ANNOUNCEMENT

To Register for the Monthly Disease Surveillance Trainings:

1. Contact your Service Surveillance HUB to receive monthly updates and reminders
2. Log-on or Request log-on ID/password: https://tiny.army.mil/r/zB8A/CME
3. Register at: https://tiny.army.mil/r/7laAB/EpiTechFY16

Confirm attendance:
- Please enter your full name/email into the DCS chat box to the right or email your Service HUB
- You will receive a confirmation email within 48 hours with your attendance record; if you do not receive this email, please contact your Service HUB
Barriers and Practical Solutions to Reporting

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Navy and Marine Corps Public Health Center
26 April 2016
Outline

- Tools and Elements of a successful reporting program
- Barriers to Reporting
- Solutions to address those barriers
Key Tools and Elements for Disease Reporting

- Local implementing instruction and supporting SOPs
  - Implementing BUMED INST 6220.12C, AFI 48-105, or AR 40-11
  - Stand alone or overarching preventive medicine instruction
  - Describe roles and responsibilities
  - Focus on disease reporting and everyone’s duties to support it
  - Including labs, clinician offices, and preventive medicine departments (PMDs)
  - Also have SOPs to ensure continuity of operations
Key Tools and Elements for Disease Reporting

- CHCS ad hocs/spool reports/quick keys
  - Allow PMDs to run reports on ER visits, patient admissions, infection control organisms, and lab results
  - Search on lab test names or on ICD-10 codes
  - Many MTFs use these; this is a standard of practice
  - Provides the most timely access to potentially reportable events
  - May not be capturing updated or new lab test names or ICD-10 codes
Key Tools and Elements for Disease Reporting

- DRSi Case Finding (CF) module
  - Module available to DRSi users
  - NMCPHC receives lab results every day from CHCS
    - Filtered for tests that may indicate a reportable event
    - CF record put into DRSi to alert you to a potential lab result
  - Not as timely as CHCS spool reports (2-3 days delay)
  - Does not capture all reportable events
    - Some dx do not have associated lab diagnostics (e.g. heat)
    - Some dx do not have single definitive lab results (e.g. syphilis)
Key Tools and Elements for Disease Reporting

- DOD ESSENCE RME module
  - Assists in finding potentially reportable events
  - Based on ICD-10 codes; visibility of associated lab results
  - Useful for specific diagnoses
    - Be wary of miscoding (e.g. vaccine preventable diseases)
    - Some diagnoses are coded as symptom rather than the disease
Barriers to Reporting

- Providers do not report
- CHCS ad hocs/spool reports do not capture everything
- Laboratory tests are sent out for testing (mail outs)
- Staff turnover
- How do I know if my reporting needs to be improved
- Getting a DRSi account is too hard
- Lack of Command Leadership Support
...and Some Practical Solutions
What can I do when providers don’t report?

- Use CHCS ad hoc/spool reports regularly
- Encourage your lab to report/notify PM
- Review sick call logs and lab results
- Command disease reporting instruction = provider reporting
- Use the DRSi Case Finding module and the ESSENCE RME module
- Develop a targeted provider outreach and education strategy
  - One-on-one
  - Group (e.g. AF monthly ProStaff meetings)
- Hang up list of reportable events in provider offices
- Communicate with your PHEO
What can I do when CHCS ad hoc/spool reports do not capture everything or if I am not allowed access

- Contact your supporting regional Medical Center for consultation on updating the ad hoc code
- Visit the CHCS support staff at your local MTF
- Sample CHCS codes (AF MTFs): https://bdqas.afms.mil/data_metrics/
  - Along the left hand side, under “Online Help Documents”, select “CHCS Ad Hoc Samples”
- CHCS Ad Hoc on line classes: http://jko.jten.mil
  - Geared towards IT personnel
- Use DRSi Case Finding module
- Use ESSENCE RME module
What can I do when lab tests are sent out as mail-outs?

- Visit your lab
  - Know what is tested in-house
  - Know what is sent out
- Work with your lab to ensure return test results are seen in CHCS ad hoc/spool reports and DRSi case finding module
- Use AHLTA to gather information for the Medical Event Report
What can I do when there is staff turnover and everyone is new?

