

Manitoba Public Health Information Management System

Report User Guide

MB2709A

Disease Count by Classification (Geography)

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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
Aggregate , no identifiable data	=	Summary data with no client identifiers
Aggregate , 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
Line Level , <u>Single client</u> identifiable data	=	Includes client identifiers of an individual client
Line level , <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 Panorama

Access to individual client case investigations within the investigation module in Panorama 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 role of the logged in user for all Panorama 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 logged in 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 client SDL detail (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 number of cases over a specified period of time by service delivery location level (public health office catchment) 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.
- Bridging Services providers may, in accordance with the terms of the Agreement, disclose the above information to First Nations leadership (Chief, Council, Health Director).
- If reporting by Service Delivery Location (SDL)*, Authorized Users should only include those SDLs for which their Authorized Organization is responsible.

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-Panorama 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 Classification (Geography) report is to summarize the number of cases of a disease grouped by the client's geographical region. The geographical region is determined using the client's address at time of case and the postal code lookup functionality is used to default the client's SDL. The report can be grouped by disease, stage or disease classification and can optionally include SDL information.

2.1. Populations Included in the Report

All investigations that have been assigned to the selected organization based on the client's address at time of case will be included in the counts for this report.

2.2. Recommended Uses for this Report

The Disease Count by Classification (Geography) report will be used for:

- **Outbreaks:** In an outbreak situation – to identify the number of investigations by classification (includes cases and contacts) in a geographical area over a particular timeframe.
- **Surveillance/case reviews:** To obtain an overall picture of the number of investigations within a particular timeframe and region. Can be run on a scheduled basis to provide routine surveillance reports at the regional and provincial level.

This report may be particularly helpful for more detailed geographical surveillance when investigations are managed centrally in organizations (where the workgroup detail in the MB2709B-Disease Count by Investigator Organization does not provide sub-regional analysis).

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: Surveillance Reports.

1. Click **Reporting & Analysis > Reports** (LHN) or on the **Reporting** tile on the dashboard.
2. Open the **Case Report Folder** by expanding the collapsible panel.
3. Select **MB2709A-Disease Count by Classification (Geography)** *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 **Region(s)** (required). Region refers to the geographical region corresponding to the five regional health authorities.

Note: This report is based on client address at time of case. Investigations that are not assigned an address at time of case will be "unspecified". Postal codes that are not mapped (e.g. new, incorrect, or out of province postal codes) will also be assigned as "unspecified".

The geographical region is determined by the PHIMS postal code mapping algorithm that assigns an address to a geographical region, organization, and SDL (analogous to public health office catchment area). Note that the region/provider organization/SDL in this report may differ from the overall client SDL assigned in Panorama if the investigation address is different from the client's registered address, or if the client's SDL has been changed as a result of overlapping postal codes between organizations.

8. Select the **Provider Organization(s)** from the list (required).

Note: Provider Organization differs based on the report context. For this report Provider organization = the parent organization, at the level directly below MB Health, of the Service Delivery Location (i.e. public health office) mapped to the postal code of the address at time of case. The drop list includes all organizations in the level directly below MB Health, although investigations should only be mapped to RHA and FNIH organizations.

Provider organization will distinguish investigations mapped to FNIH public health service delivery locations from those of RHAs. If a user only wishes to view investigations mapped to their organization, they would select an RHA org (e.g. Interlake-Eastern Health or FNIH).

Examples:

Region (Geography)

Winnipeg RHA
 Prairie Mountain RHA
 Prairie Mountain RHA

Provider Organization

Winnipeg Health (including Churchill)
 FNIH
 Prairie Mountain Health

9. 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.
10. 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.

11. Select the **Disease(s)**. Diseases displayed will be filtered by the encounter group selected.
12. 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.
13. Select the **Show SDL Detail** (required). This will identify an additional level of detail in the report by Service Delivery Location (analogous to public health office catchment area) associated to the postal code of the address at time of case. The default is "**No**".
14. Click **Generate Report Now**.

Parameter Definitions:

Parameter Name	Data Type	Description	Validation
Date Reported From	Date		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

Region	Multi-select List	<p>The geographical region corresponding to the five regional health authorities.</p> <p>This report is based on the postal code of the client address at time of case. Investigations that are not assigned an address at time of case will be "unspecified". Postal codes that are not mapped (e.g. new, incorrect, or out of province postal codes) will also be assigned as "unspecified".</p> <p>The geographical region is determined by the Panorama postal code mapping algorithm that assigns an address to a geographical region, organization, and SDL (analogous to public health office catchment area).</p> <p>Note: This report is not based on the investigation assignment to an organization. The region/provider organization/SDL in this report may differ from the overall client SDL assigned in PHIMS if the investigation address is different from their registered address, or the client SDL has been changed as a result of overlapping postal codes between organizations.</p>	Required
Provider Organization	Multi-select List	<p>For this report Provider organization = the parent organization, at the level directly below MB Health, of the Service Delivery Location (i.e. public health office) mapped to the postal code of the address at time of case. The drop list includes all organizations in the level directly below MB Health, although investigations should only be mapped to RHA and FNIH organizations.</p> <p>Provider organization will distinguish investigations mapped to FNIH public health service delivery locations from those of RHA's. If a user only wishes to view investigations mapped to their organization, they would select an RHA org (e.g. Interlake-Eastern Health or FNIH).</p>	Required

Classification	Multi-select List	<p>Case – includes all classification types associated with cases (e.g. lab confirmed, clinically confirmed, probable, not a case, etc.)</p> <p>Contact - includes all classification types associated with contacts (e.g. contact, history of previous disease, person under investigation, not a contact)</p> <p>Note: Classifications for investigations should be assigned according to the disease protocol.</p>	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 “Disease”.</p> <ul style="list-style-type: none"> • “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. 	Optional
Show SDL Detail	Drop list	This will identify an additional level of detail in the report by Service Delivery Location (analogous to public health office catchment area) associated to the postal code of the address at time of case. The default is “No”.	Required

4. Report Output:

Field Name	Description
Region	The geographical region corresponding to the five regional health authorities, based on the postal code of the client address at time of case, as documented in the investigation.
Provider Organization	The parent organization, at the level directly below MB Health, of the Service Delivery Location (i.e. public health office) mapped to the postal code of the address at time of case.
Client SDL at Time of Case	The Service Delivery Location (analogous to public health office catchment area) associated to the postal code of the address at time of case. Only

	displays if Show SDL Detail = "yes"
Disease	Investigation disease included in the report.
Disease Classification	Displays classification only if Group by = "Classification".
Disease Stage	Displays stage of disease (e.g. primary, secondary) only if Group by = "Stage".
Disease Count	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 Panorama Replicated Database, updated every five minutes.