Completed by: Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Agency \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**2023-2024 Epi Work Plan: Enhanced Analysis**

**Task 1: Timeliness of Data**

Using the MDSS Administrative Reports function under the Administration Tab, complete the table below for your local health jurisdiction with data from the past three cycles using the **foodborne** disease group and answer the questions below.*Note: Only MDSS Administrators have access to administrative reports.*

|  |  |  |
| --- | --- | --- |
| **Disease Group** | **Median Days from Referral to Completion** | **Maximum Days from Referral to Completion** |
| 07/01/2021 to 06/30/2022 |  |  |
| 07/01/2022 to 06/30/2023 |  |  |
| 07/01/2023 to 06/30/2024 |  |  |

1. In the past three years has the number of **median** days from referral to completion increased, decreased, or stayed about the same?
2. Has your jurisdiction reviewed timeliness of case completion for quality improvement purposes? YES NO

**Task 2: Completeness of Data**

Use the New Search function in the Case Investigation Tab to export data and answer the questions below.

**Search Criteria:**

Tip: Use the Ctrl button on your keyboard to multi-select

Case Status: Confirmed **and** Probable

Investigation Status: Completed **and** Completed – Follow Up

Reportable Disease Group: Foodborne

Referral Date: 07/01/2023 to 06/30/2024

Geographic Criteria: Your Local Health Jurisdiction

Click Search

After the list of cases appears, click Export (standard export without labs) to open in Excel



*For guidance on sorting excel data, refer to supplemental guidance document or contact your regional epidemiologist.*

1. Total number of cases in your jurisdiction? \_\_\_\_\_\_\_\_\_\_
2. How many cases were missing onset date? \_\_\_\_\_\_\_\_\_\_
3. How many cases were missing worksites/school information (i.e., worksite/school field is blank)? \_\_\_\_\_\_\_\_\_\_

**Task 3: Disease Specific Search**

Use the ‘Disease Specific Search’ to answer the following questions for **Campylobacter**. *If needed, a Disease Specific Search Tip Sheet is included in the supplemental guidance.*

**Search parameters:**

Referral Date: 07/01/2023 to 06/30/2024

Investigation Status: Completed **and** Completed-Follow-up

Case Status: Confirmed **and** Probable

County: your jurisdiction (for district health departments, select all counties within your jurisdiction using the Ctrl key to multi-select)

Click Submit Query

After the list of cases appears, click Export

When the case report form opens, select the following variables:

* Patient Hospitalized *(under Hospital Information)*
* High Risk Potential *(under Epidemiologic Information)*
* Travel *(under Epidemiologic Information)*
* Have close contact with anyone with diarrhea or vomiting the in seven days before illness began *(under Contact Information)*
* May we have permission to retrieve purchases based on your sopper/member card information *(under Food Purchased Information)*
* Any home-prepared chicken *(under High Risk Food Exposure)*

Click Export

Complete the table below.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | **Total Number of cases** | **Number of cases “Yes”** | **Number of cases “Unknown”** | **Number of cases missing information** |
| How many cases were hospitalized? |  |  |  |  |
| How many cases were considered ‘high risk’? |  |  |  |  |
| How many cases had travel? |  |  |  |  |
| How many cases had close contact with someone with diarrhea or vomiting the in seven days before illness began? |  |  |  |  |
| How many cases gave permission to retrieve purchase information from shopper/member cards? |  |  |  |  |
| How many cases consumed home-prepared chicken? |  |  |  |  |

**Task 4: Disease Rate Comparison**

Use Report 7: Diseases by Geography to compare disease rates in your jurisdiction to the State of Michigan.

**Report Settings:**

Leave aggregate and individual boxes unchecked (default)

Table Type: Cases Per 100,000

Time Period: 07/01/2023 to 06/30/2024

Time Period Based on: Onset Date if available, otherwise Referral Date (default)

Case Status: Confirmed **and** Probable

Investigation Status: Completed **and** Completed-Follow up

Geographic Breakdown: Local Health Jurisdiction

Geographic Area: Statewide

Complete the table below.

|  |  |  |  |
| --- | --- | --- | --- |
| **Disease** | **Your LHJ Rate** | **State Rate (Total Column\*)** | **Your LHJ rate compared to State rate****(Greater Than / Less Than / About the Same)** |
| Salmonellosis |  |  |  |
| Streptococcus pneumoniae, Inv |  |  |  |
| Legionellosis |  |  |  |
| Chlamydia |  |  |  |
| Gonorrhea |  |  |  |
| Chickenpox |  |  |  |
| Lyme Disease |  |  |  |
| Hepatitis C, Chronic |  |  |  |

\*Do not use the column labeled ‘Statewide’

**Task 5: Disease Trends – Epi Curve**

Use Report 8: Epi Curve to answer the question below. Submit the Epi Curve along with this document.

