS users or non-Public Health providers is permitted.
- Users ensure data is managed securely and appropriately according to organizational guidelines especially when the report(s) identifies small populations or providers.

***Users who have access to this report will be subject to PHIMS audits documenting which user generated the report and on what date.***

## 2. Purpose

The purpose of the Disease Count by Investigator Organization report is to summarize the number of cases of a disease grouped by the primary investigator organization. The report can be grouped by disease, stage or disease classification and can optionally include Workgroup information. This report is based on investigation assignment (by primary investigator only), not client address at time of case. For surveillance reports based on client address at time of case, use the Disease Count by Classification (Geography) report.

### 2.1. Populations Included in the Report

All investigations that have been assigned to the primary investigator organization will be included in the counts for this report, regardless of where the client lives.

### 2.2. Recommended Uses for this Report

The Disease Count by Investigator Organization report will be used for:

- Outbreaks: In an outbreak situation – to identify the number of investigations by classification (includes cases and contacts) under investigation in an organization over a particular timeframe.
- To evaluate the classification status of investigations over a particular timeframe (i.e. to look for the number of investigation classifications that have not been confirmed)
- Case reviews: To obtain an overall picture of the number of investigations in a particular timeframe and organization.
- Routine surveillance reports: Can be run on a scheduled basis to provide routine surveillance reports at the regional and provincial level.

## 3. Selecting the Report Parameters

When running a report you must select specific parameters. Some parameters are required and some are optional.

### Selecting the Correct Parameters to get the Needed Output

You can generate this report from the “**Reports**” section in PHIMS.

This is a statistical report under Case: Manitoba Reports

1. Click **Reporting & Analysis > Reports** (LHN) or the **Reporting** tile on the dashboard.
2. Open the Case Report Folder by expanding the collapsible panel
3. Select ***MB2709B-Disease Count by Investigator Organization*** *hyperlink* under “Surveillance Reports”.
4. Enter the **Report Date From** and **To** (required).

5. Select the **Encounter Group(s)** (required). Users will only be able to select the encounter groups accessible by their logged-in role.
6. Enter the **Investigation Status** (Open, Closed and/or Transferred) (required).
7. Select the **Investigation Organization(s)** (required). Users will only be able to select organizations that have active workgroups.

**Note:** This report is based on investigation assignment (by primary investigator only) to an organization, not client address at time of case. Investigations assigned to an organization that have other investigator types (e.g. secondary, coordinator, etc.) will not be included.

8. Select the **Classification** (required). This identifies whether cases and/or contacts and their respective classification types should be included in the extract. For example, surveillance reports for some diseases may only include case – clinically confirmed, lab confirmed. For case management, users of this report may wish to include all classification types.
9. Select the **Encounter Group(s)**. This filter is displayed again to filter the disease list displayed below. Users will only be able to select the encounter groups accessible by their logged-in role. If none are selected, all investigations associated to the encounter group(s) selected in step 5 above will be displayed.

**Note:** If a disease is included in more than one encounter group (e.g. hepatitis B), both encounter groups must be selected if investigations are in both encounter groups. If only one encounter group is selected, only investigations associated to that encounter group will be included in the summary.

10. Select the **Disease(s)**. Diseases displayed will be filtered by the encounter group selected.
11. Select the **Group by**. This will identify the level of detail displayed in the report. The default is by "**Disease**".
  - "**Disease**" will display a count for all classification types for the disease. Note that if cases and contacts are selected for classification, both cases and contacts will be included in the count.
  - "**Classification**" will display a count by each classification type for each organization and disease.
  - "**Stage**" will display a count by stage (if recorded) for each disease. All classification types selected in the report are included in the stage summary count.

12. Select the **Show Workgroup Detail** (required). This will identify an additional level of detail in the report by workgroup associated to the primary investigator. The default is "**No**".

**Note:** If organizations assign investigations to workgroups that are associated to sub-regional catchment areas, this may provide more detail on geographic assignment within a region. However, if organizations have a central investigation team, workgroup detail may not provide any additional information.

13. Click **Generate Report Now**.

### Parameter Definitions:

Parameter Name	Data Type	Description	Validation
Date Reported From	Date	The Manitoba Health Surveillance Unit records reported date as the date that the disease investigation form was received at Manitoba Health Surveillance unit. Public health providers documenting in PHIMS would record reported date as the date the investigation was initiated.	Required
Date Reported To	Date		Required
Encounter Group	Multi-select List	The encounter groups displayed will be filtered based on those accessible by the logger-in user.	Required
Investigation Status	Multi-select List	Open, Closed	Required
Investigator Organization	Multi-select List	Users will only be able to select organizations that have active workgroups.  Note: This report is based on investigation assignment (by primary investigator only) to an organization, not client address at time of case. Investigations assigned to an organization that have other investigator types (e.g. secondary, coordinator, etc.) will not be included.	Required
Classification	Multi-select List	Case – includes all classification types associated with cases (e.g. lab confirmed, clinically confirmed, probable, not a case, etc.)  Contact - includes all classification types associated with contacts (e.g. contact, history of previous disease, person under investigation, not a contact)  Note: Classifications for investigations should be assigned according to the disease protocol.	Required
Disease	Multi-select List	Select disease(s) of interest to be included in the extract.	Optional



Group by	Drop list	<p>This will identify the level of detail displayed in the report. The default is by “<b>Disease</b>”.</p> <ul style="list-style-type: none"> <li>• “<b>Disease</b>” will display a count for all classification types for the disease. Note that if cases and contacts are selected for classification, both cases and contacts will be included in the count.</li> <li>• “<b>Classification</b>” will display a count by each classification type for each organization and disease.</li> <li>• “<b>Stage</b>” will display a count by stage (if recorded) for each disease. All classification types selected in the report are included in the stage summary count.</li> </ul>	Optional
Show Workgroup Detail	Drop list	<p>This will identify an additional level of detail in the report by workgroup associated to the primary investigator. The default is “No”.</p> <p>Note: If organizations assign investigations to workgroups that are associated to sub-regional catchment areas, this may provide more detail on geographic assignment within a region. However, if organizations have a central investigation team, workgroup detail may not provide any additional information.</p>	Required

#### 4. Report Output:

Field Name	Description
<b>Investigator Organization</b>	Primary investigator org assigned to the investigation. Only the primary investigator organization will be included in this report.
<b>Investigator Work Group</b>	Primary investigator workgroup. Only the primary investigator workgroup will be included in this report. Displays investigator workgroup only if Show Workgroup Detail = “yes”
<b>Disease</b>	Investigation disease included in the report.
<b>Disease Classification</b>	Displays classification only if Group by = “Classification”.
<b>Disease Stage</b>	Displays stage of disease (e.g. primary, secondary) only if Group by = “Stage”.
<b>Disease Count</b>	Summary count based on report parameters.

#### 5. Report is assigned to the following User Roles:

- MB CDI EPI ANALYST
- MB CDI MEDICAL OFFICER
- MB CDI PUBLIC HEALTH NURSE MANAGER
- MB CDI PUBLIC HEALTH COORDINATOR

## 6. Report Description

- Report Output: The report will be generated in Microsoft Excel.
- Data Source: Data from the PHIMS Replicated Database, updated every five minutes.