- Contact previous staff members and interview them
- Visit your lab
  - Know what is tested in house
  - Know what is sent out
- For lab mail-outs work out who will take the responsibility for reporting
- Get access to CHCS ad hoc/spool reports and assess them
- Know your population
  - How they get their healthcare
- Work with op units to identify who will take responsibility for reporting
- Assess how well you are finding your cases
What can I do when there is staff turnover and everyone is new?

- Establish SOPs that are cited by a command instruction
- Know the reporting requirements and processes
  - Navy: NMCPHC Medical Event Reporting webpage: [http://go.usa.gov/3KdE5](http://go.usa.gov/3KdE5)
  - Army: [http://phc.amedd.army.mil/topics/healthsurv/de/Pages/default.aspx](http://phc.amedd.army.mil/topics/healthsurv/de/Pages/default.aspx)
- Conduct regular training
- Contact your reach back support with any unanswered questions
How do I know if my reporting needs to be improved?

- Conduct quick periodic assessments
  - How well you are finding your cases
- Use tools like DRSi CF module to find missed reportable events
- Metrics Reports:
  - Navy MTFs: NMCPHC Quarterly MTF Case Finding Report provides your % completeness of reporting
  - Air Force MTFs: USAFSAM is working to create a completeness reporting report and will be working directly with MAJCOMs
  - Army MTFs: Army Public Health Management System contains metrics for timeliness of DRSi reporting; completeness metrics are conducted by APHC
- Conduct a program assessment based on the command reporting instruction
How can I get a DRSi account easily and quickly?

- Fill out the SAAR form (one-pager)
- Have your supervisor digitally sign the SAAR form
- Submit the form to the DRSi HelpDesk
  - via email, follow-up with phone call given email receipt issues
  - via AMRDEC: https://safe.amrdec.army.mil
  - Do not send form encrypted (since SSN is not required)
- Most accounts are granted within hours if it’s a working day
- If you do not get a response from the DRSi HelpDesk within two days, call them
How can I get the support of my command leadership?

- Establish a command reporting instruction
- Utilize a formal process to conduct an assessment
  - The Joint Commission accreditation
  - Lean six sigma
  - Command assessment program
- Service metric reports
- Contact your reach back support for advice and assistance
  - NEPMU
  - APHC
  - USAFSAM
HOW TO GET HELP
Contact your DRSi Helpdesk for questions on DRSi Access and Use

- Navy and Coast Guard DRSi users:
  - Phone: 757-953-0954
  - E-mail: usn.hampton-roads.navmcpubhlthcenpors.list.nmcphc-ndrs@mail.mil

- Army DRSi users:
  - Phone: 410-417-2377
  - Email: usarmy.apg.medcom-aphc.mbx.disease-epidemiologyprogram13@mail.mil

- Air Force DRSi users:
  - Email for questions: afdrsi@us.af.mil
  - Email for DRSi account access: usn.hampton-roads.navmcpubhlthcenpors.list.nmcphc-ndrs@mail.mil
  - Phone for DRSi account access: 757-953-0954
Contact your Service Surveillance hub for Guidance and Consultation on Reporting

- **Army:** APHC – Disease Epidemiology Program
  Aberdeen Proving Ground – MD
  Comm: (410) 436-7605  DSN: 584-7605  
  usarmy.apg.medcom-aphc.mbx.disease-epidemiologyprogram13@mail.mil

- **Navy:** Contact your cognizant NEPMU
  NEPMU2:  COMM: (757) 950-6600; DSN: (312) 377-6600
  Email: usn.hampton-roads.navhospporsva.list.nepmu2norfolk_threatassess@mail.mil
  NEPMU5: COMM: (619) 556-7070; DSN (312) 526-7070
  Email: usn.san-diego.navenpyntmedusixhi.list.nepmu5-health-surveillance@mail.mil
  NEPMU6: COMM: (808) 471-0237; DSN: (315) 471-0237
  Email: usn.jbphh.navenpyntmedusixhi.list.nepmu6@mail.mil
  Email: NEPMU7@eu.navy.mil

- **Air Force:** Contact your MAJCOM PH or USAFSAM/PHR
  USAFSAM / PHR / Epidemiology Consult Service
  Wright-Patterson AFB, Ohio
  Comm: (937) 938-3207  DSN: 798-3207
  usafsam.phreiservic@us.af.mil
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