**Report Settings:**

Leave Aggregate and Individual boxes unchecked *(default)*

Time Period: **07/01/2019 to 06/30/2024**

Select Onset Date if available, otherwise Referral Date

Case Status: Confirmed **and** Probable

Investigation Status: Completed **and** Completed - Follow Up

Geographic Area: Your Local Health Jurisdiction

Time Interval: by Month

Disease Group: VPD

Choose ‘View PDF Report’

**Describe the disease trend over the past 5 years.** *(For example, do trends appear to be seasonal? Are they increasing or decreasing over time? Are they fluctuating?)*

**Task 6: Syndromic Surveillance – EpiPlot**

Use the Michigan Syndromic Surveillance System (MSSS) to create an EpiPlot looking at RSV trends over the past two cycles. Use the parameters below. Submit your chart along with this document.

Resource Type: Chart

Period: Select Custom Dates; Start Date: 07/01/2022; End Date: 06/30/2024

Select ‘Weekly Aggregation’ from drop down below the end date field

Normalize: None

Filter: RSV

*Note: The filter for RSV searches for chief complaints or discharge diagnoses for RSV including: RSV, bronchiolitis, syncytial virus, ICD-10-CM B97.4, J12, J20.5, J21, ICD-9-CM 466.11, 480.1, 079.6, SNOMED codes 55735004, 408684006, 195881003, 57089007, 195739001, 97479005, 195727009, 72204002, 31309002*

Syndrome: All healthcare Visits

Jurisdiction: Your Local Health Jurisdiction (jurisdictions with multiple counties are at the bottom of the list)

Under the Presentation Tab, unselect ‘Transition’ and ‘Alerting’ from the Additional Series options

Click **Create** after selections are made

**Task 7: Outbreak Investigations**

1. How many infectious disease outbreak investigations\* was your jurisdiction involved in (either as lead or supporting role) from **July 1, 2023 to June 30, 2024**? \_\_\_\_\_\_\_\_\_\_

*Report the number of outbreaks, not the number of individual cases associated with outbreaks*

1. How many outbreaks were reported using the MDSS aggregate report form? \_\_\_\_\_\_\_\_\_\_

\*Outbreak investigations may include those due to foodborne illness, waterborne illness, respiratory illness(e.g., COVID-19, influenza), vaccine-preventable illness, norovirus , or other etiologies.

**Tip: Searching for Outbreaks in MDSS**

* Use the New Search function under the Case Investigation Tab to search for cases with outbreak identifiers. Place an asterisk (\*) in the Outbreak field. *Some conditions may have an identifier that starts with ‘SOM’ signifying that the case was reviewed by MDHHS staff; please do not include these in your counts.*

* Use the New Aggregate Search function under the Case Investigation Tab to search for outbreaks entered into the MDSS Aggregate Report Form. Search for reports where ‘Outbreak Y/N’ is ‘Yes’ and set the referral date range from 07/01/2023 to 06/30/2024.

**Task 8: Outbreak Management System (OMS) – Aggregate Monitoring Summary**

Use the Outbreak Management System (OMS) to review a statewide-level Aggregate Monitoring Summary using the parameters below.

In OMS, select Reports from the top menu and Aggregate Monitoring Summary from the left menu

Outbreak Name: Ebola-2022-UGANDA

Leave all other fields as default

Choose “View PDF Report”

1. What MMWR week had the highest number of contacts by start date? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. Which Risk Group had the highest number of contacts?

|  |  |  |  |
| --- | --- | --- | --- |
| * Some
 | * Mid
 | * Low
 | * Zero
 |

1. After reviewing the “Contacts by County” map, how many contacts did your jurisdiction have? Select the appropriate range:

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| * 0
 | * 1-3
 | * 4-9
 | * 10-19
 | * 20-39
 | * 40-69
 | * 70-99
 | * >100
 |

Note: if your jurisdiction has multiple counties, find the county with the highest range and use that to make your selection.