**BP5 2023-24 Epi Work Plan**

**Due: August 5, 2024**

**Introduction**

Epi work plan items are developed in accordance with the Public Health Emergency Preparedness (PHEP) cooperative agreement. This work plan addresses the BP5 Budget Period (July 1, 2023 – June 30, 2024). Specifically, these items are designed to address the priority Resources Elements found in the four Functions of Capability 13: Public Health Surveillance and Epidemiologic Investigation in the [Public Health Emergency Preparedness and Response Capabilities: National Standards for State, Local, Tribal, and Territorial Public Health](https://www.cdc.gov/cpr/readiness/capabilities.htm) document. The four Functions are listed below:

1. Conduct or support public health surveillance

2. Conduct public health and epidemiologic investigations

3. Recommend, monitor, and analyze mitigation actions

4. Improve public health surveillance and epidemiologic investigation systems

The functions are assessed through the following measures:

* **PHEP 13.1**: Proportion of reports of selected reportable diseases received by a public health agency within the awardee-required timeframe.
* **PHEP 13.2**: Proportion of reports of selected reportable diseases for which public health control measure(s) were initiated within the appropriate timeframe.

In addition, items in the work plan address Capability 6: Information Sharing which addresses identification of stakeholders to be incorporated in information flow, development of rules and data elements for sharing and the exchange of information.

Per the PHEP cooperative agreement requirements, these tasks were designed to demonstrate the ability of health jurisdictions to analyze and interpret public health data.

**Instructions:**

* DUE QUARTERLY: Submit the quarterly MDSS user reviews **to your Regional Epidemiologist** in October, January, April, and July.
* Turn in all required documentation **to your Regional Epidemiologist** via email no later than August 5, 2024. Please note that some tasks need to be performed and submitted quarterly. The Enhanced Analysis will be distributed by December 2023. Most Enhanced Analysis tasks cannot be completed until July 1, 2024.
* Regional Epidemiologists are available to answer any work plan questions. **If you experience any difficulty in completing these tasks, please contact your Regional Epidemiologist for assistance.**
* Some tasks are more easily completed by staff familiar with MDSS. **If you anticipate needing assistance from CD/Epi staff in your department to complete work plan requirements, please forward this document to them as soon as possible.**
* Work plan items are recorded as complete or not complete, no specific scores are given.

**Completed by**:

**Name, Title** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Agency** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Tasks**

**Enhanced Analysis:** Complete the Enhanced Analysis form to analyze selected MDSS data

**Documentation**: Completion of the enhanced analysis form ***(form will be distributed in December 2023)***

**Epi-X:** Maintain valid enrollment of at least 2 individuals on Epi-X

**Documentation**: None needed, MDHHS will review Epi-X users

**Enrollment in the MI Emergency Department Syndromic Surveillance System (MSSS):** Maintain valid enrollment of at least one staff member in the MSSS, defined as logging in at least once every 60 days. *NOTE*: *Users are automatically deactivated from the system after 60 days of inactivity.*

**Documentation**: None needed, MDHHS will review MSSS users

**Michigan Disease Surveillance System (MDSS):**

1. Maintain at least 2 MDSS administrators.

**Documentation**: None needed, MDHHS will review user listings

1. Maintain at least one administrator in the Outbreak Management System (OMS).

**Documentation:** None needed, MDHHS will review user listings

1. Quarterly MDSS user reviews
2. Create a list of active MDSS users that includes username, role, job function, program, valid email address and last login date for all MDSS users in the jurisdiction.
3. During each review, deactivate users that no longer need MDSS access. *NOTE: Users are automatically deactivated from the system after 60 days of inactivity. Manual review of users is still necessary – users should be deactivated as soon as they no longer need access so that they do not log in inappropriately.*

***Additional information for this review is provided in the supplemental guidance document.***

**Documentation**: Submit a signed and dated MDSS user list quarterly to your Regional Epidemiologist

**Due Dates**: October 2023, January 2024, April 2024, and July 2024

**Quarterly Case Detail Form Completeness Review:** Review the control measures and the first positive laboratory report fields for **Confirmed, Completed** cases of Shiga toxin-producing *Escherichia coli* (STEC)

***Additional information for this review is provided in the supplemental guidance document.***

**Documentation**: Complete the table below and send to your Regional Epi by August 5, 2024.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **STEC**  Reviewer Name | Recommended Referral Dates | Review Date | # Cases | # Cases Missing Control Measures Start Date | # Cases Missing First Positive Lab Report Date |
| 1. | Jul 1 – Sep 30, 2023 |  |  |  |  |
| 2. | Oct 1 – Dec 31, 2023 |  |  |  |  |
| 3. | Jan 1 – Mar 31, 2024 |  |  |  |  |
| 4. | Apr 1 – Jun 30, 2024 |  |  |  |  |